Kimber, J.M., Crosky, S., Brunkow, A., Cannon, M., Winograd, D., McAndrew, L. (2021, April). The relationship between patient pain severity and provider communication skills. Poster presented at the at Society of Behavioral Medicine.

**Background:** There is growing evidence that when providers talk with patients with pain about their pain beliefs and treatment beliefs, patients are more satisfied. Less is known, however, about when providers naturally talk to their patients about their pain and treatment beliefs. We hypothesized that providers would be more likely to talk about their patient’s pain and treatment beliefs with patients who had higher pain severity. Understanding this relationship can help us to better tailor communication training for physicians treating chronic pain. **Objective:** To examine the relationship between patient pain severity and providers use of specific communication skills. **Method:**We asked 1,050 patients with chronic pain to complete questionnaires about their pain severity and physician communication skills. Participants rated their pain severity at present (0= “No Pain” to 6= “Very Intense”) and over the last week (0= “Not Severe At all” to 6= “Extremely Severe”). Participants also selected (i.e., “yes” or “no”) if their provider used a communication skill during their last appointment (e.g., “discussed cause of pain” and “tips on how to manage pain”). The total number of communication skills used were sum totaled. We used linear regression to predict whether patient pain severity was related to provider communication skills related to pain cause and pain management. **Results:**On average, participants reported pain severity of 3.74 (*SD=*1.22) over the last week and 3.19 (*SD*=1.26) at present. We found that 75.5% of providers used at least one of the twelve communication skills. 87% of providers discussed their patient’s cause of chronic pain; whereas, only 63% of providers discussed with their patients that the initial cause of their chronic pain might have changed since the start of their symptoms. Linear regression revealed a non-significant finding that pain severity did not predict whether or not providers used causal or management-related communication skills. **Conclusion:**Our findings suggest that providers are naturally using communication skills related to cause and self-management with their patients. However, patient’s experiences of pain do not predict whether or not providers use certain communication skills. This finding might suggest that providers use communication skills based on reasons (i.e., based on training) unrelated to patient’s reports of their pain. Implications for patient-physician communication and training are discussed.