Pre-op back pain, pain sensitivity predict outcomes

26 January 2015

Image courtesy of Blausen Medical

(HealthDay)—Preoperative back pain and individual pain sensitivity can predict postoperative pain following lumbar surgery, according to a study published in the December issue of *Pain Medicine*.

Ho-Joong Kim, M.D., from the Seoul National University College of Medicine in South Korea, and colleagues evaluated patients who underwent decompression surgery alone (62 patients) or decompression with fusion surgery (37 patients) for lumbar spinal stenosis. The Pain Sensitivity Questionnaire (PSQ) and visual analog pain scale (VAS) for back pain and leg pain were administered preoperatively, as well as immediately following surgery (H0) and at 4, 8, 18, 30, 48, and 72 hours post-surgery (H4, H8, H18, H30, H48, and H72).

The researchers found that, postoperatively, both groups showed decreased back pain and leg pain. Preoperative VAS for back pain was significantly correlated with postoperative VAS for back pain at H0, H4, H8, and H18 in the fusion group, while PSQ minor/total PSQ showed a significant correlation with postoperative back pain at H48 and H72. In the decompression group, only total PSQ and PSQ minor were significantly correlated with postoperative back pain at H18 and H30. Both preoperative back pain and PSQ minor were

predictive of immediate postoperative back pain (from H0 to H18) in the fusion group and delayed postoperative back pain (H18, H30) in the decompression group.

"The study highlights that each preoperative back pain and individual pain sensitivity could predict the different aspects of postoperative pain after lumbar surgery," the authors write.

 More information: Abstract
Full Text (subscription or payment may be required)

APA citation: Pre-op back pain, pain sensitivity predict outcomes (2015, January 26) retrieved 13 July 2022 from https://medicalxpress.com/news/2015-01-pre-op-pain-sensitivity-outcomes.html