

Do Once and Share Project on Chronic Pain Assessment

Recommendations for chronic pain assessment measures

Name of person completing form John Goddard

Profession/Organisation British Pain Society - Non consensus views

Dear Colleagues

Please find attached a list of pain measures (n=165) that we have identified from an extensive review of the literature on pain assessment. We are now in the process of reaching a consensus about which measures to recommend for different conditions. The list of measures is presented on two pages (**Appendix 1**) under relevant categories, to allow individuals to zoom in only on relevant measures in their field. You can select measures from other categories on the list as well as from the non-specific section if you wish. If the measures that you would recommend are not on the list then please do let us know. If you have knowledge/experience of pain assessment measures in more than one area, then please complete additional sections.

Which pain measures (from the attached list-Appendix 1) would you recommend for use in people experiencing chronic pain for each of the following categories? Please could you complete all the relevant categories that fit in with your specialty/experience of using pain assessment measures. Please state reasons for your recommendations. We recognise in the following list there will be overlaps between categories but we will address this in the final report. Thank you.

Children over 5 years and adolescents - normal cognitive function

Measures Recommended	Reasons for Recommendations
Bath Adolescent Pain Questionnaire (BAPQ)	If chronic pain is going to be routinely assessed in the older child, I would probably recommend this tool in the tertiary setting. It is not appropriate for primary care and probably not for routine paediatric practice. It has been developed in the UK.
Brief Pain Inventory – short form	This is an adult tool and not validated in paediatric practice, nonetheless it could be easily completed by the older older child, but not by a five year old. Development of a version for older children and adolescents would be helpful. If a tool for routine secondary paediatric practice is to be recommended, I'd probably go for this, but it

	is not evidence based! I not sure it is appropriate for primary care.

Children over 5 years and adolescents - learning difficulties

Measures Recommended	Reasons for Recommendations
Hunt A, et al. Clinical validation of the Paediatric Pain Profile. Dev Med Child Neurol 2004; 46(1):9-18.	It is recognised that individualised assessment and measurement is required in this population. Parents or care givers identify cues that indicate pain or discomfort.
Breau LM. Non-communicating children’s pain checklist: better pain assessment for severely disabled children. Expert Review of Pharmacoeconomics & Outcomes Research, 2003; 3: 327-339.	It is recognised that individualised assessment and measurement is required in this population. Parents or care givers identify cues that indicate pain or discomfort.

Adults and older people - normal cognitive function

Measures Recommended	Reasons for Recommendations
Chronic Pain Policy Coalition – Pain the 5th vital sign http://www.paincoalition.org.uk/report.pdf	The CPPC has recently published “a new pain manifesto”. The pain assessment tool in the recently published booklet is similar to the BPI-SF, but shorter still.
Other tools recommended by BPS members 1. Depression, Anxiety and Positive Outlook Scale (DAPOS) 2. Roland and Morris 3. CIPS-1	1. Impressive clinimetrics claimed for article in press 2. Gives guide to disability 3. Catastrophisation scale – can be helpful

Adults and older people - impaired cognitive function (e.g. dementia, confusion)

Measures Recommended	Reasons for Recommendations
Adult tools	Self reporting of pain is the gold standard method for identifying pain in those with mild to moderate cognitive impairment. When people with cognitive impairment can self-report pain, these reports are valid. Draft British Pain Society and British Geriatric Society guidance on the assessment of pain in older people.
Individualised assessment	In the older person with severe cognitive impairment, carers who are familiar with the patient may detect the presence of pain and the changes in pain. Draft British Pain Society and British Geriatric Society guidance on the assessment of pain in older people.

Adults and older people - learning difficulties

Measures Recommended	Reasons for Recommendations

Neuropathic pain

Measures Recommended	Reasons for Recommendations
painDETECT Freyenhagen et al. Curr Med Res Opin 2006 Oct; 22(10): 1911-20.	Simple to use. Differentiates neuropathic element in Low Back Pain. Increasingly being promoted by the pharmaceutical industry in drug trials.

Back pain

Measures Recommended	Reasons for Recommendations

Arthritis pain

Measures Recommended	Reasons for Recommendations

Neck and shoulder pain

Measures Recommended	Reasons for Recommendations

Knee and hip pain

Measures Recommended	Reasons for Recommendations

Musculoskeletal pain, fibromyalgia and chronic fatigue syndrome

Measures Recommended	Reasons for Recommendations

Cutaneous ulceration and vascular/ischaemic pain

Measures Recommended	Reasons for Recommendations

Chronic chest pain (including cardiac, oesophageal etc)

Measures Recommended	Reasons for Recommendations

Migraine and headache

Measures Recommended	Reasons for Recommendations

Cancer pain

Measures Recommended	Reasons for Recommendations

Any other categories - please state

Measures Recommended	Reasons for Recommendations

Thank you for your collaboration