Convergence, from the Perspective of Nanotechnology

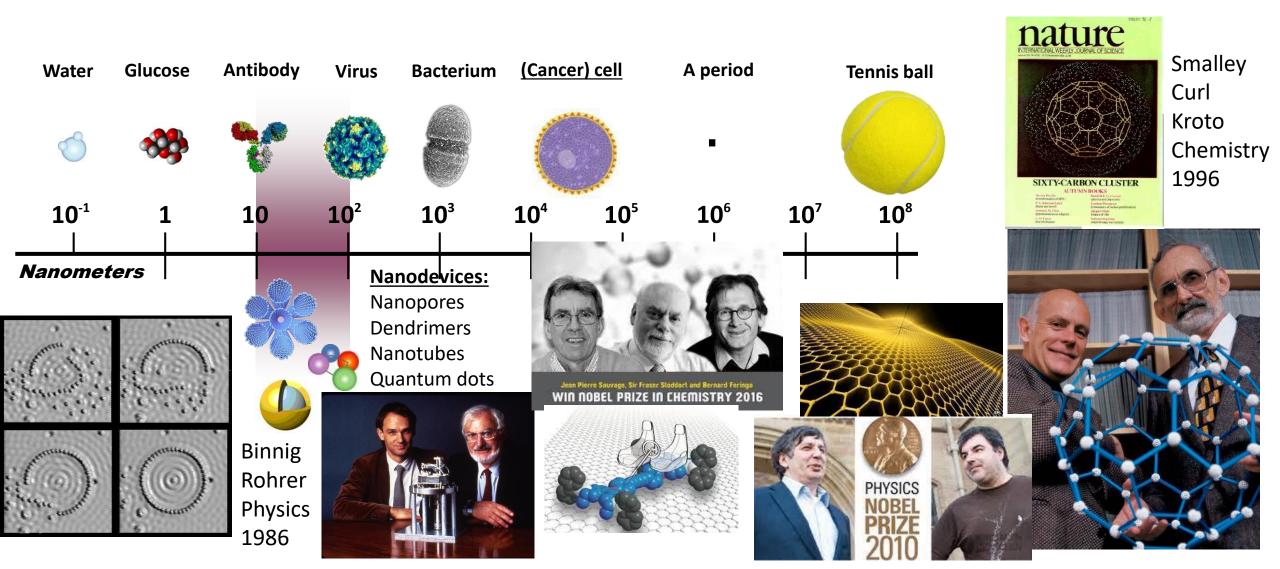
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Annual Meeting of the Pontifical Academy for Life Vatican City, February 20-21, 2023

NanoTMS = Nano-Technology, Medicine, Science Defining "nano": Dimensions AND Different Behavior





All smart phones, powered by semiconductor nanoelectronics



Dozens of new cancer drugs

Many consumer products: Textiles, sunscreens, food, materials, cosmetics, sport equipment, aerospace, medtechs, jewerly, furniture,

adhesives, paints....

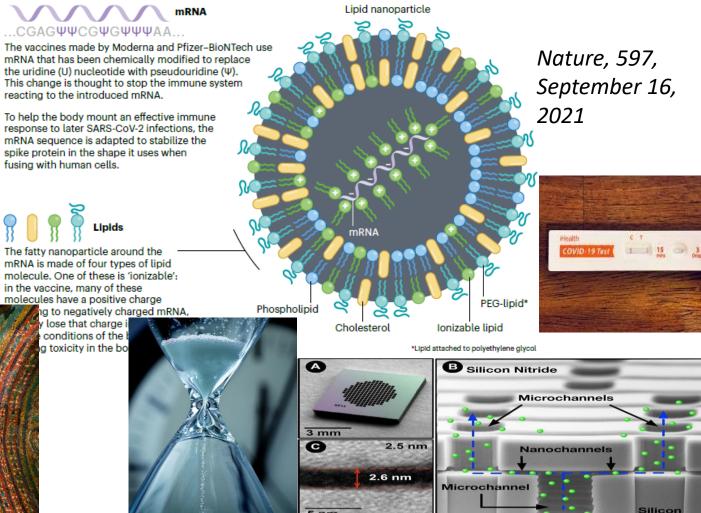
And of course the Art! (Chapel of St Zeno Rome)



You know nano....

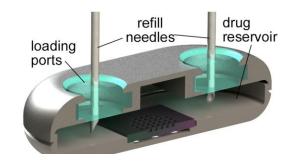
INSIDE AN MRNA COVID VACCINE

COVID-19 vaccines made from messenger RNA use lipid nanoparticles — bubbles of fats — to carry the molecules into cells. The mRNA contains the code for cells to produce the 'spike' protein that the coronavirus SARS-CoV-2 uses to enter cells. Here are key innovations in the design of these vaccines.



NanoTMS at work: Nanoglands in Space and on Planet Earth





- Mission: Combating muscle atrophy and bone loss for space travel
- Applications in everyday medicine: Osteoporosis, Cancer Cachexia, but same platform for AIDS/HIV and ...
- Enabling technology: Nanochannel Fluidics
- New Science: Non-Fickian Diffusion & Full-Range Osmosis
- Manufacturing Inspiration: "The Lost Wax" technique of sculptors in Ancient Greece

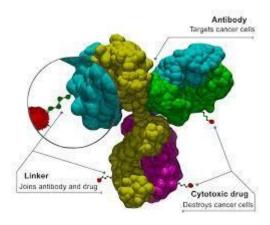
Convergent or Super-Discliplinary ?

- NanoTMS is multi/trans/interdisciplinary (super-?)
- How is that different from "convergent"?
- Perhaps a clue to the (inevitable) obsolescence of the taxonomy (matrix) of knowledge?
- Time to "Invert the Matrix"?
- For a world of science at the service of the needs of the global community?

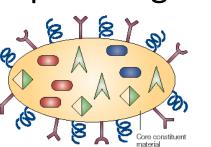


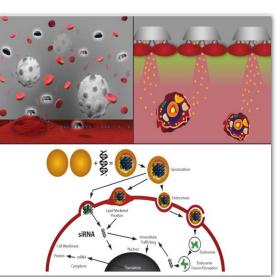
Vistas on the Future NanoTMS Scenarios

- A world without cancer death ?
- Key enabler: Multicomponent (convergent) therapeutic agents





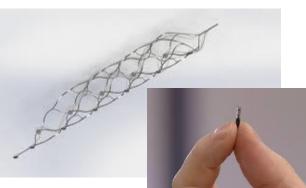




• A world with instant physical (brain!) connectivity for all ?







On ethical challenges for NanoTMS

- Personal impression: The 4-axis approach of beneficence, nonmaleficence, respect/autonomy and justice is sufficient
- However, the relative weights are modified
- Key concerns:
 - Balance between self-determination/privacy and optimal care algorithms, as societally defined
 - \circ Universal access
 - Discriminatory practices (healthcare, opportunity, education, social domains)
 - Differentiation of society into layers (casts) of privilege, of ever-increasing differentials
 - \circ A culture of performance enhancement
 - Direct access to the brain? The "UniMind TikTok" World?
- A failure to suitably address these concerns may lead to irreversible damage in the very fabric of global society

A Portrait of Nanomedicine and Its Bioethical Implications

Rebecca M. Hall, Tong Sun, and

Mauro Ferrari

A Brief Overview of Nanotechnology and Nanomedicine While the definitions employed by different govern-

mental agencies and scientific societies differ somewhat, the term "nanotechnology" is generally understood to refer to the manufacturing, characterization, and use of man-made devices with dimensions on the order of 1-100 nanometers (1 nanometer [nm] = 1 billionth of a meter). Devices that comprise a fundamental functional element that is nanotechnological are also frequently comprised within nanotechnology, as are manufactured objects with dimensions less than one micrometer. The differences in definition lead to occasional paradoxes, such as the fact that the most widely used nanodrug (albumin nanoparticles of dimensions up to 300 nm, comprising the anticancer drug paclitaxel) is labeled a "nanopharmaceutical" by governments of European countries, Canada, and Australia but it is not a nanotechnology for the U.S. Food and Drug Administration (FDA). It is also common in scientific domains to restrict the term "nanotechnology" to objects that possess special, "emerging" properties that only arise because of their nanoscale dimension Our perspective has been further restrictive, requiring

Mauro Ferrari, Ph.D., is the President and CEO of The Methodist Hospital Research Institute where he holds the Ernest Cockrell Ĵr. Distinguished Endowed Chair, and is Presiden of the Alliance for NanoHealth in Houston. He received his Ďottore in Matȟematics from the Universita' di Padova, Italy and his Ph.D. in Mechanical Engineering from the University of California, Berkeley. Dr. Ferrari also served as Special Ex pert on Nanotechnology at the National Cancer Institute in 2003-2005, providing leadership into the formulation, re finement, and approval of the NCI's Alliance for Nanotechnol ogy in Cancer, currently the world's largest program in medi al nanotechnology. Rebecca M. Hall, Ph.D., is the Manage of Scientific Communications for The Methodist Hospital Re search Institute and has 15 years of experience in cancer and egenerative medicine research. Dr. Hall received her Ph.D. in munology from Baylor College of Medicine and B.S. in Bio chemistry from the University of Illinois at Urbana-Cham paign. She is an Aspen Cancer Conference Fellow and received the Theodore T. Puck Award for Cancer Research for her worl on molecular cancer diagnostics while Assistant Professor o Cell and Molecular Biology at Baylor College of Medicine Tong Sun, M.S., M.B.A., is the Director of Central Opera tions for The Methodist Hospital Research Institute. Mr. Sur received a M.S. in Biomedical Sciences from the University o Texas Graduate School of Biomedical Sciences at Houston and a M.B.A. from the McCombs School of Business at the University of Texas at Austin. He spent 10 years at the University of Texas M. D. Anderson Cancer Center, conducting research or oncogenes, protein kinases, and signal transduction of leuke mia. He was the Director of Management Operations in the Department of Nanomedicine and Biomedical Engineering at the University of Texas Health Science Center at Houston prior to joining The Methodist Hospital Research Institute.

Thank you for your attention

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