

# Neuromodulation News: Winter 2011 - 2012



## A Message from the President

The year 2011 has been pivotal in our society's development. The obvious milestones are the "Success of INS 2011 in London", the growth of our society to more than 1,500 members, the creation of a further three INS chapters, Poland, South Africa and Switzerland; and the successful growth of our journal "Neuromodulation".

The Journal has increased to six editions per year, with a new look-and-feel and a new editorial board, with section editors. Rejection rates are climbing despite the increase in pages and at last, the journal has been accepted into the National Library of Medicine. Yes, the journal is now available on Medline. Impact factor is modest but will improve now that you will be submitting your best articles to Neuromodulation as a first-choice journal.

The neuromodulation.com website continues to develop with new features, such as the research portal for active research pertaining to neuromodulation science. This is in addition to the highly popular "Breaking News" updates. Articles by faculty and members have been commissioned and will start to appear on the website so improving content for members and browsers. The idea is to draw referrers, patients, and even journalists to our site. We have a full strategy in place for developing our public awareness and professional education activity and have succeeded in raising enough money to employ a project manager for this initiative. I am pleased to announce that Nancy Garcia, our newly hired public education project manager, will work with our executive secretary, Tia Sofatzis, and if she shares half the motivation and capability of Tia, will serve the INS well. Pudy Punsalan, who works on a part-time basis, looks after membership issues but the INS is growing and really needs the public education project manager to help take its development forward.

The INS is bolstering the European neuromodulation chapters' support for the European Year of the Brain (EyoB) in 2014. The European Brain Council has petitioned the EU to nominate 2014 as EYoB. This will help to put aspects of neuromodulation brain science into context and, importantly, draw attention to them on a wider stage. Whereas the last two decades have focused on cardiac disease and cancer treatments, the next couple of decades will be about neuroscience and the management of chronic illness. Neuromodulation offers many solutions to this agenda.

The INS is also supporting the International Association for the Study of Pain (IASP) year of headache and has commissioned articles from leading experts in managing headache with neuromodulation.

The 11th Biennial INS World Congress will take place at the Estrel Hotel in Berlin from 8th to 13th June 2013. Please save the date now. We have selected the meeting theme as "Neuromodulation: Technology transforming chronic illness management".

Feedback from the INS Congress in 2011 has been assimilated and will, I

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hope, be reflected in the programme for 2013. The Estrel is a larger venue than the Hilton in London, so without the logistical constraints, we will have more time and space in the programme for oral presentation of selected and reviewed abstracts. We will still have a strong invited faculty for both plenary and three afternoon breakout sessions. We will continue with the idea of having “Specialty of the Day” in an attempt to encourage colleagues from cardiology, neurology, rehabilitation, urology, colorectal, psychiatry and others to attend for parts of the meeting that may be relevant to them. This is important if we want to reach out to our referrers and to draw all neuromodulators into the INS. So when you make preparations for coming to and participating at INS 2013, think about inviting one or more colleague(s) from cardiology, neurology, urology, gastroenterology, colorectal, or rehabilitation who may wish to learn about how NM impacts upon their field of interest and so partner with you to research or refer to your practice. We will ensure that each specialty day will be packed with relevant material to that specialty.

The two satellite symposia of “Fundamentals” and “Investor Day” were great successes at INS 2011. This had the effect of raising our scientific quality and lifting our vision of the future in chronic disease management. In this fast-developing field there will be more technological advances still unknown to come. I am already looking forward to some of the innovative work, which will be ready for “early view” in Berlin meeting 2013. The fundamentals programme will also be developed with the hope that further understanding on mechanisms of action of neuromodulation will be presented.

In London, we partnered with the Neuromodulation Society of the United Kingdom and Ireland (NSUKI) to provide a trainee programme of practical workshops. We will be doing the same in Berlin by collaborating with the German chapter to be more inclusive of trainees and non-medical neuromodulation colleagues. This model of partnering with the chapter country in which INS biennial meeting takes place, I think, has been well received and can be exploited better. It is about being creative and seeing opportunities for successful satellite activities that can sustain the chapter society and provide a complimentary learning experience for trainees, referrers and non-medical NM team members.

Industry partners continue to grow in number and contribution. We are grateful to all our sponsors and exhibitors. I have spent time working with key Industry partners trying to find common areas of support for the INS, the growth of the field, and increased awareness within mainstream healthcare.

Within the confines of corporate governance they have each supported the INS in their own way. Some have supported our strategy for “Public Awareness and Education”. We are very grateful to Medtronic and St. Jude Medical for their unrestricted educational grants for this endeavor.

The full board of the INS continues to grow and change. Each time a national chapter forms a new chapter, a president is born! This year we can welcome Dr. Christophe Perruchoud of Switzerland and we look forward to welcoming Dr. Wieslaw Lach of Poland, and Dr. Russell Raath of the Republic of South Africa.

We also attract major talent onto the board through our directors at large elections and this year we welcome professors Konstantin Slavin of the University of Chicago and Jaimie Henderson of Stanford University in California.

The executive board of the INS has also had some changes. As you know the electorate for officers of the INS is based upon the full board rather

than the membership at large. As president, I thought about whether I had seen through my vision of how the INS might grow, influence and develop. I soon realized that time was running out and I still had energy to work on this to see my ideas bear fruit. I put myself forward to serve another term and this was unanimously agreed upon by the full board. We decided to elect our future president who will take over in 2015. Dr. Timothy Deer volunteered and was unanimously elected. Tim will serve as president-elect throughout my second term to ensure continuity.

Tim's election meant that the Secretary of INS had become vacant. Dr. Marc Russo (president of the Australian NM Society) and Dr. Fabian Piedimonte (president of the Argentinean Society) were candidates. After a ballot of the full board, Dr. Marc Russo was elected.

Dr. Liong Liem has served his two terms as INS Treasurer and will step down in June of 2012. Liong has served us well. Many a time he has acted to help calm troubled waters that have arisen between INS and its suppliers or even internally. Thank you Liong. In 2012 we will be seeking nominations from the full board for election to treasurer.

We have also had some important departures from the full board of the INS. Mr. Brian Simpson and Giancarlo Barolat are giants in the field of neuromodulation and are well known to you all. Brian served on the board of the INS since 1996 and was president-elect, president and past president from 1999 to 2004. The new board needed his counsel and when we had posts of editor and president occupied by one individual, he acted as executive board member liaison to the International Functional Electrical Stimulation Society from 2004 to 2011. The INS is very grateful to the dogged determination that Brian has shown to ensure that INS gained traction and grew. Just one of his initiatives was the creation of national chapters which has so driven the increase in membership and spread of the field.

Giancarlo has also stepped down as director-at-large after serving two terms in that role from 2005 to 2011. Giancarlo was present at the birth of the INS and served as president and past president from 1994 to 2004. Giancarlo's achievements in the field are manifest. He has acted as an important ambassador for the INS and I hope will unofficially continue to do so. Many thanks, gentlemen!

In recognition of our need to keep experienced talent associated with the board, but at the same time encouraging and supporting the next generation of INS board members, we have created a special director-at-large post – emeritus director-at-large – to serve on the full board. This post can only be filled by a past president or journal editor who at the time of appointment continues in active practice. Nominations were presented to the full board and an election followed. Dr. Elliot Krames was elected. Elliot has the INS in his blood and will continue to serve in the best interests of our field and our society from 2011 for three years, with an option to renew for a second term.

With our project leader for the public awareness and education strategy, Nancy Garcia, joining us in early December, we will now have a number of work streams. Members of the executive and full boards will provide leadership, and in collaboration with our chapters, draw together the talents of volunteer INS members to create a resource and communication tool second-to-none in the field of neuromodulation. Your contribution will be acknowledged.

I do realize that our officers, board members and members of the society are making a voluntary effort to the INS and the field of medicine. However, our patients and the ones who presently have no access to

neuromodulation will benefit from this effort.

There is one feature that impresses me about those of us in this field – our passion. We know that we are at the leading edge of shaping medicine for the future. We just have to share it with the rest of the world!

Dr Simon Thomson, MBBS, FFPMRCA

President of INS

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## **Peripheral Neurostimulation for the Treatment of Medically Refractory Head Pain Syndromes**

Occipital nerve stimulation (ONS) was originally described as a percutaneous peripheral neurostimulation (PNS) treatment for occipital neuralgia (ON) by Weiner and Reed<sup>1</sup>. This description noted that, similar to spinal cord stimulation for neuropathic pain of the extremities, pleasant paresthesia induced within the occipital dermatomes could relieve occipital neuralgia (ON), a lightning-like pain condition similar to trigeminal neuralgia. However, true ON is rare and confined only to the posterior occiput. In contrast, medically refractory headache syndromes are more commonly holocephalic with pain in both the upper cervical root and the trigeminal distributions of the head<sup>2,3</sup>. Thus, an understanding of the neuroanatomy and neurophysiology of holocephalic head pain is of paramount importance in considering therapeutic percutaneous PNS.

The C1,2,3 cervical roots include the greater occipital nerve which originates primarily from C2, and the lesser occipital nerves. Relevant trigeminal branches include both the supraorbital and supratrochlear nerves from V1, the infraorbital branches from V2, and the superficial temporal nerves from V3. A partial convergence of these two systems occurs at the Trigemino-Cervical Complex (TCC), and consideration of this fact led some to conclude that combined PNS of the trigeminal and occipital nerves might result in a better outcome<sup>2</sup>. Recent clinical results have seemed to support this interpretation<sup>4-6</sup>.

Appropriate candidates for PNS for medically refractory head pain syndromes should have pain within the anatomic distribution of the occipital, or trigeminal, systems or both; must have undergone neuropsychological testing; and should have had a positive response to the anesthetic phase of respective nerve blocks<sup>7</sup>. As well, careful preoperative localization of anatomic landmarks by palpation, flouro or ultrasound may be helpful in assuring that appropriate subcutaneous electrode depth achieves the pre-requisite dermatomal paresthesia<sup>8-10</sup>.

Traditionally, the procedure consists of a trial, followed by permanent implantation of electrodes with a pulse generator if the trial is successful. Postoperative programming is directed at cathodal activation of the involved peripheral branches producing dermatomal paresthesia. Response rate to ONS for posterior occipital pain syndromes alone ranges between 71 and 100% with average being 88%<sup>2,3</sup>. Response rate for ONS for holocephalic pain involving both posterior occipital and trigeminal pain distributions however, is reduced to approximately 40%<sup>11</sup>. When ONS is combined with trigeminal PNS electrodes for holocephalic pain however, the outcomes have returned to 90+%<sup>4-6</sup>. Complications are usually minor, and can be divided into medical complications, such as infection, wound hematoma, or seroma, and hardware-related complications, including lead migration, breakage, or pulse generator failure.

In conclusion, PNS for medically refractory head pain syndromes are effective, safe, and well-tolerated procedures. Much like spinal cord stimulation, these pain syndromes respond well only when paresthesia is achieved in all of the primary nerve distributions involved (occipital and/or trigeminal). Despite the growing body of literature available on these techniques, multicenter prospective randomized studies are warranted to assess their long-term efficacy.

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**Neuromodulation: Technology at the Neural Interface is  
Now MEDLINE Indexed!**

The Editorial Office is excited to announce that *Neuromodulation: Technology at the Neural Interface*, the Journal of the International Neuromodulation Society, is now officially indexed in Index Medicus, MEDLINE and PubMed! Acceptance and indexing by the National Library of Medicine (NLM), which we believe confirms the quality and scope of the journal, provides for widespread access and high profile to the excellent work of submitting authors.

We now invite you to submit your work to Neuromodulation. We would like to thank all of those who helped to make this momentous occasion possible including our associate editors, editorial board members, reviewers, authors, commercial supporters and our publisher, Wiley-Blackwell – all of whom have played a significant role in getting the journal to where it is today. Wiley-Blackwell and the NLM's Content Delivery Team are now in the process of loading content to the MEDLINE database. The listing will begin with Volume 14, Number 1; please be assured that we are working to ensure that all previous content will be listed as well.

Robert M. Levy, M.D., Ph.D.  
Editor-in-Chief

Tia Sofatzis  
Managing Editor

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## Chapter News

### Argentina

The Argentine chapter takes pleasure in sharing news of our more recent activities with INS colleagues.

Since the last world meeting in London, the chapter has been developing its website, which is very close to completion. The site will let us be in touch more closely with worldwide colleagues, professionals, patients, and the general public, as well as facilitate handling membership payments and dues.

We are advancing our legal recognition as a scientific organization through the IGJ (Inspección General de Justicia), the official organization in Argentina for that purpose.

Regarding the teaching area, we are strengthening connections with experts from other countries in our region in order to start an international training course on neuromodulation indications and techniques in Buenos Aires, Argentina.

We are also eager to announce that we have sent a paper for review by the editorial board of Neuromodulation, in which three of our members, Dr. Fabián Piedimonte, Dr. Leandro Piedimonte, and Dr. Juan Carlos Andreani, are listed as authors.

### Benelux

The Benelux chapter is planning a meeting on Motor Cortex Stimulation in the spring of 2012, with the date and location to be announced later.

### China

2nd Chinese Neuromodulation Congress - to be held in September 2012:

Dear colleagues and friends,

The 2nd Chinese Neuromodulation Congress will be held in Beijing on

September 20 - 22, 2012 at Beijing Fragrant Hill Empark Hotel. On behalf of the organizing committee, I take great pleasure in inviting you to attend the meeting.

Hope to see you in Beijing in 2012.

Sincerely yours,

Guoming Luan  
President of the Chinese Neuromodulation Society

2011 Beijing International Pain Forum & The 5th Annual Meeting of Chinese Chapter of the World Society of Pain Clinicians (WSPC):

The 2011 Beijing International Pain Forum & The 5th Annual Meeting of Chinese Chapter of WSPC was held in August 19 - 21, 2011. INS China Chapter was one of the organizers of this congress. There were 1,290 persons attending this academic conference. We received 240 abstracts with 143 of them presented orally. To meet the different requirements of registrations, we set 14 forums (including the neuromodulation forum) according to different illness types. Lectures delivered by speakers were warmly welcomed. It is really a good communication platform for pain physicians related to neuromodulation.

The 9th Chinese Congress of Stereotactic and Functional Neurosurgery:

The 9th Chinese Congress of Stereotactic and Functional Neurosurgery was held September 16 - 18, 2011. The Chinese Neuromodulation Society was one of the organizers. There were 538 registrants. We received 340 abstracts with more than 80 of them presented orally. Eighty speakers from home and abroad were invited to deliver speeches. With the efforts of all participants, this congress achieved a great success.

Website: [www.neuromodulation.com.china](http://www.neuromodulation.com.china)

#### **Japan**

The 26th Japan Neuromodulation Society Meeting will be held on May 26, 2012 at Toshi-Center Hotel in Tokyo, Japan. After the introduction of dual-lead spinal cord stimulation, its use is increasing remarkably in Japan.

We had the 8th Scientific Meeting for the Asian Australasian Society of Stereotactic and Functional Neurosurgery (AASSFN) on June 16-18, 2011 at Jeju Island, Korea. Professor Jin Woo Chang officiated as president of the AASSFN, and many JNS members from Japan attended this meeting. We are looking forward to attending the 11th World Congress of INS in Berlin.

#### **Korea**

The Korean Neuromodulation Society expects to reconvene its annual meeting in February, reports chapter secretary Dr. Byung-chul Son.

The approximately 30 members are re-organizing under the guidance of professor J.W. Chang, and have met locally since the 2009 INS meeting in Seoul.

#### **North America**

The year 2011 has been very busy for NANS. Over the course of the year, NANS has participated in many different events and has also undertaken several different projects to both raise awareness and promote neuromodulation therapies.

Earlier this year, NANS exhibited and promoted neuromodulation at the 27th American Academy of Pain Medicine (AAPM) annual meeting in

Washington, D.C. This was the second time NANS attended and it was nice to see many other NANS members and familiar faces in attendance as well.

Staff also participated in the 79th Annual Scientific Meeting of the American Association of Neurological Surgeons (AANS) in Denver, CO. This was the first time NANS had ever participated in this meeting, conducted by a group that we have worked closely with before to provide and organize the annual fellows' course, among other activities.

NANS also joined fellow neuromodulation chapters at the 10th Congress of the International Neuromodulation Society in May in London. The meeting provided a venue for members and practitioners from around the world to network, share ideas, and participate in many interactive sessions.

This past June, NANS also participated in the American Society for Interventional Pain Physicians (ASIPP) annual meeting in Washington, D.C. As part of an ongoing collaboration with ASIPP, NANS helped support the annual legislative and Capitol Hill visits. During these sessions, NANS members who were in attendance heard presentations on the present state and future of healthcare reform and related issues from several different members of both the Senate and House of Representatives. Following the presentations, attendees had an opportunity to meet with their local legislators to discuss issues that are of primary concern to practitioners within our specialty.

Most recently, NANS has also been involved in the development of a new interest group called the Council of Pain Physician Societies. This fledgling group, consisting of representatives from ASA, AAPM, ASIPP, ISIS and NANS, met in mid-June to discuss new efforts as to how the societies can come together to work on and advance common issues that touch each of our respective groups. For more information, see the accompanying article in this newsletter.

During 2011, NANS has also been involved with several outreach efforts. The first centered on raising member awareness regarding the efforts of the Washington State Health Technology Assessment Program (HTA) to either eliminate or severely reduce patients' access to effective pain care therapies. Members may recall that in 2010, Washington State's HTA eliminated patient access to spinal cord stimulation therapies. In 2011, NANS advocated that the State of Washington reconsider its approach and incorporate into the HTA an expert physician who could serve as a more appropriate spokesperson and reviewer of the therapy under review.

In 2011, NANS also put forth a [policy statement](#) concerning the billing and trialing of more than 16 active contacts in an office setting. Recently, there has been a significant increase in the office as the primary setting for lead trials and it was determined that NANS should offer guidance as to how such trials should be appropriately conducted. The full text of the policy statement is available on the NANS website.

Look for NANS to continue our involvement in other related society meetings and projects over the course of the 2012.

#### **Poland**

The Polish Neuromodulation Society inaugural meeting took place at Hotel Bristol, Warsaw, on 16th April 2011. Thirty five participants from all the specialties with a predominance of neurosurgeons attended. The meeting was supported by St Jude, Boston Scientific and Renishaw. A board for the society was voted in with Professor Wojciech Maksymowicz as the President, Dr Teodor Goroszeniuk as the Vice-President and Dr Wieslaw Lach as the Secretary. Following this meeting court registration was



applied for and received on 13th July 2011. The Polish Neuromodulation Society is now making all necessary formalities to apply to become a Chapter of the International Neuromodulation Society and this is in progress. It was evident from the meeting that cooperation with other professional bodies like the Interventional Section of the Polish Pain Society, Functional & Stereotactic Society and the Polish Pain Society would be a top priority in order to be a part of the wider coordinated movement of pain and function management.

The first joint meeting of the Polish Neuromodulation Society and the Interventional Section of the Polish Pain Society took place in the beautiful city of Wroclaw on 3rd September 2011. The inaugural opening ceremony took place in the presence of three society presidents Professor Wojciech Maksymowicz, Dr Piotr Buczkowski and Professor Jan Dobrogowski in the historical Aula Leopoldina Hall at Wroclaw University. The meeting was well attended with 100 participants and an international faculty including Professor Jose de Andres, Dr Declan O'Keeffe, Dr Sam Eldabe, Dr Philippe Mavrocordatos, Dr Jonathan Richardson, Dr Charles Gauci, Dr Pavel Michalek and Dr Andrzej Krol. The meeting was divided into two parts covering neuromodulation and interventional pain management. Feedback for the meeting from national and international participants was very positive. Annual meetings are planned in various parts of the country and the next meeting will take place on the 12th and 13th of May 2012 in the Baltic seaside resort of Sopot, Poland. A satellite cadaver workshop is also planned for the meeting on the 13th of May.

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#### **Switzerland**

The Swiss Neuromodulation Society (SNS) and the Swiss Society for Interventional Pain Management (SSIPM) organized a joint meeting in Montreux – the first annual congress of the SNS and third annual congress of the SSIPM.

Designed for participants to network, increase knowledge, and make new collaborations, the meeting on Dec. 2 -3, 2001 focused on applying recent research developments to daily clinical practice, in the hope that that focus would help participants to treat patients better under the light of new developments and updated research.

Speakers and topics included:

- Kaare Meier, Århus, Denmark  
Tools for follow-up: the Århus spinal cord stimulation database and the Danish Pain Research Center model
- David Abejón, Madrid, Spain  
Spinal cord stimulation for failed back surgery syndrome
- Mark Plazier, Antwerp, Belgium  
Peripheral nerve stimulation for fibromyalgia
- Declan O'Keeffe, Dublin, Ireland

High frequency stimulation

- Steven P. Cohen, Baltimore, MD, USA

Do diagnostic spinal injections improve surgical outcomes?

Low back pain interventional pain management: evidence based and cost-effective strategy

- Cesar Margarit Ferri, Alicante, Spain

How well is the mechanism-based approach replacing the WHO pain-relief ladder?

- Nagy A. Mekhail, Cleveland, OH, USA

Spinal stenosis: new options?

- Beverly-Jane Collet, Leicester, U.K.

What psychosocial factors really impact on pain management?

- Salim Hayek, Cleveland, OH, USA

Complex regional pain syndrome: impact of research on the clinical management strategy

- Anthony Davison, Lausanne, Switzerland

Lies, damned lies, and medical statistics?

- Philippe Ducor, Geneva, Switzerland

Medico-legal aspects of interventional treatments in Switzerland

### United Kingdom and Ireland

The UK & Ireland Neuromodulation Society (NSUKI) enjoyed the benefits of attending the INS World Congress in London this year. NSUKI organised a number of satellite workshops there, including live demonstrations of spinal cord stimulation, deep brain stimulation and a hands-on cadaver course that were well attended. Plans are in hand to hold a joint meeting with the German Neuromodulation Society in November 2013. Links have also been made with the Polish Neuromodulation Society with a view to arranging a joint meeting. NSUKI membership increased to 95 this year. The NSUKI Board welcomed new members of Sam Eldabe as President elect, Josh Keavney as member for Irish Affairs and Stana Bojanic as Neurosurgery representative.

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## New Benefit Coming Soon – An Experts Panel Available to Members

A new "Ask the Experts" panel is coming to the forum in the members-only section of the International Neuromodulation Society website. There, a distinguished panel of neuromodulation experts will field specific questions from our members. Members may access the forum by logging into their member account, as they would to read the online journal. Each expert will serve for a limited duration of approximately two weeks, and agree to respond to questions in a timely fashion. Please stay tuned for an email announcing our resident "expert" and the first "Ask the Expert" session. If there is a specific therapy or topic you would like to see covered, please [let us know](#).

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## European Year of the Brain 2014

As part of its public education campaign, the **International Neuromodulation Society** (INS) is joining over 190 organizations to support the **European Brain Council's** (EBC) proposal for the European Commission to recognize 2014 as [The European Year of the Brain \(EYOB\)](#).

The **European Year of the Brain** is intended to "celebrate the wonder of

the brain and create initiatives which will change behaviours and lead to measurable improvements in health," and has the potential to do the following:

- Increase the profile of all brain diseases in every member state
- Promote normal brain function and development and address barriers to these
- Draw attention to the costs and impact of brain diseases now and into the future
- Increase funding for brain research through the framework programmes and in the member states
- Increase efforts to educate, inform, and advise all those living with brain diseases in order to improve their quality of life
- Recognise the increasingly important role of those who care for a person living with a brain disorder
- Draw attention to health inequalities in brain diseases
- Develop action plans at local, national, regional and European level to address specific areas related to brain diseases
- Influence policy decisions over the next 5-10 years
- Address controversial and difficult areas
- Show the value of partnership across all of society
- Stimulate open debate and dialogue on brain diseases

**We encourage you to view the materials** developed in support of this initiative, which are posted on the EBC website at:

<http://www.europeanbraincouncil.org/projects/eyob/materials.asp>

**Please act now and support the European Year of the Brain 2014 by writing to your local Members of the European Parliament using this [template letter](#).**

A list of Members of the European Parliament can be found at: <http://www.europarl.europa.eu/members/public/geoSearch.do?language=EN>

We appreciate your taking the time to consider this important initiative that could influence the future of brain neuromodulation in Europe. Thank you!

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## **New! Neuromodulation Research Portal**

The INS is pleased to announce the launch of a new [Research page](#) on the INS website, which will provide targeted search links to the major clinical trial registers, [clinicaltrials.gov](http://clinicaltrials.gov) and the [ISRCTN Register](#), to help medical professionals and potential study participants locate active studies. There is a menu at the top to enable you to jump down to the corresponding therapies and applications below. The links are organized in two columns: one for the trials in [clinicaltrials.gov](http://clinicaltrials.gov), and another for the [ISRCTN Register](#). The search results will automatically refresh regularly in targeted searches of the two clinical trials websites.

In addition to clinical trials, we would like to highlight our members' research and calls for research proposals. Please advise us if you are participating in any neuromodulation clinical trials that you would like featured here on our member research page. Just email the [INS Executive Office](#) with the study name and register name and number.

Lastly, we aim to publish a listing of device registries on our research page as a resource to our members. If you are aware of any registries in your region, please send us the details for inclusion on the site.

We hope you will find these new features on the INS website useful and we welcome your input!

Best wishes,

Simon Thomson, MBBS, FFPMRCA

President of the International Neuromodulation Society

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## **Neuromodulation Registries Offer Promise**

Members in Europe have shared news about efforts to start registries of neuromodulation treatments, to track progress of therapies under development.

Dr. Robert T. M. van Dongen, secretary of the Benelux chapter, reports that some 28 hospitals in the Netherlands are submitting data to a database at a university hospital in Leiden. About 2,200 patients' anonymous neuromodulation information has been gathered in a web-based program that is currently being used to observe benchmark information. Information about pain or spasticity indications, treatments, rough demographic data, and quality and outcome measures can be obtained in database queries.

Although the project is still early-stage, its developers believe it is a fairly unique effort.

Meanwhile, in Denmark, researchers have been working for at least one year on creating an open-access, standardized registry that is intended to encompass Scandinavia. It is a collaboration between the departments of Neurosurgery and Anesthesiology and the Danish Pain Research Center at Aarhus University Hospital, says Kaare Meier, an MD-PhD fellow at the pain center.

The first information entered has been about spinal cord stimulation and peripheral nerve stimulation. Modules for motor cortex stimulation and deep brain stimulation are also envisioned.

"The database is Internet-based, and we plan to share it with collaborating centers at no cost," Meier says. "We will ask collaborating countries to form a board to be responsible for handling legal issues. The database collects and combines clinical and surgical details with a plethora of follow-up data (including various questionnaires; more can easily be added), medicine registration and programming parameters. It's fast to enter data into, can be used both retro- and prospectively, gives the clinician an easy overview of the various procedures the patient went through, and enables for data output to be used for easy statistical analysis. All traffic is encrypted and all data entry is logged (as approved by the Danish Data Protection Agency)."

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## **New! Neuromodulation.com Email Addresses For INS Members**

As part of the INS's mission to raise awareness of neuromodulation therapies, we are pleased to offer our members unique neuromodulation.com email addresses. Join your neuromodulator

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  2. Enter your username \_\_\_\_\_ and password \_\_\_\_\_
  3. Press the "login" button below
  4. At the second bullet after the greeting, click "Edit My Profile" screen
  5. At the Profile Details screen, click the pencil icon at the right
  6. Be sure to enter a current email address in the 28th field down; you can also enter an alternate email address further down, as well as your specialty *and* whether you would like your clinic included in the public directory
  7. When done, press "Save" at the upper right side of the form
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