Diagnosis and management of musculoskeletal pain is a major clinical challenge. Fundamental knowledge of nociception from deep somatic structures and related mechanisms of sensitisation have been characterised in animals but the translation into clinical sciences is still lacking. Development and refinement of mechanism-based quantitative sensory testing in healthy volunteers and pain patients have provided new opportunities to assess pain and hyperalgesic reactions. The current technologies can provide information about, for example, peripheral and central sensitisation, descending pain control, central integration and structure specific sensitisation. Such a mechanistic approach can be used for differentiated diagnosis and for target validating new and existing analgesics. Mechanistic pain assessment of new compounds under development provides opportunities for target validation in proof-of-concept studies, which generate information to be used for selecting the most optimal patients for later clinical trials. New safe and efficient compounds are highly needed in the area of musculoskeletal pain management.
Keywords
Experimental pain; New drugs; Mechanistic pain assessment; Joint pain; Muscle pain; Proof-of-concept

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