

Knowledge in Motion
SCI Education Series

Neuroregenerative Properties of Dental Pulp Stem Cells and their Future Potential to Improve Neurological Outcomes in SCI

Ricardo Battaglino, PhD
Alpdogan Kantarci, DDS, PhD
Hatice Hasturk, DDS, PhD
Leslie Morse, DO



Department of Physical Medicine & Rehabilitation
Harvard Medical School



SPaulding-HARVARD
SCI MODEL SYSTEM
SERVING THE NEW ENGLAND REGION

Spaulding Rehabilitation Hospital
Massachusetts General Hospital
Brigham & Women's Hospital



Funding

- The Ellen R. and Melvin J. Gordon Center for the Cure and Treatment of Paralysis
- Department of Education, NIDRR [H133N110010]

http://stemcells.nih.gov/info/pages/faqs.aspx

NIH National Institutes of Health
Turning Discovery Into Health

Info Center Research Topics Federal Policy Announcements

Home Info Center FAQs

STEM CELL INFORMATION

Frequently Asked Questions (FAQs)

Frequently Asked Questions

- What are stem cells?
- Can they cure diseases?
- Are there ethical issues?
- What is the U.S. policy?
- More FAQs
- Links to related resources
- Stem Cell Research
- Center for Regenerative Medicine
- NIH Stem Cell Unit
- Current Research
- Upcoming Events
- Funding for Research
- Training Programs
- Scientific Literature
- Tools
- Site Map
- Glossary

Basic Questions

1. What are stem cells?
2. What classes of stem cells are there?
3. Where do stem cells come from?
4. Why do scientists want to use stem cell lines?

Healthcare Questions

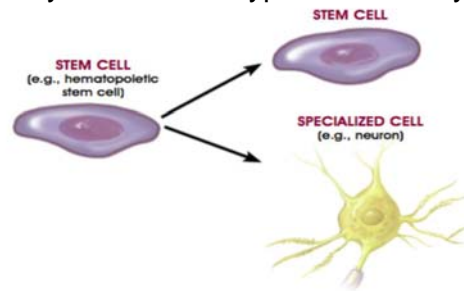
1. Why are doctors and scientists so excited about human embryonic stem cells?
2. Have human embryonic stem cells been used successfully to treat any human diseases yet?
3. What will be the best type of stem cell to use for therapy?
4. I have Parkinson's Disease. Is there a clinical trial that I can participate in that uses stem cell as therapy?
5. Where can I donate umbilical cord stem cells?

Objective 1

- Learn about the source of dental pulp stem cells and how they are obtained

What are Stem Cells?

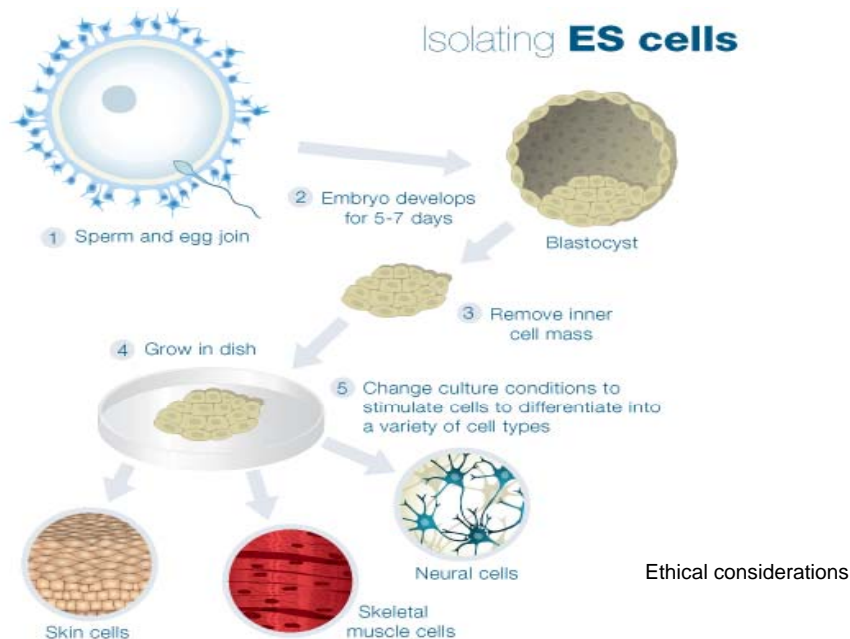
- **Rare** cells with unique properties:
 - **Self-renewal:** divide many times without developing into another cell type
 - **Potency:** develop into some or many different cell types in the body (neuron, muscle, fat)



- **Repair system of the body**
 - Divide to replenish other cells lost because of disease or illness

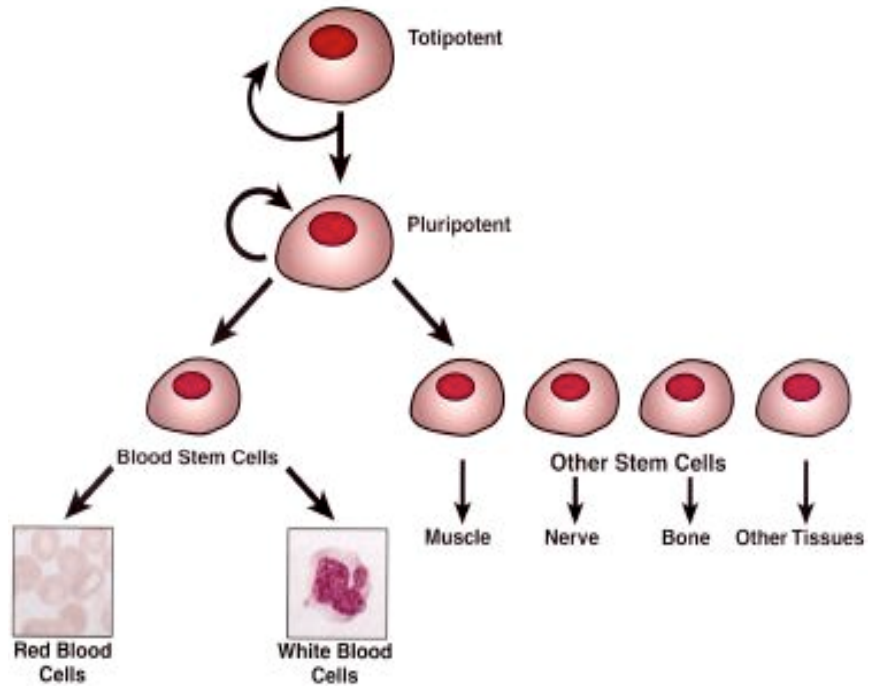
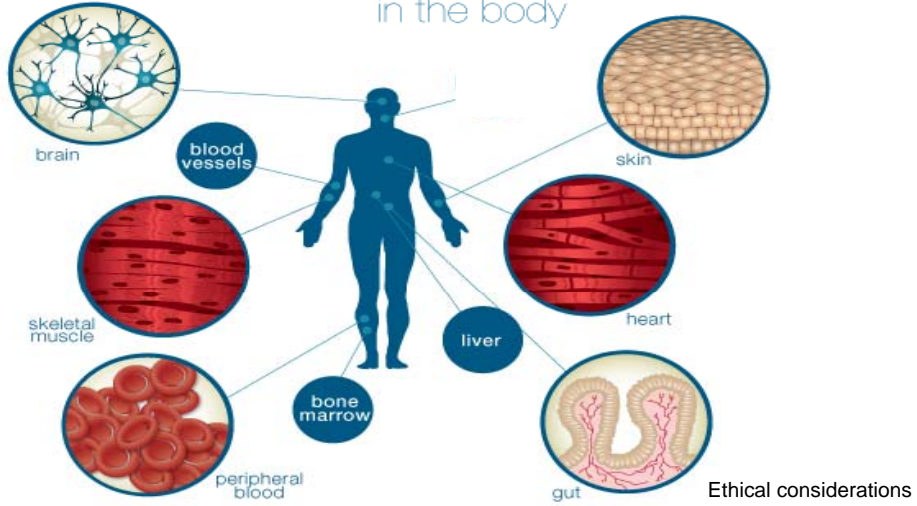
<http://stemcells.nih.gov/info/pages/faqs.aspx>

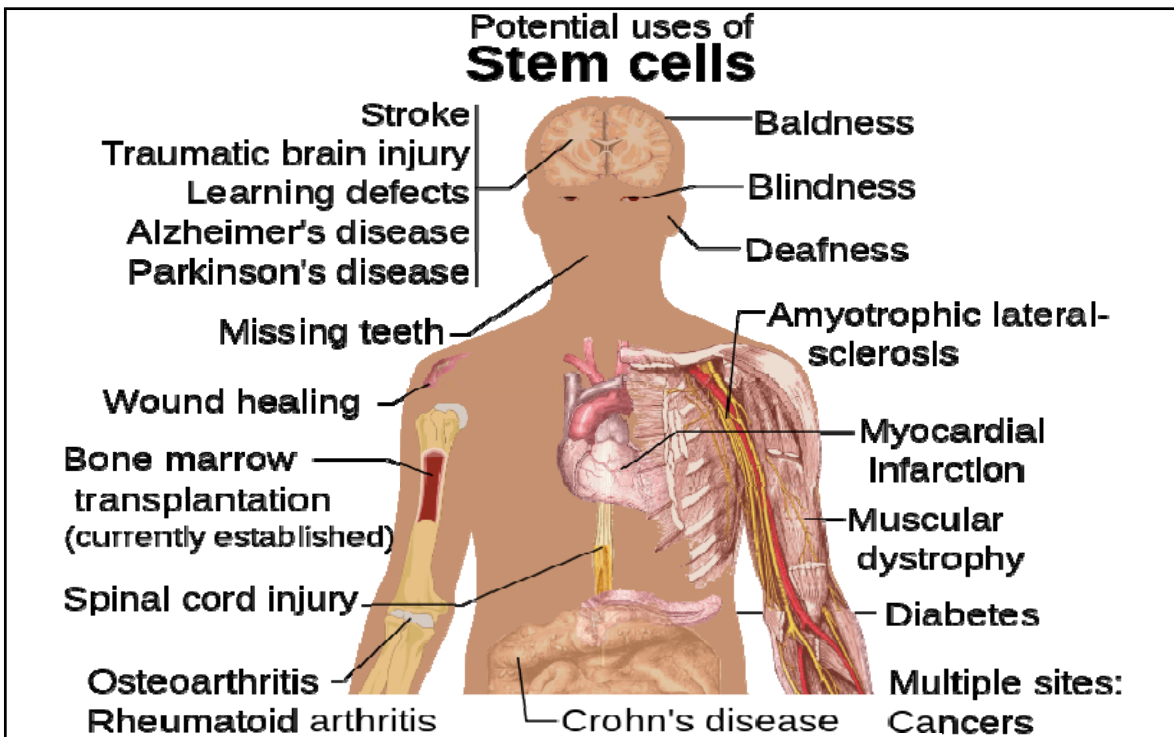
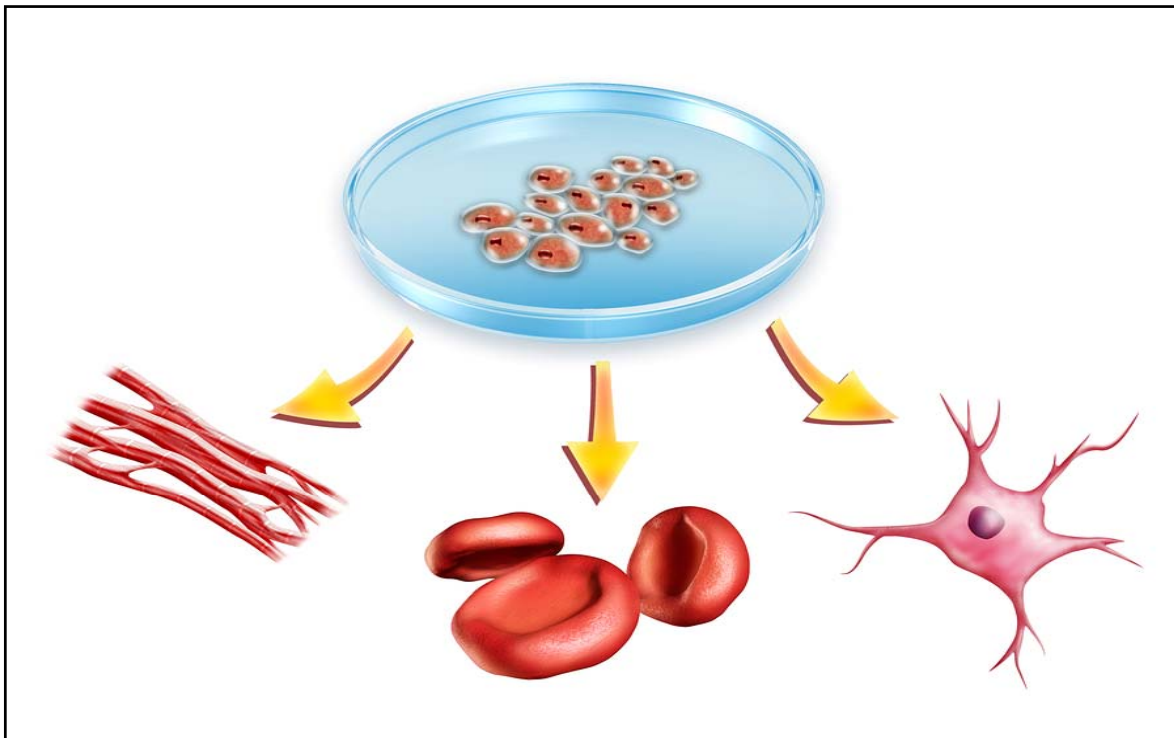
Embryonic stem cells (found in early embryos)



Adult stem cells (found in various tissues)

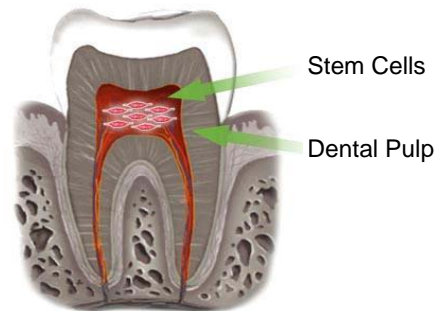
Locations of **Somatic Stem Cells** in the body





Dental Pulp Stem Cells

- First described in 2000 by Dr. Song Tao Shi*
- harvested from teeth
- Abundance: 20-30 million cells per tooth
- Less invasive to obtain than bone marrow stem cells



Shi, S. and Gronthos, S. (2003), Perivascular Niche of Postnatal Mesenchymal Stem Cells in Human Bone Marrow and Dental Pulp. *J Bone Miner Res*, 18: 696–704. doi: 10.1359/jbmr.2003.18.4.696

The use of dental pulp stem cells avoids the ethical issues associated with embryonic stem cells because wisdom teeth are destined to be thrown away and avoids the pain of bone marrow harvest

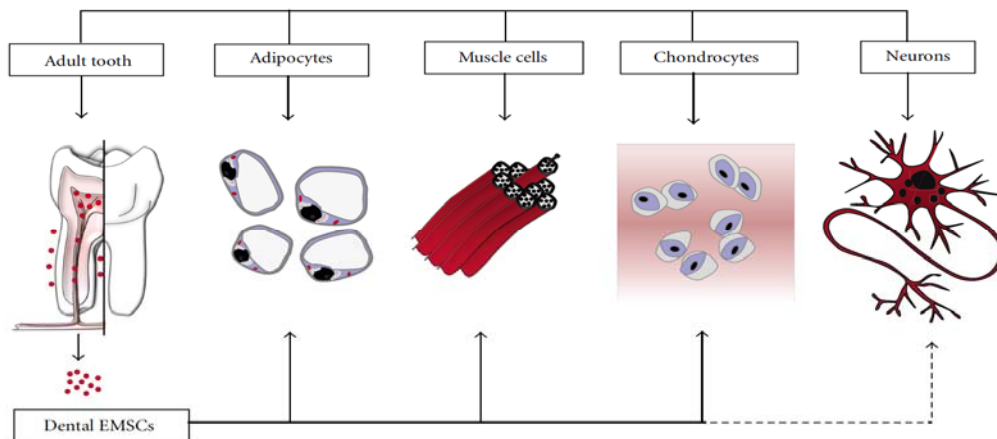


Neural Crest Stem Cells



Neural Crest Stem Cells from Dental Tissues: A New Hope for Dental and Neural Regeneration
Stem Cells Int. 2012;2012:103503. Epub 2012 Oct 4.

Neural crest stem cells give rise to the majority of the tissues in the skull and face



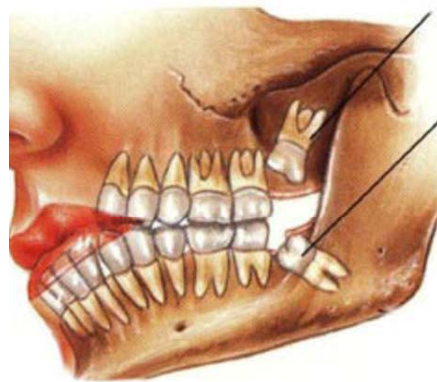
Neural Crest Stem Cells from Dental Tissues: A New Hope for Dental and Neural Regeneration. *Stem Cells Int.* 2012;2012:103503.

Objective 2

- Learn how dental pulp stem cells can develop into elements of the nervous system and how they have been used in rodents with spinal cord injury

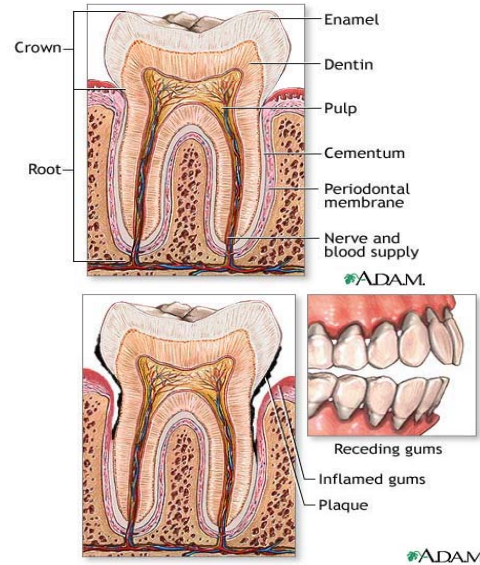
Dental Stem Cells

- **Adult Teeth**
 - Best sources:
 - Impacted third molars (wisdom teeth)
 - Erupted third molars without infection or decay
 - Teeth extracted for orthodontic reasons
 - ***Any health tooth is a source***
- **Developing Teeth**
 - Stem Cells from Human Exfoliated Teeth (SHED)
 - very high proliferative capacity
- **Cell types**
 - ***Dental Pulp Stem Cells (DPSC)***
 - Dental Pulp Pluripotent Stem Cells (DPPSC)
 - Periodontal Ligament Stem Cells (PDLSC)



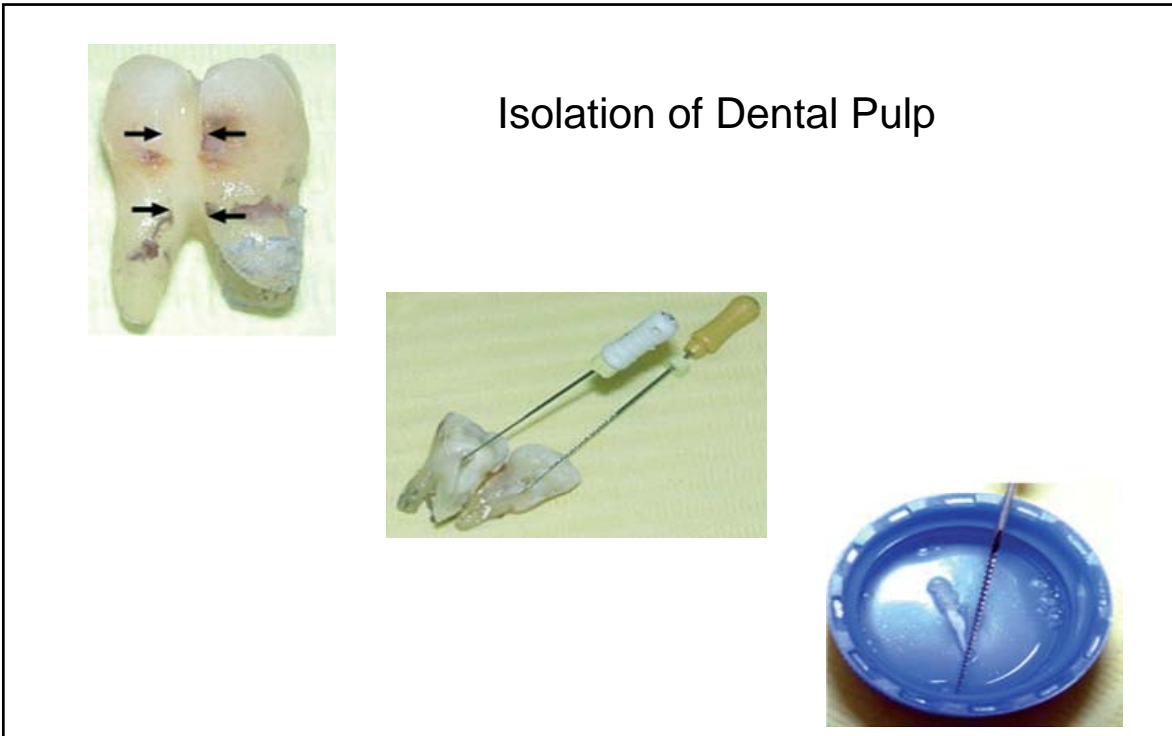
Dental and Periodontal Stem Cells in Regenerative Dentistry

- Dental tissue bioengineering to replace missing teeth and to regenerate the lost supporting tissues around the teeth (periodontium) including the alveolar bone due to periodontal disease



Dental Stem Cells and Neural Regeneration

- Generation of large pools of neural cells for cell therapy
- Share many properties of neural crest stem cells (NCSCs)
- Critical issues:
 - have higher proliferation rates and can be expanded in few weeks
 - No long-term immune rejection after transplantation



Dental Pulp Stem Cells and Dental Pulp can be cryopreserved

- dental pulp and the dental pulp stem cells retain their stem cell characteristics after freezing, thawing, and growing in culture



Why doesn't the injured cord repair itself?

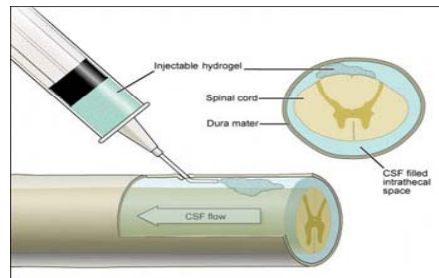
- inhibition of axonal growth
 - myelin-associated proteins
 - extracellular matrix molecules around injury site
- absence of growth factors after injury

He and Koprivica, 2004; Buchli and Schwab, 2005; Fawcett, 2006; Fitch and Silver, 2008, Tuszynski and Lu, 2008

Goals for promoting functional recovery

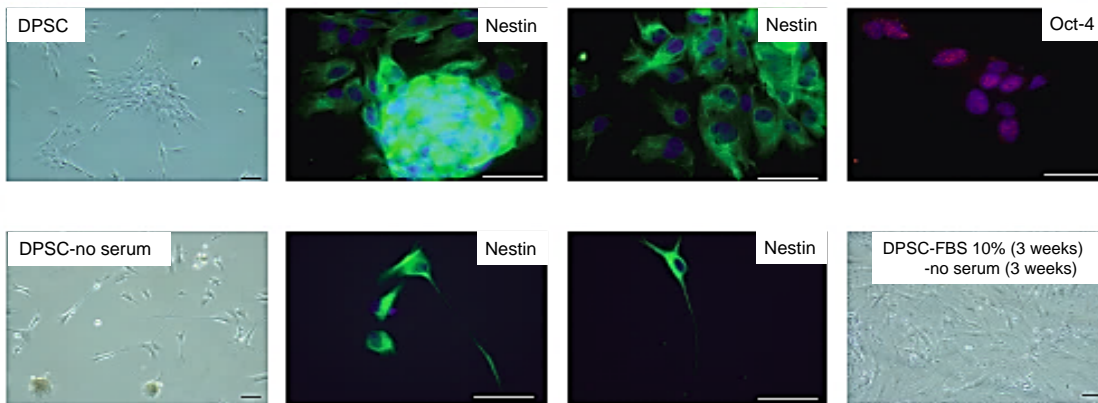
- Regain the ability to send and receive signals across the injured cord

Therapeutic uses for *In vivo* neuro-regeneration in animal models



Neural Differentiation Capacity and Pluripotency of Dental Pulp Stem Cells

- Strong expression of neural and glial cell markers even in basal conditions with no manipulation
- Cultured dental MSCs show neuron-like electrical activity
- Exogenous cells can integrate and survive in the host neural tissue and adopt specific phenotypes according to the location in nervous system
- Promote *de novo* neurogenesis



Neural Crest Stem Cells from Dental Tissues: A New Hope for Dental and Neural Regeneration. *Stem Cells Int.* 2012;2012:103503.



NIH Public Access

Author Manuscript

Cell. Author manuscript; available in PMC 2013 September 14.

Published in final edited form as:

Cell. 2012 September 14; 150(6): 1264–1273. doi:10.1016/j.cell.2012.08.020.

Long-Distance Growth and Connectivity of Neural Stem Cells After Severe Spinal Cord Injury

Paul Lu^{1,2,*}, Yaozhi Wang¹, Lori Graham¹, Karla McHale¹, Mingyong Gao¹, Di Wu¹, John Brock¹, Armin Blesch¹, Ephron S. Rosenzweig¹, Leif A. Havton³, Binhai Zheng¹, James M. Conner¹, Martin Marsala⁴, and Mark H. Tuszynski^{1,2,*}

¹Dept. of Neurosciences, University of California - San Diego, La Jolla, CA 92093, USA

²Veterans Administration Medical Center, San Diego, CA 92161, USA

³Dept. of Neurology, University of California, Los Angeles, CA 90095, USA

⁴Dept. of Anesthesiology, University of California, - San Diego, CA 92093, USA

NIH-PA Author Manuscript

Adult rats with T3 SCI injected with neural stem cells 2 weeks after injury. Stem cells were co-grafted in a fibrin matrix with a growth factor cocktail.

Stem cell sources:

embryonic rat spinal cord, human embryonic cells, or human fetal cells

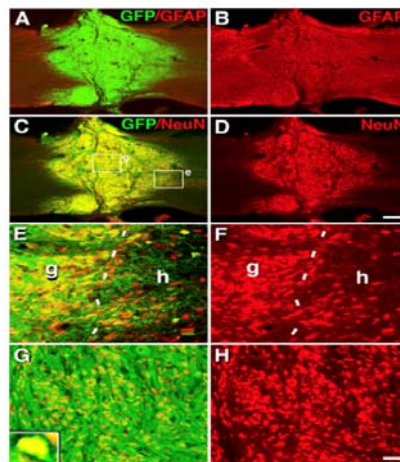
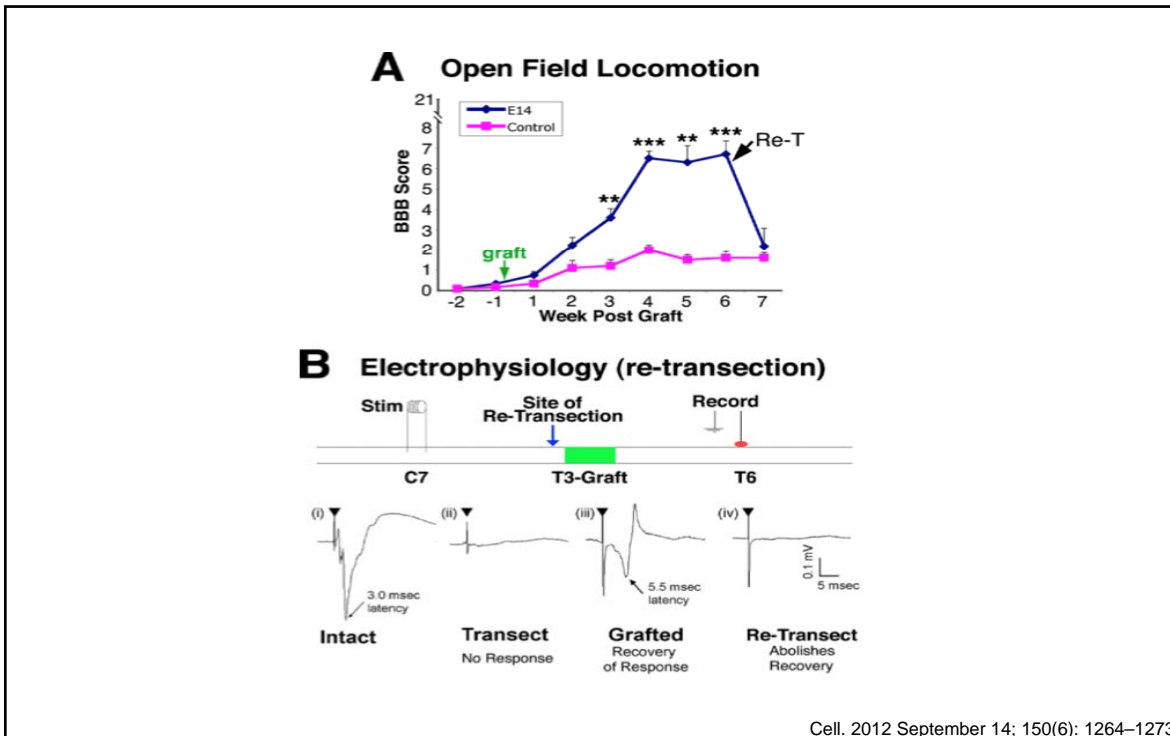


Figure 1. Survival, Filling and Differentiation of Neural Stem Cell Grafts in T3 Complete Transection Site

(A–B) Overview of GFP and GFAP fluorescent immunolabeling in a horizontal section demonstrates excellent graft survival, integration and filling of T3 complete transection site, seven weeks post-grafting. (C–D) GFP and NeuN labeling confirm extensive neuronal differentiation/maturation of grafted rat neural stem cells. (E–F) Higher magnification from c showing excellent integration and transition from host (h) neurons to grafted (g) neurons (dashed lines) (E: GFP, NeuN; F, NeuN alone). (G–H) Higher magnification from center of graft showing high density of NeuN-labeled neurons (inset) (G: GFP, NeuN; H, NeuN alone). Scale bar: A–D, 320 μ m; E–H, 48 μ m. Also see Figure S1 and S2.

Cell. 2012 September 14; 150(6): 1264–1273



Findings

- Early stage neurons from different sources and species are able to survive, integrate, and extend axons over very long distances and form functional relays in the adults injured cord

Research article



Human dental pulp-derived stem cells promote locomotor recovery after complete transection of the rat spinal cord by multiple neuro-regenerative mechanisms

Kiyoshi Sakai,¹ Akihito Yamamoto,¹ Kohki Matsubara,¹ Shoko Nakamura,¹ Mami Naruse,¹ Mari Yamagata,¹ Kazuma Sakamoto,² Ryoji Tauchi,³ Norimitsu Wakao,³ Shiro Imagama,³ Hideharu Hibi,¹ Kenji Kadomatsu,² Naoki Ishiguro,³ and Minoru Ueda¹

¹Department of Oral and Maxillofacial Surgery, ²Department of Biochemistry, and ³Department of Orthopedic Surgery, Nagoya University Graduate School of Medicine, Nagoya, Japan.

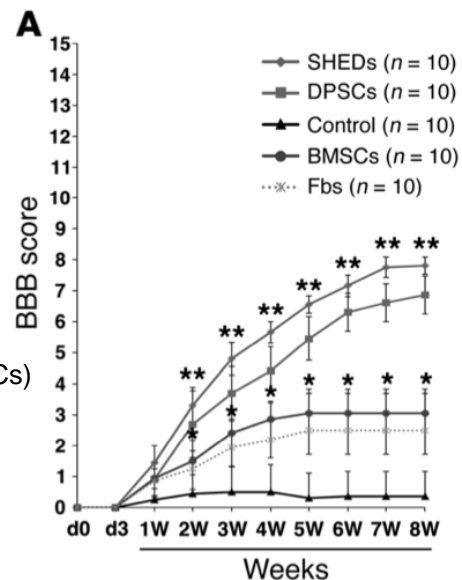
Spinal cord injury (SCI) often leads to persistent functional deficits due to loss of neurons and glia and to limited axonal regeneration after injury. Here we report that transplantation of human dental pulp stem cells into the completely transected adult rat spinal cord resulted in marked recovery of hind limb locomotor functions. Transplantation of human bone marrow stromal cells or skin-derived fibroblasts led to substantially less recovery of locomotor function. The human dental pulp stem cells exhibited three major neuroregenerative activities. First, they inhibited the SCI-induced apoptosis of neurons, astrocytes, and oligodendrocytes, which improved the preservation of neuronal filaments and myelin sheaths. Second, they promoted the regeneration of transected axons by directly inhibiting multiple axon growth inhibitors, including chondroitin sulfate proteoglycan and myelin-associated glycoprotein, via paracrine mechanisms. Last, they replaced lost cells by differentiating into mature oligodendrocytes under the extreme conditions of SCI. Our data demonstrate that tooth-derived stem cells may provide therapeutic benefits for treating SCI through both cell-autonomous and paracrine neuroregenerative activities.

Sakai, *et al. J Clin Invest.* 2012;122(1):80–90.

Adult female rats with T10 SCI injected with neural stem cells at the time of injury.

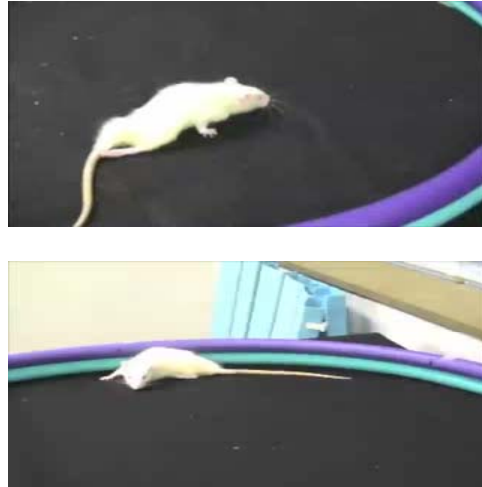
Stem cell sources:

- human deciduous teeth SHEDS
- human dental pulp stem cells
- human bone marrow stem cell line (BMSCs)



Sakai, *et al. J Clin Invest.* 2012;122(1):80–90.

In vivo neuro-regeneration



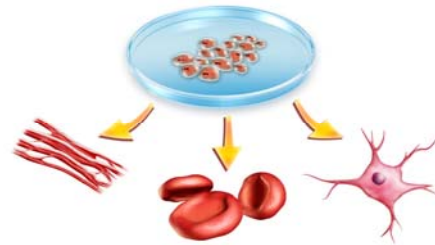
Sakai, *et al. J Clin Invest.* 2012;122(1):80–90.

Objective 3

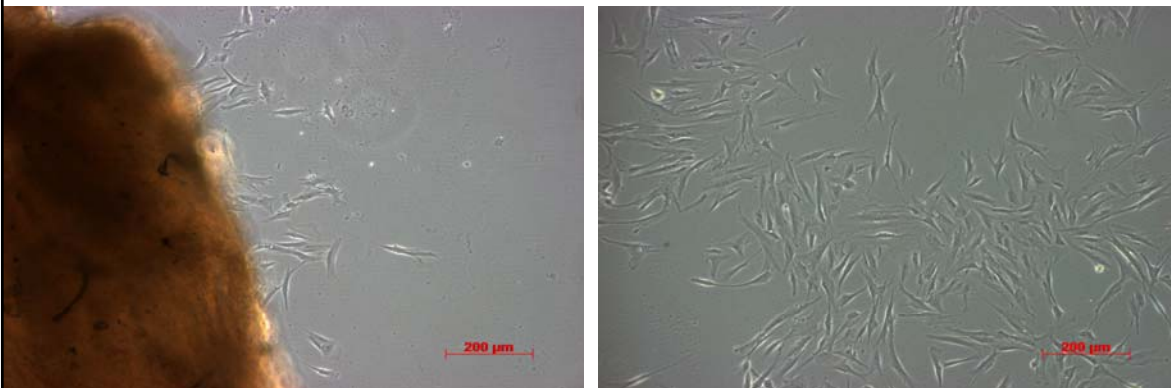
- To learn how dental pulp stem cells might be used to promote neuro-recovery for people with spinal cord injury

Ongoing Work

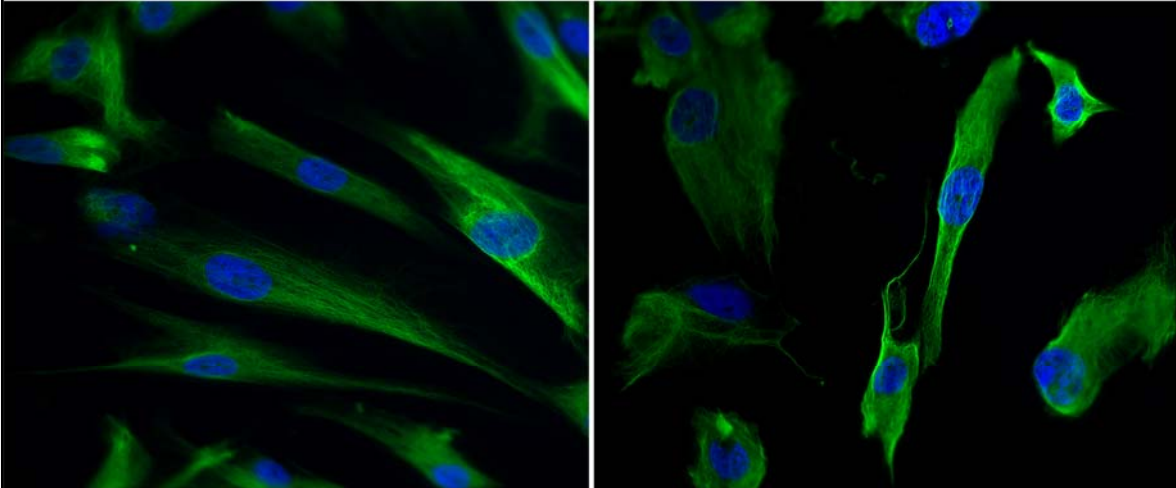
- Demonstrating stem cell characteristics:
 - Self renewal
 - Multipotency
 - Ability to promote *in vivo* regeneration



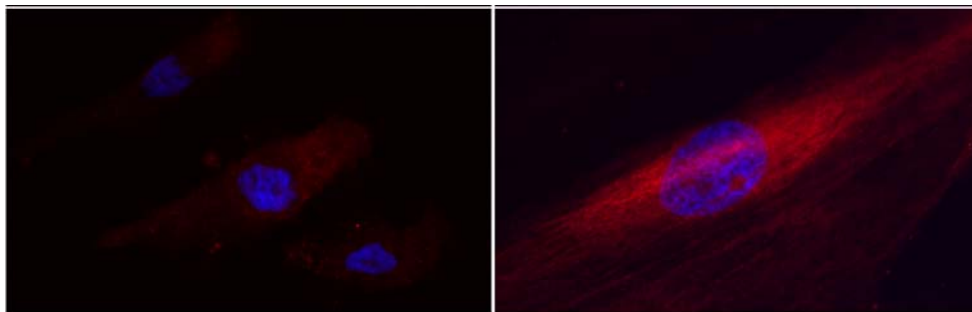
Ongoing Work



Ongoing Work



Ongoing Work



-

+

Neural cell differentiation

Tubulin III

