



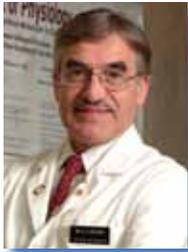
# North American Neuromodulation Society

## NEWSLETTER

### President's Message

#### A Time for Action

Robert Foreman, PhD



**N**ANS and the field of neuromodulation continue to thrive in a world of staggering challenges by maintaining a vision for a bright future. However, the ability to thrive and to make this future an obtainable reality requires spirited action from the NANS Board of Directors and each of you as members of our society. Past President Jaimie Henderson, MD, made the following remarks in his fall 2008 president's message: "Change is happening fast in the field of neuromodulation...Although I am prone to alarmist sentiment, it appears that neuromodulation is under assault, and we must fight vigorously to help our patients maintain access to the therapies they need." He also wrote, "In perhaps an ironic balance to the uncertain present of our specialty, the future outlook has never been brighter." The landscape of neuromodulation has indeed become more challenging, however the future outlook continues to look bright for the specialty as we stand on the threshold of 2011. Therefore, action is needed now from each member of NANS to maintain our ability to thrive. Two quotes help me drive these points home. John F. Kennedy stated, "There are risks and costs to a program of action. But they are far less than the long-range risks and costs of comfortable inaction." Oliver Wendell Holmes said, "Greatness is not in where we stand, but in what direction we are moving. We must sail sometimes with the wind and sometimes against it—but sail we must and not drift, nor lie at anchor." Thus, we must take action on every front to address these challenges. The following will provide an overview of how NANS has taken action throughout the year to persevere against the winds and develop a tactful program of action. In spite of the strong headwinds, I am truly excited about the future of neuromodulation and its ability to thrive.

The midyear Board of Directors meeting on July 9, coupled with the Strategic Planning Committee meeting in October 2009, are examples of how we recognized it was time for us, as a society, to take action on key items and challenges affecting our specialty. The midyear meeting built on the steps taken in October 2009 and also provided our committees an opportunity to report on their activities, review and discuss society business, and take action on several specific items. We would like to share with our members the items the board feels that we, as a society, need to act on.

It is time to forge partnerships that will strengthen our influence on legislatures and national organizations and decrease duplication of programs. To that end, NANS is working diligently to share common interests with sister societies. Two recent activities demonstrate this collaboration. NANS partnered with the American Society of Interventional Pain Physicians (ASIPP)—both financially and personally—to support efforts this past June that allowed members of both societies to meet with key members of Congress. From an attendee perspective, this was an awesome experience. The ASIPP staff conducted a session that prepared us to talk and interact with members of Congress and provided us with a detailed itinerary so participants could meet with senators and representatives from their home states. The purpose was to discuss important issues affecting the field of neuromodulation. A critical outcome of this process that directly affected NANS was the request to allocate funds for the National Pain Care Policy Act. The goal of this act is to support the implementation of the Institute of Medicine (IOM) committee and a training grant program promoting a better understanding of pain and treatment modalities to improve patient outcomes (read more about the Act on p. 3). In fact, an IOM committee is being formed now, and the board has nominated several people for consideration to serve on the committee. The second

collaborative effort (also with ASIPP) was hosting a joint spinal cord stimulation (SCS) cadaver course, which took place September 17-19. Both NANS and ASIPP board members participated as faculty for the course. NANS staff members were also available on site to help coordinate the meeting and related events.

It is time to engage in the arena of advocacy and regulations. The board wrote a resolution calling for a uniform industry policy that restricts the sale of neurostimulator contacts, under the current reimbursement system, to no more than 16 in an office site of service. This resolution was written because, unlike other sites of service, office-based stimulator lead reimbursement is calculated on a per-contact basis. NANS will continue to evaluate strategies to resolve inconsistencies in the current site of service dependent on reimbursement methodology. NANS also joined efforts with the Neuromodulation Therapy Access Coalition (NTAC) to counter the Washington State Health Technology Assessment (HTA) program's draft evidence report on SCS. The extensive report contained significant errors that skewed the evidence on SCS and could lead to an inaccurate assessment of SCS and its clinical role in treating patients with certain chronic pain conditions. NTAC,

*continued on page 2*

### In This Issue

President's Message.....	1
Feature	
The National Pain Care Policy Act ...	3
Letter From the INS President .....	3
NTAC Update .....	4
Meeting Invitation.....	5
Members in the News	
Peter Konrad, MD PhD .....	6
Meetings of Interest.....	7



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## President's Message *continued from page 1*

along with NANS, submitted a response to address errors in the report. The Health Technology Clinical Committee held a meeting August 20 and decided against coverage for SCS by state-funded programs. Robert Levy, MD PhD, made an outstanding presentation at the meeting, but this did not change the minds of the committee. On behalf of our society, I want to express our sincere thanks and deep appreciation to Dr. Levy for making his presentation in a very adversarial environment. This experience has strongly encouraged NANS and NTAC to develop strategies to deal with the Washington HTA program and programs that may be related to it in different states.

It is time to improve our website. The website committee has initiated a process to revitalize the site, including providing improved content for members and the public. Included in the redesign is an enhanced members-only module that will provide members with more useful tools and access to their membership accounts. We hope to launch the new site just prior to our annual meeting in December 2010.

It is time to establish an effective public relations program. A major effort of the public relations campaign is to collect as many quality patient stories from NANS members as possible, including eye-catching stories focusing on pain, chronic regional pain syndrome, back pain, and movement disorders. Stories of patients who have been successfully treated with different neuromodulation procedures would be an added bonus. The ultimate goal is to incorporate these stories into the redesigned website for patient and practitioner education and information. If you or any colleagues you know have an interesting success story that you would be willing to share, please contact Chris Welber at [cwelber@connect2amc.com](mailto:cwelber@connect2amc.com).

It is time to develop neuromodulation leadership. NANS is working with NTAC to identify, attract, and train new leaders in this exciting and expanding field of neuromodulation. To develop these new leaders, NTAC will hold a

weekend program the first week in November to provide intensive political advocacy and public relation training. Approximately 25 applicants will be selected to participate in the training. The NANS Board of Directors has submitted approximately 20 applicants from different states to be considered for acceptance into this program. We trust this action will broaden the base of leaders who will become powerful advocates for neuromodulation.

It is time to advance our vision through our annual meeting. As I write, NANS is finalizing preparations for the 14th Annual Meeting, *Neuromodulation: Vision 2010*, December 2-5, 2010, in Las Vegas, NV. The Planning Committee has developed an excellent program and has added several new topics to the agenda. This year's meeting is shaping up to be one of our most successful yet, and we are confident that the meeting will provide a vision for future action that will not only help our society but also our specialty. Further information, including a draft agenda and a link to the online registration and abstract submission sites can be found on the NANS website. We are looking forward to seeing many of you in Las Vegas.

I strongly encourage every member of NANS to take action and make a difference wherever you are placed as we advance the field of neuromodulation and confront the headwinds of adversity. We must, as Winston Churchill said, "Never give in—never, never, never, never, in nothing great or small, large or petty, never give in except to convictions of honour and good sense." Thank you so much for your membership and your commitment to excellence as we prepare to enter 2011 renewed with conviction and courage. **N**

Robert Foreman, PhD  
NANS President

# The National Pain Care Policy Act

Steven Falowski, MD

The National Center for Health Statistics estimates that 76.2 million Americans have suffered from pain that lasts longer than 24 hours while millions more suffer from acute pain. The National Pain Care Policy Act of 2009 addresses this issue and effectively places it front and center before physicians, patients, and Congress. The goal of the act is to help chronic pain patients receive better diagnoses, care, and access to the many therapies that exist for them.

The National Pain Care Policy Act includes the following:

- Convene an Institute of Medicine Conference on pain care, with a report summarizing findings and recommendations.
- Expand, through the Pain Consortium at the National Institutes of Health, an aggressive program for basic and clinical research on causes and potential treatments of pain.
- Create an education and training grant program to improve health professionals' understanding and ability to assess and appropriately treat pain.

- Develop and implement a national pain management public outreach and awareness campaign.

Pain is a leading cause of disability and decreased quality of life. In spite of its broad base, there are many barriers that prevent patients from receiving adequate pain control. These obstacles often stem from the patients, who may fear scrutiny complaining of pain, as well as from physicians, who can be unwilling to prescribe pain medication because they fear addiction and abuse. There is an overall lack of understanding on the part of patients, physicians, and society as a whole.

Most painful conditions can be relieved with proper treatment. Patients suffering from chronic pain such as back and neck pain, headache disorders, cancer-related pain, diabetic neuropathy, and fibromyalgia could be adequately treated if access to proper therapy is possible. Therapies range from proper medication and dosing to surgical therapies. This requires an understanding and knowledge of what is available by both

the physician and patient. The National Pain Care Policy Act helps address barriers to treatment by improving coordination of pain research, healthcare practitioner education and training, and public awareness.

The bill passed through the House of Representatives and was referred to the Senate. From there it has since been referred to the Committee on Health, Education, Labor, and Pensions.

There has been support for the bill from numerous pain societies across the United States, including the Lance Armstrong Foundation and American Chronic Pain Association. The American Society of Interventional Pain Physicians and NANS are urging our leaders to support and endorse the allocations authorized in the legislation. Health care is on the minds of not only Congress but Americans across the country. We need to take the responsibility upon ourselves to raise awareness and support for this long-standing issue. **N**

## Letter From the INS President

Dear NANS member,

I enjoyed the 2009 NANS meeting in Las Vegas last winter and have already booked my flights to Las Vegas for the NANS 14th Annual Meeting in December. Your board has been working hard to organize themselves to be effective at leading and meeting the demands and aspirations of its members.

Similar efforts are in place in all 15 International Neuromodulation Society (INS) chapters. Including NANS, INS chapters have a total membership of more than 1,200 people.

Every 2 years the INS holds a World Congress Meeting. Last year this event was held in Seoul, South Korea. The INS board chose Seoul because they felt holding this prestigious meeting in Asia would help support INS goals to showcase our field to a non-Western audience. This decision was made, however, before the credit crunch and before new rules of medical society and industry partnership existed. Although attendance was below previous numbers for an INS World Congress meeting, it was better than expected considering the world economic tremors and the sabre rattling in North Korea during the months leading up to the event.

The INS 10th World Congress Meeting will be held in London, England, May 21-26, 2011. The meeting title, "Neuromodulation: Technology That Improves Patient Care," reflects that neuromodulation is the standard of care for many chronic conditions. Neuromodulation, with its focus on improving patients' quality of life, is truly a fascinating and evolving technology.

The Neuromodulation Society of the United Kingdom and Ireland will be hosting practical training workshops in London, Oxford, and York during the week preceding the meeting. At the conference hotel there will be 1 day for leading basic science and engineering training and 1 day of new technologies training for start-up and potential investor companies. These workshops will be held May 21-22, preceding the official start of the meeting.

The 4-day INS World Congress will offer morning plenary speakers with three concurrent breakout sessions in the afternoon. Each day will include sessions for pain specialists and neurosurgeons. The INS Scientific Advisory Board has already recruited a spectacular group of world leaders in the field. The third session will include special interest materials and content for those medical and surgical

*continued on page 7*



### SCS Denied in Washington State

**O**n August 20 the Washington State Health Technology Authority's (HTA) Health Technology Clinical Committee (HTCC) reviewed, debated, and voted on three options for spinal cord stimulation (SCS): (a) no coverage, (b) coverage with conditions, and (c) unconditional coverage. The final vote was eight in favor of "no coverage," and one in favor of "coverage with conditions."

This means that Washington State will not reimburse SCS for patients who are covered by state-funded health insurance, which includes Labor & Industries (workers' compensation), Department of Social and Health Services (Medicaid), and Public Employees Benefits Board (state employees' health insurance). This coverage determination is scheduled to take place after the next meeting of the HTA on October 22.

This result occurred despite world-class testimony from Robert Levy, MD PhD, and local neuromodulation physicians, substantial peer-reviewed literature in support of SCS, a positive Medicare National Coverage Decision, comprehensive evidence-based treatment guidelines in support of SCS, and years of demonstrated success in alleviating chronic pain.

Perhaps most troubling, one of the medical directors, representing the Agency Medical Directors Group (AMDG), launched a specious attack on SCS by comparing SCS mortality to combat fatalities by American troops serving in Afghanistan.

The Neuromodulation Therapy Access Coalition (NTAC) and its coalition partners witnessed in this process what can only be described as a subversion of evidence-based medicine, in which high-level randomized controlled trials (RCTs) were dismissed in favor of a lower-level cohort study limited to a small number of workers' compensation claimants in Washington State.

This result fits into a larger narrative in Washington State to minimize access to a range of therapies used to treat chronic pain—from intrathecal drug delivery system to SCS to injection therapies.

The process in Washington State illustrates the importance of our collective work in advocating for appropriate access to neuromodulation therapies and shows just how high the stakes have become. That said, all of NTAC's coalition members are dedicated to fighting this outcome and working to ensure that the rights of chronic pain patients are not denied.

#### NTAC to Launch Neuromodulation Leadership Forum

NTAC is pleased to report the planned launch of the inaugural Neuromodulation Leadership Forum—an in-depth skill-building program designed to develop the next generation of advocates, organizational leaders, and spokespeople in the field of neuromodulation.

Each of NTAC's member societies—the American Academy of Pain Medicine, the American Society of Interventional Pain Physicians, the International Spine Society, and NANS—have nominated physicians to participate in the program, which will take place November 5-7 in Dallas, TX.

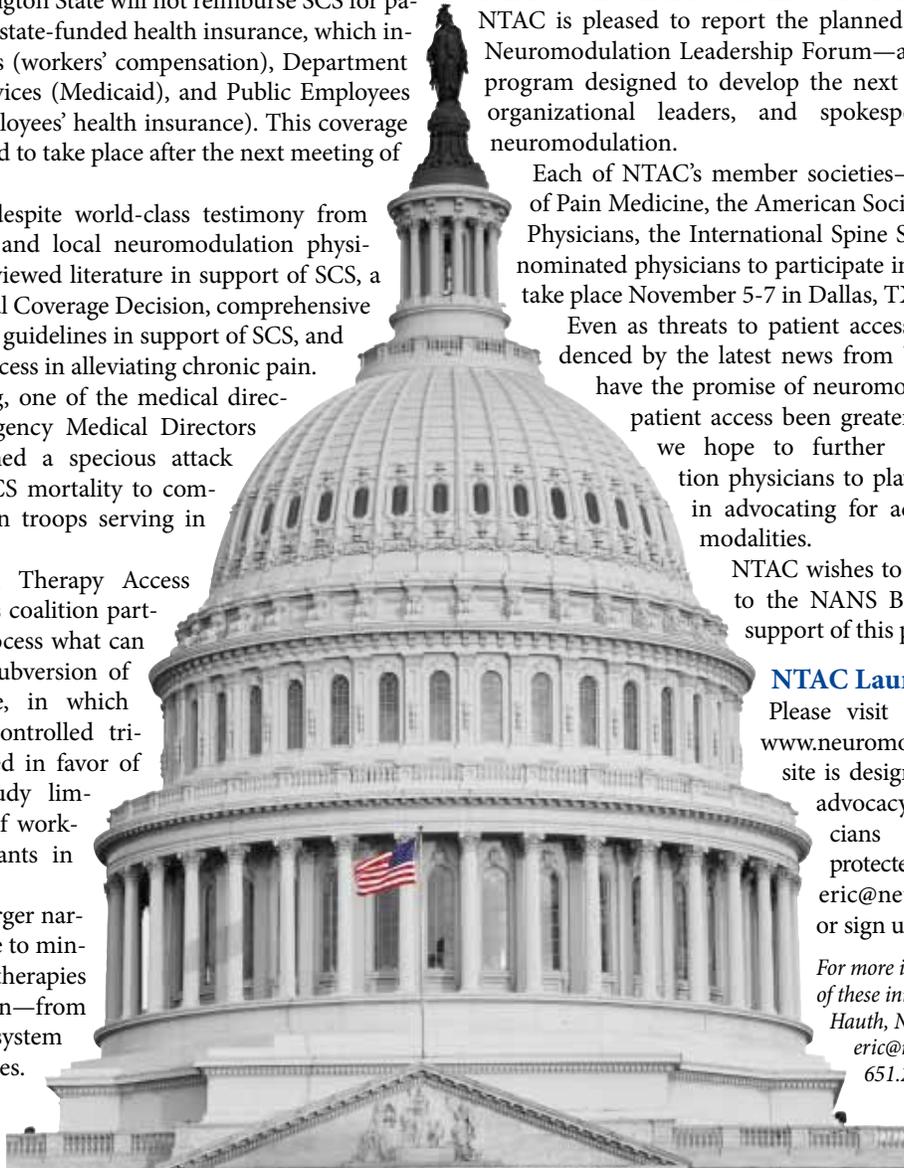
Even as threats to patient access continue to grow—evidenced by the latest news from Washington State—never have the promise of neuromodulation and the risks to patient access been greater. Through this program, we hope to further empower neuromodulation physicians to play greater leadership roles in advocating for access to these important modalities.

NTAC wishes to extend its sincere thanks to the NANS Board of Directors for its support of this program.

#### NTAC Launches New Website

Please visit NTAC's new website at [www.neuromodulationaccess.org](http://www.neuromodulationaccess.org). The site is designed to provide important advocacy information to physicians through its password-protected Advocacy Center. E-mail [eric@neuromodulationaccess.org](mailto:eric@neuromodulationaccess.org) or sign up for access online. **N**

*For more information on NTAC or any of these initiatives, please contact Eric Hauth, NTAC executive director, at [eric@neuromodulationaccess.org](mailto:eric@neuromodulationaccess.org) or 651.278.4238.*



## Call for Member News

Have you or a colleague recently been honored with an award or other recognition in the field of neuromodulation? Do you have practice tips that may help other NANS members improve their own clinical practice? The *NANS Newsletter* would be happy to feature these discoveries and accomplishments. To submit a

member profile, please send a description of approximately 500 words detailing the recognition received and biographical information on the recipient, including professional and educational background, to Editor in Chief Ashwini Sharan at [ashwini.sharan@jefferson.edu](mailto:ashwini.sharan@jefferson.edu). **N**

# NANS 14th Annual Meeting Neuromodulation: Vision 2010

December 2–5, 2010  
Encore at Wynn • Las Vegas, NV

### Learn the Latest Research

Join more than 800 of your colleagues at the NANS 14th Annual Meeting, a unique scientific meeting that focuses on the state-of-the-art practice and emerging applications of neuromodulation. This year's meeting will feature lectures given by renowned specialists that encompass the science of pain, spinal cord stimulation, new frontiers, brain stimulation, intrathecal therapies, and more. After participating in the preconference satellite workshops, new topics, speakers, and special sessions, join colleagues in enjoying the premier restaurants, shows, and attractions Las Vegas offers its visitors.

**Register Now**

Registration is now open at [www.neuromodulation.org](http://www.neuromodulation.org).  
**Register by November 2** and save \$100!



## Bird's Eye View of the Meeting

Dear Colleagues,

It is my pleasure again to invite you to *Neuromodulation: Vision 2010*. This will be the 14th year of our national meeting—enthusiasm for the field of neuromodulation continues to grow strong. Once again our venue for the meeting is Las Vegas. We feel that the city is a very accessible destination, with great hotels, plenty of shows, incredible dining, and many other excursions, all of which provide an excellent balance of work and play. You may wonder why Las Vegas was chosen again. We polled the membership regarding other popular locations such as New York, Miami, Chicago, and Los Angeles, and the overwhelming majority chose Las Vegas. With that in mind, I would like to give you a bird's eye view of the NANS 14th Annual Meeting.

The meeting starts off with two preconference courses. First, at the MERIN lab in Henderson, NV, we have assembled a well-experienced faculty for "A Hands-On Cadaver Workshop" for fellows. In this course, fellows will train on techniques and principals of spinal cord stimulation. In addition, this workshop will feature unprecedented exposure to all three US Food and Drug Administration (FDA)-approved devices currently available for spinal cord stimulation therapy. Simultaneously, we are hosting "A Review of Neuromodulation," a workshop for nurses, physician assistants, and allied healthcare professionals, at the Encore Hotel. Last year, the enthusiasm for this course was amazing (standing room only), so please sign up for the workshops as soon as possible.

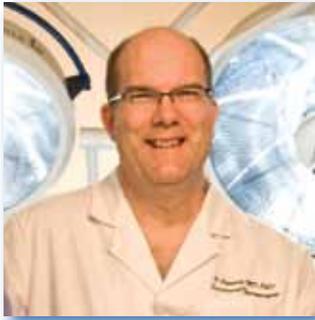
The main meeting begins on Friday, December 3. Joshua P. Prager, MD, and David Caraway, MD, are the annual meeting cochairs, and Ali R. Rezai, MD, and Ashwini D. Sharan, MD, are the scientific meeting cochairs. The meeting will span 3 days of general scientific sessions, which generally run from 8 am to noon. On Friday, the meeting will begin with presentations on our society's core interest—spinal cord stimulation. There will be an intense session on the science behind spinal cord stimulation. Joshua Prager will be the moderator, and this year's lineup includes Tony Yaksh, PhD; Robert Foreman, PhD; John Doyle, MD; Allen Basbau, PhD FRS; Frank Shellock, PhD; Karen Davis, MD; Drik De Ridder, MD PhD; and Sean Mackey, MD PhD. To further spark your interests, the meeting will host six speakers who

are discovering new frontiers in neuromodulation from the brain machine interface to gene therapy and more. Our esteemed speakers in the second general scientific session will include Michael Kaplitt, PhD MD; Dominique Durand, PhD; John Donoghue, PhD; and Russ Lonser, MD. Following this, the NANS business meeting will follow the scientific content. Robert Foreman, PhD, will deliver his President's Address, ceremonies will be held to honor our partners and friends, and the lifetime achievement award will be presented by Michael Stanton Hicks, MD. David Kloth, MD, will then deliver a talk on Health Care 2010 and Simon Thomson, MBBS FRCA FIPP, will orate as the President of the International Neuromodulation Society. Finally, on Sunday we will present the science of our society and the top 10 papers in spinal cord stimulation and finalize the meeting with talks on spinal cord stimulation.

We also are continuing the format for concurrent afternoon sessions. Focused sessions are scheduled for both Friday and Saturday on areas that are always of interest to our members. These will include sessions on brain stimulation and intrathecal therapies. However, this year we are testing the waters with two new sessions: peripheral nerve stimulation on Friday and the interface of neuromodulation, rehabilitation, and biomedical engineering on Saturday. With such interesting topics, we are very interested to see how many will attend each session. Please visit [www.neuromodulation.org](http://www.neuromodulation.org) or check your mail for the full schedule in the program brochure.

We think this year will again reflect the growing interest in the field of neuromodulation. Both the cutting-edge research in neuromodulation and the scientific merit of the research contribute to making our annual meeting a must-attend event for those involved in this rapidly expanding field. The NANS Board of Directors wishes to thank all our sponsors for sharing in our mission, and we invite all current and future NANS members to join us at the Encore at Wynn in Las Vegas for the 14th Annual Meeting, December 2-5, 2010.

Ashwini Sharan, MD  
Editor in Chief  
Scientific Meeting Cochair



### Peter Erich Konrad, MD PhD

*Yinn Cher Ooi, BS*

**B**rain-computer interface (BCI) is at the frontier of functional neurosurgery. Peter Erich Konrad, MD PhD, a prominent neurosurgeon involved in spearheading this futuristic technology, believes that BCI represents an amazing window of opportunity

for neurosurgeons. "It's amazing what opportunities are being thrown at us in the realms of BCI. The monkey [referring to experiments performed at the University of Pittsburgh and Carnegie Mellon University] was merely a teaser of what is about to explode in the future."

Having recognized the limitations of present day neural implants as open-loop devices with no feedback control, Dr. Konrad urges neurosurgeons to step up and play a leading role in the development of novel, improved devices. "Functional neurosurgeons of the future should not limit themselves to the anatomy of the brain. In a highly technology-oriented discipline, we need to familiarize ourselves with the technical aspects of the devices we are contemplating for our patients if we are to ever dream of successfully integrating the full potential and function of such devices into a human's brain."

With a double degree in medicine and biomedical engineering, Dr. Konrad seeks to combine his expertise in clinical medicine with translational research. He had an early passion for implantable electronic devices. Prior to medical college, he earned master's and doctorate degrees in neurophysiology and biomedical engineering at Purdue University, working with implantable arterial pulse sensors under the guidance of Dr. Willis Tacker and the late Dr. Leslie Geddes, who was

presented with the Presidential Medal of Technology in 2006. It was his work and experience with these two leading minds of the time that inspired him to further explore the realms and possibilities of biomedical engineering. He later earned his medical degree from Indiana University School of Medicine and completed his neurosurgery residency training at Vanderbilt University. He is presently the director of Functional Neurosurgery at the Vanderbilt University Medical Center and an associate professor of neurosurgery and biomedical engineering at Vanderbilt University School of Medicine.

Dr. Konrad seeks to be an expert in any and all neural implants. His current research focuses on the development of optical nerve stimulation, a neurophysiological atlas, and implantable neuroprosthetic devices. In 2009, in recognition of Dr. Konrad's excellence and innovation in his field, he was awarded a \$573,356 National Institutes of Health grant to support his research in establishing a universal brain atlas for implanting and managing deep brain stimulators. In addition, he is developing a novel approach to neural stimulation utilizing pulsed infrared lasers to create a contact-free, damage-free, artifact-free spatially specific modality that may potentially alter the course of neuromodulation, in particular, microstimulation of neural networks necessary for future success of neuroprosthetics such as the BCI.

In 2009 Dr. Konrad was appointed a director-at-large of the NANS Board of Directors. Through his leadership role in NANS, he hopes to be an advocate for the future of neural implants and to promote the technical aspect of understanding these cutting-edge devices.

Dr. Konrad's passion and commitment toward the development of neural implants is truly inspirational for all who are involved in functional neurosurgery. "We are in the business of creating engineering solutions to physiological problems." **N**

## Call for Article Submissions

NANS is seeking submissions for upcoming issues. Suggested article topics include

- local and regional challenges
- new technology
- treatments, surgery, and therapy options for various disorders
- clinical trials
- ethical dilemmas and controversies in the field
- members in the news
- tips and strategies
- case studies
- informed consent
- determining risks and benefits
- conflicts of interest
- best practices in neuromodulation
- respecting the rights of patients and families.

Contributions should be 500–1,500 words in length. To submit an article or to suggest topics for upcoming issues, please contact Editor in Chief Ashwini Sharan at [ashwini.sharan@jefferson.edu](mailto:ashwini.sharan@jefferson.edu).



# Meetings of Interest

NANS members are encouraged to attend these meetings of interest presented by other pain, spine, and neurology associations. Please see the following contacts for more information.

## October

### ASA Annual Meeting

American Society of Anesthesiologists  
October 16-20  
San Diego, CA  
[www.anesthesiology2010.org](http://www.anesthesiology2010.org)

### 14th World Pain Clinic Congress & 1st Asian Congress on Pain

World Society of Pain Clinicians  
October 28-31  
Beijing, China  
[www.ccwspc.org/en](http://www.ccwspc.org/en)

### 2010 CNS Annual Meeting

Chinese Neuromodulation Society  
October 30-31  
Beijing, China  
[www.neuromodulation.com/page/china](http://www.neuromodulation.com/page/china)

## November

### DGNM Annual Congress

German Neuromodulation Society  
November 26-27  
Luxembourg  
[www.dgnm-online.de/news/jahrestagung.php](http://www.dgnm-online.de/news/jahrestagung.php)

## December

### NANS 14th Annual Meeting

North American Neuromodulation Society  
December 2-5  
Las Vegas, NV  
[www.neuromodulation.org](http://www.neuromodulation.org)

## March

### CSS 11th Annual Scientific Congress

Canadian Spine Society  
March 9-12, 2011  
Quebec City, QC, Canada  
[www.spinecanada.ca/agm/index.php](http://www.spinecanada.ca/agm/index.php)

## April

### WIP 6th World Congress

World Institute of Pain  
April 29-May 1, 2011  
Seoul, South Korea  
[www2.kenes.com/wip/Pages/Home.aspx](http://www2.kenes.com/wip/Pages/Home.aspx)

## May

### INS 10th World Congress

International Neuromodulation Society  
May 21-26, 2011  
London, England  
[www.neuromodulation.com](http://www.neuromodulation.com)

## Letter from the INS President *continued from page 3*

specialties that may be less aware of the role neuromodulation can play in their everyday clinical practice. The planning committee has strived to dedicate at least 1 day of the meeting to cardiology, neurology, urology, colorectal, and rehabilitation specialists. The meeting will include panel discussions, and a major worldwide speaker from each specialty will be invited to be involved on that day. By providing targeted content to each specialty, the INS board hopes to draw an audience with a diverse array of professional backgrounds to the meeting to learn more about neuromodulation.

Please register early and submit your abstracts for oral or poster presentations. More details will be available soon on our website at [www.neuromodulation.org/page/inscongress](http://www.neuromodulation.org/page/inscongress).

If you decide to travel to London in spring 2011 for the meeting, I encourage you to recommend the meeting to a colleague as well. Take

advantage of the long Memorial Day weekend following the meeting, and plan to stay a couple extra days to explore the many cultural and historical sites in London. The conference facility is excellent, with two floors set aside for the conference. The conference hotel, the Hilton Metropole, is located near Oxford Street, Madame Tussaud's, and Hyde Park and is only 15 minutes by train from Terminal 5 at London Heathrow International Airport.

I believe this will be a true "coming of age" for the INS and hope that you will attend the meeting to experience one of the premier events in the field of neuromodulation. I look forward to welcoming you!

Dr. Simon Thomson  
President of International Neuromodulation Society



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**REGISTER NOW!**



# **2010 NANS Annual Meeting**

North American Neuromodulation Society  
14th Annual Meeting

**December 2–5, 2010**

Encore at Wynn, Las Vegas