

Flex Therapist CEUs

Low Back Pain: The Role of Fear

The Back Belief Questionnaire is efficient to assess false beliefs and related fear in low back pain populations: A transcultural adaptation and validation study

1. Cortical processes are involved in the integration of multidimensional aspects of pain.

- A. True**
 - B. False**
-

2. Most LBP patients believe that back pain will be all of the following, except:

- A. Mean pain for the rest of their life.**
 - B. Limit daily life activities or work to some individual extent.**
 - C. Lead to severe impairment.**
 - D. They believe all the above will occur.**
-

3. The results of this study suggest that the Back Belief Questionnaire should not be used for evaluation in international trials or as a part of self-care training.

- A. True**
 - B. False**
-

Fear of Movement Is Related to Trunk Stiffness in Low Back Pain

4. Which psychological factor is likely to influence motor output and alter trunk mechanical behavior?

- A. Emotions**
 - B. Cognitions**
 - C. Behaviors**
 - D. Emotional, cognitive, and behavioral psychological factors are all likely to influence motor output and alter trunk mechanical behavior**
-

5. All of the following are aspects of the fear-avoidance model, except for:

- A. Distress
 - B. Fear of movement / re-injury
 - C. Pain catastrophizing
 - D. Avoidance behavior
-

6. Higher measures of kinesiophobia were associated with higher measures of _____ in response to a forward perturbation.

- A. Trunk stiffness
 - B. Trunk damping
 - C. Both trunk stiffness and trunk damping
 - D. Neither trunk stiffness nor trunk damping
-

7. Trunk mechanical properties were associated with:

- A. Measures of disability
 - B. Measures of depression
 - C. Pain-related fear measures
 - D. Trunk mechanical properties were not associated with measures of disability or depression, nor pain-related fear measures
-

8. One interpretation of the present data is that biomechanic manifestations of pain are most closely associated at the catastrophization stage of the fear-avoidance model, rather than the pain-related fear stage.

- A. True
 - B. False
-

Altered Postural Sway and Fear of Fall in Patients Suffering from Non-specific Low Back Pain

9. The performance of the postural balance system is affected by:

- A. Age
 - B. Neurological dysfunctions
 - C. Cerebro cranial injuries
 - D. Age, neurological dysfunctions, and cerebro cranial injuries all affect the performance of the postural balance system
-

10. Low back pain is usually defined as pain, muscle tension, or stiffness localized below the costal margin and above the inferior gluteal folds, with or without leg pain.

- A. True**
 - B. False**
-

11. Chronic low back pain is defined as the duration of an episode of LBP persisting for 6 weeks or more.

- A. True**
 - B. False**
-

12. This study found a significant difference between the sway in the LBP group and the control group.

- A. True**
 - B. False**
-

13. A positive correlation between the perceived fear of fall and sway in LBP individuals was found when persons with LBP were:

- A. Standing on foam with eyes open.**
 - B. Standing on foam with eyes closed.**
 - C. Standing on the floor with eyes closed.**
 - D. A positive correlation was found when persons with LBP had their eyes closed, regardless if they were standing on foam or the floor.**
-

14. While standing on foam, to control postural balance the CNS of the healthy person:

- A. Up weighted the proprioceptive signals from the Paraspinal muscles.**
 - B. Down weighted the proprioceptive signals from ankle muscles.**
 - C. Both up weighted the proprioceptive signals from the Paraspinal muscles and down weighted the proprioceptive signals from ankle muscles.**
 - D. Neither up weighted the proprioceptive signals from the Paraspinal muscles nor down weighted the proprioceptive signals from ankle muscles.**
-

A Review of Relationship between Fear Avoidance Beliefs and Postural Stability in Non Specific Chronic Low Back Pain

15. All of the following factors influence progression of acute or sub-acute LBP to chronicity of LBP, except for:

- A. High level of psychological distress
 - B. Being the main caretaker in the home
 - C. Dissatisfaction with employment
 - D. Higher initial disability level
-

16. Psychosocial factors like the patient's attitudes and beliefs, pain and movement fear, stress, depression, job satisfaction, self confidence, and self assurance are very important in CLBP.

- A. True
 - B. False
-

17. According to the model explained by Cox et al., _____ is determined by the relation between sensory and emotional components of pain.

- A. The patient's fear of pain
 - B. Avoidance behavior
 - C. Both the patient's fear of pain and the subsequent avoidance behavior
 - D. Neither fear of pain nor avoidance behavior
-

18. Pain-related fear refers to a condition in which the patient has _____ fear of physical movement and activity, resulting in feelings of vulnerability to painful injury or re-injury.

- A. An excessive
 - B. An irrational
 - C. A debilitating
 - D. Excessive, irrational, and debilitating
-

19. Optimal reaction time is an essential requirement to perform daily activities.

- A. True
 - B. False
-

20. All of the following factors may contribute to control postural stability, except for:

- A. Reaction time
 - B. Muscle endurance
 - C. Age
 - D. Neurological disorders
-

21. The influence of LBP on postural balance is complex and affected by all of the following co-existing factors, except for:

- A. Fear of pain**
 - B. Low body mass index**
 - C. Positive neurologic findings**
 - D. Adoption of an alternate movement strategy**
-

22. Which of the following has been hypothesized as the most important psychosocial factor in predicting disability and work time loss among patients with chronic low back pain?

- A. Fear-avoidance beliefs**
 - B. Depression**
 - C. Dissatisfaction with employment**
 - D. Dissatisfaction with employment, depression, and fear-avoidance beliefs have all been hypothesized as the most important psychosocial factors in predicting disability and work time loss among patients with CLBP**
-

23. Sajjadian et al. showed that pain was positively related to all of the following, except for:

- A. Fear-avoidance beliefs**
 - B. Catastrophizing**
 - C. Depression**
 - D. Anxiety**
-

24. In patients with CLBP, the single predictor of disability found by George et al. was:

- A. Fear-avoidance behavior**
 - B. Catastrophizing**
 - C. Severity of pain**
 - D. Anxiety**
-

25. Which of the following was found by Waddell et al. to be a predictor of disability?

- A. Severity of pain**
 - B. Fear-avoidance behavior**
 - C. Both severity of pain and fear-avoidance behavior**
 - D. Neither severity of pain nor fear-avoidance behavior**
-

26. The most important finding by Ruhe et al. was that higher intensity of pain perception is related to COP measurements, which explains why in all studies pain

intensity is related to the postural stability.

- A. True**
 - B. False**
-

27. Neurological alterations may only have an impact on COP measures at high intensities of pain (i.e., more than 8 on the numeric rating scale of pain).

- A. True**
 - B. False**
-

28. As pain interference appears a likely underlying mechanism, the focus of a rehabilitative approach in pain sufferers with increased COP excursions should be on:

- A. Proprioceptive training rather than pain reduction**
 - B. Pain reduction rather than proprioceptive training**
 - C. Pain reduction and proprioceptive training equally**
 - D. Patient education**
-

Physical activity and the mediating effect of fear, depression, anxiety, and catastrophizing on pain related disability in people with chronic low back pain

29. Fear, catastrophizing, and depression explained the relationship between pain and disability in its entirety in patients with chronic LBP.

- A. True**
 - B. False**
-

30. The mediating effect of fear was found to be conditional upon physical activity.

- A. True**
 - B. False**
-

31. Performing exercise alone is likely not sufficient to reduce fear of movement and therefore pain related disability in people with chronic low back pain.

- A. True**
 - B. False**
-

32. Catastrophizing is defined as:

- A. An unpleasant emotion caused by the belief that pain will occur during movement.**
 - B. An exaggerated negative interpretation of pain that may occur during an actual or anticipated pain experience.**
 - C. Keeping away from movement or stopping oneself from doing activity.**
 - D. A mental condition that limits a person's movements, senses, or activities.**
-

33. This study's analysis of people with chronic back pain revealed that the indirect effect of _____ was conditional upon reporting engagement with weekly structured physical activity.

- A. Catastrophizing**
 - B. Fear**
 - C. Depression**
 - D. Catastrophizing, fear, and depression were all conditional upon engagement with weekly structured physical activity**
-

34. Catastrophizing had no influence on the pain-disability relationship for chronic back pain patients who reported no weekly structured physical activity.

- A. True**
 - B. False**
-

35. Two prospective studies showed that early changes in catastrophizing after injury or following early engagement with a treatment provider for musculoskeletal pain do not:

- A. Precede changes in fear**
 - B. Predict changes in disability**
 - C. Predict changes in depression**
 - D. Precede changes in fear or predict changes in disability or depression**
-

36. The data of this study supports current recommendations that psychological counseling with regards to _____ should be a standard treatment inclusion for people with chronic low back pain.

- A. Fear**
 - B. Depression**
 - C. Fear and depression**
 - D. Fear, depression, and anxiety**
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