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In collaborazione con



EuroPain School on

Rehabilitation of pain &
pain-related disability
**Focus on central pain:
CPSP & SCI**

**Piacenza
22-26 September 2024
@ La Bellotta**

Aim of the school

The recognition that acute and chronic pain have two distinct mechanisms and that **chronic pain is a disease in its own right** has been a major insight.

More recently WHO have stated that **chronic pain is a disabling** disease and therefore that **physical and rehabilitation medicine has a pivotal role in the management of the chronic pain patient and related disability**.

In our daily practice we witness cases in which pain is the generator of disability as well as cases where the disability is becoming unbearable because of the presence of chronic pain.

The School will assist clinicians to refine their clinical diagnostic approach to identify various phenotypes of pain -nociceptive, neuropathic, nociplastic-, to improve their ability to interpret clinical, instrumental and laboratory finding and to establish the most appropriate rehabilitation as well as physical and pharmacological treatment to overcome pain and the related disabling condition.

The 2024 edition is focused on central pain. **Chronic Post Stroke Pain (CPSP) and pain in Spinal Cord Injuries (SCI)** are already "per se" a dramatic clinical condition. In clinical practice this situation can be even more disabling as other form of pains i.e nociceptive and nociplastic are overlapping the neuropathic component making a correct diagnosis and rehabilitation approach not so easy to disentangle. A better understanding of the complexity of pain in stroke and spinal cord injured patients has an important role in providing appropriate and adequate rehabilitation management for these patients.

Board of Directors

Nikolaos Barotsis, Roberto Casale, Klemen Grabljevec, Mauro Zampolini

Faculty

Nickolaos Barotsis
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Roland Peyron
Daiana Mihaela Popa
Alberto Rainoldi
Volodymyr Romanenko
Riccardo Torta
Mauro Zampolini

Presentation of the School's programme

*Klemen Grabljevec - ESPRM President
Nicholaos Barotsis - UEMS PRM Board*

*Mauro Zampolini - PRM Section of UEMS
Roberto Casale - School's Director*

MONDAY 23-Sep | Morning Session

08.00-13.00

08.00-09.00 **Physiopathology of pain. Mechanisms of Acute and Chronic Pain; nociceptive, neuropathic and Nociplastic pain | Anthony Dickenson**

This pivotal lecture will cover mechanisms of pain in a translational context to patients. Transduction, Transmission, Perception, Modulation. Pain without nociception and nociception without pain.

09.00-10.30 **The clinical examination of the pain patient | Per Hansson**

This basic tutorial will examine the diagnostic approach to pain in general and in a stroke patient in particular in a rehabilitation context. Nociceptive, Nociplastic, Neuropathic pain all these forms of pain can be concomitant superimposed or mixed in stroke. In practice the interview is pivotal in addressing the clinical examination and to make a first essential working hypothesis and to address further instrumental examinations and a tailored rehabilitation plan.

10.30-11.00 **Coffee Break**

11.00-13.00 **STROKE**

Stroke is the third leading cause of disability and death worldwide with a total of 12.2 million incident cases of stroke and 6.5 million stroke related deaths. The incidence of PSP varies widely from 10% to 70%. The vast difference can be explained by different study designs, cohort samples and follow up period. A better understanding of this type of pain has an important role in providing appropriate and adequate rehabilitation management for these patients.

11.00 **The clinical rehabilitation approach | Xiaolei Hu**

12.00 **The clinical approach to Chronic Post Stroke Pain (CPSP) | Volodymyr Romanenko**

13.00-14.00 **Lunch**

>> Afternoon Session

14.00-18.30

14.00-16.00 **THE LANGUAGE OF PAIN AND SUFFERING**

Questionnaires, diaries and pain mapping in stroke and SCJ patients. Which questionnaires and how to use them to assess pain and disability | **Giorgio Ferriero**

- Pain questionnaires A critical reappraisal of their usefulness and limits in CPSP and SCI with special regards on (MPQ-SF2, DN4, Chronic Pain Grade, etc ;).
- Stroke and SCI specific questionnaires
- Quality of life and other questionnaires on the activity of the day living.

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Scientific Programme

16.00-16.30 Coffee Break

16.30 The language of pain | **Roberto Casale**

Personal experience or universal feeling? Between “Scilla and Cariddi” in collecting the clinical history.

1st Interactive “Eclectic” Session

Theory and practice, an interactive lesson. Are we able to describe sensory experiences in words? | **Enrico Fermi & Roberto Casale**

*“..... but let a sufferer try to describe a pain in his head to a doctor and language at once runs dry.....”
Virginia Woolf “On Being Ill” 1926.*

TUESDAY 24-Sep | Morning Session

08.00-12.30

08.00-12.30 **DIAGNOSTICS**

Objective pain diagnostics in poststroke and SCI patients help or hinder? The anatomical lesion, the motor impairment and pain. Differentials between CPSP, nociplastic and nociceptive post-stroke / SCI pains.

08.00 Chronic Post Stroke Pain (CPSP) and imaging | **Roland Peyron & Luis Garcia-Larrea**

09.30 SCI Neurophysiological Measures | **Roland Peyron & Luis Garcia-Larrea**

10.30-11.00 Coffee Break

11.00 Testing the autonomic nervous system with some easy bed side examination: what they can tell us about pain and rehabilitation in these patients | **Kestutis Petrikonis**

12.30-14.00 Lunch

>> Afternoon Session

14.00-18.30

14.00-16.00 **CLINICAL PHARMACOLOGY**

Pain in stroke patients can be nociceptive, nociplastic as well as neuropathic. Moreover, sometimes these components are overlapping. It is therefore pivotal to have pharmacological basis to treat these three different forms of pain.

14.00 Drugs acting on transduction, transmission and on modulation | **Diego Fornasari**

14.40 Drugs for nociceptive, nociplastic and neuropathic pain | **Riccardo Torta**

15.20 “Hidden pain” acute and chronic back pain in SCI and post stroke pain patients: critical appraisal for current guidelines | **Magdi Hanna**

16.00-16.30 Coffee Break

16.30-18.30 **2nd Interactive Session**

Stroke: The clinical examination in practice | **Per Hansson & Xiaolei Hu**

Under the guidance of an expert clinician the participants will be guided through an outpatient consultation from the interview to the clinical examination of a patients affected by CPSP.

- 08.00-09.00 **Botulin toxin for spasticity & pain in CPSP and SCI | Klemen Grabljevec**
When, how much and where to inject. What we should expect from a botulin toxin treatment for pain and spasticity
- 09.00-10.30 **NEUROMODULATION FOR BOTH SENSORY AND MOTOR SYMPTOMS IN CPSP AND SCI**
Central lesions cause changes in several neural networks affecting both pain and motor control. The modulation of these processes through noninvasive brain stimulation, has been proposed in a rehabilitation context as a viable intervention that could promote post-stroke clinical recovery, functional independence as well as modulate pain.
- Beep brain, cortical stimulation and SCS | Luis Garcia-Larrea**
- rTMS repetitive Trans Cranial Magnetic Stimulation
 - tDCS transcranial Direct Current Stimulation
 - MCS Motor Cortex Stimulation
- 10.30-11.00 **Coffee Break**
- 11.00-12.30 **3rd Interactive Session**
Instrumental appraisal of muscle on the use of Botulin Toxin
The use of sEMG to assess muscle structure | Alberto Rainoldi
- 12.30-14.00 **Lunch**

>> Afternoon Session

14.00-18.30

- 14.00-16.00 **3rd Interactive Session**
Instrumental appraisal of muscle on the use of Botulin Toxin
Ultrasound in Contractures, muscle spasms and spasticity | Nikolaos Barotsis
- 16.00-16.30 **Coffee Break**
- 16.30-17.30 **SPINAL CORD INJURY (SCI)**
Neuropathic pain is present in 40% to 50%, usually develops within the first year, and tends to become chronic. However other form of pain may be present and of relevance in a rehabilitation program. Shoulder, wrists and back pain, muscle weakness, and spasticity are common in the chronic phase. Heterotopic ossification, and pain related to spasms and muscle contractures are other examples of nociceptive pain. Visceral pain is also present. Thus, pain may be therapeutically challenging and has a substantial impact on rehabilitation and on quality of life.
- The clinical rehabilitation approach | Daiana Popa**
Nociceptive and neuropathic (central & peripheral) pain coexistence in the SCI patient | Roberto Casale

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Scientific Programme

17.30-18.30 4th Interactive Session

The clinical examination of the disability and pain related disability in a SCI patient in practice

Per Hansson & Daiana Popa

Under the guidance of expert clinicians, the participants will be guided from the interview and clinical examination of a SCI patient.

THURSDAY 26-Sep | Morning Session

08.00-13.00

08.00 Return to work with pain | **Ziad Hawamdeh**

09.00 Neural Plasticity, Artificial Neural Network and Rehabilitation | **Giorgio Ferriero & Roberto Casale**

10.00-10.30 Coffee Break

10.30 The PRM of the future present: AI in rehabilitation | **Mauro Zampolini**

11.30 -13.00 Reappraisal of difficult topics & Take-home messages

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.

Learning questionnaires

Closing down of the school

General Information

Structure of the School

The School is residential. English is the official language of the School. No translation will be provided.

School venue

The School is located at "La Bellotta" an ancient college renovated in 2005.

Address: Strada Valconasso, 10, 29010 Valconasso - Pontenure (PC)

Accommodation

"La Bellotta" is located few miles from Piacenza city center. Participants will be accommodated in single rooms with private bathroom. Meals will be prepared and served inside the structure. A cafeteria is also present.

Registration

Register online at www.defoe.it by 10th September 2024. The course is open to a maximum of 30 delegates.

Fees

School's fee is 1.250,00 €. It covers all the teaching materials – including pre-school and other recorded materials - and a full board accommodation (see above) for all the length of the school (IN September 22nd - OUT Thursday 26th).

Grants won't cover travel expenses.

To secure your seat, you are required to pay a non-refundable deposit of € 650. The balance, if not covered by a grant, must be paid by 10 September.

CME Information

EACCME® Accreditation of event reference - LEE/2024/01017

The EUROPEAN PAIN SCHOOL ON REHABILITATION OF PAIN AND PAIN RELATED DISABILITY. FOCUS ON CENTRAL PAIN: CPSP & SCI, PIACENZA, Italy 23/09/2024 - 26/09/2024, has been accredited by the European Accreditation Council for Continuing Medical Education (EACCME®) with 28.5 European CME credits (ECMEC®s). Each medical specialist should claim only those hours of credit that he/she actually spent in the educational activity.

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