

# 3D TISSUE MODELING

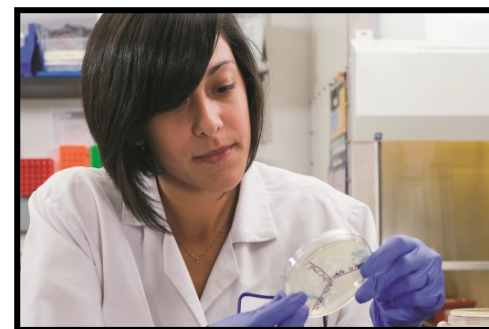
John Pulliam Ph.D.  
Field Application Scientist, ATCC  
November 13, 2014



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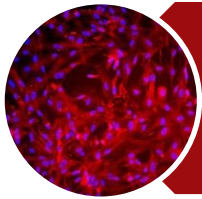
# About ATCC

- Founded in 1925, ATCC is a non-profit organization with headquarters in Manassas, VA
- World's premiere biological materials resource and standards development organization
- ATCC collaborates with and supports the scientific community with industry-standard products and innovative solutions
- Broad range of biomaterials
  - Continuous cell lines, iPSCs, primary cells, and hTERT immortalized cells
  - Bacteria, fungi, yeasts, protists, and viruses
  - Microbial and tumor cell panels
  - Genomic and synthetic nucleic acids
  - Media, sera, and reagents

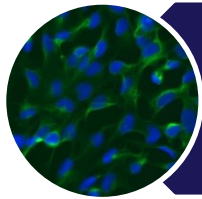




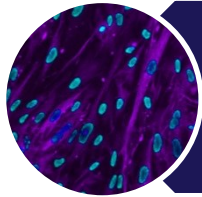
# Outline



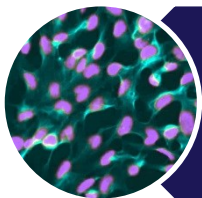
The significance of 3D culture



Air-liquid interface respiratory models

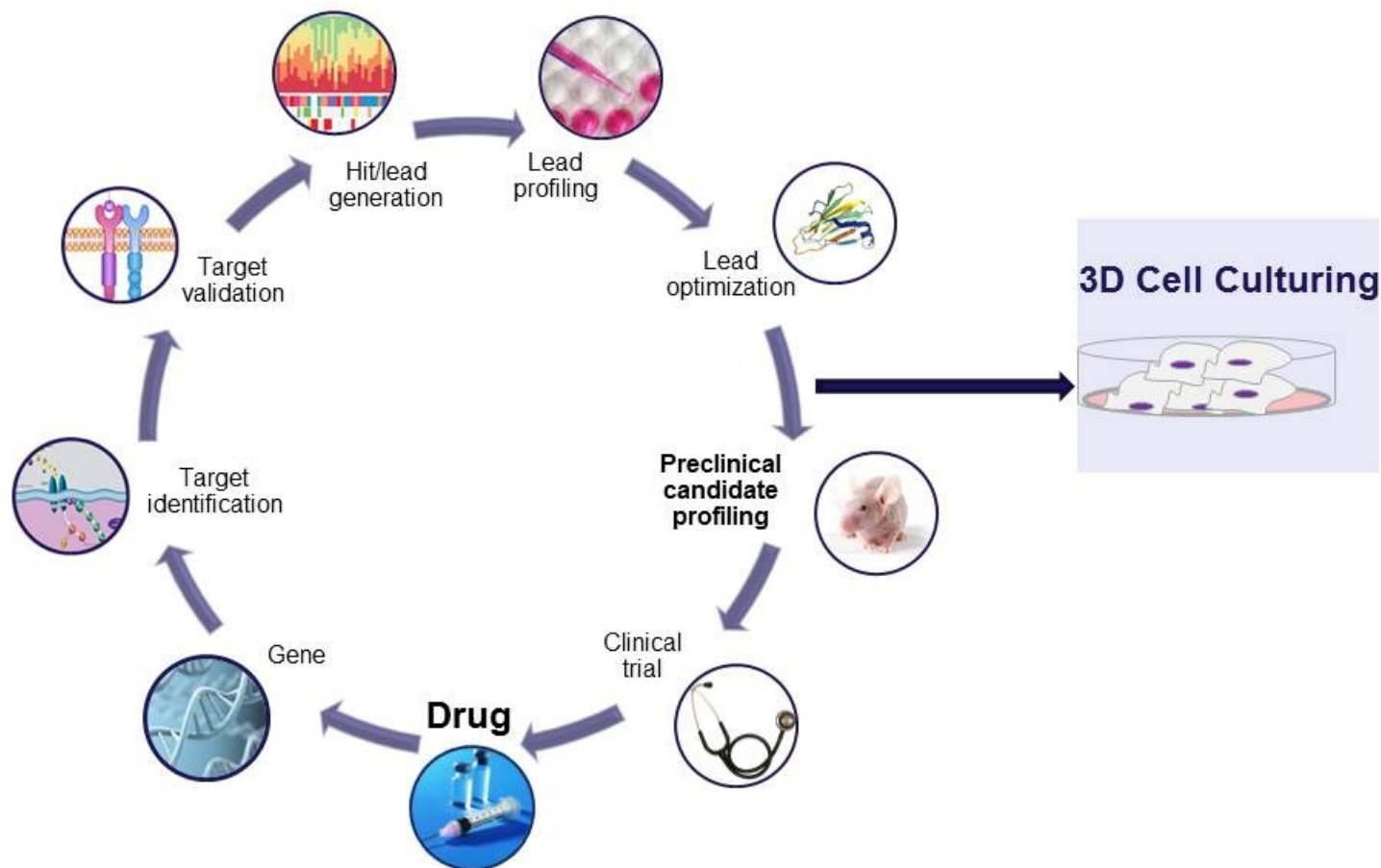


Dermatologic models



Angiogenesis models

# Role of 3D culture in drug discovery



3D culture is more reflective of *in vivo* tissue conditions and may improve the predictive modeling of therapeutic drugs

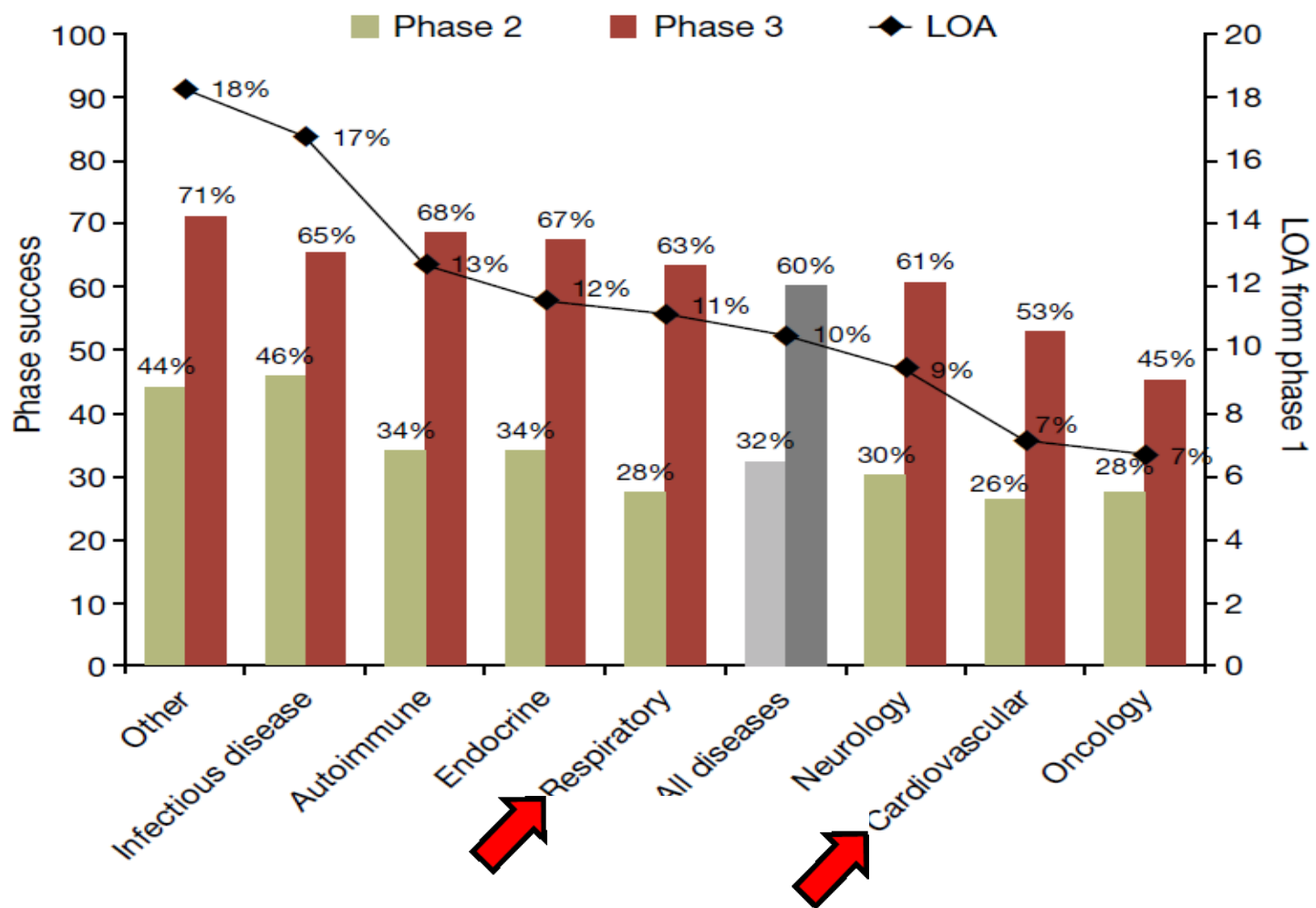




# Comparison of 2D and 3D culturing

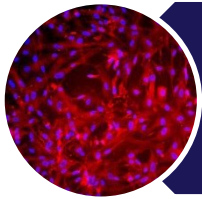
Culture	Strengths	Limitations
<b>2D</b>	<ul style="list-style-type: none"><li>• Simplistic model</li><li>• Easy to culture</li><li>• Time to develop models</li></ul>	<ul style="list-style-type: none"><li>• Monolayer structure</li><li>• Tight junctions</li><li>• Non-optimal physiologic response</li></ul>
<b>3D</b>	<ul style="list-style-type: none"><li>• Complex - closer to <i>in vivo</i> tissue</li><li>• Reduces need for animal models</li><li>• Less cost vs animal models</li><li>• Improved drug screening efficiency vs animal models</li></ul>	<ul style="list-style-type: none"><li>• Complexity of design</li><li>• Time required to develop models</li></ul>

# Likelihood of approval (LOA) by disease

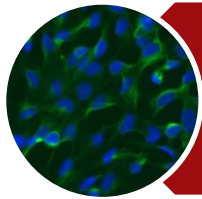




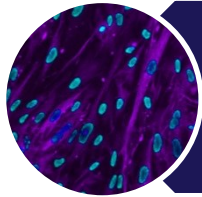
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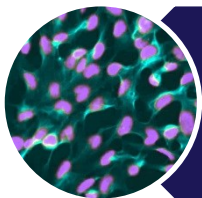
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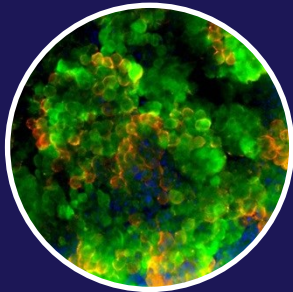
Dermatologic models



Angiogenesis models

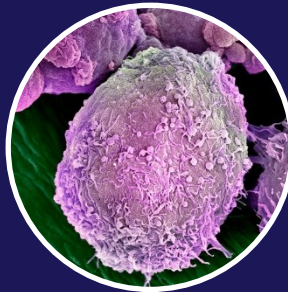
# ATCC Normal Human Primary Cells

- ATCC Primary Cells provide complete culture reagents formulated for optimal cell growth, morphology, and functionality
- ATCC Primary Cells are provided at very low passage



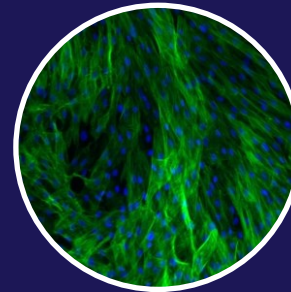
## Mesenchymal

Umbilical Cord-derived  
Bone Marrow-derived  
Adipose-derived



## Immune

Peripheral Blood Monocytes (PBMC)  
PBMC CD34+  
Cord Blood CD34+  
Bone Marrow CD34+



## Smooth muscle

Aortic  
Coronary Artery  
Pulmonary Artery  
Lung  
Bronchial/ tracheal



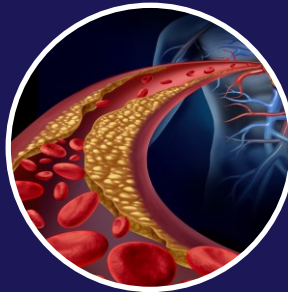
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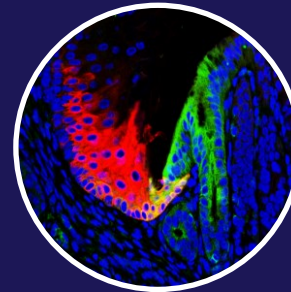
## Dermal

Keratinocytes  
Melanocytes  
Adipose-derived  
Fibroblasts



## Endothelial

Aortic  
Coronary Artery  
Dermal Microvascular  
Pulmonary Artery  
Umbilical Vein  
Umbilical Vein; Pooled



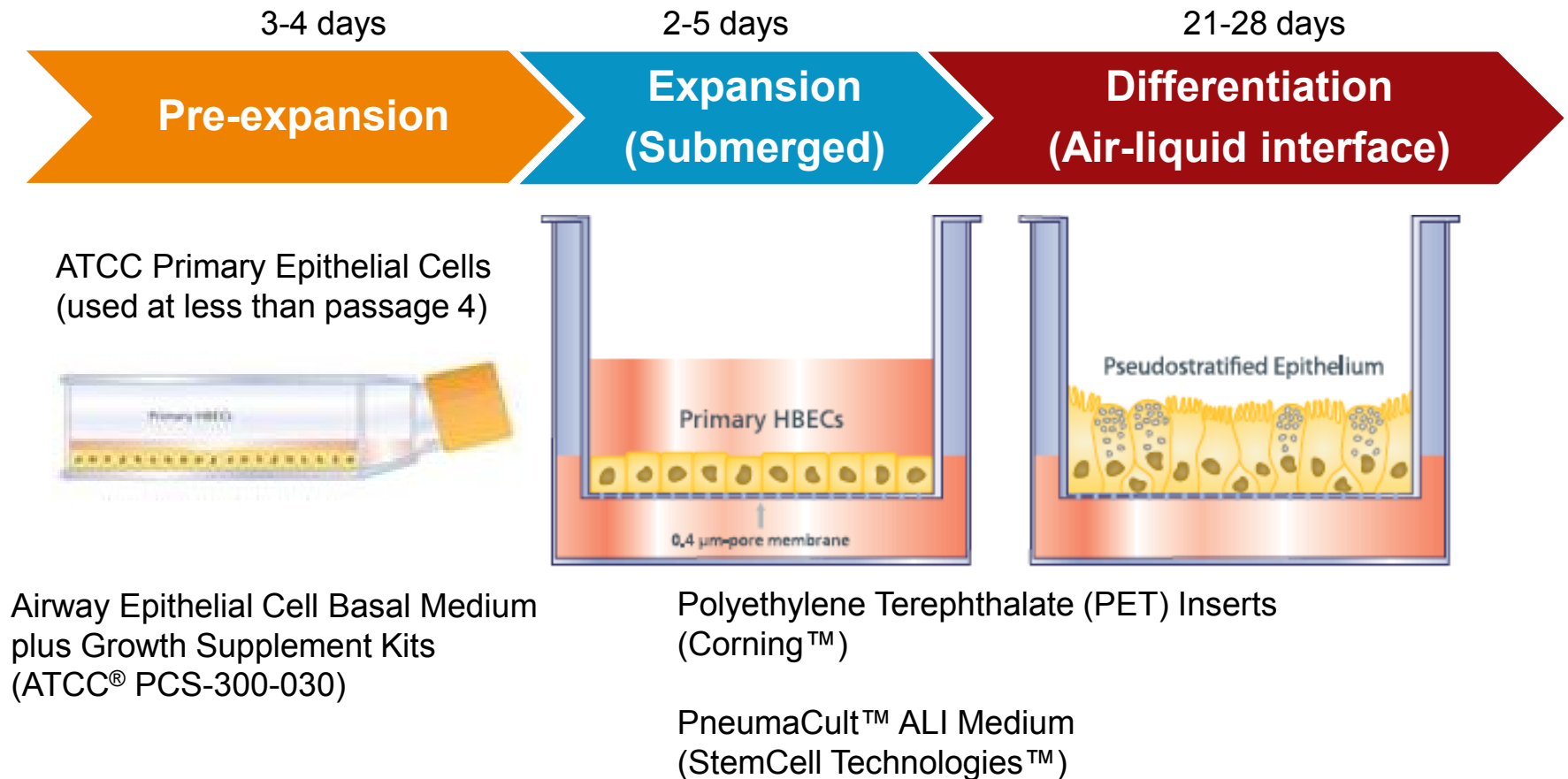
## Epithelial

Bronchial/Tracheal  
Small Airway  
Corneal  
Mammary  
Prostate  
Renal Proximal Tubule  
Renal Distal Tubule

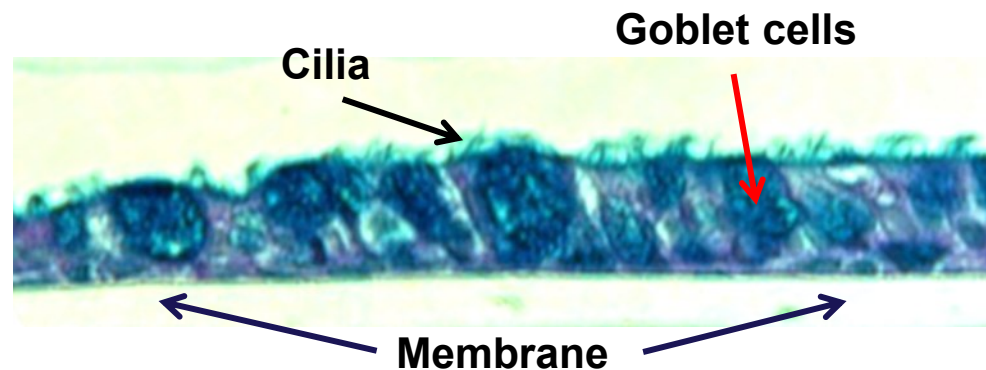
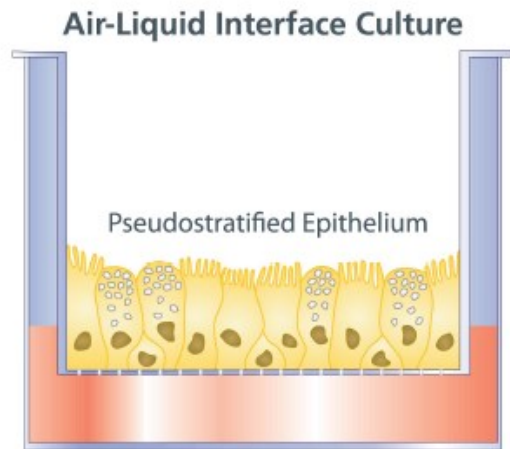
# Air-liquid interface (ALI) cultures

Normal Human Small Airway Epithelial Cells (ATCC® PCS-301-010)

Normal Human Bronchial/Tracheal Epithelial Cells (ATCC® PCS-300-010)



# Human airway epithelium



Polarized differentiated airway epithelium has the following features:

- Presence of goblet cells for mucin secretion (Periodic Acid-Schiff (PAS)-Alcian blue)
- Presence of ciliated cells (ciliogenesis)
- Presence of good barrier function (transepithelial resistance)

# ATCC Human Bronchial Epithelial Cells

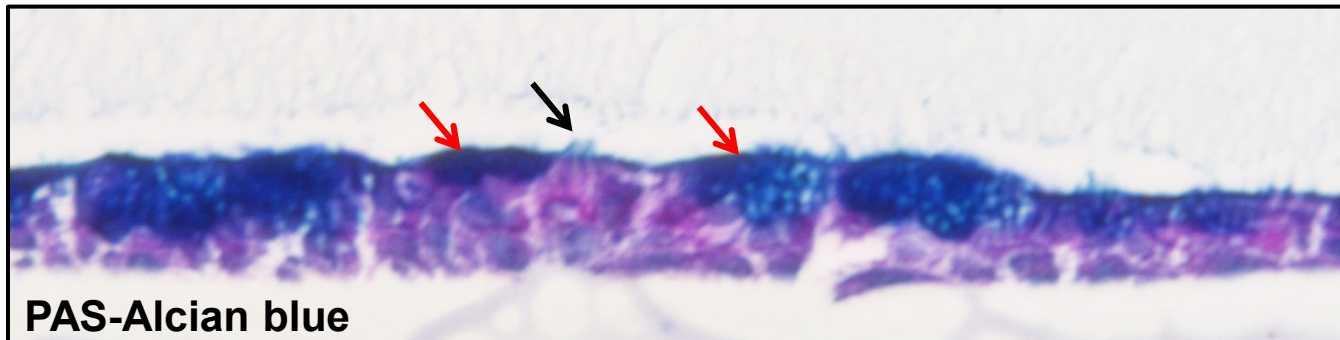
ATCC Airway Epithelial Cell Basal Medium (ATCC® PCS-300-030) plus  
Bronchial Epithelial Cell Growth kit (ATCC® PCS-300-040)

At passage 3: 21 days in PneumaCult ALI differentiation media

## Pseudostratified epithelium with cilia



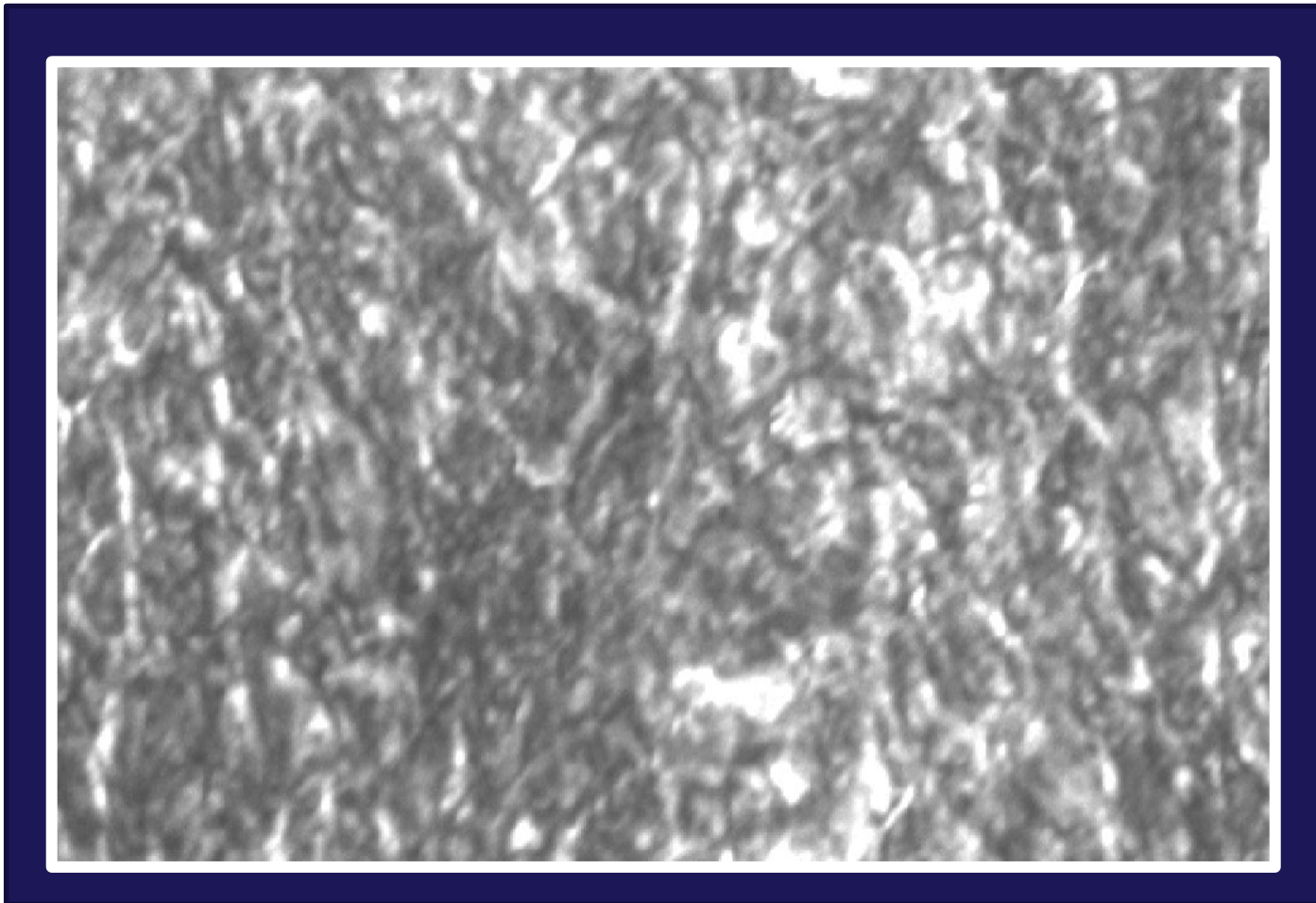
## Goblet cell differentiation





# Beating cilia by ALI differentiation

ATCC Human Bronchial Epithelial Cells 26 days post airlift



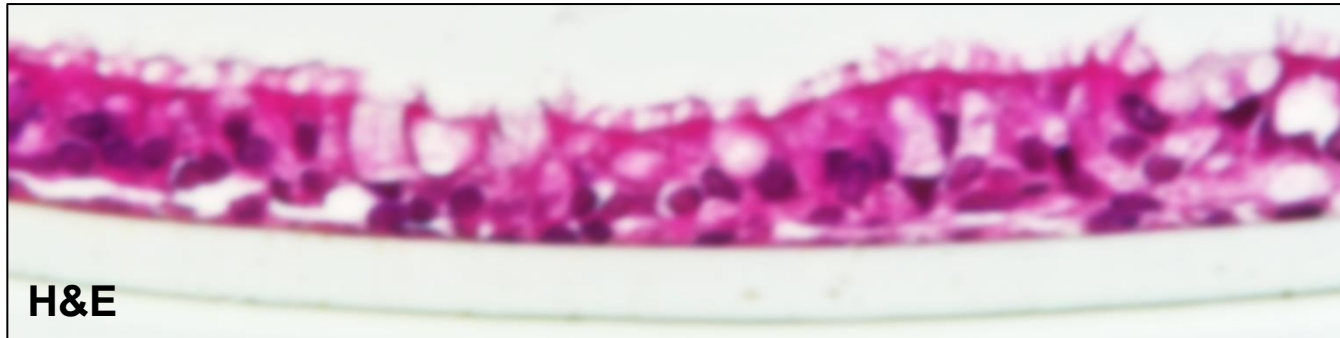


# ATCC Human Small Airway Epithelial Cells

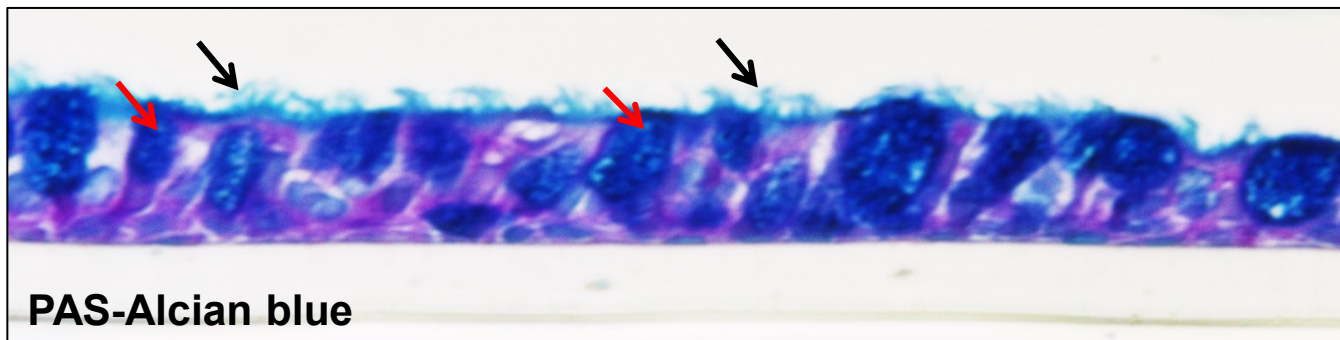
ATCC Airway Epithelial Cell Basal Medium (ATCC PCS-300-030)  
and Small Airway Epithelial Cell Growth kit (ATCC PCS-301-040)

At passage 3: ALI differentiation for 21 days in PneumaCult ALI differentiation media

## Pseudostratified epithelium with cilia

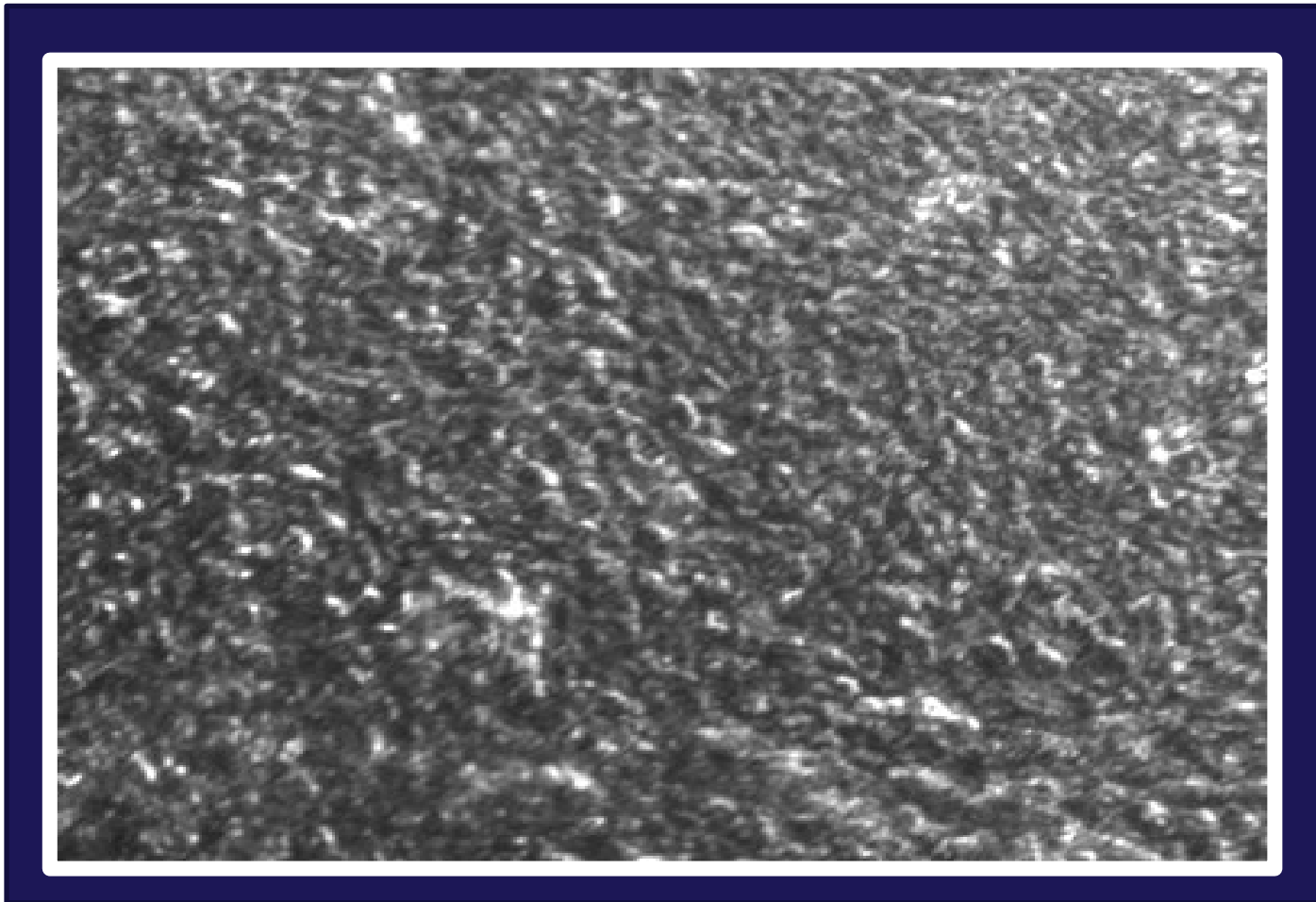


## Goblet cells

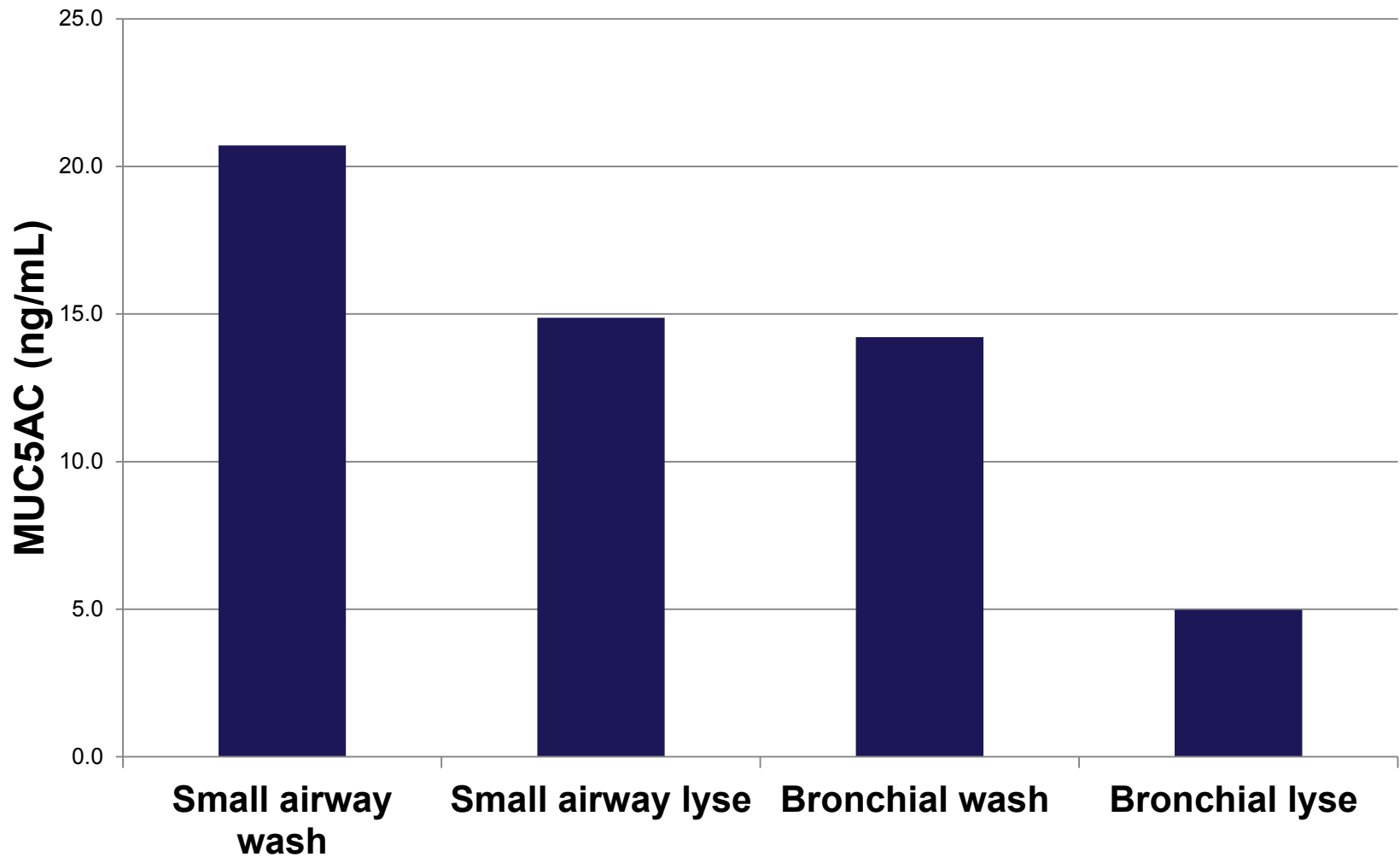


# Beating cilia by ALI differentiation

ATCC Human Small Airway Epithelial Cells 25 days post airlift

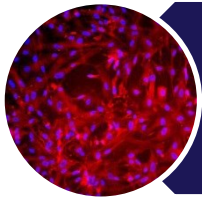


# Mucin secretion, Primary Small Airway and Bronchial Epithelial Cells 28 days post airlift

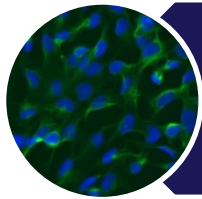




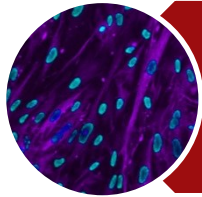
# Outline



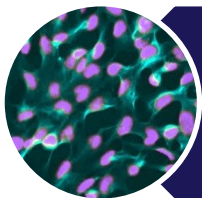
The significance of 3D culture



Air-liquid interface respiratory models



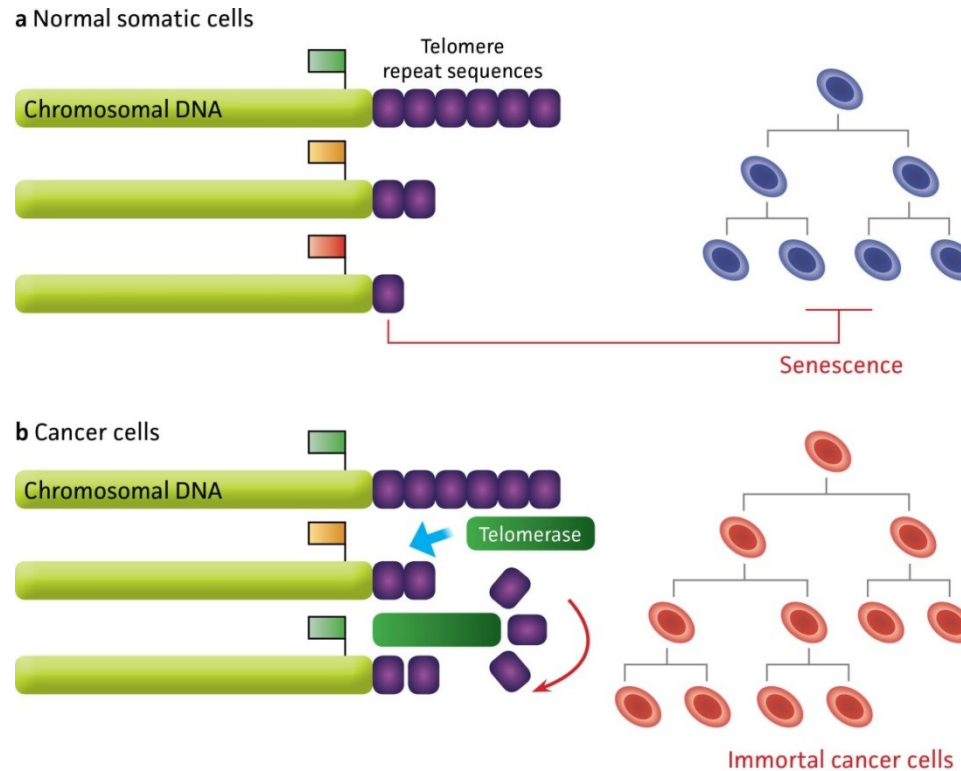
Dermatologic models



Angiogenesis models

# Bypassing replicative senescence

Overexpression of telomerase and supportive oncoproteins in primary cells



**Note:** Viral (Large T and small T antigen, HPV-16 E6/E7) and non-viral (Cdk-4 and Bmi-1) onco-protein vectors may also be used to support the hTERT immortalization vector



# hTERT Immortalized Cells - unique tools

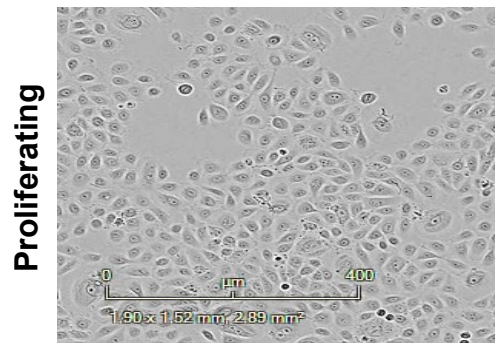
	Primary cells	hTERT immortalized	Oncogene, viral immortalized	Cancer cell lines
Mimic <i>in vivo</i> Tissue Phenotype	++++	+++	++	+
Genotypic Stability	Diploid	Diploid / Near diploid	Near diploid / Aneuploid	Aneuploid
Proliferative Capacity	+	+++	+++	+++
Supply	+	+++	+++	+++
Inter-experimental Consistency	Low	Good	Good	Good
Cost	High	Medium	Low	Low
Ease of Use	+	++	++	+++

*Pros and cons of different cell models for tissue-relevant functional studies*

hTERT immortalized cells combine the physiological nature of primary cells and the ability to be cultured continuously, avoiding the limitations of both types while still reaping their benefits.

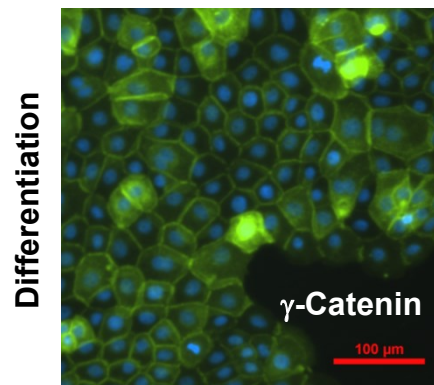
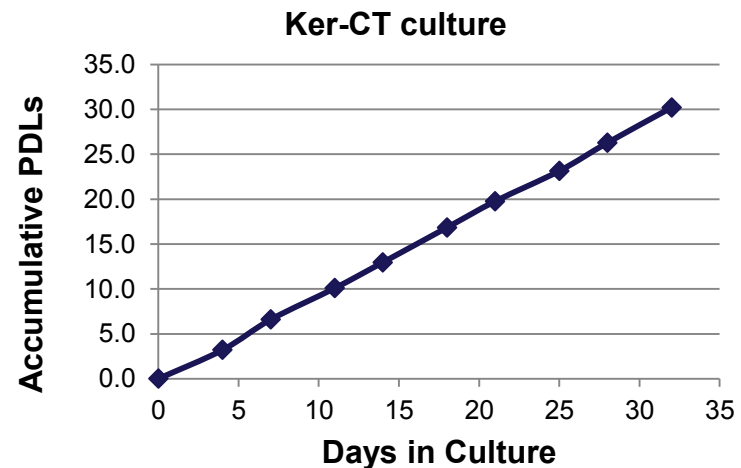
# Ker-CT– Immortalized Keratinocytes retain intact differentiation capability

- Ker-CT (ATCC® CRL-4048™): immortalized by hTERT and CDK4 from neonatal foreskin keratinocytes

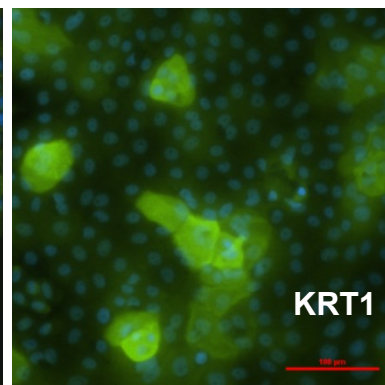


Proliferating

5000 cell/cm<sup>2</sup>, Day 3

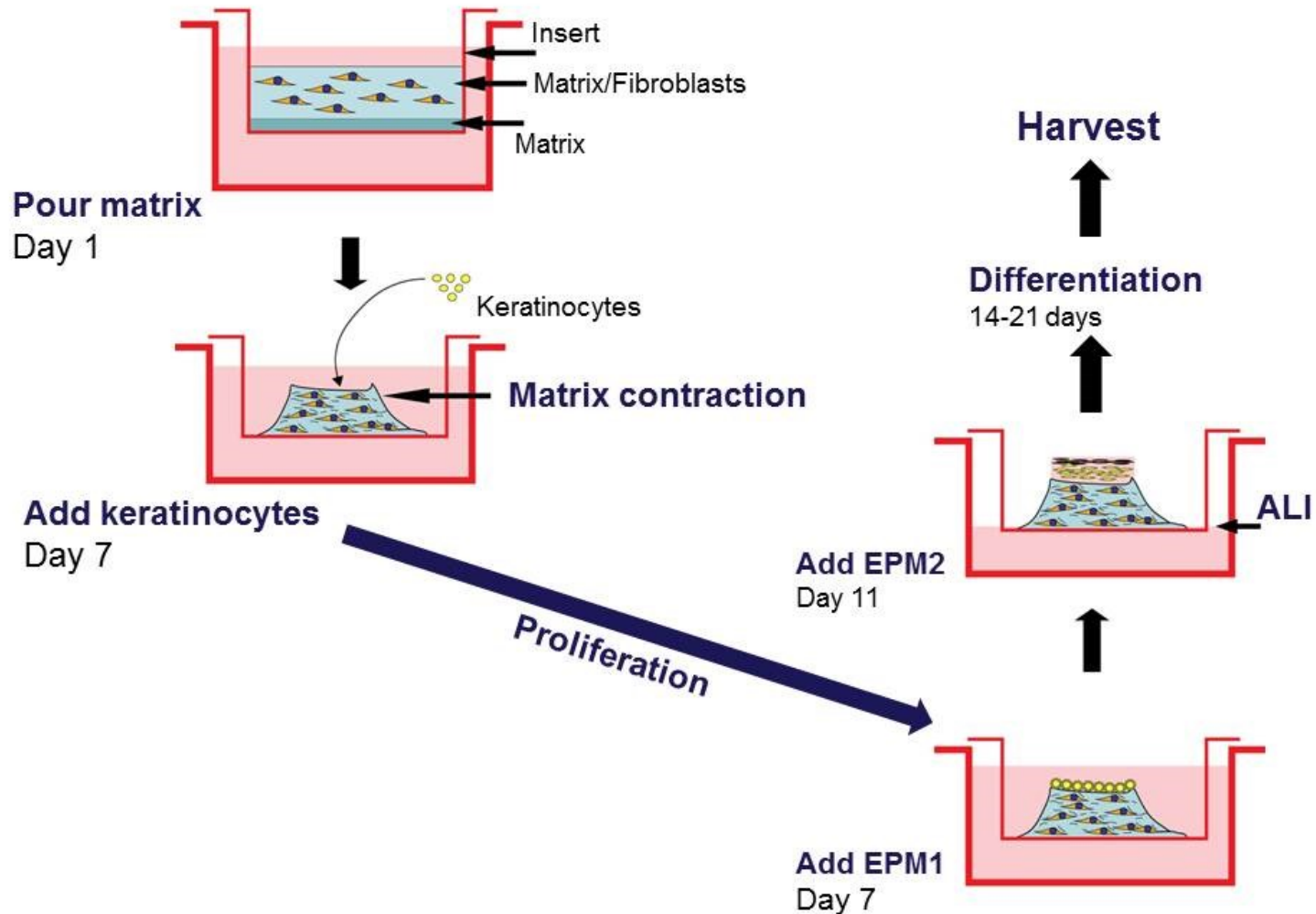


Differentiation



2D differentiation, Day 4

# Keratinocytes grown in raft co-culture



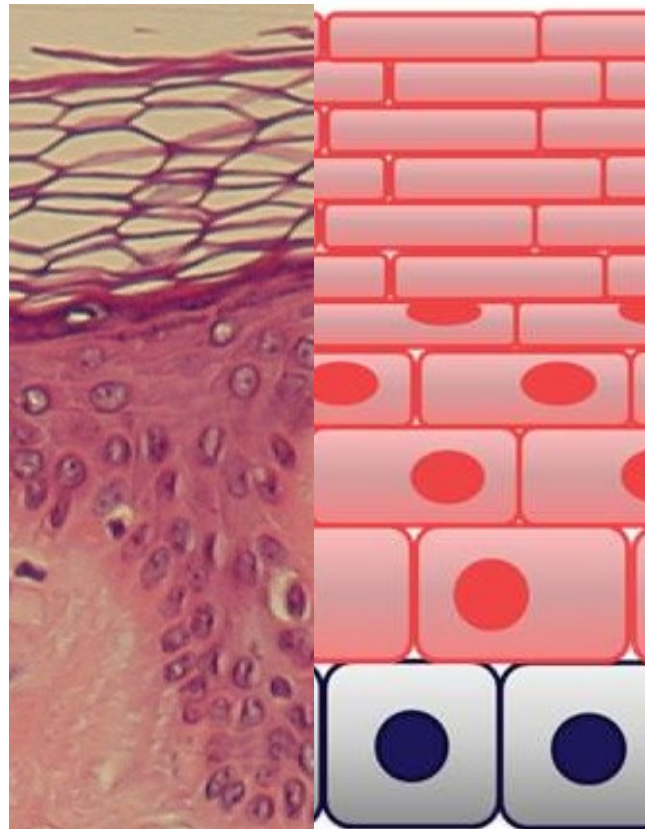
# Differentiation of epidermal keratinocytes

**Cornified**

**Granular**

**Spinous**

**Basal**



## **Cornification**

- Cornified cell envelope
- Nuclear breakdown

## **Late Differentiation**

- Filaggrin

## **Early Differentiation**

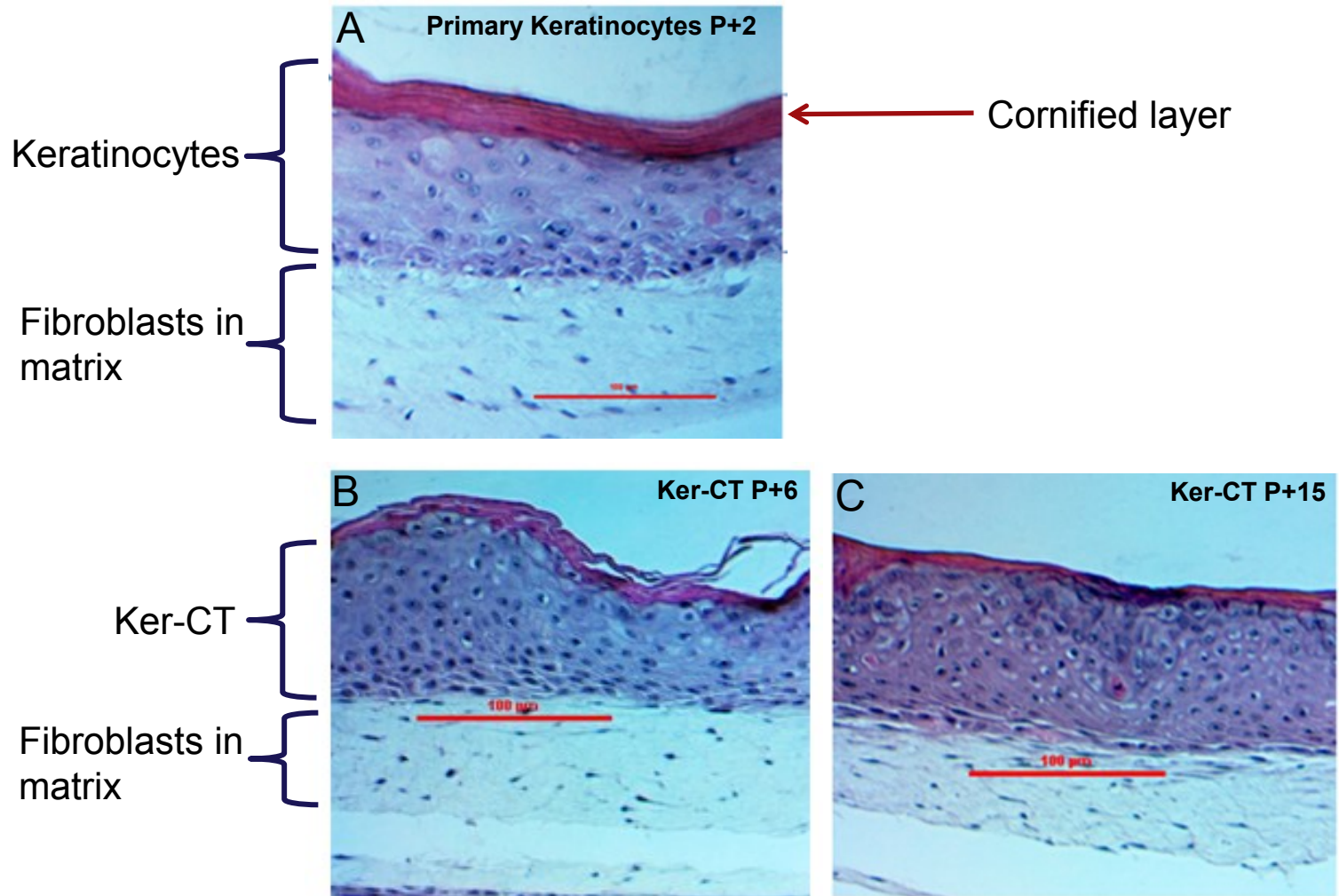
- Growth arrest and Keratin (KRT)

## **Proliferation**

- DNA synthesis and mitosis
- KRT 5 and KRT 14

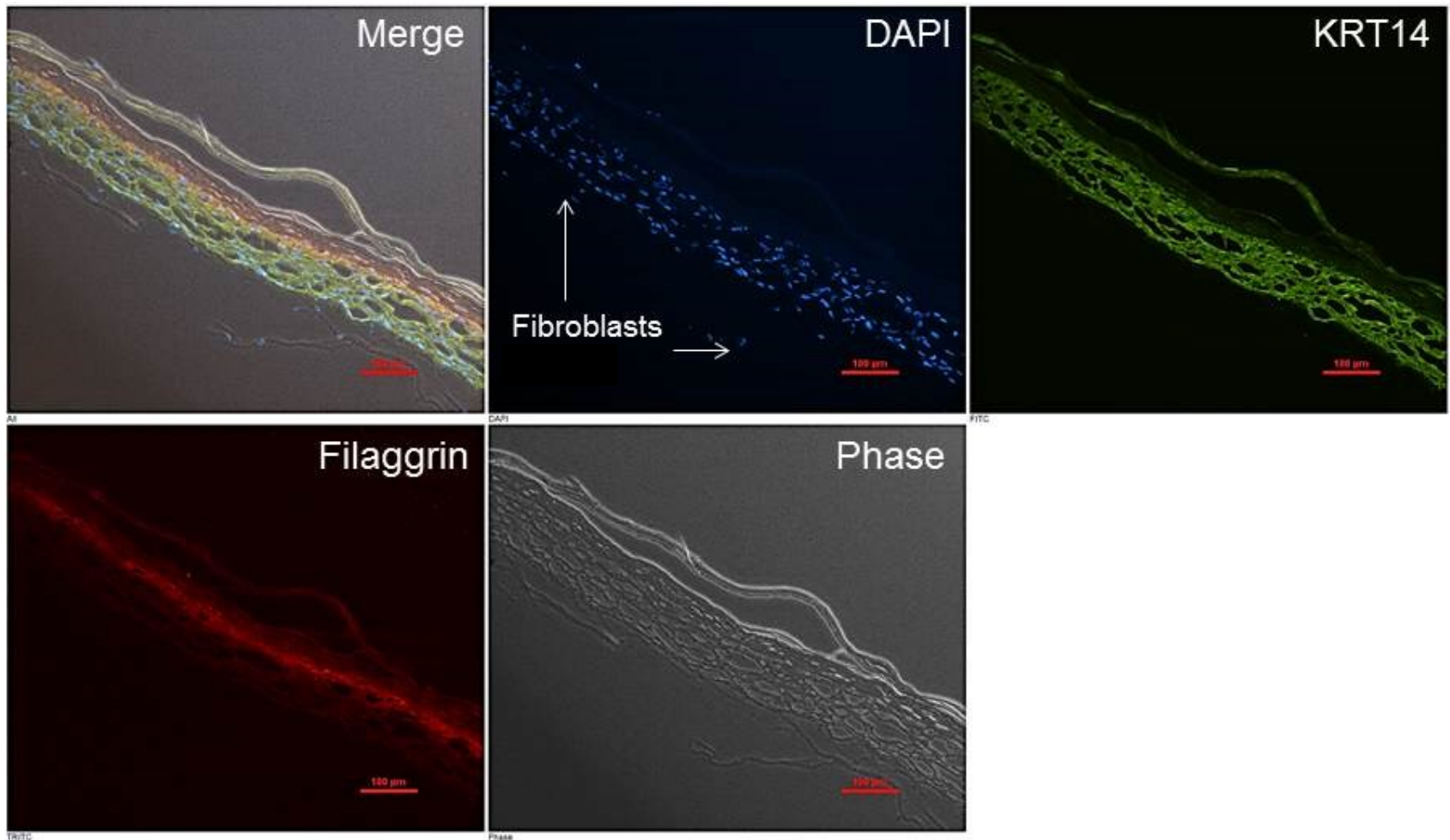


# Primary Keratinocyte and Ker-CT differentiation

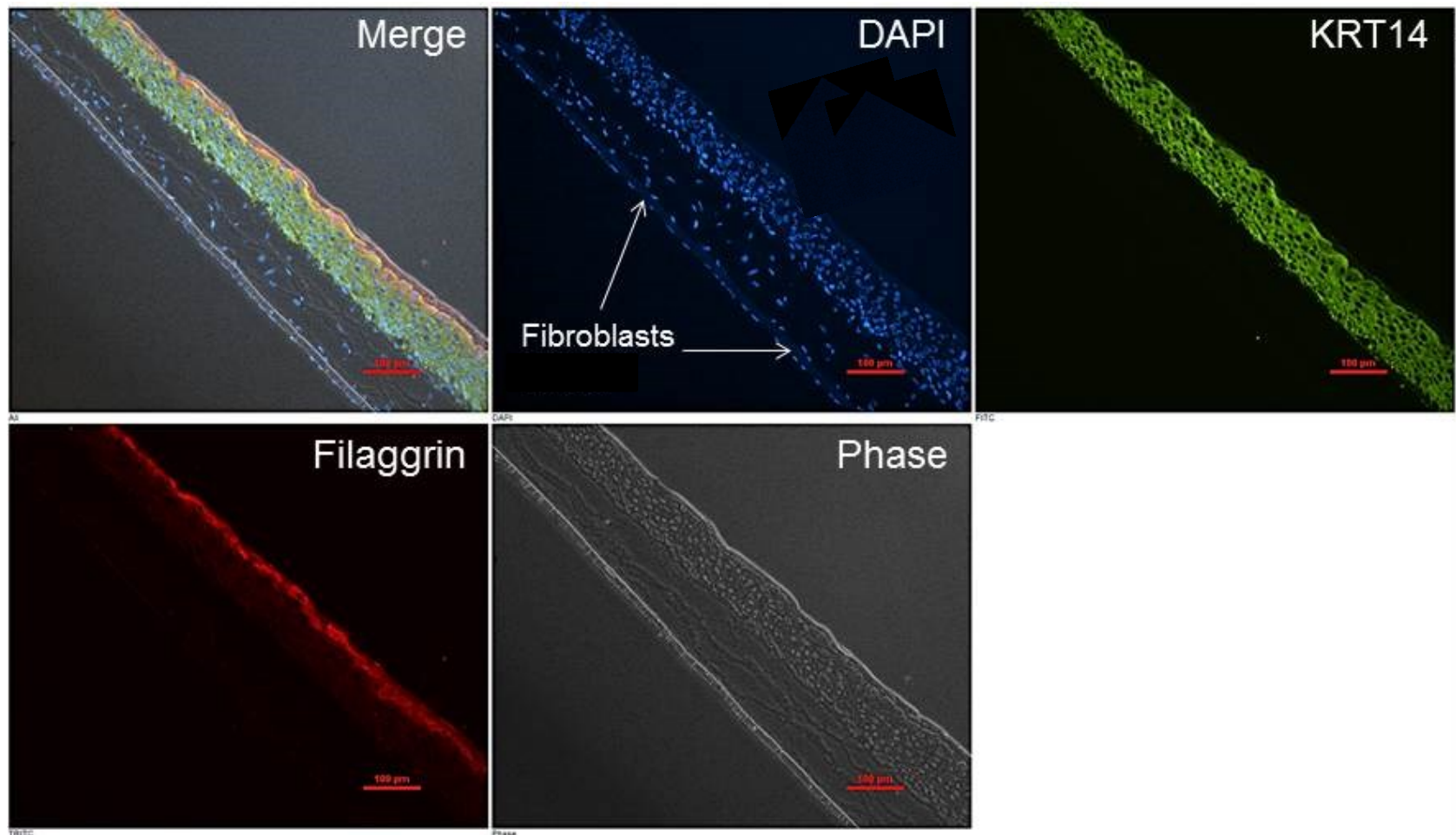




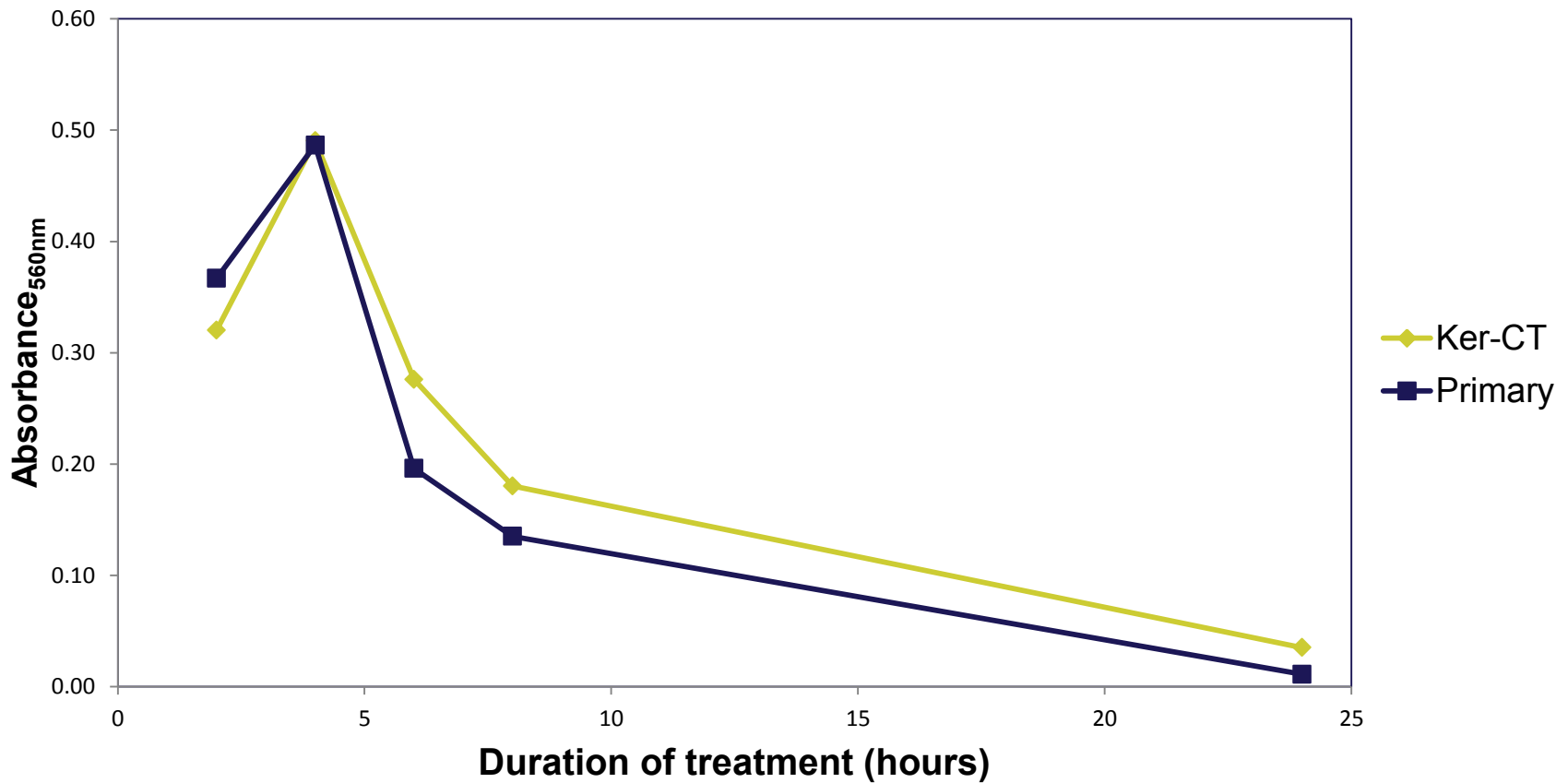
# Immunohistochemistry of Primary Keratinocyte culture 11 days post airlift



# Immunohistochemistry of Ker-CT culture 11 days post airlift



# Keratinocyte 3D skin model toxicology test with 1% Triton X-100™



Survival monitored by MTT Cell Proliferation Assay (ATCC® 30-1010K)



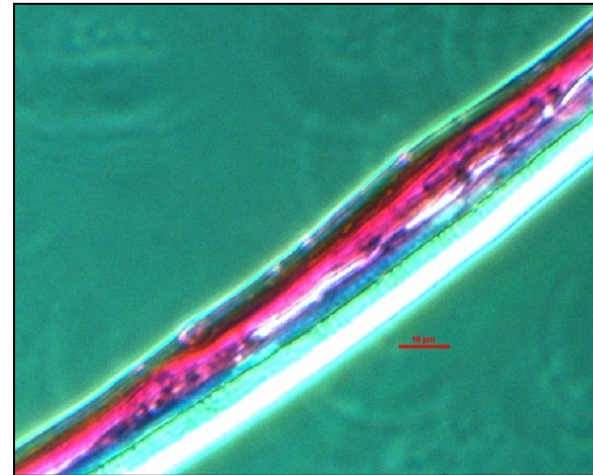
# Keratinocytes 14 days post airlift

Primary Keratinocytes

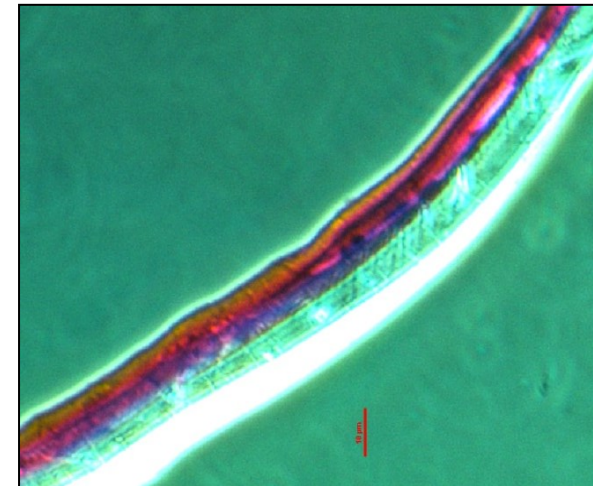
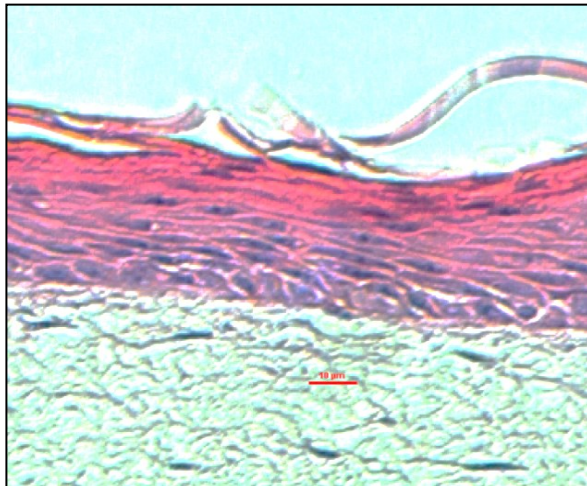
With raft



Without raft



Ker-CT

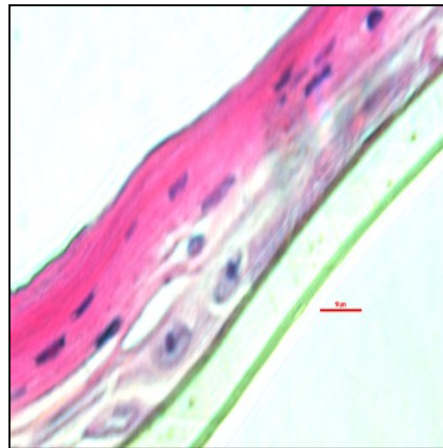


# Primary Keratinocytes and Ker-CT 21 days post airlift

## Co-culture

Primary Keratinocytes

hTERT-Fibroblast

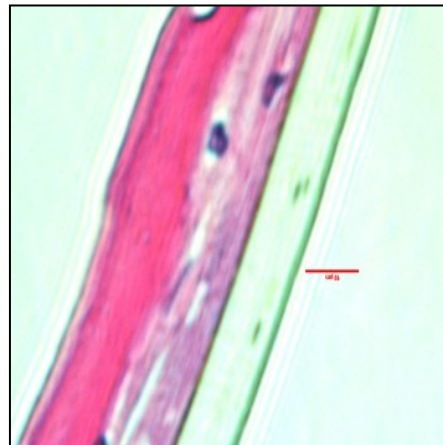


Primary Fibroblast

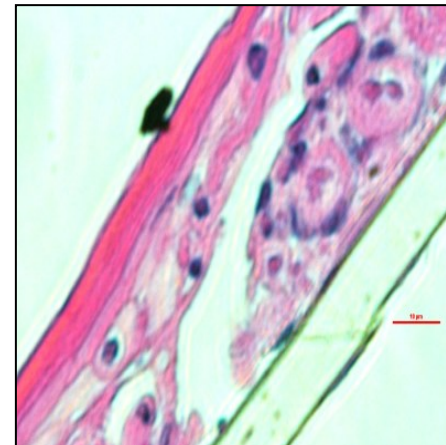


Ker-CT

hTERT-Fibroblast

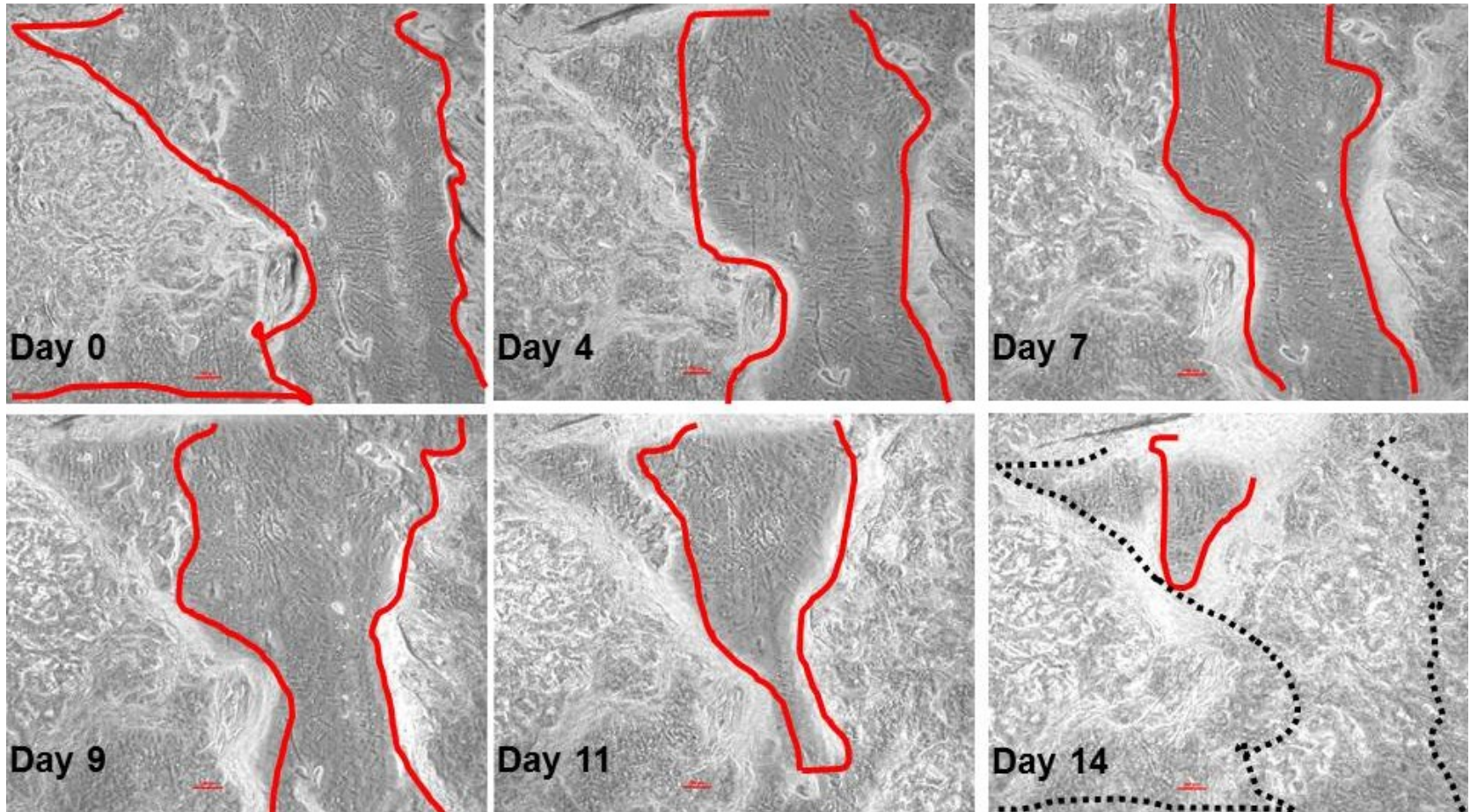


Primary Fibroblast





# Scratch assay: Ker-CT co-culture with hTERT-MSCs, 21 days post airlift



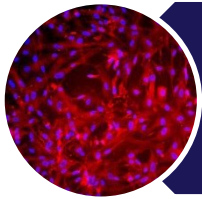


# Summary: Dermatologic co-cultures

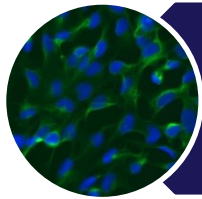
- Both primary and hTERT immortalized keratinocytes are viable resources for modeling skin
- Our raft co-culture supports growth and differentiation of primary and hTERT immortalized keratinocytes
- Keratinocyte co-cultures minus the raft are supported by fibroblasts
- Primary and immortalized co-culture models can be used to support skin toxicity studies – wound healing models may be supported by immortalized MSC co-cultures



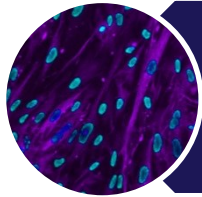
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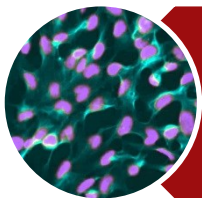
The significance of 3D culture



Air-liquid interface respiratory models



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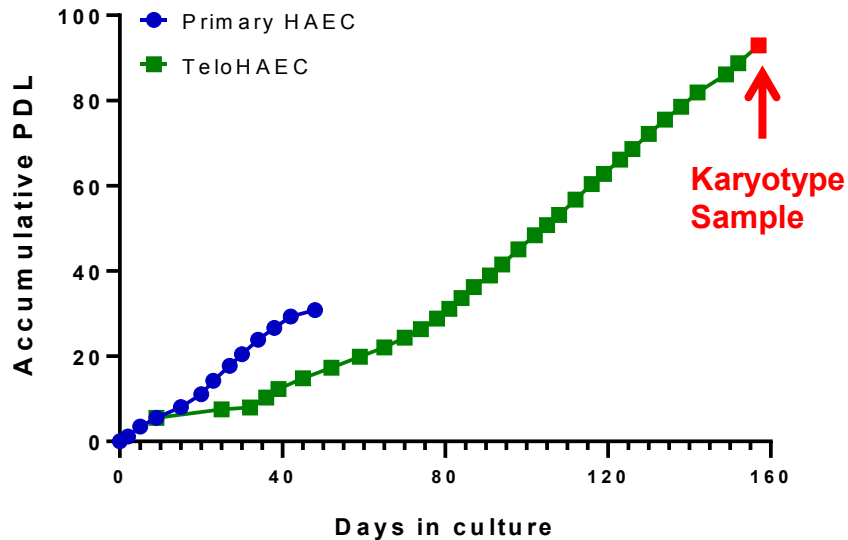
# hTERT Immortalized Endothelial Cell Lines

- Express surface markers and receptors (PECAM-1/CD31, VEGFR2, Tie-2)
- Exhibit Ac-LDL uptake (LDL receptor functional assay)
- Demonstrate neoangiogenesis – Tubule formation on basement membrane gel

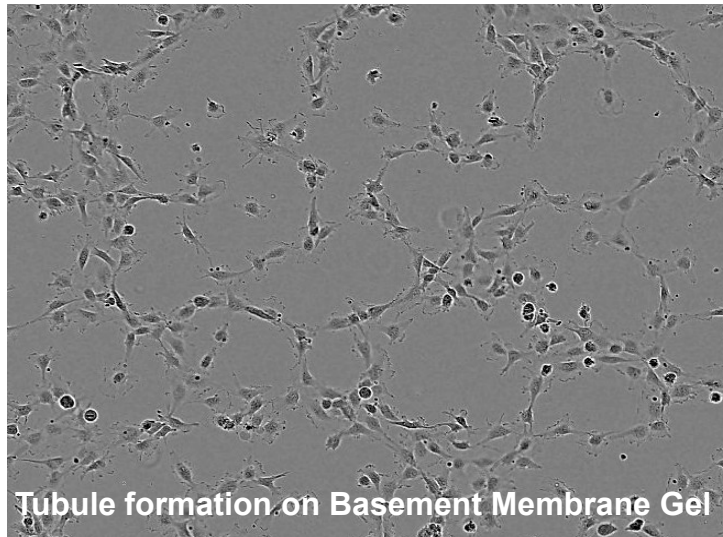
ATCC® No.	Cell Line	Description
CRL-4052™	TeloHAEC	Normal adult aortic endothelial cells
CRL-4025™	TIME	Foreskin microvascular endothelial cells
CRL-4045™	TIME-GFP	Foreskin microvascular endothelial cells with constitutive expression of EmGFP®
CRL-4049™	NFkB-TIME	Foreskin microvascular endothelial cells with NanoLuc® reporter expression under the control of NFkB response elements
CRL-4054™	TeloHAEC-GFP	Normal adult aortic endothelial cells with constitutive expression of EmGFP®



# TeloHAEC – immortalized aortic endothelial cells



Normal Diploid Karyotype



Tubule formation on Basement Membrane Gel

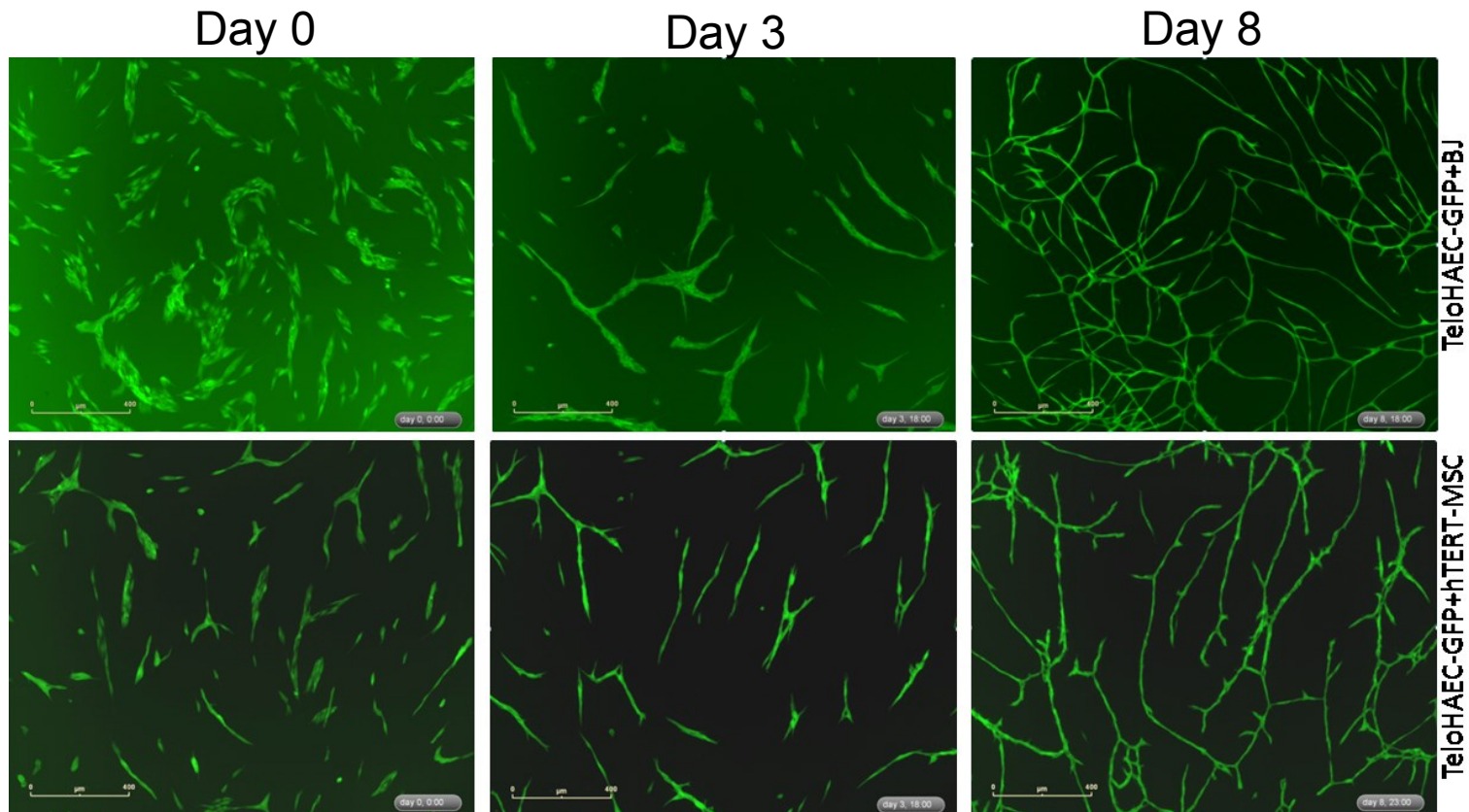
TeloHAEC  
Media

Cell Basement Membrane Gel

ATCC® CRL-4052™  
ATCC® PCS-100-030™  
ATCC® PCS-110-041™ (VEGF Kit)  
ATCC® ACS-3035™

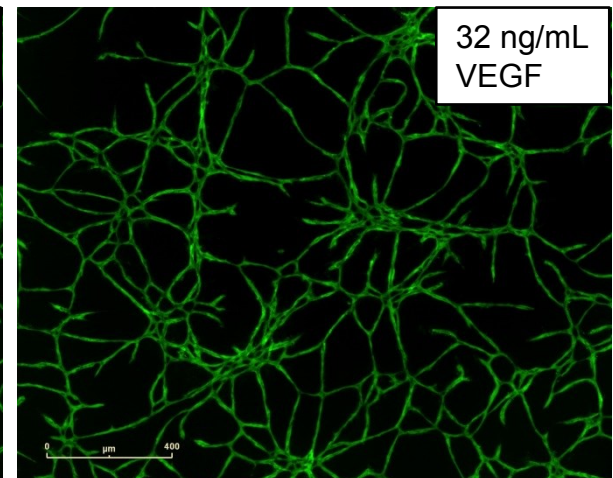
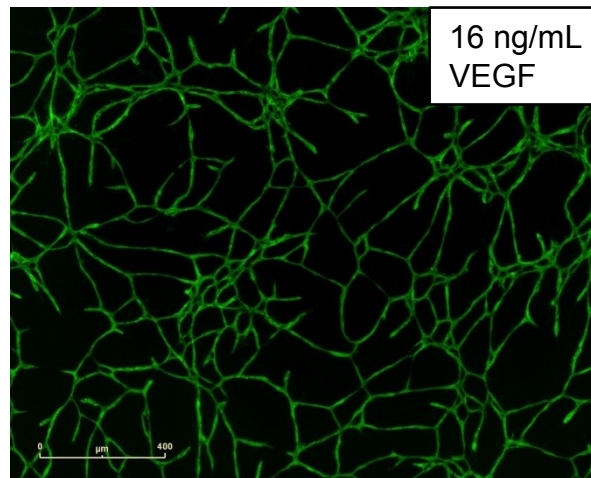
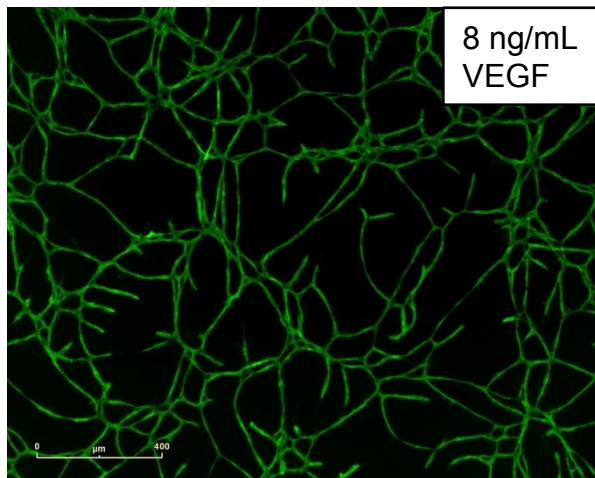
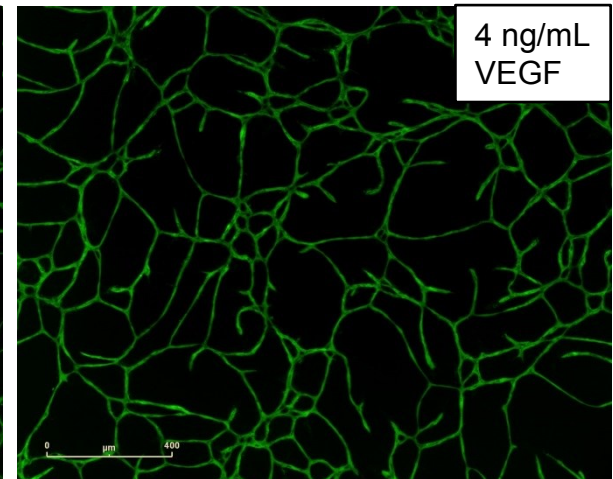
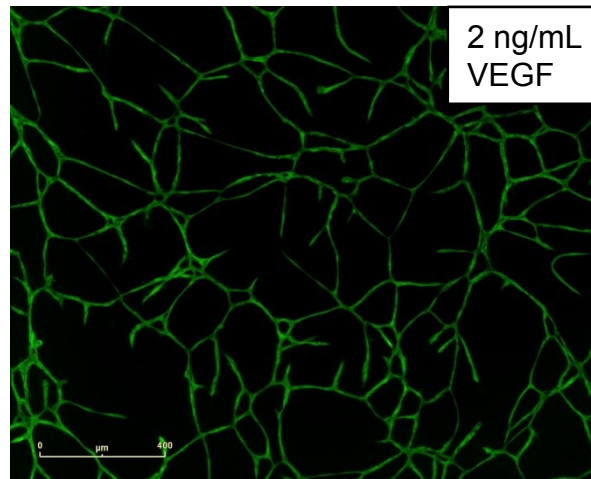
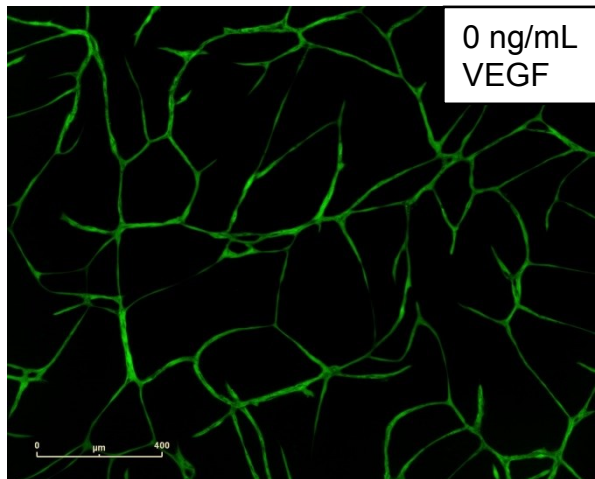


# TeloHAEC-GFP co-cultured with BJ Fibroblast or hTERT-MSCs induces tubule formation



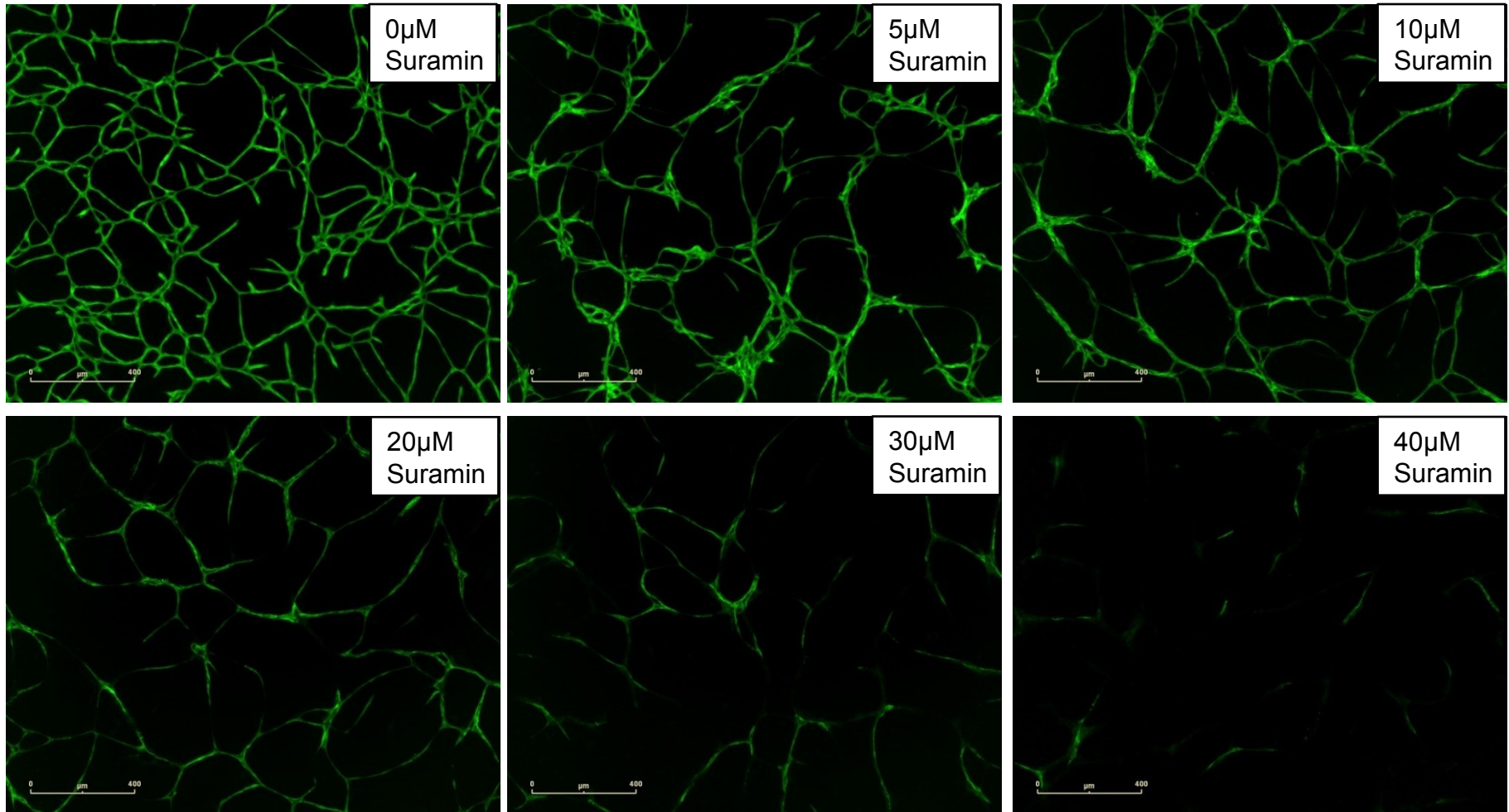
TeloHAEC-GFP (ATCC® CRL-4054™) co-cultured with BJ Fibroblasts (ATCC® CRL-2522™) or hTERT Adipose-derived MSC (ATCC® SCRC-4000™) in the ATCC® Angiogenesis Medium (coming soon) for 14 days.

# VEGF stimulates tubule formation in the TeloHAEC-GFP and hTERT-MSC co-culture

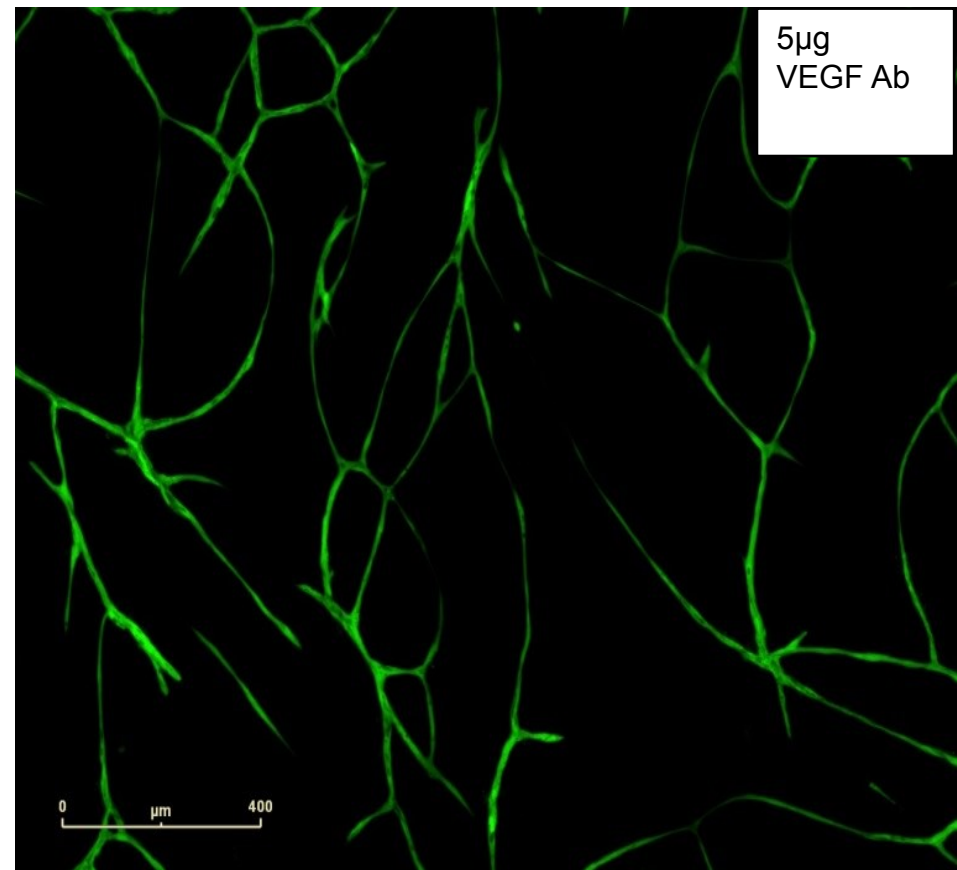
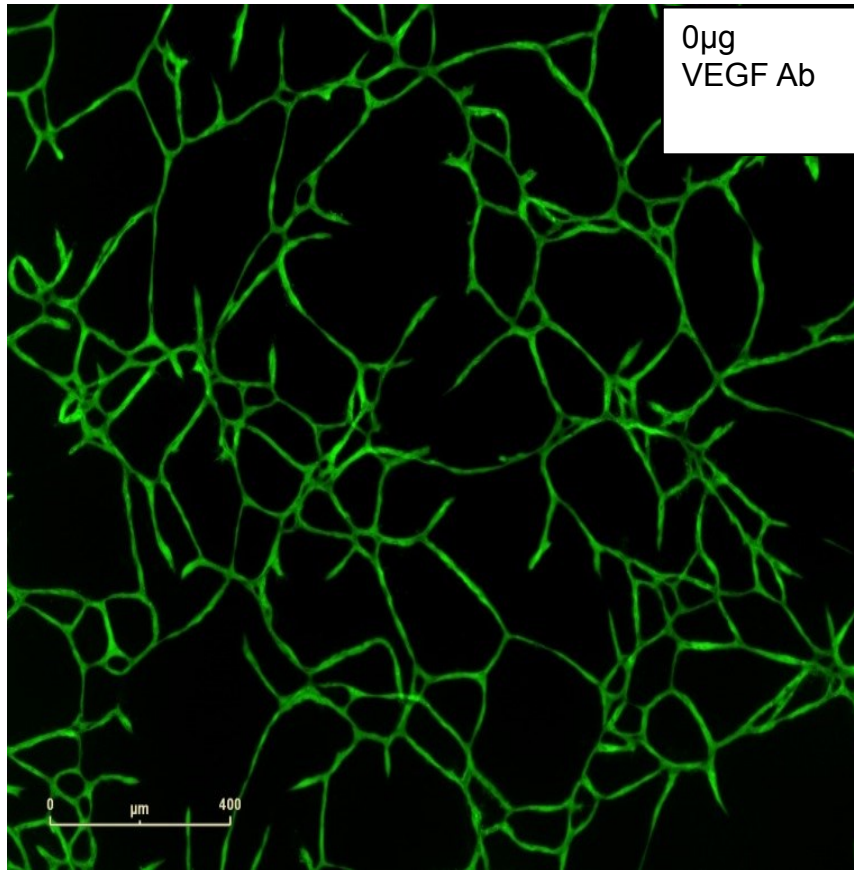




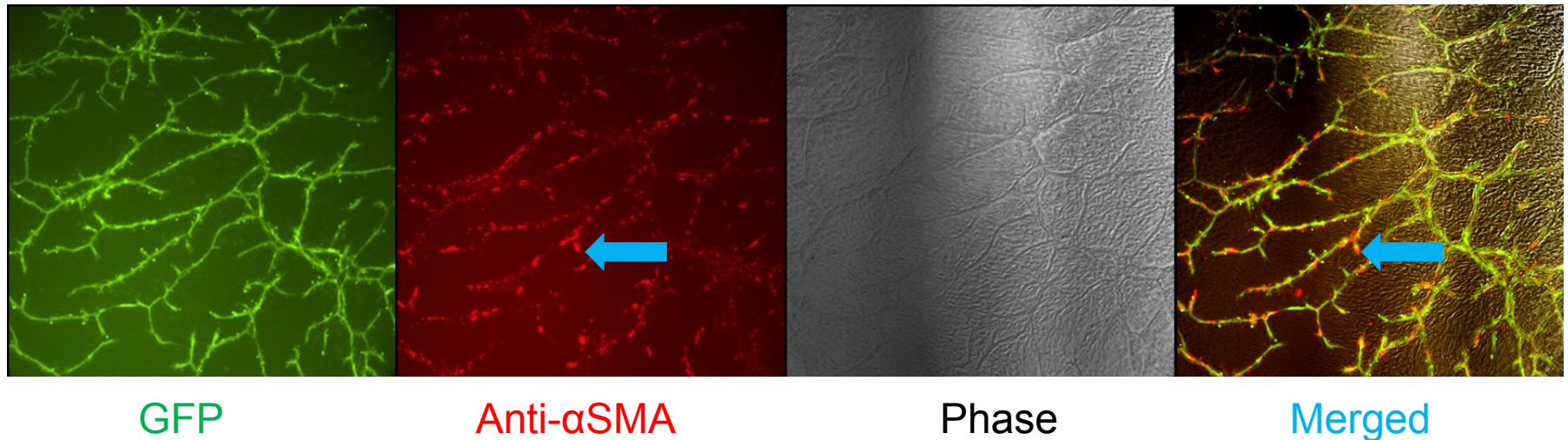
# Suramin blocks tubular structure growth in TeloHAEC-GFP and hTERT-MSC co-culture



# VEGF Ab blocks tubular structure growth in TeloHAEC-GFP and hTERT-MS-C co-cultures



# hTERT-MSC transformation to smooth muscle cells supports angiogenesis



- hTERT-MSC transformation to smooth muscle cells - indicated by  $\alpha$ -SMA staining on the periphery of the TeloHAEC-GFP cells (arrows).
- Data may reflect similar conditions to angiogenesis occurring *in vivo*.





# Conclusions

- 3D culture can provide a model system which reflects the phenotypic characteristic and genetic backgrounds of the *in vivo* tissue microenvironment.
- Both primary and hTERT immortalized cells can be used to support 3D modeling.
- ATCC is a resource for developing respiratory, dermatologic, and angiogenesis 3D co-culture models.

# Thank you!

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**Thank you for joining today!**  
**Please send additional questions to [tech@atcc.org](mailto:tech@atcc.org)**