Title: Adherence to Post-Discharge Home Exercise Programs in Patients Treated for Low Back Pain

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Background & Objectives: Factors influencing a patient's adherence to a Home Exercise Program (HEP) during outpatient physical therapy (PT) has been widely researched. Little is known however, regarding adherence to a HEP post-discharge from outpatient PT. Therefore, our objective was to identify factors related to adherence to HEP post-discharge in patients treated for low back pain (LBP). Patients' feelings regarding their discharge experience and attitudes towards alternative post-discharge options were examined.

Methods: Patients treated for LBP in outpatient PT clinics in VT and discharged between October 2013-March 2015 were recruited. Eligible participants, identified by PT staff, were emailed a link to the study survey which included questions regarding post-discharge adherence to their HEP, HEP development, and alternatives to a HEP.

Results: Of the 43 participants, 41.2% adhered to their physical therapist-prescribed HEP in relation to frequency and 46.2% adhered to their prescribed HEP duration. The highest reported barrier to adherence was limited time (58%). When physical therapists allowed for patient input into the HEP, adherence improved for both frequency (48%) and duration (50%). Forty percent of participants who did not adhere to their HEP reported that they would have engaged in exercise more frequently if provided the option to exercise in a group setting (p<0.05). A significant percentage, 71.4% (p<0.05) reported that they would have adhered to their post-discharge program more frequently if given the option to work with an exercise specialist.

Implications: Continued participation in exercise following outpatient PT is imperative to prevent recurrent episodes, particularly for those treated for LBP. Although limited by a small sample size and lack of patient demographics, it appears adherence to post-discharge HEP may be improved through various strategies. Allowing input from the patient and addressing potential barriers may improve adherence along with opportunities to exercise outside of the home.