

Evidence of an expanded and dysregulated airway epithelial stem compartment in cystic fibrosis mice

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Introduction:

Recent studies have shown that FACS sorting and *in vitro* clonogenic assays are powerful tools for isolation and quantitation of endogenous epithelial stem/progenitor cells (EpiSPC). This approach together with *in situ* measurement of epithelial cell proliferation in the trachea of CF and normal mice.

In a separate series of experiments we employed a polidocanol transient injury mouse model to analyse the incidence of proliferating airway epithelial cells in response to regeneration following *in situ* lentiviral (LV) gene transduction of airway epithelial cells in normal mice.

Methods:

EpiSPC isolation and colony-forming assay:
Tracheal cell suspensions from normal, CF (UNC) and CF(FABP) mice were prepared by mincing and collagenase digestion. CD24^{low} cells were isolated and co-cultured together with supporting MLg cells to quantify Epi-CFU^{1,2}. The incidence of Epi-CFU in CF and normal tracheae was correlated with *in situ* measurement of epithelial cell proliferation by immunohistochemical detection of Ki-67 labeling.

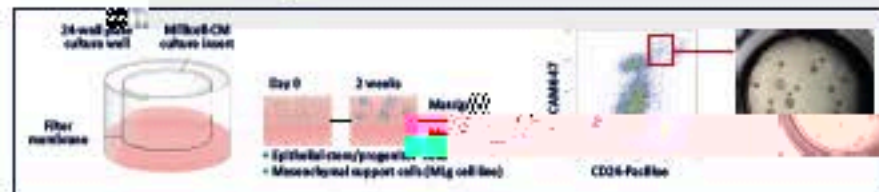


Figure 1: Schematic description of the lung EpiSPC assay system.

LPC/LV-LacZ reporter gene transduction:
Mice were pre-treated with 0.3% lysophosphatidylcholine in PBS followed by instillation of a HIV-1-VSV-G pseudo typed lentiviral vector carrying the LacZ gene³.

The Polidocanol transient injury model:
We employed a polidocanol detergent transient injury mouse model to analyse the pattern of nasal airway epithelial cell proliferation and regeneration in a polidocanol transient injury mouse model.

Following viral vector instillation, mice were randomly divided into three groups (n=11) with the first group acting as a control. The second and third groups of mice received polidocanol at 4 weeks and 8 weeks post-injury respectively. The nasal epithelium according to the methods described by Borthwick et al⁴.

Results:

Expanded incidence of Epi-CFU and of epithelial humoraliferation in CF mouse trachea.

CD45^{neg}CD31^{neg}EpcAMP^{pos}CD24^{low} tracheal cell fraction of CF mice respectively compared to normal wildtype mice (Fig 2).

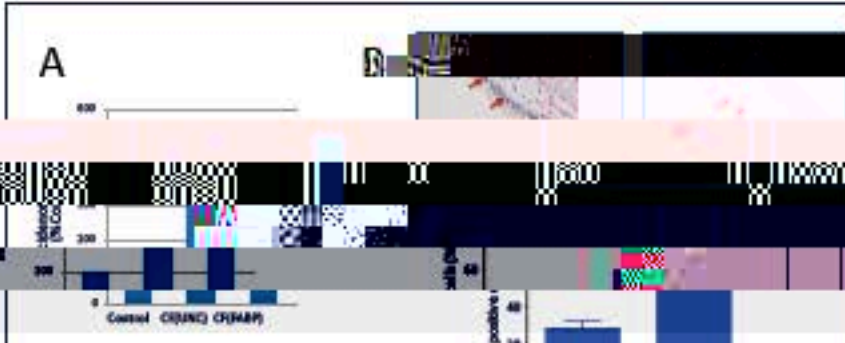


Figure 2: Incidence of Epi-CFU in CF and normal tracheae. The incidence of Epi-CFU in CF mice is significantly higher than the equivalent fraction of normal tracheal epithelium (1/1000). B) Immunohistochemical staining of the proliferative nuclear antigen (Ki-67) in wildtype and CF(FABP) tracheal tissue sections.

Polidocanol denudes nasal airway surface and occurs in the next week (Fig 3). Single and double polidocanol treatments are characterized by the presence of large clusters of LacZ positive cells in the next week.

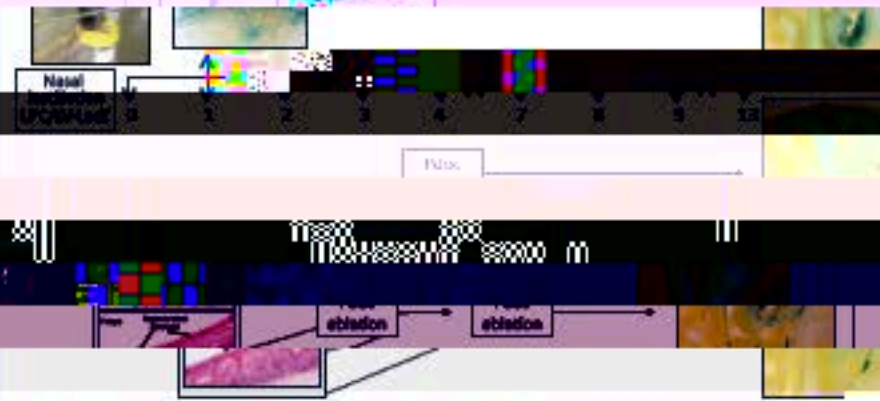


Figure 3: Schematic representation of polidocanol transient injury mouse model. Polidocanol transient injury reveals the pattern of nasal airway epithelial cell proliferation and regeneration.

and regeneration in a polidocanol transient injury mouse model.

In a polidocanol transient injury mouse model, we analysed the pattern of nasal airway epithelial cell proliferation and regeneration in a polidocanol transient injury mouse model. The analysis of LacZ expression in the polidocanol transient injury mouse model revealed the presence of large clusters of LacZ positive cells consistent with the proliferation of transduced cells, and the analysis of LacZ expression in the polidocanol transient injury mouse model revealed the presence of stem/progenitor cells.

1) An expanded and dysregulated airway EpiSPC compartment contributes to airway remodelling and mucous cell hyperplasia in CF mice.

2) Isolation of airway EpiSPC which could be targeted in CF cellular therapies.

3) Transient epithelial injury reveals the pattern of nasal airway epithelial cell proliferation and regeneration.