

Reviewer ID: Zoe Raffard, Kyle Diab, Matthew Querée, Gurmaan Gill, Gita Manhas																												
Type of Outcome Measure: Classification system for chronic pain in SCI patients			Total articles: 2																									
Author ID Year	Study Design	Setting	Population (sample size, age) and Group																									
Bryce et al. 2007	Survey. A vote in a course on outcome measures at a international meeting.	American Spinal Injury Association and the International Spinal Cord Society scientific meeting in Boston	N = 59 Participants at the scientific meeting.																									
Cardenas 2002	Independent categorization (based on questionnaires; for 15 persons, questionnaires plus personal interviews) by 2 investigators	Community	333 questionnaires mailed out: 163 SCI individuals responded currently experiencing pain 69.9% men 30% women Avg. age: 40.6 M (13.4), 43.9 W (13,8) Age range: 18 -77 years. 52% Tetraplegia 47% Paraplegia																									
1. RELIABILITY																												
Author ID	Internal Consistency	Test-retest, Inter-rater, Intra-rater																										
Cardenas 2002	No data available	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																										
2. VALIDITY																												
Author ID	Validity																											
Bryce et al. 2007	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.																											
	<table border="1"> <thead> <tr> <th colspan="5">Voting on Pain Classification Validity/Usefulness:</th> </tr> <tr> <th>Instrument</th> <th>Valid and useful % (N)</th> <th>Useful but requires more validation % (N)</th> <th>Useful but requires changes/improvement then further validation % (N)</th> <th>Not useful or valid for research in SCI % (N)</th> </tr> </thead> <tbody> <tr> <td>Cardenas</td> <td>4 (2)</td> <td>20 (11)</td> <td>52 (29)</td> <td>25 (14)</td> </tr> <tr> <td>BRPT</td> <td>14 (8)</td> <td>42 (25)</td> <td>36 (21)</td> <td>8 (5)</td> </tr> <tr> <td>IASP</td> <td>19 (11)</td> <td>47 (28)</td> <td>31 (18)</td> <td>3 (2)</td> </tr> </tbody> </table>			Voting on Pain Classification Validity/Usefulness:					Instrument	Valid 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)	BRPT	14 (8)	42 (25)	36 (21)	8 (5)	IASP	19 (11)	47 (28)	31 (18)	3 (2)
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3. RESPONSIVENESS – no data available																												
4. FLOOR/CEILING EFFECT – no data available																												
5. INTERPRETABILITY – no data available																												