

How to get published, 2022

Moderator:

Rollin M. Gallagher MD, MPH:

Founding Editor (2000-2020), *Pain Medicine*

Speakers:

R. Norman Harden, MD:

Deputy and Technical Editor, *Pain Medicine*;

Emeritus Professor, Depts. PM&R and PTHMS, Northwestern University

W. Michael Hooten, MD:

President, American Academy of Pain Medicine

Past Section Editor, *Pain Medicine*: Rehabilitation Section;

Resident and Fellow Forum

Professor, Anesthesiology and Perioperative Medicine and Psychiatry,
Mayo Clinic

Our Content:

There is lots to write about.

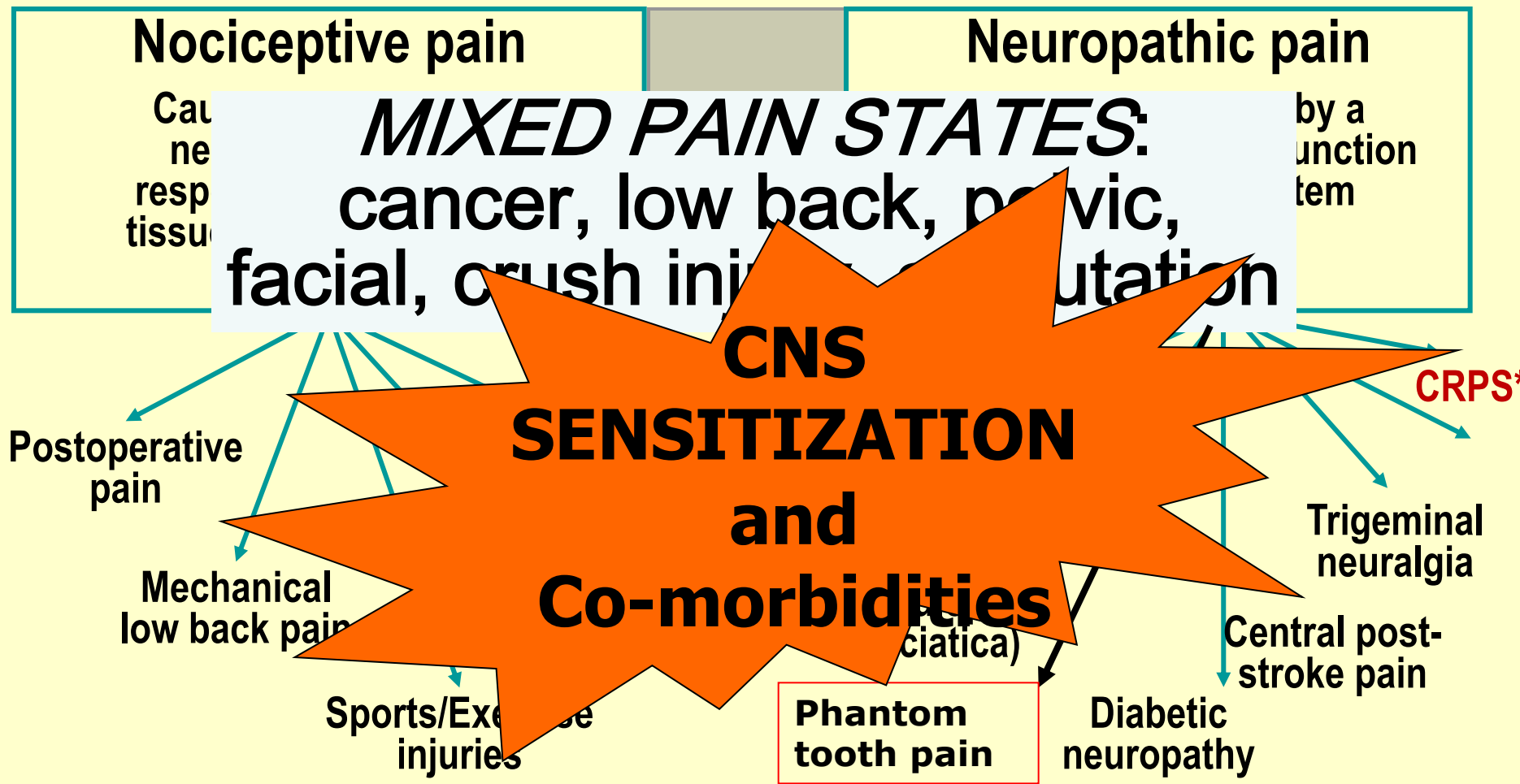
Pain is the first truly biopsychosocial medical field, developing in an era that incorporated rapid advances in biological and medical sciences:

- Genetics
- Epidemiology / measurement
- Neuroscience
- Behavioral Science & Behavioral Medicine
- Sociomedical Science

Our Content:

There Are Many Painful Conditions & Pain Diseases

Inflammatory Mediation



*Complex regional pain syndrome.

Our content: Chronification to pain as disease

Pathophysiology of Maintenance:

- Radiculopathy
- Neuroma traction
- Myofascial sensitization
- Brain, SC pathology (atrophy, reorganization)

Pathology:

- Muscle atrophy, weakness;
- Bone loss;
- Immuno-compromise
- Depression/suicide
- Addiction/Overdose
- Obesity-OA-CVD

Psychopathology of maintenance:

- Encoded anxiety dysregulation
- PTSD
- Emotional activation
- Mood disorder

Acute injury and pain

Central Sensitization

- Neuroplastic changes

Neurogenic Inflammation:

- Glial activation
- Pro-inflammatory cytokines
- blood-nerve barrier disruption

Peripheral Sensitization:

- New Na⁺ channels
- lower threshold

Disability

- Less active
- Kinesophobia
- Decreased motivation
- Increased isolation
- Role loss
- SUD
- Sleep d/o

Our content: sociopsychobiological consequences

- **Quality of life**
 - Physical functioning
 - Ability to perform activities of daily living (ADLs)
 - Work
- **Social consequences**
 - Marital/family relations
 - Intimacy/sexual activity
 - Social role and friendships
 - Legal / financial
- **Psychological / CNS morbidity**
 - Fear, anger, suffering
 - Sleep disorders
 - Loss of self-esteem
 - Neuroplasticity
 - Clinical depression/suicide
 - Bioethical conundrums
- **Medical consequences**
 - Accidents / overdose
 - Medication side effects
 - Immune function

Societal consequences & burden

- Health care costs, disability, lost workdays
- Business failures, higher taxes

A Population-based Approach to Pain Care

Relative proportion of
pain care, by setting

Tertiary care: PM Subspecialties

- *Neuroremodeling*
- *Gene therapies*
- *Neurostimulation*
- *Rehabilitation Centers*

Gallagher RM, AAPM 2008;
Dubois, Gallagher, Lippe, PAIN MED 2009

Secondary care: Pain Medicine

- *Biopsychosocial assessment*
 - ** pain generators, mechanisms
 - ** perpetuating factors:
peripheral, CNS, psychosocial
- *Biopsychosocial Formulation*
- *Goal-oriented plan*
- *Multi-modal treatment*

Primary care

- *Mech. Based Drug Algorithms*
- *Stepped Behavioral Care*
- *Physical Therapy*
- *Office procedures*

Self-care

- *meditation*
- *exercise*
- *web-training*
- *social modeling*
- *social supports*

Tertiary Care
Subspecialty, tertiary prevention

Secondary Care
Specialty, Subspecialty, Secondary / tertiary prevention

Primary Care
Specialty, Primary / secondary prevention

Self Care, Community Care
*Primary/secondary Prevention
Disease Management*

**PAIN
MEDICINE**
-Practice
-Training
-Research

POPULATION IN PAIN

How to Get Published: **Get involved with others**

- Know your journal, and the opportunities it presents: philosophy, sections, editors
- If it belongs to a society or societies, know your societies
- Know your area and want to say something important about it
- Know (learn) how to write – keep trying
- Volunteer as a reviewer
- Attend journal club

Stretch yourself: Become an author!!

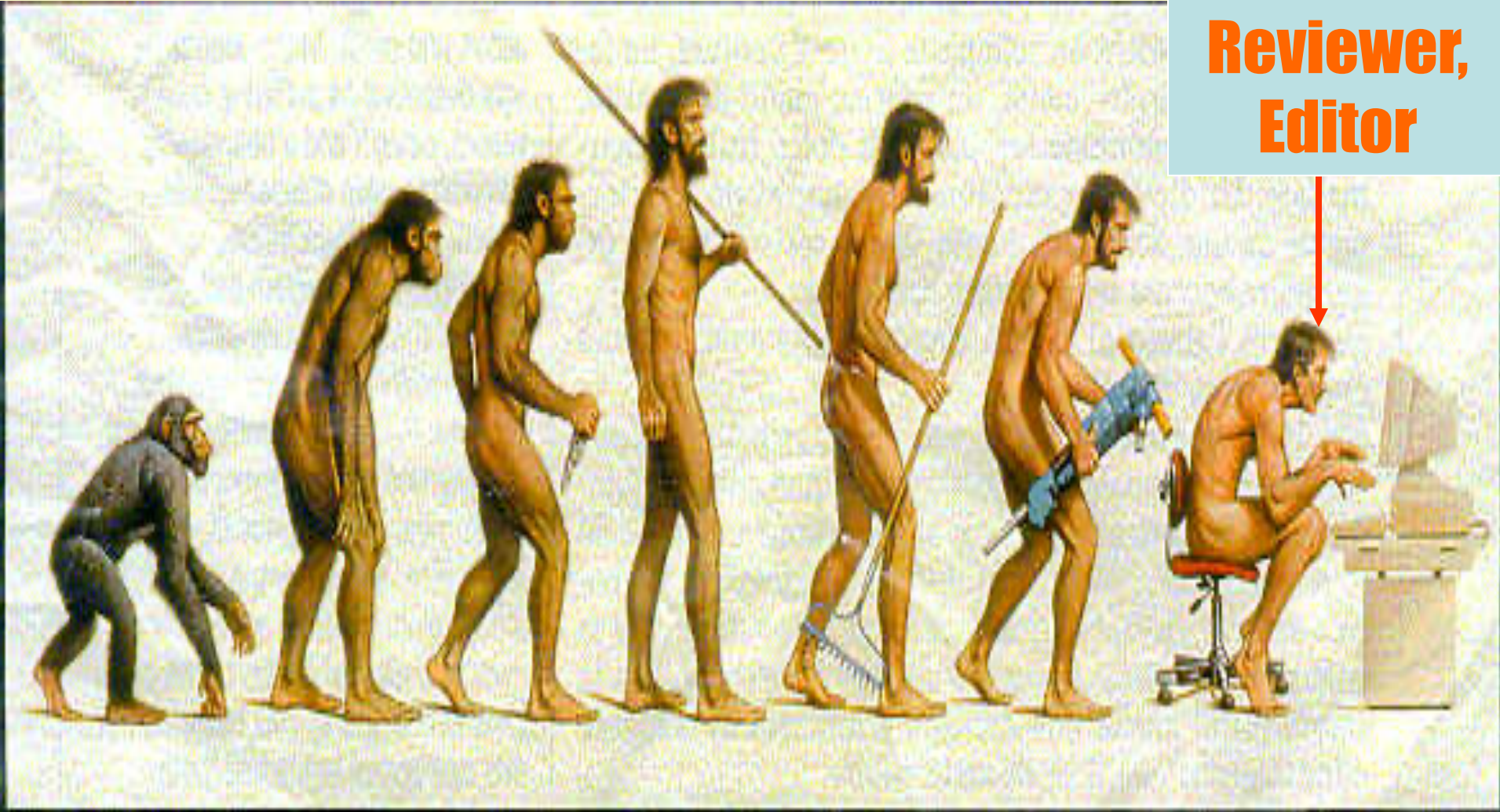
Memory, Learning and CNS plasticity

(M Cozolino, 2006)

- **Hippocampus presents new opportunities**
 - Detailed memory retrieval, highly plastic in different learning environments, flexibly responsive to current learning requirements
 - New neurons are constantly being born even into older age, and if not used to develop learning, die in two weeks.
 - *Use these!!*
 - *Do not lose these!!*

FUNCTIONAL EVOLUTION OF THE SPINE

**2018
Author,
Reviewer,
Editor**



**“Research is the ultimate
blue collar profession”**

**– David Baltimore, President,
Rockefeller Foundation**

“Research is a team sport”

As an author:

- 1) Think like Editorial Board: What do they want?
 - 2) Think like Reviewers: What do they not want?
-

- Editors chosen because of expertise & commitment:
They want to see interesting, novel, well-written papers in their sections and journal
They are very busy people!!
- Reviewers usually chosen because of:
 - Expertise in the field
 - The quality & timeliness of prior reviews
 - Availability & willingness to review
 - Teaching ability – *up to a point!!*
 - *They are very busy people!*
- Reviewing can be felt as a burdensome duty.

Therefore, please do not be careless or sloppy!
Every spelling and grammatical error activates the
punishment center in a reviewer's or editor's brain

REJECTION!!!

Integrated care for injured backs & egos

*“And how does that make you feel about your father?”
(Editor 😊)*



Authors: Responding to the Editor's letter and Reviewers' Comments.

Check your ego at the door!!

- Remember: Editorial work is largely voluntary and for the good of the field
- All reviewers have been rejected before
- All suggestions should not be taken personally
 - Editor usually screens pejorative remarks
 - Do not respond with anger or frustration
 - Write a detailed letter of response to each point:
 - Where in the text you made a change
 - What the change was
 - If you disagree, say why respectfully

Make it easy to re-review your manuscript!!