Dear Friends of EFIC®!

Looking back at this year’s events, 2013 will go down as an important year in the history of EFIC: The 20th anniversary of EFIC’s foundation was properly celebrated by a dedicated book on “The first 20 Years” and with a very successful 8th Pain in Europe Congress in Florence, and the EFIC Council decided to change EFIC’s former official name (European Federation of IASP Chapters) to The European Pain Federation EFIC®. This will help us to show at a glance what the European Pain Federation EFIC® stands for: basic scientists and healthcare professionals, who are active in pain medicine. The well-established acronym EFIC was kept up, as was the requirement of being an IASP Chapter to be eligible for becoming also a regular EFIC Chapter.

Besides these two highlights, other landmark activities in 2013 should be remembered:

The 4th Societal Impact of Pain (SIP) Symposium held in the EU Parliament in Brussels, which resulted in the installment of an EFIC Taskforce on Quality Indicators for Good Pain Management, chaired by Prof. Rolf-Detlef Treede / Germany and Prof. Pedro Saturno / Spain. This taskforce has already started off in October and is expected by end of 2014 to elaborate a set of quality indicators that can be adapted and implemented by regional, national or international institutions and health care systems.

Another noteworthy outcome of SIP symposia is an in-depth evaluation of two previously presented integrated pain management programs by EU (B3 Integrated Care Action Group on Active and Healthy Ageing), with the potential result of becoming a Good Practice Template recommended by the EU Commission for large scale implementation in European health systems.

The key findings of the APPEAL study (Advancing the Provision of Pain Education And Learning) – a joint initiative of EFIC and Mundipharma International Ltd. – were presented during the 8th EFIC congress in Florence. This first Europe-wide landmark research project on the current state of undergraduate pain education has clearly shown the differences and deficits across Europe, and has led to a call to action. In this context, the “EFIC Pain Core Curriculum for Medical Schools in Europe” was recently published on the EFIC
website, and has triggered off translations into Polish, Russian, and Portuguese language by the respective EFIC Chapters. I would very much encourage all other Chapters to follow these good examples and to publish and spread authorized translations of the EFIC Curriculum in their countries.

In addition to the EFIC activities on undergraduate education, I am in contact with the UEMS for implementing better standards of pain management education into the postgraduate specialist training of various disciplines in Europe.

EFIC representatives are involved in many long-term projects, e.g. the IASP-EFIC Taskforce on ICD11, the Change Pain initiative with Grünenthal, the “Lifting-the Burden (LTB)" global campaign against headache, and - most recently – the "International Delphi Panel on Outcome Parameters in Multimodal Pain Therapy", which is led by the University Pain Centre in Dresden/Germany, and is funded by the German Federal Ministry of Education and Research (BMBF).

Finally, I am pleased to advertise the EFIC- Fondazione IBSA- Publication Award 2014 for the best original scientific article on pain, published in an international peer-reviewed journal by a young author under 40 years of age during 2013. The award amounts €2,500 and has been kindly sponsored by Fondazione IBSA for Scientific Research, Switzerland. For further details please see the announcement in this NEWSLETTER or visit the EFIC website.

With best wishes and Season’s Greetings,
Hans G. Kress
President of EFIC

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A Word from the Editor

Dear readership,

Over the past year important decisions were taken, new projects put on track and many ideas for future projects sprouted out of our dynamic federation. Also, our newsletter is growing both in content and in spreading. Meanwhile, many chapters proudly report their activities. New in this issue is the news from the European Journal of Pain (EJP), including the abstracts and references of some editor’s choice papers. We hope to stimulate your appetite to read and refer to the scientific journal of our federation. At the same time I hope that you are aware of your free online access to EJP. You only have to prove your membership in your national IASP chapter. It is our intention to inform you regularly about interesting papers, policy and news from the EJP. At the same time this is also an invitation for unsolicited contributions to our newsletter.

Best season’s greetings and have a good read!

Bart Morlion
Editor EFIC Newsletter
EYAP - European Year Against Pain 2013/2014: Orofacial Pain

During the Congress of the European Pain Federation EFIC in Florence, pain experts launched the „European Year Against Orofacial Pain“ which is dedicated to bringing more attention to an underestimated health problem. From October 2013 to October 2014, the campaign will highlight issues related to a broad range of pain symptoms which are felt in the mouth, jaws and the face.

"Although acute pain is often well treated, chronic pain is often neglected and unrelieved and the social cost is huge. Across the EU, chronic pain accounts for 500 million lost working days, costing the European economies more than 34 billion euros per year.¹ However, only 2% of patients see an appropriate specialist trained in chronic pain, and 33% remain without any treatment for their pain², according to Dr Chris Wells (Liverpool, UK), President Elect of the European Pain Federation EFIC.

"With this campaign, coordinated with the International Association for the Study of Pain, we devote an entire year to providing multifaceted information on one specific form of pain or particular issue related to pain", states Dr Wells. “The EAYP initiative aims at presenting pain in all its aspects and social consequences, at supporting pain sufferers and at informing the general public. But it is also meant to raise awareness among policy makers to prioritise the major challenge chronic pain poses to health systems."

Orofacial pain: An underestimated problem

This European Year Against Orofacial Pain from October 2013 to October 2014 focusses on a type of pain that many people have already experienced in its acute form, but that is largely underestimated in its chronic form.

"Orofacial pain is a general term covering any pain which is felt in the mouth, jaws and the face, with a broad range of possible causes and symptoms", Dr Wells explains. "This goes far beyond toothache, which nearly everybody has experienced at some point, including burdening chronic conditions such as jaw pain, burning mouth syndrome, trigeminal neuralgia or cluster headache. Chronic orofacial pain is a major health problem throughout the world. 7% of the population have chronic facial pain, persisting for more than three months."

An important proportion of cases of acute orofacial pain results from dental causes. "Nearly everybody has had toothache at some time," Dr Wells says. "Figures show that one in nine people have had toothache-like pain from some cause in the last month." This may be the reason why orofacial pain is a specialty in dentistry in some countries, according to Dr Wells: “Specialists have to diagnose the common causes of toothache such as dental caries, infection and tooth abscesses, as well as the rarer but often chronic pains that can manifest as toothache or facial pain.”

After dental pain, the second most common cause of orofacial pain is jaw pain (temporomandibular disorders, TMD), with an estimated prevalence of 5 to 10%. TMD alone costs $4 billion a year in the USA.³

Another example of chronic facial pain that is difficult to treat is burning mouth syndrome (BMS) which affects up to 1 in 100 people. "Once thought to be a psychological problem, cutting edge research has shown that

¹ European Pain Network: The EPN Manifesto
different types of dysfunctions, including nerve damage, are major factors, and complex medicine regimes can help,” Dr Wells explains.

“Two of the worst sorts of pain are trigeminal neuralgia (TGN), and cluster headache (CH) or migrainous neuralgia,” the expert adds. “Both are so severe that they can drive the sufferer to suicide.” TGN is an agonising condition, with severe shooting pain coming from light touch, wind on the face, or chewing. Attacks last for seconds or minutes, but can occur up to 70 times a day. “The condition can occur in one in three hundred people, usually in older people,” Dr Wells explains. “It only responds to special types of painkillers that affect nerve pain, such as carbamazepine or pregabalin. Research shows it is caused by a blood vessel in the brain pressing on a nerve. Oral surgery only makes things worse, but pain clinic and neurosurgical techniques, such as burning or freezing the nerve, or delicate brain surgery, can relieve the pain.”

Cluster headache (CH) occurs in young people, especially men, and during attacks some victims describe a feeling of a red hot poker being pushed into the face. The nose runs and the eye goes red, and attacks come in clusters, lasting for up to two months at a time. Dr Wells: “Unfortunately, treatment is ineffective in some patients.”

Orofacial chronic pain conditions can present diagnostic and management challenges to the clinician, according to Dr Wells. “Sometimes there are special treatments for these types of pain that can be delivered by specialist clinics; sometimes there is no specific treatment, but useful support can be offered with integrated management by dentists, pain clinicians and psychologists. This takes into account all the different factors building up the pain, including stress.”

This European Year Against Orofacial Pain aims to tell the public about these different types of orofacial pain, about the possibilities of treatment and to encourage them to seek appropriate help, Dr Wells underlined. “EFIC believes that better diagnosis, treatment and prevention of oral and cranio-facial pains will significantly improve the quality of life of patients and have a considerable socioeconomic impact.”

EFIC makes available fact sheets and patient information leaflets on different types of orofacial pain on their website. The campaign will be backed up by a broad variety of initiatives in the 36 countries covered by EFIC.

From EWAP to EYAP
In 2001, EFIC launched the European Week Against Pain (EWAP) at the European Parliament. Each year since then, EFIC’s national and regional chapters have held activities to sensitise stakeholders, the medical community and the general public about the issue of chronic pain. EWAP themes included cancer pain, headache, fibromyalgia and backache. From 2012 onwards, the event has been run together with IASP and been transformed into the “European Year Against Pain” (EYAP).

**APPEAL - Advancing the Provision of Pain Education and Learning**

The APPEAL (Advancing the Provision of Pain Education And Learning) study Expert Taskforce is responsible for carrying out the first Europe-wide study on pain education provision for undergraduate medical students which has been presented at the annual European Pain Federation EFIC congress in Florence on October 10th 2013.

This research was guided by a multi-disciplinary Taskforce of experts under the leadership of EFIC®, funded by Mundipharma International Limited and involved 242 undergraduate medical schools across 15 European countries. Set against a public health backdrop, which sees approximately 75 million adults in Europe affected by chronic pain, the objective of this important study was to understand how pain is taught and assessed at the undergraduate medical schools level in Europe, and to identify any opportunities for improvements.
The findings were striking – 82 per cent of undergraduate medical schools in Europe have no dedicated courses on pain that are compulsory for all students. Not only does this indicate the low priority that pain teaching has within the current undergraduate medical curricula, it also raises questions about whether future doctors are equipped to manage and treat one of the most common problems they will encounter in clinical practice. Even when compulsory courses on pain are in place, they represent on average only 12 hours within a degree programme; equivalent to just 0.2 per cent of an undergraduate medical teaching, based on the European Union’s Directive on minimum training hours for medical degrees (currently six years or 5,550 hours).

It is based on these, and the other detailed findings from the study, that the APPEAL Expert Taskforce calls on medical schools, pain specialists, medical students and relevant policymakers to ensure that pain education for undergraduate medical students across Europe is fit for purpose to address the current unmet public health need to adequately manage and treat pain.

Feel free to download more information on the APPEAL study from our website.

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**EFIC- Fondazione IBSA - Publication Award**

The EFIC - Fondazione IBSA - Publication Award sponsored by Fondazione IBSA for Scientific Research, Switzerland consists of € 2,500.- which will be given to a young first author of an excellent original article in the areas of pain research or pain medicine published in an international peer-reviewed journal in 2013.

**Eligibility**
- Applicant is the first author of a publication from a non-commercial institution (university, public research institute, hospital, etc.) in the area of pain research or pain medicine
- The paper must be published (in press or online) in an international peer-reviewed journal in 2013
- The applicant is under 40 years of age at the date of acceptance of the article by the journal
- The applicant's professional affiliation is in a European country
- The signed application along with a PDF copy of the paper is submitted to EFIC Headquarters Office by 15th March, 2014

For more information on the EFIC - Fondazione IBSA - Publication Award please visit the EFIC website.
Are you a subscriber of the European Journal of Pain? If not, you can still download the Editor’s Choice articles for free on the EJP website. Please read on to find out which articles are featured in this section in November 2013:

“TRPA1 and TRPV1 are differentially involved in heat nociception of mice”
By T. Hoffmann, K. Kistner, F. Miermeister, R. Winkelmann, J. Wittmann, M.J.M. Fischer, C. Weidner and P.W. Reeh
Volume 17, Issue 10, November 2013, Pages: 1472–1482

What is already known about this topic?
- TRPV1 is not the sole transducer of noxious heat.
- Several studies in submammalian species imply a role for TRPA1 in heat sensitivity.

What does this study add?
- TRPA1 contributes to heat nociception in mice.
- Deletion of TRPA1 or TRPV1 channels compromises heat responsiveness in differential ways without an additional additive effect of disrupting both genes.
- TRPA1/V1 double-knockout animals still display substantial heat responsiveness.

"Psychiatric comorbidities in patients with chronic peripheral neuropathic pain: a multicentre cohort study"
By F. Radat, A. Margot-Duclot and N. Attal
Volume 17, Issue 10, November 2013, Pages: 1547–1557

What is already known about this topic?
- The prevalence of psychiatric disorders has been mainly studied in chronic pain patients.
- There are no data concerning their prevalence specifically in patients suffering from neuropathic pain.

What does this study add?
- This multicentre study used validated structured interviews to evaluate the current and lifetime prevalence of a range of anxiety and mood disorders among patients with chronic peripheral neuropathic pain.
- Anxiety and mood disorders are highly prevalent in neuropathic pain patients and are associated with high levels of catastrophizing.

“The influence of patient sex, race, and depression on clinician pain treatment decisions”
By A.T. Hirsh, N.A. Hollingshead, M.J. Bair, M.S. Matthias, J. Wu and K. Kroenke
Volume 17, Issue 10, November 2013, Pages: 1569–1579

What is already known about this topic?
- Pain treatment often varies across patient's sex and race.
- Depression is common in patients with chronic pain and may influence clinicians' treatment decisions.

What does this study add?
- Patient's depression status influenced clinicians' medication and referral treatments for chronic pain; however, the nature of this influence varied considerably across individual clinicians.
- Patient's sex and race were influential for a smaller subset of clinicians.
- Clinicians who were influenced by patient's race had less experience in treating chronic pain than those who were not influenced.
Here is our report of our attendance of the EFIC Pain School 2013 held on September 1st-September 6th 2013 in Klagenfurt, Austria. Two anesthesiologists from Serbia, Dr Dusica Stamenkovic, PHD, Military Medical Academy, Belgrade, Serbia and Dr Sanja Vickovic, Klinicki Centar Vojvodina, Novi Sad, Serbia received the EFIC grant. We were supported by Serbia Association of Pain Research and Treatment (UITBS) as EFIC chapter and the President Prof. Mira Pjevic, MD, PHD.

We found the interactive form of presentations very interesting. Also the lectures were highly informative and included basics in pathophysiology and treatment of acute and chronic pain states, opioids and nonopioids. The lectures frequently featured case based discussions. Prof. Kress gave a short overview of the role of the European Pain Federation EFIC and the educational possibilities, including grants for fellowships in pain management, which is an opportunity for us to improve our knowledge especially in chronic pain treatment. Dr Schug's presentation in non-opioids was an excellent review of frequently used medications. The TENS workshop was helpful in explaining the method and its use in everyday practice.

One of the most interesting parts was our visit to the Pain and Palliative Care Clinic, organized and led by Prof. R. Likar. This visit was instructive and inspirational for us in order to find out more on how to organize and manage our own pain clinics. Different kinds of therapy including regional anesthesia and behavioral therapy were presented to us.

The EFIC Pain School gave us the opportunity to meet doctors involved in pain management from other specialties and countries. Interactive presentations and cases organized by Prof. R. Likar and Dr R. Sittl tested our knowledge on different topics and improved our way of solving pain problems. Moreover, social activities organized by our course directors, including visiting tour and dinner were a great experience to have socialize and exchange opinions with other participant.

We are extremely grateful to the EFIC Executive Board for giving us the opportunity to attend the EFIC Pain School which for us was an invaluable experience.
News from our Chapters

Mirror Therapy Training Workshop in Bosnia-Herzegovina

By Amira Karkin-Tais

The Association for the Treatment of Pain in Bosnia and Herzegovina and the CBR (Community Based Rehabilitation) of BiH, in cooperation with the "End The Pain Project", a non-profit organization located in the USA, provided BiH clinicians with a Mirror Therapy Training Workshop. The Workshop taught them how to eliminate or reduce phantom limb pain in amputees through an inexpensive, drug-free and safe method: The mirror therapy. Topics of the workshop included information on the nature of phantom limb pain, the significance of contractures and how to deal with patient's resistance.

Courses for Cancer and Neuropathic Pain in Kosovo

By Adem J. Bytyqi

The Professional Health Association in collaboration with the Ministry of Health of Kosovo, EFIC and IASP organized courses and workshops on the topic "Cancer and Neuropathic Pain" in the main centers of family medicine in the largest cities of Kosovo, Prizren and Pristina during September and October 2013.

A total of 80 family medicine physicians, family medicine specialist, internist, general practitioner doctors and specialists in occupational medicine attended. Lecturers included local experts for the treatment of pain. The course will continue in other centers in Kosovo.
The 8th Congress of the Polish Association for the Study of Pain

By Jan Dobrogowski

The 8th Congress of the Polish Association for the Study of Pain took place on 25-28 September 2013 in Zakopane, Poland. This year, more than 700 participants attended the Congress, representing both basic science and clinical practice and including medical doctors of different specialties, nurses, psychologists and physiotherapists interested in the problems of pain diagnosis and treatment. Our invitation to participate actively in this year's congress was accepted by outstanding specialists from Poland and honorary guests from abroad: Professor Hans Georg Kress - President of EFIC, Sir Professor Michael Bond, Professor Troels S. Jensen, Professor Joanna Zakrzewska, Professor Rami Burstein, Professor Zbigniew Żylicz and Professor Andrea Trescot.

Congress topics included the recent experimental and clinical scientific research, contributing to the development of pain medicine and improving the pain management in Poland. Apart from plenary sessions, the scientific program included presentations concerning the evidence-based pain medicine as well as functional and uncommon pain syndromes. Presentations concerning uncommon pain syndromes were a novelty in scientific program and were met with great interest, because of their importance from the clinical point of view. Participants were invited to take part in interactive workshops conducted by high-class specialists on the use of ultrasonography in pain diagnostics and treatment, as well as workshops on facial pain management and hypnotherapy.

Our invitation to participate in the congress was also accepted by Prof. Andrea Trescot from the US, who performed, as a pre-session, a number of cryolesion procedures in the Department of Orthopedics and Rehabilitation of Jagiellonian University in Zakopane. The procedures were broadcast live to the lecture hall and participants had the opportunity to study the principles and techniques of cryolesion in patients with different chronic pain syndromes. The multidisciplinary forum is highly grateful for outstanding lecturers, interesting presentations and workshops including various aspects of pain treatment met the participants’ expectations in terms of the scientific level as well as the social program.

16th Seminar on Pain of Slovenian Association for Pain Management

By Nevenka Krcevski Skvarc

The 6th Seminar on Pain was held in Ljubljana on 25-26 October 2013. The seminar was devoted to the issue of visceral pain, tying in nicely with the EYAP 2012/2013 theme. Twenty three presentations on the genesis, pathophysiology, epidemiology and management of visceral pain were presented by experts of various specialities including the presentation of young doctors, pain physicians, pathophysiologists, urologists,
gynecologists, gastroenterologists, cardiologists, neurologists, psychiatrists, immunologists and family physicians. In total, more than 100 participants attended.

The Seminar was enriched by international participants; this year, we had the privilege to host Asbjorn Mohr Drewes from Denmark and Rudolf Likar from Austria. We highly appreciate their contribution!

The end of the seminar was crowned by the round table on fibromyalgia where we presented the members of the Patients Association for Fibromyalgia, rheumatologists, the team for chronic pain rehabilitation and the representatives from health insurance. Together, steps for the improvement of comprehensive management and rehabilitation of patients with fibromyalgia were composed.

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**Activities of the British Pain Society in 2013**

By William Campbell

The UK chapter of EFIC has been involved in several projects over the past few years and several of these have seen their official launch this year.

Prof. Richard Langford was President at the time of most of the activities and indeed was instrumental in leading a couple of these. In particular he was responsible for making sure that the British Pain Society’s Pain Pathways, lead by Dr Andrew Baranoski, appeared on the Map of Medicine. A link to this can be seen at the [British Pain Society website](#). This piece of work involved 70 individuals from a variety of healthcare disciplines, as well as patient representatives for each of the five pathways.

The pathways cover initial assessment and early management of pain, spinal pain, pelvic pain, chronic widespread pain (including fibromyalgia), and neuropathic pain. These are interactive pathways with dropdowns providing further information and references at each part of the path.

A further project, jointly lead by the Faculty of Pain Medicine and the British Pain Society, is devoted to e-learning on pain. This project was supported by a Department of Health grant and has just started to become live this November. There are many modules covering assessment, through to pharmacological and non-pharmacological management of chronic pain, as well as pain management in unusual circumstances. I should stress that although the site is live many more self learning modules are due to appear on it over the coming months. It is intended for all healthcare professionals who come into contact with any patients who may be in pain, including nurses, physiotherapists and doctors. It is intended for non-specialists in pain management. The Faculty of Pain Medicine and the British Pain Society are greatly appreciative of the many hours of work that have gone into producing these modules.
Another project, which started 4 years ago, is the **National Pain Audit**. This was aimed at establishing the number and types of pain service that were available throughout England and Wales. This was followed by audits of the types of pain problem seen and the impact that it had on their lives. Outcome measures were evaluated after treatment at the pain services and this naturally illustrated an improvement in patient wellbeing but also a reduction in the need to attend accident and emergency services for recurrences or flare-ups in their pain. Updates will be loaded as they become available. The last report was launched at The House of Lords, Westminster, London this autumn, hosted by the **Chronic Pain Policy Coalition**, Chaired by Dr Beverly Collett.

Dr Cathy Price, who led the National Pain Audit over the past 4 years with support from Dr. Foster Intelligence.

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**Activities of the Portuguese Association for the Study of Pain (APED) in 2013**

By Francisco Duarte Correia

Throughout these last months, APED has promoted and indorsed several initiatives that intend to develop pain management in Portugal and in Mozambique.

**APED Digest** is a collection of publications of interest (Portuguese and foreign) that aims to provide APED members with important pain-related information in a single computerized readable edition, available on the APED website. The contest "Photography in Motion" intended to challenge the Portuguese citizens or foreigners residing in Portugal to submit an original photo that represents a positive attitude against pain. The main prize was a photo camera. The contest "drawing my pain" was organized by APED and awarded hospitalized children under the age of twelve with prizes. A short film for all Portuguese-speaking pain specialists on opioids is available on the **APED YouTube channel**.

Additionally, APED successfully held the 4th Interdisciplinary Pain Congress on October 17-19, 2013 in Porto. More than 450 medical doctors, physical therapists, nurses, psychologists, pharmacists, social workers, and other multidisciplinary health care providers attended. Attendees explored a wide range of topics, in six workshops, related to practical issues of pain practice. Lecture topics included pain and genetics, orofacial pain and neuromodulation. During this meeting, a plenary session, commemorating the Portuguese National Day of Fight Against Pain, and the Prizes and Grants Awards to the nominees also took place.
Meetings: Past and Future

Past Meetings

This report is going to concentrate mainly on the European Pain Federation EFIC congress in Florence from 9 - 12 October. However, I am going to mention an excellent and important annual meeting, followed by the World Institute of Pain, yearly, in Budapest. This year this took place from 26 - 28 August, inclusive, after which time there was a WIP exam on 29 August. This is an excellent meeting with didactic plenary sessions each morning of the three days, followed by an afternoon of instruction in the anatomy department at Budapest University. Here many types of interventional techniques are taught and examined on cadavers under the excellent instruction of some of the best interventional specialists throughout the world. Each year about 40 specialists take the Fellowship of Interventional Pain Practice examination, and between 20 and 30 are successful. This year was an excellent year with a high pass rate of virtually 75%. For those of you who are interested in furthering your expertise in interventions, do look out for this and other WIP interventional causes and consider attending them. This is a particularly nice course, as Gabor Racz has been running this for eighteen consecutive years and make sure that all the delegates, lecturers and instructors mix at all of the social evenings, which demonstrate the cultural side of Budapest and Hungarian music.

The European Pain Federation meeting in Florence attracted over 4,000 delegates, and although the majority were physicians, there was a wide range of attendees with many basic science and researchers coming and a reasonable cross-section of other paramedical personnel, including nurses and physiotherapists. Delegates came from all over the world with a chance of having a look at the beautiful city of Venice as well as a beautiful scientific programme put together by Oliver Wilder-Smith from Nijmegen in the Netherlands, and his hardworking scientific committee. The committee was particularly commended by Professor Hans Kress on behalf of the EFIC Executive Board and the EFIC Council. High attendance at all of the sessions reflected the scientific content.

Before the main meeting there was an excellent refresher course providing cutting edge updates on ten subjects. There was a chance to look at neurobiological mechanisms involved in pain regulation and the role of nerve iron channels and pain. There were in-depth sessions on persistent pain after surgery, headache pain syndromes, and difficult conditions, such as chronic Pancreatitis, neuropathic pain and Complex Regional Pain Syndrome.

The meeting itself was the 8th Pain in Europe Congress and celebrated 20 years of EFIC meetings and the motto was consequently '20 years of Building Bridges'. The first Pain in Europe meeting, launching EFIC as a pan-European society, was in Verona in 1993. The motto reflected on EFIC's role in building bridges in pain research and management. The meeting was emphatically multi-disciplinary, covering subjects from biomolecular science to interventional pain practice, including neuromodulation.

During the conference the European Pain Federation launched its Year Against Pain, this year in conjunction with the International Association for the Study of Pain. The important theme of Oro-Facial Pain was reflected in sessions in the programme and discussed at an extremely lively press conference with over 30 members of the world's press attending on the morning of Thursday 10 October. The conference covered not only the Year Against Pain, but also some of the exciting plenary sessions.
I had the honour of chairing the first plenary sessions and welcome Fernando Cervero to give the Ulf Lindblom special lecture on "Basic Science and Mechanisms of Visceral Pain". Fernando, originally from Spain and now working in Canada, is the President of IASP. I was fascinated by his stunning lecture on mechanisms of visceral pain, which also reflected on clinical matters as well as research and basic science. Visceral pain was the subject of EFIC’s last Year Against Pain. We then moved into the neural basis of pain motivation systems with Ben Seymour from Cambridge, but now working in Japan. We also had an excellent lecture from Maree Smith from Brisbane on pharmacogenetics, and how the way different metabolic routes and processes greatly alter individual responses to medication.

On the Friday we had two plenaries concentrating on visceral pain with Aziz translating the science research on visceral pain into treatment, and Haltman from Australia looking at the incidents of visceral pain and pointing out it was a silent epidemic. Sandwiched between these two was a superb lecture by Doug Gourlay from Canada looking at pain and dependency, especially to opioids and the universal precautions we should take to avoid placing our patients in a worse position after our treatment than they were in before. In this time of concern over the use of opioids for non-malignant pain, he pointed out we had to respect opioids rather than fear them. However, he stressed the many important steps we should take to ensure that our patients did not suffer from being prescribed these potentially excellent therapeutic agents.

We were also pleased to be able to present the Enrico Greppi Award with Professor Martelletti (Rome) awarding the prize for excellence in headache research.

On the last day the special lecture in memory of David Niv was given by Thomas Toelle on the brain and the opioidergic system. He also looked at monoaminergic systems in pain and the challenge of co-morbidities.

There were over 1200 poster presentations, and one of my duties was to be part of the team choosing poster prizes. This was extremely difficult and many excellent posters were unsuccessful. The Committee were looking for fresh and new ideas, well presented, and the three worthy winners were applauded at the closing ceremony and given their valuable awards.

There were many lively and stimulating topical seminars and workshops, and we also were treated to excellent updates in clinical pain research with a symposium organized by the EFIC Scientific Research Committee giving the results of the EFIC Grunenthal grants. The evening events were a chance to get out into the city (of course delegates could not go during the day because of the excellent scientific programme!). I particularly enjoyed the networking dinner in the splendid Palazzo Vecchio. This was held in the imposing Salone dei Cinquecento, built in 1494.

**Upcoming Meetings**

Winter seems a little quiet this year apart from important Chapter meetings, but we look forward to a meeting on multi-disciplinary pain research, the sixth meeting of SIMPAR, which will take place in Rome from 28 - 29 March 2014.
If you are interested in acute pain there is a meeting in Cologne in Germany from 29 - 30 November on Quality Management in Acute Pain Therapy.

Cancer pain and research needs are met with a meeting in Milan from 5 - 6 December, in memory of my good friend Geoff Hanks, and looks at the latest results concerning pain and Cachexia treatment. There will also be an update on the European Association of Palliative Care guidelines for treatment of cancer pain.

There is a hands-on cadaver workshop on behalf of the British Chapter of the World Institute of Pain and run by Mohammed Attar. This gives a chance to look at interventional practice.

Looking into the skiing season, there is a symposium in Tignes in France from 19 - 24 January 2014 with a week-long programme of lectures and debates early in the morning and later in the day, with a chance to research and network between times (or of course you could actually go skiing!).

Finally, for those interested in whiplash, there is a meeting at Aarhus in Denmark from 21 - 23 March 2014, which is the twelfth IASP research symposium on whiplash injury - A Model for the Development of Chronic Pain. This looks at neurobiological and psychosocial aspects of pain development after minor neck injuries.
How did you enjoy the EFIC Newsletter 04/2013? Let us know at newsletter@efic.org. We look forward to receiving your feedback on this issue.

If you wish to unsubscribe from the EFIC Newsletter, you can do so here.

The next EFIC Newsletter will be published in February 2013. The deadline for contributions is February 15, 2013. All contributions must be emailed to Bart Morlion at bart.morlion@uzleuven.be.

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