

# Lay summary of study results

## Why was this study done?

Ongoing neck pain that lasts for more than three months is common and can be difficult to manage. Exercises are often recommended, but many people stop doing them over time or are unsure how to adapt them, manage flare-ups, or stay active in the long term. This can limit how helpful exercise treatment is.

To address this, we developed a new exercise programme called EPIC-Neck (Exercise Prescription Improved through Co-design). EPIC-Neck was designed with patients and physiotherapists and combines tailored neck exercises with practical support to help people understand, use and stick with exercise over time.

Before running a large trial to test whether EPIC-Neck improves pain and daily function, we first needed to check whether the programme could be delivered as planned and whether it was acceptable to patients and physiotherapists.

## What did we do?

We carried out a feasibility study, which is a small early-stage study to see whether a larger trial is possible. Adults with long-lasting, non-specific neck pain (neck pain without a clear medical cause) were recruited from NHS physiotherapy services.

Participants were randomly allocated to receive either:

- EPIC-Neck, or
- Usual exercise care, meaning standard physiotherapy exercises.

We also carried out a process and fidelity evaluation. This means we looked at:

- How well physiotherapists were prepared by training
- Whether EPIC-Neck was delivered as intended
- How well patients understood the programme
- Whether patients used the exercises and self-management strategies in everyday life

To do this, we used questionnaires, audio recordings of appointments, and interviews with both patients and physiotherapists.

## What did we find?

The study was feasible, but some improvements are needed before a larger trial.

- Recruitment worked well: People were willing to take part.

- Retention was lower than planned: Some participants did not return follow-up questionnaires, especially if they had not started or completed treatment.
- Safety: No serious exercise-related problems occurred.

### Acceptability

- Most patients and physiotherapists found EPIC-Neck acceptable and felt it helped with pain, movement, and confidence.
- However, interviews showed that some parts of the programme were harder to understand, especially:
  - How to progress or change exercises
  - How to use exercises to manage pain flare-ups
  - How and why to stay active more generally

### Delivery and use of the programme

- Physiotherapists delivered basic exercise components well.
- More complex parts of EPIC-Neck (such as problem-solving, flare-up planning, and promoting general exercise) were delivered less consistently.
- Patients usually did their prescribed neck exercises, but often reduced or stopped harder or more painful exercises.
- Few patients used exercise to manage flare-ups or started general exercise by the time they were discharged.

## What does this mean?

EPIC-Neck shows promise and is different from usual physiotherapy care, but the programme and training need refining. In particular:

- Physiotherapists would benefit from more practice and support when learning complex parts of the programme.
- Patients need clearer explanations and practical guidance to support long-term self-management.

Once these changes are made, EPIC-Neck should be tested again before moving to a large-scale trial.

## Where can I find more information?

- Trial registration: <https://www.isrctn.com/ISRCTN81746901>
- Published papers on EPIC-Neck development and evaluation will be available through academic journals.