



Letter from the President

I have been exceedingly fortunate to have the support and assistance of a marvelous collection of individuals who serve on the Executive of the Canadian Pain Society. They represent a wide range of professional fields and span this country geographically. Still, I would like to see us include more of our members in the governance of this Society and invite you to notify us of your interest in serving on the Executive or on future Committees or Task Forces.

We are at a critical juncture in the growth of this organization. I anticipate that we will have well over one thousand members after the forthcoming meeting with our American Pain Society colleagues in Vancouver in May. How much larger can we grow? How can we reach out to new members with regard to both recruitment and the provision of services? Please let us know your ideas about this as we work to extend our membership.

Please let us know, as well, what we can do for you. We are planning to provide more support to both clinicians and basic scientists as well as to seek ways to increase scholarly and professional contacts between them. Your ideas about what we are doing

well and what can be improved will be received with great interest.

You will have received the excellent brochure for the joint CPS-APS meeting and noted our special rates for registration. This will be an outstanding conference and I want to thank Barry Sessle and his colleagues on the Scientific Program Committee and Deborah Kerr and her colleagues on the Local Arrangements Committee, as well as their American counterparts, for performing so superbly.

I also want to thank Helen Hayes, who is stepping down from her membership on the Executive as chair of the Nominating Committee, for many years of dedicated service to CPS.

We have already begun to make plans for the 2005 annual meeting and have selected Halifax as its venue. Anita Unruh and Mary Lynch have graciously consented to head the Scientific Programming Committee and Local Arrangements Committee, respectively, and it is not too soon for you to start suggesting topics and speakers of interest to you.

You will note, elsewhere in this Newsletter and on our website, information about the Vancouver meeting, our Get A Member Campaign, travel support for trainees, and other initiatives of CPS. We are doing exceptionally well; we can still do better. Please share your talents and your ideas with us.

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2003-2004**

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The CPS Newsletter is published four times per year by the Canadian Pain Society. Comments and suggestions are welcome. **The deadline for submission for the next Newsletter is April 15, 2004.** Please send correspondence to:

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Editor's Message

The first issue of the newsletter for 2004 has a pediatric focus. Drs. Patrick McGrath and Carl Von Baeyer pay a special tribute to Dr. Kenneth Craig for his outstanding contributions in the area of pediatric pain. This issue also profiles the Pediatric Chronic Pain Program at Montreal Children's Hospital. In addition, three pain-related Strategic Training Initiatives in Health Research (STIHR) funded by CIHR and its partners are highlighted.

The CPS executive has recently developed guidelines for advertisements in the Newsletter and on the Website. For those of you looking for employment opportunities, please check out the job postings on pages seven and eight of this issue. These advertisement guidelines are now posted on the website. Please contact Jenn Ronald if you are interested in placing an advertisement in the newsletter and/or website. CPS members will receive a 20% discount.

I want to thank those of you who emailed or called me to tell me how much you liked the changes to the newsletter. I'm delighted that the newsletter is actually being read and not just used to stoke the fires on these cold winter nights. Please keep sending your suggestions for ways this newsletter can better meet your needs. Contact myself or Steve if you have an idea for an upcoming issue of the newsletter.

Jennifer Stinson

A Tribute to Ken Craig

This tribute was written by Drs. Patrick J. McGrath and Carl L. von Baeyer.

Kenneth Denton Craig is Professor Emeritus of Psychology at the University of British Columbia and a Senior Investigator of the Canadian Institutes of Health Research. Capping many years of service to the Executive of the Canadian Pain Society, he served as its President from 1994 to 1997. He is presently a member of the Council of the International Association for the Study of Pain.

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A Tribute to Ken Craig—Continued

Craig's lifetime of work has revolutionized the role of social sciences in the study of pain. His work on the social psychology of pain was published starting in 1971 and was the seminal work in this area. His laboratory studies, which used experimental pain stimuli in a social learning paradigm, are recognized as the foundation of our understanding of how the social environment influences the perception of pain and the physiological and behavioral response to pain. Following this highly controlled laboratory research, he developed more ethologically valid but still well controlled research with parents and infants.



Craig and his associates developed an innovative model of pain entitled the Communications Model that has effectively challenged the dominant reductionistic, biological thinking of pain researchers. By demanding that the environment, particularly the social environment provided by caregivers, be included in the model of pain, he has transformed our understanding of pain. Research based on the Communications Model has moved social phenomena from the periphery to play a central role in understanding of pain.

The work of Craig and his students has revolu-

tionized our understanding of pain in the neonate. The Neonatal Facial Action Coding System developed in his lab forms the basis of most current measures of neonatal pain. This methodology is used around the world to examine the design of nursing care systems for sick neonates, to study the toxicology of maternal medication, to monitor the impact of variations in procedures and handling in Neonatal Intensive Care Units, and to evaluate novel interventions to prevent pain in these most vulnerable infants. Based on this work with neonates, Craig wrote an editorial (with Anand) in *Pain*, 1996, calling for a new definition of pain. This led to a revision in the IASP definition, leading to greater comprehension of pain in infants and other people who are unable to express their pain verbally.

Craig's insistence on obtaining data and developing theory has shown that pain is more than a biological phenomenon, but a social event that is communicated in a context. This redefinition of pain as a process that must be studied in its social context and with social science tools is the most important of Craig's many contributions.

Craig has provided an important mentoring role for his own numerous and very successful students, as well as an important source of encouragement for young researchers throughout the world. He is known for his warmth, his willingness to share ideas and his ability to encourage excellence. His support for junior colleagues is particularly appreciated by students and younger faculty who interact with him. Craig happily acknowledges that many of the ideas to come from the lab have represented the inspiration and hard work of these colleagues.

Craig grew up in Alberta. He received his PhD in clinical psychology from Purdue University in 1964, following a fellowship in medical psychology at the University of Oregon Medical School. He has been on the faculty of the University of British Columbia since 1963.

He has made major contributions to psychology as a profession. He is a Past-President of the Canadian
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adian Psychological Association and is the only person to have won all three of that association's Awards for Distinguished Contributions (for scientific, professional, and teaching contributions). He has been awarded the Lawson Prize by the American Pain Society for his advocacy for children with pain, the CIHR Senior Investigator Award for his research, and the UBC Peter Wall Distinguished Scholar Award for his scholarly accomplishments.

Craig's contributions continue both through his own vigorous research program and the work of his former students. He is also taking the lead in planning the 2006 International Symposium on Pediatric Pain. For further information on Craig's work, including his numerous publications, see <http://www.psych.ubc.ca/~kenslab/painlab/kcraig.htm>.

Trainees' Corner

May is fast approaching and we are looking toward the APS/CPS joint scientific meeting in Vancouver. Currently, I am working with the local arrangements committee and other contacts to plan a trainee social event. We originally planned to give trainees the opportunity to meet during the opening reception. We are trying to plan additional social opportunities; I will inform you of these events once they are confirmed. Please try to attend the social events in order to meet new trainees from both the United States and Canada.

The May meeting will be my last as the trainee representative for the CPS. Many of you may want to consider whether or not you would like to fill this position. As a non-voting member of the executive, the main goals of the trainee representative are to increase the visibility of trainee issues and accomplishments through raising concerns and issues with the executive, and through utilising this regular column in the CPS newsletter. This is a two-year position that requires attendance at two meetings a year, plus participating in e-mail discussions between meetings. One of the meetings occurs during late fall or early winter and the other

occurs during the CPS annual scientific meeting. Travel expenses to both meetings are covered by CPS. CPS recognizes the value of trainee membership and in the past two years has welcomed my input. The local arrangements committee has worked with me to plan social events and the CPS executive continues to advocate for increased funds to assist trainees with both advancing their studies and to attend the annual scientific meetings. Participating in the executive of the CPS has been an invaluable and enjoyable experience, which I will certainly miss. Although I will no longer be on the executive I will continue to be active in the society throughout my future career as a pain researcher. I would like to thank CPS for the opportunities afforded me over the last two years and wish the new trainee representative the best of luck.

*Shannon Fuchs-Lacelle, M. A.
University of Regina
CPS Trainee Representative*

Profile: Chronic Pain Management at Montreal Children's Hospital

This profile was written by Dr. Joëlle Desparmet, and Christina Rosmus. Dr. Desparmet is the Director of the Chronic Pain Management Centre and Associate Professor at McGill University. Ms Rosmus is the Clinical Nurse Specialist in the Chronic Pain Management Centre.

The Montreal Children's Hospital Chronic Pain Management Centre opened officially in 1997 thanks to a financial grant from the Hospital Foundation and the commitment from the hospital administration to make pain management a priority. Under the directorship of Joëlle Desparmet, member of the Department of Anesthesia, a multidisciplinary core team consisting of a physiotherapist, a psychologist and a clinical nurse specialist was formed. Two members of the initial team have moved on to seek new personal or professional challenges. Presently, the core team comprises Dr Desparmet, MD, Ms. Rita Joyal, Physio-

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therapist, Dr. Yves Beaulieu, Psychologist and Christina Rosmus, Clinical Nurse Specialist. Team members are connected to McGill University and collaborate closely with Pain Centres at the other McGill hospitals.



Since 1997, 220 children have been treated at the Centre for conditions such as complex regional pain syndromes, headaches, recurrent abdominal, chest and back pain, neurofibromatosis, musculoskeletal pain, secondary to disease, injury, sports, or unrelated to an obvious cause, rheumatology or hematology-related pain, and neuropathic pain of various origin to name a few.

Referrals are received from most medical and surgical specialists at the hospital and a few patients come from other provinces or out of country. Six to eight new patients are referred to us each month and our present census has increased by 33% in this last year alone. This is most certainly due to increased awareness of the existence of and therapies available for chronic pain in children, and increased exposure of the work done in our centre both by word of mouth in the medical and general community and through the media. Increased media attention to the problem of pain has helped families better advocate for treatment of their children's pain and we are getting more and more referrals from physicians outside our hospital at the insistence of

the patients themselves.

The benefits of a multidisciplinary approach to the treatment of chronic pain in children has been widely described but it is the improved outcomes for children and families that has contributed to the better endorsement of this approach by referring physicians.

Members of the team have a part-time assignment to the clinic. Anesthesia and Pediatrics Residents and Fellows, students in physiotherapy and nursing, and psychology interns are among those who join the team on a regular basis for various periods of time according to their program requirements.

The team meets officially one day a week with many informal interactions in between. The morning is used to evaluate new referrals for future scheduling, update activities and progress of all patients being seen by the different clinicians or contacted by telephone during the past week. The team discusses the issues at hand and makes suggestions to modify the therapeutic plan accordingly. The patients who will be seen in clinic in the afternoon are also discussed at that time. Large multidisciplinary meetings with consultants and other clinicians involved in the care of the more challenging patients are sometimes necessary and have always proven to be beneficial.

A first visit to the clinic is scheduled for two hours, a follow-up visit for 30-60 minutes. We use the Simultaneous Interview Technique in which all members of the team are present for the interview and each can intervene at any time. Students and observers are introduced to the family and with the family's consent follow the interview through a two-way mirror in an adjacent room. For the medical examination, only the physician and physiotherapist are present. Once the patient has been interviewed and examined, the team convenes to discuss the case and reach a consensus on an initial diagnosis and therapeutic interventions. The team then returns to the family to report findings, give explanations, propose a treatment plan and give appointments for the different interventions.

The multidisciplinary team uses a multi-modal approach to the treatment of chronic pain. The *Continued on page 6*

goal is to decrease the pain by pharmacological and non-pharmacological modalities, normalize physical function, help the child regain control over the pain by psychological interventions, return the child to school in cases of absenteeism and improve social and family life. The goal is one of overall rehabilitation rather than pain treatment per se, although the former usually achieves the latter.

The therapeutic modalities vary from child to child but are implemented with each member of the team reinforcing the work of the other team members. Medications, blocks, physiotherapy, methods of relaxation, coping, behaviour modification as well as family intervention are included in the therapeutic plan to varying degrees and are part of the collaborative work of the child, the family, and the team. The plan is modified as needed depending on the progress made by the child and the family. The family's needs for information, education, resources, are addressed on an on-going basis. Families learn how to help and understand their child, and how to offer support that facilitates the return to normal activities and family life. During this process, consultants from different medical specialties, social services and the child's school are involved as needed.

The management of chronic pain in children is still in its infancy and large collaborative studies among the centers involved are needed to better understand its numerous aspects and to improve outcomes.

CIHR STRATEGIC TRAINING PROGRAMS IN PAIN RESEARCH

In 2001, CIHR held its first Strategic Training Initiative in Health Research (STIHR) grant competition. There are currently 86 strategic training programs funded by CIHR and its partners. These training programs consist of a group of outstanding mentors and educators accomplished in health research who work collaboratively to offer research training programs of a defined format and content to a group of trainees. Potential trainees apply directly to the Strategic Training Programs for pro-

gram admission and stipend support. There are three training programs with a focus on pain: Pain in Child Health; Cell Signalling in Mucosal Inflammation & Pain and Pain Molecules to Community.

Pain in Child Health

Pain in Child Health (PICH) is an innovative, trans-disciplinary, cross-Canada, Research Training Consortium. Five leading research centres in the area of pediatric pain have joined to provide a training consortium to strengthen the preparation of trainees to become independent investigators and researchers. The program's most important function is to develop a community of scholars in pediatric pain.

The consortium offers a summer/fall institute, national lab meetings by means of web distance tools, visits to other labs, international speakers series, web based courses on pain. Membership in the consortium is open to Canadian trainees with a commitment to research on pain in child health in any discipline and at any level in their training and is by application. Membership makes trainees eligible for (but does not guarantee) financial assistance. For more information please contact Barb Brown, Program Manager (barb.brown@dal.ca)

Cell Signaling in Mucosal inflammation and Pain

Cell Signaling in Mucosal Inflammation & Pain ('Cellsignals') is primarily a doctoral training program that provides stipends and network travel for graduate students and some postdoctoral fellows who fit our strategic goals. There are five Canadian hubs (Dalhousie, Ottawa, Toronto, McMaster, UBC) that have strengths ranging from molecular cell signaling to clinical investigation, to population studies and health services. The network emphasizes transdisciplinary exposure with outstanding mentors poised at the interface of medicine, dentistry, and biomedical engineering. There are 6

Canada Research Chairs among the 17 principal mentors. The network includes seven international
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partnering institutions in Sweden, Denmark, the Netherlands, Israel, and U.S.A. These partners may host 'Cellsignals' trainees for extended or short study visits; trainees from our partners may also be supported by 'Cellsignals' for extended study periods at one of our Canadian hubs. The main goal is to educate a new generation of research investigators who will be able to apply transdisciplinary collaboration to develop novel approaches to alleviate inflammatory disorders and especially the pain arising from inflammation, which are extremely common and disabling conditions among our population. Cellsignaling is the ultimate in biological communication, and the 'Cellsignals' training program emphasizes 'minds-on, hands-on' experience in the use of diverse media to translate and communicate the trainees' research to the professions, public, and health advocacy groups. Please browse our website www.cellsignals.ca for a comprehensive view of the 'Cellsignals' mission, scope, application procedures, news, and announcements. For more information contact Dr. Richard P. Ellen at email richard.ellen@utoronto.ca or telephone 416-979-4917, ext. 4456.

Pain: Molecules to Community (PainM2C)

The aim of this strategic training program is to realize the inherently transdisciplinary nature of the challenges posed by pain through the creation of an environment that fosters in trainees a vision from the most basic molecular level to the most applied form of population-based research. By doing so, the program strives to provide the "proof in principle" for how pain researchers in the 21st century should be trained both in Canada and around the world. The training program offers the following: advanced pain research methodologies school, pain awareness program, trainee exchange, national and international distinguished speaker exchange program, and research on web-enabled and new media knowledge transfer specifically on pain. For more information about this program please contact Dr. Michael Salter, Program Director (mike.salter@utoronto.ca) or Sid Parkinson, Program Manager (sid@painnet.ca).

Job Postings

Clinical Psychologist, Pain

Winnipeg, Manitoba, Canada

Description: The Clinical Health Psychology Program of the Winnipeg Regional Health Authority, and the Department of Clinical Health Psychology in the Faculty of Medicine, University of Manitoba invite applications for a Contingent Geographic Full-Time Psychologist, in the area of Pain Management, at the Assistant or Associate Professor level, commencing September 1, 2004, or as soon as possible thereafter. The position involves development and provision of clinical services in the new Comprehensive Pain Clinic, based at the Health Sciences Centre; supervision of psychology interns in our APA and CPA accredited training program and teaching of medical students; and development of an active program of clinical research. For more details, please see full ad at www.umanitoba.ca/medicine/clinical_health_psych.

Contact: Interested persons should *apply in writing*, including *curriculum vitae*, and arrange for three individuals who are familiar with their clinical and academic work to provide *written references* to:

Dr. J. Arnett, Professor and Head,
Department of Clinical Health Psychology,
PZ 350 - 771 Bannatyne Avenue,
Winnipeg, Manitoba, Canada R3E 3N4
Tel: (204) 787-7424
Fax: (204) 787-3755
email: jarnett@hsc.mb.ca

DEADLINE FOR APPLICATIONS IS
FEBRUARY 27, 2004

Post-Doctoral Fellowship in Pain

Toronto, Ontario, Canada

Description: The Chronic Pain Program at The Hospital for Sick Children, University of Toronto, seeks qualified applicants for post-doctoral training in the management of chronic pain problems in children and adolescents. Opportunities also exist for fellowships in the research program for fellows interested in the study of pain perception and modulation in children, adolescents, and adults.

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Job Postings—Continued

Fellowships commence July 1, 2004 or January 1, 2005. Fellows will join an interdisciplinary team, actively involved in clinical care and research. Although the primary emphasis is on children with chronic pain, training opportunities in psycho-physical and imaging studies are also available. The Fellowship has a stipend commensurate with experience. PhD in clinical psychology and interest in the chronic pain problems of children and adolescents is required.

Contact: To apply, send a brief application describing your experience and research goals, CV, and three letters of reference to:

Dr. Patricia A. McGrath,
Chronic Pain Program, Dept of Anesthesia,
Hospital for Sick Children, 555 University Avenue,
Toronto, Ontario, M5G 1X8, Canada
email: patricia.mcgrath@sickkids.ca

CPS Awards — Call for Nominations

(a) **The Distinguished Career Award.** This award was designed to honour longstanding service in pain research and/or management.

(b) **Early Career Award.** Candidates must be within 8 years of completion of a doctoral degree or post- fellowship qualification.

Nominations should come from the membership. A letter of nomination signed by three CPS Regular members, along with the CV of the nominee should be submitted to the Secretariat. Decisions are made by a committee of the three most recent past-presidents (currently Kenneth Craig, John Clark, Celeste Johnston).

Please send nominations by March 15 to the CPS Secretariat at::

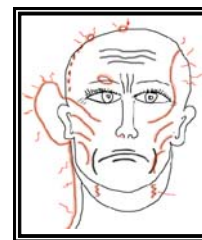
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Attn: Coordinator, Jenn Ronald
268 Grosvenor Street London, ON N6A 4L6
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Travel Grants for Vancouver Meeting

In our continued effort to support trainees in the CPS, we have created a fund to help offset the cost of travel to the annual meeting. \$10,0000 (5 awards at \$1,000 and 10 at \$500) is available to trainees who are presenting (oral or poster presentations). Trainees should apply by contacting Jenn Ronald, at the CPS office. Deadline for applications is March 15th.

Upcoming Meetings

Nerve Damage and Neuropathic Trigeminal Pain. A Symposium of the Orofacial Pain Special Interest Group of the International Association of the Study of Pain (IASP)



May 4 & 5, 2004
Vancouver, BC, Canada
UBC, Robson Square

For more information see the website:

www.fdc-umontreal.ca/SIG, OR Email: francine.belanger@umontreal.ca, OR contact: Christiane Manzini /SIG Orofacial Pain Universite de Montreal; Faculte de medecine dentaire , C.P. 6128, Succ.Centre-ville, Montreal, H3C 3J7, CANADA



Annual Meeting of the Canadian Pain Society
Vancouver, BC
May 6 – 9, 2004