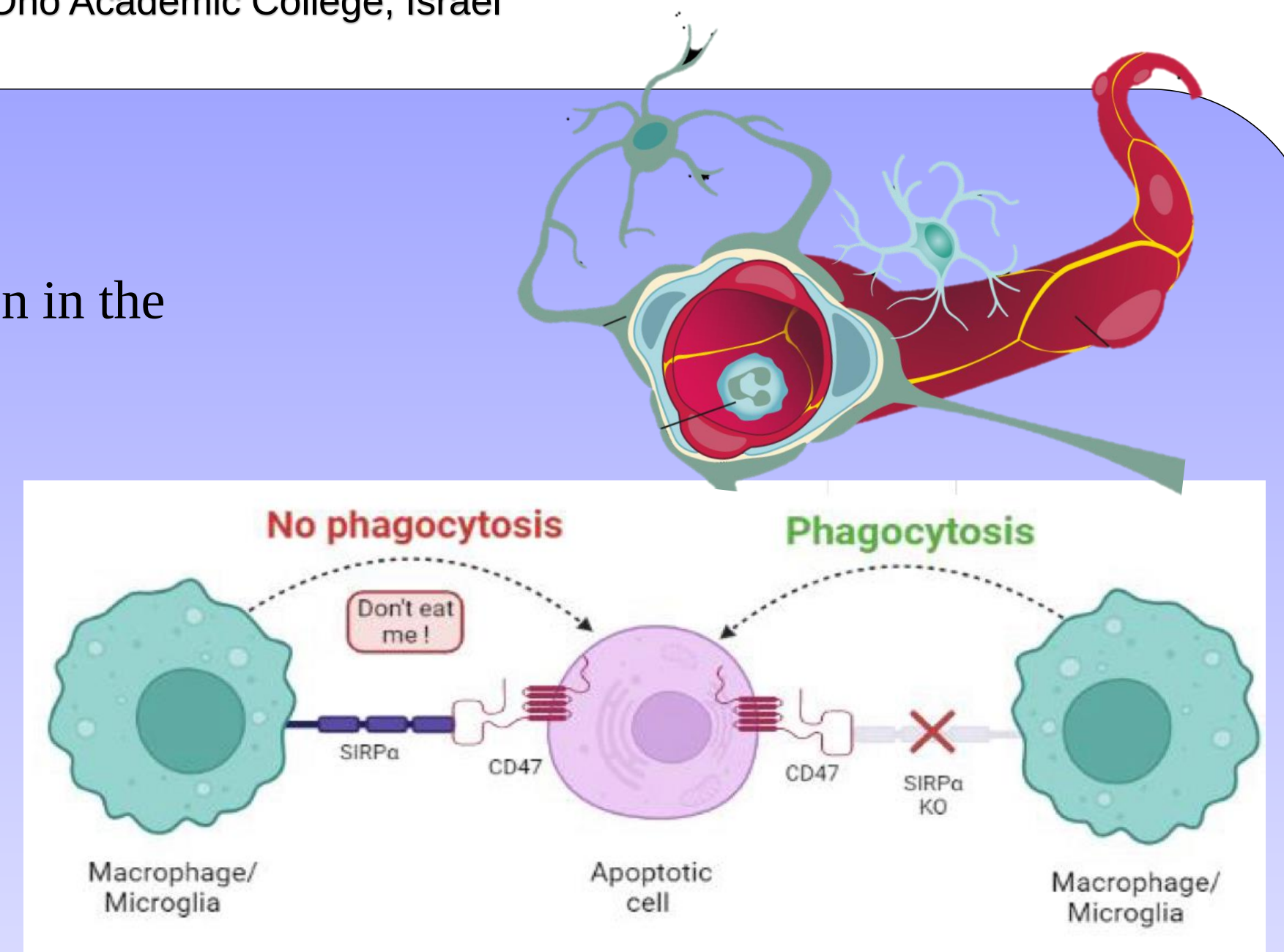


Introduction

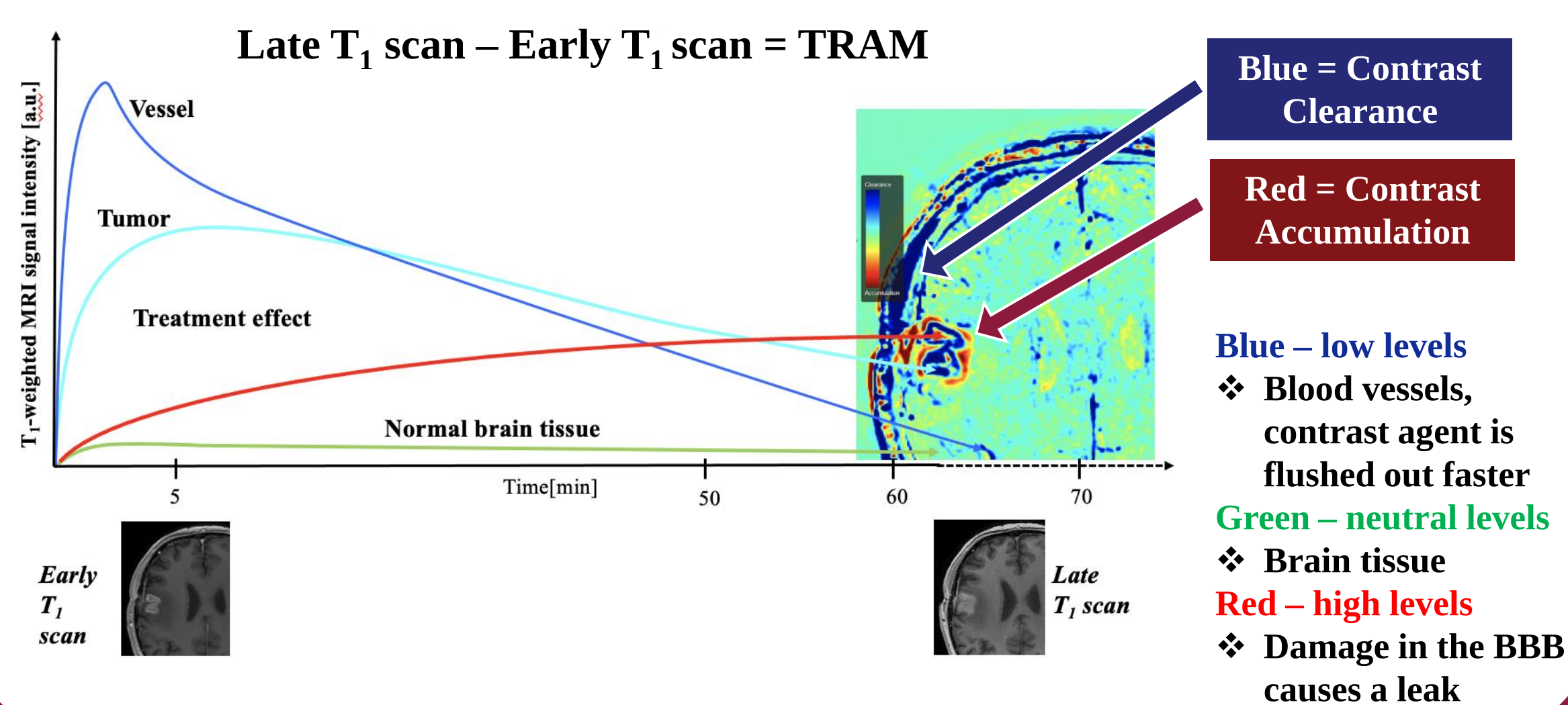
- ❖ **Traumatic Brain Injuries (TBI)** are the leading cause of death and disability in young adults and children in the developed world (Shlosberg et al., 2010)
 - ❖ **The Blood-Brain Barrier (BBB)** can be damaged and leak post TBI (Shlosberg et al., 2010)
 - ❖ **Microglia cells** are recruited as part of the brain's neuroinflammatory response (Cherry et al., 2014)
 - ❖ **Type M1:** upregulates inflammation, beneficial but can become harmful when out of control
 - ❖ **Type M2:** downregulates inflammation
 - ❖ **Sirp- α receptor:** prevents type M2 microglia from using phagocytosis to “eat” the body's own cells.
 - ❖ **Sirp- α KO** $\rightarrow$ Upregulation of phagocytosis $\rightarrow$ M1 microglia homeostasis $\rightarrow$ Improved healing (Elberg et al., 2019)
- 
- Macrophage
Microglia



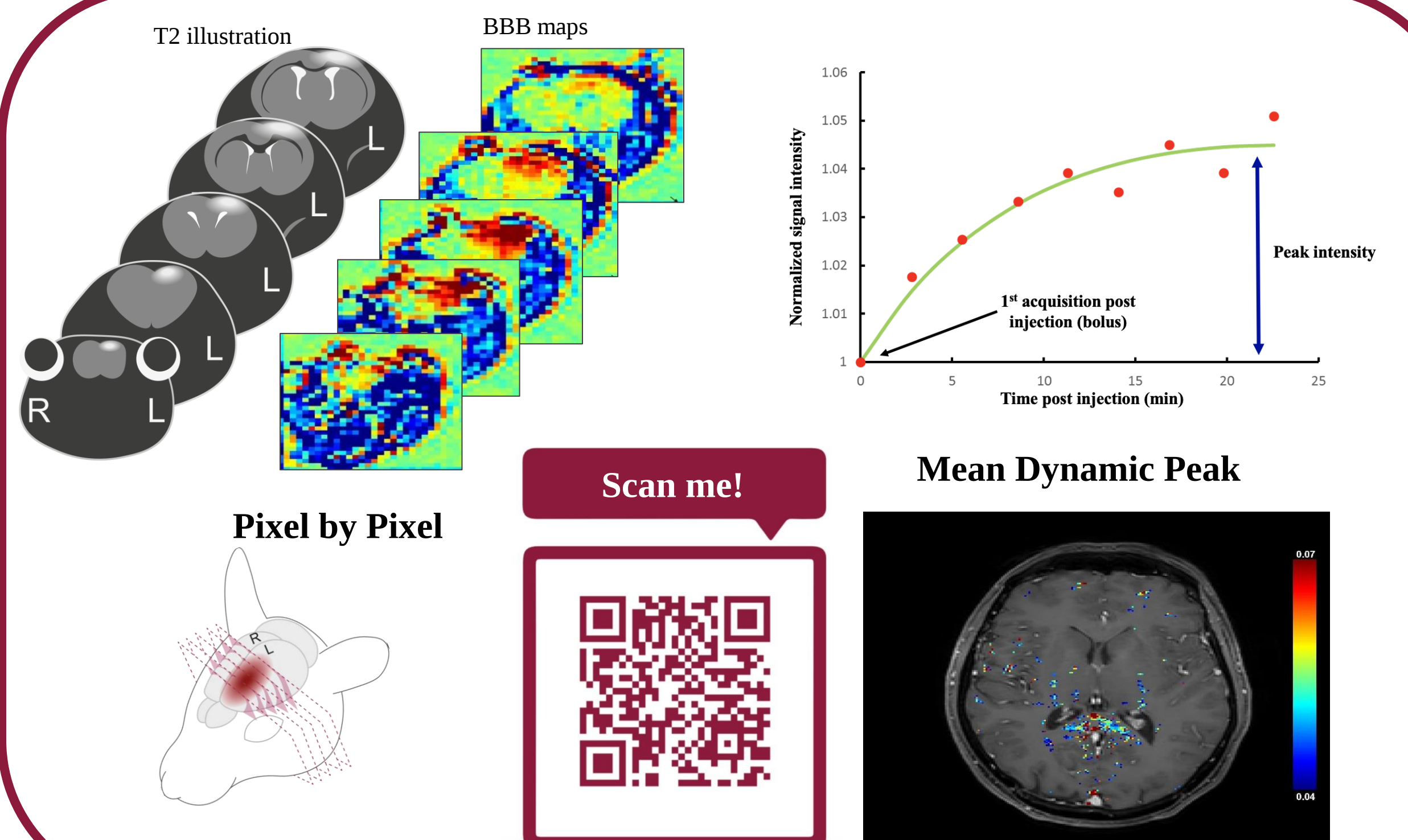
Hypothesis

Sirp- α KO has a beneficial effect on the post-TBI permeability of the Blood Brain Barrier.

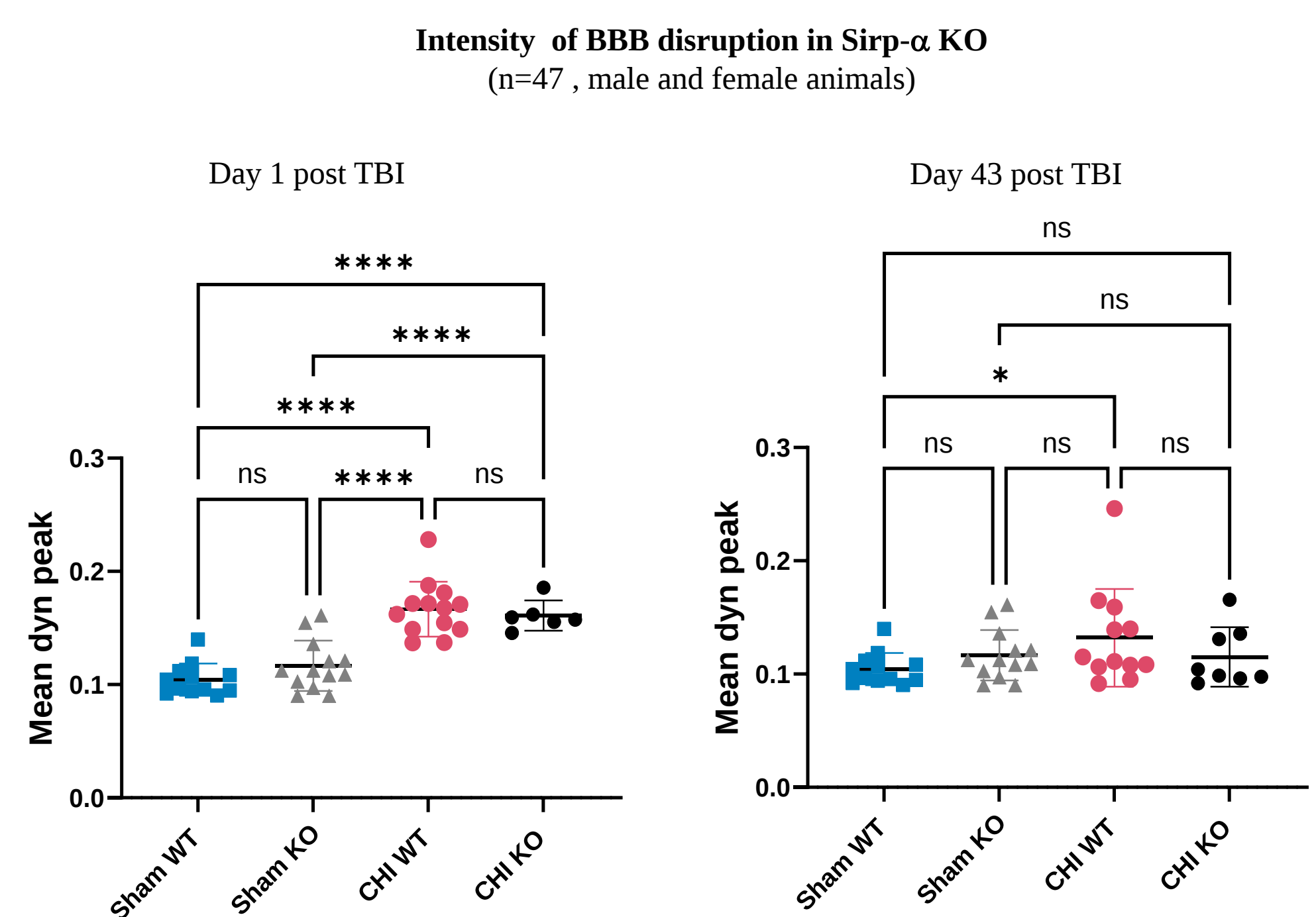
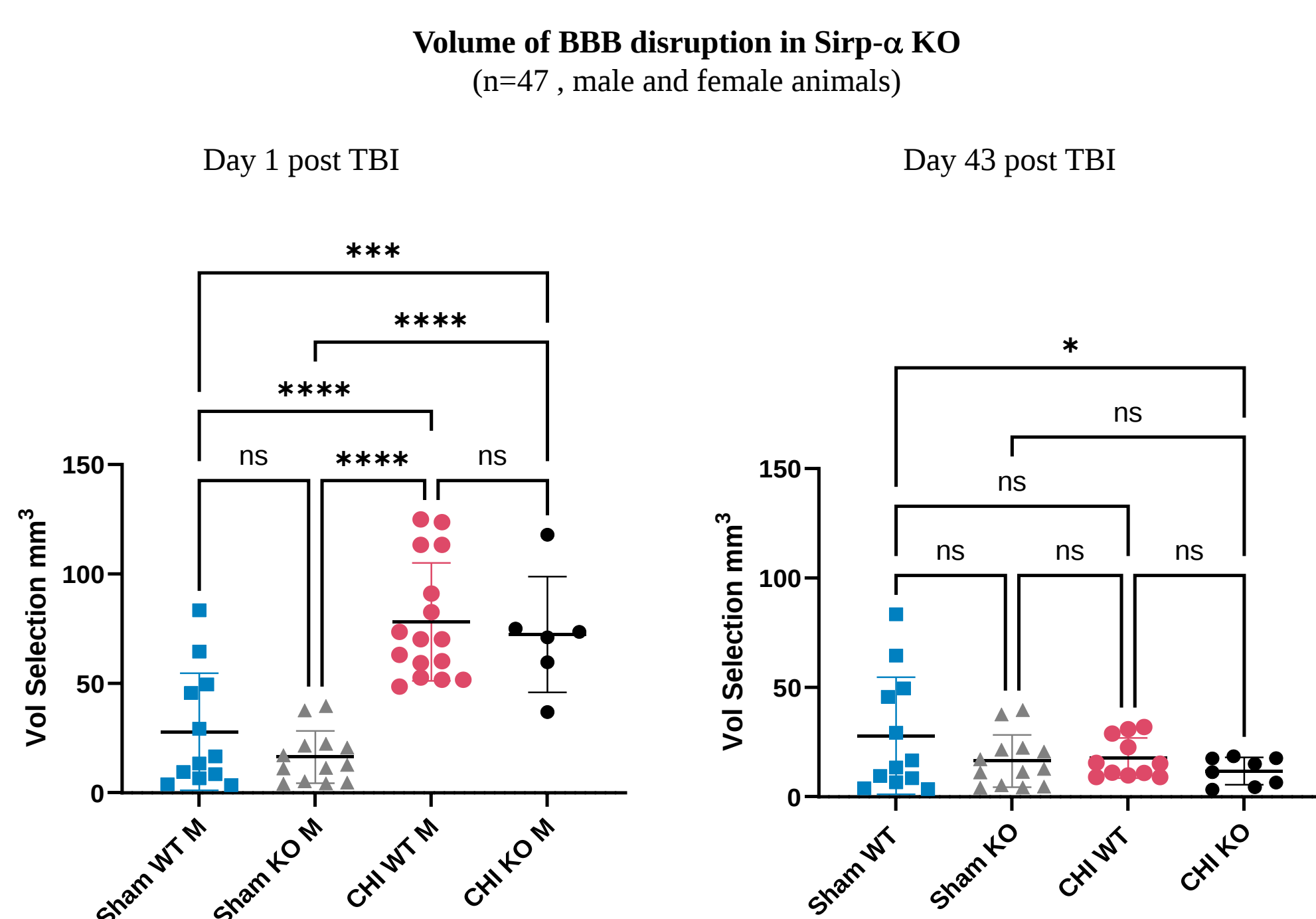
1 Methods I - Delayed Contrast MRI



2 Methods II - Analysis



Results



Conclusion

Sirp- α KO has no protective properties according to volume measurements.

Sirp- α KO might benefit healing
as shown by the non-significant
difference on day 43 in the intensity
measures between the KO groups.

A limitation was caused by the low number of animals in the CHI-KO group.

Medical Applications

Use of delayed contrast MRI can improve TBI detection

BBB leakage often goes unnoticed in emergency room patients due to limitations of imaging methods.

Prevention of neurodegenerative diseases and other long-term consequences of TBI is achievable through more effective treatment methods.