AAPM E-News

AAPM 2015 Annual Meeting:
The Call for Scientific Poster Abstracts is now live. Submission deadline is September 23, 2014.
For more details ...

SAVE THE DATE
Pain Medicine: DC 2015
March 19-22, 2015
National Harbor, MD
Preconference sessions begin March 18

AAPM's 31st Annual Meeting begins 5pm Thursday March 19 - ends Sunday March 22 at noon
Preconference sessions begin Wednesday March 18
Gaylord National Resort & Convention Center
National Harbor, MD

AAPM's Education Receives ACCME Accreditation with Commendation

Patient Education Resources
AAPM's website is host to patient education videos that include 21 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

AAPM Business -- Call for Nominations Deadline: June 30
Essentials Live Mini Courses – AAFP & PAINWeek
Pain Research in the News
Substance Abuse and Addiction Research
Practice Management & Coding Updates
Annual Meeting Post-Coverage
Government Agency News
State Legislative News
Pain News
Get Involved
Industry News
Pain Abstracts in the News
PubMed Pain Abstracts
NIH Clinical Studies & Trials

AAPM Business

Call for Nominations:
2015-2016 Board of Directors and Nominating Committee
Deadline: June 30, 2014
The Academy is now inviting nominations for available 2015-2016 positions on the Board of Directors and the Nominating Committee. Nominees should be current, voting members of AAPM who are interested in and qualified for service in a leadership role.
Click here for more information...

Call for 2015 Awards Nominations
Deadline: June 30, 2014
The annual AAPM awards program identifies and celebrates the accomplishments of individuals whose endeavors improve the care of people with pain. Awards are presented at the AAPM Annual Meeting to those who contribute to the field of Pain Medicine in social, political, scientific, or clinical arenas.
Click here for more information...

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Essentials Live Mini Courses – AAFP & PAINWeek

Save these dates
Essentials Live Mini-Courses at AAFP and at PAINWeek 2014
Several Live mini versions of AAPM's Essential Tools for Treating the Patient in Pain™ are scheduled for Fall of 2014. These programs will provide
portions of the full Essentials course and are presented in conjunction with other meetings. These mini-courses offer participants a chance to sample the outstanding content and speakers that take part in the full Essentials course.

So Save these Dates and watch the website for details on the 2014 Live Essentials Mini-Programs: clinically accurate, live presentations from the top pain educators in the country.

PAINWeek 2014
AAPM's Essentials of Pain at PAINWeek Live Mini-Course
"Essential Tools for Treating the Patient in Pain™"
4-Hour Course

Date: Wednesday, September 3
Location: Las Vegas, NV

Essentials at PAINWeek 2014 will include these sessions:
• The Brain and Pain
• Myofascial Pain Syndromes
• Understanding and Treating Neuropathic Pain
• Headache: Evaluation, Examination, and Treatment

More information...  Register Now...

"Essential Tools for Treating the Patient in Pain™" Breakfast Satellite CME Event (not part of the AAFP Assembly)

Date: Thursday, October 23, 2014
Time: 6:30 a.m. - 8:00 a.m.
Location: Washington, DC

More information...  Register Now...

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Pain Research in the News

Easing Pain, Getting Back Quality of Life for Cancer Survivors
June 23, 2014 [Source: University of New Mexico Cancer Center]
In a review paper published this month in the "Journal of Clinical Oncology," Esmé Finlay, MD, and her colleagues describe ways to combat pain after cancer treatment. "There are lots of ways to treat post-cancer pain," says Dr. Finlay, who is a University of New Mexico Cancer Center physician. "The intent of this paper is to educate all the different types of providers who are seeing patients after their cancer is cured." Full story...

Pain Pilot Explores Hand Shiatsu Treatment as Sleep Aid
June 18, 2014 [Source: University of Alberta]
Researchers at the University of Alberta are exploring the traditional Japanese massage practice called shiatsu as a potential treatment to help Cheyne and others like her find slumber—and stay asleep. A small pilot study followed nine people living with chronic pain as they self-administered shiatsu pressure techniques on their hands at bedtime. Full story...

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Substance Abuse and Addiction Research
Need to add a Pain Physician to your practice?
Post your ad with AAPM’s Career Center and reach more than the 2,500 members of AAPM. The network reaches beyond 30,000 professionals in healthcare.

Help Wanted:
- Interventional Physiatry Opportunity in Central Indiana
  Kokomo, IN
  Community Howard Regional Health is seeking a BC/BE Interventional Physiatrist.

- Pain Management Office Seeking a Physician
  Stoneham, MA
  Growing Pain Management office in Stoneham, MA is currently seeking a full-time physician to join our team.

More jobs...

Read this month's President's Message

AAPM's State-of-the-Art, Comprehensive Textbook of Pain Medicine Available Now
Editor-in-Chief Timothy R. Deer MD

Read more...

Death by Prescription Painkiller
June 18, 2014 [Source: McGill University]
In a first-of-its-kind review of existing research, the McGill team has put the spotlight on a major public health problem: the dramatic increase in deaths due to prescribed painkillers, which were involved in more than 16,000 deaths in 2010 in the U.S. alone. Full story...

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Practice Management & Coding Updates

Medicare Clarifies Appropriate Use of Modifier 59
Emily Hill, PA, AAPM Coding Consultant
The Centers for Medicare and Medicaid Services (CMS) has released a Medical Learning Network Special Edition Article regarding the appropriate use of modifier 59 (Distinct Procedural Service). The article clarifies the existing policy on the proper use of modifier 59. Read more...

On-Demand Coding Webinars:
Did you know you can view Past Coding Webinars by visiting AAPM’s online store? Some of the past webinars available from AAPM include:

- 2014 Medicare Changes You MUST Know—Update on Coding, Billing, and Policy Changes
- ICD-10 What You Need to Know About Documentation in an ICD-10
- Coding and Documentation in an EMR (Electronic Medical Records)
- AAPM 2013 Coding for Pain Webinar--What's New for 2013
- Coding for Multiple Services on the Same Day
- And more...

Visit www.painmed.org/coding for more information.

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Annual Meeting Post Coverage

Study: Opioid-Induced Constipation May Be Vastly Underreported
June 2014 [Source: Pain Medicine News]
Full story...

OMERACT Analysis Categorizes Fibro Patients by Symptom Groups
June 2014 [Source: Pain Medicine News]
Full story...

Researchers Suggest Ways to Reduce SCS Wait Times
June 2014 [Source: Pain Medicine News]
Full story...

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Government Agency News

White House Summit on the Opioid Epidemic
June 19, 2014 [Source: ONDCP]
Today, Acting Director Michael Botticelli hosted Attorney General Eric Holder, Vermont Governor Peter Shumlin, Director of National Institute on Drug Abuse Dr. Nora Volkow, and two panels of experts to address the national epidemic of opioid abuse. Full story...
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.

Physician Payment Sunshine Act Resources:
• Policy and Medicine Blog's webinar titled: "Physician Payment Sunshine Act: Lessons Learned in Preparation and Implementation."
• AMA's Recommended 4 Steps for Physicians to Support Accurate Data
• AMA Toolkit for Physician Financial Transparency Reports (Sunshine Act)
• The Official CMS Website for Open Payments (Physician Payments Sunshine Act)

Pain Medicine: June, 2014 Highlights:
SPINE SECTION
Lumbar Transforaminal Epidural Steroid Injections: Does Immediate Post-Procedure Pain Response Predict Longer Term Effectiveness?

PAIN & AGING SECTION
Illness Representations of Restricting Back Pain: The Older Person's Perspective

PSYCHOLOGY, PSYCHIATRY & BRAIN NEUROSCIENCE SECTION
Preoccupation in an Early-Romantic Relationship Predicts Experimental Pain Relief

OPIOIDS, SUBSTANCE ABUSE & ADDICTIONS SECTION
The Effect of Cognitive Load and Patient Race on Physicians' Decisions to Prescribe Opioids for Chronic Low Back Pain

State Legislative News
NY: Bill S7125-2013: Provides for the substitution of opioid analgesic drugs incorporating abuse-deterrent technology for opioid analgesic drugs under certain circumstances
Press Release: Senate Passes Bills Recommended By Heroin Task Force
June 9, 2014 [Source: New York State Senate]
- S7125, sponsored by Senator Hannon: helps prevent the abuse and diversion of opioid analgesic drugs by ensuring that opioid analgesic drugs that incorporate abuse-deterrent technologies are dispensed whenever possible. The bills have been sent to the Assembly, with the exception of S3985A, which has received final passage, and will be sent to the Governor for consideration. Full story...
View bill...

Pain News
Study Elucidates Spike in 1997-2009 Opioid Prescribing; Trend May Be Reversing
June 2014 [Source: Pain Medicine News]
Full story...

Get Involved
Interdisciplinary Pain Medicine Shared Interest Group (SIG)
This SIG met for the first time during the recent AAPM Annual Meeting in Phoenix, Arizona. This shared interest group seeks to play an important role in influencing the research and practice of interdisciplinary pain care but will need to first consolidate the plethora of ideas and goals discussed in the meeting into a mission statement and then develop a clear plan for moving forward. Click here for more information on this SIG or email mams@connect2amc.com if you are interested in becoming a member of this SIG.

Website Task Force
If you love technology, a Website Task Force has been created by AAPM's President Sean Mackey that is tasked with evaluating the current website and determining needs for the future as it relates to design, function and service the AAPM members. Interested members should email mams@connect2amc.com.

Industry News
Pacira Pharmaceuticals, Inc. Announces Publication of Pooled Results from IMPROVE Studies Evaluating Health Economic Benefits of EXPAREL
June 26, 2014 [Source: Pacira Pharmaceuticals, Inc.] Full story...
Trevena Announces Positive Phase 1 Results for TRV734 for Acute and Chronic Pain
June 23, 2014 [Source: Trevena, Inc.]

Pain Abstracts in the News

Naloxegol for Opioid-Induced Constipation in Patients with Noncancer Pain
Authors: William D. Chey, M.D., Lynn Webster, M.D., Mark Sostek, M.D., Jaakko Lappalainen, M.D., Ph.D., Peter N. Barker, Ph.D., and Jan Tack, M.D., Ph.D.
Abstract: Background: Opioid-induced constipation is common and debilitating. We investigated the efficacy and safety of naloxegol, an oral, peripherally acting, µ-opioid receptor antagonist, for the treatment of opioid-induced constipation.

Read more...

Pain Education to Prevent Chronic Low Back Pain: a Study Protocol for a Randomised Controlled Trial
June 2, 2014 [Source: BMJ Open]
Abstract: This double-blind (participant/outcome assessor) randomised controlled trial will investigate the efficacy of a brief educational approach to prevent chronic LBP in ‘at-risk’ individuals.

Read more...

PubMed Pain Abstracts

The following abstracts are posted at PubMed.gov:

Pain Medicine: the Case for an Independent Medical Specialty and Training Programs
Dubois MY1, Follett KA.
Abstract: Over the last 30 years, pain has become one of the most dynamic areas of medicine and a public health issue. According to a recent Institute of Medicine report, pain affects approximately 100 million Americans at an estimated annual economic cost of $560 to $635 billion and is poorly treated overall. The American Board of Medical Specialties (ABMS) recognizes a pain subspecialty, but pain care delivery has struggled with increasing demand and developed in an inconsistent and uncoordinated fashion. Pain education is insufficient and highly variable. Multiple pain professional organizations have led to fragmentation of the field and lack of interdisciplinary agreement, resulting in confusion regarding who speaks for pain medicine. In this Perspective, the authors argue that ABMS recognition of pain medicine as an independent medical specialty would provide much needed structure and oversight for the field and would generate credibility for the specialty and its providers among medical peers, payers, regulatory and legislative agencies, and the public at large. The existing system, managed by three ABMS boards, largely excludes other specialties that contribute to pain care, fails to provide leadership from a single professional organization, provides suboptimal training exposure to pain medicine, and lengthens training, which results in inefficient use of time and educational resources.

The creation of a primary ABMS conjoint board in pain medicine with its own residency programs and departments would provide better coordinated...
training, ensure the highest degree of competence of pain medicine specialists, and improve the quality of pain care and patient safety. PMID: 24871236 [PubMed - in process]

Preoperative Opioid Use as a Predictor of Adverse Postoperative Self-Reported Outcomes in Patients Undergoing Spine Surgery

Lee D1, Armaghani S1, Archer KR1, Bible J1, Shau D1, Kay H1, Zhang C1, McGirt MJ2, Devin C1.

Abstract: BACKGROUND: Opioids are commonly used for preoperative pain management in patients undergoing spine surgery. The objective of this investigation was to assess whether preoperative opioid use predicts worse self-reported outcomes in patients undergoing spine surgery.

CONCLUSIONS: Increased preoperative opioid consumption, Modified Somatic Perception Questionnaire score, and Zung Depression Scale score prior to undergoing spine surgery predicted worse patient-reported outcomes. This suggests the potential benefit of psychological and opioid screening with a multidisciplinary approach that includes weaning of opioid use in the preoperative period and close opioid monitoring postoperatively.

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Report of the NIH Task Force on Research Standards for Chronic Low Back Pain


Abstract: Despite rapidly increasing intervention, functional disability due to chronic low back pain (cLBP) has increased in recent decades. We often cannot identify mechanisms to explain the major negative impact cLBP has on patients’ lives. Such cLBP is often termed non-specific and may be due to multiple biologic and behavioral etiologies.

Biased Agonism of the Mu Opioid Receptor by TRV130 Increases Analgesia and Reduces On-Target Adverse Effects versus Morphine: a Randomized, Double-Blind Placebo-Controlled Crossover Study in Healthy Volunteers


Soergel DG1, Subach RA2, Burnham N3, Lark MW2, James IE2, Sadler BM4, Skobieranda F2, Violin JD2, Webster LR5.

Abstract: Opioids provide powerful analgesia but also efficacy-limiting adverse effects, including severe nausea, vomiting, and respiratory depression, by activating mu-opioid receptors. Preclinical models suggest that differential activation of signaling pathways downstream of these receptors dissociates analgesia from adverse effects; however, this has not yet translated to a treatment with an improved therapeutic index. Copyright © 2014. Published by Elsevier B.V.

PMID: 24954166 [PubMed - as supplied by publisher]

Molecular Hydrogen Attenuates Neuropathic Pain in Mice


Kawaguchi M, Satoh Y, Otsubo Y, Kazama T.

Abstract: Neuropathic pain remains intractable and the development of new therapeutic strategies are urgently required. Accumulating evidence indicates that overproduction of oxidative stress is a key event in the pathogenesis of neuropathic pain. However, repeated intra-peritoneal or intrathecal injections of antioxidants are unsuitable for continuous use in therapy. Here we show a novel therapeutic method against neuropathic pain: drinking water containing molecular hydrogen (H2) as antioxidant.
Whole-Body Mapping of Spatial Acuity for Pain and Touch

Mancini F1, Bauleo A, Cole J, Lui F, Porro CA, Haggard P, Iannetti GD.

Abstract: OBJECTIVE: Tactile spatial acuity is routinely tested in neurology to assess the state of the dorsal column system. In contrast, spatial acuity for pain is not assessed, having never been systematically characterized. More than a century after the initial description of tactile acuity across the body, we provide the first systematic whole-body mapping of spatial acuity for pain.

RESULTS AND INTERPRETATION: These two approaches produced convergent results. The fingertip was the area of highest spatial acuity, for both pain and touch. On the glabrous skin of the hand, the gradient of spatial acuity for pain followed that observed for touch. On the hairy skin of the upper limb, spatial acuity for pain and touch followed opposite proximal-distal gradients, consistent with the known innervation density of this body territory. Finally, by testing spatial acuity for pain in a rare participant completely lacking Aβ fibers, we demonstrate that spatial acuity for pain does not rely on a functioning system of tactile primary afferents. Ann Neurol 2014;00:000-000. © 2014 American Neurological Association.

PMID: 24816757 [PubMed - as supplied by publisher]
A Study of LY2951742 in Participants With Migraine Headache

This study is not yet open for participant recruitment. (see Contacts and Locations)
Verified June 2014 by Eli Lilly and Company
Sponsor: Eli Lilly and Company
Information provided by (Responsible Party): Eli Lilly and Company
ClinicalTrials.gov Identifier: NCT02163993
First received: June 12, 2014

Stated Purpose: The main purpose of this study is to evaluate whether the study drug known as LY2951742 is safe and effective in the prevention of migraine headaches. The study will last between 28 and 36 weeks.

Read more...

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