Re-examination Corrections - 13 November 2017

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