

# Development of nociception and pain

Suellen Walker

MBBS MMed MSc PhD FFPMANZCA

Professor of Paediatric Anaesthesia and Pain Medicine  
UCL GOS Institute of Child Health & Great Ormond Street Hospital  
London, UK



Great Ormond Street  
Hospital for Children

NHS Foundation Trust



**UCL**  
GREAT ORMOND STREET  
INSTITUTE OF CHILD HEALTH

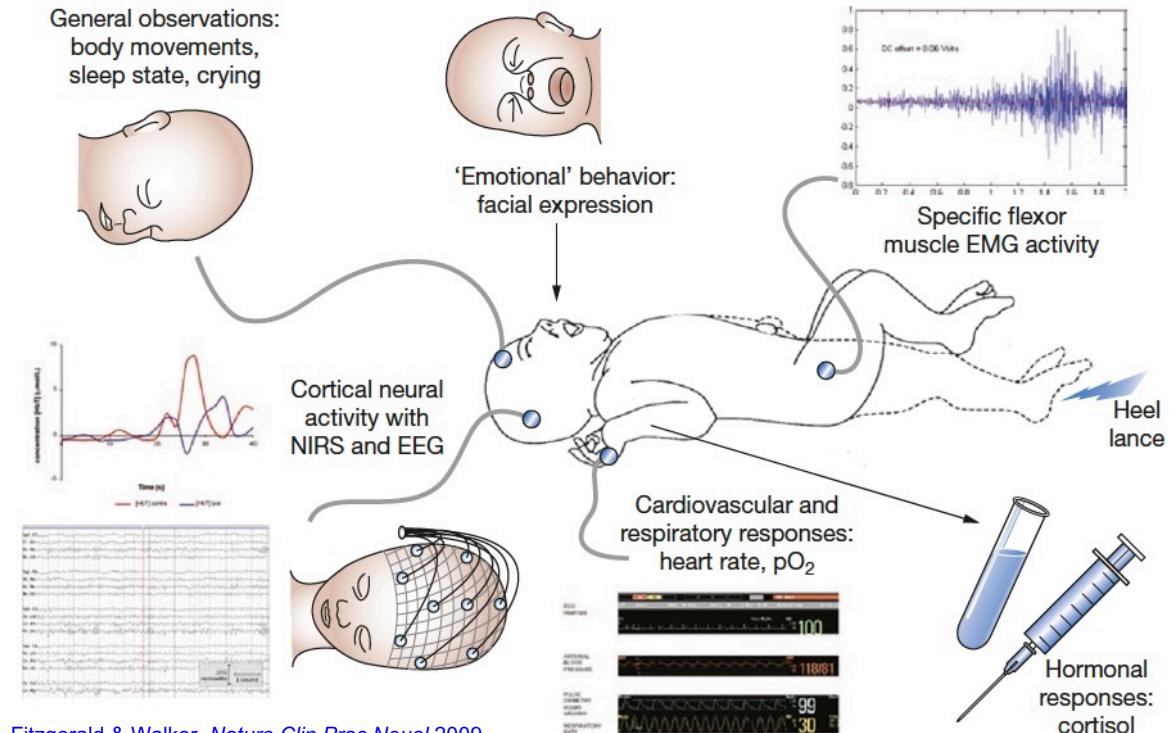
- **definitions**
  - nociception and pain
- **developing nociceptive pathways**
  - balance of excitation and inhibition
- **analgesia**
  - maintaining balance
- **type of injury**
  - mechanisms and targets

*NO CONFLICTS OF  
INTEREST TO DECLARE*

# Nociception and Pain

# *Nociception*

- neural process of encoding noxious stimuli
  - neurophysiological response
    - functional after birth
    - periphery to cortex
  - plus...
    - behaviour
    - autonomic
    - stress response



## Pain

- unpleasant sensory and emotional experience associated with, or resembling that associated with, actual or potential tissue damage

IASP Revised Definition

Raja et al. *Pain* 2020



Pain and nociception are different phenomena. Pain cannot be inferred solely from activity in sensory neurons



Verbal description is only one of several behaviors to express pain; inability to communicate does not negate the possibility that a human or a nonhuman animal experiences pain

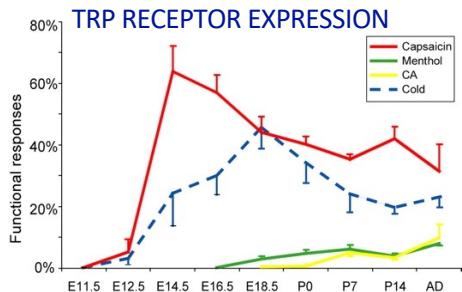


Although pain usually serves an adaptive role, it may have adverse effects on function and social and psychological well-being

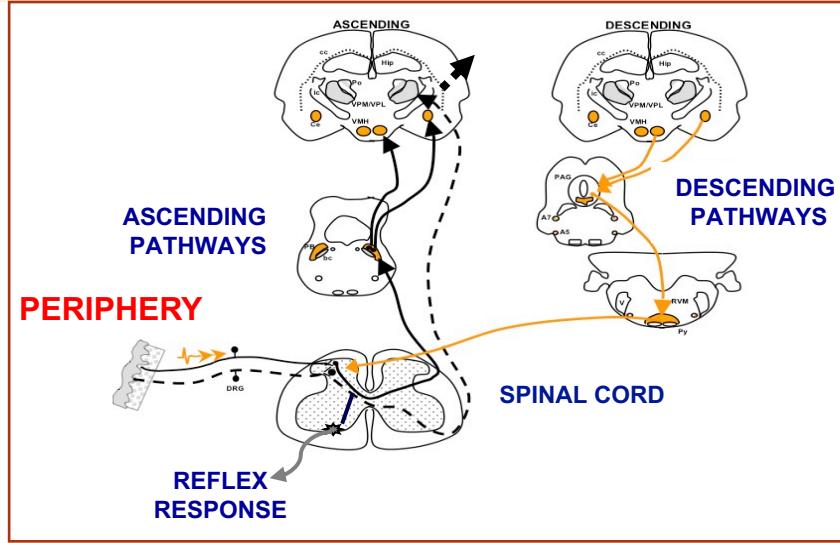
# Developing nociceptive pathways

## RESPONSE

- nociceptors transduce noxious stimuli
  - mechanical
  - thermal
  - chemical



Hjerling-Leffler et al. *J Neurosci* 2007



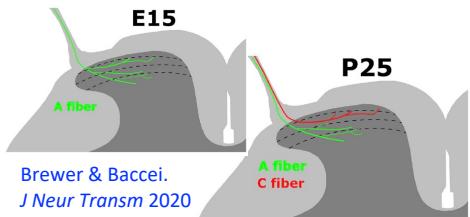
## SENSITISATION

- primary hyperalgesia

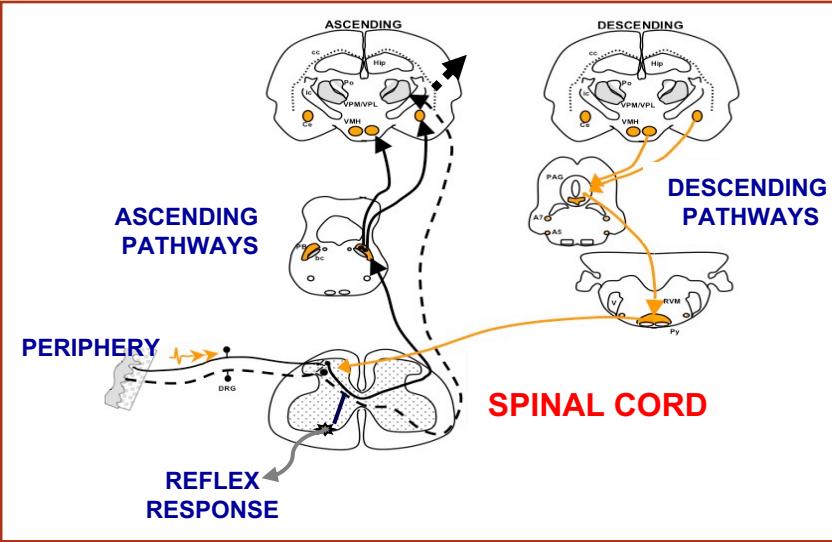
# Developing nociceptive pathways

## ALTERED STRUCTURE

- A and C fibres

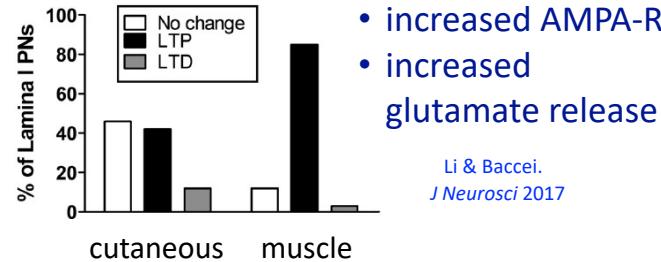


## ACTIVATE ASCENDING PATHWAYS



## CENTRAL SENSITISATION

- muscle & cutaneous afferents
  - increased AMPA-R
  - increased glutamate release



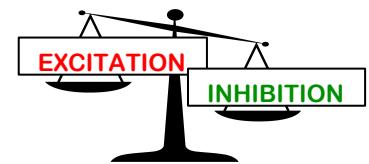
## NMDA RECEPTORS

- expression

	P0-P7	P7-P22	Adult
Spinal cord	++ <sup>(2,4,5)</sup>	+ <sup>(2,4,5)</sup>	+ <sup>(2,4,5)</sup>
Dorsal horn	+- <sup>(2)</sup> +	+ <sup>(2,4)</sup>	+ <sup>(1,2,3,4,6)</sup>
Ventral horn	++ <sup>(25)</sup> +	+ <sup>(2,7)</sup> + <sup>(4)</sup>	+ <sup>(1,4,6,7)</sup>

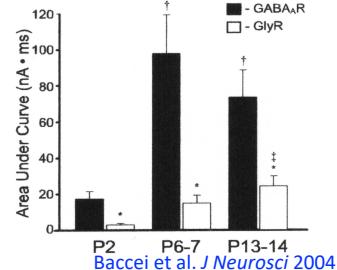
- subunit composition

de Geus et al. *Dev Neurobiol* 2020

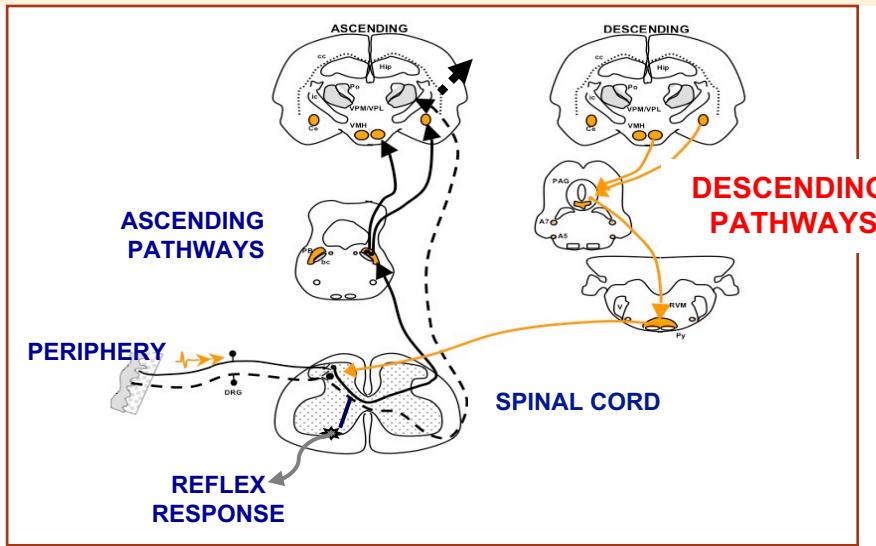


## GABA, GLYCINE

- delayed maturation

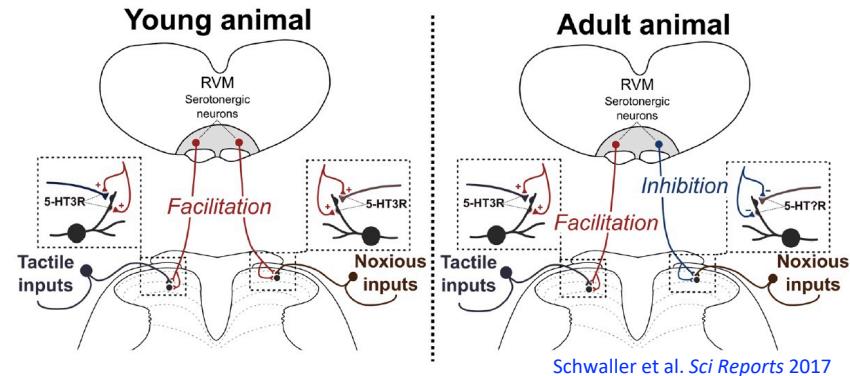


# Developing nociceptive pathways



## FACILITATION / INHIBITION

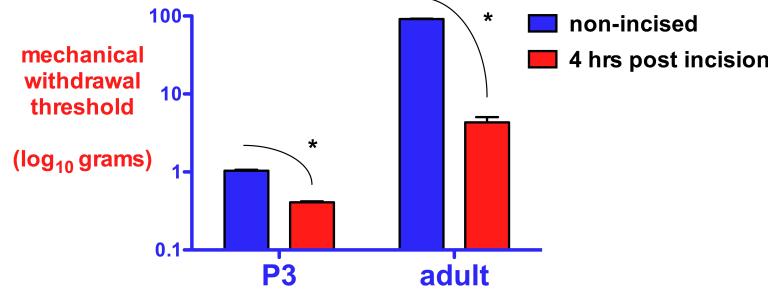
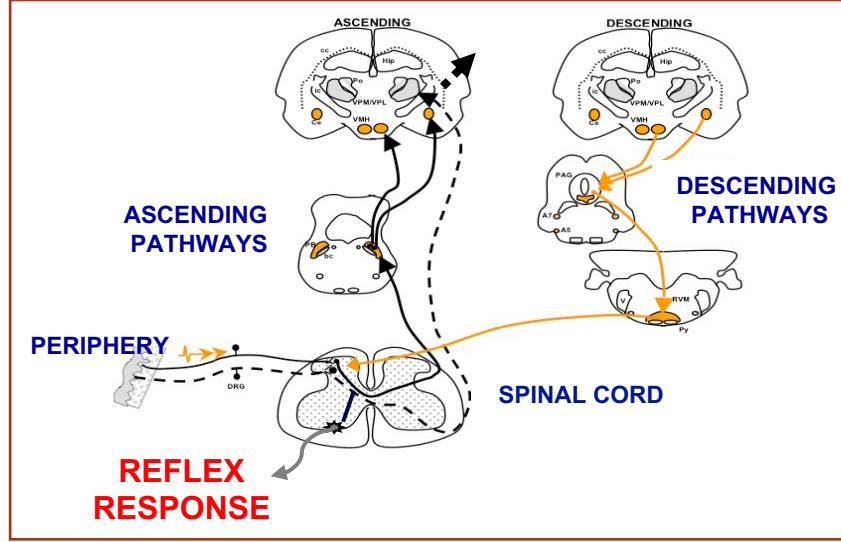
- delayed maturation of descending inhibition
  - opioid*
  - Kwok et al. *Pain* 2024
  - serotonin*



# Developing nociceptive pathways

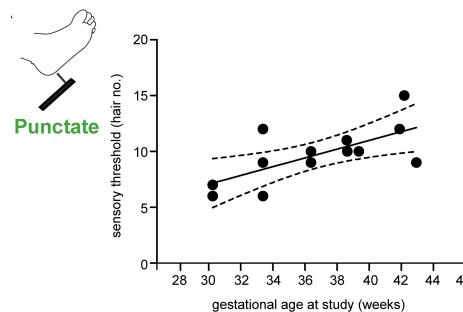
## REFLEX

- low threshold
- poorly 'tuned'
  - generalized responses
- injury
  - increased sensitivity



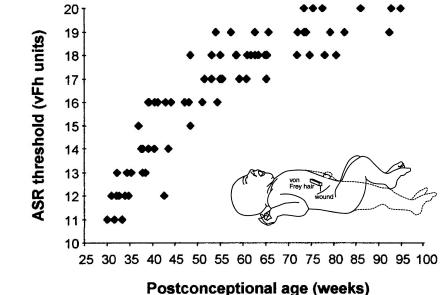
# Impact of developmental age

- baseline varies with age
  - normal development
  - impact of injury

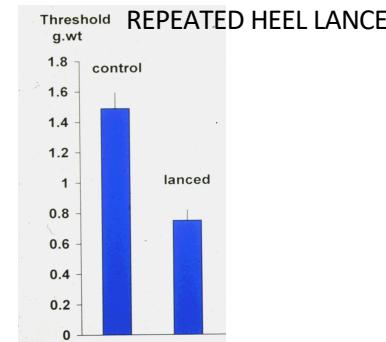


## REFLEX THRESHOLDS

Cornelissen et al. *PLoS One* 2013

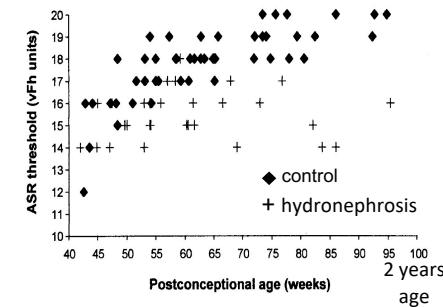


Andrews et al. *Pain* 2002a



Fitzgerald et al. *Pain* 1989

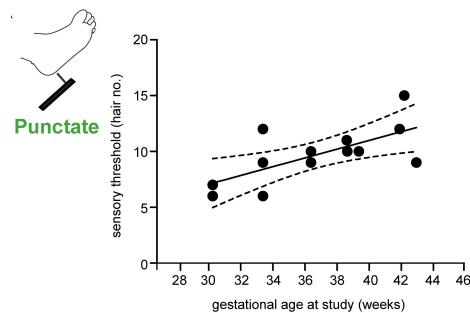
## HYDRONEPHROSIS



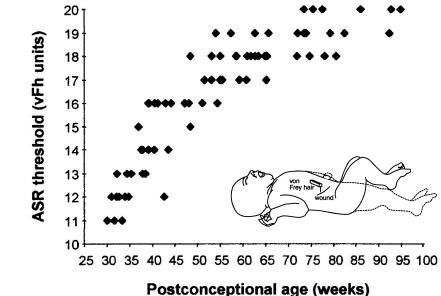
Andrews et al. *Pain* 2002a

# Impact of developmental age

- baseline varies with age
  - normal development
  - impact of injury
- analgesic efficacy
  - age-dependent variability
  - pre vs post
  - injured vs un-injured

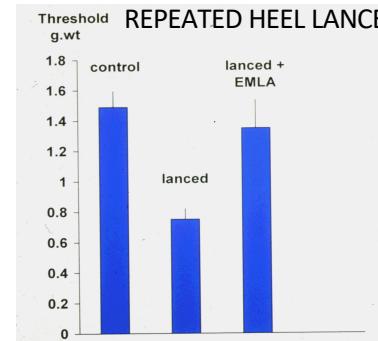


## REFLEX THRESHOLDS



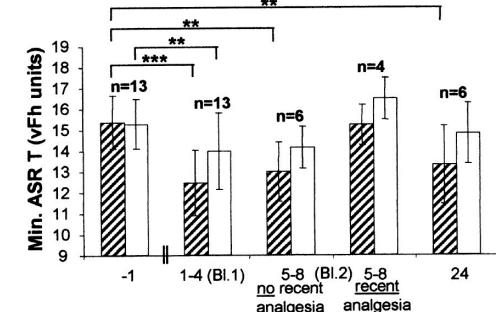
Cornelissen et al. *PLoS One* 2013

Andrews et al. *Pain* 2002a



Fitzgerald et al. *Pain* 1989

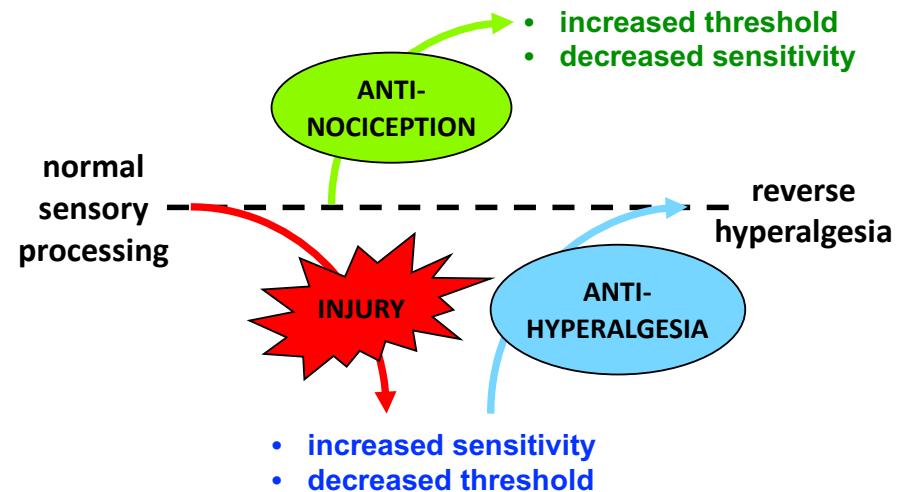
## INGUINAL HERNIA SURGERY



Andrews et al. *Pain* 2002b

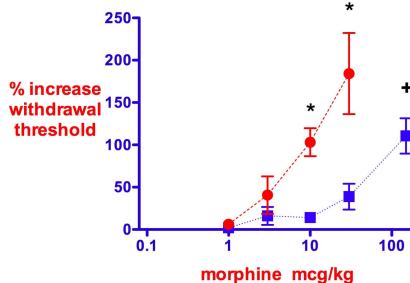
# Analgesia

- **balance impact of noxious input**
  - enhance inhibition / reduce excitation
- **requirement**
  - anti-nociceptive
  - reduce / reverse hyperalgesia
- **postnatal age**
  - efficacy and safety



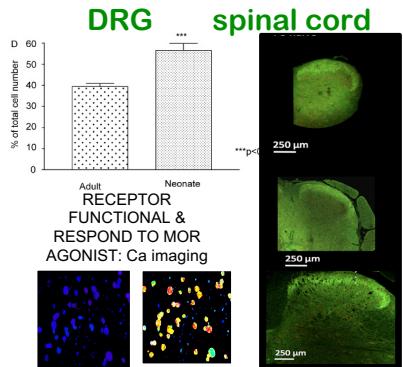
# Analgesia : balancing activity

- distribution / function of receptors
  - dose-response

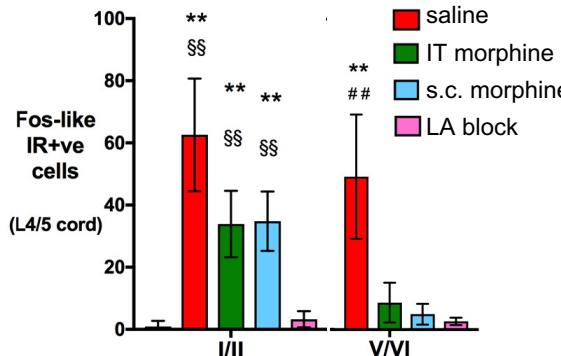


Westin et al. *Anesthesiol* 2010

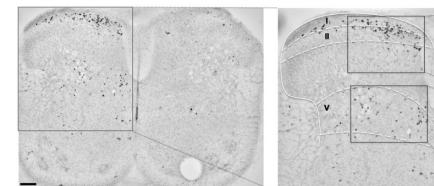
## OPIOIDS



Nandi et al. *Pain* 2004;  
Moriarty et al. *Br J Anaesth* 2018



SURGICAL INJURY  
activated neurons in spinal cord



Moriarty et al. *Br J Anaesth* 2018

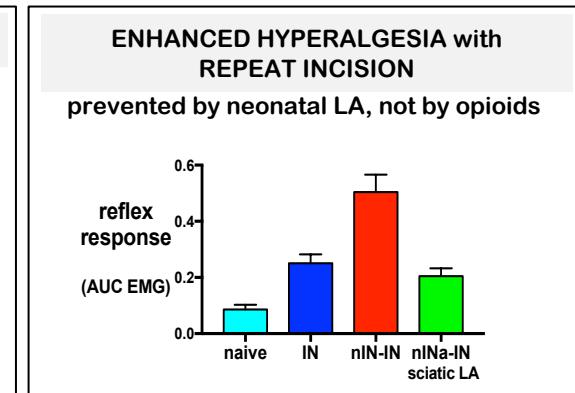
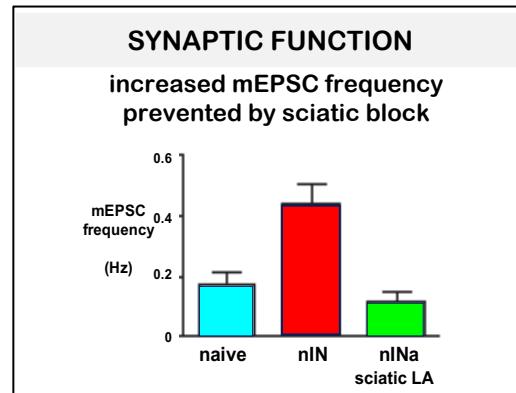
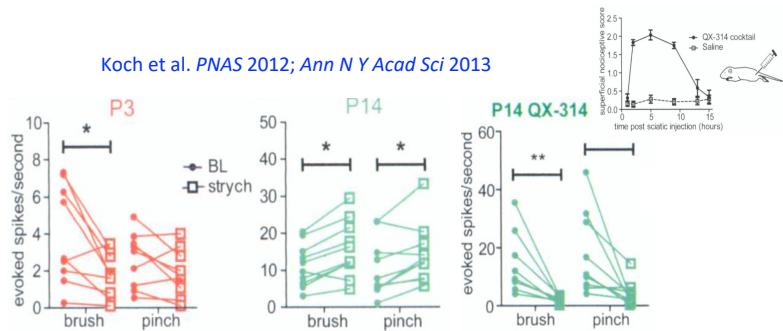
# Analgesia : balancing activity

- distribution / function of receptors

- activity-dependent maturation

- suppress normal input in absence of injury
  - delay inhibitory maturation
- excess nociceptive input / injury
  - alter spinal circuits and function
  - LA : preventive analgesia

Koch et al. PNAS 2012; Ann N Y Acad Sci 2013

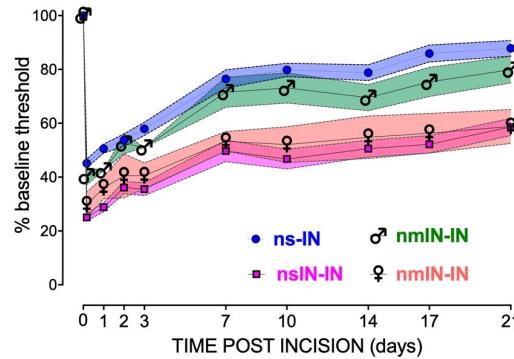


Li et al. J Neurophysiol 2009; Walker. Pain 2017; Moriarty et al. Br J Anaesth 2018

# Analgesia : balancing activity

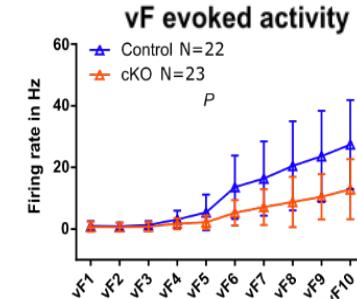
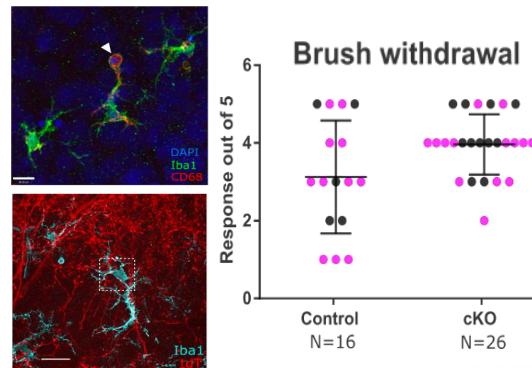
- distribution / function of receptors
- activity-dependent maturation
- specific developmental roles
  - microglia
    - influence neuronal excitability
      - inhibitors : sex-dependent
    - phagocytic role
      - shape synaptic circuits
      - inhibit : alter baseline sensitivity

## MICROGLIAL INHIBITION



- adult: reduce incision-induced hyperalgesia
- neonate: prevent enhanced re-incision response
- *males only*

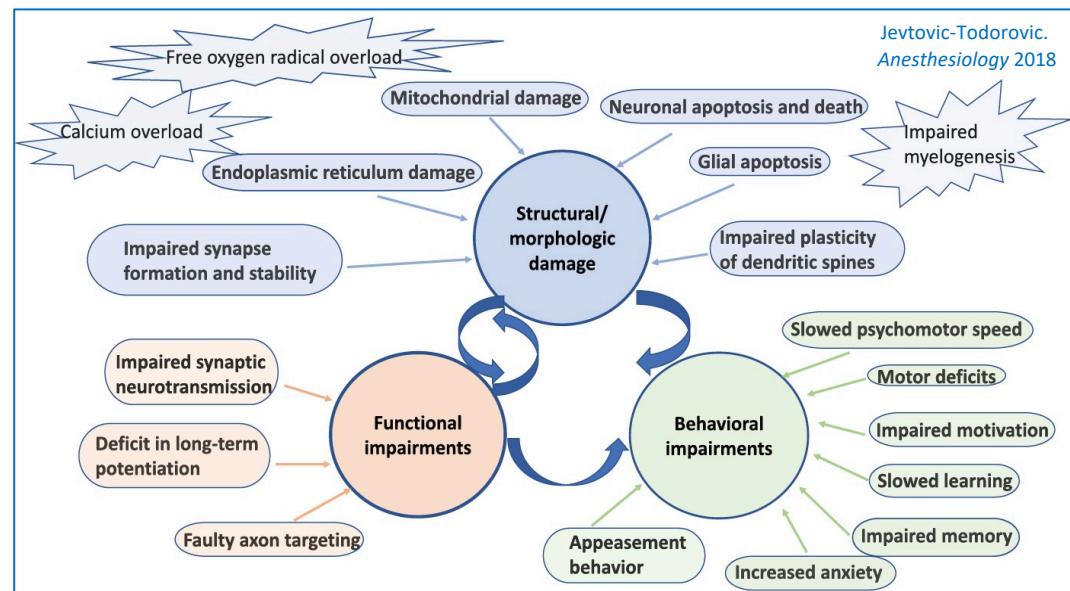
Moriarty et al. *J Neurosci* 2019



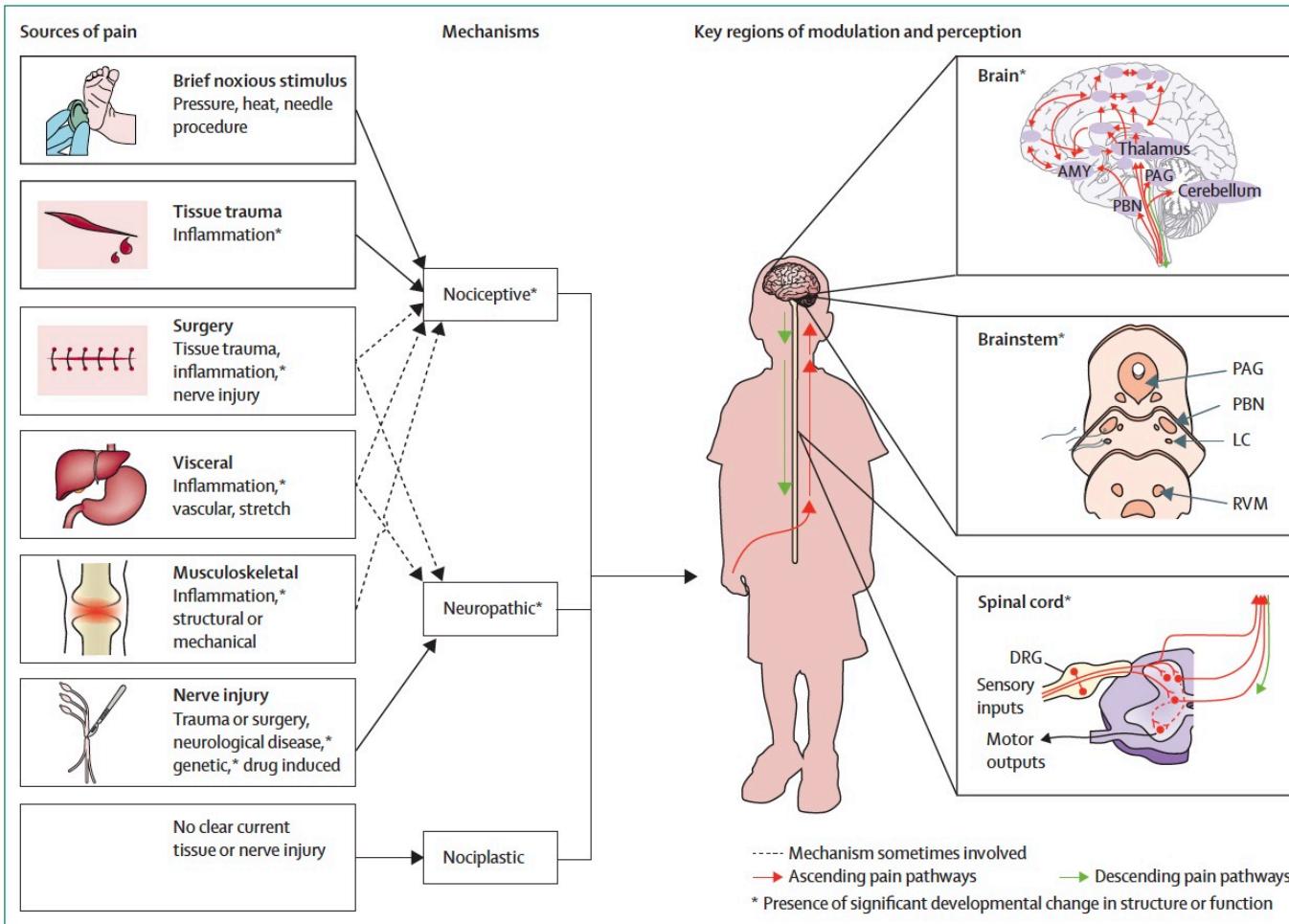
Xu et al. <https://doi.org/10.1101/2021.03.22.436389>

# Analgesia : balancing activity

- distribution / function of receptors
- activity-dependent maturation
- specific developmental roles
- developmental toxicity / safety
  - link structure and function
  - tissue ↔ behaviour



# Type of injury



## procedural pain

- anti-nociceptive effect
- minimise hyperalgesia/ cumulative impact

## surgery

- potential to intervene before injury
  - skin, muscle, nerve, bone, viscera

## nerve injury

- trauma
  - delayed emergence
- chemotherapy
  - neuropathy
  - acute : mucositis
  - GD-2 antibodies

