102	Intolerance of Uncertainty and Chronic Pain in Adult Survivors of Childhood Cancer	April 28
	<u>Tori Langmuir</u> ¹ , Wendy M. Leisenring ² , Kayla L. Stratton ² , Élisabeth Lamoureux ¹ , Alex Pizzo ¹ , Kevin Alschuler ³ , Kevin R. Krull ⁴ , Lindsay A. Jibb ⁵ , Paul C. Nathan ⁵ , Jennifer N. Stinson ⁵ , Gregory T. Armstrong ⁴ , Nicole M. Alberts ¹	
	¹ Concordia University, Montréal, Canada, ² Fred Hutchinson Cancer Center, Seattle, USA, ³ University of Washington, Seattle, USA, ⁴ St. Jude Children's Research Hospital, Memphis, USA, ⁵ Hospital for Sick Children, Toronto, Canada	
	Introduction/Aim: Intolerance of uncertainty (IU) is a dispositional tendency to perceive uncertainty as unacceptable or threatening. Despite the uncertain nature of childhood cancer survivorship <i>and</i> chronic pain, no studies have examined IU and chronic pain in this population.	
	Methods: Adult survivors of childhood cancer (N=228, mean[SD] age=39.6[9.9] years, 50.4% female, 31.7 years since diagnosis) from the Childhood Cancer Survivor Study completed IU (12-item mean), chronic pain (lasting \geq 3 months), pain intensity (1-item), pain interference (7-item mean), pain catastrophizing (i.e., catastrophic thoughts and feelings about pain; 13-item mean), and psychosocial measures. Independent-sample t-tests compared mean levels of IU between survivors with and without chronic pain. Multivariable regression adjusted for sex and age and estimated mean effects (B) with 95% confidence intervals (CI) for associations of pain-related variables with IU among survivors with chronic pain (N=93).	
	Results: The mean level of IU among all survivors was 26.2 (95%CI[24.9-27.5). Higher levels of IU were observed in survivors with chronic pain (M=29.23, SD=12.13) compared to survivors without (M=23.70, SD=8.78) (t[226]=-4.27, p<.001). After adjusting for anxiety and depression, higher IU was associated with elevated pain catastrophizing (B[95% CI]; 0.3[0.1-0.5]), but not elevated pain intensity (B[95% CI]; 1.2[-3.0-5.4]) or pain interference (B[95% CI]; 0.1[-0.1-0.2]).	
	Discussion/Conclusions: These findings provide cross-sectional evidence that elevated IU is associated with increased chronic pain as well as pain catastrophizing in childhood cancer survivors. Further longitudinal research is needed to elucidate the nature of the relationship between IU and these pain variables, which will help inform psychosocial screening and intervention for survivors.	