

# Journal of Regenerative Medicine

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### Perspective

## Clinical Significance and Perception on Various Aspects of Regenerative Medicine

**Camden Peterson\*** 

\*Corresponding author: Camden Peterson, Department of Tissue Engineering, School of Advanced Technologies in Medicine, Tehran University of Medical Sciences, Tehran, Iran, E-mail: Peterson76@razi.tums.ac.ir

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#### Introduction

Regenerative medicine (RM) offers effective therapeutic solutions that are seldom taken into account in routine clinical settings, from tissue engineering (TE) to cell therapy. Without extensive and rigorous experiments, physicians, surgeons, clinicians, and health care policy generally are not inclined to replace traditional procedures with cutting-edge remedies [1]. A significant issue that restricts the expansion of RM is connected to many problems that require conclusive solutions.

Current pre-clinical and clinical uses, along with their benefits over existing methods and any problems that need to be resolved before wide-scale adoption. In order to provide the final therapy for both acute injuries and chronic illnesses, more study is necessary [2]. However, doctors should first be made aware of these possibilities before assembling a multidisciplinary team to adopt and administer these novel therapies. Scientists are creating a wide variety of tissues and organs (from the bladder to the heart, from the nerve to the ovary, etc.); unfortunately, only a small number of them have been successfully implanted in people while others are either still in the pre-clinical stage or have only recently been created. Below, we've chosen and summarised a few artificial tissues and organs that might be inserted into people in regular clinical settings.

An impressive example of the use of RM techniques in the building of tubular organs is blood arteries. Research has evolved significantly because tissue-engineered arteries may be helpful for common and dangerous vascular lesions. Building viable live vascular grafts outside the body utilising 3 components—cells, scaffolds, and bioreactors—is a typical TE technique [3]. Artificial blood vessels are the organs that have been most significantly generated using bioreactors, which are tools or systems that can mimic natural biochemical and biophysical stimuli. Since they allow for adjustability over a range of pressure and pulse rates, computer-controlled pulsatile bioreactors appear to be preferable than the older models in terms of vascular TE. Even for tissue-engineered small diameter vessels (6 mm), their progress has long been hindered by the present approaches' blockage or thrombosis [4].

The best-known engineered organ is likely the skin, and artificial skin is already used on a regular basis in medicine. The clinical gold

standard for the treatment of full-thickness wounds or burns is an autologous split-thickness graft, which entails the surgical removal and subsequent stretching of the patient's epidermis and superficial dermis from a healthy skin location. However, donor sites for the harvesting of autografts are not accessible in cases of severe injury. Allografts could be another choice, although they still require immunosuppressive treatments.

The eye has several benefits that make it a prime target for RM applications. In particular, it is simple to access the eye for pretreatment evaluations and cell collection, it can be easily viewed and assessed during follow-up, and it is an immune-privileged organ [5]. The eye is made up of several distinct tissues, whose artificial reconstructions are still being researched. Transparent thin gelatin gel (TGG) scaffolds functionalized with heparin were created as an alternative to cadaveric corneal transplantation to facilitate the transfer of cultivated human corneal endothelial cells (HCECs). The scaffold was inserted into a rabbit's eye through a tiny corneal incision and eventually fused with the surrounding tissue.

#### Conclusion

A patient passes away every 30 seconds from conditions that may be addressed by tissue replacement. The world's national economies are being weighed down by an increasing number of chronic invalidating diseases that affect the elderly, young soldiers who have been disfigured in battle, and children with congenital malformations. A tissue engineering and regenerative medicine (TERM) approach may provide the final answer in these cases.

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#### Author Affiliations

Department of Tissue Engineering, School of Advanced Technologies in Medicine, Tehran University of Medical Sciences, Tehran, Iran



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