

Welcome to the seventh edition of "PAIN PALS", a newsletter which provides friends and supporters of the Pain Management Research Institute with news about recent research breakthroughs, some patient stories and events in support of the work performed at PMRI.

In this issue, we highlight:

- *Marathon Swim in aid of Pain Research*
- *New Director at the Helm*
- *When Pain Persists*
- *The Perception of Pain in the Presence of Others*
- *Farewell Seminar for Professor Cousins*

MARATHON SWIM IN AID OF PAIN RESEARCH

Back in our May 2015 edition, we reported to you about the determination of two extraordinary people – **James Pittar** and **Emma Livingston** – both marathon swimmers, who spoke at our NSW Parliament House Luncheon about how they overcome challenges in their lives and attain what many of the rest of us would say were unbelievable goals.

James and Emma were in the audience at the Balmoral Beach Club on Friday 1st April, when New South Wales Minister for Health, The Hon. Jillian Skinner MP, officially launched a new Marathon Swim. The function introduced us to two gentlemen in the prime of their 60s who intended to swim from Palm Beach to Manly – **Barry Feyder** and **Kieran Kelly**.



Brian Davidson and Tim Holden (PMRI Board), Minister Skinner, Professor Cousins with Swimmers Barry Feyder and Kieran Kelly at the Launch.

The format for the 27km swim was to be a two-man relay, aided by a support crew including swim coach **Charmian Frend**, support boat manager

Denise Elder, kayaker **Alex Korjavine** and back-up swimmer **Roberto Soares**.

Kieran and Barry wanted their swim to help raise awareness of chronic pain and its costs to the community, as well as raising funds for pain research. Kieran and Charm have both experienced severe pain in recent times. Kieran's was only for about three months and it has now largely abated. Charm is managing this problem as part of her daily life.



At 6:43am, Kieran heads off on the first leg of their relay swim at Palm Beach.

Charm is a patient of PMRI, has had almost constant back trouble since the age of 16. She has endured eight back surgeries, several cortisone injections, nerve burning in her back and anaesthetic injections in her head.

This makes her role on the team particularly appropriate.



The date of the swim was delayed to ensure optimum fitness of both the swimmers and of course the best possible ocean swim conditions – weather, winds, current and so on. Eventually, the date was set for Friday 29th April. Kieran was the lead-off swimmer and jogged into the surf at Palm Beach just as the sun was rising at 6:43am.

Several supporters cheered him on his way, but by the time the lads arrived at Shelly Beach (Manly) at

2:07pm, another 20 or so friends were there to greet them, along with the photographer from News Ltd and Mosman Daily. Roberto and Denise had also joined the swim for the last 2kms from the headland at Queenscliff.

Footnote: It was originally intended that Charm would be boat captain, as well as coach. However, her own health situation prevented her participation on the day itself, and a week later she was booked in for a stimulation implant. We hear the procedure was successful and Charm will be back to swim coaching in a matter of weeks.



At 2:07pm, Shaan greets Barry and Kieran as they walk up Shelley Beach.

NEW DIRECTOR AT THE HELM

Professor Paul Glare, Chair of Pain Medicine, University of Sydney, and Director PMRI.

I am incredibly fortunate to have been appointed to these positions, vacated by Michael Cousins AO on his retirement. I commenced work on 4th April 2016.



Professor Paul Glare, new Director of PMRI.

Although my background is in Internal Medicine, I have had an abiding interest in pain issues throughout my career.

After graduating from University of Sydney Medical School in 1981, I undertook physician training at Royal Prince Alfred Hospital during which time I developed an interest in palliative care, and in particular the terrible problem of cancer pain and the crucial importance of managing it effectively.

On completing my clinical training, I undertook a two-year (1989-1990) research fellowship at the Cleveland Clinic working on a project in the Biochemistry Department to measure morphine and its metabolites in the serum of cancer patients. I returned to Sydney in 1991 and began as a staff specialist in palliative care at RPAH, then Westmead, then back to RPAH from 1998 until 2008. I was then recruited by Memorial Sloan



Professor Glare (2nd from right) at Manly, greeting Kieran and Barry, and kayaker Alex Korjavine (rear) with Brian Davidson.

Kettering Cancer Center (MSKCC) in New York to be the Chief of the Pain & Palliative Care Service. I remained at MSKCC until February this year. While in New York, I also held an appointment as Professor of Medicine at Weill Cornell Medical College.

As well as being a fellow of the Royal Australasian College of Physicians and its Chapter of Palliative Medicine, I'm also a Fellow of the Faculty of Pain Medicine. I also have a Master of Medicine in Clinical Epidemiology and a Master of Arts in Applied Ethics (Health Care).

My clinical experience is not restricted to cancer pain and palliative care, as I also provided a couple of sessions a week in the Pain Clinic at RPAH for a number of years before moving to New York.

My main research interests in New York were eclectic and included: cancer pain and cancer survivor pain; the comparative effectiveness of chronic pain therapies; genomics of cancer cachexia; and decision architecture/social psychology/behavioural economics as they relate to health care decision-making. I hope to be able to continue to pursue many of these back here in Sydney.

Professor Cousins certainly leaves an incredible legacy, not only locally but nationally and internationally. While they are incredibly big shoes to fill, I am confident that with my experience in academic medicine both in Sydney and in the USA that I can help the PMRI remain a global leader in pain management.

We can do this by achieving the following outcomes in the years ahead:

- bring Pain Services, Oncology, and Palliative Care closer together in our Local Health District;
- maintain our track record of basic and clinical pain research;
- enhance the teaching of pain in the Sydney Medical Program; and
- continue to contribute to state and federal policy-making on pain and pain treatment.

WALK AGAINST PAIN 2016

Against the backdrop of Marathon Cricket at the Sydney Cricket Ground, over 150 Walkers enjoyed a spectacular afternoon participating in PMRI's fifth "Walk Against Pain" in February.

Once again, **Professor Michael Cousins** and PMRI staff joined the Walkers in the celebration, along with **Jim Maxwell AO**, President of the Primary Club of Australia, who hosted the cricket festival.

To our delight, we had some very special guests join the Walk this year – the Maasai Cricket Warriors from Kenya and "The Richies", the latter well-known to SCG cricket audiences. Both groups had matches later in the evening, but saw fit to warm up by getting in a few laps with us.



The Walkers helped raise over \$11,000 to assist pain management research, as they clicked over laps of the grand arena.

Many thanks to the Walkers, their sponsors and our corporate supporters on the day - **St Jude Medical, Mundipharma** and **Pfizer**. The latter two also entered a cricket team in the tournament prior to the Walk commencing, both teams performing creditably on the day.



The Richies interviewing one of the Maasai Warriors as they commence the Walk at the SCG.

This year, we received volunteer support from 20 **ANZ/One Path** staff members and another 20 from **NAB**. Their contribution was enormous, as they helped with registering walkers, handing out water bottles and sun cream, and acting as marshals to watch out for low-flying cricket balls! ANZ also entered a cricket team playing against the NSW



Blind XI in a game of blind cricket. Best we don't discuss how they fared.

The ANZ and NAB squad are to be congratulated because many of them participated in the Walk itself, thereby boosting the on-field presence, at what has become a significant publicity event for pain research.

Photos of the event can be found on PMRI's Facebook page: www.facebook.com/pmri.ltd

Why don't you join us next summer at the SCG?

WHEN PAIN PERSISTS

Lesley Brydon knows more about Australia's health system than anyone should.

Twice widowed, Brydon lost one husband to cancer and another to heart disease, both at a young age. She has had osteoarthritis since her 20s, culminating in two hip replacements, two shoulder replacements and two knee replacements, and is rehabilitating after her most recent upgrade.

Pain has been her constant companion, so much so that Lesley now heads the not-for-profit body Painaustralia, established in 2011 to promote the need for best practice in pain management.

Long ago Brydon realised something Australians may have yet to consider: pain can be a complex issue, requiring a considered and comprehensive response, not just more tablets and capsules.

"I can't take painkillers because they just don't help," says Brydon, perhaps countering the perception that someone in such need would be reliant on such drugs (she takes a multidisciplinary approach).

If pain is the body's warning that something is wrong, the headlines and political commentary about painkillers of late is a warning something may be wrong in pain management. Painkillers work well in certain circumstances but can become addictive or be ineffective.

The quandary is how to balance these risks, and people with chronic pain should heed the warning that their approach to its management needs to be checked and, if necessary, updated.

It is estimated that one in five Australians suffers chronic pain — not sudden, or acute pain, but pain that lingers for more than three months. Just as there are different types of pain, with different origins, and different factors to consider, there are many treatment options, of which the regular use of painkillers is but one.

The Friends of PMRI enjoying their varied





Lesley Brydon, CEO, PainAustralia.

To pain medicine clinician Malcolm Hogg, the link between opioid use and low socioeconomic status in Australia is not surprising.

"Chronic pain has a significant impact on employment, with some 40 per cent of forced workplace retirements linked to chronic pain," Hogg says.

"The concentration of opioid users in outer urban areas and regional cities reflects the socioeconomic drift of people living with pain to these areas."

Products containing codeine are restricted in some countries but in Australia are still available over the counter at pharmacies, at least for the time being.

Last year, the Therapeutic Goods Administration sparked an outcry when it proposed a doctor's script be required to purchase popular painkillers such as Nurofen Plus and Panadeine, as well as cold and flu medications containing codeine.

The experts who recommended these tighter controls acted on the risk of "medical misadventure" through the abuse of codeine — the fatal overdose rate more than doubled between 2000 and 2009 — and a preference for people with chronic pain to use other drugs under guidance.

Brydon, a patient advocate, says pain is "highly stigmatised" in society, which adds to the difficulty ensuring people in need get adequate support.

"People with pain are discriminated against at every level," she says. "Even in families, people can think you are just bunging it on and unable to cope. Those still working can have their pain conditions exacerbated by the workplace — for example, having to sit at a desk or in a car — yet find it difficult to discuss alternatives. Sometimes even health professionals don't take you seriously and that has to change."

Brydon wants politicians to support a modern, evidence-based pain strategy and provide for those in need. She says people with chronic pain

activities and engaging with the community



do not want to be reliant on drugs, yet the lack of funding for supported self-management means conditions are not properly handled and have a bigger impact on patients and the health system.

"I can have a hip replacement, which will cost the government about \$40,000, but I can't go on a pain program that will cost them \$5000 or \$6000," she says.

"I would like to see government support for a pain program which utilises a GP, physiotherapist and clinical psychologist all trained in pain management, who would work with the patient as a team."

Taking control of chronic pain

Learn how to communicate effectively with health professionals and understand medicines. Consider the NPS MedicineWise resources nps.org.au

Find a supportive GP who can develop a care plan, use any Medicare support and, if required, involve other experts in a team-based approach.

Access multidisciplinary care to address the physical, psychological and environmental or social factors associated with your health.

Join a support group or online community to connect with people who have similar problems, be they elderly, parents, veterans or other groups.

Learn more about chronic pain and how to manage it. Resources include the ACI Pain Management Network (NSW Health) and pain HEALTH (UWA).

Source: painaustralia.org.au

THE PERCEPTION OF PAIN IN THE PRESENCE OF OTHERS

Dr Claire Ashton-James is a social psychologist with expertise in interpersonal processes and a particular interest in the social modulation of pain, and the impact of pain on the formation and maintenance of social relationships. Claire was a speaker at the June 2015 Visiting Scholar Seminar conducted by PMRI.



Dr Claire Ashton-James

As many of our pain management program (ADAPT) participants will already know - both from their personal experience and involvement with the program - the anticipation and experience of pain can be affected by the presence of others.

When friends, family, medical specialists or even strangers are believed to have "good" intentions

(to support and care rather than harm or neglect) the experience of pain may be less aversive or distressing.

There are many possible reasons for this. One perspective is that the presence of a 'supportive other' can influence our interpretation of pain - specifically, how threatening it is perceived to be. When pain is experienced in a safe and supportive social context, it is often experienced as less threatening.



One of my recent research projects has explored whether patients' perceptions of surgeons influenced their anticipation and experience of pain. The project began as an investigation of whether surgeon gender influenced patients' pain

experiences during and after a complicated wisdom tooth removal.

While we did not find that surgeon gender influenced the amount of pain people felt, we did find that perceptions of the surgeon did influence pain.

Interestingly, we found evidence that in this surgical context, surgeons' perceived competence was a more important predictor of patients' feelings of safety, and consequent pain, than surgeons' perceived warmth and supportiveness. That is, the more competent we perceive our surgeon to be, the less pain we perceive - even if the surgeon isn't particularly friendly!



This finding is consistent with earlier research showing that (perhaps counter intuitively) reassurance may increase rather than decrease pre-surgery anxiety and stress, depending on how it is communicated.

It appears that the communication of empathy and sympathy before surgery is neither helpful to patients' feelings of safety and security, nor their pain. Reassurance in the form of an expression of surgical competence and confidence, however, may help to increase patients' feelings of security during surgery, and reduce their experience of pain.

NEW MEMBER OF RESEARCH STAFF

Dr. Karin Aubrey **Neurobiology of Pain Laboratory**

Karin completed her Ph.D. at the University of Sydney in the Department of Pharmacology in 2004, where she studied the how a brain transporter protein works. This transporter protein is involved in the control of inhibitory neurotransmission and related to the transporters that are targeted by the SSRI class of anti-depressant drugs.



Dr Karin Aubrey.

During her Ph.D., Karin discovered the site of action and mechanism of some endogenous modulators of this transporter. She then was awarded a Marie Curie Postdoctoral Fellowship to continue her training at the Ecole Normale Supérieure in Paris, France, where she worked for six years investigating how transporter proteins influence the signaling of inhibitory neurons in the spinal cord and hippocampus.

Karin returned to Australia at the end of 2012 and was appointed the head of Neurobiology of Pain Laboratory in December 2014. Her laboratory studies how painful signals are transmitted and modulated by inhibitory signals in the dorsal horn of the spinal cord. This region is the entry point in the central nervous system for pain signals and the region where descending inhibition of pain culminates. Her lab forms part of the basic research team at the Pain Management Research Institute and is located on Level 13 of the Kolling Institute at Royal North Shore Hospital.

FESTSCHRIFT FOR PROFESSOR COUSINS

On Thursday 19th May, senior staff from PMRI, the University of Sydney and the Royal North Shore organised a farewell seminar for our retiring Director, Professor Michael Cousins AO.

An audience of over 120 colleagues and supporters

in the Kolling Auditorium received a series of presentations about current pain research topics by peers and disciples of the Professor's. The NSW Minister for Health, The Hon. Jillian Skinner MP, opened the seminar recounting her early meeting, her initial and continuing admiration for Michael's inspiration and leadership.



Minister Skinner arriving at Professor Cousins' Farewell Seminar.

A feature of the afternoon was the contribution by Professors John Loeser, Dan Carr and Brenda Lau, all overseas-based researcher/clinicians, whose own careers in the study of pain had been stimulated by Michael during his long tenure.

Our incoming Director, Professor Paul Glare, closed proceedings, knitting together the topics presented by nine speakers plus the three overseas videos as the legacy blueprint for pain research locally and globally.



Helen Johnston with Professor Cousins.

On a personal note, may I add what a pleasure and inspiration it has been for Geoff and me to work with Michael these past six years or so. What has inspired us the most are not so much the scientific analysis and neurophysiology jargon, rather the patients of all ages whose lives have improved so dramatically because of the diagnoses, treatments and care lovingly administered by Michael and his peers.

Professor Cousins, while winding down from clinical practice, will, we are pleased to say, continue on the Board of PMRI, providing guidance and direction to our further research and education efforts.

Thank you, Professor Cousins!

PAIN PALS

"Pain Pals" is edited by Shaan Verco on behalf of the "Friends of PMRI". We welcome your feedback and contributions. It is designed for easy reading about matters of concern to supporters of PMRI.

Membership is open to all people who care about finding new and improved ways of helping 4 million Australians who suffer from chronic or persistent pain.

In 2016/17 we need to find \$1m from private sources to help grow the Institute with a critical mass of highly qualified researchers and clinicians. That is \$1m beyond what we hope to receive in grants from Federal and State Government organisations.

To become, and to continue as, a Member of "Friends of PMRI", simply make a donation each year of \$60. The option exists for Members to donate more if they are so moved and are able. Please use the form downloadable from our website, www.painmgtresearch.com, or mail a cheque to 'PMRI', Douglas Building, Royal North Shore Hospital, St Leonards NSW 2065.

Remember "membership" is not a one-time only action; it needs constant renewal of commitment to ensure the results are achieved. Donations over \$2 are tax-deductible; PMRI is a registered charity, a joint initiative of the Hospital and University of Sydney.

CORPORATE SUPPORT

With our need for more support from private corporations and trusts, we were pleased to be invited to present at a Board Room 'Philanthropy' Luncheon in October at the Head Office of one of Sydney's larger corporate entities.



Professor Cousins addressing the Board Room Philanthropy Luncheon.

The NSW Minister for Medical Research, The Hon Pru Goward MP, addressed the guests following a welcome by PMRI Chairman Timothy Holden. Professor Cousins then briefed the audience on the new Saluda 'closed-loop' neuromodulation technology, which promises to revolutionise treatment for chronic back pain.

Funds donated by guests at the Luncheon were

augmented by a grant from the corporate host's Foundation.

Readers of this article may be inspired to invite your employer or business partners to consider a gesture of a similar nature. Please contact Shaan on (02) 9929 5566 to discuss.

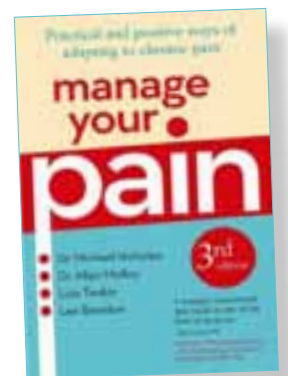
PAINAUSTRALIA KEEPS US "IN THE KNOW"

National advocacy body, Painaustralia, maintains an active website www.painaustralia.org.au developed as a resource centre, providing latest news and information about pain management services and programs nationally, the latest pain research findings, and up-to-date progress on the National Pain Strategy.

The site also provides access to educational resources for consumers and healthcare professionals.

MANAGE YOUR PAIN: 3RD EDITION

In **MANAGE YOUR PAIN**, members of the Pain Education Unit have drawn on the latest scientific research and their extensive clinical experience to show you how to live with pain. Manage Your Pain will help you and your family to gain a better understanding of your pain and minimise the impact it has on your life.



Manage Your Pain is a self-help book, but it can be used as part of a program worked out with your doctor, clinical psychologist and/or therapist.

Good news! You can now order a copy of this excellent guide online via our website at \$29.95 per copy, or call us on (02) 9929 5566.

