The methodology of the ICCP was based on the Italian guidelines for organizing a consensus conference, the Italian guidelines on stroke (Stroke Prevention and Educational Awareness Diffusion and Consensus) and the Italian guidelines on neurorehabilitation in adult patients. Most of the current guidelines and evidence on the pharmacological and non pharmacological treatment of pain may be difficult to transfer to the field of neurorehabilitation. The aim of the work was to provide a large body of evidence and practical guidelines that could be used for the majority of rehabilitative treatments of pain. For these reasons, we considered evidence derived from experimental, observational, case-control and other types of study, as well as the opinion of experts.

ICCP task force. The ICCP task force was composed by a technical committee, including a member of both the task force of the ICCP and the chairperson of the task force of the ICCP, that was formed by experts from IRCCS Policlinico San Matteo Foundation, Pavia; 4-ICRCS Santa Lucia Foundation, Rome; 4-IRCCS CNR Segrate, Milan; 4-C. Mondino Neurological Institute Foundation, IRCCS, Pavia, Italy; 5-Department of Brain and Behavioural Sciences, University of Pavia, Italy.

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BACKGROUND AND AIDS

Pain is very common in the neurorehabilitation setting, where it may represent a target for treatment, but can also negatively influence rehabilitation procedures directly or through the side effects of painkillers. To date, there are neither guidelines nor consensus on how to assess and treat pain in neurorehabilitation. Because of the very scarce pieces of evidence on this topic, the Italian Consensus Conference on Pain in Neurorehabilitation (ICCP) was promoted by the Italian Society of Neurorehabilitation (Società Italiana di Riabilitazione Neurologica, SINIR) and the Italian Society of Physical and Rehabilitative Medicine (Società Italiana di Medicina Fisica e Riabilitativa, SIMFER) and included experts from different scientific societies. The present paper illustrates the rationale, methodology and the recommendations of the ICCP. The recommendations of the ICCP will offer some information on how to deal with pain in neurorehabilitation, and may represent the starting point for further studies.

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ICCP topics and working groups. The topics of the ICCP were divided into 27 working groups, which were incorporated into seven main paragraphs, three of which dealt with general issues, and the remaining four dealt with specific clinical conditions that may be encountered in the neurorehabilitation setting. Common diseases with nociceptive pain were also included, because they may coexist with neurological conditions, requiring specific pharmacological and nonpharmacological approaches.

1. The core group chosen the topics of the ICCP based on the national and international guidelines that, at the time of the call for contributions, were still pending, or for which the final version was still awaited. The topics were selected in such a way as to cover the main clinical settings. The core group labelled these topics as recommendations with different grading levels, based on the evidence available at the time of their proposal, and with a view to helping guide the treatment of pain in neurorehabilitation. The reports containing the data and the results of the working groups were then submitted to the core group for approval.

