

4.2 months). Most participants (60.4%) reported pain equal to or greater than 7 points, while 75% presented significant functional disability, with scores above 40. Regarding psychological aspects, 98.9% demonstrated high levels of kinesiophobia, with scores above 17, and 56.2% exhibited signs of anxiety, with scores equal to or greater than 9. Sleep quality was considered poor in 36.4% of individuals (scores equal to or greater than 5), and 57.2% presented sleep disorders (scores equal to or greater than 10). In contrast, most participants showed no signs of depression (83.3% with scores below 9) or pain catastrophizing (54.1% with scores equal to or below 30). Conclusion: The results indicate that individuals with frozen shoulder experience intense pain and functional disability associated with high levels of kinesiophobia and anxiety. Additionally, a significant portion of the sample reported inadequate sleep patterns. Implications: These findings reinforce the need for integrated therapeutic strategies that address not only physical aspects but also the emotional and behavioral components involved in this condition. Therefore, an interdisciplinary approach incorporating strategies for pain management, psychological support, and health education to reduce fear of movement and improve sleep habits may promote a more effective rehabilitation process and contribute to better clinical outcomes in this condition.

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Keywords: Frozen shoulder, shoulder pain, biopsychosocial model

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TRANSLATION AND CROSS-CULTURAL ADAPTATION OF THE WHEELCHAIR USER'S SHOULDER PAIN INDEX TO BRAZILIAN PORTUGUESE

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Background: Shoulder pain is frequent among wheelchair users, resulting from the overload generated by locomotion and transfer activities. In this context, evaluation and monitoring through tools such as questionnaires are essential to guide the actions of health professionals and researchers. The Wheelchair User's Shoulder Pain Index (WUSPI) is a validated questionnaire, originally developed in English, that assesses shoulder pain in wheelchair users. Considering the scarcity of specific tools for this population available in Brazil, it

is essential to translate and culturally adapt the WUSPI to Brazilian Portuguese.

Objectives: Translate and cross-culturally adapt the Wheelchair User's Shoulder Pain Index into Brazilian Portuguese.

Methods: This study included wheelchair users of both sexes, with shoulder pain for at least 3 months, aged 18 years or older, both athletes and non-athletes, with athletes participating in regular training at least twice a week. This study was approved by Ethics Research Committee. The methodology followed five steps recommended by international guidelines: translation, translation synthesis, back-translation, analysis by an expert committee, and pre-testing. After obtaining the author's consent, the translation process began. The WUSPI has 15 items that assess shoulder pain in wheelchair users during activities involving transfers, mobility, self-care, and general activities. Each item is scored from 0 to 10 on the Visual Analog Scale, with the total score ranging from 0 to 150. For individuals with specific limitations, such as quadriplegia or partial wheelchair use, the Performance Corrected WUSPI was created, adjusting the score by dividing the total raw score by the number of activities performed and multiplying by 15. After the steps, the materials were sent to the author for review, and the pre-test was administered. Items with less than 90% comprehension should be modified.

Results: Thirty individuals participated in the study, with mean age 45.2 ± 13.98 , 16 (53%) were female and 19 (63%) were athletes. All WUSPI items and demographic data achieved over 90% comprehension in the pre-test version. However, the committee accepted some suggestions from participants and the author to ensure equivalence between versions. In the WUSPI, in question 3, the word "bath-tub" was replaced with "shower chair," and in question 6, "using" was changed to "pushing." In the demographic data, under participant information, the option "civil union" was added to question 1, "that you currently use" was added to question 4.B, and the option "ambidextrous" was included in question 7. In the medical history section, the alternative "I don't remember" was added to question 1.

Conclusion: The WUSPI was translated and culturally adapted to Brazilian Portuguese following all recommended procedures, making it a useful questionnaire for clinical and research purposes. Future studies are needed to analyze the psychometric properties of the questionnaire.

Implications: The translation of the WUSPI into Brazilian Portuguese expands the tools available in Brazil for assessing wheelchair users, contributing to clinical practice and scientific research on shoulder dysfunctions in this population.

Keywords: Persons with Disabilities, Pain Measurement, Upper Extremity

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DOES KNEE EXTENSOR TORQUE DETERMINE PERFORMANCE IN THE STEP-DOWN TEST IN WOMEN WITH PFP?

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Background: Patellofemoral pain (PFP) is characterized by pain around the patella or in the anterior region, occurring mainly during