

Interceptive autogenic training (IntAT) in chronic pain: results of practical application in the medical setting

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Abstract

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Abstract

Introduction IntAT is a non-suggestive relaxation technique based on attending to physical sensations, i.e. interoception. Individuals with chronic pain often exhibit reduced interoceptive accuracy, negatively correlated with symptom severity. Interoceptive awareness increases vagal function and IntAT improves communication between interoceptive and prefrontal areas, allowing relaxation and increased interoceptive capacity, providing help in the treatment of chronic pain. We present the effectiveness results of this technique on chronic pain.

Methods During an 8-session group course, participants are instructed in the basic AT exercises, which involve attending to bodily sensations. A pre-and post-course validated protocol was administered, including: Brief Pain Inventory-Short Form, SF-36, Hospital Anxiety and Depression Scale (HADS), Multidimensional Assessment of Interoceptive Awareness (MAIA), Distress Thermometer and a Self-Assessment Questionnaire.

Subjects Data from 125 subjects with chronic pain (87 females, 38 males; mean age 49.2, SD 15.8, range 16-82) were analyzed. Two months post-course completion, 85 out of 125 subjects were re-evaluated using paired-sample T-tests.

Results Regarding the intensity of pain reported in the previous week, no significant differences were observed. Quality of life showed significant improvement in the specific pain scale and a decrease in the number of pain zones (from 2.27 to 1.39). Anxiety, depression and total HADS scores significantly decreased. Interoceptive awareness improved significantly. Distress thermometer values indicated a significant improvement approaching the normal threshold value. The self-assessment questionnaire confirmed overall perceived benefits, with 87.5% overall satisfaction with the course, a 44.3% reduction in medication use, increased awareness in 80% of cases, pain decreased in half of the participants.

Conclusions AT can be a valuable tool for improving general well-being and quality of life for individuals with chronic pain, complementing conventional medical and rehabilitation treatments. The presented data support this assertion. The added value of this technique lies in its independent applicability by individuals, thus contributing to their empowerment.

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