

STEM CELL THERAPY: WHAT IRS SHOULD KNOW?

Prof.Hossein Ghanaati

Dr.Maedeh Rouzbahani

Tehran University of medical Sciences



Introduction:

DO YOU KNOW ANY
KIND OF MEDICATION
TO DO THESE ALL AT
THE SAME TIME?

REGENERATION
EFFECT

Which can even create an
ear!



ANTI INFLAMMATORY
EFFECT

Same as cortons!



IMMUNOMODULATORY
EFFECT

Same as
Infliximab,
Azathioprine,
and others



Introduction:

DO YOU KNOW ANY
KIND OF MEDICATION
TO DO THESE ALL AT
THE SAME TIME?



HEALTH

5 Chinese children get new ears grown from own cells

CTVNews.ca Staff

Published Tuesday, January 30, 2018 8:10PM EST



London scientists grow noses and ears

April 8, 2014 / 11:05 AM EDT / CBS News



MATT DUNHAM/AP

Introduction:

What are stem cells?

-Stem cells are a category of cells **naturally present in our bodies**, playing a role in partial body repairs and other bodily activities. **Various sources** of stem cells exist in our bodies, including **bone marrow cells**, **fat cells**, cells in the **gums**, **muscle cells**, and **umbilical cord cells**, including Wharton's jelly and umbilical cord blood.



Anti inflammatory
effect

Journal of Inflammation Research

An Inflammatory
disease

Dovepress

open access to scientific and medical research

Open Access Full Text Article

REVIEW

Stem Cell Therapy in Inflammatory Bowel Disease: A Review of Achievements and Challenges

Cheng-Mei Tian^{1,2,*}, Yuan Zhang^{3,*}, Mei-Feng Yang^{4,*}, Hao-Ming Xu⁵, Min-Zheng Zhu⁶, Jun Yao¹,
Li-Sheng Wang¹, Yu-Jie Liang⁷, De-Feng Li¹

¹Department of Gastroenterology, Shenzhen People's Hospital (The Second Clinical Medical College, Jinan University, The First Affiliated Hospital, Southern University of Science and Technology), Shenzhen, Guangdong, People's Republic of China; ²Department of Emergency, Shenzhen People's Hospital (The Second Clinical Medical College, Jinan University, The First Affiliated Hospital, Southern University of Science and Technology), Shenzhen, Guangdong, People's Republic of China; ³Department of Medical Administration, Huizhou Institute of Occupational Diseases Control and Prevention, Huizhou, Guangdong, People's Republic of China; ⁴Department of Hematology, Yantian District People's Hospital, Shenzhen, Guangdong, People's Republic of China; ⁵Department of Gastroenterology and Hepatology, Guangzhou Digestive Disease Center, Guangzhou First People's Hospital, School of Medicine, South China University of Technology, Guangzhou, Guangdong, People's Republic of China; ⁶Department of Gastroenterology and Hepatology, The Second Affiliated Hospital, School of Medicine, South China University of Technology, Guangzhou, Guangdong, People's Republic of China; ⁷Department of Child and Adolescent Psychiatry, Shenzhen Kangning Hospital, Shenzhen, Guangdong, People's Republic of China

*These authors contributed equally to this work

Correspondence: Li-Sheng Wang; De-Feng Li, Department of Gastroenterology, Shenzhen People's Hospital (The Second Clinical Medical College, Jinan University, The First Affiliated Hospital, Southern University of Science and Technology), No. 1017, Dongmen North Road, Luohu District, Shenzhen, 518020, People's Republic of China, Tel +86 755 25533018, Email wanglsszrmmy@163.com; ldf830712@163.com

~~infliximab~~

Immunomodulatory effect:

Auto immune disease

RENAL FAILURE

2021, VOL. 43, NO. 1, 1266-1275

<https://doi.org/10.1080/0886022X.2021.1968432>



Taylor & Francis
Taylor & Francis Group

CLINICAL STUDY

OPEN ACCESS



Autologous bone marrow-derived mesenchymal stem cells for interstitial fibrosis and tubular atrophy: a pilot study

Lei Zhang, Xingqiang Lai, Yuhe Guo, Junjie Ma, Jiali Fang, Guanghui Li, Lu Xu, Wei Yin and Zheng Chen

Department of Organ Transplantation, The Second Affiliated Hospital of Guangzhou Medical University/The Second Clinical Medicine School of Guangzhou Medical University, Guangzhou, China

~~cortons~~

Why is stem cell therapy important in (IR)?

Radiologists are the eyes of all other specialists.

Stem cells play a crucial and potentially transformative role in medicine. Therefore, radiologists must have clear vision to facilitate targeted and personalized drug delivery.

Evidence suggests that while systemic stem cell therapy may not be effective, targeted injections of cells are more promising.

Vascular delivery is often the most effective form of targeted therapy.



STEM
CELL

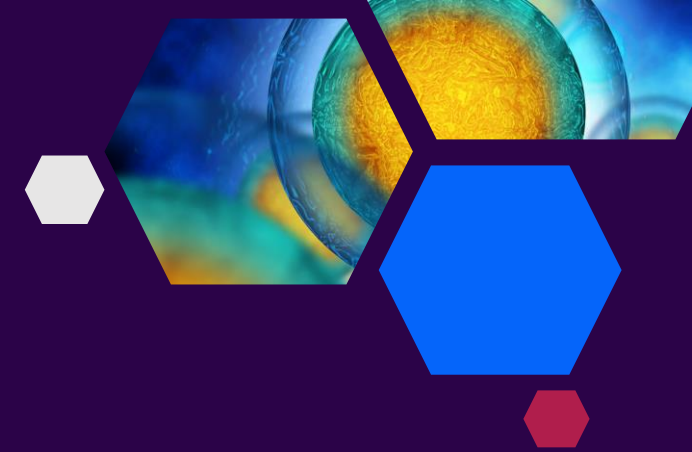
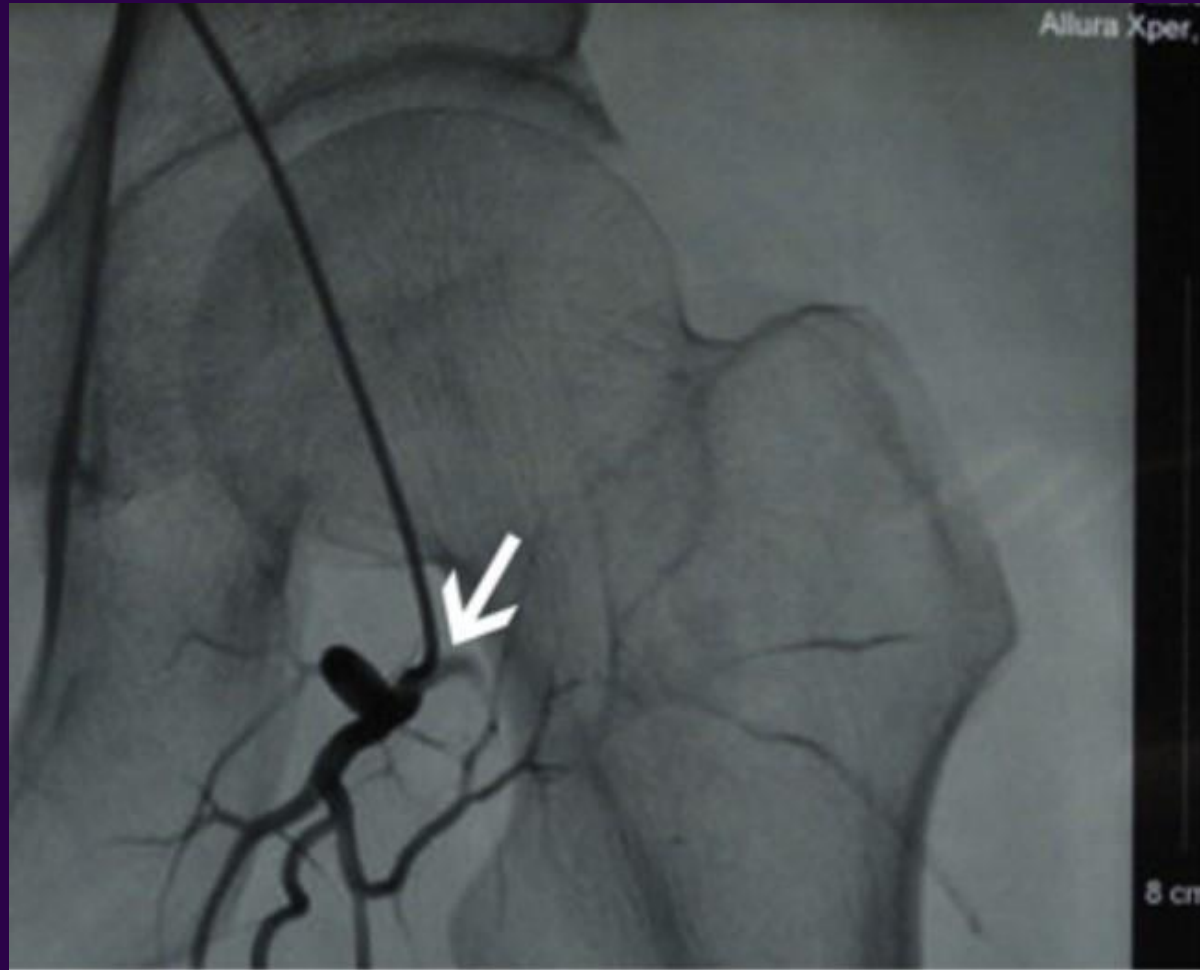
CATHETER

DISEASE

STELL

Interventional
radiologist

Head of femur



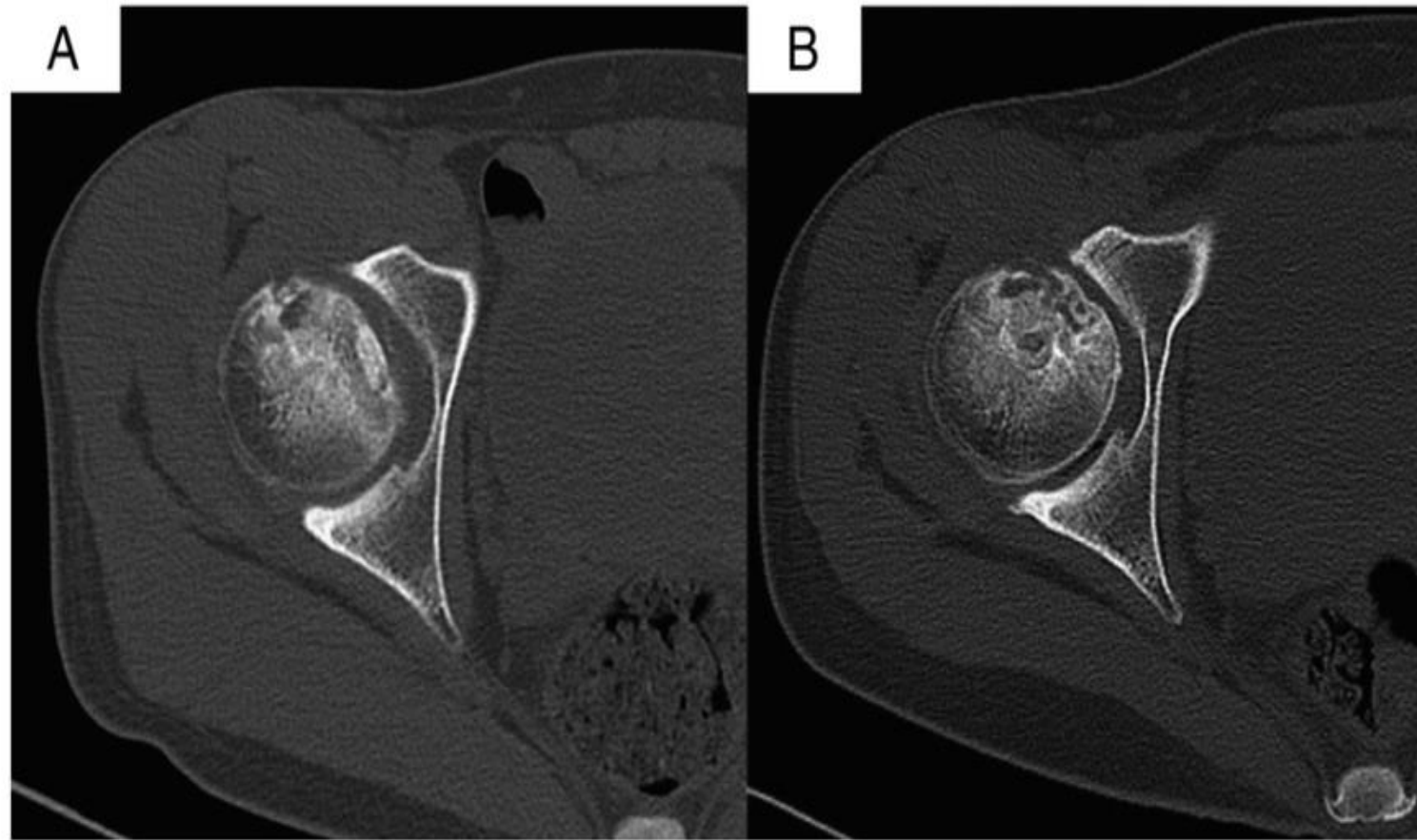
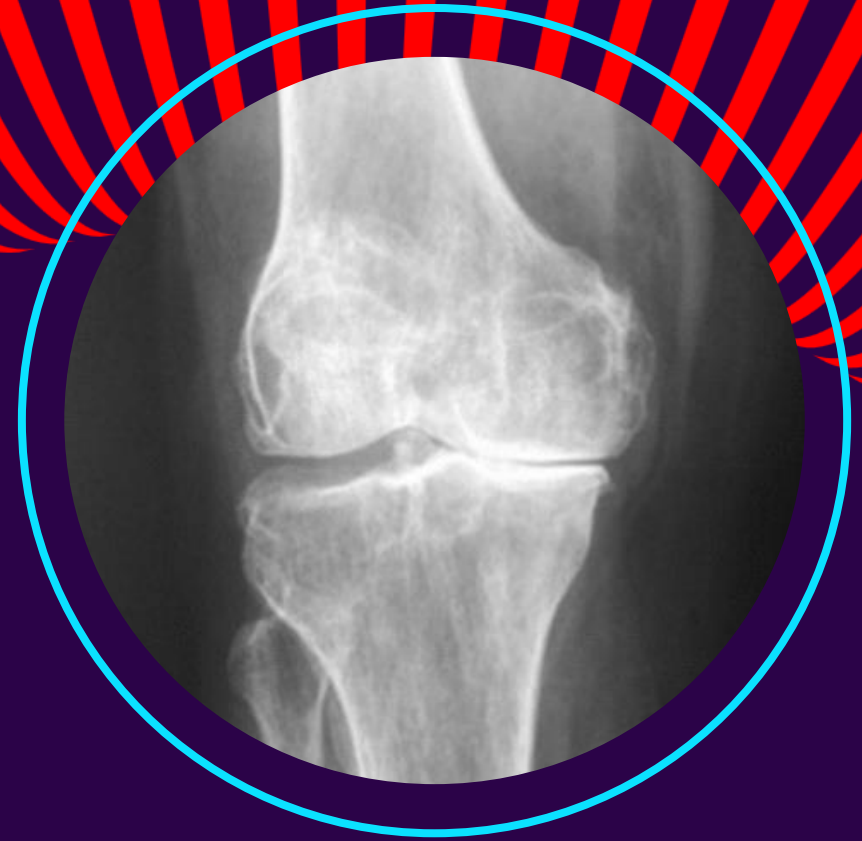


Fig. 7. CT scans at 12 months after treatment show healing in necrotic region of femoral head, and the femoral head remains intact and round. (A) was obtained before the treatment, (B) was obtained at 12 months after the treatment.

ABOUT KNEE OA

- Osteoarthritis disease (OA) , is one of the **most common joint destructive diseases**, which can progress slowly and cause irreparable damage
- 6% of men and 18% of women, who are under the age of 60 are suffering from OA all over the world
- No definite cure** for this disease has been known so far
- In OA, the most common treatment is **medical therapy** for pain control



Stem cell preparation

Umbilical cord (UC) is a rich source of rapidly proliferating mesenchymal stem cells (MSCs) that are easily cultured on a large-scale.

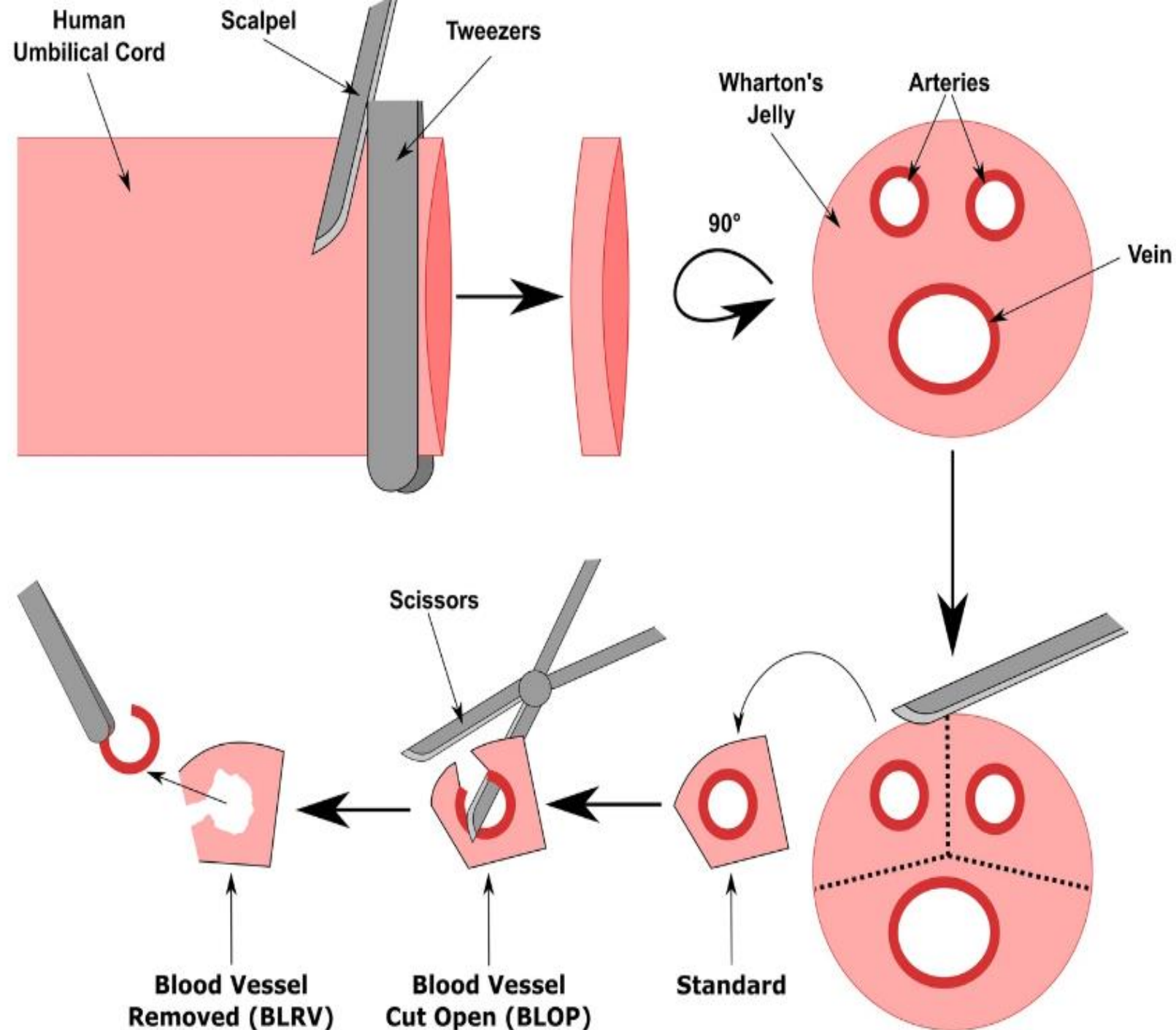
Schematic description for human umbilical cord preparation to improve the transduction of MSC-EM-initiating cells.

Tweezers (4 mm) were used to generate uniform slices by transversal dissection of the umbilical cord with a scalpel.

In the second step, the slices were cut between the blood vessels to ensure one blood vessel in each of three pieces (Standard).

One blade of the scissors was pushed into the blood vessel lumen and closed in the orientation that the second blade cut through the surface of the umbilical cord and opened the blood vessel (BLOP).

In the last step, the blood vessel was



Genicular artery embolization for treatment of knee osteoarthritis pain: Systematic review and meta-analysis

[Bedros Taslakian](#) ^{a,*}, [Larry E Miller](#) ^b, [Tarub S Mabud](#) ^a, [William Macaulay](#) ^c, [Jonathan Samuels](#) ^d, [Mukundan Attur](#) ^d, [Erin F Alaia](#) ^e, [Richard Kijowski](#) ^e, [Ryan Hickey](#) ^a, [Akhilesh K Sista](#) ^f

Objective

GENICULAR ARTERY EMBOLIZATION (GAE) IS A NOVEL, MINIMALLY INVASIVE PROCEDURE FOR TREATMENT OF KNEE OSTEOARTHRITIS (OA). THIS META-ANALYSIS INVESTIGATED THE SAFETY AND EFFECTIVENESS OF THIS PROCEDURE.

DESIGN

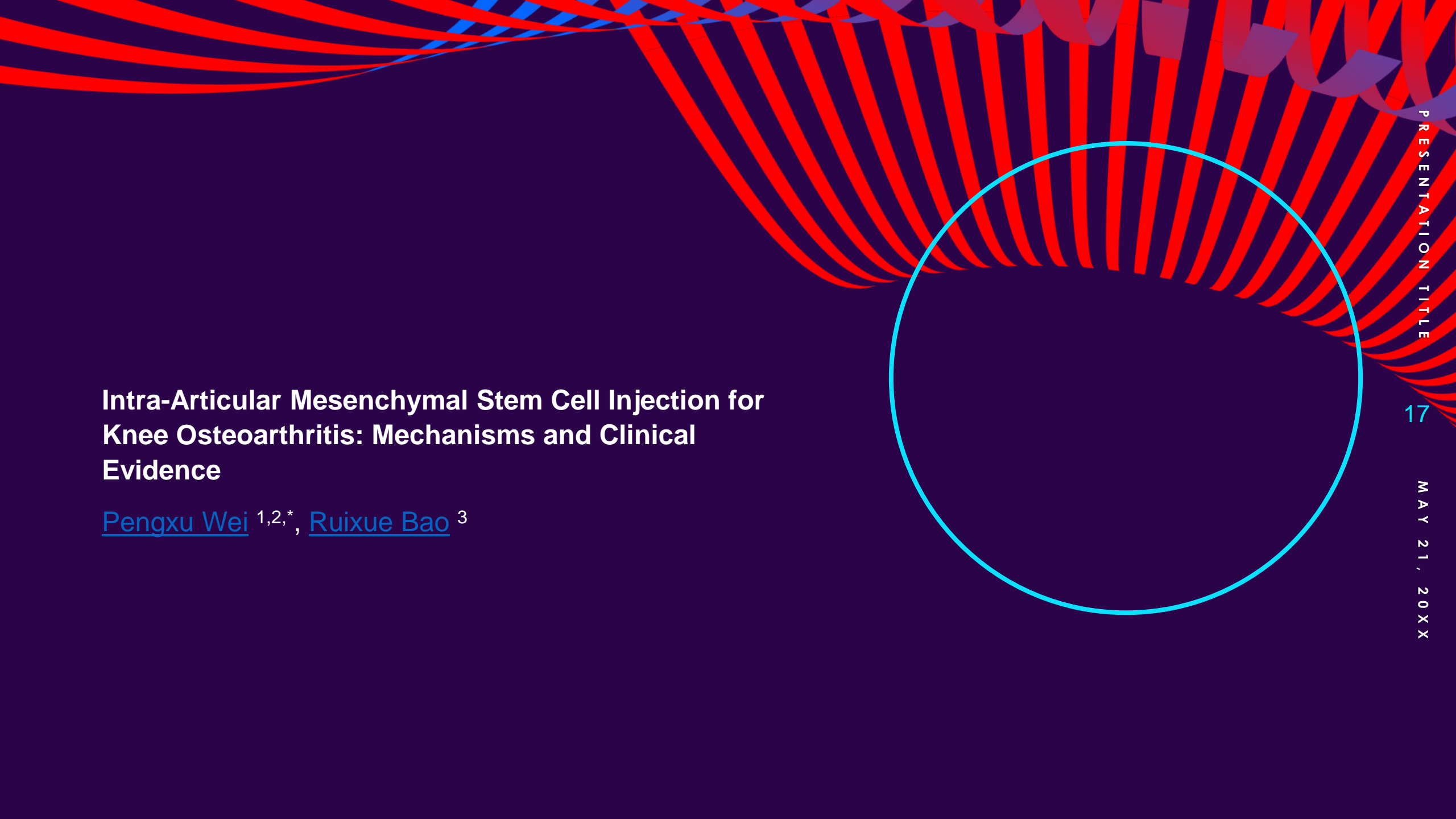
OUTCOMES OF THIS SYSTEMATIC REVIEW WITH META-ANALYSIS WERE TECHNICAL SUCCESS, KNEE PAIN VISUAL ANALOG SCALE (VAS; 0-100 SCALE), WOMAC TOTAL SCORE (0-100 SCALE), RETREATMENT RATE, AND ADVERSE EVENTS. CONTINUOUS OUTCOMES WERE CALCULATED AS THE WEIGHTED MEAN DIFFERENCE (WMD) VERSUS BASELINE. MINIMAL CLINICALLY IMPORTANT DIFFERENCE (MCID) AND SUBSTANTIAL CLINICAL BENEFIT (SCB) RATES WERE ESTIMATED IN MONTE CARLO SIMULATIONS. RATES OF TOTAL KNEE REPLACEMENT AND REPEAT GAE WERE CALCULATED USING LIFE-TABLE METHODS.

Results

In 10 groups (9 studies; 270 patients; 339 knees), GAE technical success was 99.7%. Over 12 months, the WMD ranged from -34 to -39 at each follow-up for VAS score and -28 to -34 for WOMAC Total score (all $p < 0.001$). At 12 months, 78% met the MCID for VAS score; 92% met the MCID for WOMAC Total score, and 78% met the SCB for WOMAC Total score. Higher baseline knee pain severity was associated with greater improvements in knee pain. Over 2 years, 5.2% of patients underwent total knee replacement and 8.3% received repeat GAE. Adverse events were minor, with transient skin discoloration as the most common (11.6%).

Conclusions

Limited evidence suggests that GAE is a safe procedure that confers improvement in knee OA symptoms at established MCID thresholds. Patients with greater knee pain severity may be more responsive to GAE.



Intra-Articular Mesenchymal Stem Cell Injection for Knee Osteoarthritis: Mechanisms and Clinical Evidence

[Pengxu Wei](#) ^{1,2,*}, [Ruixue Bao](#) ³

MSCs and their secretion may repair damaged issues via diverse mechanisms including chondrocyte differentiation, trophic effects, and immunomodulatory functions. A larger amount of injected MSCs may be expected to induce better effects.

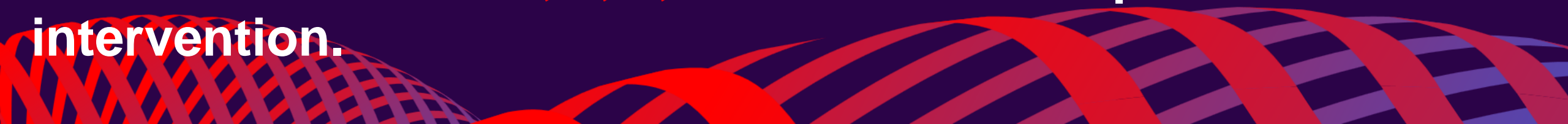
Inclusion criteria

- ❑ 1) **Symptomatic knee OA**: including people who have **daily pain** which has started at least 3 months before the visit
- ❑ 2) Patients in **mild to moderate stages of OA**
- ❑ 3) **Radiographic changes** should be observed in the specified knee

Exclusion criteria

- ❑ 1) **Intra-articular steroid**, Hyaluronic acid in the knee or Oral steroid during the last 6 months
- ❑ 2) **Local or systemic infection**
- ❑ 3) **Mori deviation** in the form of **valgus** more than 10 or **varus**
- ❑ 4) Simultaneous **ankle** or **hip** pain on the same side
- ❑ 5) Any manifestation of **secondary arthritis**
- ❑ 6) History of **recent malignancy**
- ❑ 7) **Autoimmune diseases**

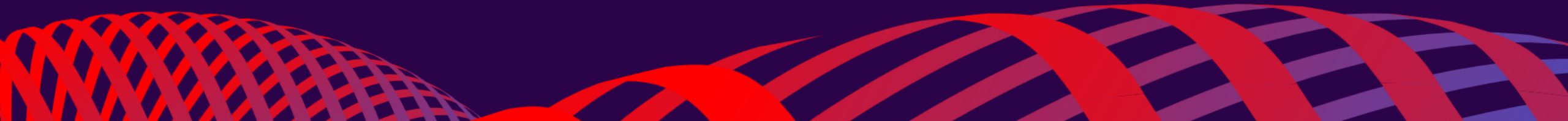
Material and method:

- out of 500 patients that were screened, **30 patients** (27 women and 3 men, mean age 61-year-old) were included in this study
 - The study was accepted by the University **IRB** and Ethic Committee
 - We selected the opposite knee as a control group, and initially, their **WOMAC** and **VAS** scores were similar.
 - The **WOMAC** score was recorded **one day prior to the intervention** and at **1, 3, 6, 9** and **12** months post-intervention.
- 

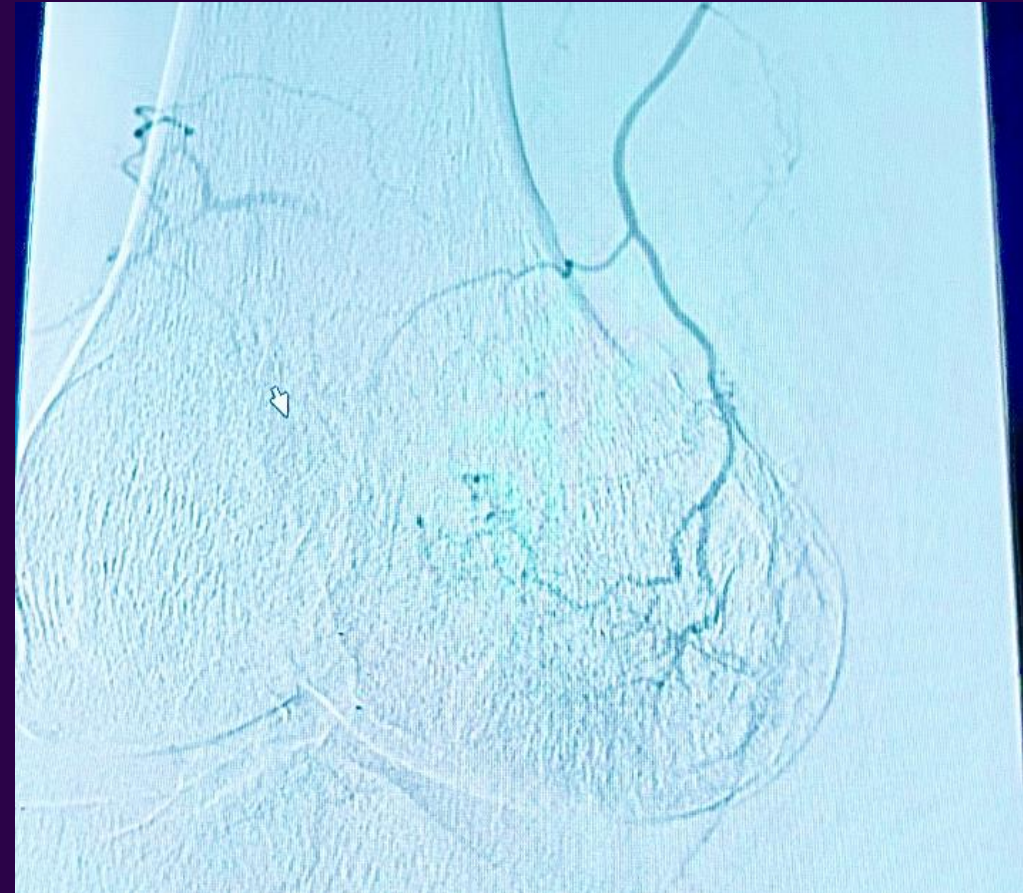
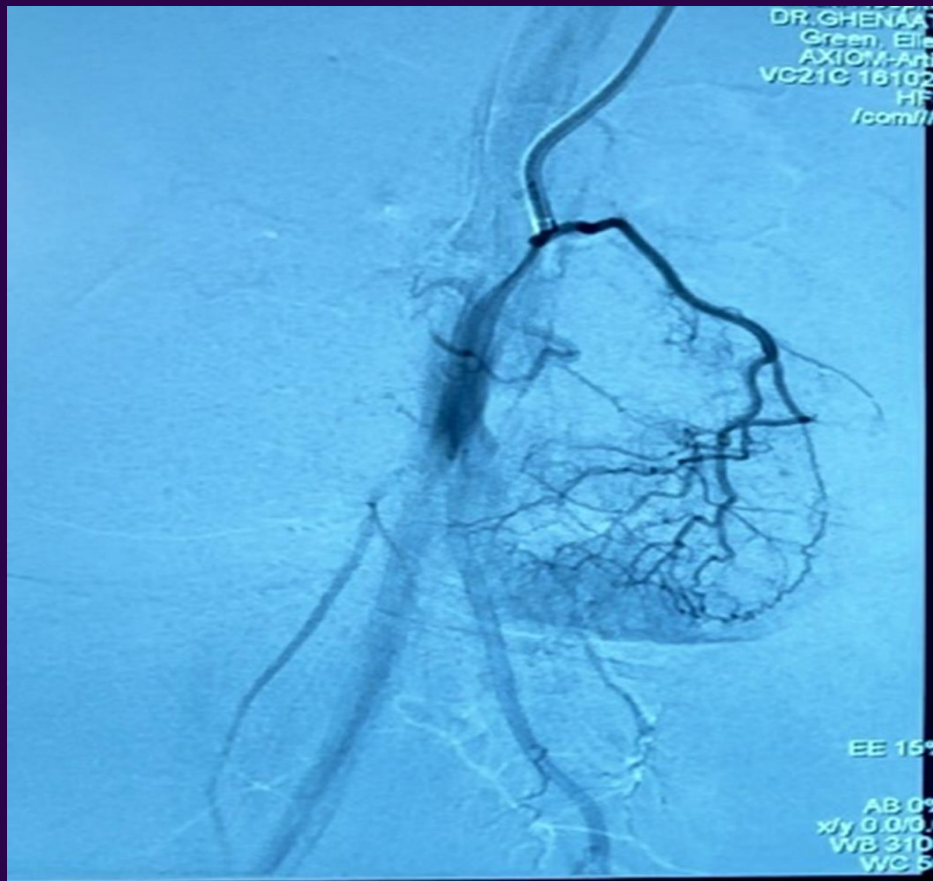
Material and method:

Technique of injection:

- Under Local anesthesia, the **contralateral** common femoral artery was accessed
- Using **JB1**, or **cobra** catheter, the **genicular artery** leading to arterial **blush** were selected
- Then the cells injected slowly
- 5 cc of distilled** water to wash the remain cells form the catheter



Material and method:



Angiographic pictures of the genicular artery and the blush

Material and method:

-Patient were admitted overnight and were all discharged the following day with this order :

RX/

1)**Cephalexin** 500mg q6 hours for 10 days(to prevent infection)

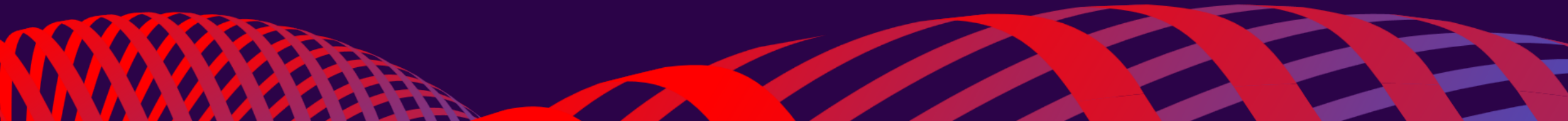
2)**Apixaban**5 mg BID for 2weeks(to prevent **DVT** because of immobilization)

-Patients were asked to avoid any **heavy activity** for a week



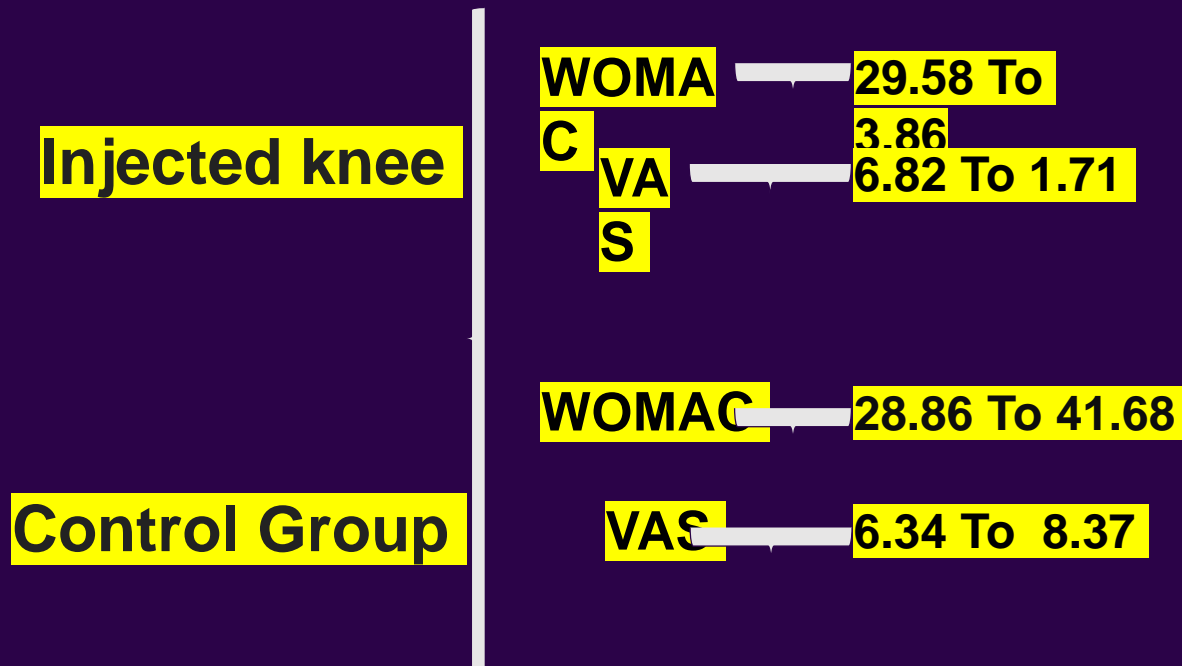
Results:

- Technical success was 100%
- No Immediate major complication
- 2 patients had some self-limited skin discoloration
- All the patients have successfully completed their clinical follow-up as scheduled.
- There was reduction of WOMAC score every 3 months and the most reduction was during the first month

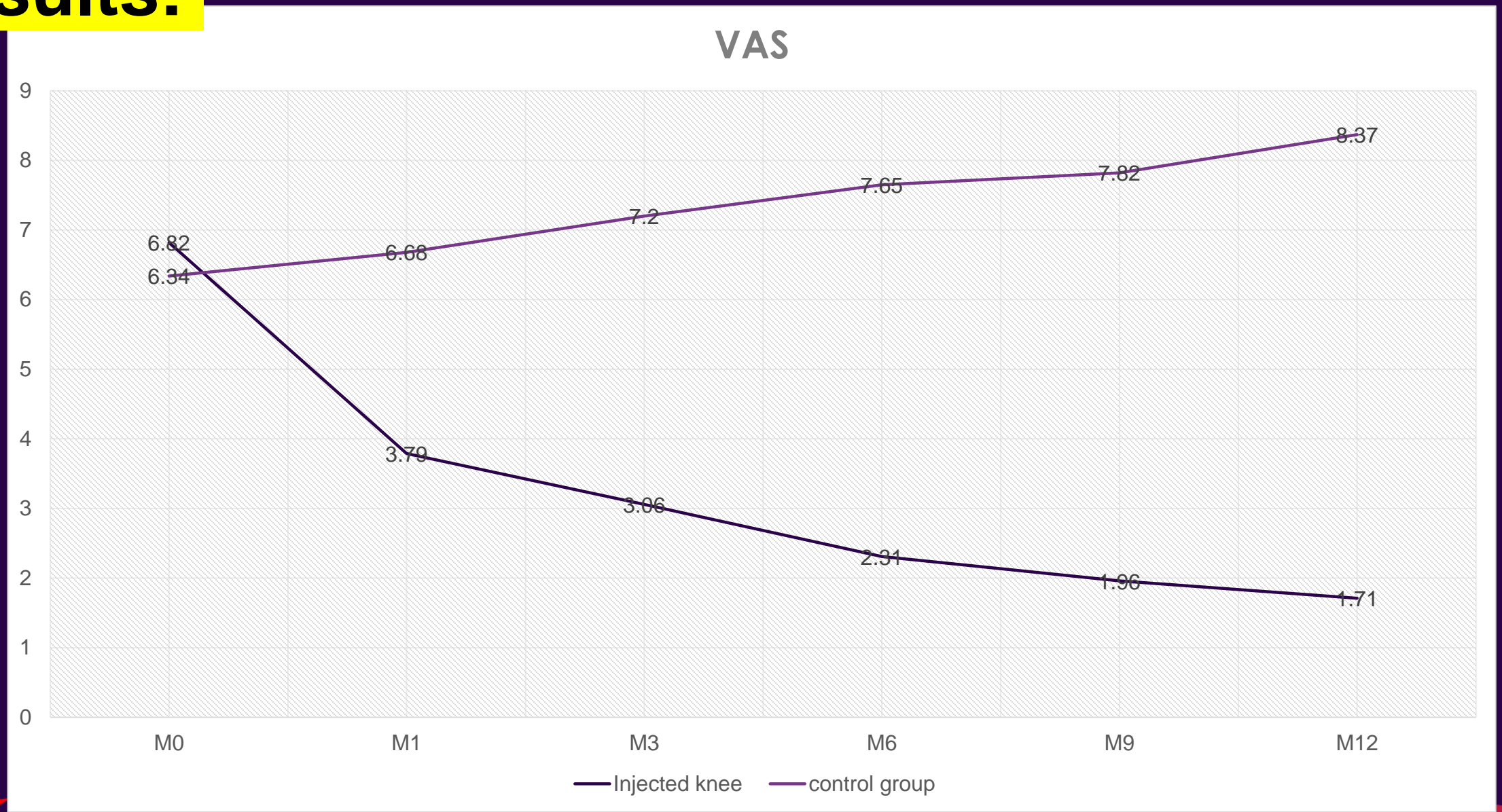


Results:

After 12 months, we observed **significant differences** in the final WOMAC and VAS scores between the two groups!

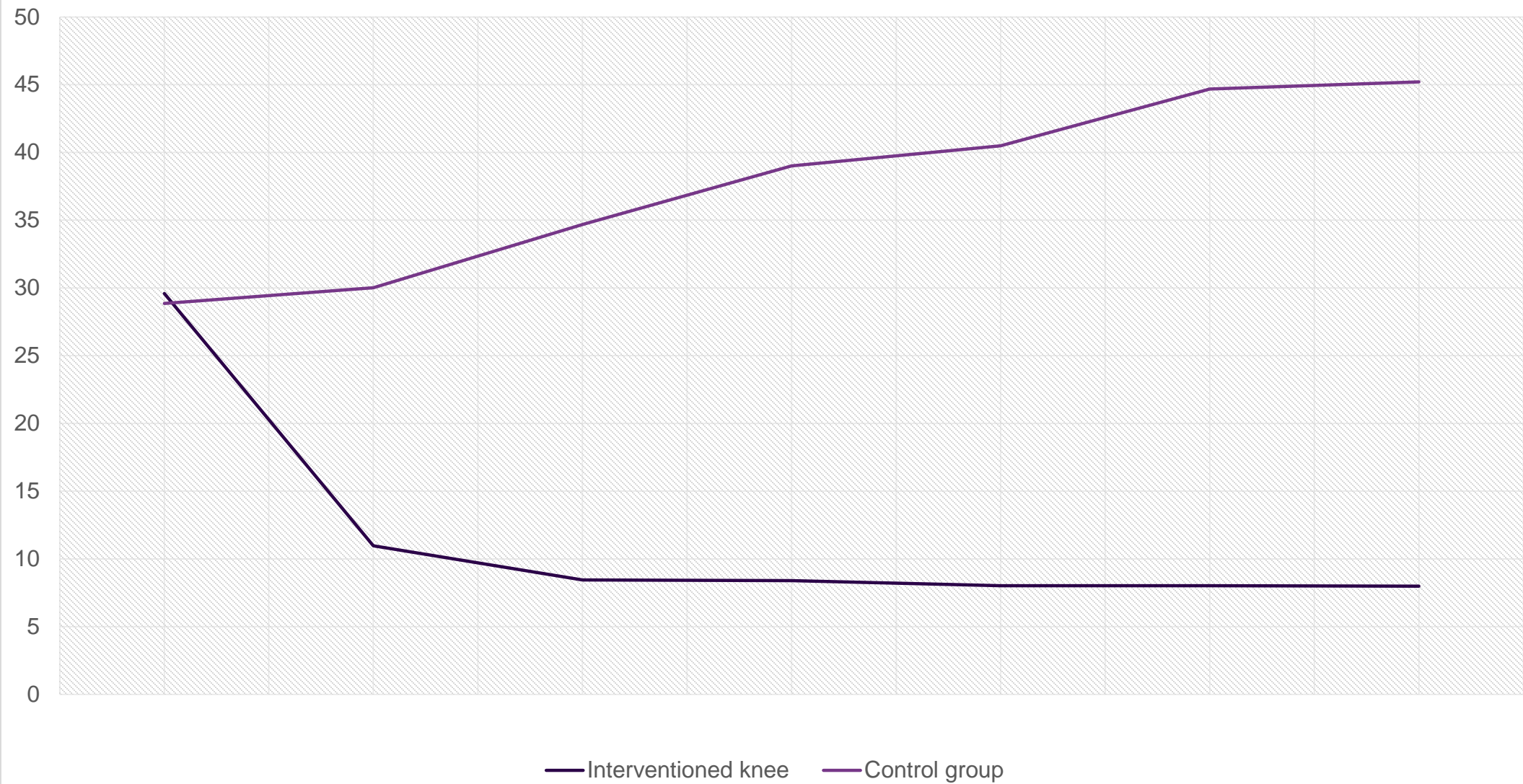


Results:



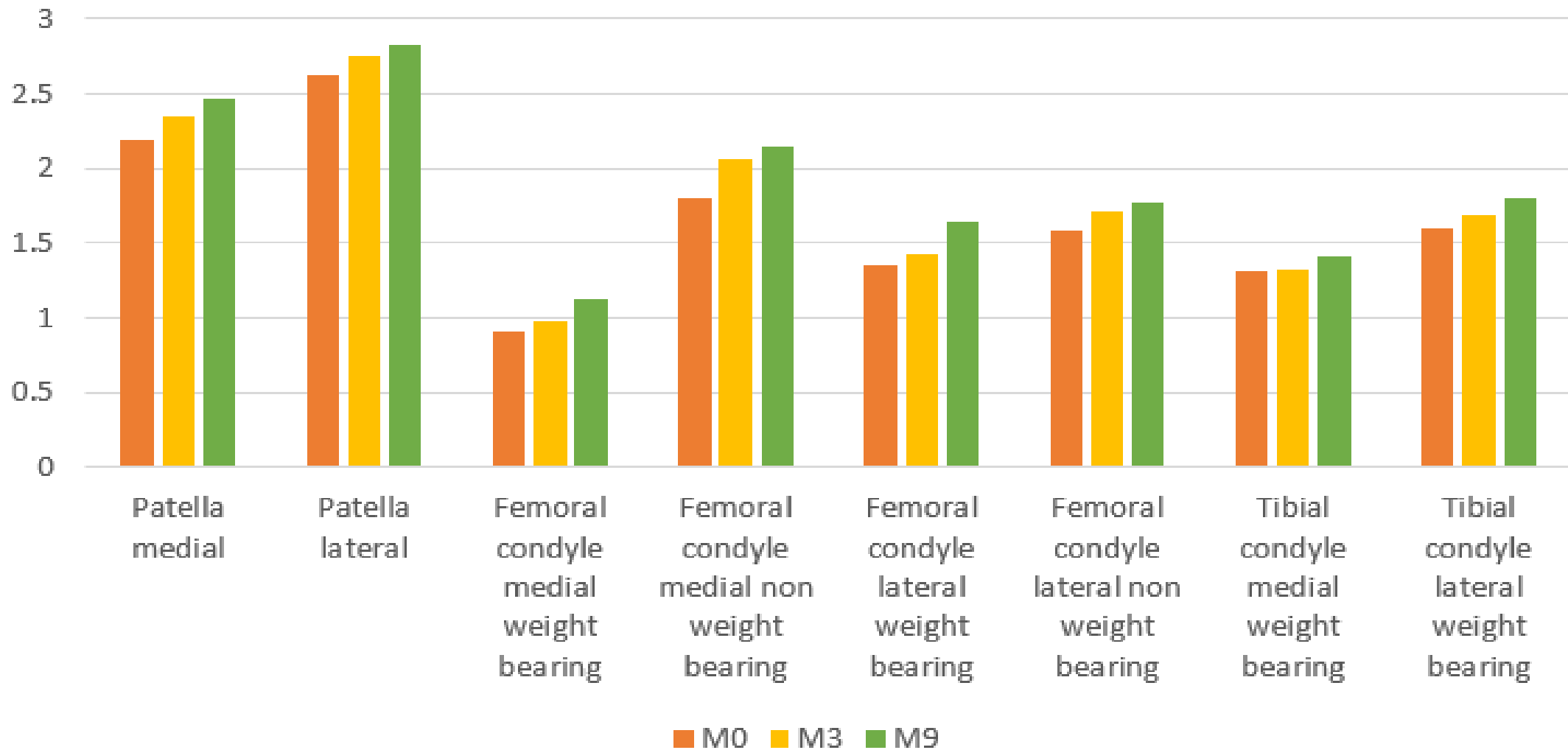
Result s:

WOMAC



Results:

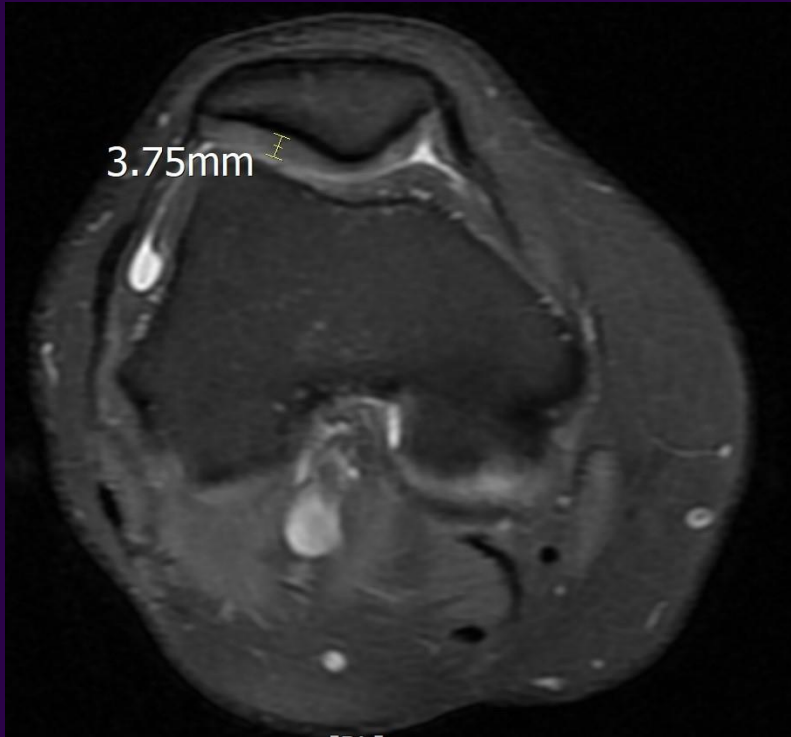
Thickness



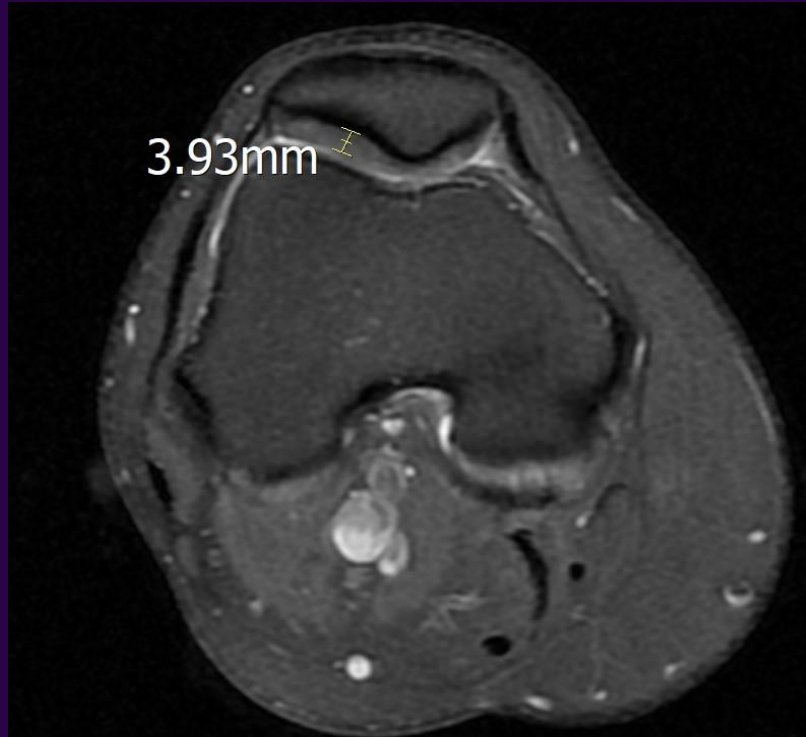
Results:

Average size (mm)	M0	M3	M9
Patella medial	2.19125	2.3475	2.4675
Patella lateral	2.6275	2.755	2.81875
Femoral condyle medial weight bearing	0.90125	0.9775	1.12625
Femoral condyle medial non weight bearing	1.8075	2.06	2.1475
Femoral condyle lateral weight bearing	1.36125	1.42125	1.6425
Femoral condyle lateral non weight bearing	1.58875	1.72125	1.77375
Tibial condyle medial weight bearing	1.305	1.31875	1.4075
Tibial condyle lateral weight bearing	1.59875	1.69	1.8075

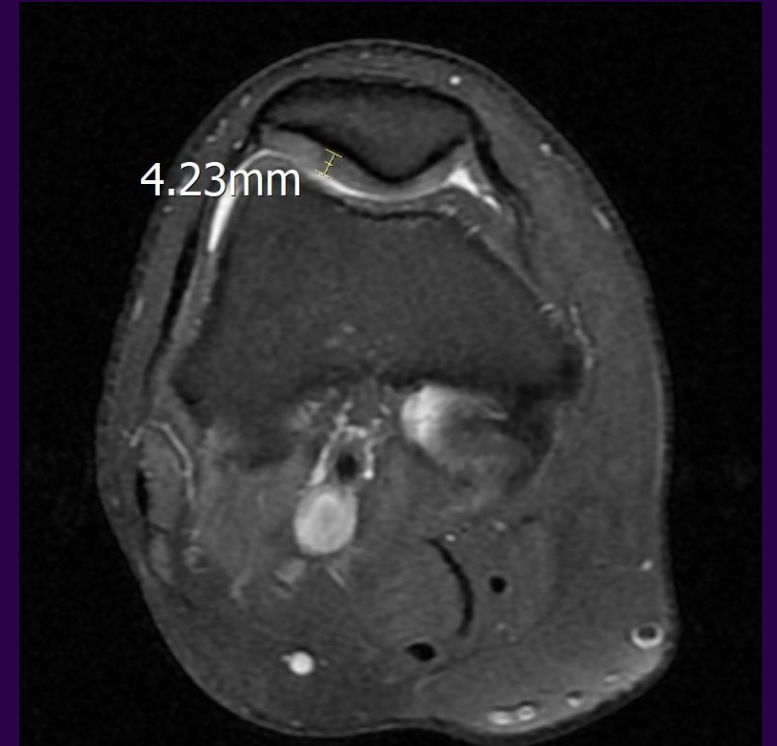
Results:



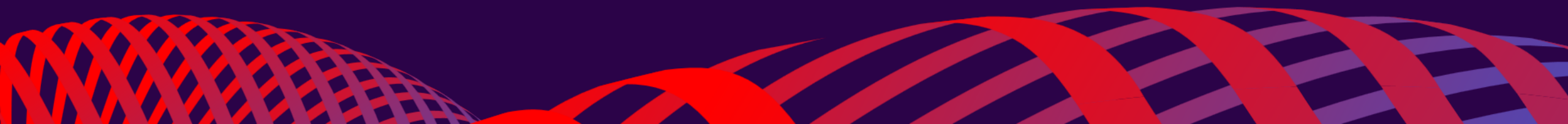
M0



M6

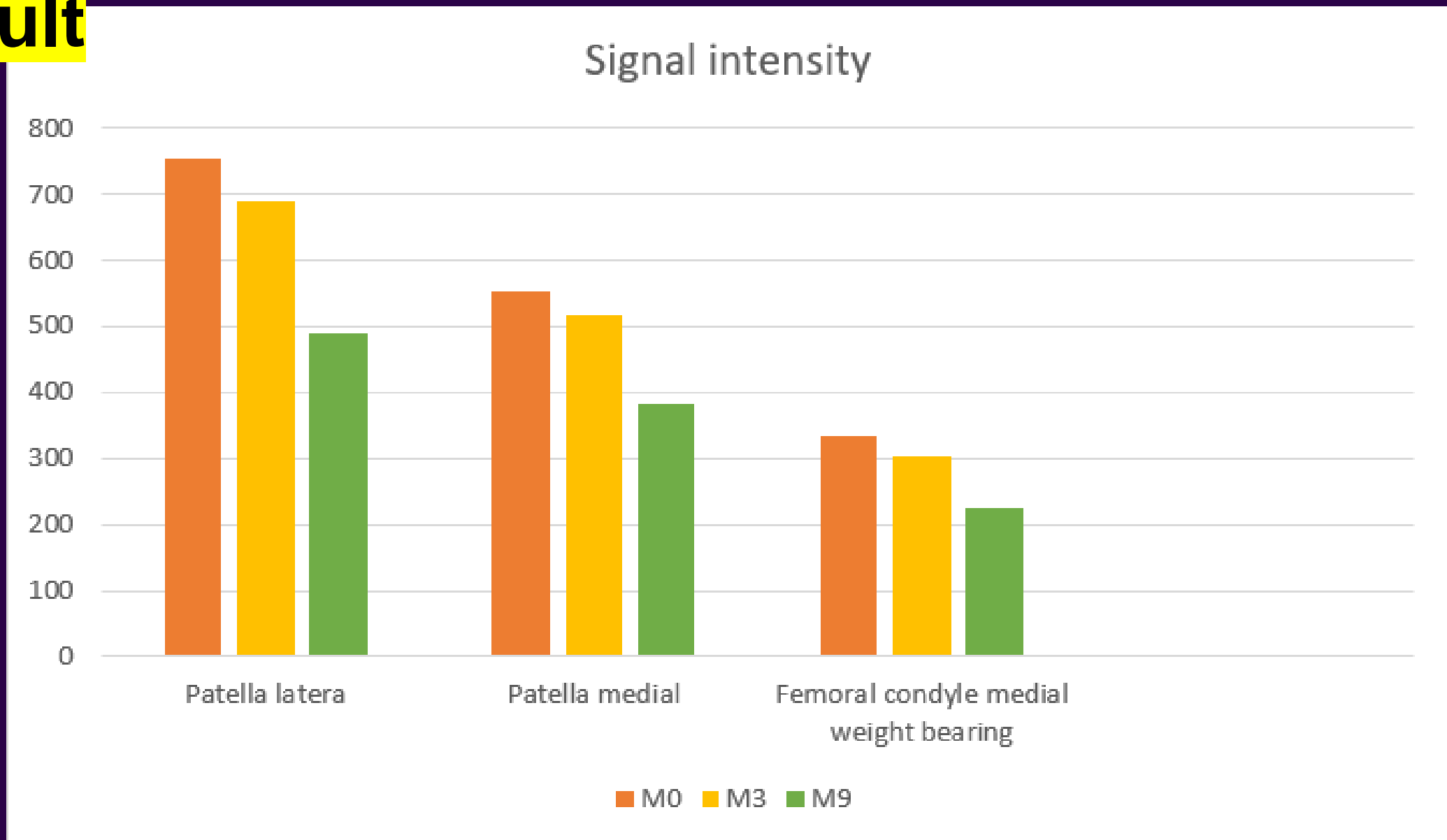


M12

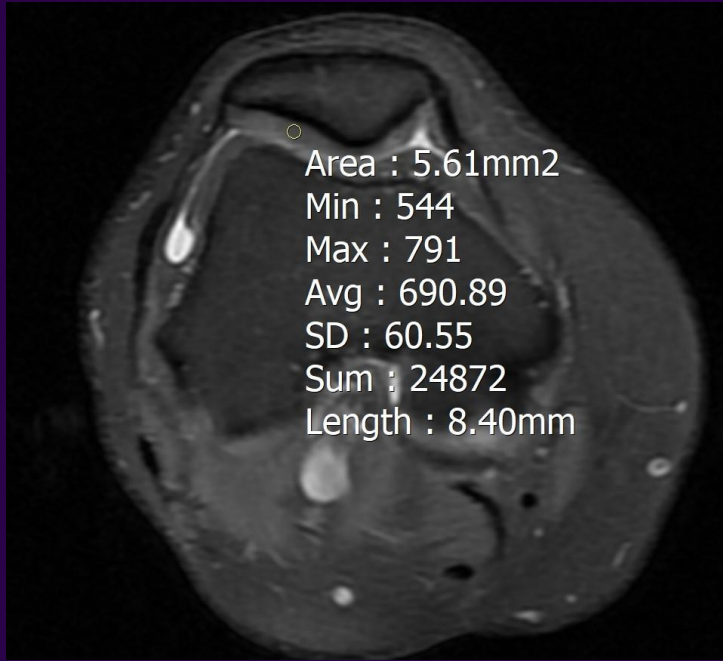


Result

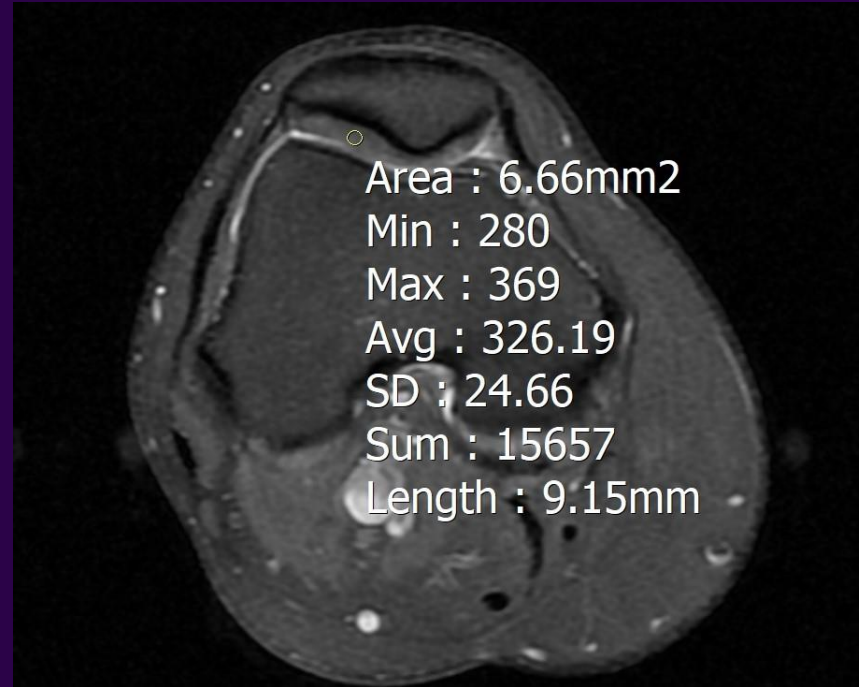
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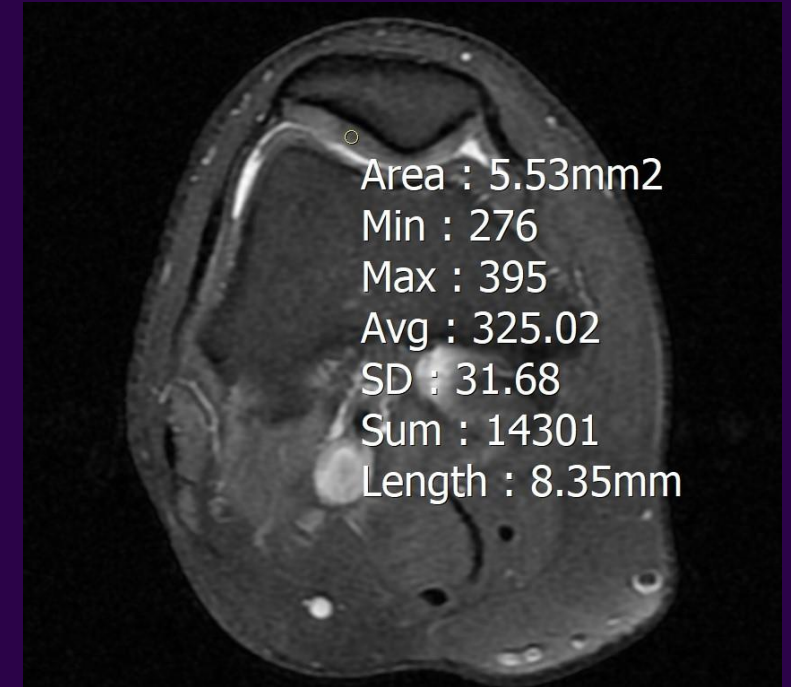
Results:



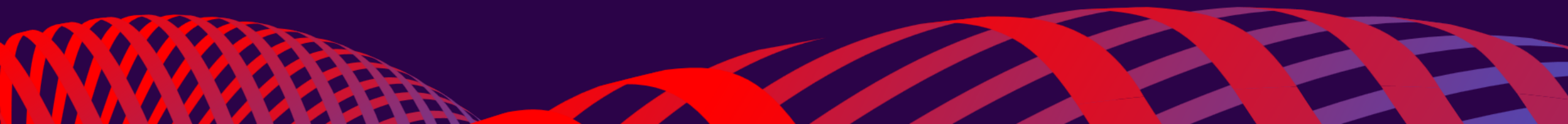
M0



M6



M12



Conclusion

n:

As the **WOMAC** score clearly indicates a **significant reduction in pain**, along with **notable improvements in all clinical symptoms**, observed in all patients after **12 months**, this procedure can be regarded as a substantial advancement in pain management for patients with knee osteoarthritis (OA).

Cartilage regeneration measured as **0.2mm in 9 months** which shows the potent ability of stem cells to differentiate to other tissues!



Discussion:

What we can confidently state is :
Intra-arterial MSCs injection in
Genicular artery, is

Safe

Effective

And can:

Decrease pain and WOMAC

VAS

Signal intensity

Possibly: Cartilage regeneration

“And also prevent progress of

OA”

Can stem cell injections treat knee osteoarthritis?

WILL MORTON

Dec 5, 2023



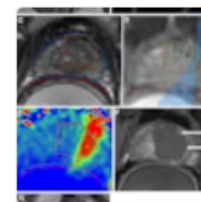
MRI shows that injections of mesenchymal stem cells can improve clinical symptoms of patients with knee osteoarthritis and may result in early cartilage regeneration, according to research delivered November 30 at RSNA in Chicago.

A group led by first author Hossein Ghanaati, MD, of Tehran University of Medical Sciences in Iran, presented a study demonstrating that the approach significantly reduced pain in patients, with MRIs suggesting regeneration of the affected knee cartilage.

Latest in MRI

MRgFUS shows promise in treating prostate cancer

MARCH 7, 2024



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CONFIRMATION OF PRESENTATION

Maedeh Rouzbahani

has kindly presented the Scientific Paper

275.6 / Treatment of knee osteoarthritis with genicular artery injection of mesenchymal stem cells: preliminary results

within the Scientific Paper Session "SP 275 – Updates in embolotherapy"
at the CIRSE 2023 in Copenhagen/DK.

Adam Hatzidakis

U.S

France
Denmark
Portugal

U.A.E



17TH ANNUAL

GEST 2023

GLOBAL
EMBOLIZATION
ONCOLOGY
SYMPOSIUM
TECHNOLOGIES

Best Scientific Abstract 2nd Place

Presented to:

Hussein Ghanaati

Abstract Title:

Treatment of knee osteoarthritis with genicular artery injection of mesenchymal stem cells: preliminary results

Jafar Golzarian

Dr. Jafar Golzarian
Active Founder
GEST

Marc Sapoval

Dr. Marc Sapoval
Active Founder
GEST

GEST 2023 held May 18-21, in New York City, New York



Simplifying Stem Cell Therapy for IRs: Exploring New Horizons in Interventional Radiology and Cell Therapy

Hossein Ghanaati¹ Maedeh Rouzbahani¹ 

BEST ORAL PRESENTATIONS

13:00 - 13:30



Hall C

LECTURE

Umbilical-Derived Mesenchymal Stem Cell Infusion Via Medial Circumflex Femoral Artery For Early-Stage Osteonecrosis Of The Femoral Head: A Pilot Study

H. Ghanaati (Iran)

Initial Periprocedural Experience Using Computer Assisted Vacuum Thrombectomy With Lightning Flash For The Treatment Of Pulmonary Embolism: A Subgroup Analysis Of The Strike-Pe Study

O. Ahmed (USA)

Randomized Embolization Trial For Neuroendocrine Tumors (Retnet)

G. El Haddad (USA)

Mechanical Thrombectomy In Lower-Extremity Deep Vein Thrombosis: Final 2-Year Outcomes From The Completed Clot Registry

A. Shaikh (USA)

ADDITIONAL STORY IDEAS

RSNA 109th SCIENTIFIC ASSEMBLY AND ANNUAL MEETING

In addition to the presentations described in RSNA news releases, the following presentations have been identified as particularly newsworthy. Times, locations and abstracts for the presentations can be found in the [online program](#).

Scientific Presentations

Mon. Nov. 27, #M6-SSNPM01-6, *Reducing Residuals of Contrast Agents in Wastewater: Preliminary Results of the GREENWATER Study*, Moreno Zanardo, Ph.D.

Tues. Nov. 28, #T7-SSNPM02-1, *Pink on Pink Aggression*, Ami Gokli, M.D.

Scientific Posters

#10308, *Quantitative Chest of Marijuana Use*, Ozgu Alkali, M.D.

#15454, *New Method of Knee OA Treatment with Intra Genicular Artery Injection of Mesenchymal Stem Cells*, Maedeh Rouzbahani

#14703, *Long-term Effects of a Breast Cancer Screening Programme on Breast Cancer Incidence and Mortality: Results from a Cohort of 2.6 million Women*, Amanda Dibden

#10060, *Enhancing Patient Communication with Chat-GPT in Radiology: Evaluating the Efficacy and Readability of Answers to Common Imaging-related Questions*, Emile Gordon, M.D.

#14525, *MRI Volumetric of Limbic System in Burnout Syndrome and Vigilant Attention in a Population with Nocturnal Shifts*, Christian Torres Ramirez, M.D.



CERTIFICATE OF APPRECIATION

The Board of Directors
hereby expresses appreciation to

Maedeh Rouzbahani

for being winning the Best Oral Presentation award for the abstract titled Umbilical-Derived Mesenchymal Stem Cell Infusion Via Medial Circumflex Femoral Artery For Early-Stage Osteonecrosis Of The Femoral Head: A Pilot Study

PAIRS 2025

held on Wednesday, 9th to Saturday, 12th of April, 2025
at the Dubai World Trade Center, Dubai - United Arab Emirates

Dr. Mohammad Badran
President of PAIRS

Dr. Farid Aladham
Chair of PAIRS 2025 Program Committee

Dr. Ayman Al Sibaie
Head of PAIRS 2025 Scientific Programs

Dr. Nader Sourour
Chair of PAIRS 2025 Neuro Program

Dr. Mohamed Ali Almarzooqi
Head of PAIRS Neuro Committee



J Vasc Interv Radiol

. 2025 Oct;36(10):1523-1531.e1.

doi: 10.1016/j.jvir.2025.05.031. Epub 2025 Jun 26.

Genicular Artery Embolization Using Mesenchymal Stem Cells for the Treatment of Knee Osteoarthritis: A Prospective Study

[Hossein Ghanaati](#)¹, [Maedeh Rouzbahani](#)², [Jafar Golzarian](#)³, [Shahriar Kolahi](#)⁴, [John David Prologo](#)⁵, [Madjid Shakiba](#)⁴, [Maryam Barkhordar](#)⁶, [Ahmadreza Jamshidi](#)⁷, [Ramin Sarami Foroushani](#)⁸, [Masud Yunesian](#)⁹, [Ali Ghanaati](#)¹⁰, [Ardeshir Ghavam Zadeh](#)⁶

Thanks for your attention

