Intra-maxillary Drug delivery and Bio-sensing via Dental Implant and its considerations

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Table of Content

- Motivation: Current situations
- **Design:** (1) Drug delivery module (2) Bio-sensing module
- Experimental results:
 - (1) Glucose monitoring
 - (2) Molecular pumping and delivery
 - (3) Canine model for insulin therapy
- Discussions & Special considerations:
 - (1) Engineering
 - (2) Medical
 - (3) Dental

Current situation

- Geriatrics: The aging population as people > 65 years in Taiwan has • reached to 10.7% in 2010, and will approach to 20.1% in 2025
- Geriatrics: (1) Dentistry, (2) Critical + Chronic care
- Medical monitoring and therapeutics: •

(1) Non-invasive: BP, HR, RR monitoring + Oral tab
 (2) Invasive ---> (A) Blood monitoring + (B) Injections into blood

- **Diabetes Mellitus (DM):** ۲
 - (1) Triad: DM + CAD + Renal disease

(2) MDII: (4 One-touch blood sugar + 4 insulin injections) / Day

IVII: (**12** One-touch blood sugar + **12** insulin injections) / Day

Pain origins from invasive procedures: •

> Blood (Macromolecule: cannot pass through GI tract) Drug -(1) Mucosal + (2) dermal barriers Proteins, functional polymers, etc.

Current situation

- Geriatrics: The aging population as people > 65 years in Taiwan has reached to 10.7% in 2010, and will approach to 20.1% in 2025
- **Geriatrics: (1)** Dentistry, **(2)** Critical + Chronic care
- Medical managements:

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(A) Blood monitoring + (B) Injections into blood

- Diabetes Mellitus (DM):
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• Pain origins from invasive procedures:

Drug \longrightarrow Blood (1) <u>Mucosal</u> + (2) <u>dermal barriers</u>

Thinking about molecular delivery in dentistry ?

Intra-bony molecular slowly releasing: calcium hydroxide/iodoform paste (Vitapex [®]) Application



2012. 10. 22 #46: Deep caries s/p reversible pulpitis IRM indirect capping

2015. 01. 16 #46: Apical lesion s/p pulpitis; Pus (+) Endodontic treatment



2015. 07. 16 #46: Apical lesion s/p pulpitis; Pus (-) Calcium hydroxide RCT

2016. 01. 26 #46: Apical lesion s/p pulpitis; Pus (-) New bone formation

<u>38 Y/O male,</u> Personal History: Smoking(+), Past history: Nil

Intra-bony molecular slowly releasing: calcium hydroxide/iodoform paste (Vitapex [®]) Application



2012. 10. 22 #46: Deep caries s/p reversible pulpitis IRM indirect capping

2015. 01. 16 #46: Apical lesion s/p pulpitis; Pus (+) Root canal treatment



2015. 07. 16 #46: Apical lesion s/p pulpitis; Pus (-) Calcium hydroxide RCT **2016. 01. 26** #46: Apical lesion s/p pulpitis; Pus (-) New bone formation

Notice: Periodontal ligament (PDL) exists, Patient felt mild pain as paste delivery

Hint: For dentists, intra-bony molecular delivery is more than possible, or even familiar

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Dental implant & Pain origins



- **3. Bicon[®] Implant system:** Absence of screw threads between:

(A) prosthetic abutment (B) Implant fixture

4. Implant supported (1) Drug delivery module, and (2) Biosensor module



(1) Drug delivery module



Design

Piezoelectric micro-pump design & Bluetooth 4.0





(2) Biosensor module



Biosensor placed inside the Prosthetic abutment, including:

- (1) Sensor IC
- (2) Bluetooth module
- (3) Power supply
- (4) Extend electrodes

Then the set of the electrodes Extent outside the fixture by the canals, including:

- (1) Working electrode
- (2) Counter electrode
- (3) Reference electrode

Glucose oxidase (GOD) coating & circuit design

250

200

150

100

50

→ D-Gluconic acid + H₂O₂

GOD coated over working electrode for blood sugar sensing.



The current may change Corresponding to the Glucose concentrations.

Bluetooth signal 250 200 150 150 100 50 0 1 4 7 1013161922252831343740434649525558 (A) Water (B) 400 mg/dl glucose solution

The current changes are recorded By the bluetooth 4.0 module. And then they are transferred to outside portable device, such as computers or cell phones.

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Drug delivery exp.



(A) Mechanical drug delivery module

(B) Piezoelectric drug delivery module

Bio-sensing exp.



The cyclic voltammetry by different glucose concentration, sweeping From 0.2 to -0.6 V:

- (A) From 50 mg/dL to 500 mg/dL.
- (B) Peak value recorded and shows highly linearity, with 4 mg/dL increasing will elevate 1 μA of the current.

Preliminary canine study



Canine model: After 1 month of osseointegration, 2nd stage surgical exposure arranged to link the drug delivery and biosensing module. The blood sugar is monitored over intra-oral biosensor and lower limb calibration.



Preliminary canine study

Initially 5 unit of the NPH (rapid onset insulin) is performed. Then the blood sugar is monitoring every 5 minute from both intra-oral biosensing module and anterior lower Limbs for calibrations. Blood sugar debonding at 25th minute may be due to glucagon Releasing.

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Discussions

- Other invasive drug delivery device:
 - (1) Short-period (<2 wks): Central Venus Catheter (CVC)
 - (2) Long-term: Port-A-Catheter, dental implant supported DDS module
- <u>Advantages</u> of the implant supported DDS and biosensor module:
 - (1) Relative painless during drug delivery (vs CVP + Port-A)
 - (2) Fixed by surrounding bone, avoid from component loosening, and internal bleeding (vs Port-A)
 - (3) Non-invasive while drug reloading & module replaced (semi-implanted)
 - (4) Lead to creative drug releasing and bio-sensing therapy:
 - low volume and continuous (drug releasing + blood monitoring)
 - (5) Free from thrombolism: Surrounding bone marrow structures
- Diabetes Mellitus (DM):
 - As target disease due to frequently invasive therapy demanded.
 - (1) Biosensor: 4 mg/dL (+) lead to $1 \mu A$ increasing
 - (2) Drug releasing: **0.5 ml** contains **5000 units** insulin, meet **2 months** demands
- Myocardiac infarction (MI): CK, CKMB + troponin I continuous monitoring /5 min lasting for 1-2 months

Discussions

- Restricts and constrains in implant supported DDS and biosensor module:
 - (1) Drug delivery type, volume, and speed is restricted
 - (2) It is **limited** for patient with **frequently invasive procedure** demands
 - (3) **Dental** and **medical cooperation** is needed to ensure safety & efficiency
 - (4) Frequently dental appointments for device debridement & drug reload
- Further improvement:
 - (1) Module size & volume minimizing for practical applications
 - (2) **Enzyme polymerization** & improvement for long-term blood monitoring
 - (3) Accuracy improvement over IC design for further applications
 - (4) Safety concern: drug polymerization during releasing
 - (5) Pain evaluation experiments design



Special considerations

Engineering

- Image: Sector of the sector
- 2. Component sealing: Avoid infection status
- 3. Size minimization: CMOS + MEMS technology





Continuous macromolecular delivery Frequently blood monitoring

Geriatrics:

- (1) Neurodegenerative disorders: 1. Alzheimer's 2. Parkinson's disease
- (2) Metabolic disorder: Diabetes mellitus
- (3) Cardiovascular disease: Continuous CK + CKMB monitoring

Dental

Avoid from:

- (1) Periodontitis: Remove infective status
- (2) Excessive occlusal loading: Medical purpose
- (3) Osseointegrative destructions: Combined + selective releasing

Calcium hydroxide + iodoform

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Reference

- 1. Lu, C.C.; Li, Y.J.; Tsai, W.L.; Chang, C.K. An implantable and painless drug delivery device for long-term operation. Taiwan Patent I488620, **21**, June, **2015**.
- 2. Sandeep, K.; Joakim, L. Measuring bluetooth[®] low energy power consumption. In *Application note AN092*; Texas Instruments: Dallas, TX, USA, **2012.**
- 3. Li, D.; He, Q.; Cui, Y.; Duan, L.; Li, J. Immobilization of glucose oxidase onto nanoparticles with enhanced thermostability. *Biochem. Biophys. Res.Commun.* **2007**, *355*, 488–493.
- 4. Joseph, W. Glucose biosensors: 40 years of advances and challenges. *Electroanalysis.* **2001**, *13*, 983–988.
- 5. Laser, D. Santiago, J. A review of micropumps. *J. micromechanics and microengineering.* **2004**, 35-64.







Dialysis chamber





(2) Molecular trapping: <u>Amyloidosis</u>

