



The Hyperoxic-Hypoxic Paradox: Unraveling Its Potential in Regenerative Medicine

Shai Efrati, MD

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Shai Efrati, MD
January 2024



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Sagol School of Neuroscience
Tel Aviv University



Performance

Regenerative vs. Degenerative





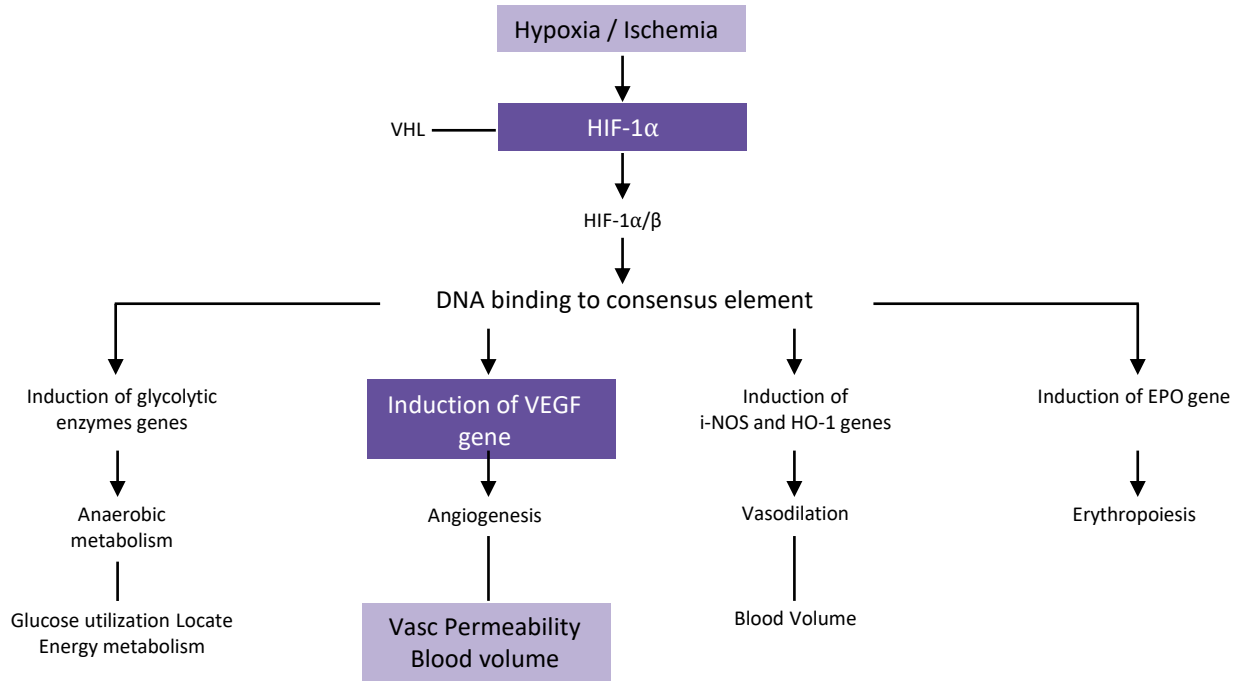
What do we need for regeneration?

- Trigger
- Stem cells
- Energy
 - Oxygen
 - Improve mitochondrial function
- Angiogenesis





Trigger - HIF





Hyperbaric Oxygen Therapy

The Hyperoxic-Hypoxic Paradox





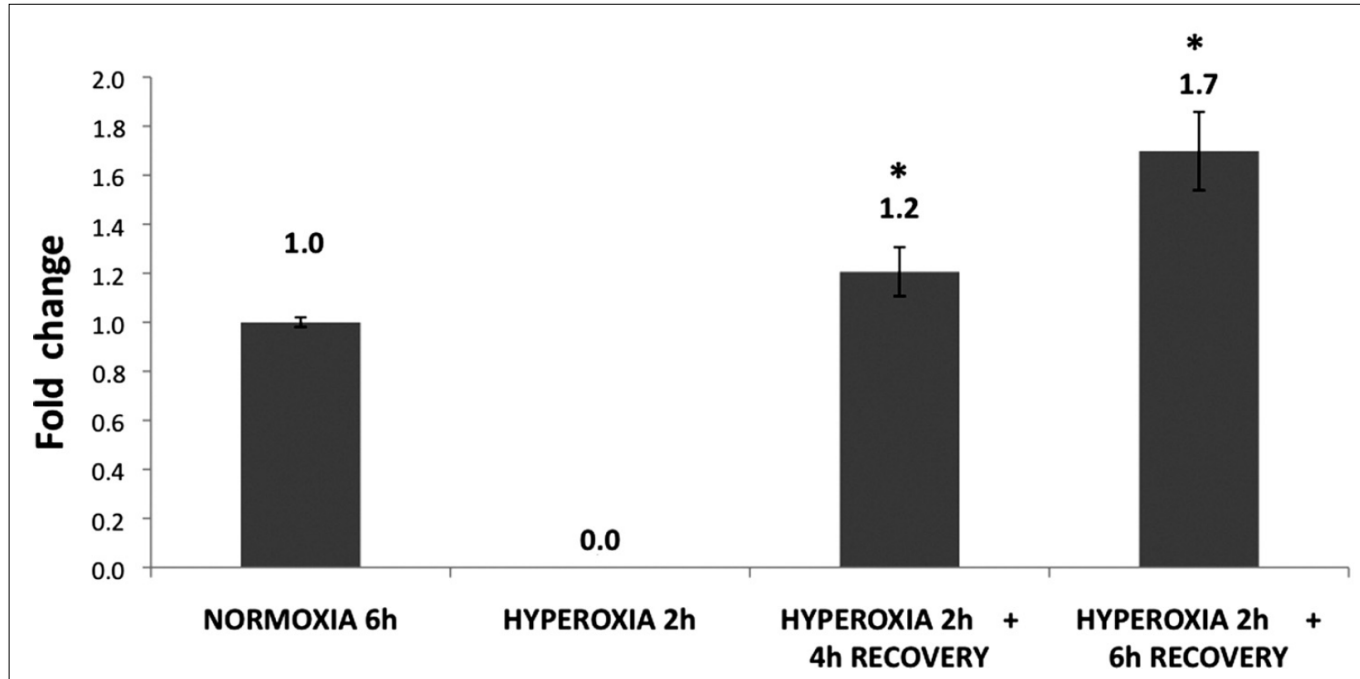
Trigger: Hyperbaric Oxygen Suite





Hyperoxic - Hypoxic Paradox

HIF 1 α in HUVEC

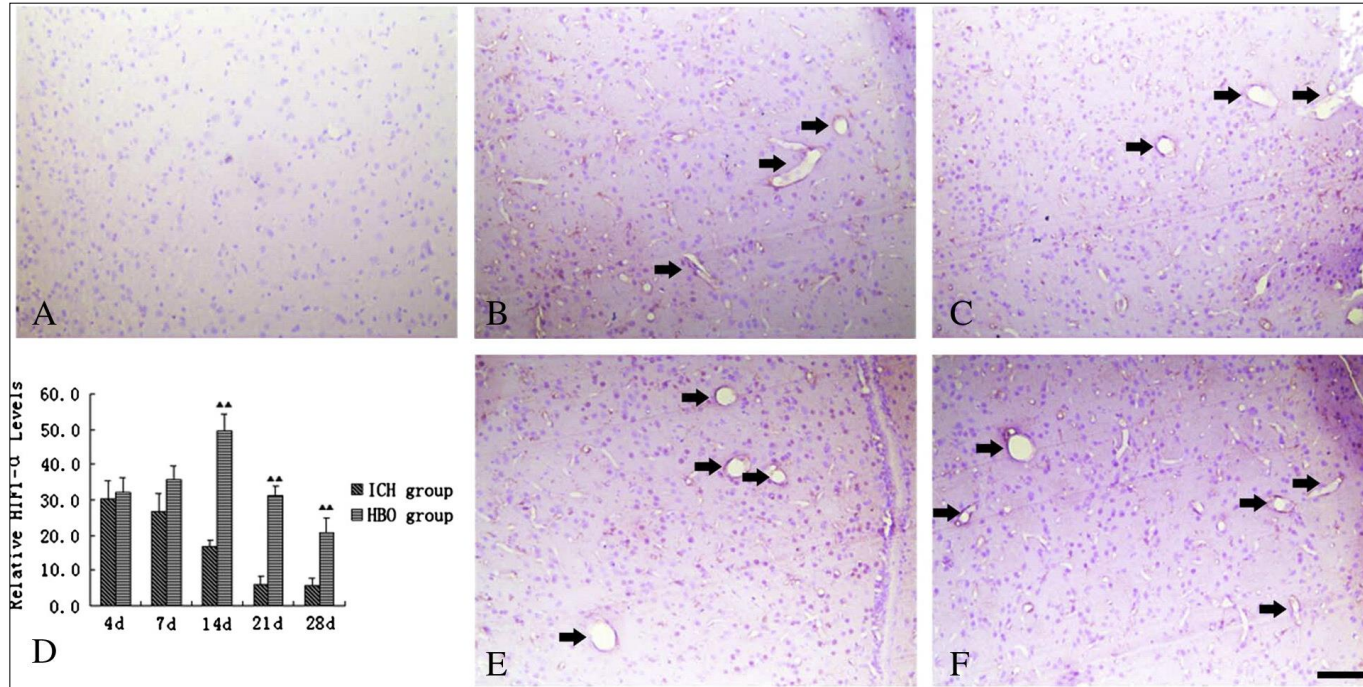


F. Cimino et al J Appl Physiol. 2012



Hyperoxic - Hypoxic Paradox

HIF in the Brain (animal model)

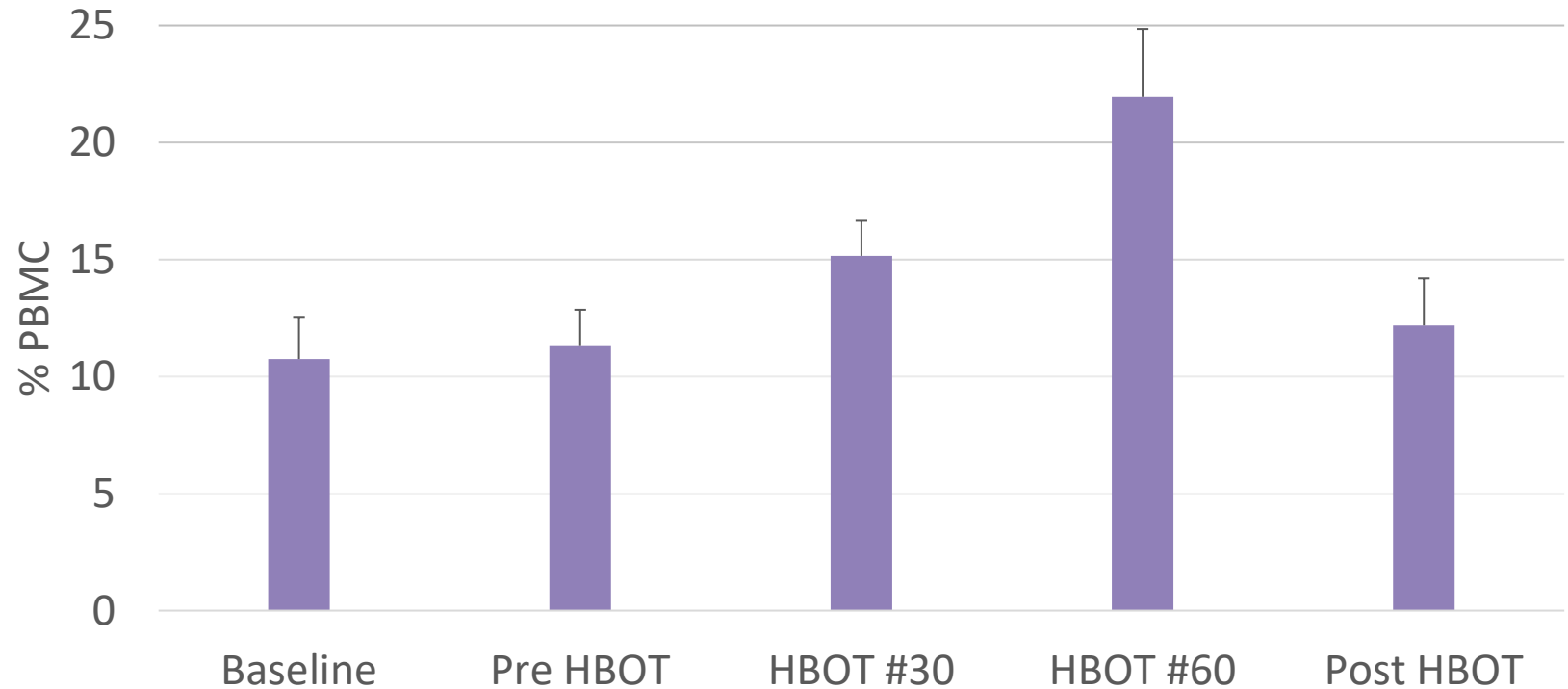


Peng et al. J Neurol Sci. 2014



Hyperoxic - Hypoxic Paradox

HIF 1 α in Humans PBMC





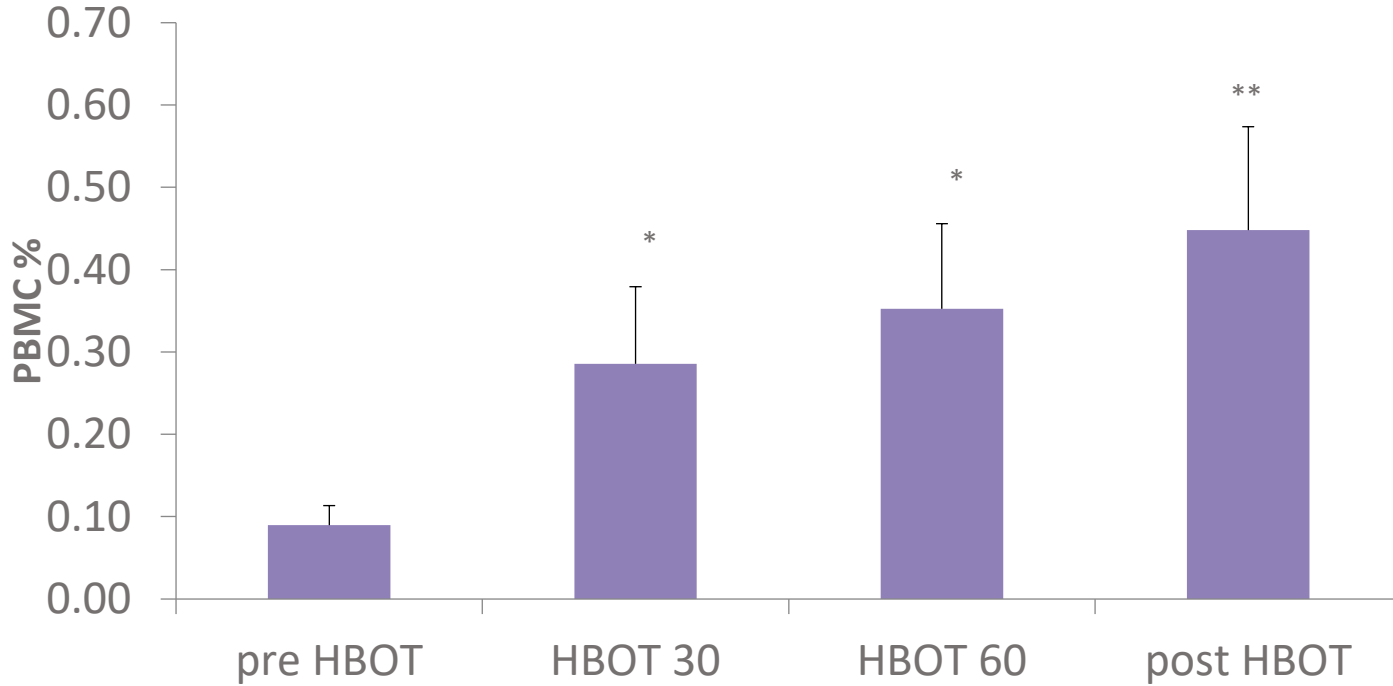
What do we need for regeneration?

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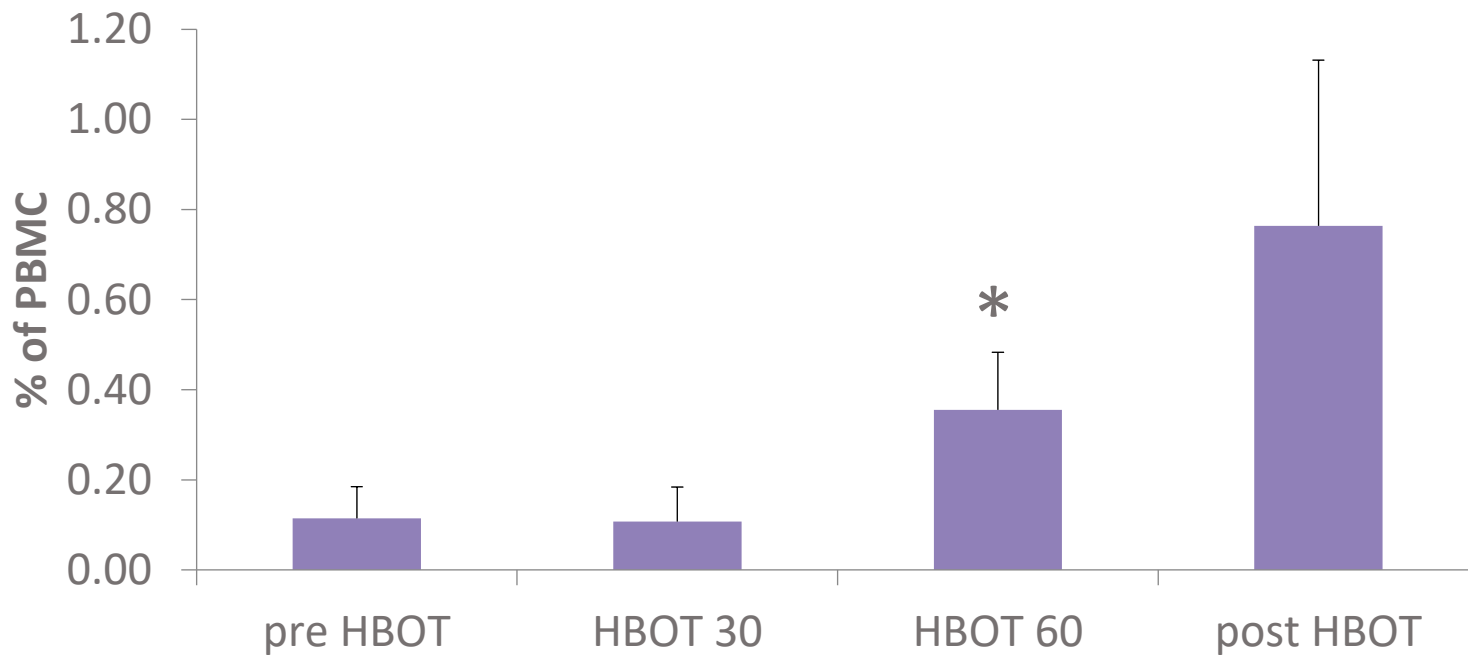


Hematopoietic Stem Cells (CD34+/CD90+)





Mesenchymal Stem Cells (CD34-/CD45-/CD73+/CD90+/CD105+)





What Do We Need For Regeneration?

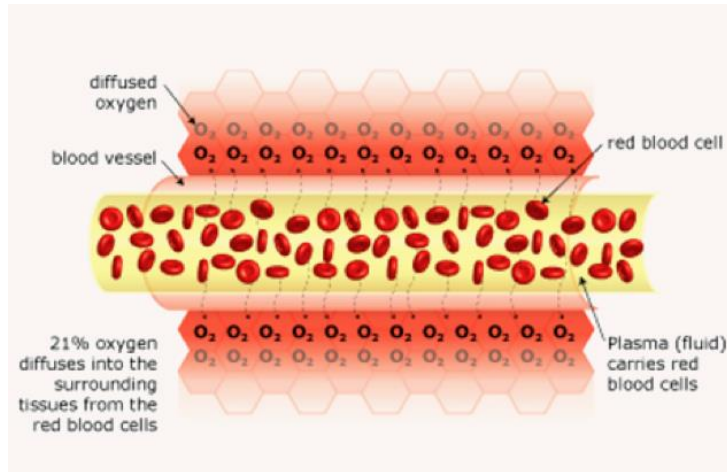
Supporting Environment



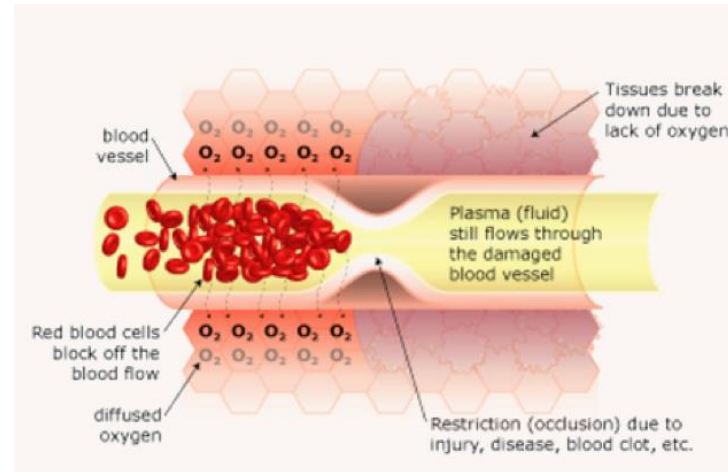


Environment

Normal Perfusion

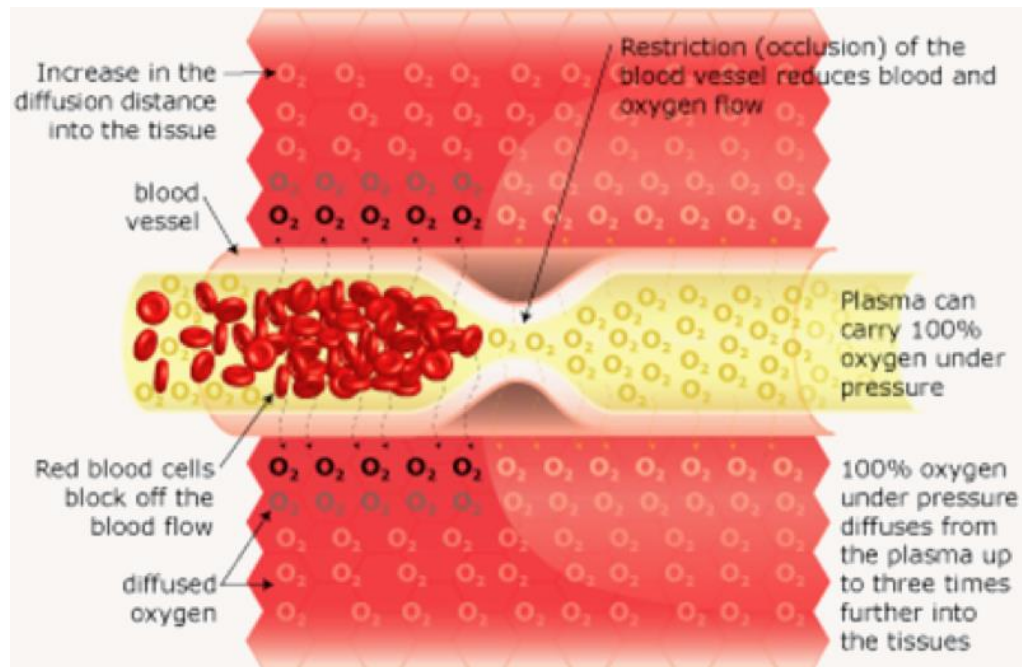


Hypoperfusion





Supporting Environment





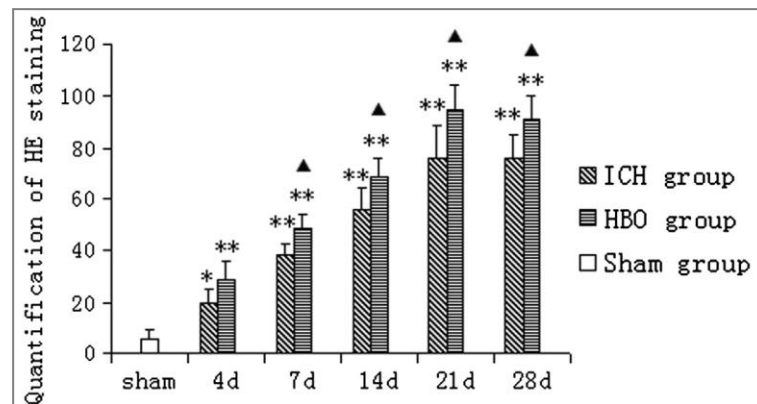
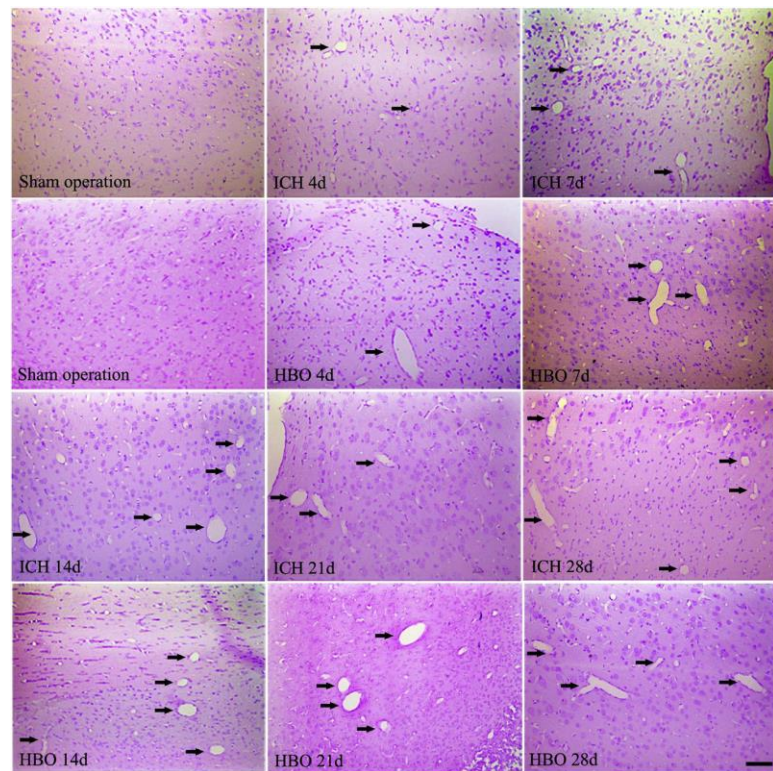
Supporting Environment

Angiogenesis





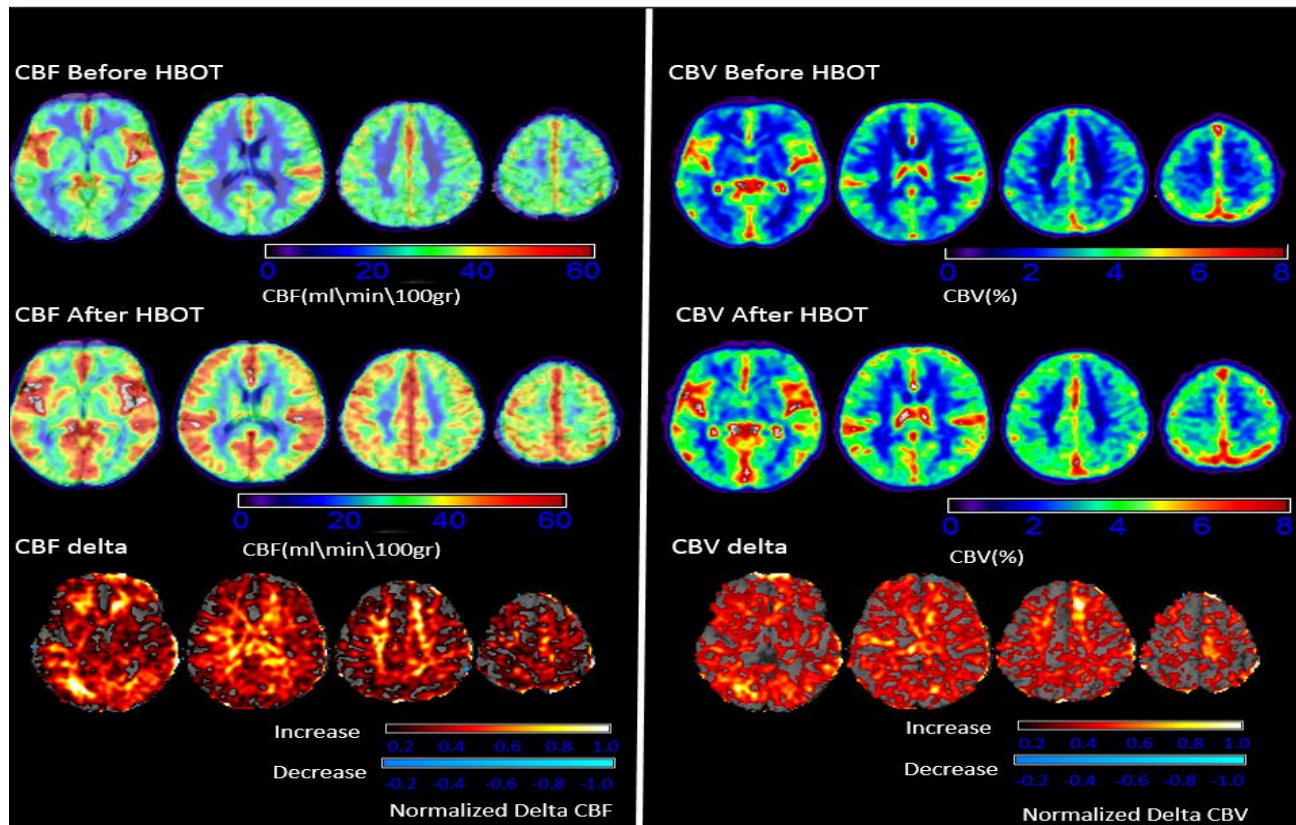
Hyperbaric Oxygen Therapy induce Brain Angiogenesis - Post Stroke rat



Peng et al. J Neurol Sci. 2014



Perfusion MRI of Post TBI Patients (10±3 yrs after the acute event)





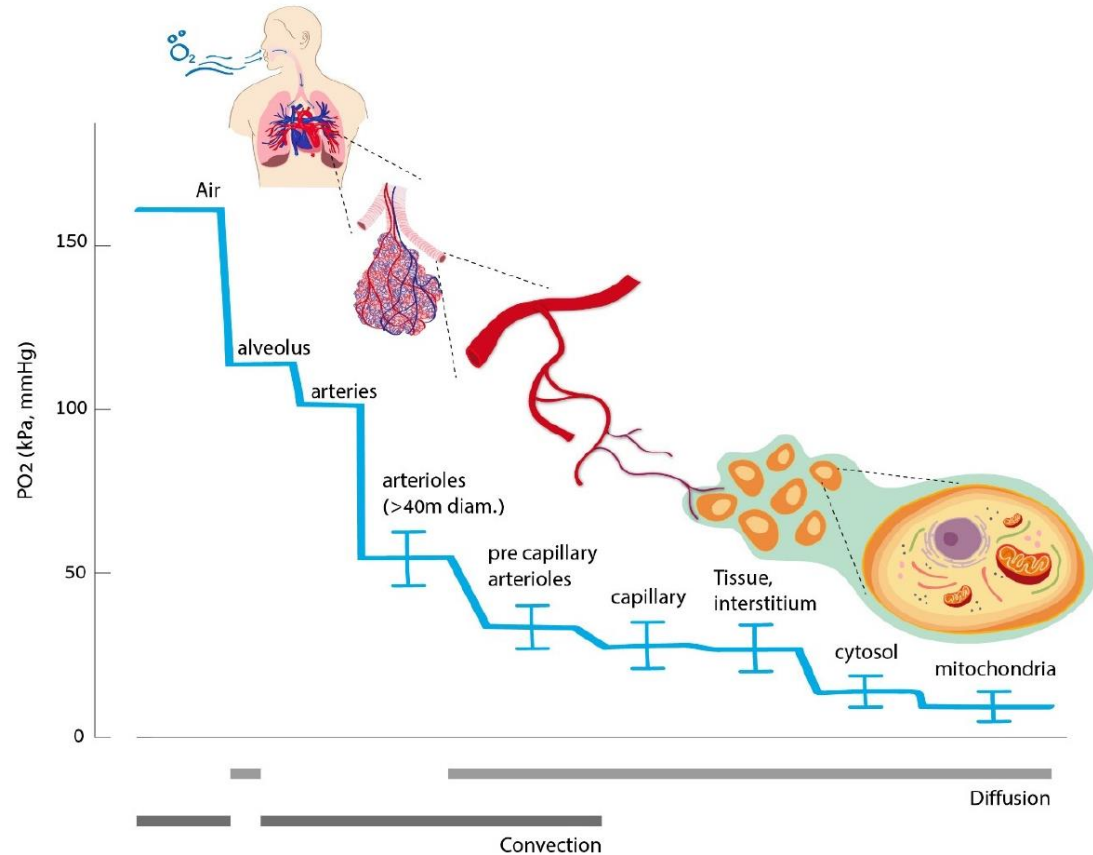
What do we need for regeneration?

- ✓ Trigger
- ✓ Stem cells
- ✓ Energy
 - ✓ Oxygen
 - ✓ Angiogenesis
- Improve mitochondrial function





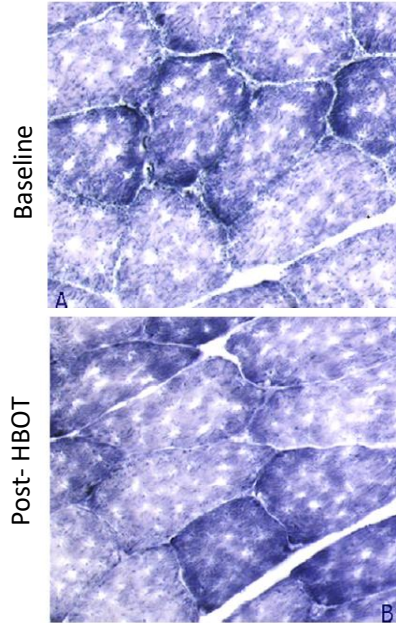
Mitochondria





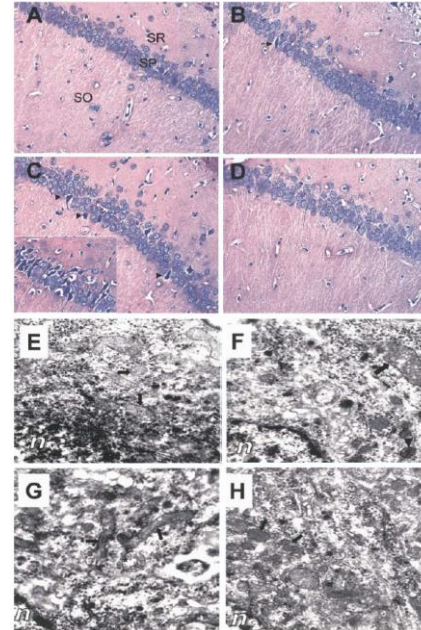
HBOT induced Mitochondrial Biogenesis

Rat Muscle



Kurt et al. Clinical
neuroscience
2007

Rat Hippocampus



Gutsaeva et al.
Neuroscience
2006



HBOT and Mitochondrial

J Neurosurg 106:687–694, 2007

Protection of mitochondrial function and improvement in cognitive recovery in rats treated with hyperbaric oxygen following lateral fluid-percussion injury

ZHENGWEN ZHOU, M.D.,^{1,2} WILSON P. DAUGHERTY, M.D., PH.D.,¹ DONG SUN, M.D., PH.D.,¹ JOSEPH E. LEVASSEUR, M.S.,¹ NABIL ALTEMEMI, B.S.,¹ ROBERT J. HAMM, PH.D.,³ GAYLAN L. ROCKSWOLD, M.D., PH.D.,⁴ AND M. ROSS BULLOCK, M.D., PH.D.¹

Departments of ¹Neurosurgery and ³Psychology, Virginia Commonwealth University School of Medicine, Richmond, Virginia; ⁴Department of Neurosurgery, Hennepin County Medical Center, Minneapolis, Minnesota; and ²Department of Neurosurgery, RenJi Hospital, Shanghai Second Medical University, Shanghai, China



BRAIN RESEARCH 1225 (2008) 126–133

available at www.sciencedirect.com



www.elsevier.com/locate/brainres

BRAIN
RESEARCH

Research Report

Neuroprotective effect of hyperbaric oxygen therapy in brain injury is mediated by preservation of mitochondrial membrane properties*

Elilam Palzur, Menashe Zaaroor¹, Eugene Vlodavsky, Felix Milman, Jean F. Soustiel²

Acute Brain Injury Research Laboratory, Faculty of Medicine, Technion Israel Institute of Technology, Haifa, Israel



Sagol School of Neuroscience
Tel Aviv University



Available online at www.sciencedirect.com

ScienceDirect

Journal of Clinical Neuroscience 15 (2008) 445–450

Journal of
Clinical
Neuroscience
www.elsevier.com/locate/jocn

Laboratory Study

Effects of hyperbaric oxygen on energy production and xanthine oxidase levels in striated muscle tissue of healthy rats

Balant Kurt^{a,*}, Yasemin Kurt^{a,b}, Yıldırım Karşoğlu^a, Turgut Topal^{a,c},
Hüsаметtin Erdamar^d, Ahmet Korkmaz^{a,c}, Nürten Türkökan^d, Halil Yaman^{a,b},
Zeki Odabaşı^{a,c}, Ömer Günhan^a

^a Department of Pathology, Galtane Military Medical Academy and Medical School, Ankara, Turkey

^b Department of Biochemistry, Galtane Military Medical Academy and Medical School, Ankara, Turkey

^c Department of Physiology, Galtane Military Medical Academy and Medical School, Ankara, Turkey

^d Department of Biochemistry Faculty of Medicine, Gazi University, Ankara, Turkey

^e Department of Neurology, Galtane Military Medical Academy and Medical School, Ankara, Turkey

Hyperbaric Oxygen Treatment Suppresses MAPK Signaling and Mitochondrial Apoptotic Pathway in Degenerated Human Intervertebral Disc Cells

Chi-Chien Niu,^{1,2} Song-Shu Lin,^{1,3} Li-Jen Yuan,^{1,2} Lih-Huei Chen,^{1,2} I-Chun Wang,^{1,2} Tsung-Ting Tsai,^{1,2} Po-Liang Lai,^{1,2} Wen-Jer Chen^{1,2}

¹Department of Orthopaedic Surgery, Hyperbaric Oxygen Therapy Center, Chang Gung Memorial Hospital, Taoyuan, Taiwan, ²College of Medicine, Chang Gung University, Taoyuan, Taiwan, ³Graduate Institute of Biomedical Sciences, Chang Gung University, Taoyuan, Taiwan

HYPERBARIC OXYGEN PRECONDITIONING REDUCES ISCHEMIA-REPERFUSION INJURY BY INHIBITION OF APOPTOSIS VIA MITOCHONDRIAL PATHWAY IN RAT BRAIN

J.-S. LI,^{a,1} W. ZHANG,^{a,1} Z.-M. KANG,^b S.-J. DING,^{a,*} W.-W. LIU,^b J. H. ZHANG,^c Y.-T. GUAN^a AND X.-J. SUN^{b,*}

^aDepartment of Neurology, Changhai Hospital, 168 Changhai Road,

medicine, Second
china
ty, Loma Linda.

moda et al., 2007) and observed in clinical cases after multiple transient ischemic attacks (Sitzer et al., 2004). However, the safety concerns and practical feasibility have limited the application of preconditioning in practice.

Hyperbaric oxygen (HBO) has been used for multiple neurological diseases (Lou et al., 2004; Al-Waili et al., 2005; Rosenthal et al., 2003; Ostrowski et al., 2006) and proved a safe treatment modality in all age and gender groups, includ-

OXYGEN-INDUCED MITOCHONDRIAL BIOGENESIS IN THE RAT HIPPOCAMPUS

D. R. GUTSAEVA,^{a,b} H. B. SULIMAN,^a M. S. CARRAWAY,^a I. T. DEMCHENKO^{a,b} AND C. A. PIANTADOSI^{a,*}

^aDepartments of Medicine and Anesthesiology and Center for Hyperbaric Medicine and Environmental Physiology, Duke University Medical Center, Box 3315, Durham, NC 27710, USA

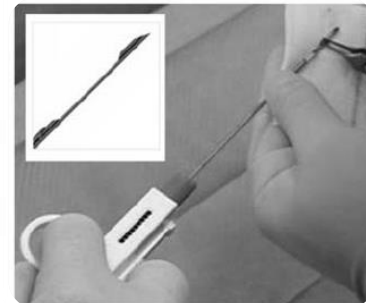
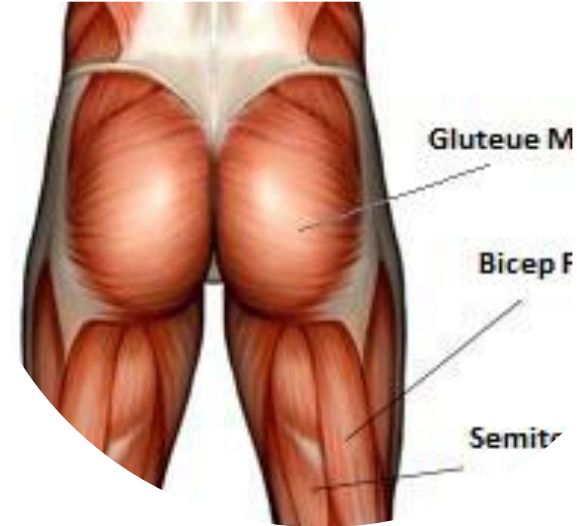
^bInstitute of Evolutionary Physiology and Biochemistry Russian Academy of Science, St. Petersburg, Russia

1972; Balentine, 1982). The mechanisms of CNS O₂ toxicity, although not fully understood, involve the generation of reactive oxygen and nitrogen species (ROS and RNS) that disrupt the brain's oxidant/antioxidant balance (Demchenko et al., 2002). This imbalance promotes macromolecule oxidation, including lipids, enzymes, and nucleic acids, which in theory produces the neurochemical alterations and manifestations of toxicity (Jamieson, 1989; Fidovalob, 1998).



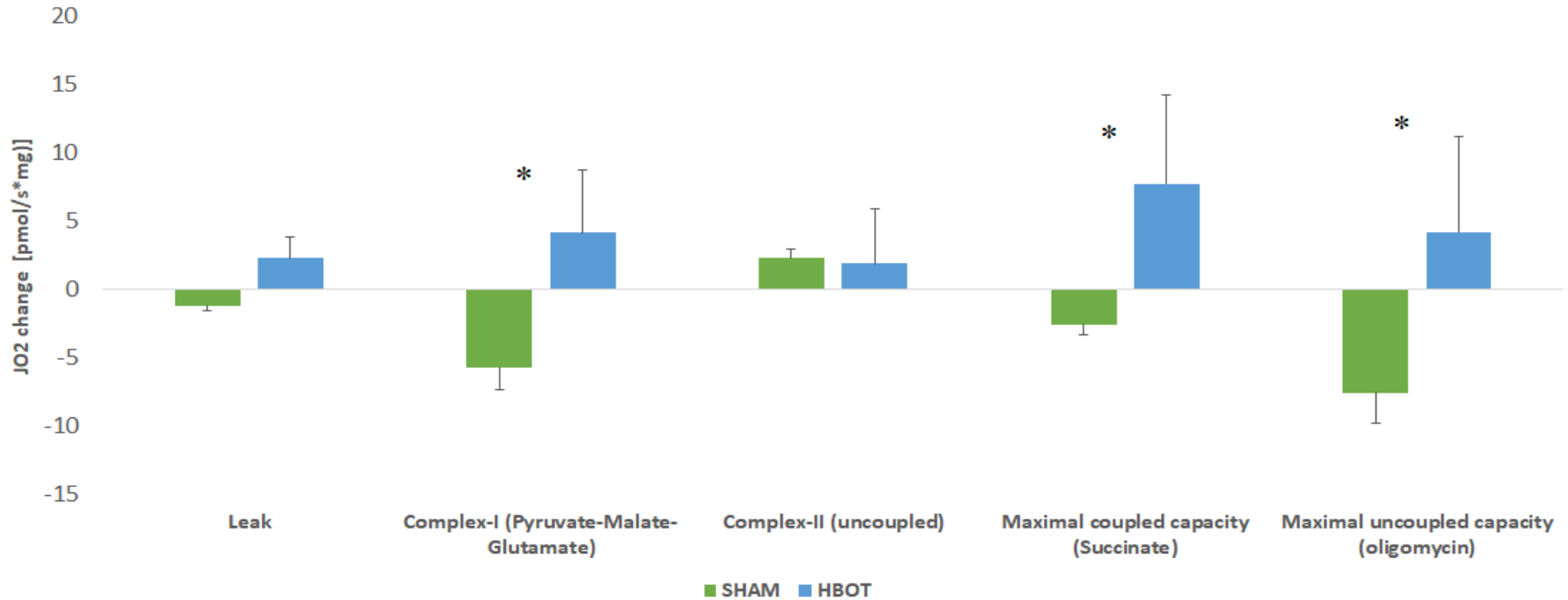
Mitochondrial Respiratory Function

- Gluteus Maximus muscle biopsy
- Sterile Trucut biopsy
- *Blinded biologist:*
- Muscle fibers handling
- O2K (Oxygraph) respiratory measurements
- Respiratory chain complexes staining





Mitochondrial Functional Change





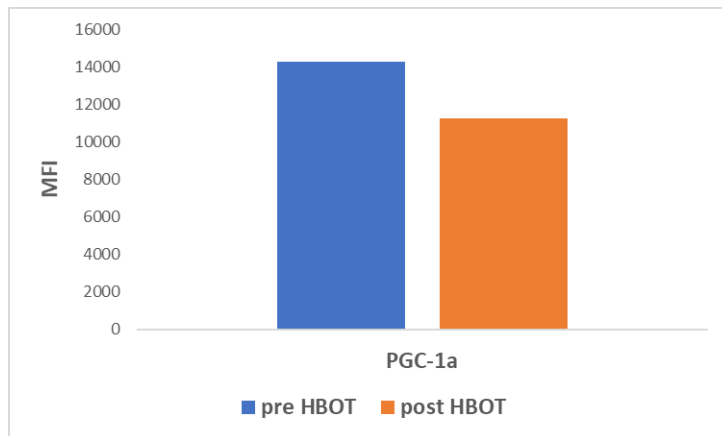
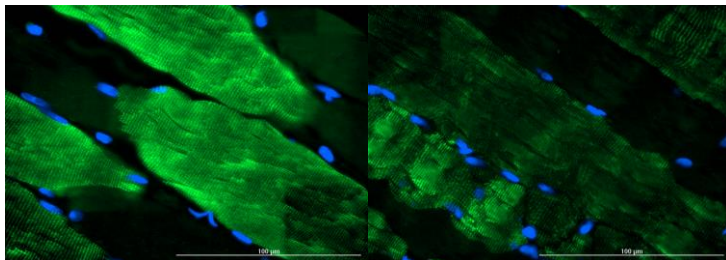
Mitochondria Biogenesis

PGC1 alpha- a Marker for Mitochondrial Biogenesis

SHAM

Pre SHAM

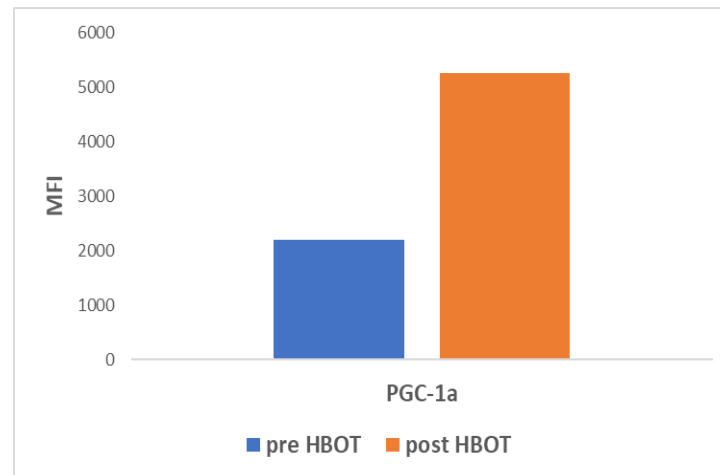
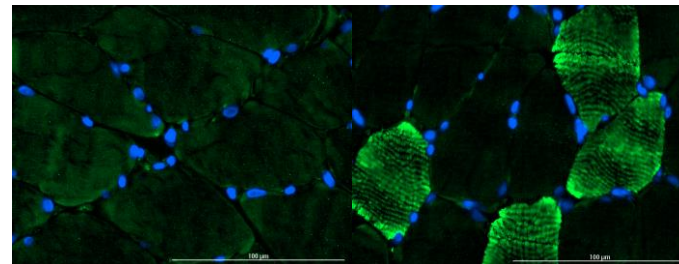
Post SHAM



HBOT

Pre HBOT

Post HBOT





What do we need for regeneration?

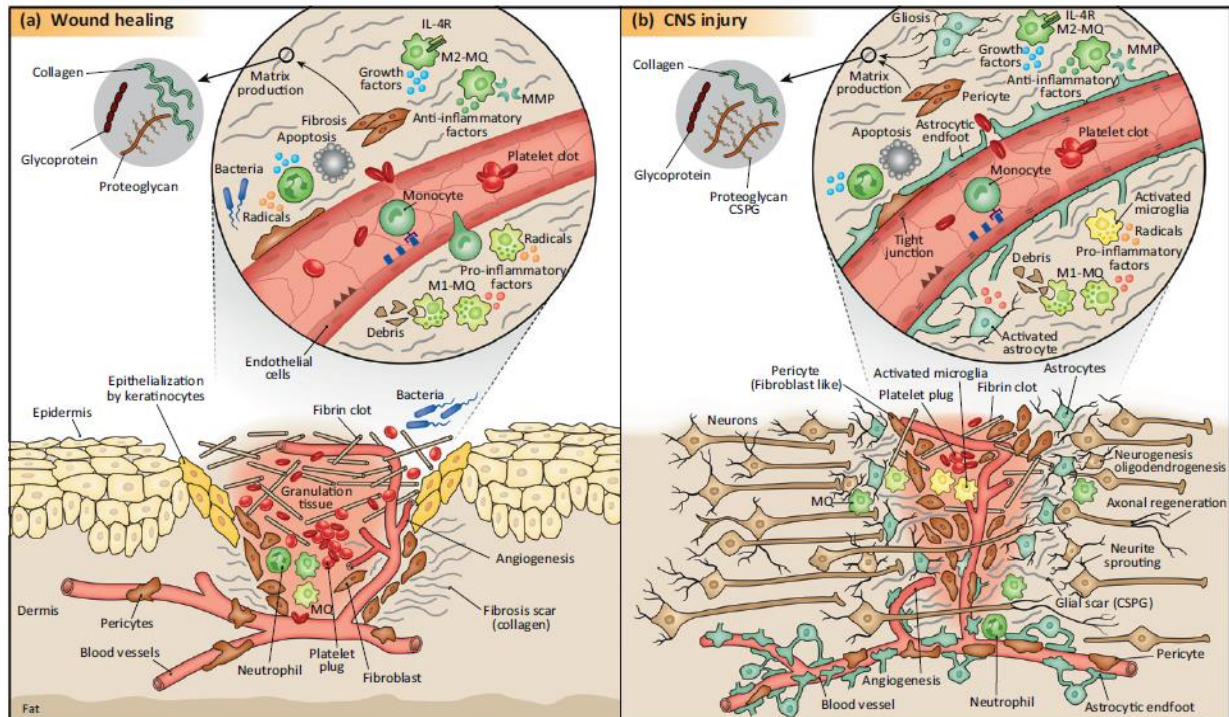
- ✓ Trigger
- ✓ Stem cells
- ✓ Energy
 - ✓ Oxygen
 - ✓ Angiogenesis
 - ✓ Improve mitochondrial function



What is the “standard clinical practice” today ?



Current clinical practice



Michal Schwartz at all

Non-Healing peripheral wounds

Before HBOT



Post HBOT



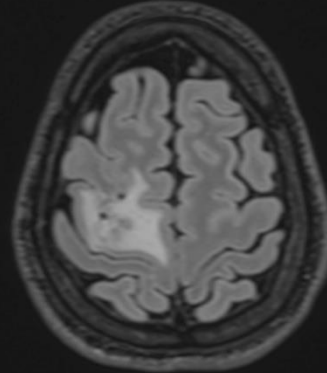
(b)



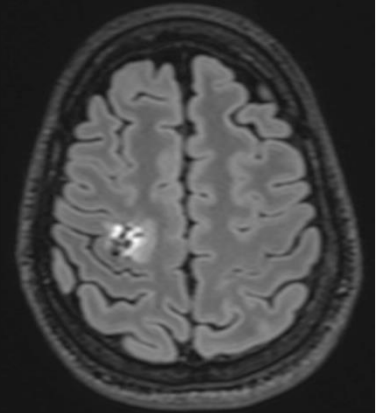
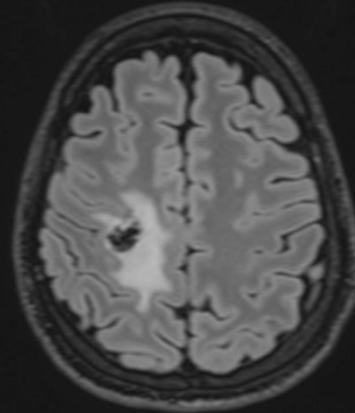
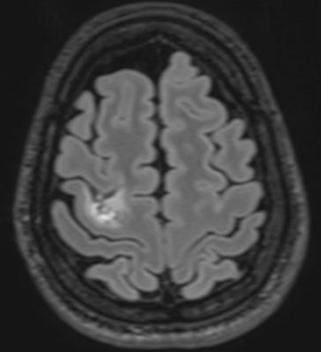
Current clinical practice of
Hyperbaric Oxygen Therapy

Non-Healing post radiation brain wounds (2 years after the radiation)

Before HBOT

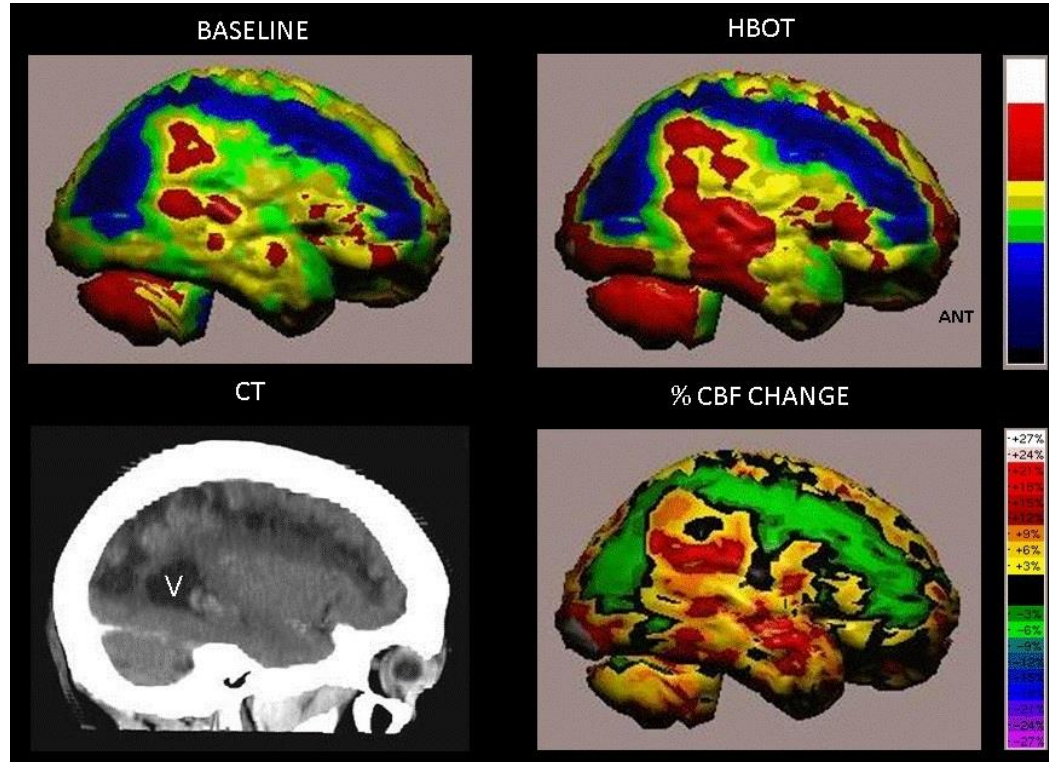


Post HBOT





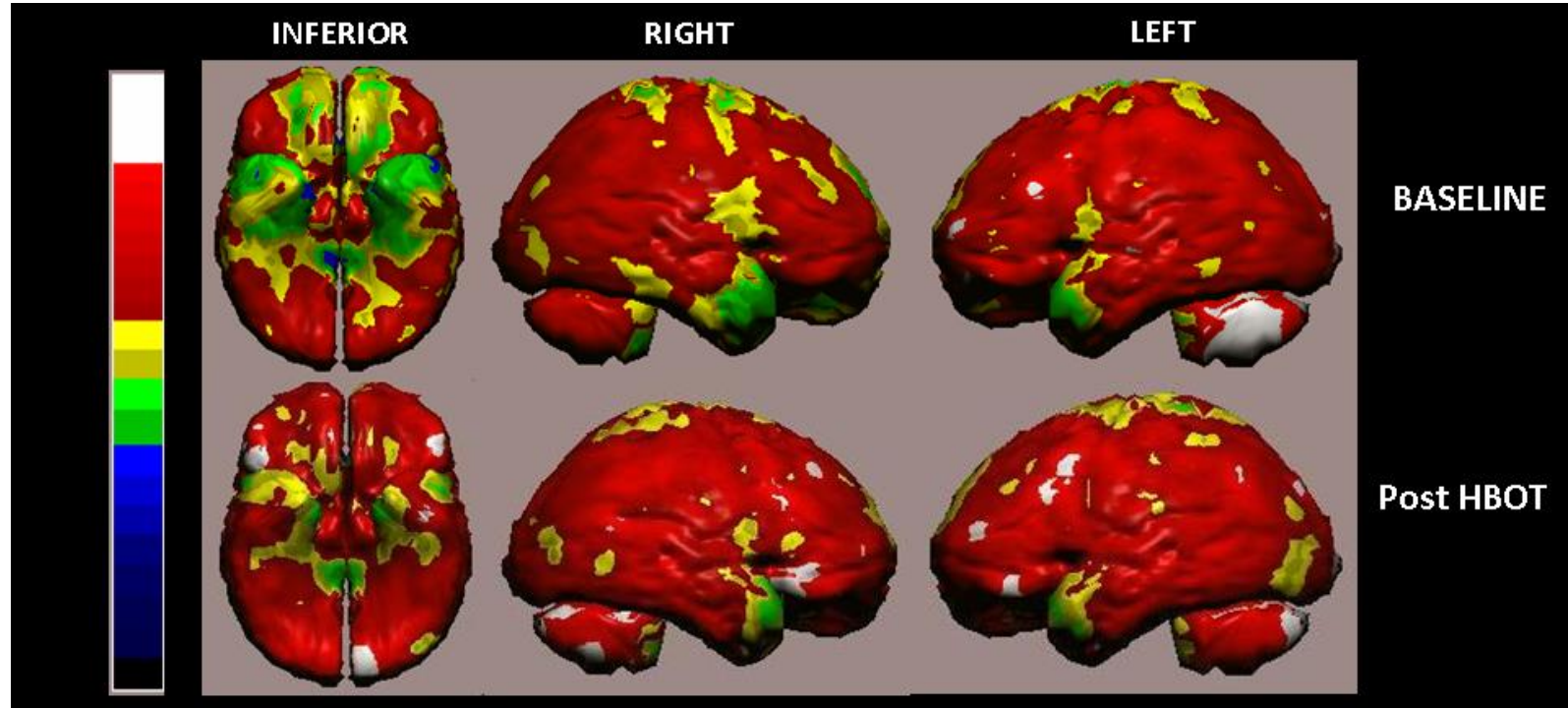
64-year-old woman, suffering from left hemiparesis due to ischemic stroke that occurred 26 months prior to inclusion in the study.





Post concussion syndrome

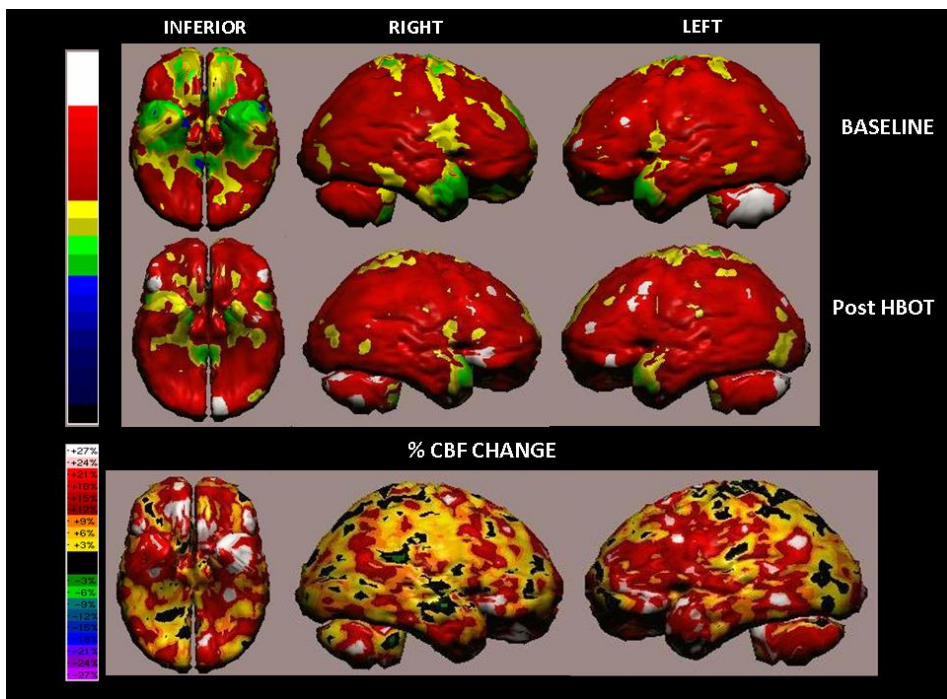
51-year-old woman that had mTBI (fall from a bus)
2 years prior to her inclusion





Case Example

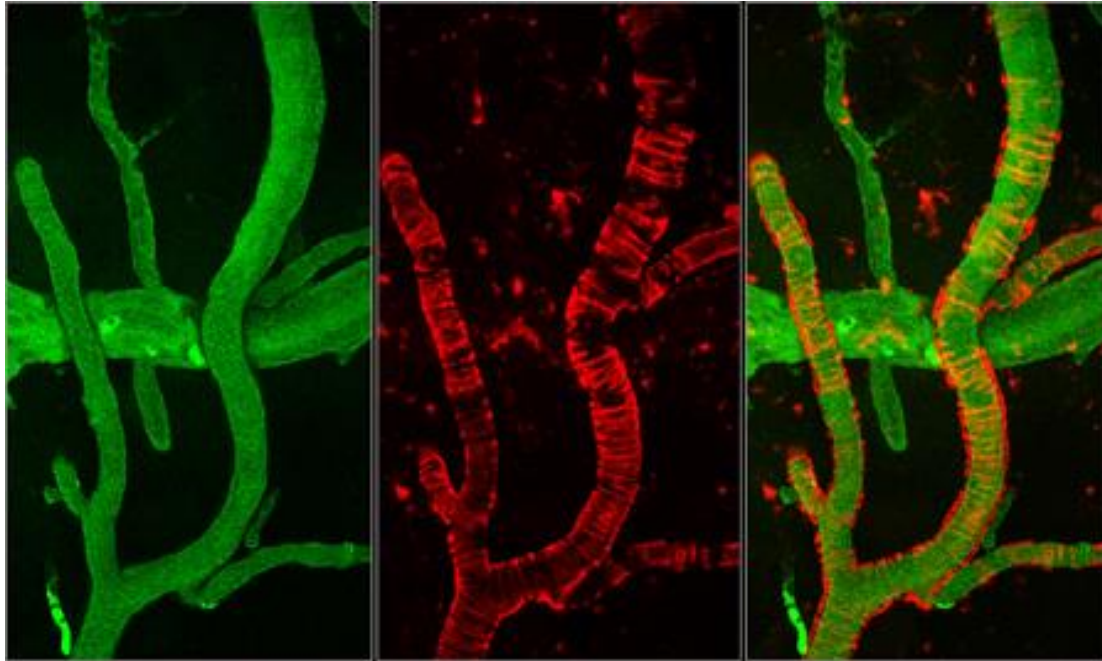
51-year-old woman that had mTBI (fall from a bus)
2 years prior to her inclusion



	Baseline	Post HBOT
Memory	56	108
Attention	47	81
Executive Function	65	85
Information processing speed	85	95



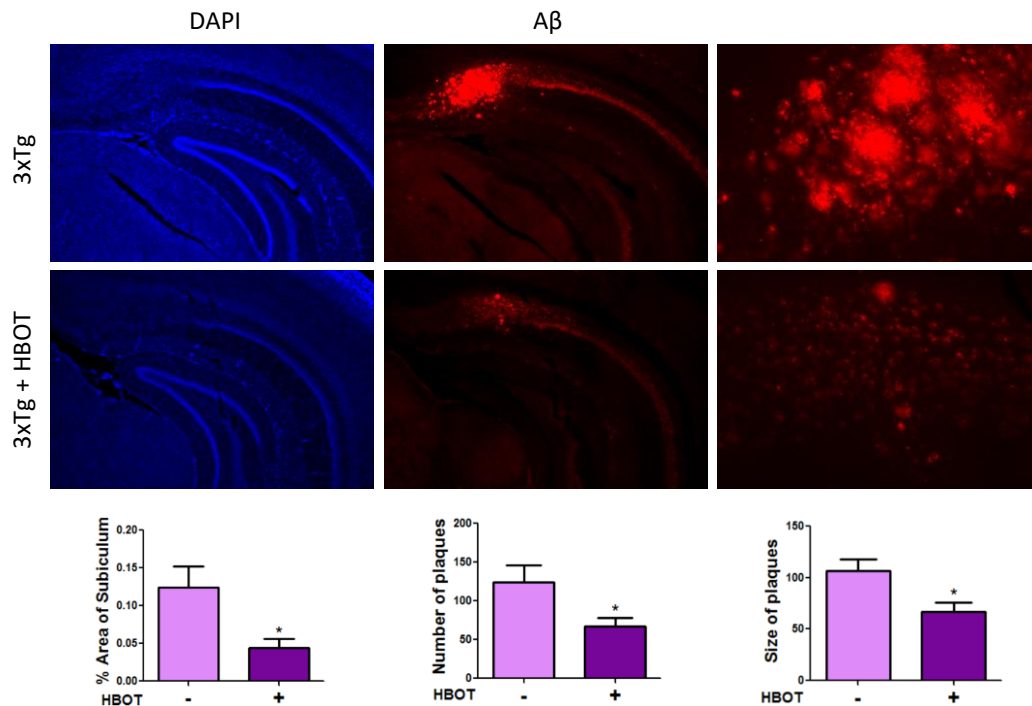
AMYLOID & BLOOD FLOW IN ALZHEIMER DISEASE MICE



The images were taken using a multiphoton microscope and illustrate the vasculature of an Alzheimer's disease mouse. Green shows blood flow and red amyloid deposition. The ring-like structures surrounding the blood vessels represent cerebral amyloid angiopathy.

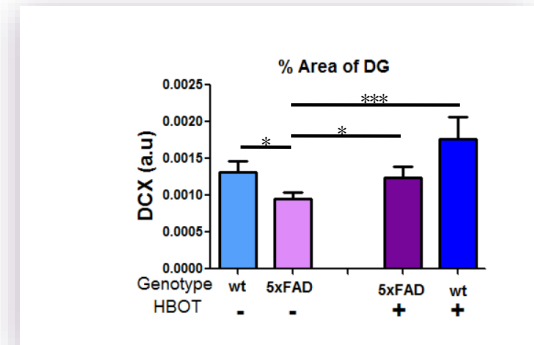
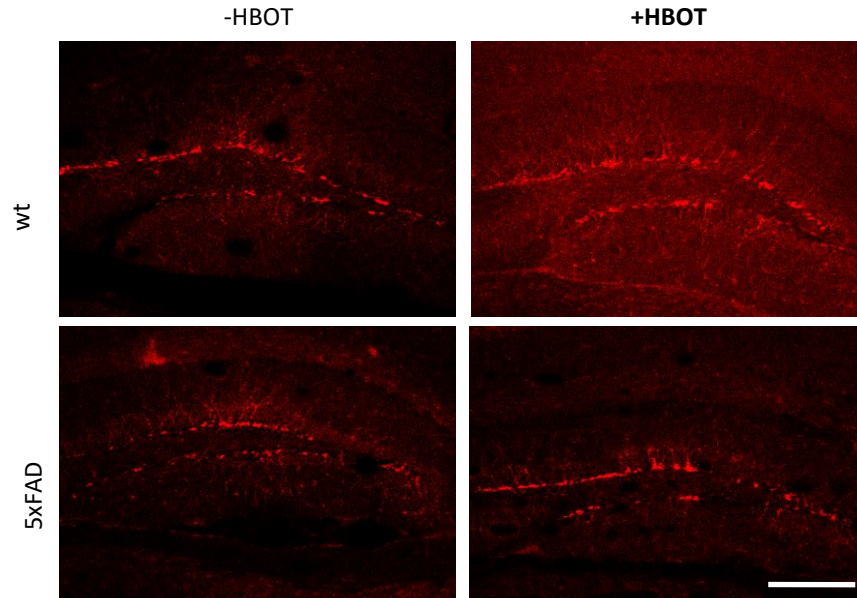


HBOT REDUCES AMYLOID LOAD IN THE OLD 3XTG MICE





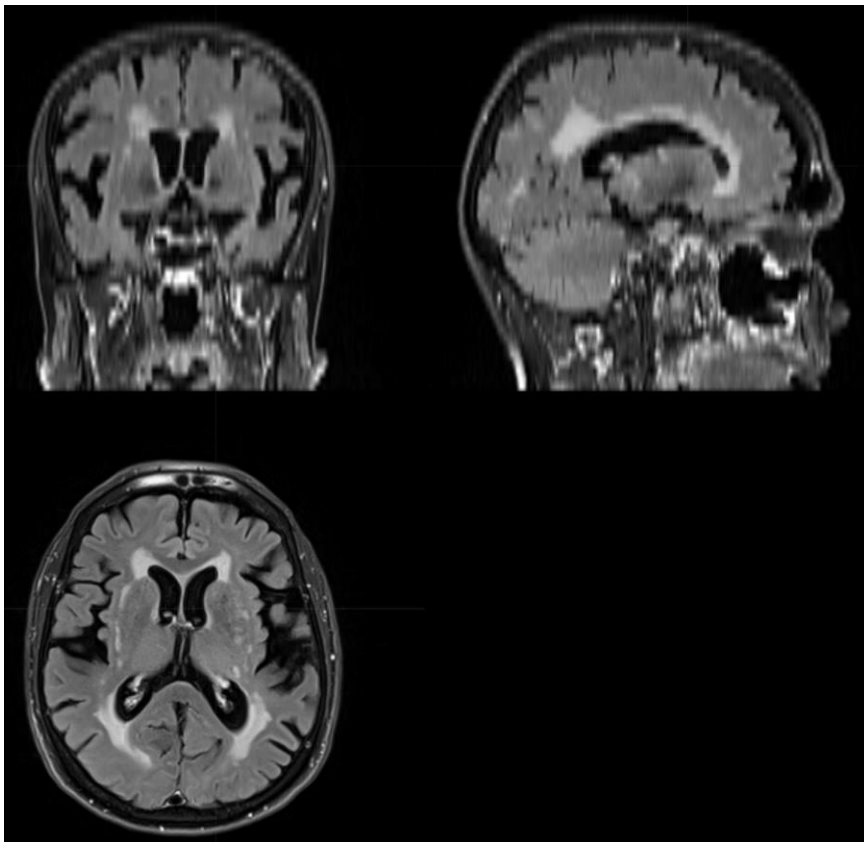
HBOT INCREASE SURVIVAL OF NEW-BORN NEURONS IN CONTROL AND 5xFAD MICE





Age Related Mild Cognitive Impairment

Case example

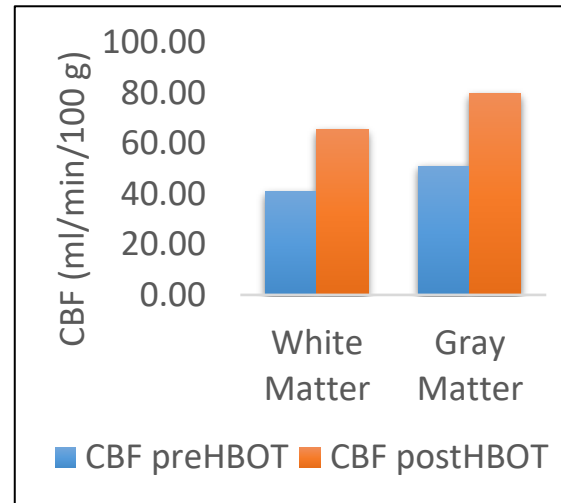
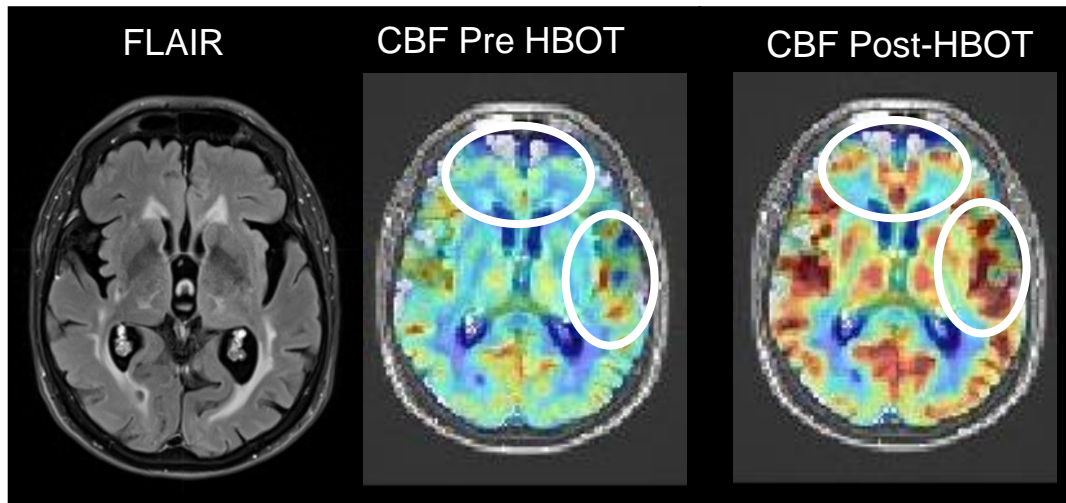


84 yr female, with MCI
(memory loss, shortness of attention span)



Perfusion in Mild Cognitive Impairment Following HBOT

Case example



Brain region	Brain function	% change
Anterior cingulate cortex	Attention	67.40%
Hippocampus	Long term memory, Spatial memory	65.53%

Post HBOT cognitive assessments show significant improvement in:

- Attention
- Memory
- Overall cognitive function

Reverse Aging Program Target Population

Age 65 years or older

Medically stable population

Fully function in their daily life activity

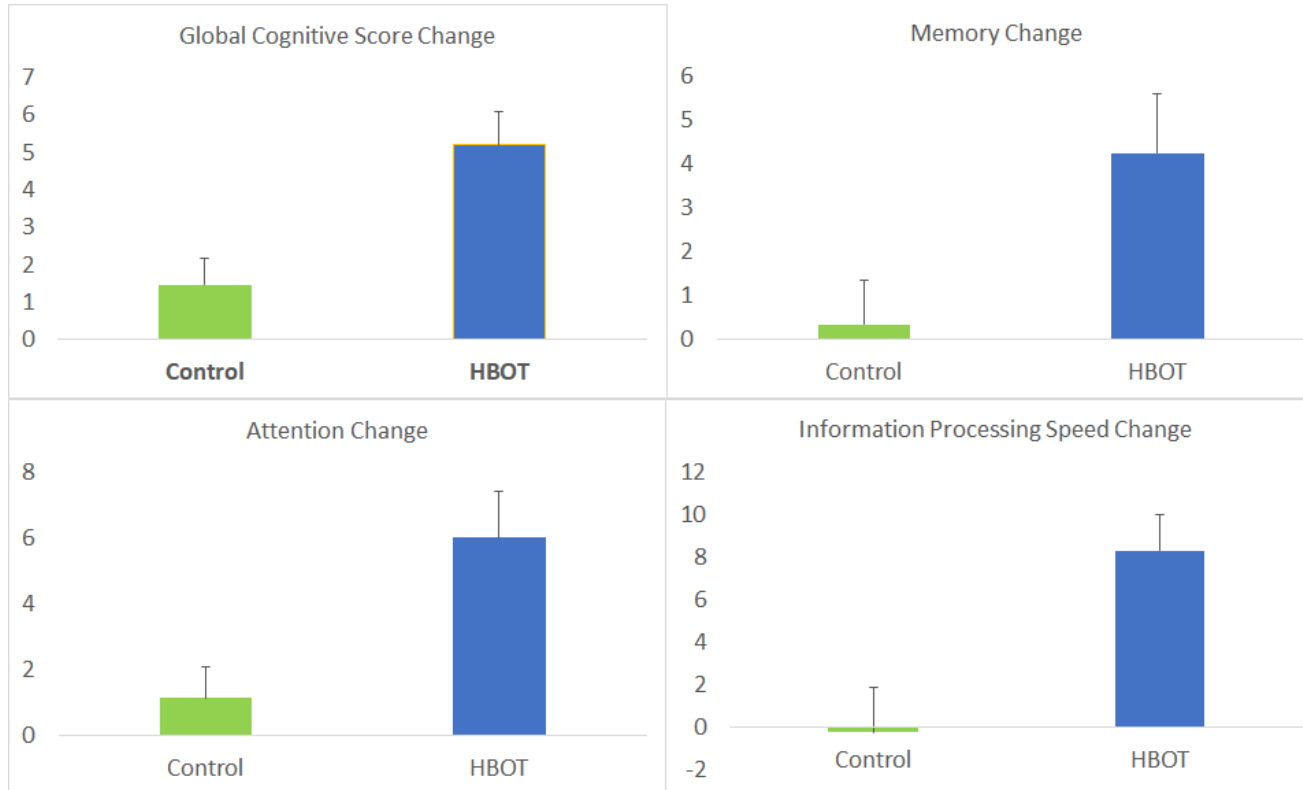
Non- obese

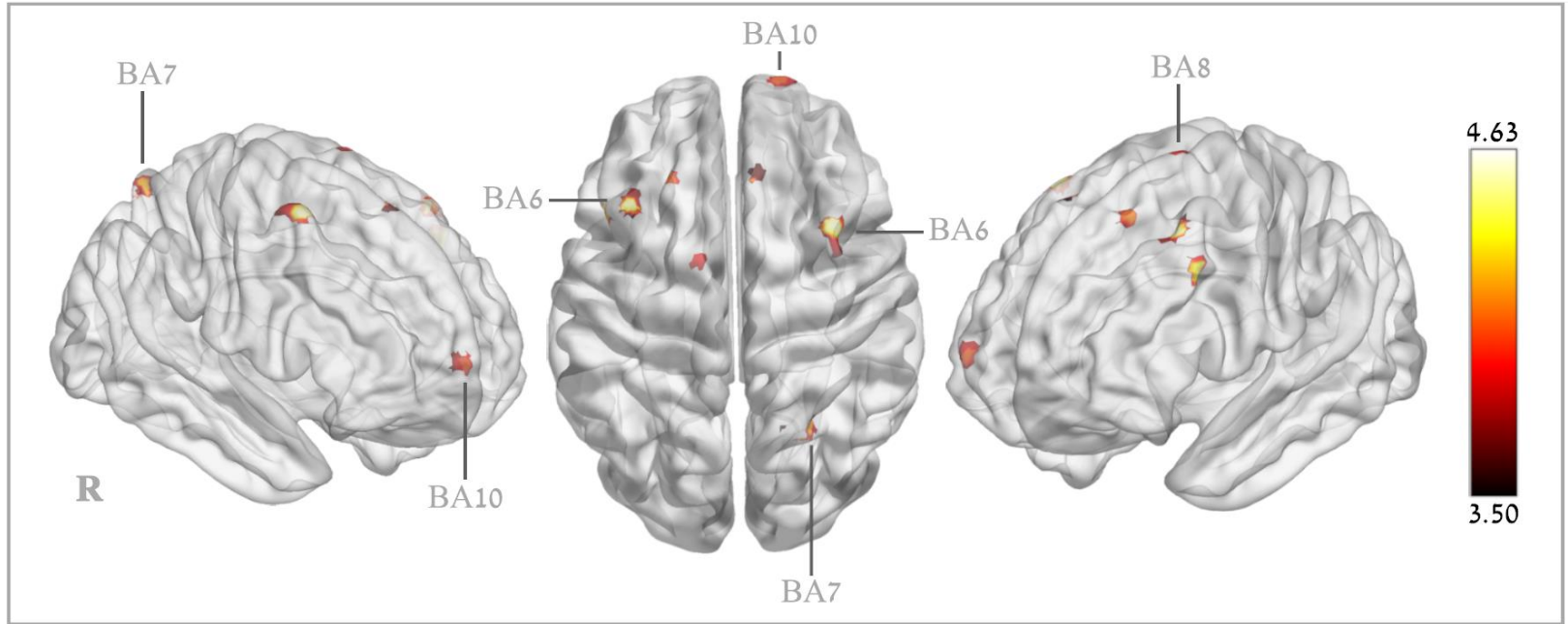
Nonsmokers





Cognitive Functions - Reverse Ageing Population

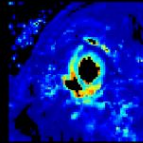
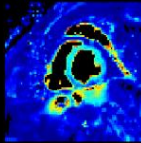




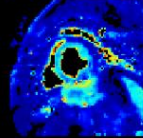
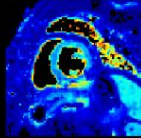


Cardiac MRI – Myocardial Blood Flow

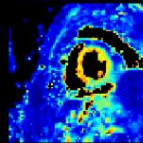
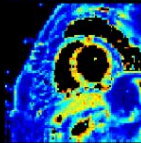
Pre HBOT 1



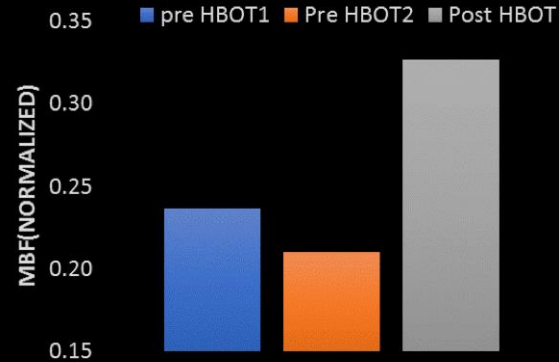
Pre HBOT 2



Pre HBOT 3



Myocardial Blood Flow





Cardio-Pulmonary Exercise Test (VO2 max test)

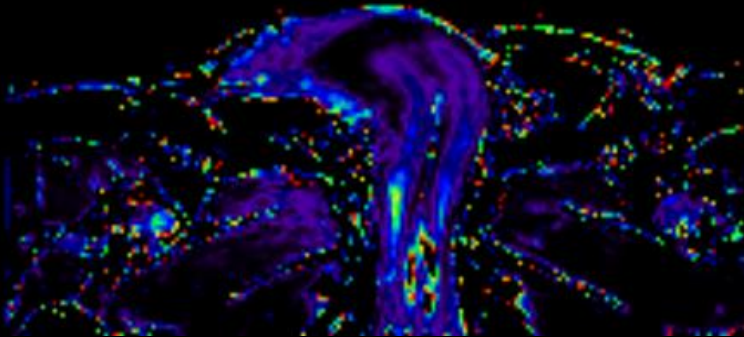
15% improvement in the
Anaerobic Threshold (AT)



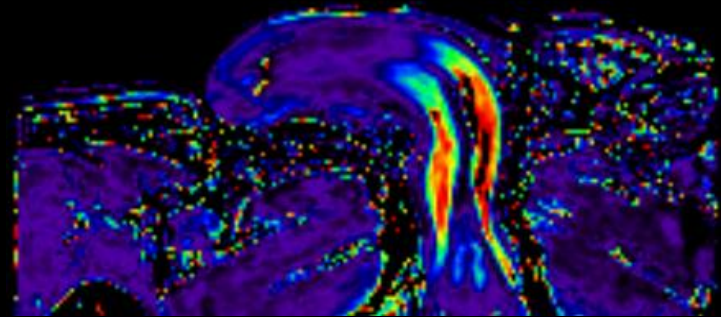


The Penile

Pre HBOT



Post HBOT



Ktrans (min⁻¹)



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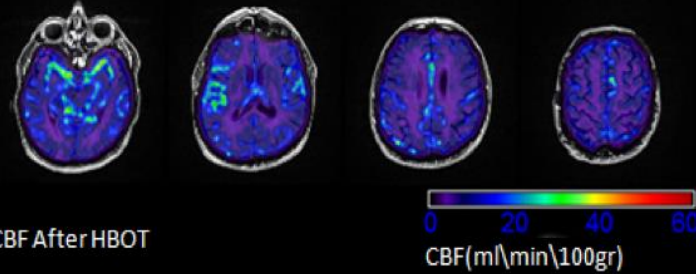


Sagol School of Neuroscience
Tel Aviv University

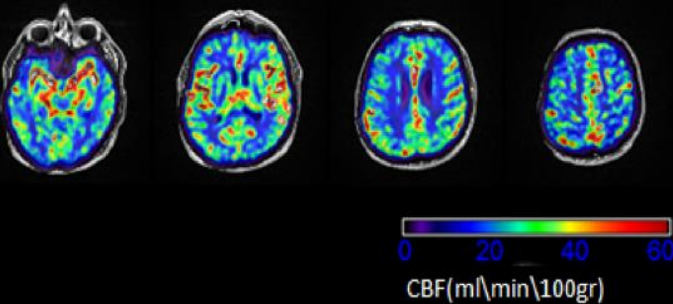


78 Years Old Male Pre and Post Hyperbaric Oxygen Therapy

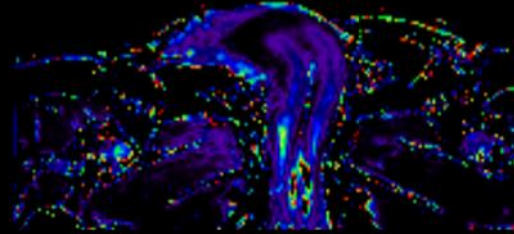
CBF Before HBOT



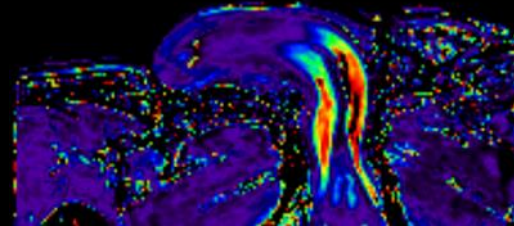
CBF After HBOT



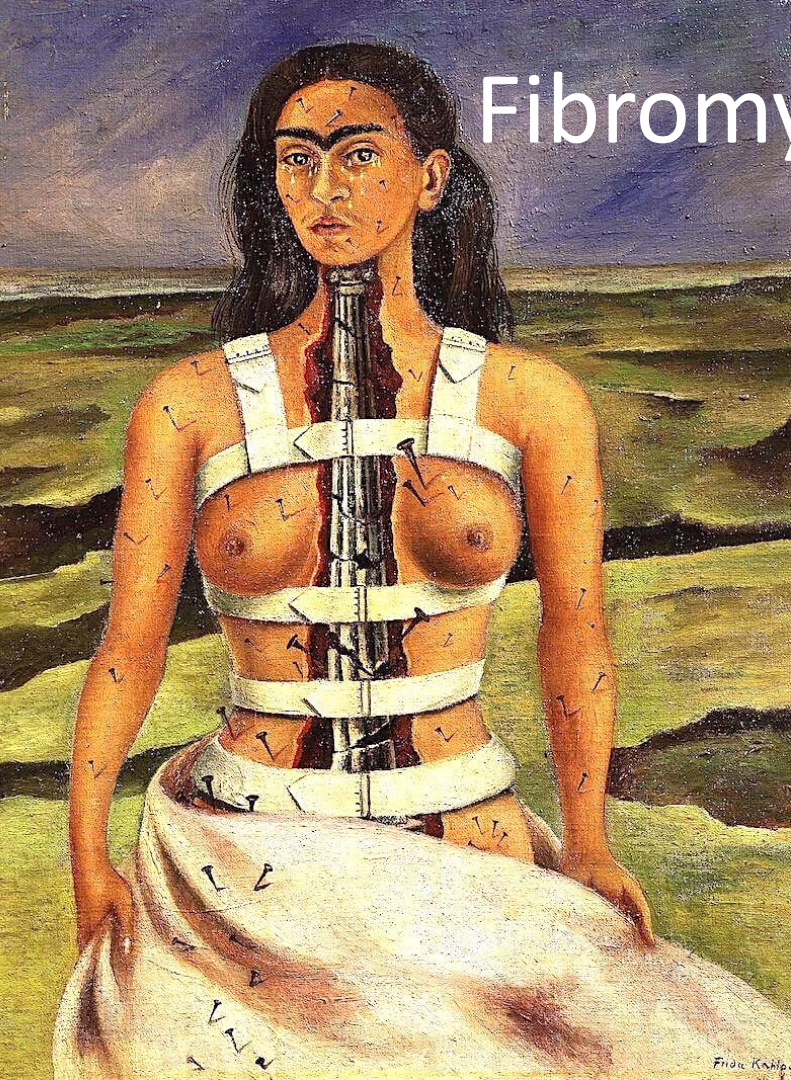
Penile Flow Before

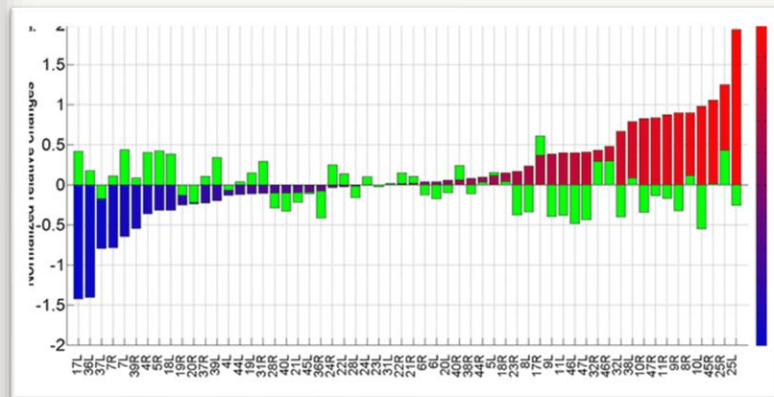
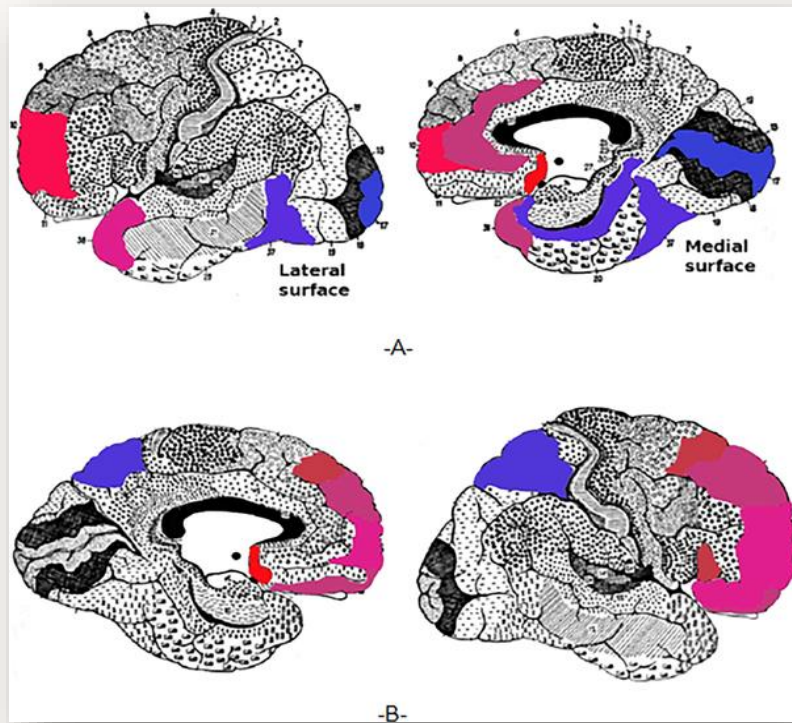


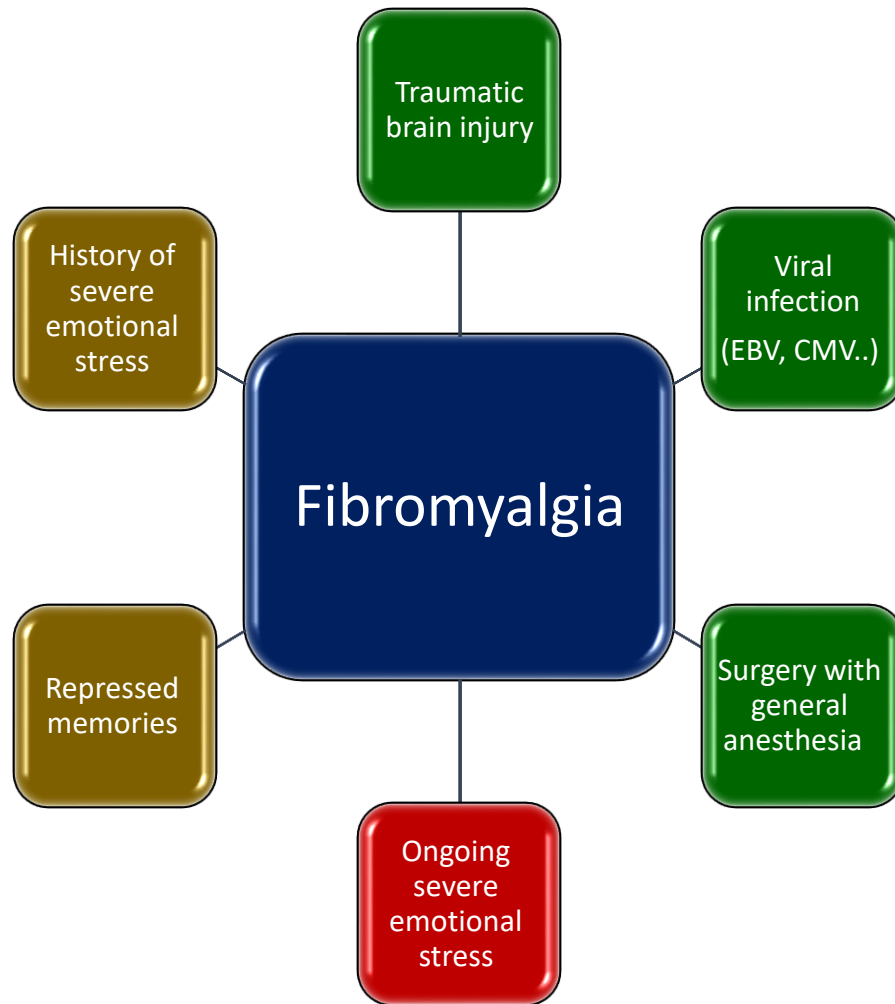
Penile Flow After



Fibromyalgia









A drawing made by a 53-years-old participant, who had been sexually abused by her father

Baseline



Phase II of the treatment



End of the treatment



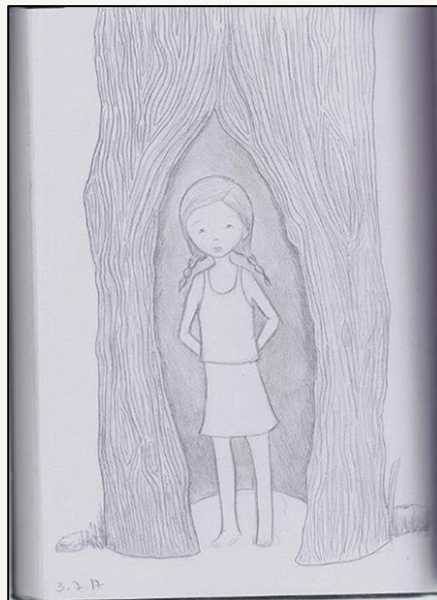


A drawing drawn by a 32-years-old participant, who had been sexually abused during childhood by a family member

Baseline



Phase II of the treatment



End of the treatment



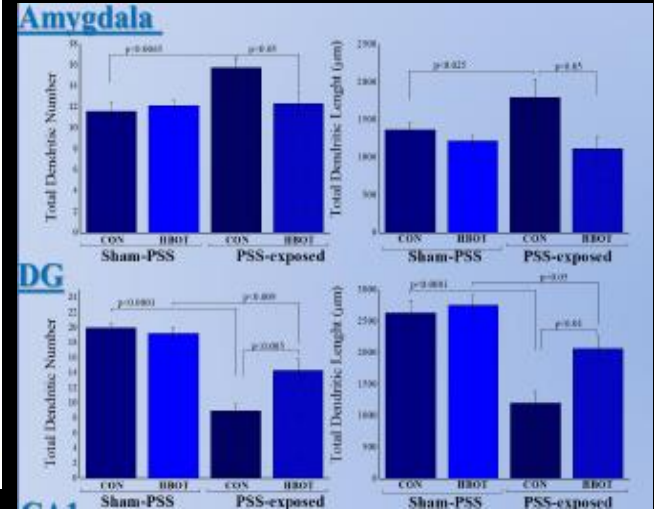
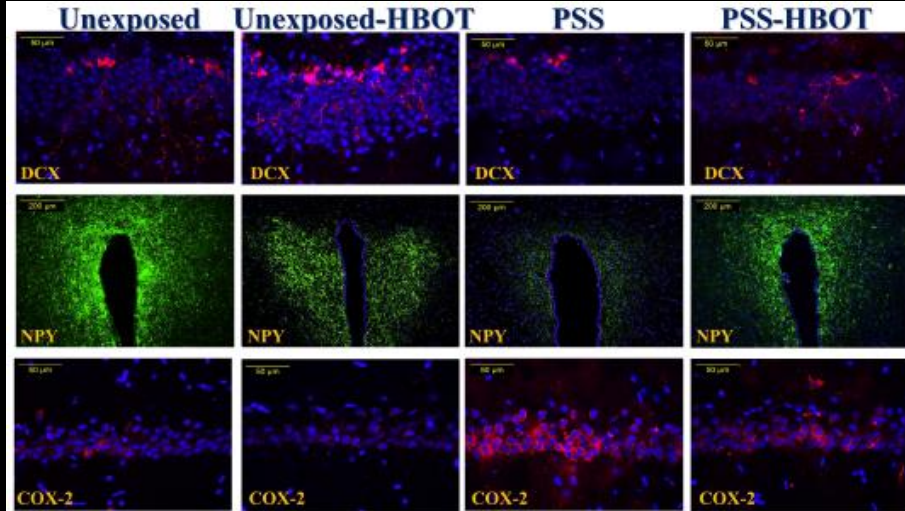


Post Traumatic Stress Disorder





Hyperbaric Oxygen Therapy as a potent treatment for Post Traumatic Stress Disorder in ad animal mode

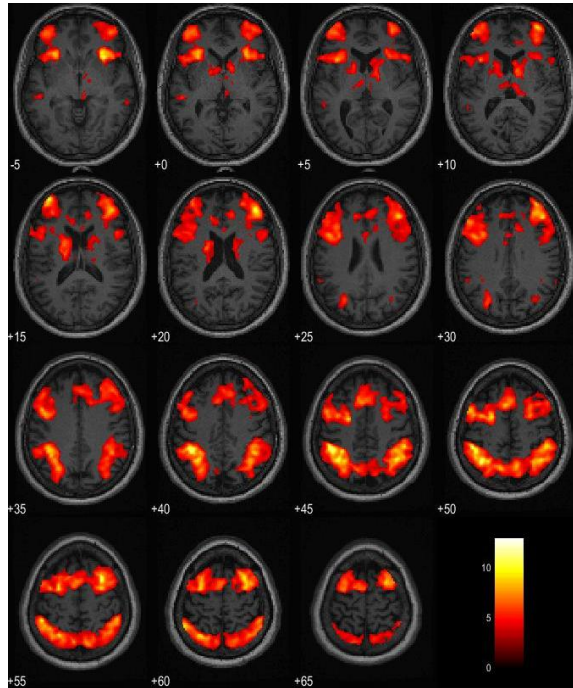


Hagit Cohen 2020



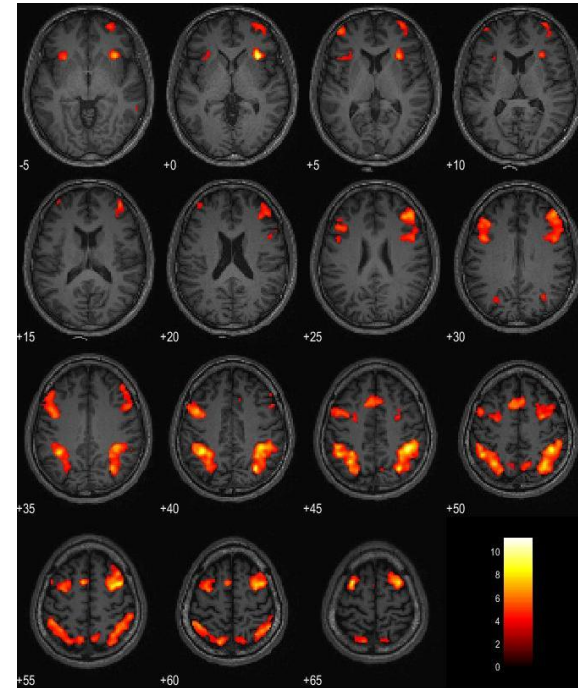
BOLD fMRI responses in a verbal working memory task

Healthy (244-16-ASF), M, N=23



N = 23; Mean Age 38.8 ± 9.5 [21.8.. 51.7]

PTSD, PRE-HBOT, M, N=30

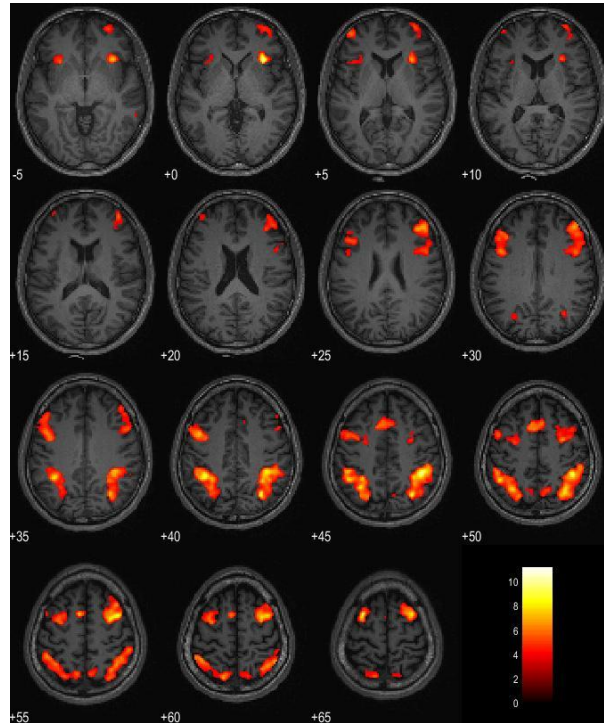


N = 30; Mean Age 37.5 ± 9.1 [24.5.. 58.9]

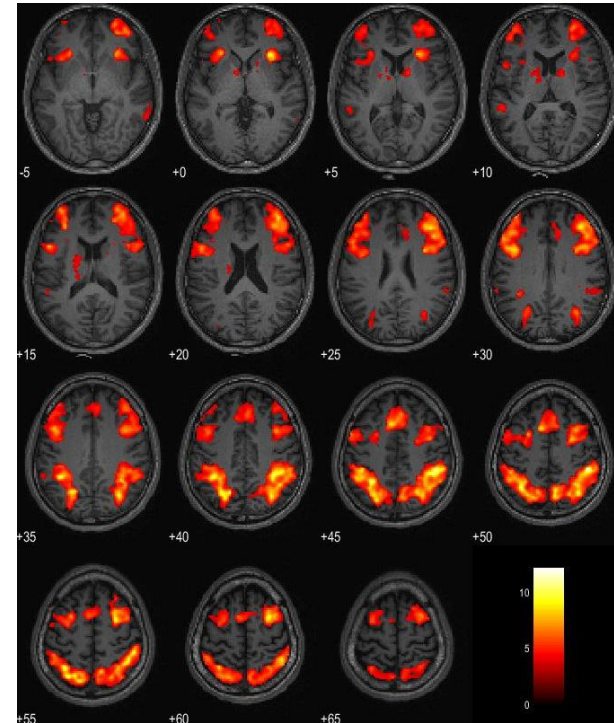


BOLD fMRI responses in a verbal working memory task

PTSD, mean PRE-HBOT



PTSD, mean POST-HBOT



Post COVID-19 Condition

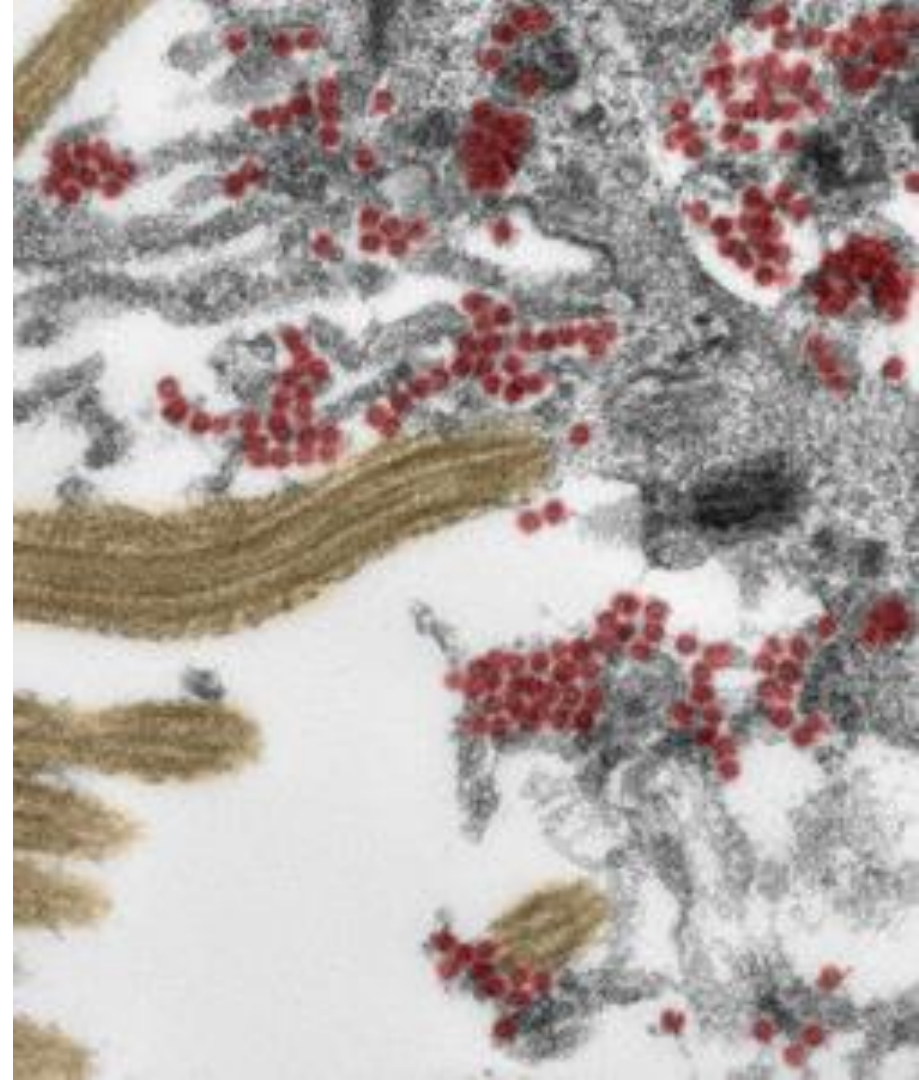
(Long COVID)



An electron microscope image (ultrathin section, artificially colored) shows a section of a ciliated cell in the olfactory mucosa.

Large numbers of intact SARS-CoV-2 particles (red) are found both inside the cell and on cellular processes. Yellow: kinocilia.

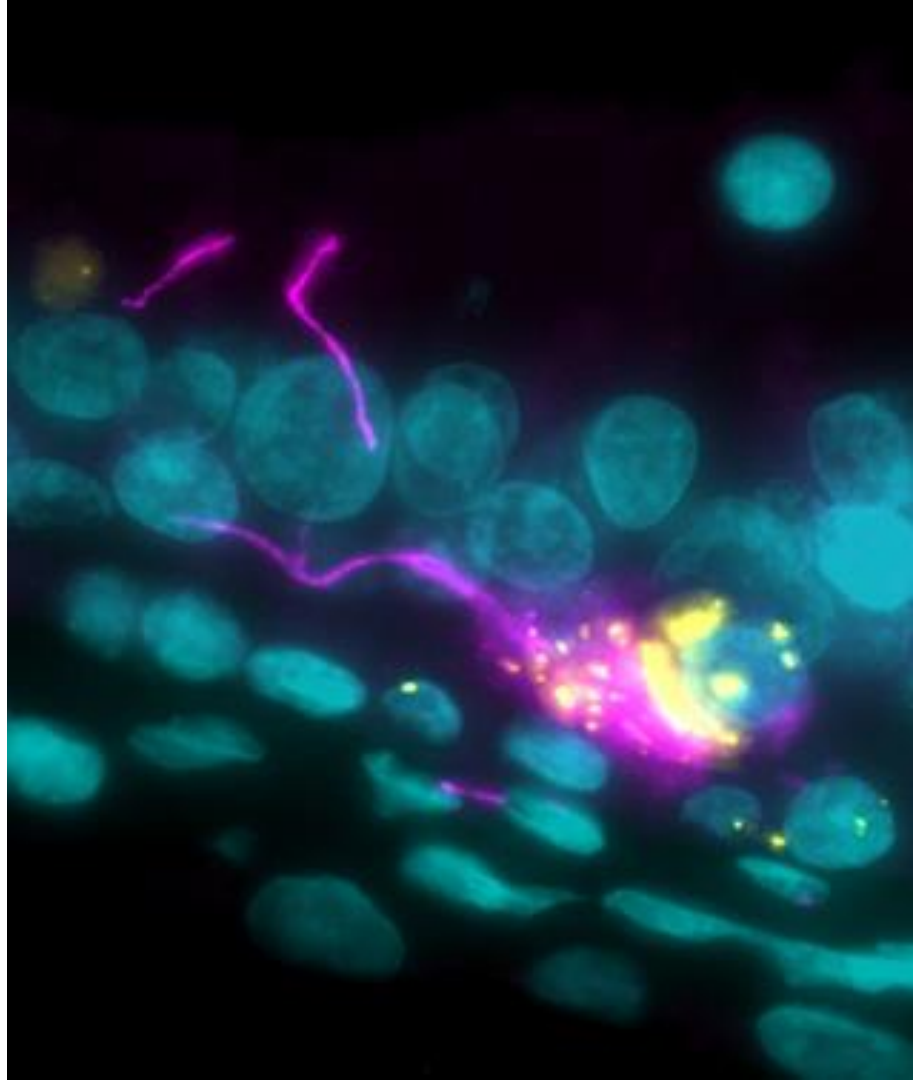
Photo: Michael Laue/RKI & Carsten Dittmayer/Charité





Immunofluorescence staining shows a nerve cell (pink) inside the olfactory mucosa which has been infected with SARS-CoV-2 (yellow). Supporting (epithelial) cells appear blue.

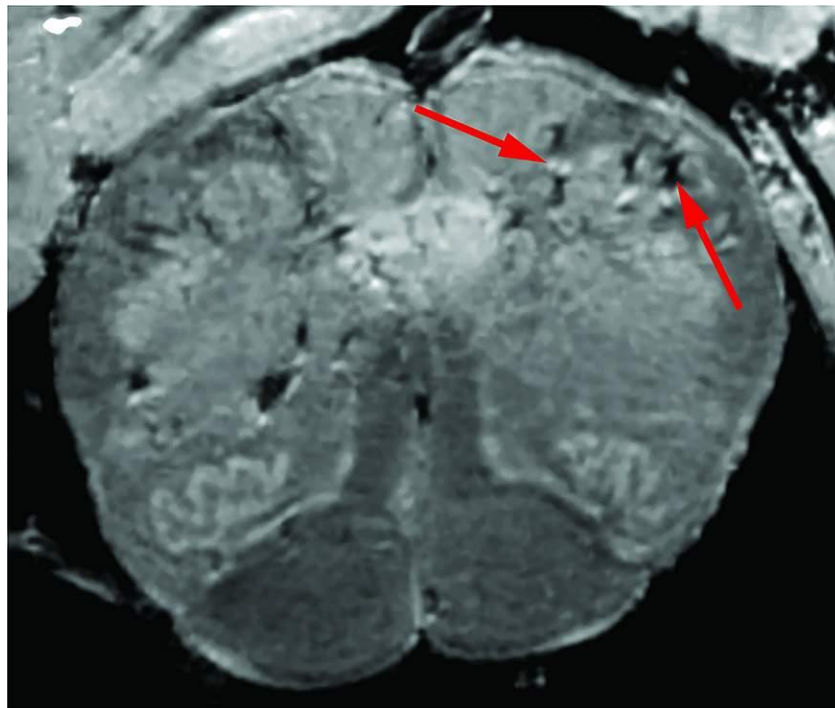
Photo: Jonas Franz/Universitätsmedizin Göttingen





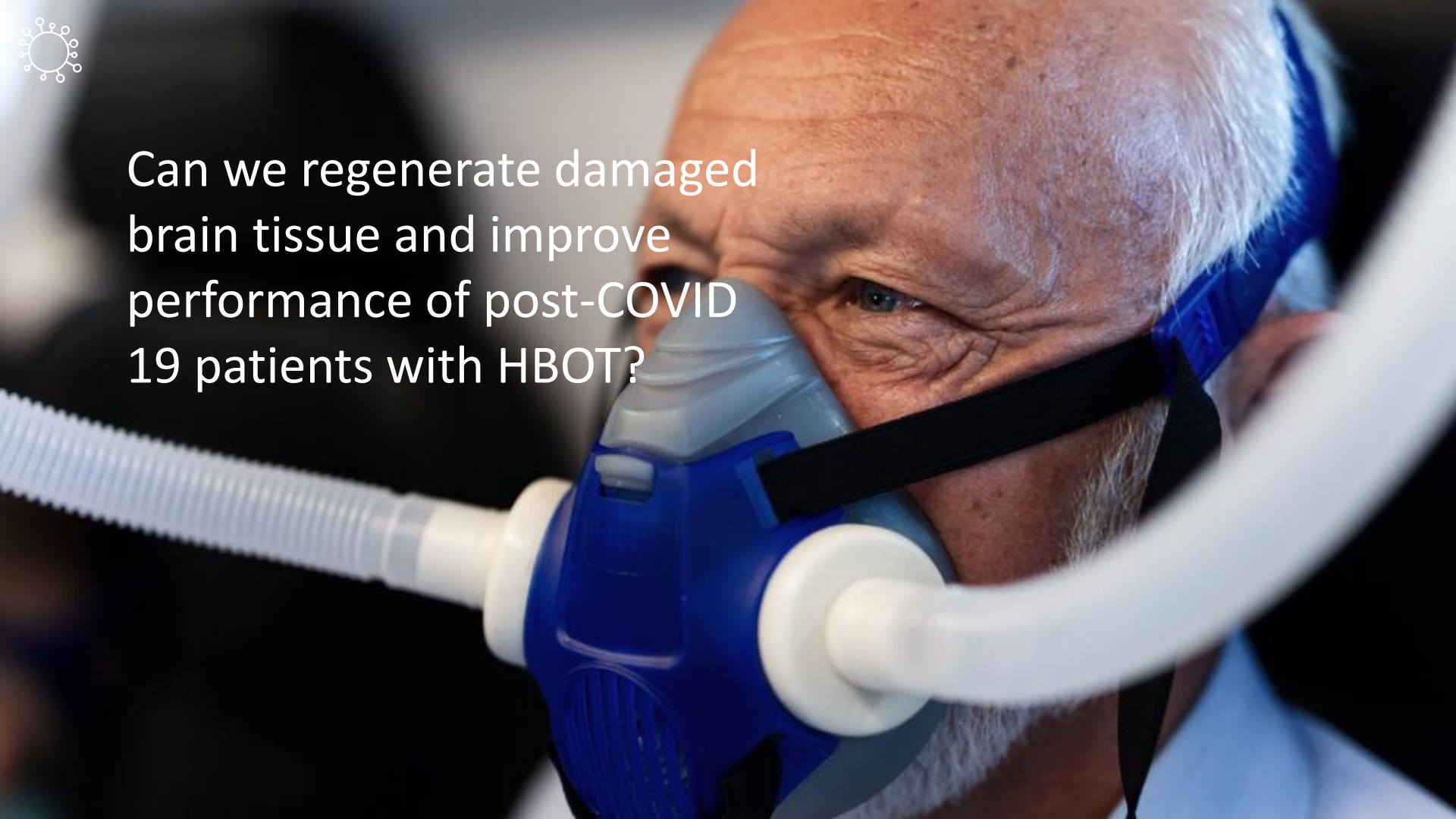
Blood Vessels

NIH researchers consistently found blood vessel damage in the brains of COVID-19 patients but no signs of SARS-CoV-2 infections. Arrows point to light and dark spots that are indicative of blood vessel damage observed in the study.





Can we regenerate damaged
brain tissue and improve
performance of post-COVID
19 patients with HBOT?





Neurocognitive Performance Changes

	HBOT				CONTROL				ANOVA (Group-by-Time) Interaction			
	PRE	POST	Two months P-value	CHANGE	PRE	POST	Two months P-value	CHANGE	P-value Baseline	Net effect size*	F	P-value
N	37				36							
Global Score	98.3±11.1	104.1±7.2	0.0001	5.8±7.9	98.9±8.5	101.3±8.9	0.0105	2.4±5.4	0.821	0.495	4.469	0.038
Memory	93.7±13.4	102.0±10.9	0.0001	8.3±11.2	94.9±12.2	102.1±8.7	0.0000	7.2±8.5	0.695	0.111	0.226	0.636
Executive Function	103.5±13.1	109.0±8.2	0.0029	5.6±10.6	102.5±10.3	103.8±10.5	0.2526	1.3±6.8	0.725	0.477	4.159	0.045
Attention	97.3±16.0	101.9±9.0	0.0292	4.6±12.4	99.6±8.2	99.4±10.1	0.8495	-0.3±8.3	0.434	0.463	3.914	0.052
Information Processing Speed	94.8±14.2	102.4±13.0	0.0003	7.6±11.4	94.4±14.2	98.3±17.7	0.0734	3.9±12.7	0.910	0.303	1.673	0.200
Motor Skills	102.4±12.6	105.3±8.3	0.0827	2.9±10.0	102.9±8.4	102.9±9.0	0.9639	0.1±6.7	0.858	0.338	2.079	0.154

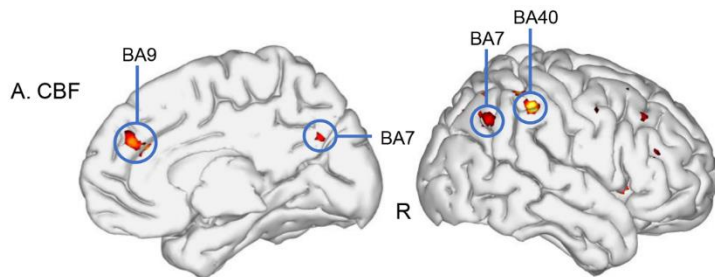
Data are presented as mean ± SD; Bold, significant after Bonferroni correction;

* Cohen's d net effect size

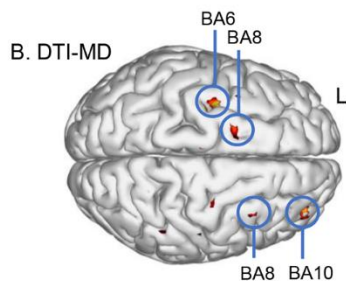


Brain Regions with Significant post-HBOT Changes Compared to Control

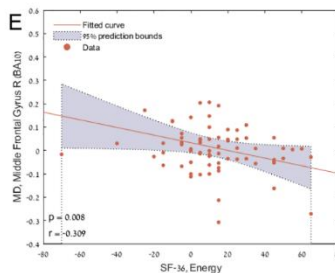
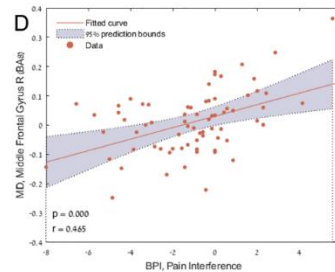
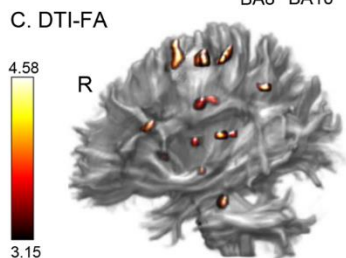
Cerebral Blood Flow
CBF



Mean Diffusivity
DTI-MD



Fractional Anisotropy
DTI-FA



Pain interference vs.
DTI-MD (BA8)

Energy vs.
DTI-MD (BA10)

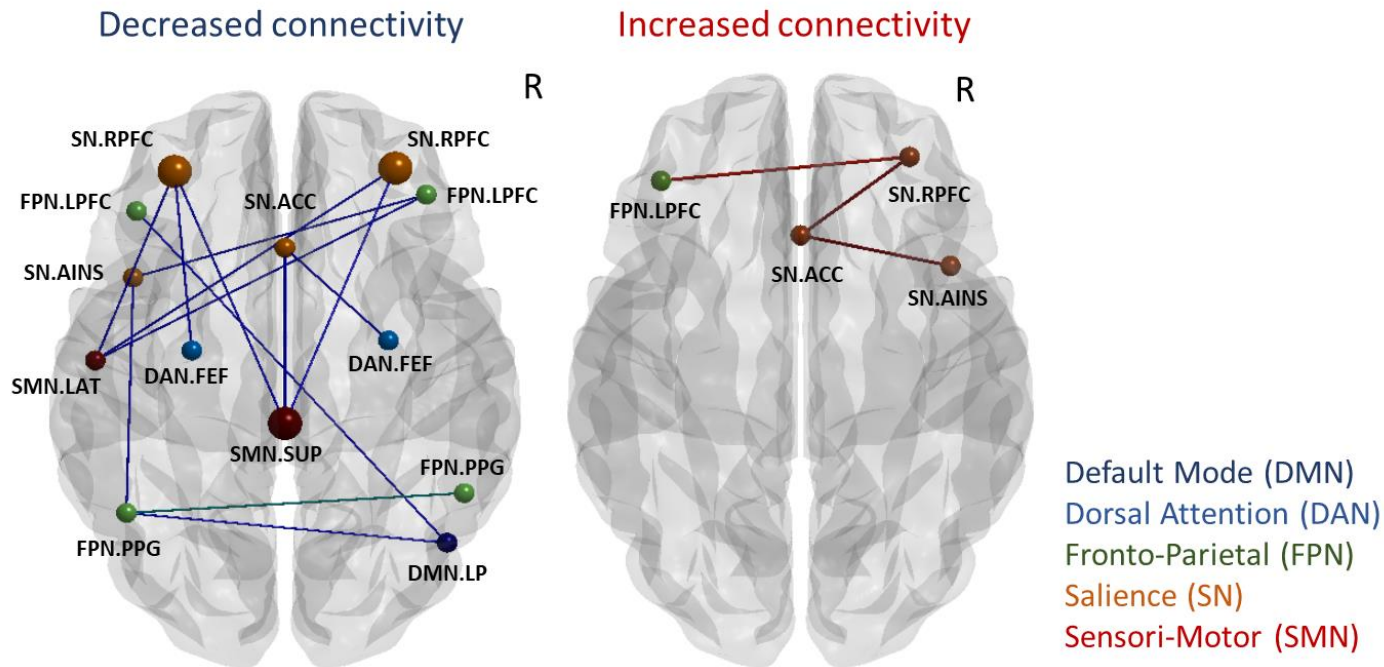
Group-by-time interaction ANOVA model

Anatomical location	BA	P value
CBF (GM)		
Supramarginal Gyrus R (Parietal)	40	0.000008*
Superior Parietal Lobule R (Parietal)	7	0.000008*
Parahippocampal Gyrus L		0.000009*
Insula R	13	0.000012*
Supplementary Motor Area L (Frontal)	6	0.000013*
Anterior Cingulate Gyrus\ Medial Superior Frontal Gyrus L	10/32	0.000026*
Anterior Cingulate Gyrus\ Dorsal Prefrontal R	32/9	0.000037
Putamen R		0.000039
Hippocampus L		0.000137
DTI-MD (GM)		
Frontal Precentral Gyrus L	6	0.000005*
Middle Frontal Gyrus R	10	0.000013*
Middle Frontal Gyrus R	8	0.000052*
DTI-FA (WM)		
Superior Corona Radiata R (Frontal)		0.00006*
Superior Corona Radiata L (Frontal)		0.00006*
Superior Longitudinal Fasciculus L (Parietal)		0.00010

*significant after correction to multiple comparisons, $p < 0.05$



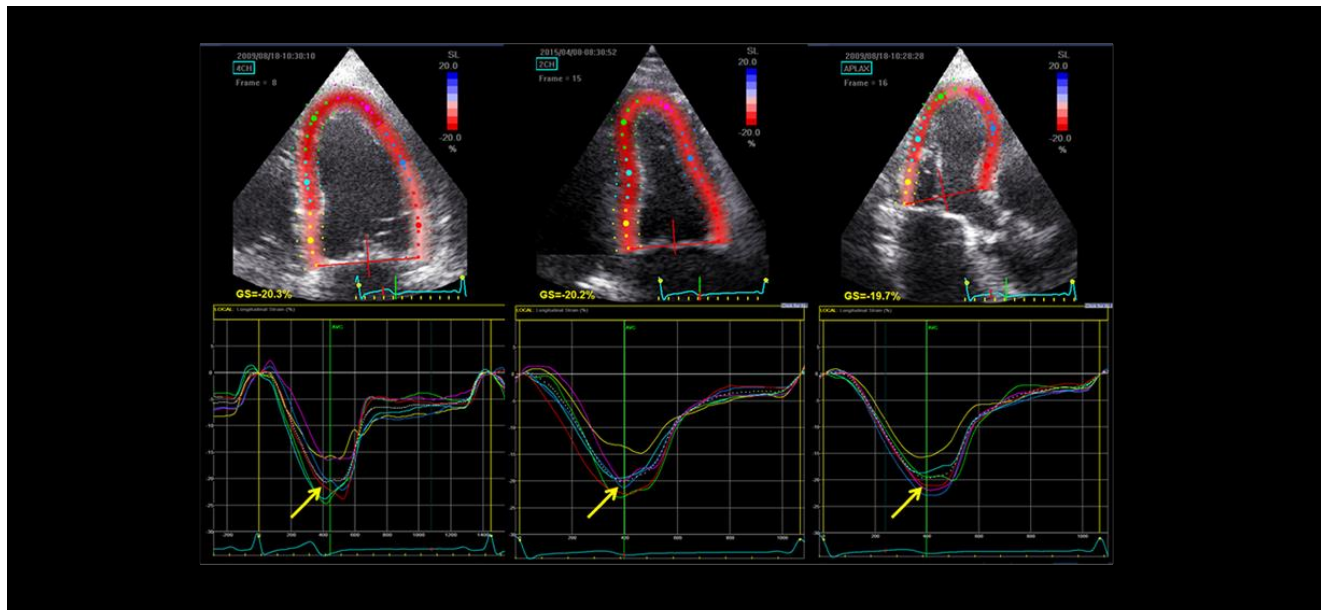
ROI-to-ROI network analysis longitudinal group differences



Changes in post-treatment functional connectivity in the HBOT group compared to controls. Node color - network, node size – significance (see Table 2). Edge color: blue, inter-network connectivity; green, intra-network connectivity. Brain images were created using BrainNet Viewer software

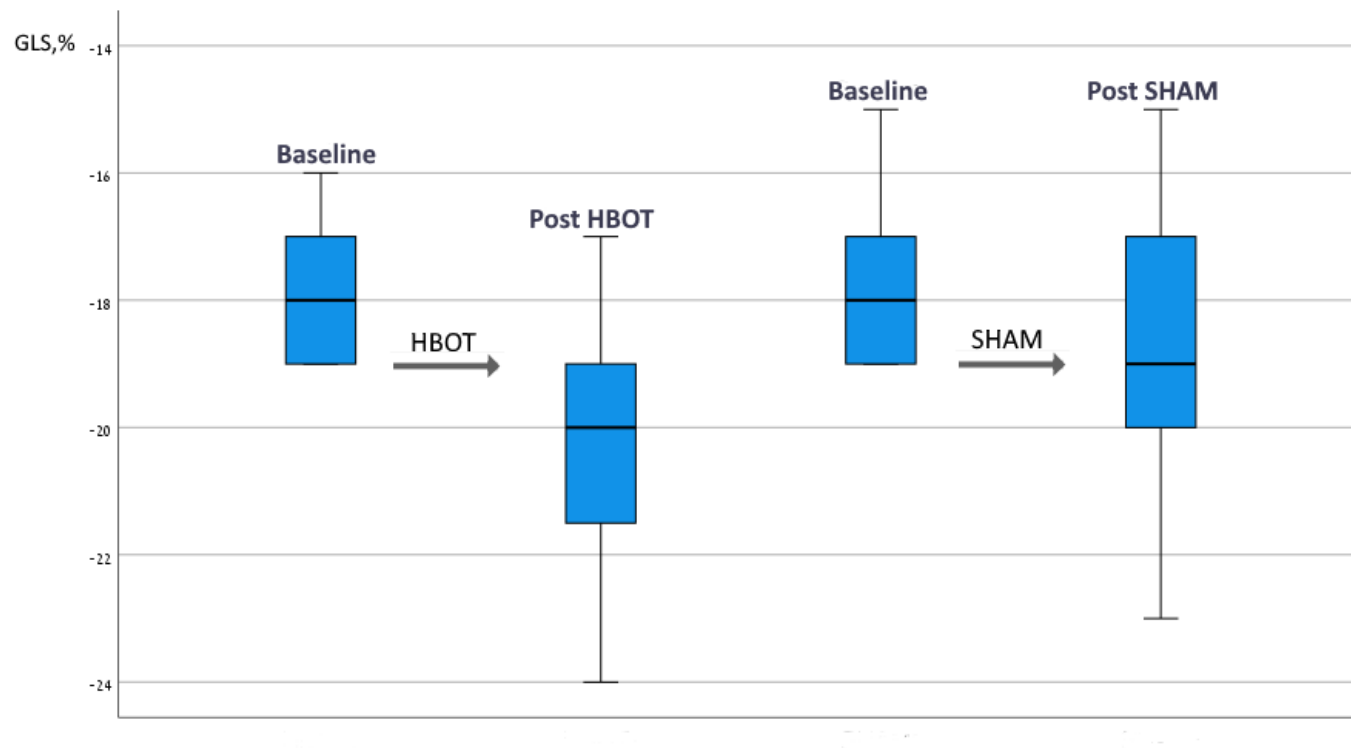


Cardiac functions - Global Longitudinal Strain (GLS)





Global longitudinal strain in the group of patients with reduced strain at baseline



Sci Rep. 2023



The Hyperoxic-Hypoxic Paradox in regenerative medicine

- Trigger
- Stem cells
- Energy
 - Oxygen
 - Improve mitochondrial function
- Angiogenesis





Vs.



*That is not HBOT and cannot deliver the
Hyperoxic-Hypoxic Paradox*



Thursday 11:00am – 12:00pm

**The Hyperoxic-Hypoxic Paradox:
Unraveling Its Potential in Regenerative
Medicine**

Please scan this QR code on you mobile
or tablet device to access the session feedback survey



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