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Progress Towards An Implantable Artificial Kidney

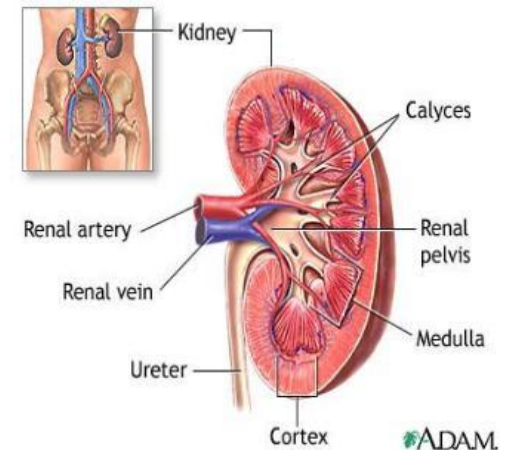
MEPTEC 9th Annual MEMS Symposium

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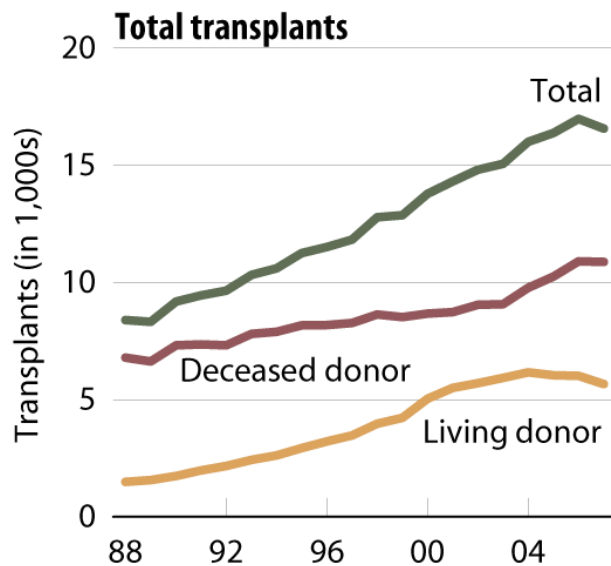
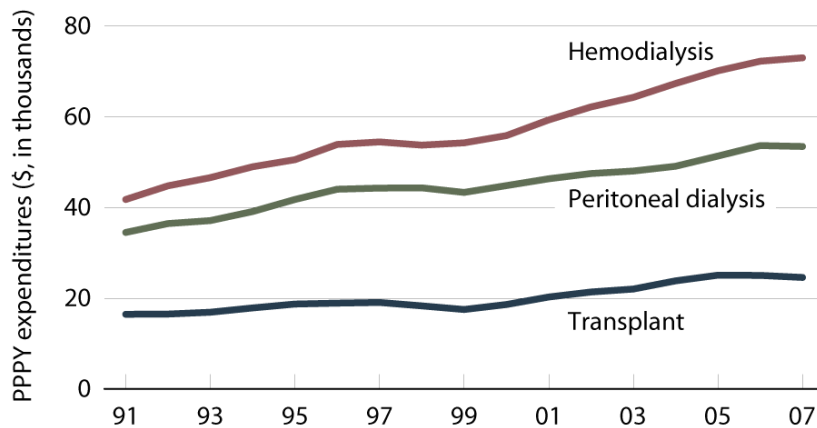
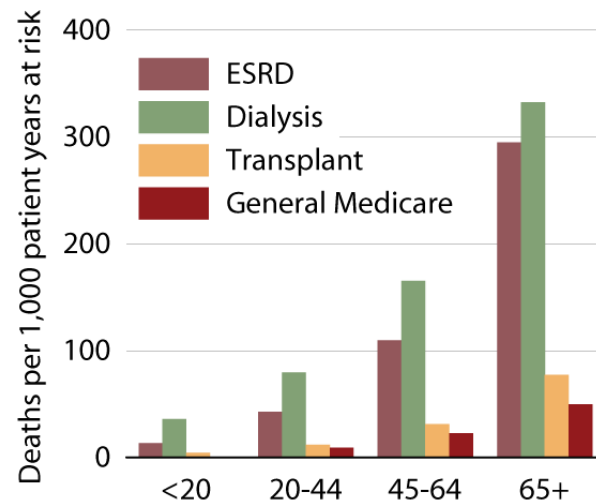
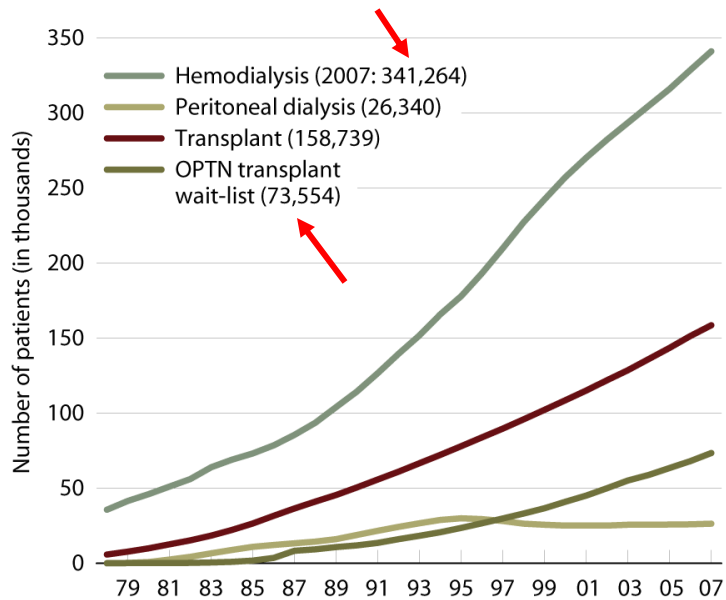
May 19, 2011

Background on Kidney Disease

- **Key functions of kidneys**
 - removal of wastes
 - regulate electrolytes
 - maintain acid-base balance
 - regulate blood pressure
 - secrete hormones
- **Chronic kidney disease (CKD)**
 - slow, progressive loss of function
 - affects over 25 million Americans
 - graded in stages: Stage I, II, III, IV, V
 - Stage V is end stage renal disease (ESRD)
 - kidney failure



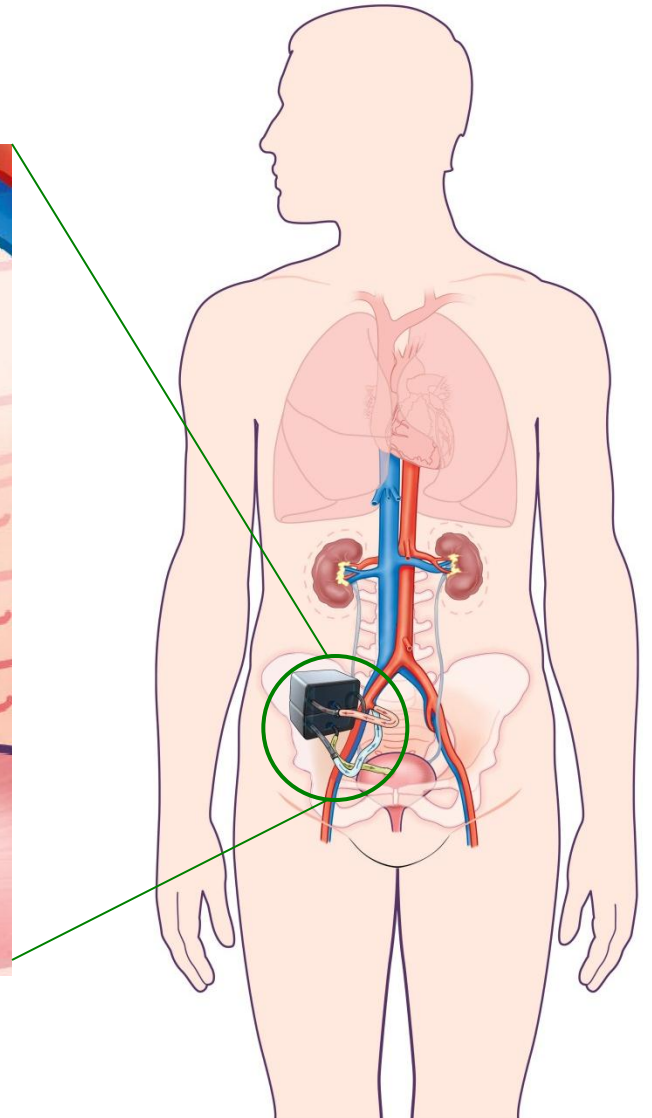
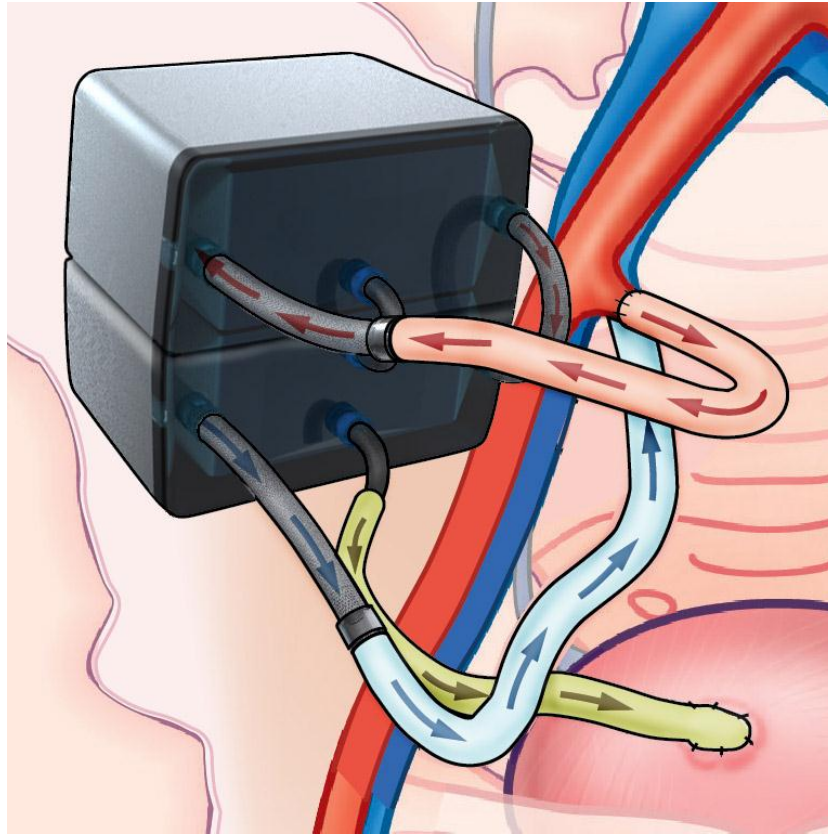
USRDS 2009 ESRD Statistics



Biomimetic Device

- **Dialysate-free**
 - convective filtration
 - selective reabsorption
- **2 primary components**
 - hemofilter
 - toxin clearance
 - cell bioreactor
 - volume homeostasis
 - metabolic function
 - electrolyte balance

Implantable Bioartificial Kidney

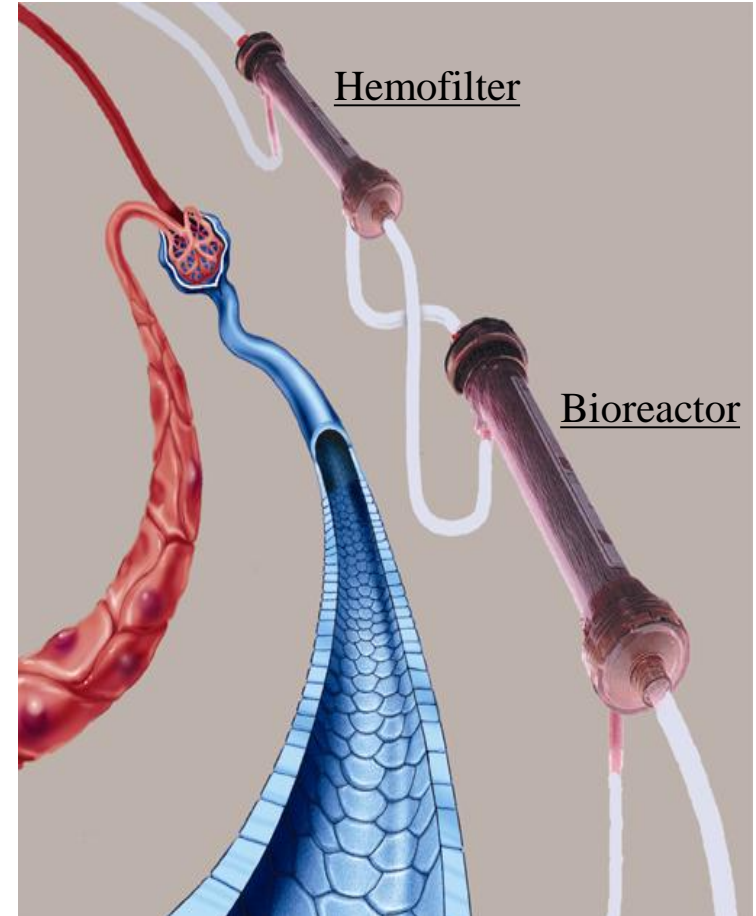


Device Benefits

- **Continuous treatment**
 - 24/7 operation eliminates build-up of toxins as happens now between sessions in standard dialysis
- **Freedom of mobility**
 - implanted device eliminates tethering to dialysis equipment
- **Decreased infection risk**
 - permanent vascular connection eliminates key entry path for pathogens
- **More physiological therapy**
 - bioreactor cells impart biological function that dialysis simply cannot
- **No need for anti-rejection drugs**
 - bioreactor cells are protected from patient's immune system

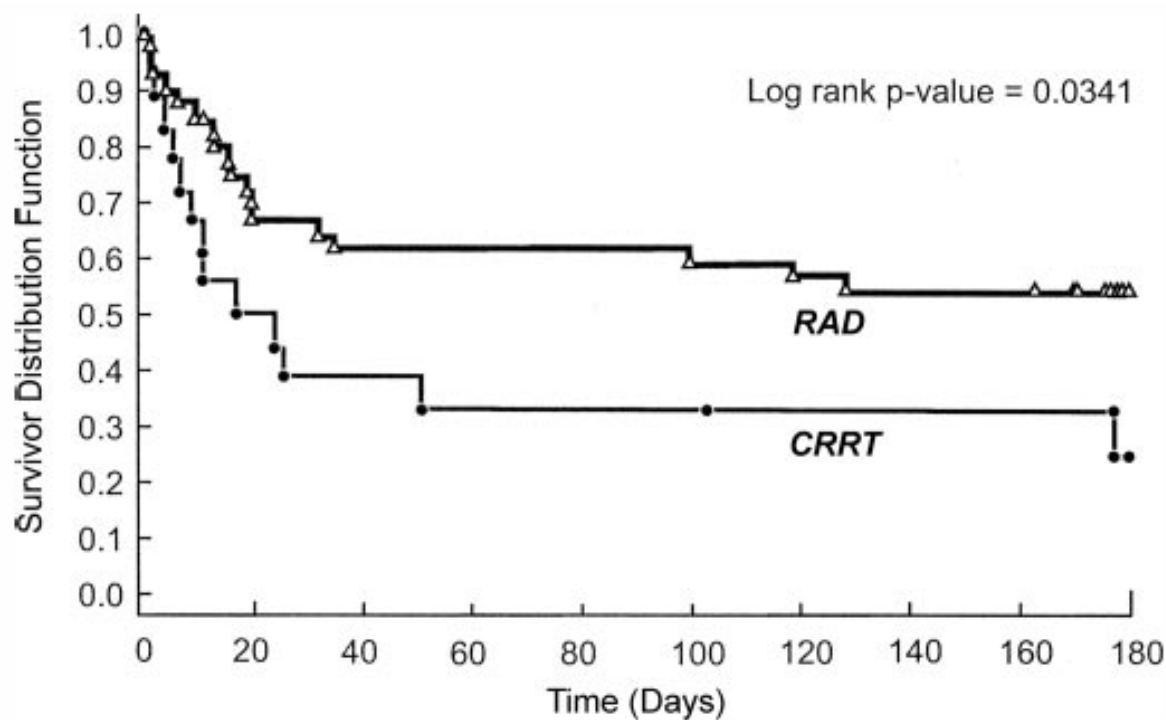
Renal Assist Device (RAD)

- **Extracorporeal circuit**
 - recapitulates nephron function
 - hollow fiber construct
 - commercial dialyzers
 - tissue engineered kidney
 - filtration + cell therapy
 - toxin removal
 - metabolic function
 - acute renal failure patients



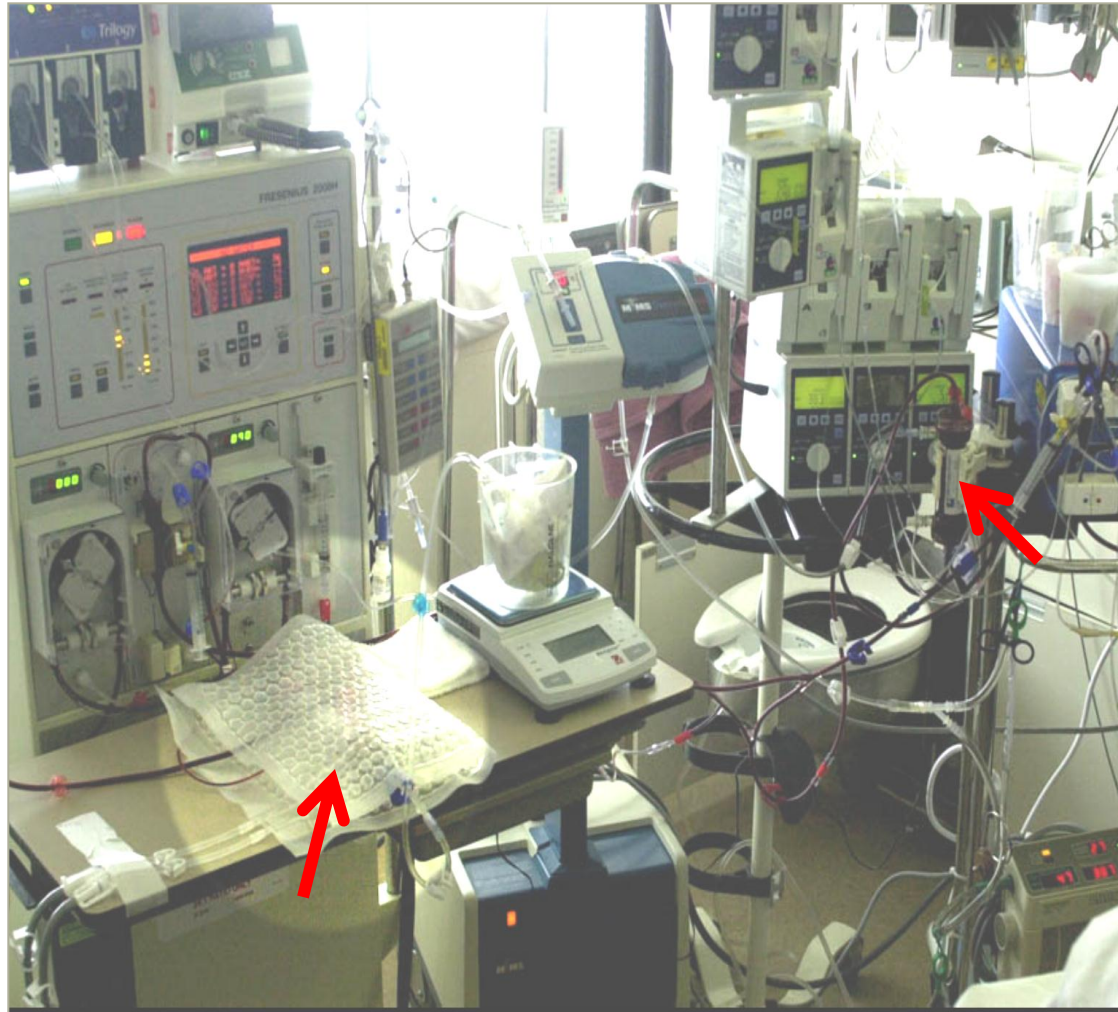
Clinical Testing Results

- Phase II, multicenter, randomized trial with 58 patients in the ICU
 - 50% reduction in mortality for patients treated with the RAD versus conventional therapy



Tumlin J et al. Efficacy and Safety of Renal Tubule Cell Therapy for Acute Renal Failure. JASN 2008 19: 923

RAD Implementation

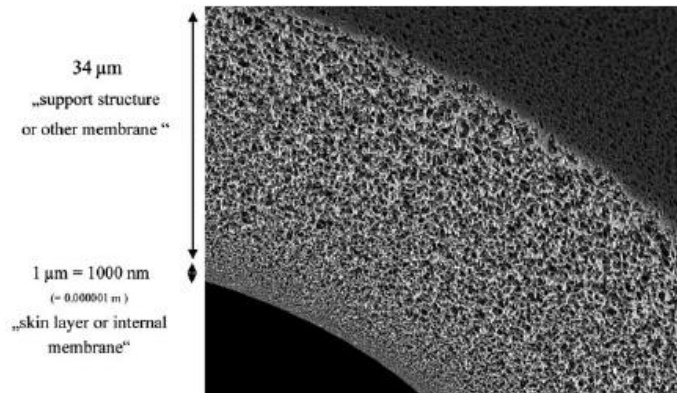


University of Michigan
Medical School

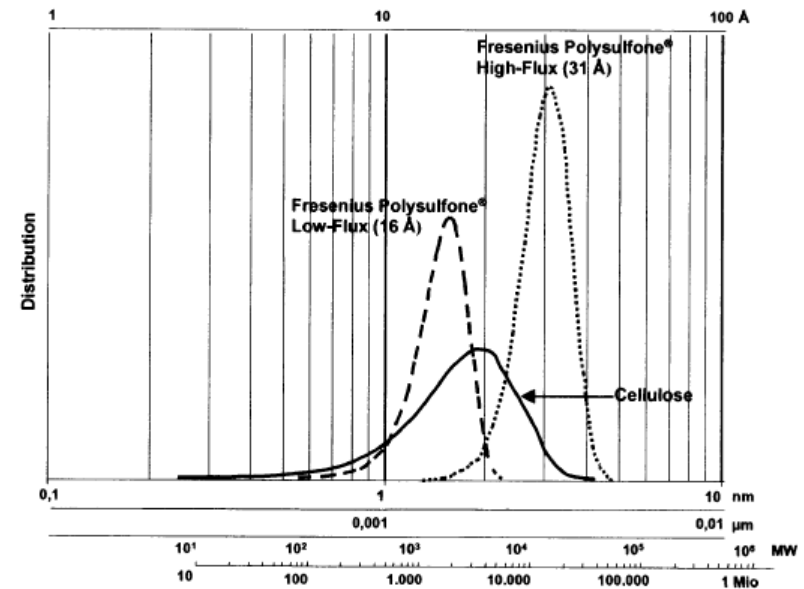
Fundamental Barrier to Miniaturization

- **Polymer membrane technology**
 - low hydraulic permeability
 - polydisperse pore size distribution
 - biodegradation

SEM – Polymer Membrane



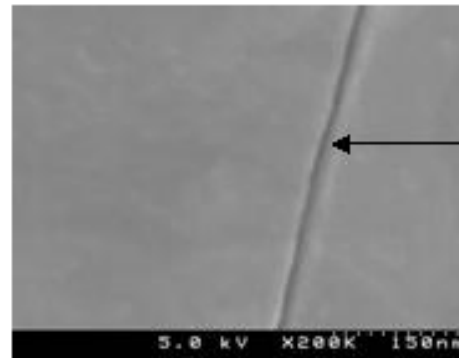
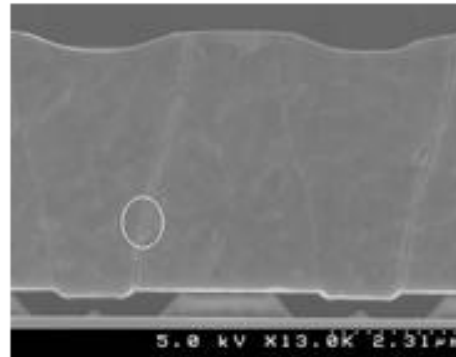
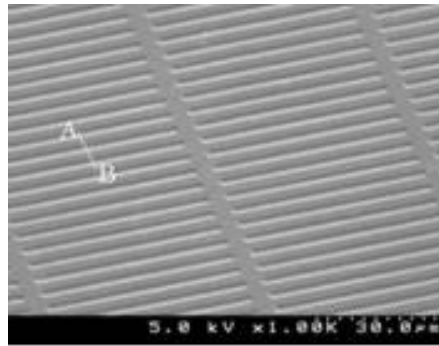
Size Distribution Effects



Silicon Nanopore Membranes (SNM)

- Monodisperse pore size distribution
- Chemical and mechanical stability

SEM – Silicon Membranes

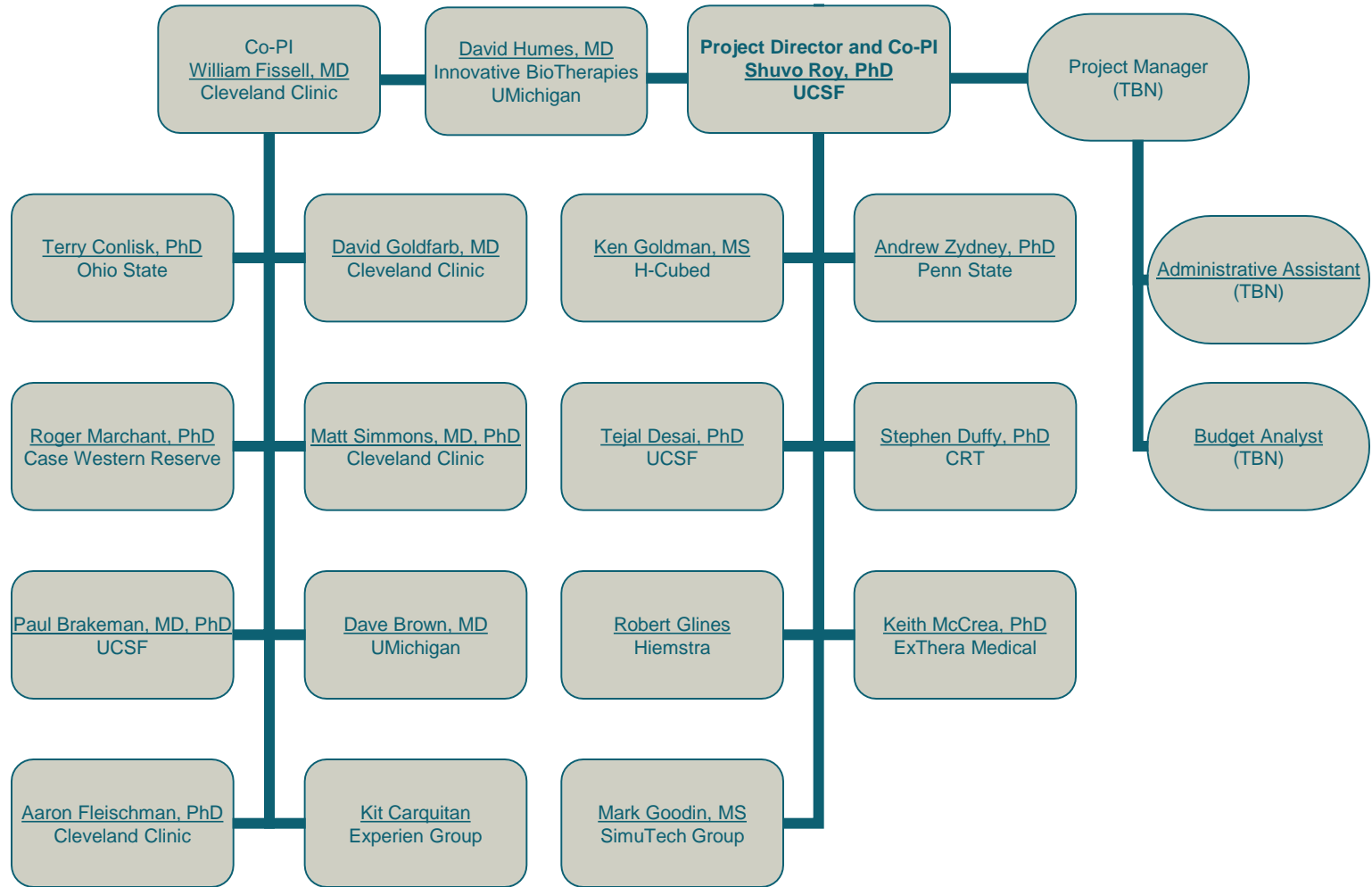


← 9 nm Pore
(x 200K)

Kidney Project Team



Advisors
 Scientific and Medical
 Commercial and Regulatory



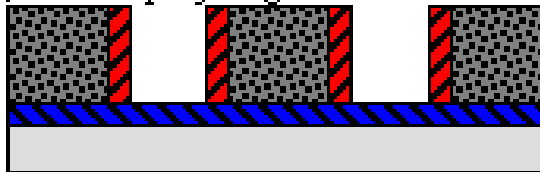
Development Strategy

- **Miniaturize RAD into implantable device by leveraging *nanotechnology* for hemofilter fabrication and scaffold design**
 - silicon nanopore membranes allow precise control of pore architecture
 - human kidney cells reabsorb salt and water while blocking back leak of uremic toxins
 - cells provide metabolic, endocrine, and immunologic functions

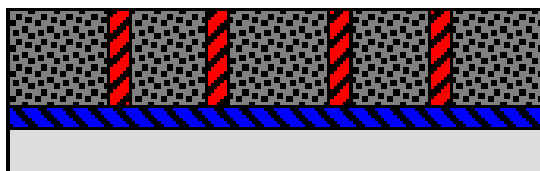
Membrane Fabrication

- **Novel process for reproducible fabrication of silicon membranes**
 - pore sizes: 5-15 nm
 - pore size variation: 1%

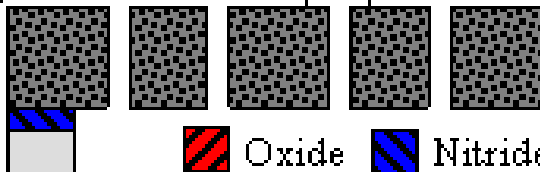
(a) Pattern poly & grow thin oxide



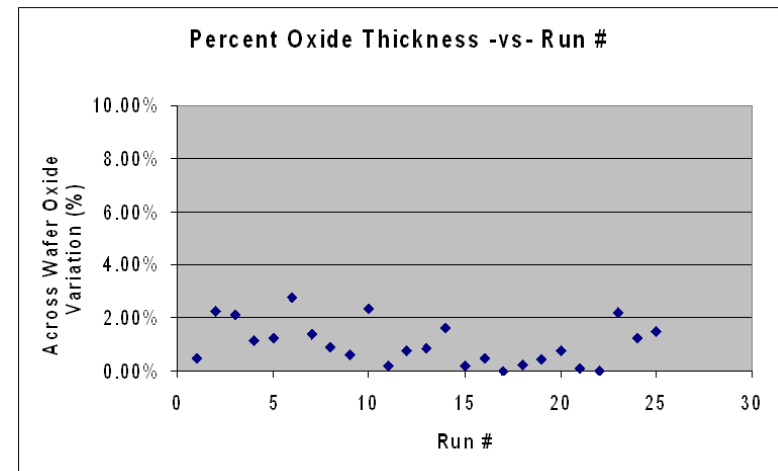
(b) Deposit 2nd poly layer & planarize



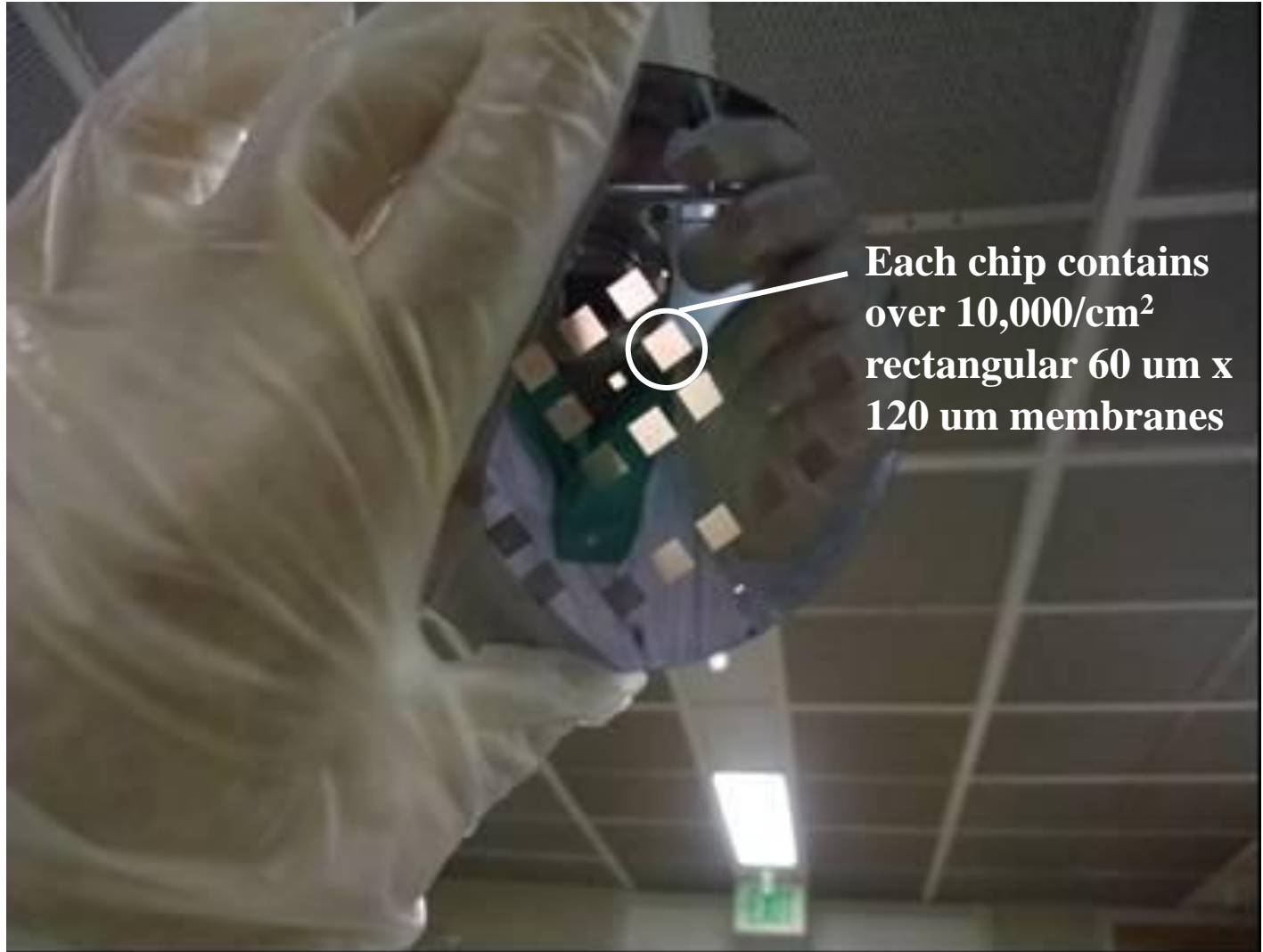
(c) Etch windows & open pores



Substrate Oxide Nitride
Polysilicon

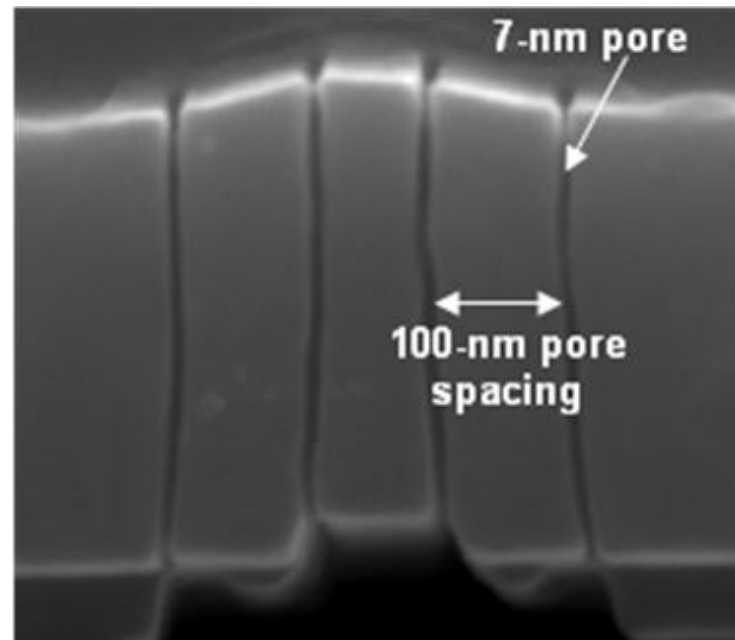
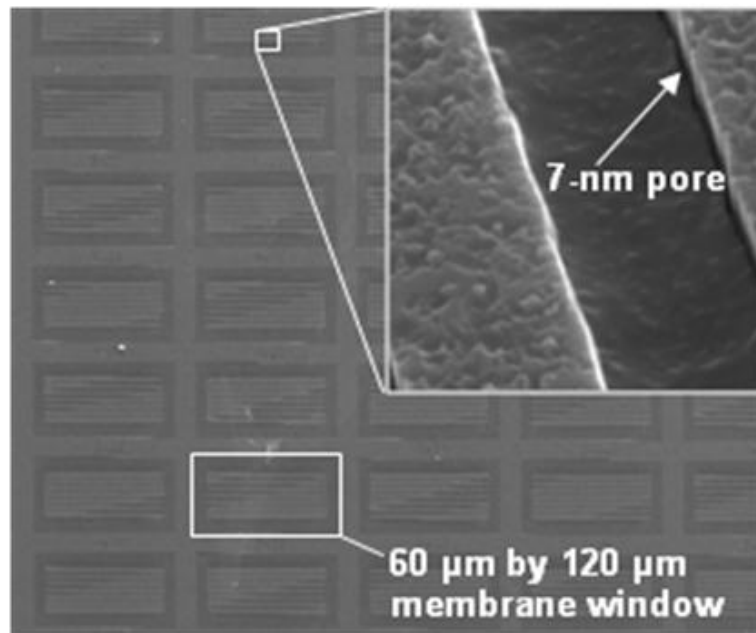


Completed Wafer

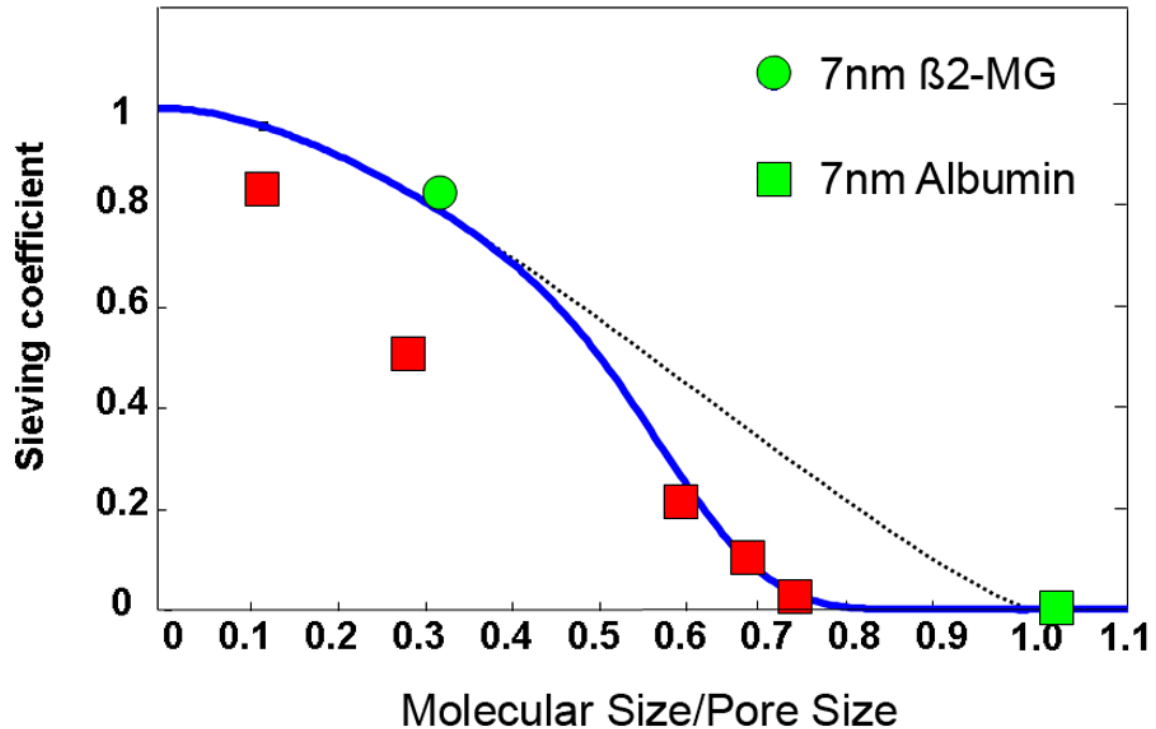


2nd Generation Membranes

- **High hydraulic permeability**
 - up to 600 ml/hr/mmHg/m²
 - no pump needed
- **Manufacturing compatibility**
 - scalable for larger quantities



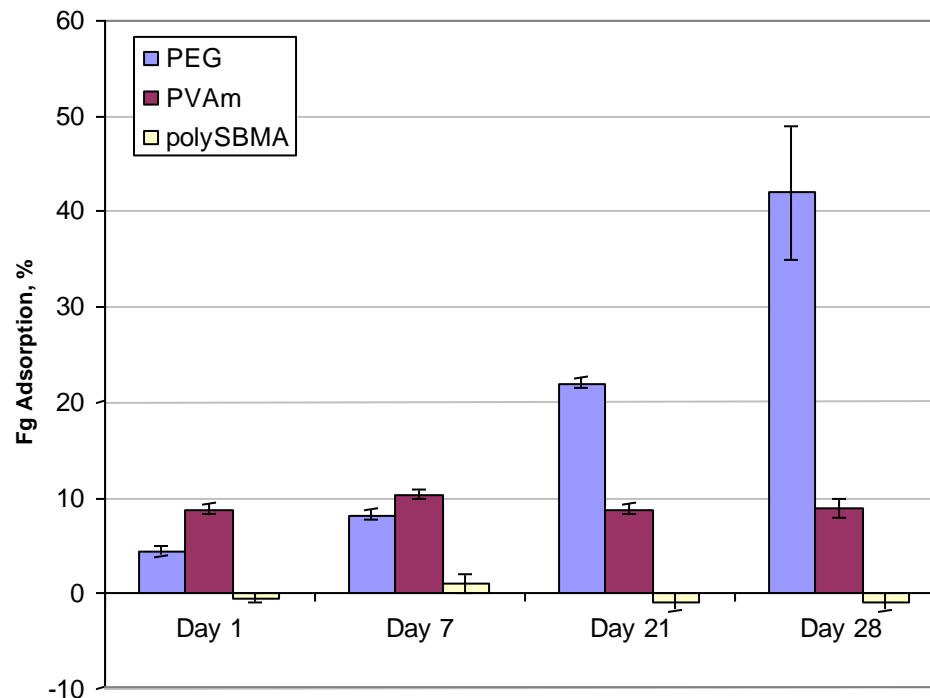
Membrane Filtration - Data



- **Selectivity for 7 nm pores**
 - albumin: <0.1%
 - beta2-microglobulin: >80%

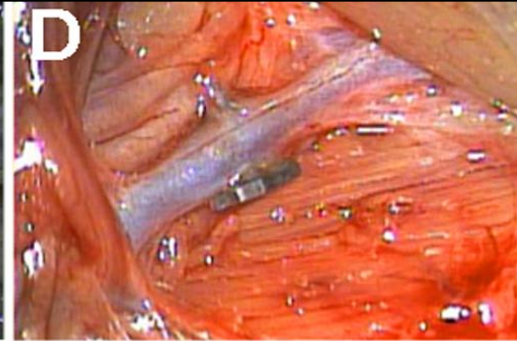
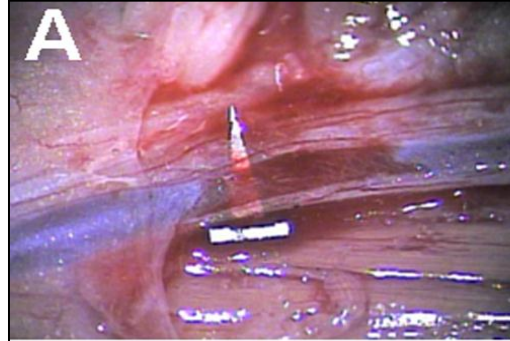
Anti-Biofouling Coatings

- **Evaluation of 3 coatings for protein resistance**
 - polyethylene glycol (PEG) is widely used
 - poly(N-vinylidextran aldonamide-co-N-vinylhexanamide) (PVAm)
 - synthetic glycocalyx
 - polysulfobetaine methacrylate (polySBMA)
 - zwitterionic polymer



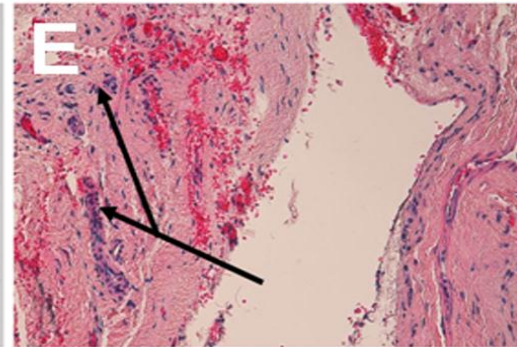
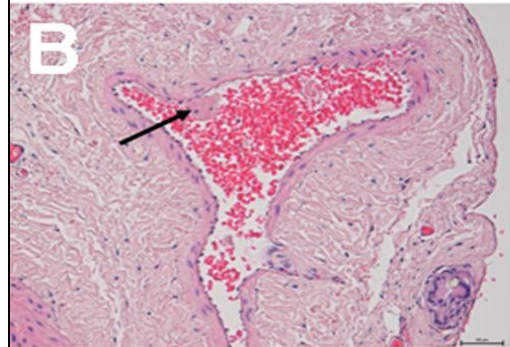
In Vivo Biocompatibility – 30 Days (Rat)

implant



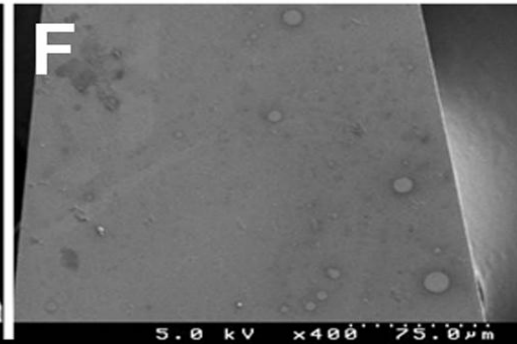
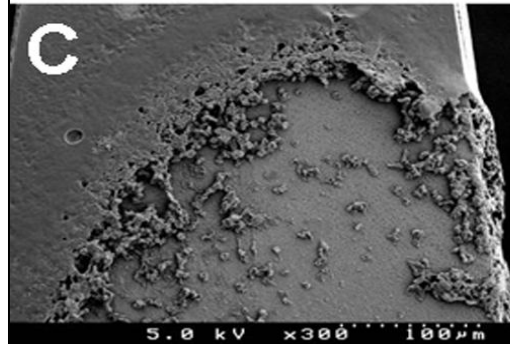
explant

bare Si



PEG/Si

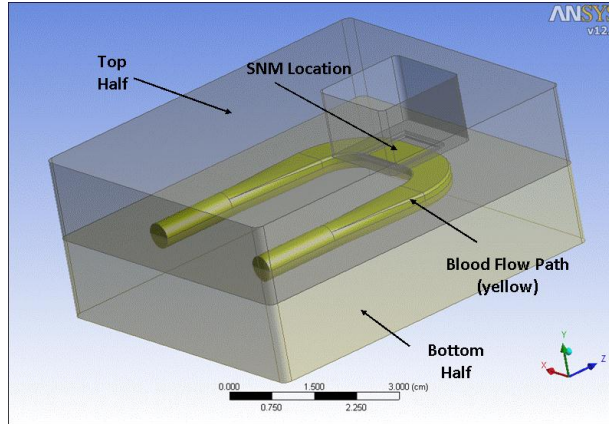
bare Si



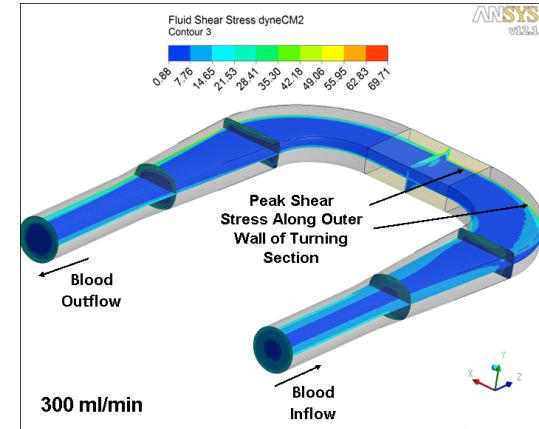
PEG/Si

In Vivo Filtration

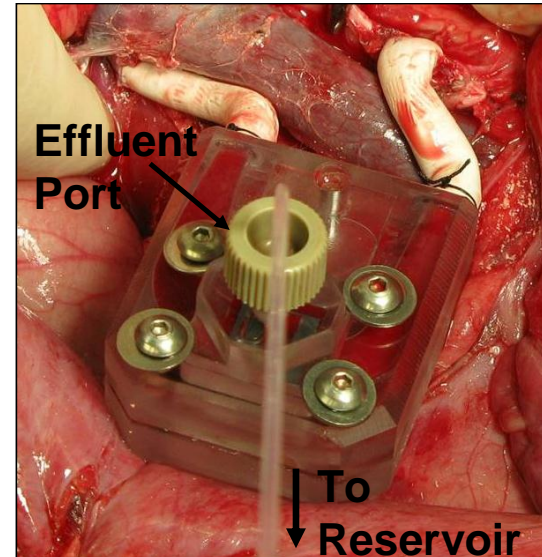
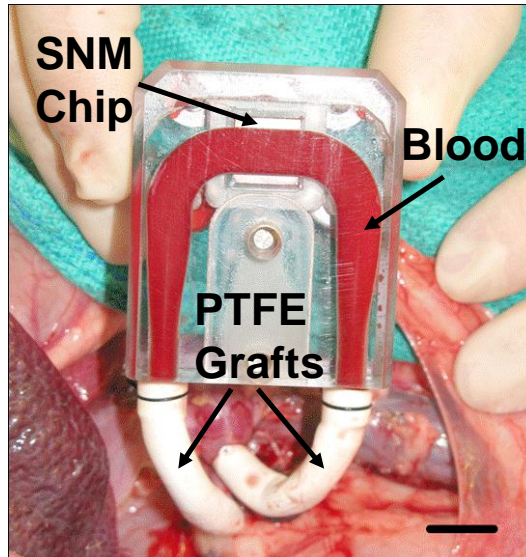
Hemofilter Cartridge Design



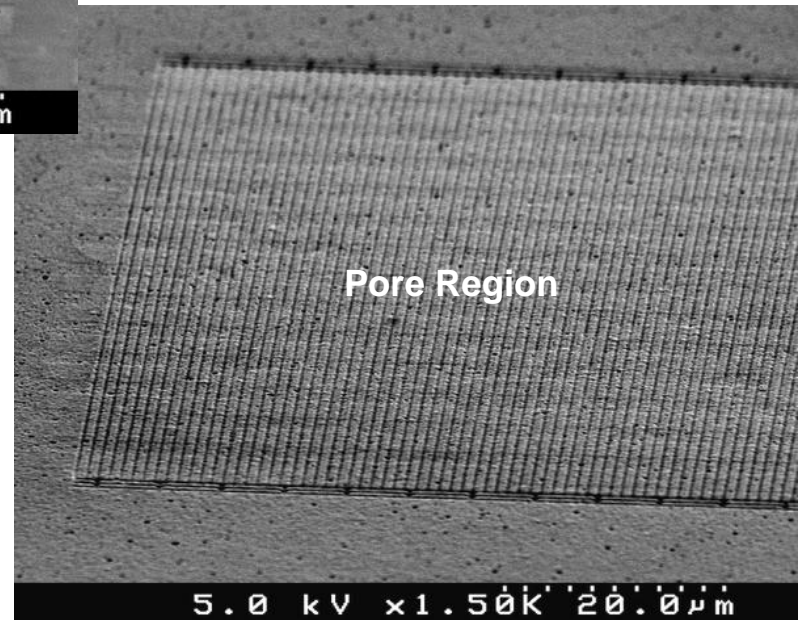
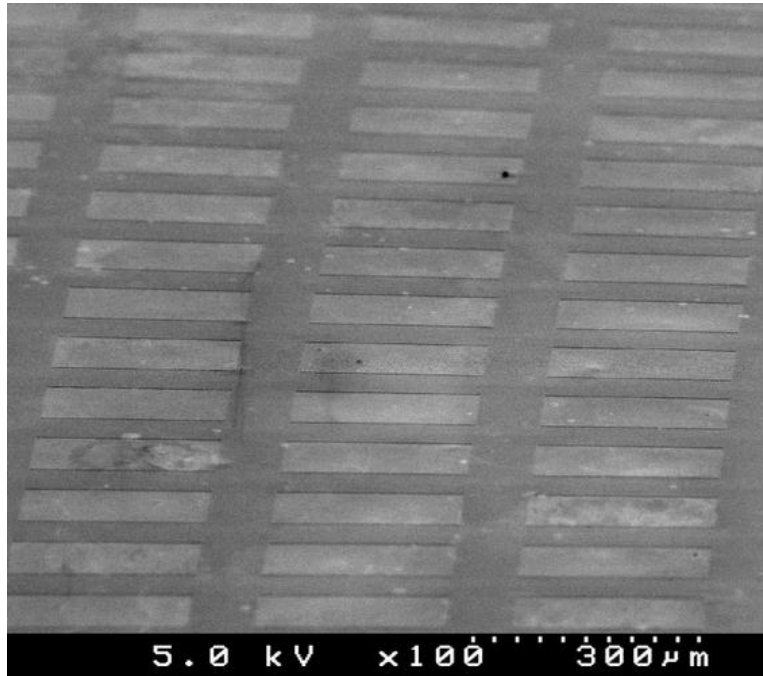
Flow Optimization



Mini-Pig Implantation



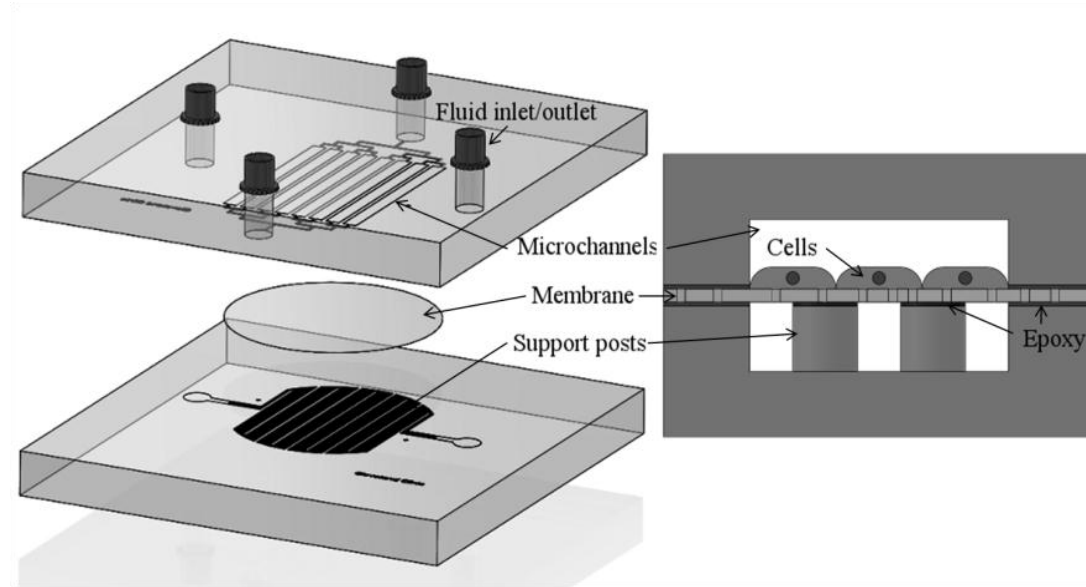
Membrane after Blood Exposure



Cell Sourcing and Storage

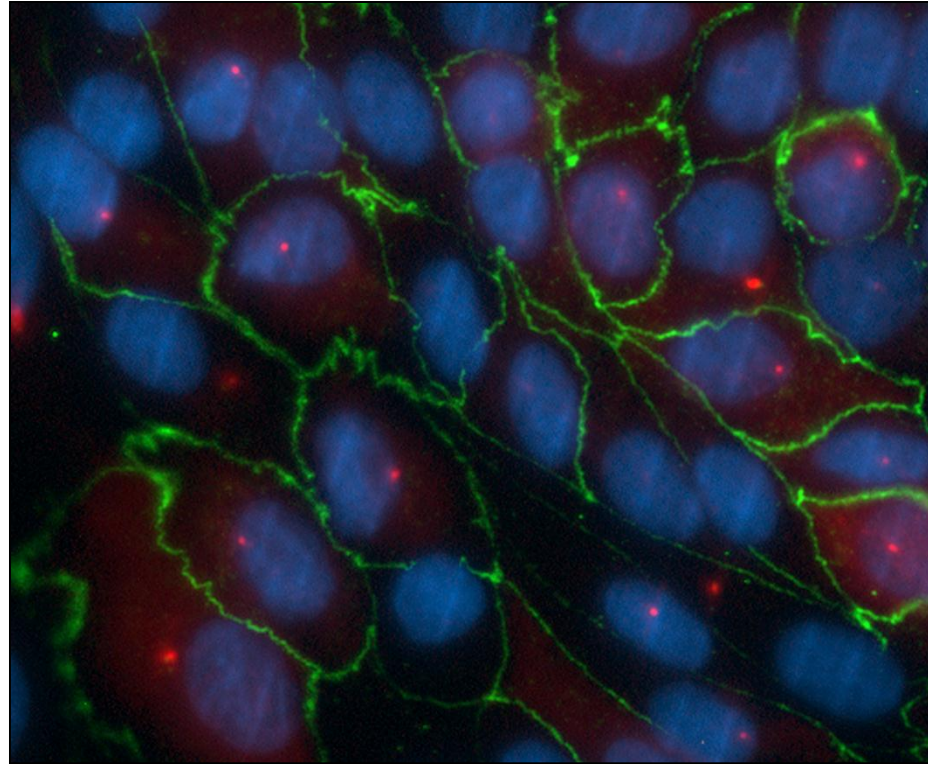
- **Isolation and expansion of cells from renal cortex**
 - “Enhanced Protocol” (EP)
 - 1 gm of biopsy tissue (10^8 - 10^{10} cells)
 - 17 doublings
 - 10^{13-15} differentiated cells: 1-100 acres surface area!
- **Successful cryopreservation of bioreactor**
 - differentiated cells *in situ*
 - >1 month
 - >4 months in storage

Cell Bioreactor



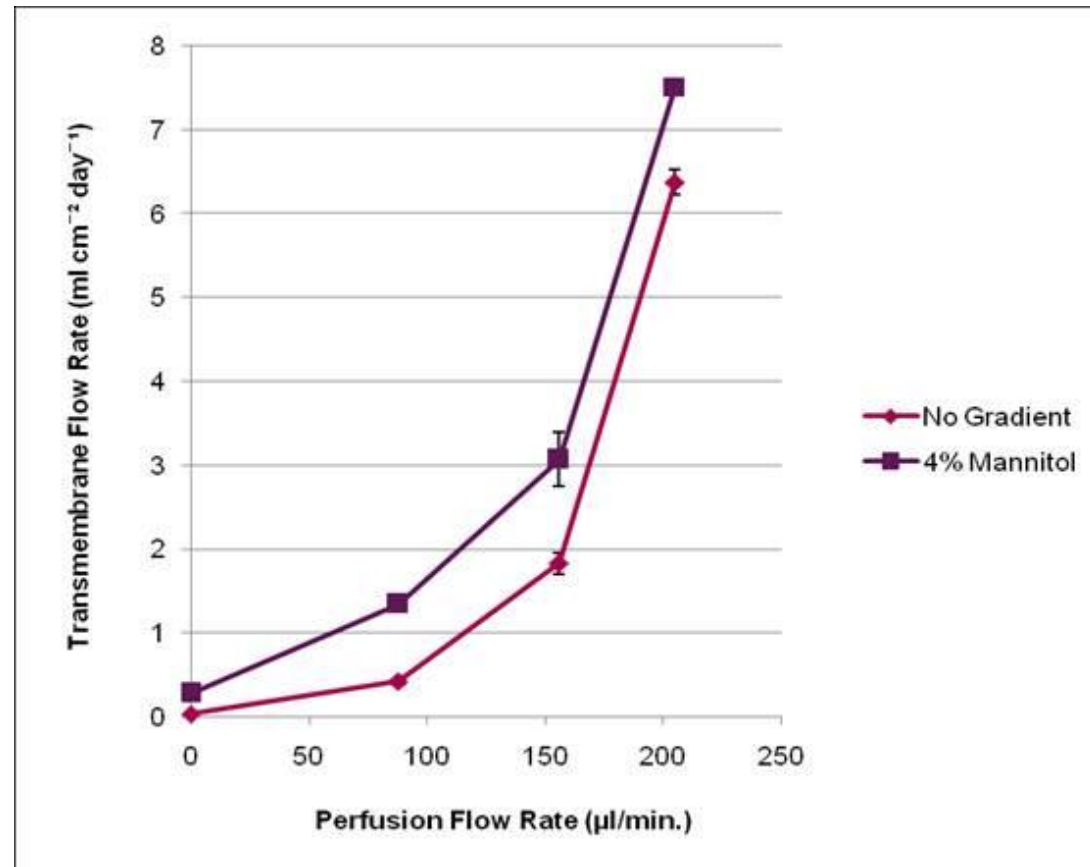
- **Bioreactor features**
 - microchannels for controlled shear stress on cells
 - membrane for cell support and transport pathway
 - basolateral chamber for membrane support and fluid collection

Cell Growth on Silicon Membranes



- **Human renal tubule cells (HRTCs)**
 - isolated from transplant discards
 - demonstrate differentiated phenotype

Active Fluid Transport via Cells

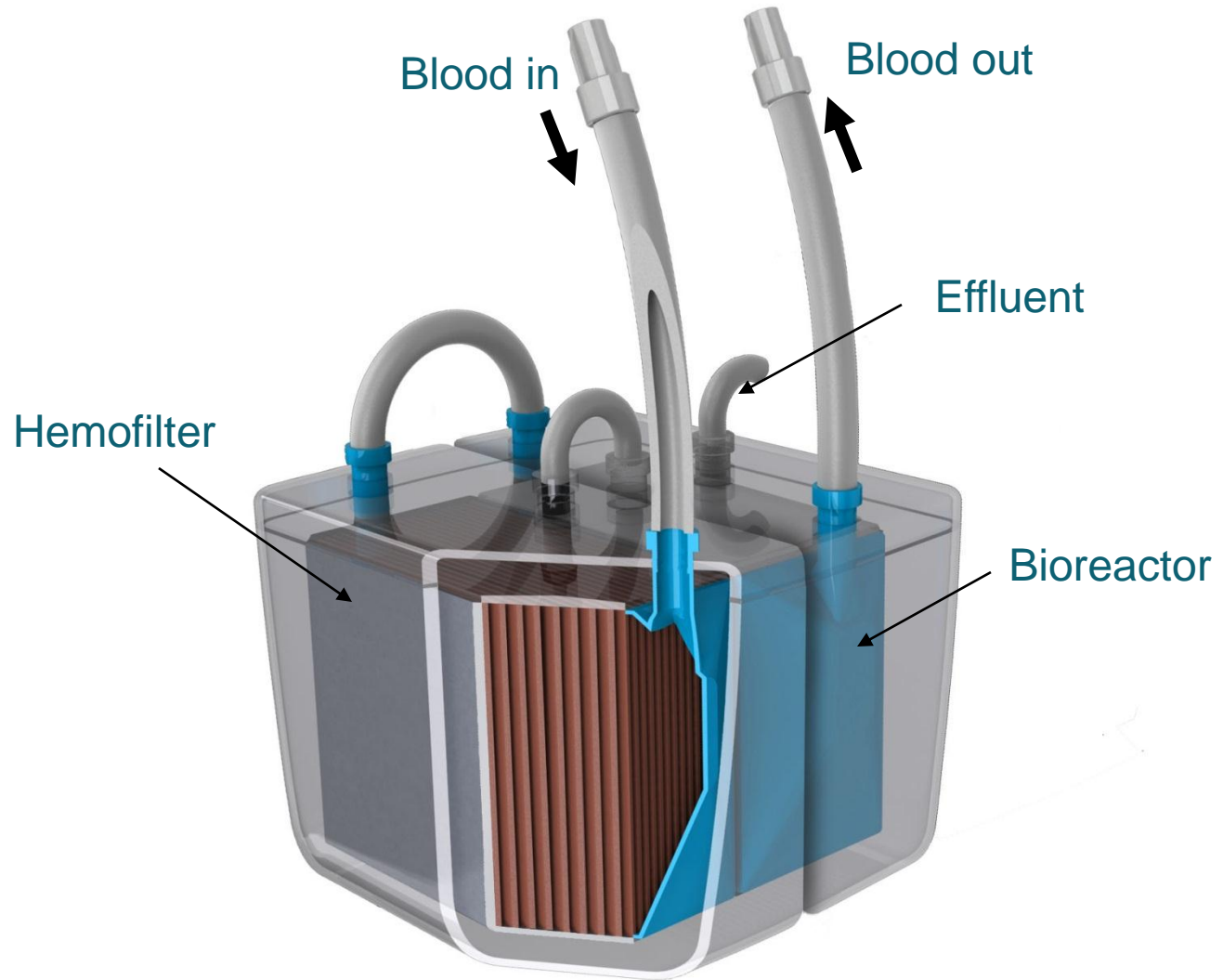


- **Increased transport under shear conditions**
 - translates to 70 liters/day/m²

Key Accomplishments – Phase I

- **Silicon membranes**
 - high permeability
 - high selectivity
- **Biocompatible coatings**
 - protein anti-fouling
 - anti-thrombogenic
- **Cell sourcing**
 - harvest transplant discards
 - biopsy for autologous use
 - cryopreservation for storage
- **Cell performance**
 - significant immunoisolation
 - significant water reabsorption

iRAD – Phase II Device



Acknowledgements

- **Collaborators**
 - NIH/NIBIB Quantum Project team
- **Funding**
 - NIH
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