

Mouse Model of Chronic Post-Arthroplasty Infection: Noninvasive In Vivo Bioluminescence Imaging to Monitor Bacterial Burden For Long-Term Study

Jonathan R. Pribaz, M.D.
Nicholas M. Bernthal, M.D.
Fabrizio Billi, M.D.
John S. Cho, Ph.D.
Romela I. Ramos, B.S.
Yi Guo, Ph.D.
Kevin P. Francis, Ph.D.
Lloyd S. Miller, M.D., Ph.D.



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Background

- 4 million arthroplasties will be performed annually in the US by 2030.
- Post-arthroplasty joint infections occur in ~1% of primary and 3-5% of revisions.
 - The most common infecting organism is *Staphylococcus aureus*
- Implant infection is the most common cause of endoprosthetic failure
- Post-arthroplasty infections are clinically devastating, leading to reoperations, prolonged antibiotic therapy, extended disability/rehabilitation and significantly worse outcomes.
- Costs related to a post-arthroplasty infection average \$144,514 -- this sums to an annual national healthcare burden of \$8.63 billion by 2015.



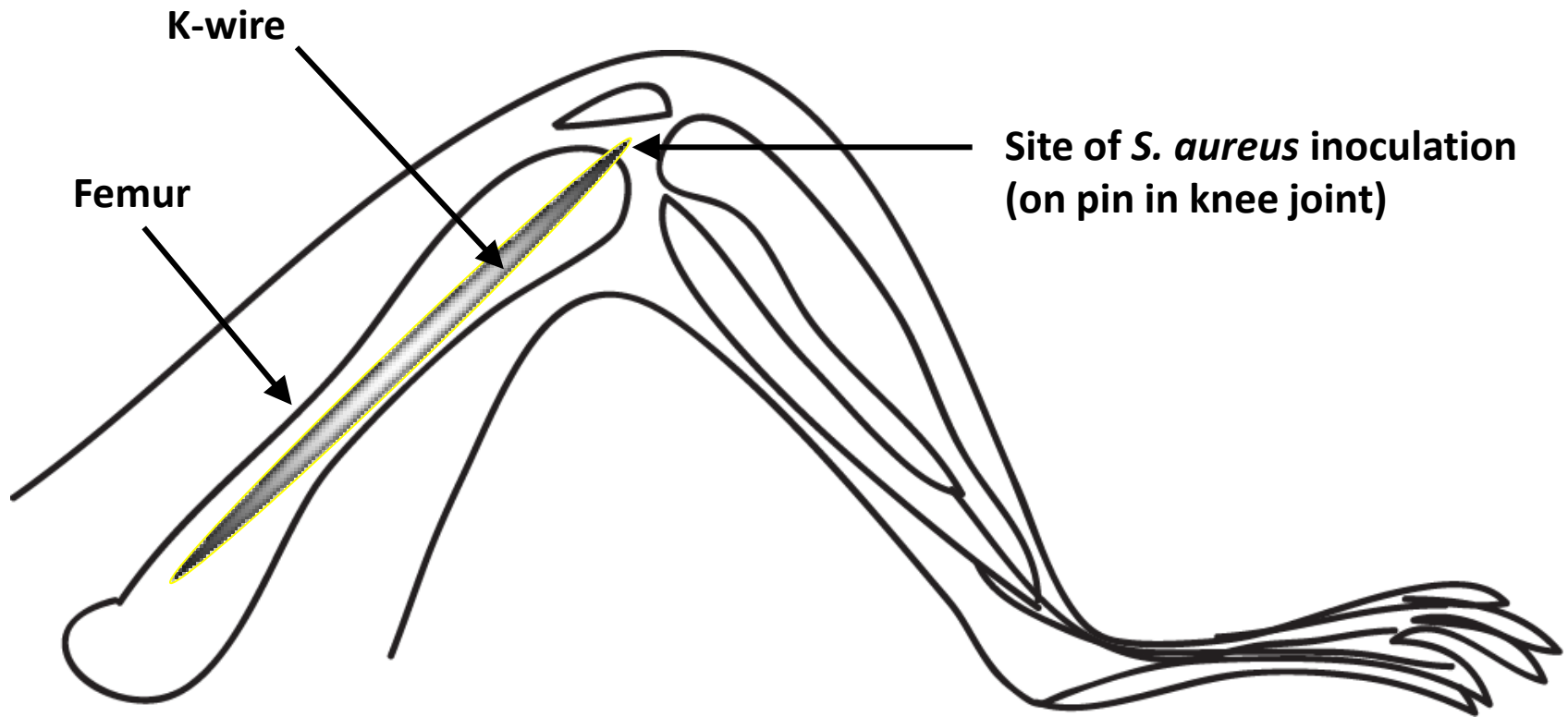
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A Mouse Model of Post-Arthroplasty *Staphylococcus aureus* Joint Infection to Evaluate *In Vivo* the Efficacy of Antimicrobial Implant Coatings

Nicholas M. Bernthal¹, Alexandra I. Stavrakis¹, Fabrizio Billi¹, John S. Cho², Thomas J. Kremen¹, Scott I. Simon³, Ambrose L. Cheung⁴, Gerald A. Finerman¹, Jay R. Lieberman⁵, John S. Adams¹, Lloyd S. Miller^{1,2*}

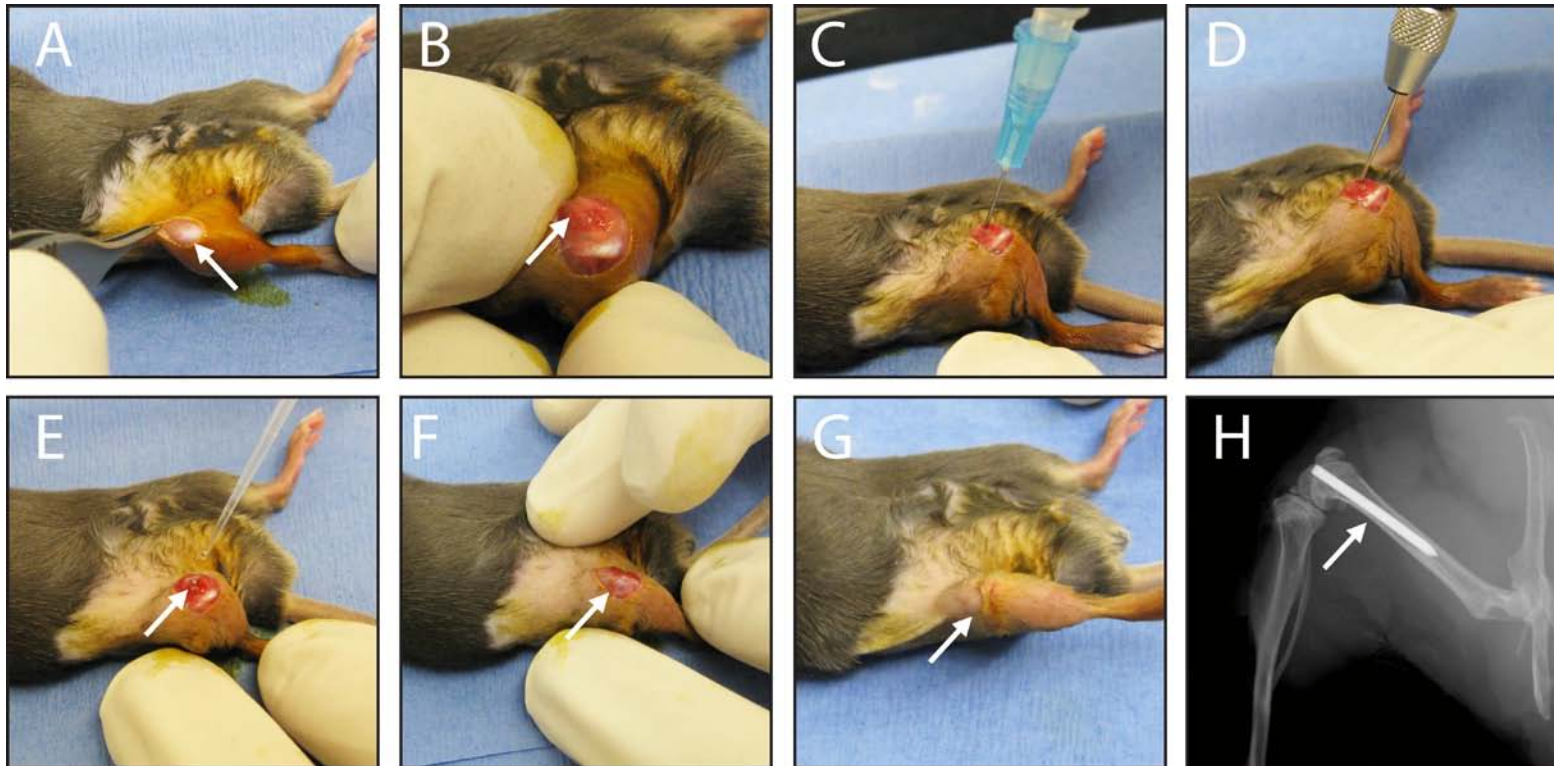


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Surgical technique for placement of an intramedullary K-wire was modified from: Epstein, N.J., et al. 2005. *J. Orthop. Res.* 23:501-510.

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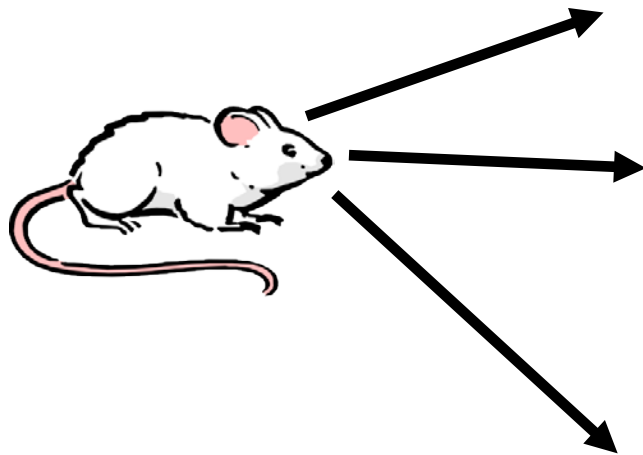


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Intra-articular inoculation of bioluminescent *S. aureus*



Bacterial counts
(in vivo bioluminescence)
(Xenogen IVIS®)

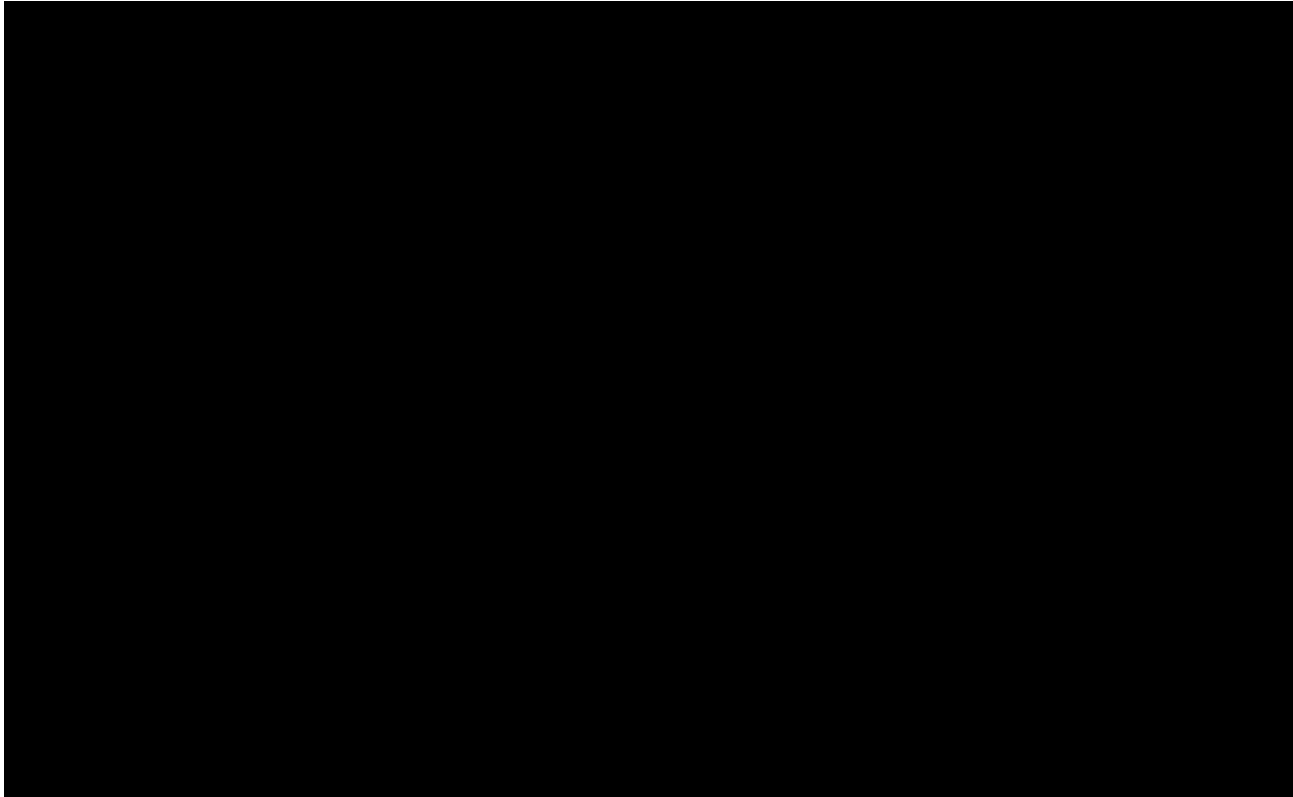


Histology,
immunohistochemistry
and myeloperoxidase
(MPO) assays



Variable Pressure
Scanning Electron
Microscopy (VP-SEM)

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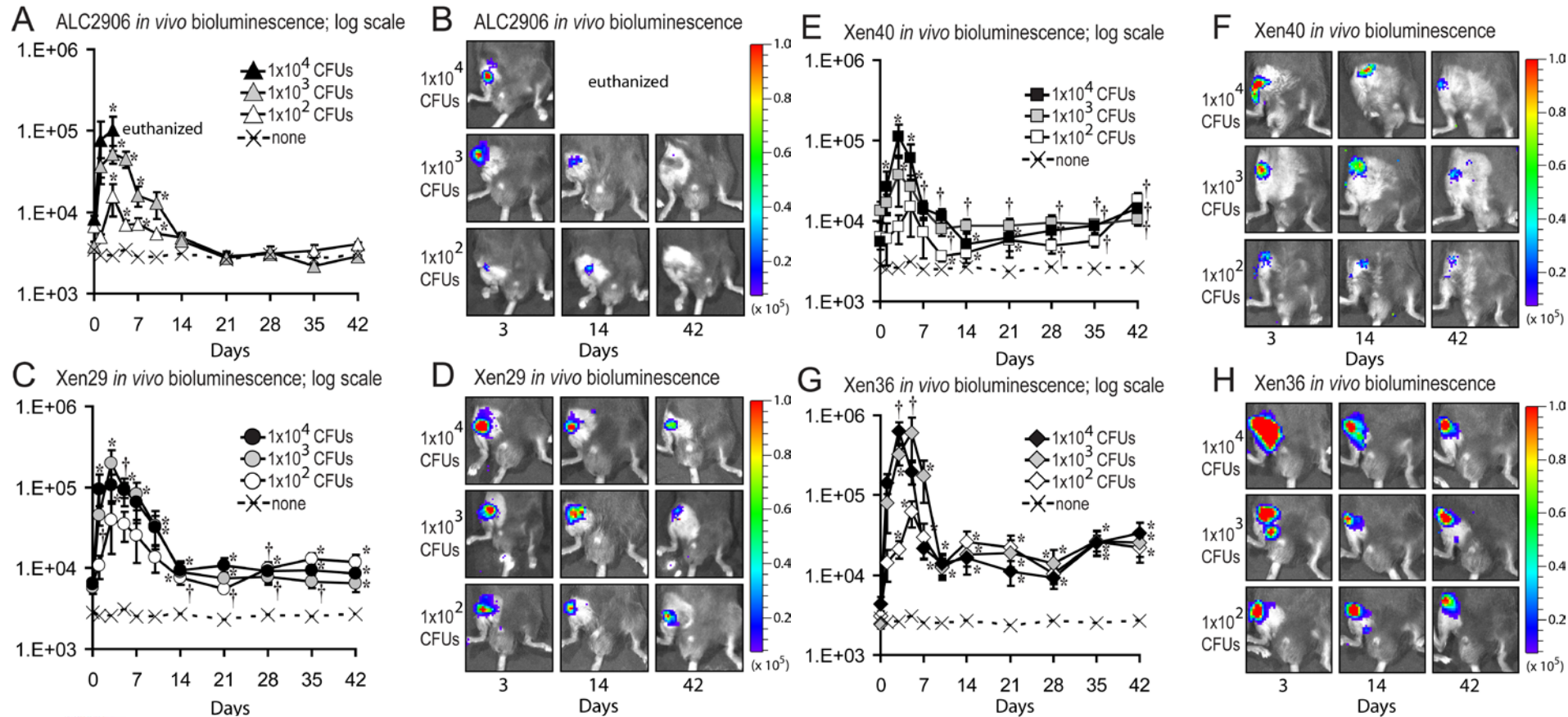
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- 4 commercially available strains of *S. aureus* containing the bioluminescent LUX operon:
 - ALC 2906
 - Xen 29
 - Xen 36
 - Xen 40
- These *S. aureus* strains naturally emit bioluminescent signals from live, actively metabolizing bacteria
- Our previous work correlated amount of bioluminescent signal with number of bacteria present in joint
- EGFP-Mice, genetically engineered possessing fluorescent neutrophils



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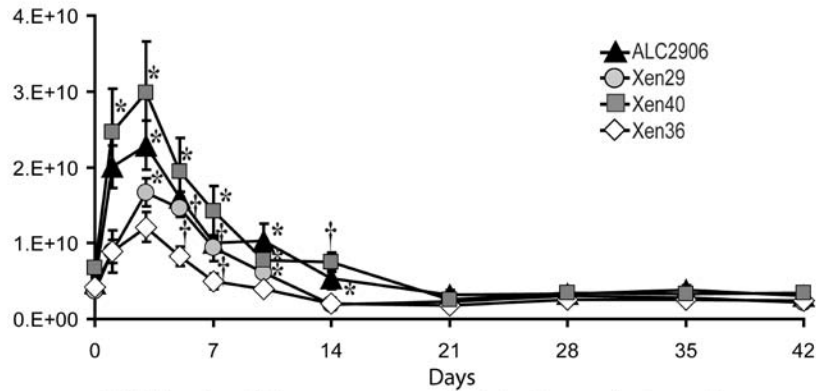
Bioluminescence



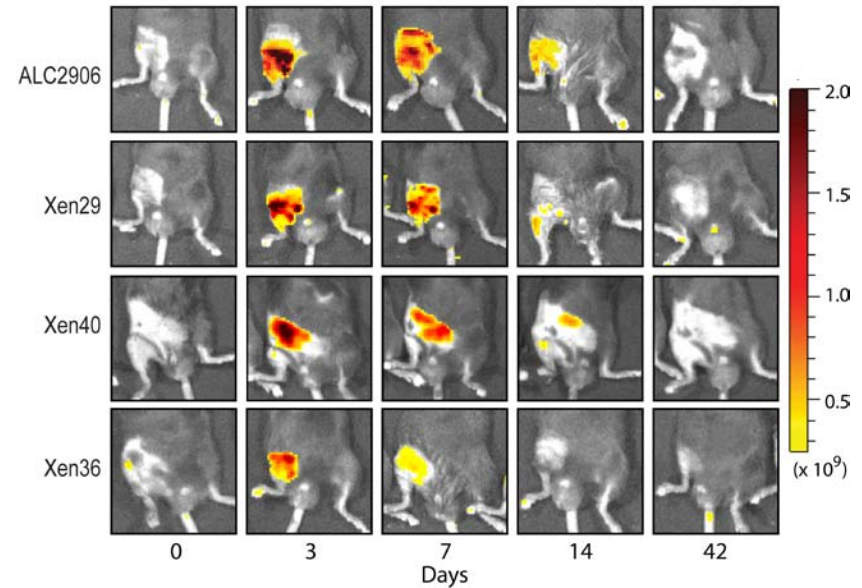
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Neutrophil Recruitment

A *In vivo* EGFP-neutrophil fluorescence; linear scale

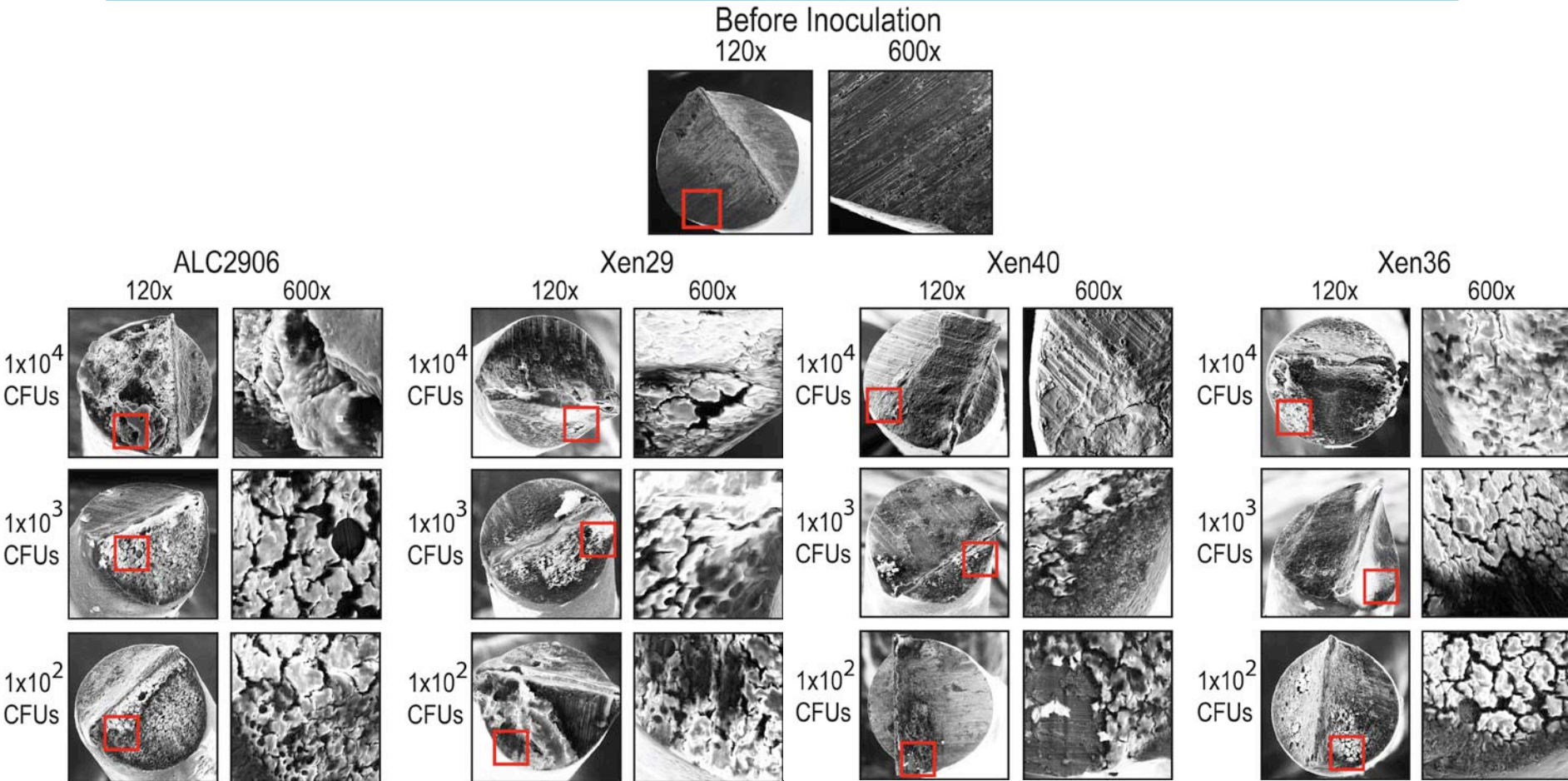


B *In vivo* EGFP neutrophil fluorescence representative images (color scale)



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Variable Pressure Scanning Electron Microscopy



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Conclusions

S. Aureus strains with a stable bioluminescent lux operon are useful in monitoring bacterial burden of post-arthroplasty joint infections in real time over a 6 week course, thus modeling a chronic infection.

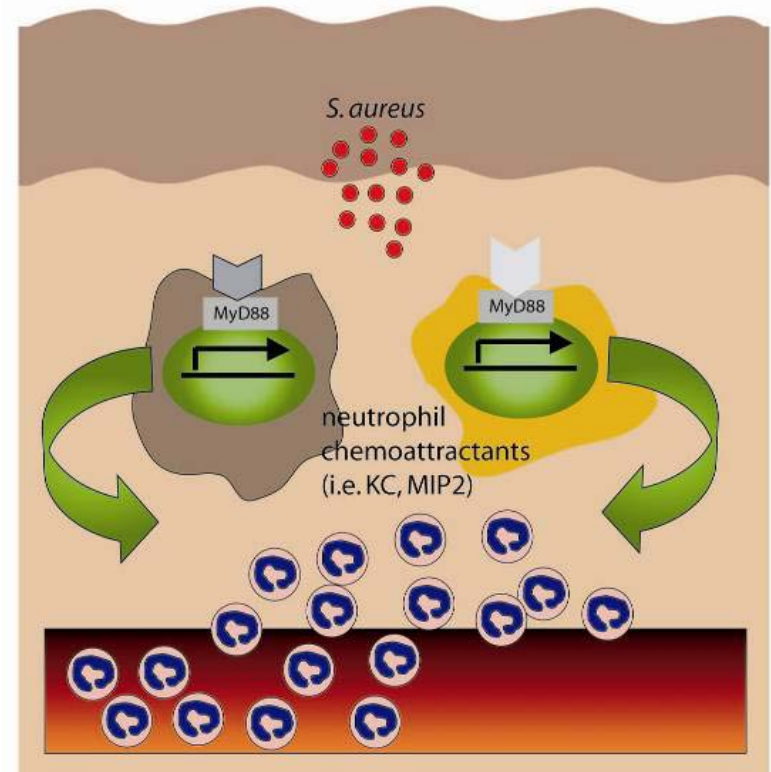
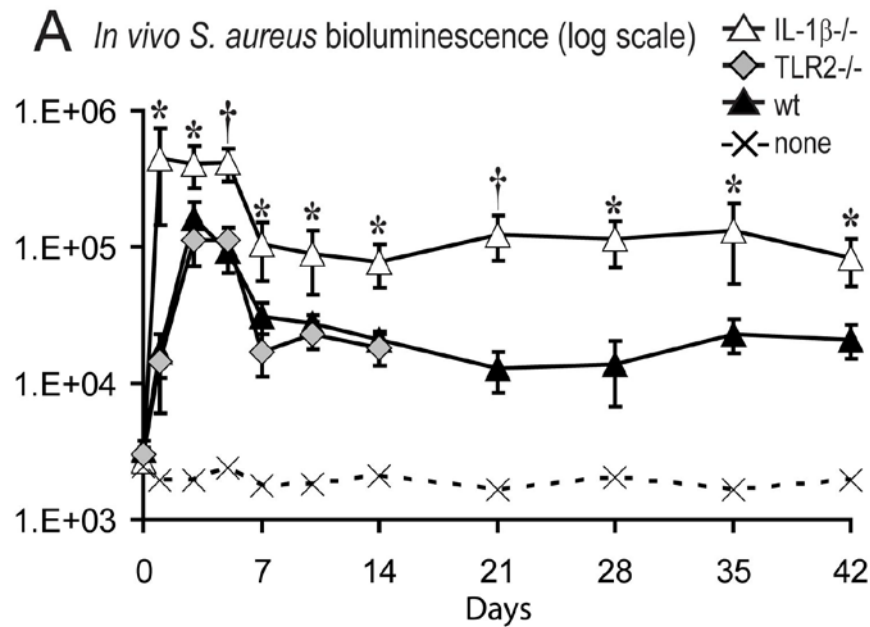
This model will allow the investigation of:

- immune responses to chronic post-arthroplasty infection
- susceptibility to infection of commonly used orthopaedic materials (i.e. stainless steel, titanium, cobalt chrome)
- evaluation of antibiotic and antimicrobial coatings



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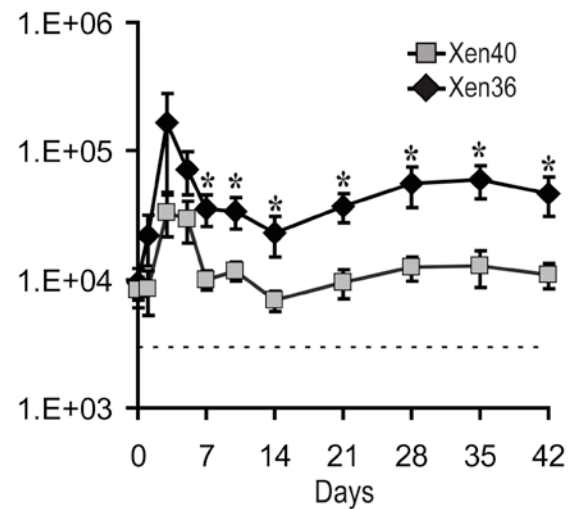
- Protective role of IL-1B by promoting neutrophil recruitment



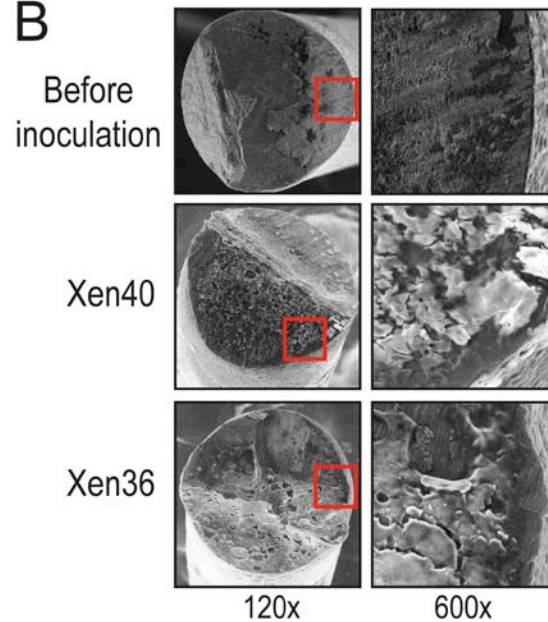
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•Titanium Implants show similar infection rates as Stainless Steel Implants

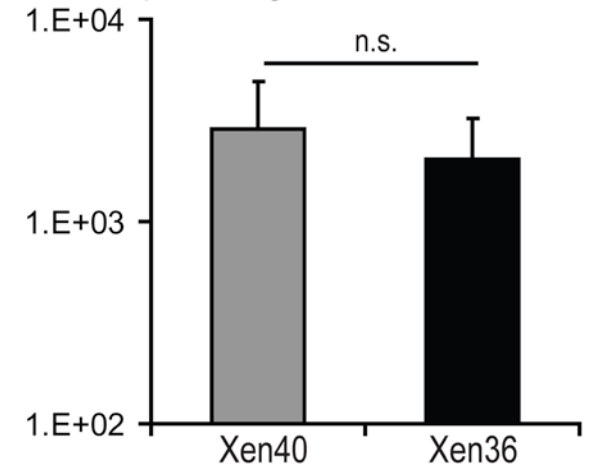
A *In vivo* bioluminescence; log scale



B

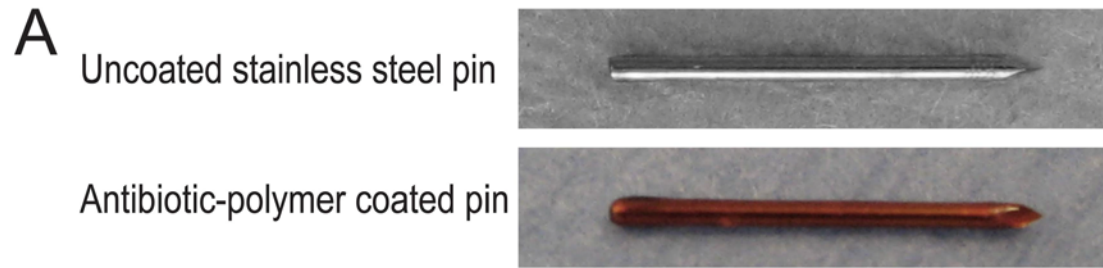


C Bacterial CFUs harvested from the implants; log scale

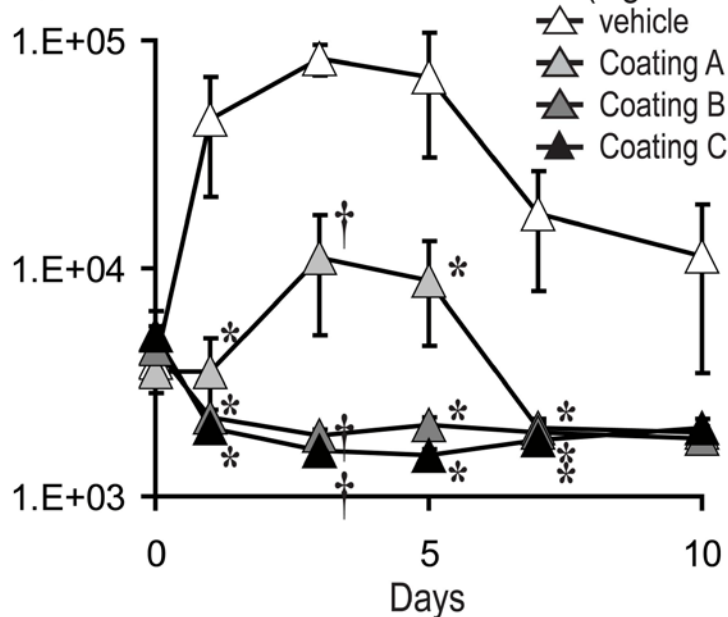


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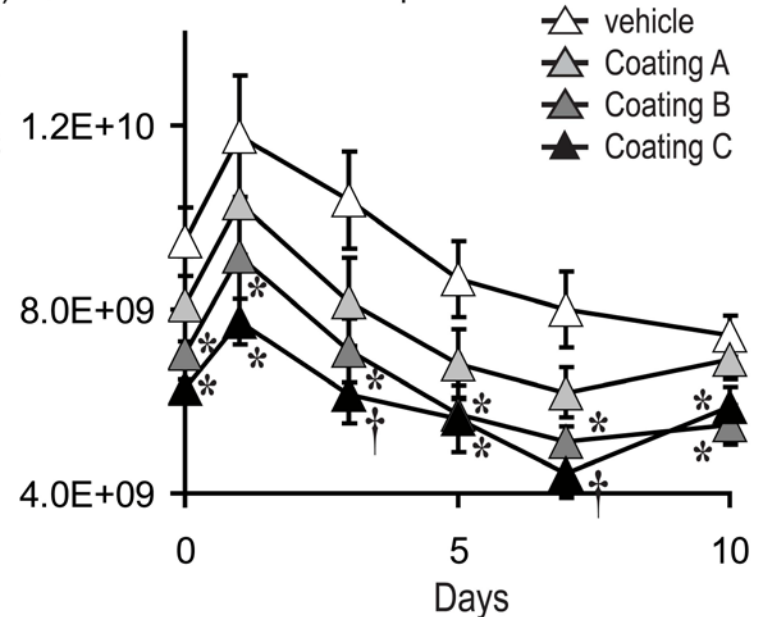
•Antibiotic Coated Pins to Prevent Post-Arthroplasty Infections



B *In vivo* *S. aureus* bioluminescence (log scale)



C *In vivo* EGFP neutrophil fluorescence



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Future Directions

- **Implant infections are disastrous complications and any method to prevent them would be greatly beneficial to patients**
- **In Vivo bioluminescence offers a non-invasive, efficient means to longitudinally track infections**
- **Understanding host biology is essential**
- **Implant coatings are the holy grail!**

