## **PROMIS – Pain Interference**

This questionnaire asks about your pain and its effect on different activities. Please answer all questions to the best of your ability based on the last week. If you have not performed the activity in the last week, please respond with the response that would be the most accurate.

Please respond to each question or statement by marking one box per row.

In the past 7 days		Not at all	A little bit	Somewhat	Quite a bit	Very much
		1	2	3	4	5
1.	How much did pain interfere with your day to day activities?					
2.	How much did pain interfere with work around the home?					
3.	How much did pain interfere with your ability to participate in social activities?					
4.	How much did pain interfere with your household chores?					
5.	How much did pain interfere with the things you usually do for fun?					
6.	How much did pain interfere with your enjoyment of social activities?					
7.	How much did pain interfere with your enjoyment of life?					
8.	How much did pain interfere with your family life?					

T	^	ta	ı	C	_	^	ro	
•	u					u	16	٠.

## Interpretation

Total Score is the individual raw scores summed and then converted to a T-score. The T-Score standardizes the score with a mean of 50 and standard deviation of 10. For pain interference, a T-score of 60 is one standard deviation worse than average. That is, a person has more problems with pain hindering activities. By comparison, a pain interference T-score of 40 is one standard deviation better than average.

Higher scores = more pain interference (undesirable). Lower scores = less pain interference (desirable).

## Minimally Clinically Important Difference (MCID)

+ improvement - deterioration

Rheumatoid Arthritis: MCID = +1.1, -1.8.

Stroke: MCID = +2.0, -3.1.

Chronic Back Pain or Hip or Knee Osteoarthritis Pain: MCID = +2.4, -2.4.

These are published values for specific populations and provide guidance if the patient does not have the listed condition.

## Selected References

- 1. Amtmann D, Cook KF, Jensen MP, et al. Development of a PROMIS item bank to measure pain interference. *Pain*. 2010;150(1):173-182.
- Askew RL, Cook KF, Revicki DA, et al. Evidence from diverse clinical populations supported clinical validity of PROMIS pain interference and pain behavior. *J Clin Epidemiol*. 2016;73:103-111.
- 3. Cook KF, Jensen SE, Schalet BD, et al. PROMIS measures of pain, fatigue, negative affect, physical function, and social function demonstrated clinical validity across a range of chronic conditions. *J Clin Epidemiol*. 2016;73:89-102.
- Terwee, CB, Peipert JD, Chapman R, et al. Minimal important change (MIC): a conceptual clarification and systematic review of MIC estimates of PROMIS measures. Qual Life Res. 2021;30(10):2729-2754.