

TEST REPORT 23 45 00056 **NOVASIN**

INTRADERMA

SEPHOLOS IN VITRO WOUND HEALING ASSESMENT

Conclusion

The test item "NOVASIN" exhibits significant wound healing activity at the concentration range 0.05 mg/ml – 10 mg/ml.

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Date: 07/07/2023

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FINALREPORT

In vitro wound healing assessment of Novasin

ID:23 45 00056

STUDY No.:2023/WH001

SEPHOLOC **STUDY DIRECTOR: CHARA ALMPANI**

STUDY COMPLETED ON 05.07.2023

SPONSOR

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TEST FACILITY

Unit of Dermatopharmacology and Cosmetology, National and Kapodistrian University of Athens, Faculty of Pharmacy Sector of Pharmaceutical Technology Panepistimiopolis, Zografou, 15784, Athens,



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| ELLONOPOULL | | |



WELKES

1 STUDY DETAILS

Study Director (Name and address)

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Study Schedule

Study Initiation Date:

Experimental Starting Date:

Experiment Completion Date:

Study Completion Date:

02.06.2023 19.06.2023 30.06.2023 05.07.2023



2 SUMMARY

Wound healing is a complex process that involves various cellular and molecular events. Impaired wound healing can lead to chronic wounds, which can have a significant impact on the quality of life of patients.

The test item, "Novasin", is a novel product that has been developed for the treatment of wounds. The scratch assay was conducted to evaluate the wound-healing potential of the test item compared to control groups. The assay measures the migratory capacity of cells across a scratch-induced wound *in vitro*, providing valuable insights into the potential therapeutic effects of the test item.

A consistent scratch was created across each monolayer of BALB/c 3T3 cells using a sterile pipette tip. The treated groups included Novasin-treated, positive control, and negative control groups. Images of the scratch were captured at regular intervals (0, 12 and 24 hours) and analyzed using image analysis software. The area of the scratch was measured to assess wound closure.

Novasin demonstrated a significant *in vitro* wound healing potential at all tested concentrations. The results suggest that Novasin could be a promising product for the treatment of wounds. Further studies are needed to evaluate the efficacy of Novasin *in vivo*. The findings of this study provide a basis for further research and development of Novasin as a wound healing product.

3 GUIDELINE

Currently there is no specific ISO (International Organization for Standardization) or OECD (Organisation for Economic Co-operation and Development) guideline that is dedicated to the *in vitro* scratch assay for wound healing. The protocol has been established based on literature ¹⁻⁵.

4 MATERIALS AND METHODS

4.1 Test item information

(As furnished by the Sponsor)

Product Amount:

100 ml

Product type:

Description:

200 111

liquid

Wound healing agent

4.2 Identity of the test item

The characterisation detail of test item is provided by the study Sponsor. This will be included in the raw data. The responsibility for the correct identity and purity of the test item rests with the Sponsor. The test item will not be authenticated at the test facility.



4.3 **Test Medium and Chemicals**

Analytical or better grade chemicals were used in the study.

<u>1.</u>

Name: Bovine Calf Serum Lot: 80914215

Bottle #: 0246

Supplier: ATCC (MANASSAS, VA)

<u>3.</u>

Name: DMEM high glucose with stable Glutamine with Sodium pyruvate with 3.7 g/L NaHCO₃, Sterile filtered

Lot:9880822

Supplier: PAN BIOTECH, Germany

<u>5.</u>

KEGNUOELS TOU Name: Penicillin - Streptomycin solution, sterile filtered

Lot: M10I056

UN-NR: 2811

Supplier: PAN BIOTECH, Germany

<u>2.</u>

Name: Trypsin/EDTA (0.05% / 0.02%) in PBS Lot no: 1830222 Supplier: PAN BIOTECH, Germany

4.

Name: DPBS (10x) with Calcium and Magnesium SEPHOLOG Lot: 5220321 Bottle #: 0246 Supplier: PAN BIOTECH, Germany



4.4 Test system

| Cell line | BALB/3T3 clone A31 |
|-----------------|---------------------|
| Organism: | Mus musculus, mouse |
| Cell type: | Fibroblast |
| Tissue: | Embryo |
| Supplier: | ATCC |
| Passage number: | 80 - 85 |

4.5 Test Item Preparation

The test item was treated according to ISO 10993-12:2012, (Biological evaluation of medical devices -Part 12: Sample preparation and reference materials) by the process of dilution in DMEM enriched with bovine calf serum (BCS) (1%). Diluting the test item in DMEM with low levels of serum provides a suitable culture medium that supports cell growth, maintains cell phenotype, and minimizes potential interference, enabling the accurate evaluation of cell migration and wound healing processes.

Eight dilution series concentrations were tested: 0,05 mg/mL, 0,1mg/mL, 0,5 mg/mL 1mg/mL, 5mg/mL, 10mg/mL, 50mg/mL and 100mg/mL. Each concentration was tested in triplicates in two separate plates.

4.5.1 Method

The *in vitro* scratch assay, commonly known as the wound healing assay, is predicated upon the controlled generation of a cell-free gap within a cultured cell monolayer. The main objective of this assay is to investigate cellular migration and wound healing processes in an experimental setting. The procedure commences with the establishment of a confluent cell monolayer on the surface of a culture. Subsequently, a precise and linear scratch is created within the monolayer, achieved using a sterile tool, typically a pipette tip. Following the incision, the culture dish is returned to the incubator to facilitate cell migration and gap closure. The progress of cell migration is meticulously monitored and recorded at predefined intervals using microscopy. Through the assessment of the extent of gap closure over time, this assay furnishes valuable insights into cell migration rates, proliferation, and the impact of various stimuli or interventions on wound healing processes *in vitro*.

4.5.2 Test Conditions

Cells from frozen stock cultures were seeded in culture medium at an appropriate density at 37°C and 8% CO₂ (InCO₂ Incubator, Memmert), in Dulbecco's modified Eagle's medium (DMEM;high glucose) supplemented with 10% Bovine Calf Serum (BCS) and 1% penicillin-streptomycin (10,000 unit /ml). and subcultured at least twice before use in the assay. Cells yielded from 100 mm culture dishes (Greiner, Germany) grown to 90% cell confluency (\sim 2.8–3.0 × 10⁶) were seeded at a density of 5 × 10⁴ per well in four 24-well plates (SPL, Korea) and cultivated for approximately 24 h until confluency. Culture medium was aspirated and replaced with PBS. A linear scratch of consistent width was created across the center of each well using a yellow pipette tip, exerting gentle pressure. Following the scratch, the wells were gently washed with culture medium to remove any detached cells or debris. Subsequently, 8 test item concentrations diluted in culture medium supplemented with BCS (1%) were added to the designated wells. A negative control consisting of DMEM supplemented with BCS



(1%) and a positive control consisting of DMEM supplemented with BCS (15%) were added in triplicate to each plate. The plates were incubated until wound closure (24h). Cell migration was evaluated at 12h and 24h using a microscope (Axiovert 25 ZEISS, Switzerland) and ImageJ software.

5 DATA COMPILATION

5.1 Qualitative evaluation

Cells were examined microscopically. Changes in general morphology, vacuolization, detachment, cell lysis and membrane integrity were recorded. Cell migration was evaluated and specific timepoints were selected for acquiring images for quantitative evaluation (0h, 12h, 24h) (Annex I).

5.2 Quantitative evaluation

The wound area (A) of each well has been quantified in pixels with ImageJ software for the three timepoints. Wound closure rate has been calculated for the two-time intervals (0h – 12h, 12h-24h) according to the following formula:

Wound Closure % = $(A_{n-1} - A_n / A_{n-1}) * 100$

where n: 0h, 12h, 24h

Mean and Standard Deviation have been calculated for the wound closure rates for each tested concentration, the negative and the positive control (Annex II).



6 RESULTS AND DISCUSSION

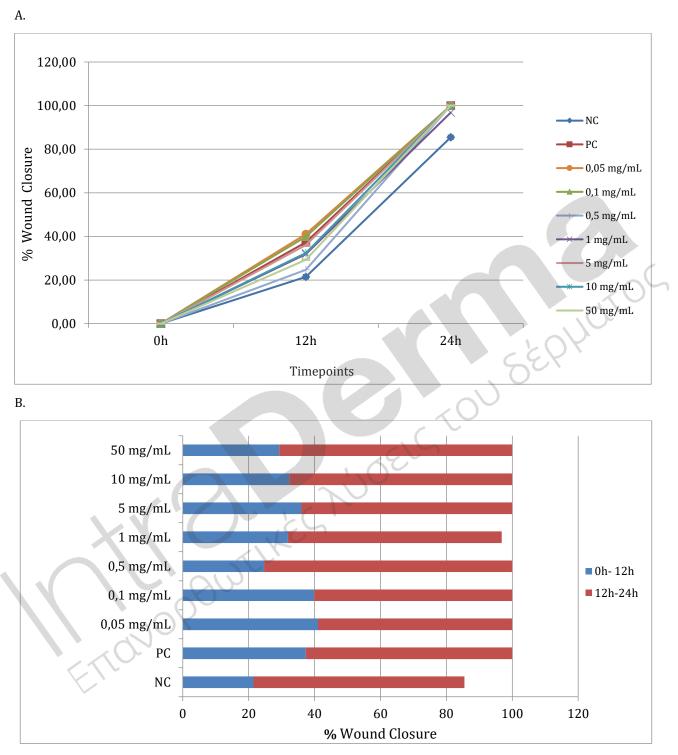


Figure 1: Wound closure rates for each test item concentration, positive (PC) and negative control (NC) for two-time intervals (0h-12h, 12h-24h). Each wound area has been measured in pixels using ImageJ software. Six wells have been assessed per concentration and controls.

Figure 1 indicates that test item significantly increased the rate of wound closure in all tested concentrations. More specifically, at the time interval (0h -12 h) most potent regarding migration rates are the concentrations 0.05 mg/ml and 0.1 mg/ml, exhibiting 41% and 40% respectively. In comparison, wound closure rates were 21% for the negative and 37% for the positive control.



Regarding the remaining concentrations, all exceed the negative control wound rate at this time interval. After 24 hours of incubation, all tested concentrations were effective in promoting wound closure, whereas negative control exhibited 85% wound closure.

Caution should be exerted regarding the concentrations (50 mg/ml) and (100 mg/ml). Due to the observed cytotoxicity, the wound healing activity of the test item at these concentrations could not be accurately assessed or appreciated. Regarding (50 mg/ml), the wound closure rate has been assessed, though alterations to morphology, vacuolization and detachment could be observed. On the contrary, the wound closure rate for the concentration (100 mg/ml) was not possible to be determined and for that reason is not presented in Fig.1.

Jules NUCELS



7 CONCLUSIONS

Test item

NOVASIN (ID: 23 45 00056)

Exhibits significant wound healing activity at the concentration range **0.05 mg/ml – 10 mg/ml**.

The most pronounced effect was observed at the two lowest concentrations tested (0.05 mg/ml & 0.01 mg/ml).

Further research is necessary to determine the optimal dose *in vivo*, to ensure the overall efficacy and tolerability of **Novasin** as a wound healing agent.



8 ARCHIVING

In the archives of Kapodistriaki Dermatofarmakeutiki P.C the following documentation will be archived for 10 years:

- raw data, secondary data
- final report with any amendment

Unused test item will be kept at the testing facility for 90 days after submission of the final report, unless otherwise specified by the sponsor.

9 REPORT DISTRIBUTION

The final report (two original copies) will be distributed as follows:

Test Facility Archive: Copy of the signed final report

Sponsor:

One signed final report in original



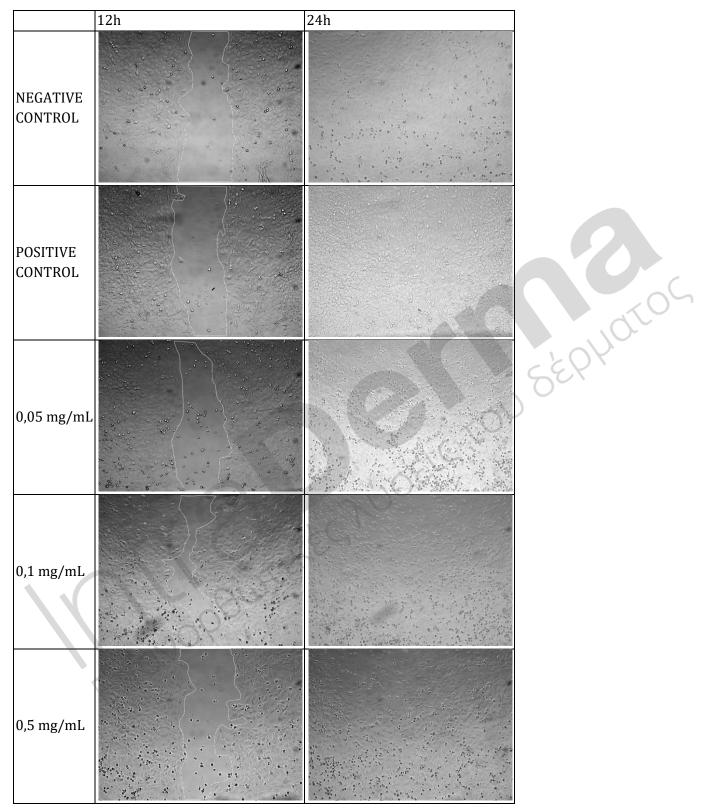
10 REFERENCES

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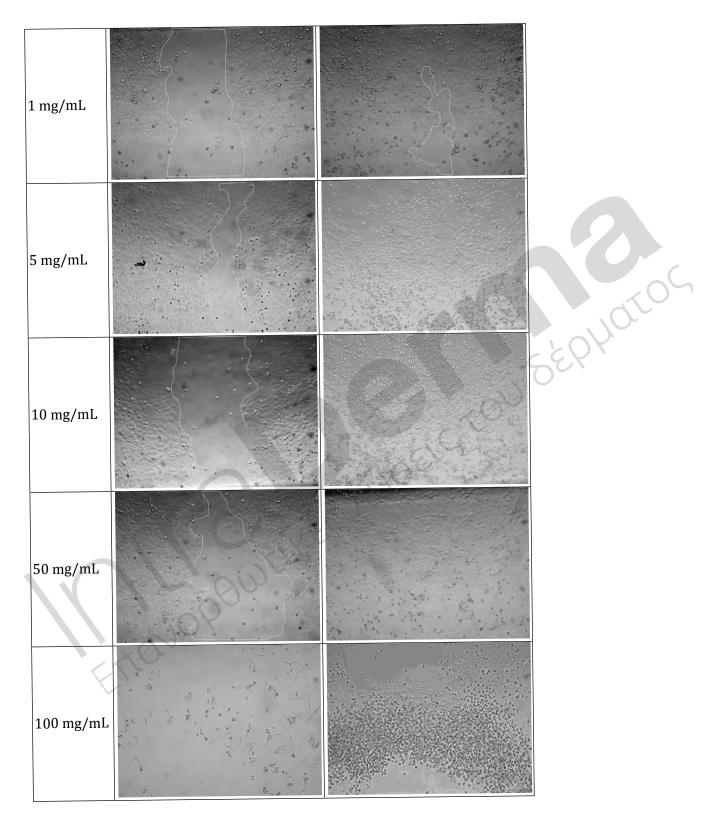
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ANNEX I









ANNEX II

Wound Closure Rate (%)