The patient’s perspective: First field study of a novel Parkinson’s Disease Pain Questionnaire (King’s PD Pain Quest)

Alexandra M Rizos¹, Pablo Martinez-Martín², Suvankar Pal³, Camille Carroll⁴, Davide Martino⁵, Belinda Kessel⁶, Antoniya Todorova¹, Anna Sauerbier¹, Anne Martin¹, Miriam Parry⁷, Sandeep Bassi¹, Rona Inniss¹, Panagiotis Zis¹, Per Odin⁸, Angelo Antonini⁹, Cristian Falup-Pecurariu¹⁰, K Ray Chaudhuri, DSc¹¹ on behalf of EUROPAR and the IPMDS Non-Motor PD Study Group

1King’s College Hospital, London, UK; 2National Center of Epidemiology and CIBERNED Carlos III Institute of Health, Madrid, Spain; 3Forth Valley Royal Hospital, Scotland, UK; 4Derriford Hospital, Plymouth, UK; 5Queen Mary’s Hospital, Kent, UK; 6Princess Royal University Hospital, Orpington, UK; 7University Hospital Lewisham, London, UK; 8University of Lund, Lund, Sweden; 9University of Padua, Venice, Italy; 10Transylvania University, Brasov, Romania and 11King’s College London, King’s College Hospital, University Hospital Lewisham, London, UK.

OBJECTIVE: To develop an “easy to use” novel clinical Parkinson’s Disease (PD) specific pain questionnaire, complimentary to the King’s PD Pain Scale, which can be completed by patients themselves.

BACKGROUND:
- Pain is an under-explored and poorly characterised non-motor symptom of PD and a major determinant of quality of life.¹
- The first Parkinson’s specific scale (King’s PD Pain Scale) has been recently developed to characterise the various types of pain in PD and to allow for focussed treatment.
- The first field testing of PD Pain Scale has been reported.
- To date, no specific pain related self declaration tools are available.

RESULTS 1:
- We report data from 180 patients and 123 controls.
- In PD patients all assessed types of pain were present. Most frequent and least reported types of pain by patients and controls: see graph.

## Demographics

<table>
<thead>
<tr>
<th>Patients</th>
<th>Number/mean (median)</th>
<th>Range/ %</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number (Males: Females)</td>
<td>180 (113: 67)</td>
<td>62.8%: 37.2%</td>
</tr>
<tr>
<td>Age (yrs) ± SD</td>
<td>64.4±11.4</td>
<td>29 – 85</td>
</tr>
<tr>
<td>Duration of Disease (yrs) ± SD</td>
<td>5.5±5.0</td>
<td>0 – 26</td>
</tr>
<tr>
<td>Hoehn &amp; Yahr Stage</td>
<td>2.0 (median)</td>
<td>1.0 – 5.0</td>
</tr>
<tr>
<td>Controls</td>
<td>No (Males: Females)</td>
<td>123 (72:51)</td>
</tr>
<tr>
<td>Age (yrs) ± SD</td>
<td>58.2±15.9</td>
<td>20 – 89</td>
</tr>
</tbody>
</table>

RESULTS 2:
- Differences between patients and controls reached significance level for musculoskeletal, dystonic, RLS related and radicular pain (p<0.05, chi-square test).
- Dyskinetic and “off” related pain does not apply to non-PD controls and therefore were only assessed in patients.

REFERENCES:
- King's PD Pain Quest

CONCLUSIONS: Interim results suggest the PD Pain Quest may be a useful self-completed tool complimentary to the PD pain scale for assessment of patient reported pain in PD.