





# Patellofemoral Pain

cal: local/peripheral sensitization

Central: mechanisms / sensitzation

Referral

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### Local/peripheral sensitization

Mechanical hyperalgesia:

Local PPT lower (Rathleff et al 2015, Pazzinatto et al 2016, Noehren et al 2016)

#### Local/peripheral sensitization

Mechanical hyperalgesia:

Local PPT lower (Rathleff et al 2015, Pazzinatto et al 2016, Noehren et al 2016)

Local PPT not different (Rathleff et al In prep)

#### Local/peripheral sensitization

Mechanical hyperalgesia:

Local PPT lower: Only females & young ~20yrs (Rathleff et al 2015, Pazzinatto et al 2016, Noehren et al 2016)

Local PPT not different: Males & females (23/33; 70%) & ~28yrs (Rathleff et al In prep)

#### Local/peripheral sensitization

Mechanical hyperalgesia:

Local PPT reduces with loading (1.35 body mass): (Pazzinatto et al 2016)

Local PPT and Pain ratings associated with frontal plane knee angle on step down task (r=0.5 to 0.7) (Noehren et al 2016) Local/peripheral sensitization

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Referral:

#### Central mechanisms/sensitization

Mechanical hyperalgesia:

Remote PPT lower: (Pazzinatto et al 2016, Noehren et al 2016)

Remote PPT not different: (Rathleff et al, 2015 & In prep)

#### Central mechanisms/sensitization

#### Dynamic QST:

Conditioned Pain Modulation: (Rathleff et al 2015 but not in Rathleff et al In prep.)

### Central mechanisms/sensitization

Conditioned Pain Modulation\*:

(Rathleff et al 2015 <19-21yr old females, 72 month duration, 7/10 pain NRS>

but not in Rathleff et al In prep. <28yr old, females (70%/33), 24 month duration, 5/10 pain NRS>)

\* different CPM paradigms used

#### Central mechanisms/sensitization

#### Dynamic QST:

Conditioned Pain Modulation: (Rathleff et al 2015 but not in Rathleff et al In prep.)

No temporal summation: (Rathleff et al 2015)

#### Central mechanisms/sensitization

Sensory detection:

Light touch detection threshold elevated (Jensen 2007, Noehren et al 2016)

#### Central mechanisms/sensitization

Sensory detection:

Light touch detection threshold elevated (Jensen 2007, Noehren et al 2016)

Light touch & warmth\* detection threshold elevated bilaterally (Jensen 2007)

\*cold unilaterally

#### Central mechanisms/sensitization

Exclusion of other pains:

 Rathleff et al (2015 & in prep); & unlcear but probably in Pozzinatto et al (2016)

Not exclude other pains:

• Jensen et al 2007; & Noehren et al 2016

#### Central mechanisms/sensitization

#### Cold hyperalgesia:

Not present in Jensen et al (2007) cohort (but remember they had detection issues!)

### Central mechanisms/sensitization

Cold hyperalgesia:

Not present in Jensen et al (2007) cohort (but remember they had detection issues!)

Cold knees:

Self et al...

Selfe J, Harper L, Pedersen I, Breen-Turner J, Waring J, Stevens D. Cold legs: a potential indicator of negative outcome in the rehabilitation of patients with patellofemoral pain syndrome. Knee. 2003 10(2):139–43.

'Do your legs feel cold even in warm surroundings?' 14/77 (18%) of PFP patients referred to a UK hospital:

- Reported higher pain levels and less tolerance to physical activity
- Less improvement to a standardized rehabilitation program

#### Selfe J, Sutton C, Hardaker NJ, Greenhalgh S, Karki A, Dey P. Anterior knee pain and cold knees: a possible association in women. Knee, 2010 17(5):319–23.

Sample*, Questions#	Cold	Not Cold	= -1.2^
	(14)	(25)	(-2, -0.4)°C
Cold weather affects	11/12	3/10	P 0.006
your knee	(92%)	(30%)	
Prefer ice pack rather	0/9	5/8	P 0.009
than hot water bottle	(0%)	(63%)	
* Female only as male num	nber too small	l for this analy	rsis(N=58, M=19)
# no differences for: Do you	u get night po	ain? & Do yo	u wear extra
tight/long johns in winter? N	lot all particip	oants asked a	III questions.
^ baseline without correction	on for ambier	ht temperatur	re

# Cold knees/sensitivity:

Useful clinically & in research for identifying those who might be more severely afflicted & difficult to manage?

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Referral: ...later

# Patellofemoral Pain

Psychosocial:

mental health, cognitive, behavioural & other factors



Liam Maclachlan



Non-physical features of patellofemoral pain: a systematic review

Study 1: systematic review				
PAIN PSYCHOL FACT	OGICAL IORS DISABILITY			
LIMIT IMPROVEMENT WITH REHABILITATION	SIGNIFICANT BARRIERS TO RECOVERY			





# PARTICIPANT CHARACTERISTICS PFP: 1357 (891 female: 66%),age range 14.1 to 46.6 Sourced from clinical sites, athletics clubs, exercise programs and population-based cohorts

HEALTHY CONTROLS: 349 (168 female: 48%). Matched to corresponding PFP groups Sourced from student cohorts and local community

#### PFP CHARACTERISTICS DIAGNOSIS Criteria and diagnosing health professional = 14 Criteria only = 5 Health professional only = 6 PHYSICAL FUNCTION PAIN Kujala patellofemoral score Lysholm knee scale Duration: 1 month to 8 yrs Severity: mild to severe Measures: VAS, NPRS, WOMAC, KOOS ADLS-KOS MFIQ

KOOS

Non-physical features of patellofemoral pain: a systematic review. Liam Maclachlan



General mental health and cognitive differences between those with and without PFP

A range of psychological factors are associated with PFP and physical function

Results from a limited number of studies with small samples

# Take home message...

#### Heterogeneity

Some will have central sensitization and psychosocial factors (might influence outcome)

Some indicators might be:

- widespread pain
- young female
- chronic PFP
- catastrophization
- poor mental health
- stress

