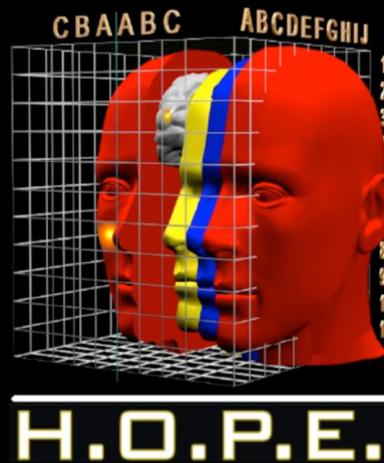




UNIVERSITY OF
MICHIGAN



Developing Models For New Treatment Technologies Bringing Precision to the Pain Field

Alex DaSilva, DDS, DMedSc

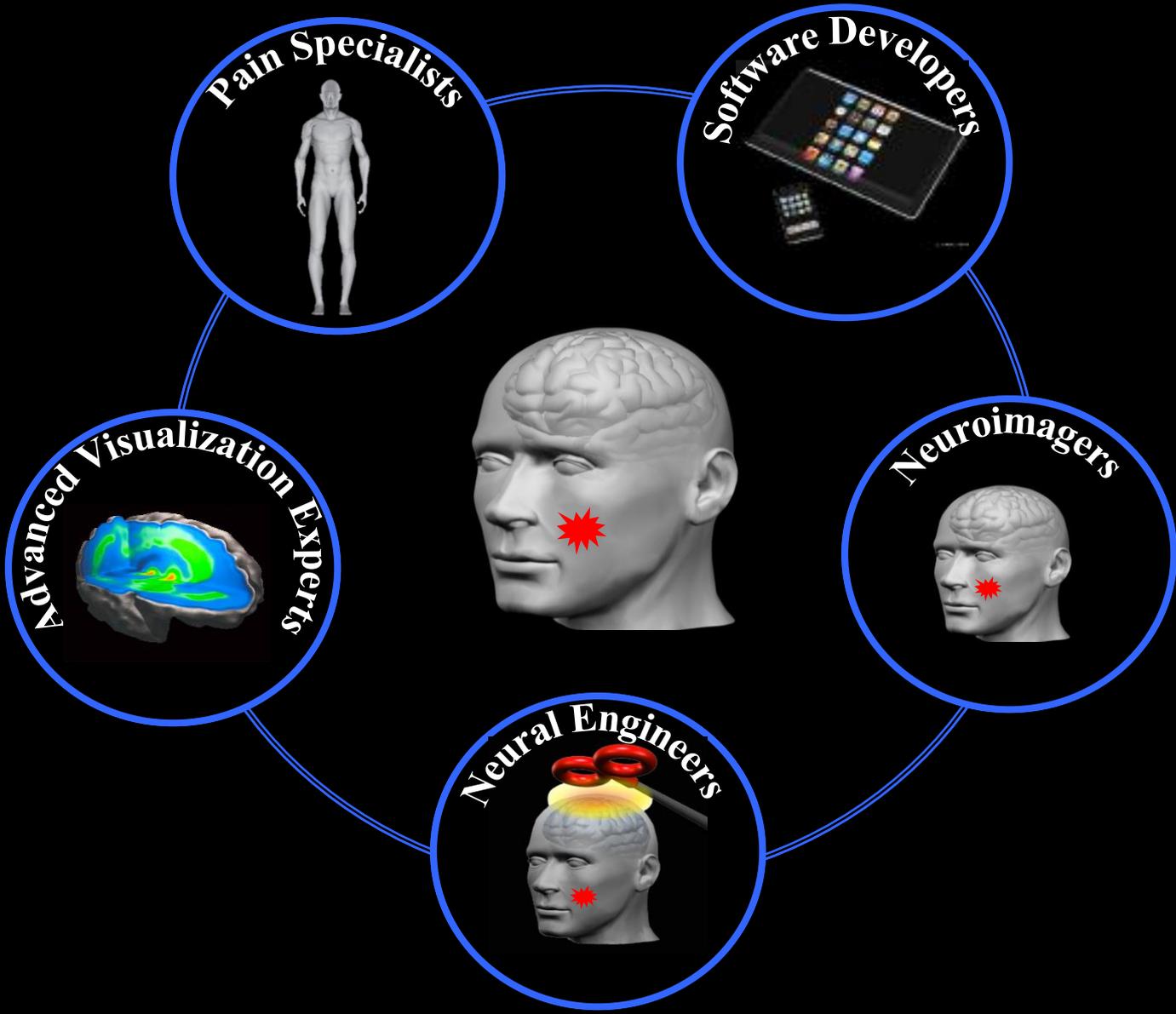
Director, Headache & Orofacial Pain Effort (H.O.P.E.)

Co-Director, fNIRS Laboratory, Center for Human Growth & Development (CHGD)

Founder, Michigan Clinical Augmented Reality for Pain unit (M-CARP unit)

Biologic & Materials Sciences Department, University of Michigan School of Dentistry

Disclosure: MoxyTech LLC (Co-Founder)

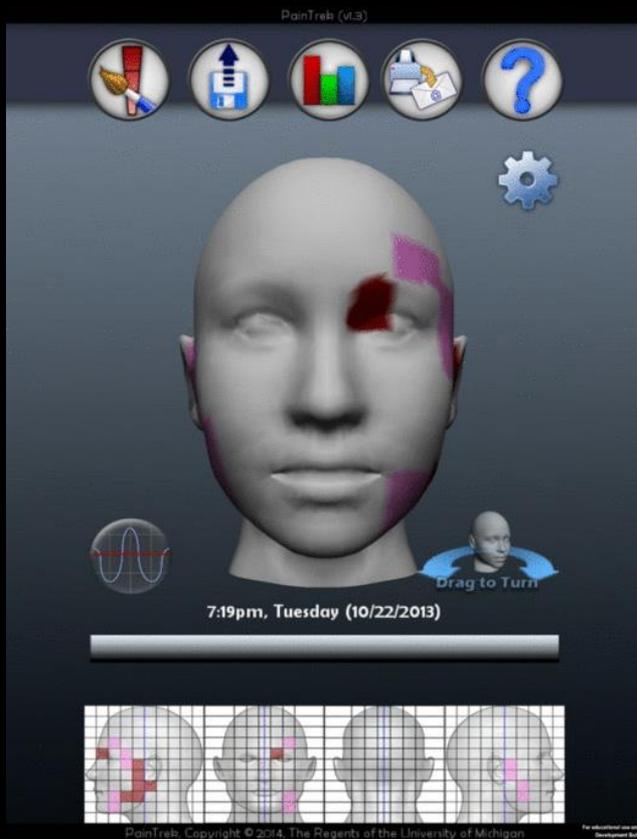


116 Million Americans With Chronic Pain

Costs \$635 billion a
year

Costs per patient
additional \$4.5-7.7
thousand in health
care expenditures





VAS	5.9	6.3	5.7
PainTrek Average	1.4	2.0	2.1
PainTrek Pain Area	7.3%	5.5%	36.4%
PainTrek P.A.I.N.S.	3.5%	3.6%	25.7%

- Spontaneous Light Touch
- Pressure
- Cold
- Bright
- Loud Noise
- Stress
- Hunger
- Heat
- Alcohol
- Smoke



Sam Johnson
01/09/1978



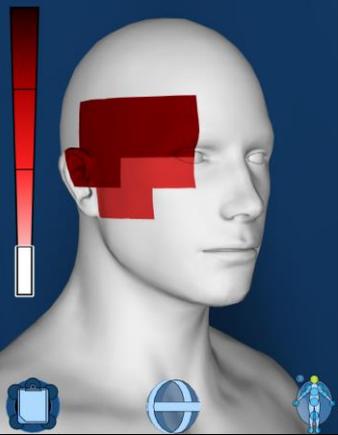
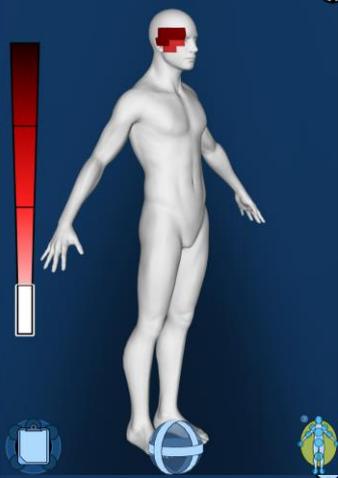
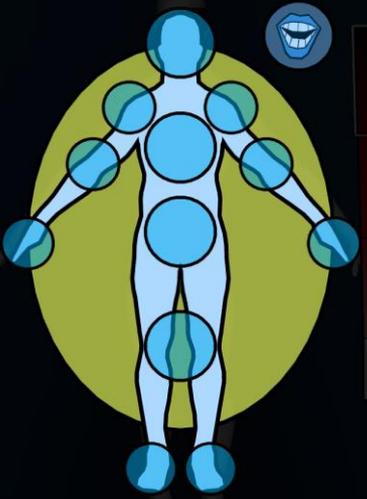
Language
English (United States)

FPS: 8.99

PainTrek (C) HealthTrek Solutions, L.L.C., 2015

Focus on Area

49



Overview

(coming soon)



- 10 Mouth
- 93 Head
- 43 Body

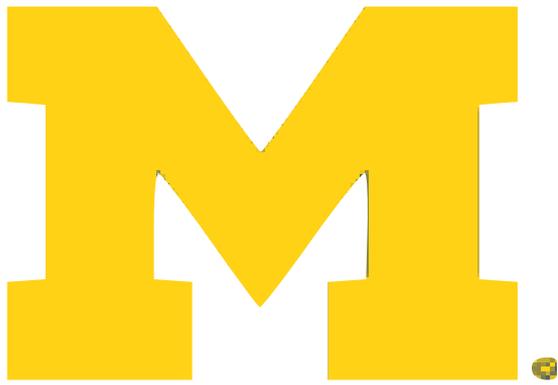


FPS: 12.27

PainTrek (C) HealthTrek Solutions, L.L.C., 2015

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EHR Collaboration



Internet²NET+



**What are the Targets in our
Brains for Pain Relief?**

Neuroplasticity in Migraine

System

Limbic

Visual

Inhibitory

Sensorimotor

Clinic

Cognition
Mood

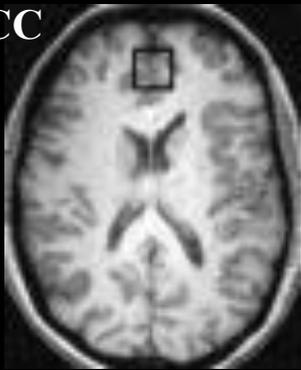
Aura

Allodynia

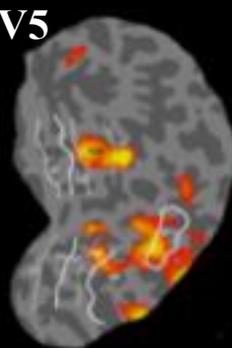
Headache

Neuroimage

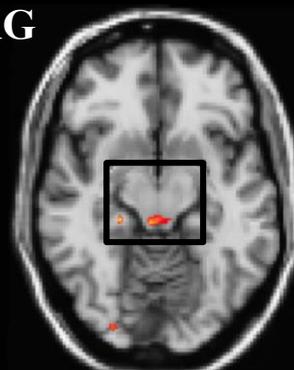
ACC



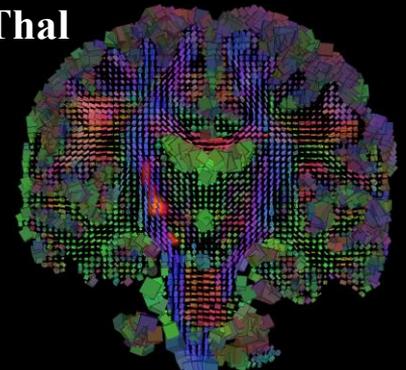
MT/V5



PAG



Thal



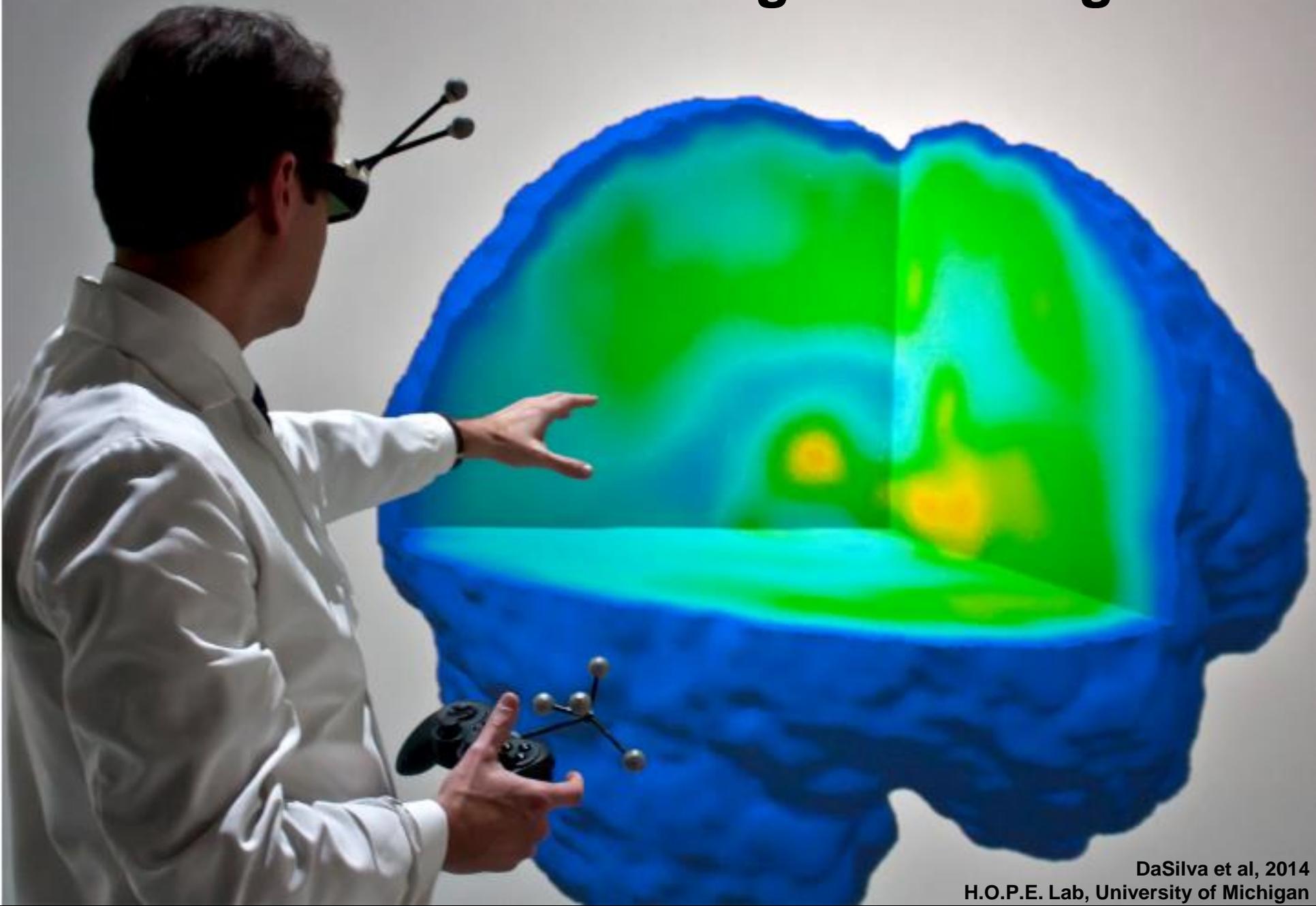
Prescot et al, 2009

DaSilva et al, 2006

DaSilva et al, 2007

DaSilva et al, 2007

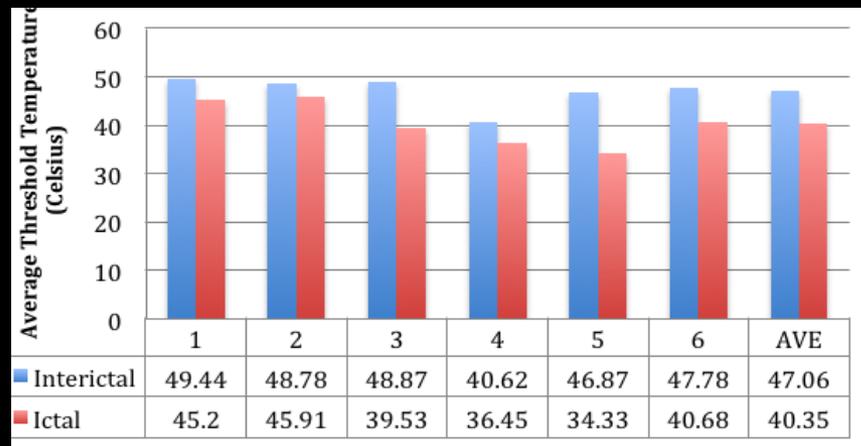
3D-Immersive NeuroNavigation in Migraine



Spontaneous Migraine Attacks

Mu-Opioid Activation during Allodynia

Migraine Allodynia



μ -Opioid Activation



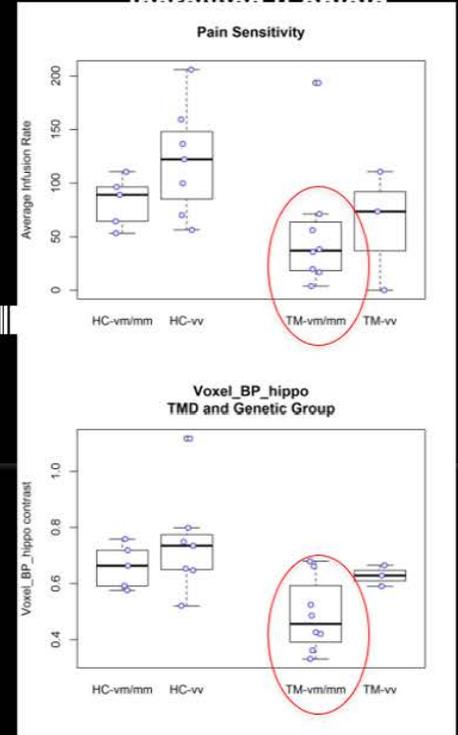
Chronic TMD Mu-Opioid Activation during Masseteric Pain

Masseteric Pain Challenge



COMT Genotype

Increased μ -opioid

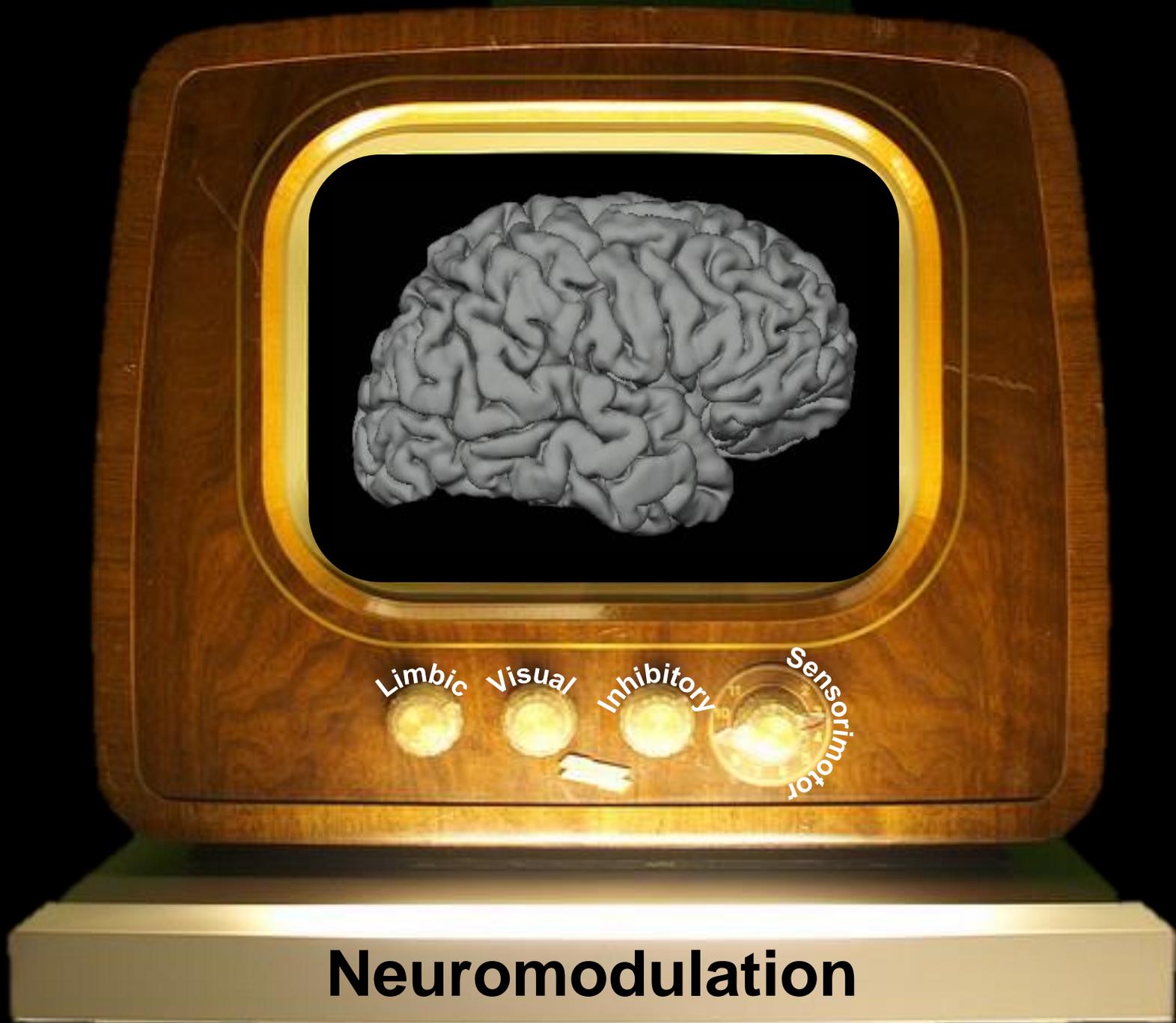


NIH-NIDCR R56 DE022637
NIH-NIDCR R01 DE025633

Under Review
H.O.P.E. Lab, University of Michigan

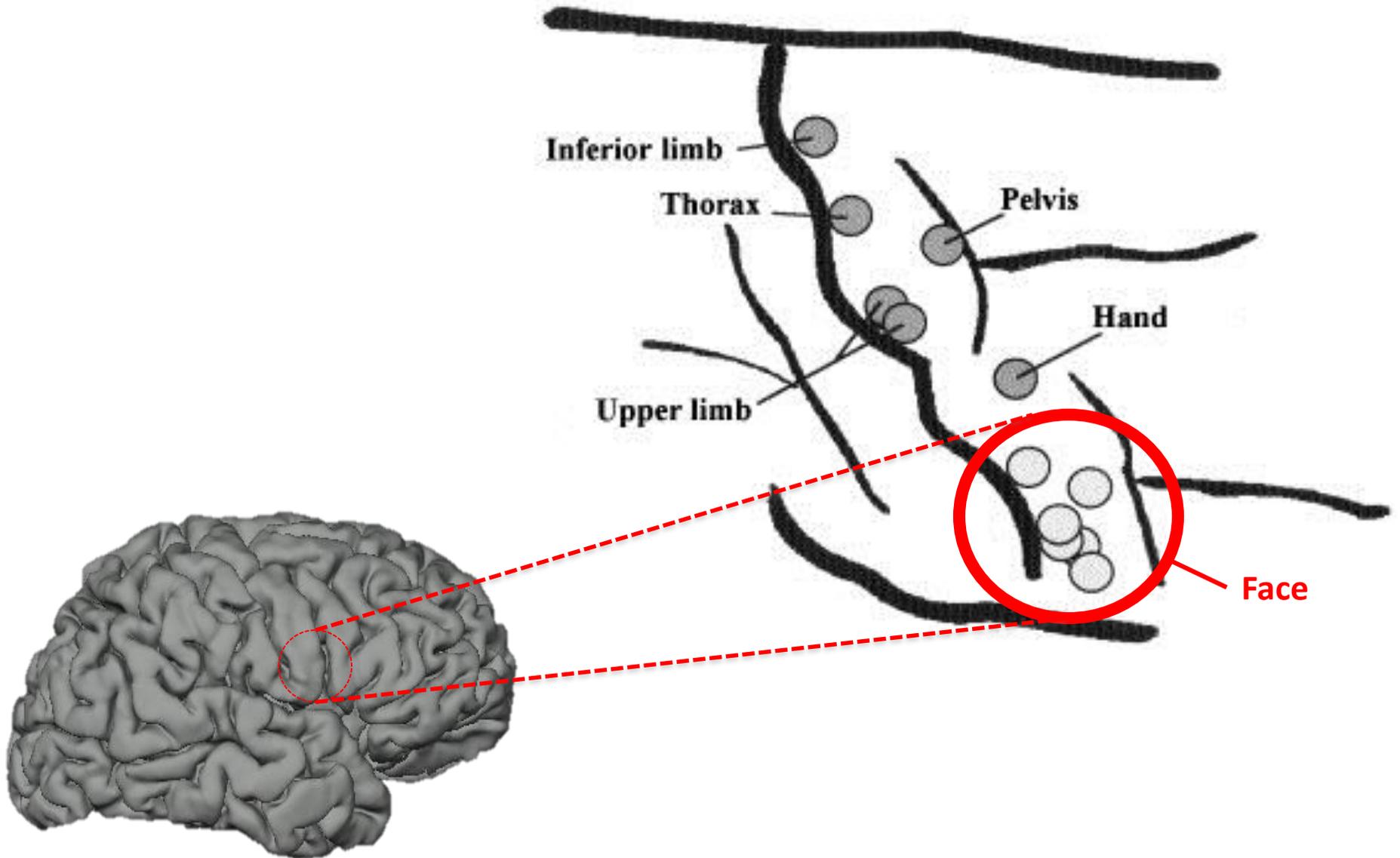
So what?

**Can you do something to
help me?**

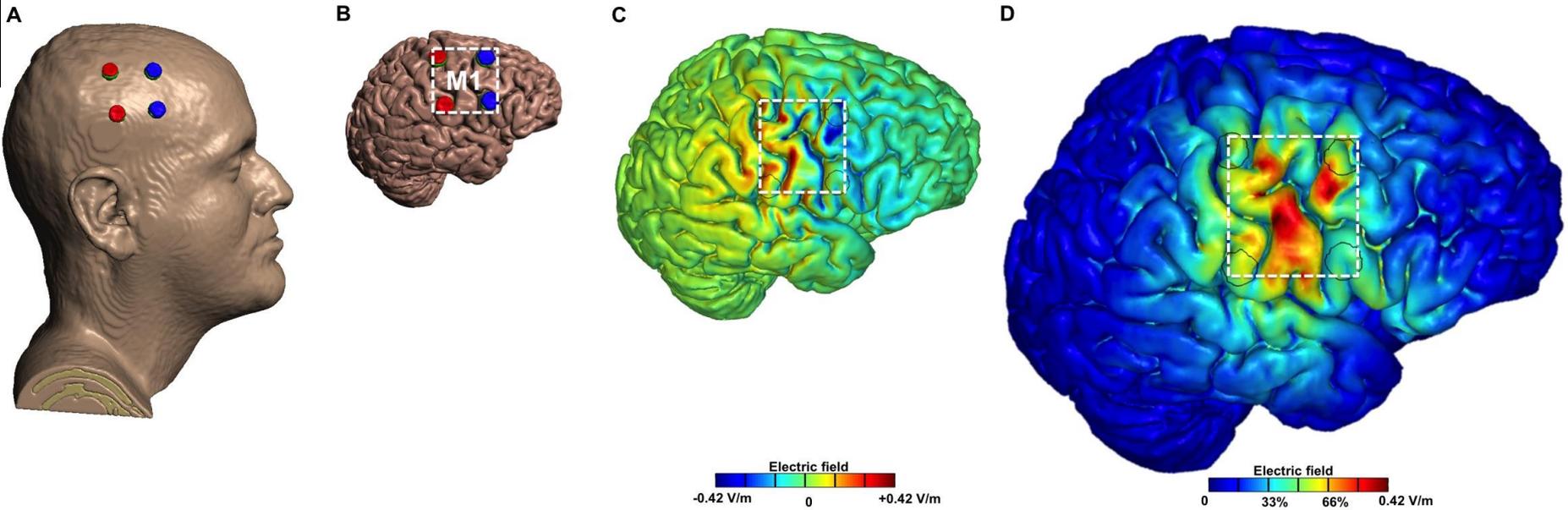


Neuromodulation

INVASIVE Motor Cortex Stimulation In The Treatment Of Chronic Pain.



Non-Invasive H.O.P.E. lab M1 HD-tDCS Montage for Chronic Pain.



TMD: MONTH FOLLOW-UP

VAS 50% Responders from Week 1 to Week 6

Group	Active	Sham	Total
<50% VAS decrease	3	8	11
≥50% VAS decrease	9	4	13
Total	12	12	24

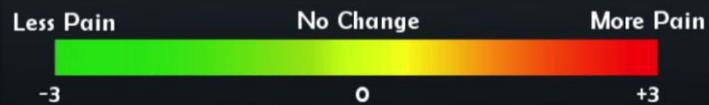
Chi-Square

$$X^2=4.1958$$

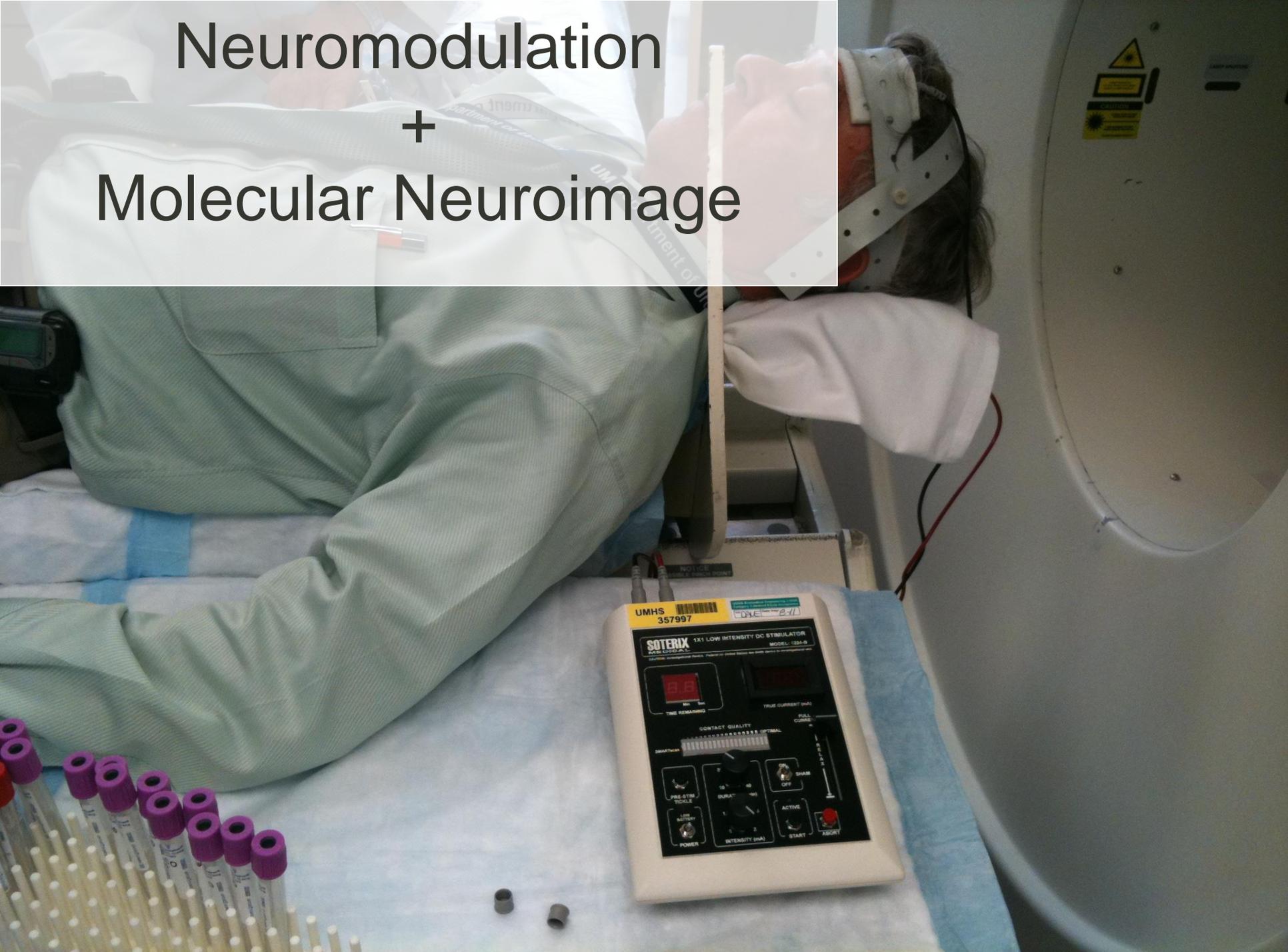
$$p=0.04$$

Location	Time Frame	Effect	Pain Sum	Ave Pain	Pain Area
Bilateral	Study	Week	0.0042	<0.0001	0.0027
		Group	0.0851	0.9845	0.1057
		Week*Group	0.3450	0.6252	0.3403
	Treatment	Day	0.0071	<0.0001	0.0052
		Group	0.1186	0.4078	0.0977
		PrePost	0.2945	0.0084	0.2237
		PrePost*Group	0.6300	0.1176	0.3567
Ipsilateral	Study	Week	0.0132	<0.0001	0.0095
		Group	0.1170	0.6522	0.1623
		Week*Group	0.3136	0.8908	0.2470
	Treatment	Day	0.1713	0.0013	0.0139
		Group	0.2058	0.6991	0.1932
		PrePost	0.2871	0.7001	0.4564
		PrePost*Group	0.2107	0.9903	0.3297
Contralateral	Study	Week	0.0083	<0.0001	0.0045
		Group	0.0735	0.9820	0.0758
		Week*Group	0.3852	0.0924	0.4903
	Treatment	Day	0.0005	<0.0001	0.0057
		Group	0.0747	0.4471	0.0553
		PrePost	0.0007	<0.0001	0.0035
		PrePost*Group	0.0118	0.0012	0.0088

*p-value is for Type 3 test of fixed effect from linear mixed model for particular time frame (over study or over treatment) of particular dependent variable.

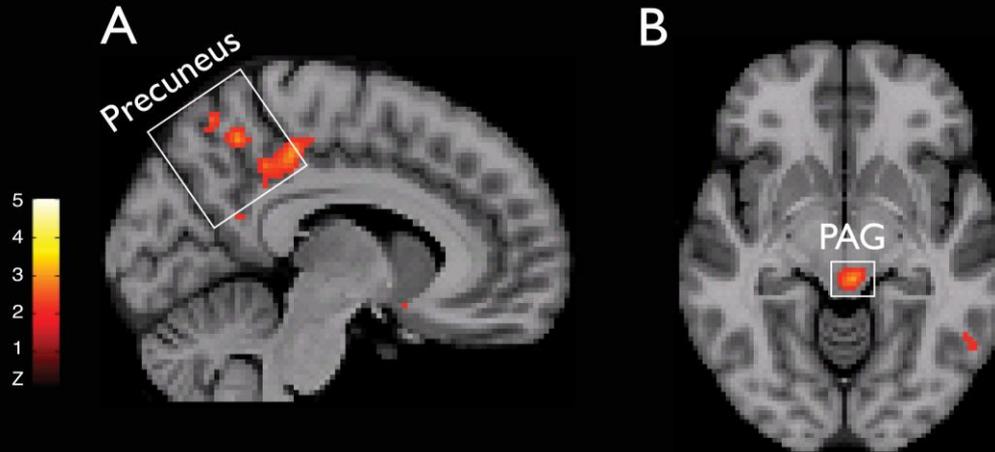


Neuromodulation + Molecular Neuroimage



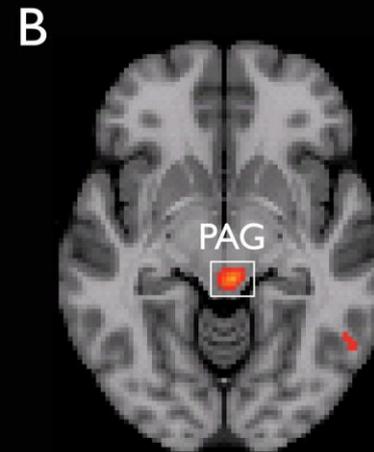
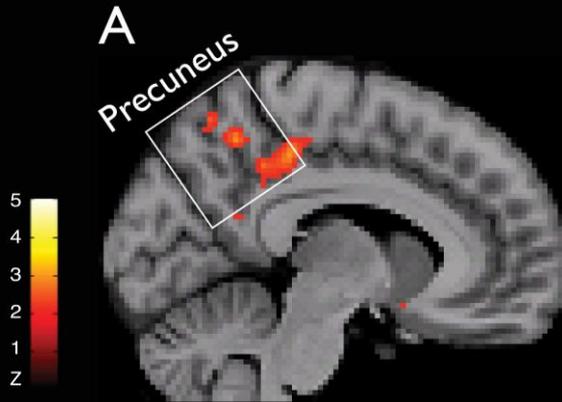
μ -Opioid Activation During tDCS

Sham

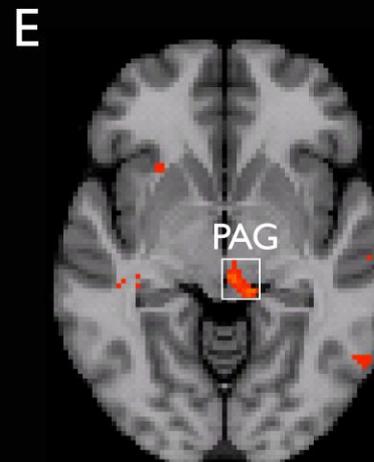
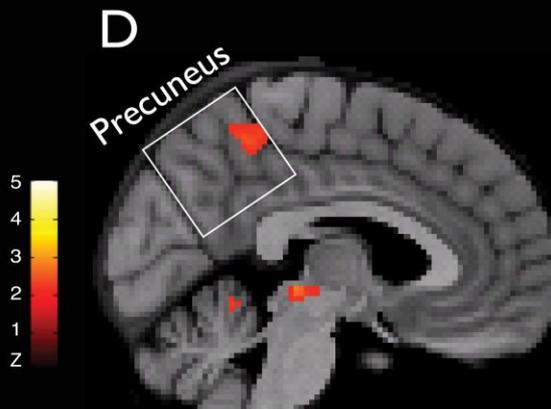


μ -Opioid Activation During tDCS

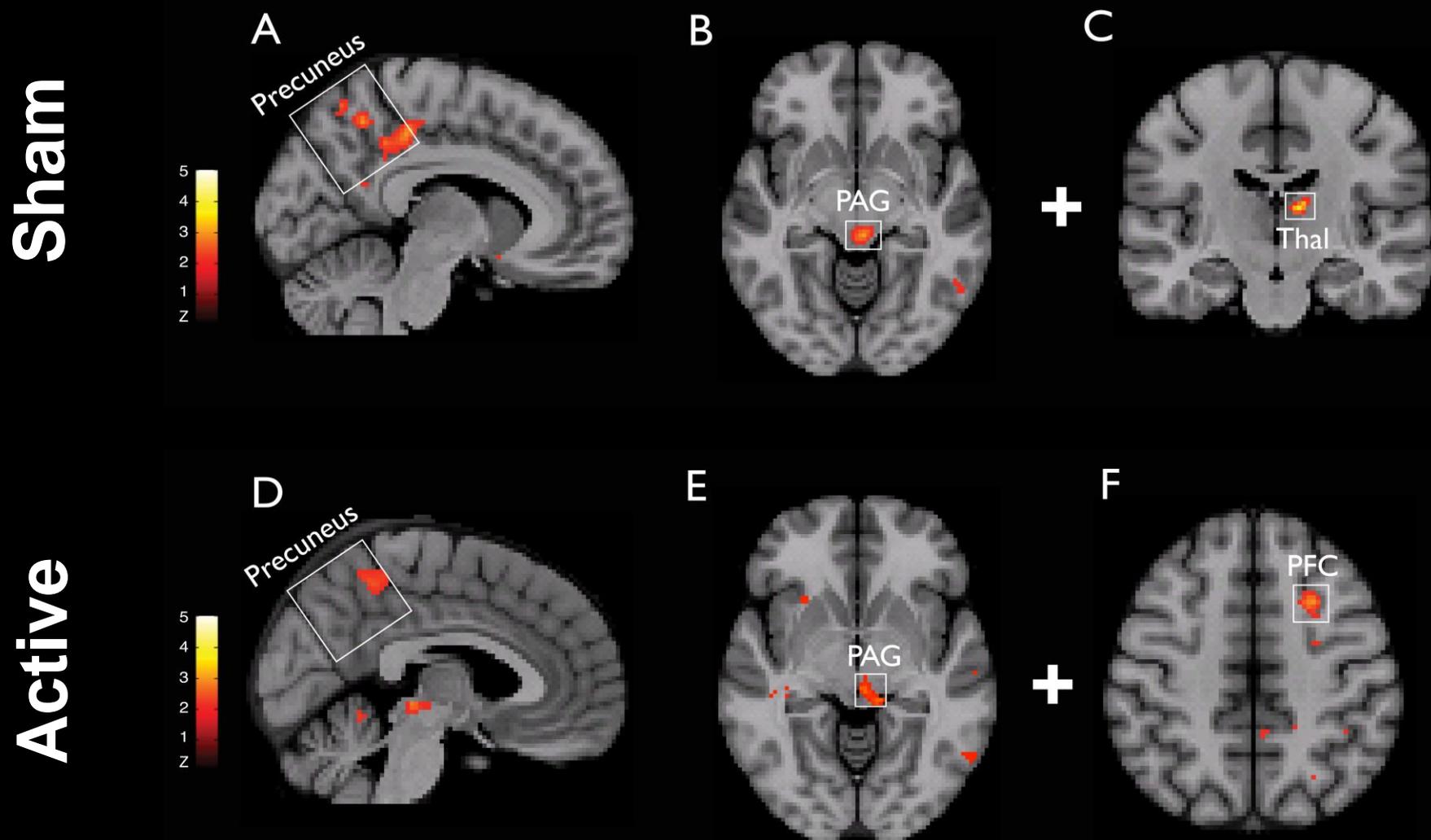
Sham



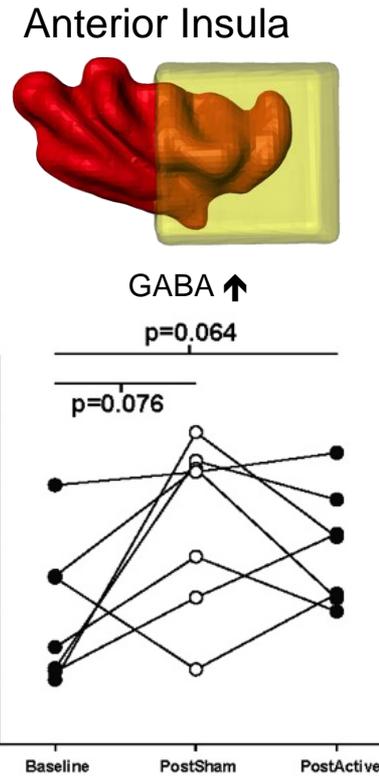
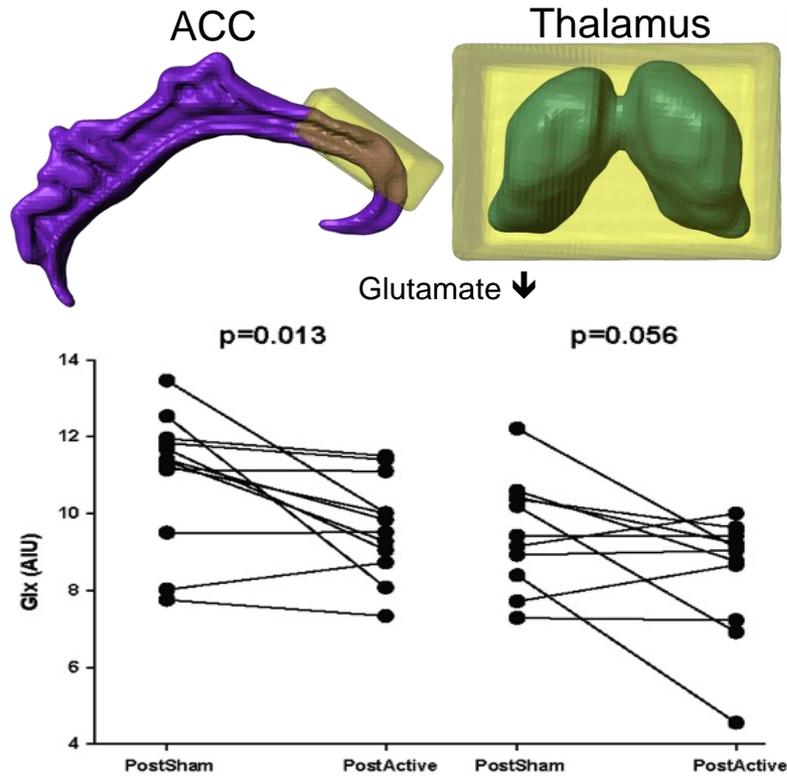
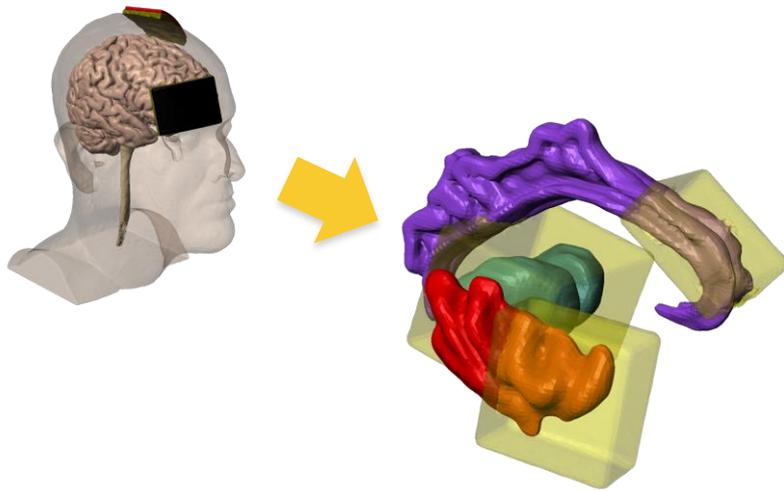
Active



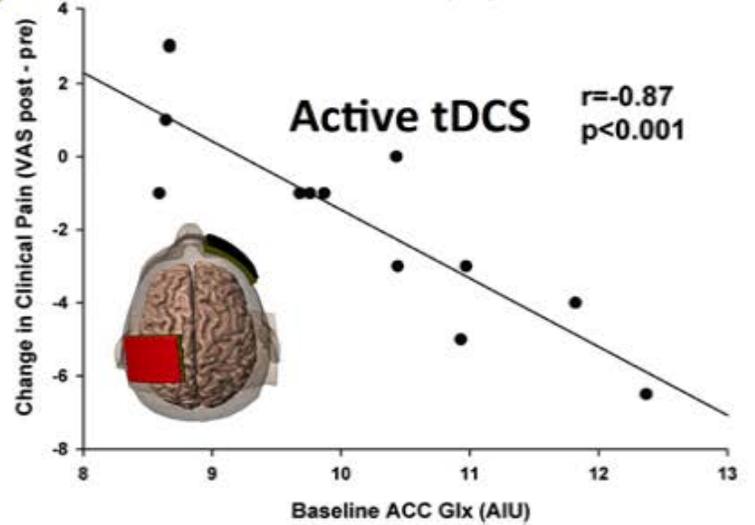
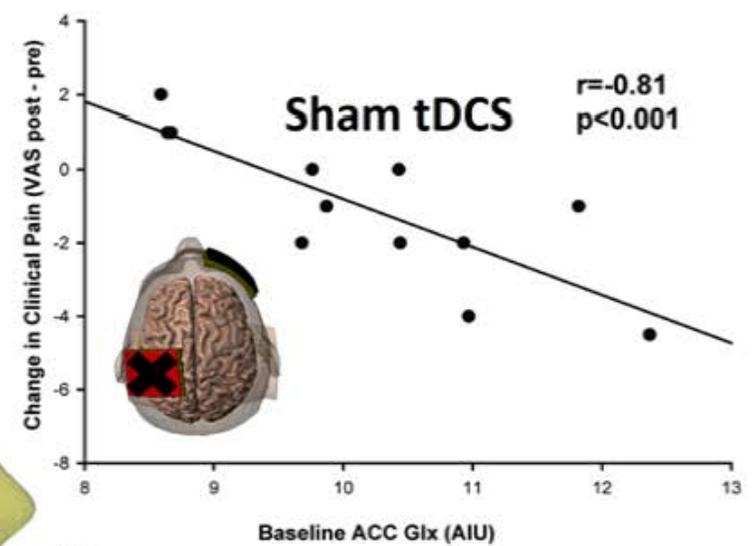
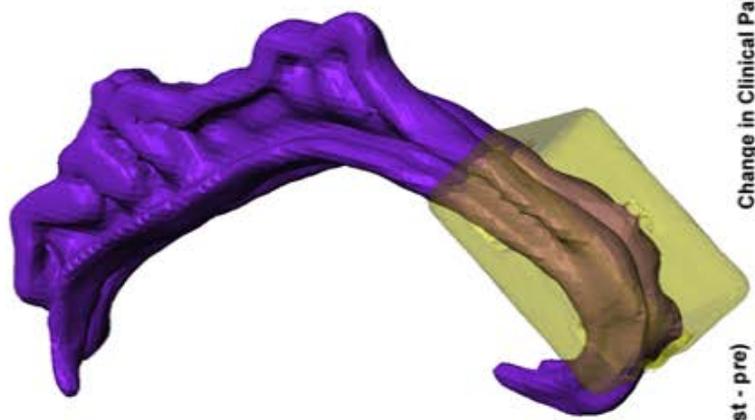
μ -Opioid Activation During tDCS



**What is the Chronic Effect
of Sham and Active
Neuromodulation?**

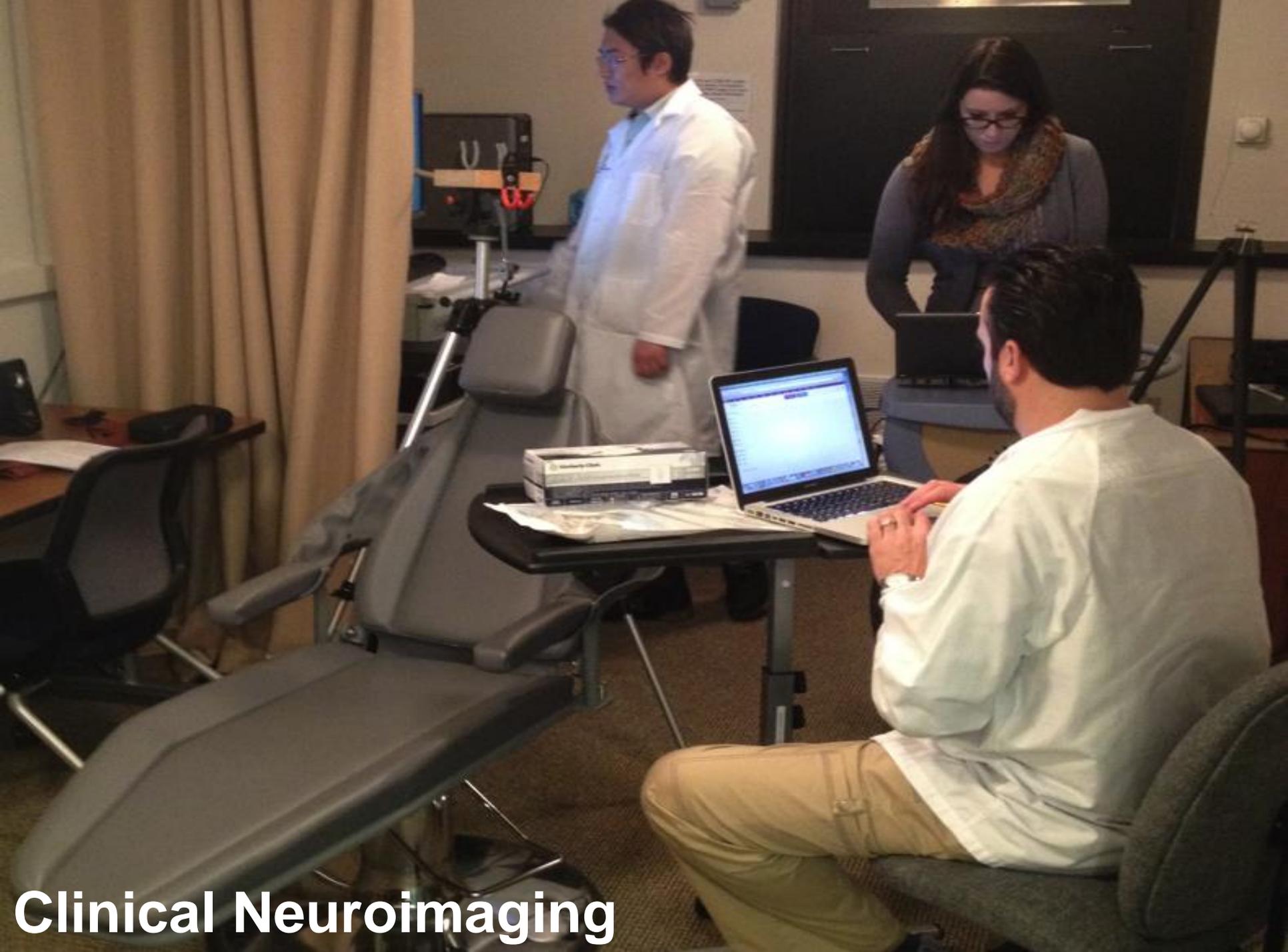


Pre-Treatment Glx within the Anterior Cingulate Predicts Subsequent Clinical Response to Sham and Active tDCS

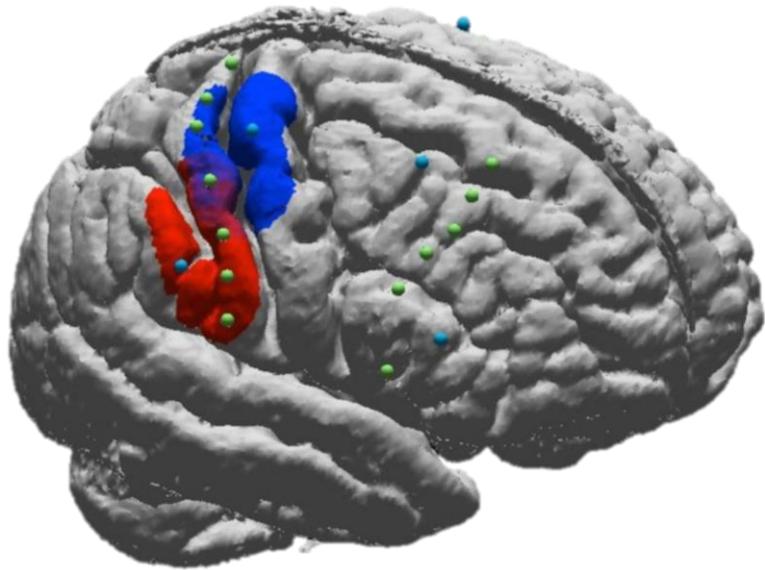


So what?

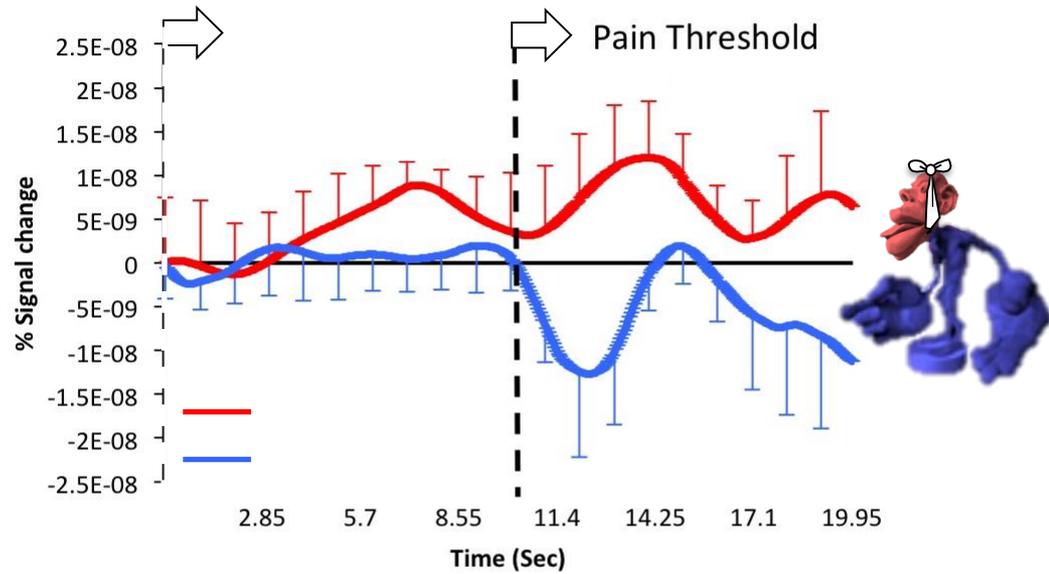
**I can not read my patient's
brain in the office!**

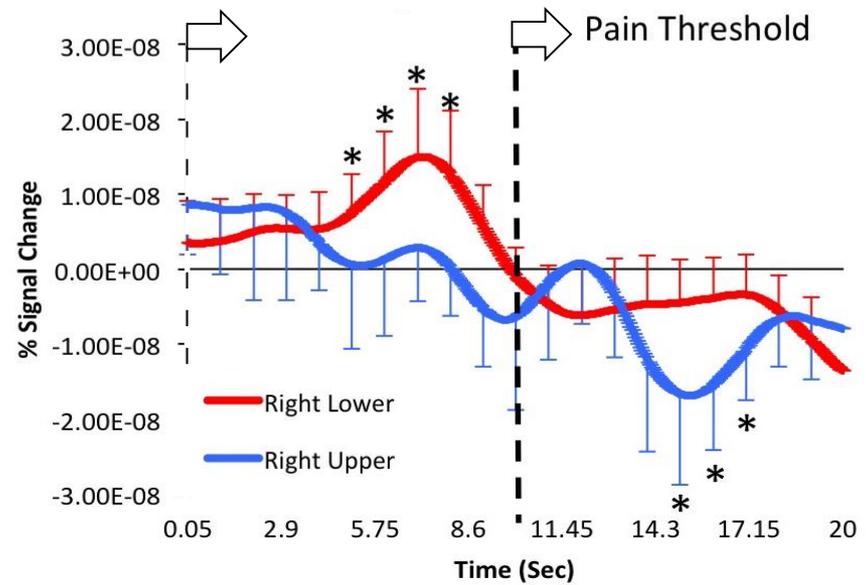
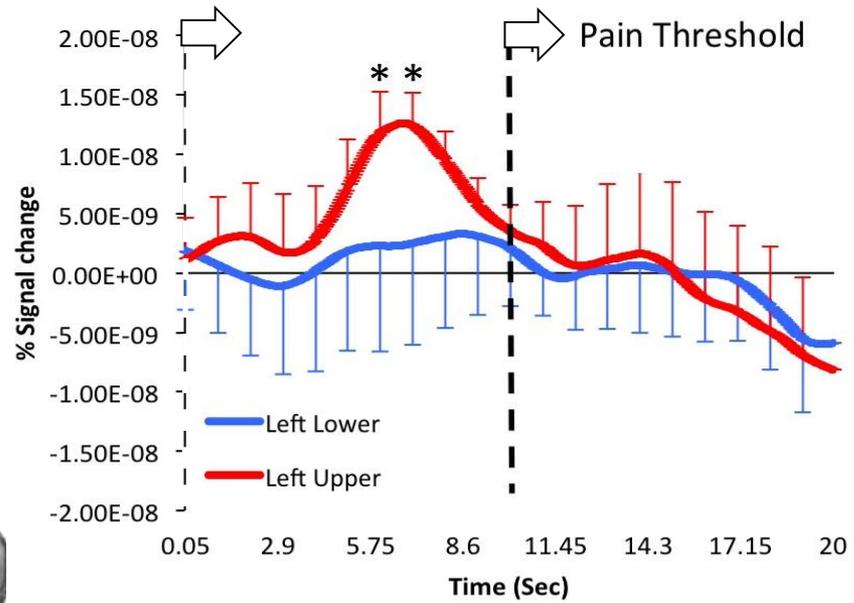
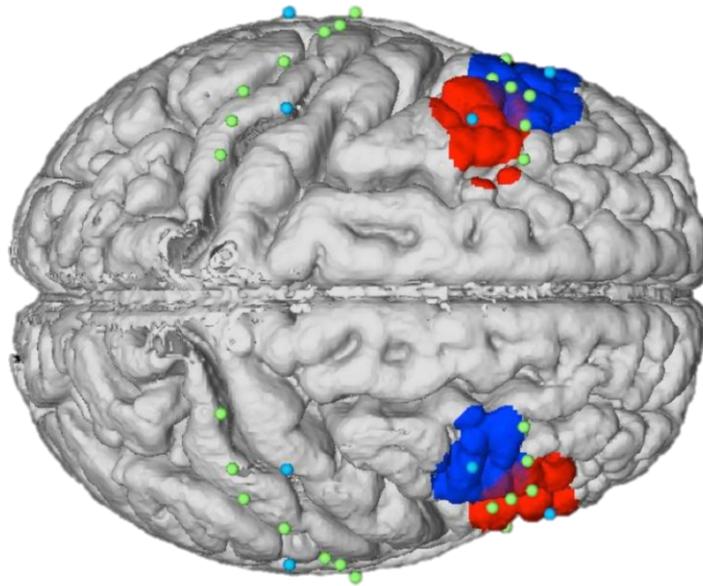


Clinical Neuroimaging

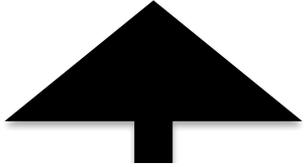


Dental Pain Evoked Response at SI





HIGHER CLINICAL PAIN

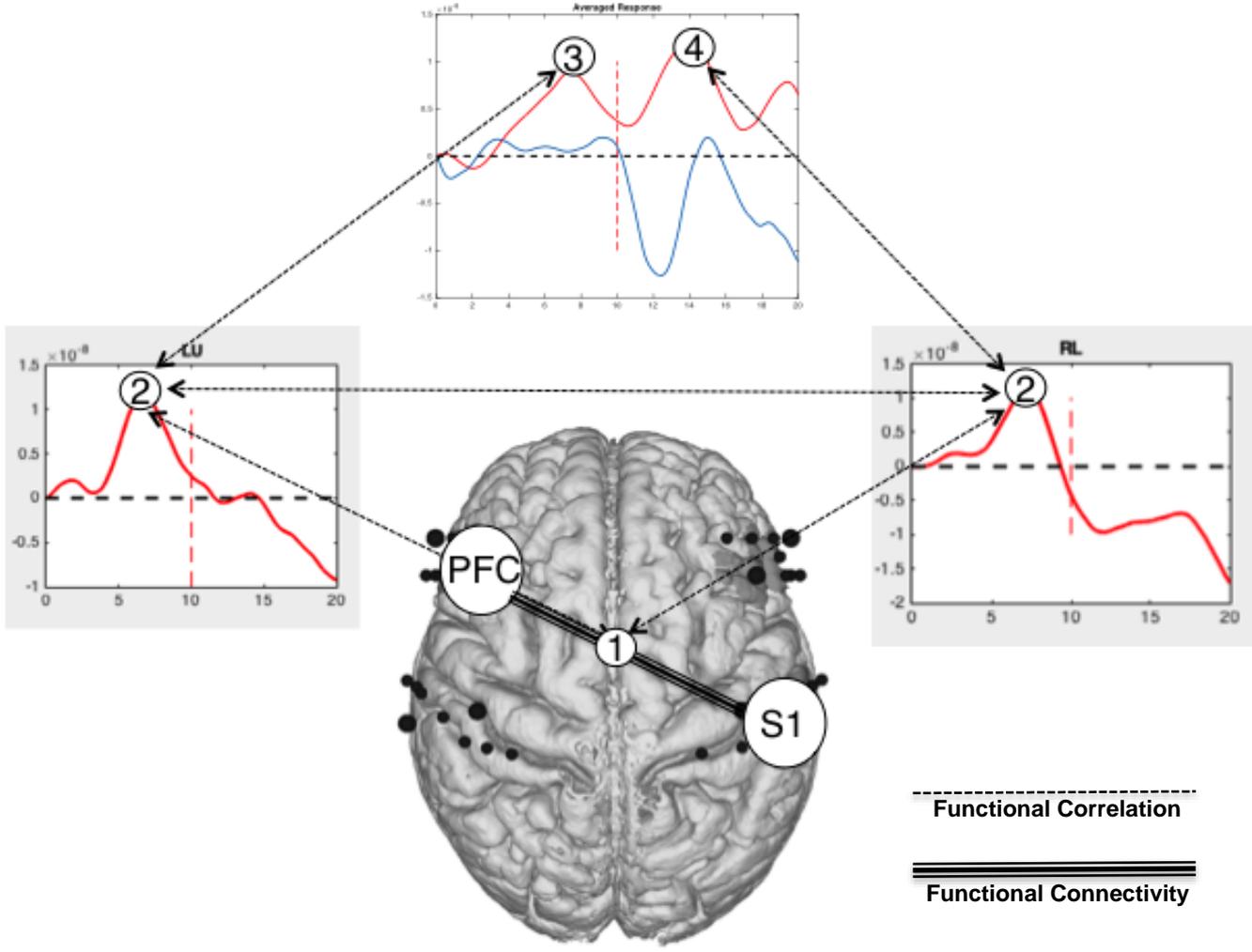


④ Stronger Pain-Related Activity in S1

③ Faster and Stronger Cold-Related Activity in S1

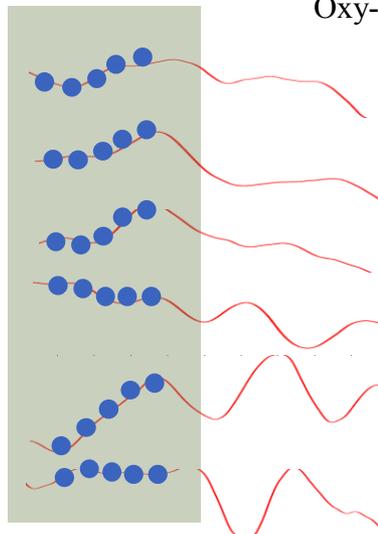
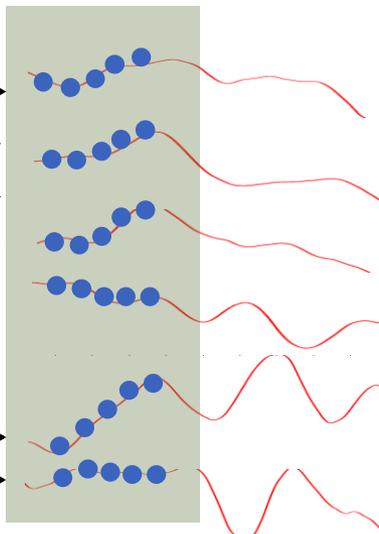
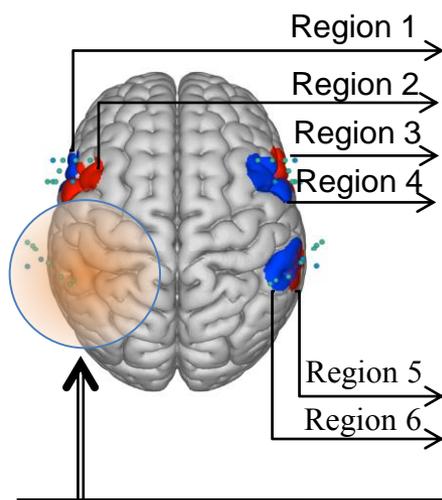
② Stronger Activity in PFC During Pain Expectation

① Stronger PFC-S1 Functional Connectivity

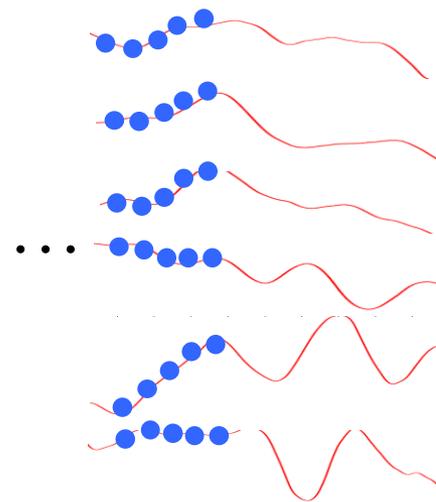


Pattern Recognition + Clinical Augmented Reality

Neuroimaging (fNIRS)



Oxy-Hb & Deoxy-Hb

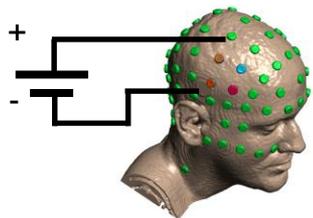


Time

Training trials

Testing trials

Brain Stimulation



Augmented Reality



Predictor

Predictor 1
K-NN

Painful

Non-Painful

Predictor 2
K-NN & DT

Severe

Moderate

Mild

Accuracy:

80% (Block wide)

70%



MICHIGAN **C**LINICAL **A**UGMENTED **R**EALITY FOR **P**AIN UNIT