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# The prevalence of fear avoidance and pain catastrophising in patients with chronic neck pain attending private physiotherapy in Johannesburg

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**Re-examination Corrections - 13 November 2017**

**Clare Cresswell - 7903553**

| **Examiner's suggestion** | **correction** | **Page number** |
|---|---|---|
| 1. In methods I suggest writing in full TSK-11 and PCS | Tampa Scale for Kinesiophobia-11 (TSK-11) and the Pain Catastrophising Scale (PCS) | Pg iii line 17 |
| 2. Correct grammar to reflect accurate meaning – "The prevalence of the TSK-11-Total was 25.5% (n=106) of those who participated in the study." | The TSK-11–Total showed a mean score of 22.9 and 25.5% of the participants (n=106) presented with significant fear avoidance measured on theTSK-11-Total scale. | Pg iv line 4 |
| 3. Change | ≥=30 | Pg iv line 8 |
| 4. Numbering 1.1.1 redundant | 1.1 INTRODUCTION<br>Pain is a complex | Pg 1 line 2 |
| 5. Stick to pain catastrophising throughout rather than pain catastrophisation | **Pain Catastrophising and Chronic Pain** | Pg 6 line 25 |
| 6. Provide reference | contributors or tertiary pathological responses to pain (Siddall and Cousins, 2004). | Pg 10 line 6 |
| 7. Grammatical correction in sentences 2 & 3 in this paragraph | Other studies indicate figures of between 4.6% and 6.3% of individuals who do not recover completely from their neck pain and consequent disability (Côté et al., 1998, Côté et al., 2004, Picavet and Schouten, 2003). These were large population-based, cross-sectional prevalence studies where the population sizes ranged between 1100 and 8000 individuals from Canadian and Dutch nationals. | Pg 12 line 18 |
| 8. "However" suggests contradiction – but not sure it is a contradiction | Furthermore, a systematic | Pg 16 line 27 |
| 9. Pg 28 – space neede above Heading 2.8 | ….chronic pain. | Pg 28 line 6 |

| | | |
|---|---|---|
| | 2.8 FEAR AVOIDANCE, PAIN CATASTROPHISING | |
| 10. Of | 6.3% of individuals | Pg 40 line 10 |
| 11. Spelling | asked to identify appropriate | Pg 43 line 12 |
| 12. Table 4.1 on one page | Done | Pg 51 line 8 |
| 13. Pg 60, table 4.8 I see you have inserted the names of the statistical tests in response to my comment. My apologies, I was not clear in my suggestion. What I would suggest rather in line with many journal guidelines is to present the test statistic as well as the p value. For example, if an Unpaired t-test was performed, report the t value and the p value | See table below this table | Pg 59 line 16 |
| 14. Reporting reliability levels –<br>• Pg 63- reporting the reliability levels, rather than stating at the end of the paragraph that reliability was measured using Cronbach's alpha, simply report the results as Cronbach's α=0.85 | were α=0.85, α=0.75 and α=0.77 respectively and the reliability level for the PCS-Total and its subscales, PCS-R, PCS-M and PCS-H, were α=0.95, α=0.93, α=0.75 and α=0.91 respectively. | Pg 62 line 16 |
| 15. Association corrected to associations | further analysis explored associations between fear avoidance | Pg 63 line 5 |
| 16. Remove extra full stop | …participants. In a | Pg 66 line 28 |
| 17. Remove extra full stop | …adopted (Sullivan et al., 1995). The | Pg 67 line 15 |
| 18. Sentence too long and confusing | … as postulated by Valencia et al. (2011). Furthermore, research emphasises the importance | Pg 72 line 28 |

| | | |
|---|---|---|
| 19. Correction reportedtwo | relationship has been reported where two studies show an association | Pg 73 line 8 |
| 20. Kinesiology to kinesiophobia | Tampa Scale for Kinesiophobia-11 (TSK-11) questionnaire | Pg 80 line 34 |
| 21. Highlights to highlighting | ….limitations are worth highlighting. The sample… | Pg 83 line 25 |

**Table 4.8: Association between the Demographic Variables and the TSK and the PCS**

| Variable | TSK | PCS |
|---|---|---|
| **Gender** | Unpaired t-test<br>F(1,104)=1.7<br>p=0.19 | Wilcoxon rank sum test<br>Z=1.43<br>p=0.15 |
| **Age** | Pearson's correlation coefficient<br>rho= -0.08<br>p=0.43 | Spearman's correlation coefficient<br>rho= -0.11<br>p=0.27 |
| **Highest Level of Education** | Unpaired t-test<br>T=2.5<br>p=0.013 | Wilcoxon rank sum test<br>Z=0.99<br>p=0.32 |
| **Employment status** | One-way ANOVA<br>F(2,101)=0.79<br>p=0.46 | Kruskal-Wallis test<br>H(2, N= 104) = 0.06<br>p=0.97 |
| **Marital Status** | Unpaired t-test<br>F(1,104)=0.81<br>p=0.37 | Wilcoxon rank sum test<br>Z=0.29<br>p=0.29 |
| **Reduced Work Due to Pain** | Unpaired t-test<br>F(1,96)=0.92<br>p=0.34 | Wilcoxon rank sum test<br>Z=1.56<br>p=0.12 |
| **Pain Duration** | Spearman's correlation co-efficient<br>rho = -0.08<br>p=0.43 | Spearman's correlation coefficient<br>rho= -0.16<br>p=0.09 |