

Spring 2007

Editor: Edward Wright, DDS, MS

Letter from the President

Dear AAOP Member,

The American Academy of Orofacial Pain began more than 30 years ago. Although it has evolved, it has been able to maintain its original "Mission" and "Aims and Purpose." The unswerving dedication of the academy to these goals is a credit to the insight of our AAOP founders, who penned and established them.

If you have not done so, I recommend you read our academy's history, found in the membership roster and of course on our website under "Archives." It illustrates the value our founders created by their dedication to their members. This is a member-driven organization; without the involvement of so many of us in the daily running of our academy, it would have failed ages ago. This is not one of those glitzy organizations that promises its members wealth and a full waiting room. Instead of showing you ways to make lots of money, we help you understand the scientific evidence so you can more effectively treat your patients and reduce their pain.

Pretty lofty stuff. I am very proud of that and my association with this academy. The work of dedicated volunteers like you and me benefits academy members as well as their patients. So before I go any further, if any member, new or old, wants to help guide our academy in its quest of improving patient care, LET SOMEONE KNOW! You can contact me (e-mail: pbarag0517@aol.com), telephone the central office (856-423-3629), or tell someone who can get you involved. But please, let someone know you want to help; nothing gets done without member involvement. It begins with committee work. Joining a committee is not a big commitment, but it allows you to be involved and see the internal operations of our academy. It allows you to write your part of AAOP history. Telephone or e-mail me!

Next I want to discuss our annual meeting. By the time you read this, AAOP's 31st Annual Scientific Session will have come and gone. Many of you may not realize the complexity of planning such an event. The planning and execution of our annual meetings are so difficult that our 2008 meeting plans are nearly completed. In fact, we are already forming plans for our 2010 meeting. We organize these meetings so we can get together and share our knowledge of temporomandibular disorders (TMD) and orofacial pain (OFP) rather than reading and writing about them in journals.

Some members may not realize another important function of these meetings. Without them, our academy could not financially exist. The annual AAOP meeting is an important portion of the life blood for our academy. A successful meeting is one that brings us together to

share, one that helps us learn more, and one that makes money to support the endeavors of our academy (ie, those lofty goals, including more effective care for our patients). Our academy also needs to grow so we become a force that can insist on patient access to care. If you did not come to Philly and are feeling regret as you read this, make plans to come to our 32nd annual meeting in Los Angeles.

While I am on the subject of scientific meetings, let me just say one thing...

ICOT BRAZIL 2009.

In just 2 short years the Fifth International Congress on the Treatment of Orofacial Pain and TMD will be presented in Brazil. Anyone who does not set aside the time to experience the wonderful science, the camaraderie, and of course the wonderful country of BRAZIL is losing out. Life is so short for all of us—ICOT in Brazil will make you feel alive! I'll be there... will you? Details will be coming soon.

Let's spend a moment discussing AAOP's membership. There are many parts to AAOP's commitment to membership. Two bear mention in this letter. The first is that we need to continue to grow as an organization so that we have a strong political voice. Gaining patient access to care for OFP is a political battle. Legislators listen to numbers; the more of us there are, the more patients (voters) we represent. If you know of anyone interested in learning more about TMD or OFP, please invite them to join our academy. In my opinion, no other organization better represents the needs of these patients and the doctors who care for them. The second commitment is that we must maintain our membership. Leaders of our academy, the Membership Committee, and the council are most concerned that we maintain both the longstanding and new members. We want to respond to the members' desires, so when you receive a questionnaire from AAOP, please fill it out and return it. Always feel free to telephone or e-mail me; I have said this in each of my presidential letters. I want to hear from you and want to know what we can do to make your AAOP membership more valuable to you.

I want to highlight 2 articles in this newsletter. The first is about our newly revamped website. I am very proud of our website's improved appearance and, more importantly, function. Bruce Brown, a member since 1999, did the leg work to accomplish this, and I appreciate all that he did and will continue to do for our academy. I encourage you to browse our website, www.aaop.org. It really has become a very member-

friendly site. Remember, you need to know your membership number and password for access to the members-only section. If you do not remember them, call the central office (+856 423 3629).

The second article I would like to call your attention to is about membership benefits. This article by Don Primack, chair of the Membership Committee, explains why the material benefits of an AAOP membership can't express the real value of being a member. There is a certain pride that comes with being a member of the premier TMD/OFP organization. If you disagree with Don, please let me hear your reasoning.

I am happy to tell you that by the time this newsletter goes to print, the AAOP Insurance Code Book will be published. It will be placed in the members-only section of our website. The insurance subcommittee of the Access to Care Committee, under the direction of Jeff Crandall, thanks Barry Rozenberg, for the hard work he put into completing this yeoman's task. Those who assisted Barry with edits and suggestions include Jeff Crandall, Reny de Leeuw, Gary Heir, Jeff Mannheimer, and Matt Lark. This is a members-only benefit. Please understand that these codes are the latest, but in the

insurance industry the latest expires fast. That's why we are going to keep the codes online. As changes occur, we will update the code book to reflect the latest. Using these codes does not mean that your patients will be reimbursed or that you will be paid by insurers. Our Access to Care Committee continues to work on that issue through legislative initiatives and by other means.

In closing I want to thank all of the committee members, committee chairs, council members, and fellow officers for their valuable commitment to our academy. You are the people who make this organization so GREAT.

Sincerely,

Pete Baragona
AAOP, President

PS Ed Wright, editor of this newsletter, deserves special thanks. He has set the bar for the quality of this important membership communication. Drop him a line and tell him what a good job he is doing.

Physical Therapy Certification: A Nascent Specialty Area

by Jeffrey S. Mannheimer, PT, PhD

The profession of physical therapy has matured into specialized fields of practice in a manner similar to that of medicine and dentistry. However, unlike medicine (neurology) and dentistry (orofacial pain and temporomandibular disorders) there is currently a void relative to the area of craniofacial and cervical pain/dysfunction syndromes. The American Physical Therapy Association (APTA) has previously established and recognized specialty areas of practice and developed associated certification criteria and examinations; however, none of the existing areas encompasses the field of TMD. The number of physical therapists that have obtained specialized training and advanced education in this area represents a very small fraction of the APTA (again paralleling the dental profession). These circumstances have necessitated the creation of our own organization in a manner similar to that of the American Board of Orofacial Pain.

The Physical Therapy Board of Craniofacial and Cervical Therapeutics (PTBCCT) was therefore founded in 2002 by an international group of physical therapists. Many of these physical therapists are members of AAOP. To fill this void, PTBCCT provides an ongoing educational venue within the academy to assist the profession in the disbursement of evidenced-based practice and research. The ultimate goal is to improve the delivery of patient care in this specialty area. The PTBCCT will function as an independent registered nonprofit

organization, offering annual certification examinations to physical therapists that meet specific eligibility requirements within our specialized field of practice.

One of our primary goals is to participate in the yearly scientific AAOP meetings to provide an ongoing forum for physical therapists to obtain the education needed to develop competency in this specialized field and to expose physical therapists to the cutting edge of scientific and clinical advances. Furthermore we hope to present the evaluative and therapeutic areas in which an experienced physical therapist can enhance the dental management of the patients we treat.

In order to define the responsibilities, tasks, and types of knowledge necessary for a physical therapist to practice in TMD and OFP, an international practice analysis was initiated by the PTBCCT in 2002 and finalized in 2007. A pool of test items was collected from a cross section of international physical therapists, dentists, and oral surgeons who are experts in the specialty area of cervical and craniofacial therapeutics and practice in clinical, research, and academic environments. This information was used to determine the parameters of the examination, including knowledge areas to be assessed and the percentage of questions allocated to each. With a gracious and much-appreciated loan from both AAOP and ABOP along with the professional direction of Measurement Research Associates, an independent psychometric testing service for the medical and dental profession, our first certification examination was offered at this year's scientific meeting in Philadelphia on Wednesday, April 25.

International News

Asian Academy of Craniomandibular Disorders

by Youn Joong Kim, DDS, PhD

Since the Asian Academy of Craniomandibular Disorders (AACMD) was founded in 1988, the 4 sister academies of Japan, Korea, Taiwan, and Singapore have taken turns holding biennial meetings.

President Dr Myung-Yun Ko and his organizing committee are planning the 12th biennial meeting at the Convention & Exhibition Center (COEX) in Seoul, Korea for October 6–7, 2007. This meeting is located in the center of Seoul's famous business district. The COEX, where the Asia Europe Summit Meetings (ASEM) have been held, has 8 floors, 4 above-ground and 4 below-ground, and is capable of hosting any convention and exhibition using the most advanced communication systems.

The theme of the next meeting will be "Sleep and Orofacial Pain." Members from each sister academy will provide presentations on this theme. Dr Ronald Attanasio from the University of Nebraska will be invited as our keynote speaker. He will provide a presentation on bruxism and related disorders and introduce the curriculum for teaching TMD and orofacial pain. The scientific program also includes small sessions on specific topics (eg, trigeminal neuralgia).

The Japanese Academy of Orofacial Pain

The Japanese Academy of Orofacial Pain (JAOP) held their 10th Annual Scientific Meeting January 13 and 14, 2007, in Tokyo. Their 11th Annual Scientific Meeting is scheduled to be held in conjunction with the 8th Annual Scientific Meeting of Japanese Society of Orofacial Pain on September 15 and 16, 2007, in Nagano, Japan.

Korean Academy of Orofacial Pain and Temporomandibular Disorders

Dr Sung-Chang Chung, a former president of the AACMD, has retired after serving more than 30 years as a faculty member in the Oral Medicine and Orofacial Pain Clinic at the Seoul National University. He worked for the International Committee for many years, and in 2000 he hosted the 3rd International Congress of Orofacial Pain and Temporomandibular Disorders in Seoul, Korea. He may become the second honorary member of AACMD with the approval of Council at next year's meeting. One of his last projects as a faculty member was a book with Dr James Friction titled *The Past, Present, and Future of Temporomandibular Disorders and Orofacial Pain* (Shinhung International). Many world-famous scholars from each continent (eg, William Solberg, Gunnar Carlsson) served as contributors.

AAOP Insurance Code Guide

We now have a marvelous guide to insurance codes for temporomandibular disorders and orofacial pain in the members-only section of our website. It was put together by the insurance subcommittee of the Access to Care Committee.

We thank Barry Rozenberg, Jeff Crandall, Gary Heir, Reny de Leeuw, Matt Lark, and Jeff Mannheimer for their diligent work. This guide was first produced in 1983; of course, many changes have occurred since then. The Access to Care Committee requests that recommendations for changes be e-mailed to Jeff Crandall (jacrndl@aol.com).

Your AAOP Website

by Bruce Brown and Ken Cleveland

Have you visited www.aaop.org lately? The AAOP website is an important membership benefit and information source. We recommend that you add it to your favorites. We have made extensive changes to both its look and its content. It is more user friendly, with well-labeled tabs on the left side of the screen and important events and announcements on the right.

The tabs on the left were designed to guide members quickly and easily to various features of interest. The "Archives" link now includes not only the history of the organization but also access to photos from the past 3 annual meetings.

The members-only section of the website is password-protected. It provides a means for you to renew your dues online, instantly update your member contact information (public directories are updated monthly), access annual membership meeting minutes, view educational presentations and case studies (in development), download a PDF version of the entire membership directory, access the Membership Bulletin Board, and obtain the AAOP Insurance Code Guide.

To sign onto the members-only section you need your user ID (first letter of first name, last name, and membership number, ie, JDoe123) and password (**aaoplive**). In order to update your contact information or pay dues, you need to re-enter this user ID and password on the secure web page, as you will be directly accessing the AAOP database. Simply click on the word **login** in the upper right-hand corner of this secure page. Any changes will be instantly recorded exactly as you enter them. You may also register online for the 2007 Annual Meeting via this secure web page or browse the database for the contact information of other members.

The bulletin board is available to members only and can be accessed via the home page or the members-only section of the website. You will need to create/enter a user name and password. We recommend that you use the same user name and password as has been established for you. This feature enables members to communicate with each other in online discussions of AAOP issues, personal announcements, and/or case discussions. Other sections of the web site include

- The “Education” link, which provides information about current programs available in orofacial pain as well as research grant opportunities.
- The “Meetings” link, which lists various scientific/educational meetings, both domestic and international, by month. The listing of a meeting does NOT imply endorsement of the meeting or its content by AAOP. Links and e-mail addresses are listed when they are provided to AAOP. If you wish to submit a meeting notice to this calendar, e-mail your notice to aaopco@talley.com. The notice must be submitted no less than 2 months prior to the meeting date. The calendar is updated once a month.
- The “Patient Information” link, which directs patients to our TMD, Neuropathic Orofacial Pain, Headaches, and Toothaches of Non-dental Origin brochures. Patients can also identify an AAOP member by selecting the desired state or country.
- The “Publications” link, which leads the user to links to prior AAOP e-newsletters and information about our journal and guidelines book (including purchasing information).

Additionally our brochures can be browsed at this link, and an order form for purchasing these brochures is displayed.

The website changes and additions attempt to provide our members as well as interested nonmembers with the access to information that they need and want. We hope that you will make use of this valuable tool for both your continued education and that of your patients. Please visit your AAOP website at www.aaop.org.

Benefits of AAOP Membership

by Don Primack, Membership Committee Chair

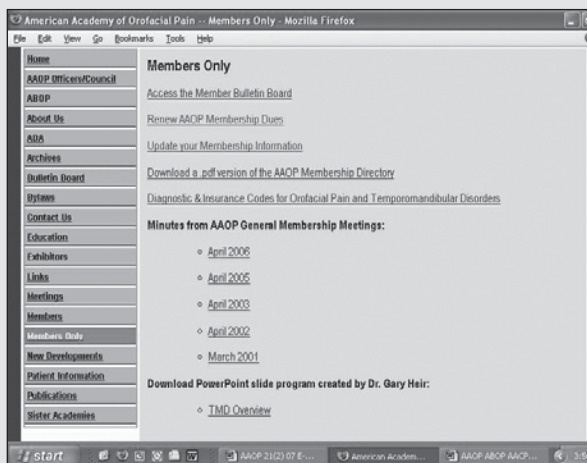
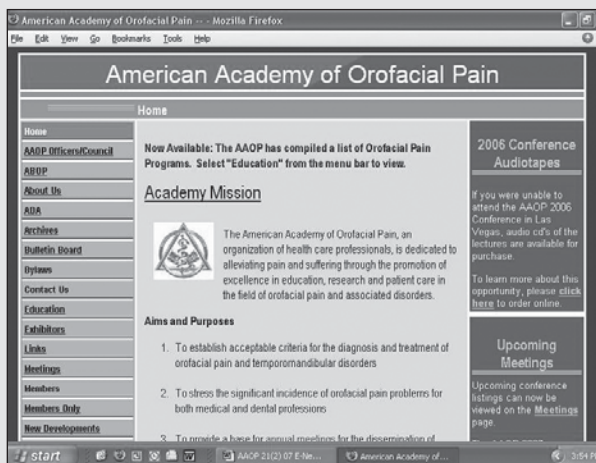
Membership in the American Academy of Orofacial Pain (AAOP) include many privileges. I want to make sure you know about them and utilize your membership to its fullest extent.

Here is a list of some of your membership benefits:

1. Recognition within the field of dentistry as an AAOP member
2. Membership certificate
3. Discounted registration to the annual scientific/clinical meeting
4. Listing in and access to the online AAOP membership directory
5. Free subscription to the *Journal of Orofacial Pain*
6. This quarterly newsletter
7. Access to the members-only section of the website, which includes case studies
8. Free use of the Membership Bulletin Board in the members-only section of the website, enabling you to post questions to your colleagues and request help with difficult cases
9. The right to vote for Academy officers and important policy issues
10. The opportunity to participate in leadership roles within the Academy
11. Networking with distinguished national and international leaders in the field of TMD and orofacial pain
12. Access to AAOP'S members-only publication *Insurance Coding for TMD and OFP*

The website was recently updated and revamped; if you have not visited it lately, I highly recommend you take a look at it. It is vastly improved and much easier to use. Also, if you are not familiar with how to access the members-only section, please read the article “Your AAOP Website” in this newsletter.

If you have any questions or would like to suggest additional benefits that you think other members would enjoy and that would make your membership in AAOP more valuable, please contact me at dprimack@aol.com.



The Craniofacial Pain Center of Tufts University School of Dental Medicine

The Craniofacial Pain Center of Tufts University School of Dental Medicine is devoted to the diagnosis and management of temporomandibular disorders (TMD) and chronic head, neck, and facial pain. It is one of the largest centers of its kind in the United States, with approximately 2,000 new patients each year. A multidisciplinary approach is used to treat these complex pain problems within its 4,000-square-foot facility.

The center interacts closely with referring dentists, physicians, and other pain specialists in the New England region. Through its national and international network, the center has developed strong ties with other university and hospital based centers, allowing for follow up referrals for out of town patients. Its 10 full-time and 5 part-time faculty include pain physicians, dentists, physical therapists, psychologists, and rehabilitation specialists. It provides services which range from occlusal appliances and other dental therapies, medications, stress management, counseling, physical therapy, trigger-point therapy, and neurological treatment for headaches.

Full-time residency

Fellowship program (1 y)

Certificate program (2 y)

Master of science (3 y)

Part-time residency

Mini-residency program (1 y)

Visiting dentist program

Distance dental education

Master of science (3 y)

Continuing education

These full- and part-time programs are designed to fulfill the needs of graduate dentists interested in specializing in this field.

Fellowship Program (1 year)

This program is designed for the dentist interested in learning about the clinical management of TMD. Ninety percent of the Fellow's time is dedicated to patient care. Fellows attend department courses and seminars, which include presentations on all aspects of TMD and orofacial pains (eg, dental occlusion, orthodontic and prosthodontic finishing) and American Board of Orofacial Pain preparation seminars.

Certificate Program (2 years)

This full-time program prepares dentists in the management of complex orofacial pain patients through a multidisciplinary approach. With hundreds of new patients every year, and 2 years to follow patients, this program provides residents with a unique clinical experience.

Residents have an extensive exposure to orofacial pain patients on a daily basis; patient treatment occupies 70% of the resident's scheduled time. The residents interact with faculty members of various disciplines, including orthodontists, pain specialists, neurologists, psychologists, physical therapists, and surgeons.

Residents obtain extensive training in diagnostic radiography and magnetic resonance imaging for the head and neck, electromyography, computerized dental occlusal analysis, electrical anesthesia, and diagnostic injections. Treatment modalities commonly used at the center include intraoral appliances, pharmacology, psychology, and physical therapy.

Postgraduate courses at the School of Dental Medicine form the didactic portion of the student's studies. Residents also receive courses and seminars at the Craniofacial Pain Center, which include literature review sessions, board review seminars, patient conferences, visiting lecturers, and research meetings.

Master of Science (3 years)

Those in the certificate program interested in earning a master of science (MS) degree from Tufts University can complete a third year of study. The MS program has didactic and research requirements in addition to the clinical portion. The didactic section of the degree requires that the resident complete 18 credit hours. Some of these courses may be completed in the first 2 years (during the certificate program). The resident is also required to complete research (clinical or basic science) relating to TMD and orofacial pain. Upon successful completion of the MS program, a resident should be qualified to participate in the clinical aspects of TMD and orofacial pain management, pursue an academic position, and conduct independent research.

The resident will learn to run a multidisciplinary pain practice and to interact with various health professionals. Residents have the opportunity to follow their patients for 3 years.

Mini-Residency

This program is a requires a time commitment of 1 day per week for 1 year. The morning session includes lectures and seminars in TMD and orofacial pain, including presentations by health-care professionals lecturing on different aspects of pain management, case presentations, patient interviews, and the Research Club. The participants are provided with a broad view of current approaches in the diagnosis and treatment of orofacial pain.

The afternoon session is directed toward patient evaluation and treatment under the guidance of the Center's dental and medical faculty. Upon completion of this program, participants are qualified to evaluate and treat routine TMD and orofacial pain patients and have a better understanding of the multidisciplinary management approach.

Visiting Dentist

This program is customized to each dentist's needs. Participants attend most lectures, seminars, and events at the Center during their visits and observe clinical management and treatment with the faculty and residents. Participants are encouraged to take part in discussions and patient evaluation and treatment.

Distance Dental Education MS Degree

This is an innovative alternative for dentists who want to earn an MS degree from Tufts Dental School without relocating to Boston. Participants in this 3-year program receive an MS degree from Tufts University in addition to a continuing education certificate from the Craniofacial Pain Center.

The program includes an interactive web environment with a calendar-based format inform students of assignments and due dates. Students are provided with resources and organizational tools, lectures on CDs, and close interaction with advisers, faculty, and the program coordinator through the web environment, teleconferencing sessions, and virtual classrooms. Students are required to attend hands-on clinics and classes in Boston 2 to 3 times a year. Course work is designed to be successfully completed from anywhere in the world using our distance format. It is expected that the student will dedicate approximately 10 hours a week to the core cur-

riculum areas the first year. The focus of the second and third years is on the development of the thesis protocol, obtaining approval from the Tufts protocol committee and relevant institution review boards, conducting the research, and writing and defending the thesis. The thesis research is performed at the student's home office under the oversight of a sanctioned Institutional Review Board.

Continuing Education

Continuing education courses are continually provided by Tufts University School of Dental Medicine and the Craniofacial Pain Center. For a complete list of continuing education programs, visit the Tufts University's Continuing Education website (<http://www.tufts.edu/home/academics>).

Additional Information

For additional information, please contact

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Request for Information about OFP/TMD Meetings

If one clicks the "Meetings" button in our web site, we have a monthly list of orofacial pain/TMD meetings that are offered locally, nationally, and Internationally. If you know of meetings you recommend to be placed in this section, please e-mail this information to aaopco@talley.com. The notice must be submitted no less than 2 months prior to the meeting date and the calendar will be updated once a month.

