

# BRACING FOR SUCCESS: COMPARISON OF PATIENT, FAMILY, AND PROFESSIONAL PERSPECTIVES ON BARRIERS AND FACILITATORS FROM 3414 MESSAGES IN A SCOLIOSIS BLOG

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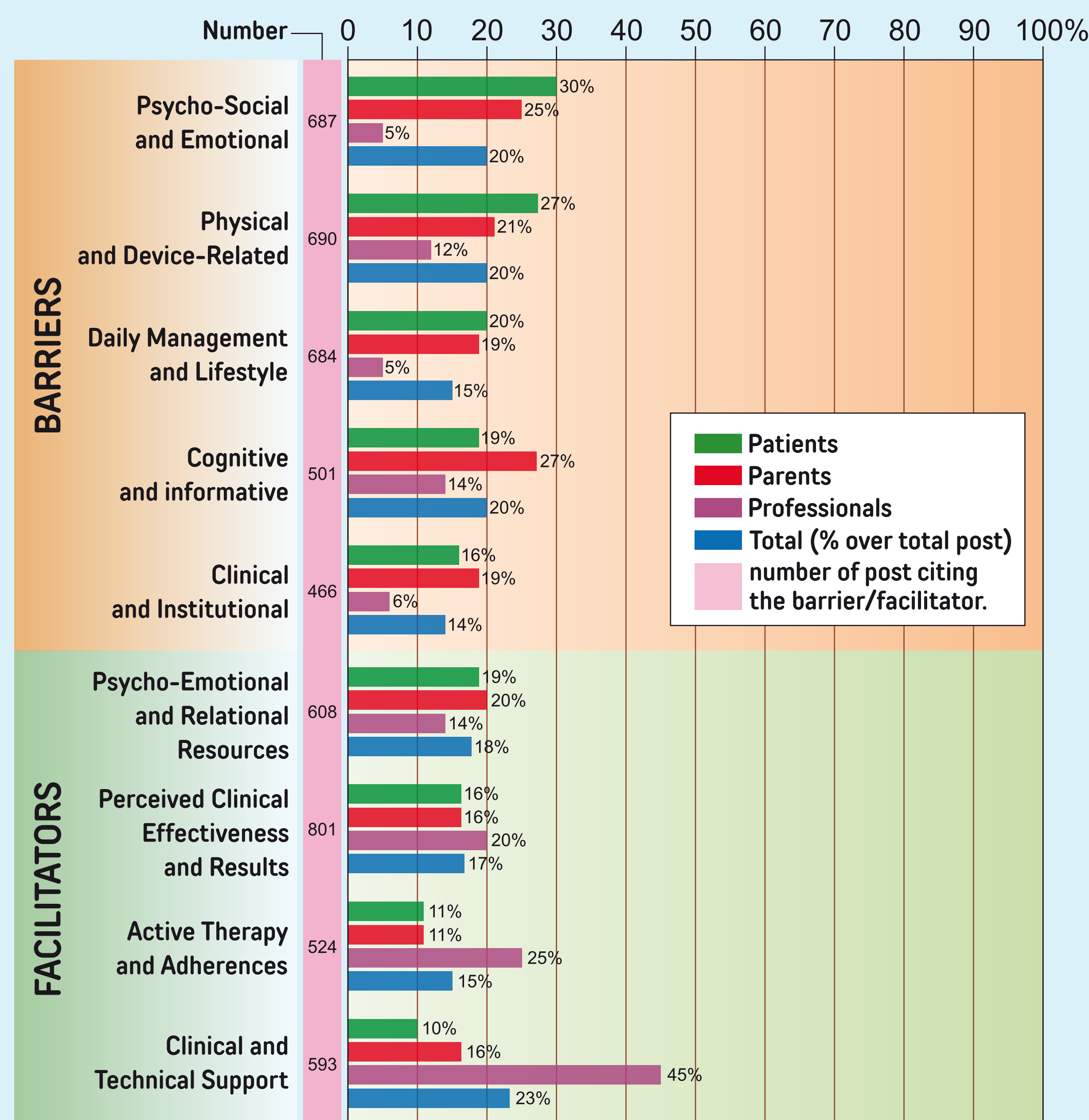
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**Different stakeholders perceive different barriers to brace adherence: emotional for patients, informational for families, and clinical for professionals.**

## BACKGROUND

- Patients' adherence strongly determines brace success in AIS.
- Brace can cause physical discomfort, psychological burden, activity limitations, and impaired social interactions.
- Family support, effective communication with healthcare providers, psychosocial counselling, and interprofessional care are key facilitators of adherence.
- The scoliosi.org blog is ISICO's platform, active for over ten years, providing evidence-based and educational content on scoliosis. It serves as a space for patients and families to engage, with thousands of comments and questions collected over time.

## Barriers and facilitators showed different distributions across stakeholder groups. Main barriers and facilitators by stakeholder



**Table 1.** Frequency of citing barriers and facilitators to brace adherence across all blog posts (n=3,414). A single post may cite more than one barrier or facilitator.

**Patients** → emotional and physical barriers  
**Parents** → emotional and knowledge barriers  
**Professionals** → knowledge and physical barriers

## METHODS

Observational qualitative study using a mixed-methods approach

- 3,414 blog entries from AIS patients, families, professionals
- Qualitative content analysis + NLP ( using ChatGPT)
- Thematic distributions were compared quantitatively and qualitatively across contributor groups
- Expert audit (n=100) → 95% concordance

## AIM

To extract from a large scoliosis blog the most prevalent reported barriers and facilitators of brace adherence, and to compare perspectives of patients, families, and healthcare professionals.

## RESULTS

**3,414 posts analyzed**  
95% reported ≥1 barrier or facilitator

**5 barriers and 4 facilitators identified**  
41.6% reported only barriers,  
32.8% only facilitators

## CLINICAL SIGNIFICANCE

**Brace adherence is influenced by emotional, physical, and knowledge-related with a different perceived importance across stakeholders.**

**Targeted multidisciplinary interventions addressing these dimensions may improve adherence and outcomes.**

**Syntonising stakeholders' perceptions could be an important target to be explored in future studies.**



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Alessandra Negrini, Alberto Negrini and Stefano Negrini own stock of ISICO.  
All other authors have no conflicts of interests to declare.