



South Thames Acute Pain Group

Frimley Park Hospital **NHS**

NHS Foundation Trust

16th South Thames Acute Pain Group Conference

Approved for 7 CPD points

Hosted by Frimley Park Hospital NHS Foundation Trust



At **The Macdonald Frimley Hall Hotel**
Lime Avenue, Camberley, Surrey, GU15 2BG

Thursday November 11th and
Friday November 12th 2010



South Thames Acute Pain Group

The 16th South Thames Acute Pain Conference

Welcome

On behalf of the Pain Service at Frimley Park Hospital NHS Trust and the South Thames Acute Pain Group, we would like to welcome you to the 16th South Thames Acute Pain Conference at the Frimley Hall Hotel.

We have planned a varied and interesting programme, drawing together speakers from different disciplines. We are extremely grateful to all of the speakers, who have willingly agreed to share their knowledge and experience.

The conference would not have been possible without the support and generosity of our sponsors. We would like to thank the sponsors, many of whom have been supporting this conference for many years. Please take time to visit all of the trade stands during the breaks.

This is the second year that we have had an on-line booking system for the conference. This has certainly streamlined the booking process. We would especially like to thank Anne Smith and Abbott who provided the access to the Artagis booking system.

The conference has been awarded 8 CPD points by the Royal College of Anaesthetists. Please ensure that you complete the evaluation form included in your conference pack. Apart from fulfilling the Royal College's requirements, your evaluations will help us to plan future conferences.

The 17th South Thames Acute Pain Conference will be hosted by Brighton and Sussex University Hospitals' Pain Team on 10th November 2011.

We hope that you enjoy the conference and we look forward to meeting you at some point over the next two days.

Mrs Karin Cannons
Lead Nurse Pain Services

Dr Lynn Sperry
Consultant Anaesthetist

The 16th South Thames Acute Pain Conference Programme

Thursday 11th November 2010

08:30 Registration and Coffee

Morning Plenary session 1

Frimley Suite

Chairperson Mrs Karin Cannons

09:20

Welcome

Mrs Karin Cannons and Dr Lynn Sperry

09:30

Managing pain in the pre-hospital immediate care setting

Mr Tony Kemp, Immediate Care Responder, South East Coast Immediate Care Scheme (SIMCAS); Vice Chairman, British Association of Immediate Care (BASICS).

10:00

A 13,000 mile, 30 year Pain Service

Lt Col Dominic Aldington, Consultant in Pain Medicine, Pain Relief Unit, Churchill Hospital, Oxford.

10:30

Questions

10:45 to 11:15

Morning break and trade exhibition

Including Armistice Day silence at 11:00



Morning Plenary session 2

Frimley Suite

Chairperson Dr Nicola Stranix

11:15

Pain in the Brain: developing a biomarker for human pain

Professor Tara Renton, Kings College, London.

11:45

Surgical options for acute back pain

Mr Mark Thomas, Consultant in spinal and orthopaedic surgery, Frimley Park Hospital, Surrey.

12:15

Questions

12:30 to 13:45

Lunch and trade exhibition

13:45 to 14:30 Parallel session 1

Session A **Frimley Suite 3**
Chairperson **Dr Gillian Chumbley**

What are nurses prescribing for pain?
Professor Molly Courtenay & Ms Karen Stenner,
University of Surrey.

Session B **Frimley Suite 1&2**
Chairperson **Dr Colm Lanigan**

Enhanced recovery for colorectal patients
Dr Caroline Jenkins & Ms Inge Bateman,
Worthing and Southlands Hospital.

14:40 to 15:30 Parallel session 2

Session C **Frimley Suite 3**
Chairperson **Dr Nicola Stranix**

Case presentations: the complex patient with acute pain needs. Panel presentation and discussion.

Session D **Frimley Suite 1&2**
Chairperson **Dr Colm Lanigan**

Case presentations: the complex patient with acute pain needs. Panel presentation and discussion.

15:30 to 16:00 Afternoon break and trade exhibition

Afternoon Plenary session **Frimley Suite**

Chairperson **Mrs Karin Cannons**

16:00 **Key note speaker**
Recent advances in neuropharmacology related to acute pain management
Professor Tony Dickenson, University College, London.

17:00 **Close**

17:15 **Annual General Meeting of the South Thames Acute Pain Group** (all welcome to attend)

19:30 **Conference dinner**

Friday 12th November 2010

09:00 **Arrival and Coffee**

Morning Plenary session 1 **Frimley Suite**

Chairperson **Mrs Karin Cannons**

09:35 **Welcome**
Mrs Karin Cannons and Dr Lynn Sperry

09:45 **Travel Bursary presentation: a report from IASP World Congress on Pain**
Ms Nicola Bourne, Senior Pain Clinical Nurse Specialist, Imperial Healthcare Trust.

10:15 **A pain in the wallet- why do patients sue healthcare professionals?**
Dr Chris Godeseth, Medicolegal Advisor, MPS, London.

10:45 **Questions**

11:00 to 11:30 **Morning break and trade exhibition**

Morning Plenary session 2 **Frimley Suite**

Chairperson **Dr Lynn Sperry**

11:30 **Prevalence and risk factors for chronic pain after surgery**
Dr Julie Bruce, Principal Research Fellow, University of Warwick.

12:00 **Managing the child with acute pain within an adult hospital**
Mrs Liz Robinson, Lead Nurse Pain Services, Great Ormond Street Hospital for Children NHS Trust, London.

12:30 **Questions**

12:45 **Closing remarks and result of caption competition**
Dr Colm Lanigan,
Chair of the South Thames Acute Pain Group.

13:00 **Lunch and completion of evaluation forms**

Thank you for attending and we wish you a safe onward journey

Thursday 11th November 2010

09:30 **Managing pain in the pre-hospital immediate care setting**
Mr Tony Kemp, Immediate Care Responder, South East Coast Immediate Care Scheme (SIMCAS); Vice Chairman, British Association of Immediate Care (BASICS).

Biography: Mr Tony Kemp, MA DIMC RCS(Ed) RN MAcadMED

Tony is a voluntary responder with the South East Coast Immediate Care Scheme (based in Tunbridge Wells) and responds to around 150 emergency 999 calls annually, of which 50% are to road collisions. He is the vice-chairman of the British Association for Immediate Care (BASICS) and Assistant Chief Nursing Officer for St John Ambulance nationally. An educationalist, Tony works within simulation and is an examiner for the Faculty of Pre-hospital Care at the Royal College of Surgeons of Edinburgh. He teaches pre-hospital care internationally for BASICS, the Royal College of Surgeons of Edinburgh and Partnerships in Medical education (PRIME). Tony enjoys travelling and reading and particularly enjoys the company of his wife and two adult children.

Abstract:

Emergency care is an essential part of healthcare provision and immediate care responders are faced with traumatised or acutely ill patients who routinely require pain management. Their needs are diverse and may be combined with more complex issues such as entrapment, the need to reduce displaced fractures and haemodynamic challenges etc.

This interactive presentation examines the challenges of managing pain 'at the roadside', and discusses a range of strategies within a series of case presentations.

Notes

Thursday 11th November 2010

10:00 **A 13,000 mile , 30 year Pain Service**
Lt Col Dominic Aldington, Consultant in Pain
Medicine, Pain Relief Unit, Churchill Hospital, Oxford.

Biography: Lt Col Dominic Aldington, FFPMRCA RAMC

Dominic is a Lieutenant Colonel in the Royal Army Medical Corps. He is a consultant anaesthetist who for the last 2 years has worked exclusively in pain management. He spends some of his week in the civilian Pain Relief Unit in Oxford. Otherwise he spends his time seeing military patients in both acute and chronic pain. He has deployed to Kosovo and Iraq a number of times. He is the current Subject Matter Expert in Pain to the Surgeon General of the United Kingdom and a member of the Joint Royal College Ambulance Liaison Committee.

Abstract:

This presentation will describe the current UK Defence Medical Service's approach to pain management. It will look at the difficulties of providing pain management throughout the chain of evacuation. It starts with a description of the levels of care and will describe the current techniques for pre-hospital analgesia including self-administered analgesia at the point of injury and that administered by both medical and non-medical staff prior to arrival in the field hospital. It will go on to describe analgesic techniques employed in the field hospital and how these are maintained during extended periods of repatriation back to the UK. Issues of integration with civilian practice will be considered together at this point. Finally chronic pain management for rehabilitation and continued service will be briefly described.

Notes

Thursday 11th November 2010

11:15 **Pain in the Brain: developing a biomarker for human pain**
Professor Tara Renton, Kings College, London.

Biography: Professor Tara Renton, BDS MDSc PhD FDS RCS FRACDS (OMS) ILTM

Tara Renton (Specialist in Oral Surgery) is a dentist with a particular interest in trigeminal nerve injuries and pain. After completing her Oral and Maxillofacial surgical training in Melbourne Tara undertook a PhD in trigeminal nerve injury at KCL 1999-2003. She was later appointed Senior Lecturer at QMUL and then was awarded her chair in 2006 at Kings College London. Over the past 3 years Tara leads the teaching of 180 dental students for each year 3, 4 and 5. She has established an academic training programme which now has 8 Oral Surgery SpRs of which 3 are undertaking PhDs and 2 are post docs. In collaboration with IoP KCL and Imperial College, Tara and collaborators have established a leading international programme of trigeminal pain research.

Tara is the National advisor for Oral Surgery, a council member for BAOS and an elected member of the RCS England Dental Faculty Committee.

Abstract:

Howard M, Krause K, Khawaja N, Massat, N, Huggins, J , Vennart W, Williams S, and Renton T.

Some 30 to 80% of patients experience poorly controlled acute post surgical pain. Because **Pain** is self-reported by patients, it is influenced by expectation, emotion, psychological trait, environment and disease state, as well as responding to the presence of genuine analgesia. Whilst cross-over studies have reduced the size of pain studies for some disease areas, there is still a profound need to be able to reduce variability further. This would enable patients' pain experience to be dissected without the need for complicated patient-reported outcomes, which currently require large patient numbers.

Third molar surgery remains the gold standard for acute post surgical pain analgesic trials and provides a flexible clean model for assessment of the efficacy of novel analgesics. Up to now, pain neuroimaging studies have largely relied on experimental pain stimuli to examine evoked pain, sometimes in patients, but more often in healthy volunteers. The work described in this report is the first direct demonstration that background pain- which is the main component subjectively collected from patients during traditional clinical trials- can be quantified by an objective and quantifiable measure using a new approach to neuroimaging, and as such has the potential to be a ground-breaking step in transforming the discovery and development of novel analgesics.

Notes

Thursday 11th November 2010

11:45

Surgical options for acute back pain

Mr Mark Thomas, Consultant in Spinal and Orthopaedic Surgery, Frimley Park Hospital, Surrey.

Biography: Mr Mark Thomas, FRCS Orth

Mark Thomas was born in London and grew up in Hampshire. He graduated from Charing Cross and Westminster Medical School, London in 1991. He trained in orthopaedic surgery via the North West Thames rotation and undertook a fellowship in spinal surgery and trauma in Toronto, Canada. He was appointed as a consultant at Frimley Park Hospital in 2002. His specialist interest is spinal surgery.

Abstract:

My talk will cover my approach to assessing a patient with acute and acute on chronic low back pain, investigation and possible types of treatment available. It will therefore touch on trauma, tumour and degenerative causes of pain and their treatments.

Notes

Thursday 11th November 2010

13:45

What are nurses prescribing for pain?

Professor Molly Courtenay & Ms Karen Stenner,
University of Surrey.

Biography:

Professor Molly Courtenay

Molly is a qualified nurse with a background in Intensive Care. Molly's main research interests are in the area of non medical prescribing. Molly currently works with several national groups and organisations on issues surrounding prescribing and medicines management. She undertook a secondment with the Royal College of Nursing between 2003-2008, where she worked as the Joint Prescribing and Medicines Management Adviser. Molly has published widely in peer reviewed journals, and is the author/editor of a number of books in the field of prescribing and medicines management.

Ms Karen Stenner

Karen is a research fellow at the University of Surrey. Karen has a degree in Psychology and has undertaken numerous health service research projects. Her current interest is in non-medical prescribing and she has worked with Molly Courtenay for the past 6 years. Two of these projects have focused on nurse prescribing for patients in pain.

Abstract:

More than 19,000 nurses have qualified as independent and supplementary nurse prescribers in the UK. Up to 50% of these nurses prescribe medicines for the management of pain. This talk presents findings from a questionnaire survey conducted in 2009. The aim of the survey was to describe the experience, role and prescribing practice of nurses in UK hospital pain services who prescribe for inpatient pain. Contact was made with 193 NHS acute trusts across the UK, 164 relevant nurse prescribers were identified and 161 were sent an online questionnaire. The response rate was 85% (n=137). Findings confirm that this group of nurse prescribers were highly qualified and experienced pain specialists. Their remit indicates a movement towards more integrated pain services, with 35% working across acute and chronic pain services and 90% treating more than one pain type (acute, chronic, and/or cancer pain). The majority (90%) were currently prescribing for pain management with an average of 20 items prescribed per week. A range of medications were prescribed including; opioids, compound medications, NSAIDs and medications for the management of side effects. The pain nurse role contained a strong educational component and contributed to informing organisational policy on pain management. Prescribing was said to improve nurses' ability to promote evidence-based practice but benefits were limited by legislation on prescribing controlled drugs. Findings demonstrate that nurses are increasingly adopting prescribing as part of their advanced pain nurse role.

Notes

Thursday 11th November 2010

13:45 Enhanced recovery for colorectal patients
Dr Caroline Jenkins & Ms Inge Bateman,
Worthing and Southlands Hospital.

Biography: Dr Caroline Jenkins

Caroline has been lead clinician for acute pain at Worthing Hospital since 1999, her other interests include anaesthesia for colorectal surgery and for obstetrics. She played a key part in setting up the Enhanced Recovery Pathway for colorectal surgery at Worthing, including 'passing the message onto others', most recently in Oporto, Portugal. She hosted the STAPG conference in 2002 and is Treasurer to the group.

Biography: Ms Inge Bateman

Inge has worked in different countries mainly in the speciality of anaesthesia and acute pain since 1991. For the last 8 years, she has been a clinical nurse specialist in acute pain management at Worthing and Southlands Hospitals (now Western Sussex Hospitals NHS Trust, WSHT). The Acute Pain Service and Jayne Munday (now the Enhanced Recovery Nurse at WSHT) were instrumental in setting up a very successful programme. They were regional finalists in the Health and Social Care Award 2010 (Acute Care Category). Inge has been a member of STAPG committee since 2002 and deals with the website.

Abstract:

In this session we will outline the principles of enhanced recovery, in particular for colorectal surgery. Our focus will be on analgesia, principally the techniques we employ in our Hospital but we will also outline techniques used in other enhanced recovery programmes.

Notes

Thursday 11th November 2010

14:40 Case presentations: the complex patient with acute pain needs. Panel presentation and discussion.

Panel C chaired by Dr Colm Lanigan:

**Dr Lynn Sperry
Ms Sarah Couling
Mrs Tamzin Bunton**

Panel D chaired by Dr Nicola Stranix:

**Dr Gillian Chumbley
Mrs Karin Cannons
Mr Martin Kühn**

The patient scenarios used in these sessions will be the same in each room. Themes explored will include:

- The patient with pre-existing chronic pain
- The opioid dependent patient
- The patient with large analgesic requirements

The focus of discussion will be centred on the practical management of complex inpatients with pain. It is hoped that attendees will participate fully in the discussion, and share their expertise.

Your delegate bag will contain a list describing the session to which you have been allocated.

Notes

Thursday 11th November 2010

16:00

Key note speaker

Recent advances in neuropharmacology related to acute pain management

Professor Tony Dickenson, University College, London.

Biography: Anthony Dickenson, BSc, PhD, FmedSci

Prof Dickenson is Professor of Neuropharmacology in the Department of Pharmacology at University College, London, United Kingdom. He gained his PhD at the National Institute for Medical Research, London, has held posts in Paris, California and Sweden, and was appointed to the Department of Pharmacology at University College in 1983. His research interests are pharmacology of the brain, including the mechanisms of pain and how pain can be controlled in both normal and pathophysiological conditions, and how to translate basic science to the patient.

Prof. Dickenson was a member of the Council of the International Association for the Study of Pain for 6 years and was an associate editor for the journal *Pain*. He has authored more than 250 refereed publications due to his outstanding and motivated research team and has made many media appearances. He is a founding and continuing member of the Wellcome Trust funded London Pain Consortium. Prof. Dickenson has given plenary lectures at the World Congress on Pain, the American Pain Society, the European Pain Congress, the Canadian Pain Society, the Belgium Pain Society, ASEAPs, the Scandinavian Pain Society, the British Pain Society (of which he is an Honorary Member), the Thailand Pain Society, the Irish Pain Society, the Singapore Pain Society, the Australian Pain Society, the New Zealand Pain Society and many other international and national meetings. He has also spoken at the Royal Institution, to GPs and schools on pain.

Abstract:

The mechanisms of pain and analgesia exhibit plasticity in different pain states in that the signalling mechanisms change following physiopathological events. Multiple mechanisms occur at peripheral, spinal and supraspinal sites and generate the abnormal pain states experienced by patients.

Tissue damage leads to ongoing chemical activation of pain sensors whereas nerve trauma induces alterations in the function and levels of ion channels in peripheral nerve fibres and this altered sodium channel function can produce abnormal impulse propagation towards the spinal cord. Familial pain disorders point to the importance of changes in sodium, TRP and other channels. Next, impulses arrive in the central terminals of afferent fibres where altered calcium channel function is precipitated by the peripheral damage, leading to more transmitter release, favouring central spinal hypersensitivity. NMDA receptor activation in persistent pain states, in concert with other systems, generates wind-up and long term potentiation, plausible mechanisms for enhanced and prolonged pain states. Memory

related genes are also activated. In patients, the intensity of post-traumatic surgical pain is a predictor of chronicity and these spinal changes are likely to be intimately linked to the prolongation of the pain state.

Centres of the brain important in emotional and aversive responses to pain now join in. These centres in the brain will be activated not only by pain but also by “top-down” processes such as fear, anxiety and other life-events. These pathways, many of which are monoamine, can then descend to facilitate spinal mechanisms of pain showing the key interplay between sensory and psychological events in pain processing. Novel therapies acting on these systems are emerging. Recent work has revealed a hitherto spinal cord –brain –spinal cord loop that involves centres of the brain important in emotional and aversive responses to pain.

Understanding mechanisms for pain enhancement should help to explain altered pain states in patients but also could lead to better treatments.

A.H. Dickenson, Dept. Pharmacology, University College London, WC1E 6BT UK

Notes

Friday 12th November 2010

09:45 **Travel Bursary presentation: Challenges in Acute Pain a report from the 13th IASP World Congress on Pain**
Ms Nicola Bourne, Senior Pain Clinical Nurse Specialist,
Imperial Healthcare Trust.

Biography: Ms Nicola Bourne, MSc, RGN

Nicola completed her nurse training at the John Radcliffe Hospital in Oxford. She gained experience in critical care at Chelsea & Westminster Hospital and in research at Kings College Hospital. She has been working in the pain service for 7 years. She is an active member of the London RCN and Pain Network Group. Her special interests include managing acute pain in opioid dependant patients. Nicola completed her MSc in pain management at Leicester University in 2008. She presented the results of her dissertation work entitled: 'An audit to evaluate the effectiveness of an opioid dosing algorithm on post operative pain scores' at last year's South Thames Acute Pain Group (STAPG) conference, and won the STAPG prize.

Abstract:

In September I was fortunate enough to be awarded a travel bursary from the STAPG committee to attend the International Association for the Study of Pain (IASP) 13th World Congress on Pain in Montreal. The main attraction for me was the satellite meeting of the acute pain special interest group which was entitled 'Challenges in Acute Pain.' This day was organised by Professor Stephan Schug, Consultant in Pain Medicine, Royal Perth Hospital, Western Australia.

My lecture will concentrate on the information I gained during the satellite meeting. In particular, the management of pain in the opioid tolerant patient within the acute surgical setting.

Notes

Friday 12th November 2010

10:15

A pain in the wallet- why do patients sue healthcare professionals?

Dr Chris Godeseth, Medicolegal Advisor, Medical Protection Society, London.

Biography: Dr Christopher Godeseth BMedSci(Hons) BM BS MRCS(Ed)

Chris graduated from the University of Nottingham before pursuing surgical training in Colchester and the East Midlands. During his time as a junior doctor, Chris became involved in representing and supporting fellow trainees, latterly acting as chair for the Trent regional junior doctors' committee. Chris left clinical practice in 2008, joining MPS as a medicolegal adviser. Here, he advises and represents doctors with a range of medicolegal and ethical issues, including GMC referrals, complaints and compensation claims. Chris is currently completing a graduate diploma in law at BPP college of professional studies.

Abstract:

Why do patients sue? This question might appear straightforward, with the assumption that adverse outcomes will be 'punished' with litigation. This talk will explore other factors that might influence patients' decisions to litigate, and aims to outline practical steps to reduce your risk.

Notes

Friday 12th November 2010

11:30 **Prevalence and risk factors for chronic pain after surgery**
Dr Julie Bruce, Principal Research Fellow,
University of Warwick.

Biography: Dr Julie Bruce PhD

Julie has a background in health sciences/ epidemiology and is currently involved with surgical cohort studies and systematic reviews. Her main research interests are adverse surgical events, particularly chronic post-surgical pain and surgical site infection. Other projects include Cochrane systematic reviews (e.g. reflux disease, orthopaedic injury, wound healing) and studies exploring surgical volume and patient-reported outcomes. Julie held an MRC Fellowship to investigate the measurement and monitoring of surgical outcomes (2005-2007).

Abstract:

Chronic pain persisting beyond expected healing time is an adverse consequence of surgery. Epidemiological studies report chronic post-surgical pain (CPSP) prevalence of up to 30% up to one year after surgery. To date, studies examining risk factors for CPSP have mostly investigated clinical and demographic factors (e.g. surgical approach, age, acute postoperative pain) with more recent focus on the role of psychological distress. This session will present an overview of the recent CPSP literature and highlight the practical challenges of capturing the transition from acute to chronic pain after surgery. Data from completed studies (hernia, cardiac and breast surgery) and preliminary findings from ongoing Aberdeen prospective studies investigating predictors of CPSP after breast cancer and hernia study will be presented. Larger datasets are required to understand the transitional pathway and a funded initiative for international collaboration will be described.

Notes

Friday 12th November 2010

12:00 **Managing the child with acute pain within an adult hospital**
Mrs Liz Robinson, Lead Nurse Pain Services,
Great Ormond Street Hospital for Children NHS Trust,
London.

Biography: Mrs Liz Robinson, MSc, BSc(hons), RGN, RSCN

Liz has been the lead clinical nurse specialist with the Pain Control Service at Great Ormond Street Hospital for Children for twelve years and is an honorary research fellow at the Institute of Child Health, London. Her main research interests are in children's pain assessment and the management of procedural pain. Her MSc dissertation compared morphine and Entonox for the management of chest drain removal pain in children, which was published and presented at the ISPP in Vancouver in 2006. She co-ordinated the Children's Pain Assessment Project, which was funded by the Foundation of Nursing Studies and involved the development of a website to disseminate information: <http://www.ich.ucl.ac.uk/cpap/> Liz has been a core member of the RCN Pain in Children Special Interest Group and involved in workshops to develop pain management guidelines with the International Society for Pediatric Oncology (SIOP) and the development of nursing competencies for pain management with the Pain Society. Her first book was published last year (Twycross et al 2009) and she was involved with the development of the RCN pain assessment guidelines (2009), which are currently being developed into a web-based resource.

Abstract:

This presentation will provide an overview of the assessment and management of pain in children and highlight some of the challenges involved, as well as relevant research and guidelines. The first part of the discussion will outline some of the challenges involved and highlight some of the tools that are available to assess children's pain and recommendations for practice. An overview of both the drug and non-drug management of children's pain will be provided. Special groups, including neonates and children with cognitive impairment will be discussed and while the main focus will be on acute pain, chronic pain in children will also be discussed.

Notes

The South Thames Acute Pain Group Committee

Each year the committee works hard to organise the conference. All the committee members will be wearing blue printed badges, so please do ask them if you need any assistance during the conference.

Mrs Inge Bateman

Inge has been a Clinical Nurse Specialist in Acute Pain Management at Worthing and Southlands Hospital NHS Trust (now Western Sussex Hospitals NHS Trust) for the last 8 years and joined the committee in 2003. She is involved in developing the website and would appreciate any feedback or ideas on improving the site: www.stapg.org.uk.

Dr Diana Bellis (Co-opted)

A neuroanaesthetist, Diana's other interests are in acute pain and obstetric anaesthesia and analgesia. She and Wendy Caddy set up the acute pain service at the Princess Royal Hospital, Haywards Heath, and are co-organising the 2011 STAPG conference.

Mrs Tamzin Bunton (Secretary)

Tamzin has been a Nurse Specialist in acute and chronic pain management at University Hospital Lewisham for over 10 years. She is also the STAPG secretary.

Mrs Karin Cannons (Co-opted)

Co-opted because she is organising this year's STAPG conference, Karin is the Pain Nurse Specialist and Lead Nurse for Pain Services at Frimley Park Hospital NHS Foundation Trust. She is a nurse prescriber and completed her MSc in Advanced Nursing Practice in 2005. Currently Karin has a clinical caseload that encompasses inpatients with pain from acute to chronic and outpatients with chronic pain. She has a keen interest in neuromodulation.

Dr Wendy Caddy (Co-opted)

Co-opted because she is organising the STAPG conference 2011, Wendy is the Senior Clinical Nurse Specialist in acute pain at Brighton & Sussex Universities NHS Trust. She is a nurse independent prescriber and completed an MSc in Pain Management in 2005.

Dr Gillian Chumbley

Gill is the Nurse Consultant for the pain service at Imperial College Healthcare NHS Trust. She has been working for the Trust for almost 8 years. Previously she worked in the pain services at King's College Hospital and St George's Hospital. She completed her PhD at St George's Hospital Medical School. Gill organised the STAPG Conference for 2009 and aged 20 years in the process!

Dr Caroline Jenkins (Treasurer)

Caroline has been a Consultant Anaesthetist at Worthing Hospital since 1999. Her interests include acute pain and obstetric anaesthesia. She joined the STAPG committee when she organised the conference in 2002 and is treasurer of the group.

Mr Martin Kühn

After working in ITU for several years Martin was involved in setting up the Acute Pain Service at Medway Maritime Hospital in 2001, taking on the role as Acute Pain Nurse Specialist. Subsequently he completed his MSc in Pain Management at Leicester University and the non-medical prescribing course at the Medway School of Pharmacy. He became a co-opted member of STAPG when asked to organise the conference in 2008.

Dr Colm Lanigan (Chairperson)

Colm is Consultant Anaesthetist and lead clinician for acute pain at University Hospital Lewisham and set up their acute pain service in 1996. He has a particular interest in pre-emptive analgesia and fast-tracking patients for colorectal surgery. He also has interests in audit and teaching. He is currently chair of the STAPG.

Dr Lynn Sperry (Co-opted)

Lynn is Consultant Anaesthetist at Frimley Park Hospital. She has an interest in acute pain, particularly links between acute and chronic pain and is an active member of Frimley's acute pain team. Lynn is also interested in audit, having been audit lead for the last 7 years. She is organising this year's STAPG conference.

Dr Nicola Stranix (Co-opted)

Nicky is a Consultant Anaesthetist at Imperial College Healthcare NHS Trust based at Charing Cross Hospital, having been a trainee in places as different as Harare and Hampshire. She joined what was an Acute Pain Team with one nurse and now works as part of a Pain Management Service with nine specialist nurses! She enjoys the challenges involved in managing the complex pain problems often encountered in our hospital, but often wishes for a magic wand. She organised the STAPG Conference for 2009.

The South Thames Acute Pain Group Conference - Sponsors

The organisers of the 16th South Thames Acute Pain Committee would like to thank the following 11 companies and their representatives for their generous sponsorship of this year's conference.

Abbott	Ms Irene Fitt Mr Dane Robson
BOC Healthcare	Ms Louise Lucking Mr Gary Kreeger Mr Paul Shorter
Bristol-Myers Squibb	Ms Louise Butcher
CareFusion	Ms Helen Stephens Mrs Joanna Crossley
Cephalon	Mr Kirk Chester Mr Stuart Beamish Mr Peter Goodwin
CP Cases	Mr Scott McGovern Mr Rod Martin Mr Chris Gers
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Fresenius Kabi	Ms Caroline Bennett Ms Nadine Bourgeon-Higgins
Grünenthal	Mr Saeed Imam Mrs Geeta Kareer Mr Francis Bannon
CME McKinley	Mr Chris Donnelly Mr Malcolm White
Napp	Ms Loulitte Osborne Ms Rani Jaura

Save the date!

The 17th South Thames Acute Pain Conference

10th November 2011

Next year's conference will be hosted by the pain team at Brighton and Sussex University Hospitals.

Keynote speaker: Professor Richard Langford
Professor of Anaesthesia and Pain Medicine,
Barts and The London NHS Trust.



The conference will be held at the Arora Hotel , Crawley, West Sussex:
www.gatwick.arorahotels.com

Contact: wendy.caddye@bsuh.nhs.uk