# Artemin: a novel target for treatment of interstitial cystitis/bladder pain syndrome

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#### Introduction

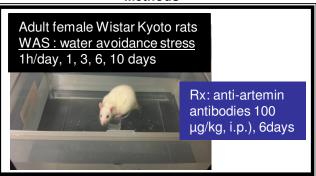
a role in the development, Chronic stress plays maintenance and enhancement of painful bladder cystitis syndrome/interstitial (PBS/IC). mechanisms that link stress to bladder hypersensitivity are not well understood. Altered levels of neurotrophins have been correlated with bladder hyperexcitability and pain. Artemin is a glia derived neurotrophic factor that supports the survival and development of a group of primary sensory neurons expressing TRPA1. Artemin can modulate pain responses. Thus, our overall hypothesis is that the levels of artemin and/or its receptor are altered in PBS/IC bladder, which leads to afferent hyperexcitability, changes nociceptive channel expression or function and resultant bladder pain. Here, we examined the influence of psychological stress on artemin levels, bladder hyperalgesia and properties of the primary afferent neurons in a rodent model.

Chronic stress



Bladder function Bladder hyperalgesia Primary afferent neuron function

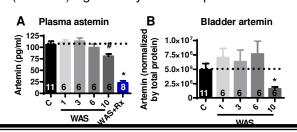
## Methods



# Results

# a) WAS alters artemin levels in a timedependent manner:

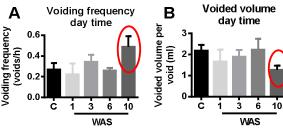
- no significant changes with acute WAS (1-3d)
- · significant decrease with chronic 10d WAS
- anti-artemin antibodies during the acute phase (6d WAS) significantly decrease plasma levels



### Conclusions

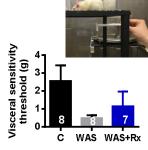
#### Results

- b) Chronic WAS alters bladder function metabolism cage studies and cystometry
- · no changes at earlier time points
- cystometry: ~25% †voiding frequency in 10d WAS



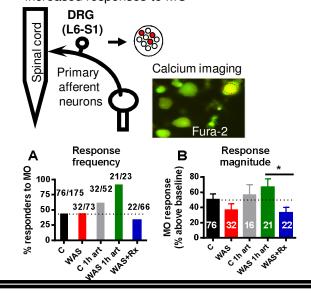


- ~70% decrease in the threshold for visceral sensitivity in 3-6d WAS rats
- partially prevented by anti-artemin treatment.



# d) WAS and artemin levels modulate TRPA1 responsiveness in DRG neurons

- DRG neurons from WAS and anti-artemin treated WAS rats exhibited decreased responses to mustard oil (MO)
- DRG neurons exposed to acute in vitro artemin treatment (100ng/ml for 1h) exhibited increased responses to MO



- Stress can alter levels of the neurotrophic factor artemin, which can impact the expression and/or function
  of nociceptive TRPA1 channels and contribute to visceral sensitivity and pain.
- Acute increase in artemin could sensitize nociceptive afferents, contributing to acute pain a potential mechanism for exacerbation of IC pain during symptom flares?
- Chronic decrease in artemin may impact recovery and survival of DRG neurons a potential mechanism for chronic pain?
- Window for treatment: anti-artemin treatment during the acute state may prevent neuronal damage. For chronic state, increasing artemin levels and/or activating artemin intracellular pathways may be beneficial.

Manipulation of artemin expression and/or signalling pathways may offer a new pain treatment strategy for PBS/IC patients.