

## **Reduced Muscle Sympathetic Nerve Activity Response to a Cold Pressor Test in Multiple Sclerosis**

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*Category: Doctoral*

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### **ABSTRACT**

Multiple sclerosis (MS) is a neurodegenerative autoimmune disease characterized by demyelination in the central nervous system leading to potential impairments in the autonomic control of cardiovascular function. We have previously demonstrated individuals with MS exhibit a diminished ability to increase blood pressure in response to a hypotensive stimulus compared with healthy controls likely due to impaired sympathetic modulation of the vasculature. **PURPOSE:** The aim of the current investigation was to test the hypothesis that muscle sympathetic nerve activity (MSNA) responses to a cold pressor test (CPT) are reduced in individuals with MS compared to healthy controls. **METHODS:** Four patients with relapsing-remitting MS (2 females/2 males, EDSS < 4) and 4 sex-, age- and mass-matched controls were instrumented for MSNA (peroneal nerve), mean arterial blood pressure (MAP; Finometer), and heart rate (HR). Subjects were exposed to a CPT by immersing a hand in ice water for 2 min. Mean cardiovascular and MSNA responses (burst frequency) at baseline and at 30 sec intervals during the CPT were compared between groups. **RESULTS:** Heart rate ( $P < 0.001$ ) and MAP ( $P < 0.001$ ) responses increased from baseline throughout the CPT but no group differences were observed ( $P = 0.10$  and  $P = 0.78$ , respectively). At baseline, MSNA was similar between groups (MS:  $2 \pm 2$  vs. CON:  $14 \pm 9$  bursts/min;  $P = 0.239$ ). However, individuals with MS had blunted MSNA responses to CPT compared to healthy controls at 60 seconds (MS:  $18 \pm 14$  vs. CON:  $42 \pm 10$  bursts/min;  $P = 0.033$ ), at 90 seconds (MS:  $16 \pm 12$  vs. CON:  $44 \pm 10$  bursts/min;  $P = 0.017$ ) and at 120 seconds (MS:  $13 \pm 12$  vs. CON:  $43 \pm 13$  bursts/min;  $P = 0.012$ ). **CONCLUSION:** Individuals with MS appear to have an attenuated muscle sympathetic response to CPT. However, MAP appears to respond similarly to healthy controls potentially through other compensatory mechanisms.