AAPM E-NEWS

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AAPM's Education Receives ACCME's Accreditation with Commendation Full story...

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Patient Education Resources

NEW! AAPM's website is host to new patient education videos that include 22 topics that you can share and promote with your patients. Link to the AAPM website in your waiting/patient rooms or send the links to the videos in your regular patient communications. View videos...

Other Patient Education Videos Available Online Include:

View "Finding Relief: Pain Management for Older Adults" video

View "Managing Chronic Pain, A Guide for Patients" video

Educational Booklet and DVD

Copies of the educational booklet and DVD, Finding Relief: Pain Management for Older Adults, are available to members free of charge, with the addition of a modest shipping fee. To request copies of this resource email: info@painmed.org.

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2012 AAPM Election Results

The Academy is pleased to announce the 2012 Election Results for the AAPM Board of Directors and the Nominating Committee. Congratulations to all!

President-Elect (1 year term)
Lynn R. Webster, MD

Secretary (3 year term)
Zahid Bajwa, MD

Directors-at-Large (3 year term)
Leonardo Kapural, MD, PhD
Tim Lamer, MD

Nominating Committee (2 year term)
Steven P. Stanos, DO
Designate AAPM on Your AMA Membership Ballot

If you are an AMA member, you should be receiving your Memberships Benefits in the mail shortly. Please take a moment and complete your Specialty Society Representation Ballot, either with the self-addressed postcard or on the Internet at www.ama-assn.org/go/ballot.

BE SURE TO DESIGNATE AAPM. It is very important that we have sufficient AAPM members identified for compliance. Thank you.

AAM Online Medical Education Now Available

From the 26th Annual Meeting
Advancing the Science and Practice of Pain Medicine in a Changing Healthcare Environment

♦ Quality PRA Category 1

State Legislative News

CA: CURES/PDMP Business Resumption
January 2011 [Source: State of California Department of Justice]
The 2011/2012 Fiscal Year budget resulted in the dissolution of the Bureau of Narcotic Enforcement, the sponsor of the Controlled Substance Utilization Review and Evaluation System (CURES)/Prescription Drug Monitoring Program (PDMP) program, effective January 1, 2012. As a result, some CURES/PDMP services have been noticeably lapsed. The Department of Justice (DOJ) is currently staffing and planning business resumption of this important public safety and public health program. Full story...

View related abstract at PubMed.gov in the Journal of Pain...
View related information at the California Society of Addiction Medicine...
View related article at California Watch...
View related article from Congresswoman Bono...

CO, RI, VT, WA: Governors Push Reclassification of Marijuana for Medical Use
January 16, 2012 [Source: Amednews.com]
Vermont Governor Peter Shumlin has signed the petition started by the Washington state Governor Chris Gregoire and Rhode Island Governor Lincoln Chafee asking for the DEA to conduct a new scientific review of cannabis research and reclassify it as a schedule II drug to be used for medical purposes. Colorado Governor John Hickenlooper sent a similar request to the DEA. Full story...

NY State Attorney General Working to Address Prescription Drug Abuse
January 12, 2012 [Source: ONDCP]
The state of New York released a plan to coordinate with the ONDCP report on prescription drug abuse to focus on four key areas: education for healthcare professionals, patients, and the public on safe and appropriate use of prescription drugs; expansion of state-based prescription drug monitoring programs; convenient and environmentally responsible disposal methods; and smart law enforcement to reduce the prevalence of pill mills and doctor shopping. Full story...

West Virginia Bill Introduced to Create an Unintentional Pharmaceutical Drug Overdose Fatality Review Team
January 26, 2012 [Source: West Virginia Legislature]
A new bill by the West Virginia legislature would require a team to examine cases that involve unintentional pharmaceutical drug overdose deaths and promote public awareness of its causes. Full story...

Pain Clinic Bill Introduced in Kentucky Senate
January 12, 2012 [Source: Courier-Journal.com]
Two new bills were introduced to the Kentucky legislature, with the first defining what a pain management clinic is and also require the Cabinet for Health and Family services to develop administrative regulations for them (SB 98). The second bill (SB 42) would require all pain management facilities to be licensed, specify ownership and employee requirements, and require the state Board of
Qualified Pain Education by Top Experts and Researchers in the Field of Pain Medicine.
For more information...

Revised AAPM Ethics Charter
Includes statement on conflicts of interest.

Need to add a Pain Physician to your practice?
Post your ad with AAPM's Career Center and reach more than the 2,400 members of AAPM. The network reaches beyond 30,000 professionals in healthcare.

Help Wanted:
Primary Care Pain Management & Integrative Modalities Coordinator
Madigan Healthcare System Tacoma, WA
We are recruiting two primary care physicians for an innovative interdisciplinary pain management center.

Read this month's

Pain Research in the News

Erasure of a Spinal Memory Trace of Pain by a Brief, High-Dose Opioid Administration
January 13, 2012 [Source: Science at Pubmed.gov]
Abstract: We discovered that brief application of a high opioid dose reversed various forms of activity-dependent LTP at C-fiber synapses. Full story...
View article in Nature...

January 23, 2012 [Source: Stanford University Medical Center]
In the first-ever systematic use of data on a large scale, researchers at Stanford University School of Medicine examined the electronic medical records of more than 160,000 pain scores reported for more than 72,000 patients, ranging across some 250 different disease categories. The study saw "higher pain scores in female patients practically across the board," which enabled them to report differences that were not only statistically significant, but also clinically significant. Full story...
View related article in the Journal of Pain ...
View related abstract at PubMed.gov in Medicine and Science in Sports & Exercise...

Research Yields New Insights Into Mechanisms and Treatment of Pain
January 18, 2012 [Source: The Journal of the American Medical Association]
Studies presented at the Annual Meeting of the Society for Neuroscience discussed novel approaches to pain treatment such as gene therapy technology to block pain signals before they reach the CNS, and fibronectin as a treatment for spinal cord injury pain in humans. Full story...

6 Points on Treating Post-Traumatic Stress Disorder with Stellate Ganglion Block
January 18, 2012 [Source: Becker's Orthopedic, Spine & Pain Management]
A recent study published in Military Medicine examines the use of stellate ganglion block (SGB) therapy for post-traumatic stress disorder (PSTD), reducing the nerve growth factor, which causes the new nerve growth to die off resulting in reduced levels of norepinephrine. Full story...

Annual Meeting

Plan to Attend AAPM's 28th Annual Meeting
February 23–26, 2012, Palm Springs, CA

Register Now

Cutting-edge Conference Workshops
AARP’s cutting-edge workshops bring you to the forefront of pain news and include sessions that focus on the breaking news, public health and reform, evidence evaluation, and military concerns. To view workshop schedule and speakers...

Click here for the NEW Speaker Search...

AAPT Announces 2012 Annual Meeting Plenary Speakers:

- Linda R. Watkins, PhD, will discuss breaking scientific news on the immune and glial factors within the peripheral and central nervous systems that relate to chronic pain states.
- Daniel J. Clauw, MD, will take us to the forefront of central mechanisms in pain syndromes.

Preconference sessions begin February 22, 2012:

- AAPT’s Cadaver Workshop (Application Deadline Extended to January 31, 2012)
- Essential Tools for Treating the Patient in Pain™

Student Volunteers Needed for AAPT’s Cadaver Course
The Academy is recruiting medical student and resident volunteers to assist with its Cadaver Workshop on Thursday, February 23. The course has a registration fee of $1,575-$2,395 for the entire day, but volunteers will receive complimentary entrance. Your primary responsibility will be to serve AAPT in your role of volunteer, however, you will also have the opportunity to observe various interventional procedures as they are taught.

The commitment is from 7am-5pm, with an hour break for lunch. Responsibilities will include attendee check in at a specific station, and other monitoring duties as assigned. If you are interested in this opportunity, please contact Ruth Tiernan (rtiernan@connect2amc.com) ASAP to reserve your place. There are a limited number of complimentary attendance/volunteer positions available, so don’t hesitate!

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Practice Management & Coding Updates

Pain Management Codes Posted on Website
Emily Hill, PA
The Coding and Reimbursement Committee has updated the coding information available on the AAPT website. New and improved charts have been posted that include information concerning Medicare’s 2012 Relative Value Units (RVUs) for codes commonly reported by Pain Medicine physicians. The title page provides links to CMS web pages that provide additional information and outlines the basis for the 2012 reimbursement rates. Full story...

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Primary Care

Safe Opioid Prescribing: February 25-26, in Palm Springs, Runs Concurrent with the Annual Meeting
AAPT’s newest educational offering is specifically created to be a practical, didactic course for primary care and mid-level prescribers from the experts in pain. The course will provide the opportunity to learn the facts about better pain care, while it scientifically dispels common myths and reveals lesser-known
facts about safe opioid prescribing.

**UPDATES**

*The AAPM Power Point Presentation on the Federal Regulations for Prescribing has been updated effective 11/01/2010.*

[View this new presentation.](#)

**Need Facts on Pain?**

*Updated: Visit AAPM's "Facts on Pain" section in the Patient Center of the AAPM website, which now includes detailed references to each fact. These are helpful to have on hand for media calls.* [Read more...](#)

**Affiliate Membership**

Are the members of your pain team AAPM members? [Affiliate membership information...](#)

**The American Board of Pain Medicine (ABPM)** is committed to the certification of qualified physicians in the field of pain medicine. Visit [abpm.org](http://abpm.org) to view ABPM's mission, vision, and objectives.

**Pain Medicine: January, 2012**

**Highlights:**

**ORIGINAL RESEARCH ARTICLE**

Advancing a National Agenda to Eliminate Disparities in Pain Care: Directions for Health Policy, Education, Practice, and Research

**SPINE SECTION**

*On the Geometry of Fluoroscopy Views for Cervical Interlaminar Epidural Injections*

**PSYCHOLOGY, PSYCHIATRY & BRAIN NEUROSCIENCE SECTION**

*The Communal Coping Model of Catastrophizing: Patient–Health Provider Interactions*

**OPIOIDS, SUBSTANCE ABUSE & ADDICTIONS SECTION**

*A History of Being Prescribed Controlled Substances and Risk of Drug Overdose Death*

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**Pain Treatments/Trials in the News**

**Cubist Pharmaceuticals and Hydra Biosciences Announce Plans to Begin Phase 1 Clinical Trial for Novel TRPA1 Modulator to Treat Acute Pain**

January 10, 2012 [Source: MarketWatch]

Cubist Pharmaceuticals and Hydra Biosciences will begin a Phase 1 clinical trial for a small molecule antagonist of the human Transient Receptor Potential Ankyrin repeat 1 (TRPA1) as part of a clinical development program to evaluate TRPA1’s potential to treat acute pain and certain inflammatory conditions. [Full story...](#)

View related information in *TRP Ion Channel Function in Sensory Transduction and Cellular Signaling Cascades...*

**Pacira Pharmaceuticals, Inc. Provides Update on Commercial Launch and Product Availability Timing for EXPAREL®**

January 9, 2012 [Source: BioSpace]

After FDA approval, Pacira announced that they anticipate EXPAREL (bupivacaine liposome injectable suspension), for administration into the surgical site to produce postsurgical analgesia, will be available this coming April. [Full story...](#)

**International Pain News**

**Canada: Tracking Opioid Use Vital to Avoiding Scourge**

January 12, 2012 [Source: Canadian Medical Association Journal]

This Journal article addresses the current problem of prescription drug abuse and the need to develop a national drug tracking system in Canada. [Full story...](#)

Discuss in the Members’ Community...
The Inadequate Treatment of Pain: Collateral Damage from the War on Drugs
January 10, 2012 [Source: Plos Medicine]

Since 1961, the International Narcotics Control Board (INCB) has been the legal foundation for international control of both licit and illicit narcotic drugs. According to the article, the "war on drugs" has become increasingly controversial, with many feeling that it has done more harm than help. Full story...

Discuss in the Members' Community...

Substance Abuse & Addiction Research

Tackling Prescription Drug Abuse With Formulary Restriction?
January 18, 2012 [Source: Medscape]

Experts discuss the growing prescription drug abuse problem and if banning certain drugs is a viable solution. Full story...

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AAPM Members in the News

N.J. Attorney General Announces New Prescription Drug Addiction Program
January 19, 2012 [Source: nj.com]

AAPM Treasurer, Lynn R. Webster, MD, comments on the benefit of prescription monitoring programs (PMP) in an article unveiling New Jersey's PMP. Full story...

Hunton Named EIC, Regional Anesthesia and Pain Medicine
January 19, 2012 [Source: Vanderbilt University]

AAPM Member, Marc Huntoon, MD, was recently named Editor-in-Chief of Regional Anesthesia and Pain Medicine. Full story...

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AAPM Member Honors and Distinctions

Presidential Commendations and Awards

The American Academy of Pain Medicine is pleased to announce the recipients of this year’s Presidential Commendations and Awards. The following individuals will be recognized for their exceptional service to the field of Pain Medicine at this year's Annual Meeting at the AAPM Business Meeting, Saturday, February 25, from 1:00-1:45 p.m.

Awards

The Philipp M. Lippe, MD, Award is given to a physician for outstanding contributions to the social and political aspect of Pain Medicine. Social and
political accomplishments could be those that benefit the science, the practice or the recognition of the specialty. The 2012 Philipp M. Lippe, MD, Award recipient is: Philip A. Pizzo, MD

The Founders Award is given to an individual for outstanding contributions to the science or practice of Pain Medicine. This award is given for continued contributions for the basic or clinical science of Pain Medicine or for demonstration of clinical excellence or innovation in the practice of Pain Medicine. The 2012 Founders Award recipient is: Howard M. Fields, MD

The Distinguished Service Award is given to an individual for commitment and contributions to the American Academy of Pain Medicine. This award is given to an individual for specific outstanding contributions. The 2012 Distinguished Service Award recipient is: B. Todd Sitzman, MD

The Patient Advocacy Award recognizes activity of an individual in advocating for appropriate evaluation and treatment of patients suffering from pain. This award was created to honor those healthcare professionals whose deeds reflect their recognition of the importance and impact of the specialty of Pain Medicine. The 2012 Patient Advocacy Award recipient is: Robert J. Saner II, JD

The AAPM Presidential Excellence Award for Education was inaugurated this year to honor an individual who has made major contributions to the education of others about pain medicine. The 2012 AAPM Presidential Excellence Award for Education recipient is: Lynn R. Webster, MD

Presidential Commendations

Kenneth A. Follett, MD PhD, Professor and Chief of Neurosurgery, University of Nebraska Medical Center
For service on the Institute of Medicine Pain Committee

R. Gil Kerlikowske, Director, Office of National Drug Control Policy
For leadership in developing the Office of National Drug Control Policy’s “Epidemic: Responding to America’s Prescription Drug Abuse Crisis”

Regina M. LaBelle, Senior Policy Advisor to the Director, Office of National Drug Control Policy
For leadership in developing the Office of National Drug Control Policy’s “Epidemic: Responding to America’s Prescription Drug Abuse Crisis”

Sean Mackey, MD, PhD, Associate Professor of Anesthesia and of Neurology and Neurological Sciences and Division Chief of Pain Medicine, Stanford University Pain Management Center
For service on the Institute of Medicine Pain Committee

U. S. Senator Jay Rockefeller (West Virginia)
In recognition of efforts to prevent the unsafe use of prescription drugs and reduce the number of deaths from prescription drugs by promoting physician and patient education and creating a uniform reporting system for painkiller-related deaths, through the introduction of the Prescription Drug Abuse Prevention and Treatment Act of 2011

Jerome Schofferman, MD, Director of Research and Education of the Spine Care Institute of San Francisco
For stalwart and unflaggingly principled efforts to advocate for the highest ethical standards within the American Academy of Pain Medicine

U.S. Senator Sheldon Whitehouse (Rhode Island)
For efforts to examine the problem of prescription drug abuse and discuss proposed solutions, specifically chairing a Senate Judiciary Subcommittee hearing on Prescription Drug Abuse: "Responding to the Prescription Drug Epidemic: Strategies for Reducing Abuse, Misuse, Diversion, and Fraud"

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FDA, DEA, and ONDCP News

National Take Back Initiative April 12, 2012
January, 2012 [Source: DEA]
The next DEA National Prescription Drug Take Back Day will take place across the country on Saturday, April 28, 2012, from 10:00 AM – 2:00 PM. The DEA will post the locations in March. Full story...

Endo Pharmaceuticals Opiate Products by Novartis Consumer Health: Public Health Advisory - Potential Safety Risk
January 9, 2012 [Source: FDA]
FDA is advising healthcare professionals and patients of a potential problem with opiate products manufactured and packaged for Endo Pharmaceuticals by Novartis Consumer Health at its Lincoln, Nebraska manufacturing site. Due to problems that occurred when these products were packaged and labeled at the site, tablets from one product type may have carried over into packaging of another product. Full story...

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Pain Abstracts in the News

Cognitive Behavior Therapy, Exercise, or Both for Treating Chronic Widespread Pain
January 9, 2012 [Source: Archives of Internal Medicine]
Background: The clinical impact of telephone-delivered cognitive behavioral therapy (TCBT), exercise, or a combined intervention in primary care patients with chronic widespread pain (CWP) is unclear. Read more...
View related article in Pain Research and Treatment...
View related article in Current Pain and Headache Report...
View related article in Journal of Rehabilitation Medicine...

Type of Intervenational Pain Procedure, Body Weight, and Presence of Spinal Pathology are Determinants of the Level of Radiation Exposure for Fluoroscopically Guided Pain Procedures
December 23, 2011 [Source: Pain Practice]
Abstract: In the recent years new technology has led to the development of a bewildering array of imaging procedures. Yet, conventional radiography remains one of the most used tools to diagnose and to aid procedural interventions. Fluoroscopy guidance facilitates targeted drug delivery or radiofrequency directly to the area of pathology, a benefit that has to be balanced against the risks of radiation exposure. Read more...
View related article in American Journal of Roentgenology...

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PubMed Pain Abstracts

The following abstracts are posted at PubMed.gov
A Systematic Literature Review of 10 years of Research on Sex/Gender and Pain Perception - Part 2: Do Biopsychosocial Factors Alter Pain Sensitivity Differently in Women and Men?

Racine M, Tousignant-Laflamme Y, Kloda LA, Dion D, Dupuis G, Choinière M.
Source: Department of Psychology, Université du Québec à Montréal, Montreal, Quebec, Canada; Centre de recherche, Centre hospitalier de l'Université de Montréal (CRCHUM), Montreal, Quebec, Canada.

Abstract: This systematic review summarizes the results of 10 years of laboratory research on pain and sex/gender. An electronic search strategy was designed by a medical librarian to access multiple databases. A total of 172 articles published between 1998 and 2008 were retrieved, analyzed, and synthesized.

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PMID: 22236999 [PubMed - as supplied by publisher]
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View Part 1 in Pain...
View related article in Pain...

Opioid rotation with extended-release opioids: where should we begin?
Nalamachu S.
Source: International Clinical Research, Institute and Pain Management Institute, Overland Park, KS, USA.

Abstract: Opioid rotation is a common and necessary clinical practice in the management of chronic non-cancer pain to improve therapeutic efficacy with the lowest opioid dose. When dose escalations fail to achieve adequate analgesia or are associated with intolerable side effects, a trial of a new opioid should be considered. Much of the scientific rationale of opioid rotation is based on the wide interindividual variability in sensitivity to opioid analgesics and the novel patient response observed when introducing an opioid-tolerant patient to a new opioid. This article discusses patient indicators for opioid rotation, the conversion process between opioid medications, and additional practical considerations for increasing the effectiveness of opioid therapy during a trial of a new opioid. A Patient vignette that demonstrates a step-wise approach to opioid rotation is also presented.

PMID: 22259256 [PubMed - in process]
Read more...
View related article in International Journal of General Medicine...
Information provided by (Responsible Party): Nathan Wei, MD, FACP, FACR; Arthritis Treatment Center, Maryland
ClinicalTrials.gov Identifier: NCT01511939
Stated Purpose: Open-label active treatment Phase III study of PENNSAID (diclofenac sodium solution topical) to determine the effects on coagulation parameters, (PT, PTT, INR) in 2 subgroups of patients who have moderate to severe osteoarthritis (OA) pain of the knee currently on a stable dose of warfarin and are:
* equal to 55 or > and < than or equal to 74 years of age;
* or equal to 75 years of age and above
The objective of this study is to see if the use of PENNSAID (a topical NSAID) to treat your OA knee pain will not interfere with your current anticoagulant therapy or change your laboratory values from their baseline values.
Read more...

Spinal Cord Stimulation and Functional MRI
This study is currently recruiting participants.
First Received on January 11, 2012. Last Updated on January 13, 2012
Sponsor: Ali Rezai
Collaborator: Medtronic
Principal Investigator: Ali Rezai, MD, Ohio State University
Information provided by (Responsible Party): Ali Rezai, The Ohio State University
ClinicalTrials.gov Identifier: NCT01512121
Stated Purpose: The overall objective of this study is to assess patterns of fMRI cortical activation with spinal cord stimulation (SCS) in patients with neuropathic leg pain and therefore define cortical correlates, as well as to investigate cortical representations of pain and pain relief and the interactions therein, in the setting of neuropathic leg pain and SCS.
Read more...

A Study of the Safety and Efficacy of MK-6096 for Migraine Prophylaxis in Participants With Episodic Migraine (MK-6096-020)
This study is not yet open for participant recruitment.
First Received on January 16, 2012. No Changes Posted
Sponsor: Merck
Information provided by (Responsible Party): Merck
ClinicalTrials.gov Identifier: NCT01513291
Stated Purpose: The purpose of this study is to evaluate the safety and efficacy of MK-6096 versus placebo for preventing migraines in participants with episodic migraine. All participants will receive 28 days of placebo to assess the baseline number of monthly migraine days (Period 1). Participants will then be randomized to receive MK-6096 or placebo for three 28-day treatment periods (Period 2). Participants who complete all 12 weeks of Period 2 will receive drug or placebo for an additional 2 weeks (Period 3). Treatment assignment in Period 3 was determined at the initial randomization. In Period 3, participants who received placebo in Period 2 will continue to receive placebo and participants who received MK-6096 in Period 2 will receive either MK-6096 or placebo in a 1:1 ratio.
Read more...

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