Author Year; Country PEDro Score Research Design Total Sample Size	Methods	Outcome
Widerström-Noga & Turk 2003 USA Case control N=120	**Population:** Mean age=40.6 yr; Gender: males=94, females=26; Level of injury=cervical, non-cervical; Time since injury=9.8 yr; Type of pain=neuropathic and nociceptive. **Treatment:** Individuals with SCI related pain filled out a questionnaire; data from the questionnaire was analysed by dividing individuals into two groups: those that received pain treatment and those that did not. **Outcome Measures:** Sociodemographic data and characteristics of injury, intensity of pain, location of pain, quality of pain, allodynia (pain in response to a stimulus that would not provoke pain), Multidimensional Pain Inventory (MPI) (designed to assess the impact of pain and adaptation to chronic pain), difficulty in dealing with pain and pain treatments.	1. Overall 59.2% of participants used pharmacological or non-pharmacological treatments to control pain. 40.8% indicated they had not used nor had they been prescribed any medication for pain. 2. Pain Severity: Pain severity was found to be higher for those who had received pain medications (PM) (3.9 ± 1.3, $p=0.001$) compared to those who had not used any pain treatment. The intensity of pain was higher for those on PM than for those not on PM ($p=0.022$). 3. Pain Locations: Those using PM reported more painful areas than those not using PM ($p=0.001$) with frontal/genital pain reported more often ($p<0.000$). 4. Quality of Pain: Those on PM used more descriptive adjectives to describe their pain compared to those not using PM ($p=0.031$). 5. Difficulty in Dealing with Pain: Those using PM reported having more difficulty dealing with pain than those not using PM ($p<0.000$). 6. Pain impact: Those using PM had higher scores for the pain severity scale and the life interference scale compared to the group not using PM ($p<0.002$).