

Exploring Applications of Human Primary Cells for Drug Screening in Various Cell Culture Systems

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Abstract

Human primary cells are useful pre-clinical models as they more closely mimic the physiology of cells *in vivo* than continuous cell lines. Here, we explored some of the applications of human primary cells for cytotoxicity assays and drug screening. Cancer is a leading cause of female mortality worldwide and gynecologic cancers have a low survival rate. Further, cytotoxicity is a common side effect of all anti-cancer drugs. We investigated the cytotoxic effects of three anti-cancer drugs (alone or in combination) on three types of normal reproductive cells *in vitro*. Primary human uterine fibroblasts, cervical epithelial cells, and vaginal epithelial cells along with cervical (SiHa) and vaginal (VK2/E6E7) epithelial cancer cell lines were treated for two days with topotecan, paclitaxel, cisplatin, or a combination of topotecan and cisplatin at concentrations of 0 μ M, 0.1 μ M, 1 μ M, 10 μ M, or 100 μ M. Cytotoxicity of these chemotherapeutic drugs was assessed by using Reliablue™ Cell Viability Reagent. Both topotecan and paclitaxel significantly induced cytotoxicity in three types of reproductive primary cells at 0.1 μ M, while cisplatin significantly decreased the viability of all cells at 1 μ M or 10 μ M. Topotecan, when used in combination with cisplatin, resulted to a significant increase in cytotoxicity at 0.1 μ M, 1 μ M, 10 μ M, or 100 μ M. Furthermore, SiHa and VK2/E6E7 cancer cell lines were less sensitive to the aforementioned chemotherapeutic drugs compared to primary cells. Three-dimensional (3D) cell culture systems utilizing primary cells may provide more physiologically relevant information and more predictive data in *in vitro* assays. Primary human skeletal muscle cells can contract under physiological conditions and their contractility may change during tissue injury and repair. To validate a 3D muscle contraction assay for drug screening applications, we embedded primary human skeletal muscle cells with a collagen matrix and treated them for 10 days with 10 mM 2,3-butanedione 2-monoxime (BDM), a known inhibitor of skeletal muscle contraction. The spontaneous contraction of untreated human skeletal muscle cells was observed in a time-dependent manner during the BDM treatment. The results from these assay systems demonstrate that various types of human primary cells can be used for pre-clinical applications including drug screening, toxicology, and modeling physiological responses.

Results

Primary Human Skeletal Muscle Cells As an *In Vitro* Model System for Studying Muscle Differentiation and Contraction

Method of Skeletal Muscle Contraction Assay in 3D Culture: (1) Primary Skeletal Muscle Cells were harvested and re-suspended in complete growth medium (Mesenchymal Stem Cell Basal Medium [ATCC® PCS-500-030™] plus Primary Skeletal Muscle Growth Kit [ATCC® PCS-950-040™]). (2) The cell suspension was mixed with cold collagen gel solution. (3) The cell-collagen mixture was seeded into a 24-well plate and incubated at 37°C for 1 hr. (4) SkMc complete growth media with or without 10 mM 2,3-butanedione monoxime (BDM) was added after collagen gel polymerization. (5) To induce contraction, collagen gels were released from the sides of the wells with a sterile 10 μ L pipette tip. (6) Medium was changed on days 3 and 6.

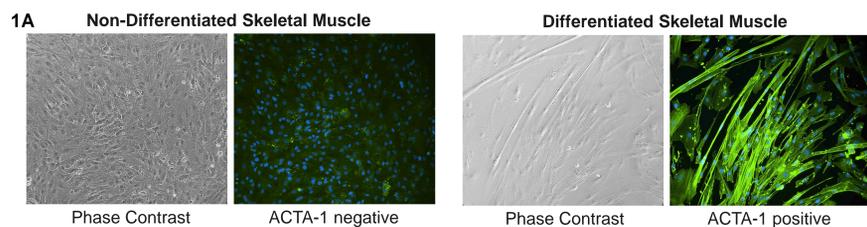


Figure 1A. Immunocytochemistry of non-differentiated and differentiated Primary Skeletal Muscle Cells (SkMc; ATCC® PCS-950-010™) with ACTA-1 antibodies (actin proteins are important for cell movement and muscle fiber contraction). Original magnification, 20x.

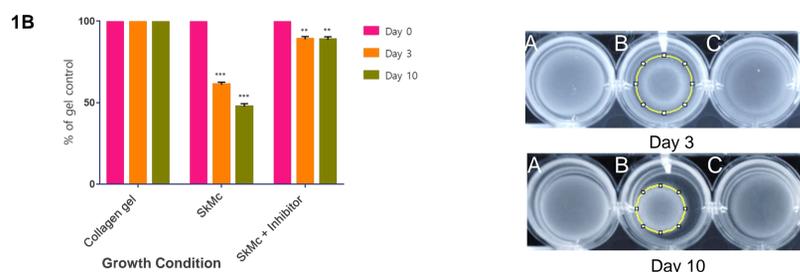


Figure 1B. Skeletal muscle (SkMc) contraction assay. SkMc were embedded with a collagen matrix and treated with or without 10 mM BDM inhibitor for up to 10 days. Significant (**p < 0.01, ***p < 0.001) contraction was observed in SkMc in complete culture medium. SkMc with inhibitor showed less significant (**p < 0.01, ***p < 0.001) contraction. (A) Collagen gel only. (B) SkMc only. (C) SkMc + BDM Inhibitor (**p < 0.01, ***p < 0.001 vs. gel control, Student's T-test).

Drug Screening of Human Primary Cells and Cancer Cell Lines

Method of Toxicity Assay: (1) Primary and continuous human cervical (ATCC® PCS-480-011™ and ATCC® CRL-2616™), primary and continuous vaginal (ATCC® PCS-480-010™ and ATCC® CRL-2616™), and primary uterine (ATCC® PCS-460-010™) cells were seeded in 96-well plates at a density of 30,000 to 40,000 cells/cm². (2) Cells were cultured in their respective expansion media overnight prior to treating with three chemotherapeutic drugs (topotecan, paclitaxel, cisplatin) at 0.1 μ M, 1 μ M, 10 μ M, or 100 μ M for two days. (3) Cytotoxicity was assessed by using Reliablue™ Cell Viability Reagent (ATCC® 30-1014™).

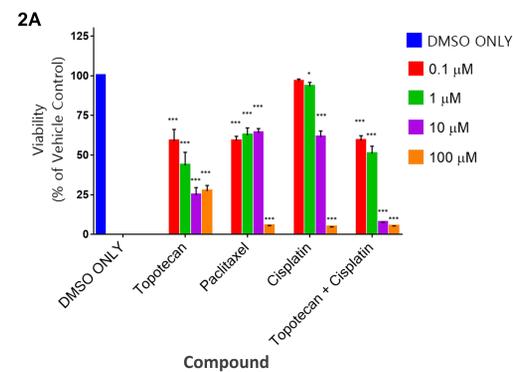


Figure 2A. Human Primary Cervical Epithelial Cells were treated with topotecan, paclitaxel, and cisplatin for 2 days. Topotecan, paclitaxel, and topotecan combined with cisplatin at 0.1 μ M, 1 μ M, 10 μ M, or 100 μ M significantly induced cytotoxicity while cisplatin alone significantly induced cytotoxicity at 1 μ M, 10 μ M, and 100 μ M (n=3, *p < 0.05, **p < 0.01, ***p < 0.001 vs. DMSO control, Student's T-test).

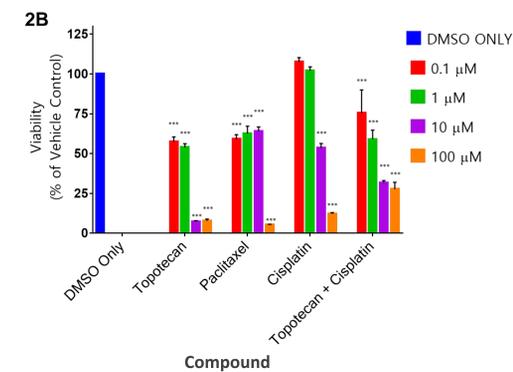


Figure 2B. Human Primary Vaginal Epithelial Cells were treated with topotecan, paclitaxel, and topotecan combined with cisplatin for 2 days. Topotecan, paclitaxel, and topotecan combined with cisplatin at 0.1 μ M, 1 μ M, 10 μ M, or 100 μ M significantly induced cytotoxicity. Cisplatin alone significantly induced cytotoxicity at 10 μ M and 100 μ M (n=3, ***p < 0.001 vs. DMSO control, Student's T-test).

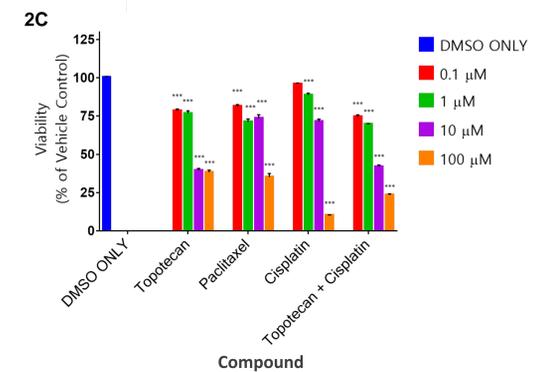


Figure 2C. Human Primary Uterine Fibroblasts Cells were treated with topotecan, paclitaxel, and topotecan combined with cisplatin for 2 days. Topotecan, paclitaxel, and topotecan combined with cisplatin at 0.1 μ M, 1 μ M, 10 μ M, or 100 μ M significantly induced cytotoxicity. Cisplatin alone significantly induced cytotoxicity at 1 μ M, 10 μ M, and 100 μ M (n=3, ***p < 0.001 vs. DMSO control, Student's T-test).

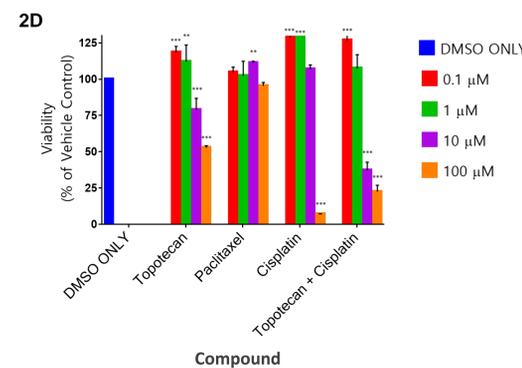


Figure 2D. SiHa cervical cancer epithelial cells were treated with topotecan, paclitaxel, and cisplatin for 2 days. Topotecan at 10 μ M or 100 μ M significantly induced cytotoxicity while paclitaxel didn't decrease cell viability. Cisplatin significantly induced cytotoxicity only at 100 μ M. Topotecan combined with cisplatin at 10 μ M or 100 μ M significantly induced cytotoxicity (n=3, **p < 0.01, ***p < 0.001 vs. DMSO control, Student's T-test).

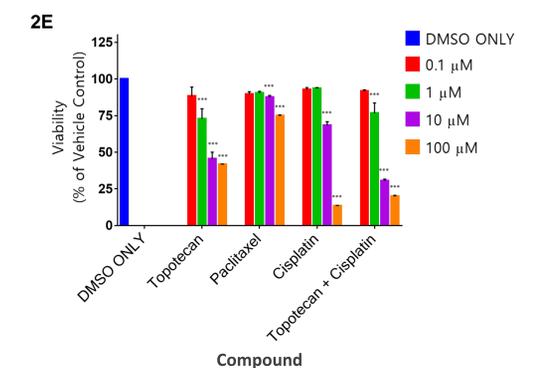


Figure 2E. VK2/E6E7 vaginal mucosal epithelial cancer cells were treated with topotecan, paclitaxel, and cisplatin for 2 days. Topotecan and a combination of topotecan and cisplatin at 1 μ M, 10 μ M, or 100 μ M, significantly induced cytotoxicity. Paclitaxel or cisplatin significantly induced cytotoxicity at 10 μ M (n=3, ***p < 0.001 vs. DMSO control, Student's T-test).

Summary

- Human primary cells can be used for pre-clinical applications including drug screening, toxicology, and modeling physiological responses.
- Topotecan, paclitaxel, and cisplatin were toxic to primary cervical and vaginal epithelial cells and primary uterine fibroblast cells.
- *In vitro* muscle contractile function assays are important to characterize SkMc and to demonstrate the efficacy of a muscle treatment such as an inhibitor.