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## Introduction: Electroporation

- Electroporation is the targeted delivery of high-voltage fields to a biological area to either permeate or rupture cells
- The effects are reversible or irreversible and can treat inoperable cancers or deliver novel genetic and electrochemical therapies<sup>1</sup>

### Electroporation Protocols

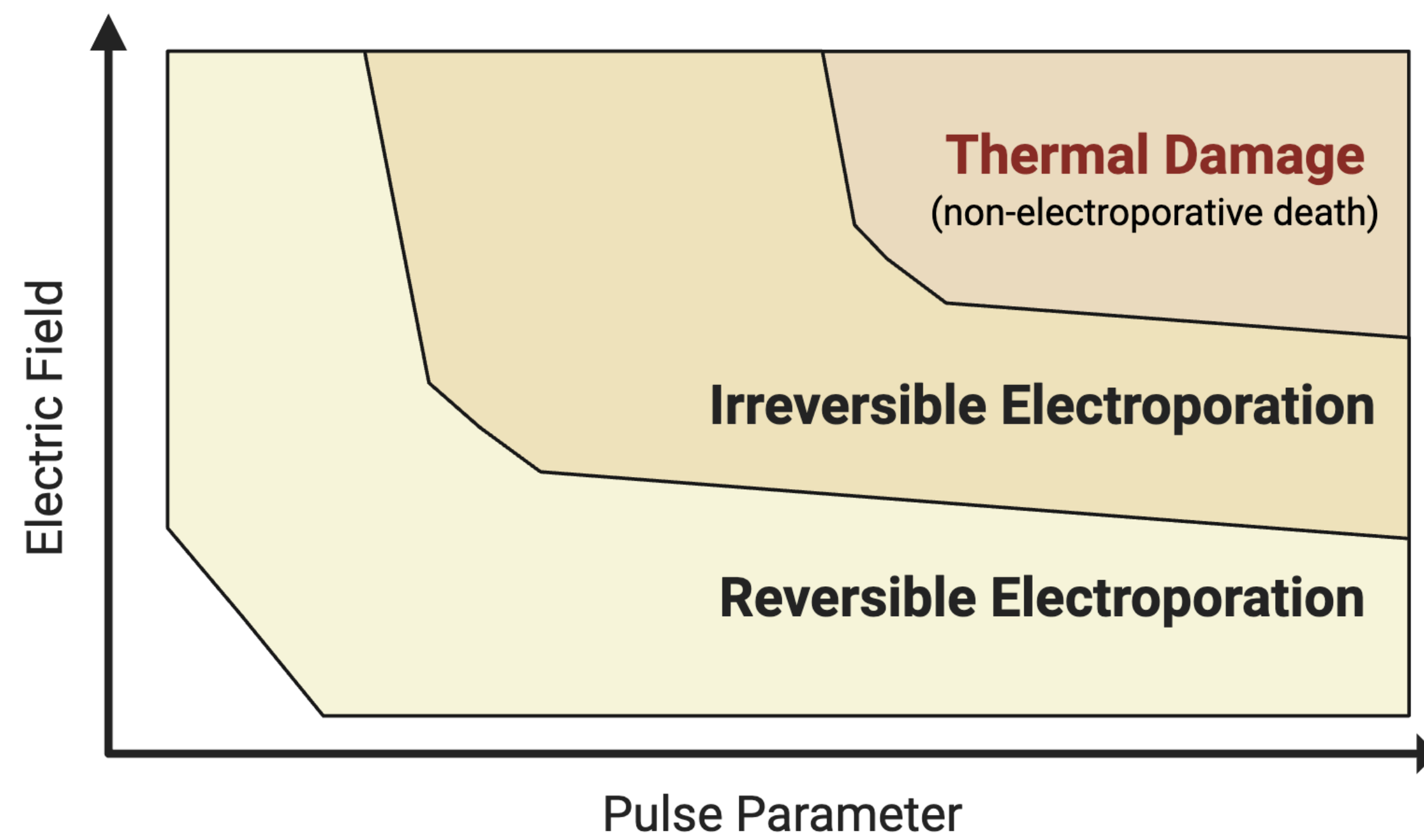
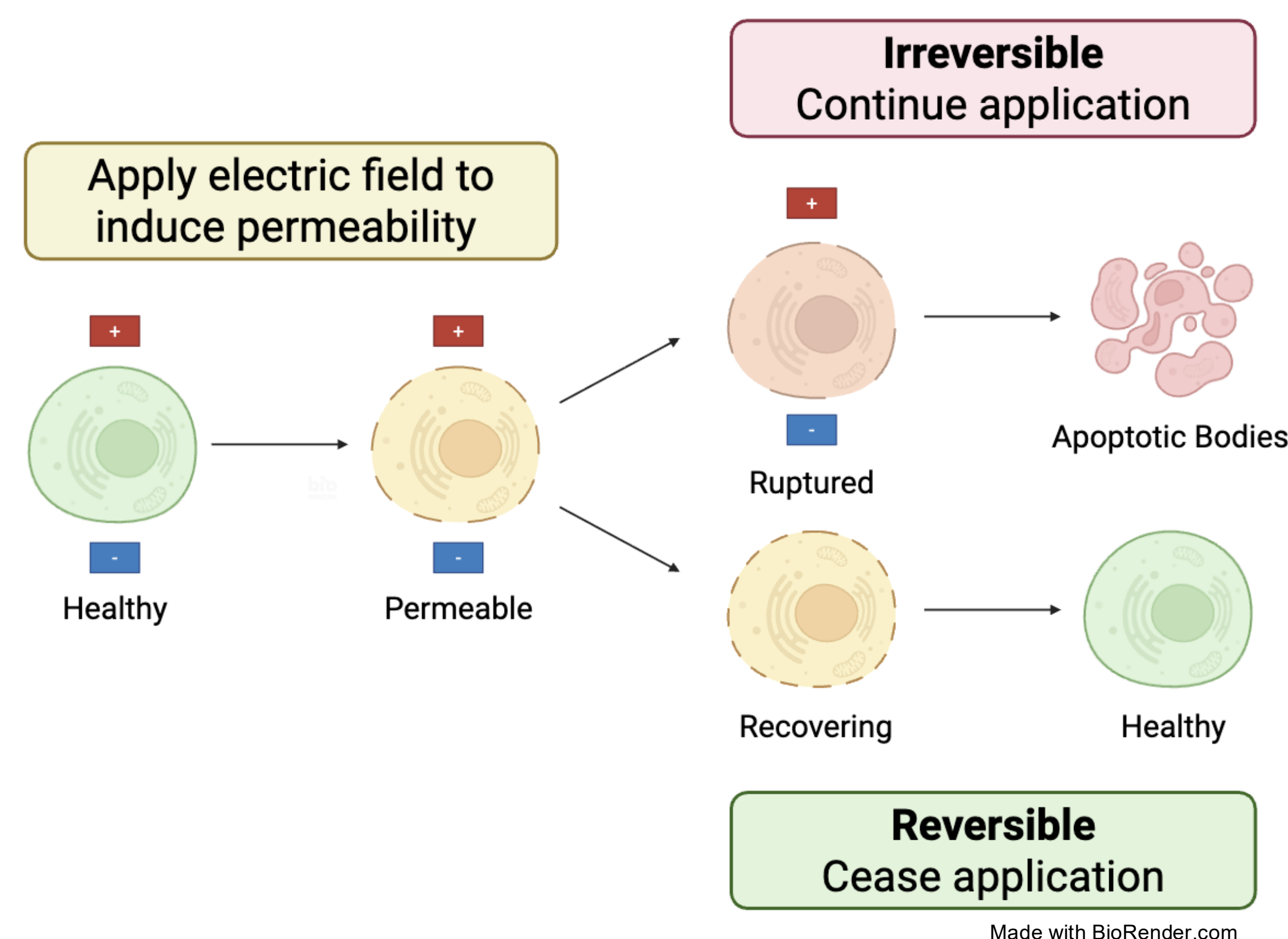


Image inspired by Tabaja et al., 2023.<sup>2</sup> Made with BioRender.com

**Figure 1.** Electroporation protocols and parameters

- As electric field strength, pulse width, length, and duration increase, electroporation results increase in severity
- If electric field and/or the pulse parameter are too high, thermal damage may occur, resulting in cell death that is considered non-electroporative

Irreversible electroporation can be used to treat inoperable tumors by continuing the application of electric fields past the critical threshold

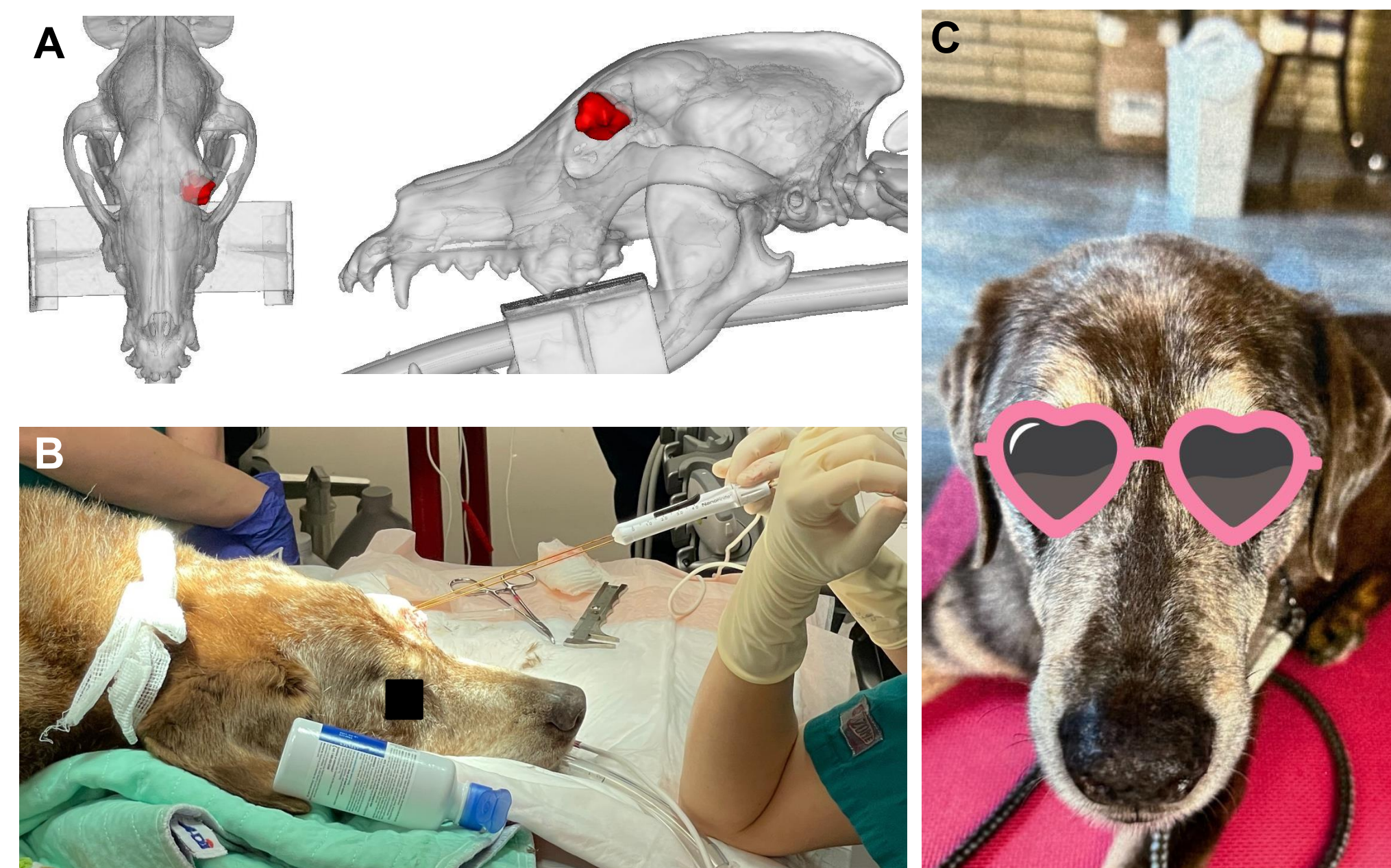


**Figure 2.** Reversible versus irreversible electroporation

- An electric field is applied to a healthy cell, moving it into a permeable state
- If the field is sustained, the cell reaches a critical threshold and ruptures, forming apoptotic bodies and releasing immunostimulants
- If the field is removed, the cell recovers, and reversible electroporation is achieved
- Reversible electroporation is utilized for electrochemotherapy and has promise for DNA vaccine delivery

## Case Study: Canine Soft Tissue Sarcoma

### H-FIRE and ECT Provide a Synergistic Anti-Tumor Effect

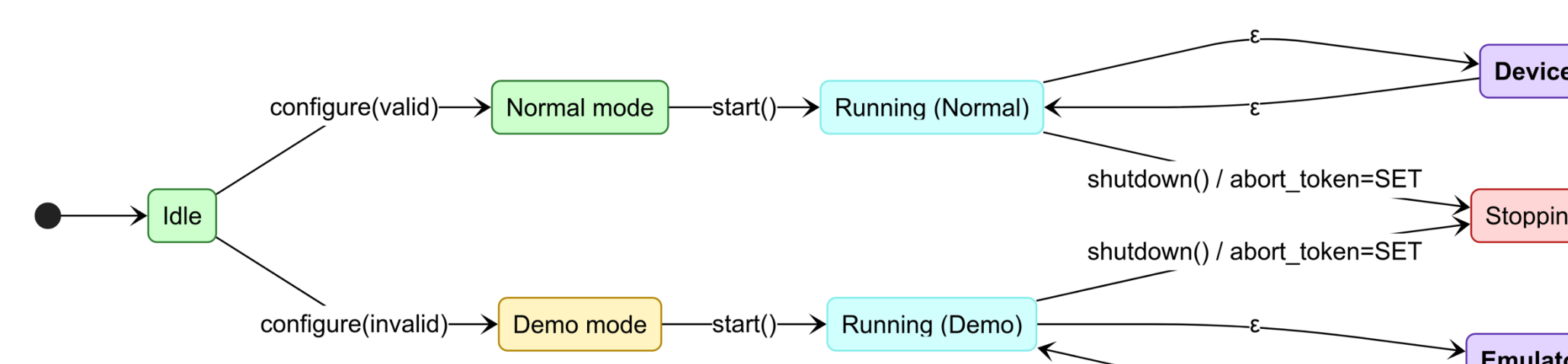


**Figure 3.** Case study of a ~2cm canine soft tissue sarcoma impacting the left orbit that was treated using combined H-FIRE and ECT. **A** shows a CT construction of the mass, **B** demonstrates the H-FIRE and ECT being utilized to ablate the mass and increase chemotherapy penetration to induce apoptosis in cancer cells, and **C** is a post-operative image of the patient.

- The patient was at risk of losing their left orbit due to a soft-tissue sarcoma posterior to the socket
- H-FIRE was used in combination with ECT to ablate the mass and ensure clean margins
- The patient was able to enter remission and retain their left orbit

## Software: Multithreading Security

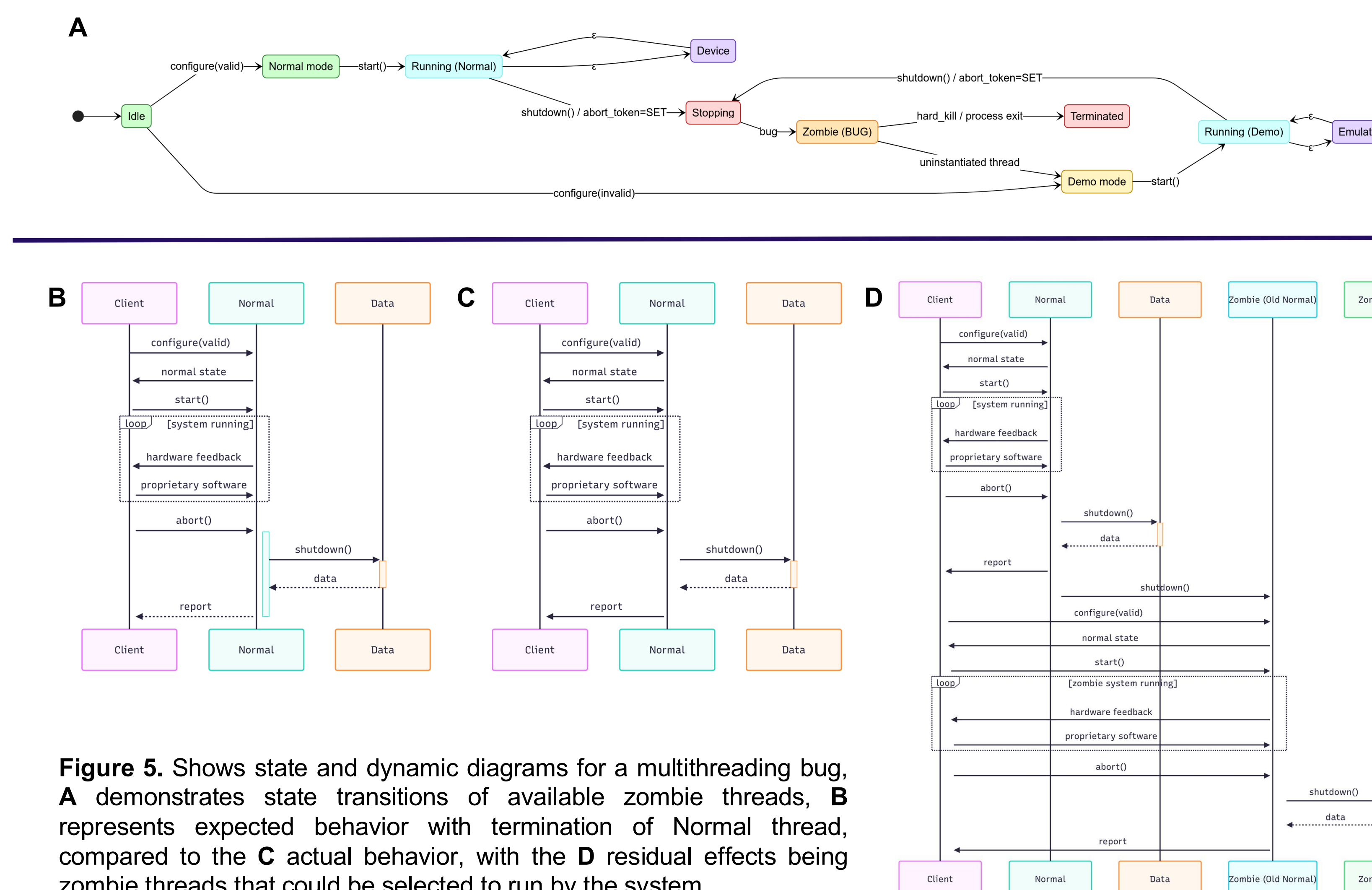
### Novel Fail-Safe Protocols Secure Multi-State System



**Figure 4.** State diagram for expected system behavior with security emulator added. The system will run in normal mode when connected to a valid device, and if ever a valid device fails to configure, a fail-safe emulator system prevents unexpected behavior.

- Potential failure if faulty device configuration causes valid system to run as invalid
- Emulator system provides a safe pathway for valid devices running demo mode

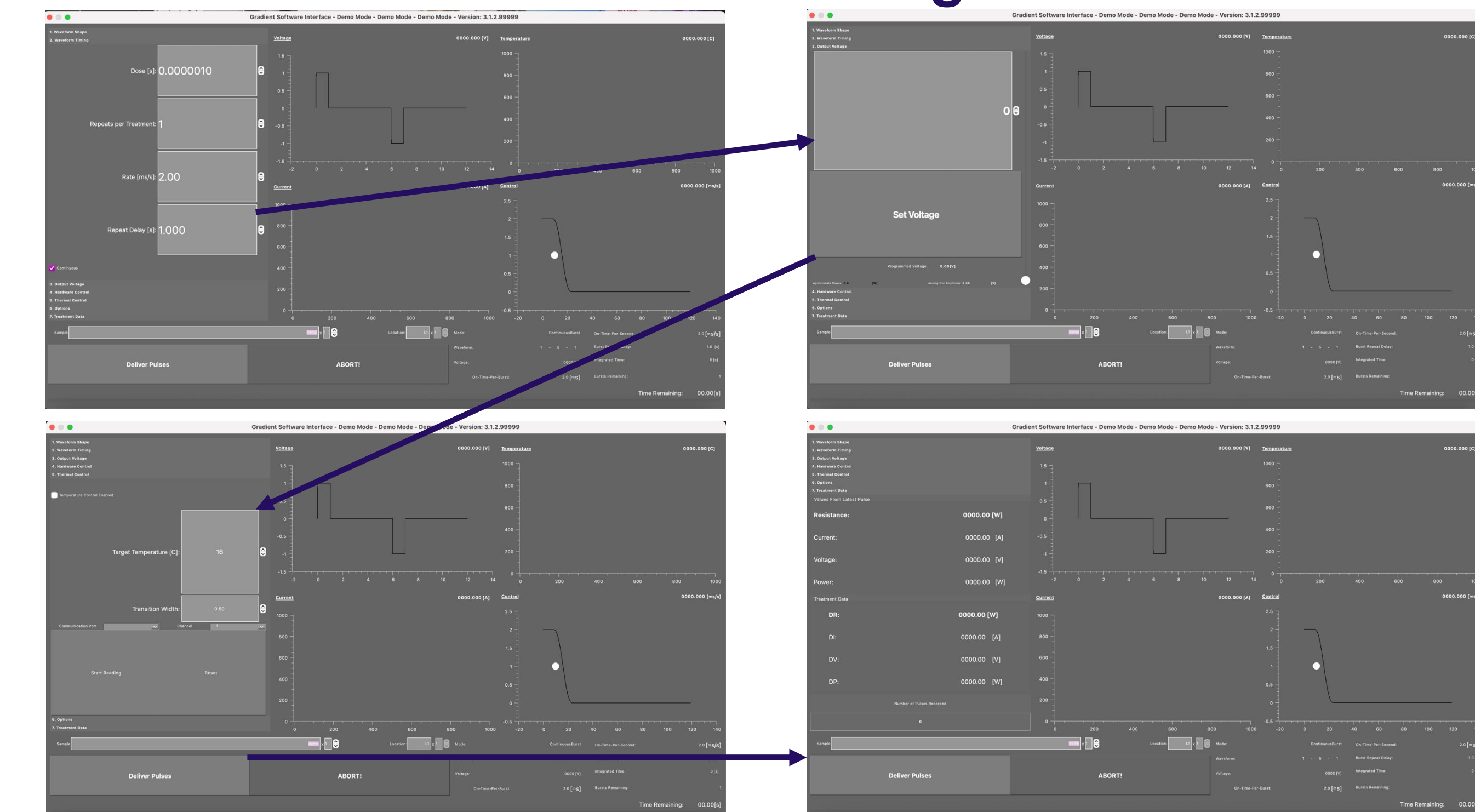
### Multithreading Error Could Cause Unexpected Behavior



**Figure 5.** Shows state and dynamic diagrams for a multithreading bug, **A** demonstrates state transitions of available zombie threads, **B** represents expected behavior with termination of Normal thread, compared to the **C** actual behavior, with the **D** residual effects being zombie threads that could be selected to run by the system.

## Software: Frontend Optimization

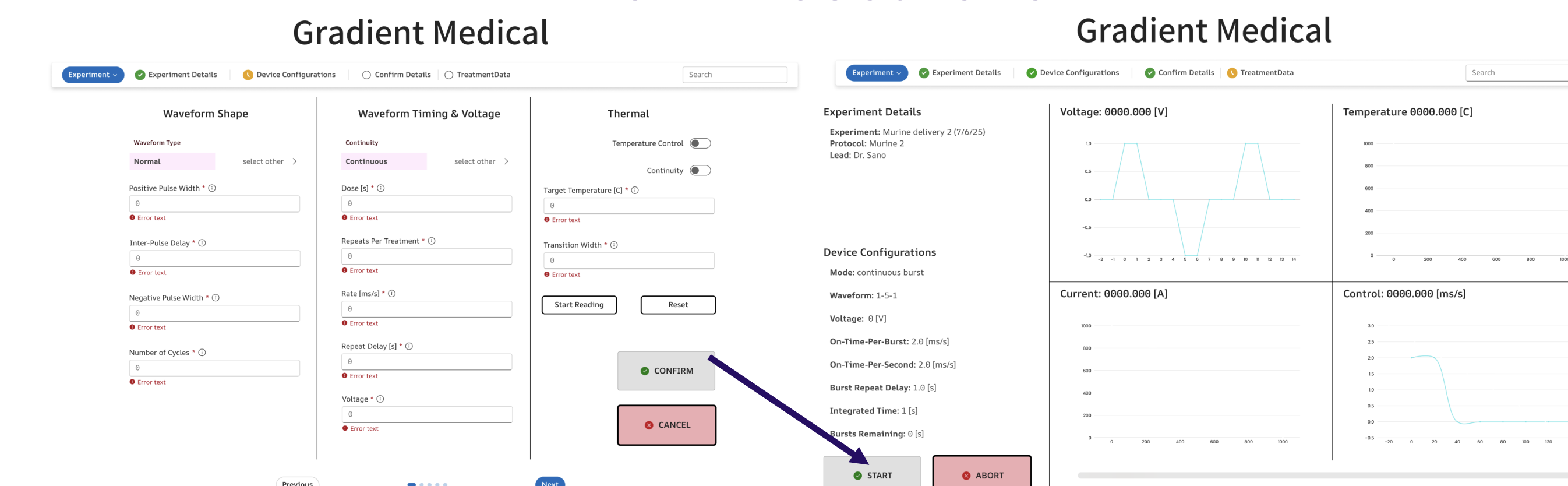
### Previous Design



**Figure 6.** Previous frontend with collapsed menus, unclear click points, no safety checks, and information irrelevant to clinicians.

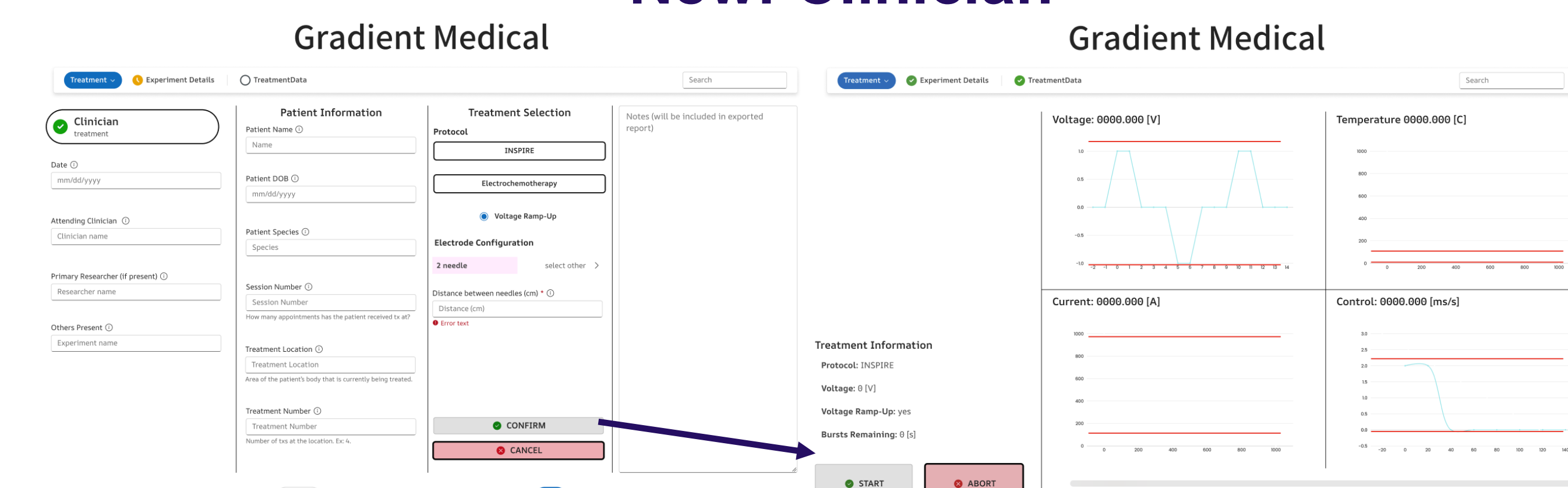
- **Safety Optimization:** requires value check, gridlines show clinicians safe bounds, only relevant device metrics shown
- **Ease of Use:** 3 vs 12 clicks to select and begin treatment
- **Enhancement:** separate roles, generates patient report

### New: Researcher



**Figure 7.** Optimized frontend eliminates clicks and enhances data for engineers.

### New: Clinician



**Figure 8.** Optimized frontend to streamline clinician workflow and ensure safety.

## References and Acknowledgements

[1] Weaver, J. C., Smith, K. C., Esser, A. T., Son, R. S., & Gowrishankar, T. R. (2012). A brief overview of electroporation pulse strength-duration space: a region where additional intracellular effects are expected. *Bioelectrochemistry (Amsterdam, Netherlands)*, 87, 236–243. <https://doi.org/10.1016/j.bioelechem.2012.02.007>

[2] Tabaja, Chadi, Arwa Younis, Ayman A Hussein, Tyler L Taigen, Hiroshi Nakagawa, Walid I Saliba, Jakub Sroubek, Pasquale Santangeli, and Oussama M Wazni. "Catheter-Based Electroporation." *JACC. Clinical Electrophysiology* 9, no. 9 (September 1, 2023): 2008–23. <https://doi.org/10.1016/j.jacep.2023.03.014>.

I would like to thank the Bioelectricity Lab, Mike Sano, and Robert Williamson for their continued support in this work. Research reported on this poster was supported by the National Cancer Institute of the National Institutes of Health under award numbers R01CA276232, R01CA272550, R41CA275587 and by the NCSU Chancellor's Innovation Fund.