



Division of Surgical Research Annual Report 2018

Department of Surgery
University Hospital Zurich
Switzerland



University of
Zurich ^{UZH}

USZ Universitäts
Spital Zürich

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Preface

Dear Colleagues

2018 was a very eventful and productive year for the Division of Surgical Research. The number of publications increased to more than 450 and numerous symposia and courses were organized. For years, the Division for Surgical Research has grown beyond the borders of the surgical departments and has become an appealing scientific interaction platform for other research groups not only within the USZ but for the entire scientific community in Zurich and abroad.

This success would not have been possible without the highly professional and very efficient support of our core services. The histology and immunohistochemistry labs, small and large animal experimental surgery facilities, the photography/graphics services, and the MRI facility have once again supported a multitude of projects with outstanding motivation and dedication.

Special thanks go to Prof. Dr. Rolf Graf who was the Division's co-head for more than a decade and has headed the Division since 2016. With his great commitment, together with Prof. Dr. Gregor Zünd, he has shaped the Division to what is now, a leading platform for surgical research. We wish him much success and all the best in his future endeavors.

We will continue along this path offering the members of the Division a versatile platform for the continued success of our competitive research and for strengthening our established excellent reputation. In addition to the daily organizational activities, the future will bring new challenges. In particular, planning the new small animal surgical facilities in Schlieren, the new large animal facilities on Irchel campus, as well as our new laboratories on the future Berthold-Areal.

We would like to thank all members of our Division for their excellent work, for the fruitful collaboration and discussions, and the great atmosphere.



PD Dr. sc.nat.
Paolo Cinelli
Head Division of
Surgical Research



Prof. Margarete
Arras, DVM
Co-Head Division
of Surgical
Research

A handwritten signature in blue ink, appearing to read 'Paolo Cinelli'.

PD Dr. sc.nat. Paolo Cinelli
Head Division of Surgical Research

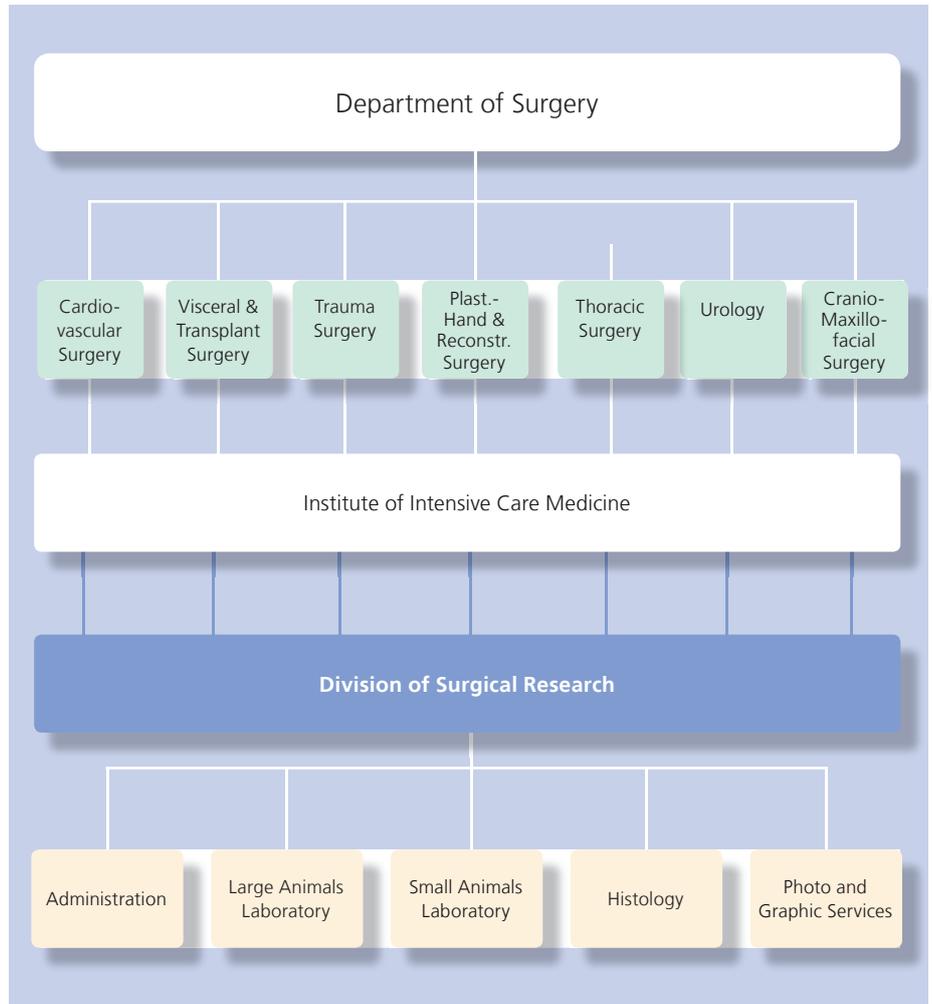
A handwritten signature in blue ink, appearing to read 'Margarete Arras'.

Prof. Margarete Arras, DVM
Co-Head Division of Surgical Research

1. Organisation

Position of the Division of Surgical Research within the Department of Surgery

		
Prof. Dr. med. Pierre-Alain Clavien, PhD, Director Clinic of Visceral & Transpl. Surgery	Prof. Dr. med. Hans-Christian Pape, Director Clinic of Trauma Surgery	Prof. Dr. med. Walter Weder, Director Clinic of Thoracic Surgery
		
Prof. Dr. med. Francesco Maisano, Director Clinic of Cardiovascular Surgery	Prof. Dr. med. Pietro Giovanoli, Director Clinic of Plastic - Hand & Reconstr. Surgery	Prof. Dr. med. Tullio Sulser, Director Clinic of Urology
		
Prof. Dr. med. dent. Martin Rucker, Director Clinic of Cranio-Maxillo-facial Surgery	Prof. Dr. med. Reto Schupbach, Head of Intensive Care Medicine	
		
PD Dr. sc. nat. Paolo Cinelli, Head Division of Surg. Research	Prof. Margarete Arras, DVM Co-Head Division of Surg. Research	
		
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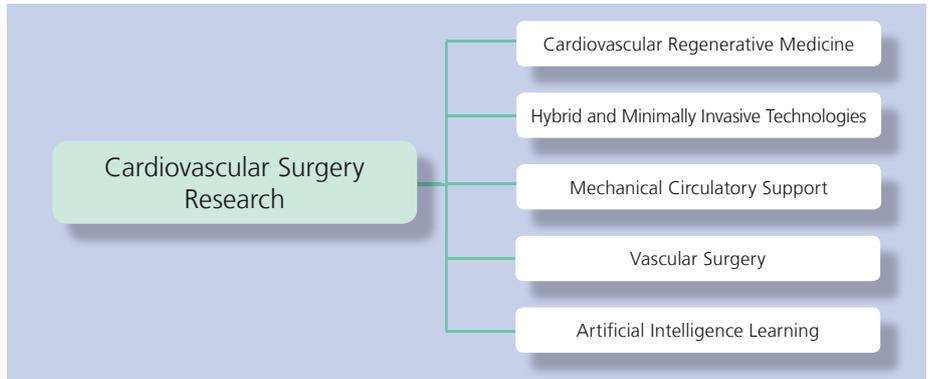
2. Research and Development

8

Cardiovascular Surgery Research



Prof. Dr. med.
Francesco Maisano,
Director



Valvular heart-disease and heart failure represent a major cause of mortality around the globe. Both entities are interdependent. The therapy options for affected patients with valvular heart disease are currently undergoing rapid changes and in addition to conventional, surgical valve operations on heart lung machine representing the standard of care since several decades, transcatheter techniques have entered the clinical-routine representing an efficient alternative for the treatment of elderly high-risk patients. Given sufficient long- term safety, it can be predicted that these minimally-invasive techniques may have a major impact on the treatment strategy of patients with VHD and will further be expanded to a broader and younger patient population. Recent trials suggest higher safety profile of transcatheter aortic valve implantation as compared to surgery in patients with low-risk profile. As a result, catheter based procedures are becoming first line option in patients above 70 years. To further expand indications and to improve long term durability and sustainability of the procedures, research and development and collaboration with industry partners is fundamental. On this background, the research of the department of cardiovascular surgery has a broad translational and multidisciplinary approach covering the ground from cellular and molecular biology to preclinical research to first in man and large scale clinical studies. Conceptually, we develop novel minimally invasive or transcatheter devices and treatment strategies for patients with valve and heart failure, involving the latest technologies in devices and imaging. To that end, our experimental research lines are as follows:

Novel Models and treatments for Heart Failure

Valve regurgitation is a pathological state where a unidirectional heart valve has become insufficient in its function and allows blood to leak back. In consequence, the downstream blood ejection volume decreases, while the regurgitant blood volume causes overload in the upstream heart chamber. The upstream heart chamber undergoes morphological and cellular changes which can cause dysfunction and heart failure. The left ventricle undergoes thinning of the ventricular wall and remodeling of cardiac cellular structures

attributed to prolonged stress caused by volume overload. These changes are believed to be irreversible and are involved in several features of heart failure.

However, the exact mechanisms behind these adaptive phenomena of the left ventricle are still poorly understood. On this background, we develop and validate a novel animal model to study morphological and cellular changes in subacute left ventricular volume overload and afterload mismatch. This model allows to identify functional parameters and early biomarkers specific to left ventricular volume overload and remodeling; to investigate blood and tissue biomarkers known to be elevated in chronic left ventricular remodeling at early stages of left ventricular volume overload; to investigate early changes in myocardial fiber architecture as well as myocardial metabolism by means of Dynamic Nuclear Polarization and Diffusion Tension Imaging, to study cellular, subcellular and metabolic characteristics of early signaling and response.

Another concept involves the concept of fluid-structural interaction between global and regional wall motion and the intracavitary blood stream (vortex). The ideal interaction happens in healthy hearts by exact synchronization of wall motion, valve function and flows, as demonstrated by several MRI and blood speckle tracking studies. Using a device specially developed for this task (a rotating disk mitral prosthesis), we investigate the role of flow redirection in the inflow of the left ventricle as a potential factor involved in the determination of heart failure. The study involves intraprocedural LV loops and MRI studies of fluid-structure interactions.

Heart failure is a multifactorial disease, with a large spectrum of clinical presentations. As a consequence, there is a large opportunity to investigate new targets of therapy. We investigate the role of respiratory mechanics in heart failure, by diaphragm stimulation in a novel animal model to precisely analyse the role of the interaction between chest dynamics and right ventricular hemodynamics and left ventricular diastolic properties. In this project, old techniques like auscultation have been rejuvenated by integrating them in sophisticated imaging and monitoring modalities, inspiring new opportunities for clinical monitoring and early diagnosis.

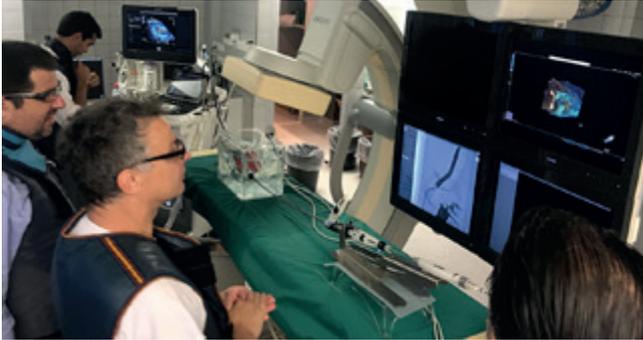


Figure 1: Simulation-based Research and Development of new procedures is today a viable alternative to animal experiments, particularly in the early stage of the research. It is also the best solution for physician training and education. In this picture, a multidisciplinary team is testing a new catheter based tricuspid annuloplasty system, with multimodality imaging.

Next generation bioengineered implants

Congenital heart defects represent a major cause of death around the globe. Although current therapy strategies have rapidly developed over the last decades, the currently used artificial prostheses are still considered to be suboptimal. They do not promote regeneration, physiological remodeling or growth (particularly important aspects for children) as their native counterparts. This leads to the continuous degeneration and subsequent failure of such substitutes which is associated to an increased morbidity and the need for multiple re-interventions. To overcome this problem, the concept of regenerative medicine comprising of tissue-, bio-engineering and hybrid technologies has been suggested as a next generation approach to enable native like cardiovascular replacements with regenerative and growth capacities, amendable to young adults and children. However, despite promising data from preclinical and first clinical pilot trials, the translation and clinical relevance of such technologies is still very limited. The reasons for that are multifaceted and comprise of scientific, logistical, infrastructural and regulatory challenges that need to be systematically addressed in order to facilitate clinical translation of such next generation cardiovascular substitutes.

Development of Novel Devices, training and education

Development of novel devices is frequently performed in collaboration with industry partners and often based on own intellectual property. We investigate feasibility and safety in the porcine model, and work towards optimization of device characteristics, investigating hemodynamics, ventricular and device function in detail and assessing long-term effects in order to prepare for translation into clinical application. Various devices designed to allow for minimally invasive or percutaneous treatment of mitral valve regurgitation, tricuspid valve regurgitation, chordae replacement, leaflet augmentation and ventricular aneurysm were evaluated. Progressively, this field evolved in direction of *ex vivo* and *in vitro* testing.



Figure 2: A state of the art animal lab allows the use of latest imaging technologies to develop new procedures, test and improve the standard operating procedures in the late phase of the preclinical testing. Here the multidisciplinary team is testing the same catheter based tricuspid annuloplasty system, with multimodality imaging as shown in figure 1, but in an animal model of tricuspid regurgitation.

Our laboratory is becoming more and more specialized in non-animal testing using the facility resources (imaging, instrumentation, etc.) to develop new technologies, implants and instruments to an advanced level before being tested in living animals. This is achieved using sophisticated dynamic simulators which can be used under X-rays and replicated the exact intraprocedural conditions to develop the devices and optimize and standardize the procedures minimizing the need of animal experiments. This experience has also induced a strong investment in training simulators, to eliminate the need for physician training with living animals. Simulation training experimentation using physical simulators is a very active field of investigation, using augmented reality and artificial intelligence methodologies to improve the assessment methodology of skill and competence training.

Development of novel strategies for procedural planning and guidance

A novel minimally invasive device typically asks for specific procedural planning and intra-operative, imaging based guidance. This is especially true as the heart is a 3D moving structure and many technologies that allow for real-time imaging are restricted to 2D visualization, while others, such as MRI and CT are not available for the operator in the hybrid operation room and/or not suited to allow for direct manipulation with therapeutic devices. We focus on developing new approaches for the fusion of several imaging techniques, such as MRI, CT and echocardiography with fluoroscopy in real time in order to optimize catheter based procedures, to reduce X-ray contrast volume and radiation exposure. We also work in the field of machine learning and automation of procedures, integrating this process in our device development programs.

Collaborations:

- Wyss Institute for Biologically Inspired Engineering, Harvard University, Boston, USA
- Department of Biomedical Engineering, Technical University Eindhoven, The Netherlands
- Center for Integrative Human Physiology, University of Zurich, Switzerland
- Department of Materials, Federal Institute of Technology, Zurich, Switzerland
- Department of Biochemistry, University of Zurich, Switzerland
- Department of Mathematics, Federal Institute of Technology, Zurich, Switzerland
- Department of Computational Science, Federal Institute of Technology, Zurich, Switzerland
- Department of Veterinary Surgery, MSRU Vetclinics, University of Zurich, Switzerland
- Department of Cardiac Surgery, Children's Hospital, Harvard Medical School, Boston, MA, USA
- Department of Pathology, Brigham and Women's Hospital, Harvard Medical School, Boston, MA, USA
- Massachusetts Institute of Technology (MIT), Cambridge, MA, USA
- Laboratory for Tissue Engineering, German Heart Centre, Berlin, Germany
- Department of Cardiology, Medical University of Vienna, Austria
- Institute of Nuclear Medicine, University of Debrecen, Hungary
- Institute of Chemistry and Applied Biosciences, Federal Institute of Technology Zurich, Switzerland
- Institute of Anatomy, University of Bern, Switzerland
- Human Genetics Laboratory, Genetica AG, Zurich, Switzerland
- Departments of Pathology, Neurosurgery, Cardiology, and Laboratory for Transplantation Immunology, University Hospital, Zurich, Switzerland
- Randall Division of Cell and Molecular Biophysics, King's College London, UK
- Embryonic Stem Cell Laboratory, Fraunhofer Institute for Biomedical Engineering IBMT, St. Ingbert, Germany
- Department of Pathology and Immunology, Geneva University, Switzerland
- Experimental Cardiology Unit, Department of Medicine, University of Lausanne Medical School, Switzerland
- Philips Healthcare (Best, Netherlands)
- Swiss Federal Institute of Technology (ETH) Zürich, Computer Vision Laboratory (Zürich)
- Swiss Federal Institute of Technology (ETH) Zürich, Centre for Mechanics (Zürich)
- Lenox Hill Heart and Vascular Institute (New York, USA)
- Erasmus Universiteit - Thorax Center (Rotterdam, Netherlands)
- Experimental Cardiology Unit, Department of Medicine, University of Lausanne Medical School, Switzerland
- pd|z Product Development Group Zurich, Department of Mechanical and Process Engineering, ETH Zürich (Prof. M. Meboldt)
- Wyss Translational Center Zurich, Swiss Federal Institute of Technology (ETH) Zurich, Center for Mechanics Zürich
- Institute for Dynamic Systems and Control, Department of Mechanical and Process Engineering, ETH Zürich (Prof. C. Onder, Prof. L. Guzzella)
- Micro- and Nanosystems, Department of Mechanical and Process Engineering, ETH Zürich (Prof. C. Hierold)
- Professor Dr. Isabelle Van Herzeele, Ghent University Hospital (Gent, Belgium) and Sint - Maarten Hospital (Duffel, Belgium)
- Division of Cardiology, University Hospital Zurich
- Philips Healthcare (Netherlands)
- Division of Urology and Division of Visceral and Transplant Surgery, University Hospital Zurich
- Endospan Ltd. (Herzliya, Israel)

Awards:

- F. Maisano: ESC Paul Hugenholtz Lecture for Innovation Award 2018
- F. Maisano: ICI Lifetime Achievement in Research and Teaching in the Field of interventional Cardiology Award 2018



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Alice Birkner,
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Uta Bonitz,
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Simone Frank,
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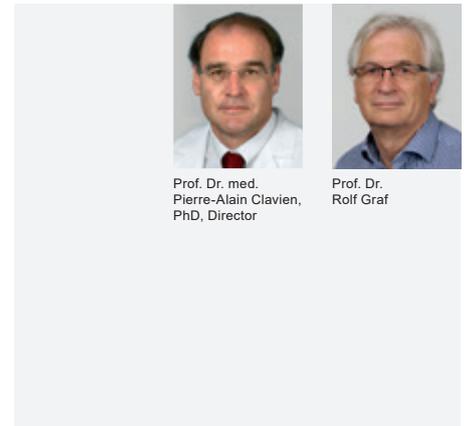
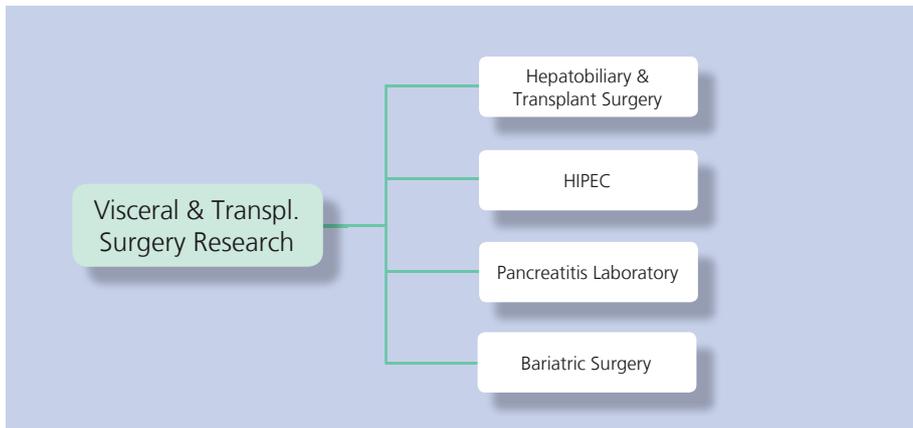


Emmanuel
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Research Finance



Chen Rong, PhD Student

Visceral & Transplant Surgery Research



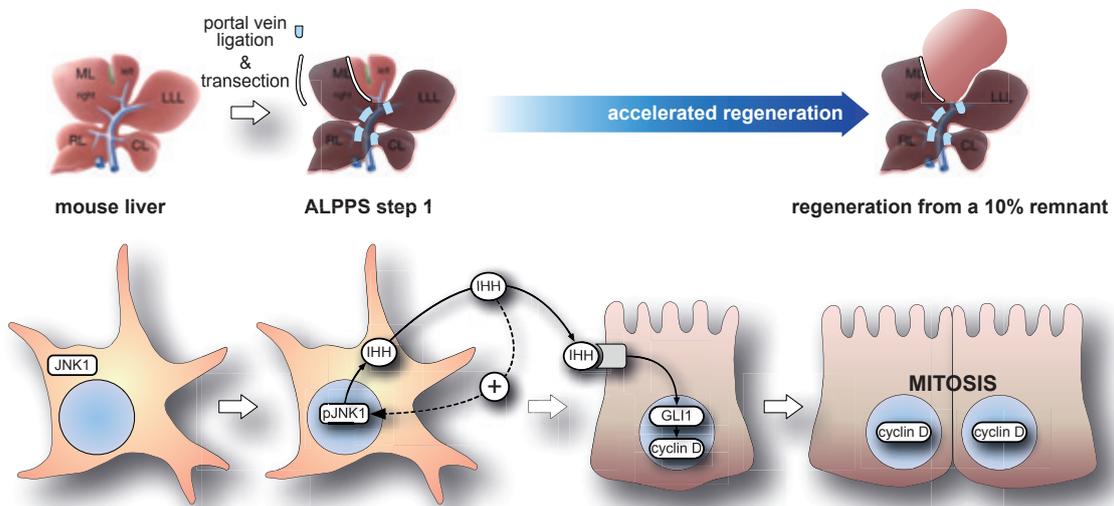
The research within the Department of Visceral & Transplant Surgery has always focused on clinically relevant questions. Thus, our research team – consisting of surgeon scientists and basic scientists - is dedicated to the development of novel surgical techniques for transplantation/liver resection, the association between bariatric surgery and metabolic health, the exploration of pancreatitis & pancreatic cancer, and the treatment of visceral malignancies. In addition, we use experimental animal models to understand molecular mechanisms underlying the above translational studies.

We have established multiple mouse and rat models for arterialized orthotopic liver transplantation, transplantation of critically small grafts, normal liver regeneration (68%-hepatectomy), or failed (86%-, 90%-hepatectomy) and accelerated (ALPPS surgery) liver regeneration.

These models were instrumental in revealing key mechanisms such as:

- 1) The role of paracrine JNK1-IHH signaling between stellate cells and hepatocytes in the acceleration of liver regeneration through ALPPS
- 2) Lipids as prime fuel of the regenerating liver, and the promotion of lipid oxidation for the protection from posthepatectomy liver failure
- 3) Combining our surgical models with dietary induction of fatty liver disease, we were able to show that fish oil and exercise are efficient in normalizing the metabolic state of fatty liver while improving both its stress tolerance and its regenerative capacity.

Additionally, we have developed syngeneic orthotopic mouse models of metastasizing colorectal cancer and of liver cancer.



Paracrine JNK1-IHH signaling from stellate cells underlies the accelerated hepatocyte proliferation following ALPPS surgery

With the help of these models, we could demonstrate that oxygenation through the novel molecule ITPP enhances chemotherapy efficacy while inhibiting metastasis. Likewise, we could show that the neurotransmitter serotonin may have important immunomodulatory functions in the periphery. Notably, we were able to transfer our knowledge from bench to bedside via the initiation of novel clinical & outcome studies, such as the first-in-patient trial on ITPP.

Hypothermic Oxygenated Liver Perfusion (HOPE) is a novel preservation technique developed in our labs that enables the use of marginal liver grafts for transplantation. Currently, a large multicentric trial on HOPE is running, and the technique has been expanded to kidney transplants. In parallel, rodent models are being used to understand the protective mechanisms behind HOPE, pointing to improved mitochondrial function as a key event.

In collaboration with the ETH, a completely novel perfusion machine has been developed that mimics essential body functions and keeps liver alive for up to 10 days ex corpore. This project is part of the Wyss Translational Center and aims at extending surgery to formerly inoperable liver cancer.

Using mouse models of chronic, acute and autoimmune pancreatitis, the Pancreas Research Lab has uncovered the epigenetic regulation of pancreatitis and identified the pathological features that separate acute from chronic pan-

creatitis. Since pancreatitis may lead to pancreatic cancer, we further have assessed the sequence of pancreatic metaplastic changes and discovered pancreatic gastrokine secretion as a biomarker of early stage malignancy. Our ongoing clinical and experimental studies have established pancreatic stone protein (PSP) as a reliable marker of sepsis in the clinic.

Bariatric or metabolic surgery is currently the most effective treatment of obesity and its associated diseases. However, the underlying physiologic mechanisms are not entirely understood. The recently established Research Group of bariatric surgery implements translational approaches to investigate the effect of Roux-en-Y gastric bypass on ingestive behavior. Rodent models of gastric bypass, as well as exploratory clinical studies have been set up to study changes in taste preferences, food reward, food selection and in the microstructural organization of postoperative nutrient intake.

Selected patients with peritoneal carcinomatosis (PC) may benefit from the combination of cytoreductive surgery with hyperthermic intraperitoneal chemotherapy (HIPEC). Exploring underlying mechanisms, our recently established Surgical Oncology Group has revealed that HIPEC treatment induces re-expression of immunogenic testis antigens on colorectal cancer cells, which leads to their enhanced immune recognition. Furthermore, using a PC mouse model, the laboratory is trying to exploit the enhanced immunogenicity as to improve HIPEC efficacy.

Collaborations / Sponsors:

- Prof. Michelangelo Foti (University of Geneva)
- Prof. Jean-Francois Dufour (University of Bern)
- Prof. Gerald Schwank (ETH Zurich)
- Prof. Sabine Werner (ETH Zurich)
- Prof. Maries van den Broek (University of Zurich)
- Prof. Jean-Marie Lehn (University of Strasbourg)
- Prof. Gregory Gores (University of Minnesota Mayo Clinics)
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- Dr. Daniela Lenggenhager (University of Zurich)
- Dr. Johannes vom Berg (University of Zurich)
- Prof. Philipp Rudolf von Rohr (ETH Zurich)
- PD Dr. Martin Hübner (CHUV, Lausanne)
- Various clinical collaborations

Awards:

Sabrina Steiner: Travel Grant, European Pancreas Club Meeting Berlin 2018
 Gitta Seleznik, Sabrina Steiner: Travel Grant, United European Gastroenterology Week Vienna
 Marcel Schneider: 17th Day of Clinical Research Prize USZ
 Marcel Schneider: Felix Largiadèr-Preis Schweizerische Gesellschaft für Viszeralchirurgie
 Lilian Roth: ESMO-immunooncology 2018, travel grant
 Xavier Müller: Swiss Transplant Society Award (clinical)
 Philipp Kron: Swiss Transplant Society Award (basic)
 Xavier Müller: Transplantationspreis USZ
 Henrik Petrowsky: Publons Peer Review Award for 1% of Top Reviewers in Clinical Medicine
 Karoline Horisberger: Posterpreis Schweizerische Gesellschaft für Chirurgie
 Marco Bueter: Best Abstract, 8th Congress of the International Federation for the Surgery of Obesity and Metabolic Disorders, Greece



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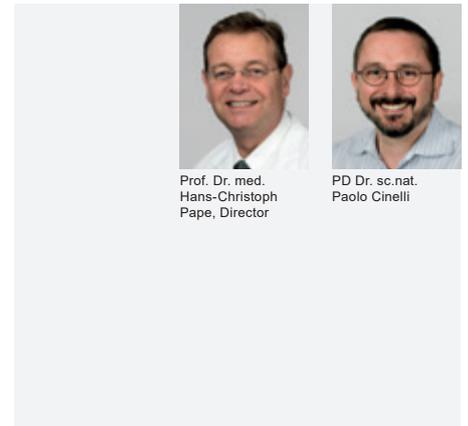
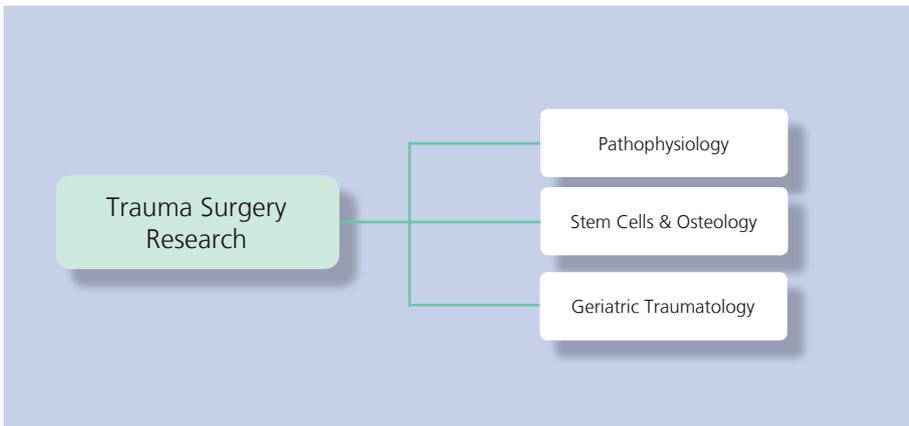


Leandro Mancina,
Trainee



Daniel Gero, MD, PhD Student

Trauma Surgery Research



The research focus of the Department of Trauma is the improvement of the treatment of severely injured patients. We are interested in all aspects of research that can improve treatment of severely injured patients at basic, translational and clinical levels.

Our main interests are the study of the pathophysiology of trauma, the development of regenerative approaches for improving bone healing and the impact and treatment of fractures in older patients. To approach these clinically relevant challenges we have built a team of surgeon scientists and basic scientists that closely work together.

Pathophysiology of Trauma

Traumatic injuries induce a complex host response that disrupts immune system homeostasis and trigger a systemic inflammatory response that predisposes patients to opportunistic infections and inflammatory complications leading to secondary complications, such as nosocomial infections, sepsis or multi-organ failure. Our studies aim at the identification of mechanisms linked to complicated courses after severe trauma by a systems biology approach combining clinical data and omics (transcriptomics, proteomics and metabolomics) approach. This approach is useful to improve the prognostic performance and individual risk stratification in trauma patients. In parallel to clinical studies on patients we have established a porcine polytrauma model and are analyzing locally, at the site of injury, and systemically how inflammation and immune response are initiated and how they are regulated (Figure 1).

This standardized model allows to study the timely changes in local and systemic inflammation following multiple injuries. The combination of clinical and translational studies allows further dissecting of the molecular mechanisms underlying these physiological changes.



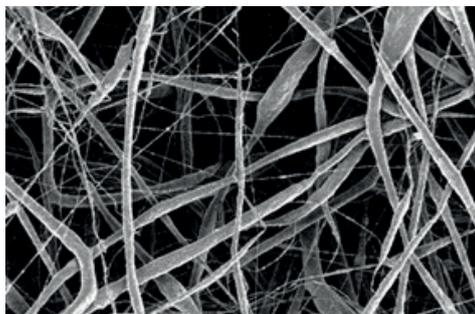
Figure1: Surgical setup for large animal polytrauma model

Skeletal Stem Cells & Osteology

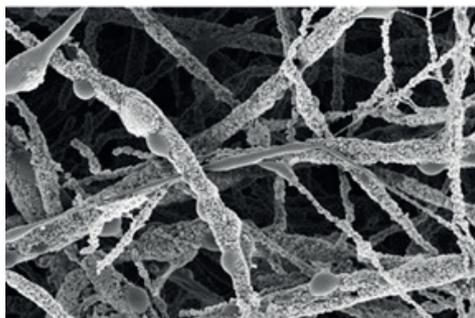
The capacity of bone to regenerate is of utmost importance in the case of injury. Regeneration consists of a well-orchestrated series of biological events that comprise bone induction and conduction, involving a number of cell types and intracellular and extracellular molecular signaling pathways, with a definable temporal and spatial sequence, with the final goal to optimize skeletal repair and restore skeletal function. The process of fracture healing involves many events including the signaling, recruitment and differentiation of skeletal stem cells during the early phase; formation of a hard callus

and extracellular matrix, angiogenesis and revascularization during the mid-phase; and finally callus remodeling at the late phase of fracture healing.

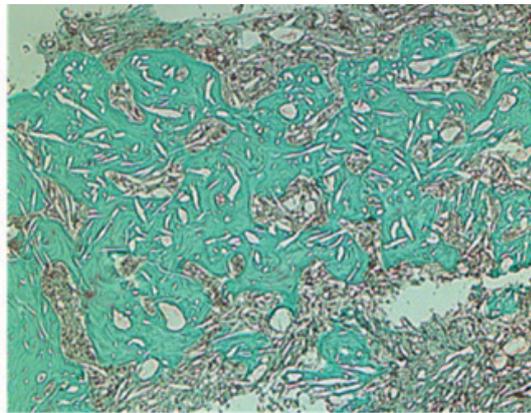
Unlike in other tissues, the majority of bony injuries (fractures) heal without the formation of scar tissue, and bone is regenerated with its pre-existing properties largely restored,



Scaffold



Scaffold + ECM



such as growth or differentiating factors. Mesenchymal stem cells (MSCs) represent a good source of regeneration-competent cells. They can be isolated from a variety of tissues and are able to differentiate under the right culture conditions, into osteoblasts, chondrocytes, and adipocytes.

The major problem with the use of MSCs isolated from bone

marrow or fat tissue is that the isolated cells contain heterogeneous populations of stem and progenitor cells. Thus, for the clinical use of MSCs for regeneration purposes, it is urgently needed a better characterization of the cells and a standardization of the isolation and culture protocols.

In our studies we test the possibility to enrich defined subpopulations of stem/progenitor cells for direct therapeutic application without requiring an *in vitro* expansion. The most promising enriched stem cells populations are tested for their regeneration capacity in mouse models. For the identification of new cell subpopulations we employ modern technologies like Cytometry by time-of-flight (CyTOF) allowing the real-time analysis of single cells in complex populations. Single cells, labelled with stable

heavy metal isotopes are analyzed by a combination of classical flow cytometry and mass spectrometry analysis.

We are also developing new scaffolds for bone regeneration by combining synthetically produced scaffolds with extracellular matrix (ECM) produced by stem cells (collaboration with Prof. Wendelin Stark and Olivier Gröninger, ETH). Cells are first seeded on electrospun scaffolds. After cultivation, the cells deposit on the scaffold surface ECM components and hydroxyapatite. In further step the scaffolds are being decellularized thereby eliminating the cells from the scaffold surface but retaining the ECM components and hydroxyapatite. The scaffold can be then stored and used when needed. This approach allows the preparation of off-the-shelf bone graft substitutes with low risks for rejection promoting constructive remodeling of bone tissue and eliciting various biologic responses including angiogenesis and chemotaxis of bone forming cells. We finally test our scaffolds in a mouse model for critical size bone injury.

Figure 2: Preparation of scaffolds with extracellular matrix components (Simon Tiziani, Olivier Gröninger).

and with the newly formed bone being eventually indistinguishable from the adjacent uninjured bone. Despite the fine degree of orchestration during fracture healing, the process may be impaired. Currently, 10–15% of the fractures that occur annually result in poor or unresolved healing, so called non-unions or critical size defects. These fractures which cannot heal completely from alone over a long period of time represent a major clinical orthopedic surgery. The gold standard treatment is the use of autogenous bone grafts in combination with alloplastic material. Usually the iliac crest is used as a donor site for bone harvesting. Nevertheless, this procedure has some drawbacks for clinical applications, such as limited availability of bone graft, morbidity, and donor site pain. Alternatively, biocompatible materials can be used but unfortunately, to date no single synthetic material offers all the benefits of the patient's own bone.

Tissue engineering represents a very promising technique, which combines the use of stem cells with scaffold of synthetic or natural biomaterial together with molecular signals,

Geriatric Traumatology

Bone is a rigid organ that provides support and physical protection to various vital organs of the body and is permanently in a dynamic balance, a process called remodeling, which allows a constant regeneration of bones (e.g. in the adult human body, the entire skeleton is renewed every 7 years). The tightly regulated processes responsible for continuous bone remodeling involve a complex coordination of multiple bone marrow cell types: bone formation by osteoblasts and resorption by osteoclasts. An important clinical aspect of bone remodeling is the imbalance between bone formation and resorption, which results in various diseases, such as osteopetrosis, osteopenia, and osteoporosis. The population worldwide is ageing and life expectancy is steadily increasing. The decrease in bone density and quality in osteoporotic patients leads often to fractures often as consequence of a fall from a standing height. Osteoporotic

fractures are associated with high rates of morbidity and mortality and the overall cost of treatment is very high. The role of trauma surgery in older patients is therefore of great importance. The main goal of treatment is to provide stable fixation that allows early weight bearing and mobilization. Our research focuses on one side in optimizing the surgical procedures by assessing through biomechanical testing the stability of different osteosynthesis devices. On the other side we aim at studying the cellular events underlying the development of osteoporosis. A current hypothesis is that a decrease in the number and function of bone and bone marrow derived MSCs is responsible of age-related bone loss. In a current clinical study, we are making use of our newly developed cytometry by time-of-flight technology to monitor at single cell level the changes occurring in MSCs isolated from osteoporotic bone upon fracture.

Collaborations/Sponsors:

- Clinical Trials Center, University Hospital Zurich
- Orthopedic Research Laboratory, Biomechanics, University Hospital Balgrist, Zurich
- Institute for Biomechanics, ETH, Zurich
- Institute for Regenerative Medicine (IREM), University of Zurich
- Translational Large Animal Research Network (TREAT)
- Center for Applied Biotechnology and Molecular Medicine (CABMM), University of Zurich
- Jan Schwab, Klinik und Poliklinik für Neurologie & Experimentelle Neurologie, Charité Universitätsmedizin Berlin
- Markus Huber-Lang, Dept. of Traumatology, Hand-, Plastic and Reconstructive Surgery, University Hospital Ulm, Germany
- Michael Bauer, Institute for Anesthesiology and Intensive Care Medicine, University Hospital Jena, Germany
- Martijn van Griensven, Dept. of Experimental Trauma Surgery, Klinikum rechts der Isar, Technical University of Munich, Germany
- Armin Curt, Spinal Cord Injury Center, University of Zurich and University Hospital Balgrist
- Manfred Claassen, Institute for Molecular Systems Biology, Department of Biology, ETH Zurich, Switzerland
- Valerio Orlando, King Abdullah University of Science and Technology, Saudi Arabia
- Wendelin Stark, Olivier Gröniger, Institute for Chemical and Bioengineering, Department of Chemistry and Applied Biosciences, ETH Zurich, Switzerland.
- Todd McKinley, Indiana University, Purdue University, Indiana, USA
- University of Pittsburgh, Dept. of Orthop. Surgery, F Fu / V. Musahl, USA

Awards:

Michel Teuben: 2018 SICOT Young Investigator Research Award, SICOT Annual Congress in Montreal.

Hans-Christoph Pape: Publication of the Year 2018, German Society for Trauma Surgery (DGU).

Roman Pfeifer: 1st Prize Award for best oral presentation 19th European Congress of Trauma and Emergency Surgery in Valencia, Spain.



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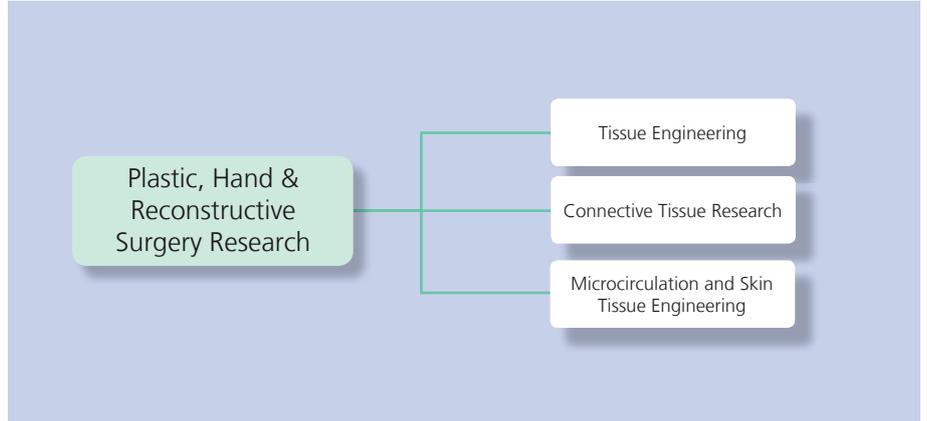
Plastic, Hand & Reconstructive Surgery Research



Prof. Dr. med.
Pietro Giovanoli,
Director



PD Dr. med.
Maurizio Calcagni



Research activities in the Plastic Surgery and Hand Surgery lie in the fields of microcirculation, wound healing, connective tissue research, tissue engineering, skin grafts, motion analysis, inflammatory biomarkers in burns, HLA sensitization in burns and vascularized composite allotransplantation.

For 2018, the Microcirculation and Skin Tissue Engineering group lead by Prof. N. Lindenblatt has engaged in several multidisciplinary projects in the fields of wound healing, pre-clinical drug development and tissue engineering.

Effect of TOP-N53 on angiogenesis and vascular leakage in diabetic mice

Diabetic foot ulcers are a serious complication in diabetic patients, characterized with impaired wound healing and deficient blood supply. In collaboration with Topadur Pharma AG and financed by the Swiss Innovation Agency (Innosuisse), the group is currently performing a preclinical proof-of-concept study in diabetic mice to test the efficacy of TOP-N53, a pro-angiogenic novel compound. The compound can be potentially used to treat diabetic foot ulcers by promoting angiogenesis and oxygen supply.

Molecular profiling of autologous fat graftings

The group is investigating the underlying molecular mechanisms that contribute to the regenerative properties of autologous fat graftings (microfat and nanofat) through mass spectrometry and molecular biology methods. Nanofat is prepared through mechanical shearing and is used successfully in our clinic to treat hypertrophic scars and rejuvenate skin. The successful identification of factors involved in nanofat's regenerative properties may lead to advantageous therapeutic benefits, resulting in direct clinical translation and research application in regenerative medicine.

Construct pre-vascularization with adipose tissue

Successful integration of skin grafts and skin substitutes depends on appropriate vascularization. Failed vascularization

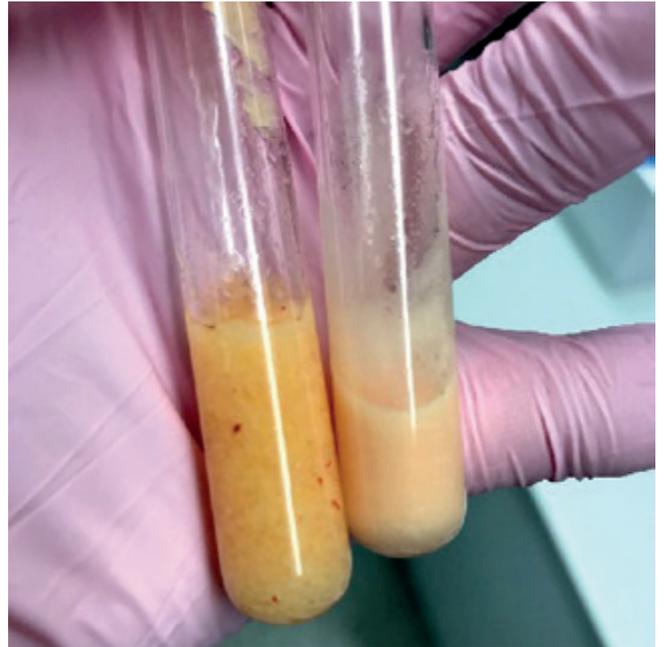


Figure 1: Comparison between microfat (left) and nanofat (right). Nanofat, an oily injectable emulsion, is prepared through mechanical shearing and filtering of microfat.

of grafts causes necrosis and rejections. Adipose tissue is rich in endothelial cells, mesenchymal stem cells and growth factors, which have been reported to significantly enhance biomaterial vascularization. With that, *in vivo* studies were carried out on C57BL/6 mice in order to investigate the neo-vascularization process of constructs composed of lipofragments.

In situ bioengineered dressing for chronic wounds

The Lindenblatt group is highly involved in the Hochschulmedizin Zurich Flagship 2016 Project "Skintegrität", where innovative approaches for diagnosis and therapy of skin diseases and of wound healing are being investigated. In col-

laboration with Prof. S. Ferguson and Prof. K. Würtz (ETHZ), the group is developing a personalized wound dressing that combines electrospun membranes and nanofat as a healing factor.

Motion analysis

The group of PD Dr. med. Maurizio Calcagni performs motion analysis, among others. The aim of motion analysis is to quantify the function of the hand after medical treatment and to determine the effects of restrictions on daily activities. After validation of the method in healthy volunteers, the clinical measurements of 10 patients after partial wrist fusion were completed in 2018.



Figure 2: Motion analysis laboratory, equipped with a set of cameras to assess finger movements during daily activities.

Our results suggest that measurements of the range of motion in the isolated planes of motion (flexion/extension or radial/ulnar deviation) cannot predict the effect of motion restriction on performance in combined movements (such as daily activities). Therefore, postoperative function of the wrist could be better assessed with measurements of wrist mobility in combined planes, in addition to the classical goniometer measurements. In order to transfer these results into clinical practice and to ensure easy application, we are currently working on the validation of a portable sensor for the wrist. Furthermore, the application of our three-dimensional motion analysis routine will continue in 2019 for patients with major injuries of the fingers.

Epidermal Autografts

A further project is to optimize the production of cultivated epidermal autografts (CEA) and therewith the quality as well as the safety of the CEA for the treatment of severe burn patients.

The team of PD Dr. Maurizio Calcagni has discovered different biomarkers to screen the keratinocyte sheets for safety and efficacy at various stages of their development. Furthermore, we were able to show that the influence of temperature, specifically that hypothermal conditions alter and even enhance secretome release of human keratinocytes *in vitro*. We could demonstrate, that intermediate cultivation temperature of 33°C beneficially affects the production of immunomodulatory (IFN- γ , GM-CSF), anti-inflammatory (IL-10, IL-4) as well as angiogenic (VEGF, PDGF-bb) biofactors released by keratinocytes during CEA cultivation. In fact, pro-inflammatory factors (IL-1b, IL-8, TNF- α) are also most expressed in the intermediate temperature range; however, they show a positive feedback loop in wound healing.

These findings could improve the overall CEA production (Figure 3). The proteomic analysis could serve to identify a maximal engraftment window and therewith may provide better clinical results with enhanced graft take rate in patients.

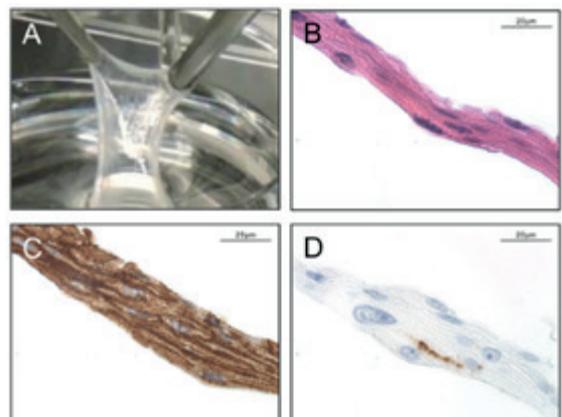
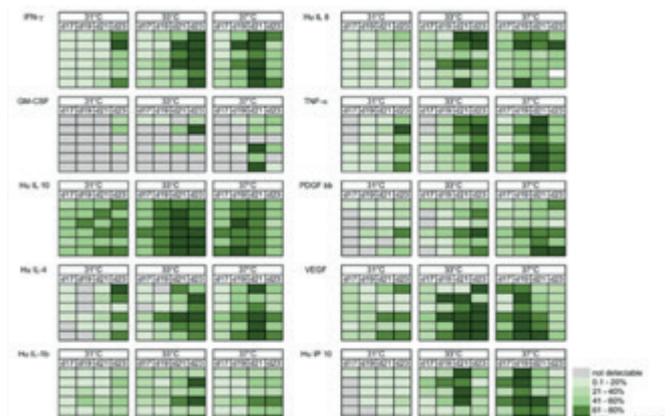


Figure 3: The cultivated epidermal autografts (CEA) harvested after 21 days (A) show a cell multilayer (B, Hematoxylin Eosin) of keratinocytes in an early stage differentiation status (C, Desmoglein 3). In contrast the late stage differentiation is only slightly detectable (D; Filaggrin). (Magn. x63)



Heat map indicating the time and temperature dependent cytokine release from human keratinocytes during CEA cultivation *in vitro*

The group of Prof. Dr. Jan Plock is focusing on clinical research in burns and reconstructive surgery and vascularized composite allotransplantation in basic science.

Clinical Research

Inflammatory biomarkers in burns

Pancreatic stone protein (PSP) has recently emerged as promising diagnostic and prognostic marker in severe trauma. Preliminary analyses from our group suggested serum PSP levels to be strongly associated with the presence of infection and mortality irrespective of the patients' age and total burned surface area. In that way, PSP might serve as helpful biomarker for timely identification of patients needing intensified medical care. So far, we have included over 100 patients giving rise to a comprehensive data-/biobank. As to that, future analyses will also address further inflammatory biomarkers in burns beyond PSP.

HLA sensitization in burns

Since the inception of clinical VCA over a decade ago, burn victims have been identified as immunologically complex patients for these procedures due to preformed (HLA) antibodies. Yet it remains unclear whether detected HLA antibodies are the result of former alloantigenic events or if their de novo formation occurs during primary burn care. Our interim analysis demonstrated that the formation of HLA antibodies during acute burn care might be lower than previously expected by using glycerol-preserved donor skin as well as restrictive administration of blood products as only 3 patients demonstrated verified de novo sensitization during acute burn care.

Multicenter Studies

In collaboration with Children's Hospital skin tissue engineering group (Profs. Meuli, Reichmann, Schiestl) clinical studies regarding autologous tissue engineered skin replacement have been initiated (TBRU-ds-BA-P1Ib and TBRU-ds-RAC_P1I). Moreover funding from the Swiss National Science Foundation was obtained for developing the clinical aspects of skin tissue engineering further (IICT 180418). Together with Prof. Annelies Zinkernagel and PD Dr. Barbara Hasse from the Department of Infectious Diseases we were able to collaborate for a Clinical research priority program funded by the University of Zurich and by the Swiss National Science foundation (BacVivo – Precision medicine for bacterial infections; SNSF 31BL30_185401).

Basic Science – Vascularized Composite Allotransplantation

Graft Vasculopathy

Graft vasculopathy is a characteristic feature of acute and chronic rejection, that are both inevitable during allotransplantation. To better understand the pathophysiology of graft

vasculopathy, this project studies inflammation and extracellular matrix remodeling within the vascular wall. The study is based on a rat model of hind limb transplantation and an *in vitro* model of vasculopathy.

Immunomodulation

To reduce the burden of immunosuppression in allotransplantation the potential of mesenchymal stromal cells (MSCs) is explored. While prolongation of graft survival has been achieved, long-term survival through immunomodulation and Treg upregulation rather than a tolerance approach is currently our goal. In a translational approach we examine combinations of systemic immunosuppression as well as regional modulation of the regional allorecognition process. Furthermore MSCs interfere with the development of graft vasculopathy. The therapeutic or prophylactic potential is further investigated.

Connective Tissue Research and Tissue Engineering

In collaboration with the ETH Zurich (Prof. Vogel) and the company ab medica, Italy, tendon rupture repair by an implant has been optimized: an emulsion electrospun and a coaxially electrospun DegraPol® tube that is biocompatible, biodegradable and very elastic, enabling the surgeon an easy handling during implantation has been developed and tested in the full transection rabbit Achilles tendon model. Biomechanical results are promising, because three weeks post-operation, tensile strength was doubled if a growth factor was applied compared to the factor-free situation. Moreover, in-depth histological analyses were performed.

Bone tissue engineering *in vitro* is performed and several new approaches including bioreactors are conducted (collaboration with Prof. Stark ETH Zürich). The impact of calcium phosphate nanoparticles was investigated in terms of gene expression in human adipose-derived stem cells, aiming at a spontaneous osteogenic differentiation without medium supplementation.

A novel method to assess perfusion capacity by MRI and vascular architecture and morphology by micro-CT in different biomaterials intended at bone regeneration is being developed (collaboration with Prof. Emmert (Wyss Translational Center Zurich and Charité Berlin). For that purpose, biomaterials are grown on the chorioallantoic membrane of the chicken embryo and after one week analyzed by MRI *in vivo* and by micro-CT after automated perfusion with MicroFil® *ex vivo*.



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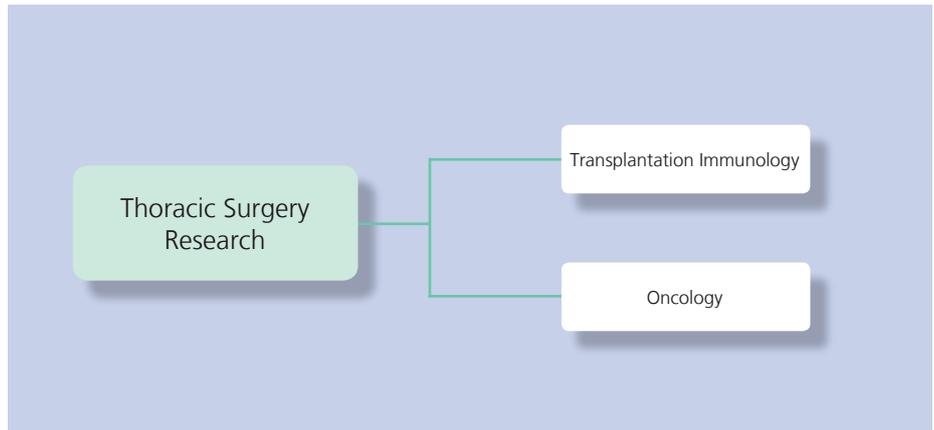
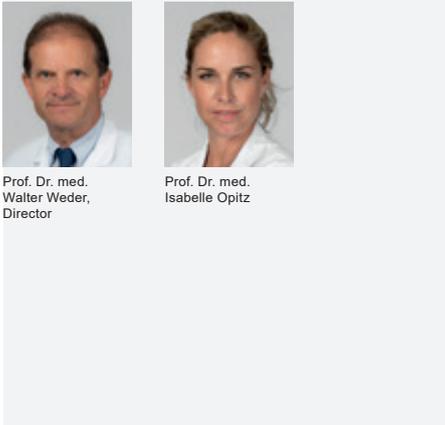


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- Prof. Dr. Sabine Werner, Laboratory of Tissue Repair and Cancer, ETH Zurich
- Topadur Pharma AG, Schlieren
- Ast. Prof. Dr. Tomás Egaña, PhD, Pontificia Universidad Católica de Chile, Santiago, Chile, and TUM Munich, Germany
- Prof. Dr. Brigitte Vollmar, MD, Institute for Experimental Surgery, University of Rostock, Germany
- Prof. V. Vogel, PhD, ETH Zurich
- Prof. W.J. Stark, PhD, ETH Zurich

Thoracic Surgery Research



Research in thoracic surgery focuses on different areas, such as oncology and transplantation.

Malignant Pleural Mesothelioma (MPM)

One of the topics in cancer research is the identification of novel biomarkers and development of therapeutic strategies for malignant pleural mesothelioma (MPM), an incurable thoracic malignancy related to asbestos exposure. To achieve these goals, various tumor tissue biomarkers that can help in the prediction of disease aggressiveness and response to treatment are assessed in translational studies (protein expression, mutation profiles and microRNAs). For example, could we identify that mutations or deletions of the BAP1 gene were associated with resistance to chemotherapy.

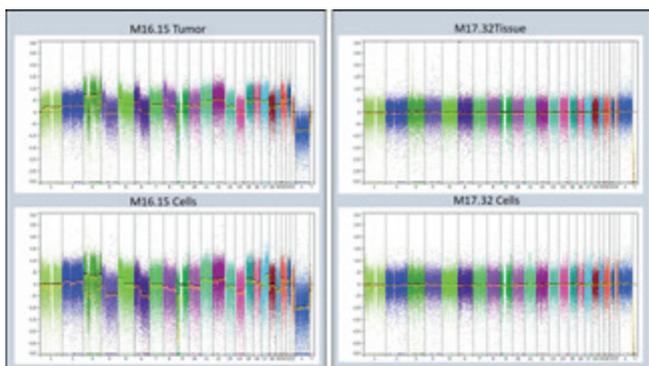


Figure 1: Copy Number Variation (CNV) analysis applied for verification of primary cell lines. Left: Example of a CNV analysis of a primary MPM cell line and the matching primary tumor tissue, in which the observed chromosomal changes are identical. Right: Example of a non-MPM primary cell line and the matching tissue sample, which both do not show any chromosomal alterations

Furthermore, our current projects particularly emphasize the identification of markers that can be detected in the blood of the patients, such as free circulating or microvesicle (exosomes) encapsulated nucleic acids, as these represent a very attractive tool for non-invasive diagnosis, outcome prediction, or disease monitoring. Besides, we are explor-

ing novel targets for the treatment of MPM using *in vitro* cell models and pre-clinical animal models. For this, we are establishing a primary cell bank for mesothelioma.

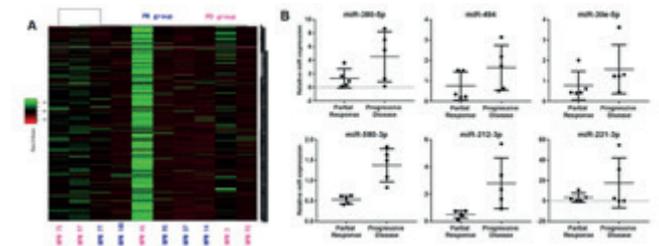


Figure 2: Identification of biomarkers associated with response of MPM to chemotherapy. A) Heat map obtained from profiling of 754 individual microRNAs. B) Expression of selected microRNA biomarkers candidates in tissue samples from responders (partial response) and non-responders (progressive disease) to cisplatin-pemetrexed chemotherapy

In addition, we currently apply intracavitarily cisplatin/fibrin after macroscopic complete resection in a phase II trial to prevent local tumor recurrence (NCT01644994). So far, we included 17 out of 20 patients in the protocol.

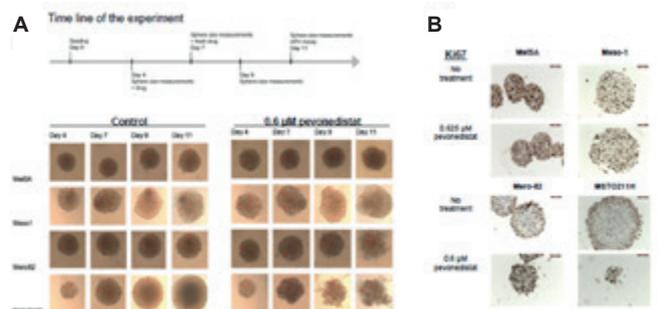


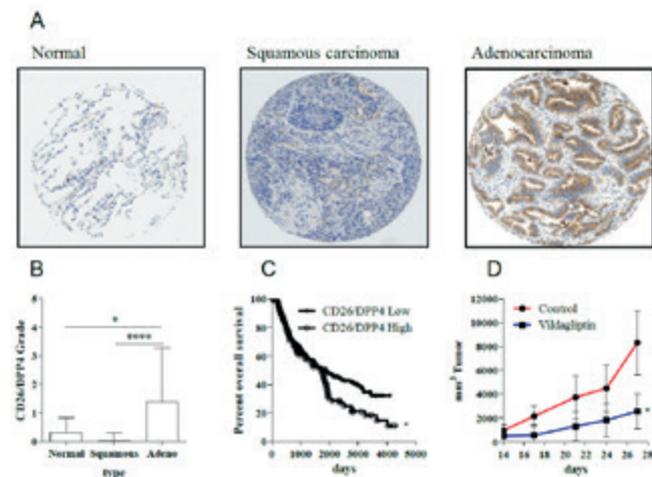
Figure 3: Effect of pevonedistat on CUL4A overexpressing MPM cell lines grown in 3D. A) Cells were grown in 3D spheroids, and 4 days after seeding, spheres were treated with either pevonedistat or DMSO. The presence of dead cells was clearly visible only in CUL4A overexpressing cell lines (Mero82 and MSTO211H). B) The accumulation of cells positive for Ki67 (proliferation markers that are positive in proliferating cells especially in S/G2 phase) were detected in the remaining cells in the spheroids of Mero-82 and MSTO211H.

In parallel, we are evaluating the combination of intracavitary cisplatin/fibrin with post-operative radiotherapy in a preclinical animal model.

In further studies aiming to achieve a better understanding of MPM, we used experimental animal models exposed to asbestos to explore mechanisms of mesothelioma development. This led us to the discovery of pathways activated in pre-neoplastic lesions and we are currently characterizing them. We made public our collection of live-biobank of primary mesothelioma cells and we keep characterizing them at the genomic level. We also explored how growth in 3D under different stiffness conditions changes the phenotype of mesothelioma cells.

Lung cancer

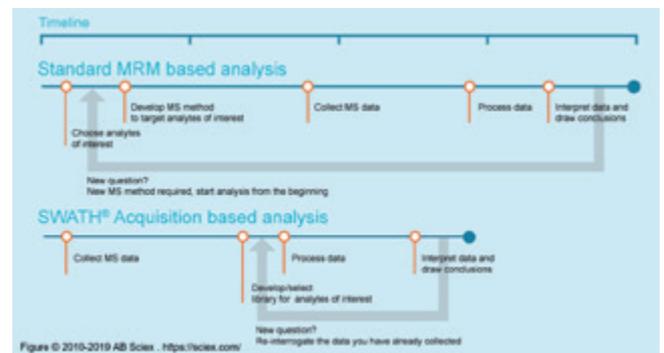
As lung cancer is the most prominent cause of cancer-related death, novel treatment strategies are urgently needed. In our research work, we found CD26/DPP4 to be significantly increased in lung adenocarcinoma compared to normal lung. Moreover, a higher CD26/DPP4 expression was significantly correlated with a worse survival of patients suffering from adenocarcinoma.



Expression of CD26/DPP4 in lung cancer and potential therapeutic target. CD26/DPP4 stain shows significantly higher expression in adenocarcinoma compared to normal lung or squamous carcinoma (A, B). Overall survival of adenocarcinoma patients is significantly correlated with the expression level of CD26/DPP4 (C). The treatment of CD26/DPP4 inhibitor Vildagliptin suppressed growth of tumor in a model of lung cancer (D).

On the base of these clinical data, we hypothesized that the inhibition of CD26/DPP4 can suppress lung cancer. In order to test our hypothesis, the CD26/DPP4 inhibitor vildagliptin was applied in a mouse model of lung adenocarcinoma induced by subcutaneous injection of the Lewis Lung Carcinoma (LLC) cell line. We found that vildagliptin treatment significantly reduced the size of tumor via activation of intratumoral NK cells. We therefore deem that CD26-inhibition can be a novel target to treat lung cancer.

In order to validate previously discovered prognostic biomarkers in lung adenocarcinoma (LAC) we are currently developing in collaboration with a group in ETHZ, a mass spectrometry approach called SWATH (Figure SWATH) for the quantitation of serine hydrolases (SH) enzymatic activities. With the newly established ABPP-SWATH MS workflow and starting with 24 LAC stage IIIA biopsies, we obtained MS/MS spectral information. Our ultimate goal is now to measure the proportion of “inactive SHs” from the “total” SHs and potentially follow 400 enzymes activities of the SH superfamily in our lung resection specimens.



Lung transplantation

In order to overcome organ shortage for lung transplantation and reduce waiting list mortality our group is working on ex vivo lung perfusion technology to improve the function of damaged lung grafts. We are doing experiments in large and small animal models with oxygen carrier (perfluorocarbon octyl bromide). Perfusion temperature is also one of the targets in our optimization strategy. We also investigate the potential of adeno-associated virus as vector for gene therapy in a small animal model during ex vivo lung perfusion in order to reduce ischemia reperfusion injury and the allo-immune response after transplantation.

Awards:

Claudio Caviezel: Prize of the Swiss Society of Thoracic Surgery (SGT) for the best clinical publication “Lung volume reduction surgery in selected patients with emphysema and pulmonary hypertension”

Collaborations:

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- Eidgenössische Technische Hochschule (ETH) Zürich, CH
- Klinik für Pneumologie, Universität Leuven, Belgien
- Institute of Physiology, Perelman University Pennsylvania, Philadelphia, USA
- Institut für Molekularbiologie, Universitätsspital Zürich, Universität Zürich, CH
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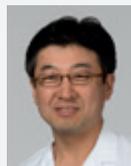
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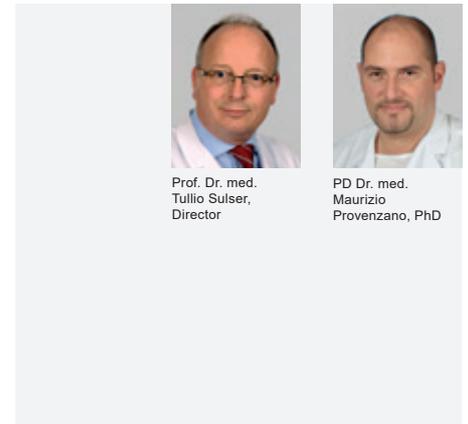
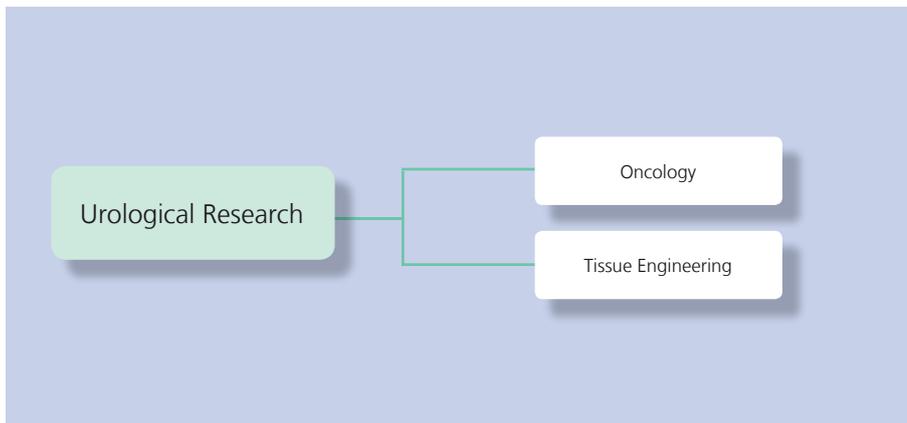


Chloé Spichiger, PhD
Scient. Administration



Nadia Sanchez Macedo, PhD

Urological Research



The department of Urology focuses its research interests on the two areas Uro-Oncology and Tissue Engineering/Regenerative Medicine.

Focus Prostate Cancer Studies

Based on our previously submitted patent on “Novel Urine Biomarker for Prostate Cancer”, we perform a pre-validation study testing the clinical relevance of the biomarker for diagnosis and prognosis of prostate cancer (PCa) and the possibility to substantially reduce the number of unnecessary biopsies.

As an alternative biomarker type we explore for PCa diagnostics, extracellular vesicles (EVs) are particularly intriguing. EVs, which are membrane-bound nanoparticles secreted by cells into the blood or media, are known to carry essential specific to their cell of origin. Using advanced *in vitro* models, we harvested EVs produced by PCa cells and analyzed them with proteomics (LC-MS/MS) to determine which cargo are related to disease progression. Candidate proteins are being validated in retrospective analysis of patient samples from the proCOC (prostate cancer outcome study) biobank.

Multiple androgen receptor (AR) dependent and independent resistance mechanisms limit the efficacy of current treatment modalities for castration resistant prostate cancer (CRPC). Autophagy is a survival mechanism in cells exposed to anti-cancer treatment. We hypothesized that also a promising N-terminal or C-terminal targeting-AR treatment may lead to up-regulation of autophagy, which can be targeted by a combination therapy with autophagy inhibitors. Current research focuses on *in vitro* and *in vivo* studies investigating the antitumor effect of a double-treatment using autophagy and AR inhibitors.

PCa is responsible for the second most cancer-related deaths in men after lung cancer in Switzerland. Precise visualization and therapy of primary and recurrent PCa foci is one of the prominent challenges in these tumor patients. Prostate-specific membrane antigen (PSMA) based imaging

and therapy is increasingly used for targeted PCa management. However, a low PSMA surface expression in patients with low-volume and low-grade cancer can limit accurate imaging and therapy. *In vitro* and *in vivo* data has demonstrated that androgen deprivation therapy (ADT) induces PSMA surface expression. However, ADT might negatively influence disease progression in certain patients. We hypothesize that upregulation of PSMA expression can also be induced by other commonly used FDA-approved compounds indirectly targeting the AR pathway. We aim to identify these pharmacological compounds inducing the PSMA expression *in vitro* and *in vivo*.

We participate in several academic international randomized controlled trials and prospective studies (REDUSE, IMPROVE, PEACE III, PBCG) to improve outcomes in patients with advanced PCa. As a first results of the international multicenter PBCG (prospective biopsy collaboration group) study a new risk calculator for PCa and has been published 2018 (“A Contemporary Prostate Biopsy Risk Calculator Based on Multiple Heterogeneous Cohorts”, Eur Urol 2018). We are currently gathering funding for a phase I and II trial on bipolar androgen therapy (BAT) with a new medical compound in advanced PCa patients. The aim is to identify which PCa subtypes may respond to BAT and find predictive markers. For future biomarker discovery, we established the two biobanks proCOC and metaPROC (metastatic prostate cancer).

Focus Testicular Cancer Studies

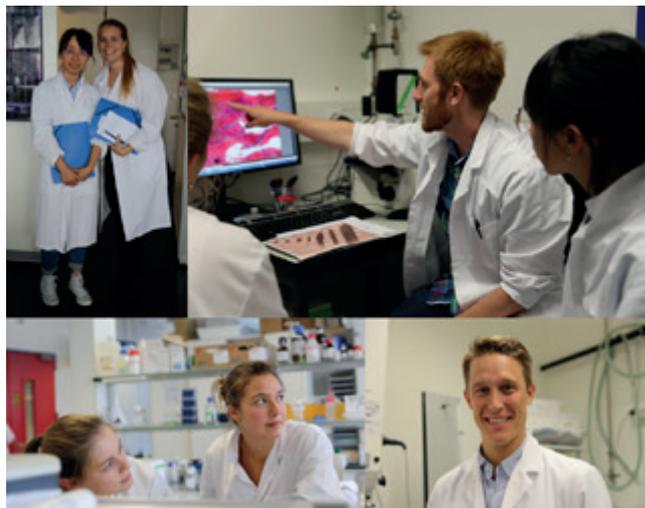
As participating institution in the Swiss Austrian German Testicular Cancer Cohort Study (SAG TCCS) we are studying the quality of life and follow-up schedules in patients with testicular cancer. In addition, we are currently conducting a research project funded by the Swiss Cancer League to define the role of microRNAs in the management of testicular cancer patient surveillance. Additionally our group contributes clinical patient data to several international collaborations to optimize clinical care.

Urologic Tissue Engineering

Targeting urologic diseases such as urinary incontinence, the Tissue Engineering group is following different approaches to grow stem cells and initiate tissue regeneration.

In a first approach, we use human skeletal muscle precursor cells (MPCs) for tissue (re)generation. We coordinate an international consortium of the Horizon 2020 EU program and a project entitled Multisystem Cell Therapy for Improvement of Urinary Incontinence (MUSIC) (www.music2020.ch). In this first phase clinical trial, we will treat 40 patients with their autologous muscle precursor cells. Patient-specific cell batches are produced in clean room facilities under GMP conditions. In combination with post injection electromagnetic stimulation, we expect an improved regeneration of the sphincter muscle.

A second approach uses adipose derived stem cells (ADSC) as a key instrument to bioengineer contractile bladder tissue. The ADSCs can differentiate to smooth muscle cells (SMC) under natural conditions. Their long-term cell fate *in vivo* however is uncertain. We evaluate different combinations of cells to improve the bladder tissue formation by modification of the microenvironment and the enhancement of cell-to-cell interactions. As autologous SMC cannot be harvested from organs with end-stage disease and tissue regeneration requires large amount of functional SMC, there is an urgent need for other cell sources. We investigate the functional role of autophagy during differentiation and remodeling of ADSCs to SMC *in vitro*. Furthermore, we aim to develop a functional substitute for the improvement of the bladder wall function for patients suffering from end-stage bladder disease. We are investigating the regenerative capabilities of primary bladder SMCs and pre-differentiated, smooth muscle-like ADSCs in compressed collagen hydrogel scaffolds.



Tissue Engineering: A Road Trip from Bench to Bedside

A central concern associated with the use of any cell source for tissue engineering is the non-invasive monitoring of *in vivo* tissue formation. We therefore apply MRI to directly assess stem cell differentiation and skeletal muscle fiber formation. Since the regenerated tissue quality after stem cell therapy is crucially important for its proper function, we apply neuromuscular electromagnetic stimulation (NMES) to support *in vivo* tissue development, cell survival and innervation.

Collaborations:

- PD Dr. med S. Santourlidis, Heinrich-Heine University, Düsseldorf, Germany
- Prof. Dr. Michael Detmar, Institute of Pharmaceutical Sciences, ETHZ
- Prof. Dr. Peter Wild, Senckenberg Institut für Pathologie, Universitätsmedizin Frankfurt, Germany
- Proteomedix AG, Schlieren
- University of Applied Science North Western Switzerland (FHNW)
- Prof. Dr. Arnold von Eckardstein, Institute of Clinical Chemistry
- Dr. Andrew Vickers, Memorial Sloan Kettering Cancer Center, New York, USA
- Prof. Dr. Donna Ankerst, Technical University, Munich
- Prof. Rita Gobet & PD Dr. Maya Horst Division of Pediatric Urology, University Children's Hospital Zurich
- Prof. Hans Uwe Simon, Pharmacology Institute; Bern
- Prof. Dr. Simon M. Ametamey, Dpt. Pharmaceutical Sciences, ETHZ, Zurich, Switzerland
- Prof. Dr. Christoph Handschin, Biozentrum Basel, Basel, Switzerland
- PD Dr. med. Andreas Boss, Institute for Diagnostic and Interventional Radiology, USZ
- Dr. sc. nat. Martin Ehrbar, Division of Obstetrics, University Hospital Zurich

Awards:

Christian Fankhauser: "Automated Gleason grading of prostate cancer via deep learning" Prize for best presentation at the European Multidisciplinary Congress on Urological Cancers (EMUC) 2018.

Ch. Fankhauser: Forschungsstipendium 2018 der Walter und Getrud Siegenthaler Stiftung.

Ch. Fankhauser: Validierung der automatischen Befundung von Prostatakrebs durch künstliche Intelligenz, Marlies Geiser-Lemken Stiftung.



Prof. Dr. med.
Tullio Sulser,
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PD Dr. med.
Thomas Hermanns



PD Dr. med.
Cédric Poyet



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Dr. med.
Florian Schmid



Alexandra Veloudios,
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Yvonne Döring,
Study Nurse

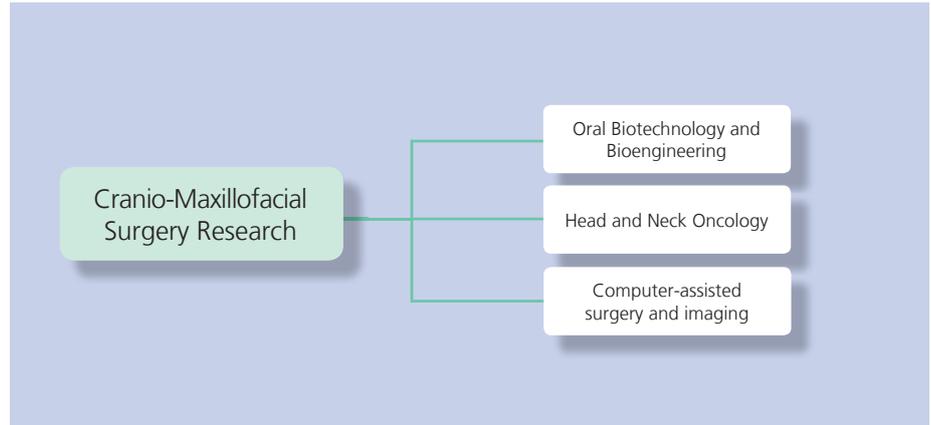


Anka Baltensperger,
Datamanager



Damina Balmer,
M.sc.
Scientific Coordination

Cranio-Maxillofacial Surgery Research



Research in the Department of Cranio-Maxillofacial Surgery covers head and neck oncology, computer assisted surgery, photodynamic therapy, and oral biotechnology & bioengineering.

The projects of the latter one are epigenetic active small chemicals to be applied for bone regeneration, treatment of bone defects in inflammation-compromised situations, adiposity, and even male contraception.

The other major field of oral biotechnology & bioengineering is additive manufacturing of bone substitutes with the final aim to provide our patients with osteoconductive bone substitutes from calcium phosphate and Bioglass, and to realize the use of personalized bone substitutes for our patients. The project on additive manufacturing of bone substitutes is funded by the Swiss National Science Foundation and includes partners from the University of Applied Science (Muttensz, Switzerland) and the PolyU (Hong Kong). After we have unraveled the microarchitecture of lattice structures and pore-based structures to yield in accelerated bone ingrowth and defect bridging, we now shift towards a better understanding of the biology of osteoconduction as a major driving force for bone regeneration and repair. A third project of oral biotechnology & bioengineering is funded by a Bundesstipendium and deals with the preservation and regeneration of the pulp to keep teeth alive, to postpone tooth loss, and replacement by dental implants.



Figure 1 Diverse calcium phosphate-based bone substitutes produced by additive manufacturing (Ghayor & Weber FE (2018); *Frontiers in Physiology* doi: 10.3389/fphys.2018.00960)

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A third project of oral biotechnology & bioengineering is funded by a Bundesstipendium and deals with the preservation and regeneration of the pulp to keep teeth alive, to postpone tooth loss, and replacement by dental implants.

Computer assisted surgery is another focus in our department. Here we want to optimize the digital planning of operations and move on towards automation of planning and quality control. Finally, we want to offer our patients patient-specific implants and osteosynthesis materials.

Photodynamic therapy is a promising treatment for medication-related osteonecrosis of the jaw (MRONJ). MRONJ is a severe adverse drug reaction, manifested in a progressive irreversible bone destruction in the maxillofacial region, associated with discomfort and pain for the patients.

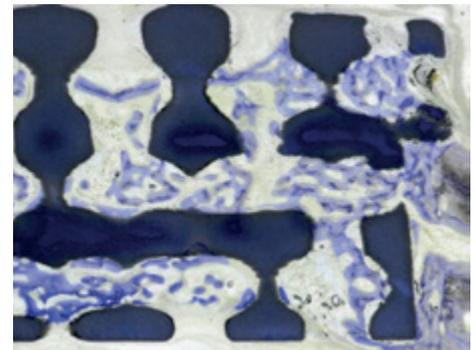


Figure 2: Bony bridging realized by an optimal osteoconductive microarchitectures for a 6 mm defect in 4 weeks. (Bone blue; scaffold black). (Ghayor & Weber FE (2018); *Frontiers in Physiology* doi: 10.3389/fphys.2018.00960)

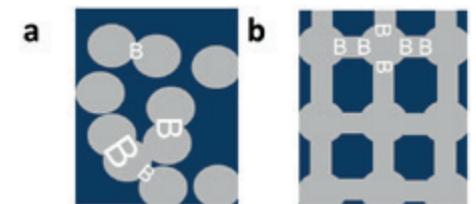


Figure 3: Conventional (a) and additively manufactured (b) microarchitecture of bone substitutes. For additively manufactured bone substitutes, the microarchitecture in terms of pore location and connections between pores (B: bottleneck) is well defined. (Pores are grey and the scaffold dark blue). (Ghayor & Weber FE (2018); *Frontiers in Physiology* doi: 10.3389/fphys.2018.00960).

Collaborations:

- University of Applied Sciences Northwestern Switzerland, School of Life Sciences, Institute for Medical and Analytical Technologies (Prof. Michael de Wild).
- Department of Fixed and Removable Prothodontics and Dental Material Science, University of Zurich, Switzerland (Prof. Ch. Hämmerle, Prof. Dr. Ronald Jung, PD Dr. Daniel Thoma).
- Division of Preventive Dentistry, Periodontology, and Cariology, University of Zurich Center of Dental Medicine, Zurich, Switzerland (Prof. T. Attin, Prof. M. Zehnder, Prof. P. Schmidlin).
- Department of Masticatory Disorders, University of Zurich, Switzerland (Prof. L. Gallo)
- Division of Obstetrics (Prof. R. Zimmermann, Dr. Martin Ehrbar)
- ETH Zurich, Cartilage Engineering + Regeneration (Prof. M. Zenobi-Wong)
- Universität Hongkong, Prof. R. Zwahlen.
- UZH, Biochemistry, Prof. Amedeo Caflisch
- Biolitec research GmbH, Jena, Germany
- Orcos Medical, Küsnacht, Switzerland
- University of Zurich, Center of Dental Medicine, Division of Preventive Dentistry, Periodontology, and Cariology, Zurich, Switzerland (Prof. T. Attin, Dr. T. Thurnheer)
- University of Zurich, Institute of Anatomy (Prof. C. Maake)
- ETH Zurich, Department of Health Sciences and Technology, Institute for Biomechanics, Laboratory for Bone Biomechanics Zurich, Switzerland (Prof. R. Müller)
- University of Zurich, Department of Chemistry, Zurich, Switzerland (Prof. G. Patzke)
- University Hospital of Zurich, Department of Infectious Disease and Hospital Epidemiology, Zurich, Switzerland (Prof. A. Zinkernagel)



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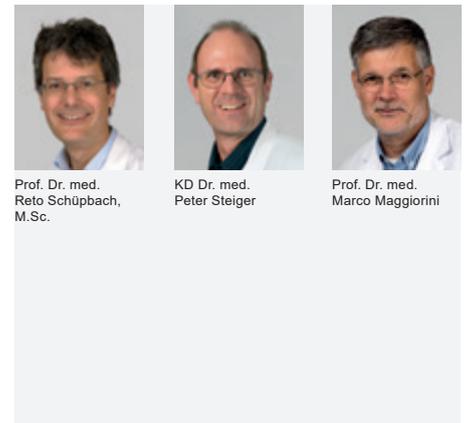
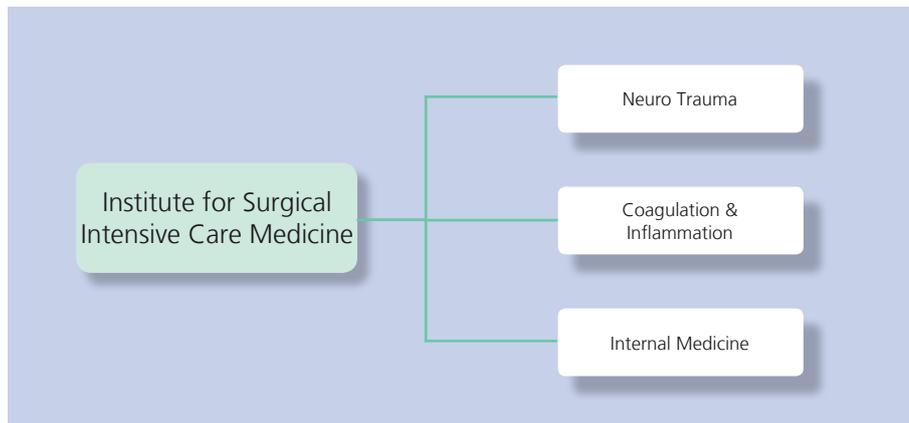


Anja Ivica,
PhD Student



Bhattacharya Indranil, PhD

Institute for Surgical Intensive Care Medicine



Basic research coagulation and inflammation

The focus lies on the protease-activated receptors (PARs), a small family of GPCRs, which regulate the complex interactions between coagulation and inflammation in acute and as chronic inflammatory conditions. PAR1, PAR3 and PAR4 are major regulators of platelet activation and vascular barrier function while PAR2 plays a major role in the regulation of extravascular inflammation and cancer.

In acute systemic inflammation, activated Protein C (aPC) activates PAR1 preventing endothelial barrier dysfunction. We constructed a novel type of PAR1 agonist, mimicking aPC activation that may lead to novel therapeutic options. Further, we are interested in the role of thrombin-activated PAR2 in chronic lung diseases.

In addition, PAR's are activated by various exoproteases from bacteria, fungi or plants. We investigate the role of proteases on the PAR activation in a collaboration with the research group of Prof. Annelies Zinkernagel. The effects of inflammatory modulators and copper on angiogenesis have been tested *in vitro* and *ex ovo* in a collaboration with PD Johanna Buschmann.

Clinical Studies in the ICU:

Visual attention and situation awareness in ICU

During the last years, patient safety and adherence to standardized protocols while treating patients have gained increasing attention and importance in medicine, especially in the field of critical care and complex medical environments. In our current observational research project, we analyze visual behavioral patterns in intensive care with the help of the eye-tracking technique. Intensive care units are high-risk working areas due to the intense workload, critically ill patients, need for aseptic working techniques, required manual skills or complex invasive interventions and monitoring. Visual attention is of particular importance for all these processes and is the basis for decision-making and situation awareness and thus have a high influences on the patients' state of health and their better outcomes.

Infection and inflammation in burn patients

The skin and its microbiota (i.e., associated microorganisms) are a natural barrier and immune organ that defends the human body from invasion of pathogens and plays an essential role in fluid hemostasis and thermoregulation. Disturbance of the balance between the host and its microbiome - as well as barrier disruption - (can) lead to local and systemic disease.

An in-depth understanding of the skin microbiota's compositional and organizational disruption is necessary to identify future strategies to combat multidrug resistance and improve clinical outcome in burn patients with local wound or systemic infection. As of the moment, only little data on microbiota changes in burn patients exist. Furthermore, the relation between alteration of skin integrity, microbiome disruption and clinical disease manifestation is unknown.

This study project pursues the long-term goal of identifying novel therapeutic and preventive approaches to reduce the burden of morbidity and mortality due to infections and multi-drug-resistant bacteria in burn patients. The working hypotheses of this study is 1) that burn injuries lead to a predominance of virulent bacteria - normally controlled by skin commensals - and 2) that antibiotic broad-spectrum treatment favors the selection of resistant subpopulations of bacteria with a fitness-loss that will be overcome by compensatory mutations in a time-dependent manner.

The Re-Energize Study: A RandomizEd trial of ENtERal Glutamine to minimIZe thermal injury

The Re-Energize Study is a trial led by Dr. Daren Heyland and his team at the Clinical Evaluation Research Unit (CERU). The objective of the study is to evaluate effect of glutamine on 6 months mortality in severe burn patients. This is a large, multicenter, double blind, randomized controlled trial of 2700 patients with severe burns randomly allocated to receive enteral glutamine or placebo. Since June 2019, USZ has qualified as the only Swiss study center out of 45 study centers worldwide.

TEN Network

As part of the so-called European Reference Network for TENS, we are in the process of launching a Delphi exercise with international experts to establish recommendations for the best supportive care at SJS/TEN. In this context, we are part of the burn intensive specialists in this Delphi project. Together with Prof. Schmid (head of allergology USZ) and Dr. Mirjam Nägeli (Consultant of dermatology USZ) we want

to improve and build up the interdisciplinary support of patients after severe cutaneous drug allergies (especially toxic epidermal necrolysis). In the context of this cooperation, we establish clinical and experimental research interests in TEN and establish an international register for TEN with Prof. French (Head of dermatology Munich). (www.irten.org).

Collaborations:

- ECKS: Indikatoren / Kontraindikatoren – Berliner Charité & Universitätsmedizin Göttingen
- Visus: Visual behaviour of intensivists in usual daily situations – ETH Zürich PDZ, Kinderspital Zürich
- ECMO: factorial survey – Berliner Charité & Universitätsmedizin Göttingen
- The RE-ENERGIZE Study – A Randomized Trial of Enteral Glutamine to minimize Thermal Injury (a worldwide study with 41 partner institutions) Lead: Clinical Evaluation Research Unit (CERU) Canada
- SPHN –PSSS (Personalized Swiss Sepsis Study)
- TEN Network – Klinikum Uni München



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Peter Steiger



Dr. med.
Christoph Ganter



Dr. med.
Giovanna Brandi



Dr. med.
Stephanie Klinzing



Dr. med.
Silvia Cottini



Dr. med.
Karl Philipp Bühler



Dr. med.
Matthias Hilty



Dr. nat.
Alessandro
Franchini, PhD



Dorothea
Heuberger,
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Ozlem Altintas,
PhD Student



Catharina Giese,
Head Development
and Administration



Dr. sc. ETH
Jan Bartussek,
Coordinator
Data management
and analysis



Lionel Chok, MD

Animal Welfare in Biomedical Research



Prof.
Margarete Arras,
DVM



Nikola Cesarovic,
DVM, PhD

Anesthesia and peri-operative Pain Research

An important reason for suffering in experimental animals is pain induced by invasive procedures, diseases and injuries. But pain management is more than an animal welfare concern, as it has important scientific and methodological implications for the design of experiments and the quality of the resulting data. To ensure high-quality scientific outcomes and humane treatment of laboratory animals sufficient anesthesia, reliable alleviation of pain and supporting experimental housing conditions are essential.

In the past, we have developed and evaluated physiology and behavior based pain assessment tools for laboratory mice.

Since 2017 we focus our work also on the development of tools for the legally required severity assessment in animal experimentation. Therefore, we combine well-established severity assessment methods with new approaches like cognitive bias testing to detect changes in the animal's affective state. This work is conducted as part of the research consortium DFG FOR2591 in collaboration with 15 different research groups in Germany and Switzerland. Within the consortium we are collaborating with several research groups to establish remote and automated systems to grade severity fast, objectively and in a non-invasive way (e.g. Automated Mouse Grimace Scale). The overall aim is the assessment of severity in different animal models with validated and easy-to-use parameters. With the implementation and evaluation of refinement measures (e.g. improved housing conditions or local anesthesia) we aim to minimize severity and to contribute to the 3R principles.

These tools are also used to improve analgesia protocols for the treatment of pain in mice without affecting experimental read-out. We characterized for example the opioid Tramadol (Fig. 1) as well as Tramadol-Paracetamol combinations in abdominal surgery (Fig. 2) and in orthopedic models and the antipyretic Paracetamol in embryo transfer surgery. In a collaboration with the University of Basel we are currently developing a new sustained release buprenorphine formulation for stress-free and continuous analgesia administration in rodents.

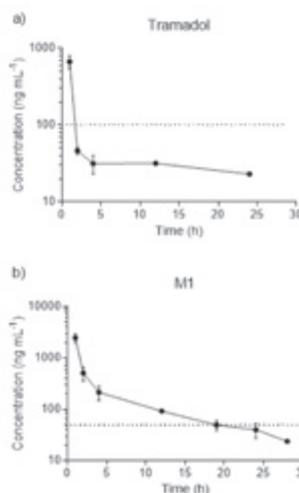


Figure 1: Serum concentrations after oral Tramadol administration.

a) Semi-log plots of mean serum tramadol concentrations over time (h) after subcutaneous administration of 25 mg kg⁻¹ tramadol followed by 25 mg/kg of tramadol in drinking water for 24 hours. The horizontal line represents the minimal analgesic concentration of tramadol (100 ng mL⁻¹) in humans.

b) Semi-log plots of mean serum M1 concentrations over time (h) after subcutaneous administration of 25 mg kg⁻¹ tramadol followed by 25 mg kg⁻¹ of tramadol in drinking water for 24 h. The horizontal line represents the minimal analgesic concentration of M1 (40 ng mL⁻¹) in humans.

Reference: Evangelista R, Bergadano A, Arras M, Jirkof P (2018) Evaluation of the analgesic efficacy of a 25 mg/kg Tramadol s.c. injection-oral combination in a surgical model in C57BL/6J mice. JAALAS, accepted.

tion-oral combination in a surgical model in C57BL/6J mice. JAALAS, accepted.

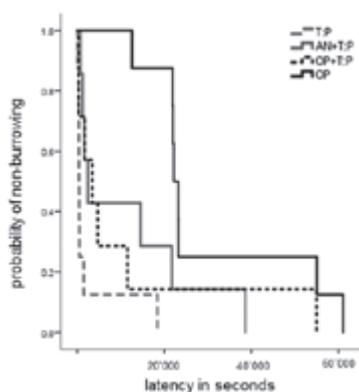


Figure 2: Burrowing Test.

A prolongation of burrowing latency indicates post-surgical pain in mice. Oral Tramadol:Paracetamol treatment results in comparable burrowing latencies as control treatments. Burrowing latencies differed significantly between T:P and An + T:P ($p = 0.024$) and OP compared to all other groups: OP vs T:P ($p < 0.0001$), OP vs. An + T:P ($p = 0.032$) and OP vs. OP +T:P ($p = 0.019$). T:P = TP in drinking water only, An +T:P = anesthesia

and T:P in the drinking water; OP+ T:P =anesthesia and surgery with T:P in the drinking water; OP =anesthesia and surgery only. Reference: Jirkof P, Arras M, Cesarovic N (2018) Tramadol:Paracetamol in drinking water for treatment of post-surgical pain in laboratory mice. Applied Animal Behaviour 198: 95-100, doi.org/10.1016/j.applanim.2017.09.021

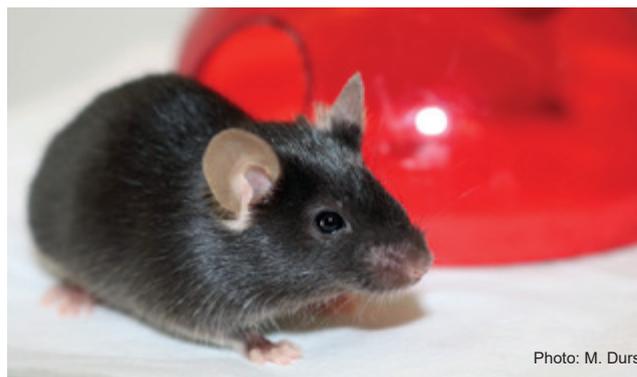


Photo: M. Durst

Collaborations:

- Andre Bleich, Institute for Laboratory Animal Science, Hannover Medical School
- Brianna Gaskill, Animal Sciences, Purdue University
- Micheal Czaplík, Department of Anesthesiology, RWTH Aachen University
- Jörg Huwyler, Pharmazeutische Technologie, University of Basel
- Annemarie Lang, Clinic for Rheumatology and Clinical Immunology, Charité Berlin, Germany
- Dorit Mehrhof, Institute of Imaging and Computer Vision, RWTH Aachen University
- Heidrun Potschka, Institute for Pharmacology, Toxicology and Pharmacy, Ludwig-Maximilians-University Munich
- Petra Seebeck, Zurich integrative Rodent Physiology, University of Zurich
- Rene Tolba, Institute for Laboratory Animal Science & Experimental Surgery and Central Laboratory for Laboratory Animal Science RWTH Aachen University



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Paulin Jirkof,
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Thea Fleischmann,
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Mareike Sauer,
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Marko Canic,
DVM



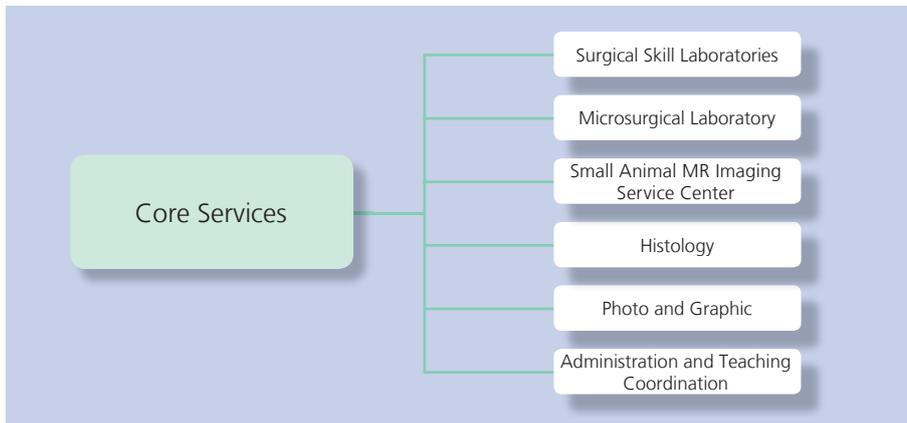
Mattea Durst,
PhD Student



Marko Canic, DVM

Lionel Chok, MD

3. Core Services



Surgical Skill Laboratories

Surgery requires a number of practical and manual skills that can be trained in skill laboratories. In our facilities which are open to all members of the department we provide a number of tools and machines in a surgical environment. To perform operations under conditions similar to the clinical situation, technical help is provided by our staff which is also responsible for the maintenance of our facilities.

Microsurgical Laboratory

The microsurgery laboratory is a separate section in which several operating microscopes are available to all members of the department requiring special equipment. Maintenance of this laboratory includes all aspects of preparation of surgical instruments, sterilization and handling of waste materials. In addition, an intravital microscope including video equipment is available. This facility also provides for histological work-up.

Small Animal MR Imaging Service Center

The Small Animal MRI Service Center (SAMISC) is now administered as part of the Center of Surgical Research and Conny Waschkies, PhD, was recruited to oversee its activities. SAMISC is equipped with a Bruker 4.7T PharmaScan® MRI system designed for high throughput preclinical imaging. It features routine MRI sequences optimized for mice and rats, and is operated by ParaVision® 5 and 6 software packages for data acquisition, reconstruction, analysis and visualization. An EchoMRI system is available for body fat composition analysis in mice and tissue probes (down to 0.3g).

Histology

The laboratory for Histology provides a histological work-up from preserved specimen to sectioning and staining. The laboratory contains an embedding machine, several microtomes, cryostat and staining devices. Several techniques including paraffin embedded, frozen and plastic embedded tissue can be processed.

Teaching Coordination and Administration

The Surgical Research Division is responsible for organization of the learning and teaching units in the Department of Surgery, including both lectures and clinical courses in coordination with the University of Zurich, as well as the coordination of the clinical rotations during the last years of study. Further tasks include financial management (accounting, controlling, reporting) and personnel administration of the Division, as well as organization and coordination of various events.



Prof. Margarete Arras, DVM



Nikola Cesarovic, DVM, PhD



Dr. sc.nat. Conny Waschkies, Scientific Administrator



Andrea Garcete-Bartschi, Lab. Technician



Ines Kleiber-Schaaf, Lab. Technician



Carol De Simio, Scientific Illustrator



Nico Wick, Photographer



Christoph Stulz, Photographer



Tina Wentz, Manager Division of Surgical Research



Donata Gröflin, Teaching Coordination Division of Surgical Research

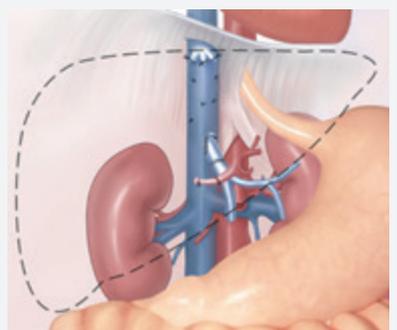
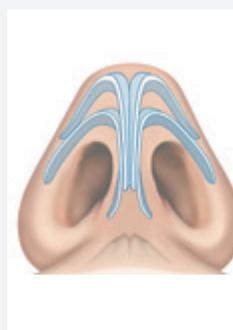
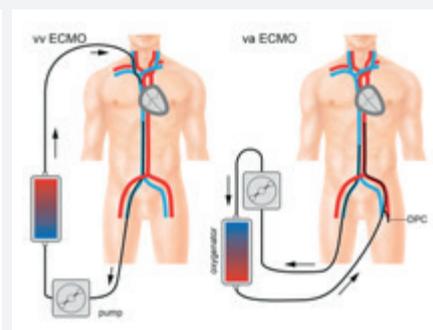
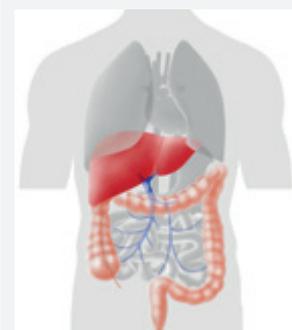
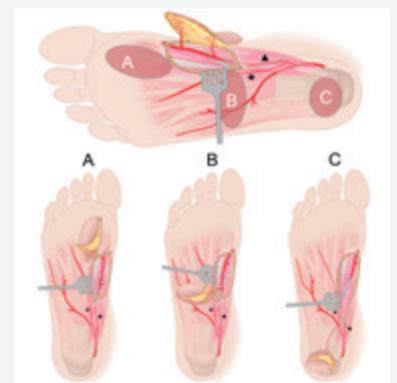
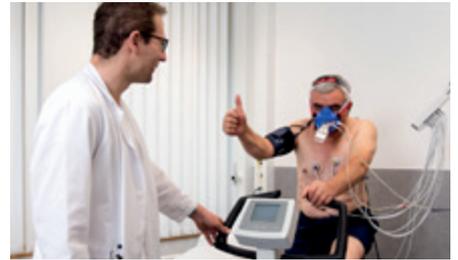
Photo and Graphic Services



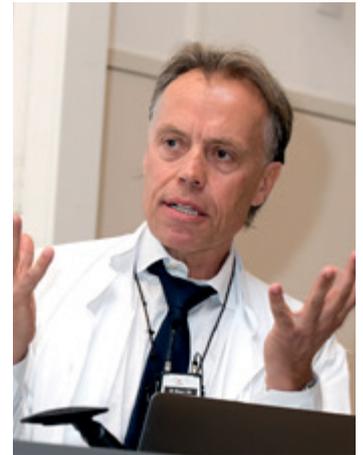
A quick, flexible, versatile and professional service

We offer

- photographic documentation of patients and events
- technical photography, on location or in our studio
- photography, graphic and design of illustrations for papers and books
- reproduction and digitalization of any original
- layout of printing matters
- preparation of files for external printing
- print service
- cutting and converting of video-files for presentation and web
- construction and maintenance of websites
- maintenance of the digital image archives



4. Events and Workshops at the Division of Surgical Research 2018



17th Day of Clinical Research, April 5, 2018



Lab Retreat, Les Diablerets, January 12 – 14; photos: Bostjan Humar



Surgical Suture Skills Course, Winterthur, May 30- 31; photo: Lorenzo Kaeser



Christmas Lecture and Apéro, December 20; Speaker: Dr. Christina Giger, Lucerne University

5. Grants

Cardiovascular Surgery Research:		
Swiss Heart Foundation	Impact of mitral valve replacement on intracardiac fluid dynamics and left ventricular efficiency	F. Maisano
Stiftung für Herz-und Kreislaufferkrankheiten	EpiPhrenic POrcine Study (EPOS) - Physiologie Mechanism Behind Cardiac Enhancement Therapy, a Novel Implantable Therapy Concept for Heart Failure Patients with Narrow-QRS and/or no Evidence of Mechanical Intra-Ventricular Dyssynchrony	F. Maisano
USZ Innovationspool	Nahtfreier (Sutureless) Aortenklappenersatz	A. Ouda
USZ Innovationspool	Interkardiale Verwendung vom AngloVac Aspirationssystem	A. Ouda
USZ Innovationspool	Cerebral protection in transcatheter aortic valve replacement procedures	F. Maisano
Industry Grant	Development of minimally invasive and transcatheter therapeutic approaches	F. Maisano
Industry Grant	Development multimodality-imaging guided minimally invasive interventions	F. Maisano

Visceral & Transplant Surgery Research:		
SNF Project grant	Molecular strategies for improved outcomes after major liver resection	Clavien P.-A.
SNF Project grant	HOPE for Human Liver Grafts obtained from Donors after Brain Death	Dutkowski P.
SNF Project grant	Behavioral mechanisms underlying changes in food selection and intake in humans after Roux-en-Y Gastric Bypass	M. Bueter
SNF	Serotonylation promotes pancreatic cancer by regulating cytoskeletal dynamics	Graf R.
SNF Sinergia grant	Metabolic control of hepatocyte proliferation in regeneration and cancer	Humar B., Clavien P.-A.
SNF Investigator Initiated Clinical Trials programme	Hypothermic oxygenated perfusion (HOPE) for human livers - a prospective randomized European liver transplant trial	Dutkowski P.
FOUNDATIONS:		
Liver and Gastrointestinal Disease Foundation	HPB fellowship	Clavien P.-A.,
Liver and Gastrointestinal Disease Foundation	ITPP clinical trial	Clavien P.-A., Graf R.
Helmut Horten Stiftung	<i>Ex vivo</i> long term liver perfusion 'Liver4Life'	Clavien P.-A, Eshmuminov D.
ProMedica	<i>Ex vivo</i> long term liver perfusion 'Liver4Life'	Clavien P.-A, Eshmuminov D.
Olga Mayenfisch Stiftung	Behavioral mechanisms underlying changes in food selection and intake in humans after Roux-en-Y Gastric Bypass	Bueter M.
Amelie Waring Stiftung	Role of deoxy-sphingolipids in acinar cell pathobiology following diabetes mellitus	Sonda S.
INSTITUTIONAL GRANTS:		
Clinical Research Priority Program (CRPP), UZH	Non-resectable liver tumors – from palliation to cure	Clavien P.-A.
Wyss Translational Center Zurich	Liver4Life	Clavien P.-A., von Rohr P. (ETHZ)
Edoardo R., Giovanni, Giuseppe und Chiarina Sassella-Stiftung	Impact of HIPEC-tumor-specific immunity	Roth L.

Edoardo R., Giovanni, Giuseppe und Chiarina Sassella-Stiftung	Improving radiotherapy efficacy through ITPP-mediated tumor oxygenation	Borgeaud N.
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Trauma Surgery Research:

Novartis Stiftung für Biologisch-Medizinische Forschung	The role of Prame17 in chromatin remodeling during the switch from pluripotency to differentiation	P. Cinelli
Theodor und Ida Herzog-Egli Stiftung	The switch between pluripotency to differentiation: The role of Prame17 in embryonic stem cells	P. Cinelli
Edoardo R., Giovanni, Giuseppe und Chiarina Sassella-Stiftung	Role of the PRAME Gene Family in Cancer Stem Cells	P. Cinelli
Stiftung für wissenschaftliche Forschung an der UZH	Role of the Prame Gene Family in Cancer Stem Cells	P. Cinelli
Gottfried und Julia Bangerter-Rhyner-Stiftung	Identification of subpopulation of adipose derived stem cells for bone bioengineering by CyTOF analysis	P. Cinelli
AO Research Fund	Effects of standard reaming and RIA techniques on local soft tissue and systemic homeostasis in a porcine trauma model	M. Teuben, HC Pape
Olga Mayenfisch Stiftung	Real-time high-dimensional level analysis of stem cell heterogeneity at single cell resolution by mass cytometry	P. Cinelli
USZ INOV00040	Visual Analytics in Trauma Surgery WATSON Health	L. Mica
USZ INOV00049	Telemedizin	HC Pape

Plastic, Hand & Reconstructive Surgery Research:

Allergan Inc., Irvine, CA, USA), SNSF through NCCR Kidney.CH	<i>In vivo</i> characterization of the integration and vascularization of a silk-derived Surgical Scaffold	N. Lindenblatt
Swiss National Science Foundation	Cellular and molecular mechanisms of vascular maturation for therapeutic angiogenesis	A. Banfi, Basel; N. Lindenblatt (Co-Applicant)
Swiss National Science Foundation	New vascularization strategies for skin tissue engineering	N. Lindenblatt
Research Grant Olga Mayenfisch Stiftung, Zürich, Schweiz	Effect of fat and adipose-derived stem cells (ADSCs) on vascularisation and nerve regeneration in a new <i>in vivo</i> mouse model	N. Lindenblatt
Novartis Stiftung für Biologisch-Medizinische Forschung	Mass spectrometry of Nanofat: a novel systems biology approach to identify tissue regeneration factors	N. Lindenblatt
Commission for Technology and Innovation/Innosuisse	<i>In vivo</i> proof of concept for TOP-N53, a highly potent topical drug for acceleration of wound healing	N. Lindenblatt
Hochschulmedizin Zürich	Skintegrity - An interdisciplinary approach to understand, diagnose and treat skin diseases and wounds-P6	N. Lindenblatt
Werner-Siemens Stiftung	Center for artificial muscles in reconstructive medicine` (Co-applicant, PI: Yves Perriard, EPFL, 2. Co-applicant: Thierry Carrell, Inselspital Bern)	N. Lindenblatt

Hartmann-Müller Stiftung, Zürich, Schweiz	Molecular profiling of nanofat: a systems biology approach to understand tissue regeneration	N. Lindenblatt
Research Grant Allergan, Irvine, USA	Evaluation of the vascularisation and inflammatory reaction of the silk-based synthetic surgical scaffold SERI <i>in vivo</i>	N. Lindenblatt
Hartmann-Müller Stiftung, Zürich, Schweiz	Guided wound healing in full and split thickness wounds	N. Lindenblatt
Hartmann Müller-Stiftung für Med. Forschung	Fat grafting nerve	N. Lindenblatt
Forschung und Nachwuchsförderung der Universität Zürich	Hauttransplantate	N. Lindenblatt
Swiss Life Research Grant, Zurich	Skin grafting and tissue engineering of skin substitutes in burn surgery - what we can learn from nature	N. Lindenblatt
Hartmann Müller-Stiftung für Med. Forschung	Knochenersatzkonstrukte	J. Buschmann
Wolferrmann-Nägeli-Stiftung	Sehnenreparatur mit einem reversibel expandierbaren Schlauch - Kaninchenmodell <i>in vivo</i>	J. Buschmann
EMDO Stiftung, Zürich	Fabrikation eines Polymerschlauches zur Sehnenreparatur	J. Buschmann
AbMedica, Lainate (Italy)	Sehnenreparatur mit einem reversibel expandierbaren Schlauch - Kaninchenmodell <i>in vivo</i>	J. Buschmann
Hartmann-Müller Stiftung	Sehnenreparatur unter Zuhilfenahme eines mit PDGF-BB bestückten DegraPol®-Rohrs	J. Buschmann
Kurt und Senta Hermann Stiftung	Fabrikation eines Polymer-Trägers: Bioaktivität und Release-Kinetik des Wachstumsfaktors Platelet-Derived Growth Factor-BB (PDG-BB) vom elektrogesponnenen Träger DegraPol®	J. Buschmann
La Colline PhD Fellowship	Skin Engineering Platform	M. Calcagni
Innovationspool USZ	Adipose derived stromal vascular fraction for the treatment of finger contractures in patients affected by systemic sclerosis	M. Calcagni, O. Distler, P. Giovanoli
Innovationspool USZ	Skin Engineering Platform	P. Giovanoli, M. Calcagni
Heubergstiftung	Investigating the effect of hypothermal conditioning on the quality and growth potential of <i>in vitro</i> cultured keratinocytes for skin grafting	M. Calcagni, S. Darwiche

Thoracic Surgery Research:

Zürcher Krebsliga	Prognostic Marker for MPM	I. Opitz
Vontobel Stiftung	MikroRNAs als prognostische und prädiktive Tumormarker für die multimodale Behandlung des malignen Pleuramesothelioms	I. Opitz, M. Kirschner
Verein Lunge Zürich	MicroRNAs as prognostic and predictive tumour markers assisting the selection of patients with malignant pleural mesothelioma for multimodality treatment	I. Opitz, M. Kirschner
Krebsforschung Schweiz	Mesoscape 001-pS6: Construction of a multi-institutional European Tissue-bank	I. Opitz
Polianthes Foundation (SAKF)	Comprehensive Investigation of Predictive Biomarkers for Chemotherapy Response and Novel Drug Targets in Patients with MPM by Next Generation Sequencing	I. Opitz

SAKF Foundation	Multi-omics profiling for identification of novel circulating biomarkers for malignant pleural mesothelioma	I. Opitz
SNF	Improving Mesothelioma Patients Outcomes by Early Non-Invasive Diagnosis	I. Opitz
Polianthes Foundation	Next Generation Sequencing of Malignant Pleural Mesothelioma for Therapy Response Prediction	I. Opitz
Walter Bruckerhoff Stiftung	Targeting epigenetic deregulation	E. Felley-Bosco
Stiftung für Angewandte Krebsforschung	“Overcoming development of resistance and progression to mesenchymal phenotype in mesothelioma” and “Alternative splicing in BAP1: implications in DNA damage response and drug sensitivity in mesothelioma”	E. Felley-Bosco
CTI	Entwicklung einer Matrix-basierten Technologieplattform für die Hochdurchsatz-Analyse von 3D Zellkulturen	E. Felley-Bosco
Krebsliga Zürich	Sonic Hedgehog MPM	E. Felley-Bosco
Huggenberger-Bischoff Stiftung	Genome-wide copy number analysis of live cell malignant pleural mesothelioma biobank of Zürich University Hospital	E. Felley-Bosco
Schweizer Nationalfonds	RNA editing in mesothelioma: a new therapeutic target?	E. Felley-Bosco
Innovationspool	Implementierung der „Synapse 3D®“ Software von Fujifilm zur Planung und Simulation von (minimal-invasiven) anatomischen Lungenresektionen, Lungenvolumenreduktionschirurgie und minimal-invasiven Zugängen	C. Caviezel
Swiss National Fond	Reconditioning of marginal donor lung in <i>ex vivo</i> lung perfusion system using Perfluorocarbon based oxygen carrier	I. Inci
Foundation A. P. Naef (Lausanne)	Inhibition of ischemia-reperfusion injury using ATP sensitive potassium channel modulators in <i>ex vivo</i> lung perfusion system in lung transplantation	I. Inci
Lungenliga Graubünden	Inhibition of ischemia-reperfusion injury using ATP sensitive potassium channel modulators in <i>ex vivo</i> lung perfusion system in lung transplantation	I. Inci
Swiss Lung Foundation	A small animal model for reconditioning marginal donor lung in <i>ex vivo</i> lung perfusion system using an advanced perfluorocarbon emulsion before transplantation	I. Inci
CytoSorbents Europe GmbH	Cytokine removal during <i>ex vivo</i> lung perfusion improves early post-transplant lung function	I. Inci
Hartmann-Müller Stiftung	The protective effect of local anesthetics on primary graft dysfunction after experimental lung transplantation	W. Jungraithmayr
Stiftung für wissenschaftliche Forschung	Ein neues Therapiekonzept zur Bekämpfung des Lungenkarzinoms durch Hemmung der CD26/DPP4	W. Jungraithmayr
Stiftung für Krebsbekämpfung, University Zurich	Ein neues Therapiekonzept zur Bekämpfung des Lungenkarzinoms durch Hemmung der CD26/DPP4	W. Jungraithmayr
Stiftung für Angewandte Krebsforschung (SAKF) Zurich	Targeting human lung cancer by synergistic CD26- and checkpoint inhibitor	W. Jungraithmayr
Sophien-Stiftung, Zurich	A new therapeutic concept against lung cancer by inhibition of CD26/DPP4	W. Jungraithmayr
Stiftung Krebsforschung Schweiz	LC inhibition CD26/DPP4	W. Jungraithmayr
Stiftung für Angewandte Krebsforschung	Biomarkers with enzymatic activities for improved risk stratification of lung cancer patients	S. Hillinger
Stiftung für Angewandte Krebsforschung	Lung Cancer Screening	S. Hillinger

Urological Research :		
Max & Hedwig Niedermayer Stiftung	N-terminal androgen receptor targeting and autophagy inhibition to overcome resistance development during the evolution of prostate cancer treatment	B. Kranzbühler
Horizon 2020 Förderung, Staatssekretariat für Bildung, Forschung und Innovation	MUSIC: Multisystem Cell Therapy for Improvement of Urinary Continence	D. Eberli
Kurt und Senta Hermann Stiftung	N-terminal androgen receptor targeting and autophagy inhibition to overcome resistance development during the evolution of prostate cancer treatment	B. Kranzbühler
Commission for technology and Innovation (CTI)	Banking of human antibody repertoires for therapeutic use	M. Provenzano
Swiss National Science Foundation	Non-invasive monitoring of muscle precursor cell differentiation <i>in vivo</i> by magnetic resonance imaging	D. Eberli, Co-Applicant
Helmut Horten Stiftung	Cell-enriched hydrogel biomaterial with optimized release of NGF and VEGF for the improvement of innervation and functionality of bioengineered bladder tissue	D. Eberli
Baugarten Stiftung, Zürich	Neuro-elektromagnetische Stimulation und menschliche Muskelstammzellen zur Behandlung von Urininkontinenz	D. Eberli
Commission for technology and Innovation CTI	Biomarker discovery engine for novel cancer diagnostics based on liquid biopsy	D. Eberli
Commission for technology and Innovation CTI	Biomarker discovery engine for novel cancer diagnostics based on liquid biopsy	D. Eberli
Edoardo R. Giovanni, Giuseppe und Chiarina Sassella-Stiftung	Upregulation of prostate-specific membrane antigen (PSMA) expression by approved pharmacological compounds for improved prostate cancer imaging and therapy	B. Kranzbühler
Max und Hedwig Niedermayer Stiftung	Autophagy inhibition and second-line Hormone Therapy as a combined Therapy for Prostate Cancer	Souzan Salemi
Julius Müller Stiftung	Assay development for EV biomarker validation	Christopher Millan
Angela Reiffer Stiftung	Development of a liquid biopsy diagnostic test for prostate cancer base on novel extracellular viscle-based biomarkers	Christopher Millan
Krebsforschung Schweiz	miRNAs in testicular cancer patient surveillance	Thomas Hermanns, Christian Fankhauser, Jörg Beyer

Cranio-Maxillofacial Surgery Research:		
Schweizer National Fond	Osteoconductive and osteoinductive customized implants for large mandibular defects	F. E. Weber
Bundesstipendium	Pulp Regeneration	F. E. Weber

Surgical Intensive Care Medicine:

Vontobel-Stiftung	Biased PAR-2 Signaling by Thrombomodulin Bound Thrombin	R. Schüpbach
SPHN	Swiss Personalised Sepsis Study	R. Schüpbach
Béatrice Ederer-Weber Foundation	The bacterial microbiota in burn patients – understanding microbial evolution under antibiotic selection pressure for future therapeutic and preventive approaches	P. Bühler

Animal Welfare in Biomedical Research:

DFG Project funding in FOR 2591 Forschungsverbund	Severity assessment in animal based research	P. Jirkof, M. Arras
SGV Travelgrant	for Congress «Measuring Behaviour» in Manchester UK	M. Durst
Bf3R, Berlin, Project Funding	Integration of a refinement project on pain management in the mouse osteotomy model in a basic research study on bone healing (Refine-MOMo 1328-54) Project Funding	P. Jirkof, M. Durst

6. Publications 2018

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3. Abu Hilal, M., et al., and P.-A. Clavien, The Southampton Consensus Guidelines for Laparoscopic Liver Surgery: From Indication to Implementation. *Annals of Surgery*, 2018. 268(1): p. 11-18.
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