Treating infected chronic wounds without antibiotics

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Introduction

Chronic Wounds

- \succ Are wounds that fail to heal in the normal manner
- 2.2 m patients each year in the UK
- >£5 billion pa cost for the NHS¹



Results

1. Washing

Images from epifluorescent microscopy

- a. Sample with biofilm
- b. Sample with biofilm washed with saline



- Pain, reduced mobility, social isolation for the

patient

Biofilms

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infection is largest remediable cause of chronicity

Chronic wound infections are normally in the form of

a biofilm³ which offer infecting organisms

Increased adhesion to wound bed

Protection against host defences

Relative resistance to antibiotics

Why not just remove the biofilm?

thereby increasing the difficulty of treatment



Chronic infected venous leg ulcer www.dermnetnz.org



c. Sample with biofilm washed with AAFS saline

Scale bar is 10 µm

Graph shows percentage coverage of GFP tagged bacteria

2. Healing

- H&E stained sections through wound bed a. Sample with no biofilm & no wash b. Sample with no biofilm & saline wash c. Sample with no biofilm & AAFS saline wash d. Sample with no biofilm & AAFS saline wash Scale bar is 500 µm Arrows in c. & d. indicate the tongue of re-epithelialisation
- Graph shows length of tongue of re-epithelialisation growing across the wound bed No damage to the tissue is seen







Acoustically Activated Fluid Stream (AAFS)

A bubble in a fluid exposed to a sound field may exhibit a number of behaviors. With increasing sound amplitude, initial radial oscillations are replaced by Faraday waves on the bubble's surface.² These 'bubbles with waves' can remove contaminants from surfaces. Acoustic radiation forces propel the bubbles into crevices thereby making this technology suitable for cleaning irregular surfaces such as wounds. Creating this environment in a fluid stream allows the cleaning action to be directed at a wound.



3 Keratinocyte activation

Sections through the wound bed stained for cytokeratin 14



Micrograph of trapped bubble showing Faraday waves (courtesy T G Leighton)

- e. Sample with no biofilm & no wash
- f. Sample with no biofilm & saline wash
- g. Sample with no biofilm & AAFS saline wash

Scale bar is 500 µm

Activated keratinocytes spreading across the healing wound bed

Methods

- Pre wounded Epiderm Full Thickness (EFT[®]; Mattek Corp., USA) reconstituted human epithelium samples were used
- *Pseudomonas aeruginosa* PA01 tagged with green fluorescent protein were used to form a 24 hour biofilm
- Samples were treated according to the table below
- Samples were imaged using epifluorescent microscopy with image analysis for percentage coverage with ImageJ
- Sections from the samples were stained with Hematoxylin & Eosin or anti-cytokeratin 14

Saline Wash? AAFS Wash? EFT[®] Sample Biofilm present?

Conclusions

- AAFS washing of pre-wounded EFT[®] samples infected with an early biofilm removes 99.99% the infection (p<0.001)
- AAFS washing of pre-wounded EFT[®] samples without biofilm causes and increase in the reepithelialisation of the wound
- The re-epithelialisation of the wound involves the normal mechanism of keratinocyte activation involving the production of cytokeratin 14
- Washing of pre-wounded EFT[®] samples does not cause damage or disruption to the underlying structures

Future work

Control 1	_	-	-
Control 2	+	-	-
Control 3	-	+	-
Control 4	-	-	+
Saline wash	+	+	_
AAFS saline wash	+	_	+

- These experiments are being replicated using more mature biofilms and also multi species biofilms on a pig skin explant model.
- Subsequently, similar experiments will be conducted • on human surgical salvage skin explants to generate performance and safety data for 'Fist in Human' trial
- When performance and safety data available, a small clinical trial will be conducted next year



Pig skin explants on media

References

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