

Aim

Many specialists from different countries and a variety of branches of medicine are increasingly involved in Pain Medicine. This is certainly a boost to cultural richness. However, this creates a point of weakness in the lack of uniformity of clinical approaches to the patient and in the different uses of the various available diagnostic tools.

The Montescano School will help pain clinicians to refine their clinical neurological approach and to improve their ability to interpret instrumental and laboratory findings.

For the many who do not work in a multidisciplinary team or who rely on external support, the School will also provide the skills for a better understanding of the various diagnostic tests.

Faculty to be confirmed

Marijana Braš
Roberto Casale
Andrei Danilov
Giuseppe DeBenedittis
Franco Franchignoni
Alessandro Giustini
Magdi Hanna
Per Hansson
Martin Koltzenburg
Marco Lacerenza
Rudolf Likar
Franco Marinangeli
Marco Matucci
Giustino Varrassi
Mauro Zampolini

School Venue

The School will take place at
**Montescano Rehabilitation Centre,
Institute for Research and Care (IRCCS)
"Salvatore Maugeri" Foundation**
Via per Montescano - 27045 Montescano (Italy)

General information

Contacts

School's Director: roberto.casale@fsm.it
School's Secretary: sandro.lamanna@fsm.it

More details at:

www.montescanoschool.eu
www.efic.org

ECM and EAECM credits requested



2010 Montescano School

2nd MONTESCANO SCHOOL FOR:

**NEUROLOGICAL DIAGNOSIS
IN CHRONIC PAIN**

"Clinical and instrumental processes"

11-14 October, 2010



"Salvatore Maugeri" Foundation
Scientific Institute for Research and Care
Montescano (PV) - Italy
Dept. of Clinical Neurophysiology
& Pain Rehabilitation Unit



MONDAY

FROM 8 am TO 1 pm

THE "SCENARIO"

- The societal burden of pain and the importance of a correct cost/benefit diagnostic procedure in pain medicine
- Epidemiology of pain in Europe
- The Neurology of pain

THE OUTPATIENT

In outpatient practice it is important to make a first essential screening (neuropathic, nociceptive, mixed pain). The aim of this section is to give a quick reference flow chart for clinicians mainly working in outpatient clinics.

- The interview
 - Shotgun or Gestalt
 - Minimum instrument set needed and how to use it (hammer, tuning fork, Von Frey hairs, heat and cold, dermatographic pencil)
- The clinical examination of the sensory system
 - Mechanical static, dynamic, deep somatic
 - Mechanical pinprick
 - Thermal (heat & cold)
 - The associated motor impairment

FROM 2 TO 6 pm

Afternoon Practical Training

Participants will carry out exercises applying what they have learned in the morning lessons through workshops composed of small groups, interactive sessions, role playing and multimedia simulations.

TUESDAY

FROM 8 am TO 1 pm

- Questionnaires and diaries
 - How to make easy and fast recordings of the clinical picture (analogic, numerical semantic scales)
 - Complex pain questionnaires and specific, disease-oriented questionnaires
 - Quality of life, ADL (Activity of Day Living)
- ICF Classification
- Diagnostic procedures: what to ask for and how to interpret it
 - Standard and routine neurophysiology
 - Electromiography
 - Electroneurography (Motor and Sensory conduction studies)
 - Standard Evoked Potentials (motor and sensory)
 - Laboratory (blood samples for inflammatory markers, etc.)
 - Quantitative sensory testing (thermal, vibratory)
 - Neurovegetative tests (non-invasive)
 - Sudomotor studies (SSR: Sympathetic Skin Response, QSART: Quantitative sudomotor axon reflex test)
 - Vasomotor studies (photoplethysmography, LASER-Doppler)
 - Skin temperature (thermography)
 - R-R variability (Valsalva manoeuvre, tilt test)

Pain Tournament "Europe Against Pain"

The First Challenge

A tournament will be organized between participants to verify the level of knowledge acquired after this session. The tournament consists of simulated cases within a range of pain topics from those most frequently seen in the outpatient setting. The aim is to make this an educational exercise while introducing the fun of a competition.

FROM 2 TO 6 pm

Afternoon Practical Training

Participants will carry out exercises applying what they have learned in the morning lessons through workshops composed of small groups, interactive sessions, role playing and multimedia simulations.

WEDNESDAY

FROM 8 am TO 1 pm

THE INPATIENT: DIFFICULT DIAGNOSIS AND DIFFICULT PATIENTS

A patient is referred to a pain clinic mainly for further investigations, confirmation of the diagnostic hypothesis or to start a given treatment. Quite often they can be defined as "difficult patients". In this setting the clinical and diagnostic tools should be re-defined.

- The multidisciplinary approach and the critical revision of the highly complex patient's history
- The difficult patient
- The psychological profile and chronic pain
- The neuro-psycho-social model
- The use of drugs: what they can tell us about pain mechanisms
 - Ca/Na/K blockers
 - Non-steroidal anti-inflammatory drugs and COX2-selective inhibitors
 - Inhibitors of the serotonin and noradrenaline reuptake
 - Opiates

FROM 2 TO 6 pm

Afternoon Practical Training

Participants will carry out exercises applying what they have learned in the morning lessons through workshops composed of small groups, interactive sessions, role playing and multimedia simulations.

THURSDAY

FROM 8 am TO 1 pm

- Special neurophysiology testing (clinical indications and limitations)
 - Microneurography
 - Special Evoked potentials (LASER, dermatomeric)
 - Reflex responses (blink, Ralll)
 - Brain mapping
- Poorly invasive diagnostic procedures
 - Peripheral nerve blockade
 - Electrostimulation (SCS: Spinal Cord Stimulation, PNS: Peripheral Nerve Stimulation, etc.)
 - Bier's blockade with different compounds
 - Systemic lidocaine test

Pain Tournament "Europe Against Pain"

The Final Challenge

The "losers" of the First Challenge will have a second chance to tackle more complex and challenging cases of chronic pain. As for the First Challenge, the tournament will consist of simulated cases within a range of highly complex pain topics. The aim is to make this an educational exercise but with the fun of a competition.

FROM 2 TO 4 pm

Afternoon Practical Training

Participants will carry out exercises applying what they have learned in the morning lessons through workshops composed of small groups, interactive sessions, role playing and multimedia simulations.

Learning questionnaires

In this setting, the clinical and diagnostic tools learned during the School will be discussed and compared, with teachers, in relation to real clinical cases.