



Biomaterials and their Application

¹ Dr. Hari Murthy, ² Deril Mathew, ³ Nivedhidha R, ⁴ Adone Jose, ⁵ Diya Ann Sijo

¹ Assistant Lecturer, ^{2,3,4,5} Student

School of Engineering and Technology

Christ University, Bengaluru, India

hari.murthy@christuniversity.in, deril.mathew@btech.christuniversity.in, nivedhidha.r@btech.christuniversity.in, adone.jose@btech.christuniversity.in,

diya.ann@btech.christuniversity.in

ABSTRACT

The field of biomaterials development has been in existence for nearly half a century, making it a well-established area of research. Biomaterial science is a fascinating field with significant growth and investment from various corporations looking to develop new products. This interdisciplinary field encompasses medicine, biology, chemistry, tissue engineering, and materials science.

Keywords: Biomaterials, Review

1. INTRODUCTION

Biomaterials refer to materials specifically designed and modified for medical purposes. They can serve a variety of functions, ranging from harmless uses like heart valve replacements to bioactive applications such as hydroxyapatite-coated hip implants like the Furlong Hip by Joint Replacement Instrumentation Ltd in Sheffield, which can last for up to two decades. Biomaterials are also commonly employed in dental procedures, surgeries, and medication administration. Although there have been challenges in defining the term "biomaterial," the most widely accepted interpretation is: "A biomaterial is any natural or artificially created material that constitutes all or part of a living structure or biomedical device, and that provides, improves, or replaces a natural function."

2. ROLE OF BIOMATERIALS IN DRUG DELIVERY SYSTEMS

Biomaterials play a vital role in drug delivery systems by providing a way to safely and effectively transport pharmaceutical chemicals to their target areas within the body. Several significant applications of biomaterials in medication delivery systems are listed below: Biomaterials can be designed to encapsulate medications and release them slowly over time. Consider this: medications can be included in biodegradable polymers like PLGA (poly lactic-co-glycolic acid), which slowly release the medications as they break down to maintain sustained drug levels over time. Biomaterials can be made to target certain tissues, cells, or organs, reducing systemic negative effects. Drugs can be delivered directly to cancer cells or other particular cell types using liposomes and nanoparticles made of biomaterials that have had their surfaces functionalized with targeting ligands. Drugs can be delivered directly to cancer cells or other particular cell types using liposomes and nanoparticles made of biomaterials that have had their surfaces functionalized with targeting ligands. Protection of

Sensitive medications: Some medications are vulnerable to fast clearance or deterioration in the body. Biomaterials can protect these medications: Delicate Drugs can be shielded and have better bloodstream stability thanks to lipid-based nanoparticles. Using biomaterials for local medication delivery to particular anatomical locations can eliminate the requirement for systemic administration: Drugs can be stored in hydrogels, which can then be injected or implanted at the site of an illness or injury to provide sustained release. Biomaterials act as scaffolding for medication delivery within designed tissues in tissue engineering, assisting in the regeneration of diseased or damaged tissue. Growth factors or stem cells can be added to these scaffolds to help in tissue regeneration and reducing toxicity: Biomaterials can be created to reduce the toxicity of specific medications.

Systems that are sensitive to temperature: Thermosensitive polymers are one type of biomaterial that adapts its properties to variations in temperature. The ability to release medications in reaction to changes in local temperature can be made use of in drug delivery systems.

Biocompatible Carriers: To prevent negative side effects, biomaterials employed as drug carriers must be safe for usage inside the body and biocompatible.

Long-Circulating Nanoparticles: Nanoparticles made of biomaterials can prolong the time that medications circulate in the blood, enhancing drug delivery to target tissues. Biomaterials used in medication delivery systems must be carefully chosen to reduce immune reactions to prevent the body from rejecting or reacting negatively to the system. **Customization:** Biomaterials can be designed to meet the unique requirements of a drug or condition, enabling the

creation of individualized drug delivery systems. The qualities of the medication, the target site, the intended release kinetics, and the demands of the patient are only a few of the variables that influence biomaterial selection. The potential for developing more efficient and user-friendly drug delivery systems is continually expanding thanks to developments in biomaterial science, which will ultimately enhance the therapeutic effects of a variety of medical therapies.

3. ROLE OF BIOMATERIALS IN REGENERATIVE MEDICINE AND TISSUE ENGINEERING

In order to cure chronic diseases and replace damaged tissues and organs in order to restore normal human function, biomaterials are crucial in the field of regenerative medicine. Recent developments in engineering, material science, molecular biology, and biochemistry have expanded the possibilities for their clinical use. Biomaterials often serve as a scaffold in tissue regeneration, offering the necessary structural support for both cell adhesion and tissue growth. They mimic the extracellular matrix (ECM), which is normally produced by local cells to support the tissues and organs in their immediate vicinity. Cell adhesion proteins like laminin and fibronectin, structural proteins like elastin and collagen, and glycans like glycosaminoglycans (GAGs) and proteoglycans make up the majority of the extracellular matrix (ECM). It provides more than just spatial arrangement. Natural polymers like chitosan and silk, ECM proteins like collagen and elastin, and ECM derived from different tissues that are vulnerable to decellularization, such as the dermis, intestinal submucosa, and bladder matrix, are all examples of natural hydrogels. These materials have a number of benefits, including great biodegradability and biocompatibility, high flexibility, and the capacity to change shape and size in order to encourage the creation of designed tissue inside the surrounding tissues.

While synthetic hydrogels like polyethylene glycol (PEG) offer more advantages, including large-scale production capability and highly tuneable physical and mechanical properties, making them significantly useful for 3D cell culturing and tissue engineering, while most natural hydrogels have attracted much scientific interest due to their inherent outstanding properties. The goal of tissue engineering is to regenerate and repair damaged tissues using various techniques. Any object, structure, or surface that communicates with living things is a biomaterial. For partial or complete tissue replacement, it may be taken from natural sources or produced synthetically. No matter where they come from, they must be biocompatible to prevent the triggering of an immune response, sterilizable to safely incorporate into the host tissues, biodegradable to leave the tissue once they have served their purpose, and bioactive to stimulate tissue responses. Natural polymers such as chitosan, gelatine, collagen, cellulose, and alginates are favoured over synthetic ones such as polylactide-co-glycolide (PLGA), polycaprolactone (PCL), polylactic acid (PLA), fibronectin, and polyurethane because they are more biocompatible, have good biodegradability, and are less toxic. Recent work was successful in creating three-dimensional (3D) printed aerogel scaffolds for bone tissue creation using a combination of alginate and hydroxyapatite. Nearly 100% of cell viability data indicated that the produced scaffolds were not cytotoxic. After 13 days of incubation, the produced scaffolds showed significant porosity, which improved cellular adhesion and proliferation.

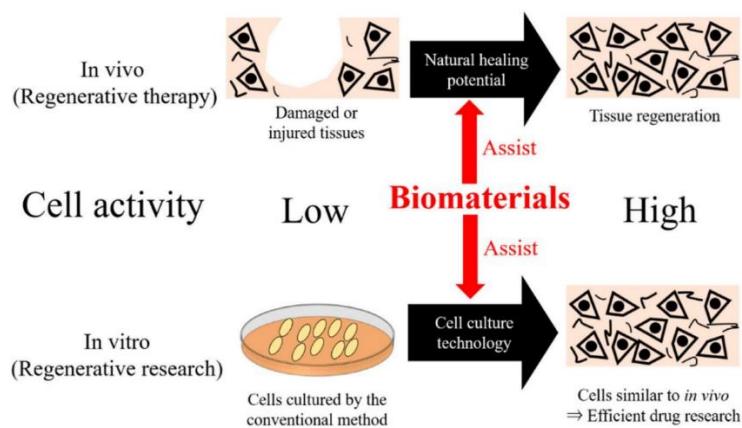


Fig: represents the assistance of biomaterials in regenerative medicine

Figure 1. Biomaterials are promising methods to enhance the biological function of cells *in vivo* and *in vitro*, leading to the realization of regenerative medicine. *In vivo*, tissue regeneration can be achieved when the activity of cells in the damaged tissues enhances. Furthermore, if the cell activity is high enough in cell culture, similar to *in vivo*, it is possible to effectively predict the drug effect in a preclinical or clinical study. Thus, biomaterial-assisted regenerative medicine has been recently identified as a promising approach. (From Department of Applied Chemistry, Faculty of Engineering, Kyushu University, 744 Motooka, Nishi-ku, Fukuoka 819-0395, Japan)

One study found that nano fibrillated cellulose improved bone tissue engineering. By freeze-drying, the authors were able to create 3D scaffolds comprised of a nano fibrillated cellulose/cyclodextrin blend loaded with raloxifene hydrochloride. Two cyclodextrins were tested: beta-cyclodextrin and methyl-beta-cyclodextrin. Cyclodextrins were employed to improve medication solubility. Scaffolds have a high porosity (> 90%) and good mechanical characteristics. The constructed scaffold had controlled drug release over 480 hours with reduced initial burst release when utilizing beta-cyclodextrin compared to methyl-beta-cyclodextrin, which could be attributed to the former's poorer solubility. *In vitro* cell viability testing also revealed better cell adhesion and proliferation, as well as a significant increase in alkaline phosphatase (ALP) production and calcium ion buildup.

4. ROLE OF BIOMATERIALS IN ORTHOPEDICS

The hip joint serves a crucial role in supporting the human body, connecting the femurs to the pelvis. This joint is fortified by strong ligaments, with the femur's spherical head fitting seamlessly into the acetabulum's seat. However, excessive loading conditions, diseases, and the natural process of aging can disrupt joint function and cause discomfort. In severe cases, osteoarthritis may necessitate the use of a prosthetic device to replace the compromised joint. An effective total hip arthroplasty (THA) procedure involves replicating the natural joint's functions using a stem, ball, and cup.

The selection of materials for the prosthetic device is a critical factor in accurately imitating the joint's kinematics. Several key considerations must be taken into account, including biocompatibility, fatigue resistance, stiffness, toughness, static and dynamic load-bearing capabilities, and high resistance to mechanical and chemical wear. Common materials used for the femoral stem include CoCr Mo, Ti6Al4V, alumina, and zirconia, while CoCr Mo, UHMWPE, and alumina are popular choices for the cup. To achieve long-term survivability and minimize complications, ceramic-on-ceramic (C-on-C), metal-on-metal (M-on-M), and metal-on-polyethylene (M-on-PE) bearings are commonly utilized.

Interestingly, one of the earliest attempts to replace an arthritic hip involved using an ivory ball and socket screwed into the bone. This was due to ivory's widespread availability and its mechanical resistance and compatibility qualities, along with its smooth surface for motion. Subsequently, other materials such as rubber, glass, and Bakelite were employed, and the first generation of metal-on-metal bearings was developed in the mid-20th century.

To optimize the configuration and composition of hip prostheses, experimental research and numerical simulations are both necessary. One possible approach involves employing composite polymeric materials to construct hip prostheses with variable stiffness. Consequently, the selection of candidate materials for total hip prostheses is shifting from those currently available to those that must be specifically produced for this application, with composite materials expected to demonstrate superior performance over traditional ones.

5. ROLE OF BIOMATERIALS IN DENTISTRY

Dental implants have become a popular solution for dental problems in recent years, but it's important to note that they can become contaminated with harmful microorganisms, leading to peri-implantitis. Over a 10-year follow-up period, implant survival rates have improved to around 95%. The two main causes of peri-implantitis are occlusal overload and oral biofilms, which develop on dental prostheses and play a significant role in the development of this condition. Without proper treatment, peri-implantitis can lead to implant loss. Bacterial cells can damage the surrounding gingiva, and the implant may come into contact with oral bacterial cells, blood, and saliva before and after the procedure. The materials used in dental prostheses can also affect biofilm development and adherence. Research has shown that titanium-based prostheses have superior biocompatibility and are more effective for osseointegration than those made of Co-Cr alloys. To ensure the long-term success of a permanent prosthetic device, it is essential to establish a direct connection between the implant and live bone.

Dental implants serve as a prime example of the usage of various biomaterials and their applications in the field of dentistry. The implantation process involves a combination of technology and science, including physics, biomechanics, and surface chemistry, covering a range of macro to nanoscale surface engineering and manufacturing technologies. Biomaterials have played a crucial role in promoting bone response and long-term biomechanical abilities in implant therapy, from surgical instruments to prosthetic restorations. To restore the damaged structure of teeth and ensure satisfactory clinical outcomes, biomaterials are essential in implantation. However, this procedure presents many challenges, such as bleeding, mobility, peri-implant infections, and the need for advanced approaches that use biomaterials to address these issues. Early implantation failures can also be attributed to poor bone quality, different surgical techniques, occlusal overload, and postoperative inflammation and infection, among other factors. Delayed implant failures are primarily caused by dissection in osseointegration, which typically occurs after the practical loading of implant-supported prostheses. Implant failure can also result from occlusal overload, biomechanical failure, and peri-implantitis. The body's repairing response to biocompatible materials is fibrous or fibrosis encapsulation. The two primary post-implantation repairs are regenerating and replacing connective tissue which includes fibrous capsules. The processes are controlled by the ability of cells to proliferate and the tissue framework persistence of the implant location. Dental implants are more compatible with osseous tissue than soft tissue, which has poor bonding ability, resulting in the encapsulation of fibrous.

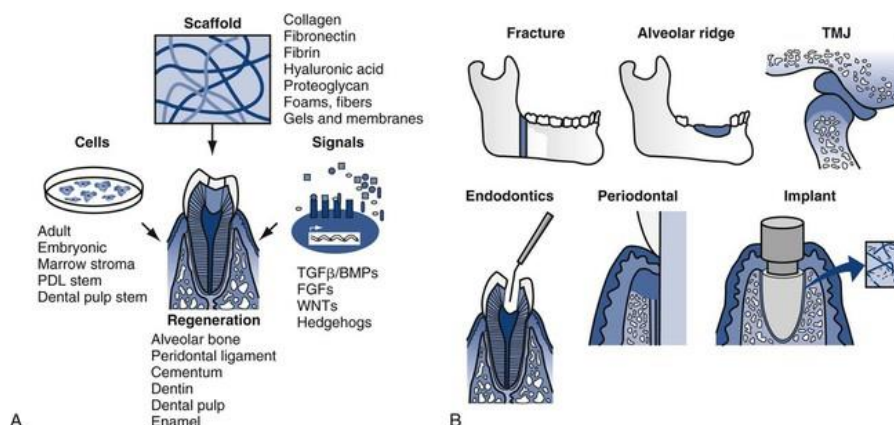


FIG. 2 Summary of the opportunities for tissue engineering to develop scaffolds, cells, and signals to create substitute or replacement dental tissues in the future. Some potential applications include fracture replacement, alveolar ridge augmentation, temporomandibular joint reconstruction, dentin replacement, periodontal ligament replacement, and pre-osseointegration of dental implants. (From Nakashima M, Reddi AH: The application of bone morphogenic proteins to dental tissue engineering, *Nat Biotech* 21:1025–1032, 2003.)

Dentistry uses an array of materials, including intracanal filling materials, liners, intracanal medications, subgingival implants, restorative materials, mouthwashes, and prosthetic materials. In the coming years, it is expected that the development of new biocompatible materials, the composition of current materials, and the evolution of procedures will increase the variety of uses of biomaterials in the field of dentistry. Achieving better properties in biological performance and better bio comp ability requires materials research, including dentin bondings, impression materials, luting cement, glass ionomers, glass carbomers, composites, and ceramics, which calls for an improved understanding across multiple disciplines and the creation of new design methodologies. In addition to replacing lost or damaged tooth tissues, all these biomaterials and technologies aim to encourage tissue regeneration and safeguard good tooth tissue. As a dental practitioner, staying up-to-date with the latest developments in dental biomaterials is crucial for successful treatment outcomes. Selecting the appropriate biomaterials and techniques is essential for regenerating tooth structures and promoting tissue regeneration. Biomaterials are now being used not only to replace missing or damaged tissues but also to stimulate regeneration in dentin, periodontal ligament, dental pulp, and enamel. Additionally, dental stem cells are being used to facilitate repair in bone and nerve tissues. By understanding recent developments in dental biomaterials, practitioners can improve patient outcomes and enhance the effectiveness of dental procedures. The Minimata Convention is a treaty signed by multiple countries in January 2013, aimed at controlling the release of mercury into the environment caused by humans. This has led to the phase-out of amalgam, a silver-gray biomaterial commonly used in dentistry as a restorative material. In order to meet the necessary requirements for dental biomaterials, such as being affordable, adaptable to varying climates, and easy to handle, alternative restorative materials and techniques must be developed. Research has made significant advancements in the use of biologically engineered tissues to replace damaged tissues over the past decade.

Dental implants are an excellent example of the various dental materials and their applications. This is a combined process of technology and science, from macro to nanoscale surface engineering and manufactured technologies, in physics, biomechanics, and surface chemistry. Biomaterials have been used in implant therapy to promote bone response and biomechanical ability, which is essential for long-term surgical instruments to finished prosthetic restoration. Biomaterials are essential to restore the damaged structure of teeth and provide satisfactory results correlated with clinical performance. However, implantation presents several difficulties, including bleeding, mobility, peri-implant infections, and the need for contemporary approaches focused on biomaterials to address these issues.

6. Neural Interfaces

Neural interfaces are tools that facilitate communication between the brain and external agents such as prosthetic limbs or computers. These devices have several applications in the medical field, such as treating Parkinson's disease, paralysis, and epilepsy. They are also useful for controlling drones and exoskeletons. The basic concept is to capture signals produced by neurons and use them to control external devices. There are different types of neural interfaces available, such as EEG, which records scalp electrical activity, and intracortical microelectrodes placed directly into the brain. The recorded signals can be used to manipulate devices and even restore lost sensory functions. Neural networks, on the other hand, are machine learning tools that imitate the brain's structure. They consist of layers of nodes that learn from information over time and have applications such as image recognition, natural language processing, and speech recognition. The potential uses of neural interfaces and networks are vast, but they have associated risks and drawbacks to consider. Installing these devices can be expensive and invasive, which poses potential health risks. Additionally, connecting them to computer networks creates concerns about cyber-attacks, which could harm users in various ways.

In the medical field, neural interfaces, sometimes known as 'electroceuticals,' are used to treat a variety of medical disorders. Some therapies, such as cochlear implants for patients who have lost their hearing, stimulators to promote stroke recovery, and deep brain stimulation (DBS) for disorders such as essential tremor, Parkinson's disease, and dystonia, have been standard practice for decades. Ongoing laboratory research is investigating treatments such as transcranial direct current stimulation (tDCS) for depression, while others, such as DBS for epilepsy, are in the early phases of medical application. The 'Mollie Suit' body garment, which provides electrical stimulation for persons with muscle spasticity caused by disorders such as stroke or cerebral palsy, is also in the early stages of acceptance. The cochlear implant, which is worn by over 400,000 people worldwide, is currently the most extensively

used internal interface. Individuals who have damage to sections of their cochlea or inner ear can use this gadget to hear. Although hearing restoration has a positive impact on people's lives, work to improve these systems continue due to difficulties such as inferior sound quality compared to 'normal' hearing and the visible aspect of the devices. Other sensory implants are in the early stages of development, such as retinal implants, which were approved for use in the United States and Europe in the recent decade, and vestibular implants, which aid with motion detection and balance. Deep Brain Stimulation (DBS) is a treatment option for Parkinson's disease and tremors in the United Kingdom and other nations. However, it is yet to be approved for NHS financing in England for the treatment of epilepsy. DBS is used to treat around 200,000 persons with Parkinson's disease globally. In most cases, two long, thin electrodes are inserted into deep brain nuclei and connected by a wire beneath the skin to an implanted pulse generator (IPG) in the chest, which provides constant stimulation. An external controller allows users to change settings wirelessly. The IPG sends pulses to brain cells that regulate movement in people with Parkinson's disease or stop seizures in those with epilepsy. The "NeuroPace" device, which was just recently licensed in the USA, is a "head-only" neurostimulation therapy comparable to DBS but also "responsive," detecting impending seizures and administering a stimulus to prevent them rather than providing "always-on" or patient-triggered stimulation. Small-scale DBS trials for people with anorexia and obsessive compulsive disorder have been successful.

In conclusion, the development of Brain-Computer Interfaces (BCIs) marks a ground-breaking technological boundary by providing a connection between the human mind and outside objects. BCIs hold great promise for improving lives and solving difficult medical problems, with uses ranging from robotic device control to medicinal therapies for illnesses like paralysis. The promise of BCIs in healthcare has been demonstrated by the opening of new treatment options for speech and motor disorders through the merging of digital technology with brain data.

7. BIOSENSORS

Biosensors are analytical instruments that combine a biological component with a physicochemical detector to detect chemical compounds. The biological component can be an enzyme, antibody, nucleic acid, hormone, organelle, or entire cell. When compared to other diagnostic equipment, biosensors have superior selectivity and sensitivity. They are used to study the function, content, and structure of biological material by translating a biological signal or response to a quantitative response. Biosensors have uses in environmental pollution control, agriculture, and the food industry.

Biosensors are chemical detection devices that combine a biological component and a physicochemical detector.

A biosensor is made up of three parts: the sensor, the transducer, and the electronics that go with it. The sensor is a biological component that responds to the analyte under examination. The detector section modifies the ensuing signal from the analyte contact and shows the data in an understandable manner. The last section consists of a signal conditioning circuit amplifier, a display unit, and the CPU.

Holograms are photos of three-dimensional impressions on the surface of light. To create a hologram, light waves must be photographed. When an object wave collides with a reference wave, a standing wave pattern of interference is formed that can be photographed, resulting in the formation of a hologram. Holograms are often captured on silver halide film. The film is made of a glass or plastic base material. Then there's an emulsion, which is a photoactive layer. Gelatine (a colourless/yellowish protein) is used to make this emulsion layer. In the gelatine layer, silver and halide compounds float. They react chemically to generate the silver halide molecule. Light energy is transferred to the silver halide molecule as it enters the gelatine.

Millington created a biosensor that employs a hologram as a sensing element.

This biosensor may have significant applications in screening pancreatic problems at a lesser cost. The bio element utilized is an enzyme known as bovine pancreatic trypsin inhibitor (BPTI). Trypsin must be found in duodenal fluid or stool samples to screen for pancreatic diseases. Trypsin detection is possible with proper usage of BPTI.

When a hologram is irradiated with white light, constructive interference produces a characteristic spectrum with a spectral peak and a wavelength peak specified by the "Bragg equation." The characteristic spectrum is determined by the gelatine matrix of the hologram. The characteristic spectrum changes when the gelatine molecules in hologram film are destroyed by protease. This variation is specific to the type of deterioration.

The spectra was investigated after the gelatine was degraded with trypsin and BPTI. The reflected light from the hologram was detected by a spectrograph and a CCD detector at 1- or 2-minute intervals and evaluated for peak wavelength and reflectivity change over time. The main advantage of this biosensor is that it can detect very low trypsin levels in 60 minutes.

8. ROLE OF BIOMATERIALS IN COSMETIC AND AESTHETIC APPLICATIONS

Cosmetic surgery often involves the use of soft-tissue fillers or structural scaffolds from various sources such as allogeneic, xenogeneic, or autologous materials. However, plastic surgeons face challenges such as prosthesis infection, donor site deformity, and filler embolization. To address these issues, innovative biomaterials, particularly regenerative biomaterials, have been developed to encourage tissue repair. These biomaterials with active ingredients have garnered interest in reconstructive and aesthetic procedures, producing better clinical results than conventional biological materials. This review highlights the current clinical uses and developments in advanced biomaterials for cosmetic surgery. The demand for cosmetic surgery has increased globally with society's growing emphasis on physical appearance. However, such elective surgeries pose risks, especially since they aim to enhance appearance rather than cure an illness. Procedures such as rhinoplasty and breast augmentation are associated with an increased risk of infection and long-

term complications like prosthesis deformation, displacement, and bone absorption. Autografts like autologous fat and rib cartilage can also cause issues at the donor site. These clinical issues are often caused by implants or implanted biomaterials.

Advanced biomaterials have been developed to stimulate tissue regeneration while minimizing risks of prosthetic rejection, long-term infection, and additional harm to the donor site. Injectable biomaterials, for instance, provide long-lasting and biocompatible effects for facial aesthetics. Tissue regeneration reduces the need for repeated injections and lowers the risk of injection-related complications, including the most severe embolism. Ideally, advanced biomaterials will promote tissue regeneration for both an immediate and long-lasting filling effect. Cosmetic surgery has a variety of advanced biomaterials available, some of which have been thoroughly tested in clinical settings. However, long-term effects still require further research. This review introduces successful cosmetic biomaterials used in clinical practice, including recent developments like injectable advanced biomaterials and extra components that encourage tissue regeneration. The review also discusses the challenges and outlook for the advancement of biomaterials for clinical use, including the interaction of biomaterials with host tissues, safety, biocompatibility, and biodegradability.

One method of facial rejuvenation is the use of soft tissue fillers. However, adverse reactions like pain, redness, and infection are not uncommon. The modern anti-aging concept focuses on encouraging the body to produce cells and tissues in an orderly manner through regenerative components. The goal is to restore the function of body tissues and stimulate the effects of fillers. Injectable regenerative biomaterials with good biocompatibility, already present in human tissues, can encourage extracellular matrix remodelling and collagen synthesis. Hyaluronic acid (HA) is a frequently used biomaterial that can be injected in cosmetic surgery. It enhances skin hydration and has antioxidant properties. Additionally, it encourages skin cell regeneration and collagen production. Its neocollagenesis mechanism encourages the production of new collagen by stretching the surrounding tissue and altering its structural makeup. HA also has a good modification site, allowing for the modification of its properties to be more advantageous for soft tissue regeneration. The sustainability of regenerative biomaterials is essential to decrease the risk of complications and enhance the acceptability of esthetic injection.

9. CONCLUSIONS

Biomaterials are specifically designed materials used in the medical field. They can either be bioactive or used for benign purposes, like the creation of a heart valve. One example of their effectiveness is the use of hydroxyapatite-coated hip implants, which can last up to twenty years and have a more interactive function. Rapid prototyping techniques have become increasingly essential in surgery and biomedical engineering. Physical models help with accurate bone defect diagnosis and a better understanding of anatomical concerns for surgeons, implant designers, and patients. Rapid prototyping has transformed medical practice by enabling accurate transplants and perfect replicas of bones before surgery, using MRI scan pictures. Custom implants for orthopedic, joint, load-bearing, and dental purposes can be created instantly. Currently, only a limited number of biomaterials are available for implant applications, including bone fixations, knee, dental, load-bearing, and cardiovascular implants, such as metal alloys, ceramics, and polymers. Selecting the right biomaterial is crucial to producing effective medical implants.

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