The Spared Nerve Injury (SNI) model was developed by Decosterd and Woolf, 2000. The SNI model consists of transection of the tibial and common peroneal branches of the sciatic nerve: leaving the sural nerve intact. This nerve then develops signs of neuropathic pain with significant mechanical allodynia.

It gives many advantages:

1. Neuropathic pain is persistent and allow to investigate habituation phenomena during repeated injections of compounds.
2. The pain generated is more robust than CCI model which produce lower response to mechanical stimulation [Wang and Wang, 2003].
3. This model is highly reproducible.

Sub-cutaneous injection of pregabaline reverse mechanical allodynia in SNI neuropathic pain model.
