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### Porcine epidermal stem cells as a biomedical model for wound healing and normal/malignant epithelial cell propagation

J. Motlík<sup>a,b,\*</sup>, J. Klíma<sup>a,b</sup>, B. Dvořánková<sup>b,c</sup>, K. Smetana Jr.<sup>b,c</sup>

<sup>a</sup> Institute of Animal Physiology and Genetics, Academy of Sciences, Liběchov, Czech Republic

<sup>b</sup> Charles University, 2nd Faculty of Medicine, Center of Cell Therapy and Tissue Repair, Prague, Czech Republic

<sup>c</sup> Charles University, 1st Faculty of Medicine, Institute of Anatomy, Prague, Czech Republic

### Abstract

This article summarizes research using cells derived from epidermis of the miniature pigs for use as a cell therapy for skin repair and as a model for squamous carcinoma of the head and neck. Stem cells are an important "tool" for biomedical research. Adult stem cells are defined functionally, as cells that have the capacity to self-renew as well as the ability to generate differentiated cells. They are present in defined tissue microenvironments called niches. Asymmetric mitosis allows them to produce one daughter cell with the properties of stem cells (self-renewal) and a second cell with characteristics of progenitor cells, or transit amplifying cells, which proliferate quickly but with a limited number of mitotic divisions. Porcine epidermal stem cells, located in the bulge region of the outer root sheath of hair follicles, migrate in vitro from hair sheaths and because they are resistant to anoikis (detachment induced apoptosis), survive in non-adhesive conditions to form spheroids. These cells express keratins, galectin-1 and their nuclei are rich in  $\Delta Np63\alpha$ . Interestingly, the multiple phenotype analysis of the human tumor cells in squamous carcinoma of head and neck revealed similarities with epidermal stem cells. These cancer stem cells are usually located on the periphery of the tumor where the invasive front of the tumor responsible for its aggressive behavior is located. In contrast, extensive expression of markers of terminal differentiation such as expression of glycoligands reactive for the endogenous lectin, galectin-3, indicates better tumor prognosis.

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### 1. Introduction

Rapid progress of biomedical research opens new horizons for the management of many diseases. These decisions ask for new models to better understand the molecular mechanisms of the pathological process and to improve medical technologies. Stem cells are an important tool for biomedical research and have the potential to cure many diseases through their use in cell therapies. Before these can be trialed in humans, it is essential to examine the safety and efficacy of these therapies by transplantation studies in suitable experimental, clinically relevant models. In this article we describe our research using cells derived from epidermis of the miniature pigs.

### 2. Stem cell characteristics

Stem cells have been studied extensively for use in various cell therapy applications and for research in many diseases such as cancer. Stem cells can be

<sup>\*</sup> Corresponding author at: Institute of Animal Physiology and Genetics, Academy of Sciences, Rumburská 89, 27721 Liběchov, Czech Republic. Tel.: +420 315 639 560; fax: +420 315 639 510.

E-mail address: motlik@iapg.cas.cz (J. Motlik).

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characterized as totipotent, pluripotent, multipotent and finally monopotent depending on the number of distinct cell types they can give rise to following differentiation [1]. While totipotent cells are represented by the first few blastomers in the course of early embryonic development, pluripotent cells are so-called embryonic stem cells. These can be prepared from the inner cell mass of blastocyst and they can be differentiated to majority of cell lines occurring in the organism [1,2]. Adult (organ/tissue specific) stem cells are multi/ monopotent. Adult stem cells are defined functionally as cells that have the capacity to self-renew as well as the ability to generate differentiated cells and they must display sufficient proliferative capacity to last the life time of the animal. The ability of adult stem cells to selfrenew and to produce daughter cells that initiate differentiation is the key to tissue homeostasis. They are present in defined tissue microenvironment called niches. In this niche, stem cells are in intimate contact with surrounding support cells that serve as a source of critical signals controlling stem cell behavior. Adhesion between stem cells and either basement membrane or the support cells plays an important role in holding the stem cells within the niche, close to self-renewal signals.

Adult stem cells, which are responsible for selfrenewal of tissue, are slowly cycling with non-limited number of divisions. Their mitosis can be characterized as asymmetric, which means that one of two daughter cells retains the property of stem cells (self-renewal) and the second is at the beginning of the differentiation cascade. This cell has characteristics of progenitor cells and is termed a transit amplifying cell. In contrast to stem cells, transit amplifying cells proliferate quickly but with limited number of mitotic divisions [1,3,4].

Transcription profiling of stem cells has revealed that they have the capacity to respond to a broad range of growth factors and signaling molecules and downstream signaling components involved in TGFB, Notch, Wnt and Jak/Stat signal transduction pathways. The common molecular processes underlying the core stem cell properties of self-renewal and the generation of differentiated progeny are referred to as stemness [5]. Once a detailed understanding of how the choice between stem cell self-renewal and the onset of differentiation is determined, it will help facilitate the expansion of adult stem cells in vitro while maintaining their stemness. Therefore, the progression from a fertilized egg to a differentiated cell via embryonic and adult stem cell may be continuum in which several steps are reversible. For example, human interfollicular keratinocytes are able to transiently reverse phenotypically to a less differentiate

state [6]. Recent observations are providing increasing evidence that adult stem cells are part of a natural system for repairing damage to tissue by trauma or disease [7,8].

# **3.** Epidermal stem cell in consequence of functional morphology of squamous epithelium-role in cell therapy

Squamous cell epithelium can be divided into several layers, where only cells of basal layer are able to proliferate. Suprabasal cells are terminally differentiated, highly specialized elements responsible for protecting the skin surface against injury, pathogen colonization and loss of water and crystalloids [9]. Porcine skin is very similar to the human tissue in relation to the morphology and gene expression profile [10].

Epidermal stem cells are present in two sites namely the basal layer and the second so-called bulge region of outer root sheath of hair follicle. Bulge cells possess the ability to reform the hair follicle and to contribute to the re-epithelialisation of the epidermis. While hair follicle epidermal stem cells participate predominantly in the hair cycle, a role for basal layer stem cells in wound healing has also been hypothesized [11–13]. In the squamous epithelia of mucosa (oral cavity, larynx, esophagus), where no hairs are present, stem cells are also present in basal layer of epithelium and their adhesion to the extracellular matrix promotes stem cell identity and prevents their differentiation [11,14].

Similarly to other adult tissue stem cells (neuronal, mammary gland, striated muscle, bone marrow stroma), no specific markers of epidermal stem cells have been discovered but it is known that these cells express a high level of  $\beta 1$  integrin, which is commonly used as a marker for stem cells within the interfollicular epidermis [11]. β1 integrin expression is also enriched in cells within the bulge region of the outer root sheath, which is contiguous with the interfollicular epidermis. Targeted disruption of the  $\beta$ 1 integrin gene results in progressive hair loss and interfollicular keratinocytes are significantly reduced [15]. It is plausible that  $\beta$ 1 integrin anchors stem cells within the bulge, close to the self-renewal signal. It has been shown that high levels of β1 integrin with signaling through the mitogenactivated protein kinase cascade maintain the epidermal stem cell compartment [16].

Expression of keratin 15 and 19 and of  $\Delta Np63\alpha$ , respectively was observed in epidermal stem cells [17–19] (Fig. 1). p63 is critical for epithelial development, since knockdown of p63 expression caused down-regulation of cell adhesion-associated genes, cell

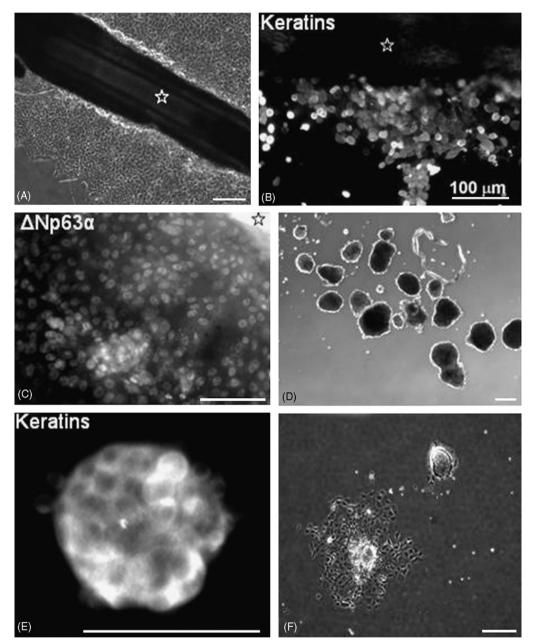


Fig. 1. Porcine epidermal cells which have migrated from hair sheaths (A–C). These cells express keratins (B) and their nuclei are rich in  $\Delta Np63\alpha$ . These cells form spheroids (D, E) in non-adhesive conditions, which are also rich in keratins (E). These spheroids are able to adhere and form colonies after the transfer to adhesive condition (F). The position of hair is marked by asterisk.

detachment and anoikis in mammary epithelial cells and keratinocytes. In contrast, over-expression of the DeltaNp63alpha isoform of p63 upregulated cell adhesion molecules, increased cellular adhesion and conferred resistance to anoikis [20]. These data implicate p63 a key regulator of cellular adhesion and survival in basal cells of stratified epithelial tissues.

Epidermal cells similar to stem cell elements also express endogenous lectin galectin-1 or epitopes reactive for this lectin in their nuclei [21,22]. Because of their very slow proliferation, they retain labeled precursors of DNA (labeled retaining cells, [23]). Although, this marker is the most reliable, its use is possible only in small laboratory animals [24].

Adult tissue stem cells such as neuronal or mammary gland stem cells appear to be resistant to anoikis (detachment induced apoptosis) and form spheres (neurospheres, mammospheres) [25–27]. Basal layer cells with

phenotype similar to epidermal stem cells with a high clonogenic capacity with extensive resistance to anoikis have been isolated [6,28]. Porcine hair follicle epidermal cells, also phenotypically similar to epidermal stem cells, are also able to survive in non-adhesive condition and form spheroids (Fig. 1). These spheroids adhere after transfer to adhesive surfaces and form large colonies of keratinocytes [19] (Fig. 1).

Keratinocytes need feeder cells such as fibroblasts with arrested mitosis for successful cultivation, although feeder free systems have also been developed [29,30]. Unfortunately, cultured keratinocytes (including stem cells) terminally differentiate and cells with epidermal stem cell properties disappear from the culture. This observation indicates that we are not able to develop culture conditions sufficient for successful function of epidermal stem cell. This phenomenon seems to be very common for many types of adult stem cells in vitro.

Despite this failure to expand epidermal stem cells in vitro, cultured keratinocytes have been used for the treatment of skin defects in the last three decades [31–33]. Success of this technology indicates that function of stem cells after the transfer to the wound bed can be restored. However, it is possible that reconstructed epithelium was repopulated by stem cells from non-affected skin.

## 4. Porcine skin as a xenograft to treat severe skin defects

Porcine organs are physiologically very similar to those of humans. Therefore, pigs represent a potential source of organs for human transplantation medicine. Unfortunately, two main serious obstructions restrain the use of porcine organs in clinical practice at present. The first of them involves an expression of  $\alpha$ -galactoside terminated glycoepitopes (so-called Gal epitop) in cells and tissues namely in vascular endothelium. Humans and Old World monkeys have a significant amount of natural antibodies against the Gal epitop, which is thought to be the major xenoantibody responsible for hyperacute rejection of porcine organs following transplantation [34,35]. The second barrier to xenotransplantation is a hypothetical one, involving the transfer of pathogens, mainly porcine retroviruses to human donors [36]. Though, the use of porcine tissues in human medicine is problematic, the grafting of thin porcine dermoepidermal grafts has been used routinely as a provisional cover of severe skin defects with excellent results [37,38]. This temporary compatibility of porcine provisional graft was probably related by the absence of Gal on the surface of epidermal cells [39]. Recently, Gal-knockout pigs were produced [40]. Use of these genetically manipulated animals as potential donors of skin for provisional cover of extensive skin defects should be possible but their employment as donors of complex vascularized organs needs further research [41].

### 5. Stem cells and cancer

Solid tumors are characterized by the presence of poorly differentiated cells that originate from the affected tissue. Interestingly when tumor cells are grafted from donor to the host, only around 10% of cancer cells can form "successful" tumors in the recipient animals. The term "cancer stem cell" has been used to describe these cells [42,43]. These cells are very similar to adult stem cells found in almost all tissues [44]. Multiple phenotypic analysis of tumor cells in squamous carcinoma of head and neck in humans has shown that cells located on the periphery of tumors, the so-called invasive front responsible for its aggressive behavior, are similar to epidermal stem cells [45,46]. On the other hand, cells exhibiting markers of terminal differentiation are usually located in the middle of the tumor. Interestingly, human patients suffering form head and neck cancer with extensive expression of markers for terminal differentiation such as expression of glycoligands reactive for the endogenous lectin galectin-3, have better prognosis than patients without expression of galectin-3-reactive glycoligands [47]. This observation seems to be clinically important, because therapy of patients can be individualized according to the biological properties of individual tumors located in a distinct patient.

In normal skin, NF-kappaB signaling is thought to inhibit squamous cell carcinoma development. NFkappaB activity has been shown to contribute to the survival and growth of cultured non-tumorigenic human keratinocytes [48]. NF-kappaB activation occurs largely through interaction with extracellular matrix components as preventing cell attachment, by forced suspension culture, markedly reduces NF-kappaB signaling associated with cell death (anoikis).

The human cell line FaDu, prepared from squamous cell carcinoma of hypopharynx, expresses many markers observed in epidermal stem cells (for example, keratin 19, nuclear expression of galectin-1) at the beginning of cultivation. During prolonged cultivation these markers disappear indicating some level of differentiation in this tumor line [49]. Many adult stem cell populations contain sub-populations of cells called a side population. These cells actively exclude xenobiotics (dyes) from cytoplasm

using special membrane proteins with pumping activity [50,51]. A similar phenomenon was also observed in many cancer cells. While this mechanism protect adult stem cells from damage, the same phenomenon is thought to be responsible for the multidrug resistance of cancer cells [52,53]. The similarity between cancer and adult tissue stem cells is further underlined by the fact that both these cell types are resistant to anoikis [19,25-28,54]. Resistance to anoikis in adult tissue stem cells can improve survival of these elements in the blood stream and it has been suggested that blood vessels as highways distribute stem cells to areas of the body where they can assist local stem cells in repair [55]. The same phenomenon in cancer stem cells is thought to be responsible for the spreading or metastation of the tumor.

As mentioned above, the niche or microenvironment is critically important for stem cell function. Tumor cells are surrounded by the tumor stroma. According to classical thinking, the stroma is important for the vascularisation of the tumor site and therefore for the nutrition of tumor cells. Many recent findings show that stromal fibroblasts/myofibroblasts can influence functional properties of transformed cells including their local aggressiveness and metastatic potential [56,57]. Many stromal cells exhibit serious genetic alterations improving their protumorigenic function [58]. A very important finding was published from research involving breast cancer, where, due to epithelial-mesenchymal transition, the stromal fibroblasts were developed from transformed glandular epithelium [59]. These data

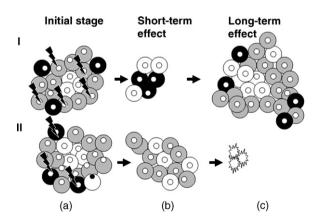


Fig. 2. A hypothetical model of role of cancer stem cell in cancer therapy. The cancer stem cells (white cytoplasm) as slowly proliferating elements are more resistant to chemotherapy (flash) than rapidly dividing tumor progenitor cells (grey cytoplasm). The cancer stem cells and postmitotic cancer cells (black cytoplasm) survive therapy and increase the risk of residual disease as a new source of tumor progression (I). Drugs targeted against cancer stem cells can efficiently destroy the tumor and minimize a risk of its recidive (II).

indicate that similarly to the normal adult tissue stem cells, the cancer stem cells need their niche. Even so, the altered regulation of mutual crosstalk between niche and stem cells can induce the cancer formation, as was observed in animal experiments in which introduction of irradiated fibroblasts to the vicinity of mouse mammary gland evoked gland malignisation [60,61].

In summary, some carcinoma including tumors that originate from the squamous epithelia and their appendages can be considered a stem cell disease. They also evoke contemplations about cancer therapy since cytostatic therapy can affect predominantly the cells in S-phase of the cell cycle. The stem cells will be targeted less frequently in comparison to the rapidly proliferating tumor progenitors, which can augment the risk of residual disease (Fig. 2).

### 6. Concluding remarks

Pigs represent an excellent model for biomedical research due to their physiological similarity including tissues such as epidermis [62]. Data presented here demonstrate that pigs are a suitable model for epidermal stem cell research as well as cancer research with direct therapeutic consequences.

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