



Stem cells in reproductive medicine

Special Interest Group Stem Cells

8

27 June 2010
Rome, Italy

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Stem cells in reproductive medicine

Organised by the Special Interest Group Stem Cells

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ESHRE – European Society of Human Reproduction and Embryology

What is ESHRE?

ESHRE was founded in 1985 and its **Mission Statement** is to:

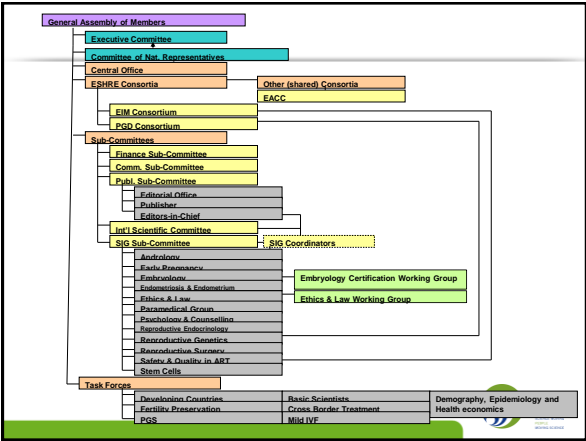
- promote interest in, and understanding of, reproductive science and medicine.
- facilitate research and dissemination of research findings in human reproduction and embryology to the general public, scientists, clinicians and patient associations.
- inform politicians and policy makers in Europe.
- promote improvements in clinical practice through educational activities
- develop and maintain data registries
- implement methods to improve safety and quality assurance



Executive Committee 2009/2011

Chairman	• Luca Gianaroli	Italy
Chairman Elect	• Anna Veiga	Spain
Past Chairman	• Joep Geraedts	Netherlands
	• Jean François Guérin	France
	• Timur Gürgan	Turkey
	• Ursula Eichenlaub-Ritter	Germany
	• Antonis Makrigiannakis	Greece
	• Miodrag Stojkovic	Serbia
	• Anne-Maria Suikkari	Finland
	• Carlos Plancha	Portugal
	• Françoise Shenfield	United Kingdom
	• Etienne Van den Abbeel	Belgium
	• Heidi Van Ranst	Belgium
	• Veljko Vlaisavljevic	Slovenia
	• Søren Ziebe	Denmark





ESHRE Activities – Annual Meeting

- One of the most important events in reproductive science and medicine
- Steady increase in terms of attendance and of scientific recognition

Track record:

ESHRE 2008 – Barcelona: 7559 participants
ESHRE 2009 – Amsterdam: 8132 participants

Future meetings:

ESHRE 2010 – Rome, 27-30 June 2010
ESHRE 2011 – Stockholm, 3-6 July 2011



ESHRE Activities – Scientific Journals

Human Reproduction with impact factor 3.773



Human Reproduction Update with impact factor 7.590



Molecular Human Reproduction with impact factor 2.537



ESHRE Activities – Campus and Data Collection

- Educational Activities / Workshops
 - Meetings on dedicated topics are organised across Europe
 - Organised by the Special Interest Groups
 - Visit: www.eshre.eu under CALENDAR
- Data collection and monitoring
 - EIM data collection
 - PGD data collection
 - Cross border reproductive care survey



ESHRE Activities - Other

- Embryology Certification
- Guidelines & position papers
- News magazine "Focus on Reproduction"
- Web services:
 - RSS feeds for news in reproductive medicine / science
 - Find a member
 - ESHRE Community



ESHRE Membership (1/3)

- ESHRE represents over 5,300 members (infertility specialists, embryologists, geneticists, stem cell scientists, developmental biologists, technicians and nurses)
- Overall, the membership is distributed over 114 different countries, with 50% of members from Europe (EU). 11% come from the US, India and Australia.



ESHRE Membership (2/3)

	1 yr	3 yrs
Ordinary Member	€ 60	€ 180
Paramedical Member*	€ 30	€ 90
Student Member**	€ 30	N.A.

*Paramedical membership applies to support personnel working in a routine environment such as nurses and lab technicians.
**Student membership applies to undergraduate, graduate and medical students, residents and post-doctoral research trainees.



ESHRE Membership – Benefits (3/3)

- 1) Reduced registration fees for all ESHRE activities:
- | | | | |
|----------------|-----------------------|-------|---------|
| Annual Meeting | Ordinary | € 480 | (€ 720) |
| | Students/Paramedicals | € 240 | (€ 360) |
| Workshops | All members | € 150 | (€ 200) |
- 2) Reduced subscription fees to all ESHRE journals – e.g. for Human Reproduction €191 (€ 573!)
- 3) ESHRE monthly e-newsletter
- 4) News Magazine “Focus on Reproduction” (3 issues p. a.)
- 5) Active participation in the Society’s policy-making



Special Interest Groups (SIGs)

The SIGs reflect the scientific interests of the Society’s membership and bring together members of the Society in sub-fields of common interest

- | | |
|-----------------------------|----------------------------|
| Andrology | Psychology & Counselling |
| Early Pregnancy | Reproductive Genetics |
| Embryology | Reproductive Surgery |
| Endometriosis / Endometrium | Stem Cells |
| Ethics & Law | Reproductive Endocrinology |
| Safety & Quality in ART | |



Task Forces

A task force is a unit established to work on a single defined task / activity

- Fertility Preservation in Severe Diseases
- Developing Countries and Infertility
- Cross Border Reproductive Care
- Reproduction and Society
- Basic Reproductive Science
- Fertility and Viral Diseases
- Management of Infertility Units
- PGS
- EU Tissues and Cells Directive



Annual Meeting

Rome, Italy 27 June to 30 June 2010



Pre-congress courses (27 June):

- PCC 1: Cross-border reproductive care: information and reflection
- PCC 2: From gametes to embryo: genetics and developmental biology
- PCC 3: New developments in the diagnosis and management of early pregnancy complications
- PCC 4: Basic course on environment and human male reproduction
- PCC 5: The lost art of ovulation induction
- PCC 6: Endometriosis: How new technologies may help
- PCC 7: NOTES and single access surgery
- PCC 8: Stem cells in reproductive medicine
- PCC 9: Current developments and their impact on counselling
- PCC 10: Patient-centred fertility care
- PCC 11: Fertility preservation in cancer disease
- PCC 12: ESHRE journals course for authors



Annual Meeting – Scientific Programme (1/2)

Rome, Italy 27 June to 30 June 2010



- Molecular timing in reproduction
- Rise and decline of the male
- Pluripotency
- Preventing maternal death
- Use and abuse of sperm in ART
- Live surgery
- Emerging technologies in the ART laboratory
- Debate: *Multiple natural cycle IVF versus single stimulated cycle and freezing*



Annual Meeting – Scientific Programme (2/2)

- Fertility preservation
- Congenital malformations
- ESHRE guidelines
- Data from the PGD Consortium
- European IVF Monitoring 2007
- Debate: *Selection of male/female gametes*
- Third party reproduction in the United States
- Debate: *Alternative Medicine, patients feeling in control?*
- Historical lecture: "Catholicism and human reproduction"



Certificate of attendance

- 1/ Please fill out the evaluation form during the campus
- 2/ After the campus you can retrieve your certificate of attendance at www.eshre.eu
- 3/ You need to enter the results of the evaluation form online
- 4/ Once the results are entered, you can print the certificate of attendance from the ESHRE website
- 5/ After the campus you will receive an email from ESHRE with the instructions
- 6/ You will have TWO WEEKS to print your certificate of attendance



Contact



ESHRE Central Office
Meerstraat 60, 1852 Grimbergen, Belgium
Tel: +32 (0)2 269 09 69
Fax: +32 (0)2 269 56 00
E-mail: info@eshre.eu
www.eshre.eu



PRE-CONGRESS COURSE 8 - Programme

Stem cells in reproductive medicine

Organised by the Special Interest Group Stem Cells

Course coordinators: Carlos Simon (Spain) and Ana Veiga (Spain)

Course description: Human embryonic stem cell lines are promising tools not only for regenerative medicine but also in reproductive medicine and for research in germ line formation and early human development. Provocative new data suggest that stem cell populations, in the gonads, endometrium and placenta, could have a major impact on our understanding of human reproduction in health and disease. The purpose of this course is to update clinicians and embryologists about recent advances in embryonic and somatic stem cell technology with particular emphasis in reproductive medicine. The course will provide insight into the possible generation of gametes from embryonic stem cells, as well as to explore the potential of the endometrial and placenta progenitor stem cell population. Participants will discuss the new clinical, ethical and legal implications of stem cells for reproductive medicine.

Target audience: Clinicians and Scientists working in the field of human reproduction. Clinicians and Scientists interested in getting updated information about progress made in the field of stem cells

Scientific programme:

09:00 – 09:10 Welcome - **Carlos Simon (Spain)**

Chairperson: Ana Veiga (Spain)

09:00 – 09:30 Making a firm decision: multifaceted regulation of cell fate in the early mouse embryo - **Magdalena Zernicka-Goetz (United Kingdom)**

09:30 – 09:45 Discussion

09:45 – 10:15 Differentiation of Oocytes and Sperm from ESC – **Renee Reijo Pera (USA)**

10:15 – 10:30 Discussion

10:30 – 11:00 Coffee break

Chairperson: Carlos Simon (Spain)

11:00 – 11:30 Stem cell niches and testicular development - **Ellen Goossens (Belgium)**

11:30 – 11:45 Discussion

11:45 – 12:15 Stem cell niches in the ovary? - Ji Wu (Canada)

12:15 – 12:30 Discussion

12:30 – 13:30 Lunch

Chairperson: Karen Sermon (Belgium)

13:30 – 14:00 Somatic Stem Cells in the Endometrium and its putative implication in endometriosis - **Carlos Simon (Spain)**

14:00 – 14:15 Discussion

14:15 – 14:45 Somatic Stem Cells in the Myometrium and its putative implication in myoma

Formation - **Tetsuo Maruyama (Japan)**
14:45 – 15:00 Discussion
15:00 – 15:30 Coffee break

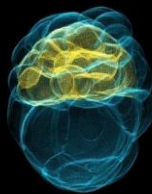
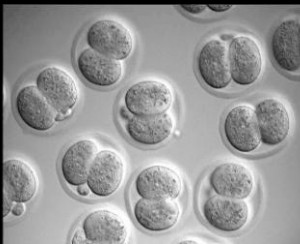
Chairperson: Anis Feki (CH)

15:30 – 16:00 Stem cells from the Extraembryonic Tissues – Placenta, Amniotic fluid and Fetal Membranes - **Susan Fisher (USA)**
16:00 – 16:15 Discussion
16:15 – 16:45 The ESHRE registry of hESC lines with monogenic defects - **Karen Sermon (Belgium)**
16:45 – 17:00 Discussion

Cell Fate Decisions in the Mouse Embryo

Magdalena Zernicka-Goetz
The Gurdon Institute
University of Cambridge

The separation of **ICM** from **TE** is the first key decision which is accomplished during the first 3 days of mammalian embryo life

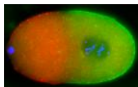


How does it happen?

Flies, worms and frogs, in fact the embryos of most animals, have localised determinants that are key to development of pattern



What about our eggs and embryos?



Such localised determinants often lead to invariant development which is referred to as **determinative**:
If you ablate certain parts, it cannot reconfigure



Based on what was known about other organisms,
a similar mechanism was originally proposed for the
mammalian embryo



Early asymmetry
(Dalcq 1965)

But then the mammalian embryo was thought to be
completely different as its development is quite flexible

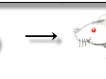


Tarkowski, Nature, 1959



Tarkowski and Wroblewska, JEEM, 1967

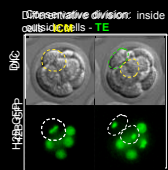
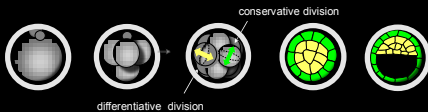
Regulative development:
If you ablate certain parts, it can reconfigure



Tarkowski, Nature, 1961
Mintz, Science, 1962

The First Cell Fate Decision:

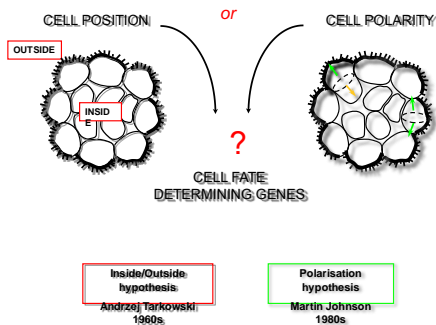
setting apart pluripotent cells - ICM, from TE



Questions

- How do inside and outside cells become different from each other?
Is it just cell position or are asymmetric divisions truly asymmetric?
- How is the formation of inside and outside cells regulated?
 - What makes some cells divide conservatively and others differentially?
 - Is this regulated or does it occur at random?

Two alternative hypotheses for how inside and outside cells become different



But then Richard Gardner made tantalising observations that there are some regularities in early mouse development - the zygote animal-vegetal axis relates to the blastocyst axis!

Development 124, 289-301 (1997)
Printed in Great Britain © The Company of Biologists Limited 1997
DEV1757

The early blastocyst is bilaterally symmetrical and its axis of symmetry is aligned with the animal-vegetal axis of the zygote in the mouse

Could it be, after all, there some prepattern also in a mammalian egg?

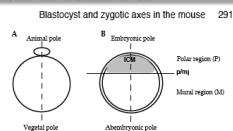
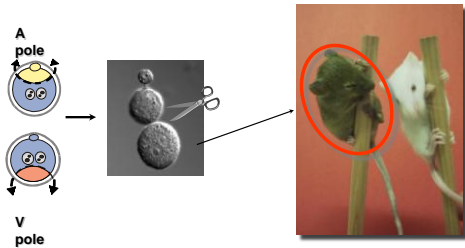


Fig. 1. Diagrams illustrating polarity of the zygote (A) and blastocyst (B) in which the animal-vegetal (AV) axis of the zygote and the embryonic-abembryonic (EAB) axis of the blastocyst are indicated by dashed lines. The horizontal line in (B) represents the polar-mural junction (pmj), the boundary between the polar region of the trophectoderm overlying the inner cell mass (ICM) and the mural region embracing the blastocoelic cavity.

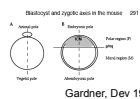
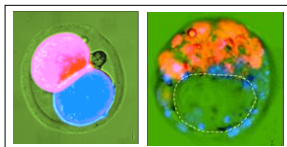
Cut away poles



No essential determinants at either A or V pole

Zernicka-Goetz, Dev, 1998

Lineage tracing reveals the majority of embryos develops with some pattern: their cells are not distributed at random along the embryonic-abembryonic axis

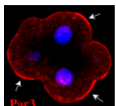


Gardner, Dev 1997

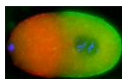
Zernicka-Goetz et al., Dev 1997
Piotrowska and Zernicka-Goetz, Nature 2001
Piotrowska et al, Dev 2001
Gardner, Dev 2001
Fujimori et al., Dev 2003

But it is so so unexpected that generates lots and lots of attack!

Conserved polarity molecules, such as Par3, Par6 and aPKC, that establish polarity of all other model organisms, are also present in mouse embryos and their distribution is highly polarised

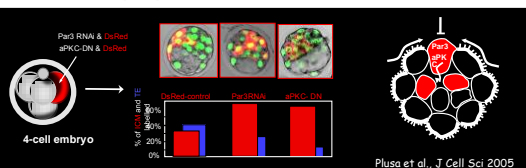


8-cell mouse embryo



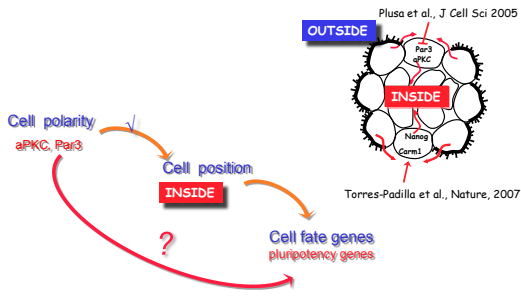
Par proteins in C.elegans embryo

Decreasing cell polarity, by down-regulating either Par3 or aPKC, drives cells to become pluripotent ICM



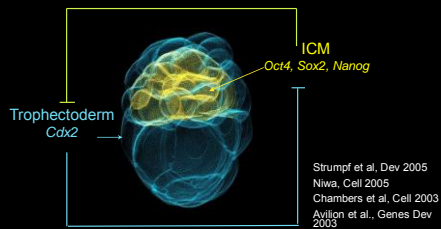
Plusa et al., J Cell Sci 2005

Developmental consequences of cell polarisation



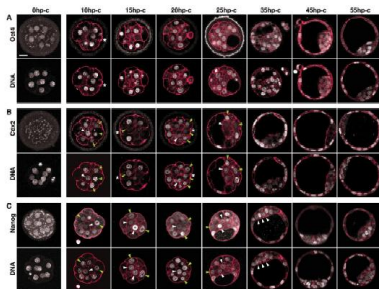
Does cell polarisation affect expression of genes involved in cell fate determination?

Cdx2 is a key player in TE specification



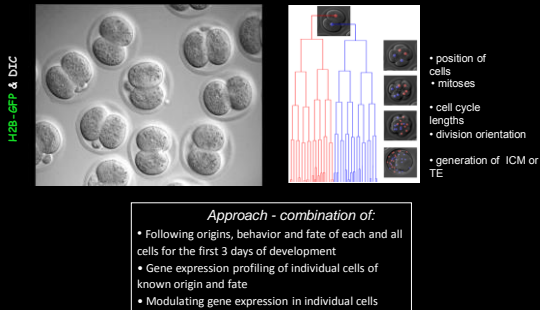
So how does this exclusive pattern of gene expression become set up?

Spatial Variability in the Expression of Pluripotency Genes between Inside and Outside cells, but Less so in Cdx2



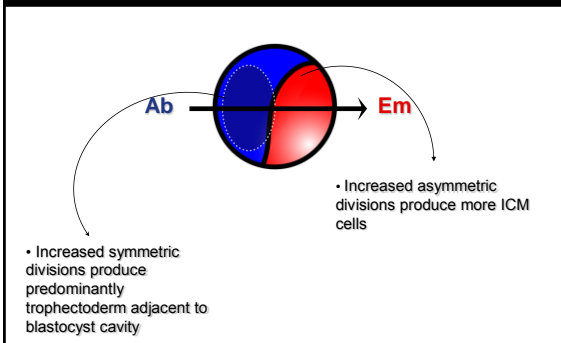
Dietrich and Hiragi, Dev 2008

Can we follow how different cell types arise and relate these to molecular differences between cells?

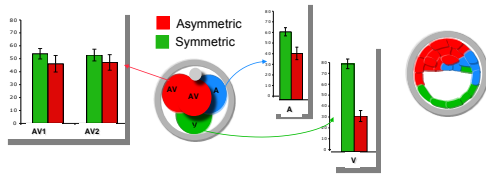


How does the distribution of symmetric and asymmetric divisions, that form TE and ICM cells, relate to the blastocyst cavity formation?

Spatial Distribution of Symmetric vs Asymmetric Divisions Defines the Orientation of the Embryonic-Abembryonic Axis



Symmetric and Asymmetric Divisions and ICM and TE formation

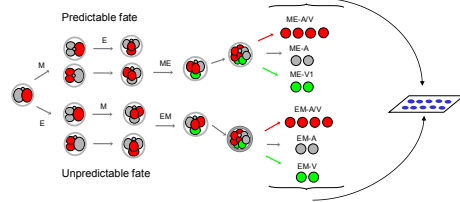


- blastocyst cavity forms in the vicinity of symmetric divisions
- some cells undertake greater proportion of symmetric divisions than others
- identity of such cells is predictable according to their position and history, and this history can be recognised in about half of embryos

Bischoff et al., Dev 2008

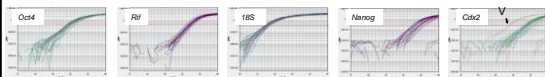
What is the molecular signature of cells that take more symmetric divisions?

Screen:
Monitor division orientations in respect to AV axis & biopsy at the 8-cell stage followed by QPCR in individual cells.



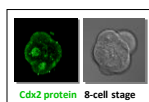
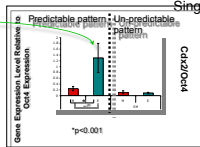
Cells that take more symmetric divisions and contribute preferentially to trophectoderm, have highest Cdx2 levels

- Expression of 35 genes examined and quantitated by rt-PCR on LDAs in individual cells at the 8-cell stage



- Real-time PCR in individual cells at the 8-cell stage

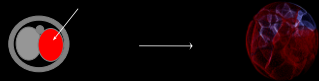
Paul Robson, Genome Center, Singapore



Jedrussik et al. Genes Dev, 2008

Elevation of Cdx2 in half of the embryo directs most of its progeny to trophectoderm by promoting symmetric divisions

Cdx2 mRNA and DsRed



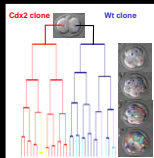
% symmetric divisions

Cdx2 Wt

8-16-cell 67% * 33% N=73

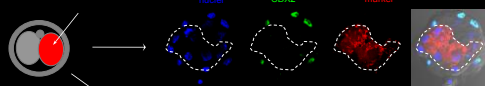
16-32-cell 61% * 39% N=151

* p<0.01

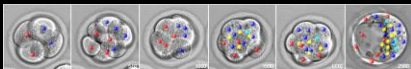


Down-regulation of Cdx2 in half of the embryo directs most of its progeny to ICM by promoting asymmetric divisions

Cdx2 RNAi and DsRed



Time-lapse



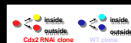
% symmetric divisions (outer cells)

Cdx2 Wt

8-16-cell 40% * 60% (N=65)

16-32-cell 38% * 62% (N=99)

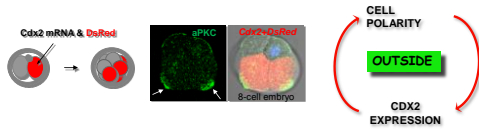
* p<0.01



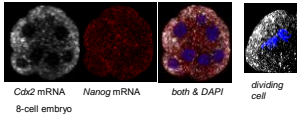
How Cdx2 can affect division orientation?

Cdx2 and Cell Polarity

- Cdx2 influences cell polarity and cell polarity affects division orientation (Plusa et al., JCS, 2005)



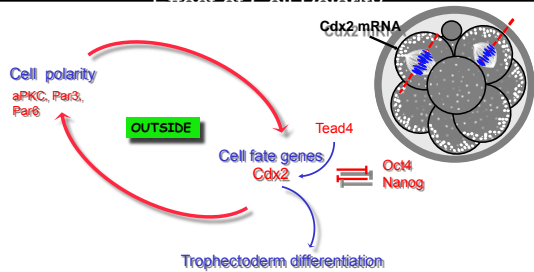
- Cellular polarity affects Cdx2 mRNA localisation



Jedrusik et al, Genes Dev, 2008

Model for how inside-outside symmetry is broken:

Effect of Cell Polarity

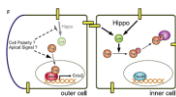
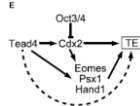


Jedrusik et al, Genes Dev, 2008

Model for how inside-outside symmetry is broken:

Effect of Cell Position

- TEAD/TEF family transcription factor Tead4 is essential for TE development and zygotic Cdx2 expression prior to the blastocyst stage
- TEAD-mediated transcription is regulated by the Ser/Thr kinase Hippo in Drosophila
- Yap1 = Yes associated protein 1 is a co-activator of Tead4
- Lats phosphorylates Yap and excludes it from the nucleus
- The degree of cell contact could influence Lats- and/or Hippo-mediated cell signalling

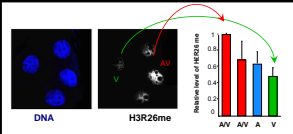


Nishioka et al., Dev Cell, 2009

Mouse embryo cells differ at the 8-cell stage

How does this happen?

Epigenetic asymmetry at the 4-cell stage



Torres-Padilla et al., Nature, 2007; Wu et al., Stem Cells, 2009

can in

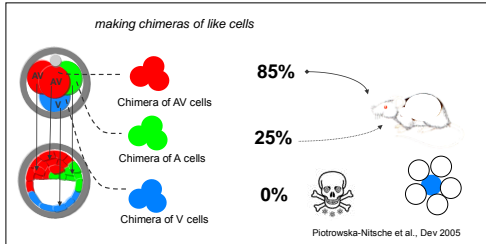
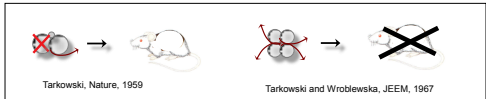
Mouse embryo cells differ at the 8-cell stage

How does this

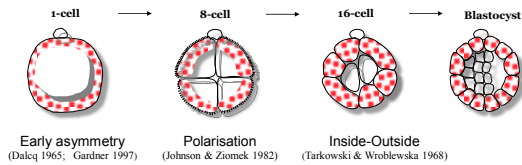
happen?
4-cell progenitor of cells
that express Cdx2 stronger
differ in specific chromatin
modifications

What does this mean in
development?

Developmental consequences of early heterogeneity

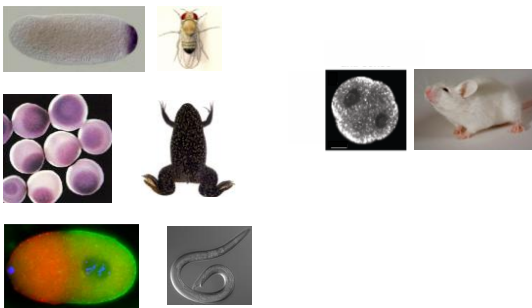


Three hypotheses for how cells become different from each other



Our results integrate these three hypotheses

Mouse has its polarised embryo!






Differentiation of Oocytes and Sperm from ESC

Renee A Reijo Pera, PhD
 Professor
 Director Center for Human Embryonic Stem Cell Research and Education
 Institute for Stem Cell Biology & Regenerative Medicine
 Director of Basic and Translational Research
 Women's Health @ Stanford
 Director Reproductive Biology and Stem Cell Program
 Department of Obstetrics and Gynecology
 Stanford University School of Medicine

Commercial interests: None


STANFORD Stem Cell Biology & Regenerative Medicine Institute

Outline

I. Introduction: Human embryo and germ cell development

II. Differentiation of hESCs and iPSCs to the germ cell lineage


III. Conclusions and challenges for basic studies and clinical applications for restoration of fertility and/or treatment of infertility

Learning Objectives

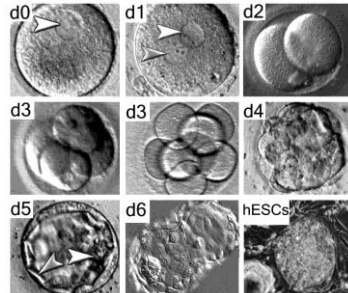
I. To examine human embryo and germ cell development from a basic science perspective

II. To describe the use of hESCs and iPSCs for differentiating sperm and oocytes


III. To discuss limitations to the current technology


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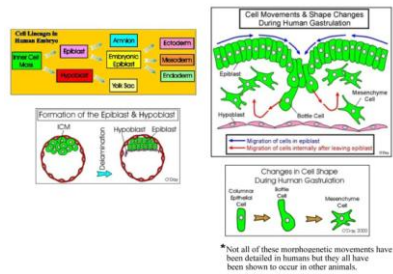
I. Introduction: Human Embryo and Germ Cell Development



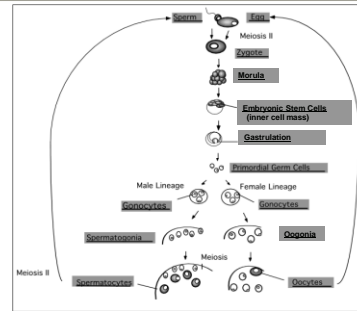
R. Reijo Pera, unpublished


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Moving Forward: The Germ Cell Versus Somatic Cell Lineages



Development of the Human Germ Cell Lineage

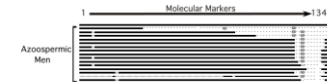


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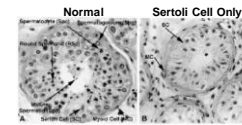
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Men with *DAZ* Deletions Make Few or No Sperm

The *DAZ* genes were identified in a screen for genes on the Y chromosome that cause azoospermia. They are deleted in 10-15% of men with few or no sperm.

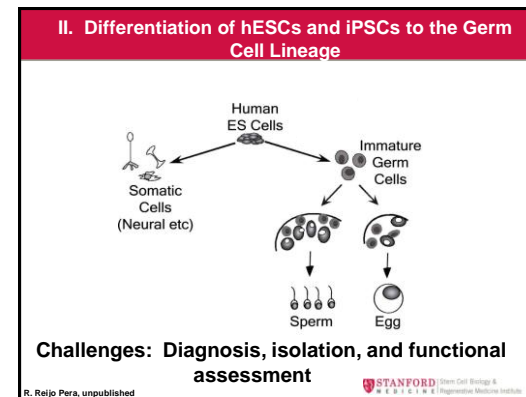
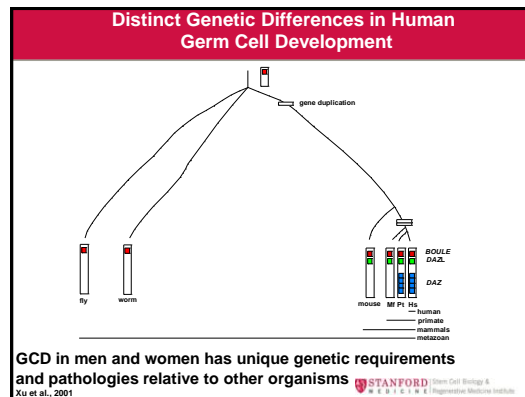
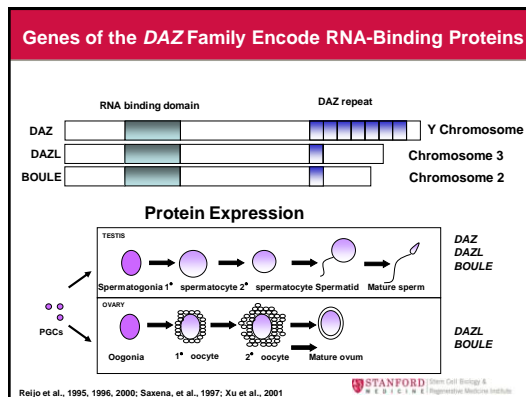


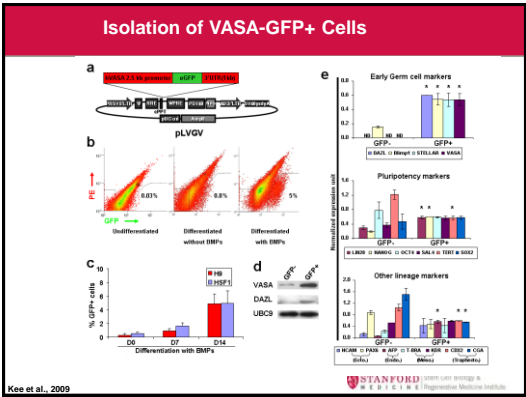
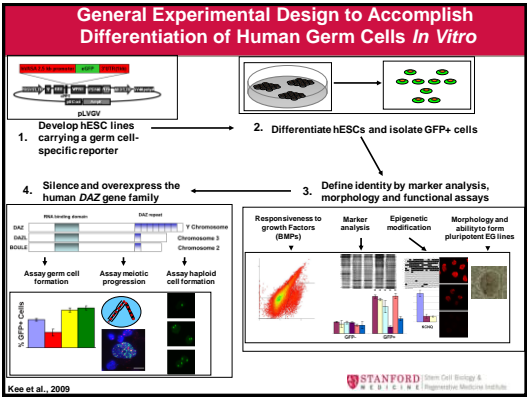
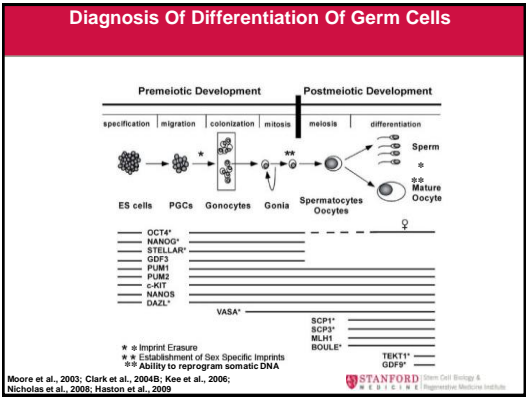
The most common phenotype associated with deletions is SCO.



Reijo et al., 1995, 1996, 2000

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Functional Assessment: VASA-GFP+ Cells Undergo Imprint Erasure and Form Pluripotent EG Lines

a

H19

GFP+ 41% methylated

GFP- 16% methylated

b

GFP+ DAPI SSC Merged

GFP- DAPI SSC Merged

c

Wnt4-VGF GFP+ cells replated on MEI 7 days after FACS (p=)

d

Alkaline Phosphatase Assay

MEFs

GFP+ 8 min

GFP- 3 min

e

7th day differentiated

7 day differentiation + 7th day replated on MEI

f

Expression profile of replated GFP+

fold of GFP+ cells

MEF1 MEF2 MEF3 MEF4 MEF5 MEF6 MEF7 MEF8 MEF9 MEF10 MEF11 MEF12 MEF13 MEF14 MEF15 MEF16 MEF17 MEF18 MEF19 MEF20 MEF21 MEF22 MEF23 MEF24 MEF25 MEF26 MEF27 MEF28 MEF29 MEF30 MEF31 MEF32 MEF33 MEF34 MEF35 MEF36 MEF37 MEF38 MEF39 MEF40 MEF41 MEF42 MEF43 MEF44 MEF45 MEF46 MEF47 MEF48 MEF49 MEF50 MEF51 MEF52 MEF53 MEF54 MEF55 MEF56 MEF57 MEF58 MEF59 MEF60 MEF61 MEF62 MEF63 MEF64 MEF65 MEF66 MEF67 MEF68 MEF69 MEF70 MEF71 MEF72 MEF73 MEF74 MEF75 MEF76 MEF77 MEF78 MEF79 MEF80 MEF81 MEF82 MEF83 MEF84 MEF85 MEF86 MEF87 MEF88 MEF89 MEF90 MEF91 MEF92 MEF93 MEF94 MEF95 MEF96 MEF97 MEF98 MEF99 MEF100

Figure 1. Functional Assessment of VASA-GFP+ Cells. **a**, Methylation levels of H19 and GDF9 in GFP+ and GFP- cells. **b**, GFP+ cells are shown in DAPI, SSC, and Merged channels. **c**, GFP+ cells are replated on MEI after 7 days of FACS. **d**, GFP+ cells are replated on MEI after 7 days of differentiation. **e**, GFP+ cells are shown in DAPI, SSC, and Merged channels. **f**, Expression profile of GFP+ cells.

Kee et al., 2009

STANFORD University School of Medicine

Silencing of DAZ Gene Family Members and VASA-GFP+ Cells

a

XX

SCP3

fold change

Control

1d

2d

3d

4d

5d

6d

7d

8d

9d

10d

11d

12d

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15d

16d

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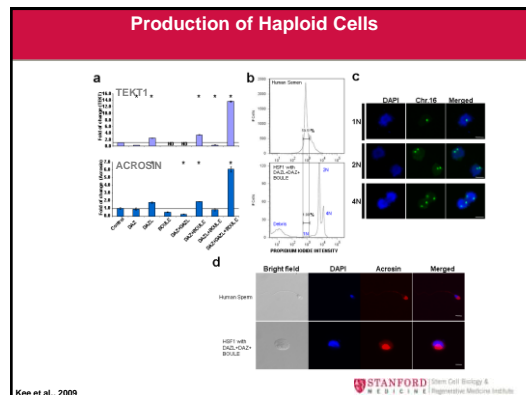
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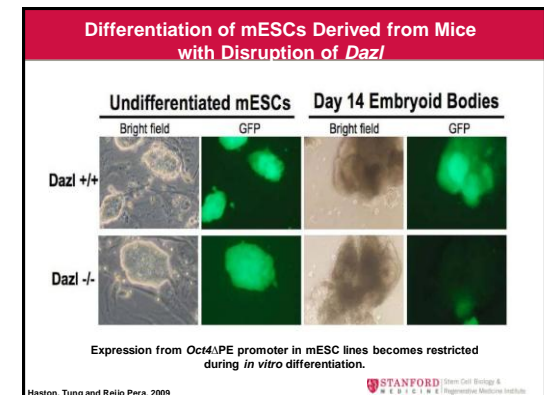


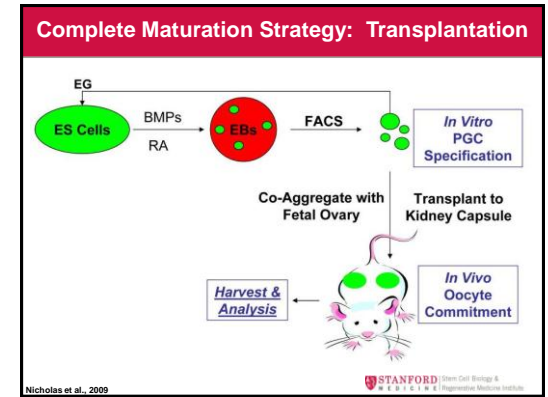
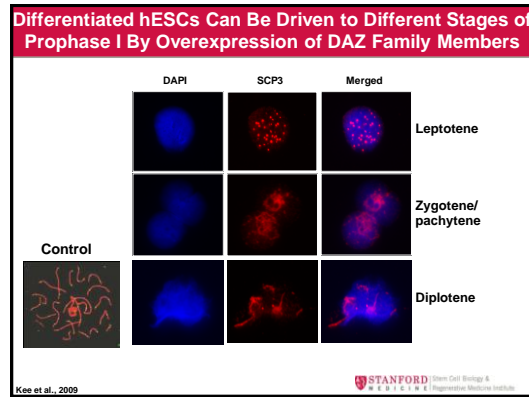
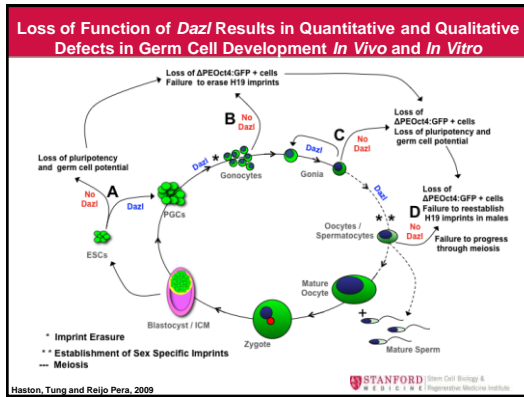
Summary of Results to This Point

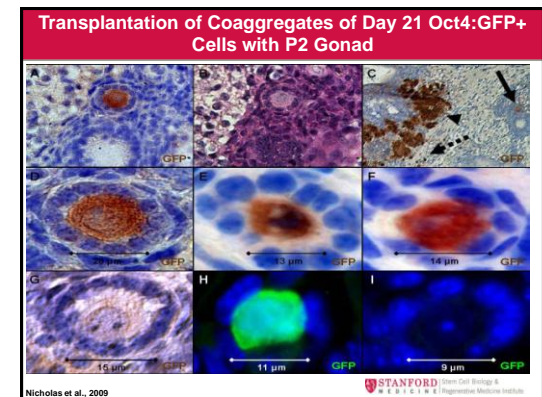
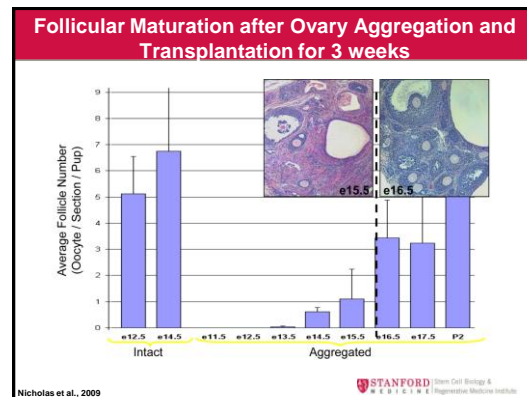
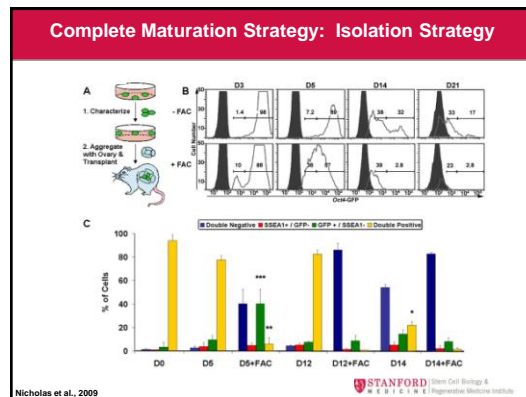
- Constructed a VASA-GFP reporter to isolate cells
- GC number increased by addition of BMPs
- Gene and protein expression indicative of GCs
- Erasure of genome-wide methylation marks as well as those at imprinted loci
- Can propagate EG lines from VASA:GFP+ cells
- Genetic dissection indicates divergence of function of *DAZ* family members
- Production of haploid cells
- System is suitable for studies of environmental toxins

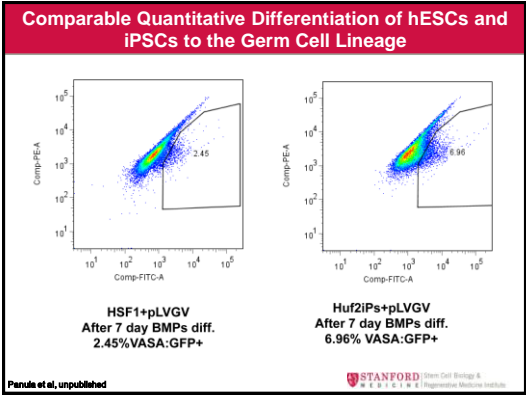
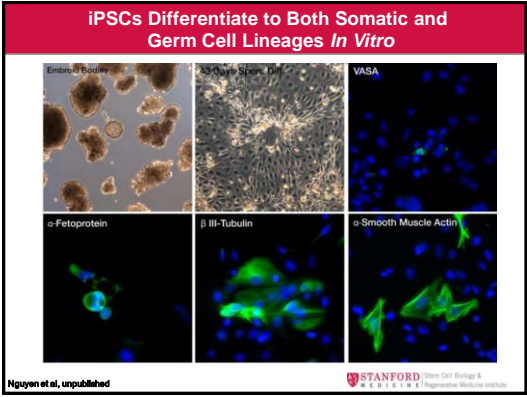
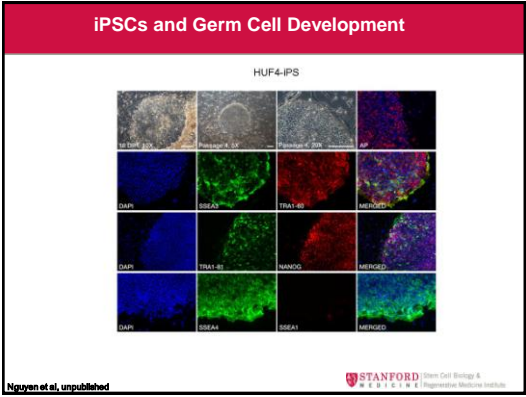
Next? Direct comparison of genetic requirements *in vitro* & *in vivo* & promote oocyte differentiation via transplantation

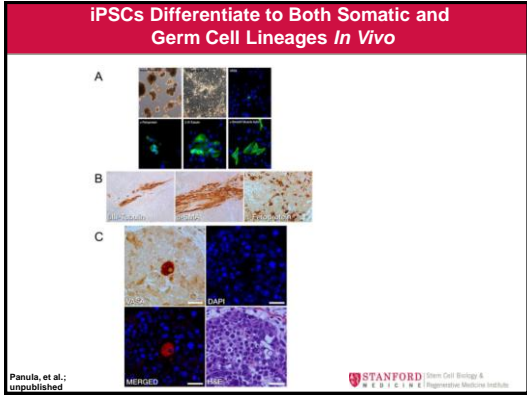
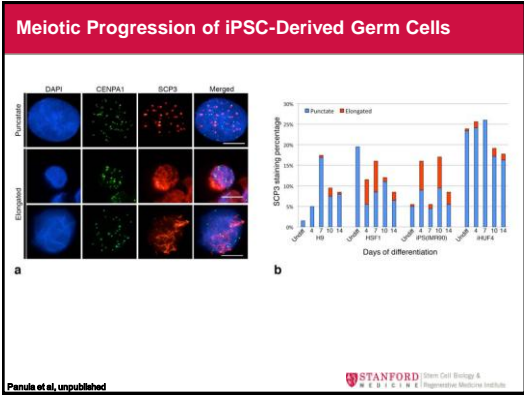
Kee et al., 2006; Fox et al., 2007; Kee et al 2009











- III. Overall Summary**
1. Functional and molecular landmark events in GC development occur in differentiation of both hESCs and iPSCs providing a valuable system for human germ cell development
 2. Genetic dependence of differentiation and/or maintenance of the pluripotent GCs *in vivo* and *in vitro* is shared (at least in part)
 3. ESCs with GC-specific genetic mutations result in reduction (or even absence of "Residual OCT4-positive" cells (these are the putative "teratoma-forming" cells remaining after somatic differentiation); somatic/germ line differentiation is balanced *in vitro*
 4. Human germ cell development is modulated by members of the *DAZ* gene family with Y chromosome *DAZ* implicated in meiotic progress and autosomal genes implicated in PGC formation/maintenance
 5. Transplantation difficult but successful with mESC-derived PGCs (human?) and may allow completion of meiosis
 6. Parallel studies are currently underway to promote oocyte development in human germ cell development
 7. Demonstrated utility in assessing response to environmental toxins (as in polycyclic aromatic hydrocarbons)
 8. Efforts are aimed at developing novel models for basic studies and clinical applications of diagnosis and preservation/restoration of fertility and/or treatment of infertility
- Panula et al, unpublished
- STANFORD Stem Cell Biology & Regenerative Medicine Institute

Major Challenges

1) Directing cell decisions
(optimized cell surfaces, molecular signals, cell interactions)

2) Analysis of single cells
(gene expression, protein expression, epigenetic status, cell cycle length, morphology)

3) Diagnostics of fate
(progenitor differentiation, tumorigenesis)

4) Recapitulation of disease parameters in a dish

5) Complete maturation and functional tests of germ cells

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R. Reijo Pera, unpublished

References

Clark AT, Bodnar MS, Fox MS, Rodriguez RT, Abeyta MJ, Firpo MT, Reijo Pera RA. 2004a. Spontaneous differentiation of germ cells from human embryonic stem cells in vitro. *Hum Mol Genet* **13**: 727-739.

Clark AT, Rodriguez R, Bodnar M, Abeyta M, Turek P, Firpo M, Reijo Pera RA. 2004b. Human STELLAR, NANOG, and GDF3 genes are expressed in pluripotent cells and map to chromosome 12p13.3, a hot spot for testicular carcinoma. *Stem Cells* **22**: 169-179.

Kee K, Angeles V, Flores M, Nguyen H, Reijo Pera RA. 2008. Human DAZL, DAZ and BOULE genes modulate primordial germ cell and haploid gamete formation. *Nature* **452**: 222-225.

Kee K, Goncalves L, Clark A, Reijo Pera RA. 2008. Bone morphogenetic proteins induce germ cell differentiation from human embryonic stem cells. *Stem Cells Dev* **15**: 831-837.

Moore FL, Januszewska J, Dorfmann D, Reijo Pera RA. 2004. Identification of a novel gene, DZIP (DAZ Interacting Protein), that encodes a protein that interacts with DAZ and DAZL (Deleted in AZoospermia and DAZ-Like) and is expressed in embryonic stem cells and germ cells. *Genomics* **83**: 844-848.

Moore FL, Januszewska J, Fox MS, Urano J, Firpo MT, Turek P, Dorfmann DM, Reijo Pera RA. 2003. Human Pumilio-2 is expressed in embryonic stem cells and germ cells and interacts with DAZ (Deleted in AZoospermia) and DAZ-Like proteins. *Proc Natl Acad Sci* **100**: 538-543.

Nicholas C, Banani S, Xu E, Hammer R, Hanna J, Reijo Pera RA. 2008. Characterization of a dual-GFP germ cell-specific reporter. *Genesis* **47**: 74-84.

Nicholas C, Chavez S, Baker V, Reijo Pera RA. 2009. Instructing an embryonic stem cell-derived oocyte fate: lessons from endogenous oogenesis. *Endocr Rev* **30**: 264-283.

Nicholas C, Ghar M, Reijo Pera RA, Lovett A. 2007. Generation of genetically stable, GFP-positive human embryonic stem cell lines for long term transplantation studies. *Stem Cells Dev* **16**: 109-117.

Nicholas C, Haston K, Grewall A, Longacre T, Reijo Pera RA. 2009. Transplantation directs oocyte maturation from embryonic stem cells and provides a therapeutic strategy for female infertility. *Hum Mol Genet* **18**: 4376-4389.

Nicholas C, Haston K, Reijo Pera RA. 2010. Intact fetal ovarian cord formation promotes mouse oocyte survival and development. *BMC Dev Biol* **10**: 2.

Reijo R, Alagappan RK, Patrizio P, Page DC. 1996. Severe oligospermia resulting from deletions of the AZoospermia Factor gene on the Y chromosome. *Cancer* **84P**: 1290-1291.

Reijo R, Lee TY, Salo P, Alagappan R, Brown LG, Rosenberg M, Rosen S, Jaffe T, Straus D, Hovatta O, Chapelle AD, Silber S, Page DC. 1995. Diverse spermatogenic defects in humans caused by Y chromosome deletions encompassing a novel RNA-binding protein gene. *Nature Genet* **10**: 381-393.

Takizawa K et al. 2007. Isolation of pluripotent stem cells from adult human fibroblasts by defined factors. *Cell* **131**: 861-72.

Xu CY, Moore FL, Reijo Pera RA. 2003. A gene family required for human germ cell development evolved from an ancient meiotic gene conserved in all metazoans. *Proc Natl Acad Sci* **98**: 7414-7419.

Yu J et al. 2007. Induced pluripotent stem cell lines derived from human somatic cells. *Science* **318**: 1917-20.

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R. Reijo Pera, unpublished

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No place like home

Stem cell niches and testicular development

Ellen Goossens, PhD

Biology of the Testis (BITE)
Vrije Universiteit Brussel
Belgium

There is no conflict of interest with the material contained within the presentation

Learning objectives

At the end of the course the participants should be able to:

- comprehend the definition and function of stem cells and their niche
- summarize the different steps that occur during testicular development
- understand the differences between non-primate and primate mammals concerning spermatogonial stem cell proliferation and differentiation
- value the importance of spermatogonial stem cell transplantation

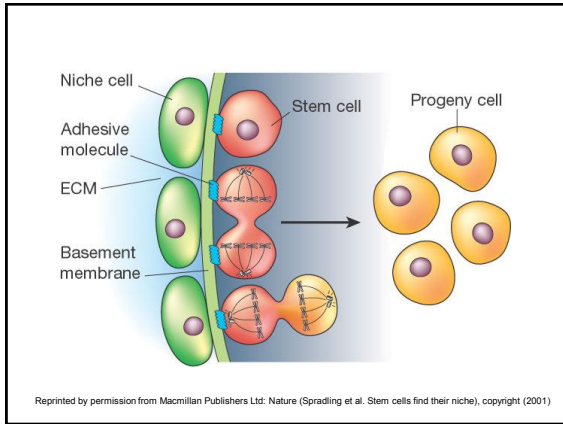
Stem cell niches

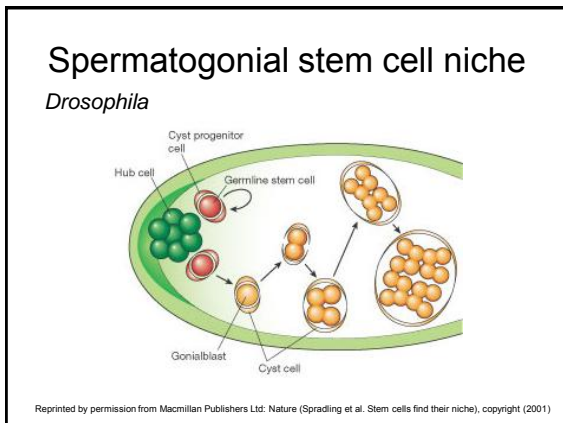
Theory

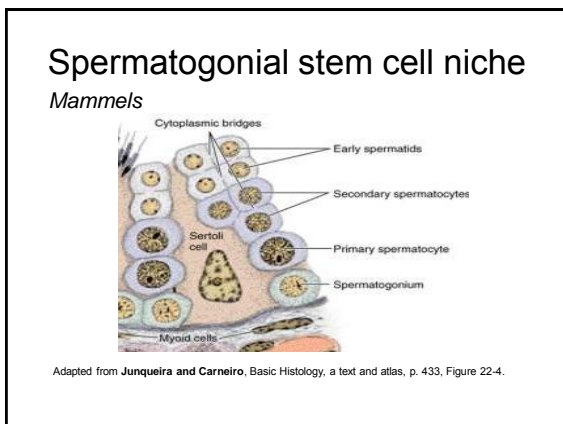
- **Stem cells** are characterized by the ability to renew themselves through mitotic cell division and differentiating into a diverse range of specialized cell types (*Wikipedia*)
- **Niche**: the microenvironment in which stem cells are found, which interacts with stem cells to regulate stem cell fate (*Wikipedia*)

In general

- The niche determines what cell will be a stem cell, not the cell itself
- one stem cell per niche
- When a cell moves out of the niche → differentiation starts
- Invariable number of niches
- Cell loss → self-renewal of stem cells to fill up empty niches

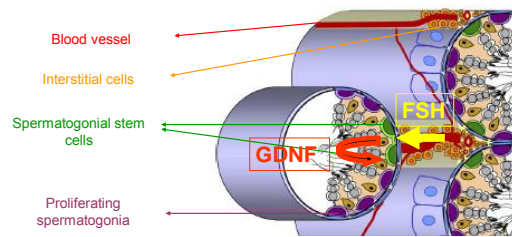




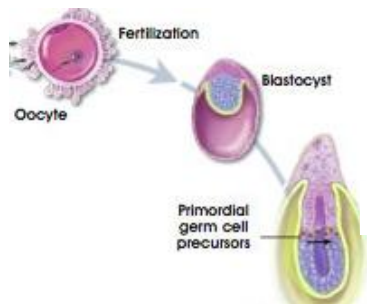


Spermatogonial stem cell niche

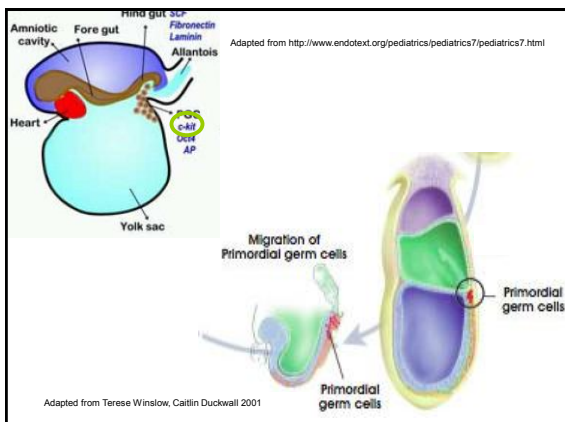
Mammals



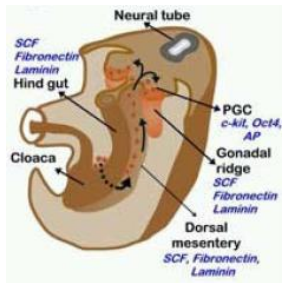
Adapted from Shetty et al., 2007.



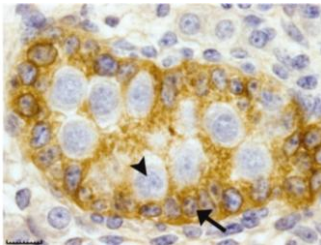
Adapted from Terese Winslow, Caitlin Duckwall 2001



Adapted from Terese Winslow, Caitlin Duckwall 2001

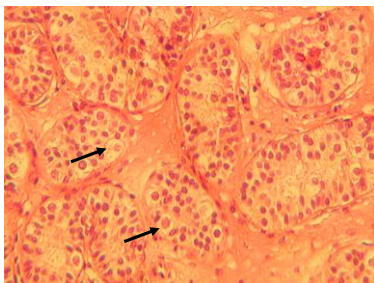


Adapted from <http://www.endotext.org/pediatrics/pediatrics7/pediatrics7.html>

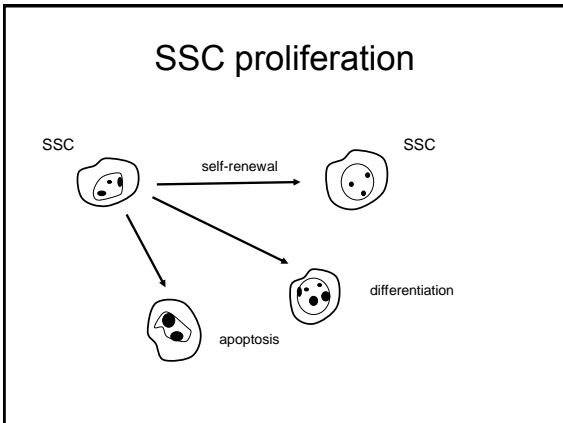


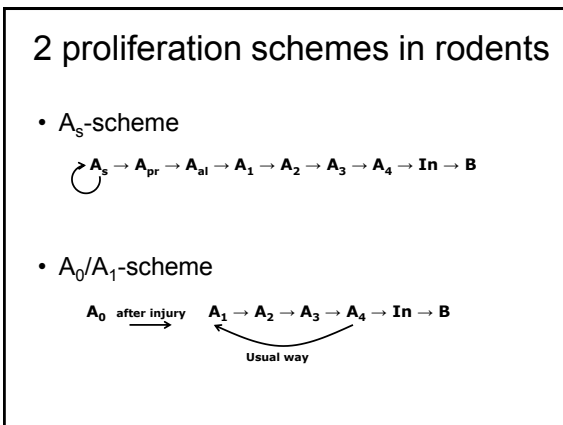
Reprinted by permission from PNAS. Merlet et al., 2007.

SSCs



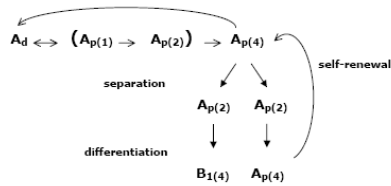






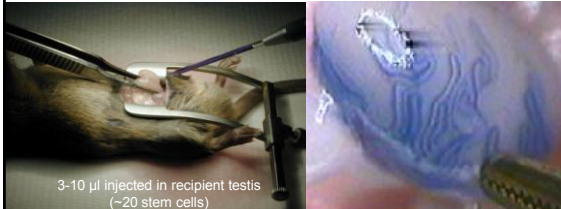
SSC proliferation human

• A_d/A_p -scheme



SSCT

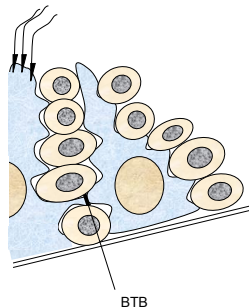
Spermatogonial **s**tem **c**ell **t**ransplantation:
 injection of SSCs from a fertile donor into the
 seminiferous tubules of a sterile recipient
 → transplantation of cells into empty niches



Homing of SSCs after SSCT

SSCs have to
 cross the
 blood-testis
 barrier (BTB)

Relocation to the
 basal
 membrane by
 β -integrin

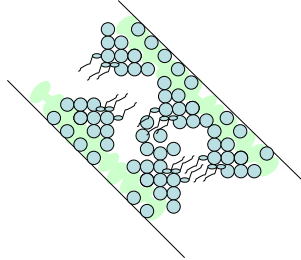


Kanatsu-Shinohara et al. 2008

Colonisation of tubules after SSCT

- A) **One day** after transplantation, blue donor cells are scattered in the lumen of the tubule.
 B) **One week** after transplantation, some donor cells have reached the basement membrane.
 C) **Two weeks** after transplantation, donor cells on the basement membrane of the tubule are forming chains of spermatogonia.
 D) **One month** after transplantation, many blue cells are found on the basement membrane.
 E) **Two months** after transplantation, spermatogenesis has been established in the central areas of colonies.
 F) **Three months** after transplantation, spermatogenesis is well organized.

Nagano et al., 1999

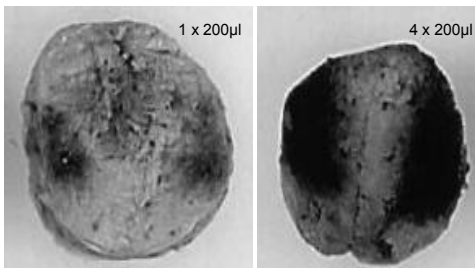


SSCT with SSCs from other species

Donor cells obtained from	Colonisation efficiency
Rat	Spermatozoa
Hamster	Spermatozoa (abnormal, lower number)
Rabbit / Dog	Chains of spermatogonia
Primate	Colonization, no proliferation
Human	Colonization, spermatogonia survive for 6 months

→ Phylogenetic distance between donor and acceptor plays a major role in the efficiency of SSC transplantation

Human-to-human SSCT



Adapted from Brook et al., 2001

Clinical study in the human

Studies on autologous SSCT in humans are very scarce.

Only one by Radford et al. in 1999

Offered as alternative to sperm banking

No news at this moment.

How to evaluate?

Grafting

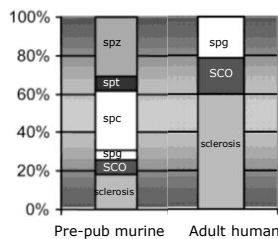
= transplantation of testicular tissue

= transplantation of SSCs together with their niches

= transplantation of SSCs in their natural environment

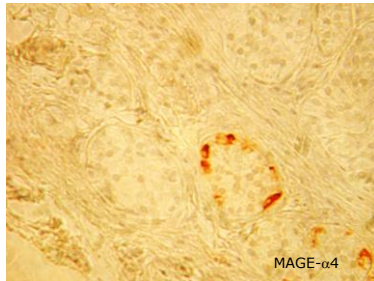


(Xeno)grafting under the back skin



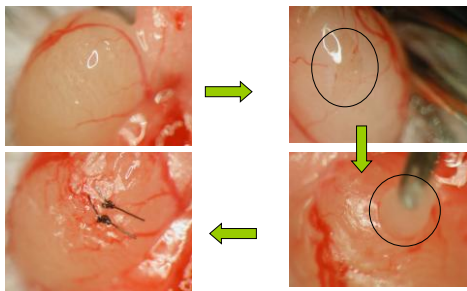
Adapted from Geens et al., 2006

Prepubertal human to mouse



Goossens et al., 2008

Intratesticular grafting



Van Saen et al., 2009

Mouse-to-mouse	Transplantations (n)	Testes with donor spermatogenesis [n (%)]	Total colony length/testis (mm)
SSCT	9	5 (55)	41.3
Intratesticular grafting	16	16 (100)	125.3

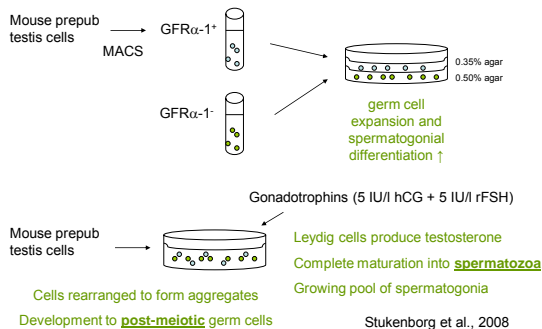
Van Saen et al., 2009

Spermatogenesis in vitro

A little bit of history

- 1915: Goldschmidt: testis tissue in culture
 → progression of spermatogonia into meiosis, but no full spermatogenesis
 → long-term organ culture: ischaemia
- 1999: Cremades: conventional culture of round or elongating spermatids
 → develop in mature gametes
 → not possible when starting from spermatogonia
- 2008: Stukenborg : spatial arrangement of germ cells and somatic cells is important for the regulation and completion of germ cell maturation
 → cultures should provide a microenvironment that resembles the spermatogonial niche
 → 3D cultures support contacts between spermatogonia and Sertoli cells

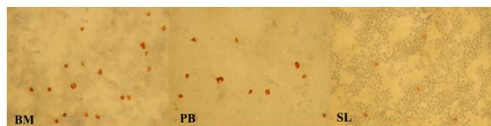
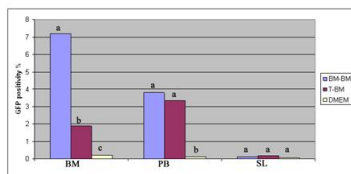
Spermatogenesis in vitro



Transdifferentiation

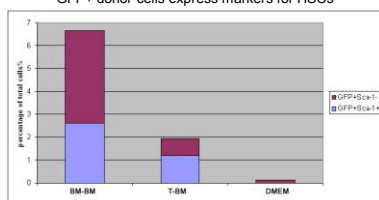
- "the conversion of a differentiated cell of one developmental commitment into a differentiated cell of another lineage without first reverting to a more primitive stem cell or progenitor, with concomitant loss of tissue-specific markers and function of the original cell type, and acquisition of markers and function of the transdifferentiated cell type" (Wagers and Weissman, 2004)
- Conversion only possible when under influence of specific environmental factors
- Transplantation of SSCs to another niche (eg. to bone marrow stem cell niche) → Will SSCs transdifferentiate to HSCs?

GFP+ donor cells are present in recipient's BM, PB and SL



Ning et al., 2010

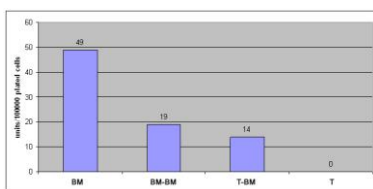
GFP+ donor cells express markers for HSCs



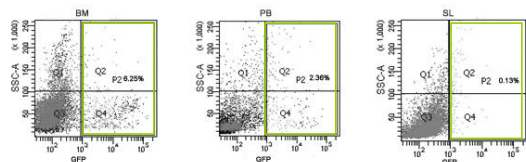
Ning et al., 2010



Functionality test
in-vitro:
GFP+Sca1⁺H2kb⁺
→ CFU



Functionality test in-vivo: GFP+Sca1⁺H2kb⁺ → transplanted to BM



Ning et al., 2010

References

- Brinster RL and Avarbock MR. **Germline transmission of donor haplotype following spermatogonial transplantation.** *PNAS USA* 1994;91:11303-11307.
- Brook PF, Radford JA, Shalet SM, Joyce AD and Gosden RG. **Isolation of germ cells from human testicular tissue for low temperature storage and autotransplantation.** *Fertil Steril* 2001;75:269-274.
- De Rooij DG and Russel LD. **All you wanted to know about spermatogonia but were afraid to ask.** *J Androl* 2000;21:776-798.
- Geens M, De Block G, Goossens E, Frederickx V, Van Steirteghem A and Tournaye H. **Spermatogonial survival after grafting human testicular tissue to immunodeficient mice.** *Hum Reprod* 2006;21:390-396.
- Goossens E, Geens M, De Block G and Tournaye H. **Spermatogonial survival in long-term human pre-pubertal xenografts.** *Fertil Steril* 2008;90:2019-2022.
- Kanatsu-Shinohara M, Takehashi M, Takashima S, Lee J, Morimoto H, Chuma S, Raducanu A, Nakatsuji N, Fessler R and Shinohara T. **Homings of mouse spermatogonial stem cells to germline niche depends on $\beta 1$ -integrin.** *Cell Stem Cell* 2006;3:533-542.
- Merlet J, Racine C, Moreau E, Moreno S and Habert R. **Male fetal germ cells are targets for androgens that physiologically inhibit their proliferation.** *PNAS* 2007;104:3615-3620.
- Nagano M, Avarbock MR and Brinster RL. **Pattern and kinetics of mouse donor spermatogonial stem cell colonization in recipient testes.** *Biol Reprod* 1999;60:1429-1436.
- Ning L, Goossens E, Geens M, Van Saen D, Van Riet I, He D and Tournaye H. **Murine spermatogonial stem cells have the potential to transdifferentiate into hematopoietic cells in vivo.** *Stem Cell* 2010. submitted.

References

- Radford JA, Shalet SM and Lieberman B. **Fertility after treatment for cancer. Questions remain over ways of preserving ovarian and testicular tissue.** *BMJ* 1999;319:935-936. *Drosophila* niche
- Shetty G and Melstrich M. **The Missing Niche for Spermatogonial Stem Cells: Do Blood Vessels Point the Way?** *Cell Stem Cell* 1, 361-363.
- Spradling A, Drummond-Barbosa D and Kai T. **Stem cells find their niche.** *Nature* 2001;414:98-104.
- Stukenborg JB, Wistuba J, Luetjens CM, Elhija MA, Huleihel M, Lunenfeld E, Gromoll J, Nieschlag E and Schiatt S. **Coculture of spermatogonia with somatic cells in a novel three-dimensional soft-agar-culture-system.** *J Androl* 2008;29:312-329.
- Tournaye H and Goossens E. **Adult stem cell population in the testis.** In: **Pellicer A and Simón C. Stem cells in reproductive medicine: basic science and therapeutic potential.** Informa UK Ltd, London, UK. 2007; pp 79-92.
- Van Saen D, Goossens E, De Block G and Tournaye H. **Regeneration of spermatogenesis by grafting testicular tissue or injecting testicular cells into the testes of sterile mice: a comparative study.** *Fertil Steril* 2009;91:2264-2272.
- Voog J, D'Alterio C and Jones DL. **Multipotent somatic stem cells contribute to the stem cell niche in the *Drosophila* testis.** *Nature* 2008;454:1132-1137.
- Yoshida S, Sukeno M and Nabeshima Y. **A vasculature-associated niche for undifferentiated spermatogonia in the mouse testis.** *Science* 2007;317:1722-1725.

Female Germline Stem Cells in Adult Mammal

Ji Wu, Ph.D.
Professor, Shanghai Jiao
Tong University

Conflict of Interest Statement:
The authors declare no conflict of interest.

Learning objective

- To achieve an advanced understanding of the scientific and clinical importance of stem cells, including the relationship between stem cells and disease.
- To identify and locate female germline stem cell (FGSC) in vivo
- To isolation and culture of FGSCs
- To characterize FGSCs
- To understand application of FGSCs

Overview

- I. Stem cell and its characteristics
- II. Germline stem cell
- III. Morphology and location of FGSCs in vivo
- IV. Isolation and culture of FGSCs
- V. Characteristics of FGSCs
- VI. Application of FGSCs
- VII. References

I. What is stem cell? And its characteristics?

II. Germline stem cell

Including:

Spermatogonial stem cells (SSC) (Wu et al., 2008; Yuan et al., 2009)

Female germline stem cells (FGSC) or Oogonia (Zou et al. 2009)

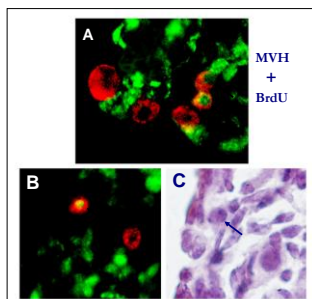
Characteristics

Capable of self-renewal

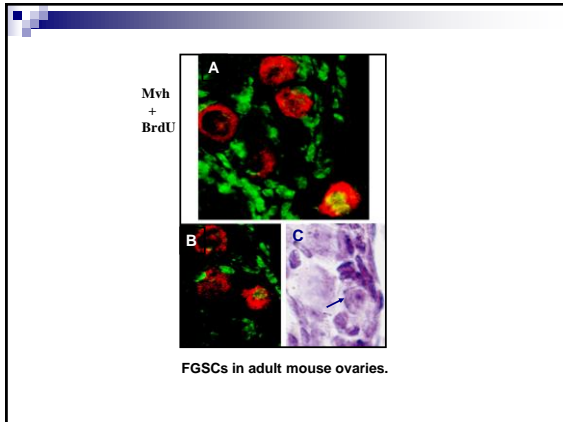
Capable of differentiation

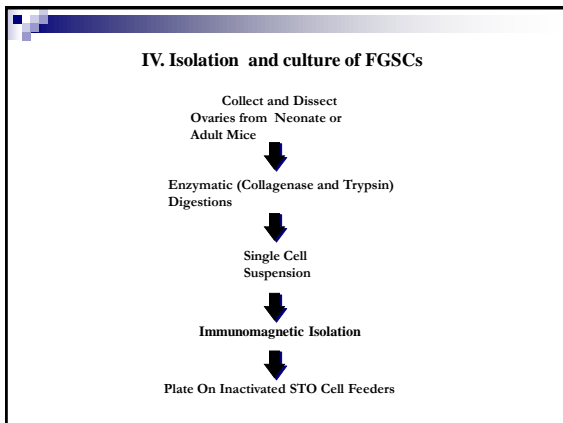
Passing genetic information to the next generation
(Orwig et al., 2002)

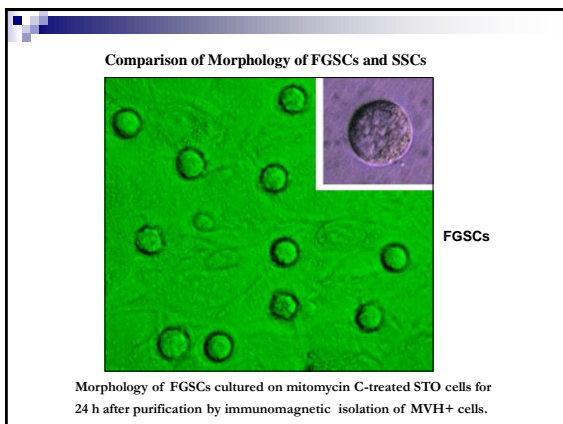
III. Morphology and location of FGSCs in vivo

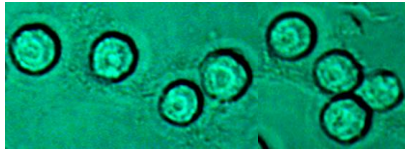


Female germline stem cells (FGSCs) in day 5 ovaries.



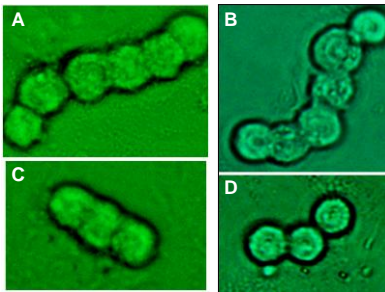






Morphology of SSCs cultured on mitomycin C-treated STO cells for 24 h

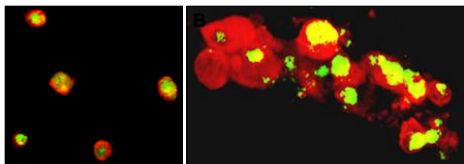
Comparison of growth pattern of FGSCs and SSCs



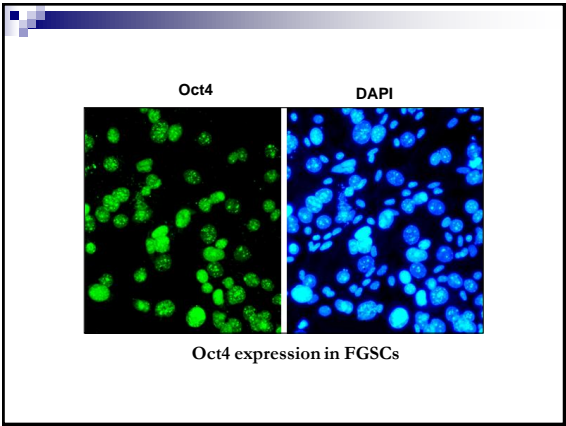
FGSCs

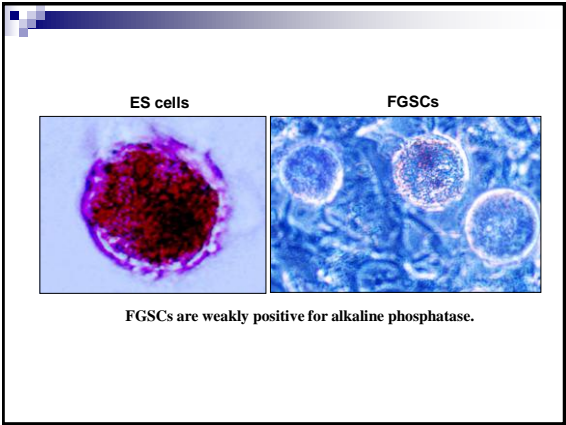
SSCs

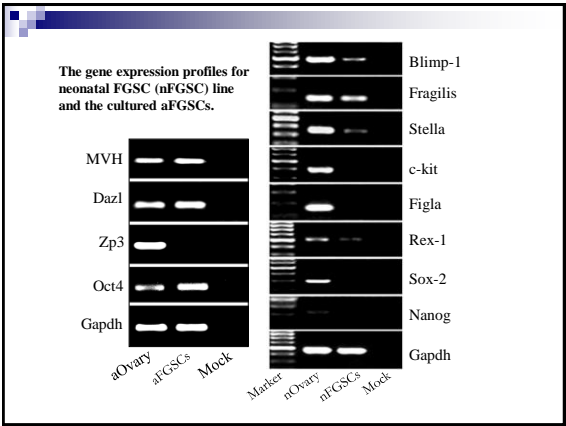
V. Characteristics of FGSCs

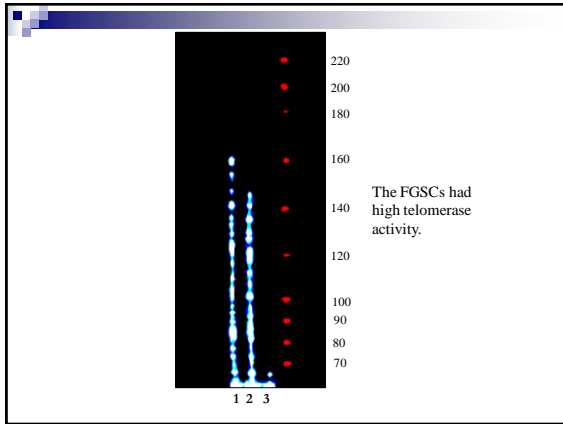


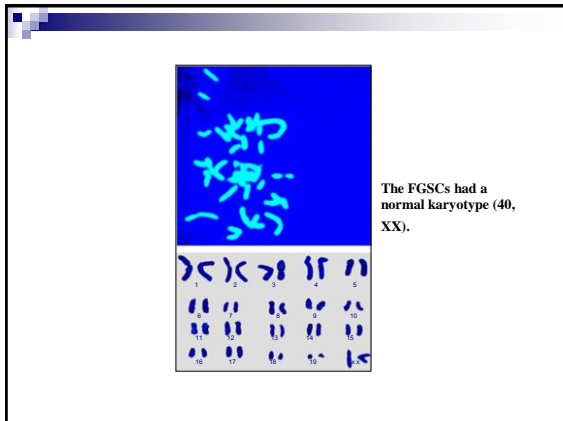
Dual immunofluorescence for MVH (red) and BrdU (green):
FGSCs are positive for MVH and BrdU expression

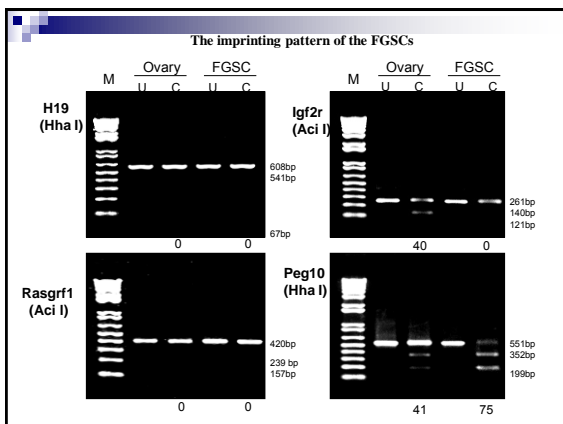




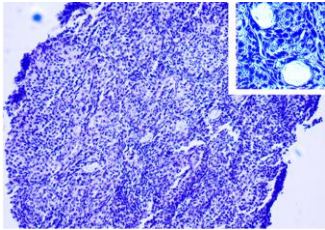




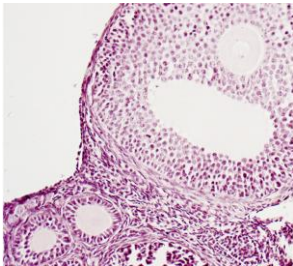




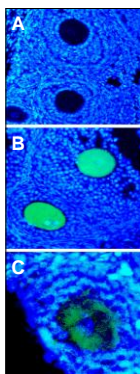
Differentiation in vivo



Differentiation in vivo



Differentiation in vivo

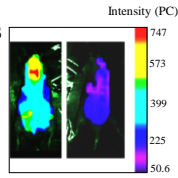


GFP offspring generated from the transplantation of nFGSC line or aFGSCs.

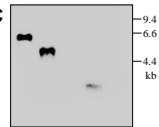
A



B



C



VI. Application

FGSCs have implications for clinical and animal biotechnological applications related to the generation of new oocytes. They are also crucial to the future use of stem cells in regenerative medicine (Zou et al., 2009).

VII. References

- Orwig K.E., Ryu B., Avarbock M.R., Ralph L. Brinster R.L. Male germ-line stem cell potential is predicted by morphology of cells in neonatal rat testes. *Proceedings of the National Academy of Sciences* 2002; 99: 11706-11711.
- Wu J., Zhang Y., Tian G.G., Zou K., Lee C.M., Yu Q., Yuan Z. Short-type PB-cadherin promotes self-renewal of spermatogonial stem cells via multiple signaling pathways. *Cell Signal.* 2008; 20: 1052-1060.
- Yuan Z., Hou R., Wu J. Generation of mice by transplantation of an adult spermatogonial cell line after cryopreservation. *Cell proliferation* 2009; 42: 123- 131.
- Zou K, Yuan Z, Yang Z, Luo H, Sun K, Zhou L, Xiang J, Shi L, Yu Q, Zhang Y, Hou R, Wu J. Production of offspring from a germline stem cell line derived from ovaries. *Nature Cell Biology* 2009; 11: 631-636.



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Contributions

Kang Zou, Huacheng Luo, Zhe Yuan, Zhaojuan Yang, Kejing Sun, Li Zhou, Jie Xiang, Lingjun Shi, Qingsheng Yu, Yong Zhang, Ruoyu Hou

SOMATIC STEM CELLS IN THE ENDOMETRIUM AND ITS PUTATIVE IMPLICATION IN ENDOMETRIOSIS

Prof. Carlos Simón MD; PhD

Professor Obs/Gyn, University of Valencia.

Scientific Director, Fundación IVI.

Scientific Director, Centro de Investigación Príncipe Felipe

The author declares no conflict of interest.



PRINCIPE FELIPE
CENTRO DE INVESTIGACION

VNIVERSITAT ID VALÈNCIA

fivi

INSTITUT
UNIVERSITARI
VALÈNCIA

LEARNING OBJECTIVES

- ➊ To acquire new concepts concerning the biology and origin of somatic stem cells, and their niche.
- ➋ To learn more about the existence of somatic stem cells (SSC) in murine and human endometrium.

Stem Cell

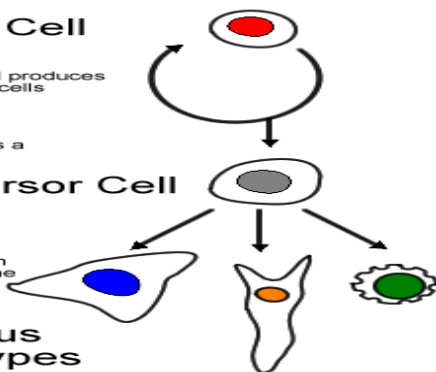
A stem cell produces more stem cells

or becomes a

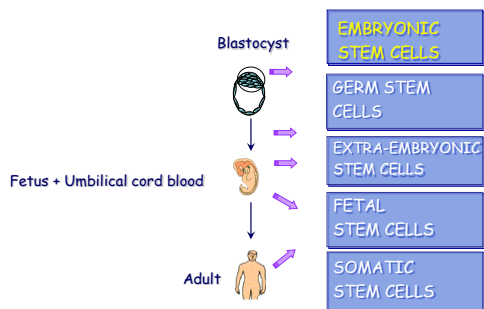
Precursor Cell

which, then can become

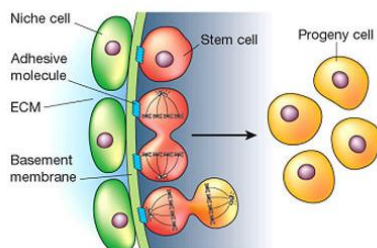
Various cell types



STEM CELLS. SOURCES AND TYPES

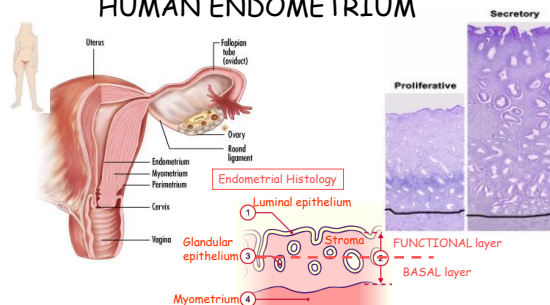


THE NICHE



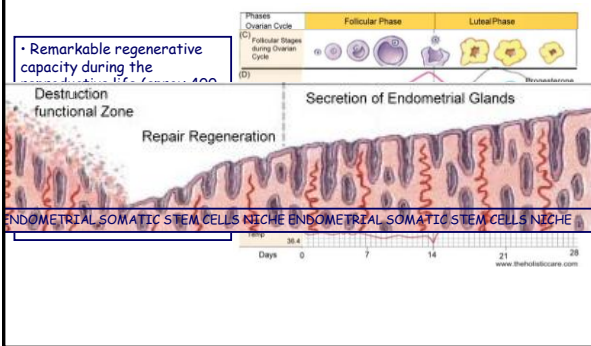
The role of the niche is the support of the SSC population in an organ that suffers very frequently shedding of the functional layer.

HUMAN ENDOMETRIUM



The endometrium is composed of luminal epithelium and epithelial-lined glands surrounded by a supportive stroma. It can be divided into a functional (removed layer) and basal (regenerating layer) compartments.

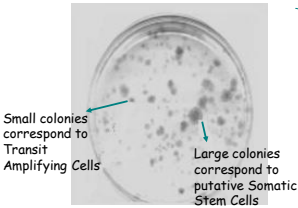
HUMAN ENDOMETRIUM



INDIRECT EVIDENCE FOR THE EXISTENCE OF ENDOMETRIAL SSC (ESSC)

CELL-CLONING STUDIES

Capacity of forming colonies, one of the typical characteristics of stem cells.

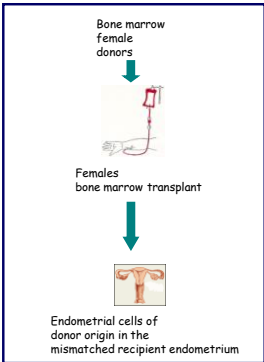


Clones	Clonogenicity (%)	
	Epithelial	Stromal
Large	0.08 ± 0.03	0.02 ± 0.01**
Small	0.14 ± 0.04	1.23 ± 0.18**
Total	0.22 ± 0.07*	1.25 ± 0.18*

The cloning efficiency does not vary significantly across the menstrual cycle; or between cycling and inactive endometrium (Schwab et al., *Fertil Steril* 2005).

Chan et al., *Biol Reprod* 2004.

IMPLICATION OF BONE MARROW

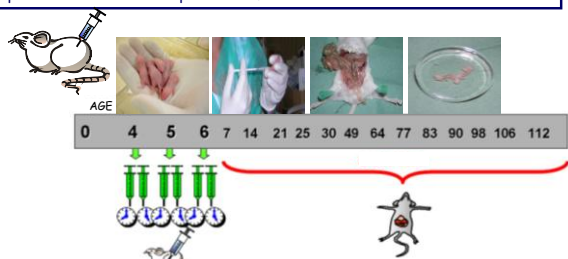


- Percentage of donor-derived cells in endometrium increased with time:
 - 0.25% at 24 months,
 - 4% at 35 months,
 - 10.5% at 129 months,
 - 50% at 147 months.

Taylor., *JAMA* 2004.

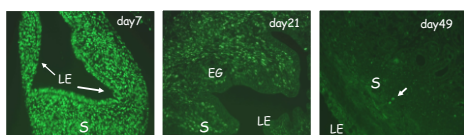
ESSC IN MURINE ENDOMETRIUM

METHOD OF 5-BROME-2-DEOXYURIDINE (BrdU)
BrdU is incorporated into genomic DNA during the replication phase of the mitotic cycle labelling new cells. Identification of label retaining cells (LRC) in epithelial and stromal compartment of murine endometrium.



Chan and Gargett., *Stem cells* 2006.
Cervelló et al., *Human Reprod* 2007.

ESSC IN MURINE ENDOMETRIUM

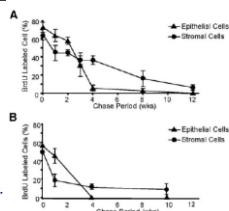


The BrdU retained cells in mice endometrium decreases with age.

Cervelló et al., *Human Reprod* 2007.

After labelling, the BrdU signal is progressively decreased in each division. The retention of the labelling in some populations means no division or very low rate of division, one of the main characteristic of somatic/progenitor stem cells.

Chan and Gargett., *Stem Cells* 2006.



PUTATIVE ENDOMETRIAL STEM CELL MARKERS

	Stem Cell Marker	Endometrial localization	Reference
POU5F1	Embryonic stem cell	In humans, it co-localise with Vimentin and Cytokeratin. In murine populations, co-localization of BrdU- retaining cells.	Matthai et al, 2006. Cervelló et al., 2007
CD90	Cultured Mesenchymal stem cell	In humans, it differentiates the expression in the basalis and functionalis stroma.	Schwab and Gargett, 2008
CD146	Endothelial cell, perivascular cell and Mesenchymal stem cell	In humans, it co-expresses with PDGF-R β .	Schwab and Gargett, 2007, 2008
c-Kit	Hematopoietic stem cell and mast stem cells	In humans, mainly in the stroma. In murine samples, co-localization of BrdU- retaining cells.	Cho et al, 2004 Cervelló et al, 2007 Goodell et al, 2008
CD34	Hematopoietic stem cell and endothelial cells	In humans, mainly in the stroma.	Cho et al, 2004
STRO-1	Mesenchymal Stem cells	In humans, is located on the perivascular regions of the endometrium	Schwab et al., 2008.

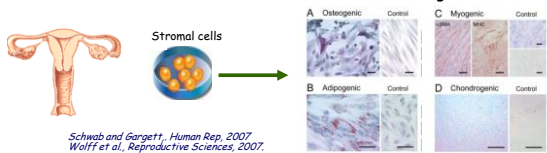
Cervelló et al., *Expert Reviews* 2009.

- Existence of SSC in murine endometrium was demonstrated by BrdU method.
(Chan and Gargett., *Stem cells*, 2006; Cervelló et al., *Human Rep.*, 2007)

- Recent studies demonstrate that human endometrium contains a rare MSC-like population.
(Chan et al., *Biol Rep.*, 2004; Schwab and Gargett., *Human Rep.*, 2007; Wolff et al., *Reprod.Sci.*, 2007.; Gargett et al., *Biol Rep.*, 2009)

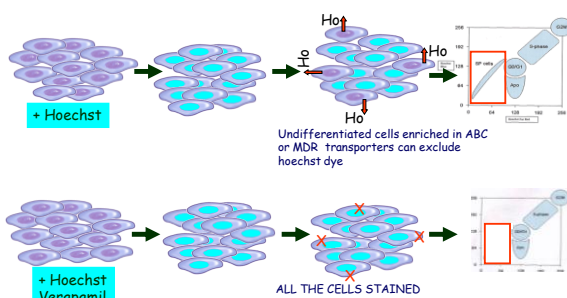
- In the menstrual blood the existence of a stem cell-like population has been demonstrated.
(Meng et al., *J Transl Med*, 2007)

- SSC have differentiated into mesoderm-derived lineages *in vitro*.



ESSC IN HUMAN ENDOMETRIUM

Side Population: Hoechst Method and Cell Sorting



SIDE POPULATION METHOD

- Side Population (SP) method was described for SSC isolation in bone marrow based on the ability to efflux Hoechst33342-fluorescence dye.
(Goodell et al., *J Exp Med.*, 1996)

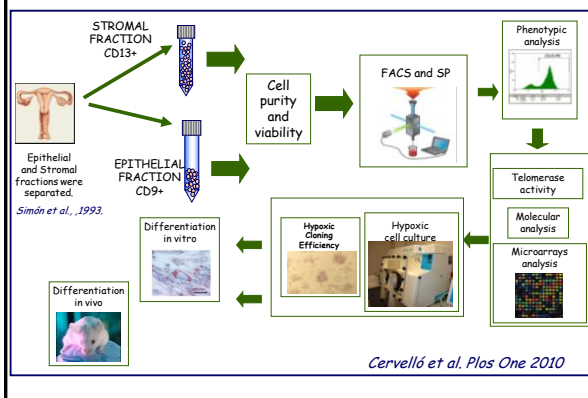
- This property is present in cells enriched in ABC transporters and has been documented in the detection of SSC in human myometrium, lung and dental pulp.
(Ono et al., *PNAS*, 2007; Martin et al., *Cytotherapy*, 2008; Iohara et al., *Stem Cells*, 2008)

- It has also been proposed recently in the human endometrium although not functionally demonstrated yet.
(Kato et al., *Human Rep.*, 2007; Tsuji et al., *Fertil Steril.*, 2008)

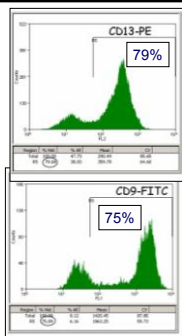
HYPOTHESIS

**COULD THE SP REPRESENT THE
SOMATIC STEM CELL POPULATION IN
THE HUMAN ENDOMETRIUM?**

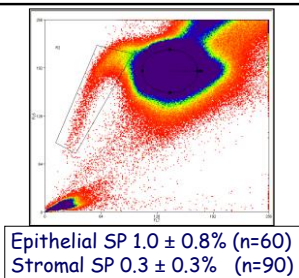
STUDY DESIGN



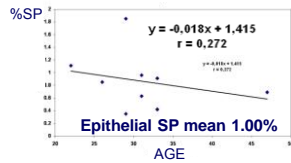
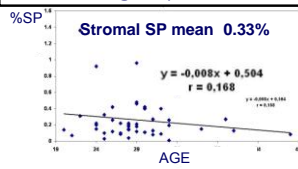
EPITHELIAL AND STROMAL CELL PURITY



SP IN HUMAN ENDOMETRIUM

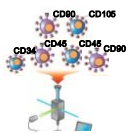


% SP during Reproductive Life



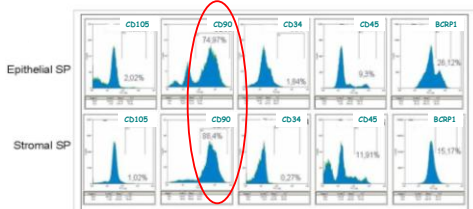
PHENOTYPIC ANALYSIS INTRODUCTION

✓ Phenotypic analysis of Side Population cells:

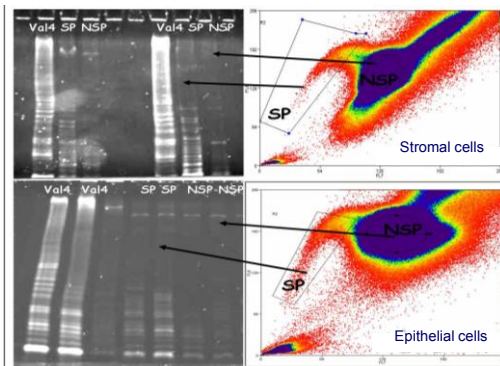


The SP cells were labeled with:

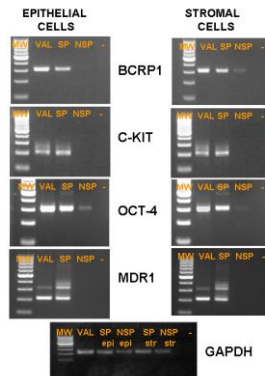
- markers associated with Hematopoietic progenitor cells like CD45-FITC and CD34-PE.
- Mesenchymal stem cells markers like CD90-PE and CD105-FITC.



TELOMERASE ACTIVITY

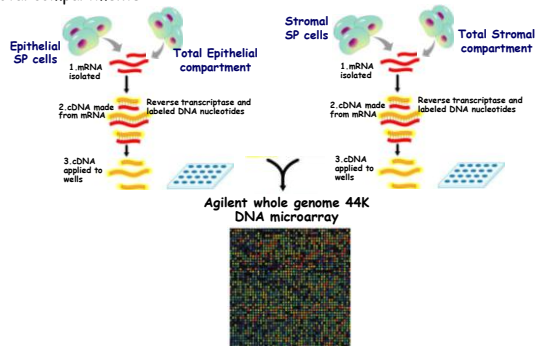


SP MOLECULAR ANALYSIS



MICROARRAYS ANALYSIS

✓ Microarrays analysis of Epithelial and Stromal Side Population versus total compartments:



MICROARRAYS ANALYSIS

TOP TEN MOLECULES SP stromal cells

Molecules	Exp. Value
MMP3	+6.532
RND3	+6.412
SERPINF2	+6.275
SLC4A1	+6.026
ANGPTL4	+5.820
INHBA	+5.674
IER3	+5.578
KRT34	+5.502
GDF15	+5.367
ADM	+5.324

Molecules	Exp. Value
VWF	+4.331
SCGB1D2	+4.321
SERPINA5*	+4.185
ASRGL1*	+3.589
SOX17	+3.567
SCGB2A1	+3.169
HSD	+3.105
ACSL5	+3.105
TPD52L1	+3.085
ST6GALNAC1	+3.083

SP stromal cells vs Stromal cells:
121 genes up-regulated
74 genes down-regulated

Molecular and cellular Functions:
-Cell signalling and interaction
-Cellular growth and proliferation
-Cellular movement
-Cell death
-Cell cycle

TOP TEN MOLECULES SP epithelial cells

Molecules	Exp. Value
IL1B	+19.623
CXCL1	+19.069
HSPA6	+16.887
TUBA4A	+13.661
CCL4	+13.402
POLR2J2	+13.321
CACNG5	+13.281
GDF15	+12.487
CD69	+11.971
RGS1	+11.604

Molecules	Exp. Value
FOXK1	+12.402
PCSK1N	+11.151
POU3F3	+9.126
NEUROG3	+8.531
SYNPO	+7.969
CACNA1E	+7.794
CHRH2	+7.654
IER5*	+7.654
NEUROG3	+7.593
SYN1	+7.002

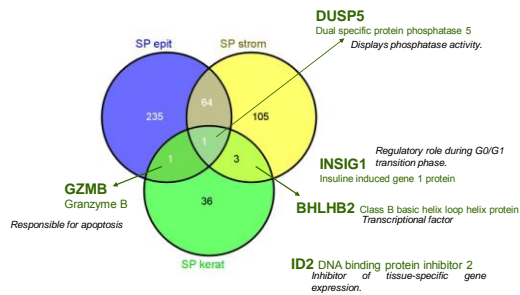
SP epit cells vs Epithelial cells:
196 genes up-regulated
116 genes down-regulated

Molecular and cellular Functions:
-Cell signalling and interaction
-Cellular growth and proliferation
-Cellular movement
-Cell death

MICROARRAYS ANALYSIS

✓ Microarrays comparison with keratinocytes SP:

Larderet et al., Keratinocytes. Stem cells. 2006.

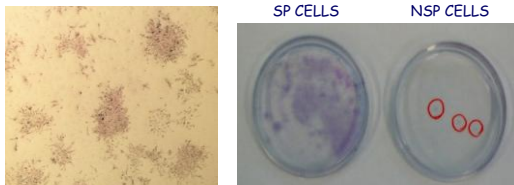


CLONING OF SP CELLS IN HYPOXIC CONDITION

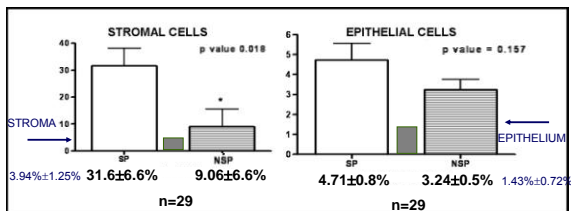
✓ Cell culture conditions: 2% O₂, 37°C, 5% CO₂, 90 % humidity:

300-500 cells/cm² were seeded into 60-mm Petri dishes coated with gelatine 0.1%, cultured in serum medium, incubated for **15 days** and stained with 0.5% Toluidine Blue for 5 min.

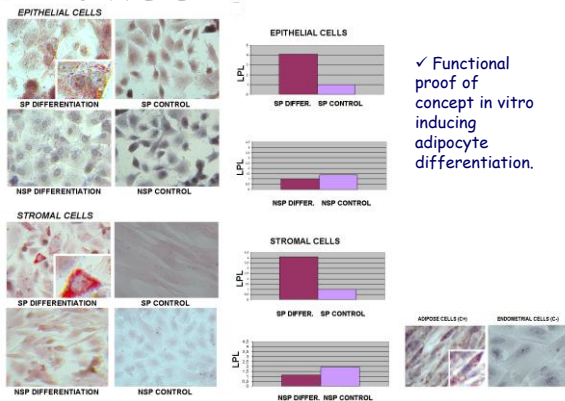
CLONING EFFICIENCY CE (%) = (Number of colonies/number of cells seeded) × 100.



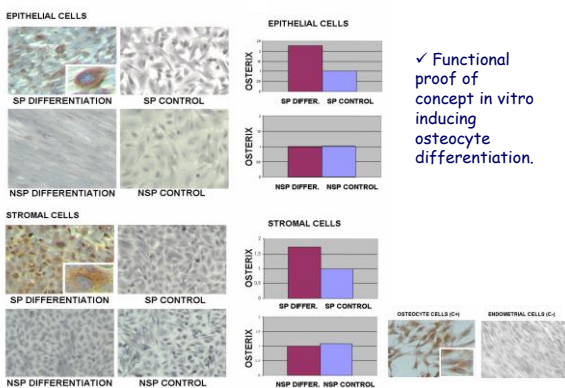
CLONING EFFICIENCY



DIFFERENTIATION IN VITRO

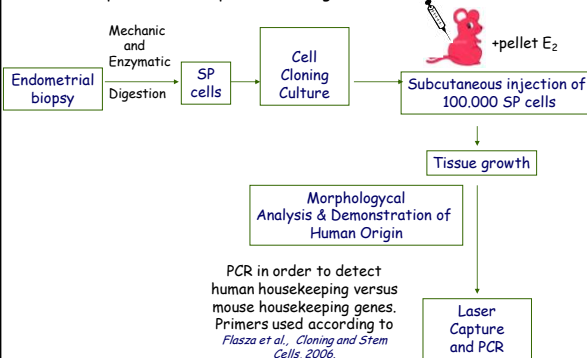


DIFFERENTIATION IN VITRO

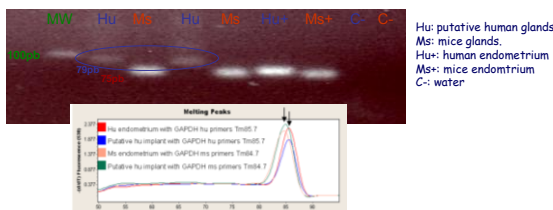


IN VIVO DIFFERENTIATION

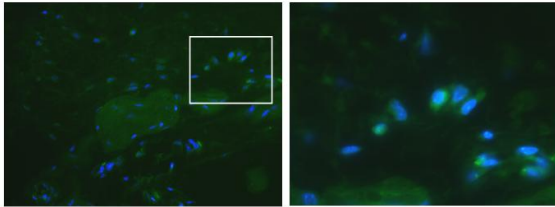
✓ Functional proof of concept in vivo using NOD-SCID female mice:



Flasza et al., Cloning and Stem Cells, 2006.



IN VIVO DIFFERENTIATION



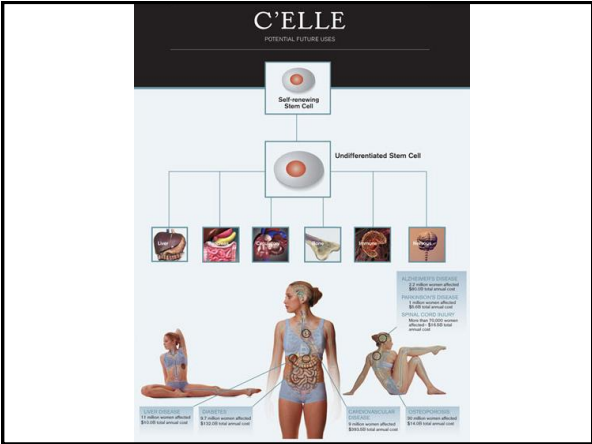
Immunohistochemical analysis for Human Progesterone Receptor in endometrial like structures in mice subcutaneous tissue after stroma SP injection (40X). Right, Detail of green fluorescent signal due to Hu-PR co-localized with DAPI

CONCLUSIONS

- > SP account for 0.3% and 1% of the stromal and epithelial compartment respectively, remaining constant during reproductive life.
- > Phenotype of SP suggest a mesenchymal origin and they display an intermediate pattern of telomerase activity, being positive for c-Kit, Oct-4 and BCRP-1
- > Wide genome analysis demonstrated a differential gene expression profile of SP compared to its endometrial fraction. A common SP signature is suggested.
- > SP cells do not growth in normoxic conditions. In hypoxic conditions, SP cells display high cloning efficiency compared to NSP and total fraction.
- > Stromal and epithelial SP have been differentiated in vitro to adipocytes and osteocytes.
- > The functional proof of concept is given by the ability of SP cells to reconstruct the human endometrium in an animal model.







REFERENCES:

1. Chan, RW., Schwab, KE., and Gargett, CE. (2004) Clonogenicity of human endometrial epithelial and stromal cells. *Biol Reprod* 70: 1738-1750.
2. Taylor, HS. (2004) Endometrial cells derived from donor stem cells in bone marrow transplant recipients. *JAMA* 292: 81- 85.
3. Meng, X., Ichim, TE., Zhong, J. et al. (2007) Endometrial regenerative cells: a novel stem cell population. *J Transl Med* 5:57.
4. Tsuji, S., Yoshimoto, M., Takahashi, K. et al. (2008) Side population cells contribute to the genesis of human endometrium. *Fertil Steril*. (4 Suppl): 1528-37.
5. Chan, RW., and Gargett, CE. (2006) Identification of label- retaining cells in mouse endometrium. *Stem Cells* 24:1529-1538.
6. Cervelló, I., Martínez-Conejero, JA., Horcajadas, et al. (2007) Identification, characterization and co-localization of label-retaining cell population in mouse endometrium with typical undifferentiated markers. *Human Reproduction* 22: 45-51.
7. Cervelló, I., Gil-Sanchis C, Mas A and Simón C. (2009) Current understanding of endometrial stem cells. *Expert Review of Obstetrics & Gynecology* Vol. 4, No. 3.
8. Cervelló I, Simón C.(2009) Somatic stem cells in the endometrium. *Reprod Sci.*;16(2):200-5. Review.
9. Cervelló I, Gil-Sanchis C, Mas A, Delgado-Rosas F, Martínez-Conejero JA, Galán A, Martínez-Romero A, Martínez S, Navarro I, Ferro J, Horcajadas JA, Esteban FJ, O'Connor JE, Pellicer A and Simón C. (2010) Human endometrial side population cells exhibit genotypic, phenotypic and functional features of somatic stem cells. *Plos One* (accepted).

REFERENCES:

10. Goodell, MA., Brose, K., Paradis, G. et al. (1996) Isolation and functional properties of murine hematopoietic stem cells that are replicating in vivo. *J Exp Med.* 183 (4):1797-806.
11. Ono, M., Maruyama, T., Masuda, H. et al. (2007) Side population in human uterine myometrium displays phenotypic and 11. functional characteristics of myometrial stem cells. *Proc Natl Acad Sci USA* 104(47):18700-5.
12. Martin, U. (2008) Methods for studying stem cells: adult stem cells for lung repair. *Methods* 45(2):121-32.
13. Iohara, K., Zheng, L., Wake, H. et al. (2008) A novel stem cell source for vasculogenesis in ischemia: subfraction of side population cells from dental pulp. *Stem Cells* 26(9):2408-18.
14. Kato, K., Yoshimoto, M., Adachi, S. et al. (2007) Characterization of side-population cells in human normal endometrium. *Human Reproduction* 22: 1214- 1223.
15. Schwab, KE., Gargett, CE. (2007) Co-expression of two perivascular cell markers isolates mesenchymal stem-like cells from human endometrium. *Human Reproduction* 22:2903-2911.
16. Wolff EF, Wolff AB, Hongling Du, Taylor HS.(2007) Demonstration of multipotent stem cells in the adult human endometrium by in vitro chondrogenesis. *Reprod Sci.*14(6):524-33.
17. Gargett CE, Schwab KE, Zillwood RM, Nguyen HP, Wu D. (2009) Isolation and culture of epithelial progenitors and mesenchymal stem cells from human endometrium. *Biol Reprod.*80(6):1136-45.



icervello@ivi.es csimon@ivi.es





Somatic Stem Cells in the Myometrium and its Putative Implication in Myoma Formation*

Tetsuo Maruyama*, M.D., Ph.D.
Department of Obstetrics and Gynecology
School of Medicine, Keio University



DEPARTMENT OF
OBSTETRICS AND GYNECOLOGY
SCHOOL OF MEDICINE, KEIO UNIVERSITY

* I have declared that no competing interests exist.

Learning Objectives

- #1. Somatic stem cell
- #2. Side population (SP) cells
- #3. Candidates for myometrial stem cells
 - a. Myometrial SP cells
 - b. Myometrial Lin-/CD34+/CD49f cells
- #4. Tumor/cancer stem cells
- #5. Leiomyoma formation and myometrial stem cells



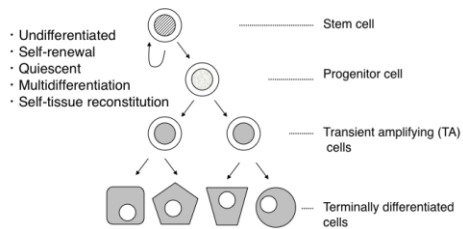
Somatic stem cells / adult stem cells / tissue-specific stem cells

- Undifferentiated cells, found throughout the body after embryonic development
- Self-renewal through indefinite and/or asymmetric cell division
- Generation of cells committed to differentiation

Replenishment of dying cells and regeneration of damaged tissues, thereby leading to growth and maintenance of the organs and tissues



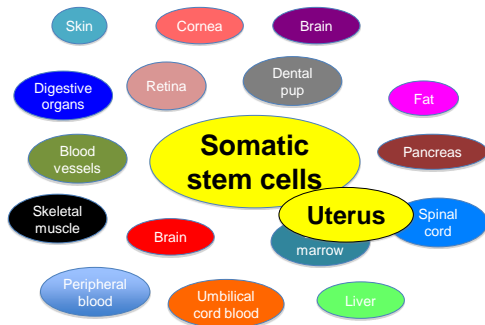
Hierarchy of somatic stem cells



Maruyama T, Reprod Med Biol. 2010



Where are somatic stem cells found?



Gargett CE. Uterine stem cells: what is the evidence? Hum Reprod Update. 2007.



Multiple cycles of pregnancy-induced uterine enlargement and regression after parturition



Non-pregnant Pregnant at term

Weight: ≈ 70 g ≈ 1,100 g

Cavity: ≈ 10 mL ≈ 5 – 20 L

Hypertrophy ≥ Stretching ≥ ECM production >> Hyperplasia

Cunningham F, et al. Williams Obstetrics 23rd edition, 2010.



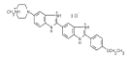
Learning Objectives

- #1. Somatic/tissue-specific stem cells
- #2. Side population (SP) cells
- #3. Myometrial stem cells
 - a. Myometrial SP cells
 - b. Myometrial Lin-/CD34+/CD49f cells
- #4. Tumor/cancer stem cells
- #5. Leiomyoma formation and myometrial stem cells



Side Population (SP)

●Hoechst 33342: DNA dye



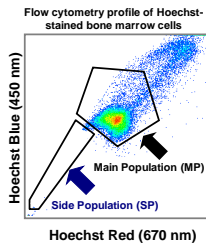
$C_{27}H_{37}Cl_3N_6O_4$ MW=616

●Pumping out of DNA dye by ABCG2 transporter

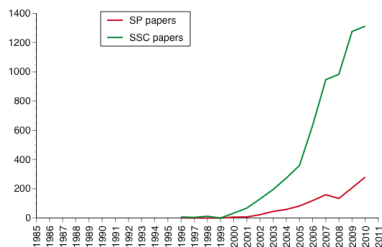
SP cells = understained cells

Hematopoietic stem cells are enriched in SP fraction

Goodell et al., J Exp Med, 1996



Increase of "SP" and "somatic stem cell (SSC)" papers during the past 15 years*



* A Medline-based literature search (1985–2010) was conducted using the keywords "somatic stem cells," "adult stem cells," "tissue-specific stem cells," and "side population."

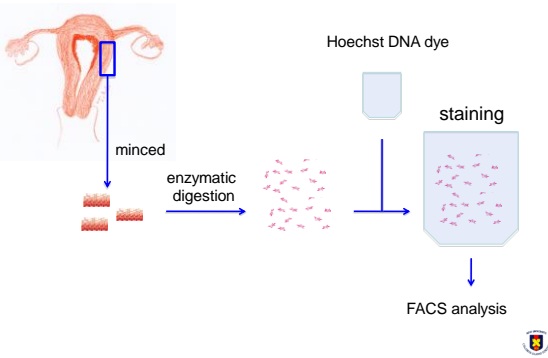


Learning Objectives

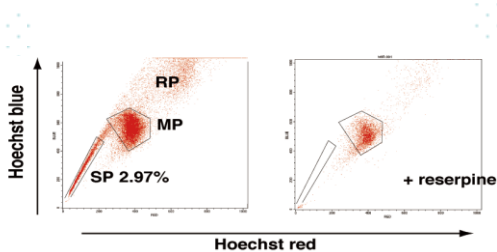
- #1. Somatic/tissue-specific stem cells
- #2. Side population (SP) cells
- #3. Myometrial stem cells
 - a. Myometrial SP cells
 - b. Myometrial Lin-/CD34+/CD49f cells
- #4. Tumor/cancer stem cells
- #5. Leiomyoma formation and myometrial stem cells



Procedures for isolation of myometrial SP cells



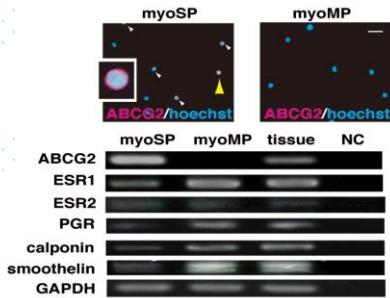
SP and MP cells in human myometrium (myoSP and myoMP)



Ono M, et al. PNAS, 2007



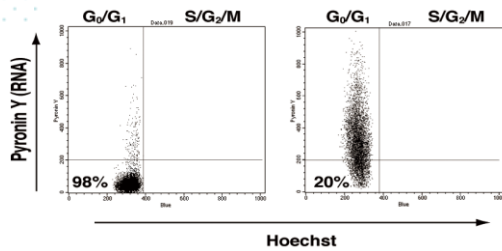
Undifferentiated status of myoSP, not myoMP



Ono M, et al. PNAS, 2007



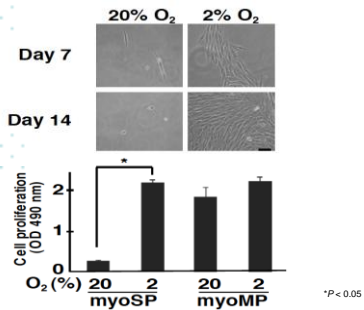
Quiescence (G0 status) of myoSP, but not myoMP



Ono M, et al. PNAS, 2007



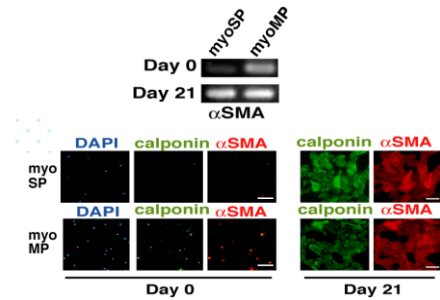
Preferential proliferation of myoSP under hypoxic condition



Ono M, et al. PNAS, 2007



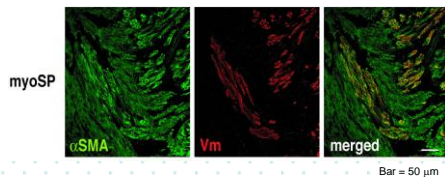
Spontaneous myodifferentiation of myoSP



Ono M, et al. PNAS, 2007



Reconstitution of human smooth muscle tissues in NOG mouse uteri transplanted with myoSP, but not myoMP



Reconstitution rate*

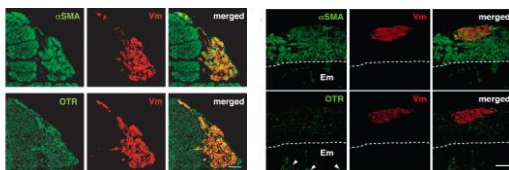
myoSP 10/16
myoMP 0/16

* Rate of presence of tissues/cells doubly positive for αSMA and Vm

Ono M, et al. PNAS, 2007



Pregnancy-specific induction of oxytocin receptor in human myometrial tissues reconstituted from myoSP



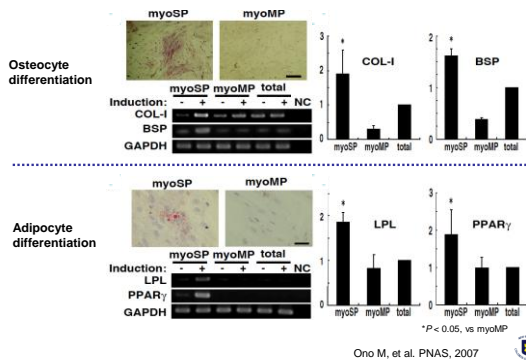
Pregnant 7.5 dpc

Non-pregnant

Ono M, et al. PNAS, 2007



Multidifferentiation of myoSP, but not myoMP



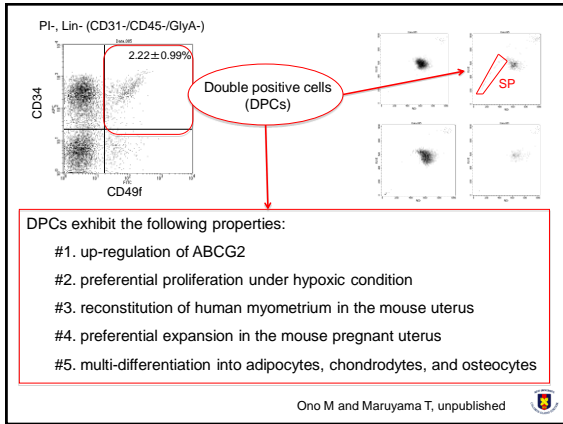
Myometrial SP cells possess ...

- undifferentiated phenotype
- quiescent cell cycle status
- self-renewal potential under hypoxic condition
- ability of self-tissue regeneration (self organization)
- potentials to give rise to pregnant myometrium
- multi-differentiation capabilities

Myometrial stem/progenitor cells are highly enriched in myoSP

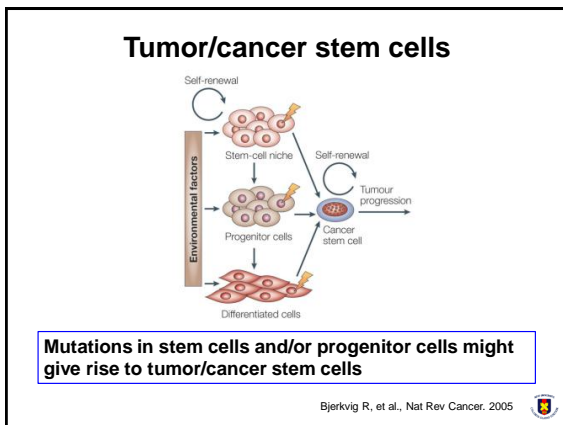
Learning Objectives

- #1. Somatic/tissue-specific stem cells
- #2. Side population (SP) cells
- #3. Myometrial stem cells
 - a. Myometrial SP cells
 - b. Myometrial Lin-/CD34+/CD49f cells
- #4. Tumor/cancer stem cells
- #5. Leiomyoma formation and myometrial stem cells

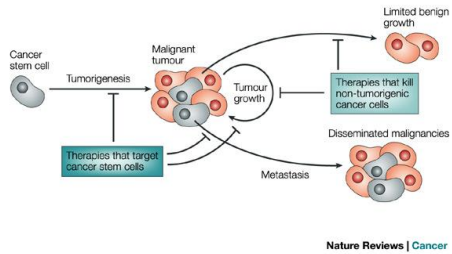


Learning Objectives

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- #5. Leiomyoma formation and myometrial stem cells



Therapeutic implications of cancer stem cells



Nature Reviews | Cancer

Pardal R, et al., Nat Rev Cancer. 2003



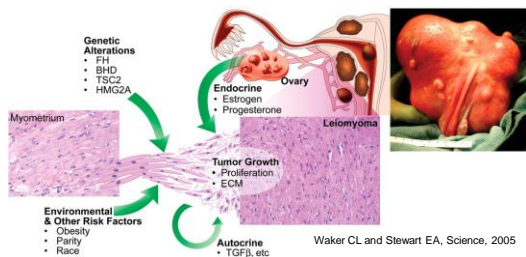
Learning Objectives

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- #4. Tumor/cancer stem cells
- #5. Leiomyoma formation and myometrial stem cells



Myoma / leiomyoma/ fibroid

A benign, **monoclonal** tumor of the smooth muscle cells of the myometrium



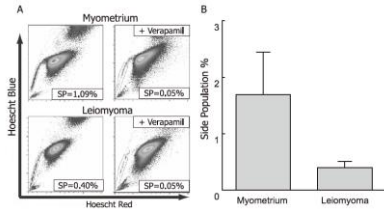
Waker CL and Stewart EA, Science, 2005

"**Monoclonal**" means that all of the muscle cells in a leiomyoma are **descendents of one cell** that has reproduced itself extensively.



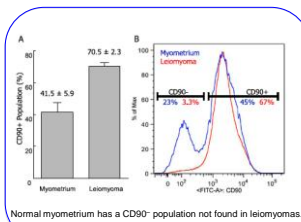
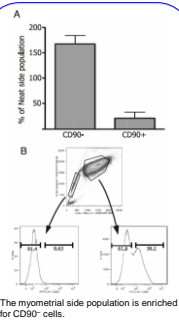
Uterine Leiomyomas Exhibit Fewer Stem/Progenitor Cell Characteristics When Compared With Corresponding Normal Myometrium

Henry L. Chang, MD, Tharanga N. Senaratne, AB, Li-Hua Zhang, BS, Paul P. Szotek, MD, Ethan Stewart, BA, David Dombkowski, MS, Frederic Preffer, PhD, Patricia K. Donahoe, MD, and Jose Teixeira, PhD

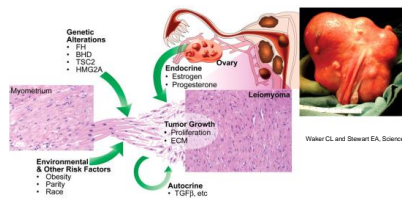


Reproductive Sciences Vol. 17 No. 2 February 2010 158-167

CD90/Thy-1: a GPI anchored cell surface protein/stem cell marker
 CD90- myometrial cells → **lipofibroblasts**
 CD90+ myometrial cells → **myofibroblasts** (Koumas, AJP, 2003)



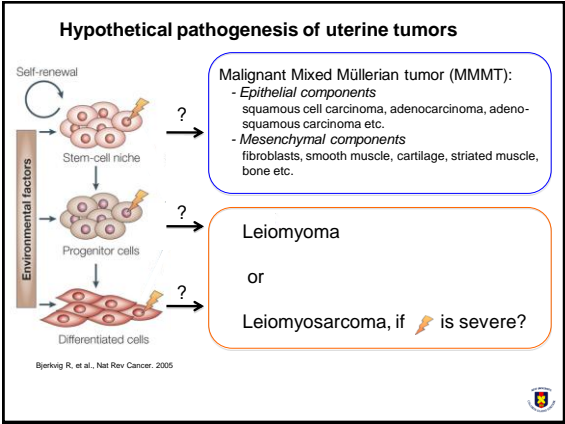
Chang HL, et al. Reprod Sci, 2010



Myometrium vs Leiomyoma

myoSP:	>>	differentiated
CD90/Thy-1:	<	more myofibroblastic
	↓	
Myodifferentiation:	<<	more myodifferentiated

Chang HL, et al. Reprod Sci, 2010



References

- Maruyama T, Stem/progenitor cells and the regeneration potentials in the human uterus. *Reprod Med Biol*, 2010
- Gargett CE. Uterine stem cells: what is the evidence? *Hum Reprod Update*, 2007.
- Cunningham F, et al. Reproductive tract: uterus. *Williams Obstetrics* 23rd edition, 2010.
- Goodell MA, et al. Isolation and functional properties of murine hematopoietic stem cells that are replicating in vivo. *J Exp Med*, 1996.
- Ono M, et al. Side population in human uterine myometrium displays phenotypic and functional characteristics of myometrial stem cells. *Proc Natl Acad Sci USA*, 2007.
- Bjerkvig R, et al. Opinion - The origin of the cancer stem cell: current controversies and new insights. *Nat Rev Cancer*, 2005.
- Pandal R, et al., Applying the principles of stem-cell biology to cancer. *Nat Rev Cancer*, 2003.
- Waker CL and Stewart EA, Uterine fibroids: the elephant in the room. *Science*, 2005.
- Chang HL, et al. Uterine leiomyomas exhibit fewer stem/progenitor cell characteristics when compared with corresponding normal myometrium. *Reprod Sci*, 2010.

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Hideyuki Okano, MD, PhD
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Human Trophoblast Progenitor Cells (hTPCs)

Susan Jane Fisher, Ph.D. and
Olga Krtolica Genbacev Ph.D.

Declaration of Conflicts of Interests

None to declare

Learning Objectives:

- To understand the cellular composition and anatomical relationships of the amnion, chorion, and placenta during early gestation.
- To understand the basic properties of human trophoblast progenitors.
- To understand the transcriptional profiles of human trophoblast progenitors in relationship to cytotrophoblasts that populate chorionic villi.

Olga Genbacev



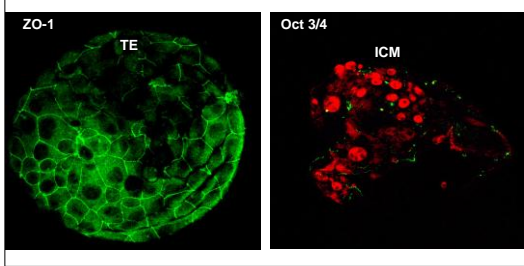
We tested the hypothesis that:

There are 2 sources of trophoblast progenitors:

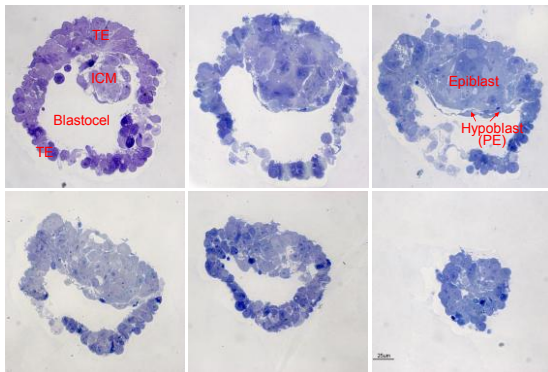
- Trophectoderm of the blastocyst
- Chorionic membranes

To locate these cells we used
insights gained from our work
with human embryos.

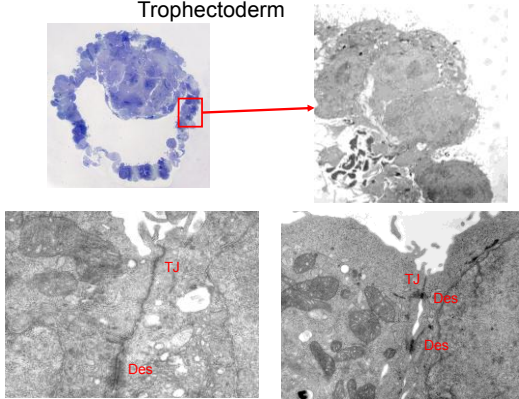
In blastocysts, TE is polarized, ICM is not.



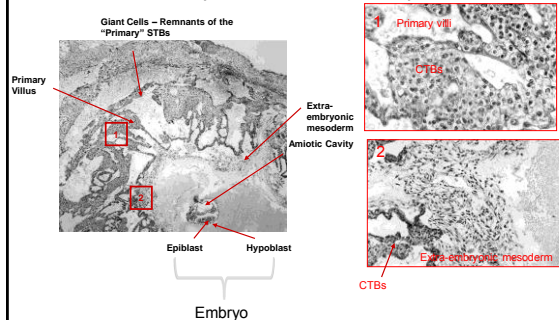
Semi-fine sections of a human blastocyst



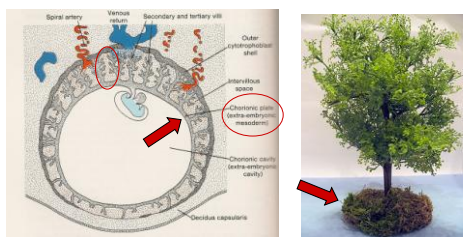
Trophectoderm

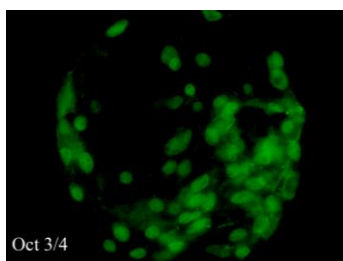


Formation of Placenta - Fully Implanted Day 10 Human Embryo



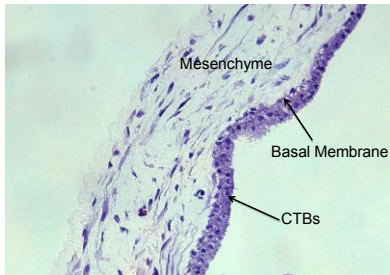
Formation of placenta from 2nd week to term



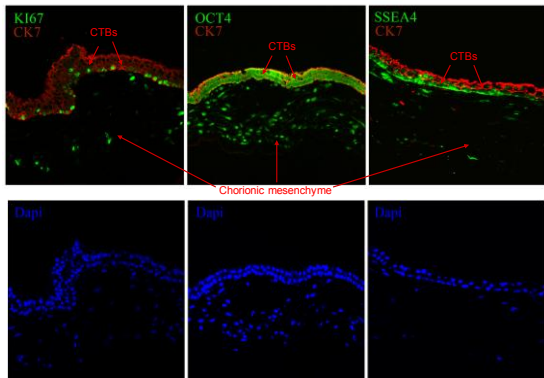


Human trophoblasts stain for Oct4.

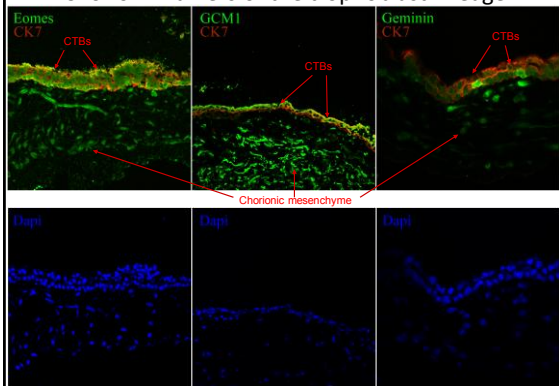
Histology of 7.5 wk human chorion



Chorion: markers of proliferation and pluripotency



Chorion: markers of the trophoblast lineage



How to isolate human trophoblast progenitors from the chorion?

“Combinatorial Signals of Activin/Nodal and Bone Morphogenic Protein Regulate the Early Lineage Segregation of Human Embryonic Stem Cells”

By
Wu *et al.*, 2008

Experimental Design

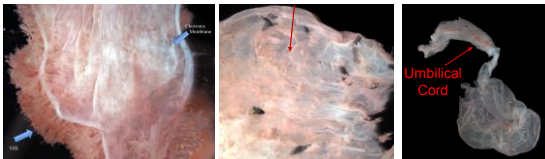
Rationale:

- As activin, inhibin and follistatin are produced by the placenta, we hypothesized that the activin/nodal pathway may control hTPC self-renewal. We used chorion-derived cells and treated them with SB431542 (activin/nodal inhibitor) or follistatin and FGF2.

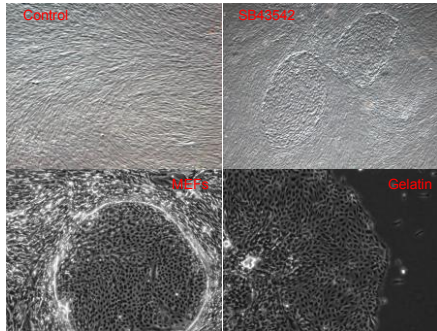
The chorionic membrane is completely **separated** from the amniotic membrane during the first trimester of pregnancy.

Denuded Chorionic Membrane

Avascular Amniotic Sac

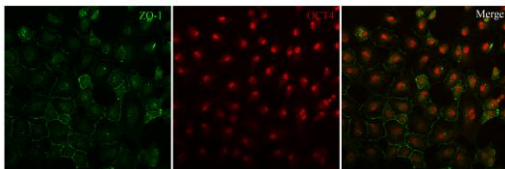


Initial derivation of hTPC colonies from
cells of the chorionic membranes

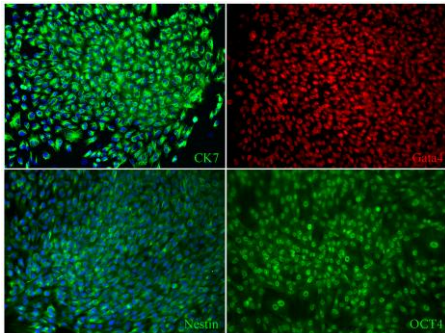


Characteristics of
Undifferentiated hTPC Colonies

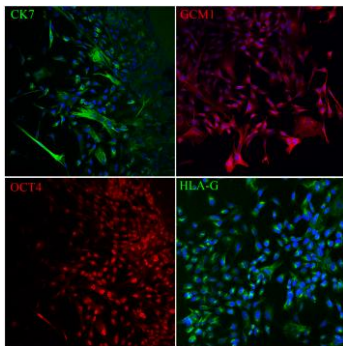
Cells in colonies are polarized and
stain for OCT4.



Undifferentiated Colonies

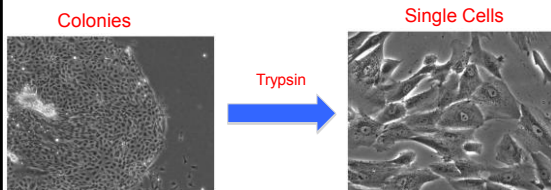


Colonies differentiate into cells that express trophoblast markers.

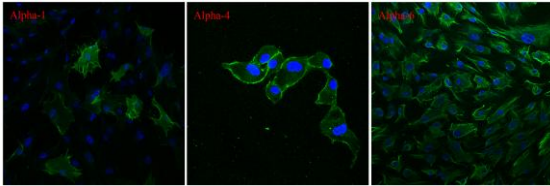


Differentiation Media- Keratinocyte Media + Pituitary Extract + 10% FBS

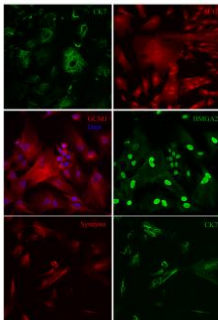
Trypsinization of colonies yields self-renewing hTPCs.



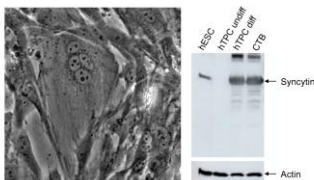
hTPC integrin expression patterns



In differentiation medium, human trophoblast progenitor cells express trophoblast markers.



In differentiation medium, human trophoblast progenitor cells fuse and upregulate syncytin expression.



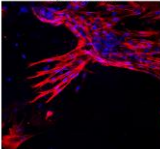
Differentiation of hTPCs into fused syncytiotrophoblasts

Secretion of hCG

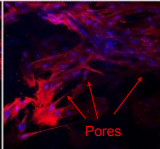
Hours	percent of hCG
0	~10
4	~15
8	~45

hTPCs differentiate into invasive cytotrophoblasts when they are cultured on Matrigel-coated filters.

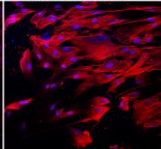
Top- Plated Cells



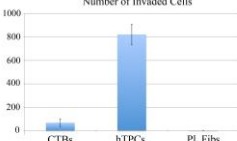
Middle- Pore Level



Bottom- Invaded Cells

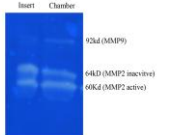


Number of Invaded Cells

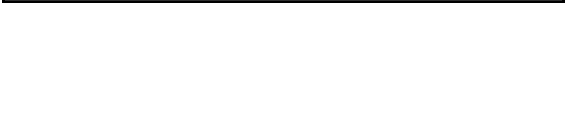


Cell Type	Number of Invaded Cells
CTBs	~50
hTPCs	~820
PL Fibs	0

Gelatinase Assay



Lane	92kD (MMP1)	66kD (MMP2 inactive)	66kD (MMP2 active)
Insert	Weak band	Strong band	Weak band
Chamber	Strong band	Weak band	Strong band

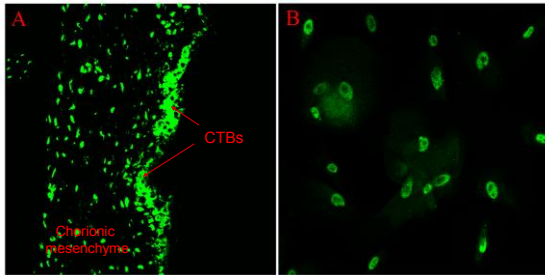


hTPCmonolayer vs. CTB2TM - Up Regulated

hTPC	CTB2	Gene	Title	Point
1	1	SLC41Y1	Slc41 family 1	17.1
1	1	HMG2A2	high mobility group AT-hook 2	17.2
1	1	UCP2A	Uncoupling protein 2, mitochondrial, isoform 1	18.1
1	1	SLC12A2	SLC12 family 1 member, alpha 2	18.2
1	1	UCP2L	uncoupling protein 2 (mitochondrial isoform 2)	18.3
1	1	CD2AC	cluster of differentiation 2, alpha 2	18.4
1	1	UCP1A	uncoupling mitochondrial isoform 1 (mitochondrial isoform 1)	18.5
1	1	UCP1B	uncoupling protein 1 (mitochondrial isoform 2)	18.6
1	1	UCP1C	uncoupling protein 1 (mitochondrial isoform 3)	18.7
1	1	UCP1D	uncoupling protein 1 (mitochondrial isoform 4)	18.8
1	1	UCP1E	uncoupling protein 1 (mitochondrial isoform 5)	18.9
1	1	UCP1F	uncoupling protein 1 (mitochondrial isoform 6)	19.0
1	1	UCP1G	uncoupling protein 1 (mitochondrial isoform 7)	19.1
1	1	UCP1H	uncoupling protein 1 (mitochondrial isoform 8)	19.2
1	1	UCP1I	uncoupling protein 1 (mitochondrial isoform 9)	19.3
1	1	UCP1J	uncoupling protein 1 (mitochondrial isoform 10)	19.4
1	1	UCP1K	uncoupling protein 1 (mitochondrial isoform 11)	19.5
1	1	UCP1L	uncoupling protein 1 (mitochondrial isoform 12)	19.6
1	1	UCP1M	uncoupling protein 1 (mitochondrial isoform 13)	19.7
1	1	UCP1N	uncoupling protein 1 (mitochondrial isoform 14)	19.8
1	1	UCP1O	uncoupling protein 1 (mitochondrial isoform 15)	19.9
1	1	UCP1P	uncoupling protein 1 (mitochondrial isoform 16)	20.0
1	1	UCP1Q	uncoupling protein 1 (mitochondrial isoform 17)	20.1
1	1	UCP1R	uncoupling protein 1 (mitochondrial isoform 18)	20.2
1	1	UCP1S	uncoupling protein 1 (mitochondrial isoform 19)	20.3
1	1	UCP1T	uncoupling protein 1 (mitochondrial isoform 20)	20.4
1	1	UCP1U	uncoupling protein 1 (mitochondrial isoform 21)	20.5
1	1	UCP1V	uncoupling protein 1 (mitochondrial isoform 22)	20.6
1	1	UCP1W	uncoupling protein 1 (mitochondrial isoform 23)	20.7
1	1	UCP1X	uncoupling protein 1 (mitochondrial isoform 24)	20.8
1	1	UCP1Y	uncoupling protein 1 (mitochondrial isoform 25)	20.9
1	1	UCP1Z	uncoupling protein 1 (mitochondrial isoform 26)	21.0
1	1	UCP2A	uncoupling protein 2 (mitochondrial isoform 1)	21.1
1	1	UCP2B	uncoupling protein 2 (mitochondrial isoform 2)	21.2
1	1	UCP2C	uncoupling protein 2 (mitochondrial isoform 3)	21.3
1	1	UCP2D	uncoupling protein 2 (mitochondrial isoform 4)	21.4
1	1	UCP2E	uncoupling protein 2 (mitochondrial isoform 5)	21.5
1	1	UCP2F	uncoupling protein 2 (mitochondrial isoform 6)	21.6
1	1	UCP2G	uncoupling protein 2 (mitochondrial isoform 7)	21.7
1	1	UCP2H	uncoupling protein 2 (mitochondrial isoform 8)	21.8
1	1	UCP2I	uncoupling protein 2 (mitochondrial isoform 9)	21.9
1	1	UCP2J	uncoupling protein 2 (mitochondrial isoform 10)	22.0
1	1	UCP2K	uncoupling protein 2 (mitochondrial isoform 11)	22.1
1	1	UCP2L	uncoupling protein 2 (mitochondrial isoform 12)	22.2
1	1	UCP2M	uncoupling protein 2 (mitochondrial isoform 13)	22.3
1	1	UCP2N	uncoupling protein 2 (mitochondrial isoform 14)	22.4
1	1	UCP2O	uncoupling protein 2 (mitochondrial isoform 15)	22.5
1	1	UCP2P	uncoupling protein 2 (mitochondrial isoform 16)	22.6
1	1	UCP2Q	uncoupling protein 2 (mitochondrial isoform 17)	22.7
1	1	UCP2R	uncoupling protein 2 (mitochondrial isoform 18)	22.8
1	1	UCP2S	uncoupling protein 2 (mitochondrial isoform 19)	22.9
1	1	UCP2T	uncoupling protein 2 (mitochondrial isoform 20)	23.0
1	1	UCP2U	uncoupling protein 2 (mitochondrial isoform 21)	23.1
1	1	UCP2V	uncoupling protein 2 (mitochondrial isoform 22)	23.2
1	1	UCP2W	uncoupling protein 2 (mitochondrial isoform 23)	23.3
1	1	UCP2X	uncoupling protein 2 (mitochondrial isoform 24)	23.4
1	1	UCP2Y	uncoupling protein 2 (mitochondrial isoform 25)	23.5
1	1	UCP2Z	uncoupling protein 2 (mitochondrial isoform 26)	23.6
1	1	UCP3A	uncoupling protein 3 (mitochondrial isoform 1)	23.7
1	1	UCP3B	uncoupling protein 3 (mitochondrial isoform 2)	23.8
1	1	UCP3C	uncoupling protein 3 (mitochondrial isoform 3)	23.9
1	1	UCP3D	uncoupling protein 3 (mitochondrial isoform 4)	24.0
1	1	UCP3E	uncoupling protein 3 (mitochondrial isoform 5)	24.1
1	1	UCP3F	uncoupling protein 3 (mitochondrial isoform 6)	24.2
1	1	UCP3G	uncoupling protein 3 (mitochondrial isoform 7)	24.3
1	1			

Page

Expression of HMGA2 in the chorion
(A) and by hTPCs (B)



hTPC^{monolayer} vs. CTB^{2TM} - Down Regulated

ATCC	Strain	Strain	Strain	Strain
1024	1024	1024	1024	1024
1025	1025	1025	1025	1025
1026	1026	1026	1026	1026
1027	1027	1027	1027	1027
1028	1028	1028	1028	1028
1029	1029	1029	1029	1029
1030	1030	1030	1030	1030
1031	1031	1031	1031	1031
1032	1032	1032	1032	1032
1033	1033	1033	1033	1033
1034	1034	1034	1034	1034
1035	1035	1035	1035	1035
1036	1036	1036	1036	1036
1037	1037	1037	1037	1037
1038	1038	1038	1038	1038
1039	1039	1039	1039	1039
1040	1040	1040	1040	1040
1041	1041	1041	1041	1041
1042	1042	1042	1042	1042
1043	1043	1043	1043	1043
1044	1044	1044	1044	1044
1045	1045	1045	1045	1045
1046	1046	1046	1046	1046
1047	1047	1047	1047	1047
1048	1048	1048	1048	1048
1049	1049	1049	1049	1049
1050	1050	1050	1050	1050
1051	1051	1051	1051	1051
1052	1052	1052	1052	1052
1053	1053	1053	1053	1053
1054	1054	1054	1054	1054
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1056	1056	1056	1056	1056
1057	1057	1057	1057	1057
1058	1058	1058	1058	1058
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1060	1060	1060	1060	1060
1061	1061	1061	1061	1061
1062	1062	1062	1062	1062
1063	1063	1063	1063	1063
1064	1064	1064	1064	1064
1065	1065	1065	1065	1065
1066	1066	1066	1066	1066
1067	1067	1067	1067	1067
1068	1068	1068	1068	1068
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1070	1070	1070	1070	1070
1071	1071	1071	1071	1071
1072	1072	1072	1072	1072
1073	1073	1073	1073	1073
1074	1074	1074	1074	1074
1075	1075	1075	1075	1075
1076	1076	1076	1076	1076
1077	1077	1077	1077	1077
1078	1078	1078	1078	1078
1079	1079	1079	1079	1079
1080	1080	1080	1080	1080
1081	1081	1081	1081	1081
1082	1082	1082	1082	1082
1083	1083	1083	1083	1083
1084	1084	1084	1084	1084
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1087	1087	1087	1087	1087
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1092	1092	1092	1092	1092
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1094	1094	1094	1094	1094
1095	1095	1095	1095	1095
1096	1096	1096	1096	1096
1097	1097	1097	1097	1097
1098	1098	1098	1098	1098
1099	1099	1099	1099	1099
1100	1100	1100	1100	1100
1101	1101	1101	1101	1101
1102	1102	1102	1102	1102
1103	1103	1103	1103	1103

Summary

- We derived hTPCs from the human chorion, in the presence of FGF-2, by inhibition of the activin/nodal, TGF β pathway.
- We developed a feeder free/defined medium protocol for propagation of these cells.
- We tested their ability to differentiate into invasive CTBs and to fuse/produce hCG.
- We carried out a microarray analysis (hTPCs vs. freshly isolated CTBs).

Reference

- Wu, Z., Zhang, W., Chen, G., Cheng, L., Liao, J., Jia, N., Gao, Y., Dai, H., Yuan, J., Cheng, L., Xiao, L. Combinatorial Signals of Activin/Nodal and Bone Morphogenic Protein Regulate the Early Lineage Segregation of Human Embryonic Stem Cells (2008) J. Biol. Chem. 283, No. 36, pp. 24991–25002.

The ESHRE registry of hESC lines with monogenic defects

Karen Sermon, MD, PhD
Department of Embryology and
Genetics of the Vrije Universiteit Brussel



Vrije Universiteit Brussel

27/06/2010

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Conflict of interest

- I declare to have no conflict of interest

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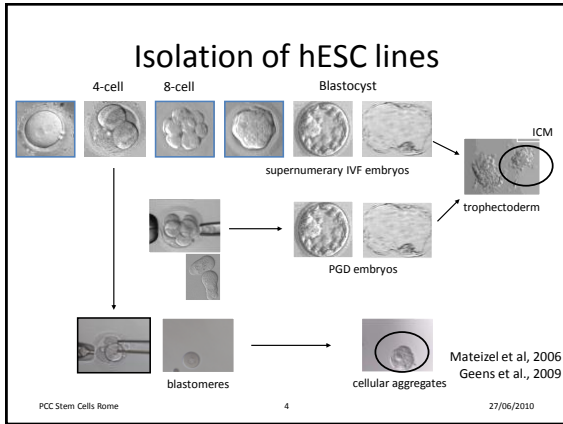
Learning objectives

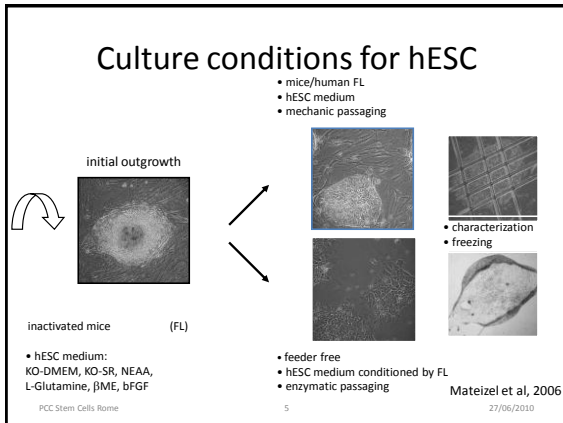
- To learn how hESC with monogenic diseases are obtained
- To know where to find information on and how to obtain hESC lines with monogenic diseases (hESC-MD)
- To learn about the possible uses of hESC-MD for research and therapy development
- To learn about alternatives to hESC

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Where to find (information on) hESC-MD

- Scientific literature – see Sermon et al., HR, 2009
- Banks
 - UKSCB: <http://www.ukstemcellbank.org.uk/>
 - Umass Human Stem Cell Bank and Registry: <http://www.umassmed.edu/MHSCB/index.aspx>
 - Spanish National Stem Cell Bank – 3 nodes: http://www.isciii.es/htdocs/terapia/terapia_bancocelular.jsp
- Registries: give information only, give links to banks: <http://www.hescreg.eu/>

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EU hESC line Registry (hESCReg)

- Primary objective: provide information about all hESC lines available in Europe
- Specific Support Action funded by VI FP European Commission (1.048.000 €, 2007 - 2010)
- Coordinated by:
 - Joeri Borstlap (BCRT - Technical Coord.)
 - Anna Veiga (CRMB - Scientific Coord.)

Borstlap et al., 2009

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hESCReg

- hESC information is collected through national contacts
- The registry aims to provide
 - Contact and availability information about cell lines
 - Biological data: source, characterisation, genetic mutation,...
 - Data about providers, working groups and research projects

Borstlap et al., 2009

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Borstlap et al., 2009 PCC Stem Cells Rome

The screenshot shows the hESCreg website interface. At the top, it says 'hESCreg European Human Embryonic Stem Cell Registry'. Below this, there's a search bar and a list of hESC lines. The list includes columns for 'Cell Lines', 'Show Rating of hESC Cells', and 'Country'. The lines listed are: hES-1, hES-2, hES-3, hES-4, hES-5, hES-6, hES-7, hES-8, hES-9, hES-10, hES-11, hES-12, hES-13, hES-14, hES-15, hES-16, hES-17, hES-18, hES-19, hES-20, hES-21, hES-22, hES-23, hES-24, hES-25, hES-26, hES-27, hES-28, hES-29, hES-30, hES-31, hES-32, hES-33, hES-34, hES-35, hES-36, hES-37, hES-38, hES-39, hES-40, hES-41, hES-42, hES-43, hES-44, hES-45, hES-46, hES-47, hES-48, hES-49, hES-50, hES-51, hES-52, hES-53, hES-54, hES-55, hES-56, hES-57, hES-58, hES-59, hES-60, hES-61, hES-62, hES-63, hES-64, hES-65, hES-66, hES-67, hES-68, hES-69, hES-70, hES-71, hES-72, hES-73, hES-74, hES-75, hES-76, hES-77, hES-78, hES-79, hES-80, hES-81, hES-82, hES-83, hES-84, hES-85, hES-86, hES-87, hES-88, hES-89, hES-90, hES-91, hES-92, hES-93, hES-94, hES-95, hES-96, hES-97, hES-98, hES-99, hES-100.

Borstlap et al., 2009

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hESCReg

- Collaboration with International Stem Cell Initiative (ISCI - http://www.stemcellforum.org/isci_project.cfm)
 - To characterise as many hESC lines as possible
 - To set a standard for characterisation
- Collaboration with ESHRE – SIG Reproductive Genetics – SIG Stem cells for hESC with monogenic diseases
 - To disseminate knowledge about these lines
 - To further research into monogenic diseases using hESC as a tool

Sermon et al., 2009

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ESHRE registry for hESC-MD

- 01/12/2008: 527 hESC lines in hESCReg
48 hESC-MD
- 56 lines in the paper:
 - 34 from literature
 - 21 from hESCReg only
 - 30 from internet web sites
 - Only 14 fully characterised

Sermon et al., 2009

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Uses of hESC-MD

- Currently available models for monogenic disease study
 - Primary cell cultures from patients:
 - Not always available (neurons)
 - Limited life span unless transformed (cancerous)
 - Short developmental window
 - Transgenic mice
 - Often divergent phenotype
 - No rodent counterpart (eg Fragile X syndrome)
 - No phenotype due to different pathways (eg Lesh-Nyhan)

Ben-Yosef et al., 2008

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Uses of hESC-MD

- Especially when no good model available
- Study of the abnormal phenotype in an autonomous cell system
- Control and manipulate cells in vitro
 - Differentiate large amounts of eg neurons
 - Study pathogenesis
- Study of early lethal phenotypes
- Study of cancer – eg hESC with cancer predisposition mutations
- Development of therapies

Ben-Yosef et al., 2008

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Example: myotonic dystrophy type 1

- Caused by a CTG expansion in the 3' end of the DMPK gene
 - Normal individuals: 5-37 repeats
 - Mildly affected individuals: > 50
 - Severely affected individuals: > 500
 - Congenital form: several thousands
- Clinical features
 - Muscle weakness, Myotonia
 - Sudden death through heart rhythm disturbances
 - Cataracts, male infertility
 - Congenital form: floppy infant, tented upper lip, breathing difficulties, early death
 - Anticipation: worsening of the symptoms over generation

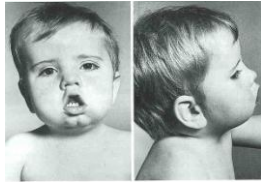
Unpublished results

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Clinical features of DM1



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Example: myotonic dystrophy type 1

- Instability of the repeat in the germ line and in somatic tissues
- Instability in oocytes > instability in sperm
- Somatic instability causes degeneration
- In mouse models somatic expansions are dependent on DNA repair

Unpublished results

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Mismatch repair machinery (MMR)

- MSH2
 - Msh2 is involved in the expansion of the CAG/CTG
 - Forms heterodimers with Msh3 and Msh6
- MSH3
 - Msh3-/+ mice => decreased expansions of CTG
- PMS2
 - Involved in the process of excision and resynthesis after Msh2/Msh3 recognition
 - Forms an heterodimer with Mlh3

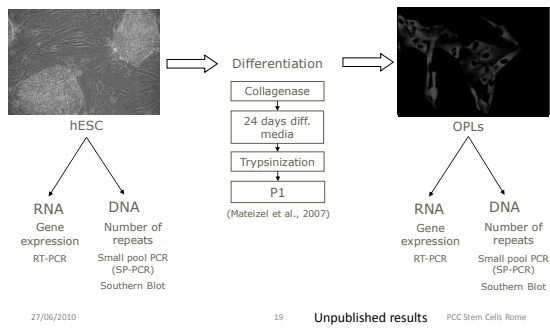
Unpublished results

27/06/2010

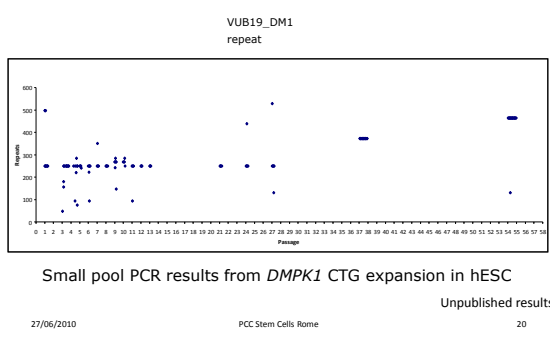
18

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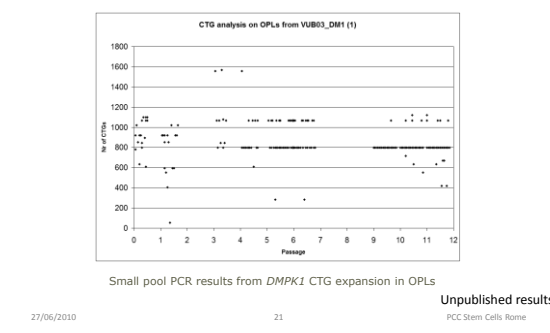
Experimental design



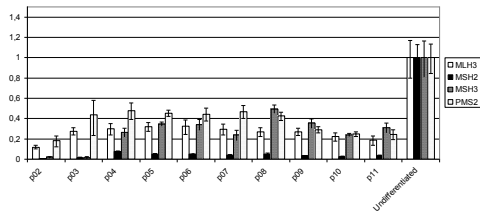
DM1 repeat is unstable in hESC



CTG repeat stabilizes upon differentiation



MMR genes are down-regulated in OPLs



Relative quantification of the MMR genes expression by Real-Time PCR

Unpublished results

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Example: myotonic dystrophy type 1

- Gene expression of MMR is down-regulated in OPLs
- The repeat is unstable in hESC and stabilizes in OPL
- The stabilization is simultaneous with down-regulation of MMR
- Undifferentiated cells \approx the germ line: unstable CTG
- OPL differentiation is a model for the study of MMR and CTG instability

Unpublished results

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hESC-MD in pharmacology

- Preclinical efficacy and toxicity testing:
 - In large animals
 - To validate mechanism of action and predict adverse effects
 - Animal models are only 50% efficient in prediction of liver, heart and during development
 - In primary cultures: disadvantages

Cezar, 2007

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hESC-MD in pharmacology

- In vitro models for target validation
 - Example: genetically modified cells differentiated to striatal neurons as a model for Parkinson
 - Example: differentiation to insulin-producing cells model diabetes
- High throughput screening of small compounds,
- Signalomics to uncover new targets

Cezar, 2007

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Example: differentiation into lung tissue and cystic fibrosis

- Generation of lung epithelial tissue
- As a first step towards an in vitro model for cystic fibrosis
- Differentiation driven by physical means: air-liquid interface (ALI)

Van Haute et al., 2009

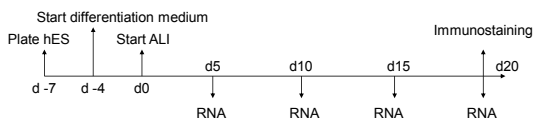
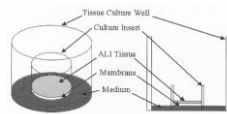
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Methods: differentiation: Air – Liquid Interface (ALI)

- ⇒ hESC were plated on culture inserts
- ⇒ Differentiation medium for 4 days
- ⇒ ALI for 20 days



⇒ Samples were taken for RNA, Immunostaining and ELISA

Van Haute et al., 2009

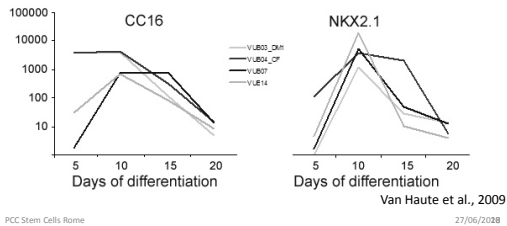
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Results

- Quantitative real-time RT-PCR:
 - CC16 and NKX2.1: peak around day 10

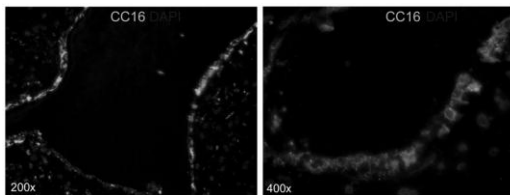


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Results

- Immunohistochemistry: CC16



VUB03_DM1

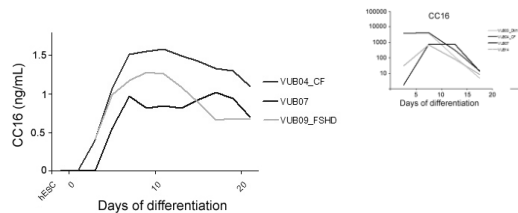
Van Haute et al., 2009

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Results

- ELISA (CC16 secretion)
 - Peak around day 8-10 → comparable with RT-PCR



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Van Haute et al., 2009

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Alternatives: induced pluripotent stem cells from patients

- Reprogramming of somatic cells from patients with monogenic disease through overexpression of stemness genes or alternative methods
- ALL diseases are accessible – not dependent on PGD
- Equivalence with hESC needs to be shown

Park et al., 2008

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Why are so few hESC-MD used in genetic research?

- Immaturity of the model – efficient differentiation protocols are needed!
- Insufficient knowledge with geneticists – dissemination of information is necessary
 - Effort by ESHRE and hESCreg
- Genetic diseases = orphan diseases – no interest with large pharma companies

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References

- Ben-Yosef et al., "PGD-derived human embryonic stem cell lines as a powerful tool for the study of human genetic disorders" 2008. Mol Cell Endocrinology, 282, 153
- Borstlap et al. "Development of a European human embryonic stem cell registry". 2008 Regen Med. 3:945-51.
- Cezar. "Can human embryonic stem cells contribute to the discovery of safer and more effective drugs?" 2007. Curr Opinion Chem Biol, 11, 405
- Geens et al., "Human embryonic stem cell lines derived from single blastomeres of two 4-cell stage embryos." 2009 Hum Reprod. 24:2709-17.
- Mateizel et al. "Derivation of human embryonic stem cell lines from embryos obtained after IVF and after PGD for monogenic disorders. 2006 Hum Reprod. 21:503-11
- Park I-H. "Disease-specific Induced Pluripotent Stem Cells" 2008 Cell 134, 1-10.
- Sermon et al., "Creation of a registry for human embryonic stem cells carrying an inherited defect: joint collaboration between ESHRE and hESCreg" 2009. Hum Reprod, 24, 1556
- The International Stem Cell Initiative. "Characterisation of human embryonic stem cell lines by the International Stem Cell Initiative". 2007. Nature Biotech, 25, 803
- Van Haute et al., "Generation of lung epithelial-like tissue from human embryonic stem cells" 2009. Respir Res, 10, 105

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Mark your calendar for the upcoming ESHRE campus workshops!

- **Basic Genetics for ART Practitioners**
organised by the SIG Reproductive Genetics
16 April 2010 - Porto, Portugal
- **Array technologies to apprehend developmental competence and endometrial receptivity: limits and possibilities**
organised by the Task Force Basic Science in Reproduction
22 April 2010 - Brussels, Belgium
- **The management of infertility – training workshop for junior doctors, paramedicals and embryologists**
organised by the SIG Reproductive Endocrinology, SIG Embryology and the Paramedical Group
26-27 May 2010 - Kiev, Ukraine
- **Preimplantation genetic diagnosis: a celebration of 20 years**
organised by the SIG Reproductive Genetics
1 July 2010 - Rome, Italy
- **EIM 10 years' celebration meeting**
organised by the European IVF Monitoring Consortium
11 September 2010 - Munich, Germany
- **The determinants of a successful pregnancy**
organised by the SIGS Reproductive Surgery, Early Pregnancy and Reproductive Endocrinology
24-25 September 2010 - Dubrovnik, Croatia
- **Basic training workshop for paramedics working in reproductive health**
organised by the Paramedical Group
6-8 October 2010 - Valencia, Spain
- **Forgotten knowledge about gamete physiology and its impact on embryo quality**
organised by the SIG Embryology
9-10 October 2010 - Lisbon, Portugal

www.eshre.eu
(see "Calendar")

Contact us at info@eshre.eu



Keep an eye on our calendar section for more information on

Upcoming events

- **Female and male surgery in human reproductive medicine**
8-9 October 2010 - Treviso, Italy
- **Promoting excellence in clinical research: from idea to publication**
5-6 November 2010 - Thessaloniki, Greece
- **“Update on pluripotent stem cells (hESC and iPS)” and hands on course on “Derivation and culture of pluripotent stem cells”**
8-12 November 2010 - Valencia, Spain
- **Women’s health aspects of PCOS (excluding infertility)**
18 November 2010 - Amsterdam, The Netherlands
- **Endoscopy in reproductive medicine**
24-26 November 2010 - Leuven, Belgium
- **Fertility and Cancer**
25-26 November 2010 - Bologna, Italy
- **The maternal-embryonic interface**
2-3 December 2010 - Valencia, Spain
- **GnHR agonist for triggering of final oocyte maturation – time for a paradigm shift**
3 December 2010 - Madrid, Spain
- **Raising competence in psychosocial care**
3-4 December 2010 - Amsterdam, The Netherlands

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