

Liquid-Addressable Neurovascular Docking Interface

30-second research overview · A sequentially dissolvable dual-plate concept for prevalidated spinal cord graft connection

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Core proposition

Do not leave every host-graft connection to chance after implantation. Pre-align vascular and neural routes on matched host-side and graft-side bioresorbable plates; verify graft-side function before use; dock the interfaces; and remove temporary guides only after measured biological gates are passed.

What is proposed

Temporary element	Function	Biological handover
Matched dual plates	Place host and graft routes at corresponding coordinates	Tissue retains alignment after plate withdrawal
Vascular sacrificial core	Creates prospective cross-interface lumen continuity	Endothelial lining, low leak and stable perfusion
Longer-lived neural guide	Supports directed axonal crossing	Persistent evoked conduction after guide removal
Mechanical or magnetic lock	Reduces docking error and holds the interface	Biology - not magnetism - forms the durable connection
Dedicated dissolution liquids	Remove V/N/lock/plate components selectively	Local closed-loop delivery, recovery and acceptable residues

Primary falsifiable hypothesis

Compared with unguided apposition, keyed geometry alone, magnetic docking alone and fixed-time degradation, the complete matched interface with temporary continuity guides and **state-triggered selective dissolution** will increase stable leak-free endothelialized channel continuity and persistent cross-interface neural conduction without increasing thrombosis, cell death, abnormal firing or inflammatory injury.

First practical experiment

Model	Comparison groups	Primary readouts
Transparent paired hydrogel interfaces; cell-free materials stage, then endothelial and neural co-culture	A unguided · B keyed · C magnetic · D docking + guides · E D + measurement-gated dissolution · F D + fixed-time dissolution	Alignment error; patency; leak and barrier function; flow stability; crossing distance; evoked conduction; dissolution selectivity; residues; viability; abnormal activity

Go / no-go logic

Proceed only if	Stop or narrow the proposal if
Target component removal is high; non-target damage is low; liquids remain local and recoverable; endothelial bridging is continuous and low-leak; perfusion is stable; neural conduction persists after guide removal.	A simpler keyed interface performs equally well; dissolution causes toxicity, swelling, residue, leakage or thrombosis; magnetic forces damage tissue; conduction disappears after guide withdrawal; prevalidated graft metrics do not predict interface performance.

Why it may matter

The individual ingredients are not claimed to be new: spinal scaffolds, prevascularization, sacrificial channel fabrication, magnetic/sutureless coupling and neural guidance already exist. The **system-level novelty candidate** is their combination as a matched host-graft neurovascular boundary with different-lived continuity guides, orthogonal liquid removal and functional state gates.

Scientific boundary

Unvalidated preclinical architecture. This is not a treatment, medical advice, surgical protocol, material recipe, safety/efficacy proof, patentability claim or world-first claim. Publication provides a citable idea seed and explicit failure conditions; experimental evidence must determine its value. Related open records: State-Gated Neurovascular Developmental Regeneration (10.5281/zenodo.22030265) · Vascular Route Memory and Conflict Test (10.5281/zenodo.22030498) · Regenerative Pathway Index (10.5281/zenodo.22030692)