



President's Message

In this issue of the Newsletter, I would like to highlight some of the activities and decisions made at the CPS Annual Conference in Victoria, BC, in late May. Un résumé en langue française est disponible ci-dessous pour mes collègues francophones.

The Annual Conference in Victoria was a resounding success. With over 500 delegates, it was one of the largest meetings in the Society's 33-year history. Even the lovely Victoria weather and beautiful scenery did not appear to lure delegates away too much – most sessions were very well attended, even on the last day of the Conference. The scientific sessions and exhibits were supplemented with a preceding Pain Education Day and public forum, which were both well

Editor's Note

This edition of the CPS Newsletter marks a transition in editorial leadership. Our current editor, Diane LaChapelle will be moving on from this role as she embarks on her sabbatical. On behalf of the CPS executive and general membership, thank you Diane for her dedication and leadership in generating an informative and interesting newsletter that we look forward to receiving. Best wishes for an enjoyable and fulfilling academic leave.

As for myself, it is with ambivalence that I return from an amazing sabbatical year spent in Scotland and France. I hope to share some of my

attended. Highlights of the "Social" Program included the Welcoming Reception in the Royal BC Museum and the annual banquet at which yours truly and the Immediate Past-President Roman Jovey were "knighted" by "Queen" Elizabeth II who provided light-hearted entertainment for the banquet attendees.

The next CPS Annual Conference is scheduled to be held at the convention centre and Hilton Hotel in Quebec City from May 27-30, 2009. A Local Arrangements Committee chaired by André Bélanger and a Scientific Program Committee chaired by Mike McGillion (co-chair Serge Marchand) have already started their activities to

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experiences with you over the next two years. I am very excited to be embarking on this new position as editor of the CPS newsletter. It will give me the opportunity to be more engaged at the national level, and to hopefully highlight some of the work of our international colleagues through sharing my experiences over the past year.

I am honoured to be co-editing this edition of the newsletter with Diane who is so relaxed yet efficient at editing the articles. I look forward to

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Summer 2008

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President's Message (cont'd)

ensure Quebec City will be another memorable conference from both scientific and social perspectives.

At the Executive and Annual General Meetings in Victoria I provided my annual President's Report. Highlights include the establishment of 2 new CPS Special Interest Groups: an Education SIG and an Interventional SIG; and the introduction of several new awards for Interprofessional Education, Nursing Excellence in Pain Management, and Nursing Interprofessional Research. In addition, a 2nd Trainee Research Award was approved – there are now awards for both a basic science and clinically oriented project. Another highlight worth reiterating is the tremendous membership growth the Society has experienced in the past few years,

from less than 450 in 2005 to 750 in the current year. This feature, together with the positive financial picture of the Society (as shown in the Treasurer's Report presented during the Society's Annual General Meeting), indicates that the CPS is in a very healthy state. Together, these factors have enabled the Society to continue its focus on activities to raise awareness of pain in Canada and to carry out surveys of pain curricula in Canadian health science faculties and of pain and its socioeconomic impact in Canada. We are currently surveying the CPS membership regarding levels of funding for pain research in Canada. In the coming months CPS members can also expect to receive electronic ballots to vote on revisions to the CPS by-laws;

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Editor's Note (cont'd)

servicing the membership as the new editor in the Fall and hope that I can carry on the fine traditions started by past editors, Diane LaChapelle, Elizabeth Stanford and Jennifer Stinson. As always, please remember that the newsletter is here to serve you. If you have any suggestions for improvement, change, story ideas, etcetera, please do not hesitate to get in touch with me (ev5@queensu.ca).

In the following pages of this year's Summer Newsletter you will find highlights from the CPS conference in Victoria including award recipients. There are also updates from the Education SIG and the Canadian Pain Coalition. In addition, you'll find a call to all those interested in forming a SIG on Pain and Culture, a spotlight on one of our Trainees, contributions from our regional members in Manitoba and Saskatchewan, and information about other members in the news.

I am looking forward to receiving submissions from across Canada and in particular from **Alberta and British Columbia**. Given my nostalgia for all things international as I adjust to the Canadian pace of life, it would be wonderful to hear about your experiences and antics at the upcoming WCP in Glasgow. I intend to be there with bells on!

We hope you enjoy the newsletter and that you have a relaxing and safe summer.

Sincerely,

*Elizabeth VanDenKerkhof (incoming editor)
& Diane LaChapelle (outgoing editor)*



President's Message (cont'd)

there was undisputed approval of the amendment to allow for electronic voting on CPS matters at the Annual General Meeting in Victoria.

Finally, I would like to acknowledge the contributions of Diane LaChapelle, who will be stepping down as Editor of the CPS Newsletter after this issue. Diane has done a great job, and I thank her very much on behalf of the Society. Elizabeth Van Den Kerkhof will assume the role of Editor – welcome Elizabeth!

A mes collègues francophones:

Le Congrès Annuel de la Société Canadienne de la Douleur tenu en mai dernier à Victoria en Colombie Britannique fut un grand succès. Plus de 500 participants ont profité d'un programme scientifique hors pair, d'un grand étalage d'exposants et d'activités sociales incluant la réception d'ouverture au Royal BC Muséum ainsi que le banquet annuel avec la présence honorable de la « Reine » Elizabeth II. Le prochain Congrès Annuel de la Société Canadienne de la Douleur se tiendra dans la ville de Québec du 27 au 30 mai 2009. Le comité local sera sous la responsabilité d'André Bélanger, le programme scientifique sera présidé par Mike McGillion, et co-président Serge Marchand. Ils sont déjà au travail pour vous assurer un congrès mémorable.

Lors du congrès à Victoria, nous avons parlé du rapport du président pour l'année 2007-2008, nous avons aussi parlé de la création de 2 nouveaux groupes d'intérêt (Éducation et Interventionnel Pain), de plusieurs nouveaux Prix (Interprofessional Education, Nursing Excellence in Pain Management; Nursing Interprofessional Research Project) et d'un 2^e Prix de Recherche Étudiant. La Société est en bonne santé financière; elle compte 750 membres en 2008 comparativement à 450 en 2005.

Des enquêtes portant sur le curriculum de la douleur au sein des Facultés des Sciences de la Santé Canadienne ainsi que de l'impact socio-économique de la douleur au Canada furent complétées au cours de la dernière année. Une autre enquête auprès des membres de la Société Canadienne de la Douleur sera entamée prochainement afin d'évaluer les fonds de recherches en douleur au Canada. Lors de l'assemblée générale annuelle des membres à Victoria, un accord unanime fut donné pour le vote électronique concernant les affaires courantes de la Société. Nous anticipons très prochainement l'utilisation d'une telle procédure électronique pour la révision des règlements de la Société.

Finalement, je remercie Diane LaChapelle pour son excellent travail en tant qu'éditrice du Journal de la Société Canadienne de la Douleur, et bienvenue à Elizabeth Van Den Kerkhof qui prend la relève.

Barry J. Sessle, MDS, PhD, FRSC
President, Canadian Pain Society



CPS Annual Conference in Victoria, BC



Past President Roman Jovey and President Barry Sessle are "knighted" at the CPS Annual Conference in Victoria



Dean Tripp receives the CPS Early Career Award from Roman Jovey



Renee Crossman receives the CPS Nursing Research Grant from Judy Watt-Watson



Judy Watt-Watson receives the Distinguished Career Award from Past President Roman Jovey



CPS Annual Conference Highlights





Community Alliances for Health Research (CAHR) and Knowledge Translation in Pain – awarded \$2.5 M from CIHR

“CAHR-pain” is a research network funded by the Canadian Institutes of Health Research to provide knowledge translation to receptor communities in the area of pain. This network consists of six research teams, each focussed on a specific theme and led by internationally-recognized leaders in the field. Funding for this network has come primarily from the Institute for Musculoskeletal Health and Arthritis and the Institute for Neuroscience, Mental Health and Addiction. Knowledge translation is the term widely used to refer to the process of research use, or the application of knowledge to receptor communities. More formally, knowledge translation at CIHR is defined as *the exchange, synthesis and ethically sound application of research findings within a complex set of interactions among researchers and knowledge users - to accelerate the capture of the benefits of research for Canadians through improved health, more effective services and products, and a strengthened health care system.*

Briefly, the six themes are as follows:

“From the Ground Up: Alliances to Address Chronic Pain in the Community”, led by Sandra LeFort and Thomas Hadjistavropoulos. This Theme will engage communities of chronic pain sufferers and families, providers of health care and relevant organizations in participatory action research to explore the chronic pain experience, the interface of chronic pain patients/families with the health system, the needs of people with chronic pain, and perspectives about client, provider and system expectations regarding care. This theme will conduct an in-depth review of the scientific, policy and lay literature to identify existing resources and emerging technologies for both patients and providers of care, as well as best practice and models of community-based care for chronic pain.

“E-learning interprofessional pain curriculum for pre-licensure health science students”, led by Judy Watt-Watson, Judi Hunter, Michael McGillion and Leila Lax. The overall objective is to improve the health of Canadians who are

experiencing pain, through the development and evaluation of an E-learning pain curriculum for pre-licensure health science students in universities across Canada. This study has been designed to develop an E-learning pain curriculum for pre-licensure health science students, evaluate its transferability to pre-licensure health science students in selected universities across Canada, develop KT strategies for implementation of this curriculum in each site, including facilitator training, and implement a pilot study to evaluate the final curriculum product.

“Preceptorship Programmes in Pain Management - Longitudinal Evaluation of Pain Management Education in Medical Trainees through Undergraduate and Post Graduate Programs and Creating Pain Management Clinics Practicing Evidence-Based Standards of Care”, led by Allan Gordon. The research project is to intervene at different levels in the career development of physicians and other health care practitioners to measurably improve the skills and competencies in pain management both locally and nationally, measure the impact of our various preceptorship programs on the physicians that we educate, particularly in the field of Pain and Addiction, and demonstrate that pain clinics can follow acceptable standards of care and document that these standards of care were influenced by this training.

“Partnering with the Alberta HTA Chronic Pain Ambassador Programme”, led by Paul Taenzer and Saifee Rashid. The project team is committed to evaluating the impact of the “Ambassador Workshop KT Strategy” on provider knowledge of evidence-based assessment and treatment strategies, provider clinical practices/activities when working with patients with chronic pain, and patient outcomes. The results of the initial study will be used to plan a two group cluster randomized trial and additional cluster randomized controlled trials comparing the Ambassador program to other promising knowledge translation strategies.

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CAHR and Knowledge Translation in Pain (Cont'd)

“Integrating Evidence into Effective Collaborative Practice to Enhance Quality of Life”, led by Joy MacDermid and Linda Woodhouse. The objective is to apply innovative KT strategies engaging the chronic pain community to effectively mobilize explicit and tacit knowledge to assist those living with chronic pain to attain the best possible quality-of-life. This theme will develop and evaluate a push-out technology (MacPlus-P) to capture and push out the best evidence on management of chronic pain to clinicians, patients and policy makers, and a Community of Practice approach meant mobilizing the tacit knowledge required to implement best practice in chronic pain management, including community-based management and knowledge developed across themes.

“Engaging in Knowledge Translation Through Deliberative Processes”, led by John Lavis. This project theme proposes to develop and test a simple tool to describe and evaluate key elements of deliberative processes that bring together public policymakers, health system managers, clinical leaders, consumer group representatives and others. The purpose is to discuss key challenges in responding to chronic pain (e.g., goals, group composition, and group process), and to conduct formative evaluations of all deliberative processes. At two and four years a summative evaluation will be conducted to match key design elements to particular contexts.

Studies have shown that one in five Canadians suffer from some form of persistent or chronic pain. The impact on individual lives, on families and friends, on the health services sector and on the economy is huge. CAHR-pain has thus been created to develop, disseminate and evaluate innovation in knowledge translation. Bridging the quality chasm between chronic pain and the care process will come from this unique confluence of opinion from all stakeholders committed within this focussed community of practice to address the impact of pain.

Reliable evidence is available that the burden of persistent pain can be markedly reduced when available knowledge is applied. Various levels of

success in this regard have been demonstrated when there is exchange, synthesis and ethically sound application of research findings within a complex set of interactions among researchers and knowledge users. The objectives of this network are to accelerate the capture of the benefits of research for Canadians through improved health, more effective and responsive services and products, and a strengthened health care system. This will be conducted by promoting and integrating six internationally-recognized success stories, to bring about health care reform across Canada as it pertains to the one in five Canadians living with chronic, disabling pain.

The overarching impact from the outputs of this CAHR is to promote and sustain a balanced portfolio of curiosity-based and needs-based research, which along with existing knowledge will be mobilized and applied for the benefit of Canadians, the health system and the economy.

You are invited to visit the CAHR-pain web site, at www.CAHR-pain.ca, to learn details about what each theme has as its research objectives, who the participants are in each research theme, what the respective receptor communities are, what the long-term objectives are and how these will be carried out. This information is available by clicking on the respective section of this web site.

If you have interests that align with any of the research themes outlined above and would like to get involved, you are invited to contact any of the theme leaders listed above, or the Director, James L. Henry at jhenry@mcmaster.ca

**James L. Henry,
Michael G. DeGroote Institute
for Pain Research and Care, McMaster University**



Special Feature: Regional Focus VII

Highlighting the work of our Members in Manitoba & Saskatchewan

Clinical and Research Activities in Manitoba

Psychological Services at the Winnipeg Health Sciences Centre and Pan Am Clinic

submitted by
Matthew Bailly, Ph.D., C.Psych.
and Gregg Tkachuk, Ph.D., C.Psych.

Psychological assessment and treatment of chronic pain, through the Department of Clinical Health Psychology, has been available to patients at the Pain Management Centre at Winnipeg's Health Sciences Centre since September of 2005 and the Pan Am Clinic since October 2007. Patients in these clinics typically receive treatment from one or more specialties, including anesthesiology, psychology, rehabilitation medicine, and physiotherapy.

Psychological treatment is time-limited and tailored to the individual. The focus is on developing skills that promote self-efficacy while improving functioning and quality of life. For example, training in relaxation techniques, such as abdominal breathing, visualization, and progressive muscle relaxation may reduce anxiety that typically magnifies pain signals. Treatment also attempts to increase behaviours associated with self-management, such as adaptive coping, participation in exercise programs, and improved communication with providers. Acceptance-based treatment strategies such as mindfulness meditation are also showing some promise in helping patients adapt to their pain conditions and regain a sense of purpose in order to live a life more congruent with their values.

Individual treatment is typically brief (4-6 sessions). Patients requiring more intensive treatment, or those experiencing significant emotional distress, may be seen for additional sessions, or may receive treatment through the self-management program, a cognitive-

behavioural group treatment. This structured program, which typically serves between 8 and 12 patients, is provided three times annually, and has contributed greatly to a reduced wait time for psychological pain management service. Participation has been offered through Manitoba TeleHealth, allowing patients from across the province to access psychological pain services without extensive travel. Dr. Bailly and Dr. Tkachuk have been collecting data related to group treatment outcomes, and results indicate that patients increase their use of pain-coping strategies and experience a reduction in depressive symptoms after treatment. Although data related to treatment through videoconferencing is still emerging, it suggests that this provides comparable benefit.

Nursing services at Winnipeg's Regional Pan Am Pain Clinic

submitted by
Tamara Wells RN, BN

The Pan Am Pain clinic, which is affiliated with the Winnipeg Regional Pain Program, is a multi-disciplinary and multi-modal pain treatment program. Within the program, nursing is most often the first person a patient will have the opportunity to interact with. During this time, nurses work to provide education in chronic pain, help clients to establish realistic goals, and establish a relationship that ensures each interaction is patient centered. Recently, a patient education series was developed that included all team members. The goal of this program was to set the stage for a successful clinical interaction by providing patients with education and information prior to entering the program. Education focused on the impacts of chronic pain and the clinic's philosophy of moving from a pain-centered to a function-centered life. Initial feedback from patients involved in the new

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Special Feature: Regional Focus VII (Cont'd)

Highlighting the work of our Members in Manitoba & Saskatchewan

education series has been very positive and consideration is being given to developing research protocols that will measure the efficacy of these classes as they apply to the patient care experience.

Research Activities in Saskatchewan

Royal University Hospital, Saskatoon

*Submitted by
Jennifer O'Brien, Research Assistant*

Researchers in the Department of Anesthesiology, Perioperative Medicine and Pain Management at the Royal University Hospital in Saskatoon are investigating a new way to measure the pain of surgery, one that combines patient-generated pain scores and calculated levels of analgesics. Under the direction of Dr. William P.S. McKay, researchers are exploring the development of the Post-Operative Pain Severity Index (POPSI) by studying the balance of the pain of surgery and the analgesic effects of narcotics given intra- and post-operatively. The purpose of the study is twofold. Firstly, that pain scores combined with calculated levels of analgesics will correlate to give a better measurement of postoperative pain than either measurement alone. Secondly, the study will serve as a quality-assurance assessment of the adequacy of both post-operative analgesia and general care in the Saskatoon surgical program.

To date, approximately 250 participants have been enrolled in this study. Participants are asked to rate their pain on a Verbal Rating Scale from 0-10, and a Visual Analog Scale (a line graph) at four different times – prior to surgery, in the recovery room, the day after surgery, and one week following surgery. In addition, patients are asked to rate their pain at rest and with little movement. Furthermore, amounts of analgesics and times in which analgesics are being given post and intra-

operatively are also recorded. The Patient Narcotic Calculator is then used to determine what concentration of analgesic narcotic was in the patients' system at the time they record their pain. Data collection is ongoing.

Acknowledgements: The team would like to acknowledge the work completed by Dr. James Best, Dr. Russell Johnson, Dr. Clifford Rosen, Robert Kindzierski, and Paul Korchinski.

University of Regina

*Submitted by
Thomas Hadjistavropoulos*

Thomas Hadjistavropoulos and his team have been continuing their work on pain among older persons. They have recently received a \$2.4 million grant from the Saskatchewan Health Research Foundation to study pain and other quality of life issues in nursing homes. Moreover, together with Gregory Marchildon, a Canada Research Chair in Public Policy and Economic History at the University of Regina, and a team of pain and public policy experts from the U.S. and Canada, they have been exploring public policy issues for better pain management in long-term care facilities. Thomas Hadjistavropoulos, together with Heather Hadjistavropoulos, recently co-edited the first IASP Press patient-oriented book: "Pain Management in Older Adults: A Self-Help Guide" (<http://www.iasp-pain.org/olderadults>).

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Special Feature: Regional Focus VII (Cont'd) Highlighting the work of our Members in Manitoba & Saskatchewan

Clinical, Research, and Continuing Medical Education Activities at the Saskatoon Chronic Pain Centre

*Submitted by
Kate Fast*

The Saskatoon Chronic Pain Centre (CPC) is the sole provider of interdisciplinary treatment for persons with persistent musculoskeletal pain, neuropathic pain, and headaches in Saskatchewan. Since 2004, the CPC has received over 2000 referrals and provided over 450 assessments. Over half of these patients have accessed the treatment program and as a result enjoy a better quality of life, including improved pain management, decreased pain severity, improved self-efficacy, and improved functioning. Also, they experience improved mood and decreased anxiety about pain and re-injury.

Program evaluation is a priority for the CPC. Clients complete twelve psychosocial scales and five functional measures prior to beginning treatment, at the end of treatment and at three months post treatment (voluntary). Psychologists, Dr. Marc Woods and Dr. Bruce McMurtry, oversee the process and continue to enhance program evaluation. Recently, the CPC received ethical approval to collect data for a wait list comparison group. In addition, Ms. Flo Wagner, Masters of Epidemiology candidate, is collecting data for clients who have met or surpassed the one year mark of the treatment program. Although CPC outcomes show that clients improve significantly between the beginning and end of treatment, it is imperative to determine the efficacy of the treatment program relative to no treatment and to understand if improvements as a result of treatment are being sustained.

Similar to the rest of Canada, there is a lack of access to physicians with advanced training in the management of chronic pain in Saskatchewan. As a result, the number of patients experiencing

persistent pain continues to increase. To begin to address this gap in service, Dr. Murray Opdahl, Medical Director of the CPC and Katie Fast, Manager, have developed an innovative program aimed at providing specific continuing medical education to family physicians for the management of chronic pain. The Chronic Pain Preceptorship is accredited by the Saskatchewan College of Family Physicians for MAIN-PRO M1 continuing education and includes formal teaching regarding medical and pharmacologic management of chronic pain. Physicians also have the option of attending the Centre to work with the interdisciplinary team. The goal over the next two years is to create a virtual network of physicians across the province that can provide advanced care for these patients.

The CPC staff also continue to be involved with providing services to the community in a variety of ways:

- Last winter a three session seminar series about pain was offered to the public and to staff - physiotherapists, occupational therapist, nurse, manager and psychologists.
- Kate Fast and Dr. Marc Woods were on the organizational committee for the interdisciplinary conference, "Back At It: A Review of Current Approaches to Managing Neck and Back Pain". This successful conference took place January 18-19, 2008.
- Dr. Bruce McMurtry is currently on the organizing committee for the forthcoming interdisciplinary headache management conference.
- Dr. McMurtry and Katie Fast are members of a committee that have the task of developing a surgical and non-surgical spinal care pathway for patients with neck and back pain. The goal is to standardize decision making and care for patients and ensure access to the proper treatment when needed.
- Dr. Marc Woods recently accepted an adjunct professor position in the Department of Anesthesiology, Perioperative Medicine & Pain Management at the College of Medicine, University of Saskatchewan.



Trainee Corner

Trainee Spotlight:

In this edition of Trainee Corner, I am delighted to introduce you to Qi Wu, the recipient of the first CPS Trainee Research Award. Qi is a 2nd year



PhD student in Psychiatry & Behavioral Neuroscience at McMaster University and is supervised by Dr. James L. Henry. Qi received an M.D Degree in 1997 and a Master's Degree in Anesthesiology in 2000 from Second Military

Medical University in Shanghai, China. After graduation, he started his residency in Anesthesiology and was a first year fellow before he was admitted into a graduate program in Canada in 2004. Qi is especially interested in the basic mechanisms of chronic pain and the application of current advances in chronic pain research to the clinical practice of pain management. When asked where his initial motivation to conduct basic research in chronic pain came from, he replied: "During my residency in pain clinic, I got some successful experience in pain control in some chronic pain patients using pharmacological, physiotherapeutic or invasive intervention. However, I saw more chronic pain sufferers who had no effective way to achieve adequate pain relief. Therefore, I decided to apply for graduate study in pain mechanism research under the supervision of Dr. James L. Henry - one of the authorities in pain research in Canada."

Qi will be conducting his research within the Medical Sciences Graduate Program at McMaster University, which he described as an interdepartmental, interdisciplinary program within

the Faculty of Health Sciences. Here, graduate students are affiliated with a specific graduate program rather than with a department. One of the reasons that his program provides an ideal context to carry out his research is that faculty expertise in research and teaching is complemented by associate members in other faculties at McMaster, including Biochemistry, Biomedical Sciences, Biology, Chemical Engineering, Kinesiology, and Psychology.

Qi's PhD project is on pain mechanisms in osteoarthritis (OA). When I asked him about the rationale for his research, Qi responded: "OA is the most common form of arthritis, affecting 10% of Canadian adults. Pain has been defined as the primary symptom of OA patients, prompting them to seek medical attention. OA pain is different from the pain in rheumatoid arthritis in several ways. Many theories about OA pain have been proposed, but until now, we haven't found out exactly why OA patients have pain". He said that his focus of research is on primary sensory neurons. He predicts that changes in heavily myelinated A-fibre neurons will account for OA pain. His primary technique is in vivo intracellular recording. In a surgical model of knee derangement, he investigated electrophysiological parameters from action potentials of DRG neurons, by which he determined the properties of neurons. Asked about his major findings, he excitedly indicated: "A-fibre neurons which convey the information of normal feeling, such as touch of the skin, movement of the hair, and length of the muscle spindle, undergo significant changes in the animals suffering from OA. Interestingly, those neurons normally do not change their properties in the animals suffering peripheral tissue inflammation, such as rheumatoid arthritis." He added: "I think that OA pain is a neuropathic type of pain."

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Trainee Corner (Cont'd)

The project that Qi will be conducting with support from his Canadian Pain Society Trainee Research Award is entitled "Substance P expression in functionally identified non-nociceptive A type dorsal root ganglion neurons in a rat model of osteoarthritis". This project will involve labeling neurons with neurobiotin during in vivo intracellular recording and measuring the intensity of substance P expression – "the most important pain neurotransmitter". When asked about the ultimate goal of his project, he explained: "This project is designed to examine primary sensory neurons at the cellular level to understand how they change their physiological properties and how these match with structural changes and changes in protein expression. This project will advance our understanding of the plasticity of primary sensory neurons."

Finally, when he was asked how he envisions the future OA pain research, he replied: "Once the neuropathic nature of OA pain is confirmed, all the advances in neuropathic pain can be borrowed into the study of OA pain, such as those of neuroinflammation and ion channel blockers." He also noted that he feels more work should be done to clarify the role of primary sensory neurons in the development of chronic pain.

I would like to congratulate Qi once again on his success in the CPS Trainee Research Award competition and thank him for sharing his interesting research and training experiences with us. All the best in the coming year - we look forward to hearing about your results!

2 New Trainee Research Awards Announced

I am delighted to announce that there will be 2 new CPS Trainee Research Awards offered this year, one clinical and one basic science. This is a fantastic opportunity to support your research projects and we encourage you to apply this year! Keep your eyes open for all of the details on the CPS website.

If you would like to speak with Qi regarding his research, if you would like to be highlighted in the next issue of trainee corner, or if you have any comments or suggestions for the CPS trainee agenda, please do not hesitate to contact me at: melanie.noel@dal.ca.

Congratulations to the 2008 CPS Conference Trainee Award Winners

Travel Awards

Andre Arsenault
Dave Bergeron
Louis Dore-Savard
Judi Hunter
Mylene Lafrance
Guillaume Leonard
Melanie Morin
Daron Owen
John Robertson
Mona Sawhney
Kelly Smith
Nataliya Vasylevych

Poster Awards

Kelly Smith (clinical research)
Andre Arsenault (basic research)

It was great to see many of you at the CPS conference in Victoria. Have a wonderful summer!

Sincerely,

*Melanie Noel,
Clinical Psychology PhD Student
(Dalhousie University)
CPS Trainee Representative*



Calling All Those Interested In Pain And Culture

Our team¹ had the opportunity to present a symposium on Culture and Pain at the 2008 CPS meeting and this symposium has spearheaded a significant amount of interest. While much of the ethnocultural pain research comes from American studies (on Whites, Blacks and Hispanics), these studies may not be relevant to the Canadian reality, which is truly a mosaic of cultures and ethnic groups. Of notice, Stats Canada reported in 2001 that the national average for Foreign Born residents is 18%, increasing to 27% for Ontario and 44% for Toronto. The largest visible minorities are patients from South Central Asia (India, Pakistan, Iran, etc.), East Asia (China, Hong Kong, Taiwan, etc.) and Blacks. Our collective research data has shown without doubt that different ethnic groups perceive and express pain differently and that culture also affects acceptance and compliance with treatments, treatment preferences, medication intake etc. Furthermore, patients' pain complaints and health care utilization are affected not only by factors relating

to patients' ethnic identification, but also physicians' ethnic origin and identification. Therefore, it is of paramount importance that clinicians and researchers start focusing attention on Ethnocultural Research in order to use culturally sensitive measurement tools and offer our patients the best possible "culturally sensitive" treatments. To meet this need, we are calling on CPS members who are interested in forming a special interest group on Ethnocultural matters to please contact Annie Hsieh, 4ah8@queensu.ca. This will be an excellent forum for the exchange of ideas and knowledge.

Angela Mailis Gagnon,
Toronto Western Hospital

¹. Angela Mailis Gagnon (MD, Director, Comprehensive Pain Program, Toronto Western Hospital, Toronto), Annie Hsieh (M.A., Doctoral Student, Department of Psychology, Queen's University), and Dean Tripp (Ph.D., Associate Professor, Departments of Psychology, Anesthesiology & Urology, Queen's University)

Meeting Announcements

Pain Management 2008

Vancouver to Alaska Cruise Conference, July 13-20, 2008

The UBC Division of Continuing Professional Development and Knowledge Translation invites you to attend an exciting new CME Cruise Conference on topics related to acute and chronic pain.

Conference website: www.cpdkt.ubc.ca/Home.htm
Cruise Connections Canada CME webpage:
www.cruise-connections.com/cme

International Association for the Study of Pain 12th World Congress on Pain

August 17 – 22, 2008

Glasgow, Scotland

IASP website: www.iasp-pain.org/2008Congress.htm

17th International Congress on Palliative Care September 23-26, 2008

Montréal, PQ

Conference website: www.pal2008.com

7th International Forum on Pediatric Pain October 2-5, 2008

White Point, NS

CPS website: <http://pediatric-pain.ca/ifpp/>

Canadian Pain Society Annual Conference May 27-30, 2009

Québec City, PQ

CPS website: www.canadianpainsociety.ca

International Association for the Study of Pain 13th World Congress on Pain

August 29 – September 3, 2010

Montréal, PQ

IASP website: www.iasp-pain.org/2010Congress



Pfizer Canada Announces Recipients of Neuropathic Pain Research Awards Program



Kirkland, QC – May 29, 2008 – Pfizer Canada is pleased to announce the recipients of their first Neuropathic Pain Research Awards Competition. This grant competition aims to fund and support independent neuropathic pain research in the areas of basic biomedical, clinical and health service and systems sciences. Pfizer Canada is strongly committed to improving the lives of Canadian patients suffering from neuropathic pain and is pleased to support Canadian medical innovation through this grant competition.

Neuropathic pain is a disease caused by injury or dysfunction of the nerves, spinal cord or brain. It is estimated that over 2.2 million Canadians suffer from this chronic condition, often in combination with other types of pain such as fibromyalgia, osteoarthritis and migraine headaches.

Seventeen research proposals were reviewed by an independent committee of Canadian medical researchers, chaired by Dr. A. John Clark, Medical Director, Calgary Health Region Chronic Pain Centre. Eight proposals were funded based on ranked scores from the independent committee. The recipients represent a diverse group of healthcare professionals and scientists committed to furthering research and understanding of neuropathic pain.

“This awards program recognizes the severity of neuropathic pain as a disease and the important work of some of Canada’s leading researchers who are committed to understanding and learning more about neuropathic pain,” said Dr. Clark. “The work they are doing is of tremendous importance to not only Canadian patients but people around the world who suffer from this disease.”

The recipients of the 2007 awards are:

Catherine Bushnell, PhD

Professor, Department of Dentistry and Anesthesia, McGill Centre for Research on Pain, McGill University

Dr. Bushnell's research will focus on determining the longitudinal changes in brain morphology and function associated with chronic pain in rat models of neuropathic pain.

Catherine Marie Cahill, MSc, PhD

Assistant Professor, CRC in Chronic Pain, Department of Pharmacology & Toxicology, Queen's University

Dr. Cahill's research will investigate the mechanisms in neuropathic pain models; focussing on the role of NMDA receptor linked intracellular signalling cascades and the role of reactive glia in translocation of pre- and post-synaptic delta opioid receptors.

Stephan K. W. Schwarz, MD, PhD, FRCPC

Assistant Professor, Department of Anaesthesiology, Pharmacology & Therapeutics, University of British Columbia

Dr. Schwarz's research will examine intravenous lidocaine as a tool to identify novel drug targets for post-operative and neuropathic pain control - supraspinal mechanisms and effects on calcium conductances.

Thuan Dao, DMD, MSc, PhD, FRCDC

Associate Professor, Faculty of Dentistry, University of Toronto

Dr. Dao's research will evaluate the efficacy of pregabalin in the treatment of orofacial neuropathic pain.

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Pfizer Canada Announces Recipients of Neuropathic Pain Research Awards Program



Hance A. Clarke, MD, MSc

*Senior Anesthesia Resident & PhD Candidate,
Department of Anesthesia, University of Toronto,
Sunnybrook Health Sciences Centre*

Dr. Clarke's research will examine the short and long term effects of perioperative pregabalin use on functional rehabilitation, pain outcomes and anxiety following total hip arthroplasty in a randomized, double-blind, placebo-controlled trial.

Serge Marchand, PhD

*Researcher and Professor, Faculty of Medicine,
University of Sherbrooke*

Dr. Marchand's work will investigate the antihyperalgesic properties of pregabalin accomplished by provoking wind-up and by recording the spinal (flexion reflex) and cortical (ERPs and pain scales) responses evoked during repetitive sural nerve stimulations.

James L. Henry, PhD

*Scientific Director and Professor, Michael G.
DeGroote Institute for Pain Research & Care
McMaster University*

Dr. Henry's first research project will examine the peripheral anti-inflammatory effects of pregabalin – entrance to treatment of comorbid conditions. His second research project will evaluate the early intervention with pregabalin during the initiation phase of an animal model of peripheral neuropathic pain.

About Pfizer Canada Inc.

Pfizer Canada Inc. is the Canadian operation of Pfizer Inc, the world's leading pharmaceutical company. Pfizer discovers, develops, manufactures and markets prescription medicines for humans and animals. Pfizer's ongoing research and development activities focus on a wide range of

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Canadian Pain Coalition Update

We are pleased to provide you with updates on the activities of the CPC and we embrace the opportunity to share our activities with health professionals who work to ease the burden of pain on society.

The CPC Continues to Reach out to Canadians and to Engage Health Professionals

The CPC hosted a display booth at the CPS conference in Victoria to share our educational materials, information about our programs, National Pain Awareness Week posters, and our accomplishments as the Voice of the Patient in Canada. We thank everyone who participated in our survey on identifying obstacles experienced by health care practitioners to improve pain management. Watch for the survey results, soon to be posted on www.canadianpaincoalition.ca. We believe that by giving people with pain an appreciation for the challenges faced by health professionals, it will facilitate better communication in health care settings.

In response to an invitation from the Canadian Diabetes Association, the CPC also hosted our display booth at the Live Smart Diabetes Expo at the Toronto Congress Centre on June 7. CPC staff and volunteers provided information about pain and general pain management to individuals with diabetic neuropathy. In addition, the CPC provided display materials for the Edmonton forum of the Pain on Podium lecture series on June 23rd.

CPC Supports Member Groups

In 2008, the CPC created a Small Grants Program to which member groups can apply for pain education project support. Eligible proposals will be reviewed quarterly and the award is valued at \$500. The first grant was awarded this May to the Newfoundland and Labrador Long Term Pain Association. The group used the funding to host a successful public seminar on pain management in St. John's.

The CPC is a sponsor of the Ride to Conquer CRPS. Dr. David L. Shulman (Rothbart Pain Clinic, Toronto) is an avid cyclist who is riding from Marathon, Ontario to St John's, Newfoundland to raise awareness of Complex Regional Pain Syndrome and to fundraise for PARC (Promote Awareness of RSD and CRPS), a CPC member group. For more information about the ride visit www.rsdcanada.org/parc.

Annual General Meeting

The CPC Annual General Meeting was held in beautiful Victoria on May 27, 2008. Several years ago, the CPC Board decided to schedule the AGM in conjunction with the CPS conference in order to facilitate holding the AGM in different regions of Canada. The timing fits well because most Board members are also members of the CPS.

This year, during Elections, we saw the retirement of three long time directors, Dr. Manon Choiniere, Robert Lindsay, President of the Canadian Injured Workers' Association and Dr. Pat Morley-Forster. The CPC would like to thank these members for their hard work and contributions - they will be missed. At the same time, we welcomed Dr. Ann Gamsa, Dr. Anita Chakravarti, Mark Pitcher (PhD student at McGill) and Louise O'Donnel-Jasmine (board member of the Association Quebecoise Douleur Chronique, a CPC group member). We look forward to working with our new Directors.

CPC Partnerships with CPS SIGs Continues

The CPS Education SIG and CPC are moving forward with the Patient Resource Centre (PRC). Look for the write up about the PRC from Jennifer Stinson in this issue.

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CPC Update (Cont'd)

The CPC continues to partner with the Nursing SIG to host pain information booths at Canadian shopping malls through out the year. This initiative is based on a pilot project conducted in 2006.

CPC's Gala is on the Horizon

Our annual fundraising event, the CPC gala, is scheduled for Friday October 17th. The Guest Celebrity this year is **Karen Kain**, who is well known and highly respected in the world of Ballet. This amazing night will include a performance by **Illusionist Brian Michaels**, random prize draws, food stations for networking, and full seating for all guests! Brian Michaels has performed throughout Canada and the United States, including Céline Dion. This performance will be truly spectacular!

National Pain Awareness Week (NPAW): November 2 – 8, 2008.

CPC's activities include the annual mailing of our NPAW posters and information kits to Canadian Pain Clinics, Health Care Facilities and MDs. The projected distribution of posters/kits in 2008 is 23,000. We will be attending National Pain Awareness week educational events and promoting the media messages established within the painexplained.ca awareness campaign. We are presently working on a proposed CPC delegate conference that would begin on October 15th (International Pain Awareness day) and end with the Gala, October 17th. Please help us increase pain awareness by displaying posters, hosting an educational event, and passing on the NPAW media messages soon to arrive in your mailbox.

The CPC Board wishes you a happy and healthy summer.

Respectfully submitted,

*Lynn Cooper BES
President*

Education Special Interest Group (SIG)

The Education SIG was formed late last year with five working taskforces chaired by healthcare professionals from different disciplines. The Education SIG has already generated much interest and, as of May 2008, 108 CPS members were already signed up for the SIG. We held our first face-to-face SIG meeting on Wednesday, May 28, 2008, during the CPS meeting to discuss the activities of the different taskforces.

The following is a summary of the five taskforces:

Education Material for Practitioners & Trainees *M. Lynch*

The plan is to have committees for both Acute and Chronic Pain. Currently, Dr. Mary Lynch has agreed to chair the Chronic Pain committee. The first activity of this committee is to establish a quick reference guide for front line healthcare practitioners and trainees.

The steering committee of this section has included Ken Craig, Philip Peng and Mary Lynch. After searching the literature, the committee concluded that while there are quite a number of books available on the topic of chronic pain (9 reviewed in total), there remains a need for an objective, comprehensive, evidence based quick reference guide for the management of chronic pain that is appropriate for an international readership. The fact that there are so many previous volumes attests to the need for such a publication. The steering committee identified the need for such a reference and the fact that it should come from an independent source such as IASP and not from projects supported and distributed by the pharmaceutical industry. Ken Craig contacted Dr. Catherine Bushnell at IASP Press to inquire about their interest in such a publication and we were encouraged by her response. A proposal was submitted in March 2008 and following receipt of recommendations for revisions a modified proposal

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Education SIG (Cont'd)

was submitted June 6, 2008. We are now awaiting the response of IASP Press. Prior to submission we had contacted approximately one third of the international authors proposed and received a majority of positive responses, including an enthusiastic endorsement from Dr. Ron Melzack who has agreed to write the Preface to the volume.

The plan is to recruit a chair for the companion proposal on Acute pain. These references will target an international, interdisciplinary clinical readership and will be appropriate for trainees and frontline clinicians in primary care. They will also be consistent with IASP curricula and best evidence.

Patient Resource Center (PRC)

*L. Copper
L. Montgomery
J. Stinson)*

The Canadian Pain Coalition (CPC) and Canadian Pain Society (CPS) Education SIG are partnering to establish a web-based patient resource centre that will integrate the latest evidence, resources and information pertinent to the management of chronic pain. The goal is to provide easy access to this information by consumer and healthcare providers across Canada. The PRC subcommittee is being co-chaired by Lynn Cooper, President of the CPC, and Drs. Lori Montgomery and Jennifer Stinson. The PRC will be hosted on both CPS and CPC websites. Information to be included on the website will fall into 5 main categories: (1) resources on accessing care; (2) information on management of chronic pain; (3) information on various chronic pain conditions; (4) resources including patient advocacy groups; and (5) frequently asked questions and other miscellaneous resources. Individuals interested in helping to develop the education materials for these various sections can contact the co-chairs via the CPS or CPC websites.

Pain Review Course

P. Peng

This taskforce is co-chaired by Drs. Norman Buckley and Philip Peng. A review course emphasizing basic knowledge in chronic pain management is planned. The first course, to be held in Toronto in February 2009, will be a two-day meeting for frontline healthcare practitioners or trainees. The course will help improve participants understanding of the neurobiology and psychological aspects of pain, assessment strategies, pharmacological management, physical therapy, cognitive-behavioral therapy, and the use of complimentary therapy. A few specific syndromes will also be discussed.

Interprofessional Education

*A. Chakravrti
J. Watt-Watson*

This taskforce, co-chaired by Judy Watt-Watson and Anita Chakravrti, will focus on gathering education resources that will facilitate interprofessional learning about better pain management practices. After much group discussion, two strategies were identified:

- a) to survey the CPS membership for patient cases they would be willing to share for student teaching. The survey results will be used by the task force to create a repository of patient cases that can be used to enhance student education in all health science disciplines. All case studies would be credited to the contributing author and developed to promote interdisciplinary and interprofessional collaboration.
- b) to create a resource package that would help users promote the case for Pain Curricula in the Undergraduate and Postgraduate arenas for all health science disciplines. This resource package would be made available to anyone in the CPS who wishes to spearhead Pain Curriculum changes at any level in all health science disciplines. It would include a brief PowerPoint presentation, as well as, resources

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Education SIG (Cont'd)

and references on current statistics on the prevalence of pain, research supporting the acute to chronic pain process and spectrum, bioethical and medicolegal issues, relevant guidelines with the Canadian Council on Health Services Accreditation and current research documenting the lack of Pain education in our health science disciplines.

Although not discussed at the general SIG meeting, there will also be initiatives to survey the postgraduate curricula for Pain content, including content that promotes interdisciplinary understanding and interprofessional pain management practices.

RCPSC Pain Management Subspecialty and Curriculum Establishment

P. Morley-Forster

This taskforce is chaired by Dr. Patricia Morley-Forster.

One of the obstacles towards improving pain management in Canada is that, at the present time, there is minimal training and no standards of accreditation for doctors. This lags behind many other countries including the United Kingdom, Australia, the United States and several European countries. It is exciting to report that this situation is in the process of changing.

An application to the Royal College of Physicians and Surgeons of Canada to recognize Pain Medicine as a subspecialty of Anesthesiology has successfully passed Phase 1. This means the idea has been approved in principle, although it is still several years from reality. There are three phases in all; Phase 2 requires the creation of a curriculum and the determination of entry criteria. The Royal College is the national body with the authority to determine what constitutes a medical subspecialty and what the training requirements and examination process will be. Although the approach to Pain Management must be broadly interdisciplinary, it is being proposed as a subspecialty of Anesthesiology since it is easier to

move the process forward with the support of a "parent" discipline. Also, there is a historic connection of Pain Management to the discipline of Anesthesiology. As well, the Chairs of the University Departments of Anesthesiology strongly support the proposal.

A small Task Force has been created with regional representation from Anesthesiology, Psychiatry, Family Medicine, and Physiatry with the mandate to design the curriculum. Once this has been drawn up, the Royal College Committee on Subspecialties will seek wide consensus from many stakeholders (Phase 3) before final approval. One of the key issues is how to certify those with many years of experience in the field but no formal accreditation. Another challenge will be how to recognize the third year of training in Family Medicine Palliative Care. Optimistically, current timelines are that the curriculum will be designed in the next six months, and then reviewed by the Committee by May 2009. Following that, the Phase 3 process is expected to take a minimum of two years.

Residents in the specialties of Anesthesiology, Physical Medicine and Rehabilitation, Rheumatology, Neurology, Psychiatry, Pediatrics and Neurosurgery will be allowed to enter the training program in Pain Medicine. They must also pass qualifying examinations in their own specialty. Applicants from any other specialty in Internal Medicine, Surgery, and Emergency Medicine will also be considered. The program will be twelve months in total, and must include rotations in a university-affiliated multidisciplinary Pain Clinic, an Acute Pain Service, and a Cancer Pain Clinic. The content of the curriculum will generally follow guidelines set out by the International Association for the Study of Pain.

Although the process of creating Pain Medicine as a Subspecialty will be long, time-consuming and, at times, controversial, we are fortunate to have support from international colleagues who have already gone through the process. A meeting has been planned at the IASP in August with Deans of the Faculties of Pain Medicine in Australia, the UK and the USA to seek their advice on anticipating and overcoming obstacles.



the CANADIAN PAIN SOCIETY
la SOCIÉTÉ CANADIENNE de la DOULEUR

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Mark Your Calendars

Deadline for submission of materials for the next Newsletter is **September 30, 2008**. We are interested in receiving items on:

- Interesting case studies
- Programs of research
- New clinical programs or initiatives in pain
- Upcoming meeting announcements
- Book reviews

Please send correspondence to:

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Canadian Pain Society 2007

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The CPS Newsletter is published four times per year by the Canadian Pain Society. Comments and suggestions are welcome.

Don't forget

A special invitation is extended to our colleagues in Alberta and British Columbia to contribute news from your part of Canada.