

Bioresponse of Mammalian Kidney to Implantation of Polymeric Materials

Richard Payne, Toyin Knight, Joydeep Basu, Elias Rivera, Neil Robbins, Darell McCoy, Manuel Jayo, Craig Halberstadt, Deepak Jain.

Tengion Inc., Winston-Salem, North Carolina, USA

Statement of Purpose: Biomaterials can modulate regenerative outcomes in tissue engineering or regenerative medicine applications by facilitating cell attachment and delivery and by providing a physical substrate for tissue infiltration¹. This study investigated host tissue responses to intra-renal injection of natural and synthetic biomaterials in rodent kidney to identify candidate biomaterials for forming cell/biomaterial composites with bioactive renal cell populations². The ultimate goal of this research is to develop Neo-Kidney Augment prototypes that delay the need for dialysis and improve renal function in patients with chronic kidney disease.

Methods: Natural biomaterials included gelatin and hyaluronic acid (HA). Synthetic biomaterials included polycaprolactone (PCL) and poly-lactic-co-glycolic acid (PLGA). Candidate biomaterials were evaluated in two discrete physical conformations: homogenous, spherical beads or heterogenous and non-uniform particles. PCL and PLGA beads (**Figure 1, left**) were prepared using a modified double emulsion (water/oil/water) solvent extraction method. Gelatin beads were purchased (Cultispher-S®, Sigma-Aldrich, St. Louis, MO). PLGA particles were prepared using a solvent casting porogen leaching technique; gelatin and HA particles were prepared from cross-linked, lyophilized foam (**Figure 1, right**). Two injections of 35 μ l of loosely packed biomaterials were delivered to the left kidney parenchyma of 3 month old Lewis rats. Histopathologic evaluation of formalin-fixed sections of kidney tissue at 1 and 4 weeks post-injection was conducted using a semi-quantitative grading severity scale from 0 (absent) to 4 (marked) of inflammation, tissue/cellular in-growth, neo-vascularization, material degradation, and fibro-cellular responses. Overall scores were calculated as the ratio of % positive to % negative response (the higher the overall score the superior outcome).

Results:

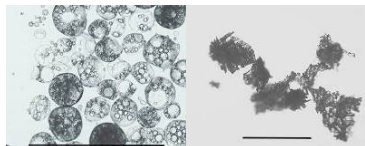


Figure 1. Representative images of PLGA beads (left) and gelatin particles (right). Scale bars = 1 mm

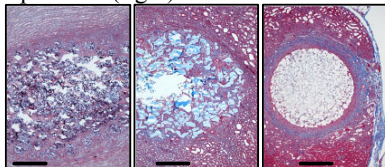


Figure 2. Histopathologic evaluation performed on biomaterial candidates – representative 40X images of kidneys harvested 1 week post-implantation, sections

stained with Masson's Trichrome. Materials composed of polymers of natural origin, such as gelatin (left) and HA (center) were associated with milder fibro-cellular response and chronic inflammation, and greater cellular in-growth, neo-vascularization, biomaterial degradation, and necessary inflammation required for tissue healing and integration when compared to the synthetic biomaterials, such as PLGA (not shown) and PCL (right – note organized fibrous encapsulation).

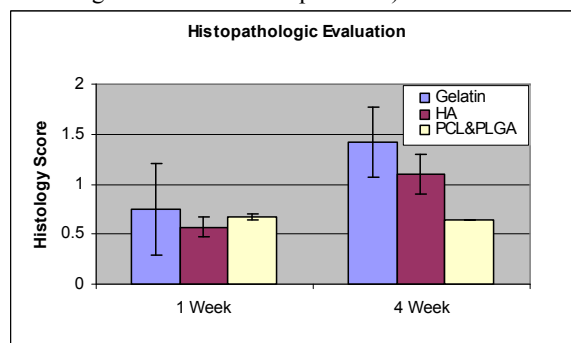


Figure 3. Summary of histopathologic evaluation scoring. Scores were averaged by material composition (mean \pm SD). The synthetic materials (PLGA and PCL) scored the lowest, and gelatin materials generally scored higher than HA materials. This trend is most pronounced at the 4 week time point. Due to factors unrelated to the material injection, not all the samples tested at 1 week were available for analysis at 4 weeks. The number of samples that are included in the gelatin, HA, and synthetic groups are 3, 4, 3 at 1 week and 2, 3, 1 at 4 weeks, respectively.

Conclusions:

- Biomaterials of natural origin (e.g., gelatin or HA) elicited minimal tissue responses when evaluated 4 weeks post-injection
- Active are studies investigating the *in vivo* effect of bioactive renal cell/biomaterial composites to kidney tissue histology and function in established animal models of chronic renal disease.

References:

1. Basu J. Trends Biotechnol. 2010; 28 (10): 526-33
2. Presnell SC. Tissue Eng Part C. 2010, in press

Acknowledgements: We thank Kim Mihalko (Carolinas Medical Center) for animal surgeries.