



European Pain Federation - EFIC
11th EFIC SCHOOL on “NEUROPATHIC PAIN”
7th - 10th October 2019
Venice

Aim

The recognition that a disease or a lesion of the somatosensory system itself can be associated with the experience of pain has been a major insight. The recent change in the definition of neuropathic pain and its role as a descriptor has prompted a reappraisal of how to deliver this topic (EFIC Core Curriculum for the European Diploma in Pain Medicine - 3.2).

*The European Pain Federation **EFIC School on “Neuropathic Pain”** will assist pain clinicians to refine their clinical neurological diagnostic and assessment approach to identify neuropathic pain and to improve their ability to interpret clinical, instrumental and laboratory finding and to establish the most appropriate treatment.*

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Programme

MONDAY, 7th October

Morning session 8:00 to 13.00

08:00-08:30 EFIC President message

Bart Morlion

08:30 – 10:30 Mechanisms of Neuropathic Pain: are the mechanisms of Post- surgical NeP different from chronic NeP pain? Can we translate pain mechanisms into symptoms?

Anthony Dickenson

This pivotal lecture will cover mechanisms of pain in a translational context to patients.

Transduction, Transmission, Perception, Modulation. Pain without nociception and nociception without pain.

Nociceptive and neuropathic pain.

10:30 to 11:00 Coffee Break

11:00 – 12:00 The interview. A patient-doctor dictionary

Roberto Casale

In outpatient practice the interview is pivotal in addressing the clinical examination and to make a first essential working hypothesis (neuropathic, nociceptive). Moreover, patients do not use terms such as allodynia or hyperalgesia. The proper use of the main descriptors of pain and other pain-related terms is thus pivotal to describe the clinical feature of the patient.

12:00 – 13:00 Questionnaires, diaries and pain mapping. Quality of life and other questionnaires on the activity of the day living: why, when and how to use them.

Didier Bourassira

A critical reappraisal of their usefulness and limits with special regards on **Neuropathic pain questionnaires** (LANSS; BPI, NPQ, DN4, Pain DETECT, etc ;).

Lunch 13:00 to 14:00

Afternoon session 14:00 to 18:00

14:00 –16:00 The clinical examination of the chronic neuropathic pain patient

Per Hansson

This pivotal tutorial will examine diagnostic approaches to most common pain syndromes in neurology i.e.: painful diabetic polyneuropathy, post herpetic neuralgia, entrapment neuropathies (including complicated low back pain).

- Data from clinical evidence and case scenarios are presented and discussed in relation with guidelines on Neuropathic pain (IASP Neup-SIG EFNS etc)
- Diagnostic work-up of neuropathic pain flow chart
- Pressing issues



Coffee Break 16.00 to 16.30

1st interactive session

16.30-18.00 Practical training

After these sessions there will be a series of clinical questions related to what was presented in the sessions to which the participants will have to answer via televoting.

As a second part of the interactive session, participants will carry out exercises planning a diagnostic workout for neuropathic pain. They will also use and compare different pain questionnaires on themselves.

Pain Tournament or Europe against Pain – The First Challenge

A tournament will be organized between participants. The tournament consists on simulated cases within a range of pain topics from those most frequently seen in the outpatient setting. The aim is to make this an educational exercise while introducing the fun of a competition.



TUESDAY, 8th October

Morning session 8:30 to 13.00

08:30 – 10:30 Objective pain diagnostics: help or hinder? How and when ask for a neurophysiological assessment and what we should expect from it **Luis Garcia-Larrea**

- **Routine neurophysiology (Clinical indications and limitations)** EMG, ENG, Reflex responses (blink, RaIII).
- **Pain related neurophysiology assessment SEPs, PEPs, CHEPS** (different somatosensory evoked potentials from different types of stimuli and their meaning).

Coffee Break 10:30 to 11.00

11:00 –11:45 Testing the autonomic nervous system in clinic and some easy bed side examination **Valeria Tugnoli**

11:45 – 13:00 How to made diagnosis in anxiety and depression in neuropathic pain **Marijana Bras**

Lunch 13:00 to 14:00

Afternoon session 14:00 to 18:00

Objective pain diagnostics (cont)

14:00 – 14:45 The skin biopsy: the intra epidermal nerve fibres density (IENFD). When to ask for it and how to interpret the results from a clinical point of view **Maria Nolano**

14:45 – 15:45 The *image* of pain or the *imaging* of pain **Luis Garcia-Larrea**

2nd interactive session

After the session on “Objective pain diagnostics” there will be a series of clinical questions related to what was learned in the session to which the participants will have to answer via televoting.

Coffee Break 16:00 to 16.30

16:30 – 18:00 The clinical examination of the chronic neuropathic pain patient in practice **Per Hansson**

Under the guidance of an expert clinician the participants will be guided through an outpatient consultation from the interview to the clinical examination of some of the most common pain syndromes in neurology (painful diabetic polyneuropathy, post-herpetic neuralgia, limb nerve entrapment neuropathies, including complicated low back pain). **(3rd interactive session)**



WEDNESDAY, 9th October

Morning session 8:30 to 13:00

08:30 – 9:30 Laboratory and clinical red flags

Piercarlo Sarzi-Puttini

Key points to make a differential diagnosis between nociceptive and neuropathic pain. (blood samples for inflammatory markers, etc.)

4th interactive session

After the session on “Objective pain diagnostics and laboratory red flags” there will be a series of questions related to what was learned in these sessions to which the participants will have to answer via televoting.

09:30 – 10:30 Guidelines on the pharmacological treatment of neuropathic pain: which one and what revision.

Per Hansson

Coffee break 10.30 to 11.00

11:00 – 12:00 Drug classification, terminology and indications from a pain medicine perspective.

Magdi Hanna

Drugs acting on transduction: nociceptor activation and peripheral sensitization
Drugs acting on transmission (from periphery to spinal cord; central sensitisation)
Drugs acting on modulation (descending pathways)

12:00 – 13:00: Looking hard at topical medication for peripheral neuropathic pain

Hans G Kress

(5% lidocaine, low-dose capsaicin, 8% capsaicin etc.)

Lunch 13:00 to 14:00

Afternoon session 14:00 to 18:00

14:00-15:00 The opioids crisis: True or imagined? Do they have a role in neuropathic pain

Magdi Hanna

15:00-16:00 Medical cannabis and cannabinoid drugs: are they so good for all kinds of pain?

Hans G Kress

5th interactive session

After the sessions on pharmacological treatments in neuropathic pain there will be a series of questions related to what was learned in these sessions to which the participants will have to answer via televoting.

Coffee Break 16:00 to 16.30





Part I - Non invasive physical treatments

- Mechanical stimulation (painful & non painful stimulation, incl. acupuncture, vibration and massage)
- From TENS to NIBS
- Mirror Therapy and VR for pain control
- Movement and pain control

Nicolas Christodoulou

Roberto Casale

Stefano Tamburin

Roberto Casale

Stefano Tamburin

Part II - Invasive or minimally invasive treatments using physical agents

When to use or not to use invasive or minimally invasive treatments: a real word analysis Vs evidence based: EFNS & EAN guidelines on neuromodulation for neuropathic pain.

Giorgio Cruccu

6th interactive session

After this session there will be a series of clinical questions related to what was learned in the session to which the participants will have to answer via televoting.

Pain Tournament or Europe against Pain – The Final Challenge: A Wine tasting

The “losers” of the 1st Challenge will have a second chance with more complex and challenging case. Attendants will describe sensations evoked by different sensory inputs (including wine tasting) to understand how sometimes can be difficult to describe sensations and how the psychophysical approach to pain perception as well as any other sensory perception may change and that pain isn't a “simple experience”.

NOTE: AFTEROURS (venue and timetable TBD)

A night of music is planned with the extraordinary participation of unsuspected scientists that will meet international artists for a night of painless relax.



THURSDAY, 10th October

Morning session 8:30 to 13:00

08:30 – 10:30 Physical Modalities for neuropathic pain control.

Part II - Invasive or minimally invasive treatments using physical agents

- Neuromodulation (SCS and related techniques)
- Heat and cold for thermoablation and related techniques
- Radiofrequency

Elon Eisenberg

Coffee break 10.30 to 11.00

11:00 – 12:00 Closing lecture

The bio-psycho social model in the rehabilitation of persons living with chronic pain

Brona Fullen

9th interactive session

After the sessions there will be a series of clinical questions related to what was learned in the session to which the participants will have to answer via televoting.

10:30 – 13.00 Take home messages & Learning questionnaires

In this setting, the clinical and diagnostic tools learned during the School will be discussed and compared, with teachers, in relation to real clinical cases.

Closing down of the School



General information



School's Director:
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School Venue - How to reach the School Venue



FATEBENEFRAPELLI

The School is hosted at Fatebenefratelli – San Raffaele Arcangelo Hospital, Dept. of Physical & Rehabilitation Medicine, Fondamenta Madonna dell'Orto, 345, 30121 Venice.

How to reach Venice

By plane: There are two airports serving Venice : Venice- Marco Polo (VCE) (www.veniceairport.it) and Treviso - A. Canova (TSF) (www.trevisoairport.it).

Venice airport is close to the city that you can easily reach by train bus or by motorboat and waterbus just outside of the airport.

Treviso Airport is located 25 miles north of Venice and is mainly used by low-cost carriers like Ryanair and Wizz Air. Treviso Airport and Venice are linked by busses and trains.

For both options please see details on www.introducingvenice.com > [How to get to Venice](#)

By bus. Busses arrive in Venice at Piazzale Roma very close to the train station and at a walking distance to the School Venue.

By car: to park in Venice is very expensive. If you wish to go to Venice by car try to park in Venezia-Mestre on land and then take the train to Venice-Santa Lucia. It takes minutes. If you prefer to park in Venice please refer to www.venicepark.it

By train: possibly the best way to go to Venice. There is only one train station in Venice, Venice-Santa Lucia, that brings you directly in the heart of Venice. From the train station the School venue is at a walking distance.

When you arrive in Venice

In whatever way you decide to reach Venice, you arrive either in Piazzale Roma (Busses) or in Venice- Santa Lucia (trains) you don't need to take any ferry to reach the School. The School is at less than 20 minutes walking. Please note that Venice has many bridges and the suggestion is to travel as light as possible.

The School is hosted at Fatebenefratelli – San Raffaele Arcangelo Hospital, Dept. of Physical & Rehabilitation Medicine, Fondamenta Madonna dell'Orto, 345, 30121 Venice.

No doubt that with Google Maps nobody will get lost in the "calli" of Venice (type San Raffaele Arcangelo Hospital), however the most convenient route from the train station to the School will be signaled.



FATEBENEFRAPELLI

