

# Mesenchymal Stem Cell Secretome Improves Tendon Cell Viability In Vitro and Tendon-Bone Healing In Vivo When a Tissue Engineering Strategy Is Used in a Rat Model of Chronic Massive Rotator Cuff Tear

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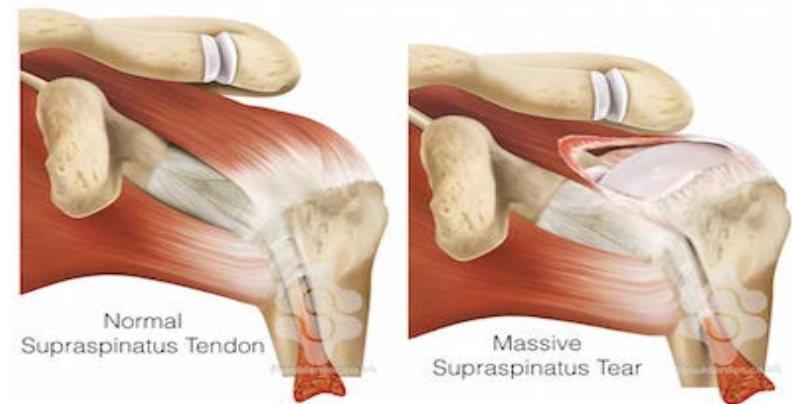
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# Background

## Massive rotator cuff tears (MRCTs)

# Background: Massive Rotator Cuff Tear

- Greater than 5cm
- Involves supraspinatus and infraspinatus components, may extending to subscapularis and teres minor
- 20% of all cuff tears, 80% of recurrent tears
- Therapy:
  - Deltoid rehabilitation programme
  - Injections
  - Tendon repair with Orthobiologic materials
  - Muscle Transfer procedures
  - Arthroscopic Subacromial Decompression, Debridement and Biceps Tenotomy
  - Inspace Balloon procedure
  - Arthroscopic Superior Capsular Reconstruction (SCR)
  - Reverse Shoulder Replacement



<https://www.shoulderdoc.co.uk/article/1692>

## Background:

- Failure rate for tendon bone healing: up to 94% at long term follow up
- Related to: muscle-tendon degeneration, reduced cellular activity, decreased tendon healing potential
- **MSCs secretome:** growth factors, cytokines, vesicles
  - > immunomodulatory, antiapoptotic activities
- **Human hair keratin:** tissue regeneration, repair applications
- **Electrospinning:** fibrous matrices to mimic extracellular matrix

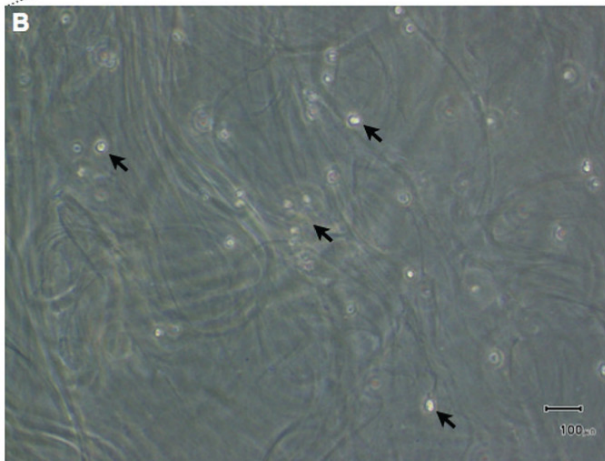
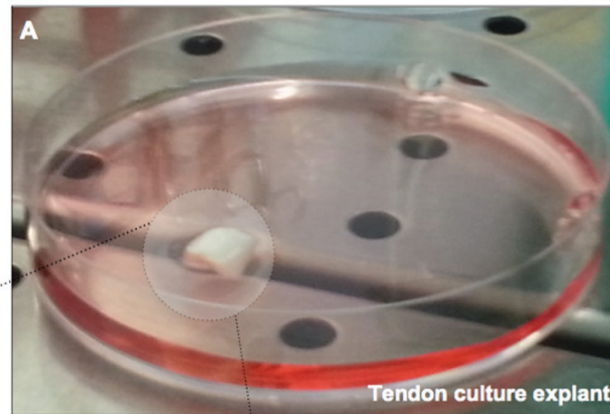
# Methods

# Methods: Cell preparation

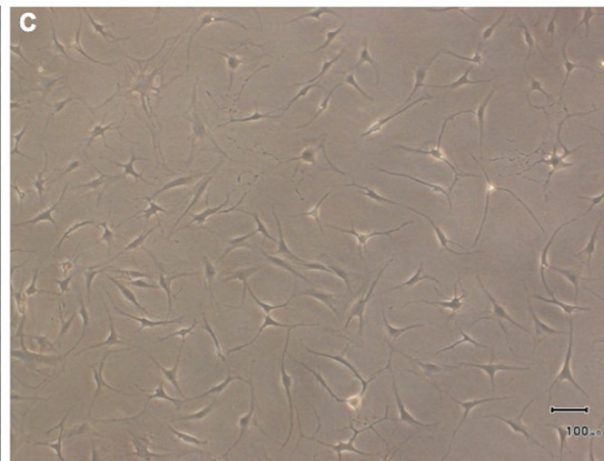
- Primary Cultures of hTCs
  - *Macroscopically intact intra-articular portion of the long head of the biceps from 3 female patients (mean age, 62,3 years)*
- Preparation of hMSCs and Collection of CM
  - 5000cell/cm<sup>2</sup>, 24 hours incubation
- Incubation of hTCs With hMSC-CM, Cell Viability Assessment and Immunocytochemistry
  - 5x10<sup>4</sup> cells per well incubated with CM (n=3) for 7 days (50% CM volume renewed at day 4)
  - Density and viability were assessed by MTS testing and immunocytochemistry
  - Primary antibodies: decorin, collagen type 1 and type 3

# Methods:

## migration



(Tendon cells - After 10 days)



(Tendon cells [P1])

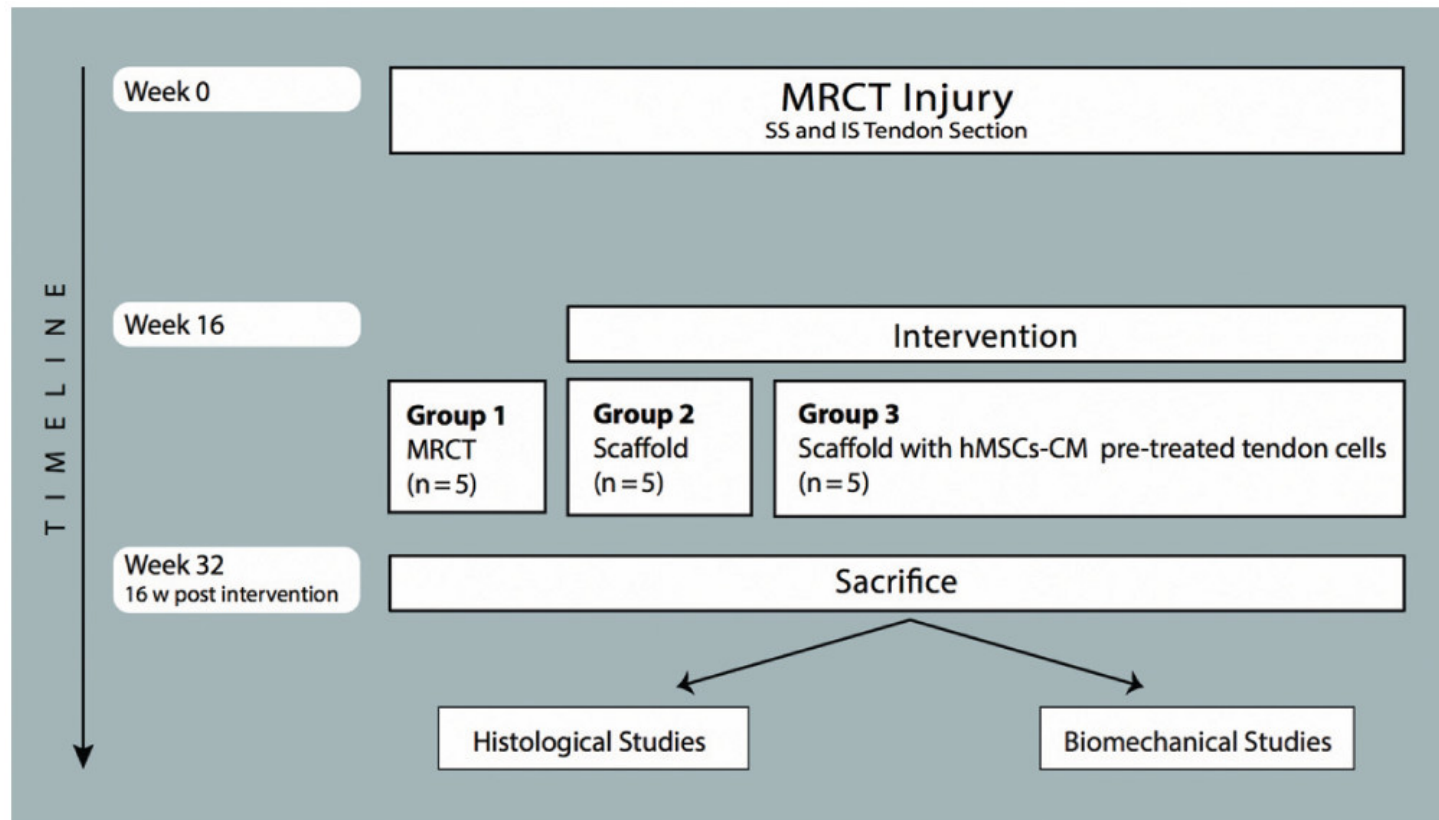
# Methods: Scaffold preparation

- Electrospun Keratin Matrix Preparation
  - Keratin extraction (sodium sulfide)
  - Electrospinning
- Scanning Electron Microscopy: x2000 magnification
  
- Effects of hMSC Secretome on hTCs in 3D Environments
  - hTCs at density of  $2 \times 10^2$  cells per scaffold onto electrospun keratin matrices (14 days, every 3 days medium change)



# Methods:

- In vivo:

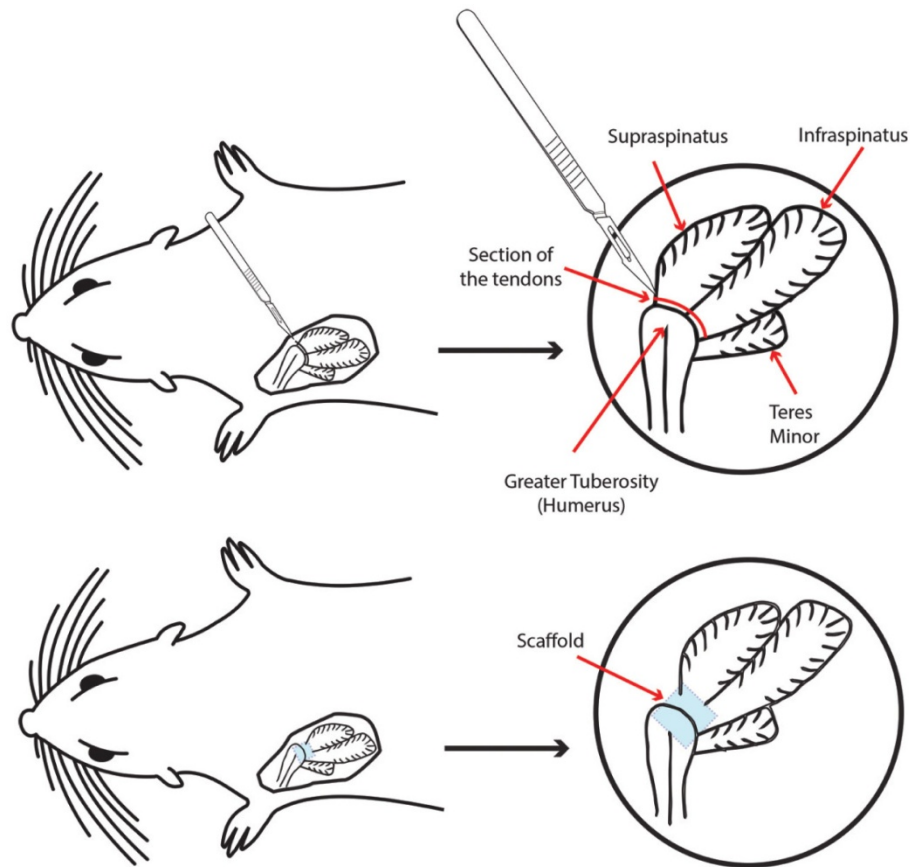


# Methods:

- In vivo:
  - MRCT: N= 15 Wistar-Han rats
    - 5: no scaffold
    - 5: scaffold only
    - 5: scaffold
      - seeded with hMSC-CM-pretreated hTCs
- Internal Control: 3 uninjured rats
- Tests: Supraspinatus and infraspinatus muscle-tendon together with 1,5cm of the proximal humerus units
- Histological evaluation: tendon maturing score by Ide et al
- Biomechanical (Zwick/Roell) evaluation
  - Maximum load to failure (Fmax,N)
  - Elongation at maximum load (DLtot,mm)
  - Total elongation at failure (DLtot,mm)
  - Stiffness (N/mm)

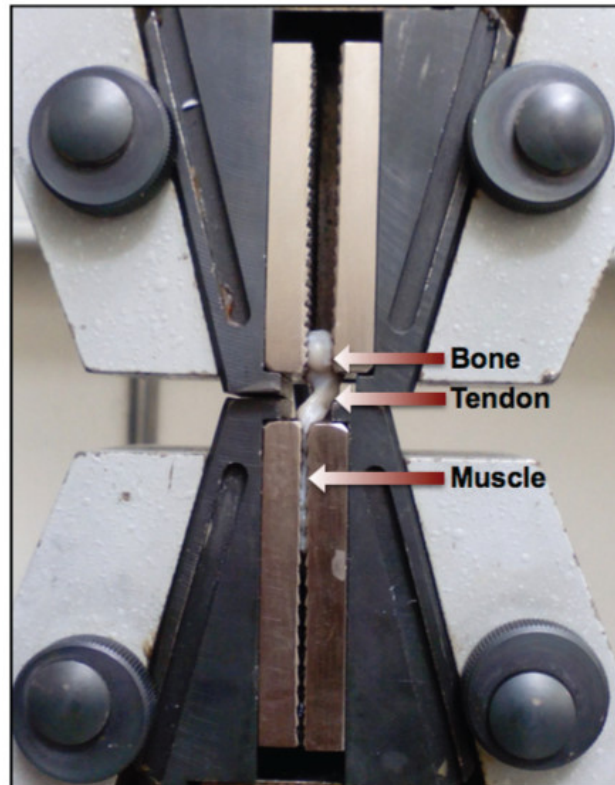
# Methods:

- In vivo:



# Methods:

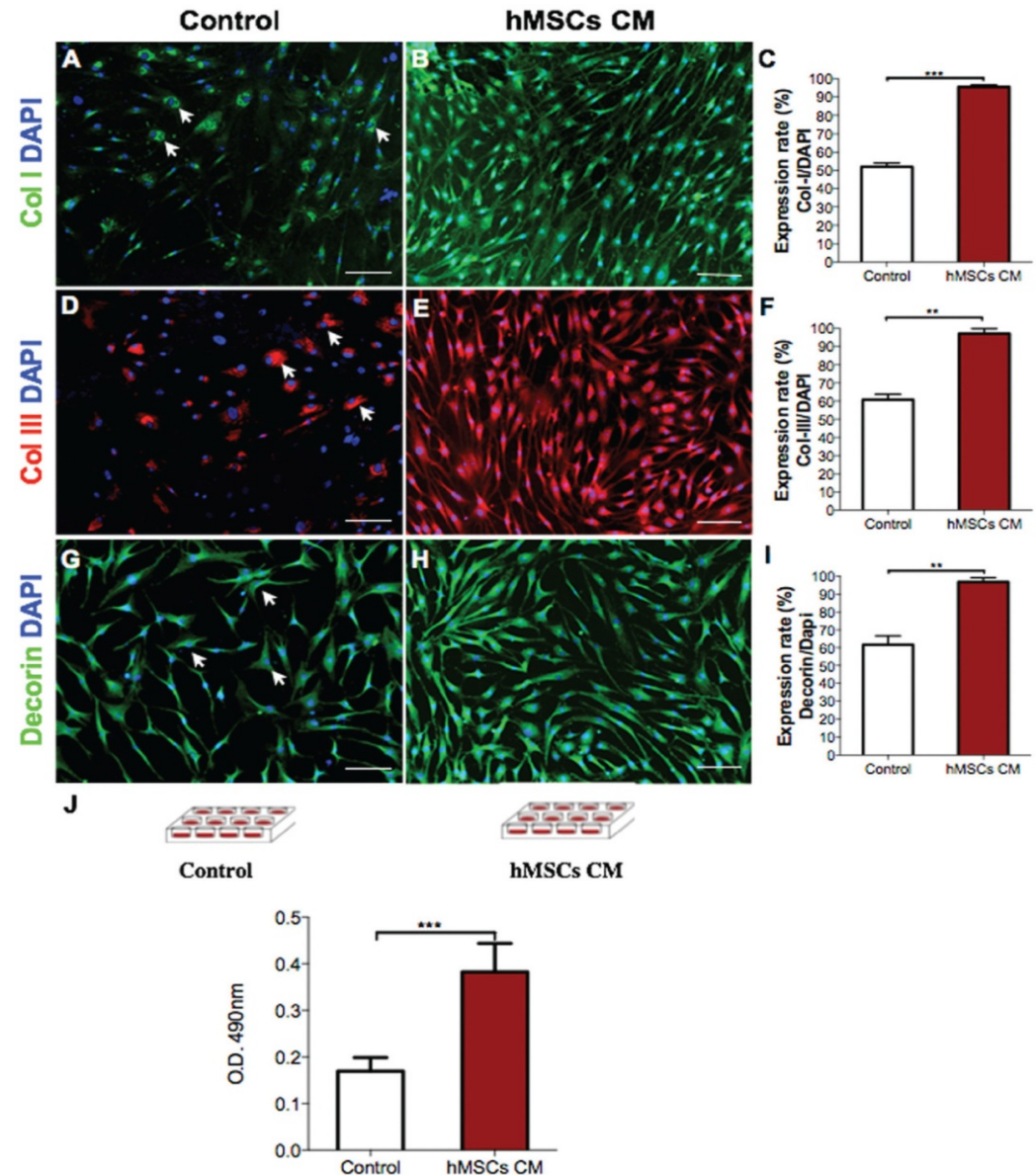
- In vivo:



# Results

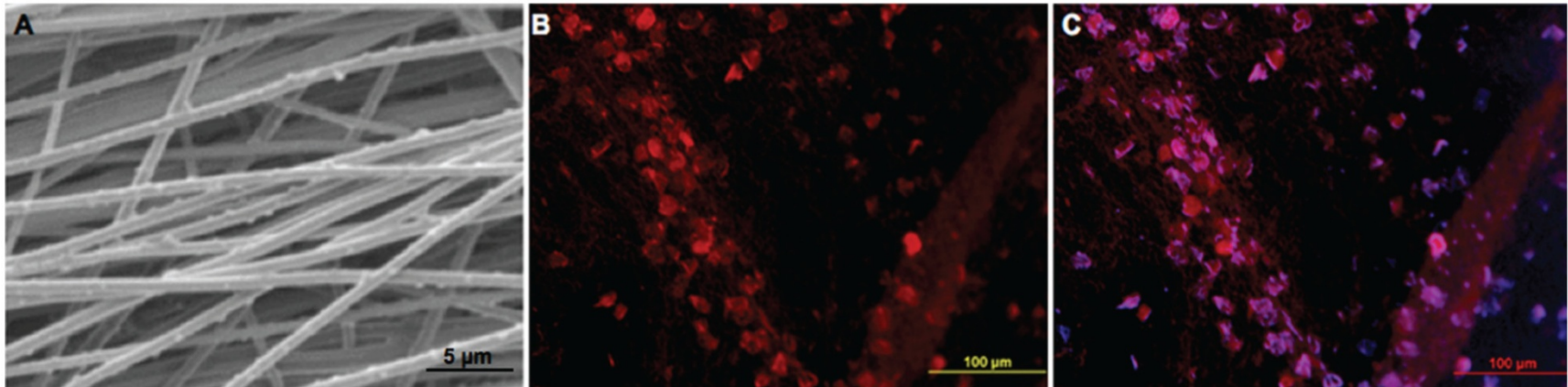
# Results:

morphological analysis  
and immunofluorescence  
staining of hTCs after 7  
days of incubation with  
hMSC secretome



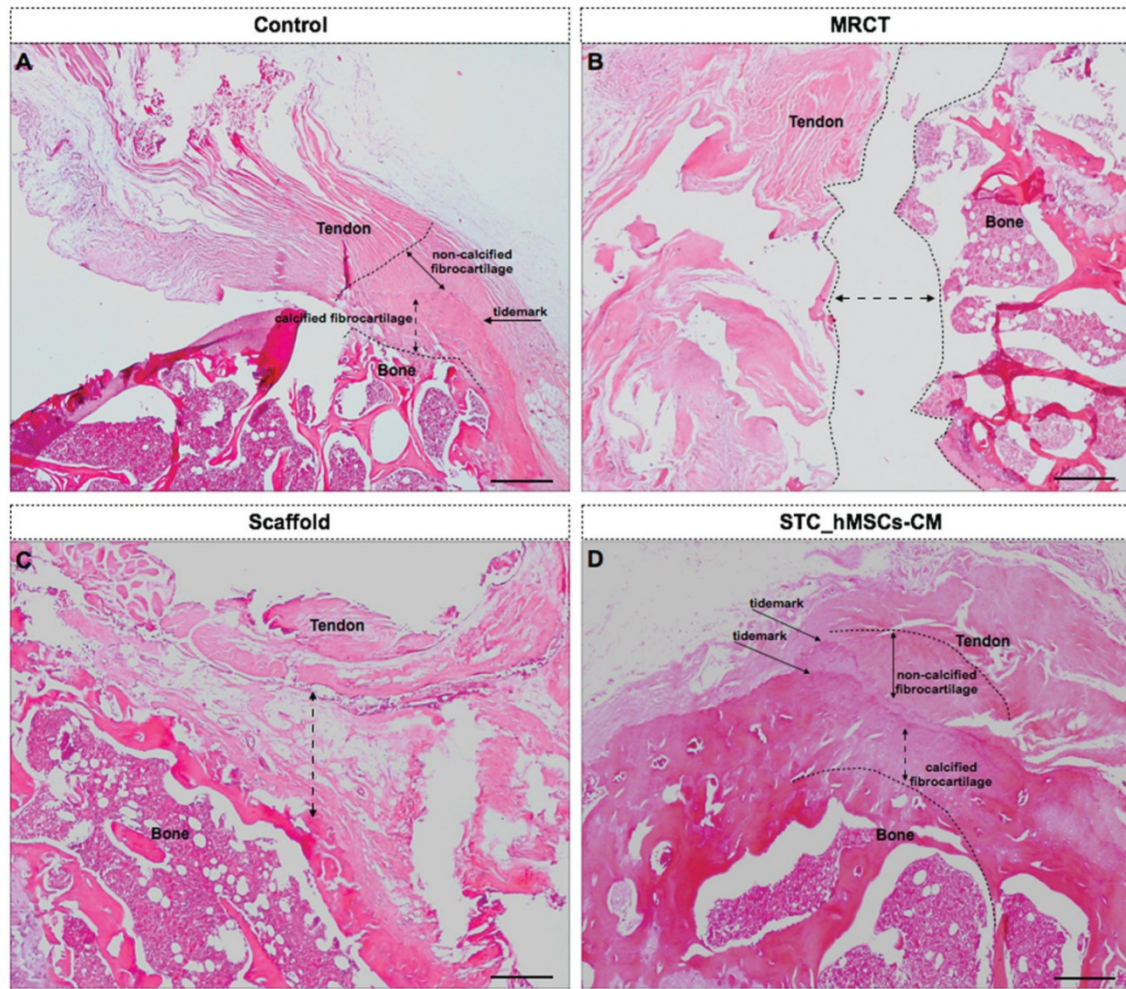
# Results:

## Scanning electron microscopy images



# Results:

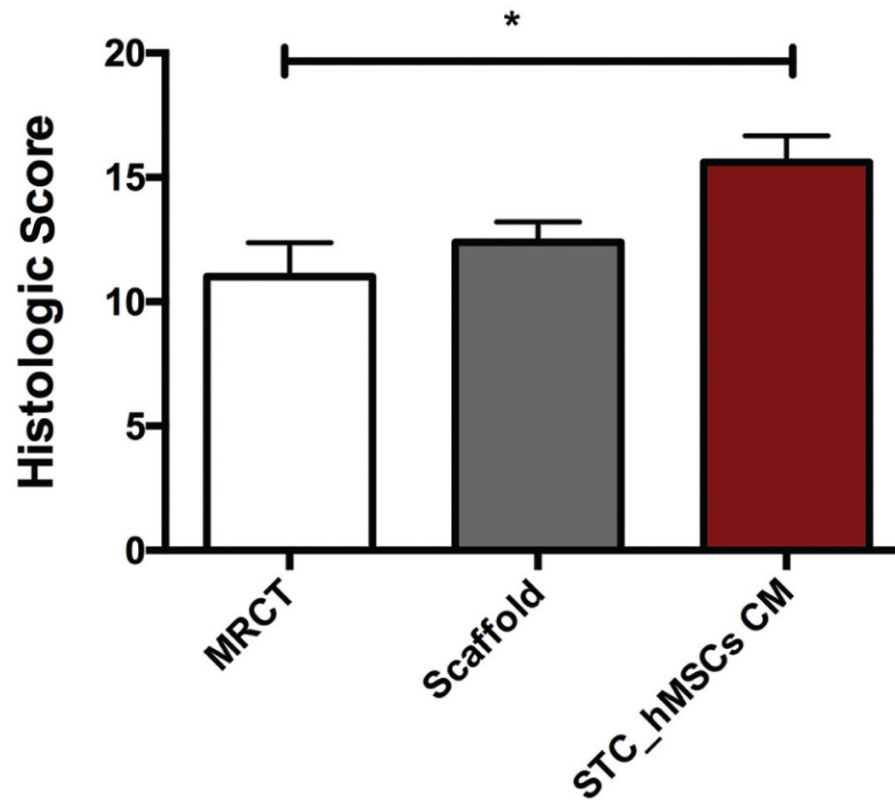
## Histological analysis of rotator cuff tendon-bone interface



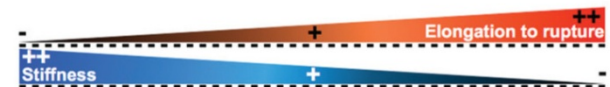
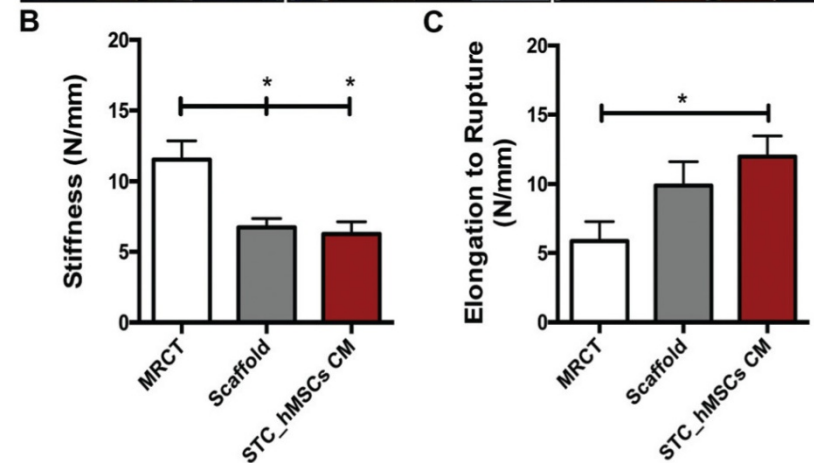
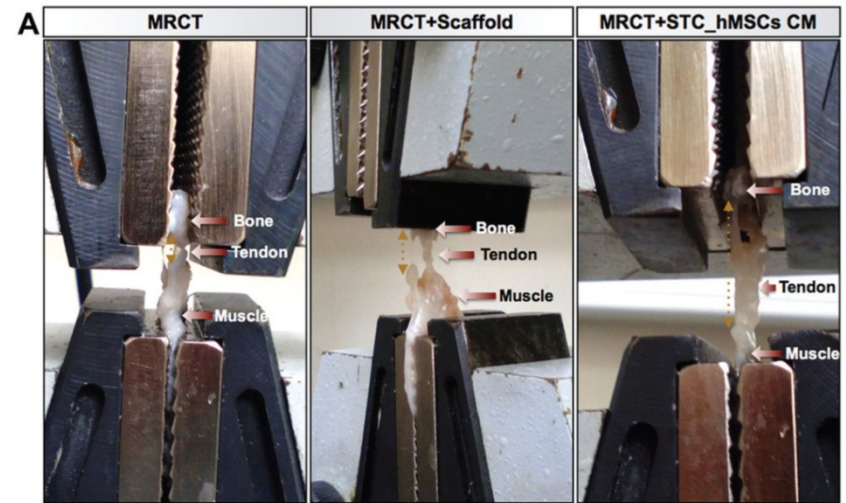


# Results:

## Ide et al modified tendon maturing score



# Results: Analysis of stiffness and total elongation to rupture



# Discussion

# Discussion

- The hMSC secretome-preconditioned hTCs improved the healing process without any surgical reattachment of the torn tendons
- Tendon stem or progenitor cells are proposed as a potential approach to tendon regeneration
- First description of hMSC secretome as a pretreatment for this purpose
- Known trophic factors for tendon cells in the MSC secretome: interleukin6, decorin, and biglycan
- „failure in continuity“
  
- Limitations:    induced disease  
                      single time point for all in vivo analyses  
                      no surgical reattachment

# Discussion

- Further limitations:
  - hMSC and hTCs
  - In vitro: cut not a tear
  - Scaffold with hTCs without pretreatment

# Conclusion

- In vitro: hMSC secretome could increase phenotype, density and viability of htCs
- In vivo: preconditioning htCs with the hMSC secretome in a tissue engineering strategy yielded improved histological healing of rotator cuff Tbi when compared with no intervention, although obtained tissue regeneration remained incomplete

**Thank you for your  
attention**