

A pain in the skin? A skin biopsy study on the mechanisms underlying ongoing burning pain in diabetic neuropathy

Pepe A, Galosi E, Fasolino A, Leone C, Di Stefano G, La Cesa S, Cruccu G, Truini A

Department of Neurology and Psychiatry, "Sapienza" University of Rome

Introduction: Ongoing burning pain is one of the most representative type of pain in patients with painful diabetic neuropathy. Animal and human studies suggested that this type of pain might arise from abnormally active regenerating sprouts of damaged nociceptive C fibres.

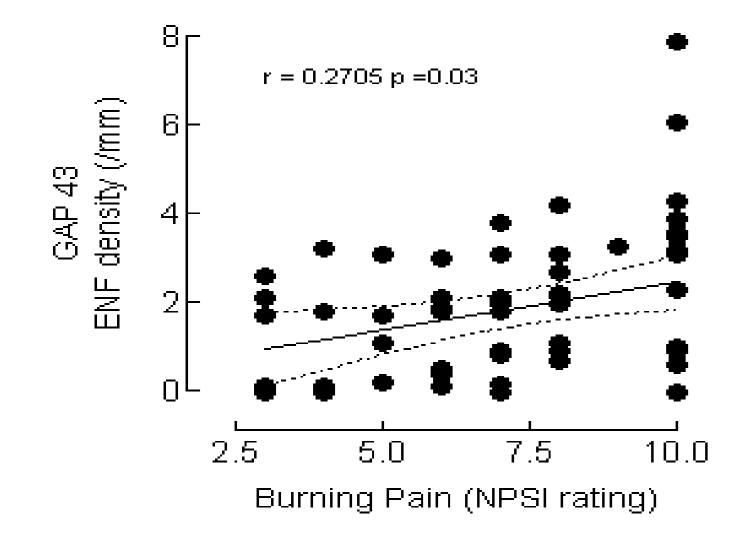
Methods: We enrolled 118 consecutive patients with diabetic neuropathy: 92 with and 26 without neuropathic pain. All patients underwent the Neuropathic Symptom Inventory to identify and quantify ongoing burning pain and the skin biopsy. The intraepidermal nerve fibre (IENF) density was assessed using the PGP9.5, to quantify the total IENF density, and the GAP43 to quantify the regenerating sprouts.

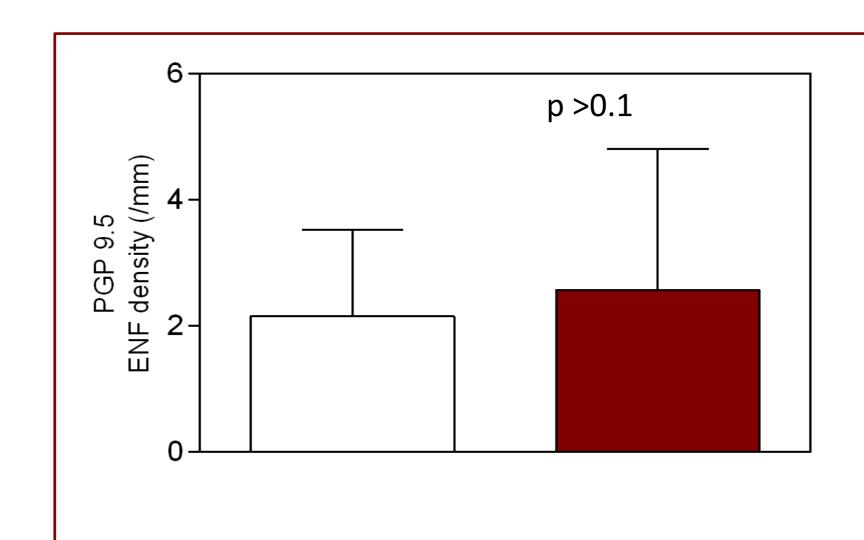


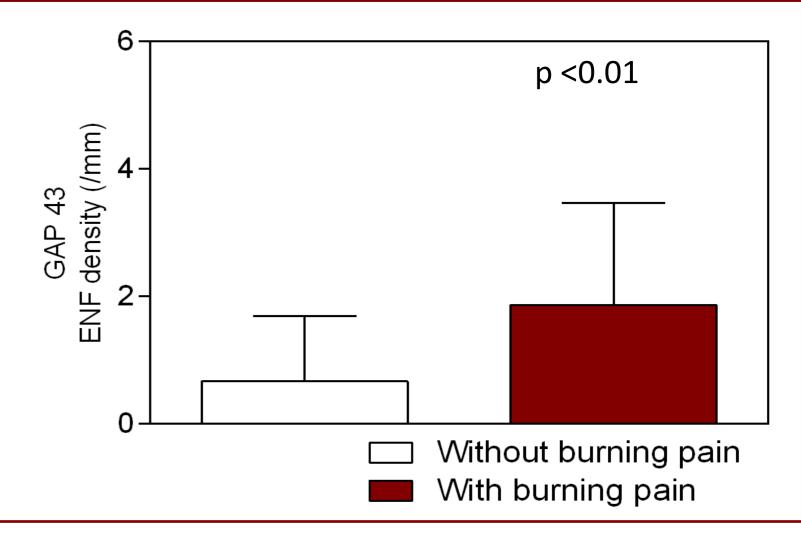
Results: Comparing skin biopsy study in patients with and without ongoing burning pain, we did not find significant difference in the IEFN density as assessed with PGP 9.5 antibodies. (p>0.1). We found that GAP43 IENF density was higher in patients with than in those without ongoing burning pain (p<0.0001), and correlated with the severity of this type of pain (r=0.2705; p=0.03).

Discusion: Our study showing that ongoing burning pain is associated with GAP43 expression indicates that this type is probably mediated by regenerating sprouts of damaged C fibres.

	PGP 9.5	GAP 43	GAP43/PGP 9.5
Pts with Ongoing Burning Pain (n=62)	2.57 ± 2.24	1.86 ± 1.6	1.89 ± 4.88
Pts without Ongoing Burning Pain (n=30)	2.15 ± 1.38	0.66 ± 1.03	0.4 ± 1.13
P	0,8	<0,0001*	<0,0001*







Without ongoing burning pain PGP 9.5 Without ongoing burning pain GAP43

With ongoing burning pain PGP 9.5 With ongoing burning pain GAP43

Figure 1. Skin biopsy representative findings. Bright-field images (X 20 magnification) showing intraepidermal nerve fibre density at the distal leg in patients with and without ongoing burning pain, assessed using the PGP9.5, to quantify the total IENF density, and the GAP43 to quantify the regenerating sprouts.

References:

- 1. Cline MA, Ochoa J, Torebjörk HE (1989) Chronic hyperalgesia and skin warming caused by sensitized C nociceptors. Brain 112, 621–647.
- 2. Truini A, Biasiotta A, La Cesa S, Di Stefano G, Galeotti F, Petrucci MT, Inghilleri M, Cartoni C, Pergolini M, Cruccu G (2010) Mechanisms of pain in distal symmetric polyneuropathy: a combined clinical and neurophysiological study. Pain 150, 516–521.
- 3. Truini A, Garcia Larrea L, Cruccu G (2013) Reappraising neuropathic pain in humans. How symptoms help disclose mechanisms. Nat Rev Neurol. 9(10):572-82.
 4. H.T. Cheng, J.R. Dauch, M.T. Porzio, B.M. Yanikc, W. Hsieh, A.G. Smith, J.R. Singleton, E.L. Feldman, Increased axonal regeneration and swellings in intraepidermal nerve fibers characterize painful phenotypes of diabetic neuropathy J Pain. 2013 September; 14(9): 941–947