

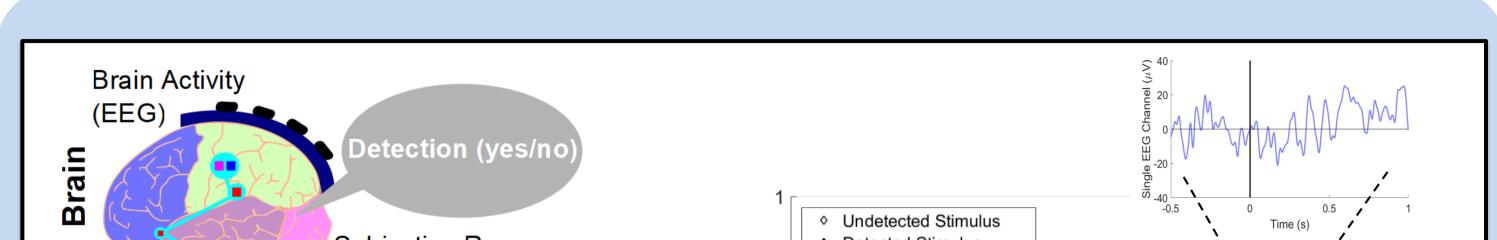
OBSERVING ELECTRICAL BRAIN RESPONSES AROUND THE NOCICEPTIVE DETECTION THRESHOLD

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Introduction

There is a lack of objective measures providing insight into key



neural mechanisms underlying chronic pain, such as central sensitization and deficient descending inhibition.

- Recently, we combined psychophysical Multiple Threshold Tracking with brain Evoked Potentials (MTT-EP method) to study neurophysiological activity related to processing of single and double pulse electro-nociceptive stimuli¹.
- Results from pain-free subjects measured at the University of Twente suggest that the MTT-EP method might be a promising step toward a diagnostic tool for chronic pain patients¹.

Study objectives

- 1. Explore the replicability and feasibility of the MTT-EP method in painfree subjects and chronic pain patients at a hospital environment.
- 2. Observe the behavior of neurophysiological and psychophysical measures (detection thresholds and cortical activity in response to stimuli) in failed back surgery syndrome (FBSS) patients.

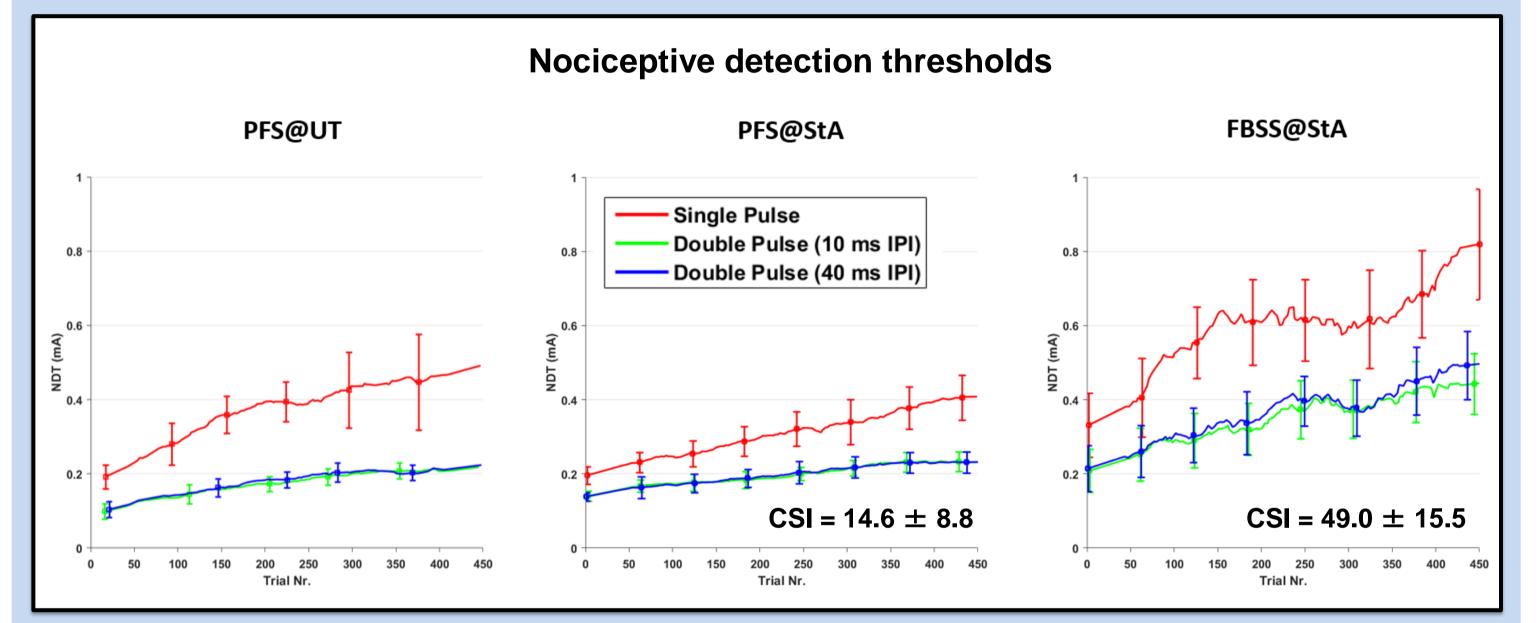
Subjective Response Detected Stimulus -NDT (Detection Threshold) — Single Pulse Double Pulse (10 ms IPI) Double Pulse (40 ms IPI) Spinal ES-5 AmbuStim Trial Nr. NocitRACK NoP A-beta fibers A-delta fibers C fibers

Figure 1. In total 450 stimuli, consisting of three different stimulus types, were randomly applied to the subjects by intra-epidermal stimulation (IES-5) electrodes using the Multiple Threshold Tracking paradigm. Subsequently, the nociceptive function is assessed by stimulus-response pairs (NDTs) and stimulus-related brain activity (EPs).

Methods

Quantitative assessment of nociceptive sensitivity

- Pain-free subjects (n=17) and FBSS patients (n=7) underwent a measurement using the MTT-EP method at St. Antonius Hospital.
- Nociceptive Detection Thresholds (NDTs) and Evoked Potentials

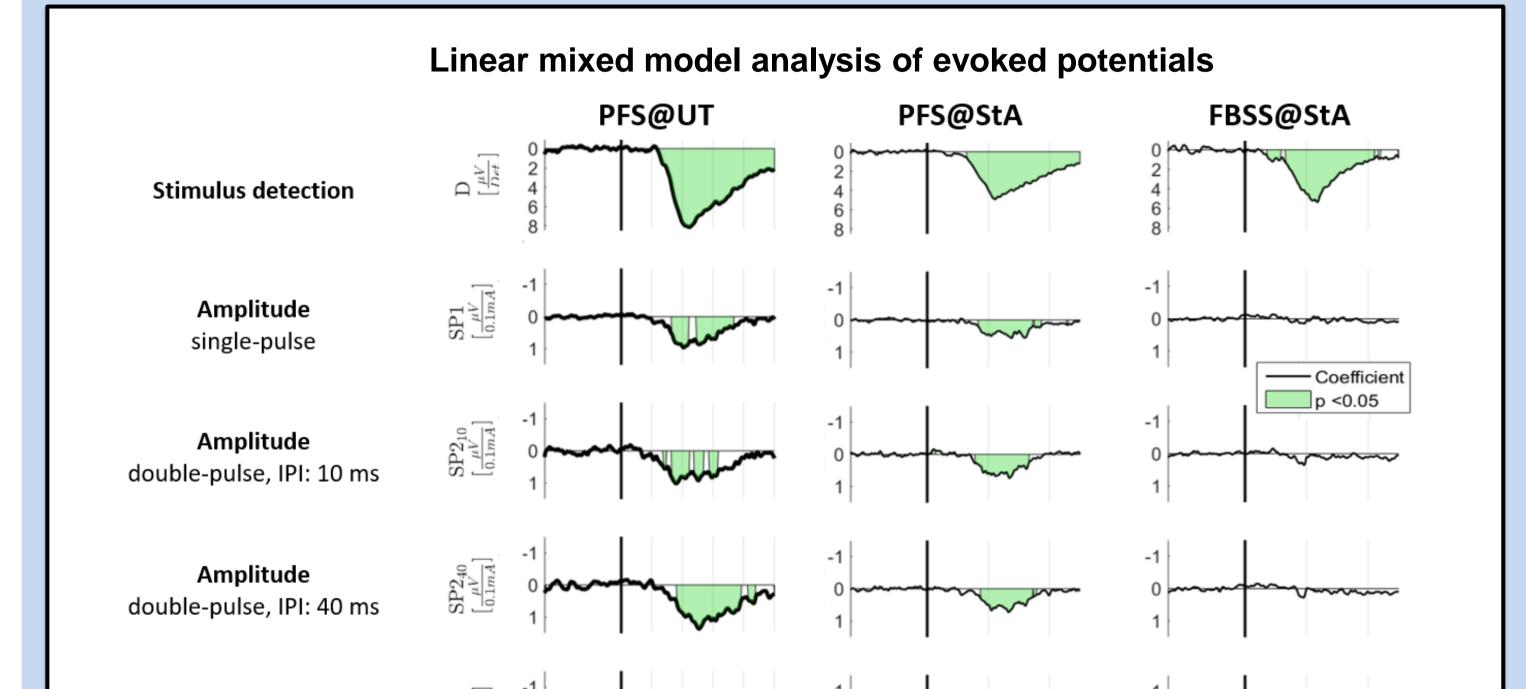


(EPs) were observed to describe central sensitization.

MTT-EP method

- 1. Activating specific nociceptive (Að) fibers by electrical stimulation.
- 2. Tracking detection probability and thresholds using an adaptive stimulus sequence (MTT paradigm).
- 3. Measurement of subjective response to every stimulus (NDTs).
- 4. Measurement of stimulus-related response in the EEG-signal with respect to every stimulus (EPs).

Figure 2. Estimated average NDTs are shown from 25 pain-free subjects at University of Twente (left), 17 pain-free subjects at St. Antonius Hospital (middle) and 7 FBSS patients at St. Antonius Hospital (right). Similar values of thresholds and phenomena (habituation) are seen in pain-free subjects. Higher (initial) NDTs are found in FBSS patients.



Results

Replicability of results in pain-free subjects

- Similar values of (initial) NDTs and phenomena (habituation and paired-pulse facilitation) in pain-free subjects.
- Similar EP profiles which are modulated by stimulus detection, amplitudes and number of stimuli.

Altered behavior in FBSS patients

- Higher (initial) NDTs.
- EPs modulated by stimulus detection, not by amplitudes and number of stimuli.

Conclusion

- Results of the MTT-EP method can be replicated in a hospital environment since similar phenomena in NDTs and EPs are observed in pain-free subjects at St. Antonius Hospital.
- Behavior of NDTs and EPs in FBSS patients seems to be altered.

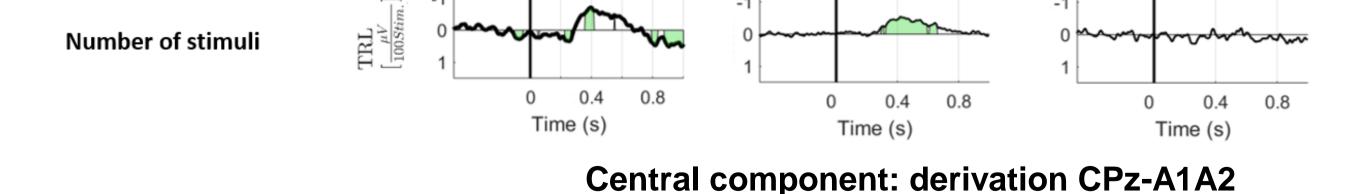


Figure 3. We found that EPs in pain-free subjects are strongly modulated by conscious stimulus detection, amplitudes and number of stimuli (habituation), which are in line with results from the University of Twente. Strikingly, in FBSS patients we found EPs appeared modulated only by stimulus detection.

References 1. Van den Berg, B., Buitenweg, J.R., Analysis of Nociceptive Evoked Potentials during Multi-Stimulus Experiments using Linear Mixed Models, IEEE EMBC2018, Honolulu, US.

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