



Multiparametric assessment of the effects of cardioactive compounds on human iPSC-derived cardiomyocytes

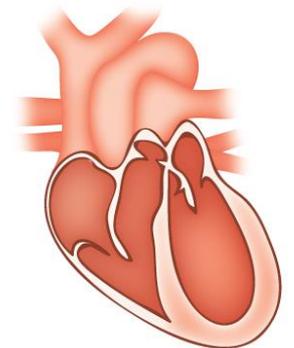


16th FDSS Users Meeting
June 9th, 2016

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About Pluriomics

- Operational since 2012
- R&D labs in the Leiden Bio Science Park (NL)
- Sales & Marketing in the Leiden Bio Science Park (NL)
- Production facilities in the Gosselies Biopark (BE)
 - QMS
 - Cell production
 - Medium production
- Currently 21 people



Our mission

Implement human stem cell technology in biopharmaceutical R&D

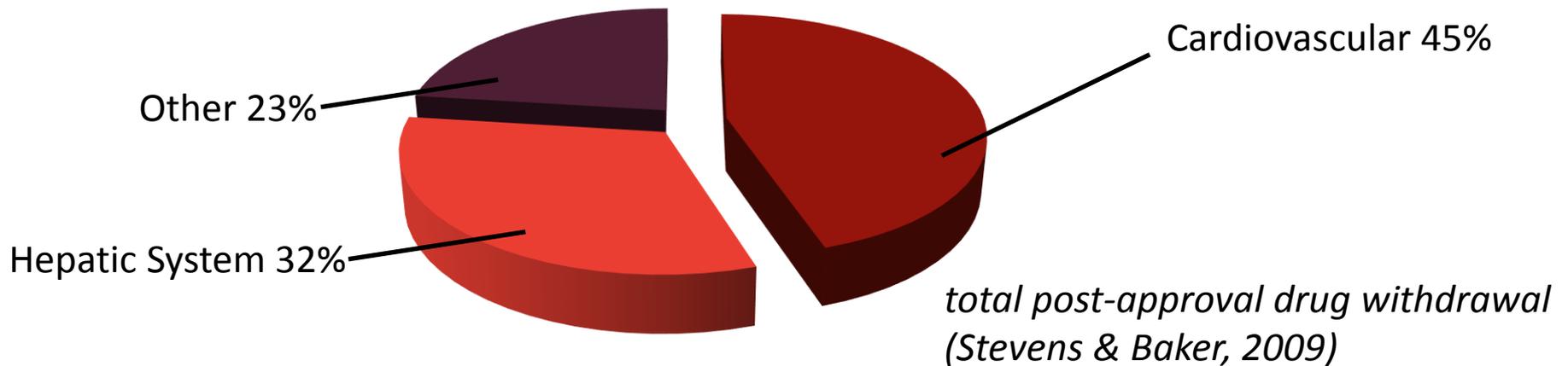
- **To improve efficiency of drug discovery and development by selecting for novel and safe drug candidates early on**
- **To significantly reduce animal experiments**
- **To personalize drug discovery and development**



Cardiovascular toxicity in drug development

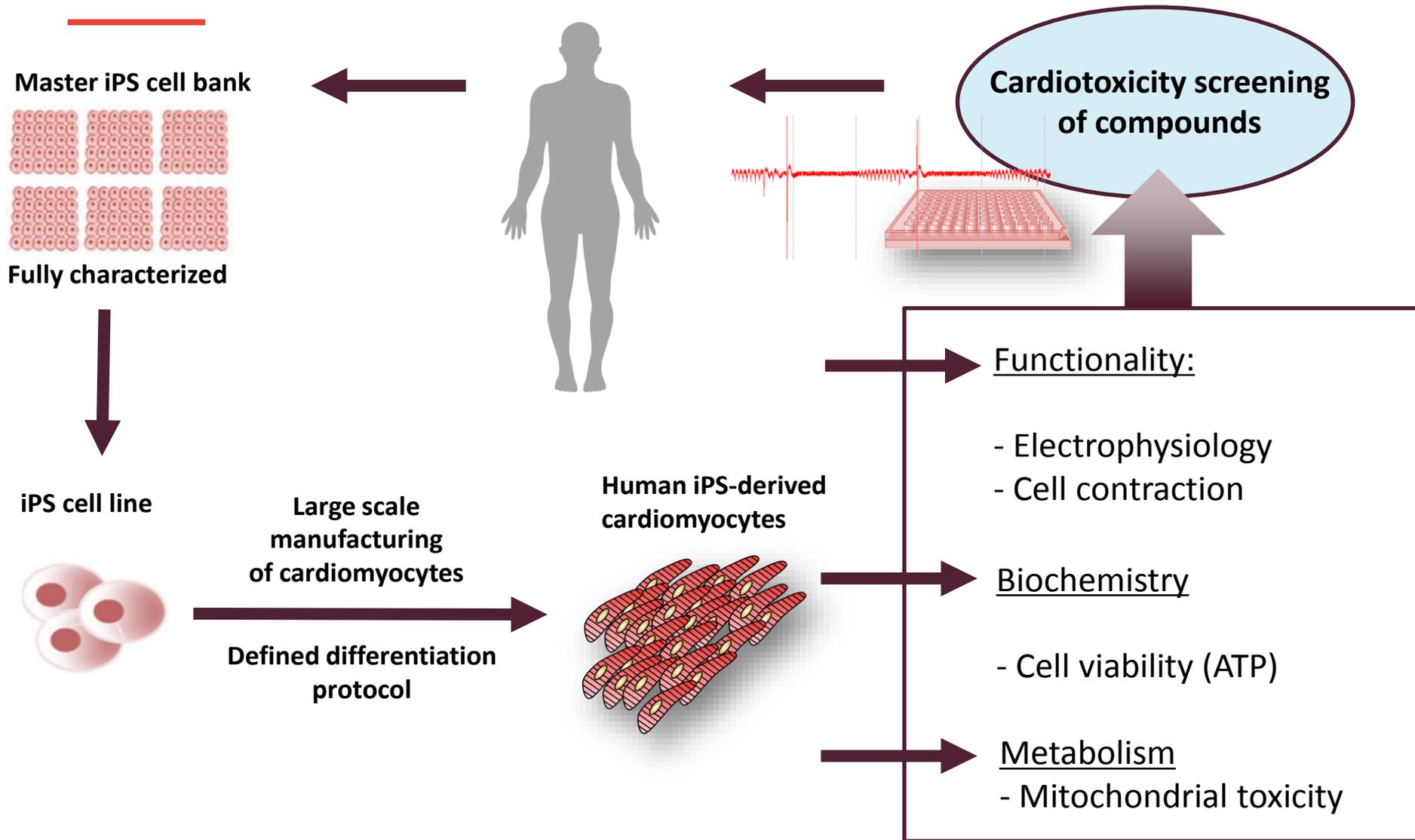
Cardiovascular toxicity:

- Represents most frequent serious adverse drug reaction (*Redfern et al., 2010*)
- Major cause of withdrawal of marketed drugs

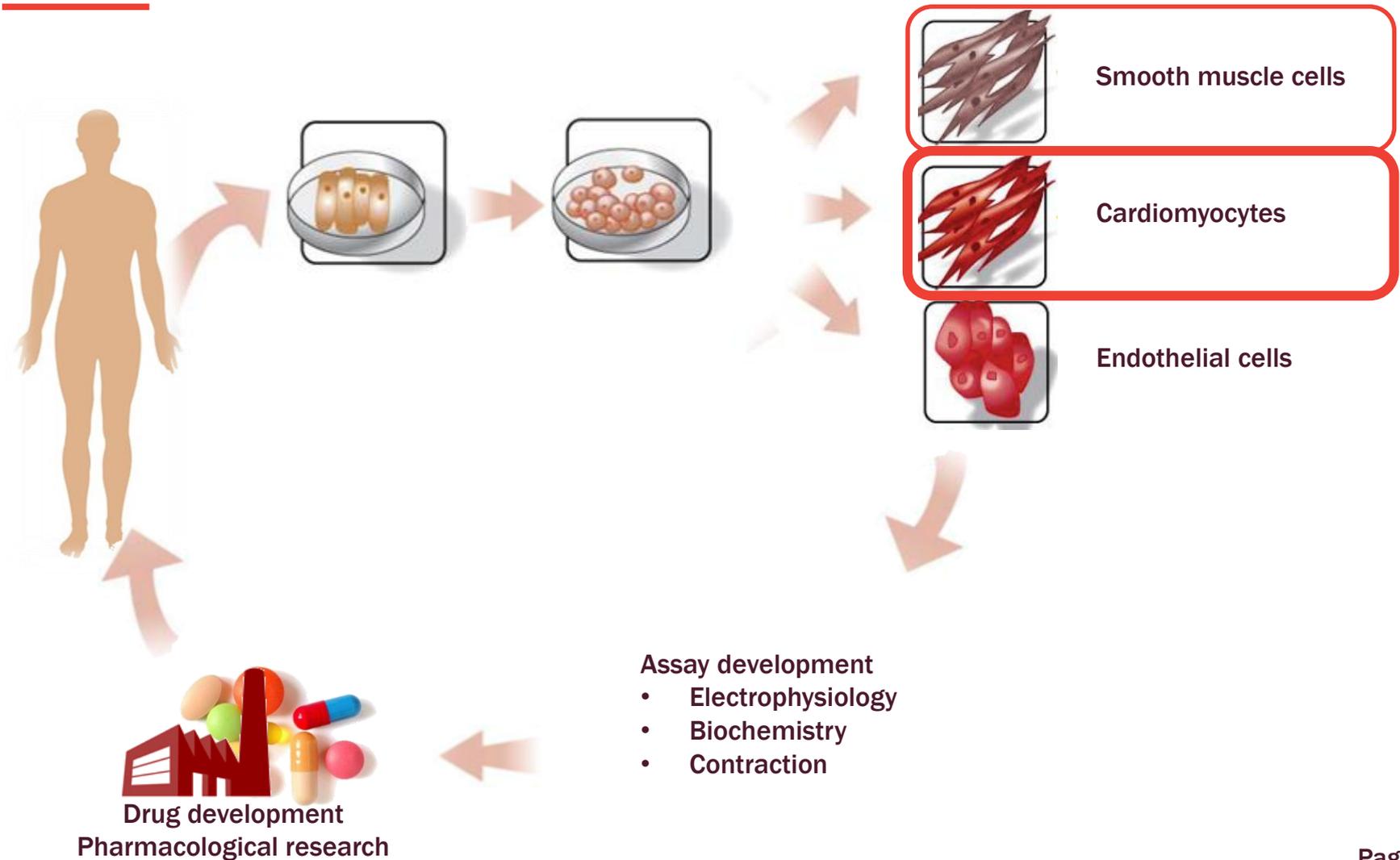


➔ Urgent need for relevant *in vitro* models to screen for cardiotoxicity early in the drug development process

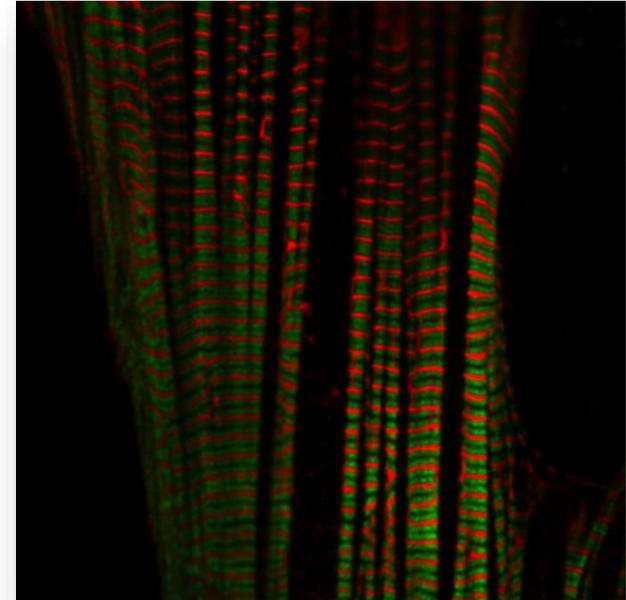
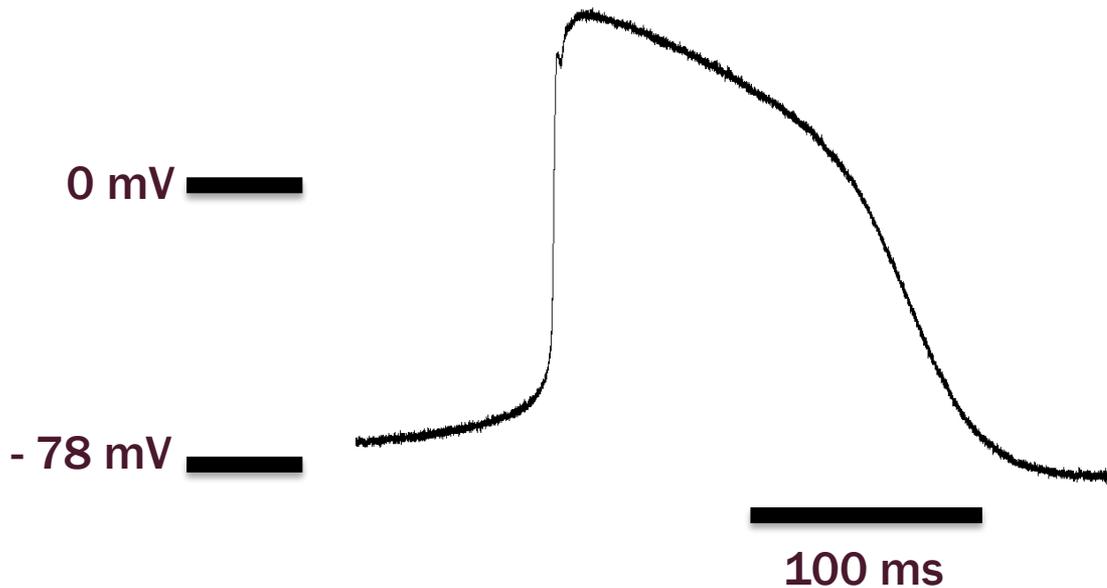
iPSC derived cardiomyocyte-based assays for cardiotoxicity screening



Pluriomics manufactures iPSC derived functional cell types and offers cell-based assay services



Pluricyte[®] Cardiomyocytes exhibit a fast upstroke velocity and high degree of ultra-structural organization



Structural
MYH6, MYH7, MYL2,
TNNI, ACTN2

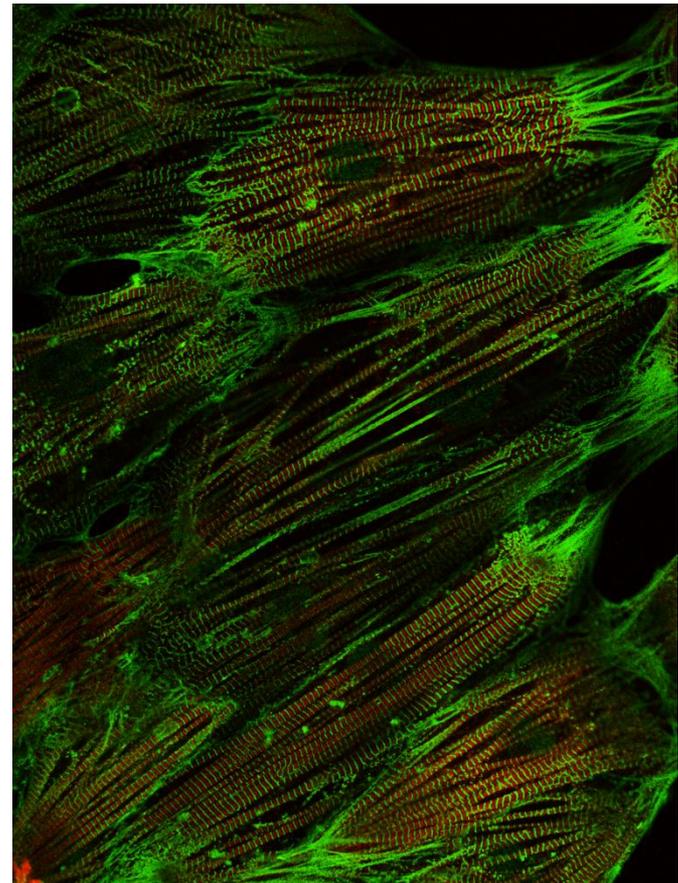
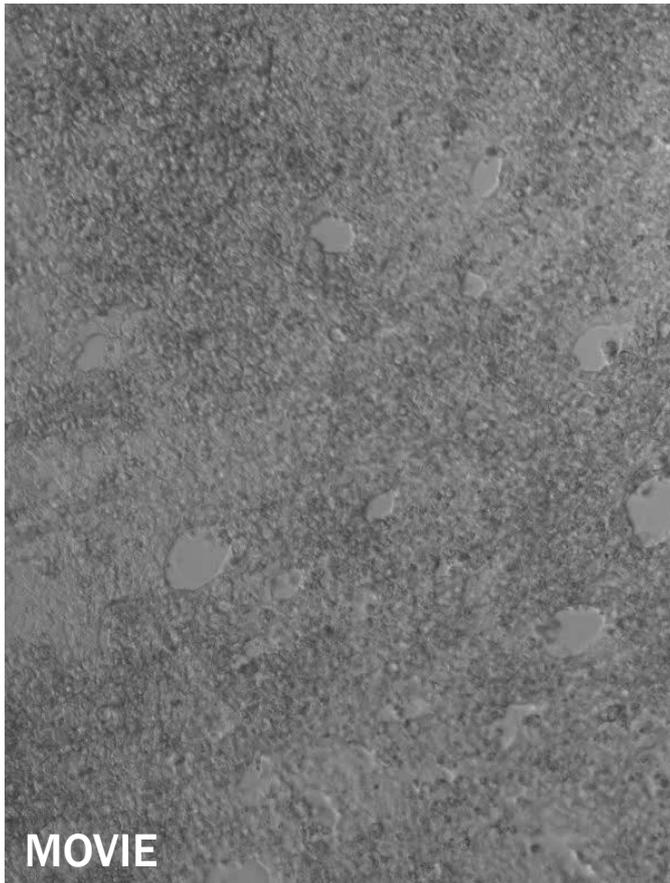
Ion channels
 I_{Na} $I_{Ca,L}$ I_{Kr} I_{Ks} I_{to} I_{k1}

Calcium handling
CSQ2, PLN, RYR2

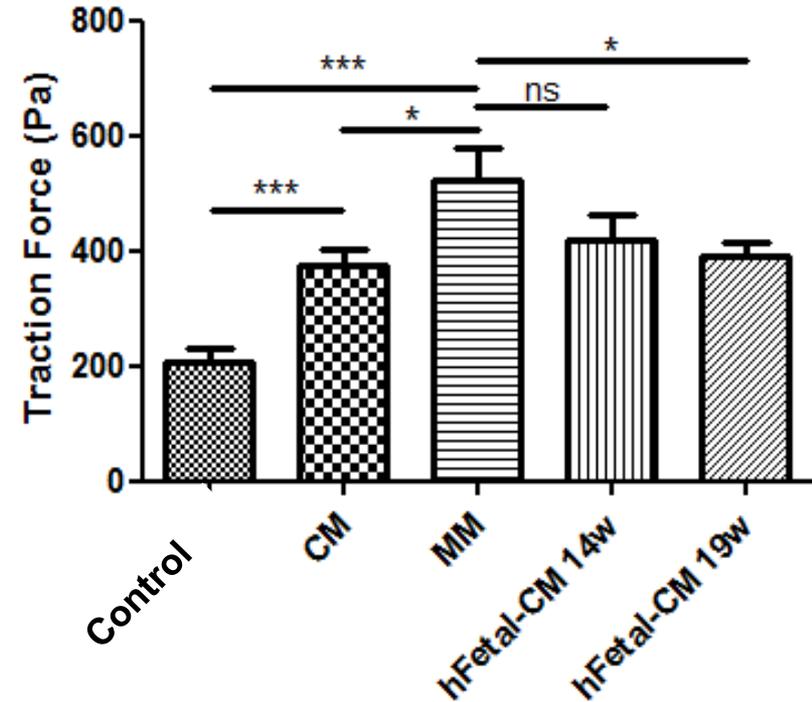
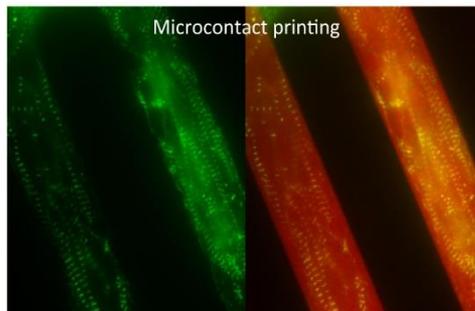
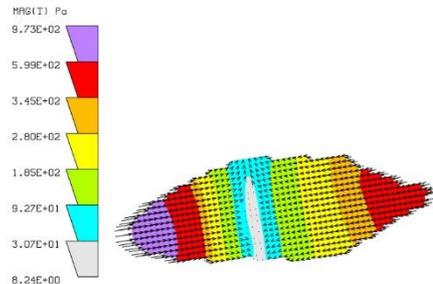
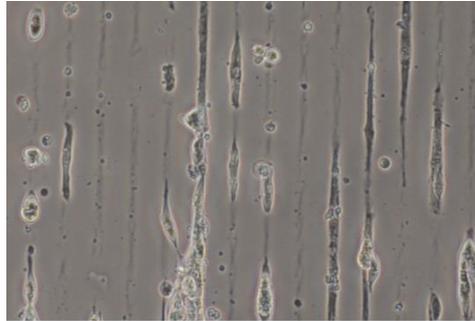
Gap Junctions
Connexin 40, 43

Transcription factors
Nkx2-5, MEF2c, GATA4

Synchronously beating Pluricyte[®] Cardiomyocytes and ultra-structural organized sarcomeres

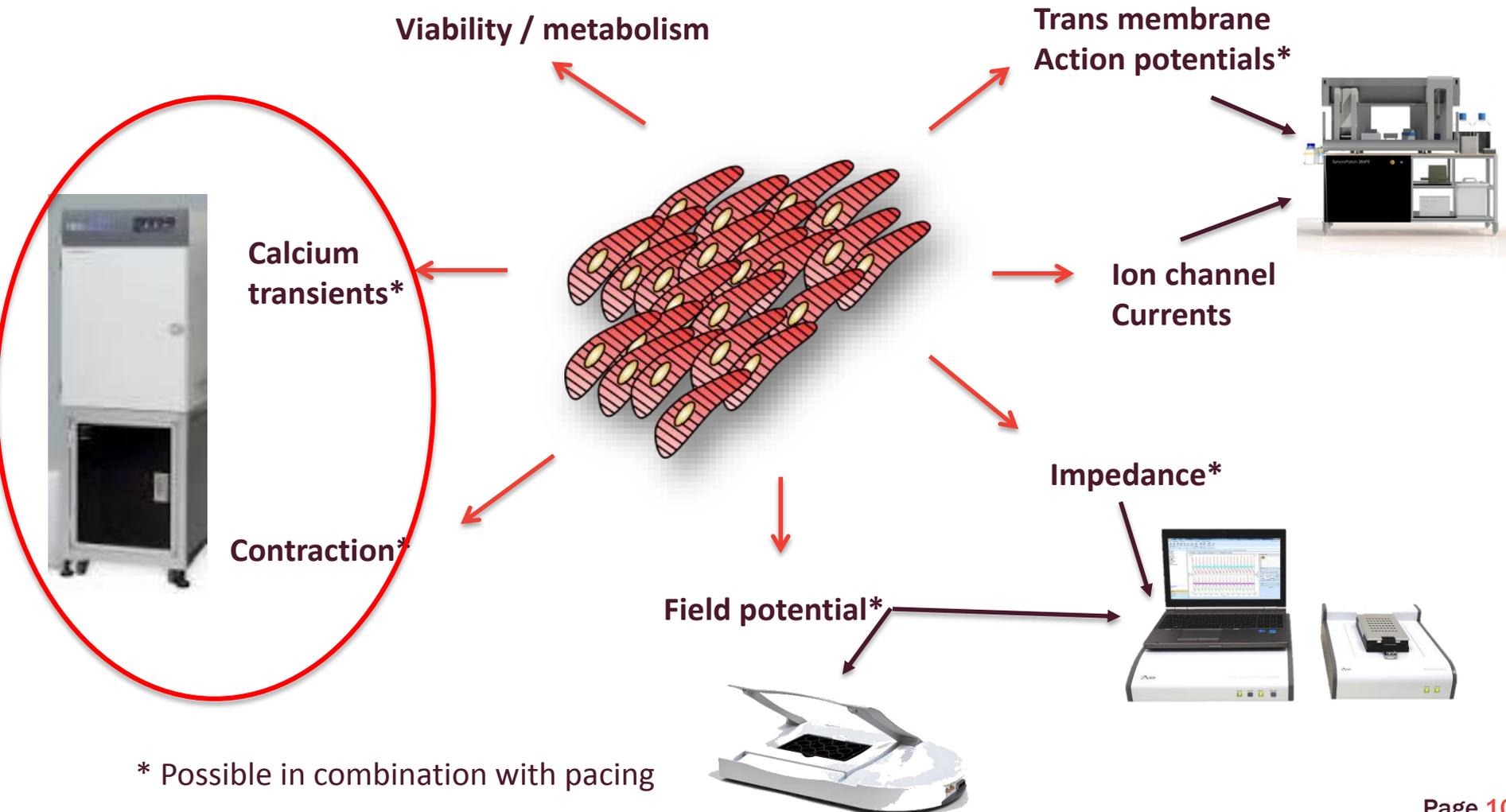


Pluricyte[®] Cardiomyocyte Medium increases force of contraction



Control = LUMC standard medium
 CM = Previous generation medium
 MM = Pluricyte[®] Cardiomyocyte Medium
 hFetal = human fetal cardiomyocytes

Multiparametric approach to study cardioactive effects in Pluricyte[®] Cardiomyocytes



Assay platforms for multiparameter safety and efficacy testing in Pluricyte[®]

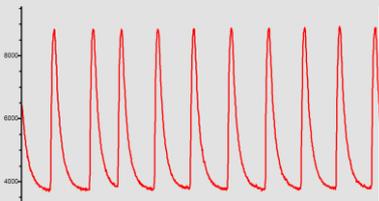
Cardiomyocytes – 2 step approach

1. Ca²⁺-flux assays

FDSS/ μ Cell



- 96/384/1536 wells
- Calcium flux-based
- **High throughput**
- Pacing



2. Multielectrode array (MEA) assays

Maestro



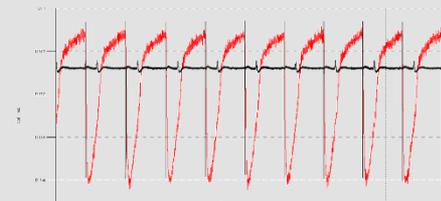
- 48/96 wells
- Electrophysiology-based
- 768 electrodes
- High resolution
- Pacing



Cardio ECR

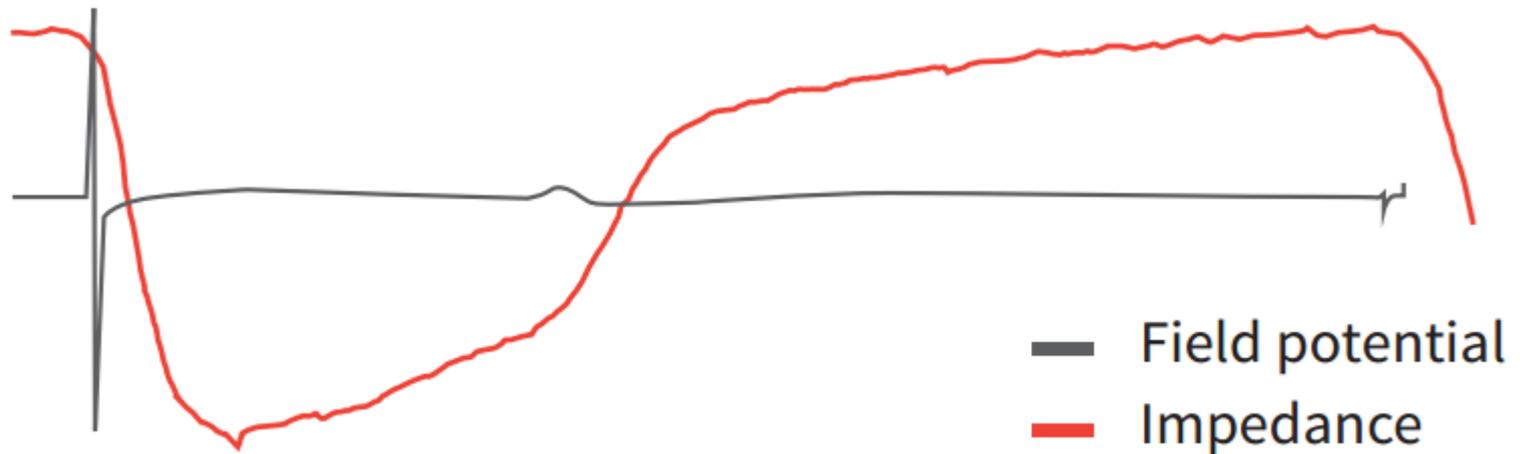


- 48 wells
- Electrophysiology- and contraction-based
- Pacing



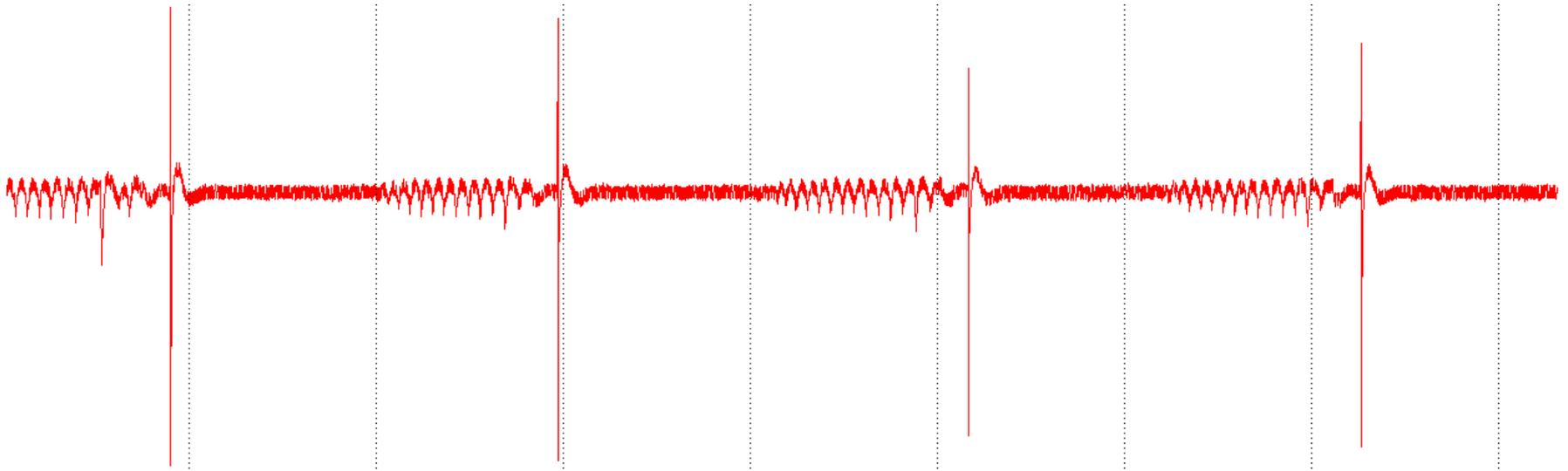
Link between electrophysiology and contraction – CardioECR analysis

Cardiomyocyte excitation-contraction coupling



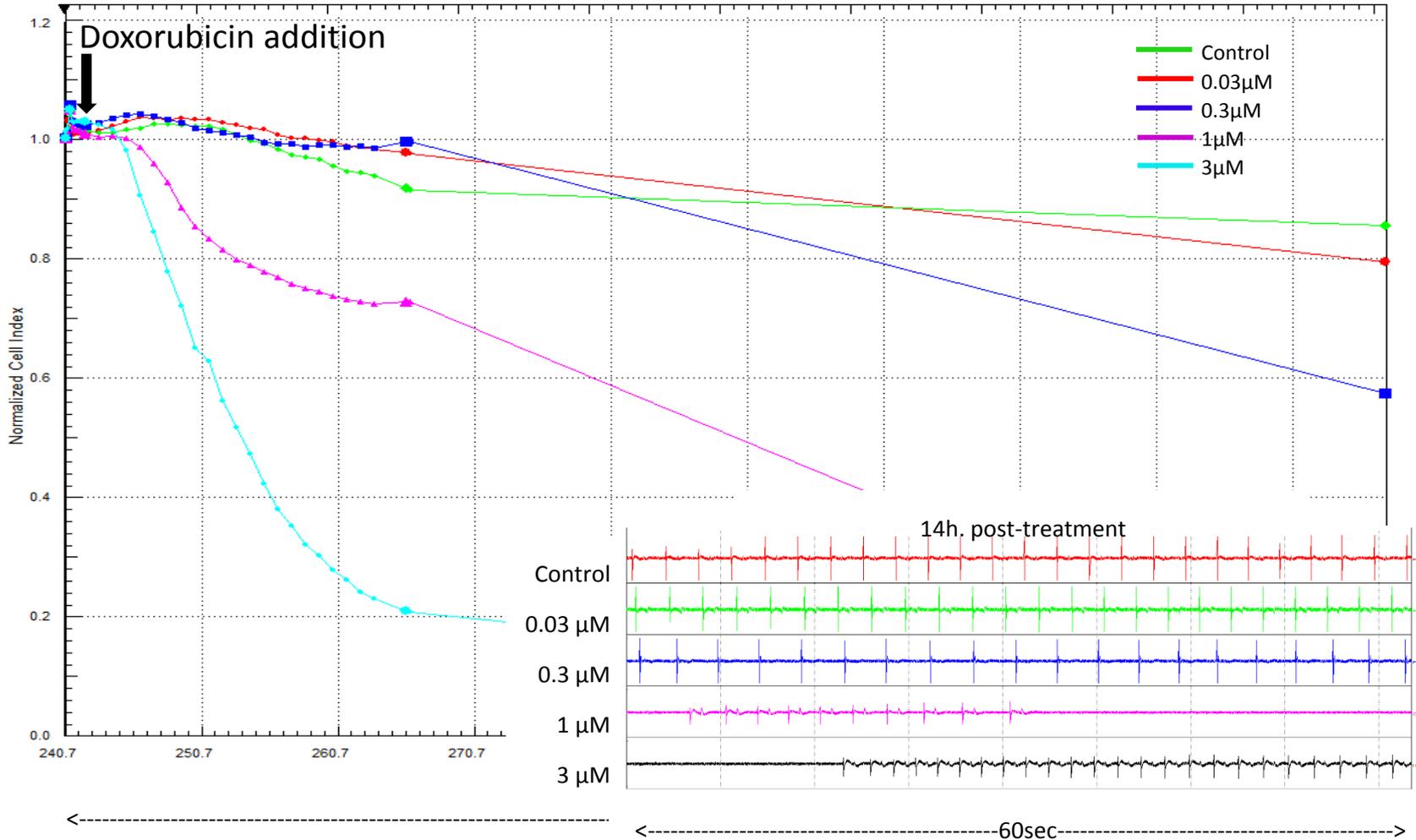
A typical single field potential and impedance waveform of Pluricyte[®] Cardiomyocytes

Using MEA assays to investigate arrhythmic effects of hERG channel blockers on Pluricyte[®] Cardiomyocytes



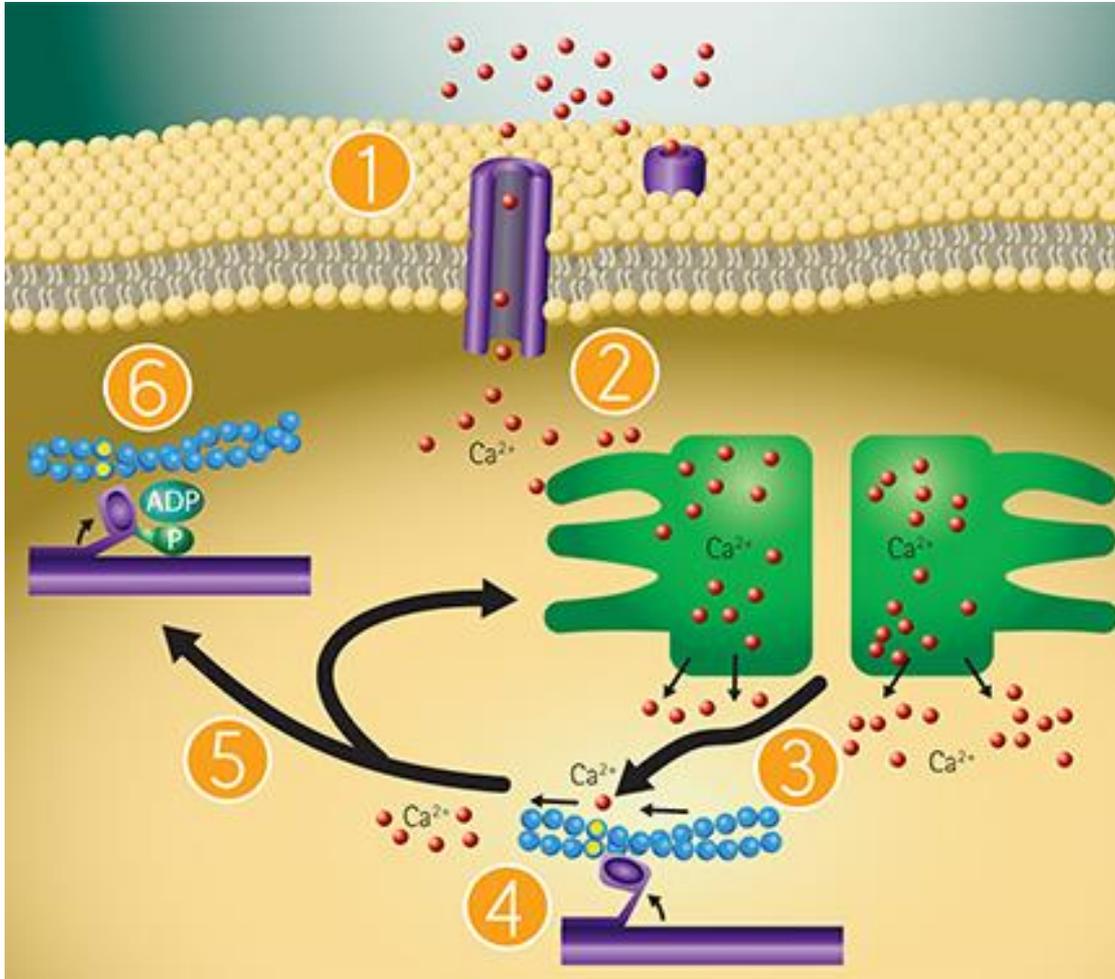
30 nM E4031

Testing chronic effects of compounds on Pluricyte[®] Cardiomyocytes using the CardioECR



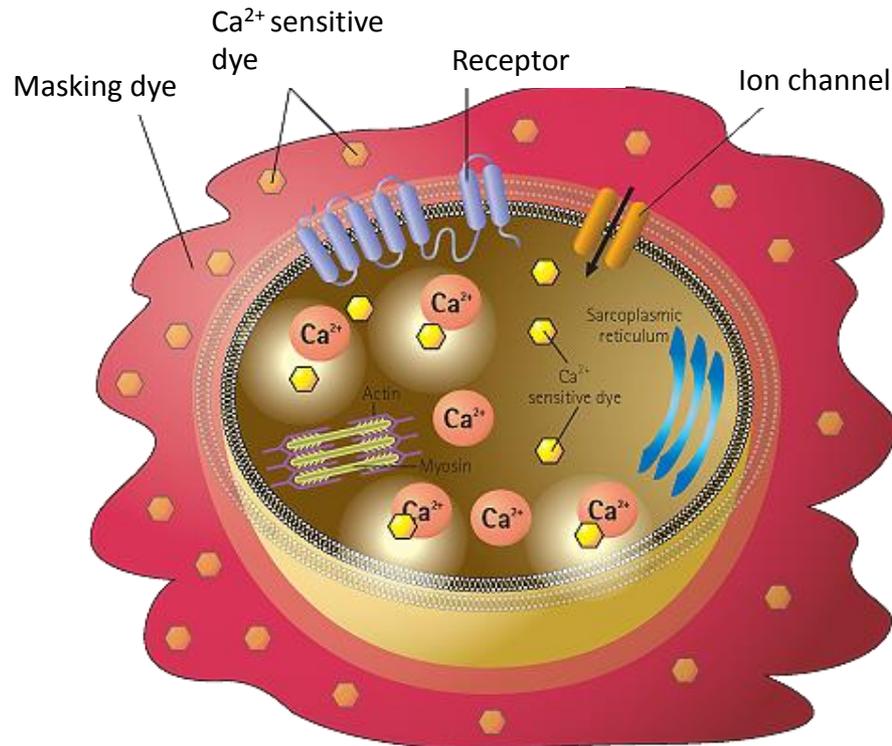
**Combining the FDSS/ μ Cell system and
Pluricyte[®] Cardiomyocytes for high-
throughput assays to study compound
effects**

Role of Calcium in Cardiomyocyte Contraction



1. Membrane depolarization \rightarrow Ca^{2+} influx
2. Release of Ca^{2+} from sarcoplasmic reticulum
3. Binding of cytoplasmic Ca^{2+} to troponin \rightarrow sarcomere activation
- 4. Contraction**
5. Removal of Ca^{2+} into SR and out of cell

Measuring calcium transients in Pluricyte[®] Cardiomyocytes using the FDSS



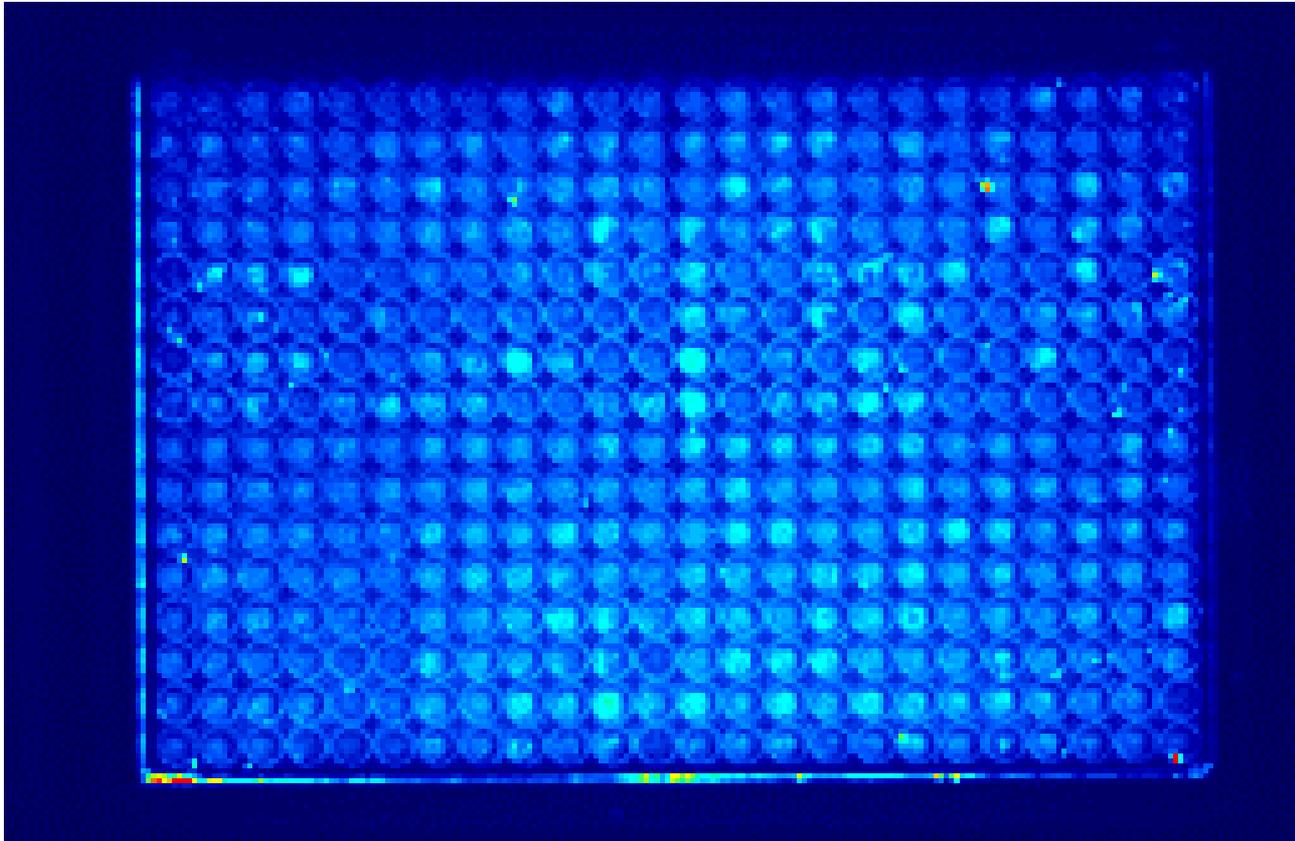
Calcium sensitive dyes, e.g. Calcium-6 (Molecular Devices)



Background is significantly reduced by masking extracellular solution

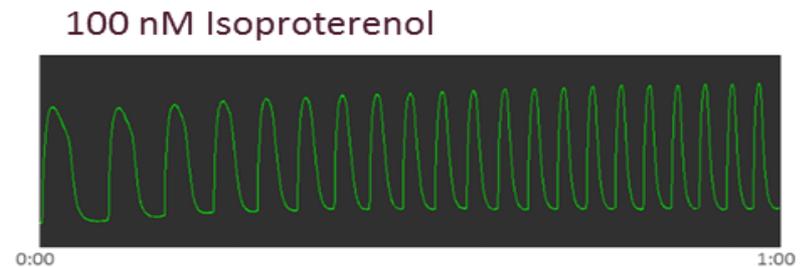
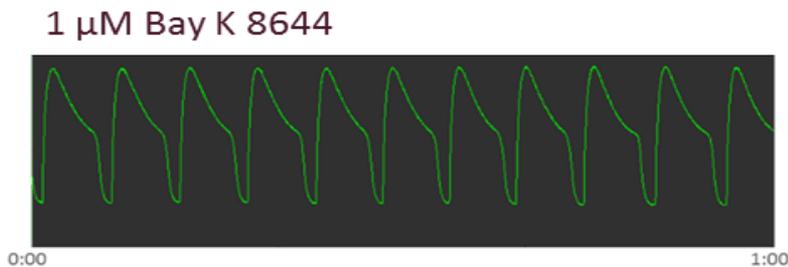
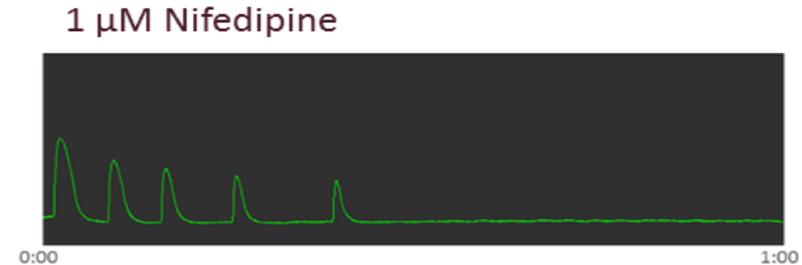
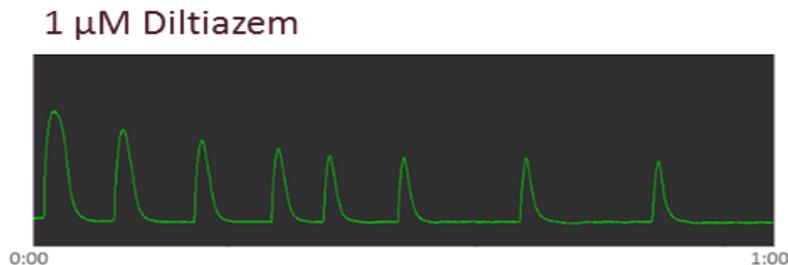
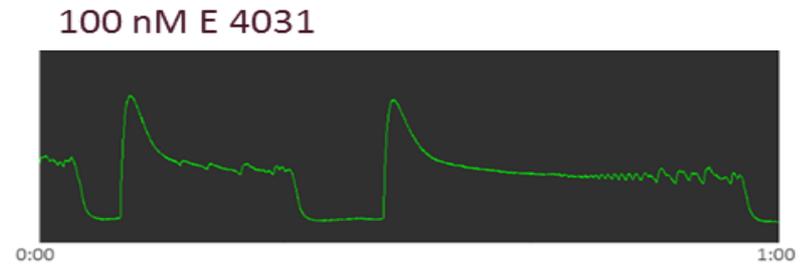
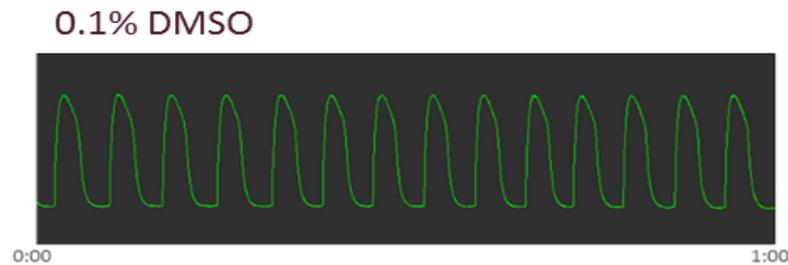
Contraction = Increase in cytosolic Ca²⁺
Relaxation = Decrease in Ca²⁺

1. Calcium flux in Pluricyte[®] Cardiomyocytes – 384 well format



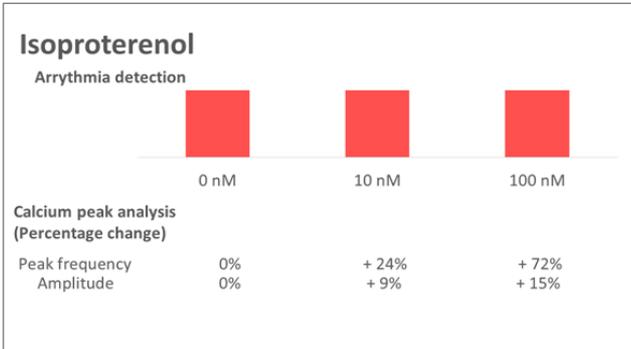
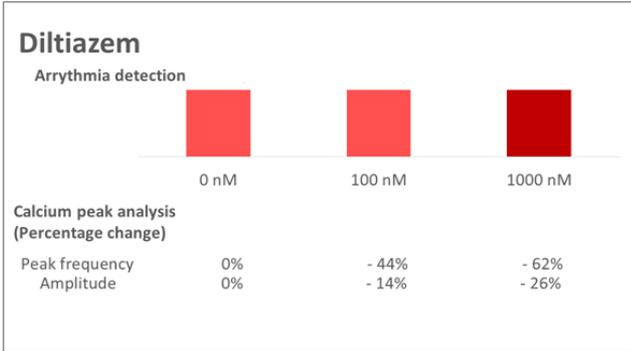
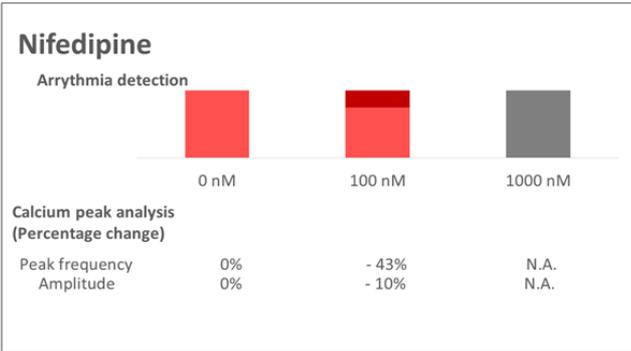
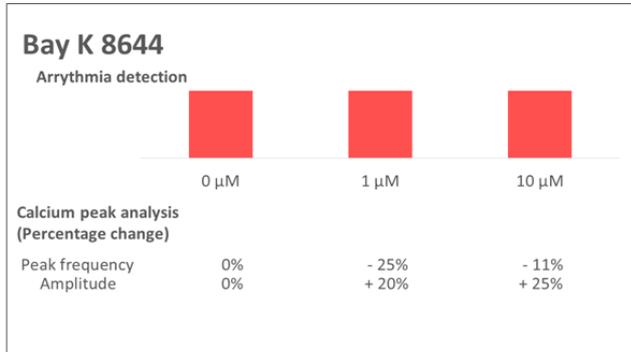
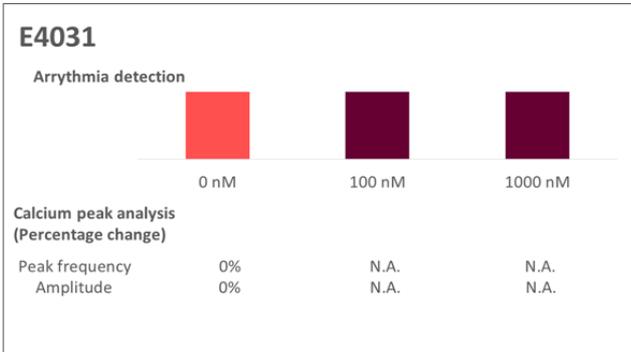
Data recorded with FDSS/ μ Cell with Molecular Devices Calcium 6 dye

Testing cardioactive effects of test compounds in Pluricyte[®] Cardiomyocytes

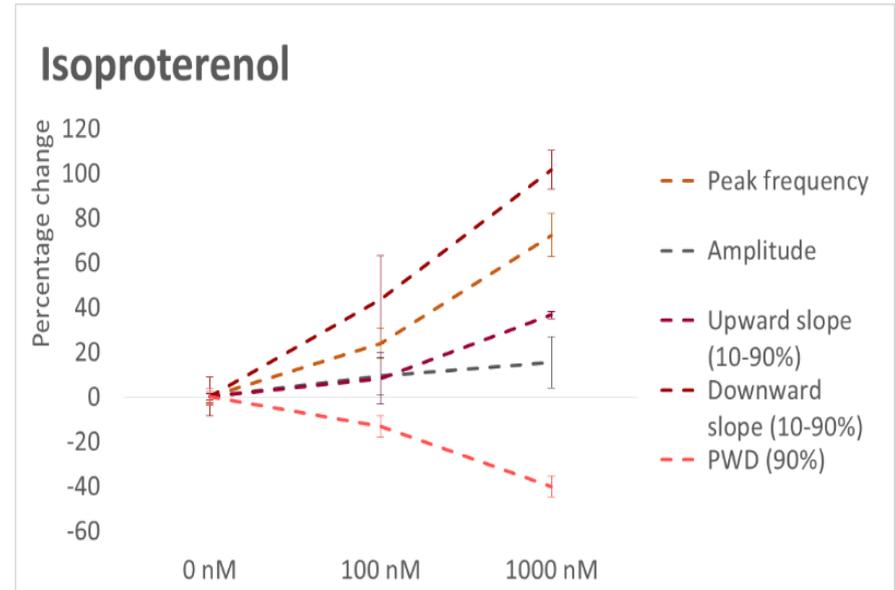
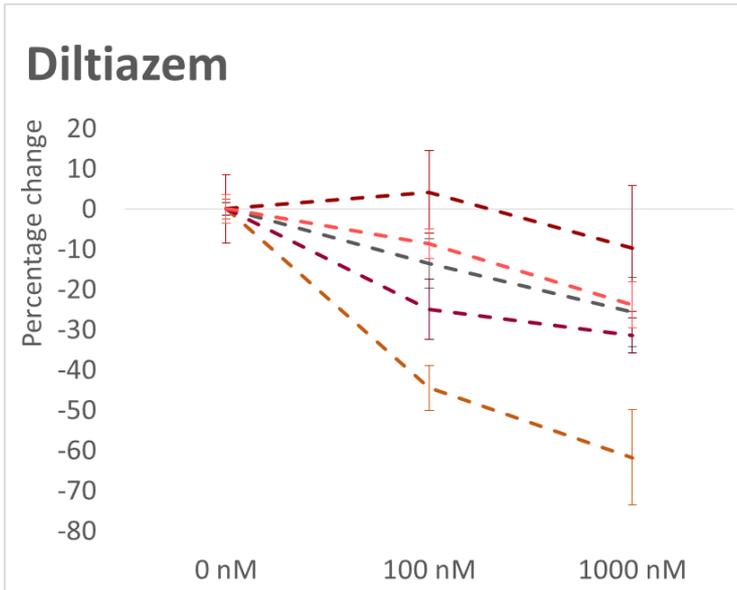


Data recorded with Hamamatsu Photonics FDSS/ μ Cell 4:30-5:00 (30s) after compound addition

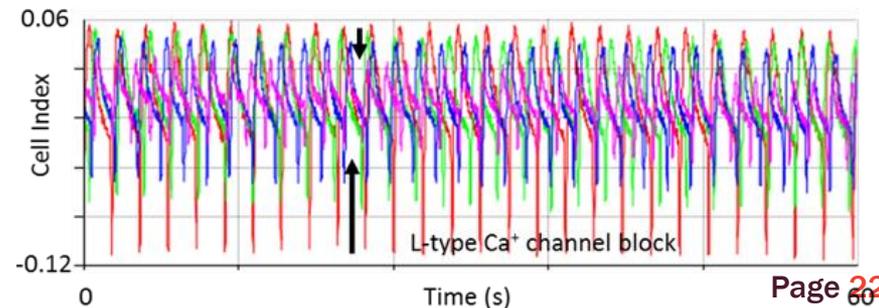
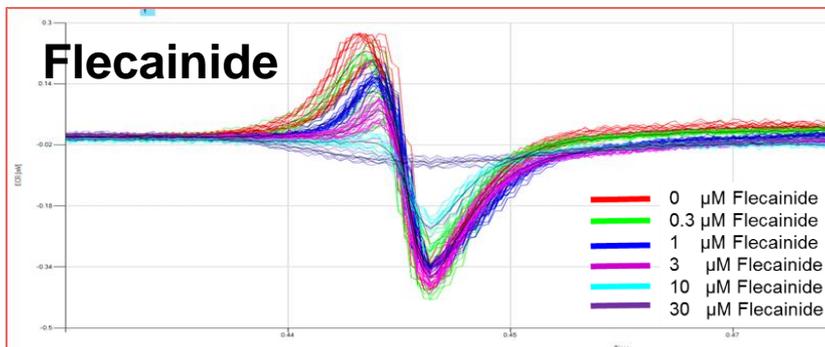
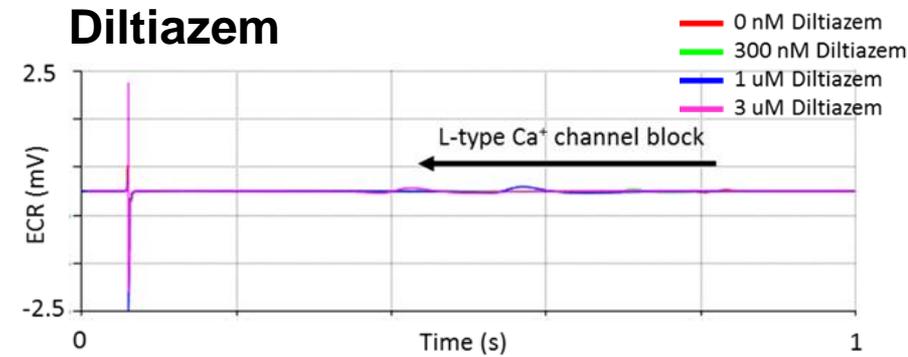
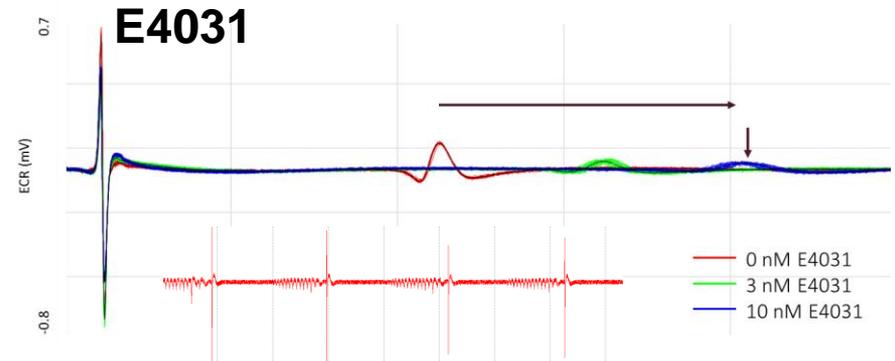
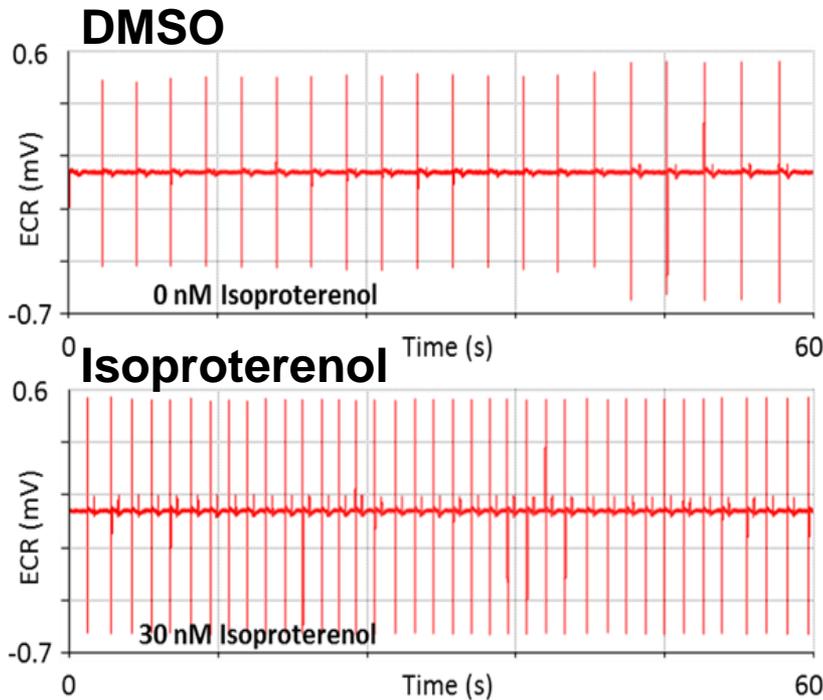
Screening for cardioactive effects in Pluricyte[®] Cardiomyocytes using FDSS/ μ Cell



Detailed analysis of compound effects in Pluricyte[®] Cardiomyocytes using FDSS/ μ Cell



2. Detailed assessment of compound effects in MEA-based assays

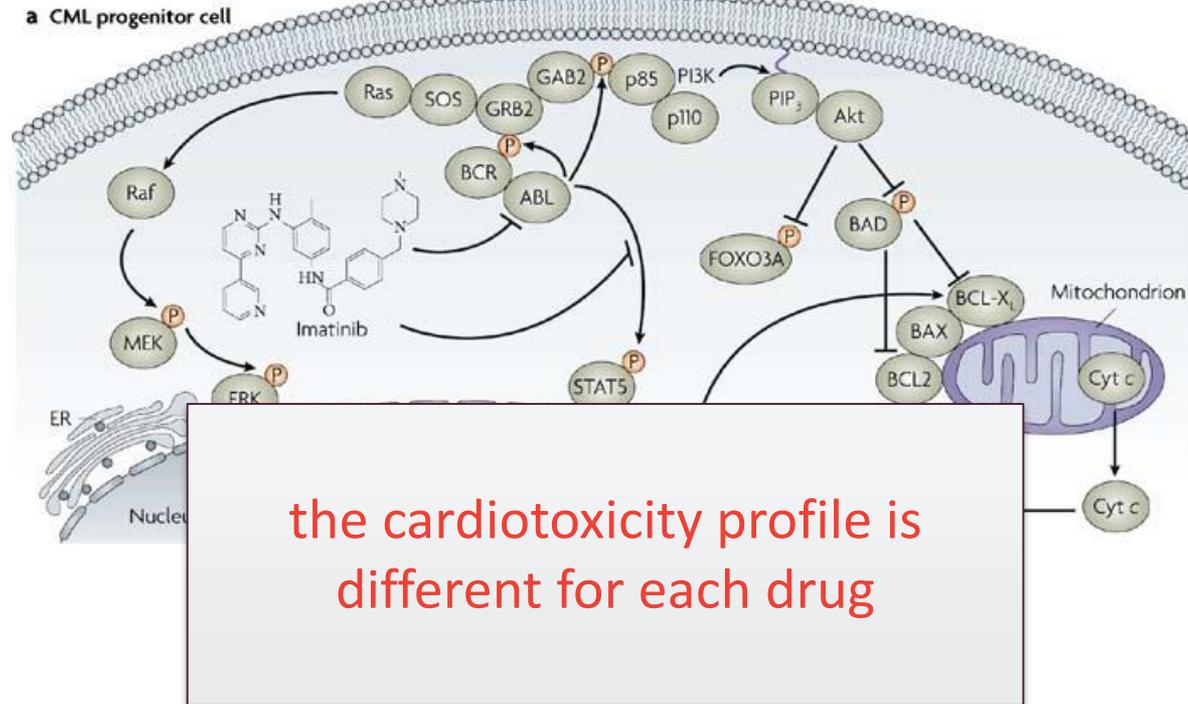


Case example: effects of Tyrosine Kinase Inhibitors on Pluricyte[®] Cardiomyocytes

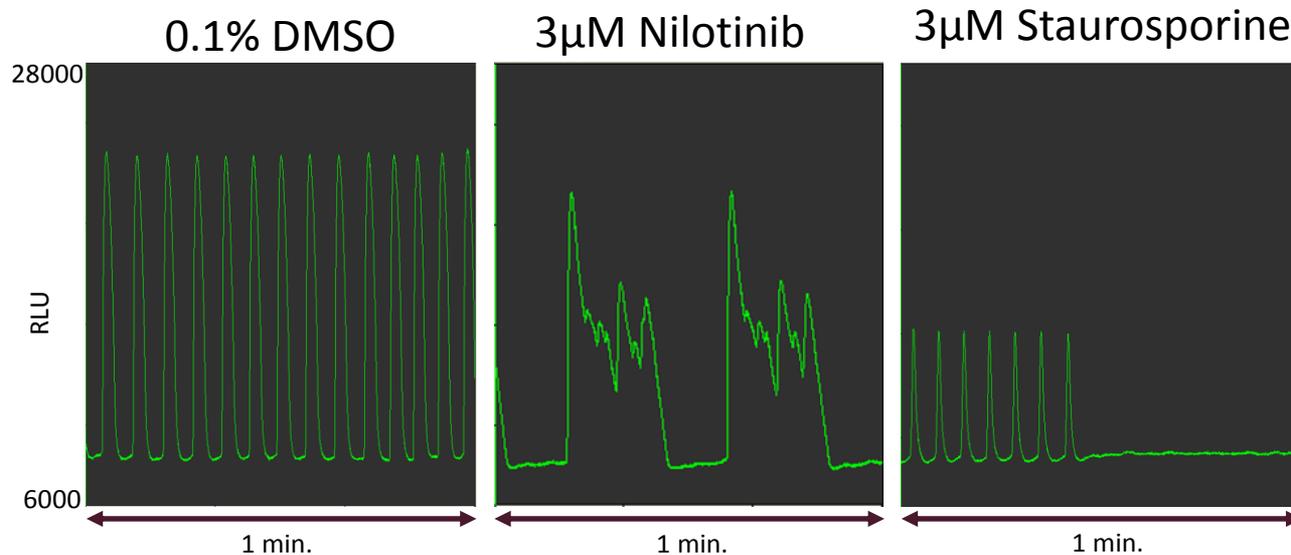
Tyrosine kinase inhibitors (TKIs) do not only target cancer cells

Tyrosine Kinase Inhibitors:

- improved antitumor efficacy and have fewer toxic side-effects, compared to traditional chemotherapy,
- have been **associated with (severe) cardiotoxicities.**
- presence of identical molecular pathways in cardiomyocytes



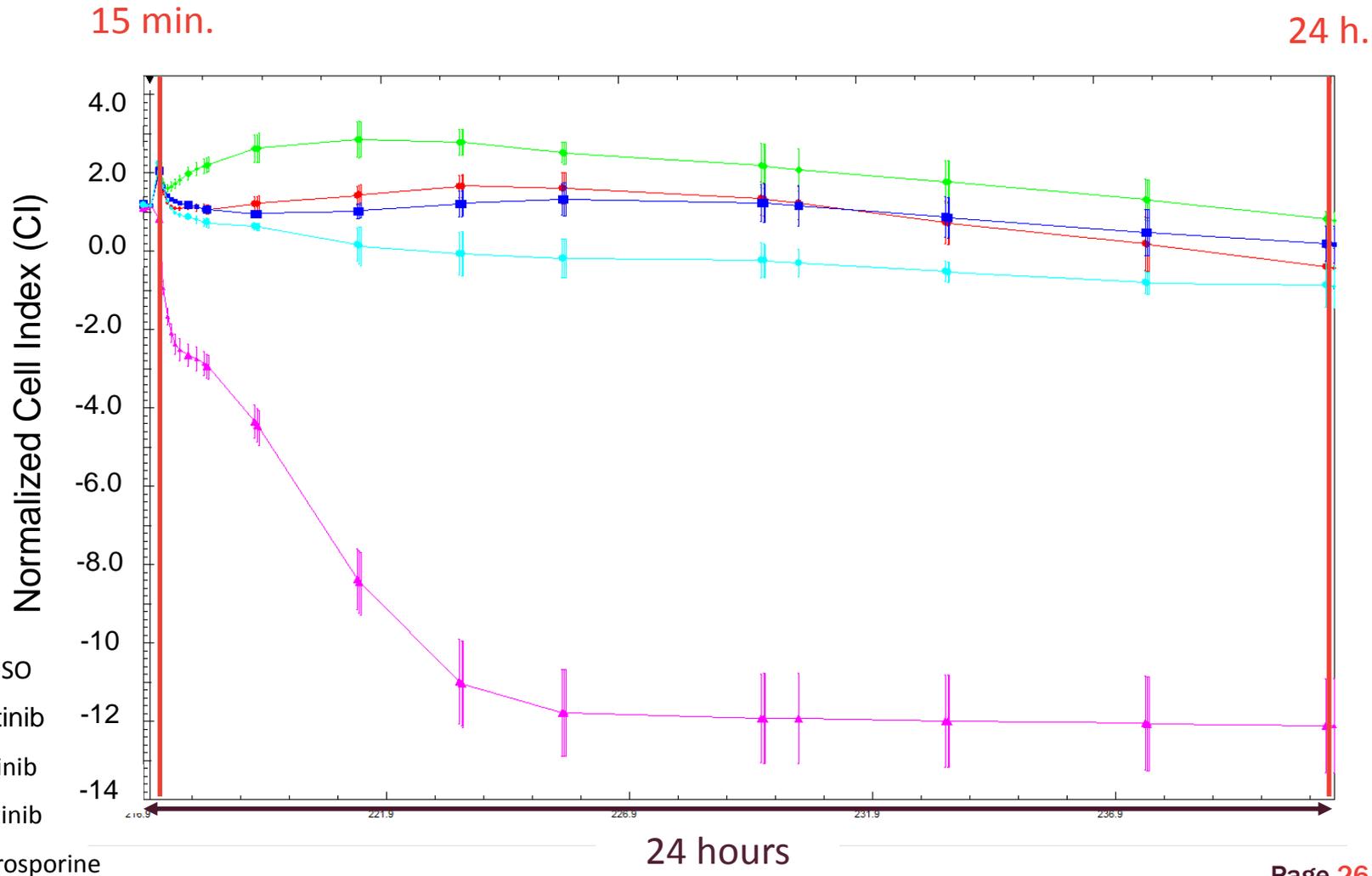
1. TKI-induced alterations in calcium transients of Pluricyte[®] Cardiomyocytes



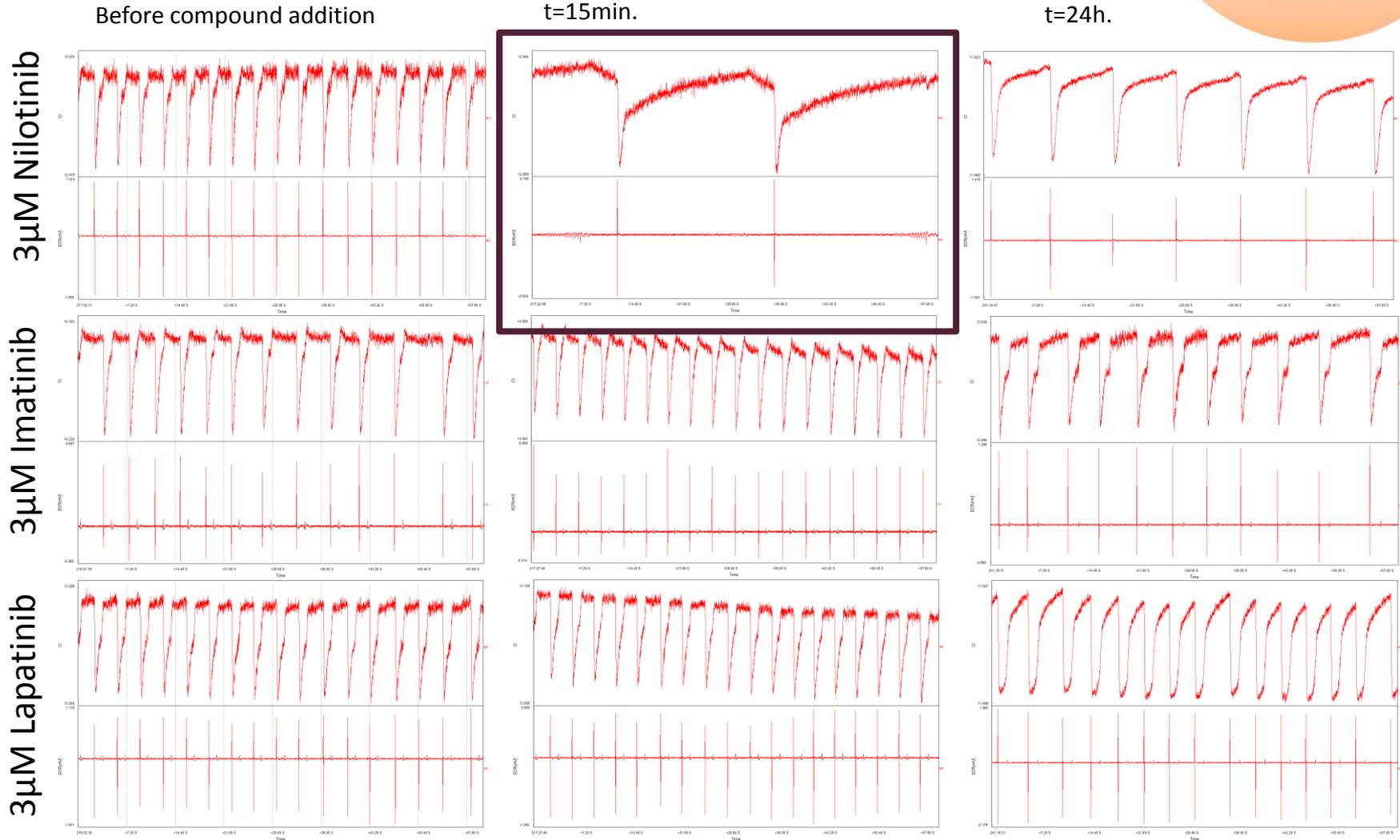
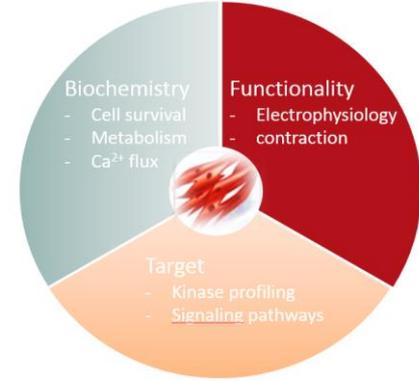
Nilotinib has an hERG IC50 of 0.66 µM

Data recorded with Hamamatsu Photonics FDSS/µCell directly after compound addition

2. Further analysis of TKI effects using CardioECR MEA-based assays

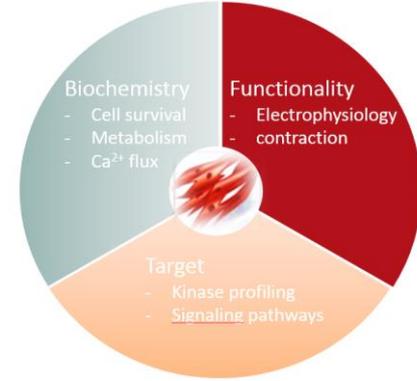


Nilotinib shows arrhythmic like-events in electrophysiology of hiPSC-cardiomyocytes

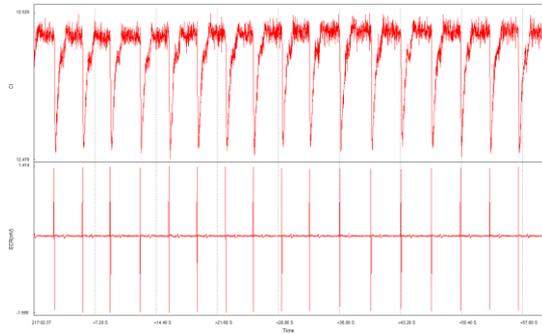


Not shown: Staurosporine (cells irreversibly stopped beating directly after compound addition)

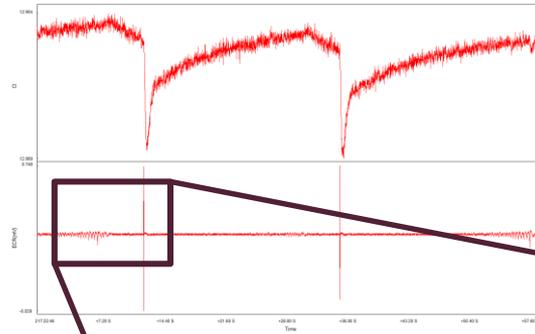
Nilotinib at different time points



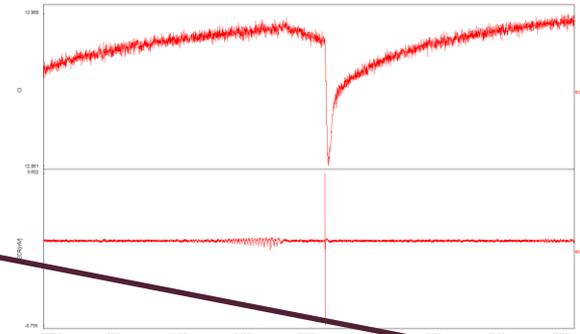
Before compound addition



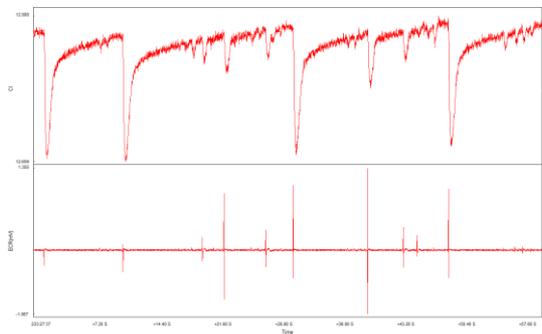
t=15min.



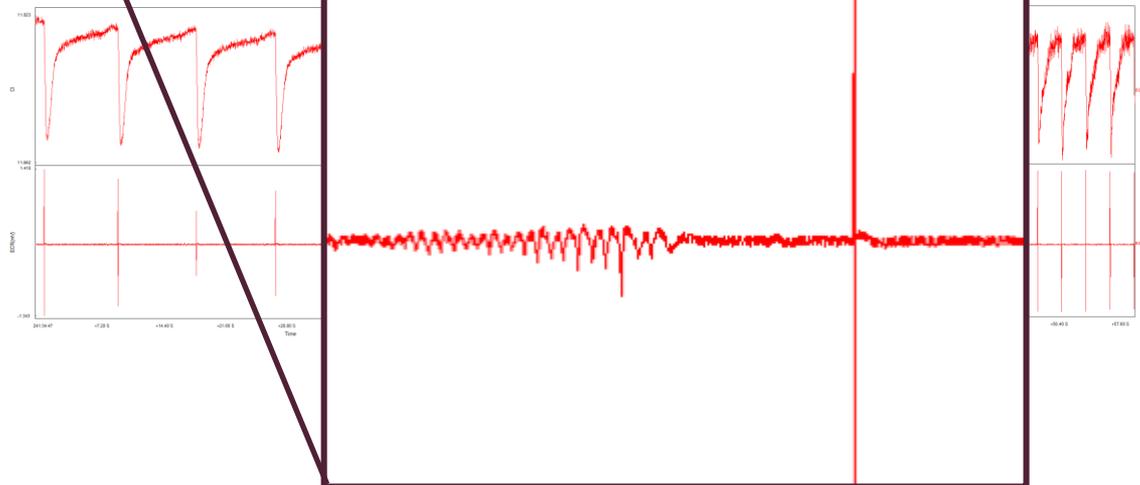
t=20min.



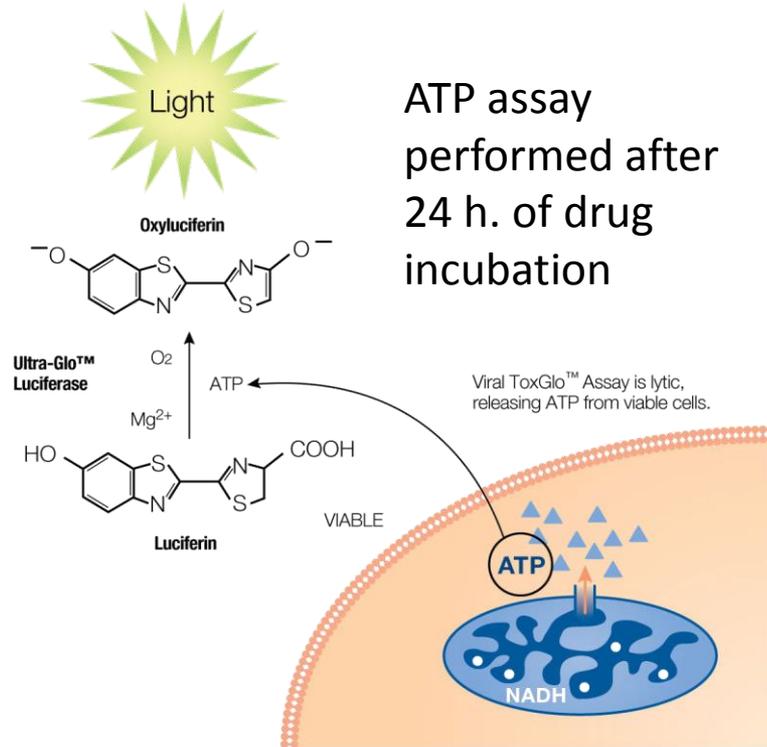
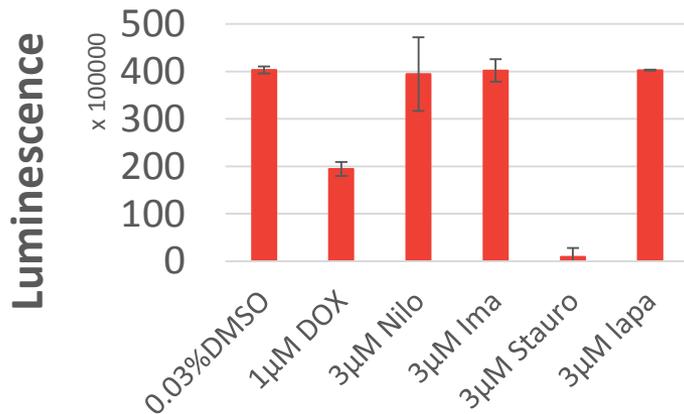
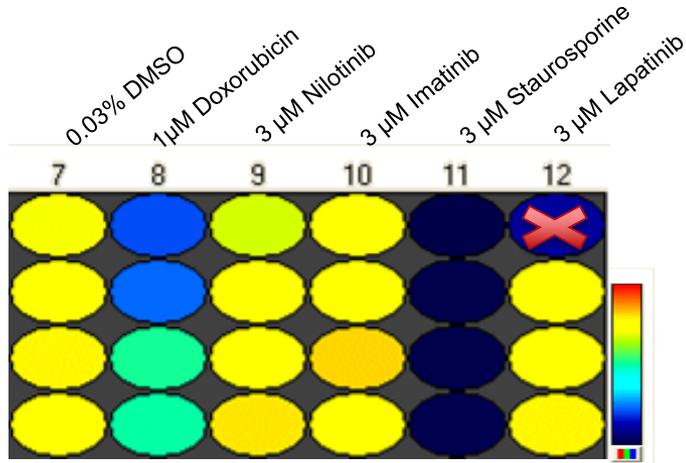
t = 16h.



t=24h.



3. Other parameters: ATP assays to study effects of tyrosine kinase inhibitors



Summary

- **Pluricyte[®] Cardiomyocytes combined with the Hamamatsu Photonics FDSS/ μ Cell system provide a very useful assay platform for screening of cardioactive effects at an early stage in drug development.**
- **Combination of high-throughput dye-based assays with medium throughput MEA based assays to further assess cardioactive effects provides a complete overview of cardioactive effects of (candidate) drugs on hiPSC-derived cardiomyocytes and will help to predict potential cardiotoxicities.**
- **Further development of high-throughput multiparametric assays to study safety (and efficacy) of cardioactive compounds will contribute to:**
 - **More efficient, and therefore cost- and time-effective, decision making early in drug discovery & development**
 - **Reduction of animal experiments**



Acknowledgements

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Fleur Stevenhagen
Tessa de Korte
Sabine den Hartogh
Arie Reijerkerk
Stefan Braam

Coming soon: application note for
assessing Ca^{2+} flux in Pluricyte[®]
Cardiomyocytes using the
FDSS/ μ Cell system!

CONTACT:

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