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Personalized patient education for subacromial pain syndrome: The role of and spiritual alignment

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Dear Editor.

We write to express our appreciation and share some reflections on a recently published article, "Patient education for the management of subacromial pain syndrome: A scoping review" [1]. The authors provide valuable insights into the wide range of educational interventions documented in the literature on SAPS. As a group of researchers and clinicians focused on patient-centered rehabilitation strategies, we recognize the importance of patient education in SAPS to increase adherence to treatment protocols and improve long-term functional outcomes.

The authors noted that educational content often lacks comprehensiveness, potentially limiting its impact on patient recovery. Future research should incorporate a multidimensional approach to educational interventions, integrating more behavior change techniques and motivational strategies to increase engagemen [2]. for example Add cultural and religious sensitivity Educational interventions can significantly increase their effectiveness, especially in diverse patient populations [3]. Understanding a patient's cultural background allows for interventions that align with their beliefs and values. For example, certain cultures may view health, pain, or medication adherence differently. By acknowledging these perspectives, practitioners can avoid misunderstandings and build trust, which is the foundation of effective patient education. Religious beliefs can influence patients' attitudes toward pain, treatment, and healing. For example, patients may feel empowered by integrating their faith into the healing process. Providers may take this into account by suggesting meditation, prayer, or other religious practices that align with the patient's beliefs, as long as such practices support overall therapeutic goals. If the intervention fits the patient's personal beliefs and cultural identity, they are more likely to engage in treatment. A culturally and religiously inclusive approach recognizes that each patient brings unique perspectives and values to healthcare, which can be leveraged to increase motivation and compliance

Given the diversity of patient responses to SAPS interventions, future research to explore personalized educational approaches that address specific psychological and functional aspects unique to each patient could be undertaken. A patient-centered and personalized approach that combines psychological, functional, and religious aspects will promote

holistic care [4]. When discussing treatment goals, providers can include spiritual or religious practices as part of the patient's health goals, recognizing that physical health supports spiritual well-being. By respecting patients' beliefs, healthcare providers demonstrate empathy, which can build trust and encourage open communication [5]. Patients are more likely to express concerns and comply with interventions when they feel their beliefs are understood and respected.

In conclusion, this article highlights the important role of patient education in the management of SAPS and underscores the need for more comprehensive and replicable interventions. A personalized educational approach that respects patients' unique psychological, functional, and religious needs can offer a compassionate and culturally aware framework for managing conditions such as SAPS. By aligning health goals with personal values and beliefs, healthcare providers can foster deeper motivation and more meaningful participation in the treatment plan. We hope these reflections contribute to the ongoing discourse regarding improving SAPS patient outcomes through effective education and look forward to seeing further progress in this area, and also thank you for funder. This work was supported by Indonesia Endowment Fund for Education (LPDP) Indonesia.

CRediT authorship contribution statement

Tamama Rofiqah: Investigation, Validation. **Tamama Hafizah:** Investigation. **Muhammad Taufiqurrahman:** Conceptualization, Writing – original draft, Writing – review & editing.

Declaration of Competing Interest

The authors declare that there is no conflict of interest regarding the publication of this letter.

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