



Time-dependent Effects of Botulinum Toxin on Functional Recovery in Sciatic Nerve Injured Rats

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- immediately after injury or one week after injury.

Methods

- Twenty 6-week-old rats with sciatic nerve injury were randomly divided into \bullet four groups including the immediately treated (IT) group, delay treated (DT) group, the control group and the sham group.
- IT group received a single session of intraneural BoNT/A (7 U/kg) injection \bullet immediately after a nerve-crushing injury.
 - DT group received a single session of intraneural BoNT/A (7 U/kg) one week

Figure 1. CMAP amplitude of each group, weekly

- The SFI results showed similar trends to the CMAP results. \bullet
- When compared to the control group, both IT and DT group had significantly higher SFI score from week 8 (p < 0.05).
- When comparing the IT and DT groups, the IT group showed greater SFI \bullet throughout the experiment, with statistically significant peaks at weeks 3 to 5 and after week 8.
- While the CMAP results fell short of the sham group, the SFI results showed that the IT group was not statistically significantly different from the sham

after sciatic nerve injury.

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- One week following sciatic nerve injury, the control group was treated with an intraneural injection of normal saline.
- The sham group received only skin and muscle incision. \bullet
- For functional assessment, electrophysiological studies and serial sciatic \bullet functional index (SFI) analysis were performed every week for 9 weeks.

Result

- The electrophysiological study results demonstrated an increase in compound muscle action potential amplitude (CMAP) in IT, DT and control groups, indicating a gradual recovery of motor function.
- Comparing IT and control group, IT group showed a significantly greater \bullet CMAP two weeks after a nerve-crushing injury (p < 0.05).
- In the DT group, there was no significant difference from the control group

group at week 9.



Conclusion

Our research showed that BoNT/A injections immediately after nerve injury were most effective. Injections a week after injury resulted in

until week 7, but there was a significant difference in CMAP from week 8.

- When comparing the IT and DT groups, the IT group had a significantly greater CMAP starting at week 5.
- Even though time passed by week 9, all groups had considerably lower CMAP values than the sham group.

faster recovery than the control group.

• In conclusion, it seems that BoNT/A injections should be administered as soon as possible for recovery after nerve damage. Furthermore, as it was effective even when injected a week later, we suggest that injecting during the subacute phase is still effective.

Reference

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