# CAPM NEWSLETTER

# President's Message

Last year we sent our last newsletter at which point we undertook to reorganize CAPM in a number of important ways. The first was to consolidate the office management with Events in Sync, which is the same management organization used by Canadian Pain Society. This has distinct advantages, not the least of which is access to member databases, the fact that practically all members of CAPM are also CPS, and that Events in Sync provides an experienced, efficient and responsive management for communications, member services, and interaction with our stakeholders.

At the outset in 2005, we had an informal agreement with the American Academy of Pain Management to use their credentialing process, which is well validated and represents the standard for credentialing of the more than 6000 AAPM members, including many Canadians who belong to AAPM. This relationship between AAPM and CAPM is now being formalized. In September 2008 meeting between the executive of AAPM and CAPM president and vice president led to the AAPM voting to formalize the affiliation between AAPM and CAPM. What is to follow in October and November this year will be business details that link these two organizations and their respective information systems

Furthermore, as president of CAPM I have been appointed to be a member of the "credentialing and accreditation committee" of AAPM, which will facilitate the credentialing process that is relevant not just to Canadian members but is also increasingly accepted internationally for clinicians committed to pain management.

The letters patent of CAPM require an elected board of CAPM. Accordingly, the new elected board from May 2008 to May 2009 is as follows

- President Eldon Tunks
- Vice-President Howard Jacobs
- Secretary Gloria Gilbert
- Chair of Nominations (elections) Lisa Goldstein
- Chair of memberships Pam Squire
- Chair of Credentialing -- Eddie Wasser
- Treasurer -- Peter Rothbart

and one member at large in the elected board -- Kevin Rod

Our aim in the next year is to raise the profile of CAPM, facilitate the credentialing process of Canadian members, and begin to assert CAPM credentialing as the best available standard for professional identity in the pain management field. For this, we solicit your support and energy and vision.

Since we began this organization in 2005, we went from less than a dozen members to more than 100. We however collected membership fees from you only once, on signing up for membership, and waived yearly renewals 2007, and 2008 until we could put CAPM on a more solid business footing. We have now accomplished that, and are now asking you and all the members to renew your membership for the year 2009.

When you receive the application for renewal, we hope you will promptly renew your commitment and support for CAPM.

Yours sincerely,

Eldon Tunks MD FRCPC President CAPM Diplomate of CAPM Member and Diplomate of AAPM

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## **Academic Section**

We thank Dr. David Saul for his contribution to the academic section of the newsletter. We solicit similar thoughtful articles from the members on topics of concern to practitioners in pain management. Please make submissions to

> CAPM Secretary – Gloria Gilbert gloria@downtownclinic.ca

or to CAPM president Eldon Tunks etunks@mountaincable.net

### Fibromyalgia: the Orphan Syndrome—David Saul, MD

It's been around for over 100 years. It's been called muscular rheumatism, neurasthenia, fibrositis, and for the past 30 years, fibromyalgia, fibro or FM for short. Strangely, the affiction is 90% endured by females. The orphan syndrome was taken under the wing of the Rheumatologists, when an American College of Rheumatology conference in 1990 established standardized guidelines for proper diagnosis. Since then, many Rheumatologists in the U.S. have been leading the way trying to establish scientific validity for the FM Syndrome. Research continues showing multiple neurochemical associations, however, as yet there is no specific cause/effect identified and still no definitive diagnostic test for fibro. Even though the World Health Organization affords May 12 the distinction of being World Fibromyalgia Awareness Day, recognition and acceptance are not the same words. Ask doctors today and a vocal majority will hold the opinion that FM is "all in your head".

My medical practice is restricted to diagnosing and treating FM/CFS, which are both under the same umbrella of the ill-defined medical conditions. And, just because 50% of FM patients also have a clear diagnosis of: sleep disturbance, Irritable Bowel Syndrome, headache and major depression, too many docs link these associated diagnoses as causative for FM. In my view, the association is the other way around, with FM being the initiator of the disabling symptoms. Taking higher and higher doses of antidepressant meds will help to keep patients from jumping off buildings, but still does nothing for the pain.

The pharmaceutical industry is presently in a heated race for the status of first approved drug for the treatment of FM. Upon approval, which is what the medical community refers to as evidence-based medicine, I predict more FM non-believer docs would rather switch than fight. Plus, having a drug indicated for treatment of a controversial medical condition, more recognition and legitimacy of FM will likely follow. Whether that leads to the much needed compassion and support for the FM sufferer, at least we should see a positive impact on related medical areas: disability determination, legal issues and further research funding.

In my medical practice, I advocate a "natural" approach of nutrition, vitamins and supplements, exercise, meditation, creative writing. I have experience with some drugs, which have "cured" some of my FM patients. I have also seen too many drug trials fail time and time again. My practice structure allows me to handle only the worst of the worst FM patients. Some days there is just too much anguish and despair in my waiting room – where I take on the role of wounded healer. As I see it, a severe form of FM is one of the most horrible chronic pain conditions that humans have been afflicted with. It is a brutal form of slow torture, tearing apart families, degrading personal dignity, bringing patients to their knees in pain – crying out in desperation for some relief, from any source.

Only the family members, who remain as caregivers for those (usually wives or daughters) afflicted with the agony of severe FM, can attest to the helplessness they feel when witnessing the distress of their loved one. Severe FM will not only incapacitate the FM sufferer, it will devastate the family structure, often leaving post tornado-like destruction in its path. I have read the simple, sad note of my patient, brought to me by his wife after his suicide, *"I can't take this pain any more"*, and we both cried together.

Let's hope the researchers find the magic bullet for a test or a drug for fibromyalgia. Soon, real soon.

David Saul is a GP in Toronto, with a practice limited to FM/CFS.



## **Office Contact Numbers**

The CAPM office is now being managed by Events In Sync, Inc. The staff at Events In Sync is looking forward to working with the members and the CAPM Board of Directors. The office numbers and location are listed below. The Events In Sync offices will be relocating with in the next month to new office space so please make note of the current information and address and then the one that will be in effect from December 1st onward, if not sooner.

#### **Currently:**

Events In Sync, Inc. 701 Rossland Road East, Suite 373 Whitby, ON L1N 9K3 T: 905-668-9545 F: 905-668-3728 Office Manager—Ellen Maracle-Benton—ellen@eventsinsync.com Membership Manager—Georgina Smith—georgina@eventsinsync.com; georgina@gdsmithevents.com Office Coordinator—Laura Williams—laura@eventsinsync.com

#### December 1st

Events In Sync, Inc. 1143 Wentworth Street West, Suite 202 Oshawa, ON L1J 8P7 T: 905-404-9545 F: 905-404-3727 Office Manager—Ellen Maracle-Benton—ellen@eventsinsync.com Membership Manager—Georgina Smith—georgina@eventsinsync.com; georgina@gdsmithevents.com Office Coordinator—Laura Williams—laura@eventsinsync.com

#### Watch your emails for up-to-date information on membership or for changes as they happen.

## Membership Renewals—2009

The 2009 Membership Renewals will be emailed to all current members of the CAPM by December 1st, 2008. Annual dues are due and payable by **DECEMBER 31, 2008** for the 2009 membership year. Membership categories have been redefined. The first category is Regular Member, indicating that a member is in the credentialing stream (either intending this year to apply for CAPM credentialing, or continuing to be credentialed by CAPM). The second category is Corresponding Member, indicating that the member is not credentialed and not intending to apply for credentialing this year. The third category is Trainee/Student Membership for those who have not entered practice because they have not completed training in a health profession. Corporate memberships are also being restructured.

At present, the requirements for CAPM credentialing are that a member is also a member of the AAPM and applies to the AAPM for credentialing. Upon passing the AAPM credentialing eligibility requirements, the member sits a multiple-choice examination. Successful candidates (passing the examination) are credentialed by the AAPM, and on presenting evidence of successful AAPM credentialing, the CAPM member automatically receives the CAPM credentialing certificate, at no extra fee, and is listed on the CAPM website as credentialed by CAPM. It is expected that there may be some changes by 2010 year that would permit a CAPM member to apply for CAPM credentialing without first being an AAPM member, but this has not yet been negotiated.

An innovation that we are considering in the coming year is the development of "Advanced Certificates in Pain Management" for individuals who have successfully completed CAPM-approved courses of hands-on training in "pain management". We will give further details of this as the initiative is developed.

The office will be contacting all members prior to sending out the renewals by email to ensure the correct information is on file. If you have any changes that may be different from what is on file, please contact us so we can update the records—**ellen@eventsinsync.com**.

