

# Role of psychosocial factors on the effect of physical activity on physical function in patients after lumbar spine surgery

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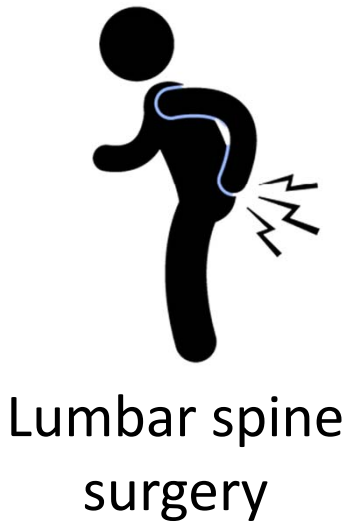
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# Background



Physical activity



Improved Long-term outcomes



Archives of Physical Medicine and Rehabilitation

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In Press, Journal Pre-proof



Original Research

How many steps per day during the early postoperative period is associated with patient-reported outcomes of disability, pain, and opioid use after lumbar spine surgery?

Gilmore et al. *BMC Musculoskeletal Disorders* (2019) 20:418  
<https://doi.org/10.1186/s12891-019-2806-7>

BMC Musculoskeletal Disorders

RESEARCH ARTICLE

Open Access

Predictors of substantial improvement in physical function six months after lumbar surgery: is early post-operative walking important? A prospective cohort study



# Background



Lumbar spine  
surgery



Physical activity



[Observational Study](#) > [Arthritis Care Res \(Hoboken\)](#). 2018 Jul;70(7):1005-1011.  
doi: 10.1002/acr.23448. Epub 2018 May 6.

**Minimum Performance on Clinical Tests of Physical Function to Predict Walking 6,000 Steps/Day in Knee Osteoarthritis: An Observational Study**

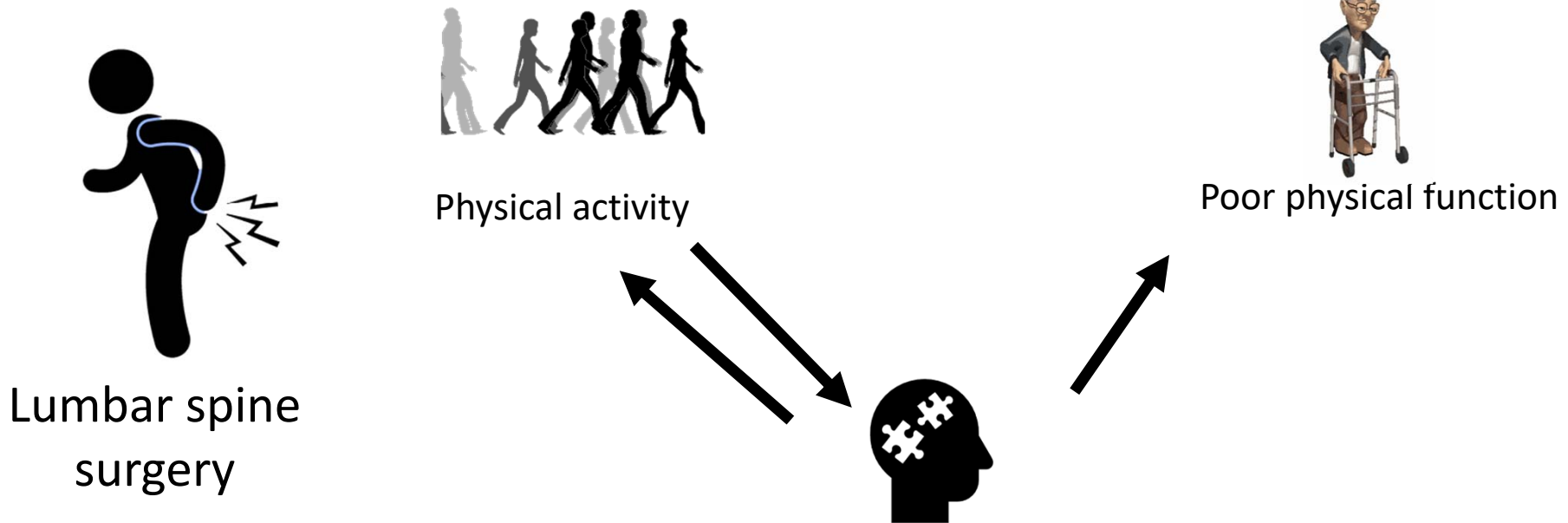


Poor physical function



**Impair the ability to engage in active lifestyle**

# Background



Lumbar spine surgery

Physical activity

Poor physical function

Psychosocial factors

> [Spine J.](#) 2014 May 1;14(5):759-67. doi: 10.1016/j.spinee.2013.06.087. Epub 2013 Nov 6.

Early postoperative fear of movement predicts pain, disability, and physical health six months after spinal surgery for degenerative conditions

# Study objective - Conceptual model of postoperative recovery?



Lumbar spine surgery



Physical activity



Poor physical function



Psychosocial factors

# Study objective - Conceptual model of postoperative recovery?



Lumbar spine surgery

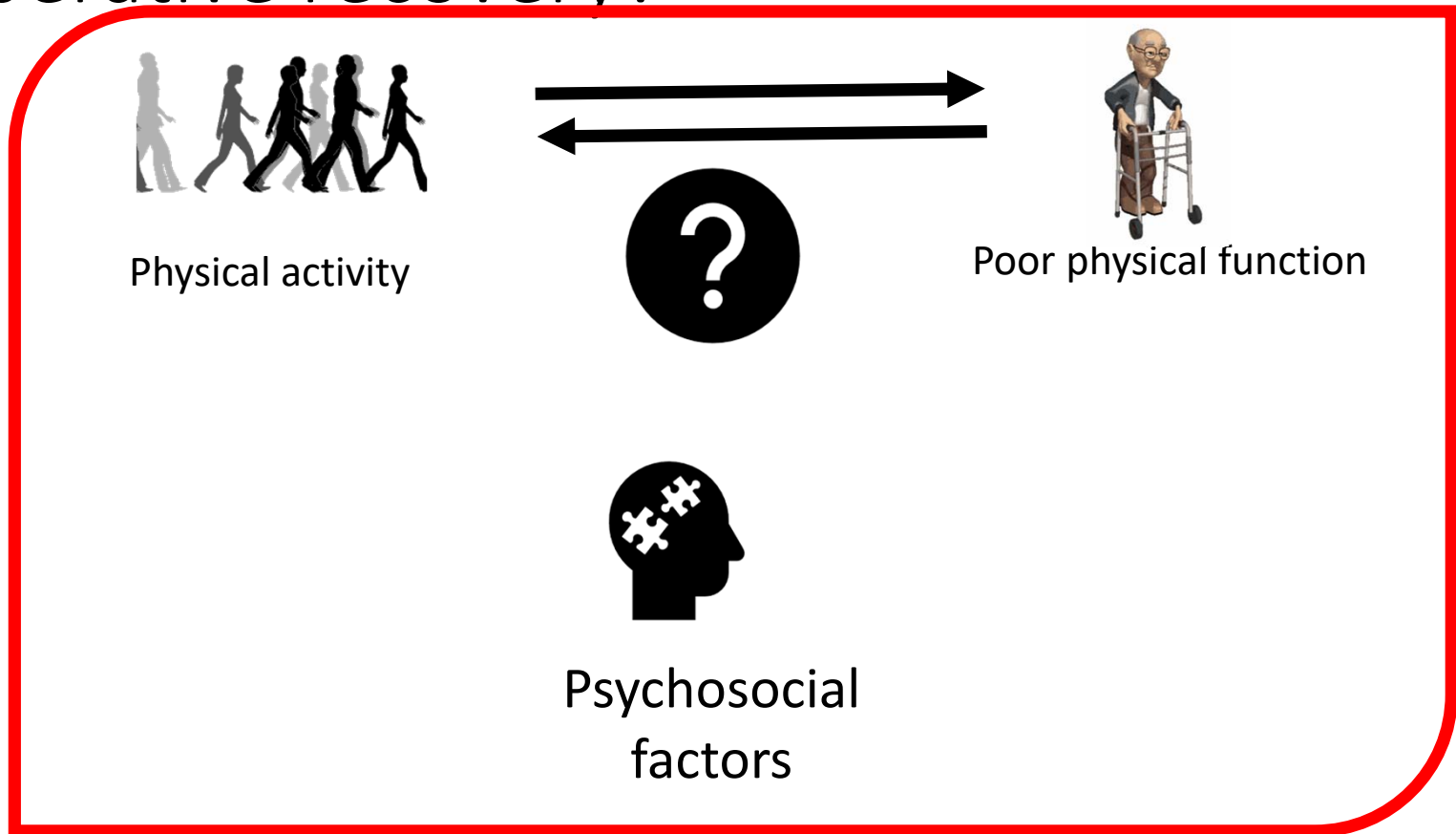
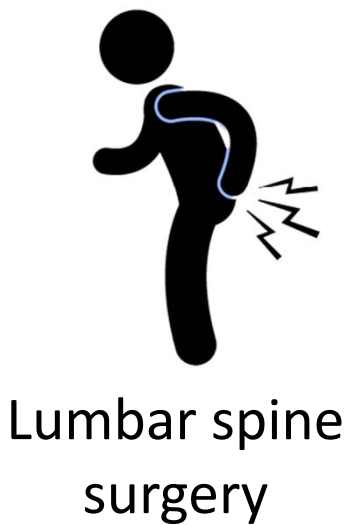


Physical activity



Poor physical function

# Study objective - Conceptual model of postoperative recovery?



# Method



- 248 patients who underwent a laminectomy procedure (with or without fusion) for lumbar degenerative condition

- 2 clinical sites



This study was funded through a Patient-Centered Outcomes Research Institute® (PCORI®) Award (CER-1306-01970)



# Methods



Physical activity



Poor physical function



Psychosocial factors



Actigraph GT3X



Patient-reported outcome measures

Quantified as steps per day

# Methods



Poor physical  
function



Computerized adaptive test  
domain version of Patient-  
Reported Outcomes  
Measurement Information  
System

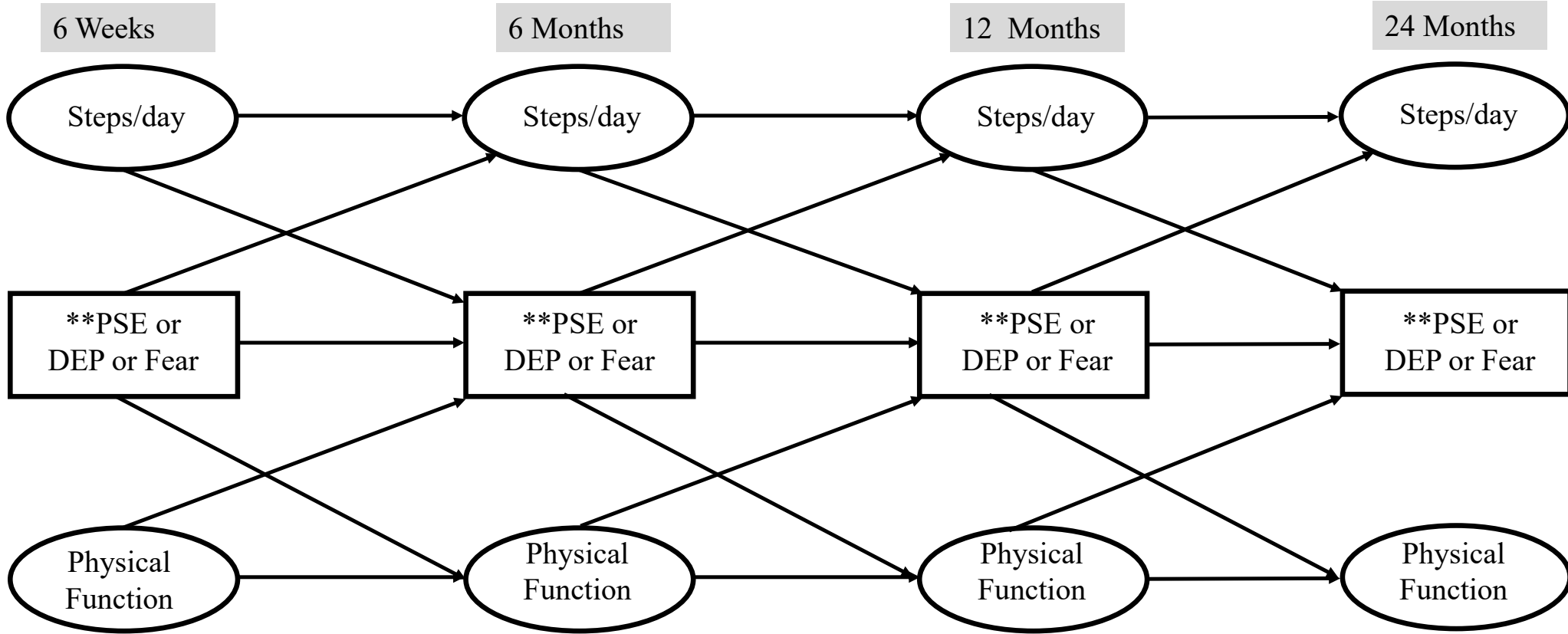
# Methods



## Psychosocial factors

- Pain self-efficacy (PSE) - 10-item Pain Self-Efficacy Questionnaire
- Depression (DEP) -Patient Health Questionnaire-9
- Fear of movement (Fear) - 13-item Tampa Scale for Kinesiophobia

Figure: Structural equation model for postoperative recovery after lumbar spine surgery

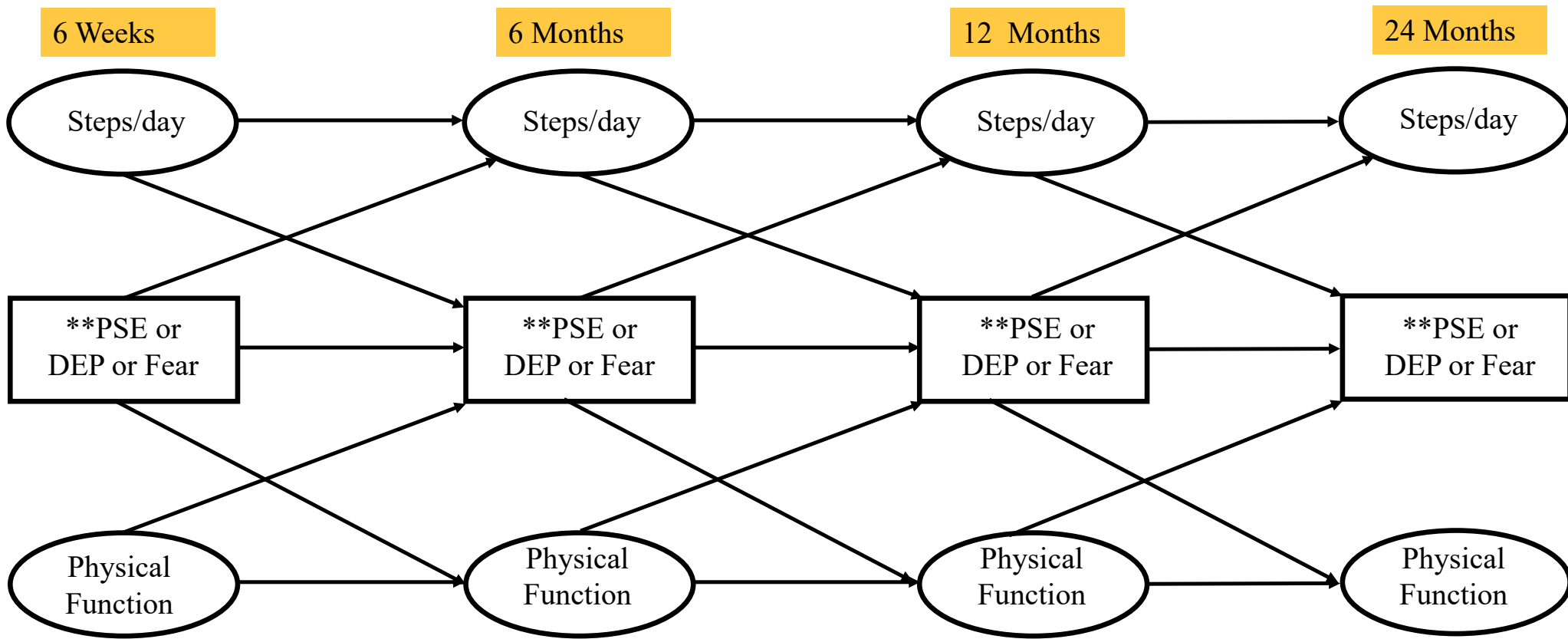


PSE = Pain self-efficacy; Dep = Depressive symptoms;

\*SEM models controlled for age, employment, comorbidities, prior spine surgery, and preoperative self-efficacy, depression, fear of movement, physical function, and back and leg pain;

\*\*PSE, DEP and Fear were explored in separate SEM models

Figure: Structural equation model for postoperative recovery after lumbar spine surgery



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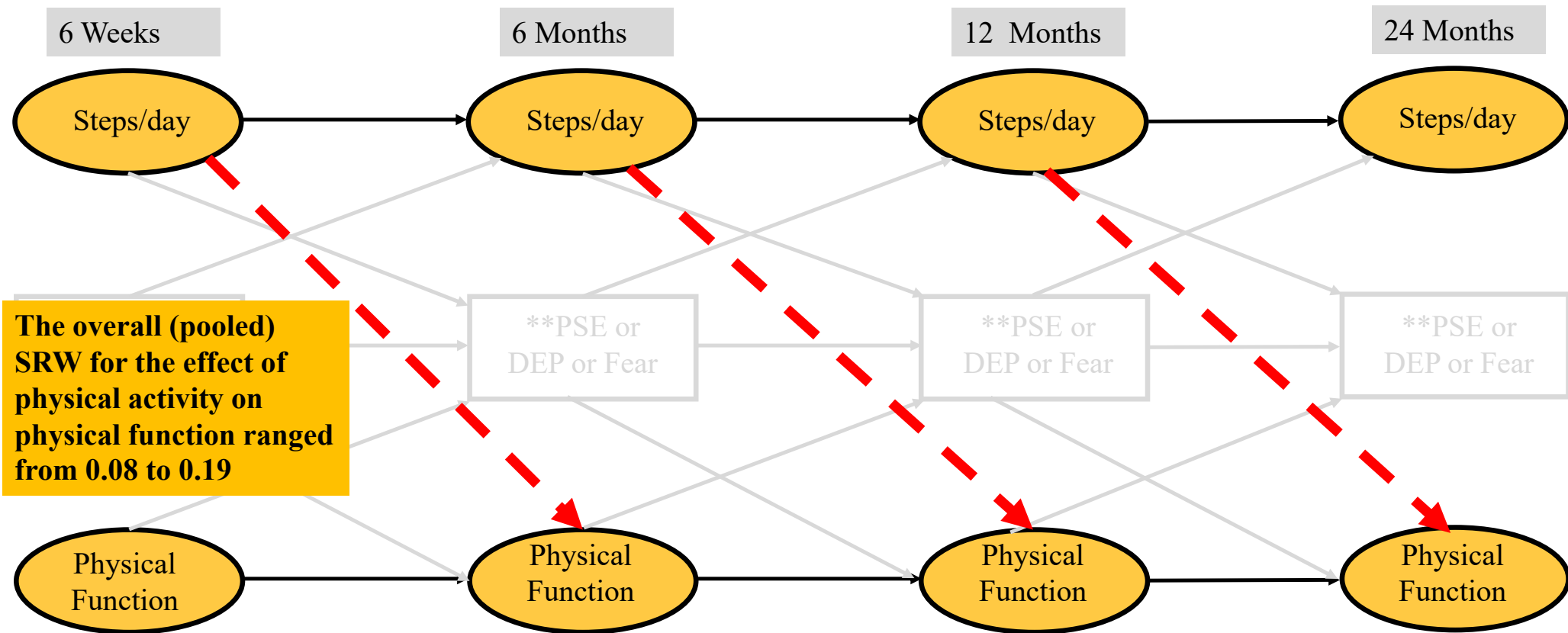
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# Analysis

- Missing data were handled with multiple imputation using predictive mean matching and 5 imputed datasets
- SEM model was conducted on all five imputed datasets
- Each SEM model was tested for model fit
  - All models were stable
- Standardized regression weights (SRW) and p-values were computed for each imputed dataset and pooled estimates were obtained from the five imputed datasets using Rubin's approach

Results: Structural equation model for postoperative recovery after lumbar spine surgery

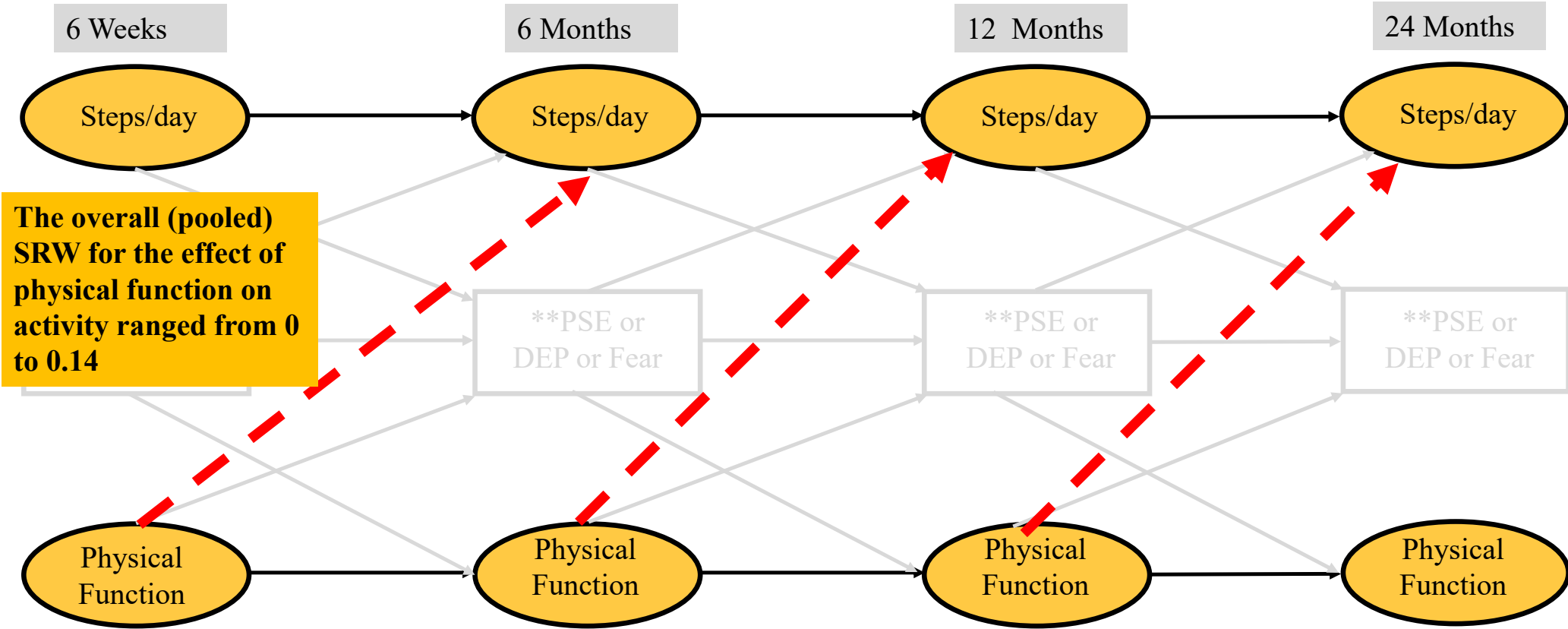


PA = physical activity as measured by accelerometer (average steps per day); PF = Physical function as measured by PROMIS; PSE = Pain self-efficacy; Dep = Depressive symptoms;

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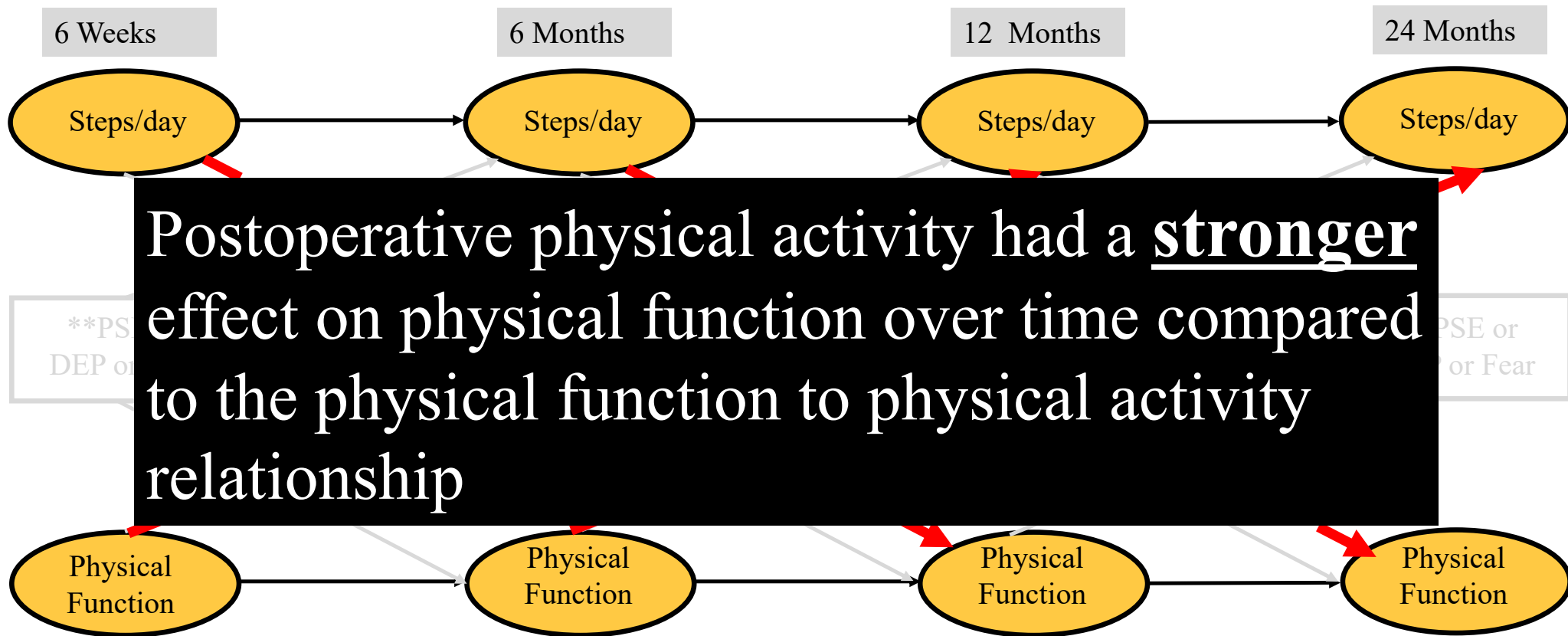
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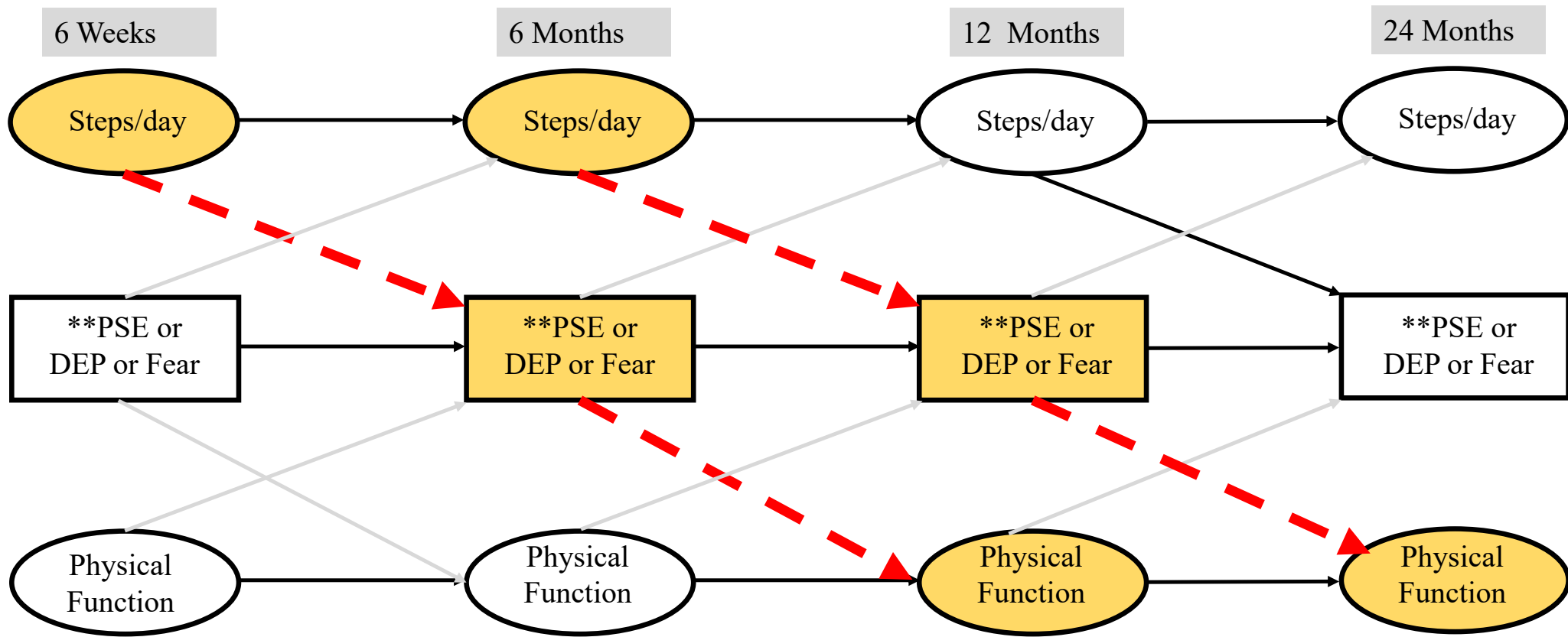


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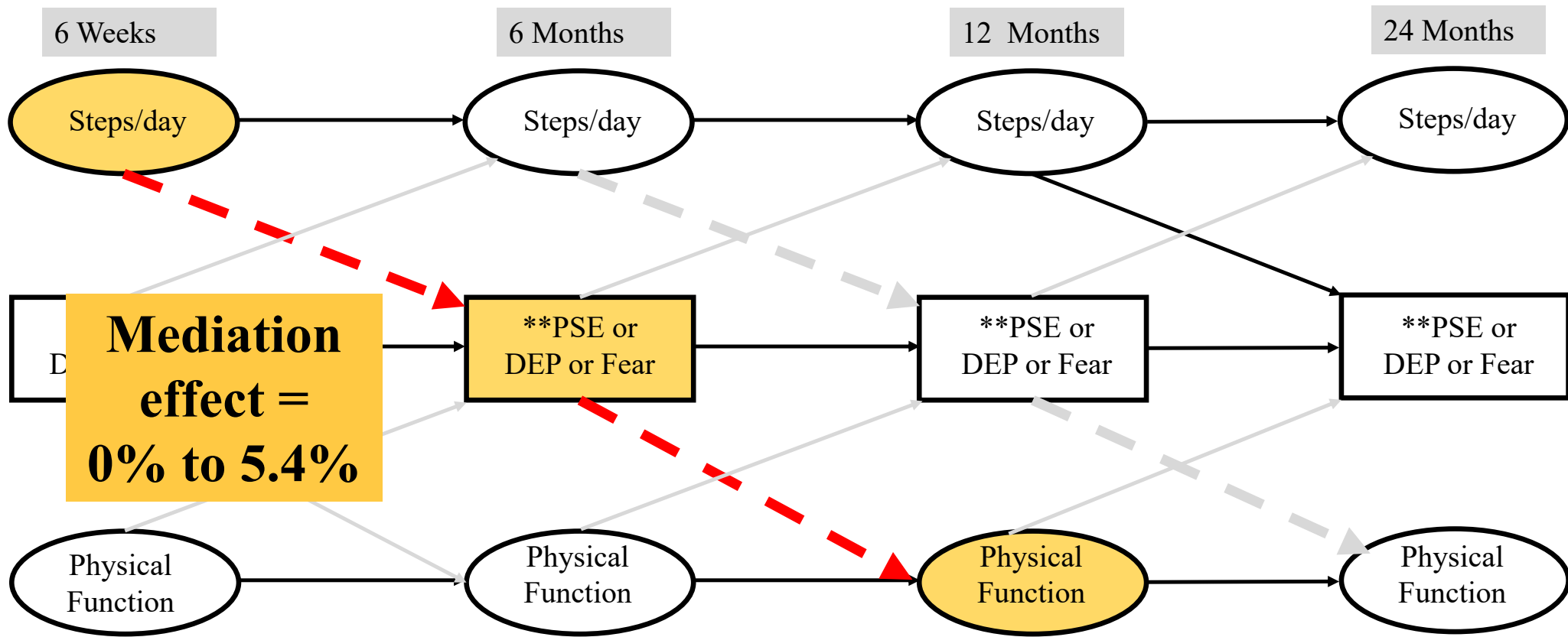
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Mediators	M1	M2	M3	M4	M5	Overall	p-value	Mediation effect
<b>Pain Self-Efficacy (PSE)</b>								
T1 PA → T3 PF	0.28	0.27	0.28	0.30	0.31	0.29	0.0001	0%
T1 PA → T2 PSE	n.s.	n.s.	n.s.	n.s.	n.s.	n.s.	n.s.	
T2 PSE → T3 PF	0.15	0.20	0.12	0.17	0.12	0.15	0.017	
T2 PA → T4 PF	0.24	0.19	0.23	0.25	0.29	0.24	0.0001	0%
T2 PA → T3 PSE	n.s.	n.s.	n.s.	n.s.	n.s.	n.s.	n.s.	
T3 PSE → T4 PF	0.13	0.16	0.14	0.20	0.16	0.15	0.0214	
<b>Depression (Dep)</b>								
T1 PA → T3 PF	0.28	0.26	0.30	0.29	0.29	0.28	0.0001	3.43%
T1 PA → T2 Dep	-0.09	-0.08	-0.09	-0.07	-0.09	-0.08	0.108	
T2 Dep → T3 PF	-0.12	-0.19	-0.12	-0.10	-0.09	-0.12	0.0266	
T2 PA → T4 PF	0.24	0.18	0.24	0.21	0.24	0.22	0.0001	0%
T2 PA → T3 Dep	n.s.	n.s.	n.s.	n.s.	n.s.	n.s.	n.s.	
T3 Dep → T4 PF	n.s.	n.s.	n.s.	n.s.	n.s.	n.s.	n.s.	
<b>Fear of Movement (Fear)</b>								
T1 PA → T3 PF	0.28	0.27	0.28	0.30	0.32	0.29	0.0001	5.38%
T1 PA → T2 Fear	-0.12	-0.14	-0.11	-0.13	-0.13	-0.12	0.0092	
T2 Fear → T3 PF	-0.13	-0.12	-0.11	-0.15	-0.13	-0.13	0.0104	
T2 PA → T4 PF	0.23	0.18	0.23	0.22	0.27	0.22	0.0001	0%
T2 PA → T3 Fear	n.s.	n.s.	n.s.	n.s.	n.s.	n.s.	n.s.	
T3 Fear → T4 PF	n.s.	n.s.	n.s.	n.s.	n.s.	n.s.	n.s.	

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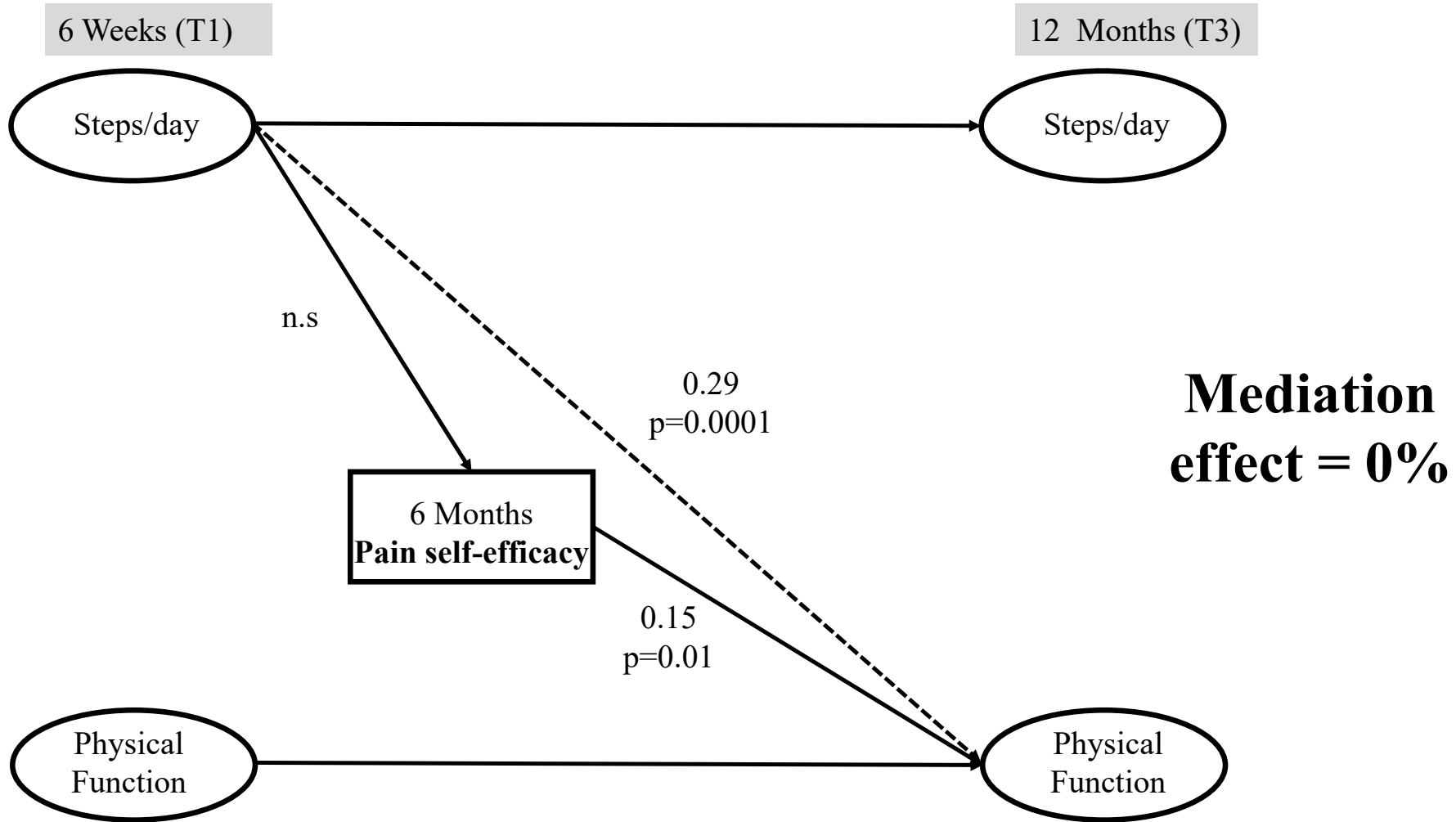


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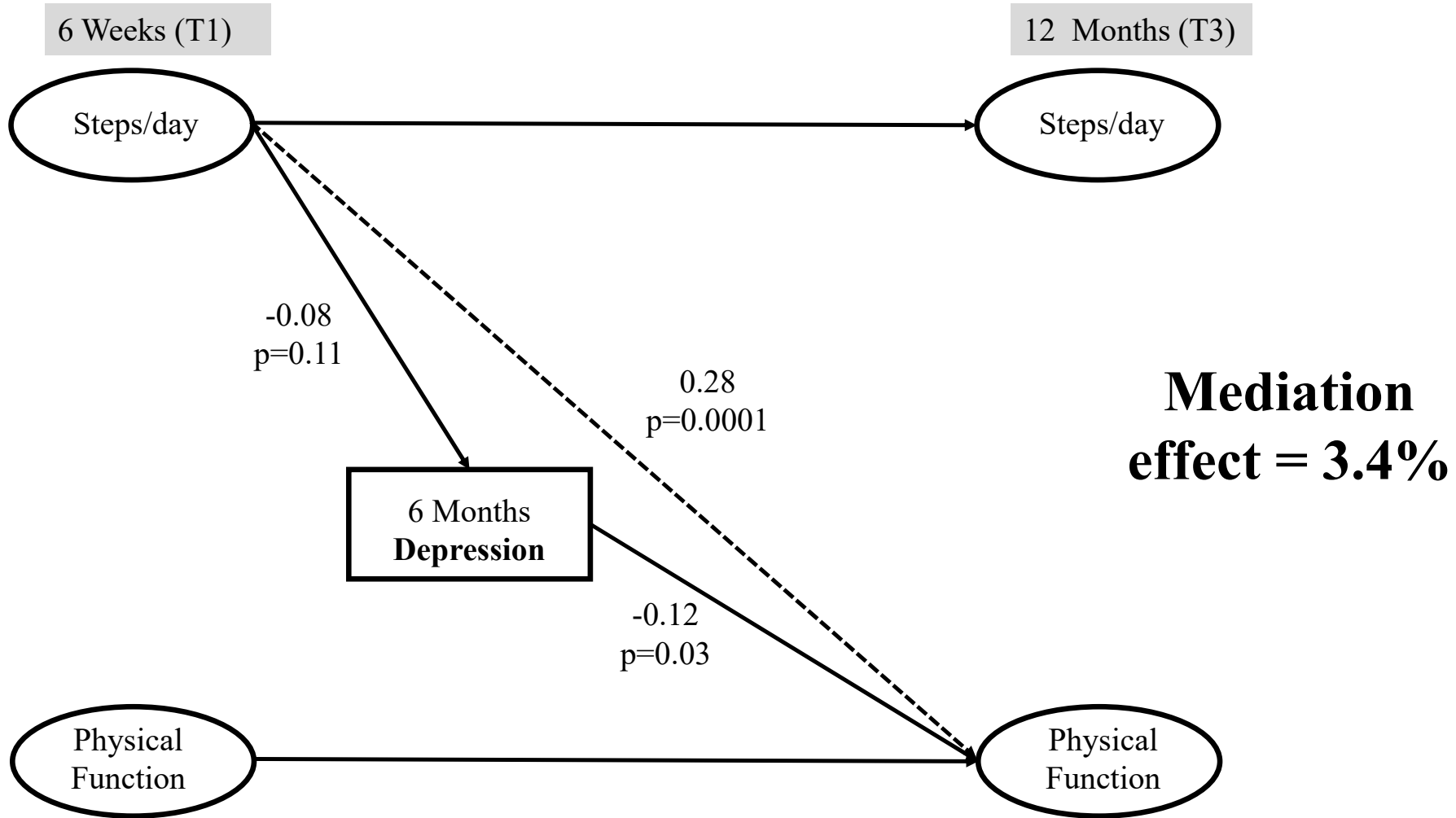
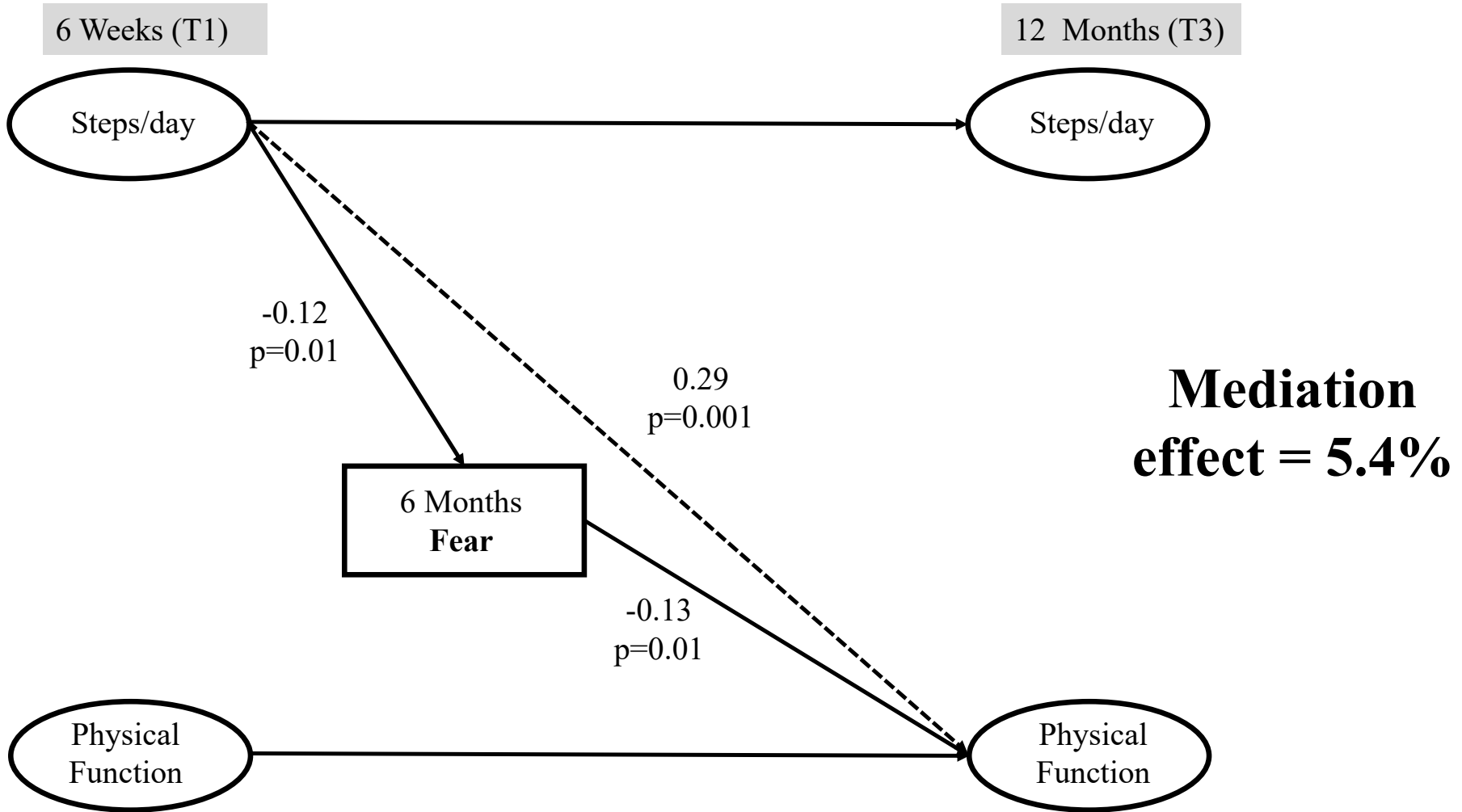
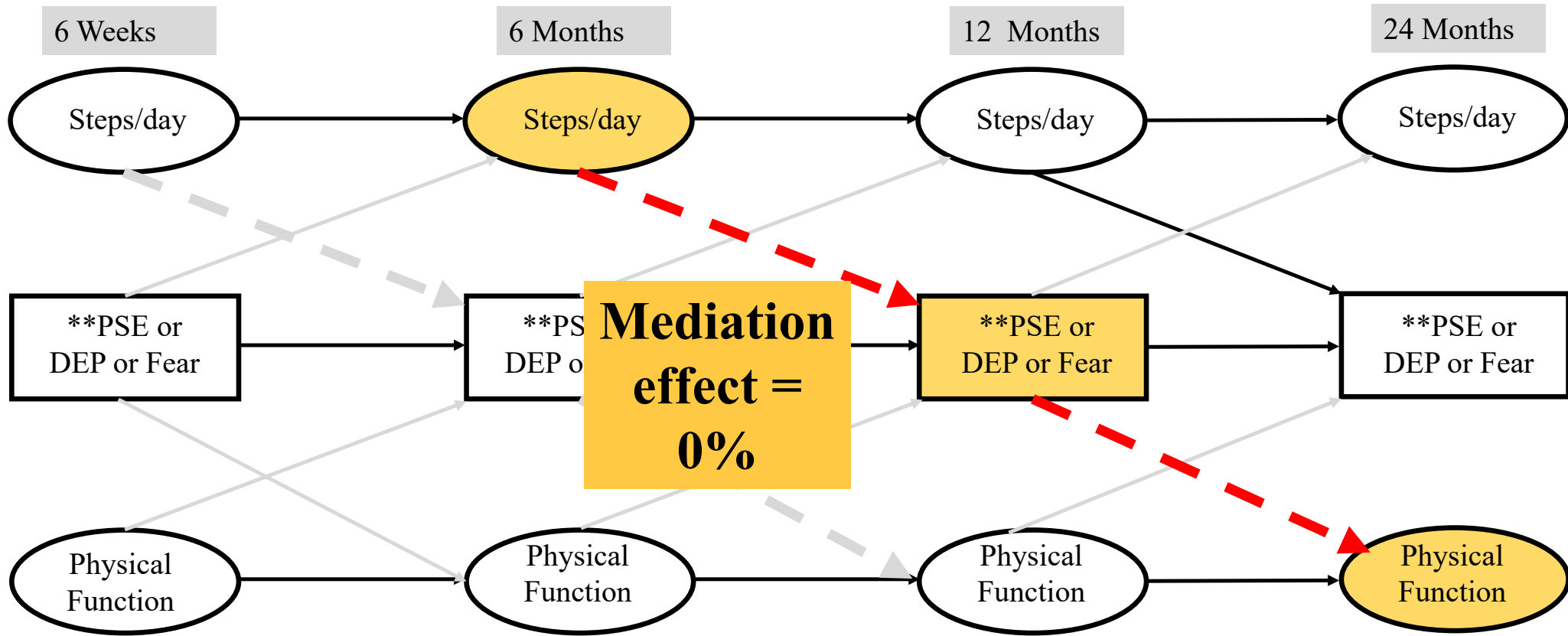


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# Clinical take home messages




Relationship between physical activity and physical function is stronger than the relationship of function to activity



Depression and fear of movement at 6-months mediated 3% to 5 % effect of steps per day at 6-weeks on physical function at 12-month




Future research is needed to examine whether promoting physical activity during the early postoperative period may result in improvement of long-term physical function




Future work is needed to investigate other potential mediating factors such as pain catastrophizing and exercise self-efficacy


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# Thank you



Contact

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