



SPARC at Purdue

MAPPING THE STOMACH'S NEURAL CIRCUITRY FOR STIMULATION

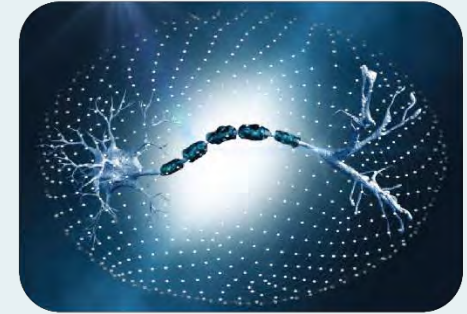


Therapeutic Approaches: Problems

- **Drugs:** Off-target effects; drug-drug interactions; drug refractory conditions
- **Surgery:** Irreversible; non-specific; drastic
- **Stimulation:** Promising but problematic (1st Generation)

Experimental Needs

- Interdisciplinary, programmatic research
- Rapid data sharing



SPARC

Stimulating
Peripheral
Activity to
Relieve
Conditions



VAGUS NERVE STIMULATION (VNS) FOR GASTROINTESTINAL DISORDERS

FDA APPROVED

- Medtronic - Enterra II Gastric electric stimulation (2000).*

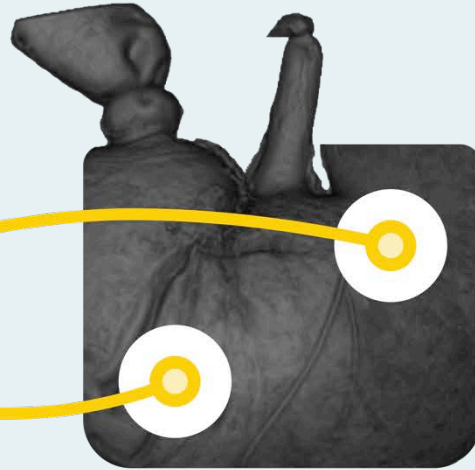
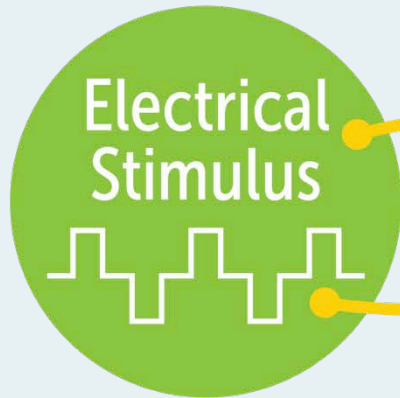
** Humanitarian Device: The effectiveness of this device for this use has not been demonstrated.*

- EnteroMedics – Maestro Rechargeable System (Vbloc) (2015).

CE MARK

- Intrapace – Abiliti Gastric Pacemaker (2011).
- Endostim – Endostim LES Stimulator for GERD (2012).
- Metacure – Diamond (2007)





1st Generation

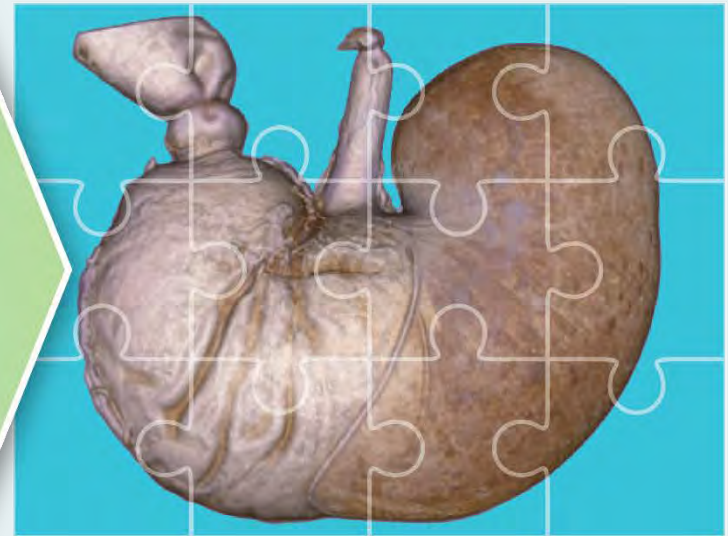
- Gastroparesis
- Gut Dysmotility
- Dyspepsia
- Visceral Pain
- Nausea, Emesis
- Obesity
- Pyloric Stenosis
- Dumping
- Reflux
- Anorexia Nervosa



SPARC at Purdue

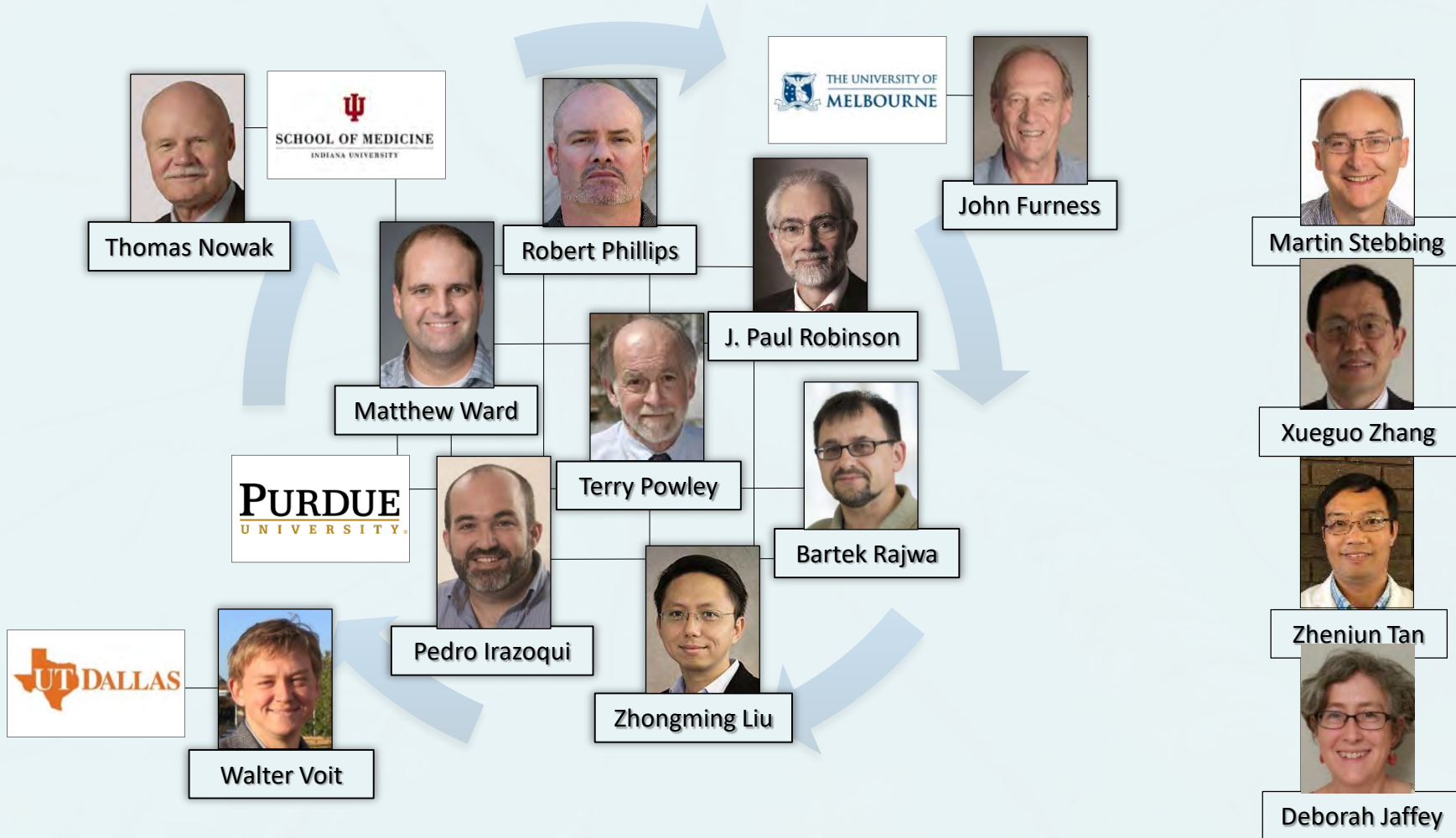
OT2 (Integrative)

RO1s (Tunnel Vision)





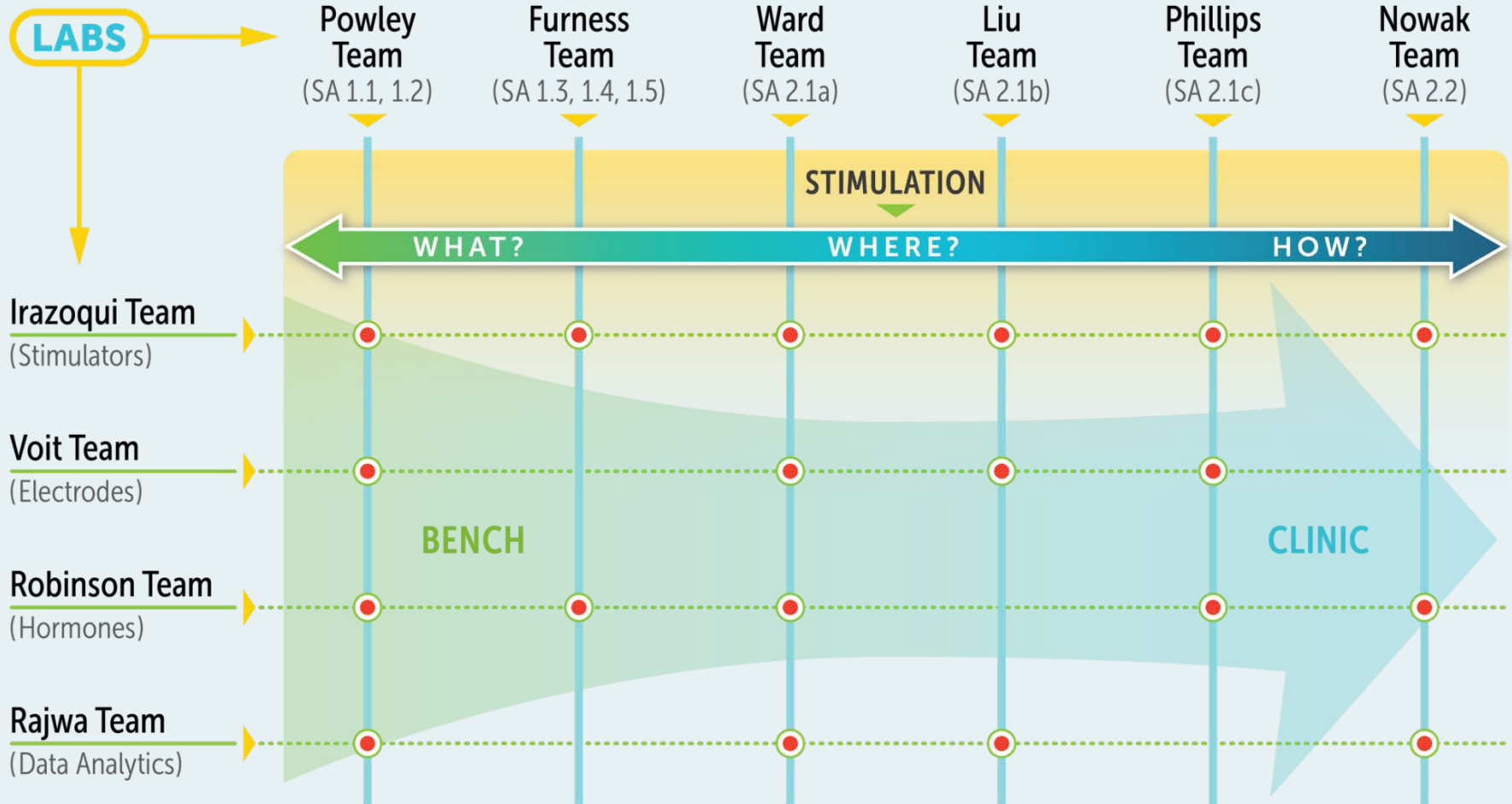
INTERDISCIPLINARY SYNERGY





SPARC at Purdue

LABS



SA = Specific Aim



what

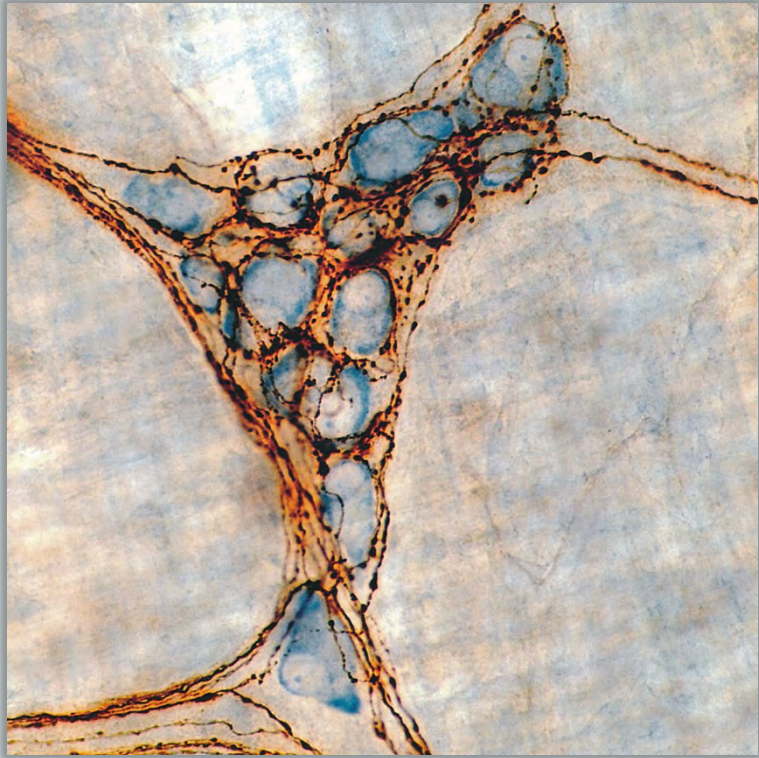
where

how

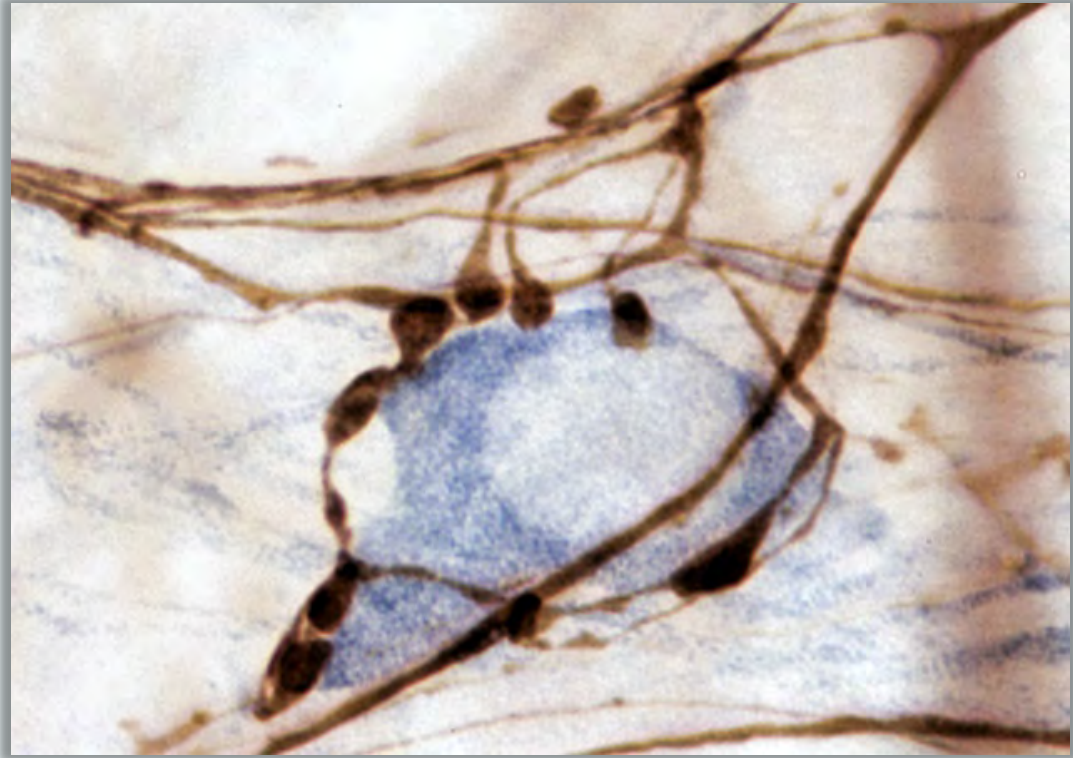
If we don't know
what, where, how
to stimulate,
*we don't know what
we are doing.*



TRACERS FOR PHENOTYPING EXTRINSIC PROJECTIONS: EFFERENTS



PHA-L / Cuprolinic Blue

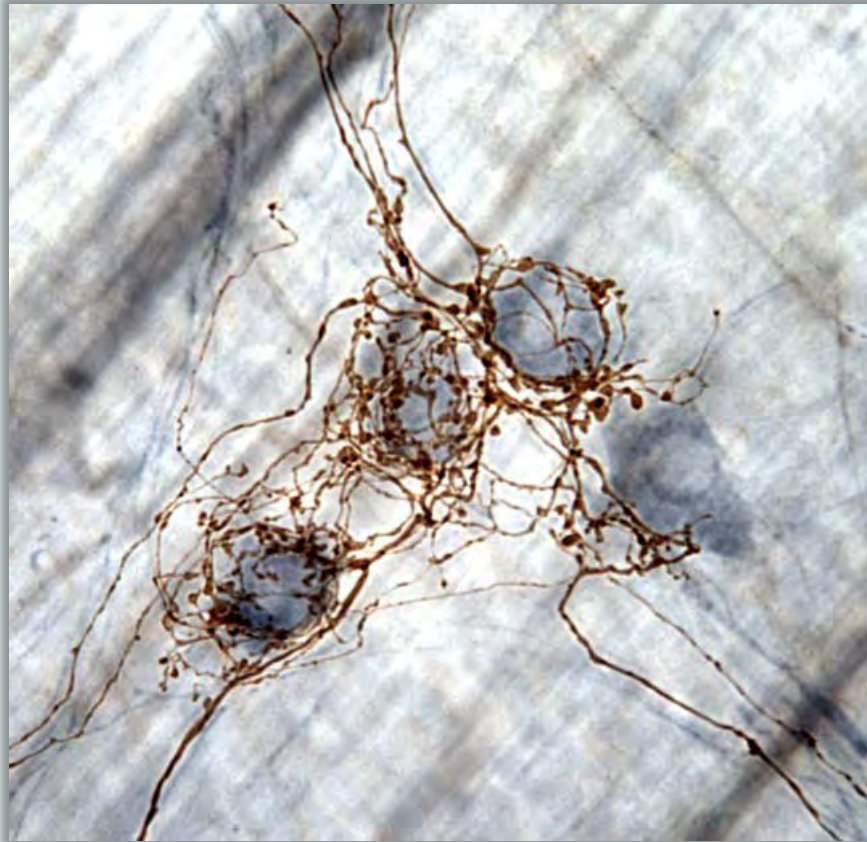


Dextran-Biotin / nNOS





TRACERS FOR PHENOTYPING EXTRINSIC PROJECTIONS: EFFERENTS WITH nNOS COUNTERSTAIN



Contacting NOS+ cells

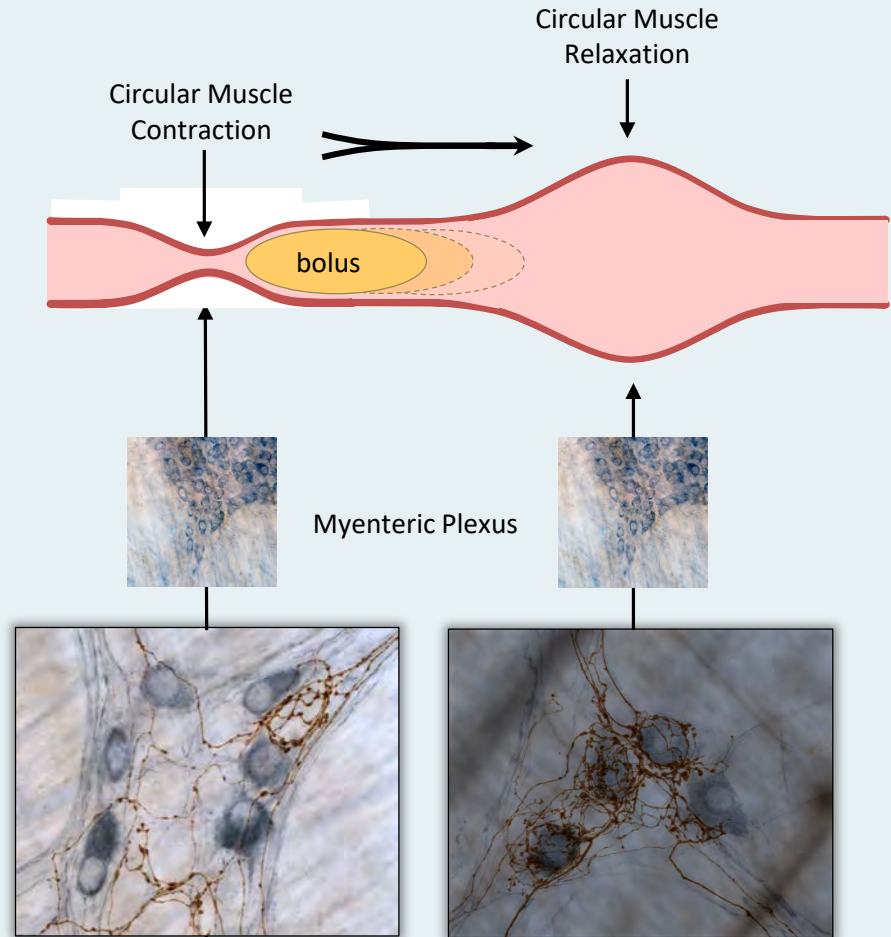
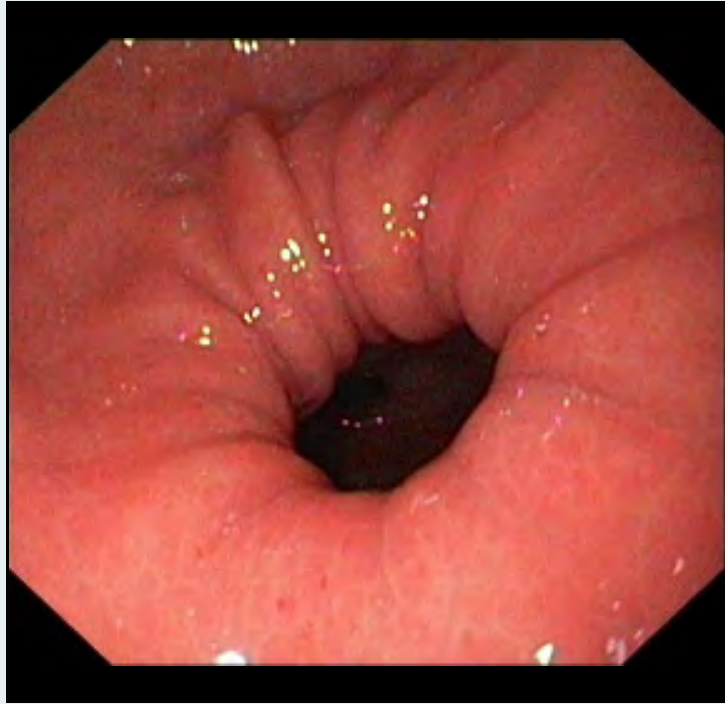


Contacting NOS- cells





PHASING PERISTALTIC PROPULSIVE MOTION *via* VAGAL COORDINATION?



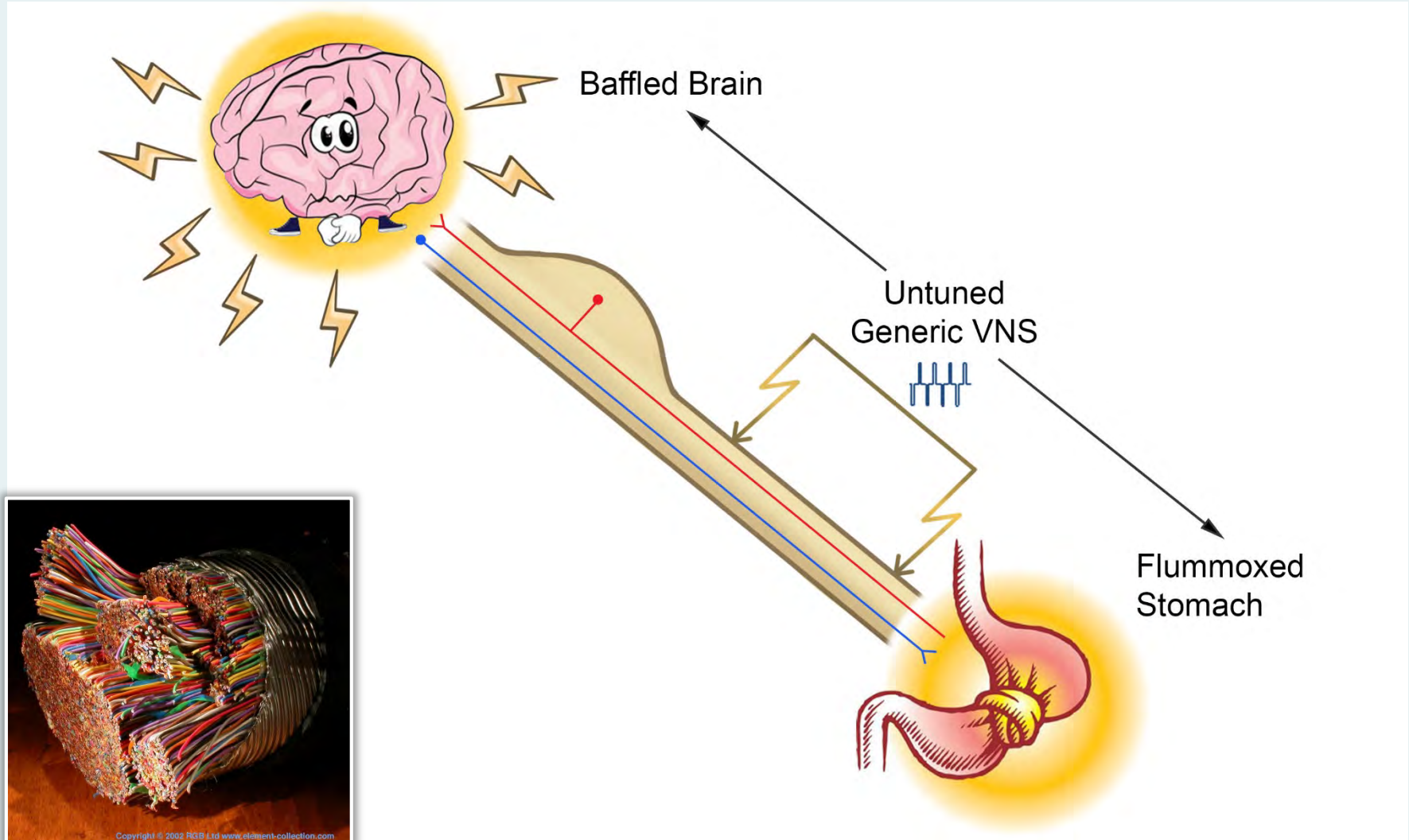
Vagus
Nerve

Vagal innervation of NOS- cells

Vagal innervation of NOS+ cells

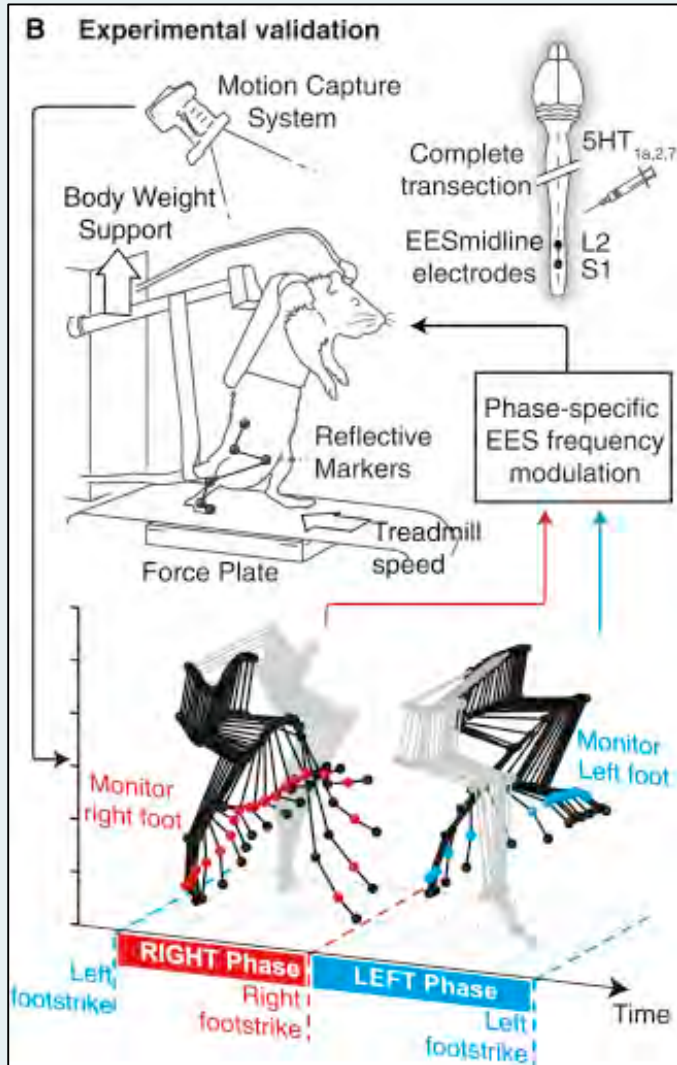


FIRST GENERATION DEVICES





ANALOGUE FOR VNS ENHANCEMENT OF STOMACH FUNCTION?



Stimulation to Restore Spinal Motor Function Requires:

- Afferent stimulation engaging reflex arcs
- Patterned stimulation

From: Moraud et al., *Mechanisms Underlying the Neuromodulation of Spinal Circuits for Correcting Gait and Balance Deficits after Spinal Cord Injury*, *Neuron* 89 (2016) 1,
<http://dx.doi.org/10.1016/j.neuron.2016.01.009>



TRACERS FOR PHENOTYPING EXTRINSIC PROJECTIONS: AFFERENTS

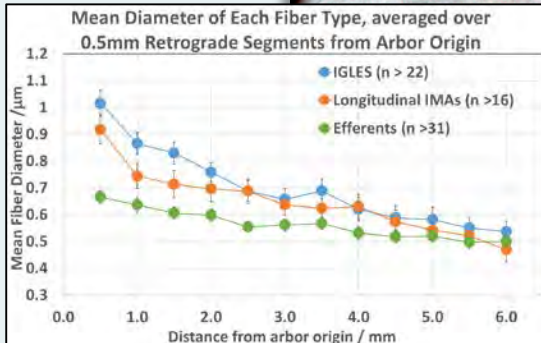


IGLE



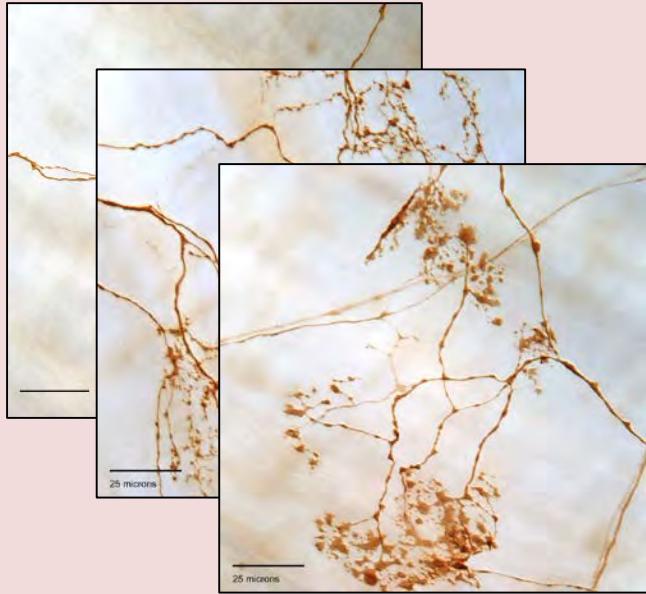
IMA

Mean Diameter of Each Fiber Type, averaged over 0.5mm Retrograde Segments from Arbor Origin

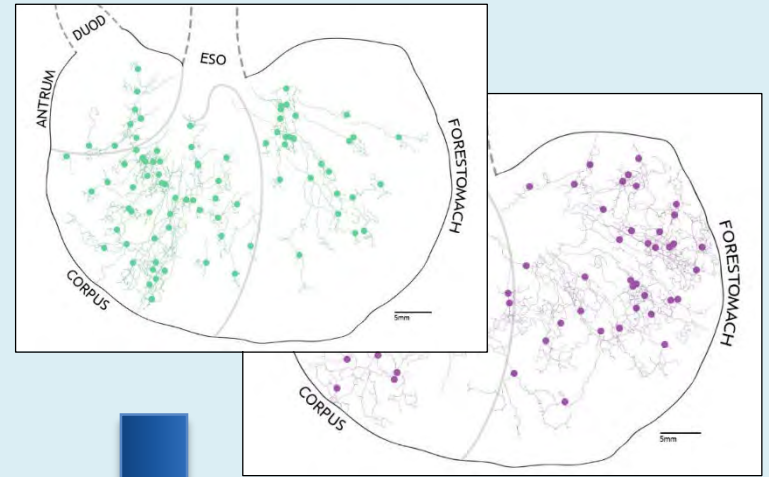
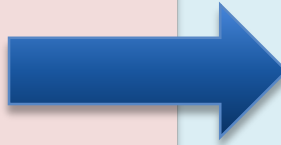




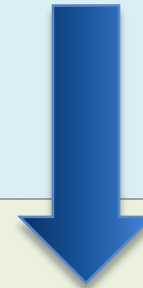
SPARC at Purdue



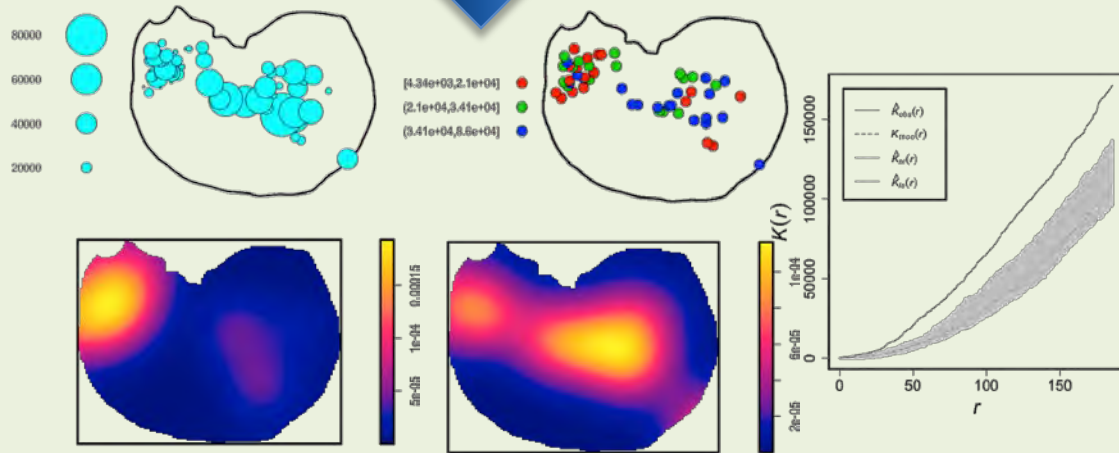
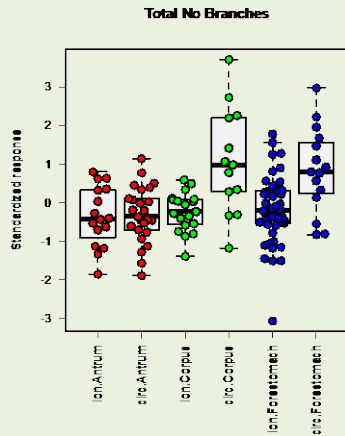
Imaging



Mapping

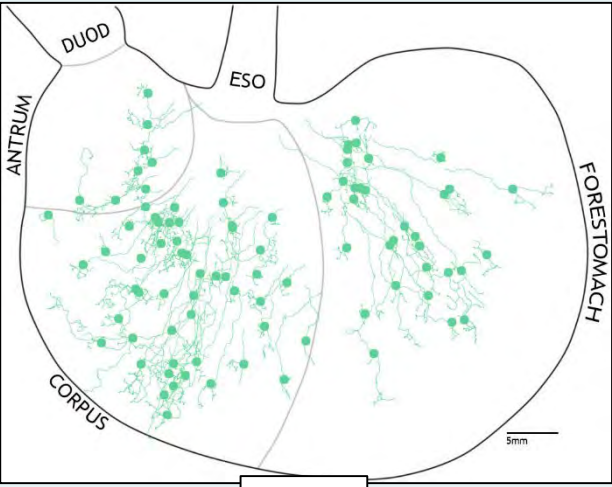


Statistical analysis

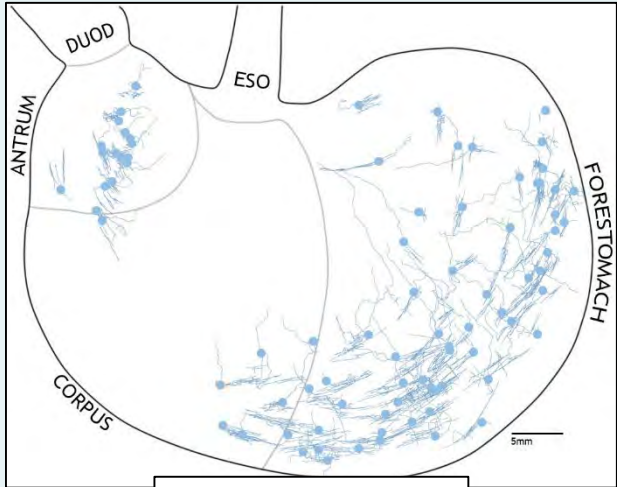




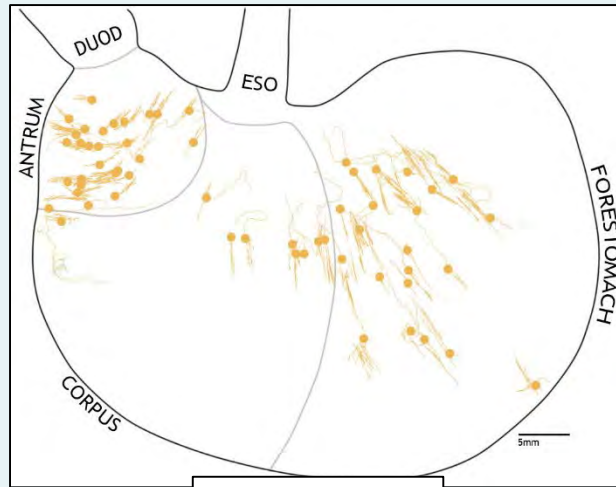
MAPS OF NEURITE ARBOR BRANCHING AND ARBOR ORIGIN DENSITY



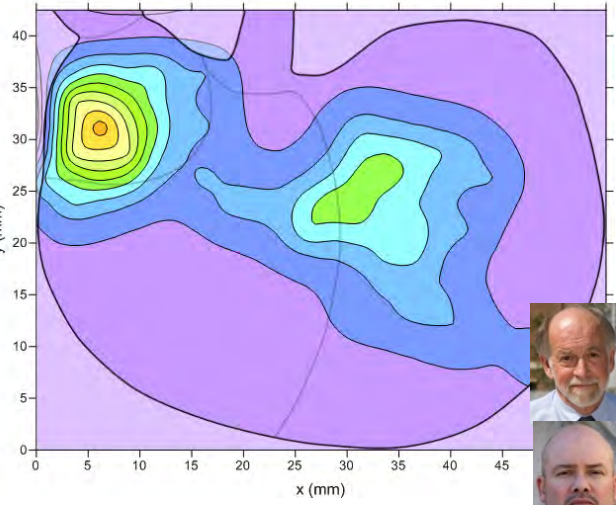
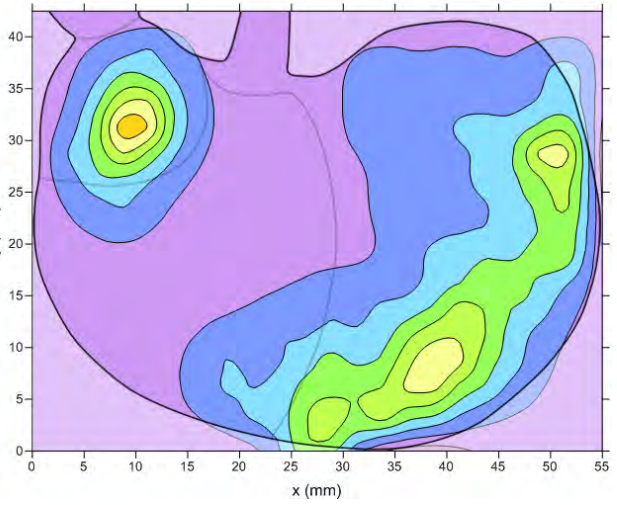
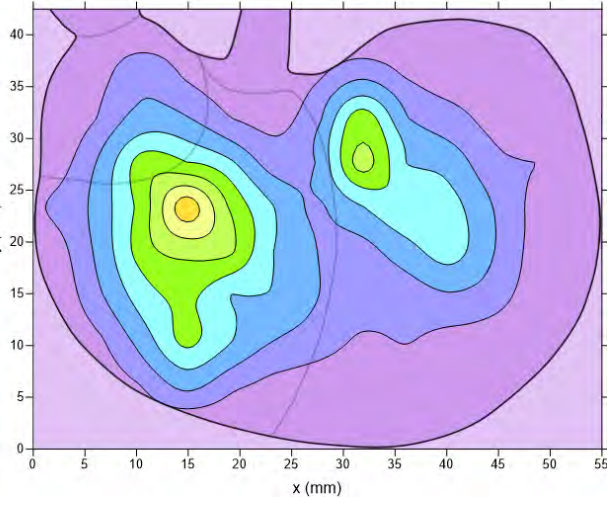
IGLEs



Longitudinal IMAs

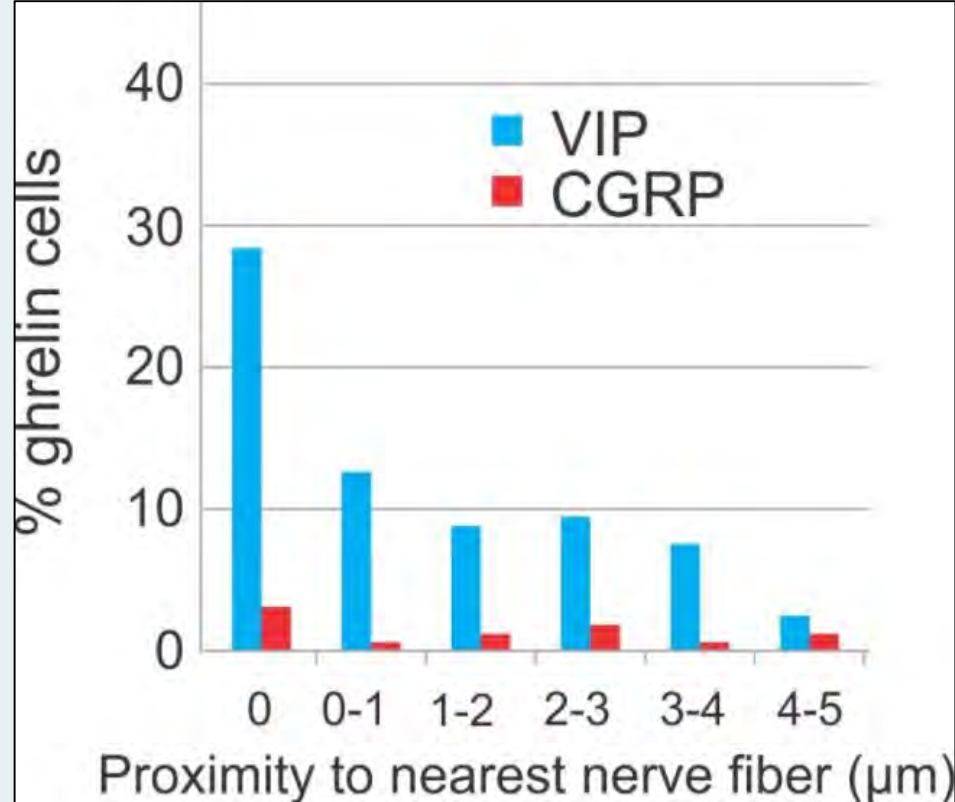
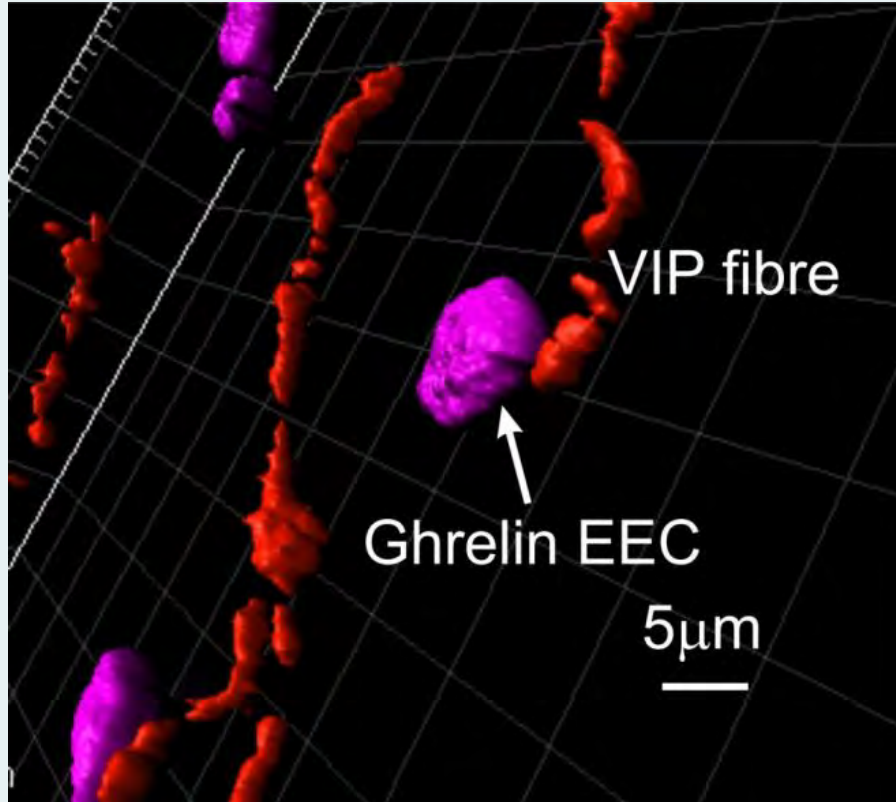


Circular IMAs





EEC MAPPING AND TRANSLATIONAL STUDIES (FURNESS)



Cells containing ghrelin, a gastric hormone that increases appetite and reduces nausea, are innervated by VIP fibers. Stimulation of ghrelin release may reduce post-prandial satiety and nausea in gastroparesis. 50% of ghrelin cells have a VIP fiber within 2 microns.





EEC MAPPING AND TRANSLATIONAL STUDIES (FURNESS)

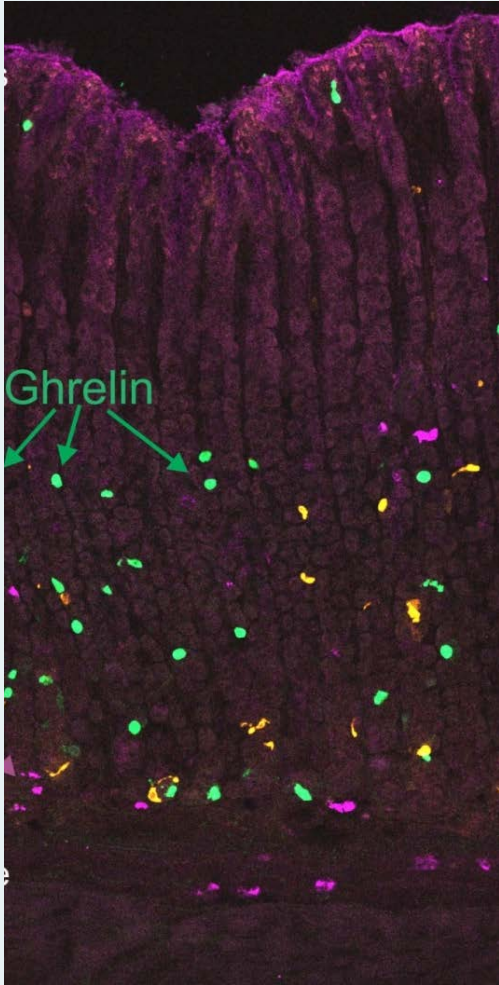
Lumen



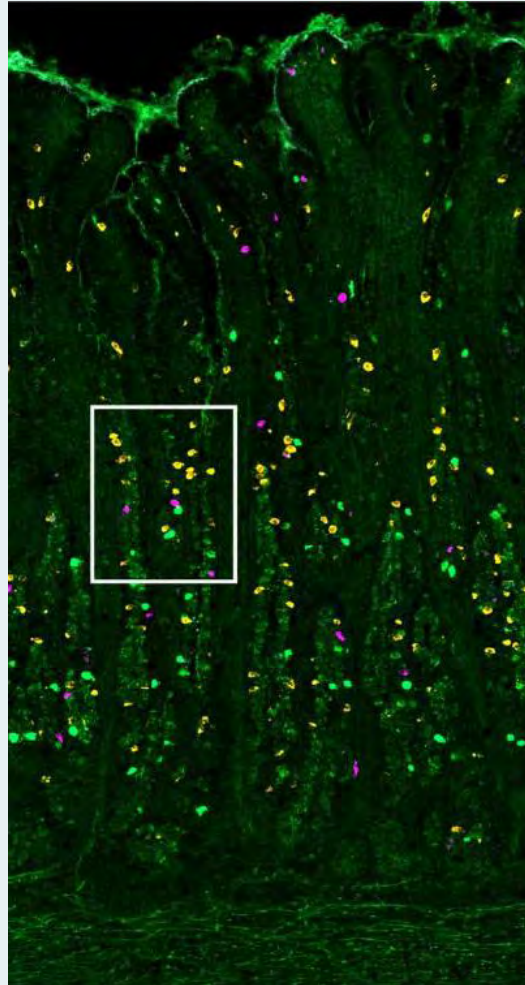
Mucosa



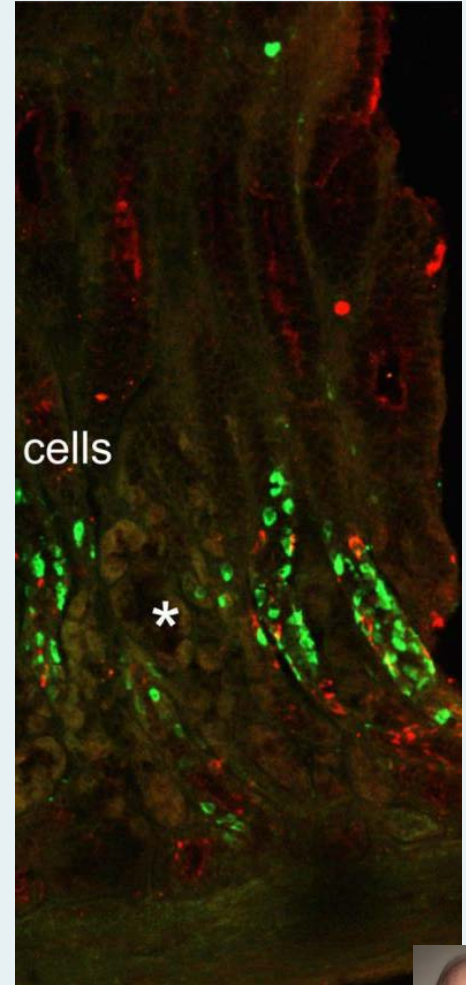
Submucosa



Rat (corpus)



Pig (antrum)

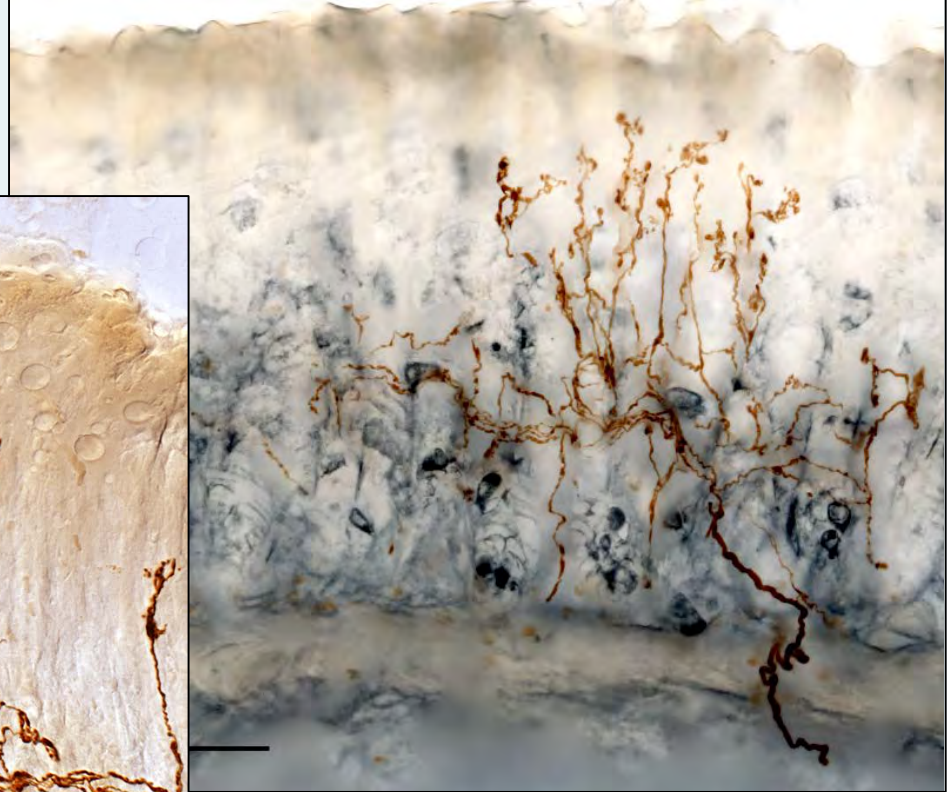


Human (antrum)



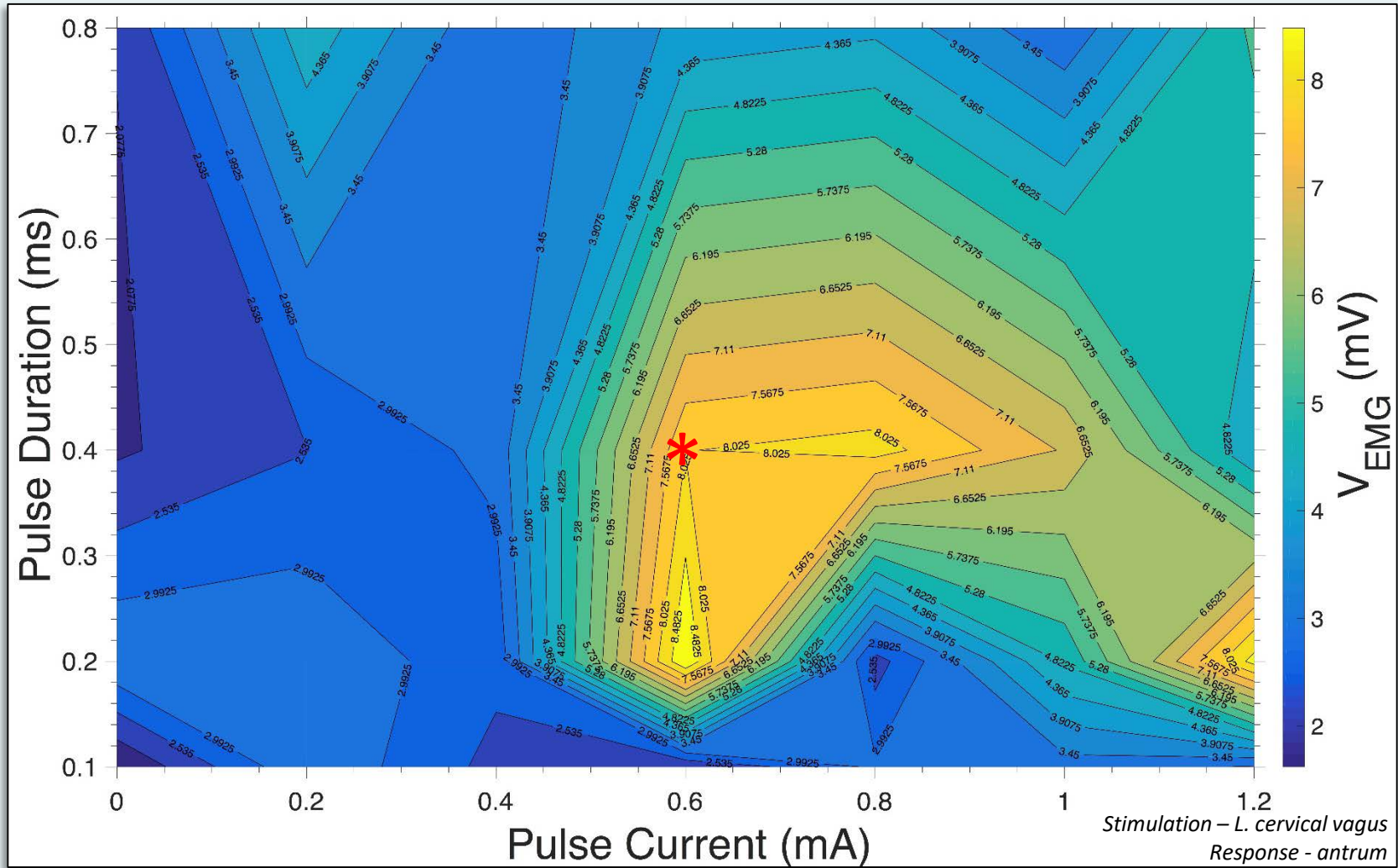


GASTRIC MUCOSA WITH AND WITHOUT GASTRIN DOUBLE LABELING





STIMULUS RESPONSE SURFACE (MATT WARD)





AUTONOMOUS NEURAL CONTROL GUI (MATT WARD)

Recording Parameters

Subject ID: ID

Save Trial Data As: SaveFileData

Analog Input: 1

Amplifier Gain: 1000

Fs (Hz): 25000

Autonomous Neural Control (ANC)

Inactive

Select Fiber Group:

A fibers

B fibers

C fibers

Parameter Mapping Status

Pair #	MAX Act	min Act
1		
2		
3		

Activation Level

Charge-Duration Line Prediction and Maintenance

STEP 1 - Input target activation level (%): 50

STEP 2 -

$Q(nC) = I_{rh} \times DUR(ms) + b$

STEP 3 - Enter DUR (ms) and maintain activation

A-M Systems V/I Setting

1000 uA/V 314.1 uA/V

10 uA/V 1 uA/V

Stimulation Parameters

Select Charge Balancing Mode

Type I (k-s) Type II (Pulsed)

Monophasic?

Train Duration (sec): 1 Dist (mm): 8

PRF (Hz): 20

AMP Cathode(-) (mA): -0.086125 Qc (nC): -21.53

PW Cathode(+) (msec): 0.25 Qa (nC): 21.531

AMP Anode(+) (mA): 0.086125

PW Anode(+) (msec): 0.25

C >> A Delay (msec): 24.75

Raw CAP Waveforms

Mean CAP Response

Heart Rate Variability

Charge-Duration Plot

Nervo Control Panel

% A fibers: **60.865**

% B fibers: **24.669**

% C fibers: **69.666**

Optimize Selectivity



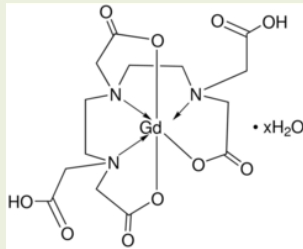
CONTRAST-ENHANCED GASTRIC MRI (ZHONGMING LIU)

Fast



Feed

Gd-DTPA



+

DietGel



Scan

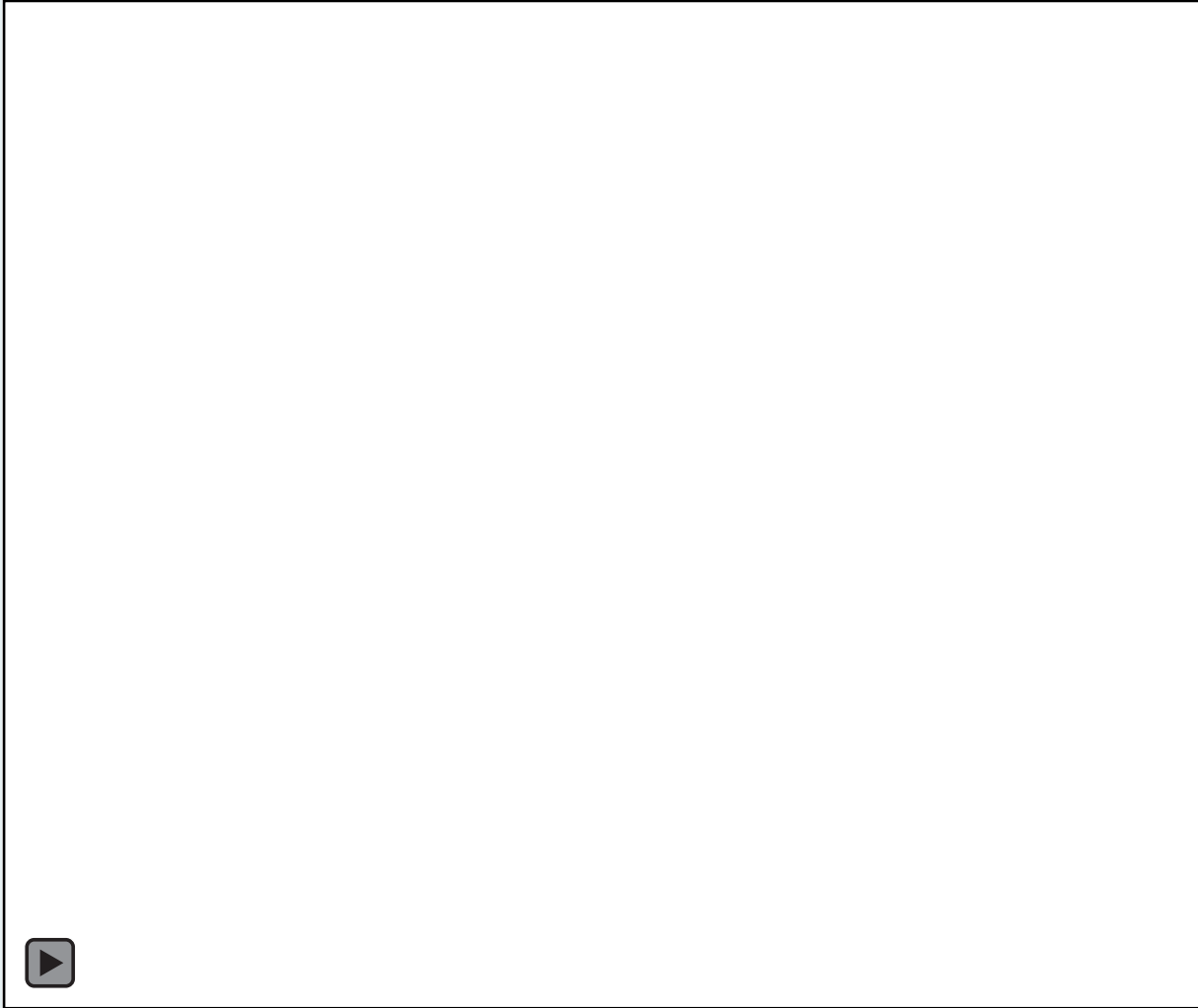


Lu et al., (2017) IEEE Trans. Biomed. Engr.

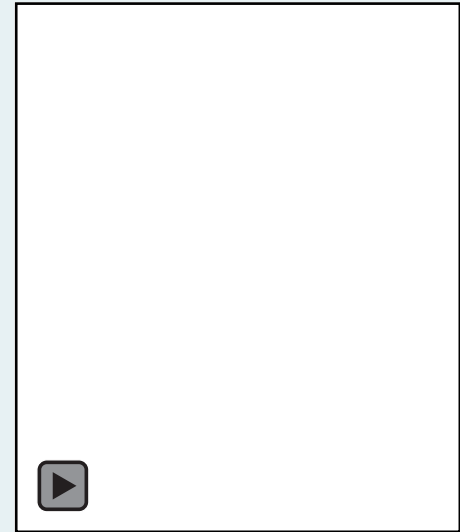




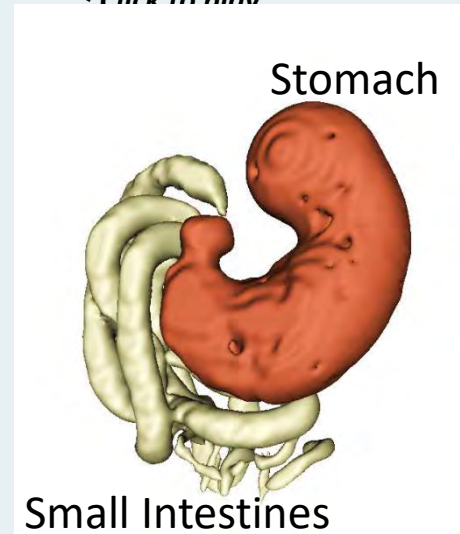
High-resolution Gastric MRI



← *Click to play*

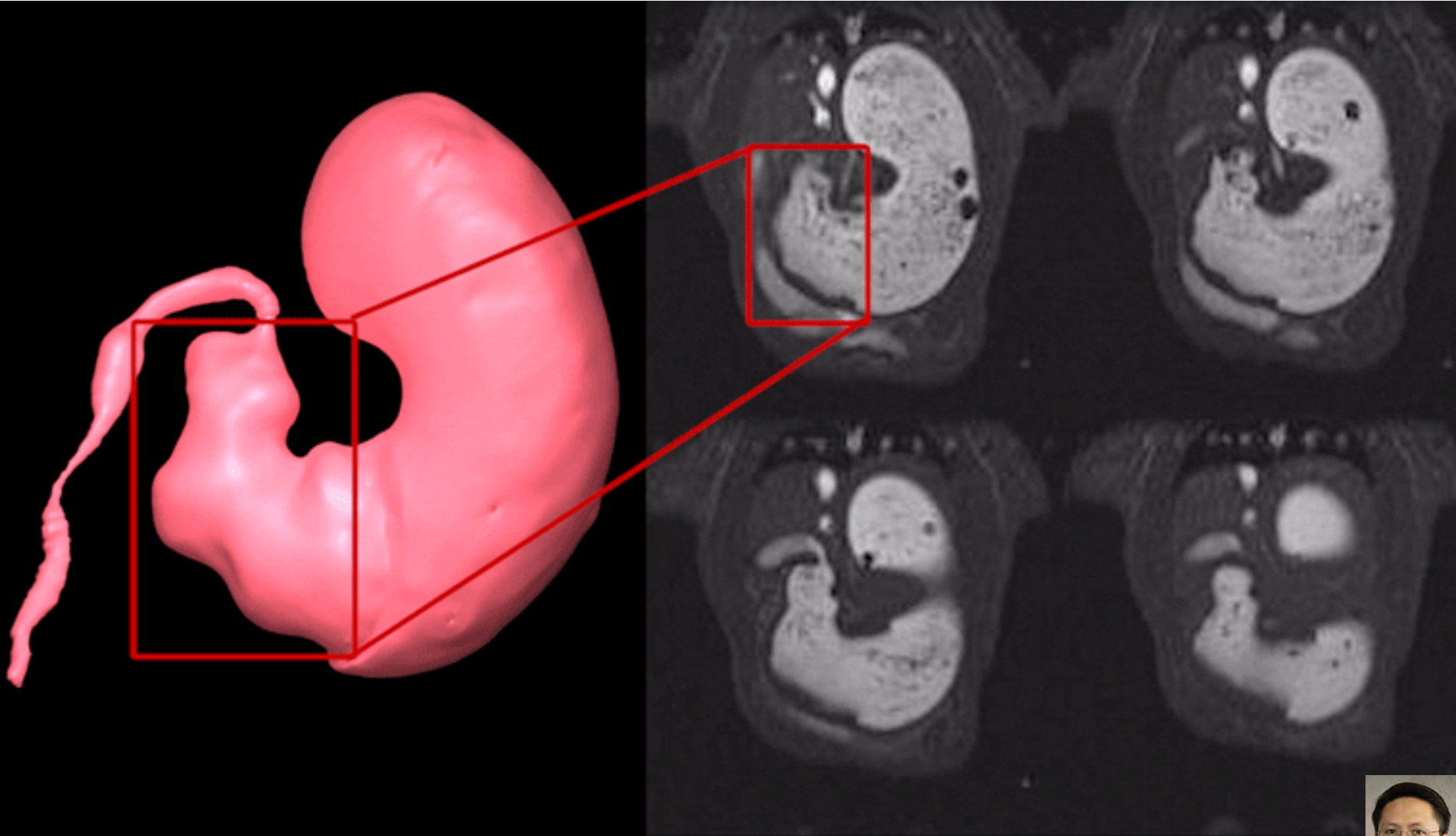


← *Click to play*





SPARC at Purdue



Lu et al., (2017) IEEE Trans. Biomed. Engr.





HUMAN GASTRIC MRI



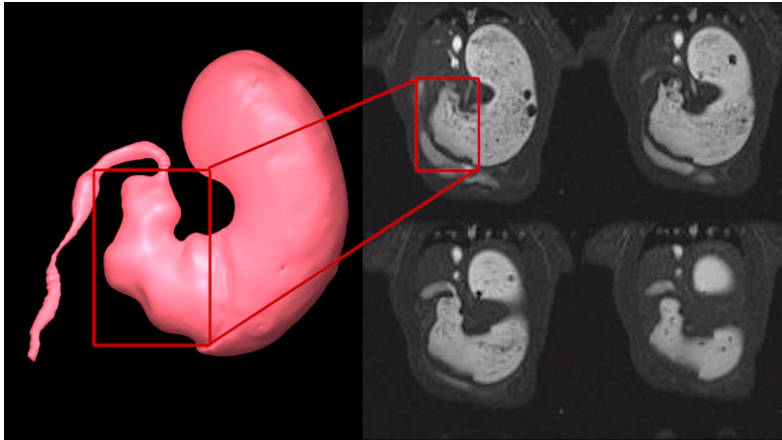
Napadow and Kuo,
Harvard/MGH



SPARC at Purdue

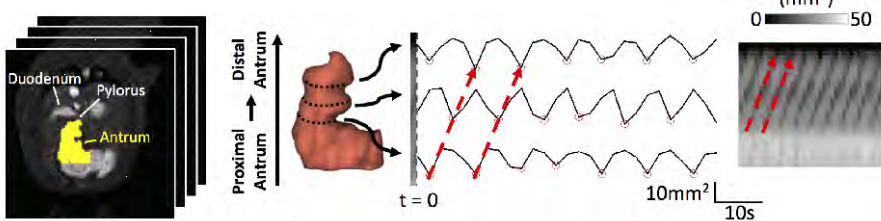
Rat

Gastric MRI



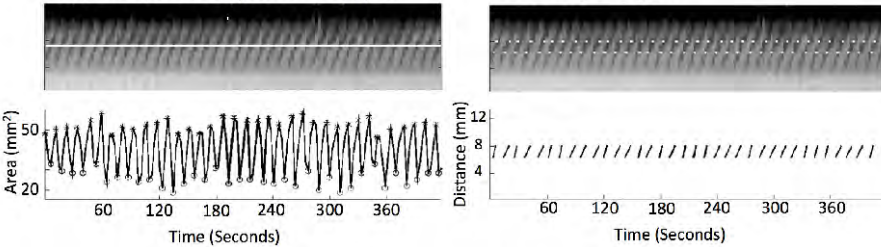
Segmented antrum

Cross-sectional area change



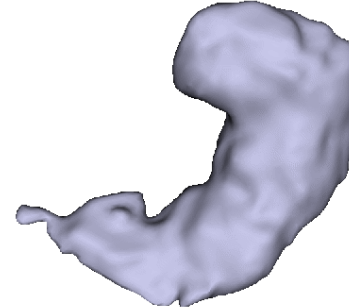
Frequency and amplitude analysis

Velocity analysis

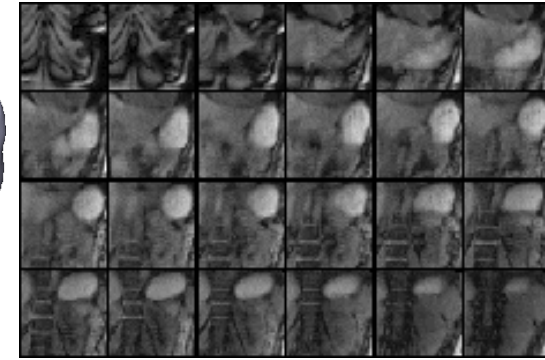


Human

3D-rendered Stomach



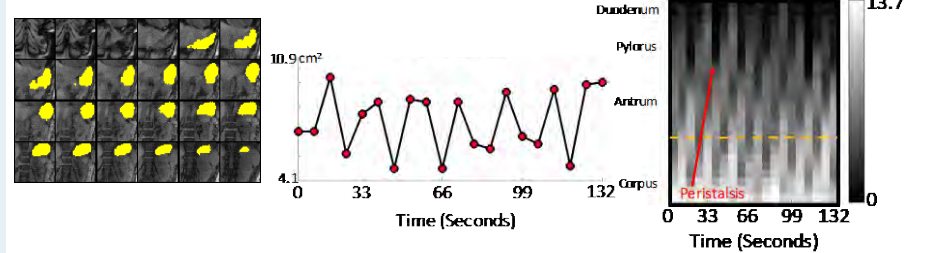
Gastric MRI



Segmented GI Tract

Cross-sectional area change

Motility Diagram



Human Gastric MRI: collaborators Napadow and Kuo at Harvard/MGH -- SPARC/Purdue collaborators

Segmentation, Analysis and Rendering of Human Gastric MRI: Lu and Liu

Translational gastric imaging and analysis protocols. **Left:** Rat gastric MRI. **Right:** Human gastric MRI.



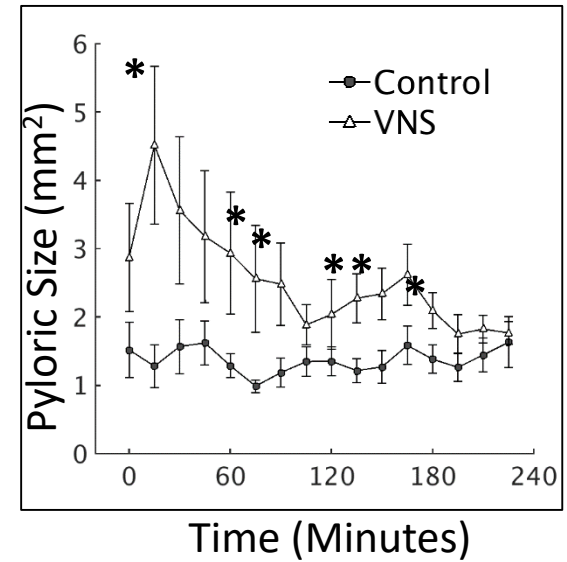
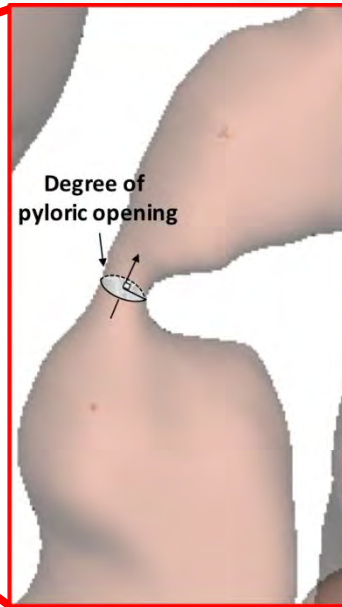
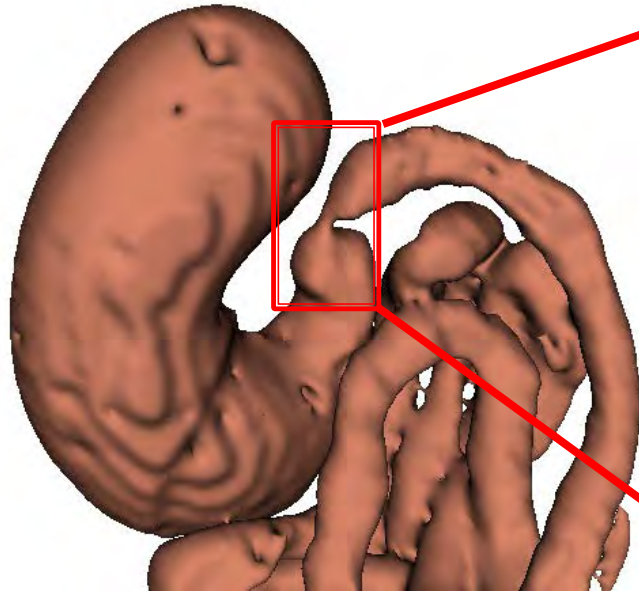
Small Intestinal Motility



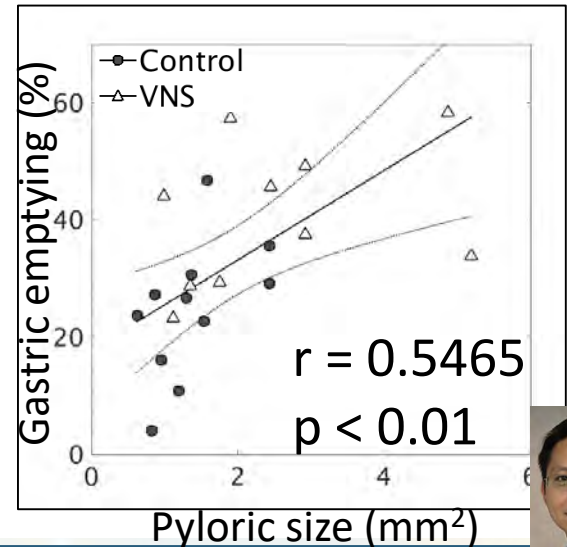
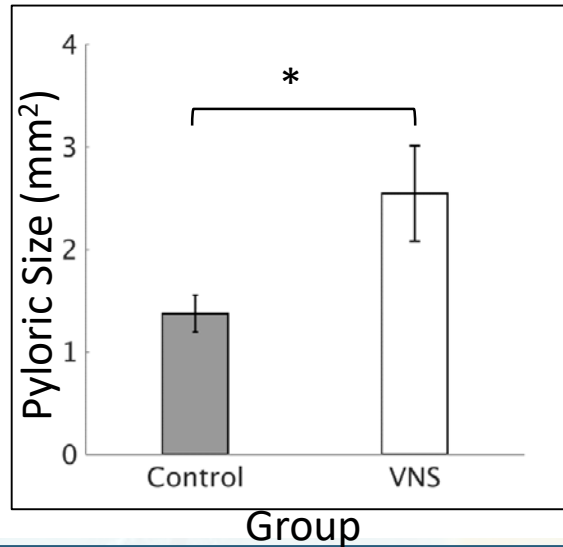
Click to play



SPARC at Purdue



VNS promotes stomach emptying by increasing pyloric opening





SPARC at Purdue



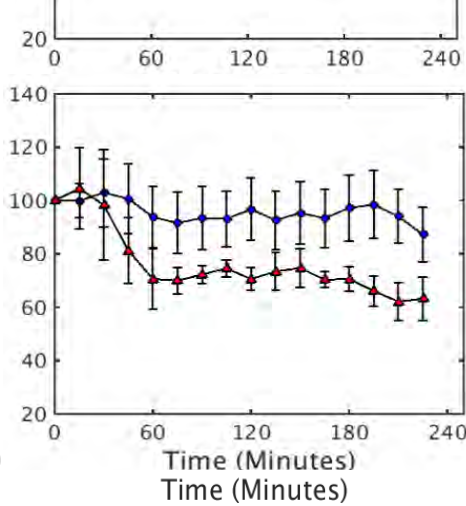
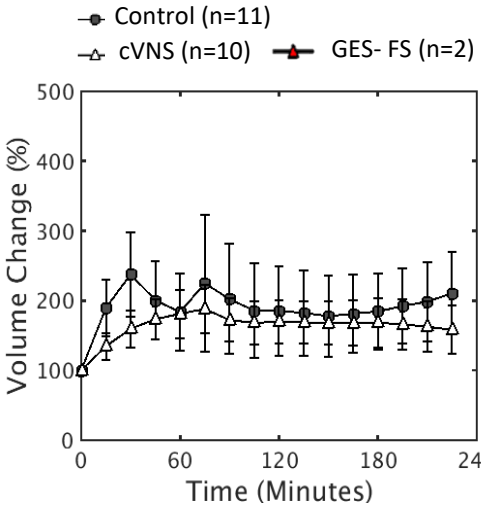
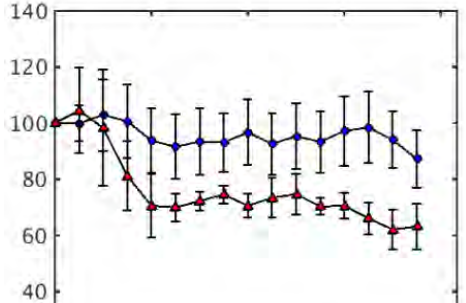
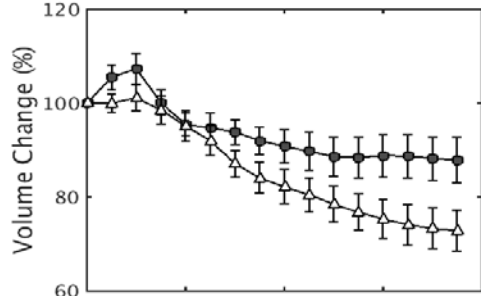
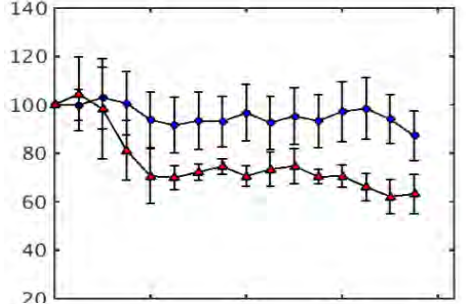
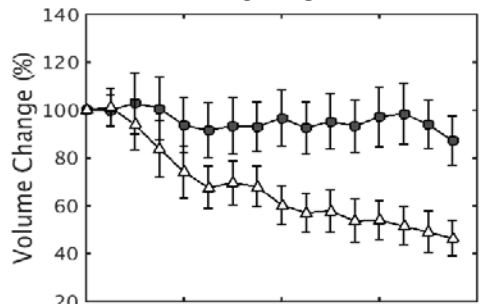
Antrum

Total GI tract

Intestines

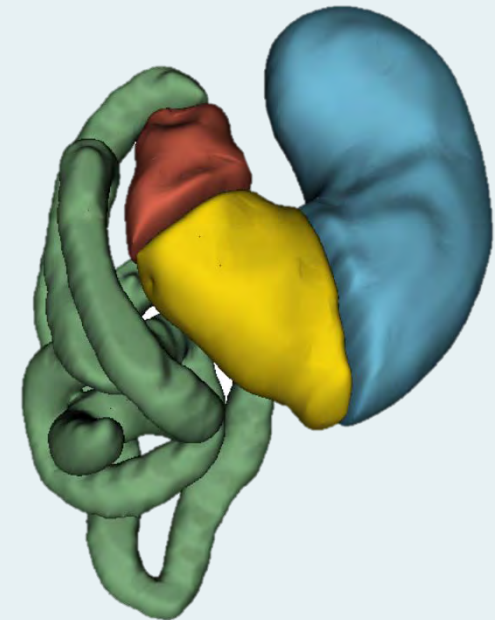
cVNS

GES - forestomach



● Control (n=11)
 ▲ cVNS (n=10) ▲ GES-FS (n=2)

cVNS vs. GES



cVNS may promote

- ↑ Gastric emptying
- ~ Intestinal absorption

GES-FS may promote

- ↑ Gastric emptying
- ↑↑ Intestinal absorption



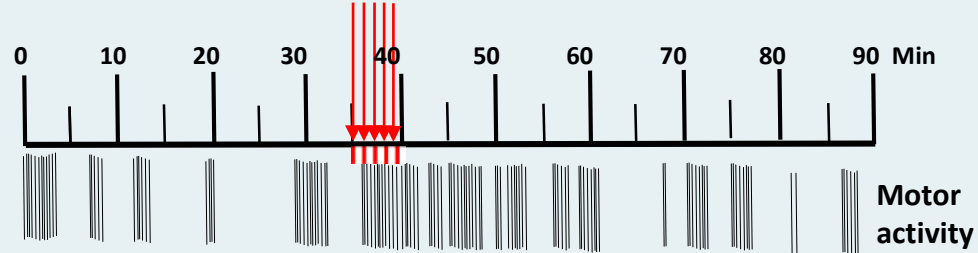


DUODENAL MOTILITY (TAN, WARD, ZHANG, POWLEY)

PERISTALSIS

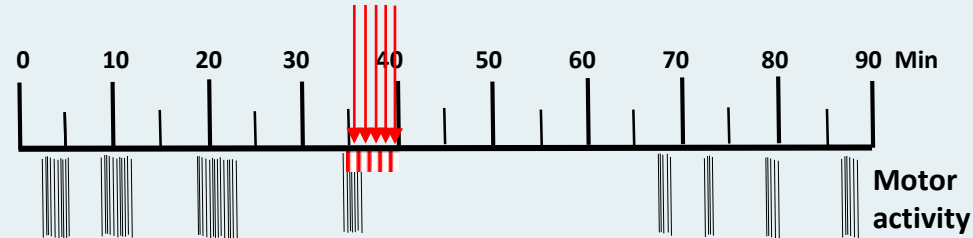
Electrode located in forestomach area of concentration of longitudinal IMA "hotspot":

Stimulation

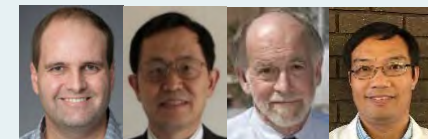


Electrode located close to limiting ridge i.e. affecting **corpus** and not on "stretch" receptor concentration:

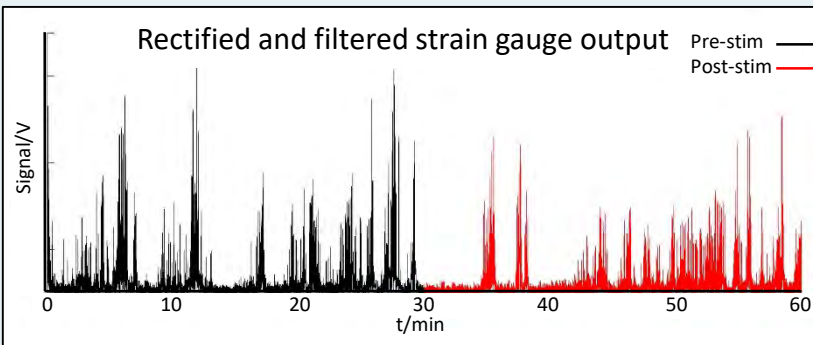
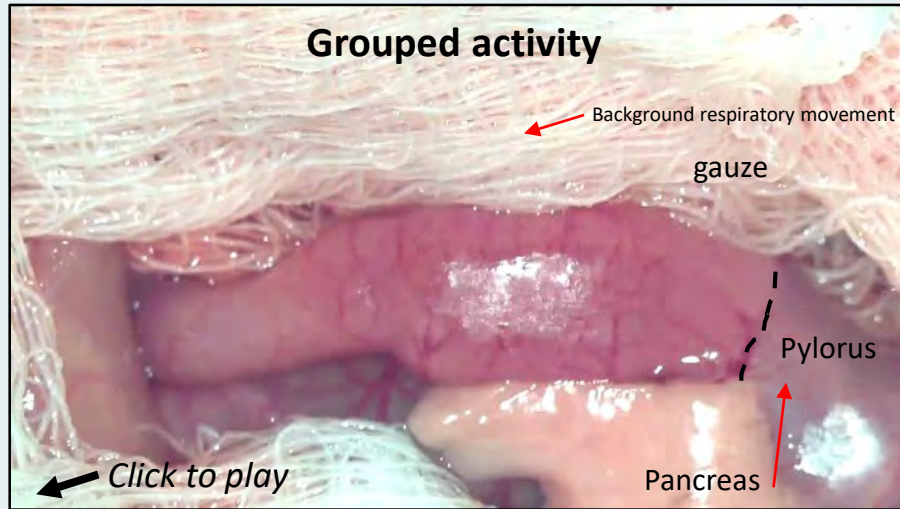
Stimulation



Visual observation
Strain gauge quantification

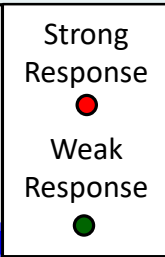
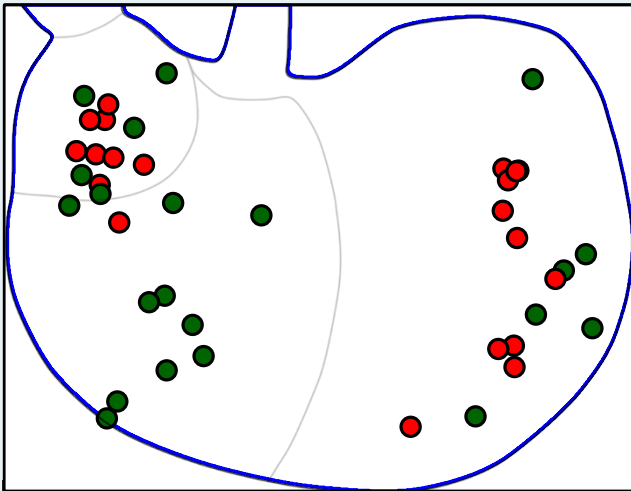


Grouped activity

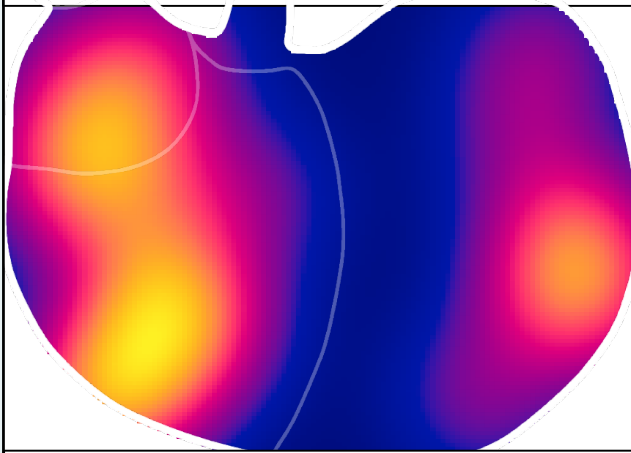




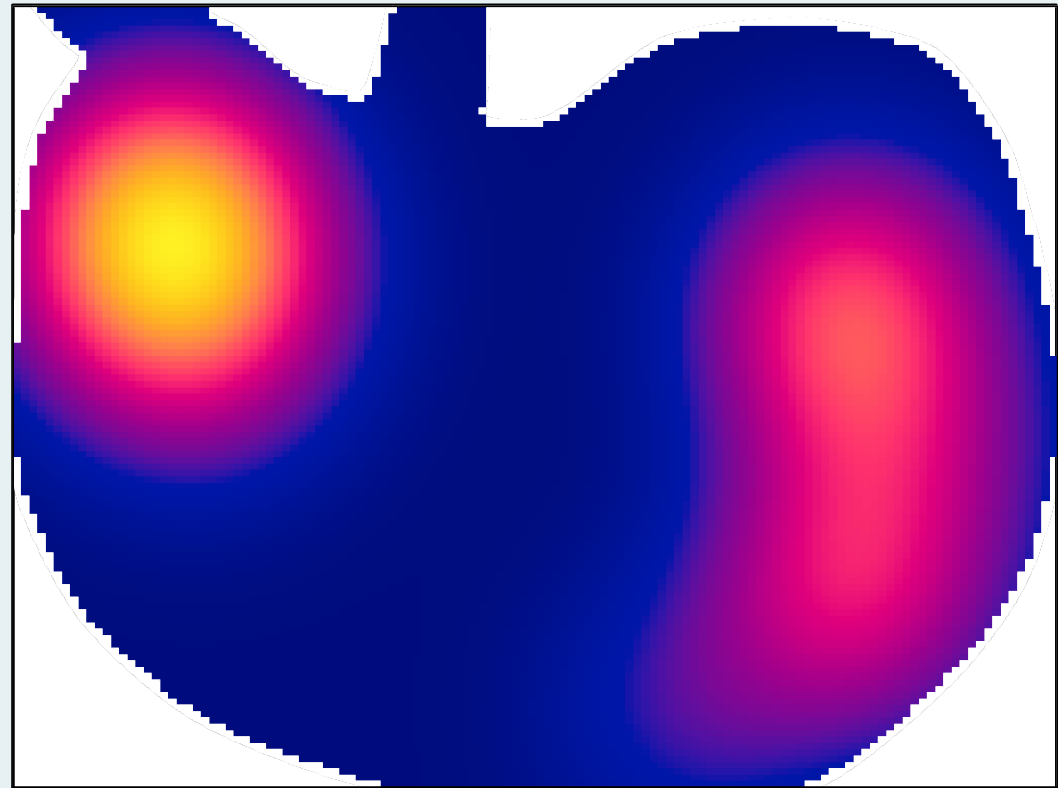
DUODENAL MOTILITY RESPONSE DEPENDS ON STIMULATION LOCATION



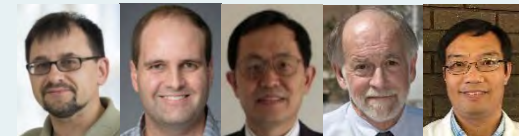
Distribution of stimulation locations to date



Distribution of weak response results



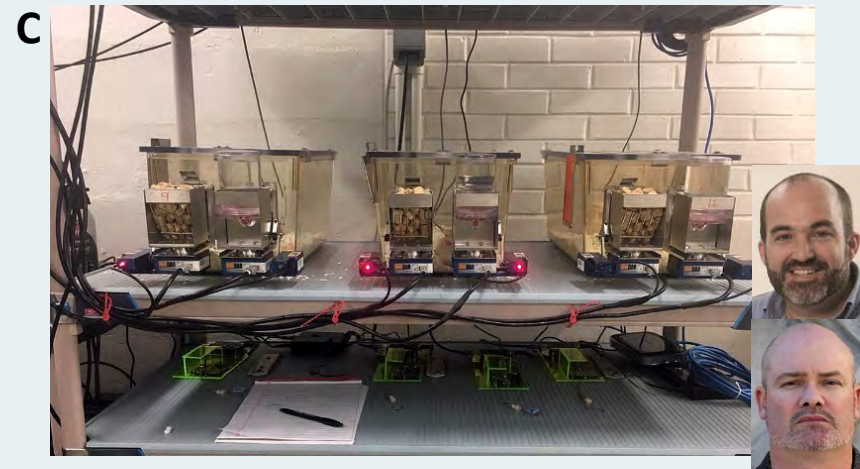
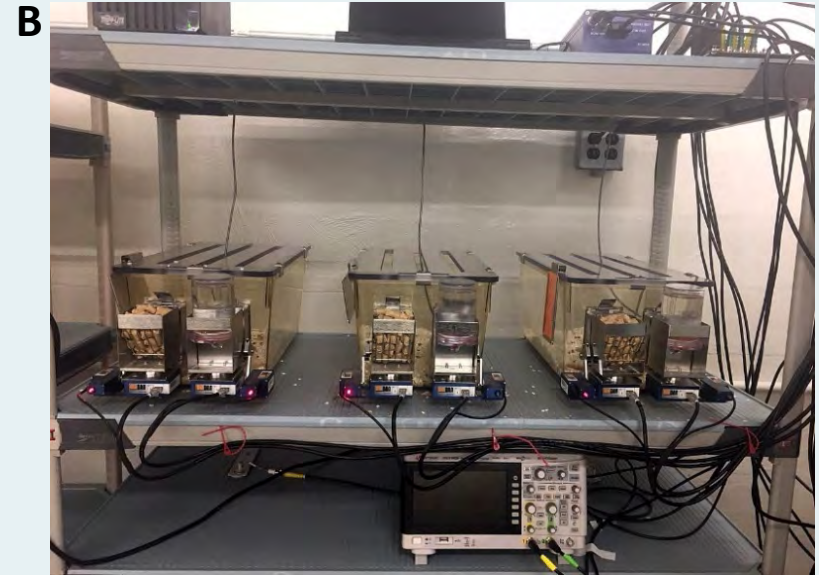
Distribution of strong response results





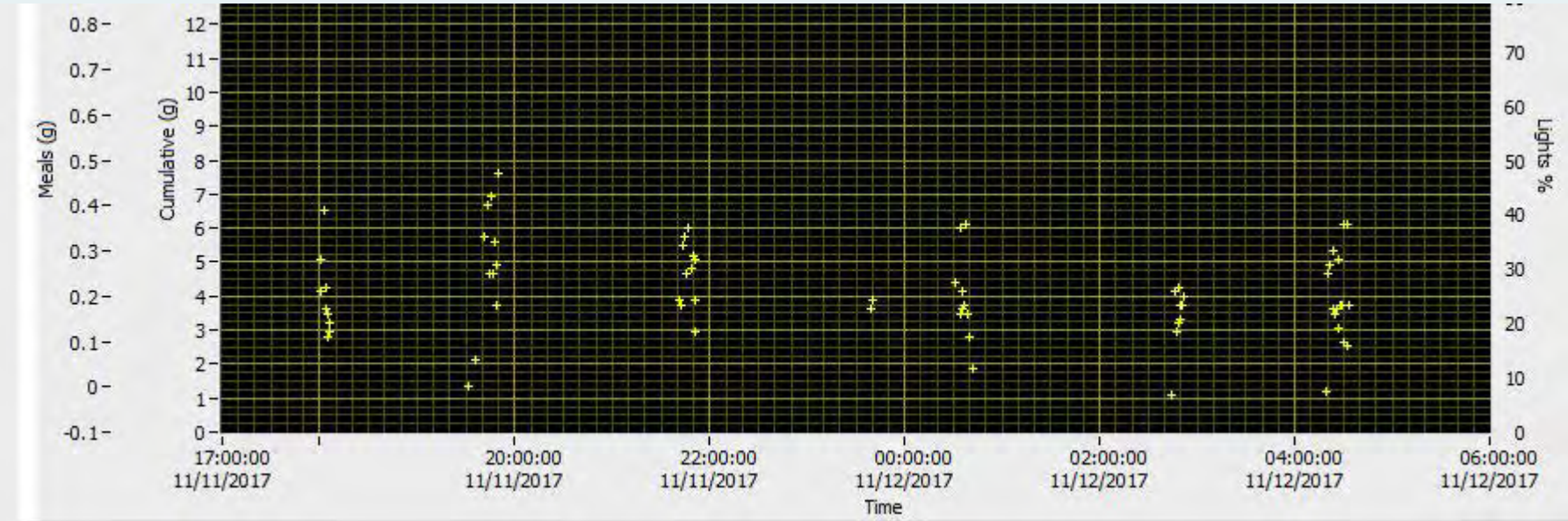
ONGOING CHRONIC FEEDING STUDY (PHILLIPS)

- Twelve rats with implanted improved patch electrodes are currently housed in home cages outfitted with BioDAQ feeders; Panel A.
- All 12 rats are tethered to overhead commutators and are receiving 12-hours of stimulation (6 pm to 6 am) using either a PlexStim electrical stimulator controlled by PlexStim software (Plexon Systems) or Bionode stimulators; Panels B and C, respectively.
- All 12 rats are habituated to the feeding system, behavioral paradigm, and stimulation protocol as validated by stable nightly food and water intake.





MICROSTRUCTURAL ANALYSIS OF FOOD INTAKE (PHILLIPS)



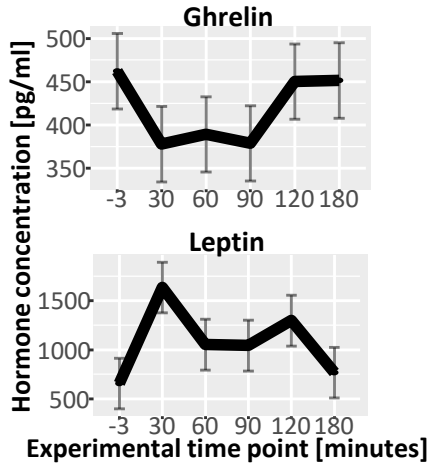
- Size of a Meal = **Satiation** 2.21 grams
- Time Between Meals = **Satiety** 78 minutes
- Number of Meals 7 meals
- Total Daily Intake 15.47 grams



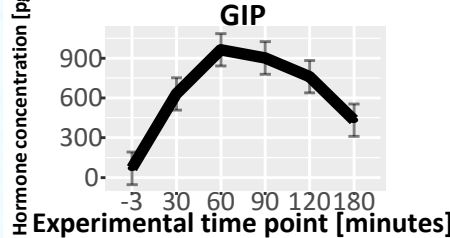


FEEDING EXPERIMENT

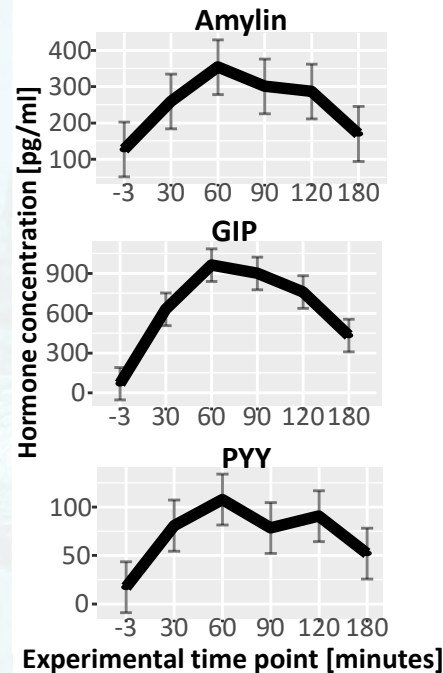
Stomach Hormones



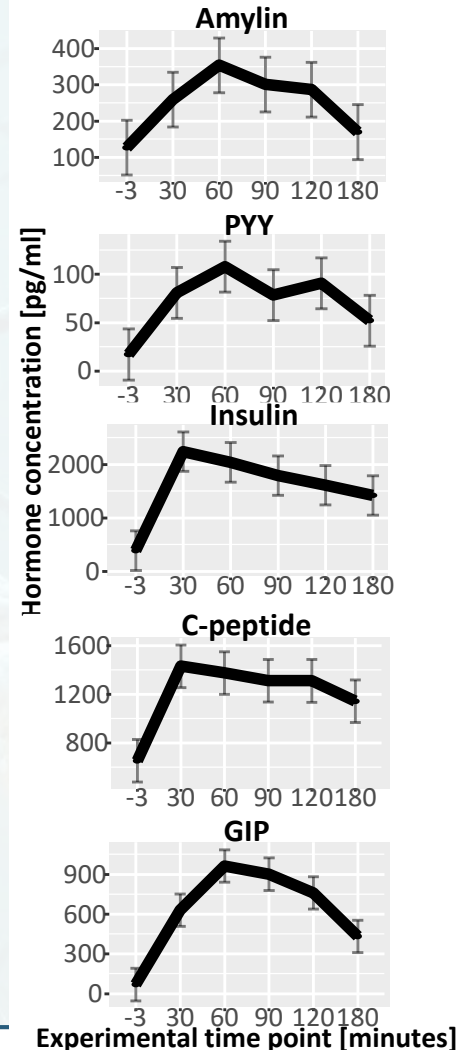
Proximal Duodenal Hormones



Inhibiting Gastric Emptying



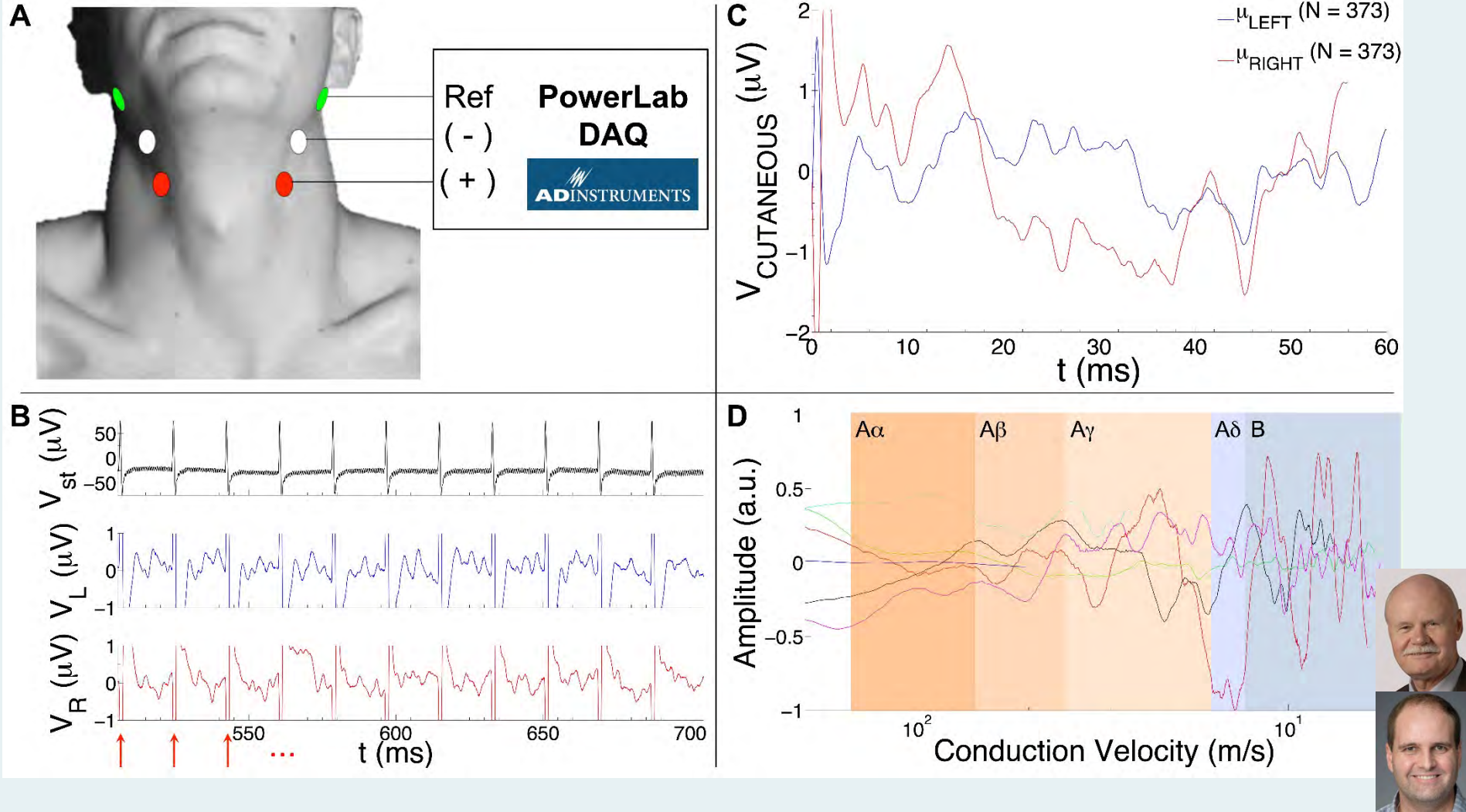
Pancreas / Carbohydrate Homeostasis



- As illustrated by the pattern seen in the accompanying graphs, a small high-carbohydrate “meal” elicits an apparent transient drop in gastric ghrelin release and a short spike in gastric release of leptin. As the meal reaches the duodenum, GIP release is triggered. As absorption of the carbohydrate load progresses, a multifactorial battery of blood glucose regulatory adjustments, including the release of insulin and C-peptide in the parallel and proportionate patterns expected, as well as the release of amylin and PYY in addition to GIP, each of which potentiates pancreatic insulinogenic control of carbohydrate and simultaneously delays further gastric emptying.



SUMMARY OF VAGAL SIGNAL PROCESSING AND FEATURE IDENTIFICATION

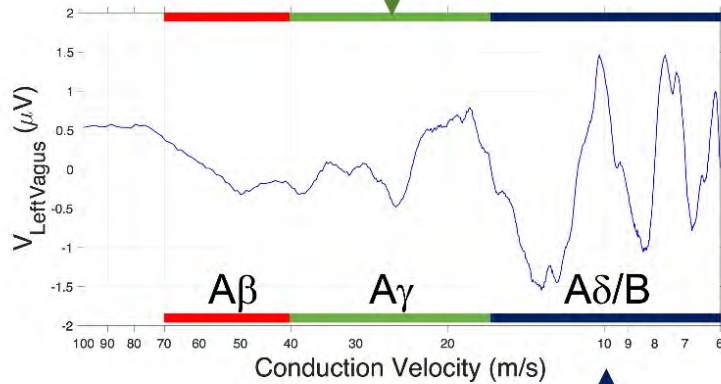




PRIMARY FINDINGS OF OUR YEAR 1 OBSERVATIONAL STUDY

Left vagal Ag fiber volley:

- Predicts reduced nausea, vomiting, early satiety and bloating ($p < 0.05$)
- Predicts reduced epigastric pain, epigastric burn, cardiac pain and cardiac burn ($p < 0.01$)

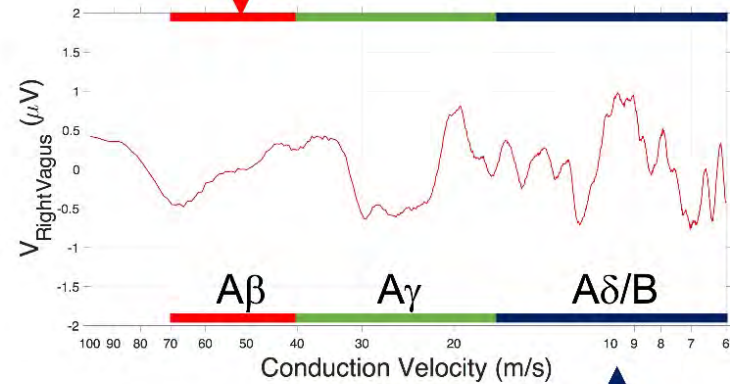


Left vagal Ad/B fiber volley:

- Predicts reduced fullness ($p < 0.05$)

Right vagal Ab fiber volley:

- Predicts reduced epigastric pain severity and cardiac burn ($p < 0.05$)
- Predicts reduced epigastric pain frequency ($p < 0.01$)



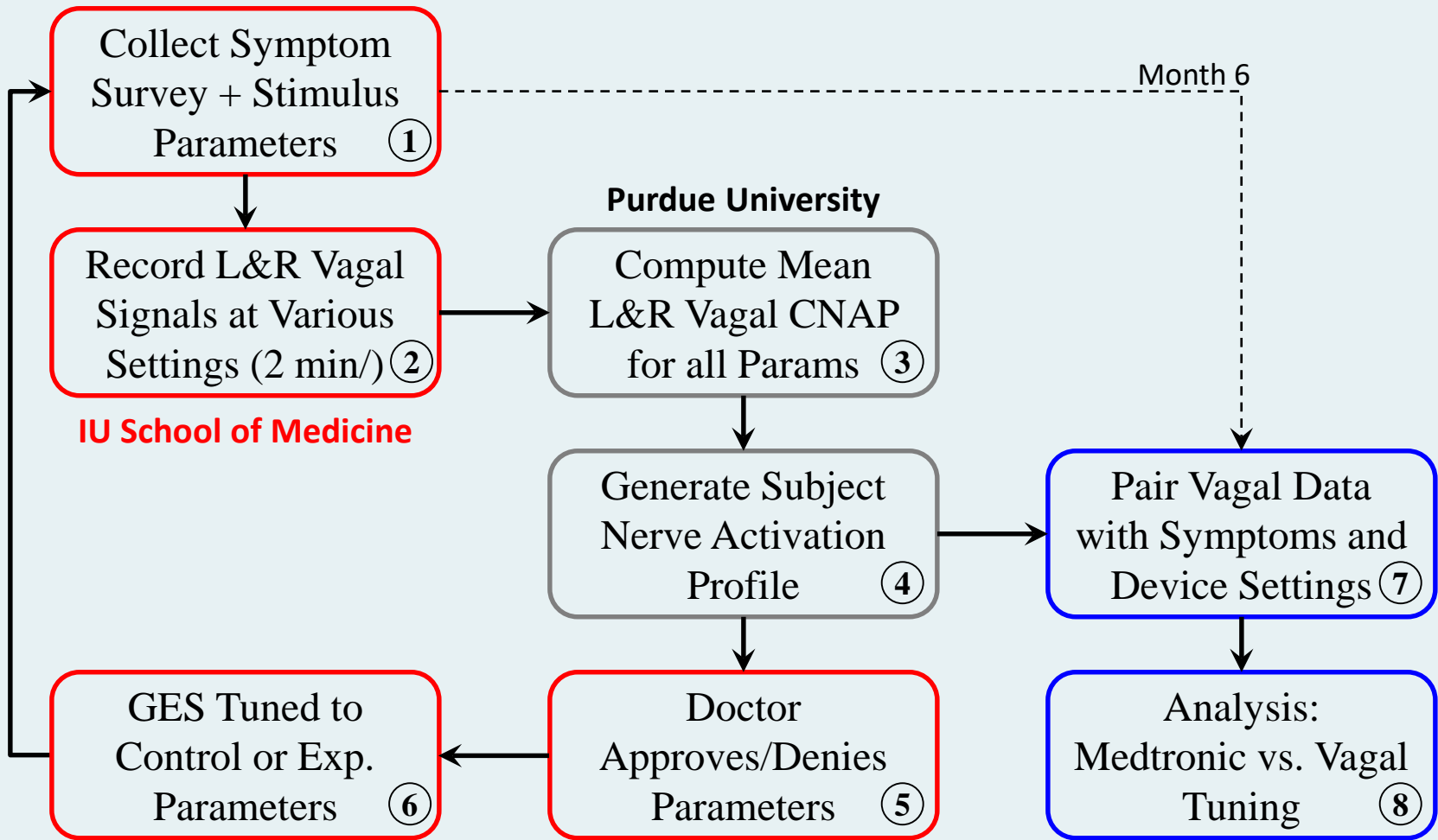
Right vagal Ad/B fiber volley:

- Predicts reduced vomiting frequency, early satiety severity, epigastric burn severity, cardiac burn and anxiety ($p < 0.05$)



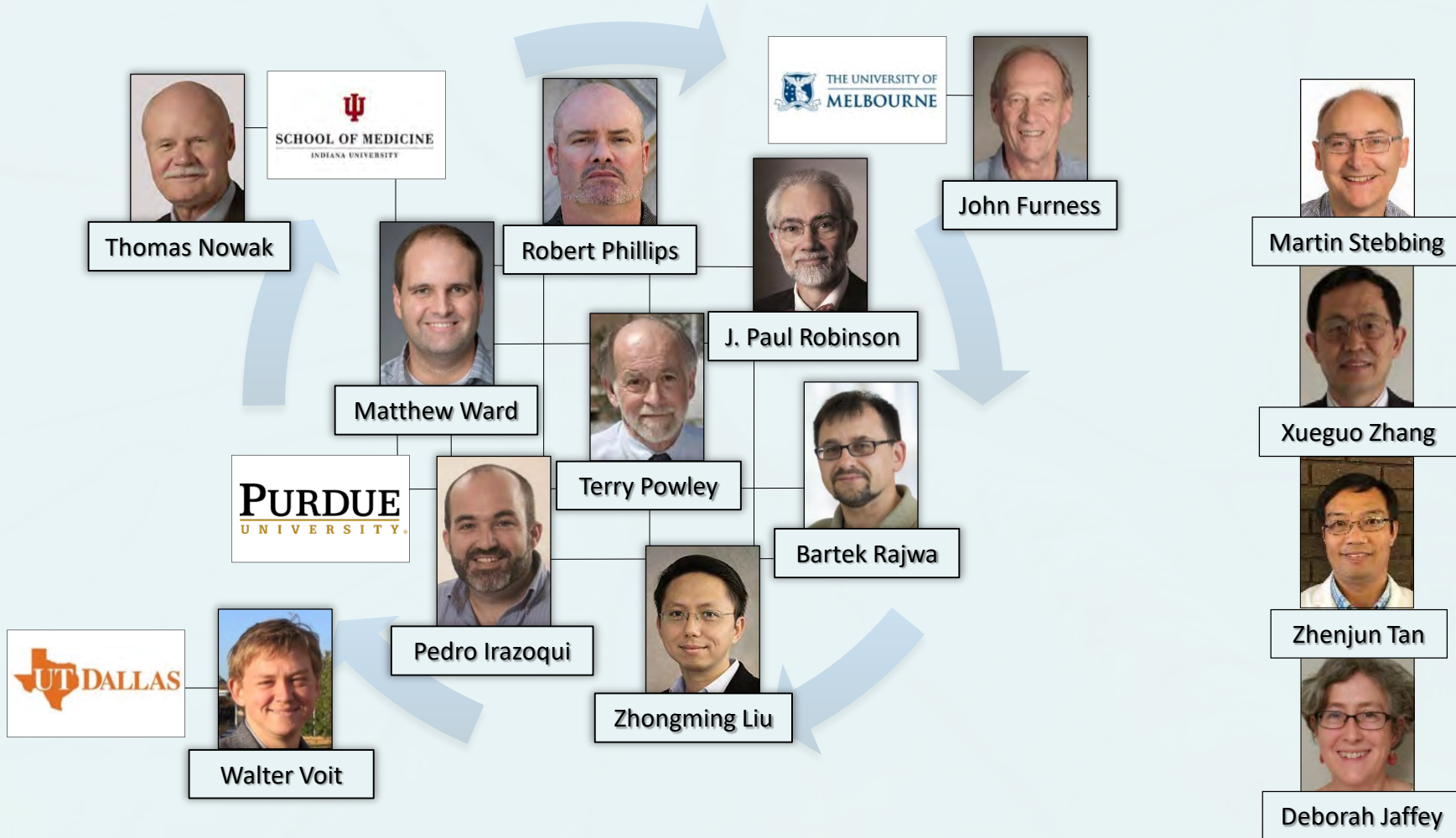


METHODS SUMMARY: PROSPECTIVE STUDY

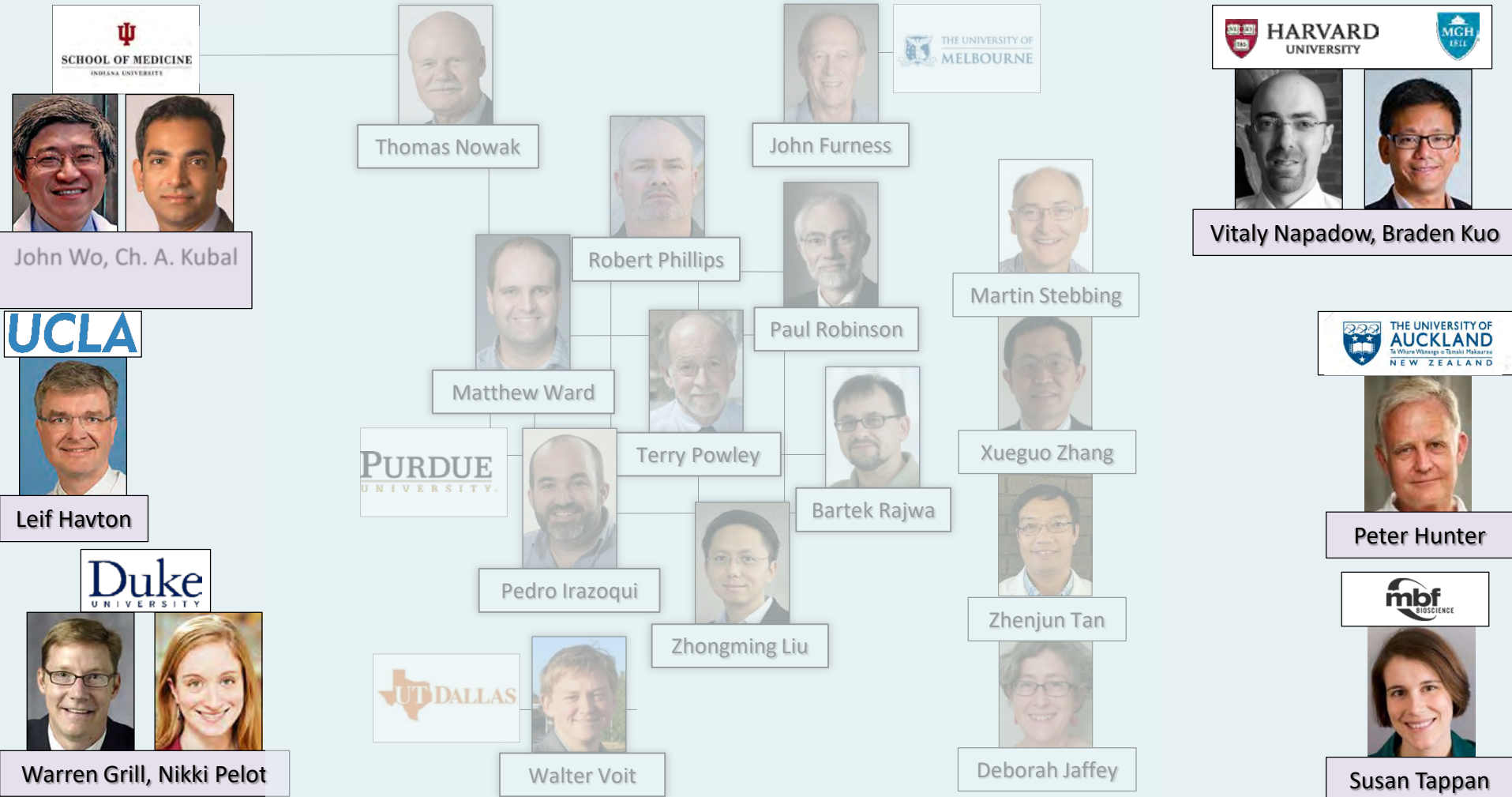




INTERDISCIPLINARY SYNERGY

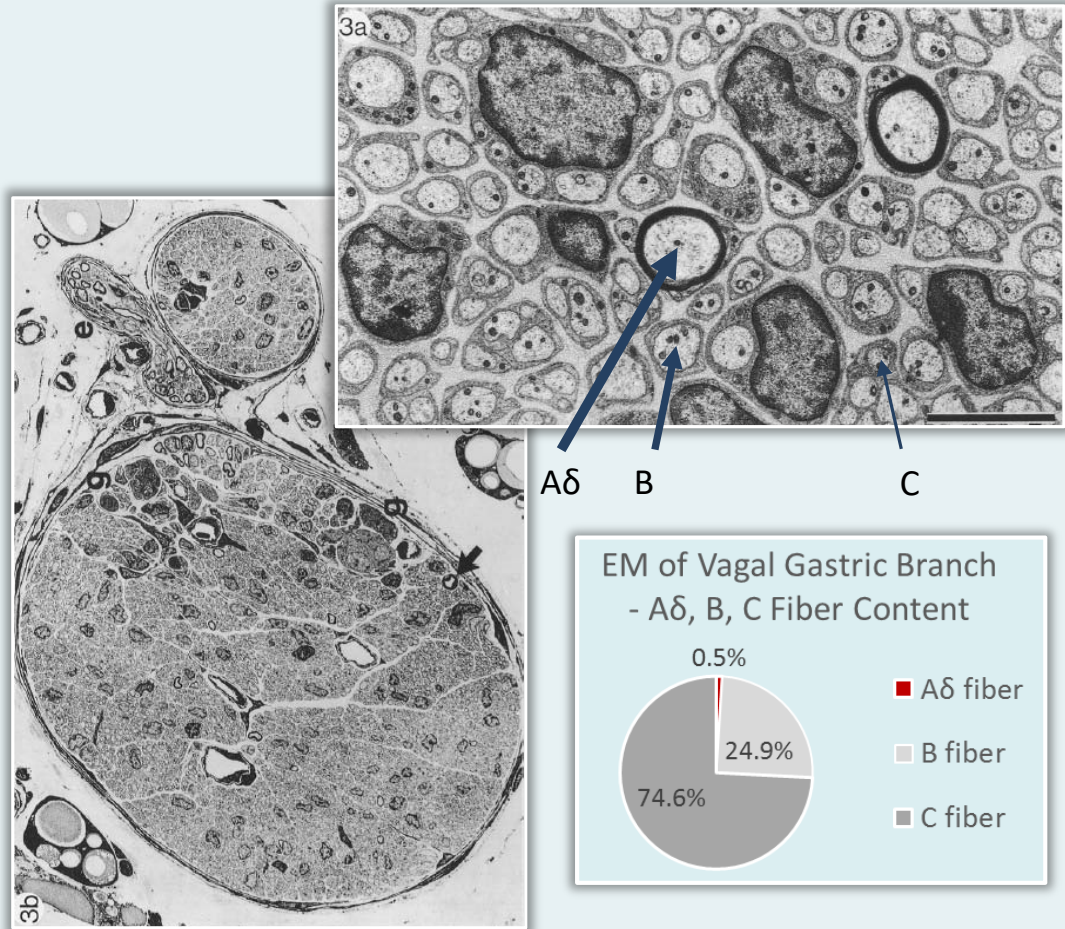
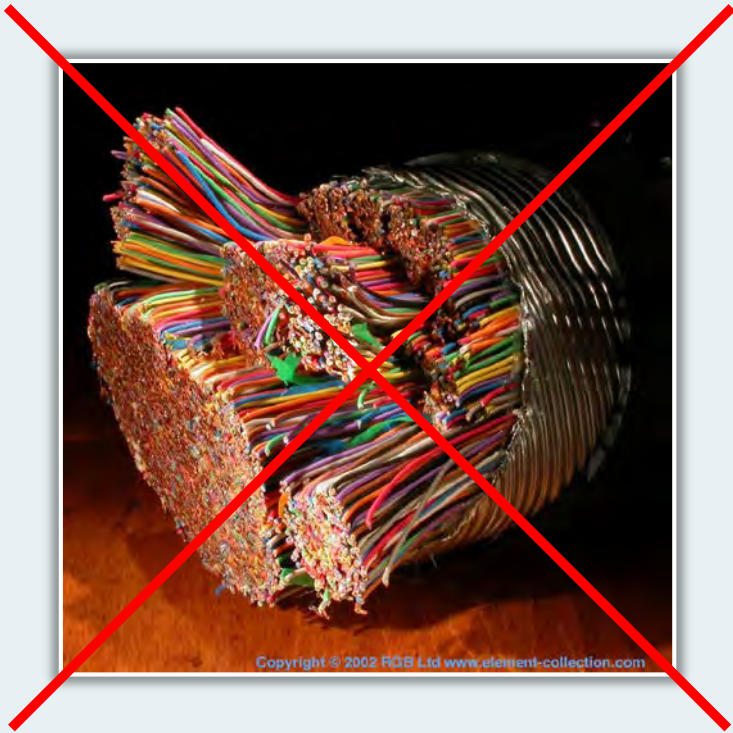


BEGINNING COLLABORATIVE EXTENSIONS





1ST GENERATION'S CABLE MODEL vs. REALITY



Precht and Powley, Anat. Em. 1990



PERFORMANCE ASSESSMENT: MEASURED VS. MODELED CNAP FROM VNS

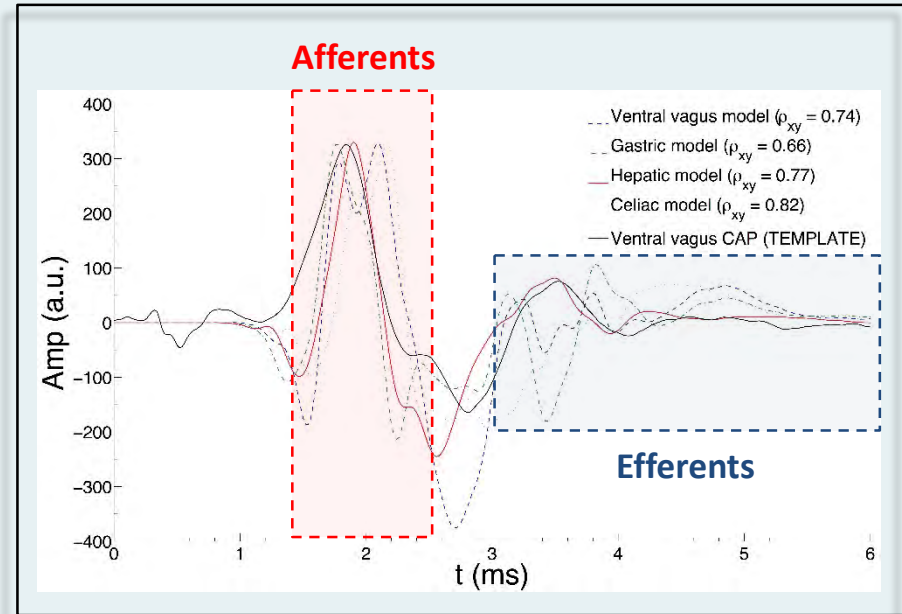
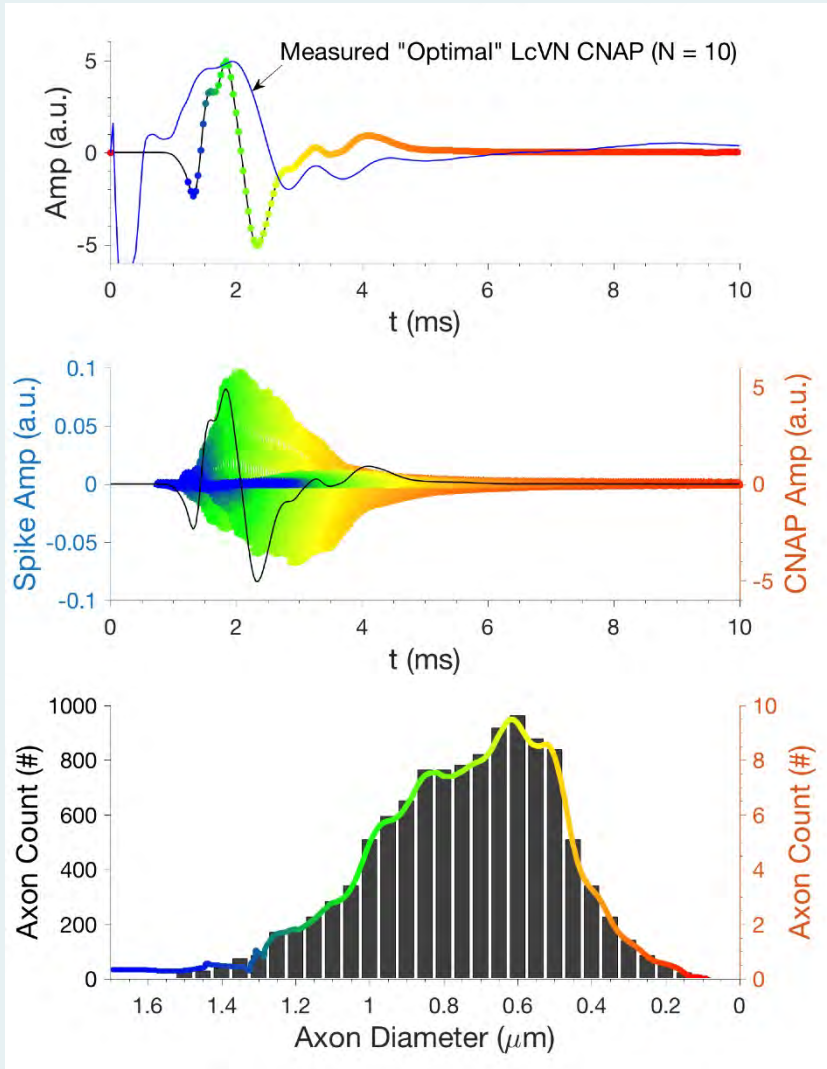
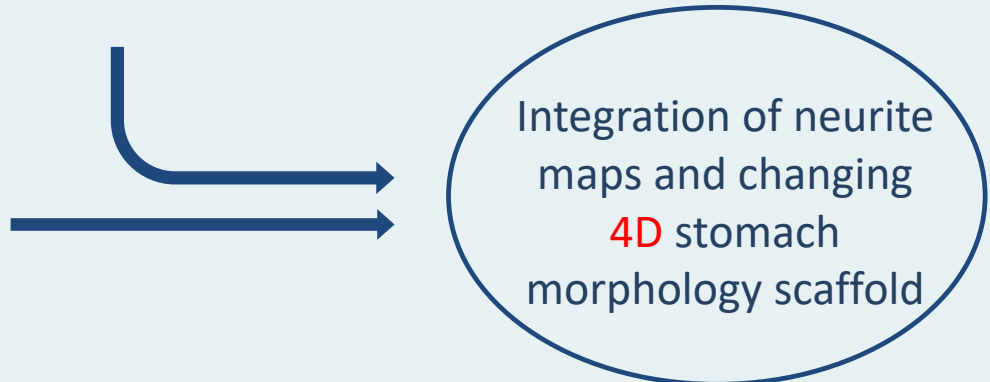
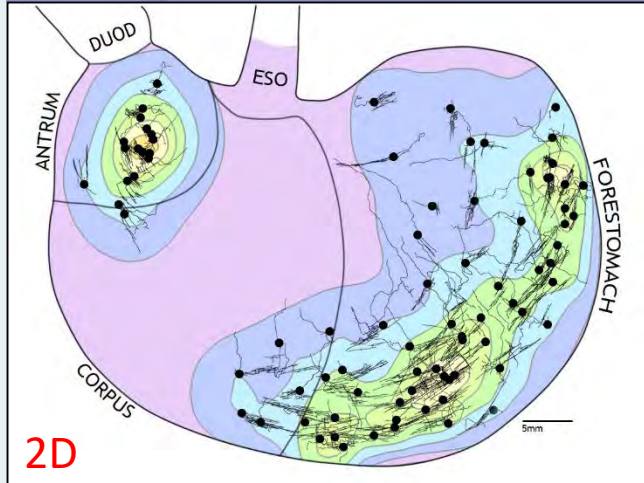
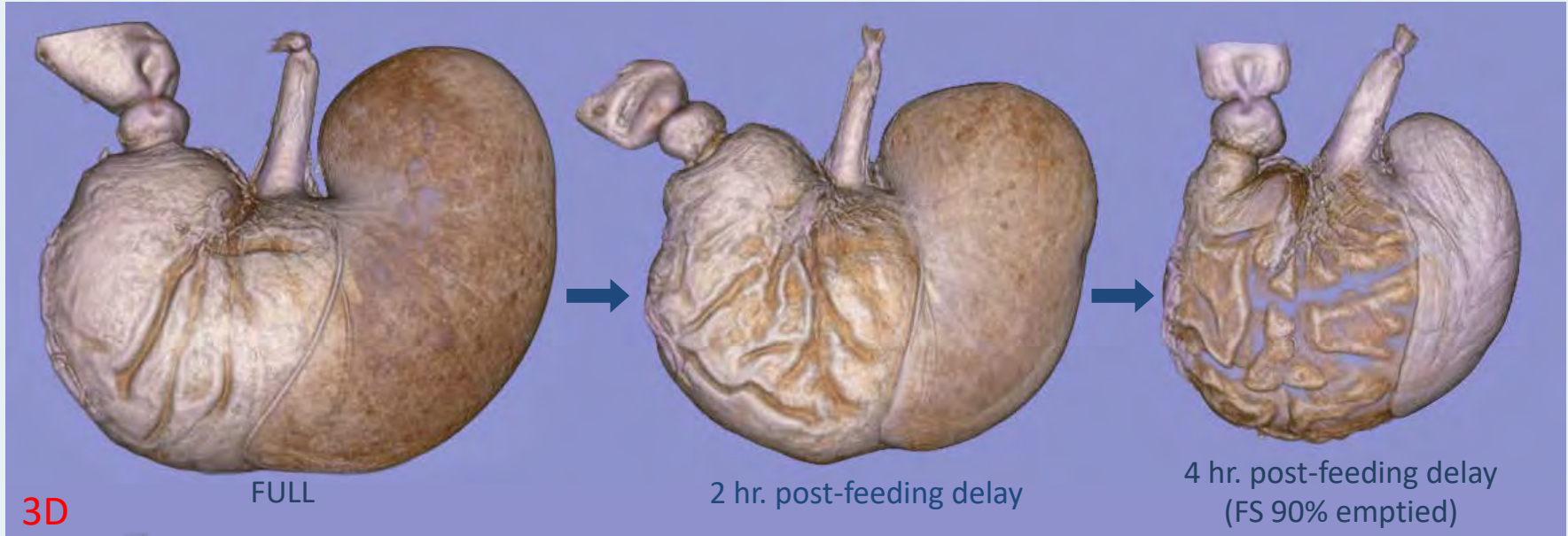


Fig. 4. Quantitative comparison of modeled maximal CNAP response from the ventral vagal trunk and branches to a measured CNAP response from the cervical vagus nerve in rat (8.0 mm conduction distance; 1.0 mm electrode spacing).

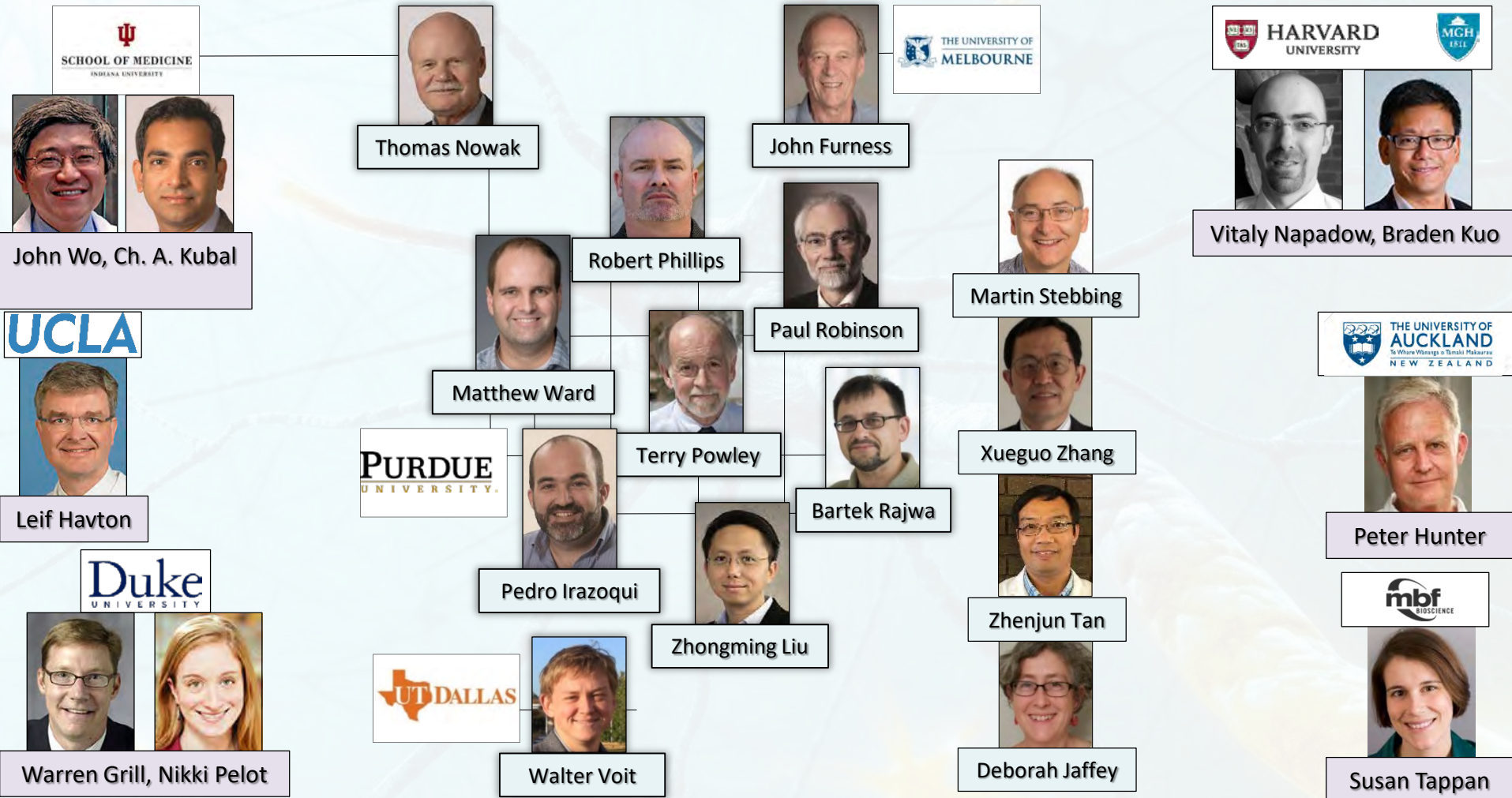




MicroCT CHARACTERIZATION OF MEAL EMPTYING



BEGINNING COLLABORATIVE EXTENSIONS





what

where

how

If we don't know
what, where, how
to stimulate,
*we don't know what
we are doing.*