The predictive power of the Fear-Avoidance Model is well established. This paper presents a 2-year prospective follow-up study with the aim of investigating whether back-pain-related disability was predicted by the following variables which were measured when back pain was acute: a) the initial level of pain-related disability; b) Perceived Pain Intensity; c) Depression; d) Fear-Avoidance Beliefs; e) Anxiety Sensitivity; 0) Resilience; and 0) Experiential Avoidance. With the same aim, two time-variant variables were measured when pain was chronic: a) Pain Fear-Avoidance; and b) Chronic Pain Acceptance.

The participants who completed the five assessment sessions were compared to those who did not complete follow-up; there were no significant differences.

To investigate the change in the outcome variable, linear mixed models (LMM) were conducted using SAS PROC MIXED software package.

The findings of the present study indicate that Pain-Related Disability over the 2-year period was significantly predicted by the level of Disability and Fear-Avoidance Beliefs at pain onset, as well as by changes in Pain Fear-Avoidance over this period. According to the results, although Perceived Pain Intensity at pain onset was initially included in the model, it ceased to be significant when Pain Fear-Avoidance was entered in the model. Thus, Perceived Pain Intensity was not significantly associated with pain-related Disability. This finding contradicts the results of previous studies that emphasized that it self is a threatening condition which can elicit escape and avoidance responses. According to this result, initial functional disability played a more prominent role than pain intensity in the transition from acute to chronic pain. Pain-related Disability over time was significantly predicted by Fear-Avoidance Beliefs. These results support the “social-beliefs approach” which proposes that avoidance behavior can happen when normative fear-avoidance beliefs are present.

Resilience was included in the present study as a predictive variable. In contrast to predictions and previous evidence showing that resilience may buffer the negative impact of pain, Resilience did not predict pain-related Disability over time. It must be taken into account that evidence on the protective role of resilience comes from cross-sectional studies alone or from studies in which the patients already had chronic pain; thus it may be the case that resilience plays a protective role once pain has become chronic, although it does predict disability at pain onset.

In contrast to the results of several prospective studies, Chronic Pain Acceptance did not predict pain-related Disability over time. It must be emphasized that Chronic Pain Acceptance and Pain Fear-Avoidance were highly negatively correlated (r = -.85, r < .05); thus, both are included in the analysis is not surprising that one of them is excluded from the model.

In sum, the results highlighted the predictive power of the Fear-Avoidance Model. According to the results, Pain Fear-Avoidance — composed of Pain Catastrophizing, Pain Vign…