

The Effect of Catastrophizing on Pressure Pain

Fall 2010 Research Seminar
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Catastrophizing and Pain

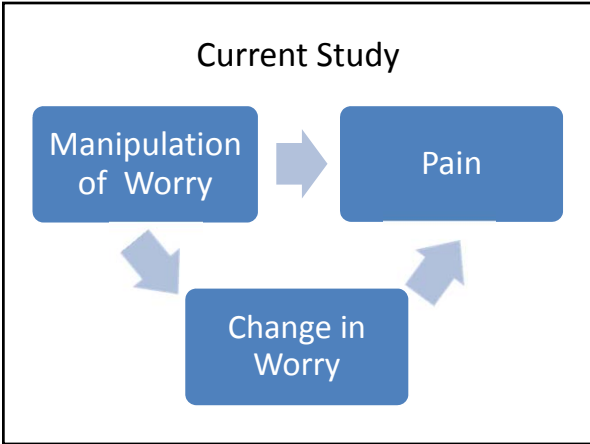
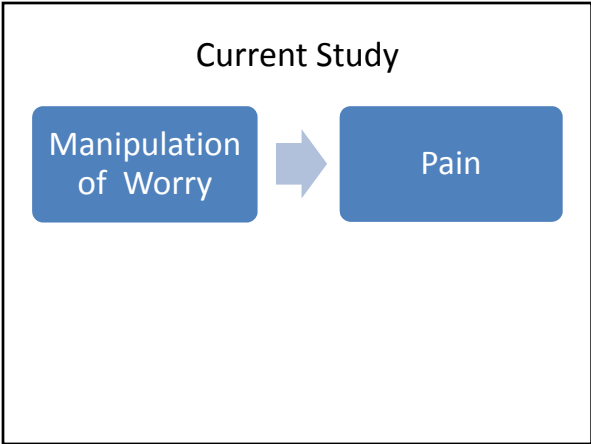
- Coping method: Set of negative cognitions relating to pain
 - Higher levels have been found to be associated with higher levels of pain, disability, and depression
 - Most measures of Pain Catastrophizing ask people to rate their “General” level
 - Recent research has shown that “Specific” catastrophizing is more accurate
 - Never been manipulated

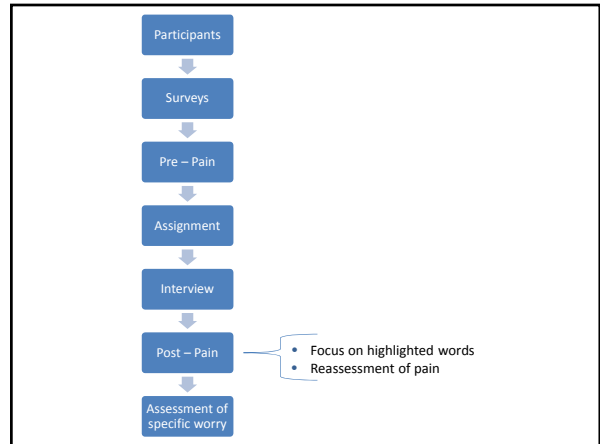
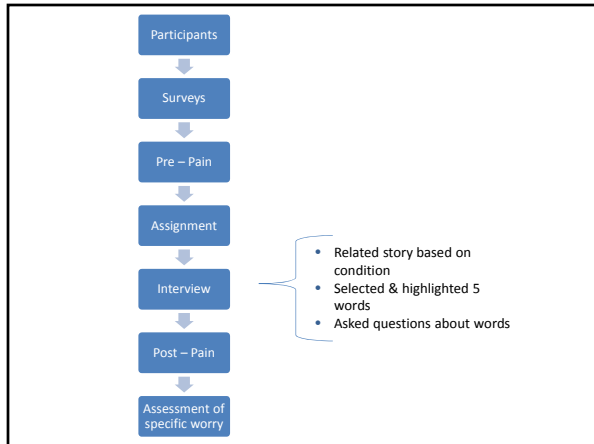
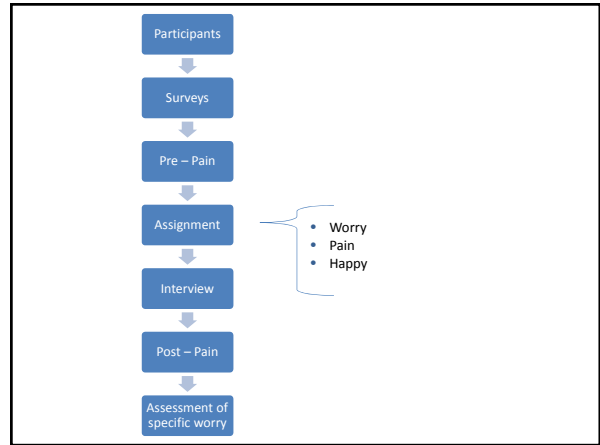
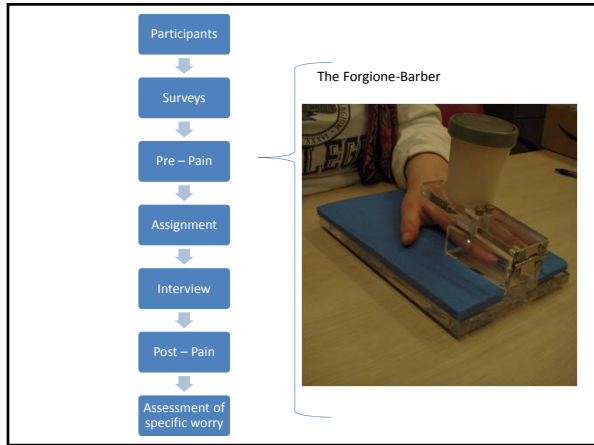
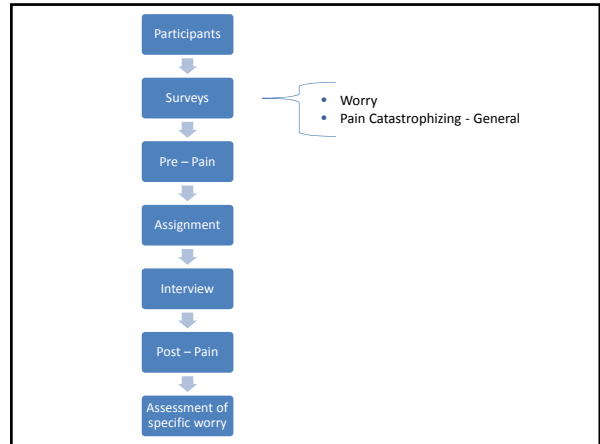
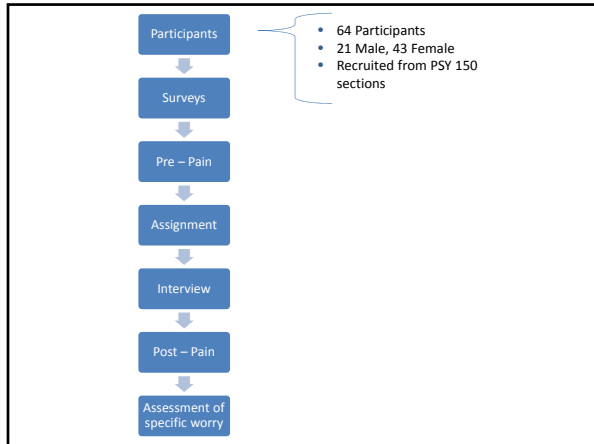
Catastrophic Worry

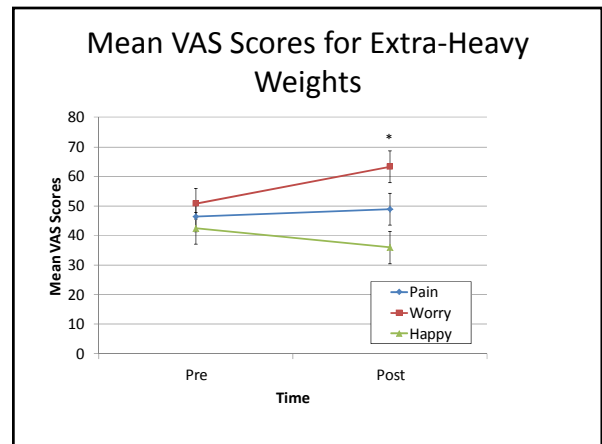
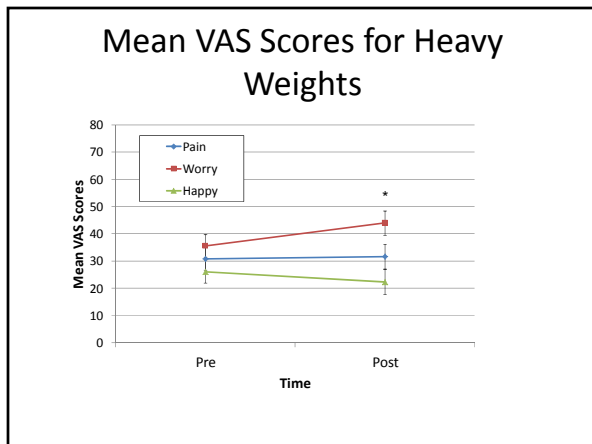
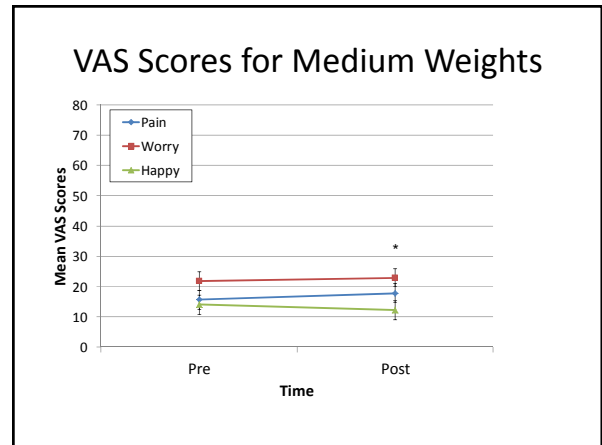
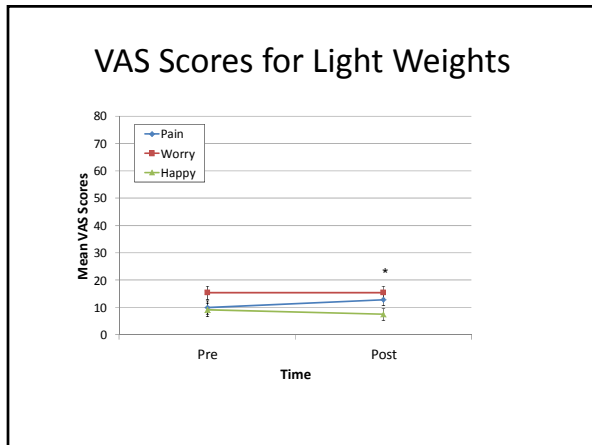
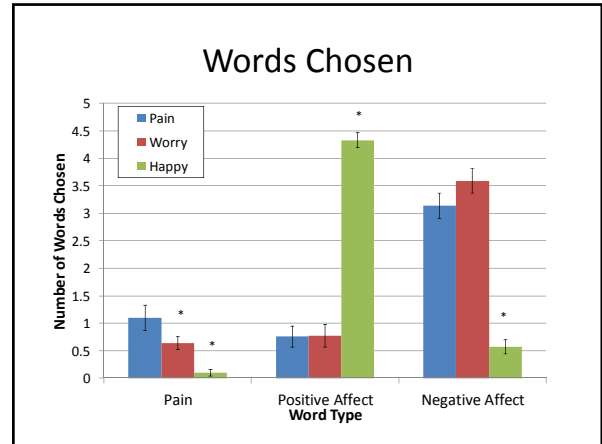
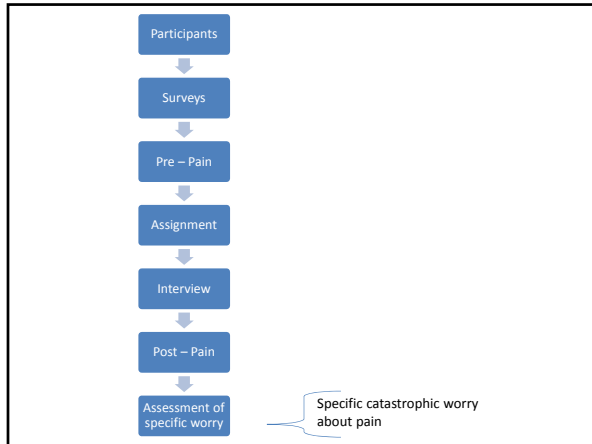
- Researched mainly in anxiety disorders
 - A series of “what if” statements
 - Personal inadequacies
 - People higher on catastrophic worry tend to ruminate more, generate more worries even with positive and neutral stimuli, magnify negative stimuli
 - Manipulated by looking at content of stories

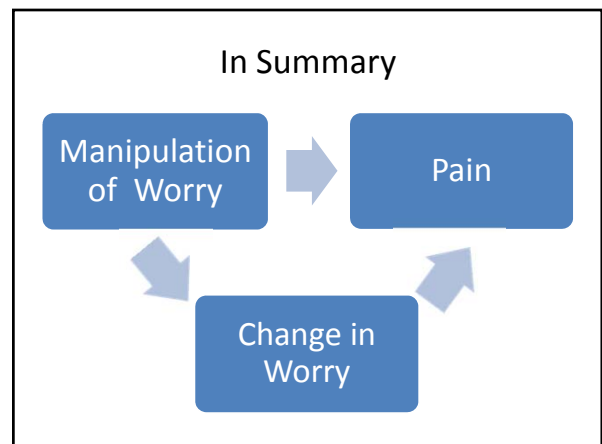
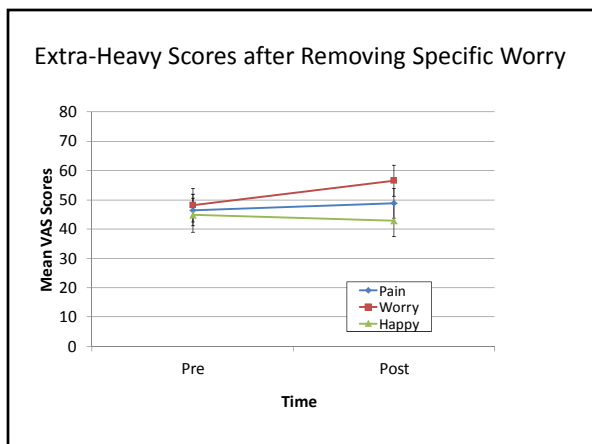
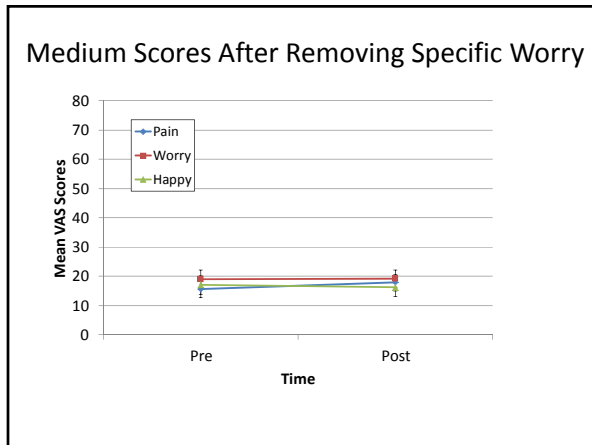
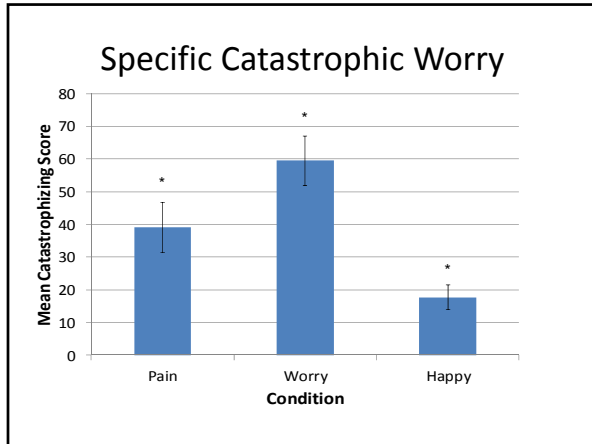
Current Line of Research

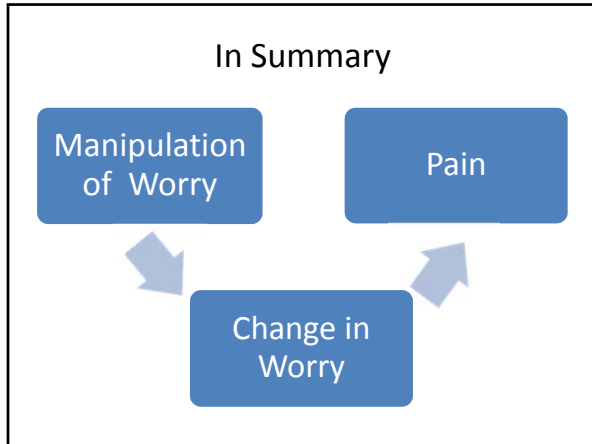
- Catastrophizing is supposed to be a coping strategy. This means that it should be malleable and respond to environment
- However, researchers have started to refer to it as a stable personality trait
- Previous research groups attempted with limited success to manipulate catastrophizing











Relevance

- Catastrophizing is not a stable personality trait.
- If catastrophizing can be manipulated, then methods of de-catastrophizing can be more effective for reducing pain and anxiety.

Limitations

- Need to better ensure participants were focusing on words
- Different populations (chronic pain, depressed individuals, etc.)
- Consistency in Pre/Post assessment of catastrophic worry about pain

Summary

- According to our results, catastrophizing can be manipulated in acute pain.
- This can be done by encouraging an individual to think about personal inadequacies related to pain.