

# PAIN SELF-EFFICACY QUESTIONNAIRE (PSEQ)

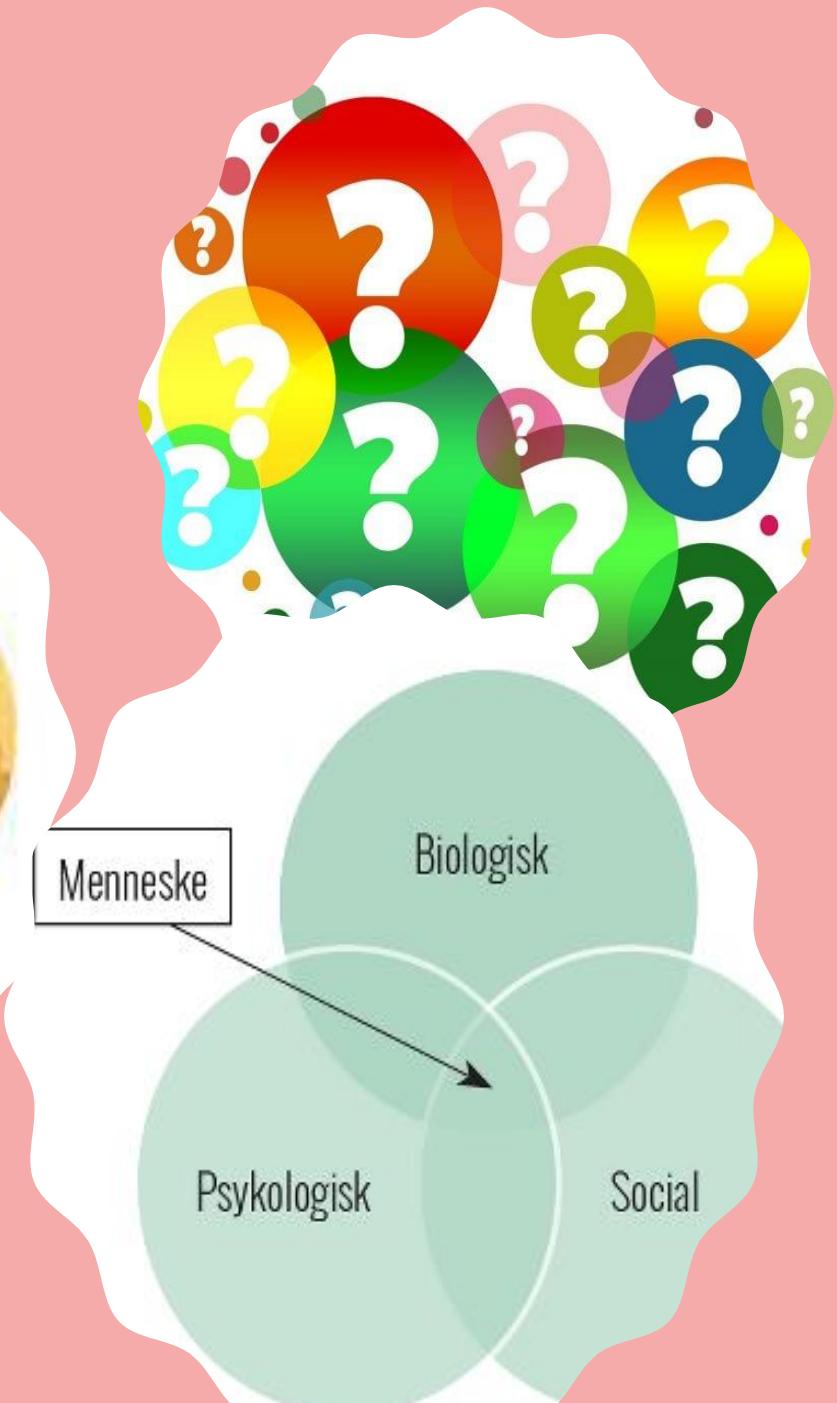
PATIENTER MED LÆNDERYGSMERTER I HOSPITALSEKTOREN

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# RYGBEHANDLINGEN I DAG

EFFEKT?

INGEN EFFEKT?



# PAIN SELF-EFFICACY

- Et psykologisk domæne
- Selv-oplevet handlekompetence
- Patienternes egen oplevelse af, hvor sikre de er på, at de kan udføre specifikke aktiviteter, på trods af deres smerter

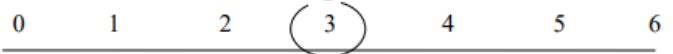


# PAIN SELF-EFFICACY QUESTIONNAIRE-PSEQ

Angiv venligst hvor sikker du er på, at du på nuværende tidspunkt er i stand til at gøre de nævnte ting **på trods af smerterne**. Spørgsmålene besvares ved at du sætter en cirkel om et af tallene på skalaen under hvert enkelt spørgsmål med angivelse af, hvor sikker du er.

Tallet 0 svarer til at du slet ikke føler dig sikker og tallet 6 svarer til at du føler dig helt sikker.

Eksempel:

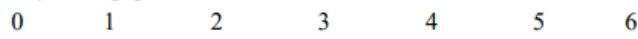


Slet ikke sikker

Helt sikker

Husk at der ikke spøges om du faktisk har gjort eller fortaget dig disse ting for nyligt, men derimod om **hvor sikker du på nuværende tidspunkt føler dig i stand til at gøre disse ting på trods af smerterne**.

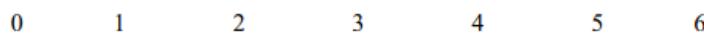
1. Jeg kan nyde ting, **på trods af smerterne**.



Slet ikke sikker

Helt sikker

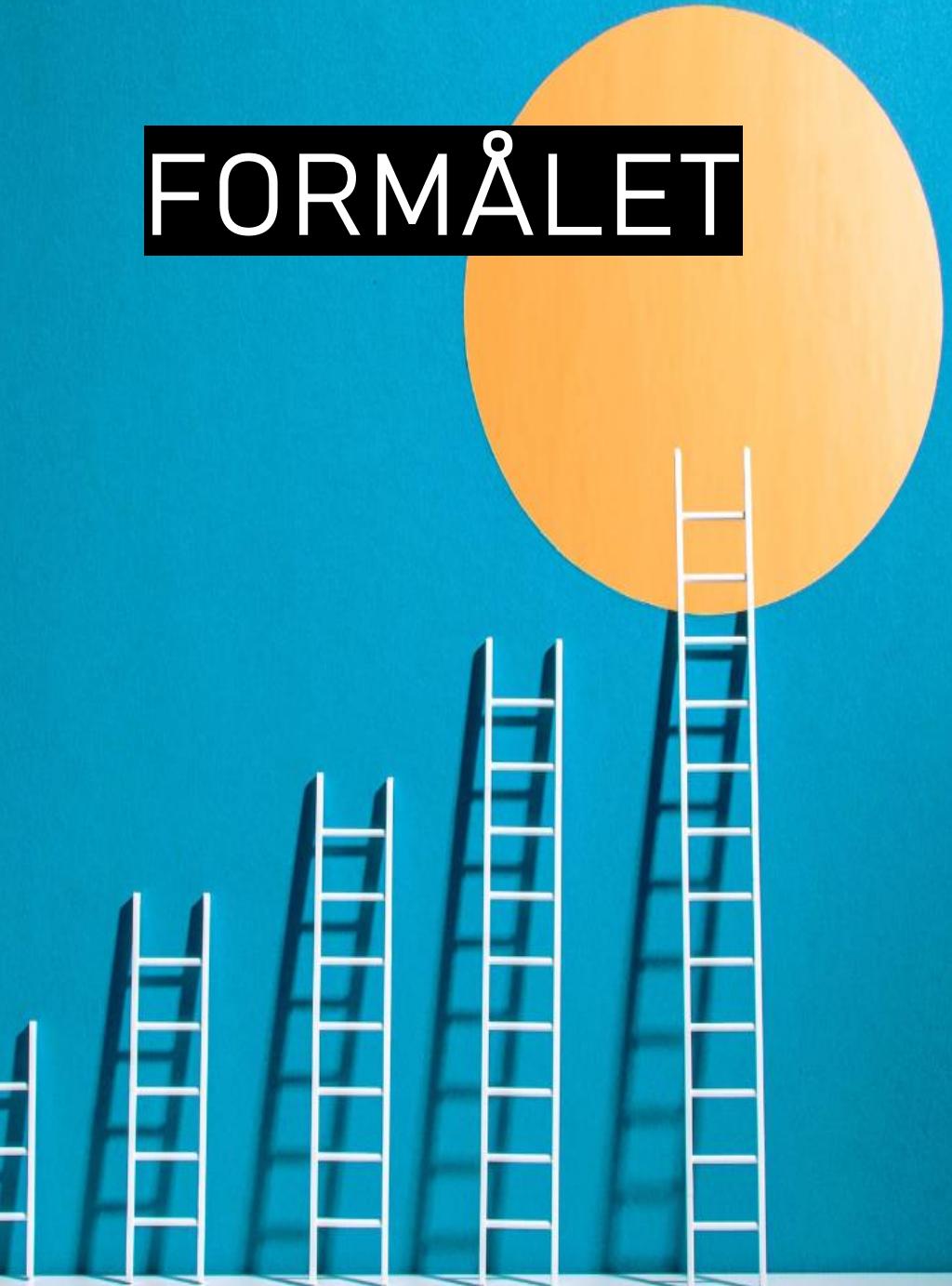
2. Jeg kan lave de fleste former for husarbejde (f. x. oprydning, opvask etc.), **på trods af smerterne**.



Slet ikke sikker

Helt sikker

# FORMÅLET



- Undersøge reliabilitetsparametrene: **Test-retest reliabiliteten, measurement error, Standard Error of Meassuremt (SEM) & Smallest Dectable Change (SDC)** samt **Internal consistency** af den danske version af PSEQ
- Undersøge **samstemmende validitet mellem PSEQ, funktionstab (ODI), smerteintensitet (NRS) og kinesiopfobi (TSK-11)**

# DELTAGER

Patienter (> 18 år) med subakutte eller kroniske lænderygsmerter (> 6 uger) med eller uden udstrålende smerter, henvist til et rygambulatorie

# METODE

## Inklusion

På hospitalet efter 1.  
konsultation hos os  
(2 min, scan QR kode)

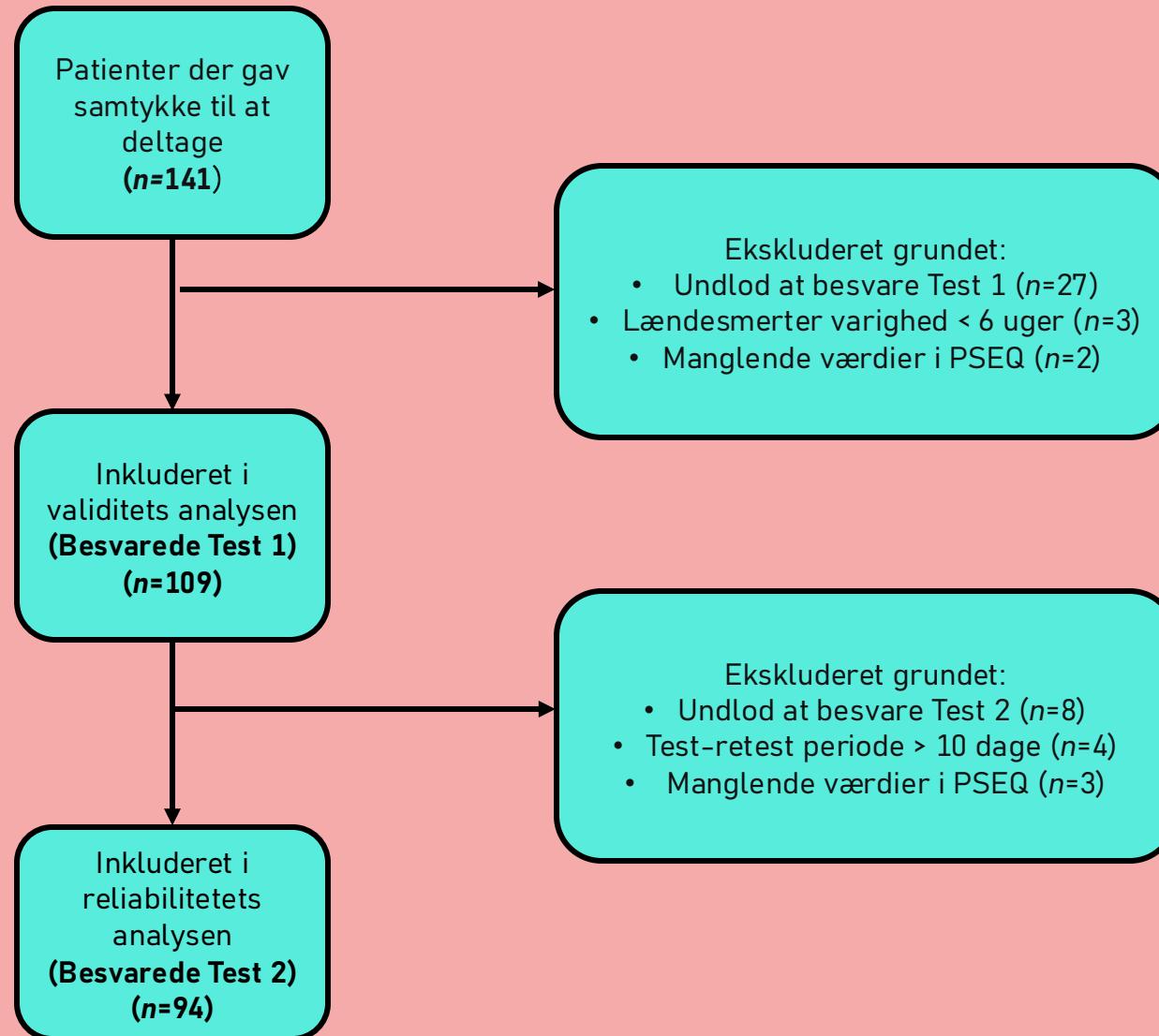
## Test 1

2 dage efter  
hospitalsbesøget  
Mail med link til P-SEQ,  
TSK-11, ODI & NRS  
(20 min, hjemme på device)

## Test 2

5 dage efter test 1  
Mail med link til P-SEQ  
(5 min, hjemme på device)

# FLOWDIAGRAM



# RESULTATER

Test-rest  
reliabilitet

$ICC_{2,1} = 0,89$   
(95% CI = 0,82–0,92)

SEM

4,52 point

$SDC_{95}$

12,52 point

Internal  
consistency

Chronbach's A. =  
0,93

Samstemmende  
validitet

Høj grad

# KONKLUSION

Disse fund indikerer, at den danske version af PSEQ er egnet til brug blandt patienter med subakutte og kroniske lænderygsmerter i ambulatorier i hospitalssektoren.



# IMPLEMENTERING I KLINISK PRAKSIS

Tiden går stærkt  
Ændringer i  
ambulatoriet

DE GRUYTER  
**Clinical Pain Research**  
Mette Errebo\*, Martin Oxfeldt, Heidi Tegner, Jan Christensen  
**Psychometric evaluation of the Danish version of the Pain Self-Efficacy Questionnaire in patients with subacute and chronic low back pain**

<https://doi.org/10.1515/jpnan-2024-0032>  
received April 11, 2024; accepted August 29, 2024

**Abstract** — The Pain Self-Efficacy Questionnaire (PSEQ) is a widely used patient-reported outcome measure designed to assess the beliefs that patients have about their low back pain (LBP). Although the PSEQ has been translated into Danish, its measurement properties remain unknown in patients with LBP. The aim of this study was to investigate the construct validity, internal consistency, test-retest reliability, and measurement error of the Danish version of the PSEQ in a group of Danish patients with subacute and chronic LBP.

**Methods** — Patients with LBP referred to two Danish outpatient clinics were recruited for this study. Two days after the consultation, they completed a questionnaire including a survey that included the following outcome measures: the PSEQ, the Oswestry Disability Index, the Numeric Pain Rating Scale, and the Roland Morris Questionnaire. Five days after completion of the survey, a new survey that included the PSEQ was sent to the same patients.

**Results** — In total, 109 participants were included for the analysis of construct validity and internal consistency, while 14 participants included for the analysis of test-retest reliability and measurement error. Construct validity was found to be acceptable, with Cronbach's alpha = 0.93 (95% confidence interval [CI] = 0.91–0.93). Test-retest reliability was found to be good, with an intraclass correlation coefficient ( $ICC_{2,1}$ ) of 0.89

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was calculated to be 4.52 and the smallest detectable change was 12.5 points.

Conclusion — The Danish version of the PSEQ showed acceptable measurement properties in terms of construct validity, internal consistency, and test-retest reliability in a group of patients with subacute and chronic LBP. However, further studies are needed to investigate other aspects of the measurement properties.

**Keywords:** pain self-efficacy, low back pain, measurement properties, reliability, validity

**1 Introduction**

Globally, low back pain (LBP) is a common condition, with a prevalence of 56.4 million in 2019 [1]. It is the leading cause of years lived with disability [1,2] and affects a range of dimensions of patients' lives, such as decreased physical function and reduced work ability, thereby affecting the personal, social, and economic situation and health-related quality of life [3,4]. Many factors, such as genetic predisposition, care, catastrophizing, and self-efficacy, have been linked to the development of persistent disability [3].

Self-efficacy is a psychological construct that describes the individual's belief in his or her capacity to attain certain goals and specific tasks [5]. According to a systematic review and meta-analysis by Lee et al., self-efficacy is a significant mediator influencing the relationship between



Overgang til  
kommunerne

Andre  
forskningsprojekter



# STOR TAK

Ambulatorie fysioterapeuterne på  
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Forfattergruppen: Martin Oxfeldt,  
Heidi Tegner & Jan Christensen

TID TIL  
SPØRGSMÅL

