

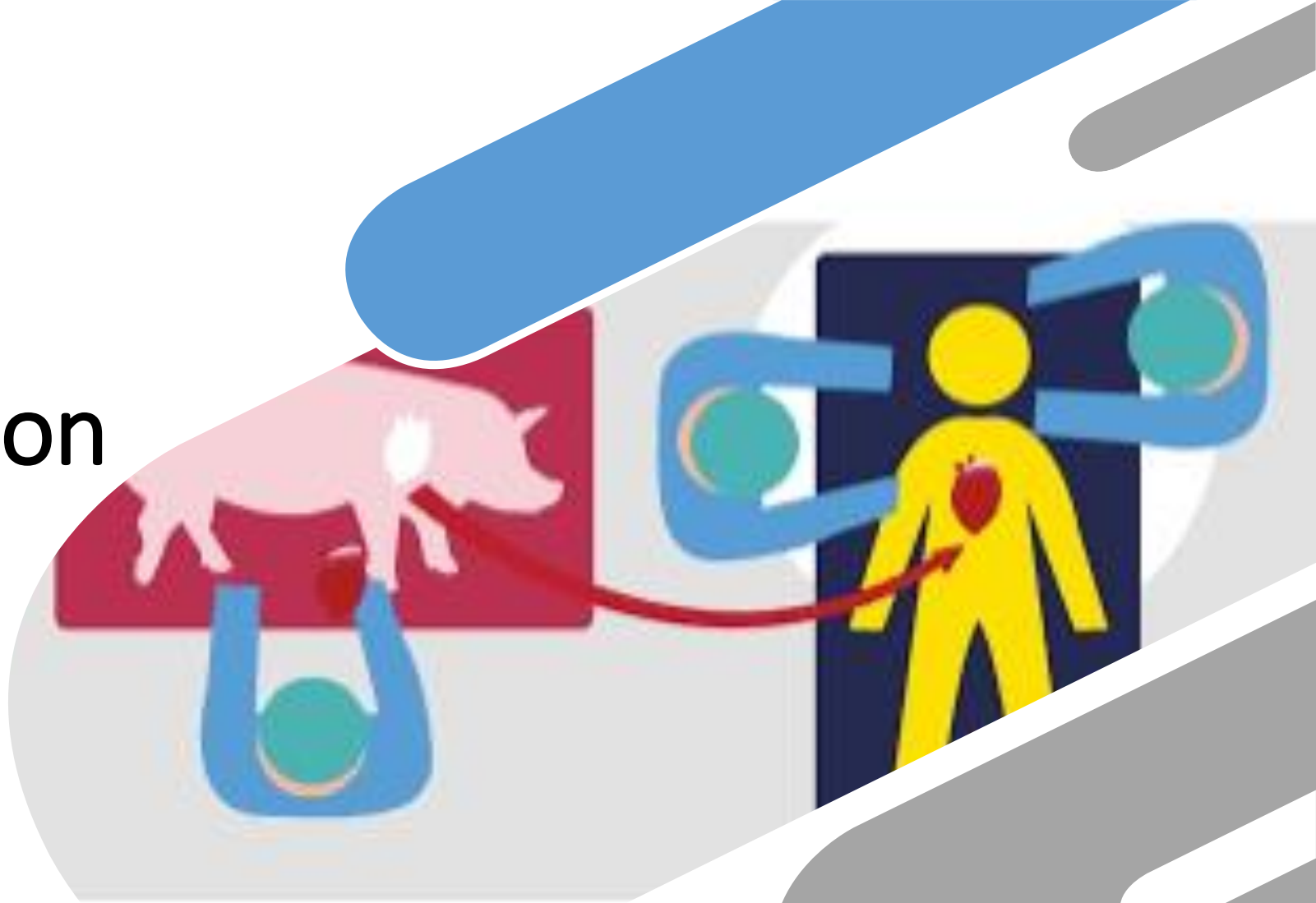


دانشگاه علوم پزشکی و خدمات بهداشتی درمانی
استان لرستان

Xenotransplantation


Provider: Maryam akbary

Spring 1403



Outline



- **Mechanism of xenograft rejection**
 - **Immune system**
 - **Immuno suppressants in xenotransplantation area**
 - **Organ-specific barriers and challenges**
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Introduction

- Transplantation is often the **last resort** for **end-stage organ** failures.
- The **shortage of donor organs** is the main limiting factor for successful transplantation in humans.
- The WHO estimates that only **10%** of the worldwide **need for organ** transplantation is being met.
- Therefore except living donations, other alternatives are needed, e.g., **xenotransplantation of pig organs**.

xenotransplantation

- Since **2009**, **porcine models** with new genetic modifications have been constantly implemented to improve molecular compatibilities.
- As gene editing techniques such as **zinc finger nucleases**, **TALEN**, and **CRIPSR/Cas9** genome editing system improve, the production of multiple-gene edited pigs has become easier and faster.

Types of xenograft rejection

➤ **Three** different xenogeneic types of **rejections**, based on the responses and mechanisms involved. It includes :

1-**Hyperacute** rejection (HAR),

2-**Delayed** xenograft rejection (DXR)

3-**Chronic** rejection.

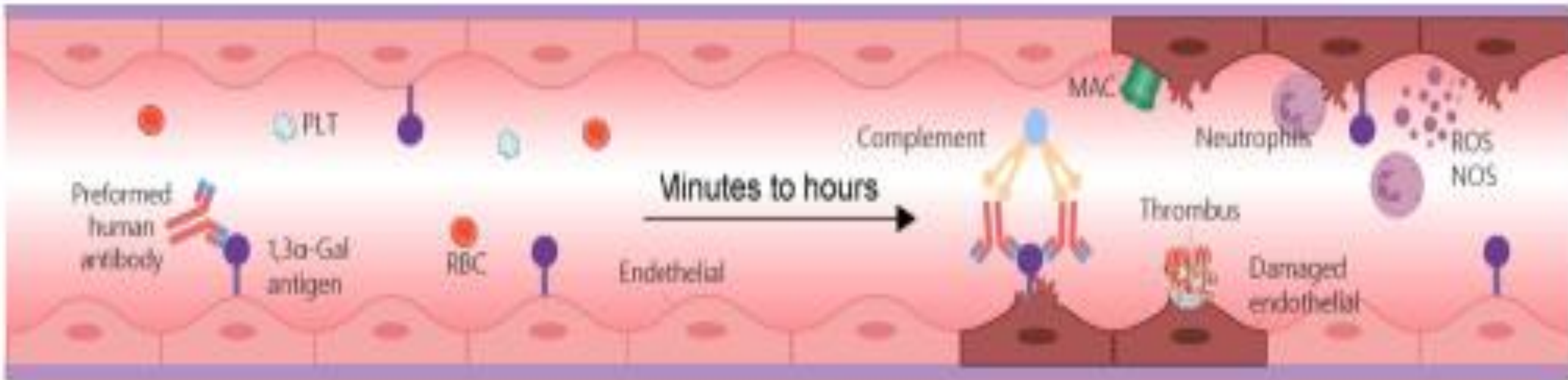
Hyperacute rejection

- HAR occurring within **24 hours** and lasts for **few minutes to hours**.
- It is caused by **pre-existing** antibodies against graft antigens .
- Among these antibodies, most frequent **IgMs** and **IgGs** recognize **galactose-a** (a-Gal) residues.
- Humans, Old World monkeys **lack a-Gal** epitopes because their a1,3GT gene is affected by a loss-of-function **mutation**.



Hyperacute rejection

- When a pig organ is transplanted into a human or a NHP, the **pre-existing anti-Gal antibodies** bind to a-Gal epitopes present on the graft's vascular endothelium, and **induce complement**.
- These reactions cause **endothelial cells lysis**, destruction of the vasculature, and ultimately, **graft rejection**.



Two ways to prevent HAR

1- **Knocking out the a-Gal gene** in pigs.

Reported : averted HAR in baboons receiving hearts from pigs and **increased** the pig heart survival by **2– 6 months**.

2-**Inhibiting complement** activation by inducing the expression of **hCD46**, **hCD55**, and **hCD59**, on pig cells.

Reported : was associated with a survival time of **7 to 9 days** while the wild-type (WT) liver graft did not extend over **3 days**.

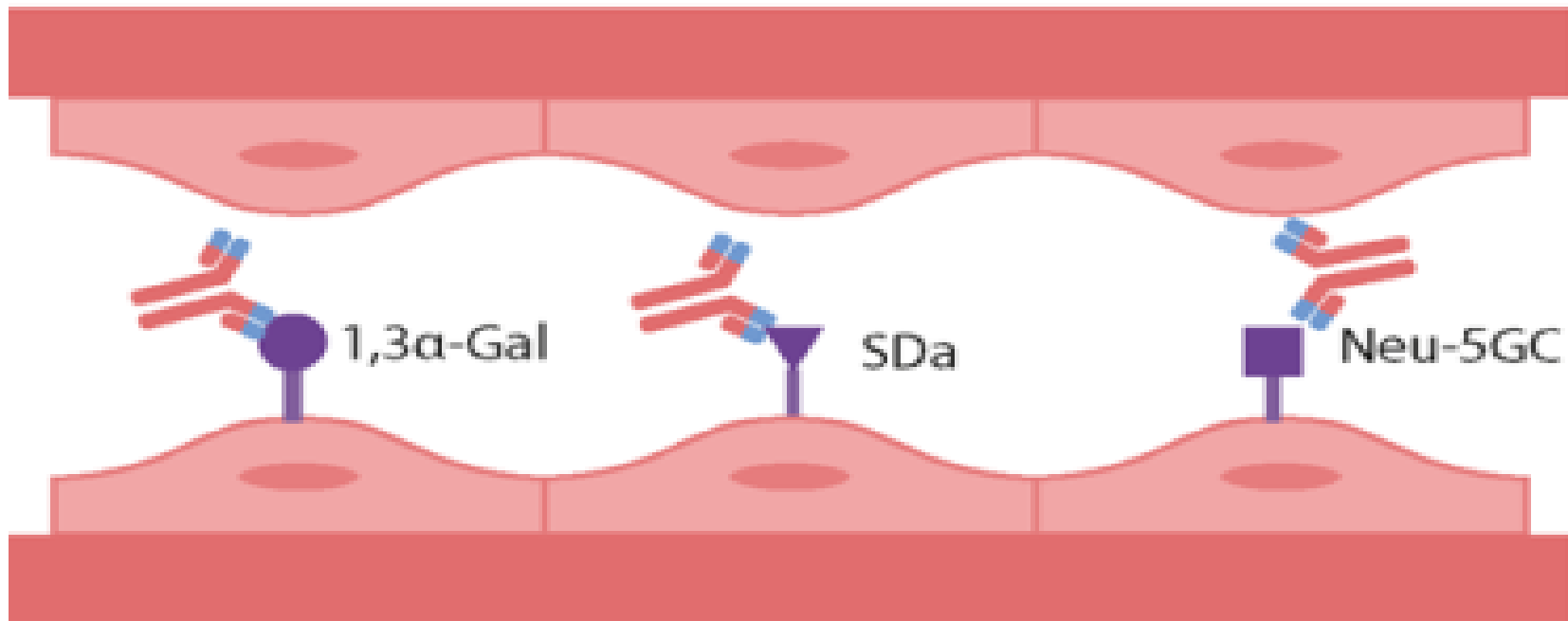
Delayed xenograft rejection

- Causes immunological destruction within **a few days to a few weeks**
 - Refers to **post-HAR** and is also called AHXR from a mechanistic prospect, or AVXR from a pathophysiological prospect.
- 1- **AHXR** or **AVXR** define xenograft injuries occurring **within the vasculature** and **involving antibodies**, while complements play a minor role during this type of rejection .
 - 2- **CXR**(cellular xenograft rejection) refer to antibody and complement-**in**dependent.



AHXR

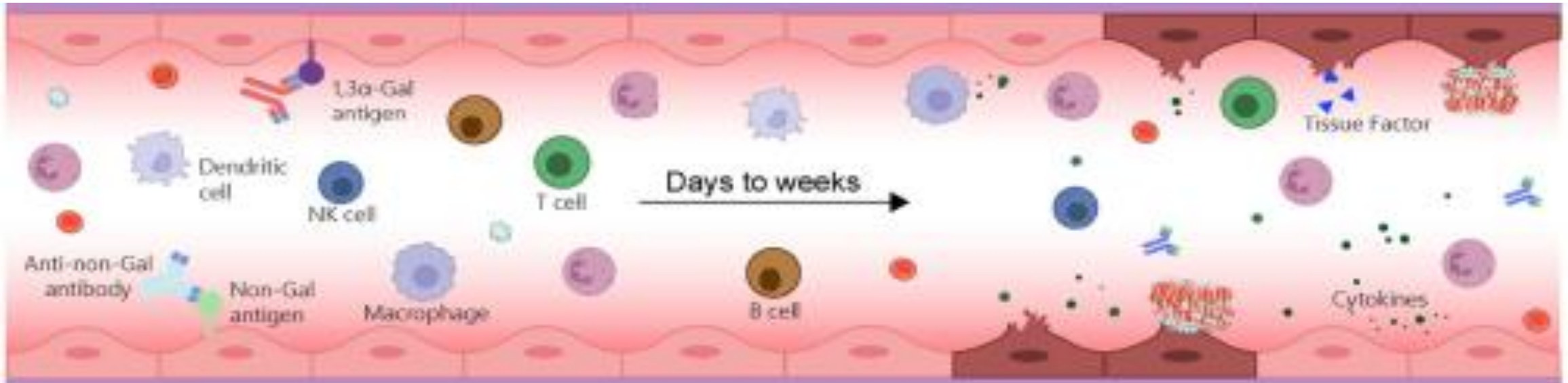
- **Gal-specific antibodies** were implicated in AHXR, **in addition to HAR.**
- Pre-existing antibodies against non-Gal epitopes, such as carbohydrate N-glycolyl neuraminic sialic acid (**Neu5Gc**), glycan **SDa** was also implicated in rejection.





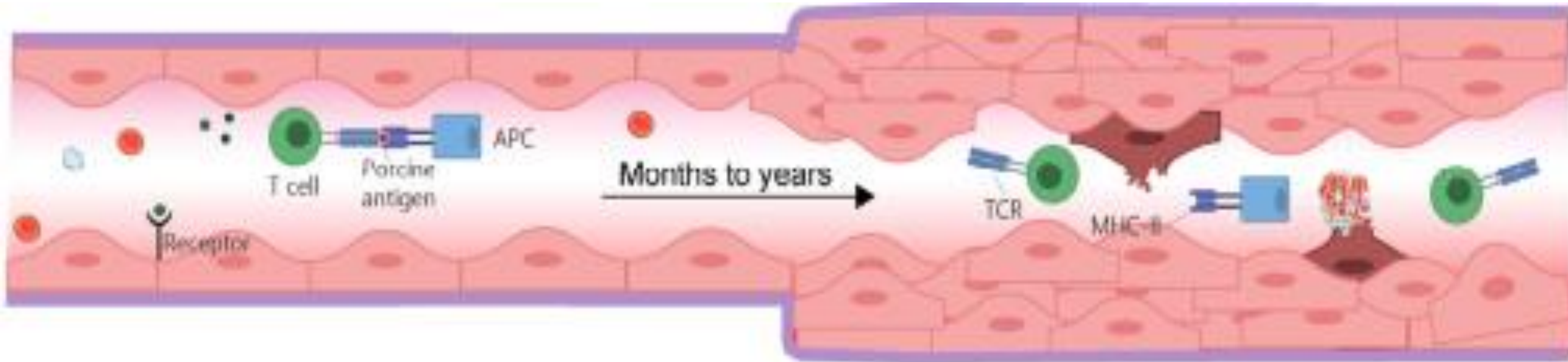
CXR

- If both HAR and AHXR are overcome, but **immunosuppressive** therapy is **insufficient**, **CXR may occur** and lead to graft rejection within days or weeks following transplantation.
- CXR can be mediated by the **innate** and/or the **adaptive** immune system, and may involve NK cells, macrophages, neutrophils, dendritic cells (DCs), T cells, and B cells.



Chronic rejection

- Usually occurs **several months to years** after organ transplantation.
- **Proliferation** of graft vascular **endothelial cells**, vessel narrowing, interstitial fibrosis, which ultimately, result in graft failure.
- Achieved a long-term survival of **499 days** by **depleting CD4+ T** cells that indicating that these cells are **responsible** for chronic rejection.

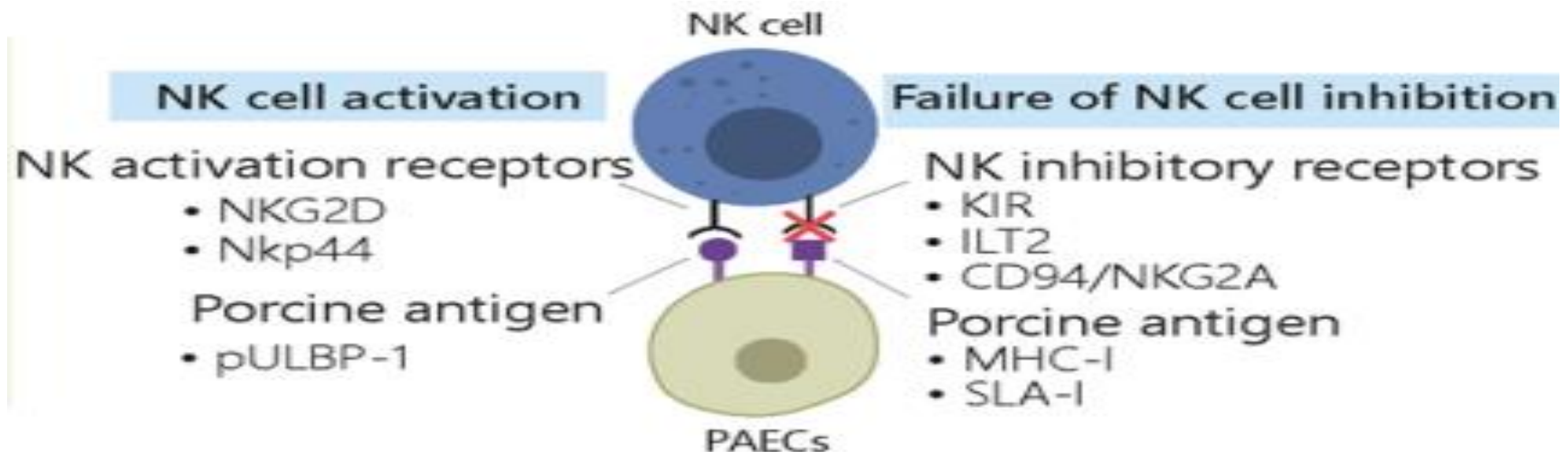




Immune system

NK cells

- NK cells mediate xenograft rejection by **ADCC**.
- **NKG2D** and **NKp44** can bind porcine **pULBP-1** and an **unidentified ligand**.
- **KIRs** , **ILT2**, and **CD94/NKG2A** mainly recognize **MHC-I** molecules.
- Expression of **HLA-Cw3** and/or **G**, and/ or **E**, on porcine cells could protect the xenograft from human NK cytotoxicity.



Macrophages

- Synergistic effect of **TLR** and **IFN- γ** cause macrophages **licensed** to process and present **xenoantigens**, and exert direct cytotoxicity by **TNF α** , **IL-1**, **IL-6**, and **nitric oxide**.
- **Interspecies incompatibility of CD47** was also reported to contribute significantly to macrophage-mediated rejection of xenogeneic cells.
- Phagocytose **porcine red blood cells** independently of the presence of antibodies or complement activation, even in setups where the **α -Gal epitopes** were **absent** from the porcine cells.

Neutrophils

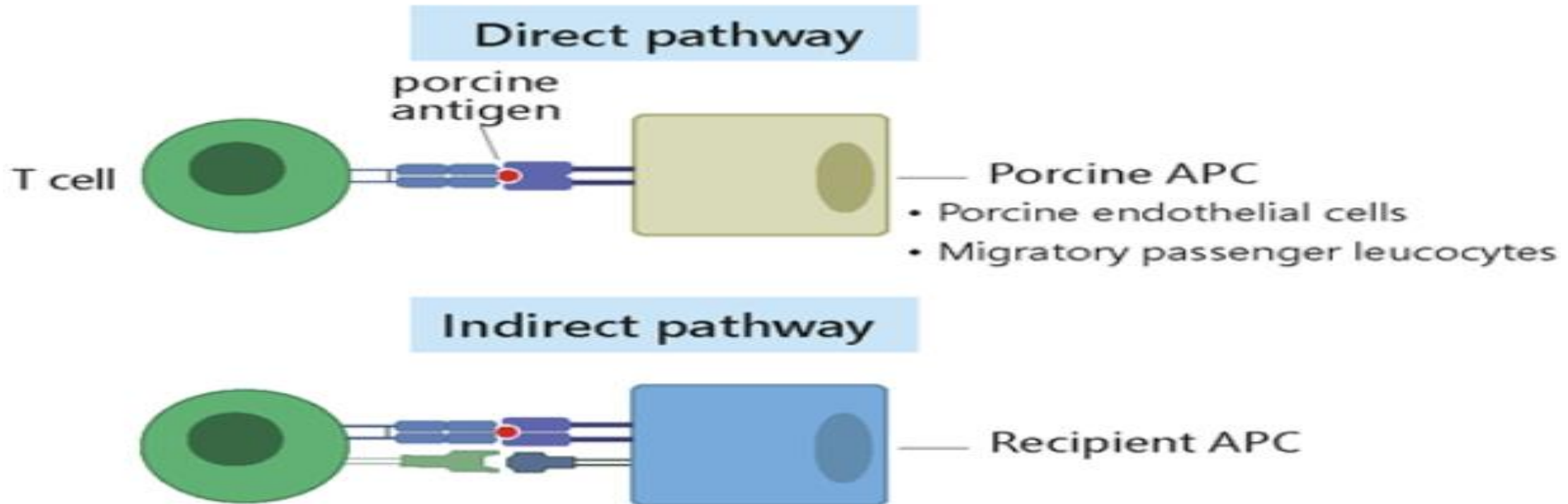
- **Three** mechanisms activated neutrophils can induce tissue damage:
 - (i) **ROS** generation (ii) release of tissue-digesting **enzymes** (iii) **NETs**.
- Leukocyte **proteases** have been implicated in neutrophil-mediated **graft tissue damage**, For instance neutrophil elastase breaks **degrading the ECM**.



- ROS
- Tissue damaging enzymes
- nuclear extracellular traps

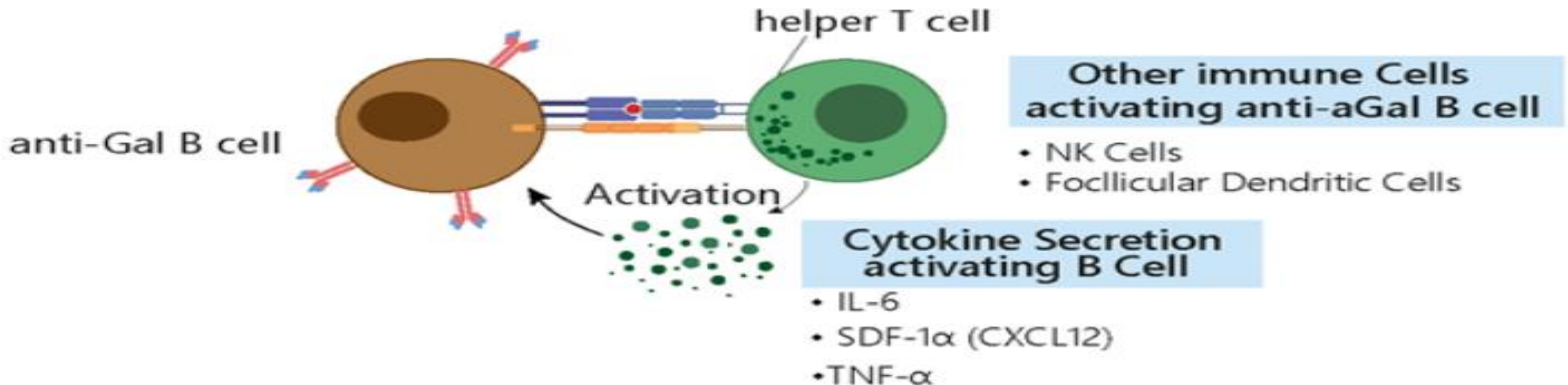
T cells

- T cells are activated by both **direct** and **indirect** pathways.
- Drugs targeting these pathways: **anti-CD40** mAb and **CTLA4Ig**.



B cells

- The cells producing **anti-Gal antibodies** reside mainly in the **spleen** and to a lesser degree in lymph nodes and bone marrow.
- **Depletion** of secondary lymphoid organ-resident **B cells** by **anti-CD20** antibody at the time of transplant **prevents** anti-pig humoral responses and resulting **graft injury**.





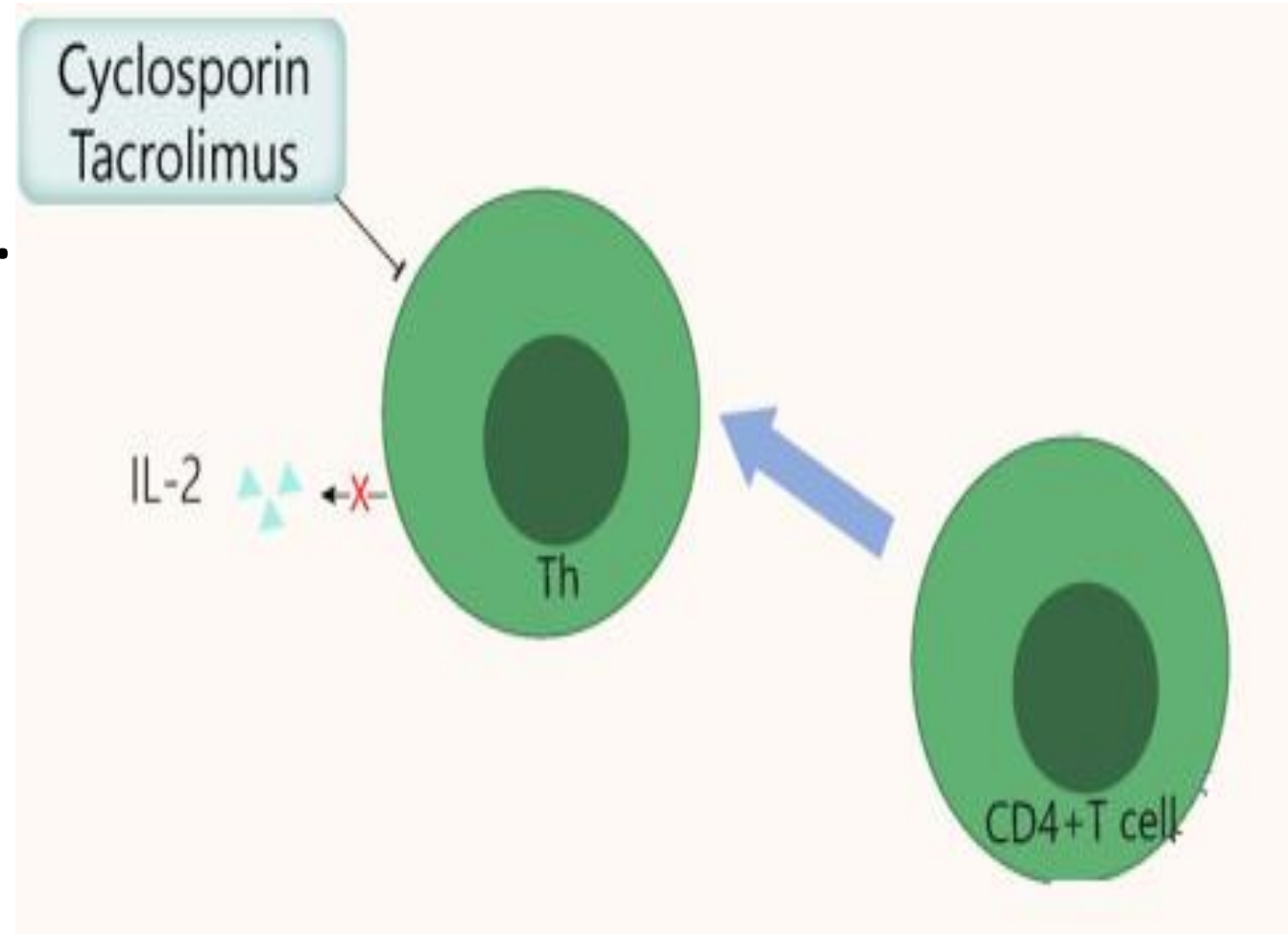
Immuno suppressants in xenotransplantation area

Glucocorticoids

- Glucocorticoids (GCs) were discovered in the **1940s** .
- GCs have been used as **first-line medication** during the induction and maintenance phases after transplantation to **prevent acute rejection**.
- **Three** immunosuppressive mechanisms triggered by GCs include:
 - (i) **T cell** depletion via inhibition of **IL-2** (ii) prevention of **B cell** clonal expansion through inhibition of the production of **IL-2** and related peptides, which reduces antibody production; (iii) induction of **eosinophil apoptosis** either directly or through **IL-5** inhibition

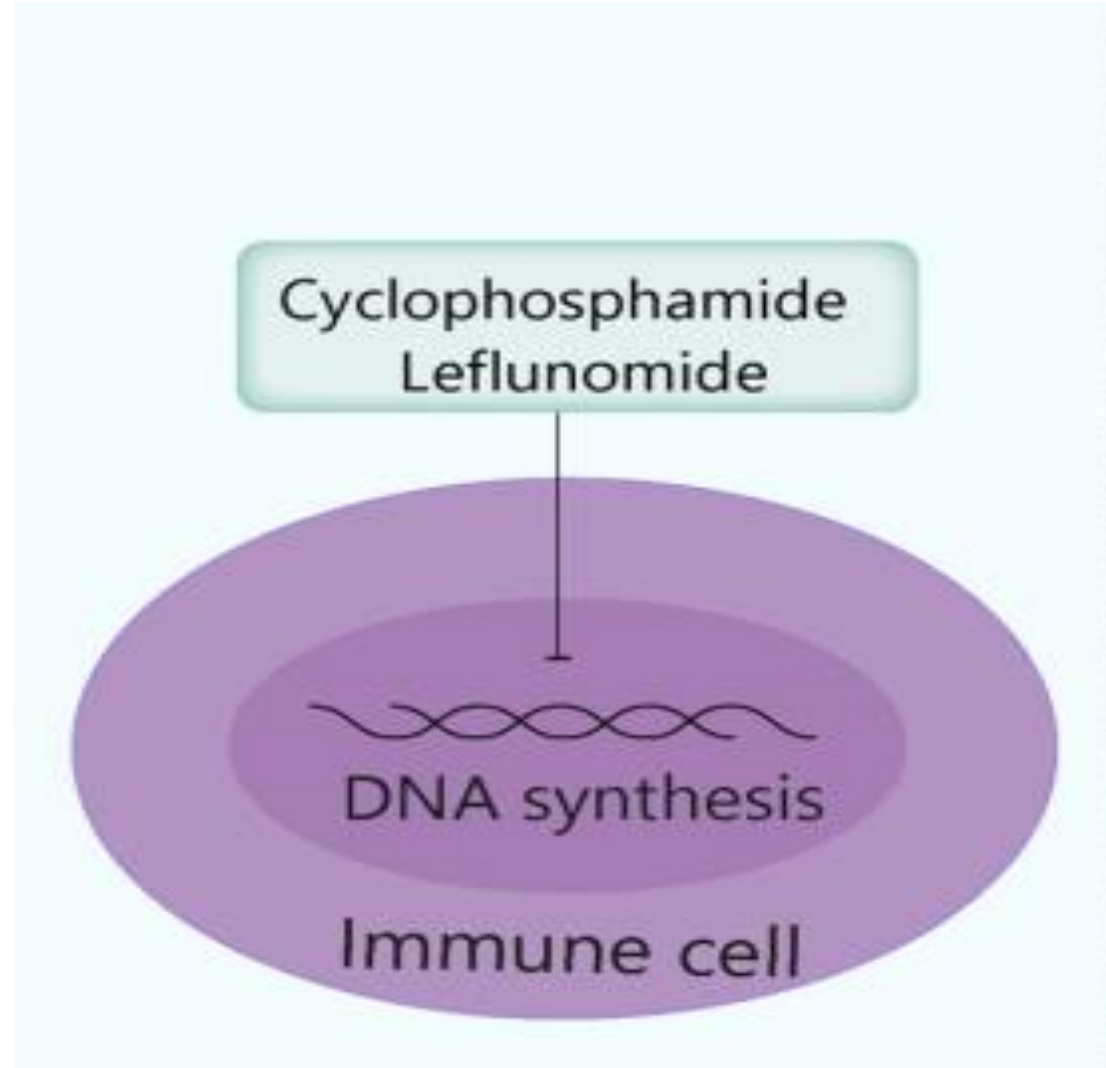
Calcineurin inhibitors

- Calcineurin inhibitors: **cyclosporin** and **tacrolimus**, inhibit the dephosphorylation of **NFAT**.
- This inhibition results in **Decreased T cell maturation and IL-2**.



Anti proliferative agents

- Cyclophosphamide
- Rapamycin
- Leflunomide
- Mycophenolate mofetil



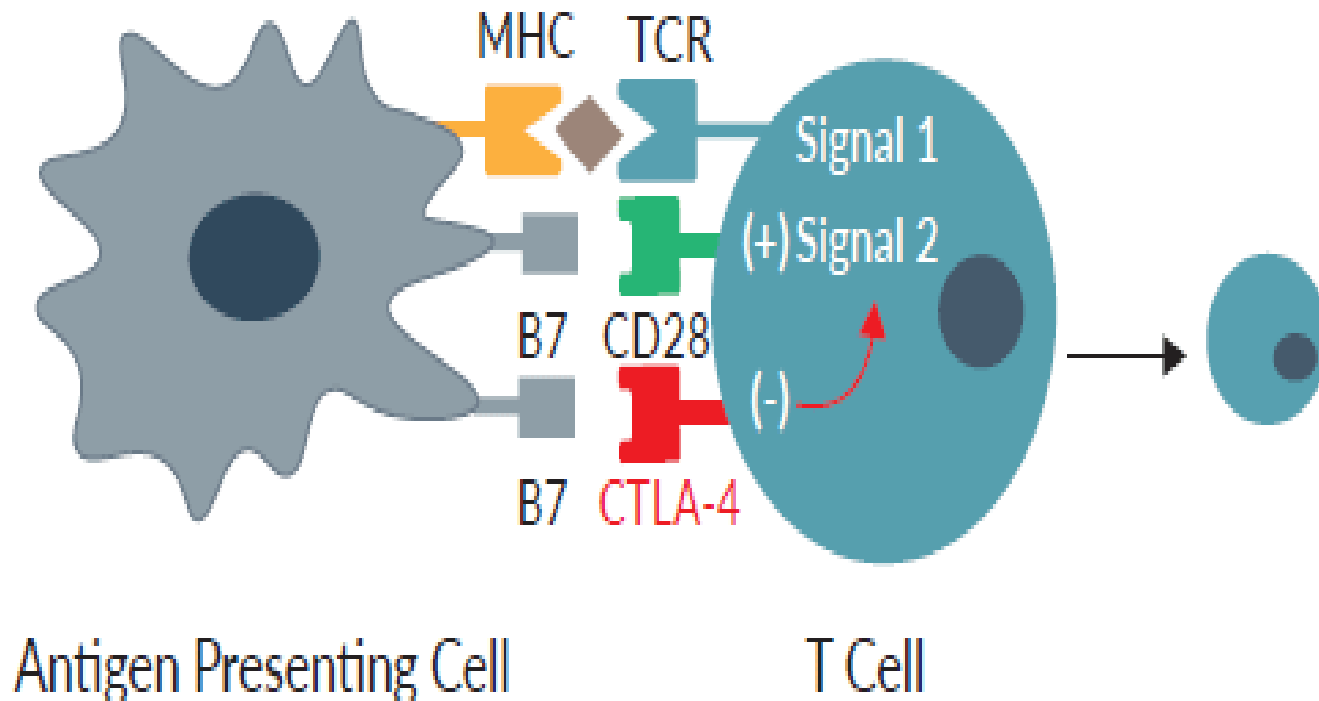


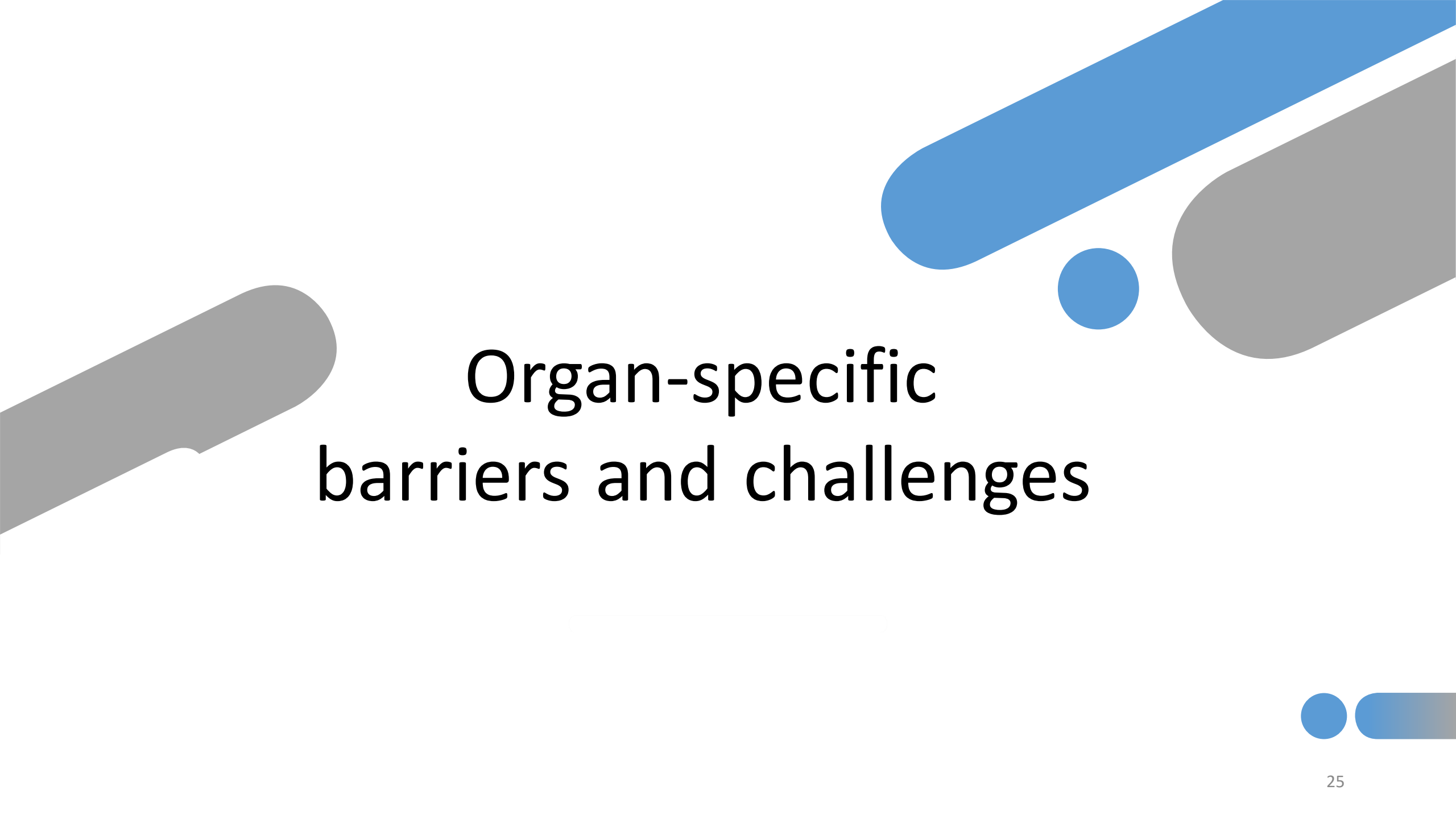
Monoclonal or polyclonal antibodies

- **AntiCD3.**
- **Tocilizumab:** blocks human IL-6Ra.
- **Anti-CD20(rituximab)** that leads to B cell depletion.
- **Polyclonal** anti-thymocyte globulins (ATGs) primary mechanism of action consist in promoting **lymphocyte depletion** through T cell activation-induced apoptosis and complement dependent lysis.

Blockade of costimulatory signals

- Blockade of CD80/86:CD28 costimulatory pathway by **CTLA4Ig**.
- Targeting of CD154:CD40 costimulatory signal with **anti-CD40mAb**.





Organ-specific barriers and challenges

Liver xenotransplantation

- From **chimpanzee** to human was first held in the **1960s**.
- The transplanted patients either died from sepsis due excessive **immunosuppression**, or from **hepatic failure** with clear rejection
- **Two major problems** must be overcome in liver xenotransplantation:
1-lethal **thrombocytopenia** 2-**antibody-mediated rejection** targeting antigens such as a1,3GT, N- glycolylneuraminic acid and b4GALNT2.
- If the severe and immediate thrombocytopenia could be prevented, **pig liver xenotransplantation** could be used as a bridge towards allotransplantation.

Cardiac xenotransplantation

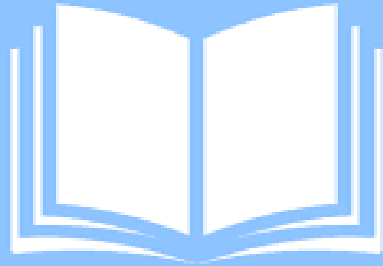
- First attempt of **pig-to-NHP** cardiac xenotransplantation started in the mid-**1980s**.
- The **longest** survival of heterotopic heart xenograft, reaching up to **945 days**, has been achieved in baboons, with **ATG** and **anti-CD20** antibody treatments, followed by maintenance with **MMF** and high-dose **anti-CD40** immunosuppressive regimen.
- **The first clinical trial** of pig to human was carried out with **genetically modified pig heart** transplanted into a 57-year-old man in the USA in 2022, and the patient survived for **two months** without signs of rejection, while the cause of death is **unknown**.

Conclusion and perspectives

- Although porcine-to-human xenotransplantation of **kidneys and hearts** have been carried out, it is not known when xenotransplantation of **liver**, small **intestine**, and even **pancreas** will become possible.
- Until now, the survival of transplanted organs on the long term largely **depends on high doses** of different **immunosuppressants**, which would expose the recipients to high infection risks and other side effects.



No cover available



Reference

- Current status of xenotransplantation research and the strategies for preventing xenograft rejection



Thanks for your attention

