

综述

牙源性干细胞来源外泌体在骨修复再生中应用的研究进展

王思拓^{1,2}, 时 权², 刘紫微^{1,2}, 徐 娟²¹解放军医学院, 北京 100853; ²解放军总医院第一医学中心 口腔科, 北京 100853

摘要: 外泌体是具有磷脂双分子层膜结构的细胞外囊泡, 包含核酸、脂质和蛋白质等内容物。作为“无细胞治疗”手段, 外泌体具有广阔的医学应用前景。牙源性干细胞来源外泌体因在组织工程和再生医学领域表现出的生物学特性而受到越来越多的关注。本文将聚焦牙源性干细胞来源外泌体在骨修复再生中的研究进展, 为外泌体的研究和临床应用提供新的思路 and 方向。

关键词: 外泌体; 无细胞治疗; 牙源性干细胞; 组织工程; 骨修复

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Research advances in role of exosomes from dental stem cells in bone regenerationWANG Situo^{1,2}, SHI Quan², LIU Ziwei^{1,2}, XU Juan²¹Chinese PLA Medical School, Beijing 100853, China; ²Department of Stomatology, the First Medical Center, Chinese PLA General Hospital, Beijing 100853, China

Corresponding author: XU Juan. Email: newxj@hotmail.com

Abstract: Exosome is a kind of extracellular vesicles with phospholipid bilayer membrane structure, which contains nucleic acid, lipid and protein content. As a means of "cell-free therapy", exosome has broad prospects for medical applications. Exosomes from dental stem cells have received increasing attention due to their biological characteristics in the fields of tissue engineering and regenerative medicine. This article focuses on the research advances in exosome from dental stem cells in bone regeneration, hoping to provide new ideas and directions for the research and clinical application of exosome.

Keywords: exosome; cell-free therapy; dental stem cells; tissue engineering; bone regeneration

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牙源性干细胞是来源于牙齿组织的间充质干细胞, 起源于头颅神经嵴细胞, 在组织工程领域引起了越来越多的关注。目前已分离并鉴定出了多种牙源性干细胞, 如括牙髓干细胞 (dental pulp stem cells, DPSCs)、根尖乳头干细胞 (stem cells from apical papilla, SCAPs)、脱落乳牙干细胞 (stem cells from human exfoliated deciduous teeth, SHEDs)、牙周膜干细胞 (periodontal ligament stem cells, PDLSCs)、牙囊前体细胞 (dental follicle progenitor cells, DFPCs)、牙龈间充质干细胞 (gingival

mesenchymal stem cells, GMSCs)、牙胚干细胞 (tooth germ stem cells, TGSCs) 和牙槽骨骨髓间充质干细胞 (alveolar bone marrow mesenchymal stem cells, ABMSCs)。与其他组织来源的干细胞相比, 牙源性干细胞具有许多生物学特性。相比于骨髓间充质干细胞 (bone marrow mesenchymal stem cells, BMSCs), GMSCs 具有更快的体外增殖速度, 且表现出更强的成骨能力^[1]。此外, ABMSCs 的成骨能力优于长骨骨髓间充质干细胞^[2]。然而, 干细胞疗法具有突变致瘤, 免疫排斥和伦理限制等局限性^[3]。最近的研究表明干细胞疗法的有效性很大程度上得益于其旁分泌效应, 作为旁分泌效应的重要媒介, 外泌体是细胞主动向胞外分泌的一种直径为 30 ~ 150 nm 的囊泡样小体, 具有磷脂双分子层结构并含有 RNA (miRNA 和 lncRNA 等)、DNA、脂质和蛋白质等多种内容物, 最早在网织红细胞中被发现, 并在 1987 年被

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作者简介: 王思拓, 男, 在读硕士。研究方向: 骨组织工程。Email: wangstjz@163.com

通信作者: 徐娟, 女, 博士, 主任医师, 教授。Email: newxj@hotmail.com

命名为“Exosome”^[4]。

外泌体可由多种细胞(如树突状细胞、干细胞、上皮细胞、肿瘤细胞等)在生理或病理状态下分泌,广泛存在于血液、尿液、唾液、腹腔积液和胆汁等体液中^[5]。外泌体主要通过配体/受体识别、膜融合或吞噬等方式进入靶细胞,并将其携带的内容物直接释放到靶细胞的胞质中,通过激活相关信号通路影响靶细胞的微环境和相应生物学功能,发挥细胞间通讯的作用^[5-6]。研究表明,外泌体与其供体细胞有着相似的生物学效应^[5]。因此,来自不同细胞类型或不同细胞状态的外泌体,可能具有不同的生物学功能。

骨修复再生是一个复杂的过程,包括组织再生、血管生成和免疫调节等过程,其不仅涉及骨髓干细胞、成骨细胞、破骨细胞、骨前体细胞等骨相关细胞,免疫细胞、血管内皮细胞等其他系统细胞在骨修复再生中也发挥着重要作用^[7]。外泌体作为细胞间通讯的重要媒介物质,能够通过影响多种细胞的功能来参与骨修复再生过程。近年来人们从多种牙源性干细胞中分离提取外泌体并研究其相应的生物学效应。牙源性干细胞来源外泌体在组织修复再生、免疫调节和生物学发育等过程中发挥重要作用^[8]。本文将对牙源性干细胞来源外泌体应用于骨修复再生中的研究进展做一阐述。

1 DPSCs 来源外泌体与骨修复

DPSCs是最先被发现的牙源性干细胞^[9],由外胚层神经嵴发育而来。因此,DPSCs来源外泌体(DPSCs-derived exosomes, DPSCs-Exos)与骨髓再生^[10]、神经退行性疾病^[11]等神经再生过程密切相关。同时,DPSCs-Exos在骨组织工程领域也展现出较好的骨修复效果。Swanson等^[12]将PLGA-PEG共聚物微球材料作为载体包裹DPSCs-Exos构建外泌体缓释体系,将控释DPSCs-Exos的微球材料植入小鼠颅骨缺损模型中进行骨修复,8周后发现颅骨缺损修复效果显著。该研究还表明DPSCs-Exos可以促进BMSCs的成骨分化,且DPSCs-Exos与骨髓间充质干细胞来源外泌体对BMSCs的体外成骨效果相似^[12]。

Xie等^[13]对经成骨诱导不同时间的DPSCs来源外泌体进行circRNA转录组测序,发现经成骨诱导的DPSC-Exos中环状溶血磷脂酸受体1(circLPA1)表达量增加,增加程度与供体细胞成骨分化程度一致。该研究同时发现,circLPA1可通过与hsa-miR-31结合而消除hsa-miR-31对DPSCs的成骨抑制作用,从而促进受体同型DPSCs

的成骨分化^[13]。

miRNA在DPSCs-Exos促进骨形成中发挥重要作用。DPSC-Exo携带的miR-1246可以促进巨噬细胞从促炎表型转化为抗炎表型,并有效减轻了牙周炎小鼠的牙槽骨吸收和炎症反应^[14]。与未经表面修饰的DPSCs-Exos相比,miR-140-5p修饰的DPSCs-Exos抑制了IL-1 β 诱导的软骨细胞凋亡,并减轻了大鼠骨关节炎的炎症反应^[15]。

2 PDLSCs 来源外泌体与骨修复

牙周膜干细胞已被证实为外泌体的可靠来源细胞^[16]。体外研究表明,PDLSCs来源外泌体(PDLSCs-derived exosomes, PDLSCs-Exos)具有促进血管生成^[17]、调节成骨细胞活性^[18]、免疫调节^[19-20]和抗炎^[21]等作用,TGF- β 、MAPK、mTOR、FoxO信号通路^[22]、PI3K/Akt^[23]和NF- κ B信号通路^[24]在其中扮演重要角色。Liu等^[25]研究发现,PDLSCs-Exos具有促进大鼠BMSCs成骨分化的作用,且经成骨诱导后的PDLSCs-Exos对大鼠BMSCs的促成骨作用明显增强。PDLSCs-Exos在骨修复再生中的积极作用在体内实验中也得到了同样的结果。Pizzicannella等^[26]通过构建大鼠颅骨缺损模型,将负载聚乙烯亚胺(polyethyleneimine, PEI)工程化PDLSCs-Exos的3D胶原膜材料置入缺损部位,6周后发现颅骨缺损区域骨修复效果明显,且骨形成与血管生成增加密切相关。

在PDLSCs-Exos的成骨机制方面,通过RNA测序技术分析不同状态的细胞来源外泌体中差异表达的miRNA,发现与未经成骨诱导的PDLSCs-Exos相比,经成骨诱导的PDLSCs-Exos中72个miRNA上调,35个miRNA下调,其中miR-122-5p、miR-25-3p和miR-142-5p等成骨相关miRNA在经成骨诱导的PDLSCs-Exos中高表达^[25]。PDLSCs-Exos携带的miRNA可以通过靶向调控成骨相关信号通路的靶基因影响细胞的成骨分化过程^[25]。另有研究表明,与未经成骨诱导的PDLSCs-Exos相比,经成骨诱导5d和7d的PDLSCs-Exos中3个circRNA和2个lncRNA上调,39个circRNAs和5个lncRNAs下调,且这种上调或下调趋势呈时间依赖性^[22]。

3 GMSCs 来源外泌体与骨修复

由于GMSCs的生物学特性,GMSCs来源外泌体(GMSCs-derived exosomes, GMSCs-Exos)的生物学功能也被逐渐关注。多项研究表明,GMSCs-Exos在组织修复与再生中具有重要的作用^[27-28]。GMSCs-Exos可以增强成骨细胞的迁移和

成骨分化^[29]。Diomede 等^[30]将 GMSCs-Exos 与 PLA 材料结合并置入大鼠颅骨缺损中,发现 GMSCs-Exos 能够有效促进骨缺损区域的骨再生及血管再生。同时,PEI 工程化 GMSCs-Exos 的骨修复和血管再生效果更好,GO 分析结果显示 PEI 工程化 GMSCs-Exos 上调了 19 个成骨相关基因的表达^[30]。骨代谢主要依靠成骨与破骨的相互平衡,以达到修复骨缺损的目的。GMSCs-Exos 在促进成骨的同时,还具有抑制破骨的特性^[31]。Nakao 等^[31]通过结扎诱导构建小鼠牙周炎模型并向炎症区域局部注射 GMSCs-Exos 或 TNF- α 预处理的 GMSCs-Exos(GMSCs-Exos-TNF) 1 周后,与注射 PBS 的对照组相比,GMSCs-Exos 组和 GMSCs-Exos-TNF 组中破骨细胞数量和牙槽骨吸收程度均降低,其中 GMSCs-Exos-TNF 组抑制破骨效果更明显。

4 其他牙源性干细胞来源外泌体与骨修复

除上述 3 种牙源性干细胞来源外泌体,SHEDs 来源外泌体 (SHED-derived exosomes, SHED-Exos)、根间乳头干细胞来源外泌体 (SCAPs-derived exosomes, SCAPs-Exos)、DFPCs 来源外泌体 (DFPCs-derived exosomes, DFPCs-Exos) 在骨缺损修复中也表现出潜在的治疗效果。多项研究表明,SHED/SCAPs/DFPCs-Exos 在血管生成^[32-33]、炎症调节^[34]、成骨再生^[33,35-36]中发挥积极作用。体外研究表明,SHED-Exos 可以促进 BMSCs 的成骨分化并抑制其脂质生成^[35],也可通过 Wnt/ β -catenin 和 BMP/Smad 信号通路促进 PDLSCs 的成骨分化^[36]。已有多项体内实验验证了 SHED-Exos 在抗炎和骨缺损修复中的作用^[33-35]。Wei 等^[35]在结扎诱导的牙周炎小鼠模型中以每周 1 次的频率局部注射 SHED-Exos 并持续 2 周后发现,与对照组相比,SHED-Exos 组牙槽骨吸收程度减轻,骨高度增加。此外,Wu 等^[33]在大鼠下颌第一磨牙至第三磨牙颊侧牙槽骨处制备 4 mm \times 2 mm \times 1.5 mm 的牙槽骨缺损并将负载 SHED-Exos 的 β -TCP 材料填塞到缺损部位 4 周后发现,与空白缺损组和 β -TCP 支架组相比,含有 SHED-Exos 的支架组新生血管形成和新骨形成明显增加。另有研究表明,SHED-Exos 可通过 miR-100-5p/mTOR 信号通路增强颞下颌关节炎软骨细胞的抗炎能力,这为颞下颌关节炎的治疗提供了新的思路^[34]。Shi 等^[37]研究发现,DFPCs-Exos 可减少牙周炎大鼠模型中牙槽骨的吸收和破骨细胞的数量,LPS 预处理的 DFPCs-Exos 抑制破骨效果更显著。

在分子机制层面,piRNA 表达谱可能影响外

泌体的生物学功能。Wang 等^[38]从 SHED-Exos 和 BMSCs-Exos 中分别鉴定出 593 个和 920 个已知的 piRNA,发现 21 个 piRNA 在两种外泌体中有差异表达,其中 15 个 piRNA 在 SCAPs-Exos 中上调、6 个 piRNA 在 SCAPs-Exos 中下调。SHED-Exos 中高表达的 piRNA 主要与细胞代谢、细胞增殖和分化、牙齿发育和骨组织形成相关信号通路有关,这为进一步研究牙源性干细胞来源外泌体的骨修复机制提供了新的方向^[38]。

5 结语

干细胞来源外泌体具有广阔的应用前景,其相比于直接应用于干细胞治疗,具有以下潜在优势:1) 免疫原性低;2) 外泌体治疗可以有效避免与直接应用于干细胞治疗相关的安全性问题,并且易于制备和运输;3) 外泌体作为纳米颗粒,可以穿过多种屏障(如血-脑脊液屏障、毛细血管等),且可以直接被靶细胞摄取并作用于靶细胞,作用效率更高^[39]。目前,牙源性干细胞来源外泌体的研究仍处早期阶段,针对其在骨修复再生中的研究相对较少,且停留在细胞分子、动物实验等基础研究阶段。有限的动物实验多采用口腔颌面部骨缺损或疾病模型,如颅骨缺损^[12,26,30]、牙槽骨缺损^[33]、结扎诱导的牙周炎^[14,17,21,31,35]模型,关于其在机体其他部位骨缺损和骨疾病模型中的应用研究鲜有报道。此外,牙源性干细胞来源外泌体的成骨方面具体机制尚不明确,许多具体应用问题亟待解决,还有许多新的领域需要我们发现和探索。

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