A Single-dose, Placebo-controlled, Cross-over Study To Evaluate Lpsinduced Hyperalgesia In Healthy Volunteers

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Background and aims

PainCart[®], CHDR's comprehensive and validated nociceptive test battery, is used in early-phase clinical studies investigating the analgesic effect of novel compounds. This study investigated whether intravenous administration of lipopolysaccharide (LPS), when combined with evoked pain tests, is suitable as a pharmacological model to study treatments for inflammatory pain.

Methods

This was a placebo-controlled, randomized, crossover study in 24 healthy males. Twelve subjects were administered a bolus of 1ng/kg LPS intravenously, and twelve 2ng/kg LPS. Before days of placebo/LPS administration, subjects completed a full study day without any administration, but with identical pain threshold testing. PainCart[®] (Electrical burst and -stair, Heat, Pressure and Cold pressor test) and blood sampling were performed pre-dose and up to 10hr post-dose. Data were analysed with a repeated-measures ANOVA.

Results

Mean age was 30.8 ± 9.5 years. Overall, no significant effect on pain detection- or tolerance thresholds (PDT, PTT) or Area Under the Curve (AUC) was found in any of the PainCart[®] modalities. Results suggest that LPS solely has a subtle hyperalgesic effect around 2-4hrs post-LPS administration in selected PainCart[®] modalities (Figure 1), corresponding with the cytokine and stress hormone concentration peaks (e.g. TNF- α : Figure 2).

Conclusions

This study found that the human endotoxemia model is not suitable for studying inflammatory hyperalgesia in healthy volunteers.

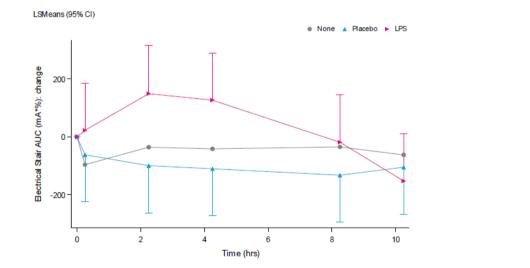


Figure 1: Electrical Stair test results: AUC after 2ng/kg LPS administration

Figure 2ng/kg

LSMeans (95% CI)

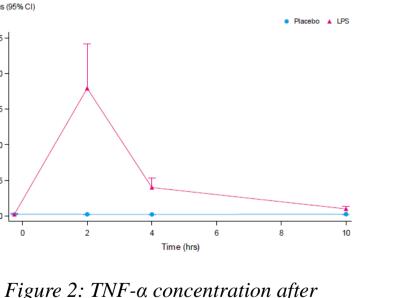
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2ng/kg LPS administration



