

## **How Pain Camp Affects My Career**

I am Jimmy F. A. Barus from the Department of Neurology, Faculty of Medicine and Health Science, Atma Jaya Catholic University of Indonesia. I Graduated as a Neurologist in 2009. I was introduced to Pain Medicine by the late Professor Lucas Meliala, Professor of Neurology from Universitas Gadjah Mada Yogyakarta, where I had my residency. He is one of the founders of the Indonesian Pain Society (IPS). After four years of becoming an academician and neurologist at the Atma Jaya Catholic University of Indonesia, I was selected by IPS as one of the Indonesian Representatives to attend the 2013 Pain Camp held by the Association of South East Asia Pain Society (ASEAPS) in Singapore.

As a graduated general neurologist, I understand that we deal with many chronic pain conditions daily. Still, to my mind, at that time, as long as there is an appropriate analgesic and interventional and surgical procedures are available, the problem will most likely be solved. Pain camp showed me more detailed aspects of pain. I learned how the faculties worked together to build our understanding of pain according to their respective field. I saw how they collaborated to bring us to a new perspective. There I learned about nociplastic pain for the first time. Learn how to assess pain in a more detailed way, not only evaluating pain intensity and pain type but also pain interference. There were two clinical psychologists on the list of the faculty, Professor Lance McCracken, who explained quite clearly the psychological aspect of pain, and Dr. Zubaidah, who shared their experience in the Menang Program, which I finally understand that it is a Pain Self Management program training using cognitive behavioral approach done by a multidisciplinary team. I saw and started to realize that chronic pain should be managed best by a team. I immediately reflected on my daily practice and found many chronic pain conditions that analgesics and procedures can treat, but the patient's quality of life remains static, if not worse. I learn to see pain more comprehensively. I also learn to work with friends from other professions besides doctors.

Pain camp, for me, is a significant achievement. There is no formal education in becoming a pain consultant/specialist for neurologists in Indonesia. Even though the title is available, It is specifically addressed to those who work in the government hospital, which is considered suitable for neurology residency training. So, having a formal education is difficult. Pain camp laid a strong foundation for me to understand pain management more

comprehensively. After that, I learned through seminars, workshops, lectures, books, and leaflets and tried to practice them with my patient.

After graduating from pain camp, I started to arrange some educational materials for the students at my university. I designed a syllabus on pain medicine for several subjects, which covered the following topics.

- In neuromusculoskeletal organ system block, for 3rd-year medical student
  - Pain management (in general)
  - Neuropathic pain ( Painful diabetic Neuropathy, Central pain, Postherpetic neuralgia, and cranial neuralgias.
  - Headache
  - Musculoskeletal pain
- In Palliative block, for 4th-year medical student
  - Cancer pain – a lecture and student-centered learning module
  - Pain assessment
- In Addiction Medicine Block – for 4th-year medical student
  - Pain and addiction
  - Pain in HIV and alcoholism

These topics are still becoming part of the curriculum until now.

My department entrusts me as coordinator for the topic of pain management for 5th-year medical students who attended neurological clerkship on their way to becoming general physicians. I was also involved in incorporating Pain topics in Geriatrics Block for 4th-year medical students. The issues are Pain Assessment in the Elderly with or Without Dementia and Pharmacological Treatment of Pain in the Elderly. This was since 2018. I have to say, not many medical schools in Indonesia teach Pain Medicine to medical students and incorporate it into their curriculum. I have to admit that we are one of them proudly.

In 2015, I attended the next ASEAPS meeting in Manila. There I met with Dr. Mary Cardosa and Dr. Zubaidah. We discussed their program, Menang Program. The discussion triggered me to know more about the program and see for myself how they do it. I decided to come to Selayang Hospital Kuala Lumpur on a fellow observership program for two weeks. I found it interesting and am trying to implement it in my university hospital. I then approached the key persons in our Faculty of Psychology, which happens to have a graduate program in

clinical psychology. I shared the concept of Pain Self Management using Cognitive Behavioral Approach, and they were very interested. In Indonesia, Pain Management is still not popular among clinical psychologists. I was honored that after the sharing, the Graduate school of clinical psychology of Atma Jaya Catholic University asked me to join their team and teach about Pain Management, especially the psychological aspect of pain, to their students. For this job, I consulted Dr. Zubaidah a lot. She made some suggestions on the teaching materials that I use. After that, we planned to perform POTENSI – Program Penatalaksanaan Nyeri Kronis Multidisiplin (Multidisciplinary Pain Management Program) as an adaptation from Menang Program at our academic hospital in 2015-2016. We invited Dr. Zubaidah and Dr. Mary to come to train our team. We performed the program for one year for 18 patients, and it went well. But due to financial and technical issues, we can not continue. Some of the program results were presented in a poster session at the 2017 ASEAPS conference in Yangon. Even though we can not continue POTENSI, we decided to move on and concentrate on educational and research programs. Our team now are incorporated into Atma Jaya Neuroscience and Cognitive Center, an organization that accommodates educational and research programs in neuroscience. Besides regular teaching programs, we are now concentrating on research regarding the psychology of pain and validating several pain questionnaires in Bahasa Indonesia. We have finished validating Central Sensitization Inventory and are now waiting for the article to be published. Three students researched chronic pain from this collaboration and eventually graduated as clinical psychologists. This is an effort to introduce pain medicine and pain management to clinical psychologists. We started at our university.

IASP, through the Multidisciplinary Pain Clinic Toolkit Advisory board, appointed Dr. Takdir Musba and me as Indonesian representatives for the project. We did our first meeting in Kuala Lumpur in 2017. This project brought me to my first world congress on Pain in Boston, 2018. I got financial support from IASP to attend the congress, received advocacy training on pain management, and had several discussions regarding the toolkit. We finalized the content at the 2019 ASEAPS conference in Kuching, Malaysia. As the follow-up program for the toolkit, IASP performed training on the Multidisciplinary Pain Clinic Toolkit and Pain Self Management program in 3 targeted countries: Myanmar, Indonesia, and Vietnam. I was appointed as a faculty member and facilitator on the Indonesia and Vietnam training, conducted virtually in 2021.

I was also appointed as a faculty member on the Pain Camp at the 2019 Kuching ASEAPS conference. This was massive progress and a precious opportunity to share my

experience with the participants. I was able to share how for me, pain camp is fundamental. I was also appointed as a faculty member for the next pain camp (2023 in Bangkok).

As for our local pain organization, The Indonesian Pain Society (IPS) recruited me to become part of the committee. I started as a coordinator in international relations for 2017-2020, and now I am appointed as vice president of the IPS for 2021-2024.

As mentioned in the title, this all happened because it started with one – “the 2013 Singapore Pain Camp”. I hope that in the near future, many more individuals can also benefit from pain camps.

Thank You

Jimmy Barus