



NEWSLETTER SERIES 2019

NEWSLETTER EDITORS:

Editor:

Martha Bauer, BSc, OT, Reg (Ont)

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Dr. Eleni Hapidou, Ph.D., C. Psych.

Dr. L. Hatcher, MD, CCFP, FCFP, CHE



THEME: MARIJUANA AND PAIN MANAGEMENT

- **Message from the President:**
- **Reminder to Renew your Credentialing Call the Office with any questions**
- **Connect you to your Board Members, Martha Bauer and Kevin Rod**
- **Articles and resources related to Marijuana and pain management - resources for clinicians and clients.**
- **CAPM course offerings**
- **Upcoming Education/Conferences**
- **Request for you - let's begin a list of CAPM Publications/juried presentations. Dr. Hapidou is highlighted in this Newsletter. Please send in your accomplishments, any articles you think we might read.**

**NATIONAL PAIN AWARENESS WEEK
NOVEMBER 3-9, 2019**

CAPM VISION

The Canadian Academy of Pain Management is dedicated to promoting excellence of care for pain

sufferers; through comprehensive professional development for professionals who care for pain sufferers; in a context of interdisciplinary collaboration; and through adherence to the core professional attitudes and acquisition of knowledge essential for caring for pain sufferers.



A MESSAGE FROM THE PRESIDENT

We send our thanks to our many CAPM members who promote excellence in pain management, dissemination of knowledge central for interdisciplinary pain teams, and who devote their practice to improving the life of pain sufferers and their families.

Our most important unique contribution is CAPM Credentialing and Advanced Credentialing. The educational component of this is always up-to-date and continually being revised as quality evidence-based literature appears. We conduct 3-day courses in classroom format usually twice per year. These courses are part of the requirement for credentialing but would be relevant for any clinician wanting to refresh or to deepen the understanding and knowledge base relevant pain management.

We share a commitment to quality education in pain management with 2 partners; the University of Alberta and the McGill University which each provide their own online university accredited courses, particularly relevant for those who can't make an in-person trip to the CAPM classroom-based courses.

The membership in CAPM has gradually increased to approximately 200 since we adopted the current goals and objectives with an interdisciplinary focus and credentialing process 13 years ago. During this time the Royal College of Physicians and Surgeons of Canada has introduced a pain specialization program as postgraduate medical subspecialty and several Canadian universities are graduating pain specialists, especially in interventional pain management, to begin to meet the enormous and still unfulfilled needs. The CAPM was one of the signatories in the application to the Royal College to initiate this process about a decade ago. This pain specialization option is very important and will hopefully increase its capacity for trainees, but still the majority of pain problems in the community are still addressed only by primary care physicians and by chiropractors, physiotherapists, occupational therapists, social workers, nurses, pharmacists, massage therapists, and other professionals, or by "change of scope physicians" either from the primary care or Royal College specialty fields. Although these dedicated clinicians working in pain management are not designated as "pain specialists", our communities depend mostly on their skillful and committed professional work: many are members of the CAPM and the CAPM will continue to promote their activity.

The last few years we've seen an increasing number of new members and credentialed members from other provinces and territories in Canada, from the USA, and some from the Middle East, and we are gratified that we can contribute collectively to spreading skills and knowledge in pain management.

We as professionals working in our society are faced also with increasing challenges that require our skills - the opioid crisis is truly a life-and-death crisis: CAPM includes continually updated teaching regarding understanding opioids and the alternatives to opioid use and strategies for tapering while maintaining a commitment to pain management.

Another new challenge is the potential impact of increased availability of cannabis while the issues of future medical and psychiatric risk, safety precautions in users during work or driving, dose monitoring, mechanisms of action, and evidence-based guidance for medical and psychological conditions, have a long way to go.

For your devotion to addressing these commitments and challenges, we thank you and wish you success in the coming year.

Dr. Eldon Tunks, MD, FRCP C, Psychiatrist, Practising in Pain Management
Active Staff Hamilton Health Sciences Department of Physical Medicine and Rehabilitation
Emeritus Prof. of Psychiatry McMaster University
Pres. Canadian Academy of Pain Management

MEET THE BOARD



**MARTHA BAUER, OT REG (ONT)
MEMBER CANADIAN ACADEMY OF PAIN
MANAGEMENT
DCAPM**

Martha Bauer began her Occupational Therapy career in 1988. She began her practice in pain management in 1991 at Chedoke Pain Management program 1991-2000 and the Ennis Pain Centre 2000- present. Martha worked for employers, insurers, lawyers and now works at the McMaster Family Practice where she has been running a multidisciplinary lifestyle and pain management group for over 9-years. Martha has been with CAPM and on the Board for 9 years. Martha has recently become the President-Elect of the Ontario Society of Occupational Therapists.

The move from symptom focus to focus on function is a key role of occupational therapists in every field of OT. However, in pain management, we know that this shift is central to successful pain management. Martha has made it her life's work to help clients both individually and in group settings, learn how to make that shift through a focus on doing despite pain. Martha is a Lecturer (Adjunct) at McMaster University School of Rehabilitation Science where she provides a lecture to OT's to help them learn what we at CAPM understand as the essential knowledge and skills required to do this effectively.

This will be highlighted in the next Newsletter along with other research that has been coming out lately on knitting, and social prescriptions and the impact of participation on healing and recovery.

MEET THE BOARD



**DR. KEVIN ROD, MD, CCFP
DIRECTOR TORONTO POLY CLINIC
LECTURER DFCM UNIVERSITY OF
TORONTO
CREDENTIALING CHAIR, CAPM**

Dr. Kevin Rod is a Family Physician with focused practice in Chronic Pain, director of Toronto Poly Clinic and a Lecturer with the University of Toronto DFCM. Dr. Rod has received Awards of Excellence from University of Toronto DFCM in 2013 and the Ontario College of Family Physicians in 2008.

Dr. Rod has been a member of CAPM and Board Member since its formative years. He has been an integral part establishing the CAPM credentialing process with Dr. E. Tunks. The CAPM is very grateful for all of Dr. Rod's commitment and contributions to date and for his ongoing support and work to continue to work to strengthen the practice of chronic pain management as a focus of practice in medicine.

Dr. Kevin Rod

Patients referred to Toronto Poly Clinic multi-disciplinary pain program are often taking opioids at doses exceeding Canadian Guidelines (90 mg Morphine Equivalent Dose).¹ Their care can require tapering the dose - despite patients' fear that pain will increase. Tapering is more likely successful when the patient is ready to change and is carefully monitored, and with pharmacological and psychological support. We observed the effects of psychological support and use of cannabinoids for opioid reduction.

Six hundred of our chronic pain patients taking daily opioid doses of 90-240 MED were prepared to reduce their opioid use. ZENDOSE, a validated web-based program,² provided psychological support. This free access mental health and wellness tool provides customized care plans. Daily posts encourage quiet reflection on improving quality of life for approximately 15-30 minutes. A daily log feature tracks medical, physical, and mental well-being. Medical cannabis, at a balance of CBD and THC in the range of 4-6%, provided pharmacological support. Physicians monitored patients regularly, typically every 1-2 weeks, assessing their pain, sleep, function, quality of life, benefits of tapering, use of non-pharmacological therapies, effects of medical cannabis, opioid risk, and opioid withdrawal symptoms.

Opioid doses were tapered at a rate suitable for the patient, usually 10% every 1-2 weeks. For each reduction, patients were authorized to increase use by 0.5 g/day of medical cannabis if needed. The range of using medical cannabis was between 1-3 gram per day. After six months, 329 (55%) patients had reduced their daily opioid intake by an average of 30%; 156 (26%) ceased taking opioids altogether. All expressed satisfaction with their pain control, sleep and quality of life. Opioid use remained unchanged in 114 patients (19%). One patient with poorly controlled pain increased their dose.

These encouraging results merit further study.

References

1.

Busse JW, Craigie S, Juurlink DN, Carrasco A, Alk E, Agoritsas T, et al. Appendix 1 (as supplied by the authors): The 2017 Canadian Guideline for Opioids for Chronic Non-Cancer Pain. Appendix to CMAJ [Internet]. 2017 [cited 2018 Oct 13]. 189:E659-66. doi: 10.1503/cmaj.170363. Available from: <http://www.cmaj.ca/content/suppl/2017/05/03/189.18.E659.DC1>.

2. Rod K. Finding Ways to Lift Barriers to Care for Chronic Pain Patients: Outcomes of Using Internet-Based Self-Management Activities to Reduce Pain and Improve Quality of Life. Pain Res Manag 2016;2016:8714785. doi: 10.1155/2016/8714785. Epub 2016 Mar 1.

Medical Cannabis Oils

Dr. Lydia Hatcher MD

What are Cannabis oils:

These are extracts from the buds of the cannabis plants that have been prepared for use instead of smoking or vaping. They are best used sublingually but can be swallowed or cooked if preferred. There are many varieties of oil available and may be from the Sativa, Indica or a Hybrid plant. It is important to know that this will provide very different effects depending on the strain and ratio. Cannabidiol (CBD) is non-psychoactive. Tetrahydrocannabinol (THC) is psychoactive. There are over 80 active known ingredients in cannabis that together interact to cause a "entourage" effect. This affects the effect and use of any particular strain.

Differences in Strains

Sativa	Indica
<ul style="list-style-type: none">• Have a high CBD:THC ratio• More stimulating/alerting• Feeling of well-being and ease• Better for daytime	<ul style="list-style-type: none">• Have a high THC:CBD ratio• More psychoactive/ 'couch lock'• Relaxing and calming• Better for night

Hybrids- Cross-breeding of the two types with a wide variety of strains with unique characteristics.

<http://www.befrances.com/2014/06/28/indica-vs-sativa-understanding-differences/>

How are Oils Produced:

All oils from LP's use a multi-step extraction process that extracts the cannabinoids, while removing undesirable compounds such as chlorophyll, pigments, tannins, waxes, and other compounds that can affect taste, smell, and consistency. This results in a cleaner, more consistent product. Part of the extraction process includes heating the raw oil (decarboxylation) so it is ready for use. This chemical process means it does not need to be heated for effect but can be used in cooked or baked food for personal preference. Some LP's use a cold press technique which can make it easier for certain patients to tolerate taste/local side effects. (dry mouth, sore mouth, GI upset)
Health Canada has mandated a maximum concentration of 3% weight/volume, or 30mg THC/mL of oil, which is why a carrier oil is required. Depending on the LP, the carrier oil may be sunflower, coconut or flaxseed - this may alter taste and patient preference.

Read the entire article - [Medical Cannabis Oils Article, January 2019](#)

CAPM EDUCATION IN 2019

We now have 133 credentialed members including Physicians, Psychologists, Occupational Therapists, Physiotherapists, Chiropractors and others.



The 2019 Credentialing Course is now open for registration. Dates are February 28, March 1 and March 2, 2019 and also May 30, May 31 and June 1, 2019.

To download the credentialing brochure and registration information, please click here:

[CAPM COURSE REGISTRATION GUIDE, 2019](#)

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UPCOMING CONFERENCES, WORKSHOPS AND COURSES

Canadian Pain Society Annual Conference:

Canadian Pain Society (CPS) 40th Annual Scientific Meeting As an FYI - This years' conference had 11 references to interdisciplinary care - in presentations and posters. Do you have some research or program evaluation to present at the conference?

2019 TORONTO, Ontario (April 2-5) - Sheraton Centre Toronto

2020 CALGARY, Alberta (May 19-22) - Hyatt Regency Calgary



The World Congress on Pain®

August 4 - 8, 2020, Amsterdam, The Netherlands

<https://www.iaspworldcongressonpain.org/amsterdam/>

PAINWeek September 3-7, 2019

Las Vegas <https://www.painweek.org/painweek.html>

<http://www.painab.ca/annual-conference.html>

The Pain Society of Alberta's Annual Pain Conference
October 17th to October 19, 2019

The 13th Annual Pain Society of Alberta's conference will take place at the Chateau Lake Louise, Alberta, Canada.

Although the conference is mainly aimed at family physicians, anyone interested in pain and pain management may attend. For more information and to keep up to date on future conferences, see the PSA website.

The Work Wellness and Disability Prevention Institute (was the CIRPD) has changed - please go to the new website: <https://www.wwdpi.org/>

Multiple webinars are produced and stored - Many multidisciplinary webinars to reduce and or prevent disability

University Diploma for Inter-professional Care

<https://www.mcgill.ca/spot/programs/online-graduate-certificates/chronic-pain-management>
Graduate Certificate in Chronic Pain Management (online learning)

Graduate Diploma in Pain Care program Ongoing / Online

<https://www.ualberta.ca/rehabilitation/professional-development/certificate-programs/certificate-in-pain-management>

MEDICAL MARIJUANA RESEARCH AND EDUCATION HOW WILL WE KEEP UP?

Canada may well become the leader in the world on Cannabis research because of our new legislation. But with so many sources of information, how will we direct our own efforts and our clients research?

CANADIAN UNIVERSITIES

Based on Google Search- "university name" and "Cannabis research" or "Medical Cannabis"

MCMASTER - DEGROOTE

Michael G. DeGroot Centre for Medicinal Cannabis Research
<https://cannabisresearch.mcmaster.ca/>

MCGILL UNIVERSITY

Alan Edwards Pain Management Unit
<https://www.mcgill.ca/paincentre/research-0>

UNIVERSITY OF BRITISH COLUMBIA

Has a professorship in cannabis science
<https://www.ubyssey.ca/news/cannabis-science-ubc/>

UNIVERSITY OF SASKATCHEWAN

Cannabinoid Research Initiative of Saskatchewan
<https://research-groups.usask.ca/cris/>

UNIVERSITE DE SHERBROOKE

They have a Chair in Medical Cannabis Research
<https://www.usherbrooke.ca/recherche/fr/regroupements/chaires-institutionnelles/chaire-cannasher-sur-le-cannabis-medical/>

UNIVERSITY OF WESTERN ONTARIO

Western Centre for Mental Health
<https://www.csmh.uwo.ca/research/cannabis-education.html>

UNIVERSITY OF OTTAWA

<https://media.uottawa.ca/news/first-ever-cannabis-law-courses-be-offered-uottawa>

DALHOUSIE UNIVERSITY

Some neuroscientific research has been going on for a few years now. They've launched a company, Panag Pharma Inc., through which they're developing a list of non-addictive pain-

relieving products containing cannabinoids and similar compounds found in cannabis and other plants.

UNIVERSITY OF MANITOBA

A neuro-immunology team, led by Dr. Michael Namaka, is looking at the usefulness of two types of cannabis oil extracts.

All Universities also have references to policies for students. No Specific reference to research about cannabis was found at other Universities that were researched.

For a complete list of Universities and Other Agencies, please click here: [Medical Marijuana Research & Education](#)

TWITTER FEEDS

ChronicPainNetwork@cpn-rdc
IntegrativePainMgt@TeamPainCare
PainAustralia@ChronicPainAust



And Just an FYI:

Where to learn how to be in the Cannabis Industry - Medical and Otherwise:

<https://www.narcity.com/news/these-11-canadian-colleges-and-universities-all-offer-weed-programs-now>

ONGOING REQUEST



At CAPM we want to build our community of multidisciplinary pain management practice and recognize the contributions of all our members to the literature. There are so many different places where we present and publish.

DR. ELENI HAPIDOU ACTIVITIES THIS QUARTER, July/Aug/Sept 2018)

Publications:

Shaikh, M & Hapidou, EG. Factors involved in patients' perception of self-improvement after chronic pain treatment. Canadian Journal of Pain, Revue Canadienne de la Douleur, Volume 2, 2018 - Issue 1.

<https://doi.org/10.1080/24740527.2018.1476821>

Hapidou EG, Markarov A, Li C. A prospective examination of acceptance at a CBT-based interdisciplinary chronic pain management program. Psychol Cogn Sci Open J. 2018; 4(1): 14-23. doi: 10.17140/PCSOJ-4-139

<https://openventio.org/wp-content/uploads/A-Prospective-Examination-of-Acceptance-at-a-CBT-based-Interdisciplinary-Chronic-Pain-Management-Program-PCSOJ-4-139.pdf>

Lectures/ Talks:

Hapidou, EG. Cognitive Behavioral Therapy for Chronic Pain. Educational Session to the Pain and Anesthesiology Residents and Fellows, McMaster University, October 3, 2018.

National Initiatives:

Attended the meeting with Veterans Affairs and talked about research in the MDG Clinic Funded Program. September 19, 2018.

Attended the Monthly Teleconference with the Adult Chronic Pain Network Psychologists.

International Initiatives:

On the Editorial Board for the Journal of Pain (reviewed 4 manuscripts recently)
<https://www.journals.elsevier.com/the-journal-of-pain/editorial-board>

And a number of Open Access journals.

Training/Supervising/Teaching/Education:

- Attended Monthly Physician Pain Rounds

- Supervising two undergraduate students in the BHSc Program and the PNB Department at McMaster University (September 2018 to April 2019).

Poster Presentation

Hapidou, EG and Zhu, S. Identifying effective coping strategies and associated personality characteristics in chronic pain. Poster presented at the 17th World Congress on Pain, September 12-16, 2018, Boston, USA.

PLEASE SEND US

What and Where have you presented this year?

What have you published this year?

Do you have a favourite resources for updating your practice ?

Your favourite websites/books/video's for people living with Chronic Pain

This will be collated and find the best venue for us to have this available

Editor: Martha Bauer, BSc, OT, Reg (Ont)

Associate Editors: Dr. Eleni Hapidou, PhD Psych

Dr. L. Hatcher, MD, CCFP, FCFP, CHE

Thank you for reading.

Please send any feedback to The CAPM office at office@canadianapm.com

Not A Member?

Join Today to start receiving Newsletters, Reports, Information and the information sharing between members.
<https://www.canadianapm.com/memberships.html>

Not Credentialed?

Attend the Credentialing Course this year! Only members can attend and be credentialed through CAPM.
<https://www.canadianapm.com/courses.html>

