INTERMEDIATE TRAINING IN PAIN MEDICINE

You are about to start your Intermediate Pain Medicine module. This leaflet gives you some information on all the opportunities that this training module will provide and contains a number of hyperlinks to online resources. Ask your Local Pain Medicine Educational Supervisor for more information.

What is Intermediate Pain Medicine training?

This is aimed at improving your whole approach to the management of pain. There is a lot more to managing pain than knowing how to write up painkillers or set up a PCA.

Your IPM module will improve your understanding of:

- the assessment of patients with chronic, acute on chronic, and cancer pain
- the biopsychosocial model of pain
- understanding of neuropathic pain and sensitisation
- the use of interventions such as epidural steroids, autonomic and neurolytic blocks
- multi-professional and multi-disciplinary team working
- how pain services are commissioned and provided.

I want to be an anaesthetist so how will Intermediate Pain Training help me?

Understanding and knowing how to deal with some of the complex pain issues of hospital inpatients is a key anaesthesia skill and will make you a more rounded anaesthetist and one who is more responsive to patients in pain.

If I enjoy my Intermediate Pain Training, what comes next?

There is a <u>comprehensive training pathway</u> for Pain Medicine. Higher Pain Medicine Training is available as an optional module from ST5 and comprises at least 20 more sessions. Whilst not a mandatory part of the curriculum, this would be a good choice for a trainee wanting to develop a specialist interest in adult or paediatric inpatient pain medicine, building on the experience gained at Basic and Intermediate levels.

Trainees at Higher level are often largely supernumerary to service demands and (within the constraints of the curriculum and the hospital) training can be tailored to your needs and other interests. You might even find that it inspires you to undertake a year of Advanced Pain Training (APT), and consider a career with an interest in Pain Medicine. APT grants you eligibility to take the FFPMRCA Examination leading to Fellowship of the Faculty. Whilst not an essential requirement for a career in Pain Medicine, the post-nominals attained are widely respected as the mark of a true specialist. Feedback from trainees is very positive, with the exam viewed as a fair test of the knowledge required to practice pain medicine.



Does specialising in Pain Medicine mean moving away from Anaesthesia?

Although it is certainly a different area, with its own qualities, challenges and interests, the majority of Pain Medicine Specialists also work as anaesthetists and find the two areas of practice not only complimentary but enhancing.

The modern approach to managing chronic pain is multi-disciplinary and multi-professional; within that model there is still a strong requirement for the diagnostic, therapeutic and procedural skills possessed by doctors who have undergone anaesthesia training. Commissioners and service providers recognise this and value of the breadth of medical and surgical knowledge and leadership skills of anaesthetists trained to consultant level; posts are generally aimed at applicants with an anaesthesia background including advanced level pain training.

What are the benefits of working as a Pain Medicine specialist?

- Your own practice: The opportunity to develop their own practice, seeing patients through from referral to assessment. This will include diagnostics and working longer term with patients by building a therapeutic relationship and following up outcomes.
- Multi-professional colleagues: You get to work in multi-professional teams with specialist pain nurses, psychologists, physiotherapists and occupational therapists.
- Multi-disciplinary working: Pain teams are most commonly multi-disciplinary teams involving decision-making with radiologists, surgeons from varied specialties, palliative medicine physicians and much more.
- **Beyond secondary care:** Specialists often work closely with colleagues in primary and community care and have strong educational and service development roles.
- **Varied and interesting:** Specialist can be part of an inpatient pain team in addition to outpatient work.
- Interventions: Interventional practice is often an important part of the pain doctor's contribution to the team and can be very rewarding when significant improvements in pain levels are achieved.
- Specialised skills: Some pain doctors are involved in specialised services such as inpatient pain management programmes, neuromodulation and implanted drug delivery, cancer pain interventions and paediatric pain management.
- A changing landscape: Research into pain mechanisms and management is a rapidly advancing area and offers many opportunities for pain physicians.



