AAPM E-News

LATEST NEWS from the American Academy of Pain Medicine

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AAPM Business

Academy Position Statements

NEW: The Evidence Against Methadone as a "Preferred" Analgesic
A Position Statement from the American Academy of Pain Medicine

NEW: Minimum Insurance Benefits for Patients with Chronic Pain
A Position Statement from the American Academy of Pain Medicine

Approval of AAPM Bylaws Revision

The AAPM Bylaws Revision Ballot has been tabulated and notarized. This message officially relays that the quorum requirement of at least 20% eligible voter turnout was achieved and that each proposed Bylaws revision was approved by at least a two-thirds majority of votes cast.

The following items have been incorporated into the AAPM Bylaws:

1. The Mission Statement was updated to reflect the current mission statement.
2. The Vice President for Scientific Affairs position description was updated to remove reference to past dates.
3. The Bylaws Amendment section was revised to allow an additional means in which to amend the Bylaws.

Thank you to all eligible AAPM members who participated in the vote.

Donate Now to Better Pain Care
Practice Management & Coding Updates

2014 Pain Management Codes Posted on Website
The Coding and Reimbursement Committee has updated the coding information available on the AAPM website. New charts have been posted that include information concerning Medicare's 2014 Relative Value Units (RVUs) and global periods for codes commonly reported by Pain Medicine Physicians. The charts are organized according to the type of service (e.g. E/M, injections, radiology) and identify new and revised codes. Read more...

SGR Cuts Looming - You Can Help!
Emily Hill, PA, AAPM Coding Consultant
On March 31, the SGR (Sustainable Growth Rate) will kick in resulting in a 24% decrease in Medicare payments to physicians. The SGR is a rate-setting system used to control the fees physicians receive for their services from Medicare. Under the SGR, future payment updates depend on the difference between spending in prior years and spending targets established in law. The SGR has resulted in decreases in physician payments since 2003, however congressional action has prevented those cuts from taking place. While these congressional actions have prevented major cuts in physician reimbursement, these actions have only been temporary patches. Read more...

For 2014 Coding Books, Webinar archives and other coding resources visit www.painmed.org/coding

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New Educational Resources

Announcing: AAPM's Most In-Demand Pain Education is Available in Your Time and Your Space – Online and On Demand
Now, you can view the American Academy of Pain Medicine’s most in-demand, comprehensive, ‘what-you-need-to-know,’ Essentials Tools for Treating the Patient in Pain™ course, when and where it fits your schedule. Learn from the best in the privacy of your home or office! For more information...

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Pain Research in the News

Nerve Transfers Limit Pain for Amputees
March 21, 2014 [Source: Northwestern University Feinberg School of Medicine]
A new Northwestern Medicine study exploring the benefits of targeted muscle reinnervation (TMR) – a series of nerve transfers that permits intuitive control of upper-limb prostheses – could change the way surgical amputations are performed in the future. Full story...

Computers See Through Faked Expressions of Pain Better Than People
March 20, 2014 [Source: University of California, San Diego]
A joint study by researchers at the University of California, San Diego and the University of Toronto has found that a computer system spots real or faked expressions of pain more accurately than people can. The work, titled “Automatic Decoding of Deceptive Pain Expressions,” is published in the latest issue of *Current Biology*. [Full story...](#)

**Study Aims to Ease the Burden of Lower Back Pain**

*March 19, 2014 [Source: University of South Australia]*

The University of South Australia is set to begin a new study into lower back pain, a condition which affects up to 80 per cent of Australian men and women at some stage in their lifetime. [Full story...](#)

**U.S. Headache Sufferers Get $1 Billion Worth of Brain Scans each Year, U-M Study Finds**

*March 17, 2014 [Source: University of Michigan Health System]*

One in eight visits to a doctor for a headache or migraine end up with the patient going for a brain scan, at a total cost of about $1 billion a year, a new University of Michigan Medical School study finds. [Full story...](#)

**Battlefield Acupuncture Pinpoints Pain Relief**


[Full story...](#)

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## Pain Treatments/Trials in the News

**Experts Weigh in on Recent FDA Opioid Changes**

*March 7, 2014 [Source: Medscape]*

[Full story (login required)...](#)

**FDA Allows Marketing of First Medical Device to Prevent Migraine Headaches**

*March 11, 2014 [Source: FDA]*

Today, the U.S. Food and Drug Administration allowed marketing of the first device as a preventative treatment for migraine headaches. This is also the first transcutaneous electrical nerve stimulation (TENS) device specifically authorized for use prior to the onset of pain. "Cefaly provides an alternative to medication for migraine prevention," said Christy Foreman, director of the Office of Device Evaluation at the FDA’s Center for Devices and Radiological Health. "This may help patients who cannot tolerate current migraine medications for preventing migraines or treating attacks.". [Full story...](#)

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Researchers Find Significant Increase in Painkillers Prescribed to U.S. Adults Visiting Emergency Departments
March 14, 2014 [Source: George Washington University]

George Washington University (GW) researchers report dramatic increases in prescriptions of opioid analgesics, such as Percocet, Vicodin, oxycodone and Dilaudid, during U.S. emergency department visits from 2001 to 2010. These findings were not explained by higher visit rates for painful conditions, which only increased modestly during the time period. This report was published today in the journal Academic Emergency Medicine. Full story...

Physicians are a Leading Source of Prescription Opioids for the Highest-Risk Users
March 3, 2014 [Source: CDC]

Most people who abuse prescription opioid drugs get them for free from a friend or relative – but those at highest risk of overdose are as likely to get them from a doctor’s prescription, CDC researchers reported today in a research letter, "Sources of Prescription Opioid Pain Relievers by Frequency of Past-Year Nonmedical Use: United States, 2008-2011," in the Journal of the American Medical Association Internal Medicine (JAMA Internal Medicine). Full story...

Sources of Prescription Opioid Pain Relievers by Frequency of Past-Year Nonmedical Use United States, 2008-2011
March 3, 2014 [Source: JAMA Internal Medicine]
Full story...

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State Legislative News

IA: Iowa Board of Pharmacy Rules Against Medical Marijuana Petition
March 14, 2014 [Source: Iowa Board of Pharmacy]

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Substance Abuse and Addiction Research

How Much Do Americans Really Spend on Drugs Each Year?
March 20, 2014 [Source: ONDCP]

The consequences of drug use in our communities are important to measure so that we can better understand both the scope of the problem and the scale of response required. Drug problems intersect with, and contribute to, many challenges our Nation faces. Full story...
View report...

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Industry Corner

Purdue Pharma L.P. Announces Positive Phase 3 Clinical Trial Results of Once-Daily Hydrocodone Bitartrate Extended-Release Tablets
March 12, 2014 [Source: Purdue Pharma L.P.]

Purdue Pharma L.P. announced that a Phase 3 study of an investigational extended-release formulation of hydrocodone bitartrate met its primary efficacy endpoint by showing that patients with chronic low back pain treated with the once-daily analgesic agent experienced statistically significant
reduction in pain compared with placebo (p=0.0016). This investigational single-entity opioid analgesic formulation incorporates abuse-deterrent properties intended to make the tablets more difficult to manipulate for the purpose of misuse and abuse by various routes of administration (e.g., snorting and intravenous injection). Full story...

Mallinckrodt plc Receives FDA Approval For XARTEMIS XR (oxycodone hydrochloride and acetaminophen) Extended-Release Tablets (CII)
March 12, 2014 [Source: Mallinckrodt]
Mallinckrodt plc (NYSE: MNK) today announced that the U.S. Food and Drug Administration (FDA) has approved XARTEMIS™ XR (oxycodone hydrochloride and acetaminophen) Extended-Release Tablets (CII), previously known as MNK-795, for the management of acute pain severe enough to require opioid treatment and in patients for whom alternative treatment options (e.g., non-opioid analgesics) are ineffective, not tolerated or would otherwise be inadequate. XARTEMIS XR is the first and only extended-release oral combination of two clinically proven pain medications -- oxycodone and acetaminophen. Full story...

OTEZLA® (apremilast) - First Oral Therapy Approved by the U.S. Food and Drug Administration for the Treatment of Adults with Active Psoriatic Arthritis
March 21, 2014 [Source: Celgene]
SUMMIT, N.J.--(BUSINESS WIRE)-- Celgene Corporation (NASDAQ: CELG) today announced that the U.S. Food and Drug Administration (FDA) has approved OTEZLA® (apremilast), the Company's oral, selective inhibitor of phosphodiesterase 4 (PDE4), for the treatment of adult patients with active psoriatic arthritis. A chronic disorder, psoriatic arthritis is characterized by pain, stiffness, swelling and tenderness of the joints, inflammation of specific ligaments and tendons, and a decrease in physical functioning. OTEZLA is the only FDA-approved oral treatment for psoriatic arthritis. Full story...

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Annual Meeting

Annual Meeting News Coverage:

- No Difference by Injection Approach for Low Back Pain
  March 10, 2014 [Source: Medscape]
- Sustained Pain Relief with RF Intradiscal Biacuplasty
  March 11, 2014 [Source: Medscape]
- Veterans Study: Prescribed Opioids Trigger Chronic Use
  Veterans with pain vulnerable to overuse, overdose
  March 13, 2014 [Source: Medscape]
- Hydrocodone/Acetaminophen Not Superior to Codeine/Acetaminophen for Acute Pain
  March 13, 2014 [Source: Medscape]
- Interdisciplinary Fibromyalgia Treatment Benefits Sustained
  March 14, 2014 [Source: Medscape]
- Hormone Combo Reduces Pain, Opioid Dose in Intractable Pain
  March 17, 2014 [Source: Medscape]
- No Increases in Pain Seen With Opioid Dose Reductions
  March 17, 2014 [Source: Medscape]
- Influence of Low Back Pain and Prognostic Value of MRI in Sciatica Patients in Relation to Back Pain
  March 17, 2014 [Source: PLOS One]
- Benzodiazepine prescriptions with opioids increasing
  March 17, 2014 [Source: Formulary Watch]
AAPM’s Annual Meeting News (click here to view the following topics):

- 21st Century National Pain Registry Could Change Culture and Practice of Pain Management
- Leading Pain Specialists Say Interdisciplinary Care is Best for Chronic Pain, but Insurance Coverage Falls Short
- Call Issued for Better Research, Treatment Protocol for Neuropathic Pain as a Complication of Bariatric Surgery
- Chronic Pain Researchers First to Link Regulatory Protein to Mu Opioid Receptor Signaling
- Higher Functioning Endogenous Opioid System Predicts Better Treatment Response For Neuropathic Pain Treated With Topical NSAIDs: Study
- Less Intractable Pain and Opioid Consumption Follow Administration of "Pregnancy" Hormones, Preliminary Study Shows
- Multidisciplinary Care Best for Pain Secondary to Bisphosphonate-Related Osteonecrosis of the Jaw: A Case Study
- Opioid Regimens that Deliver Best Pain Control Reflect Assay Findings of Cytochrome Defects: Chart Review
- Stanford Researchers Show Conditioned Pain Modulation Equals Less Activity in the Human Spinal Cord
- Stem Cell Transplant Shows “Landmark” Promise for Treatment of Degenerative Disc Disease: Mayo Clinic
- Leading Pain Specialists Warn of Overdose Danger if Methadone is “Preferred” for Pain
- Fibromyalgia Patients May Be Grouped by Symptom and Severity Level, Informing Therapeutic Decisions, Study Finds
- Half of Veterans Prescribed Medical Opioids Continue to Use Them Chronically, Study Finds
- Heating Safety from MRI Radiofrequency Energy Demonstrated in Variety of Simulated Spinal Cord Stimulator Scenarios
- Mayo Clinic Researchers Found Most Injectate Spread to Surrounding Tissues After Pudendal Nerve Block
- Postsurgical Pain Control Linked to Patient Satisfaction with Hospital Experience
- Prescriptions for Benzodiazepines Rising and Risky When Combined with Opioids, Stanford Researchers Warn
- Reducing Wait Times Could Improve Spinal Cord Stimulator Success for Chronic Pain
- Study Shows Long-Lasting Improvements for Discogenic Low-Back Pain Treated with Minimally Invasive Intradiscal Biacuplasty
- Transforaminal vs. Interlaminar Epidural Steroid Injections: Both Offered Similar Pain Relief, Function for Radiating Low-Back Pain

Click here to view all...

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AAPM Members in the News

New Online Community from Dr. Lynn Webster Helps Clients with Chronic Pain Management
March 18, 2014 [Source: Your Pain Community]

AAPM Immediate Past President, Lynn R. Webster MD introduces his new website, Your Pain Community. Read more...

Lynn R. Webster, MD
Nerve Pain Study Off to Promising Start in Southern W.Va., Doctors Say
March 23, 2014 [Source: The Charleston Gazette]

AAPM Board Member, Timothy R. Deer MD, is featured in The Charleston Gazette discussing the ACCURATE trial, which offers an innovative treatment within the growing field of electrical medicine, and one that has already proven successful in many European studies - the Axium Neurostimulator System. Full story...

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Pain Abstracts in the News

Better Quality Sleep Promotes Daytime Physical Activity in Patients with Chronic Pain? A Multilevel Analysis of the Within-Person Relationship
March 25, 2014 [Source: PLOS ONE]

Abstract: Background: Promoting physical activity is key to the management of chronic pain, but little is understood about the factors facilitating an individual's engagement in physical activity on a day-to-day basis. This study examined the within-person effect of sleep on next day physical activity in patients with chronic pain and insomnia.
Read more...

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PubMed Pain Abstracts

The following abstracts are posted at PubMed.gov:

Sources of Individual Variability: miRNAs that Predispose to Neuropathic Pain Identified Using Genome-Wide Sequencing
Bali KK, Hackenberg M, Lubin A, Kuner R, Devor M.

Abstract: BACKGROUND: We carried out a genome-wide study, using microRNA sequencing (miRNA-seq), aimed at identifying miRNAs in primary sensory neurons that are associated with neuropathic pain. Such scans usually yield long lists of transcripts regulated by nerve injury, but not necessarily related to pain. To overcome this we tried a novel search strategy: identification of transcripts regulated differentially by nerve injury in rat lines very similar except for a contrasting pain phenotype. Dorsal root ganglia (DRGs) L4 and 5 in the two lines were excised 3 days after spinal nerve ligation surgery (SNL) and small RNAs were extracted and sequenced. CONCLUSIONS: Despite its genome-wide coverage, our search strategy yielded a remarkably short list of neuropathic pain-related miRNAs. As 2 of the 3 are validated regulators of important pro-nociceptive compounds, it is likely that they contribute to the orchestration of gene expression changes that determine individual variability in pain phenotype. Further research is required to determine whether some of the other known or predicted gene targets of these miRNAs, or of the differentially regulated non-miRNA sncRNAs, also contribute.
PMID: 24642266 [PubMed - as supplied by publisher]
Read more...

The Joints on Glucosamine (JOG) Study: The Effect of Oral Glucosamine on Joint Structure, a Randomized Trial
Kwoh CK1, Roemer FW, Hannon MJ, Moore CE, Jakicic JM, Guermazi A, Green SM, Evans RW, Boudreau
Abstract: Objective: To determine the short-term efficacy of oral glucosamine supplementation by evaluating structural lesions as assessed using 3T MRI. Results: The adjusted odds ratio (aOR) for decreased cartilage damage for any WORMS scored subregion in the glucosamine group compared to the control group was 0.938 (95% CI 0.528, 1.666). Compared to those treated, controls showed more improvement in BMLs (aOR=0.537; 95% CI 0.291, 0.990) but no difference in worsening BMLs (aOR = 0.691; 95% CI 0.410, 1.166). There was no indication that glucosamine decreased urine CTX-II excretion (beta = -0.10, 95% CI □0.21, 0.002). Conclusion: This short-term study provided no evidence of structural benefits (i.e., MRI morphology or urinary CTX-II excretion) from glucosamine supplementation in individuals with chronic knee pain. © 2013 American College of Rheumatology. PMID: 24616448 [PubMed - as supplied by publisher]

NIH Clinical Studies & Trials

The following studies and trials are posted at ClinicalTrials.gov:

C7-T1 Epidural Steroid Injections Versus Targeted Injection Via Cervical Epidural Catheter for Treatment of Cervical Radicular Pain
This study is currently recruiting participants.
First received: March 20, 2014
Sponsor: Northwestern University
Information provided by (Responsible Party): David Walega, Northwestern University
Principal Investigator: David R Walega, M.D., Northwestern University, Feinberg School of Medicine
ClinicalTrials.gov Identifier: NCT02095197
Stated Purpose: Cervical radicular pain is a common, disabling problem, occurs in 83:100,000 individuals per year. Symptoms are most often caused by intervertebral disc herniation (21.9%) or central or foraminal stenosis from spondylosis (68.4%). Patients complain of pain in the head, neck, scapula or arm. The diagnosis of radicular pain is made clinically by history and physical examination, supported by imaging studies and electrodiagnostic tests. No study has compared the differences in pain, medication utilization, functional outcomes, or patient satisfaction between interlaminar and targeted epidural injections in the cervical spine.

Sphenopalatine Ganglion Nerve Block vs. Elavil for Treatment of Transformed Migraines
This study is enrolling participants by invitation only.
First received: March 17, 2014
Sponsor: Rutgers, The State University of New Jersey
Information provided by (Responsible Party): Rutgers, The State University of New Jersey
ClinicalTrials.gov Identifier: NCT02090998
Stated Purpose: This study will compare a local anesthetic technique that has been used to treat subjects suffering from transformed migraines (chronic migraines) versus medical management with traditional antidepressant Amitriptyline / Elavil. Subjects will be randomized into one of two treatment groups to compare the safety and efficacy of the therapies. Subjects will receive either sphenopalatine ganglion nerve block with 5% lidocaine gel into the nasopharynx or medical management with traditional antidepressants, Elavil, to produce a reduction in the frequency and severity of the headache.