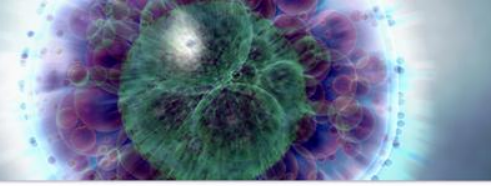


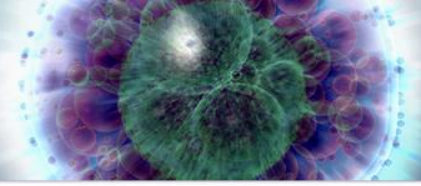
Swiss Stem Cell  
Foundation®



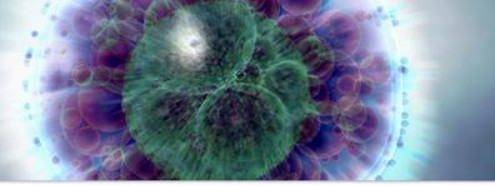
# Differentiating ASCs in tendon

iCAST2017

Deborah Stanco

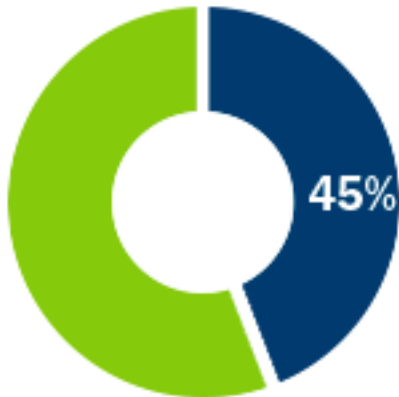


# Introduction

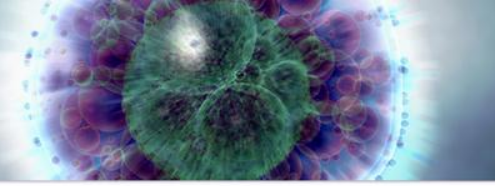


## Introduction

- Tendon disorders are common and lead to:
  - significant disability and pain
  - healthcare cost and lost productivity



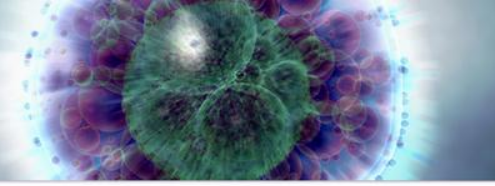
- 45% of musculoskeletal lesions worldwide
- 2000 new cases/year only in Switzerland
- mean insurance cost of 23,843 CHF



## Introduction

- A wide range of injury mechanisms exist leading to tendinopathy or tendon rupture
  - Tears in healthy tendons acutely overloaded (high impact event) or lacerated (knife injury)
  - Tendinitis or tendinosis in overuse conditions (elite athletes) or intrinsic tissue degeneration (age-related degeneration)
- Tendon biology and related injury mechanisms are still poorly understood

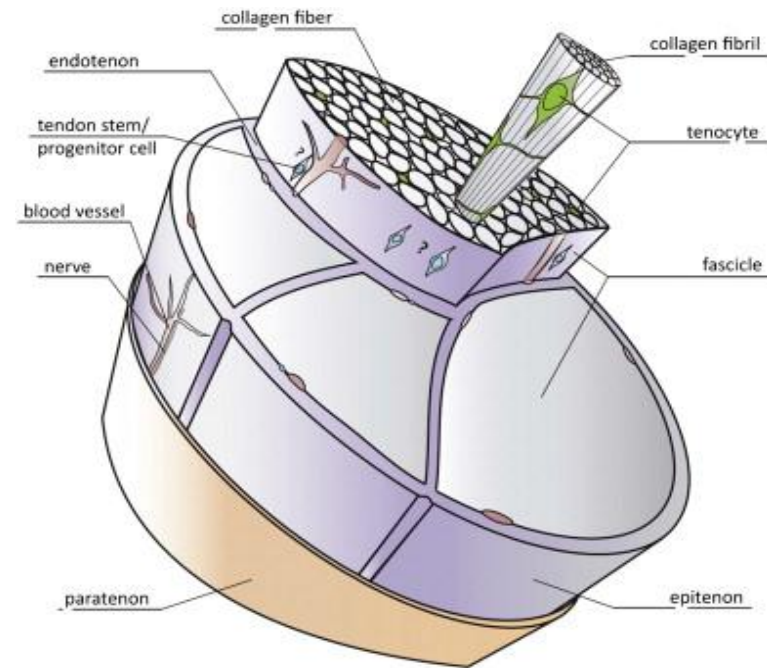




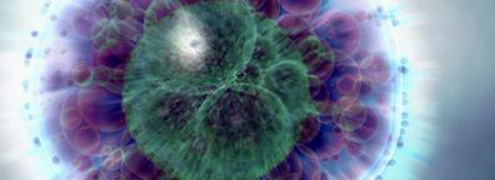
## Introduction

### Tendon tissue composition:

- Extracellular matrix (ECM) 95%:
  - Collagen type I, III
  - Proteoglycans (decorin)
  - Glycoproteins (tenascin, COMP)
- Cells 5%:
  - Tenocytes
  - TSCPs
- Blood vessels and nerve low%





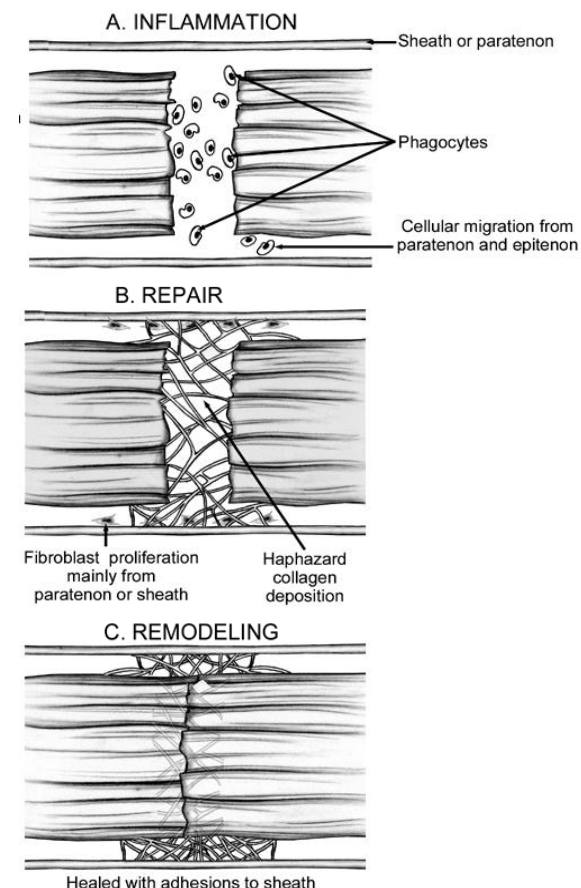


# Introduction

## Tendon healing process

	Inflammatory 0-2 days	Reparative 2-40 days	Remodeling 12 months
Cells and Matrix Changes	Platelets Neutrophils Erythrocytes Circulating-MSCs	Cellularity and Matrix production Collagen type III TSPCs activation	Cellularity and Matrix production Collagen type III Collagen type I
Molecular Changes	IL-6, IL1- $\beta$ bFGF IGF-1 PDGF TGF $\beta$ VEGF	GDF-5, -6, -7 bFGF IGF-1 PDGF TGF $\beta$ VEGF	GDF-5, -6, -7 IGF-1 TGF $\beta$

Modified from Docheva D et al 2015

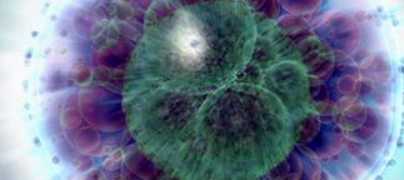




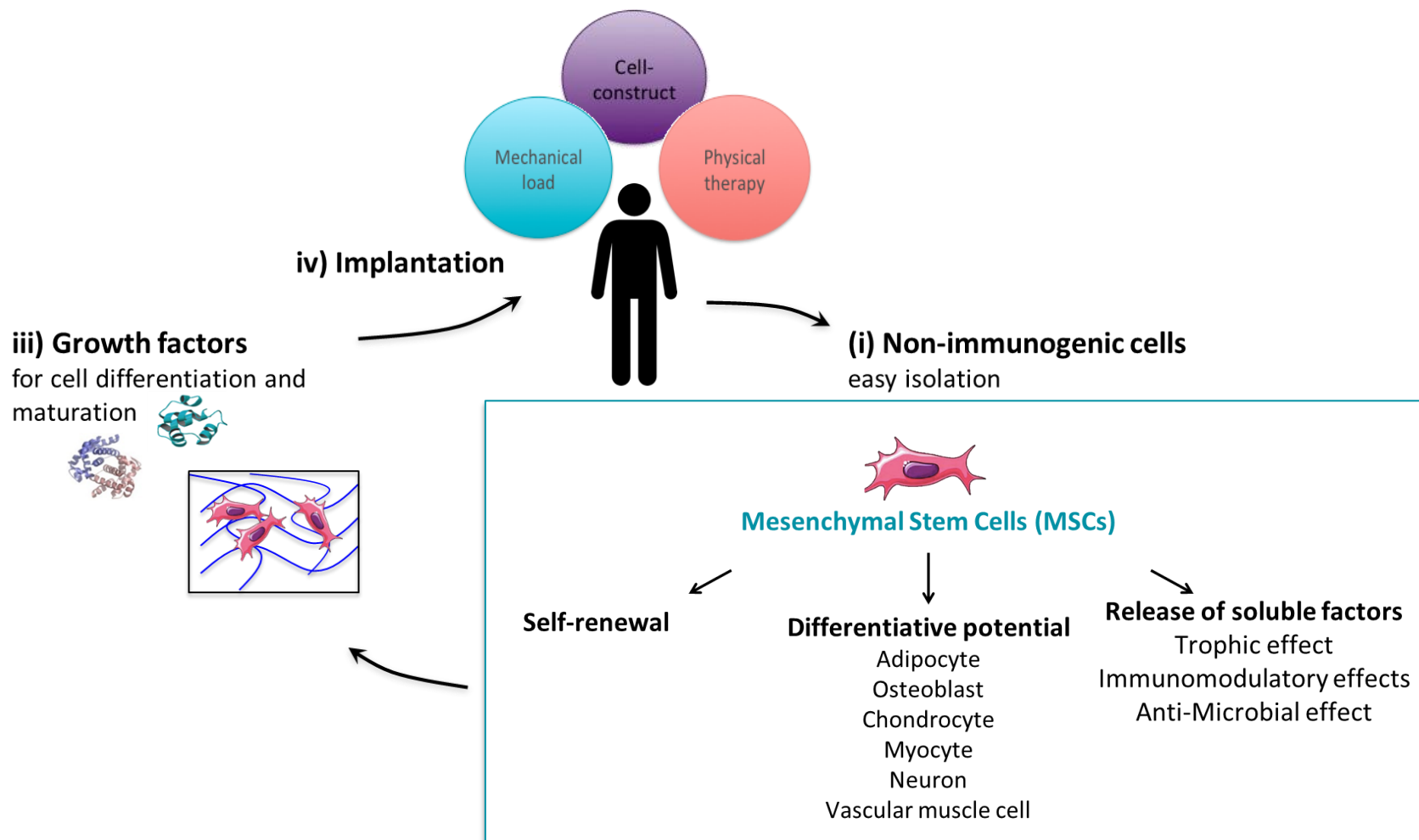
## Clinical problem

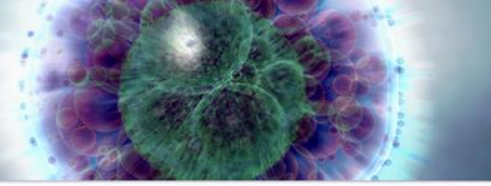
- Tendon healing often results in scar tissue mechanically inferior, less able to perform the functions of a normal tendon and with high risk of reinjury
- Autografting and allografting are still considered to be the golden standards but they have limited availability, require an additional surgical procedure with potential complications, and are susceptible to immunorejection (Jakob M et al 2012)
- Stem cell transplantation and stem cell/scaffold-guided tissue engineering approaches are emerging as viable alternatives to grafting



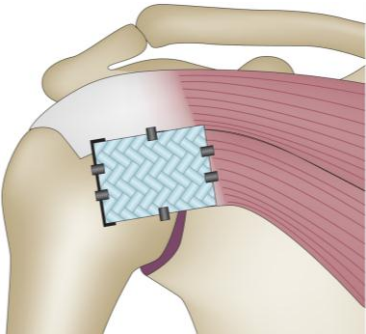


# Tendon Tissue engineering



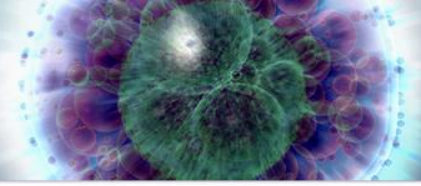


## Aim of the Study

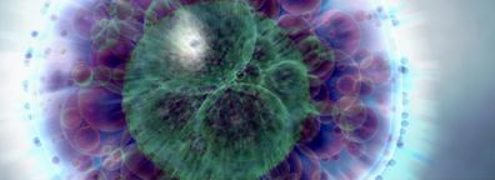


To develop of human ASC-rich tendon patch, GMP-compliant to deliver the regenerative and anti-inflammatory potential of ASCs directly in the site of injury

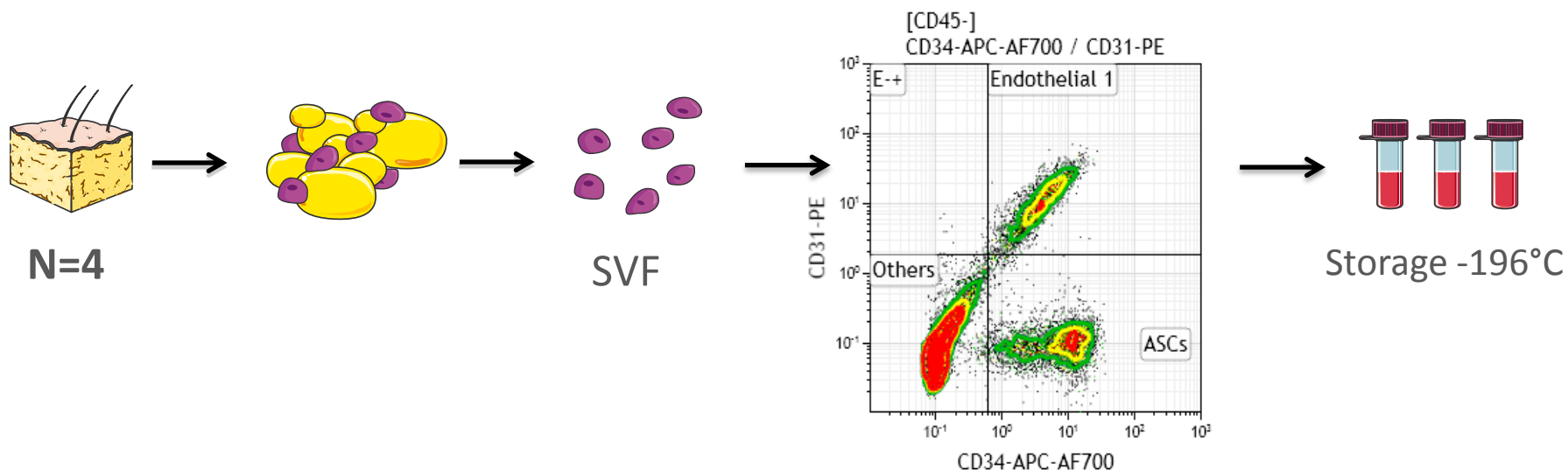
Q. Are ASCs able to differentiate into tenogenic lineage using a GMP-compliant inductive medium?



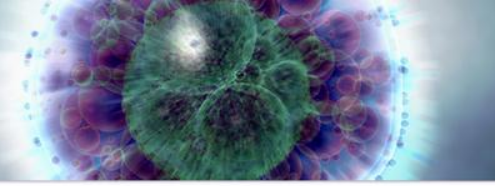
# Methods



## ASCs Isolation & Immunophenotyping

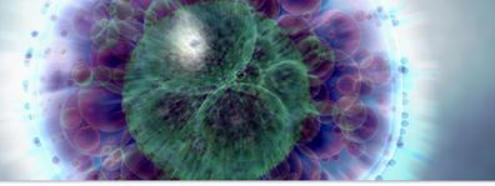


- Nucleated cells: Syto40
- Viability: 7-AAD
- ASCs: CD45(-) CD34(+) CD146 (-)
- Flow-Count Fluorospheres



## Methods: ASC culture

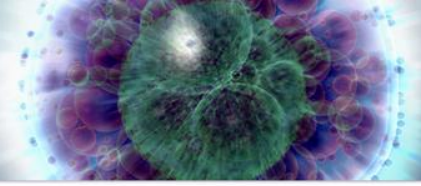
- **Culture on collagen-coated surfaces to mimic tendon environment**
- **Expansion in CTRL medium** according with the standard GMP-procedure:
  - 1) Stemulate® Pooled Human Platelet Lysate culture media supplement (**hPL**)
  - 2) Serum free medium (**SF**) developed in our laboratories consisting of ITS, human albumin, bFGF, TGFb1, PDGF-AB, PDGF-BB supplementation
- **Induction of cells at P4 in hPL or SF TENO medium for 14 days:**
  - CTRL hPL/SF supplemented with  
50 µg/ml Ascorbic acid, 50 ng/ml BMP-12, 100 ng/ml CTGF and  
10ng/ml TGFb3



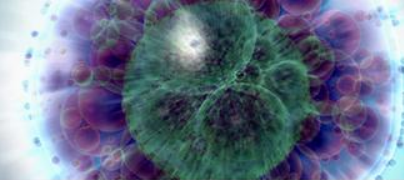
## Methods: Evaluations

- Morphological appearance (optical microscopy)
- Expression of tendon related genes (RT-PCR): scleraxis (SCX), collagen type I (COL1A1) and type III (COL3A1), cartilage oligomeric matrix protein (COMP), metalloproteinase 3 and 13 (MMP3 and MMP13)
- Immunofluorescence to detect the transcription factor scleraxis that play a central role in promoting fibroblast proliferation and matrix synthesis in tendons
- Staining to evaluate collagen type 1 deposition



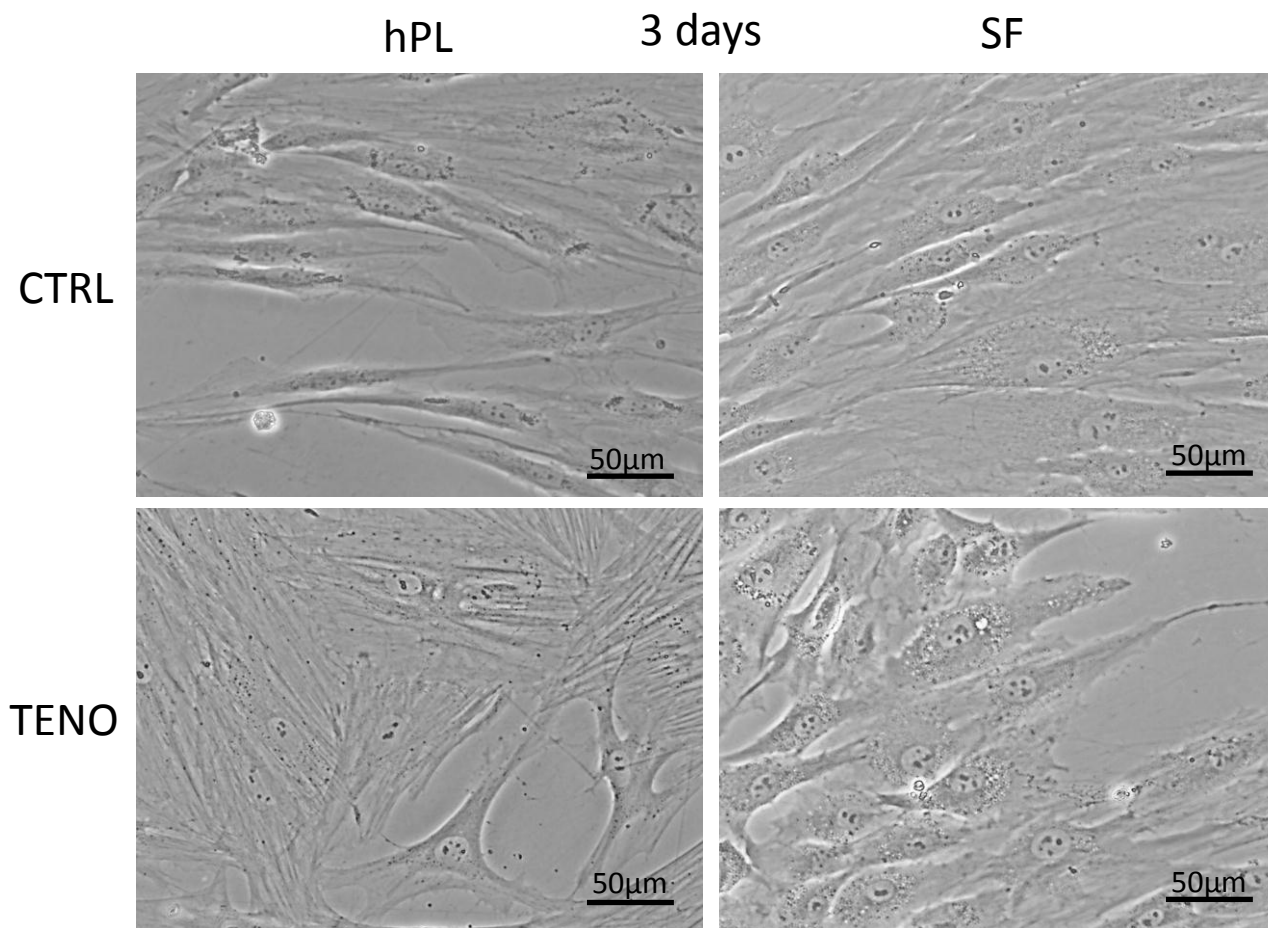


# Results

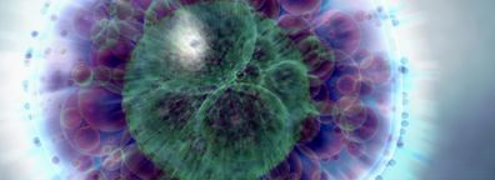


## Morphological Appearance:

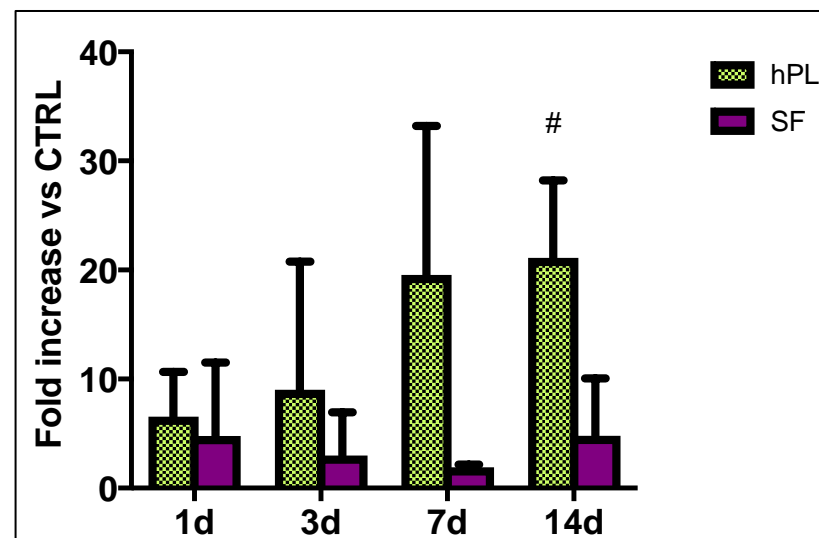
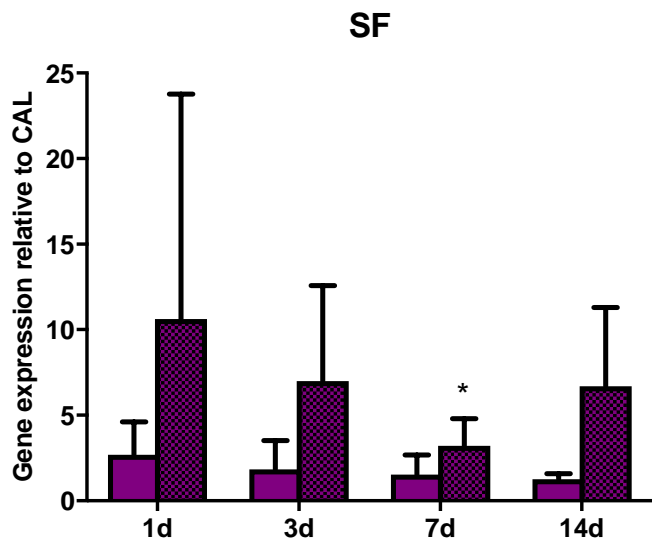
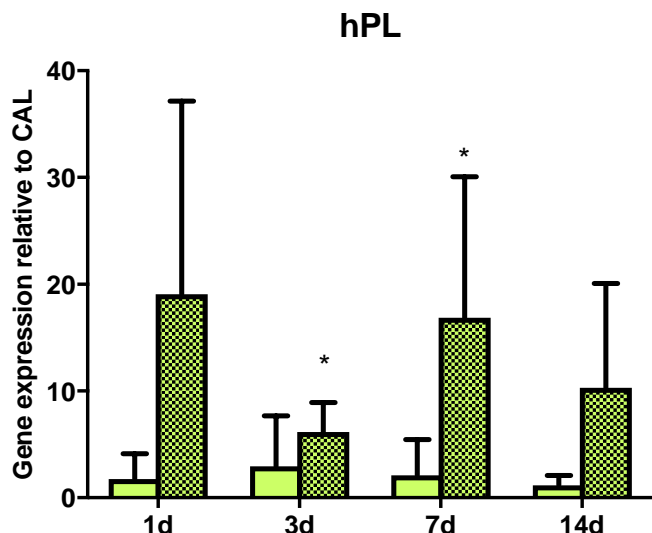
- Differentiated cells more rounded and with more cytoplasmic content vs CTRL



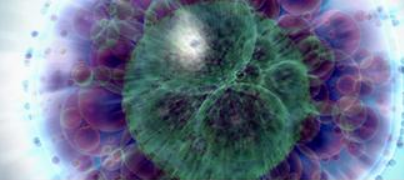
Magnification 20X



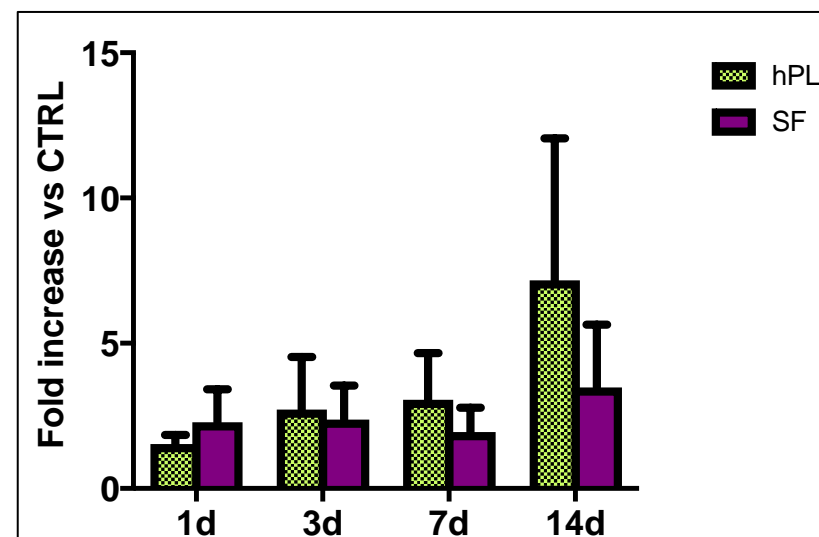
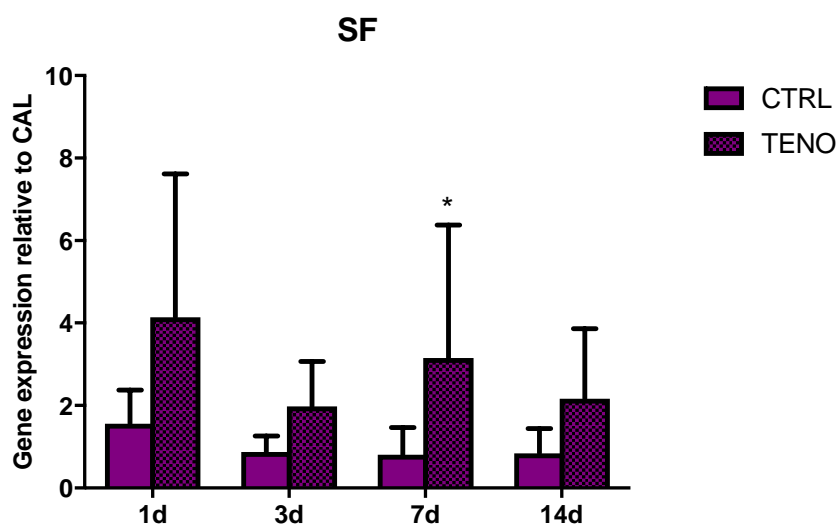
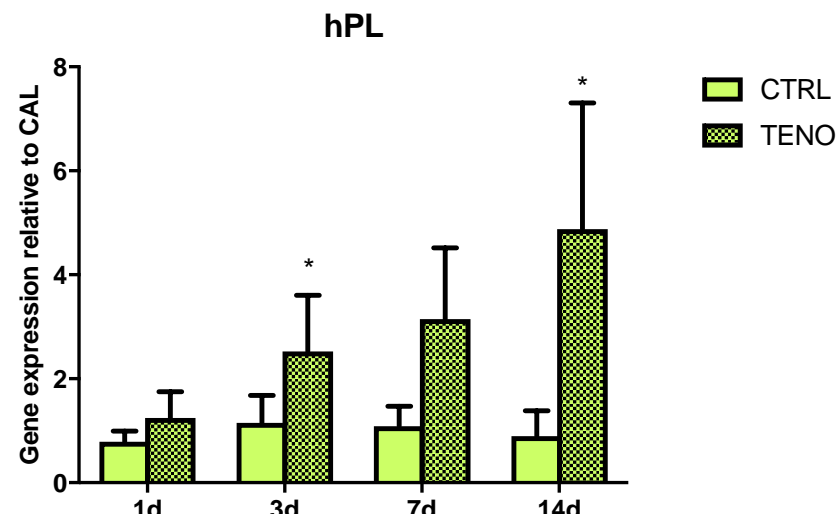
## Upregulation of Scleraxis gene expression in both hPL and SF conditions



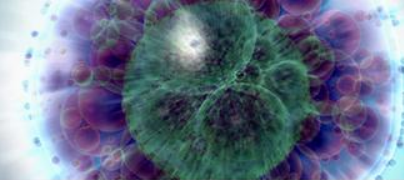
Significance vs CTRL \*  $p < 0.05$ ; vs SF #  $p < 0.05$



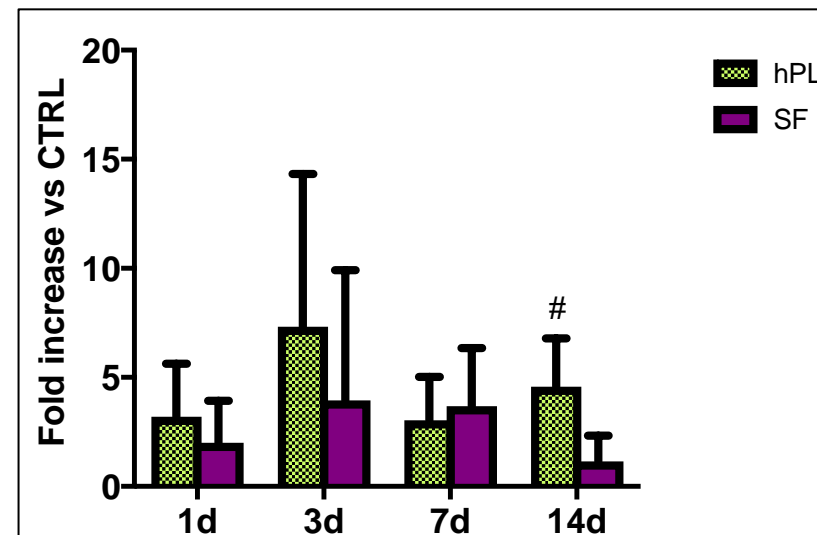
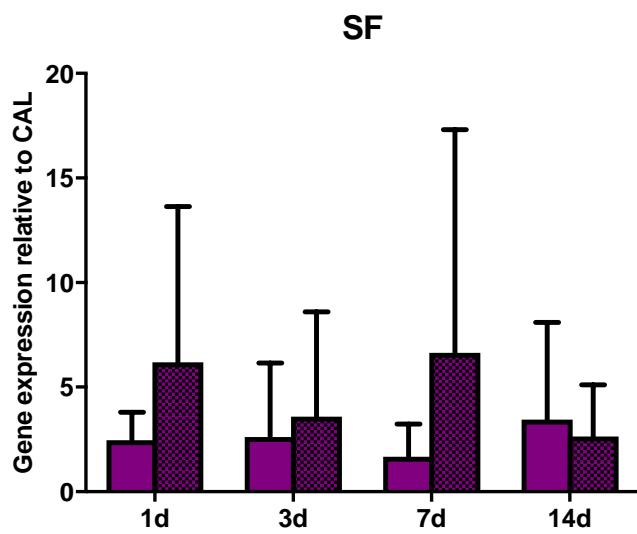
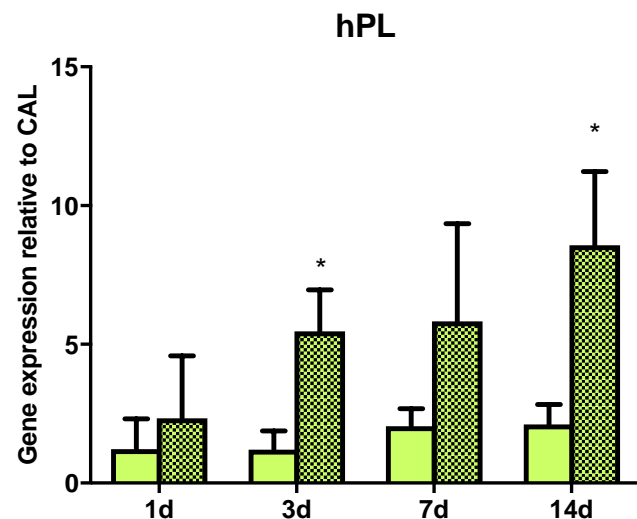
## Upregulation of COL1A1 expression in both hPL and SF conditions



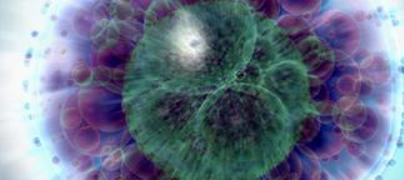
Significance vs CTRL \*  $p < 0.05$ ; vs SF #  $p < 0.05$



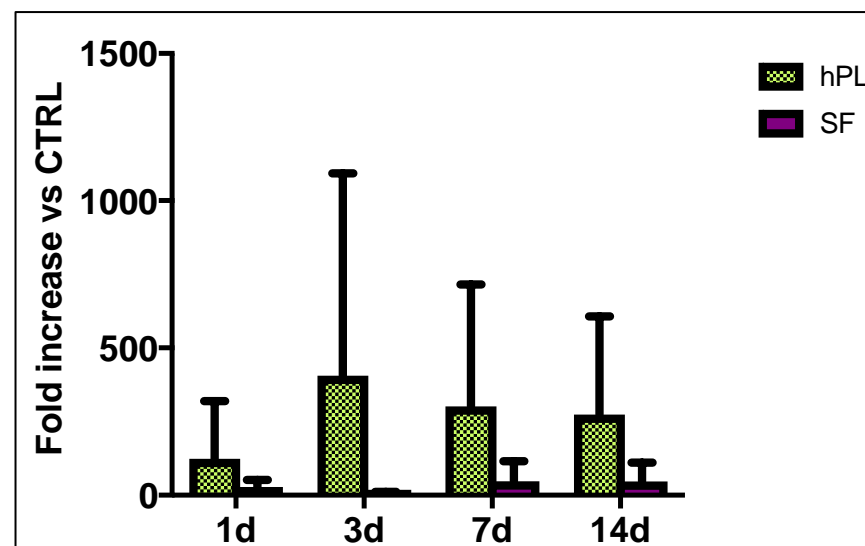
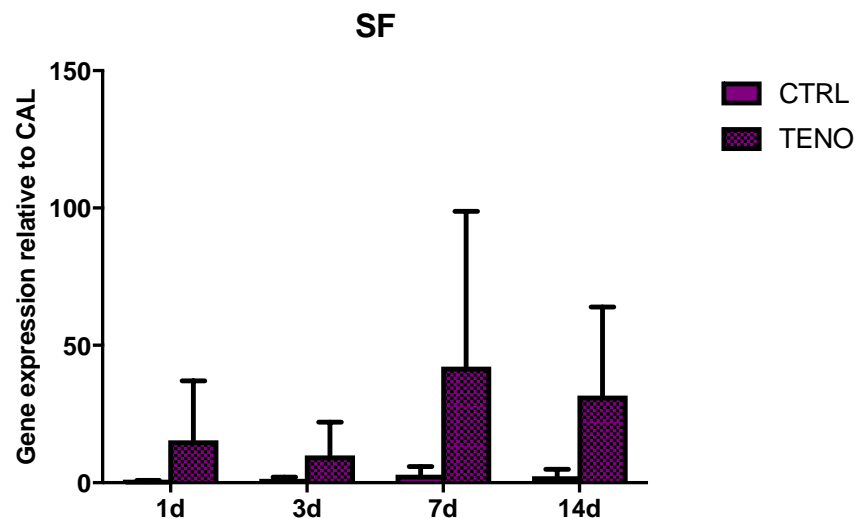
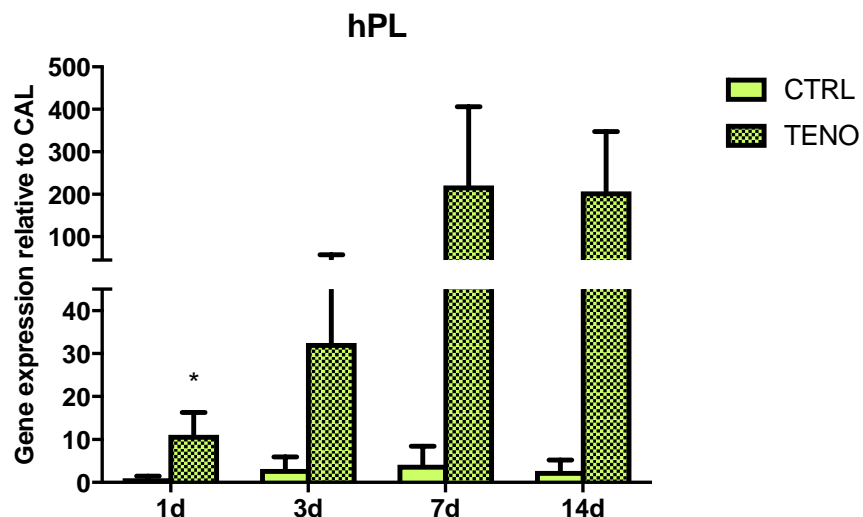
## Upregulation of COL3A1 expression in both hPL and SF conditions



Significance vs CTRL \*  $p < 0.05$ ; vs SF #  $p < 0.05$

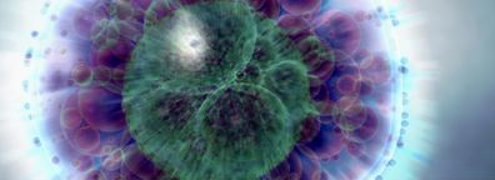


## Upregulation of COMP expression in both hPL and SF conditions

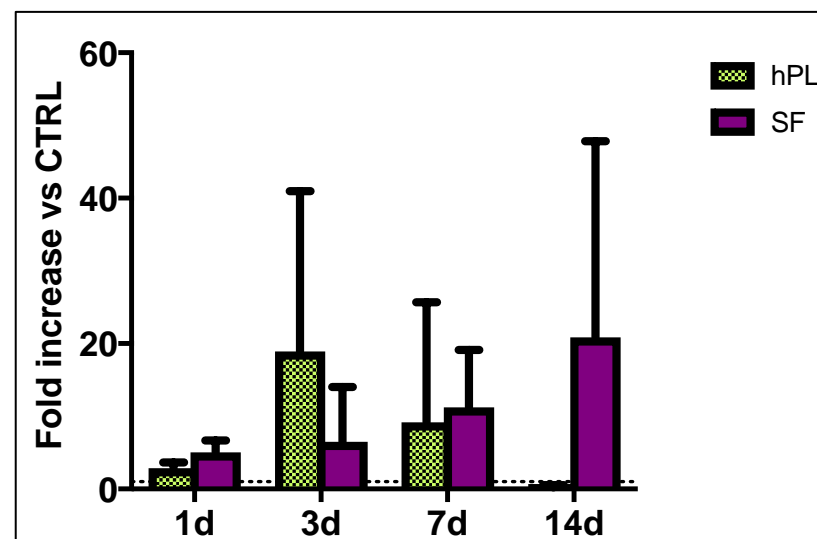
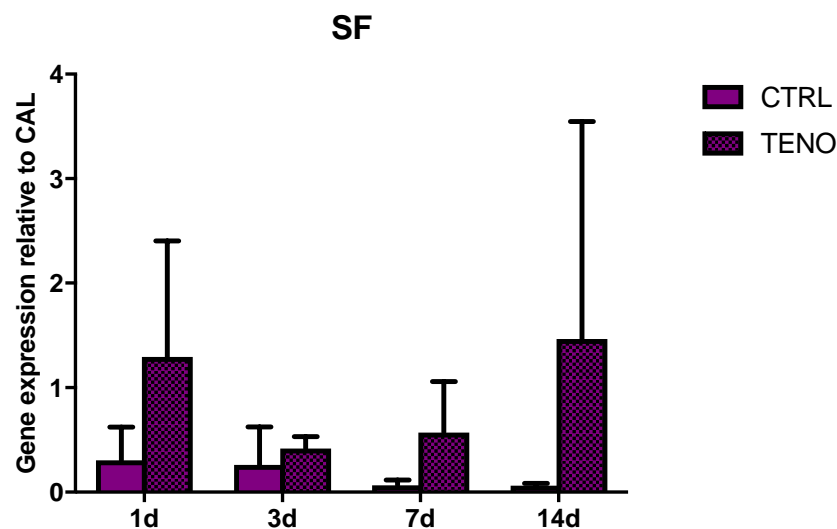
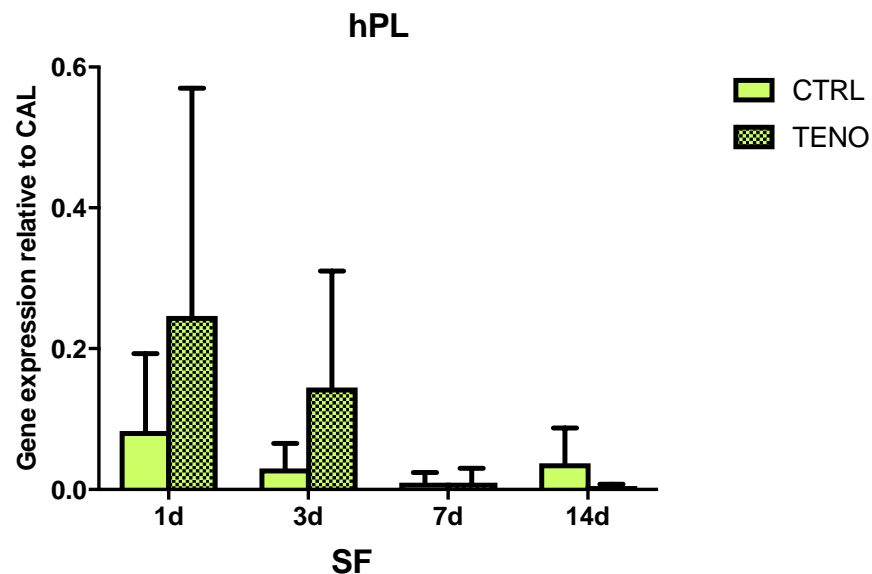


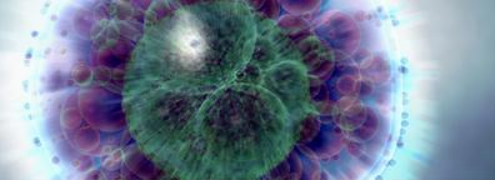
Significance vs CTRL \*  $p < 0.05$ ; vs SF #  $p < 0.05$



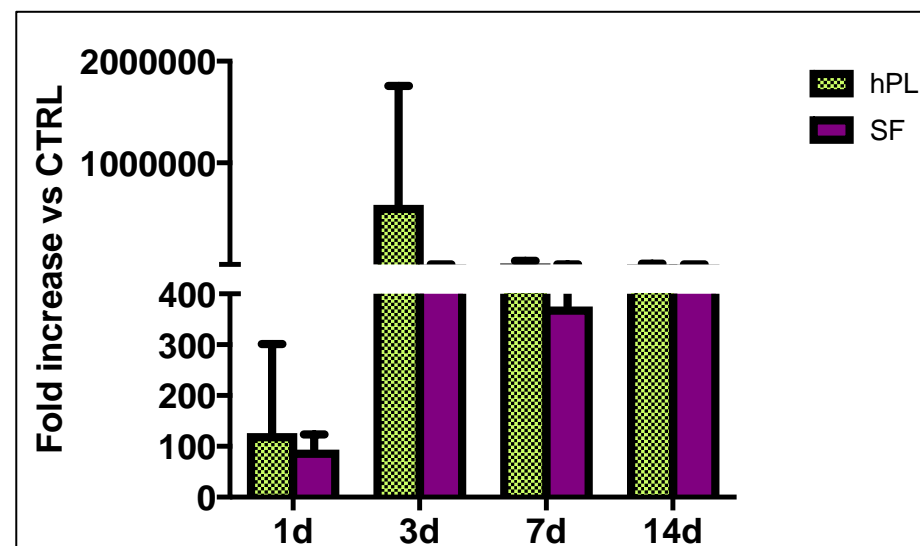
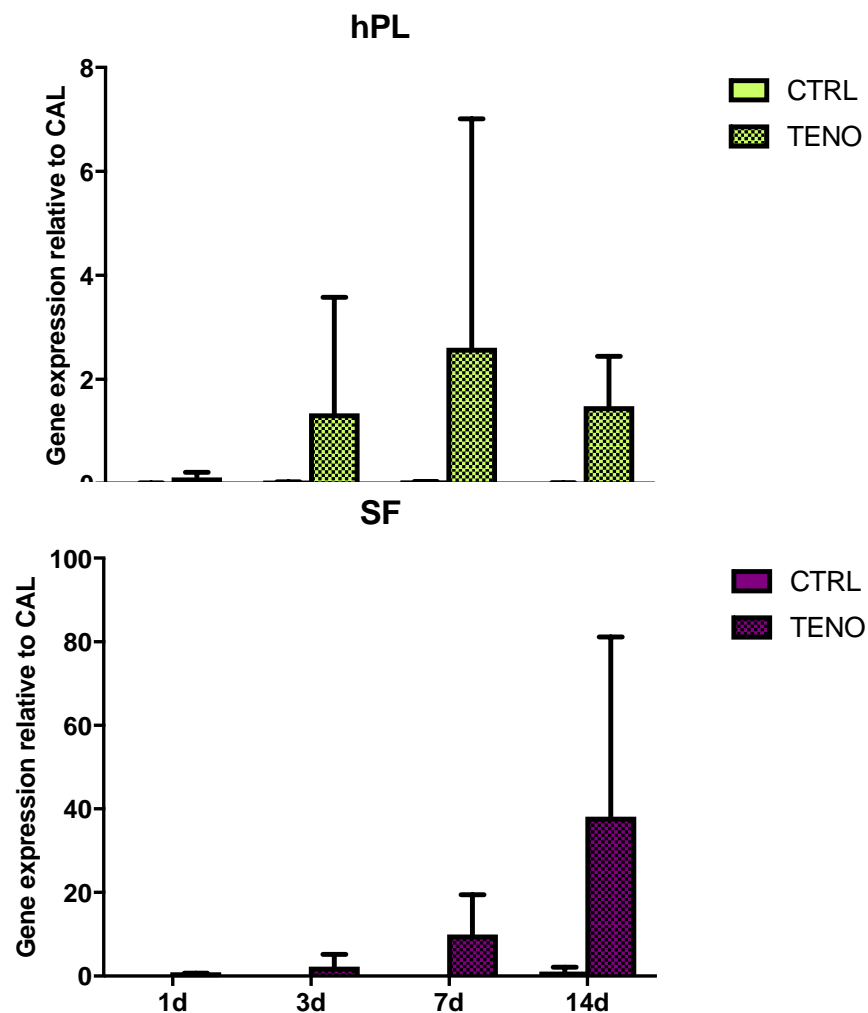


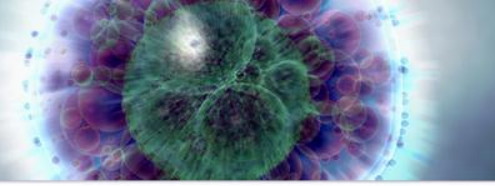
## Upregulation of MMP3 expression in both hPL and SF conditions





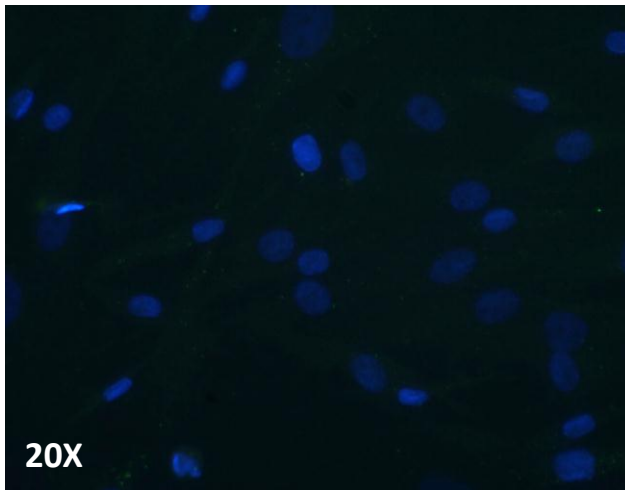
## Upregulation of MMP13 expression in both hPL and SF conditions



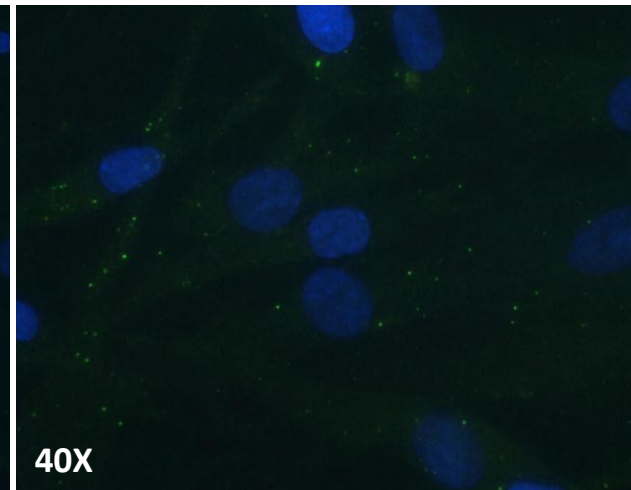


## TENO hPL show SCX protein expression after 3 days of induction

CTRL

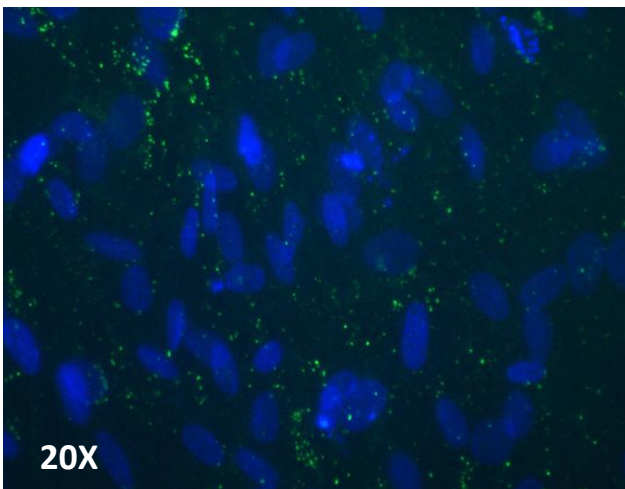


20X

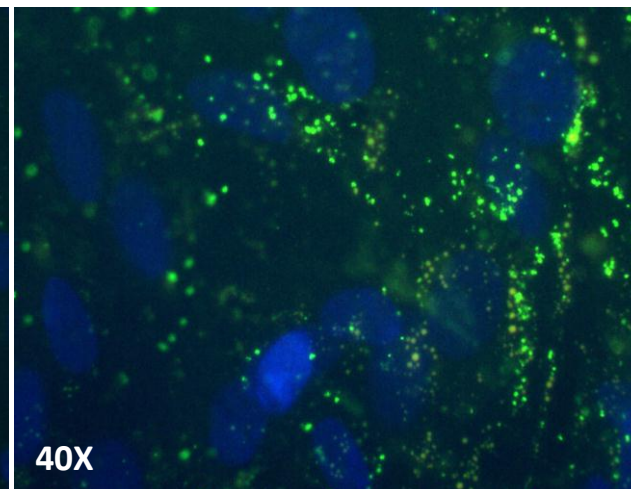


40X

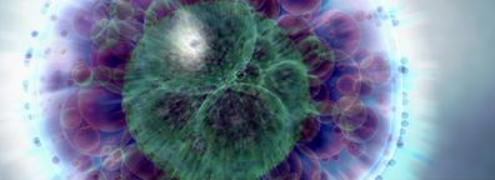
TENO



20X

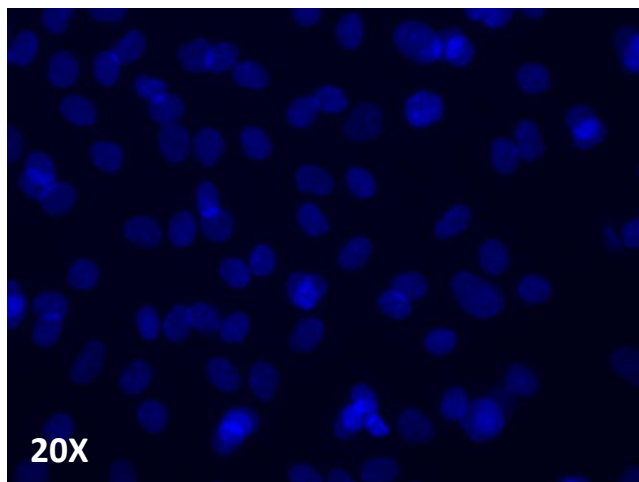


40X

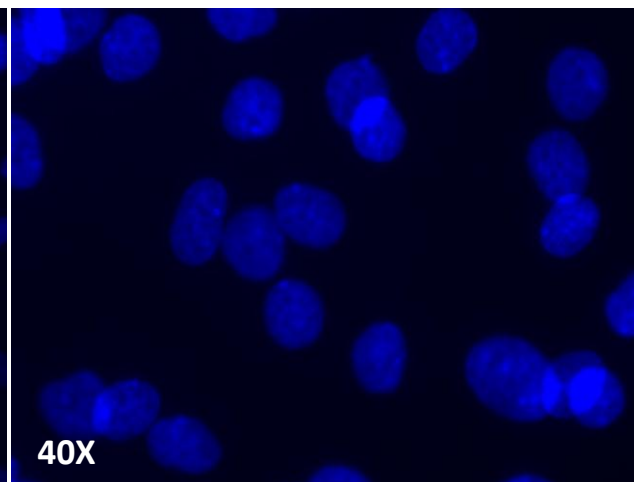


**TENO SF show lower amount of SCX protein expression after 3 days of induction than TENO hPL**

**CTRL**

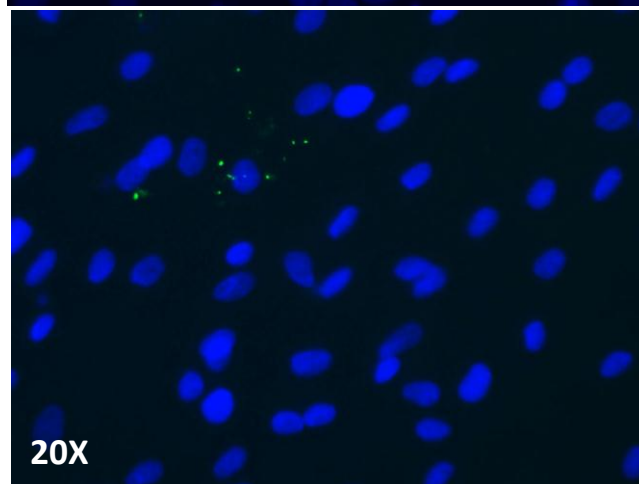


20X

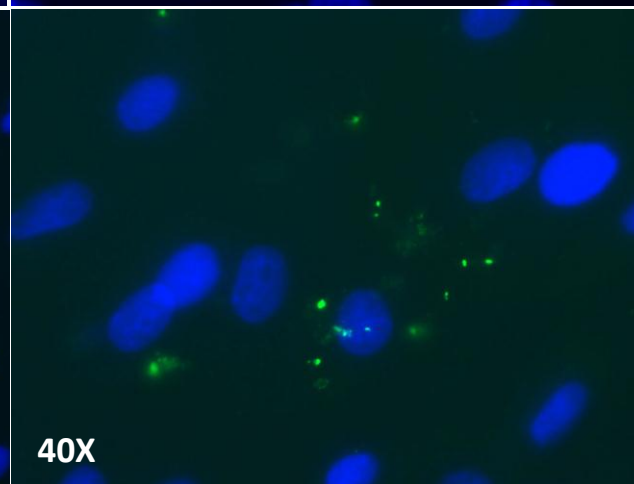


40X

**TENO**

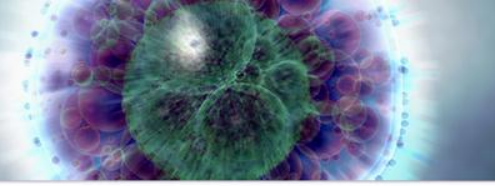


20X



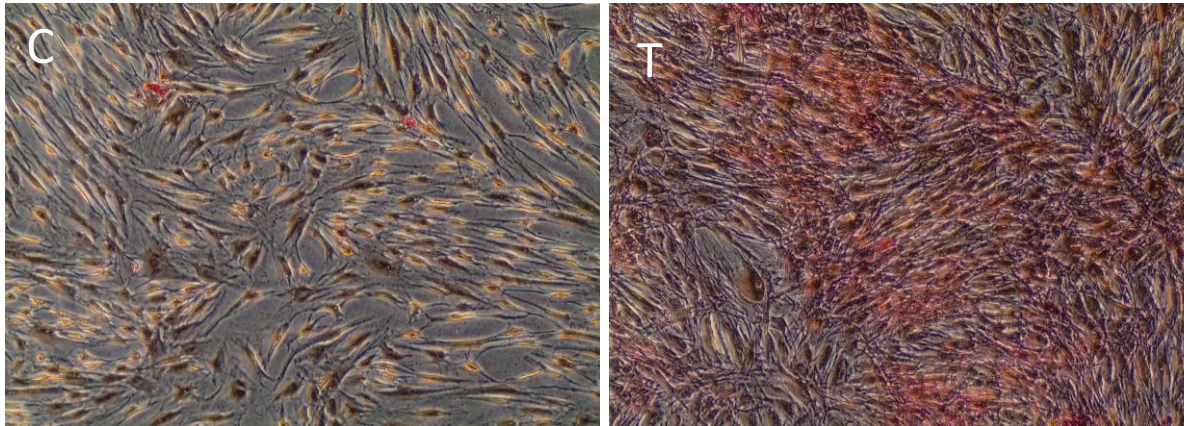
40X



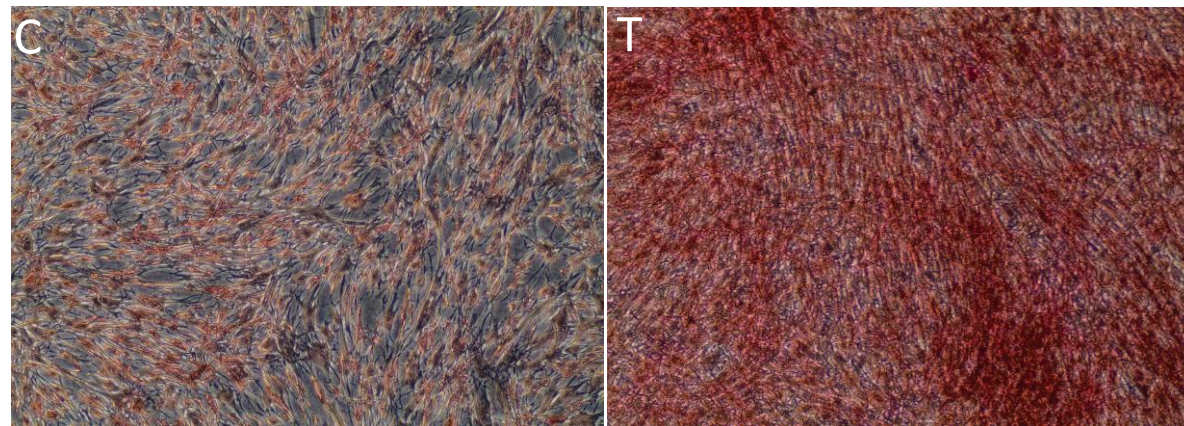


## Collagene type I deposition at 7 days

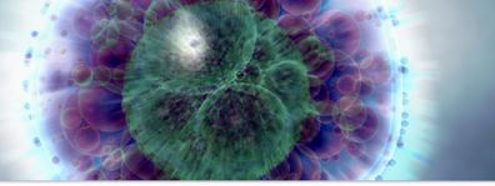
hPL



TENO



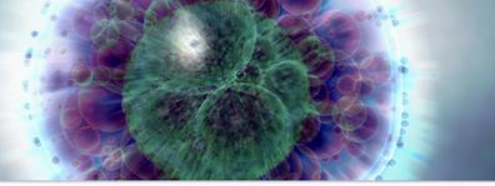
Magnification 4X



## Conclusions

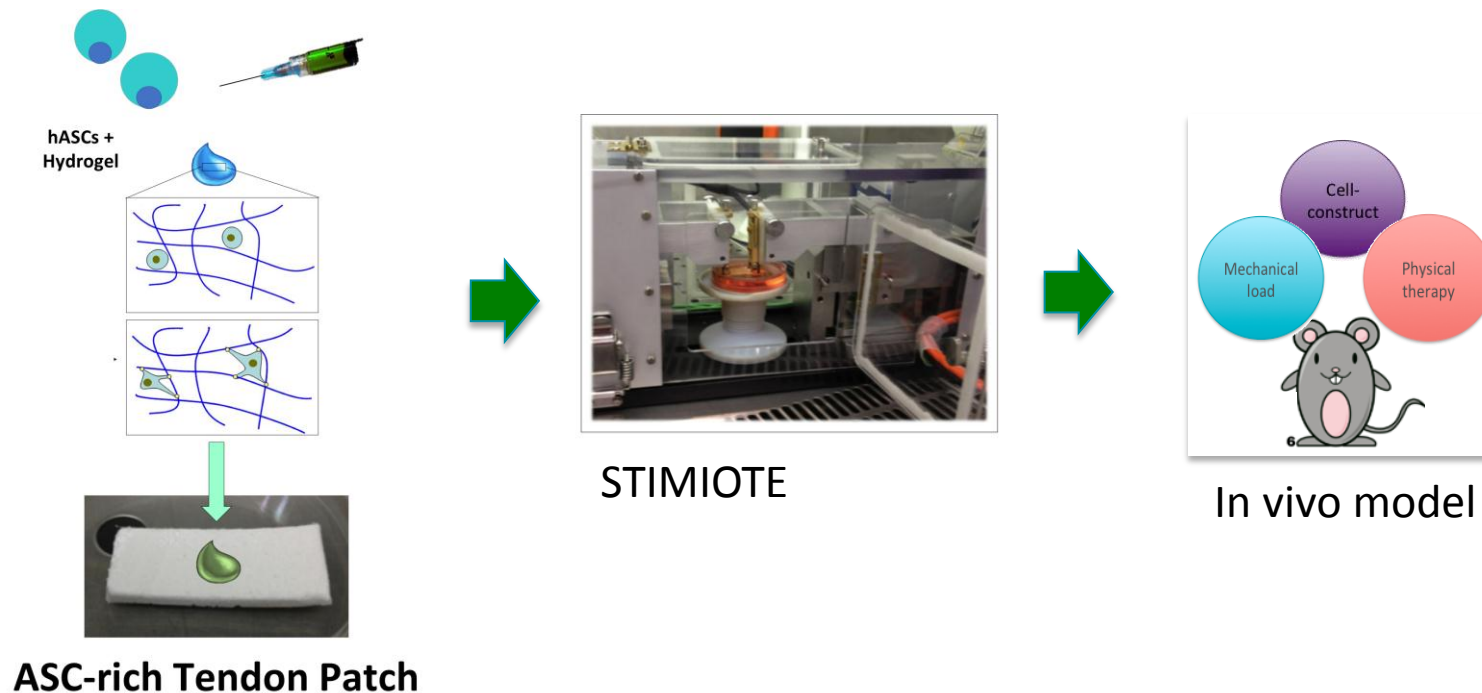
- ASCs expressed tendon related markers in both hPL and SF medium supplement with ascorbic acid and BMP-12, TGF- $\beta$ 3 and CTGF growth factors
- High inter-donor variability: Sample size

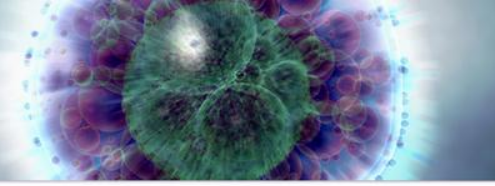




## Next steps

- Evaluation of tenogenic differentiation of ASCs in dynamic 3D condition using STIMIOTE bioreactor and physical therapy before to going to preclinical study

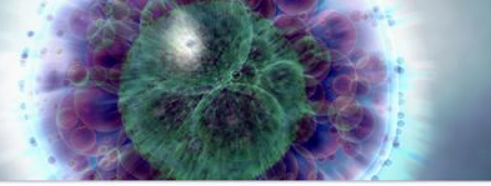




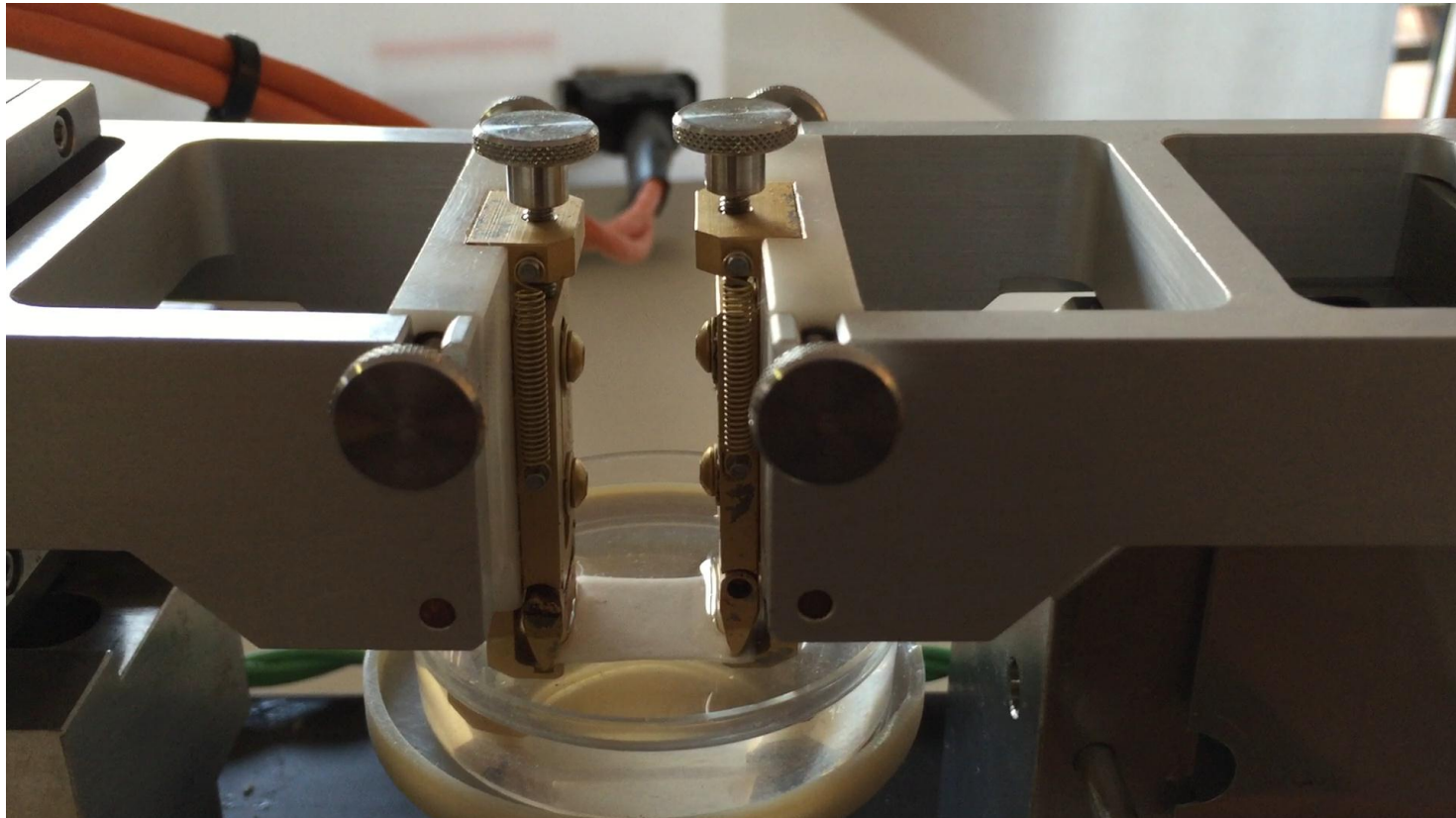
## STIMIOTE

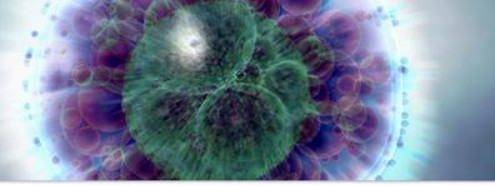
A medical device designed to generate a cyclical mechanical extension of a scaffold seeded with ASCs





# STIMIOTE





## Acknowledgement

- ❖ Dr. med. Eugenio Gandolfi - Academia Day Clinic, Chiasso
- ❖ Dr. med. Kai-Uwe Schlaudraff - treasurer of the ISAPS
- ❖ Prof. Gianluca Ciardelli - Politecnico di Torino
- ❖ Prof. Rosalba Gornati – Uninsubria, Varese
- ❖ All the SSCF team

