

ABOUT THE PRESENTER

DR. MICHAEL J.L. SULLIVAN

Dr. Michael Sullivan is a Professor of Psychology at the Université de Montréal, Scientific Director of the University Centre for Research on Pain and Disability, and Research Director of the Montreal Pain Clinic. Dr. Sullivan has lectured Nationally and Internationally on the social and behavioral determinants of pain-related disability. For the past twenty years he has been working on developing interventions that will prevent disability in individuals suffering from persistent pain conditions. Dr. Sullivan has published more than 75 scientific articles, 8 chapters and 4 books on the topic of psychosocial factors associated with persistent pain.

WORKSHOP FEES

The cost of this 2-day workshop is \$345.00 plus HST, for a Total of: \$396.75

This fee includes the cost of all workshop materials. These materials include 2 books (PGAP Treatment Manual and PGAP Client Workbook) and the PGAP Information Video. Materials will be distributed at the workshop.

Space is limited for this workshop. Registrations will be processed in order in which they are received. Registrations cannot be processed without payment.

Registration Deadline is July 15, 2005. There will be no refunds after this date.

Payment is accepted in the form of cheque, money order, (please make payable to **PDP Program Inc.**) Visa or MasterCard.

Receipts will be issued at the workshop.

Website: **WWW.PDP-PGAP.COM**

E-mail: **INFO@PDP-PGAP.COM**

REGISTRATION (PLEASE PRINT CLEARLY)

PGAP – SEPT 23 & 24, 2005

Name: _____

Company: _____

Profession: _____

Address: _____

Phone: _____

Fax: _____

E-mail: _____

Payment must accompany registration.

Visa MasterCard

CC # _____

Exp. Date: _____

Cardholder Name: _____

Balance Due: \$396.75

Cardholder Signature: _____

Please send completed form and payment to:

PDP Program Inc.
University Centre for
Research on Pain and Disability
5595 Fenwick Street, Suite 314
Halifax, Nova Scotia
Canada
B3H 4M2

Or Fax (902) 421-1292

A Training Workshop for THE PROGRESSIVE GOAL ATTAINMENT PROGRAM



*A New Program for Minimizing
Pain-Related Disability*

Presented by
Dr. Michael J.L. Sullivan



Centre universitaire de recherche
sur la douleur et l'incapacité
University Centre for Research
on Pain and Disability

SEPTEMBER 23 & 24, 2005

HOLDIAY INN ST. JOHN'S

180 PORTUGAL COVE ROAD, ST. JOHN'S, NEWFOUNDLAND

PROGRESSIVE GOAL ATTAINMENT PROGRAM

Millions of Canadians suffer from persistent pain due to injury or illness. Whether addressed in relation to personal, societal or health care costs, persistent pain remains one of the most expensive health problems facing the Canadian population. Although many people with pain conditions will show complete or partial recovery, many will become permanently disabled.

Recent research has supported the view that return to activity is critical to the success of rehabilitation for individuals with persistent pain conditions. Activity involvement has been shown to promote recovery and return to work following occupational injury. Activity involvement has been shown to slow the rate of disease progression for individuals suffering from arthritic conditions. Activity involvement has also been shown to increase quality of life in individuals suffering from a wide range of persistent pain conditions.

Professional guidelines for the management of persistent pain urge clinicians to recommend return to activity as an important strategy for preventing prolonged disability. Unfortunately, simple recommendations to increase activity involvement have not been effective in reducing the degree of disability associated with pain. It has become clear that increasing activity involves a complex interplay among many factors including the individual's physical symptoms, lifestyle, environment,

perceptions and beliefs, and their confidence in their ability to overcome their difficulties.

Over the past decade, the University Centre for Research on Pain and Disability has been involved in the development of treatment programs for minimizing pain-related disability. The Progressive Goal Attainment Program (PGAP) is the first disability prevention program specifically designed to target risk factors for pain and disability. PGAP is a community-based intervention aimed at facilitating return to work following occupational injury. PGAP is a 10-week activity mobilization program that has been tailored to meet the rehabilitation needs of individuals who are struggling to overcome the challenges associated with a wide range of persistent pain conditions. This Program is suitable for clients who are suffering from a persistent pain condition, and for whom pain symptoms are a significant barrier to activity involvement. PGAP differs from traditional pain management programs with its focus on disability reduction as opposed to pain reduction. PGAP has produced positive results for individuals suffering from chronic musculoskeletal conditions, whiplash, fibromyalgia, osteoarthritis and rheumatoid arthritis.

A Community-Based Approach:

In order to increase the accessibility of the Progressive Goal Attainment Program, the intervention was developed as part of a broad community-based approach to disability management. The development of a wide distribution of service providers ensures that clients can be seen in a timely fashion and in a location within their community of residence. Using community-based resources as a vehicle for service delivery, the costs of PGAP are kept at a minimum.

WHO SHOULD ATTEND?

Occupational Health Nurses
Occupational Therapists
Physiotherapists
Physicians
Kinesiologists
Rehabilitation Specialists
Social Workers

WORKSHOP AGENDA

Day 1 (9:00 – 4:30)

- ✦ Introduction and Overview
- ✦ The Problem of Pain-Related Disability
- ✦ Mechanisms of Pain Perception
- ✦ Evidence-Based Practice for Pain-Related Conditions
- ✦ Risk Factors for Chronicity:
 - Medical
 - Psychosocial
 - Organizational
- ✦ Activity Mobilization

Day 2 (9:00 – 4:30)

- ✦ PGAP – A Community-Based Approach to Disability Prevention
- ✦ Screening for Risk Factors
- ✦ Assessment
- ✦ Activity Scheduling
- ✦ Addressing Psychosocial Barriers
- ✦ Therapeutic Return to Work
- ✦ Adherence to Treatment
- ✦ Reporting Practices
- ✦ Building a National Network