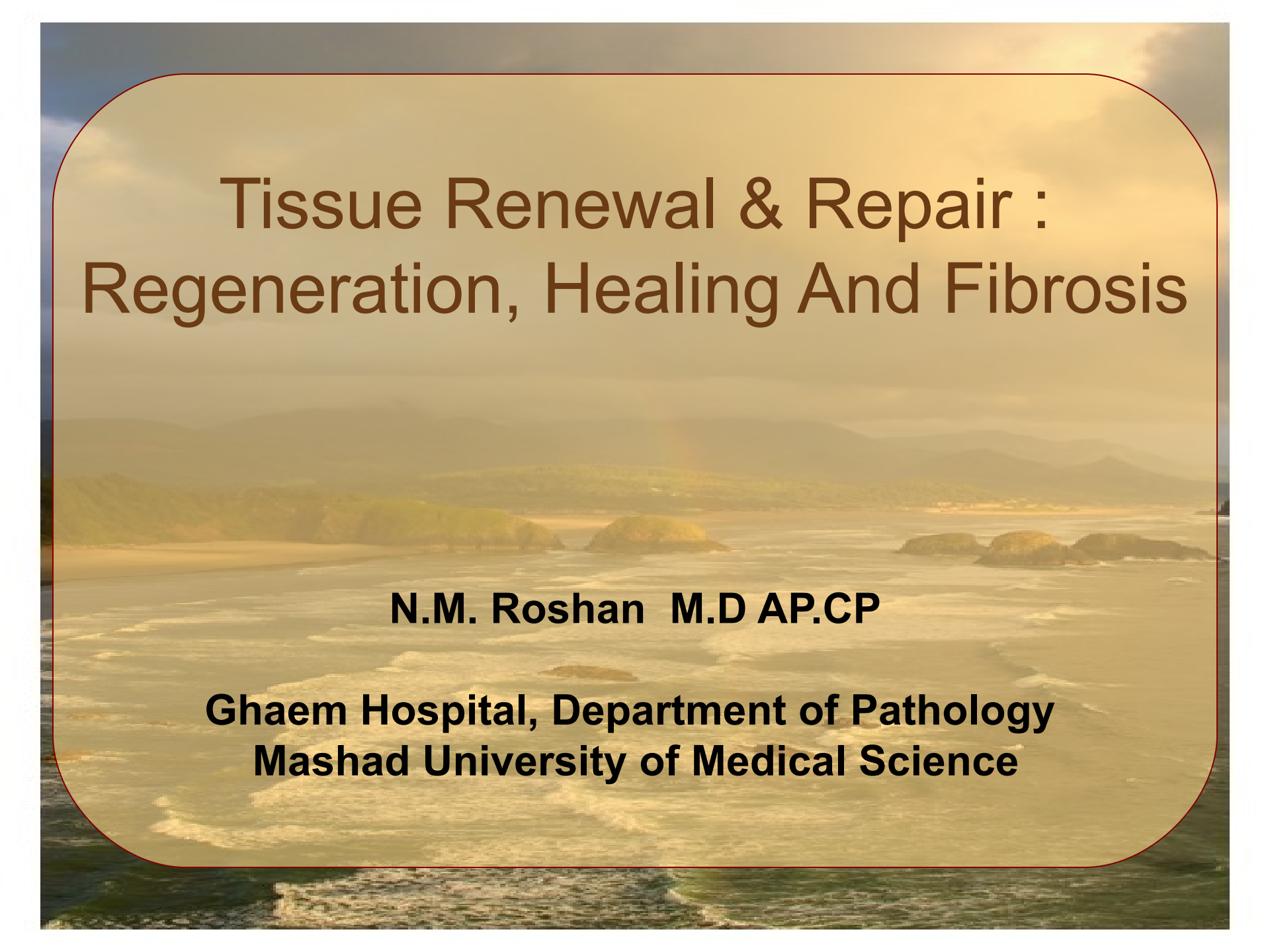




Tissue Renewal & Repair : Regeneration, Healing And Fibrosis

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**Ghaem Hospital, Department of Pathology
Mashad University of Medical Science**

Definitions

- **Regeneration** :
 - to growth of cells and tissues to replace lost structures
 - Kidney, Liver
 - hematopoietic system , epithelia of the skin and gastrointestinal tract

- **Healing** :

is a tissue response to

- (1) a wound (commonly in the skin)
- (2) to inflammatory processes in internal organs
- (3) to cell necrosis in organs incapable of regeneration

Regeneration + Scar formation (stomach, heart, pericard,..)

NORMAL HOMEOSTASIS
(balance of proliferation and apoptosis)



REGENERATION

HEALING

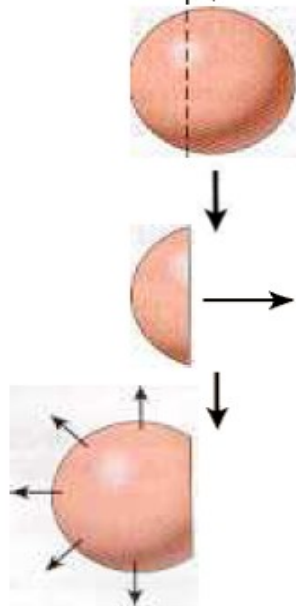
Renewing tissues

Stable tissues

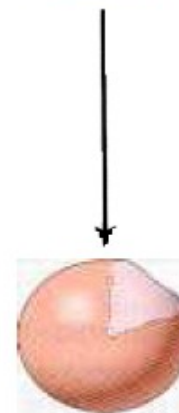
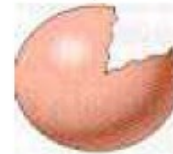
Wound

Chronic inflammation

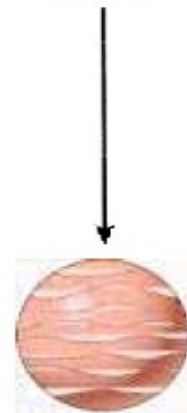
Epidermis, GI
tract epithelium,
hematopoietic system



Compensatory growth
of liver and kidney



Wound healing,
scar formation



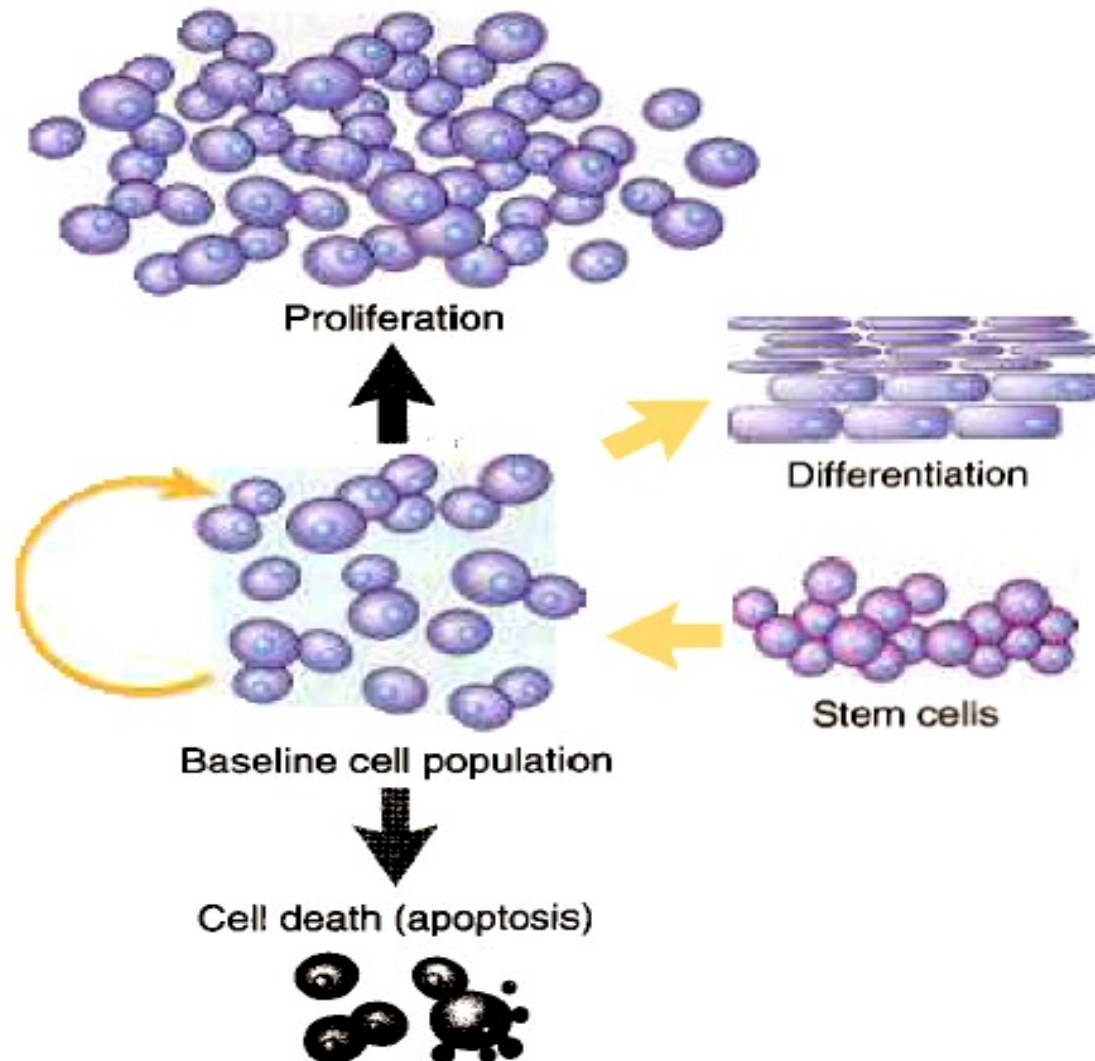
Fibrosis

Regeneration & Healing

Regeneration requires an intact connective tissue scaffold.

By contrast, healing with scar formation occurs if the extracellular matrix (ECM) framework is damaged, causing alterations of the tissue architecture

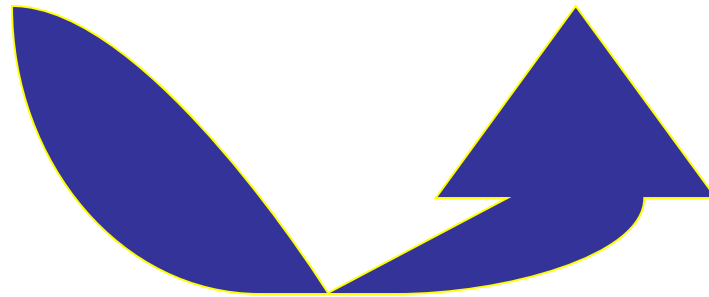
Control of Normal Cell Proliferation and Tissue Growth



Cell proliferation

Physiologic

Pathologic



Control of Normal Cell Proliferation and Tissue Growth

- Liver and kidney
- Myocytes and neurons: terminally differentiated cells
- bone marrow and the epithelia of the skin and gut

1. Continuously dividing tissues (labile tissues)

surface epithelia, stratified squamous surfaces of the skin, oral cavity, vagina, and cervix; the lining mucosa of all the excretory ducts of the glands of the body (salivary glands, pancreas, biliary tract); the columnar epithelium of the gastrointestinal tract and uterus; the transitional epithelium of the urinary tract, and cells of the bone marrow and hematopoietic tissues

2- Quiescent (stable) tissues

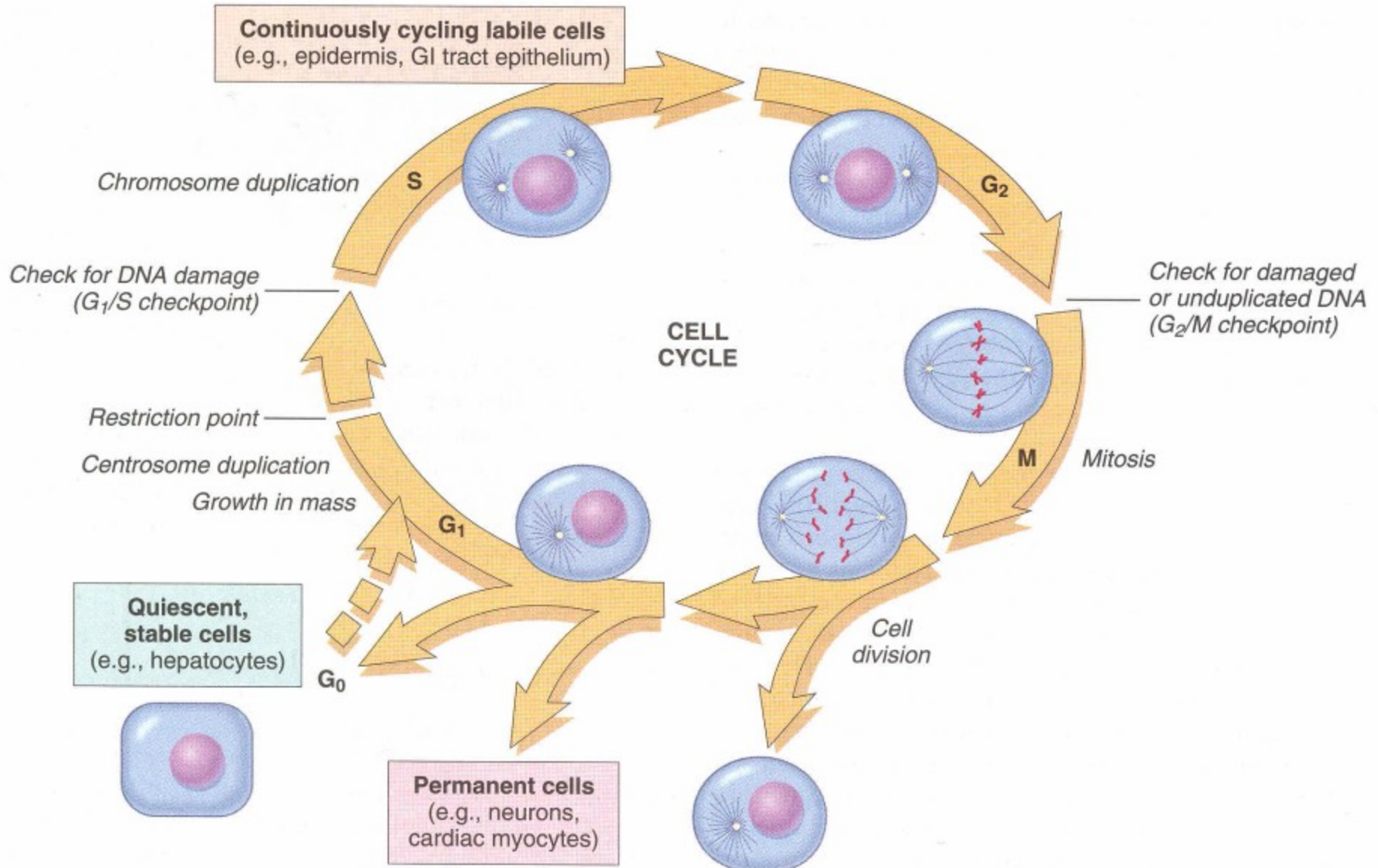
parenchymal cells of liver, kidneys, and pancreas; mesenchymal cells, such as fibroblasts and smooth muscle; vascular endothelial cells

resting lymphocytes and other leukocytes

3- Nondividing (permanent) tissues

neurons and skeletal and cardiac muscle
cells

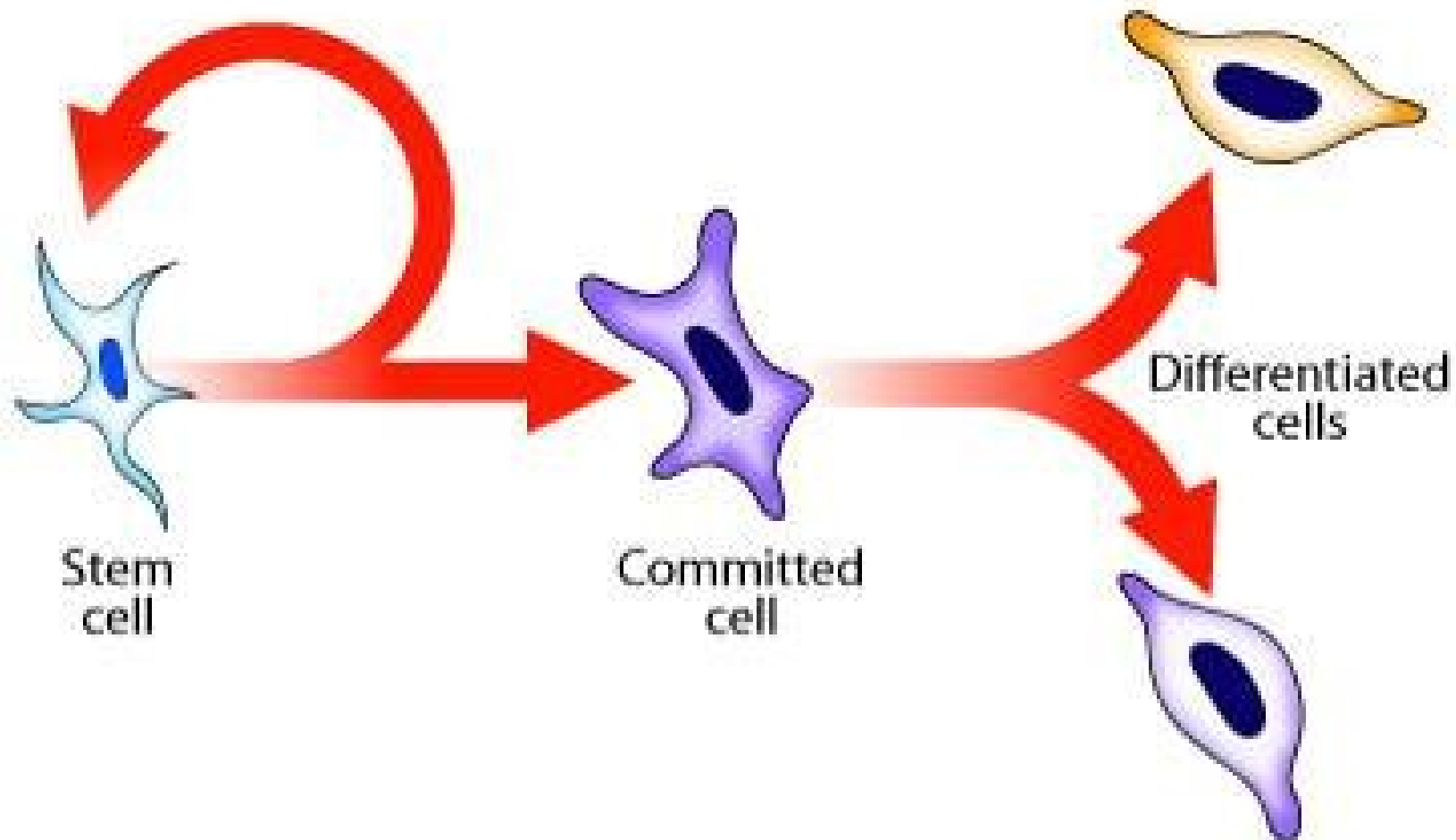
TISSUE-PROLIFERATIVE ACTIVITY



STEM CELLS

Regenerative Medicine

- Prolonged self-renewal capacity
- Asymmetric replication



Stem cell
e.g. zygote

**symmetrical
cell division**

Stem cell + stem cell
2 - cell stage

A blue arrow points from the 'Stem cell' box to the 'Stem cell + stem cell' box.

Stem cell
*e.g. Hematopoietic
stem cell*

**asymmetrical
cell division**

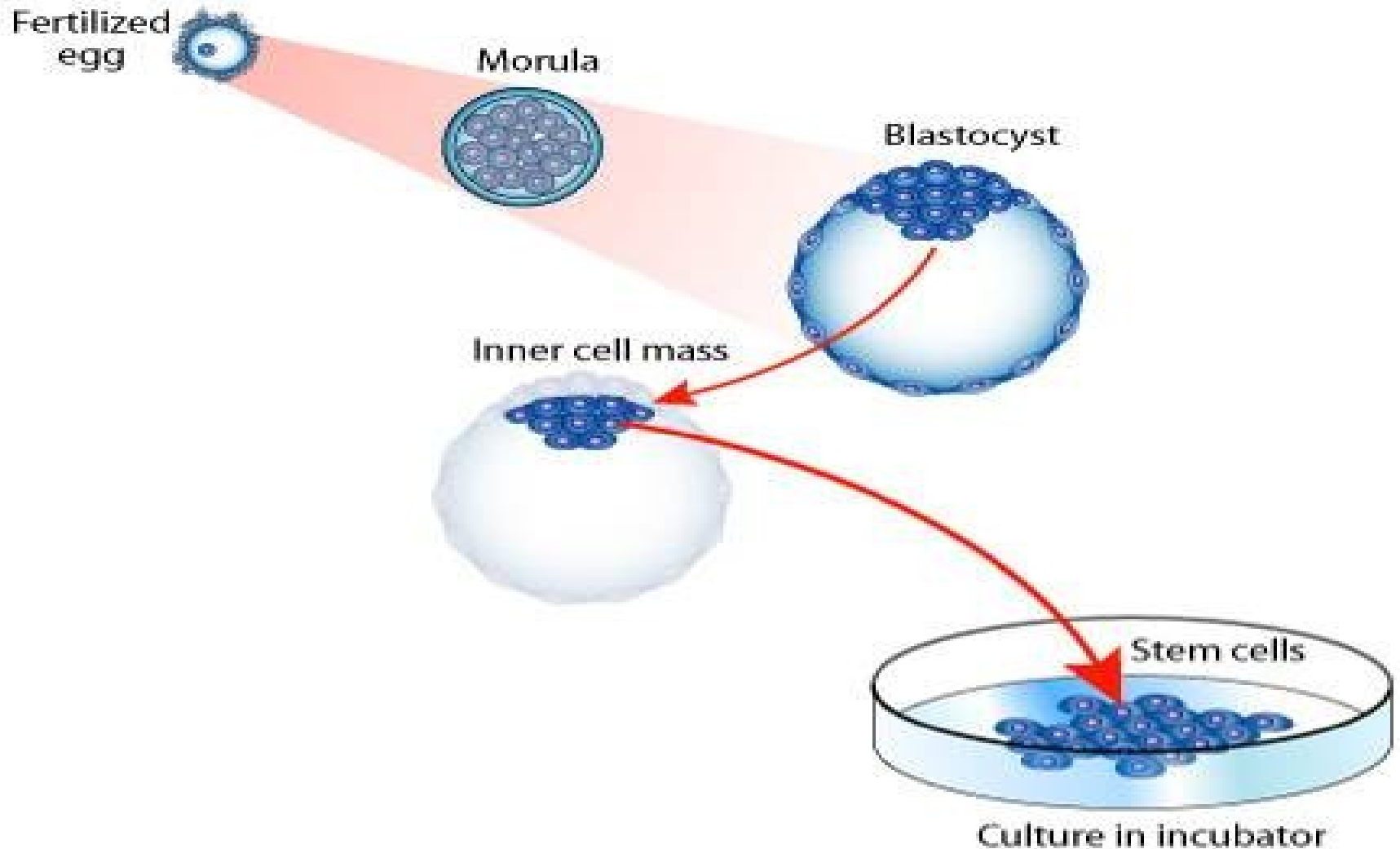
Stem cell + progenitor cell
*Lymphoid precursor +
Hematopoietic stem cell*

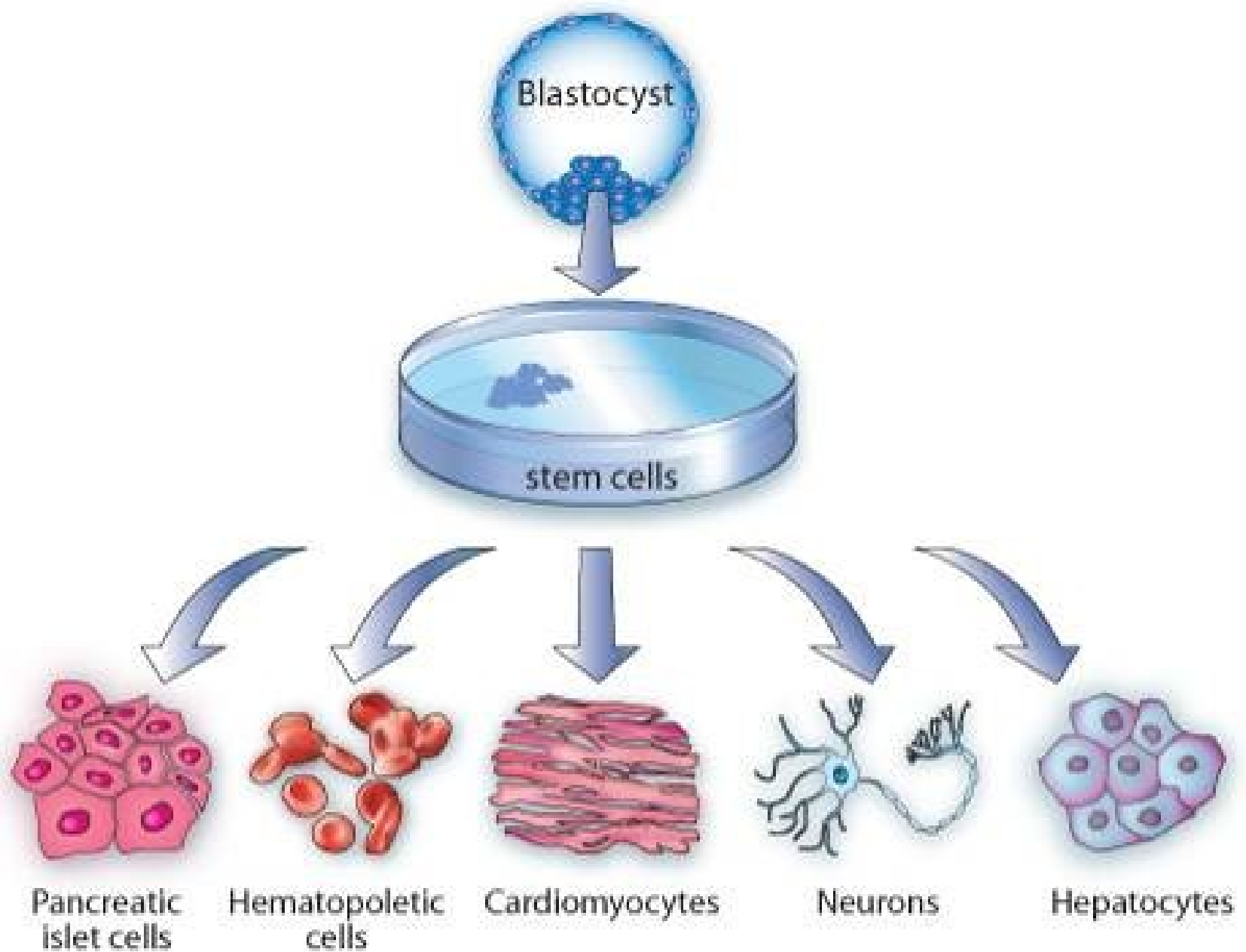
A blue arrow points from the 'Stem cell' box to the 'Stem cell + progenitor cell' box.

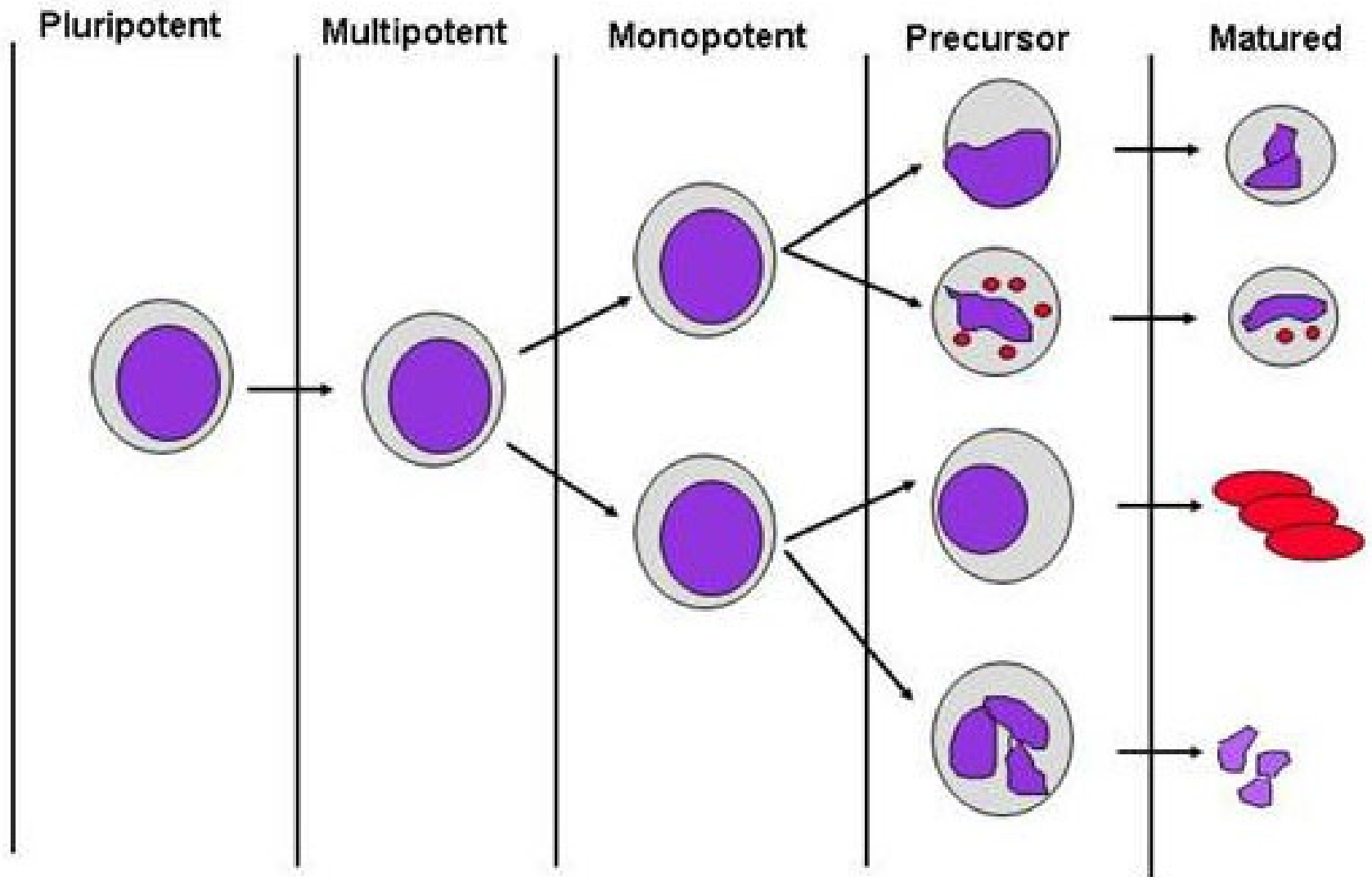
Regenerative Medicine

- The realization that some stem cells present in tissues of humans and mice may be similar to embryonic stem cells
- Identification of stem cells in various tissues, including the brain
- Recognition that stem cells from various tissues and particularly from the bone marrow may have broad developmental plasticity

Embryonic Stem Cells (ES)







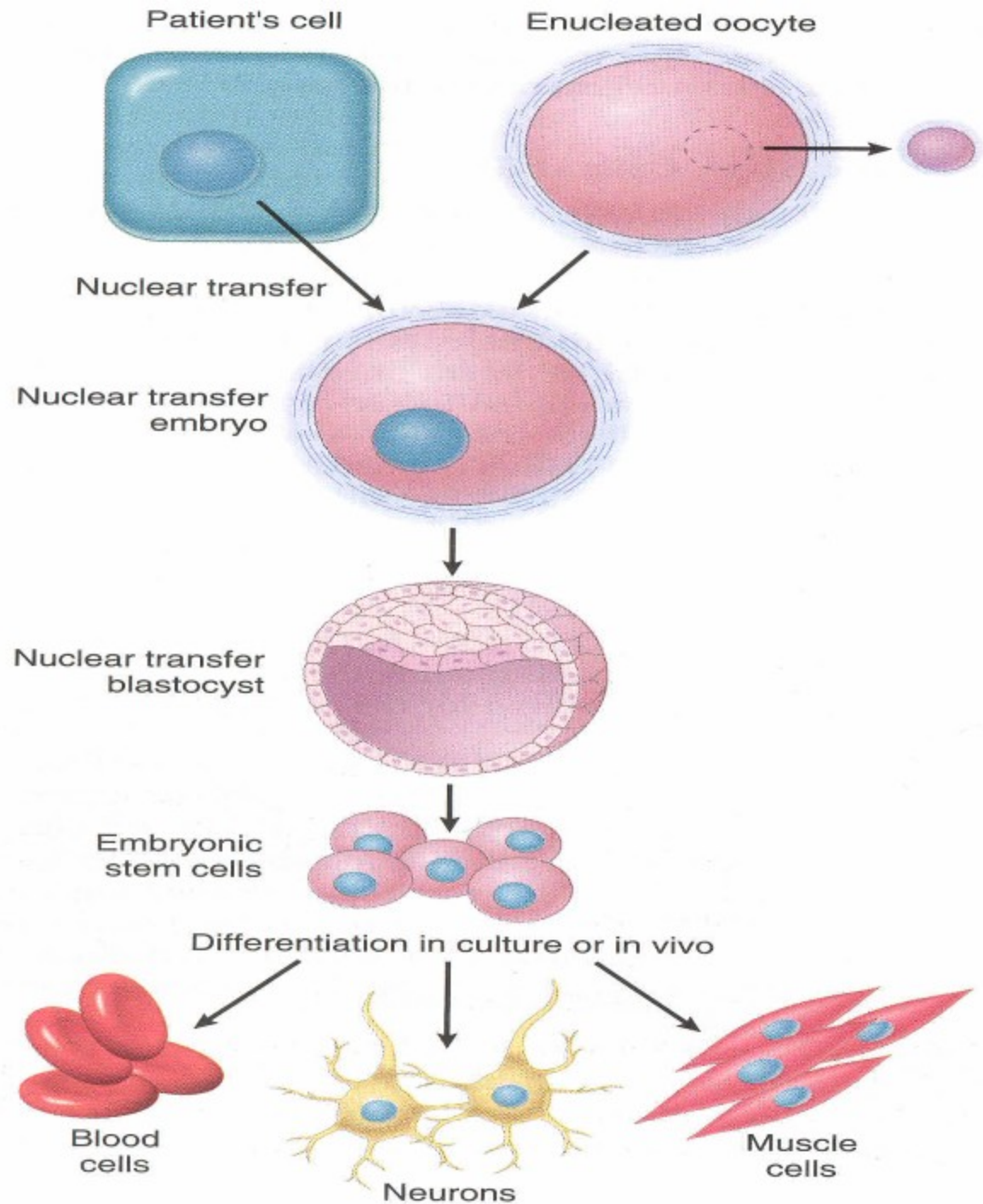
Embryonic Stem Cells (ES)

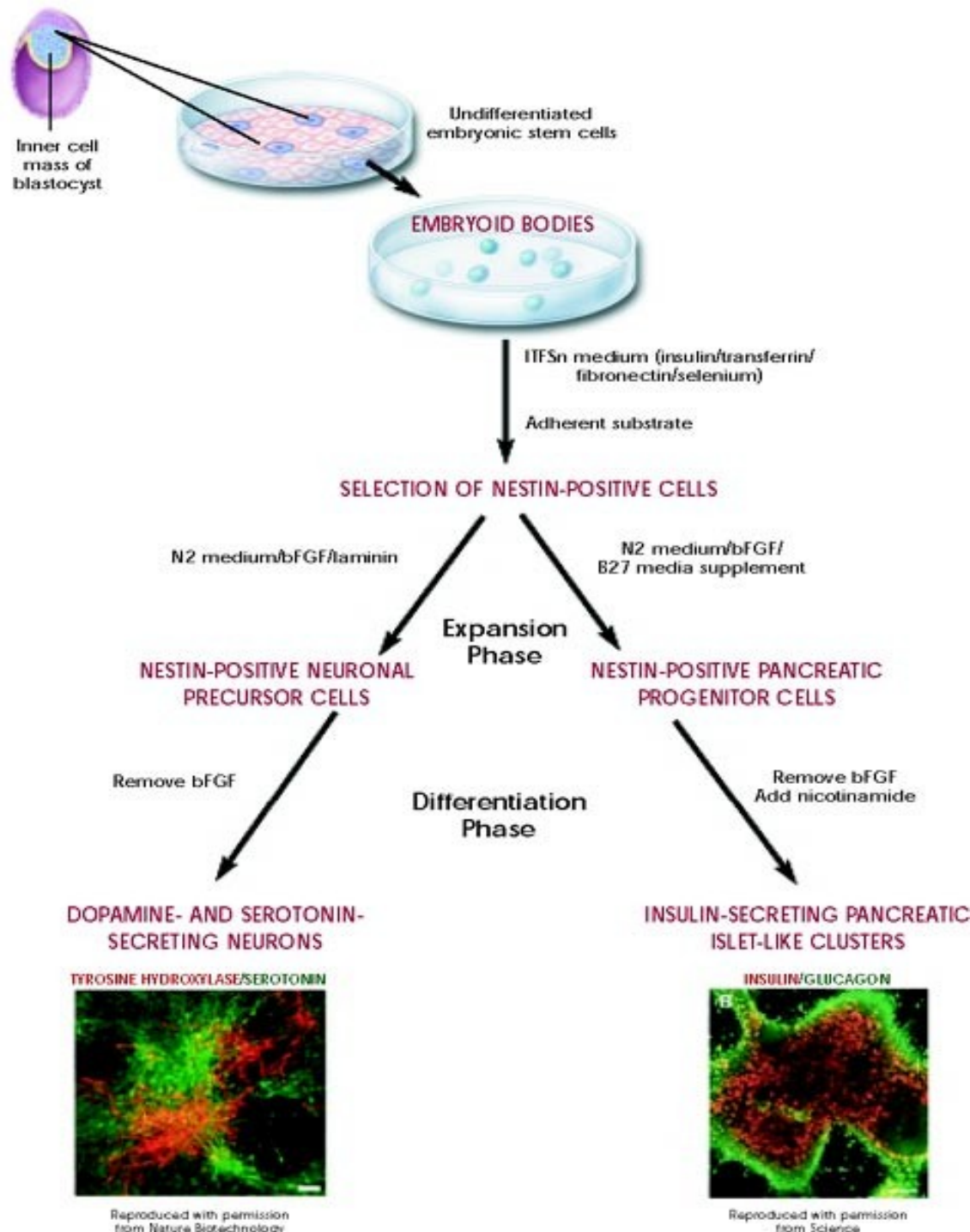
- Study the specific signals and differentiation steps required for the development of many tissues
- Knockout mice

Embryonic Stem Cells (ES)

In the future, be used to repopulate
damaged organs
(Therapeutic cloning)

Therapeutic cloning





Adult Stem Cells

Pluripotent or a more
Restricted differentiation ?

Stem Cells

```
graph TD; A[Stem Cells] --> B[Embryonic Stem Cells]; A --> C[Adult Stem Cells]; C --> D[Bone Marrow Stem Cells]; C --> E[Tissue Stem Cells]; D --> F[Hematopoietic Stem Cells]; D --> G[Bone marrow stromal cells]; D --> H[Multipotent adult progenitor cells];
```

**Embryonic
Stem Cells**

**Adult
Stem Cells**

Bone Marrow
Stem Cells

Tissue
Stem Cells

Hematopoietic
Stem Cells

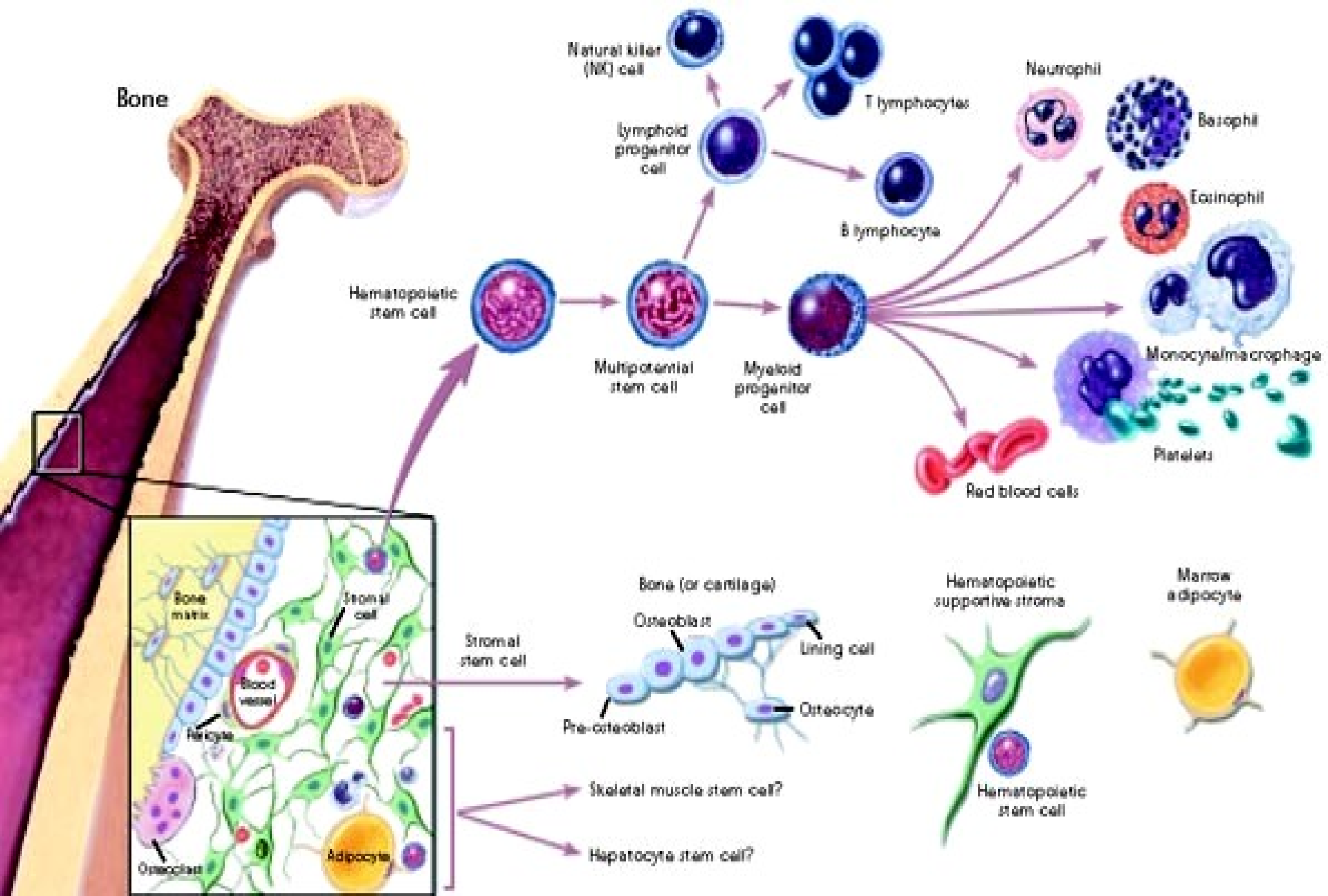
Bone marrow
stromal cells

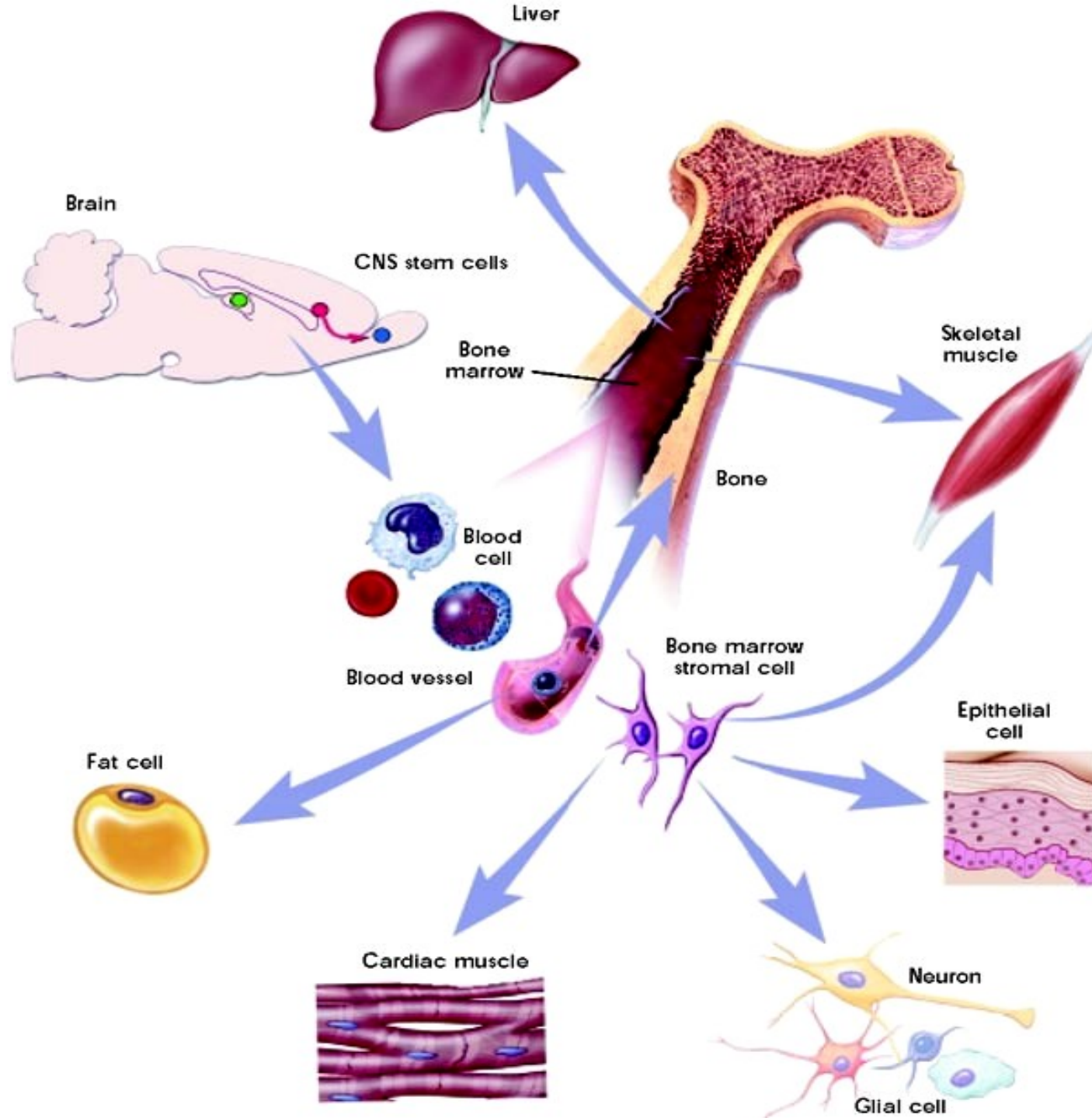
Multipotent adult
progenitor cells

Bone Marrow Stem Cells

Hematopoietic Stem Cells (HSCs)

- collected directly from the bone marrow, umbilical cord blood, and from circulating blood of individuals receiving cytokines
- capable of giving rise to neurons, hepatocytes, and other cell types
- **Transdifferentiation:** A change in stem cell differentiation from one cell type to another
- **Developmental plasticity:** The multiplicity of stem cell differentiation options
- **Cell fusion:** transplanted HSCs fuse with host cells and transfer genetic material to them, thus giving the false appearance of having transdifferentiated with generation of new cells in the host

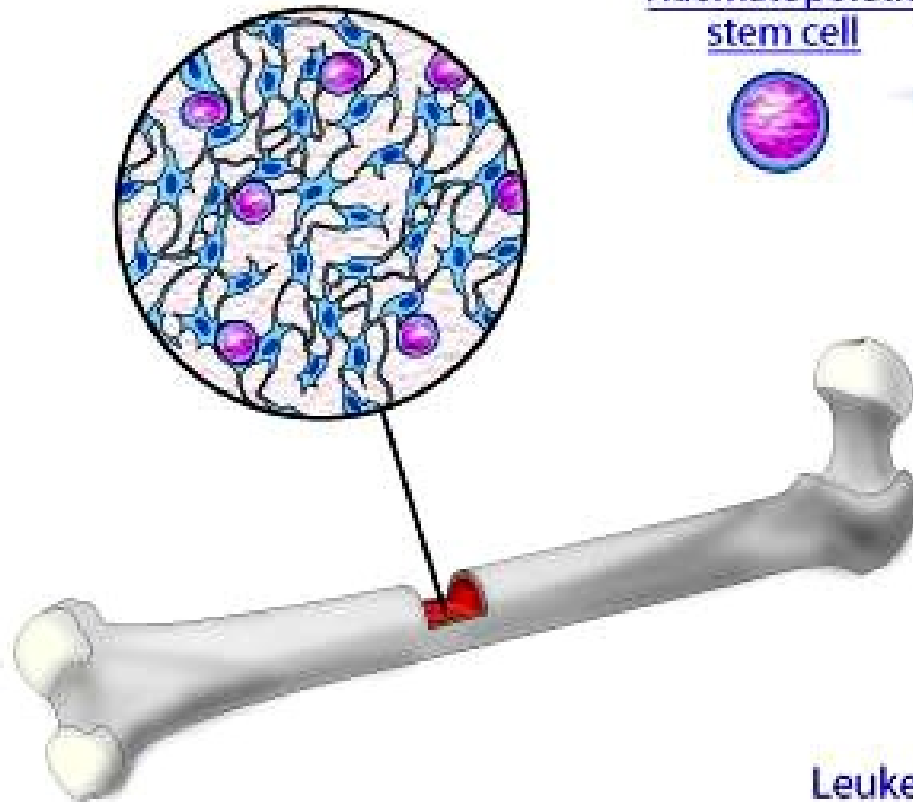




Haematopoietic stem cell



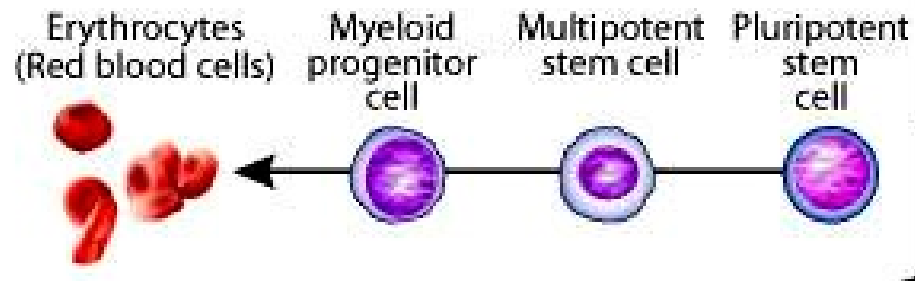
Stem cells multiplied
in cell culture



Leukemia patient

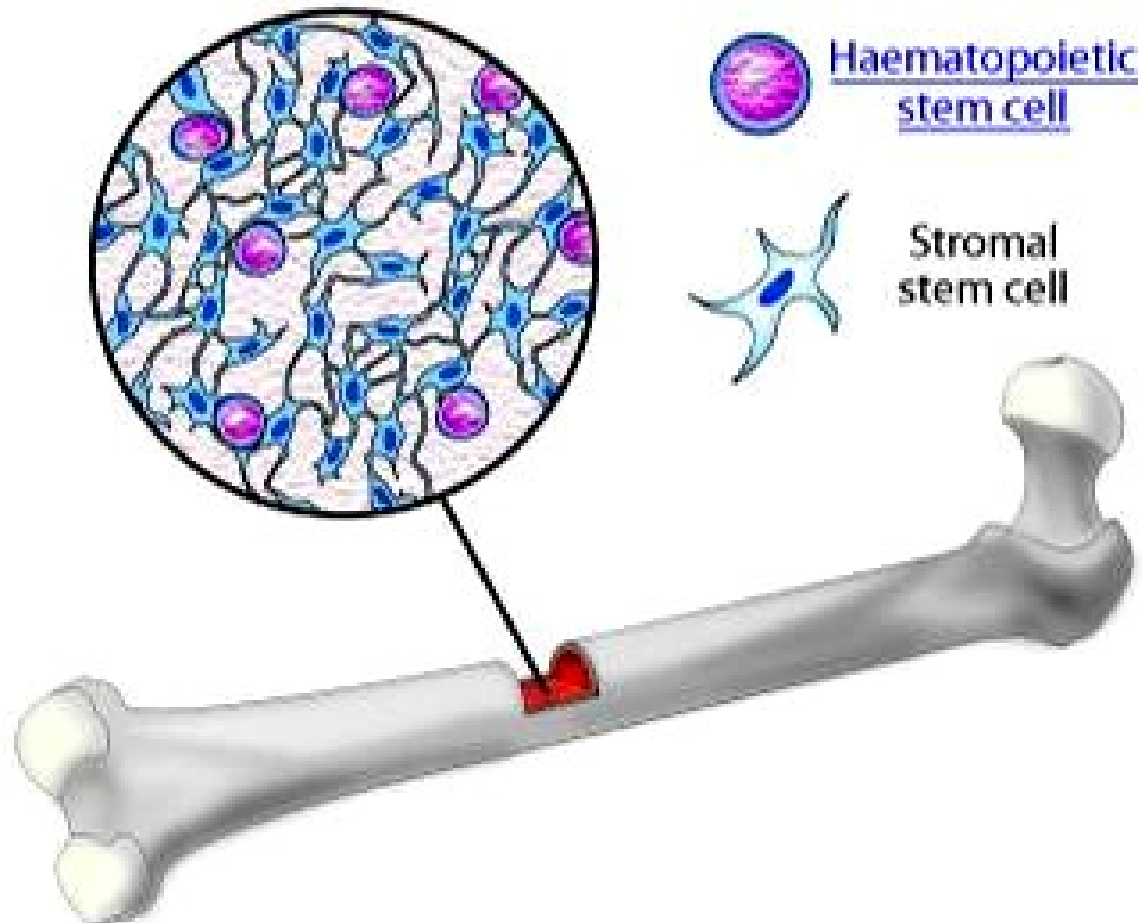
Transplant into
the patient

Inside the patient



Bone Marrow Stem Cells

Stromal cells



Bone Marrow Stem Cells

Bone marrow stromal cells

- Depending on the tissue environment, can generate chondrocytes, osteoblasts, adipocytes, myoblasts, and endothelial cell precursors

Growth Factors, Cytokines, Matrix

Pluripotent
stromal cells

VEGF
FGF2

Endothelial
cells

myo D
myogenin
others

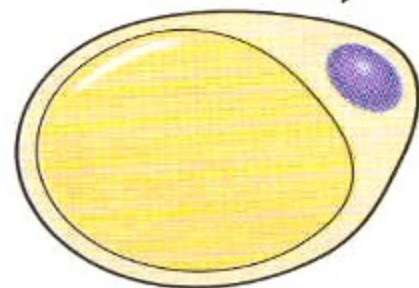
Myotube

Sox9

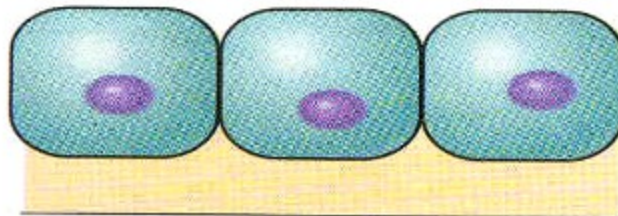
Chondroblasts

PPAR γ

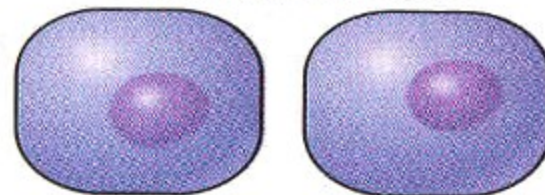
CBFA1



Fat cell



Osteoblasts



Bone Marrow Stem Cells

Multipotent adult progenitor cells (MAPCs)

- mesodermal, endodermal, and euroectodermal cell types
- isolated from muscle, brain, and skin, and, similar to bone marrow MAPCs, can be made to differentiate into endothelium neurons, hevatocytes and other cell types
- MAPCs constitute a population of stem cells derived from, or closely related to, ES cells

Stem Cells

```
graph TD; A[Stem Cells] --> B[Embryonic Stem Cells]; A --> C[Adult Stem Cells]; C --> D[Bone Marrow Stem Cells]; C --> E[Tissue Stem Cells]; D --> F[Hematopoietic Stem Cells]; D --> G[Bone marrow stromal cells]; D --> H[Multipotent adult progenitor cells];
```

**Embryonic
Stem Cells**

**Adult
Stem Cells**

Bone Marrow
Stem Cells

Tissue
Stem Cells

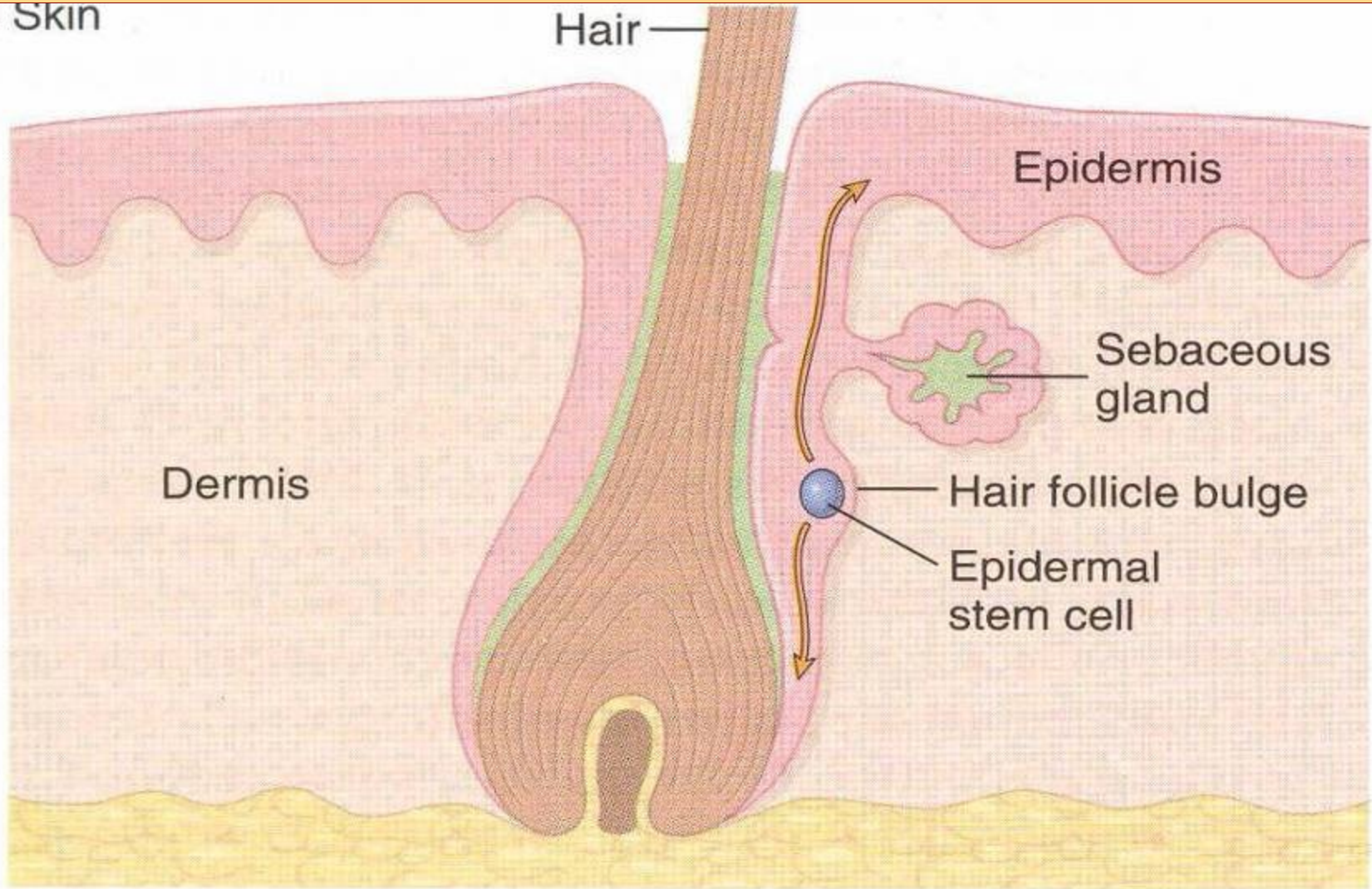
Hematopoietic
Stem Cells

Bone marrow
stromal cells

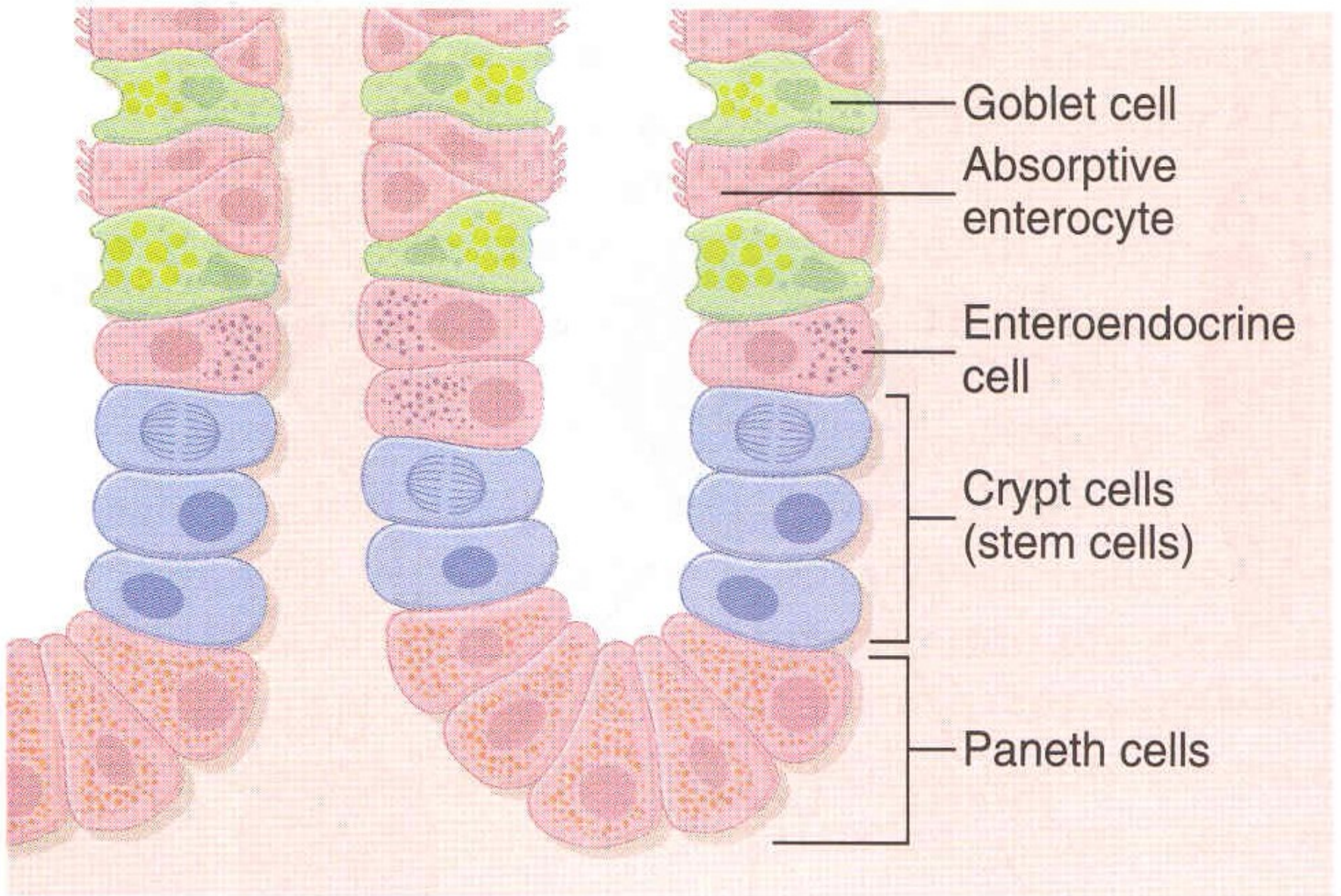
Multipotent adult
progenitor cells

Tissue Stem cells

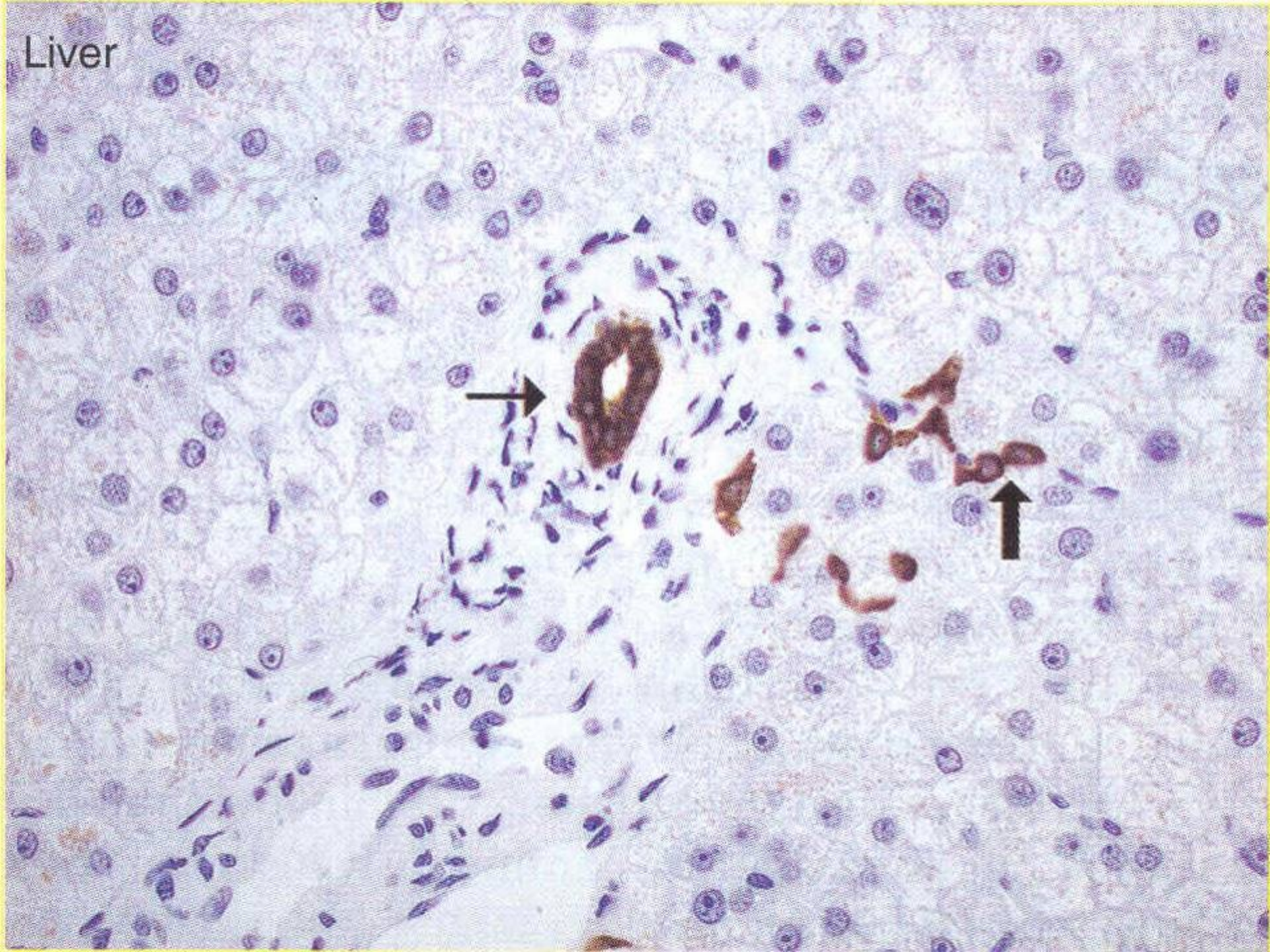
A. Skin



B. Intestine



Liver



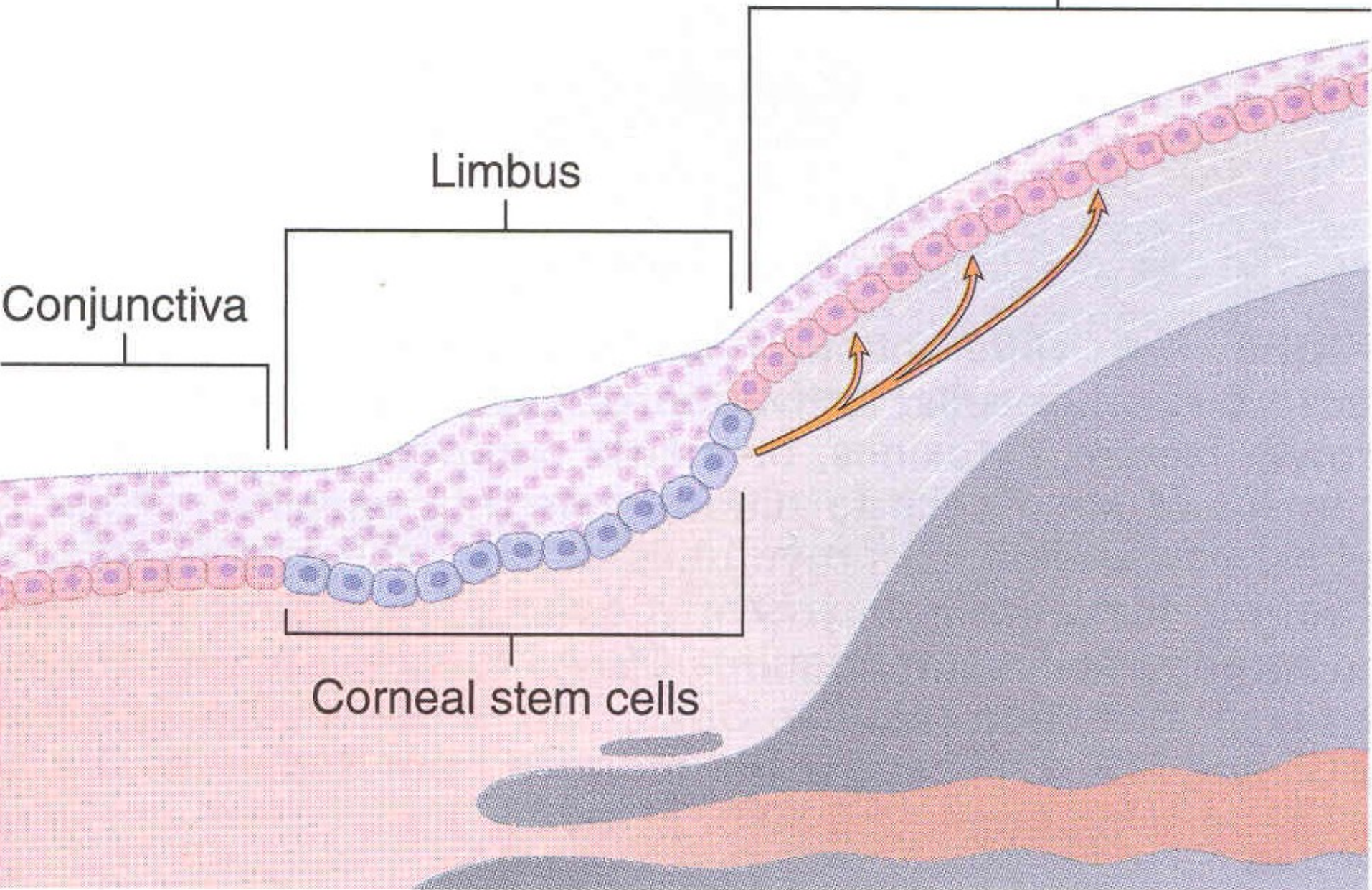
Cornea

Cornea

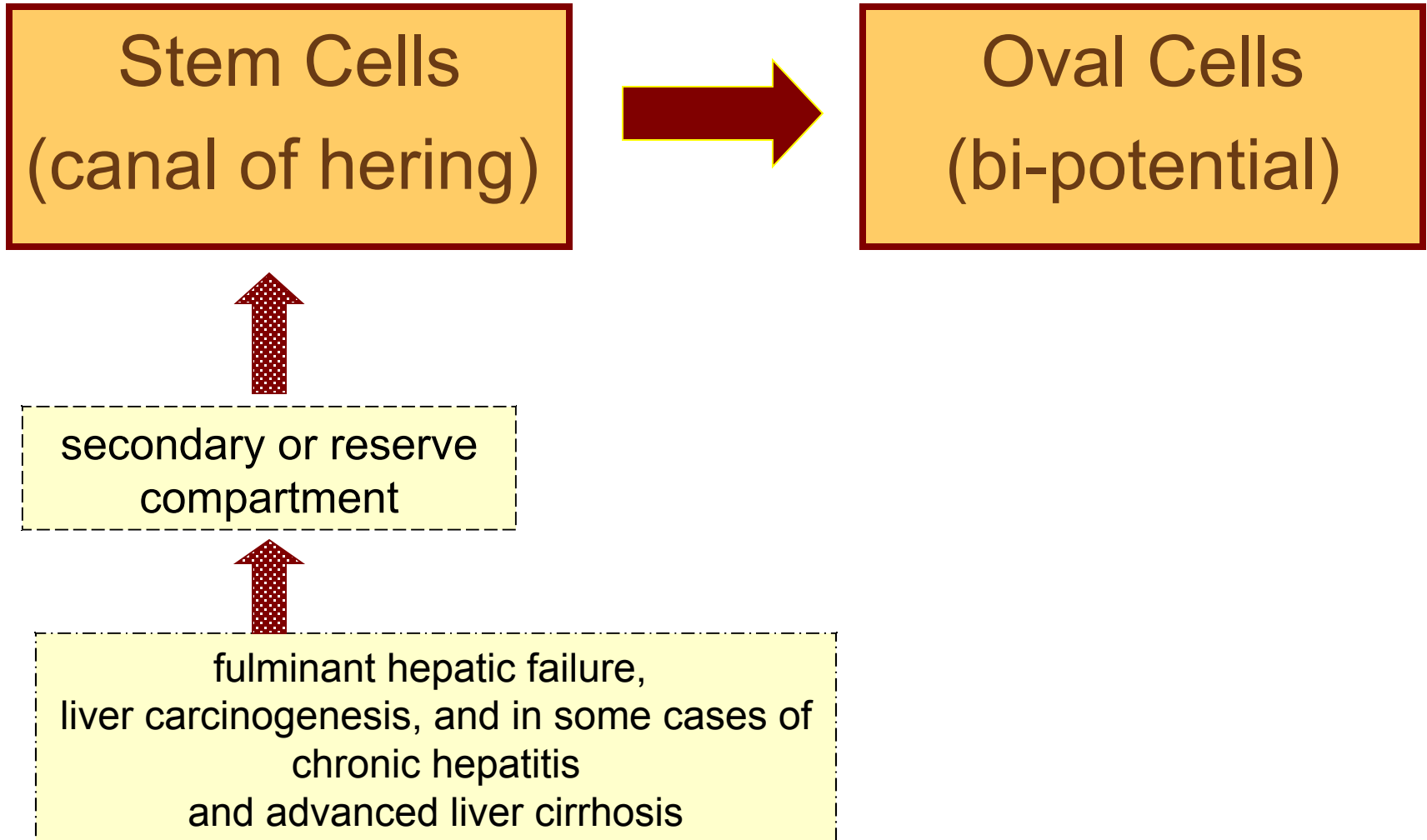
Limbus

Conjunctiva

Corneal stem cells



Liver stem cells



Neural stem cells

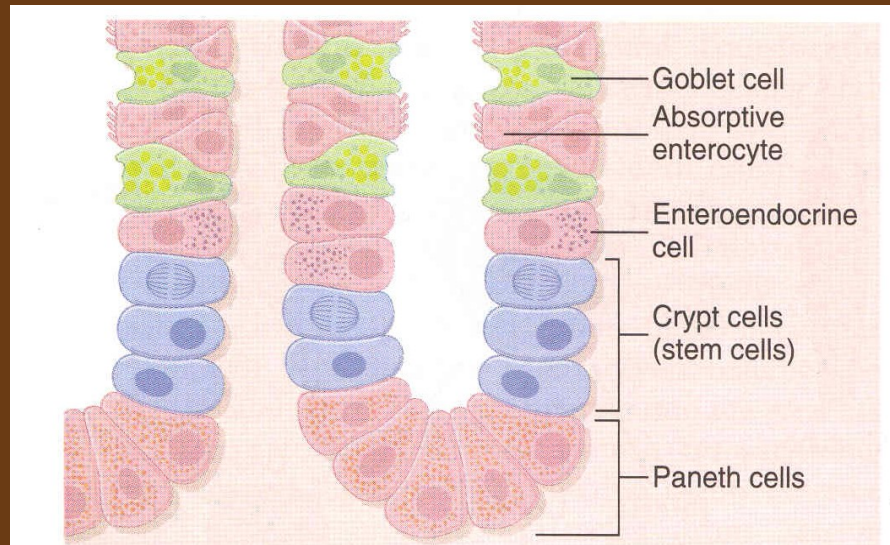
- rodent brains: olfactory bulb, and dentate gyrus of the hippocampus
- Canaries: vocal center neurogenesis
- mammalian hippocampus

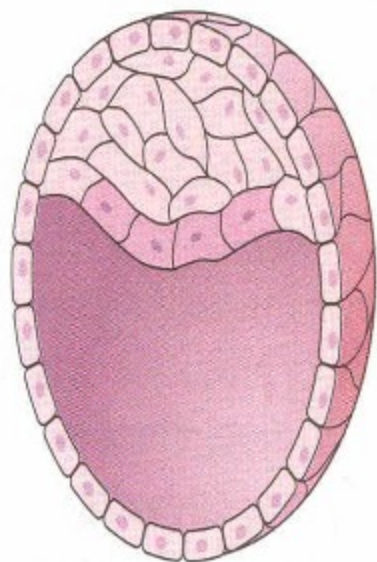
Skeletal and Cardiac muscle

- In contrast to hepatocytes, myocytes of skeletal muscle do not divide, even after injury.
- **satellite cells** (beneath the myocyte basal lamina)
- Stem cells have not been found in cardiac muscle

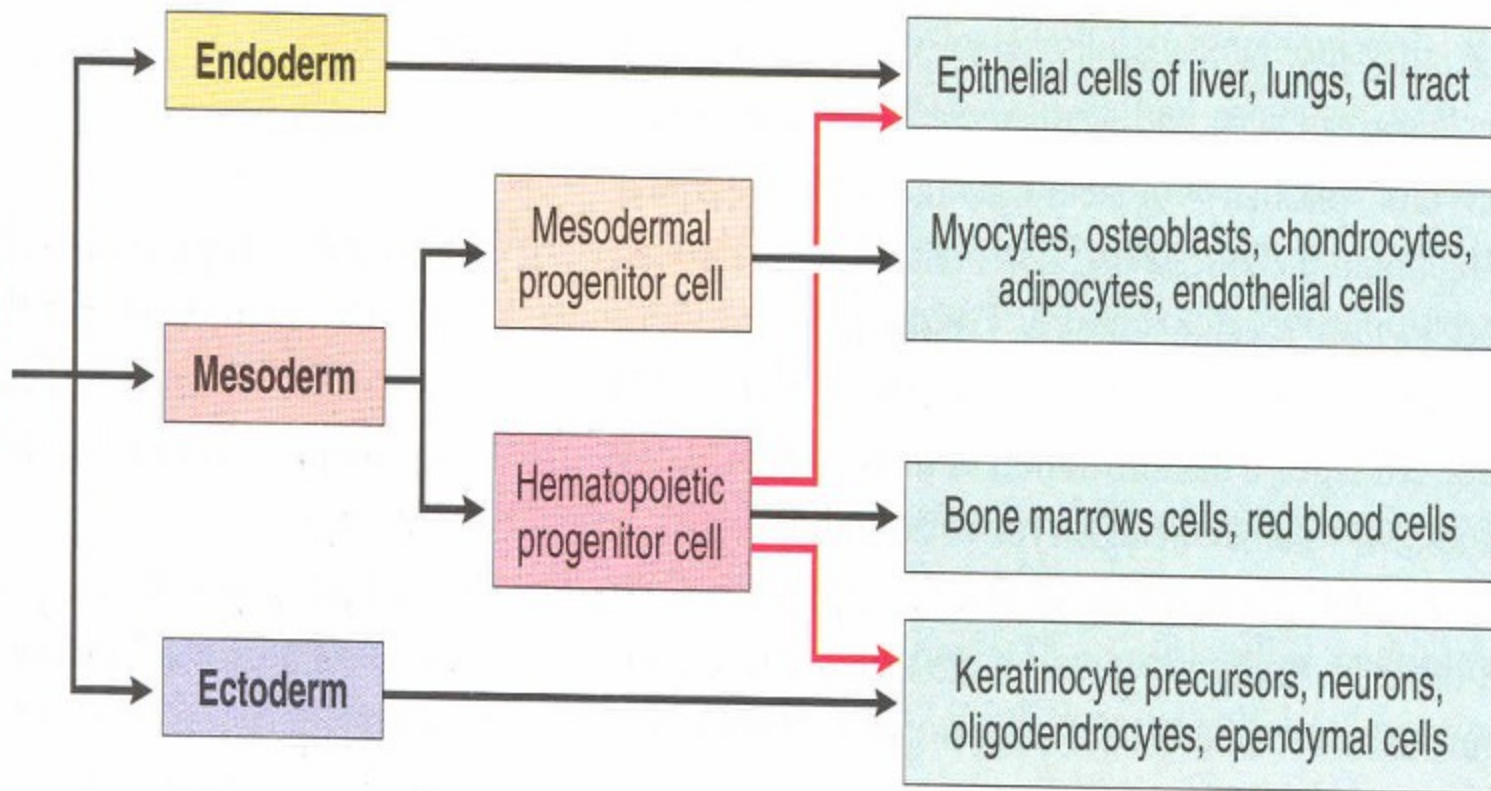
Epithelial Tissue

1. Stem cells
2. Highly proliferative intermediate cells that constitute an amplifying compartment





Blastocyst



Key events in stem cell research

- **1960s** - **Joseph Altman** and **Gopal Das** present evidence of adult **neurogenesis**, ongoing stem cell activity in the brain; their reports contradict **Cajal's** "no new neurons" dogma are largely ignored
- **1963** - **McCulloch** and **Till** illustrate the presence of self-renewing stem cells in mouse bone marrow
- **1968** - **bone marrow transplant** between two siblings successfully treats **SCID**
- **1978** - **haematopoietic stem cells** are discovered in human **cord blood**
- **1981** - mouse **embryonic stem cells** are derived from the **inner cell mass**
- **1992** - neural stem cells are cultured *in vitro* as neurospheres
- **1995** - **President Bill Clinton** signs into law the **Dickey Amendment** which makes it illegal for Federal money to be used for research where stem cells are derived from the destruction of the embryo.

Key events in stem cell research

- **1997** - leukemia is shown to originate from a haematopoietic stem cell, the first direct evidence for **cancer stem cells**
- **1998** - **James Thomson** and coworkers derive the first human embryonic **stem cell line** at the University of Wisconsin-Madison.
- **2000s** - several reports of **adult stem cell** plasticity are published
- **2003** - Dr. Songtao Shi of NIH discovers new source of adult stem cells in children's primary teeth
- **2004-2005** - **Hwang Woo-Suk** claims to have created several human **embryonic stem cell** lines from unfertilised human **oocytes**. The lines are later shown to be fabricated
- **July 19, 2006** - **President George W. Bush** vetoes a bill which would have allowed Federal money to be used for research where stem cells are derived from the destruction of the embryo



Frequently Asked Questions

- ▶ [What are stem cells?](#)
- ▶ [Can they cure diseases?](#)
- ▶ [Are there ethical issues?](#)
- ▶ [What is the U.S. policy?](#)
- ▶ [More FAQs](#)
- ▶ [Links to related resources](#)

Stem Cell Research

- ▶ [Stem Cell Registry](#)
- ▶ [Current Research](#)
- ▶ [Upcoming Events](#)
- ▶ [Funding for Research](#)
- ▶ [Training Programs](#)
- ▶ [Scientific Literature](#)

Tools

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- ▶ [Glossary](#)
- ▶ [Downloads](#)
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[smaller](#) | [BIGGER](#)

The Promise of Stem Cells

Stem cells can develop into different cell types. They may offer a renewable source of replacement cells to treat diseases, conditions, and disabilities.

[Learn more about stem cells](#)

U.S. Policy on Stem Cell Research

In 2001, President George W. Bush announced that federal funds may be awarded for research using human embryonic stem cells that meet approved criteria.

[Read the eligibility criteria](#)

The NIH Stem Cell Registry

The Registry lists human embryonic stem cell (hESC) lines eligible for federal funding and provides contact information to help investigators acquire stem cells.

[Find hESC lines on the Registry](#)

hESC lines now available from the
National Stem Cell Bank



stem cell

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Medical Biotechnology: Achievements, Prospects and Perceptions

By [Albert Sasson](#)



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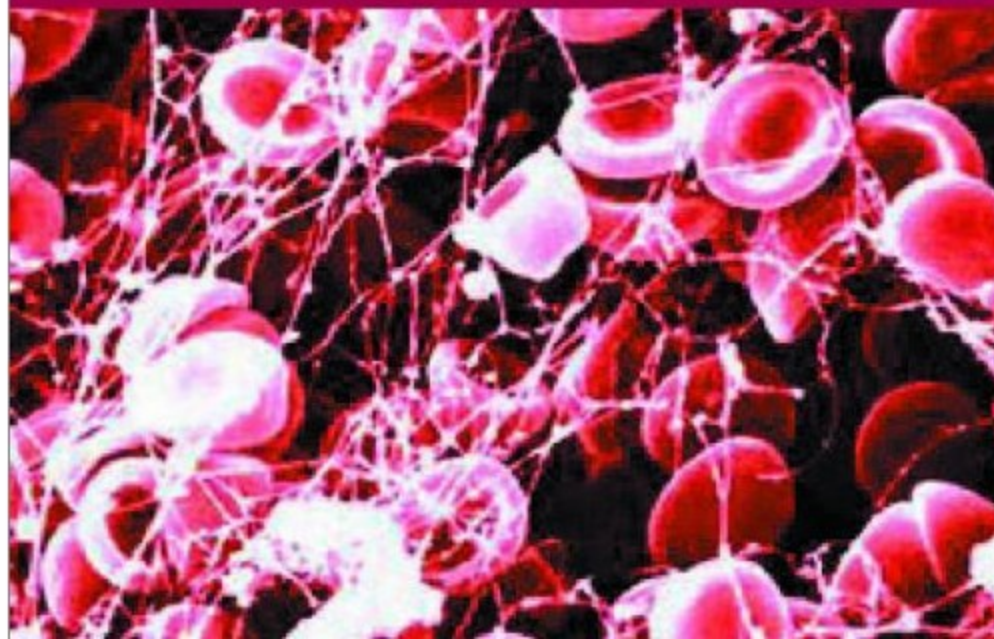
[Page 1](#)

... such as **stem cell** research and ...

[Page 15](#)

Medical Biotechnology

Achievements, Prospects and Perceptions



Alexander Battler
Jonathan Leor *Editors*

Stem Cell and Gene-Based Therapy



Frontiers in Regenerative
Medicine

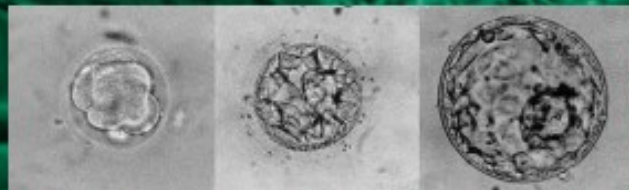
 Springer

New Frontiers in Regenerative Medicine

**M. Kusano
S. Shioda (Eds.)**

Human Embryonic Stem Cell Protocols

Edited by
Kursad Turksen



**Includes
Companion CD**



 **HUMANA PRESS**

REGENERATIVE BIOLOGY AND MEDICINE



David L. Stocum

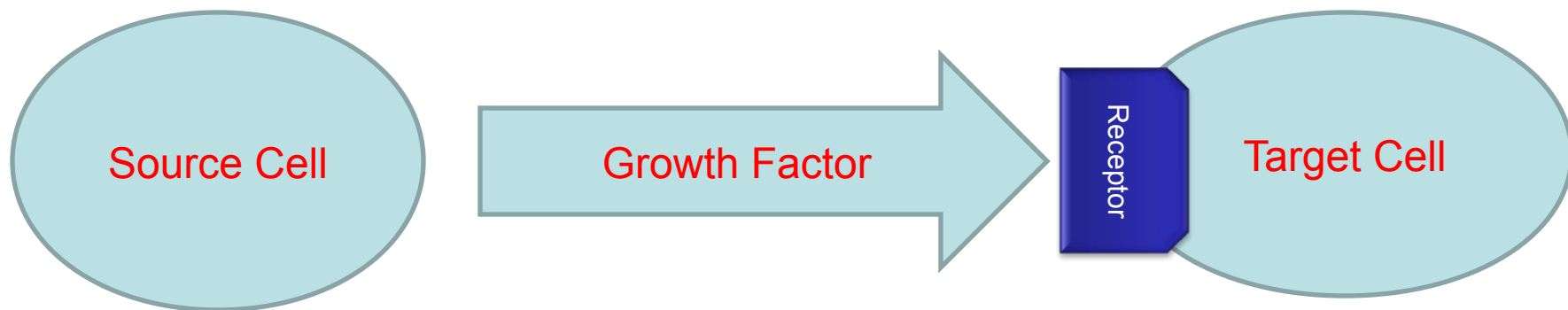




GROWTH FACTORS

- Polypeptide growth factors
- Restricted cellular targets ?

Cell proliferation, cell locomotion, contractility, differentiation, and angiogenesis



Epidermal Growth Factor (EGF) and Transforming Growth Factor- α (TGF- α)

- Common receptor : EGFR
- EGF: Precocious tooth eruption and eyelid opening in newborn mice

Symbol	Source	Functions
EGF	Platelets, macrophages, saliva, urine, milk, plasma	Mitogenic for keratinocytes and fibroblasts; stimulates keratinocyte migration and granulation tissue formation
TGF- α	Macrophages, T lymphocytes, keratinocytes, and many tissues	Similar to EGF; stimulates replication of hepatocytes and certain epithelial cells

HGF: scatter factor, hepatocyte and biliary duct,

VEGF: Vasculogenesis, Angiogenesis

Mice that lack a single allele of the gene (heterozygous VEGF knockout mice) die during embryonic development with defective vasculogenesis

Hepatocyte growth factor/scatter factor	HGF	Mesenchymal cells	Enhances proliferation of epithelial and endothelial cells, and of hepatocytes; increases cell motility
Vascular endothelial cell growth factor (isoforms A, B, C, D)	VEGF	Mesenchymal cells	Increases vascular permeability; mitogenic for endothelial cells (see Table 3–3)
Platelet-derived growth factor (isoforms A, B, C, D)	PDGF	Platelets, macrophages, endothelial cells, keratinocytes, smooth muscle cells	Chemotactic for PMNs, macrophages, fibroblasts, and smooth muscle cells; activates PMNs, macrophages, and fibroblasts; mitogenic for fibroblasts, endothelial cells, and smooth muscle cells; stimulates production of MMPs, fibronectin, and HA; stimulates angiogenesis and wound contraction; remodeling; inhibits platelet aggregation; regulates integrin expression

FGF

- New blood vessel formation (angiogenesis): FGF-2
- Wound repair
- Development
- Hematopoiesis

TGF- β and Related Growth Factors

TGF- β

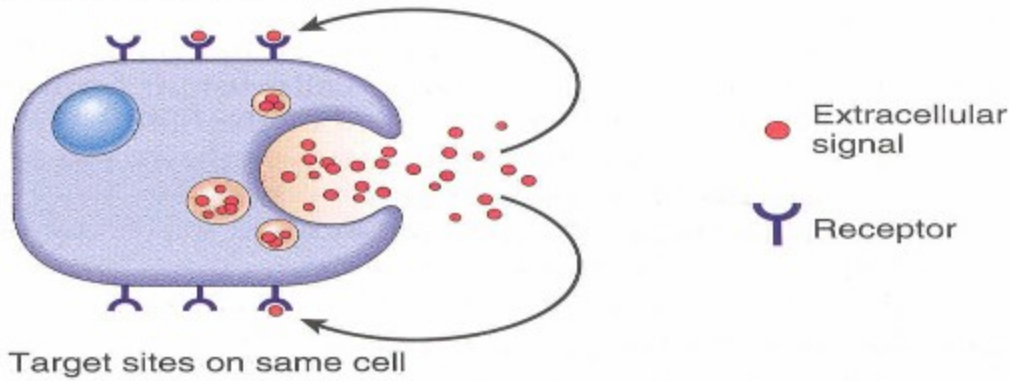
Platelets, T lymphocytes, macrophages, endothelial cells, keratinocytes, smooth muscle cells, fibroblasts

Chemotactic for PMNs, macrophages, lymphocytes, fibroblasts, and smooth muscle cells; stimulates TIMP synthesis, keratinocyte migration, angiogenesis, and fibroplasia; inhibits production of MMPs and keratinocyte proliferation; regulates integrin expression and other cytokines; induces TGF- β production

1. TGF- β is a growth inhibitor for most epithelial cell types and for leukocyte
2. The effects of TGF- β on mesenchymal cells depend on concentration and culture conditions, it generally stimulates the proliferation of fibroblasts and smooth muscle cells
3. TGF- β is a potent fibrogenic agent
4. TGF- has a strong anti-inflammatory effect

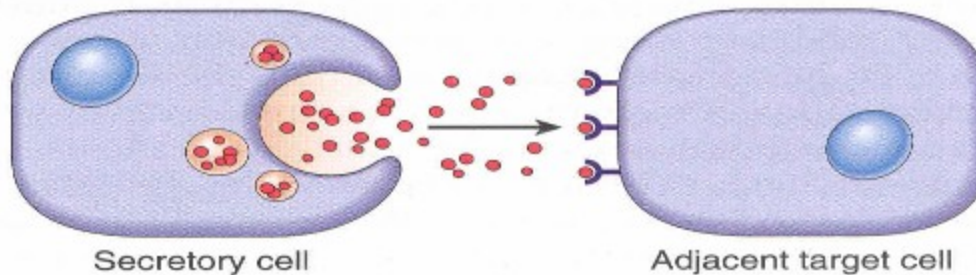
SIGNALING MECHANISMS IN CELL GROWTH

AUTOCRINE SIGNALING



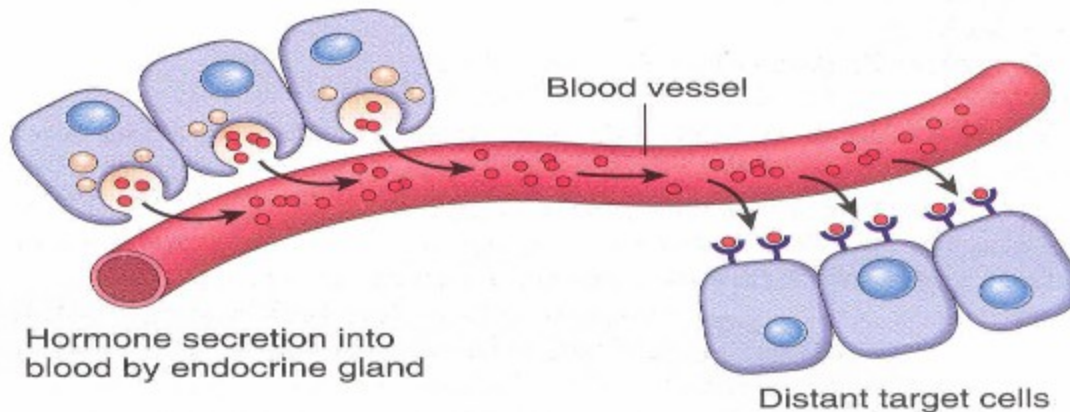
liver regeneration,
proliferation of antigen
stimulated lymphocytes, and
the growth of some tumors

PARACRINE SIGNALING



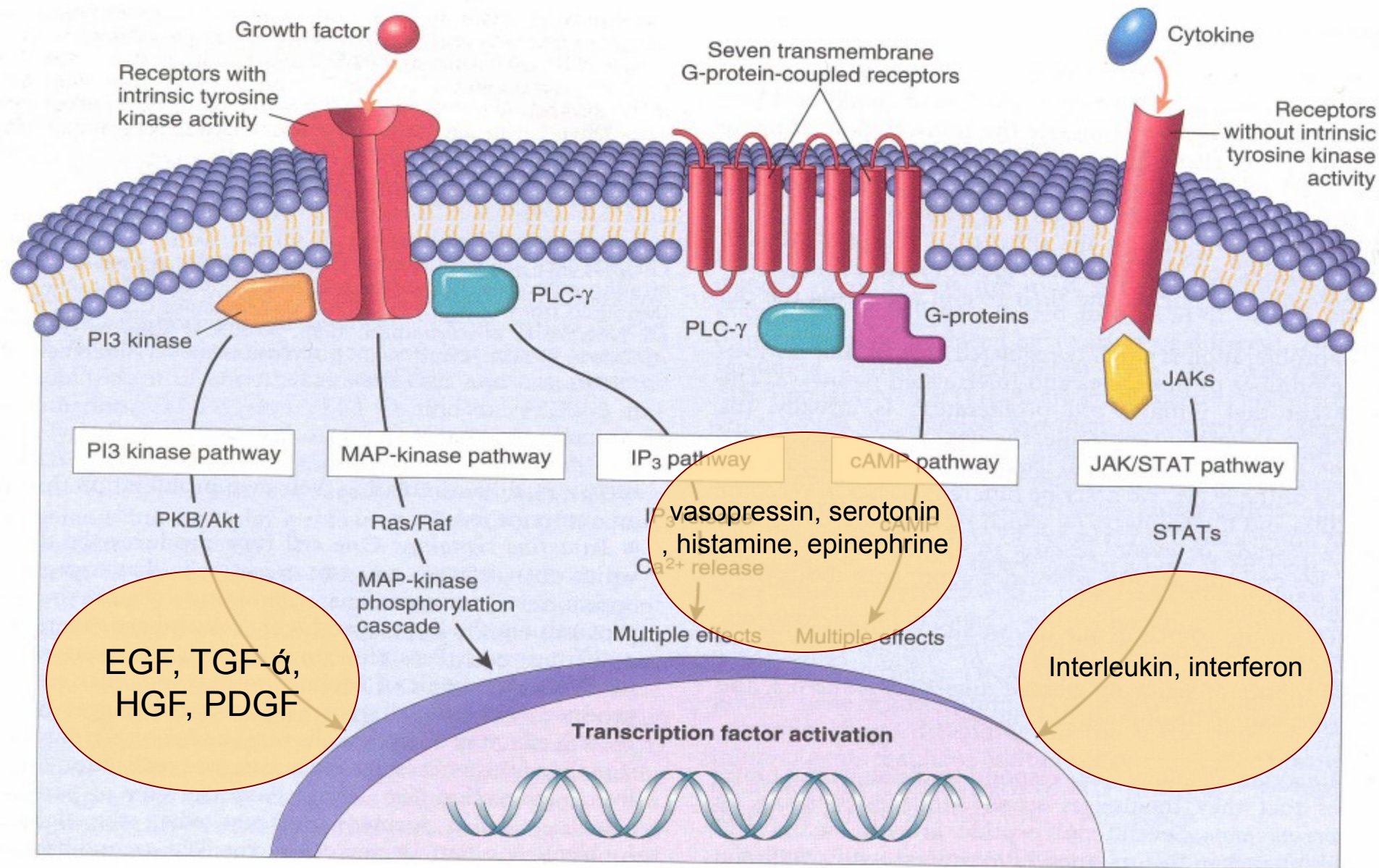
Healing of wounds,
hepatocyte replication

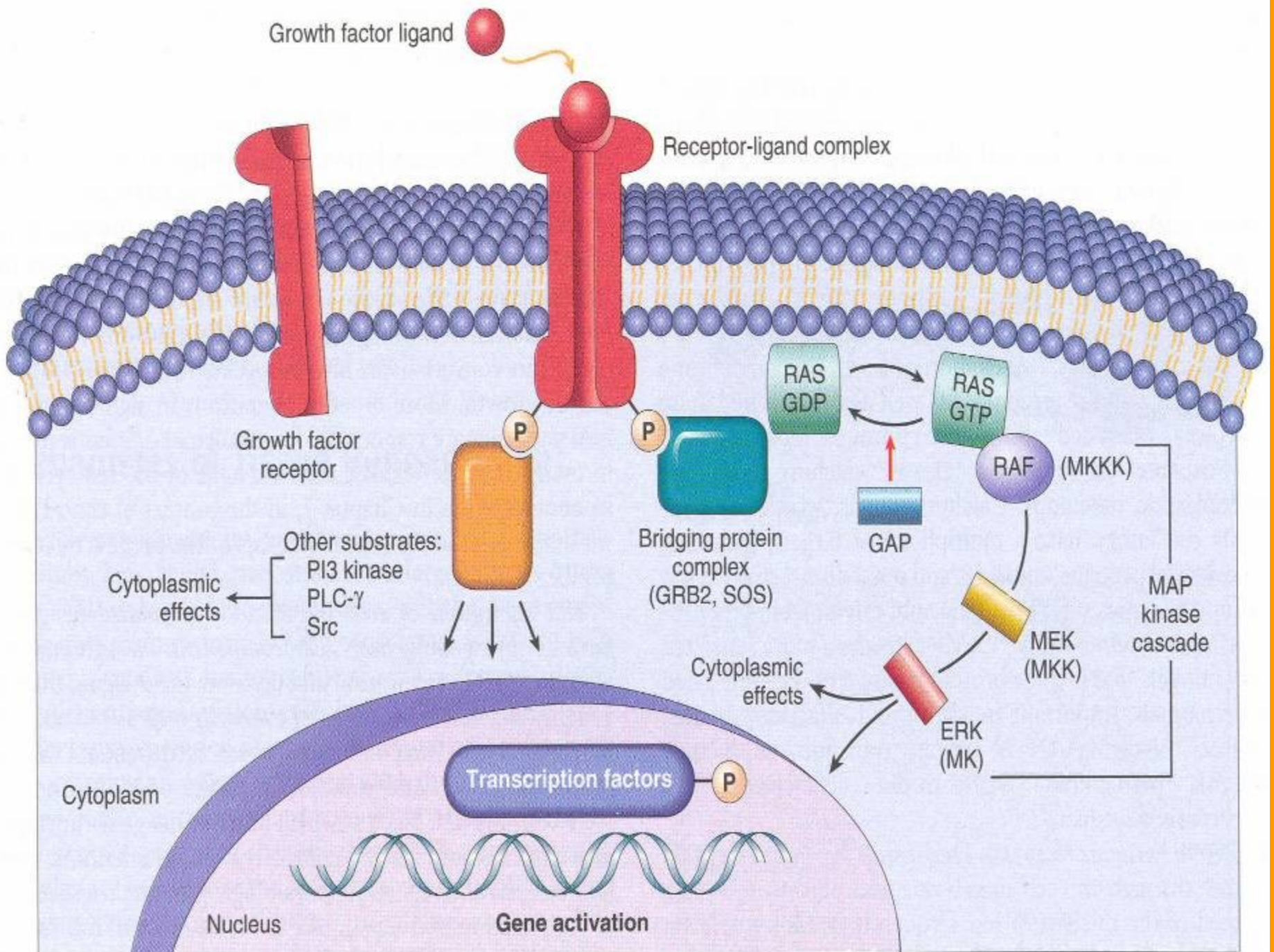
ENDOCRINE SIGNALING



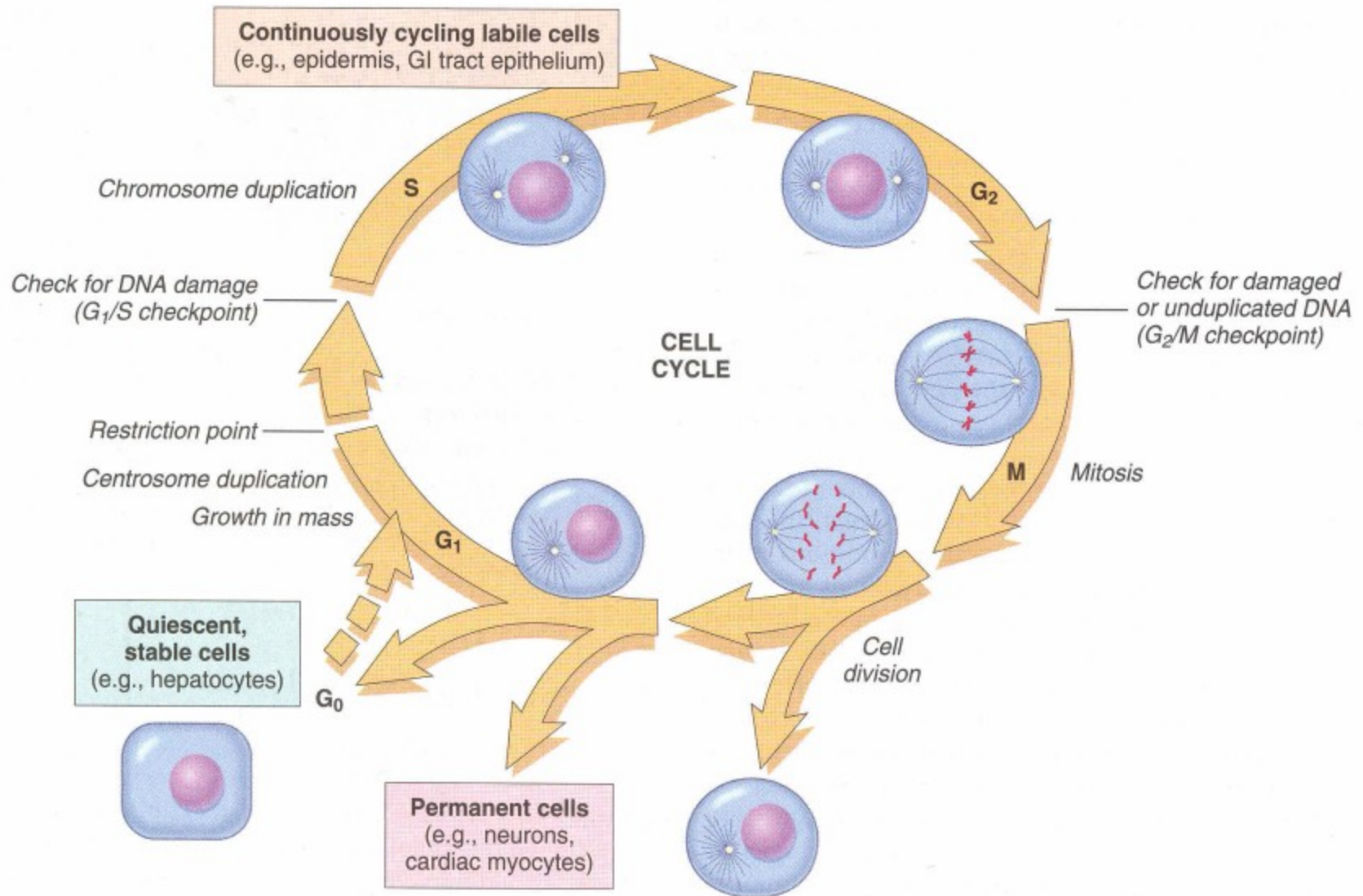
Hormones,
HGF,
Several cytokines

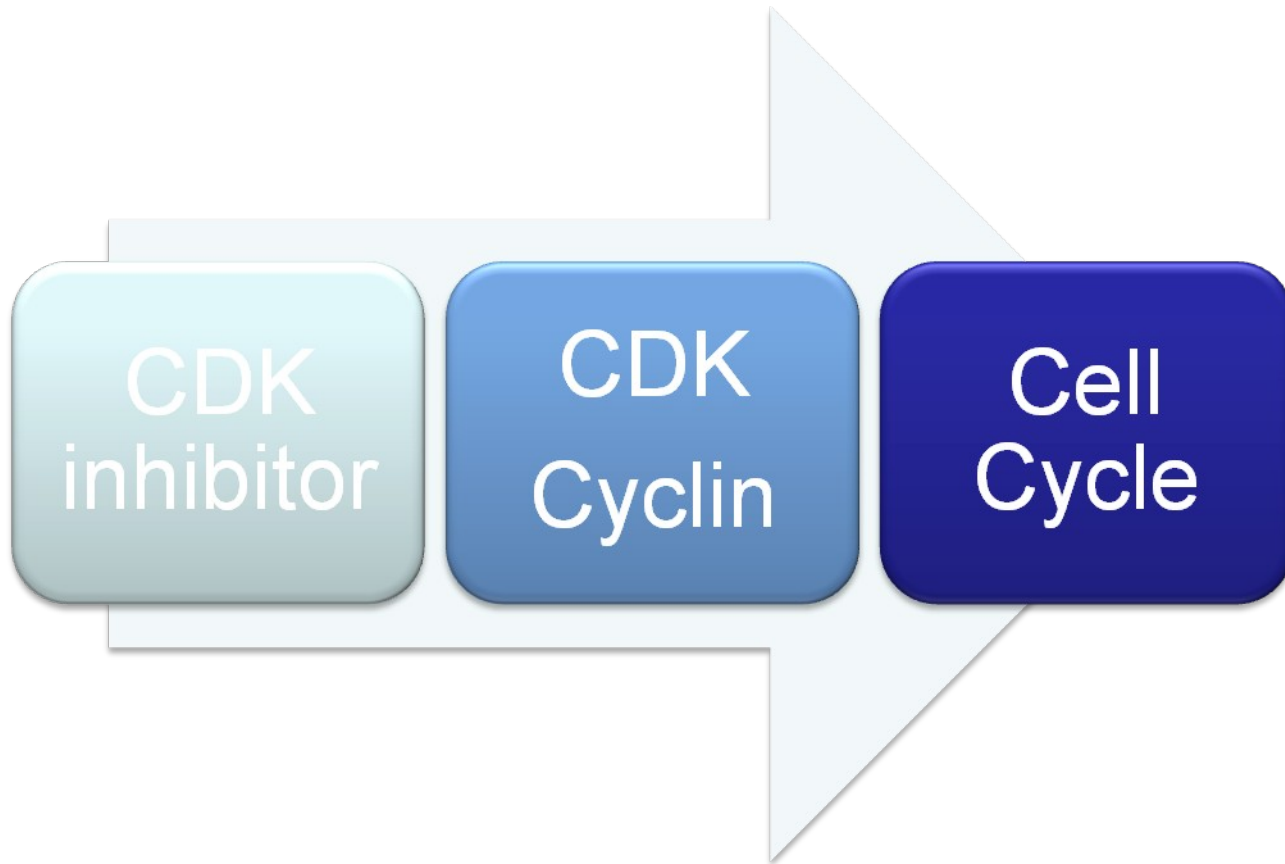
Receptors and Signal Transduction Pathways

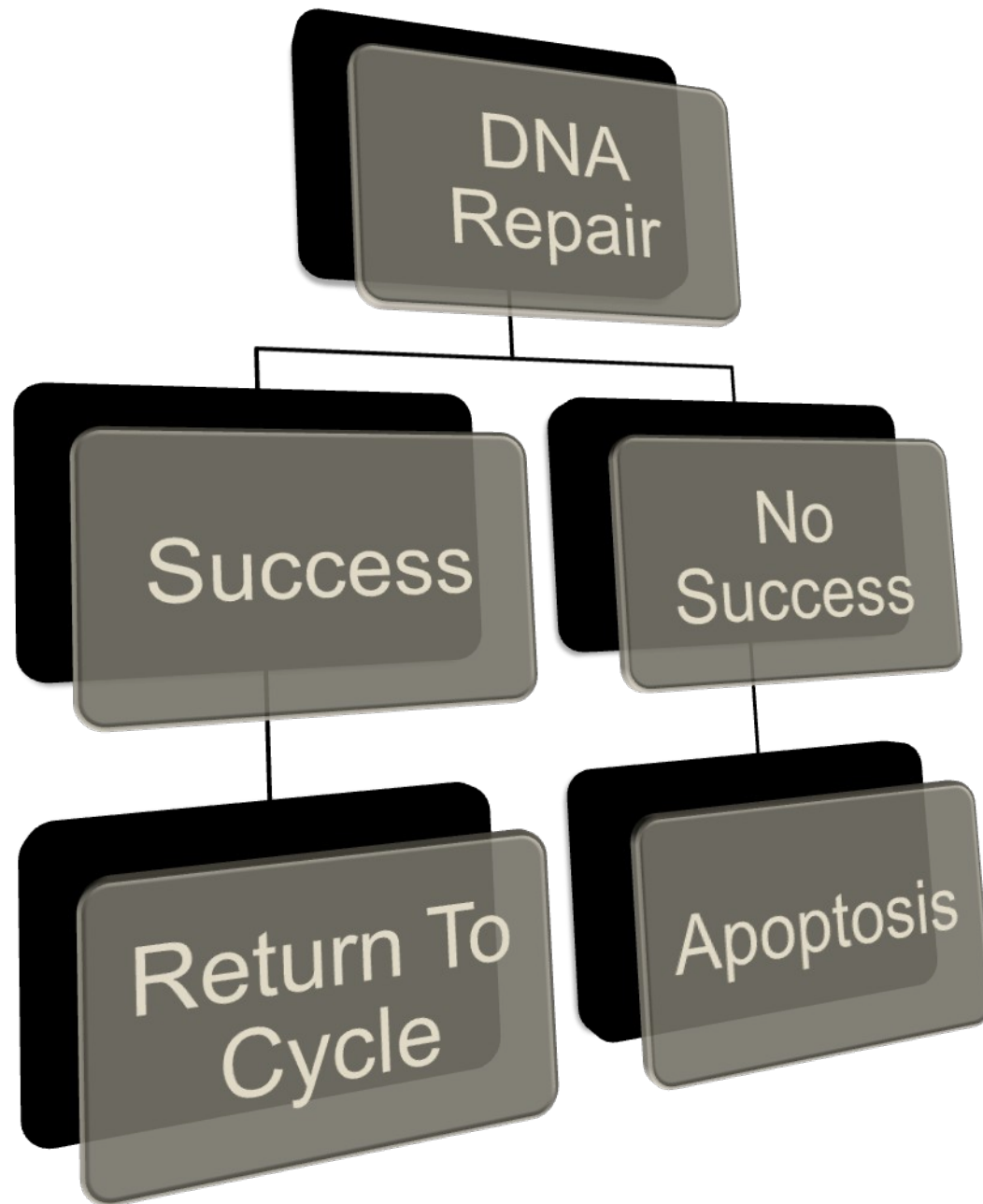




CELL CYCLE AND THE REGULATION OF CELL REPLICATION







CELL CYCLE AND THE REGULATION OF CELL REPLICATION

1. The replication of cells is generally stimulated by growth factors or by signaling from ECM components through integrins
2. the cell cycle has multiple controls and redundancies, particularly during the transition between the G and S phases
3. Progression through the cell cycle, and particularly the G₁/S transition, is tightly regulated by proteins called cyclins and associated enzymes called cyclin-dependent kinases (CDKs)
4. The activity of cyclin-CDK complexes is tightly regulated by inhibitors, which are called CDK inhibitors
5. Checkpoint: ensure that cells with damaged DNA or chromosomes do not complete replication
6. The G₁/S checkpoint checks the integrity of DNA before replication, whereas the G₂/M checkpoint checks DNA after replication and monitors whether the cell can safely enter mitosis

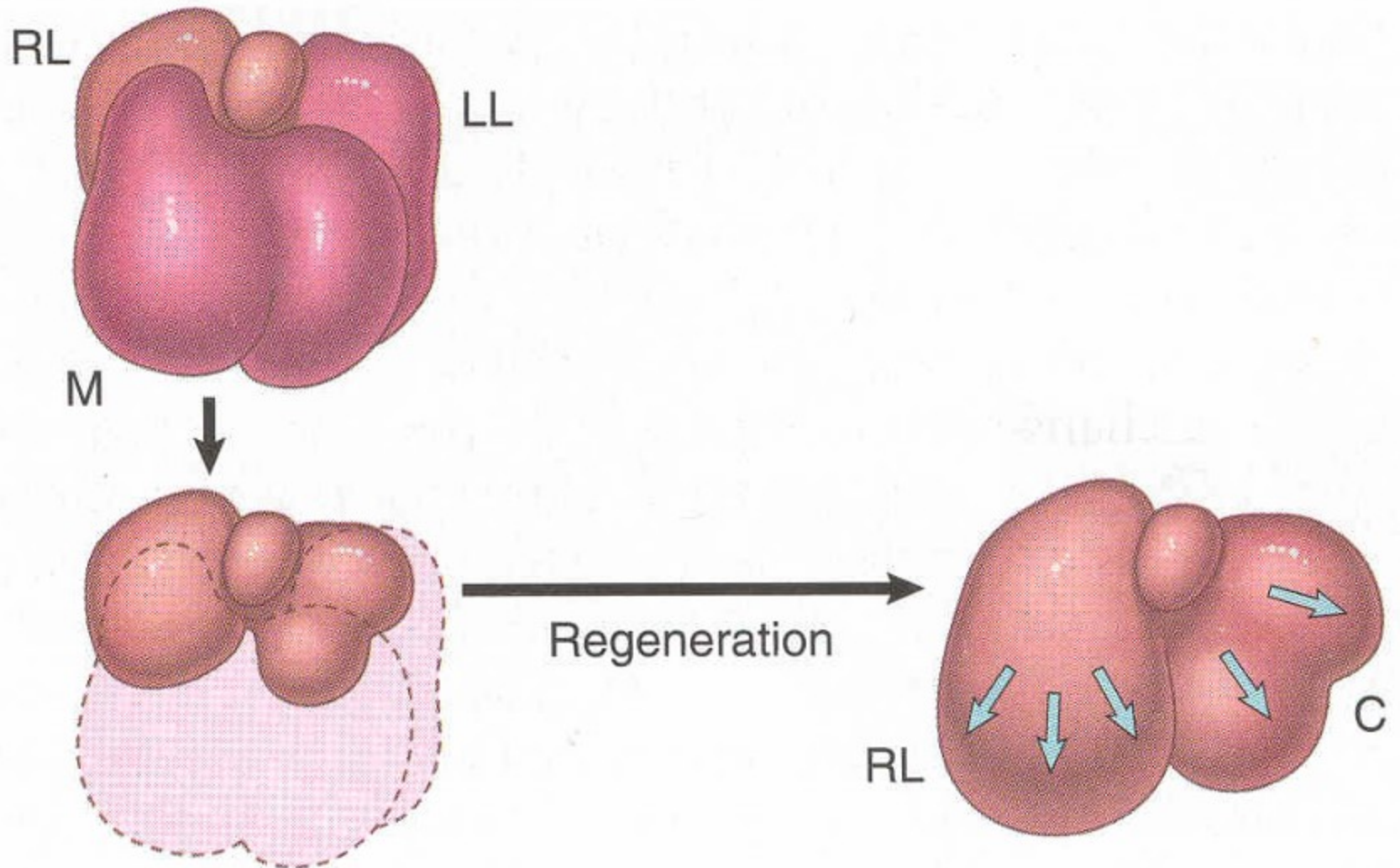
CELL CYCLE AND THE REGULATION OF CELL REPLICATION

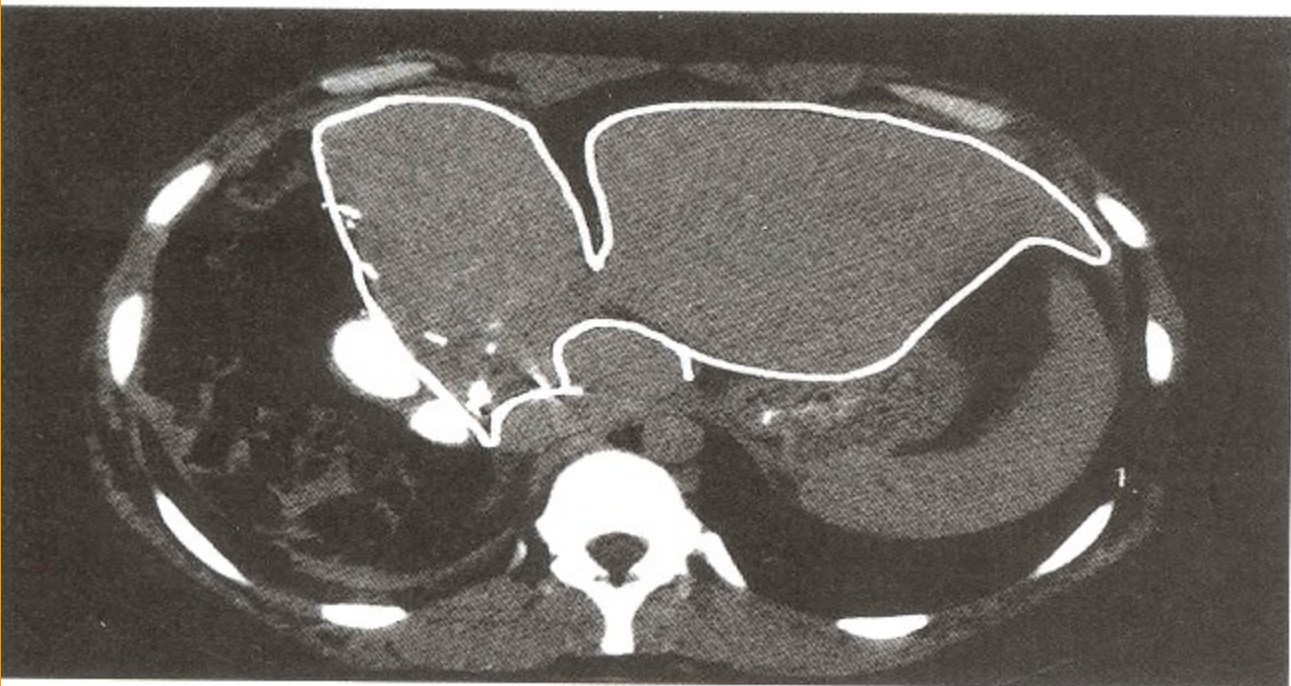
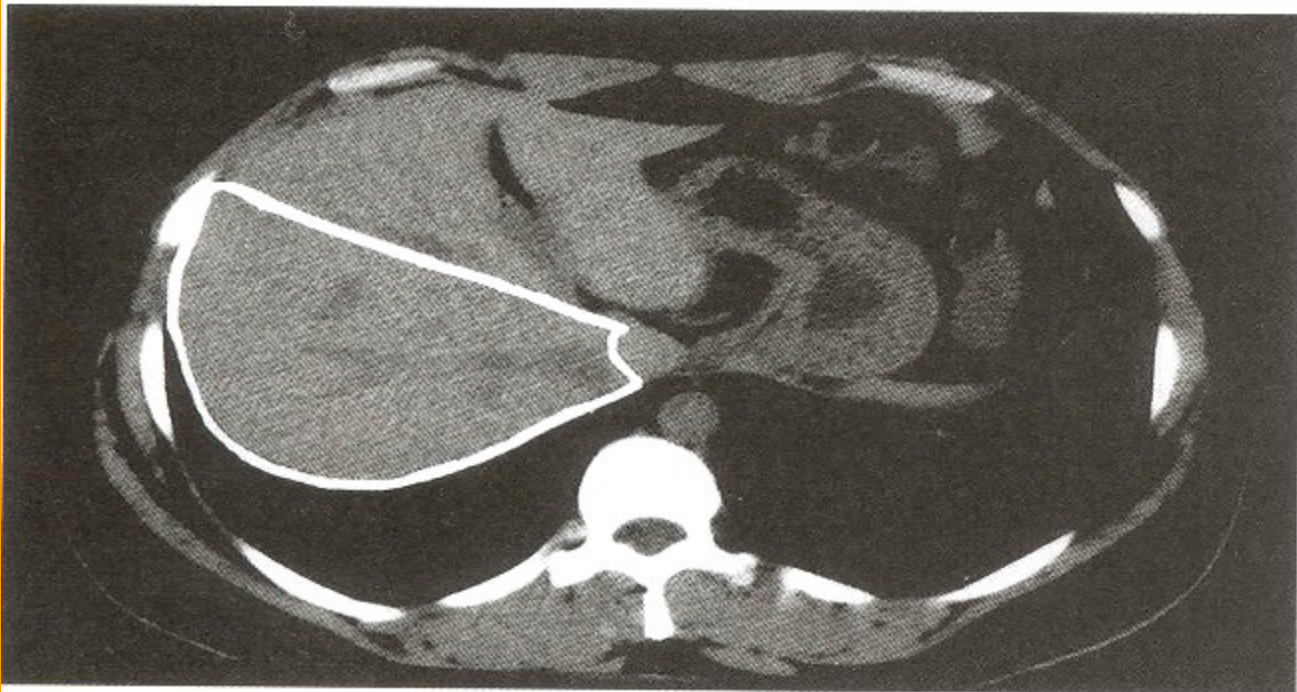
- 7- Checkpoint activation delays the cell cycle and triggers DNA repair mechanisms. If DNA damage is too severe to be repaired, the cells are eliminated by apoptosis
- 8- Checkpoint defects allow the replication of cells with DNA strand breaks and chromosome abnormalities that may cause tissue alterations and neoplasia

Mechanisms of Tissue Regeneration

- **Compensatory growth** processes that involve hypertrophy and hyperplasia. They restore the functional capacity of an organ without necessarily reconstituting its original anatomy
- **liver regeneration**
 - regeneration of the liver after partial hepatectomy involves the replication of mature cells without stem cell participation
 - kidney, pancreas, adrenal glands, thyroid, and the lungs of very young animals, are also capable of compensatory growth, although they display it in less dramatic form than the liver

Liver Regeneration



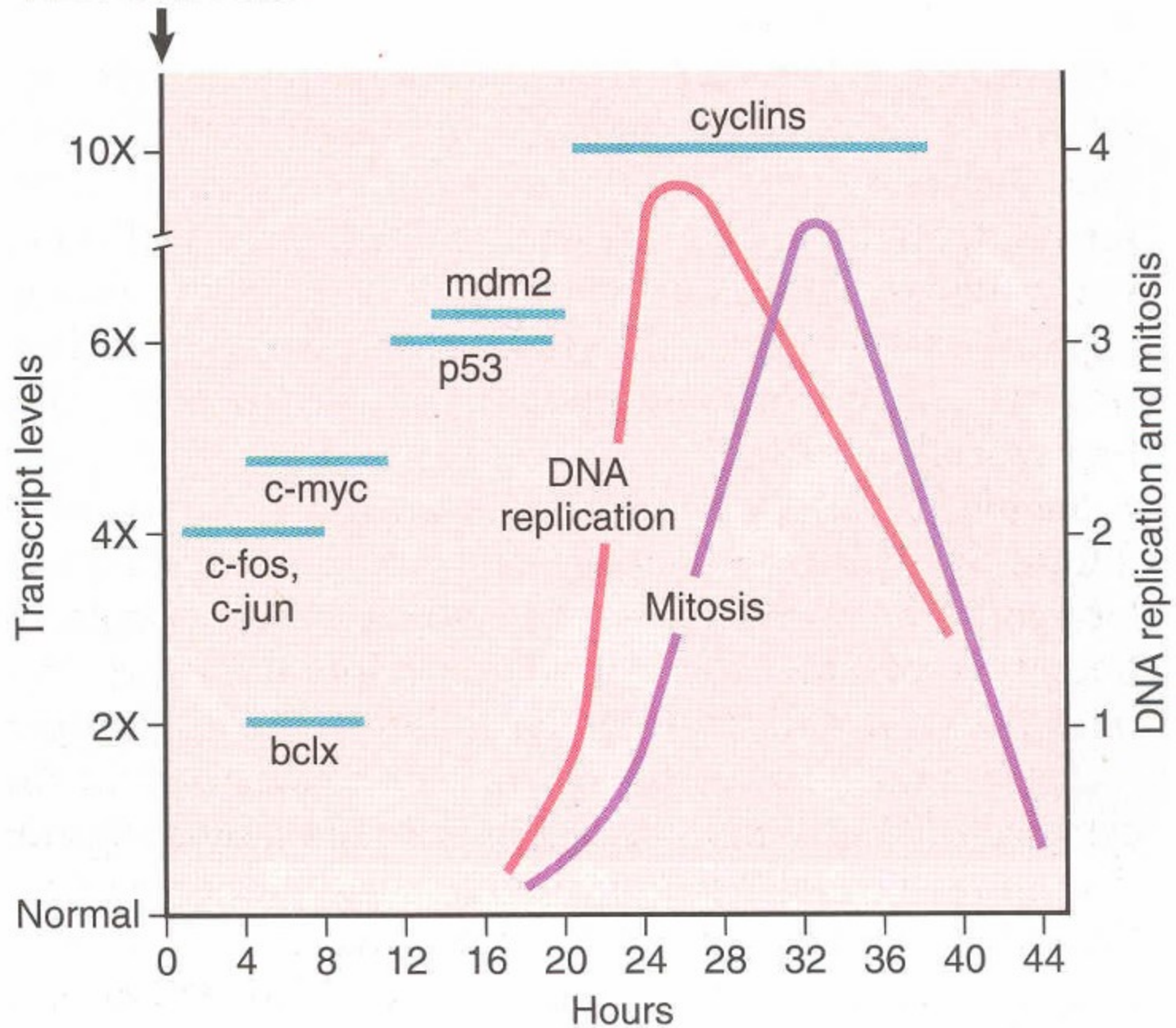


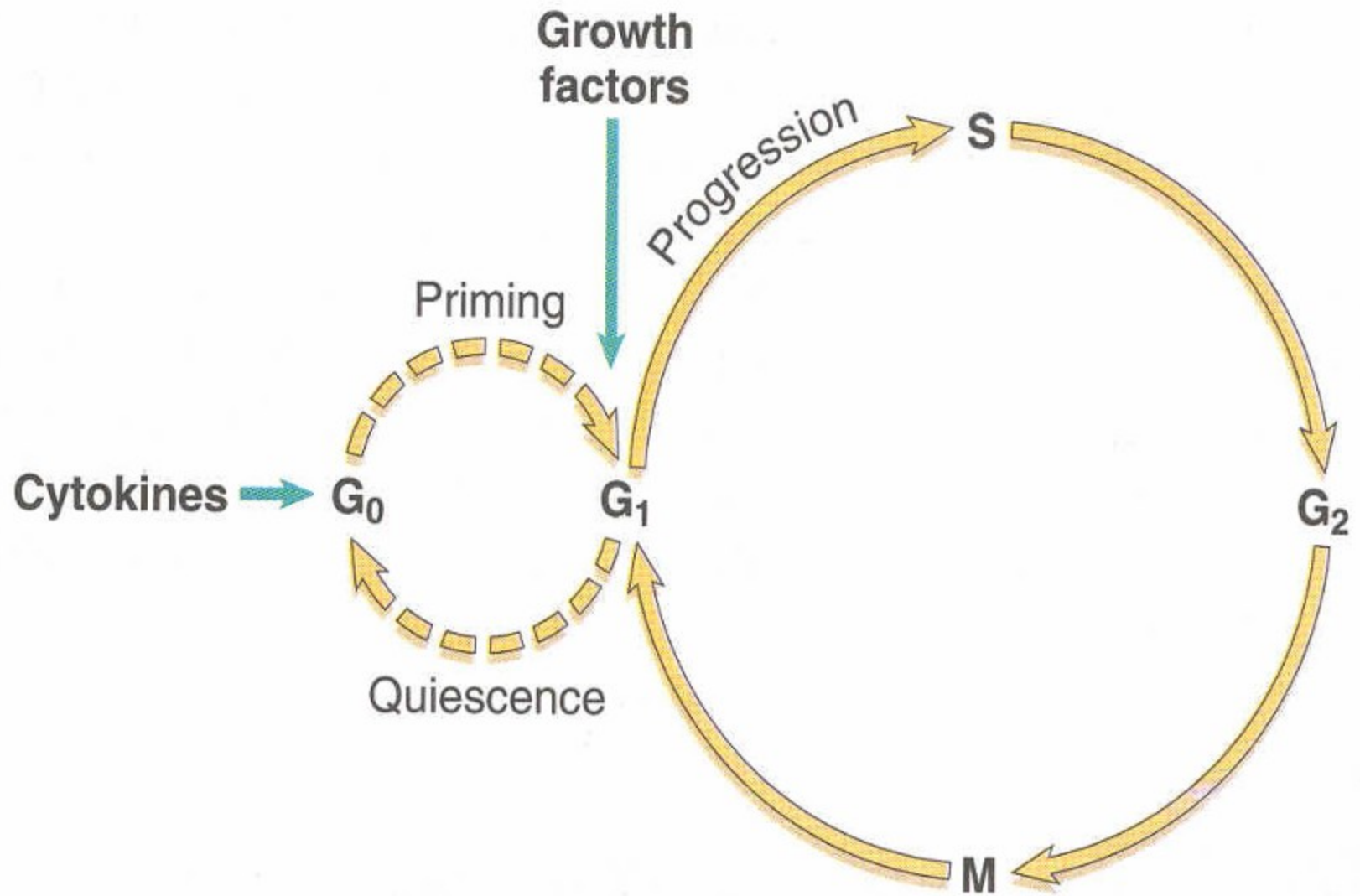
Important !

The end-point of liver regeneration after partial hepatectomy is:

**The restitution of
functional mass rather
than form**

PARTIAL HEPATECTOMY





PARTIAL HEPATECTOMY

Cytokines

TNF
IL-6
Others

Growth factors

HGF
TGF- α
Others

Growth inhibitors

TGF- β
Activin
Others

Priming

Proliferation

Growth
inhibition

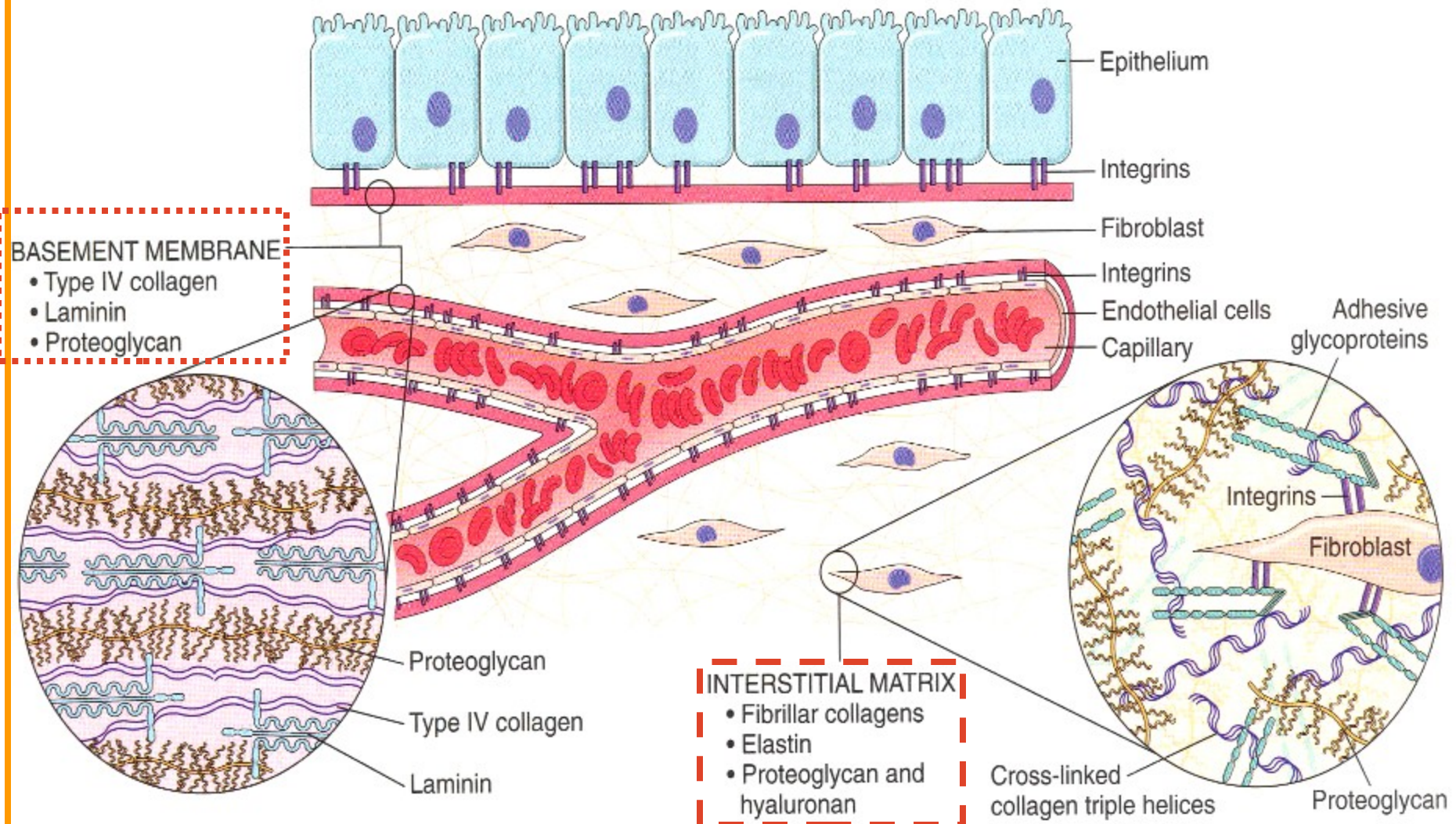
Adjuvants

Norepinephrine
Insulin
Thyroid hormone
Growth hormone

↑ Cell cycle inhibitors
↓ Growth factors
↓ Metabolic demands

Extracellular Matrix (ECM)

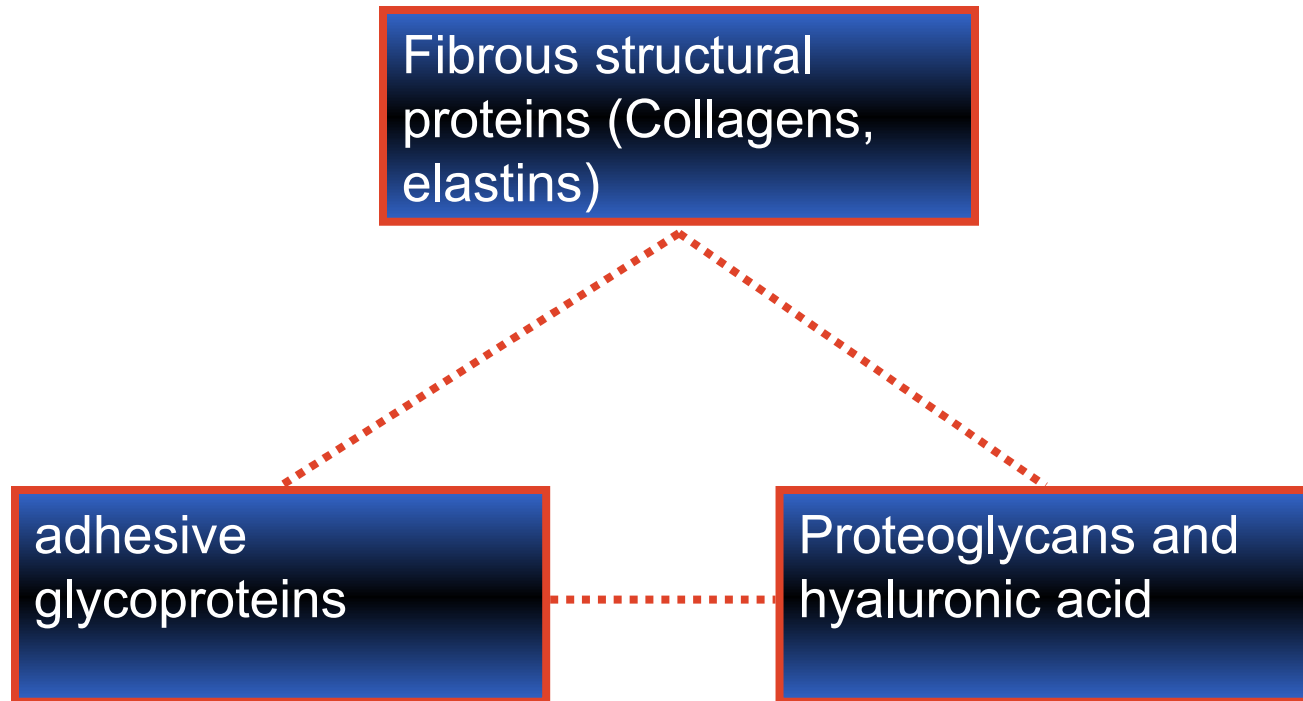
Cell-Matrix Interactions



Extracellular Matrix Functions

- Matrix proteins sequester water that provides turgor to soft tissues and minerals that give rigidity to skeletal tissues
- Reservoir for growth factors controlling cell proliferation
- important for cell-to-cell interactions and provides a substratum for cells to adhere, migrate, and proliferate, directly modulating cell form and function
- Synthesis and degradation of ECM accompanies morphogenesis, wound healing, and chronic fibrotic processes, as well as tumor invasion and metastasis

ECM Structure



1. Interstitial matrix
2. Basement membrane (BM)

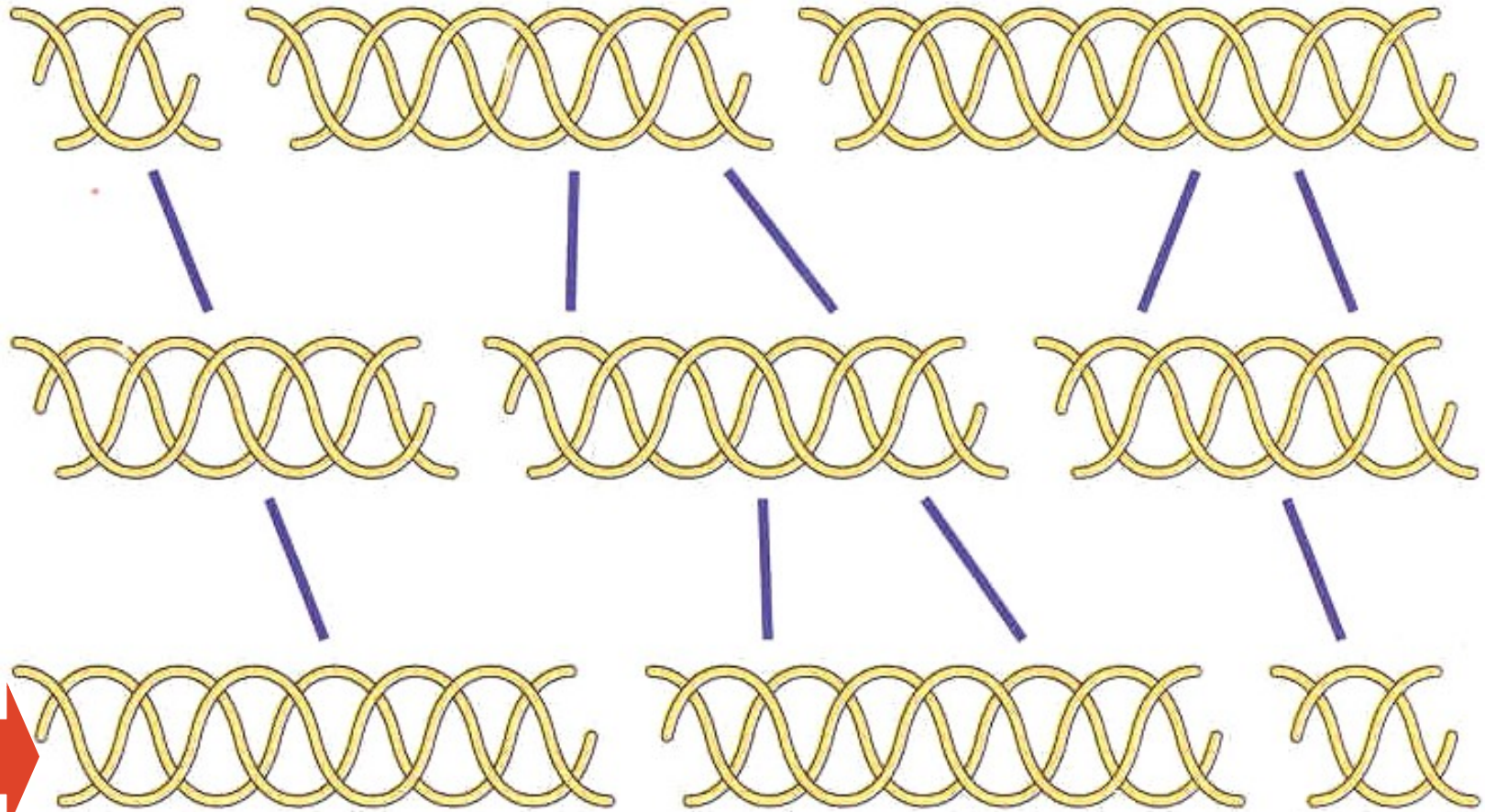
Basement membrane (BM)

- Produced by epithelial and mesenchymal cells
- A network of amorphous nonfibrillar collagen (mostly type IV), laminin, heparan sulfate, proteoglycan, and other glycoproteins

COLLAGEN

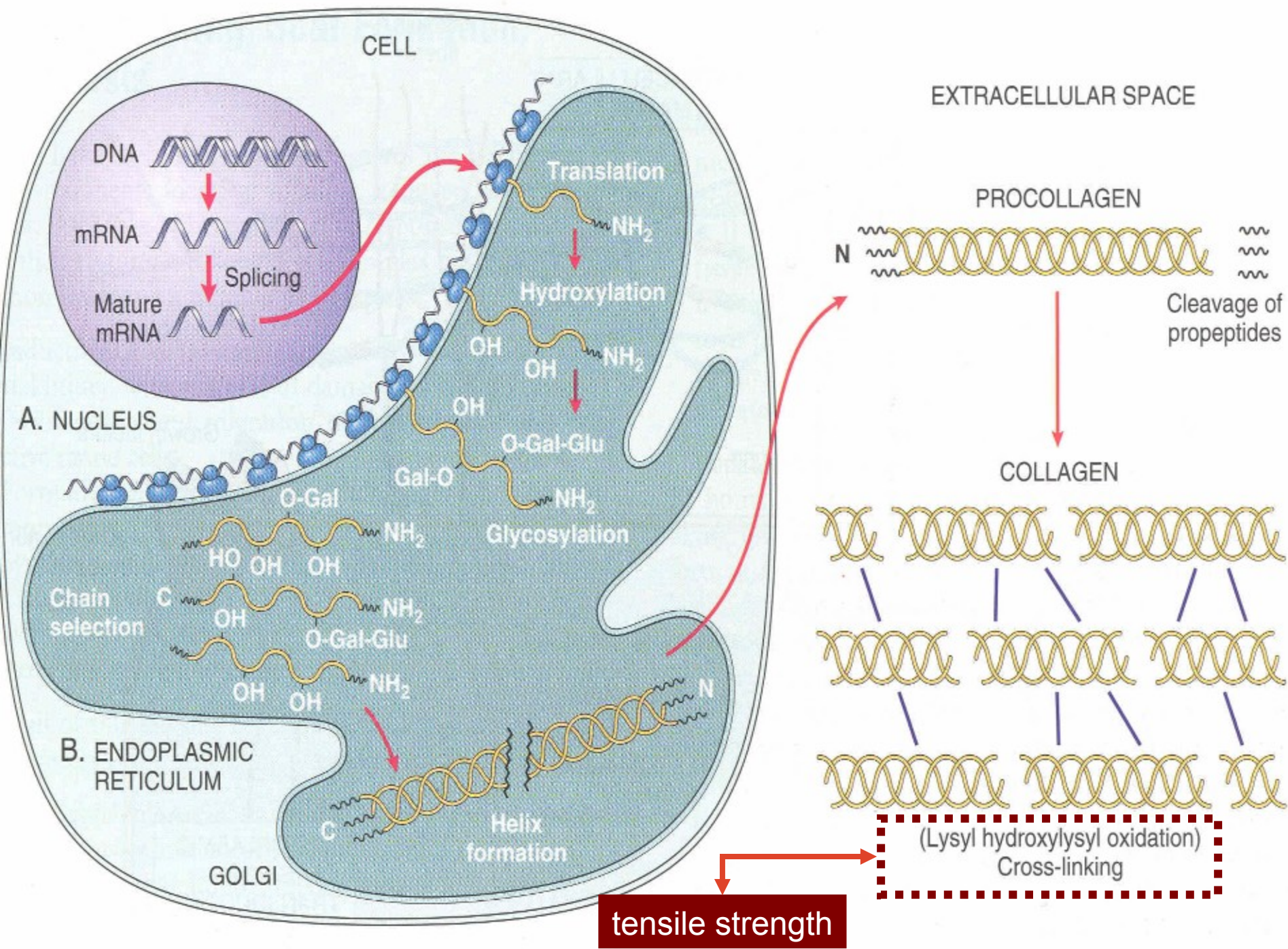
Collagen is the most common protein in the animal world

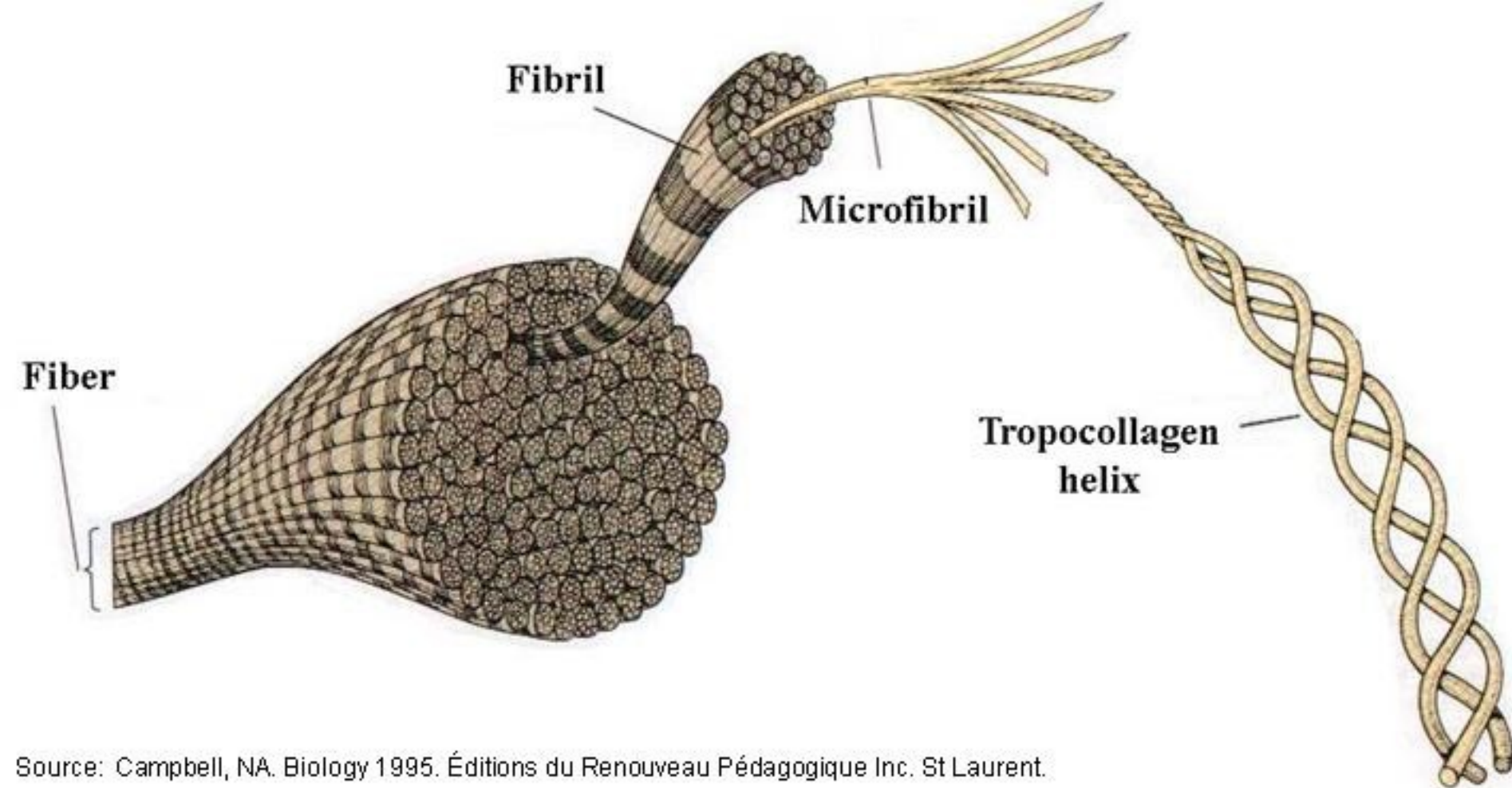
COLLAGEN



(Lysyl hydroxylysyl oxidation)
Cross-linking

Pro collagen





Source: Campbell, NA. Biology 1995. Éditions du Renouveau Pédagogique Inc. St Laurent.

Collagen Type	Tissue Distribution
<i>Fibrillar Collagens</i>	
I	Ubiquitous in hard and soft tissues
II	Cartilage, intervertebral disk, vitreous
III	Hollow organs, soft tissues
V	Soft tissues, blood vessels
IX	Cartilage, vitreous
<i>Basement Membrane Collagens</i>	
IV	Basement membranes
<i>Other Collagens</i>	
VI	Ubiquitous in microfibrils
VII	Anchoring fibrils at dermal-epidermal junctions
IX	Cartilage, intervertebral disks
XVII	Transmembrane collagen in epidermal cells
XV and XVIII	Endostatin-forming collagens, endothelial cells

ELASTIN, FIBRILLIN, AND ELASTIC FIBERS

Blood vessels, Skin,
Uterus, Lung

Tensile strength

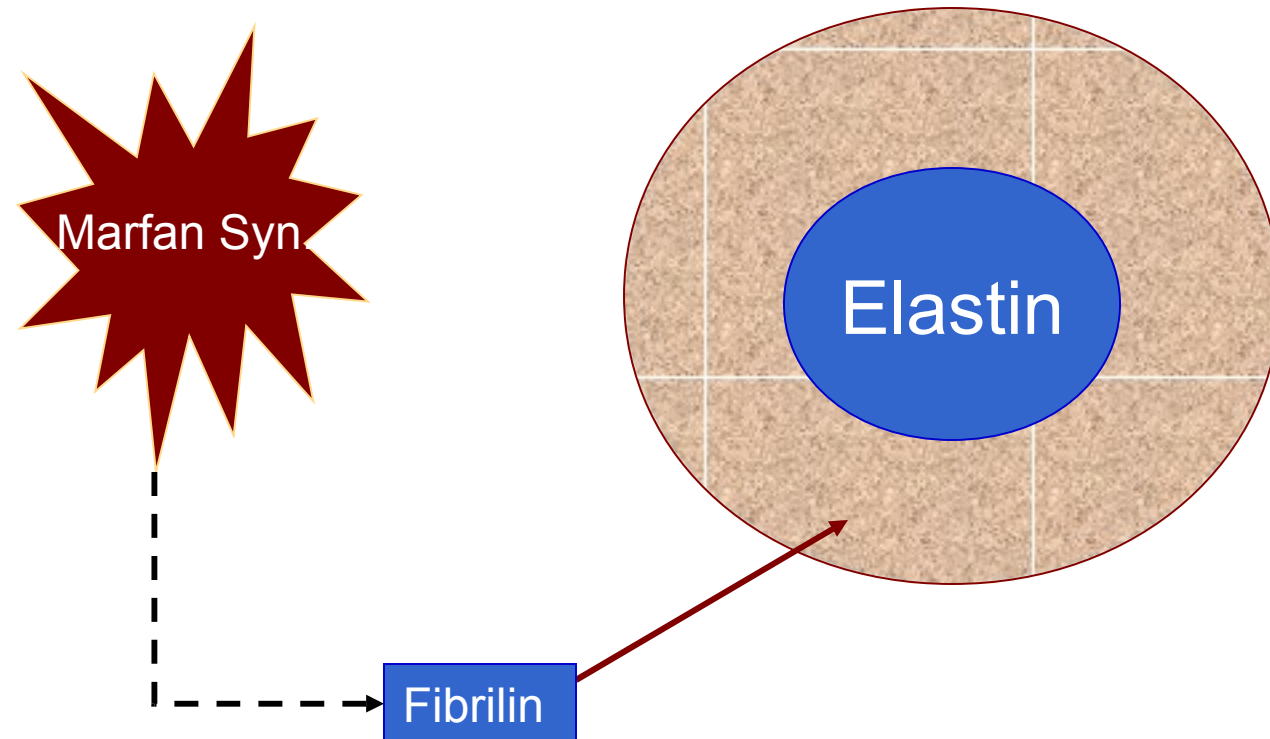
Elasticity , Recoil

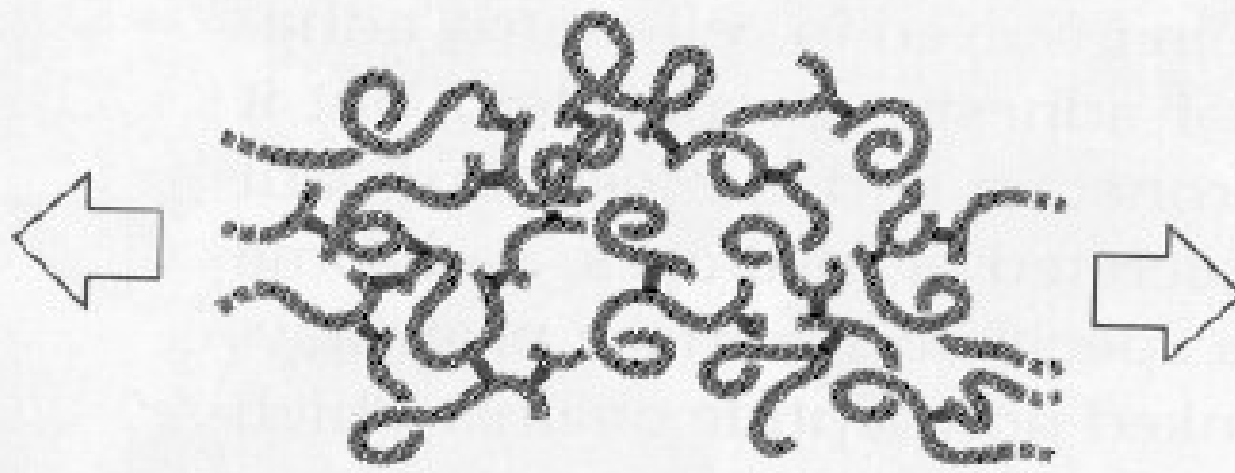
Collagen

Elastic fibers



Elastic fibers



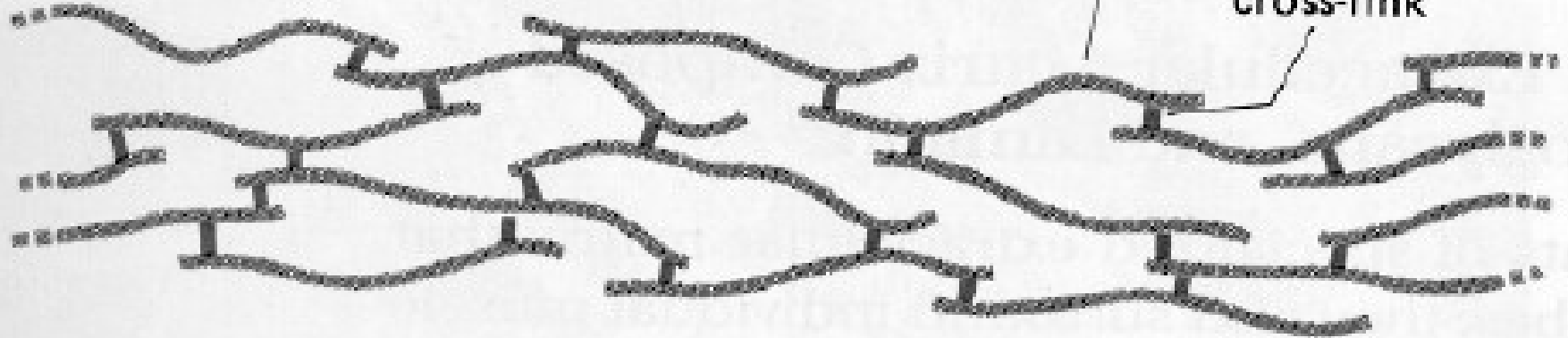


stretch

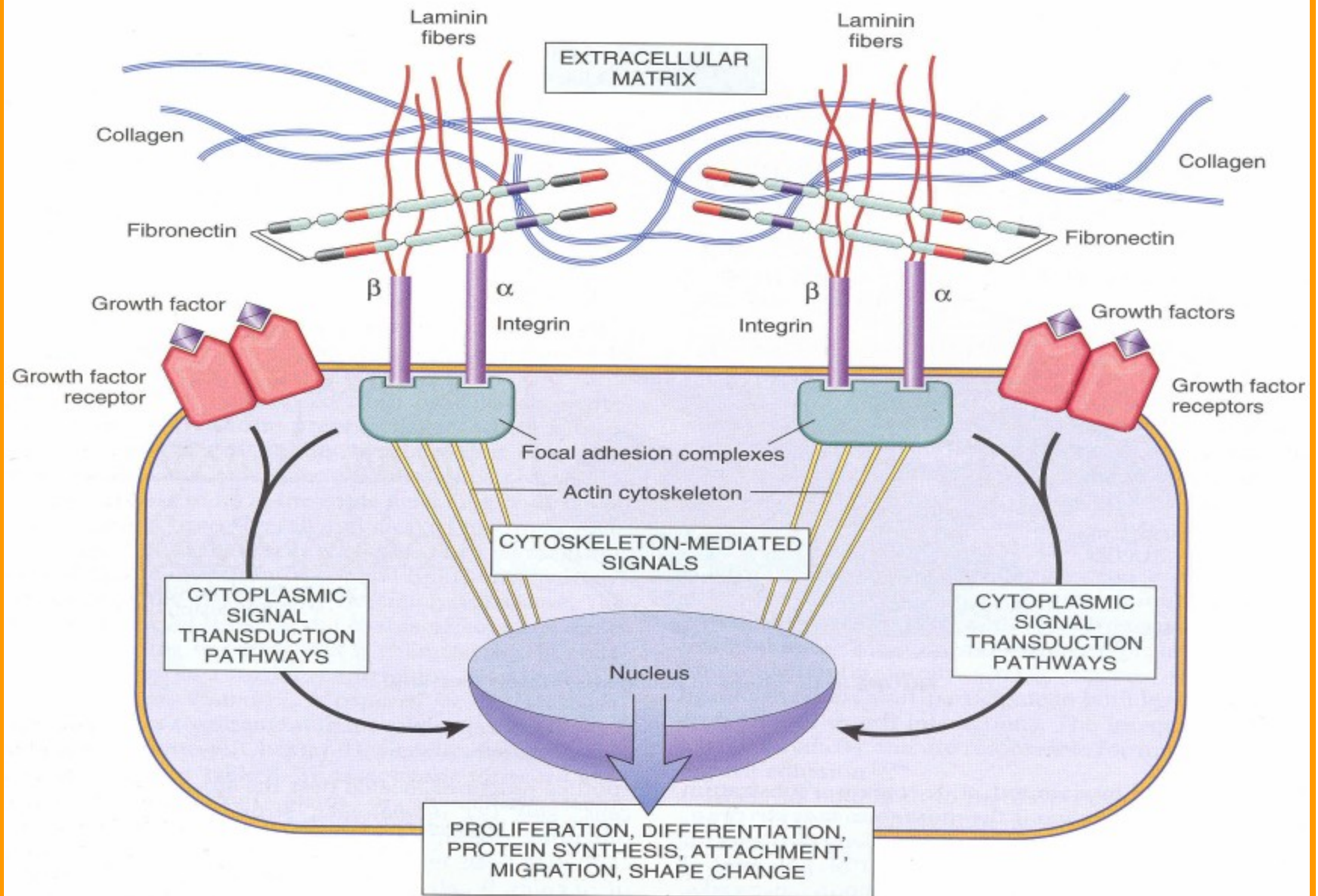
relax

single elastin molecule

cross-link



CELL ADHESION PROTEINS



Repair by Healing, Scar Formation and Fibrosis

1

- inflammatory process

2

- Proliferation and migration of parenchymal

3

- angiogenesis and granulation tissue

4

- Synthesis of ECM proteins and collagen deposition

5

- Tissue remodeling

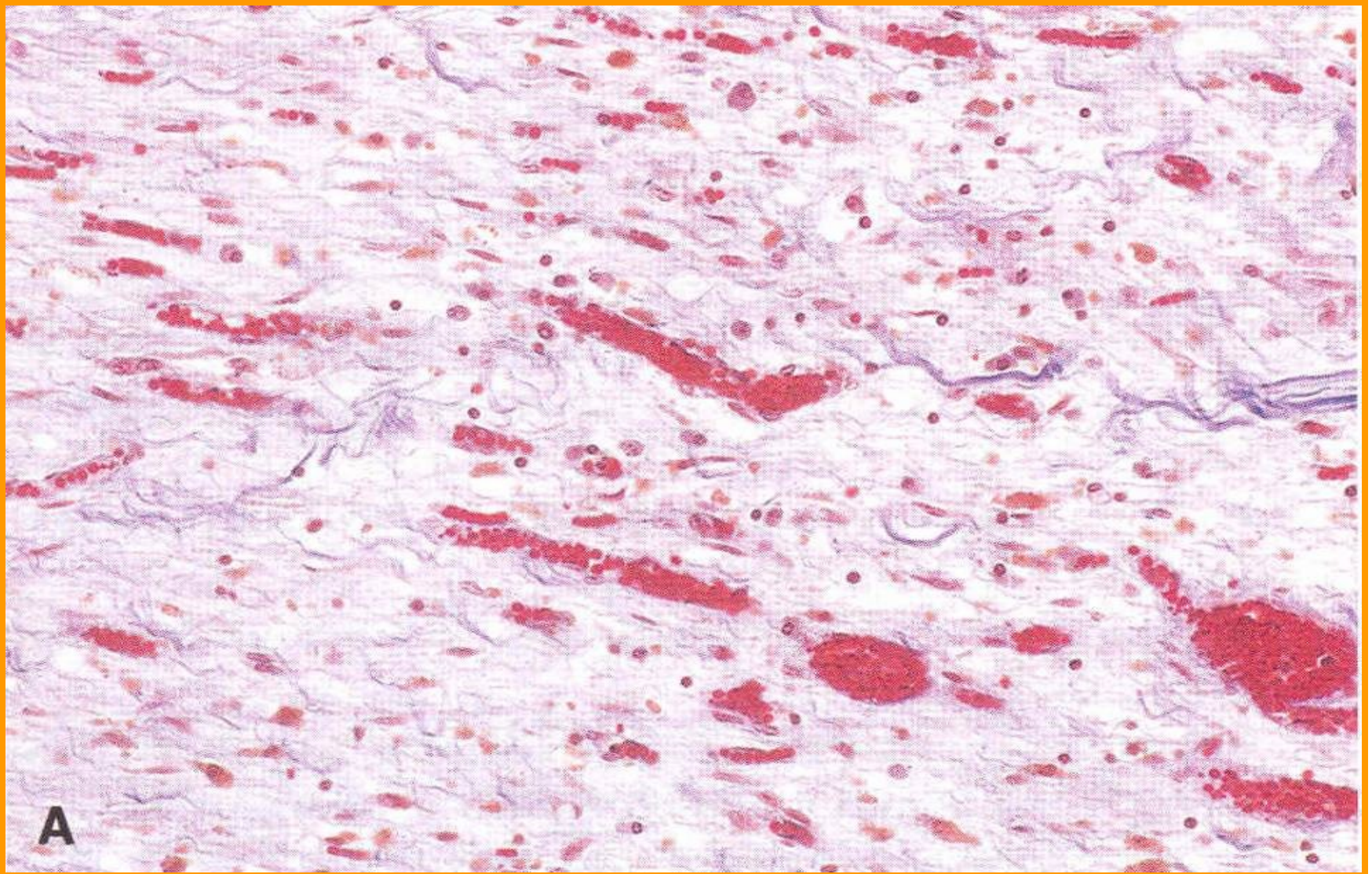
6

- Wound contraction

7

- Acquisition of wound strength

Granulation tissue

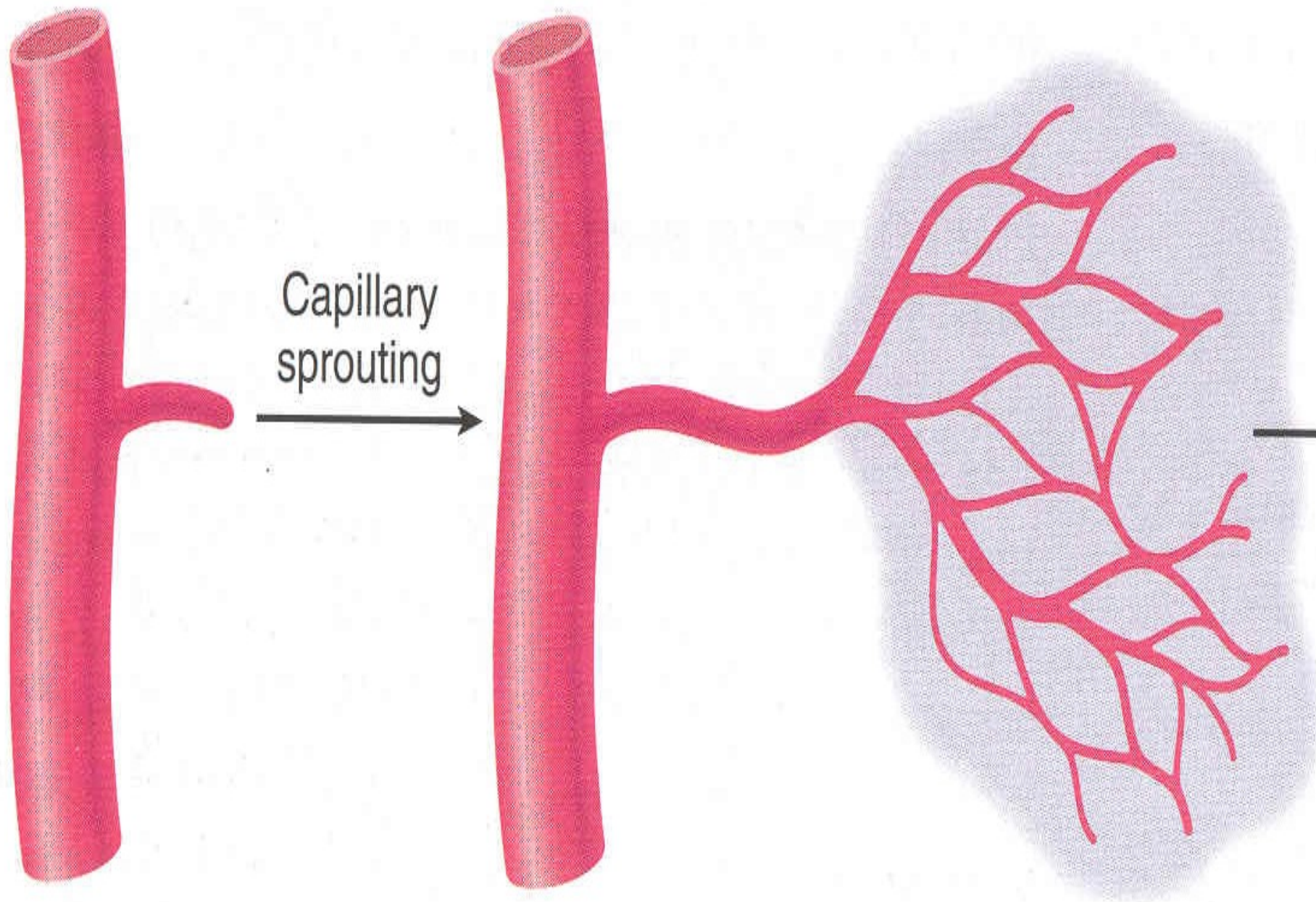


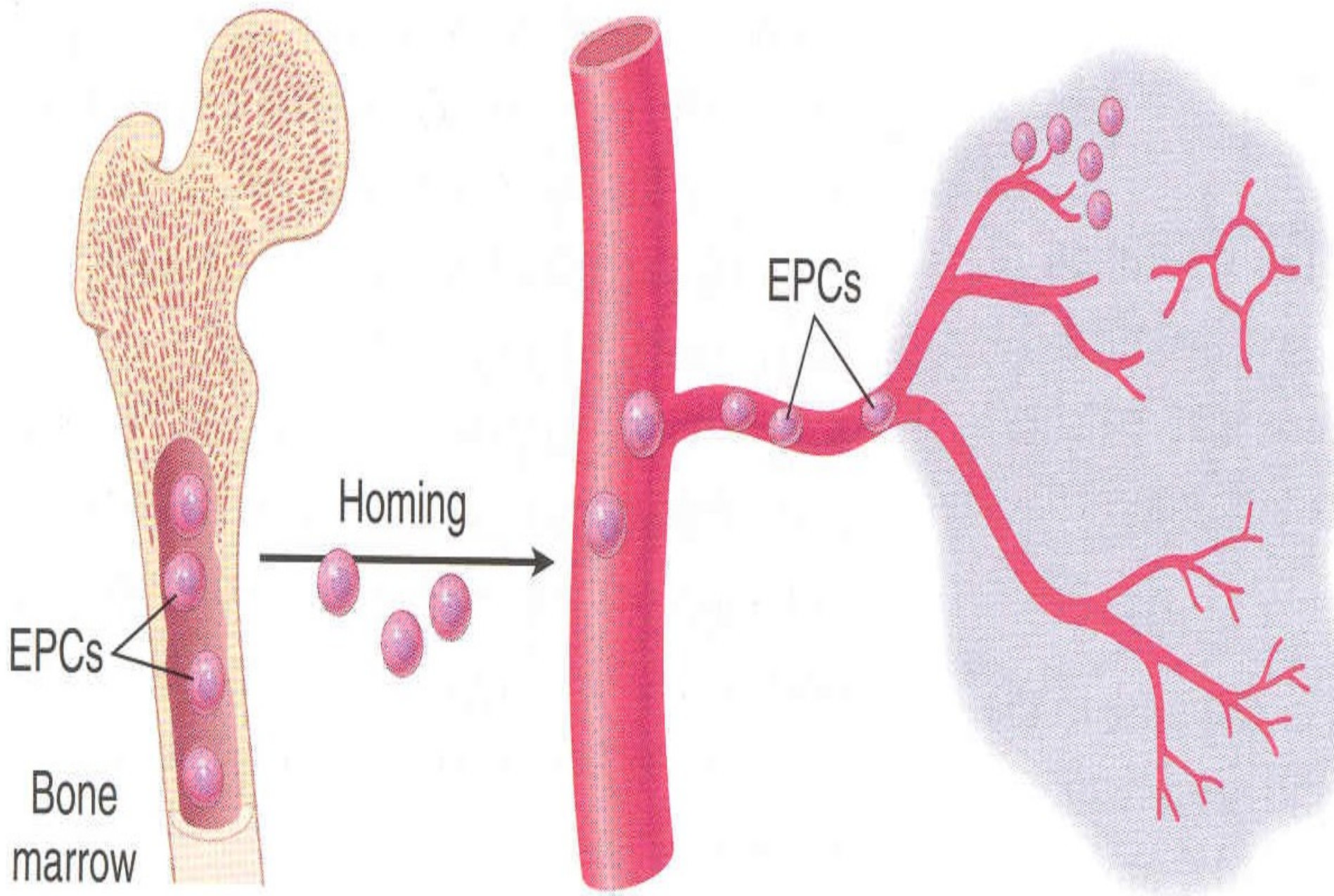
- Hallmark of healing
- The formation of new small blood vessels (angiogenesis) and the proliferation of fibroblasts
- new granulation tissue is often edematous, why?

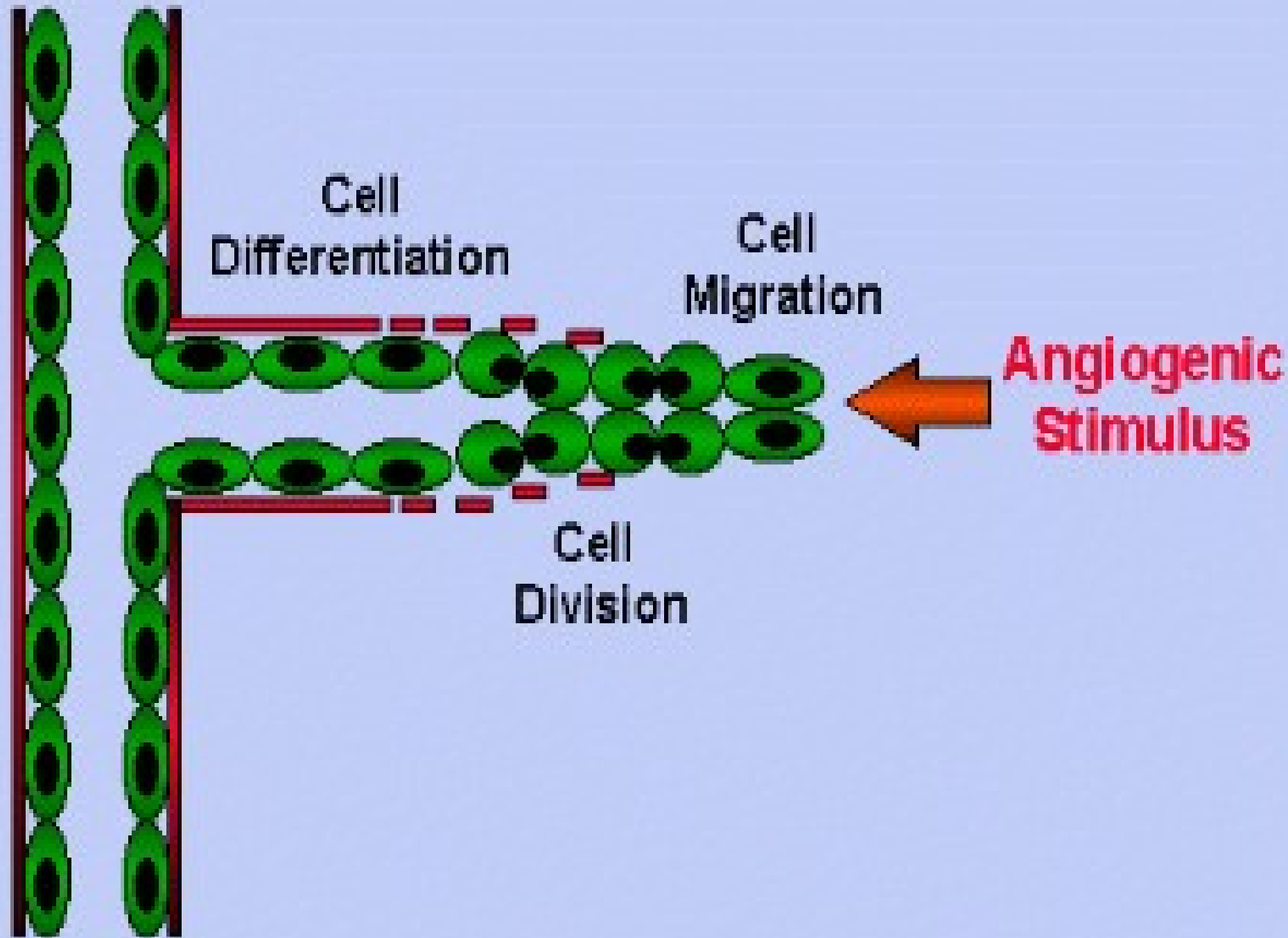
ANGIOGENESIS

- Angiogenesis & Vasculogenesis
- Angiogenesis = neovascularization :

branching and extension of adjacent blood vessels or ?

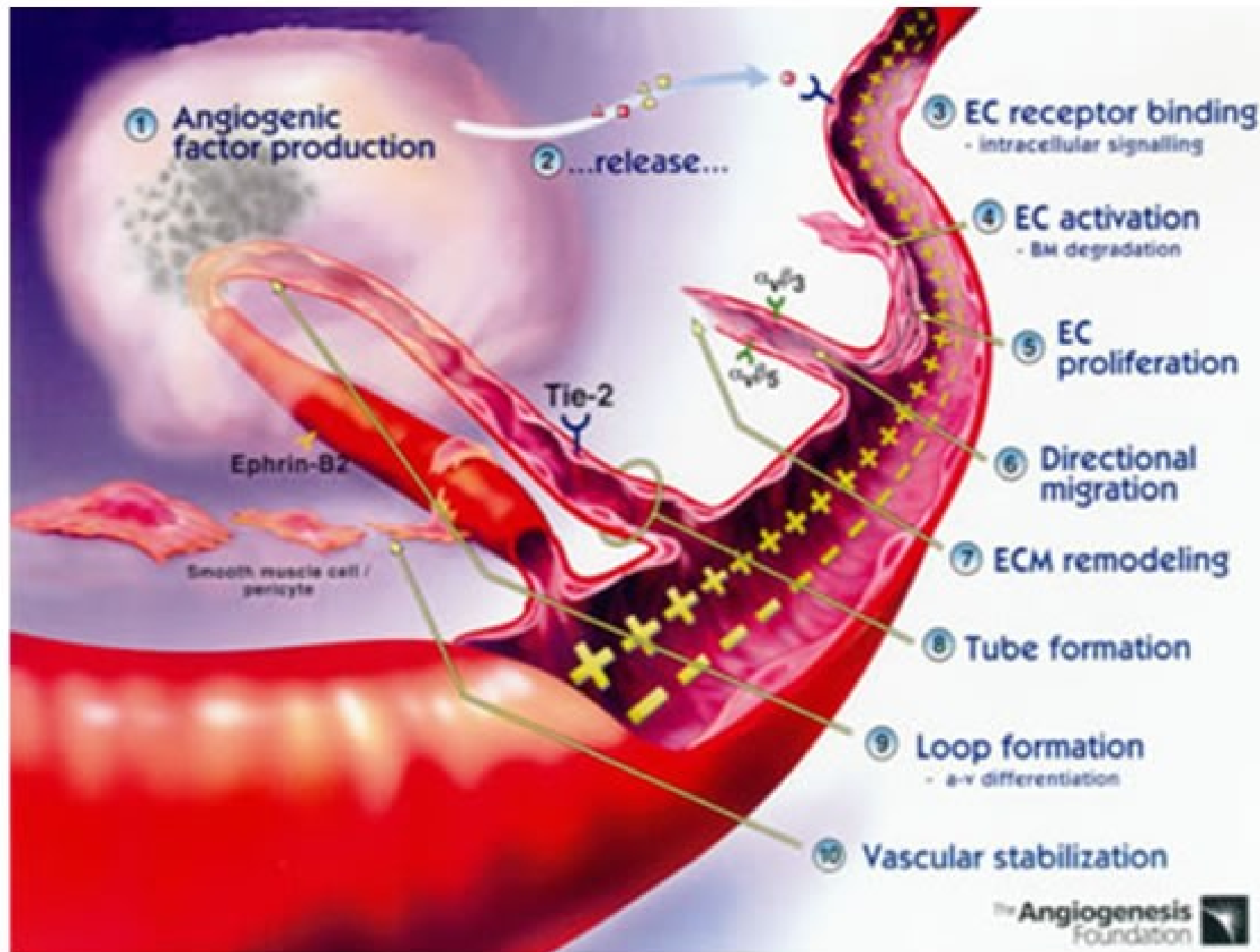


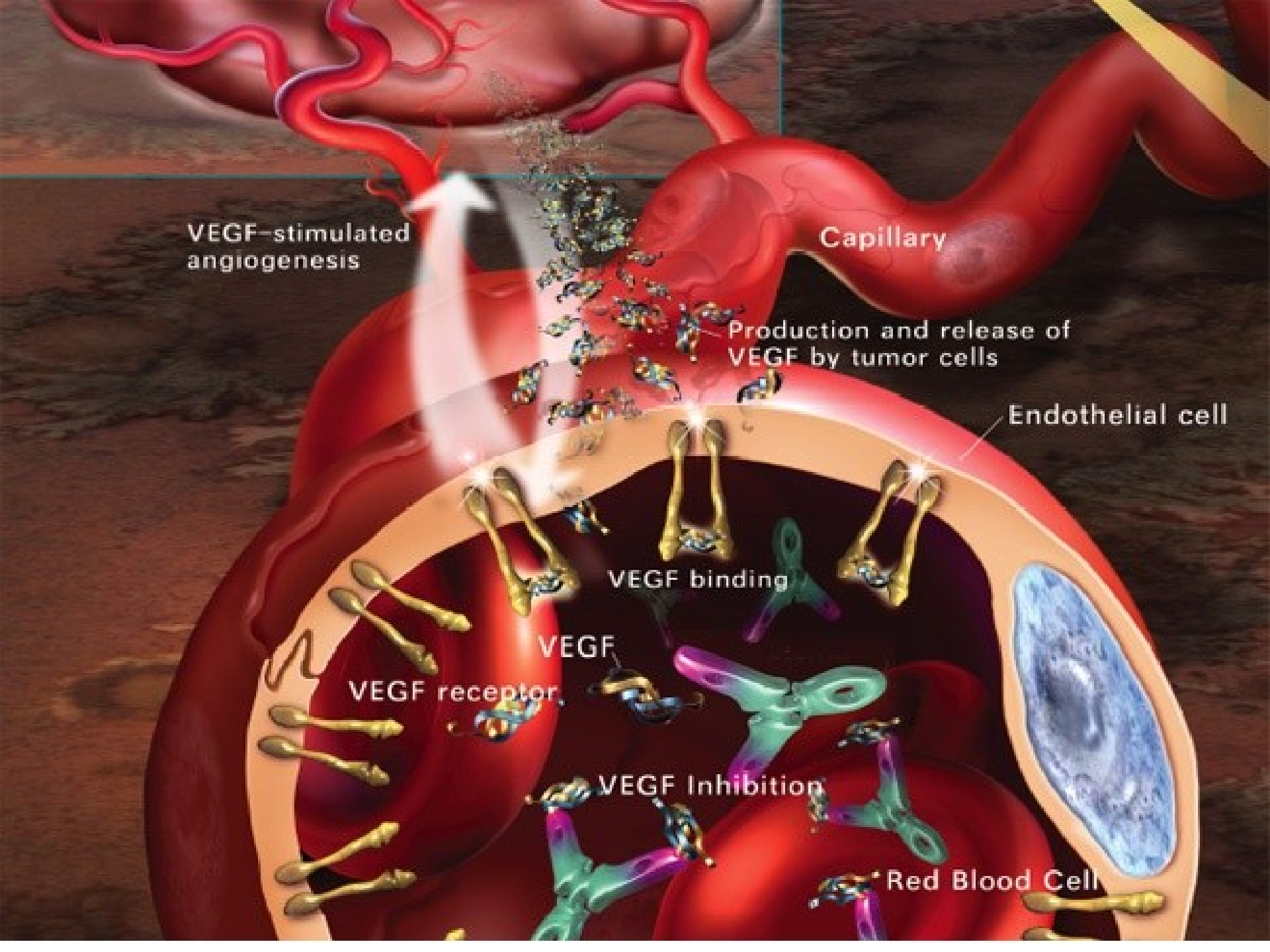




Angiogenesis from Pre-Existing Vessels

1. Vasodilation
2. Proteolytic degradation of the BM
3. Migration of endothelial cells
4. Proliferation of endothelial cells
5. Maturation of endothelial cells
6. Recruitment of periendothelial cells (including pericytes for small capillaries and vascular smooth muscle cells for larger vessels)





VEGF-stimulated
angiogenesis

Capillary

Production and release of
VEGF by tumor cells

Endothelial cell

VEGF binding

VEGF

VEGF receptor

VEGF Inhibition

Red Blood Cell

Angiogenesis

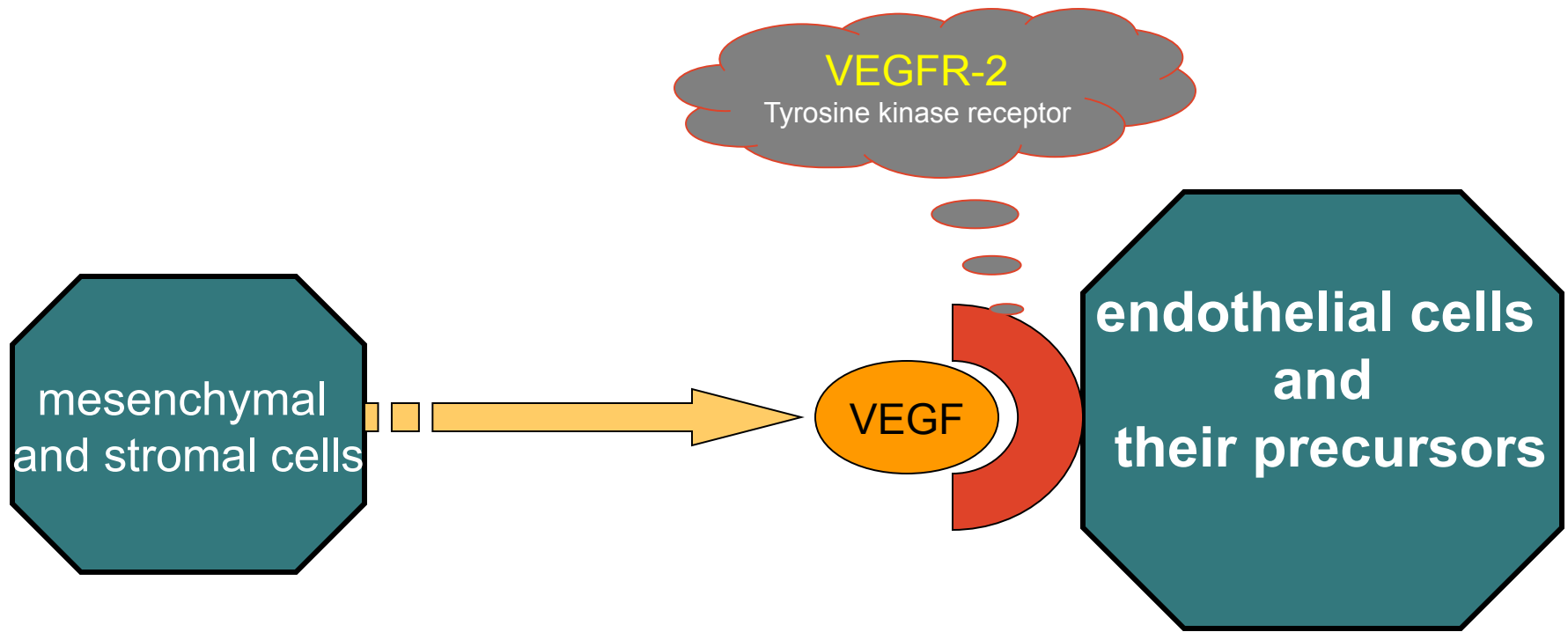
is critical to

1. chronic inflammation
2. fibrosis
3. tumor growth
4. vascularization of ischemic tissues

Growth Factors and Receptors Involved in Angiogenesis

- Many growth factors exhibit angiogenic activity

VEGF & Angiopoietins



Angiogenesis from Endothelial Precursor Cells:

mobilization of endothelial cell precursors from the bone marrow and enhances the proliferation and differentiation of these cells

Angiogenesis from Pre-Existing Vessels:

VEGF stimulates both proliferation and motility of endothelial cells, thus initiating the sprouting of new capillary

Stabilization process

- Recruitment of pericytes and smooth muscle cells and the deposition of ECM proteins
- Angiopoietins 1 and 2, PDGF, TGF- β

SCAR FORMATION

platelets,
inflammatory cells
(macrophages),
activated endothelium

Growth factors and
cytokines:
TGF- β , PDGF, EGF,
FGF, and the
cytokines IL-1 and TNF

Fibroblast proliferation
and migration

Deposition of ECM

Tissue remodeling

Formation of
Scar

TGF- β

the most important because of the multitude of effects that favor fibrous tissue deposition

- causes fibroblast migration
- proliferation
- increased synthesis of collagen and fibronectin
- decreased degradation of ECM by metalloproteinases
- chemotactic for monocytes and causes angiogenesis

ECM Deposition and Scar Formation

growth factors (PDGF, FGF, TGF- β) and cytokines (IL-1, IL-13), which are secreted by leukocytes and fibroblasts in healing wounds



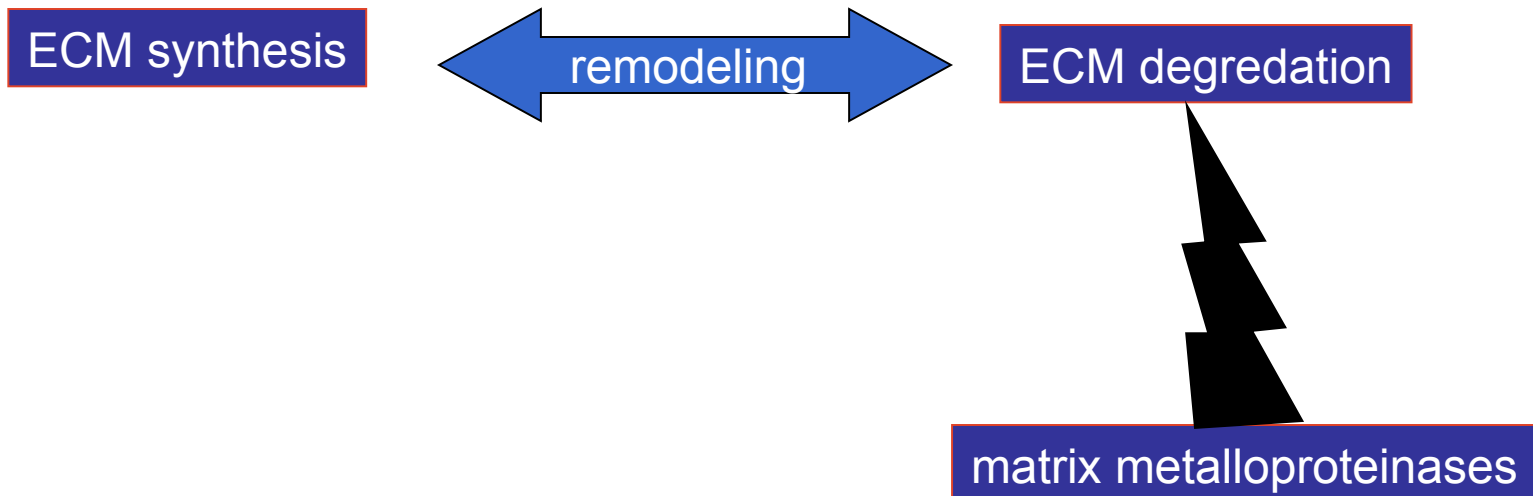
Fibroblasts



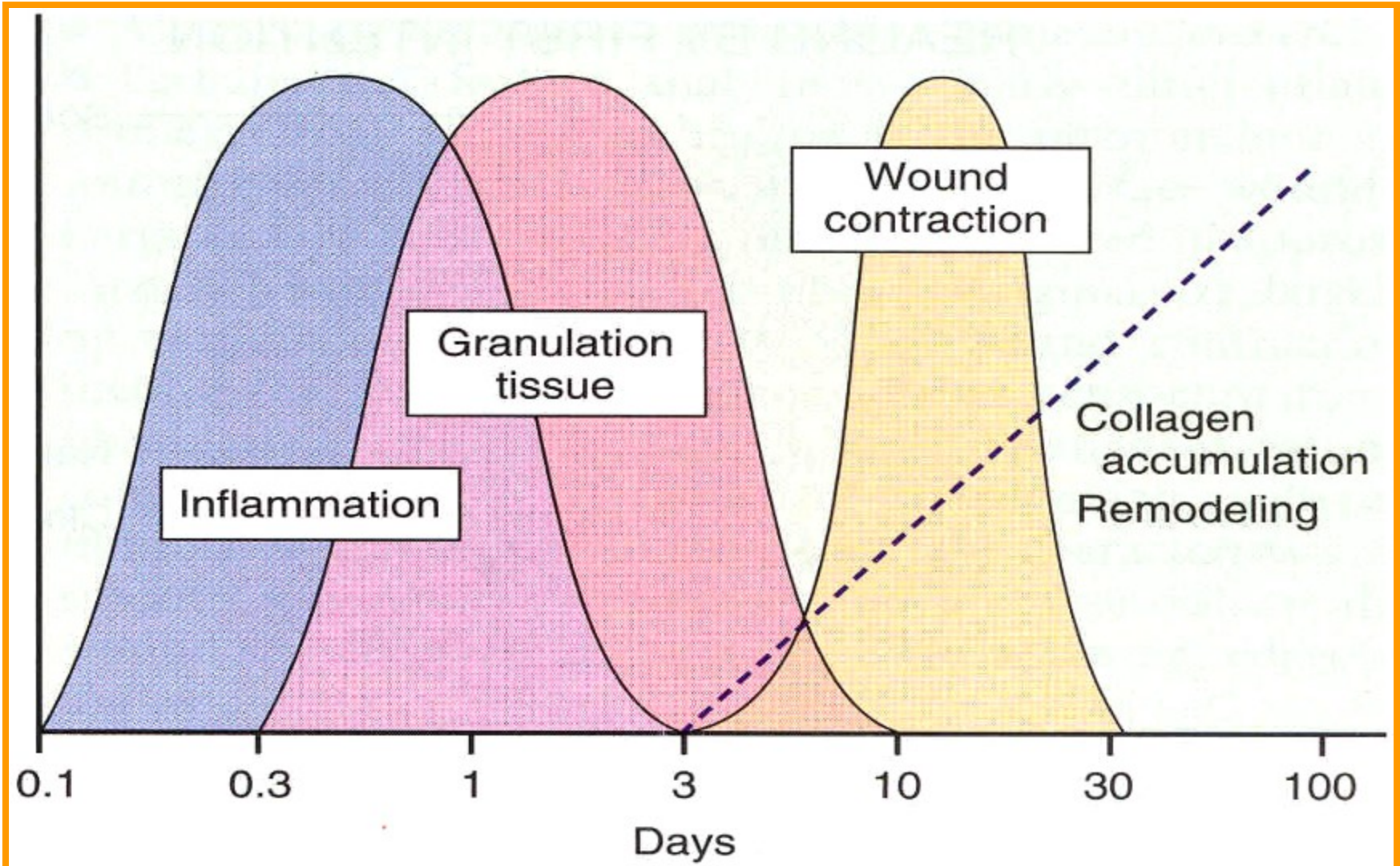
Fibrillar collagens
(major portion of the connective tissue)

Tissue Remodeling

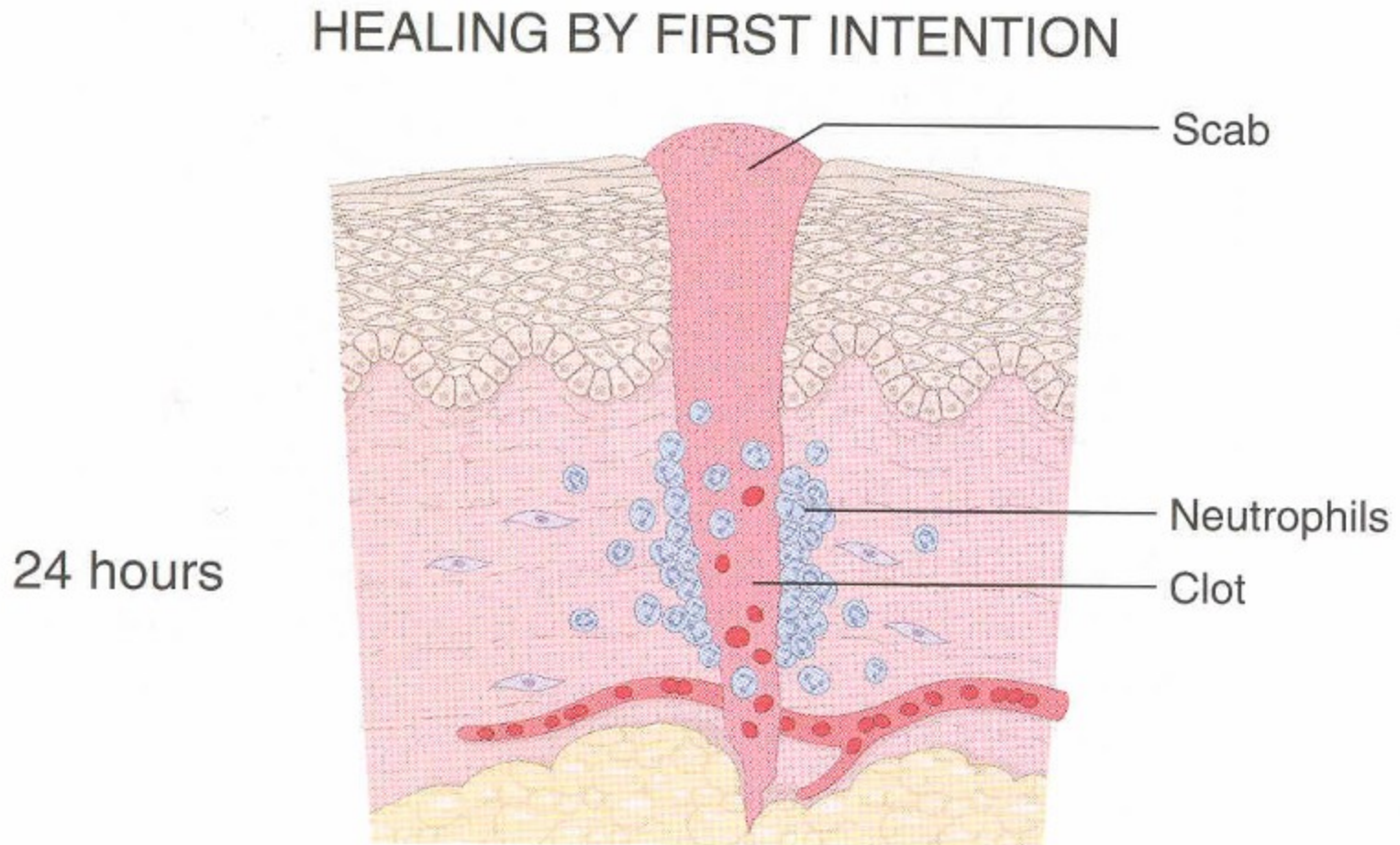
replacement of granulation tissue with a scar



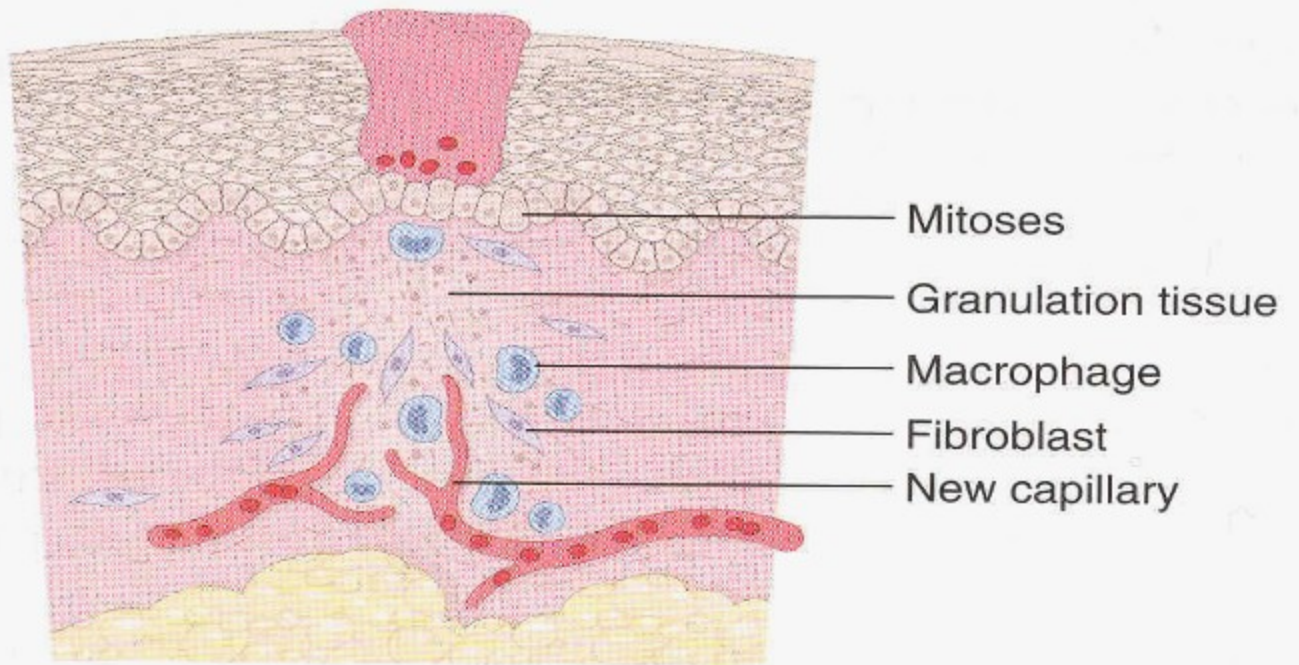
Cutaneous Wound Healing



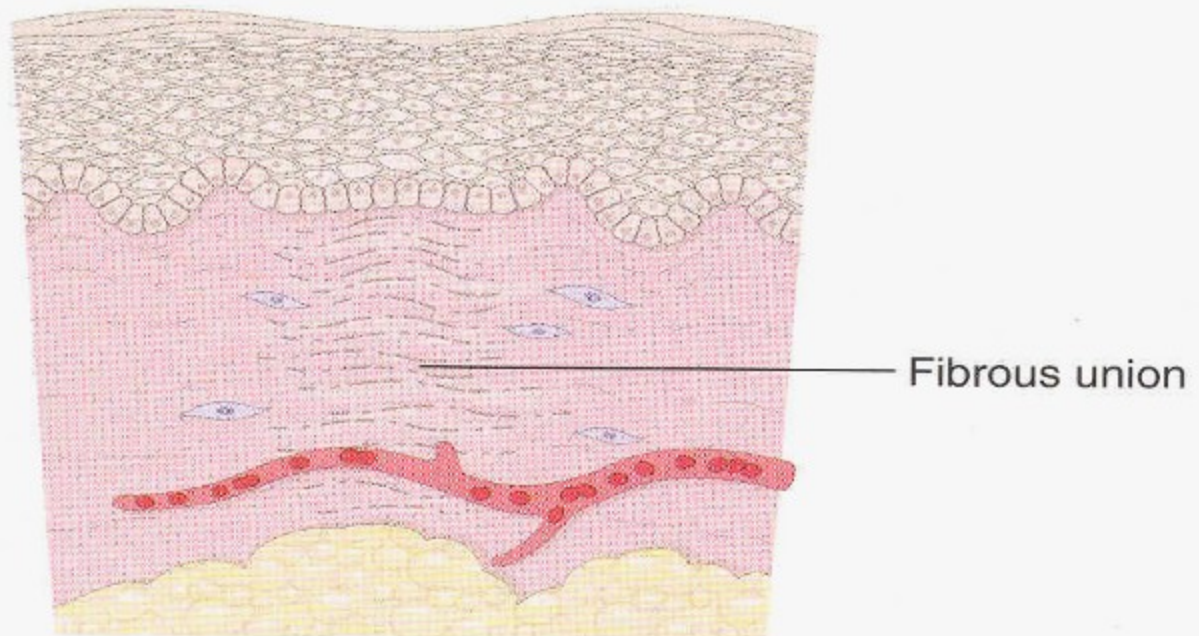
HEALING BY FIRST INTENTION (WOUNDS WITH OPPOSED EDGES)



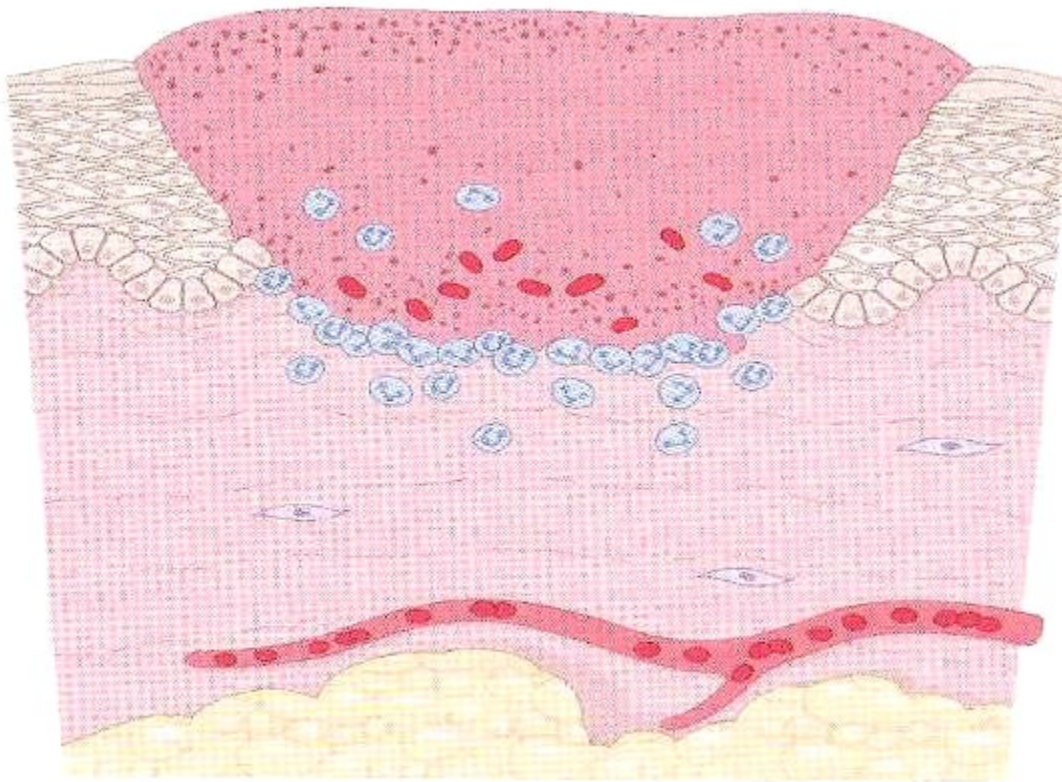
3 to 7 days

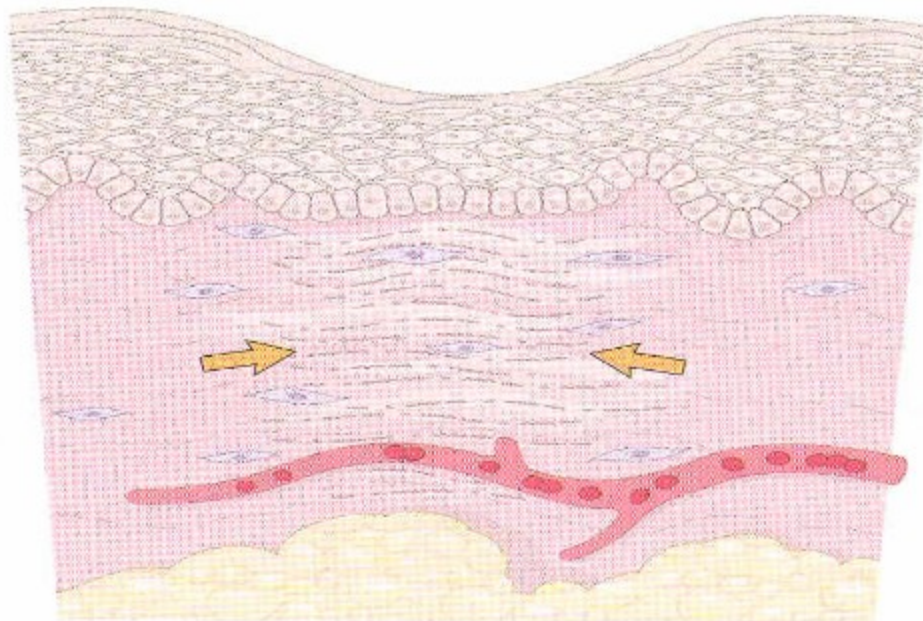
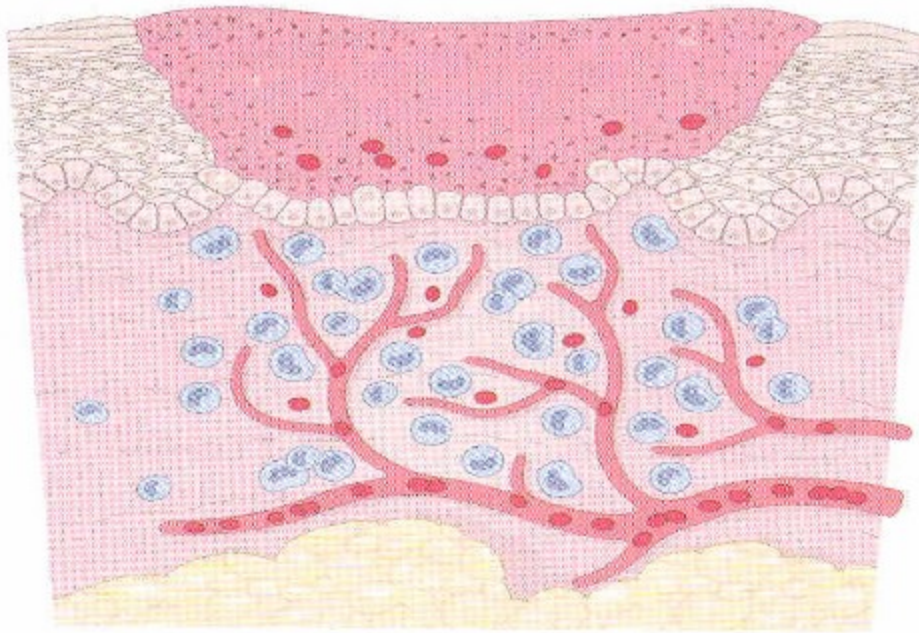


Weeks



HEALING BY SECOND INTENTION (WOUNDS WITH SEPARATED EDGES)





Wound
contraction

WOUND STRENGTH

first week= 10%  **third month=70-80%**  ...

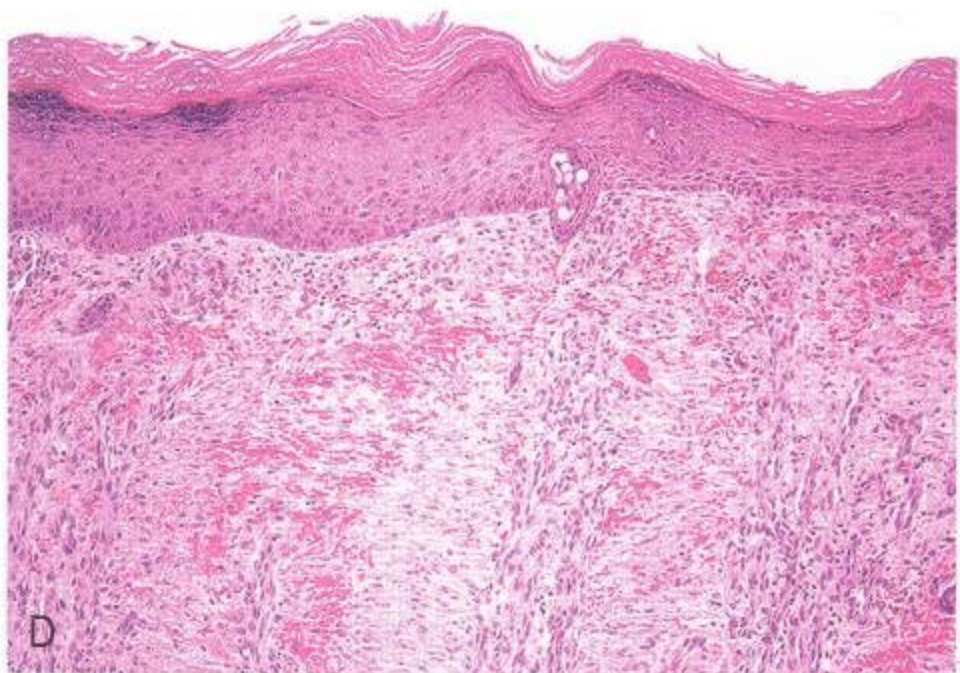
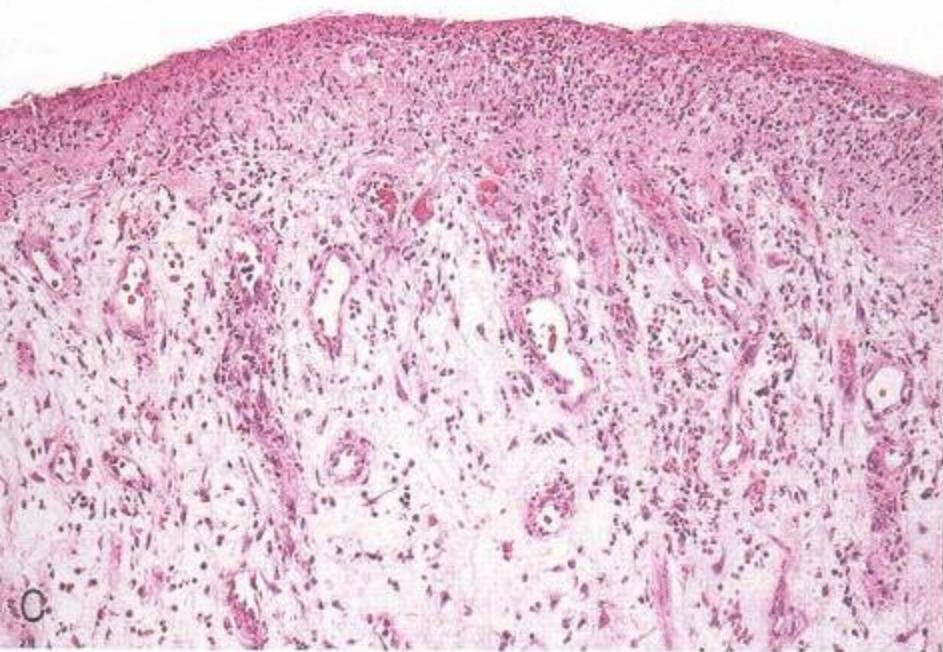
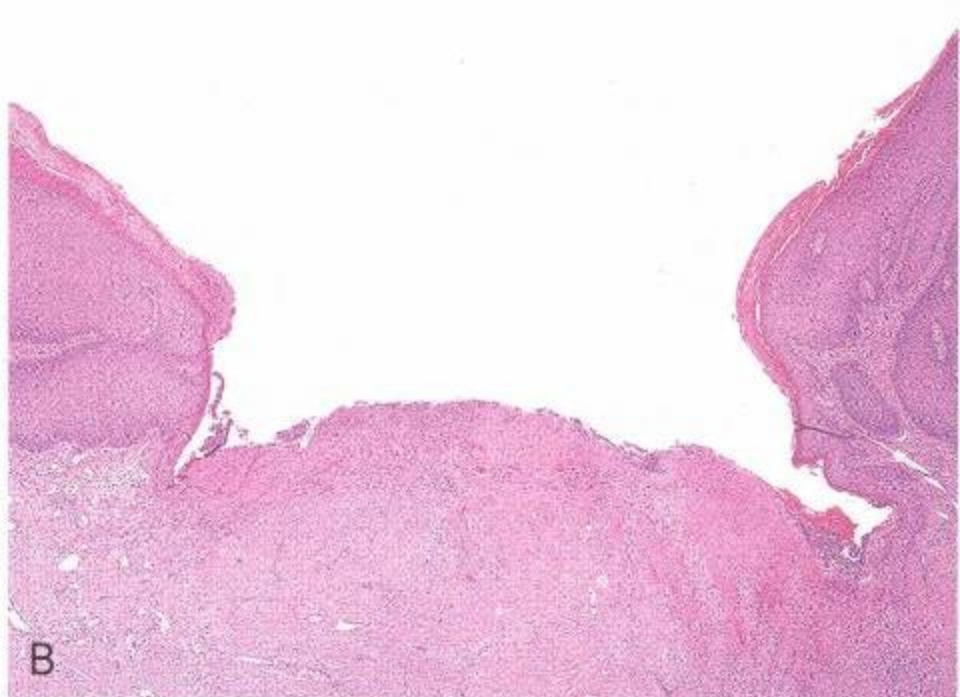


TABLE 3–5 Factors That Retard Wound Healing**Local Factors**

Blood supply	Mechanical stress
Denervation	Necrotic tissue
Local infection	Protection (dressings)
Foreign body	Surgical techniques
Hematoma	Type of tissue

Systemic Factors

Age	Malnutrition
Anemia	Obesity
Drugs (steroids, cytotoxic medications, intensive antibiotic therapy)	Systemic infection
Genetic disorders (osteogenesis imperfecta, Ehlers-Danlos syndromes, Marfan syndrome)	Temperature
Hormones	Trauma, hypovolemia, and hypoxia
Diabetes	Uremia
Malignant disease	Vitamin deficiency (vitamin C)
	Trace metal deficiency (zinc, copper)

Adapted from Schwartz SI: Principles of Surgery. New York, McGraw Hill, 1999.

COMPLICATIONS IN CUTANEOUS WOUND HEALING

(1) Deficient scar formation

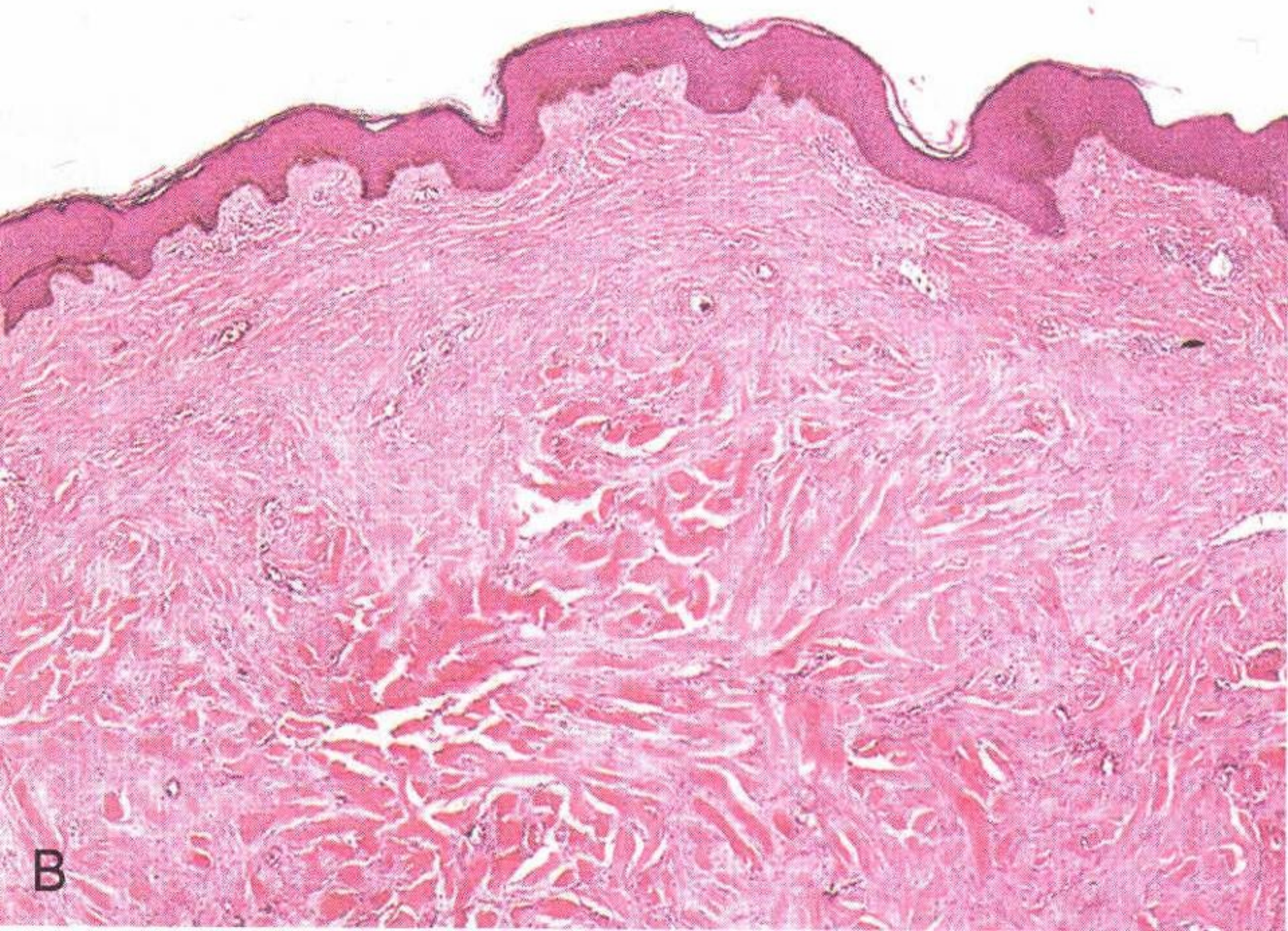
- Dehiscence
- Ulceration

(2) Excessive formation of the repair components

(3) Formation of contractures

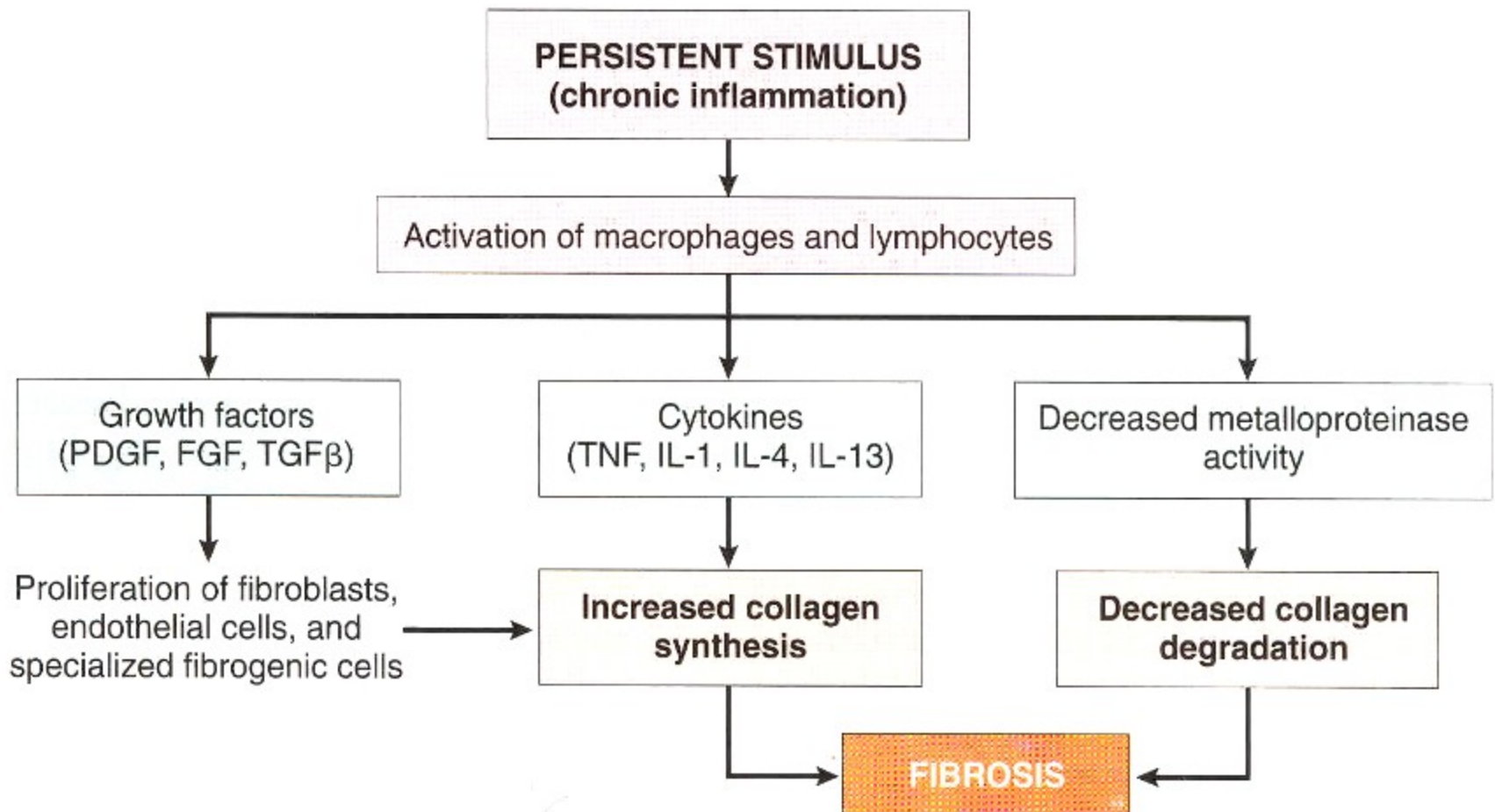
hypertrophic scar & keloid



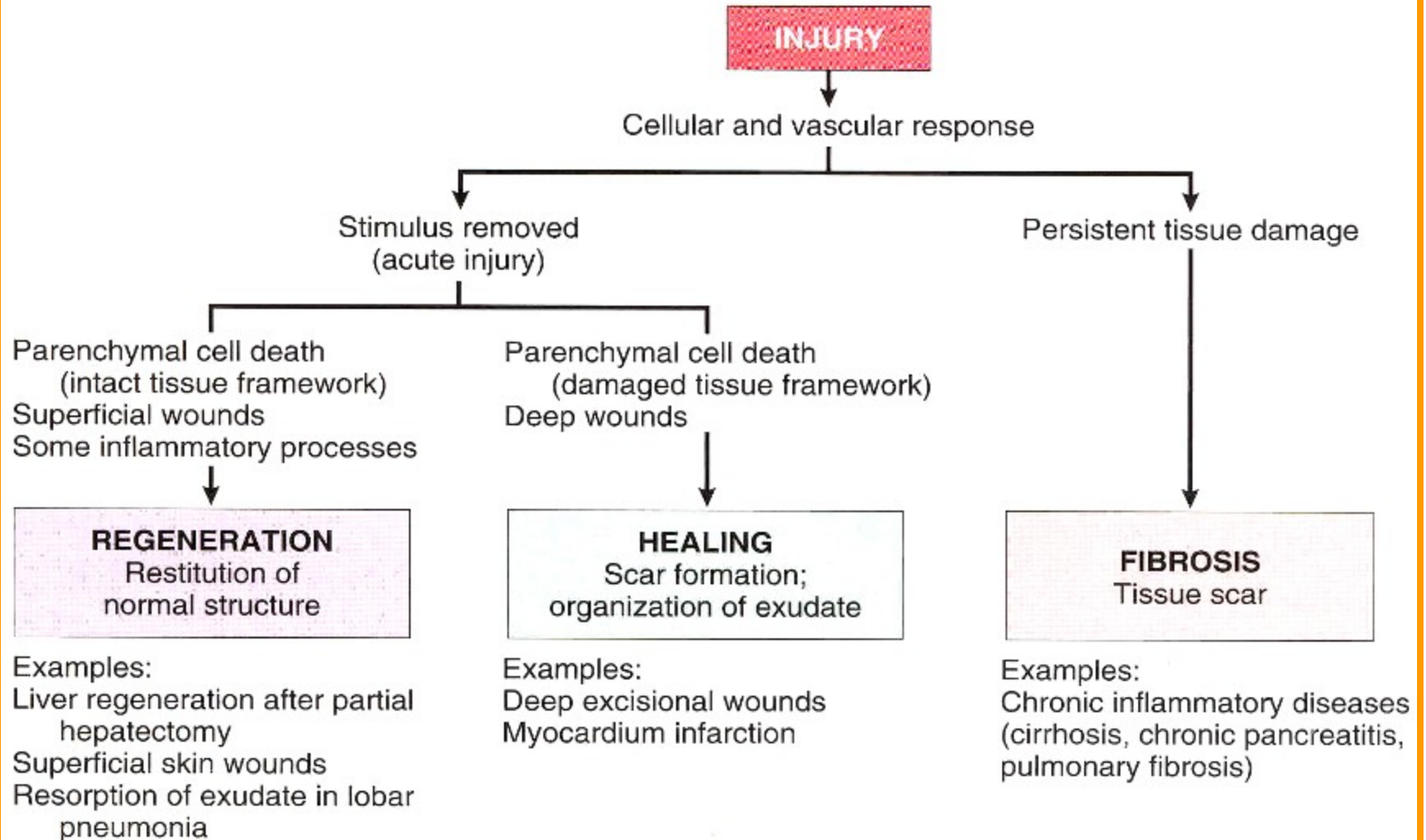


B

Fibrosis



Overview



**"Great people are great
because they solve
countless seemingly
unsolvable problems**

you can too.. if you choose to."

– *Mark Victor Hansen*

