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Update on Ziconotide and intrathecal therapy for patients with chronic pain

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Ziconotide is a synthetic, water-soluble cone snail venom-derived peptide with a molecular weight of 2,639 Daltons. It is a nonopioid analgesic that selectively binds to N-type voltage-sensitive calcium channels on primary nociceptive afferent nerves in the dorsal horn of the spinal cord. This mechanism releases analgesic neurotransmitters into the synaptic gap and subsequently blocks pain signal transmission. Ziconotide does not easily cross the blood-brain barrier, instead revealing its highly potent antinociceptive effect only after intrathecal administration. Because it has a narrow therapeutic window, careful dose titration, and a lag time to allow for onset (and offset) of analgesia and adverse effects are required. The presentation will focus on a recently published consensus proposal and highlight the potential of this drug as well as the areas where additional experience is needed..

Biography

Dr. Georgios Matis is a senior consultant for neurosurgery. He leads the chronic pain / spasticity sector of the Department of Stereotactic & Functional Neurosurgery in the University Hospital of Cologne. He has been trained in Greece (General University Hospital of Alexandroupolis, G. Papanikolaou General Hospital of Thessaloniki & 417 Army Equity Fund Hospital of Athens), USA (Department of Neurosurgery, Weill Cornell Medical College, New York, NY), Switzerland (Department of Neuroradiology, University Hospital of Zurich, Zurich) and Germany (Department of Stereotactic & Functional Neurosurgery, University Hospital Cologne, Cologne).

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