



REGISTRATION PROGRAMME

THE BRITISH PAIN SOCIETY'S
51ST ANNUAL SCIENTIFIC MEETING

TUESDAY 1 MAY - WEDNESDAY 2 MAY 2018

THE HILTON BRIGHTON METROPOLE

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WELCOME TO THE 51ST ANNUAL SCIENTIFIC MEETING 2018

We are very excited to share the full programme with you for our 51st Annual Scientific Meeting (ASM) which will be held at the Hilton Brighton Metropole 1-2 May 2018.

We have worked hard to put together a stimulating and innovative programme with high quality educational and scientific content while also being clinically relevant. The multidisciplinary nature of the Society is reflected throughout the scientific programme, with lecture and workshop topics chosen specifically to ensure there is something of interest to all participants, whatever their specialty. The programme also reflects that 2018 is the IASP Year of Education.

We have secured an outstanding faculty of speakers from the UK, Canada and America, who are cutting edge experts in their field. We look forward to our plenary speakers delivering thought-provoking lectures, with clear implications for practice.

In addition to the scientific programme, participants may visit the poster exhibition, technical exhibition and attend satellite meetings. These are all important aspects of the ASM. All delegates are also invited to join us at the ASM party which is a great opportunity to network and catch up with new and old colleagues in a relaxed atmosphere.

Who should attend?

- Academic researchers in pain
- Consultants & specialist doctors in pain medicine
- Doctors training in related specialties
- GPs and GP trainees
- Occupational Therapists
- Pain medicine nurses
- Pharmacists
- Physiotherapists
- Psychologists
- Specialists in pain management
- Students with an interest in pain medicine

Why participate:

- Network with colleagues
- Keep up to date with the latest research and developments relevant to pain
- Raise questions, partake in debates and discuss outcomes
- Meet with poster exhibitors and discuss their research
- Meet with technical exhibitors and hear about their products and services
- Discuss your own research
- Interact with professionals from other disciplines with a shared interest in pain
- Unwind at our social event



The Programme

The ASM attracts a high quality of speakers and 2018 is no exception. We are delighted to have secured a distinguished faculty from England, Scotland, Ireland, Canada and America. The plenary lectures have been carefully selected to be attractive to all who have an interest in pain management, whatever their specialty.

Poster Exhibition

All delegates are encouraged to submit an abstract suitable for presentation as a poster.

The top five, as judged by the Scientific Programme Committee, will be invited to present a plenary lecture. A People's Choice award will also be presented following votes over the course of the ASM.

For further information, and to submit a poster abstract, please visit: <https://www.britishpainsociety.org/2018-asm-brighton/poster-exhibition/>

The Technical Exhibition

We are looking forward to welcoming colleagues from industry, once again. This is an important part of the ASM, and we encourage participants to visit the exhibition during the coffee and lunch breaks.

HIGHLIGHTS FOR 2018

Plenary session will include time for Q&As at the end

A mobile app will be available for a second year ensuring you can access the most up to date version of the programme, check out speaker profiles, connect with other delegates and many other functions.

Rotating poster board sessions to ensure regular, new content for discussion

The five top-rated posters will give a 10 minute oral presentation during a plenary session

SCIENTIFIC PROGRAMME



DAY ONE: TUESDAY 1 MAY 2018

0900 – 0910 Welcome

Dr Andrew Baranowski, President of The British Pain Society
Professor David Walsh, Chair of the Scientific Programme Committee

0910 – 0950 Pat Wall Lecture: Professor Jeffrey Mogil

Pain in Mice and Man: Ironic Adventures in Translation

Recent decades have seen an explosion in our understanding of the molecular and cellular underpinnings of pain, but virtually none of this knowledge has resulted in new clinical therapies. The first part of the talk will explore the reasons for this lack of translation, including a mismatch between clinical characteristics and preclinical experimental design choices, species-specific gene expression, and emerging challenges in clinical trials. The second part of the talk will focus on recent studies in our laboratory concerning the modulation of pain by social factors. One would imagine these would be even harder to translate into humans, but in this domain translation between mice and undergraduates has been surprisingly successful. These observations collectively challenge assumptions commonly made about the biopsychosocial model, and have important philosophical implications for animal research.

0950 – 1120 Parallel Sessions A1 – A6

Participants are asked to choose one from the following six sessions below and indicate their preferred option on the online registration form

A1: Facing the challenges of pain and addiction – practical approaches

Chaired by Dr Ruth Day

- Pain & addiction – can it be managed in the GP surgery? Dr Hugh Campbell
- Personal experience of an opioid-reduction pain programme. Dr Dee Burrows interviews Mrs Trewern
- Managing the person with addiction in the acute pain setting. Ms Felicia Cox

A2: The Clinical Taboo: A detailed exploration of diagnostic uncertainty in adult and paediatric chronic pain settings

Chaired by Professor Tamar Pincus

- When uncertainty can't be removed, how do we foster self-management and acceptance in adults with chronic pain? Professor Tamar Pincus.
- The paediatric period: The nature and impact of diagnostic uncertainty in adolescents with chronic pain and their parents. Dr Melanie Noel

- The flip side: Clinicians' experiences of managing diagnostic uncertainty in a paediatric clinical context. Dr Abbie Jordan

A3: Chronic pain lost in silos and tariff-free zones – taking pain management to where it hurts - the healthcare economy

Chaired by Dr John Hughes

- The Complex Pain Team. Integrating care for patients across sectors and conditions; from inpatient to community; Crohn's to sickle cell disease. Dr Natasha Curran
- On the front line – taking pain management to A&E. Working collaboratively to improve clinical care, staff experience, educate and navigate. Ms Dee Henderson
- Co-production: Service users are the ace in our pack. Mrs Meherzin Das

A4: Excellence in Pain Education: Evidence and Solutions for Clinical and University Education

Chaired by Professor Alison Twycross

- Current pain education in undergraduate healthcare: known models and their effectiveness. Mrs Kate Thompson
- Current pain education in clinical practice: known models and their effectiveness. Dr Amelia Swift
- Mind the Gap: learner's experience of theory vs practice in managing pain. Dr Emma Briggs

A5: Abdominopelvic pain: How do the treatment pathways differ?

Chaired by Dr Andrew Baranowski

- Management of visceral and non-visceral pain in benign gynecological conditions. Dr William Rae
- Developments in the pathophysiology of endometriosis-associated pain. Dr Katy Vincent
- The role of the multidisciplinary team in neuromodulation for pelvic pain in a specialised tertiary pain service. Ms Julia Cambitzi

A6: Interventions for intractable Cancer Pain – A multidisciplinary approach for cancer patients

Chaired by Dr Gordon McGinn

- Assessment of cancer patients for interventions - challenges for the MDT. Ms Lesley Somerville
- Intrathecal drug delivery made simple! A reproducible service model with patient centred outcomes. Dr Jonathan McGhie
- Cordotomy for Cancer Pain - quality pain relief needs quality staff development. Dr Paul Cook

1120 – 1200 Plenary Lecture: Dr David Armstrong

What can sociologists contribute towards the understanding of pain?

Although pain has long been an important medical symptom (of underlying disease) it only became a separate clinical problem about 50 years ago especially with the recognition of 'chronic pain'. This medical interest in pain coincided with new psychological theories, particularly the gate control theory, as well as sociological studies of cultural variations in response to pain. This presentation will map the sociological literature since those formative studies to explore both the wider structural correlates of pain identified in socio-medical surveys and the more numerous qualitative studies that try and establish the meaning and consequences of pain for individual patients.

1200 – 1300 Lunch break: Technical and Poster Exhibition

1300 – 1340 Plenary Lecture: Professor Kate Seers

Chronic pain – what's it like? Patient and Professional perspectives

This plenary will explore the research evidence that addresses people's experiences of pain and gives insights into their perspectives and the meaning they give to pain. It will identify the factors that are important to people's experiences of pain and how these experiences affect them. It will also present the evidence on what it is like for health care professionals managing people with pain, and the tensions and challenges that emerge. It will conclude with key take home messages for clinical practice and research.

1340 – 1440 British Pain Society Annual General Meeting (members only)

1340 – 1440 Non-members networking session

1440 – 1530 Poster viewings

1530-1630 – Meetings of the following Special Interest Groups:

- ◆ Interventional Pain Medicine
- ◆ Medicolegal
- ◆ Pain Education
- ◆ Pain Management Programme
- ◆ Pain in Children

1630 – 1710 Plenary Lecture: Professor Eloise Carr

Leaning on the wind: reducing patient, professional and organisational barriers to pain management through education.

The effective management of pain continues to be a challenge for individuals, professionals and organisations. Pain management in hospitals remains problematic with 60-80% of people experiencing moderate pain. Chronic pain costs Europe billions of Euros every year, with national costs ranging from €1.1 billion to nearly €50 billion, and 21% of Europeans with chronic pain are unable to work at all as a result of their pain.



Barriers to good pain management are numerous with patients and their families potentially harbouring misconceptions and concerns, which challenge those attempting to provide effective pain management. Professionals continue to receive inadequate education, often resulting in a lack of confidence, knowledge and skills to manage successfully. Local and national policies can inadvertently hinder good pain management from an organizational stance. This plenary presentation will explore these barriers, and offers practical examples, drawn from my own research and those of others, to illustrate how pain education can be a valuable tool to improve care.

1710 – 1810 Satellite Symposium

1930 – late BPS Social Event

DAY TWO: WEDNESDAY 2 MAY 2018

0830 – 0910 Plenary Lecture: Dr Amanda Williams

Pain after torture: progress, setbacks, and prospects

Pain from torture is, in principle, entirely preventable: it only needs torture to stop. Yet we seem further than ever from realising the UN ban on torture. Worse, the UK among other signatories to the UN Convention has sought to erode definitions of torture, and blur responsibility by outsourcing torture. President Trump intends to reintroduce waterboarding. Refugees reaching Western countries are the minority: most remain in the home or a neighbouring country. There are no data on how many have been tortured, but most estimates start at 30%, and chronic pain is reported at a very high rate.

For various reasons, few torture survivors access adequate health care for pain. Many - almost all UK - services for refugees and torture survivors are non-governmental, and provide what treatment they believe is best, usually biased towards addressing mental health problems. Chronic pain is often written off as a nonspecific symptom of post-traumatic stress, and neither treated nor referred for specialist treatment. In immigration detention centres, survivors are even less likely to receive any treatment for chronic pain.

A recent systematic review of any intervention for pain in torture survivors found only 3 studies with very disappointing results. I will argue that we need to start from basic principles: applying best pain treatment and recording outcomes, case by case, to build understanding of whether and how pain from torture differs in its response to treatments compared with other chronic pain. That will set the agenda for larger studies if needed: the involvement of torture survivors in determining treatment priorities and outcomes is essential.

0910 – 1040 Parallel Sessions B1 – B6

Participants are asked to choose one from the following six sessions below and indicate their preferred option on the online registration form

B1: Opioids - Promoting appropriate use and preventing abuse in the developing world

Chaired by Dr Victoria Tidman

- Use of opioids for chronic non-malignant pain in Ugandan palliative care setting. Dr Barbara Duncan
- What do we know from the literature so far? Dr Clare Roques
- The direction of opioid therapy in the developing world. Dr Brigitta Brander and Ms Jackie Walumbe

B2: Understanding some of the different issues for managing pain in the complex care of older people

Chaired by Dr Margaret Dunham

- Improving the management of pain in older adults – are guidelines the answer? Professor Pat Schofield
- Exploring the links between pain and frailty a retrospective case note analysis. Dr Margaret Dunham
- Is pain a risk factor for frailty in older people? Results from two prospective cohort studies. Dr Brendon Stubbs

B3: Fit To Serve-The multidisciplinary rehabilitation model for injured personnel within the UK armed forces

Chaired by Dr Jon Norman

- From a theatre of operation through the operating theatre, the stages of the journey pre-rehabilitation. Dr Paul Wood
- Military rehabilitation offers more, what is the offer and does it achieve more? Wing Commander Shreshth Dharm-Datta
- Out of Service: Outcomes for Service Personnel. Dr Jon Norman

B4: Medicolegal Aspects of Pain: Catastrophic errors by experts, exaggeration and consent

Chaired by Dr Rajesh Munglani

- Catastrophic complications by medicolegal experts in medicolegal cases. Mr Stuart Mckechnie
- The assessment of pain and disability: assisting the court to determine exaggeration. Mr Marcus Grant
- Working at the coal face: the law of consent and how it applies to clinical practice and clinical negligence cases. Dr Rajesh Munglani

B5: Neuropathic targets in Headache

Chaired by Dr Jayne Gallagher

- CGRP in migraine. Dr Giorgio Lambru
- Role of nurse-led clinics in Headache Services. Ms Karin Cannons
- Target Sphenopalatine Ganglion. Dr Vivek Mehta

B6: Radicular pain

Chaired by Dr Neil Collighan

- Causes of radicular pain (speaker TBC)
- The non-surgical management of radicular pain (speaker TBC)
- Where is the boundary between surgical and interventional pain medicine practices? (speaker TBC)

1100 – 1140 Plenary Lecture: Professor John Cryan

A Gut Feeling About Brain Function: Microbiome as a Key Regulator of Visceral Pain

A growing body of preclinical and clinical evidence supports a relationship between the composition of microbes and health including brain health. In this Lecture the involvement of the microbiota in visceral pain will be reviewed. We focus on the anatomical and physiological nodes whereby microbiota may be affecting pain responses, and address the potential for manipulating gastrointestinal microbiota as a therapeutic target for visceral pain.

1140 – 1310 Parallel Sessions C1 – C6

Participants are asked to choose one from the following six sessions below and indicate their preferred option on the online registration form

C1: Understanding and managing prescription opioid dependence: a translational approach

Chaired by Professor Lesley Colvin

- The neurobiology of opioid dependence. Professor Tim Hales
- A joint approach to managing prescription opioid dependence. Dr Rebecca Lawrence and Professor Lesley Colvin
- Are prescription opioids causing harm? Professor Blair Smith

C2: Uncertainties and controversies in pain management at the end of life

Chaired by Professor Sam Ahmedzai

- Opioids at the end of life – after 5000 years, time for reappraisal? Dr Jason Boland
- Pain management in people with diminished capacity – who decides what happens? Professor Marie Lloyd-Williams
- Assisted dying as solution for anticipated suffering – compassionate or cruel? Ms Jo Brand

C3: Early career pain enthusiasts - how to get involved in research and get the most out of training in pain

Chaired by Dr Sheila Black

- PAIN TRAIN – The rise of the Pain Trainee audit and research network. Dr Sheila Black
- What does a consultant post look like in pain medicine in 2018 and how do I get one? Dr Vijay Bandikatlar
- Sensory Phenotyping in neuropathic pain – an example of academic training in pain. Dr Harriet Kemp

C4: Working with what you have – applying simple techniques of self-hypnosis and visualisation in the pain clinic

Chaired by Dr Sue Peacock

- Brief history of using hypnosis for pain management. Dr Sue Peacock
- Demonstration & teaching of a hypnotic relaxation. Ms Jean Rogerson
- Giving patients tools. Dr Ann Williamson

C5: “The play’s the thing”. Disruption and Repair in Differing Pain Contexts

Chaired by Dr Joe Walsh

- Successful return to work with chronic pain? Repairing disrupted worker identities between employers and employees. Dr Elaine Wainwright
- The function of online forum data when parenting a child with Complex Regional Pain Syndrome; can it disrupt and repair? Dr Abbie Jordan
- The disruptive effects of pain on cognition. Dr Nina Attridge

C6: Pain & Frequent attendees to ED departments in the UK

Chaired by Dr Cathy Price

- Understanding the unmet need. Professor Michelle Briggs
- Putting the patient in context. Dr Mike Osborn
- Consultant in Emergency Medicine: A practical approach to managing frequent attenders presenting in pain in the ED. Dr Stephen Halford

1310 – 1410 Lunch and Technical and Poster Exhibition

1410 – 1510 Plenary presentations from the Top Five poster submissions

1510 – 1540 Coffee Break: Technical and Poster Exhibitions

1540 – 1640 Special Interest Group meetings

- Pain in Developing Countries
- Neuropathic Pain
- Acute Pain
- Pain in Older People

1640 – 1720 British Pain Society Lecture: Professor Blair Smith

Chronic pain epidemiology: from population health to health policy

Epidemiology is “the study of the distribution and determinants of health-related states..., and the application of this study to the control of health problems”. I have researched the epidemiology of chronic pain since 2nd September 1993, at 10.30am.

Distribution and determinants...

We began by developing basic case definitions and ascertainment methods, and measures of severity and impact. In planning our first population-based survey, our methodology assumed a low overall prevalence and deliberately over-sampled people on regular prescribed analgesics. We were surprised, therefore, to demonstrate a population prevalence of 46%, but this has been supported by subsequent studies. “Severe” chronic pain had a prevalence of 6%, and pain with neuropathic features was present in 7%. We went on to identify clinical, psychosocial and genetic factors associated with chronic (neuropathic) pain, many of which are now familiar, potentially inform prevention and management, and will be summarised here.

...the control of health problems

The latter part of epidemiology is perhaps more challenging: converting facts and figures into health policy. To my innocent surprise, it was not as straightforward as simply showing numbers to the Health Minister. Gradually, however, the Scottish Government and the Chief Medical Officer in England allowed doors to open, and through these we have been able to influence some (though not enough) relevant policy. This work is ongoing and relies at least as much on human relationships, and knowing the system, as on good research.

1720 – 1730 Awards and Close

HOW TO REGISTER

PARTICIPANT REGISTRATION

Please visit our website to register for the ASM: <https://www.britishpainsociety.org/mediacentre/events/2018-51st-asm-brighton>. BPS Members will need their membership number in order to get access to the member rates.

Once your online registration is complete and your payment has been processed you will be emailed a confirmation of booking.

GROUP DISCOUNTS

For every group of four people from the same place of work attending the ASM a group booking discount can be awarded. The discount will be calculated as 50% off the lowest registration fee of the four people.

To benefit from this discount, you will need to provide the names of your group members at the time of registration. Individuals should register themselves as normal online. When it comes to the payment section you should select to pay by invoice. At this stage you will be asked if you are booking as part of a group and asked to complete the names of the others that make up your group of four.

Once all four of you have registered online we can invoice your place of work or an individual for all four delegates. Please note that we cannot raise multiple invoices for a group booking. Try to register at a similar time to each other to enable a smooth process.

Terms and conditions:

- The group booking discount cannot be applied retrospectively (i.e. if after you have booked to attend the ASM you discover three or more of your colleagues are also attending but have already booked individually we cannot apply the discount across multiple payments).
- It is the responsibility of the individuals that make up the group to ensure all group members register online. If one or more members of the group do not register online before the start date of the event then the discount will become null and void and all remaining members who have registered online will be invoiced individually at the full applicable registration fee.
- If one or more members of the group cancel their booking then the discount becomes null and void and the usual ASM cancellation policy for that individual will apply. Remaining members will be invoiced individually at the full applicable registration fee.



REGISTRATION FEES

Registration fees are shown in the table below.

Discounts are offered to participants who book on or before **Thursday 22nd February 2018**.

Registration options	Early Bird Until 22 Feb 2018	Normal From 23 Feb - 25 April 2018	On-site from 26 April
Member < 20k + retired	145	195	205
Member 20-29	220	270	285
Member 30-39	300	350	365
Member 40-69	370	420	440
Member 70+	420	470	495
Member day rate	210	260	275
Member student rate	115	140	145
Non Member < 20k + retired	210	260	275
NonMember 20-29	315	365	385
Non Member 30-39	420	470	495
Non Member 40-69	525	575	605
Non Member 70+	630	680	715
Non Member day rate	315	365	385
Non Member student rate	165	190	200
Honorary Member	0	0	0

* Student rates apply to members or non-members who are undergraduate or postgraduate students and earn less than £10,000 per annum. Once you have registered online a letter confirming your student status signed off by your supervisor or administrative department of the university must be sent to the BPS secretariat at Churchill House, 35 Red Lion Square, London, WC1R 4SG in order to confirm your booking. Applicants who are unable to provide this information may be refused the student rate.



Honorary Members

Honorary Members of the British Pain Society are not required to pay registration fees to attend the Meeting.

Members

If you are a member of the British Pain Society you will benefit from reduced registration fees. Only members of the Society qualify for the members rate. Membership takes two full weeks to process so please apply with plenty of time prior to the commencement of the ASM. Membership forms are available on the **BPS website**. For any queries regarding membership renewals please contact Ken Obbard via email on KenObbard@britishpainsociety.org

Non-members

Non-members are welcome to attend the ASM however joining will allow you to benefit from the reduced registration fees as well as access to a wide range of exceptional member benefits. Applications should be made via the online form at <https://www.britishpainsociety.org/register>

Benefits of Membership:

- Reduced rates for attendance at BPS Meetings
- Reduced rates for study/education days
- British Journal of Pain (BJP) published four times a year
- Quarterly Pain Newsletter
- Network with over 1,200 BPS Members
- Research Grants and Awards
- Free access to 14 Special Interest Groups (SIGs)
- Complimentary electronic European Journal of Pain
- Opportunity to apply for EFIC Pain Schools

BRING A BUDDY COMPETITION

THIS YEAR WHY NOT BRING A COLLEAGUE WHO IS NEW TO THE ASM WITH YOU! INTRODUCING 'BRING A BUDDY'

If you bring along someone who hasn't attended an ASM before (or at least not in the past five years) you'll go in the draw to gain free entry to a BPS Study Day of your choice in 2018. Help us to share our knowledge and experience with a wider audience. Being part of a MDT organisation was the number one reason given by members as to why they joined and remained members of the Society so help us to spread the word!

We have 10 places to give away in total, so five lucky 'pairs' could be benefitting from an additional educational event in 2018 at no charge!

Process:

To be entered into the prize draw you will need to provide the name of your 'buddy' at the time of registration. Individuals should register themselves as normal online.

On the registration form there will be a tick box asking 'are you bringing/attending as a buddy?' You need to select yes, and provide the name of your buddy.

Terms and conditions

Prizes cannot be rolled over to 2019.

To be eligible for the prize draw, one member of the pair must not have attended an ASM in the past five years. If both members have attended an ASM in the past five years they will not be entered into the prize draw.

It is the responsibility of the individuals to know/check if they have attended an ASM in the past five years.

If either member of the pair cancel their attendance at the ASM then they will not be entered into the prize draw.

We are sure that this year's meeting will create an informative and enjoyable environment for all participants and we look forward to seeing you in Brighton!

Cancellation charges

- Cancellations **up to and including Wednesday 21 March 2018** will receive a full refund, less a £25 administration charge.
- For cancellations **after Wednesday 21 March 2018** no refund will be given unless in exceptional circumstances and at the discretion of the Treasurer.

To cancel a confirmed booking please contact the British Pain Society Secretariat directly by phone: 0207 269 7840 or email: asm@britishpainsociety.org. Please note that your booking will not be cancelled until you have received a notification from the Secretariat.

BURSARIES

ASM BURSARY APPLICATIONS

The deadline for bursary applications is 5pm on Thursday 22 February 2018.

Who is eligible to apply for a bursary?

In order to be eligible to apply for a bursary, the applicant must normally:

- Be a member of the British Pain Society
- Have a salary lower than £36,000/annum
- Have paid the 2017/2018 British Pain Society subscription fee
- Evidence of good standing within the Society (e.g. length of membership of the Society, other contributions to the work of the Society)

Priority will be given to those on lower salaries and those submitting a poster that is accepted for exhibition at the Meeting.

How should the application be submitted?

- The applicant must complete and return the Bursary Application Form to the British Pain Society Secretariat no later than 5pm Thursday 22 February 2018, together with the completed Participant Registration Form.
- The Bursary Application Form must be counter-signed by the Head of Department
- If the applicant is not submitting a poster abstract, the Head of Department must provide justification for the applicant's need to attend the Meeting.
- The applicant must not send payment with the Bursary Application Form.



What financial support is given?

The level of support offered to each applicant is dependent on the number of applications submitted, the applicant's salary and whether the applicant is exhibiting a poster at the Meeting. Applicants may request the following financial support:

- Registration fees to attend the Meeting
- Travel expenses
- Accommodation expenses up to a maximum of £50/night for 3 nights

When will the applicant hear if the application is successful?

Applicants will be informed of the outcome by Thursday 1 March 2018.

When can the applicant expect to receive the financial support?

If the application is successful, the Society will waive the registration fee and the applicant's registration to attend the meeting will be processed with immediate effect.

If the application for support towards the cost of accommodation and travel expenses is successful, the Society will reimburse the costs after the Meeting, once receipts are submitted. Receipts are to be sent to the Secretariat, marked for the attention of the Honorary Treasurer.

TECHNICAL EXHIBITION

The Technical Exhibition is an important part of the ASM and all participants are encouraged to visit. It will be housed alongside the Poster Exhibition and catering areas, which will create a vibrant hub for participants during the tea/coffee and lunch breaks. We look forward to welcoming our colleagues in industry.

The Exhibition will be open throughout the ASM.

Exhibitors, who would like to receive further information about exhibiting at the ASM, are asked to contact Casey at asm@britishpainsociety.org.

POSTER EXHIBITION

All participants are invited to submit poster abstracts for exhibition at the Meeting. All abstracts will be subject to review; those accepted by the Scientific Programme Committee (SPC) will be invited to exhibit throughout the Meeting and will be published as a supplement to the British Journal of Pain. The Poster Exhibition will be housed in the Exhibition Hall alongside the Technical Exhibition.

Deadline

The deadline for receipt of poster abstract submissions is midnight on **Monday 11th December 2017**.

Details of the abstract submission guidelines and how to submit your poster abstract can be found on our website at <https://www.britishpainsociety.org/2018-asm-brighton/poster-exhibition/>.

People's Choice Award

Delegates will have the opportunity to vote for the poster they rate as the best one at the meeting. All delegates will be given one sticker to vote with, the poster with the most number of stickers will be awarded the 'People's Choice' Award.

Best Submitted Posters

If your abstract is not selected for an oral presentation, the next 10 most highly rated abstracts for posters will be awarded a 'Best Submitted Poster' and commended with a rosette.



SOCIAL PROGRAMME

The BPS party will be held from 7.30pm on Tuesday 1 May at a local Brighton hot spot. Details will be available on the website soon. Tickets will include entry to the private function, drink vouchers, food and entertainment. Entry: £20 per person Includes entertainment, food, and two drinks vouchers. Thereafter it will be a cash bar.

ACCOMMODATION

We have teamed up with Visit Brighton who will provide a free accommodation booking service to all our delegates and exhibitors. They have negotiated the best rates with a selection of hotels near the Hilton Brighton Metropole. The rates are quoted per room per night. Visit Brighton does not just look for the best rates on accommodation for you, they recommend places to eat around Brighton along with prices and information on airport transportation.

Early booking is highly recommended.
Please book by Friday 5th April 2018.
Bookings made after this date will be on a request basis and subject to availability, rates may vary.

TRAVELLING TO BRIGHTON

How to get to Brighton for the 2018 ASM

By Air

London Gatwick International is the closest airport and is only 45km north of Brighton. It can be reached in half an hour by road or rail. If coming by train, the station is located inside the South terminal and there is a frequent and direct service to Brighton (every 15 minutes during the day). Journey time is 30 minutes. If coming from the airport by coach, National Express offers a half hourly service direct to Brighton and journey time is approximately 30-40 minutes (The stop in Brighton is called 'Pool Valley' and is located on the seafront).

For more information, please visit:
www.gatwickairport.com

London Heathrow Airport has more International connections than any other airport in the World and is approximately 100 km north of Brighton. For trains from Heathrow to Brighton, your best bet is to take the London Underground to London Victoria and connect with a mainline train to Brighton. Alternatively, take the Heathrow Express to Paddington and then the Underground to Victoria. The Heathrow Express is probably quickest but the Underground is the cheaper option. Journey time takes approximately 2 hours 15 minutes, depending on your chosen route and connection times. If coming by coach, the National Express offers a direct service to Brighton and journey time is approximately 1 hour 30 minutes. (The stop in Brighton is called 'Pool Valley' and is located on the seafront). For more information, please go to:
www.heathrowairport.com

By Rail

Travelling by train is often the fastest way to get to Brighton from other UK destinations. It's also a greener option than driving or flying.

If you are travelling from Europe, the Eurostar train arrives at St Pancras, London, where there are direct trains to Brighton. Journey time is approximately 90 minutes from St Pancras.

London is the hub of the UK's rail network and it is easy to connect to trains to Brighton and the South Coast. The fastest direct travelling times from London to Brighton are:

- London Victoria: 52 minutes (direct)
- London Bridge: 58 minutes (direct)
- London St Pancras: 1 hour 16 minutes (direct)

For more information, please go to:
www.nationalrail.co.uk

Brighton centre is an easy walk from the station. Buses or taxis are also available at the station. The Hilton Brighton Metropole is a 12-15 minute walk from Brighton Station.

By Road

By road there is excellent access to the rest of the UK via the M23 connecting Brighton with the M25 London Orbital. Journey time by car from the centre of London is about 2 hours and is about 50km

Parking

The closest public car park to the ASM is the Regency Square Multi-storey (Regency Square, Brighton, BN1 2FG) which is open 24 hours, 7 days a week and is a 4 minute walk from the Hilton Brighton Metropole. For more information, visit:
www.brighton-hove.gov.uk/parking

ONSITE AT THE HILTON BRIGHTON METROPOLE



The British Pain Society office at the venue

A British Pain Society office will be set up at the venue. British Pain Society staff will always be found at the registration desks in the foyer area during opening hours.

On arrival at the Meeting

All delegates are asked to make their way to the registration area. All delegates will be asked to sign an attendance register and will be given a name badge and a delegate pack. Badges must be worn at all times during the Meeting.

USEFUL TELEPHONE NUMBERS, EMAIL ADDRESSES AND WEBSITES

British Pain Society

0207 269 7840

www.britishpainsociety.org

Hilton Brighton Metropole

+44-1273-775-432

Kings Road

Brighton

BN1 2FU

<http://www3.hilton.com/en/hotels/united-kingdom/hilton-brighton-metropole-BSHMETW/index.html>

The registration desk will be open from 08.30 each day.

Catering

Tea/coffee breaks and lunch will be served in the Exhibition Hall beside the Exhibitor and Poster display areas at the times stated in the Scientific Programme.

Logistical information

Staff at the registration desk will be happy to answer any questions you have during the event regarding facilities and services.

TRAVEL INFORMATION

Visit Brighton

Please leave inquiry on their website

<https://www.visitbrighton.com/>

Trainline

0871 244 1545

www.thetrainline.com

National Rail Enquiries

0345 748 4950

www.nationalrail.co.uk

National Express Coach Service

0871 781 8181

www.nationalexpress.com

FURTHER INFORMATION

Further information will be sent to you upon registration for the Meeting. However, if you have any queries in the meantime, these should be addressed to:

British Pain Society
Third Floor
Churchill House
35 Red Lion Square
London WC1R 4SG

T: +44 (0)20 7269 7840
F: +44 (0)20 7831 0859
E: asm@britishpainsociety.org
W: www.britishpainsociety.org