



RESEARCH
EDUCATION
TREATMENT
ADVOCACY

ITEM 1

Provide a detailed account of all payments/transfers received from corporations and any related corporate entities and individuals that develop, manufacture, produce, market, or promote the use of opioid-based drugs from 2009 to the present.

For each payment identified, provide:

- a. Date of Payment.
- b. Payment description (general support, project specific, etc.).
- c. Amount of payment.
- d. Year end or year-to-date payment total and cumulative total payments or individual.
- e. For each year a payment was received, the percentage of funding from organizations identified above relative to total revenue.

The following five-page spreadsheet, APS Industry Funding 2009-2012, details the amount of funding from each opioid-related company along with the purpose of the funds. The accompanying explanation of each purpose is meant to provide additional insight into how the funds are used. Since the timing of receipt of funds does not necessarily coincide with fiscal year expenditures, explanations are intentionally general.

American Pain Society | 4700 W. Lake Ave. | Glenview, IL 60025

Receipt Date	Company	Payor- if different from Company	Description	2009	2010	2011	2012	2013
07/22/2009	Covidien		Annual Meeting Exhibit Booth	14,400.00				
			Subtotal	14,400.00				
03/03/2009	Endo Pharmaceuticals Inc		Annual Meeting Exhibit Booth	14,100.00				
03/06/2009	Endo Pharmaceuticals Inc		General Support- Resident Pain Program	26,122.80				
03/25/2009	Endo Pharmaceuticals Inc		Corporate Support	6,000.00				
04/09/2009	Endo Pharmaceuticals Inc	MK Medical Communications LLC	Annual Meeting Advertising - Room Drop	3,000.00				
04/20/2009	Endo Pharmaceuticals Inc		Product Sale - Principles of Analgesic Use Guide 6th Edition	1,500.19				
04/27/2009	Endo Pharmaceuticals Inc		Annual Meeting Exhibit Booth Badge	475.00				
04/28/2009	Endo Pharmaceuticals Inc		Product Sale - Principles of Analgesic Use Guide 6th Edition	623.65				
04/30/2009	Endo Pharmaceuticals Inc		General Support- Clinical Centers Of Excellence	25,000.00				
07/06/2009	Endo Pharmaceuticals Inc	MK Medical Communications LLC	Annual Meeting Advertising - Program Book	1,940.13				
08/25/2009	Endo Pharmaceuticals Inc		General Support - Small Research Grants Program	55,000.00				
11/16/2009	Endo Pharmaceuticals Inc		General Support- Resident's Course	408,180.40				
12/07/2009	Endo Pharmaceuticals Inc	MK Medical Communications LLC	General Support - Annual Meeting Symposia	55,000.00				
12/23/2009	Endo Pharmaceuticals Inc		General Support- Resident's Course	203,875.00				
			Subtotal	800,817.17				
02/03/2009	Janssen Pharmaceuticals Inc		Corporate Support	6,000.00				
02/26/2009	Janssen Pharmaceuticals Inc		Annual Meeting Exhibit Booth	2,350.00				
03/27/2009	Janssen Pharmaceuticals Inc	SynchrMed Communications	Annual Meeting Advertising - Room Drop	3,000.00				
06/19/2009	Janssen Pharmaceuticals Inc		General Support - Clinical Centers of Excellence Program	2,500.00				
07/09/2009	Janssen Pharmaceuticals Inc		Annual Meeting Exhibit Booth	9,600.00				
11/16/2009	Janssen Pharmaceuticals Inc		Annual Meeting Exhibit Booth	9,600.00				
			Subtotal	33,050.00				
03/02/2009	King Pharmaceuticals		Annual Meeting Exhibit Booth	1,175.00				
03/02/2009	King Pharmaceuticals		Annual Meeting Exhibit Booth	9,400.00				
03/17/2009	King Pharmaceuticals	Integrity Continuing Education	General Support- Annual Meeting	5,000.00				
04/30/2009	King Pharmaceuticals	Integrity Continuing Education	Annual Meeting Advertising - Room Drop	3,000.00				
06/29/2009	King Pharmaceuticals	Integrity Continuing Education	Annual Meeting Exhibit Booth	1,200.00				
06/29/2009	King Pharmaceuticals		Annual Meeting Exhibit Booth	9,600.00				
06/30/2009	King Pharmaceuticals	Integrity Continuing Education	Annual Meeting Advertising - Program Book	1,763.75				
07/08/2009	King Pharmaceuticals		Corporate Support	6,000.00				
11/19/2009	King Pharmaceuticals	PharmaCom Group Inc	General Support- Annual Meeting	55,000.00				
11/30/2009	King Pharmaceuticals	Integrity Continuing Education	General Support - Annual Meeting Symposia	55,000.00				
			Subtotal	150,138.75				
01/26/2009	Purdue Pharma		Elizabeth Narcessian Award	3,050.00				
01/27/2009	Purdue Pharma		General Support - Annual Meeting	15,000.00				
03/23/2009	Purdue Pharma		Annual Meeting Exhibit Booth	47,000.00				
03/27/2009	Purdue Pharma		Annual Meeting- Corporate Showcase	5,000.00				
04/27/2009	Purdue Pharma		General Support - Clinical Centers of Excellence Program	25,000.00				
05/06/2009	Purdue Pharma		Sponsorship - Encaps	45,000.00				
05/12/2009	Purdue Pharma		Annual Meeting Advertising - Room Drop	4,500.00				
08/25/2009	Purdue Pharma		Corporate Support	6,000.00				
12/22/2009	Purdue Pharma		Elizabeth Narcessian Award	3,465.00				
			Subtotal	154,015.00				
02/04/2009	Xanodyne Pharmaceutical Inc		Annual Meeting Exhibit Booth	18,800.00				
04/24/2009	Xanodyne Pharmaceutical Inc		Annual Meeting Support - Tote bags	15,000.00				

Receipt Date	Company	Payor- if different from Company	Description	2009	2010	2011	2012	2013
			Subtotal	33,800.00				
			2009 Total	1,186,220.92				
			% of Total Revenue	34%				
02/23/2010	Covidien	Haymarket Media Inc	Annual Meeting Support of Non CME Session		55,000.00			
03/09/2010	Covidien	PRi Healthcare Solutions	Annual Meeting Advertising - Room Drop		3,000.00			
04/07/2010	Covidien		Annual Meeting Exhibit Booth		33,600.00			
11/09/2010	Covidien		Annual Meeting Exhibit Booth		15,000.00			
			Subtotal		106,600.00			
01/27/2010	Endo Pharmaceuticals Inc		Annual Meeting Exhibit Booth		14,400.00			
03/10/2010	Endo Pharmaceuticals Inc		Corporate Support		6,000.00			
04/13/2010	Endo Pharmaceuticals Inc		Annual Meeting Advertising - Room Drop		3,000.00			
04/26/2010	Endo Pharmaceuticals Inc	Miller Medical Communications	Annual Meeting Advertising - Room Drop		3,000.00			
04/27/2010	Endo Pharmaceuticals Inc		Product Sale - Principles of Analgesic Use Guide 6th Edition		546.99			
04/27/2010	Endo Pharmaceuticals Inc		Product Sale - Principles of Analgesic Use Guide 6th Edition		4,617.99			
06/14/2010	Endo Pharmaceuticals Inc		Annual Meeting Advertising - Program Book		2,040.00			
08/24/2010	Endo Pharmaceuticals Inc		General Support - REMS Summit		20,000.00			
10/29/2010	Endo Pharmaceuticals Inc	Miller Medical Communications	General Support - Annual Meeting Symposia		60,000.00			
			Subtotal		113,604.98			
03/19/2010	Janssen Pharmaceuticals Inc	Prescribe Responsibly - PriCara	Annual Meeting Exhibit Booth		2,400.00			
03/29/2010	Janssen Pharmaceuticals Inc	Rockpointe Corporation	General Support- Annual Meeting		55,000.00			
04/01/2010	Janssen Pharmaceuticals Inc		Corporate Support		6,000.00			
04/15/2010	Janssen Pharmaceuticals Inc	Rockpointe Corp	Annual Meeting Advertising - Room Drop		3,000.00			
04/19/2010	Janssen Pharmaceuticals Inc		General Support - Strategies in Pain Management		15,000.00			
05/25/2010	Janssen Pharmaceuticals Inc		Annual Meeting Exhibit Booth		10,000.00			
06/04/2010	Janssen Pharmaceuticals Inc	Decile Ten Communications	Annual Meeting- support cancellation fee		1,000.00			
			Subtotal		92,400.00			
01/13/2010	King Pharmaceuticals		Annual Meeting Exhibit Booth		10,800.00			
01/19/2010	King Pharmaceuticals		General Support- Annual Meeting		50,000.00			
01/19/2010	King Pharmaceuticals		General Support- Annual Meeting		86,000.00			
04/05/2010	King Pharmaceuticals	PharmaCom Group Inc	Annual Meeting Advertising - Room Drop		3,000.00			
04/19/2010	King Pharmaceuticals	Integrity Continuing Education	Annual Meeting Advertising - Voicemail Message		5,000.00			
04/21/2010	King Pharmaceuticals		Annual Meeting Advertising - Room Drop		1,000.00			
04/21/2010	King Pharmaceuticals		Annual Meeting Advertising - Room Drop		2,000.00			
04/21/2010	King Pharmaceuticals		Annual Meeting Advertising - Room Drop		3,000.00			
05/04/2010	King Pharmaceuticals	Integrity Continuing Education	Annual Meeting Advertising - Room Drop		3,000.00			
05/26/2010	King Pharmaceuticals	Catalyst Agency	Annual Meeting Advertising - Program Book		1,940.13			
06/03/2010	King Pharmaceuticals		Corporate Support		6,000.00			
10/08/2010	King Pharmaceuticals	Discovery Institute of Medical Education	General Support - Annual Meeting Symposia		60,000.00			
			Subtotal		231,740.13			
02/02/2010	Purdue Pharma		Annual Meeting Exhibit Booth		24,000.00			
03/09/2010	Purdue Pharma		Annual Meeting- Corporate Showcase		5,000.00			
04/01/2010	Purdue Pharma	Educational Awareness Solutions	Annual Meeting Advertising - Room Drop		3,000.00			
04/14/2010	Purdue Pharma		General Support - Strategies in Pain Management		15,000.00			
04/19/2010	Purdue Pharma		Annual Meeting Advertising - Room Drop		3,000.00			
04/19/2010	Purdue Pharma		Annual Meeting Advertising - Room Drop		3,000.00			
04/19/2010	Purdue Pharma		Annual Meeting Support - Cyber Cafes		15,000.00			

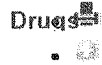
Receipt Date	Company	Payor- if different from Company	Description	2009	2010	2011	2012	2013
04/29/2010	Purdue Pharma		General Support - Small Research Grants Program		25,000.00			
05/04/2010	Purdue Pharma		General Support - Clinical Centers of Excellence Program		25,000.00			
05/13/2010	Purdue Pharma		Annual Meeting- Corporate Showcase		3,000.00			
05/28/2010	Purdue Pharma		Sponsorship - Enews		45,000.00			
09/13/2010	Purdue Pharma		Corporate Support		6,000.00			
12/06/2010	Purdue Pharma		Annual Meeting- Corporate Showcase		10,000.00			
			Subtotal		182,000.00			
02/24/2010	Xanodyne Pharmaceutical Inc		Annual Meeting Exhibit Booth		19,200.00			
12/24/2010	Xanodyne Pharmaceutical Inc		Annual Meeting Exhibit Booth		15,000.00			
			Subtotal		34,200.00			
			2010 Total Revenue		760,545.11			
			% of Total Revenue		21%			
05/23/2011	Covidien	Educational Awareness Solutions	Annual Meeting Advertising - Room Drop			1,500.00		
07/06/2011	Covidien		General Support - Pain Day			10,000.00		
			Subtotal			11,500.00		
02/01/2011	Endo Pharmaceuticals Inc		General Support- Resident's Course			418,779.40		
03/23/2011	Endo Pharmaceuticals Inc		Annual Meeting Exhibit Booth Badge			15,000.00		
04/14/2011	Endo Pharmaceuticals Inc		Corporate Support			25,000.00		
04/28/2011	Endo Pharmaceuticals Inc	Miller Medical Communications	Annual Meeting Advertising - Room Drop			3,000.00		
05/06/2011	Endo Pharmaceuticals Inc		General Support - Small Research Grants Program			25,000.00		
05/20/2011	Endo Pharmaceuticals Inc		General Support - Pain Day			15,000.00		
07/25/2011	Endo Pharmaceuticals Inc	Miller Medical Communications	Annual Meeting Advertising - Program Book			2,040.00		
			Subtotal			503,819.40		
01/10/2011	Janssen Pharmaceuticals Inc		Annual Meeting Exhibit Booth			10,000.00		
03/16/2011	Janssen Pharmaceuticals Inc	Haymarket Media Inc	Annual Meeting Support of Non CME Session			55,000.00		
04/12/2011	Janssen Pharmaceuticals Inc		General Support - Pain Day			10,000.00		
04/19/2011	Janssen Pharmaceuticals Inc	Haymarket Media Inc	Annual Meeting Advertising - Voicemail Message			5,000.00		
04/19/2011	Janssen Pharmaceuticals Inc	Rockpointe Corporation	General Support - Annual Meeting Symposia			65,000.00		
05/03/2011	Janssen Pharmaceuticals Inc	Haymarket Media Inc	Annual Meeting Advertising - Room Drop			3,000.00		
06/28/2011	Janssen Pharmaceuticals Inc		Corporate Support			7,500.00		
06/28/2011	Janssen Pharmaceuticals Inc	PRI Healthcare Solutions	Annual Meeting Advertising - Program Book			1,763.75		
			Subtotal			157,263.75		
03/31/2011	King Pharmaceuticals	Discovery Institute of Medical Education	Annual Meeting Advertising - Room Drop			3,000.00		
05/11/2011	King Pharmaceuticals		Corporate Support			7,500.00		
07/11/2011	King Pharmaceuticals	Discovery Institute of Medical Education	Annual Meeting Advertising - Program Book			1,763.75		
			Subtotal			12,263.75		
01/26/2011	Mallinckrodt Inc		Annual Meeting Exhibit Booth			5,000.00		
			Subtotal			5,000.00		
01/19/2011	Purdue Pharma		Annual Meeting Exhibit Booth			20,000.00		
02/10/2011	Purdue Pharma		Elizabeth Narcession Award			3,465.00		
04/11/2011	Purdue Pharma		2011 Label Order			625.00		
04/11/2011	Purdue Pharma		Annual Meeting Support - Cyber Cafes			15,000.00		
04/19/2011	Purdue Pharma		General Support - Pain Day			15,000.00		
04/22/2011	Purdue Pharma		Sponsorship - Enews			45,000.00		
05/17/2011	Purdue Pharma		General Support - Annual Meeting			15,000.00		
05/23/2011	Purdue Pharma	Educational Awareness Solutions	Annual Meeting Advertising - Room Drop			1,500.00		

Receipt Date	Company	Payor- if different from Company	Description	2009	2010	2011	2012	2013
05/25/2011	Purdue Pharma	Educational Awareness Solutions	General Support - Annual Meeting Symposia			50,000.00		
06/07/2011	Purdue Pharma		Annual Meeting Advertising - Room Drop			3,000.00		
06/07/2011	Purdue Pharma		Annual Meeting Advertising - Room Drop			3,000.00		
06/15/2011	Purdue Pharma		General Support - Small Research Grants Program			10,000.00		
07/18/2011	Purdue Pharma		Corporate Support			1,875.00		
			Subtotal			183,465.00		
			2011 Total Revenue			873,311.90		
			% of Total Revenue			25%		
12/19/2011	Abbott Laboratories		Corporate Support				7,500.00	
			Subtotal				7,500.00	
6/15/2012	Actavis		Corporate Support				15,000.00	
			Subtotal				15,000.00	
2/7/2012	Covidien Mallinckrodt		Corporate Support				7,500.00	
			Subtotal				7,500.00	
12/28/2011	Endo Pharmaceuticals Inc		Corporate Support				10,000.00	
12/28/2011	Endo Pharmaceuticals Inc		Corporate Support				10,000.00	
12/28/2012	Endo Pharmaceuticals Inc		Corporate Support				5,000.00	
5/1/2012	Endo Pharmaceuticals Inc		Corporate Support				10,000.00	
10/31/2012	Endo Pharmaceuticals Inc		General Support- Resident's Course				44,200.00	
2/22/2012	Endo Pharmaceuticals Inc		General Support- Resident's Course				43,250.00	
2/22/2012	Endo Pharmaceuticals Inc		General Support- Resident's Course				163,700.00	
2/22/2012	Endo Pharmaceuticals Inc		General Support- Resident's Course				212,357.01	
			Subtotal				498,507.01	
6/20/2012	Janssen Pharmaceutica Inc	decile ten communications	Non-CME symposia				60,000.00	
4/30/2012	Janssen Pharmaceutica Inc		Corporate Support				7,500.00	
3/16/2012	Janssen Pharmaceutica Inc		Annual Meeting Exhibit Booth				5,000.00	
			Subtotal				72,500.00	
1/9/2012	Purdue		Annual Meeting Exhibit Booth				15,000.00	
1/11/2012	Purdue		Corporate Support				10,000.00	
1/11/2012	Purdue		Corporate Support				5,000.00	
5/2/2012	Purdue Pharma		General Support- Annual Meeting				15,000.00	
4/10/2012	Purdue Pharma		General Support- Annual Meeting				15,000.00	
4/16/2012	Purdue	Vemco Meded LLC	General Support- Annual Meeting				5,000.00	
4/16/2012	Purdue	Vemco Meded LLC	General Support- Annual Meeting				10,000.00	
4/16/2012	Purdue	Vemco Meded LLC	General Support- Annual Meeting				10,000.00	
5/16/2012	Purdue		General Support - Clinical Centers of Excellence Program				5,000.00	
5/16/2012	Purdue		Sponsorship - Enews				45,000.00	
5/16/2012	Purdue Pharma		Elizabeth Narcessian Award				3,465.00	
5/24/2012	Purdue		Annual Meeting Advertising - Room Drop				3,500.00	
7/20/2012	Purdue Pharma		General Support- Annual Meeting				25,000.00	
			Subtotal				166,965.00	
1/17/2012	Teva Pharmaceuticals		Annual Meeting Advertising - Room Drop				3,500.00	
1/17/2012	Teva Pharmaceuticals		Annual Meeting Exhibit Booth				5,000.00	
3/9/2012	Teva Pharmaceuticals		Annual Meeting Exhibit Booth				5,000.00	
3/9/2012	Teva Pharmaceuticals		Annual Meeting Exhibit Booth				5,000.00	
3/9/2012	Teva Pharmaceuticals		Annual Meeting Exhibit Booth				5,000.00	

Receipt Date	Company	Payor- if different from Company	Description	2009	2010	2011	2012	2013
5/21/2012	Teva Pharmaceuticals		General Support- Annual Meeting				25,000.00	
4/5/2012	Teva Pharmaceuticals		General Support- Annual Meeting				15,000.00	
5/2/2012	Teva Pharmaceuticals		General Support- Annual Meeting				50,000.00	
4/13/2012	Teva Pharmaceuticals		General Support- Annual Meeting				25,000.00	
11/13/2012	Teva Pharmaceuticals		Annual Meeting Exhibit Booth				5,000.00	
11/19/2012	Teva Pharmaceuticals		Annual Meeting Exhibit Booth				10,000.00	
			Subtotal				153,500.00	
			2012 Total Revenue				921,472.01	
			% of Total Revenue				30 %	
2/27/2013	Covidien Mallinckrodt		Corporate Support					7,500.00
			Subtotal					7,500.00
2/6/2013	Endo Pharmaceuticals Inc		General Support- Resident's Course					132,440.00
2/6/2013	Endo Pharmaceuticals Inc		General Support- Resident's Course					240,634.10
4/15/2013	Endo Pharmaceuticals Inc		Corporate Support					10,000.00
			Subtotal					383,074.10
2/21/2013	Mallinckrodt Inc		Annual Meeting Exhibit Booth					5,000.00
2/21/2013	Mallinckrodt Inc		Annual Meeting Exhibit Booth					10,000.00
5/6/2013	Mallinckrodt Inc		Annual Meeting Advertising - Room Drop					3,500.00
			Subtotal					18,500.00
4/16/2013	Merck & Company		Annual Meeting Exhibit Booth					2,500.00
			Subtotal					2,500.00
2/7/2013	Pfizer Inc		General Support - Annual Meeting Symposia					75,000.00
3/5/2013	Pfizer Inc		Annual Meeting Advertising - Program Book					2,600.00
4/2/2013	Pfizer Inc		Grant					25,000.00
5/23/2013	Pfizer Inc		Kerr Award					12,000.00
			Subtotal					114,600.00
1/24/2013	Purdue Pharma LP		Corporate Support					5,000.00
1/24/2013	Purdue Pharma LP		Corporate Support					10,000.00
2/1/2013	Purdue Pharma LP		Annual Meeting Exhibit Booth					5,000.00
2/21/2013	Purdue Pharma LP		General Support- Annual Meeting					10,000.00
3/27/2013	Purdue Pharma LP		Sponsorship - Enews					45,000.00
4/11/2013	Purdue Pharma LP		Annual Meeting Advertising - Room Drop					3,500.00
4/11/2013	Purdue Pharma LP		General Support - Clinical Centers of Excellence Program					5,000.00
4/11/2013	Purdue Pharma LP		Grant					20,000.00
4/17/2013	Purdue Pharma LP		Elizabeth Narcessian Award					3,480.00
5/17/2013	Purdue Pharma LP		Annual Meeting Advertising - Room Drop					3,500.00
5/30/2013	Purdue Pharma LP		General Support - Small Research Grants Program					10,000.00
			Subtotal					120,480.00
4/18/2013	Teva		General Support- Annual Meeting					50,000.00
4/24/2013	Teva		General Support - Clinical Centers of Excellence Program					15,000.00
			Subtotal					65,000.00
			2013 Total Revenue					711,654.10
			% of Total Revenue					19 %



U.S. Food & Drug Administration


[Home](#) [Drugs](#) [Drug Safety and Availability](#) [Information by Drug Class](#)

List of Long-Acting and Extended-Release Opioid Products Required to have an Opioid REMS

Brand Name Products		Generic Name	Sponsor
	Trade Name		
1	Duragesic	Fentanyl Transdermal System	Ortho McNeill Janssen
2	*Palladone	Hydromorphone hydrochloride extended-release capsules	Purdue Pharma
3	Dolophine	Methadone hydrochloride tablets	Roxanne
4	Avinza	Morphine sulfate extended-release capsules	King Pharms
5	Kadian Capsules	Morphine sulfate extended-release capsules	Actavis
6	MS Contin	Morphine sulfate controlled-release tablets	Purdue Pharma
7	Oramorph	Morphine sulfate sustained-release tablets	Xanodyne Pharms
8	*Embeda	Morphine sulfate and naltrexone extended-release capsules	King Pharms
9	OxyContin	Oxycodone hydrochloride controlled-release tablets	Purdue Pharma
10	Opana ER	Oxymorphone hydrochloride extended-release tablets	Endo Pharma
11	Exalgo	Hydromorphone hydrochloride extended-release tablets	Mallinckrodt
12	Butrans	Buprenorphine Transdermal System	Purdue Pharma
13	Nucynta	Tapentadol hydrochloride	Janssen Pharmaceuticals

*No longer being marketed, but is still approved.

Generic Products		Generic Name	Sponsor
	Drug Name		
1	Fentanyl	Fentanyl Extended-release Transdermal System	Actavis
2	Fentanyl	Fentanyl Extended-release Transdermal System	Lavipharma Labs
3	Fentanyl	Fentanyl Extended-release Transdermal System	Mallinckrodt
4	Fentanyl	Fentanyl Extended-release Transdermal System	Mylan Technologies
5	Fentanyl	Fentanyl Extended-release Transdermal System	Noven
6	Fentanyl	Fentanyl Extended-release Transdermal System	Teva Pharms
7	Fentanyl	Fentanyl Extended-release Transdermal System	Watson
8	Methadone Hydrochloride	Methadone Hcl Tablets	The Pharamanetwork
9	Methadone Hydrochloride	Methadone Hcl Tablets	Mallinckrodt
10	Methadone Hydrochloride	Methadone Hcl Tablets	Sandoz
11	Methadone Hydrochloride	Methadone Hcl Oral Solution	Roxane
12	Methadone Hydrochloride	Methadone Hcl Oral Solution	Vistapharm
13	Morphine Sulfate	Morphine Sulfate Extended-release Tablets	Endo
14	Morphine Sulfate	Morphine Sulfate Extended-release Tablets	KV Pharmaceuticals
15	Morphine Sulfate	Morphine Sulfate Extended-release Tablets	Mallinckrodt
16	Morphine Sulfate	Morphine Sulfate Extended-release Tablets	Watson Labs
17	Morphine Sulfate	Morphine Sulfate Extended-release Tablets	Rhodes
18	Oxycodone Hydrochloride	**Oxycodone Hcl Extended-release Tablets	Mallinckrodt
19	Oxycodone Hydrochloride	** Oxycodone Hcl Extended-release Tablets	Impax Labs

APS-MDL00000007

20	Oxycodone Hydrochloride	** Oxycodone Hcl Extended-release Tablets	Teva
21	Oxycodone Hydrochloride	**Oxycodone Hcl Extended-release Tablets	Endo
22	Oxymorphone Hydrochloride	Oxymorphone Hcl Extended-release Tablets	Impax
23	Oxymorphone Hydrochloride	Oxymorphone Hcl Extended-release Tablets	Actaivs

** Tentatively Approved products

[Back to Opioid Drugs and REMS page¹](#)

Links on this page:

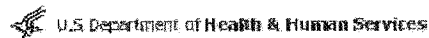
1. </Drugs/DrugSafety/InformationbyDrugClass/ucm163647.htm>

- [Accessibility](#)
- [Contact FDA](#)
- [Careers](#)
- [FDA Basics](#)
- [FOIA](#)
- [No Fear Act](#)
- [Site Map](#)
- [Transparency](#)
- [Website Policies](#)

U.S. Food and Drug Administration
10903 New Hampshire Avenue
Silver Spring, MD 20993
Ph. 1-888-INFO-FDA (1-888-463-6332)
Email FDA



- [For Government](#)
- [For Press](#)
- [Combination Products](#)
- [Advisory Committees](#)
- [Science & Research](#)
- [Regulatory Information](#)
- [Safety](#)
- [Emergency Preparedness](#)
- [International Programs](#)
- [News & Events](#)
- [Training and Continuing Education](#)
- [Inspections/Compliance](#)
- [State & Local Officials](#)
- [Consumers](#)
- [Industry](#)
- [Health Professionals](#)



APS-MDL00000008

Education

Annual Scientific Meeting

In May of each year, the American Pain Society convenes an Annual Scientific Meeting that usually draws 1,200 to 1,400 attendees from the United States, Canada, Europe, South America, and Asia, depending on the location within the United States. Typically, between 300 and 400 peer-reviewed scientific posters are displayed as part of the meeting. Corporate satellite symposia are held in conjunction with the Annual Scientific Meeting and industry partners representing varied facets of pain research and treatment are available in the exhibit hall. The three-and-a-half day meeting offers continuing education credit for physicians, nurses, pharmacists, and psychologists. The American Pain Society is accredited by the American Council for Continuing Medical Education (ACCME), the American Nurses Credentialing Center (ANCC), the Accreditation Council for Pharmacy Education (ACPE), and the American Psychological Association (APA). As such, APS adheres to the guidelines and standards set forth by each accrediting body for the planning and implementation of educational activities, including the ACCME's Standards for Commercial Support. The APS Scientific Program Committee (SPC), which works in conjunction with the APS Education Advisory Committee (EAC), is responsible for selecting and planning the educational content for the Annual Scientific Meeting. The EAC identifies practice and research gaps that are of interest to the membership and the pain community at large and requests that the SPC consider educational proposals that address these topics. The SPC puts forth a Call for Symposia for the Annual Scientific Meeting, and the majority of proposals are submitted by APS members and other pain professionals via this mechanism. Identified topic areas are posted within the Call for Symposia. Similarly, corporate satellite symposia are submitted via a separate Call for Corporate Satellite Symposia system. Both submission processes are conducted online; the SPC reviews all proposals online, scores each according to an established set of rating criteria, and then discusses all proposals in person during a live planning meeting. Accepted proposals for Corporate Satellite Symposia are planned by a medical education company or companies and are not planned by APS staff or committee members. Organizers of accepted Corporate Satellite Symposia are responsible for identifying accredited continuing education providers to provide all four types of education credit (physician, nursing, pharmacy, and psychology) for the satellite events.



RESEARCH
EDUCATION
TREATMENT
ADVOCACY

APS 31st Annual Scientific Meeting Schedule of Events



General Information

Refer to your APS program book for full session abstracts, objectives, faculty disclosures, and a faculty index. Refer to *The Journal of Pain* abstract supplement for full poster abstracts, poster numbers, and the author index.

Please note that the session locations are indicated by "Room #" within the schedule. Symposia and workshop session code numbers are similar to the room numbers/locations, so please be sure to check that you are looking at the room numbers when determining where to go within the convention center. All events take place at the Hawaii Convention Center unless otherwise noted.

Wednesday, May 16

2-4 pm

SIG Meetings

(120) Basic Science

Room #: 314

(121) Nursing Issues

Sinason, Jacob, Jungquist

Room #: 319

(122) Measurement of Pain and its Impact

Room #: 315

(123) Pain Rehabilitation

Room #: 318

(124) Palliative Care

Room #: 323A

(125) Psychosocial Research

Room #: 317

4-4:30 pm

State of the Society

Room #: 315

4-6 pm

Exhibits Open

Room #: Hall II

4:30-6 pm

Opening Reception with Exhibits and Posters

(Odd numbered posters only, not author attended)

Room #: Hall II

6:30-10 pm

Chronic Migraine Regional Injection Training Meeting

Room #: Hilton Hawaiian Village

Thursday, May 17

7-7:15 am

Welcome to the APS Meeting

Sluka

Room #: Ballroom AB

7:15-7:45 am

Keynote Address

(101) Evolving Models of Health Care

Delivery: Opportunities and Obstacles for Pain Care

Carr

Room #: Ballroom AB

7:45-8:15 am

Plenary Lecture

(102) Translating Her Opioids into His Opioids

Levine

Room #: Ballroom AB

8-10:30 am

Exhibits Open

Room #: Hall II

8:15-10 am

Break with Exhibits and Posters

(Odd numbered posters, author attended session from 8:15-9:45 am)

Room #: Hall II

10-11:30 am

Symposia

(301) APS Guidelines for Managing

Postoperative Pain: Evidence, Gaps, and

Translation into Practice

Manworren, Walco, Chou, de Leon Casasola

Room #: 314

(302) Maladaptive Brain Plasticity in the Transition to Chronic Pain

Neugebauer, Apkarian, Borsook, Seminowicz

Room #: 315

(303) Virtual Reality and Pain Management

Gold, Law, Mackey, Patterson, Thomas
Room #: 318

(304) Chemokine-Mediated Induction of Chronic Inflammatory and Neuropathic Pain

Dougherty, White, Kavelaars
Room #: 319

(305) Translating Opioid Research Findings into Clinical Practice: Practical Barriers and Ethical Implications

Damall, Ballantyne, Argoff, Schatman
Room #: 317

(306) G Protein-Coupled Receptors as Targets for Novel Analgesics

Wilcox, Hazelwood, Hohmann
Room #: 323A

11:45 am–1 pm

Non-CE Lunch Corporate Satellite Symposia

Pain Treatment, Abuse, Addiction, and Psychiatric Comorbidities: Latest Thinking and Future Treatment Possibilities

Webster, Passik, Gauvin
Room #: 313

Pathophysiology of Pain: Processes, Plasticity, and Perception

Room #: 316

1:15–2:45 pm

Symposia

(307) Understanding Mechanisms and Impact of Migraine in the Global Year Against Headache

Dussor, De Felice, Charles
Room #: 317

(308) The Ripple Effect: Systems-Level Interventions to Ameliorate Pediatric Pain

Weisman, Gulte, Logan, Ely
Room #: 323A

(309) Pain Sensitization in the Periphery: Should We Mine New Pain-Transducing Ion Channels or Focus on Specific Properties of Known Ion Channel Targets?

Mohapatra, Cummins, Khanna, Jeske
Room #: 314

(310) Update in Quality of Pain Care: A Systems Perspective—Current Research and Clinical Outcomes Management

Panidin, Gordon, Kerns, Ashburn
Room #: 318

(311) Gender/Sex Differences in Pain and Opioid Analgesia

Purohit, Thomas, Fillingim, Murphy, Moida
Room #: 315

(312) Disparities in Pain Care: Methodological Challenges and Novel Interventions

Campbell, Sonty, Meghani, Robinson
Room #: 319

2:30–5 pm

Exhibits and Posters Open

Room #: Hall II

2:45–4:15 pm

Break with Exhibits and Posters

(Even numbered posters, not author attended)
Room #: Hall II

4:15–5:15 pm

SIG Meetings

(126) Advancing the Science of Quality

Room #: 323C

(127) Clinical Trials

Room #: 317

(128) Ethics

Room #: 323A

(129) Genetics and Pain

Room #: 314

(130) Pain and Disparities

Room #: 319

(131) Pain Education

Room #: 318

(132) Pharmacotherapy

Room #: 315

(133) Pain in Sickle Cell Disease

Room #: 323B

5:30–7:30 pm

President's Recognition Reception

Room #: Hilton Hawaiian Village, Tapa 1

Friday, May 18

6:15–7:15 am

CE Breakfast Corporate Satellite Symposium

Managing the Many Faces of Pain:
Utilizing a Patient-Centered Approach
to Care

de Leon Casasola, Gudin
Room #: 313

7:30–8 am

Plenary Lecture

(103) The Body in Mind—Disruption
and Treatment of Cortical Body Maps in
People with Chronic Pain

Moseley
Room #: Ballroom AB

8–8:30 am

Plenary Lecture

(104) Translational Pain Research:
Targeting Central Sensitization

Gereau
Room #: Ballroom AB

8:30–10:30 am

Exhibits Open

Room #: Hall II

8:45–10:15 am

Break with Exhibits and Posters
(Even numbered posters, author attended)

Room #: Hall II

10:30 am–Noon

Symposia

(313) Central Mechanisms in Chronic
Musculoskeletal Pain

Graven-Nielsen, Mizumura, Staud
Room #: 314

(314) Cortical Mechanisms Modulating
Chronic Pain: Integrating Preclinical
and Clinical Research

Watson, Neugebauer, Fuchs
Room #: 318

(315) Rita Allen Foundation Scholars
in Pain: Frontiers in Basic Pain
Research

Ajit, Bautista, Romero-Sandoval, Tao
Room #: 323A

(316) Challenging Chronic Opioid
Therapy

Rapp, Clark, Robinson, Balkanyne
Room #: 315

(317) Global Aging and Pain: Research,
Disparities, and Policy Considerations

Green, Harden, Herr, Yee
Room #: 319

(318) Mechanisms of Psychosocial Pain
Interventions

Ehde, Burns, Jensen
Room #: 317

12:15–1:30 pm

Non-CE Lunch Corporate Satellite Symposia

Perspectives in the Management of
Moderate to Severe Acute and Chronic
Pain

Panchal
Room #: 313

Time to Move Beyond Laxative
Therapy? RELISTOR® for Opioid-
Induced Constipation in Advanced
Illness

Holmquist
Room #: 316

1:45–3:15 pm

Symposia

(319) The Spectrum of Low Back Pain:
From Cells to Healthcare Systems

George, Stone, Martin
Room #: 315

(320) Young or Old, Head or Toe,
Glutamate Can Be a Pain

Carlton, Baccell, Moran-Concepcion
Room #: 314

1:45–5 pm

Workshops

(W101) Making Your Research Count:
Strategies for Informing Policy

Green, Gilson, Weber, Zeltzer
Room #: 319

(W102) Successful Grant Writing
and Funding Opportunities in Pain
Research

Porter, Kuslik, Thomas, Keller, Kitt
Room #: 323BC

(W103) Quantitative Sensory Testing
in Humans: Methods and Clinical
Applications

Fillington, Marchand, Backonja, Wallace, Rakei, Edwards,
Mackey
Room #: 317

3:30-5 pm

Symposia

(321) The Interrelationship Among Sleep Disturbances and Chronic Pain in Children and Adolescents

Palermo, Valrie, Ward

Room #: 314

(322) Physical Activity and Muscle Pain

Cook, O'Connor, Sluka, Ellingson

Room #: 315

5:30-7:30 pm

Basic Science Dinner

(136) Mechanisms Underlying the Transition from Acute to Chronic Pain

Price, Mohapatra, Cavalli, Stone, Vulchanova

Room #: Hilton Hawaiian Village, Tapa 1

SIG Meeting

Pain in Infants, Children, and Adolescents

Room #: Hilton Hawaiian Village, Honolulu 3

Non-CE Dinner Corporate

Satellite Symposium

A Novel Approach to the Treatment of Chronic Migraine

Room #: Hilton Hawaiian Village, Tapa 2

Saturday, May 19

8-8:30 am

Frederick W. L. Kerr Basic Science Research Lecture

(105) Models of Muscle Pain:

Transmitting the Message

Sluka

Room #: Ballroom AB

8:30-9 am

Wilbert E. Fordyce Clinical Lecture

(106) When Pain Persists: Are We Doing All That We Can Do?

Haythornthwaite

Room #: Ballroom AB

9-9:30 am

Global Year Against Pain Lecture

(107) Migraine: Pathophysiology and Emerging Therapies

Dodick

Room #: Ballroom AB

9:30-9:45 am

Break

Room #: Ballroom AB Foyer

9:45-11:15 am

Symposia

(323) Barriers to Translation in Analgesic Development: Basic, Clinical, and Industry Perspectives

EDITORS

Mogil, Rauschkolb, Gilron

Room #: 314

(324) Current Perspectives on the Mode of Action of Spinal Cord Stimulation-Induced Analgesia

Guan, Foreman, Polston

Room #: 318

(325) Evidence for Biological Mechanisms Underlying Complementary and Alternative Medicine Interventions for Chronic Pain

Carson, Harris, Wang, Flores

Room #: 317

(326) Cognitive and Behavioral Interventions: Influence on Central Nervous System Pain Processing

Edwards, Jensen, Seminowicz, Wiech

Room #: 315

(327) The Molecular Mechanisms of HIV-Related Neuropathy and Pain

EDITORS

Hao, Hoke, White, Levine

Room #: 323A

(328) Pain and Opioid Antinociception in the Presence of Reactive-Free Radical Species

EDITORS

Ratra, Chung, Salvemini

Room #: 319

11:30 am-1:30 pm

Special Session

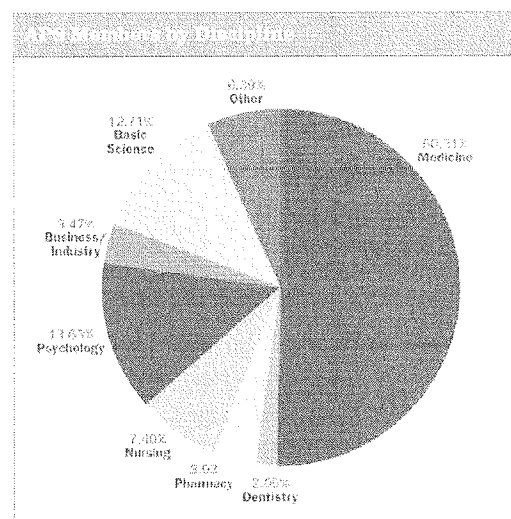
(108) The Institute of Medicine Report: Transforming Pain in America: The Role of the American Pain Society

Savage, Cruciani, Manwarren, Gereau, Kerns, Inturrisi, Sener, Green

Room #: 315

Exhibit A provides the APS Scientific Program Committee policy as well as the APS Commercial Relationship Disclosure and Conflict of Interest Resolution Policy. In addition, a copy of the Guidelines for Corporate Satellite Symposia is also attached for reference purposes. Exhibit B includes a summary of course objectives, speakers, and attendee evaluations, for all programming from the commercially supported symposia held at the Annual Scientific Meeting.

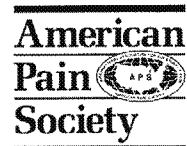
Mirroring the membership of APS, the Annual Scientific Meeting is an arena for interdisciplinary exchange among pain scientists and healthcare professionals. The meeting brings together a diverse community of basic scientists, physicians, nurses, pharmacists, psychologists, physical therapists, and other professionals to share and critique current basic science and clinical, translational, and psychological research with regard to its applicability to practice.



Most of the funds received from opioid-related industry go to support the Annual Scientific Meeting through exhibits, cyber café (underwriting the cost of providing four computer stations for attendee convenience), room drops, advertising, commercially supported symposia fees (covering room rental, registration, and audio-visual needs) and general support as noted on the APS Industry Funding 2009-2012 spreadsheet.

Fundamentals of Pain Management

In conjunction with the Annual Scientific Meeting, APS sponsors an educational event funded solely by Endo Pharmaceuticals. Over the last 11 years, residents and fellows from medicine, nursing, pharmacy, and psychology have been selected to attend an intensive two-day meeting that covers the fundamentals of pain management and treatment. The course, *Fundamentals of Pain Management: A Primer for Residents and Fellows*, is limited to 100 attendees and is taught by APS faculty. Attendees' travel, hotel, conference registration, and one year of membership dues are also covered by Endo's grant. The educational content is created in the same way that content for the Annual Scientific Meeting is, without any input or bias from industry. The Fundamentals Course Planning Committee is comprised of APS members who have a strong interest in providing quality education to those in the medical profession who are considering a career in pain medicine. Prospective attendees must apply, and the program is



RESEARCH
EDUCATION
TREATMENT
ADVOCACY

extremely competitive. Including the most recent meeting, this program has impacted the careers of close to 1,100 residents and fellows who have an interest in learning about pain. In addition, past course attendees have most recently served as course faculty, a testament to the success of the course and its impact on the development of pain medicine professionals.

American Pain Society | 4700 W. Lake Ave. | Glenview, IL 60025

Highly Confidential

APS-MDL00000016

APS-16

P-08532_00016



Fundamentals of Pain Management:

A Primer for Residents and Fellows[®]

Monday, May 14 – Program Agenda

Arrivals throughout the day

4:00 pm – 8:00 pm Registration

7:00 pm – 8:00 pm Attendee Networking Reception

Tuesday, May 15 – Program Agenda

7:00 am – 7:30 am Breakfast Buffet

7:30 am – 7:45 am Welcome & Overview
Charles Argoff, MD

7:45 am – 9:00 am **Session I: Care Essentials for Persons in Pain**

45 min Communication: Patient Centered Interaction
Jennifer Haythorthwaite, PhD

45 min Understanding Pain Mechanisms to Improve Outcomes
Tony Yaksh, PhD

9:00 am – 9:45 am **Session I: Question and Answer Session**

9:45 am – 10:00 am Break

10:00 am -11:40 am **Session II: Approach to the Person in Pain**

25 min Taking a Pain History
Misha-Miroslav Backonja, MD and Steve Stanos, DO

25 min Screening & Diagnostic Tools
Misha-Miroslav Backonja, MD and Steve Stanos, DO

25 min Physical Assessment of Pain
Misha-Miroslav Backonja, MD and Steve Stanos, DO

25 min Assessment for Substance Abuse
Jon Streltzer, MD

11:40 am – 12:15 pm **Session II: Question and Answer Session**

12:15 pm – 1:00 pm Lunch

1:00 pm – 1:15 pm **Roundtable Introductions and Icebreaker**
Charles Argoff, MD

Tuesday, May 15 – Program Agenda

- 1:00 pm – 2:45 pm **Session III: Common Pain States -Team-Based Learning**
- 30 min An Overview of Low Back Pain
Roger Chou, MD and Jane Wilkens, MD
- 60 min Case Studies on Plan of Care Development, Red Flags, and Referral
- 2:45 pm – 3:00 pm Break
- 3:00 pm – 5:00 pm **Session IV: Pharmacology and Intervention**
- 30 min Non-Opioid Analgesia
Katherine Galuzzi, DO
- 30 min Opioid Analgesia
Scott Strassels, PhD
- 30 min Interventional Analgesic Techniques
Gordon Irving, MD
- 30 min Prescription Drug Misuse
Steve Passik, PhD
- 5:00 pm – 5:15 pm **Session IV: Question and Answer Session**
- Attendee and Faculty Dinner**
- 7:00 pm – 9:00 pm Location TDB
Location detail TDB
-

Wednesday, May 16 – Program Agenda

- 7:00 am – 7:30 am Breakfast Buffet
- 7:30 am – 8:30 am **Small Group Break-out Session I** choose one
- | | | |
|---|--|--|
| Radiographic and
Neuro-imaging in Pain
Timothy Maus, MD | Complementary and
Alternative Medicine
Joseph Audette MA, MD | Emergency Department
Management of Acute
and Chronic Pain
Knox Todd, MD |
|---|--|--|
- 8:30 am – 8:40 am Break
- 8:40 am – 9:40 am **Small Group Break-out Session II** choose one
- | | | |
|---|--|--|
| Radiographic and
Neuro-imaging in Pain
Timothy Maus, MD | Complementary and
Alternative Medicine
Joseph Audette MA, MD | Emergency Department
Management of Acute
and Chronic Pain
Knox Todd, MD |
|---|--|--|
-

Wednesday, May 16 – Program Agenda

9:40 am – 9:50 am	Break
9:50 am – 11:30 am	Session V: Clinical Aspects of Other Pain States
25 min	Headache and Facial Pain Charles Argoff, MD
25 min	Acute Pain Management Debra Gordon, RN, MS
25 min	Neuropathic Pain Brett Stacey, MD
25 min	Fibromyalgia and Other Soft Tissue Pain Daniel Clauw, MD
11:30 am – 12:00 pm	Session VI: Question and Answer Session
12:00 pm – 12:45 pm	Lunch
12:45 pm – 2:15 pm	Small Group Discussion and Case Study
2:15 pm – 2:30 pm	Break
2:30 pm – 4:00 pm	Session VI: Coordinated Management and Special Pain States
30 min	Cancer Pain and Palliative Care Judy Paice, PhD, RN
30 min	Pediatric Pain Rene Manworren, PhD RN-BC CNS
30 min	Coordinated Pain Management Robert Kerns, PhD
4:00 pm – 4:45 pm	Session VI: Question and Answer Wrap-up, Final Remarks
4:45 pm – 4:55 pm	Charles Argoff, MD
4:55 pm – 5:00 pm	Evaluation Turn-in and Certificates of Attendance

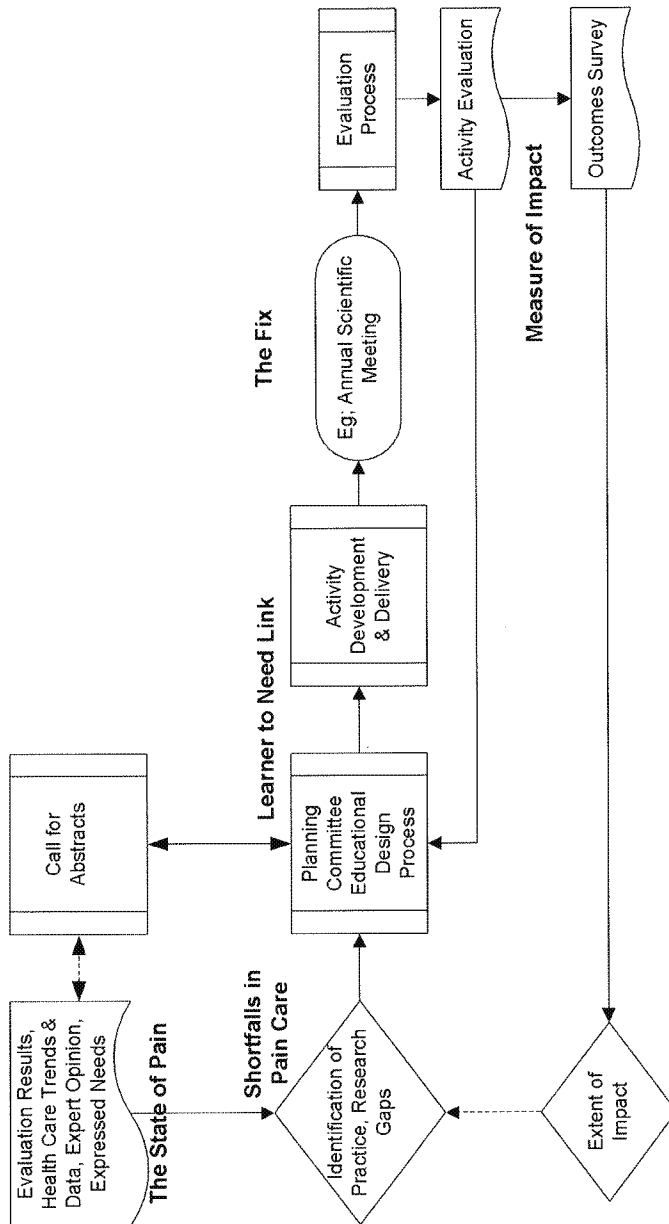
Saturday, May 19 – Program Agenda

7:00am – 7:45am	Continental Breakfast & Follow-up Session: Your APS Annual Meeting Experience <i>Charles Argoff, MD</i>
-----------------	---

Strategies in Pain Management

Understanding that primary care practitioners see the majority of pain patients in the United States, APS created a one-day course targeted to the primary care professional. The agenda was intended to impart the strategies needed to adequately evaluate the quality of the pain care in the primary care practice setting, to create a plan for change, and leave with the tools necessary to positively impact the care provided to patients in pain. Due to low turnout, this course was only offered live in 2009 and 2010 but we have been able to make use of the content, repurposing it for web-based education.

For any of these educational events, the planning process is fundamentally the same, involving experts in each of the demographic segments of the society. Since APS is an accredited provider of continuing education by ACCME, ANCC, ACPE, and APA, it must also adhere to their standards for programming and processes.



Clinical



The American Pain Society Clinical Centers of Excellence in Pain Management Awards Program helps advance the quality of pain management in the United States by recognizing and rewarding excellence in quality clinical care.

Central to the APS vision, “APS envisions a world where pain prevention and relief are available to all people,” this program aims to identify U.S.-based, multidisciplinary teams providing distinguished, comprehensive pain care to serve as examples to other pain management programs.

These non-monetary awards are given annually and recognize pain-care teams that overcome difficult challenges to provide outstanding, exemplary care for those with chronic pain disorders, acute pain after surgery, or trauma and for those with pain from cancer and other terminal conditions in palliative care settings.

Funds received from industry go to support the administration of the program awards ceremony held during the annual scientific meeting.

The Elizabeth Narcessian Award was named in memory of Elizabeth Narcessian, MD, a noted educator on the appropriate use of opioids, patient assessment, and approaches to rehabilitation of patients devastated by chronic pain. The award recognizes outstanding contributions highlighting dedication or innovation in education in the field of pain. This is a \$1,000 cash award given annually and is supported by a grant from Purdue. The award recipient is chosen by the APS Awards Committee which is comprised of previous year's award winners.

Corporate Support

Replacing our corporate membership program, APS now has three categories of corporate support (Corporate Council). Each year, APS hosts a roundtable discussion on hot topics and future trends in the field of pain. We see it as a way for both the association and industry to capitalize on each other's strengths to advance the specialty of pain and enhance patient care. The purpose of the roundtable is to

- inform the Corporate Council about the APS strategic plan and achievements
- provide socioeconomic updates
- review practice development initiatives.



RESEARCH
EDUCATION
TREATMENT
ADVOCACY

In addition to the annual roundtable meeting, corporate supporters are invited to the President's Recognition Reception during the APS Annual Scientific Meeting. The reception recognizes our many award recipients, including the Clinical Centers of Excellence awards. Corporate supporters receive all APS communications including *The Journal of Pain*, APS's official, frequently cited, indexed journal; *APS E-News* (supported by Purdue), APS's monthly e-newsletter that delivers relevant information covering the latest pain news and information on advocacy related to pain; and *Corporate Council News*, a semiannual summary from APS of the latest information relevant to the study and treatment of pain.

American Pain Society | 4700 W. Lake Ave. | Glenview, IL 60025

ITEM 2

Has the American Pain Society received any funding from the federal government?
If yes, describe the year, amount, and purpose of this funding.

As mentioned in the explanations in Item 1, there are usually 300 to 400 scientific posters displayed at the Annual Scientific Meeting. The abstracts submitted are reviewed and scored for scientific merit and then either accepted or rejected accordingly. Once accepted, young investigators may apply for a travel stipend to defray the costs to attend the meeting and present their poster. In each application cycle, applicants must meet the eligibility requirements (membership in APS and an accepted paper or poster abstract for the Annual Scientific Meeting).

Year	Award Applications	Awards Granted	Total Amount Awarded	Gender
2009	60	48	\$36,000	18 male, 30 female
2010	44	36	\$27,000	17 male, 19 female
2011	61	40	\$30,000	21 male, 19 female
2012	103	51	\$40,800	17 male, 34 female

This program has been in existence since 2005 and has been funded by APS. Most recently, some board members, as principal investigators, applied for grants on behalf of APS and APS received National Institutes of Health (NIH) R13 grants to support this program.

Project Description of the R13 Grant Proposal

"We are requesting support for travel stipends to encourage the participation of young investigators at the annual meeting of the American Pain Society (APS). These young investigators are beginning their careers in basic and clinical research in pain. The APS is a multidisciplinary community that brings together a diverse group of scientists, clinicians and other professionals to increase the knowledge of pain and transform public policy and clinical practice to reduce pain-related suffering. The annual APS meeting provides a unique forum for disseminating cutting edge advances in evidence-

based pain research and treatment in a setting that optimizes the interactions between scientists and clinicians. This bidirectional translational interchange between clinicians who diagnose and manage clinical pain and pre-clinical scientists who are defining the mechanisms of and treatments for pain is the cornerstone of improved pain therapy.

We seek funds solely for the purpose of providing travel awards for young investigators who have submitted an abstract which has been accepted by our peer review process and therefore are engaged in research. These young investigators may be from any research training background (basic or clinical science, psychology, medicine, or biostatistics) and may be at any level in training, including students, residents, pre-doctoral trainees, postdoctoral fellows, or those who have completed their postdoctoral training within the last 3 years. All applicants must be APS members. The APS Young Investigator Travel Awards program is designed to mentor and nurture the next generation of pain researchers."

Annual Scientific Meeting	Amount Funded	Grant Number	Principal Investigator(s)	Institutes Involved
2011	\$30,000	1R13NS074838-01 REVISED	Charles Inturrisi, PhD	NINDS, NIA, NCCAM
2012	\$40,000	1R13NS078962-01	Kathleen Sluka, PT PhD; Rob Edwards, PhD	NINDS, NIDDK, NIA, NCCAM, NCI

Eight of the Young Investigator Travel Award recipients have gone on to receive APS's Future Leaders in Pain Research Grants (\$20,000 each) and one recipient has received the Future Leaders in Pain Research Grant and the Rita Allen Scholars in Pain Award (\$150,000 each).

ITEM 3

In addition to financial support, identify and describe any collaborative activity between the organizations identified in request #1 and the American Pain Society from 2009 to the present.

Beginning in 2007, as part of our Corporate Member/Corporate Council program, APS has hosted a roundtable discussion with those and other members and members of the Executive Committee of the Board of Directors. We are currently in the process of setting up a meeting for September 2012 to discuss recommendations from the Institute of Medicine (IOM) Report on Relieving Pain in America.

ITEM 4

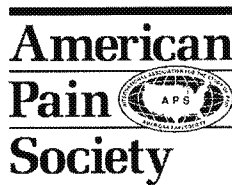
In the event any activity identified in request #3 above pertains to information distributed to physicians and patients concerning prescription pain medications, please identify any materials developed, in whole or in part, by organizations identified in request #1 and provide copies of these materials.

Does not apply.

ITEM 5

Please identify the name, job title, job description, and dates employed of any American Pain Society employees who communicated with any organization identified in question #1 regarding the content of any materials distributed to patients and physicians pertaining to opioid use from 2007 to the present.

The American Pain Society (APS) does not have employees. APS has a management contract with Association Management Center (AMC) to provide national office support; staff members who work with APS are employees of AMC.



RESEARCH
EDUCATION
TREATMENT
ADVOCACY

Scientific Program Committee

Section: 9.0. Committees
Subsection and Title: 9.15. Scientific Program Committee
Revision Date: January, 2010

RATIONALE: The Scientific Program Committee (SPC) is responsible for identifying content for, then planning, developing, and evaluating the Annual Scientific Meeting. Supporting the SPC in this role will be the Education Advisory Committee (EAC), whose function it is to initiate then share learning needs found to exist within clinical, research, and administrative practice gaps in pain care.

COMPOSITION: Members will be representative of the membership and include, at a minimum:

- 2 Basic Scientists
- 1 Nurse
- 1 NIH Pain Care Consortium representative
- 3 Physicians
- 1 Pharmacist
- 2 Psychologists
- Up to 2 additional members may be selected to reflect current needs of the organization
- APS President, Chair-Elect, EAC Chair, and Lead Nurse Planner will serve ex-officio

CHAIR: Appointed by APS President-Elect. The SPC Chair will serve two consecutive years: year one as Chair-Elect and year two as chair.

CHAIR RESPONSIBILITIES:

1. Identifies potential committee members and makes recommendations for appointment to the EAC and President-Elect. A majority of the SPC should have a role in pain research.
2. Communicates with President to discuss overall plans for the annual meeting.
3. Solicits professional practice gaps and respective educational needs from the EAC.
4. Confers with the Director/Manager of Education to schedule all education events at the annual meeting, discuss format, types of sessions, process for Call for Symposia and Posters/Papers, reviews, timelines, etc.
5. Leads the SPC in its planning, developing, and evaluation of the Annual Scientific Meeting, and works closely with the Director/Manager of Education to ensure accreditation criteria/guidelines are met.
6. Make decisions concerning exceptions to speaker reimbursement in conjunction with the Director/Manager of Education.
7. Communicates with membership through issues of APS Bulletin and E-News.
8. Discusses with President any special requests that may require additional funding or staff support in the coming year.
9. Submits mid-year report to Board.
10. Submits meeting evaluation to the Board.

CHAIR-ELECT RESPONSIBILITIES

1. Familiarizes themselves with the annual meeting planning process by working along side the Chair.
2. Accepts planning and administrative tasks issued by the Chair as able.
3. Reviews full disclosure information for each SPC committee member with the EAC and resolves conflicts appropriately.

*From Policy Manual
American Pain Society
www.ampainsoc.org*

APS-MDL00000029

MEMBERS' RESPONSIBILITIES:

1. Submit full disclosure of commercial relationships for review by SPC Chair-Elect and EAC.
2. Attend planning meetings of committee; suggest speakers, topics for educational program; assist in developing overall design of program.
3. Assist with review and selection of proposals and abstracts to include educational design, content, objectives, speakers; assists with decisions regarding faculty conflict of interest issues by modifying speaker topic and/or selection.

MEMBER TERM: Two years. Member terms will overlap.

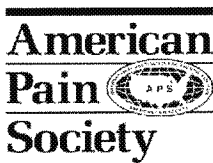
The SPC Chair, Chair-elect, and Members are required to participate in the fall planning meeting (Chicago), to review proposals submitted for symposia and workshop consideration, and to review abstracts submitted for paper or poster presentation.

EDUCATION ADVISORY COMMITTEE'S ROLE IN THE ANNUAL SCIENTIFIC MEETING

APS' planning process for the Annual Scientific Meeting requires considerable expertise, coordination, and oversight. Policy, prudent educational design strategies, and accreditation guidelines necessitate that the SPC and EAC collaborate on several, overlapping areas. These include, but are not limited to the following:

1. Initiate the Annual Scientific meeting planning process approximately 18 months prior to the meeting.
2. In advance of the first SPC meeting, identifies pain community and member needs through the assessment of clinical, research, administrative, and other gaps for consideration by the SPC
3. Conducts a joint committee meeting to a) orient SPC members to the planning process and accreditation requirements, and b) share the educational needs identified in time leading up to the beginning of the SPC's planning process.
4. Reviews disclosure information of recommended committee members with the SPC Chair-Elect and resolves conflicts appropriately.

*From Policy Manual
American Pain Society
www.ampainsoc.org*



RESEARCH
EDUCATION
TREATMENT
ADVOCACY

Commercial Relationship Disclosure & Conflict of Interest Resolution Policy

This organization adheres to the letter and intent established in the Standards for Commercial Support (as developed by, for example, the ACCME, ANCC, ACPE, and APA). The following defines how the Standards on disclosure (SCS 6) and conflict of interest resolution (SCS 2) will be ensured.

Rationale: The integrity of scientific and educational programs is partially dependent on the management of potential conflicts of interest. Moreover, as an accredited educational provider, balance, independence, objectivity, and scientific rigor must be maintained for each educational activity through appropriate disclosure of financial interests, followed by review and resolution. This policy is intended to help guide the management of potential conflicts, primarily through disclosure of all financial or other interests that might be construed as resulting in actual, potential, or apparent conflicts.

Disclosure: All planners and faculty (authors, teachers, moderators) involved in the development of accredited educational programming are required to disclose all relevant financial relationships. An individual has a relevant financial relationship if he or she has a financial relationship in any amount occurring in the last 12 months with a commercial interest whose products or services may be discussed in an educational activity content over which the individual has control. For this purpose, the relevant financial relationship(s) of an individual's spouse or partner is considered to be theirs as well. A conflict of interest can be said to exist when an individual has a financial relationship with a commercial interest and the opportunity to affect the educational content about the products or services of that commercial interest.

Resolution: It is the responsibility of the society to review the relationships reported in the disclosure form by planners and faculty then identify and resolve real or perceived conflicts. The education committee is responsible for reviewing the disclosures submitted by planning committee members. The planning committee reviews the disclosures of faculty. In the event the planning committee is unable to or unclear on a disclosure and/or resolution decision the education committee will make the final determination. Resolving the conflict ensures that the content of the activity is aligned with the interests of the public. The planning or education committee may resolve potential conflicts in a variety of ways, including but not limited to any of the following findings:

1. Not applicable, no conflict(s) is/are found to exist(s).
2. Faculty/planning committee member is approached about the concern that reported relationships may be seen as a potential or real conflict of interest. Determination is made if a conflict does in fact exist. Agreement is reached and documented on how the conflict will resolved which may include items 1, 3-6.
3. Faculty member is required to refer to only evidence-based material, references, and/or recommendations.
4. Faculty materials (eg: handouts, slides) are peer reviewed with the intention of ensuring content does not advance the interests of any products or services.
5. Faculty/planning committee member is asked to limit the scope of their presentation/involvement from subject matter related to the source of the potential or real conflict.
6. Should an unresolvable conflict of interest exist faculty/planning committee member will be excused from serving on the committee or presenting on this or related subject matter.

Best Practices: Planning committee members and/or education committee representatives will be assigned to monitor and evaluate selected sessions to determine that efforts to resolve conflicts were successful. Activity participants will also be asked to evaluate whether individual presentations were balanced, scientifically rigorous, and free from bias. Detailed disclosure information will be published in course materials. Learners will also be informed when no relevant financial relationships exist.

The education committee will engage each planning committee on a regular basis to ensure this policy and its practices have been communicated, understood, applied, and documented.



RESEARCH
EDUCATION
TREATMENT
ADVOCACY

31st Annual Scientific Meeting
Honolulu, HI
May 17-19, 2012
Honolulu Convention Center

Guidelines for Corporate Satellite Symposia

The following information will remain on the APS website through the conclusion of the 2012 annual meeting. These guidelines and instructions have been developed as a resource for you in the planning and implementation of a satellite symposium program. Please refer to these guidelines frequently.

Please read the following information and proceed to the link below to begin your proposal for a Corporate Satellite Symposium.

APS Mission Statement: The American Pain Society is a multidisciplinary community that brings together a diverse group of scientists, clinicians and other professionals to increase the knowledge of pain and transform public policy to reduce pain-related suffering.

The American Pain Society (APS) invites its medical education partners to submit proposals for the official Corporate Satellite Symposia (CSS), which will occur in conjunction with the APS Annual Scientific Meeting, May 17-19, 2012 in Honolulu, HI. We anticipate drawing more than 1,200 attendees from across the country. Proposals will be reviewed by the APS Scientific Program Committee (SPC), and will be evaluated based on the quality of the proposed programs and their relevance to a multidisciplinary pain community. The proposed programs must demonstrate scientific rigor and objectivity and be free of commercial bias for or against any product.

If a proposal is accepted by the SPC, the program will be scheduled as an official CSS held in conjunction with the Annual Scientific Meeting in a breakfast, lunch, or dinner slot, and may be held concurrently with other CSS. The SPC will determine program placement based on several factors. Once a time has been assigned, it cannot be changed. No other educational programs or social events supported or sponsored by any other organization and directed at the same audience may be offered over the official dates and times of the APS Annual Scientific Meeting in the same city as the APS meeting.

The SPC will review all proposals. Criteria for acceptance of a proposal include the following:

- The topic is timely and of broad interest to a multidisciplinary pain community. Programs that are designed for a multidisciplinary audience will be given first consideration. See "Proposal Submission/Selection Process," page 3.
- The topic was developed in accordance with all accreditation/sponsorship guidelines, e.g., ACCME Standards for Commercial Support, ANCC Commercial Support Guidelines, ACPE Guidelines for Standards for Commercial Support, and APA Promotion and Advertising of Programs; and, the content is free of commercial bias for or against any product

- The proposed program is designated for physician, nursing, psychologist, and pharmacist credit by an ACCME, ANCC, ACPE accredited provider and an approved APA sponsor. This is a requirement of acceptance and inclusion in the program.

The SPC will meet in August 31, 2011 and will review all proposals. Proposals must be received by electronic submission. Late proposals will only be reviewed by the SPC if there are available time slots.

Timeline

5/19/11	Submission tool available on www.ampainsoc.org
8/15/11	Proposals for CSS due to APS Proposal received after this date will only be reviewed if time slots are available
8/31/11	SPC Meeting
9/01/11	Companies notified of acceptance and recommended revisions, as determined by the SPC.
9/12/11	Once APS receives written notification that the program has secured grant funding, APS will assign date and time for the program and send a Letter of Agreement (LOA) to the Medical Education Company for the educational grant. Assignments will be made on a first-come, first-serve based on securing grant funding.
11/1/11	Educational grant and signed LOA are due, only symposia that have a signed LOA will be included in APS program material. The symposia description submitted in the proposal will be used for the registration brochure unless we receive an updated version and a list of confirmed faculty is due.
12/1/11	Not-for-credit Satellite Symposia will only be offered if a time slot is still available. Proposals will be sent to the APS SPC to be reviewed.
12/15/11	Companies notified of acceptance or recommended revisions of Not-for-credit Satellite Symposia
2/1/12	Draft copy of invitation submitted to APS for approval
2/1/12	Final copy due for APS Program Book
2/1/12	Hotel Voicemail is on a first-come, first-served base (<i>optional, additional fee</i>)
2/15/12	APS will assign a meeting room for your event and provide logistical information packet, including: AV equipment listing, floor diagram, menus and facility contacts
3/1/12	CSS registration live on the website
3/1/12	APS will provide APS member mailing labels.
3/1/12	Requests due for additional audiovisual equipment, audience response system, etc.
3/7/12	APS Program Book advertising deadline (<i>optional, additional fee</i>)
4/1/12	Function Space Requests deadline; they are on a first-come, first-served basis
4/13/12	Deadline for housing reservations
4/25/12	APS will provide mailing labels for pre-registrations for meeting
4/22/12	Room Drop Deadline (<i>optional, additional fee</i>)
5/9/12	APS will send a blast E-mail to all pre-registered attendees
5/17-19/12	APS Annual Scientific Meeting
7/15/12	Summary of program evaluations to APS post-conference

The process for submission, selection, and conduct of the CSS is described below.

PROPOSAL SUBMISSION/SELECTION PROCESS

- APS Corporate Council members and their medical education partners are eligible to submit a CSS proposal online at the link below. Unapproved grants must identify where grants have been submitted and timelines of the approval process identified.
- Late proposals, or those received by any means other than the electronic submission system may jeopardize their consideration.
- The APS Scientific Program Committee (SPC) will evaluate and rate all proposals. Ratings will be based on overall quality, scientific merit and broad-based appeal. APS highly encourages multidisciplinary content. This can be achieved, in part, by including a psychosocial component to the program and including faculty from several disciplines.

Note: The selection of proposals is a competitive process. In 2012, the SPC will be looking for proposals that reflect content not previously presented and are complimentary to the 2012 program.

The following CSS were held in 2011:

- Opioid REMS in Practice: Measuring Success
- Unraveling the Progression of Acute to Chronic Pain: New Research and Clinical Perspectives
- Fibromyalgia Syndrome: Pathophysiology, Comorbidities, and Treatment Considerations
- Translating Advances in Pain Science and Therapeutic Approaches to Practice
- New Perspectives on Acute Pain: Focusing on Efficacy and Tolerability
- Clinical Case Challenge in Pain: Mechanisms, Models, and Multimodal Management
- IDEAL ® Clinicians' Forum: Pain Management and Risk Mitigation-A Practical Approach

Evaluation data gleaned from a recent annual meeting indicated strong interest in the following topics, and we encourage proposals dealing with these topics. Note: innovation in topic selection and development is of high importance to the SPC:

- | | |
|--|----------------------------------|
| • Cancer pain | • Interventional pain management |
| • Complex regional pain syndrome | • Low back pain |
| • Genetics and pain | • Headache |
| • Geriatric pain | |
| • Fibromyalgia related research and evidence based treatment (beyond the basics) | |

As you enter the title of your program, you will see a list of titles already submitted for the 2012 meeting. This is being done to avoid redundancy in topics. We strongly suggest you modify your proposal if you see that your topic has already been submitted. Please be aware that the committee may select only one program on a particular topic.

- The submitted proposals will be "blinded" to eliminate bias from the SPC.
- To avoid any appearance of conflict, the current APS President and members of the SPC should not be included as speakers or moderators in a CSS. Members of the Board of

Directors need to carefully consider whether their participation might be construed as a conflict of interest.

2011-2012 APS President and Scientific Program Committee

Seddon Savage MD PhD, President
Kathleen Sluka, PhD PT, Chair
Charles Argoff, MD
Jane Ballantyne, MD
Beth Darnall, PhD
Patrick Dougherty, PhD
Robert Edwards, PhD (Co-chair)
Steven George, PhD PT

Carmen Green, MD
Keela Herr, PhD RN FAAN
Derek Molliver, PhD
Anne Murphy, PhD
Linda Porter, PhD
Rajan Radhakrishnan, PhD
Jamie Rhudy, PhD

- All Continuing Education (CE) CSS must be designated for physician, nursing, psychologist, and pharmacist credit by an ACCME/ANCC/ACPE accredited provider and an approved APA sponsor. APS will not provide continuing education credit for CSS. For possible sources of psychologist credit, go to <http://www.apa.org/ce/sponappr.html>
- APS will notify the medical education company in writing regarding the committee's decision as noted on the timeline. Applicants may not contact reviewers directly to provide additional information or to check the status of a proposal.
- A proposal will be considered complete when it includes: the rationale for holding the symposium, learning objectives, complete agenda for the program, including topics, synopsis of program content (session description) for publication in APS conference brochure, proposed faculty, and a description of how evaluation and awarding of CE credits will be handled on site. A representative of the medical education company must sign the proposal.
- Not-for-Credit Satellite Symposia will only be offered if a time slot is still available.

PROGRAM CONTENT AND SPEAKERS

- CE CSS must comply with ACCME, ANCC, and ACPE Standards for Commercial Support.
- Current APS President and SPC members may not be included as speakers or moderators in a CSS (see above).
- The format of the APS meeting allows for concurrent CSS in some of the time slots. When confirming your faculty, it is important that you determine that the potential faculty member is not participating in another program being held at the same time.
- The program topic/content cannot be changed once it is selected and approved.
- All correspondence with CSS speakers, including honoraria and expense reimbursement, and disclosure information will be the responsibility of the organizer of the symposium.

PROMOTION

- APS will list CSS, including brief program synopses, in the APS Annual Scientific Meeting registration brochure, on-site program book and on the APS website and symposia registration website.
- APS will provide supporters of CSS with one set of mailing labels for all APS members 9 weeks prior to the annual meeting. In addition, 3 weeks prior to the conference APS will provide one set of mailing labels for the 2011 APS conference pre-registration list.
- A blast e-mail will be sent 2-weeks out from the meeting to all registered attendees reminding them that CSS are being offered with a link to register.
- Invitations for the CSS must be submitted to APS for review and approval prior to publication. Please allow at least five business days for APS to turn around approvals.
- You may refer to your program as a "Corporate Satellite Symposium," or a "CE Satellite Breakfast/Luncheon/Dinner Symposium;" however, APS requires that the rest of the verbiage is stated in this manner: "Held in conjunction with the 31st Annual Meeting of the American Pain Society."
- Requested copy for invitations: There is no registration fee for attending this symposium, however, seating is limited. To preregister for (Name of Symposium goes here), please register online at www.symposiareg.org/aps or contact Heather Deja at 847/375-3676. Preregistration does not guarantee seating. We do recommend arriving at the symposium location early.
- Please note – any usage of the APS logo requires permission from APS.

The following are marketing opportunities available to support attendance at your CSS. These programs require an additional fee. Please refer to the exhibitor prospectus at www.ampainsoc.org for detailed information.

- Program Book Advertising
- Room Drop at headquarter hotel
- Hotel Voice Mail Message at headquarter hotel

REGISTRATION

- APS will assign a vendor to handle all pre-registration for CSS. Attendees will be referred to one web site, www.symposiareg.org/aps to register for all satellite events.
- Registration reports will be sent on a scheduled basis identifying all pre-registrants with their demographic profile.
- A CSS Information desk will be set in the APS registration area to field questions and assist in onsite registration.
- Registration will be available on-site at the Cyber Café.
- All CSS will be listed on signage located in the APS registration area by the CSS information desk.
- CSS personnel must be available outside the session room an hour prior to the scheduled start time of the event to handle registration and answer questions.

- A set of alphabetic reports of all pre-registered attendees for the CSS and 2 lead retrieval units will be provided one hour before the session, these units must be picked up at the APS registration counter.
- A registration table, easels and rope and stanchion will be provided outside the CSS room.

EVENT LOGISTICS

- One person must be designated as the sole contact for the CSS. APS will deal directly with that one person.
- APS will assign a meeting room for your event and provide logistical information packet, including: AV equipment, floor diagram, and facility contact via mail.
- Meeting rooms designated for CSS will be set with round tables, banquet style. Buffet set up will be allowed only with prior permission from the APS contact.
- A minimum of 350 should be budgeted for food & beverage. Guarantees should be based on your preregistration numbers and past attendance at similar events at APS. This number does vary based on time slots.
 - Breakfast (150-250 attendees)
 - Lunch (200-300 attendees)
 - Dinner (150-250 attendees)
- Please indicate your preference on the proposal.
- APS may require you to change your menu based on other events within the meeting.
- The CSS and all food & beverage must be kept contained within the assigned meeting room and the assigned time frame.
- CSS organizer is responsible for handling onsite management of the event.
- A registration table, set of alphabetic reports of all CSS pre-registered attendees, 2-lead retrieval units, easels, and rope and stanchion will be provided outside the session room. No other furniture, display units, banners or unapproved signage may be placed outside the room. No sales activities may take place and no promotional materials may be distributed in the meeting room or the registration area.
- Space will also be allocated for a maximum of 4 signs (28" x 44") for the CSS. Placement and availability of posting signs will be determined by APS. Organizers are responsible for removing signage and meeting handouts, etc., from their assigned rooms at the conclusion of the event.
- APS requires that you use the designated audio/visual contractor for this meeting, MAC Productions. A detailed AV equipment list and diagram will be provided. You have approval to bring in your own Producer and to order additional AV equipment.
- Audio/video taping will be the responsibility of CSS organizer and can be arranged through MAC Productions.
- All expenses associated with changes in room set-up and clean up, food and beverage, electrical, telephone, shipping, etc., are the sole responsibility of the CSS organizer.
- Evaluations and certificates for continuing education credits are the responsibility of the CSS organizer. A summary of participant evaluations must be provided to APS no later than 8 weeks after the conference.
- A block of rooms is being held for APS meeting attendees at the Hilton Hawaiian Village. Reservations: (800) HILTONS or www.hiltonhawaiivillage.com. Room rate: \$199-\$239, cutoff date is April 16, 2012

Compliance

Violation of these guidelines may result in the cancellation of the CSS and/or may jeopardize the opportunity to hold a CSS at future annual meetings. One person must be designated as the primary contact/project manager for the satellite program throughout the application and planning process; APS will deal directly with that one person.

Enduring Material

Post your enduring material of the APS website and reach more than 2,500 APS members. The APS website receives more than an average of 20,000 unique visitors a month. This benefit is included in the satellite symposia fee.

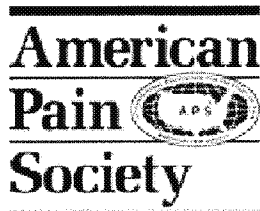
- APS will send out link promoting the educational offering in the APS E-news that will go out to all APS members
- APS will send out an e-mail notification to all attendees highlighting the additional educational offering on the APS website.

Educational Grants

- The program fee for a Corporate Satellite Symposium is \$60,000 in the form of an educational grant to the American Pain Society.
- A letter of agreement between APS and the medical education company must be signed.
- Corporate Council members providing the grant to the medical education companies will be acknowledged as providing the grant with the listing of the session. They will not be acknowledged as supporters of the meeting through this grant.
- Program fees and accompanying signed letters of agreements must be received by APS by November 1, 2011.

[Click here to begin your corporate satellite symposium submission or to retrieve/edit an existing submission.](#)

Please contact APS if you need assistance with your submission, 847/375-4715. Our staff is available to assist you from 8 am – 6 pm Central time.



RESEARCH
EDUCATION
TREATMENT
ADVOCACY

American Pain Society's Annual Scientific Meetings

May, 2009 – May, 2012

Corporate Satellite Symposia Titles and Faculty



RESEARCH
EDUCATION
TREATMENT
ADVOCACY

American Pain Society

Corporate Satellite Symposia Titles

May, 2009

28th Annual Scientific Meeting, May 7-9, 2009, San Diego, CA

Thursday, May 7

12:30–2 pm

Corporate Satellite Lunch Symposia

Pain and Aging in America: The Future is Now

Christine Miaskowski, PhD RN FAAN (Program Chair); Lori Reisner, PharmD FCSHP; Keela Herr, PhD RN FAAN, AGSF; F. Michael Gloth, III, MD FACP AGSF

Accredited Provider: MK Medical Communications

This symposium was supported by an educational grant from Endo Pharmaceuticals, Inc.

Corporate Satellite Symposia

Seven corporate satellite symposia will be offered in conjunction with the APS 29th Annual Scientific Meeting. These independently sponsored, commercially supported symposia are open to all meeting registrants. The programs have been reviewed by the APS Scientific Program Committee and approved after determining the topics to be presented are relevant to the audience and complementary to the official APS program. There is no fee to attend these symposia; however, preregistration is encouraged. Seating will be available at no charge to those responding on a first-come, first-served basis. Registration and continuing education credit for these sessions are managed separately from APS. Please contact the managing organization directly with any questions.

Thursday, May 6

12:30-2 pm

Lunch Symposium

Novel and Future Directions in Cancer Pain Management

Pain is often the first sign of cancer and most patients experience moderate to severe pain during the course of disease and into survivorship. The molecular, biochemical, and neurobiological mechanisms of cancer and metastatic cancer pain are being investigated, as are its genetic determinants. Molecular epidemiology provides insight into the interplay of genetic risk for cancer and risk for cancer symptoms. The undertreatment of cancer pain is well documented despite the availability of pharmacological options, including opioids, whose efficacy in cancer pain is well established. A new expert panel guideline on opioid rotation may advance clinical management of cancer pain.

Learning Objectives

1. Review molecular mechanisms of cancer pain.
2. Describe the role of genetic and nongenetic factors in predicting the severity of cancer pain and response to opioids.
3. Assess the role of opioids in the management of cancer pain, including new approaches to opioid rotation.

Faculty

Christine Miaskowski, PhD RN FAAN (Moderator); Patrick W. Mantyh, PhD; Clelio C. Reyes-Gibby, DrPH; Oscar de Leon-Casasola, MD

This symposium is jointly sponsored by Postgraduate Institute for Medicine (PIM) and Miller Medical Communications, LLC. This session will offer continuing education for physicians, psychologists, nurses, and pharmacists. This symposium is supported by an educational grant from Endo Pharmaceuticals Inc. Participants with any questions regarding continuing education earned through participation in this symposium should contact Jennifer Jones at jonesj@pimcc.com.

12:30-2 pm

Lunch Symposium

Opioids in Our Communities, Unintended Consequences: A Focus on Adolescents—Insights from Teens Recovering from Prescription Drug Addiction

This symposium will present the status of prescription opioid misuse in the United States, with a focus on adolescents, who are particularly at risk. Several misconceptions among both adolescents and, often, their families and communities that contribute to the problem include beliefs that prescription drugs are not addictive and are safer than illegal drugs because they are prescribed by a clinician. Although sources of prescription opioids for illegitimate use can include drug dealers, the Internet, and forged prescriptions, the primary sources are friends, relatives, and clinicians. For example, 62% of grade 7-12 students consider prescription opioids "easy to get from parents' medicine cabinets," 52% report they are available "everywhere," 51% believe they are not illegal, and 50% believe they are "easy to get through other people's prescriptions."

www.ampainsoc.org

Teenagers from a recovery high school who abused prescription opioids, developed addiction, and are in recovery will be present live to discuss how and why they began abusing prescription drugs, their access to medications, how their drugs of choice evolved over time, and their trajectory of drug and alcohol use to addiction. Opioids are often necessary to treat pain, but clinicians have a responsibility to minimize the potential for diversion. The faculty will discuss the role of pain clinicians to reduce illegitimate access to prescription medications, and provide knowledge, tools, and strategies to educate patients about safeguarding their medications, disposal of medications no longer required, and the potential that exists for abuse in their homes. Strategies for appropriate prescribing will include risk assessment, careful monitoring, and thoughtful drug selection.

Learning Objectives

1. Explain how even legitimate opioid prescribing can have unintended adverse consequences in the community.
2. Summarize the potential adverse consequences of prescription opioid use by persons for whom they are not prescribed.
3. List sources and methods adolescents use to obtain prescription opioids.
4. Describe strategies to educate patients about their responsibility to safeguard prescription medications.
5. Employ monitoring strategies using available tools that will help protect patients from becoming a source of abused prescription opioids.

Faculty

Carol J. Boyd, PhD MSN FAAN; Scott M. Fishman, MD

This symposium is jointly sponsored by the University of Nebraska Medical Center, Center for Continuing Education (UNMC/CCF) and Pharmathon Group. This session will offer continuing education for physicians, psychologists, nurses, and pharmacists. This symposium is supported by an educational grant from King Pharmaceuticals, Inc. Participants with any questions regarding continuing education earned through participation in this symposium should contact Diana Frost at dfrost@unmc.edu.

Friday, May 7

6:45-8:15 am

Breakfast Symposium

Treating the Triangle: Managing Fibromyalgia Pain, Fatigue, and Depression

This symposium will present a comprehensive, updated approach to fibromyalgia, from the most current research into pathophysiology to cutting-edge research on diagnosis and treatment options. Participants will be introduced to state-of-the-art research into the "orchestra of central nervous system pathophysiology" gleaned from numerous domains of investigation (eg, genetics, neuroimaging, sleep polysomnography). Fibromyalgia patients form a heterogeneous group with myriad presentations. The wide range of symptoms and overlap with other illnesses can make fibromyalgia extremely difficult to diagnose.

APS 29th Annual Scientific Meeting, Corporate Satellite Symposia May, 2010

APS-MDL00000041

The symposium will enable participants to hone their diagnostic skills, with particular focus on the differential diagnosis. An algorithm for pharmacologic therapy utilizing the "triangle" concept will enable participants to select and sequence pharmacologic therapies to address pain, insomnia, and depression. Nonpharmacologic interventions are also needed to address psychosocial aspects of the illness and to augment pharmacologic therapies for physical issues. Approaches for selecting and sequencing these interventions will also be presented. Because of the multifaceted nature of the disease and its far-reaching medical and psychosocial manifestations, multidisciplinary collaboration is critical to ensure continuity of care through comprehensive treatment plans. Participants will receive a "Clinical Toolkit" containing assessment tools and patient handouts to facilitate the day-to-day implementation of diagnosis, treatment, and patient education.

Learning Objectives

1. Describe the pathophysiology of fibromyalgia.
2. Diagnose fibromyalgia using guideline-based physical examination and assessment tools.
3. Individualize pharmacologic regimens for patients with fibromyalgia, based on each patient's constellation of symptoms—especially pain, depression, and insomnia.
4. Engage in multidisciplinary collaboration to ensure a comprehensive treatment plan that integrates pharmacologic and nonpharmacologic interventions.

Faculty

I. Jon Russell, MD PhD (Moderator); Kim Dupree Jones, PhD RNC FNP;
Dennis C. Turk, PhD

Veritas Institute for Medical Education, Inc. is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. Veritas Institute for Medical Education, Inc. designates this educational activity for a maximum of 1.5 AMA PRA Category 1 CreditsSM. Physicians should only claim credit commensurate with the extent of their participation in the activity. Veritas Institute for Medical Education, Inc. is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. This program UFN 0394 000 20-002 L04 P acceptable for 1.5 Contact Hours. Initial release date: May 7, 2010. This activity has been submitted to New Jersey State Nurses Association for approval to award contact hours. New Jersey State Nurses Association is accredited as an approver of continuing nursing education by the American Nurses Credentialing Center's COA. Approval for psychologist credit is pending. Supported by an educational grant from Forest Research Institute, Inc., a wholly owned subsidiary of Forest Laboratories, Inc.

12:30–2 pm

Lunch Symposium

Practitioner's EdgeSM Application of Multimodal Therapy to Improve Patient Outcomes: A Clinical Case Challenge

This program is designed to review clinical strategies for opioid management and monitoring for patients with moderate to severe pain, with varying levels of risk for drug-related aberrant behavior, including high-risk patients. Such strategies may include use of multimodal therapy, continual reassessment, compliance monitoring, patient education, and cognitive-behavioral therapy. Guideline recommendations will be reviewed regarding management and monitoring of chronic opioid therapy for patients with chronic noncancer pain. A review of pharmacologic strategies designed to resist or deter drug-related aberrant behavior will be provided.

In this Practitioner's EdgeSM program, video vignette case studies will be utilized to illustrate clinically relevant examples of patients who may benefit from multimodal therapy. Faculty panel members will work with audience members to identify optimal treatment strategies

while discussing the latest scientific information with regard to pain management. A multimedia presentation will be interspersed with audience response questions to further engage the audience and provide data for rigorous panel discussion.

Practitioner's Edge is an innovative symposium format that provides attendees with cutting-edge medical education in a peer-to-peer discussion setting. The goal of the program is to provide practical tools and education that may be utilized immediately in daily practice.

Learning Objectives

1. Employ an evidence-based approach to the risk assessment and management of patients with chronic non-cancer pain.
2. Utilize guideline-based recommendations for monitoring patients receiving chronic opioid therapy.
3. Describe pharmacologic strategies intended to deter aberrant drug-related behaviors

Faculty

Lynn R. Webster, MD; Kenneth L. Kirsh, PhD

This independent commercially supported symposium is jointly sponsored by Postgraduate Institute for Medicine (PIM) and Integrity Continuing Education, Inc., through an educational grant from King Pharmaceuticals, Inc. CME credits will be awarded by PIM. PIM is accredited by the ACCME to provide CME for physicians. For information on the accreditation of the program, please visit www.pimed.com or contact Allison Hughes at (726) 295-5311.

12:30–2 pm

Lunch Symposium

Low Back Pain: Evaluation, Management, and Prognosis

This activity will bring together clinical and research experts to review and discuss the evaluation, treatment, and prognosis of patients presenting with low back pain. The live activity will consist of three didactic lectures and a question-and-answer session to provide an in-depth and comprehensive discussion of the epidemiology, disparate etiologies, and clinical assessment of both acute and chronic low back pain. Evidence-based treatment strategies, including pharmacologic and nonpharmacologic therapies, and the evolving research into early interventions for patients at high risk for transitioning from acute low back pain to chronic low back pain will also be presented.

Learning Objectives

1. Discuss the differential diagnosis for low back pain and the importance of clinical red and yellow flags in evaluation of low back pain.
2. Integrate evidence-based pharmacologic and nonpharmacologic therapies into a comprehensive treatment plan for chronic low back pain.
3. Evaluate research evidence of early interventions for acute back pain in patients considered at high risk for transition to chronic low back pain.

Faculty

B. Eliot Cole, MD MPA; Roger Chou, MD; Bill McCarberg, MD

University of California Irvine School of Medicine is the accreditation provider for this activity in conjunction with the Purdue University School of Pharmacy and Pharmaceutical Science; University of California, Irvine, College of Health Sciences, Program in Nursing Science and Allied International University. This session will offer continuing education for physicians, psychologists, nurses, and pharmacists. This symposium is supported by an educational grant from Lilly USA, LLC. Participants with any questions regarding continuing education earned through participation in this symposium should contact Bonnie Carroll at bcarroll@lilly.com.

APS 29th Annual Scientific Meeting, Corporate Satellite Symposia May, 2010 www.apsmeeting.org

APS-MDL00000042

Continuing Education

Noon-1:30 pm

Lunch Symposium

**Revisiting Pain Management in Cancer Patients:
Breakthrough Pain and Its Treatments**

In this program, the pathophysiology and characteristics of breakthrough pain will be reviewed as well as ways to assess and identify breakthrough pain when present. The prevalence of breakthrough pain and the negative impact in cancer patients will be explored. In addition, the pharmacokinetics of opioids, benefits and limitations of approved treatments for breakthrough pain, and investigational agents will be examined.

The concepts of opioid misuse, abuse, and addiction; ways to minimize risk in patients taking opioids; and strategies to address issues, including the implementation of Risk Evaluation and Mitigation Strategy (REMS) programs, will be discussed. Lastly, ways to improve collaboration with other healthcare providers to improve patient outcomes will be assessed.

Learning Objectives

1. Discuss the benefits and limitations of approved treatments for breakthrough pain and new investigational agents.
2. Describe the concepts of opioid misuse, abuse, and addiction.
3. Evaluate ways to minimize risk in cancer patients taking opioids and strategies to address issues when they arise, including the implementation of Risk Evaluation and Mitigation Strategy (REMS) programs.
4. Explore patient case studies to improve collaboration with other healthcare providers and optimize clinical outcomes for patients who experience breakthrough pain.

Faculty

Perry G. Fine, MD (Moderator); Larry C. Driver; Steven D. Passik, PhD

This symposium is jointly sponsored by Educational Review Systems and MedXcel, LLC. This session will offer continuing education for physicians, psychologists, nurses, and pharmacists. This symposium is supported by an educational grant from Meda Pharmaceuticals. Participants with any questions regarding continuing education earned through participation in this symposium should contact Steve Glass at sglass@egshp.org.

Noon-1:30 pm

Lunch Symposium

Mechanisms and Neuroplasticity of Pain: Clinical Implications

This educational activity will focus on the neurobiology of pain and will explore the latest research and developments in the science of pain, analgesia, and the clinical implications of this emerging data. In addition to research-based academic presentations, the program will include a highly interactive, case-based, continuous assessment discussion.

In the past decade there have been remarkable advances in the field of pain management, from a better understanding of the basic sciences to the mechanisms of pain, to state-of-the-art drug delivery systems and formulations. Most recently, emerging research suggests new advances with novel pharmacologic modalities. Some clinicians are often ill prepared to effectively assess pain and monitor the physiological consequences of suboptimal or excessive analgesia. This can lead to inadequate pain control, adverse effects of analgesia further complicating management, or the other extreme, overmedication that can result in serious consequences and risks for patient safety. New research has shown a correlation between unresolved acute pain experiences and the development of chronic pain attributed to neuroplasticity.

This educational activity will focus on the neurobiology of pain and it will explore the latest research and developments in the science of pain, analgesia, and the clinical implications of this emerging data.

There is a compelling need to provide education to understand the mechanisms of pain to improve the assessment and management of pain, increase awareness of the consequences of inadequate pain management, and diffuse knowledge into practice regarding effective treatment approaches and their associated benefits.

Learning Objectives

Upon completion of this activity the participants should be better able to

- Understand the molecular and cellular mechanisms that underlie pain.
- Evaluate the central concept of neuroplasticity and understand the clinical implications in the management of pain.
- Integrate pain management strategies that incorporate the concept of neuroplasticity and pain mechanisms for additive or synergistic analgesic effects to optimize outcomes in patients with pain.

Faculty

Sean Mackey, PhD; others TBA

This symposium is jointly sponsored by Penn State College of Medicine and Rockwood with co-providership from PCME and Glavis Education Group. This session will offer continuing education for physicians, psychologists, nurses, and pharmacists. This symposium is supported by an educational grant from Pfizer, Division of Ortho-McNeil-Janssen Pharmaceuticals, Inc., administered by Ortho-McNeil-Janssen Scientific Affairs, LLC. Participants with any questions regarding continuing education earned through participation in this symposium should contact Connie Giesler at CGIESLER@hmc.psu.edu.

Corporate Satellite Symposia

Corporate satellite symposia will be offered in conjunction with the APS 30th Annual Scientific Meeting. These independently sponsored, commercially supported symposia are open to the registrants of the APS 30th Annual Scientific Meeting. The programs have been reviewed by the APS Scientific Program Committee and approved after determining the topics to be presented are relevant to the audience and complementary to the official APS program. There is no fee to attend these symposia, but preregistration is required. Seating will be available at no charge to those responding on a first-come, first-served basis. Program details are subject to change. Speakers are subject to charge.

Please visit www.symposiareg.org/aps for the most current listing. New symposia are being added.

Symposium May 6

12:30–2 pm

Lunch Symposium

Opioid REMS in Practice: Measuring Success

Opioid Risk Evaluation and Mitigation Strategies (REMS) are being developed in the context of two opposing forces: increasing prevalence of chronic pain and growing prescription opioid abuse. Although it is necessary to ensure that the benefits of opioids outweigh the risks, pain patients need access to opioids because adequate pain control is essential to good medical practice. Although the scope of class-wide opioid REMS is best viewed as a national public health initiative with a laudable goal of reducing the incidence of prescription opioid abuse, the ultimate success of this initiative will be based on measurable results. In this symposium, we will focus on initiatives, including educational initiatives, that already have a track record of success in reducing opioid misuse and thus hold the promise of greater benefit with broader use.

Learning Objectives

1. Summarize the key benefits of opioid REMS from a public health perspective.
2. Discuss educational strategies that contribute to change in prescriber behavior.
3. Review elements of a successful approach to increase prescription opioid safety.

Faculty

Perry G. Fine, MD (Chair); Simon Budman, PhD; Nabarun Dasgupta, MPH; Erin Johnson, MPH

This activity is supported by an educational grant from Endo Pharmaceuticals, Inc. This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint sponsorship of Postgraduate Institute for Medicine (PIM) and Miller Medical Communications, LLC. PIM is accredited by the ACCME to provide continuing medical education for physicians. PIM designates this educational activity for a maximum of 1.5 AMA PRA Category 1 Credits™. For more information, contact: Jennifer Engelhardt at jengelf@pimed.com.

12:30–2 pm

Lunch Symposium

Unraveling the Progression of Acute to Chronic Pain: New Research and Clinical Perspectives

Most chronic pain conditions start with an acute pain episode (e.g., injury, surgery). While precise processes underlying acute pain transformation in the perioperative period remain to be elucidated, a key mechanism is believed to be abnormal central plasticity. Additionally, researchers have identified factors associated with persistent pain after surgery, which include early reported intensity of pain, psychological status, and potentially the mode and timing of analgesic intervention.

Numerous challenges face clinicians interested in treating patients with perioperative pain. One reason is the undert dosing and/or undertaking of short-term opioids because of a concern for opioid-related adverse events. Additional challenges include a lack of understanding of preemptive pain management strategies, inadequate use of nonopioid adjuvants, mistaken beliefs and expectations of patients, inconsistencies in pain assessment practices, and a lack of analgesic regimens that account for individual differences and requirements. Ultimately, poor pain control prolongs the recovery period, increases length of stay, and increases overall health care costs. Educational programs on the safe and effective use of pain models and treatments are needed for optimal pain management.

Learning Objectives

1. Identify mechanisms of pain and the role of central sensitization in pain progression.
2. Evaluate potential pain models that offer insight into acute pain transformation.
3. Employ clinical management strategies to prevent progression of acute to chronic pain.
4. Analyze research surrounding the use of analgesic and adjuvant analgesics in preventing or modifying pain progression.
5. Provide appropriate care and counsel for patients and their families (for nurses only).

Faculty

Sean Mackey, MD PhD (Chair); Bruce Nicholson, MD; Ian Carroll, MD MS; Edmund A. M. Neugebauer, PhD

This activity is jointly sponsored by Postgraduate Institute for Medicine (PIM) and Stanford and is supported by an educational grant from Gilead. PIM designates this live CME activity for a maximum of 1.5 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity. PIM is accredited as a provider of continuing medical education by the American Medical Association's (AMA) Commission on Accreditation. For a complete listing of the accreditation of this meeting, please contact Jennifer Fine, PIM or program manager, by phone 401.789.1413 ext. 205 or e-mail at jfine@pimed.com.

Americans with Disabilities Act

Event staff will be glad to assist you with any special needs for physical, dietary, and other needs. Please contact Andrea Hall prior to the live event at ahall@pimed.com.

Friday, May 20

6:45–8:15 am

Breakfast Symposium**Fibromyalgia Syndrome: Pathophysiology, Comorbidities, and Treatment Considerations**

Fibromyalgia syndrome (FMS) is a common and disabling condition that impacts the lives of millions of people. It has been estimated that FMS affects approximately 10 million Americans. The most common symptoms of fibromyalgia include widespread pain over the entire body, pain at specific tender points, fatigue, cognitive problems, sleep and mood disturbances, and impaired functioning. The treatment of FMS is not standardized and often ineffective, and the course of disease progression is unpredictable. Although the syndrome is now more widely recognized and understood, its treatment remains challenging and some physicians believe that no effective treatment exists. This program will identify comorbid conditions that overlap with FMS, describe the pathophysiology of FMS, and discuss best practices in the treatment and management of FMS to improve patient outcomes.

Learning Objectives

1. Explain the complex pathophysiology of FMS.
2. Identify comorbid and overlapping conditions and how they affect the diagnosis and treatment of FMS.
3. Review the mechanisms of action and efficacy and safety data of FDA-approved agents for fibromyalgia.
4. Discuss the potential role of emerging agents in the management of FMS.
5. Outline strategies that combine evidence-based pharmacologic and nonpharmacologic treatments for FMS with the goal of optimizing patient outcomes.

Faculty

Daniel Clauw, MD (Chair); Lesley M. Arnold, MD; Dennis Turk, PhD

This activity is funded through an educational grant from Forest Research Institute, a subsidiary, research and information, Inc. (FRI) designates this educational activity for a maximum of 1.5 AMA PRA Category 1 Credits™. Physicians should only claim credit and measure with the extent of their participation in the activity. CME is accredited by the Accredited to provide continuing medical education for physicians. For more information about maintaining CME, please contact CME, MedNet at 312.553.8031.

12:30–2 pm

Lunch Symposium**Translating Advances in Pain Science and Therapeutic Approaches to Practice**

This symposium will discuss methods for evaluating the patient with chronic pain, review multimodal therapeutic interventions aimed at optimizing pain control, and assess strategies for managing risk associated with opioid diversion and abuse while effectively treating pain.

Learning Objectives

1. Assess the nature of chronic pain and the risk of opioid misuse in an individual patient to determine appropriate treatment modalities.
2. Select optimal therapies for individual patients with chronic pain, drawing from evidence-based medicine.
3. Identify novel therapies for pain that may facilitate management of the patient with recalcitrant or recurrent pain.

Faculty

Martin Grabois, MD (Chair); Steven Passik, PhD; Rosemary Polomano, PhD RN FAAN

This activity is supported by an educational grant from Janssen Fibromyalgia, Inc. CME is accredited by the ACCME to provide continuing medical education for physicians. This activity has been approved for 1.5 AMA PRA Category 1 Credits™. CME is an approved provider of continuing nursing education by the Illinois Nurses' Association, an accredited provider by the ANCC Commission on Accreditation. On May 20, 2011, will be awarded for this educational activity. This program is co-sponsored by the Wisconsin Psychiatric Association and DHEW, WAA, approved by the American Psychiatric Association. CME is offered continuing education for psychologists. WAA is a member organization for the program.



This activity is eligible for AGPs credit; see final CME activity announcement for specific details. Please contact Jessica Horvath at jhorvath@fribio.com or 312.553.8031 with any questions.

6:15–9 pm

Poster Gallery Reception, Dinner Symposium, and Dessert Reception**Clinical Case Challenge in Pain: Mechanisms, Models, and Multimodal Management**

In the past decade there have been remarkable advances in the field of pain management, from a better understanding of the neurobiology of pain and its mechanisms, to state-of-the-art drug delivery systems and formulations. Optimal management of patients with pain is increasingly driven by an understanding of the mechanisms of pain, which allows providers to utilize multimodal therapies and approaches through a multidisciplinary team. Many pain clinicians are still ill-prepared to effectively assess pain, and monitor the physiological consequences of suboptimal or excessive analgesia, especially when dealing with complex and challenging patients with pain. This can lead to inadequate pain control, hard to manage adverse effects from analgesia, or overmedication resulting in serious patient safety consequences and risks. This initiative is designed to encourage active problem solving by immersing the learner in a clinical decision process. Through challenging patient scenarios, clinicians will apply and reinforce their clinical knowledge to the gaps identified.

Learning Objectives

1. Differentiate between nociceptive, neuropathic, and mixed pain states and their physiological significance.
2. Assess the molecular and cellular mechanisms that underlie pain and recognize the central concept of neuroplasticity.
3. Describe how to integrate multimodal pain management strategies into clinical practice.

Faculty

Peny G. Fine, MD (Chair); Sean Mackey, MD PhD; TBD

This symposium is jointly sponsored by Pain State Congress and Rockport Corporation. This session will offer continuing education for physicians, psychologists, nurses, and pharmacists. This symposium is supported by a grant from the National Institute on Drug Abuse, National Institutes of Health, and the National Institutes of Health. Participants with any questions regarding continuing education earned through participation in this symposium should contact Dr. Penelope Fine at BBKLER1@hmc.psu.edu.

Tweet from the Meeting to #ampainassoc

APS 30th Annual Scientific Meeting, Corporate Satellite Symposia, May, 2011

Corporate Satellite Symposia

Corporate satellite symposia will be offered in conjunction with the APS Annual Scientific Meeting. These independently sponsored, commercially supported symposia are open to the registrants of the APS 31st Annual Scientific Meeting. The programs have been reviewed by the APS Scientific Program Committee and approved after determining the topics to be presented are relevant to the audience and complementary to the official APS program. There is no fee to attend these symposia, but preregistration is required. Seating will be available at no charge to those responding on a first-come, first-served basis. Program details are subject to change. Speakers are subject to change.

Please visit www.symposiareg.org/aps for the most current listing. All symposia are located at the Hawaii Convention Center. Please see onsite materials for the most up-to-date information.

Thursday, May 17

11:45 am–1 pm

Room 313

Non-CE Lunch Corporate Satellite Symposium

Pain Treatment, Abuse, Addiction, and Psychiatric Comorbidities: Latest Thinking and Future Treatment Possibilities

Learning Objectives

- Enhance knowledge of the latest information on interplay between pain treatment, abuse, addiction, and psychiatric illnesses.
- Understand how preclinical studies work and how they help predict future care.
- Understand the interplay of diseases that may affect patient outcomes.
- Increase knowledge of the latest pain treatments with pros and cons.
- Gain new ideas on how to optimize care across boundaries

One-third of Americans suffer from pain. A majority of patients visiting pain centers have psychiatric illnesses. There is a complex interplay between pain, abuse, addiction, and psychiatric illness. The latest preclinical research data may help provide clinical insights. This meeting is designed to allow experts from clinical, preclinical, pain, and psychiatry areas to discuss the latest information. The Q-and-A session is designed to engage the audience in a discussion on how best to treat patients across boundaries. A key topic will be how to use emerging treatment guidelines to help patients and engage the full treatment team most productively.

Faculty

Lynn Webster, MD, FACPM, FASAM (Chair); Steven Passik, PhD; David Gauvin, PhD

This activity is funded through an educational grant from NENTAR Therapeutics.

11:45 am–1 pm

Room 316

Non-CE Lunch Corporate Satellite Symposium

Pathophysiology of Pain: Processes, Plasticity, and Perception

Pain transmission and processing occurs in the peripheral and central nervous systems.¹ Acute pain serves as a warning to prevent damage.² Chronic pain is defined as pain that persists beyond acute pain or beyond the expected time of normal healing.³ This presentation will review pain pathways in the peripheral and central nervous systems and the mechanisms leading to the development of chronic pain.

References

1. Scholz J, Woolf CJ. Can we conquer pain? *Nat Neurosci*. 2002;5(suppl):1062-1067.
2. Woolf C. Pain: moving from symptom control toward mechanism-specific pharmacologic management. *Ann Intern Med*. 2004;140(6):441-451.
3. American Chronic Pain Association. ACPA Consumer Guide to Pain and Medication and Treatment. Rocklin, CA: American Chronic Pain Association; 2010:7.

This program is sponsored by and the speaker is presenting on behalf of Lilly USA, LLC. It is being presented consistent with FDA guidelines and is not approved for continuing education credit. Lunch will be provided for attendees of this program.

If you are a US Medical Doctor or Doctor of Osteopathy with a "active" state license number, the value of the food, beverage, and/or educational item that you receive when attending this program will be disclosed on Eli Lilly and Company's Physician Payment Registry as a transfer of value made to you by Eli Lilly and Company. If you are a healthcare professional licensed in a state with laws requiring payment disclosures, the value of the food, beverage, and/or educational item provided to you at this program will be reported to the applicable state government. As a result of enacted state regulations food and beverage will not be provided for healthcare professionals licensed in the states of Minnesota, Massachusetts, and Vermont. Additionally, educational items will not be provided to healthcare professionals licensed in Minnesota. Several states also prohibit state government employees from receiving, or being provided, gift items which may include educational materials and meals. Please consult your state regulatory and ethics laws to see if such prohibition would apply to you. This medical presentation is intended only for treated healthcare professionals for whom the information to be presented is relevant to their practice. We regret that spouses or other guests cannot be accommodated.

Friday, May 18

6:15–7:15 am

Room 313

CE Breakfast Corporate Satellite Symposium

Managing the Many Faces of Pain: Utilizing a Patient-Centered Approach to Care

Learning Objectives

- Utilize pain-centered approaches to effectively manage chronic pain.
- Discuss evidence-based strategies to manage different types of patients experiencing chronic pain.
- Select an appropriate analgesic based on patient factors and pain type.

In the last decade there have been many advances in the field of pain management. Clinicians, including pain specialists, physicians, pharmacists, nurses, and other allied healthcare personnel, must understand and recognize these new developments to accurately evaluate and assess pain. A new and important strategy in the healthcare field is the utilization of patient-centered approaches to pain management. However, this requires greater knowledge, skills, and the application of these skills in both understanding the mechanisms of pain and utilizing the available agents to provide effective and safe pain relief.

Program Agenda

1. Understanding Pain Management: Are We There Yet?
2. Placing Pain Management as a Healthcare Priority
3. Assessment and Management Approach for Chronic Pain
4. What is New in Chronic Pain Management?
5. Recognizing the Clinician's Role in Pain Management
6. Practice Cases with Take-Home Messages

Faculty

Osvaldo A. de Leon-Casasola, MD (Chair); Jeff Gudim, MD

This educational activity is jointly sponsored by the Center for Independent Healthcare Education and Vermed MedEd and is supported by an educational grant from Purdue Pharma, Inc.

This activity has been planned and implemented in accordance with the Essential Areas and Elements and Accreditation Policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of Center for Independent Healthcare Education and Vermed MedEd, LLC. Center for Independent Healthcare Education (Center) is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians. Center for Independent Healthcare Education designates this live activity for a maximum of 1.0 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity. This activity is also eligible for ADPE credit, ANCC credit, and APA credit. For questions regarding CME accreditation of this activity, please contact Center at info@centerforindependent.com.

12:15–1:30 pm

Room 313

Non-CE Lunch Corporate Satellite Symposium

New Perspectives in the Management of Moderate to Severe Acute and Chronic Pain

This symposium offers an effective treatment option for chronic pain in adults. Faculty will discuss topics including

- proven efficacy
- proven safety profile
- favorable tolerability profile
- discontinuation rates.

Faculty

Suniti J. Panchal, MD

This activity is funded through an educational grant from Janssen Pharmaceuticals, Inc.

12:15–1:30 pm

Room 316

Non-CE Lunch Corporate Satellite Symposium

Time to Move Beyond Laxative Therapy? RELISTOR® for Opioid-Induced Constipation in Advanced Illness

This promotional presentation, funded by Salix Pharmaceuticals, Inc., is designed to help clinicians respond to the unique challenges posed by opioid-induced constipation (OIC) in patients with advanced illness when laxative therapy has been insufficient. The program will describe those challenges, present a current treatment algorithm for management of OIC, and provide an overview of key clinical data on RELISTOR® for the treatment of OIC in patients with advanced illness.

Faculty

Gregory Holmquist, PharmD

This activity is funded through an educational grant from Salix Pharmaceuticals, Inc.

5:30–7:30 pm

Hilton Hawaiian Village, Tapa 2

Non-CE Dinner Corporate Satellite Symposium

BOTOX®: A Novel Approach to the Treatment of Chronic Migraine

This activity is supported by Allergan, Inc.