How to Get Patients Out of Bed and Back to Their Lives after Transplant: A Motivational Perspective

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- Almost all patients want to feel better.
- What gets in the way?

- Thoughts, feelings, and sensations often warning the patient of danger.
- These automatic, instinctive responses are designed for ancient times.
- Life expectancy was 30 years old.
- Chronic disease was not a concern.

- Instincts (e.g., automatic processes) are designed for acute injury and acute pain.
- What should you do if you have a broken leg?
- Acute pain is a sign you should
- STOP/rest/heal/don't move





 Automatic thoughts, feelings, and sensations are often warning the patient of perceived danger and telling them to stop and to rest.



- How can we help?
- Normalize.
- "Of course your mind is telling you to rest. It's not designed for transplant."
- "What you're experiencing is very common."



- How can we help?
- Validate.
- "I can understand why you're feeling scared/anxious/worried about walking."
- "That makes sense you're in pain and you want to stop."



- Case: Recent transplant patient says he's in too much pain to mobilize.
- Normalize and validate.



- How can we help?
- Help the patient unhook from unhelpful thoughts, feelings and sensations and do what matters.
- "Of course you want to rest and we know that getting moving is critical to your recovery."



Passengers on the bus



Passengers on the bus

- "What are the passengers telling you?"
- "Where will you go if you follow their advice?"
- "Will it be toward what matters or away from what matters?"





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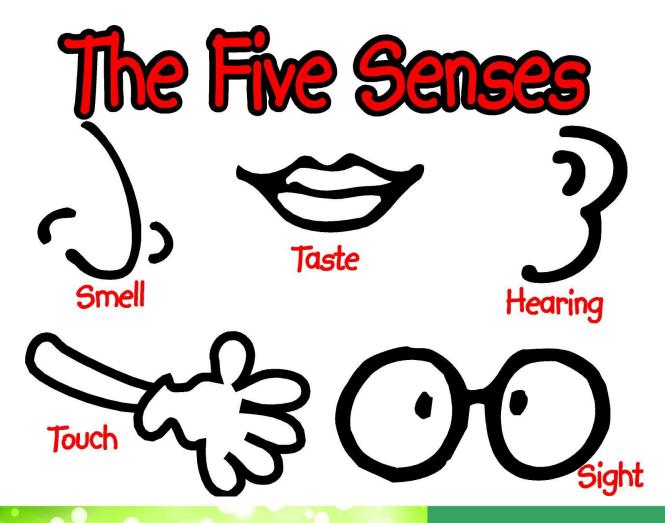
Passengers on the bus

- Kindness and self-compassion.
- "Can we thank the passengers and follow this route to recovery?"
- "Let's thank your mind. It's trying to protect you. It doesn't know there's such a thing as a transplant."



My Thoughts







Can you act differently from your thoughts?

Battery metaphor:



Patient Distress

What to do when a patient discloses feelings of distress:

- 1. Actively listen. Reflect what you have heard.
 - This may be all that is needed
- 2. Drop Anchor exercise (see handout)
- 3. Consult with the patient about a referral
 - "It sounds like these issues are taking a toll on you. I'm concerned about you. How would you feel about talking with someone about these issues?"
 - "I can tell you're really upset. How would you feel about talking to somebody?"





Short term motivation

- Out of bed and getting back to life
- Distress
- Sick
- Almost anyone can do anything for a short period of time

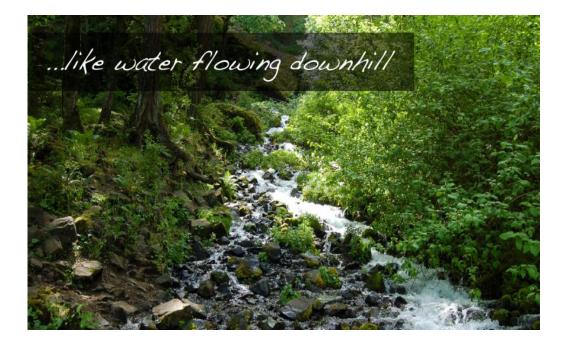
- Potential for trouble
- Getting back to life
- We want patients to think about their chronic condition all the time.
- What do patients want?
- To not think about it at all.
- Desire to be "not sick"

What happens if you don't take your anti-rejection medications?

- Nothing....
- Until you are very sick.

It is a natural process to stop taking medication

over time.



- Cultural understanding of medication
- Breast cancer oral medications
- Adherence rate at 5 years?
- 30%



- Rate of relapse after treatment for alcohol misuse?
- Roughly 50%
- Rate of relapse after transplant?
- Roughly 20-30%
- People go back to living their lives.
- Many people stopped when they were told they would die if they drank.



- Long term motivation is driven by self-identity.
- Connect healthy behaviours to principles/values.

Values

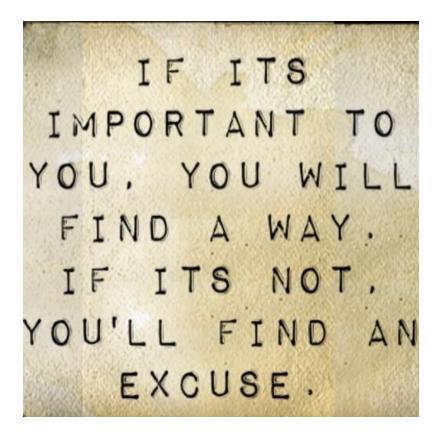
- What is your heart's deepest desire for how you want to behave as a human being?
 - •What kind of person do you want to be?
- •What do you want to stand for?

Values

- •How does doing these health behaviours help you be the person you want to be?
- •Why are you doing this? What's in it for you?



- Why do you want to take care of yourself?
- What will you do with your life when you're healthier?
- How will doing this health behaviour help you be this person?



- Look of reasons that are personal and meaningful.
- Not just areas of life

 (i.e., parenting) but
 ways to be in those
 areas of life (i.e., active, engaged parent).



Values

•How does doing these health behaviours help you be the person you want to be?

•Why are you doing this? What's in it for you?



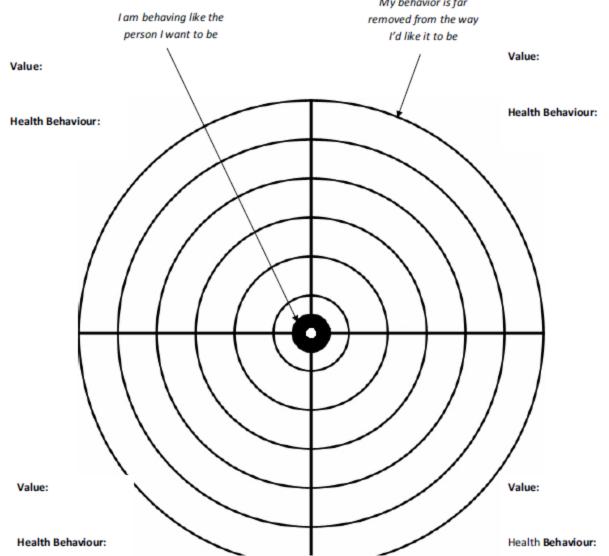
Linking values and health behaviours

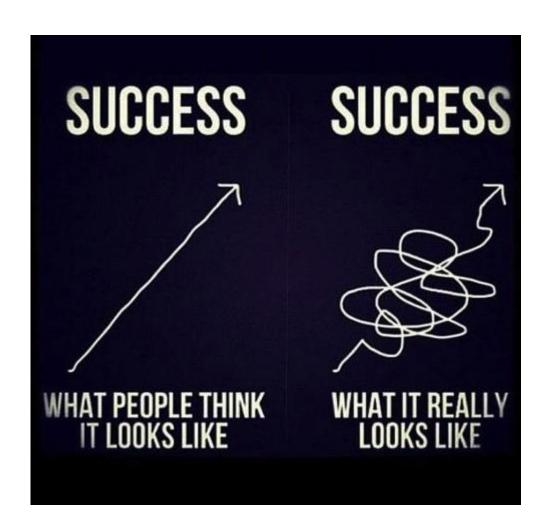
- How will engaging in the health behaviour help you move toward a value/what's important to you?
- How does engaging in the health behaviour help you express a value/what's important to you?

Linking values and health behaviours

- Directly linked: When I go for a walk I'm expressing my value of nature.
- Means to an end: If I take my medications I will be around longer to be a involved dad (Value = engaged parent)
- Think outside the box: I value honesty. I need to get my blood work done to be honest with myself about the status of my health.

Tracking: Bullseye





Not if...when



Additional Resources

Training from the Behaviour Change Institute:

 http://www.behaviourchangeinstitute.ca/We lcome.html

Thank you



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