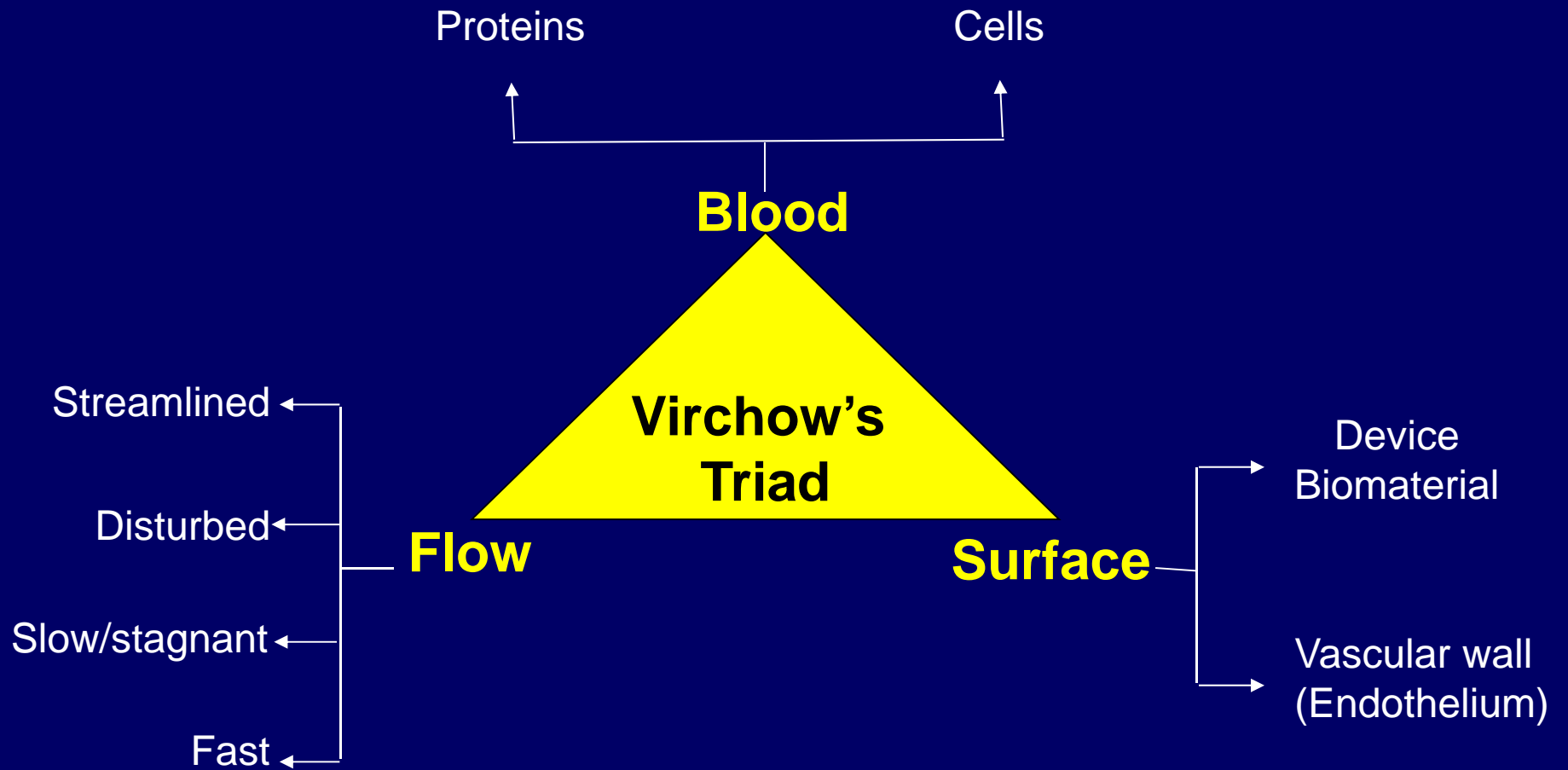


In-vitro Blood Flow Models for the Assessment of Device Thrombosis

Sivaprasad (SP) Sukavaneshvar, Ph.D.
Vice President, Thrombodyne, Inc.

Research Faculty
Department of Pharmaceutics
University of Utah

Salt Lake City, UT



Fluid Dynamics

Shear Stress

↳ Platelet activation

Normal velocity

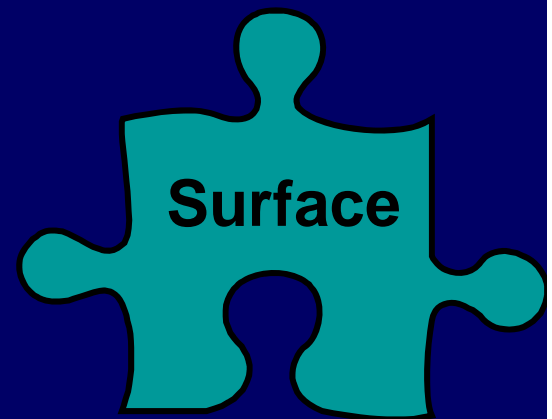
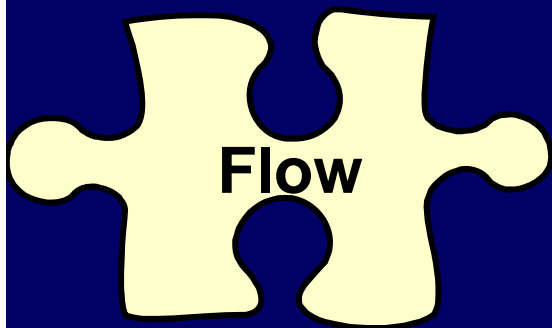
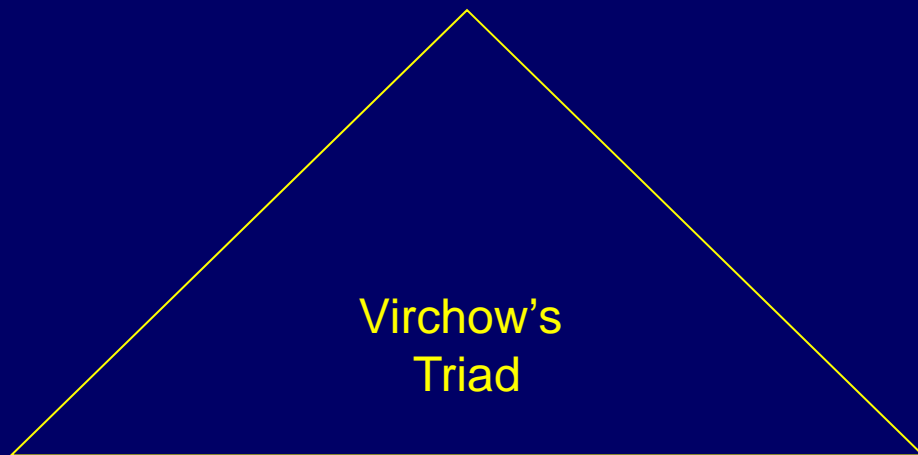
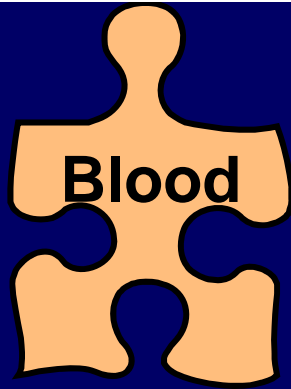
↳ Platelet adhesion & aggregation

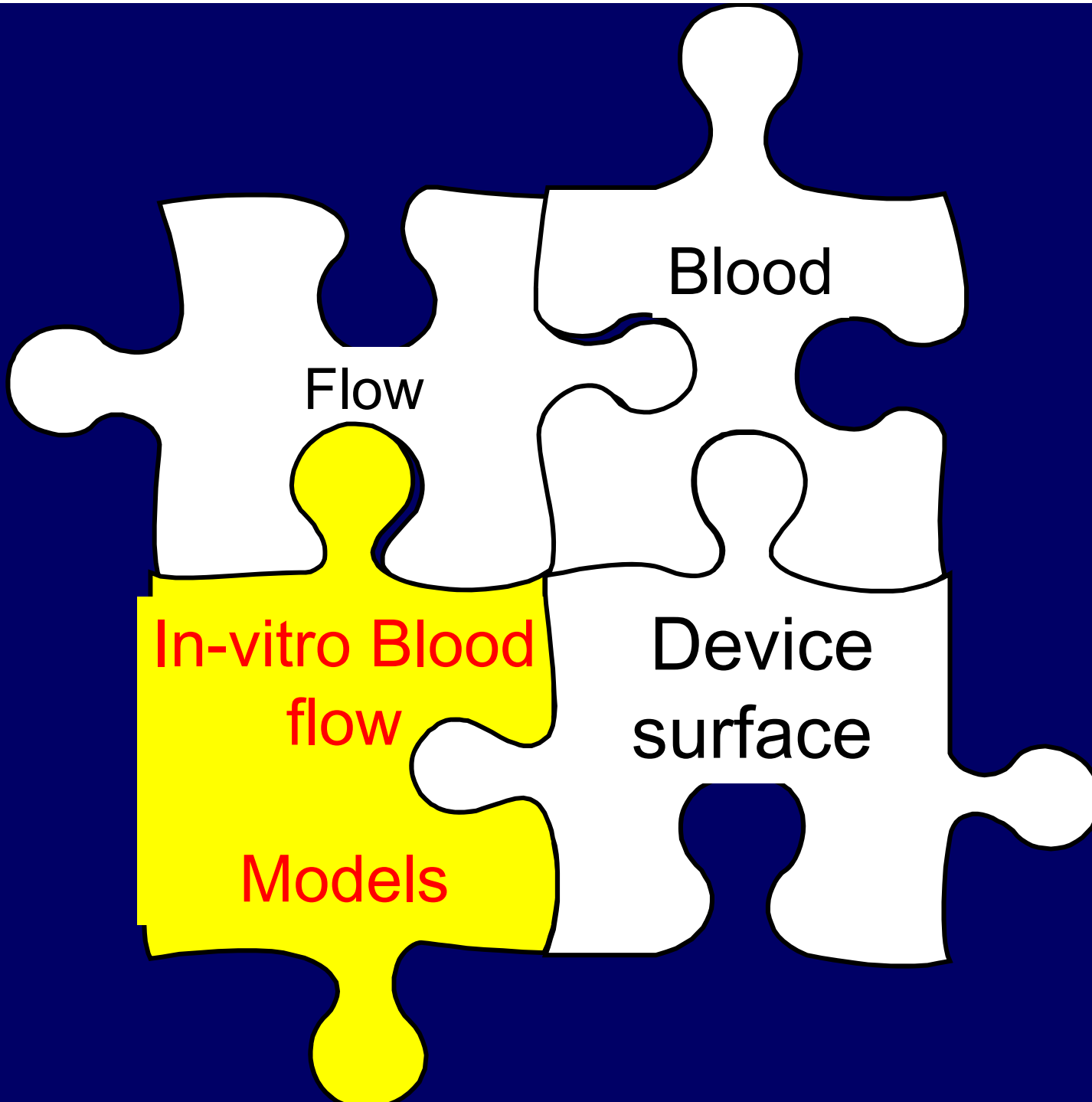
Vorticity

↳ Platelet aggregation (fluid phase)

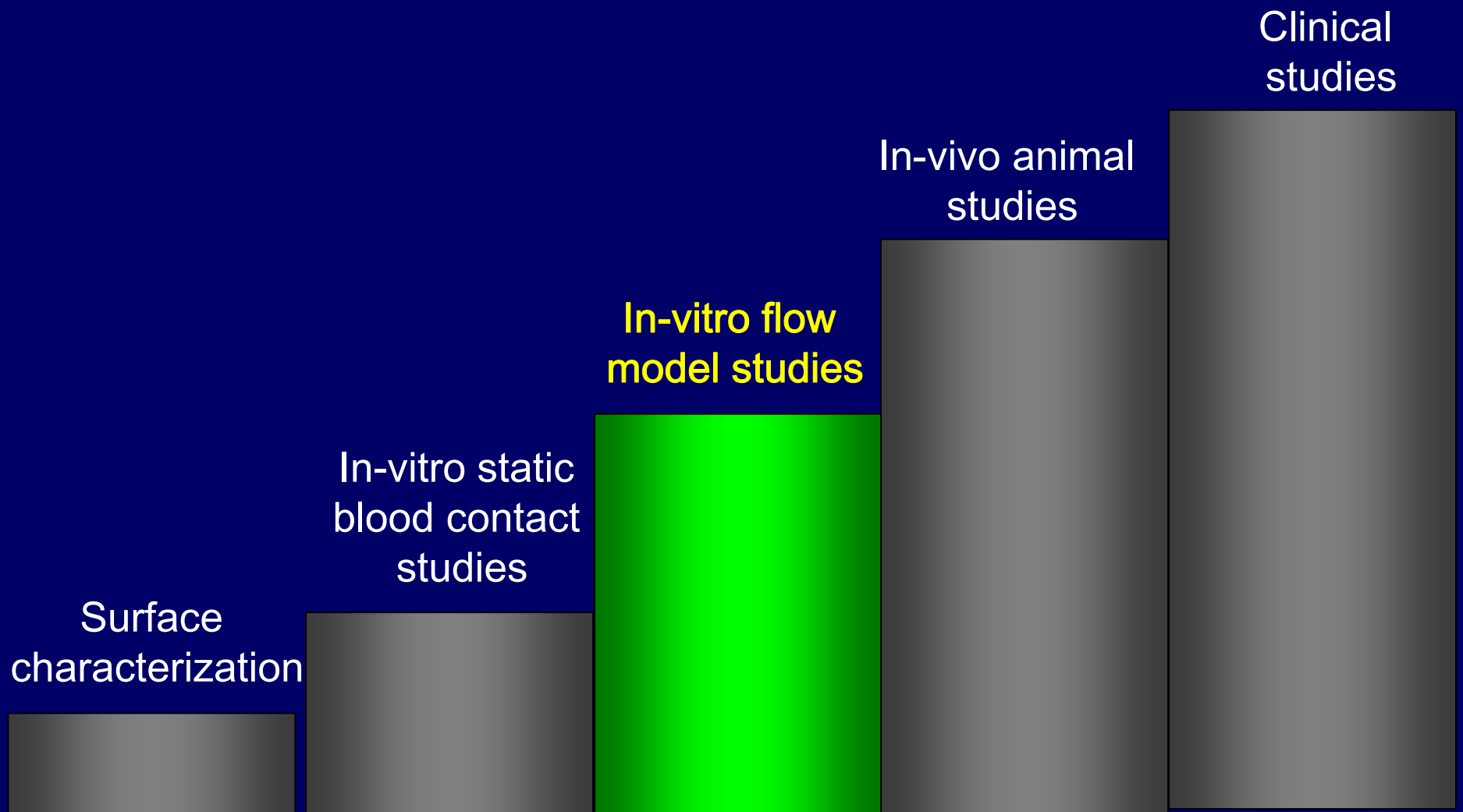
Residence time

↳ Coagulation and consolidation

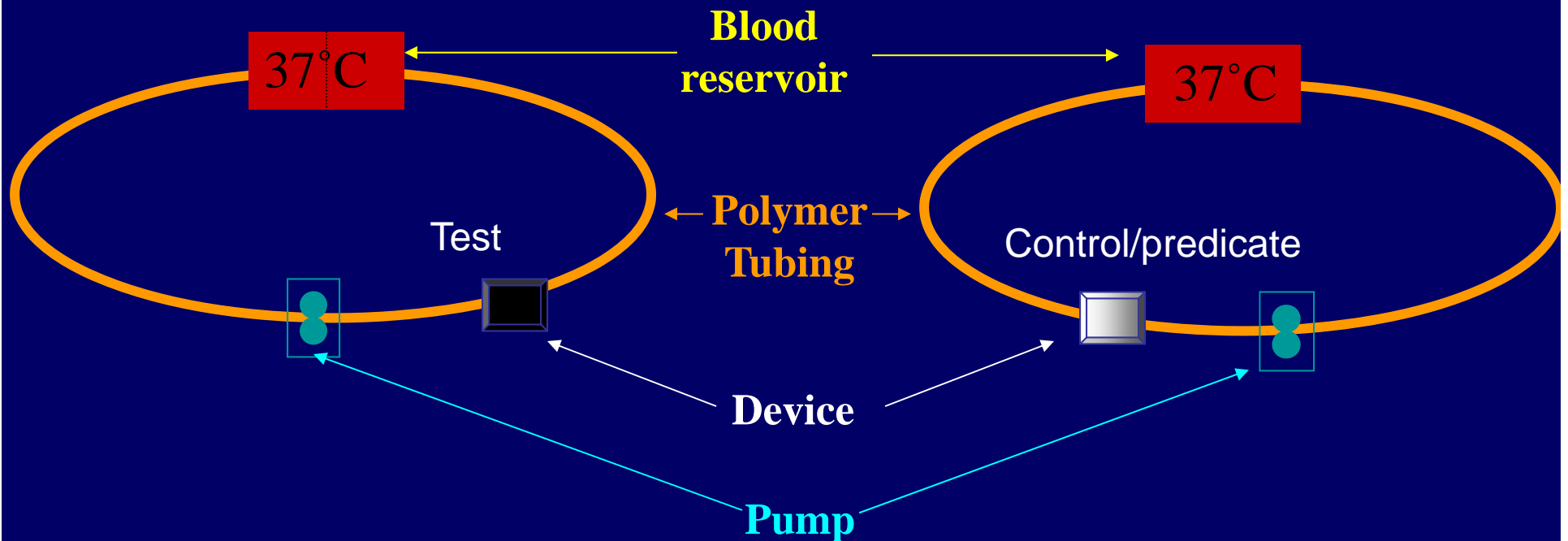




Assessment of Device Thrombosis



In-vitro Blood Flow Model Configuration



Variations: Branched flow, Single pass, Chandler loop, etc.

In-vitro Blood Flow Models: Key Features

- **Relative** assessment of thrombosis and related processes
- Fresh, anticoagulated whole blood
 - Heparin, citrate (recalcified), hirudin
- Blood flow conditions approach clinical use
 - Flow rate and conduit size
- Experiment time: ~hours

In-vitro Blood Flow Models: Key Features

- Measured output
 - Macroscopic thrombus (Weight, Visual analysis, Radiolabeling)
 - Microscopic components (SEM)
 - Fluid phase biomarkers
 - Thromboemboli
 - Device dysfunction caused by thrombus (occlusion)
- Test conditions selected to focus on the device and minimize the impact of other model components
 - Surface/Volume ratio
 - Edge effects

MERITS OF IN-VITRO FLOW MODELS

- Useful template for comparing device thrombosis under similar conditions
- Some control over blood parameters
- Control of other important parameters (e.g. flow)*
- Quantification of thrombosis

LIMITATIONS OF IN-VITRO FLOW MODELS

- Experiment duration
- Absence of long-term effects
 - Blood vessel wall-device interactions
 - Comprehensive hemostatic pathways (e.g. lytic pathway)
 - Inflammatory and foreign body response
- Need anticoagulation
- Control of other parameters (e.g. flow)!

EXAMPLES



Surface modification

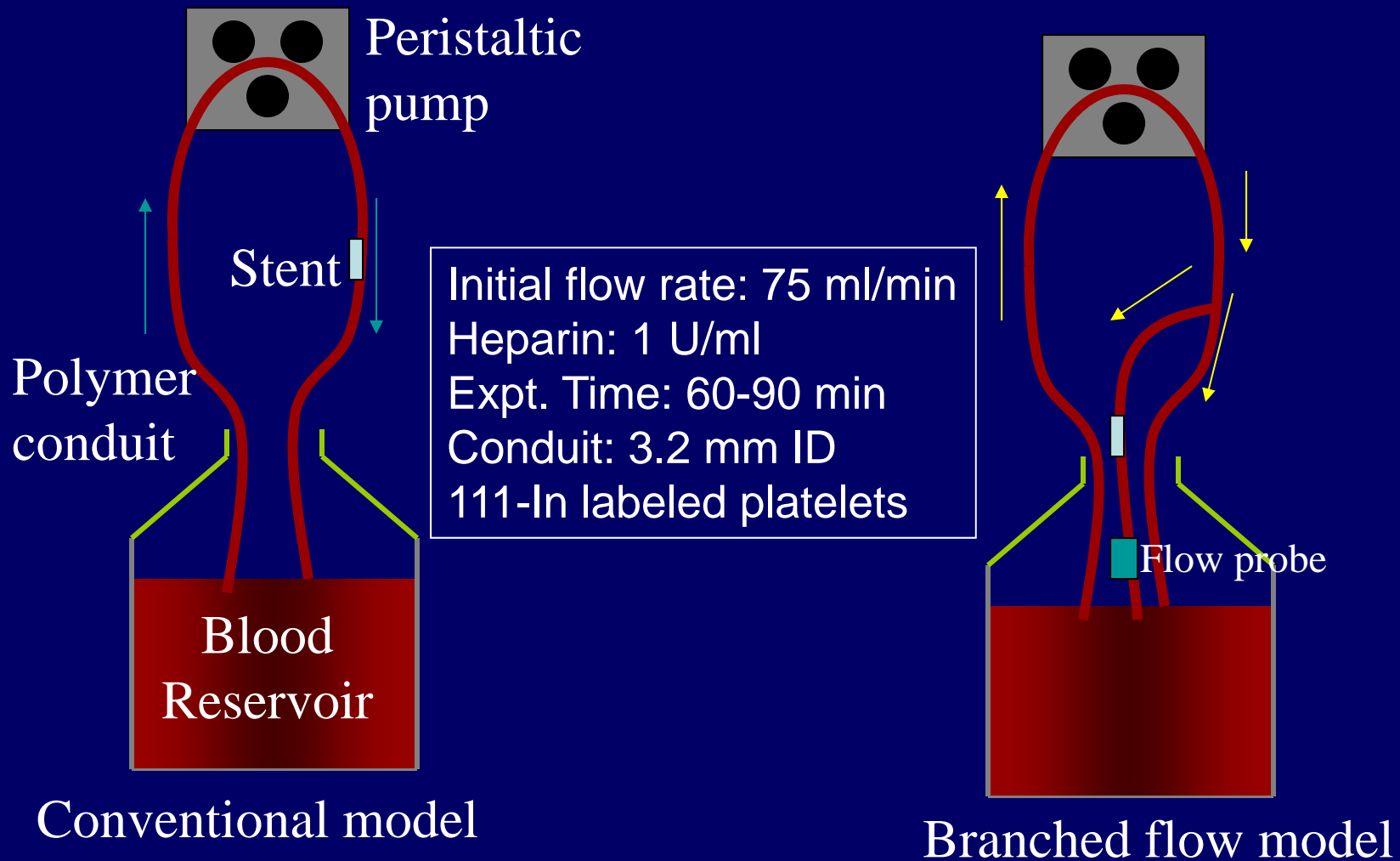
Device geometry
(flow disturbance)

Device Thrombosis

~~Vascular response~~

Blood reactivity

Coronary Stents Model Configuration(s)



THROMBUS ON STENTS



Uncoated (control)

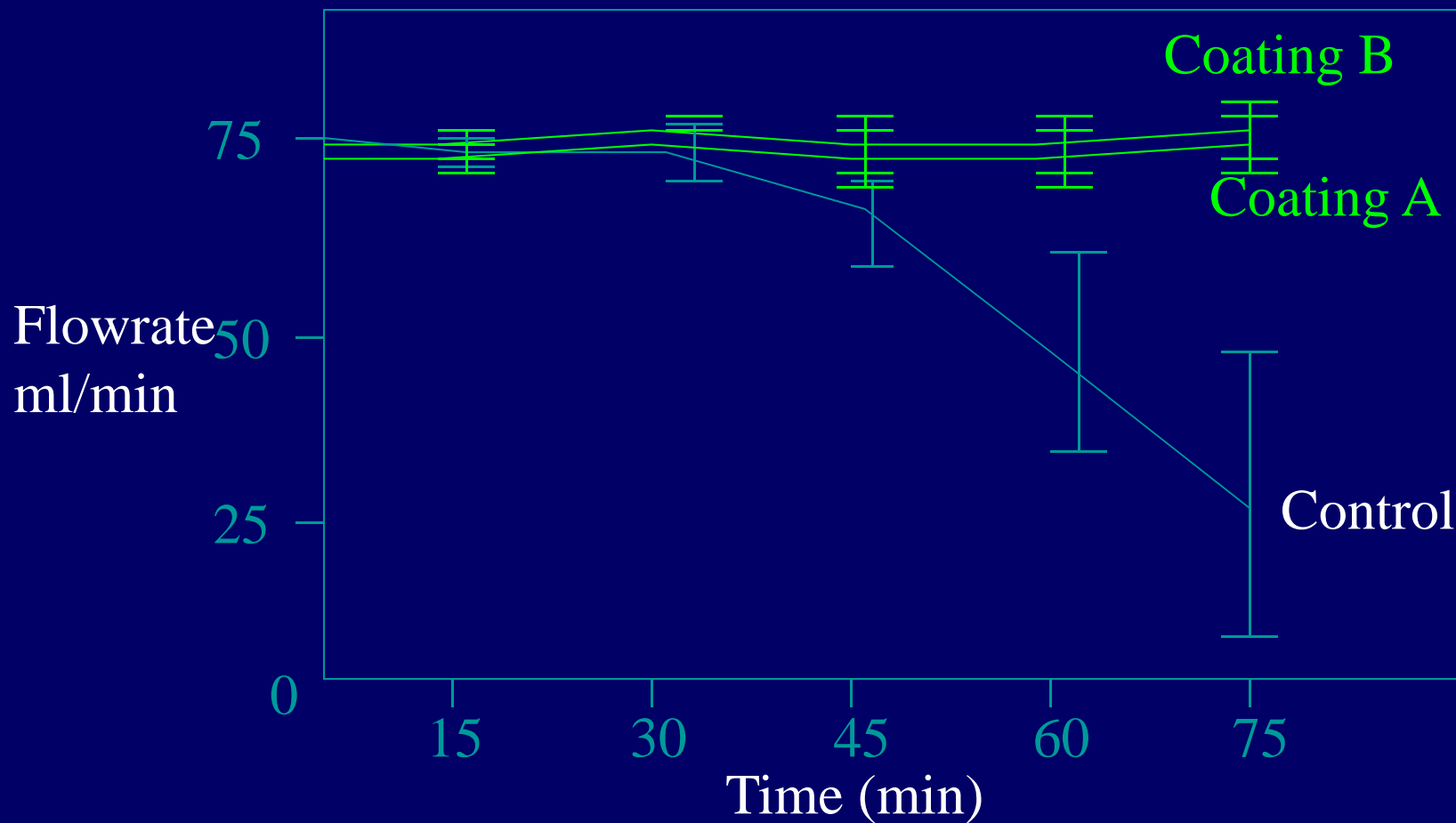


Coating A

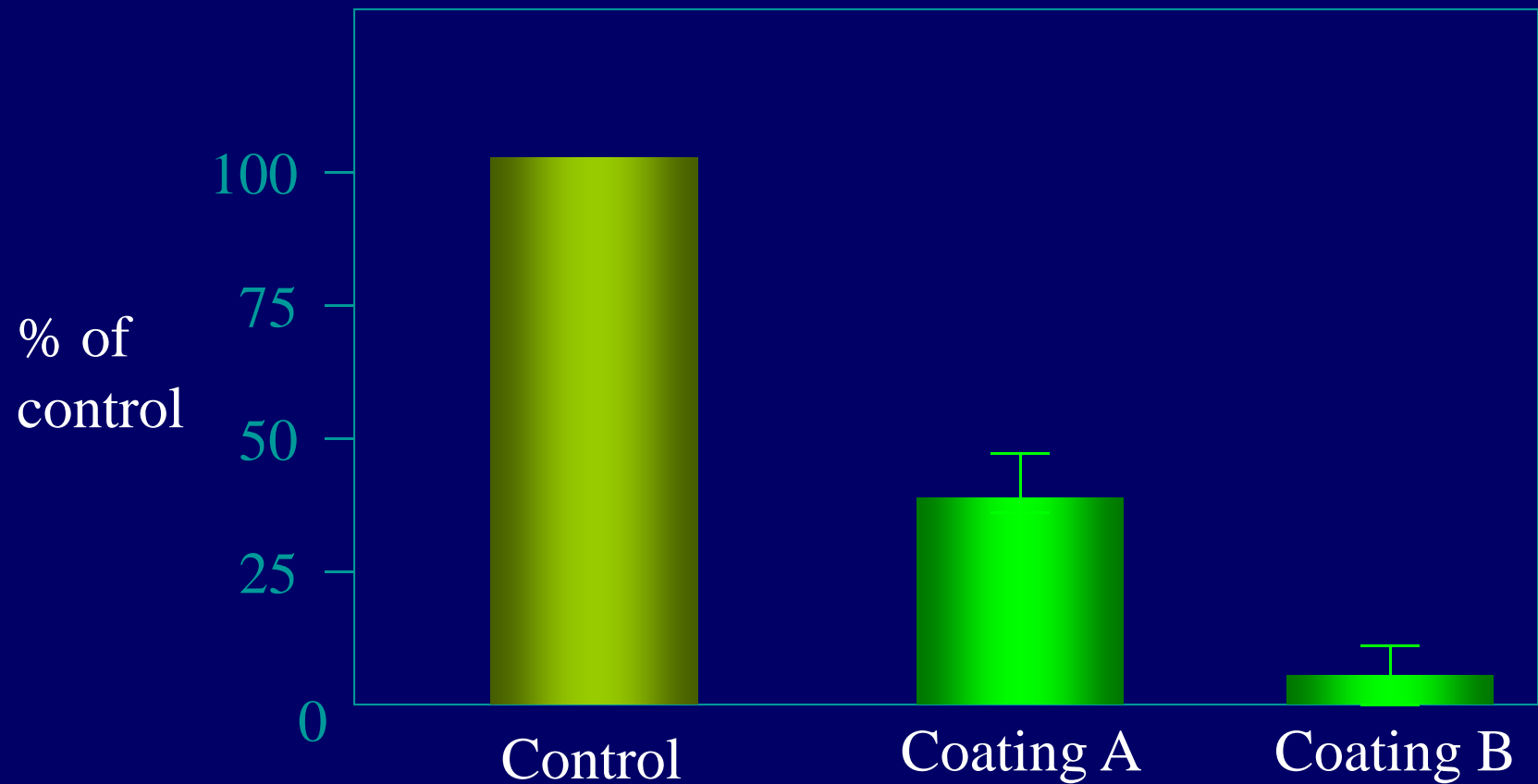


Coating B

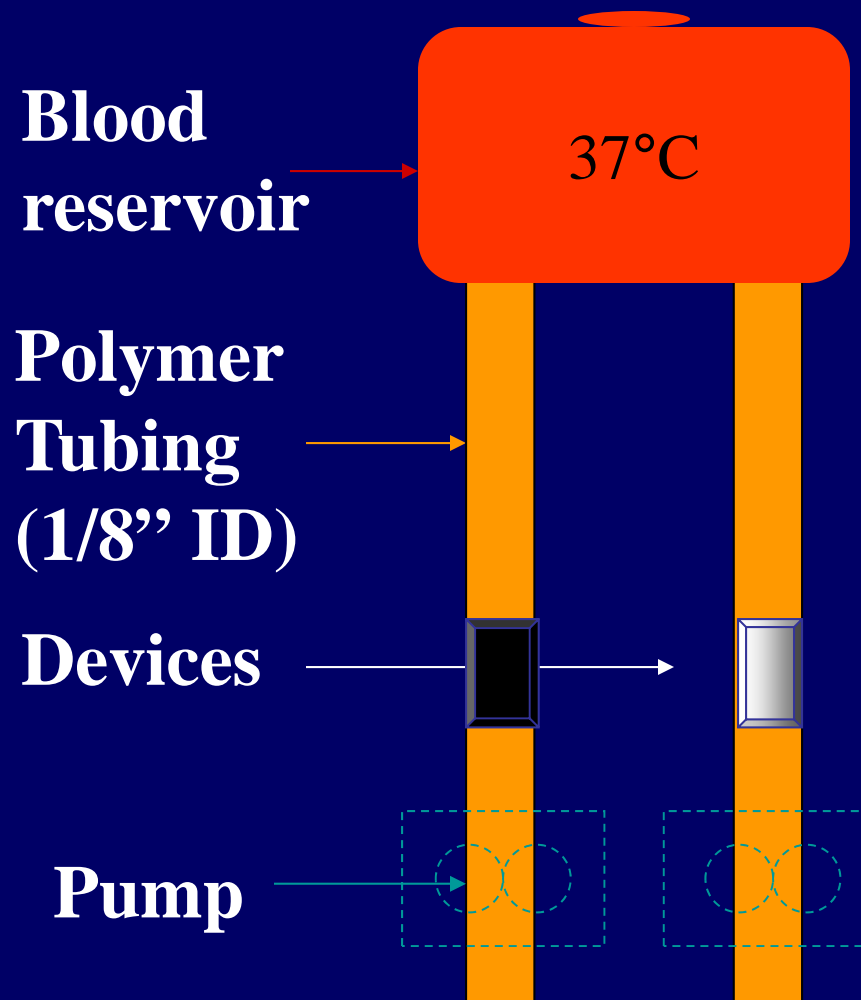
Thrombotic Occlusion



Thrombus Accumulation



ONE PASS CONFIGURATION



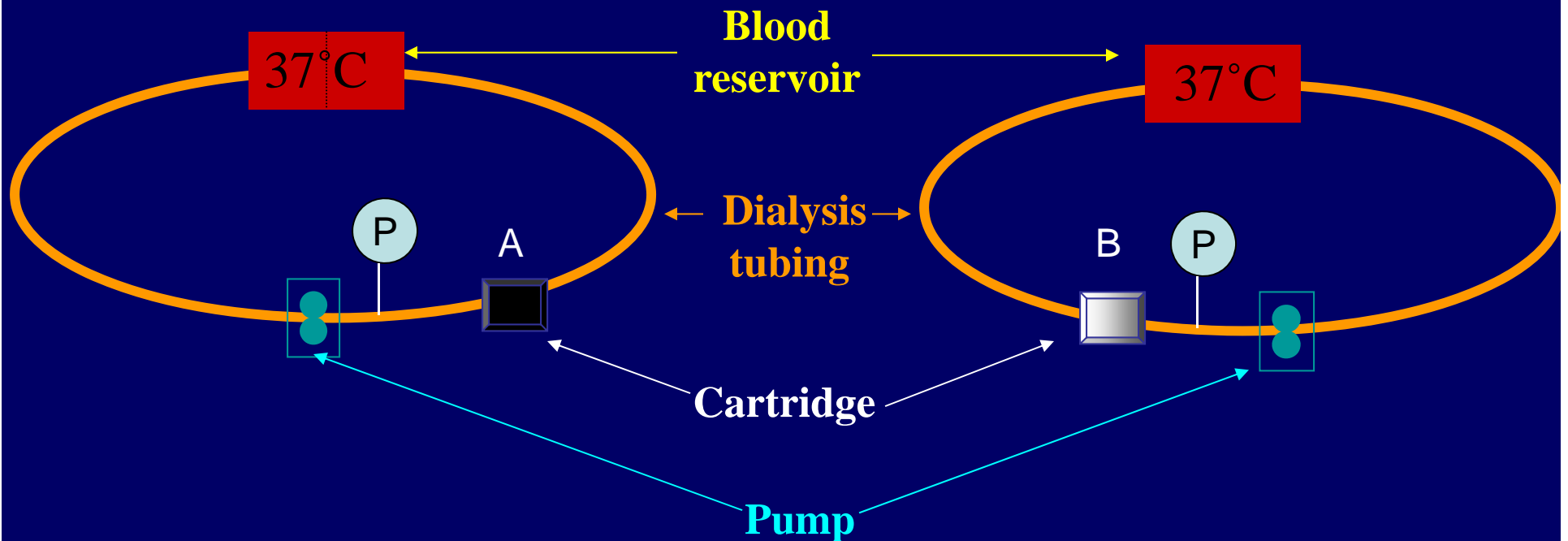
Useful for assessing thrombosis and embolism on small devices: Stents, distal embolic protection ...

Circumvents recirculation & recounting of released emboli

Less extraneous blood activation

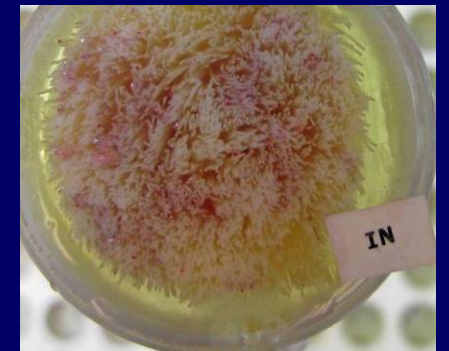
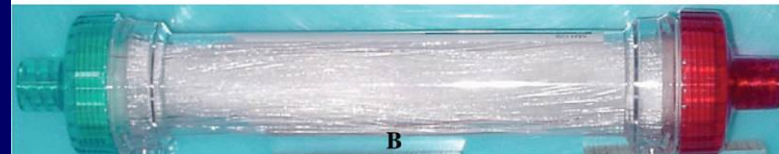
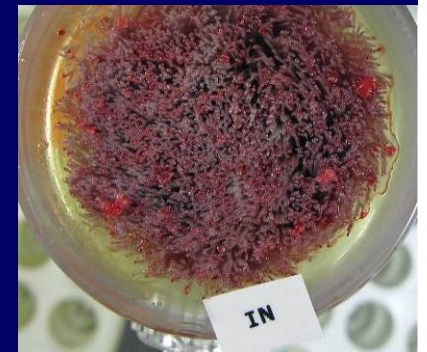
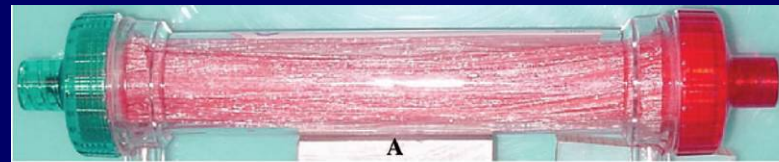
Limited range of flow rate, time, and number of simultaneous devices to be tested due to blood volume constraints

Hemodialysis Cartridge

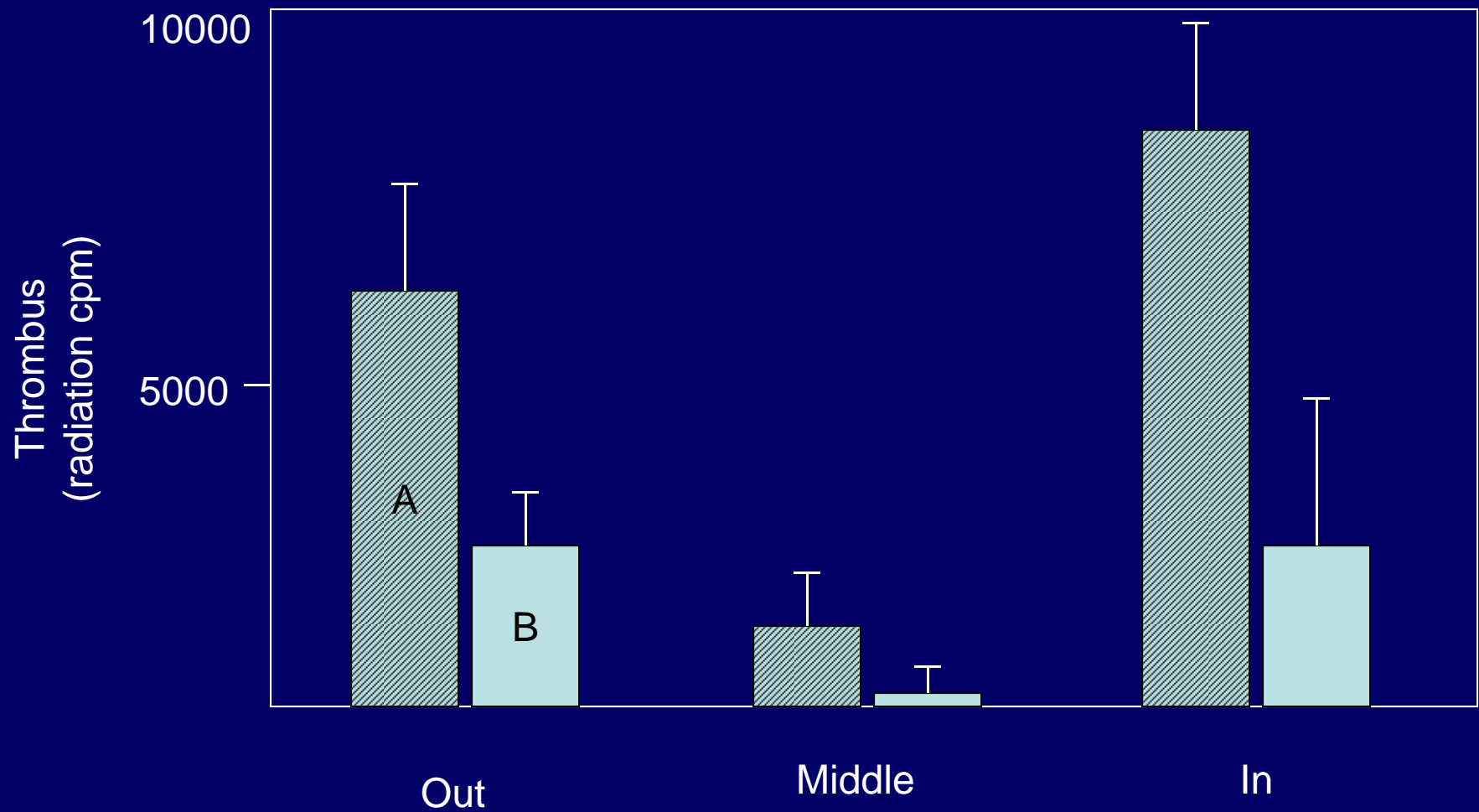


Flow rate: 300-400 ml/min
Heparin: 2-3 U/ml
 ^{111}In labeled platelets

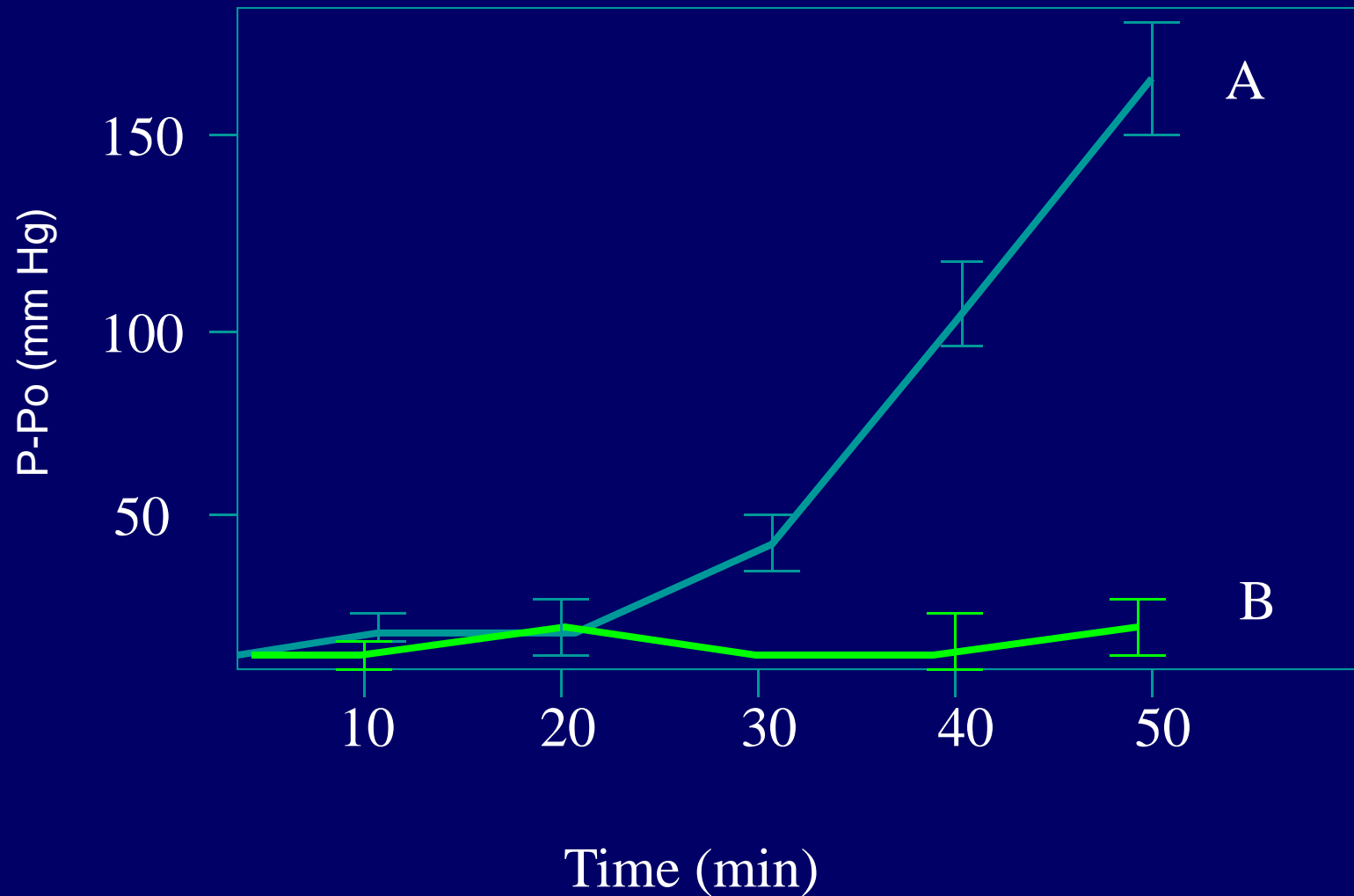
Hemodialysis Cartridge



Thrombus Accumulation

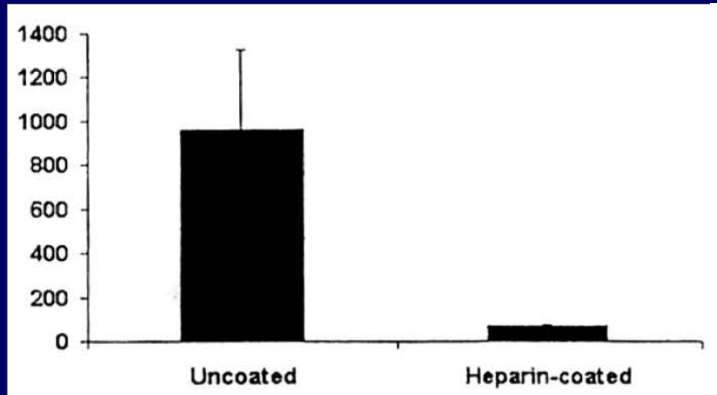


Thrombotic Occlusion



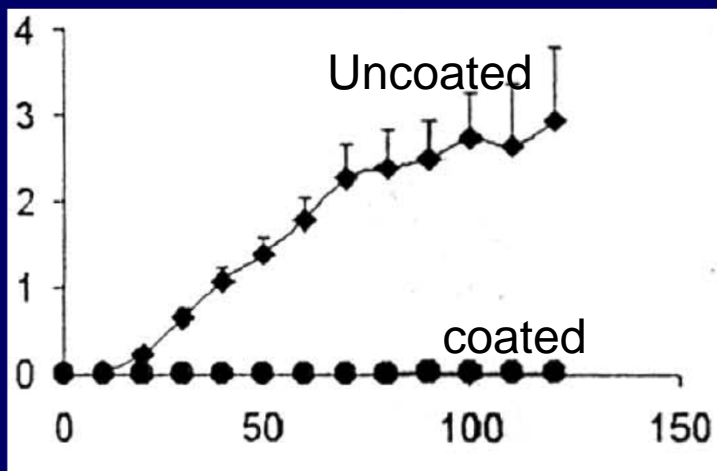
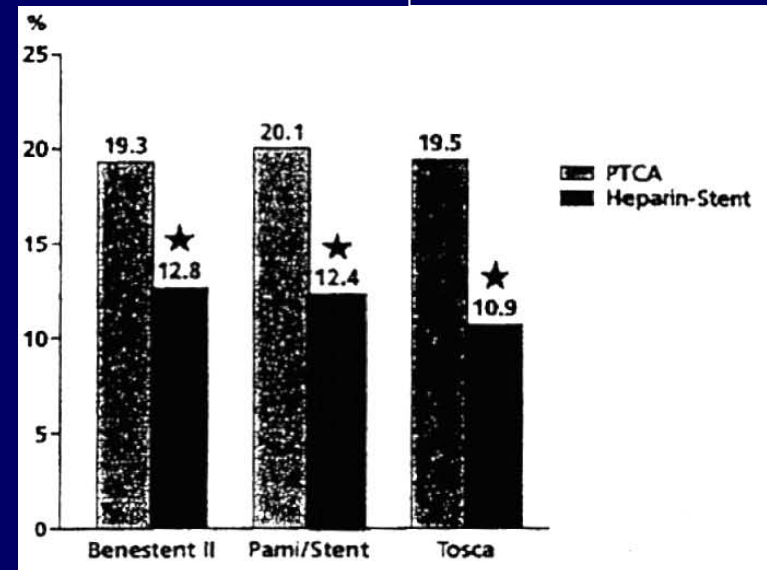
Relative Device Thrombosis Assessed In-vitro and In-vivo

Coronary Stents



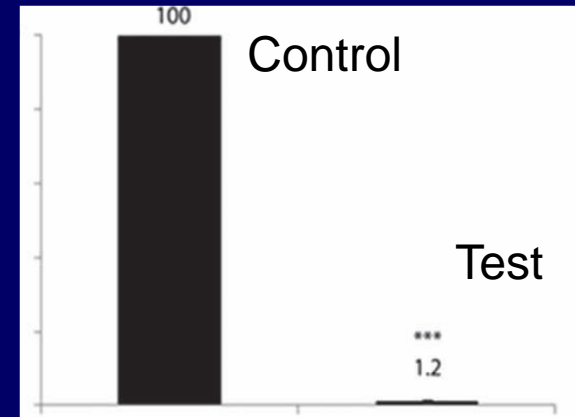
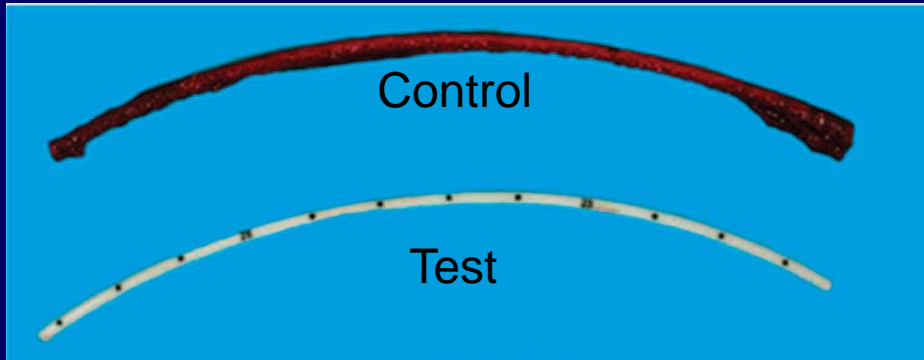
In-vitro flow model

Clinical studies

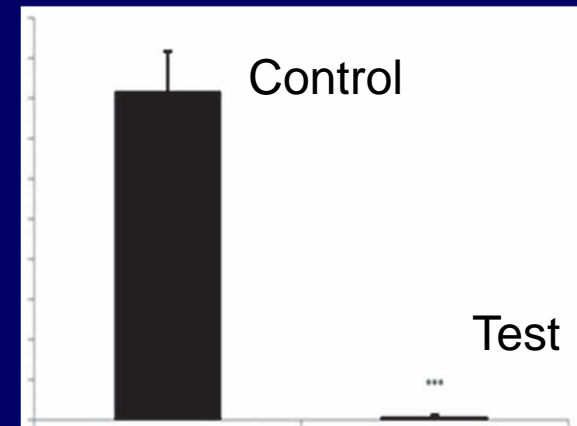
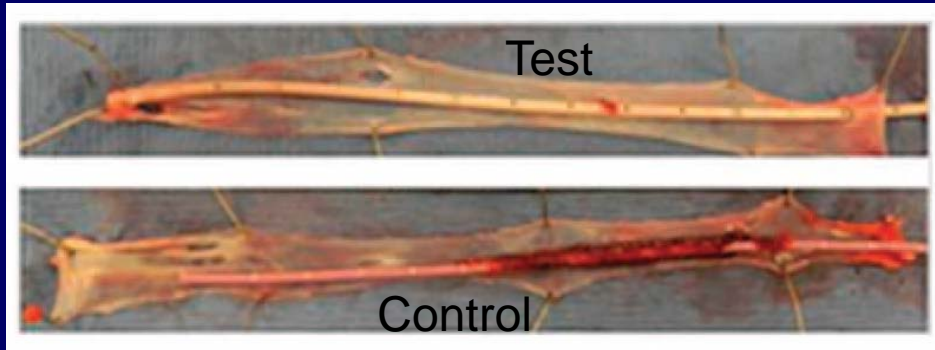


Baboon 2 hr ex-vivo shunt

Catheters (PICCs)

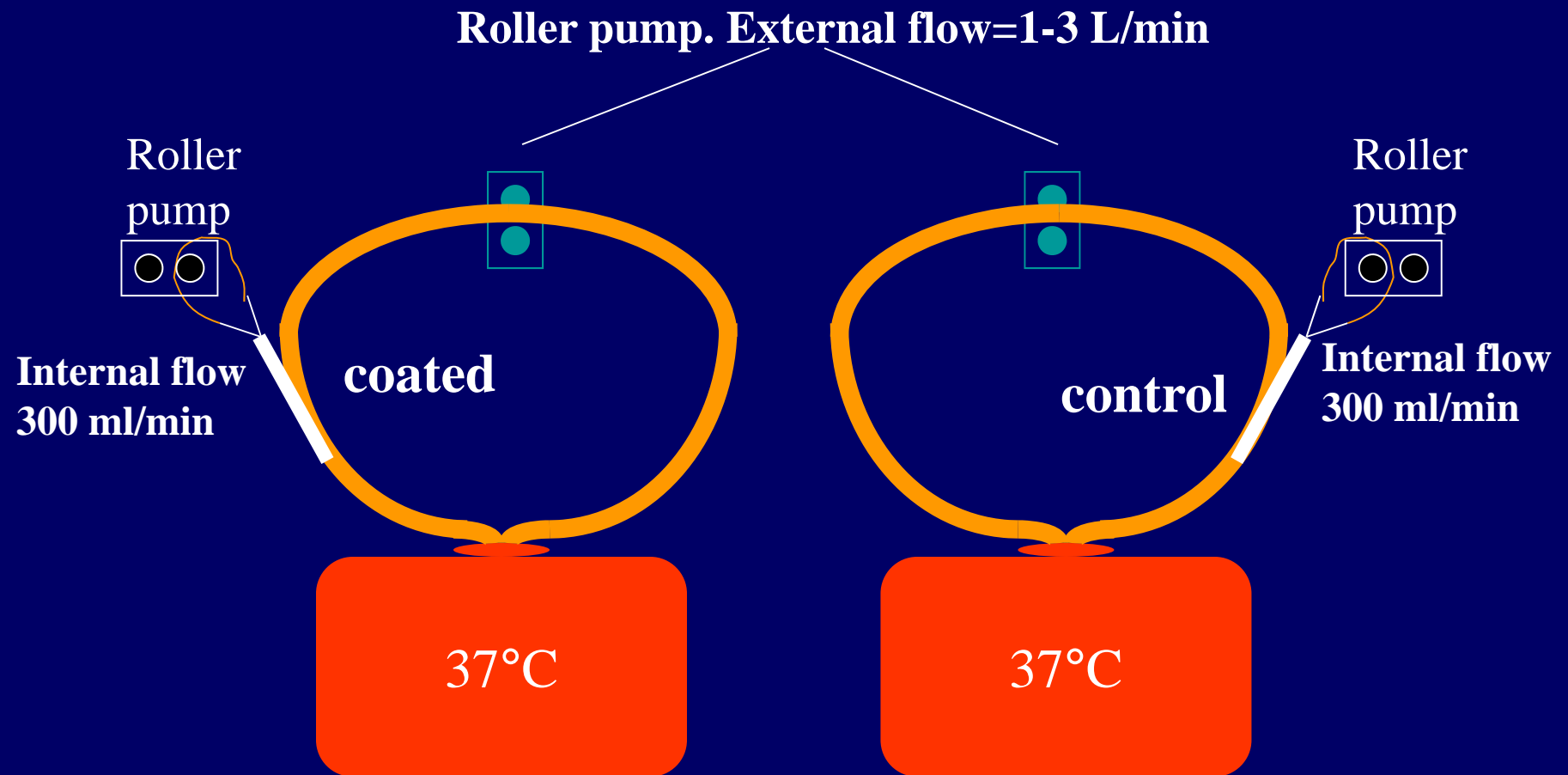


IN-VITRO FLOW MODEL

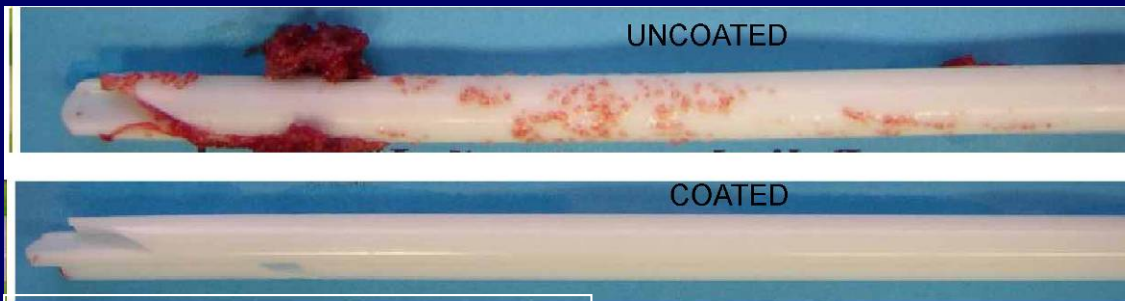


CANINE IN-VIVO JUGULAR IMPLANT (~4 hours)

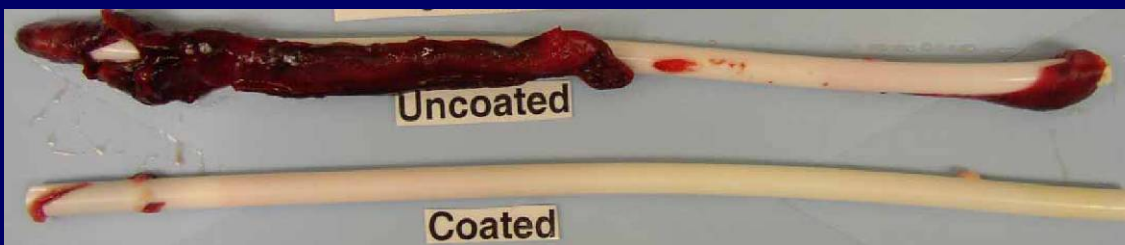
Hemodialysis Catheters



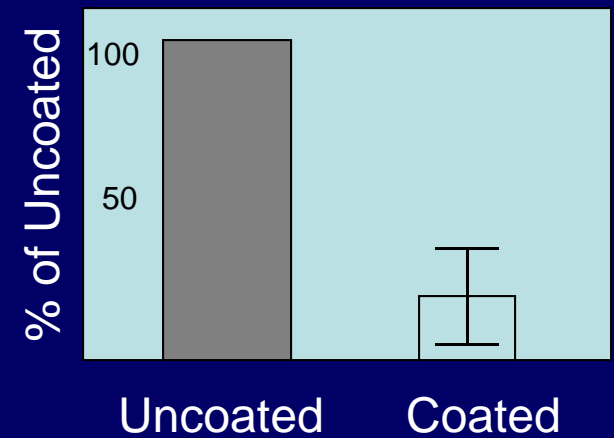
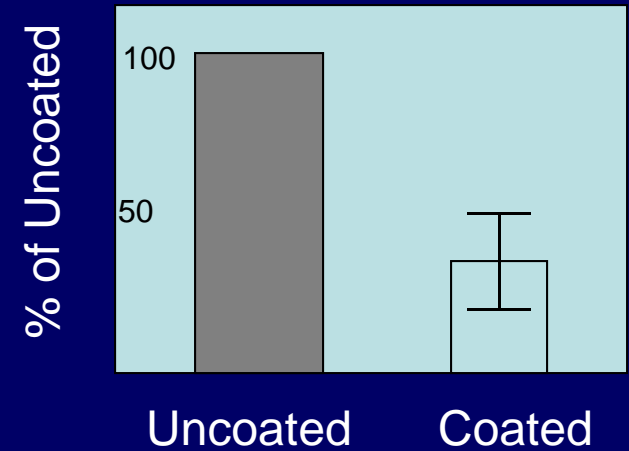
Hemodialysis Catheters



IN-VITRO FLOW MODEL



SHEEP IN-VIVO IMPLANT (up to 30 days)



In-vitro Blood Flow Models Summary

- Useful template for comparing device thrombosis under similar conditions
 - Relative Assessment
 - Universal/absolute acceptance criteria elusive
- Has Limitations
 - Long-term biological processes
 - Pre-conditioning?
- Model Configuration
 - Clinical conditions and in-vitro framework
 - Anticoagulation, flow conditions, time, objective