

Translational Blind Spots in Hemocompatibility Assessment of Intravascular Devices

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Introduction

To assess hemocompatibility and thrombotic risk of intravascular devices, short-term *in vitro* blood flow loop assays are widely used. These assays are also commonly utilized to support preclinical performance assessments¹⁻². However, the ability of these models to predict chronic *in vivo* outcomes remains limited³⁻⁴. This study evaluates the translational relevance of a commonly used blood flow loop model by directly comparing *in vitro* findings with outcomes from a long-term clinically simulated large animal implantation study.

Methods

Peripherally Inserted Central Catheters (PICCs) with **anti-adherent** (anti-biofouling) or **chlorhexidine-impregnation** (antimicrobial) technology were evaluated against Plain PICCs (Control) using the following experimental set-up:

In Vitro Blood Flow Loop

- Devices were plasma pre-conditioned (14 or 30 days)
- Tested in heparinized (1U/mL) bovine blood + ¹¹¹In-labeled platelets
- N = 6 /device/timepoint
- Blood circulation for 1–2 hours at 200mL/min
- Gross thrombus photographs
- Thrombus quantification by gamma counting

In Vivo Clinically Simulated Ovine Model

- Jugular vein implantation for 14 or 30 days
- N = 3/device/timepoint
- Explanted and assessed for thrombus and vein pathology (qualitative + quantitative)

Limitations & Disclosure

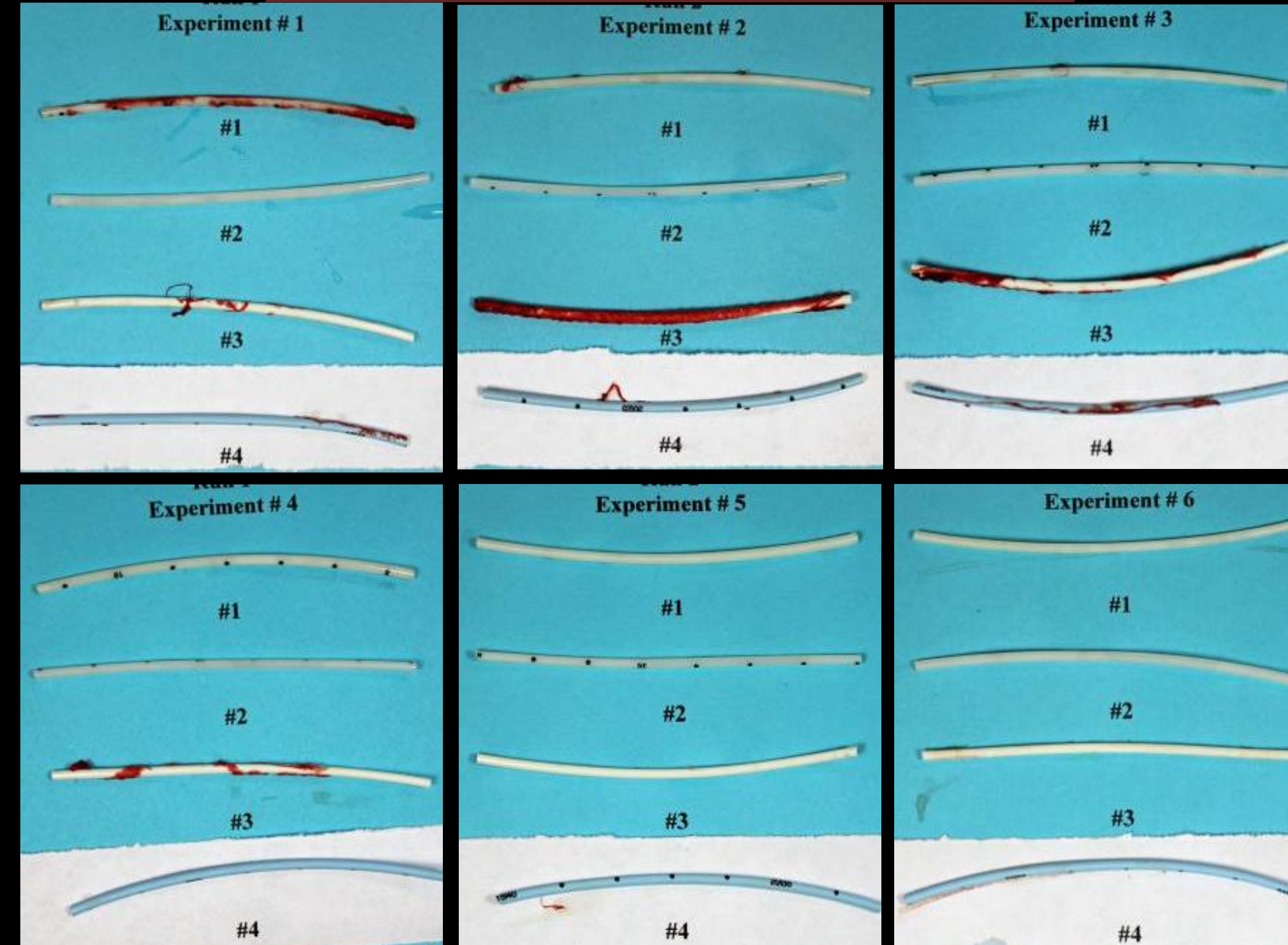
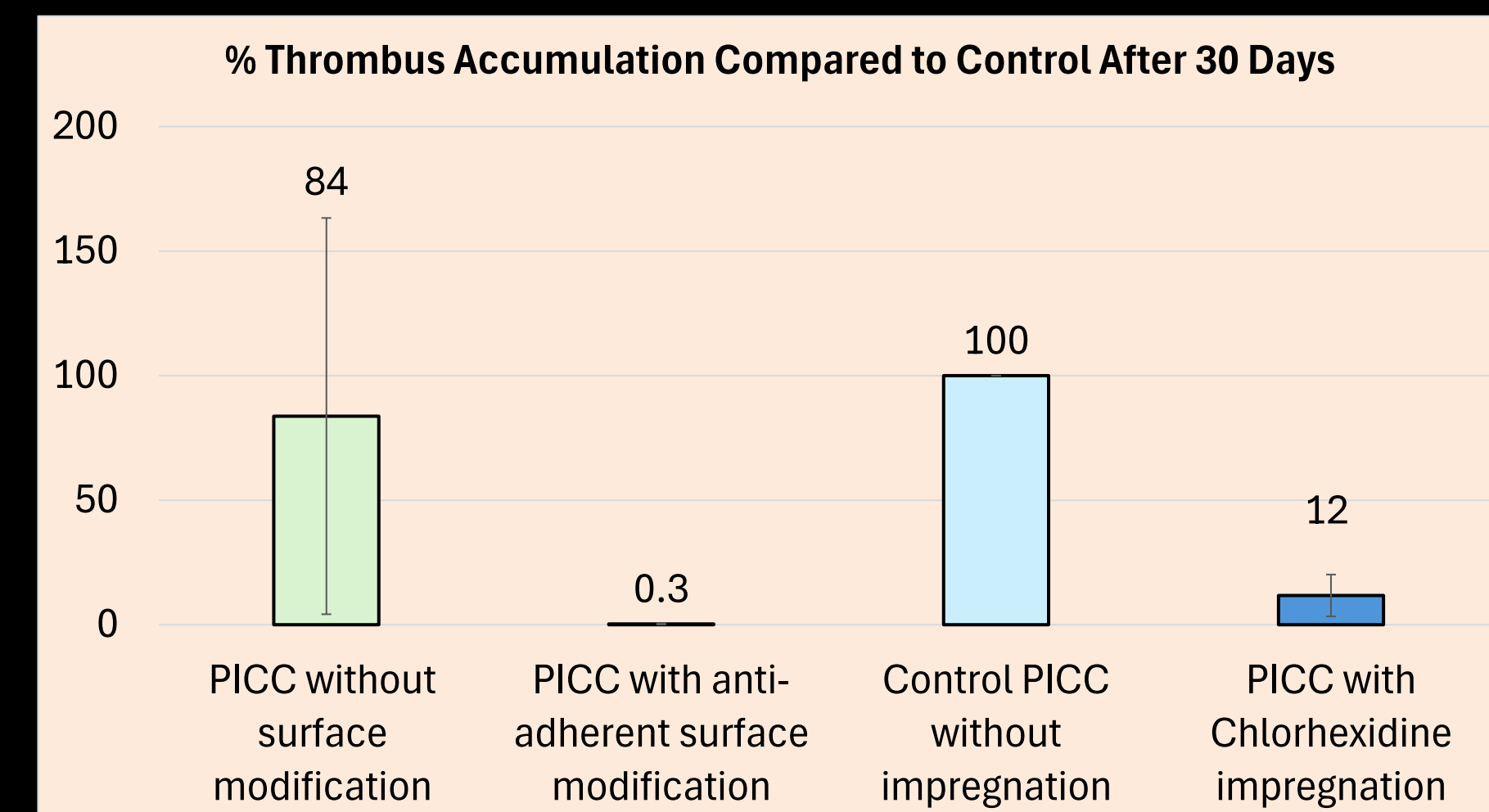
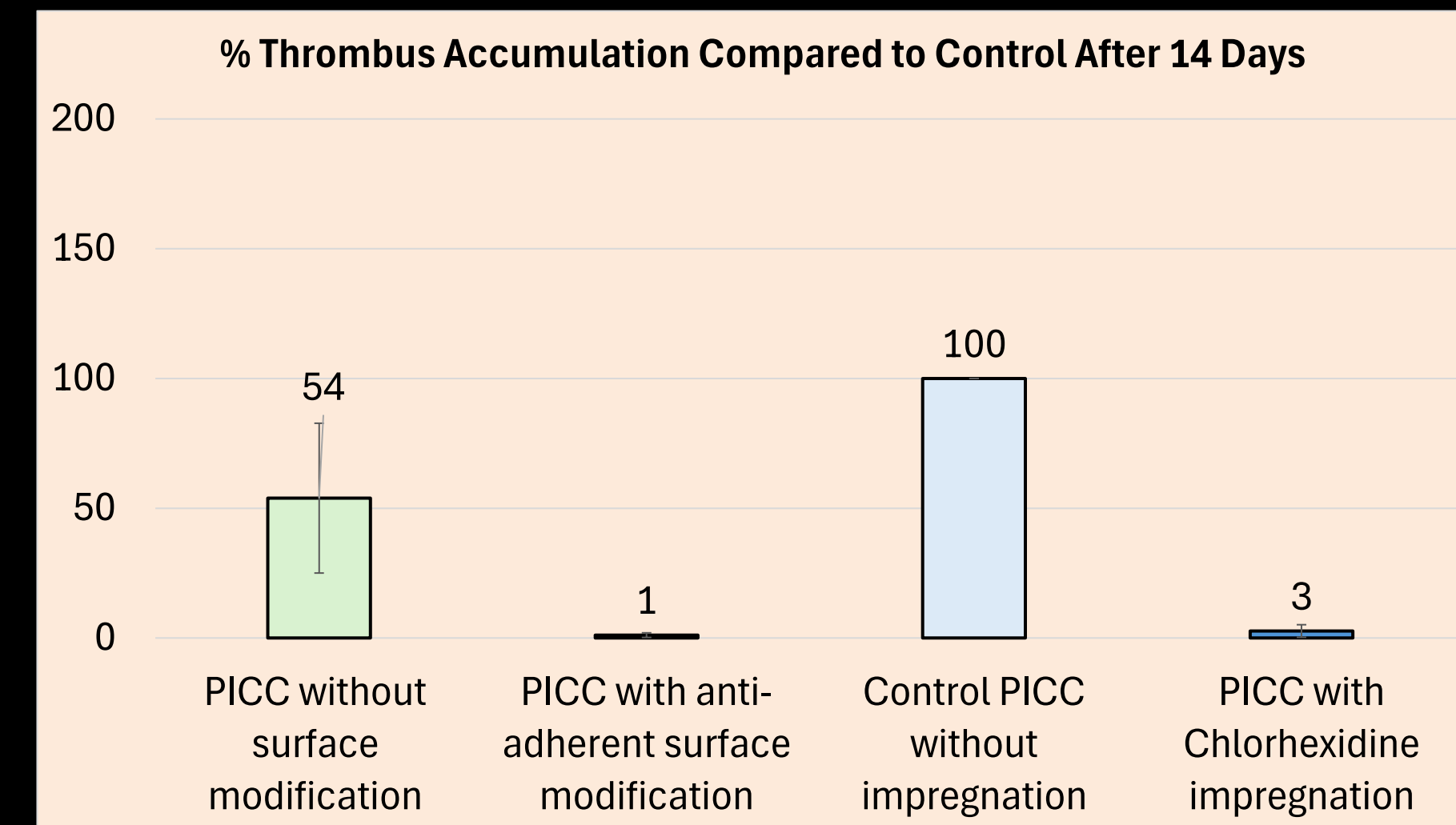
- *In vitro* assay and *in vivo* sheep model results may not reflect clinical outcomes.
- Chlorhexidine-based catheters are manufactured by Teleflex.
- Anti-adherent PICC incorporated a novel technology investigated by Teleflex.
- Author is a Teleflex employee; Study funded by Teleflex; data on file.

References

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4. Sylvia CJ Jr, Wagel MA, Giare-Patel K, Spangler TA, Breznock EM, Gupta N. Chlorhexidine-coated peripherally inserted central catheters reduce fibroblastic sleeve formation in an in vivo ovine model. J Vasc Access. 2018 Nov;19(6):644-650.

Hemocompatibility in an *In Vitro* Blood Flow Loop

Thrombus formation after Day 30



#1 – PICC without surface modification

#2 – PICC with anti-adherent surface modification

#3 – PICC without impregnation (Control)

#4 – PICC with Chlorhexidine impregnation

Results

- No significant difference in thrombus formation was observed between Anti-adherent and Chlorhexidine PICCs after 30-day simulated use in the *in vitro* blood flow loop model.
- In contrast, in the clinically simulated ovine model, clear differentiation between groups emerged:
 - Anti-adherent PICCs showed increased thrombus formation vs. Control (148% weight; 117% length) at 30 days.
 - Chlorhexidine PICCs demonstrated reduced thrombus formation vs. Control (34% weight; 36% length) at 30 days.

Conclusions

- The study demonstrated a clear divergence between *in vitro* and chronic *in vivo* outcomes.
- While *in vitro* testing showed no differentiation, the ovine model revealed substantial technology-dependent differences in thrombus formation.
- Anti-adherent surface modification alone did not translate to improved *in vivo* thromboresistance.
- In contrast, chlorhexidine-impregnated PICCs demonstrated sustained thrombus reduction under chronic *in vivo* conditions.
- These findings highlight the translational limitations of short-term blood loop models, which lack endothelial interactions, fibrin sheath development, inflammatory response, and physiologic flow dynamics.
- Integrated, longer-term, biologically relevant models may better predict clinical vascular device performance.

Hemocompatibility in an *In Vivo* Clinically Simulated Ovine Model

Thrombus formation after Day 30

Plain PICC



Anti-adherent PICC



Chlorhexidine PICC

