# INFLAMMATION, CARCINOGENICITY, & HYPERSENSITIVITY

#### Introduction

□ Biomaterials are generally not rejected when placed inside the human body.

□ Every implanted biomaterial stimulates a tissue response.

□ Our body's response is well known; how biomaterials affect that response is not.

## Carcinogenicity

- Sarcomas due to implanted biomaterials are seen in a number of animal models but are rare in humans.
- □ Carcinogenicity testing is defined as the means to determine the tumor-causing potential of a biomaterial by either a single or multiple exposures over the total lifespan of the test animal.
- □ A number of factors may influence the potential for cancerous development: size, shape, chemical makeup, and surface finish.

#### Granulation Tissue

- □ Granulation tissue defines inflammation during healing and four components have been identified: active macrophage cells, neutrophil activity, angiogenesis, and fibroblast cell activity.
- □ An implant is typically chosen because of its stable, non-reactive nature, but it will still disrupt the development/progression of the granulation tissue.

## Repair

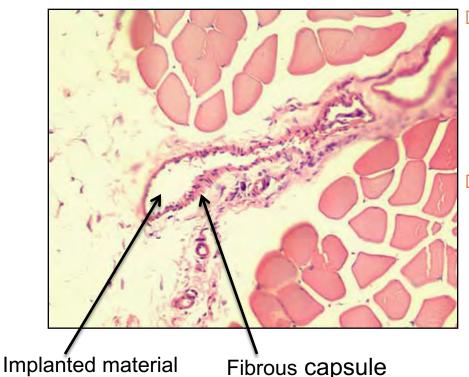
- □ Small injuries typically heal by the regeneration of normal tissue; however, the more common, sever injury will lead to the formation of scar tissue as well.
- □ Implanted biomaterials may induce fibrous encapsulation formed by fibroblast cells and collagen.

### Infection

- □ A ten percent infection rate is seen in patients with implanted biomaterial, and nosocomial infection rates are much higher with an added, serious risk to the patient.
- □ It is also true that the simple presence of an implanted material can heighten the virulence of an invading micro-organism.

## Soft and Hard Tissue Responses

□ An implant provides a physical barrier to the wound healing process and allows for protein deposits and eventual fibrous encapsulation.



- □ An implant put into bone will stimulate a wound healing response like that seen after a fracture or other bone injury.
  - Hard tissue healing timetable: 6 weeks, woven callous; 18 weeks, lamellar compaction and interface remodeling; and 54 weeks, mature compact bone.