Cell and Tissue-based Therapies for Hearing Loss



Anne L. van de Ven 19 Nov 2003

BioE 492/592 • Sensory Neuroengineering • Lecture 16



Each requires different strategies for treatment

#### **Tissue Engineering**

Repair or replacement of tissue function with biological materials

generated in labs

#### **Tissue Engineering**



### Tissue Engineering of the Ear

- Cochlear regeneration
- Outer ear reconstruction
- Tympanic membrane repair
- Middle ear ossiculoplasty



#### Tissue Engineering in the Cochlea

Aimed at regenerating/replacing damaged hair cells

Potential cell sources:

- Embryonic stem (ES) or progenitor cells
- Adult inner ear stem cells
- Trans-differentiation of non-hair cells







Generation of hair cells by stepwise differentiation of embryonic stem cells



Li H, Roblin G, Liu H, Heller S.

#### **Creating Auditory Progenitor Cells**







#### Hair cell markers are co-expressed.





## Progenitor cells are grafted into chick embryos...



Stage 17

## Grafting promotes hair cell differentiation in the cochlea.





#### Implications

- 1. ES cells have the potential to differentiate into hair cells
- 2. Auditory progenitor cells can be successfully created *in vitro*
- 3. Can this work in the adult cochlea?

#### Adult Stem Cells in the Inner Ear

Utricle stem cells...

- Are highly proliferative
- Can self-renew in vitro
- Are pluripotent in vivo
- Can make hair cells in vivo



Myosin IIVA+ / Espin+ hair cells



Espin+ / f-actin+ stereocilia

#### Trans-differentiation in the Inner Ear

- Transcription factor *Math1* is required for hair cell differentiation
- In vivo transfection of cochlear support cells with Math1 → trans-differentiation into hair cells
- These new hair cells attract growth of new auditory neurons!

#### **Outer Ear Reconstruction**

Performed since 1597 BC

Why repair: cosmetic reasons improved hearing

Indications for reconstruction:

- Trauma
- Cancer removal
- Congenital abnormalities (1 per 7000 births)



#### **Outer Ear Reconstruction**

Gold standard: autologous rib cartilage

→ "unsatisfactory cosmetic results"
→ complications at secondary site



Shaping rib cartilage



Before

After

#### **Tissue Engineering of Auricle**

Aimed at creating a pre-molded, autologous cartilage auricle

Advantages

- -Reduces/eliminates surgery at 2° site
- Provides more realistic auricle
- Less dependence on artistic skills of the prosthetist

#### **Key Challenges**

Obtaining sufficient cartilage cells

□ Creating appropriate anatomical shape

Controlling polymer degradation in vivo

Reducing immune reactivity

# A tissue-engineering model for the manufacture of auricular-shaped cartilage implants



#### Haisch A, Klaring S, Groger A, Gebert C, Sittinger M



#### **Key Challenges**

- Obtaining sufficient cells
  - Chondrocyte expansion in culture
- Creating appropriate shape
   Pre-molding of PGLA scaffold
- Controlling polymer degradation
   Co-polymer (PGLA and fibrin)
- Reducing immune reactivity
  - Use of autologous cells



#### Results after 12 wks implantation...

- Smooth, whitish cartilage-like morphology
- Some collagen & proteoglycan present
- Encapsulated in fibrous tissue





6 weeks

12 weeks

#### **Customized Ear Reconstruction?**

 CT/MRI scans can be combined with rapid prototyping techniques to create custom reconstructions

• Research reduced to the university level

#### References

Li H,Roblin G, Liu H, Heller S. Generation of hair cells by stepwise differentiation of embryonic stem cells. *PNAS* 2003; 100:13495-13500

Li H, Liu H, Heller S. Pluripotent stem cells from the adult mouse inner ear. *Nature Medicine* 2003; 9(10):1293 - 1299

Kawamoto K, Ishimoto S, Minoda R, Brough DE, Raphael Y. Math1 gene transfer generates new cochlear hair cells in mature guinea pigs in vivo. *Journal Neuroscience* 2003; 23(11):4395-4400

Haisch A, Klaring S, Groger A, Gebert C, Sittinger M. A tissue-engineering model for the manufacture of auricular-shaped cartilage implants. *Eur Arch Otorhinolaryngol.* 2002; 259(6):316-321