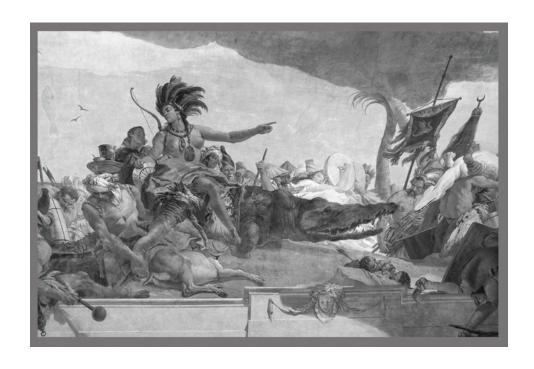
Peripheral Nerve Society

Meeting Guide

Würzburg, Germany July 4-8, 2009



Membership Directory

Tuesday, July 7, 2009

12:30-14:00

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37	PERIPHERAL NEUROPATHY AND VIII CRANIAL NERVE INVOLVEMENT IN FABRY DISEASE Reisin R, Marchesoni C, Carmona S, Pardal A, Kisinovsky I, Cáceres G, Birmingham M, Moreno M, Maira S, Acosta P
39	ULTRASTRUCTURAL STUDIES OF PERIPHERAL NERVES IN NDRG1 MUTANT MICE King RHM, Nourallah M, Muddle JR, Orrell RW
41	SEVERE SENSORY NEUROPATHY AS THE PREDOMINANT PRESENTATION OF DNA POLYMERASE GAMMA (POLG) MUTATIONS Maisonobe T, Jardel C, Tchikviladzé N, Laforet P, Viala K, Léger J-M, Bouche P, Lombès A
43	FOOT AND ANKLE STRENGTH TRAINING IN PEDIATRIC CMT: A CASE STUDY Burns J , Raymond J, Ouvrier RA
45	DRAMATIC IMPROVEMENT OF PERIPHERAL NERVOUS SYSTEM MANIFESTATIONS OF B-CELL NON-HODGKIN'S LYMPHOMA AFTER RITUXIMAB THERAPY Briani C , Zambello R, Cavallaro T, Ferrari S, Lucchetta M, Pollanz S, Grisold W
47	THE USE OF INTEGRATIVE NEUROLOGY TREATMENTS FOR SYMPTOMATIC RELIEF OF PERIPHERAL NEUROPATHY RESULTING FROM VARIOUS ETIOLOGICAL FACTORS: A BEST CASE SERIES Kukurin GW

THE USE OF INTEGRATIVE NEUROLOGY TREATMENTS FOR SYMPTOMATIC RELIEF OF PERIPHERAL NEUROPATHY RESULTING FROM VARIOUS ETIOLOGICAL FACTORS: A BEST CASE SERIES

<u>Kukurin GW</u>. Private Practice, Pittsburgh, PA, USA.

Peripheral neuropathy is one of the most common disorders of the nervous system. It is a common finding in diabetes and other metabolic disorders, often develops as an unwanted side effect of chemotherapy and other medications, is associated with alcohol abuse and is frequently classified as idiopathic. As research unravels the physiopathology of peripheral neuropathy, new and more effective treatments are emerging for patients. However, current medical therapies often provide inadequate symptom relief or unacceptable side effects. This paper discusses the application of alternative therapies such as acupuncture, low level laser therapy, amino acid and other nutritional therapies in a comprehensive integrative neurological approach to treatment of various forms of peripheral neuropathy. A best case series is presented from a private integrative neurology clinic. The combination of acupuncture, low level laser therapy, acetyl carnitine and herbal preparations with GABA-ergic properties proved to be the most effective integrative medicine approach. Chemotherapy induced neuropathy patients had the best response; a number became symptom free. Patients with poorly controlled diabetes responded least favorably. Reduced use of pain medication and improved quality of life was frequently reported. There appears to be a significant sub-population of peripheral neuropathy patients that respond guite well to the addition of integrative neurology treatments to standard medical care. Research should be aimed at identifying those patients who will likely benefit from these alternative neuropathy treatment approaches.

Course Description

The Peripheral Nerve Society (PNS) is an international organization dedicated to advancing our understanding and nervous treatment of peripheral system disease. members' interests range from basic peripheral nerve biology to clinical management of peripheral nerve disease. The PNS holds an international meeting every 2 years. This meeting brings together approximately 300-400 experts and includes research presentations (both poster and platform format) as well as a series of plenary lectures by leaders in the field. There are also scheduled opportunities for open discussion of important issues. The meeting is typically held in a cloistered setting in order to facilitate informal discussion and exchange of ideas. This is the only international congress entirely devoted to the field of peripheral neuropathy. Basic scientists and clinicians come together to benefit mutually from the others' expertise. The PNS meeting is an ideal training situation for young scientists and clinical fellows in training who want to expand their knowledge on pathophysiology and treatment of peripheral nerve diseases.

Objectives

The attendees will receive updates on basic peripheral nerve pathophysiology, like axon-glia interactions, axonal transport, and regeneration. They will also be updated on diabetic neuropathies, demyelinating and inflammatory neuropathies, and hereditary neuropathies. They will learn about new treatment strategies, like axonal protection, current treatment of inflammatory neuropathies, optimal treatment of painful neuropathies. There will be break-out sessions for special interest groups to allow in-depth discussion of scientific and clinical problems.

Needs Assessment

The Peripheral Nerve Society (PNS) is an international organization of physicians and scientists dedicated forwarding our understanding of peripheral nerve biology and disease, with the ultimate aim of developing treatments for patients with various forms of peripheral neuropathy. The PNS facilitates both basic and clinical research, physician and scientific training, and consensus development of clinical standards of care. PNS members come from a broad spectrum of academic interests including basic and clinical neuroscience, pain, anesthesiology, genetics, pathology and relevant surgical subspecialties. The interests of our members encompass all aspects of the peripheral nervous system, both clinical and scientific, and range from molecular mechanisms of disease and nerve fiber regeneration through electrophysiologic tools for diagnosis to clinical trials and research synthesis. By speaking to the leaders in the PNS and examining previous feedback from our last meeting, we were able to design the current course to meet the objectives of the PNS faculty.

Target Audience

The target audience for this activity includes basic scientists and clinicians in the field of peripheral neuropathy.

Accreditation Statement

This activity has been planned and implemented in accordance with the Essential Areas and policies of the Accreditation Council for Continuing Medical Education through the joint sponsorship of the University of California, San Diego School of Medicine and the Peripheral Nerve Society. The University of California, San Diego School of Medicine is accredited by the ACCME to provide continuing medical education for physicians.

The University of California, San Diego School of Medicine designates this educational activity for a maximum of 22.25 AMA PRA Category 1 Credits™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

Cultural and Linguistic Competency

California Assembly Bill 1195 requires continuing medical education activities with patient care components to include curriculum in the subjects of cultural and linguistic competency. It is the intent of the bill, which went into effect on July 1, 2006, to encourage physicians and surgeons, CME providers in the state of California, and the Accreditation Council for Continuing Medical Education to meet the cultural and linguistic concerns of a diverse patient population through appropriate professional development. The planners, speakers and authors of this CME activity have been encouraged to address issues relevant in their topic area. In addition, a variety of resources are available that address cultural and linguistic competency, some of which are included in your syllabus or handout materials. Additional resources and information about AB1195 can be found on our website at http://cme.ucsd.edu.

Course Director

Wendy M. Campana, Ph.D.

Associate Professor of Anesthesiology University of California, San Diego

Meeting Planner/Staff

Amber Millen

Executive Secretary, Peripheral Nerve Society

Coordinator Executive Assistant, University of California, San Diego