



Fresh frozen plasma may decrease levels of endothelial dysfunction in burn injury patients Anna Mermilliod, Cara Ramos, Dhanushka Vitharana, Abdul-Razak Masoud, Ada Ozcan, Kaitlyn Andre, Claudia Leonardi, M. Victoria P. Miles, Jeffery Carter, Jonathan Schoen, Herbert Phelan, Alison Smith

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Introduction

After burn injury, patients are typically given a combination of crystalloids and colloids for fluid resuscitation. Fresh frozen plasma (FFP) is an adjunctive colloid solution used during burn resuscitation for patients with high total body surface area (TBSA) burns. FFP may reduce endothelial dysfunction associated with larger TBSA burns. Vascular endothelial growth factor (VEGF-A) is a cytokine that regulates angiogenesis, which is the proliferation of new vasculature. Angiogenesis after injury can increase inflammatory cell infiltration and lead to endothelial dysfunction. FFP may accomplish a reduction in endothelial dysfunction by modulating cytokine levels of adipose-derived stem cells, specifically that of VEGF-A.

Variable	Median	Min.	Max.
Age	61	23	78
TBSA	31	6	93
Weight (kg)	73	43.1	117.9
Adipose tissue collection day	4	2	13

Demographics

Spearman correlation showed a moderately-strong negative association between VEGF-A levels and FFP.
This means that patients receiving FFP had lower levels of VEGF-A, and may have had decreased endothelial cell dysfunction.
Decreased endothelial cell dysfunction can decrease the inflammatory state of burn injury patients and may contribute to improved healing.

Conclusion

Fresh Frozen Plasma Received vs. VEGF-ALevels Though this correlation did approach the statistically significant p-value (<0.05), the correlation was not found to be statistically significant.

- Future studies are needed to expand the sample size to demonstrate statistical significance of the negative correlation.
- Future studies can also adjust for

 This research study aims to investigate the effects FFP may have on VEGF-A levels in burn patients.

Methods

- Seventeen patients with full-thickness burn injury were enrolled in this study.
- Adipose tissue was collected at median 4 days following injury.
- ADSCs were isolated from the tissue by trypsin enzyme digestion.
- Fluoresence-activated single-cell sorting of ADSCs was performed with CD105, CD90, and CD73 antibodies to determine purity.



TBSA, as a smaller range of values may indicate stronger correlations with cytokine values.

References

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tissue culture conditions and

supernatant was collected for

cytokine analysis.

• Spearman correlation coefficient: -0.458

• P-value: 0.064

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