

3D TISSUE MODELING

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Field Application Scientist, ATCC

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GLOBALLY DELIVERED™

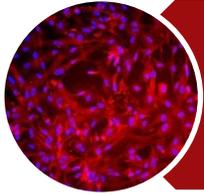
About ATCC

- 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

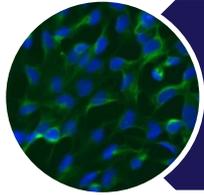




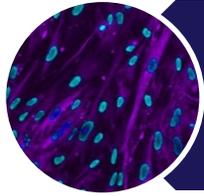
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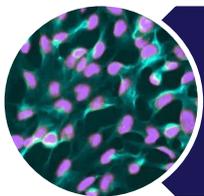
The significance of 3D culture



Air-liquid interface respiratory models

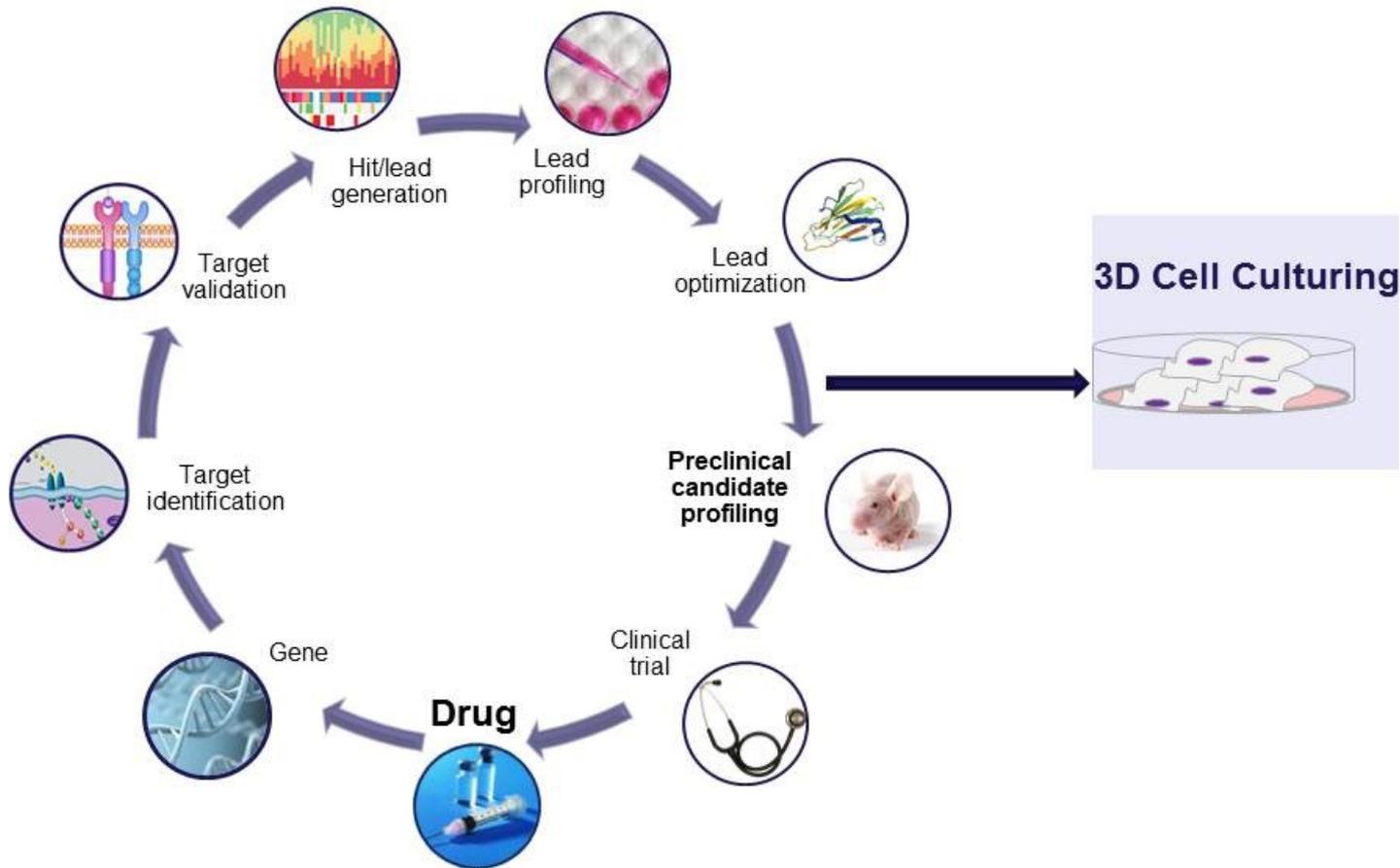


Dermatologic models



Angiogenesis models

Role of 3D culture in drug discovery



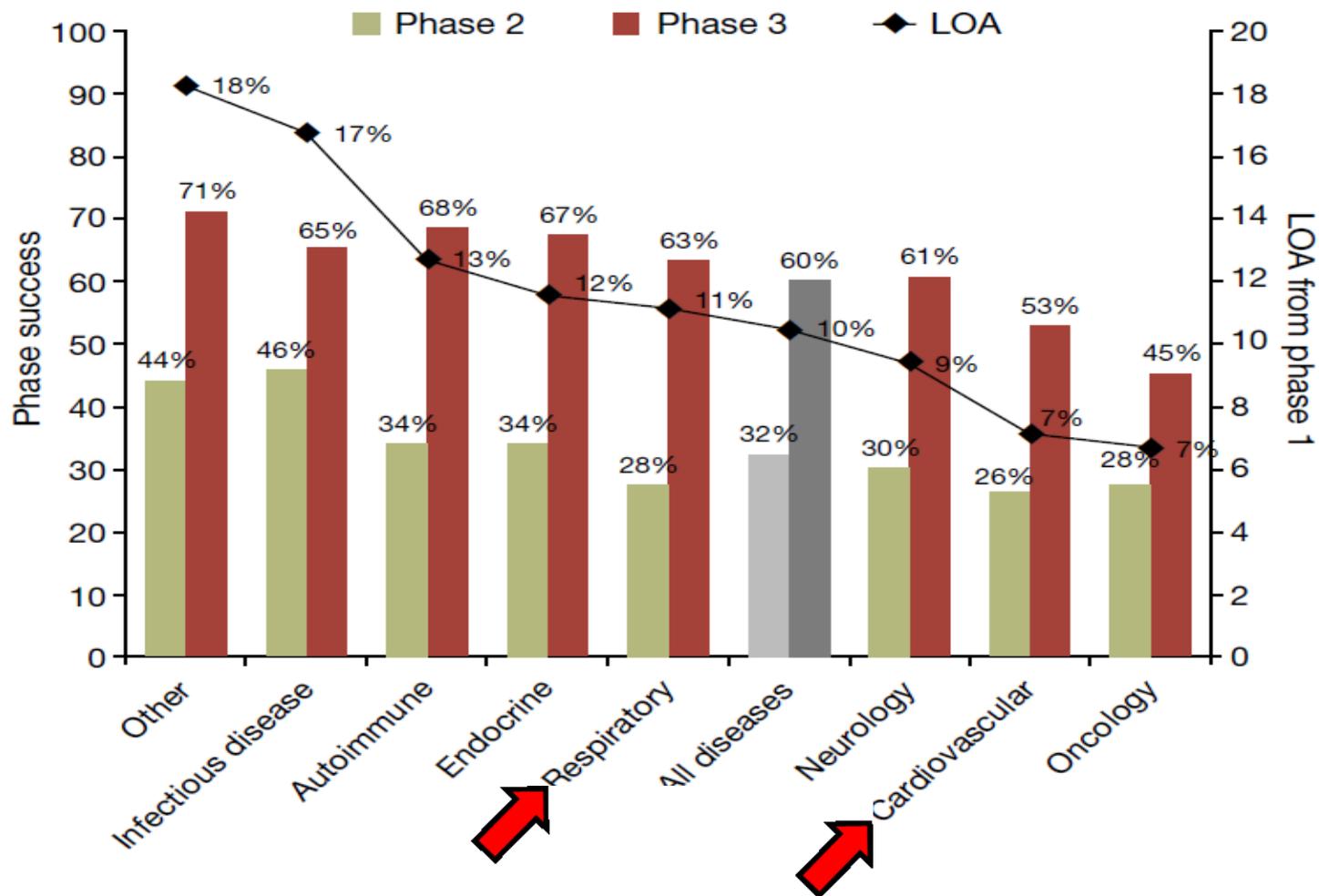
3D culture is more reflective of *in vivo* tissue conditions and may improve the predictive modeling of therapeutic drugs



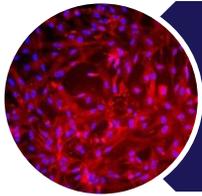
Comparison of 2D and 3D culturing

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

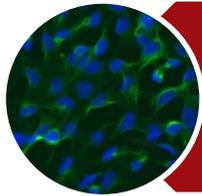
Likelihood of approval (LOA) by disease



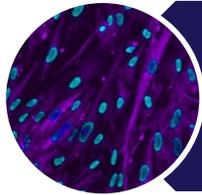
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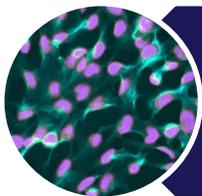
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Air-liquid interface respiratory models



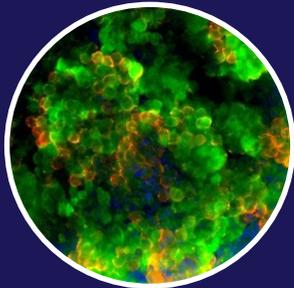
Dermatologic models



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



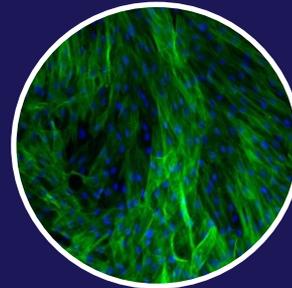
Mesenchymal

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

ATCC Normal Human Primary Cells

- ATCC Primary Cells provide complete culture reagents formulated for optimal cell growth, morphology, and functionality
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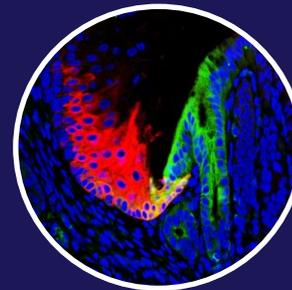
Dermal

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)

3-4 days

2-5 days

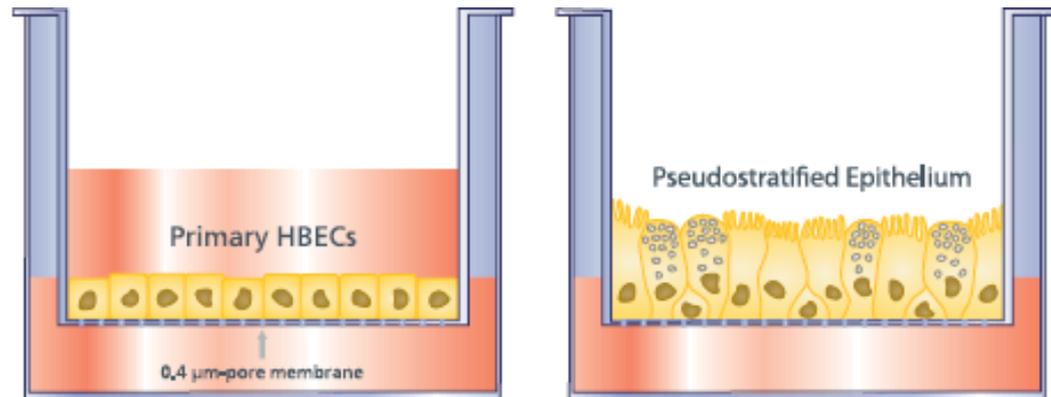
21-28 days

Pre-expansion

**Expansion
(Submerged)**

**Differentiation
(Air-liquid interface)**

ATCC Primary Epithelial Cells
(used at less than passage 4)

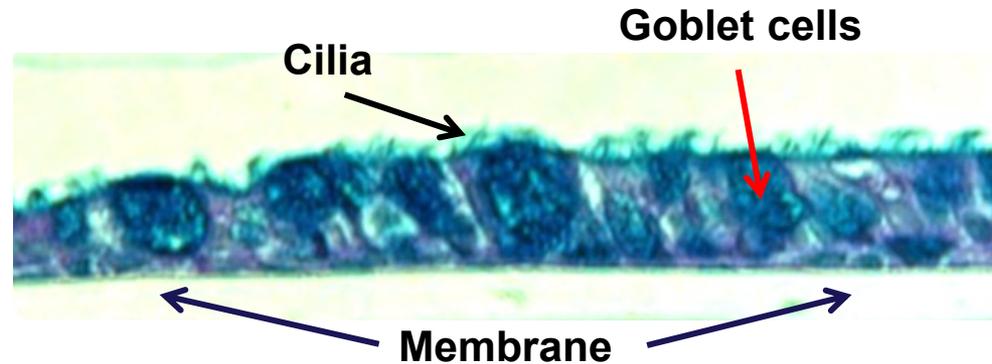
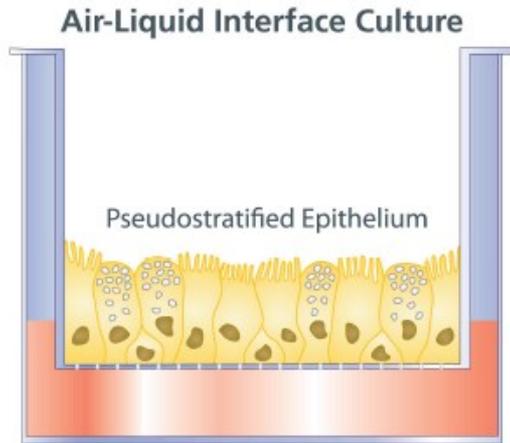


Airway Epithelial Cell Basal Medium
plus Growth Supplement Kits
(ATCC® PCS-300-030)

Polyethylene Terephthalate (PET) Inserts
(Corning™)

PneumaCult™ ALI Medium
(StemCell Technologies™)

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

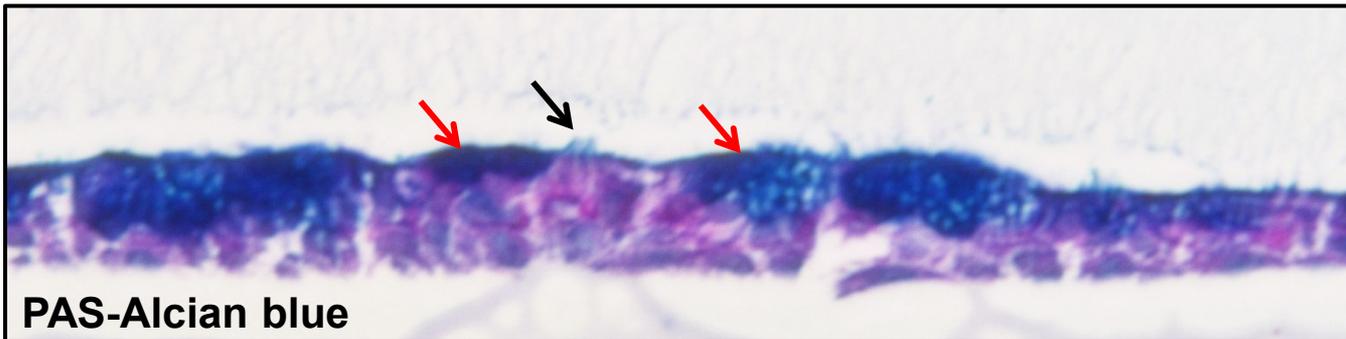
ATCC Airway Epithelial Cell Basal Medium (ATCC® PCS-300-030) plus
Bronchial Epithelial Cell Growth kit (ATCC® PCS-300-040)

At passage 3: 21 days in PneumaCult ALI differentiation media

Pseudostratified epithelium with cilia

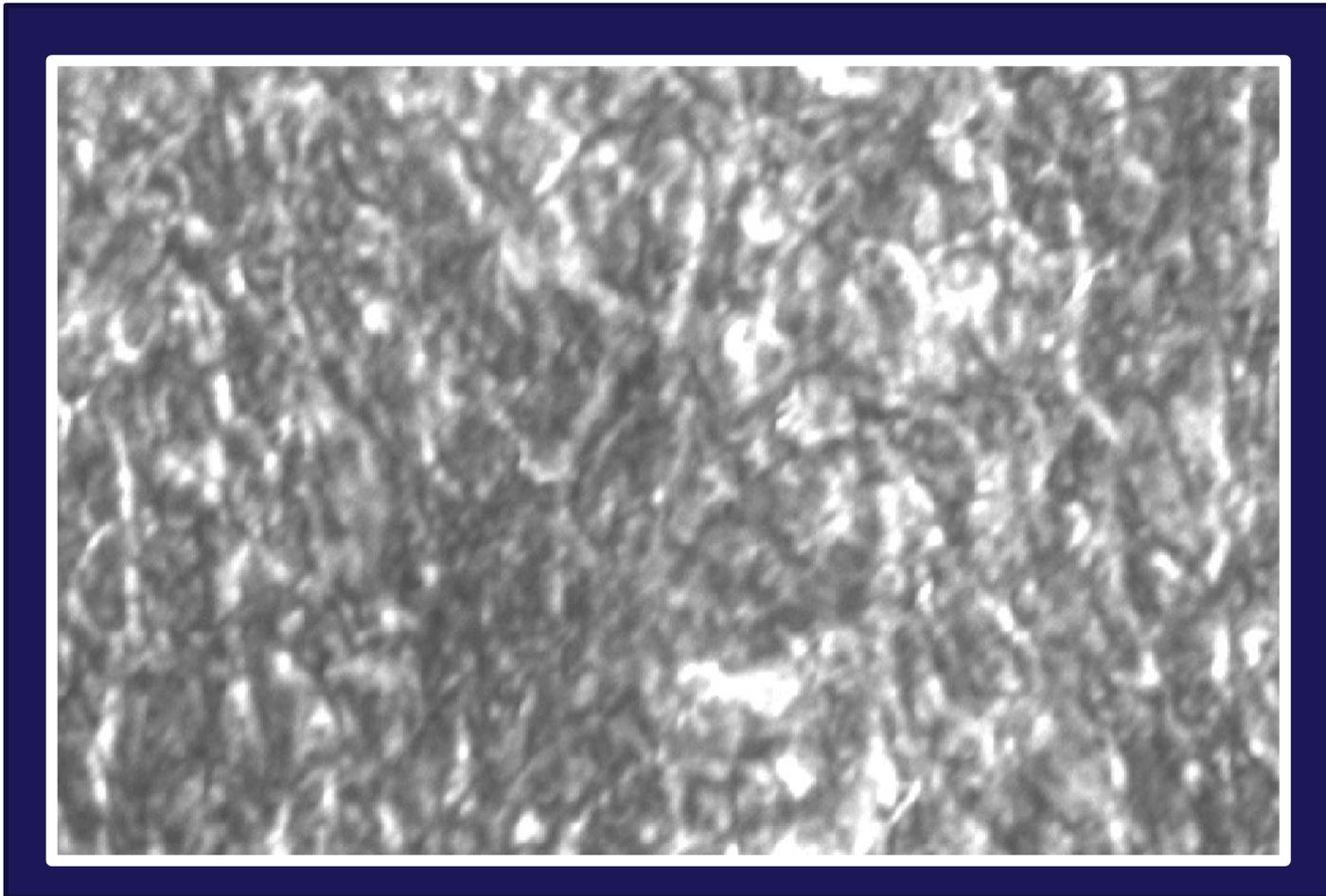


Goblet cell differentiation



Beating cilia by ALI differentiation

ATCC Human Bronchial Epithelial Cells 26 days post airlift

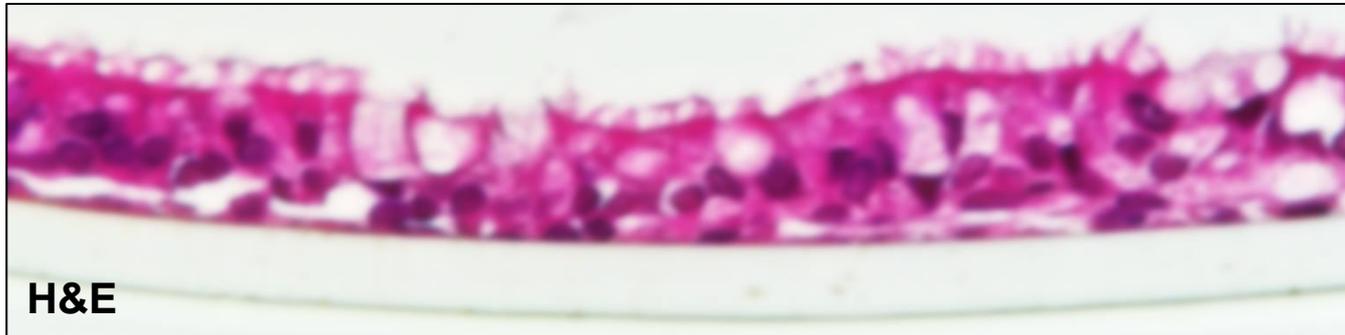


ATCC Human Small Airway Epithelial Cells

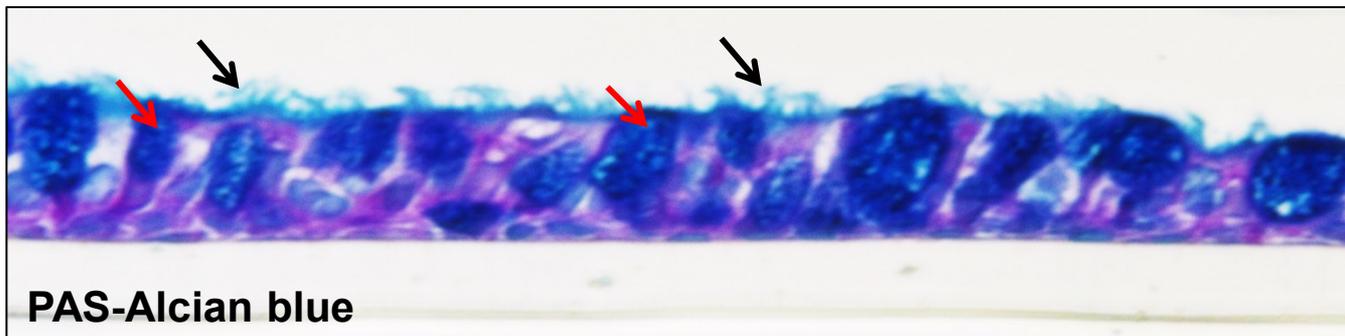
ATCC Airway Epithelial Cell Basal Medium (ATCC PCS-300-030)
and Small Airway Epithelial Cell Growth kit (ATCC PCS-301-040)

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

Pseudostratified epithelium with cilia

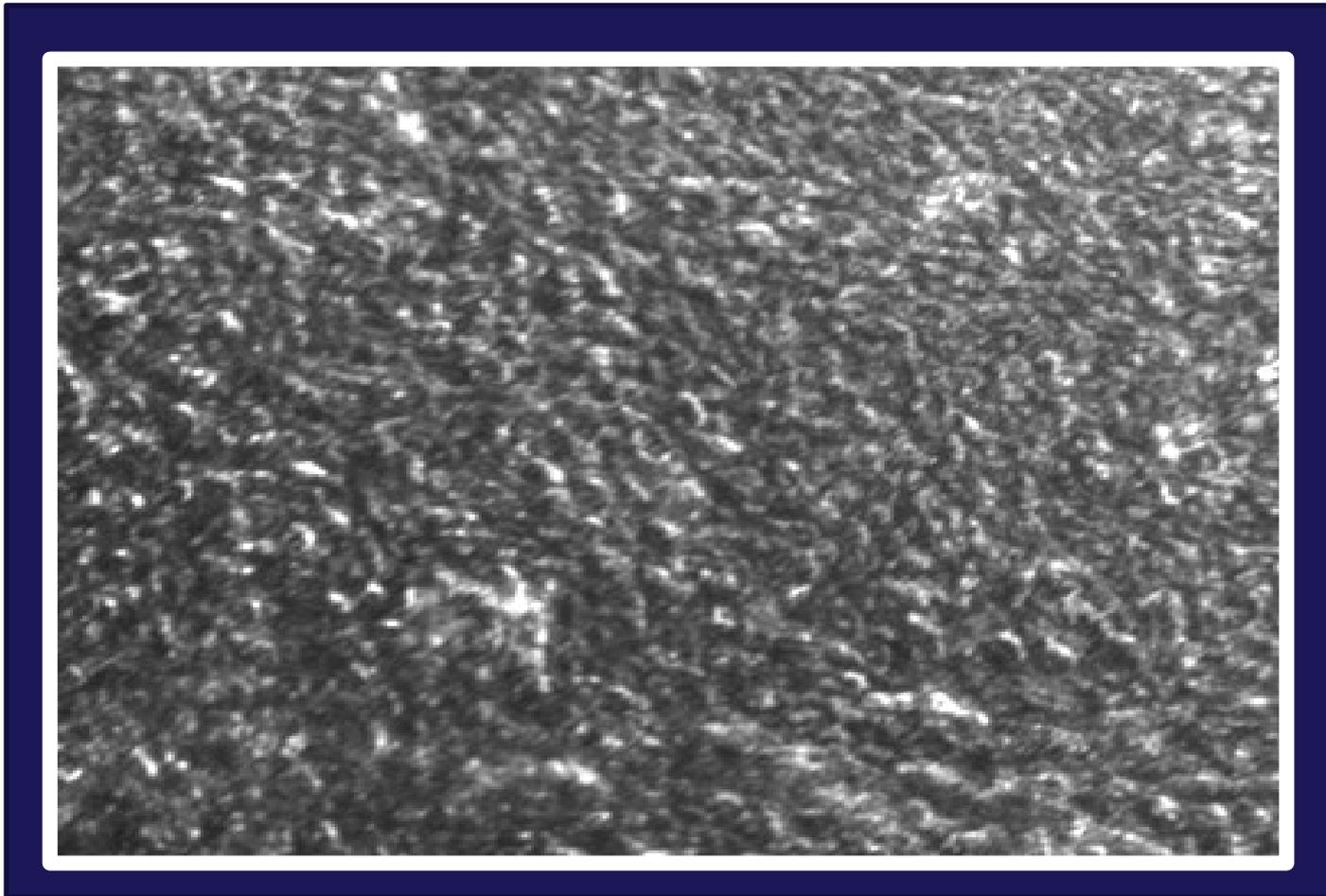


Goblet cells

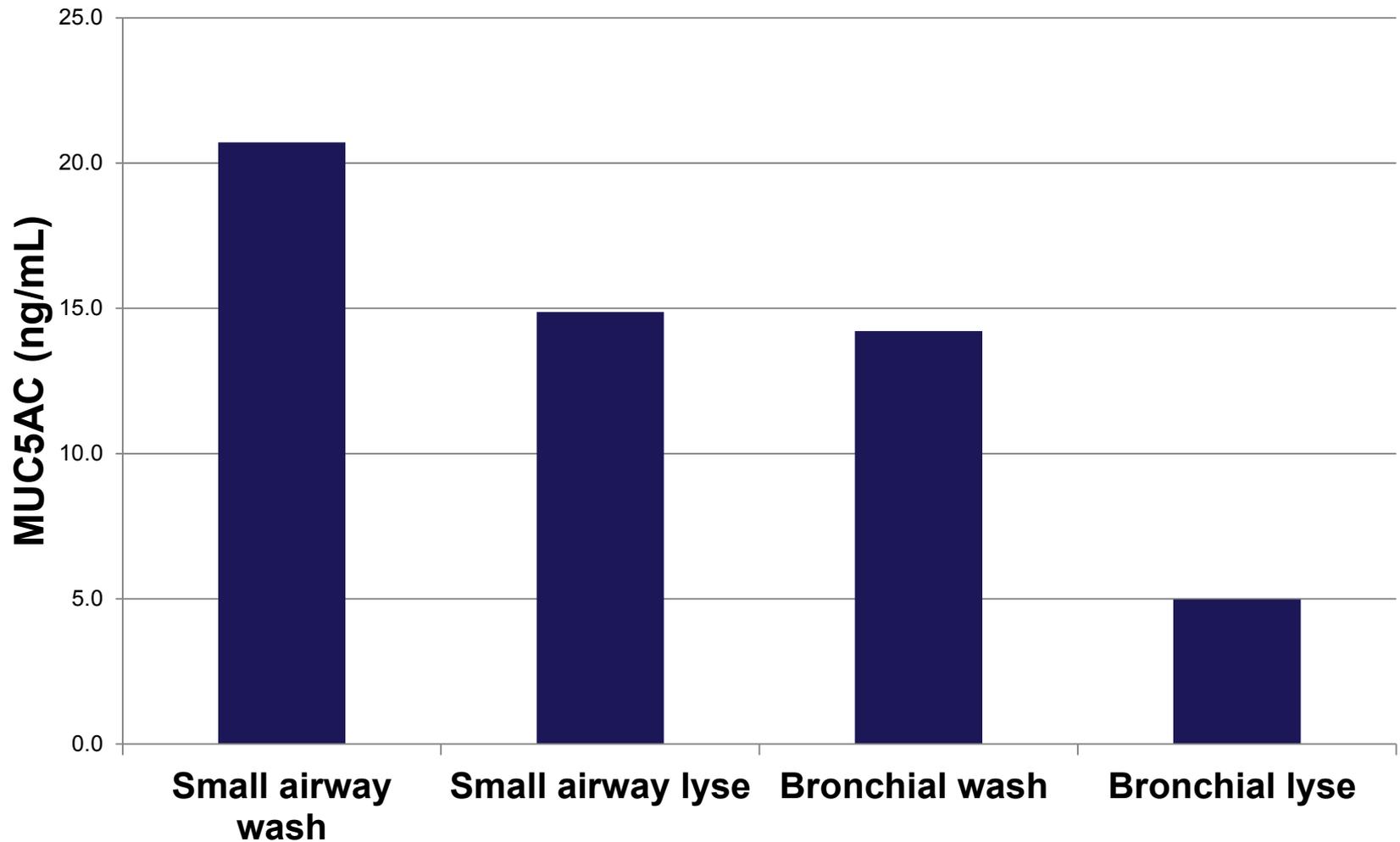


Beating cilia by ALI differentiation

ATCC Human Small Airway Epithelial Cells 25 days post airlift

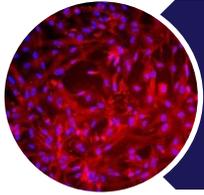


Mucin secretion, Primary Small Airway and Bronchial Epithelial Cells 28 days post airlift

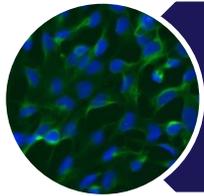




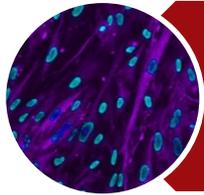
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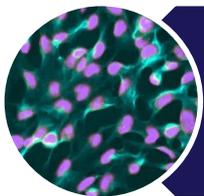
The significance of 3D culture



Air-liquid interface respiratory models



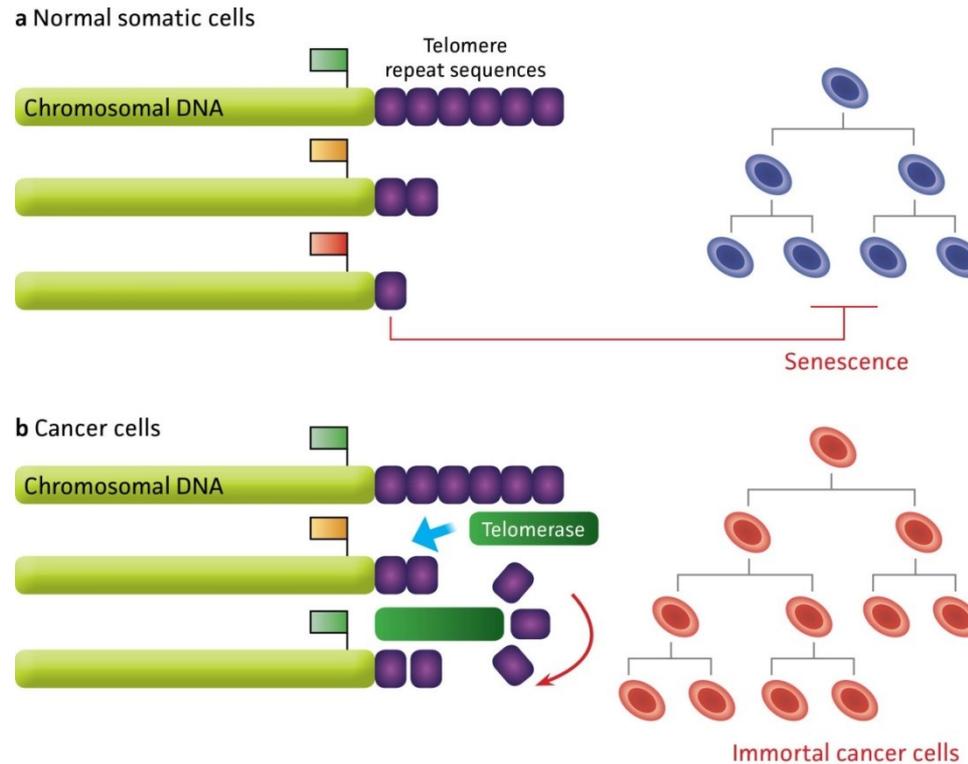
Dermatologic models



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

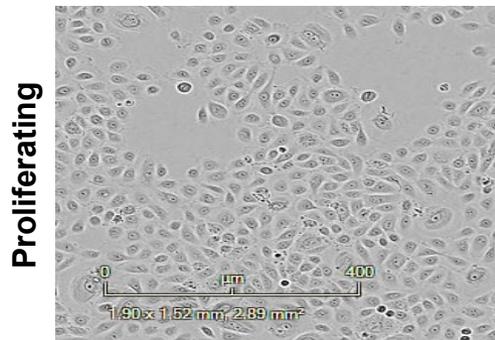
	Primary cells	hTERT immortalized	Oncogene, viral immortalized	Cancer cell lines
Mimic <i>in vivo</i> Tissue Phenotype	++++	+++	++	+
Genotypic Stability	Diploid	Diploid / Near diploid	Near diploid / Aneuploid	Aneuploid
Proliferative Capacity	+	+++	+++	+++
Supply	+	+++	+++	+++
Inter-experimental Consistency	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.

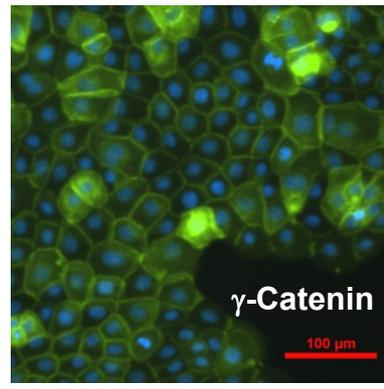
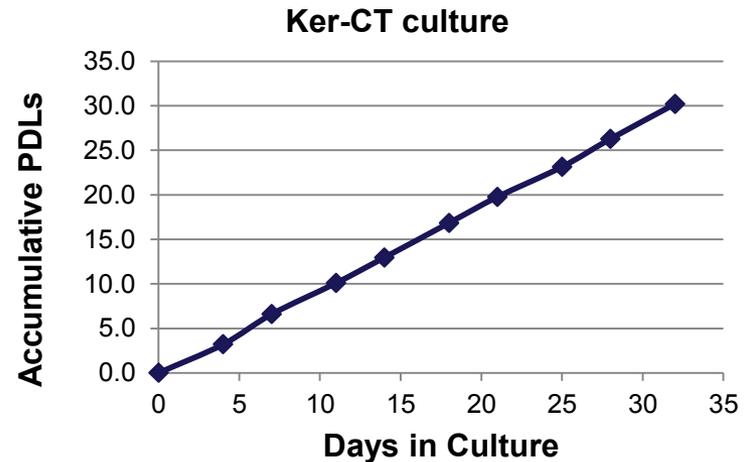
Ker-CT– Immortalized Keratinocytes retain intact differentiation capability

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



Proliferating

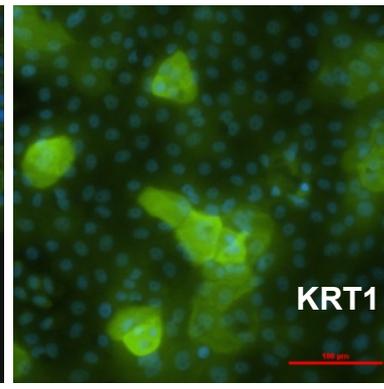
5000 cell/cm², Day 3



Differentiation

γ-Catenin

100 μm

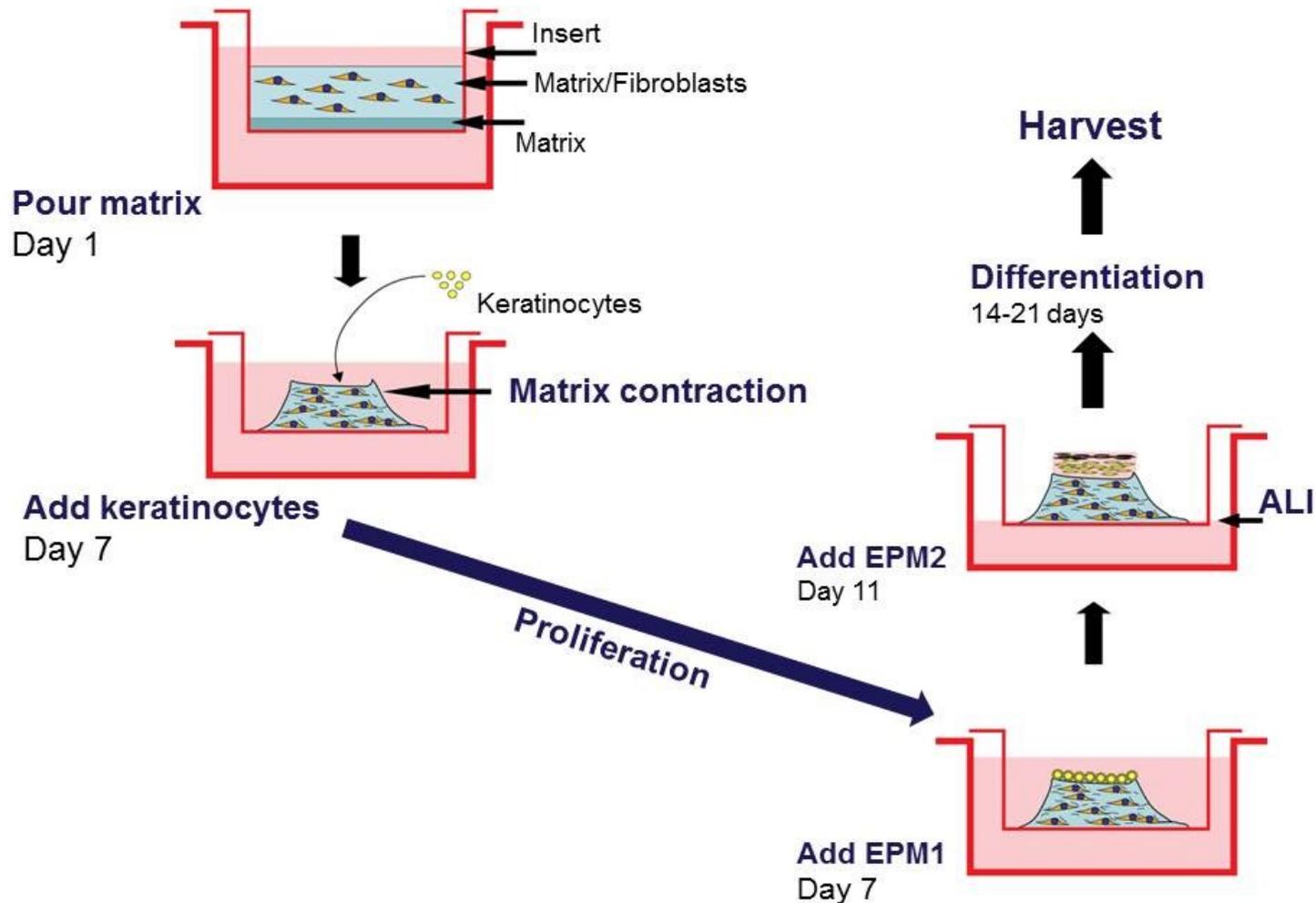


KRT1

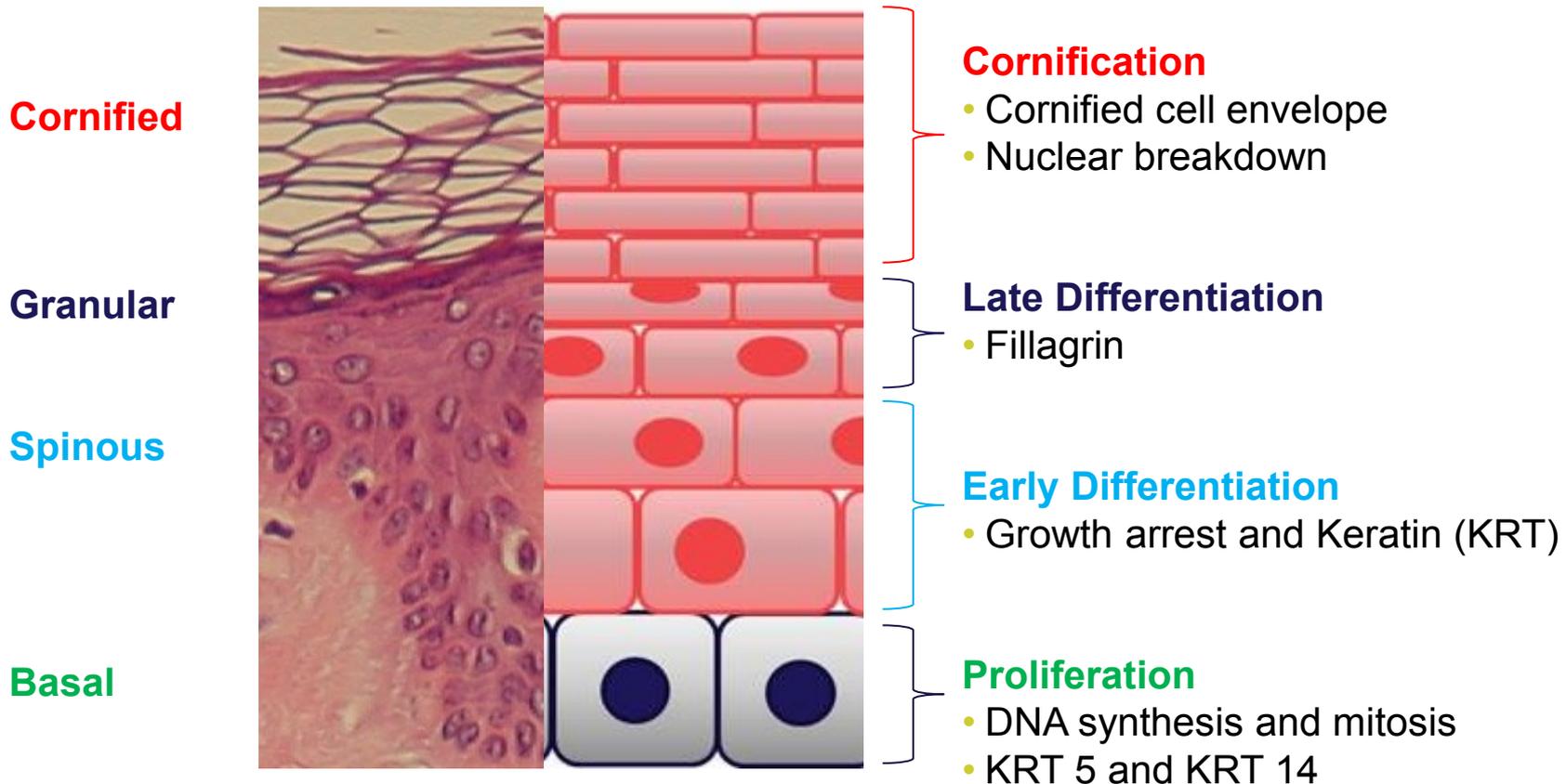
100 μm

2D differentiation, Day 4

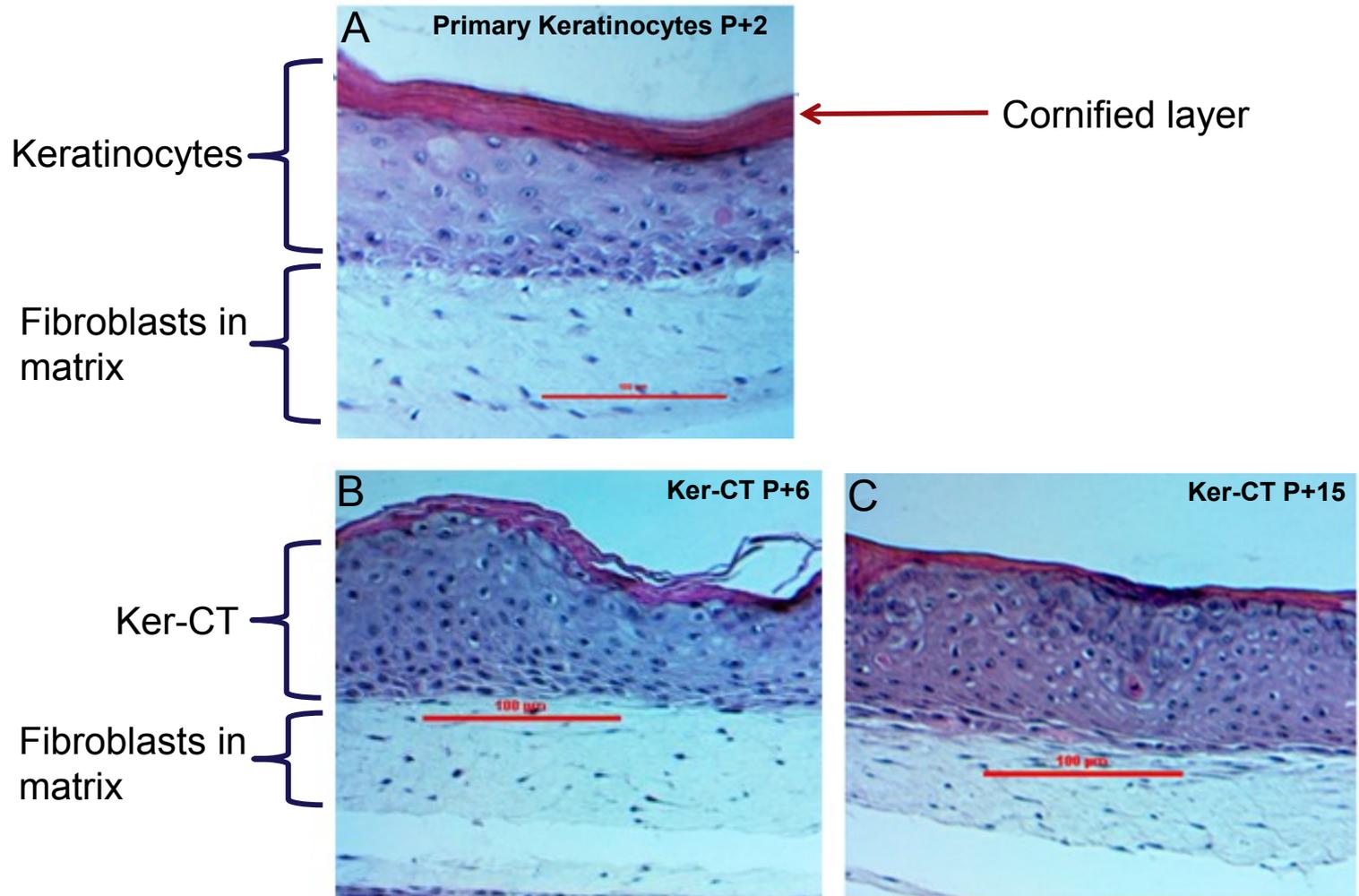
Keratinocytes grown in raft co-culture



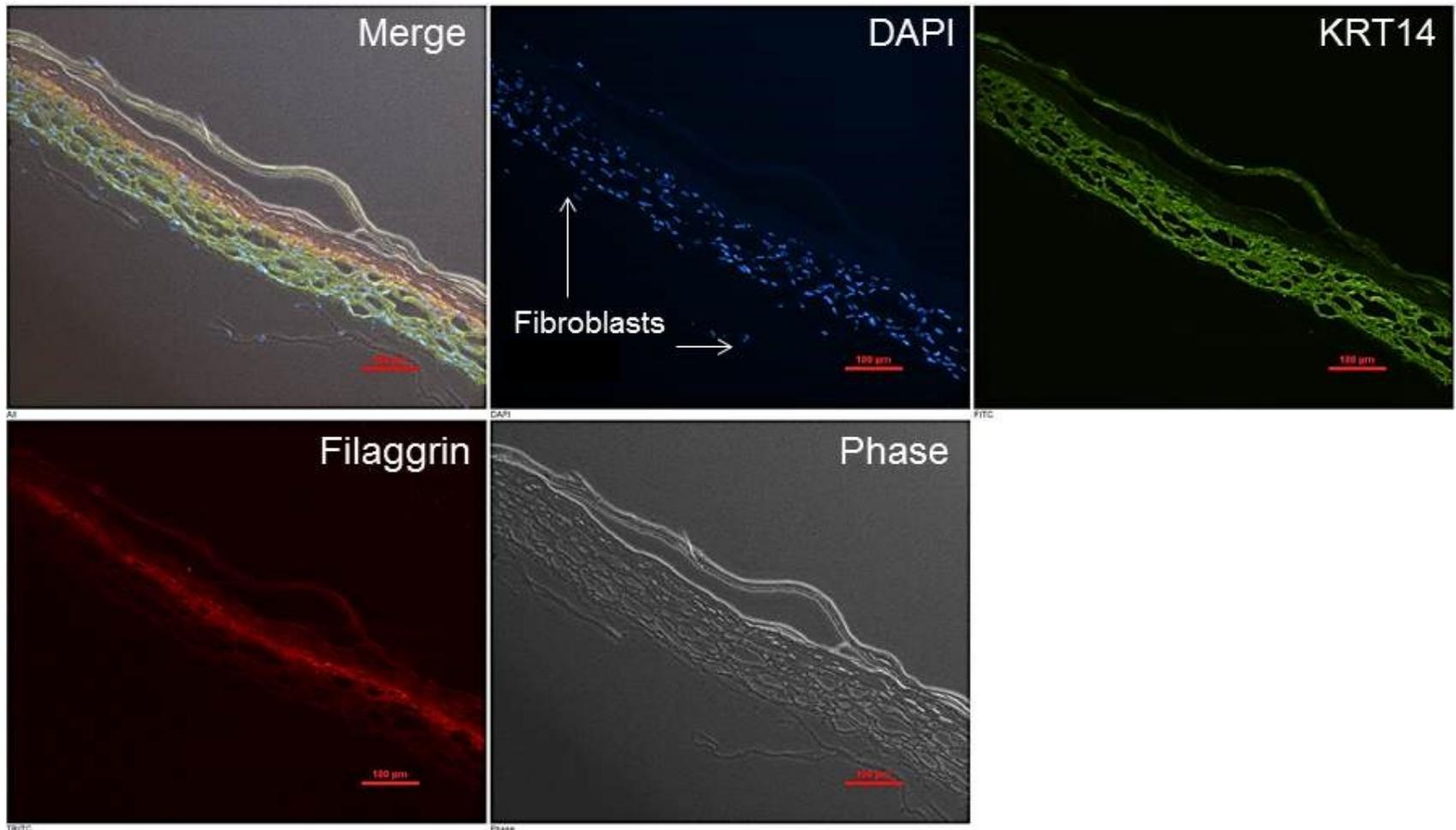
Differentiation of epidermal keratinocytes



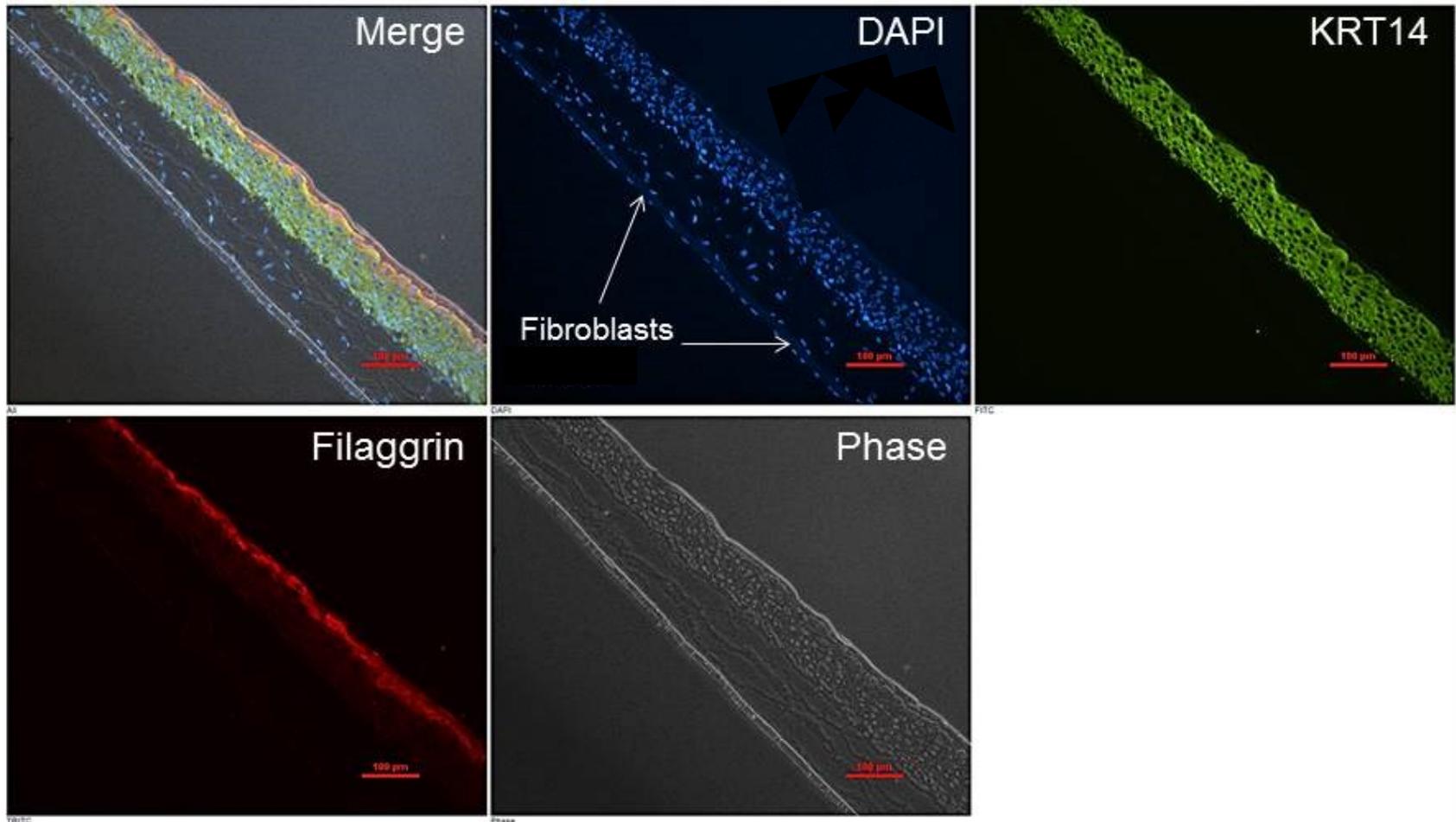
Primary Keratinocyte and Ker-CT differentiation



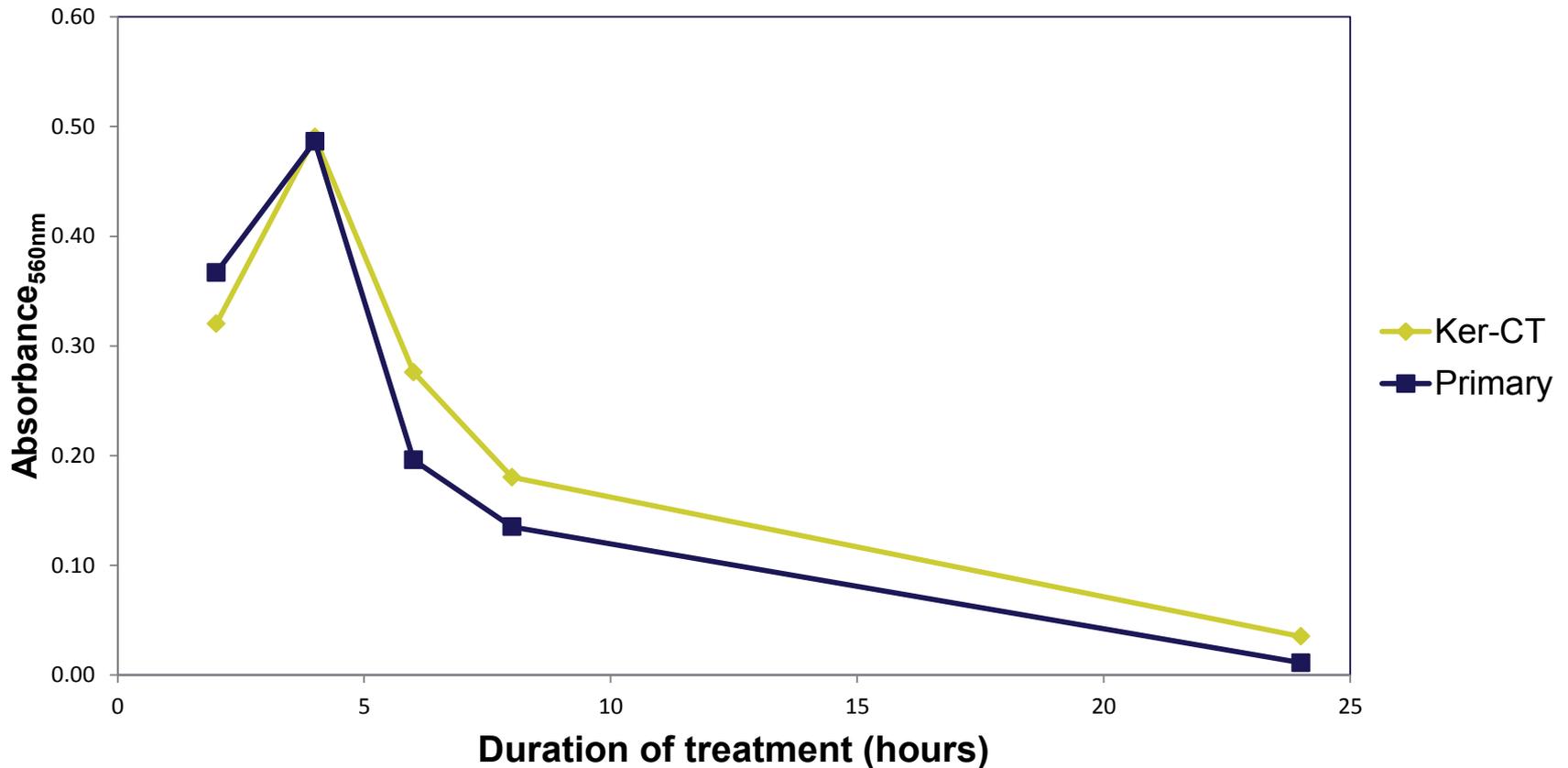
Immunohistochemistry of Primary Keratinocyte culture 11 days post airlift



Immunohistochemistry of Ker-CT culture 11 days post airlift

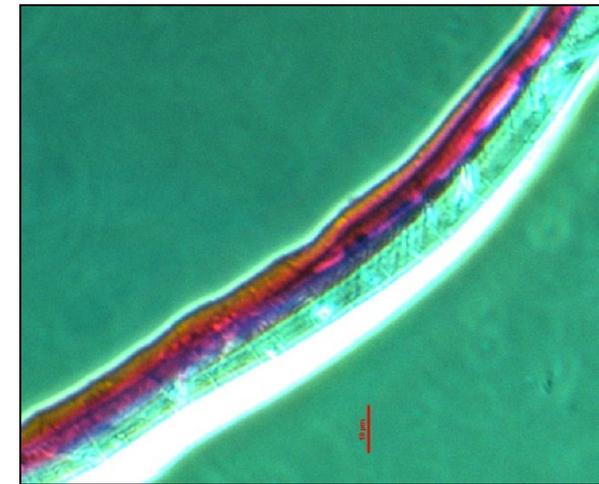
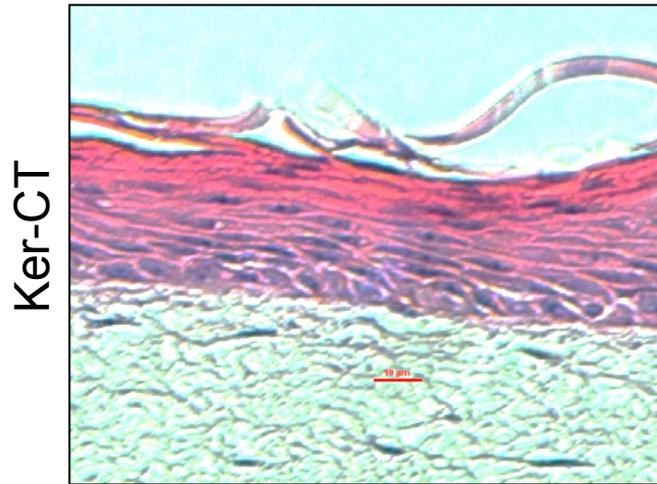
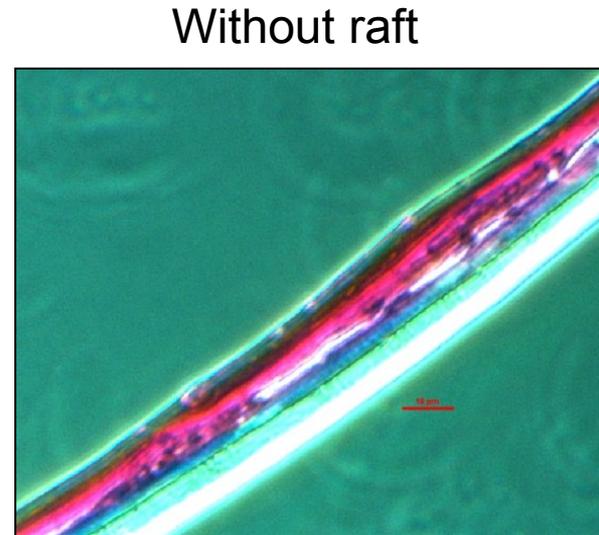
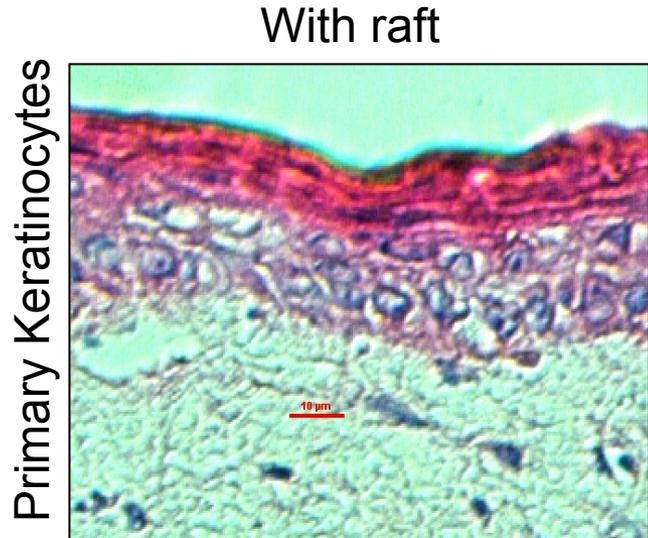


Keratinocyte 3D skin model toxicology test with 1% Triton X-100™



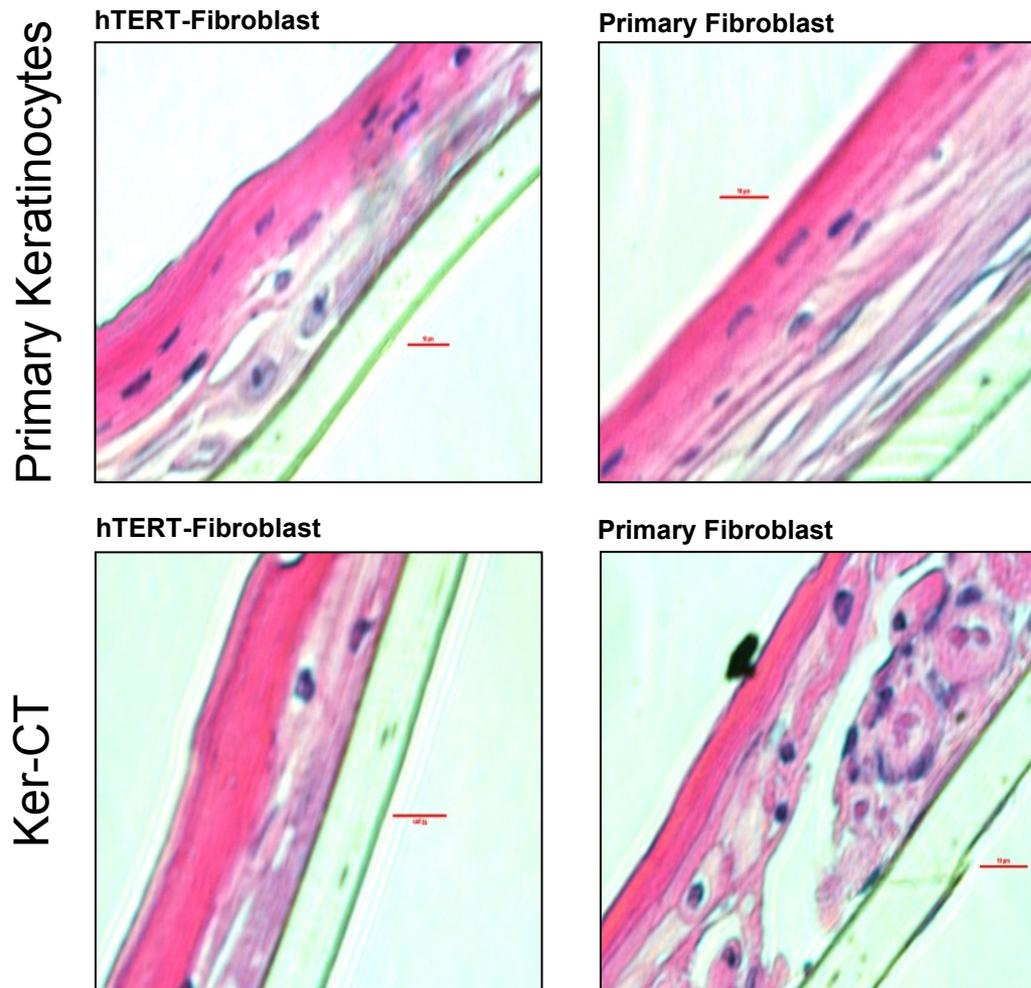
Survival monitored by MTT Cell Proliferation Assay (ATCC® 30-1010K)

Keratinocytes 14 days post airlift

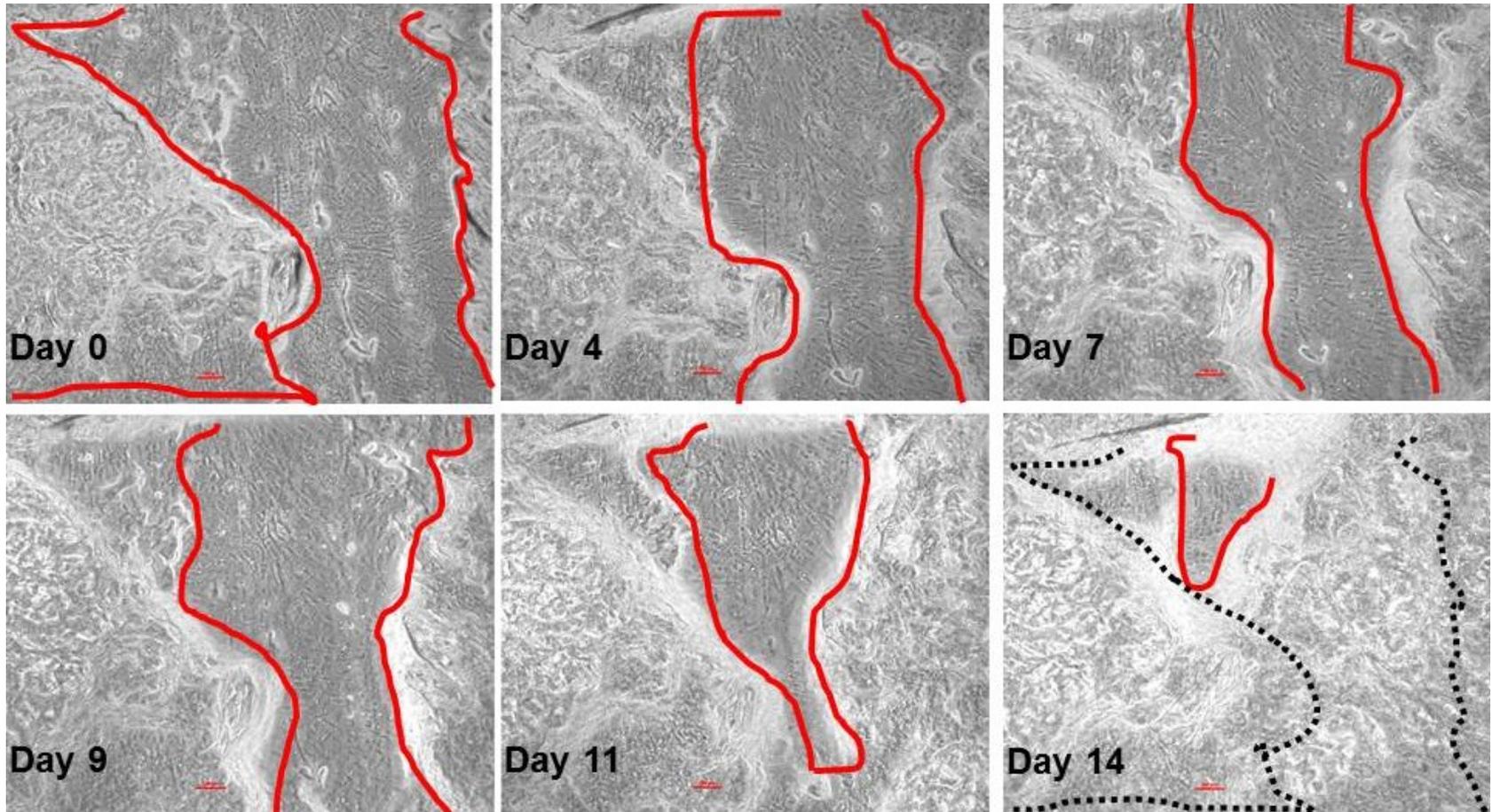


Primary Keratinocytes and Ker-CT 21 days post airlift

Co-culture



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

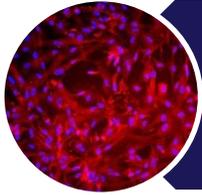




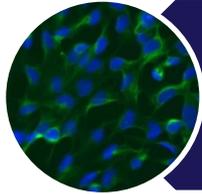
Summary: Dermatologic co-cultures

- 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

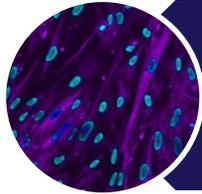
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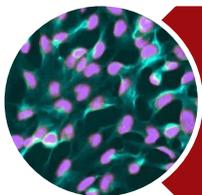
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Air-liquid interface respiratory models



Dermatologic models



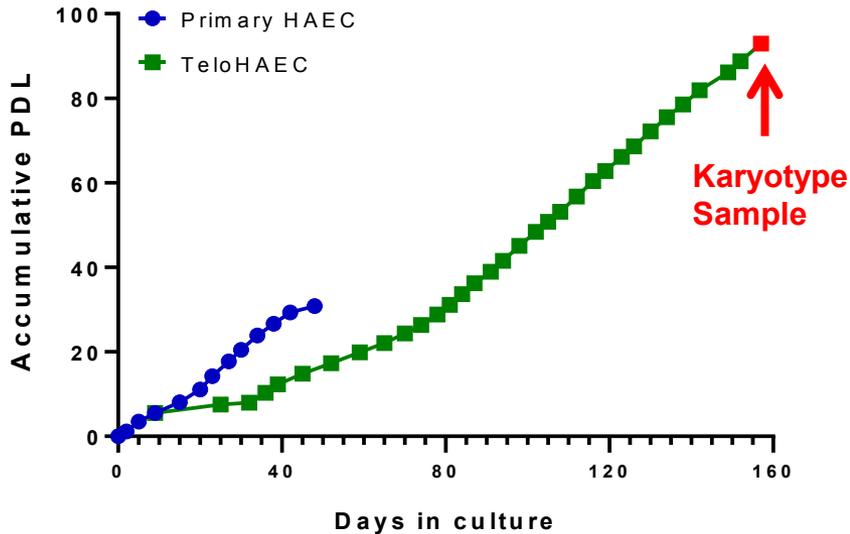
Angiogenesis models

hTERT Immortalized Endothelial Cell Lines

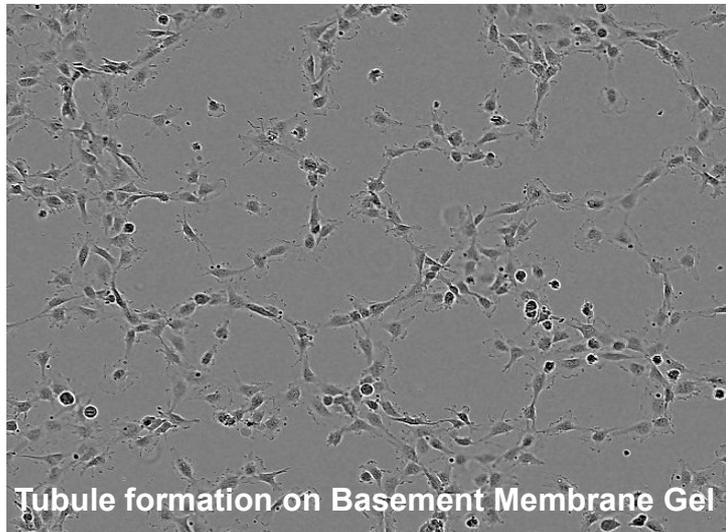
- Express surface markers and receptors (PECAM-1/CD31, VEGFR2, Tie-2)
- Exhibit Ac-LDL uptake (LDL receptor functional assay)
- Demonstrate neoangiogenesis – Tubule formation on basement membrane gel

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

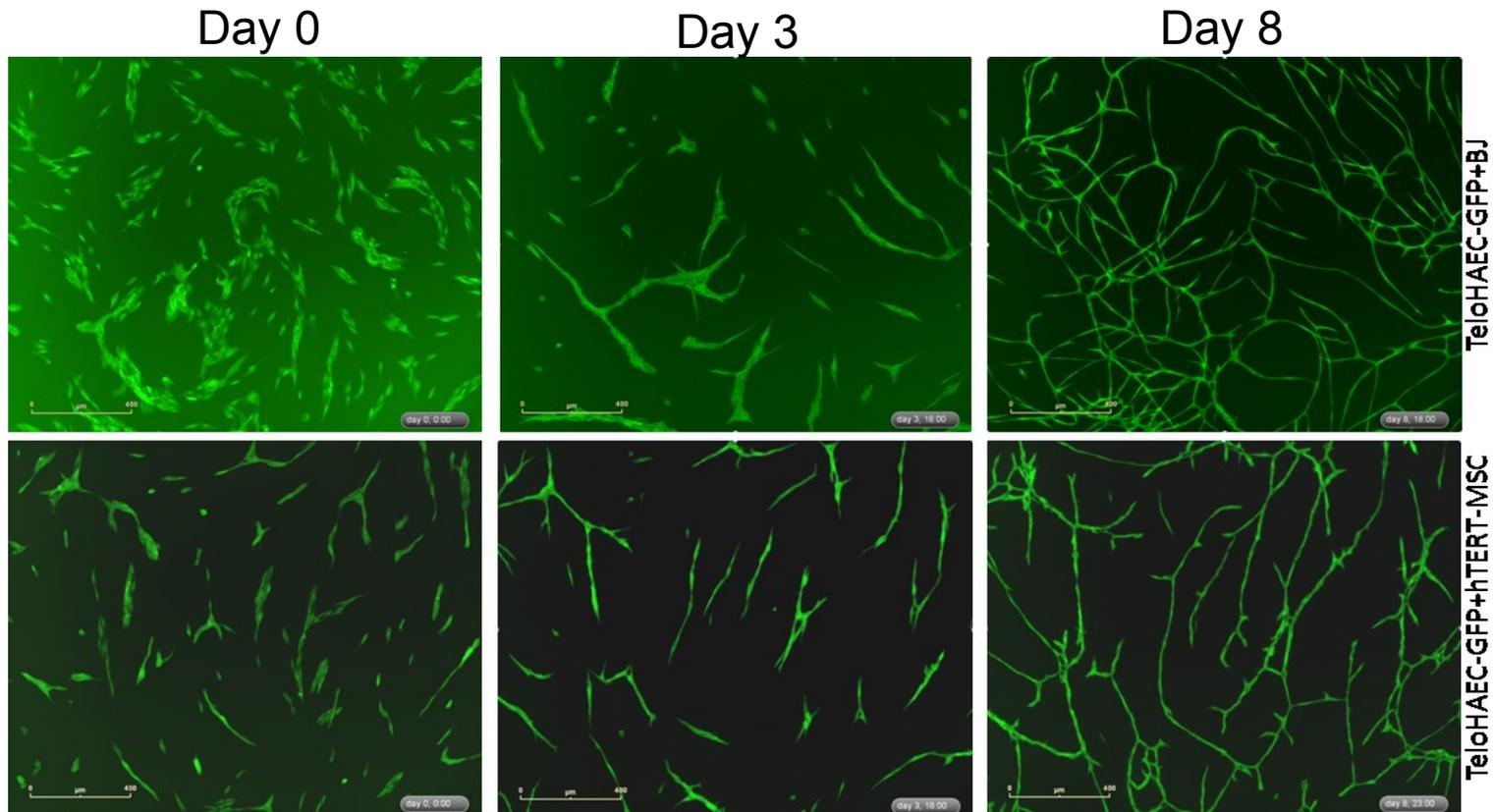
ATCC® CRL-4052™

ATCC® PCS-100-030™

ATCC® PCS-110-041™ (VEGF Kit)

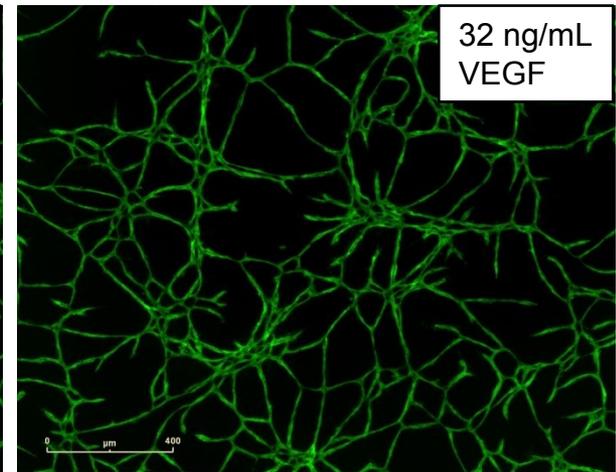
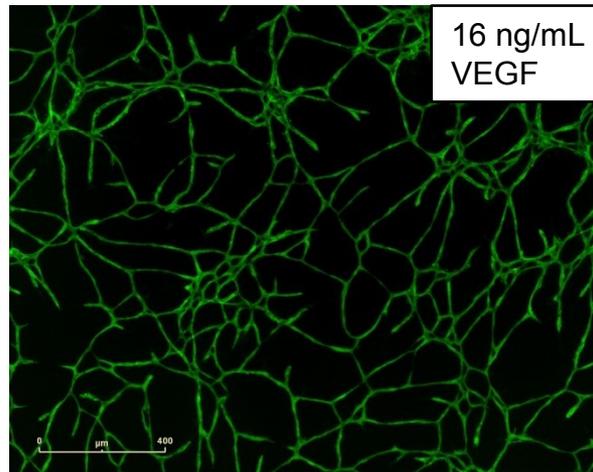
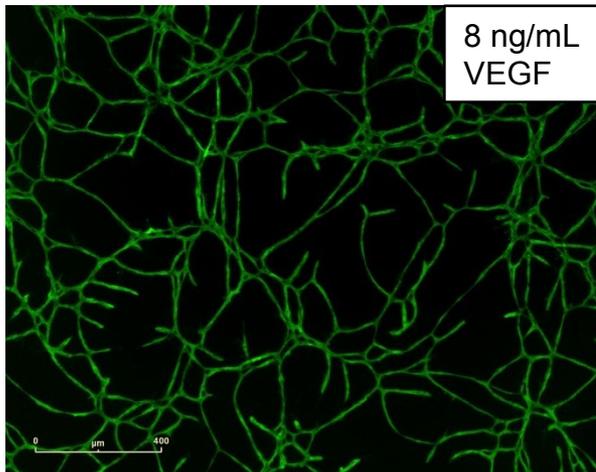
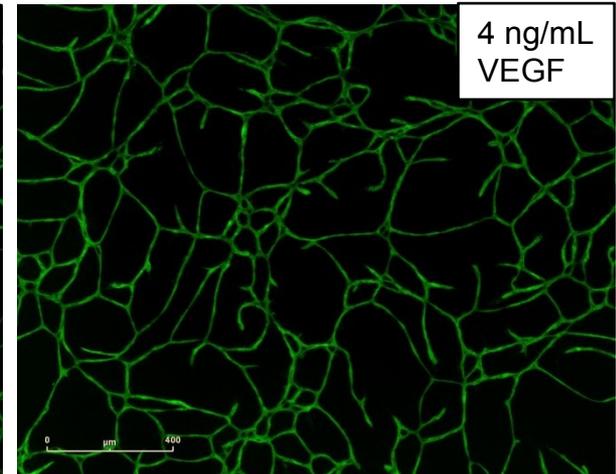
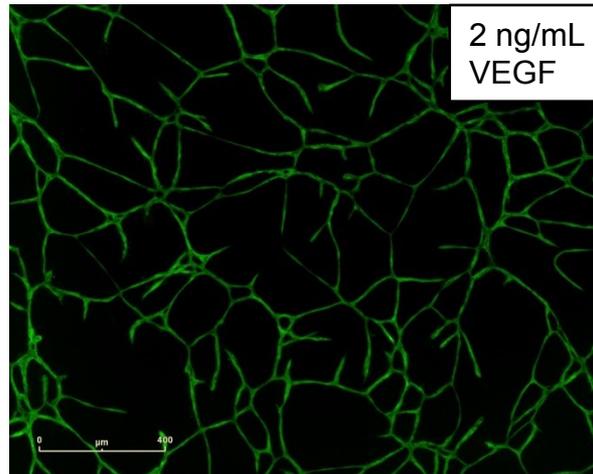
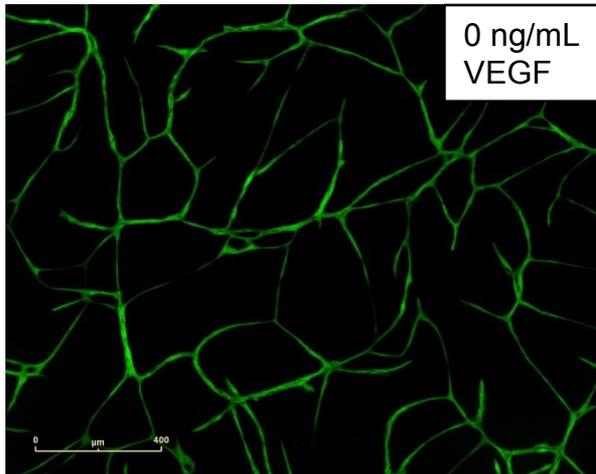
ATCC® ACS-3035™

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

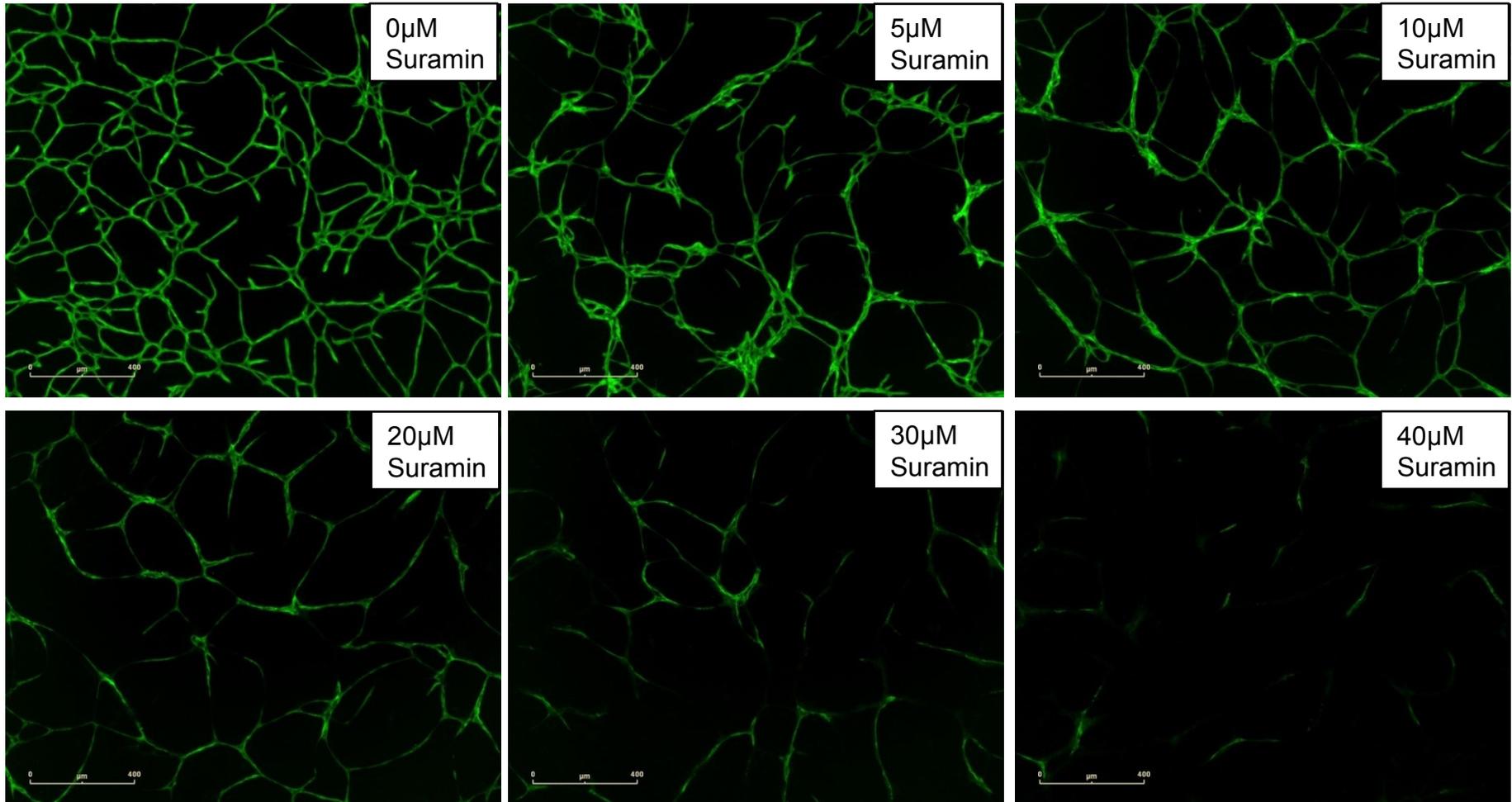


TeloHAEC-GFP (ATCC® CRL-4054™) co-cultured with BJ Fibroblasts (ATCC® CRL-2522™) or hTERT Adipose-derived MSC (ATCC® SCRC-4000™) in the ATCC® Angiogenesis Medium (coming soon) for 14 days.

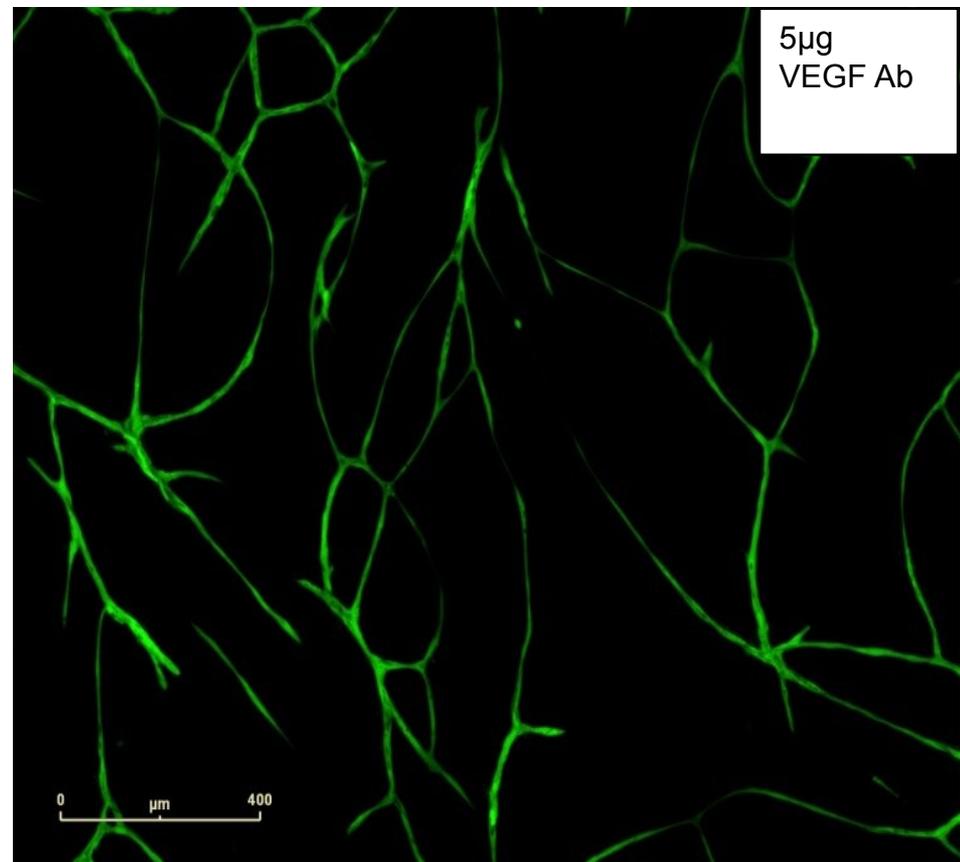
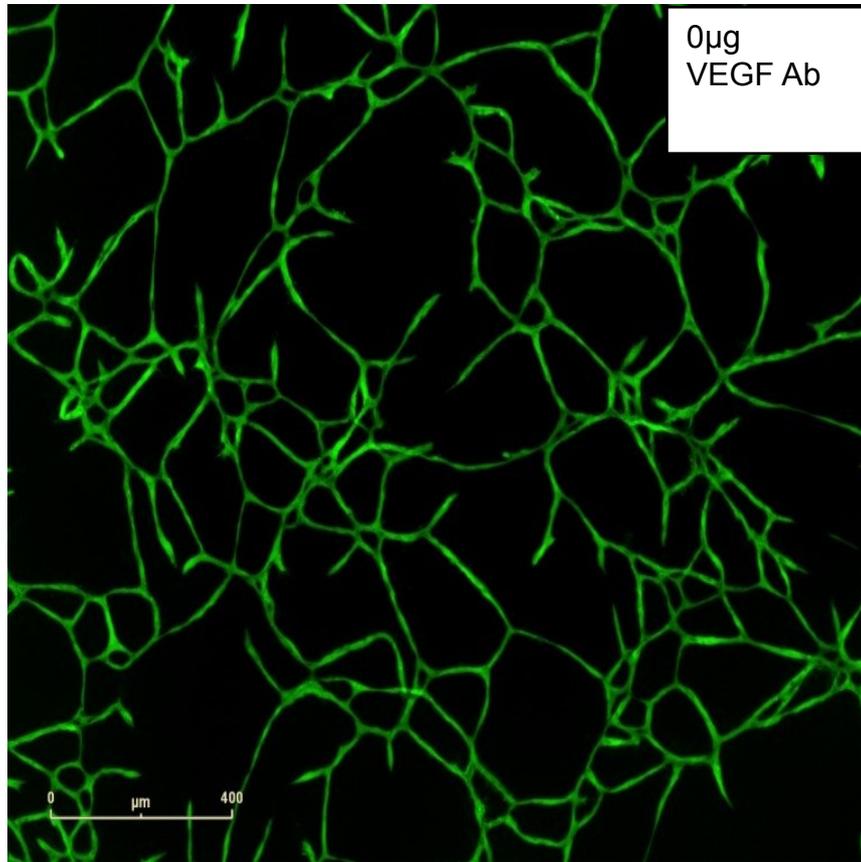
VEGF stimulates tubule formation in the TeloHAEC-GFP and hTERT-MSC co-culture



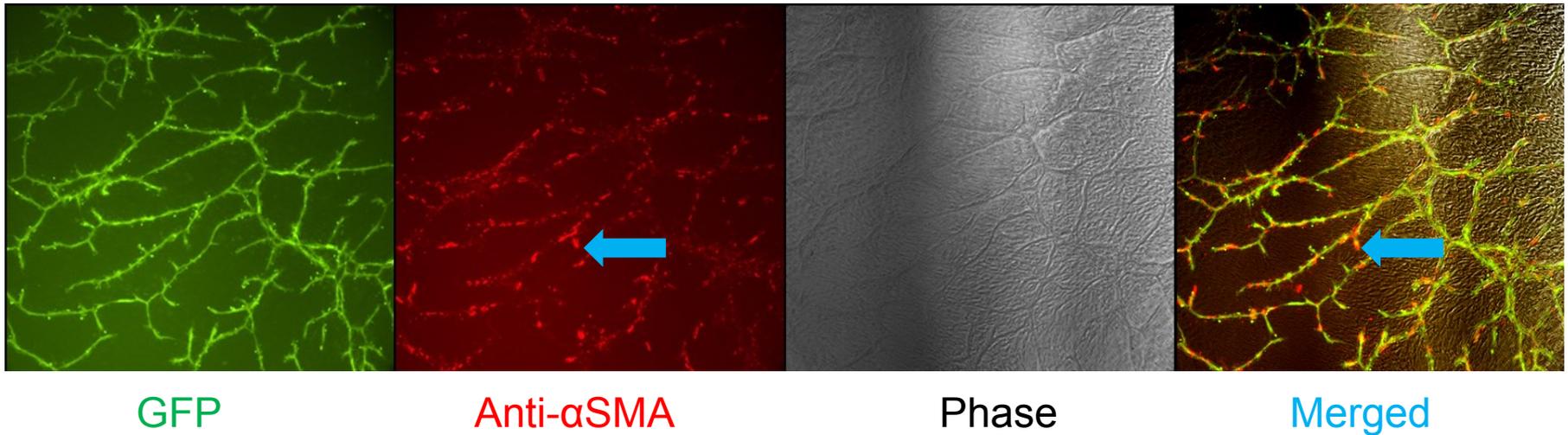
Suramin blocks tubular structure growth in TeloHAEC-GFP and hTERT-MSc co-culture



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



hTERT-MSK transformation to smooth muscle cells supports angiogenesis



- hTERT-MSK transformation to smooth muscle cells - indicated by α -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!
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