

Decellularization of peripheral nerve tissue with preservation of extracellular matrix using non-thermal irreversible electroporation

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Introduction:

Non-thermal irreversible electroporation (NTIRE) is a new minimally invasive surgical technique that was originally conceived from theoretical considerations with the capability of selectively targeting cell membranes to treat biological tissues. Short, microsecond electrical pulses are applied to the tissue, selectively targeting the cell membrane, causing pores to form : within the membrane and leading to cell death.

Energy barrier of pore formation in presence and absence of external electrical field in electroporation



Remyelination of the nerve after IRE



Material and Methods:

Irreversible electroporation (IRE) of femoral neurovascular bundles was performed. Also, electrophysiological, histological, and functional studies were performed. A sequence of pulses was applied directly to peripheral nerves.

Results and discussion:

After IRE, peripheral nerve function was damaged before four weeks, but then gradually returned to normal. Perineural inflammatory cell infiltration was most severe three days after IRE (80–85%), and was normalized after eight weeks. Surrounding tissue injury was prominent at three days and one week after IRE (80-90%), and then gradually recovered. However, peripheral nerve fibers were markedly damaged at one and two weeks (80–100%). Nerve fibers then recovered and were normalized at eight weeks.

An increase in the transmembrane potential results in a decrease in the energy barrier for hydrophilic pore formation. Here, this is illustrated for the case when there is no applied transmembrane potential (U = 0) and for an elevated transmembrane potential case (U > 0).In addition, it is shown converting hydrophobic pores to hydrophilic ones.

Effect of electric field and pulse duration on cell response during electroporation.





(a-c, g-i) Toluidine blue staining. Light micrographs of transverse semi-thin sections at the injury sites of IRE at 3 days, 1 week, 3, 5, 7 and 10 weeks after injury. (d-f, j-l) Transmission electron micrographs(TEMs). Ultra-thin sections at the injury sites of IRE at 3 days, 1 week, 3, 5, 7 and 10 weeks after injury were observed under TEM.





Conclusion:

transient injury Nerve tissue with functional impairment can occur after IRE. However, endoneurial and epineurial extracellular matrix were preserved with Schwann cell regeneration, which could lead to regeneration of nerve tissues within eight weeks. Therefore, we focused on the vivo application of irreversible **1n** electroporation for biomedical purposes which is tissue decellularization.

Keywords:

Electroporation, Tissue decellularization, Non-thermal irreversible electroporation, Peripheral nerve tissue electroporation

- Effect of local electric field can be seen in 4 different ways:
- 1. No effect: weak electric field
- Reversible electroporation
- Irreversible electroporation
- 4thermal damage

All above-mentioned processes depends on magnitude of the electric field.

Functional evaluation of rabbit legs after IRE



It is much more better to use SHV first and then LLV

2. Using asymmetric polar pulses



This pulses result in more ablation zones and less powerful electric field is needed

Key points:

Overall, non-thermal irreversible electroporation can be used for tissue decellularization to preserve the extracellular matrix for growing new cells. As a new method, this preserved natural extracellular matrix would be used in some special situation which the peripheral nerve of a person has been damaged. However, this method has been used for cancer treatment previously.

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