The Hong Kong College of Anaesthesiologists

Final Fellowship Examination in Pain Medicine

Written Examination

Paper One (Compulsory Questions)

22 June 2026 (Monday)

09:00 – 10:30 hrs

Instructions:

I. This Question Paper carriers a total of six short answer questions.

II. Please answer **ALL** questions and they carry equal marks.

III. Please write your answer for each question in the appropriate "Pre-labelled" Answer Book

IV. Record your candidate number and question number on each answer book.

V. Use ink or ball-point pen.

Compulsory Questions (answer all questions)

1. A 58-year-old woman presents with a 3-month history of burning pain and electric-shock sensations in both feet.

    a) Define neuropathic pain and outline the key diagnostic features and classification used in IASP and ICD-11. (30%)

    b) Describe the underlying peripheral and central mechanisms of neuropathic pain. Give examples of clinical conditions that commonly cause neuropathic pain. (30%)

    c) Describe how a Quantitative Sensory Test (QST) can facilitate the diagnosis and management of neuropathic pain. (40%).

2. A 60-year-old man with Nasopharyngeal Carcinoma (NPC) treated with chemo-radiotherapy 1 year ago presents with a chronic, diffuse headache (NRS 8/10). He reports a recent foul-smelling nasal discharge and occasional epistaxis. Standard simple analgesics have provided no relief.

    a) Discuss the differential diagnosis for this patient's headache, prioritizing those related to his previous oncological treatment. (30%)

    b) Formulate the diagnostic and pain management plan for suspected osteoradionecrosis (ORN) of the skull base. (70%)

3. A patient is referred to your clinic for widespread (or multiple sites) musculoskeletal pain. How are you differentiating fibromyalgia from myofascial pain syndrome in terms of clinical presentation, assessment and management?

4. A 40-year-old woman with chronic non-cancer pain has been on escalating doses of Oxycodone, now reaching 80mg/day with stagnant functional progress. Critically evaluate the role of strong opioids in this patient and formulate a holistic management plan to address potential opioid-related risks.

5. A 78-year-old female presents with sudden-onset, severe midline back pain following a minor fall. She has a history of gastroesophageal reflux managed with long-term proton pump inhibitors (PPIs). Imaging confirms an acute T12 vertebral compression fracture without neurological compromise.

    a) Outline your initial pain assessment (40%)

    b) How would you formulate the management plan for this patient, addressing both the acute phase and long-term care? (60%)

6. A 32-year-old man presents with severe recurrent unilateral headaches focused around one eye and the occipital region.

   a) Classify headache disorders into primary and secondary types, giving examples, and list clinical features that would cause concern and warrant urgent further assessment. (30%)

   b) Define cluster headache, including its epidemiology and key clinical characteristics, and describe any overlap with symptoms with migraine. (30%)

   c) In this patient with suspected cluster headache, state what medical imaging is indicated and outline acute and preventive management, including the role of nerve blockade. (40%)

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