A Message from the President

Dear INS members,

With 360 abstracts submitted, four afternoon breakout sessions per day, and thought provoking full morning plenary sessions for the main INS congress, this is set to be a great INS congress. However we also have two satellite preconferences on the Saturday (Innovations in Neuromodulation on June 6) and Sunday (Mechanisms of Action and Neuromodulation Responder Identification on June 7). In addition and in partnership with the Canadian Neuromodulation Society we are offering a practical training cadaveric workshop on the Sunday 7th June at McGill University. Details concerning application will appear in your inbox shortly. This event will provide independent training from the world’s experts with different spinal cord stimulation (SCS) and sacral neurostimulation (SNS) devices and will include some of the newer techniques such as dorsal root and sphenopalatine ganglion stimulation. So this course will provide education to those starting out but also for those who are interested in growing their repertoire of neurostimulation techniques. The Canadian Neuromodulation Society has initiated presenting a Public Awareness event on the Saturday in coordination with INS. The INS has attracted five platinum-level sponsors, and 22 exhibiting corporations to support this educational event. We are grateful to them, as their presence will help make this congress a memorable one.

During our biennial congress we hope to announce the official formation of up to three more chapters of the INS, the Turkish, the French, and the South African neuromodulation societies. I am hoping that we will push INS membership numbers beyond 2000 members, so meeting one of the goals I set myself when I became president of the INS in 2009.

Montreal 2015 will be our last biennial congress in a single conference hotel. The society is outgrowing this type of facility. In 2017 we will be having our congress at the “state of the art” Edinburgh International Conference Centre, surrounded by four or five hotels catering to different budgets. We hope this will maintain the intimacy and networking opportunities, which are characteristic of our congresses, but allow us to accommodate the increasing demand for exhibition space and registrations.

The INS board recognizes it has a global responsibility for increasing access to neuromodulation. Following the success of the Argentinian, Brazilian and INS regional scientific meeting in Mendoza in October 2014 we are partnering with INS chapters in Asia and Australia to create an INS-supported learning experience in 2016. The aim is to support the regional and local exchange of neuromodulation science and practical training. The INS meetings event committee has considered options including two sites on China’s mainland, Hong Kong, Singapore, Australia and Japan. Since the INS role is to support the regional chapters we are persuaded by the Chinese neuromodulation society who has been most proactive in offering to host such an event. The preferred city for the regional Asian chapters of the INS is Chengdu in 2016. We do hope that all Asian INS chapters will relish this opportunity and ensure that neuromodulation science is heard within that part of the world.

As mentioned in my last newsletter I am musing over new developments within our field. I do believe that non or less invasive neuromodulation will help grow access. Electrical medicine, once a discredited area in the early 19th century, is having a comeback. It is of course much more targeted. However we must work hard to ensure that we are separating fact from fiction and true treatment effects from non-treatment effects. This all comes down to the quality of the science. We are lucky that academic departments of institutes, universities and corporations have discovered this field.

Electrical neuromodulation of structures that impact upon the inter-connected biological controls and cascades of neural circuitry, inflammation, vascular integrity and regeneration will be part of the future of medicine.

The INS will lead by providing a forum for scientific exchange through meetings, networking, website and
journal and by contributing to the safe and effective clinical application of technologies and care pathways in the future.

As the INS grows it is important to recognize our origins. Hopefully you will have enjoyed the January newsletter with an article written by INS Public Education and Website Manager Nancy Garcia concerning pioneers from the early INS days who were reminiscing during our 25th anniversary year. This has sparked two things. One is to ask that the Executive Office of the INS be responsible for archiving our collective memory and the other to commission articles from some of our thought leaders about our history and future. I hope you enjoy the article from Mr. Brian Simpson in this edition.

Helping the public and professions to be aware of our field and our society is one of the building blocks to improve access to neuromodulation. We do this in many ways. But one is to use social media sites. So if you do use Facebook, please visit the INS Facebook page and “Like” it. We now have surpassed 600 followers but welcome more in order to familiarize the broader community with our mission.

The INS has supported WIKISTIM. This is a most useful resource that aims to gather ALL neuromodulation articles. Like Wikipedia it is made possible by collective effort. Registration to access or download its content is free. Please help in the article review process. Also, if you are considering writing up a piece of science perhaps check out the WIKISTIM criteria and both make sure such data are available in your article but also consider completing the WIKISTIM template once published.

I am very excited about our meeting in Montreal in June. I do hope that you have booked your flights and accommodation. If not, then please do so and register early for the meeting. I will be there to welcome you to the last of the three biennial congresses under my tenure as president of the INS.

Dr. Simon Thomson, MBBS, FFPMRCA
President of INS

12th International Neuromodulation Society World Congress Abstracts Received

The International Neuromodulation Society’s 12th World Congress has attracted more than 360 abstract submissions. These have all been reviewed by three reviewers, and authors will be notified in late March. 130 abstracts selected for oral presentation will be listed in the Congress schedule so attendees can anticipate which talks to attend. In addition, both the oral abstracts and accepted abstracts will be available for viewing in poster format. Posters will be on display during breaks and before and after Congress sessions in the Exhibit Hall.

Also, for primary authors who are INS members and who are registered for the main Congress, their abstracts have entered a competition in which the best five abstracts will be recognized for their quality, originality and ingenuity in basic or clinical science. The selected primary authors will have their Congress fee refunded, and all contributing authors will be notified in advance and recognized during the INS General Assembly of Members on June 9, 2015.

12th World Congress Scientific Program, Mechanisms of Action Preconference

The INS 12th World Congress’s three-and-a-half day scientific program will “present evidence that will change your patients’ lives and support the success of the therapy in your practice,” says program chair Timothy Deer, MD. “We will see many new studies there.”

New this year is a daylong preconference on Mechanisms of Action and Responder Identification co-organized by Drs. Simon Thomson and Elliot Krames. That session on neurophysiology, biomarker identification, and translation to clinical practice takes place on Sunday, June 7, 2015, at the Fairmont
Queen Elizabeth Hotel in Montreal. During the main congress at the same venue, daily sessions from Monday, June 8 through midday Thursday, June 11 will offer plenary lectures, oral poster presentations, and four concurrent tracks on all aspects of neuromodulation.

Attendees will hear evidence-based lectures from worldwide experts, and original, prospective, landmark research presentations about how this technology is applied in current and emerging indications. New modes of stimulation, international perspectives, and health economies will be covered.

In addition to neurostimulation, intrathecal drug delivery research will be presented, with the best updates on the treatment of pain, spasticity, and evolving indications. Prospective studies, new drug innovations, and analysis of important registry information will be discussed and debated.

Daily sessions encompass headache and chronic pain, brain interventions for issues such as Alzheimer’s disease, urogenital and gastrointestinal issues, safety factors and anesthetic considerations, sensing technologies, neuroimaging and functional investigations.

Topics for breakouts and oral poster presentations include:
- Pain
- Epilepsy
- Pelvic Organ Motility Disorders and Pain
- Non-Invasive Brain Stimulation and Stroke Recovery
- Neurmodulation for Cardiovascular Disorders
- Brain Stimulation for Pain
- Neurolytics and Neurmodulation in Cancer Pain
- Neurostimulation for Motor and Metabolic Disorders?
- Cardiovascular Disease
- Evaluating Outcomes in Neurmodulation
- Current State of Brain Neurmodulation for Disorders of Cognition and Behavior
- Neurmodulation for Spasticity
- “The Dark Side of the Moon” for Spinal Cord Stimulation and Intrathecal Baclofen
- Pain - Peripheral Nerve Stimulation
- Neurmodulation Strategies for Brain and Spinal Cord Injury
- Intrathecal Drug Delivery
- Cost Effectiveness for Neurmodulation

The multidisciplinary event is appropriate for physicians, nurses, scientists, bioengineers, members of the industry and investment communities, and interested news media. In addition to the formal talks and poster presentations, the event has extensive exhibits and the overall experience offers a substantial opportunity to network with a wide range of experienced practitioners. Specialists in attendance include neurologists, urologists, pain doctors, neurosurgeons, cardiovascular surgeons, gastroenterologists, pulmonologists, psychiatrists, physiatrists, physical rehabilitation experts, as well as such basic researchers as neurophysiologists and neurochemists.

"Innovations in Neuromodulation" Preconference

On June 6, the International Neuromodulation Society will gather some 200 members of the innovation-and-investment community at a daylong preconference about “The Challenge of Reimbursement: Can we do this Smarter?”

Knowledgeable speakers will address:

- How to ensure that data collected by commercializing companies will support future reimbursement applications.
- The success path of innovations that win financing for commercial development, reach the market, and qualify for reimbursement (not always the same thing).
- Important differences between U.S. and CE Mark approval processes that affect neuromodulation therapies.
- Future and current investment strategies, as well as challenges, in the medical device marketplace.
- The process of securing, and protecting, intellectual property.

In addition to offering a learning opportunity, the day also presents a chance to network with innovators, entrepreneurs and business developers, venture capitalists, clinicians, engineers, and representatives of leading device companies.
Cadaver Course

The first INS Cadaver Workshop, co-hosted with the Canadian Neuromodulation Society, will now take place on Sunday, June 7, 2015, immediately prior to the INS 12th World Congress in Montreal.

The course is designed for residents, fellows, or physicians who wish to enhance their neuromodulation offerings. The daylong session will consist of a four-hour, hands-on cadaver lab, with a 4:1 attendee to faculty ratio, and a four-hour discussion with world leaders in neuromodulation.

Neurostimulation strategies that will be reviewed include: tonic spinal cord stimulation, burst spinal cord stimulation, high frequency spinal cord stimulation, dorsal root ganglion stimulation, sphenopalatine ganglion stimulation, sacral nerve stimulation, multi-contact lead arrays, high density stimulation and more.

Applicants must be INS members in good standing and must possess privileges or have the ability to obtain privileges for implantable therapies in a hospital or similar facility. A selection committee will evaluate applicants based on several criteria, such as experience and areas of interest. Selected applicants will be invited to register, and the fee will be announced soon – discounted access to such hands-on cadaver courses is now an added membership benefit.

CME Credit Available for Comprehensive Manuscript Reviews

*Neuromodulation: Technology at the Neural Interface* is now offering continuing medical education credits to reviewers who complete thorough and thoughtful manuscript reviews. *Neuromodulation* and the International Neuromodulation Society are partnering with The West Virginia Society of Interventional Pain Physicians (WVSIPP) to offer this CME.

Joint Providership Statement:
This activity has been planned and implemented in accordance with the Essential Areas and Policies of The West Virginia Society of Interventional Pain Physicians (WVSIPP) through the joint providership of the WVSIPP and International Neuromodulation Society (INS). The West Virginia Society of Interventional Pain Physicians is accredited with Commendation by The West Virginia State Medical Association (WVSMA) to provide continuing medical education for physicians.

The West Virginia Society of Interventional Pain Physicians designates this live activity for a maximum of 3 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity. Reviewers whose reviews qualify (i.e. they are thoughtful and thorough) will be provided with instructions for completing a CME evaluation form upon completion of their reviews.

Maturation of the INS - A Look Back

By Brian A Simpson (President 2000-2003)

After five years on the board I succeeded Dr Giancarlo Barolat as president of the INS in 2000. In my first President’s Message in the newsletter I stated: “I am absolutely clear that my number one priority is membership.” The INS needed a growing membership in order to survive and to be healthy and independent. At that time around 90% of neuromodulation concerned pain and those practitioners were well-served by national and international pain societies. The official INS membership was very small – there were many more “members” than subscriptions received! We already had the journal by then but three further key developments were needed: to accelerate the promotion of the INS as a uniquely multidisciplinary neuromodulation society; to increase the formality of its infrastructure and workings; and to develop national and regional chapters.

Our society was 10 years old, increasingly successful, and now needed to underpin its enjoyable and friendly informal nature with a more robust and representative membership. With that in mind, “Membership” and “The Constitution” were made standing items on the agenda at all board meetings. Dr Elliot Krames, a board member since 1996, had already done a lot of work on the constitution. Even so, we embarked on a series of long, convoluted and at times gruelling discussions to refine this essential but surprisingly difficult item. Then
our Executive Director, Tia Sofatzis, would do all the work to implement the decisions! The surprising thing is that we all remained good friends.

The notion of chapters grew out of “handover” discussions that I had with Giancarlo. We were convinced this was the way to grow an active membership and promote the field. North America and Italy already had neuromodulation societies, founded in 1995 and 1999 respectively, and became the first chapters. Japan had a society but did not join the INS until later. Initially there was some question within NANS about a federal approach. However, their board soon came to appreciate the facilitating effects that the wider organisation could provide. NSUKI (the UK and Ireland), and Benelux (Belgium, The Netherlands and Luxemburg) came next in 2001 and 2002 respectively, followed by Australia and New Zealand in 2004. Then Germany, SE Europe and the Japanese society all joined in 2005. Since that time nine more chapters have been formed and a further five may be welcomed this year. This total of 22 will represent virtually all regions of the world and there are also members from countries that do not have a chapter. Initially there was some question within NANS about a federal approach. However, their board soon came to appreciate the facilitating effects that the wider organisation could provide. NSUKI (the UK and Ireland), and Benelux (Belgium, The Netherlands and Luxemburg) came next in 2001 and 2002 respectively, followed by Australia and New Zealand in 2004. Then Germany, SE Europe and the Japanese society all joined in 2005. Since that time nine more chapters have been formed and a further five may be welcomed this year. This total of 22 will represent virtually all regions of the world and there are also members from countries that do not have a chapter.

Have these policies been successful? The official figure for INS membership fluctuates (as subscriptions are received) but in 2014 it exceeded 1850, representing around 30 countries. NANS continues to be the largest contingent and by a considerable margin, a gratifying testament considering the strong competition from other North American societies, particularly in pain. To appreciate the diversity achieved one has only to pick up a copy of “Neuromodulation” or scan the congress abstracts and programmes.

In 1999, reflecting its multidisciplinary nature, the INS formed an association with the International Functional Electrical Stimulation Society (IFESS), following a successful joint conference in Lucerne, Switzerland the previous year. I saw considerable potential for mutual benefit and duly acted as official liaison between the two societies for seven years, attending IFESS board meetings and progressing various initiatives. Despite that attention to our joint aims, the relationship did not flourish in practical terms. However, there remains significant common ground and FES continues to be represented in “Neuromodulation” and at INS conferences. The IFESS president, Prof Manfred Bijak, and his successor, Prof Jane Burridge, contributed to our Cardiff conference where, noting the success of the INS model, they announced the formation of a UK and Ireland chapter of their society.

The INS has reached its present healthy state through the belief and persistence of some busy people who have been happy to give a great deal of time (two-day board meetings for example!) and to travel around the world on its behalf. For me, the enthusiasm and dedication were epitomised when nobody, including some industry representatives from the USA, was deterred from flying to a board meeting in Madrid six weeks after 9/11, when many people were avoiding air travel. Political, financial and regulatory hurdles have been overcome to promote the growth and acceptance of neuromodulation worldwide. At the time of my presidency, the official government view in the UK and elsewhere was that there was “no evidence” for neuromodulation’s efficacy. A strong society can make progress!

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**Canadian Neuromodulation Society Plans a Public Event**

The Canadian Neuromodulation Society (CNS) has been busy planning a free public event with presentations about neuromodulation for patients, providers, and other interested groups to take place at the Fairmont Queen Elizabeth Hotel in Montreal before the INS 12th World Congress on June 6, 2015. Please stay tuned for details to be announced.

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**Register for the 12th World Congress**

The International Neuromodulation Society 12th World Congress from June 6 - 11 in Montreal is rapidly approaching, so we encourage you to register and make your hotel reservations if you have not already.

The program, “Neuromodulation: Medicine Evolving Through Technology,” is expected to draw more than 1,300 clinicians, scientists, bioengineers, industry representatives and members from all over the world -- including those in new chapters or chapters in formation.

Also that weekend is the Formula 1 Grand Prix, so please book your flights early and check the
Canadian government website to see if you will need to apply for a visa. Anyone traveling from outside Canada, including the United States, will also need a valid passport.

INS Survey Thanks

Thanks are due to respondents who answered survey questions about use of new neurostimulation hardware innovations and waveform strategies recently. The survey sought to better understand the placement of these therapies in the pain care algorithm, and global use of such therapies. Based on the initial contributions, in the interest of receiving a robust response rate in order to publish results, we plan to improve the survey questions and ask for your participation at INS Montreal. Please look for the official INS survey.

Meeting Abstracts Will Be in the Online Journal

Abstracts from the 12th World Congress will be published in the online edition of Neuromodulation: Technology at the Neural Interface.

In case you missed seeing them, the February 2015 online edition of the journal includes abstracts from the 2014 annual scientific meetings of the German Neuromodulation Society and the North American Neuromodulation Society.

We invite all chapters to publish their scientific meeting abstracts in the online journal.

Facebook Followers Top 600; Connect with Our Events

Last month our number of Facebook followers swiftly shot upward to top 500 and has since grown past 600. On the INS Facebook page, https://www.facebook.com/Neuromodulation, you may indicate if you will be attending the 12th World Congress or the preconference cadaver course, and see occasional updates about our field or our members.

If you are on Twitter, the hashtag to discuss the 12th World Congress is #INS2015.

Please note, for Facebook followers, due to changes in the Facebook algorithm, the best way to follow updates on that page is to select "Get Notifications" and "Following" (see the screen shot below) -- these options appear when hovering your cursor over the "Like" button. Also, by clicking on the dots "..." to the right of that, another pull-down menu appears where you may select "Share" to share the page -- both are ways to ensure wider exposure for our news.
If you like what you see and want to become involved in the INS...

Join us or renew now!

Submit an article to Neuromodulation: Technology at the Neural Interface

Refer a colleague to INS!

Learn about our biennial Congress or register

View our website Expert Panel Discussions

Offer unbranded content for the INS Image Bank or YouTube channel

See related global initiatives

View or join our Public Directory of Members

Use our INS Google group for peer consultation, INSForum

Follow INS updates on LinkedIn or Twitter

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Last Updated on Friday, August 24, 2018 02:10 PM