

Recent Advances in Platelet Production in Vitro and In Vivo

Faculty Disclosures

The following faculty have no relevant financial relationships to disclose:

- Avital Mendelson

The following faculty have a relevant financial relationship:

- Joseph Italiano PhD
Platelet BioGenesis:
Consultant
VcanBio: Scientific Advisory Board
- Wilbur Lam MD, PhD
Sanguina, LLC: Co-Founder

Learning Objectives

- Discuss the biology of platelet production *in vivo and* genetic engineering approaches to produce platelets
 - Joseph E. Italiano Ph.D., Associate Professor, Harvard Medical School
- Outline methods of *ex-vivo* platelet production with novel culture systems
 - Avital Mendelson Ph.D., Assistant Member, New York Blood Center
- Define the response of platelets to the mechanical microenvironment of blood vessels
 - Wilbur Lam M.D. Ph.D., Associate Professor, Emory University and Georgia Institute of Technology

Molecular Drivers of Platelet Production

Joseph Italiano

Harvard Medical School

Brigham and Women's Hospital

Boston Children's Hospital

Platelet BioGenesis



History of Platelet Production

THE HISTOGENESIS OF THE BLOOD PLATELETS

JAMES HOMER WRIGHT

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Assistant Professor of Pathology, Harvard Medical School*

JOURNAL OF MORPHOLOGY.—VOL. 21, NO. 2

NEWS AND VIEWS

BLOOD

Thrombopoietin — at last

Donald Metcalf

WHEN, for decades, a vital blood-cell growth factor has been believed to exist but has resisted all efforts to characterize it, resolution of the conundrum is a cause for celebration. So let celebrations begin — this issue contains four papers¹⁻⁴ indicating that the frustrations concerning the platelet-regulatory factor, thrombo-

Meanwhile, four other haemopoietic regulators with proliferative actions on megakaryocytes — interleukin-3, interleukin-6, leukaemia inhibitory factor and interleukin-11 — were characterized and proved to have some ability to increase platelet levels. From the clinical viewpoint, however, the action of each is

did this by using *c-mpl* antisense oligodeoxynucleotides to show that these inhibited megakaryocyte colony formation *in vitro*, but had no inhibitory effects on erythroid or granulocyte-macrophage colonies.

From this point on, the story demonstrates the power of the 'receptor first' approach for detecting growth factors. As an initial step, in all four of the present studies cell lines were engineered to express the *c-Mpl* receptor and these cell lines provided the essential tool for moni-

1906
Wright
[PLATES
]

1957
Yamada
[DMS]

1976
Becker &
Debruyne
[PPLT]

1982
Radley

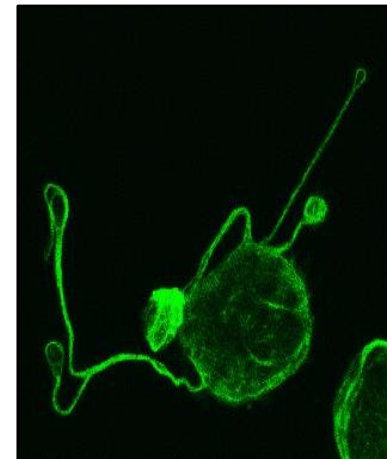
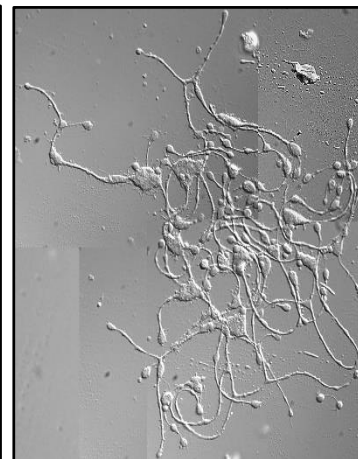
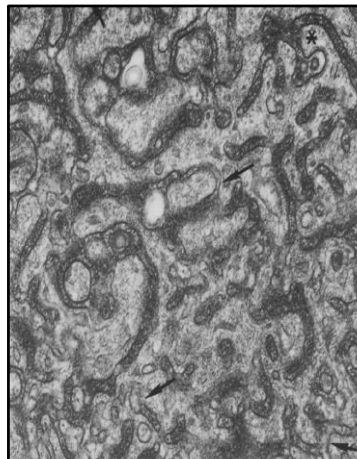
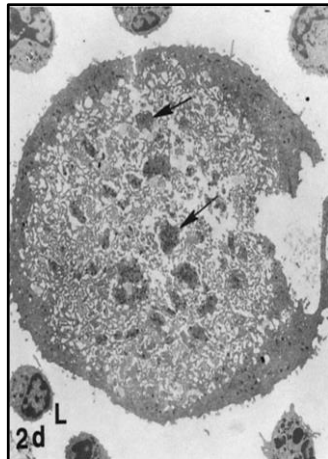
1984
Zucker-
Franklin

1986
Tablin
& Leven

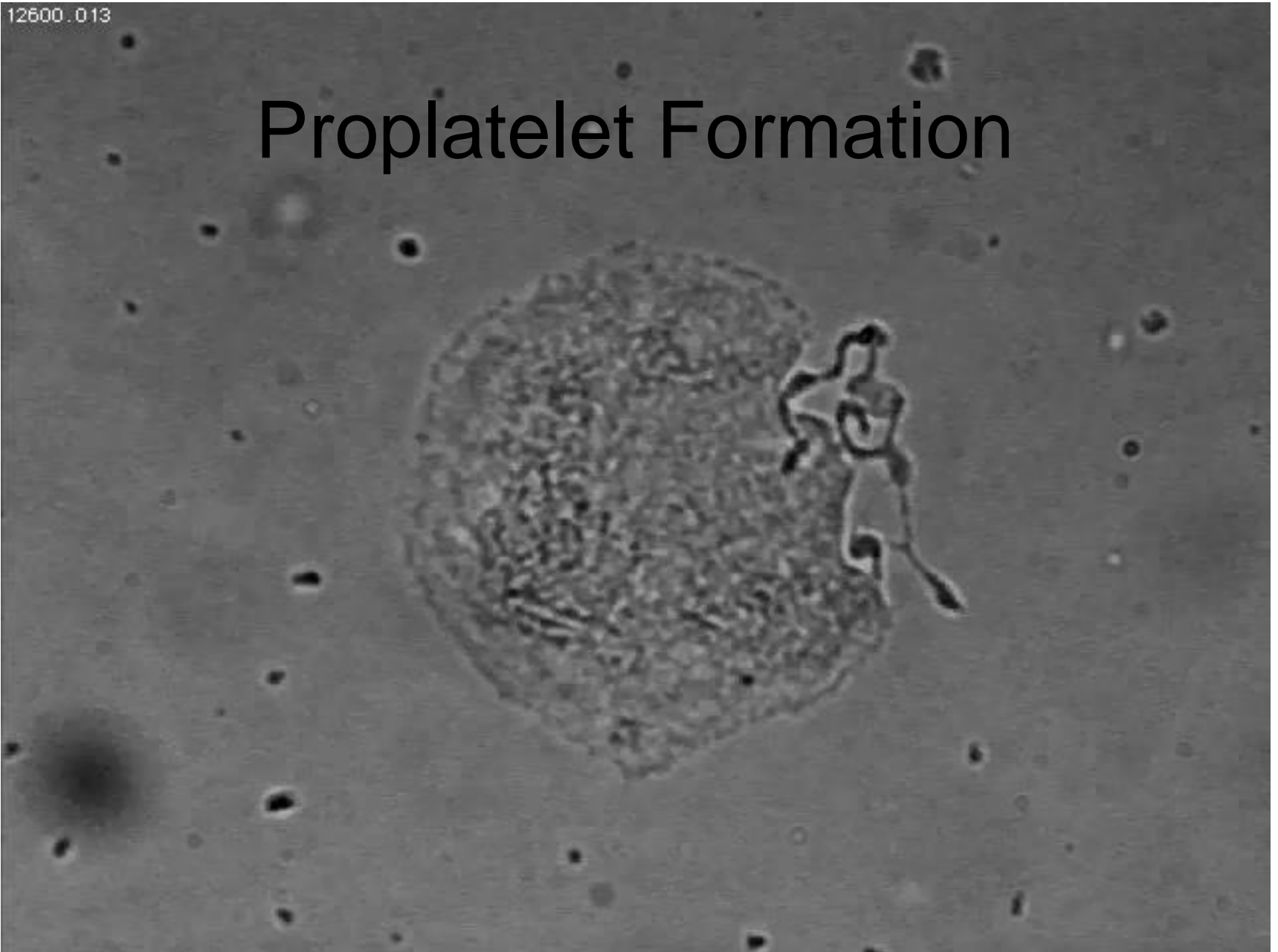
1994
[TPO]

1996
Choi

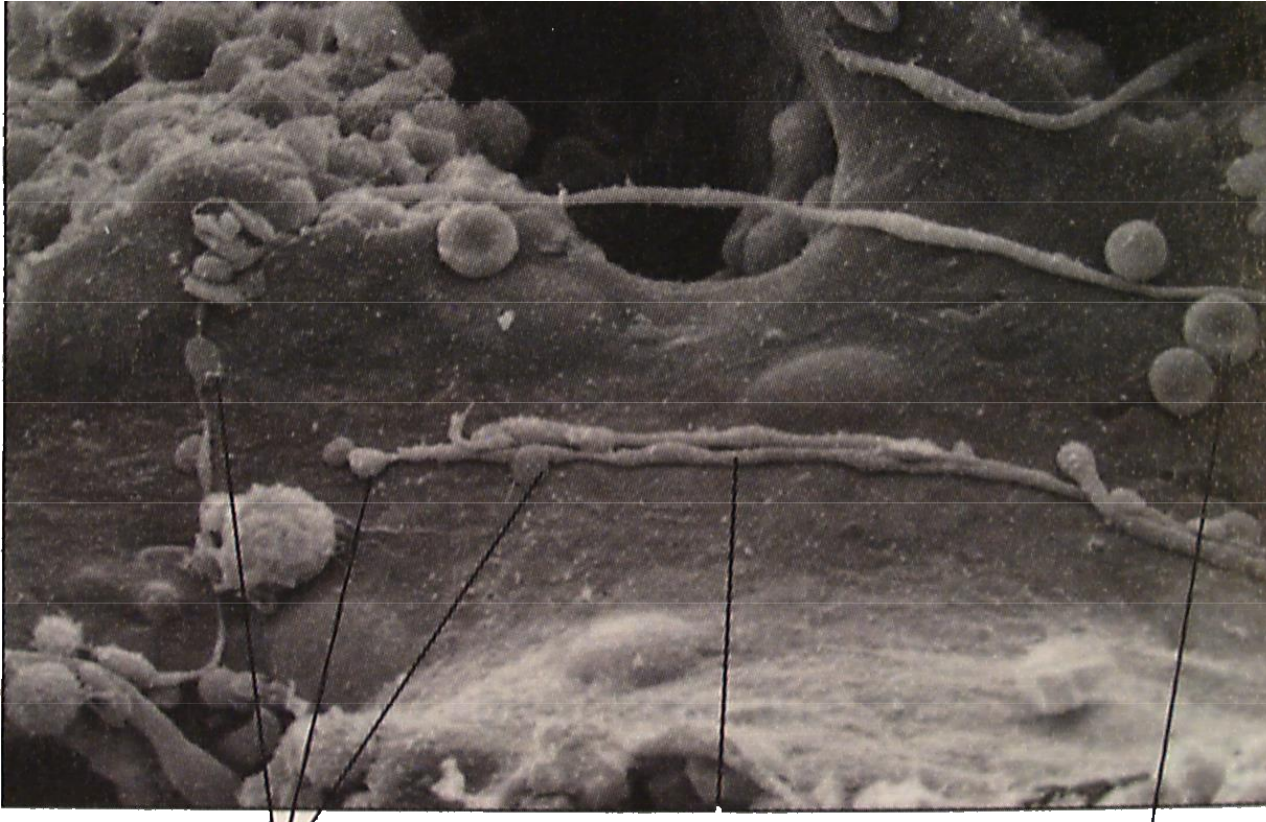
1998
Hartwig
&
Italiano



Proplatelet Formation



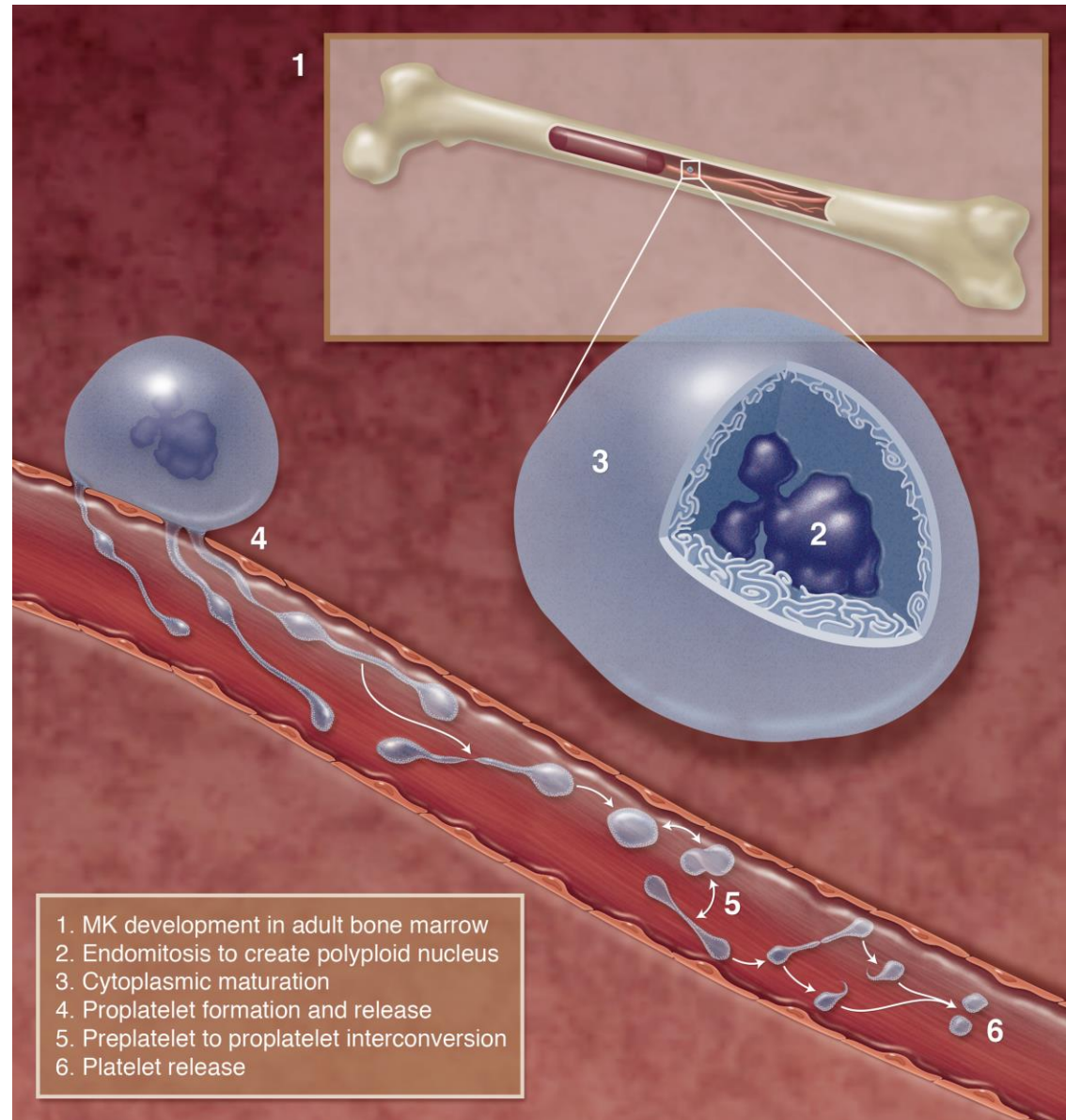
Proplatelets in vivo



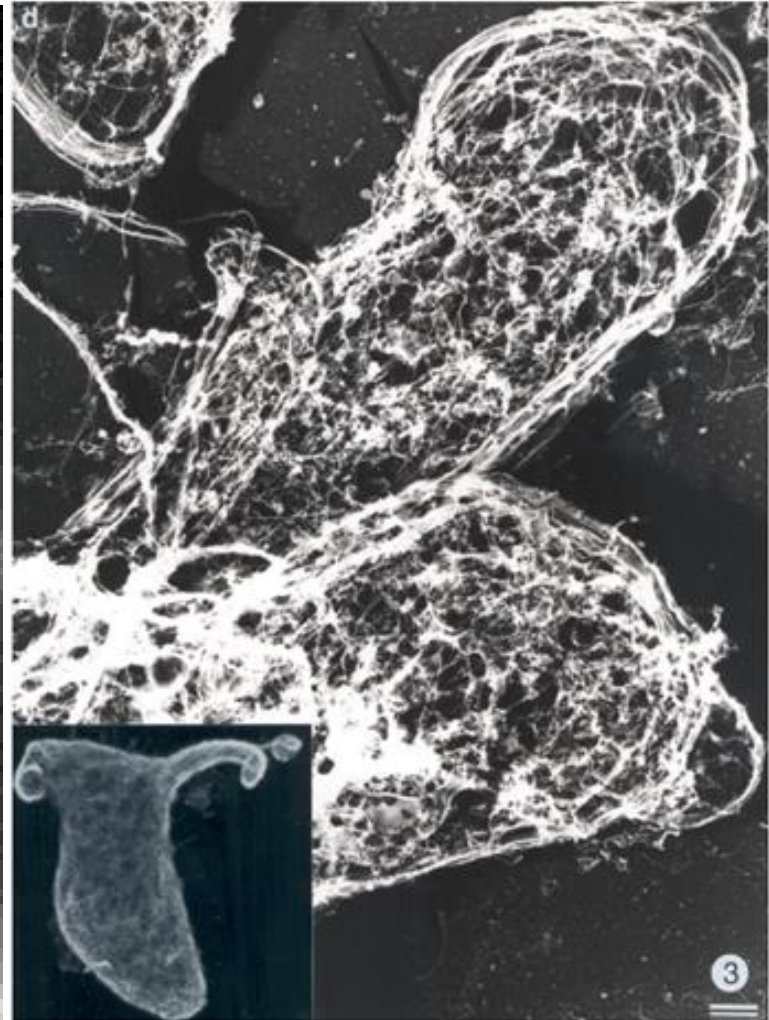
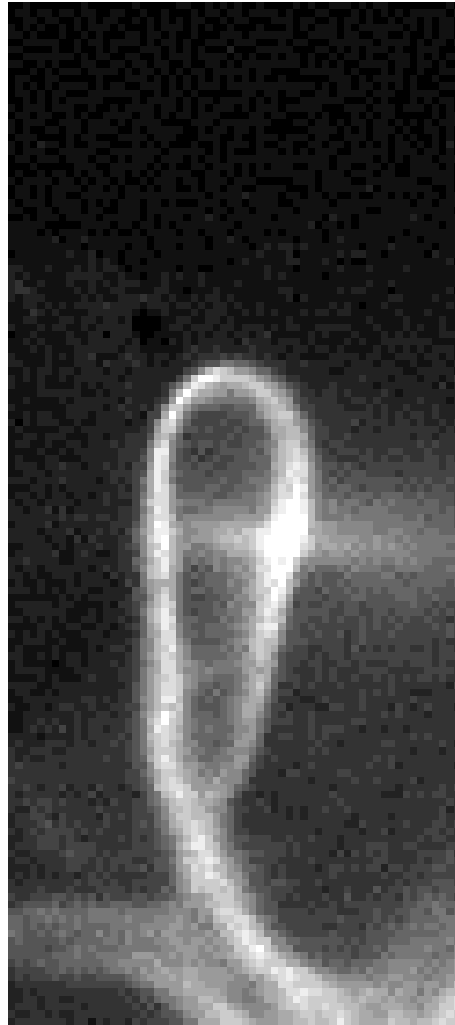
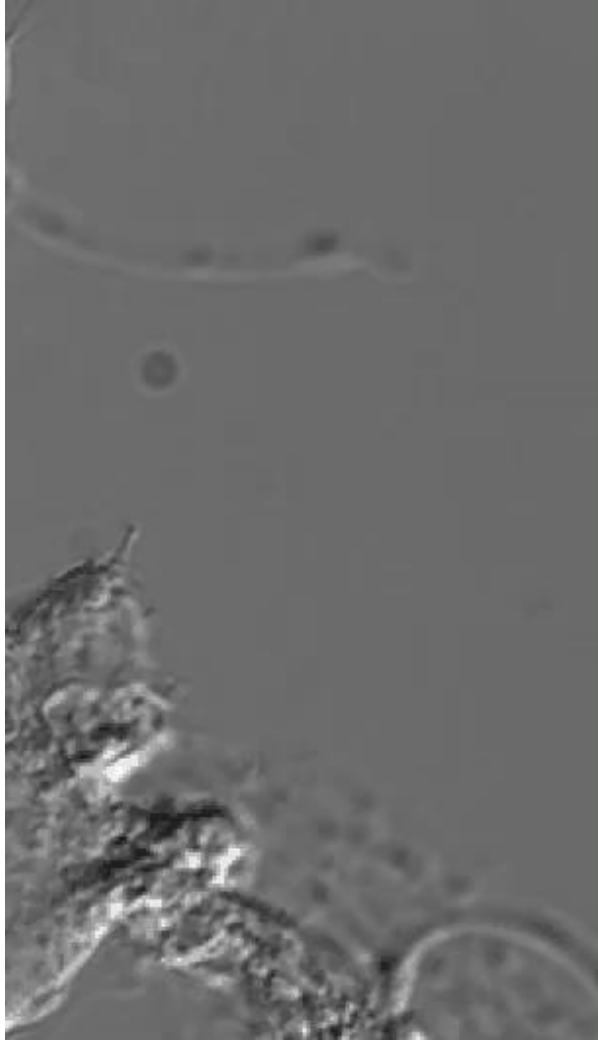
Intravascular PP
formation and shedding in
 $S1pr1^{+/+}$ $CD41-YFP^{kl/+}$ mice

Massberg S. 2013 J Exp Med

Platelet Production from Megakaryocytes



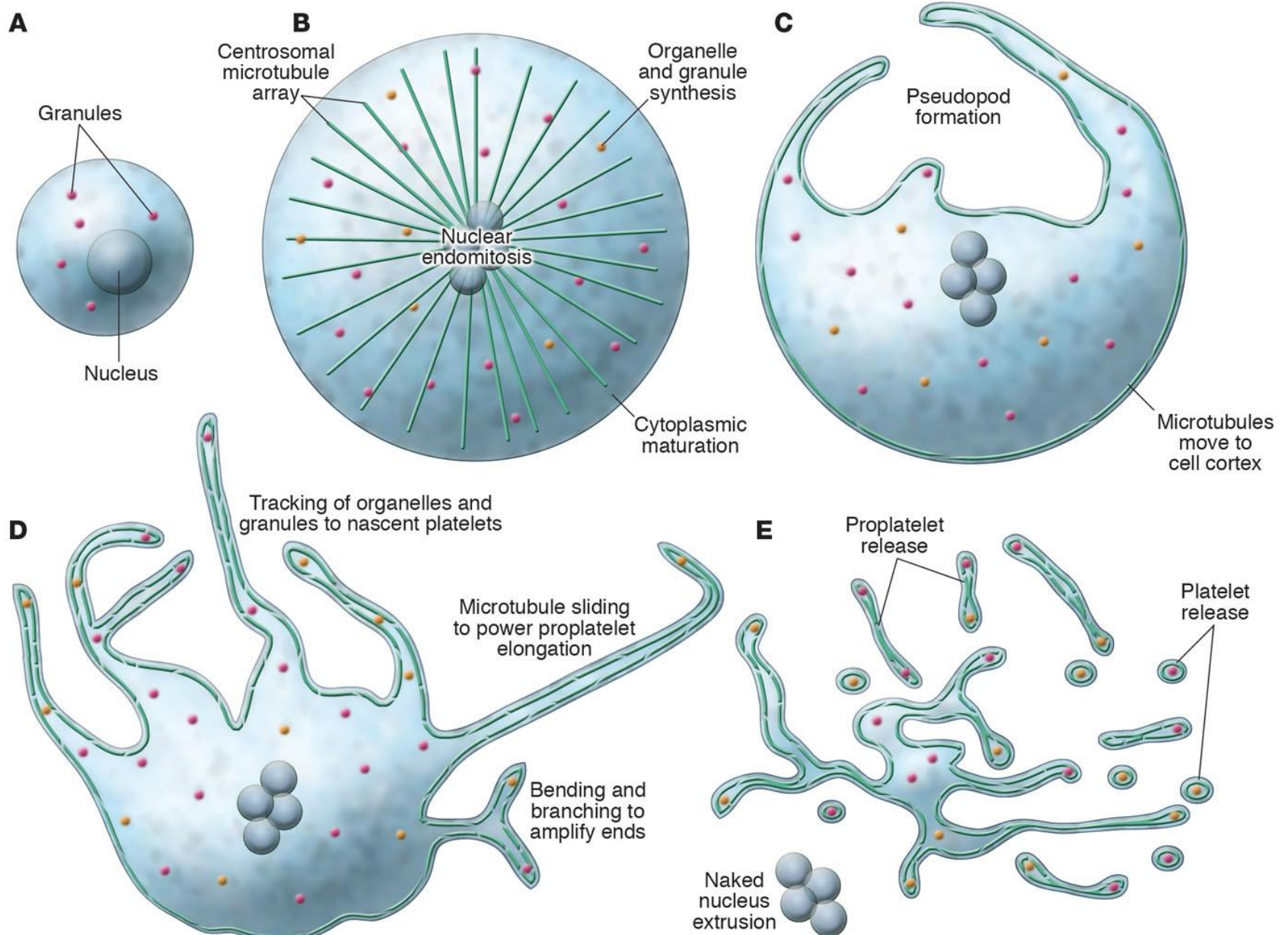
Cytoskeleton powers platelet production



GFP-tubulin

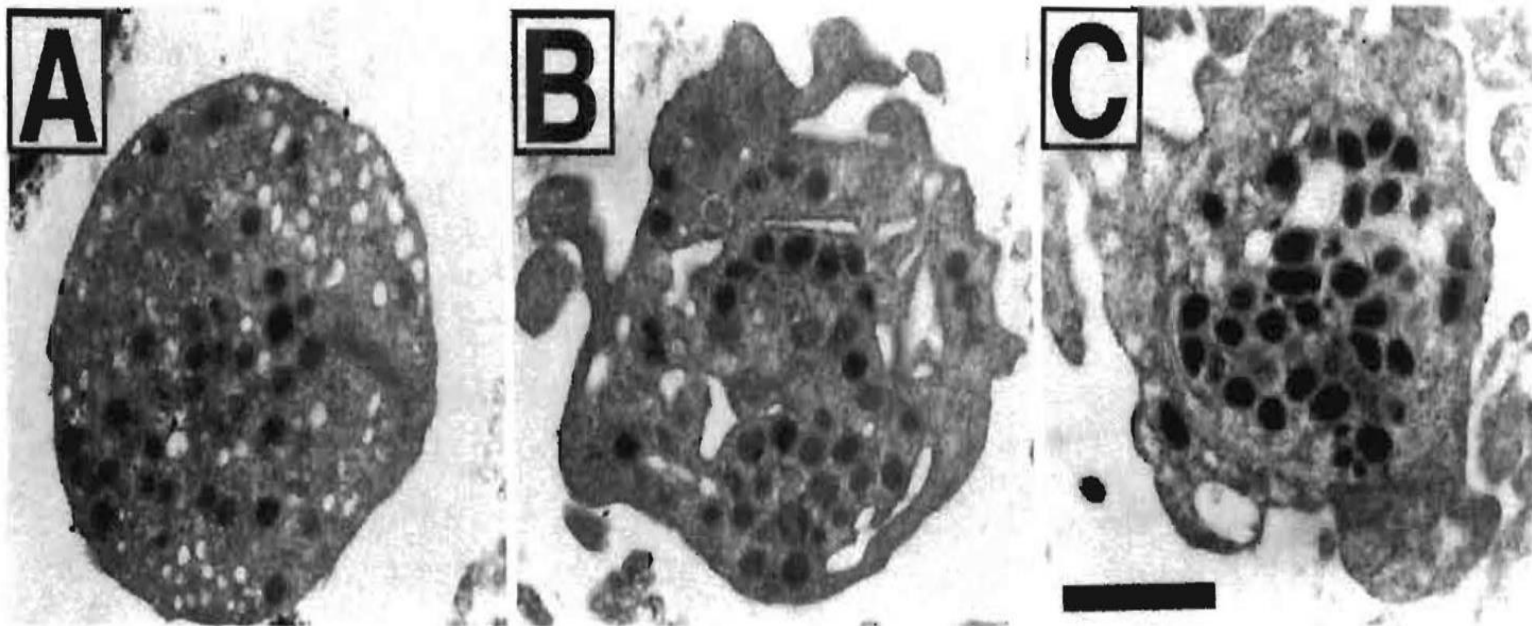
Italiano et al. JTH Supp 1:18-23

Model of Platelet Production



Megakaryocyte Cultures Provide a Source for In vitro Production of Platelets

Platelets Generated In Vitro From Proplatelet-Displaying Human Megakaryocytes Are Functional

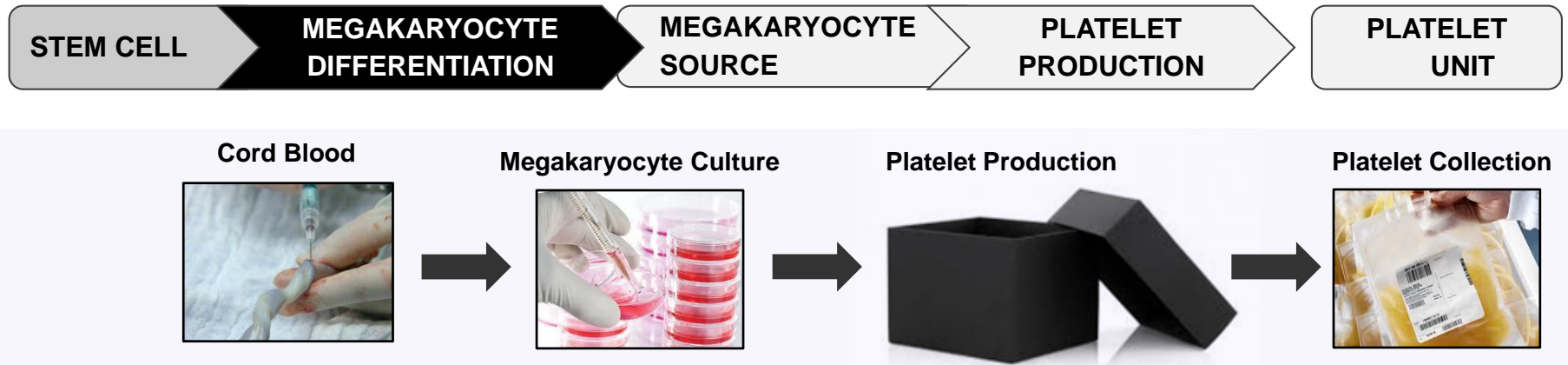


▪ Culture
Blood

Culture

Choi et al. Blood. 1995

Strategy for Producing In Vitro Platelets



BARRIERS - While several groups have grown human megakaryocytes from a variety of sources, only a small percentage (10-15%) make platelets (Lambert et al., Blood 121:3319)

Bioreactor Design

Matsunaga et al. 2006 – 3 Phase co-culture system

Sullenbarger et al. 2009 – 3D modular perfusion system

Lasky et al. 2011- Continuous flow medium, oxygen

Pallotta et al. 2011 – Silk-based marrow system

DiBuduo et al. 2015 – Silk based, sponge, growth factors

Nakagawa et al. 2013 – Two differential flows

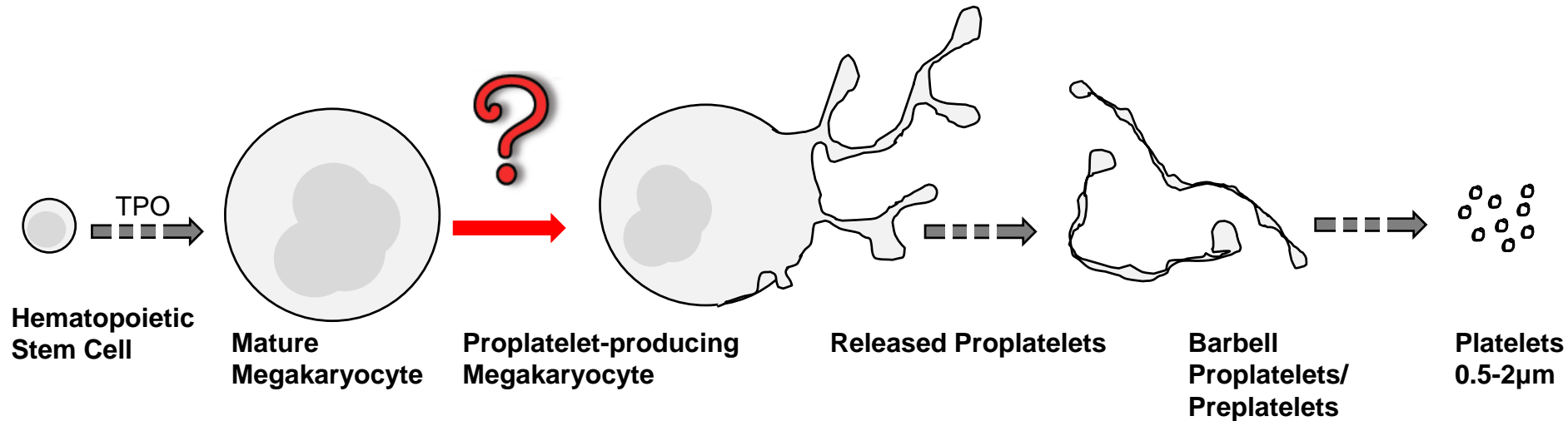
Thon et al. 2014 – Bioreactor on-a-chip

Blin et al. 2016 – Microfluidics, vWF coated micropillars

Avanzi et al. 2016 – Nanofiber mem, bidirectional flow

Guan et al. 2016 – 2 liter bottle turning device

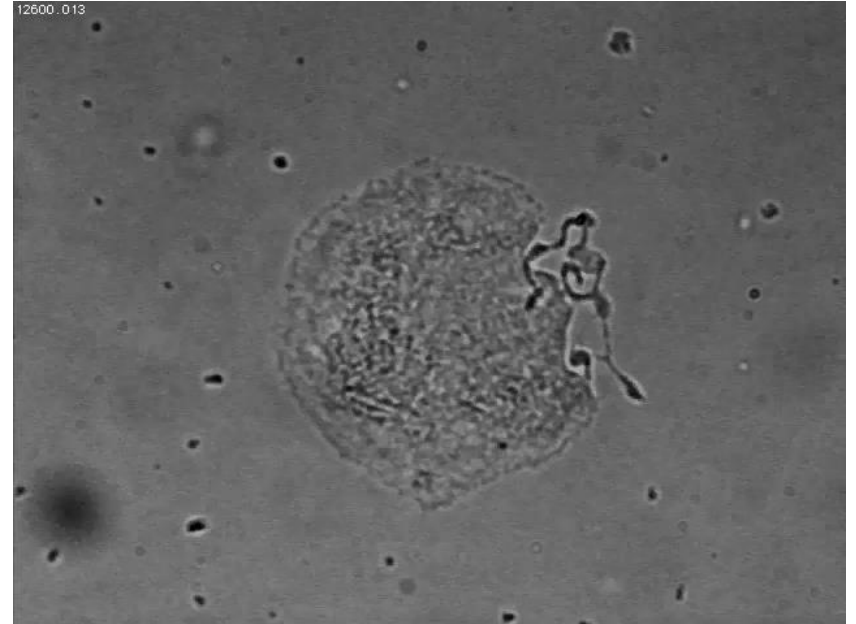
Little is Known About What Triggers Proplatelet Formation



Uncovering what stimulates proplatelet formation will lead to:

- Therapeutics that initiate auto-transfusion of platelets from existing bone marrow MKs
- Ability to control platelet formation in vitro

What Triggers Proplatelet Production?



1. Internal
2. External

1. Proplatelet-promoting factor (PPF) is an internal, cytosolic protein(s) that regulates proplatelet initiation.
2. Mimicking physiology (shear) triggers platelet production.
3. We have developed a scalable process to generate in vitro platelets from clinical grade iPS cells.

1. Are there internal, cytosolic factors that trigger platelet production?

Hypothesis: Mature megakaryocytes
synthesize a cytosolic factor that
triggers proplatelet initiation

Discovery of Mitosis Promoting Factor

Mitosis in tissue-cultured lung cell of a newt, *Traicha granulosa*, recorded with the new Pol-Scope.

Cytoplasmic Control of Nuclear Behavior during Meiotic Maturation of Frog Oocytes

Yoshio Masui and Clement L. Markert

Yale University, New Haven, CT

Journal of Experimental Zoology, 1971, Volume 177, Pages 129-146

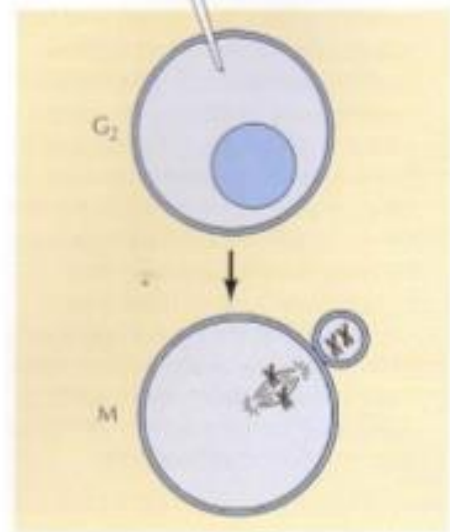
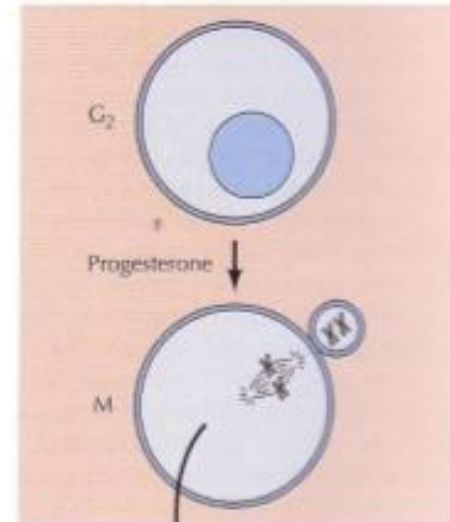
Further experiments showed that MPF is not restricted to oocytes and appeared to act as a general regulator of the transition from G₂ to M.



Yoshio Masui



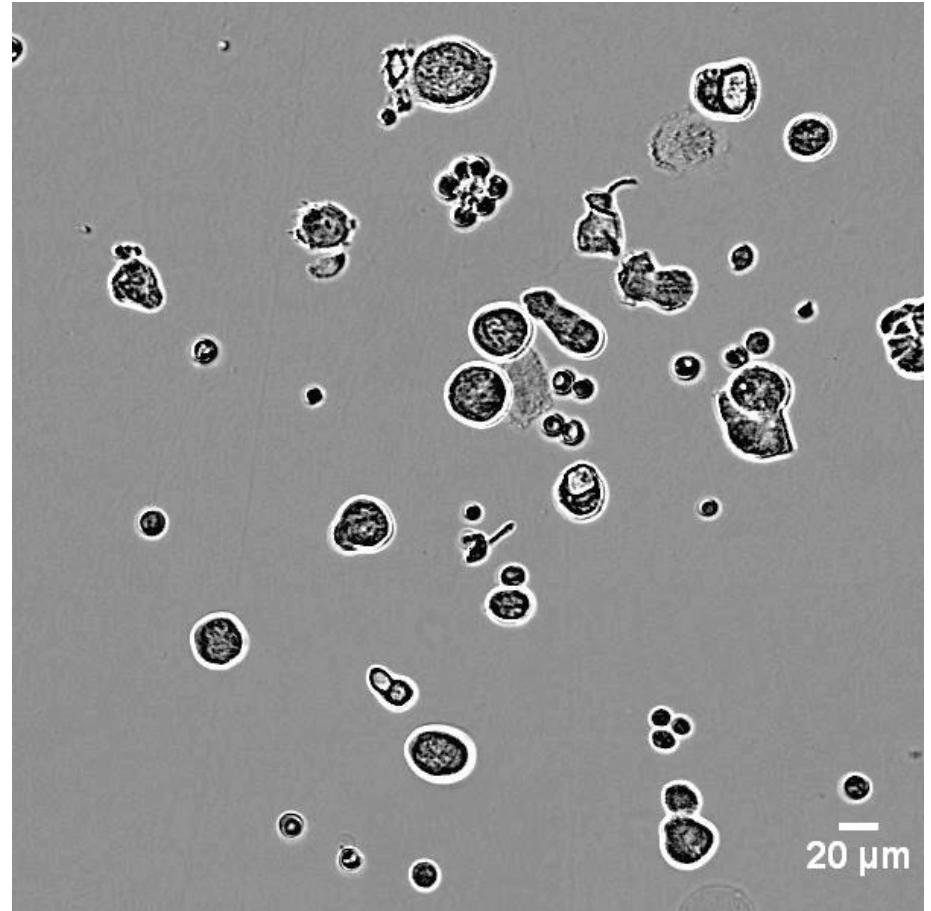
Clement Markert



Do MKs contain a cytosolic factor that promotes proplatelet production?

What would happen if we injected cytosol from a proplatelet-producing megakaryocyte into a round megakaryocyte?

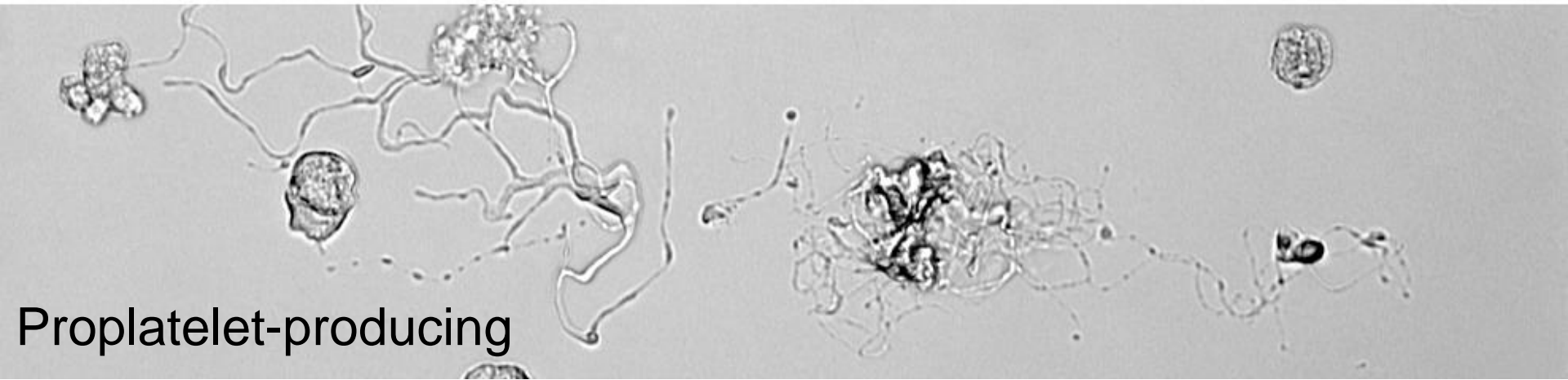
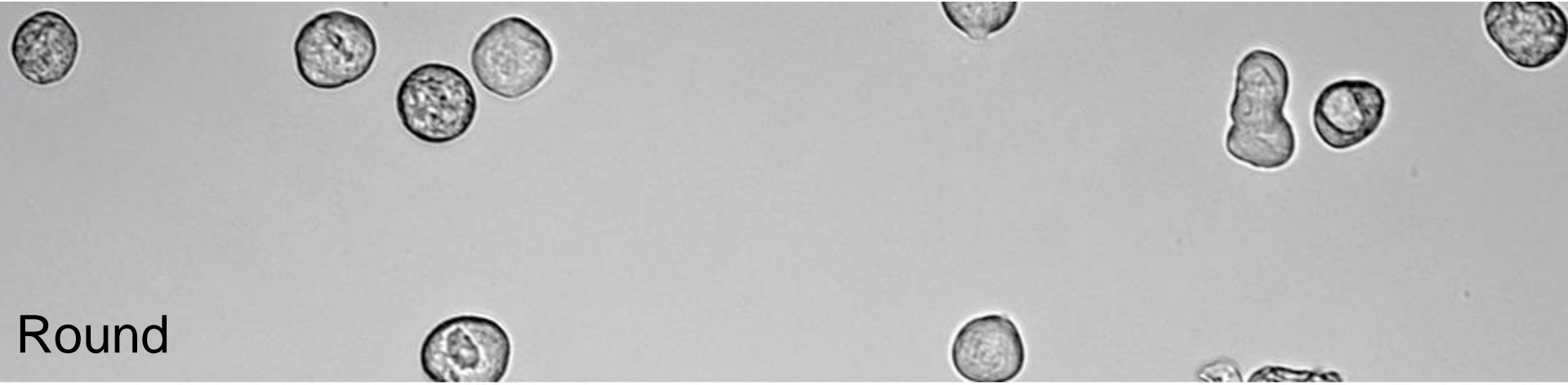
Would this trigger proplatelet initiation?



Microinjection of Megakaryocytes

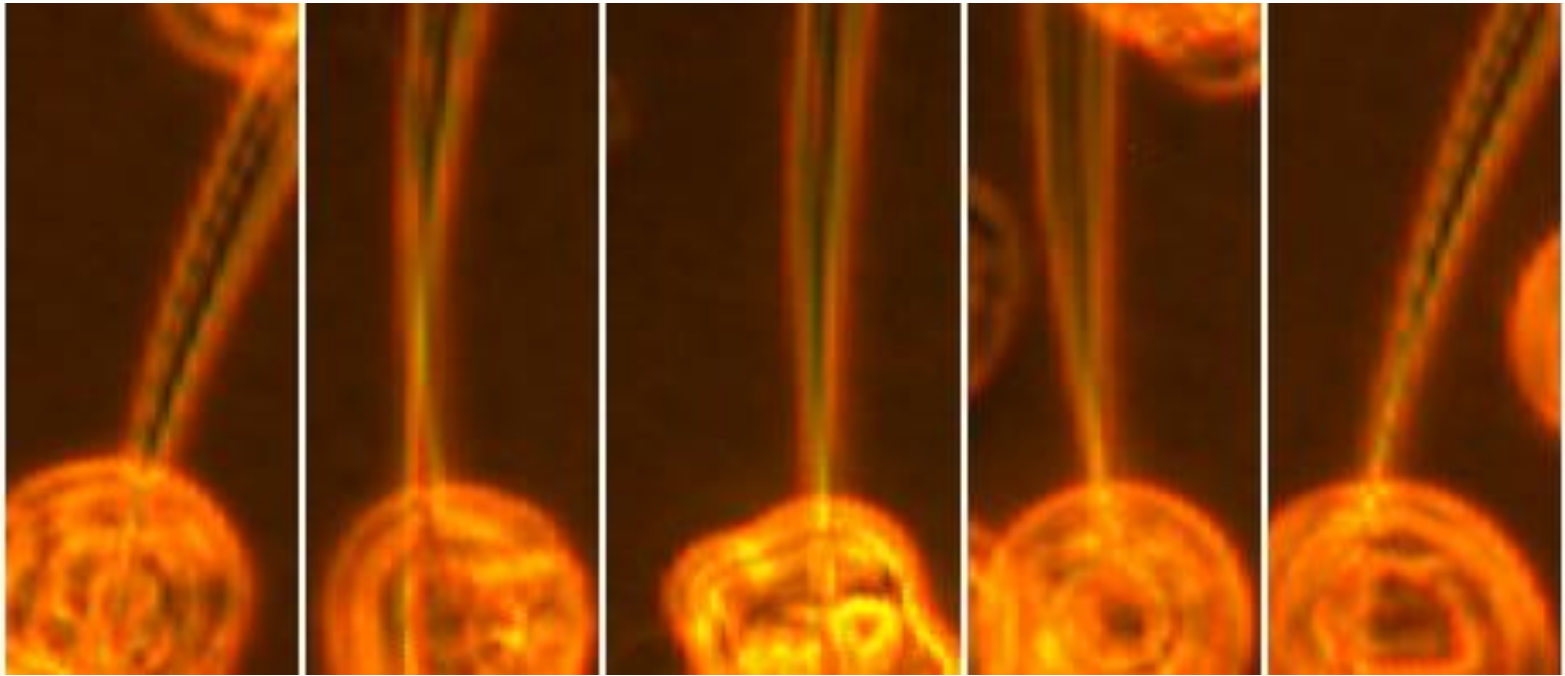


Separation of Megakaryocyte fractions

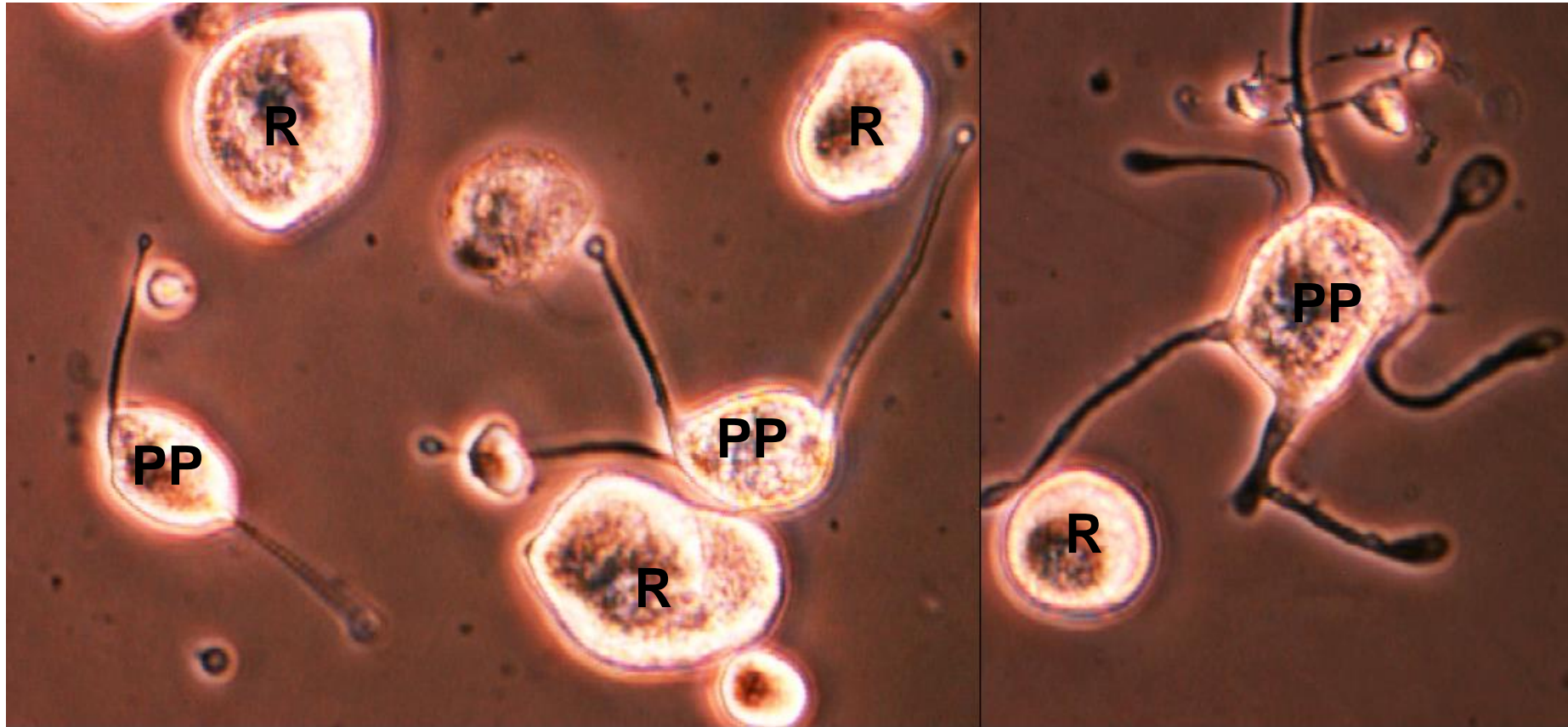


Thon et al. 2010 JCB 191:861

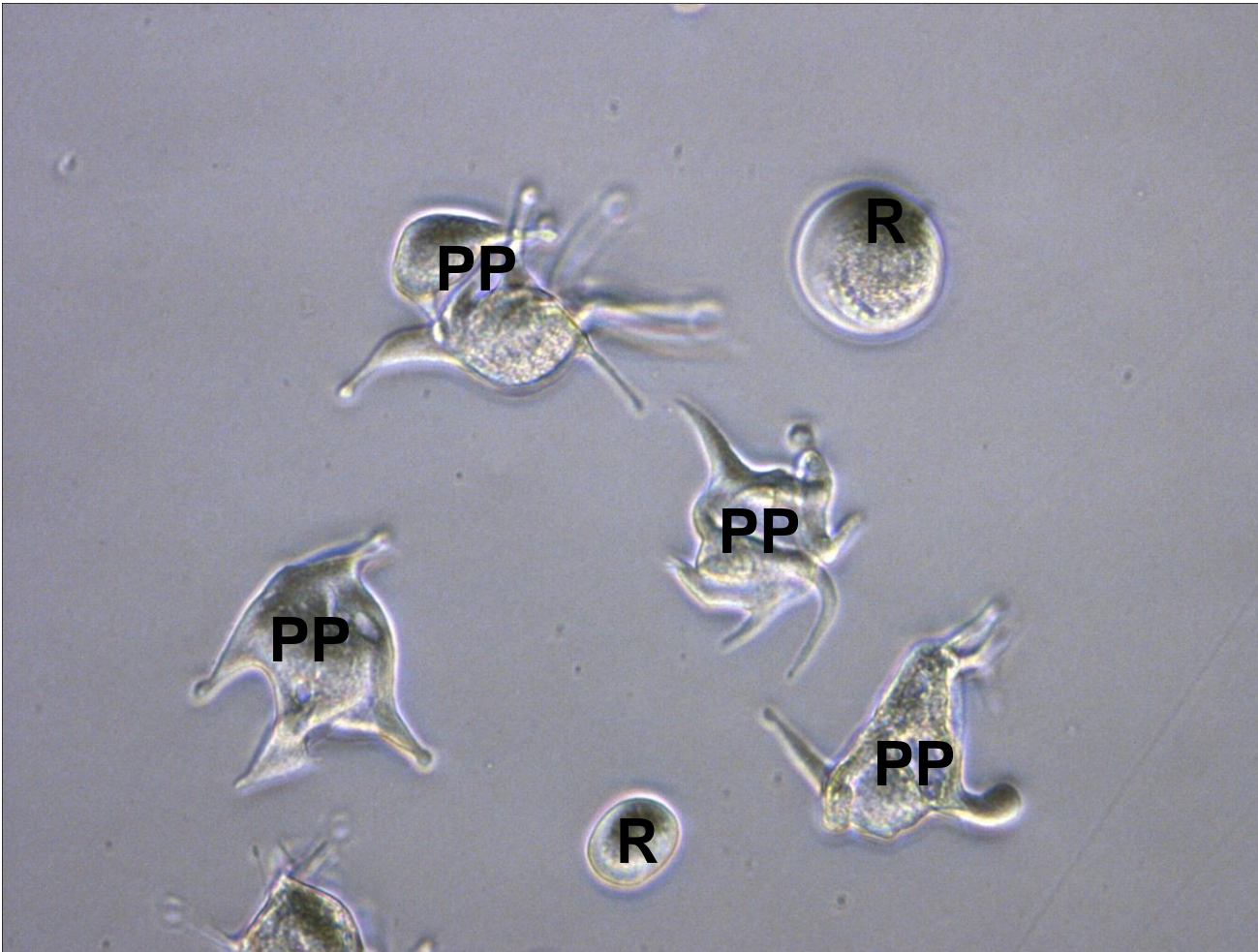
Megakaryocyte Microinjection



Injection of cytosol from proplatelet-producing MKs triggers platelet production



Injection of cytosol from PP-producing MKs triggers platelet production

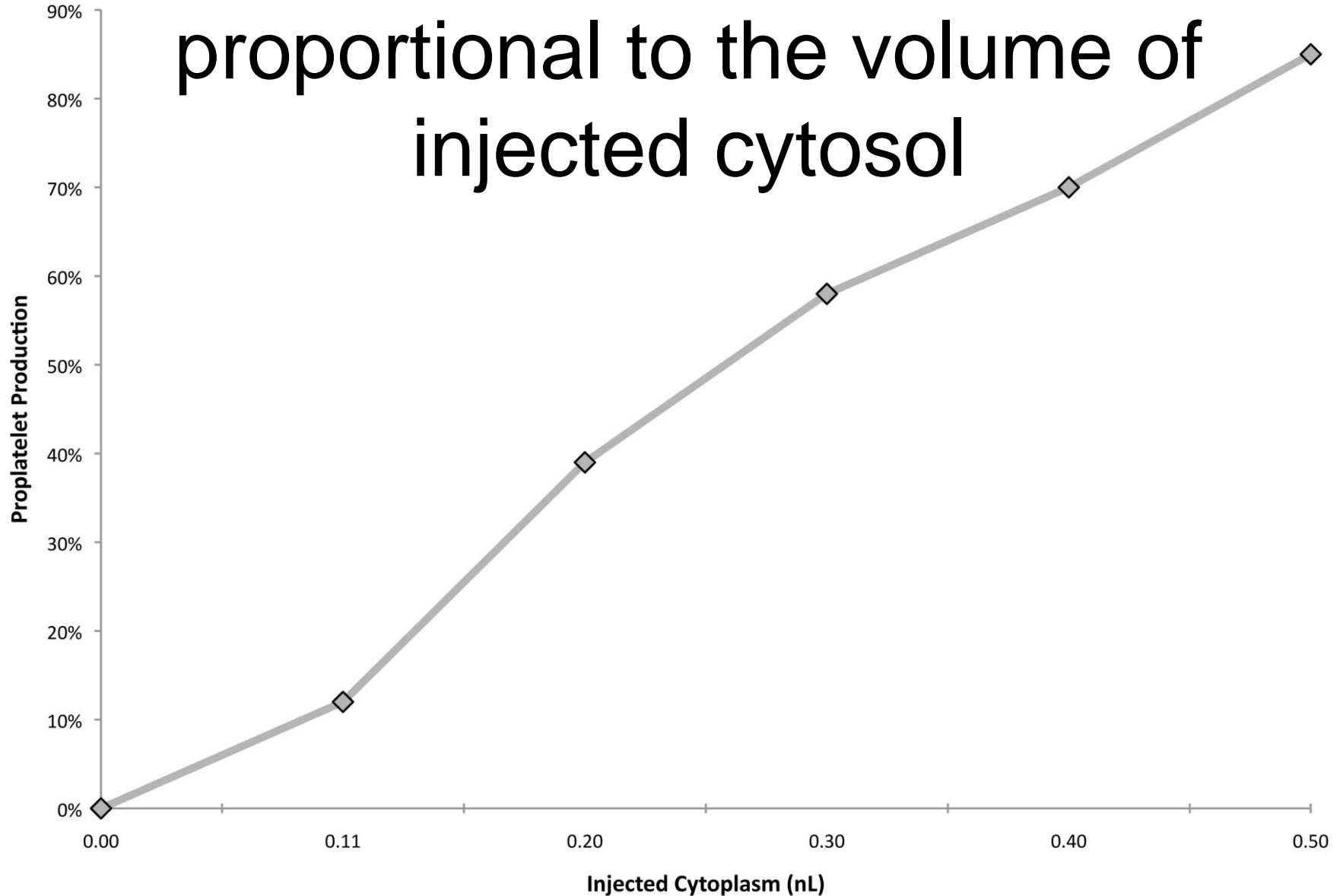


Proplatelet initiation

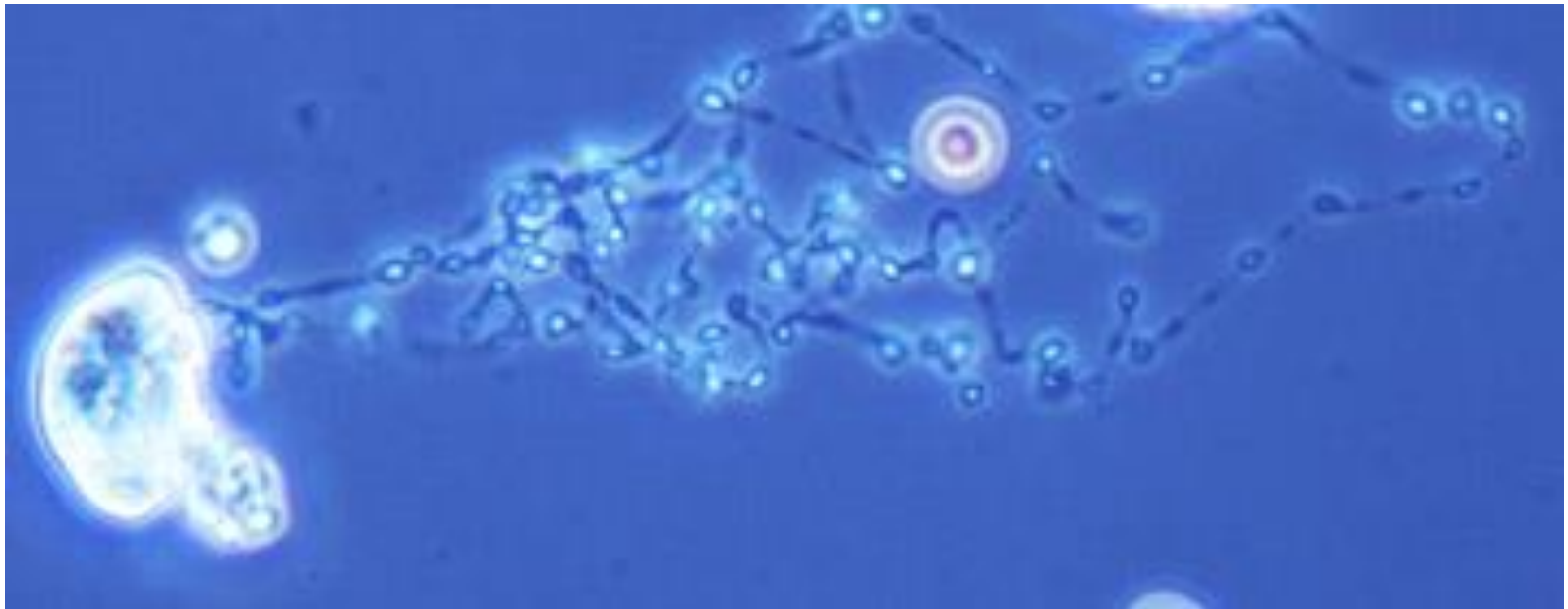
Rest cytosol- 7 %

PP cytosol - 83%

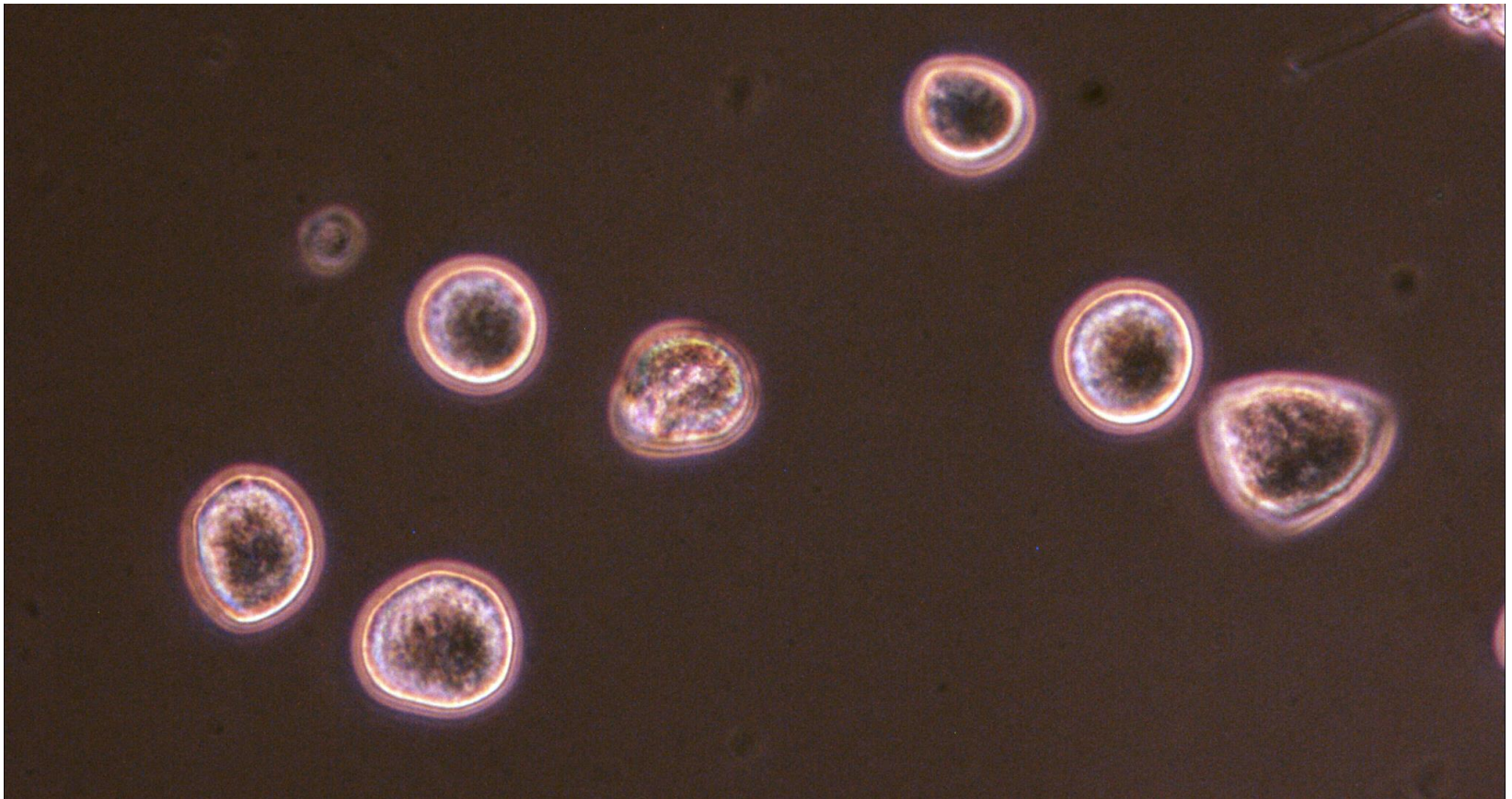
The frequency of PP production is proportional to the volume of injected cytosol



Microinjected megakaryocytes
continue to form
highly developed proplatelets



Sham-injected cells do not form proplatelets

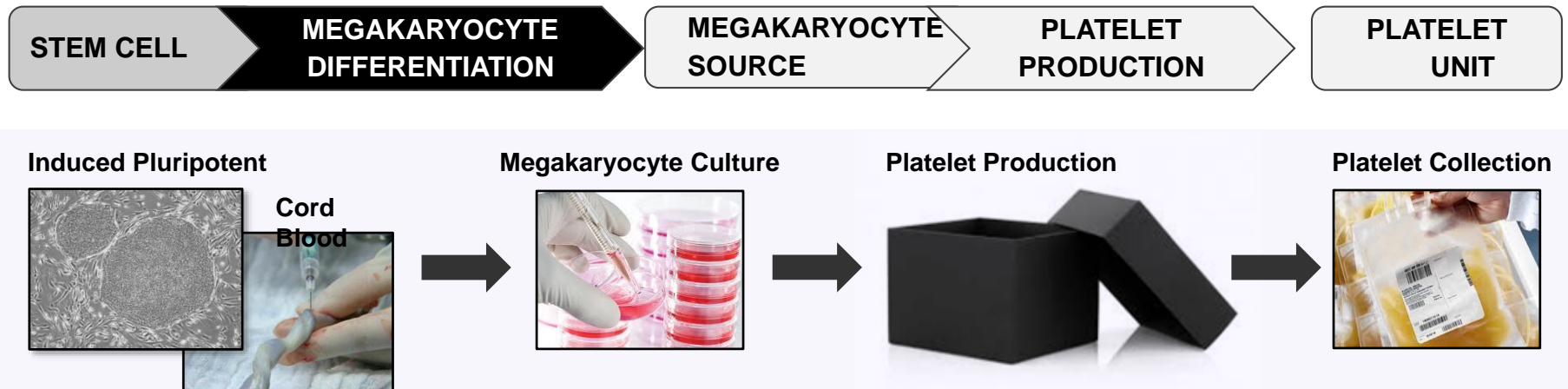


Proplatelet-promoting factor

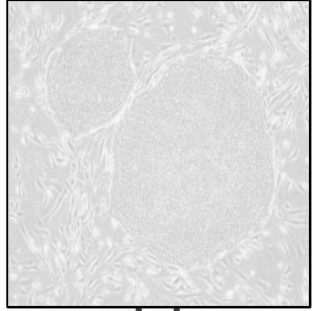
Table 1. Characterization of proplatelet-promoting factor (PPF)

Treatment	Stabile	Labile
Nucleases	Ribonuclease, Deoxyribonuclease	
Temperature	4°C for 3 weeks	37°C, 25°C for 5 hrs
Protease Digestion		Proteinase K, trypsin
Detergents	Triton X-100, NP40	SDS
UV radiation	254 nm	
Centrifugation	High-speed to remove membranes	
Molecular Weight	> 100 KDa	< 100 KDa
Kinase inhibitors	staurosporine	
Phosphatase inhibitors		NaFl, NaOrthovanadate, Okadaic acid

2. How do we mimick physiology to trigger platelet production? and generate in vitro platelets?



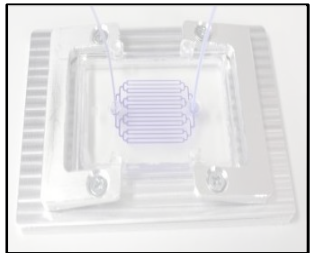
In Vitro Platelet Production



STEM CELL

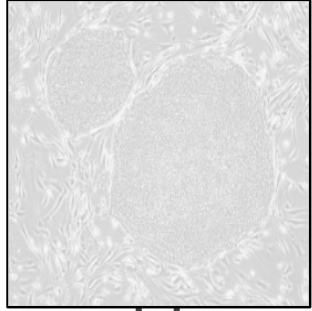


MEGAKARYOCYTE

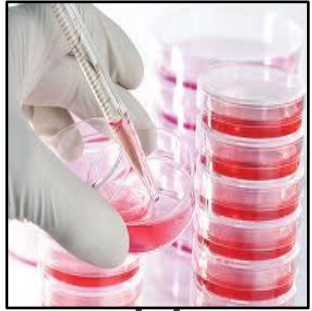


PLATELET

In Vitro Platelet Production

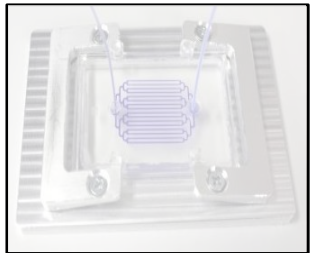


STEM CELL



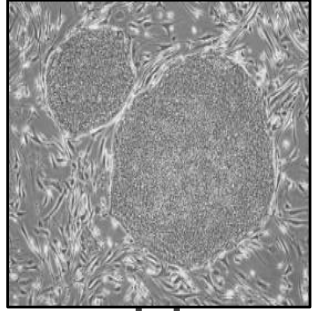
MEGAKARYOCYTE

1994 discovery of thrombopoietin (TPO) led to generation of 1st human platelets by Amgen (via cell culture).



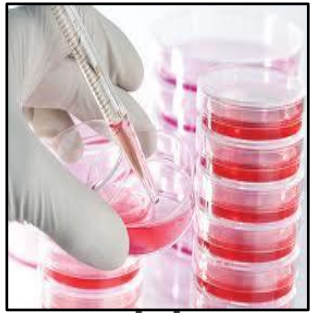
PLATELET

In Vitro Platelet Production



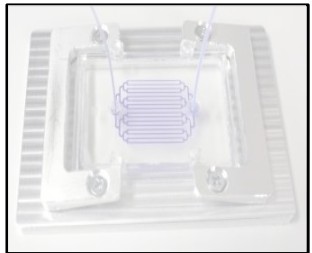
STEM CELL

2006: Invention of human induced pluripotent stem cells (iPSC) allows for genetically consistent and scalable stem cells.



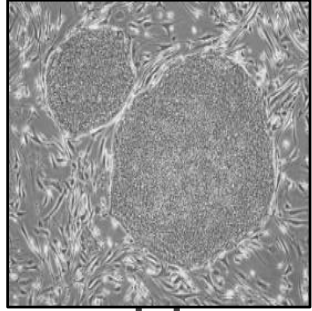
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PLATELET

In Vitro Platelet Production



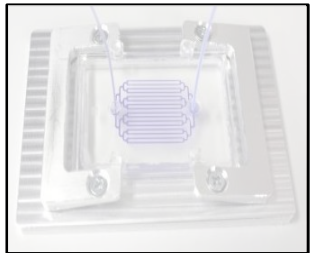
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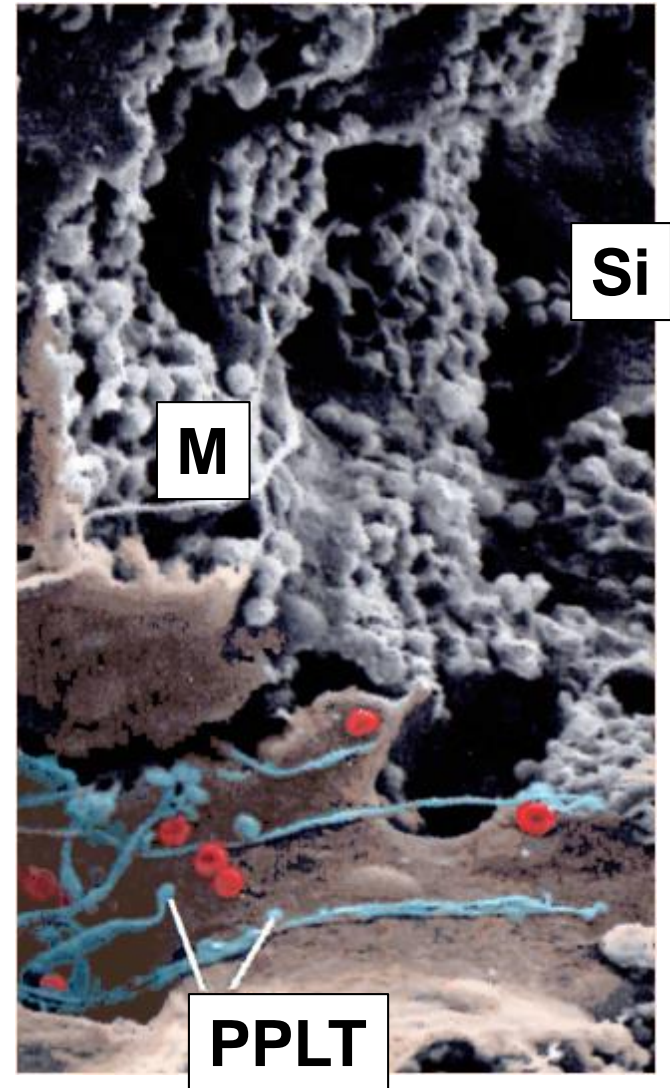
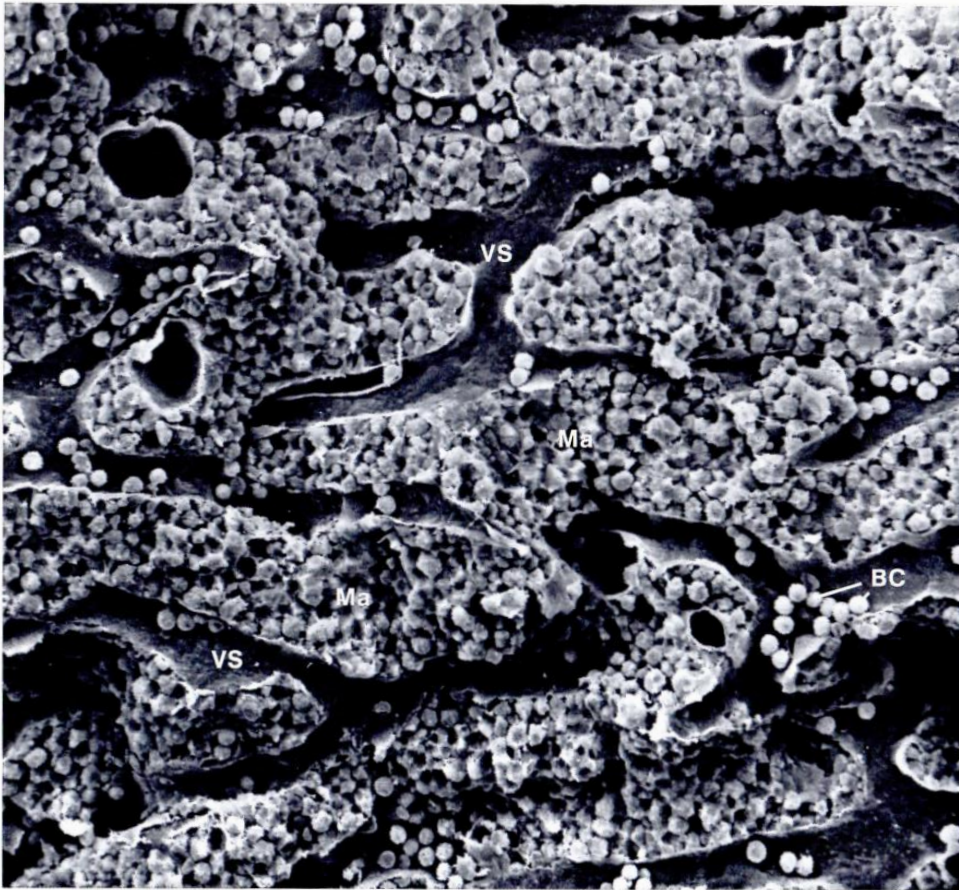
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PLATELET

Hypothesis: Mimicking the native, physiological bone marrow vascular microenvironment will stimulate proplatelet production

Bone Marrow Microenvironment



Proplatelet production *in vivo*

Tissue and organs: a text atlas of scanning electron microscopy.

1975

Native Platelet Production

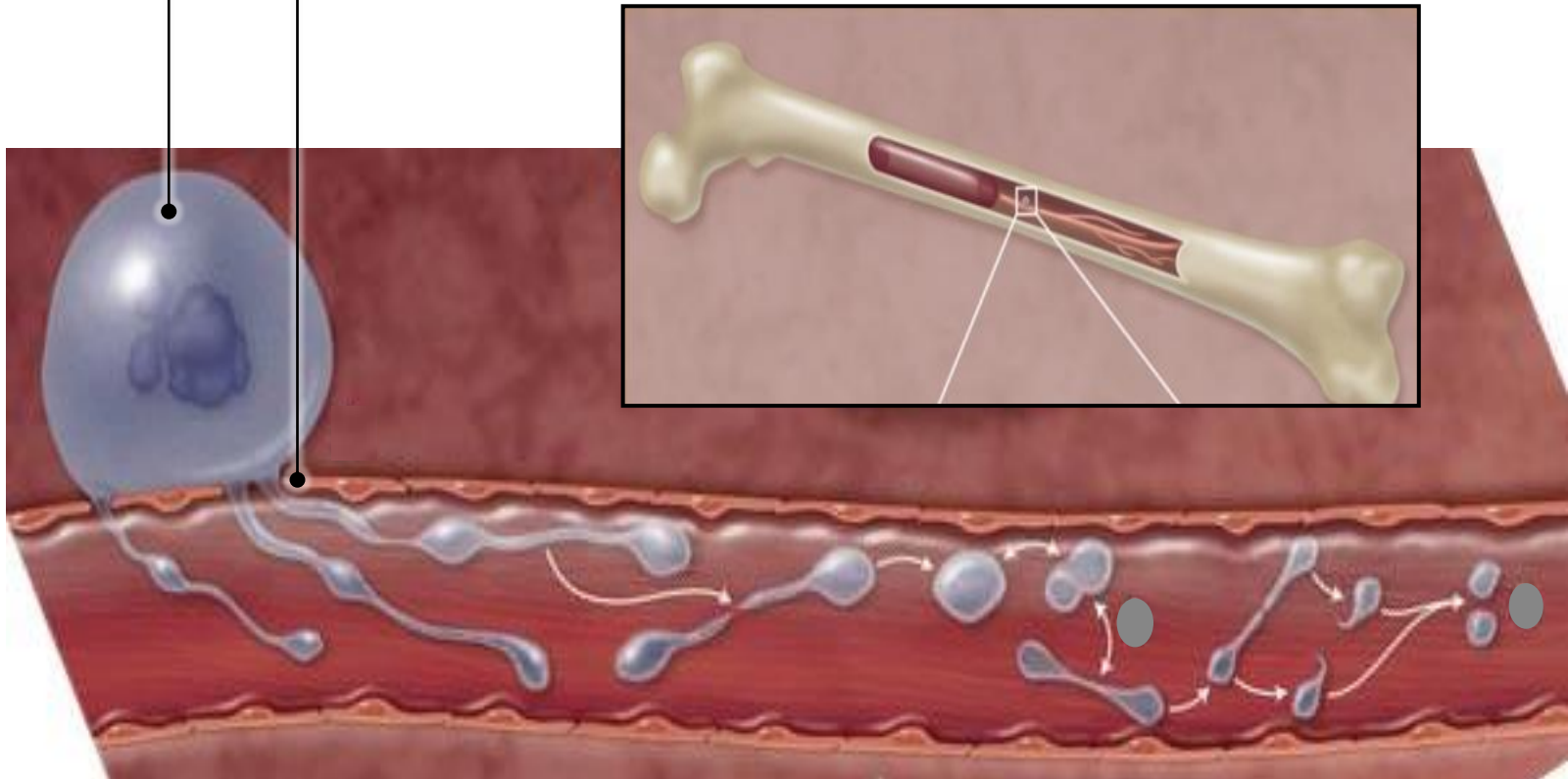
Human platelets are produced by megakaryocytes in the bone marrow

1. Megakaryocytes migrate to endothelial cells that line blood vessels

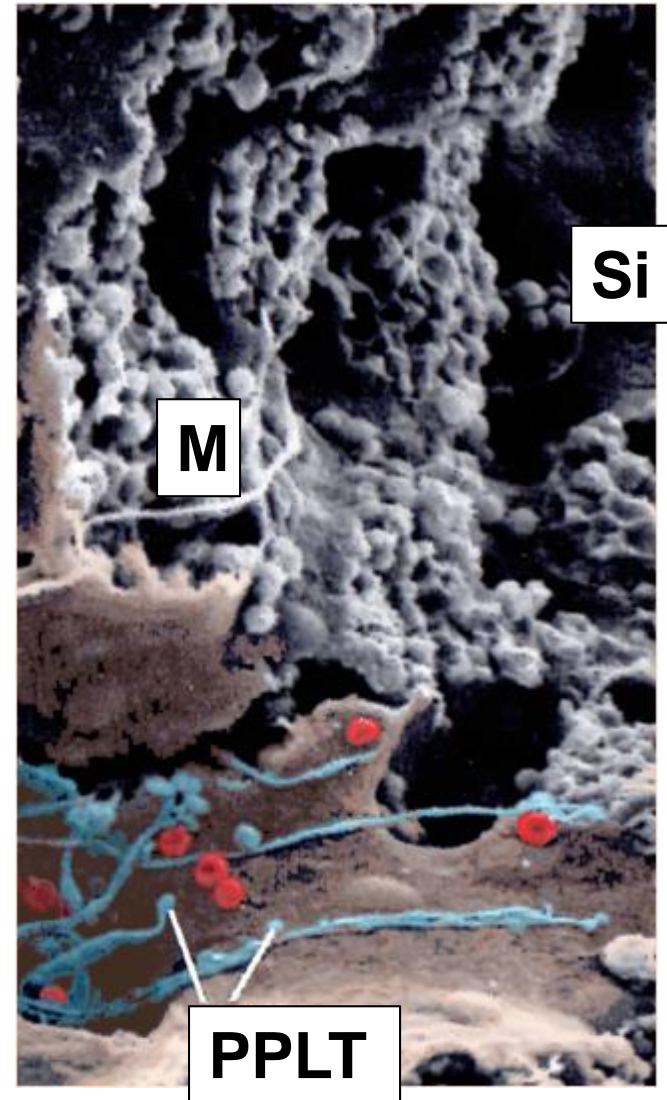
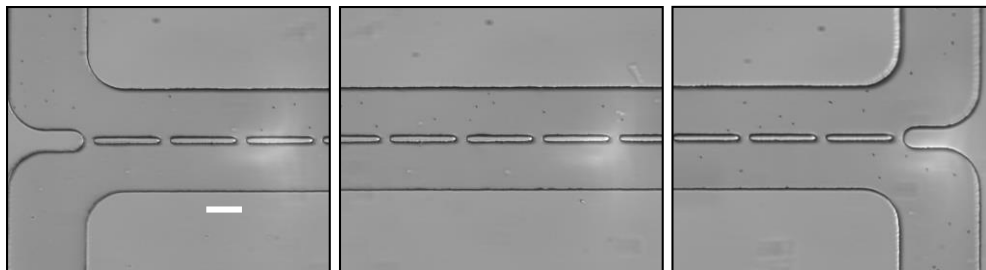
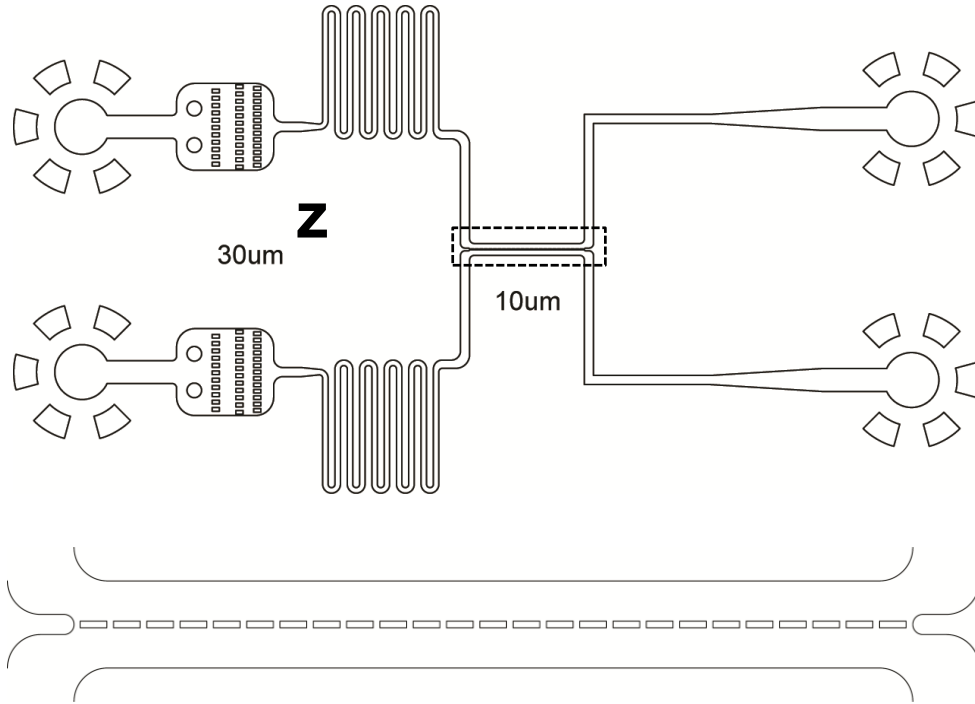
2. Megakaryocytes collect on a perforated barrier that mimics the endothelium

3. Proplatelets are extended as megakaryocytes “filter” through gaps/junctions in endothelium

4. Proplatelets release platelets into blood vessels

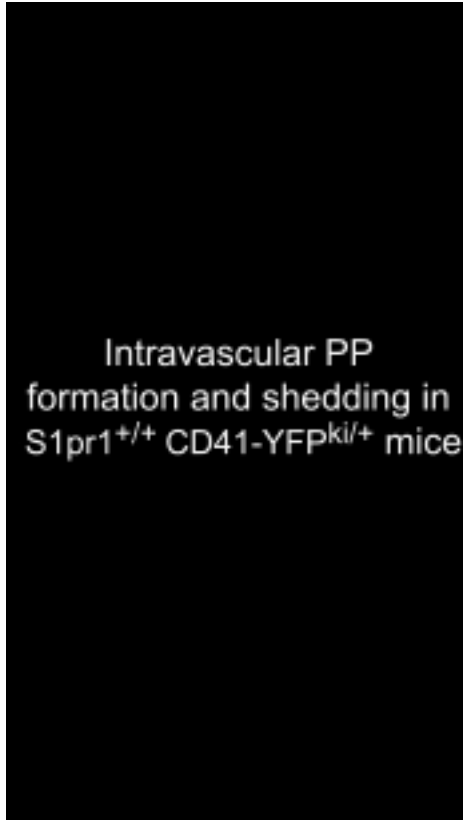


Concept and Design of Platelet Bioreactor On-A-Chip



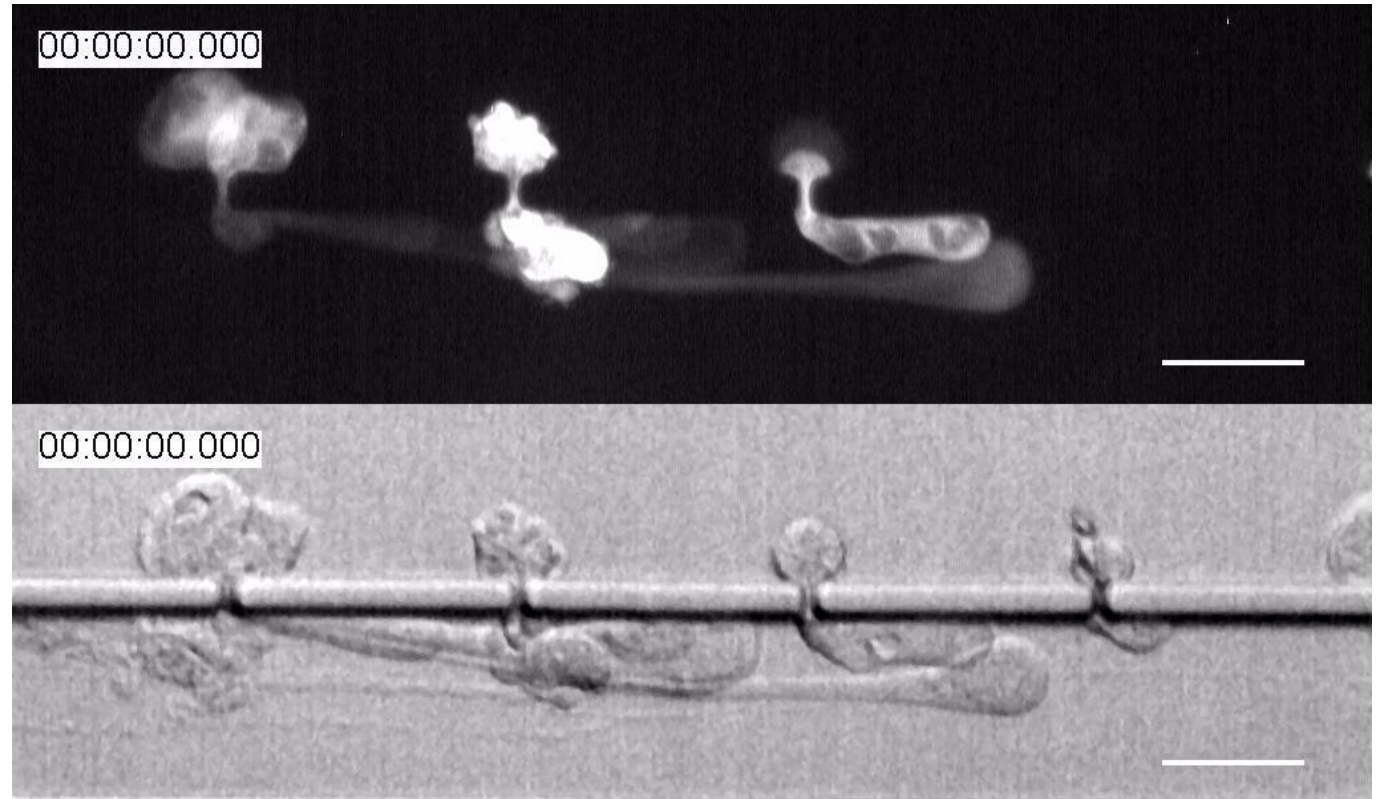
Platelet Production

In Vivo



Massberg S. 2013 J Exp Med

Bioreactor



Proplatelet Extension

0.3-1.6 $\mu\text{m}/\text{min}$ Static

6-24 $\mu\text{m}/\text{min}$ (Intravital)

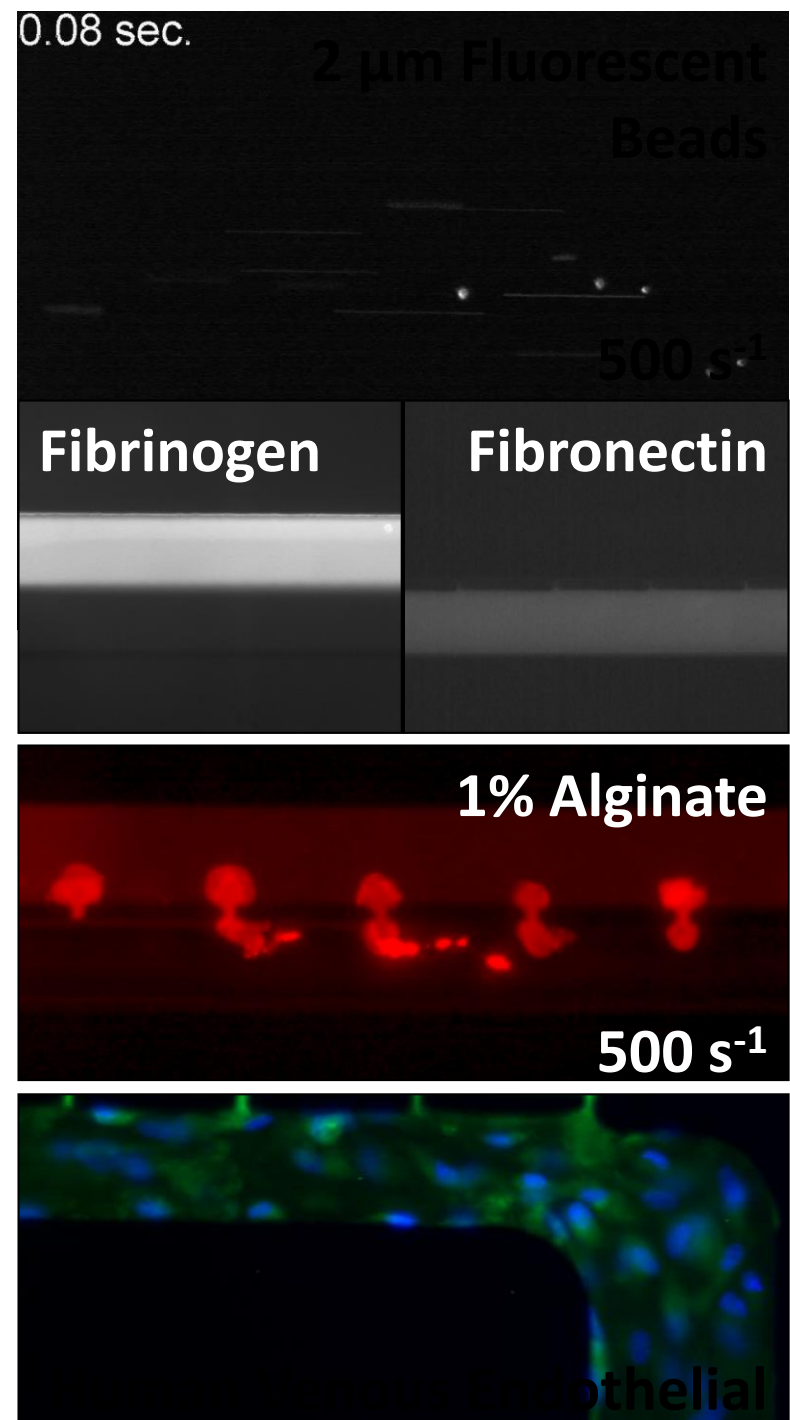
Recapitulating Physiology

Physiological Shear Rates
 $500\text{--}2500\text{ s}^{-1}$

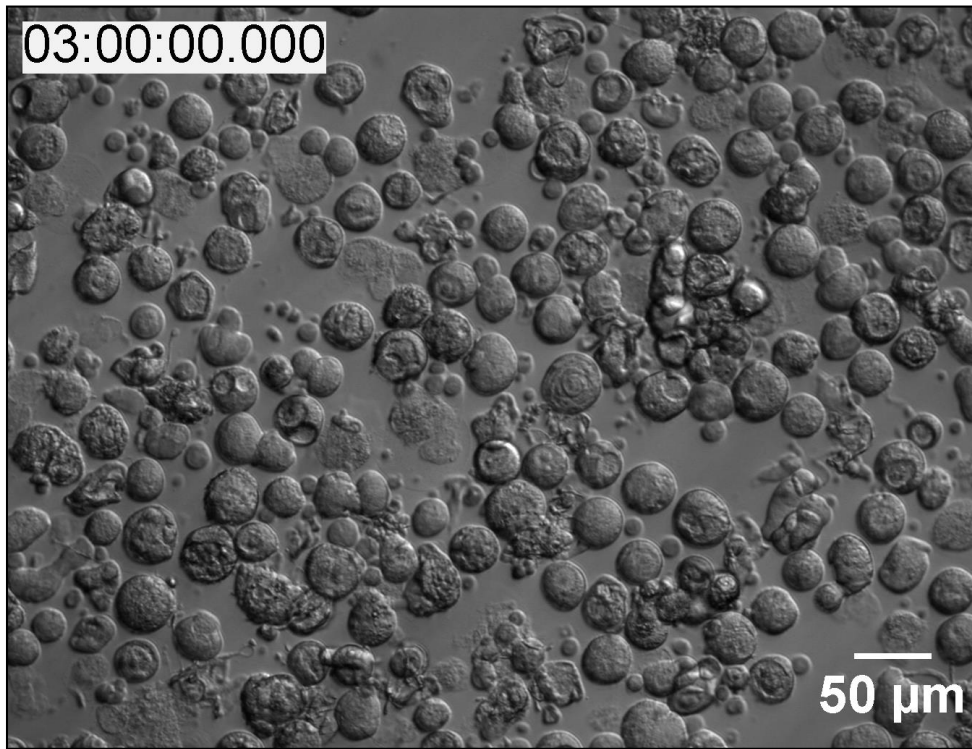
Extracellular Matrix
Composition
Fibrinogen, Fibronectin,
Laminin,
Type IV Collagen

Extracellular Matrix Stiffness
 $200\text{--}1000\text{ Pa}$

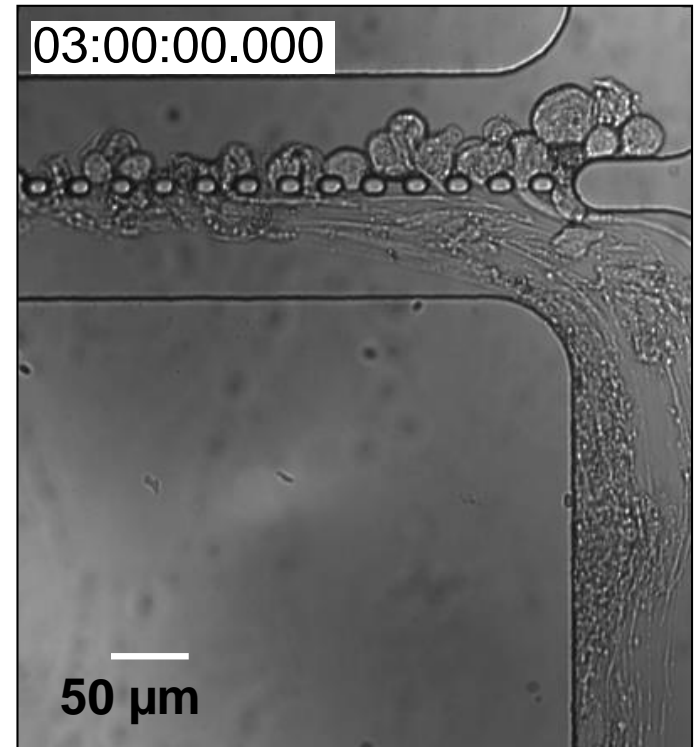
Blood Vessel Physiology
Endothelial Cell Contact



Shear triggers platelet production

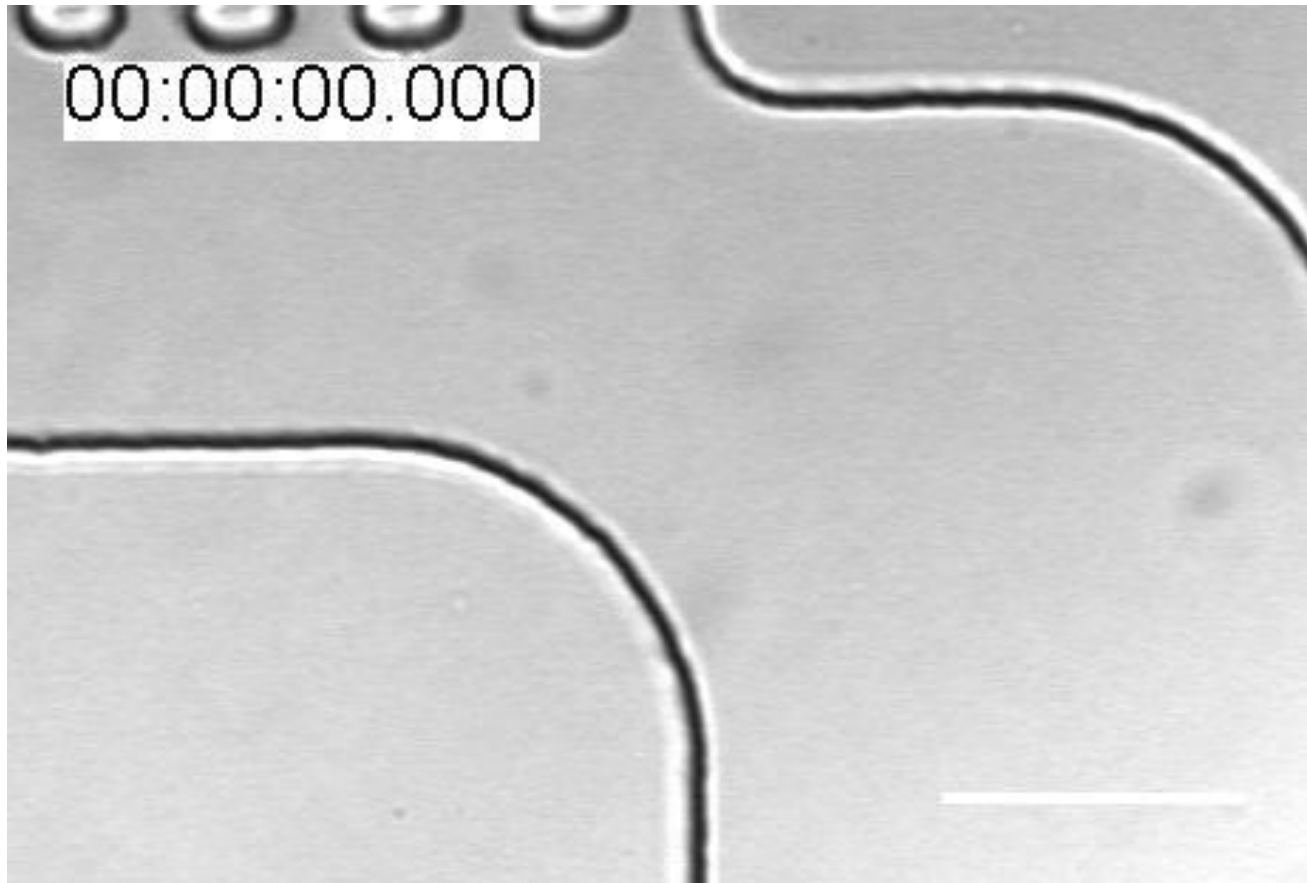


Static



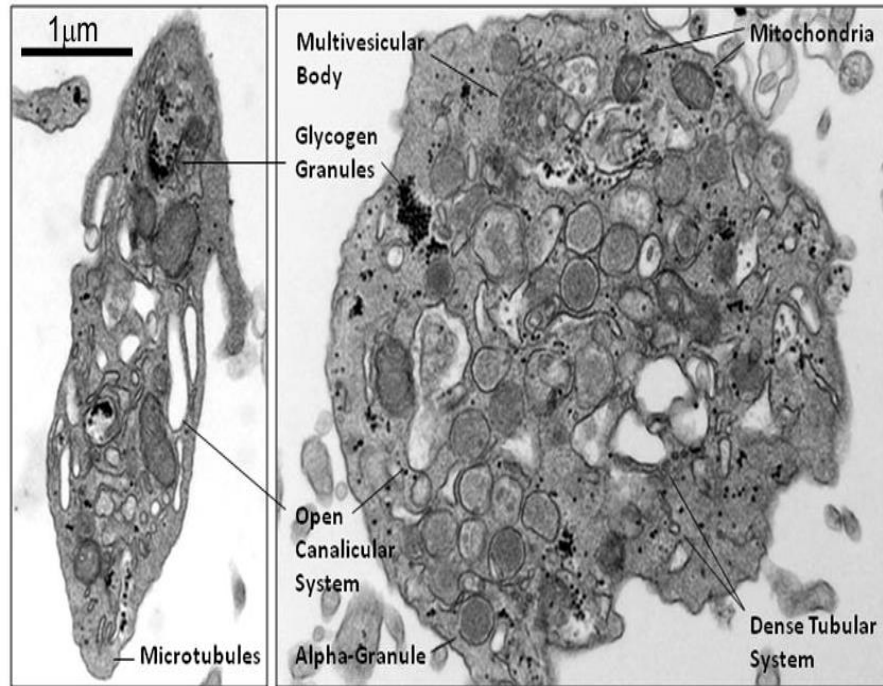
Shear: 500 s⁻¹

Shear triggers platelet production

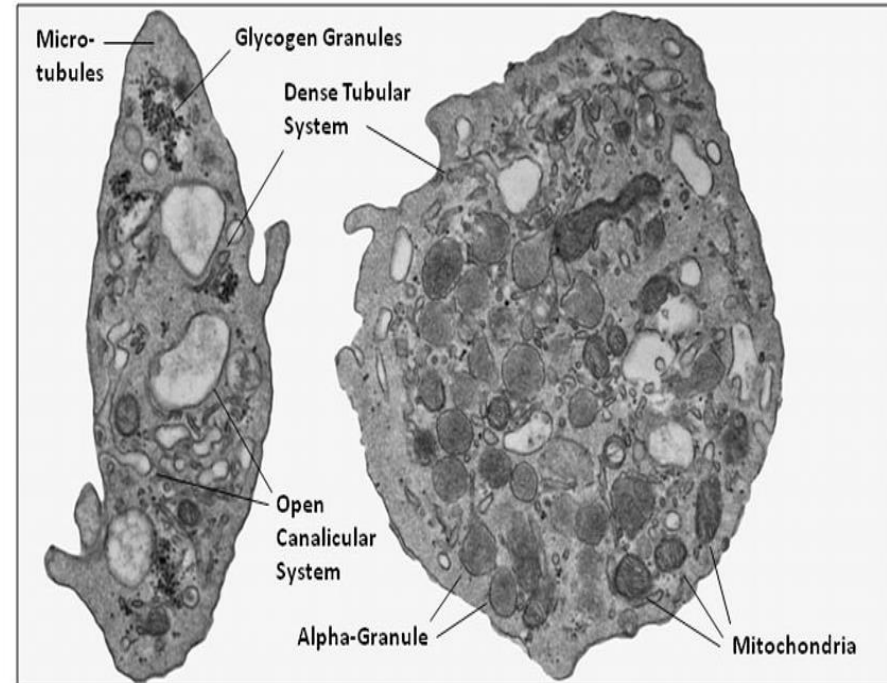


Biochip-derived platelets manifest structural properties of blood platelets

Bioreactor Platelet



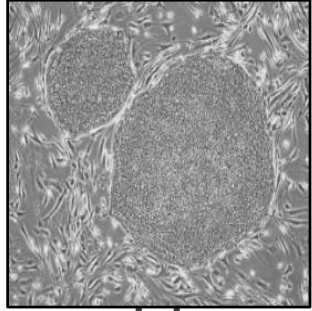
Blood Platelet



- Lu, S.J., et al. **Platelets generated from human embryonic stem cells are functional in vitro and in the microcirculation of living mice.** *Cell Res.* 2011;21:530-45
- Thon, J.N., et al. **Platelet bioreactor-on-a-chip.** *Blood.* 2014;124:1857-67
- Feng, Q., et al. **Scalable generation of universal platelets from human induced pluripotent stem cells.** *Stem Cell Reports.* 2014;11:817-31
- Bender, M.*, Thon, J.N.*, et al. **Microtubule sliding drives proplatelet elongation and is dependent on cytoplasmic dynein.** *Blood.* 2015;125:860-8

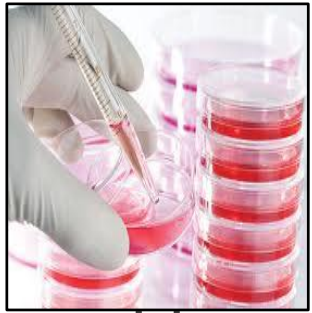
3. How do we use biologically-inspired engineering to scale and commercialize in vitro platelet production?

In Vitro Platelet Production



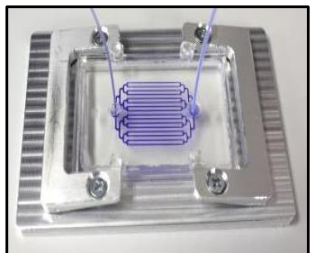
STEM CELL

2006: Invention of human induced pluripotent stem cells (iPSC) allows for genetically consistent and scalable stem cells.



MEGAKARYOCYTE

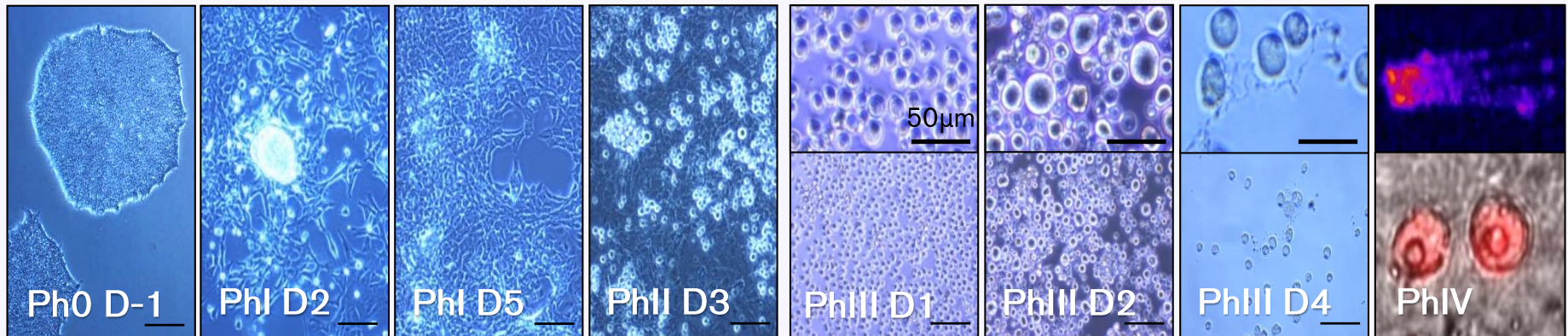
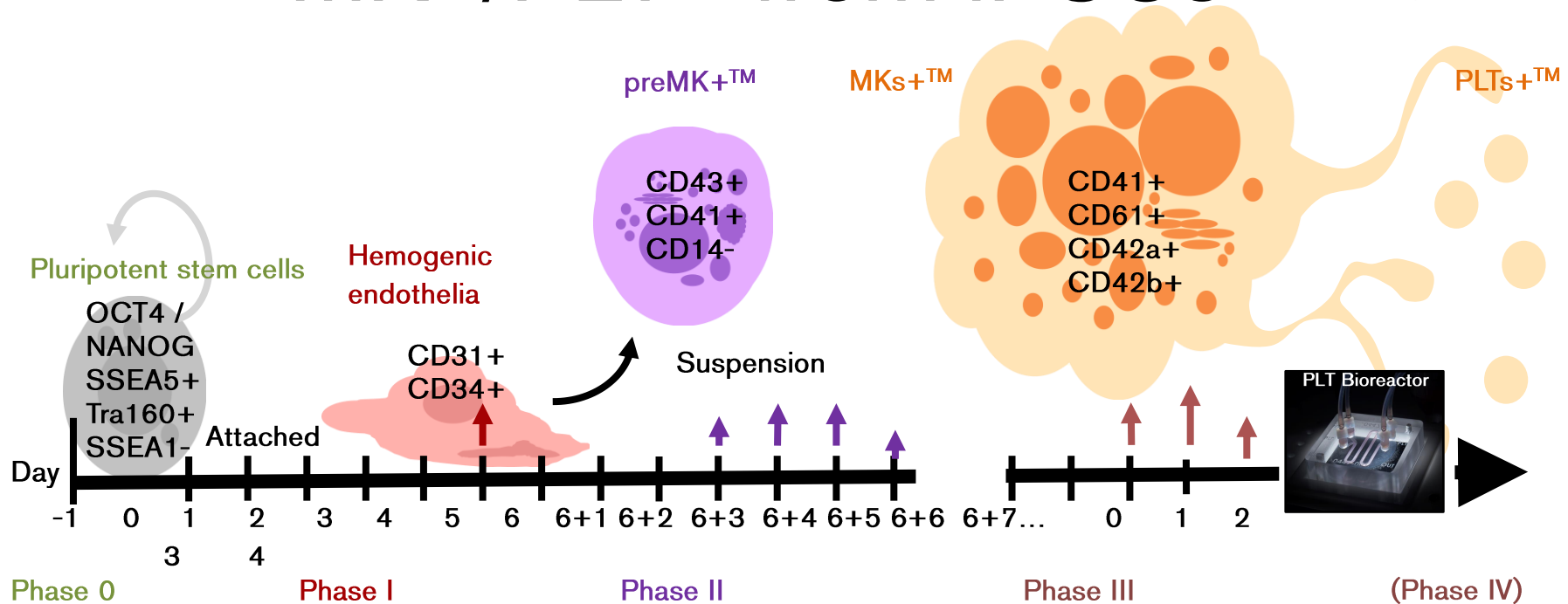
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PLATELET

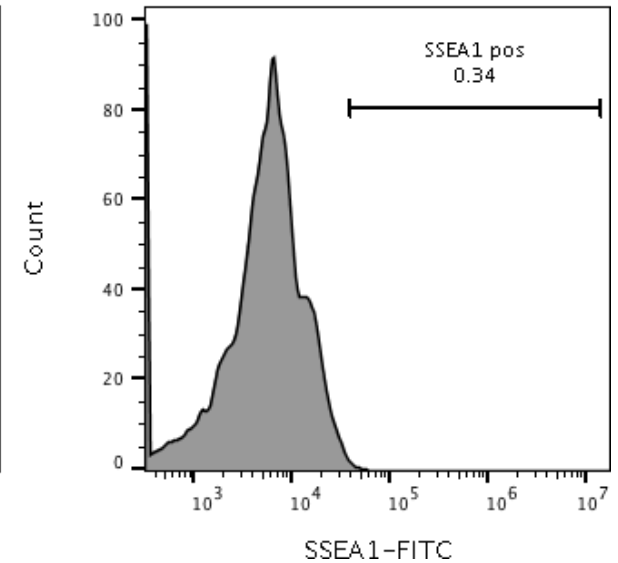
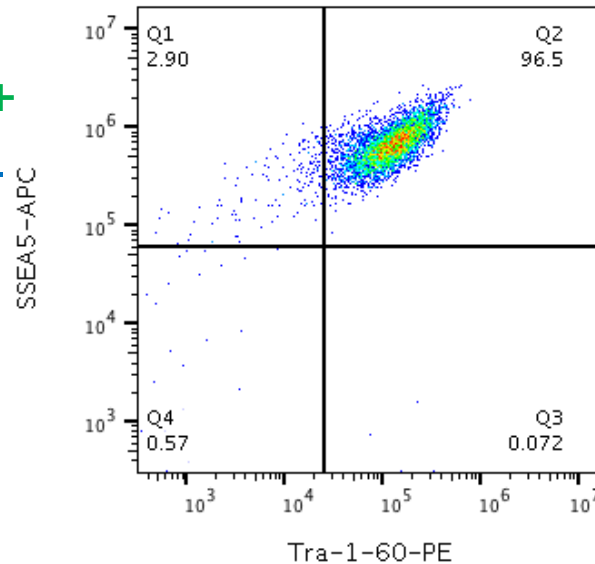
2014 development of platelet bioreactor that models bone marrow *and* allows scalable generation of platelets

Directed Differentiation of MK+/PLT+ from iPSCs



Phase 0. Undifferentiated iPSC

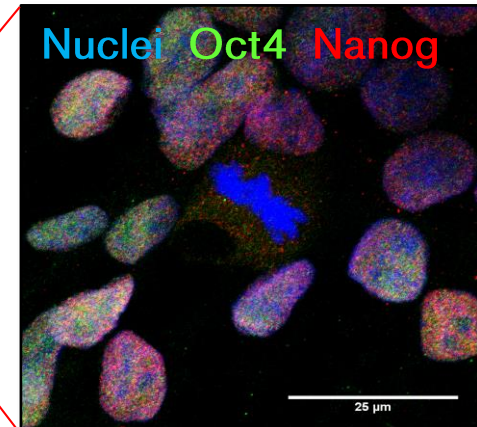
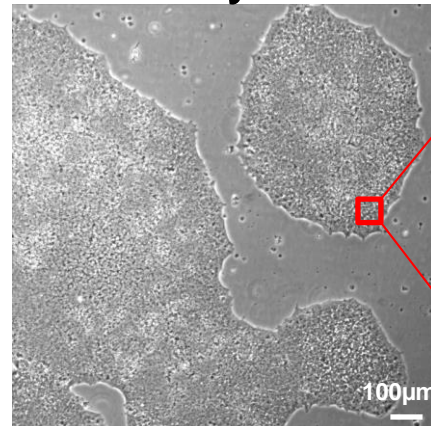
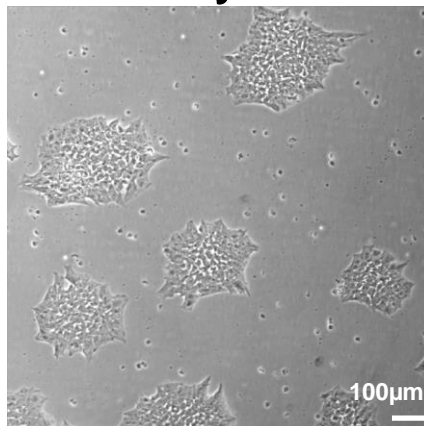
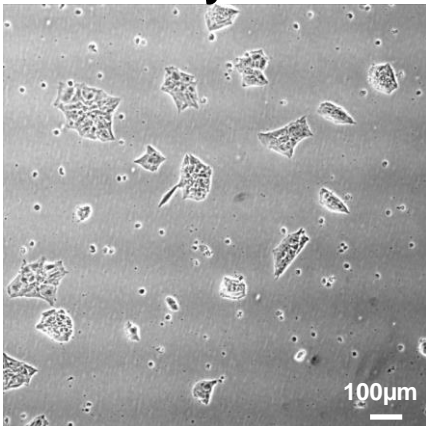
hiPSCs are Oct4+ Nanog+
SSEA5+ Tra160+ SSEA1-



Day 1

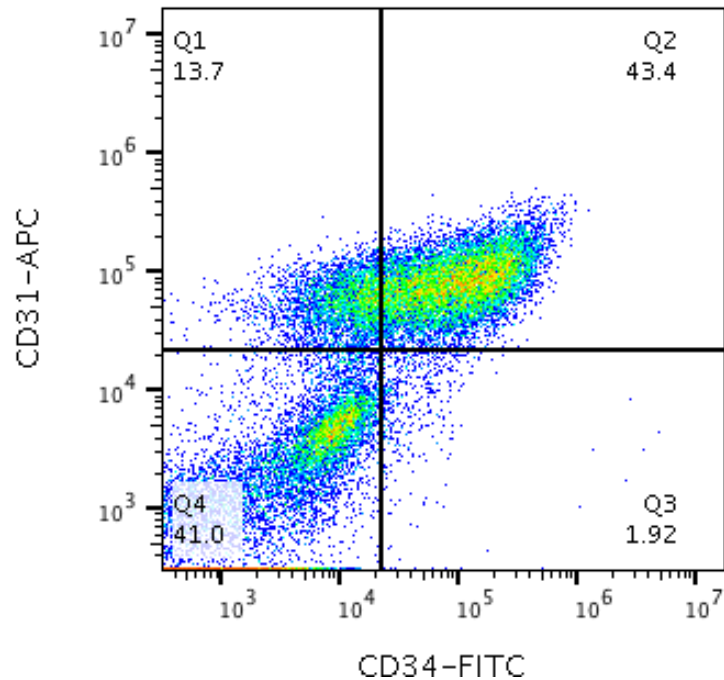
Day 3

Day 5

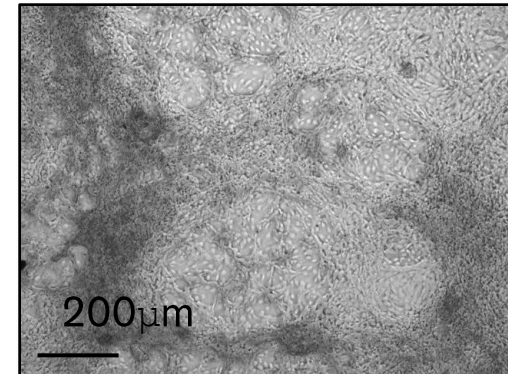
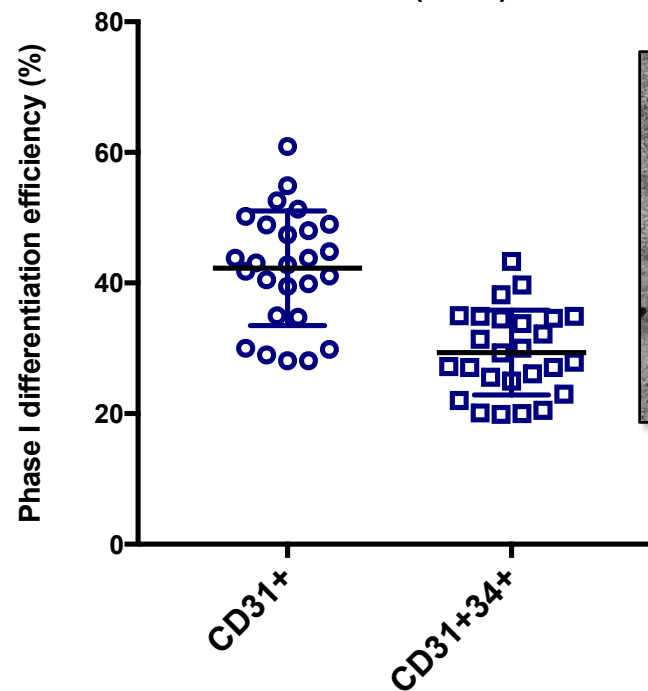


Phase I. iPSC → Hemogenic Endo

- Hemogenic endothelium are **CD31+ CD34+**
- Propidium Iodide-



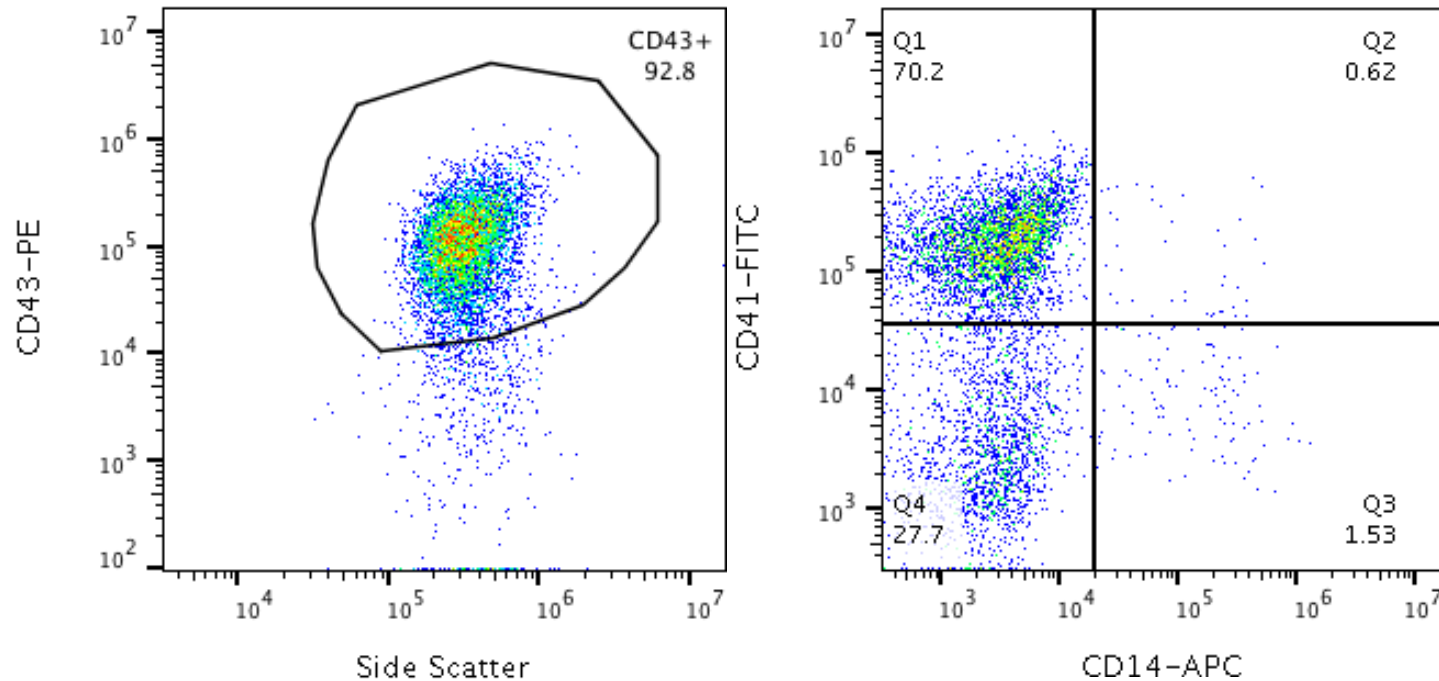
PBG-1 Directed Differentiation -
Phase I (n=26)



Phase II. Hemogenic Endo \rightarrow preMKs+TM

preMKs+TM are CD43+ CD41+ CD14-

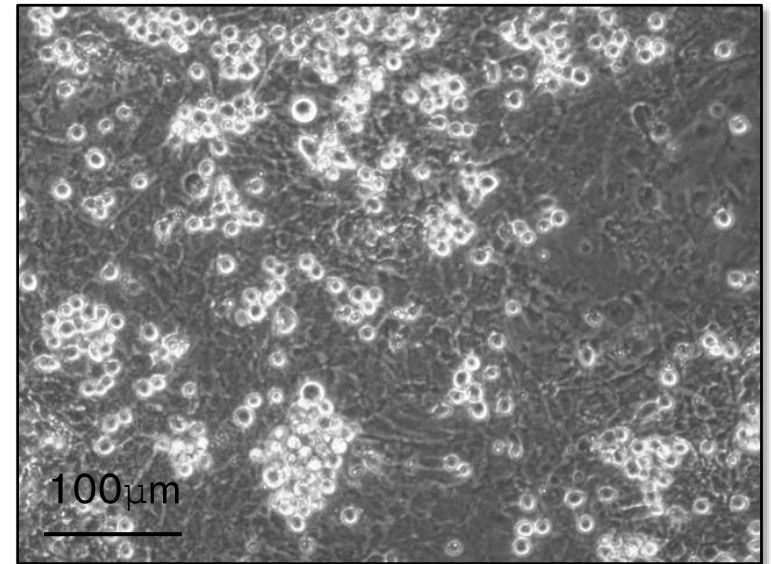
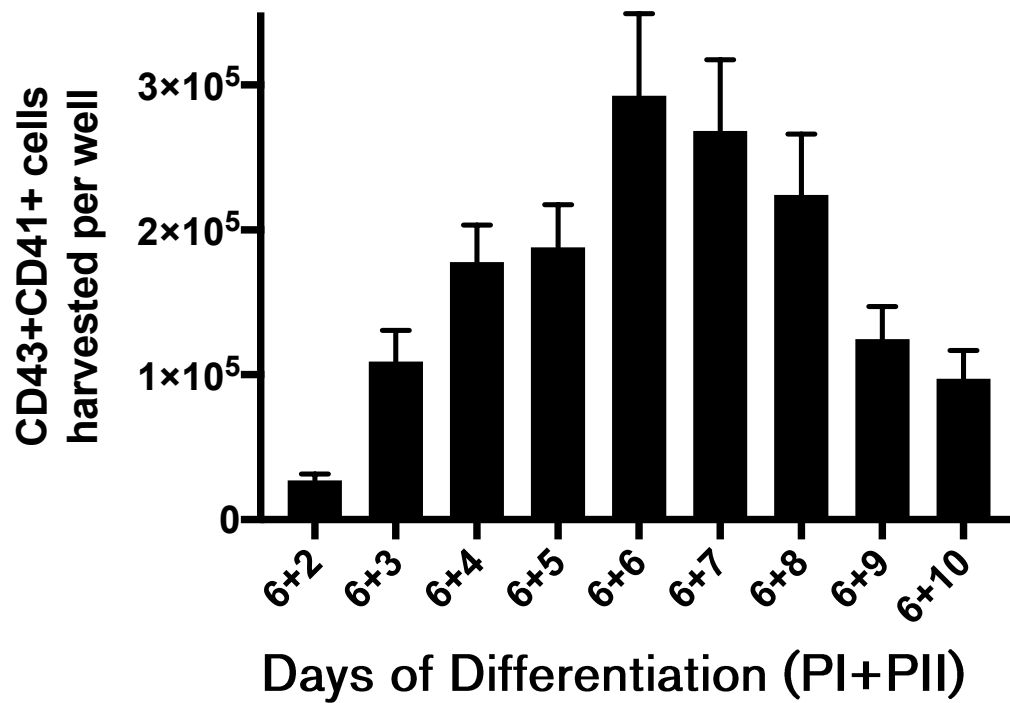
Propidium Iodide-



Phase II. HE \rightarrow preMKs+TM

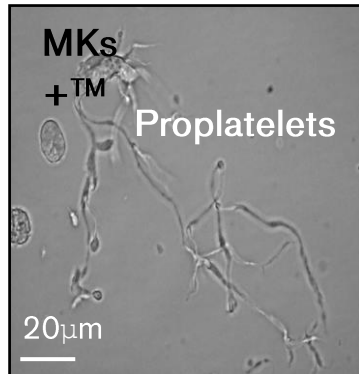
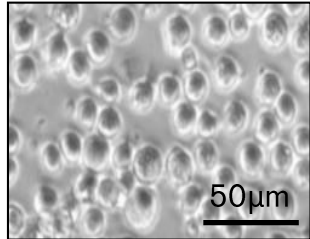
- preMKs+TM are CD43+ CD41+ CD14-
- Propidium Iodide-

AVG Daily preMK Yield (n=23)

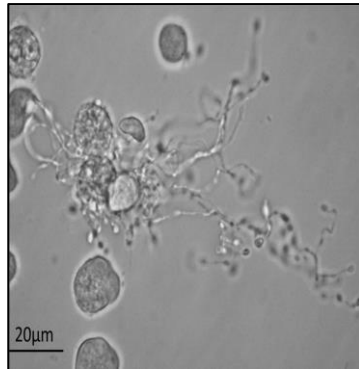
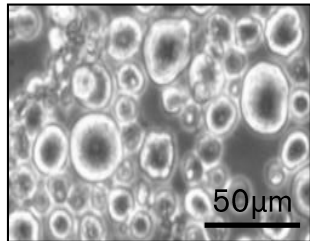


Phase II: Maturation of MKs+TM from preMKs+TM

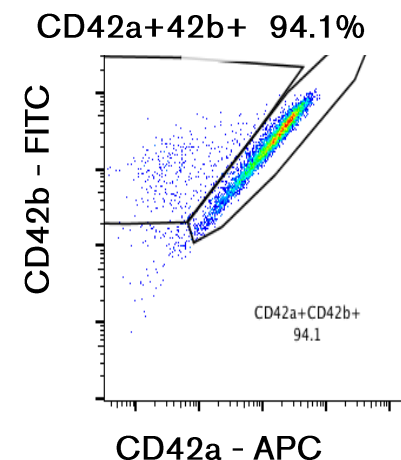
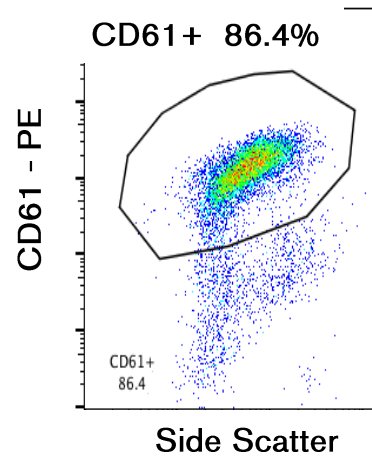
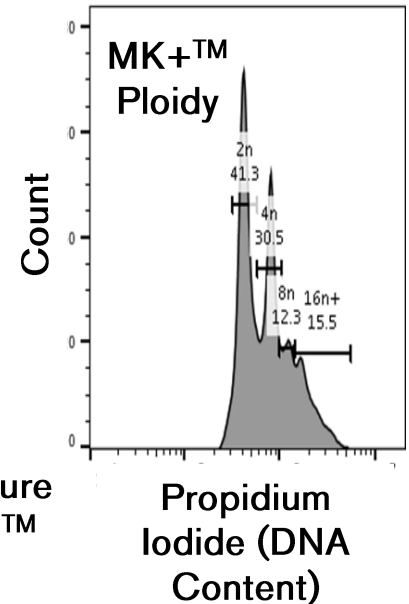
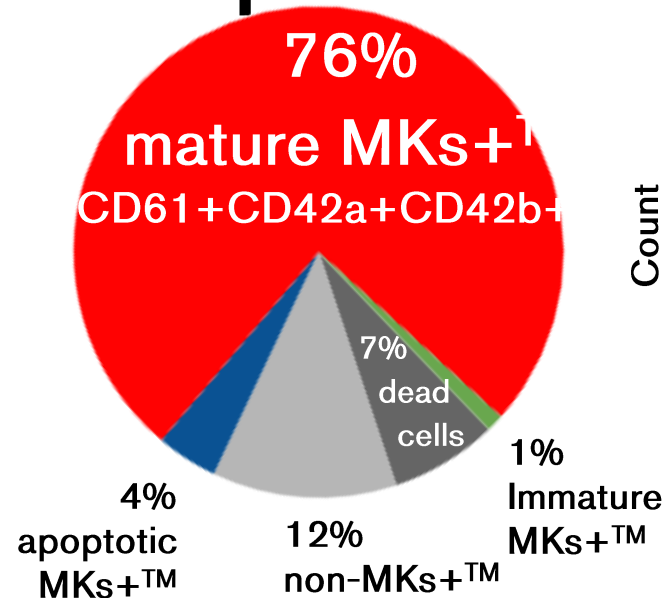
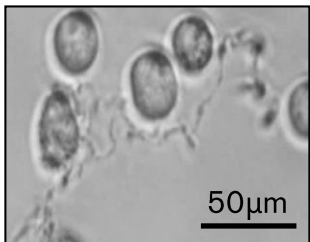
PhIII D1



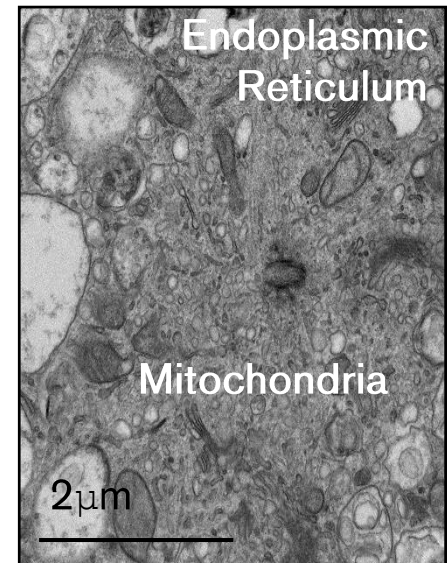
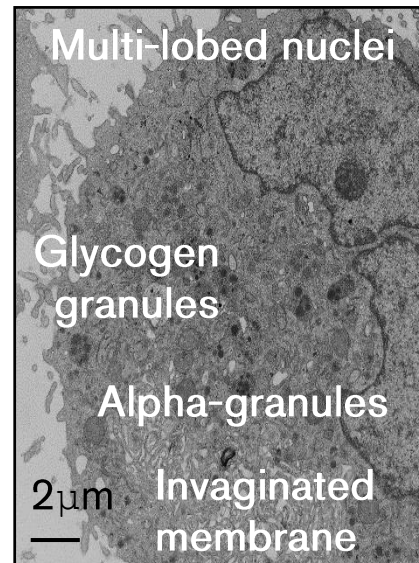
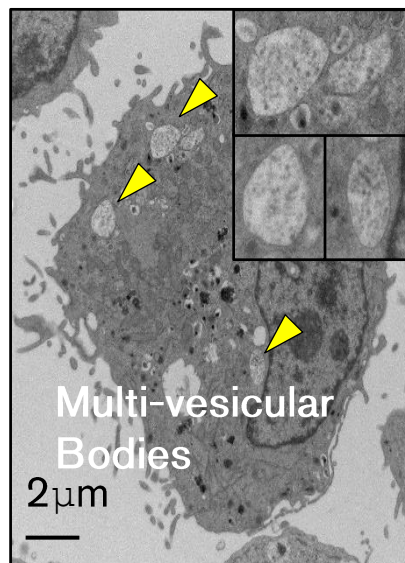
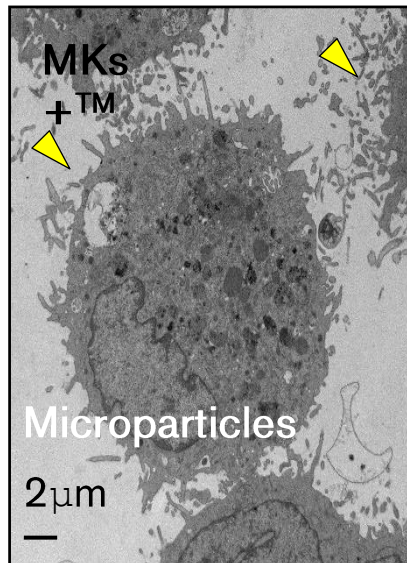
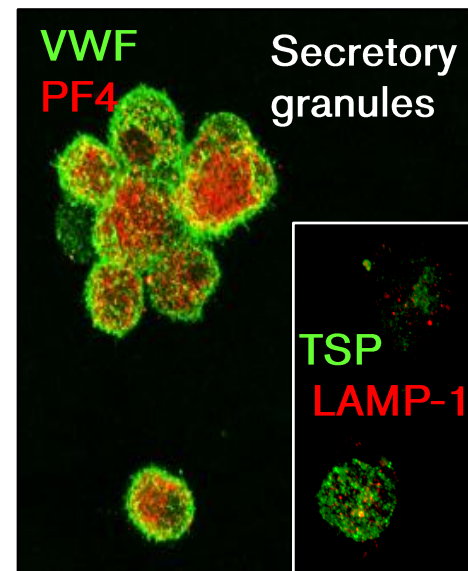
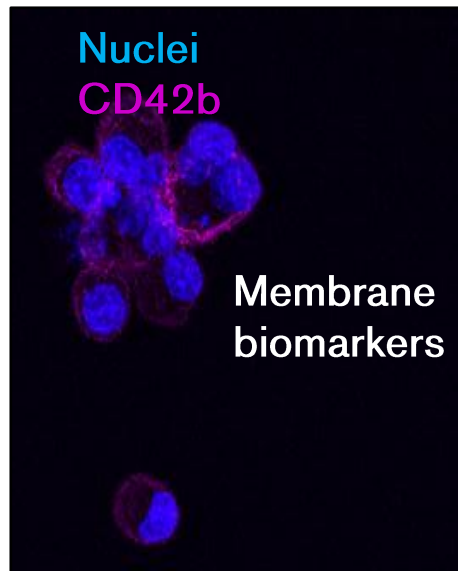
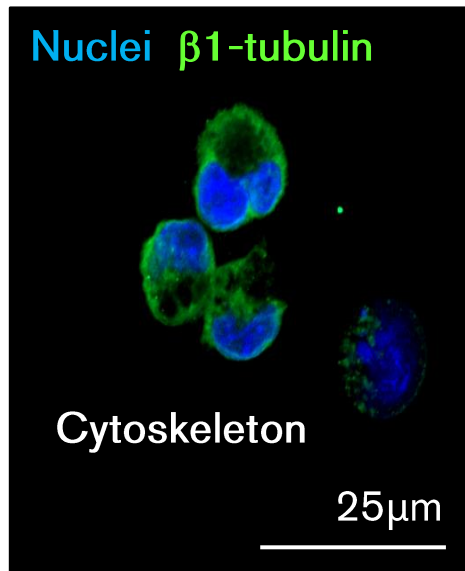
PhIII D2



PhIII D4



MK+TM Biomarker Expression and EM characterization



Hypothesis: To enable commercialization we need to

1. Source a clinical grade iPSC line as an inexhaustible source of human MKs and PLT
2. Establish a feeder-free, serum-free, animal component-free differentiation protocol
3. Develop a scalable production process for industrial manufacture

Directed Differentiation of hiPSCs to PLT+TM

Pluripotent stem cells

preMK+TM release

CD43+
CD41+

PLT+TM
production and
storage

MK+TM maturation

CD61+
CD42a
+
CD42b
+

PLT
+TM

CD31+
CD34+

Hemogenic endothelia

preMK+TM
collection and
cryopreservation

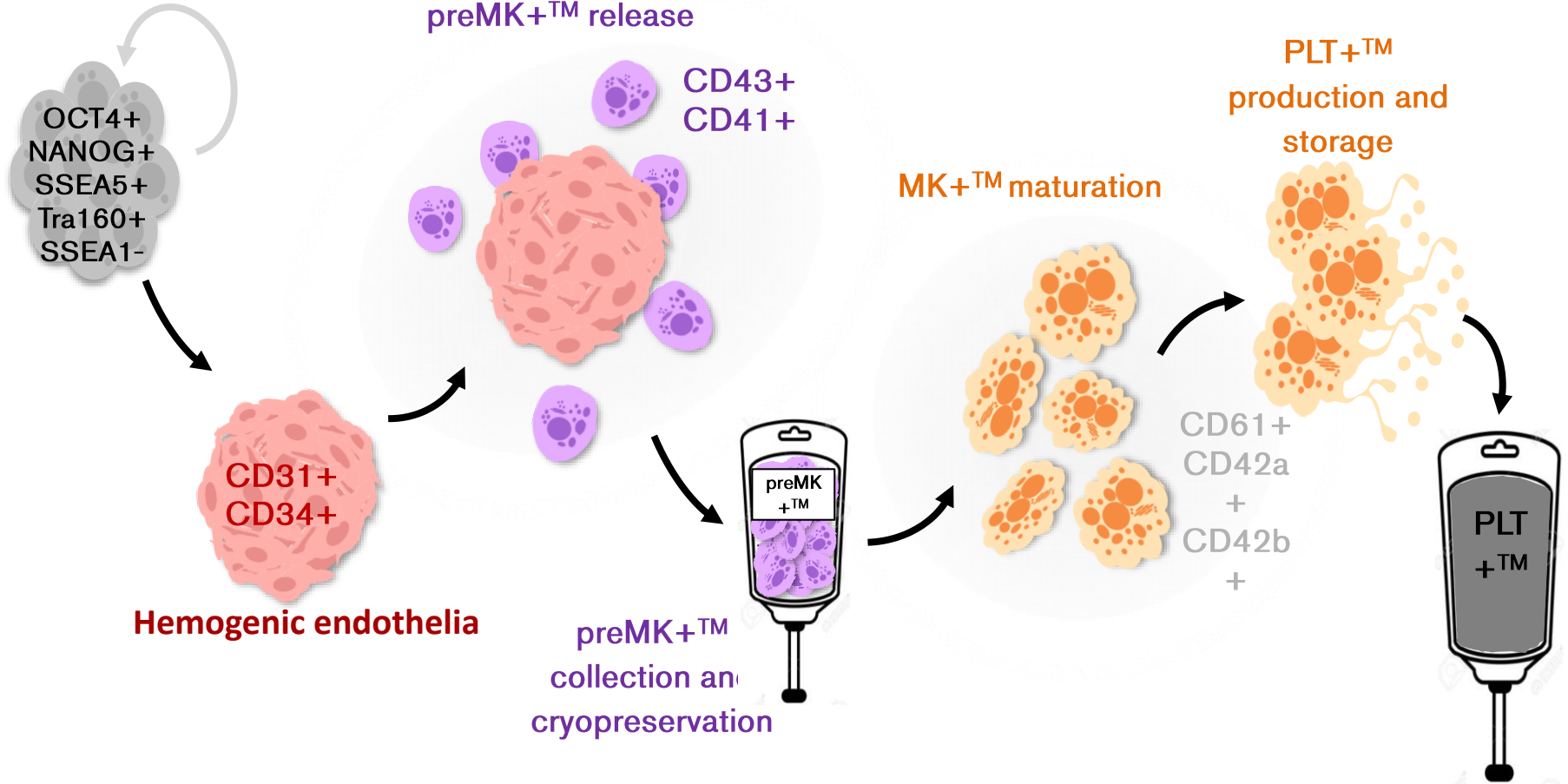
Phase 0

Phase I
6-7 days

Phase II
7-12 days

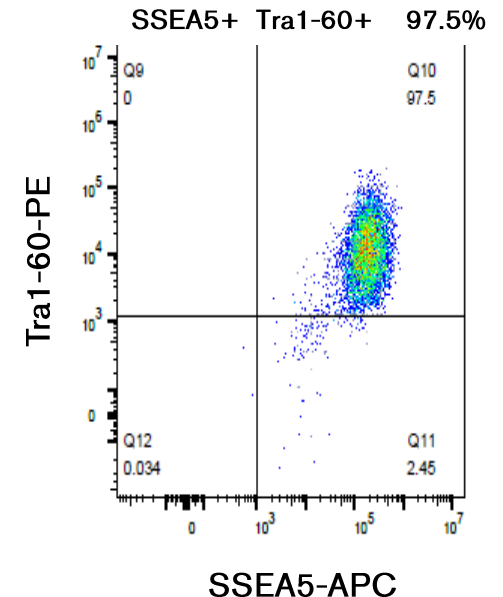
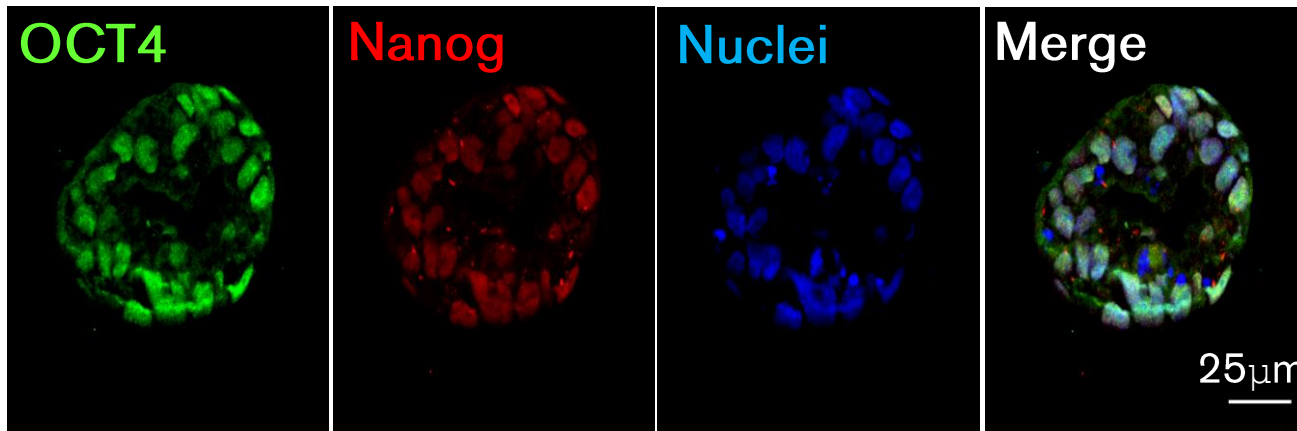
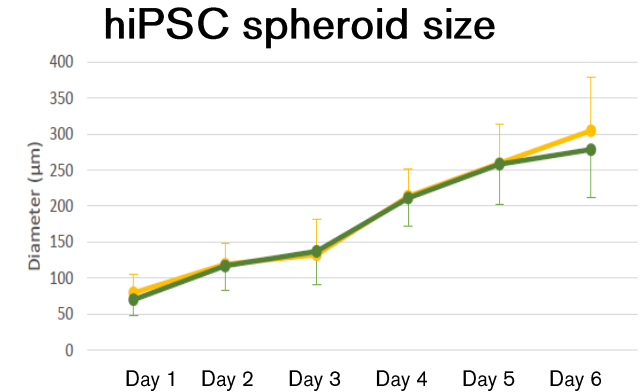
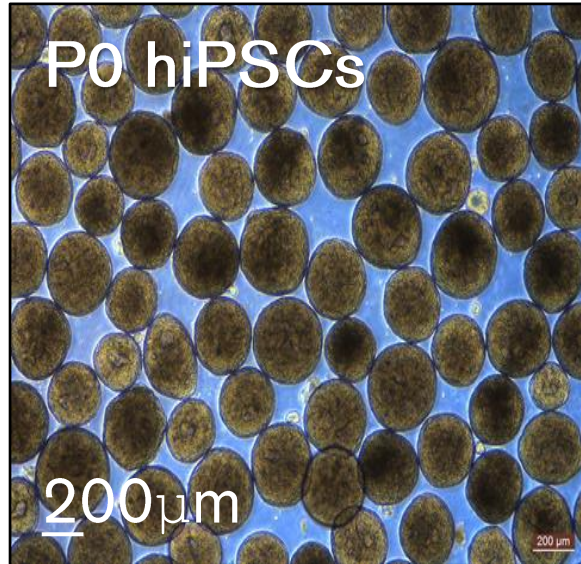
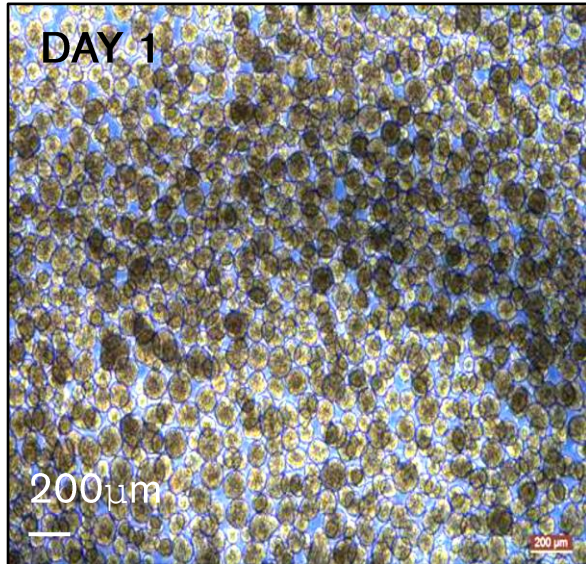
Phase III
3-4 days

Phase IV
< 1 day



Phase 0: hiPSC Seed Train

3D Expansion of induced pluripotent stem cells as spheroids

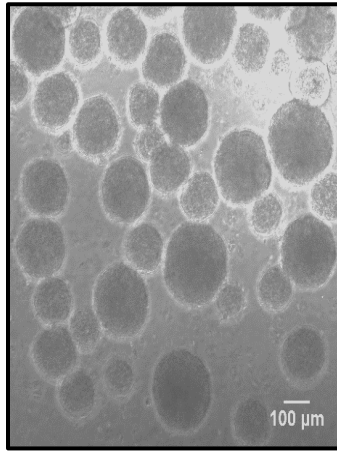


Phase I: iPSC Differentiation to Hemogenic Endothelium

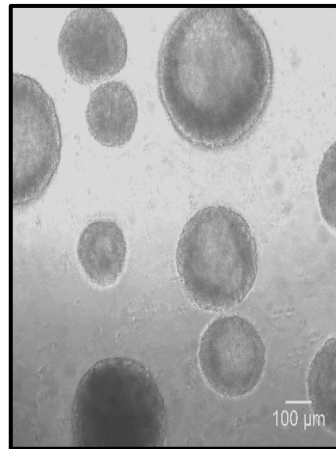
Day -1



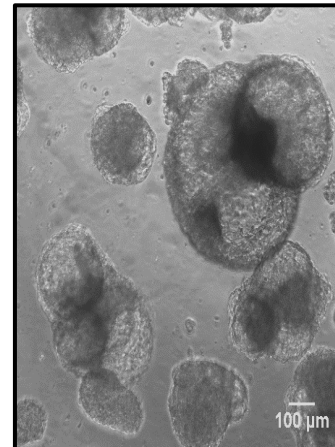
Day 0



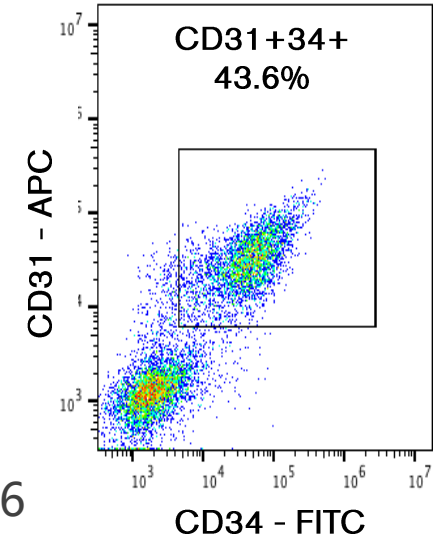
Day 3



Day 6

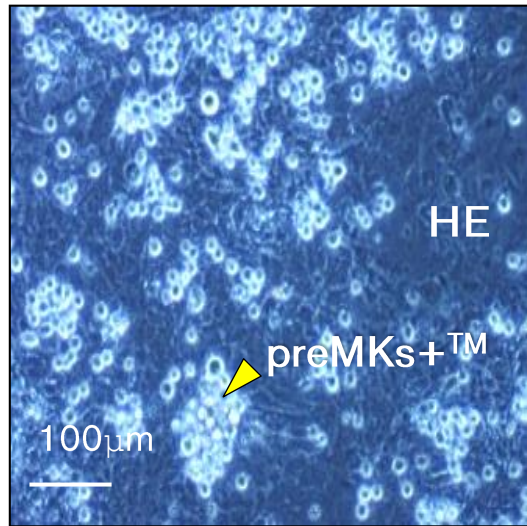


HE differentiation
efficiency day 6

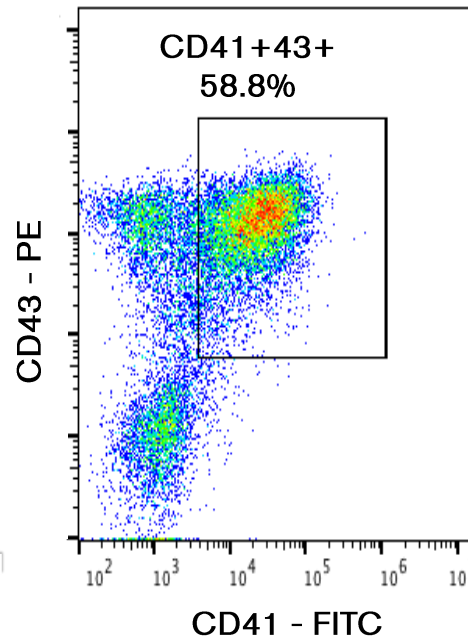


Phase II: Production and release of preMKs+TM

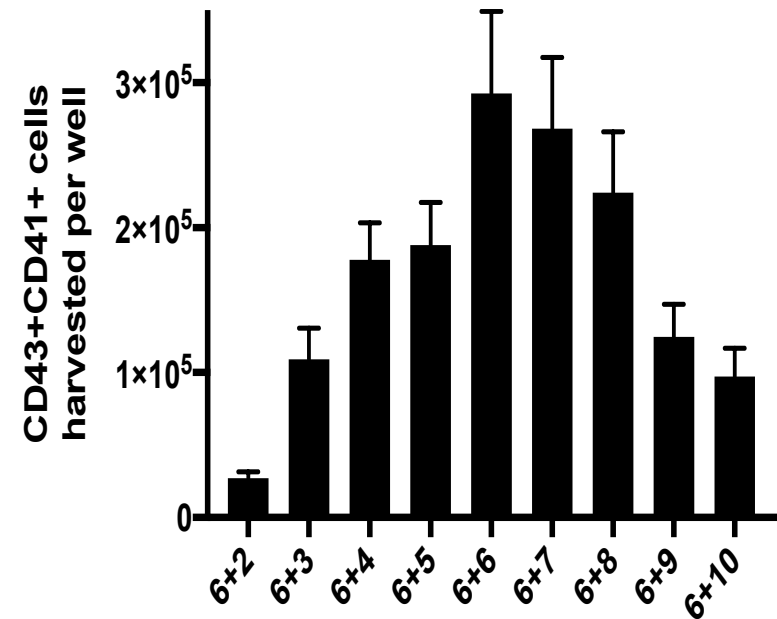
2D differentiation culture 6+6



preMK+TM purity
(3D: day 6+4)

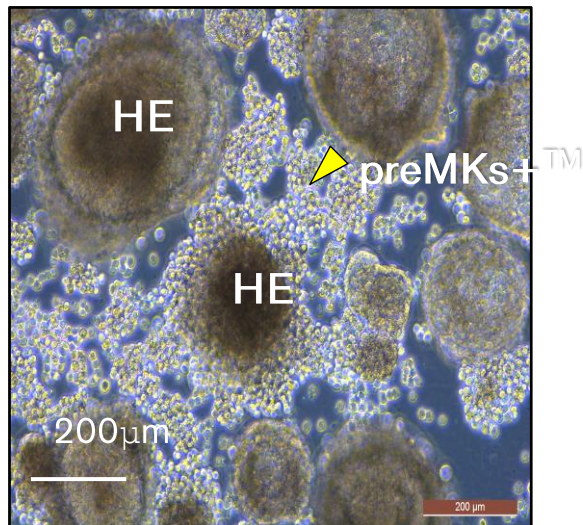


Daily preMK+TM Yield
(2D: n=23)



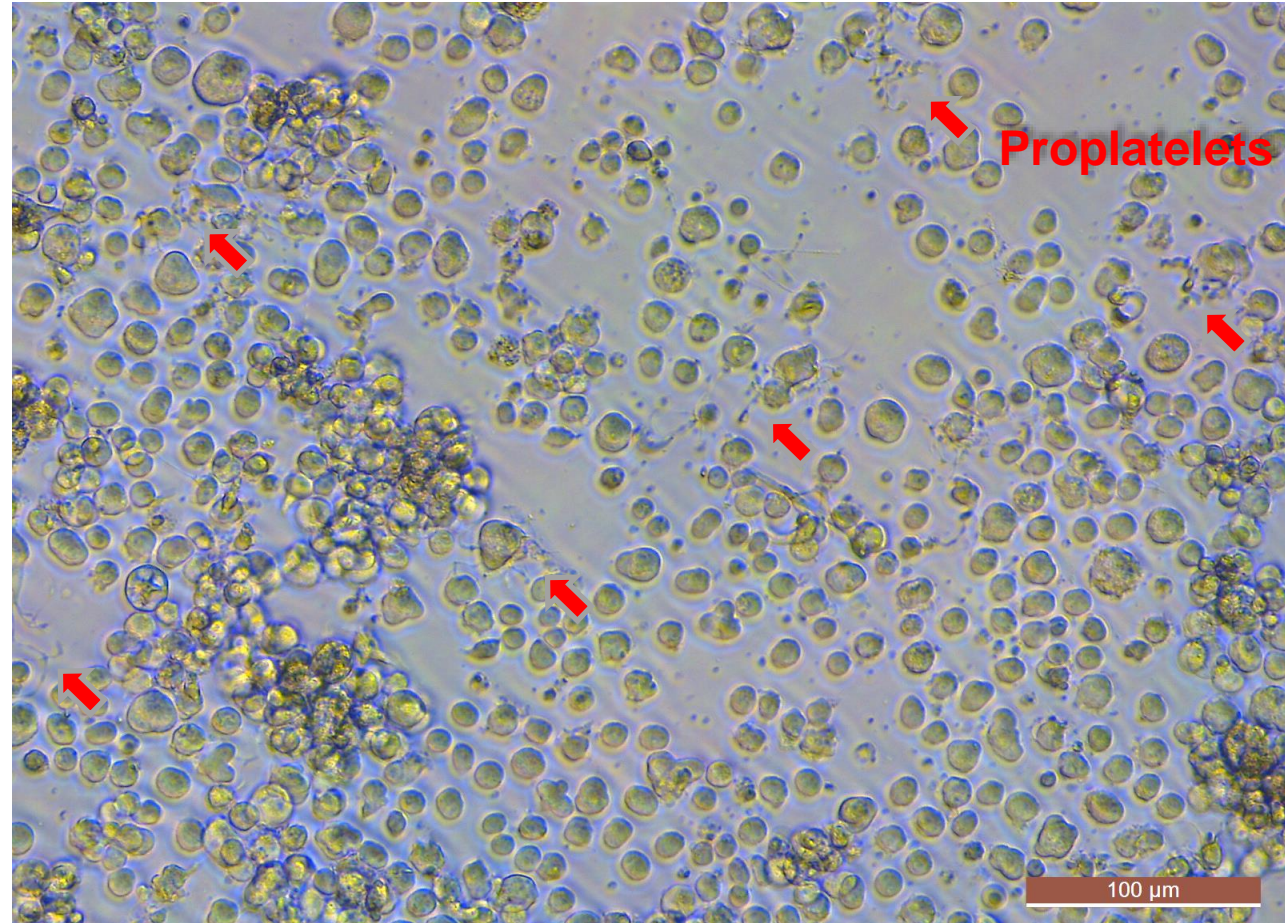
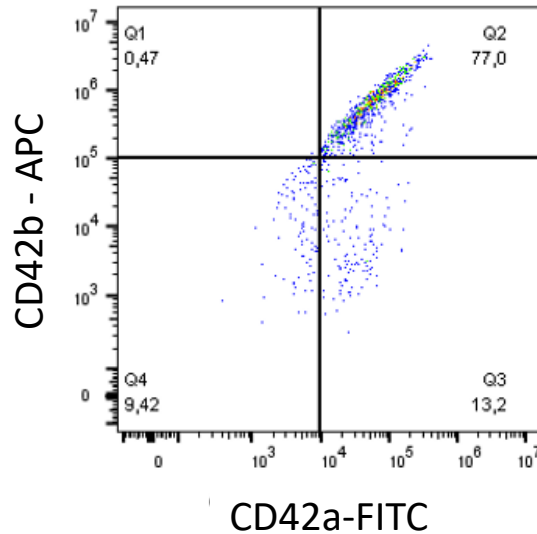
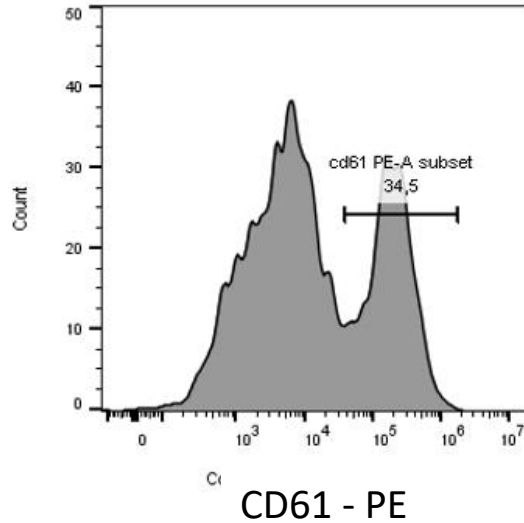
Days of Differentiation
(PhI+PhII)

3D differentiation culture 6+4

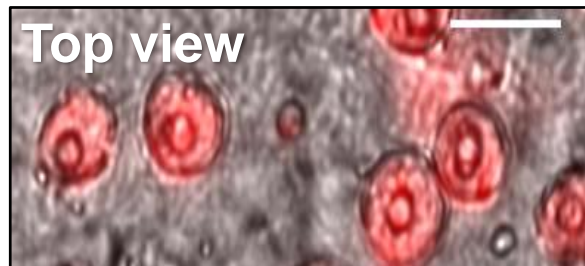
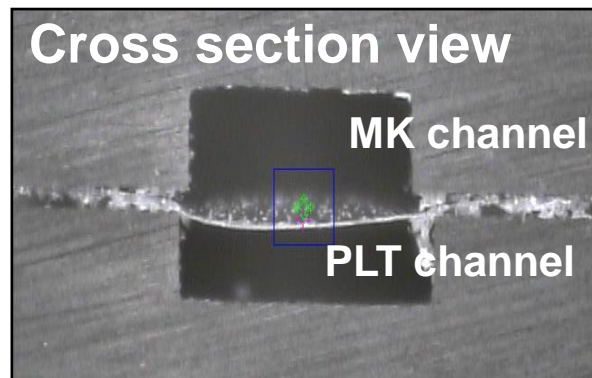
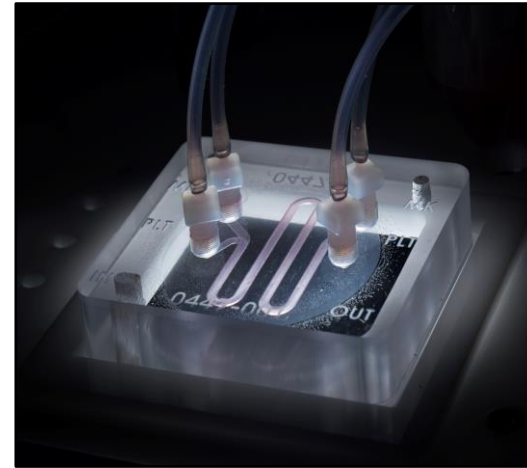
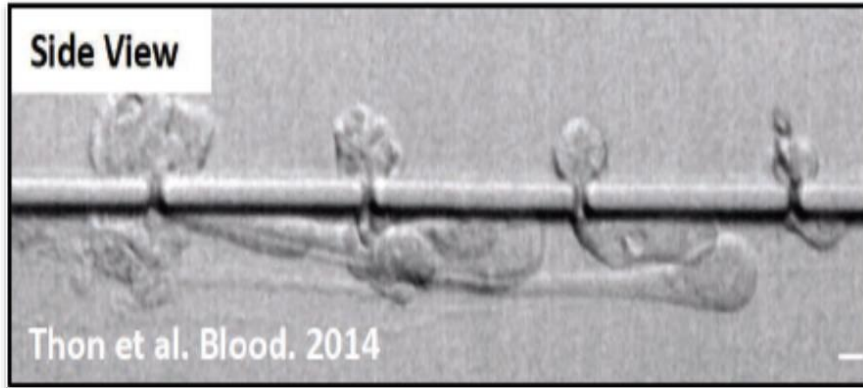


Phase III Cultures of 3D Directed Differentiated hiPSC

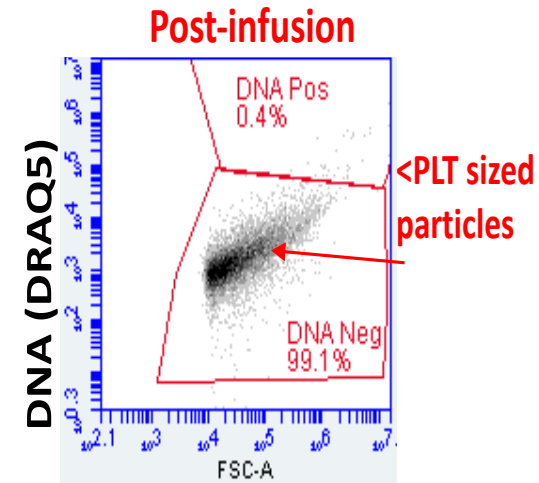
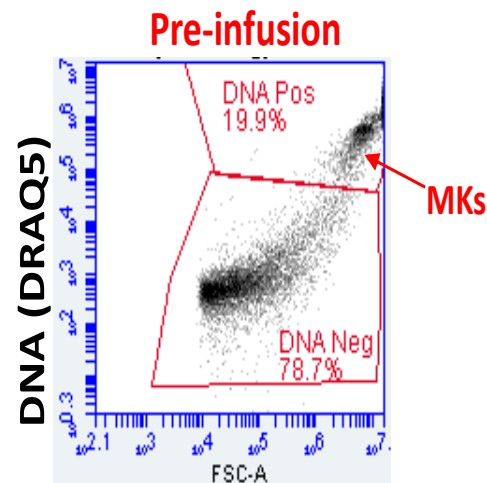
Phase III – Day 6+4+3



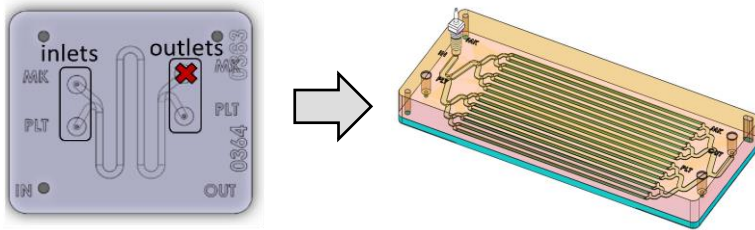
Phase IV: PLT+™ bioreactor



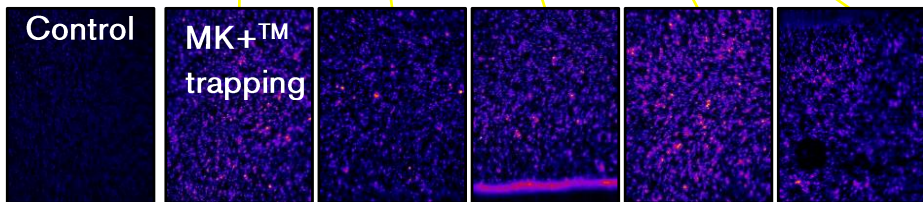
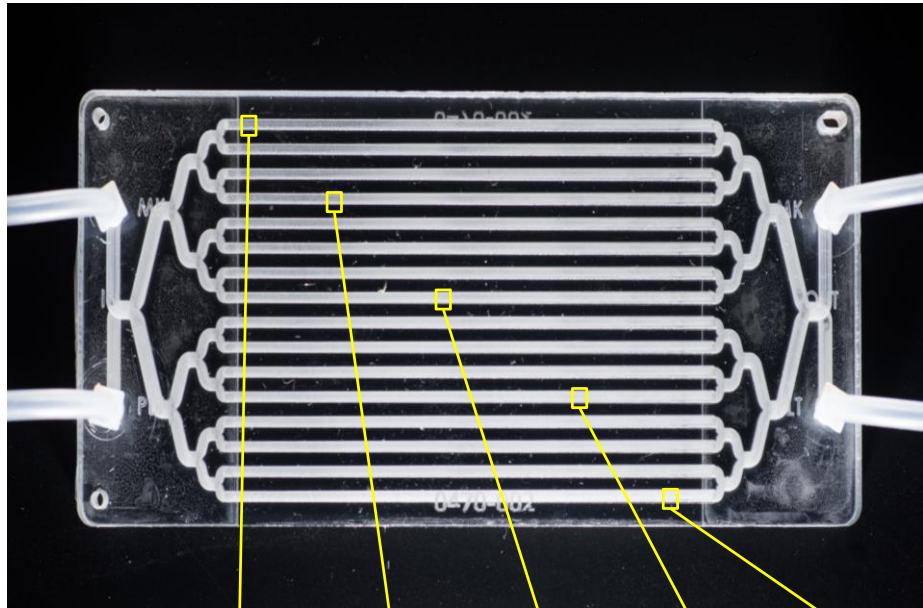
Nucleated cells retained in PLT+™ bioreactor



PLT+TM Bioreactor Scale Up

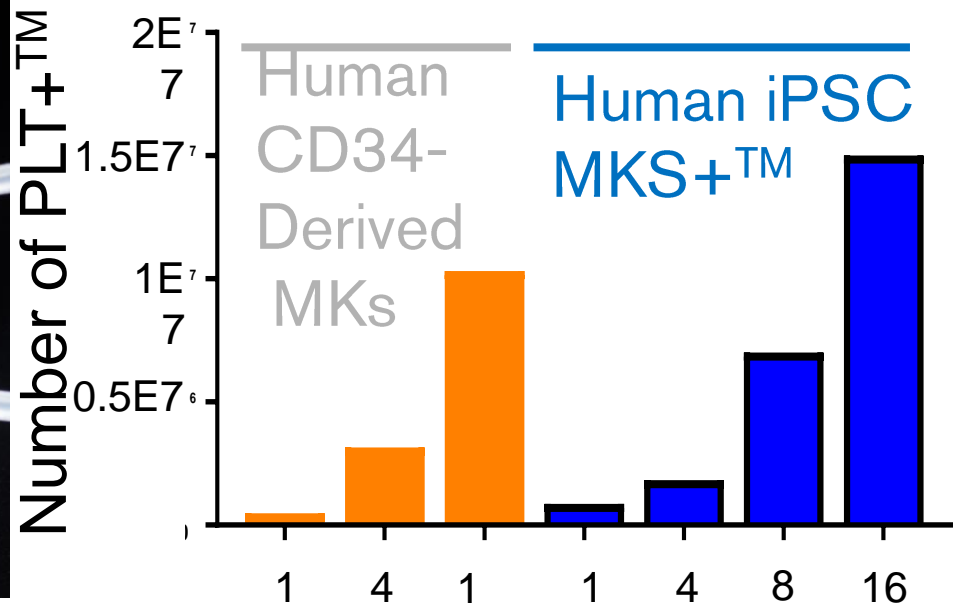


Even seeding across channels



Signal = nuclei (Hoescht)

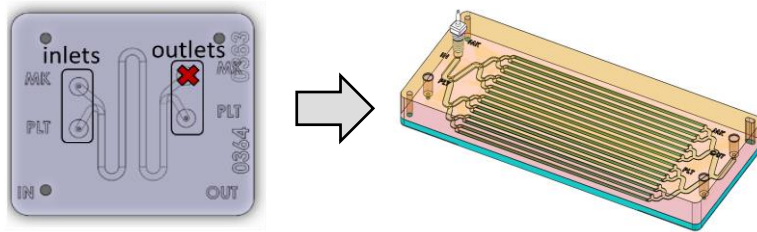
Linear increase in production



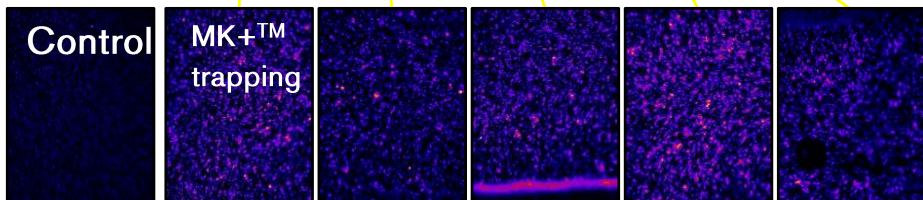
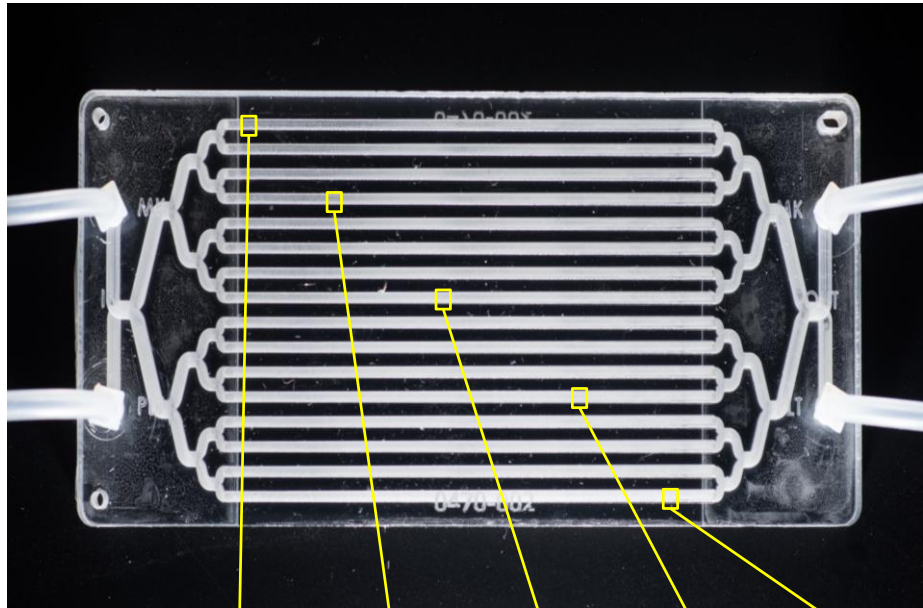
Number of PLT+TM bioreactor channels

(t=3hrs)

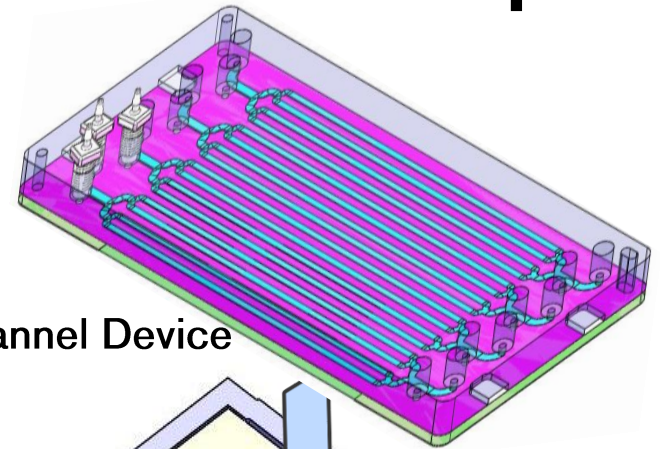
PLT+TM Bioreactor Scale Up



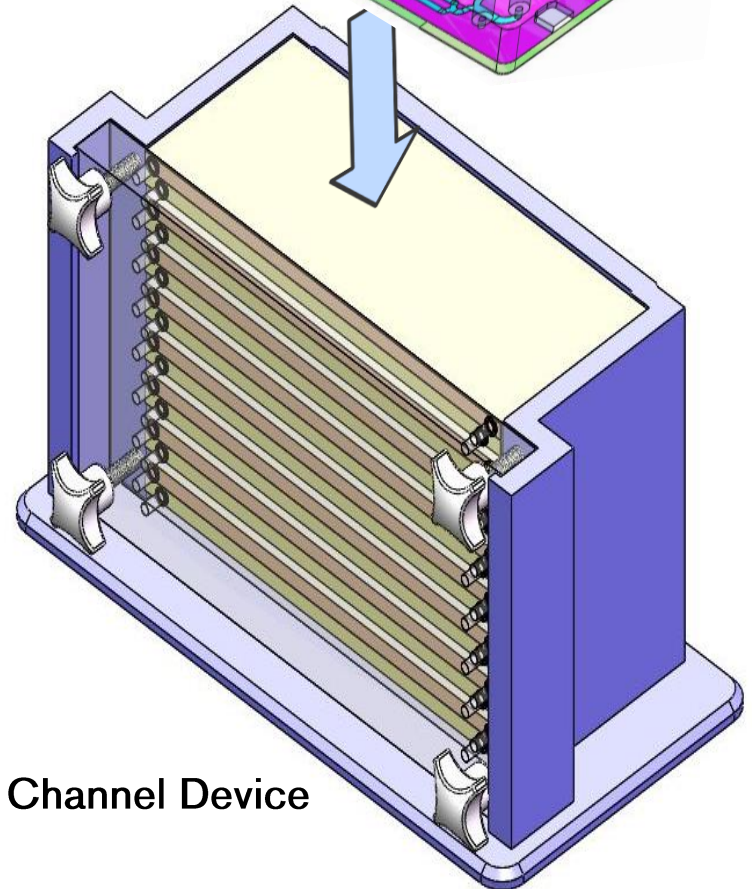
Even seeding across channels



Signal = nuclei



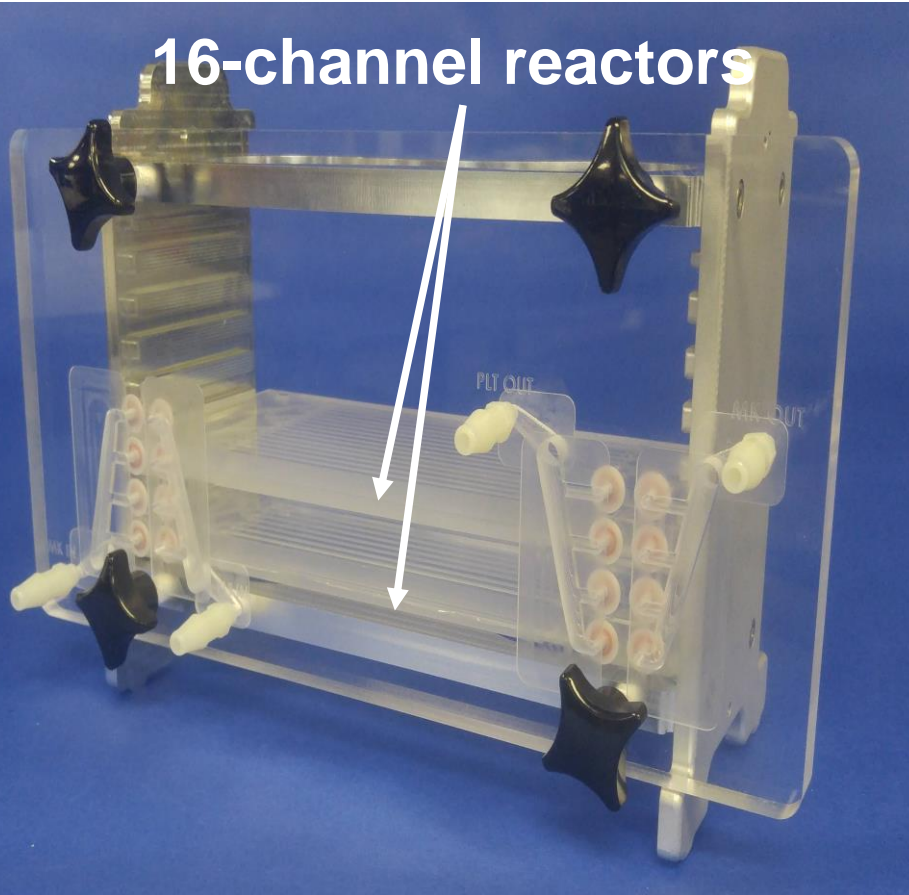
16 Channel Device



128 Channel Device

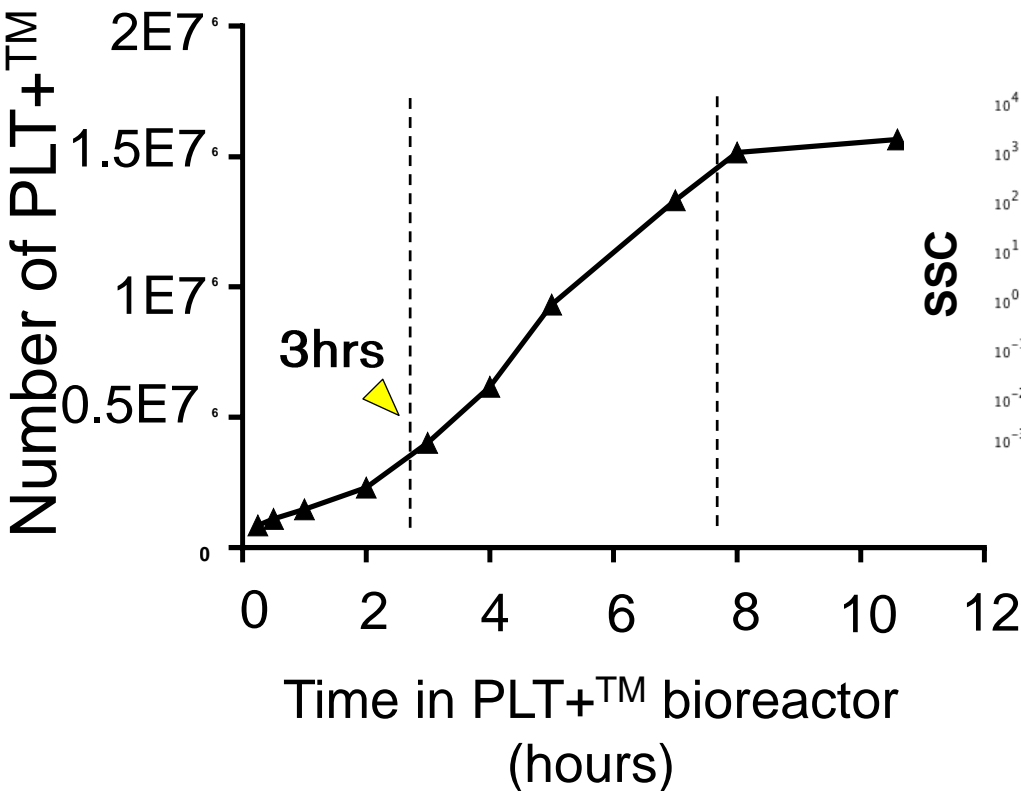
PLT+™ Bioreactor Prototype in operation

16-channel reactors

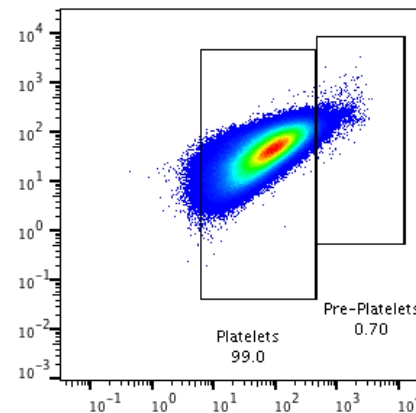


PLT+™ Bioreactor Makes PLTs+™

PLTs+™ Production Kinetics

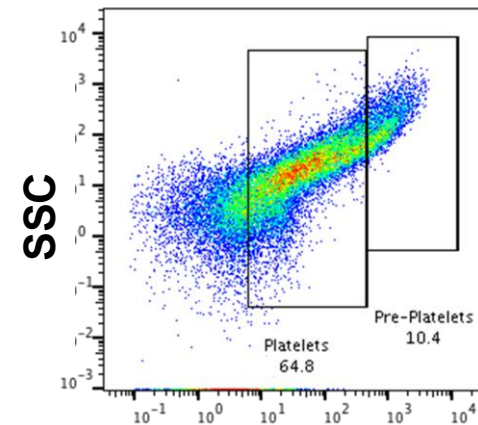


Donor PLTs



FSC

PLTs+™



FSC

Pre gating on:

CD61+
DRAQ (DNA)-
Calcein+
CD42a+

Platelet+™ Imaging

B-tubulin

CD61

Merge

Scale bar = 25 μm
% Platelets = 79.8%
Average Diameter = 4.41 μm
Std Dev = 1.43 μm

β 1-tubulin CD61

Membrane biomarker
Microtubule coil

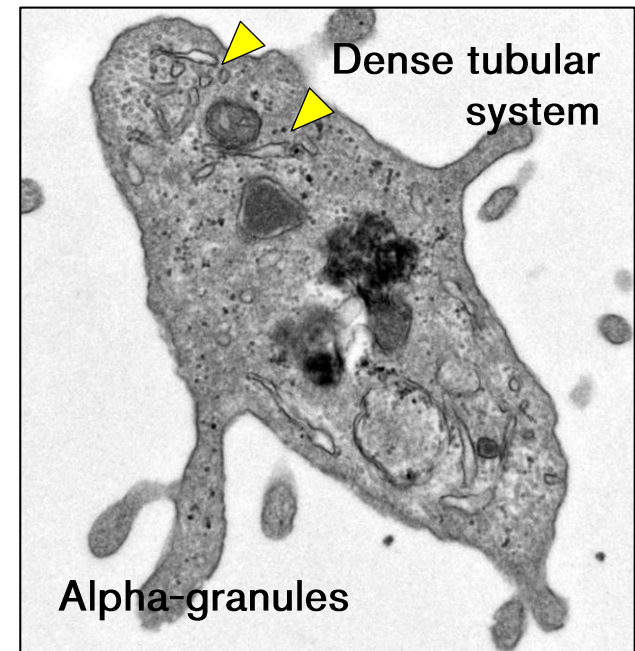
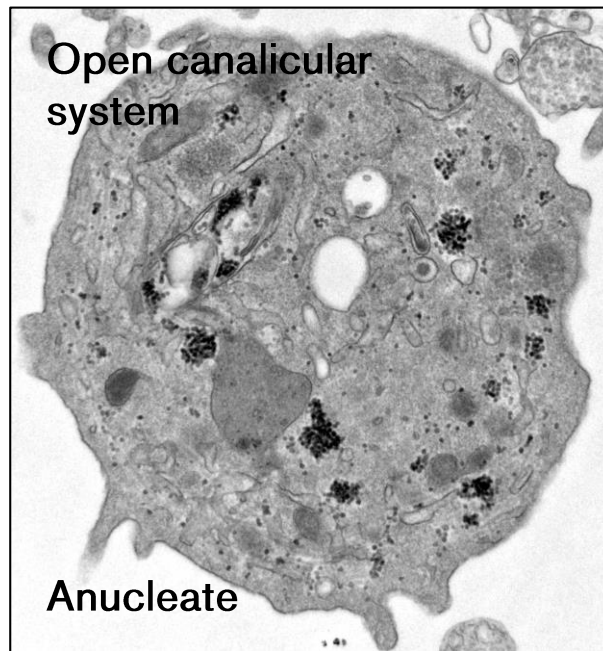
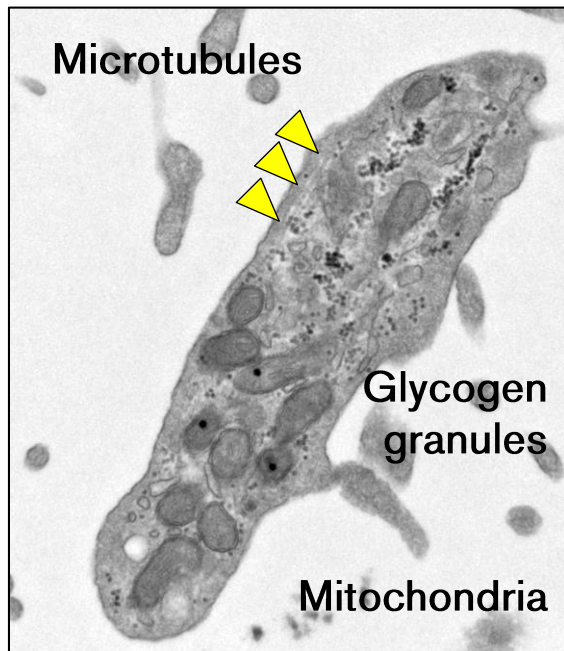
15 μm

VWF PF4 CD42b

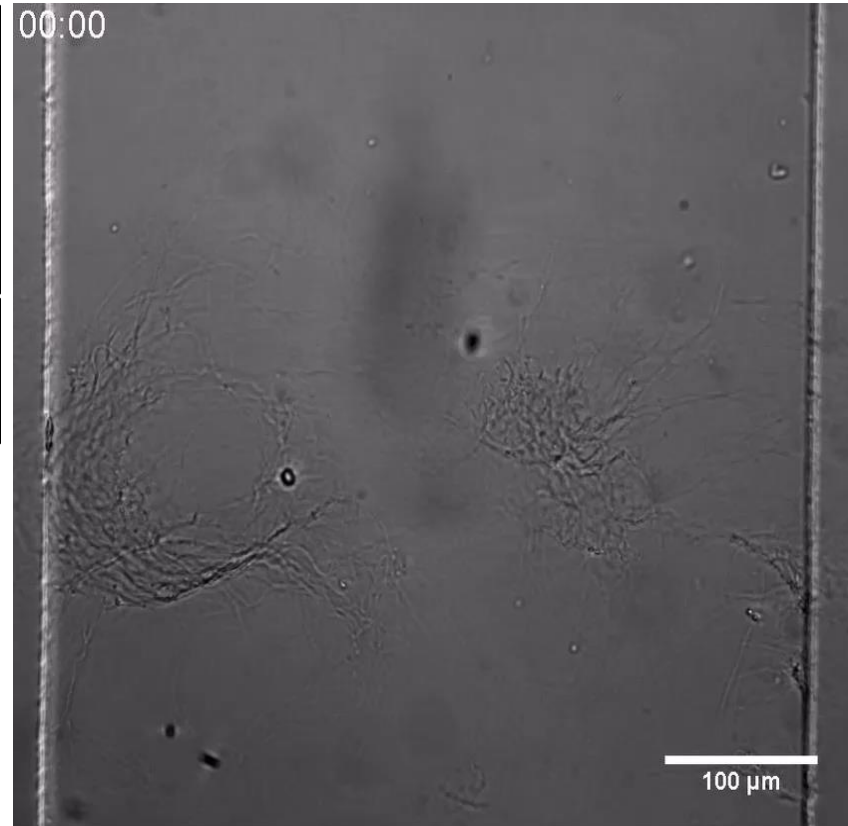
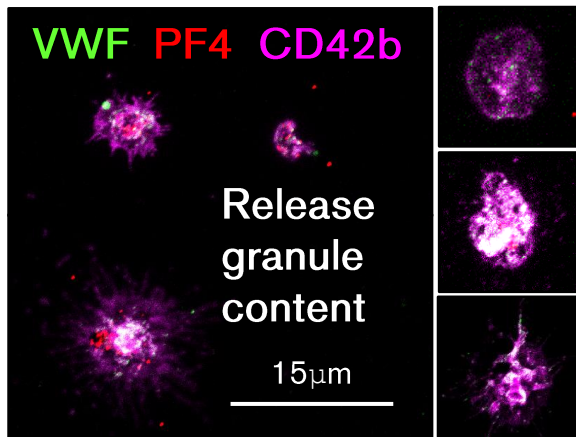
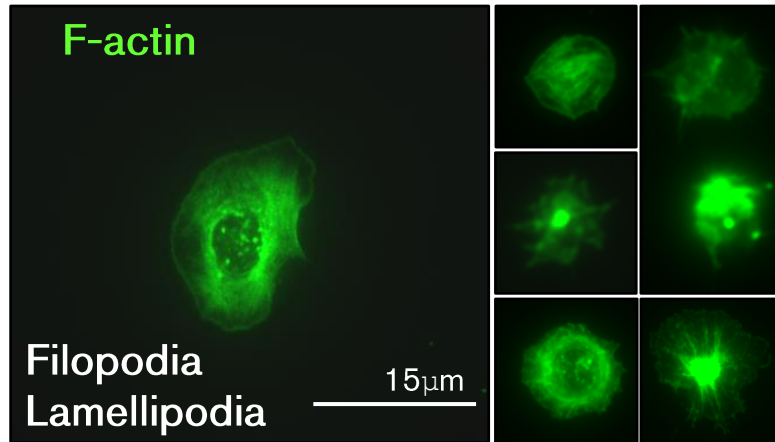
Alpha-
granules

15 μm

Electron microscopy characterization of Platelet+™



Functional characterization of PLT+TM



PLTs+TM in
Culture
Media
(no plasma)

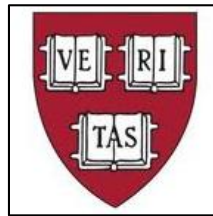
Collagen I

CONCLUSIONS

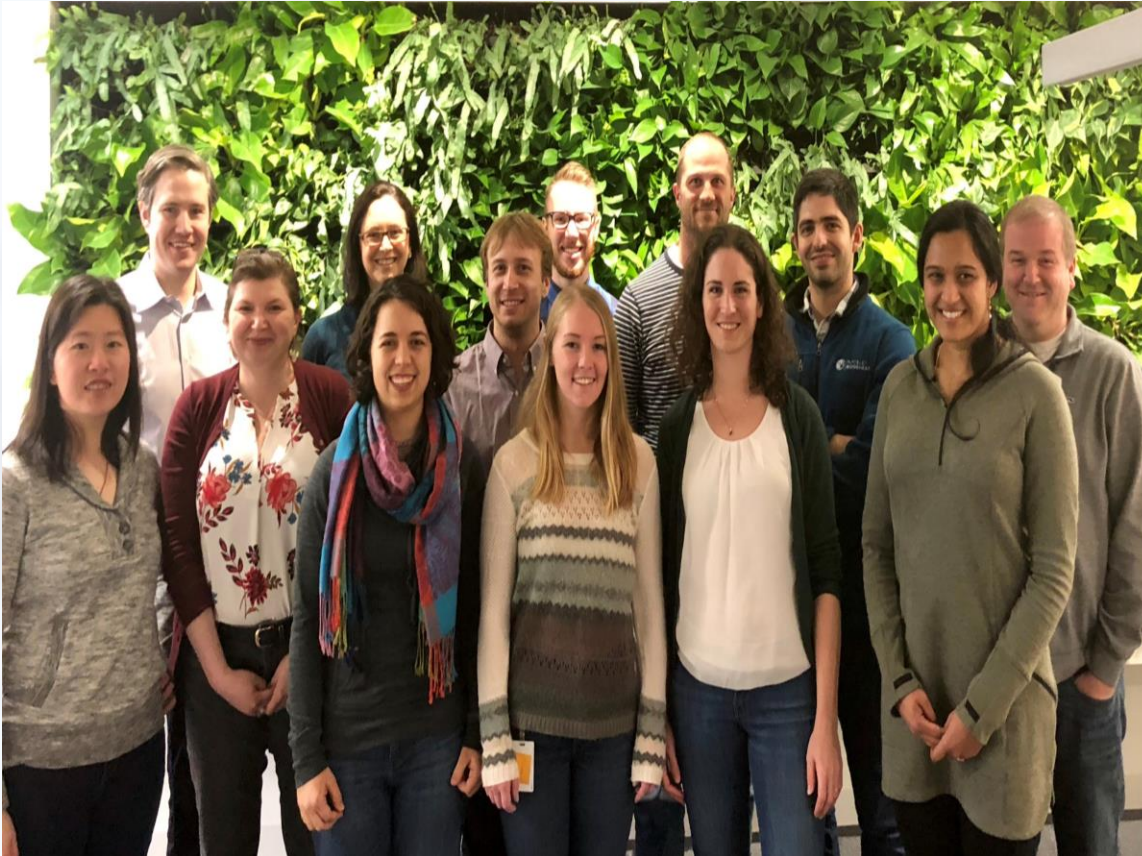
1. Proplatelet-promoting factor (PPF) is an internal, cytosolic protein(s) that regulates proplatelet initiation.
2. Mimicking physiology triggers platelet production.
3. We have developed a scalable process to generate in vitro platelets from clinical grade iPS cells.

ACKNOWLEDGEMENTS

Kellie Machlus
Beth Battinelli
Jonathan Thon
John Hartwig
Andy Weyrich
Sunita Patel
Markus Bender
Tom Soussou
Jen Richardson



Platelet BioGenesis Team



Jonathan Thon, PhD CEO/CSO

Sven Karlsson, MBA CFO

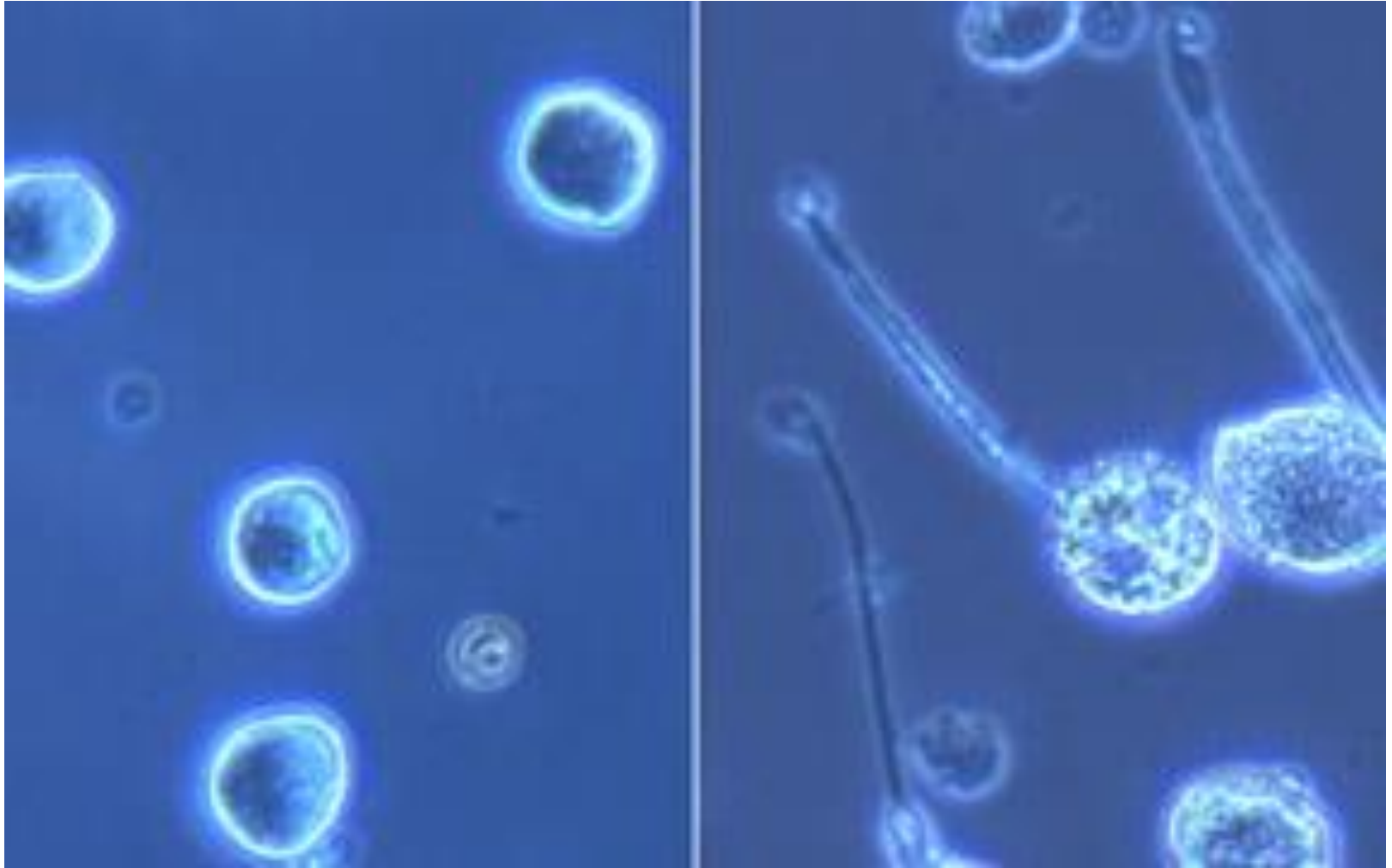
Lea Bealieu , PhD Chief of Staff

Brad Dykstra, PhD Stem Cell Biology

Jorge Valdez, PhD Bioreactor

Christ Peters, PhD Characterization

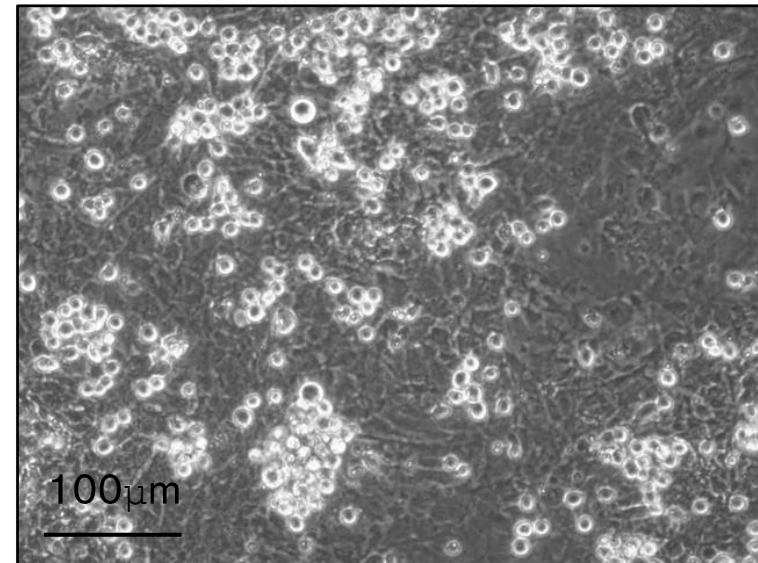
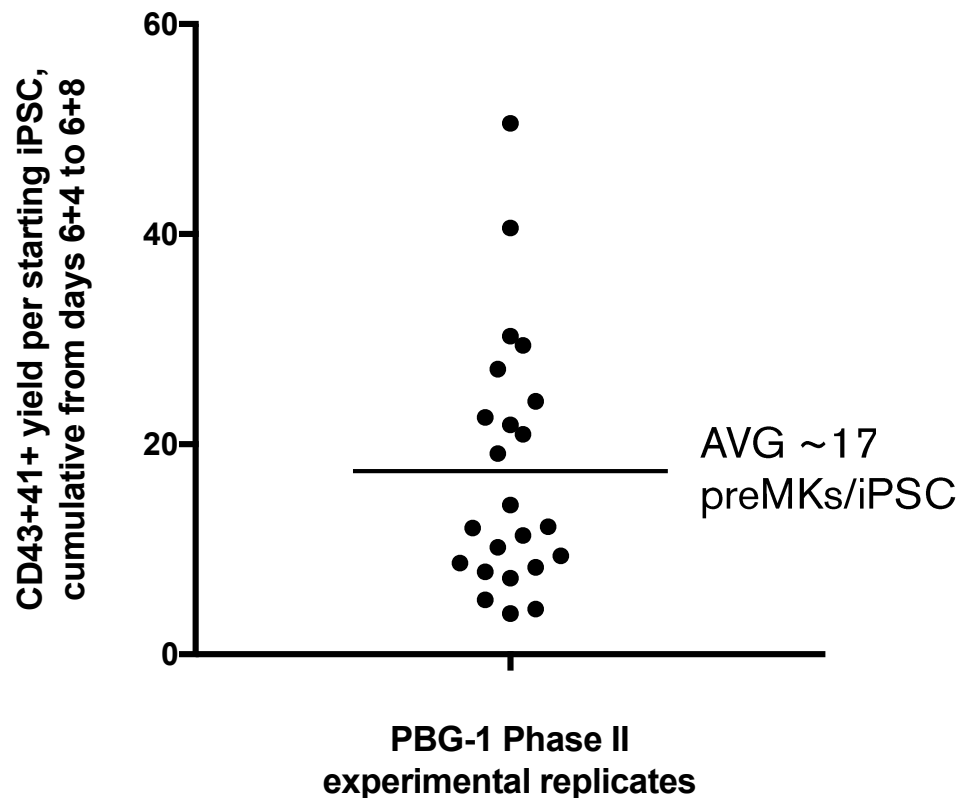
Microinjection of platelet cytosol triggers proplatelet initiation



Phase II. HE \rightarrow preMKs+TM

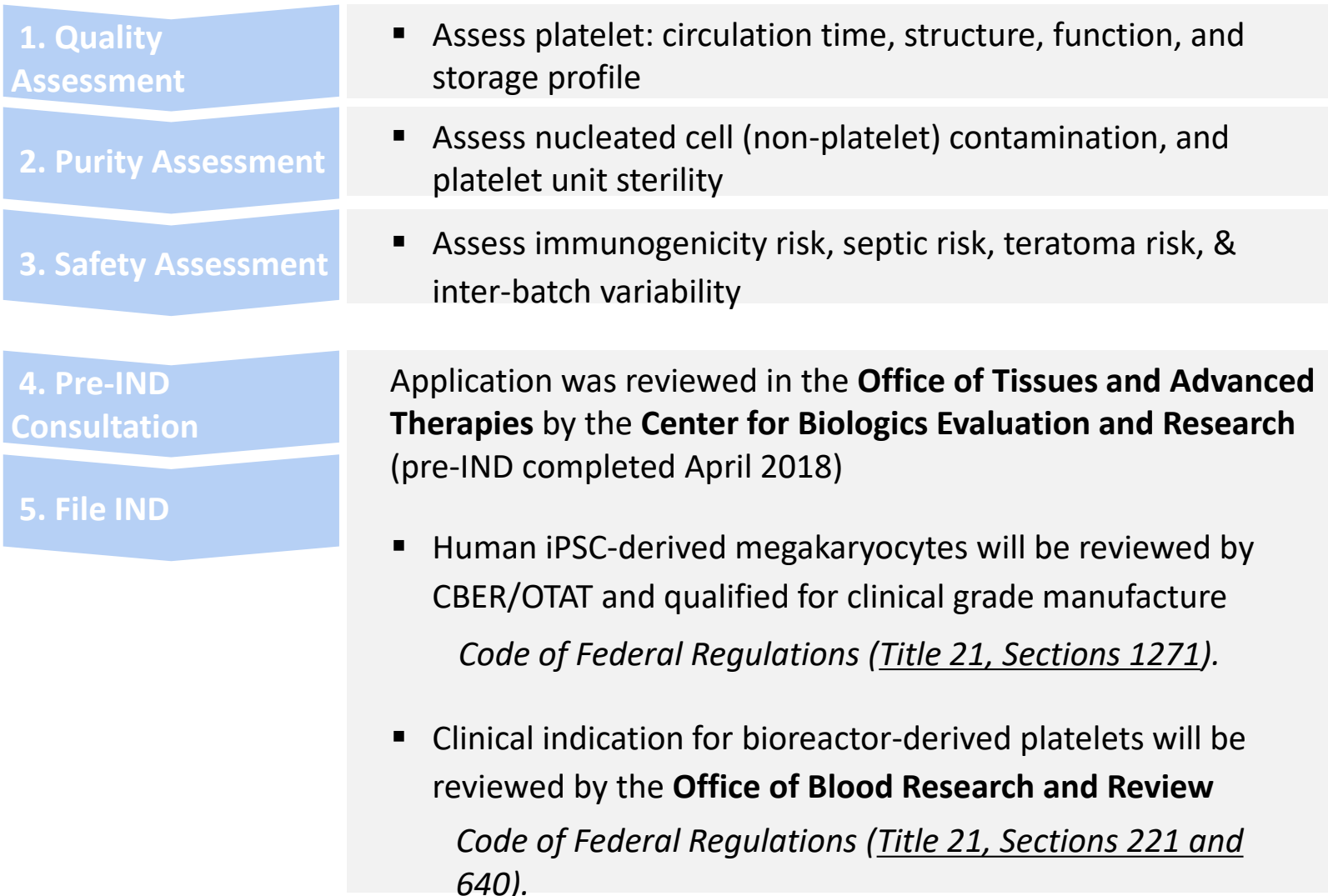
- preMKs+TM are CD43+ CD41+ CD14-
- Propidium Iodide-

Cumulative preMK Yield (n=23)



Defined Regulatory Pathway

Plan developed from discussions with the CBER and FDA



2018



2020

how platelets "feel" and respond to their mechanical microenvironment during clot formation

Wilbur A. Lam, MD, PhD

Associate Professor

Department of Pediatrics

Aflac Cancer and Blood Disorders Center

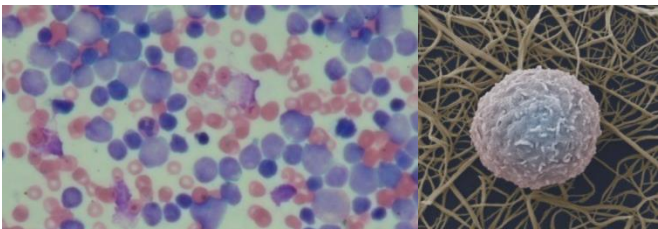
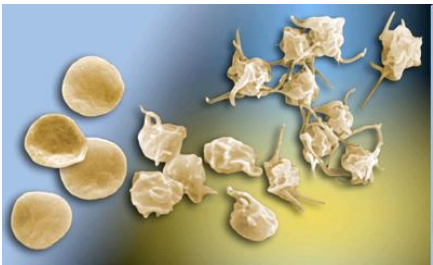
Division of Pediatric Hematology/Oncology

Children's Healthcare of Atlanta/Emory University School of Medicine

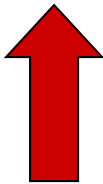
Wallace H. Coulter Department of Biomedical Engineering

Georgia Institute of Technology and Emory University

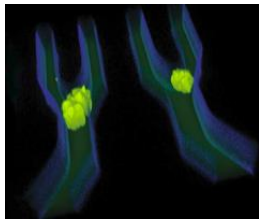
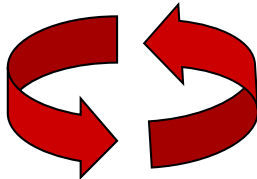
overview of our laboratory approach



**cell biophysics of hematology
in health and disease**



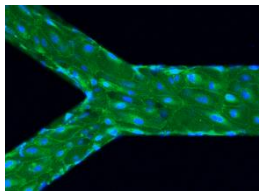
translation to our patients



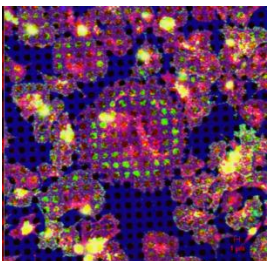
microfluidics



microfabrication

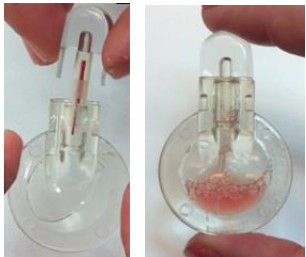


microvasculature-on-a-
chip



protein
nano/microcontact
printing

**development of research-enabling
nano/microsystems**



point-of-care anemia
diagnostic (FDA cleared)

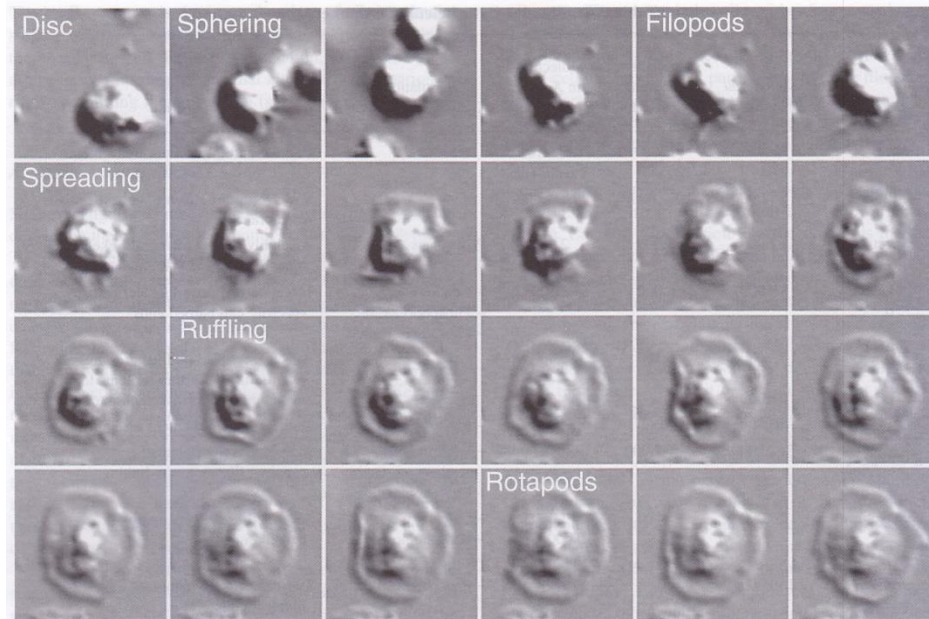
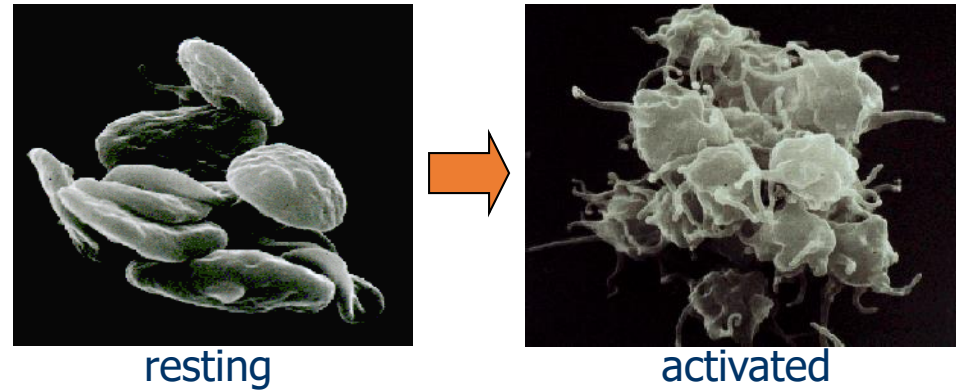


smartphone-based
diagnostics

**diagnostic and medical
device development**



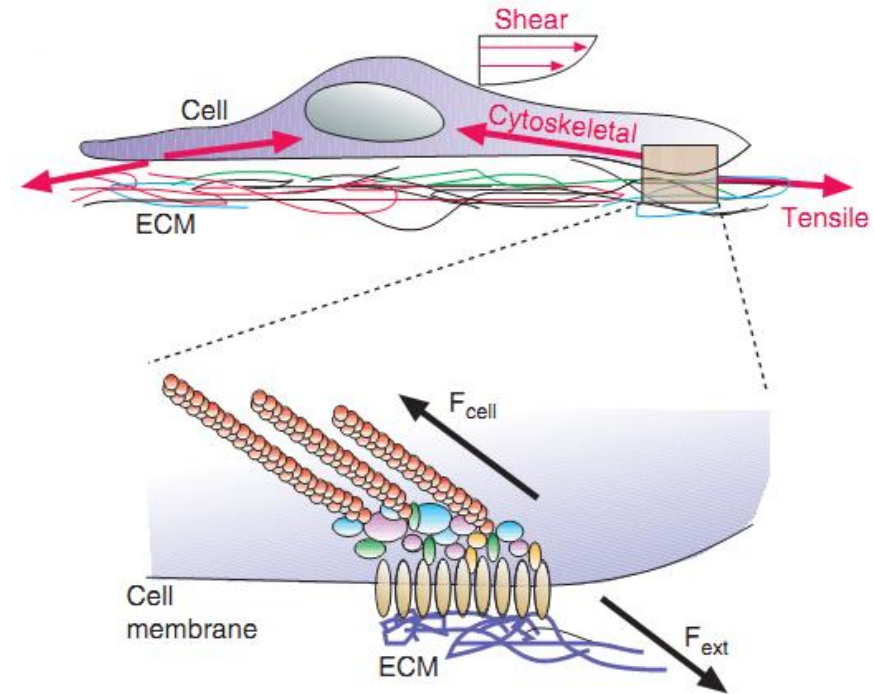
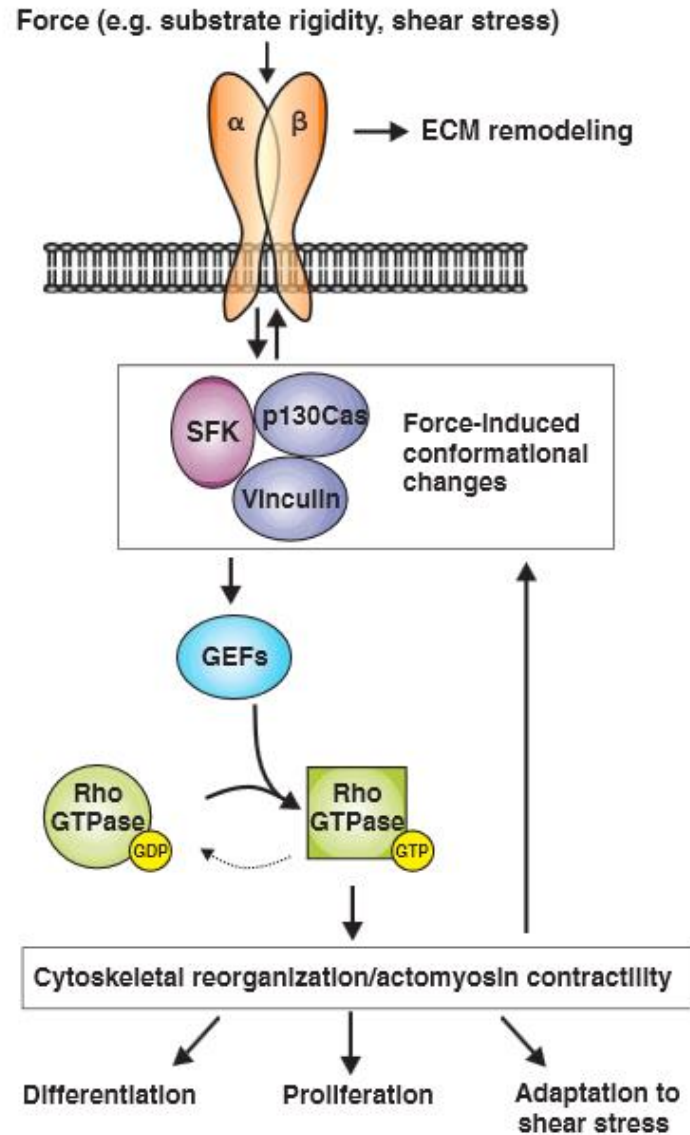
how “smart” are platelets?



Hartwig JH, *Platelets* 2002

how do platelets physiologically react to the biophysical microenvironment?

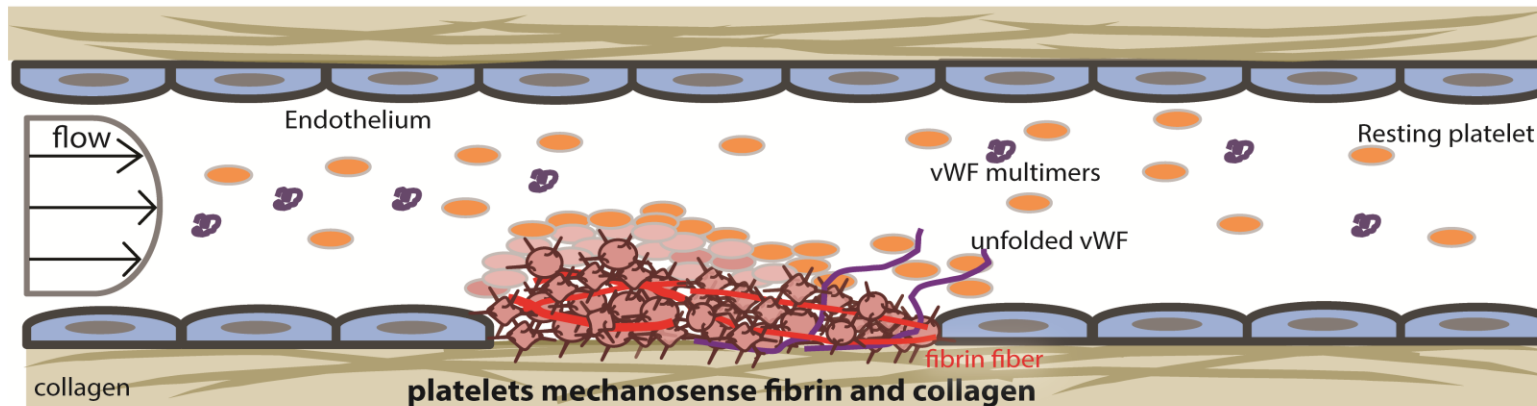
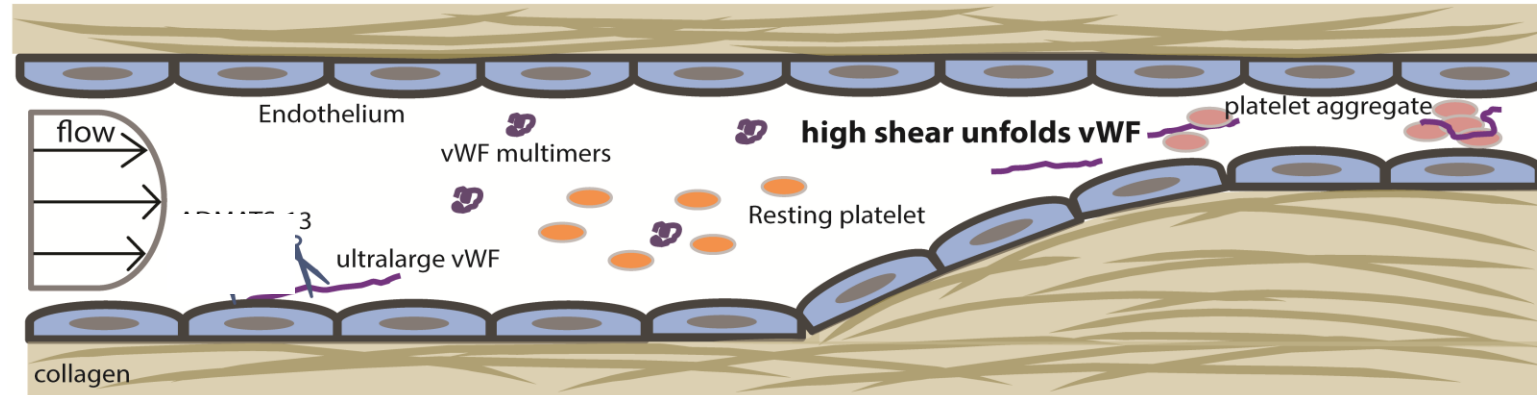
do platelets sense and physiologically respond to their mechanical microenvironment?



Chen, *J Cell Sci* 2008

Huveneers et al. *J Cell Sci* 2009

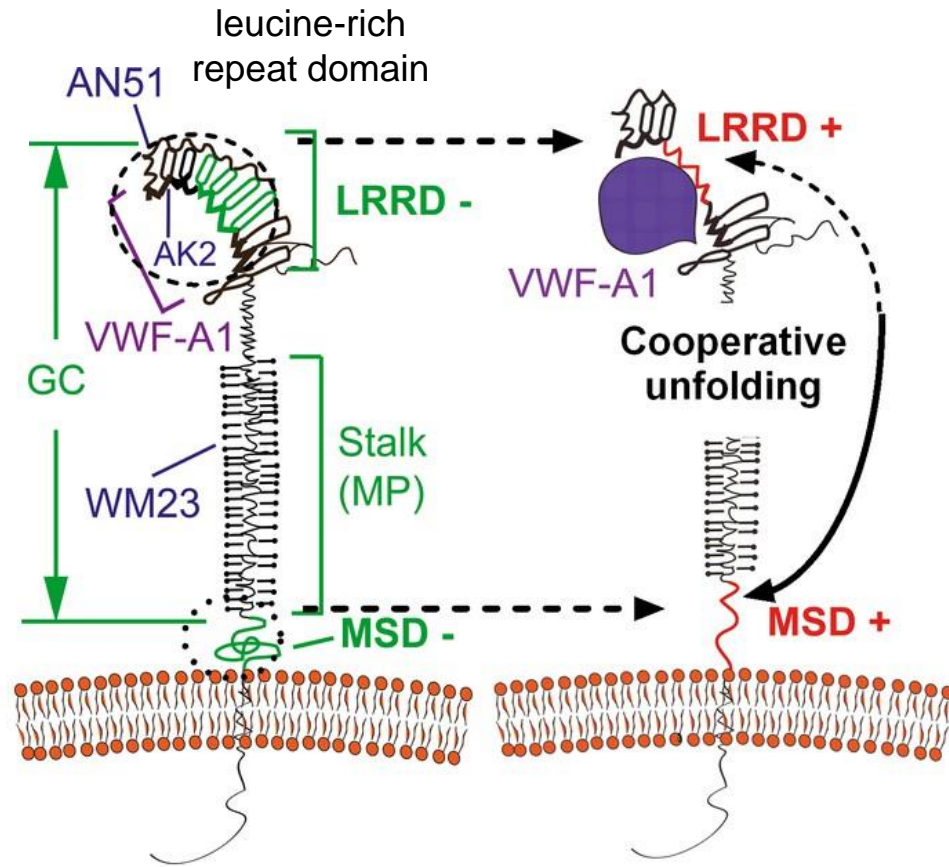
platelets function in a dynamic mechanical microenvironment



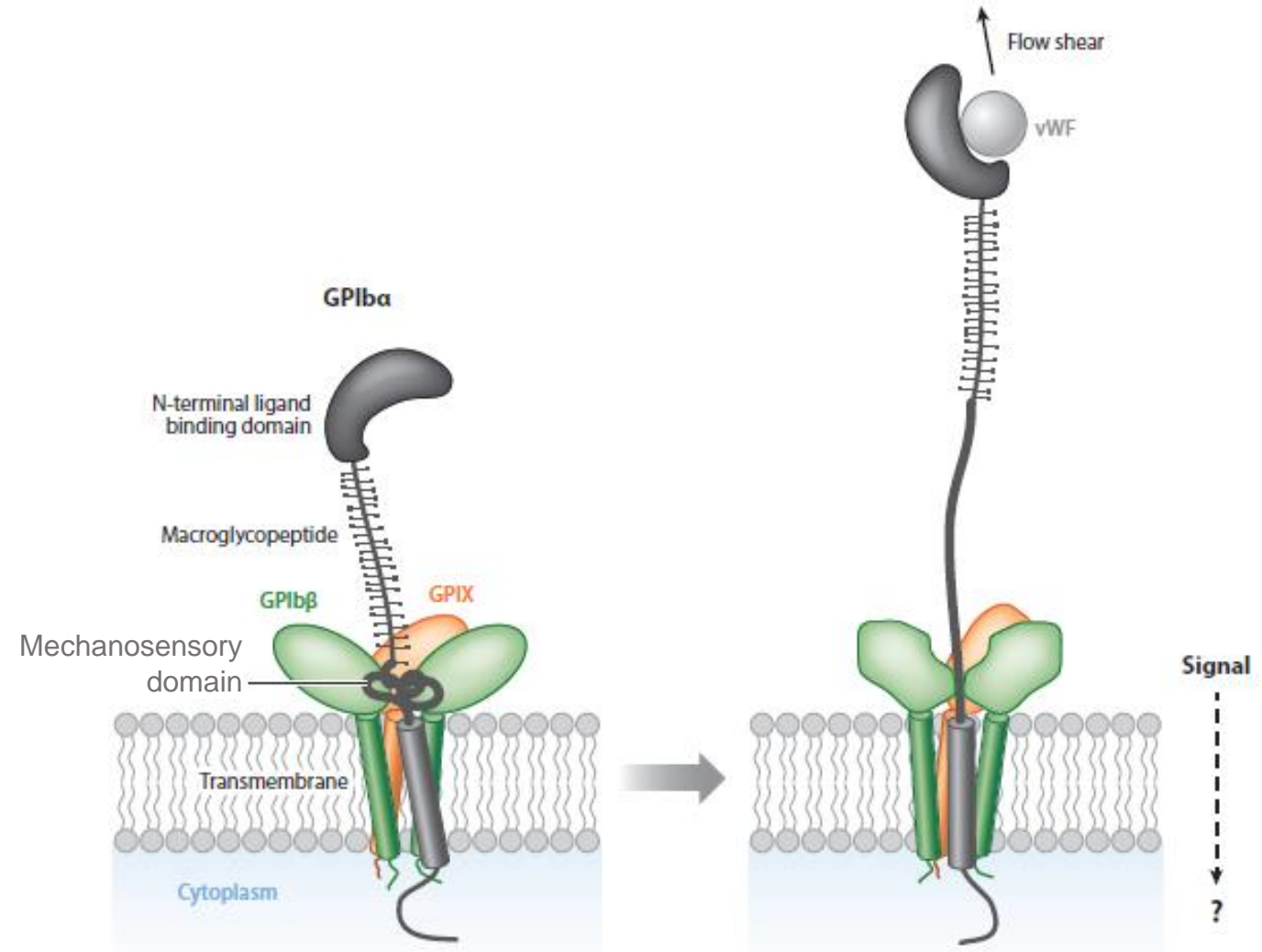
Qiu Y et al, *Blood Rev* 2015

how do fluid mechanics affect platelet physiology?
how do clot mechanics affect platelet physiology?

platelet mechanosensing under flow conditions focus on von willebrand factor-platelet interactions

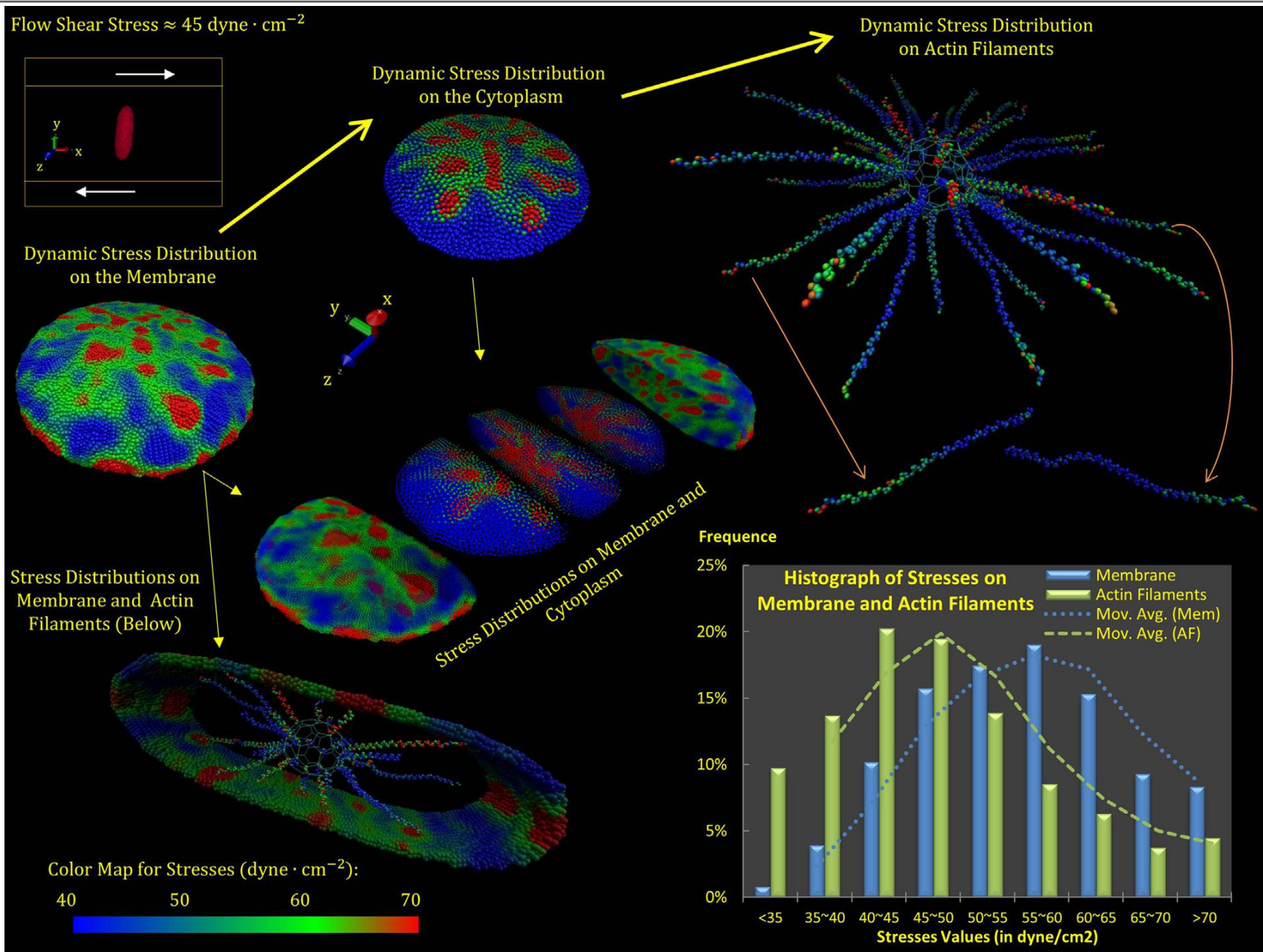


Ju L et al, *Elife* 2016

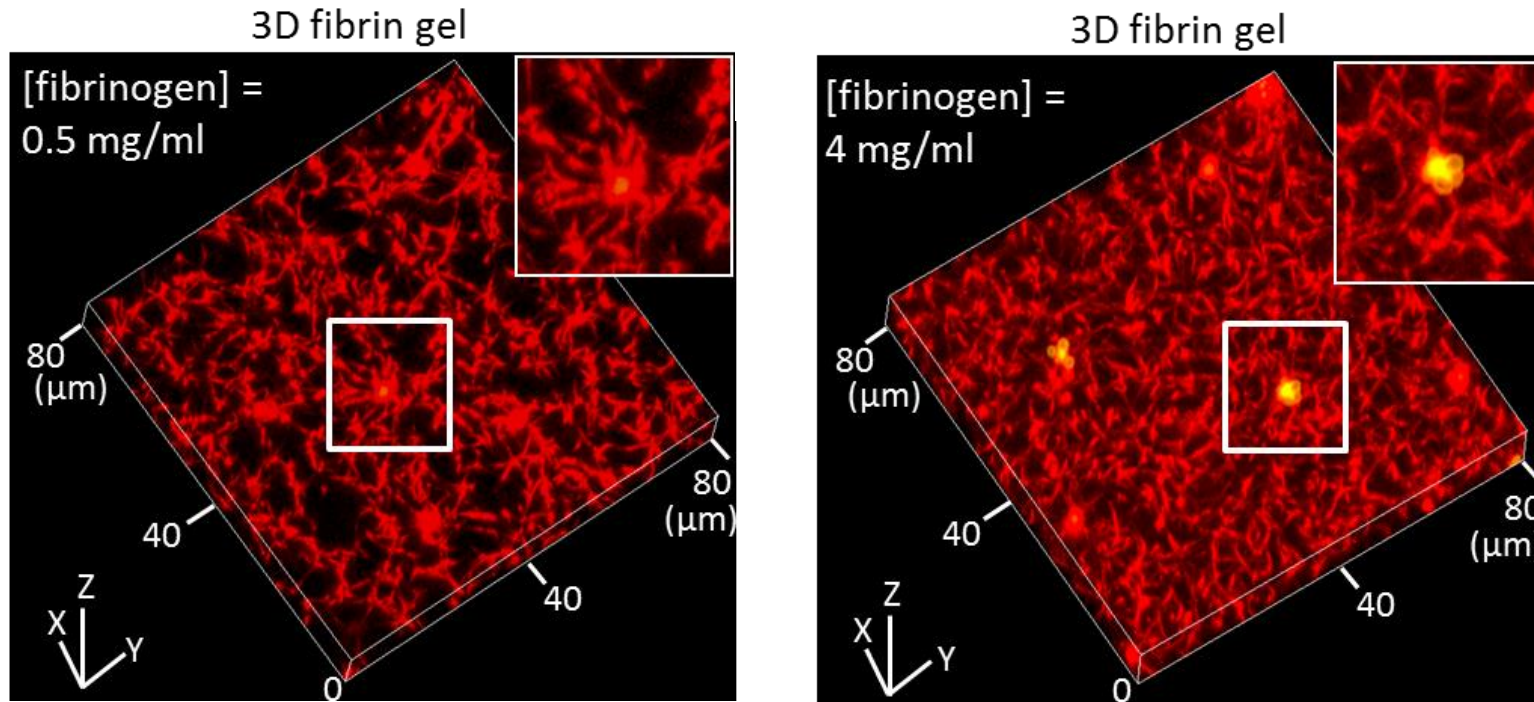


Zhang W et al, *Blood* 2015

in silico approaches have revealed stress profiles of individual platelets under flow conditions



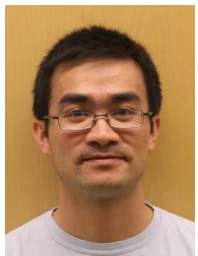
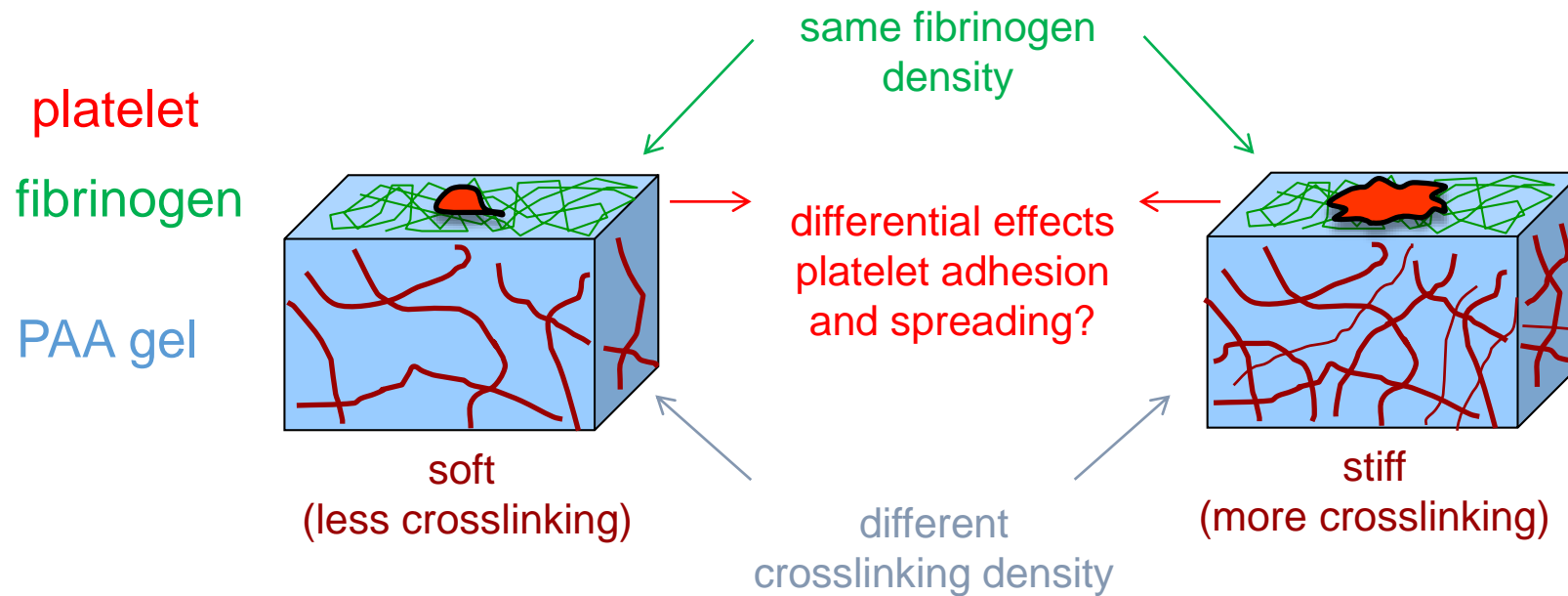
can clot and vascular mechanics affect platelet physiology?



yellow-green = annexin V staining for phosphatidylserine

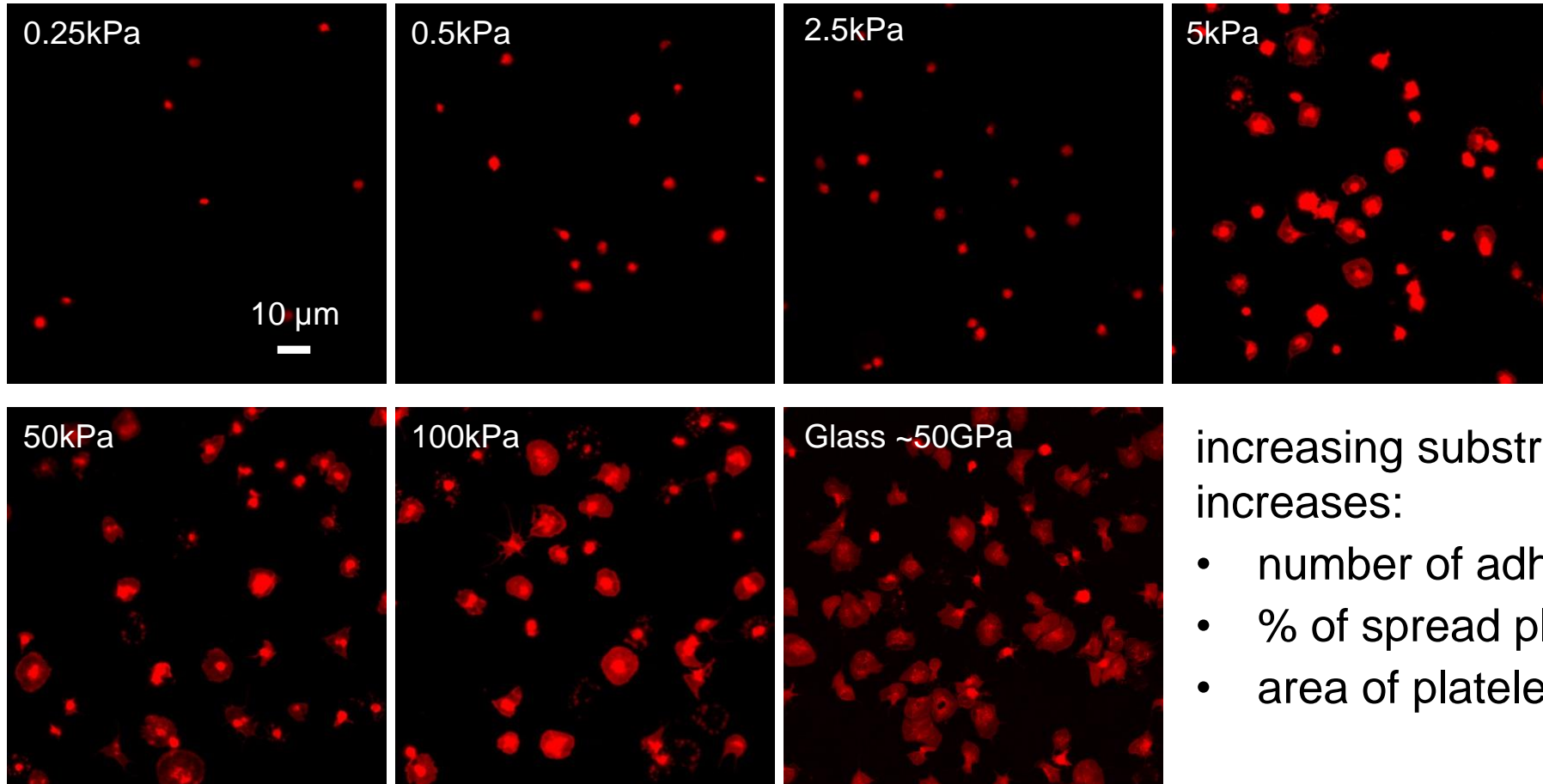
confounding factors associated with 3D fibrin gels: architecture, branching, ligand density all change with varying fibrinogen concentration

using fibrinogen-conjugated poly-acrylamide (PAA) gels to investigate how substrate stiffness affects platelet function



Yongzhi Qiu, PhD

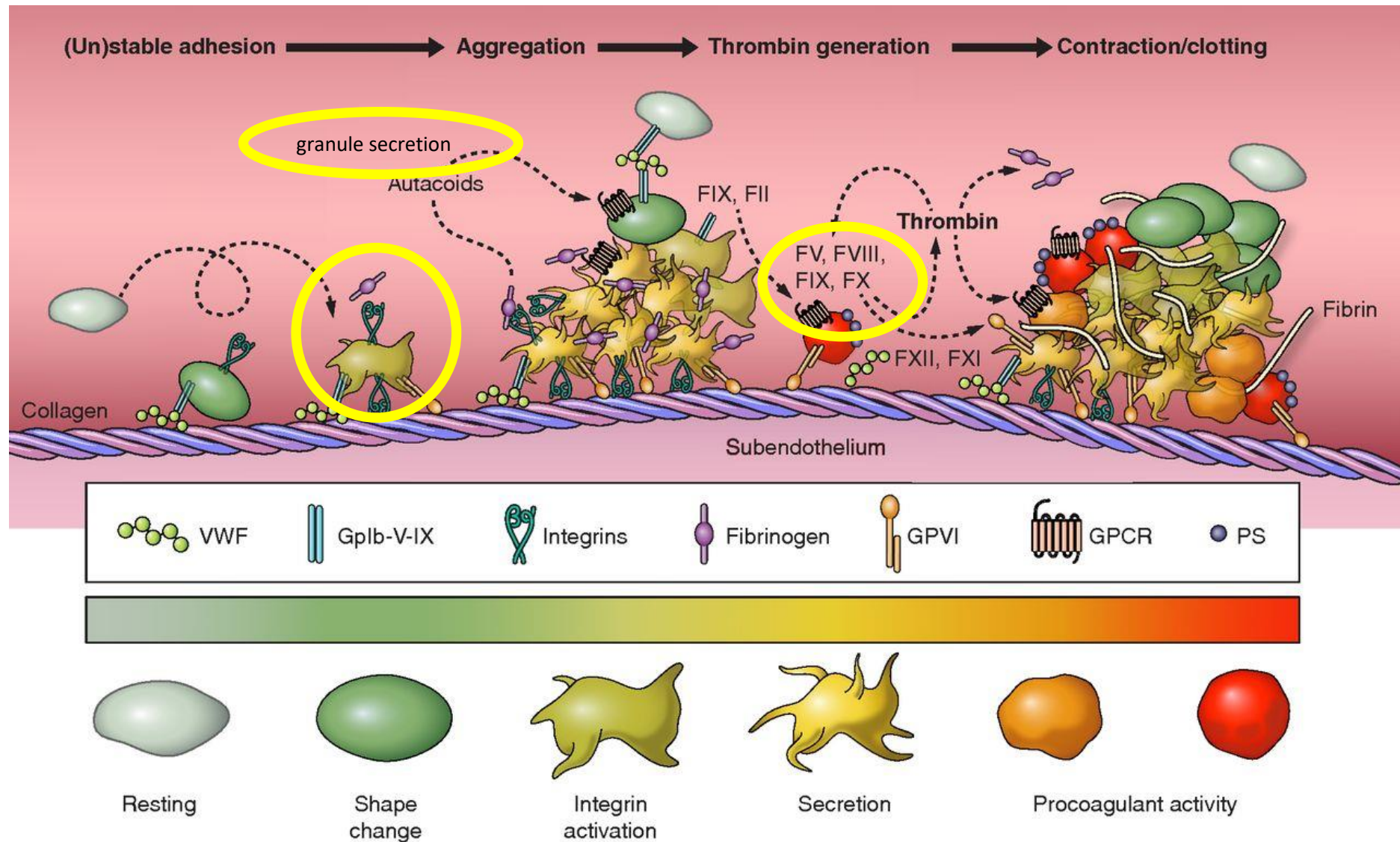
substrate stiffness mediates platelet adhesion and spreading on fibrinogen



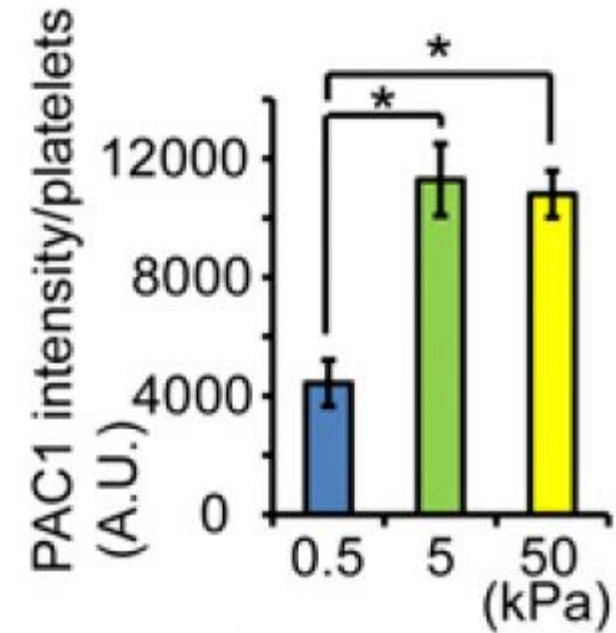
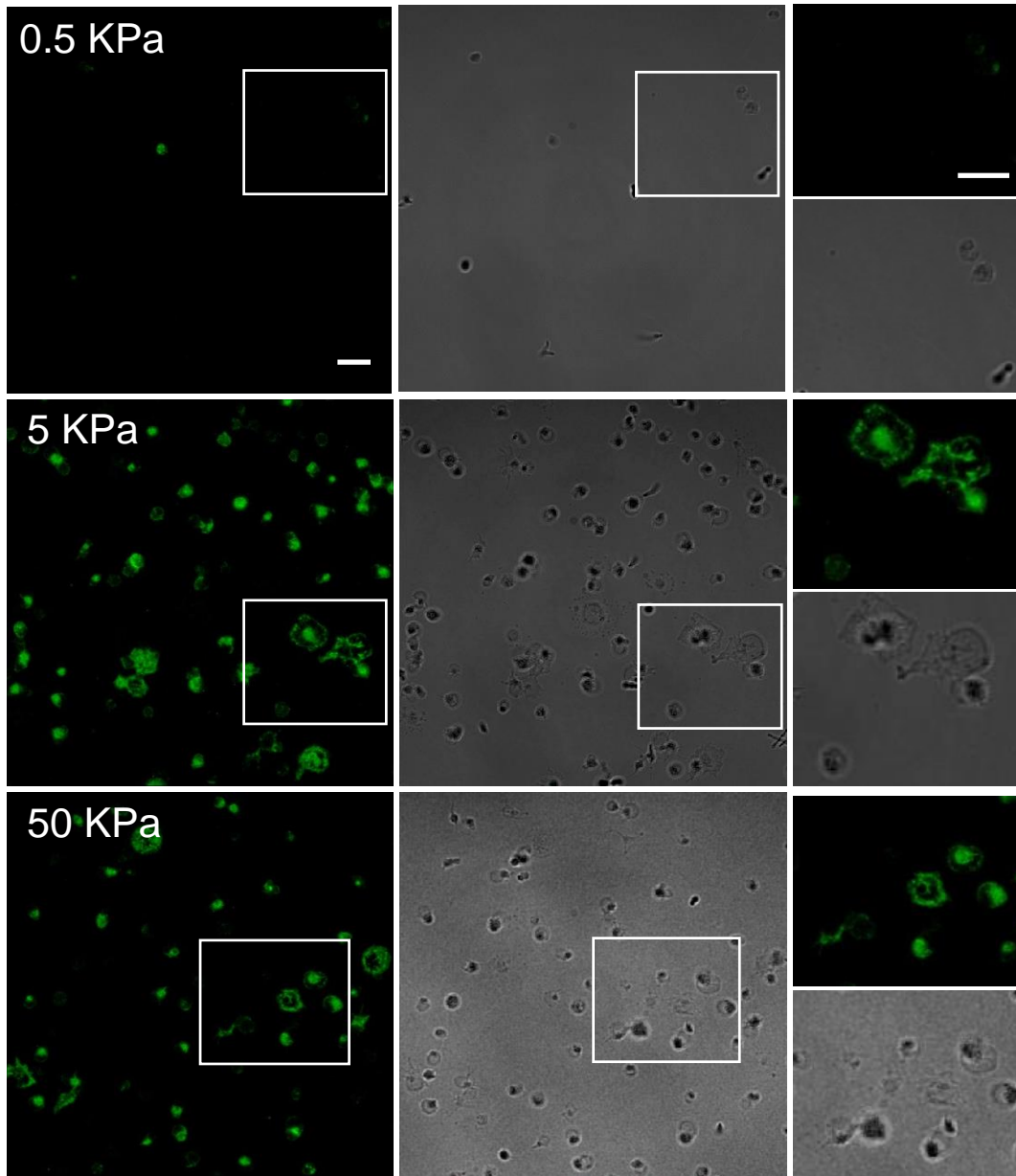
increasing substrate stiffness increases:

- number of adherent platelets
- % of spread platelets
- area of platelet spreading

how else does microenvironmental mechanotransduction affect platelet function?



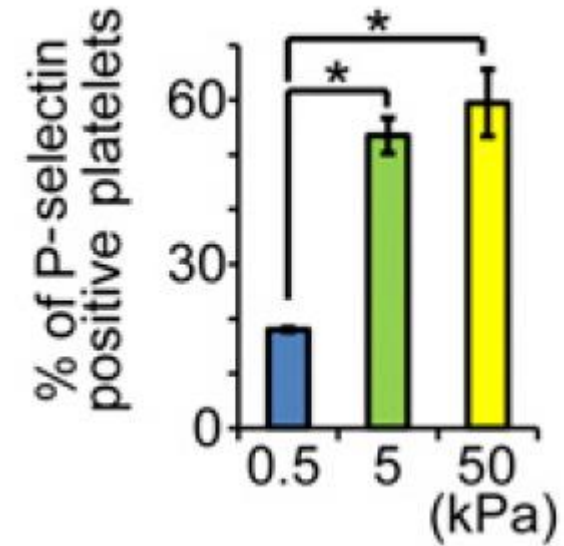
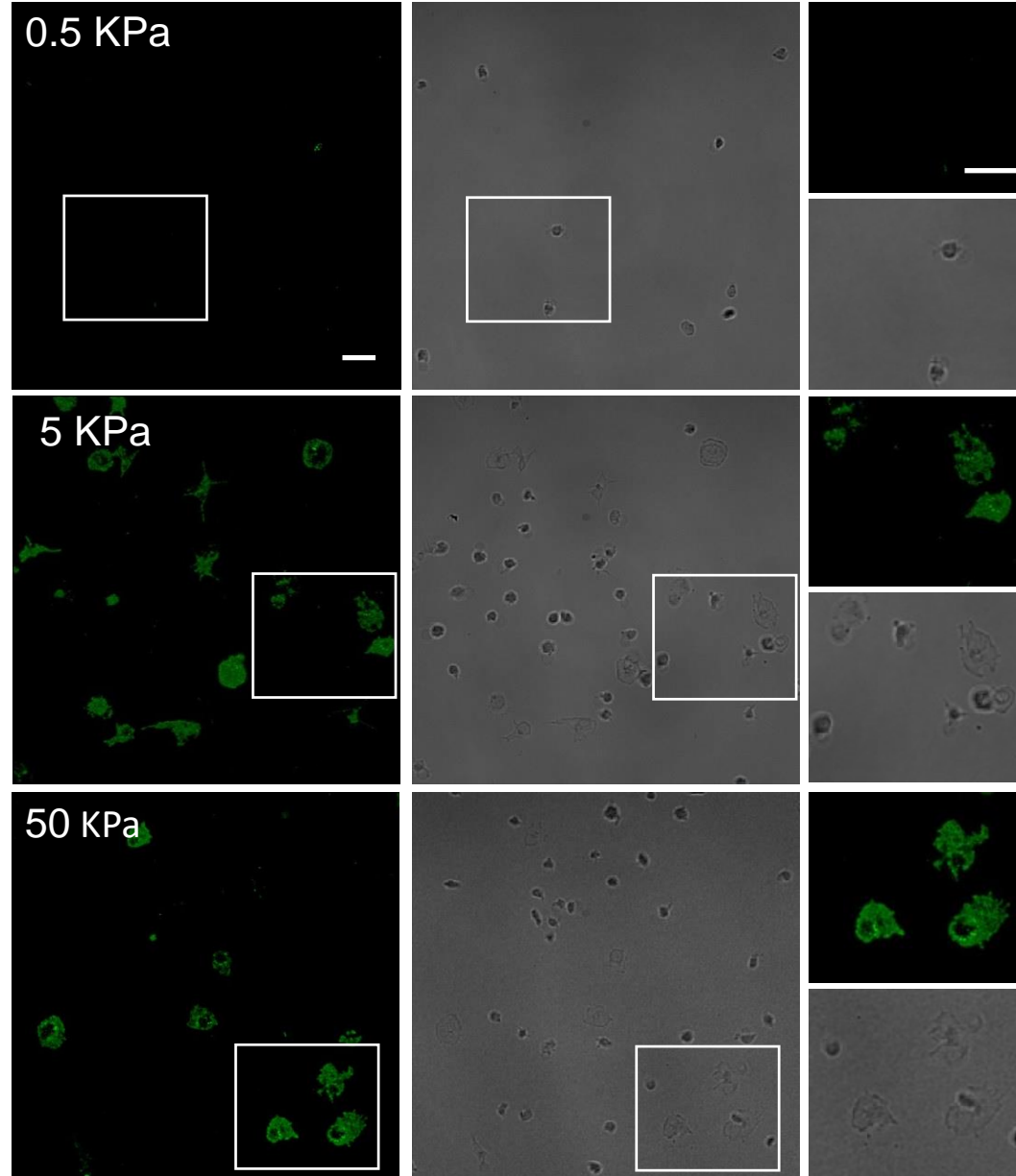
substrate stiffness affects platelet integrin $\alpha_{IIb}\beta_3$ activation



green = PAC-1 antibody →
labels only activated $\alpha_{IIb}\beta_3$
integrins

scale bars = 10 μ m

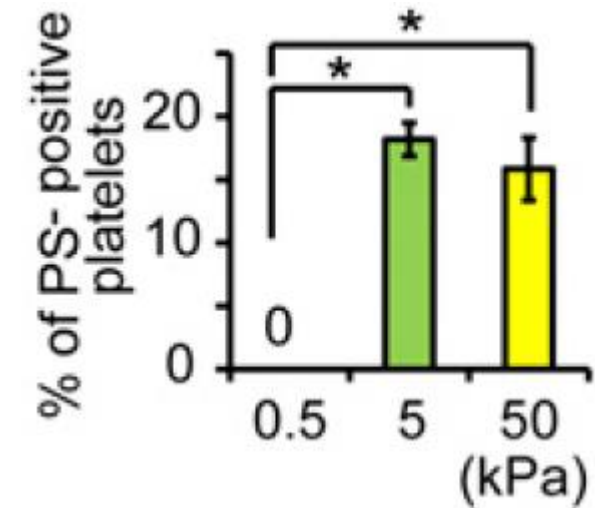
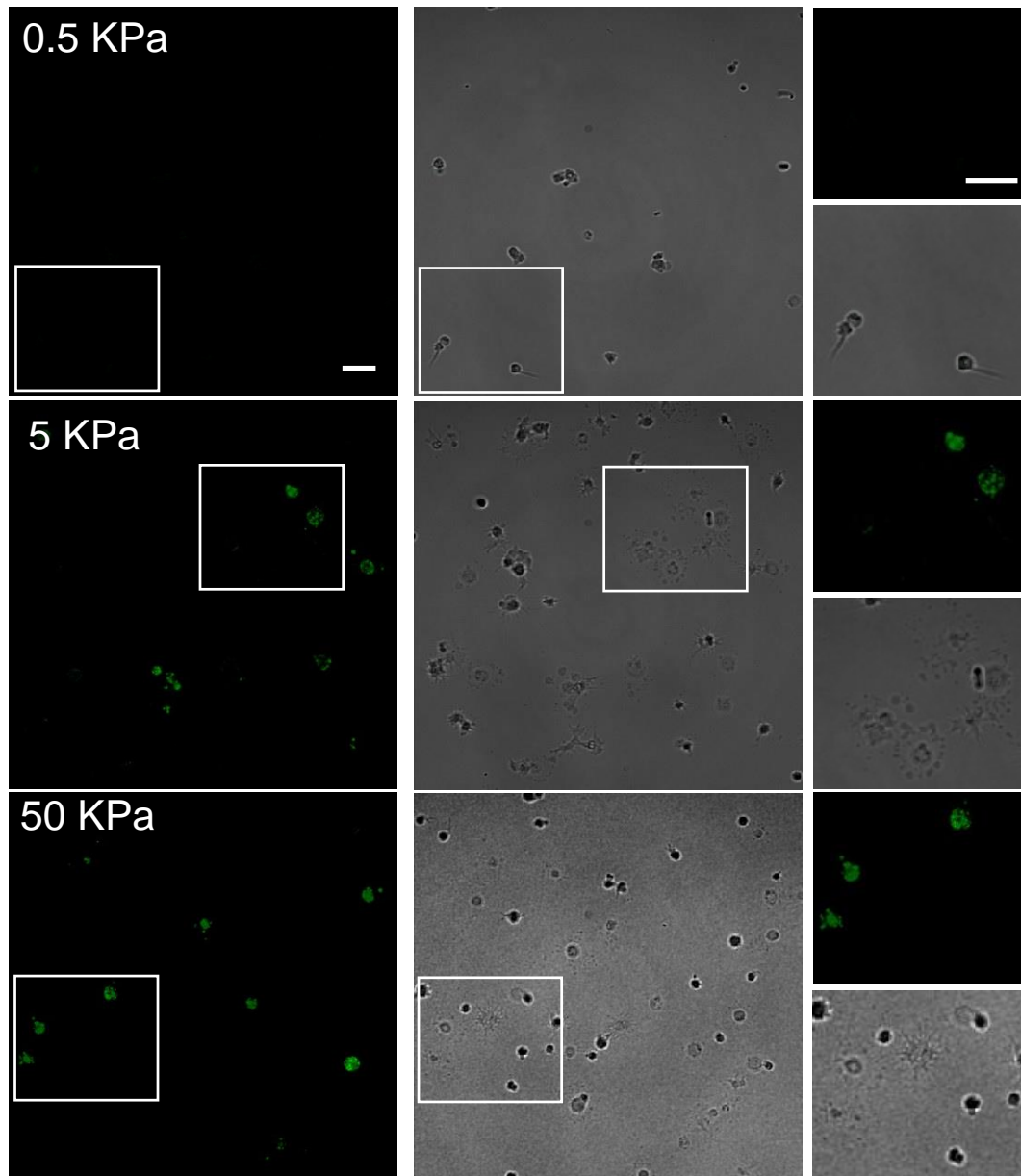
substrate stiffness affects platelet α -granule secretion



green= anti-P-selectin

scale bars = 10 μ m

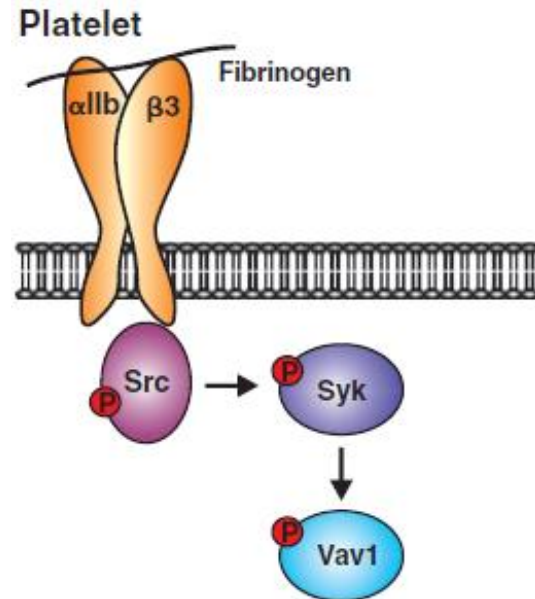
substrate stiffness affects platelet phosphatidylserine (PS) exposure



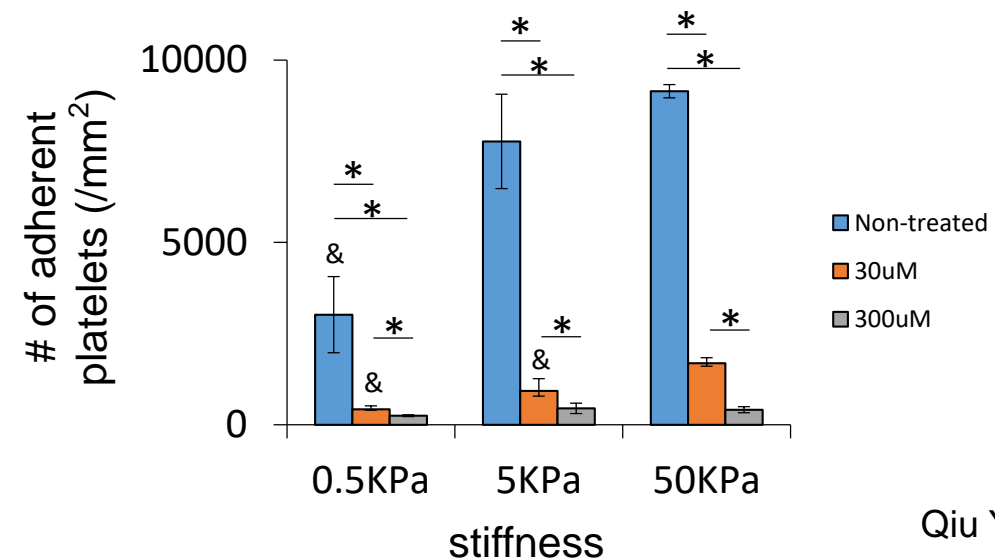
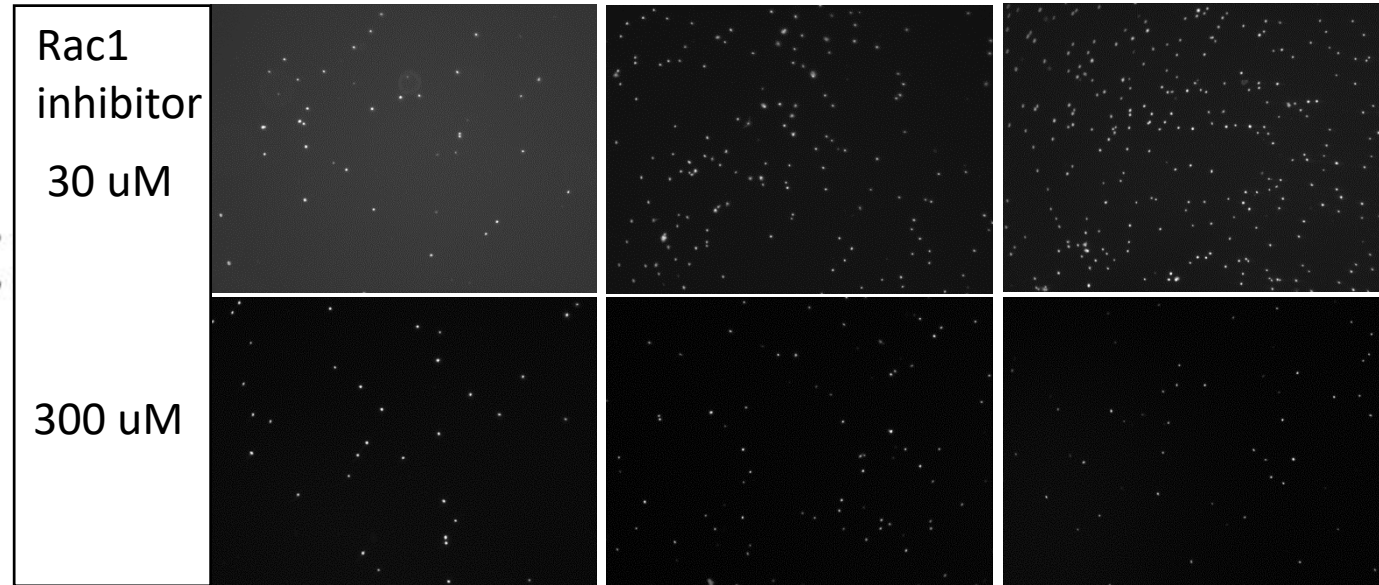
green = Annexin V →
labels PS

scale bars = 10 μ m

Rac1 mediates substrate stiffness dependence on platelet adhesion on fibrinogen

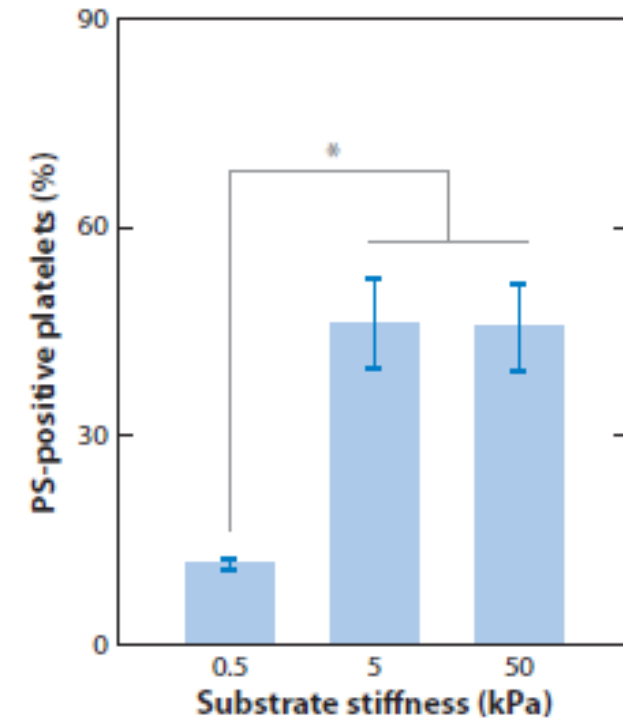
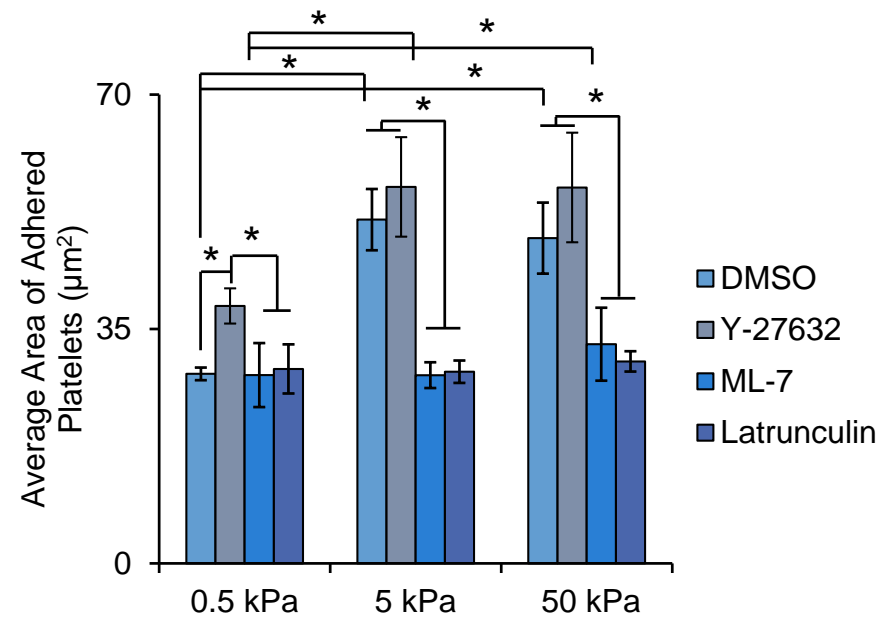
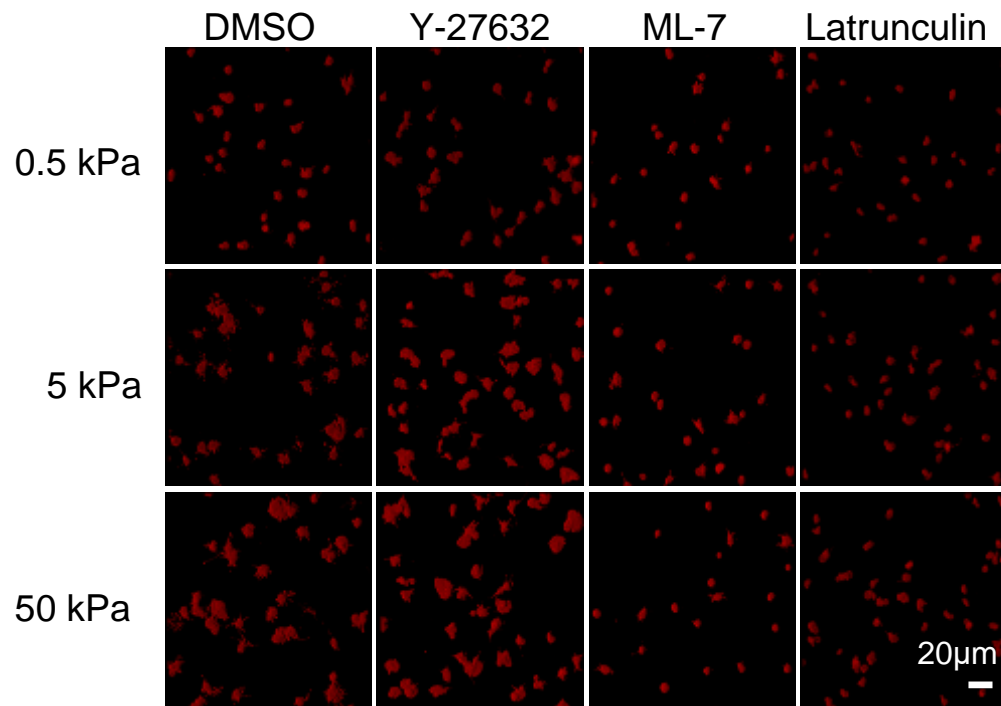


Huveneers et al.
J Cell Sci, 2009

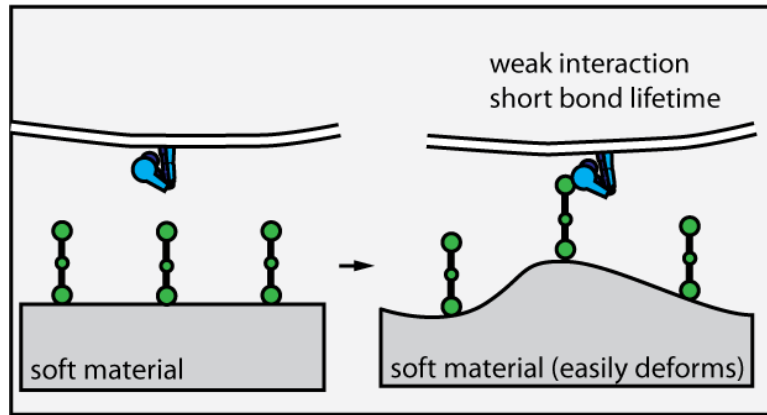


ROCK, MLCK, and actin polymerization affect substrate stiffness-dependent platelet spreading but not adhesion

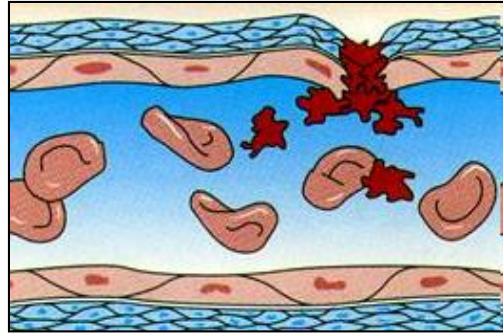
substrate stiffness mediates platelet adhesion and spreading on collagen via actomyosin



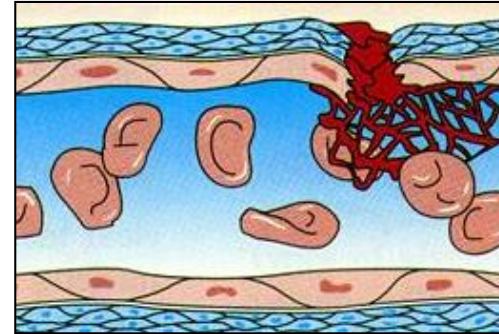
potential role of platelet mechanosensing of substrate stiffness during clot formation



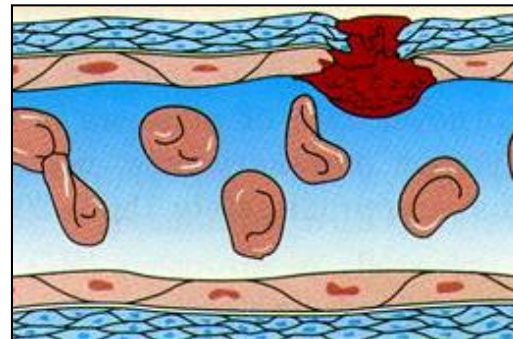
how does platelet mechanotransduction affect clot mechanics and stability?



platelet plug at injury site



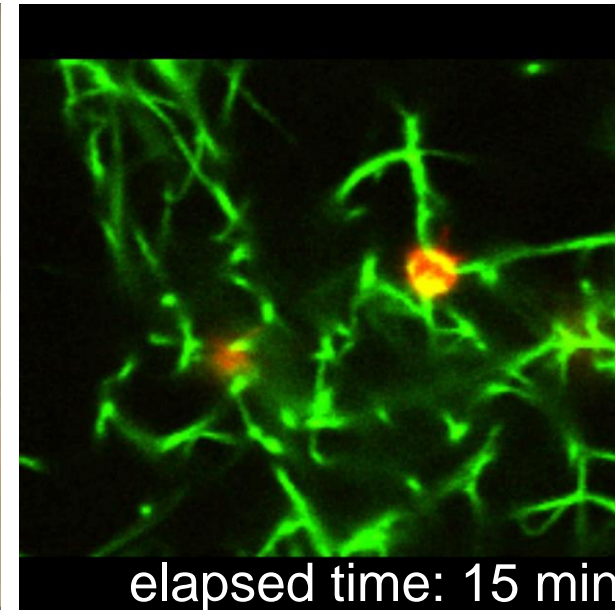
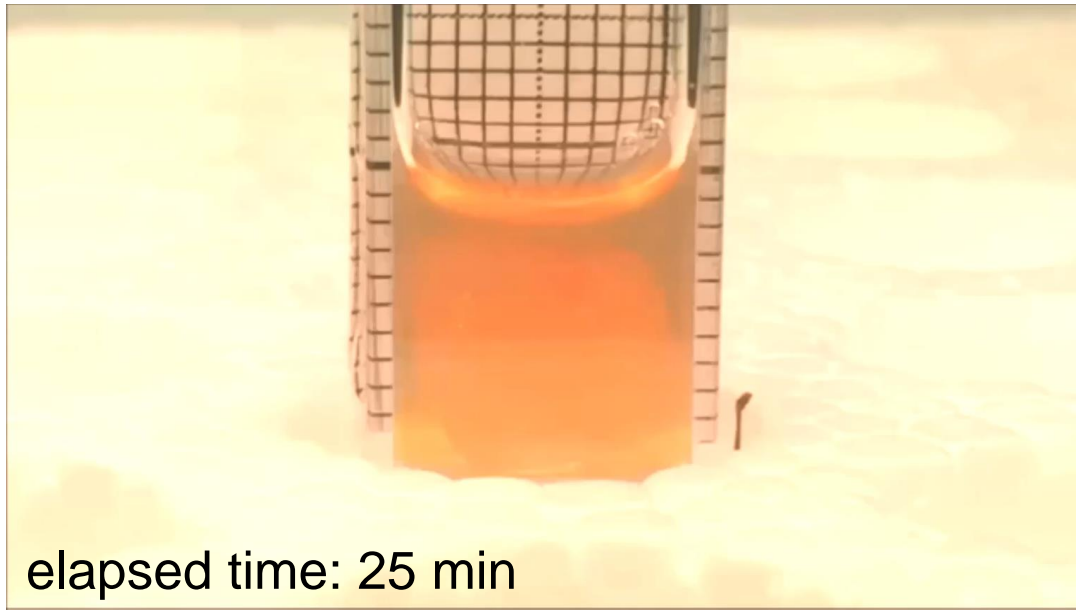
fibrin formation



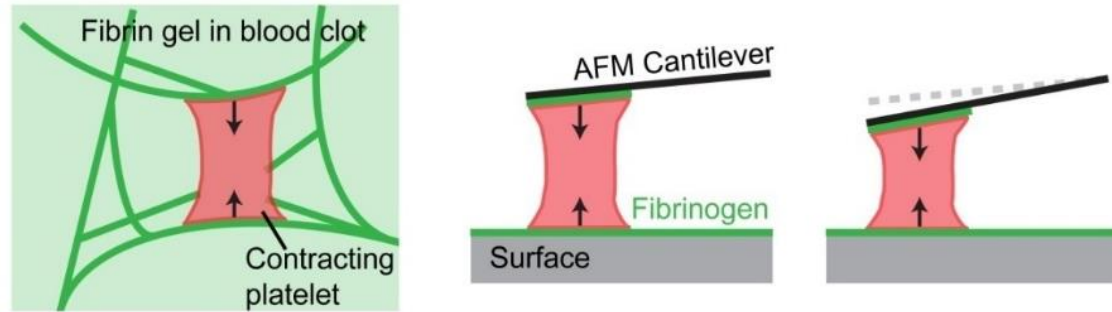
clot contraction

platelet-mediated contraction mechanically reduces clot volume via actomyosin signaling

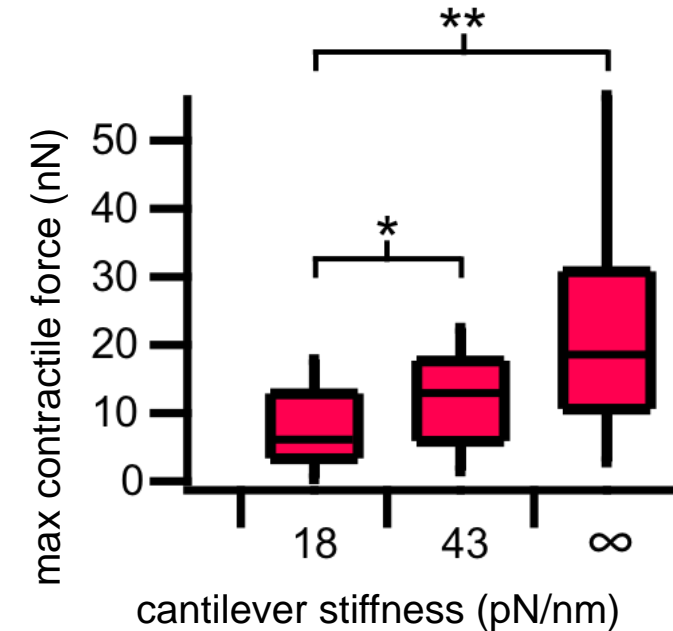
platelets + fibrinogen + thrombin



platelet contraction occurs at high forces and is mediated by the mechanical microenvironment



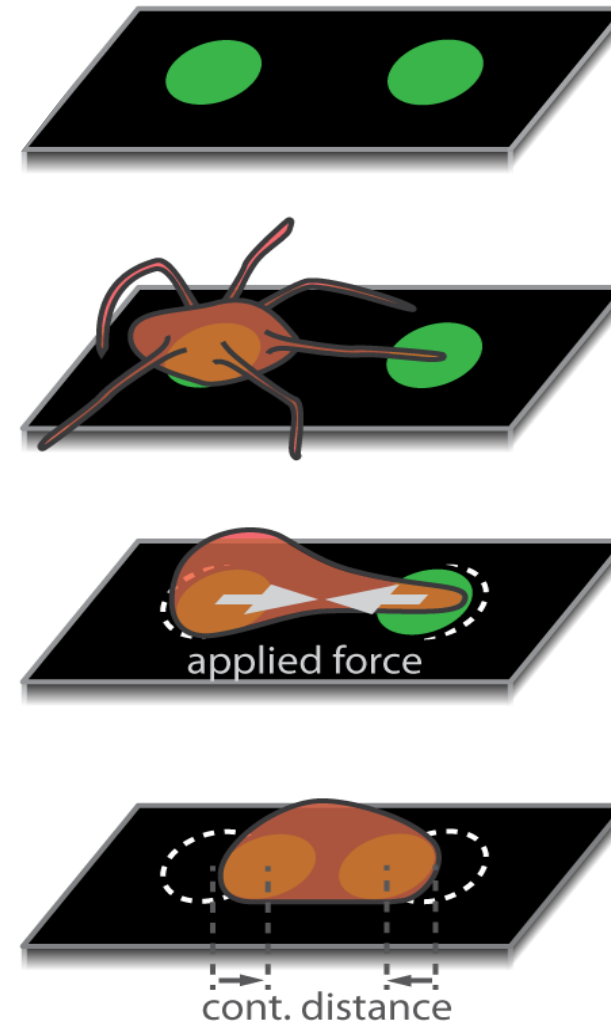
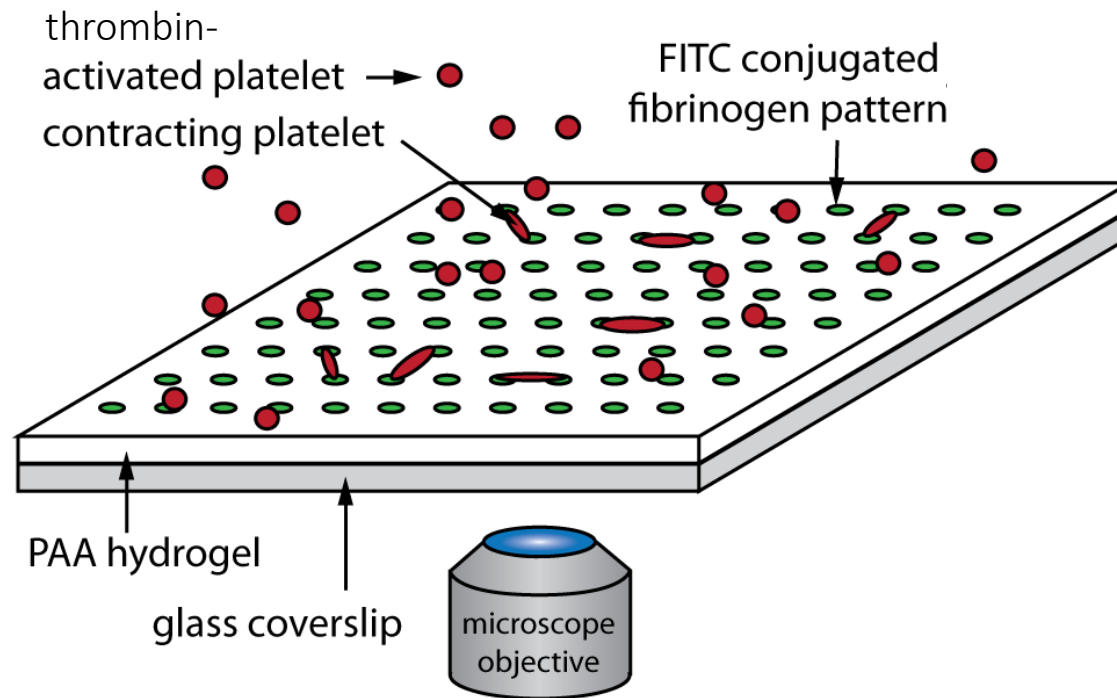
atomic force microscopy (AFM) measurements of single platelet contraction



* $p < 0.05$, ** $p < 0.001$

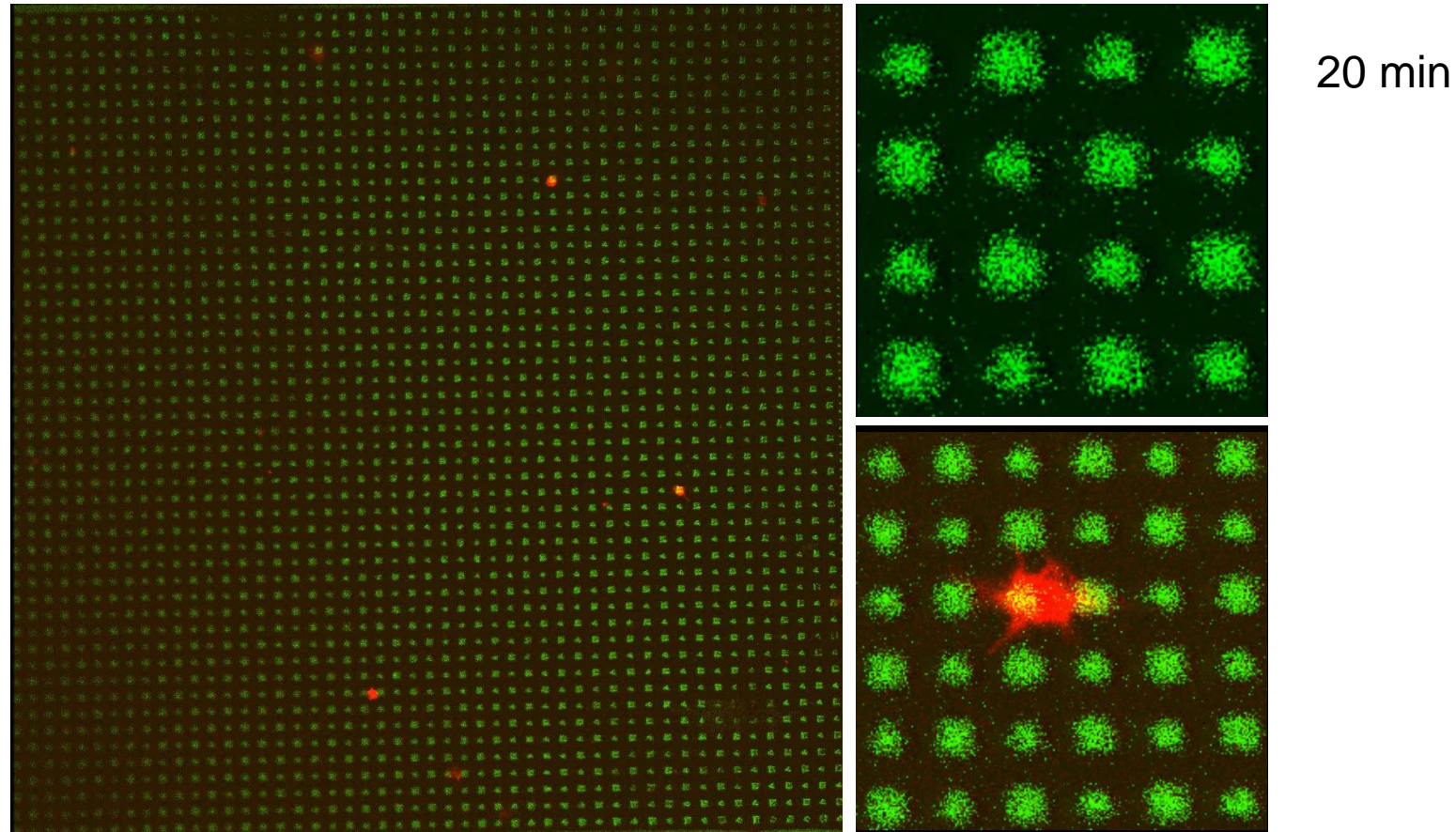
- platelet contraction occurs near instantaneously upon contact
- platelet contractile force nears myocyte contractile force
- platelets “sense” their mechanical microenvironment and contract with higher forces on stiffer substrates

higher throughput “platelet contraction cytometry” via a hydrogel-based approach



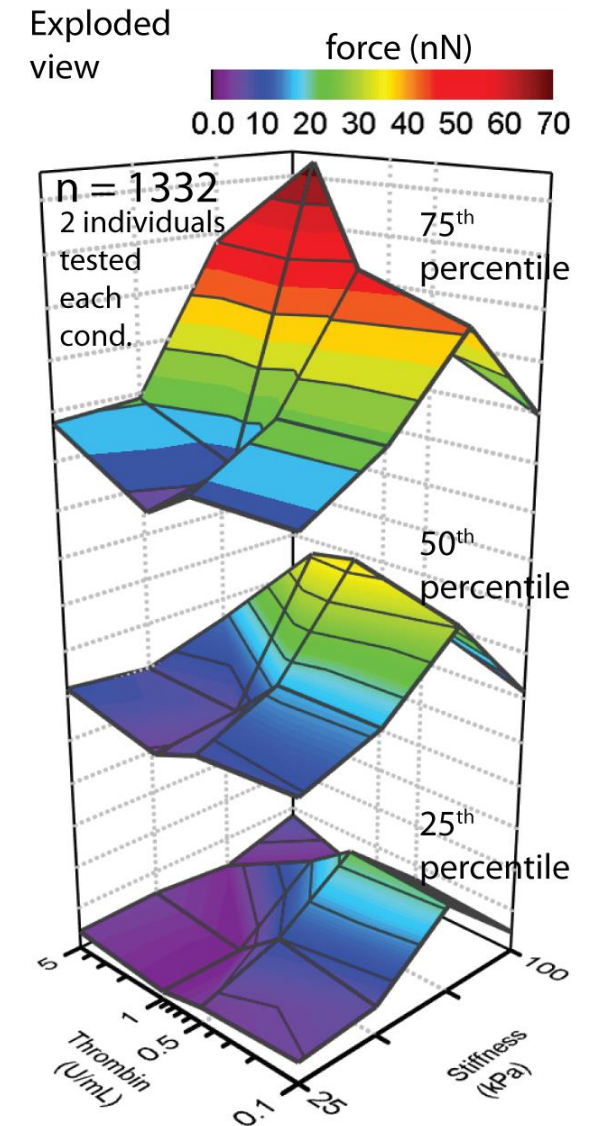
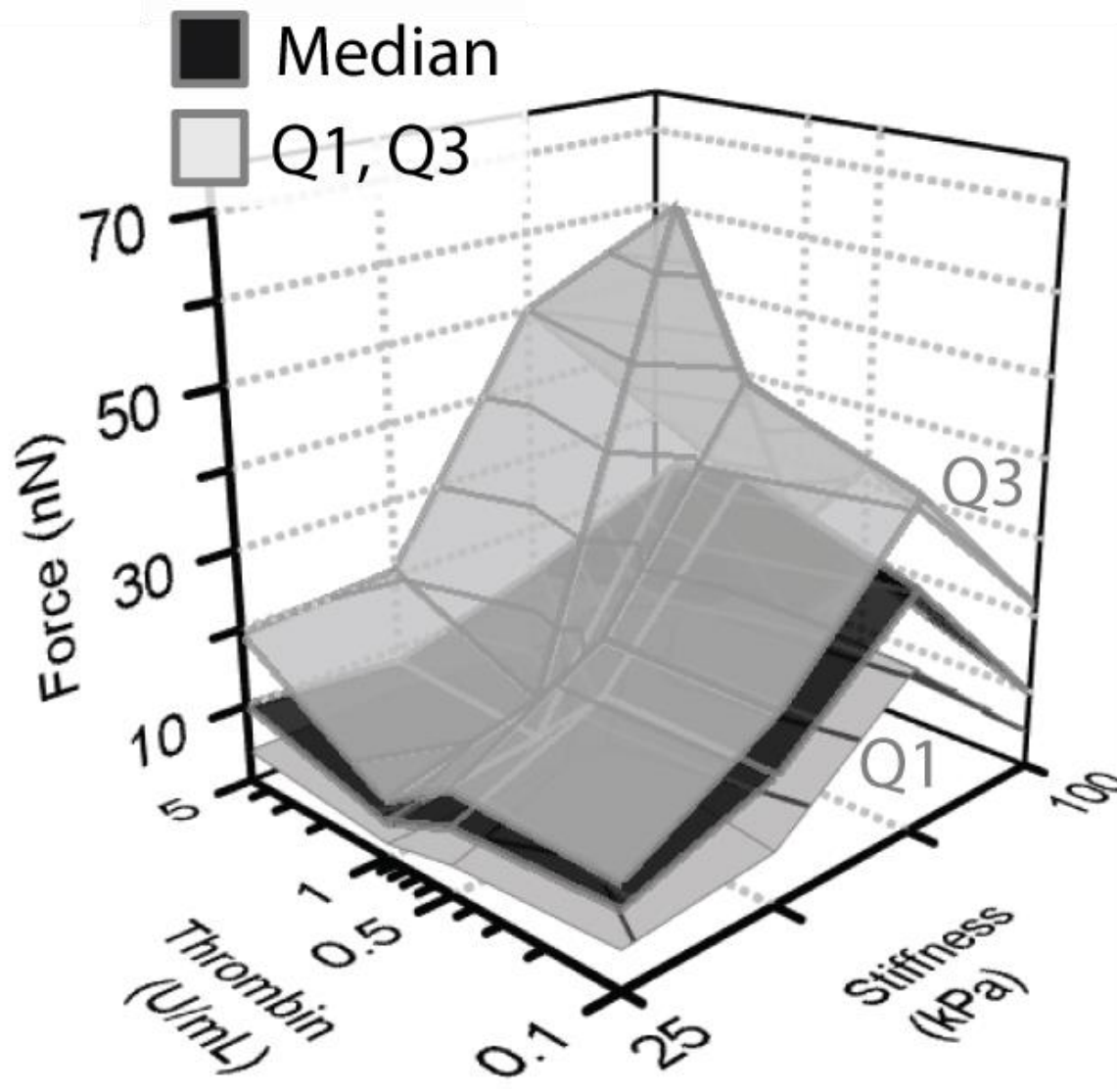
David R. Myers, PhD

live imaging videomicroscopy enables tracking of single platelet contraction

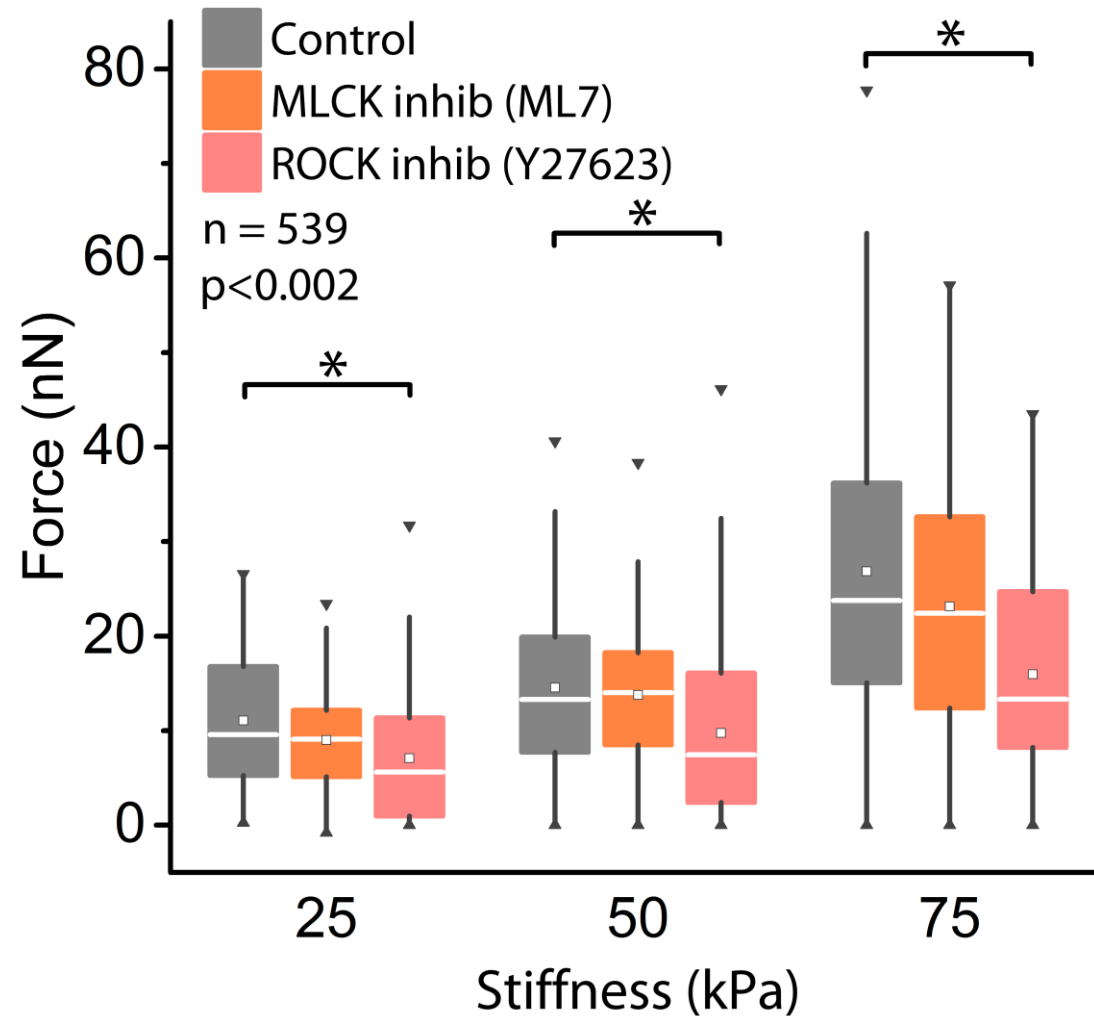


platelets = red fibrinogen = green

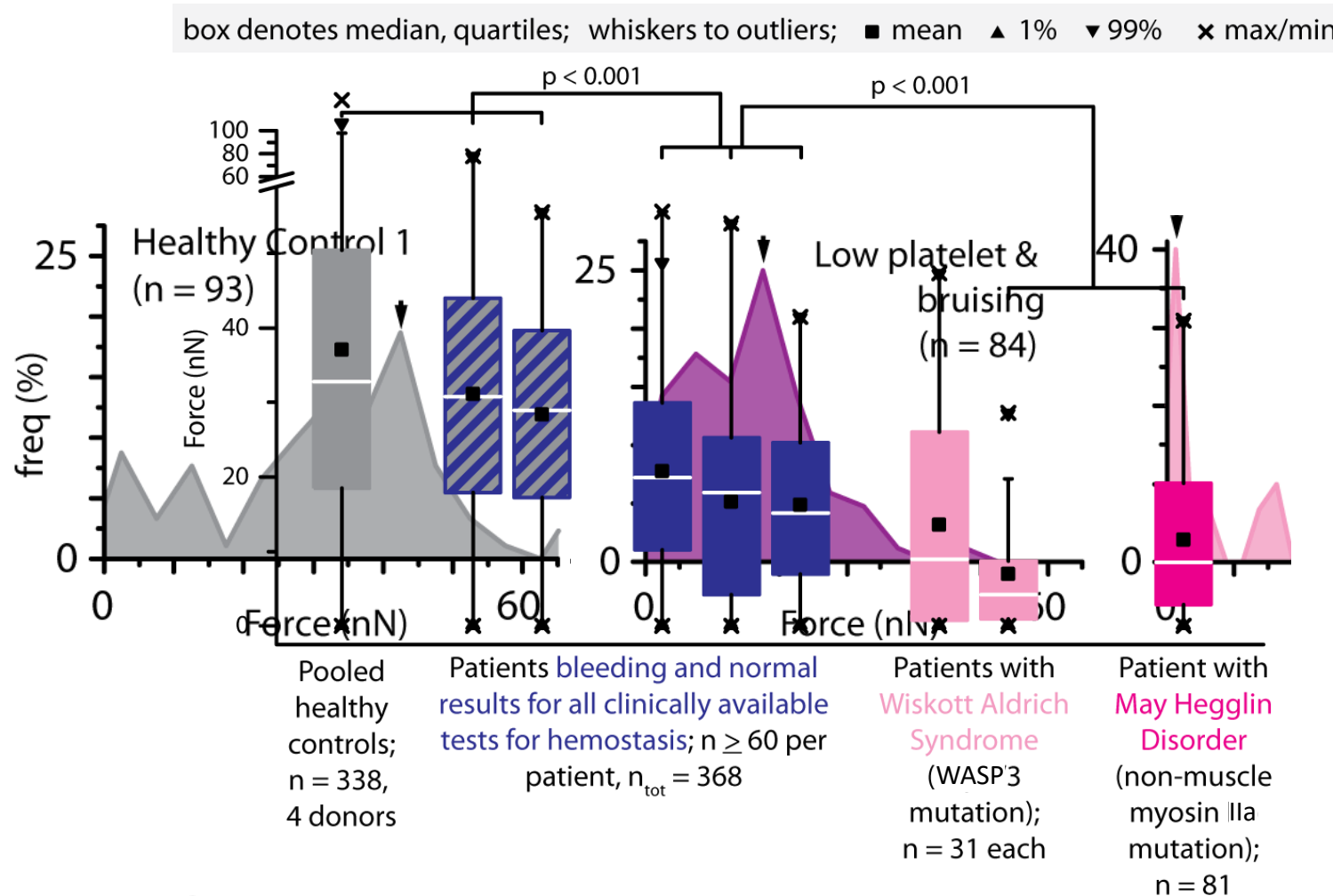
biochemical and mechanical cues synergistically mediate platelet contractile force



mechanotransductive platelet contraction is mediated by the Rho-associated protein kinase (ROCK) pathway



can platelet contraction cytometry be used as a potential clinical biophysical biomarker of platelet function?



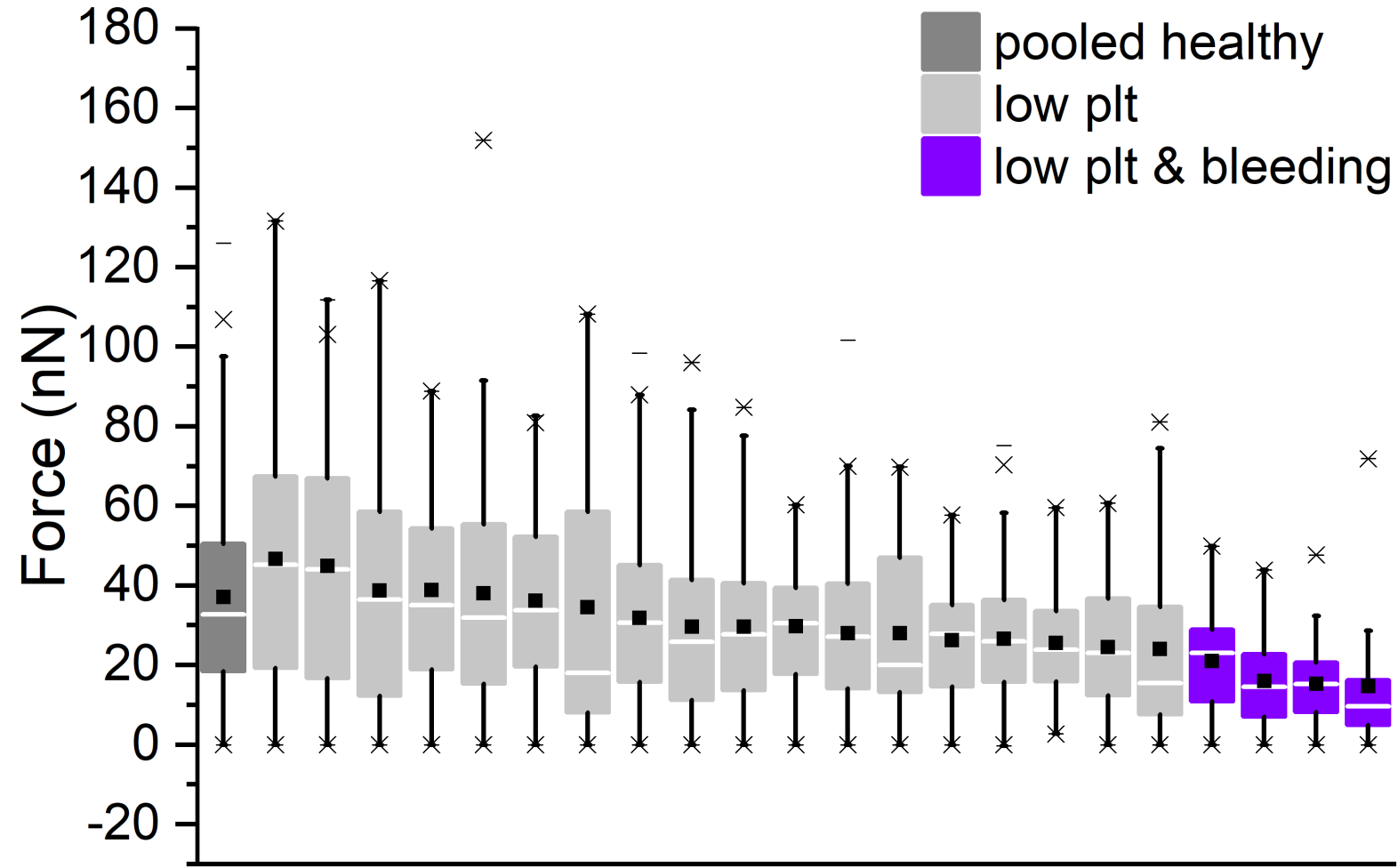
contraction force does not correlate with P-selectin expression, PS exposure, $\alpha_{IIb}\beta_3$ activation, or shear stress

can platelet contraction cytometry be used as a clinical biophysical biomarker for immune thrombocytopenia (ITP)?



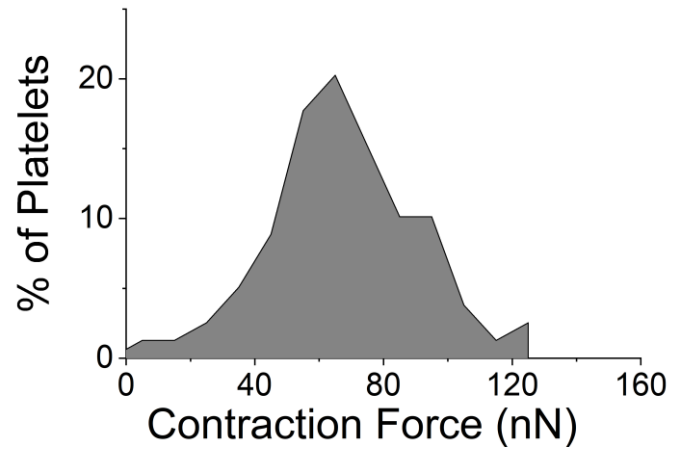
- low platelet count due to autoimmune destruction
- bleeding is a significant risk
 - 10% of patients have major bleeding
 - 0.5% have life-threatening intracranial hemorrhage
- most patients self-resolve, but a minority develop chronic ITP
- typical clinical tests of platelet function are confounded by the low platelet count
- no existing biomarker reliably predicts
 - who needs treatment
 - who will become chronic
 - which patients are prothrombotic

preliminary platelet contraction cytometry data reveal lower average platelet contractile forces in symptomatic ITP patients

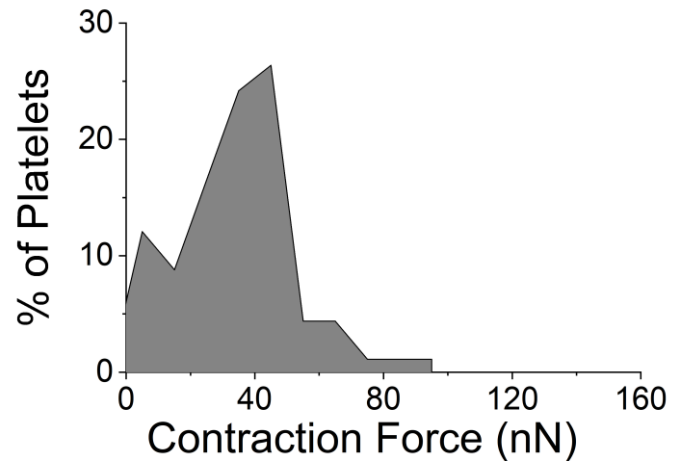


platelet contraction cytometry detects distinct platelet contractile subpopulations in ITP patients

Healthy Control

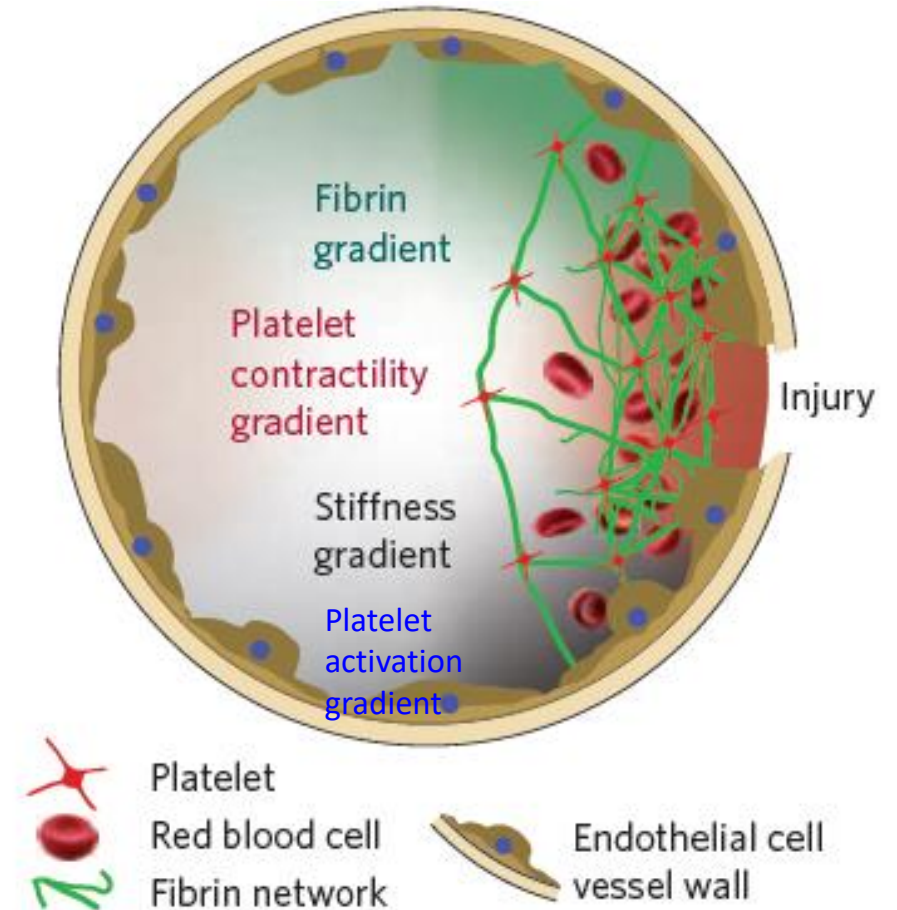


Healthy Control



conclusions

- mechanical microenvironment of the nascent clot and vessel wall directly mediates, and is mediated by, platelet physiology and function
- platelet mechanotransduction:
 - drives platelet contraction, which further alters the mechanics of the nascent clot
 - may be leveraged for diagnostic applications as “biophysical biomarkers”
- provides insight into platelet aggregation and help explain the heterogeneity of platelet activation in a growing thrombus
- important implications for implications for improving the biocompatibility of engineered biomaterials and medical implants



acknowledgements



Christina Caruso, Meredith Fay, Caroline Hansen, Elaissa Hardy, Rob Mannino, **David Myers**, Yumiko Sakurai, **Yongzhi Qiu**, Reggie Tran, Erika Tyburski, Kendall Williams

collaborators

Emory/Georgia Tech

- Carolyn Bennett, MD, MSc
- Michael Briones, DO

Boston University

- Michael Smith, PhD

Blood Center of Wisconsin

- Shawn Jobe, MD, PhD

UNC-Chapel Hill/NC State

- Ashley Brown, PhD

University of Virginia

- Tom Barker, PhD

funding



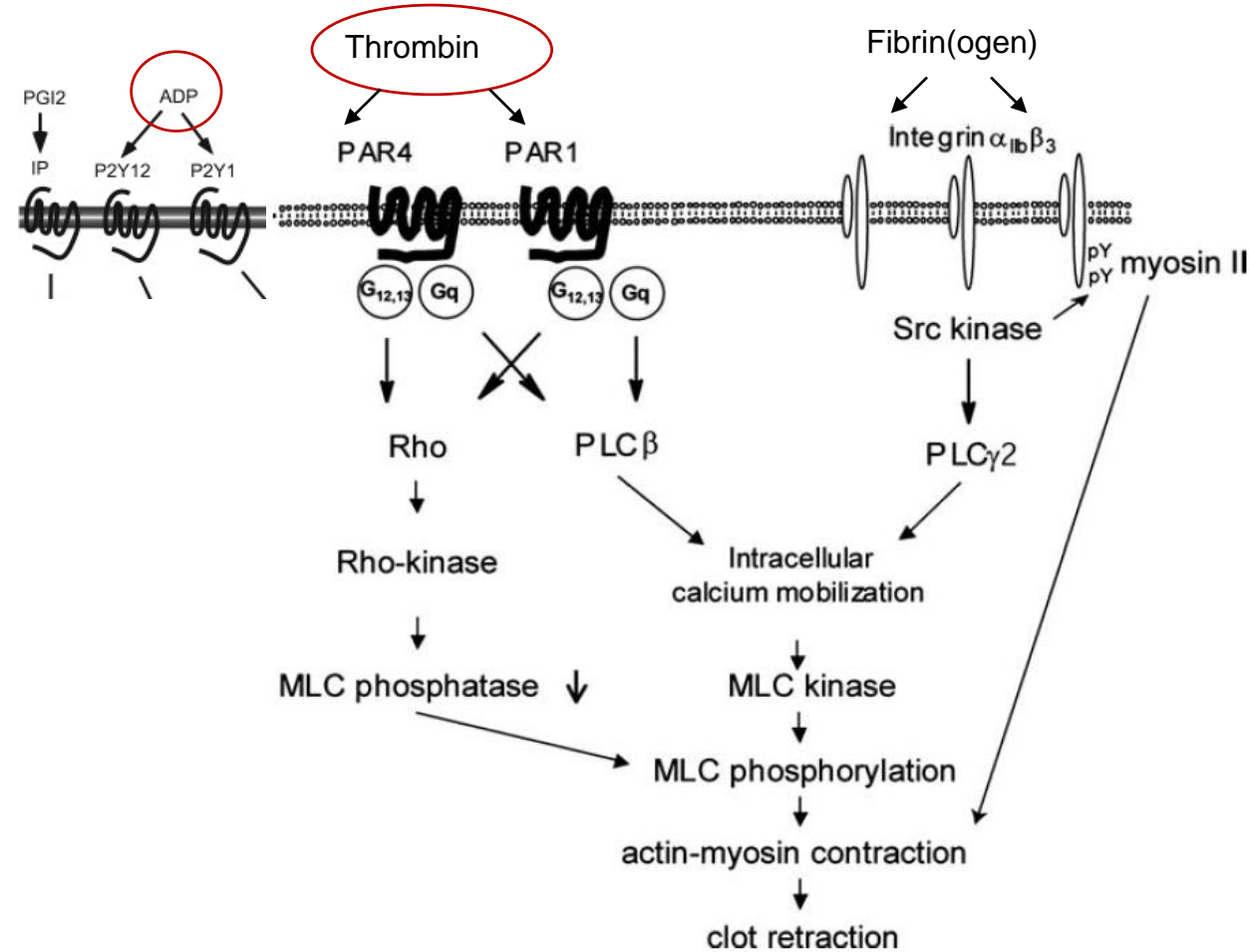
National Heart
Lung and Blood Institute



American
Heart
Association



the biological signaling of platelet contraction is well characterized,
but the associated biophysics is poorly understood



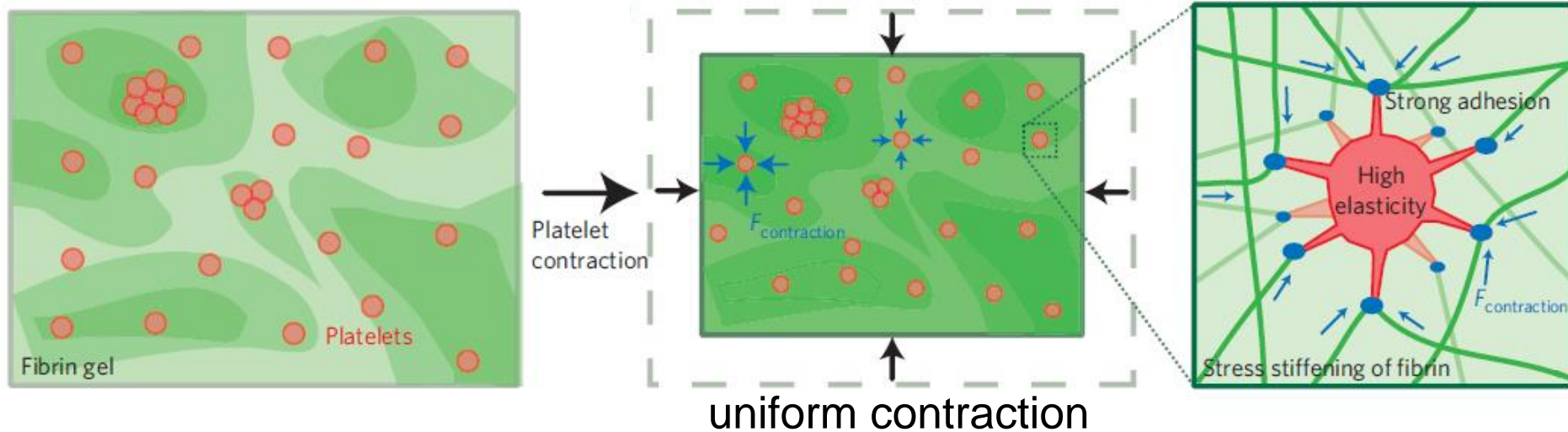
Li, Z. et al. *Arterioscler Thromb Vasc Biol* (2010)

Suzuki-Inoue et al, *Thrombosis Res* (2007)

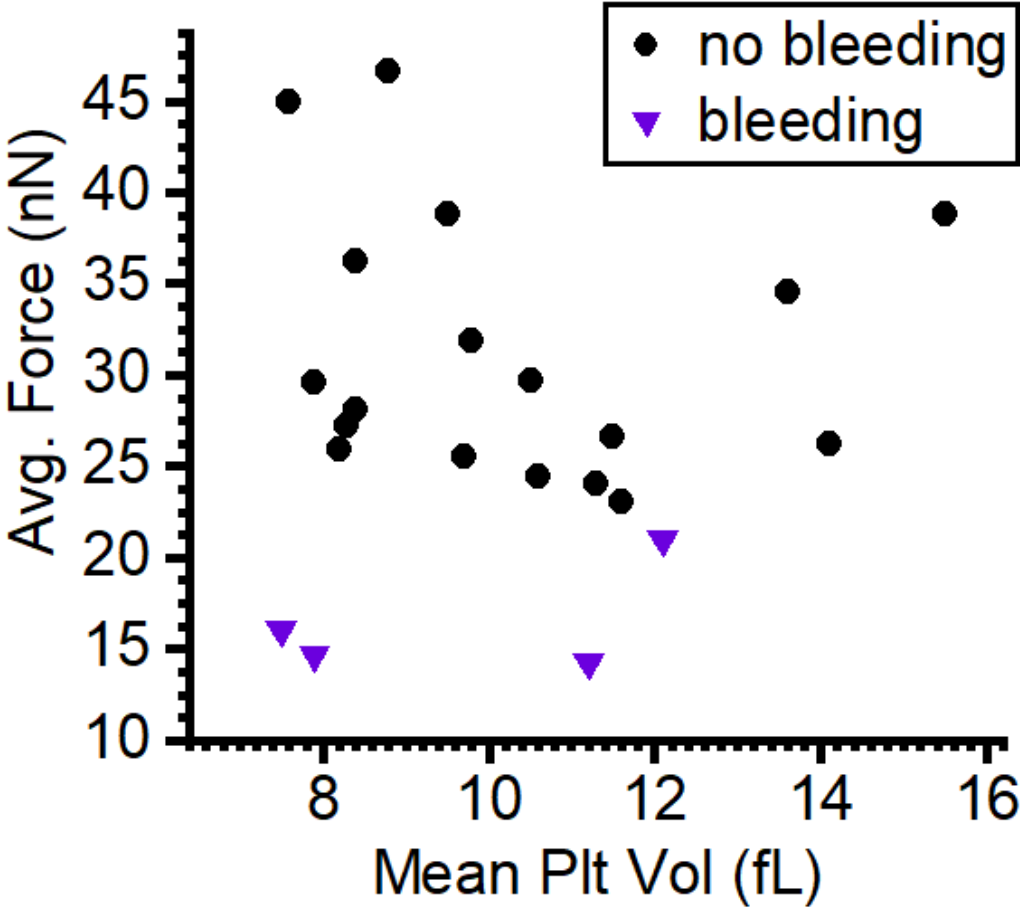
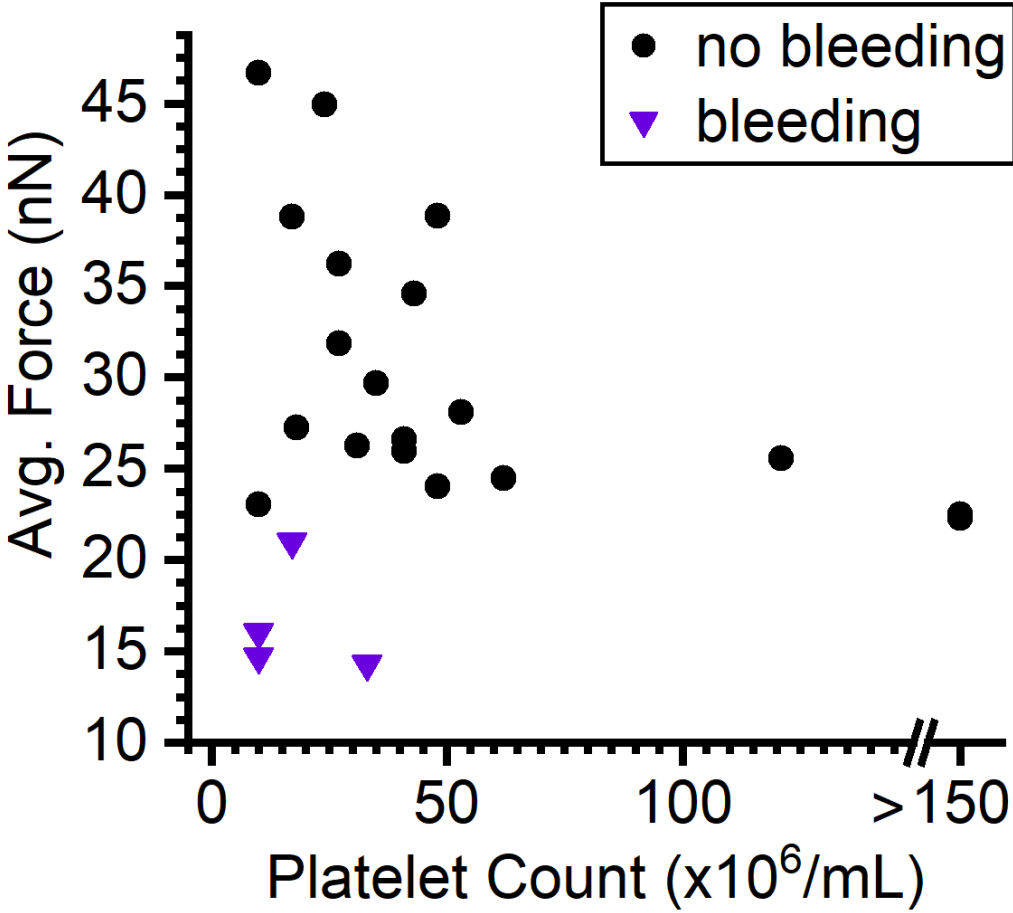
proposed cumulative effects of platelets on clot mechanics

- light shading = less dense, less stiff
- dark shading = more dense, more stiff

platelets may directly
increase elasticity through
multiple mechanisms



how do platelet count and platelet size relate to contractile force in ITP?



Biomimetic systems for *ex-vivo* platelet production

Avital Mendelson Ph.D.

Assistant Member, Lindsley F. Kimball Research Institute
Head, Stem Cell Biology and Engineering Research Program
New York Blood Center

It's A Numbers Game

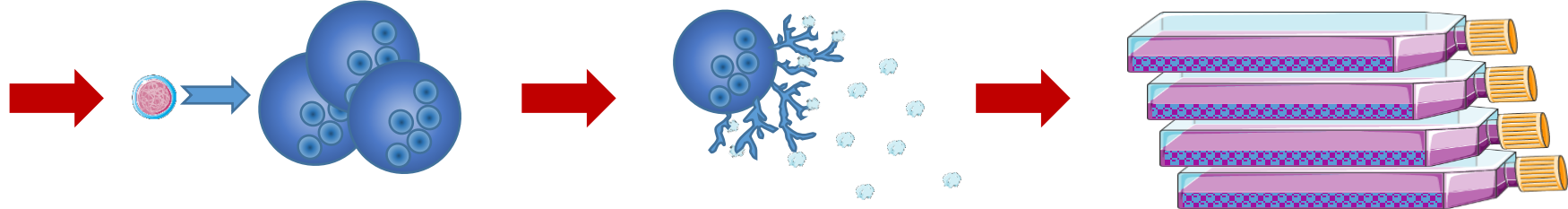
Goal:



Platelet unit: 300 billion platelets



UCB unit: 5×10^6 CD34+ Cells



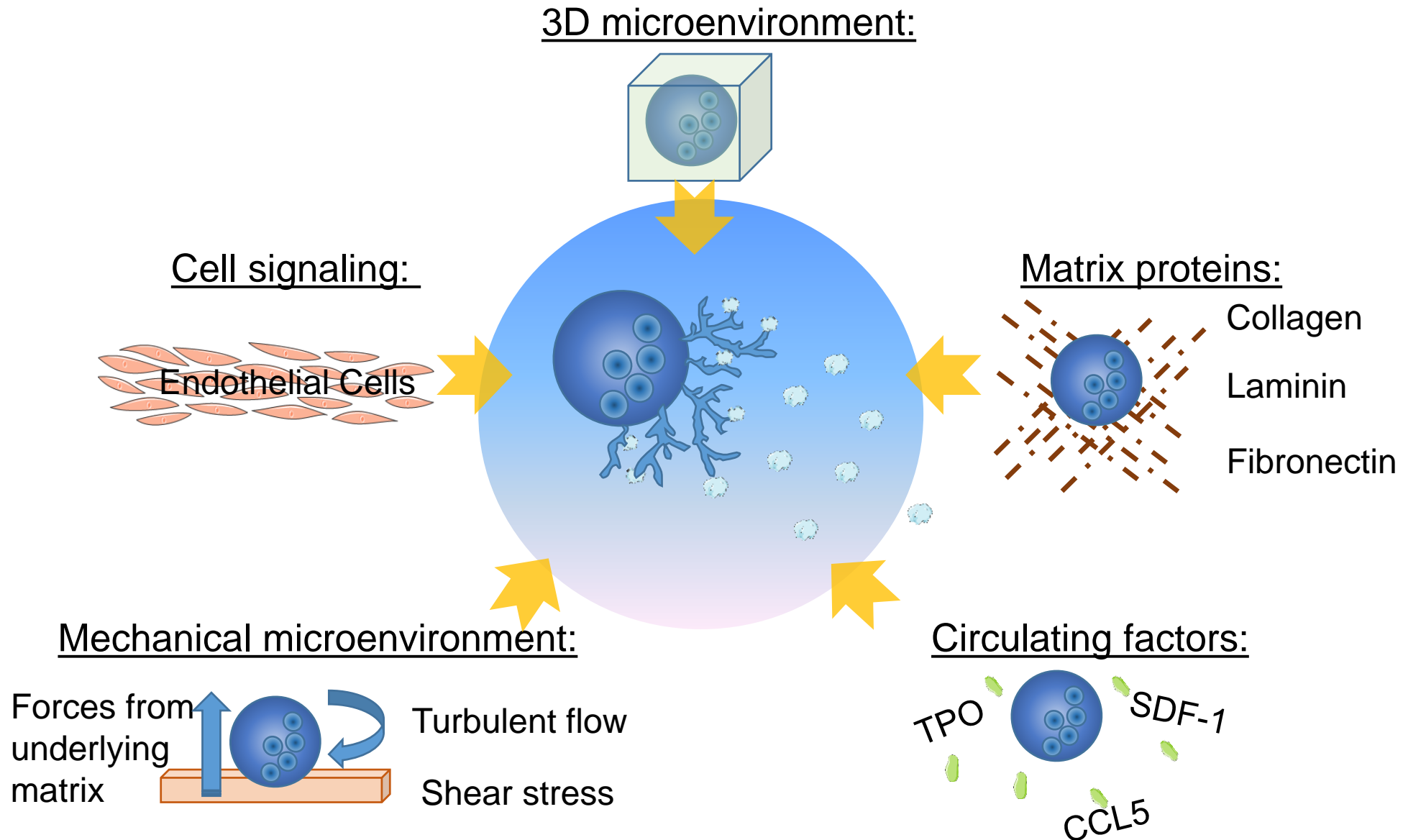
1 CD34+ cell
can yield 1000
MKs *in vitro*

1 mK *in vivo*
produces 2000-
5000 platelets.

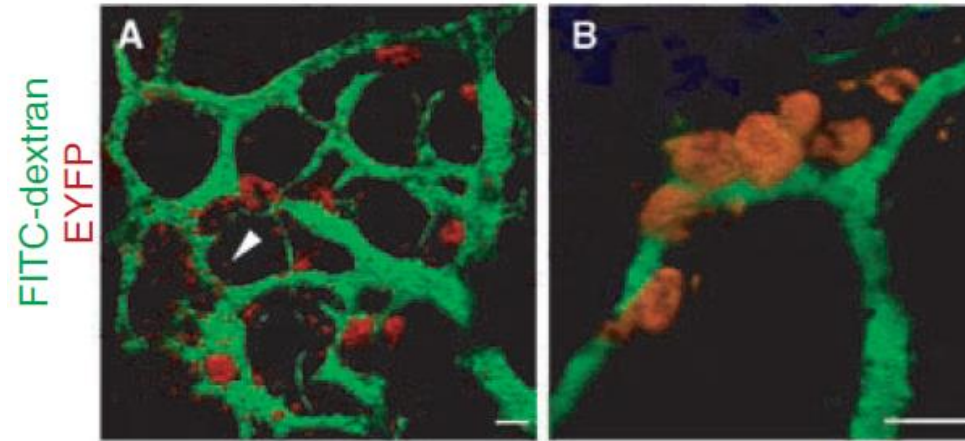
5×10^6 UCB CD34+ cells
should produce 5 billion
MKs, which should make
10,000 billion platelets.

Most current *in vitro* platelet generating protocols only produce 10-150 platelets/MK

Biomimetic culture systems to improve platelet formation

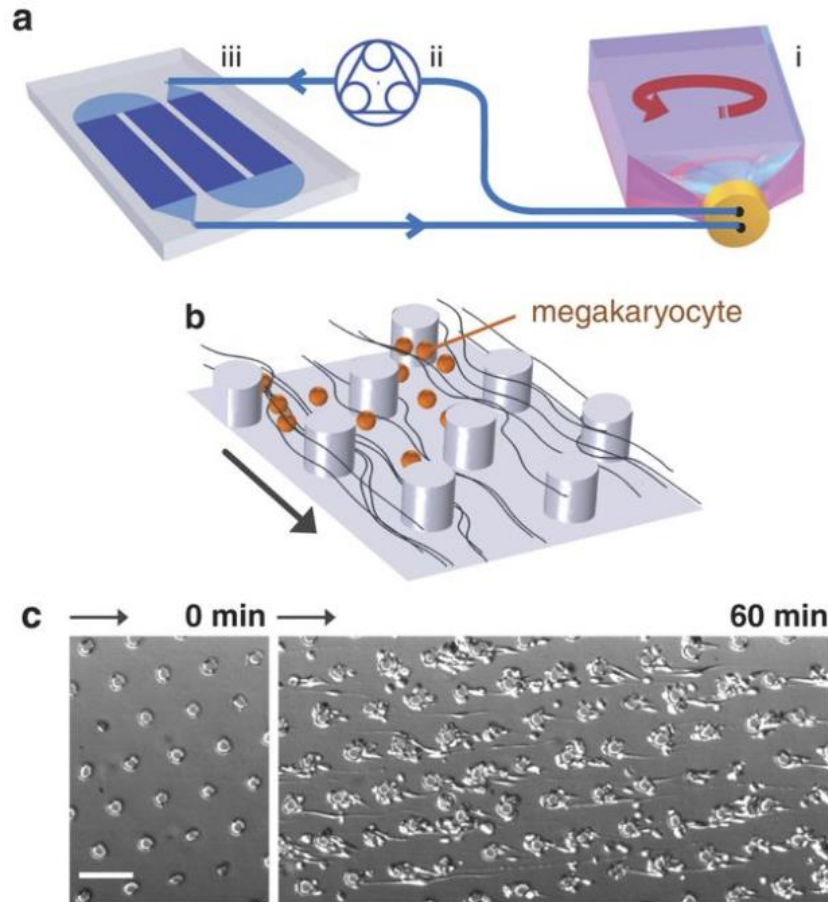


Shear stress enhances thrombopoiesis



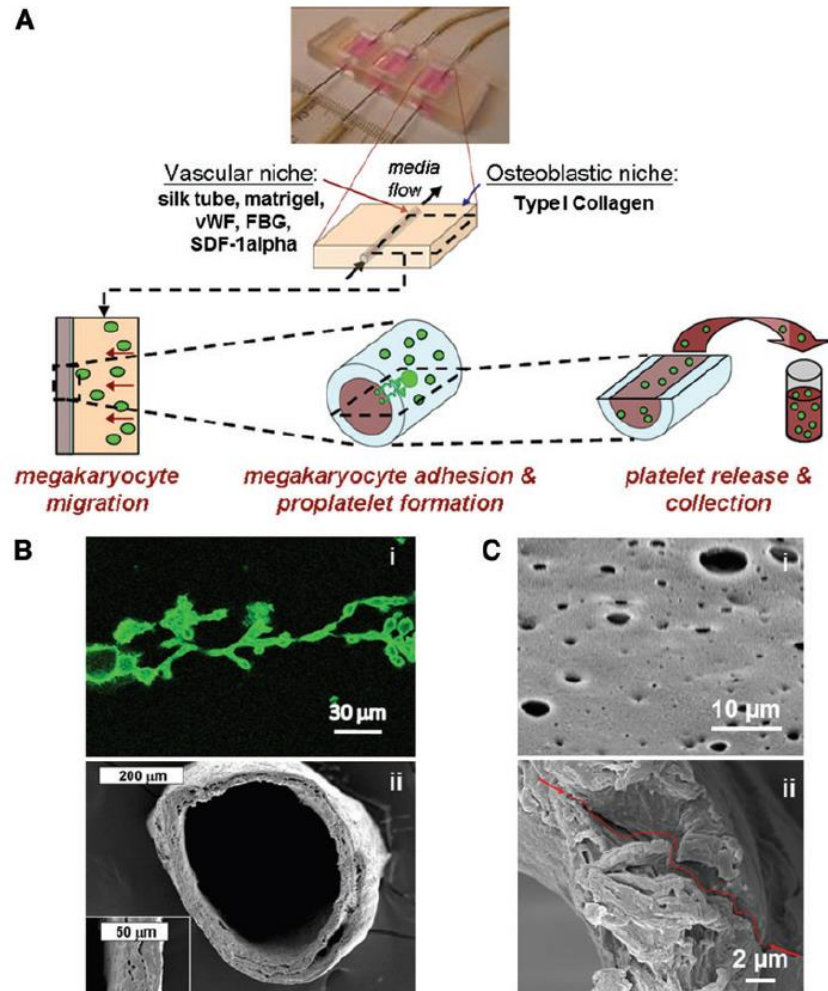
- Using multiphoton intravital microscopy, observed MK extend proplatelets into BM sinusoids.
- Proplatelets are sheared by flowing blood and enter peripheral blood
- *In vitro*, proplatelet production is enhanced with shear stress.

Microfluidic device mimicking megakaryocyte capture, proplatelet elongation and fragmentation



- Allowed for the visualization of the platelet formation process.
- Could lead to platelet production within 2hrs of perfusion.
- Bioreactor fabrication was fast and cheap.
- Fairly low numbers of MKs could be processed at once (1 million).

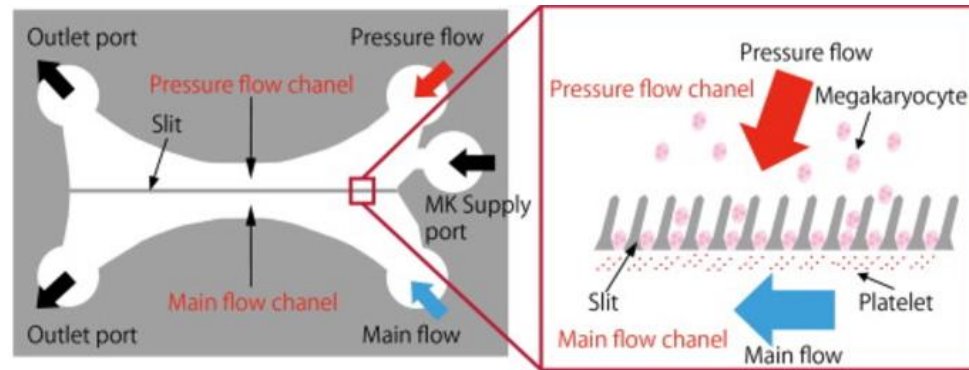
3D bone marrow niche for platelet formation *ex-vivo*



- Modeled silk to control for topography and stiffness, and seeded with endothelial cells, to enhance MK adhesion and proplatelet formation.
- Platelet yields are low compared to *in vivo* levels.
- Slow platelet fragmentation time of 12-16hrs.

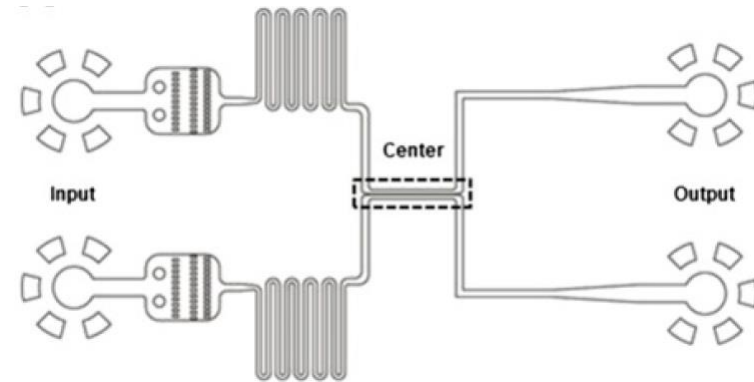
Application of shear stress to *in vitro* systems

1



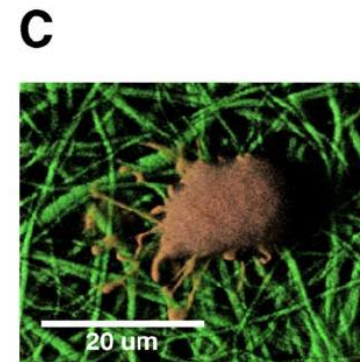
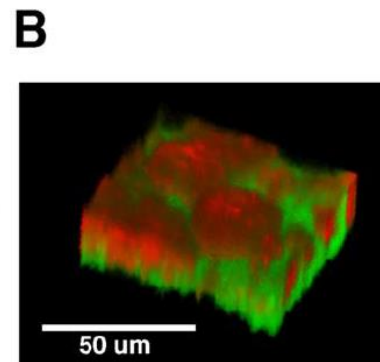
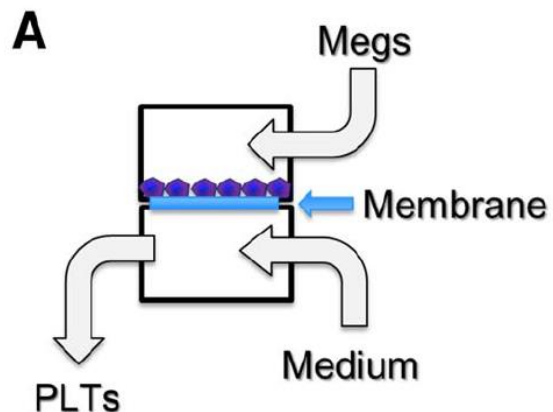
(Nakagawa, Y., *Experimental Hematology*, 2013)

2



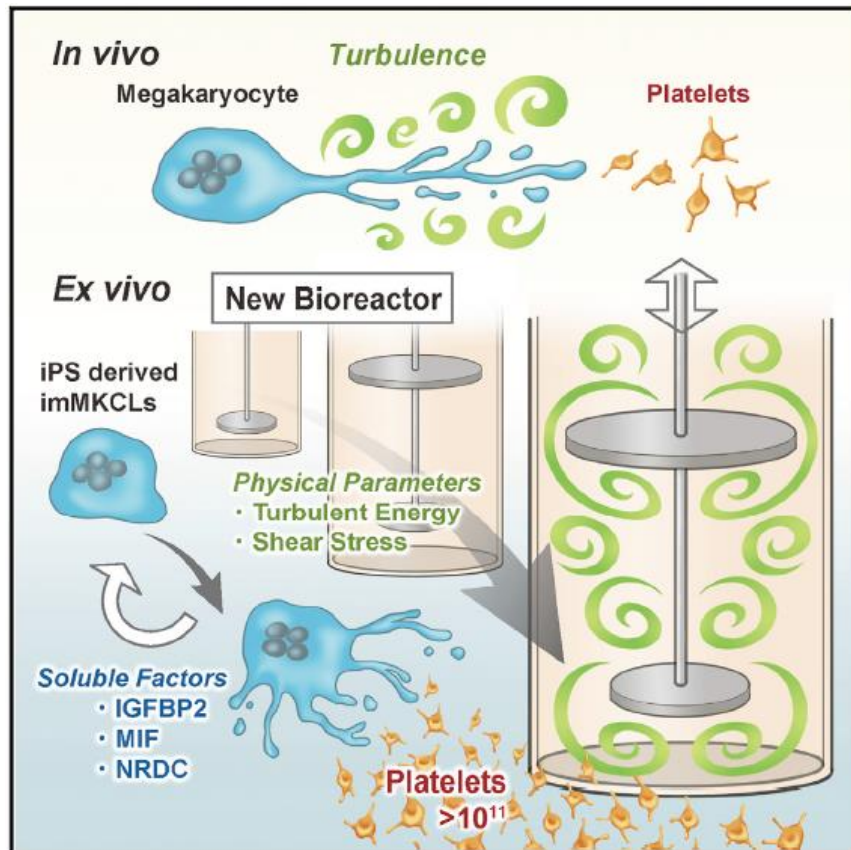
(Thon, J.N., *Blood*, 2014)

3



(Avanzi, MP, *Transfusion*, 2016)

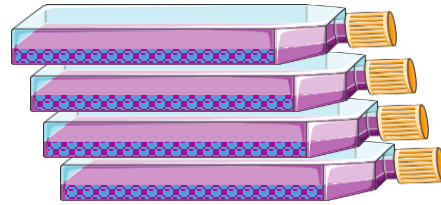
Turbulent flow for increasing thrombopoiesis



- Achieved clinical scale platelet numbers: $1-1.3 \times 10^{11}$ platelets with *in vitro* and *in vivo* functional properties
- Platelets derived from immortalized MK cell lines varied in size, level of baseline activation and survival *in vivo*.
- Takes 26 days to produce
- High production cost under GMP.

Remaining hurdles to be addressed before bringing *ex-vivo* produced platelets to the clinic

Platelet production time



Safety regulation hurdles



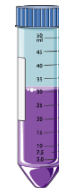
- Platelet quality/functionality
- Purity
- Safety

Production cost



- Cost of manufacturing
- Price of safety testing
- Must have comparable pricing to donor units

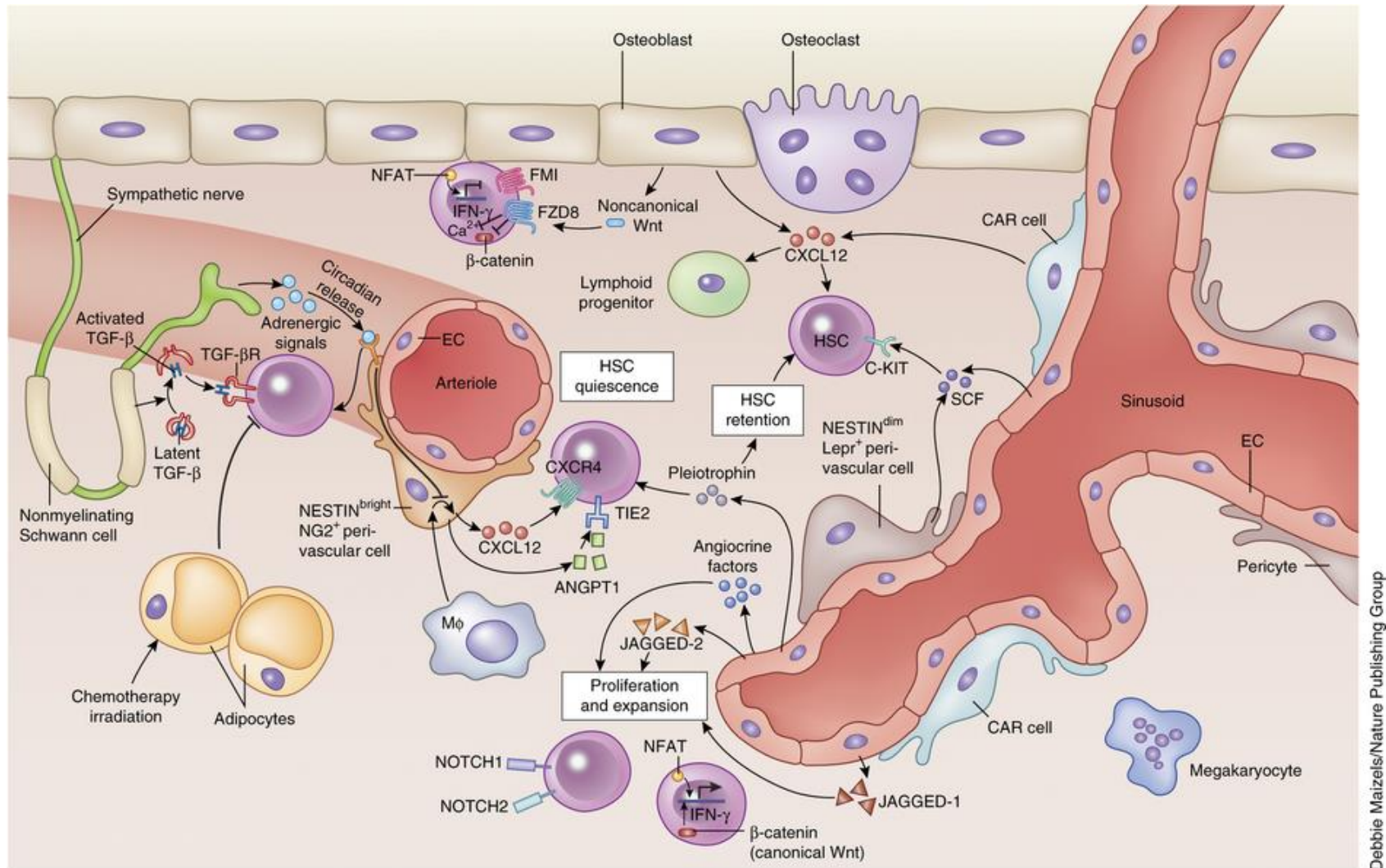
Platelet yield and shelf-life



- 2 days for safety testing
- 1 day for transportation
- 1.5 day shelf life

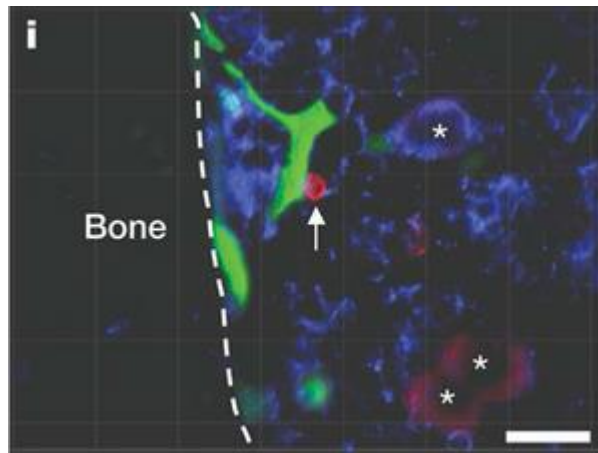
Investigation of an alternative
biomimetic approach to improve
platelet formation *in vitro*.

Bone marrow HSC niche

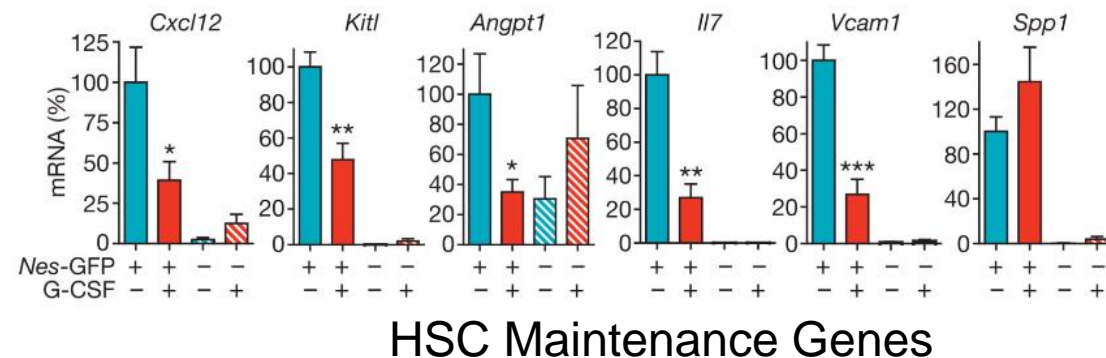


MSCs in the BM

- Represent the CFU-F fraction of stromal cells in the BM
- Are distinct from vascular endothelial cells (do not express CD31) and have a perivascular distribution
- Form an essential HSC niche component:
 - Highly express HSC maintenance genes
 - Share a close physical association with HSCs in the bone marrow.



CD150 CD48/Lin

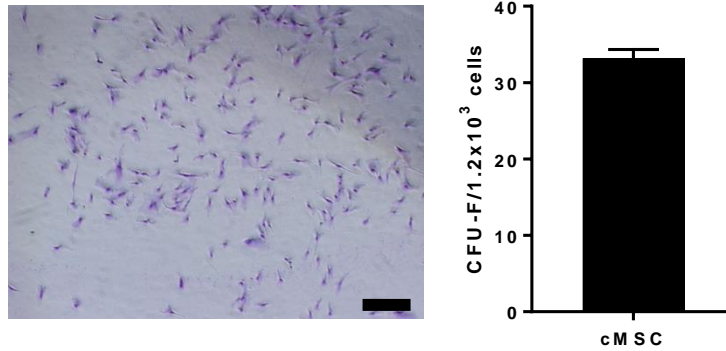


(Mendez-Ferrer, S., *Nature*, 2010)

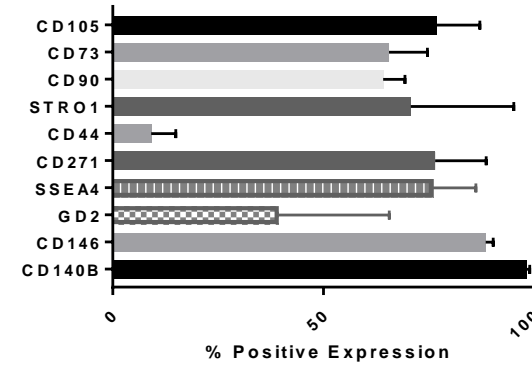
(Pinho, S., *JEM*, 2013)

cMSC stromal cell characterization

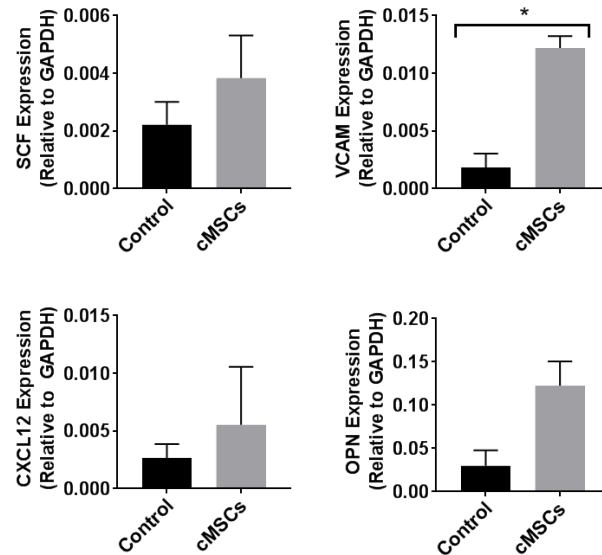
A



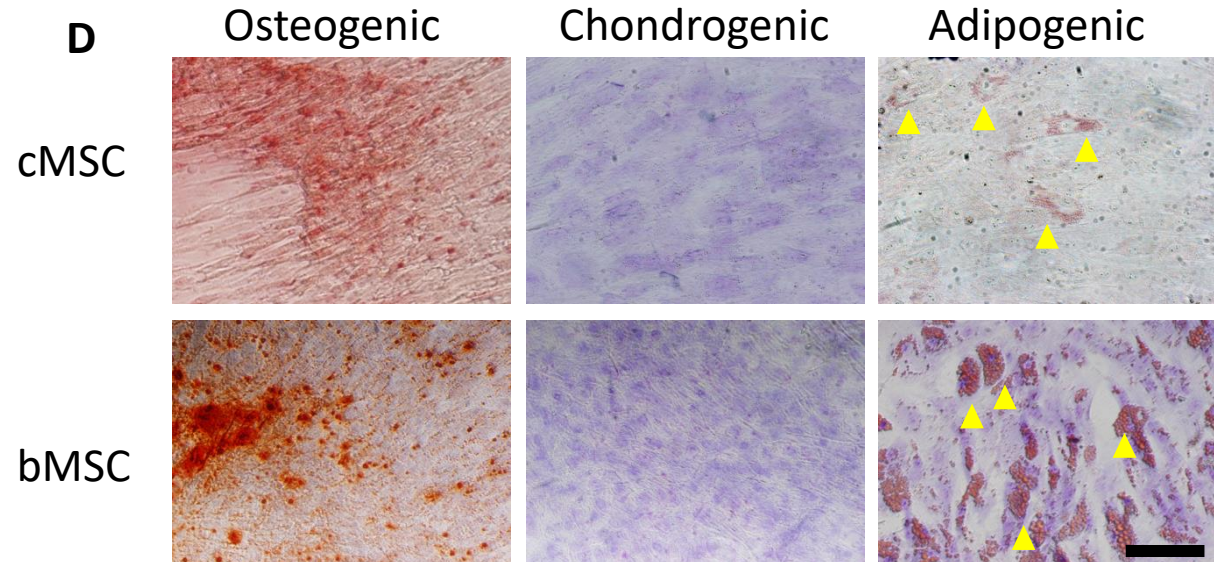
B



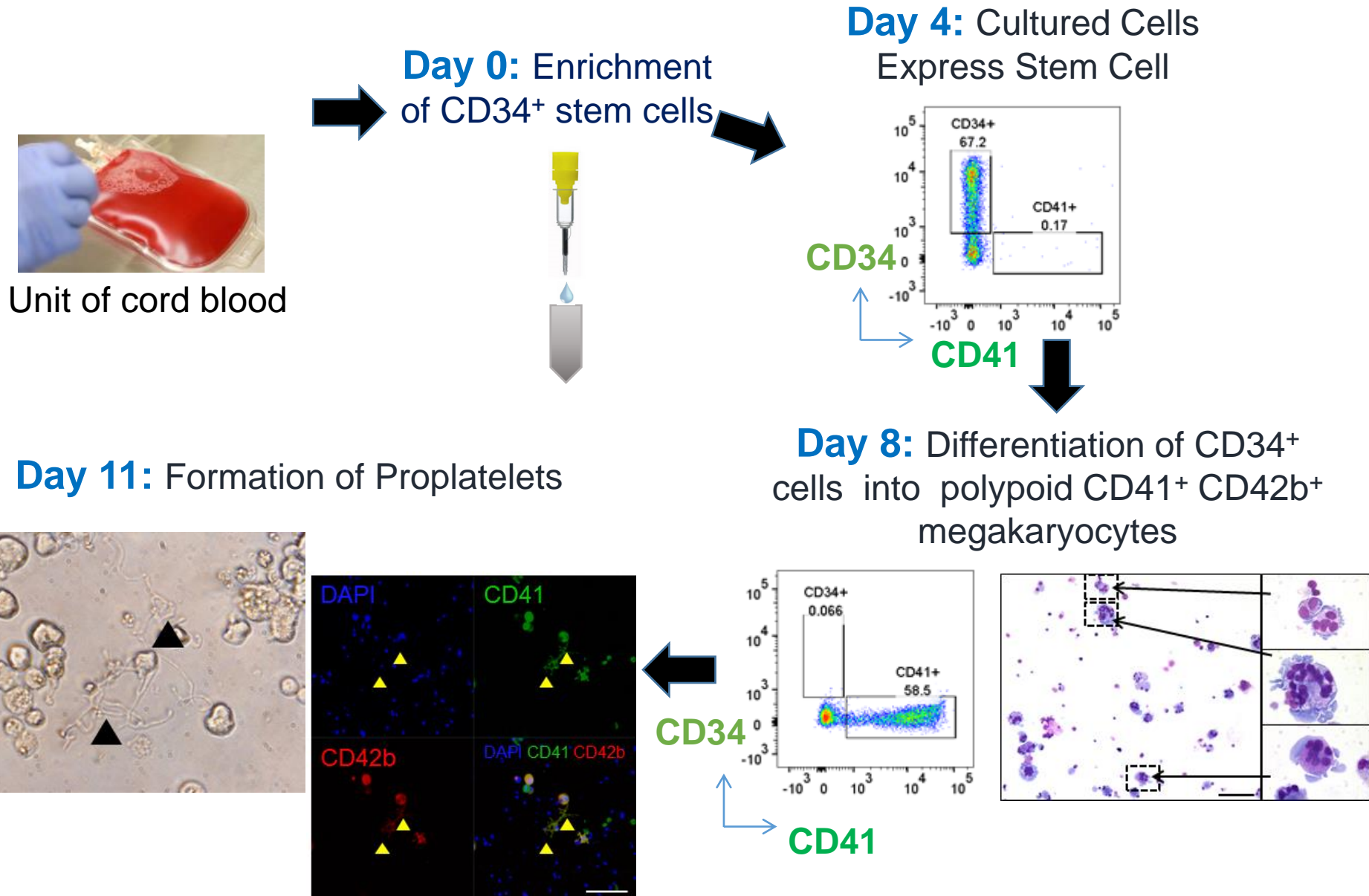
C



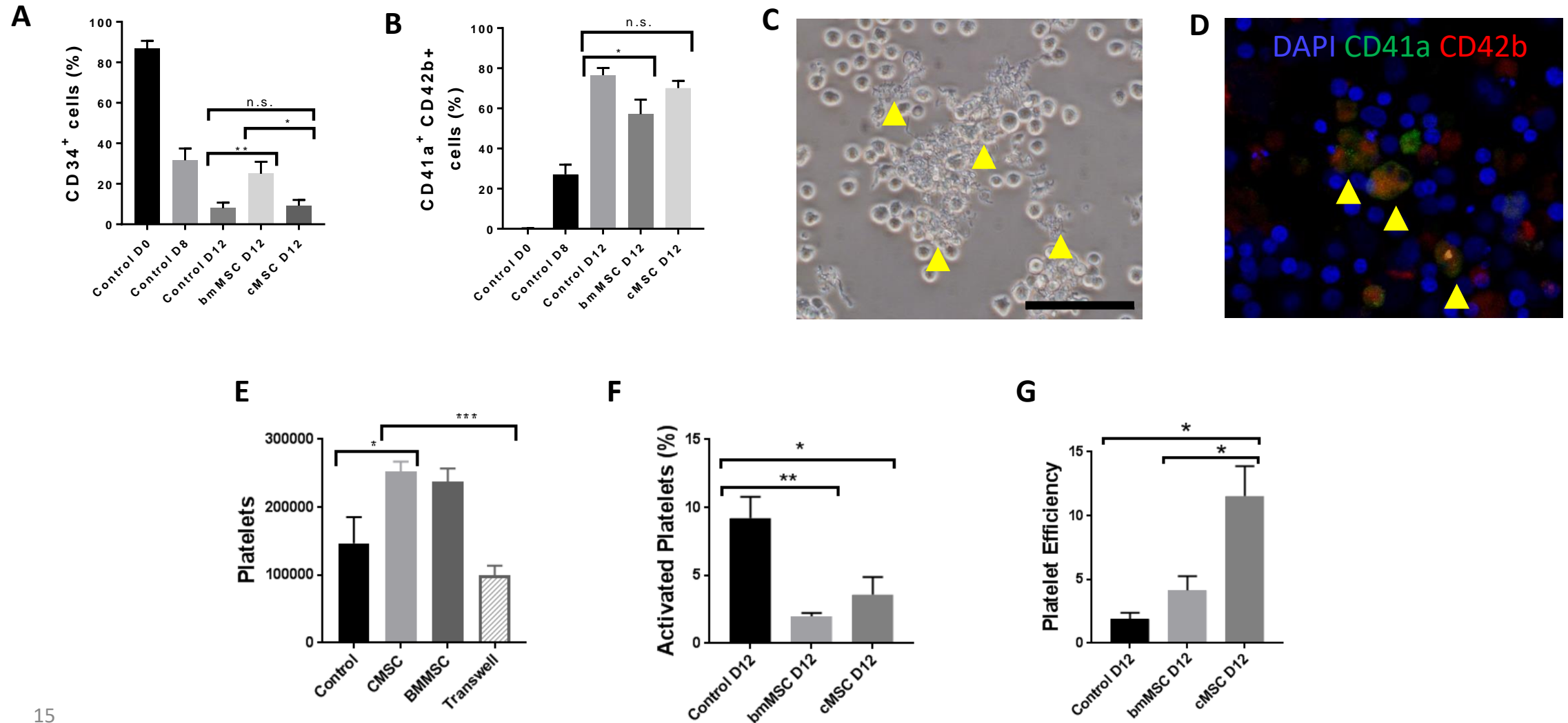
D



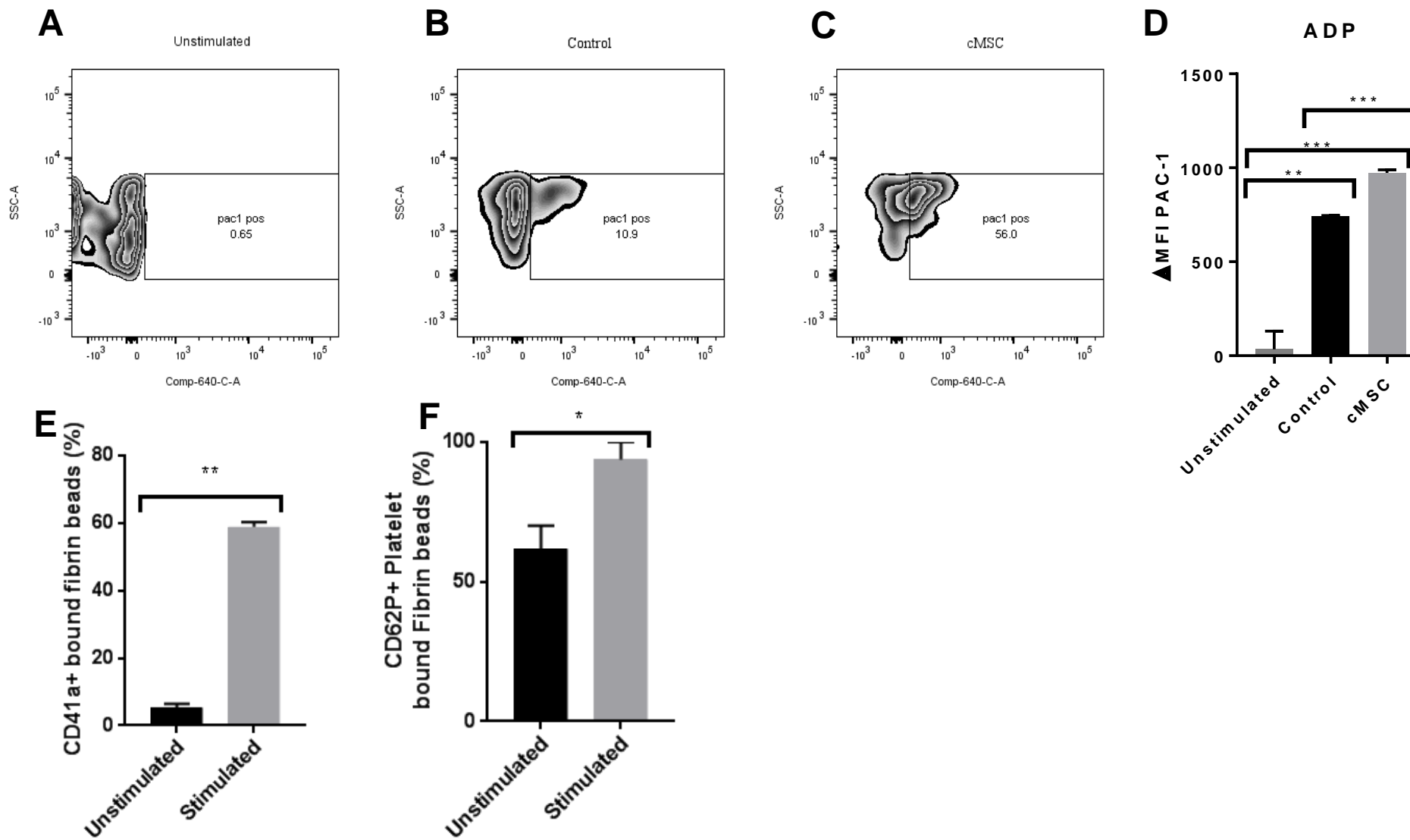
Platelet formation from UCB stem cells



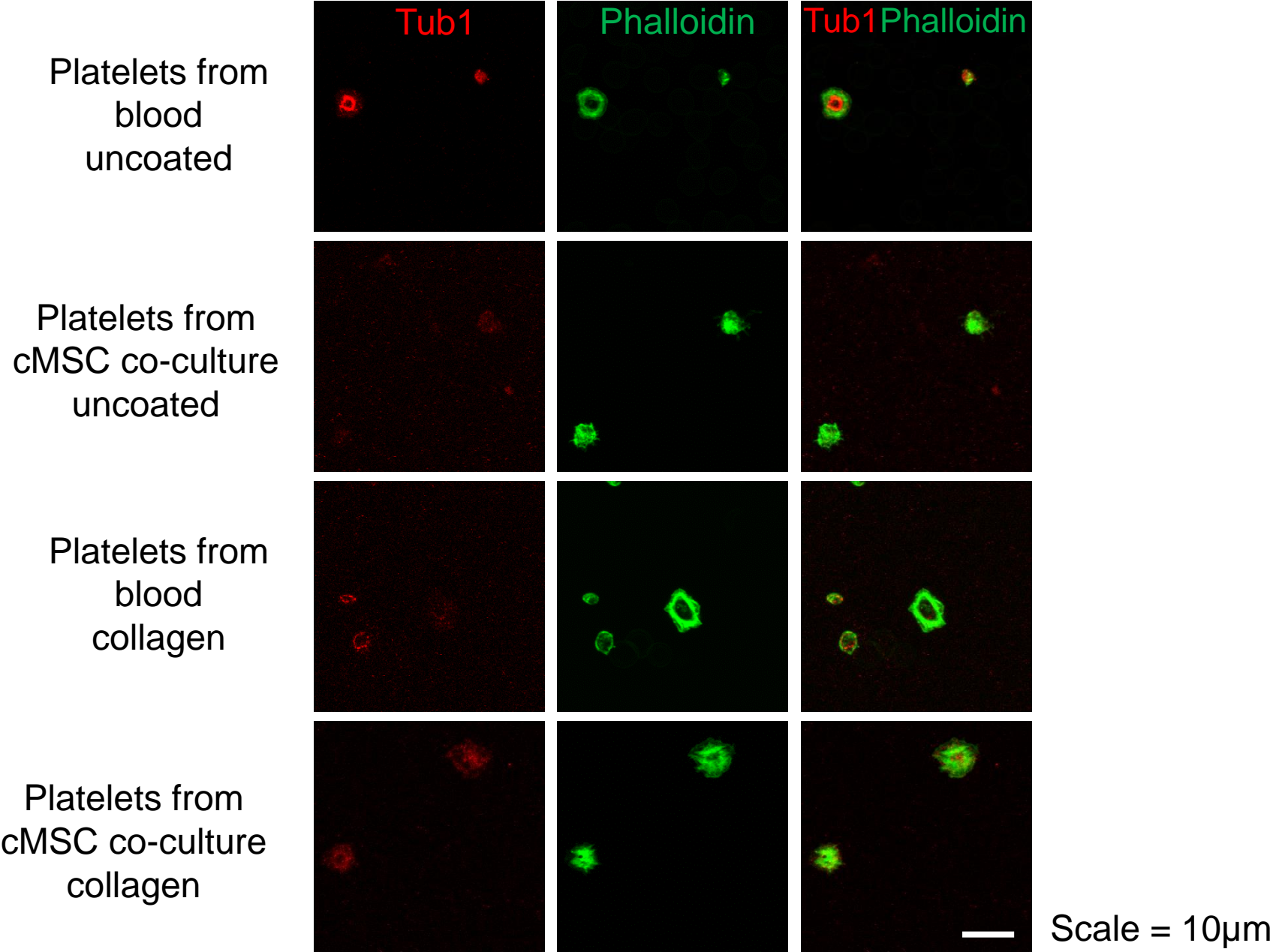
cMSCs enhance platelet formation *in vitro*



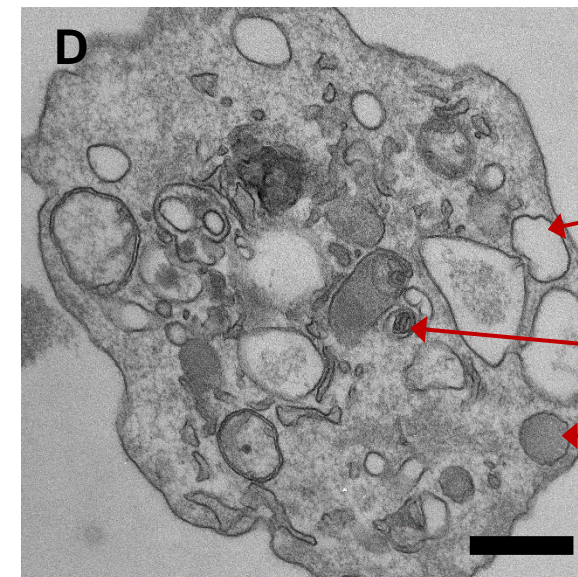
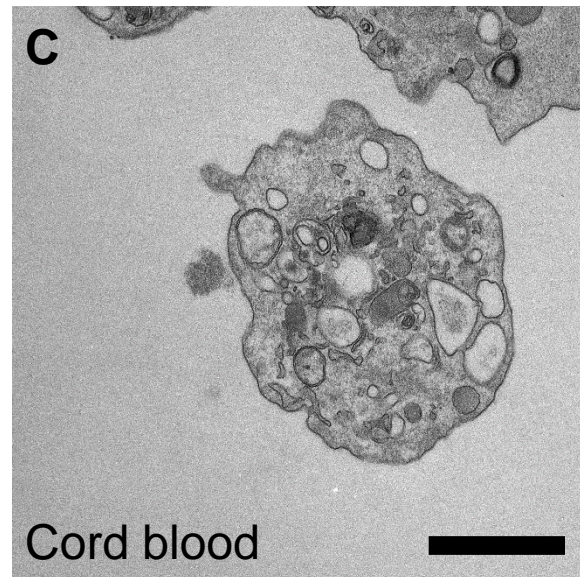
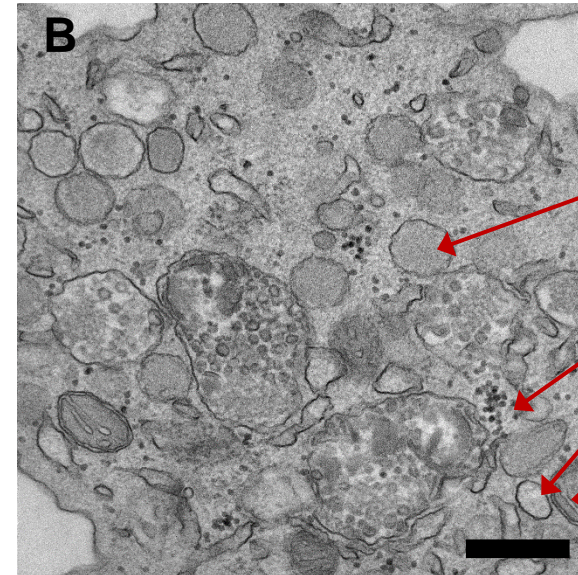
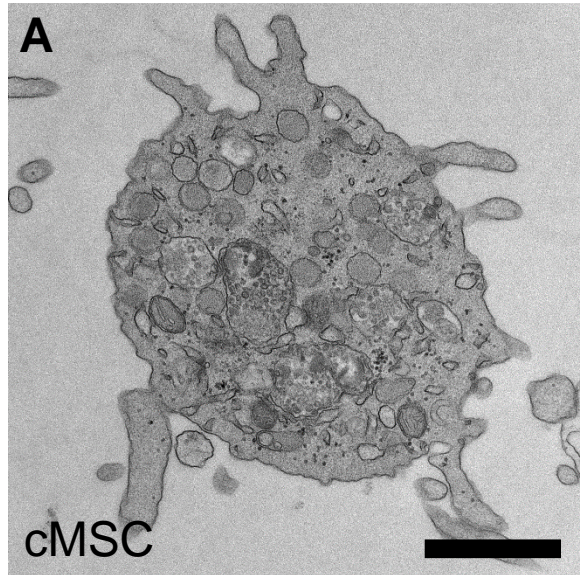
Functional platelet characterization: activation in response to ADP stimulation



Generated platelets can spread on glass and matrix proteins



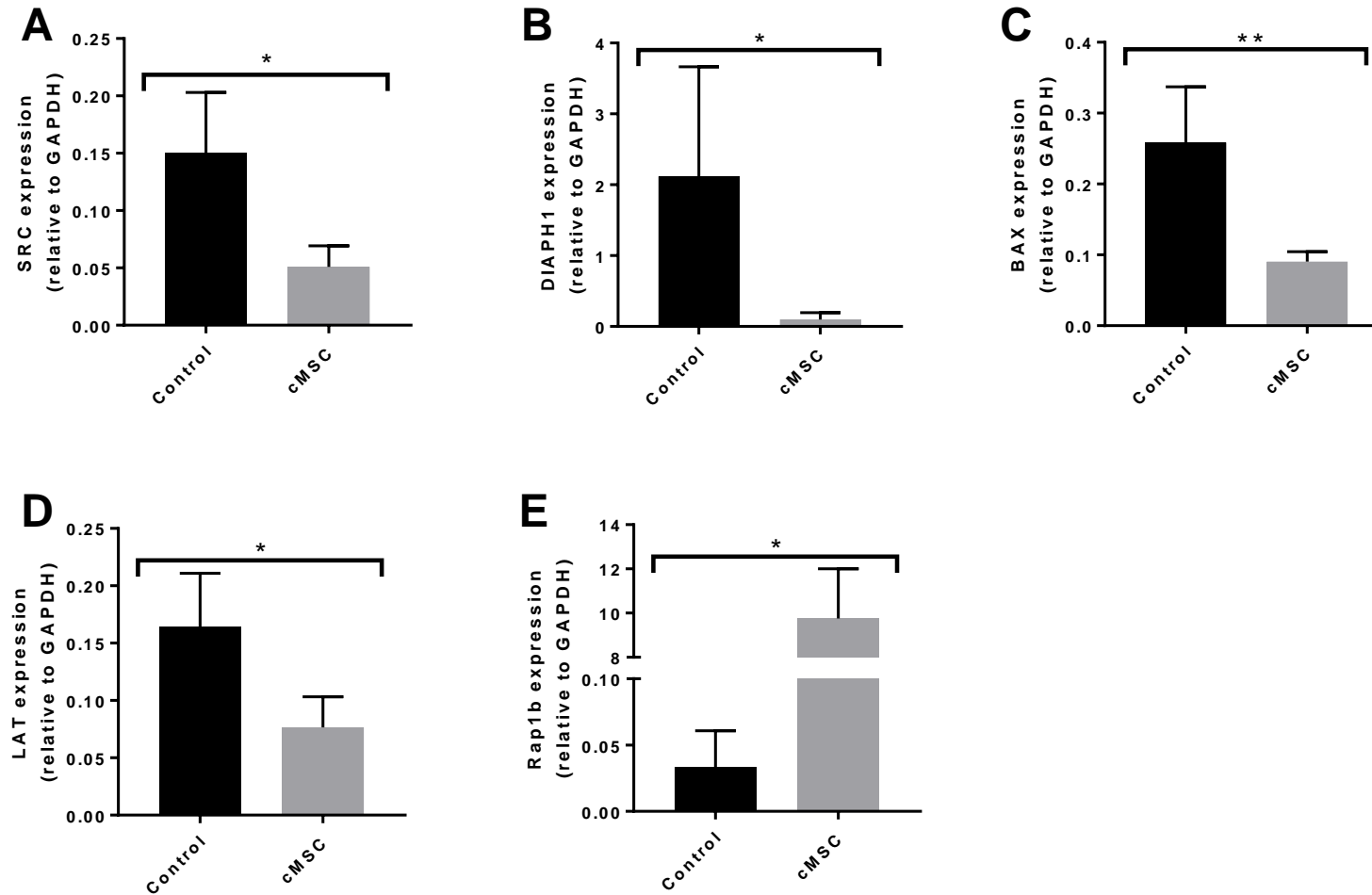
Generated platelets have a similar ultrastructure to primary platelets



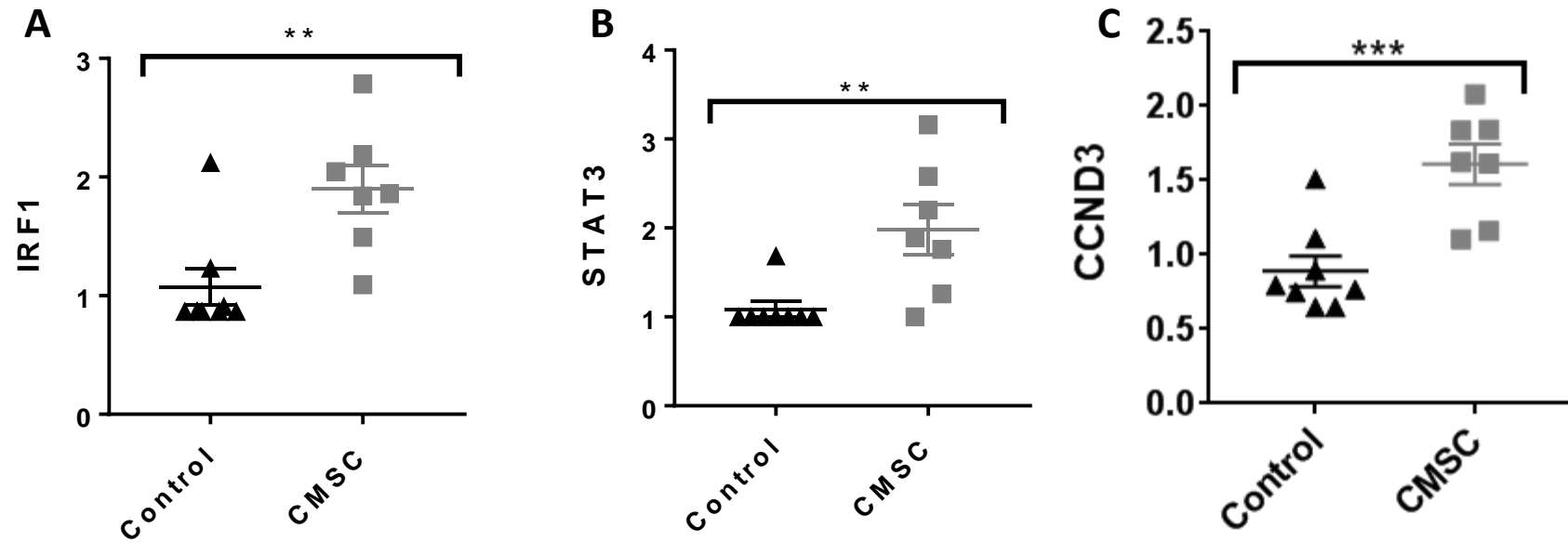
A/C=500nm

B/D=200nm

cMSCs alter gene expression in megakaryocytes leading to pro-platelet formation and decreased platelet activation.



cMSCs assist in promoting megakaryocyte maturation at the protein level



Discussion

- A novel population of stromal cells can be isolated from cord tissue, which assist in promoting platelet formation in megakaryocyte progenitor cells, with low basal activation levels.
- Generated platelets contain ultrastructure similar to native platelets, can adhere and spread to matrix proteins, and activate in response to agonist stimulation.
- Ideal tissue source for cMSC isolation: umbilical cord tissue is normally discarded after birth.
- Proof-of-concept study: scale-up is necessary to approach therapeutic platelet levels.

Acknowledgements

Stem Cell & Engineering Lab (NYBC)

- Peter Rosston
- Georgia Fallon
- Sophie Ohrn
- Jianli Gong, Ph.D.
- Ana Nicolle Strat, M.S.

Complement Biology Lab (NYBC)

- **Karina Yazdanbakhsh, Ph.D.**
- Weili Bao, M.S.
- Yunfeng Liu, Ph.D.
- Hui Zong, Ph.D.

LFKRI Institute (NYBC)

- Xiuli An, Ph.D.
- Cheryl Lobo, Ph.D.

Electron Microscopy Core (NYBC)

- Denis Vronin, Ph.D.

Flow Cyometry Core (NYBC)

- Mihaela Barbu-Stevanovic, M.S.
- Sean D'Italia
- Zannatul Monia, M.S.

Rockefeller University Electron Microscopy Resource Center:

- Kunihiro Uryu, Ph.D.
- Nadine Soplop, Ph.D.

Funding Sources:



Rose M. Badgeley Residuary
Charitable Trust

