



# Brain-Derived Extracellular Vesicles as Molecular Probes and Therapeutic Vehicles in Neonatal Brain Injury

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***7.13.22***

The University of Washington acknowledges the Coast Salish peoples of the land on which we teach, learn, and study – this touches the shared waters of all tribes and bands within the Suquamish, Tulalip and Muckleshoot nations

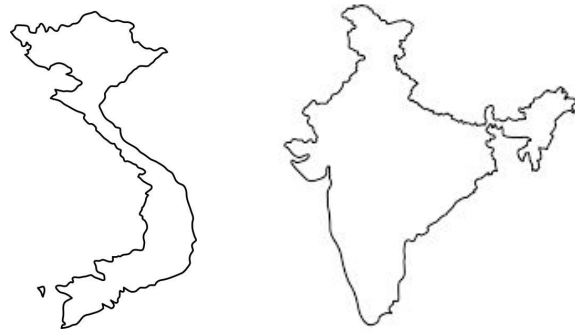


Hypoxic Ischemic-Encephalopathy (HIE) is the leading cause of neonatal mortality and morbidity.

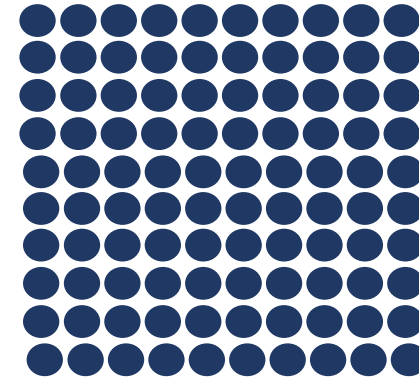
And it has no cure.

# Neonatal HIE is a **Global** Burden

Neonatal HIE most impacts the developing world...



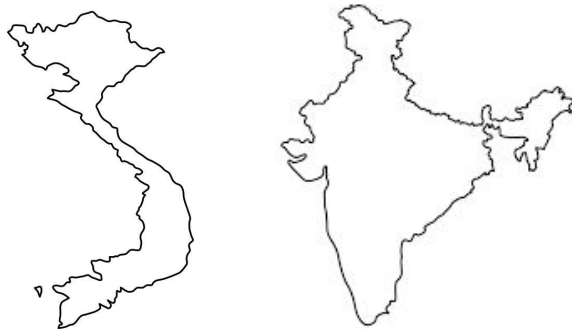
Low-resource countries:  
Incidence of 2.6%



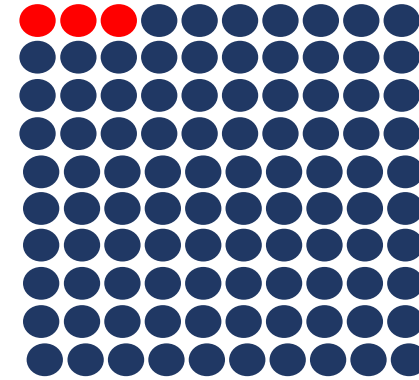
Douglas-Escobar M, 10.1001/jamapediatrics.2014.3269

# Neonatal HIE is a **Global** Burden

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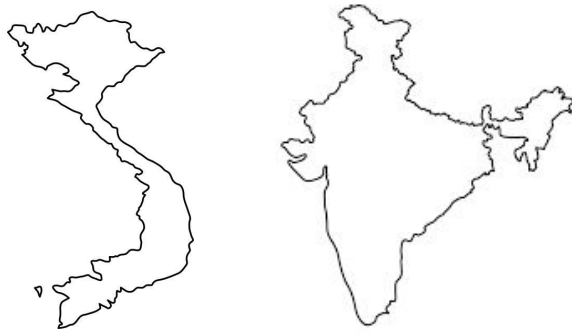
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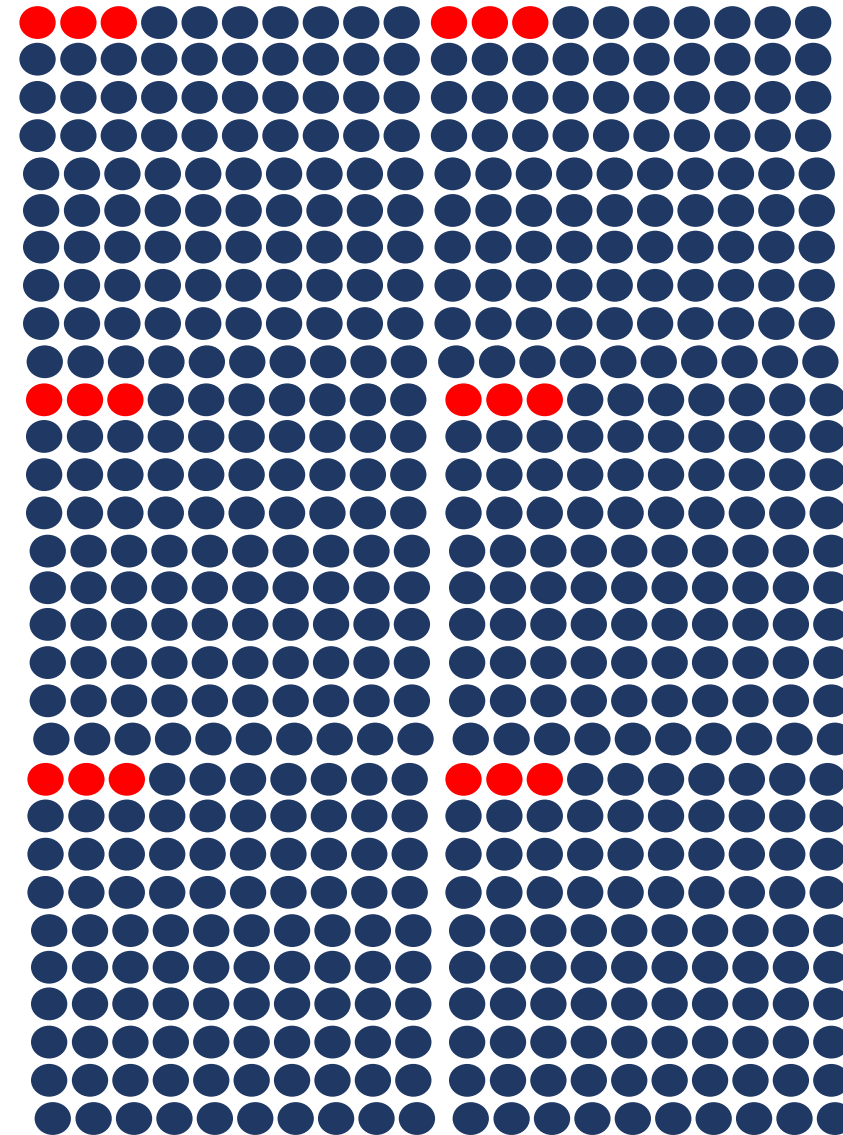
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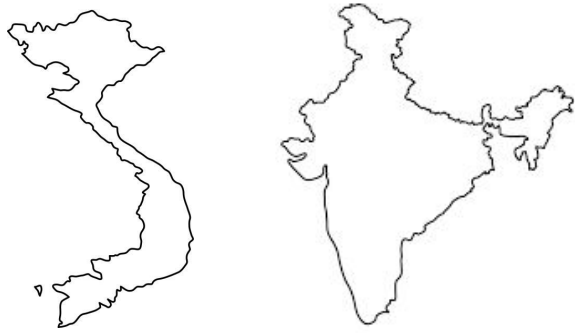
Low-resource countries:  
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# Neonatal HIE is a **Global** Burden

Neonatal HIE most impacts the developing world...



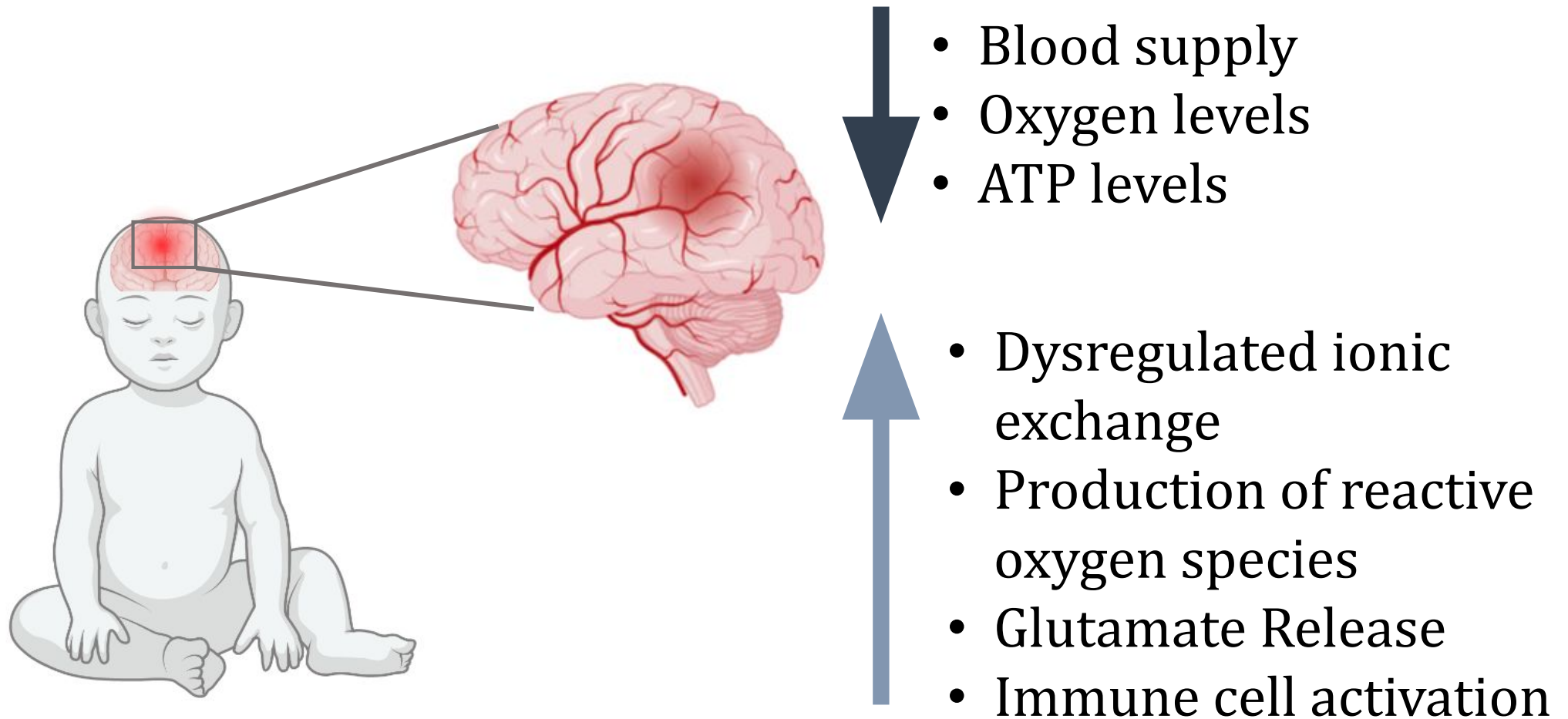
Low-resource countries:  
Incidence of 2.6%

... But the developed world is affected too.



High-resource countries:  
Incidence of 1%

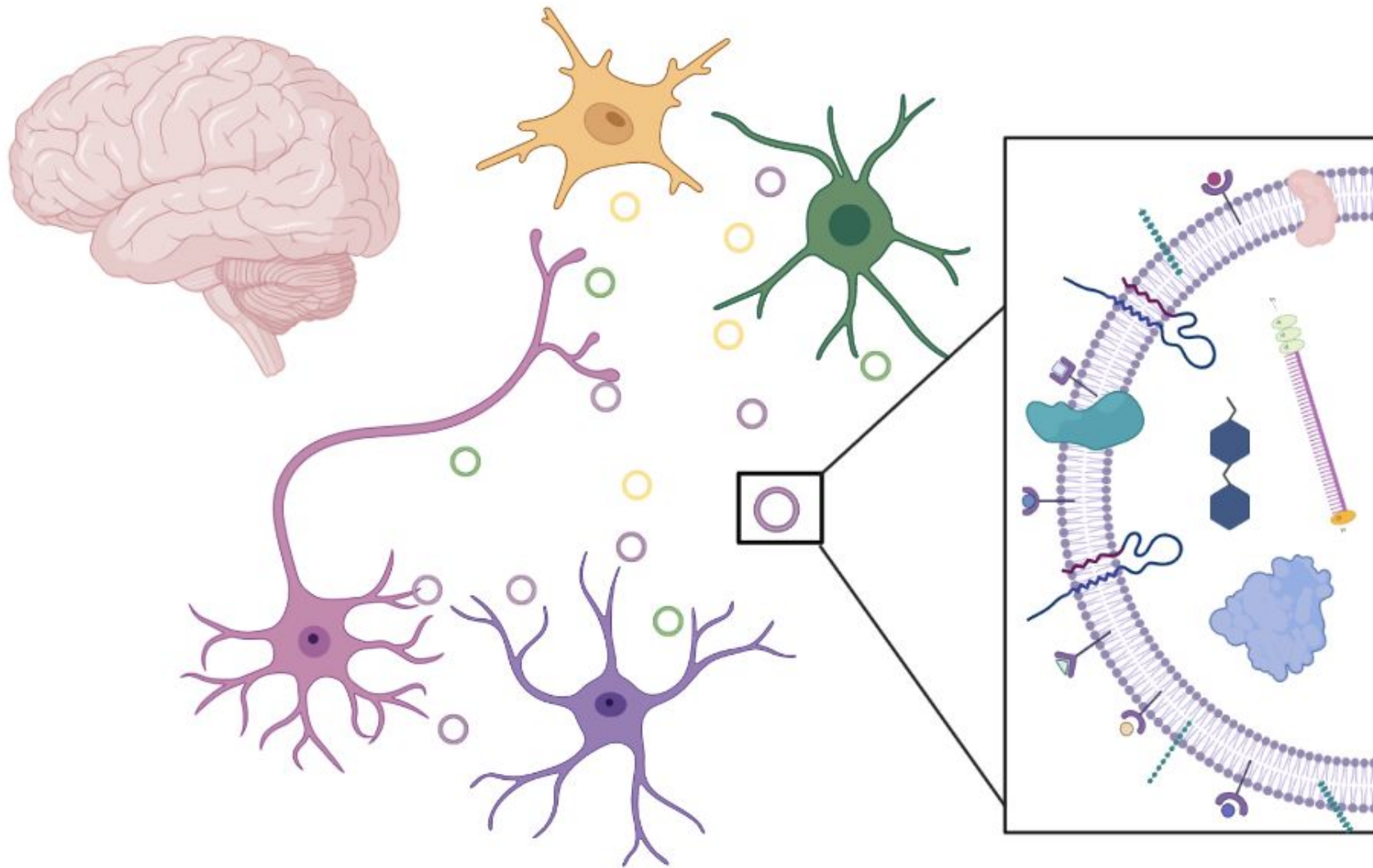
# Brain **Inflammation** is a Hallmark of HIE





Extracellular vesicles (EVs) are important  
players in HIE injury response

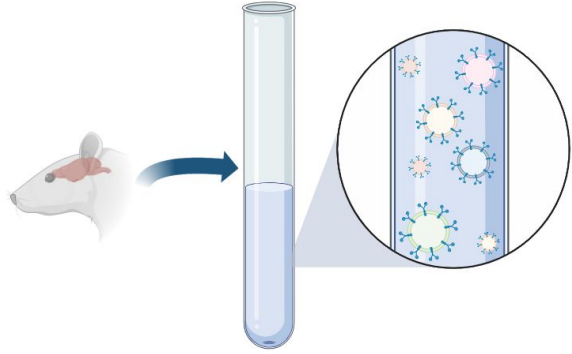
# What Are Extracellular Vesicles (EVs)?



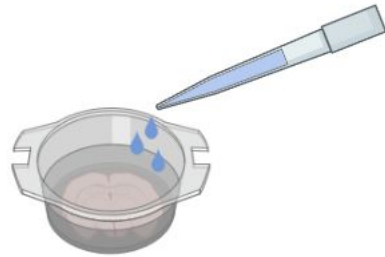
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Holm et. al., 10.1016/j.tins.2018.03.006  
Zheng M. et.al. 10.1021/acs.bioconjchem.9b00085.  
Turturici, G., et.al., 10.1152/ajpcell.00228.2013.

# Research Objectives



Isolation & Characterization of  
Brain Tissue Derived EVs (BEVs)



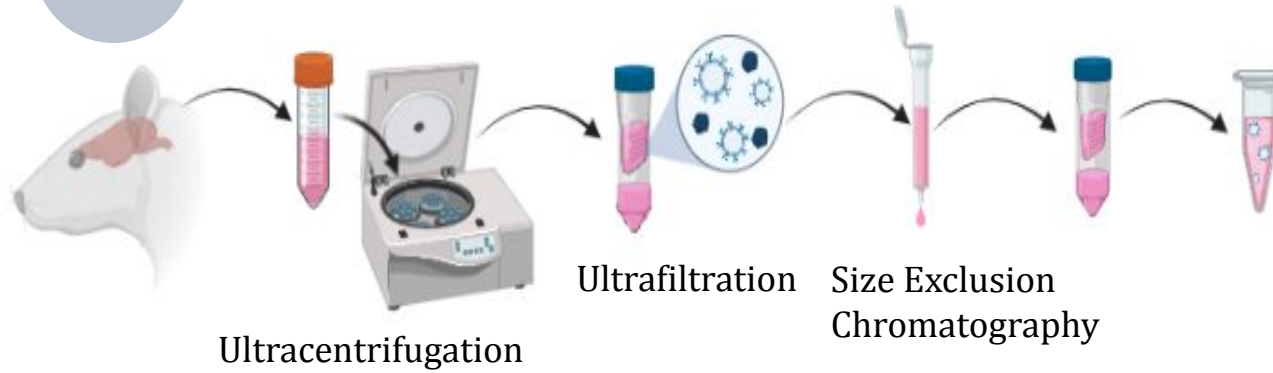
Evaluate Therapeutic Efficacy of BEVs  
in an *Ex Vivo* Model of Neonatal HI



Investigate BEV Fate in the Neonatal  
HI Brain

# Overview of Methods

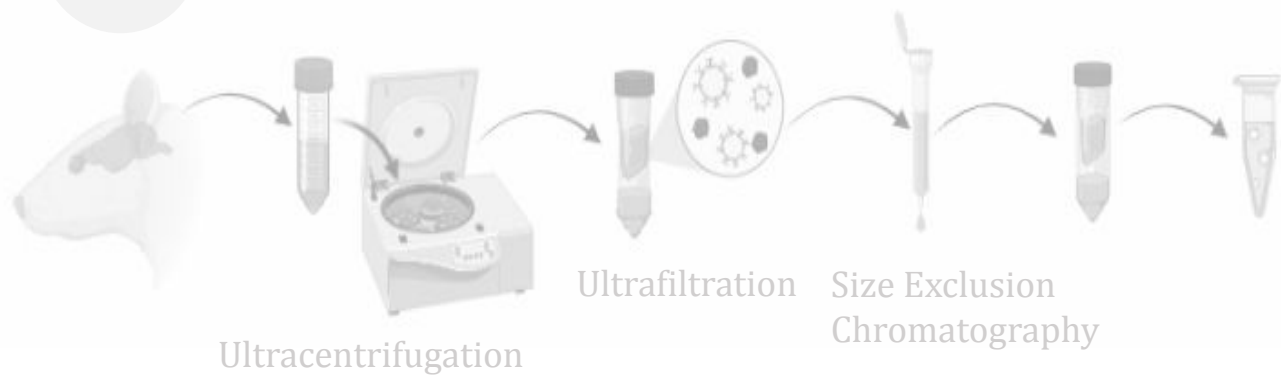
## 1 Isolation & Characterization of BEVs



# Overview of Methods

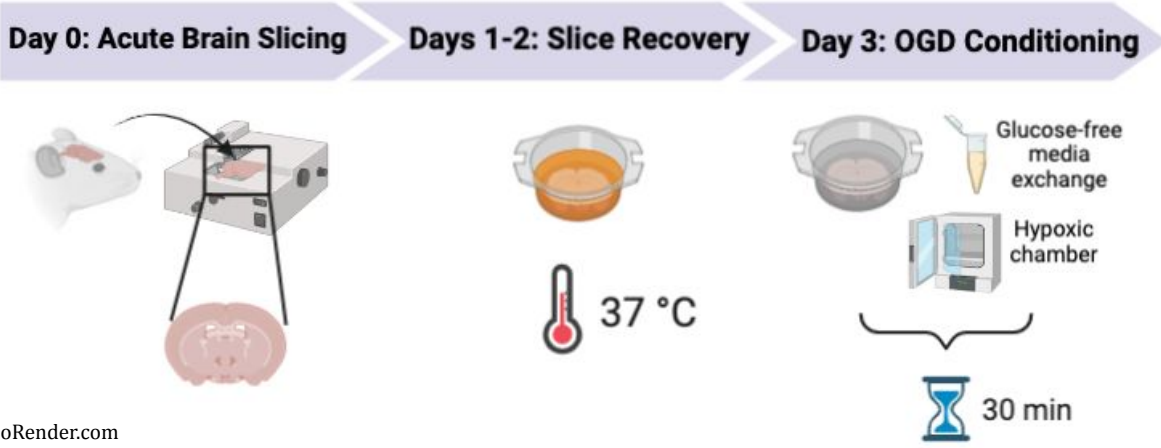
1

## Isolation & Characterization of BEVs



2

## Preparing the *Ex Vivo* Neonatal HIE Model

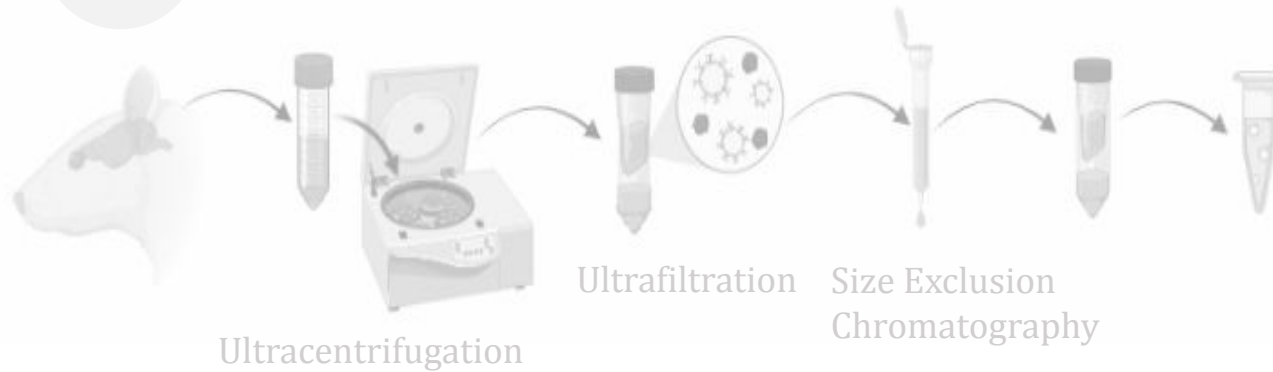


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Nguyen NP. et.al., DOI: 10.3390/ijms23020620  
Joseph et.al., DOI: 10.1002/btm2.10175

# Overview of Methods

## 1 Isolation & Characterization of BEVs



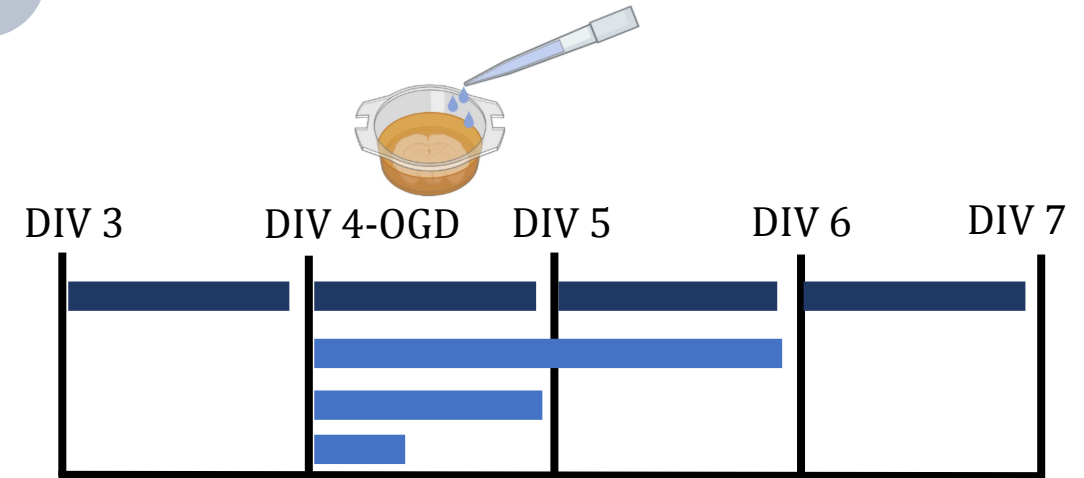
## 2 Preparing the *Ex Vivo* Neonatal HIE Model

Day 0: Acute Brain Slicing    Days 1-2: Slice Recovery    Day 3: OGD Conditioning

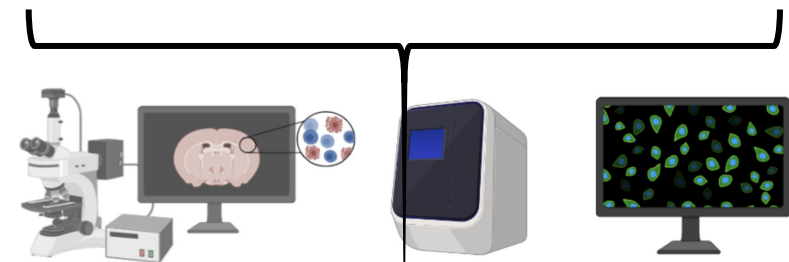


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## 3 BEV Administration & Assessment

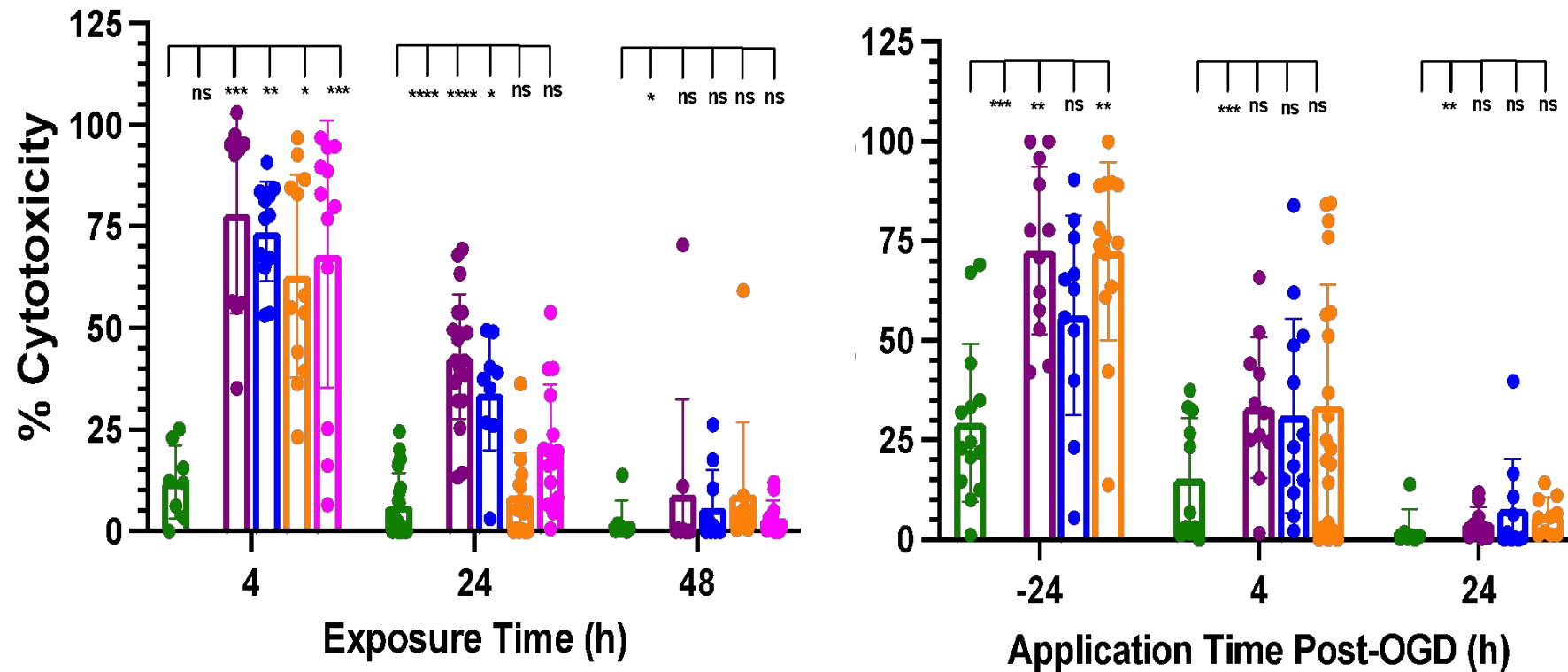


- Experiments With Changing BEV Exposure Times
- Experiments With Changing BEV Application Times



Nguyen NP. et.al., DOI: 10.3390/ijms23020620  
McKenna et.al., DOI: 10.1186/s13036-022-00293-w

# BEV Treatment Decreased Cytotoxicity in HI Slices

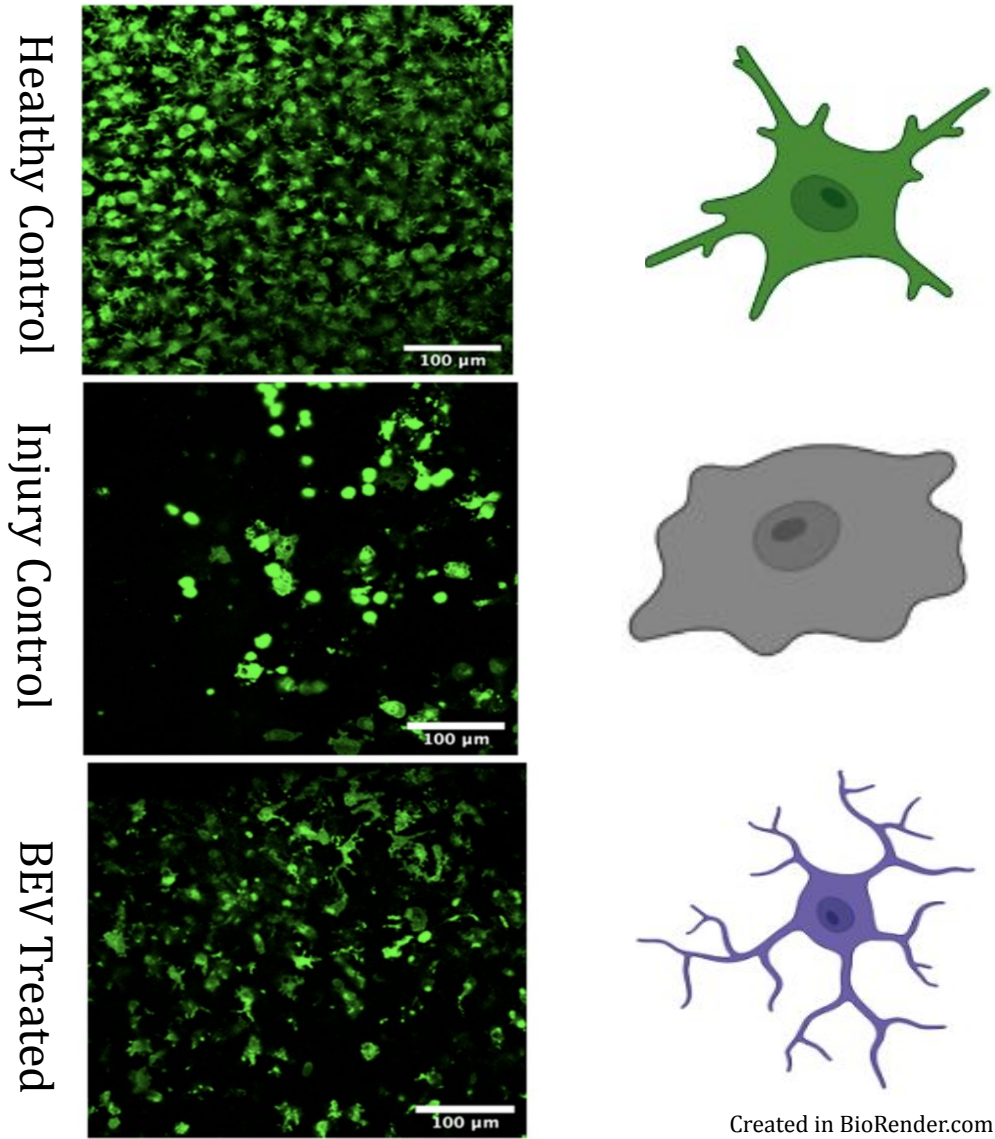
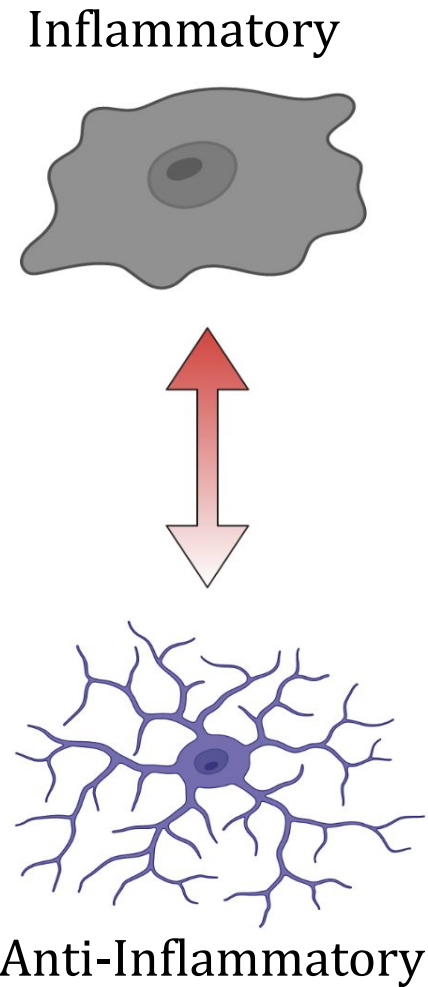
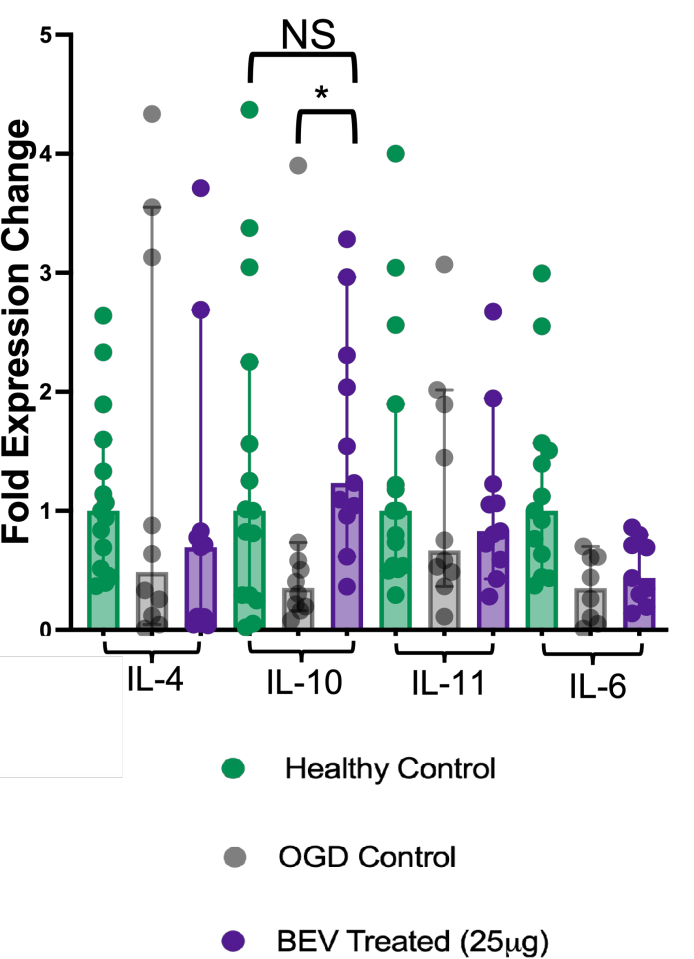


- Healthy Control
- Injury Control
- 5 µg
- 12.5 µg
- 25 µg
- 50 µg

- Minimum therapeutic dose: 25µg
- Therapeutic exposure time: 48h
- BEV maintains therapeutic viability when applied 24h post-injury

# BEV Treatment Increased Anti-Inflammatory Cytokine Expression

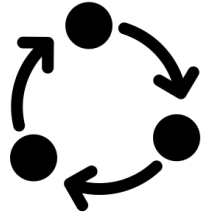
## INFLAMMATORY MARKERS



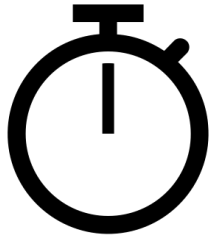
Modified from: Nguyen NP. et.al., DOI: 10.3390/ijms23020620

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# Important Conclusions



Optimized methods allow for BEV isolation & characterization

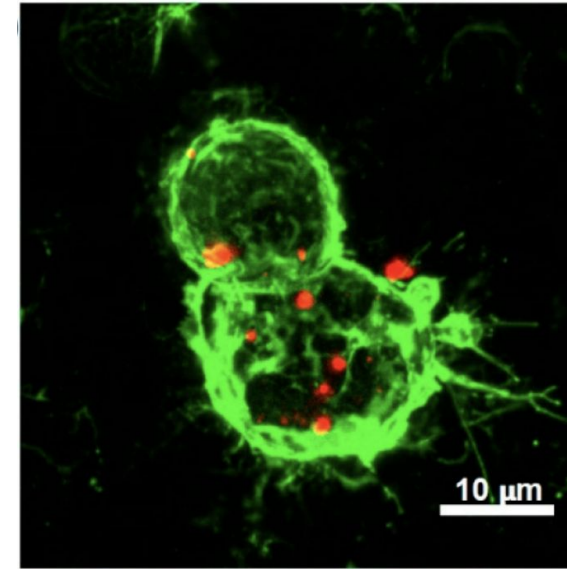
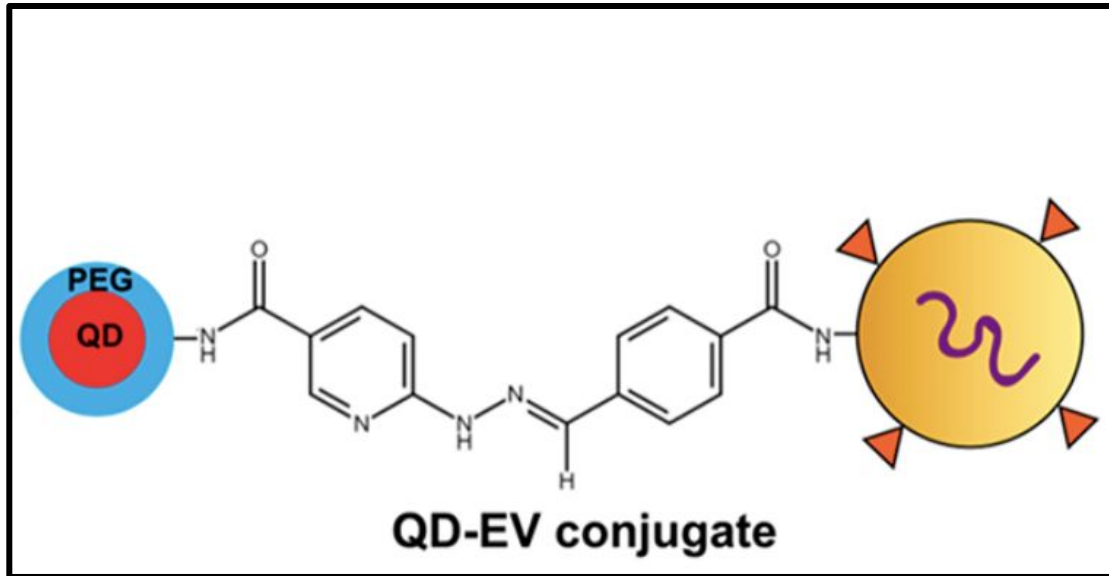


BEVs have dose- and time-dependent therapeutic effects

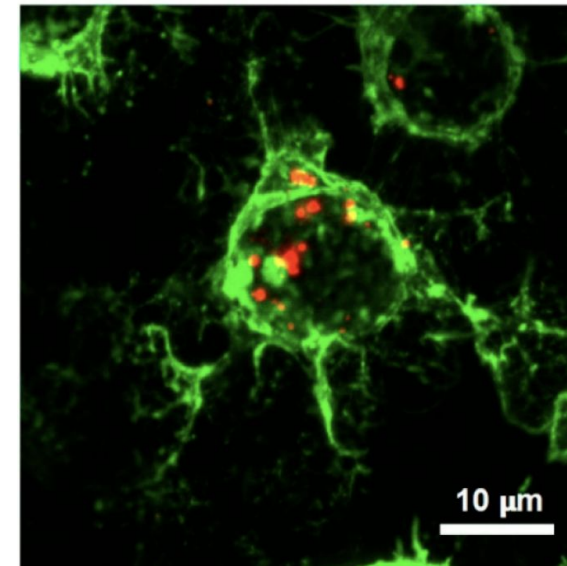
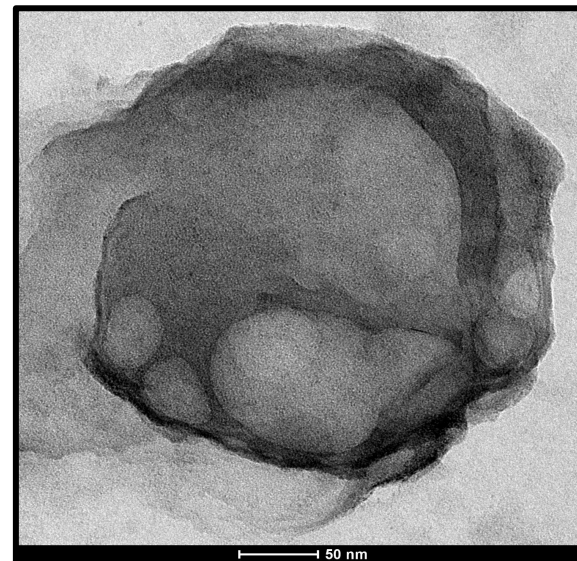
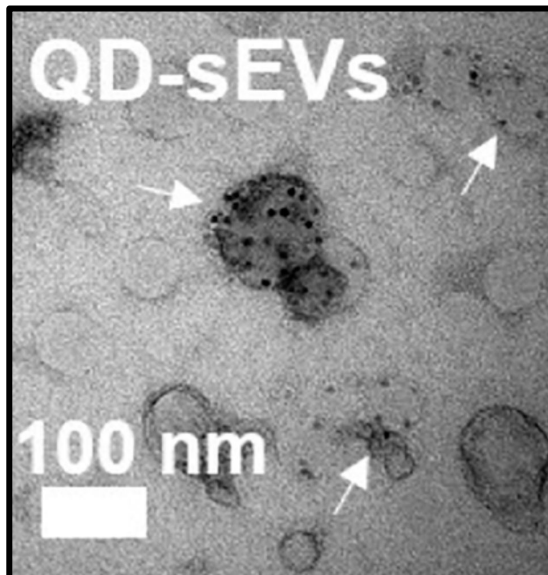


BEVs demonstrate therapeutic potential by decreasing cell cytotoxicity, increasing IL-10 expression, influencing microglia morphology

# Probing BEV Fate in the Neonatal HI Brain with Quantum Dots



Transmission Electron  
Microscopy



Nguyen NP. et.al., DOI: 10.3390/ijms23020620  
Zhang et.al, DOI: 10.1021/acsnm.0c01553

# Our Team and Our Funding



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Jonny Harrigan  
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Manasvini Calmidi  
Kristin Bennett  
Malcolm Renney

## *And our many collaborators*

Dr. Tommy Wood  
Dr. Sunny Juul  
**Dr. Lucia Vojtech**

Dr. Jim Pfaendtner  
Dr. David Beck  
Dr. Cole DeForest



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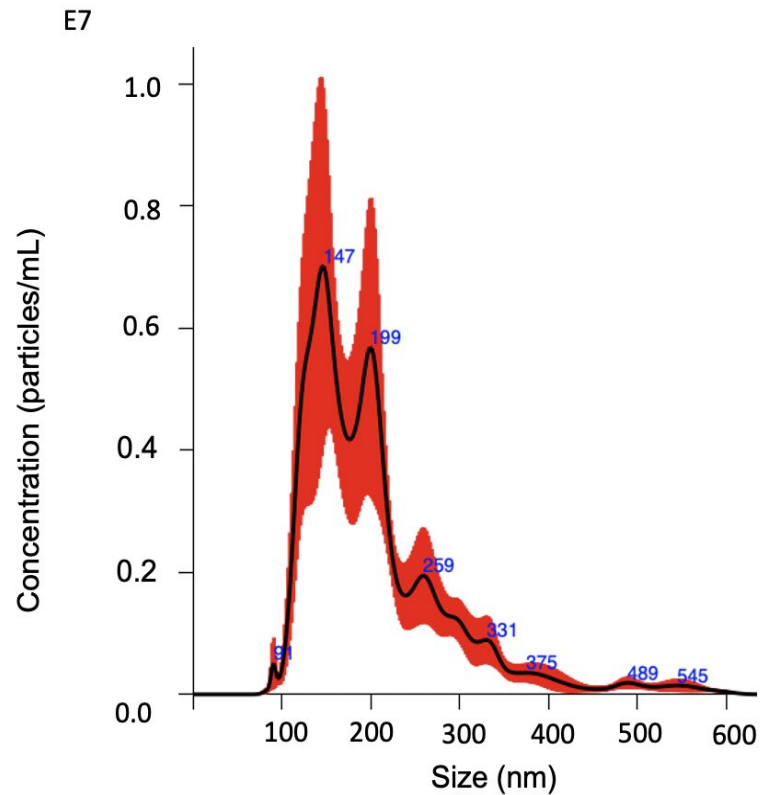


# References

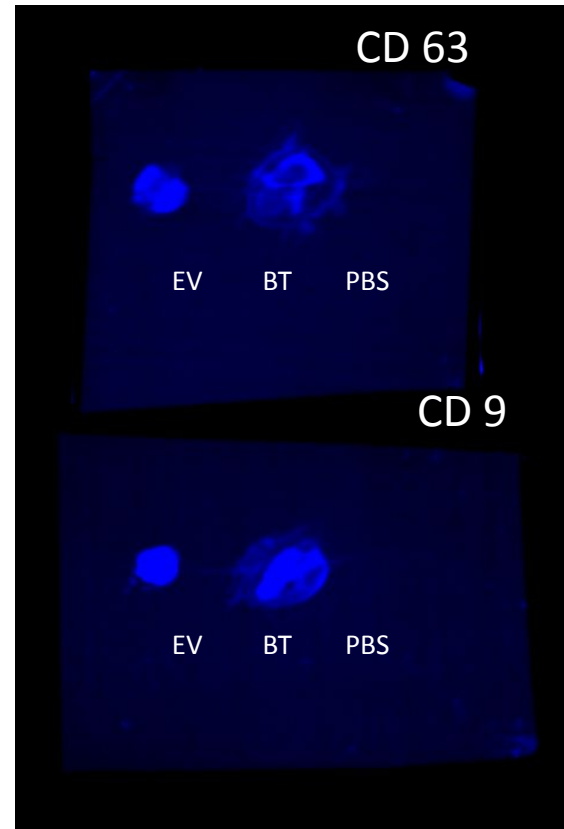
- [1] Douglas-Escobar M, *JAMA Pediatrics* (2015), 10.1001/jamapediatrics.2014.3269
- [2] Liao et. al., *Nanobiomedicine*. (2020), 10.1177/1849543520970819
- [3] Benakis et. al, *Front.. Cell. Neurosci.* (2015): 10.3389/fncel.2014.00461
- [4] Holm et. al., *Trends in Neuroscience* (2018) DOI: 10.1016/j.tins.2018.03.006
- [5] Zheng M. et.al., *Bioconjugate Chemistry* (2019) doi: 10.1021/acs.bioconjchem.9b00085.
- [6] Turturici, G., et.al., *American Journal of Physiology-Cell Physiology* (2014),10.1152/ajpcell.00228.2013.
- [7] **Nguyen NP. et.al., *IJMS* (2022), 10.3390/ijms23020620**
- [8] Vella et.al, *Journal of Extracellular Vesicles* (2014), 10.1080/20013078.2017.1348885
- [9] Joseph, et.al., *BTM* (2020), 10.1002/btm2.10175
- [10] McKenna et.al., *JBE* (2022), 10.1186/s13036-022-00293-w
- [11] Zhang et.al, *BTM* (2020): 10.1021/acsanm.0c01553

# BEV Characterization

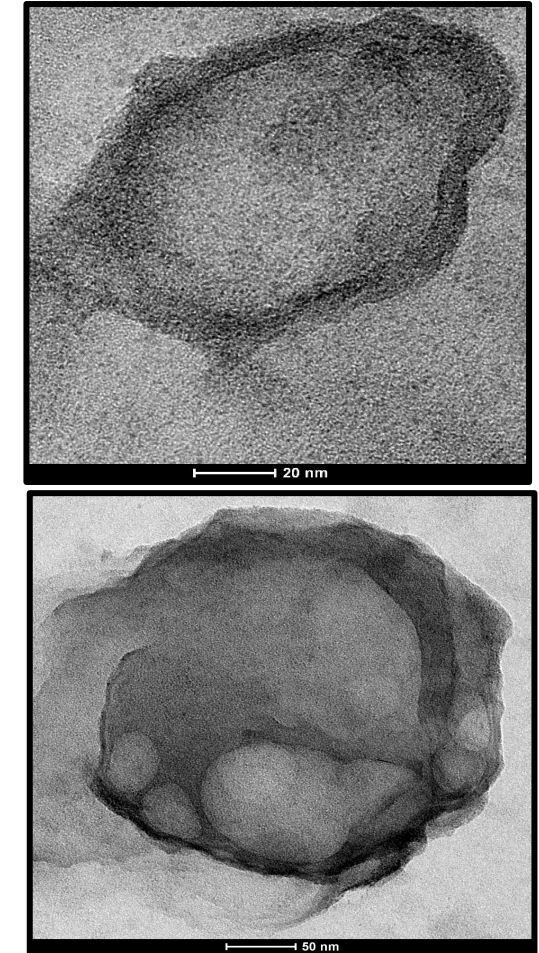
## Nanoparticle Tracking Analysis



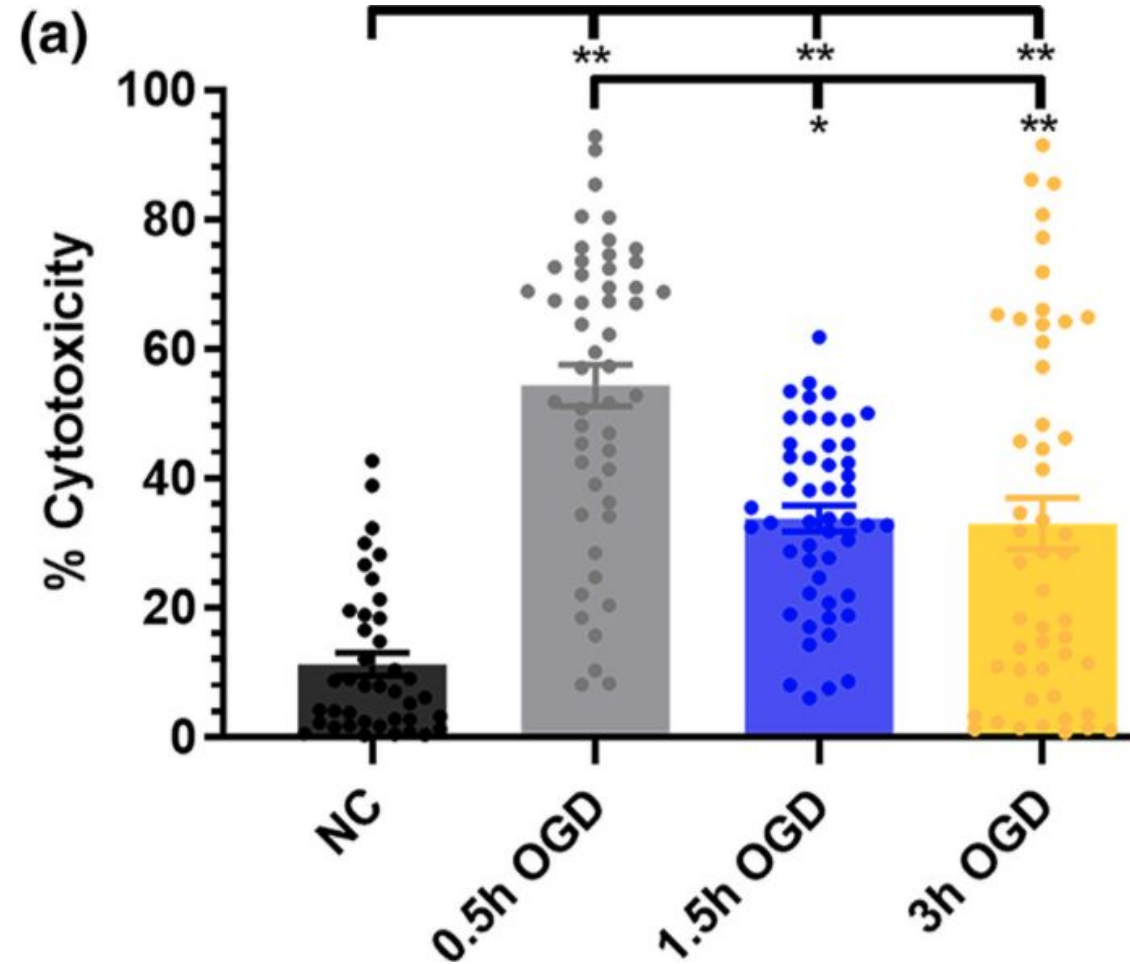
## Immunoblot for EV Markers



## Transmission Electron Microscopy

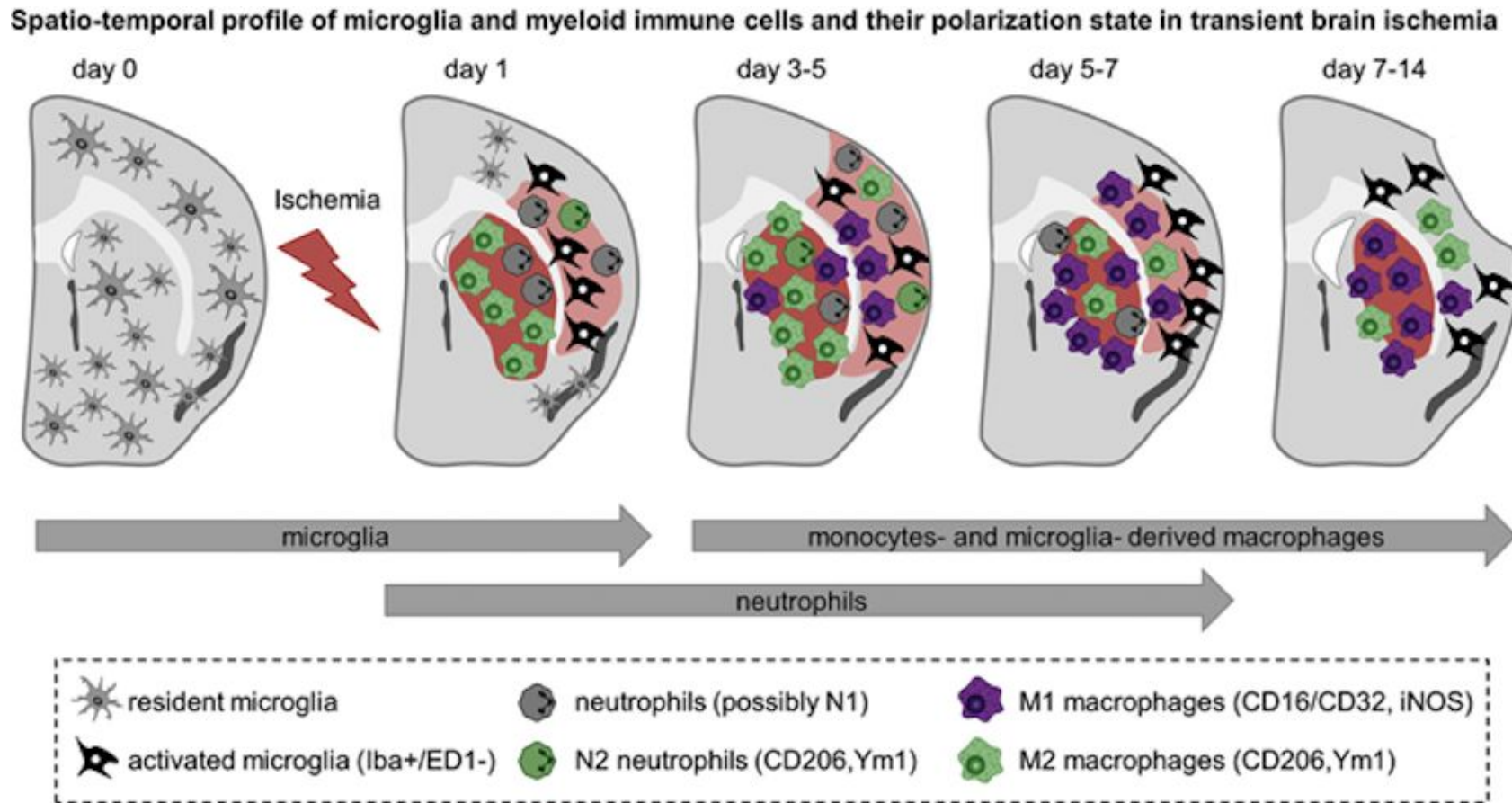


# 0.5 hr OGD Treatment Resulted in Highest % Cell Death

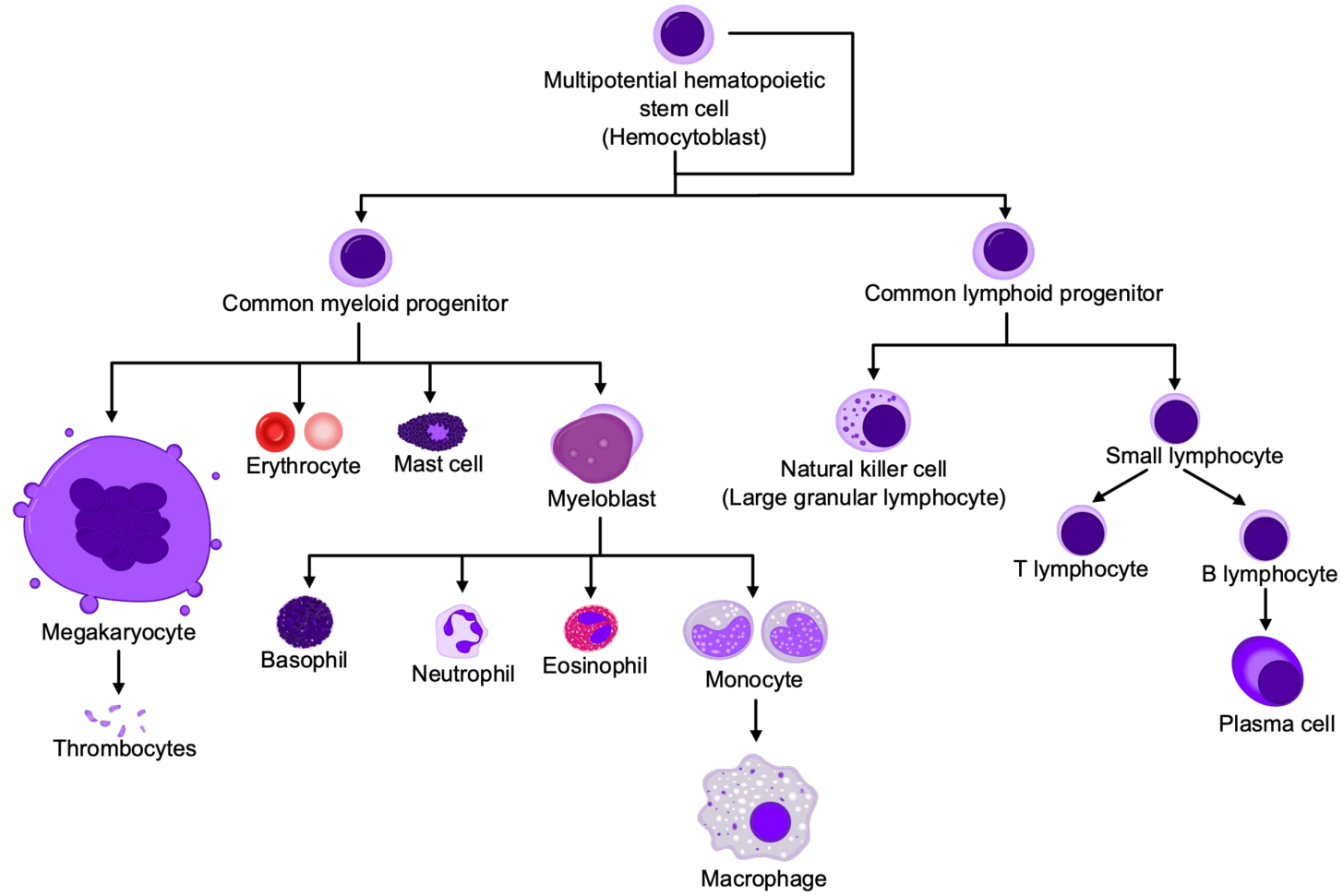


N=40-50 images per condition

# Microglial response post-injury

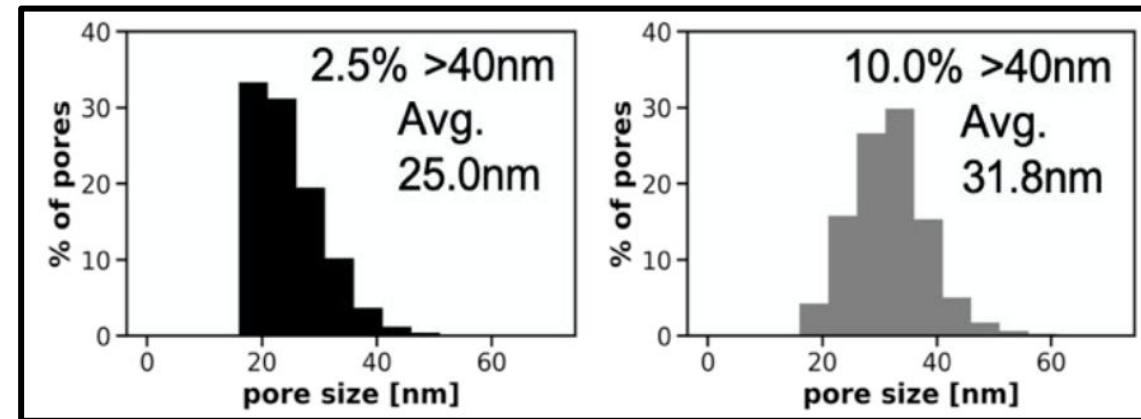
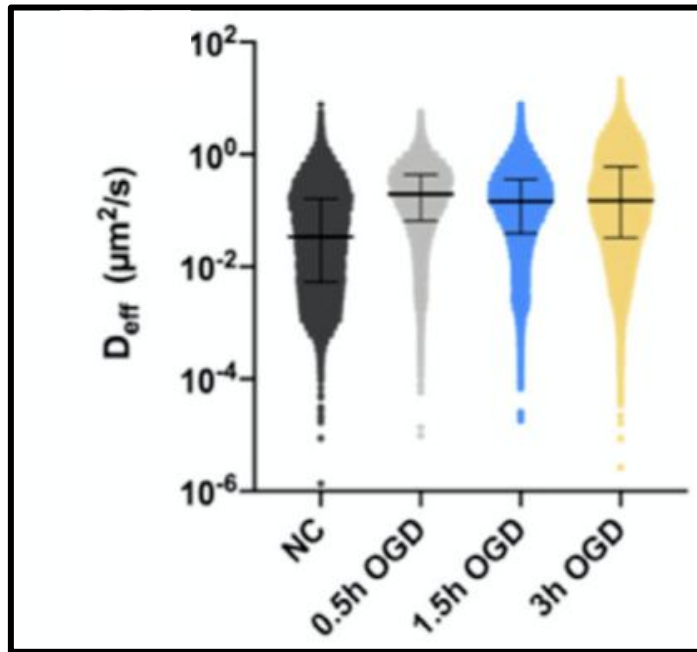


# Immunology: hematopoietic stem cell



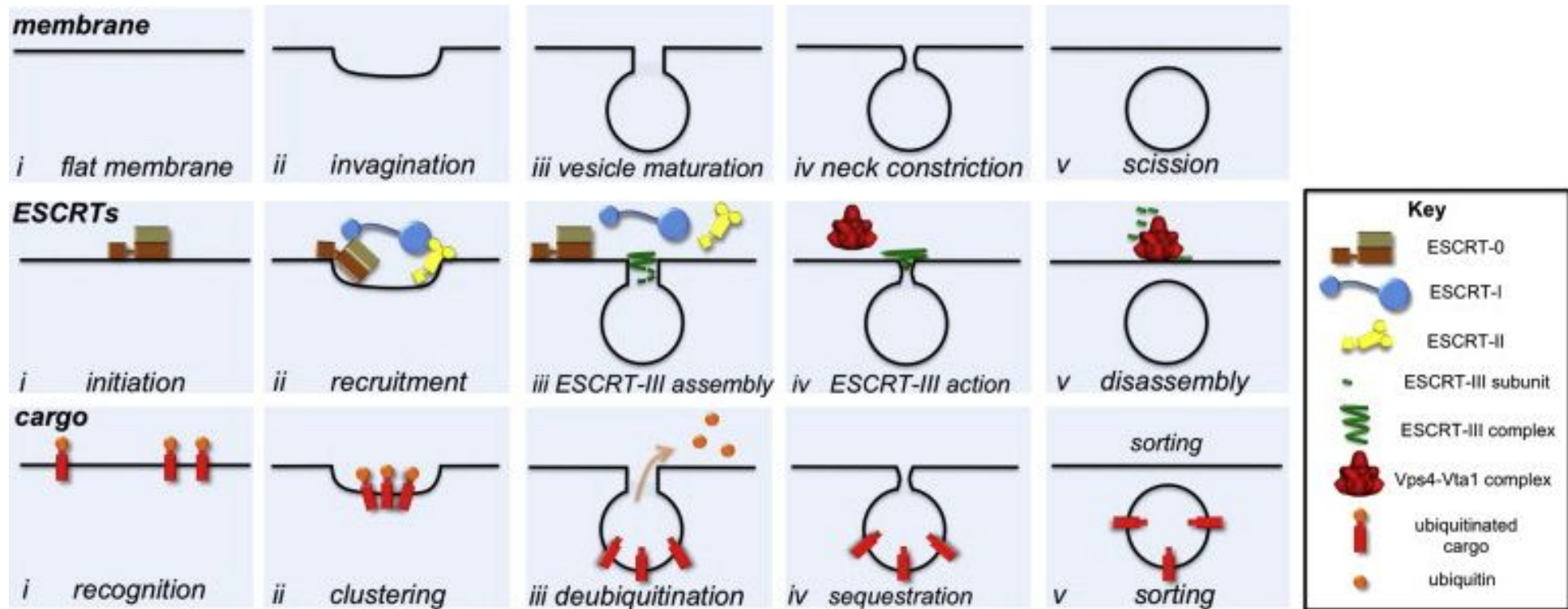
# EV Transport through the brain ECM

- OGD treatment increases diffusivity of nanoparticles through ECM
- EV transport mainly governed by passive diffusion
- Cortical images taken within first 3-5 cell layers

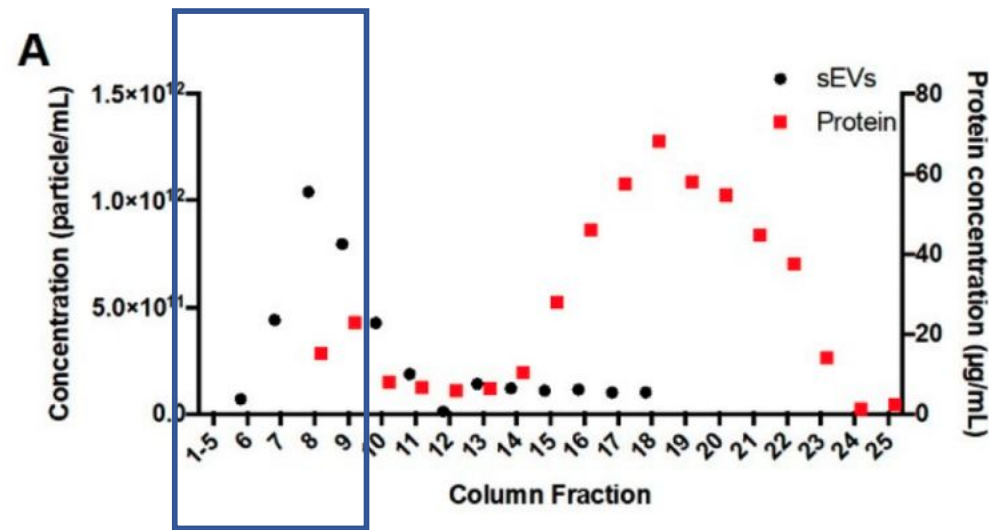


# ESCRT (Endosomal Complex Required for Transport)

- ESCRT 0,I,II: recognize and sequester membrane proteins
  - ESCRT III: responsible for membrane budding



# SEC fractions 7-10 yield highest sEV concentration



# Current EV labeling methods

- Reporter proteins (fluorescent markers)
  - Pros: sensitive, high signal to noise
  - Cons: Requires genetically engineered cells
- Fluorescent dyes
  - Pros: easy, accessible, well characterized
  - Cons: Quenching, photobleaching
- Quantum dots
  - Pros: tailorable, high quantum yield
  - Cons: expensive, toxic
- Radionuclide or iron oxide trapping (MRI)
  - Pros: high penetration
  - Cons: toxic, low signal to noise, cost

