Tissue-Engineered Lung: An In-Vivo Model of Airway Injury and Regeneration

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Background

- Lung disease causes more than 230,000 deaths per year in the US
- Human lung often responds to injury by scarring rather than repair
- Molecular and cellular mechanisms of human lung regeneration are largely unknown
- Currently existing models of lung regeneration are somewhat limited

GOAL

To develop a more "complete" model of in vivo lung regeneration that allows to study the complex mechanisms driving lung regeneration

Methods





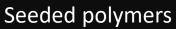


Native postnatal lung (14 days)



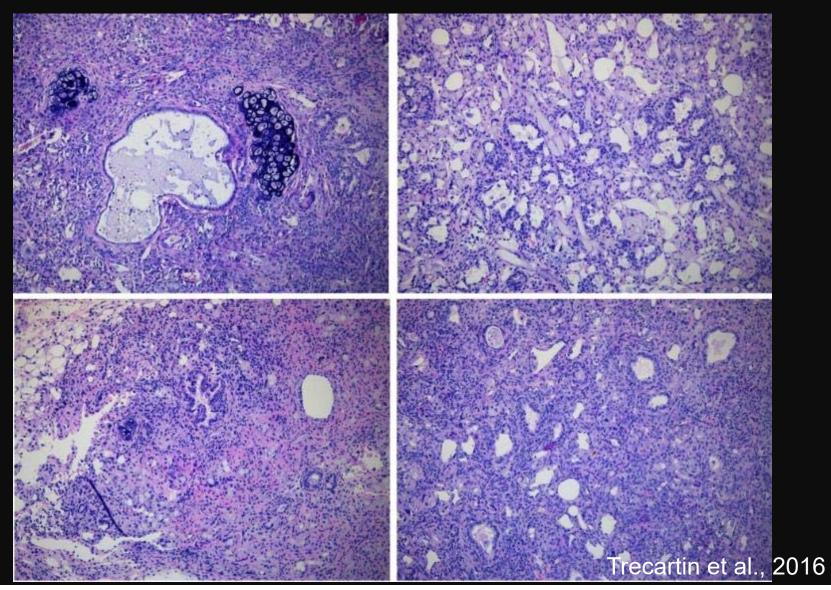
Collect at different time points







Distinguishable proximal and distal structures via H&E

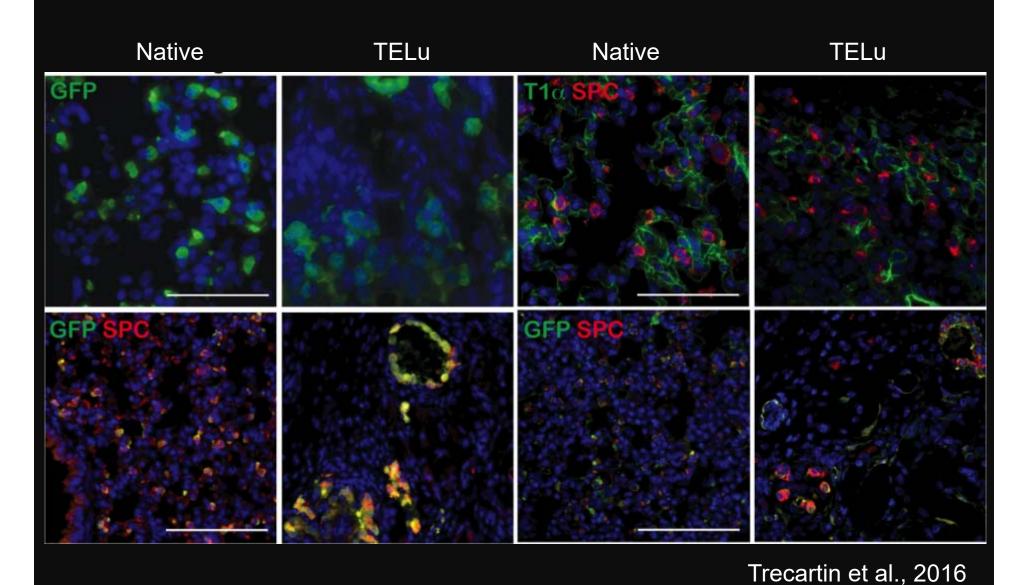


TELu airways are of donor origin

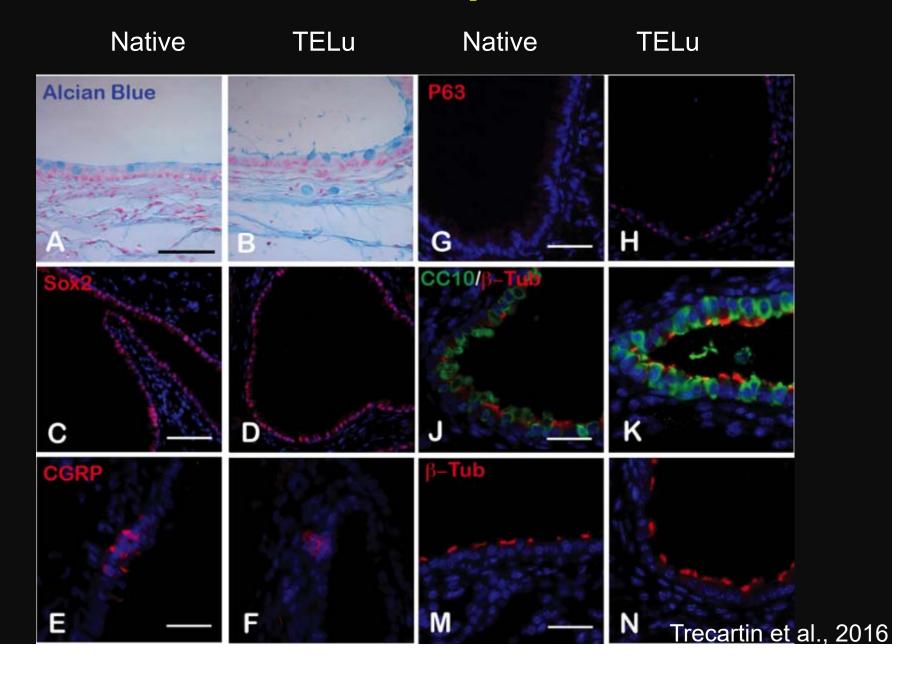
GFP native lung implanted into NOD-SCID mouse for 4 weeks

Native TELu GFP CC10 CC10 Trecartin et al., 2016

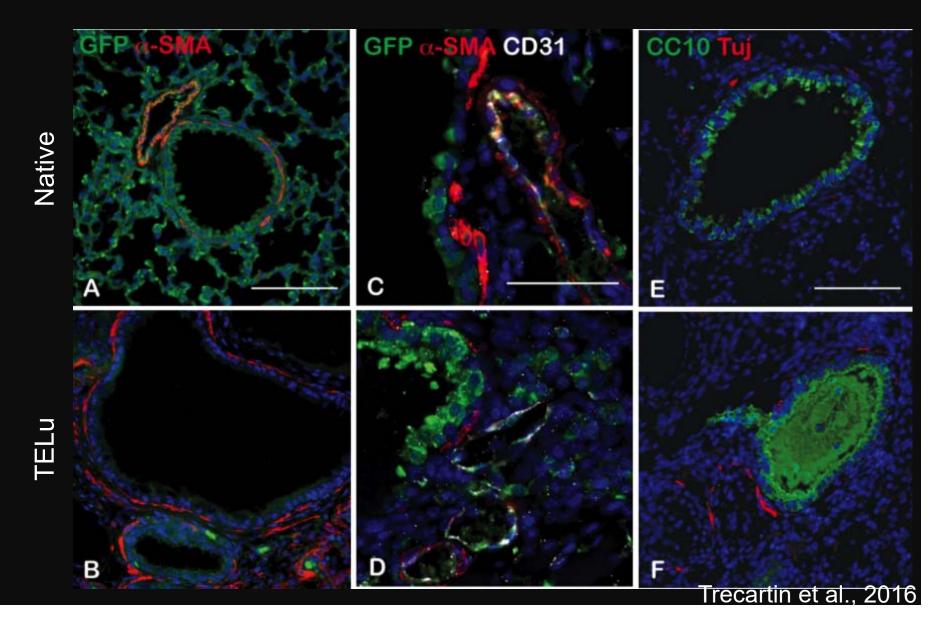
SPC positive cells are derived from donor cells



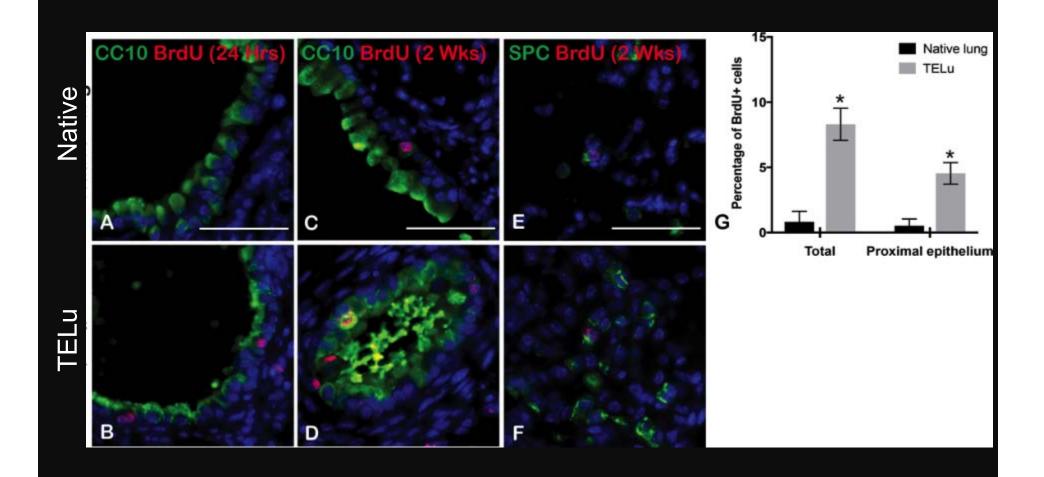
Characterization of epithelial markers



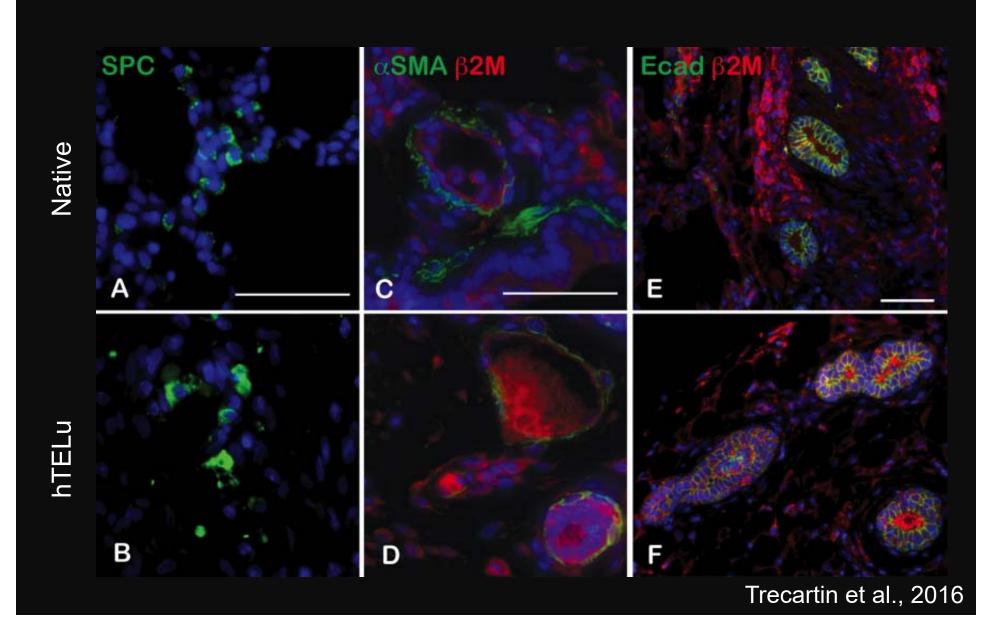
Characterization of mesenchymal markers



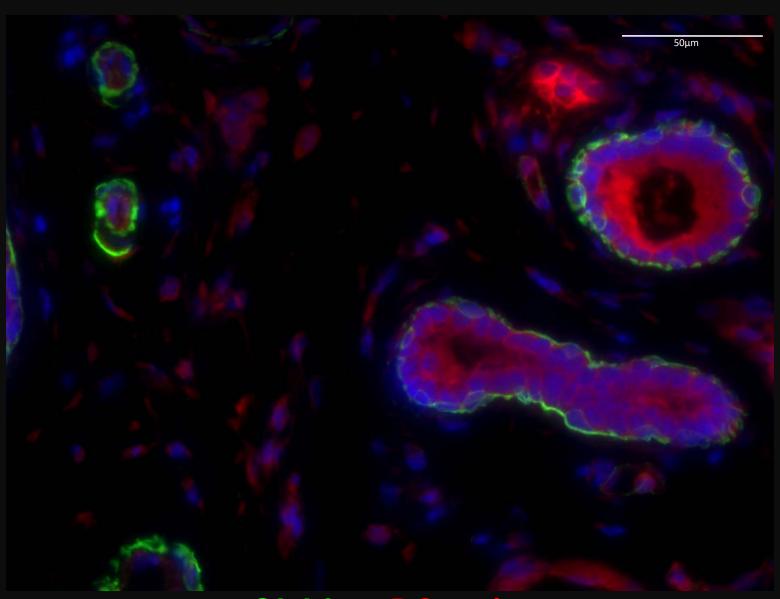
Higher proliferative rate seen in TELu



Generating Human TELu

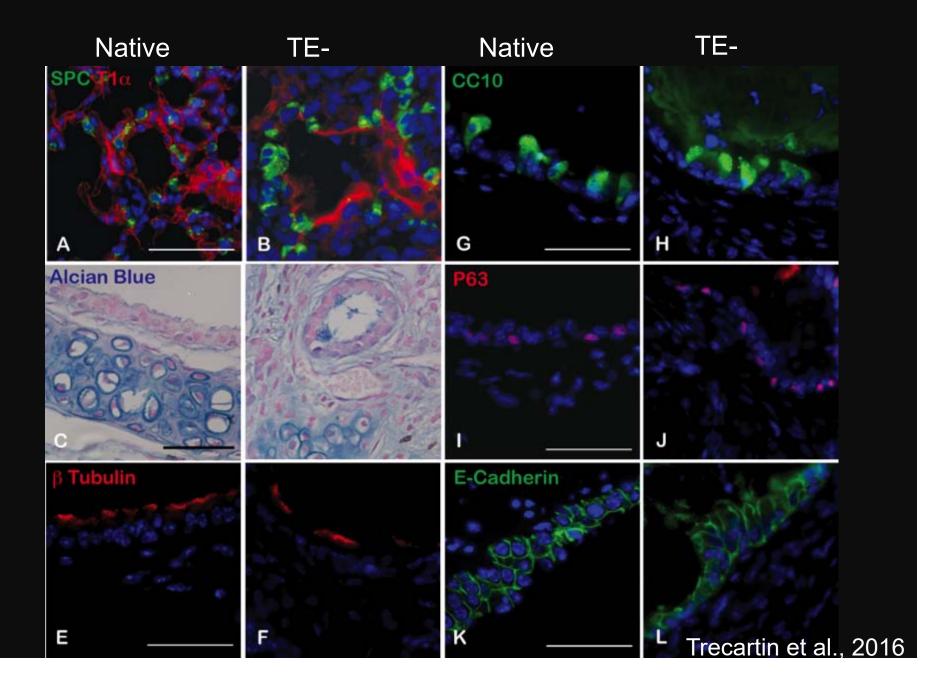


Smooth Muscle cells in hTELu

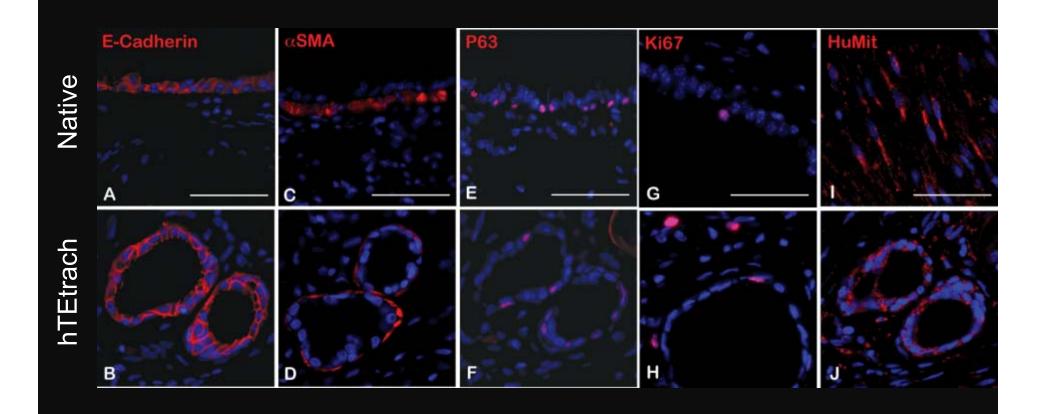


α-SMA B2-micro

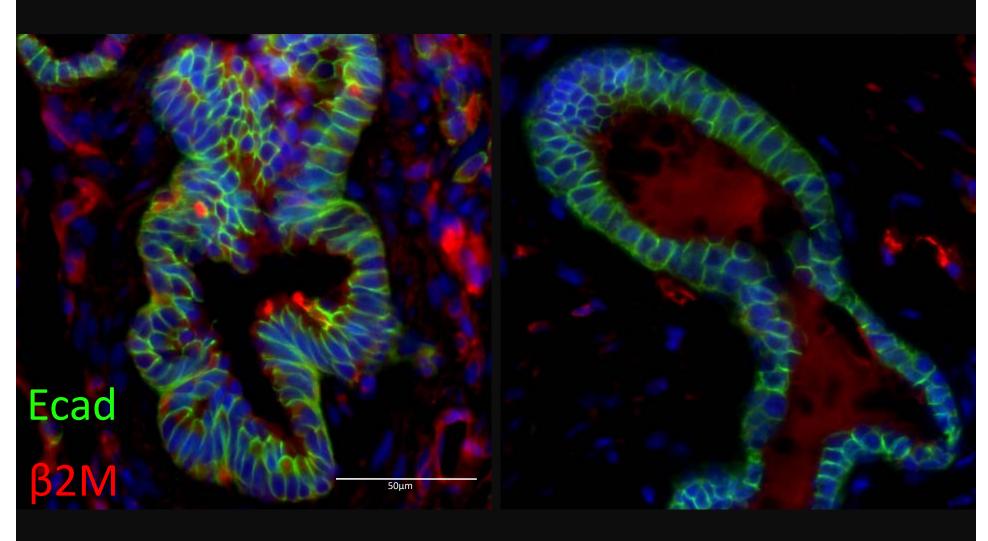
Generation of compartment specific tissue

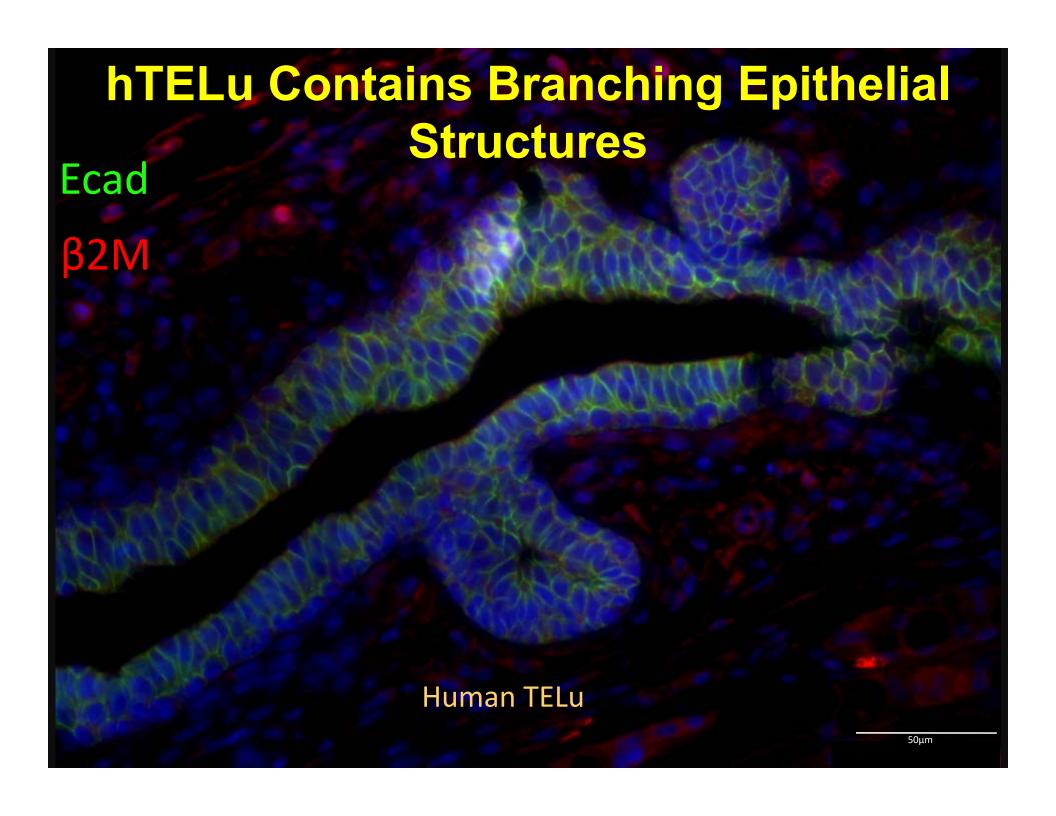


Human TE-Trach displaying epithelial and mesenchymal markers



hTELu Contains Large Epithelial Structures





Summary

 Murine TELu containing all cell types, e.g. SPC positive cells, likely AEC2s, Club cells, Ciliated cells, Smooth muscle cell and nerve cells

Human TELu containing epithelial structures,
SPC positive cells, Smooth muscle cells

 Proximal and distal regional structures can be generated distinctly

