

Women's experiences of coping with chronic widespread pain – a qualitative study

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Conclusion

Women expressed four different ways of coping with CWP.

The coping strategies included two dimensions. One ranged from *actively taking control over the pain*, to *passively following instructions*. The other ranged from *actively continue as usual* by either accepting or ignoring the pain to *passively rest* and being mastered by pain.

Background

Approximately ten percent of the population report chronic widespread pain (CWP), the condition is more common among women than men. For most people, the pain interferes with many aspects of every-day life and implies large consequences.

However, the group reporting CWP is heterogeneous and there is a need for better understanding of the different strategies used for coping with pain in every-day life.

Objectives

The purpose of this study was to describe women's experiences of how to cope with CWP.

Methods

The study had a descriptive design with a qualitative content analysis approach. Individual interviews were conducted with 19 women, 31-66 of age, who had reported CWP in a survey 2016. CWP was defined according to the 1990 ACR criteria for fibromyalgia. To be considered chronic, the pain should have persisted for more than three months during the last 12 months.

A manifest qualitative content analysis was used to analyze the main question "How do you cope with your chronic widespread pain?" The analysis resulted in four categories.

Results

Women described their coping with CWP in four different ways; to take control, to continue as usual, to follow instructions and to rest.

- *To take control* meant to make deliberate decisions to handle everyday day life. It also meant to take care of oneself, to think positive and to exercise at an adequate level.
- *To continue as usual* meant not to listen to body signals and either to ignore or accept the pain.
- *To follow instructions* meant listening to the health professionals and following advices, but without taking any part of the responsibility for the treatment outcome.
- *To rest* meant to perceive an unreasonable need for recovery, to resign and let the pain set the terms for the daily living.

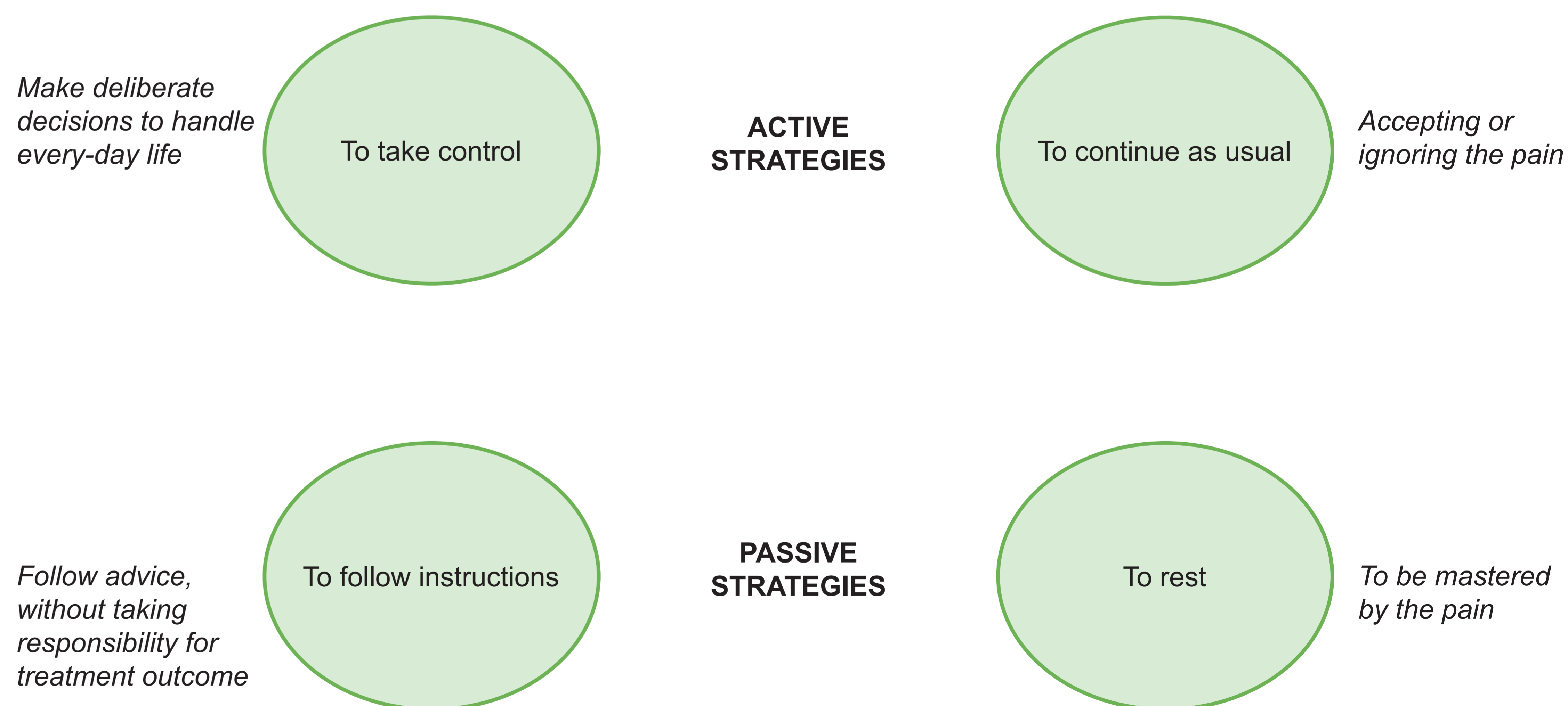
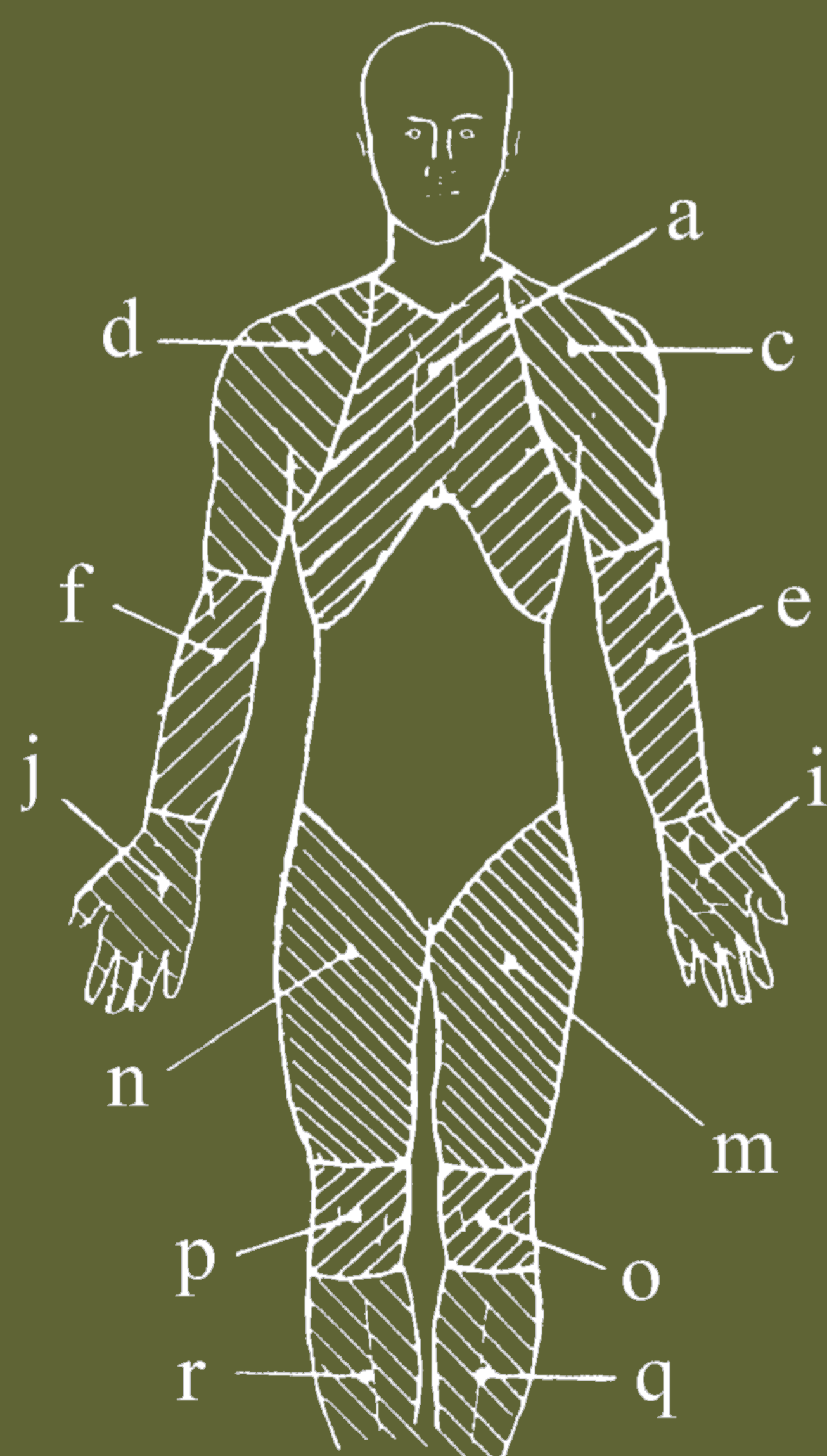


Figure 1. The four different ways of coping with pain described by the study participants, presented by active/passive dimension.



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