



## **Spinal Cord Repair and Neuropathic pain after spinal cord lesions.**

Fælles møde mellem Neuroclusteret ved Københavns Universitet og Dansk Selskab for Neurorehabilitering.

Tid: 3. april 2007, kl. 15.00 - 17.00

Sted: Auditorium 1, Rigshospitalet, Blegdamsvej 9, 2100 København.

### Program:

*John Steeves*, John and Penny Ryan BC Leadership Professor, Director of ICORD (International Collaboration On Repair Discoveries), University of British Columbia and Vancouver Coastal Health, Canada:

#### **Spinal cord repair - from basic science to clinical practice.**

The Common Goals for CNS Repair could be summarized as:

1. Contain the amount of primary damage, as well as limit degree of secondary cell damage and cyst cavity formation within CNS.
2. Bridge lost tissue with transplanted cells and promote expression of factors, as well as 'developmental' programs, that facilitate repair.
3. Block endogenous mechanisms within adult CNS that suppress axonal regeneration, as well as functional reconnection and recovery.
4. Stimulate appropriate sensorimotor, autonomic, cognitive, and emotional activity to enhance functional plasticity within surviving circuits, as well as consolidate any induced anatomical repair.

Recent advances towards these goals will be reviewed, including a discussion of the necessary requirements for the valid translation of a discovery to clinical practice.

Pause

*Nanna Brix Finnerup*, senior researcher at Danish Pain Research Center, Neurological department, Århus University Hospital, Denmark:

#### **Neuropathic pain after spinal cord lesions - from basic science to clinical practice.**

Experimental studies suggest that neuronal hyperexcitability due to excitotoxic changes, lesion of inhibitory neurons, and activation of microglia at the level of a spinal injury are important mechanisms for central neuropathic pain. Also human studies have contributed to the understanding of central pain mechanisms, but still, in the single patient, translating symptoms and signs into mechanisms are problematic and treatment is often unsatisfactory.

Moderator: Fin Biering-Sørensen, Klinik for Rygmarvsskader, Rigshospitalet.

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