

Hypoxia in vascular networks: a complex system approach to unraveling the Diabetes paradox

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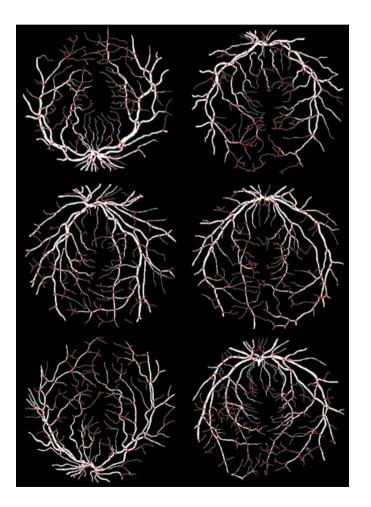






Vascular networks

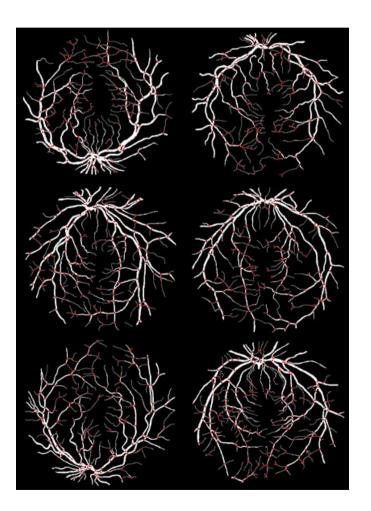
Vascular networks: Spatial networks



Cost associated to the length of vessels when delivering energy, water or nutrients

Blood flux is a conservative flux

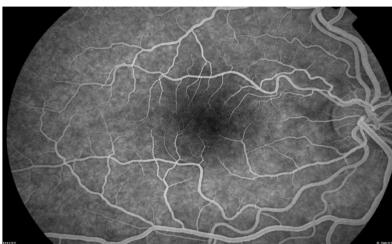
Vascular networks: Spatial networks



Two different topologies: Major vessels: arterioles and venules: blood transport. \rightarrow fractal tree-like Capillaries:nutrient and oxygen diffusion: $\rightarrow \approx$ lattice structure. We investigate tissue irrigation and hypoxia levels resultant from the damaged retinal vascular network due to Diabetic Rethinopathy.



- Angiography of a human retina.
- Vessels ≈ cylindrical symmetry.
- Blood viscosity high enough to neglect turbulence and non-linear effects.
- Steady state study
- The transport of oxygen: diffusive process.





DR: Two main stages with different phenotypes.

NPDR: inflammation in the capillaries and arterioles. Vessel malformations. Vessel blockage (No irrigation in some regions).

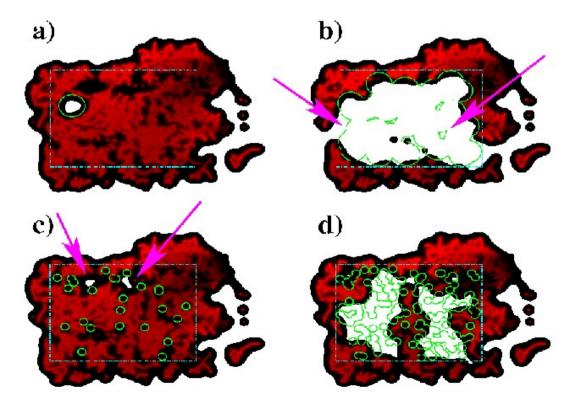
PDR: neovascularization, the growth of abnormal (fragile and leaky) new blood vessels.

Paradox: if the action in DR is the regression, disruption and blockage of blood vessels, then how does the hallmark of the most advanced stage of the disease is a very high vascular density?

Proteins Ang-2 hinder the function of the thinner vessels (increase their permeability and render them non functional)

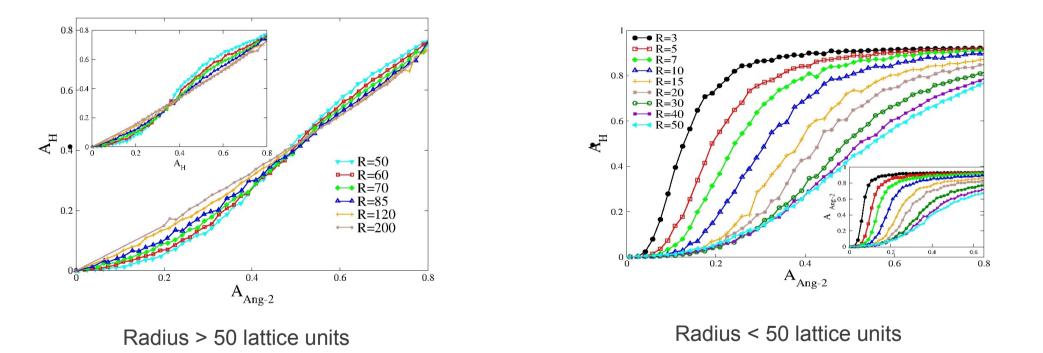
We consider randomly distributed small circular regions of radius R → where these proteins damage the vessels.

Inside these regions, we block all vessels with diameter smaller than a cutoff, Λ .

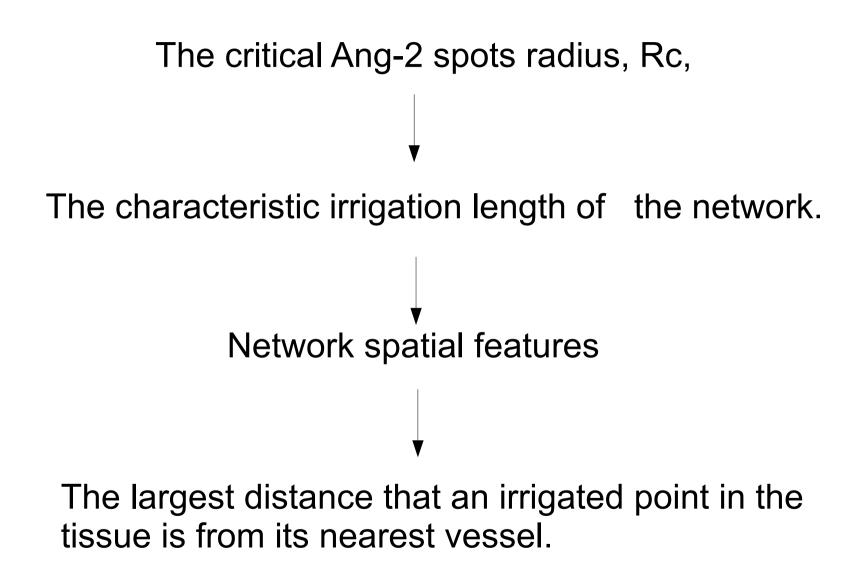


What we found

We found two regimens delimited by a critical Ang-2 spots radius.

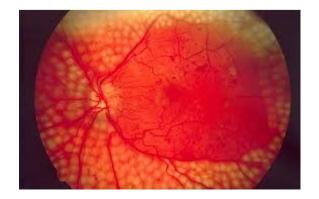


Fraction of area in hypoxia (AH) versus fraction of area in retina affected by Ang-2 Protein.



Blockage with Ang-2 spots of radius > larger than Rc, the proangiogenic factors will only work in correcting the malformations provoked by the Ang-2 \rightarrow **non-proliferative diabetic retinopathy phenotype**.

Targets of radius < Rc: may lead to hypoxia in regions with functional vessels \rightarrow the tissue will produce pro-angiogenic factors \rightarrow creation of neo-vessels in regions with functional vasculature \rightarrow **proliferative diabetic retinopathy phenotype**.



Thanks!!!!