A Multi-disciplinary, Community-based **Group Intervention for Individuals** with Fibromyalgia: A Pilot Randomized **Controlled Trial**

By Michelle Teo, MD, FRCPC

hen I started my career as a community rheumatologist, I did not see how I could integrate research into my clinical practice. Research requires expertise in a skill set that many of us lack, such as grant writing, ethics applications, statistics; the list goes on. How can the average community rheumatologist expect to be competent in these areas when research is considered an "extra" that we do at the side of our desks in between seeing patients?

If you are a community rheumatologist and see an opportunity to make a positive change through research, you can be successful in obtaining a Canadian Initiative for Outcomes in Rheumatology Care (CIORA) grant. By collaborating with an academic researcher, you create a partnership that allows you to focus your time and energy on your strengths, providing clinical care to patients.

Our team was successful in obtaining a two-year CIORA grant in 2017 for "A Multi-disciplinary, Community-based Group Intervention for Individuals with Fibromyalgia: A Pilot Randomized Controlled Trial." Rheumatologists in underserved communities, such as myself, are frequently unable to see these patients because of our long waitlists. But it does not mean that patients who have fibromyalgia do not deserve appropriate care. Furthermore, given the multitude of health, psychological and societal factors that contribute to fibromyalgia, it is naïve to believe that a rheumatologist can provide the full breadth of treatment or that a patient can access appropriate and integrated resources on his/her own. We developed a 10-week group-based interprofessional integrated care model for patients with a diagnosis of fibromyalgia. The goal was to equip patients



with sustainable and effective disease self-management tools. Health care professionals involved included: a kinesiologist, physiotherapist, mental health therapist, dietitian, social worker and rheumatologist. The study group met twice a week for 60 minutes of exercise and weekly for 60-90 minutes of group education. The results of the study revealed improvements to patient perceived quality of care, daily function and attitudes towards pain. The next step of this work is to show how health care utilization changes when fibromyalgia patients have access to such a program.

Patients living with pain deserve opportunities to empower themselves with knowledge of mind-body awareness and self-care. This study is an example of how successful this approach can be in a limited patient population. I also hope it encourages other community rheumatologists to consider collaborating with researchers to improve the lives of our patients.

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You are invited to submit abstracts for presentation during the 2021 CRA & AHPA **Annual Scientific Meeting!**

Deadline for submissions is October 9, 2020.

Details will be available at asm.rheum.ca.