CD34+ Hematopoietic Stem Cell Differentiation Platform



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Outline



- Stem cell biology
- CD34⁺ hematopoietic stem cell differentiation platform
 - Monocyte/Macrophage differentiation and polarization
 - Neutrophil differentiation
 - Eosinophil differentiation
 - Mast cell differentiation and degranulation assay
 - Megakaryocyte and Platelet differentiation
 - Erythroid differentiation

Stem cell biology

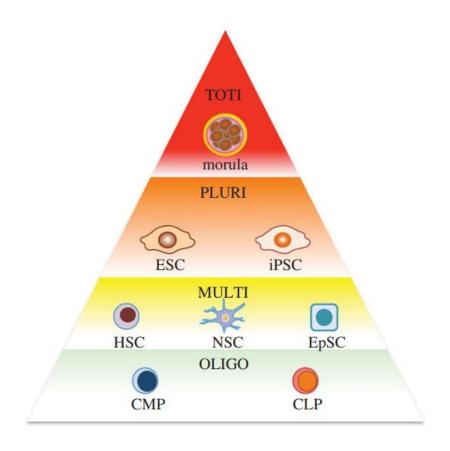
Classification of stem cells



The stem cells classified into totipotent, pluripotent, multipotent, oligopotent and unipotent based on the range of differentiation potentials.

Table 1 Classification of stem cells derived from various sources based on their differentiation potential

Type of stem cells	Developmental potency	Examples
Totipotent	Ability to differentiate	Zygote and the first
	into all cell types and a	few cells that result
	functional organism	from the division of
D 1	41.11	the zygote
Pluripotent	Ability to differentiate into almost all cell	ESCs
	types but cannot form a	
	functional organism	
Multipotent	Ability to differentiate	Hematopoietic (adult)
Munipotent	into a closely realted	stem cells, MSCs,
	family of cells	dental pulp stem
	,	cells, etc.
Oligopotent	Ability to differentiate	Lymphoid (adult) or
0 1	into a few cell types	myeloid stem cells
Unipotent	Ability to only produce	Muscle (adult) stem
	cells of their own type,	cells
	but have the property of	
	self-renewal required to	
	be labeled a stem cell	Onco'



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Stem cell biology
Advantages and disadvantages of different stem cells

Table 1. Comparison of the advantages and disadvantages of stem cells.

Type	Advantages	Disadvantages	References
Embryonic stem cells	Pluripotent, unlimited quantity, heritable gene defect correction, off-the-shelf product potential, broad biomedical applications	Allogeneic rejection, limited accessibility, complicated differentiation, teratoma risk	Zhang et al. 2002; Rideout et al. 2002; Swijnenburg et al. 2008a, 2008b; Bel et al. 2010; Lin et al. 2010; Lü et al. 2010; Song et al. 2010; Dai et al. 2011; Deuse et al. 2011; Xiong et al. 2011
Induced pluripotent stem cells	Pluripotent, autologous, pathology- specific cell production, broad biomedical applications	Susceptible to autologous pathology, low induction efficiency, awaiting standar- dized production, complicated differ- entiation, teratoma risk, methodological oncogenesis, induced histoincompatability	Maherali and Hochedlinger 2008; Nelson et al. 2009; Miura et al. 2009; Woltjen et al. 2009; Blin et al. 2010; van Laake et al. 2010; Bar-Nur et al. 2011; Mauritz et al. 2011; Pearl et al. 2011; Narsinh et al. 2011
Hematopoietic stem cells	Multipotent, paracrine effects, autologous, standardized isolation, many biomedical applications	Susceptible to autologous pathology, unable to sustain cells ex vivo, limited number, limited accessibility, limited to hematopoietic lineage	Nygren et al. 2004; Fujita et al. 2007; Templin et al. 2008; Ha et al. 2010; Sun et al. 2010; Li et al. 2010
Mesenchymal stem cells	Multipotent, paracrine effects, autologous, standardized isolation, many biomedical applications	Susceptible to autologous pathology, complicated accessibility, low transdif- ferentiation potential	Miyahara et al. 2006; Hare et al. 2009; Quevedo et al. 2009; Schuleri et al. 2009; Hatzistergos et al. 2010; Huang et al. 2010; Lee et al. 2010; Chong et al. 2011
Endothelial progenitor cells	Unipotent, paracrine effects, autologous, high accessibility, many biomedical applications	Susceptible to autologous pathology, low quantity, undefined or undefinable immunophenotype, awaiting standardized isolation	Werner et al. 2005; Abou-Saleh et al. 2009; Desai et al. 2009; Frederick et al. 2010; Achneck et al. 2011; Hynes et al. 2011; Richardson and Yoder 2011
Organ-specific precursors (e.g., CSCs, NSCs, SkMBs, PSCs)	Unipotent, autologous, organ-specific applications	Susceptible to autologous pathology, low quantity and (or) accessibility, undefined phenotype(s), awaiting standardized isolation	Andersen et al. 2009; Domian et al. 2009; Hansson et al. 2009; Lee et al. 2011; Le Belle et al. 2011; Leri et al. 2011; Smart et al. 2011; Smukler et al. 2011

Note: CSCs, cardiac stem cells; NSCs, neural stem cells; SkMBs, skeletal myoblasts; PSCs, pancreatic stem cells.

Stem cell biology

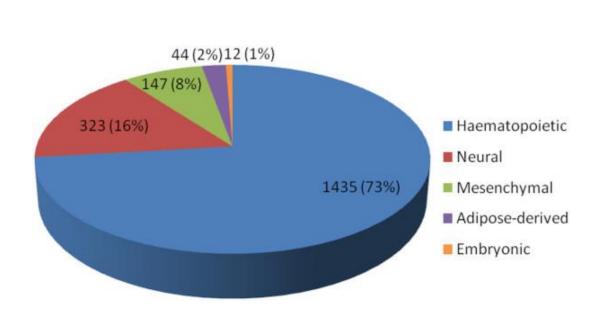
Hematopoietic stem cells

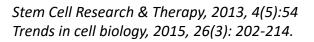


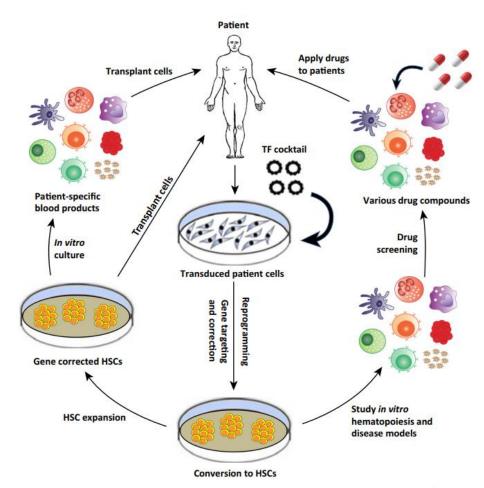
HSCs (Hematopoietic stem cells) are the most application of stem cells in open clinical trials.

■ HSCs could be used in a variety of different studies, including gene editing, transplantation, drug screening to

identify novel therapeutics for a variety of diseases.







Trends in Cell Biology

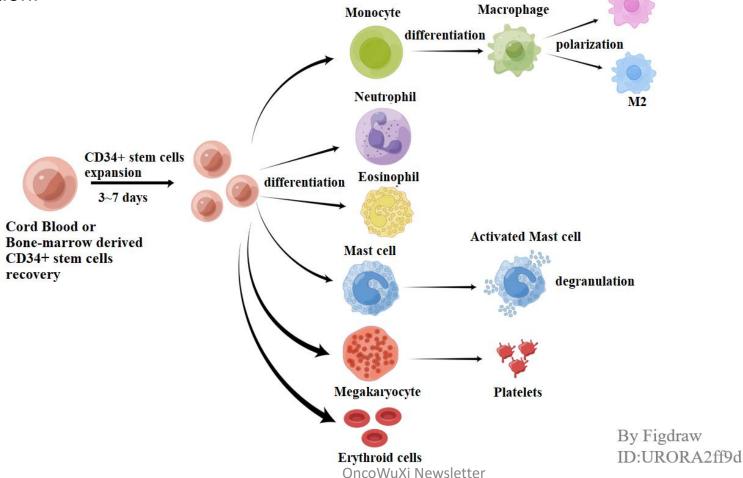
CD34⁺ hematopoietic stem cell differentiation platform



CD34⁺ stem cells can be obtained from commercial umbilical cord blood and bone marrow.

CD34⁺ stem cell differentiation platform can facilitate drug testing or screening involved with immune cell

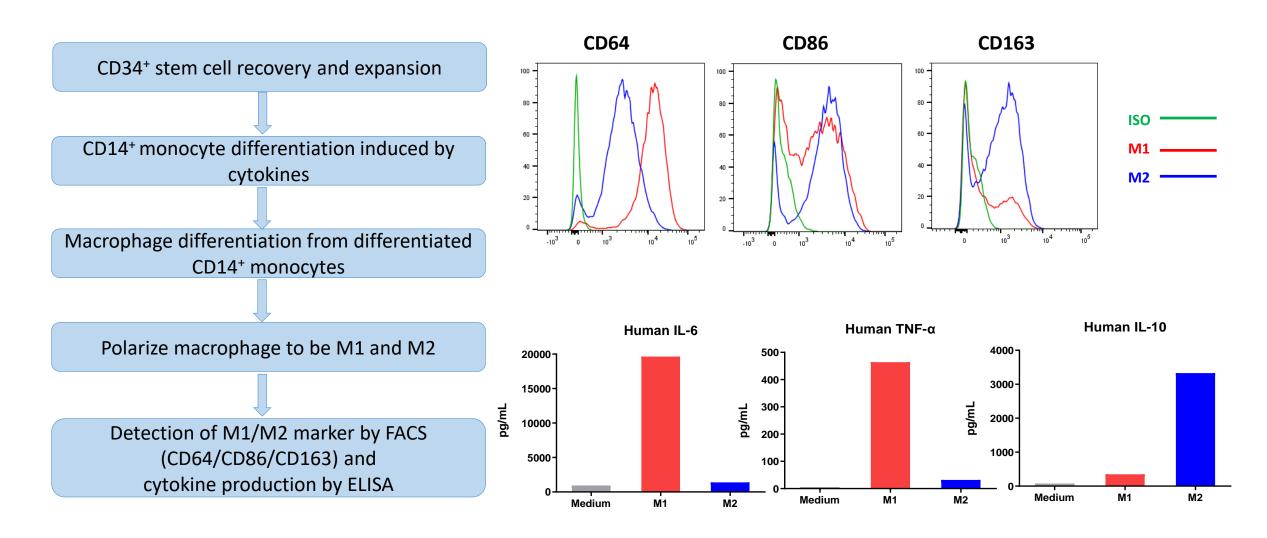
differentiation.



Monocyte/Macrophage differentiation and polarization



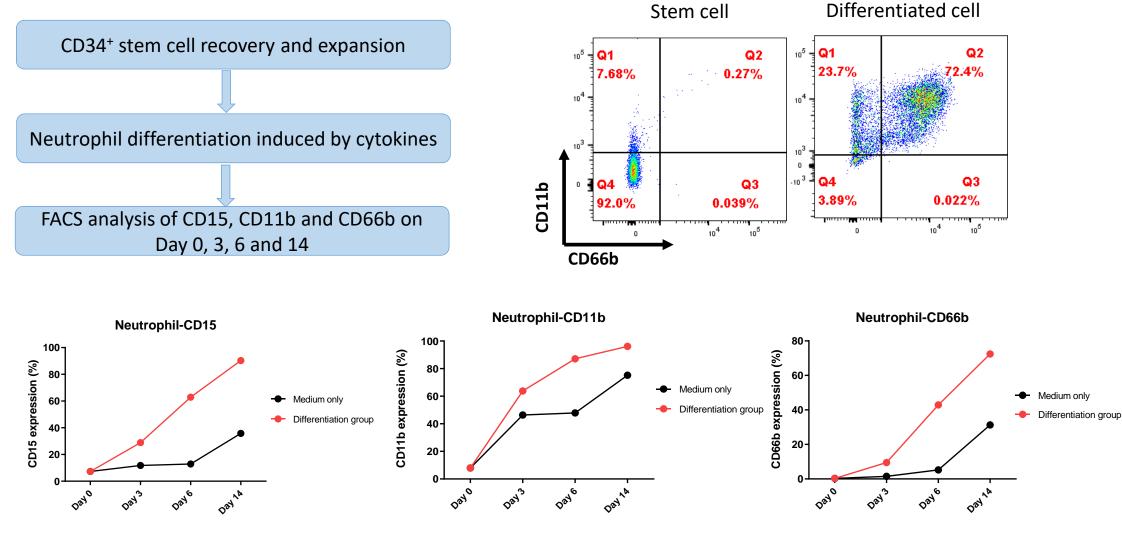
M1/M2 phenotyping and function analysis



Neutrophil differentiation



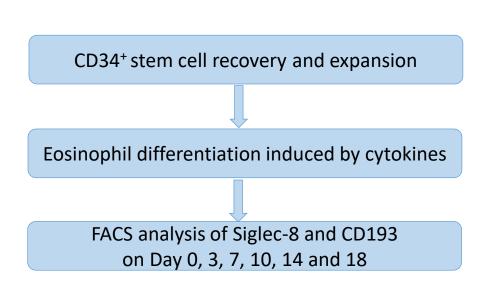
FACS validation and summary of Neutrophil_CD15, CD11b and CD66b

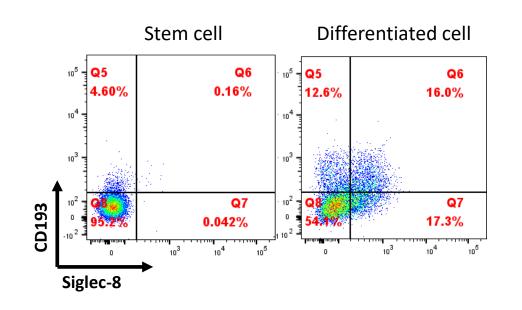


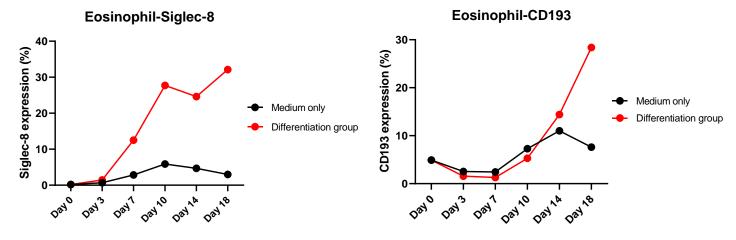
Eosinophil differentiation



FACS validation and summary of Eosinophil_Siglec-8 and CD193



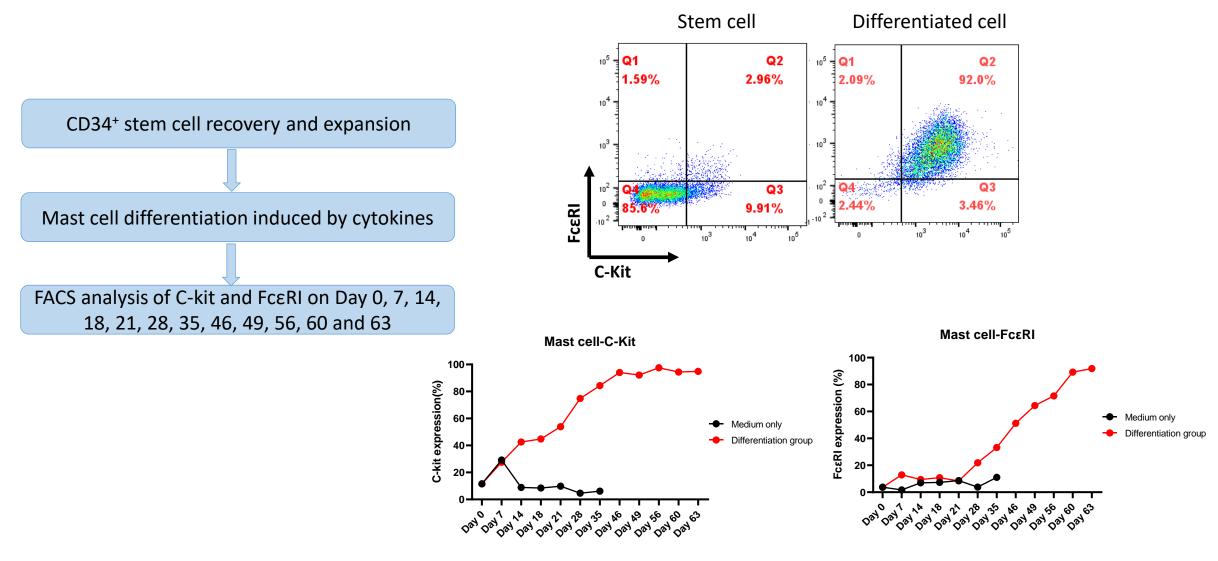




Mast cell differentiation



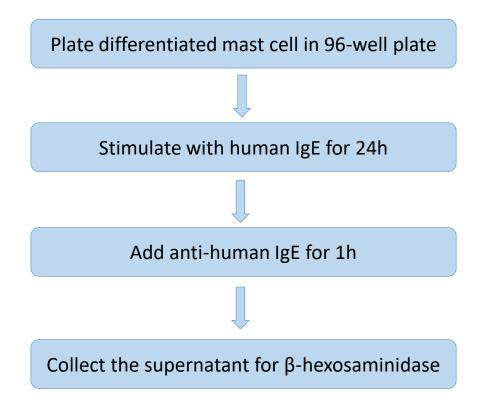
FACS validation and summary of Mast cell_C-kit and FceRI

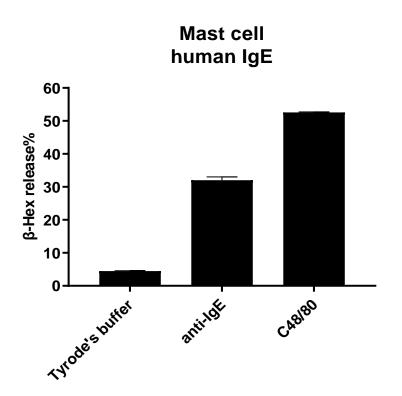


Mast cell differentiation



Mast cell degranulation assay by β -hexosaminidase release

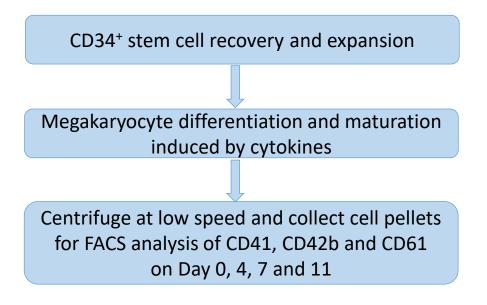


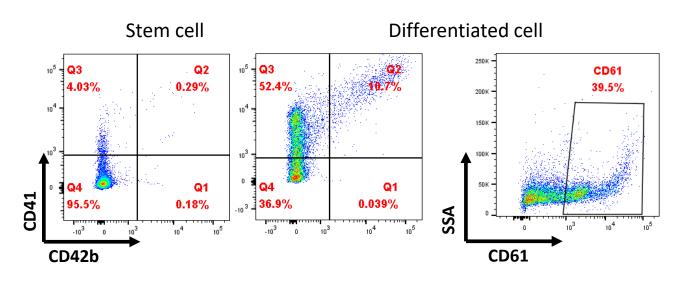


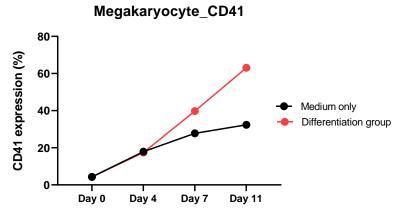
Megakaryocyte and Platelet differentiation

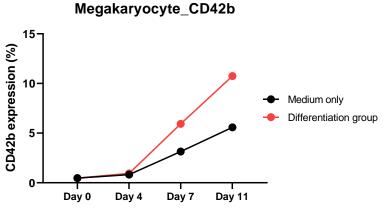


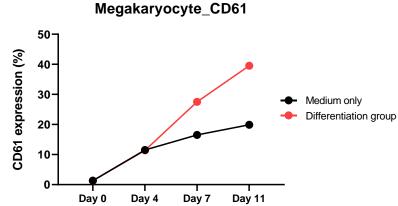
FACS validation and summary of Megakaryocyte_CD41, CD42b and CD61









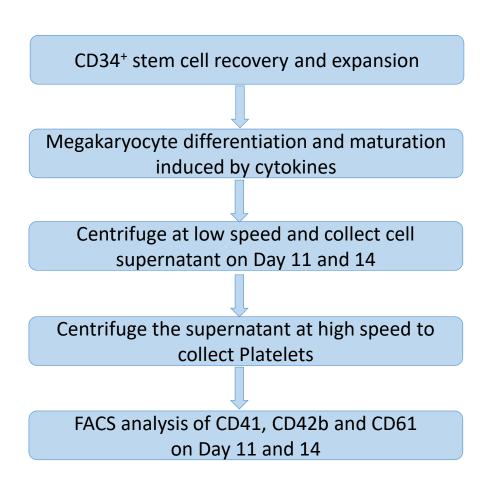


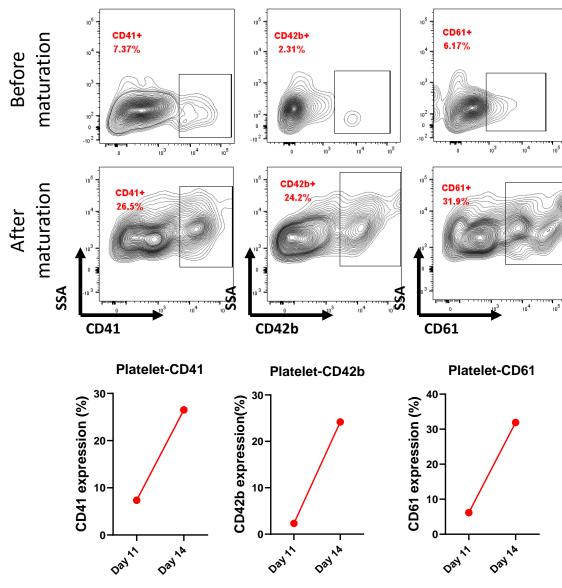
Megakaryocyte and Platelet differentiation



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FACS validation and summary of Platelet_CD41, CD42b and CD61

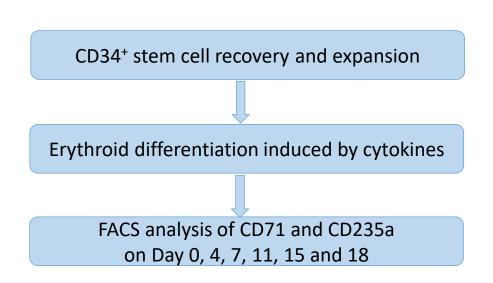


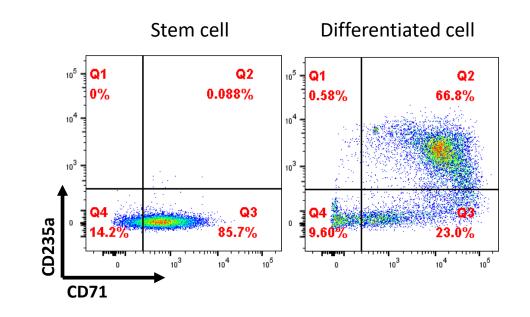


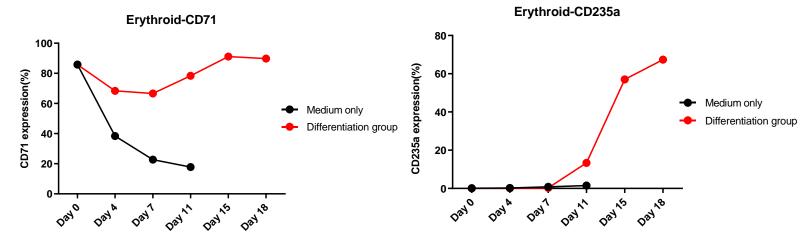
Erythroid differentiation



FACS validation and summary of Erythroid_CD71 and CD235a









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