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Research Summary – Classification S	ystem for Chronic Pain in SCI/Cardenas Pain Classification – Pain
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Author Year Country Research Design Setting	Demographics and Injury Characteristics of Sample			Validity			Responsiveness Interpretability	
Bryce et al. 2007 Survey. A vote in a course on outcome measures at a international meeting. American Spinal Injury Association and the International			and useful Classification for Chronic (Cardenas s determined valid and us both the Br Ragnarssor Taxonomy the Interna Association Study of Pa SCI Classific	In a vote on validity and usefulness, the Classification System for Chronic Pain in SCI (Cardenas scale) was determined to be less valid and useful than both the Bryce- Ragnarsson Pain Taxonomy (BRPT) and the International Association for the Study of Pain (IASP) SCI Classification.				
Spinal Cord Society scientific meeting in Boston	Table 1 Voting on Pain Classification Validity/Usefulness:							
	Voting on P Instrument	-						
	instrument	and useful % (N)	Useful but requires more validation % (N)	Useful but requires changes/improvement then further validation % (N)		Not useful or valid for research in SCI % (N)		
	Cardenas	4 (2)	20 (11)	52 (29)		25 (14)		

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Author Year Country Research Design Setting	Demographics and Injury Characteristics of Sample			Validity	Reliability	Responsiveness Interpretability	
	BRPT	14 (8)	42 (25)	36 (21)	8 (5)		
	IASP	19 (11)	47 (28)	31 (18)	3 (2)		
Cardenas 2002 Independent categorization (based on questionnaires; for 15 persons, questionnaires plus personal interviews) by 2 investigators Community	experienc 69.9% mer women	t: dividuals d currently ing pain n 30% 40.6 M (13.4) ,8) e: 18 -77 plegia	,		Test-retest, Inter- rater, Intra-rater Strength of agreement in categorizing pain problems reported on questionnaires was substantial between raters Kappa =0.68 Strength of agreement in categorizing pain problems in person was substantial between raters Kappa =0.66		