Author Year Country PEDro Score Research Design Total Sample Size	Methods		Outcome
Hearn et al. 2018 United Kingdom RCT PEDro=7 N <sub>start</sub> =67 N <sub>finish</sub> =	Population: Mean age=44.4±10.4 yr; Gender: males=31, females=36; Time since injury (yr): 1-2=11, 2-4=18, 4-8=19, 8-12=6, 12-15=7, 15+=6; Level of injury: C=25, T=37, L=5; Severity of injury: AlS A=9, B=17, C=19, D=22; Type of pain=neuropathic.  Intervention: Participants were randomized to either an 8-wk online mindfulness intervention or an 8-wk internet delivered psychoeducation.  Outcome Measures: Depression symptom severity and anxiety (hospital anxiety and depression scale (HADS)), quality of life (QoL)(world health organization quality of life (WHOQOL-BREF), pain perception (numeric rating scale), pain catastrophizing scale (PCS) and mindfulness (five facet mindfulness questionnaire (FFMQ).	<ol> <li>3.</li> <li>4.</li> </ol>	HADS scores for depression were much higher for those that discontinued the psychoeducation intervention than those who completed it (p=0.051) with no other significant differences between those who completed the intervention and those who did not.  Significant differences post-intervention between groups for mindfulness facets of acting with awareness, describing and non-reactivity to inner experience (p<0.05) as well as total FFMQ score (p<0.05).  No significant differences between groups for any QoL, pain intensity and mindfulness facets of observing and non-judging post-intervention (p>0.05).  Significant between group difference in severity of depression and pain catastrophizing at 3-mo follow-up (p<0.050).