AAPM E-NEWS

Registration is Now Live
for the 2013 AAPM Annual Meeting in Ft. Lauderdale, FL. April 11-14, 2013.
For more information...

AAPM’s 29TH ANNUAL MEETING
FORT LAUDERDALE
APRIL 11-14, 2013
REGISTER NOW

Make your room reservations now for AAPM’s 2013 Annual Meeting in Fort Lauderdale, FL. Space fills up fast, so don’t wait.

AAPM’s Education Receives ACCME’s Accreditation with Commendation

Patient Education Resources
AAPM’s website is host to 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...

Donate Now to Better Pain Care


LATEST NEWS from the American Academy of Pain Medicine

Pain Research in the News
Pain Treatments/Trials in the News
Practice Management & Coding Updates
International Pain News
FDA News, Warnings & Recalls
Substance Abuse & Addiction Research
State News (news for IA, MO, ND, NJ)
Pain News
Ethics
Annual Meeting: Register Now through 2/18 to Save $100
AAPM Foundation News
PubMed Abstracts in the News
NIH Clinical Studies & Trials

Pain Research in the News

Feeling Your Pain
January 29, 2013 [Source: Harvard Medical School]
Harvard Medical School researchers led a study at Massachusetts General Hospital and Beth Israel Deaconess Medical Center that showed physicians can experience patients’ pain and relief in the brain regions known for the placebo effect, shedding light on the doctor-patient relationship. Full story...

Migraine Triggers May Not Be As Strong As You Think
January 23, 2013 [Source: American Academy of Neurology]
A new study in Neurology suggests that triggers for migraine with aura may not be as strong as suspected, also suggesting that if a person is exposed to a suspected trigger for three months and does not have a migraine attack, they no longer need to avoid this trigger. Full story...

Study Suggests Link Between Regular Aspirin Use, Increased Risk of Age-Related Macular Degeneration
January 21, 2013 [Source: JAMA Internal Medicine]
A 15-year follow-up prospective study in Australia found that 24.5 percent of regular aspirin users (defined as once or more per week in the past year) developed an incident of age-related macular degeneration. Full story...

Mayo Clinic: Back Pain, Joint (OA) and Skin Disorders Top List of Reasons People Visit Doctors
January 16, 2013 [Source: Mayo Clinic]
According to new research in Mayo Clinic Proceedings, the top disease groups include skin disorders, osteoarthritis/joint disorders and back pain. The study tracked more than 140,000 patients and examined conditions that affect large segments of the population across all age groups. Full story...
Designate AAPM on Your AMA Membership Ballot

If you are an AMA member, you should be receiving your Specialty Representation Ballot in the mail shortly. Please take a moment and complete your Ballot, either with the self-addressed postcard or on the Internet at: www.ama-assn.org/go/ballot. Be sure to designate AAPM as your Specialty Society. It is very important that we have sufficient AAPM votes for continued representation in the House of Delegates. Thank you.

AAPM Members’ Community

Click Here to join forums, special interest groups and more!
Join in on discussions today (login required)

Advocacy Day 2011 on Capitol Hill
On March 23, 2011 AAPM state representatives visited Capitol Hill to advocate for better pain care.

Pain Treatments/Trials in the News

The Social Stigma of Migraine Headaches: Worse Than Epilepsy
January 15, 2013 [Source: Thomas Jefferson University]
Researchers at Thomas Jefferson University Hospital's Headache Center evaluated the social cost of migraine and found that chronic migraine had higher scores (54.0+/−20.2) on the stigma scale than episodic migraine (41.7+/−14.28) or epilepsy patients (44.4+/−16.3) (p<0.001). The high level of stigma for chronic migraine sufferers is due to the impact of migraine on the study subjects’ work lives. Full story...

Migraine with Aura May Lead to Heart Attack, Blood Clots for Women
January 15, 2013 [Source: American Academy of Neurology]
A study presented at the American Academy of Neurology's 65th Annual Meeting showed that migraine with aura is a strong contributor to risk of heart attack or stroke. The study also found that women with migraine with aura were more likely to have experienced blood clot complications with all types of contraceptives than women with migraine without aura. Full story...

Methods for Treating Sleep Apnea in Veterans Prescribed Opioids
January 2013 [Source: U.S. Medicine]
A new study from the John D. Dingell Veterans Affairs Medicine Center in Detroit found that using a titration protocol with continuous positive airway pressure (CPAP) and then positive (PAP) with oxygen was effective in eliminating central sleep apnea (CSA) in 84% of veterans with underlying comorbid conditions and prescription drug use. Full story...

Back to top

Practice Management & Coding Updates

Practice Management
The Practice Management section of the AAPM website offers practical tools and resources for you to use in your pain practice, as well as coding updates, reimbursement news, and other information that impacts your practice. Visit this helpful section on the website

Back to top
• Quality 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.

International Pain News

New Survey Finds Chronic Pain Treatments Are Failing Sufferers Across Europe
January 29, 2013 [Source: Boston Scientific]
Boston Scientific Corporation today released results of a survey of more than 1,000 chronic pain sufferers across Europe that suggest millions of patients there continue to suffer on a daily basis even after trying several treatment options. Full story...

FDA News, Warnings & Recalls

FDA Panel Votes to Up-Schedule Vicodin: Tighter Controls
January 25, 2013 [Source: AAPMail Alerts]
An FDA advisory panel voted 19-10 on January 25 to recommend to the FDA commissioner to reschedule pain medications that contain hydrocodone such as Vicodin, Lortab, and Norco as schedule II controlled substances from its historic status as a schedule III drug. AAPM’s President Elect Lynn Webster, MD addressed the advisory committee on AAPM’s behalf. The Academy sought to inform the FDA Advisory Panel about the possible implications to both patient and public health implications, as well as the pharmacology behind the combination hydrocodone medications. Click here to view a copy of his comments.

AAPM leaders and members were sought by the media for comments on this issue. To view a list of articles, click here.

Impact of Approved Drug Labeling on Chronic Opioid Therapy; Public Hearing; Request for Comments
On February 7 and 8, the FDA will hold a public hearing to obtain information, particularly scientific evidence, such as study data or peer-reviewed analyses on issues pertaining to the use of opioid drugs in the treatment of chronic pain. For more information...

Back to top

Substance Abuse & Addiction Research

Parents Numb to Misuse of Narcotic Pain Medicines by Youth?
January 23, 2013 [Source: University of Michigan C.S. Mott Children's Hospital]
About one-third of parents report they had received at least one pain medicine prescription for their children in the last five years, but only 19% are concerned about misuse in their own families. Full story...

National Drug Facts Week: January 28-February 3
Learn more about this great opportunity to engage and empower your community’s youth with the facts on drugs by checking out this short video message from NIDA Director Dr. Nora Volkow. Learn more...

View short video message from NIDA Director Dr. Nora Volkow...

Back to top

State News
Physical Medicine and Rehabilitation Physician with an interest in Pain Management.

West Virginia Anesthesiology
Pain Management Opening
Pinnacle Health Group
West Virginia
Anesthesiology Pain Management Opportunity. Teaching facility with a four-year medical school.

More jobs...

Read this month's
President's Message

State-by-State Opioid
Prescribing Policies on Medscape
View summary of state laws related to prescribing controlled substances.

AAPM Releases Pain Position Paper

Plenary Proceedings of the 24th Annual Meeting
Plenary Proceedings of the 24th Annual Meeting contains exciting, forward thinking perspectives currently driving the emerging field of pain medicine.

Order your copy TODAY
Price: $79

Colorado ERs Take Steps to Stop Pain Pill Abuse
January 19, 2013 [Source: The Denver Post]

IA: A Study Bill Relating to the Practice of Interventional Pain Procedures, and Providing a Penalty (HSB 3)

MO: Modifies the Laws on the Licensing Requirements and Services Provided by Nurses (SB 167)

ND: Legislation Would Eliminate Pain as Evidence of an Injury for Worker's Comp.
January 26, 2013 [Source: Grand Forks Herald]

NJ: Restricts Health Insurers from Limiting Access to Pain Medication (Assembly Bill 1832)

Back to top

Pain News

Gallup Reveals How Hospitals Can Effectively Manage Patients' Pain
January 21, 2013 [Source: Gallup Business Journal]
After polling 600 leading healthcare providers from around the world on patient engagement, safety, and experience, Gallup has discovered that these are best practices related to pain management. Full story...

Back to top

Ethics

Exposure to Conflict-of-Interest Policies During Residency Reduces Rate of Brand Antidepressant Prescription
January 18, 2013 [Source: Newswise]

Back to top

Annual Meeting

Register Now for AAPM's 29th Annual Meeting
April 11-14, 2013 Fort Lauderdale, FL
Preconference sessions: April 10-11, 2013

Don't miss your chance to save $100 on the American Academy of Pain Medicine’s 29th Annual Meeting with Early Registration rates. Physician members can register now through February 18, 2013 for $675.

Register Now

View AAPM's 2013 Annual Meeting Schedule at a Glance.

Hotel and Travel Information

- Make your room reservation now
  Be sure to select the BOOK A ROOM button on this webpage for AAPM’s 2013 Annual Meeting in Fort Lauderdale, FL. Space fills up fast. Ensure you get a room in the main hotel by reserving a room now. For
Pain Medicine's blog, and read posts by AAPM's Director at Large, Gilbert Fanciullo MD, MS.

E-News is supported by:
Supported by an unrestricted grant; content is completely and independently selected and edited by AAPM staff and members.

UPDATES

The AAPM Power Point Presentation on the Federal Regulations for Prescribing has been updated effective 11/01/2010. View this 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 to view ABPM's mission, vision, and objectives.

Pain Medicine: January 2013

Highlights:
EDITORIAL
What Would Bonica Say? A Word on the DVPRS Validation Study

SPINE SECTION
The Effectiveness of Lumbar Transforaminal Injection of Steroids: A Comprehensive Review with more information...

Please note that if you are calling in a reservation you need to mention that you are attending the AAPM Annual Meeting.

- Take advantage of discounts on airline travel...
- Resources for international travelers...

Back to top

AAPM Foundation News

Letter to WSJ by Charles E. Argoff MD: We Must Have Tamper-Proof Drugs
I echo Dr. Webster's comments in the editorial, "Making Opioid Drugs Less Alluring" the (op-ed, Jan. 14). The issue of pain and the need for safe and effective treatment is a national imperative.
Full story...

Back to top

Pain Abstracts in the News

Opioid Dose and Risk of Road Trauma in Canada: A Population-Based Study
January 14, 2013 [Source: JAMA Internal Medicine]
Abstract: Background: Use of opioids may predispose drivers to road trauma, yet the effect of opioid dose on this association is unknown. Results: Among 549,878 eligible adults, we identified 5,300 cases with road trauma and matched an equal number of controls. Multivariate adjustment yielded no significant association between escalating opioid dose and odds of road trauma (adjusted odds ratio ranged between 1.00 and 1.09). However, a significant association between opioid dose and road trauma was observed among drivers. Compared with very low opioid doses, drivers prescribed low doses had a 21% increased odds of road trauma (adjusted odds ratio, 1.21 [95% CI, 1.02-1.42]); those prescribed moderate doses, 29% increased odds (1.29 [1.06-1.57]); those prescribed high doses, 42% increased odds (1.42 [1.15-1.76]); and those prescribed very high doses, 23% increased odds (1.23 [1.02-1.49]).
Read more...

Point-of-Care Programming for Neuromodulation: A Feasibility Study Using Remote Presence
January 2013 [Source: Neurosurgery]
Abstract: BACKGROUND: The expansion of neuromodulation and its indications has resulted in hundreds of thousands of patients with implanted devices worldwide. Because all patients require programming, this growth has created a heavy burden on neuromodulation centers and patients. Remote point-of-care programming may provide patients with real-time access to neuromodulation expertise in their communities. CONCLUSION: This study establishes the proof-of-principle that remote programming of neuromodulation devices using telepresence and expert telementoring of an individual with no previous experience to accurately program a device is feasible. We envision a time in the future when patients with implanted devices will have real-time access to neuromodulation expertise from the comfort of their own home.
Read more...
The following abstracts are posted at PubMed.gov:

**Test-Retest Reliability of Thermal Temporal Summation Using an Individualized Protocol**

Kong JT, Johnson KA, Balise RR, Mackey S.
Source: Department of Anesthesia, Division of Pain Medicine, Stanford Neuroscience and Pain Laboratory, Stanford University, Palo Alto, California.

Abstract: Temporal summation (TS) refers to the increased perception of pain with repetitive noxious stimuli. It is a behavioral correlate of wind-up, the spinal facilitation of recurring C-fiber stimulation. In order to utilize TS in clinical pain research, it is important to characterize TS in a wide range of individuals and to establish its test-retest reliability. Building on a fixed-parameter protocol, we developed an individually adjusted protocol to broadly capture thermally generated TS. We then examined the test-retest reliability of TS within-day (intersession intervals ranging from 2 to 30 minutes) and between-days (intersession interval of 7 days). We generated TS-like effects in 19 of the 21 participants. Strong correlations were observed across all trials over both days (intraclass correlation [ICC] [A, 10] = .97, 95% confidence level [CL] = .94-.99) and across the initial trials between days (ICC [A, 1] = .83, 95% CL = .58-.93). Repeated measures mixed-effects modeling demonstrated no significant within-day variation and only a small (5 out of 100 points) between-day variation. Finally, a Bland-Altman analysis suggested that TS is reliable across the range of observed scores. Without intervention, thermally-generated TS is generally stable within day and between days. PERSPECTIVE: Our study introduces a new strategy to generate thermal TS in a high proportion of individuals. This study confirms the test-retest reliability of thermal TS, supporting its use as a consistent behavioral correlate of central nociceptive facilitation.

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PMID: 23273835 [PubMed - in process]
PMCID: PMC3541942 [Available on 2014/1/1]

Read more...

Back to top

**Preoperative Cognitive Therapy for Improving Health Outcomes After Total Knee Replacement in High-risk Catastrophizing Subjects (CT_TKA)**

This study is not yet open for participant recruitment.
First received: January 17, 2013 Last updated: January 18, 2013
Sponsor: Rush University Medical Center
Collaborator: Pfizer
Information provided by (Responsible Party): Asokumar Buvanendran, Rush University Medical Center
ClinicalTrials.gov Identifier: NCT01772329

Stated Purpose: The investigators propose a randomized controlled trial to evaluate the effects of treatment intended to reduce pain catastrophizing among patients reporting high pain catastrophizing prior to total knee replacement (TKR) in an effort to thereby reduce the incidence of persistent post-surgical pain (PPP) and enhance physical function at 3-months post-surgery. Preemptive treatment aimed at a known predictor of PPP following total knee replacement is highly innovative and have potentially high impact for public health. Cognitive therapy is a well-tolerated modality among chronic pain patients with few if any side effects. Cognitive therapy (CT) represents an
inexpensive method that could greatly reduce suffering and costly post-surgical pain management for high risk TKR patients.

Patients With Intermittent Claudication Injected With ALDH Bright Cells (PACE)

This study is not yet open for participant recruitment.
First received: January 18, 2013 Last updated: NA
Sponsor: The University of Texas Health Science Center, Houston
Collaborators: National Heart, Lung, and Blood Institute (NHLBI) Aldagen
Investigators, Study Chair: Robert Simari, MD, Cardiovascular Cell Therapy Research Network

Stated Purpose: The purpose of this study is to find out if aldehyde dehydrogenase bright (ALDHbr) cells taken from a patient's bone marrow can be placed safely, via intramuscular injections, into their affected calf and lower thigh muscles and improve blood flow and/or peak walking time in patients experiencing pain associated with blocked blood vessels in the leg.

Occipital Nerve Stimulation (ONS) for Migraine: OPTIMISE

This study is not yet open for participant recruitment.
First received: January 23, 2013 Last updated: NA
Sponsor: Boston Scientific Corporation

Stated Purpose: The primary objective of this study is to evaluate the safety and efficacy of occipital nerve stimulation (ONS) using the Boston Scientific Corporation (BSC) Precision™ System in the management of intractable chronic migraine, when used in conjunction with anti-migraine medications.