LEEDS ASSESSMENT OF NEUROPATHIC SYMPTOMS AND SIGNS (LANSS)

TURKISH 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 (Turkish) questionnaire

Reference

Yucel A, Senocak M, Orhan EK, Cimen A, Ertas M. Results of the Leeds assessment of neuropathic symptoms and signs pain scale in Turkey: A validation study. Journal of Pain 5: 427-432, 2004

PMID: http://www.ncbi.nlm.nih.gov/pubmed/15501424

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Properties of the translated questionnaire

Purpose

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

Language

Turkish

Translation process:

Forward and reverse translation. Forward translation was performed by a native Turkish speaker who was fluent in English. Reverse translation was performed by a native English speaker who was fluent in Turkish, and who had not seen original English version of the questionnaire.

Changes from original questionnaire:

None

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 one (101) outpatients diagnosed clinically with either neuropathic (n = 49) or nociceptive (n = 52) pain were recruited from a hospital-based pain service. There were no significant differences between the groups with respect to age and sex ratio. Patients were assessed once with the LANSS.

(Patients with cancer pain or mixed pain were excluded from the study)

Psychometric properties

Discriminant validity (using a threshold score ≥ 12)

Sensitivity: 89.9%

Specificity: 94.2%

Positive predictive value: 93.6%

Negative predictive value: 90.7%

Construct validity

Not assessed

Convergent/criterion validity

Not assessed

Reliability

Not assessed

Validation studies of translated questionnaire for specific pain conditions

None

Additional information

None