

Evidence-Based Outcome-Oriented Pain Management

The U.S. Department of Health and Human Services (HHS) unveiled a National Pain Strategy (NPS) in March 2016 that calls for an “integrated, multimodal and interdisciplinary” approach to treating patients with pain.

Marianjoy’s Comprehensive Pain Management Program is CARF accredited and uniquely suited to provide this care. Visit www.carf.org for more information.



Improve function

3.9	The average Global Rating of Change* exceeds expectations and is 3.9 on a scale of -7 to +7.
77%	Average gains in lifting* ranged from 71 percent to 77 percent improvement.
96%	Ninety-six percent of patients had decreased pain behaviors.* These pain behaviors decreased by an average of 37.5 percent, as measured on the University of Alabama Modified Pain Behavior Scale.
30%	For patients taking opioids***, their mean dosage was decreased by 30 percent as measured by morphine equivalent dosage (MED) without increase in average pain levels for those individuals.
76%	Seventy-six percent of patients rated their ability to manage their pain after the program as good or very good.**
42%	Patients reported a decrease in pain by an average of 42 percent from admission to three months post-discharge.**

*Based on a total of 52 patients

**Three months prior to the program compared to the three months post-program (33 out of 52 patients responded)

***18 patients were taking opiates at admission

Marianjoy Comprehensive Pain Management Program at Oakbrook Terrace

The Marianjoy Comprehensive Pain Management Program is CARF accredited and designed for adults whose pain has persisted beyond the expected duration. This 21-day outpatient program is designed to increase daily function, improve quality of life and teach the use of lifelong pain management skills with decreased reliance on opioids.

Patients attend the program for four to six hours per day and receive physical therapy, physician oversight, psychology, biofeedback, nursing education, spiritual care, and case management.

Program demographics

57 patients completed the Comprehensive Pain Management Program, and 98 percent of those had multiple diagnoses, including:

- Lumbar dysfunction
- Spinal stenosis
- Post lumbar/cervical surgical pain
- Sacroiliac joint dysfunction
- Cervical dysfunction
- Thoracic dysfunction
- Hip, knee, shoulder and hand dysfunction
- Osteoarthritis
- Rheumatoid arthritis
- Fibromyalgia
- Headache
- Headaches after brain injury
- Neuropathic pain
- Chronic radiculopathy
- Complex Regional Pain Syndrome (CRPS)
- Pelvic pain/pelvic floor dysfunction

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