Development of Organotypic Air-Liquid Interface Cultures as Models for Smoking-Related Lung Disease Endpoints

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Introduction

In vitro models that replicate the structural integrity and functional responses of the lung inform of the toxicological and biological effects of inhaled toxicants and mechanisms of multidimensional diseases such as lung cancer and COPD. Such mechanistic models are critical for the development of novel alternative methods to replace animal testing for regulatory purposes. Here, we describe an application of a novel organotypic air-liquid interface (ALI) cellular model of lung airway cells for the evaluation of perturbed lung physiology and the potential risk of lung diseases from the usage of tobacco products [1-5].

Methods

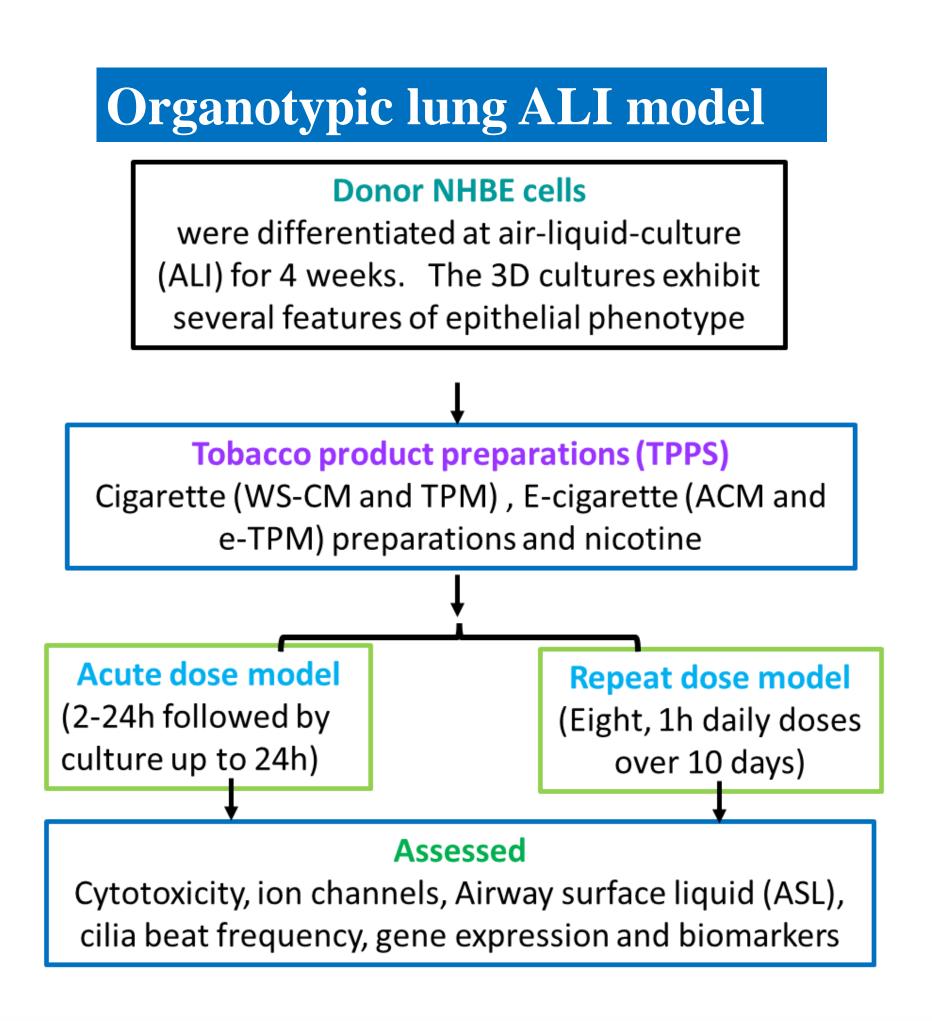
Cell Culture: Primary normal human bronchial epithelial (NHBE) cells (without identifiers; exempt status from the Institutional Review Board) were provided by Nationwide Children's Hospital Epithelial Cell Core (Columbus, OH). Passage 1 primary NHBE cells were seeded on collagen type IV coated Transwell and grown at the air-liquid interface (ALI). These differentiated cultures display pseudostratified epithelium of basal, ciliated, and goblet cells and phenotypic endpoints of ion channel function (CFTR protein and ENAC), which are key for the fluid homeostasis of ion and fluid balance, and mucociliary clearance. Thus, the ALI cultures replicate select structural and functional features of the human lung [1].

Tobacco Product Preparations (TPPs): Whole-smoke conditioned media (WS-CM) and total particulate matter (TPM) from 3R4F cigarettes were prepared by bubbling mainstream smoke through RPMI 1640 media and stored at -80°C. ENDS preparations (Aerosol Conditioned Media (ACM) and TPM from ENDS (e-TPM)) were prepared by bubbling aerosol generated from commercially available e-liquid into RPMI 1640 medium. The final nicotine content of the WS-CM, TPM, and ACM was used to normalize exposure of cells and is expressed as µg/mL Equi-Nicotine (Eq-Nic.) units.

Exposure Design: Two different exposure conditions (acute and repeated dose) were employed.

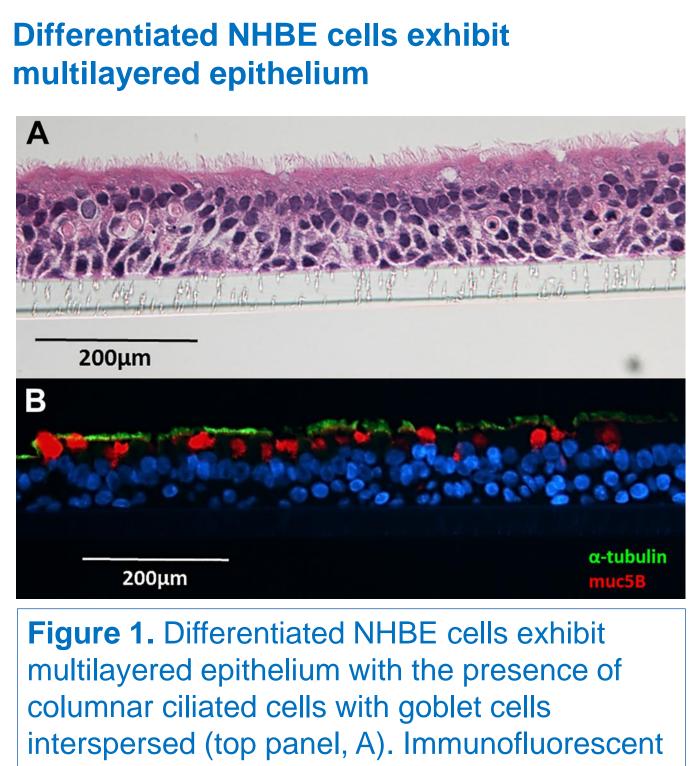
Acute dose: Differentiated cultures were treated with different TPPs for 2-24h [2].

Repeat Dose: Differentiated cultures were treated with TPPs for 1h /day, eight times over 10 days [3].

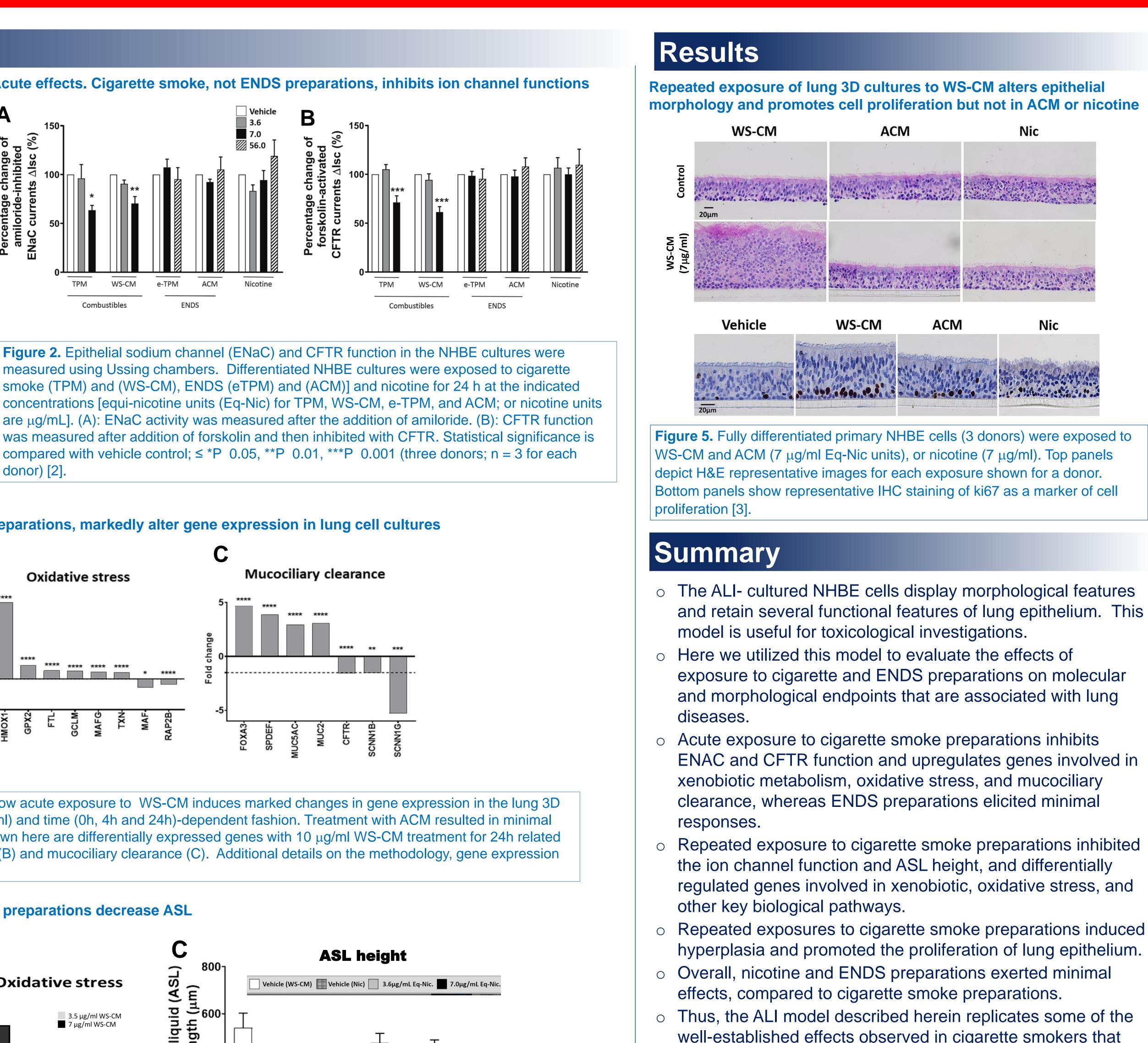


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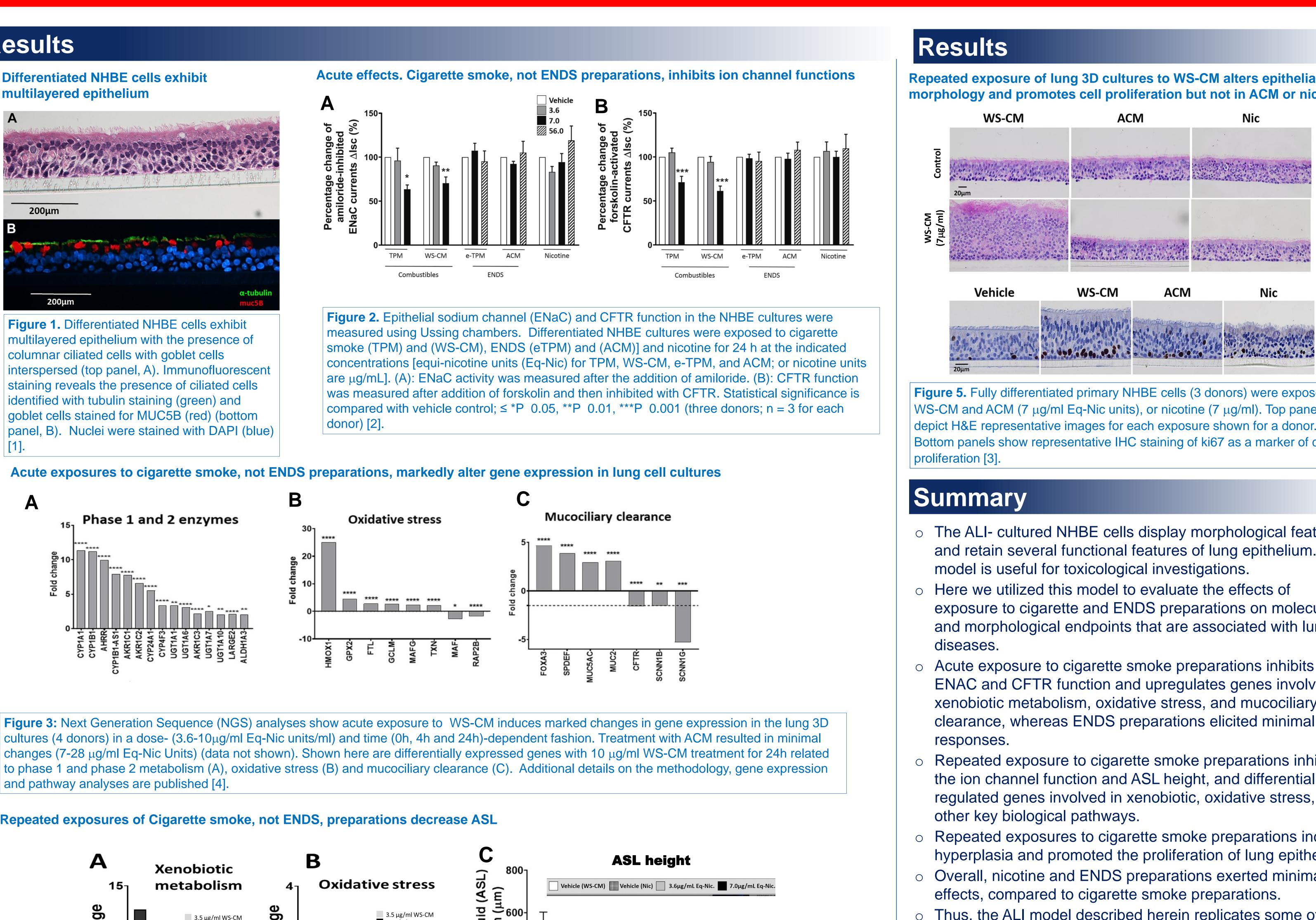
Results



staining reveals the presence of ciliated cells identified with tubulin staining (green) and goblet cells stained for MUC5B (red) (bottom panel, B). Nuclei were stained with DAPI (blue)



Nic



and pathway analyses are published [4].

Repeated exposures of Cigarette smoke, not ENDS, preparations decrease ASL

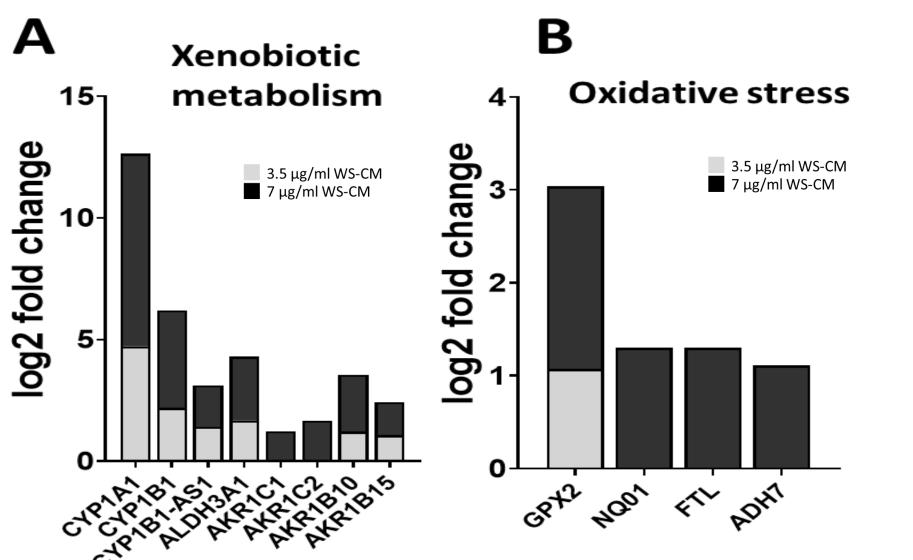


Figure 4: Treatment of differentiated ALI cultures with WS-CM and ACM for 10 days induced several molecular, morphological, and functional changes, but not cytotoxicity (data from 3 donors). Repeated exposures of WS-CM (3.5 µg/ml, gray bars and 7 µg/ml; black bars) sustain upregulation of genes to xenobiotic metabolism (A) and oxidative stress (B). Further, WS-CM, not ACM, exposure for 10 days decreased ASL height (C). Additional effects of WS-CM and ACM on ion channel function, NGS gene expression, and pathway analyses are published [3,5].

400

a 200 '

WS-CM

ACM

• Thus, the ALI model described herein replicates some of the well-established effects observed in cigarette smokers that are relevant to lung disease.

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