



**CANADIAN ACADEMY
OF PAIN MANAGEMENT**
EXCELLENCE IN INTERDISCIPLINARY EDUCATION

IN THIS EDITION

- Membership Renewal
- Articles: Gender Gaps & Disparities in Pain and Chronic Pain in the LGBTQ Populations
- CAPM Heads to CME Away
- Website Update
- Notices from Outside CAPM
- Stay Connected: Follow CAPM on LinkedIn

JANUARY 2026 BULLETIN

MEMBERSHIP RENEWAL

Thank you to all our members who have completed their membership renewal. We truly appreciate your continued support and engagement. We're also delighted to welcome our new members to the CAPM community. Your involvement strengthens our shared mission to advance excellence in pain management.

Membership renewal remains open for anyone who has not yet completed the process. We encourage you to renew soon and continue enjoying the benefits of being part of CAPM.

To log in, please visit the [CAPM website here](#).

Should you require any assistance with the renewal process or have any questions, please do not hesitate to contact us. We would be happy to help.

ARTICLES

To help with your 2026 Resolutions, here is an expansion of topics from the most recent LinkedIn posts. It also ties in with our credentialing programming.

Special Populations and Chronic Pain

1. Gender Gaps and Disparities in Pain
 2. Chronic Pain in the LGBTQ Populations
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Topic 1: Gender Gaps and Disparities in Pain

This was the topic for the IASP 2024 Global Campaign.

The focus of the IASP 2024 global campaign was on sex and gender disparities in pain
Article link to IASP: <https://www.iasp-pain.org/resources/fact-sheets/156455/>

Main resource fact sheet:

(all quotes and numbered reference are from that fact sheet)

“While sex and gender are often used in binary terms when exploring pain (e.g., comparing male vs. female), there can be variability within these binary categories. Characteristics related to sex and gender can also vary over time (e.g., hormone levels, gender identity). A challenge is **how and when to move beyond the binary to better understand the variation in pain.**”

Key points

1. Historically, research used the traditional dichotomy with commonly understood constructs of male and female subjects.

2. Sex/gender differences in experimental pain are not consistently found in children, with differences between boys and girls seeming to appear around puberty.

Also, less is known about sex/gender differences in experimental pain sensitivity in older adults. [3]...

Changes in pain sensitivity have been found to occur across the menstrual cycle, and around menopause suggesting that sex hormones may also play a role [6, 11]. However, patterns do vary, suggesting inconsistencies.

3. “ Sexism and gender bias perpetuate inequities in pain research and care” [12-14] Women and female animals have long been excluded from pain research studies, with reasons including concerns over the impact of the estrous/menstrual cycle. Harmful gender-related biases, such as dismissing women’s pain and expecting men to be stoic, are related to poorer pain management outcomes. This often intersects with other identities and social positions associated with marginalization (e.g., racialization, poverty) to compound pain inequities. [8]

Thus bias or variability in every level of the study of pain in populations can be found.

A further search into one of the articles in the Reference list highlights some of the more specific differences that have been discovered.

Review Article
Published: 21 May 2020

Mogil JS. Qualitative sex differences in pain processing: emerging evidence of a biased literature. *Nat Rev Neurosci*. 2020 Jul;21(7):353-365. doi: 10.1038/s41583-020-0310-6. Epub 2020 May 21. PMID: 32440016.

Using AI to summarize:

Key Takeaways from the Review

- **Sex-Specific Biology:** There are fundamental differences in pain pathways (genetic, molecular, cellular, physiological) between sexes, not just differences in perception.
- **Male-Biased Research:** Historically, studies overwhelmingly used male rodents, leading to male-centric hypotheses about pain.

- **Treatment Gap:** This bias means new pain drugs developed from male-focused research are less likely to work for women, who are the majority of chronic pain sufferers.
- **Emerging Evidence:** Newer research, prompted by funding agency policies (like NIH's), shows sex-specific mechanisms, such as:
 - **Males: Microglia (brain immune cells) are key to neuropathic pain.**
 - **Females: Calcitonin gene-related peptide (CGRP) and prolactin are crucial for pain hypersensitivity.**

Call for Change: The review calls for integrating sex as a biological variable in research to develop treatments that work for everyone, recognizing the diverse biological underpinnings of pain.

Why It Matters

The review underscores that focusing on male models ignores the reality that women experience chronic pain more often, highlighting a "major blind spot" in developing effective pain relief, as discussed by McGill University.

Topic 2: Chronic Pain in the LGBTQ Populations

I have selected one key article.

Abd-Elsayed A, Heyer AM, Schatman ME. Disparities in the Treatment of the LGBTQ Population in Chronic Pain Management. J Pain Res. 2021 Nov 30;14:3623-3625. doi: 10.2147/JPR.S348525. PMID: 34880669; PMCID: PMC8646952.

Again using Google's AI to summarize

Key insights from the paper include:

- **Higher Prevalence and Complexity:** LGBTQ individuals are more likely to report chronic pain across multiple sites and experience greater functional limitations compared to heterosexual counterparts.
- **Psychosocial Comorbidities:** Unique socioeconomic stressors and histories of discrimination contribute to higher rates of comorbid mental health disorders, such as depression, which can worsen chronic pain prognoses.
- **Barriers to Quality Care:**
 - o **Provider Bias:** Many healthcare providers lack sufficient training or hold negative attitudes, leading to incompetent or exclusionary care.
 - o **Education Gap:** Medical schools spend an average of only five hours on LGBTQ-specific content, leaving many clinicians unprepared to address this population's specific needs.
 - o **Insurance Access:** Barriers to obtaining health insurance further hinder the ability of LGBTQ patients to access consistent, high-quality pain management.
- **Recommendations for Improvement:** The authors advocate for increased provider education, improved cultural competency, and systemic changes to improve healthcare access and patient confidence.

OVERALL MESSAGE – keep our minds open to differences from what we might “expect” to see in terms of assessment and treatment of non-male patients.

Additionally, the concept of using “Compassionate Curiosity” should be a requirement in our field that we need to not only familiar with but become adept at. There are many resources

but here is a good starting point.

1. https://newsarchive.berkeley.edu/news/media/releases/2007/05/08_doctorpatient.shtml (accessed Jan 13, 2026)

CAPM HEADS TO CME AWAY IN MEXICO



CAPM is excited to announce that we will be attending CME Away from February 14–21 in Mexico. This event is a valuable opportunity to engage in high-quality continuing medical education while connecting with peers in an inspiring setting. We are very excited to participate, represent our members, and bring back insights and experiences that support our shared commitment to professional growth and excellence. We look forward to making the most of this opportunity and sharing highlights with our CAPM community.

WEBSITE UPDATE

CAPM is pleased to share that our website has been refreshed! Over the next few weeks, we'll be rolling out new members-only features designed to enhance your experience and add even more value to your membership. Stay tuned as we continue building a fresh, improved online experience. We can't wait for you to explore what's coming next.

NOTICES FROM OUTSIDE CAPM

1. Pacific Pain Forum, Vancouver, British Columbia, Canada Interdisciplinary Conference April 17, 2026 Beyond Pain: Embracing Compassion and Trauma-Informed Awareness, <https://www.iasp-pain.org/event/pacific-pain-forum/>
2. CPS Conference 2026 : Shaping the future of pain science, April 29 — May 2 Québec City Convention Centre, Québec City
3. IASP 2026 Global Year of Neuropathic Pain
 - a. IASP World Congress 2026 – Bangkok, Thailand October 26-30, 2026

STAY CONNECTED FOLLOW CAPM ON LINKEDIN

We're excited to invite all members of the Canadian Academy of Pain Management to follow us on LinkedIn! Our LinkedIn page is a great way to stay up to date with the latest news, educational insights, professional development opportunities, and community highlights from

CAPM. Following us will help you stay connected with your peers and engage with content that supports excellence in pain management care and education.

Follow CAPM on LinkedIn: <https://ca.linkedin.com/company/canadian-academy-of-pain-management>

Thank you for being part of our community. We look forward to connecting with you online!

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