

LEEDS ASSESSMENT OF NEUROPATHIC SYMPTOMS AND SIGNS (LANSS)

SPANISH (CASTILIAN) TRANSLATION

Bibliographic information for original (English) questionnaire

Bennett M. The LANSS pain scale: the Leeds assessment of neuropathic symptoms and signs. *Pain* 92: 147-157, 2001.

PubMed identifier (PMID): <http://www.ncbi.nlm.nih.gov/pubmed/11323136>

Bibliographic information for translated (Brazilian Portuguese) questionnaire

Reference

Perez C, Galvez R, Insauti, Bennett M, Ruiz M, Rejas J, Group for the study of Spanish validation of LANSS. Linguistic adaptation and Spanish validation of the LANSS (Leeds assessment of neuropathic symptoms and signs) scale for the diagnosis of neuropathic pain. *Medicina Clinica (Barc)* 127: 4854-91, 2006 [Article in Spanish]

PMID: <http://www.ncbi.nlm.nih.gov/pubmed/17043002>

Contact details of author

Name: Concepción Pérez

Email: javier.rejas@pfizer.com

Properties of the translated questionnaire

Purpose

Diagnostic/screening: To identify whether pain is likely to be neuropathic in origin.

Language

Spanish (Castilian)

Translation process:

Duplicate forward and reverse translation, with consensus discussions after each translation phase and testing of the translated questionnaire in a pilot sample of 13 patients. Forward translation was by performed two native Spanish speakers. Reverse translation was performed by two native English speakers.

Changes from original questionnaire:

A figure was added to the item addressing changes in pin-prick threshold to improve understandability of the testing procedure.

TRANSLATION AND VALIDATION: SPANISH (CASTILIAN) LANSS

Assessment

SYMPTOMS:

Five items addressing pain quality and pain triggers

SIGNS:

Two sensory function tests (requires a suitably trained person to administer the instrument)

- Dynamic mechanical allodynia (light brushing)
- Altered pin-prick threshold

Scoring system

Responses to all seven items (five symptoms and two signs) are binary ('yes' or 'no'). Responses are weighted according to the odds ratio of each item when predicting whether a pain is neuropathic in origin (based on the original LANSS validation by Bennet et al. Pain 92: 147-157, 2001). Weighted scores for the five symptom items and two sensory tests are summed, giving a total score from 0 to 24.

Scoring direction

Score < 12 indicates that the pain is unlikely to be neuropathic in origin

Score ≥ 12 indicate that the pain is likely to be neuropathic in origin

Validation population

One-hundred and fifty-six patients diagnosed clinically with either neuropathic pain (n = 89; of which 22 had mixed pain) or nociceptive (n = 67) pain were recruited from hospital referral sites. The neuropathic pain group had a significantly greater proportion of women than the nociceptive pain group (66% vs. 53%), was significantly older than the nociceptive pain group (67 years vs. 60 years), and had a greater Body Mass Index than the nociceptive pain group (28.7 kg/m² vs. 26.2 kg/m²). The two groups reported similar average pain intensity in the last week, and similar levels of pain at the time of the interview. Participants were assessed twice, no more than two days apart, by two independent observers who had been trained in the use of the instrument.

Psychometric properties

Diagnostic validity (using a threshold score ≥ 12; other threshold scores were assessed, but provided poorer discrimination)

Sensitivity: 89.4%

Specificity: 90.3%

Positive predictive value: 91.1%

TRANSLATION AND VALIDATION: SPANISH (CASTILIAN) LANSS

Negative predictive value: 86.2%

Construct validity

Not assessed

Convergent/criterion validity

Not assessed

Reliability

Inter-rater agreement: Good (Cohen's kappa coefficient = 0.70)

Inter-rater reliability: Good (intra-class correlation coefficient ranged between 0.77 and 0.92 for the seven items)

Internal consistency: Moderate (Cronbach's alpha = 0.70)

Validation studies of translated questionnaire for specific pain conditions

n/a

Additional information

n/a