

The Thermal Grill as a Tool to Investigate Analgesic Clinical Pharmacology

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June 2014

A thesis submitted in fulfilment of the requirements for the degree Doctor of Philosophy

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Abstract

Human experimental pain models are important aids in the study of pain mechanisms, and have been extensively used in clinical drug development to demonstrate the analgesic potential of new compounds. However, the peripheral nature of such pain models makes it difficult to separate the peripheral and central mechanisms of pain. Whilst peripheral mechanisms underlie acute pain, central mechanisms are believed to underlie chronic pain conditions; therefore using an illusion to trick the brain into believing it is experiencing pain may allow investigation of these central mechanisms. One such illusion is the thermal grill illusion, where interlaced innocuous warm and cool temperature bars (thermal grill) produce a paradoxical burning pain sensation. Considering the uniqueness of the thermal grill illusion and the thermal grills' potential ability to investigate the interaction between the nociceptive and thermoreceptive pathways, the objective of this thesis was to investigate whether the response to the thermal grill was tolerable in patients with chronic pain to determine whether the thermal grill illusion could be used to screen for novel centrally acting analgesics in the future. Previously the response to the thermal grill had not been systematically investigated in patients with chronic pain. In order to address this objective, the response to the thermal grill illusion was characterised in pain-free participants, in patients with heterogeneous chronic pain conditions and also in patients with homogenous chronic pain conditions to determine 1) whether the response to the thermal grill differs between pain-free participants and patients with chronic pain, 2) whether the response to the thermal grill differs between body location and body side and 3) whether the thermal grill can differentiate chronic pain phenotypes. In addition, the response to the thermal grill was longitudinally

investigated in patients with chronic medication overuse (MOH) and chronic tension-type headache (CTTH) whom were receiving a novel pharmacological and non-pharmacological therapy for their headaches respectively. Initial studies demonstrated a reduced response to the thermal grill illusion in patients with heterogeneous chronic pain compared to pain-free participants. Although not significant, subsequent studies revealed a similar pattern of reduced response in patients with chronic sciatica pain and CTTH, suggesting that any real differences observed in the previous study were not robust or that the true effect size was small. Amongst all populations, the average intensity of pain experienced from the thermal grill illusion was quite low, thus questioning the utility of the thermal grill as a model to assess the efficacy of analgesics, given the inability of the thermal grill test to reach the clinically relevant substantial pain threshold. Additionally, the test-retest reliability of the thermal grill response over time in patients with MOH and CTTH was poor, further questioning the thermal grills' ability to longitudinally assess the efficacy of analgesics. Although the thermal grill is unlikely to be a suitable tool to assess the efficacy of analgesics, the thermal grill may still be a useful tool to better understand the physiology of pain, given the paradoxical reduced pain observed in patients with certain types of chronic pain.

Declaration

I certify that this work contains no material which has been accepted for the award of any other degree or diploma in my name, in any university or other tertiary institution and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text.

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Nicole M. Sumracki

.....
Date

Acknowledgements

I would like to start by thanking my three supervisors, Prof. Paul Rolan, Dr. Femke Buisman-Pijlman and A/Prof. Mark Hutchinson for their guidance, support and encouragement throughout my PhD candidature. Your ongoing belief, faith and trust in me as an individual and as an independent researcher has helped shape me into the person I am today, and I thank you for that immensely.

The research presented in this thesis was made possible by an Australian Postgraduates Award, as well as support from the Pain and Anaesthesia Research Clinic. Throughout my candidature I was fortunate to present my research locally, nationally and internationally, which was made possible by the travel grants provided to me by the Australian Pain Society, the Faculty of Health Sciences (University of Adelaide), the School of Medical Sciences (University of Adelaide), as well as my supervisor Prof. Paul Rolan.

I would also like to acknowledge and personally thank the following people for their contribution to my research: Melanie Gentgall and all the staff at the Pain and Anaesthesia Research Clinic for their assistance during my clinical trials and all the laughs in between; Nigel Kelly from Flinders Biomedical Engineering (Flinders University) for the design and construction of the thermal grill; Dr. John Semmler from the Discipline of Physiology (University of Adelaide) for the kind use of study equipment; Prof. Lorimer Moseley and the team at the Body in Mind Research Institute (University of South Australia) for the generous use of study equipment and laboratory space, and for always making me feel welcome in their clinical laboratory;

Dale Caville from the Discipline of Anatomy and Pathology (University of Adelaide) for the production and printing of my novel thermal colour bar, as well as the professional image of the thermal grill; and my fellow PhD colleagues Yuen Kwok, Jacinta Johnson and James Swift from the Discipline of Pharmacology (University of Adelaide) for their assistance in patient recruitment for chapters 3, 5 and 7 respectively.

Undergoing a PhD is not only about arriving at a particular destination, but also about enjoying the journey, therefore I would like to take this opportunity to thank all past and present PhD candidates in the ‘post grad room’ (room N511C) for all the laughs, gossip sessions, YouTube videos, memes, imgurs, Facebook stalking, music, coffees, lunches and drinking sessions. These all kept me sane and made this journey much more enjoyable.

To my extended family (grandparents, aunts, uncles, cousin, as well as my dearly departed grandparents and our angel Georgia): thank you for always believing in me; for your enthusiasm and encouragement; hugs and kisses; for always thinking I’m smarter than I actually am and for all of the laughs at our ‘small’ family gatherings. The closeness as a family that we share is unbelievable and I could not imagine my life without each and every one of you in it.

To my girls, my besties and my sisters from another mister, Kassi, Dani and Lauren: our phone chats, texts, tea breaks, Saturday morning market catch-ups, dinners, nights out, and your continued friendship, support and understanding has kept me sane

throughout this PhD journey. I am forever grateful for our friendship and will continue to cherish it for years to come. I would also like to thank my friend and mentor Dr. Margaret Centenera for her support and encouragement to keep focussed and keep writing, whether over a coffee, wine or port!

To my mother and father in law (Jasminka and Jovanco), sister and brother-in-law (Daniela and Pejo), and my gorgeous nephew (Jovan) and nieces (Elena and Katarina): thank you all for welcoming me into your family with open arms and for your constant love, support, friendship, kisses and cuddles. I love you all.

To my sister, best friend and business partner Martha: thank you for always being there for me, through thick and thin and through the good times and the bad. We've shared lots of laughs, lots of tears, had lots of fun, our fair share of sibling arguments and have spent countless hours making delicious raw desserts for our business Nutrition Republic. Thank you for your unconditional love and friendship and thank you for giving me a precious nephew, whom I love with all my heart. To my nephew Louis, thank you for allowing me to experience an unbelievable love. Your smile literally melts my heart. To my brother-in-law and business partner Terry, thank you for your friendship and for understanding that Martha and I come together in one package and that you're stuck with me for life. I look forward to the future and our future business ventures together.

To my parents Peter and Patty: I will be forever grateful for your unconditional love, support, encouragement, guidance, friendship and financial assistance since the day I

was born. This has shaped me into the person that I am today. Without you both, I would not have been able to undertake this PhD, and for that I am forever grateful. From the bottom of my heart I thank you for all that you have done for me, it is truly above and beyond that what most parents do for their children. I love you both and could not imagine my life without you two.

Last, but not least, a massive thank you to my husband, best friend and business partner Ilija for your unconditional love, continued support, constant encouragement and reassurance, sacrifice and patience. You have been on this rollercoaster journey with me each and every step of the way, and for that you deserve a PhD too! As this enormous door now finally closes, I am looking forward to the many more that we will open together. I love you and could not have done this without you.

Abbreviations

5-HT	Serotonin
5-HTT	Serotonin transporter
ACC	Anterior cingulate cortex
AIDS	Acquired immunodeficiency syndrome
AMHs	A- δ mechano-heat nociceptive afferents
ANOVA	Analysis of variance
ASI	Anxiety severity index
BAC	Breath alcohol concentration
BDI-II [®]	Beck Depression Inventory [®] -II
BMI	Body mass index
C-warm	C-fibres responsive to warm
C2	C-fibres responsive to cold, warmth and heat
CAP	Capsaicin
CH	C-fibres responsive to noxious heat
CI	Confidence interval
CMH	C-fibres responsive to noxious mechanical and heat stimuli
CMHC	C-fibres responsive to noxious mechanical, heat and noxious cold stimuli
COLD	Lamina I thermoreceptive specific cells
CPT	Cold pain threshold
CRPSI	Chronic regional pain syndrome type I
CTTH	Chronic tension-type headache
CU	Clinical unit
CWC	Warm stimulus flanked by two cool stimuli
EEG	Electroencephalography
EPT	Electrical pain threshold
F	Female
fMRI	Functional magnetic resonance imaging
GFR	Glomerular filtration rate
HADS	Hospital anxiety and depression scale
HADS-A	Hospital anxiety and depression scale (anxiety)
HADS-D	Hospital anxiety and depression scale (depression)
Hep B	Hepatitis B
Hep C	Hepatitis C

HIV	Human immunodeficiency virus
HPA	Hypothalamo-pituitary-adrenal
HPC	Lamina I multimodal cells
HPT	Heat pain threshold
i.d.	Intradermal
IQR	Interquartile range
LFTs	Liver functions tests
M	Male
mA	Milliampere
MDD	Major depressive disorder
MDvc	Ventral caudal medial dorsal nucleus
MOH	Medication overuse headache
MS	Multiple sclerosis
NNT	Number needed to treat
NRS	Numerical rating scale
NS	Nociceptive specific cells
NSAIDs	Non-steroidal anti-inflammatory drugs
°C	Degrees celcius
OIH	Opioid induced hyperalgesia
P	Pearson
PARC	Pain and anaesthesia research clinic
PET	Positron emission tomography
QST	Quantitative sensory testing
S	Spearman
S1	Primary somatosensory cortex
S2	Secondary somatosensory cortex
SCL-90-R®	Symptom checklist-90-R
SD	Standard deviation
SEM	Standard error of the mean
SMT	Spinomesencephalic
SRT	Spinoreticular tract
STAI	State trait anxiety index
STAI-T	State trait anxiety index (trait)
STT	Spinothalamic tract
tDCS	Transcranial direct current stimulation
TG	Thermal grill

TGI	Thermal grill illusion
TLR-4	Toll-like receptor 4
TLRs	Toll-like receptors
TMS	Transcranial magnetic stimulation
TRPA1	Transient receptor potential ankyrin 1
TRPM8	Transient receptor potential melastatin 8
TRPV1	Transient receptor potential vanilloid 1
TRPV2	Transient receptor potential vanilloid 2
TRPV3	Transient receptor potential vanilloid 3
TRPV4	Transient receptor potential vanilloid 4
VAS	Visual analogue scale
VMpo	Posterior aspects of ventral medial nucleus
VP	Ventral posterior nucleus
VPI	Ventro-posterior-inferior nuclei
VPL	Ventro-posterior-medial thalamic nuclei
WARM	Lamina I warm cells
WCW	Cool stimulus flanked by two warm stimuli
β -CD	Hydroxypropyl- β -cyclodextrin