



BME: 200/300

Adhesion

Dissolution

Team: Hanna Barton, Raven Brenneke, Julia Handel, Kathryn Hohenwalter, Nathan Richman

Client: Dr. Philip Bain

Advisor: Prof. Kristyn Masters

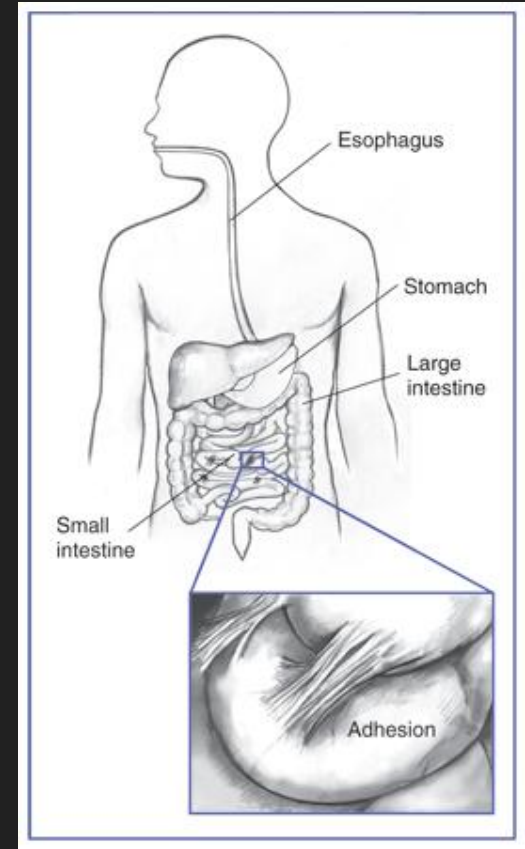
Overview

- Background Information
- Project Problem Statement
- Summary of Design Specifications
- Design Overview
 - Hydrogel
 - Chemical Scalpel
 - Genetic Targeting
- Design Evaluation
- Future Work
- Conclusion



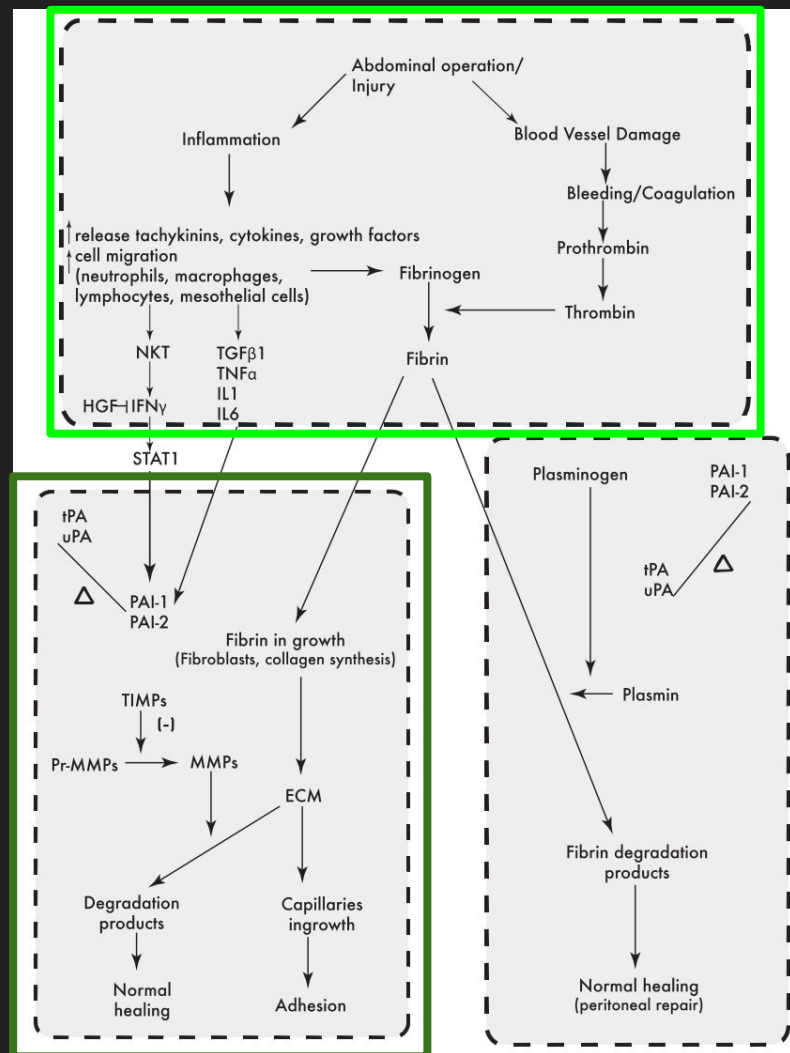
Background on Adhesions

- What are adhesions?
 - bands of scar-like, connective tissue that connect organs that are usually unattached
- What causes adhesions?
 - Adhesions can be caused by upper and lower abdominal surgeries
 - They form in anywhere from 67-100% of patients who undergo abdominal laparotomies
- Why do we care?
 - 15-18% of those with adhesions face complications (i.e. small bowel obstructions) that require surgical removal

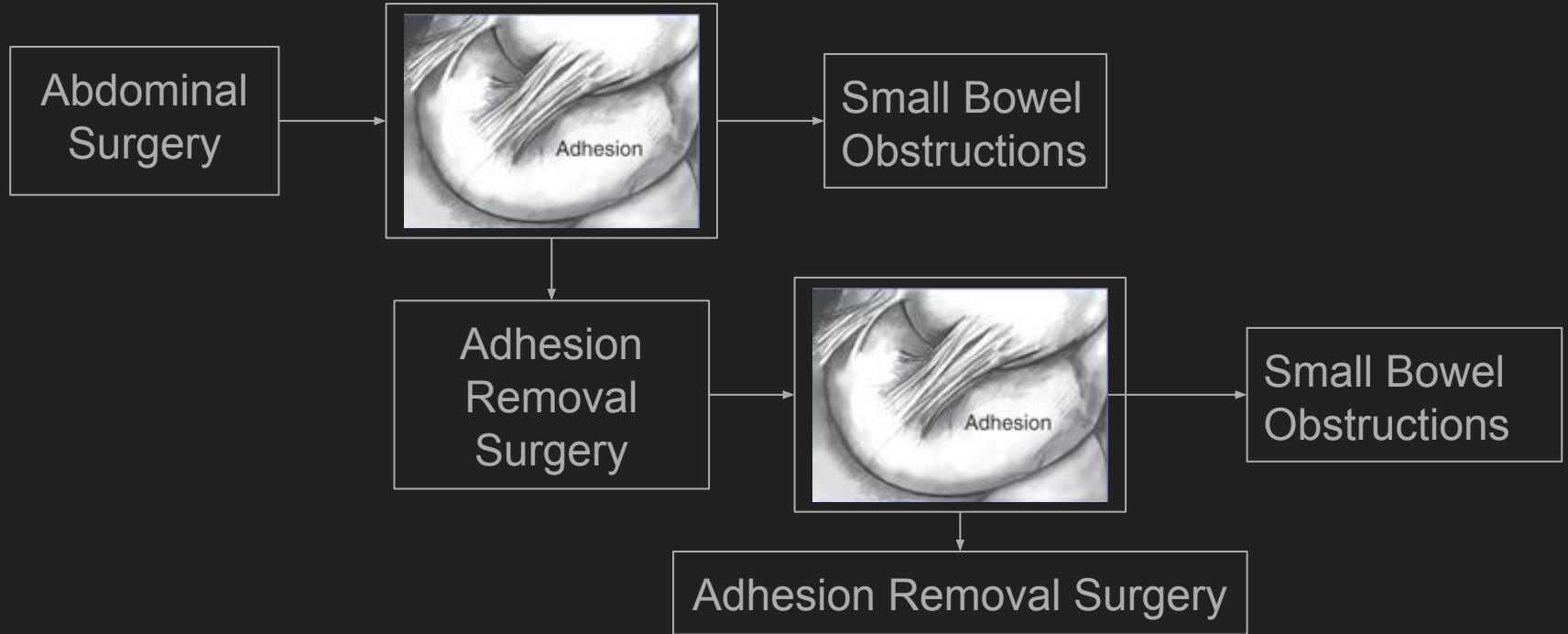


Adhesion Formation & Maturation

- New adhesions are made of fibrin
- As they mature, they become a collagenous extracellular matrix



Project Problem Statement



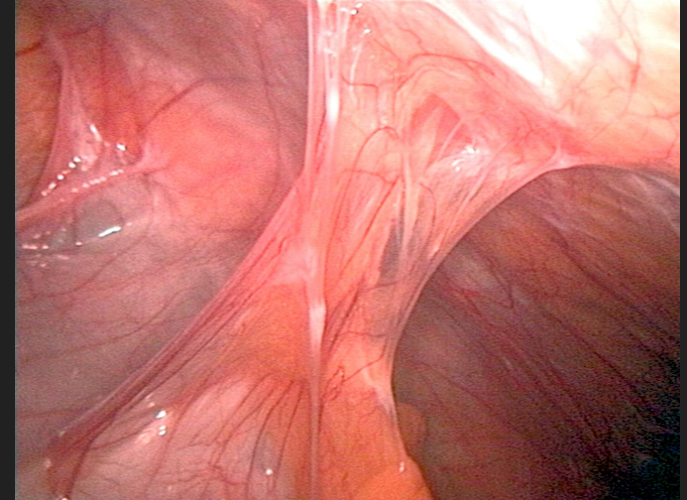
- Our task: less invasive, more natural solution

Design Specifications

- Must sever and reduce adhesion volume by >50%
- Must degrade mature adhesion (not preventative)
- Contain 98% of administered enzyme to adhesion
- Device and enzyme must be viable for FDA approval

Possible Targets for Adhesion Dissolution

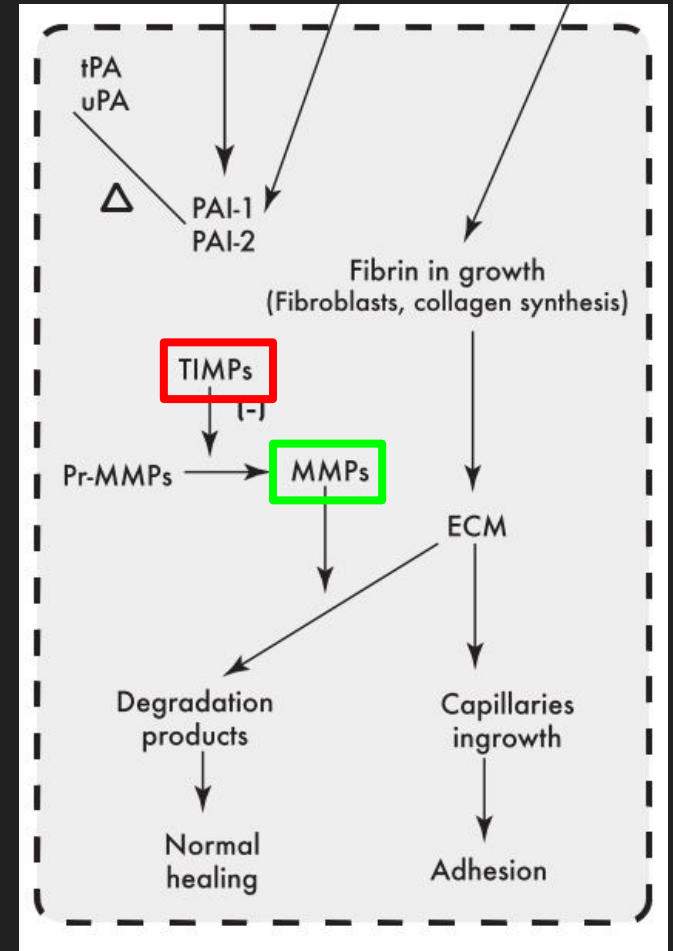
1. Vasculature
2. Cells
3. Extracellular Matrix (collagen)



- Vascular/cell removal - prevent growth
- ECM removal - degrade structure

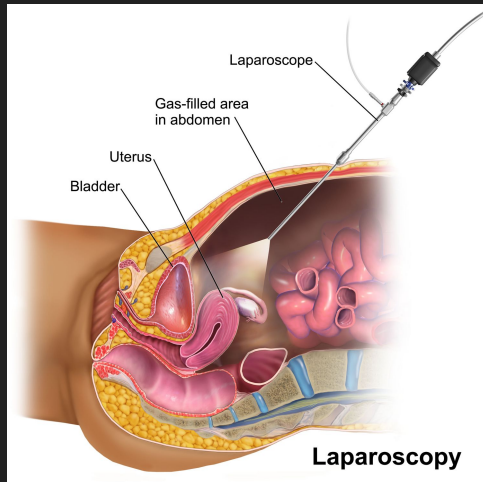
Solution: ECM degradation

- ECM regulation:
 - Matrix Metalloproteinases (MMPs)
 - degrade ECM
 - Tissue Inhibitor of Matrix Metalloproteinases (TIMPs)
 - inhibit MMPs
- Target ECM with MMP delivery

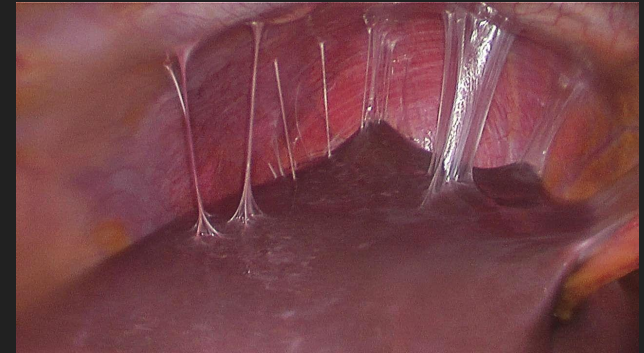


Design 1: Hydrogel

- Hydrogel
 - Diffuse MMPs selectively to the adhesion ECM
 - Controls the MMP
 - Laparoscopic Techniques



<https://en.wikipedia.org/wiki/Laparoscopy>



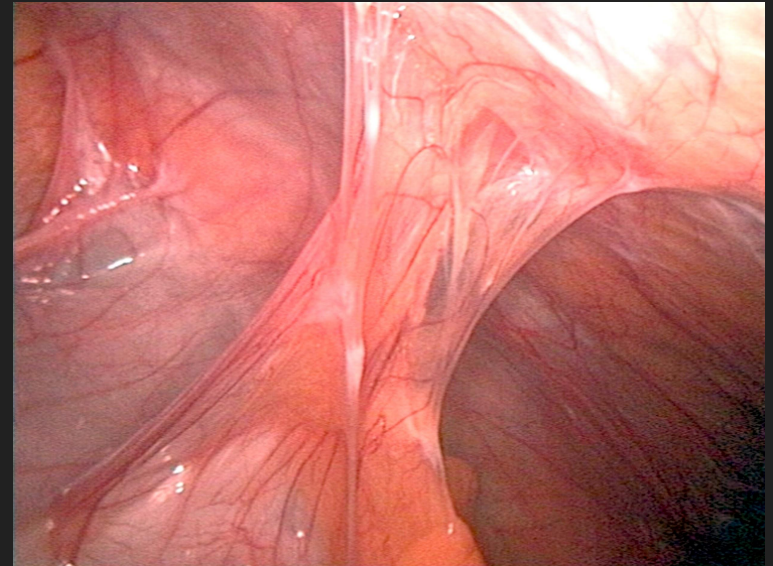
<http://www.healthbenison.com/abdominal-adhesions-treatment/>



<http://newatlas.com/temperature-controlled-hydrogel-movement/38865/>

Design 2: Chemical Scalpel

- Chemical Scalpel
 - Laparoscopic Method
 - Localized MMP release
 - Probe like design
 - User takes the probe and 'spots' the adhesion with MMPs
 - Need to use an MMP with short half life

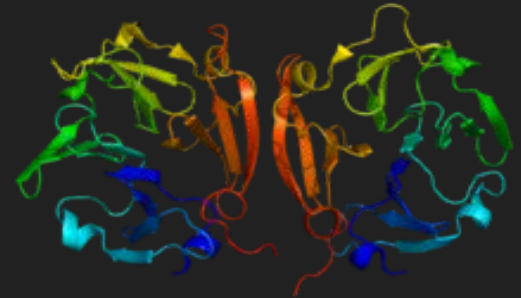
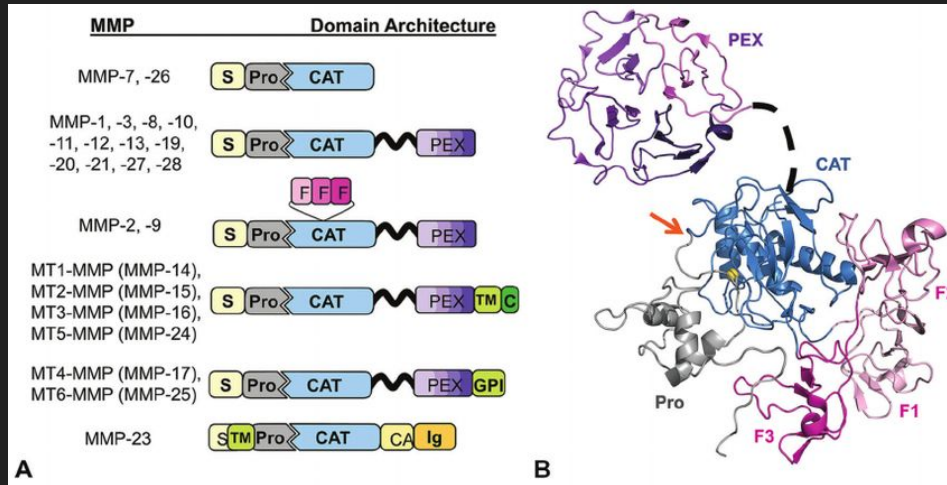


[https://en.wikipedia.org/wiki/Adhesion_\(medicine\)](https://en.wikipedia.org/wiki/Adhesion_(medicine))

<http://www.directindustry.com/prod/solartron-metrology/product-4818-57437.html>

Design 3: Gene Therapy-Endogenous MMP

- Gene Therapy
 - Endogenous MMP attack
 - Internally produce excess MMPs in the cells in adhesions
 - Uses the body's natural processes



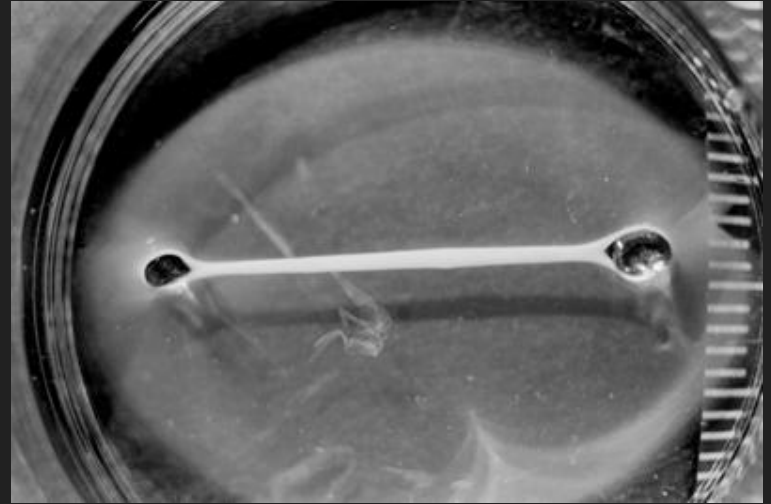
https://en.wikipedia.org/wiki/Matrix_metalloproteinase

Design Matrix

Criteria	Weight	Design 1: Hydrogel		Design 2: Chemical Scalpel		Design 3: Gene Therapy	
Safety	(30)	4/5	24	3/5	18	4/5	24
Performance	(25)	4/5	20	3/5	15	5/5	25
Simplicity (Ease of Use, Risk of Failure)	(20)	3/5	12	4/5	16	1/5	4
Cost	(15)	4/5	12	3/5	9	1/5	3
Fabrication	(10)	4/5	8	3/5	6	1/5	2
Total	(100)		76		64		58

Future Work

- Choose appropriate MMP
 - Criteria: collagen-specific, appropriate half-life, effective degradation performance
- Hydrogel Selection and fabrication
- Testing
 - MMP
 - Determine concentration
 - Hydrogel
 - Effectiveness
 - Surgical feasibility



Acknowledgements

- Prof. Kristyn Masters
- Dr. Philip Bain
- Dr. Ross Molot



Questions?



References

- R.T. Beyene et al. (2016). Intra-abdominal adhesions : Anatomy , physiology , pathophysiology , and treatment, 52(2015), 271–319. <http://doi.org/10.1067/j.cpsurg.2015.05.001>
- Buăureanu, Æ. A., & Buăureanu, T. A. S. (2014). Pathophysiology of Adhesions, (3), 293–298.