

Volume 43, Issue 10, December 2023

Australian Pain Society Newsletter



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THE
AUSTRALIAN
PAIN SOCIETY

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Editor's Note

Dr Lincoln Tracy



Another year has come and gone, and I'm filled with a mix of "where did all the time go?" and "wow, I really packed a whole lot into 12 months". I'm sure many APS members can relate, balancing clinical and/or research work with teaching, service, and the broad range of other activities we pursue in personal and professional settings.

Congratulations to the Pain in Child Health (PICH) Down-Under Organising Committee on the launch of their new consortium. The Canadian PICH program has done great work for several years, and it is exciting to see this initiative develop in our part of the world. I look forward to seeing what the Organising Committee brings to Australia and our southern hemisphere neighbours in years to come.

It was delightful to read the reports from various state social networking events held over the last few weeks. It's clear to see the enjoyment in all those who attended. Keep an eye out for more social events in 2024 – these are a great way to make and maintain connections outside of the ASM.

Thanks to everyone who has contributed to the eNewsletter in 2023, whether you have submitted a recent publication, reviewed a

journal article, or kept the broader membership up to date on what you and your colleagues have been getting up to. The eNewsletter is a great platform to communicate with the membership, so I recommend contributing in 2024 if this is something you have been thinking about.

My biggest thanks to the eNewsletter team – Tracy, Kylie, and Jo – for another fun and successful year, and to the Board for their ongoing encouragement and support of our work. I know I might start to sound like a broken record, but there is an incredible amount of behind-the-scenes organisation that goes into the ten eNewsletter editions each year and we would have nowhere near as polished a product if it weren't for all the incredible effort the team puts in.

I wish all APS members (as well as their families and loved ones) a safe and enjoyable holiday period and look forward to seeing everyone again in 2024 after a well-deserved break.

Cheers,
Lincoln

President's Report

Joyce McSwan



Hi APS Family!

I hope this edition finds you all healthy and well as we come into the spring and summer season! I can't believe it is coming to the close of year and festivities are just around the corner!

As I round up this year, I am thrilled at the many opportunities I have had to represent the multidisciplinary membership of the APS. It has been another busy couple of months since my last report.

Let me highlight some significant events, hot-off-the-press news, major projects, and advocacy the APS is focusing on.

Recently I represented the APS at the inaugural ANZBACK Public Lecture, hosted by The University of Sydney, highlighting three key research studies in low back pain: the OPAL, RESOLVE, and RESTORE trials. It was wonderful to be alongside esteemed colleagues, Professors Peter O'Sullivan, Andrew McLachlan, and Lorimer Moseley as they discussed the significance of these trials in managing low back pain. I was pleased to highlight their application in clinical practice and the importance of a multidisciplinary approach to pain management in low back pain.

I am also delighted that, on behalf of the APS, my application to be on the inaugural board of the Australian Pain Solutions Research Alliance (APSRA) was successful. I look forward to working with the newly elected Board in advancing and promoting pain research activity in Australia and fostering solution-focused research that is meaningful to consumers.

We also recently learnt of the news of the merger between Chronic Pain Australia (CPA) and the Australian Pain Management Association (APMA), two significant consumer organisations representing those living with pain. Congratulations to both CPA and APMA and no doubt their collective efforts will continue to lay a strong foundation for the road ahead. We look forward to supporting this new organisation and applaud their efforts to date in advocating for those living with persistent pain.

Stemming from the APS Board's recent Strategic Planning Meeting, one of our focus areas will centre on finalising the establishment of a mentorship program for clinicians, researchers, committee members, and Board members. This program is currently under development and will help to develop our early career clinicians and researchers, support those taking on broadened or different roles, and assist with succession planning in our labs, clinics, and the Board. I believe this will be a wonderful value-add to our membership and we aim to launch a pilot program next year! Please watch upcoming eNewsletters for progress updates, calls for applications, and expressions of interest.

We continue to work closely with PainAustralia and the Faculty of Pain Medicine to ensure better outcomes for our patients. We are also progressively building on our advocacy work on the experience of pain in the disability sector.

We are grateful for our enduring partnership with the Cops for Kids (CFK) Clinical Research Grant program. Congratulations to Nicole Pope for being the seventh recipient of the grant and we look forward to her research on "Virtual Reality in Paediatric Chronic Pain Rehabilitation: A Multi-site Pilot Feasibility Study".

Planning for the 2024 Annual Scientific Meeting (ASM) in Darwin continues to gather momentum with a record number of Topical Session applications submitted this year. The social program is exceptional thanks to the DCC&A team, with some additional offroad tours, a day trip to the Litchfield National Park, Crocosaurus Cove, Royal Flying Doctors Service (RFDS) Darwin Tourist Facility, and Charlie's of Darwin Gin Tasting. Not only do we learn together, but enjoying the social activities allows us to build camaraderie that is truly invaluable!

The Scientific Program Committee (SPC) held a full day meeting on Saturday 28 October to finalise planning for the 2024 conference and commence planning for 2025! The continued dedication of this exceptional committee

enables us to enjoy the high quality of the ASM, for which we are very grateful.

A heartfelt thanks to all of our dedicated volunteers on the Board, Professor Kevin Keay who chairs our SPC, the amazing volunteers on the committee who support him, our outstanding executive and secretariat officers Tracy and Kylie, and all in the DC Conference & Association Management (DCC&A) team, we truly appreciate your help this year as we work

together in bringing our best to support the APS membership!

Wishing you and yours a safe and healthy festive season and every success in the new year!

With gratitude,
Joyce McSwan

Strategic Plan Projects

AUG23 – AUG25

Membership	<ul style="list-style-type: none"> • Establish an APS membership mentorship program • Local Networking Events
Research	<ul style="list-style-type: none"> • Administer Research Clinical Research Grants
Education	<ul style="list-style-type: none"> • Organise painSTAR 2024
Services and resources	<ul style="list-style-type: none"> • Develop an APS position statement regarding pain management in aged care • Review and update the APS Position Statement on 'The role of the Psychologist in the management of pain' 4th Edition
Good governance and operations	<ul style="list-style-type: none"> • Review the APS By-Laws
Advocacy	<ul style="list-style-type: none"> • Continued submissions to promote and support pain management, with a key focus on better pain management in the disability sector: https://www.apsoc.org.au/Advocacy



**2024 AUSTRALIAN PAIN SOCIETY
44TH ANNUAL SCIENTIFIC MEETING**
In the IASP Global Year about Sex and Gender Disparities in Pain
DARWIN CONVENTION CENTRE, NT

Registrations Now Open!

Get in early and secure your place at Australia's only multidisciplinary conference offering insights into the complex nature of pain management from a variety of medical, nursing, research, and allied health perspectives.

To register please click [here](#)

Considering the benefits of APS membership?

Save on your APS 2024 registration fee!

Early Bird Deadline - Register before 27 February 2024	
Non-Member Registration Price VS Becoming an APS Member	\$1,495 OR Being a member saves you up to \$480 after membership fees!
APS Student Member Registration Price	Only \$275 Being a member saves you \$1,155 after membership fees!

Tell your colleagues who are interested in attending APS 2024 so they can save on their registration too!

[Become an APS Member here](#)

Should you have any queries about the conference, please contact the [Conference Secretariat](#).





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Program Now Available

2024 will bring us more challenges
in the IASP Global Year about Sex and Gender Disparities in Pain.

You can look forward to an extensive program including seven pre-conference workshops, two international speakers, seven national speakers, 18 topical sessions, and ten social functions.

Follow the links to start planning your conference experience today!

[Program Overview](#)

[Keynote Speakers](#)

[Pre-Conference Workshops](#)

[Topical Concurrent Sessions](#)

[Social Program](#)

[Trainee Session](#)

For information on APS 2024 visit the [website](#)

We look forward to welcoming you to [Larrakia country/Darwin, NT!](#)





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Late Breaking Abstract Call

Did you miss your chance to submit your abstract for inclusion at APS 2024 in Larrakia country/Darwin?
Finalised your research only after the original abstract deadline?

If yes, don't despair!

**This late breaking research call is your last opportunity
to submit an abstract for the 2024 conference!**

Take up this opportunity and have your work featured as a poster presentation at the only multidisciplinary conference in Australia offering insights into the complex nature of pain management from a variety of medical, nursing, research, and allied health perspectives.

Abstracts can be submitted between **Monday 5 February – Monday 12 February 2024.**

All accepted authors must register for the conference by
the early bird deadline of **Tuesday 27 February 2024.**

Connect with [renowned experts](#) and hear them speak about new advances in pain management.

Enjoy [18 clinical and research topical sessions](#).

Attend the [Trainee Session](#) to receive practical tips about building your career in pain research.

Be a part of the future of pain science and management!

For further information please visit the [conference website](#).

Should you have any queries regarding your submission or the process,
please contact the [Conference Secretariat](#).



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21-24 APRIL
APS2024

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PAIN IN CHILDHOOD PRE-CONFERENCE WORKSHOP

Managing acute and chronic pain for vulnerable children

8.30am - 12.30pm, Sunday 21 April 2024
Darwin Convention Centre, NT

Registration Fees starting from \$160

WORKSHOP OVERVIEW

This multidisciplinary workshop commences with evidence showing links between sensory modulation and pain and treatment options, followed by research focused on pain experiences of children with cerebral palsy and developmental disabilities.

The second section of the workshop explores procedural pain; initially considering improving procedures for children who have experienced medical trauma. Finally, we will open general multidisciplinary discussion of Australian and international procedural pain management experiences to inform the development of future procedural pain guidelines.

For further information: www.dconferences.com.au/aps2024 Questions? Please email us at apsasm@dconferences.com.au



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PHARMACOLOGY IN PAIN MANAGEMENT PRE-CONFERENCE WORKSHOP

1.30pm - 5.00pm, Sunday 21 April 2024
Darwin Convention Centre, NT

Registration Fees starting from \$160

WORKSHOP OVERVIEW

This interactive workshop will focus on the latest pharmacological evidence to manage pain in complex patients with end stage kidney disease and palliative care. Practical tips will be discussed and emerging trends in pain management will be presented. This includes the emerging role of medicinal cannabis for pain management and how real time prescription drug monitoring programs can be used to optimise pain management strategies. Practical cases studies will be presented to ensure members from a variety of healthcare settings can implement the latest principles for pain management.

For further information: www.dconferences.com.au/aps2024 Questions? Please email us at apsasm@dconferences.com.au



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PSYCHOLOGY IN PAIN MANAGEMENT PRE-CONFERENCE WORKSHOP

Diving into the connections between trauma and complex chronic pain

8.30am - 12.30pm, Sunday 21 April 2024
Darwin Convention Centre, NT

Registration Fees starting from \$160

WORKSHOP OVERVIEW

This workshop provides an opportunity for discussion of the broader psychological issues in pain management, including understanding mechanisms of behavioural change, prevention of chronicity, and the challenges of managing the complexity of mental health comorbidities.

For its inaugural event, the 2024 workshop will focus on the complexity of managing chronic pain and trauma, and will aim to provide a deeper understanding of this relationship to more effectively inform clinical decision-making. It will teach a set of foundational principles from pain neuroscience and a trauma-informed perspective to effectively guide the assessment and management of those with pain and trauma.

NEW

For further information: www.dconferences.com.au/aps2024 Questions? Please email us at apsasm@dconferences.com.au



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ACUTE PAIN DAY PRE-CONFERENCE WORKSHOP

8.30am - 5.00pm, Sunday 21 April 2024
Darwin Convention Centre, NT

Registration Fees starting from \$160

WORKSHOP OVERVIEW

This workshop aims to be engaging and practical with a focus on managing acute pain and the challenging cohort with co-existing chronic pain.

In keeping with territory strengths we will explore strategies to engage Indigenous Australians. There will be a session focusing on pelvic pain and a third session with world class speakers from physiotherapy and psychology sharing strategies for the acute pain round and finish the day with some topical, cutting edge pharmacology.

The workshop is divided into two half days and we encourage attendance at both.

For further information: www.dconferences.com.au/aps2024 Questions? Please email us at apsasm@dconferences.com.au



21-24 APRIL
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BASIC PAIN RESEARCH PRE-CONFERENCE WORKSHOP

1.30pm - 5.00pm, Sunday 21 April 2024
Darwin Convention Centre, NT

Registration Fees starting from \$160

WORKSHOP OVERVIEW

This workshop will showcase the latest in Australian basic pain research from early to mid-career and senior researchers and provide a forum to discuss mechanisms of nociception and pain across all levels of investigation: from molecular and cellular analyses to studies in animals and humans (pre-clinical or clinical).

The workshop is open to all interested in mechanisms of nociception and pain, including basic and clinical researchers, health professionals and students at all levels.

For further information: www.dconferences.com.au/aps2024 Questions? Please email us at apsasm@dconferences.com.au



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FUNDAMENTALS OF PAIN PRE-CONFERENCE WORKSHOP

8.30am - 12.30pm, Sunday 21 April 2024
Darwin Convention Centre, NT

Registration Fees starting from \$160

WORKSHOP OVERVIEW

This will be a succinct overview of the physiology, clinical assessment, and clinical management of pain. The workshop is aimed at the general practitioner, specialist, allied health clinician or psychologist looking for an introduction to, or update on, persistent pain management.

This workshop is grounded in a biopsychosocial understanding of pain mechanisms and developing a mechanism-based approach to pain assessment and management. And will compliment those with an interest in attending one of the afternoon sessions on pharmacology, psychology or physiotherapy.

For further information: www.dconferences.com.au/aps2024 Questions? Please email us at apsasm@dconferences.com.au



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PHYSIOTHERAPY IN PAIN MANAGEMENT PRE-CONFERENCE WORKSHOP

Cross-cultural opportunities and challenges in pain management

1.30pm - 5.00pm, Sunday 21 April 2024
Darwin Convention Centre, NT

Registration Fees starting from \$160

WORKSHOP OVERVIEW

This workshop will present an overview of opportunities and challenges in pain management in Aboriginal and Torres Strait Islander Communities.

A considerable proportion of the workshop will be spent identifying, discussing and practising culturally-informed strategies, including the Clinical Yarning model of clinical communication, to enable attendees to develop their skills in working with this population group. This workshop will be highly practical, appropriate for any clinician who deals with patients in pain. The specific skills practiced in this workshop will be able to immediately implemented into clinical practice.

For further information: www.dconferences.com.au/aps2024 **Questions?** Please email us at apsasm@dconferences.com.au

Would you like to be featured in an APS member spotlight?

Email the APS Secretariat (aps@apsoc.org.au) if you would like to complete a short interview to introduce yourself and your work to the broader membership.

More reasons to attend the Darwin Annual Scientific Meeting

By Trudy Maunsell, Immediate Past-President, Current SPC Member



I loved reading Alex Robertson's (APS Conference Manager for DC Conference & Association Management) November eNewsletter article on reasons to spend the ANZAC long weekend in Darwin.

Some of us may remember the fantastic meeting we last had in Darwin back in 2011, and I'm excited to report the program for the upcoming conference is just as interesting. Rest assured I won't be climbing into the pool with the big salties at Crocosaurus Cove pool like former President Tim Semple – I'm not nearly brave (or fit enough!) for such activities.

We've got a great array of [speakers both national and international](#), with the conference theme based on the IASP Global Year about Sex and Gender Disparities in Pain. Keynote speakers include Professors Christine Chambers and Chery Stucky – both renowned researchers with a passion for sharing their knowledge and promoting the development of graduate students, post docs, technicians, junior faculty, and clinicians alike. They will not only share their research via plenary sessions but will also provide words of wisdom with experienced Australian researchers and clinicians at the [Trainee Session](#) on Monday night.

As always, we have a great selection of [pre-conference workshops](#) on Sunday including: Acute Pain, Fundamentals of Pain, Pain in Childhood, Basic Pain Research, Pharmacology in Pain Management, Physiotherapy in Pain Management, and the new Psychology in Pain Management.

Why not come to Darwin on Friday, recharge the batteries with a fantastic trip to the beautiful [Litchfield National Park](#) on Saturday and then start sparking the brain cells and catching up with new and old friends and colleagues on Sunday?

We've received our highest number of submissions for topical workshops, covering a broad range of disciplines, areas of interest, specialties, and activities. The enthusiasm of our membership to take part in the ASM is so heartening with the opportunity to hear of some of the great work being done here at home always a plus. The full program is now available on the [conference website](#).

[National speakers](#) include Drs Charlotte Elder and Nik Veldhuis, Associate Professor Tasha Stanton, and Professors James McAuley, Louise Sharpe, Helen Slater, and Toby Newton-John. I'm looking forward to hearing them present as they are all passionate about their research and clinical practice.

Who can miss the Rapid Communication Sessions where brave paper and poster presenters provide a precis of their work before the rising crescendo of music drowns them out? Join me in holding your breath whilst they participate, cheering them on, and then catching up for a chat.

Registrations are now open via the [conference website](#) and I urge you to get organised and register early. I look forward to seeing you in tropical Darwin!

Dr Daryl Salmon, MBBS, FFARACS, FANZCA, FFPMANZCA

By Fiona Hodson, CPA Vice President, APS Past President

Dr Daryl Salmon, pain medicine specialist and past elected NSW APS Director, sadly and suddenly passed away on 4 September 2023. A memorial service to honour his life and achievements was held on Tuesday 12 at Belgenny Farm, Camden. He was surrounded by his wife Glenda, family, friends, and his beloved “farm” animals.

For those who did not know Daryl, he had a long and illustrious career in anaesthetics and later specialised (and ended his career) in pain medicine. He graduated from the University of Melbourne Medical School in 1961. He then undertook active service working as an anaesthetist with the Australian military in Malaya, Borneo, and South Vietnam, where he reached the rank of Colonel in the Royal Australian Army Medical Corp before his retirement in 1991. It was his active service that sparked Daryl's interest in improving pain management in mass casualty situations.

Daryl then completed a residential pain management course at Oxford pain relief unit, with subsequent clinical placements with internationally renowned clinicians with an interest in multidisciplinary pain management. He became a VMO anaesthetist at Liverpool Hospital, NSW, establishing the acute pain service in 1989. He also initiated a multidisciplinary private practice, Waratah Pain Management, in the same year, where he began spinal modulatory and radiofrequency techniques. From there he became the full time Director of both the Pain Medicine and Research Centre at Liverpool Hospital, and SSWAHS (Western) Area pain services.



Dr Daryl Salmon & Prof Michael Cousins AO at the opening of the Pain Management Centre, Liverpool Hospital in 1999.



Dr Daryl Salmon with his beloved animals

I joined the multidisciplinary pain team at Liverpool Pain Centre as the new CNC under the directorship of Dr Salmon in 1998. Daryl was a very tall man, who stood well over six and a half feet tall. Many felt a little intimidated by his presence, but I used to call him a “gentle giant” as his dedication to improving the speciality of pain medicine quickly became apparent.



Dr Daryl Salmon receiving his APS Distinguished Member Award from A/Prof Malcolm Hogg in 2014 (Hobart)

A Foundation Fellowship of the Faculty of Pain Medicine was bestowed upon Daryl in 1999. Other commitments included his APS NSW Director role in 2003, representation on pain related working parties and committees, and ongoing training of all multidisciplinary health professionals, much of this in his own time. Then in 2014, Daryl received the APS Distinguished Member Award in Hobart for his commitment to the APS and the specialty of pain management.

Aside from his generosity and attention to detail, especially in getting his input (via his famous red pen) for briefs or submissions, those who knew Daryl well and worked with him would also be familiar with his very quick and cheeky wit. I too experienced this firsthand when working collaboratively with Daryl, both clinically and whilst we undertook the refurbishment of the “old radiology” department at Liverpool hospital to become a dedicated pain facility with a multidisciplinary nucleus, including a procedural space. This pain centre was officially opened in 1999 by Professor Michael Cousins AO and continues as a Multidisciplinary Tier 3 Pain Centre today.

Daryl was my friend and pain mentor. He will be very much missed by many, but his strong legacy will continue in the specialty of pain medicine.

WA Opening of the new Dr Roger Goucke Pain Management Centre

By Jacintha Bell, WA Director

25 July 2023 was a momentous day when we donned our best smiles and headed to the grand opening of the Dr Roger Goucke Pain Management Centre.

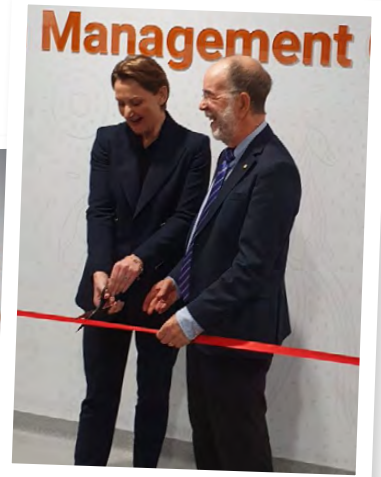
As the WA Director for the Australian Pain Society, and a former colleague of Dr Goucke's, I had the privilege of attending this very special occasion. The atmosphere was buzzing with excitement as we gathered to witness the official inauguration of this fantastic new facility. Dr Roger Goucke himself, Dr Rajiv Menon (Head of Department – Pain Management), and the esteemed Minister for Health, The Honorable Amber-Jade Sanderson, were the stars of the show.

The guest list was extensive. Dr Goucke's former colleagues, his beautiful family, and the stellar team from the Pain Management Centre graced the occasion.

The Pain Management Centre, now located at Osborne Park Hospital, WA, is a breath of fresh air—literally! Unlike its somewhat gloomy predecessor at Sir Charles Gairdner Hospital, this building is light, bright, and cheerful. It's like moving from a basement to a penthouse!



L to R: Jacintha Bell and Dr Roger Goucke



L to R: The Honorable Amber-Jade Sanderson and Dr Roger Goucke

This day was more than just a ribbon-cutting ceremony; it was a heartfelt tribute to Dr Goucke's unwavering dedication. He's been a driving force behind the progress of pain management services in WA and further afield as well as being an APS Past President and Distinguished Member. This honour was well-deserved, and we couldn't be happier to celebrate it with him.

As we mingled, laughed, and enjoyed the festivities, it became clear that this new chapter promises even brighter horizons for pain management in WA, with Dr Goucke's legacy leading the way. Congratulations Dr Goucke, and well done to Dr Rajiv Menon and the team at the Dr Roger Goucke Pain Management Centre.



Women in Health

Development Scholarships Available

www.wla.edu.au/industry/health

 **WOMEN & LEADERSHIP AUSTRALIA**

Invitation to Join the APS Scientific Program Committee

The Scientific Program Committee (SPC) is a sub committee of the Australian Pain Society (APS) who organise the Annual Scientific Meetings (ASM). The SPC reports directly to the Board of the APS and consists of the Chair, plus members from basic and clinical research, and representatives across all the professional disciplines for whom pain management, pain research or pain education is a key focus.

The SPC is looking for **TWO** interested APS members to join the SPC, who can help guide the direction of the ASMs and ensure that all areas of pain are represented at Australia's only multidisciplinary conference offering insights into the complex nature of pain, pain management and pain education.

The Purpose of the SPC is:

- To be a collaborative team that will provide continuity of program from year to year
- To ensure quality and diversity of the program to meet the interest and expectations of all members of the society
- Ensure the breadth and depth of topics of national and international interest and importance
- To provide historical perspective on meetings, including keeping records of previous speakers and major topic areas already covered in past meetings
- To support the Convenor and Chair

Responsibilities of the SPC are:

- To determine the overall program content, including the IASP annual focus
- To review and evaluate delegate feedback from prior ASMs
- To select and invite international speakers
- To select and invite national speakers
- To nominate speakers for the APS named lectures
- To determine the topics and speakers for the invited topical sessions

- To ensure the program addresses relevant and current topical issues
- To ensure the committee approves all pre- or post- conference meetings associated with the ASM and makes a recommendation to the Board for adoption.
- To ensure the planning of the meeting meets the deadlines of the critical path
- To ensure that the planning of the conference is in line with approved budgets
- To review submitted topical sessions and submitted abstracts
- To assist with marketing the ASM and encourage attendance
- To assist with securing sponsors and exhibitors

Responsibilities of SPC members

- SPC teleconferences are held every 4-6 weeks on a Tuesday afternoon at 4.30pm (time zone based on NSW). The meetings last 90 minutes.
- There are two longer meetings each year:
 - Full day meeting in November
 - Half day meeting on the Sunday of each ASM
- SPC members must attend more than 50% of scheduled videoconferences to retain office

To apply

- Please email APS Conference Manager [Alex Robertson](#) with the following information:
 - Your resume/CV
 - Responses to the following questions, sent in a word document:
 1. What is your background and current area of interest?
 2. What do you find attractive about joining the SPC?
 3. What qualities, experience and perspectives would you bring to the SPC?

All applicants must be APS Members.

**Deadline: Applications close
Monday 12 February 2024**



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SPC Scholar Position

Applications open Wednesday 31 January 2024

Deadline: 11.59pm AEDT, Tuesday 27 February 2024

The scholar position on the Australian Pain Society's Scientific Program Committee will seek to provide an opportunity for high calibre APS trainees to participate in the committee for a fixed term appointment of 12-months (April 2023 - April 2024), with the potential opportunity to then be invited to become a permanent member of the SPC.

Through active participation in a range of SPC activities the appointee will contribute to the planning of the Annual Scientific Meeting, and they will gain invaluable experiences and skills with mentorship from senior pain researchers and clinicians on the SPC. The scholar appointee will no doubt find that this experience puts them in very good stead for a strong future career in pain research.

Applicants must be a PhD student who has reached their confirmation milestone and is an APS member.

Duties

- Participate in regular SPC meetings, held every 4 – 6 weeks on Tuesday afternoons
- Review free paper and topical workshop abstracts under the mentorship of a full SPC committee member
- Work with the Trainee Session committee and be actively involved in the organisation of the Trainee Session, including attendance at the ASM

Application Process

For further information on the application process please visit the [conference website](#).

Conditions of Appointment

- The appointment is for 12-months duration from one ASM to the next (April - April)
- The appointee must have passed their confirmation of candidature
- The appointee must have the support of their primary supervisor
- The appointee must abide by the SPC guidelines and are required to attend >80% of the SPC meetings
- The appointee will attend a face-to-face meeting on Sunday 21 April at APS 2024 in Darwin

We look forward to receiving your application!

If you have any questions, please contact the APS Conference Manager, Alex Robertson:
alex@dcconferences.com.au



Congratulations to our Successful CFK #7 Grant Recipient – Nicole Pope

Nicole is an early career nurse-clinician scientist with an interest in digital health technologies.

Her doctoral research program was the first to examine the role of electronic medical records and patient portal systems in hospitalised children's pain care. Findings provide key recommendations for future clinical practice, research, and policy to ensure continued progress in digital health technologies to improve pain outcomes for children and their families. Nicole was awarded the prestigious University of Melbourne Faculty of Medicine, Dentistry and Health Sciences 2023 Dean's Award for excellence in graduate research in recognition of her PhD work.

As a Pain in Child Health Postdoctoral fellow, Nicole will leverage her expertise in digital health technologies and expand into new digital health platforms and at-risk populations. Alongside her national and international team, Nicole will lead an Australian multi-site

study examining the potential of a paediatric specific virtual reality intervention in pain rehabilitation for youth with chronic pain. This project addresses South Australian and national priorities to improve collaborative and effective models of care that keep pace with innovation and the latest clinical evidence base in managing paediatric chronic pain. Results of this study will directly inform clinical practice and contribute to global knowledge in this area.

Her project, entitled "Virtual Reality in Paediatric Chronic Pain Rehabilitation: A Multi-site Pilot Feasibility Study" will be administered through the Melbourne Children's Research Institute and be undertaken at the Women and Children's Hospital, Adelaide, and The Royal Children's Hospital, Melbourne.

We look forward to the outcomes of this important research study and Nicole's presentation of the results at a future APS Annual Scientific Meeting.

The management of pain during pediatric hematopoietic stem cell transplantation: a qualitative study of contextual factors that influenced pain management practices

Thank you to APS members Karin Plummer and Kevin McCarthy and their colleagues Fiona Newall and Elizabeth Manias for sharing the following recent publication.

Article first published online: 07 August 2023

Journal Reference: Plummer, K., McCarthy, M., Newall, F., & Manias, E. (2023). The management of pain during pediatric hematopoietic stem cell transplantation: A qualitative study of contextual factors that influenced pain management practices. *Pediatric Blood & Cancer*, 70(11), e30614.

DOI: [10.1002/pbc.30614](https://doi.org/10.1002/pbc.30614)

Abstract

Background and aim

Children hospitalised following Hematopoietic Stem Cell Transplantation (HSCT) experience complex and prolonged pain in response to the intensity of this treatment. The aim of this study is to describe how pain was managed for children during HSCT therapy and how contextual factors related to the clinical environment influenced healthcare providers' and parents' pain management practices.

Methods

A qualitative case study was conducted and involved semi-structured interviews at two time-points following transplantation (30 and 90 days) with parents (n=10) and naturalistic observations of pain-related care provided to children (n=29) during HSCT therapy by their healthcare providers (n=10). Semi-structured interviews were also conducted with healthcare providers (n=14).

Results

The effectiveness of pain management interventions was hindered by the multifactorial nature of pain children experienced, a gap in the provision of psychosocial interventions for pain and a lack of evidence-based guidelines for the sustained, and often long-term, administration of opioids and adjuvant medications. Misconceptions were demonstrated by healthcare providers about escalating pain management according to pain severity and differentiating between opioid tolerance and addiction. Parents were active in the management of pain for children, especially the provision of non-pharmacological interventions. Collaboration with external pain services and the impact of caring for children in protective isolation delayed timely management of pain.

Conclusions

There is a pressing need to create evidence-based supportive care guidelines for managing pain post-transplantation to optimise children's relief from pain. If parents and children are to be involved in managing pain, greater efforts must be directed toward building their capacity to make informed decisions.

Declaration

Dr Karin Plummer received PhD funding support of this study from The Australian Nurses Memorial Centre, The Australian Federation of Graduate Women and The Windermere Foundation.

Have you had an article accepted for publication recently?

The Australian Pain Society (APS) is keen to share publications from our members with their colleagues via our eNewsletter. If you've had an article accepted or published recently, please contact our Assistant Editor Joanne Harmon via the APS Secretariat (aps@apsoc.org.au) with the title, authors, and reference (i.e., journal, volume, and DOI) of your article and request the submission template. We would love it if you also supply a short commentary (300 words max) to give our readers the gist of the article.

Progressing into a new paradigm: how we must leave the past behind if we want a change in pain research outcomes

Thank you to APS member Marc Russo and their colleagues Danielle Santarelli, Paul Austin, and Brett Graham for sharing the following recent publication.

Article first published online: 05 September 2023

Journal Reference: Pain Med. 2023 Sep 5: pnad115

DOI: [10.1093/pm/pnad115](https://doi.org/10.1093/pm/pnad115)

Abstract

Background and aim

This commentary highlights the need for a new approach to translational pain research. The current approach to developing analgesic drugs has been largely unsuccessful, with most candidate molecules that pass preclinical testing failing to demonstrate efficacy in clinical trials. Sadly, the field and industry seem wedded to this low-yield, resource-draining system, whilst the unrelieved suffering of patients continues. To improve the situation, we must acknowledge our current predicament and explore new ways to address the challenges of translating preclinical results to clinical trials.

Methods

We reviewed the literature to identify the limitations of current translational pain research methodologies and explore potential solutions to improve the translational success rate of analgesic drugs. We drew on the Initiative on Methods, Measurement, and Pain Assessment in Clinical Trials (IMMPACT) recommendations and other relevant guidelines to propose a new approach for the choice of outcome measures to be used in animal pain model studies based on recommended outcome measures for human pain trials.

Results

The major limitations of current preclinical pain research include the use of animal models that poorly reflect human clinical pain states, an excessive reliance on stimulus-evoked tests as the primary determinant of analgesic efficacy, and a lack of consideration of the ethological aspects of pain-associated behaviors in laboratory animals.

To overcome this, a reverse engineering approach is proposed. First, we should consider current recommendations for outcome measures in pain clinical trials and determine the closest surrogate measures in animal models. Second, we should aim for holistic assessment of pain and consider multi-domain or composite outcome measures to provide a more comprehensive indication of treatment efficacy.

Multiple behavioral measures and complementary stimulus-evoked tests should be used to obtain more useful preclinical information and meaningful results. Current options for ethologically relevant outcomes in rodents include voluntary wheel running, burrowing, and foraging. Measurement of these spontaneous behaviours provides an assessment of persistent pain and its impact on functional capacity, motivation, and well-being.

Conclusions

Current choice of preclinical outcome measures often fails to capture the full range of potential benefits and drawbacks of a candidate analgesic drug. The proposed approach has the potential to reduce the “Valley of Death” and lead to more effective treatments for pain. It is time for the pain research community to leave the past behind and embrace a new paradigm.

Declaration

The authors have nothing to declare.

SA Social Networking Event

By Heather Gray, SA Director



Well, that was fun! What a fantastic turnout for the inaugural APS networking event for SA, held on Thursday 9 November. Twenty or so very bright sparks (present company excluded) popped through to The West Oak Hotel for a sunny Thursday arvo catch up on all things APS. Scientists, researchers, clinicians, and everyone-in-between with a common goal. Many knew one another, but everyone met someone new. For me, it was lovely to see some familiar faces (Anne Burke and Tim Semple – I'm looking at you) and also super interesting to hear what goes on outside hospital walls. It was such a success that people were asking when the next one is – stay tuned!



L to R: Tasha Stanton, Tracy Jones, Hayley Leake, and Erin MacIntyre



L to R: Christine Barry and Carolyn Berryman



L to R: Rainer Haberberger and Tim Semple



L to R: Sarah Wallwork, Anne Burke, and Brendan Mouatt

WA Social Networking Event

By Jacintha Bell, WA Director



Prepare yourselves for a tale of camaraderie, nibbles, and a sprinkle of wisdom, all set against the backdrop of Perth's stunning skyline. On Thursday 2 November, the Australian Pain Society orchestrated a social networking soirée that was anything but ordinary.

We met at Prince Lane rooftop bar, perched high above the streets of Perth, basking in the glory of a splendid spring evening. As the sun dipped below the horizon, eight health professionals with a shared passion for pain gathered, ready to unwind, munch on delectable treats, and exchange tales from the front lines of pain management.



Left to right: Jacintha Bell, Natalie Raymond, Alex O'Neill-King, Julie Fitzgerald, Catrina Main, John Salmon, David Owen

The atmosphere was delightful, with warm breezes, clear skies, and panoramic city views. The APS generously kept our glasses topped up and our stomachs happy with a generous spread of delicious food.

As the evening unfolded, everyone shared their unique experiences and insights. Conversations buzzed on topics ranging from navigating pain management in drug and alcohol settings to the challenges of complex trauma and pain.

But that wasn't all! We delved into the referendum, explored unconventional mentoring strategies, and even commiserated over the woes of parenting teenagers. I may have picked up a few pointers from a few of our more experienced guests!

In this relaxed, convivial setting, the line between work and play blurred. Ideas flowed, networks blossomed, and laughter echoed across the rooftop, carrying with it the hope of better days for those who experience persistent pain.

So, there you have it, folks! A night of spectacular views, scrumptious bites, and stimulating conversations—proof that a little social networking can go a long way. The APS sure knows how to throw a 'Pain-tastic' soirée!



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Tasmania Social Networking Event

By Sinan Tejani, TAS Director



November 2023 saw the Tassie APS members catch up for our annual social networking events. While the event in Hobart was unsuccessful, several APS members from the north and northwest of Tassie were present at the event in Launceston. A diverse group of health professionals working in pain management had an opportunity to catch up over delicious Tasmanian pinot and cheese. The conversations were sparkling!

What Tasmania lacks in numbers, it makes up for in its passion for addressing the challenges Tasmanians face in accessing high quality pain care. Key issues discussed were the need for a persistent pain service in the North and Northwest, delivery of best practice care in the workers compensation system, and the management of persistent pelvic pain. These conversations highlighted the key role played by the APS in continuing to advocate for multidisciplinary, best practice management of pain.



From left to right; Karin Jones, Bernadette Smith, Simon West, Vanessa Bakker, Lil Cox, Rebecca Taylor, and Sinan Tejani.

APS Social Networking Events

Please join us for an Australian Pain Society (APS) social event!

Come along and catch up with your local APS colleagues and learn more about what other people are doing in your state.

In fact, if you have friends/colleagues with an interest in pain management but who are not members of the APS, why not bring them along too, so that they can connect with the APS community and find out more about how the APS can help support them.

The evenings will be largely unstructured so you can focus on meeting and connecting with others.

Hope you can make it!

Joyce McSwan, APS President



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Over the past 20 years, the Canadian-based Pain in Child Health (PICH) research training program has brought together an international community of paediatric pain researchers across several collaborative efforts. The tight-knit PICH community is dedicated to learning and informing practice changes to minimise pain and suffering in children around the world.

In collaboration with the Canadian PICH chairs, we are excited to announce that we will be formalising an Australian-Southern hemisphere-based PICH consortium, called; 'PICH Down-Under'.

As part of our launch, the PICH Down-Under Committee is announcing the first PICH Down-Under webinar which will take place on Friday 8 December at 12-2pm (Australian Eastern Daylight Time).

As part of this launch, three PICH trainees are showcasing their research. Everyone is welcome to this free online event. Please come along and connect with other healthcare professionals and researchers interested in pain.

You can register for the event [here](#).

We look forward to seeing you there!

Please circulate among your networks!

The PICH Down-Under Organising Committee:

Ms Nicky Pope
Prof Denise Harrison
A/Prof Adrienne Harvey
Dr Joshua Pate
Dr Cate Sinclair
Dr Hayley Leake
Dr Mark Alcock

If you have any questions, please reach out to Nicky Pope (Nicole.Pope@student.unimelb.edu.au).

Diagnostic Uncertainty in Youth with Chronic Pain and Their Parents



Neville A, Jordan A, Beveridge JK, Pincus T, Noel M. Diagnostic Uncertainty in Youth with Chronic Pain and Their Parents. *J Pain*. 2019 Sep;20(9):1080-1090. doi: 10.1016/j.jpain.2019.03.004. Epub 2019 Mar 21. PMID: 30904516.

Reviewer: Ms Emily Boundy, Clinical Coordinator and Senior Physiotherapist, Paediatric Chronic Pain Service, Women's and Children's Hospital, Adelaide

DOI: [10.1016/j.jpain.2019.03.004](https://doi.org/10.1016/j.jpain.2019.03.004)

Review of article

Study group

Twenty youth with chronic pain (15 female; mean age = 14.6 years; range = 10–18 years) and one of their parents (17 mothers).

Aims of study

To examine diagnostic uncertainty in both youth with chronic pain and their parents using a qualitative methodology.

Brief Methodology

Twenty youth with chronic pain (15 female; mean age = 14.6 years; range = 10–18 years) and one of their parents (17 mothers) each participated in separate face-to-face interviews with a researcher. Youth and parents were recruited from an interdisciplinary, tertiary-level paediatric chronic pain program in Western Canada. At the time of the interview, all participants had been at least initially seen in the pain clinic. Data were analysed using reflexive thematic analysis, in accordance with Braun and Clarke's six-phase thematic analysis guide.

Brief summary of the results

Four themes were generated:

1. The function of a diagnosis
2. Haunted by something missing
3. The search for an alternative diagnosis
4. Mistrust in the medical system.

Each theme was presented with supporting verbatim quotes from youth and parents, providing insight into the families experiences and individual factors which influence these. During the interview, parents and youth were asked whether a diagnosis for the youth's pain

had been provided by a clinician. Sixteen parent-youth dyads agreed with the diagnosis the youth had received. Four parent-youth dyads indicated there was inconsistency as to whether a diagnosis had been given. A variety of clinicians and teams, including the pain clinic, emergency physicians, neurologists, general practitioners, nurses, psychologists, and physiotherapists provided information about the diagnoses.

Research conclusions

This study highlights diagnostic uncertainty as a core feature of paediatric chronic pain.

This is important as a better understanding of diagnostic uncertainty, between and within parent-youth dyads, may help to tailor how clinicians deliver diagnoses to families to achieve buy in, increase understanding of pain and diagnosis, and ultimately improve treatment engagement and response.

Reviewer's critique & take home message

This study illustrates the complex nature of a chronic pain diagnosis and the experience of diagnostic uncertainty. Whilst four themes were identified following analysis of the data, the quotes from participants included in the research provided insight into the different experiences of families, which depended on a variety of factors including their past experiences. An explanation meeting the family's expectation seemed to strengthen confidence in a diagnosis, and perceived credibility of the treatment team was critically important for some families in reducing their diagnostic uncertainty. These results echo common themes seen across paediatric services, as does the variety of clinicians involved when formulating a youth's diagnosis. There were limitations to consider when interpreting the results, including a lack of understanding of what information was provided regarding the youth's diagnosis. However, this study certainly highlights diagnostic uncertainty as a core feature of paediatric chronic pain and warrants further research into its impact on treatment engagement and response in this population.

Declaration

The reviewer declares no competing or conflicting interests in reviewing this article.

Menstrual Symptoms: Insights from Mobile Menstrual Tracking Applications for English and Chinese Teenagers



Peng S, Yang Y, Haselton MG. Menstrual Symptoms: Insights from Mobile Menstrual Tracking Applications for English and Chinese Teenagers. *Adolescents*. 2023; 3(3):394-403.

Reviewer: Mr Brian Le, Physiotherapist, Paediatric Chronic Pain Service, Women's and Children's Hospital, Adelaide

DOI: <https://doi.org/10.3390/adolescents3030027>

Review of article

Study group

This article analysed 15 adolescent menstrual symptom tracking mobile applications (apps) in English and Chinese teenagers.

Aims of study

To critically analyse what and how menstrual symptom tracking apps communicate menstrual symptoms. The authors explored menstrual literacy, cross-cultural differences, and framing (or presentation) of symptoms using a sociocultural lens.

Brief Methodology

Mixed-methods content analysis involving 15 popular free menstrual tracking apps in English (n=8) and Chinese (n=7). Data were sampled from December 2022 to January 2023. The first part of the data analysis noted whether the menstrual trackers allowed the user to document their symptoms and whether resources for managing or treating the symptoms were suggested. A quantitative analysis was then conducted, analysing sentiment (emotional tone).

Brief summary of the results

1. Menstrual literacy on symptom management or treatment was generally insufficient.
2. There was a greater focus on emotional, rather than physical symptoms in English compared to Chinese apps.
3. Symptoms were framed more negatively in Chinese apps.

Research conclusions

Findings emphasise the urgency to provide better evidence-informed communication about symptoms, either presented more positively or neutrally, in menstrual tracking apps for adolescent users. It is recommended that future research investigate what role these digital health tools might play in shaping attitudes and experiences, and subsequent sexual and reproductive health empowerment and bodily autonomy for users.

Reviewer's critique & take home message

The article was clear in highlighting the issue of menstrual literacy and its role in perpetuating negative health stigma through menstrual tracking apps. The comparison of two cultures and the differences noted in attitudes, interpretations, and experiences of menstruation was well explained but could be better linked to the two cultures by providing more background information about underlying backgrounds and beliefs. The explanations provided in the results and the tables used to present the data was helpful in assisting the reader to note the differences in positive/negative language use between English and Chinese apps.

The article addressed the broader issue of technology and its use in health within different demographics. It provided good insight into how technology could influence health behaviours in the future. The findings encourage further research into the space of health tracking apps, the language used in these apps and how it could promote a positive or negative framing of the body. Overall, whilst this study was limited in quantity of mobile apps that it explored, it raised the need for further research and development in health apps to minimise potential risks and maximising benefits of using them to track health. It also highlighted the need for mobile apps to provide integration for users to find further support from health practitioners where professional help is needed.

Declaration

The reviewer declares no competing or conflicting interests in reviewing this article.

Somatic symptoms in school refusal: A qualitative study among children, adolescents, and their parents during the COVID-19 pandemic



Li A, Yang DD, Beauquesne A, Moro MR, Falissard B, Benoit L. Somatic symptoms in school refusal: A qualitative study among children, adolescents, and their parents during the COVID-19 pandemic. *Eur Child Adolesc Psychiatry*. 2023 Oct 11.

Reviewer: Dr Nicki Ferencz, Service Lead, Paediatric Chronic Pain Service, Women's and Children's Hospital, Adelaide

DOI: [10.1007/s00787-023-02313-6](https://doi.org/10.1007/s00787-023-02313-6)

Review of article

Study group

Nineteen young people (aged between six and 21 years) and 20 parents were interviewed.

Aims of study

The study assessed somatic symptoms (including pain) in young people identified as school refusers. It also interviewed their parents during the COVID-19 pandemic with the aim of better understanding the experiences and strategies in managing of symptoms.

Brief Methodology

This qualitative study used in-depth interviews following the Consolidated Criteria for Reporting Qualitative Studies (COREQ) criteria. Purposive sampling identified representation for age, gender, and parental ethnicity and participants were recruited from an Integrated Youth Health care Unit in Paris via a referring psychiatrist. Two psychiatrists conducted the interviews and these were either completed via telehealth or face to face. All participants were interviewed independently, apart from two young participants (aged six and 11 years) who were interviewed with their mothers present. Interview data were independently coded to identify emerging themes with consensus arising from discussion between them.

Brief summary of the results

The 20 parents included 16 mothers and four fathers. Ten of 20 parents were divorced, and 12/20 parents were of medium or high socioeconomic status (SES). Twenty-two interviews were conducted prior to the first lockdown, and 17 were conducted afterwards. No thematic differences were identified between pandemic contexts, type of schooling (online vs in-person), national origin of parents, or SES. Three

overarching themes were identified: 1) the journey, 2) deconstruction – somatic symptoms as indicators of the person's emotional state, and 3) management of somatic symptoms in school refusal.

Research conclusions

This study is significant as somatic symptoms are rarely directly studied with regards to school refusal. The study also identified treatment and support enables individuals to better identify body signals and how these relate to emotions. Significantly, parents also reported symptoms from their own development in identifying familial patterns. A biopsychosocial model for understanding symptoms and how these relate to school refusal was highlighted, as well as how comorbid symptoms of depression, anxiety, PTSD, and harmful situations such as bullying can contribute to school avoidance. It is suggested that procedures for managing chronic pain, including increasing emotional awareness, pain education, body awareness, and calming, are important for supporting children who show school refusal, and it is also suggested health care workers such as physicians, psychologists, and psychiatrists can be better trained in these therapies to support children's educational maturation and emotional resilience in the context of adverse life events.

Reviewer's critique & take home message

This was an interesting study with a small and geographically-specific sample. However, the results echo a theme seen in paediatric services whereby school refusal is a significant issue that needs to be supported and managed. This has implications for services in how they develop models of care and how health and education providers unite to ensure children's needs are comprehensively met. It also has wider economic implications in that children who are not attending school obviously require the support from a parent who is unable to maintain regular employment. This creates increased challenges for families and economic disparities that are important factors to be considered for the ongoing development of support for young people with somatic symptoms that include chronic pain.

Declaration

The reviewer declares no competing or conflicting interests in reviewing this article.

Pain and suicidality in children and adolescents: A longitudinal population-based study



Hinze V, Karl A, Ford T, Gjelsvik B. Pain and suicidality in children and adolescents: A longitudinal population-based study. *Eur Child Adolesc Psychiatry*. 2023 Aug;32(8):1507-1517. doi: 10.1007/s00787-022-01963-2. Epub 2022 Mar 2. PMID: 35235043; PMCID: PMC10326152.

Reviewer: Ms Renee McNeill, provisional psychologist, Paediatric Chronic Pain Service, Women's and Children's Hospital, Adelaide

DOI: [10.1007/s00787-022-01963-2](https://doi.org/10.1007/s00787-022-01963-2)

Review of article

Study group

In 2004, 7977 families provided data related to pain and suicidality in young people aged five to 16 years. In a 2007 follow up, 5325 families of young people aged seven to 19 years provided similar data.

Aims of study

This study aimed to describe the number and nature of distinct pain trajectories, their demographic and clinical correlates (including baseline suicidality), and whether identified pain trajectories may predict future suicidality.

Brief Methodology

Secondary data analyses were performed, using longitudinal data from the British Child and Adolescent Mental Health Survey (N = 7977), collected at five timepoints between 2004 and 2007 on a population-based sample of UK youth (five to 16 years). Latent Class Growth Analysis was used to identify distinct pain trajectories, explore predictors of these trajectories, and establish whether trajectories predicted future suicidality.

Brief summary of the results

The authors identified the following four pain trajectories: increasing (33.6%), decreasing (4.5%), persistent/recurrent probability of pain (15.7%), and no pain (46.2%). Pain trajectories

were associated with unique demographic and clinical correlates. Only the persistent/recurrent (vs. no-pain) trajectory was predicted by baseline suicidality (adjusted odds ratio [aOR] 2.24; 95% bootstrap confidence interval [CI] 1.59–3.26). Furthermore, the persistent/recurrent trajectory predicted future suicidality (aOR 1.03, 95% bootstrap-CI 1.01–1.06) after controlling for baseline suicidality, psychiatric disorder, age, and gender.

Research conclusions

These findings provide a better understanding of correlates associated with distinct pain trajectories and long-term risk of suicidality in young people, suggesting a bidirectional pain–suicidality association and emphasising the need of targeted support for young people with persistent/recurrent pain.

Reviewer's critique & take home message

Having access to longitudinal data on a large population (N = 3525) made this a robust analysis on the relationship between pain and suicide. In saying this, 86.8% identified as 'white', meaning the results may not be generalised to all ethnicities. The research indicated there are four distinct trajectories of pain (increasing, decreasing, persistent or recurrent, no-pain). The study revealed a significant relationship between adolescents who experience persistent or recurrent pain and suicidality. Girls had a higher risk of experiencing pain than boys, with girls being four times more likely to be in the persistent or recurrent trajectory. This study also revealed childhood trauma and psychiatric disorders were correlated with persistent or reoccurring pain trajectories, indicating a relationship between psychological and physical pain.

Declaration

The reviewer declares no competing or conflicting interests in reviewing this article.

Alterations in pain during adolescence and puberty



Nahman-Averbuch H, Li R, Boerner KE, Lewis C, Garwood S, Palermo TM, Jordan A. Alterations in pain during adolescence and puberty. *Trends Neurosci.* 2023 Apr;46(4):307-317.

Reviewer: Dr Carolyn Berryman, Research Fellow, University of South Australia, Senior Physiotherapist, Paediatric Chronic Pain Service, Women's and Children's Hospital, Adelaide

DOI: [10.1016/j.tins.2023.01.006](https://doi.org/10.1016/j.tins.2023.01.006)

Review of article

Study group

Adolescents, but the age group was not clearly defined.

Aims of study

To present a current understanding of pain alterations during adolescence including a summary of the relevance of biopsychosocial changes to these alterations.

Brief Methodology

Narrative review.

Brief summary of the results

1. Both males and females demonstrate a reduction in experimental pain sensitivity with increasing age (pubertal status). The reduction is greater in boys compared with girls, perhaps due to sex-specific clinical pain syndromes emerging during adolescence (e.g., dysmenorrhea).
2. Sex hormones contribute to complex effects in adolescence. Testosterone is generally shown to have an antinociceptive effect, while progesterone and oestrogen have shown mixed effects. The direct mechanisms of these effects, such as the bidirectional relationship between gender identity and sex hormones, may play a role in the development of relationships to pain including societal and/or gender role expectations of pain, and gendered pain expressions. Similarly, the indirect effects of sex hormones include changes in grey matter volume.

3. Changes in the coding of warning signals, delayed maturation of behavioural inhibition, and enhanced enthusiasm for new experiences – which can include smoking and substance use – are also related to pain, as is the likelihood of risk-taking behaviour leading to injuries that might result in recurrent or ongoing pain.
4. Pain may be experienced as stressor and may contribute to the vulnerability of developing depression and anxiety often comorbid in paediatric chronic pain.
5. Adolescence is a critical period for developing social skills, branching out on your own, and finding an accepting peer group. Low inclusivity, feelings of loneliness, and low levels of social acceptance from peers are associated with the development of persistent musculoskeletal pain. Likewise, adolescents with persistent pain report fewer friends, and greater experiences of victimisation and stigmatisation.

Conclusions

Pain may be influenced by significant interactions among biological, psychological, and social factors that change during adolescence and puberty. A better understanding of the mechanisms underpinning these changes is the challenge for research in this area with the potential to provide new developmentally informed targets.

Reviewer's critique & take home message

This article summarises key factors in understanding the impact of adolescent development on pain. It is concise, flows well and is easy to read and draws on over three decades of work in the area. There are three take homes:

- Adolescence is characterised by the emergence of sex differences in pain.
- Changes in psychological factors such as gendered influences, the development of anxiety and depression and rising independence can impact pain.
- Pain experiences can be impacted by social changes during adolescence as the reliance on peer relationships is tested.

Declaration

The reviewer declares no competing or conflicting interests in reviewing this article.

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INTERNATIONAL KEYNOTE SPEAKERS

Professor Christine Chambers, Dalhousie University, Canada

Dr Christine Chambers is the Canada Research Chair (Tier 1) in Children's Pain, a Professor of Psychology & Neuroscience and Pediatrics at Dalhousie University in Halifax, Nova Scotia, and a clinical psychologist. She also serves as the Scientific Director of the Canadian Institutes of Health Research's Institute of Human Development, Child and Youth Health.

She is also the Scientific Director of Solutions for Kids in Pain - a national knowledge mobilisation network whose mission is to improve children's pain management.



Professor Cheryl L. Stucky, Medical College of Wisconsin, USA

Cheryl Stucky is the Marvin Wagner Endowed Chair at the Medical College of Wisconsin where she is also Director of the Pain Division of the Neuroscience Research Center.

Dr Stucky's lab studies the molecular, cellular and physiological mechanisms of sensation, particularly how we sense touch and pain. The central theme of Dr Stucky's lab is to study the molecular and physiological mechanisms that underlie somatosensory mechanotransduction in the normal, healthy state and in conditions of tissue injury or disease.



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- > **Check out the new information booklet launched by Arthritis Australia, Taking control of your Fibromyalgia:** <https://arthritisaustralia.com.au/types-of-arthritis/fibromyalgia/>

Other items of interest for our members:

- > **Latest opioid data from the Australian Bureau of Statistics:** Opioid induced deaths in Australia. <https://www.abs.gov.au/articles/opioid-induced-deaths-australia>
- > **Australia's annual overdose report 2019 from the Pennington institute:** <http://www.penington.org.au/australias-annual-overdose-report-2019/>
- > **The Third Australian Atlas of Healthcare Variation:** This series explores how healthcare use in Australia varies depending on where people live. It investigates reasons for variation that may be unwarranted, and provides specific achievable actions to reduce unwarranted variation. <https://www.safetyandquality.gov.au/atlas>
- > **Painaustralia eNewsletter latest issue, available online at** <http://www.painaustralia.org.au/media/enews>
- > **ePPOC: electronic Persistent Pain Outcomes Collaboration:** The electronic Persistent Pain Outcomes Collaboration (ePPOC) is an Australasian initiative that aims to improve the quality of care and outcomes for people who experience chronic pain. For more information about ePPOC, refer to the website: <http://ahsri.uow.edu.au/eppoc/index.html>
- > **PainHEALTH website:** painHEALTH's aim is to help health consumers with musculoskeletal pain access reliable, evidence-based information and tips to assist in the co-management of musculoskeletal pain. painHEALTH is an initiative of the Department of Health, Western Australia. <http://painhealth.csse.uwa.edu.au/>
- > **Stanford University:** CHOIR Collaborative Health Outcomes Information Registry <https://choir.stanford.edu/>

- > **Opioid Podcasts for GPs:** These podcasts are produced by David Outridge GP, and FACHAM Trainee as a project under the auspices of Dr Steven Kelly Staff Specialist in Addiction Medicine, Kullaroo Clinic Gosford. A 20 week series from the Hunter Postgraduate Medical Institute (University of Newcastle) : <http://www.gptraining.com.au/recent-podcasts>
- > **Airing Pain:** Pain resources via an online radio show produced by Pain Concern, a UK registered Charity: <http://painconcern.org.uk/airing-pain/>
- > **Indigenous Resources:** New webpage on the APS website aggregating Indigenous resources: <https://www.apsoc.org.au/Indigenous-Resources>
- > **Opioids:** Communications videos: <https://www.nps.org.au/opioids-communication-videos>

TGA

- > **Codeine information hub:** <https://www.tga.gov.au/news/news/codeine-information-hub>

NSW Agency for Clinical Innovation resources:

- > **Brainman and Pain Tool Kit translations, SEP15:** <http://www.aci.health.nsw.gov.au/chronic-pain/translated-resources>
- > **Pain Management Resources:** <https://aci.health.nsw.gov.au/networks/pain-management/resources>
- > **Quicksteps to Manage Chronic Pain in Primary Care:** <http://www.aci.health.nsw.gov.au/chronic-pain/health-professionals/quick-steps-to-manage-chronic-pain-in-primary-care>
- > **Built into Quicksteps: "How to de-prescribe and wean opioids in general practice":** <http://www.aci.health.nsw.gov.au/chronic-pain/health-professionals/quick-steps-to-manage-chronic-pain-in-primary-care/how-to-de-prescribe-and-wean-opioids-in-general-practice>
- > **A list of helpful apps for consumers and clinicians now available at:** <http://www.aci.health.nsw.gov.au/chronic-pain/health-professionals/management-of-chronic-pain>
- > **Chronic Pain in the ED:** <https://www.aci.health.nsw.gov.au/networks/eci/clinical/clinical-resources/clinical-tools/pain-management/chronic-pain-in-the-ed>

APS Membership Renewals 2024

Renewal notices for 2024 have been sent by email to members, check your inbox!

Thank you for your continued support and membership of the APS.

Please note:

1. We understand that circumstances change, so each year we ask you to select your appropriate level of membership.
2. This system of self-reporting subscription levels was implemented in 2009 for the benefit and fairness of all members.

NO INCREASE in membership fees for 2024!

a. Regular A	\$120
b. Regular B	\$230
c. Regular C	\$370
d. Retired	\$65 Concessional Rate
e. Student	\$65 Concessional Rate

Before renewing, please ensure you [review and update your member profile online](#).

Payments can be made by Credit Card, BPAY, or Cheque.

Did you know that the Australian Pain Society is a registered charity with ACNC? Your donation will help the Society to promote the prevention and control of diseases in human beings associated with pain.

All donations of \$2 or more to APS are tax-deductible.



THE
AUSTRALIAN
PAIN SOCIETY

New Members

New Members as at 22 November 2023:

Mrs Leasa Ashton	Education
Ms Sophie Crouch	Psychology
Ms Wendy Ng	Physiotherapy
Mrs Rita O'Toole	Psychology

Calendar of Events

22 Feb 2024

Future Shakers

Pain Futures Summit

107 Projects South Eveleigh, Sydney NSW

<https://www.futureshakers.co/post/future-shakers-pain-futures-summit>

21-24 March 2024

New Zealand Pain Society (NZPS)

NZPS 2024 - Empowering Pain Management in New Zealand

The Dunedin Centre, Dunedin, NZ

<https://www.nzps2024.nz/>

5-7 April 2024

Spine Society of Australia (SSA)

2024 Spine Society of Australia 35th Annual Scientific Meeting

International Convention Centre (ICC), Sydney, NSW

<https://www.dcconferences.com.au/ssa2024/home>

21-24 April 2024

Australian Pain Society (APS)

2024 Australian Pain Society 44th Annual Scientific Meeting

Darwin Convention Centre, NT

<https://www.dcconferences.com.au/aps2024/>

2-4 May 2024

Exercise & Sports Science Australia (ESSA)

Research to Practice 2024

International Convention Centre (ICC), Sydney, NSW

<https://www.researchtopractice2024.com.au/event/7b82256c-0d69-4710-96eb-57a8df5fed26/summary>

3-7 May 2024

Australian and New Zealand College of Anaesthetists (ANZCA)

ANZCA 2024 Annual Scientific Meeting - Limitless

Brisbane Convention & Exhibition Centre, Brisbane, QLD

<https://www.anzca.edu.au/events-courses/events/major-events/anzca-national-events/2024-anzca-asm>

19-21 July 2024

Neuromodulation Society of Australia and New Zealand (NSANZ)

2024 Neuromodulation Society of Australia & New Zealand 17th Annual Scientific Meeting (NSANZ 2024)

Hotel Grand Chancellor, Hobart, TAS

<https://www.dcconferences.com.au/nsanz2024/>

16-18 September 2024

National Rural Health Alliance

17th National Rural Health Conference

Perth Convention & Exhibition Centre, Perth, WA

<https://www.ruralhealth.org.au/>

Vision, Purpose & Priorities

Vision:

All people will have optimal pain management throughout life.

Purpose:

The Australian Pain Society is a multidisciplinary association whose purpose is to advance pain management through education, research, and advocacy for transformational improvements in clinical care.

Priorities:

In order to achieve our purpose, the Australian Pain Society will provide:

- > Membership
- > Research
- > Education
- > Services and resources
- > Good governance and operations
- > Advocacy



THE
AUSTRALIAN
PAIN SOCIETY

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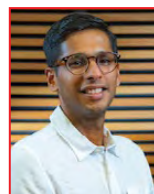
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THE
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