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Title: A Murine Model of Carotid Aneurysm Formation

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Author Questionnaire

1. We have marked your project as author-provided footage, meaning you film the video yourself and provide JoVE with the footage to edit. JoVE will not send the videographer. Please confirm that this is correct.

✓ Correct

2. Interview statements: Which interview statement filming option is the most appropriate for your group? **Please select one.**

☒ Interviewees self-record interview statements. JoVE can provide support for this option.

3. Proposed interview filming date: Please indicate the proposed date that your group will self-film interviews: **MM/DD/YYYY**

When you are ready to submit your video files, please contact our Content Manager, [Utkarsh Khare](#).

Current Protocol Length

Number of Steps: 08
Number of Shots: 23

Introduction

Author's NOTE:

I think the second take works best for Answer 1
The third take for Answer 2
The third take again for Answer 3
And the second take for Answer 4.
However, please feel free to decide which takes you think work best.

INTRODUCTION:

- 1.1. **Keishi Kohyama:** Our research develops a reproducible murine carotid aneurysm model to investigate mechanisms and evaluate new therapeutic strategies for aneurysm treatment.
 - 1.1.1. INTERVIEW: Named talent says the statement above in an interview-style shot, looking slightly off-camera. *Suggested B-roll: 2.3.1*

CONCLUSION:

- 1.2. **Keishi Kohyama:** Our results show that enzymatic vessel wall degradation combined with altered hemodynamics reproduces key pathological features seen in human aneurysms.
 - 1.2.1. INTERVIEW: Named talent says the statement above in an interview-style shot, looking slightly off-camera. *Suggested B-roll: 2.5.1*
- 1.3. **Keishi Kohyama:** Compared with intracranial models, our approach is faster, more accessible, and allows testing of endovascular or pharmacologic interventions in mice.
 - 1.3.1. INTERVIEW: Named talent says the statement above in an interview-style shot, looking slightly off-camera. *Suggested B-roll: 3.2.1*
- 1.4. **Keishi Kohyama:** This standardized murine model promotes cross-study comparability and helps accelerate therapeutic testing for aneurysm prevention and treatment.
 - 1.4.1. INTERVIEW: Named talent says the statement above in an interview-style shot, looking slightly off-camera. *Suggested B-roll: 3.1.1*

Ethics Title Card

This research has been approved by the University of Pittsburgh Institutional Animal Care and Use Committee

Protocol

2. Common Carotid Artery Ligation

Demonstrator: Keishi Kohyama

2.1. To begin, prepare the surgical site on the animal with betadine and 70 percent ethanol solutions [1-TXT] and place the surgical drape [2].

2.1.1. LAB MEDIA: 3rd-2.mp4 07:50 – 08:00 **TXT: Anesthesia: Isoflurane; Induction: 3 - 4% ; Maintenance: 1 – 3%**

2.1.2. LAB MEDIA: 3rd-2.mp4 12:18-12:39

2.2. Using surgical scissors, make a 1-centimeter vertical incision along the midline of the neck, starting from just below the jawline [1]. Cut through the dermis and underlying fascia [2].

2.2.1. LAB MEDIA: 3rd-2.mp4 14:15 – 14:20

2.2.2. LAB MEDIA: 3rd-2.mp4 17:16-17:24

2.3. Use blunt forceps to mobilize the submandibular gland laterally, taking care not to damage surrounding tissues [1]. Gently lift the gland and separate it from the sternum by blunt dissection [2]. Secure the gland with a small sterile retractor or clip to maintain a clear surgical field [3].

2.3.1. LAB MEDIA: 3rd-2.mp4 24:52-24:58

2.3.2. LAB MEDIA: 3rd-2.mp4 25:28-25:48

2.3.3. LAB MEDIA: 3rd-2.mp4 30:35-30:47

2.4. Identify the ipsilateral sternocleidomastoid muscle [1]. Use blunt forceps to lift the muscle gently and thread a 5-0 (5-oh) braided silk suture underneath [2]. Reflect the muscle laterally by gently pulling the suture to expose the carotid sheath [3].

2.4.1. LAB MEDIA: 3rd-2.mp4 38:20-38:35

2.4.2. LAB MEDIA: 3rd-2.mp4 38:40-38:54

2.4.3. LAB MEDIA: 3rd-2.mp4 39:15-39:25

2.5. Open the carotid sheath using sharp forceps [1]. Carefully separate the carotid artery from the adjacent jugular vein and vagus nerve [2]. To improve visibility, insert a sterile

silicone cuff or retractor beneath the carotid artery. Avoid causing trauma to the artery or surrounding structures [3].

2.5.1. LAB MEDIA: 3rd-2.mp4 43:12-43:22

2.5.2. LAB MEDIA: 3rd-2.mp4 49:08-49:28

2.5.3. LAB MEDIA: 3rd-2.mp4 01:07:56-01:08:12

- 2.6. Using sharp forceps, scoop the carotid artery and thread a 9-0 suture underneath [1]. Tie a secure double knot to ligate the artery, ensuring proper tension to occlude blood flow without damaging the vessel [2]. Trim the suture ends to minimize tissue irritation [3].

2.6.1. LAB MEDIA: 3rd-2.mp4 01:03:48-01:04:00

2.6.2. LAB MEDIA: 3rd-2.mp4 01:05:13-01:05:23

2.6.3. LAB MEDIA: 3rd-2.mp4 01:06:10-01:06:21

- 2.7. Using a syringe, apply a couple of drops of sterile porcine elastase solution at 10 units diluted in 1 milliliter of saline solution, over 10 or 20 minutes [1]. Once the elastase treatment time is completed, use a sterile cotton swab to remove excess elastase [2]. If desired, use sterile normal saline to wash out the remaining elastase solution [3]. Finally, remove any retaining sutures or clips to prepare for closure [4].

2.7.1. LAB MEDIA: 3rd-2.mp4 01:11:35-01:11:45

2.7.2. LAB MEDIA: 3rd-2.mp4 01:20:10-01:20:22

2.7.3. LAB MEDIA: 3rd-2.mp4 01:24:37-01:24:57

2.7.4. LAB MEDIA: 3rd-2.mp4 01:26:07-01:26:19

- 2.8. Approximate the skin edges using sterile nylon suture 5-0 or surgical staples [1]. Finally, apply gentle pressure with sterile gauze to ensure hemostasis [2].

2.8.1. LAB MEDIA: 3rd-2.mp4 01:27:05-01:27:19

2.8.2. LAB MEDIA: 3rd-2.mp4 01:32:48-01:32:55

Results

3. Results

3.1. A total of 15 female wild-type mice underwent the aneurysm induction procedure following the standardized protocol. Two weeks after surgery, aneurysm formation was successfully achieved in approximately 87% of the mice, as confirmed by gross morphological examination [1].

3.1.1. LAB MEDIA: Figure 2.

3.2. Aneurysm formation was also visualized under microscopy by disruption of the internal elastic lamina [1].

3.2.1. LAB MEDIA: Figure 3. *Video editor: Highlight the area “disrupted internal elastic lamina”*

- Submandibular (as in “submandibular gland”)

Pronunciation link: <https://www.howtopronounce.com/submandibular-glands> [How To Pronounce+1](#)

IPA: /ˌsʌbmænˈdɪbjʊlər/

Phonetic spelling: suh-bman-dih-byoo-luh(r)

- Sternocleidomastoid (as in “sternocleidomastoid muscle”)

Pronunciation link: <https://www.howtopronounce.com/sternocleidomastoid> [How To Pronounce](#)

IPA: /ˌstɜːrnoʊˈklaɪd.oʊˈmæstɔɪd/

Phonetic spelling: ster-noh-klyd-oh-mas-toyd

- Elastase (as in “porcine elastase solution”)

Pronunciation link: <https://www.howtopronounce.com/elastase> [How To Pronounce+1](#)

IPA: /ɪˈlæsteɪs/

Phonetic spelling: ih-las-tays

- Porcine (as in “porcine elastase”)

Pronunciation link: <https://dictionary.cambridge.org/us/pronunciation/english/porcine> [Cambridge Dictionary+1](#)

IPA: /ˈpɔːr.sən/

Phonetic spelling: por-sine

- Dermis

Pronunciation link: <https://dictionary.cambridge.org/us/pronunciation/english/dermis> [Cambridge Dictionary+2Oxford Learner's Dictionaries+2](#)

IPA: /'dɜː.mɪs/

Phonetic Spelling: DUR-mis

- Fascia

Pronunciation link: <https://dictionary.cambridge.org/us/pronunciation/english/fascia> [Cambridge Dictionary+1](#)

IPA: /'fæʃ.ə/

Phonetic Spelling: FASH-uh

- Submandibular

Pronunciation link: <https://www.howtopronounce.com/submandibular-glands> (No Merriam-Webster or Oxford page found) → No confirmed link found

IPA: /,sʌb.mæn'dɪb.jə.lər/

Phonetic Spelling: sub-MAN-di-byoo-luh(r)

- Sternocleidomastoid

Pronunciation link:

<https://dictionary.cambridge.org/us/pronunciation/english/sternocleidomastoid> [Cambridge Dictionary+1](#)

IPA: /,stɜː.noʊ.klaɪ.dou'mæs.tɔɪd/

Phonetic Spelling: stur-noh-KLY-doh-MAS-toyd

- Carotid

Pronunciation link: <https://dictionary.cambridge.org/us/pronunciation/english/carotid> [Cambridge Dictionary](#)

IPA: /kə'rɑː.tɪd/

Phonetic Spelling: kuh-RAH-tid

- Carotid sheath

Pronunciation link: <https://www.howtopronounce.com/carotid-sheath> [How To Pronounce](#)

IPA: /kə'rɑː.tɪd ʃiːθ/

Phonetic Spelling: kuh-RAH-tid SHEETH

- Elastase

Pronunciation link: <https://www.howtopronounce.com/elastase> [How To Pronounce](#)

IPA: /ɪ'læ.steɪs/

Phonetic Spelling: ih-LAS-tays

