



Automatic device for diagnosis, prognosis and monitoring of acute and chronic organ transplant rejections.

Technology

Current quantification technique is based on the subjective analysis by a pathologist of stained slides from biopsies.

It requires a significant phase for sample preparation and is not reproducible due to the great variability intra and between operators.

It does not allow you to access certain data such as the distinction between fibrosis and constituent collagen causing a significant overestimation of the fibrosis level.

No automated technique allows quantifying active inflammation without marking.



Benefits

studies.

Low cost due to the complete automation requiring:

- A small technical time ~ 5 minutes,
- No sample preparation,
- No engineer time needed,
- No medical time for analysis

Diagnostic contribution: precise quantification of active inflammation and classification i Prognosis: precise quantification of fibrosis enabling IC and FIAT classification. Repeatable: allows the monitoring of patients and could make possible the realization of international

Specific to pathological collagen: no overvaluation of fibrosis rate Acquisition time:

- comparable to a plate scanner: 1 to 1,5 hour depending on the resolution and on sample
- This time could be reduced to 30 minutes by coupling detectors.

Low data volume: 600 MB for a cutting with a resolution of 25μ M/cm² Direct reading of the rates of: fibrosis, active inflammation, normal parenchyma, constituent collagen. Direct reading of: the IC Interstitial fibrosis score, the I score of Interstitial Inflammation, the confidence index

Applications

- For diagnosis, prognosis and monitoring of fibrosis and inflammation (allograft rejections) in kidney, liver or lung.
- Used especially in cases of Kidney Transplant, Liver, Heart, Lungs.
- Can be extrapolated to non transplanted organs ... waiting for an international standard classification

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Keywords

- Tissue fibrosis
- Inflammation
- Transplant rejections
- Diagnosis
- Prognosis
- Patient monitoring
- Histological characterization
- Quantification
- Pathologists
- **FTIR**

Intellectual Property

Patent FR 1457323 filed on July 29, 2014 PCT/FR2015/051825 filed on July 2, 2015



Development Status

Proof of concept performed in the field of kidney transplants

Robust method, validated against reference techniques on kidney biopsies.

Partnership

We are looking for a partner in capacity to develop the product, obtain the CE Mark and/or FDA agreement, market the product and assume the distribution worldwide.