AAPM E-NEWS

AAPM 2014 Annual Meeting:
Last chance to submit Scientific Poster Abstracts
Deadline: September 29, 2013
For more details ...

Save the date for next year’s Annual Meeting in Phoenix, AZ
The Sheraton Phoenix Downtown Hotel is AAPM’s Annual Meeting headquarters hotel. Book hotel now...

AAPM’s Education Receives ACCME’s Accreditation with Commendation

The New England Journal of Medicine Publishes Perspective Article by NYU School of Medicine Faculty
September 19, 2013 [Source: NYU Langone Medical Center]
Newswise — Academic medical centers can help adapt to dramatic changes in health care by offering accelerated study to selected students so that they receive a doctor of medicine degree (MD) in three years rather than the traditional four, according to educational leaders at NYU School of Medicine. Full story...

Back to top

FDA News, Warnings & Recalls

Duragesic (fentanyl) Patches: Drug Safety Communication - Packaging Changes to Minimize Risk of Accidental Exposure
September 23, 2013 [Source: FDA]
In an effort to minimize the risk of accidental exposure to fentanyl patches, FDA is requiring the manufacturer of Duragesic to print the name and strength of the drug on the patch in long-lasting ink, in a color that is clearly visible to patients and caregivers. The current ink color varies by strength and is not always easy to see. This change is intended to enable patients and caregivers to more easily find patches on patients’ bodies and see patches that have fallen off, which children or pets could accidentally touch or ingest. The manufacturers of generic fentanyl patches are being requested to make similar changes. Full story...

FDA Issues Final Guidance on Mobile Medical Apps
September 23, 2013 [Source: FDA]
The U.S. Food and Drug Administration issued final guidance for developers of...
mobile medical applications, or apps, focusing its regulatory oversight on a subset of mobile medical apps that present a greater risk to patients if they do not work as intended. Included in those apps that transform smart phones into a mobile ultrasound device... more

Back to top

Pain Research in the News

A New Class of Illusions Discovered at NeuRA
September 24, 2013 [Source: Neuroscience Research Australia]
Researchers at Neuroscience Research Australia (NeuRA) have revealed a new class of illusions with the realisation that humans may be more attuned to their own bodies than previously thought. The findings provide fundamental information into how the brain makes maps of the body so that it can then make accurate movements. Full story...

Groundbreaking Pain Research by University of Kentucky Scientists
September 19, 2013 [Source: University of Kentucky]
LEXINGTON, Ky. -- The bodies of mammals, including humans, respond to injury by releasing endogenous opioids -- compounds that mitigate acute pain. A team of researchers led by those at the University of Kentucky has uncovered groundbreaking new information about how the body responds to traumatic injury with the development of a surprisingly long-lasting opioid mechanism of natural chronic pain control. Remarkably, the body develops both physical and physiological dependence on this opioid system, just as it does to opiate narcotic drugs. The research is featured on the cover of the current issue of the prestigious journal Science. Full story...

Predicting Who Will Have Chronic Pain
September 16, 2013 [Source: Northwestern University]
CHICAGO --- Abnormalities in the structure of the brain predispose people to develop chronic pain after a lower back injury, according to new Northwestern Medicine® research. The findings could lead to changes in the way physicians treat patients’ pain. Full story...

Codeine Could Increase Users’ Sensitivity to Pain
September 12, 2013 [Source: University of Adelaide]
Using large and frequent doses of the pain-killer codeine may actually produce heightened sensitivity to pain, without the same level of relief offered by morphine, according to new research from the University of Adelaide. Researchers in the Discipline of Pharmacology have conducted what is believed to be the world’s first experimental study comparing the pain relieving and pain worsening effects of both codeine and morphine. Full story...

As Opioid Use Soars, No Evidence of Improved Treatment of Pain
September 16, 2013 [Source: John Hopkins Bloomberg School of Public Health]
A new study led by the Johns Hopkins Bloomberg School of Public Health finds that during a decade when prescription opioid use has skyrocketed, the identification and treatment of pain has failed to improve, and the use of non-opioid analgesics has plateaued, or even declined. The study was published online September 13 in the journal Medical Care. Full story...

Chronic Pain Following Spinal Cord Injury Reduced by Diet Rich in Omega-3 Fatty Acids, Suggests Loma Linda University Health Study
September 17, 2013 [Source: Loma Linda University Health]
Chronic pain following spinal cord injury may be reduced by consuming a diet rich in omega-3 fatty acids, according to new research from Loma Linda University Health. The study, accepted for publication in the scientific journal...
Neuroscience and now available online on Science Direct, found that the pain threshold of rats with spinal cord injury increased as a result of a diet containing omega-3 fatty acids. Full story...

Opioid Tolerance or Hyperalgesia? Key Symptoms Offer Clues
September 16, 2013 [Source: Medscape]
Full story...

Need Steroids? Maybe Not for Lower Back Pain
September 18, 2013 [Source: Johns Hopkins Medicine]
New research from Johns Hopkins suggests that it may not be the steroids in spinal shots that provide relief from lower back pain, but the mere introduction of any of a number of fluids, such as anesthetics and saline, to the space around the spinal cord. Full story...

Opioid Alternatives Urged Postoperatively
September 20, 2013 [Source: Medscape]
Full story...

People with Dementia Need Better Pain Management
September 23, 2013 [Source: Canadian Medical Association Journal]
Full story...

Purdue Pharma L.P. Receives FDA Approval For 15 Mcg/Hour Dosage Strength Of Butrans® (Buprenorphine) Transdermal System CIII
September 24, 2013 [Source: Purdue Pharma L.P.]
Stamford, CT, September 24, 2013 – Purdue Pharma L.P. announced that the U.S. Food and Drug Administration (FDA) approved a new 15 mcg/hour dosage strength of Butrans® (buprenorphine) Transdermal System CIII, which will provide an additional titration option for healthcare professionals. Four strengths of Butrans will now be available: 5, 10, 15 and 20 mcg/hour. Purdue expects to launch Butrans 15 mcg/hour commercially in the U.S. in October 2013. Full story...

Study Shows EXPAREL® Provided Improved Pain Control, Shorter Length of Hospital Stay and Substantial Cost Savings Following Total Knee Replacement
September 20, 2013 [Source: Pacira Pharmaceuticals]
Pacira Pharmaceuticals announced results from a 200-patient study evaluating the benefits of Exparel (bupivacaine liposome injectable suspension) as the foundation of a multimodal postsurgical pain management regimen in patients undergoing total knee arthroplasty (TKA), also known as total knee replacement. Full story...
Practice Management & Coding Updates

**Place of Service-It's Important to Medicare and Your Practice**

*Emily Hill, PA, AAPM Coding Consultant*

Recovery Audit Contractors (RAC) have identified over/underpayments related to improper place of service codes. Medicare reimburses physicians at an increased rate when surgical procedures are performed in the office setting. This increase takes into account the cost to the practice for supplies, equipment and clinical staff associated with the procedure. When services are provided in an outpatient facility, a portion of these costs are reimbursed to the facility.

[Read more...](#)

Check [www.painmed.org/coding](http://www.painmed.org/coding) for Coding Books, Webinar archives and other coding resources.

[Back to top](#)

**Education News**

**AMA to Hold Webinar on Genetic Factors Affecting Patient Response to Opioids**

*September 18, 2013 [Source: American Medical Association]*

This webinar will examine the genetic basis for differences in clinical responses observed among patients receiving opioid analgesics. Mutations in genes encoding the mu opioid receptor have been linked to the variability in responses to opioids. September 25, 2013 at 1:00 PM EDT

Faculty: Charles E. Argoff, M.D., Professor of Neurology, Albany Medical College, Director, Comprehensive Pain Center, Albany Medical Center.

[Read more and view archive webinar free to AMA members and non-members...](#)

[Back to top](#)

**AAPM 2014 Annual Meeting**

**2014 Call for Scientific Poster Abstracts**

*Deadline to Submit: Sunday, September 29, 11:59 PM (CST)*

The AAPM's 30th Annual Meeting will take place on March 6-9, 2014 in Phoenix, AZ at the Phoenix Convention Center. The AAPM 2014 Scientific Poster Abstract Committee invites applicants to submit abstracts for posters to be presented at the meeting. Last chance to submit a poster, deadline, Sunday September 29, 2013, 11:59 PM (CST). [For more information...](#)

The Sheraton Phoenix Downtown Hotel is AAPM's 30th Annual Meeting headquarters hotel.

**Sheraton Phoenix Downtown Hotel**

340 North 3rd Street
Phoenix, AZ 85004
Phone: 602-262-2500*

*Please Note: if you are calling in a reservation, you need to mention that you are attending the AAPM Annual Meeting.

***ONE-NIGHT ROOM & TAX, NON--REFUNDABLE, DEPOSIT REQUIRED AT TIME OF RESERVATION PER ROOM.***

Group rate available until February 11, 2014. Subject to Availability.

Make your room reservations now for AAPM's 2014 Annual Meeting in Phoenix,
PSYCHOLOGY, PSYCHIATRY & BRAIN NEUROSCIENCE SECTION
Spiritual Needs among Patients with Chronic Pain Diseases and Cancer Living in a Secular Society

OPIOIDS, SUBSTANCE ABUSE & ADDICTIONS SECTION
Dose Patterns among Patients Using Low-Dose Buprenorphine Patches

TRANSLATIONAL RESEARCH SECTION
Mechanisms of Topical Analgesics in Relieving Pain in an Animal Model of Muscular Inflammation

MUSCULOSKELETAL SECTION
Longitudinal Observation of Treatment Patterns and Outcomes for Patients with Fibromyalgia: 12-Month Findings from the REFLECTIONS Study

Findings from the REFLECTIONS Patients with Fibromyalgia: 12-Month Longitudinal Observation of Low-Dose Buprenorphine Patches

MEMBERSHIP
AAPM Membership Renewals
Membership renewals are currently being sent out. Don't miss the opportunity to continue being a part of the primary organization for physicians practicing in the specialty of pain medicine. As a member you will continue to receive the AAPM E-News, Pain Medicine, the official journal of AAPM, as well as representation and advocacy in Washington DC, up-to-date coding information, discounts on AAPM's Annual Meeting, and a host of other member benefits.

Pay dues online or for phone assistance, please call customer service at 847/375-4731.

Join AAPM Now

With membership at an unprecedented level, more than 2,400 physicians and their pain teams are part of this premier medical specialty society, practicing in pain medicine from origins in anesthesiology, neurosurgery, neurology, physiatry, and psychiatry. Now in its 29th year, the American Academy of Pain Medicine (AAPM) continues to provide education, training, advocacy and research in the specialty of pain medicine. Consider joining AAPM today and become part of this

AZ. Space fills up fast, so don’t wait until the registration goes live. Ensure you get a room in the main hotel by reserving it now.

Book hotel now...

Back to top

Principles for Safer Opioid Prescribing

Eight Principles for Safer Opioid Prescribing, Points 1 & 2:

1. Assess patients for risk of nonmedical use or medical misuse before starting opioid therapy and manage accordingly.

Providers may use one of several available tools before prescribing for opioids to assess patients for their risk of developing problematic drug-taking behaviors [1–3]. These are based on biological, social, and psychiatric risk factors associated with misusing opioids prescribed for pain [4–6]. Implement a plan according to the level of risk: e.g., for high-risk patients, this might include referral for further psychiatric evaluation and comanagement with a chemical dependency expert prior to initiating an opioid trial.

Periodic monitoring for effects on analgesia, daily activities, adverse effects, aberrant drug-related behaviors, cognition, function, and quality of life can be assisted by tools such as the Pain Assessment and Documentation Tool and the Current Opioid Misuse Measure [7, 8]. Clinicians should use checks of the state prescription-monitoring database and measures, such as urine drug monitoring, to ensure adherence to the medication regimen [9]. All patients should be taught safe usage, storage, and disposal methods.

2. Watch for and treat comorbid mental disease when it occurs.

The frequent co-occurrence of mental-health disorders, including depression and anxiety, with chronic pain place patients at high risk for misuse, mixing, drug–drug interactions, and overdose [10–13]. Assess for the presence of mental-health disorders before initiating opioid therapy and, when indicated, consult with experts in mental-health fields to coordinate care.

To view full article (login required)...

References:


11. Ohayon MM, Schatzberg AF. Chronic pain and major depressive disorder in the general population. J
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.

Pain Abstracts in the News

Association of Posttraumatic Stress Disorder With Reduced In Vivo Norepinephrine Transporter Availability in the Locus Coeruleus

September 18, 2013 [Source: JAMA Psychiatry]

ABSTRACT: Importance Animal data suggest that chronic stress is associated with a reduction in norepinephrine transporter (NET) availability in the locus coeruleus. However, it is unclear whether such models are relevant to posttraumatic stress disorder (PTSD), which has been linked to noradrenergic dysfunction in humans.

Read more...

PubMed Pain Abstracts

The following abstracts are posted at PubMed.gov:

A De Novo Gain-of-Function Mutation in SCN11A Causes Loss of Pain Perception

Nat Genet. 2013 Sep 15. doi: 10.1038/ng.2767. [Epub ahead of print]


Source: Center for Molecular Biomedicine, Department of Biophysics, Friedrich Schiller University Jena and Jena University Hospital, Jena, Germany.

Abstract: The sensation of pain protects the body from serious injury. Using exome sequencing, we identified a specific de novo missense mutation in SCN11A in individuals with the congenital inability to experience pain who suffer from recurrent tissue damage and severe mutilations. Heterozygous knock-in mice carrying the orthologous mutation showed reduced sensitivity to pain and self-inflicted tissue lesions, recapitulating aspects of the human phenotype. SCN11A encodes Nav1.9, a voltage-gated sodium ion channel that is primarily expressed in nociceptors, which function as key relay stations for the electrical transmission of pain signals from the periphery to the central nervous system. Mutant Nav1.9 channels displayed excessive activity at resting voltages, causing sustained depolarization of nociceptors, impaired generation of action potentials and aberrant synaptic transmission. The gain-of-function mechanism that underlies this channelopathy suggests an alternative way to modulate pain perception.

PMID: 24036948 [PubMed - as supplied by publisher]

Read more...

PainNetworks: A Web-Based Resource for the Visualisation of Pain Related Genes in the Context of Their Network Associations


Source: Institute of Structural and Molecular Biology, University College London, London, UK. Electronic address: PainNetworks@gmail.com.

Abstract: Hundreds of genes are proposed to contribute to nociception and pain perception. Historically, most studies of pain related genes have examined them in isolation or alongside a handful of other genes. More recently however, the
use of systems biology techniques has enabled us to study genes in the context of the biological pathways and networks in which they operate. Here we describe a web-based resource, available at www.PainNetworks.org. It integrates interaction data from various public databases with information on known pain genes taken from several sources (e.g. The Pain Genes Database) and allows the user to examine a gene (or set of genes) of interest alongside known interaction partners. This information is displayed by the resource in the form of a network. The user can enrich these networks by using data from pain-focused gene expression studies to highlight genes that change expression in a given experiment or pairs of genes showing correlated expression patterns across different experiments. Genes in the networks are annotated in several ways including biological function and drug binding. The website can be used to find out more about a gene of interest by looking at the function of its interaction partners. It can also be used to interpret the results of a functional genomics experiment by revealing putative novel pain related genes that have similar expression patterns to known pain related genes and by ranking genes according to their network connections with known pain genes. We expect this resource to grow over time and become a valuable asset to the pain community.

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PMID: 24036287 [PubMed - as supplied by publisher]

Endocannabinoids in the Brainstem Modulate Dural Trigeminovascular Nociceptive Traffic via CB1 and "Triptan" Receptors: Implications in Migraine

Akerman S, Holland PR, Lasalandra MP, Goadsby PJ.
Source: Headache Group, Department of Neurology, University of California, San Francisco, San Francisco, California 94158.

Abstract: Activation and sensitization of trigeminovascular nociceptive pathways is believed to contribute to the neural substrate of the severe and throbbing nature of pain in migraine. Endocannabinoids, as well as being physiologically analgesic, are known to inhibit dural trigeminovascular nociceptive responses. They are also involved in the descending modulation of cutaneous-evoked C-fiber spinal nociceptive responses from the brainstem. The purpose of this study was to determine whether endocannabinoids are involved in the descending modulation of dural and/or cutaneous facial trigeminovascular nociceptive responses, from the brainstem ventrolateral periaqueductal gray (vlPAG). CB1 receptor activation in the vlPAG attenuated dural-evoked Aδ-fiber neurons (maximally by 19%) and basal spontaneous activity (maximally by 33%) in the rat trigeminocervical complex, but there was no effect on cutaneous facial receptive field responses. This inhibitory vlPAG-mediated modulation was inhibited by specific CB1 receptor antagonism, given via the vlPAG, and with a 5-HT1B/1D receptor antagonist, given either locally in the vlPAG or systemically. These findings demonstrate for the first time that brainstem endocannabinoids provide descending modulation of both basal trigeminovascular neuronal tone and Aδ-fiber dural-nociceptive responses, which differs from the way the brainstem modulates spinal nociceptive transmission. Furthermore, our data demonstrate a novel interaction between serotonergic and endocannabinoid systems in the processing of somatosensory nociceptive information, suggesting that some of the therapeutic action of triptans may be via endocannabinoid containing neurons in the vlPAG.

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PMID: 24027286 [PubMed - in process]
Ultrasound-Assisted Paravertebral Block v. Traditional Paravertebral Block For Pain Control
This study is currently recruiting participants.
Sponsor: University of Pittsburgh
Information provided by (Responsible Party): Anna Uskova, University of Pittsburgh
ClinicalTrials.gov Identifier: NCT01949480
First received: September 19, 2013
Stated Purpose: The overall purpose of this research study is to compare the effectiveness of ultrasound assisted paravertebral block placement versus traditional "blind" technique for postoperative analgesia following thoracotomy or visually assisted thoracoscopic surgery.
Read more...

Effect of IV Acetaminophen on Patients in the Neurocritical Care Unit
This study is currently recruiting participants.
Verified September 2013 by University of Utah
Sponsor: University of Utah
Information provided by (Responsible Party): Walavan Sivakumar, University of Utah
ClinicalTrials.gov Identifier: NCT01948505
First received: September 18, 2013
Stated Purpose: To assess the efficacy of an intravenous nonnarcotic pain medication on controlling patient pain. To assess the effect of an intravenous nonnarcotic pain medication on patient sedation levels in neurocritically ill patients. To assess the effect of an intravenous nonnarcotic pain medication on common side effects seen in patients taking other intravenous narcotic pain medication in the neurocritical care unit.
Read more...

A Retrospective Chart Review to Evaluate Diagnosis and Treatment of Chronic Migraine and Headache
This study is not yet open for participant recruitment.
Sponsor: Allergan
Information provided by (Responsible Party): Allergan
ClinicalTrials.gov Identifier: NCT01946126
First received: September 17, 2013
Stated Purpose: This study is a retrospective chart review in patients diagnosed with headache or migraine to evaluate treatment patterns and diagnosis.
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Back to top