

**First Steps:
The Early Years of IASP, 1973–1984**

Louisa E. Jones

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Foreword

Who better to write about the early years of the IASP than Louisa Jones? Until her retirement several years ago, Louisa was the IASP to many of us who were active in the association. She ran the central office in Seattle, organized the triennial World Congresses on Pain that steadily grew in attendance and importance under her leadership, and was known to virtually all IASP members.

Louisa was Editor for Research Publications in the Anesthesiology Department that John J. Bonica chaired when the IASP was merely a concept that began with an international symposium on pain in 1973 in Issaquah, Washington. From the time of her role in organizing the Issaquah symposium, and meeting for the first time many of the people she describes in *First Steps*, Louisa was centrally involved in everything IASP from the beginning. She describes John Bonica telling her to handle things after the Issaquah meeting when asking him “what next?” She did indeed handle things with remarkable skill. Planning, organizing, and incorporating the IASP came next, and Louisa became the executive officer. Her immediate, big challenge was to organize yet another international meeting, the first IASP World Congress on Pain, which was held in Florence, Italy, in 1975. A new journal, *PAIN*, was launched, and, as they say, the rest is history. But Louisa’s telling of that early history is the story here.

Louisa’s personal account of the formative years of the IASP is highly readable and entertaining, revealing yet another of Louisa’s many talents. As one would expect, Louisa factually recounts the important early events that led to and sustained the IASP in its early years. I did not anticipate, however, how her enviable skill as a writer would enrich those early years with character and personality. I thoroughly enjoyed *First Steps* and expect that those who have had a long relationship with the IASP also will be delighted with Louisa’s telling of the beginnings of the IASP—and perhaps wish she had extended the period covered! And those who are new to IASP will find this booklet an absorbing introduction to how the association took its first steps.

Although retired, Louisa remains active in the community, paints as a hobby (with water colors), and should be encouraged to continue writing. She knows well all of the members of the IASP executive group, including those taking office at the Montreal World Congress on Pain, and I imagine she has plenty of interesting stories she could tell.

On behalf of Louisa’s many friends in the IASP, I would like to thank her for sharing with us her personal perspective on the beginnings of an organization that now counts more than 7,000 members.

G.F. Gebhart, PhD
IASP President, 2008–2010

Preface

When asked by the IASP President, Jerry Gebhart, just after the IASP Congress in Glasgow in 2008 to recall the early history of IASP, it didn't take me long to agree. The idea was to highlight activities and events from my perspective that shaped IASP. I cannot deny that IASP has been a major part of my life and that I have good memories of much hard work and of many wonderful people. However, this writing has been more difficult than I imagined, and I have been able to perfect the art of procrastination in the process.

Many of those who attended the founding meeting in 1973 are now fully retired or have died. That also means that memories are fading. I guess the IASP Executive Committee decided that I was one of the youngest of the oldies and maybe had a bit more memory left. I hope that is the case.

The first question that came up was the period of time to cover. This was left up to me, and I suggested that we go from the 1973 founding meeting until the time IASP had enough money to fund a special award or activity. I dated this to the Congress held in Seattle in 1984 when the Association presented the first John J. Bonica Distinguished Lecture Award. Thus the time frame of this memoir is 1973–1984.

This is not a scholarly work, but it does contain much factual information about IASP and many anecdotes.¹ Fortunately, IASP has a treasury of photographs, and I have used as many as reasonable from the period being covered. I have also tried to include photos of as many different people as possible. A number of IASP members who have been involved in its leadership, either on Council or on committees over the years, have their own pictorial history in these photos.

I was always surprised at IASP Congresses when the Congress Secretariat group we had hired would tell me that our delegates were different, “they are so nice and polite.” This happened more than once, and it is also what I experienced in my years with IASP. I would tell them it was because it takes a special kind of person to study pain or to treat pain patients. We were a truly international association of clinicians and scientists from many specialties; people tried to listen to what the others had to say. This has been an enduring and endearing quality among our members and a real strength of the Association.

Over the years, many, many members of IASP have volunteered their time and energy, often substantial commitments, to serve on the Executive Committee, on Council, and on myriad committees. Because they work in the background, it is easy to overlook or underestimate how much volunteer work is actually being done to keep the Association running well. The positive spirit with which these people have cared for IASP is something I appreciated and tried to emulate in everything I did. I enjoyed working with each and every person and will not forget any of them.

¹IASP's Corporate Minutes are kept at the headquarters office in Seattle, as required by law, and are accessible to those with legitimate interests. All *IASP Newsletters*, membership directories, books, proceedings, abstracts, and other publications, including the 25th anniversary publication, *Celebrating 25 Years*, are also available at the headquarters office. Older historical information about IASP is available at the John C. Liebeskind History of Pain Collection at the Louise M. Darling Biomedical History Library at the University of California, Los Angeles (UCLA). The personal papers of a number of IASP members, some IASP chapters, and some other pain associations are also available at the Pain Collection.

I was often pleasantly surprised at how my travels or my interactions with members over the years connected with other aspects of my life. A good example is when I was on a site inspection trip in the early 1980s to visit Berlin and the Internationales Congress Centrum (ICC). At one point we were ushered into a room at the ICC to have lunch with representatives of the mayor's office. It was called the Columbus Saal and was decorated with ship memorabilia. I looked around carefully and asked our hosts if the room was in remembrance of the ocean liner *Columbus* of the Nord Deutscher Lloyd line that was scuttled off the coast of Virginia to avoid capture by the British when the Second World War broke out; a ship that had been in South America and tried to make it back to Europe. They were stunned that an ordinary American would know these details. It was then that I told them that my parents had met on that very ship in 1936. My father had attended the 1936 Olympics in Berlin and was an alternate on the pistol team (but did not compete), and my mother was emigrating from Germany to the United States accompanying a Franco-American family for whom she had been working in Paris. This story amazed our hosts even more than being in that room amazed me. I would not have had this delightful experience were it not for my work with IASP.

Louisa E. Jones

Acknowledgments

I thank my father, Emlen H. Jones, Sr., who instilled in me a sense of adventure, challenge, and inventiveness as we sat on the front stoop on hot summer evenings in Brooklyn, NY, playing logic games and talking of world travel. I thank my mother, Else S. Jones, who instilled in me a sense of hard work, responsibility, and creativity as she raised her six children. I thank my aunt, Alice W. Jones, who saw to it that I got a good education.

I give special thanks to my friends the former IASP Presidents, Ronald Melzack, John D. Loeser, and Michael R. Bond for their reviews and suggestions in this writing effort and for their continuous support over the years. Many others in IASP have also been an inspiration to me, especially Harald Breivik, Jean-Marie Besson, Ronald Dubner, Allan Basbaum, Barry Sessle, Harold Merskey, Mohammed Abdelmoumene, Henry McQuay, Patricia McGrath, Michael Cousins, Howard Fields, Geoffrey Gourlay, Olaitan Soyannwo, David Bowsher, Daniel B. Carr, and our colleagues at Elsevier, Elly Tjoa and Nello Spiteri. I remember fondly those departed and their support and friendship, especially John J. Bonica, Patrick D. Wall, William Noordenbos, John C. Liebeskind, Peter Nathan, Frederick W.L. Kerr, and J. Edmond Charlton.

I thank all the members of IASP past and present for their kindness to the IASP staff, for their support of the Association, and for their friendship over the years.

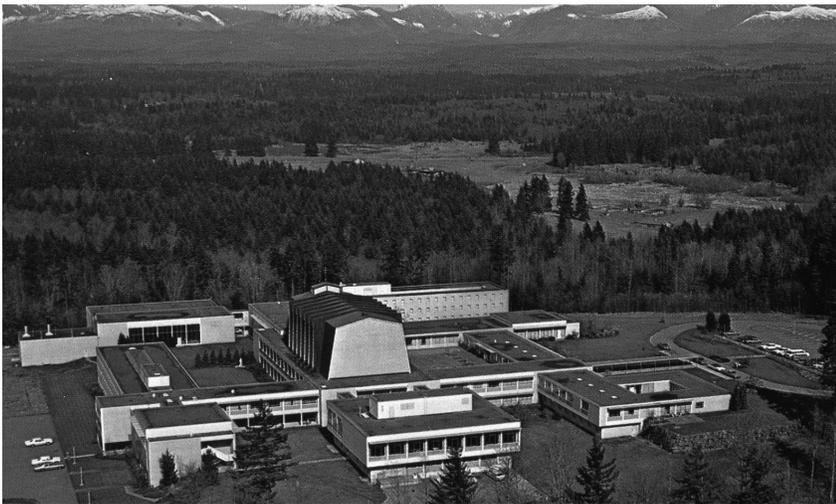
I thank the loyal staff of IASP in the early years, especially Molly Brown, Beverly Holpainen, Mary Miller, Peg McNair, Barbara Rehder, Sally Whipple, and Bryan Urakawa, and in the later years Susan Couch, Dale Schmidt, Stephanie Munson, Marleda Di Pierri, Kathy Havers, Karen Lauderback, Heather Spiess, Roberta Scholz, Ellen Wilson, Elizabeth Endres, Keith Peterson, Jane Milliken, Kristin Lukkarila, Yaa Opare, and Elizabeth Twiss, who helped make IASP the active Association it is today, who helped make my work easier, and whose contributions I always appreciated.

Last but not least, I thank the presidents of IASP whom I was privileged to work with over my 33 years with the Association. They are all dear to me. Below is an excerpt from the short talk I gave at my retirement dinner at the time of the 2005 Congress in Sydney, Australia. Names are in chronological order. I learned something special from each:

Denise Albe-Fessard	The value and beauty of being calm
John J. Bonica	Always have an open mind and an open door
Ainsley Iggo	Never stop learning from other cultures
Ronald Melzack	You lose nothing when you put your ideas forward (whether right or wrong)
Michael J. Cousins	Try not to take on more than you can reasonably handle
Ulf Lindblom	Sometimes it is better to say nothing
John D. Loeser	There are usually more than two sides to almost everything
Jean-Marie Besson	Patience can help put things in perspective
Barry J. Sessle	One can always improve on attention to detail
Michael R. Bond	How to be positive in a less than positive situation

Issaquah, 1973

“Where on earth is Issaquah, Washington?” was the question of a number of international delegates who flew in to Seattle-Tacoma Airport in late May of 1973. Providence Heights Conference Center in Issaquah,¹ a town about 20 miles east of Seattle, was the location chosen for a unique week-long meeting on pain. The center was the regional headquarters of the Sisters of Providence, a nursing order of Catholic nuns who no longer had enough novices to fill the small college campus but still needed to maintain their headquarters. They had turned it into a conference center, and because it was in a semi-wilderness area with almost no local transportation, delegates not from the immediate Seattle area were essentially sequestered for five days.



Providence Heights Education & Conference Center, Pine Lake, Issaquah, Washington. Site of the International Symposium on Pain and the beginning of IASP.

Photo: MCG, Kansas City, MO

The meeting was the International Symposium on Pain held on May 21–26, 1973. It was the brainchild of Professor John Bonica, chair of the Department of Anesthesiology at the University of Washington in Seattle and author of the groundbreaking book, *The Management of Pain*, published in 1953 by Lea & Febiger. It was also just eight years after publication of the gate control theory of pain by Ronald Melzack and Patrick Wall (*Science* 1965;150:971–9), and much more attention was being paid to both chronic and acute pain than ever before.

Dr. Bonica had been closely monitoring clinical and basic science publications for pain-related articles for a number of years and knew personally or knew of the people doing this work. It was his objective to have these key people as speakers at the meeting. The meeting would also be open to others interested in the field, and ultimately it would garner 102 speakers and 237 other delegates for a total attendance of 339. Seventy percent of delegates were from outside the Seattle area and from overseas (see the Appendix). Although there had been a small number of symposia on pain in the preceding years, none had brought together clinicians and basic scientists to try to “hash” things out. This was

¹The meaning of “Issaquah,” a word in the language of the Snoqualmie Tribe of North American Indians, has been lost although local historians think it might mean something about a bird, a snake, or a river (www.issaquahhistory.org/archives/isshistory).

Dr. Bonica's objective—getting the two sides of the coin to talk to one another.

First, he secured funding. Fortunately, the U.S. National Institutes of Health (NIH) had an interest and had begun to support pain research via the National Institute of General Medical Sciences (NIGMS) and National Institute of Dental Research (NIDR), both of which sent several delegates to the meeting. The Dean of the School of Medicine at the University of Washington, Dr. Robert Van Citters, was also supportive and provided a substantial grant for the meeting. Several pharmaceutical and medical equipment companies provided unrestricted grants.

Next was inviting the speakers. Dr. Bonica contacted the people he knew he wanted and got help from them in identifying speakers on topics with which he was less familiar. Somewhat to his surprise, hardly anyone turned down his invitation, and the program took shape quickly.

It seemed to me that the meeting got going smoothly once people had adjusted to the somewhat austere living conditions—small rooms, single metal beds, facilities down the hall—a university dormitory for the most part. Everyone seemed genuinely glad to see everyone else, and there was a positive attitude, even through the scientific arguments. There was appreciation of the opportunity to have unlimited access to one another, so often difficult to achieve at conferences and in the days before e-mail. The fact that

everyone was available most of the day to talk about science, medicine, or anything else made it a lively place both within and outside the formal sessions. I remember one delegate from Southern California telling me that the symposium was “like being at a party in Hollywood where all the biggest movie stars were present, in this case all the pain stars.”

A frightening moment came when one of the del-

egates from France fainted when Prof. Melzack showed a film that included an African tribal trephination procedure being done without an anesthetic. The delegate recovered without difficulty but couldn't believe that he had had such a severe reaction. It is likely that jet lag played its part here, a nine-hour time change from France.

In the evenings there were a few structured and many informal discussions that were easily



Representatives of NIH-NIDR at the Issaquah meeting. L-R: Aaron Ganz, Edward Driscoll, John J. Bonica, and Seymour Kreshover.

Photo: L.E. Jones, IASP Archives



Issaquah meeting delegates: David Bowsher and Marion C. Smith, both from the UK.

Photo: L.E. Jones, IASP Archives



Issaquah meeting delegates: Yohiro Kawamura, Japan, and James Mumford, UK.

Photo: L.E. Jones, IASP Archives

accommodated in the spacious surroundings. I must admit, however, that I did occasionally loan my car, a red 1966 VW Beetle, to some of the younger delegates who wanted to escape. Some found other forms of relaxation. Dr. Alexander Squire of St. John's, Newfoundland, obtained permission to play the beautiful pipe organ

in the chapel, and a number of us, including some of the nuns, sat there on several evenings enjoying the music. We also had access to the swimming pool, and Dr. James Mumford of Liverpool, always energetic, managed to organize swimming races for those of us crazy enough to participate. I actually did pretty



Issaquah meeting delegate: Basil Finer, Sweden.

Photo: L.E. Jones, IASP Archives

well in these races, largely because I was 15-20 years younger than anyone I was racing.

Meals were eaten together, cafeteria style, and were always lively. Sister Marguerite, the chief cook, originally from the town of Trois Pistoles, Quebec, was determined not only to serve good food but to make sure everyone cleaned his or her plate. I can remember her telling me how happy she was that "all these bigwigs seemed to enjoy the food so



Issaquah meeting delegate: Howard L. Fields, USA.

Photo: L.E. Jones, IASP Archives

much." And it was good food. She outdid herself the evening of the banquet by serving delicious prime rib roasts and supplying each table with a plate of bones to gnaw on once the carving was done. She was also pleased to accommodate Prof. William Noordenbos of Amsterdam and Dr. William Mehler of California when they returned from a fishing trip to the Pacific Ocean with a huge salmon and asked to store it in her refrigerator.

This setting, with its quirks and surprises, seemed to work as Dr. Bonica had intended: good science, good presentations, and good discussions. It was obvious at the end of the meeting that fertile seeds had been sown and that there was good will. On the last day there was unanimous approval for the proposals to start a journal dedicated to the field of pain and to start an international association to help support the journal and advance the study of pain and its treatment. There was also to be a book of the symposium proceedings.

Giving the new association a name required little discussion. It was agreed that "Study of Pain" should be part of the title, and the first suggestion was "World Association for the Study of Pain" with the acronym "WASP," which in English is an insect whose bite is quite painful. Unfortunately, in the United States "WASP" has another meaning stemming from the early days of the country that is not always positive: "White Anglo-Saxon Protestant." Thus, the word "International" was substituted, giving us the "International Association for the Study of Pain" of today.

“You Handle It”

It was the week after the close of the International Symposium on Pain, and I had innocently gone into Dr. Bonica’s office. My question to him was: “Now that it has been agreed to form an international association, what do we do next?” His response was simple and straightforward: “You handle it.” By then I had worked for him for six years and responded with my usual, enthusiastic, “OK.” Then I went to my office and stared out the window for a long time with my mind spinning. I had always appreciated the fact that he trusted me to get things done, but I had no idea of what we were getting into. But who doesn’t like a good challenge?

At the time I was working for the Department of Anesthesiology at the University of Washington as its Editor for Research Publications. Little did I realize that all those clinical and research papers

in anesthesiology and pain that I had been poring over for years would be of so much help in my IASP work. I discovered that I really did know a lot about pain, who the researchers were, and which were the most cited references, especially of early work in the field. This would make my work with the Congress scientific programs and with the IASP publications that were to come so much easier.

In many quarters, Dr. Bonica had a reputation for being “difficult.” Among other things, he was not able to keep office staff working for him very long. I seemed to be the exception, to the extent that once or twice I was called down to the personnel office at the medical school and asked why I was able to get along with him. When I was hired by the department, Dr. Bonica was traveling, and I was told by the manager that he had a strong Italian accent. I thought that was great because I enjoyed meeting foreigners; less than two years before I had spent seven months traveling in Europe. When Dr. Bonica returned to Seattle, I was ushered into his office. He started talking, and I started smiling. He asked why I was smiling and I said that I had been told he had a strong Italian accent but that it didn’t sound Italian to me, it sounded more like Brooklyn. To which he responded in a rather stern voice: “What do you know about Brooklyn?” I told him I was raised in the East New York section of Brooklyn as a child. It turned out that our house was less than a mile away from where his



Louisa Jones and John J. Bonica. This is the only photo I found that was just of Dr. Bonica and me. It was taken in 1986 in Stockholm, two years beyond the period of time covered in this booklet.

Photo: IASP Archives

sister, Mary, still lived and not much further away from where he grew up after immigrating to the U.S. at the age of 12 from Filicudi, Sicily. That was it—we had something important in common; there was never another question. We got along well most of the time and became good friends.

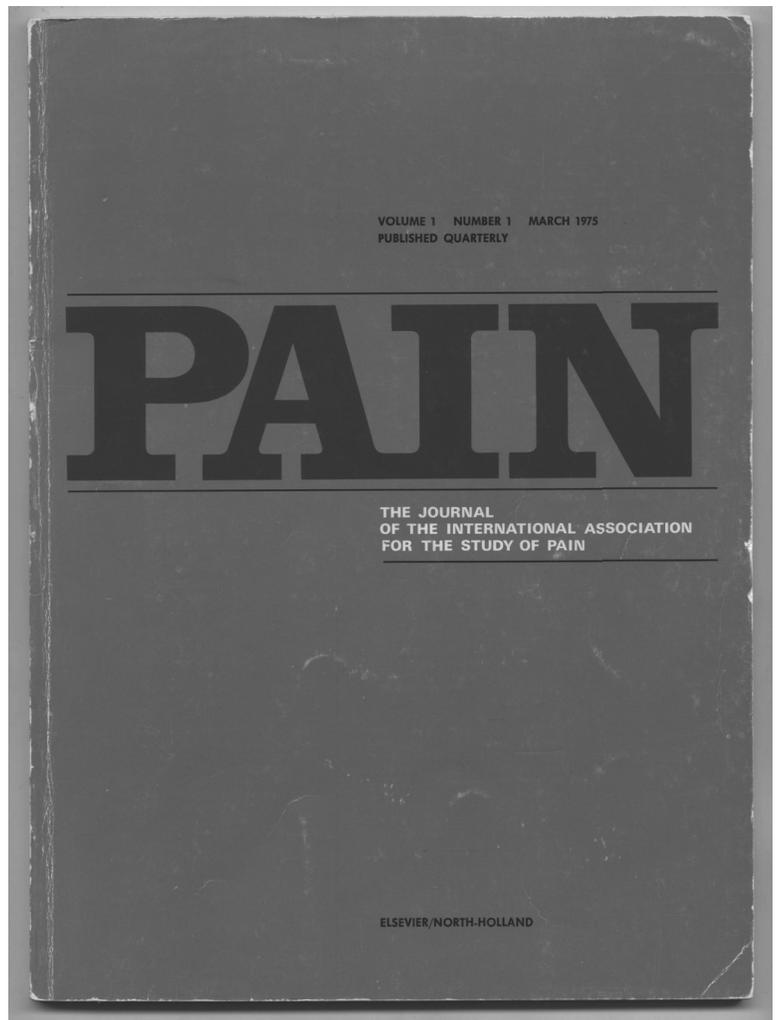
Changes were necessary in my work responsibilities, and Dr. Bonica made arrangements to adjust my workload to accommodate IASP on a permanent part-time basis. I became the IASP “Executive Secretary.” There was a small amount of money left over from the Issaquah meeting that would help pay the general expenses of the Association. Dr. Bonica arranged to pay my IASP salary from other funds to which he had access and to provide office space. This meant that at least for the first several years, IASP did not have to pay any salaries or rent. The value of this situation to the Association cannot be underestimated. With this arrangement, IASP was also able to use various University of Washington services such as the mailing center, copy center, and telephone, which came with substantial discounts.

For the first few months most of the administrative work involved follow-up communications with the Issaquah meeting delegates and requests asking them to help identify colleagues and others who were known to be interested in the field of pain. The list of names grew, and ultimately we had a mailing list for the initial membership drive. I can picture vividly the two wooden boxes and packets of 5 inch by 8 inch file cards purchased to create a record for each person; separate keypunch-type cards were required for the mailing label system. These boxes and cards were used until 1980, when we were fortunate enough to transfer everything to a mainframe computer.

Meanwhile, Dr. Bonica was working on a such things as editing the Issaquah Symposium proceedings book; working with Patrick Wall and Elsevier Science Publishers to arrange for starting the new journal, “*PAIN*”; and preparing for the first IASP Congress, which would be held in September 1975 in

Florence, Italy. By the end of 1973, IASP as an Association was beginning to take shape, and the membership was starting to grow. Dues for 1974 were set at \$25.00.

Shortly after the Issaquah meeting, a Council Pro Tem had been established for the purpose of identifying a Board of Directors for the Articles of Incorporation. Members were: John J. Bonica, MD; B. Raymond Fink, MD; John D. Loeser, MD; Harry D. Patton, PhD; Arthur A. Ward, Jr., MD; and Patrick D. Wall, DM. All were from the University of Washington except Dr. Wall. IASP was formally incorporated in Washington, DC on May 9, 1974. The bylaws of the World Federation of Anaesthesiologists (WFSA) were used as a general guideline, assuring international representation on the Board, and allowing for chapters but not incorporating IASP as a federation of chapters.



Cover of the first issue of *PAIN*, published in March 1975.

About the same time, arrangements for publishing *PAIN* were completed—no small undertaking. In 1973, before the Issaquah meeting, William Noordenbos in Amsterdam, working in conjunction with John J. Bonica and Patrick D. Wall, made initial contact with Elsevier, who were surprisingly enthusiastic about a journal dedicated to pain. General details for the journal were worked out in advance of the Issaquah meeting so that things would be more or less ready to go once approved at the meeting. Elsevier appointed an experienced copy editor, Elly Tjoa, to oversee production. The journal was to be published quarterly with 100 pages per issue, and the first issue was scheduled for March 1975. Elsevier was to own the copyright, and IASP would receive royalty payments based on several nonmember income categories. Patrick D. Wall was named Editor-in-Chief and was in charge of original articles; Dr. Bonica was in charge of review articles, Ainsley Iggo in charge of abstracts, and William Noordenbos in charge of book reviews and bibliography.

Professor Denise Albe-Fessard was named chair of the Scientific Program Committee for the First World Congress on Pain, and Professor Paolo Procacci became chair of the Local Arrangements Committee. On somewhat short notice, the Congress dates, originally scheduled for late August, were changed to September 5-9, 1975, after we discovered a conflict with a major European anesthesiology meeting.



Elly Tjoa of Elsevier, original copy editor of *PAIN* and long-time colleague of IASP.

PH: IASP ARCHIVES

The first IASP newsletter was published in December 1974. It wasn't elegant, but it reported all activity since the Issaquah meeting and fit IASP's financial limitations. By the end of 1974, IASP had 652 members from 42 countries. As I look back, this number seems remarkable for an association that was only about a year old; obviously, the interest and the energy were there awaiting an organization to be expressed.

The Journal and the First Congress

In these early years, most of the activity of the Association concentrated on the journal, preparing for the first IASP congress, and increasing membership. Efforts were made to draw the attention of basic scientists, clinicians, and medical librarians to the new journal, to attract quality papers, and to increase the number of readers. This effort was helped to some extent by a requirement in the publishing contract that all members of IASP receive the journal—thus supporting the journal financially from membership dues and growing the subscriber list. (Trainee members could opt to receive the journal or not.) Shipping the journal via air mail was limited to Australia, New Zealand, Canada, Japan, and the USA, and for all other countries it went by surface mail. Owing to overall financial limitations and postal regulations for printed matter/bulk mail, this was the best that could be done at the time.

Membership in the Association was climbing steadily, and by March 1975 IASP had 975 members from 49 countries. The last “founding member” was enrolled at the end of February 1975, and in 2010 there were still 113 members with that “founding” designation, remarkable after 37 years.

Second to launching the journal *PAIN* was the First World Congress on

Pain held in Florence, Italy, September 5–8, 1975. This meeting was to be a major learning experience for me. I had played a limited role in making arrangements for the Congress, most of which was done by Dr. Bonica working with a highly efficient meeting organizing company in Florence, by the Scientific Program Committee, and the Local Arrangements Committee. The Scientific Program Committee met twice, once in Paris at Prof. Albe-Fessard’s lab, and once in London in the PAN AM airways lounge at Heathrow Airport. Some time after that second meeting, IASP received a letter from PAN AM telling us that we would not be allowed to book



Members of the Scientific Program Committee and guests for the First World Congress on Pain in Florence. L-R: Denise Albe-Fessard, France, Chair; Carlo Pagni, Italy, two unknown persons, Jean-Marie Besson, France; Paolo Procacci, Italy; Jan Gybels, Belgium; and John C. Liebeskind, USA, having lunch outside Prof. Albe-Fessard’s laboratory in Paris.

Photo: IASP Archives

that facility in London again. They weren't specific, which made their rejection all the more intriguing.

I was only marginally involved in the production of the abstract book, but I did work directly with many of the speakers when it came to preparing manuscripts for the Congress proceedings book. In planning for 1978 and subsequent congresses, the IASP central office would assume the overall organizing role of the Congress and would work closely with the Scientific Program and Local Arrangements Committees. This was also the beginning of many years of my carry-on airplane luggage containing the speaker manuscripts that were to be published in the proceedings. These were the days before e-mail and express mail carriers, and it seemed the safest way to get papers back to Seattle. I often had a very heavy briefcase, which

would probably be overweight today. Manuscripts were collected at the Congress to assure they were submitted in a timely fashion because of the need to publish proceedings quickly. Reimbursement of speaker travel expenses was contingent on submission of a manuscript, a requirement that, I believe, still exists today.

Arriving in Florence two days before the Congress provided an opportunity to settle in and prepare for what would be a very busy week, starting every day at 6:30 a.m. when I met Dr. Bonica for breakfast. One evening, Prof. Paolo Procacci invited the Bonicas, me, and several others to his home for aperitifs. We entered a magical world. He had a collection of clocks, hundreds of them beautifully displayed, most not too large, some very small, and some very old. To hear him talk about various



Welcome Reception for the First World Congress on Pain, held at the Palazzo Vecchio in Florence, Italy.

Photo: Foto Torrini, Firenze

pieces was to be enthralled because his knowledge of the arts and history was extensive. I had been in Florence before and had had plenty of time to take in as much as one could without being overwhelmed; his collection added to the experience in a very special way.

The 1975 Congress was the first time the members of IASP would gather as one group. It got off to an elegant start with a reception at the Palazzo Vecchio hosted by the Mayor of Florence, and delegates were given an opportunity to visit parts of the historic building not ordinarily open to the public. Being in Florence was a treat in itself, and we were fortunate to have good weather for the Congress days.

There were 750 registered delegates, and 250 papers were presented, either as plenaries or slide presentations. Not big by today's standards, but it was the largest meeting up to that time dedicated solely to the topic of pain. There was an aura of excitement, camaraderie, and purpose, and every session was well attended. Complete details of the scientific program are available in archived IASP publications. To assist the Congress, the U.S. National Institutes of Health had provided a grant of \$14,700.

Special for me at the Congress was the opportunity to see again many of the people I had met in



Dr. Bonica (seated) greeting Dr. Mizota, Congress delegate from Japan.

Photo: Foto Torrini, Firenze

Issaquah and to meet some of Dr. Bonica's European friends and others he often spoke about. Because all of IASP's communication in the early years would be done by mail, now called "snail mail," it was important for me to meet as many members as possible face to face. In addition, I wanted to make a good impression. Some things must have been going well, because a number of years later I received a surprise compliment from Prof. David Ottoson from Sweden, who said he thought IASP was one of the best-run societies he had ever belonged to.

The main social event of the Congress was a dinner at the Villa di Mezzomonte, dating from the 16th century, in the Tuscan hills. Unfortunately, things went awry when the food ran out before everyone had eaten, most likely due to the fact that it was served buffet style. However, the catering staff came to the rescue by providing plenty of good Italian wine. Some people were fuming and left (requesting a refund the next day—which, of course, was given). Others stayed and had quite a nice time. One of the pictures I have in my mind is of Yngve Zotterman from Sweden, probably about 75 years old by then, in a white linen suit encouraging everyone to look at the



Congress breakout session. L-R: Fausto Molina, Argentina (at microphone), Raymond Houde, USA, William Beaver, USA.

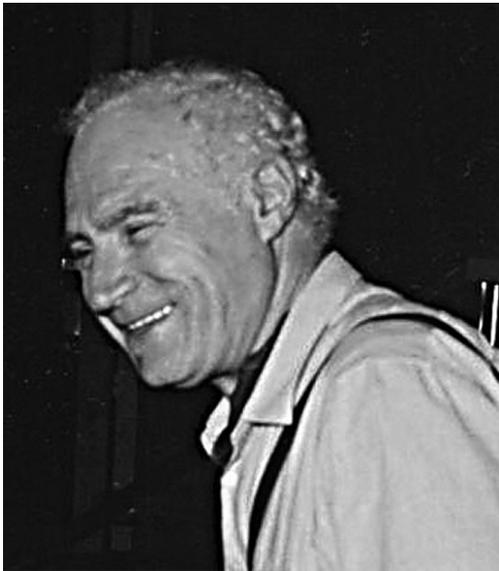
Photo: Foto Torrini, Firenze



Dr. Bonica (seated) with his friends from Brazil, Nelly and Sergio Paes Leme, and Emma Bonica (right) at the Congress welcome reception.

Photo: Foto Torrini, Firenze

bright side of things. I was on one of the last busses to leave the villa, and there were only two people on the bus, not including the bus driver, who were not inebriated—Rolf Nordemar from Sweden and I. Over the years at IASP Congresses we have had a good laugh about that experience. Suffice it to say, I learned a lot about Congress banquets that day, but not enough to prevent problems here and there



Vittorio Ventafridda, Italy. Co-organizer of the one-day Symposium on Cancer Pain that followed the First World Congress on Pain.

Photo: IASP Archives

at subsequent Congresses. Eventually, as the IASP meetings got larger, catered food prices skyrocketed, and selecting appropriate entrees for international guests became more complicated, IASP abandoned the idea of a Congress banquet.

The Congress was followed by a one-day symposium on cancer pain, another first. It was organized, I believe, by Vittorio Ventafridda of the National Cancer Institute in Milan and Kathleen Foley of Sloan-Kettering Memorial Hospital in New York. The symposium, which was supported in part by the National Cancer Institute of the USA, attracted a surprising 150 delegates, leaving standing room

only. Among other things, the meeting was a catalyst for the booklet *Cancer Pain Relief*, published by the World Health Organization (WHO) in 1986, which included the first cancer pain ladder.



Kathleen Foley, USA. Co-organizer of the one-day Symposium on Cancer Pain that followed the First World Congress on Pain.

Photo: Steve Schneider, Seattle

The Congress was also the time of the first IASP business meetings, two General Assemblies of Members, both well attended. A total membership of 1,304 and a fund balance of \$38,347 were reported.

By 1975 IASP began to see the formation of chapters, as provided for in the Articles of Incorporation and Bylaws, and a number were approved at the Congress: Argentina, Eastern Canada, France, German Speaking, The Netherlands, Northeastern USA, and Western USA. Several chapters were in formation: Italy, Japan, Scandinavia, and Southern USA. In the United Kingdom, the Intractable Pain Society, made up of physicians, primarily anesthesiologists, had been in existence for a number of years, and work began to develop a more comprehensive society that would include basic scientists and non-physician clinicians, evolving into today's British Pain Society. Over the ensuing years, many other chapters were formed, and in the USA and Canada, the regional groups joined together to form national societies. The German Speaking group

eventually divided up into three national societies, and within the past several years, the Scandinavian chapter has divided up into national societies. At this writing in 2010, there are 83 chapters, of which 24 are in formation.

Another important event in 1975 was the election of the first IASP Council. Nominations had been solicited from the membership by mail, and ballots were circulated at the First General Assembly, collected and counted, and the results announced at the Second General Assembly. Listed below is the first IASP Council. Lists of other Council members elected over the years are readily available in archived IASP documents. The Vice-Presidential positions were to ensure wide geographical representation and the Councilor positions to ensure both wide specialty representation and geographical representation.

President:	Denise Albe-Fessard, DSc, Physiology, France
President-Elect:	John J. Bonica, MD, Anesthesiology, USA
Vice Presidents:	Yojiro Kawamura, MD, DDS, Dentistry, Physiology, Japan Ronald Melzack, PhD, Psychology, Canada Fausto Molina, MD, Anesthesiology, Argentina William Noordenbos, MD, PhD, Neurosurgery, The Netherlands Paolo Procacci, MD, Internal Medicine, Italy Joseph O.A. Sodipo, FFARCS, Anesthesiology, Nigeria Sir Sydney Sunderland, MD, DSc, Neurology, Australia
Secretary:	B. Raymond Fink, Anesthesiology, MD, USA
Treasurer:	Louisa E. Jones, BS, USA
Council:	Aaron Y. Beller, MD, Neurosurgery, Israel Jean-Marie Besson, DSc, Pharmacology, France Ronald Dubner, DDS, Neuroscience, USA Dieter Gross, MD, Neurology, Germany Ainsley Iggo, PhD, DSc, Physiology, United Kingdom Jean Lassner, MD, Anesthesiology, France John C. Liebeskind, PhD, Psychology, USA Ulf Lindblom, MD, Neurology, Sweden John D. Loeser, MD, Neurosurgery, USA William R. Mehler, PhD, Neuroscience, USA Carlo A. Pagni, MD, Neurosurgery, Italy Richard A. Sternbach, PhD, Psychology, USA Ladislav Vyklicky, MD, DSc, Physiology, Czechoslovakia Hideo Yamamura, MD, Anesthesiology, Japan

Another first in 1975 was the election of Honorary Members, acknowledging “persons who have made important contributions to the field of pain.” Several of the inductees were already members of IASP, as indicated with an asterisk (*). They would receive formal acknowledgement at the 1978 Congress in Montreal:

Lord Adrian, Physiology, UK
 F.A.D. Alexander, Anesthesiology, USA*
 Henry K. Beecher, Anesthesiology, USA*
 V. N. Chernigovsky, Physiology, USSR
 Derek Denny-Brown, Physiology, USA
 James D. Hardy, Physiology, USA*
 Ernest Hilgard, Psychology, USA*
 Cyril A. Keele, Physiology, UK*
 Zednec Kunc, Physiology, Czechoslovakia
 Janos Szentogathai, Neurobiology, Hungary
 Ugo Teodori, Internal Medicine, Italy
 James C. White, Neurosurgery, USA*
 Yngve Zotterman, Physiology, Sweden*

Sadly, of this first group of Honorary Members, all have passed away, the earliest, Henry K. Beecher, who died in 1976, and the most recent, Ernest Hilgard, who died in 2001 at the age of 97, having published a revised edition of his book, *Hypnosis in the Relief of Pain*, in 1994. The Internet is most helpful in learning about their contributions to the pain field. I recently looked up James D. Hardy and found his story full of surprises and quite wonderful. IASP has kept up this tradition of recognizing important contributors to the field of pain and has welcomed new Honorary Members over the years.

Final actions at the second General Assembly were approval of Bylaws and announcement of the next IASP Congress. This was to be in Montreal in

August 1978, with Ronald Melzack chair of the Local Arrangements Committee and John C. Liebeskind chair of the Scientific Program Committee.

At the end of the day, when the Congress activities were over, just when it was time to go out for dinner with friends, I learned from Dr. Bonica that an NIH grant deadline had to be met and some pages had to be typed. I was able to borrow an ancient manual typewriter from the hotel and used a rubber band for an eraser. Somehow I got it done, although I was quite distressed as I worked on it. The last step was to meet someone from NIH, whom I had met only in passing during the Congress, at the main train station at 9:00 a.m. the next morning. Somehow I met the deadline and actually found the person I was looking for. He was as surprised as I was. Remembering this today in 2010 makes me smile.

But that wasn't the last of my interesting experiences in Florence. As we were leaving the hotel, Dr. Bonica gave me a small suitcase that contained his tuxedo, asking me to carry it back to Seattle because he and his wife were going on vacation and he didn't want to lug it around. He didn't ask what my plans were or realize that I was already carrying back the manuscripts for the proceedings book or that I, too, was going on vacation for a few days, visiting my sister in Tübingen, Germany. To this day I have no excuse for not standing up for myself and saying “no,” except that “no” was not a word he liked to hear. Dr. Bonica had been a professional wrestler for a period in his youth, and I often heard others refer to this type of experience as the “neck hold”; he simply waited for the muscles to relax and knew he had won.

IASP Council Begins Its Work

Returning to Seattle after the Congress was an anxious time for me. There had been some unusual stresses in the office, especially as Dr. Bonica was beginning to wind down his period as chairman. The administrative staff had made things difficult for some of the staff who worked most closely with him, me among them. As a result, about six months before the Florence Congress I had decided that I would see things through the Congress but would resign from my position once back home. It was obvious that I did not yet have a picture in my mind of what IASP was or what was it to become. Much to my surprise, when I got back to Seattle the person who had been causing most of the difficulty had resigned. My problem was solved, and I gladly stayed on. I must have been quite elated because within a month's time I had gone out and bought a house (the same one that many IASP members have visited over the years).

IASP activities begin to fall into a three-year cycle, i.e., the period between triennial world congresses. This time-frame would provide good spacing based on the premise that ideas and research presented at one congress needed sufficient time for work in order to present advances at the next Congress. In the very early years the congresses themselves helped researchers meet those who were doing similar work. I can recall any number of times when someone from Europe would tell me excitedly that they had met someone from New Zealand or elsewhere who was doing the same research and neither knew it. It's important to keep in

mind that this was a period when the pain clinical research literature, especially outside the fields of anesthesiology, neurosurgery, and psychology, was limited and difficult to locate in the many journals published, i.e., the days before ready access to Medline and PubMed. The journal *PAIN* would begin to help with this problem, as would formal publication of IASP Congress abstracts and proceedings with referenced articles.

Council meetings were to be annual, and urgent matters coming up during the year would be dealt with by air mail correspondence (these were still the days before faxes and e-mail). Even when faxing capability became available, not all Council members had access, and when they did it was often available only through the university library or some other university office and was expensive. IASP would reimburse travel to the Council meetings, but it was always at APEX (discounted) air fares or the lowest possible travel rates. Council members were considerate of the Association's limited finances and did the best they could, sometimes not requesting reimbursement.

Professor Vittorio Ventafridda suggested Milan, Italy, as the venue of first full IASP Council meeting, which was held there in 1976 at the Hotel Michelangelo. Although much was covered at this first Council meeting, only a few items, emblematic of IASP's and the pain field's growing pains, are highlighted. At the outset, Dr. Bonica, then President-Elect, stressed that in the early years the main responsibilities of Council would be to

develop the organizational framework and policy guidelines necessary to making IASP useful to its members in pursuit of the objectives of the Association. That doesn't sound exciting, but it was vital. Making everything work from then on became the real job and achievement. IASP was truly starting from scratch at this stage, and part of getting going was the establishment of standing and *ad hoc* committees. It was a tremendous benefit to IASP that most of those elected to Council had experience in leadership of their own national specialty societies and in some cases other international medical or scientific societies.



IASP's First Council Meeting, Milan, Italy, 1976. L-R: Aaron Beller, Israel; Hideo Yamamura, Japan; Jean-Marie Besson, France.

Photo: L.E. Jones, IASP Archives

Only a year-and-a-half since beginning publication, the journal *PAIN* was already bursting at the seams, and the first of several increases in size was implemented, as it changed from a quarterly to a bimonthly journal—a 50% increase in pages. A "Section on Clinical Problems" was added with John D. Loeser as chair. Meanwhile, Elsevier had agreed to publish the *IASP Newsletter* three times a year as an insert to *PAIN*. This was a godsend to the fledgling IASP budget as the international membership of the Association grew steadily and postage costs for timely mailings were high. Because of the increase in journal size, membership dues were increased to \$50.00.

The President reported that the National Cancer Institute of the USA was now supporting pain research and planned a study on the epidemiology



IASP's First Council Meeting, Milan, Italy, 1976. L-R: John Loeser, USA; Sir Sydney Sunderland, Australia; Fausto Molina, Argentina; Paolo Procacci, Italy; Joseph Sodipo, Nigeria; Richard Sternbach, USA.

Photo: L.E. Jones, IASP Archives

and incidence of cancer pain and methods of therapy. Five centers in the USA, the National Cancer Institute in Milan, Italy, and St. Christopher's Hospice in the UK would be participants. The one-day Cancer Symposium in 1975 following the IASP Congress was probably a contributor to this endeavor. It was also noted that increasing numbers of pain-related meetings were being held elsewhere. Organizers of some of these meetings began requesting IASP support or sponsorship. The fact that such requests were made to IASP was an indication that others were beginning to take notice of the Association and that IASP was being recognized as a leader



Council Dinner in Milan, Italy, 1976. L-R: Dieter Gross, Germany; Louisa Jones, USA; Ainsley Iggo, UK.

Photo: IASP Archives

in the pain field. Over the years, based on strict criteria, IASP did provide sponsorship—in name only—to a number of such meetings. At no time,

however, did IASP provide funds or pay for speaker travel, etc., to help finance these meetings.

Around this time, the American Society of Anesthesiologists (ASA) had undertaken to do a "Survey of Pain Clinics," the first of its kind, and had asked IASP to participate by circulating a questionnaire to its members in the USA. This was done as an insert to an *IASP Newsletter*, and members were asked to cooperate and return forms to ASA. The first edition of the *ASA Pain Clinic Directory* was published in 1979.

At the end of a long day's Council meeting, and without denying the tedium of board meetings, there is no better antidote than having a nice meal together—something we all looked forward to. At that time many Council members knew one another by name only, after very brief meetings in Florence, or from professional publications and other sources, and these dinners and related gatherings became an opportunity to get to know people. It was always relaxing, and that first Council meeting dinner in Milan, with good Italian food and wine, was a harbinger of things to come.

During that period, on the way home from Europe I was able to visit the headquarters of the Society for Neuroscience in Washington, DC. The Society had been started in 1969, several years prior to IASP, and the Executive Director, Marjorie Wilson, had graciously agreed for me to visit to get an idea of how their office was run. This was invaluable because I was able to compare the various protocols, filing systems, etc., I had set up for IASP with what was working well for them. I was glad to see that in most areas I was on the right track; in a few others I learned much. I was always grateful for that opportunity.

Meanwhile back in Seattle, the IASP office was busy, and part-time clerical staff had been hired to work on the record-keeping required for the ever-growing membership—by now 1,330 members. IASP had its own bank account, had rented a postal meter for the day-to-day mail for which we couldn't use the University system, and was processing dues payments using an old electric Olivetti adding machine. Deposit slips were typed in duplicate, and trips to the bank were done on

a weekly basis. Occasionally dues payments were in the form of UNESCO coupons or Western Union payments, the processing of which was a interesting exercise. I can remember the sound and slowness of that Olivetti and thinking it would be a luxury to spend IASP money on a new Texas Instruments electronic calculator. Eventually we did get one, but only several years later when prices had fallen and our accounting needs had increased. It probably was a false economy on my part to wait so long. As a child I had watched my mother write down in a small booklet every cent she had spent that day. Some of this must have rubbed off on me because I was determined that every IASP penny be spent wisely and be carefully accounted for.

By 1977, IASP was functioning efficiently. The publication of the journal *PAIN* had definitely helped put the Association on the map and was influential in bringing in new members. The 1975 Congress had whetted the appetites of many.

The 1977 Council meeting was held in early September at the Sporthotel in Igls, Austria, just outside Innsbruck. A new feature was to hold the Council meeting after a chapter scientific meeting, in this case the German Speaking Chapter meeting held in Innsbruck that year. This concept would evolve to enable chapters to have some Council members as speakers at their scientific meetings. Because IASP was already paying the travel costs to Council meeting, chapters would have to pay only for a day or two of hotel accommodations for the speaker. Many chapters were able to benefit from this program over the years and beyond the period reported in this booklet, including, but not limited to, Japan, Argentina, Scandinavia, Hungary, Czech Republic, Slovenia, Lithuania, and Poland.

A number of other important items were dealt with—matters that continued to shape the Association. Administratively, there were some changes at the IASP headquarters office, the most significant being that IASP would have to start paying half of the executive secretary's salary in 1978 because Dr. Bonica was stepping down as Department Chair. Up to this time, he had provided non-IASP funds for my salary in order to help IASP get on its feet financially. At this time I was still working half-time as



IASP Council Meeting, Igls, Austria, 1977: *First row* L-R: Aaron Beller, Israel; Joseph Sodipo, Nigeria; Fausto Molina, Argentina; Denise Albe-Fessard, France, IASP President; Yohiro Kawamura, Japan; Richard Sternbach, USA; John Bonica, USA; Paolo Procacci, Italy. *Second row* L-R: Ladislav Vyckicly, Czech Republic; Cox Noordenbos, The Netherlands; Sir Sydney Sunderland, Australia; Louisa Jones, USA; Mary Ellen Jeans, Canada; unknown. *Third row* L-R: William Noordenbos, The Netherlands; Ulf Lindblom, Sweden; Berit Lindblom, Sweden; Ainsley Iggo, UK; B. Raymond Fink, USA; John Liebeskind, USA; John Loeser, USA.

Photo: Karen Loeser, IASP Archives

Editor for Research Publications in the Department and would keep this 50-50 split for several more years. Office space would continue to be provided at no cost to IASP for a limited period of time.

The 1975 Congress in Florence had attracted about 750 delegates, but already there was so much interest in the Montreal meeting scheduled for August 1978 that there was concern it might be necessary to cap registration due to room size for plenary sessions. There were also concerns about the effectiveness of really large meetings. As it happened, neither was a problem. Poster sessions were to be included for the first time, and the procedure of member sponsorship of abstracts, with only one sponsorship per member, was initiated. Both have become important features of subsequent congresses. In 1977, poster sessions were largely a North American phenomenon, Europeans and others being more accustomed to short slide presentations. Although IASP kept slide sessions in the program for several more congresses, gradually the posters took over. Once people were accustomed to them, posters became popular because they enabled delegates to speak with authors informally, they were

available for viewing for longer periods of time, and they made presentations much easier for persons who were not native speakers of English, official language of the Congress.

An IASP logo was discussed. Initially, IASP had adopted the outlined globe logo familiar to many members but had intended it to be temporary. In 1976 an Ad Hoc Committee on Logo had been established with members Paolo Procacci, Dieter Gross, William Noordenbos, and Richard A. Sternbach. Via the *IASP Newsletter*, members had been invited to submit logo ideas. A number of designs were submitted, but the committee ultimately rejected them as being too specific to a culture, country, or region for an international society. Submissions included ideas such

as Androcles and the Lion, a lotus blossom, and the Laocoön. So, IASP continued with the familiar globe. New Zealanders often complained that you could hardly find their country on our globe, and I had to apologize for that more than once. The original logo was replaced in 2009 with a stylized globe.

This Council also attempted to deal with the growing problem of membership for persons in countries with currency exchange restrictions who could not pay their membership dues in U.S. dollars, a problem that would persist for years. It was especially complicated because IASP had to pay Elsevier for members' journal subscriptions. Initially, the solution was for such members to pay dues in their own currency and keep them on account locally to be used to pay the expenses of official IASP visitors or other activities authorized by IASP. This strategy never worked well, and although discussed at a number of subsequent Council meetings, good solutions were elusive. However, things began to change after 1989, and now in 2010, except for a few isolated instances, most of these problems have been solved, in large part by online access to the journal *PAIN*.

Following concerns that the IASP membership application form was insufficient for judging qualifications for election to membership, Council agreed that the process be changed to require letters of reference from two IASP members. There must have been a sense in those early days that the “wrong” people might get into the Association, although personally I never understood who those people might be. I remember the extra paperwork that this required at the IASP office, writing people about missing letters, letters coming from nonmembers, and so on, all of which involved electric typewriters and regular postal systems. Once all the papers were in, they were circulated to the Membership Committee, also by mail. It sometimes took months for a membership to get started. Over the years, these regulations were modified, first to one letter of sponsorship, then to a sponsor only having to sign the application form or sending a separate e-mail or letter, then to streamlining the information sent to the Membership Committee. This was also the time that several new categories of membership were added, including Trainee Member, Retired Member, and Life Member (which applied only to IASP Past-Presidents).

By now more chapters were in formation, including in France, Scandinavia, and Poland. The Polish chapter president, Dr. Lewinski, requested that we send *PAIN* subscriptions to the 11 Polish medical schools rather than to individual members, who were supported by the mechanism discussed earlier, and that proposal was agreed to. This was an important recommendation and the beginning of our efforts, working with Elsevier, to send the journal free of charge to medical libraries worldwide in developing or currency-restricted countries. It reminded me how important it is to listen to input from the people who are directly affected by certain policies or practices.

Financially, there were some first-time statistics for IASP:

First Congress surplus: \$17,943 from the 1975 Congress (compared to over \$500,000 surplus from the recent congresses)

First royalty earnings for *PAIN*: \$748 (DFI 1,810.52) for 1976 (compared to more than €1,000,000 in the current publishing contract)

Fund balance of \$72,310 (compared to IASP’s current assets of several million USD)

It was difficult to leave Igls and its beautiful setting high in the Alps with perfect August weather. During the meeting days, we had taken advantage of this good fortune by adjusting the meeting schedule to allow longer lunch breaks and then working later in the day. I can remember during one of these breaks going on an easy hike with Sven Andersson and Ladislav Vyklicky. The trail traversed, rather than climbed, the mountain, and it was a delightful change of scene for us, plus a nice opportunity to simply visit. So many Council meetings in subsequent years were sprinkled with small breaks and activities like this, which we all appreciated.

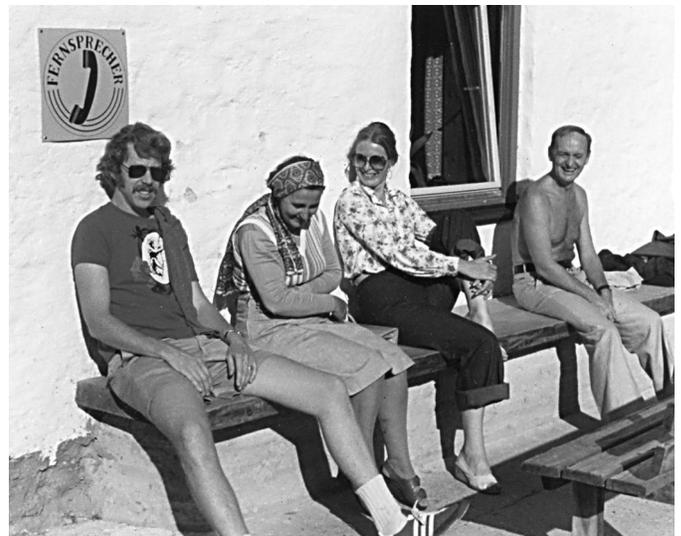


Fig. 4-5. Sunbathing after a hike, Igls, Austria, 1977. L-R: Howard Fields, USA; Betty Iggo, UK, Karen Loeser, USA; Jan Gybels, Belgium.

Photo: John Loeser

A special treat for me was when Dieter Gross invited me to dinner one evening at the home of some friends of his, an elderly couple who lived in one of the grand old buildings in Innsbruck. My German was far from fluent, but somehow they overlooked that, and I have always remembered how they welcomed me, a complete stranger, to their home.

The First Montreal Congress, 1978

When I was in high school, although I lived with my aunt in the Seattle area, my parents and five siblings still lived in Brooklyn. I would save up my earnings from babysitting in order to go home for the summer. The least expensive way to travel was by train, and by the time I graduated from high school in 1958 at the age of 17, I had determined that the best route was via Canadian National Railways (CN), which had a direct train from Vancouver to Montreal. It was the most scenic, went the farthest north, and was a five-day trip. In addition to the scenery, I got little sleep (not having a berth), and it's where I learned to play poker. In 1958, the CN's Montreal train station was directly beneath the newly built Queen Elizabeth Hotel. I remember wishing that some day I would be rich enough to stay overnight in such a grand place (instead of napping in the train station waiting for another train to take me from Montreal to New York City).

It was now 20 years later, 1978, and IASP's Second World Congress on Pain was being held at the very same Queen Elizabeth Hotel. I was not involved in the choice of this venue, and to this day I marvel at how things happen and how unpredictable they are, and that sometimes wishes come true.

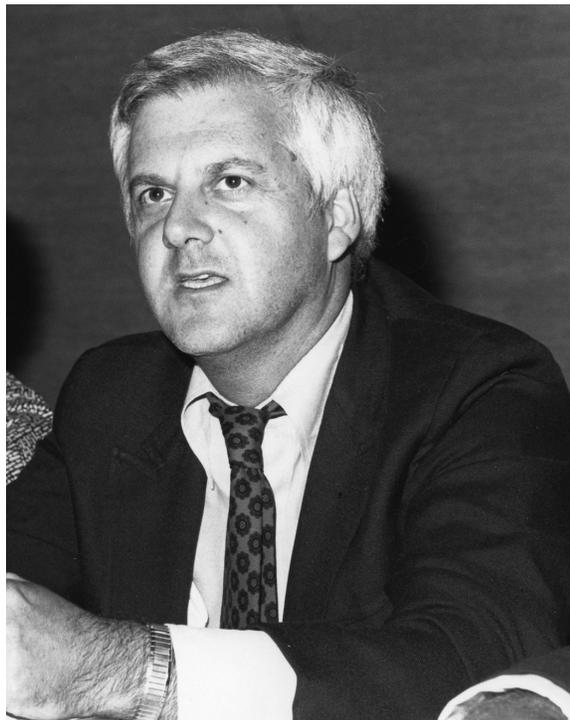
The 1978 Congress became my primary IASP responsibility, handling the overall organization and working with committees and speakers. Ronald Melzack was chair of the Local Arrangements Committee and had recommended that we hire the conference organizing office at McGill University

to serve as the Congress Secretariat. We couldn't have done better. I remember, fondly, working with Charlotte BenAbdellah and Joan Gross from that office to shape our meeting. The Scientific Program Committee was chaired by John C. Liebeskind, and the program and plenary topics were very well received. There were few glitches at the Congress, although a strike by the carrier, Air France, prevented



Second World Congress on Pain, Montreal, 1978. Ronald Melzack, Chair of the Local Arrangements Committee.
Photo: IASP Archives

one of the plenary speakers and several delegates from France from getting to Montreal in time. There were over 1,100 registered delegates.



Second World Congress on Pain, Montreal, 1978. John C. Liebeskind, Chair of the Scientific Program Committee.

Photo: IASP Archives

There were 350 free communication abstracts submitted, a good number. For this Congress we began a process of publishing the abstracts as a supplement to *PAIN*, a policy that would be in effect for at least the next two Congresses after Montreal. For one thing, it would help make the abstracts easier to locate for reference purposes, and it would also reduce the costs for printing and publishing. The plan was to publish the abstracts sufficiently in advance of the Congress so that members would receive them in the mail before departing for Montreal and would bring them along. Additional copies would be on hand for nonmembers to receive when they checked in at the Congress. Like many plans, it had its problems: members forgot

to bring the abstract books along and demanded another copy when they checked in; some members, especially those outside Europe who did not get the journal by air, didn't receive them in time; also, the plan pushed back the deadline for submission of abstracts to an unusually early date, which put pressure on the Scientific Program Committee. Nonetheless, everyone survived. By the 1981 Congress we knew what needed to be changed in the process and that we had to print a substantial number of extra copies.

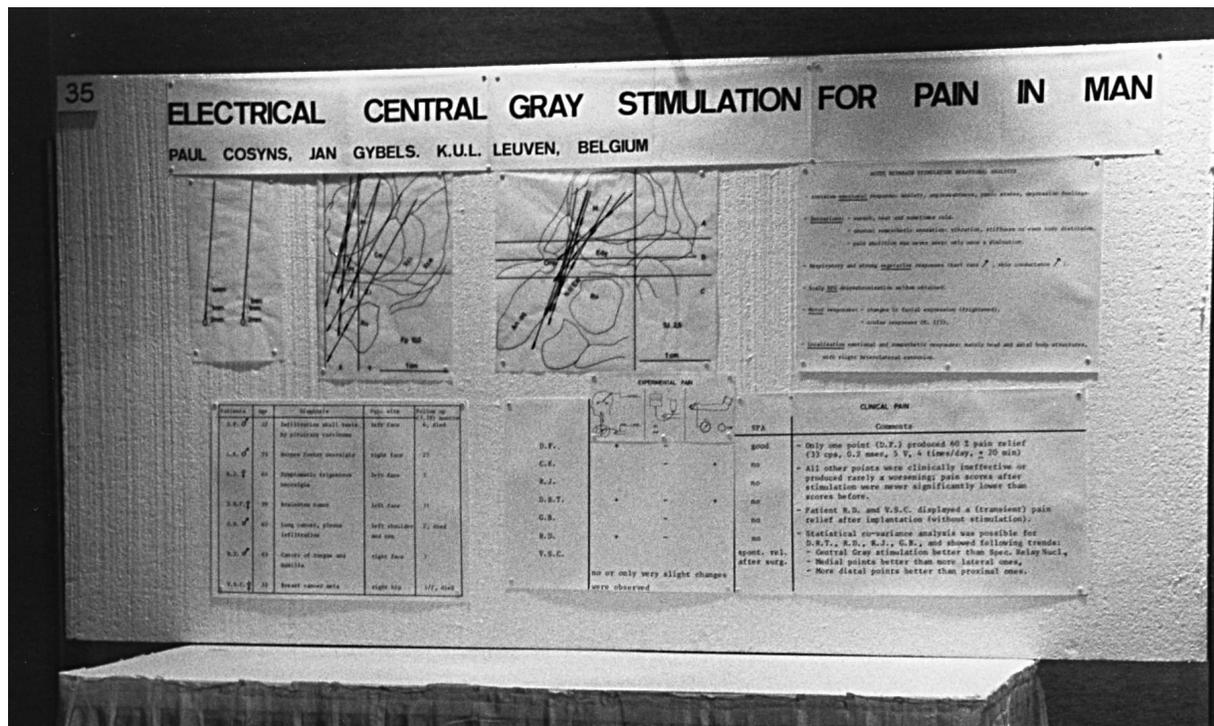
There were a number of IASP firsts at this Congress. Breakfast sessions were instituted, 20 of them, all fully subscribed. The cynics said that only anesthesiologists and neurosurgeons would attend these sessions because they were the only ones accustomed to getting up so early, but others came as well. For the first time we used a poster format for some of the free communications, which, as mentioned earlier, proved popular. There was also a bit of fun with posters. Someone presented a poster on "ice cream headache," and the next day in the lounge area a spoof on that topic appeared with a hastily put together poster on "Raskins and Bobbins cucumber chip ice cream," all done in good fun by UK delegates.

IASP had hired press consultants, Eugene and Estelle Kone, to set up and manage a press room



Second World Congress on Pain, Montreal, 1978. IASP's first attempt at breakfast sessions to start the Congress day. The only person I can identify in this photo is the third person on the left, Arthur Battista, USA.

Photo: IASP Archives



Second World Congress on Pain, Montreal, 1978. IASP's first attempt at poster sessions. Fortunately, the archives have this one photo.

Photo: IASP Archives

during the Congress. This was done in conjunction with the IASP Ad Hoc Committee on Public Information, chaired by Dr. Elie Cass, and involved registering press representatives at the meeting, scheduling press conferences with IASP principals, and arranging interviews with speakers. As part of this activity, lay language versions of the plenary speaker abstracts were prepared in advance, an important component of helping the media understand complex scientific and medical information. Press representatives were also given the Congress abstract book. This was also when it became obvious that there would always be some topics that were "hot" for the press, although maybe not the same topics that the Scientific Program Committee would have identified as such. Often the speakers on those "hot" topics were unprepared for the barrage of press queries, which clued in IASP to the need to identify in advance and inform the press at a pre-Congress press conference what some of the major topics would be and why they were important. It also led to the idea of developing a set of guidelines for speakers and others about how to communicate with the press. The Committee on Public Information eventually prepared a booklet

for this purpose, published in 1983, entitled *How to Tell the World about Pain, a Public Information Handbook for the Scientist Engaged in Basic Research or Clinical Practice*. A copy was provided to Council members and to IASP chapters and was available at the IASP office as needed. I personally thought it a useful document, but I do not recall much feedback from those who received it.

IASP Election results were announced at the General Assembly of Members with Ainsley Iggo, the new President-Elect, to take office in 1981 and John J. Bonica, former President-Elect, taking over as president. It was also announced that the 1981 Congress would be held in Edinburgh. The sites for the first five Congresses were recommended by Council members who were willing to serve as chair of the Local Arrangements Committee, and Council agreed to these recommendations. However, due to varying circumstances, venue changes had to be made for the fourth and fifth Congresses, 1984 and 1987, respectively, and from then on I was actively involved in site selection for all future congresses. Council would recommend sites, I would go on site inspections, and I would recommend my selection to Council.

One of the highlights of the General Assembly of Members was the presentation of hand-cast bronze medallions to the first group of IASP Honorary Members: F.A.D. Alexander, Derek Denny-Brown, James D. Hardy, Cyril A. Keele, Zednek Kunc, and James C. White. Unable to attend were V. Chernogovsky, Ernest Hilgard, Janos Szentogathai, Ugo Teodori, and Yngve Zotterman. There was a moment of silence for Lord Adrian and Henry K. Beecher, Honorary Members who had passed away since the 1975 Congress.



Second World Congress on Pain, Montreal, 1978. The first IASP Honorary Membership awardees. L-R: James C. White, USA; Derek Denny-Brown, USA; Denise Albe-Fessard, IASP President; Zednek Kunc, Czech Republic; James D. Hardy, USA; F. A. Duncan Alexander, USA; Cyril A. Keele, UK. Missing from the photo are: Lord Adrian, UK; Henry K. Beecher, USA (deceased); Vladimir N. Chernigovsky, Russia; Ernest Hilgard, USA; Janos Szentogathai, Hungary; Ugo Teodori, Italy; and Yngve Zotterman, Sweden.

Photo: Luc Janssens, Merced, CA

I have special memories of James C. White, co-author with William Sweet of *Pain and the Neurosurgeon*, published in 1969. He was in his eighties at the time of the Congress and was attending sessions, so I tried to watch over him a bit. Exiting a plenary lecture by Tony Yaksh, he said to me, "I know that young fellow gave a marvelous lecture, but I couldn't understand a word of it." (Those of us who remember Tony Yaksh in the early days, and this is stated with great affection, know that Tony spoke English faster than anyone else we knew.) Later that day, Dr. B. Raymond Fink and I were having a light dinner in the hotel café when I saw Dr. White, alone, heading for the elegant dining room.

We invited him to join us, and we ended up the beneficiaries of some wonderful stories from his youth.

The Local Arrangements Committee outdid itself with a hospitable opening reception, at which delegates were welcomed by the Canadian Minister of Health, the Honorable Monique Bégin. There was an equally enjoyable Congress banquet, the highlight of which was the showing of two award-winning short films by Canadian artists. The most delightful was a French Canadian film chosen specifically to honor the first IASP President, Prof.

Denise Albe-Fessard, with which she was truly delighted.

Beginning in 1978, Council meetings in Congress years were held immediately before the start of the Congress, a policy that would be in effect up until the 2005 Congress. As in 1975, IASP had applied for and received a grant from NIH to help support the 1978 Congress. Dr Bonica deemed it to be the last of such support, intended by NIH as seed money to help IASP Congresses get started. Future IASP Congresses would have to be entirely self-supporting. Several satellite meetings had been organized by others prior to the Congress, but in some cases they overlapped in dates with the Council meeting or with the Congress opening day. Among other

things, this overlap prevented Council members from participating in such satellite meetings or delayed their arrival at the Council meeting if they did participate—not a good situation in either case. Guidelines were put in place to assure that in the future congresses satellite meetings be timed to not conflict with attendance at scheduled meetings of the IASP Congress, its Council, or its committees. This policy remained in effect until 2002, after which the timing of Council meetings was changed to several months after the Congress in order to include those newly elected to Council. The change was also partially in response to the large number of satellite meetings being organized by IASP Special Interest Groups.



Second World Congress on Pain, Montreal, 1978. Breakout Session. Tony Yaksh, USA.

Photo: IASP Archives

Other important actions at that Council meeting that shaped IASP included such things as a requirement that future IASP ballots have at least two names for every office. Trainee member status was expanded to include the period of training plus three years beyond, giving trainees time to become established in their work before having to pay dues at the regular member rate. There continued to be input from readers, based on a survey conducted by Elsevier, that the clinical content of the journal *PAIN* was insufficient. This feedback spoke to the problem of many clinical papers submitted but of low quality or poor study design, areas that would be addressed by the editors and by specific educational courses at future congresses.

In 1976 a Subcommittee on Records and Data Retrieval, chaired by Dr. T.C. Chen, had been established, and a "A Survey for Comments and Opinions on the Development of a Pain Data Bank System" had been sent to 200 randomly selected IASP members, of whom about 60% responded. A majority strongly supported development of a data bank, both national and international, and recommended the development of a taxonomy and a classification of pain. Although a data bank system was never developed by IASP, a document was drafted that at-

tempted to outline standardize wording for evaluating patients and related information.

Meanwhile, the Subcommittee on Taxonomy, chaired by Harold Merskey, had completed a list of definitions of certain pain-related terms which would be published in *PAIN* (1979;6:249-52) as "*Pain Terms: A List with Definitions and Notes on Usage*," subtitled "*The first step towards codifying the terminology of the study and treatment of pain*." The Committee was also beginning to tackle the classification of pain syndromes, noting a difficult job but not an impossible one. Dr. Bonica had previously stated that he considered the development and implementation of a universally accepted taxonomy on pain one of the most urgent and most important objectives of IASP, bearing in mind that adoption of a classification does not mean that it is "cast in concrete" but that it can be modified as new information becomes available. Ultimately, in 1986 IASP's first edition of the *Classification of Chronic Pain, Description of Chronic Pain Syndromes and Definitions of Terms*, edited by Harold Merskey, was published as a supplement to *PAIN* with IASP ownership of copyright. It would be revised and republished in 1994 by IASP Press and is currently undergoing another revision.

An Ad Hoc Committee on Research was also established, chaired by Prof. Manfred Zimmermann. Its initial activity was to consider developing a set of guiding principles of ethics for the conduct of pain research on humans and animals. This work would result in a document being published in *PAIN* (1980;9:141-3) as *Guidelines on Ethical Standards for Pain Research in Animals*. Adherence to the principles in this document would become a requirement for articles submitted to the journal and for free communication abstracts and other materials submitted to IASP Congresses. The guidelines would undergo a number of revisions over the years, including publication as *Ethical Guidelines for Investigation of Experimental Pain in Conscious Animals* in *PAIN* (1983;16:109-11).

New chapters were being added to the IASP family and since the 1975 Congress had formed in Australasia, Italy, and Scandinavia. In the USA, regional

groups had combined to form the American Pain Society, and a chapter was in formation in Japan. At this point Council agreed to require all chapter bylaws and stationery to include wording that indicates that the society is a chapter of IASP.

This was also the year of the first IASP election by mail ballot, and 650 out of 1,550 members participated, about 42% of the membership. It validated the concept of using a mail ballot in lieu of onsite voting at the General Assembly of Members during the Congress and enabled members not attending the Congress to vote. The mail ballot and manual counting of ballots persisted until 2008, when modern technologies allowed for online voting and tallying of votes—an important asset for an association with 6,500 members by then.

On the administrative side, 1978 was the first year that IASP paid the Executive Secretary's salary from its own funds. For the first five years Dr. Bonica had graciously supported this expense from his own budget reserves. It was also the time that planning was begun for a permanent IASP secretariat office. Up to now IASP had enjoyed the benefit of free office space and use of equipment via arrangements made by Dr. Bonica with the University of Washington. This situation would change when he stepped down as chair of the Department of Anesthesiology.

As a final matter of business, Council changed the frequency of its meeting from once a year to once between IASP Congresses, i.e., once every year and a half. This change was primarily for financial reasons and also because the amount of



Chair of the IASP Subcommittee on Taxonomy, Harold Merskey, Canada

Photo: L.E. Jones, IASP Archives

business to discuss at that time was insufficient for a two-day meeting each year. Matters arising in between would be dealt with via mail and fax, all in accordance with legal guidelines, and emergency meetings would be called as necessary.

The Beat Goes On

In mid-1978 there was an International Symposium on Pain Therapy in Advanced Cancer in Venice sponsored by the Floriani Foundation. It was held in a former convent on one of the islands, and we commuted via water taxi. It was hot weather, but I remember how cool it was in that old building whose walls were about six feet (2 meters) thick. My youngest sister, Susan, who lived in Germany, also a place with many thick stone walls, used to call it “the chill of the ages.” But in Venice it felt comfortable. Although the symposium wasn’t a specific IASP activity, many IASP members were invited as speakers and many others attended as delegates. That was the first time I met Dr. Cicely Saunders, the founder of St. Christopher’s Hospice in London. Immediately I understood why she had accomplished so much—she was a gracious, friendly person who spoke firmly about her work and lovingly about her patients. It was also the first time I met a Pope—well, he wasn’t Pope yet, but Cardinal Albino Luciani of Venice. Several months after the symposium, he was elected and took the name Pope John Paul I. He died 33 days after his election.

The next Pope I was to meet, a number of years later, was Pope John Paul II. Prior to the 1987 Congress, Dr. Bonica, with the help of his friend and IASP member, Prof. Corrado Manni of the Università Cattolica del Sacro Cuore in Rome, arranged for a private audience to present the work of IASP and the International Pain Foundation (IPF). As one might imagine, the audience was exciting, and to make it

even more so, it was held at the Pope’s summer residence, Castle Gandolfo, in Lazio outside of Rome rather than at the Vatican. Two things that were spontaneous rather than formal made an impact on me. One was that when the Pope learned that Lucy Melzack was originally from Winnipeg, Canada, he beamed. He had been there several years before and had been able to get out into the countryside and do



Private Audience with Pope John Paul II, Castle Gandolfo, Italy, 1987. Prof. Corrado Manni (left) and Pope John Paul II (right).

Photo: Foto Felici, Roma

some hiking. The other concerned Prof. Manni, who had been instrumental in resuscitating the Pope after the assassination attempt in 1981. Poignantly,



Private Audience with Pope John Paul II, Castle Gandolfo, Italy, 1987. Michele and Michael Cousins (Australia), their daughter Jane, and Pope John Paul II.

Photo: Foto Felici, Roma

during our visit, the Pope put his arm around Prof. Manni's shoulders and said "This is a wonderful man; this man saved my life."

At the end of the audience we had been given an address in Rome. The next day, Ron Melzack and I went to what turned out to be a convent and, once we'd identified ourselves, were given a statement signed by the Pope that addressed the work of IASP and IPF. The original of that document is now in the Pain Collection at UCLA; there is a facsimile in the IASP office. I apologize for the digression to 1987, but it seemed fitting.

At the start of the year following the first Montreal Congress there was

no question that IASP was an organization that had come into its own. The membership was increasing, now over 1,600, and the staff was kept busy. At that time the staff was composed of the half-time Executive Secretary and a part-time clerical assistant working less than two days per week. The proceedings book from the Montreal Congress was in preparation. The book would be sent free of charge to all those who attended the Congress and would be available for purchase by others. This policy for distributing the Congress proceedings continues to this day.

In 1979 IASP had completed five years since its incorporation as a nonprofit organization and was required to file documents with the U.S. government for renewal of this status. Fortunately, IASP passed this first review by the U.S. Internal Revenue Service (IRS) without further follow-up or questioning and was reconfirmed as a nonprofit organization with tax-exempt status. The final review would take place in 1988, and IASP would again be awarded continuation of its nonprofit status.

The 1980 Council meeting was held at the Hotel Mundial in Lisbon, Portugal, in mid-March, in accordance with the new policy of holding one Council meeting between triennial world congresses. This



Private Audience with Pope John Paul II, Castle Gandolfo, Italy, 1978. Group Photo representing IASP and IPF. *Front row* L-R: Jonathan Cousins, Emma Bonica, Arianna De Simeone, Marco De Simeone, Chris Cousins, Jane Cousins, Alexis Wald, John Bonica, Corrado Manni, Mrs. Cousins (Michael Cousins's mother), Lucy Melzack, Ron Melzack. *Second row* L-R: Michele Cousins, Michael Cousins, Angela Bonica De Simeone, John Liebeskind, a Cardinal, Louisa Jones, Pope John Paul II, Costantino Benedetti, Toni Wald, Robert Wald.

Photo: Foto Felici, Roma

was the first of a number of IASP meetings of various types where I found myself carrying between \$5,000 and \$10,000 in cash in a shoulder safe. Some Council or committee members from currency-restricted countries would arrive at our meeting destinations with no hard currency for incidental expenses. These same people needed to have their travel costs reimbursed in cash because exchange restrictions prevented IASP from reimbursing them through standard banking channels. In those early years some hotels where we met did not accept credit cards and there was always something that had not been calculated into our prepaid deposit. It wasn't until well into the 1990s that this was no longer a problem. Eventually we got an American Express credit card with a sufficiently high limit so I could get cash at their local office if needed (as long as the city we were in had an AmEx office). Oddly, once we had the card, I never had to use it to get cash.

From the administrative side there were some changes. The IASP Directory of Members would now be published annually (instead of every three years with annual updates). Feedback from members indicated that they found the directory useful and that because of the number of new members and address changes, annual publication was desirable. It is interesting to me now to remember that up until 1980, the membership directory had to be hand typed from information on the 5 inch by 8 inch index cards we kept for each member. I still remember spending hours and hours at the typewriter late into the evening to get the directory ready. I am convinced that in the days before computers, easy erasing, and spell check, one's typing was much more accurate.

From my perspective, the most important administrative change came with Council approval of the proposal to computerize the membership records. As long as IASP principals, e.g., Council or Committee members, were members of the faculty at the University, IASP was able to use the computer center at the medical school at a surcharge of 13% above what University users would pay from their budgets. This included free consulting and less than 3% down time. It was a bargain.

Fortunately for me, I had had some experience in 1966–1967 working on a shared-time IBM computer for a now defunct investment banking firm on Wall Street. Significantly, I had learned Fortran IV programming, which would be a great help in writing programs. At the computer center, we had access to a DEC 10 mainframe computer, a data program called 1032, and importantly, daily, weekly, and monthly backups. The speed and complexity with which this system could respond to “search” and “find” commands never ceased to amaze me. I worked with two consultants, Gerard Pence and Dan Tomandl, who were readily available, never lost their patience, and helped set up a database format for IASP that required only minor changes over a 20-year period. By the time I retired from IASP in 2006, Gerard had retired as well, but Dan was still there when I called to thank him for his help over the years. We began in May 1980, and although it involved much typing to input each member's data, never again would the IASP directory be hand typed. Initially we used the CRT terminals in the computer center but soon purchased our own and had dial-up access from the office. In the early 2000s, when the University phased out the mainframe computer, we were able to easily transfer all the IASP records from the University system to the new records management system we had acquired for our PCs.

IASP chapters were continuing to form, with France, Japan, Great Britain and Ireland approved and Eastern Canada becoming the Canadian Chapter. The Australasian Chapter now included Australia, New Zealand, Singapore, and Malaysia. Chapters were in formation in Korea and Mexico. Using the term “Latin America” to refer to Mexico, Central America, and South America was recommended by a Council member from the region and was adopted. This suggestion solved the problem of Mexico being geographically in North America but belonging to the “Latin America” language group and culture.

Throughout the pages of this booklet, names of new chapters are listed. To start a chapter is not the easiest thing, and it was a priority at the IASP office to assist as much as possible. We set up a

system to inform chapters on a regular basis of persons who had joined IASP from their country or region. Often one did not know of the other. We responded to inquiries from chapter officers in a timely fashion and offered what additional support we could. At Congresses we made a special effort to interact with chapter leaders, and we provided space for chapters to meet after the end of formal sessions, although before long there were too few meeting rooms to accommodate all the chapters. We also established a luncheon at which chapter presidents could meet with the IASP Executive Committee and, in more recent years, a special banquet for chapter principals.

As is often the case, it is within one's own country's chapter that odd things happen. I remember when the American Pain Society (APS) was forming after the regional chapters had agreed to disband. I had been involved in making the arrangements for all these changes. We met at O'Hare airport in Chicago in early 1977, and when things were all settled, I raised my hand and volunteered to step down from the Board. Dr. Frederick Kerr said "Louisa, put down your hand, we want you on the Board," and the others concurred and I agreed. The irony was that when APS stationary was printed shortly thereafter, my name was not on the list of Board members. When I asked the President,

B. Berthold Wolff, why my name was missing, he said "because you are not a professional." I can remember encountering that type of chauvinism only one other time. That was at the Congress in 1987, when I met a member from East Germany with whom I had communicated to arrange his membership, congress attendance, etc. When I introduced myself, the first thing he said was "Oh, I expected you to be tall, thin, and blond." Sometimes you just can't win.

IASP's financial assets were continuing to improve, and at the end of 1979, funds amounted



IASP Council Meeting, Lisbon, Portugal, 1980. Jean-Marie Besson, France (left) and Ladislav Vyklicky, Czech Republic (right).

Photo: L.E. Jones, IASP Archives

to \$235,000. Earlier, Council had agreed to keep a minimum of \$100,000 in insured deposits to cover a shortfall from a Congress or in IASP operating income. This amount would increase over the years as IASP's assets grew. The 1978 Congress had produced a surplus of approximately CAD \$67,000, and because bank interest rates were hovering around 12-13%, the money was invested in an insured account for a 5-year period at that high rate, a nice boost for the finances. Royalties from the journal were now up to about \$9,000 per year, compared to \$748 in 1976.

The 1981 Congress in Edinburgh was on the horizon, with Ulf Lindblom as chair of the Scientific Program Committee and Ainsley Iggo as chair of the Local Arrangements Commit-



IASP Council Meeting, Lisbon, Portugal, 1980. Frederick Kerr, USA (left) and William Sweet, USA (right).

Photo: L.E. Jones, IASP Archives

tee. Early on in the planning stages, Dr. Lindblom recommended that the poster format be encouraged and slide sessions limited to new material only. Ultimately, 220 of the 350 free communications presented in Edinburgh were in poster format, a significant increase from Montreal. This was the beginning of phasing out slide sessions at IASP Congresses. Mexico City was selected as the site for the 1984 Congress with the dates of October 7-13.

A memory from the Lisbon meeting that still makes me smile concerns a lunch break on the first day of our meeting. Dr. B. Raymond Fink from Seattle, then IASP Secretary, was notorious at the University for being absent-minded. He knew before the Council meeting that he wouldn't remember everyone's name and insisted that we have a place name sign for each person. I couldn't dissuade him and ended up purchasing strips of balsa wood about 3 inches high and enough self-adhesive 2-inch-high lettering for each Council member's name. Suffice it to say that I ended up having to use a larger suitcase than I had intended. Once in Lisbon, I put the signs around the table before the meeting started, and as soon



IASP Council Meeting, Lisbon, Portugal, 1980. Joseph Magbagbeola, Nigeria (left) and Sven Andersson, Sweden (right).

Photo: L.E. Jones, IASP Archives

as people came in they asked what we needed the signs for, saying "We all know who we are." I didn't say anything, and Dr. Fink didn't seem to notice the comments. When we got back from a very nice lunch, someone had cleverly rearranged the letters on most of the signs. This engendered much laughter, and we kept our new names for the rest of the meeting. It surely was a good reminder for me to not take things too seriously.

As was the case for all our Congresses, I made several visits beforehand to work on arrangements with the Congress Secretariat and to meet with members of the Local Arrangements Committee. I particularly remember one visit when I arrived at Prof. Iggo's office in Edinburgh after the long trip from Seattle to find it empty. It seems that his bees had swarmed into a neighbor's tree and, after a hectic telephone call, he had hurried home to try and get them back into their hive. Had I arrived earlier I might have been involved in the retrieval process; fortunately, the closest I came was to be treated to some fresh honeycomb.



IASP Council Meeting, Lisbon, Portugal, 1980. Manfred Zimmermann, Germany (left) and Octavio Calvillo, Mexico (right).

Photo: L.E. Jones, IASP Archives

The Edinburgh Congress, 1981

In July 1981, less than two months before the Edinburgh Congress, the IASP office moved away from the University. Dr. Bonica was able to arrange for IASP to rent some space from the Fred Hutchinson Cancer Center in the Westlund Building, a former hospital, that was only partially occupied. IASP would occupy the space rent-free for the rest of the year and begin paying rent in January 1982; a three-year contract was signed. The space was a small suite of three rooms that included a walk-in safe—it had been the old administrative offices of the hospital. We went from the busy hallways of a university medical school setting to a large building with only one or two other tenants. Surprisingly, the adjustment was easy. Maybe that was because during the eight years at the University my office had been moved at least four times. IASP was to remain in the Westlund Building until November 1984.

The move began a new era in how IASP got things done. Fortunately, we were still able to use our computer account with the University, and our telephone, photocopying, and supplies were part of the Cancer Center system. But we were now on our own as far as things like bulk mailing were concerned. I can remember the many, many trips to the Terminal Annex branch of the U.S. Post Office south of the city, loading my car up with canvas sacks or boxes of newsletters, directories, dues notices, and so on, for mailing to members. It became quite a production and was a lot of heavy work. The best time to go was always in the early evening after normal business hours when you could find

a parking space at the loading dock. It was several years before we hired a mailing service to do this work for us; I wished it had happened sooner.

The 1981 Council meeting was held in Edinburgh immediately prior to the opening of the Congress, and there were several new or especially important matters to discuss. In the publishing area, the word “allodynia” was being used in *PAIN* for the first time, the pain definitions published by IASP had been reprinted in Brazil and Australia, the first of many such reprintings, and the first five-year publishing contract with Elsevier had been renewed. A provision of the new contract was to increase the size of the journal another 50%; it would begin publishing 12 issues a year in 1982. The National Library of Medicine in Washington, DC, had requested two copies of the abstracts books from all the IASP Congresses. In the future, these and related IASP publications would also be sent to similar depositories in the United Kingdom and in Europe.

Several other items included the formation of a new chapter in Nigeria and the creation of a special lectureship dedicated to John J. Bonica that would be presented at future IASP Congresses. More daunting was a change of venue for the 1984 Congress, originally scheduled for Mexico, to Seattle. This transfer to Seattle was at the request of the original organizers in Mexico City and came as a surprise.

As a result of this change, for the next several Congresses we designated a backup venue

in advance and included it in our site inspection activity. This proved useful, as the 1987 Congress—originally scheduled to be held in Japan—was transferred, due to discord among societies in Japan, to its backup venue, Germany. Then, the 1996 Congress, originally scheduled to be held in Chicago, was transferred to its backup, Vancouver, after the City of Chicago asked us to leave because they were planning to hold the Democratic National Convention there at the same time and needed the hotel and meeting space we had booked. What a nightmare it would have been had we stayed. Even worse was what would be considered short notice for a meeting the size of ours, now over 4,000 delegates, to find a place that wasn't already booked. Fortunately, the Vancouver Convention Center had our exact dates available.

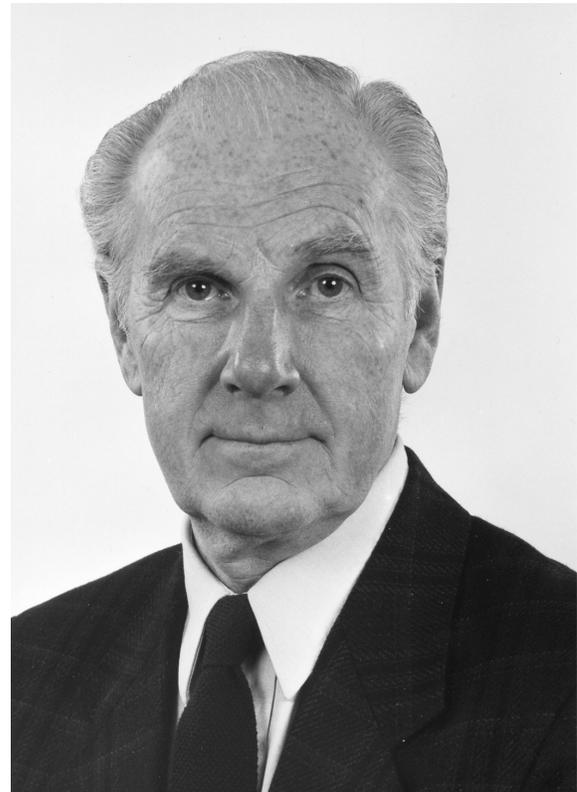
At the end of a long day's meeting, we enjoyed again one of those relaxing Council dinners, this time arranged by Ainsley Iggo and held in the elegant Old Library at the University of Edinburgh.

The Congress was held at the University of Edinburgh in early September, and the Congress dates partially overlapped those of the Edinburgh Festival and the Fringe. There was much to keep delegates entertained outside of Congress sessions. In the absence of large hotels or a headquarters hotel, accommodations were scattered around the city, and for the first time we used university housing as an option for delegates, something we would do at all future congresses if available. A handful of those with Congress responsibilities were able to stay at the Faculty Club.

Nearly 1670 persons attended the Congress—600 more than in Montreal in 1978—reflecting the growing IASP membership, increasing interest in the pain field, and the attraction of a meeting that required shorter and less expensive travel, at least for delegates within Europe. For the first time, financial support was available to young investigators attending the Congress. Although it wasn't much, 61 delegates received a 50% reduction in their registration fees. This financial aid for trainees would be expanded significantly for future Congresses and would also include aid to persons from developing countries. A special gift book was

presented to delegates, a reprint of *Rest and Pain* by John Hilton. Although such gift books were not possible at every Congress, there were others over the years, the most notable being *The Paths of Pain 1975-2005*, edited by Harold Merskey, John D. Loeser, and Ronald Dubner, which celebrated the 30th anniversary of the first IASP Congress and was presented to delegates at the 2005 Congress in Sydney. This book is still available for purchase from IASP Press.

The scientific program put together by Ulf Lindblom and his committee was well-received. Before the Congress and before the days of FedEx, DHL, UPS, and express mail, we were nervous about how to get the abstracts from Stockholm to Seattle in a safe and timely fashion, where they would be assembled for publication and printing. As a result, and certainly as special thanks for her hard work on the Scientific Program, Dr. Lindblom had his Administrative Assistant, Ann Margaret Gustavsson, hand carry the abstracts to



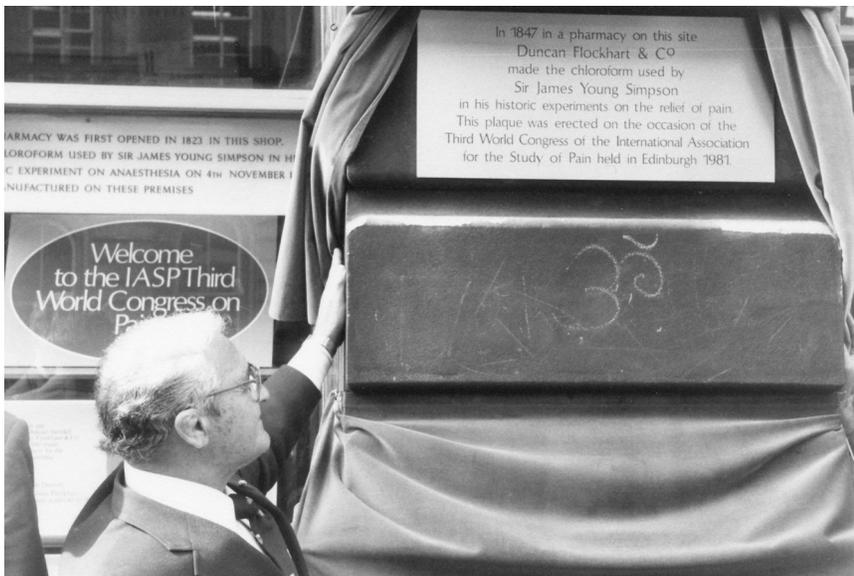
Third World Congress on Pain, Edinburgh, UK, 1981. Chair of the Scientific Program Committee, Ulf Lindblom, Sweden.

Photo: IASP Archives

Seattle, traveling on the direct SAS flight from Copenhagen to Seattle. Ann Margaret was a delightful person, and I was pleased to be able to entertain her while she was here. For the next few Congresses, similar hand-to-hand transfers of abstracts were made, although not over such long distances. How nice it was eventually to receive abstracts by e-mail and then, by the 2002 Congress, to have online abstract submissions.

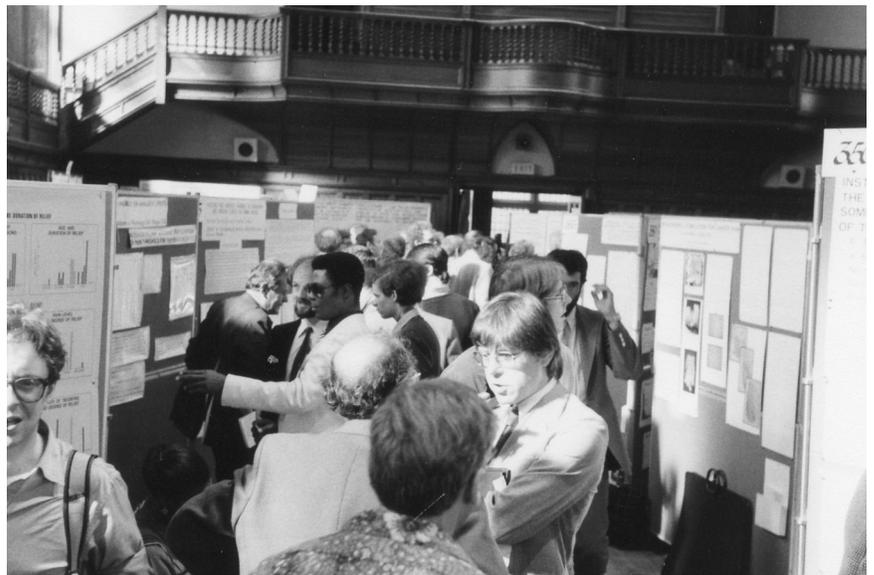
A special event during the Congress was IASP's participation in the unveiling of a plaque in Edinburgh to commemorate Sir J.Y. Simpson's early experiments on pain using chloroform. The plaque was presented by the Duncan Flockhart Company and unveiled by Dr. Bonica. It read:

"In 1847 in a pharmacy on this site Duncan Flockhart & Co made the chloroform used by Sir James Young Simpson in his historic experiments on the relief of pain. This plaque was erected on occasion of the Third World Congress of the International Association for the Study of Pain held in Edinburgh in 1981."



Third World Congress on Pain, Edinburgh, UK, 1981. John Bonica unveiling a plaque in downtown Edinburgh, commemorating the manufacture of the chloroform first used by Sir James Young Simpson in 1847.

Photo: L.E. Jones, IASP Archives



Third World Congress on Pain, Edinburgh, UK, 1981. Poster Sessions, busy and crowded. Unfortunately, there are very few photos from this Congress, and this one gives at least a bit of its flavor. For future Congresses we hired professional photographers to help preserve these bits of history.

Photo: L.E. Jones, IASP Archives

Present were: the Mayor of Edinburgh, descendants of Sir James Y. Simpson, members of the Duncan Flockhart family, representatives of the firm, and IASP representatives Ainsley Iggo, John J. Bonica, B. Raymond Fink, and Louisa E. Jones. Just last year, in 2009, an IASP member told me he had made a special point to see the plaque while in Edinburgh.

The General Assembly of Members held during the Congress reported matters addressed by Council as described above as well as IASP's financial status and the total number of members (1,790). There was a moment of silence for members who had died, especially for Honorary Members James C. White, Derek Denny-Brown, and V. Chernigovsky. Election results were announced, with Ronald Melzack as the President-Elect to take office in 1984 and Ainsley Iggo, former President-Elect, taking over as President. Two new Honorary Members were announced: Hans Kosterlitz of the United Kingdom and Sir Sydney Sunderland of Australia. Patrick Wall, Editor-in-Chief of

PAIN, reported an extremely good response from members to the *PAIN* questionnaire and thanked them for their participation. He expected the input to help in attempts to take a good look at the journal and see how it could be improved. Because a quorum was not present at the General Assembly, a vote on bylaws was deferred to a plenary session on the last day of the Congress. This was a wake-up call to schedule the General Assembly at a more compatible time at future congresses.

The Local Arrangements Committee, chaired by Ainsley Iggo, arranged a number of enjoyable events, some open to all and some subscribed. The Welcome Reception was held in the Victorian main hall of the National Museum of Scotland, and the exhibits provided an incredible look into the early days of the Industrial Revolution. A concert featuring a well-known Scottish string ensemble was held in an old church near the university and featured music by Pachelbel and Dag Wirén. A banquet with dancing was held in a giant tent, which made things interesting, especially when it started to rain lightly: the flaps had to be lowered, and it got quite hot inside. As at the banquet in Italy in 1975, it was nothing that couldn't be cured with some good wine.



Fig. 7-4. Third World Congress on Pain, Edinburgh, UK, 1981. Chair of the Local Arrangements Committee, Ainsley Iggo.

Photo: L.E. Jones, IASP Archives

A truly special event for Congress delegates was attending the Closing Tattoo of the Edinburgh Festival held on the grounds of Edinburgh Castle. It was memorable for its pageantry and the setting itself, but especially for the very end when everyone there—thousands of people—joined crossed hands and sang *Auld Lang Syne* in the dark night air.

IASP at 10 Years of Age

By mid-1982 a number of projects had been completed, including the *Bibliography on Pain* prepared by the Committee on Education and edited by John D. Loeser and William Noordenbos. It included classical and current references, all annotated, and would be published in two segments in subsequent *IASP Newsletters*. This document was updated periodically, but eventually it was discontinued when access to MEDLARS and its successors became more available at university and medical libraries and on personal computers.

At this time I was asked by the Executive Committee to consider switching to full-time employment for IASP. With little deliberation, in August 1982 I resigned from my half-time editorial position in the Department of Anesthesiology to accept this offer. IASP's other permanent employee at this time was Barbara Rehder, Assistant for Membership, who worked part-time and would remain with IASP until 1993 when she resigned due to illness.

Prior to the 1982 Council meeting in Japan, the idea of a pre-meeting junket to Hong Kong had come up, and Council members were invited to come at their own expense if interested. We ended up with a group of five. Several of us had our first experience staying at the Hong Kong YMCA; accommodations were a bit austere, but it was inexpensive and centrally located. When feasible, we went on tours together, walked around the city, went shopping, and ate meals together. It was a nice break in our respective routines, and for me it was the start of a pattern of taking a few

days' vacation before Council and other meetings to enjoy the countries we were visiting.

The 1982 Council meeting was held in mid-December in Kyoto at the Miyako Hotel in conjunction with the annual scientific meeting of the Japanese Chapter, at which a number of Council members presented papers. I remember a light snow on the ground and a beautiful city. At that time the Yen was trading at about 240 to the U.S. dollar, enabling us to stay at a hotel as elegant as the Miyako, which was nestled in the hills at the edge of the city. Our Japanese hosts were gracious and saw to it that we ate well and were entertained during our stay.



Fig. 8-1. IASP Council Meeting, Kyoto, Japan, 1982. Council members participating in a traditional tea ceremony. L-R: Michael Bond, UK; Ulf Lindblom, Sweden; Ronald Melzack, Canada.

Photo: IASP Archives

Sadly, we noted the death of Honorary Member Yngve Zotterman. The shaping of IASP mentioned in earlier chapters was nearly complete by now, although new programs would be added over the years as finances improved. Nonetheless, there were still a number of firsts that were formative. A Young Investigator Prize to be presented at congresses was proposed and accepted. This prize would evolve into the present day Patrick D. Wall Young Investigator Award for Basic Science and the Ulf Lindblom Young Investigator Award for Clinical Science. A specially endowed award would also be added, the Ronald Dubner Research Prize.

New chapters were continuing to form. The Korean chapter was approved, and chapters were in formation in Spain, Israel, and Brazil. In Belgium, a Pain Clinic section had been formed within the Belgian Society of Anaesthesia and Reanimation. New Zealand withdrew from the Australasian Chapter and formed its own chapter.

For the first time the 1984 Congress scientific program would include workshops as formal

Congress sessions. Via the *Newsletter*, the program chair would invite members to suggest topics. Getting this information out via a quarterly newsletter was difficult enough, and getting responses back seemed to be even slower. How nice it would be about 18 years later when we were able to announce this type of information and solicit responses from members via e-mail.

Important to the IASP office in 1982 was the approval of Council to establish a credit card payment mechanism for membership dues. By now the membership count was close to 2,000, and this action would save members time and money by reducing fees charged for bank drafts and postage, as well as reduce the amount of paperwork in the IASP office. It worked smoothly from the outset. At first only members in North America used this mechanism because personal credit cards were not as common in Europe and other parts of the world at the time. In some cases the transfer of funds from one country to another by credit card was still limited, and often a credit card could only be



Kyoto, Japan, 1982. IASP Council Members participating in the annual scientific meeting of the Japanese Chapter of IASP. *Front row, seated* L-R: unknown; B. Raymond Fink, USA; William Noordenbos, The Netherlands; Hideo Yamamura, Japan; Ainsley Iggo, UK; Emma and John Bonica, USA; Yohiro Kawamura, Japan; Sampson Lipton, UK; John Liebeskind, USA. *Second row, seated* L-R: Michael Bond, UK, Mary Ellen Jeans, Canada, Robert Boas, New Zealand; B. Berthold Wolff, USA; Miriam Martelele, Brazil. *Third row, standing* L-R: Four unknown delegates; Jean-Marie Besson, France; Patrick Wall, UK; Louisa Jones, USA; unknown; Allan Basbaum, USA; Howard Fields, USA; Ronald Dubner, USA. *Fourth row, standing* L-R: Manfred Zimmermann, Germany; unknown; Jan Gybels, Belgium; Toshikatsu Yokota, Japan.

Photo: IASP Archives

used domestically. This situation has changed dramatically over the years, and now most payments to IASP can be made online.

May 26, 1983, was the 10th anniversary of the founding of IASP. I don't recall that we did much about it at that time other than to note it in passing. There were just too many other things going on, and our funds were limited. In a way, this booklet might make up for the 10th anniversary celebration that didn't happen.

I liked it when the number of members in the IASP "family" was fewer than 2,000, a rather selfish point of view. It was a manageable number and, better still, I was able to remember most of the names.

Keep in mind that in the first few years, I was still processing membership, typing membership directories, and so on. This repetition was helpful in remembering names, countries, institutes, and in some cases other specific details. It was a pleasure for me to connect a face with a name at an IASP Congress and to have a chat. Once the membership grew larger and I was no longer dealing with member names on a day-to-day basis, I was no longer making some of these individual connections, which to me was a loss. Fortunately, IASP members have always been good at stopping by to visit the office when they are in town, to the delight of the entire staff.

1984: The Last of the “Early Years”

Over time, Dr. Bonica and I were lauded for the work we had done, he for starting IASP and I for establishing the headquarters and keeping things running. However, I have always maintained that the real “glue” of IASP during the first 10 years or so was the journal, *PAIN*. It was our main product. I felt that the founding Editor-in-Chief, Patrick D. Wall, was as much as contributor to the early success of IASP as either Dr. Bonica or I. I have fond memories of Pat Wall, as do many of us, even though we often sat at a table with white knuckles while he and someone else—Jose Ochoa, for example—had one of their scientific “discussions.” One truly expected fists to fly, but they never did. My working relationship with Pat dealt primarily with the administrative aspects of the journal, negotiating contracts, and the like. However, because he was an *ex officio* member of Council, he attended most Council meetings, and over the years we became friends. Although we never talked about it, we had a mutual appreciation and respect for one another’s contributions to IASP. I remember being at a meeting once, I think it was an American Pain Society meeting, when a delegate came up to me and said “I saw you sitting over there with Prof. Wall for almost an hour. What were you talking about?” Once I recovered from my surprise at the question,

I simply told him that we were friends and that Pat didn’t have to talk neurophysiology with me. I was very pleased when some time later one of the awards presented at IASP Congresses was named after him, the Patrick D. Wall Young Investigator Award for Basic Science.

The preface of this booklet describes the period to be covered as 1973–1984. The date of 1984 was chosen because it was the first time that IASP had enough money to support a special project or event that was not essential to the operation of the Association. In this case, it was the creation of the John J. Bonica Distinguished Lecture. It reflected the financial stability and confidence in the Association that had taken all these years to develop.



Patrick Wall (right) and IASP Council Member Gisele Guilbaud (left).

Photo: IASP Archives

This was to be a Congress year, with the meeting scheduled for early September in Seattle. The Congress had originally been slated for Mexico, but that offer was withdrawn by colleagues there about 6 months later. As usual, Council met just prior to the Congress, and a number of new matters were addressed. These included establishing a sliding scale for member dues; discontinuing the regional vice-presidential positions to save Council meeting costs and because the 14 Councilor positions now covered all the major geographical areas (Council size was reduced from 25 to 19); expanding the journal, *PAIN*, by having a new section to include case presentations, mini-reviews,



Fourth World Congress on Pain, Seattle, 1984. IASP Council Members. L-R: Paolo Procacci, Italy; Ronald Tasker, Canada; William Willis, USA.

Photo: Steve Schneider, Seattle

and commentaries on individual clinical problems or issues; submitting a formal application to the World Health Organization (WHO) for recognition of IASP as a nongovernmental organization; planning to offer refresher courses for the first time at the 1987 Congress; and starting a program to encourage members in the developed world to donate funds to support membership in IASP for persons in currency-restricted and developing countries.

Earlier in the year, IASP had received a request from member Dr. M. Salim for donations of pain books to the library at the Pain and Acupuncture Center at the Army

Medical College in Rawalpindi, Pakistan. Members were informed via notices in the *Newsletter*, and in the ensuing years other libraries would be added to this list. We never knew whether this program was effective, and it is an oversight that my office neglected to do a follow-up.

There were more changes in the IASP office in 1984, including taking on additional part-time clerical staff, subject to review after a year's time. My title of “Executive Secretary” was changed to “Executive Officer.” Although I had requested the title “Executive Director,” the common appellation for my position in the United States, others from outside the United States felt it would cause confusion because of what “Director” meant in other countries. I often had the sense that Council was nervous about something sounding too American or that Seattle would control everything. In this sense they were referring to Dr. Bonica, not to the IASP office itself. In truth, Dr. Bonica was not involved in the day-to-day operations of the office; he knew I would consult him if anything came up that I was unsure of. Occasionally over the years there would be suggestions to move the IASP office to another country, but they were never discussed at length. I did not pursue the title any further during my tenure, and it was changed to “Executive Director” after I retired in 2006.



Fourth World Congress on Pain, Seattle, 1984. IASP Council Members. L-R: Ronald Dubner, USA; Mirian Martelele, Brazil; Sven Andersson, Sweden; Toshikatsu Yokota, Japan.

Photo: Steve Schneider, Seattle

More importantly, IASP’s lease at the Fred Hutchinson Cancer Center would be up in March 1985 and would not be renewed because the Cancer Center needed the space for its own purposes. We now had to locate new office space. Fortunately, a friend of mine, Marie Leonard, a copy editor for the *American Journal of Roentgenology* (AJR), whose editor-in-chief, Dr. Melvin Figley, was at the University of Washington, worked in a small office building not too far from the University that had space available. It was in a good location and was competitive with other sites I looked at. In November 1984 the IASP office moved to the building it would occupy for the next 21 years. We started off in a small suite and then early in 1986 took over the larger suite of the AJR when its editorial office moved to San Diego. Two smaller suites were added to our space over the years. Eventually the University built an outpatient clinic next door, and by coincidence, the Pain Clinic was located there. In late 2005 the IASP office moved to its current location.

The Council dinner that year was at my home, an indoor-outdoor light buffet event. Ulf and Berit Lindblom came home with me a bit ahead of time to help put the finishing touches on things. I have two



Fourth World Congress on Pain, Seattle, 1984. Bill and Cox Noordenbos.

Photo: IASP Archives

very special memories from that time. One was that Elsevier had sent a copy of the first edition of the *Textbook of Pain*, edited by Patrick D. Wall and Ronald Melzack, to my home. It was hot off the presses, and sending it to me turned out to be the most efficient way to get it to Pat Wall before the Congress. He had not seen the book yet, and I had the privilege of presenting it to him when he arrived. It was a nice surprise for everyone else as well.

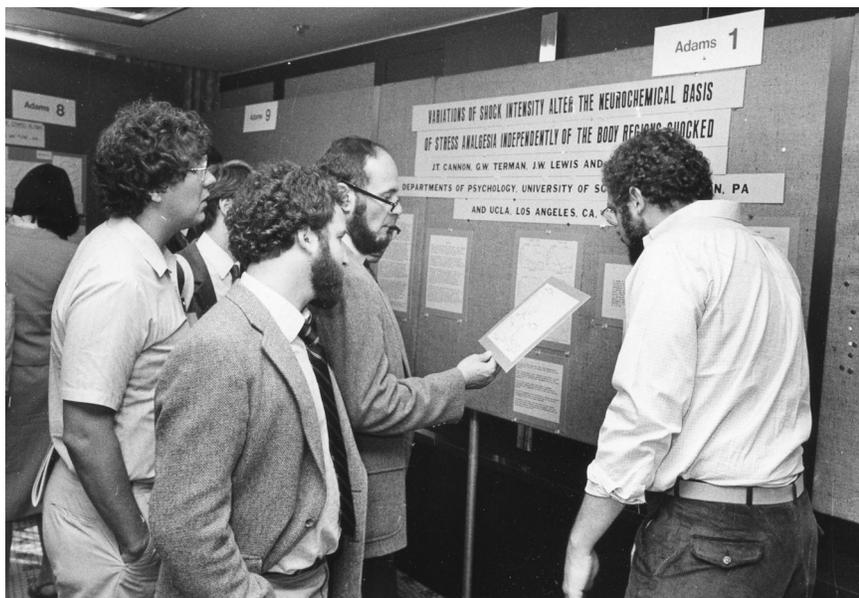
The second involves my dog, Daisy. I was in the backyard talking to Cox Noordenbos when I noticed Bill Noordenbos sitting on an upturned bucket underneath an apple tree. More importantly, Daisy’s nose was at the same level as the edge of his dinner plate. I started to make a motion to chase her away, but Cox grabbed my arm and said “Let them be, they have an understanding,” and indeed they did. Eventually Daisy got her treat.

The next day the Congress got underway. It was held at the Westin Hotel in Seattle and would be the last IASP Congress to be held at a hotel. We were simply growing out of the space available, and larger convention centers were being built worldwide. There



Fourth World Congress on Pain, Seattle, 1984. The first time for workshops at an IASP Congress. Panelists L-R: Bengt Sjölund, Sweden (at podium), Ji-Sheng Han, People’s Republic of China; C. Richard Chapman, USA; David Mayer, USA.

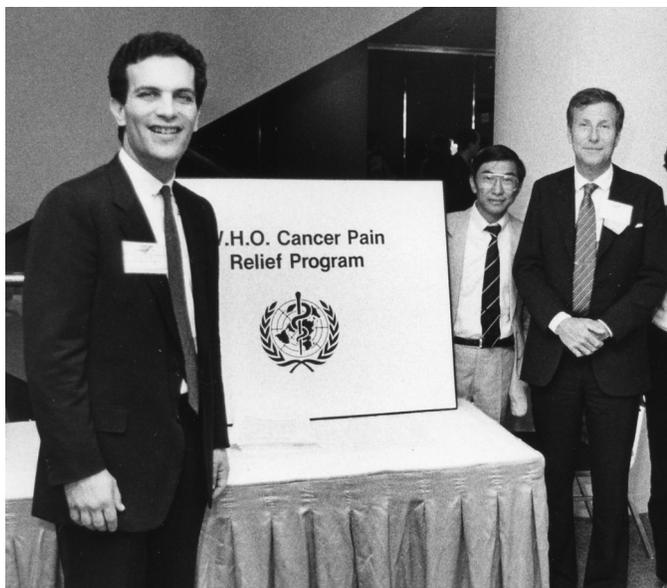
Photo: Steve Schneider, Seattle



Fourth World Congress on Pain, Seattle, 1984. Poster session. L-R: William Maixner, Allan Basbaum, Ronald Dubner, J. Timothy Cannon.

Photo: Steve Schneider, Seattle

were 1,850 delegates from 38 countries, only about 200 more than in Edinburgh in 1981. We had anticipated higher attendance, but unfortunately the meeting overlapped with the Labor Day weekend holiday in the United States, the last family holiday of the summer. I have always believed that to be a factor in the lower number of delegates. Because our meetings were traditionally held in late August or early September, I made it a point to avoid over-



Fourth World Congress on Pain, Seattle, 1984. WHO Cancer Pain Relief Program display desk. L-R: Mitchell Max, USA; unknown; Jan Stjernswärd, Sweden, WHO representative.

Photo: Steve Schneider, Seattle

laps with such major holidays when scheduling future IASP Congresses.

New to an IASP Congress were sessions in the form of workshops that would permit more interaction with delegates and which were carefully orchestrated this first time by the program chair, Howard L. Fields. They were successful and would become an important component of all future Congresses. Also new was the awarding of Continuing Medical Education (CME) credits for physicians. A mostly North American activity in 1984, over the years the continuing education credits program would be expanded to other specialties such as

Dentistry, Nursing, Psychology, and Physical Therapy and to other countries or regions such as the United Kingdom, Europe, Israel, and Australia.

As described above, the defining activity at the end of IASP’s “early years” was the ability of the Association for the first time to use its funds for something that was not essential. That event was the presentation of the John J. Bonica Distinguished Lecture award to Edward R. Perl during the Congress. The award included a plenary lecture by Dr. Perl, an honorarium, a plaque, and travel expenses. It would be the first of an increasing number of programs that IASP would fund, including the substantial number of fellowships and educational grants offered by the Association today.

At the General Assembly of Members there was a moment of silence in memory of members who had died, especially Honorary Member F.A.D. Alexander. Election results were announced, with Michael J. Cousins as President-Elect to take office in 1987 and Ronald Melzack, current President-Elect, taking over as President. Medallions were presented to new Honorary Members: Denise Albe-Fessard, John J. Bonica, B. Raymond Fink, Peter Nathan, William Noordenbos, and William H. Sweet.

The selection of Kyoto, Japan, as the site of the 1987 Congress was announced. Unfortunately, soon after this announcement, problems developed due to discord among societies in Japan, and it was



Fourth World Congress on Pain, Seattle, 1984. Edward R. Perl, recipient of the John J. Bonica Distinguished Lecture Award. IASP’s first award presentation.

Photo: Steve Schneider, Seattle

1984 he and I kept in contact until shortly before he died. Even as he moved into an elder care facility in his last years, he would use his old manual typewriter to send short letters. What particularly sticks in my mind is his writing once that he was “still going up to Oxford once a week to work on my brains.”

As part of the social program, the Mayor of Seattle, Charles Royer, welcomed delegates to the city and to the Congress at the opening reception. I was conscious of much delegate chatter and noise while he was making his short speech and felt the need afterward to apologize for that lack of attention. He was gracious and told me not to be concerned, saying with a smile, “Remember that I am a politician and am accustomed to people not listening.”

We had a formal banquet at that meeting, fortunately the last of its type for an IASP Congress. To begin with, people did not seem too pleased with the food, roast beef. And we made the mistake of having an after-dinner speaker give a talk about



Fourth World Congress on Pain, Seattle, 1984. Newly named Honorary Members of IASP. L-R: B. Raymond Fink, USA; John J. Bonica, USA; Sir Sydney Sunderland, Australia; William Noordenbos, The Netherlands; Peter Nathan, UK. Absent from the photo are: Denise Albe-Fessard, France and William Sweet, UK.

Photo: Steve Schneider, Seattle

necessary to change the Congress site to Germany, the backup venue.

Peter Nathan, now a new Honorary Member, had been on Council, and after his term was over in

the city and environs—in retrospect, not the liveliest of topics. Several who had most likely had a bit too much wine were noisy and directly rude to the speaker. He solved the problem by folding up his

papers and abruptly leaving the podium. What an embarrassment for IASP! The Congress Secretariat and I saw to the apologies. There was music and dancing after that, but I had learned yet another lesson about Congress banquets.

Much more enjoyable was a concert. The Santa Fe String Quartet had been in Seattle, performing at the University of Washington the previous week, and we asked them to stay over for an extra performance. They agreed, and we had a relaxing musical evening. There was sufficient seating for members of the community to join delegates for this special last concert. I remember driving Miriam Marteleto and Sven and Margareta Andersson to the concert. We decided to stop at my house to have something to eat, which ended up being whatever leftovers we could find in the refrigerator.

Among other things, 1984 was the 100th anniversary of the discovery of local anesthesia by Carl Koller, who used cocaine for eye surgery in Vienna. IASP had been contacted by his daughter Mrs. H. K.

Becker about the possibility of loaning a scientific exhibit to IASP for display at the Congress, along with reprints of related historical articles. Unfortunately, this plan did not materialize, although I am unable to recall the circumstances.

At the end of the “early years,” IASP had just under 2,500 members, financial assets of \$331,282, one full-time and two part-time employees, a successful peer-reviewed journal, and three world congresses under its belt. Someone, I believe it was Howard Fields, Chair of the Scientific Program Committee for the 1984 Congress, gave Dr. Bonica a baseball cap that read “Very Important Italian.” And he was important, the force behind the founding of IASP. He was pleased to have the Congress in his hometown and to see how the Association had grown and developed since its humble beginnings in 1973. It is evident by the smile on his face in the picture below.

The stage was set for much more to come.



Fourth World Congress on Pain, Seattle, 1984. John Bonica addressing the General Assembly of Members.

Photo: Steve Schneider, Seattle

Appendix

List of Delegates and Speakers – International Symposium on Pain Issaquah, Washington, USA, May 21–26, 1973

Information directly from the “List of Speakers and Registrants” published at the time of the 1973 meeting, only country names have been updated. Names with an asterisk (*) indicate speakers.

Name	Specialty	Affiliation	City	Country
A				
Abrahams, Vivian C., PhD*	Physiology	Queens Univ.	Kingston, ON	Canada
Albe-Fessard, Denise, DSc*	Physiology	Univ. of Paris	Paris	France
Arnhoff, Franklyn N., PhD	Psychiatry	Univ. of Virginia	Charlottesville, VA	USA
Avery, Roger		Avery Labs, Inc.	Farmingdale, NY	USA
B				
Ballinger, Carter M., MD	Anesthesiology	Univ. of Utah	Salt Lake City, UT	USA
Barker, Gage		Pfizer Labs	Bellevue, WA	USA
Barker, Jeffery Lange, MD*	Behavioral Biology	NIH	Bethesda, MD	USA
Bates, Ernest A., MD	Neurosurgery	Univ. of California	San Francisco, CA	USA
Bates, J.A.V., Dr.	Neurology	National Hosp. Queen Sq.	London	UK
Beaudet, Simon C., MD	Rehabilitation Med.		Denver, CO	USA
Beaver, William T., MD*	Pharmacology	Georgetown Univ	Washington, DC	USA
Beckner, Thomas, F., MD		Pain Rehabilitation Ctr.	La Crosse, WI	USA
Beecher, Henry K., MD*	Anesthesiology	Harvard Medical School	Boston, MA	USA
Benedetti, Costantino, MD	Anesthesiology	Univ. of Colorado	Denver, CO	USA
Berges, Peter U., MD	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Besson, Jean Marie, PhD*	Pharmacology	Lab. Physiol. Ctr. Nerveux	Paris	France
Beurman, Roger W., PhD	Physiology/Biophysics	Univ. of Washington	Seattle, WA	USA
Biedenbach, Maria, PhD	Physiology/Biophysics	Univ. of Washington	Seattle, WA	USA
Black, Emilie, MD*	Research Grants	NIH-NIGMS	Bethesda, MD	USA
Black, Richard G., MD*	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Blair, Jr., Murray R., PhD		Astra Pharmaceutical	Worcester, MA	USA
Bloedel, James R., MD, PhD	Neurosurgery	Univ. of Minnesota	Minneapolis, MN	USA
Bloomquist, Dale S., DDS, MS	Oral Surgery	Univ. of Washington	Seattle, WA	USA
Blum, Ludwig, MD			Flushing, NY	USA
Boas, Robert, MD	Anesthesia	Auckland Hospital	Auckland	New Zealand
Boll, Thomas, PhD	Neurosurgery	Univ. of Washington	Seattle, WA	USA
Bonica, John J., MD*	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Bowsher, David, MA, MD, PhD*	Anatomy	Univ. of Liverpool	Liverpool	UK
Bresler, David E., PhD*	Anesthesiology	Univ. California UCLA	Los Angeles, CA	USA
Bridenbaugh, Phillip O., MD	Anesthesiology	The Mason Clinica	Seattle, WA	USA

Name	Specialty	Affiliation	City	Country
Broom, Bryan, MD		Pfizer Laboratories Div	New York, NY	USA
Brown, Alan G., MB ChB, PhD*	Veterinary Physiology	Univ. of Edinburgh	Edinburgh	UK
Brown, Arthur C., PhD	Physiology/Biophysics	Univ. of Washington	Seattle, WA	USA
Brunner, Edward A., MD, PhD	Anesthesiology	Northwestern Univ.	Chicago, IL	USA
Bryan, Vincent, MD	Neuropathology	Univ. of Washington	Seattle, WA	USA
Burgess, Ernest M., MD			Seattle, WA	USA
Burgess, Paul R., PhD*	Physiology	Univ. of Utah	Salt Lake City, UT	USA
Bush, Don, MD	Psychology	Univ. of Washington	Seattle, WA	USA
C				
Cairns, Douglas, PhD		Rancho Los Amigos Hosp.	Downey, CA	USA
Calvin, William H., PhD*	Neurosurgery	Univ. of Washington	Seattle, WA	USA
Campbell, Judy	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Carron, Harold, MD	Anesthesiology	Univ. of Virginia	Charlottesville, VA	USA
Casey, Kenneth L., MD*	Physiology	Univ. of Michigan	Ann Arbor, MI	USA
Chandler, William F., MD	Neurosurgery	Univ. of Michigan	Ann Arbor, MI	USA
Chapman, C. Richard, PhD*	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Chen, Andrew C.N., MS	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Chiang, Han, MD	Anesthesiology	Massachusetts Gen Hosp.	Boston, MA	USA
Chiron, Harlan S., MD	Orthopedic Surgery		Mercer Island, WA	USA
Chiu, Wen A., MD	Anesthesiology	Univ. of Texas	Houston, TX	USA
Christman, Amalia, RN	Pain Clinic	Univ. of Washington	Seattle, WA	USA
Clawson, D. Kay, MD, FACS	Orthopedic Surgery	Univ. of Washington	Seattle, WA	USA
Cohn, William, MD			Seattle, WA	USA
Colley, Peter S., MD	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Colli, Celso, MD	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Collins, William F. Jr., MD*	Neurosurgery	Yale Univ.	New Haven, CT	USA
Comer, Walter, MD		Wyeth Laboratories	Philadelphia, PA	USA
Cook, Albert W., MD	Neurosurgery	State Univ. of New York	Brooklyn, NY	USA
Cosman, Eric R., PhD		Radionics, Inc.	Burlington, MA	USA
Covino, Benjamin, PhD, MD*		Astra Pharmaceutical	Worcester, MA	USA
Cramer, Loy, MD	Labor & Industries	State of Washington	Olympia, WA	USA
Crawford, Thomas I., MD			Phoenix, AZ	USA
Crowley, Dorothy M., PhD	Nursing	Univ. of Washington	Seattle, WA	USA
Crue, Jr., Benjamin L., MD*	Neurology	City of Hope Natl. Med. Ctr.	Duarte, CA	USA
Cuka, Denis, J., MD	Anesthesiology	Univ. of Nebraska	Omaha, NE	USA
D				
Dalessio, Donald J., MD*	Neurology	Univ. of Kentucky	Lexington, KY	USA
Darras, Jean-Claude, MD			Angouleme	France
Davis, Hamilton S., MD	Anesthesiology	Univ. of California	Davis, CA	USA
DeBacker, Leo J., MD	Anesthesiology	Univ. of Iowa	Iowa City, IA	USA
DeBoer, B., PhD		Univ. of North Dakota	Grand Forks, ND	USA
Deahr, Donald D.		Medtronic, Inc.	Mission Viejo, CA	USA
De Jong, Rudolph H., MD*	Anesthesiology	Univ. of Washington	Seattle, WA	USA
DeLateur, Barbara, MD, MS*	Rehabilitation Med.	Univ. of Washington	Seattle, WA	USA
DeLisa, Joel A., MD	Rehabilitation Med.	Univ. of Washington	Seattle, WA	USA
Denniston, Rollin		Medtronic, Inc.	Minneapolis, MN	USA
Derrick, William S., MD	Anesthesiology	Univ. of Texas	Houston, TX	USA

Name	Specialty	Affiliation	City	Country
Diffenderffer, C. Rich		Wyeth Laboratories	Philadelphia, PA	USA
Dikmen, Sureyya, PhD,	Neuropsychology	Univ. of Washington	Seattle, WA	USA
Dong, Willie K., MD	Animal Physiology	Univ. of California	Davis, CA	USA
Dorsey, William E., MD			Minneapolis, MN	USA
Driscoll, Edward, DDS	Anesthesiology	NIH-NIDR	Bethesda, MD	USA
Dubner, Ronald, DDS, PhD*	Neural Mechanisms	NIH-NIDR	Bethesda, MD	USA
Dyck, Peter James, MD*	Neurology	Mayo Clinic	Rochester, MN	USA
E				
Edgar, Michael, MD		Rancho Los Amigos Hosp.	Downey, CA	USA
Edwards, B.E., MD	Anesthesiology		South Bend, IN	USA
Edwards, Henry S., MD	Rehabilitation Med.	Veterans Admin. Hosp.	Tucson, AZ	USA
Eisdorfer, Carl, PhD, MD	Psychiatry	Univ. of Washington	Seattle, WA	USA
El-Etr, Adel, MD*	Anesthesiology	Loyola Univ.	Maywood, IL	USA
El-Ghatit, A.Z., MD	Spinal Cord Injury	Veterans Admin. Hosp.	Wood, WI	USA
Erickson, Donald L., MD	Neurosurgery	Univ. of Minnesota	St. Paul, MN	USA
Evans, Frederick J., PhD*	Psychiatry	Univ. of Pennsylvania	Philadelphia, PA	USA
F				
Farber, Lawrence A., MD	Neurology	Noran Neurological Clin.	Minneapolis, MN	USA
Farber, Rober, MD		Abbott-Northwestern Hosp.	Minneapolis, MN	USA
Fetz, Eberhard E., PhD*	Neurosurgery	Univ. of Washington	Seattle, WA	USA
Fields, Howard L., MD, PhD*	Neurology	Univ. of California	San Francisco, CA	USA
Fields, R. Wayne, PhD	Biophysics	Univ. of Oregon	Portland, OR	USA
Finer, Basil, MB BS, MD, FFARCS, DA*	Anesthesiology	Univ. of Uppsala	Uppsala	Sweden
Fink, B. Raymond, MD*	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Fordyce, Wilbert, E., PhD*	Rehabilitation Med.	Univ. of Washington	Seattle, WA	USA
Freeman, Richard E., MD			Rochester, MN	USA
Friedman, Arnold P., MD*	Neurology	Montefiore Hospital	Bronx, NY	USA
Friedman, Harry, MD*	Neurology	Memphis Neurological Clin.	Memphis, TN	USA
G				
Gahery, Yves, DSc	Physiology/Biophysics	Univ. of Washington	Seattle, WA	USA
Galindo, Anibal, MD, PhD	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Ganz, Aaron, PhD	General Oral Sci.	NIH-NIDR	Bethesda, MD	USA
Ganz, Edward, MD	Neurosurgery	Univ. of Chicago	Chicago, IL	USA
Gardner, Ester P., PhD	Physiology/Biophysics	Univ. of Washington	Seattle, WA	USA
Gassell, M. Michael, MD, PhD			San Francisco, CA	USA
Geevarghese, K.P., MD	Anesthesiology	Univ. of Louisville	Louisville, KY	USA
Gehrig, John D., DDS, MSD	Oral Surgery	Univ. of Washington	Seattle, WA	USA
Gerber, Carl J., MD, PhD	Psychiatry	Veterans Admin. Hosp.	Seattle, WA	USA
Gerbershagen, Hans U., MD*	Anesthesiology	Johannes Gutenberg Univ.	Mainz	Germany
Gerfen, Charles O., PhD		Mallinckrodt Chemical	St. Louis, MO	USA
Ghia, Jawahar, MD	Anesthesiology	Univ. of North Carolina	Chapel Hill, NC	USA
Ghicadus, Chris, MD	Psychiatry	Univ. of Utah	Salt Lake City, UT	USA
Gildenberg, Philip, MD, PhD	Surgery	Univ. of Arizona	Tucson, AZ	USA
Gilles, Paul, MD		Abbott-Northwestern Hosp.	Minneapolis, MN	USA
Glotzner, Frank, MD	Neurosurgery	Univ. of Washington	Seattle, WA	USA
Green, Thomas, MD	Neuropsychology	Univ. of Washington	Seattle, WA	USA

Name	Specialty	Affiliation	City	Country
Gren, Ronald, E., DO			Detroit, MI	USA
Grendahl, Dennis		Medtronic, Inc.	Minneapolis, MN	USA
Gross, Dieter, MD*	Neurology	Neuromedizinisches Inst.	Frankfurt/Main	Germany
Gruber, Charles Jr., MD, DSc	Clinical Research	Lilly Labs	Indianapolis, IN	USA
Grunwald, Izso, MD	Anesthesiology		Montevideo	Uruguay
H				
Ha, Hong, Hien, MD		Milton S. Hershey Med. Ctr.	Hershey, PA	USA
Hagfors, Norman, BEE		Stimulation Technology Inc.	Minneapolis, MN	USA
Hall, Richard A., BS		Burroughs Wellcome	Seattle, WA	USA
Halliday, William R., MD	Labor & Industries	State of Washington	Olympia, WA	USA
Hallin, Rolf, MD*	Clin. Neurophysiol.	Univ. of Uppsala	Uppsala	Sweden
Halpern, Lawrence M., PhD*	Pharmacology	Univ. of Washington	Seattle, WA	USA
Harris, A. Basil, MD	Neurosurgery	Univ. of Washington	Seattle, WA	USA
Harris, John A., MD	Anesthesiology		San Diego, CA	USA
Haworth, Katherine, MA		Burroughs Wellcome	Research Tr Pk, NC	USA
Hayashi, Kazuhiko, MD			Takefu-shi	Japan
Heavner, James, DVM, PhD*	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Heggestad, Carl		Medtronic, Inc.	Minneapolis, MN	USA
Hongladarom, Thaworn, MD	Rehabilitation Med.	Univ. of Washington	Seattle, WA	USA
Hosick, Elizabeth C., MD	Anesthesiology	Univ. of Iowa	Iowa City, IA	USA
Hosobuchi, Yoshio, MD*	Neurosurgery	Univ. of California	San Francisco, CA	USA
Houde, Raymond, W., MD*	Neurology	Memorial Hospital	New York, NY	USA
Howland, Donald, MD	Anesthesiology		Phoenix, AZ	USA
Hsu, Mifoo			Bellevue, WA	USA
Hubbard, S. Thatcher, MD			Spokane, WA	USA
Hughes, Sharon, RN	Nursing	St. Francis Hospital	La Crosse, WI	USA
Hymes, Alan C., MD*		St. Louis Park Medical Ctr.	Minneapolis, MN	USA
I				
Iggo, Ainsley, DSc, PhD*	Veterinary Physiol	Univ. of Edinburgh	Edinburgh	UK
Indeck, Walter, MD	Orthopedic Surgery	St. Louis Park Medical Ctr.	Minneapolis, MN	USA
J				
Jacobs, Christopher A., PhD		General Medical Company	Los Angeles, CA	USA
Jacobs, Samuel, PhD*	Ergonomics	Univ. of California	Santa Barbara, CA	USA
Jenerick, Howard P., PhD		NIH-NIGMS	Bethesda, MD	USA
Jeppsen, E. Alan, MD	Psychiatry	Univ. of Utah	Salt Lake City, UT	USA
Johnson, Kendall, AB, JD*			Encino, CA	USA
Johnston, Richard R., MD	Anesthesiology	Univ. of California	San Francisco, CA	USA
Jones, Louisa E., BS	Editor	Univ. of Washington	Seattle, WA	USA
Judice, Donald J., MD	Neurosurgery	Louisiana State Univ.	New Orleans, LA	USA
K				
Kalin, Eugene, M., MD	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Kassil, Grigori, N., MD*	Physiology	Graschchenkov Lab., Acad. Sci.	Moscow	Russia
Katz, Jordan, MD*	Anesthesiology	Univ. of Wisconsin	Madison, WI	USA
Katz, Ronald L., MD	Anesthesiology	Univ. of California	Los Angeles, CA	USA
Kawamura, Yojiro, MD, DMSc*	Oral Physiology	Osaka Univ.	Osaka	Japan
Keats, Arthur S., MD*	Anesthesiology	Baylor College of Medicine	Houston, TX	USA
Kennedy, William F. Jr., MD	Anesthesiology	Univ. of Washington	Seattle, WA	USA

Name	Specialty	Affiliation	City	Country
Kepes, Edith R., MD	Anesthesiology	Albert Einstein College of Med.	Bronx, NY	USA
Kerr, Frederick W., MD*	Neurosurgery	Mayo Clinic	Rochester, MN	USA
Kespi, Jean Marcus, MD	Fac. Medicine	Ecole de Paris	Paris	France
Kilgore, Morris W., MD	Psychiatry		Tacoma, WA	USA
Kim, K.C., MD, PhD		Indiana Univ.	Indianapolis, IN	USA
Kimura, Chuji, MD*	Surgery	Kyoto Univ.	Kyoto	Japan
King, Robert B., MD*	Neurosurgery	State Univ. of New York	Syracuse, NY	USA
Kirby, Lee, MD	Rehabilitation Med.		Mercer Island, WA	USA
Kitahata, Luke M., MD, PhD*	Anesthesiology	Yale Univ.	New Haven, CT	USA
Klein, Frits, MD			Haarlem	Netherlands
Kobayashi, Yoshide, MD		Osaka Univ.	Osaka	Japan
Koker, Ahmet, MD	Anesthesiology	Univ. of Oklahoma	Oklahoma City, OK	USA
Kokmen, Emre, MD	Neurology	Univ. of Michigan	Ann Arbor, MI	USA
Kolouch, Fred T., MD, PhD	Psychiatry	Univ. of Utah	Salt Lake City, UT	USA
Koons, Shirlee B., MD		State Tumor Institute	Boise, ID	USA
Kreshover, Seymour, DDS, MD*	Director, NIDR	NIH-NIDR	Bethesda, MD	USA
Kruger, Lawrence, PhD*	Anatomy	Univ. of California	Los Angeles, CA	USA
L				
Lanman, Ben Marr, MD		Bristol-Myers Products	New York, NY	USA
Lansche, James M, MD	Neurosurgery		Pocatello, ID	USA
Lawrence, Van S., MD	Anesthesiology		Minneapolis, MD	USA
LeBlanc, Hector J., MD	Neurosurgery	Louisiana State Medical Ctr.	New Orleans, LA	USA
Leong, Seng Kee, BDS	Biological Structure	Univ. of Washington	Seattle, WA	USA
Levin, Norman, MD			Northridge, CA	USA
Liebeskind, John C., PhD*	Psychology	Univ. of California	Los Angeles, CA	USA
Lief, Philip A., MD	Anesthesiology	Brigham and Womens Hosp.	Boston, MA	USA
Lindahl, Olov, MD, PhD*	Orthopedic Surgery	Univ. Hospital	Linköping	Sweden
Linzer, Mark, BS*	Chemistry	Oberlin College	Oberlin, OH	USA
Lipton, Sampson, MB ChB*	Anesthesiology	Walton Hospital	Liverpool	UK
Loeser, John D., MD*	Neurosurgery	Univ. of Washington	Seattle, WA	USA
Long, Donlin M., MD, PhD*	Neurosurgery	Univ. of Minnesota	Minneapolis, MN	USA
Lynn, Bruce, PhD	Physiology	University College London	London	UK
M				
Mann, Michael D., PhD	Physiology/Biophysics	Univ. of Washington	Seattle, WA	USA
Mark, Vernon H., MD*	Neurosurgery	Boston City Hospital	Boston, MA	USA
Martin, Henry, MD	Friday Harbor Labs	Univ. of Washington	Friday Harbor, WA	USA
Martin, Virginia	Publisher	Raven Press	New York, NY	USA
Maruyama, Makio, MD		Univ. of Fukui	Fukui City	Japan
Mather, Laurence E., PhD	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Matheson, John J., MB BS	Anesthesiology	Yale Univ.	New Haven, CT	USA
Mayer, David J, PhD	Physiology	Medical College of Virginia	Richmond, VA	USA
Mayers, Katheleen, PhD	Rehabilitation Med.	Univ. of Washington	Seattle, WA	USA
McCluer, Shirley, MD	Rehabilitation Med.	New Mexico Rehab. Ctr.	Roswell, NM	USA
McDonald, Stanley, L., BS		Stimulation Technology	Minneapolis, MN	USA
McMillan, James A., PhD	Physiology/Biophysics	Univ. of Washington	Seattle, WA	USA
Mehler, William R., PhD*	Neurosciences	NASA-Ames Research Ctr.	Moffett Field, CA	USA
Melzack, Ronald, PhD*	Psychology	McGill Univ.	Montreal, PQ	Canada

Name	Specialty	Affiliation	City	Country
Merskey, Harold, DM, MRC Psych*	Psychiatry	National Hosp. Queen Sq.	London	UK
Miller, Alfred F., MD			Phoenix, AZ	USA
Miller, Bruce F., BS	Biological Structure	Univ. of Washington	Seattle, WA	USA
Mitchell, Clifford L., PhD		Riker Laboratories	St. Paul, MN	USA
Moffett, Ben, PhD	Orthodontics	Univ. of Washington	Seattle, WA	USA
Moore, Daniel C., MD	Anesthesiology	The Mason Clinic	Seattle, WA	USA
Mori, Kenjiro, MD	Anesthesiology	Kyoto Univ. Hosp.	Kyoto	Japan
Moricca, Guido, MD*	Anesthesiology	Istituto Regina Elena	Rome	Italy
Morrison, Philip, MD			Spokane, WA	USA
Mukai, Morinobu, MD			Fukuoka City	Japan
Mullan, John, MD, MB BCH, BAO*	Neurosurgery	Univ. of Chicago	Chicago, IL	USA
Mullett, Keith		Medtronic, Inc.	Minneapolis, MN	USA
Mumford, James M., PhD, MSc, MS*	Dental Surgery	Univ. of Liverpool	Liverpool	UK
Murphy, Terence M., MB ChB*	Anesthesiology	Univ. of Washington	Seattle, WA	USA
N				
Nakane, Fumio, MD			Sapporo	Japan
Nakatani, Yoshio, MD*	Anesthesiology	Neuro Medical Industry Co.	Osaka	Japan
Narimiya, Y., MD, PhD			Tokyo	Japan
Nashold, Blaine S. Jr., MD*	Neurosurgery	Duke Univ.	Durham, NC	USA
Needs, Ronald E., MD, FRCP	Anaesthesia	Sunnybrook Hospital	Toronto, ON	Canada
Nelms, George		Medtronic, Inc.	Minneapolis, MN	USA
Nelson, Kenneth M., MD	Neurosurgery	Univ. of New Mexico	Albuquerque, NM	USA
Newkom, Elizabeth H., MD			Huntington, NY	USA
Niino, T., MD			Yokohama	Japan
Noordenbos, William, MD, PhD*	Neurosurgery	Univ. of Amsterdam	Amsterdam	Netherlands
Nowlis, Gerald, MD	Labor & Industries	State of Washington	Olympia, WA	USA
Nyquist, Judith K., PhD	Neurosurgery	Veterans Admin. Hosp.	San Diego, CA	USA
O				
Ohiso, T., MD			Tokyo	Japan
Ojemann, George A., MD	Neurosurgery	Univ. of Washington	Seattle, WA	USA
Ominsky, Alan Jay, MD	Anesthesiology	Univ. of Pennsylvania	Philadelphia, PA	USA
Ong, Lincoln		Medtronic, Inc.	Minneapolis, MN	USA
Onofrio, Burton M., MD*	Neurosurgery	Mayo Clinic	Rochester, MN	USA
Orne, Martin P., MD, PhD*	Psychiatry	Univ. of Pennsylvania	Philadelphia, PA	USA
Owen, Richard R., MD	Physical Therapy		Minneapolis, MN	USA
P				
Pagni, Carlo A., MD*	Neurosurgery	Univ. of Milan	Milan	Italy
Papper, Emmanuel, MD	Anesthesiology	Univ. of Miami	Miami, FL	USA
Parker, Robert G., MD*	Radiology	Univ. of Washington	Seattle, WA	USA
Patton, Harry D., PhD, MD*	Physiology/Biophysics	Univ. of Washington	Seattle, WA	USA
Paul, Ronald L., MD	Neurosurgery	Univ. of Maryland	Baltimore, MD	USA
Perl, Edward R., MD*	Physiology	Univ. of North Carolina	Chapel Hill, NC	USA
Pesch, Robert N., MD			Downers Grove, IL	USA
Peterson, Betty D., MSW	Social Work	Univ. of Washington	Seattle, WA	USA
Pinsky, Jack, MD	Psychiatry		Los Angeles, CA	USA

Name	Specialty	Affiliation	City	Country
Prestbo, Wallace J., BS		Burroughs Wellcome Co.	Renton, WA	USA
Prevoznik, Stephen J., MD	Anesthesiology	Univ. of Pennsylvania	Philadelphia, PA	USA
Price, Donald D., PhD	Physiology	Medical College of Virginia	Richmond, VA	USA
Printy, A.L., RN	Nursing		Minneapolis, MN	USA
Procacci, Paolo, MD*	Internal Medicine	Univ. of Florence	Florence	Italy
R				
Rafkind, Murray, MD	Psychiatry	Univ. of Washington	Seattle, WA	USA
Ray, Charles, MD		Medtronic, Inc.	Minneapolis, MN	USA
Rayport, Mark, MD, CM, PhD	Neurosurgery	Medical College of Ohio	Toledo, OH	USA
Ré, Osvaldo N., MD		Riker Laboratories	Northridge, CA	USA
Rippy, William D., MD			San Leandro, CA	USA
Roberts, Alan, MD			St. Paul, MN	USA
Roberts, William, PhD	Neurophysiology	Good Samaritan Hospital	Portland, OR	USA
Rosomoff, Hubert L., MD*	Neurosurgery	Univ. of Miami	Miami, FL	USA
Rossano, Carlo, MD	Anesthesiology	Ospedale Regionale	Ancona	Italy
Rubenstein, Charles		Avery Labs	Farmingdale, NY	USA
Ruch, Theodore C., MD*	Physiology/Biophysics	Univ. of Washington	Seattle, WA	USA
Rushmer, Donald S., PhD	Neurophysiology	Good Samaritan Hospital	Portland, OR	USA
S				
Sato, Toru, MD*	Anesthesiology	Univ. of California	Los Angeles, CA	USA
Schneider, Richard J., PhD	Neurosurgery	Univ. of Maryland	Baltimore, MD	USA
Schwettmann, Rick, MD	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Scott, Donald Jr., PhD	Physiology	Univ. of Pennsylvania	Philadelphia, PA	USA
Scurlock, James E., MD	Anesthesiology	Univ. of Washington	Seattle, WA	USA
See, Donald H, MD	Rehabilitation Med.	Univ. of Washington	Seattle, WA	USA
Sen, Anjan K., MD	Neurosurgery	Kadlec Hospital	Richland, WA	USA
Service, Robert W.		Riker Laboratories	Northridge, CA	USA
Sharpe, Ted		Pfizer Labs.	Seattle, WA	USA
Shealy, C. Norman, MD*	Neurosurgery	Pain Rehabilitation Ctr.	La Crosse, WI	USA
Sheppard, Catherine, MD	Anesthesiology	Stanford Univ.	Stanford, CA	USA
Sicuteri, Federigo, MD*	Neurology	Univ. of Florence	Florence	Italy
Silverstein, Paul M., MD			Minneapolis, MN	USA
Simons, David G., MD	Rehabilitation Med.		Bellevue, WA	USA
Sitter, Stephen C., MD			Fort Ord, CA	USA
Sivarajan, Murali, MD	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Smith, Gene M., PhD*		Lindemann Mental Health Ctr.	Boston, MA	USA
Smith, Marion C., MD, FRCP	Neurology	National Hosp. Queen Sq.	London	UK
Snow, Peter, PhD	Friday Harbor Labs	Univ. of Washington	Friday Harbor, WA	USA
Sola, Anders, MD	Rehabilitation Med.		Seattle, WA	USA
Squire, A.W., MB BCH, FFARACS	Anesthesiology	Memorial Univ.	St John's, NF	Canada
Stamell, John, MB BS	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Stanton-Hicks, M. d'A, MB BS	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Starkman, Sidney, MD		NIH	Bethesda, MD	USA
Sternbach, Richard A., PhD*	Psychology	Veterans Admin. Hosp.	San Diego, CA	USA
Stolov, Walter C., MD	Rehabilitation Med.	Univ. of Washington	Seattle, WA	USA
Storch, Ed		Medtronic, Inc.	Minneapolis, MN	USA
Stratten Wilford, PhD		Pfizer, Inc.	Groton, CT	USA

Name	Specialty	Affiliation	City	Country
Straw, Robert W., PhD		Upjohn Co.	Kalamazoo, MI	USA
Sugioka, Kenneth, MD	Anesthesiology	Univ. of North Carolina	Chapel Hill, NC	USA
Sumino, Rhyuji, MD, PhD		NIH-NIDR	Bethesda, MD	USA
Sunshine, Abraham, MD*	Internal Medicine		New York, NY	USA
Swanson, David W., MD	Psychiatry	Mayo Clinic	Rochester, MN	USA
Sweet, William H., MD, DSc*	Neurosurgery	Massachusetts General Hosp.	Boston, MA	USA
T				
Taite, Barrie, MD	Physical Medicine	Auckland Hospital	Auckland	New Zealand
Tacke, Richard B.		Univ. of Oregon	Portland, OR	USA
Taub, Arthur, MD, PhD*	Neurology	Yale Univ.	New Haven, CT	USA
Taylor, William M., PhD	Behavioral Sciences	NIH-NIGMS	Bethesda, MD	USA
Teel, Steven, DDS	Restorative Dentistry	Univ. of Washington	Seattle, WA	USA
Tenicela, Rubin, MD	Anesthesiology	Univ. of Pittsburgh	Pittsburgh, PA	USA
Testerman, Roy, PhD		Medtronic, Inc.	Minneapolis, MN	USA
Thompson, Gale E., MD	Anesthesiology	Virginia Mason Hosp.	Seattle, WA	USA
Torebjörk, Erik, MD*	Clin. Neurophysiology	Univ. of Uppsala	Uppsala	Sweden
Towe, Arnold L.	Physiology/Biophysics	Univ. of Washington	Seattle, WA	USA
Trevino, Daniel, PhD	Physiology	Univ. of North Carolina	Chapel Hill, NC	USA
Truant, Aldo P., PhD*	Pharmacology	Pennwalt Corporation	Rochester, NY	USA
Tseng, Chin-kai, MD, PhD	Anesthesiology	Kaohsiung Medical College	Kaohsiung	Taiwan
Tucker, Geoffrey, PhD	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Turnbull, Frank, MD, FRCS			Vancouver, BC	Canada
Turner, Paul T., MD	Neurosurgery	Univ. of Washington	Seattle, WA	USA
U				
Urban, Bruno J., MD	Anesthesiology	Duke Univ.	Durham, NC	USA
Usubiaga, Lilia E., MD	Anesthesiology		Miami, FL	USA
V				
Van Atta, Loche, PhD*	Psychology	Oberlin College	Oberlin, OH	USA
Van Citters, Robert L., MD*	Dean of Medicine	Univ. of Washington	Seattle, WA	USA
Ventafridda, Vittorio, MD*	Anesthesiology	Ist. Nazionale de Tumori	Milan	Italy
Von Euler, Leo, MD		NIH-NIGMS	Bethesda, MD	USA
Von Wolff, Alexander, MD	Anesthesiology	Virginia Mason Hospital	Seattle, WA	USA
Vyklicky, Ladislav, MD, DSc*	Physiology	Charles University	Prague	Czech Rep.
W				
Wagman, Irving H., PhD*	Physiology	Univ. of California	Davis, CA	USA
Wall, Patrick D., MA, DM*	Physiology	University College London	London	UK
Waller, Hardress J., PhD	Neurosciences	Medical College of Ohio	Toledo, OH	USA
Ward, Jr., Arthur A., MD*	Neurosurgery	Univ. of Washington	Seattle, WA	USA
Weinstein, Mark		Avery Labs	Farmingdale, NY	USA
Weisbrod, Stephen P.		Medtronic, Inc.	Minneapolis, MN	USA
Wepsic, James G., MD	Neurosurgery	Massachusetts General Hosp.	Boston, MA	USA
Westrum, Lesnick E., MD, PhD*	Neurosurgery	Univ. of Washington	Seattle, WA	USA
Wever, Robert C., MD			Scottsdale, AZ	USA
Whalen, Daniel A., MD	Anesthesiology	Cincinnati General Hosp.	Cincinnati, OH	USA
White, James C., MD*	Neurosurgery	Massachusetts General Hosp.	Boston, MA	USA
Whitehorn, David, PhD	Physiology	Univ. of Vermont	Burlington, VT	USA
Willkins, Robert F., MD*	Rheumatology	Univ. of Washington	Seattle, WA	USA

Name	Specialty	Affiliation	City	Country
Wilson, Frederick S., MD	Medical Services	McNeil Laboratories	Ft Washington, PA	USA
Wilson, J.R., BS		Burroughs Wellcome	Research Tri Pk, NC	USA
Wilson, Michael, MD	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Winnie, Alon P., MD*	Anesthesiology	Univ. of Illinois	Chicago, IL	USA
Wong, K.C., MD, PhD	Anesthesiology	Univ. of Washington	Seattle, WA	USA
Worsham, Nancy G., MD	Rehabilitation Med.	Univ. of Washington	Seattle, WA	USA
Y				
Yamashita, Kumio, MD	Anesthesiology		Tokyo	Japan
Z				
Zimmermann, Manfred, Prof.*	Physiology	Univ. Heidelberg	Heidelberg	Germany