

*Summer* 20  
**SCHOOL 25**

*A residential learning experience*

14-15 February 2025

Novotel Geelong, VIC

# **Psychosocial factors and beliefs in people with chronic lower limb wounds**

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# Participants characteristics

Cross sectional analysis  
105 participants

Age range: 32 -91 yrs  
71% over 65

Females 54%

		Pain n=70 (66.7)	No pain n=35 (33.3)
Gender	Male	33 (47.1)	15 (42.9)
	Female	37 (52.9)	20 (57.1)
Wound duration	More than 24 months	40 (57.1)	22 (62.9)
	Less than 24 months	30 (42.9)	13 (37.1)
Living arrangements	Living alone	26 (37.1)	14 (40.0)
	With partner or carer	41 (58.6)	20 (32.8)
	Supported residential care	3 (4.3)	1 (2.9)

Values are expressed as n (%)

**Brief Pain Inventory**

1. Please rate your pain by circling the one number that best describes your pain at its WORST in the last 24 hours.

0 1 2 3 4 5 6 7 8 9 10  
No pain Pain as bad as you can imagine

2. Please rate your pain by circling the one number that best describes your pain at its LEAST in the last 24 hours.

0 1 2 3 4 5 6 7 8 9 10  
No pain Pain as bad as you can imagine

3. Please rate your pain by circling the one number that best describes your pain on the AVERAGE.

0 1 2 3 4 5 6 7 8 9 10  
No pain Pain as bad as you can imagine

4. Please rate your pain by circling the one number that tells how much pain you have RIGHT NOW.

0 1 2 3 4 5 6 7 8 9 10  
No pain Pain as bad as you can imagine

5. What treatments or medications are you receiving for your pain?

6. In the last 24 hours, how much relief have pain treatments or medications provided? Please circle the one percentage that most shows how much RELIEF you have received.

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%  
No relief Complete relief

7. Circle the one number that best describes how during the past 24 hours, your wound has interfered with your:

**A. General Activity**

0 1 2 3 4 5 6 7 8 9 10  
Does not interfere Completely interferes

**B. Mood**

0 1 2 3 4 5 6 7 8 9 10  
Does not interfere Completely interferes

**C. Walking Ability**

0 1 2 3 4 5 6 7 8 9 10  
Does not interfere Completely interferes

**D. Normal Work (include both work outside the home and housework)**

0 1 2 3 4 5 6 7 8 9 10  
Does not interfere Completely interferes

**E. Relations with other people**

0 1 2 3 4 5 6 7 8 9 10  
Does not interfere Completely interferes

**F. Sleep**

0 1 2 3 4 5 6 7 8 9 10  
Does not interfere Completely interferes

**G. Enjoyment of Life**

0 1 2 3 4 5 6 7 8 9 10  
Does not interfere Completely interferes

**Modified – Roland-Morris Wound and Disability Questionnaire (RMQ)**

**Instructions**

Please read instructions: **When your wound hurts, you may find it difficult to do some of the things you normally do. Say yes to sentences that describe you today.**

This list contains sentences that people have used to describe themselves when they have a wound. You may find that some stand out because they describe you *today*. As I read the list, think of yourself *today*. When I read a sentence that describes you today, say yes. If the sentence does not describe you, say no.

- I stay at home most of the time because of my wound.
- I change position frequently to try to get my wound comfortable.
- I walk more slowly than usual because of my wound.
- Because of my wound, I am not doing any jobs that I usually do around the house.
- Because of my wound, I use a handrail to get upstairs.
- Because of my wound, I lie down to rest more often.
- Because of my wound, I have to hold on to something to get out of an easy chair.
- Because of my wound, I try to get other people to do things for me.
- I get dressed more slowly than usual because of my wound.
- I only stand up for short periods of time because of my wound.
- Because of my wound, I try not to bend or kneel down.
- I find it difficult to get out of a chair because of my wound.
- My wound is painful almost all of the time.
- I find it difficult to turn over in bed because of my wound.
- My appetite is not very good because of my wound.
- I have trouble putting on my socks (or stockings) because of my wound.
- I can only walk short distances because of my wound.
- I sleep less well because of my wound.
- Because of my wound, I get dressed with the help of someone else.
- I sit down for most of the day because of my wound.
- I avoid heavy jobs around the house because of my wound.
- Because of wound, I am more irritable and bad tempered with people than usual.
- Because of my wound, I go upstairs more slowly than usual.
- I stay in bed most of the time because of my wound.

**Short Form McGill Questionnaire**

**I. Pain Rating Index (PRI):**

The words below describe average pain. Place a check mark (  ) in the column that represents the degree to which you feel that type of pain. Please limit yourself to a description of the pain in your wound area only:

	None	Mild	Moderate	Severe
Throbbing	0	1	2	3
Shooting	0	1	2	3
Stabbing	0	1	2	3
Sharp	0	1	2	3
Cramping	0	1	2	3
Gnawing	0	1	2	3
Hot-Burning	0	1	2	3
Aching	0	1	2	3
Heavy	0	1	2	3
Tender	0	1	2	3
Splitting	0	1	2	3
Tiring-Exhausting	0	1	2	3
Sickening	0	1	2	3
Fearful	0	1	2	3
Punishing-Cruel	0	1	2	3

**II. Present Pain Intensity (PPI) – Visual Analog Scale (VAS). Tick along scale below for wound pain:**

No pain |-----| Worst Possible pain

**III. Evaluative overall intensity of total pain experience. Please limit yourself to a description of the pain in your wound only. Place a check mark (  ) in the appropriate column:**

Evaluative	
0	No pain
1	Mild
2	Discomforting
3	Distressing
4	Horrible
5	Excruciating

**IV. Scoring:**

	Score
I. Q1 -11	S-PRI (Sensory Pain Rating Index)
I. Q12 -15	A-PRI (Affective Pain Rating Index)
I. Q1 -15	T-PRI (Total Pain Rating Index)
II	PPI-VAS (Present Pain Intensity-Visual Analog Scale)
III	Evaluative overall intensity of total pain experience

Quality of Life	Pain $\mu$ (SD)	No pain $\mu$ (SD)	P value
<b>SF McGill Questionnaire</b>			
- Sensory	13.1 (7.3)	3.2 (4.1)	<0.001
- Affective	4.4 (3.7)	0.6 (1.9)	<0.001
- Total	17.2 (10.3)	3.8 (5.3)	<0.001
<b>Brief Pain Inventory</b>			
- General activity	4.3 (3.6)	2.2 (3.0)	0.003
- Mood	4.2 (3.5)	1.2 (2.3)	<0.001
- Normal work	3.9 (3.9)	2.2 (3.4)	0.022
- Relations with other people	2.5 (3.4)	1.1 (2.3)	0.027
- Sleep	3.9 (3.6)	1.6 (2.9)	0.001
- Enjoyment of life	4.6 (3.7)	2.5 (3.3)	0.004
- Walking ability	4.2 (3.7)	2.2 (3.0)	0.005
<b>Mobility (Roland-Morris)</b>	11.1 (6.1)	5.3 (6.0)	<0.001

## Impact on Quality of Life

**SF-MPQ:** the higher the score the greater the pain experience. Sensory score range 0 - 33, affective score range 0 - 12, total pain experience score range 0 – 45

**BPI:** the higher the score the greater the interference with activities. Score range 0 – 10

**M-RMDQ:** the higher the score the greater the limitation of the activity and severity of physical disability. Score range 0 - 24

## DASS21

Please read each statement and circle a number 0, 1, 2 or 3 which indicates how much the statement applied to you over the past week. There are no right or wrong answers. Do not spend too much time on any statement.

The rating scale is as follows:

- 0 Did not apply to me at all
- 1 Applied to me to some degree, or some of the time
- 2 Applied to me to a considerable degree, or a good part of time
- 3 Applied to me very much, or most of the time

1	I found it hard to wind down	0	1	2	3
2	I was aware of dryness of my mouth	0	1	2	3
3	I couldn't seem to experience any positive feeling at all	0	1	2	3
4	I experienced breathing difficulty (eg, excessively rapid breathing, breathlessness in the absence of physical exertion)	0	1	2	3
5	I found it difficult to work up the initiative to do things	0	1	2	3
6	I tended to over-react to situations	0	1	2	3
7	I experienced trembling (eg, in the hands)	0	1	2	3
8	I felt that I was using a lot of nervous energy	0	1	2	3
9	I was worried about situations in which I might panic and make a fool of myself	0	1	2	3
10	I felt that I had nothing to look forward to	0	1	2	3
11	I found myself getting agitated	0	1	2	3
12	I found it difficult to relax	0	1	2	3
13	I felt down-hearted and blue	0	1	2	3
14	I was intolerant of anything that kept me from getting on with what I was doing	0	1	2	3
15	I felt I was close to panic	0	1	2	3
16	I was unable to become enthusiastic about anything	0	1	2	3
17	I felt I wasn't worth much as a person	0	1	2	3
18	I felt that I was rather touchy	0	1	2	3
19	I was aware of the action of my heart in the absence of physical exertion (eg, sense of heart rate increase, heart missing a beat)	0	1	2	3
20	I felt scared without any good reason	0	1	2	3
21	I felt that life was meaningless	0	1	2	3

## Multidimensional Health Locus of Control

Instructions: Each item below is a belief statement about your medical condition with which you may agree or disagree. Beside each statement is a scale which ranges from strongly disagree (1) to strongly agree (6). For each item we would like you to circle the number that represents the extent to which you agree or disagree with that statement. The more you agree with a statement, the higher will be the number you circle. The more you disagree with a statement, the lower will be the number you circle. Please make sure that you answer **EVERY ITEM** and that you circle **ONLY ONE** number per item. This is measure of your personal beliefs, there are no wrong or right answers

- 1 = Strongly Disagree (SD)
- 2 = Moderately Disagree (MD)
- 3 = Slightly Disagree (D)
- 4 = Slightly Agree (A)
- 5 = Moderately Agree (MA)
- 6 = Strongly Agree (SA)

		SD	MD	D	A	MA	SA
1	If my wound worsens. It is my own behaviour which determines how soon I will feel better	1	2	3	4	5	6
2	As to my wound, what will be will be	1	2	3	4	5	6
3	If I see my doctor regularly, I am less likely to have problems with my wound	1	2	3	4	5	6
4	Most things that affect my wound happen to me by chance	1	2	3	4	5	6
5	Whenever my wound worsens, I should consult a medically trained professional	1	2	3	4	5	6
6	I am directly responsible for my wound getting better or worse	1	2	3	4	5	6
7	Other people play a big role in whether my wound improves, stays the same or gets worse	1	2	3	4	5	6
8	Whatever goes wrong with my wound it is my own fault	1	2	3	4	5	6
9	Luck plays a big part in determining how my wound improves	1	2	3	4	5	6
10	In order for my wound to improve it is up to other people to see that the right thing happens	1	2	3	4	5	6
11	Whatever improvement occurs with my wound is largely a matter of good fortune	1	2	3	4	5	6
12	The main thing which affects my wound is what I myself do	1	2	3	4	5	6
13	I deserve the credit when my wound improves and the blame when it gets worse	1	2	3	4	5	6
14	Following doctor's orders to the letter is the best way to keep my wound from getting worse	1	2	3	4	5	6
15	If my wound worsens it's a matter of fate.	1	2	3	4	5	6
16	If I am lucky my wound will get better	1	2	3	4	5	6
17	If my wound turns for the worse it is because I have not been taking proper care of myself	1	2	3	4	5	6
18	The type of help I receive from other people determines how soon my wound improves	1	2	3	4	5	6

## BRIEF Coping Strategies Questionnaire

Instructions: Individuals who have chronic wounds have developed a number of ways to cope, or deal with their pain. These include saying things to themselves when they experience pain or engaging in different activities. Below is a list of things that people have reported doing when they feel pain. For each activity, please indicate using the scale below how much you engage in that activity when you feel pain, where a 0 indicates you never do that when you are experiencing pain a 3 indicates you sometimes do that when you are experiencing pain and a 6 indicates you always do it when you are experiencing pain. Remember you can use any point along the scale

0 1 2 3 4 5 6  
Never do Sometimes do that Always do that

I think of things I enjoy doing	0	1	2	3	4	5	6
I just think of it as some other sensation, such as numbness	0	1	2	3	4	5	6
It is terrible and I feel it is never going to get any better	0	1	2	3	4	5	6
I don't pay any attention to it	0	1	2	3	4	5	6
I pray for the pain to stop	0	1	2	3	4	5	6
I tell myself I can't let the pain stand in the way of what I have to do	0	1	2	3	4	5	6
I do something active, like household chore or projects	0	1	2	3	4	5	6
I replay in my mind pleasant experiences in the past	0	1	2	3	4	5	6
I pretend it is not a part of me	0	1	2	3	4	5	6
I feel I can't stand it anymore	0	1	2	3	4	5	6
I ignore it	0	1	2	3	4	5	6
I try to think years ahead what everything will be like after I've got rid of the pain	0	1	2	3	4	5	6
I see it as a challenge and don't let it bother me	0	1	2	3	4	5	6
I do something I enjoy, such as watch TV or listening to music	0	1	2	3	4	5	6



Psychological impact	Pain μ (SD)	No pain μ (SD)	p value
<b>DASS21</b>			
Depression	1.5 (0.9)	1.2 (1.0)	0.163
Anxiety	1.1 (0.9)	1.0 (0.9)	0.608
<b>Stress</b>	4.7 (4.2)	2.4 (3.9)	<b>0.007</b>
<b>Total</b>	12.1 (11.2)	6.5 (10.3)	<b>0.016</b>
<b>Coping strategies</b>			
Diverting attention	2.2 (1.9)	1.1 (1.6)	0.004
Reinterpreting	0.9 (1.3)	0.5 (1.1)	0.128
<b>Catastrophising</b>	2.4 (1.9)	1.2 (1.6)	<b>0.002</b>
Ignoring	2.3 (1.7)	2.7 (1.7)	0.203
<b>Praying and hoping</b>	2.7 (1.8)	1.4 (2.0)	<b>0.001</b>
Coping	2.9 (1.8)	2.1 (1.8)	0.028
<b>Increasing behaviour activities</b>	3.0 (1.9)	1.1 (1.3)	<b>&lt;0.001</b>
<b>Health locus of control</b>			
Internal	20.9 (8.8)	19.2 (8.1)	0.352
Chance	19.5 (7.4)	17.0 (7.6)	0.102
Powerful others	28.2 (5.6)	29.1 (5.5)	0.430
Doctors	14.7 (3.2)	15.1 (2.9)	0.607
Other people	13.9 (4.0)	14.3 (3.7)	0.583

## Psychological impact of wound

Depressive symptoms reported by **39%** participants with wound **pain** compared to **31%** with **no pain**.

Coping strategies were used more often by participants with pain than participants with no pain for all subscales except for “*ignoring*”

Health Locus of Control.

**Pain** higher μ scores for internal and chance subscales, more likely to believe that the control of their wound was due to their own behaviour (internal) or due to either fate or luck (chance).

**No pain** higher μ scores for powerful others, medical practitioners and other people subscales, indicating they believed other people were in control of their wound.

### Pain Catastrophizing Scale

Everyone experiences painful situations at some point in their lives. Such experiences may include headaches, tooth pain, joint or muscle pain. People are often exposed to situations that may cause pain such as illness, injury, dental procedures or surgery.

We are interested in the types of thoughts and feeling that you have when you are in pain. Listed below are thirteen statements describing different thoughts and feelings that may be associated with pain. Using the scale, please indicate the degree to which you have these thoughts and feelings when you are experiencing pain.

	Not at all	To a slight degree	To a moderate degree	To a great degree	All the time
I worry all the time about whether the pain will end	0	1	2	3	4
I feel I can't go on	0	1	2	3	4
It's terrible and I think it's never going to get any better	0	1	2	3	4
It's awful and I feel that it overwhelms me	0	1	2	3	4
I feel I can't stand it anymore	0	1	2	3	4
I become afraid that the pain will get worse	0	1	2	3	4
I keep thinking of other painful events	0	1	2	3	4
I anxiously want the pain to go away	0	1	2	3	4
I can't seem to keep it out of my mind	0	1	2	3	4
I keep thinking about how much it hurts	0	1	2	3	4
I keep thinking about how badly I want the pain to stop	0	1	2	3	4
There's nothing I can do to reduce the intensity of the pain	0	1	2	3	4
I wonder whether something serious may happen	0	1	2	3	4

### SOPA (Brief version)

**Instructions:** Please indicate how much you agree with each of the following statements about your pain problem by using the following scale:

- 0 = This is very untrue for me
- 1 = This is somewhat untrue for me
- 2 = This is neither true nor untrue for me (or it does not apply to me)
- 3 = This is somewhat true for me
- 4 = This is very true for me

1. There is little I can do to ease pain	0	1	2	3	4
2. My pain does not stop me from leading a physically active life	0	1	2	3	4
3. The pain I feel is a sign that damage is being done	0	1	2	3	4
4. There is a connection between my emotions and my pain level	0	1	2	3	4
5. I will probably always have to take pain medication	0	1	2	3	4
6. When I am hurting, I deserve to be treated with care and concern	0	1	2	3	4
7. I trust that doctors can cure my pain	0	1	2	3	4
8. I have learned to control my pain	0	1	2	3	4
9. My pain does not need to interfere with my activity level	0	1	2	3	4
10. Exercise can decrease the amount of pain I experience	0	1	2	3	4
11. Stress in my life increases the pain I feel	0	1	2	3	4
12. I will never take pain medication again	0	1	2	3	4
13. When I hurt, I want my family to treat me better	0	1	2	3	4
14. I do not expect a medical cure for my pain	0	1	2	3	4

	Male μ (SD)	Female μ (SD)	P value <sup>a</sup>
<b>Pain Catastrophising scale</b>			
Rumination (max. score 16)	4.8 (4.8)	4.0 (4.9)	0.353
Magnification (max. score 12)	2.6 (3.1)	1.5 (2.2)	0.040
Helplessness (max. score 24)	4.4 (5.3)	4.7 (6.3)	0.796
Total (max. score 52)	11.8 (12.1)	10.2 (12.6)	0.483
<b>Survey of Pain Attitudes (max. score 4 per subscale)</b>			
<b>Adaptive beliefs</b>			
Pain control	1.8 (1.3)	1.5 (1.5)	0.283
Emotion	1.4(1.4)	1.3 (1.3)	0.653
<b>Maladaptive beliefs</b>			
Disability	1.3(1.37)	1.3(1.4)	0.915
Harm	1.6 (1.3)	1.5 (1.4)	0.746
Medication	1.8 (1.5)	1.7 (1.5)	0.775
Solicitude	1.3 (1.3)	1.4 (1.4)	0.574
Medical care	1.9 (1.5)	1.6 (1.4)	0.255

## Beliefs and pain catastrophising between gender

Catastrophising (cognitive pain behaviour)

Males reported higher levels of total catastrophising behaviour

Males reported higher scores for rumination

Females reported higher scores for helplessness

Magnification subscale with males reporting higher levels  $p < 0.05$ .

Attitudes

Males reported slightly higher scores in both the adaptive subscales and maladaptive beliefs subscales, with the exception of solicitude, which was higher in females



	64 and younger μ (SD)	65 and older μ (SD)	P value
<b>Pain Catastrophising scale</b>			
<b>Rumination (max. score 16)</b>	5.4 (5.3)	3.9 (4.6)	0.129
<b>Magnification (max. score 12)</b>	3.0 (3.2)	1.5 (2.3)	0.014
<b>Helplessness(max. score 24)</b>	6.3 (6.0)	3.7 (5.6)	0.041
<b>Total (max. score 52)</b>	14.7 (13.5)	9.1 (11.4)	0.040
<b>Survey of Pain Attitudes (max score 4 per subscale)</b>			
<b>Adaptive beliefs</b>			
<b>Pain control</b>	1.9 (1.5)	1.5 (1.4)	0.235
<b>Emotion</b>	1.6 (1.4)	1.5 (1.2)	0.081
<b>Maladaptive beliefs</b>			
<b>Disability</b>	1.6 (1.5)	1.2 (1.4)	0.150
<b>Harm</b>	1.8 (1.4)	1.4 (1.3)	0.186
<b>Medication</b>	1.9 (1.4)	1.6 (1.5)	0.340
<b>Solicitude</b>	1.6 (1.4)	1.2 (1.3)	0.127
<b>Medical care</b>	1.9 (1.4)	1.7 (1.5)	0.505

## Beliefs and pain catastrophising between ages

### Catastrophising

Participants younger than 64 years old reported higher scores for all subscales of catastrophising measures. Significant differences were found between the younger age bracket and magnification, helplessness and total catastrophising scores

Participants younger than 64 years of age reported higher scores for all variables of SOPA but did not show any significant differences between age brackets and SOPA variables.

# Update – Development of Australian Standards for Health Practitioner Pain Management Education

- Australian Government-funded project commenced February 2024
- ANZCA FPM Project Team + external consultant (Prof Emily Haesler)
- Governance Advisory Group – Diverse stakeholder representatives
- Literature review and environmental scan to confirm project approach and determine existence of similar standards
- Extensive online and in-person stakeholder consultation workshops (208 attendees)
- Thematic data analysis of stakeholder consultation data
- Internal and external validity of the identified themes checked
- Scoping review of relevant guidelines, policies and legislation
- Drafting of standards: 6 proposed

*Pre-budget funding submission for Goal 2 (5):*

*Create national pain management education competency/capability/practice framework.*

Next steps:

- Stakeholder consultation followed by revision of standards based on feedback
- **Submission of final standards in October 2025!!!**

