

# CENTRE FOR PAIN RESEARCH

The vision of IMB's Centre for Pain Research (CPR) is to discover and develop new molecules for treating pain in humans. Specifically, we focus on pain that is difficult to manage, such as neuropathic, diabetic, chemotherapy and cancer pain. CPR researchers use advanced technologies to accelerate discovery and optimisation of analgesic small molecules, peptides, and natural products. We also examine their characterisation in disease and pathway-specific models of analgesic efficacy.

## WHAT IS PAIN?

Pain is an unpleasant warning sign of tissue damage. It is usually transient in nature but can progress to chronic states that are challenging to treat.

One in five Australians, and one in three Australians over the age of 65, suffer from chronic pain, which remains one of the most under-recognised and under-treated medical problems.

The economic cost of treating chronic pain in Australia exceeds \$34 billion per year, which is more than the cost of treating cancer, stroke, and diabetes. Many types of chronic pain (e.g. neuropathic pain) are poorly treated by current-generation analgesics ('painkillers') due to lack of efficacy and/or dose-limiting side effects. New classes of analgesics are required to better manage acute and chronic pain.

Our aim is to understand the mechanisms underlying the origins and transmission of pain, and to use this knowledge to produce more effective analgesics and improve quality of life for all Australians living with pain.

## OBJECTIVES

- Develop a diverse repertoire of pharmacologically-characterised new molecules active in different pain pathways
- Improve our understanding of the molecular mechanisms underlying modality- and disease-specific pain pathways
- Isolate and characterise new research tools to delineate pain mechanisms and identify novel pain targets
- Develop and characterise new models of analgesic efficacy
- Identify new translational opportunities with industry partners
- Provide outstanding training and leadership in multidisciplinary pain research.

## IMB PAIN RESEARCH



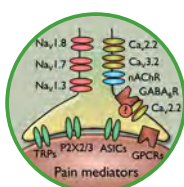
### Discovery of novel analgesics

CPR uses a broad and comprehensive panel of assays for pain targets, addressing aspects of pain initiation and transmission using state-of-the-art screening technologies. Using unique compounds and libraries derived from natural products and venoms, these technologies place our research at the cutting edge of analgesic drug discovery.



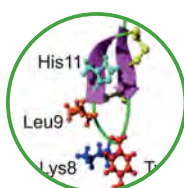
### Structure-function

CPR uses advanced NMR and X-ray crystallographic approaches to obtain accurate three-dimensional structure of molecules and precisely position the residues contributing to affinity. This knowledge will be used to rationally optimise for target specificity, and, in parallel, will engineer out off-target liabilities to improve the therapeutic window of drug leads.



### Analgesic efficacy models

CPR directly assesses analgesic efficacy of novel compounds in the pain pathway and clinically relevant disease models of pain. These approaches provide information to enable translation of our discoveries to the clinic by identifying preferred candidate molecules through to suitable patient populations, dosing routes, and strategies to minimise side effects in people living with pain.



### Lead optimisation and development

Molecules showing significant analgesic efficacy in disease models of pain will be chemically modified to maximise storage and enzyme stability, ease of synthesis, and plasma half-life *in vivo*, without compromising therapeutic index, efficacy or safety.

## INVESTIGATORS

- Richard Lewis (CPR Director)
- Paul Alewood
- Rob Capon
- Matt Cooper
- David Craik
- David Fairlie
- Glenn King
- Mark Smythe
- Rohan Teasdale
- Irina Vetter

## COLLABORATORS

- (Non-funding)**
- Maree Smith (IMB Adjunct)
  - Peter Cabot (UQ School of Pharmacy)
  - Joe Lynch (QBI)
  - Johan Rosengren, Walter Thomas (UQ SBMS)

## EXTERNAL COLLABORATORS

- David Adams (RMIT)
- Stuart Brierley (University of Adelaide)
- Nigel Bunnett, Bill Charman, Joseph Nicolazzo (Monash Institute of Pharmaceutical Sciences)
- Brian Chait (Rockerfeller University, US)
- MacDonald Christie (University of Sydney)
- Arthur Christopoulos (Monash University)
- Michael Cousins (Pain Australia)
- Julia Fleming, Paul Gray (Royal Brisbane and Women's Hospital)
- Janet Hardy, John Hooper (Mater Research)
- David Julius (University of California, San Francisco, US)
- Michael Nitabach (Yale University, US)
- Steven Petrou (The Florey Institute)
- Christian Vaughan (Royal North Shore Hospital)
- John Wood (University College London)
- Katharina Zimmermann (University of Erlangen-Nuremberg, Germany)

## COLLABORATORS

- (Funding)**
- National Health and Medical Research Council
  - Australian Research Council
  - Boehringer Ingelheim
  - Janssen
  - Alchemia

**Discover more at [imb.uq.edu.au](http://imb.uq.edu.au)**



## PROFESSOR RICHARD LEWIS

Professor Richard Lewis is internationally renowned for his research into venom peptides and pain. He aims to improve our current knowledge on pain pathways, through the discovery and application of novel probes of pain pathways. Professor Lewis' research has a strong translational focus to develop, wherever possible, targeted pain treatments for poorly managed pain conditions including, cancer, neuropathic, burns and inflammatory pain.



### RESEARCH APPROACHES

Professor Lewis' research is at the interface of pain research and molecular pharmacology.

These approaches include:

- disease- and pathway-specific pain pathway characterisation
- analgesic efficacy profiling in clinically relevant models of pain
- high-throughput electrophysiology of ion channels
- high-throughput functional FLIPR screening of venoms
- discovery and structure-function of venom peptides
- pharmacophore mapping of toxin-protein interactions.

### KEY PUBLICATIONS

Professor Lewis has discovered novel conotoxins that have entered preclinical and clinical trials, including CVID (AM336) and the  $\chi$ -conopeptide Xen2174. Highlights include characterising the pathophysiological basis of ciguatoxin-induced cold allodynia and the identification of highly selective venom peptides active at pain targets. Selected publications relevant to pain include:

Smith, M, Cabot PJ, Ross FB, Robertson AD and **Lewis RJ** (2002) The novel N-type calcium channel blocker, AM336, produces potent dose-dependent antinociception after intrathecal dosing in rats and inhibits substance P release in rat spinal cord slices. *Pain* **96**: 119-127.

Nielsen CK, **Lewis RJ**, Alewood D, Drinkwater R, Palant E, Patterson M, Yaksh TL, McCumber D, Smith MT (2005) Anti-allodynic efficacy of the  $\chi$ -conopeptide, Xen2174, in rats with neuropathic pain. *Pain* **118**:112-124.

Ekberg J, Jayamanne A, Vaughan CW, Aslan S, Thomas L, Mould J, Drinkwater R, Baker MD, Abrahamsen B, Wood JN, Adams DJ, Christie MJ, **Lewis RJ** (2006)  $\mu$ O-conotoxin MrVIB selectively blocks  $\text{Na}_v1.8$  sensory neuron specific sodium channels and chronic pain without motor deficits. *Proc Natl Acad Sci* **103**: 17030-17035.

Vetter I, Touska F, Hess A, Hinsbey R, Sattler S, Lampert A, Sergejeva M, Namer B, Sharov A, Collins L, Eberhardt M, Engel M, Cabot PJ, Wood J, Vlachova V, Reeh P, **Lewis R**, Zimmermann K. (2012) Ciguatoxins activate specific cold pain pathways to elicit burning pain from cooling. *EMBO Journal* **31**: 3795-808.

Dantas de Araujo A, Mobli M, Brierley SM, Castro J, Harrington AM, Vetter I, Dekan Z, Muttenthaler M, Wan JJ, **Lewis RJ**, King GF, Alewood PF (2014) Selenoether oxytocin analogues have analgesic properties in a mouse model of chronic abdominal pain. *Nature Communications* **5**: 3165.

**Discover more at [imb.uq.edu.au](http://imb.uq.edu.au)**