Mesenchymal Stem Cells and Cancer: Their Interplay

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Cancers Are Major Healthcare Challenges



Year of diagnosis

The disadvantages of traditional therapies



Gene therapy methods are well established

- As of January 2007, there were a total of 1,260 gene therapy clinical trials approved worldwide, with approximately 90 new trials submitted for approval each year, most of which in the USA and Europe.
- Nearly half of all trials use one of two viral-based gene transfer vectors, adenovirus and retrovirus.
- Specific homing/targeting is still the challenge.

Mesenchymal Stem Cells



Bone Marrow Mesenchymal Stem Cells



- Low immunogenicity
- Low tumorigenic/transformation rate
- Can be gene modified without affecting their phenotype
- Home to injury tissues and tumours/cancer

MSCs Can Home to Injury Tissues



MSCs home to a variety of tissues, particularly after tissue injury and ischemia.

Miyahara Y, Nagaya N, Kataoka M,et al . Monolayered mesenchymal stem cells repair scarred myocardium after myocardial infarction. Nat Med. 2006 Apr;12(4):459-65.

Carvalho KA, Guarita-Souza LC, Hansen P,et al. Cell Transplantation After The Coculture of Skeletal Myoblasts and Mesenchymal Stem Cells in the Regeneration of the Myocardium Scar: An Experimental Study in Rats. Transplant Proc. 2006 Jun;38(5):1596-1602.

Gnecchi M, He H, Noiseux N,et al. Evidence supporting paracrine hypothesis for Akt-modified mesenchymal stem cell-mediated cardiac protection and functional improvement. FASEB J. 2006 Apr;20(6):661-9.

Kraitchman DL, Tatsumi M, Gilson WD, et al. Dynamic imaging of allogeneic mesenchymal stem cells trafficking to myocardial infarction. Circulation. 2005 Sep 6;112(10):1451-61.

Systemically Administrated MSCs Specially Home to the Tumours



Journal of the National Cancer Institute, Vol. 97, No. 7, 2005

Similarities Between Tissue Repair and Tumour Development

Tumour development shares many common characteristics of wound healing; <u>*Tumours*</u> <u>are regarded as wounds that never heal.</u>

Rapid cell proliferation and differentiation

Angiogenesis

Immuno-suppresive nature

Main Difference: *Tissue Remodeling: Apoptosis*

MSCs and Tumour Stroma

- Where do the tumour stroma orginiate ?
 - Local
 - Circulating cells
- MSCs form tumour stroma.
- Tumor mcroenvironment select MSC engraftment.



The tumour environment recruits MSCs



MSCs-like cells increased in patient with chondrosarcoma, PBMNCs culture; 7 days; 40x **MSCs-like cells increased in patient with osteosarcoma, PBMNCs culture; 14 days; 40x**

Flow cytometric analysis demonstrated an >9-fold increase in the number of cells with MSC-like phenotypes CD34(-)CD45(-)CD105(+) in patients with bone sarcomas compared with control subjects (p<0.05).

Bian, et al. Increased number of mesenchymal stem cell-like cells in peripheral blood of patients with bone sarcomas. Arch Med Res. 2009 Apr;40(3):163-8

BMSCs migration toward tumor cell lines before and after tumor condition medium stimulation



BMSCs response to tumor cells in close contact



Wound healing assay of BMSCs in tumor cells condition media



The changes of CXCR4 and MMP-2 expression were confirmed by Western blot



BMSCs migration towards to tumor cells before and after treating with CXCR4 and MMP2 inhibitor



MSCs as carrier for anti-tumour/cancer therapy



IVIS ® 200 Imaging System: Tracing Stem Cells in vivo



Luciferase gene was stably transduced into BMSCs and tumour cell lines



Good correlations were found between cell numbers and bioluminescence in all cells



Study MSCs Homing to Tumours

TUMOUR CELLS SUBCUTANEOUS IMPLANTATION



MSCs distribution in PC3 tumor bearing mice



Day 3



Day 9

Day 12

Study MSCs Homing to Tumours

TUMOUR CELLS SYSTEMIC INJECTION







MSCs mainly home to tumours following systemic administration



The engraftment of BMSCs in the tumour parenchyma was confirmed by immunostaining of GFP positive cells



BMSCs did not favor tumour growth in short term co-culture

A. PC3 cells



B. DU145 cells



C. MCF-7 cells

Cell proliferation as multiple of day 1



D. RIF-1 cells



BMSCs favour PC3 tumour growth in vivo



TK (Thymidine Kinase)/GCV (Ganciclovir) System

Herpes simplex virus 1 (HSV-1) TK enzyme is not expressed in normal cells.

HSV-TK converts GCV to triphosphate GCV (GCV-TP), which is cytotoxic.

GCV-TP causes cell death by apoptosis





 Stem cells as gene delivery vehicles

Stem cells for gene

293FT OR 293T

producer cell line

therapy

Your Mammalian Cell Line of Interest

 TK gene was tranfected into MSCs using Lentiviral system



48h after C3H10T1/2 cells transfected with Lenti-CMV-luciferase-GFP virus.

The phenotype of Lenti-Luciferase-TK transduced BMSCs did not change



TK transduced BMSCs respond to GCV in 24 h



Anti-tumour effect of systemically administered TK-MSCs in the presence of GCV in tumour bearing mice.



Days post tumor implantation

TK MSCs + GCV

DAY 12

DAY 16

DAY 27







TK MSCs Only







GCV Only









bkg sub flat-fielded cosmic

Systemic administration of TK-MSCs and GCV significantly inhibited metastatic tumour growth



Gross Sample of RIF-1 tumor in lung day 27



Percentage of BMSCs in the lung compared to total BMSCs in the body





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Cytotherapy (2009) Vol. 11, No. 5, 516-526

Mesenchymal stem cells as a gene therapy carrier for treatment of fibrosarcoma

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Background aims

ISCT

Cell-based gene therapy is an alternative to viral and non-viral gene therapy. Emerging evidence suggests that mesenchymal stem celk (MSC) are able to migrate to sites of tissue injury and bave immunosuppressive properties that may be useful in targeted gene therapy for sustained specific tissue engraftment.

Methods

In this study, we injected intravenously (i.v.) 1×10^6 MSC, isolated from green fluorescent protein (GFP) transgenic rats, into Rif-1 fibrosarcoma-bearing C3H/HeN raice. The MSC had been infected using a lentiviral vector to express stably the lucifernse reporter gene (MSC-GFP-luci). An in vivo imaging system (IVIS 200) and Western blotting techniques were used to detect the distribution of MSC-GFP-luci in tumor-bearing animals.

Results

We observed that xenogenic MSC selectively migrated to the tumor site, proliferated and expressed the exogenous gene in subcataneous fibressarcoma transplants. No MSC distribution was detected in other

Introduction

Solid tumors comprise two distinct but interdependent compartments neoplastic cells and the stroma that the neoplastic cells induce and in which they are dispersed. that the FGF2/FGFR pathways may play a role in the directional movement of MSC to the Rif-1 fibrosarcoma. We performed in vitro co-culture and in vivo tumor growth analysis, showing that MSC did not affect the proliferation of Rif-1 cells and fibrosarcoma growth compared with an untreated control group. Finally, we demonstrated that the xenogenic MSC stably expressing inducible nitric oxide synthase (iNOS) protein transferred by a lentivirw-based system bad a significant imbibitory effect on the growth of Rif-1 tumors compared with MSC alone and the non-treatment control group.

organs, such as the liver, spleen, colon and kidney. We further showed

informa

Parallel and an

Conclusions

iNOS delivered by genetically modified iNOS-MSC showed a significant anti-tumor effect both in vitwo and in vivo. MSC may be used as a target gene delivery vehicle for the treatment of fibrosarcoma and other tumors.

Keywords

Fibrosarcoma, gene therapy, inducible nitric oxide synthase, mesenchymal stem celk.

Stem cells are mainly referred to as tumor-supporting fibroblasts and they may derive from resident fibroblasts in the organ/tissue [1] or circulating mesenchymal progenitor cells [2–5].

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Using Mesenchymal Stem Cells as Vehicles for Anti-cancer Therapy



MSCs as anti-tumour gene therapy vehicle

Transduction of the HSV-TK gene into BMSCs did not change their MSCs phenotype and tumour homing potential.

Potent cytotoxic effects of TK-BMSCs/GCV was proved on tumour cells in vitro.

 TK-BMSCs together with GCV can greatly inhibit tumour growth in both local and metastasis tumour models in vivo.

Thank you !

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