



## **Omentum-derived stromal cells improve myocardial regeneration** in pig post-infarcted heart through a potent paracrine mechanism

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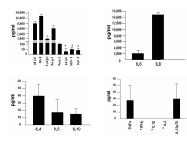
Introduction: Myocardial Infarction (MI) represents one of principal causes of human death. Cell-based therapy could be a valid new approach for MI. Different kind of cells, including embryonic stem cells as well as adult/progenitor stem cells, have been proposed as candidates for therapeutic purposes. However, many aspects, ranging from ethical questions to functional efficacy, still remain to be clarified. Among adult/progenitor stem cells, Adipose-derived stromal cells (ADSC) seem to have some advantages, mainly because of their easy tissue accessibility and iv tro an adequate rate of growth.

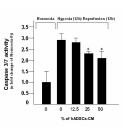
Aim of the study: To investigate the capacity of transplanted ADSCs, through functional, haemodynamic and histopathological assessment, to improve myocardial infarction and regeneration of experimental heart ischemia induced by permanent IVA-ligation in pigs.

Methods: ADSCs isolated from human adipose tissue (omentum fat) were cultured, expanded, and phenotipically characterized. Furthermore, in vitro proangiogenic, anti-inflammatory and anti-apoptotic properties were analyzed. 50x10<sup>6</sup> cells/pig were transplanted by intramyocardial injection in acute infarcted hearts (treated-group, n=12 cell-injected pigs). Two months after MI induction echocardiographyc and haemodinamic follow-up was performed. In addition, hystopathological examination was conducted.

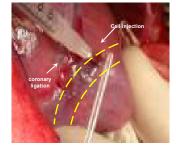
Results: As shown in Figure 1, in vitro ADSCs secreted high levels of pro-angiogenic, anti-inflammatory and immunomodulatory cytokines (VEGF, HGF and IL-6). Furthermore, they prevented monocytes activation as well as cardiomyocytes apoptosis (Figure 2). Finally, in vitro but not in vivo, ADSCs were able to transdifferentiate into cardiomyocyte-like cells (Figure 3). In vivo, ADSCs injection along the border of the ischemic area (Figure 4), reduced post-infarct pigs mortality, produced a significant ameliorative effect on heart haemodinamycs parameters and slightly improved echocardiographyc profile. Histological and immunohistochemycal examination demonstrated some cardio-regenerative capacities of ADSCs, showing an increase of vascular and cardiomyocyte markers only in animals treated with ADSCs (Figures 5 and 6).

Conclusions: Implanted ADSCs derived from omentum could improve myocardial function and regeneration through the concomitant capacity to release molecules, restore angiogenesis, reduce inflammation and prevent cardiomyocytes apoptosis. Since adipose tissue is one of the body's richest known sources of regenerative cells, ADSCs could play a critical role in limiting or reversing heart damage caused by a heart attack.



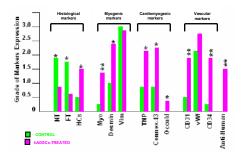


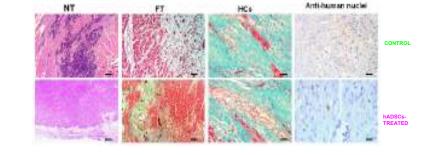




veen 5-7 passages and just before cell deta int the mean ± SD of growth factors and cy chment for injection. The values in the tokines released by 10<sup>6</sup> cells during the

und 50% of ADSCe cuit





of hearts AL 2 months, post-infarct animals were sacrificed and hearts were analysed by hystology for the presence of necrotic calcified tissue (NT), fibrotic tissue (FT) and presence of hypertrophic cardiomyocytes (HGs) by hematossilin-eosin and cular markers was investigated by immunohystochemistry. On the ordinate is indicated Grade of markers expression. Note that NT and FT is significantly reduced the presence of HCs as well as myogenic, cardiomyogenic and vascular markers was nd immunohystochemistry of ADSCs and commu-xpression of myogenic, cardiomyogenic and vas t to control-pigs.\*p<0.05; \*\*p<0.01 versus con stology are ng; the expr