Preliminary trial to investigate the effect of myocardial maintenace of **AMETHYST BIOMAT** following Miocardial Infarct operation

Pilotstudie zur Untersuchung des Effekts von AMETHYST BIOMAT auf die Erhaltung des Herzmuskels nach einer Myokardinfarktoperation

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Research background

In Anatomy lecture 2 and Surgery lecture 2 of the department of surgery of Sapporo Medical School, cardiac regeneration was studied using Marrow stromal cells of the liver of rats.

It was thought that if the scaffold solution and the body temperature management is insufficient during the follow-up after surgery, the likelihood of death from acute cardiac failure or myocardial rupture is increased.

The aim and significance of this study

To date, the experiments were conducted using rat myocardial infarct (MI) models but because the subject animal was small, the accuracy of the MI model was unclear.

This means that cardiac disease progresses to cardiac failure in the end.

Therefore it was not confirmed whether the results of transplanting marrow stromal cells to the heart could be applied to the human bidy.

dainy marrow stromat cells to treat the undertying cause of cardiac disease for safe cardiac surgery and to review the likelihood

There is a need for a more accurate animal model of MI for experiments to investigate the mechanism of cardiac regeneration and promotion of treatment strategies.

The almand significance of this study



Cardiovascular disease 100



Concentrated Medical treatment 10



Application of surgical treatment 1

Study design -1

At the surgical department of Sapporo University Medicall School rats is the amethystolio mat provided by Richway plapan Cotwill be used fromin the stage of stromaticell transplant to regulate the bodye operation and températures of the subjects during the surgeryeeks post-op, the cardiac function will be checked using ultrasonography and the structure of the Following surgery, the results of the group who continue to luse studied. bio mat and those who do not continue to use bio met will be compared.

Corne almost this study will be Go determine up 2

whether there is a significant difference between these two groups (Surgical treatment) (Scaffold A)

10 rats with MI will have surgery on the biomat, and the other 10 rats will have surgery on normal surgical table.

10 rats with MI will have surgery on the biomat, and the other 10 rats will have surgery on normal surgical table.

Control group 3

transplant of stromal cells)

10 rats with MI will have surgery on the biomat, and the other 10 rats will have surgery on normal surgical table. A total of 60 rats were used for this experiment.

Outline of the experimental methods

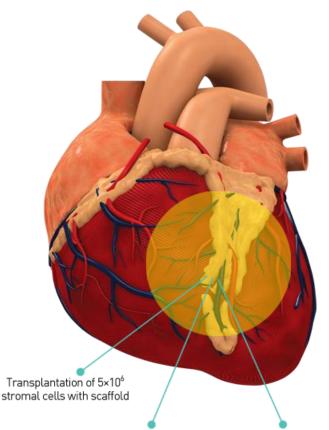
	RECIPIENT	Donor-MSC cell collection
Type of animal	Rat	Rat
Gender	Male	*
Breed	S-D	S-D

Transplant method

- Time of transplant: Immediately after MI
- Method of transplantation: The scaffolding solution (solution A) containing the stromal cells will be transplanted to the area of MI using 200^{µℓ} forceps and 100^{µℓ} of scaffold solution B will be injected.

Assessment

- Ultrasounds will be done before surgery, after surgery, and at days 7, 14, 21, 28 post-op.
- 4 weeks after the transplant autopsies will be done for histological studies (myocardial cells and the left ventricular wall in the area of the MI)

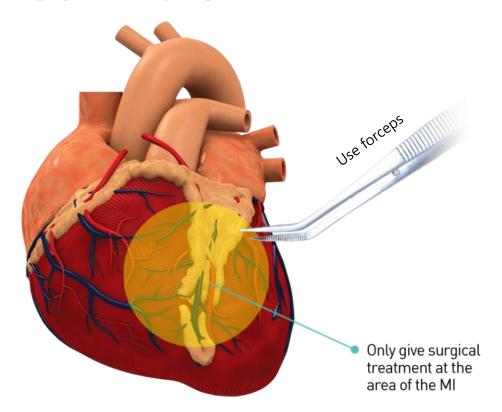


The survival analysis was done after 4 week The LAD artery was damaged to produce acute MI

Only surgical treatment - Group 1

>> Eneral surgical group

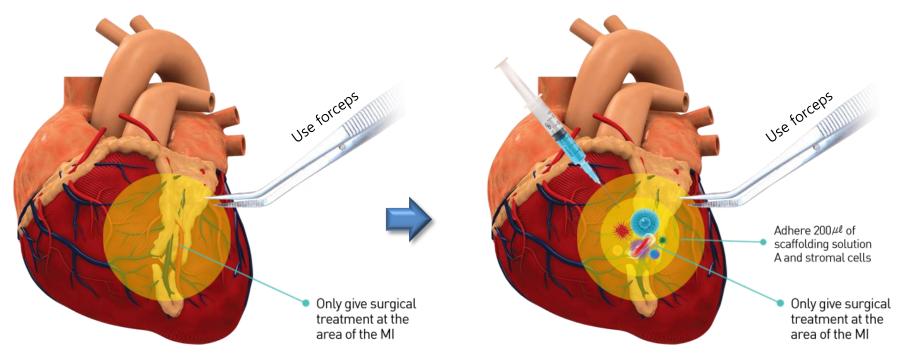
- Only surgical treatment was given without scaffolding at the area of the MI.
 - 10 rats with MI had the surgery on BIO MAT
 - 10 rats with MI had the surgery on ordinary surgical table



MSC cell transplantation – Group 2

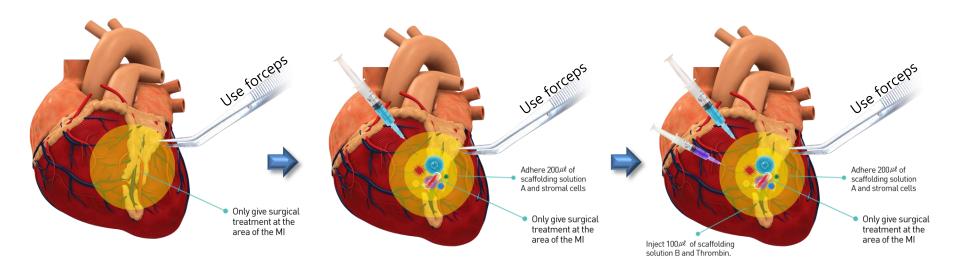
>> Group with scaffolding

- 200 $\mu\ell$ of the fibers of scaffold solution A and stromal cells were adhered to the area of Mi.
 - 10 rats with MI had the surgery on BIO MAT
 - 10 rats with MI had the surgery on ordinary surgical table



MSC cell transplantation method - Group 3

- >> Group with stromal cell transplant with scaffolding
 - Following the adherence of $200\mu\ell$ of stromal cells and scaffolding solution A, $100\mu\ell$ of scaffolding solution B was injected with 50,000,000 stromal cells
 - 10 rats with MI had the surgery on BIO MAT
 - 10 rats with MI had the surgery on ordinary surgical table

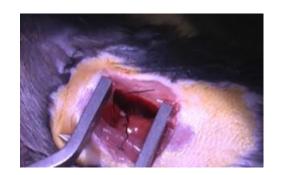


Experimental methods Rat MI model

Type of animal : Experimental Rat (S.D.: Sprague-Dawley)

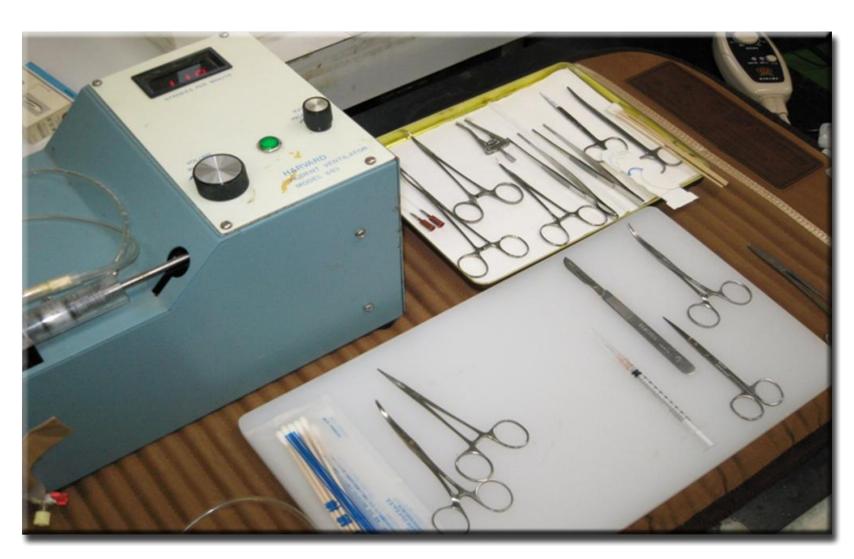
Surgical methods

- Pentobarbital Na is injected intra-abdominally.?
 Rat is shaved and disinfected, and fixed using tweezers.
- 3. Set up cardiac ultrasound to monitor the cardiac function
- 4. Insert tubes.
- For open thoracic surgery, place the oxygen mask and maintain oxygen supply.
- 6. Open the left thoracic cavity.
- 7. Under the microscope, open the pericardium and move the myo cardium into good visual field.
- 8. Close the left lower part using 4-0 thread.
- 9. Attach scaffold
- 10. Close the thoracic wall and suture the skin

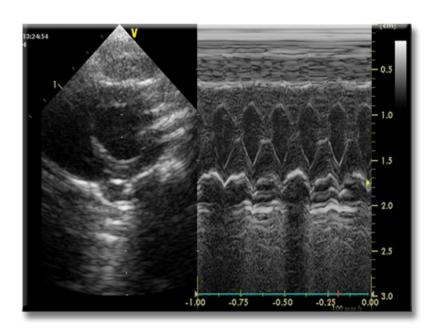


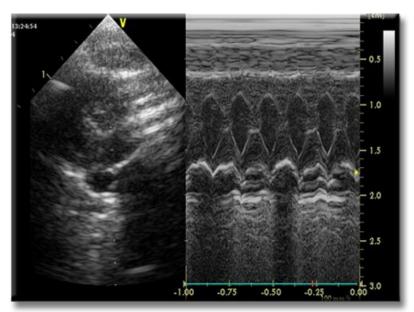
Preperation for surgery-1





Ultrasound to assess the cardiac function



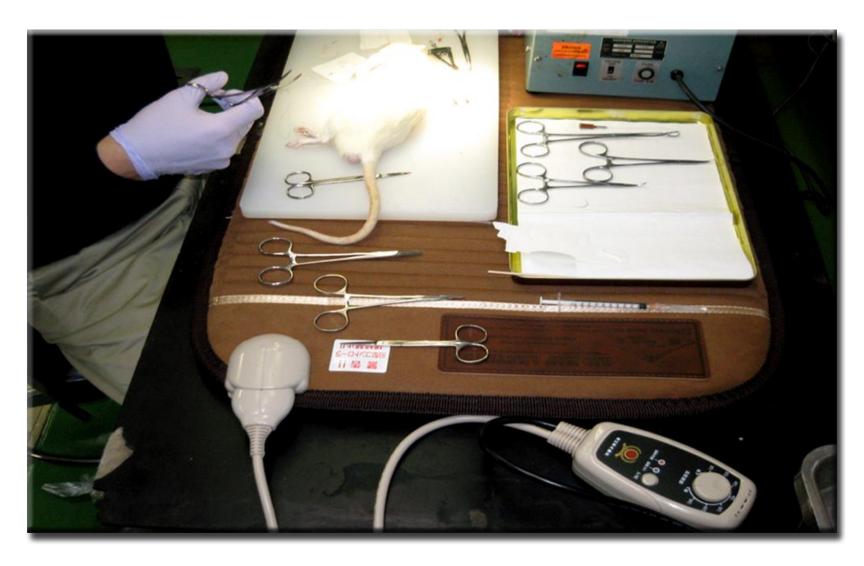


Diastole

Systole

Surgical procedure—2





Results (Survival rate after 4 weeks)

General surgical group		Group with seaffolding		scaffoldingsstromalcells	
on ordinary surgical table	surgery on BIO MAT	,		on ordinary surgical table	
survival 4	survival 10	survival 7	survival 9	survival 9	survival 10

- surgery on BIO MAT
- on ordinary surgical table





Discussion

- In the case of the MI rats which did not receive scaffold intervention, the death rate within 4 weeks after the surgery was 100% in the experiment to date.
- The remarkable feature in the surgical experiment performed on Biomat was that the survival rate after 4 weeks following the surgery was 100% even in the case of the MI rats which did not receive scaffold intervention.
- With these results, the far-infrared thermal effect of Biomat provided by Richway Japan Co. can be said to have a potential to delay or improve myocardial degeneration and fibrosis
- We sincerely hope the effect of the thermal effect of Biomat on cardiac surgery can be clearly demonstrated from further clinical trials based on this clinical result.

Acknowledgements

We would like to appreciate Higashi Takahiko, the chairman of Richway Japan Co., for providing 2 Biomat products to Anatomy lecture 2 and Surgery lecture 2 of Department of Surgery of Sapporo Medical School.

In this clinical experiment, the medical effectiveness of the management of body temperature by physical energy during the surgery or during the recovery period post surgery was proven. I wish your product becomes widespread and be applied in many fields in the future.

Dr Suganuma

