

Background

- Currently I am the sole advanced pain trainee in Wessex Deanery
- 1 CCT with specialist interest in Pain medicine in the last 10+ years

Aim

- To identify and highlight what discouraged/s current Wessex anaesthetic trainees from taking up Advanced Pain Training
- Identify areas that can be modified to boost engagement
- Reach out to prospective trainees with interest
- Identify trainee misconceptions

Method

- A survey was circulated via Wessex trainee WhatsApp group and Wessex Deanery email circular
- requested to grade their accordance (scale strongly disagree – strongly agree [1-5]) to the 10 prepared statements to indicate why they did not or may not consider enrolling in APT
- Trainees were invited to enter comments relating to their rating or other explanations
- The data collected was processed and analysed using the data tool incorporated in the SurveyMonkey app.

Results

- 48 respondents completed the survey
- 15 respondents left comments to further explain their sentiments
- Mean score (range 1-5) calculated. If median = mean score (3.0) = no strong feeling either way.
- Mean <3 = disagreement; mean score >3 = agreement

Don't feel the PAIN

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Significant findings:

EDUCATION/EXPOSURE Q7 – mean 3.33; 54.17% agree or strongly disagree

- hear success stories of chronic pain patients (eg. teaching/ patient videos/ workshops)
- Lack of exposure / experience during training is main factor
- Difficulty getting good quality training in the region.

PATIENT FACTORS Q4 – mean 3.77; 70.83% agree or strongly agree

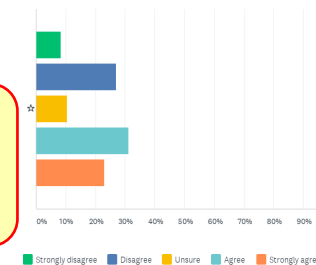
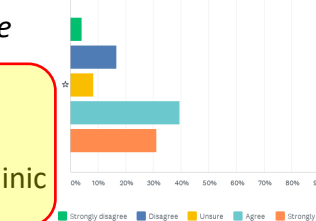
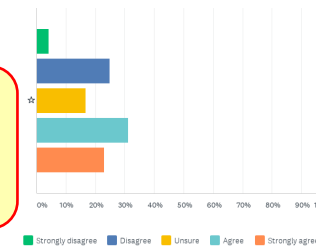
- chronicity of disease & psychological aspect of patients needs
- Not sure I want to take on complex chronic pain where I feel I can't offer a significant change to their pain burden.' OP Clinic

JOB PLAN Q9 – mean 3.44; 54.17% agree or strongly disagree

- Heavy clinic workload
- does not appeal due to the outpatient clinics
- Delivery model: In the community setting, so less support if things go wrong

Statements:

1. Lack of clear outcome measures
 2. More postgraduate exams/qualifications
 3. Perceived lack of evidence based medicine
 4. Complex physiological & psychological needs of chronic pain patients
 5. Don't believe you have the skill set/tools to deal with chronic pain patients
 6. Don't see the benefit of specialist pain medicine
 7. Not enough exposure/experience in pain medicine to make informed decision on a career in pain medicine
 8. Not perceived to be glamorous sub-specialty
 9. Outpatient clinics not intended as part of your future job plan
 10. Lack of role models
- 1=strongly disagree, 2=disagree, 3=unsure, 4=agree, 5=strongly agree



Conclusion

- Advanced Pain training remains undersubscribed in Wessex & wider
- Clearly multifaceted causation for this
- Certain components of the profession will not change (patients/clinic/exams/politics?)
- However:
 - 83% see pain as a beneficial specialty
 - <35% felt they didn't have the skills
 - Exposure to pain medicine needs to be improved within the region
 - More can be done!

What next...?

- Improve clinical exposure
- Regional teaching day
- Increase in-training career advice