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### **News from the American Pain Society's 28<sup>th</sup> Annual Scientific Conference**

**For immediate release**

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### **Military Pain Centers Honored by American Pain Society**

SAN DIEGO, May 7, 2009 – Pain management methods used by US Army doctors on battlefields in Iraq and Afghanistan have helped wounded soldiers cope with injuries among the most painful known to medicine. Today, the American Pain Society honored the acute and chronic pain management teams at Walter Reed National Military Medical Center and the National Naval Medical Center with a special commendation for excellence in pain management for their superior achievements in pain interventions for wounded soldiers.

“Better body armor and improved aeromedical evacuation have enabled American troops in Iraq and Afghanistan to survive blasts that would have proved fatal in Vietnam or even the first Gulf War,” said APS President Charles E. Inturrisi, PhD, Professor of Pharmacology, Weill Cornell Medical College, New York. “However, this poses a challenge to military medicine – how to deal with the excruciating pain of injuries to the head, arms and legs that body armor can’t protect. The American Pain Society, therefore, recognizes that the pain teams at Walter Reed and National Naval Medical Center have answered the challenge by pioneering and advancing techniques such as peripheral nerve blocks, epidural infusions and patient-controlled analgesia to provide effective pain relief on the battlefield, on evacuation aircraft, and in inpatient and outpatient settings,” Inturrisi added.

Military pain specialists provide care from the battlefield through recovery, rehabilitation and reintegration. In 2003, an Army anesthesiologist replaced the traditional general anesthesia on the battlefield, which suppresses the entire nervous system and leaves patients completely sedated, with a technique called “regional anesthesia.”

In previous wars, pain from severe wounds would likely have been numbed by morphine, an addictive narcotic. Instead, an electric probe was used to pinpoint the exact nerve that transmits pain from the wound and inject that nerve with a constant flow of non-addictive medicine from a

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microprocessor-controlled pump. The first 24-36 hours away from the battlefield, regional anesthesia makes the aeromedical evacuation of troops a lot less traumatic.

The joint WRAMC/NNMC Pain Service provides care to more than 11,000 patients every year. Their Wounded Warrior Primary Care Clinics provide care to outpatient troops who have been injured.

“The Army/Navy pain team is setting precedent for the value of early and aggressive treatment of acute pain, maintaining pain control throughout evacuation, and comprehensive, multidisciplinary pain management for returning soldiers in the hospital and as outpatients,” said Inturrisi. “This coordinated approach optimizes the recovery of injured troops.”

### **About the American Pain Society**

Based in Glenview, Ill., the American Pain Society (APS) is a multidisciplinary community that brings together a diverse group of scientists, clinicians and other professionals to increase the knowledge of pain and transform public policy and clinical practice to reduce pain-related suffering. APS was founded in 1978 with 510 charter members. From the outset, the group was conceived as a multidisciplinary organization. APS has enjoyed solid growth since its early days and today has approximately 3,200 members. The Board of Directors includes physicians, nurses, psychologists, basic scientists, pharmacists, policy analysts and others.

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