

## **Some Significant Trends in Biodegradable Surgical Sutures**

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**Citation:** N Gokarneshan N (2018) Some Significant Trends in Biodegradable Surgical Sutures. Jr surg opetech anesthesia: JSOPA-103.

**Received Date:** 31 May, 2018; **Accepted Date:** 6 June, 2018; **Published Date:** 15 June, 2018

### **Abstract:**

*The article highlights some significant trends in biodegradable surgical sutures. Surgical site infections (SSIs) are one of the most common nosocomial infections, which can result in serious complications after surgical interventions. Foreign materials such as implants or surgical sutures are optimal surfaces for the adherence of bacteria and subsequent colonization and biofilm formation. Two types of sutures made by two different biopolymers were tested in terms of hydrolytic biodegradation in phosphate buffered saline solution, which simulates the physiological conditions, varying the pH of the medium and the immersion time.*

**1. Keywords:** Antibacterial coating; Biodegradable; Suture; SEM; Totarol; Weight loss

### **2. Introduction**

Surgical Site Infections (SSIs) are one of the most critical parameters after surgical intervention, especially in contexts in which foreign materials such as implants or sutures are brought into the wound. Different bacteria are able to adhere and colonize on the surface of surgical sutures, causing infection. Surgical sutures are sterile stitches used to seal wounds after surgical procedures. They are an important tool to support wound healing, and the increased risk of SSIs compromises their usefulness [1,2]. Due to their great advantages over natural materials, the synthetic bio absorbable sutures became widely used in the surgical field [3-5]. An ideal suture must be sterile, easy to handle, causing minimal tissue damage or minimal tissue reactions, to provide high tensile strength, to present a favourable absorption profile and to be resistant to infection. Polymers used as biomaterials in sutures' fabrication must meet certain characteristic, namely appropriate tensile strength and Young modules value, capillarity, handling,

biocompatibility and biodegradability. The most widely used homopolymers and copolymers in obtaining absorbable sutures are polydioxanone, polyglycolic acid, and the copolymer of glycolic acid and trim ethylene carbonate, the copolymer of caprolactone and glycolide and the copolymer of glycolic acid and lactic acid [6].

### **3. Biodegradable Antibacterial Coating**

The most common pathogen causing these infections is *Staphylococcus aureus*, a gram-positive bacterium, which is responsible in 23% of the cases [7,8]. To reduce the incidence of SSIs, this source has to be eliminated [9]. One approach is to coat the surface of surgical sutures with antibacterial agents like antibiotics or other antibacterial substances in order to prevent bacterial adhesion on the surface without impairing other properties of the surgical suture. Such a coating can be implemented with the aid of poly (lactide-co-glycolide acid) (PLGA) in combination with an antibacterial active ingredient. Biodegradable polymers, especially PLGA, have been used, mainly due to their good biodegradability, biocompatibility, and toxicological properties, as drug delivery systems in medicine and pharmacy. PLGA can be combined with a wide range of active ingredients, which are enclosed in PLGA and released over time during its degradation process [10-12]. Moreover, it is one of the few polymers that have been approved by the Food and Drug Administration (FDA) for clinical use in humans. Nowadays, PLGA is very widely used in systems with controlled drug release over a few days to months, including microspheres, nanoparticles, and implant coatings for local delivery [13,14]. In addition to antibiotics, natural antibacterial agents exist, which have great potential to be used as prophylactic agents against wound infections, mainly because antibiotic resistance may be circumvented. The active ingredient, totarol, a natural substance extracted from *Podocarpus totara*, demonstrates antibacterial activity against different bacteria, including *Staphylococcus aureus* (*S. aureus*) [15,16] and Methicillin-resistant *Staphylococcus aureus* (MRSA) [17]. So far, the exact mechanism of the antibacterial activity of totarol is not entirely clear. It is speculated that totarol inhibits bacterial respiratory transport [18], influences the multi drug efflux-pump [19] or disrupts the phospholipid membranes [20]. Another antibacterial impact is the targeting of the protein Fts Z to inhibit bacterial cytokinesis [21]. These properties are very interesting for future antibacterial therapies since totarol has low cytotoxicity [22,23]. Therefore, we hypothesize that, by combining PLGA and totarol in to a biodegradable, antibacterial coating on sutures, a controlled release of the natural active substance and hence an inhibition of bacterial adhesion and biofilm formation on the material may be achieved. Our data indicate that totarol-coated sutures exhibit antibacterial activity against *S. aureus* in vitro over at least 15 days, while they do not induce adverse effects on the viability of fibroblasts.

This study analyzed the use and effectiveness of totarol as an antibacterial coating for suture material. Totarol-solutions and solutions containing both totarol and the polymer PLGA were used to successfully coat non-absorbable monofilament as well as multifilament sutures. It was shown that totarol has antibacterial properties as a purified substance in solution and that it retained those properties in vitro as a coating on its own and in combination with PLGA [24]. The safest and most efficient combination of totarol and PLGA tested appeared to be the coating solution containing 100 mg/mL totarol and 75 mg/mL PLGA. The growth of *Staphylococcus aureus* around the totarol-coated material was inhibited in the long-term largely independently of its concentration and, therefore, can prevent biofilm formation in vitro. It was also demonstrated that totarol has no negative effect on the viability or morphology of murine fibroblasts in vitro. In conclusion, our biodegradable totarol coating shows promise as a coating for sutures to prevent biofilm formation during the critical phase of wound healing and hence may decrease the occurrence of surgical site infections.

### **4. In Vitro Assessment of Biodegradability**

After implanting the absorbable suture, the polymers used in the synthesis process, are broken down by enzymal and hydrolytic process. Strength, mass loss profiles and biocompatibility of the absorbable sutures are the most important characteristics in the degradation and absorption processes [4,5]. The literature shows that the strength and mass loss profiles of the absorbable sutures depend not only on the chemical differences between the used biopolymers, but also on some intrinsic and extrinsic factors, such as electrolytes, pH, applied stress, temperature, microorganisms and tissue type [6]. The objective of this work was to make a comparative analysis of the way and degradation degree of surgical sutures commonly used in orthopaedic surgery. Two types of sutures made by two different biopolymers were tested in terms of hydrolytic biodegradation in phosphate buffered saline solution, which simulates the physiological conditions, varying the pH of the medium and the immersion time. Phosphate Buffered

Solution (PBS) was selected as testing medium because it is accepted as usual medium for testing the hydrolytic biodegradation of polymers for medical devices [25-29].

The degradation of the investigated surgical sutures immersed in PBS solution is the result of a process of hydrolysis. Some important issues, which affect the degradation rate, are the polymer hydrophilicity and molecular weight. Water can easily penetrate hydrophilic polymers and react easily with functional groups on these polymers. Regarding the polymer molecular weight, the lower molecular weight is, the higher degradation rate is [30]. This study demonstrates the influence of some extrinsic factors concerning the degradation rate of the bio polymeric surgical sutures. The experimental results obtained revealed that both investigated surgical sutures exhibit quite different hydrolytic degradation at various immersion times and pH values. They degrade faster in a high-alkaline medium, and the sutures made by polyglycolic acid shown a total degradation at pH of 10. In conclusion, we consider that the degradation rate of the biodegradable suture can be tailored to different applications depending on the type and area of surgery.

## 5. Conclusions

Due to a significant increase in antibiotic-resistant bacterial strains, naturally occurring agents exhibiting antibacterial properties have great potential in prophylactic therapies. The objective has been to develop a coating for surgical sutures consisting of the antibacterial substance totarol, a naturally occurring diterpenoid isolated from *Podocarpus totarata* in combination with poly (lactide-co-glycolide acid) (PLGA) as a biodegradable drug delivery system. Hence, non-absorbable monofilament and multifilament sutures were coated with solutions containing different amounts and ratios of totarol and PLGA, resulting in a smooth, crystalline coating. Using an Agar Diffusion Test (ADT), it became evident that the PLGA/totarol-coated sutures inhibited the growth of *Staphylococcus aureus* over a period of 15 days. A 3-(4,5-dimethylthiazol-2-yl)-2,5-diphenyltetrazolium bromide (MTT) assay showed that the coated sutures were not cytotoxic to murine fibroblasts. Overall, the data indicates that our innovative, biodegradable suture coating has the potential to reduce the risk of SSIs and postoperative biofilm-formation on suture material without adverse effects on tissue. In the case of sutures made by two different biopolymers the determination of the degradation rate was conducted by measuring the weight loss of the sutures. The study revealed that both investigated surgical suture exhibit quite different hydrolytic degradation at various immersion times and pH level, a more intense degradation being recorded in the alkaline environment.

## References

1. De Simone S, Gallo AL, Paladini F, Sannino A, Pollini M (2014) Development of silver nano-coatings on silk sutures as a novel approach against surgical infections. *J. Mater. Sci. Mater. Med* 25: 2205-2214.
2. Gallo AL, Paladini F, Romano A, Verri T, Quattrini A, et al. (2016) Efficacy of silver coated surgical sutures on bacterial contamination, cellular response and wound healing. *Mater.Sci. Eng. C Mater. Biol. Appl* 69: 884-893.
3. Choudhary S, Cadierm A (2000) *plast. reconstr. surg.* 105: 1566.
4. Diaz-celorio E, Franco L, Rodriguez-galan A, Puiggali J (2010) *Polym. degrad. stab.* 95: 2376-2387.
5. Williams D (1998) *Med. device. technol* 9: 6.
6. Maitz M F (2015) Applications of synthetic polymers in clinical medicine. *Biosurface and biotribology* 1: 161-176.
7. Lenz AM, Fairweather M, Cheadle WG (2008) Resistance profiles in surgical-site infection. *Future Microbiol* 3: 453-462.
8. Katz S, Izhar M, Mirelman D (1981) Bacterial adherence to surgical sutures. A possible factor in suture induced infection. *Ann. Surg* 194: 35-41.
9. Shunmugaperumal T (2010) Microbial colonization of medical devices and novel preventive strategies. *Recent Pat. Drug Deliv. Formul* 4: 153-173.
10. Klose D, Siepmann F, Willart JF, Descamps M, Siepmann J (2010) Drug release from PLGA-based microparticles: Effects of the 'microparticle:bulk fluid' ratio. *Int. J. Pharm* 383: 123-131.
11. Ignatius AA, Claes LE (1996) In vitro biocompatibility of bioresorbable polymers: Poly(L, DL-lactide) and poly(L-lactide-co-glycolide). *Biomaterials* 17: 831-839.

12. Shive MS, Anderson JM (1997) Biodegradation and biocompatibility of PLA and PLGA Microspheres. *Adv. DrugDeliv. Rev* 28: 5-24.
13. Hu C, Feng H, Zhu C (2012) Preparation and characterization of rifampicin-PLGA microspheres/sodium alginate in situ gel combination delivery system. *Colloids Surf. B Biointerfaces* 95: 162-169.
14. Marquette S, Peerboom C, Yates A, Denis L, Langer I, et al. (2014) Stability study of full-length antibody (anti-TNF alpha) loaded PLGA microspheres. *Int. J.Pharm* 470: 41-50.
15. Muroi H, Kubo I (1996) Antibacterial activity of anacardic acid and totarol, alone and in combination with methicillin, against methicillin-resistant *Staphylococcus aureus*. *J. Appl. Bacteriol* 80: 387-394.
16. Kubo I, Muroi H, Himejima M (1992) Antibacterial activity of totarol and its potentiation. *J. Nat. Prod* 55: 1436-1440.
17. Nicolson K, Evans G, O'Toole PW (1999) Potentiation of methicillin activity against methicillin-resistant *Staphylococcus aureus* by diterpenes. *FEMS Microbiol. Lett* 179: 233-239.
18. Haraguchi H, Oike S, Muroi H, Kubo I (1996) Mode of antibacterial action of totarol, a diterpene from *Podocarpusnagi*. *Planta Med* 62: 122-125.
19. Smith EC, Kaatz GW, Seo SM, Wareham N, Williamson EM, et al. (2007) The phenolic diterpene totarol inhibits multidrug efflux pump activity in *Staphylococcus aureus*. *Antimicrob. AgentsChemother* 51: 4480-4483.
20. Micol V, Mateo CR, Shapiro S, Aranda FJ, Villalain J (2001) Effects of (+)-totarol, a diterpenoid antibacterial agent, on phospholipid model membranes. *Biochim. Biophys. Acta* 1511: 281-290.
21. Jaiswal R, Beuria TK, Mohan R, Mahajan SK, Panda D (2007) Totarol Inhibits Bacterial Cytokinesis by Perturbing the Assembly Dynamics of FtsZ. *Biochemistry* 46: 4211-4220.
22. Haraguchi H, Ishikawa H, Kubo I (1997) Antioxidative action of diterpenoids from *Podocarpusnagi*. *PlantaMed* 63: 213-215.
23. Reinbold J, Hierlemann T, Hinkel H, Muller I, Maier ME, et al. (2016) Development and in vitro characterization of poly (lactide-co-glycolide) microspheres loaded with an antibacterial natural drug for the treatment of long-term bacterial infections. *DrugDes. Dev. Ther* 10: 2823-2832.
24. Reinbold J, Uhde AK, Müller I, Weindl T, Geis-Gerstorf J, et al. (2017) Preventing Surgical Site Infections Using a Natural, Biodegradable, Antibacterial Coating on Surgical Sutures, *Molecules* 22: 1570.
25. Vieira AC, Guedes RM, Tita V (2014) Constitutive modeling of biodegradable polymers: Hydrolytic degradation and time-dependent behaviour. *Int. J. Solids Struct* 51: 1164-1174.
26. Choong GYH, De Focatiis DSA (2016) A method for the determination and correction of the effect of thermal degradation on the viscoelastic properties of degradable polymers. *Polym. Degrad. Stab* 130: 182-188.
27. Han X, Pan J (2009) A model for simultaneous crystallisation and biodegradation of biodegradable polymers. *Biomaterials* 30: 423-430.
28. Gallo AL, Paladini F, Romano A, Verri T, Quattrini A, et al. (2016) Efficacy of silver coated surgical sutures on bacterial contamination, cellular response and wound healing. *Mater. Sci. Eng. C* 69: 884-893.
29. Tumbic J, Romo UA, Boden M, Mather PT (2016) *Polymer* 101: 127-138.
30. Marius N, Aurora A, Eugeniu V, Augustin S, Octavian T, et al. (2016) Evaluation of Biodegradability of Surgical Synthetic Absorbable Suture Materials: An In Vitro Study, *MATERIALE PLASTICE* 53: 642.

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