AAPM Annual Meeting

33rd Annual Meeting Registration and Housing Now Available
March 15-19, 2017
Loews Sapphire Falls Resort at Universal Orlando™

Plan to attend the most interprofessional, multispecialty pain medicine meeting of the year. View highlights of the 33rd Annual Meeting and the opportunity to earn more than 40 CME credits. View the full educational program.

Premier preconference and stand-alone programs, include:

- WAPMU Ultrasound/Cadaver Program
- SAFE Opioid Prescribing program
- Essential Tools for Treating the Patient in Pain™
- Opioid and Non-Opioid Medications Management
- Advanced Clinical Skills for Low Back Pain: A Hands-On Workshop

Register and claim your member discount today. Meeting attendees also receive discounted rates at the host resort, the Loews Sapphire Falls. Book
Learn more about the AAPM 33rd Annual Meeting and Preconferences at www.painmed.org/annualmeeting. Connect with AAPM on social media using #PainMed2017. Contact AAPM with questions about the Annual Meeting by calling 847.375.4731 or email info@painmed.org.

Coming Soon:

November 29, 2016 is “Giving Tuesday.” This year AAPM will encourage its members to help fund scholarships for current Pain Medicine Fellows to attend the 33rd Annual Meeting. Watch for more details in the coming week on how you can get involved and support the field of Pain Medicine.

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AAPM Ethics Charter
Includes statement on conflicts of interest.

Opioid-Induced Constipation Resources
EDUCATION PROGRAMS
CONSSENSUS RECOMMENDATIONS

Now Available
Treatment of Chronic Pain by Medical, Interventional, and Integrative Approaches.
For more information...

AAPM Education

AAPM is proud to collaborate with the Association of Reproductive Health Professionals (ARHP) on this webinar series:

- Rheumatoid Arthritis: Reproductive Health Considerations
  Wednesday, November 30, 2016 at 1:00pm ET
  Presented by Megan Clowse, MD, MPH and Mary F. Hébert, Pharm.D., FCCP
  For more information and to register...

Physicians: The Association of Reproductive Health Professionals is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. ARHP designates these activities for a maximum of 1.0 AMA PRA Category 1 Credit(s)™ each. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Nurse Practitioners and Nurses: ARHP is approved by the California Board of Registered
Help Wanted:
Chair- Physical Medicine and Rehabilitation
Mayo Clinic
Jacksonville, FL
Unique opportunity to provide strategic leadership.

Physical Medicine and Rehabilitation Physician
Community Health Network
Community Physician Network
Indiana
The ideal candidate will evaluate and treat non-surgical spine conditions.

Interventionist and Inpatient Physiatry Positions
Northeast Orthopedics and Sports Medicine
New York
Seeking 2 physiatrists to join our rapidly growing multispecialty practice.

Neurology Physician Jobs in Richland, WA
Kadlec Neuroscience Center
Richland, WA
Seeking a BE/BC Neurologist to join our exceptional team

Neurology Physician Jobs in Indiana

More jobs...

Read the current President's Message
AAPM E-news is supported by an unrestricted grant from Purdue Pharma L.P. Content is completely and independently selected and edited by AAPM.

Updates
Need Facts on Pain?
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.

Affiliate Membership
Are the members of your pain team AAPM members?
Affiliate membership information...

State Legislative News
The American Board of Pain Nursing, Provider Number 16643, to provide nursing continuing education credits. These activities are approved for 1.0 contact hour each.

- **Pain Management for Women with Rheumatoid and Other Arthritic Conditions**
  Tuesday, December 6, 2016 at 5:00pm ET
  Presented by Ellen W.K. Rosenquist, MD
  For more information and to register...

  **Accreditation:** The American Academy of Pain Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. The American Academy of Pain Medicine designates this live activity for a maximum of 1 AMA PRA Category 1 Credit(s)™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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Pain Research in the News

- **Scientists Successfully Tune the Brain to Alleviate Pain**
  November 3, 2016 [Source: University of Manchester, U.K.]
  Scientists at the University of Manchester have shown for the first time that if the brain is 'tuned-in' to a particular frequency, pain can be alleviated.
  Full story...

- **Motivation to Move: Study Finds Mild Exercise Helps Decrease Pain and Improve Activity Level in Older Adults**
  November 1, 2016 [Source: Hospital for Special Surgery (HSS)]
  It's never too late to reap the benefits of exercise, and that includes older adults with arthritis and other muscle and joint conditions, according to a study. Researchers at Hospital for Special Surgery (HSS) found that a low-impact exercise program in senior centers in New York City's Chinatown and Flushing, Queens communities helped decrease pain, improve mobility and enhance quality of life for many participants.
  Full story...

Pain Treatments & Trials in the News

- **Pain Experts Say Older Opioid Analgesic Levorphanol Provides Multiple Benefits**
  November 4, 2016 [Source: Pain Medicine News]
  As a single agent, the largely forgotten opioid analgesic levorphanol has several beneficial mechanisms for treating pain, according to a literature review of the drug dating back to the late 1940s.
  Full story...

- **Study: Hydrocodone Rescheduling Affects Prescribing**
  November 1, 2016 [Source: Pain Medicine News]
  Prescriptions for hydrocodone fixed-dose combination products have plummeted since the opioid was rescheduled from Schedule III to the much more restrictive Schedule II, according to new study results.
  Full story...

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Philipp M. Lippe, MD Receives Prestigious Lifetime Award from California Medical Association

The California Medical Association (CMA) presented AAPM Past President Philipp M. Lippe, MD (1988) a Lifetime Achievement Award for his many years of selfless dedication to Medicine, Neurosurgery, Pain Medicine, Industrial Medicine, the Specialty Delegation and the California Medical Association. Dr. Lippe received the award at the Annual CMA House of Delegates Meeting in Sacramento, California last month. Congratulations Dr. Lippe!

PA: Governor Wolf Signs Bills to Battle Heroin and Opioid Crisis

November 2, 2016 [Source: Governor Tom Wolf, PA]

Today, Governor Wolf signed legislation to battle Pennsylvania’s heroin and opioid epidemic. This legislation will strengthen the Prescription Drug Monitoring Program, restrict the number of pills that can be prescribed to minors or in emergency rooms, establish education curriculum on safe prescribing, and create more locations for the drop-off of prescription drugs.

Full story...

AAPM Members Honors and Distinctions

Philipp M. Lippe, MD Receives Prestigious Lifetime Award from California Medical Association

AAPM Members in the News

Legislation to Combat Pennsylvania's Opioid Epidemic

AAPP Board of Director, Ajay D. Wasan MD, comments on Pennsylvania legislation in two local papers that addressed legislation that were currently on Governor Tom Wolf’s desk, which he subsequently signed.

Legislature OKs Opioid Restrictions

October 27, 2016 [Source: Pittsburgh Post-Gazette]

Doctors Cheer Legislation to Stem Opioid Addiction

October 28, 2016 [Source: TribLive]

Pain News

Myth Busted: ED Docs Not a Prime Source of Opioid Prescriptions

October 27, 2016 [Source: Medscape]

Full story (login required)...

Physicians Key to Cutting Stigma of Opioid Addiction

October 26, 2016 [Source: AMA Wire]

Patients who struggle with a substance use disorder deserve stigma-free access to care similar to that available for other patients with chronic disease. This was the message conveyed by Patrice A. Harris, MD, chair of the AMA Board of Trustees, last week at an interdisciplinary symposium on opioids at Northwestern University’s Pritzker School of Law.

Full story...
Grant Opportunities

Multi Agency Funding Announcement to Assist with Opioid Crisis in Rural U.S. Regions
October 7, 2016 [Source: NIDA]
Funding Opportunity: HIV, HCV and Related Comorbidities in Rural Communities Affected by Opioid Injection Drug Epidemics in the United States: Building Systems for Prevention, Treatment and Control (UG3/UH3)
Open Date (Earliest Submission Date): December 10, 2016
Letter of Intent Due Date(s): 30 days prior to the application due date
Application Due Date(s): January 10, 2017
For more information...

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Pain Abstracts in the News

As Opioid Epidemic Rages, Complementary Health Approaches to Pain Gain Traction
November 2, 2016 [Source: JAMA Medical News & Perspectives]
A recent review of clinical evidence published in Mayo Clinic Proceedings by National Institutes of Health (NIH) researchers suggests that complementary health techniques have a legitimate place in a physician’s pain relief toolkit—welcome news as health care professionals and agencies grapple with the crisis of opioid abuse.
Read more...

Induced Sensorimotor Brain Plasticity Controls Pain in Phantom Limb Patients
October 27, 2016 [Source: Nature Communications]
Abstract: The cause of pain in a phantom limb after partial or complete deafferentation is an important problem. A popular but increasingly controversial theory is that it results from maladaptive reorganization of the sensorimotor cortex, suggesting that experimental induction of further reorganization should affect the pain, especially if it results in functional restoration. Here we use a brain–machine interface (BMI) based on real-time magnetoencephalography signals to reconstruct affected hand movements with a robotic hand. BMI training induces significant plasticity in the sensorimotor cortex, manifested as improved discriminability of movement information and enhanced prosthetic control.
Read more...

Brain Connectivity Predicts Placebo Response across Chronic Pain Clinical Trials
October 27, 2016 [Source: PLoS Biology]
Abstract: Placebo response in the clinical trial setting is poorly understood and alleged to be driven by statistical confounds, and its biological underpinnings are questioned. Here we identified and validated that clinical placebo response is predictable from resting-state functional magnetic-resonance-imaging (fMRI) brain connectivity. This also led to discovering a brain region predicting active drug response and demonstrating the adverse effect of active drug interfering with placebo analgesia. Chronic knee osteoarthritis (OA) pain patients (n = 56) underwent pretreatment brain scans in two clinical trials.
Read more...

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PubMed Pain Abstracts
The following abstracts are posted at PubMed.gov:

**Comparison of 10-kHz High-Frequency and Traditional Low-Frequency Spinal Cord Stimulation for the Treatment of Chronic Back and Leg Pain: 24-Month Results From a Multicenter, Randomized, Controlled Pivotal Trial**


Abstract: **BACKGROUND:** Pain relief with spinal cord stimulation (SCS) has focused historically on paresthesias overlapping chronically painful areas. A higher level of evidence supports the use of SCS in treating leg pain than supports back pain, as it is difficult to achieve adequate paresthesia coverage, and then pain relief, in the low back region. In comparison, 10-kHz high-frequency (HF10 therapy) SCS therapy does not rely on intraoperative paresthesia mapping and remains paresthesia-free during therapy.

**CONCLUSION:** This study demonstrates long-term superiority of HF10 therapy compared with traditional SCS in treating both back and leg pain. The advantages of HF10 therapy are anticipated to impact the management of chronic pain patients substantially.

PMID: 27584814

**Targeting CYP2J to Reduce Paclitaxel-Induced Peripheral Neuropathic Pain**


Abstract: Chemotherapy-induced peripheral neuropathic pain (CIPNP) is a severe dose- and therapy-limiting side effect of widely used cytostatics that is particularly difficult to treat. Here, we report increased expression of the cytochrome-P450-epoxygenase CYP2J6 and increased concentrations of its linoleic acid metabolite 9,10-EpOME (9,10-epoxy-12Z-octadecenoic acid) in dorsal root ganglia (DRGs) of paclitaxel-treated mice as a model of CIPNP. The lipid sensitizes TRPV1 ion channels in primary sensory neurons and causes increased frequency of spontaneous excitatory postsynaptic currents in spinal cord nociceptive neurons, increased CGRP release from sciatic nerves and DRGs, and a reduction in mechanical and thermal pain hypersensitivity.

PMID: 27791151
DOI: 10.1073/pnas.1613246113 [PubMed - in process]

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**NIH Clinical Studies & Trials**

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

**Effects of tDCS and TUS on the Perception of Pain and Functional Limitations Due to Non-Specific Chronic Low Back Pain**

*This study is not yet open for participant recruitment. First received: November 2, 2016*

Sponsor: Spaulding Rehabilitation Hospital
Collaborator: Highland Instruments, Inc.
Information provided by (Responsible Party): Felipe Fregni, Spaulding Rehabilitation Hospital
Principal Investigator: Felipe Fregni, MD PhD MPH, Spaulding Rehabilitation Network
ClinicalTrials.gov Identifier: NCT02954432

**Stated Purpose:** The purpose of this study is to assess the effects of tDCS in combination with TUS for the treatment of pain and functional limitations in subjects with NSCLBP. The investigators hypothesize that there will be a decrease in pain levels with active stimulation, when compared to sham stimulation.