

## Letters to the Editor

### TO THE EDITOR

#### **Re: Methadone in the Management of Intractable Neuropathic Noncancer Pain.**

*Moulin DE, Palma D, Watling C, et al.*  
Can J Neurol Sci. 2005; 32:340-3.

At our institution, we treat a large population of patients with various types of neuropathic pain, and we are in agreement with the conclusion by Moulin, et al.<sup>1</sup> However, we would like to emphasize the importance of establishing a screening program for the early detection of a potential QTc-interval prolongation and the risk of Torsades de Pointes among patients receiving high dose of methadone.

As the authors mentioned, it has been suggested that there is a linear correlation between the daily dose of methadone and the QTc interval.<sup>2,3</sup> Therefore, we perform a baseline electrocardiographic (ECG) study prior to instituting long-term methadone treatment greater than 120 mg per day.<sup>4</sup> The ECG study is repeated in one month and every three months thereafter. In the face of QTc-interval prolongation, we discontinue the methadone therapy to avoid potential life-threatening dysrhythmias.

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### REFERENCES

1. Moulin DE, Palma D, Watling C, et al. Methadone in the Management of Intractable Neuropathic Noncancer Pain. Can J Neurol Sci. 2005; 32:340-3.
2. Kornick CA, Kilborn MJ, Santiago-Palma J, et al. QTc interval prolongation associated with intravenous methadone. Pain. 2003;105:499-506.
3. Krantz MJ, Kutinsky IB, Robertson AD, et al. Dose-related effects of methadone on QT prolongation in a series of patients with torsade de pointes. Pharmacotherapy. 2003; 23:802-5.
4. Harris JD, de Leon-Casasola OA. Oral erythromycin and the risk of sudden death. N Engl J Med. 2005; 352:301-4.

### TO THE EDITOR

#### **In Regards to the CCNS**

It is my opinion that the Canadian Congress of Neurological Sciences (CCNS) could do more to attract the participation of medical trainees with an interest in neuroscience. Currently, the CCNS makes no organized effort to attract undergraduate students to its annual meeting, charging in excess of \$300 per medical student for attendance. This also applies to students who present their work to the Congress.

In contrast, other Canadian medical organizations have become increasingly savvy at offering conference grants, student prizes, and research incentives to students with an interest in

their specialties. The American Academy of Neurology (AAN) offers a number of student-focussed initiatives to attract young people into the field at an early stage in their careers, and, each year, Canadian students are well-represented among the AAN recipients. Grants offered by the AAN apply not only to medical students but also to high school and non-medical undergraduate students, and some incentives focus on the neurologic education of students from underrepresented populations. The CCNS unfortunately has no comparable initiatives.

The value of early exposure to a medical field of interest cannot be overemphasized, and the ability of the CCNS to elevate student participation to a level worthy of recognition and encouragement will surely prove valuable to the field over the longer term. This is especially true for students training in smaller centers who may not have a complete picture of clinical and research opportunities in the practice of neurology or neurosurgery.

Finally, given the average age of neurologists in Canada and the expected retirement of 20 percent of currently practising neurologists over the next five years,<sup>1</sup> (information I learned while attending the CCNS), it may be argued that the formal attention of the CCNS to a younger audience is both prudent and necessary.

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1. Warren S, Bailey P. Canadian neurological survey (abs). Can J Neurol Sci. 2004; 31(Suppl 1):S14.

### REPLY

Thank you for your comments. The Canadian Congress of Neurological Sciences certainly values the interest and participation of medical students as well as that of Neurology, Child Neurology and Neurosurgery Residents.

The CCNS and its member societies currently provide support for Neurology and Neurosurgery Residents who join their representative Societies with significantly reduced membership dues and subscription rates to The Canadian Journal of Neurological Sciences; reduced registration rates for the annual CCNS meeting; competitions that award Resident prizes for scientific excellence; and free access to a section of the CCNS website devoted to Residents.

The CCNS has not previously focused upon addressing the specific needs of medical students that you identified but rather has thought this to be the prerogative of individual Academic Clinical Neuroscience Programs located across Canada. The CCNS will however undertake to thoughtfully re-examine the role it might play in encouraging medical students to embrace a future in Neurology and Neurosurgery.

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