

Amniocyte-derived Patch for Repair of Congenital Heart Defects

Product

Patch for neonatal heart repair

Indication

Treatment for neonatal congenital heart defects

Value Propositions

- Customizable for each patient
- Biocompatible and biodegradable
- Promotes tissue remodeling

Market

► Congenital heart defects

Intellectual Property

 PCT stage: Published Polyurethane-reinforced hydrogel cardiac patch wc202103052141

Key Documents

- Full-thickness heart repair with an engineered multilayered myocardial patch in rat model unit
- In situ vascularization of injectable fibrin/poly hydrogels by human amniotic fluid-derived stem cells Link
- Amniotic fluid-derived stem cells demonstrated cardiogenic potential in indirect co-culture with human cardiac cells Link
- Capillary-link network formation by human amniotic fluid-derived stem cells within fibrin/poly hydrogels toos

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Challenge with Current Treatment for CHD

Congenital heart defects (CHD) are the most common type of birth defect and are considered a leading cause of birth defect-associated infant illness and death. About 40,000 babies are affected each year in the US (source: CDC). When treating patients with CHD, surgical repairs often require patches. Currently, polymers are the most common patch materials used in CHD repairs. However, these materials do not grow with the patient and may require further surgeries to replace the patch. Additionally, they have mismatched mechanical properties and a lack of contractility which can contribute to complications (heart failure, arrhythmia, and aneurysm). An ideal patch would be made of materials that are biocompatible, biodegradable and contain cardiac cells with contractility and conductivity similar to native cardiac tissue.

Poly Hydrogel Cardiac Patch

A University of Colorado research group led by Dr. Jeffrey Jacot has developed a new cardiac patch to treat CHDs. The multilayer patch has biodegradable engineered scaffolds and promotes tissue remodeling. Compared to current patches that are biologically inert, the present patch has a polyurethane core surrounded by a prevascularized structure that can attach to the host. Endothelial cells and mesenchymal stem cells derived from the amniotic fluid surrounding a fetus diagnosed with CHD are used to create the patch. In vitro and in vivo studies in rats have been completed and demonstrate that the patch is capable of full thickness defect repair and regeneration (Figure 1).

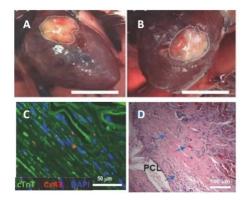


Figure 1. Engineered Multilayered Myocardial Patch in Rat Model. (A) All patches were incorporated into the native tissue 4 weeks after surgery. (B) At 8 weeks post-surgery, most of the scar fibers on the right ventricle disappeared and vascular tissue were formed. (C) Muscular tissue formed and aligned around the core with positive staining for cardiac troponin T and Connexin 43. (D) No calcification was visible on patched area.