Tampa Scale of Kinesiophobia (TSK)

Description
The TSK is a 17-item self report checklist using a 4-point Likert scale that was developed as a measure of fear of movement or (re)injury. Kinesiophobia is defined by the developers as “an irrational, and debilitating fear of physical movement and activity resulting from a feeling of vulnerability to painful injury or re-injury” (Kori et al., 1990). The scale is based on the model of fear avoidance, fear of work related activities, fear of movement and fear of re-injury (Vlaeyen et al., 1995). The TSK has also been linked to elements of catastrophic thinking (Burwinkle et al., 2005). The scale can be useful in measuring unhelpful thoughts and beliefs about pain in people with chronic pain or fibromyalgia.

Validity
Roelofs et al (2004) conducted a validation study with individuals with chronic low back pain (CLBP) and fibromyalgia patients, validating the two-factor model of the Tampa Scale for Kinesiophobia (TSK) by means of confirmatory factor analysis. Construct and predictive validity of the TSK subscales were also examined. Results clearly indicated that a two-factor model fitted best in both pain samples. Construct validity of the TSK and its subscales was supported by moderate correlation coefficients with self-report measures of pain-related fear, pain catastrophising, and disability, predominantly in patients with CLBP. Predictive validity was supported by moderate correlation coefficients with performance on physical performance tests (i.e., lifting tasks, bicycle task) mainly in CLBP patients.

Interpretation
Results consist of a total raw score and two subscale scores. Additionally, scores are presented in percentile terms in comparison to patients with chronic back pain (CBP Percentile) and Fibromyalgia (FM Percentile) using data from Roelofs et al (2004). Thus, a percentile of 50 compared to the Fibromyalgia sample represents an average level of kinesiophobia compared to others with Fibromyalgia.

The total score ranges between 17 and 68. A high value on the TSK indicates a high degree of kinesiophobia, and a cutoff score was developed by Vlaeyen (1995), where a score of 37
or over is considered as a high score, while scores below that are considered as low scores. Use of a total score (including all 17 items) is recommended, although practitioners may wish to interpret results using two subscales;

- Activity Avoidance - this subscale reflects the belief that activity may result in (re)injury or increased pain.
- Somatic Focus - reflects the belief in underlying and serious medical problems

Developer

The original Tampa Scale of Kinesiophobia (TSK) was developed by R. Miller, S. Kopri, and D. Todd, in 1991. This represents a modified version.

References


Instructions to Client

In these days of high-tech medicine, one of the most important sources of information about you is often missing from your medical records: your own feeling or intuitions about what is happening with your body. We hope that the following information will help to fill that gap.
Please answer the following questions according to your true feelings, not according to what others think you should believe. Score each statement from strongly disagree to strong agree by tapping the appropriate box.