

# VI CONGRESSO INFERMIERISTICO LA MALATTIA CARDIACA: ... E DOPO ?

«Medicina rigenerativa: le  
prospettive future per il  
cuore malato ... e non  
solo !»

16 Aprile 2016

**Tiziano Moccetti**

*Direttore medico e primario di Cardiologia  
Fondazione Cardiocentro Ticino*



Associated Institute  
of the University of Zurich



**University of  
Zurich**  
UZH

  
**CARDIOCENTRO TICINO**

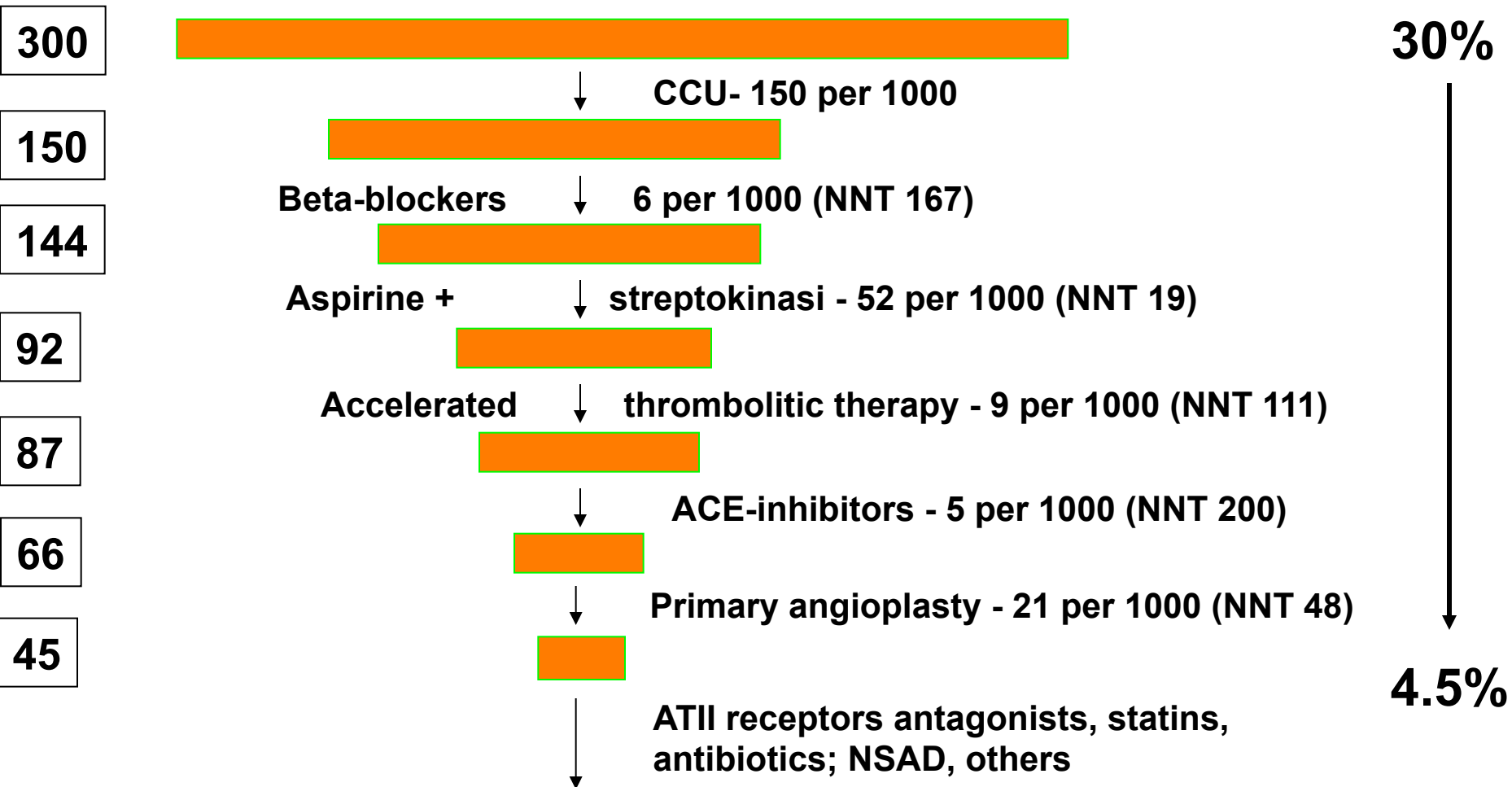
# Areas of research

Imaging	Invasive Cardiology	Electrophysiology and heart failure	Clinical research	UTC Cell therapy
Cardiac CT	PCI	Cardiac implantable electronic devices	AMI	Clinical trials
Echocardiography	Percutaneous Valve	Ablation	Stents	Clean Room
Cardiac MRI	Primary PCI	Heart failure	Heart failure	Basic cellular research
			Stem Cells	
			CIEDs	
			Pharmacology (SRC)	



# Acute myocardial infarction: a theoretic scenario

## In-hospital-deaths *each 1000 patients*



# ? STEM-CELLS THERAPY ?

# Cellule staminali: promessa e realtà



**Prometheus Attacked  
by Zeus's Eagle.**



## The NEW ENGLAND JOURNAL of MEDICINE

MEDICAL PROGRESS

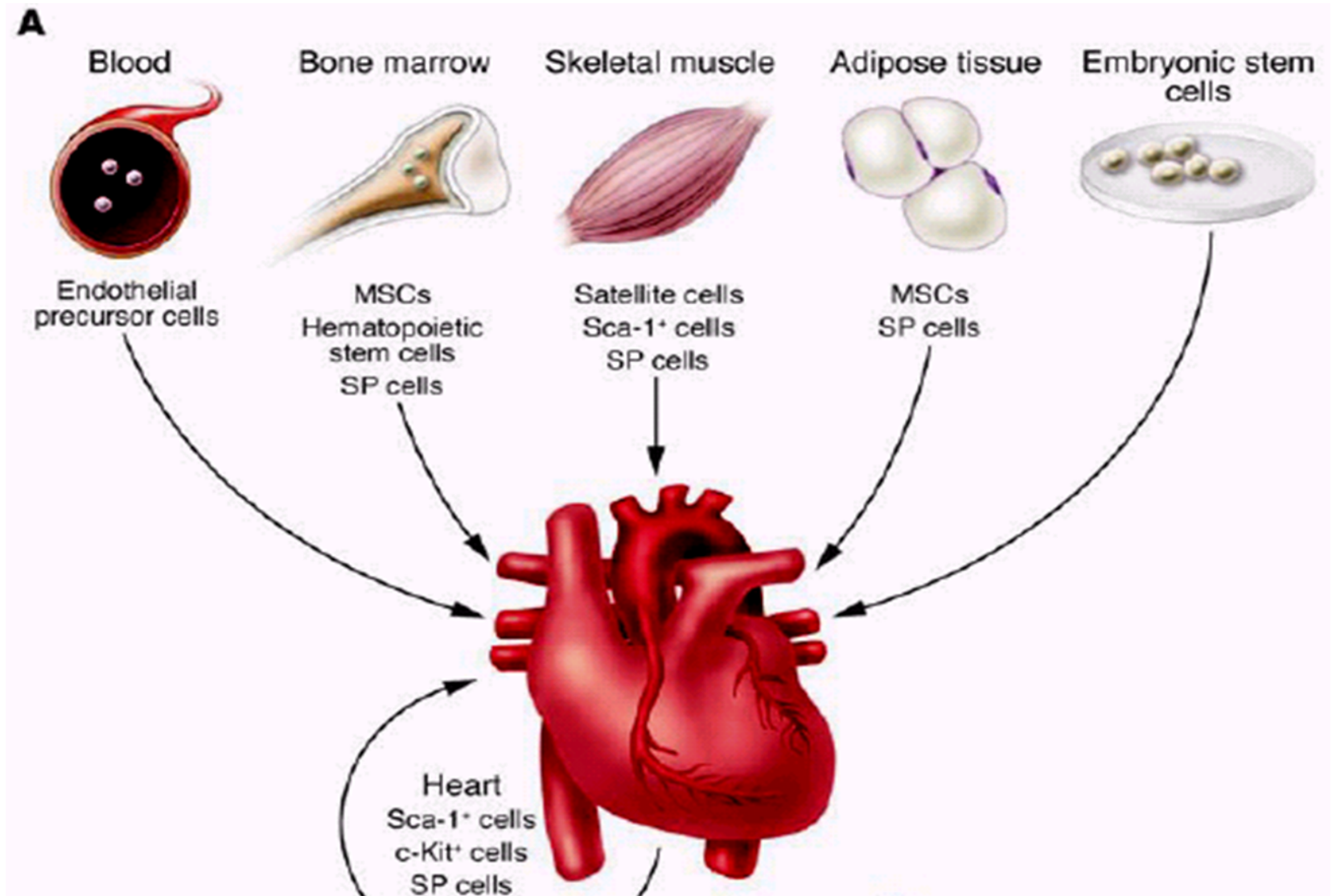
### Prometheus's Vulture and the Stem-Cell Promise

Nadia Rosenthal, Ph.D.

**W**HEN PROMETHEUS TRANSGRESSED THE LAW OF THE ANCIENT GODS and stole fire for humankind, to teach them civilization and the arts, his punishment was typically brutal. Jupiter had the great Titan chained to the side of Mount Caucasus, where a vulture preyed daily on his liver, which was renewed as quickly as it was devoured.

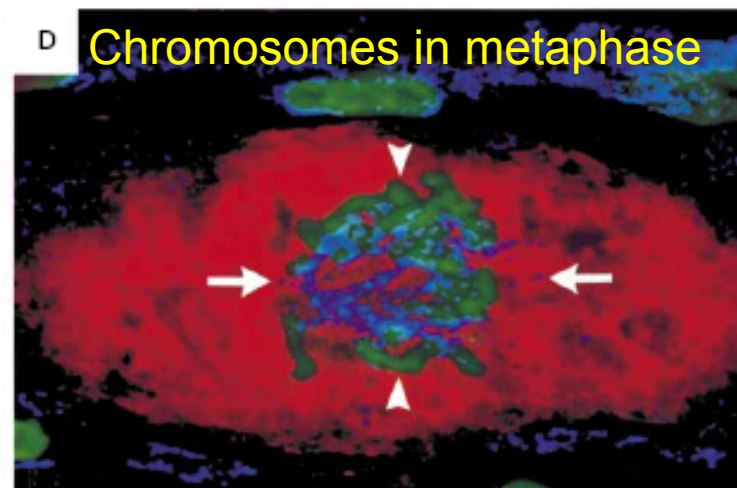
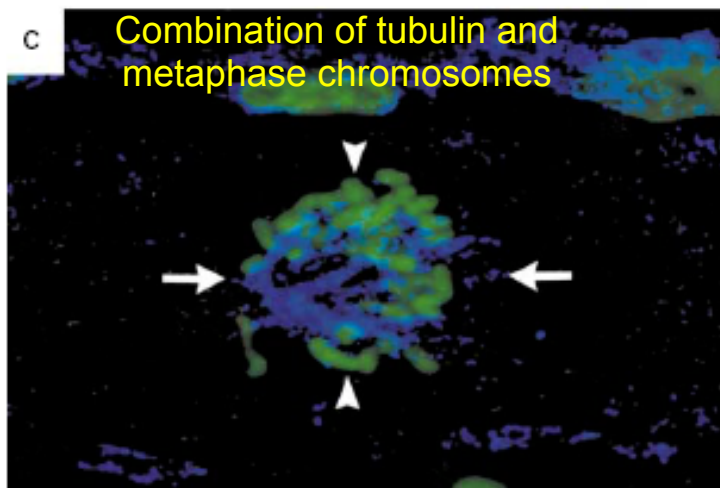
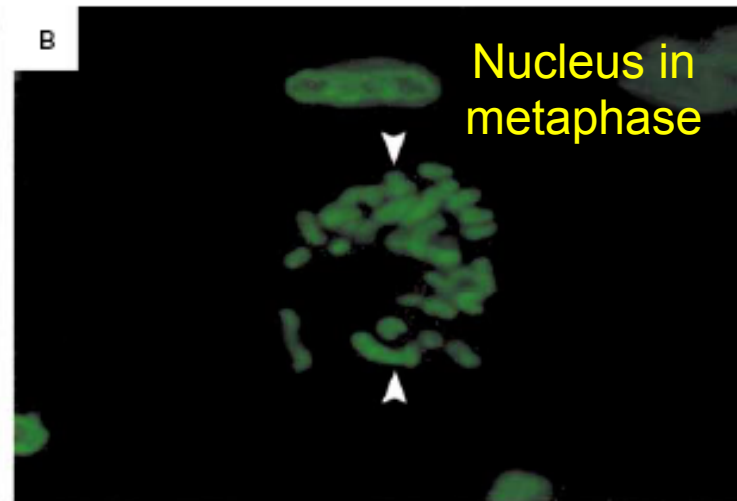
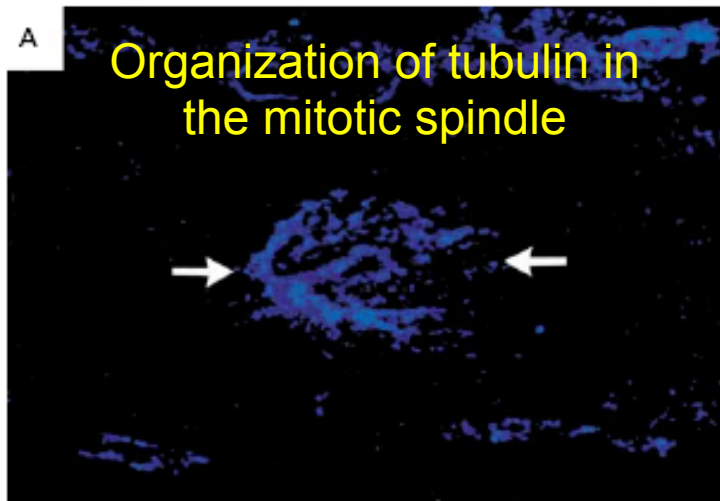
We mere mortals do not possess livers with quite so vigorous a regenerative capacity, but the legend captures well the remarkable potential of the body to rebuild itself. Throughout our lives we sustain less gruesome injuries from which we recover spontaneously, often without realizing we were hurt. Wound healing involves the recruitment and proliferation of cells capable of restoring tissues and even organs to their original form and function. These cells must retain a collective memory of the complex developmental process by which the tissue was first constructed. Fortunately for Prometheus, whose name means forethought, his liver was well prepared for its daily renewal, since it is one of the most highly regenerative organs of the human body.

# Sources of progenitor cells for cardiac regeneration in acute myocardial infarction

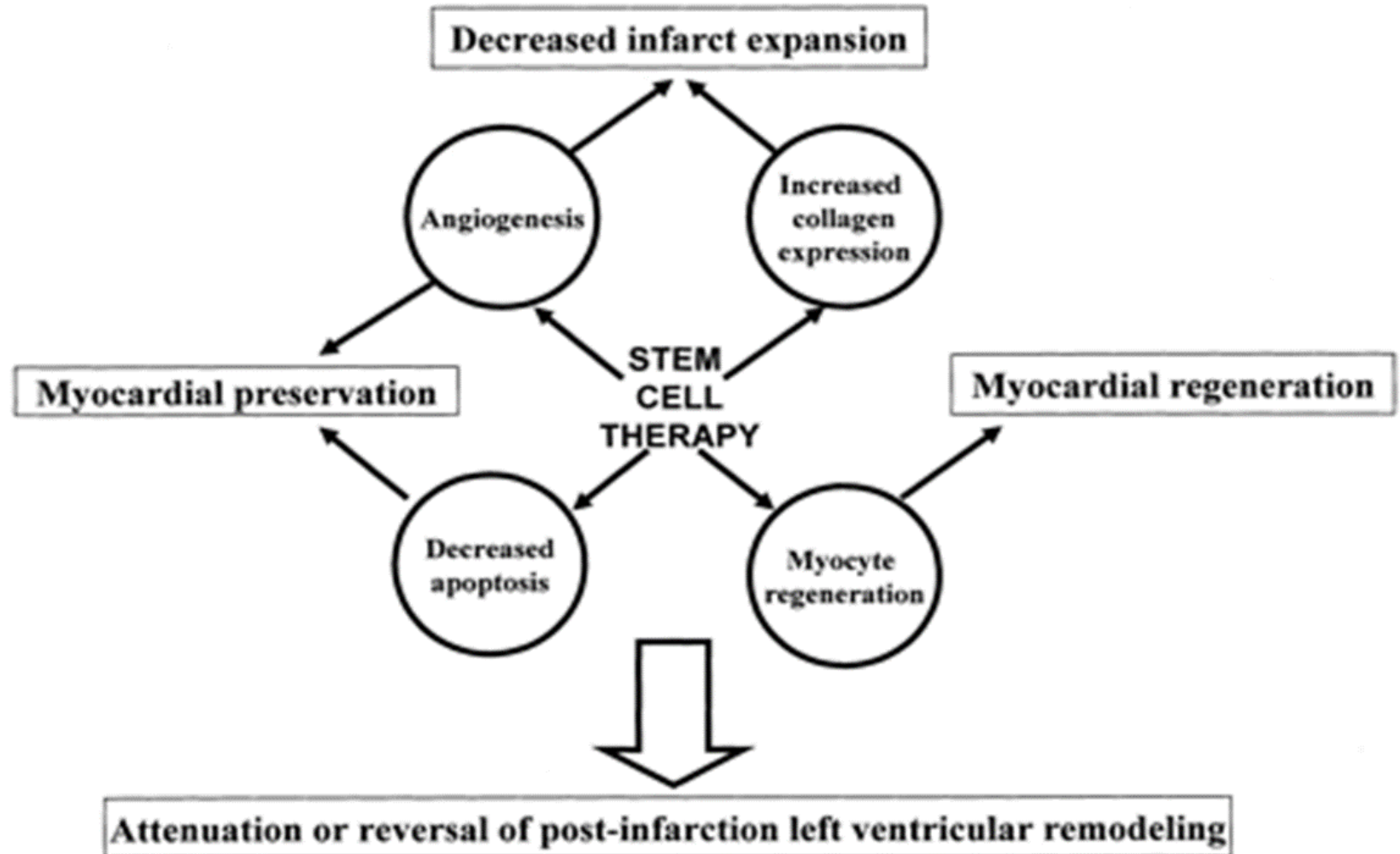


## EVIDENCE THAT HUMAN CARDIAC MYOCYTES DIVIDE AFTER MYOCARDIAL INFARCTION

ANTONIO P. BELTRAMI, M.D., KONRAD URBANEK, M.D., JAN KAJSTURA, PH.D., SHAO-MIN YAN, M.D.,  
NICOLETTA FINATO, M.D., ROSSANA BUSSANI, M.D., BERNARDO NADAL-GINARD, M.D., PH.D., FURIO SILVESTRI, M.D.,  
ANNAROSA LERI, M.D., C. ALBERTO BELTRAMI, M.D., AND PIERO ANVERSA, M.D.



# Potential beneficial mechanisms of stem cell therapy after myocardial infarction



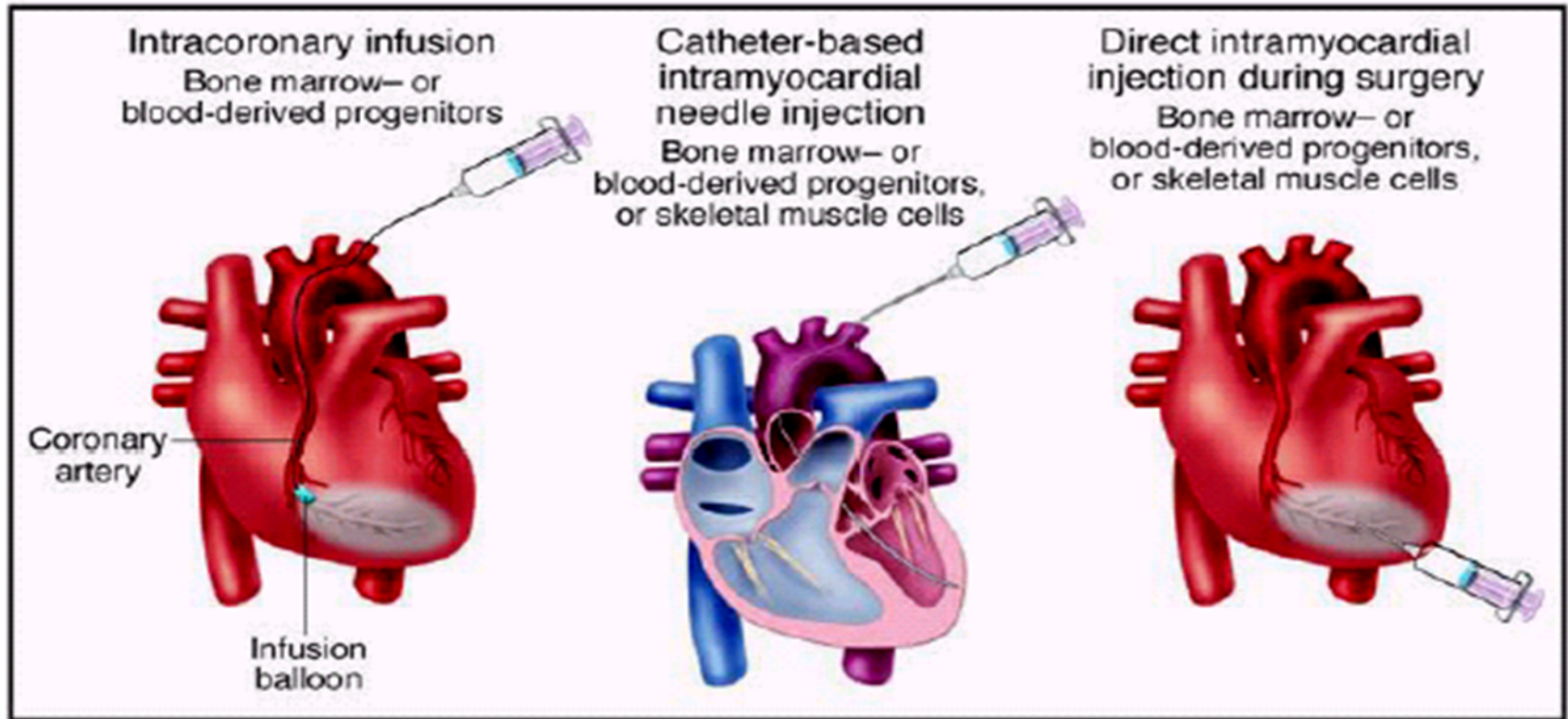


# Cardiac repair: Homing

1. Number of cells: CD 34+, CD 133
2. Colony formation
3. Signal
4. Adhesion/Migration
5. Invasion
6. Differentiation

**Migration and invasion of tissue are necessary for integration**

# Injection methods



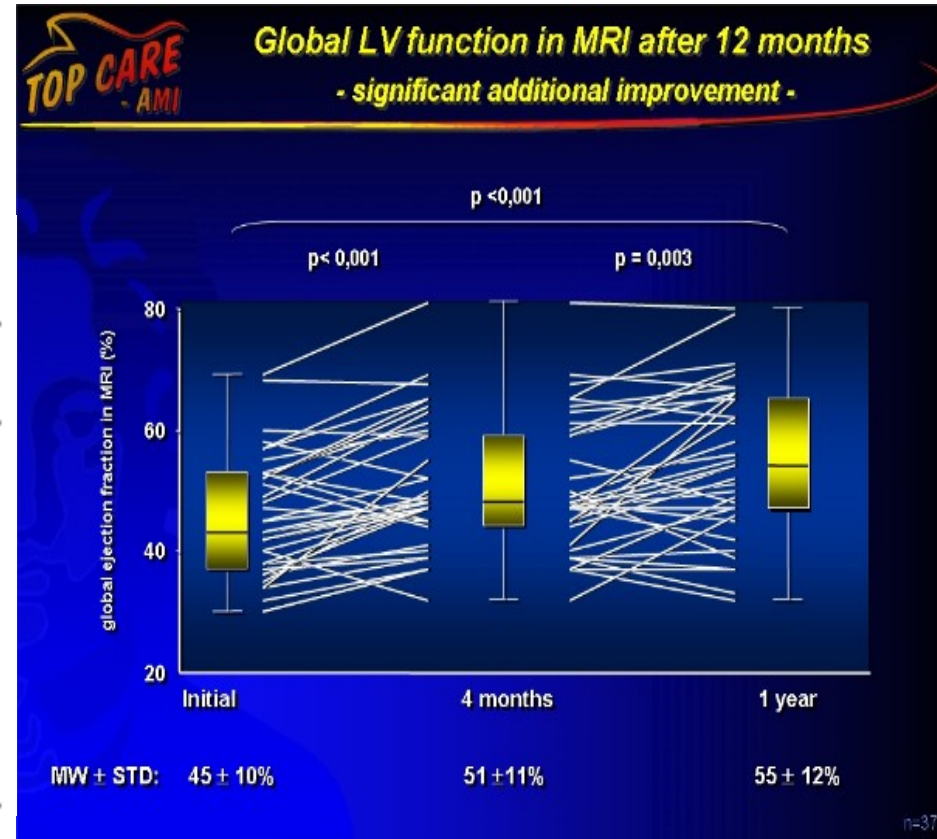


# TOPCARE-AMI

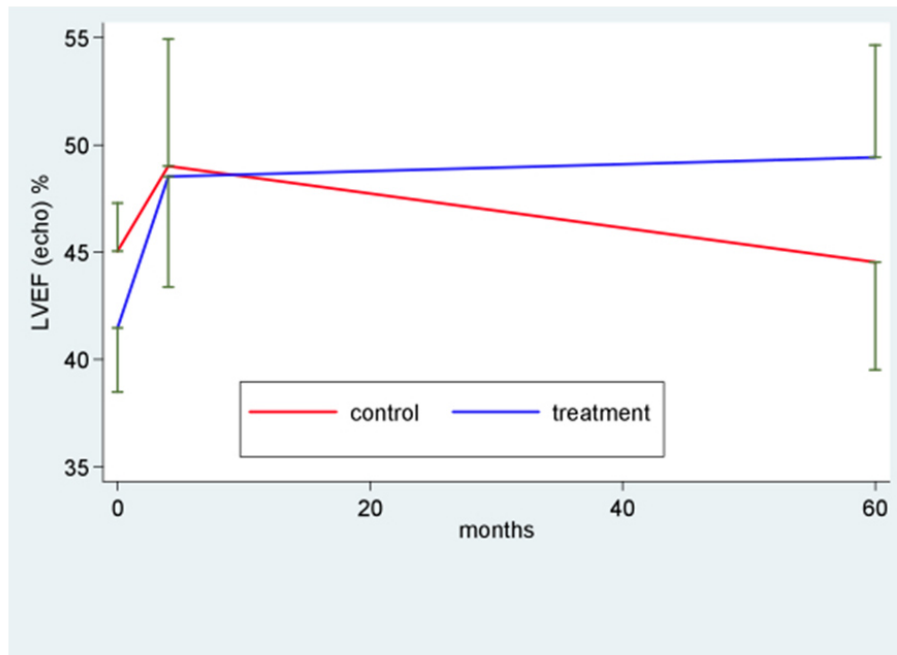
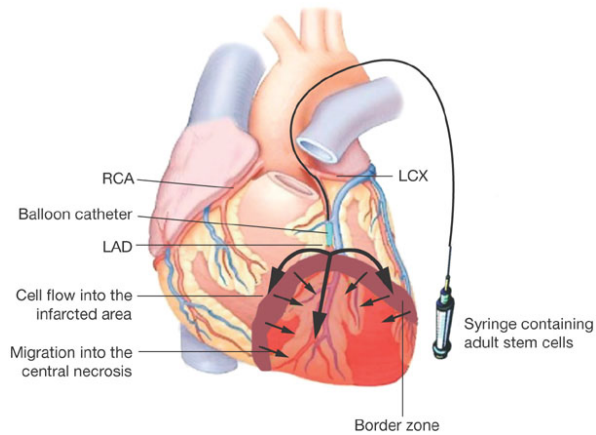


**TABLE 2. LV Function Assessed by Analysis of LV Angiography in the Cell Therapy Group**

	Baseline (n=19)	Follow-Up (n=19)	P
Ejection fraction, %	51.6±9.6	60.1±8.6	0.003
End-diastolic volume, mL	117.2±35.1	105.2±29.9	0.199
End-systolic volume, mL	56.1±20.0	42.2±15.1	0.011
Regional wall motion, SD/chord			
Infarct	-1.5±0.2	-0.5±0.7	<0.001
Infarct center	-1.5±0.5	-0.8±0.5	<0.001
Infarct border	-1.3±0.4	-0.4±0.6	<0.001



# FIRST SWISS CELL HEART THERAPY TRIAL

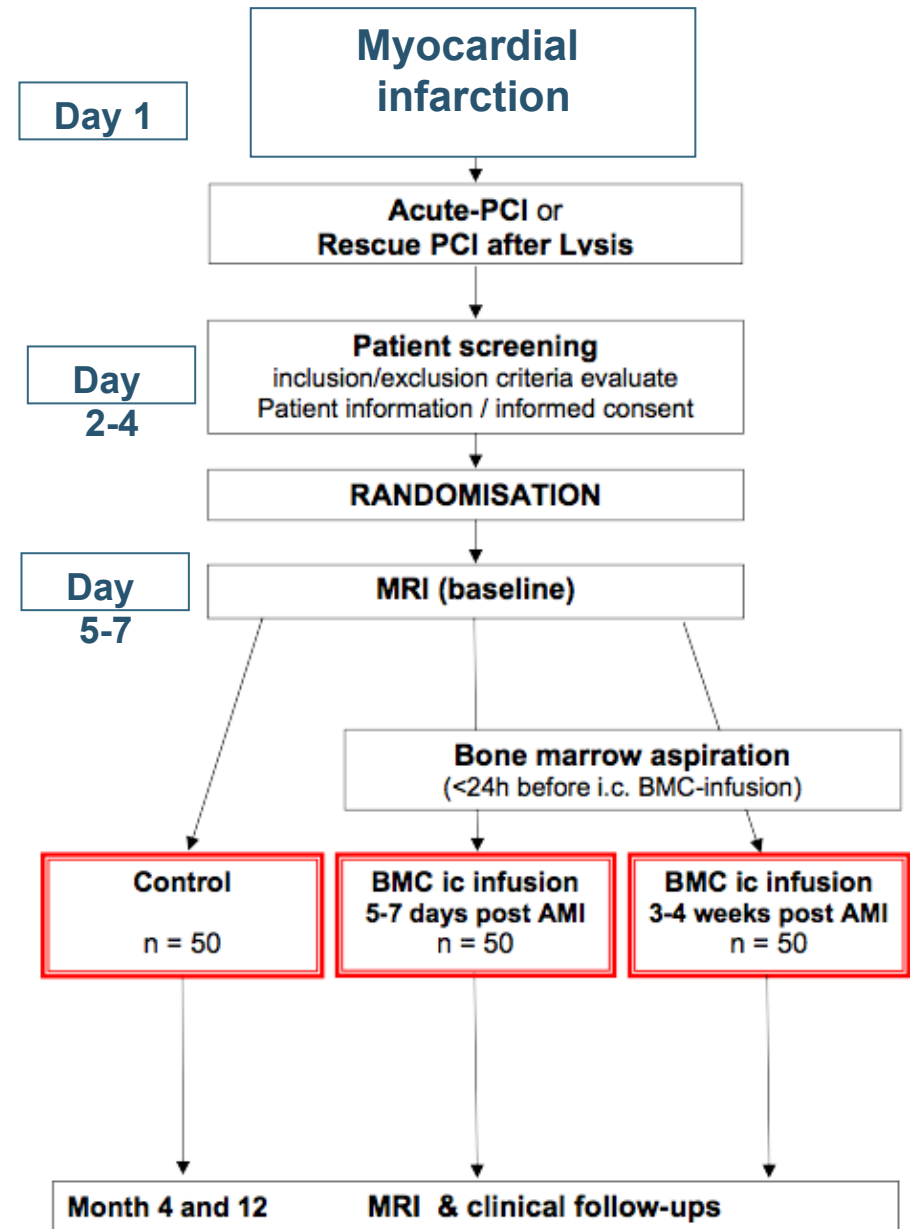
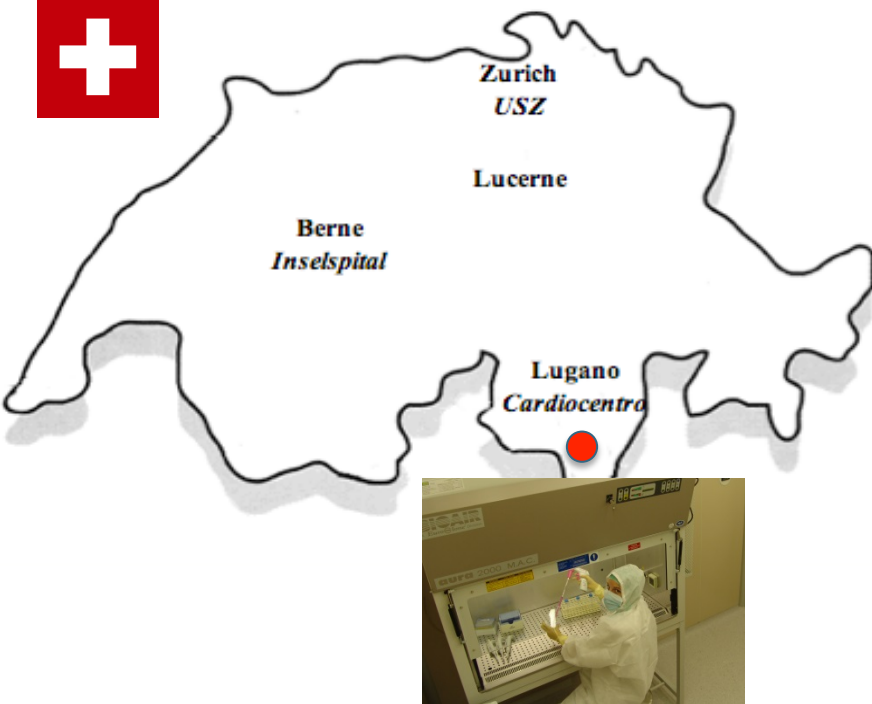
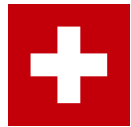


*n*= 23 treated  
*n*=19 controls



1st patient: August 24, 2004

# THE SWISS-AMI TRIAL



# History of “Cell Factory”

First Stem Cell Transplant  
in the heart at CCT  
(2004)

Beginning of SWISS-AMI trial  
(2006)

Set-up of Clean Room, QC lab. and  
quality system  
(2006-2008)

**Swissmedic Certification  
(2008)**

**Certification Extension  
(2012)**

GMP Laboratory = Cell Factory

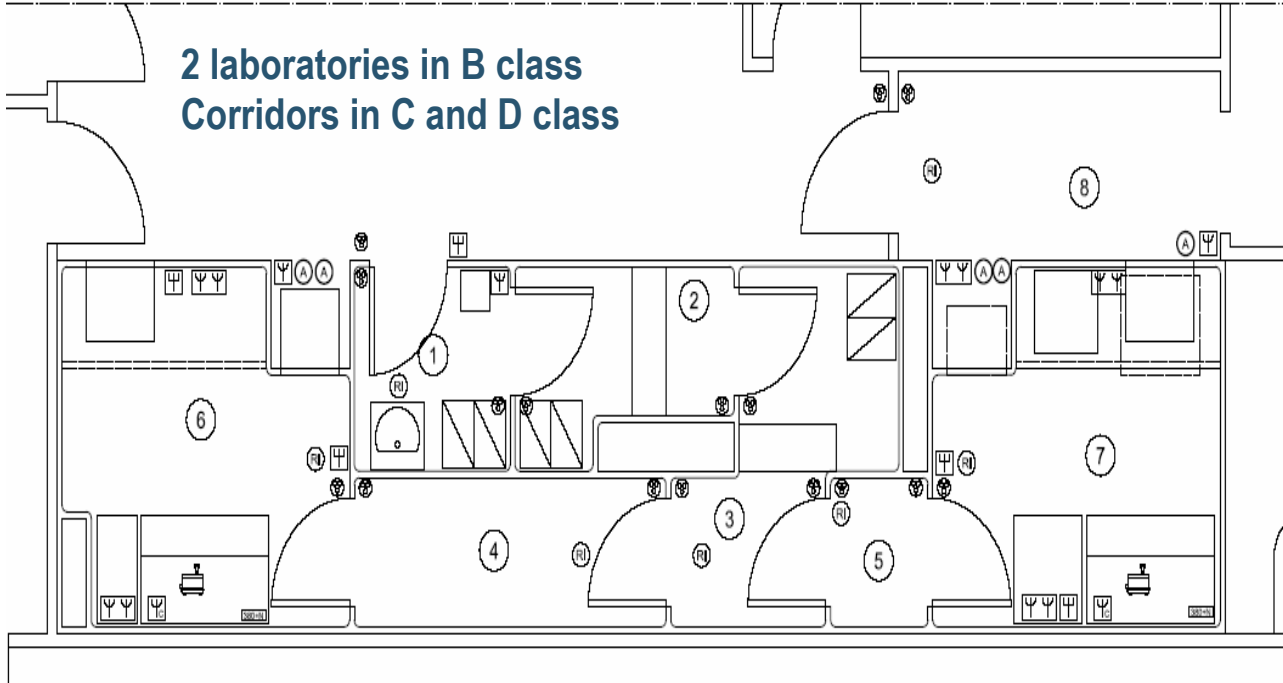
TISSUE ENGINEERING  
PRODUCTS  
AUTOLOGOUS and FRESH

CELL THERAPY PRODUCTS,  
ALLOGENEIC and FROZEN

# The Production Lab

= Clean room

2 laboratories in B class  
Corridors in C and D class



**Cell Separation** from several biological tissues  
(bone marrow, peripheral blood, adipose tissue)

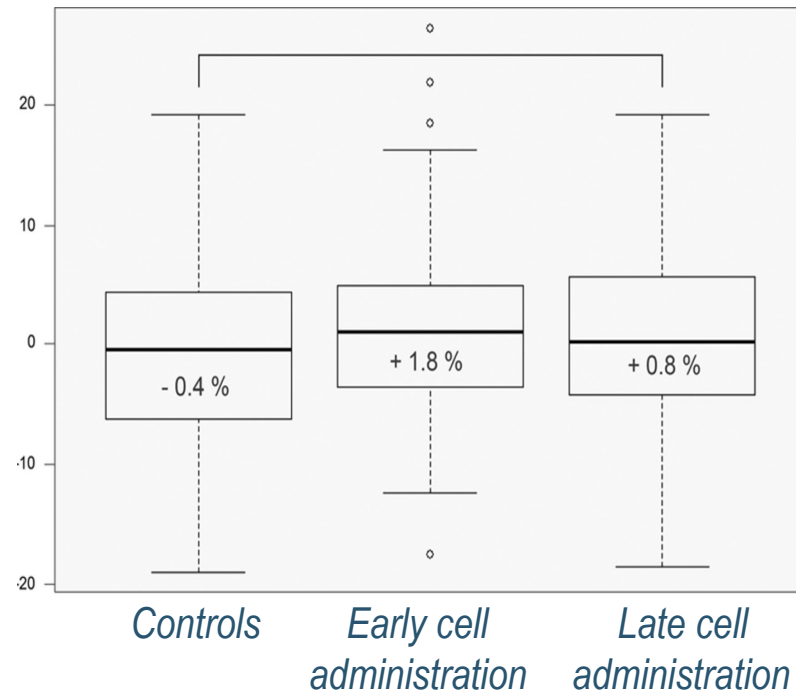
**Cell concentration**

**Cell Culture**



Operator in Clean Room

## *Changes in left ventricular ejection fraction at 4 months*





# A. Stem cells in the management of heart failure: What have we learned from clinical trials ?

## Review

Vogel, Hussein & Mousa

**Table 1. Outcome measures used in some clinical trials for stem cell therapy in acute myocardial infarction.**

Trial	Stem cell type	1-Year outcome measure	Ref.
Chen <i>et al.</i> (2004)	Mesenchymal	Improved LVEF at 6 months	[51]
BOOST	Autologous BM	Improved LVEF at 6 months	[52]
REPAIR-AMI	BM progenitor	LVEF change/LV angiography at 4 months	[53]
Sun <i>et al.</i> (2010)	Different types	Cardiac remodeling (meta-analysis)	[54]
Perin <i>et al.</i> (2012)	Autologous ADH	LV end-systolic volume + maximum oxygen consumption	[40]
CADUCEUS	CSC	Scar mass + viable heart mass + regional contractility + regional systolic wall thickening	[55]
SCIPIO	CSC	LVEF Scar mass + viable infarct size	[16]

ADH: Aldehyde dehydrogenase; BM: Bone marrow; CSC: Cardiac stem cell; LV: Left ventricular; LVEF: Left ventricular ejection fraction.



## B. Stem cells in the management of heart failure: What have we learned from clinical trials ?

SC & congestive heart failure

Review

**Table 2. Major and relevant clinical trials in patients with chronic ischemic heart failure.**

Trial/year	Delivery	Timing	1-Year endpoint	Ref.
MAGIC/2004	Transepical	>4 weeks	No change LVEF	[56]
Myoblast transplant/2005	Transendocardial	>10 years	Improved LVEF and viability	[57]
TOPCARE-CHD/2006	Intracoronary	81 ± 72 months	Improved LVEF	[58]
POSEIDON/2012	Transendocardial allogenic/autologous	30 days	Improved LVEF	[59]
C-CURE/2013	Endomyocardial	2 years	Improved LVEF	[60]

LVEF: Left ventricular ejection fraction.

# Bone marrow-derived mesenchymal stromal cell treatment in patients with severe ischaemic heart failure: a randomized placebo-controlled trial (MSC-HF trial)

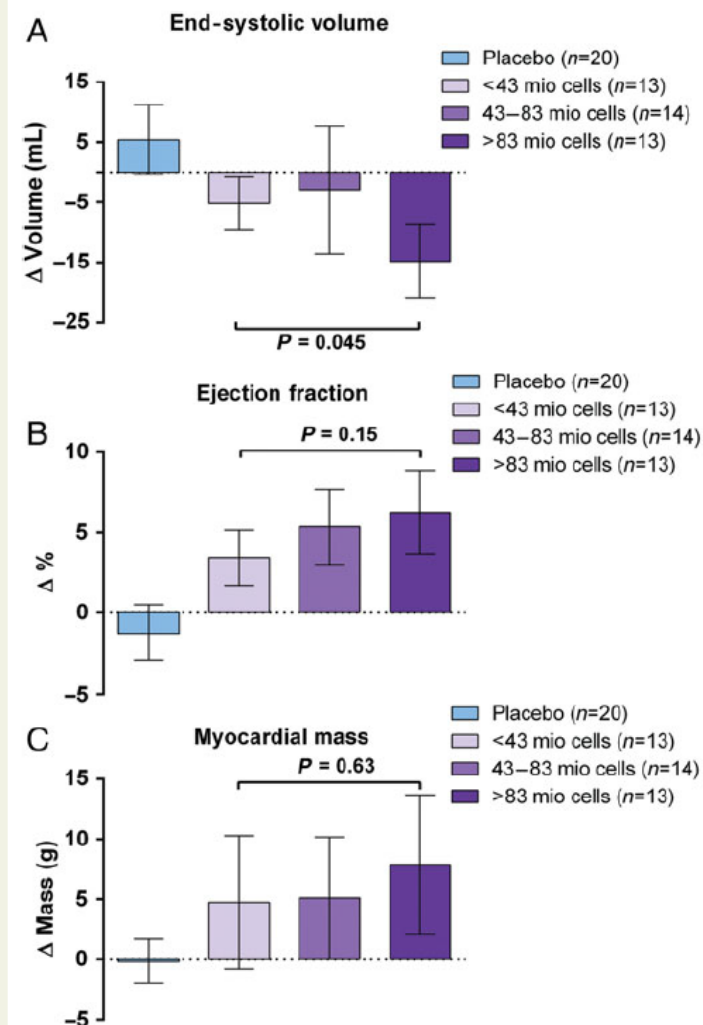
**Anders Bruun Mathiasen<sup>1\*</sup>, Abbas Ali Qayyum<sup>1</sup>, Erik Jørgensen<sup>1</sup>, Steffen Helqvist<sup>1</sup>, Anne Fischer-Nielsen<sup>2</sup>, Klaus F. Kofoed<sup>1,3</sup>, Mandana Haack-Sørensen<sup>1</sup>, Annette Ekblond<sup>1</sup>, and Jens Kastrup<sup>1</sup>**

<sup>1</sup>Cardiac Catheterization Laboratory 2014 and Cardiology Stem Cell Laboratory, The Heart Centre, Rigshospitalet, Copenhagen University Hospital, Blegdamsvej 9, Copenhagen DK-2100, Denmark; <sup>2</sup>Department of Clinical Immunology 2034, Rigshospitalet, Copenhagen University Hospital, Copenhagen, Denmark; and <sup>3</sup>Department of Radiology, Diagnostic Centre, Rigshospitalet, Copenhagen University Hospital, Copenhagen, Denmark

Received 11 August 2014; revised 12 March 2015; accepted 2 April 2015; online publish-ahead-of-print 29 April 2015

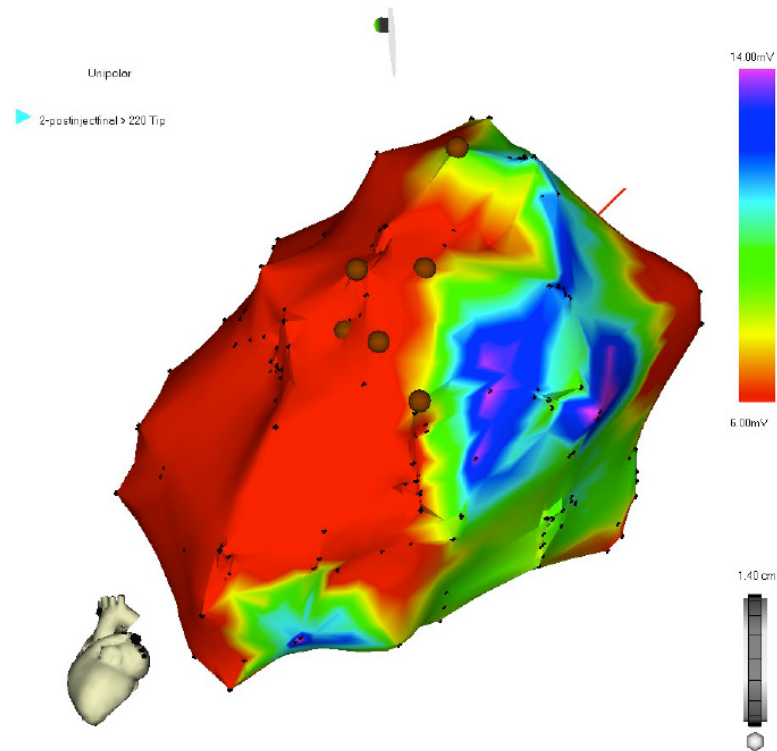
55 pts completed the 6-months FU (37 MSCs vs. 18 placebo)

# MSC-HF trial

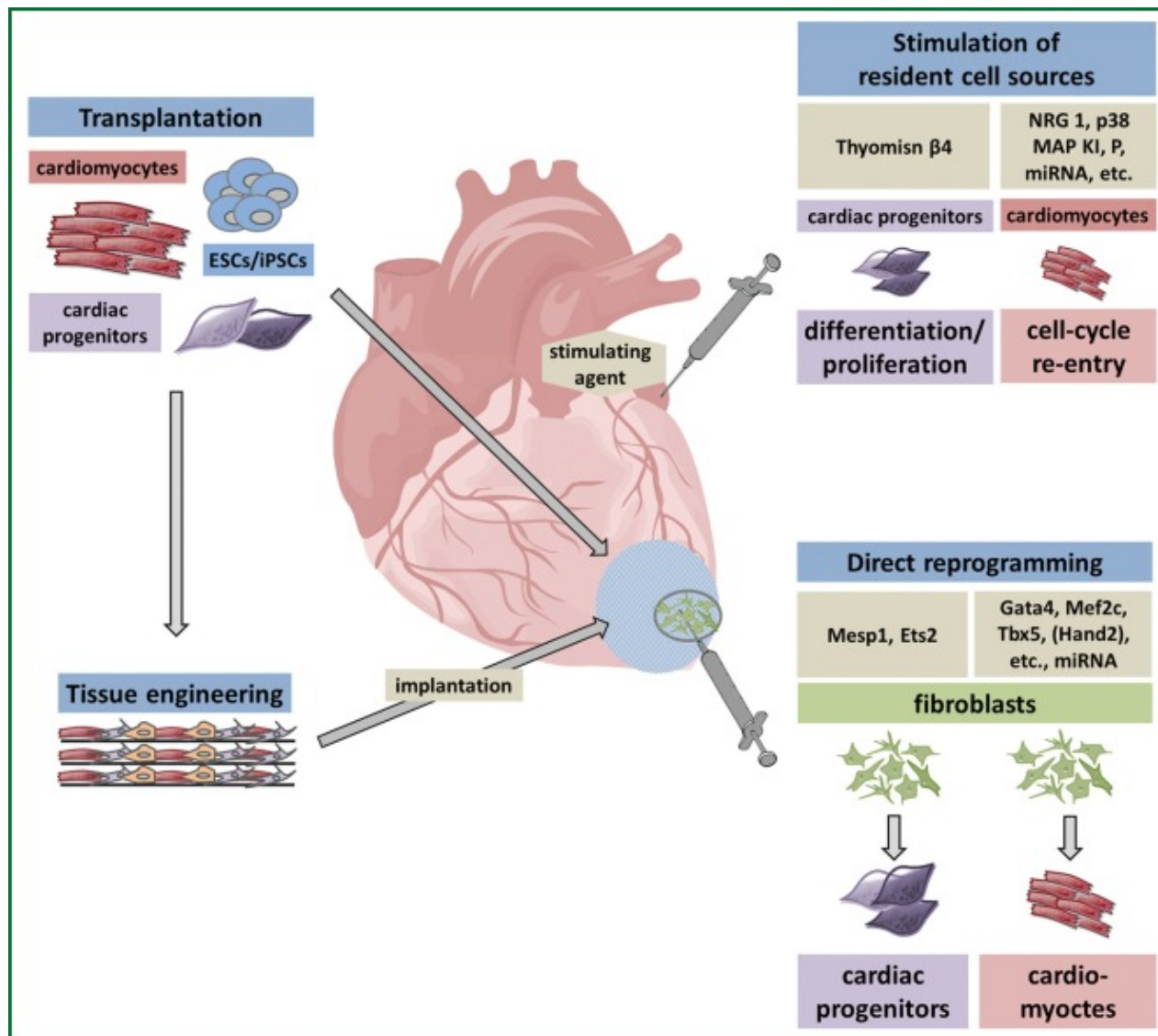


**Figure 3** Dose–response effects: (A) end-systolic volume, (B) ejection fraction, (C) mean myocardial mass. *P*-values represent the differences between subgroups of the mesenchymal stromal cell group (One-way ANOVA. Bar values are mean  $\pm$  95% confidence intervals.).

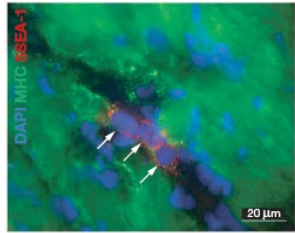
## *NOGA-guided intramyocardial bone marrow cell injection for chronic heart failure*



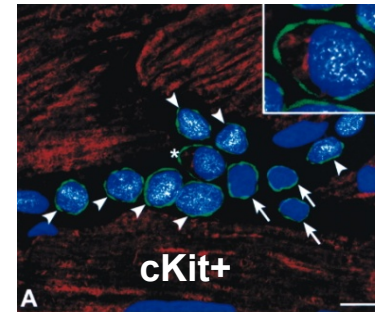
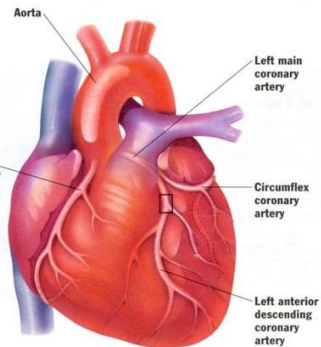
*Feasibility and safety study  
(n = 10)*



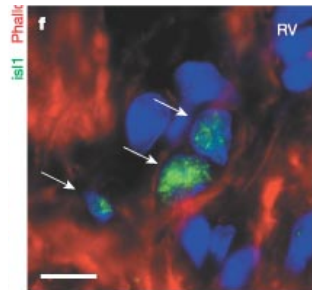
# Resident adult Cardiac Progenitor Cells



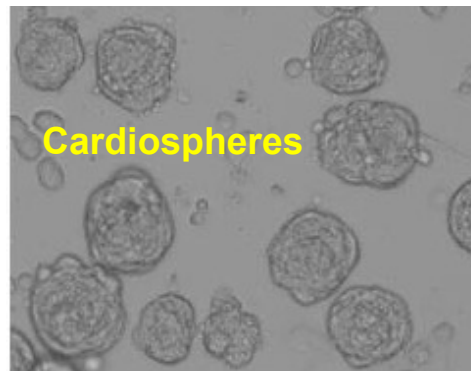
Ott, H.C et al. The adult human heart as a source for stem cells: repair strategies with embryonic-like progenitor cells. *Nat. Clin. Pract. Cardiovasc. Med.*, 2007



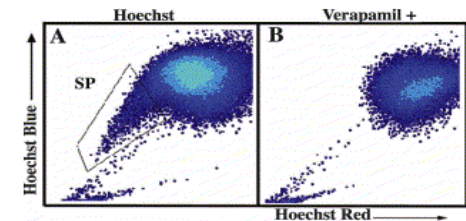
Anversa P., et al. Adult cardiac stem cells are multipotent and support myocardial regeneration. *Cell* 2003



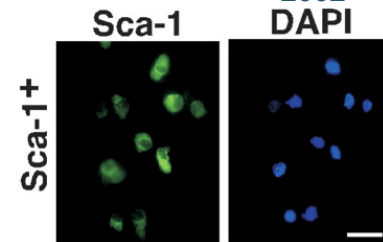
Laugwitz, K.L.; et al. Postnatal Isl1+ cardioblasts enter fully differentiated cardiomyocyte lineages. *Nature*, 2005



Messina et al. Isolation and expansion of adult cardiac stem cells from human and murine heart. *Circ. Res.*, 2004



Hierlihy, A.M et. al. The post-natal heart contains a myocardial stem cell population. *FEBS Lett.*, 2002



Oh, H.; et al. Cardiac progenitor cells from adult myocardium: homing, differentiation, and fusion after infarction. *Proc. Natl. Acad. Sci. USA*, 2003,

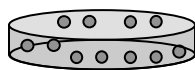


# Cardiospheres

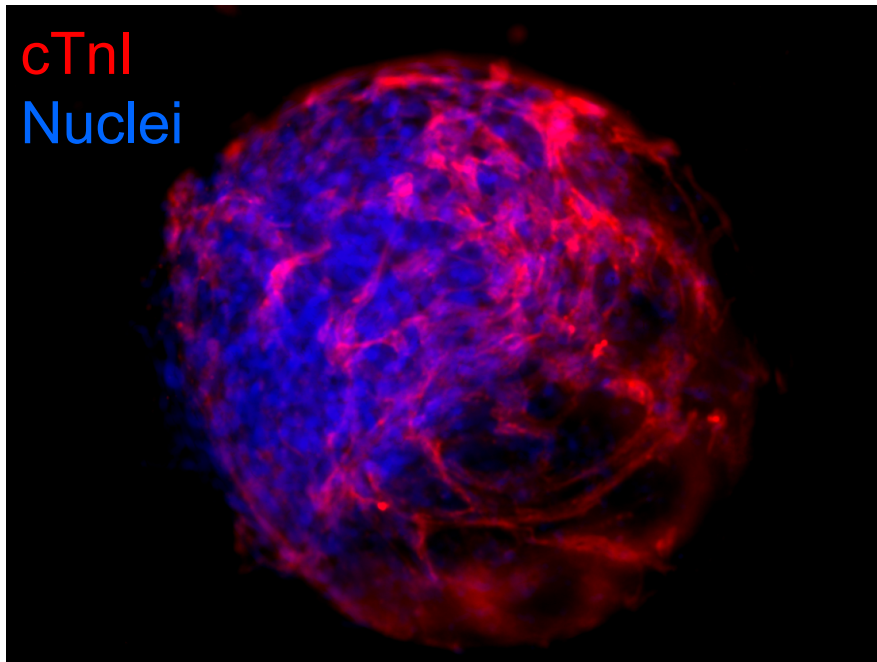
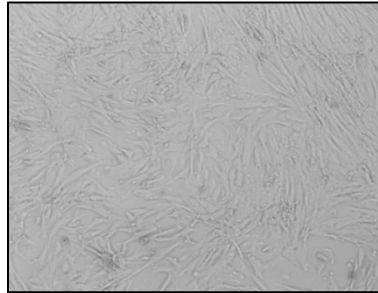
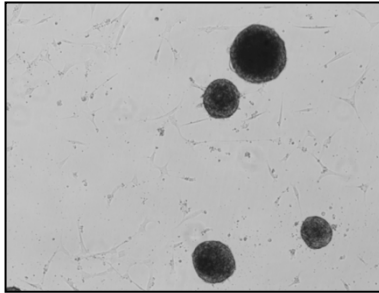
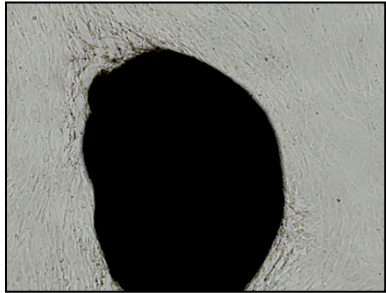
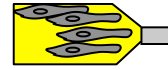
Explants



Cardiospheres

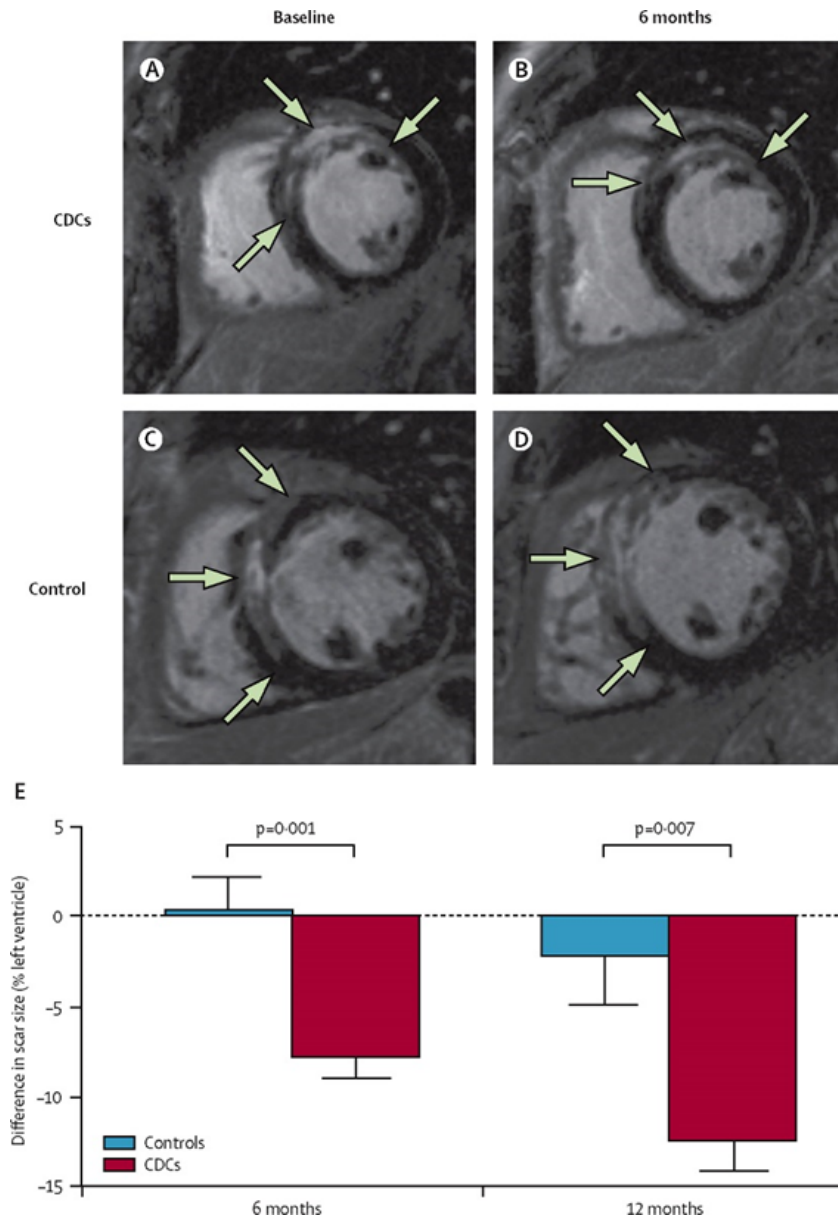


Cardiosphere-derived cells

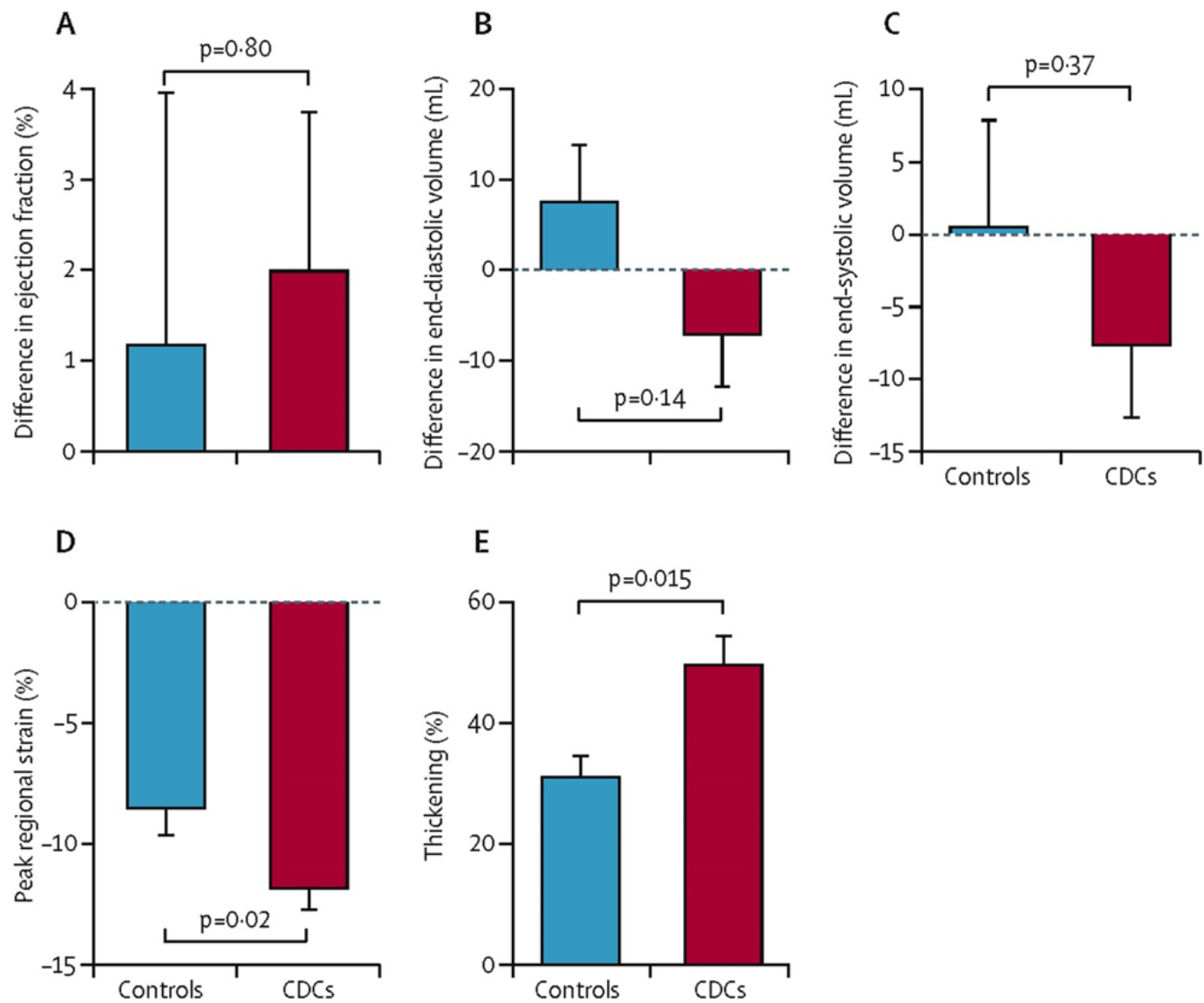




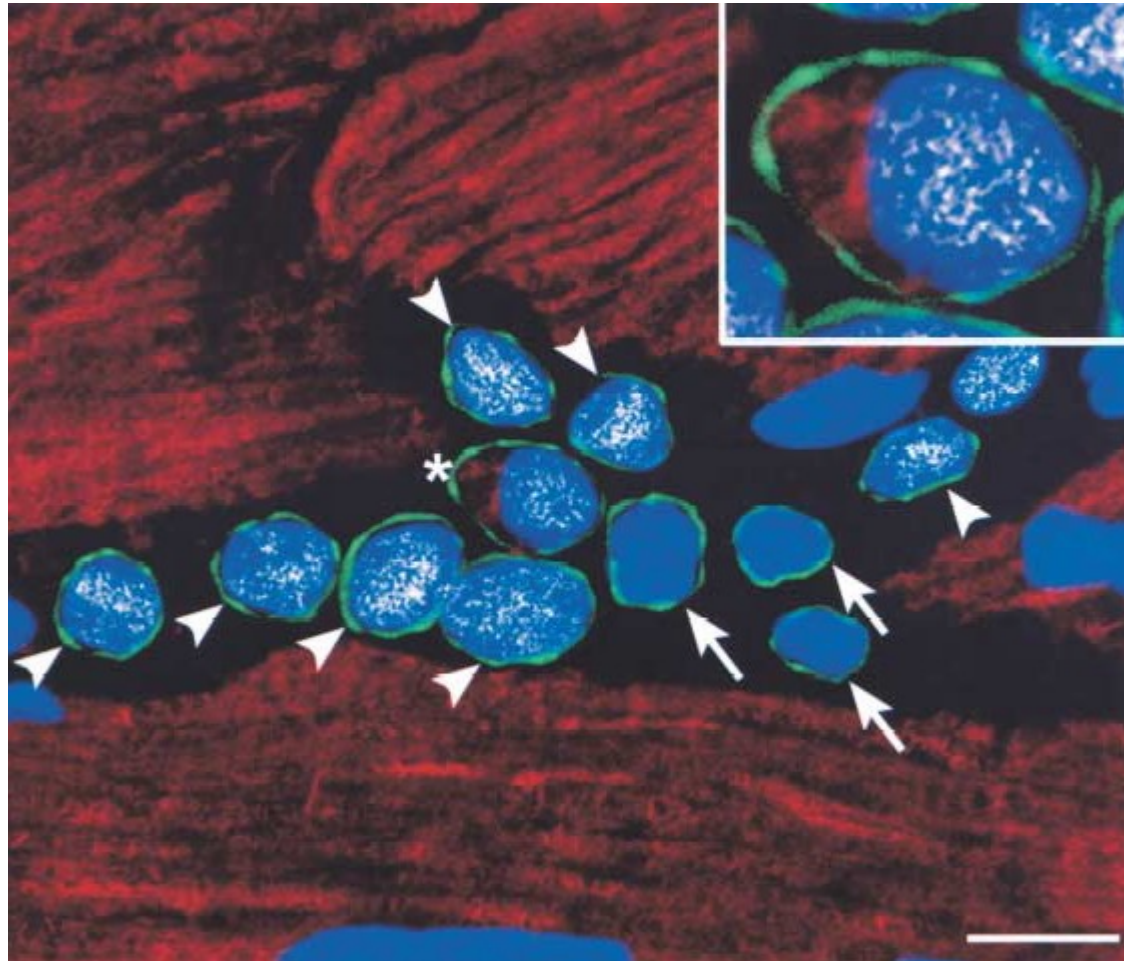
# CADUCEUS



# CADUCEUS



# Human Cardiac Stem Cells

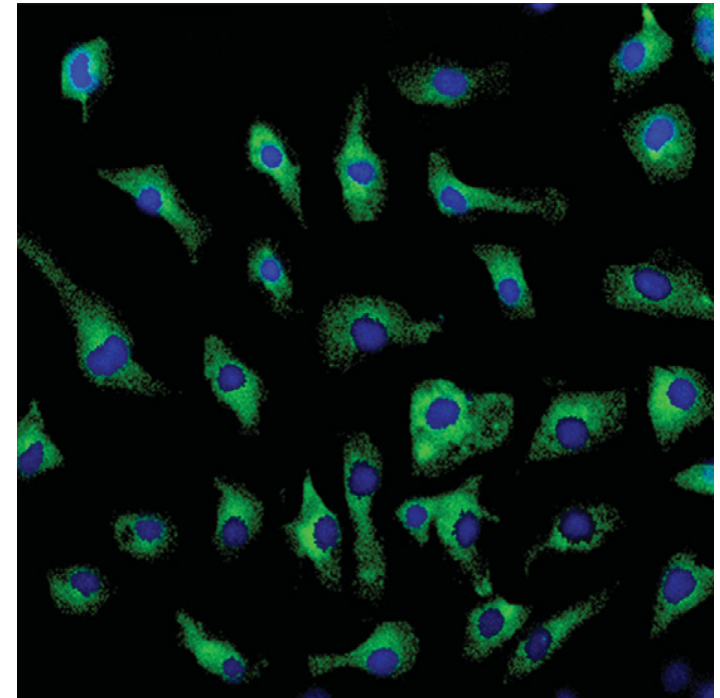
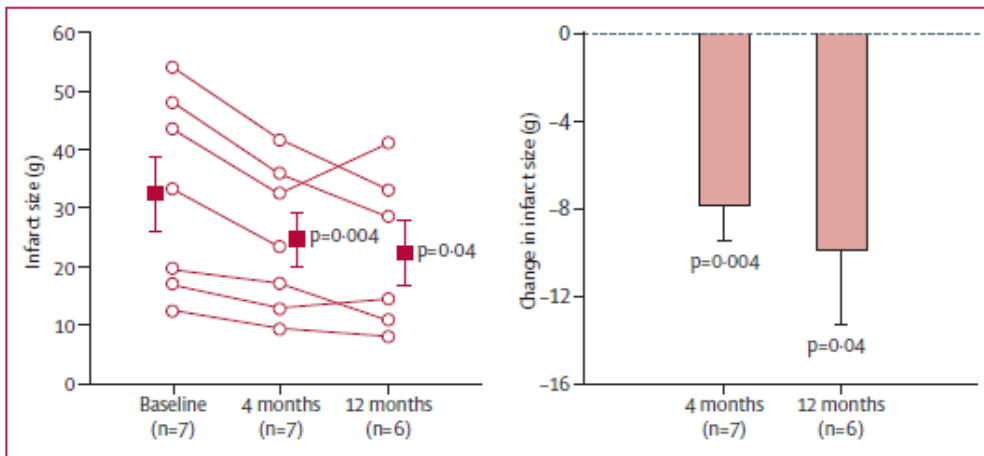
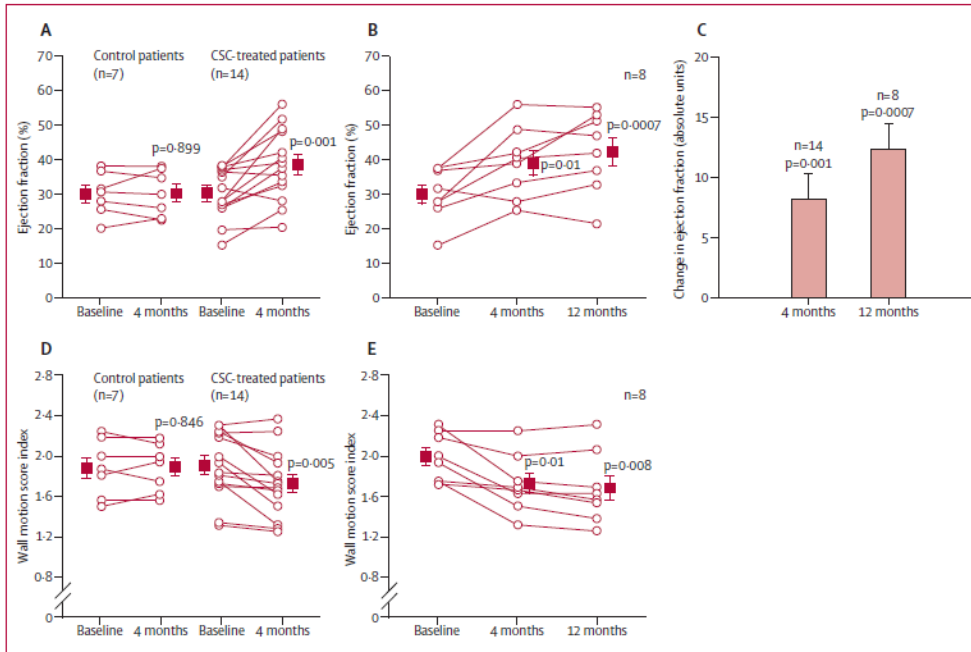


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A Teaching Affiliate of Harvard Medical School



CARDIOCENTRICO

# SCIPIO TRIAL



Bolli R et al., The Lancet 2011



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CARDIOCENTROTICINO

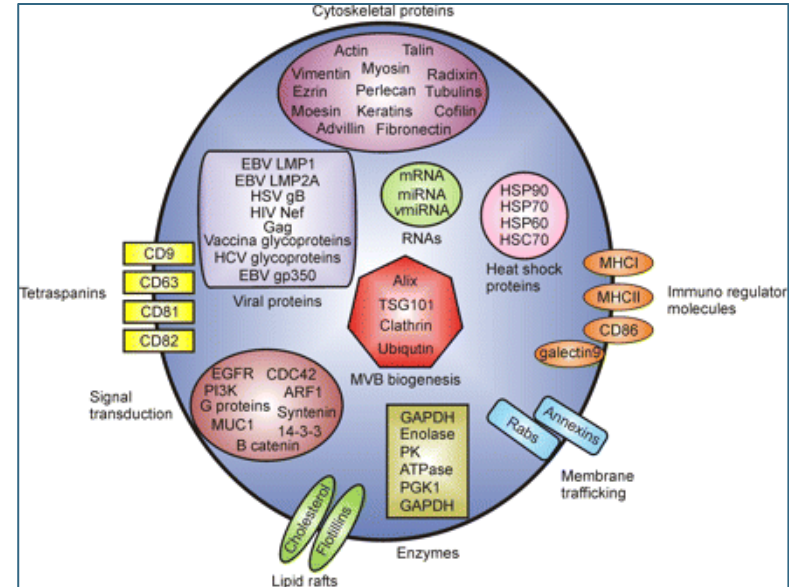
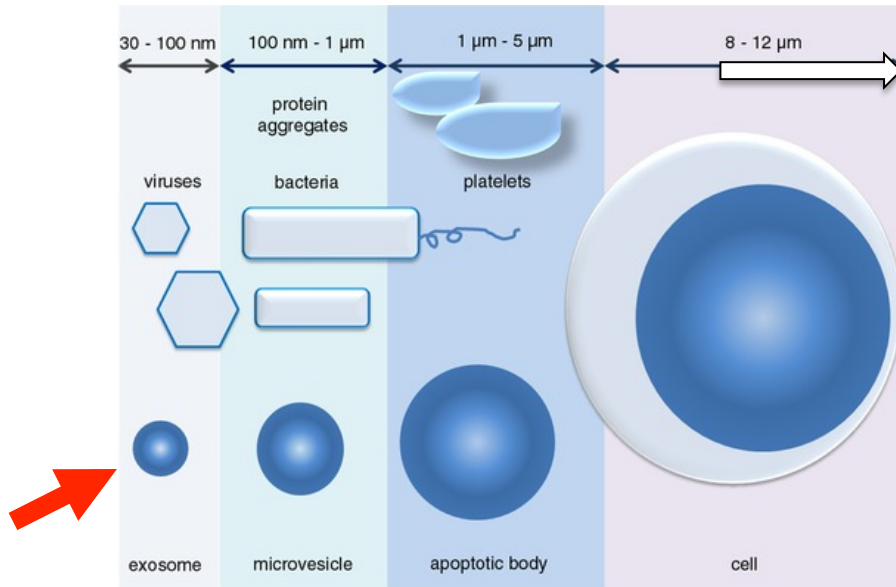
# Direct regeneration versus paracrine effects ...

## Exosomes in human CS





# Direct regeneration versus paracrine effects.....Exosomes



- Exosomes are small membrane vesicles with a lipid bilayer, secreted by many, if not all, cells.
- Exocytosed internal vesicles of endosomal origin range in size between 50 and 100 nm
- Exosomes contain many different proteins, including growth factors and cytokines, and coding and non-coding RNA molecules

# Regenerative therapy in chronic HF: ongoing trials

➤ CHART

➤ DREAM-HF

➤ BAM1

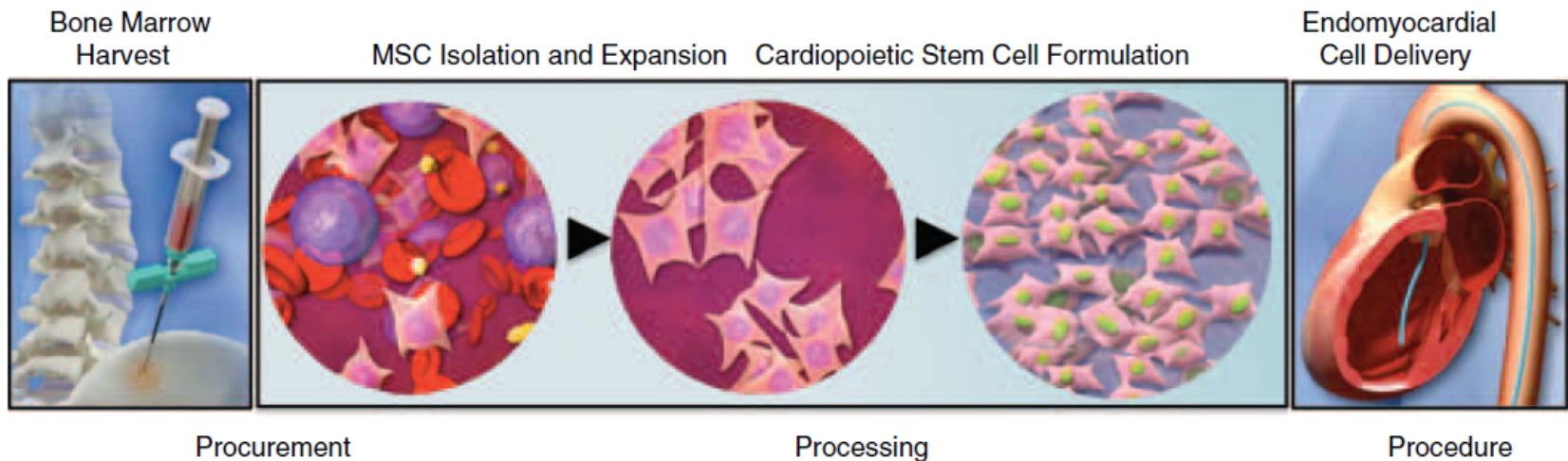
**FUTURE ?**

➤ Exosomes + micro RNA

➤ c-kit



# CHART-1



**Figure 2** Cardiopoietic stem cell procurement and processing prior to the delivery procedure. Following bone marrow harvest, mesenchymal stem cells (MSCs) are purified and expanded. Following standard operating procedures, cardiopoiesis is imposed for lineage guidance of MSCs to derive cardiopoietic stem cells. Stem cells meeting pre-defined release criteria are delivered in an autologous fashion to patients with ischaemic cardiomyopathy using a catheter-based endomyocardial delivery procedure.

# DREAM-HF

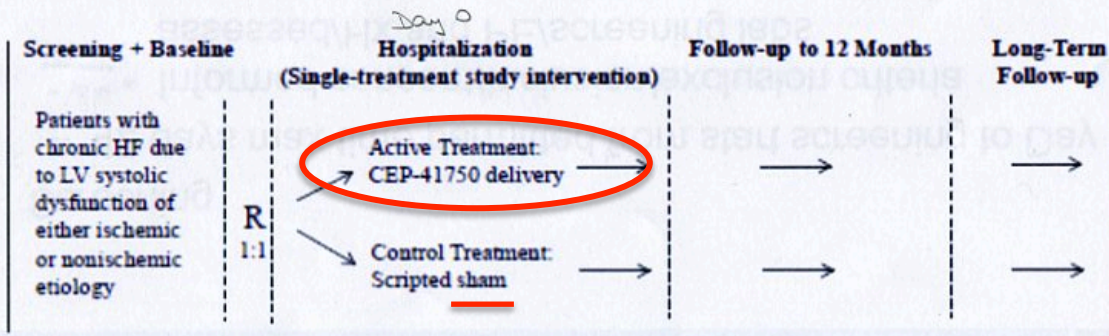
## Heterologous cells (young donors) from BM with GF cocktail

### Study Design

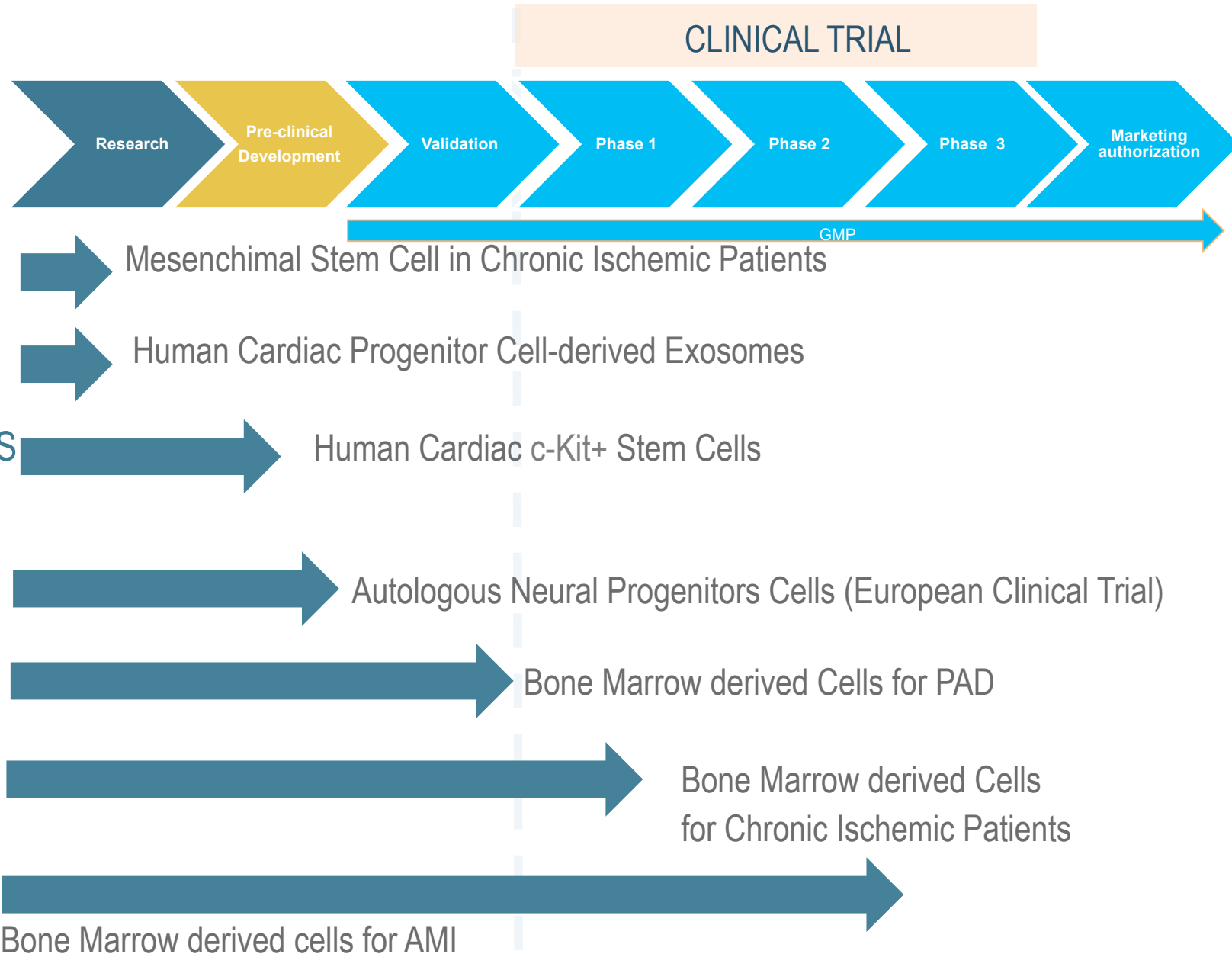


TEVA

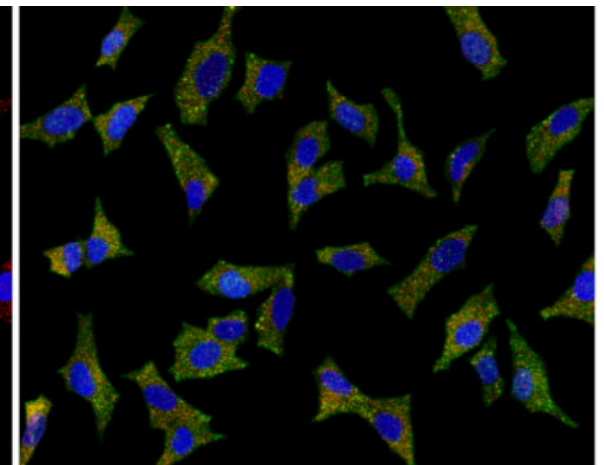
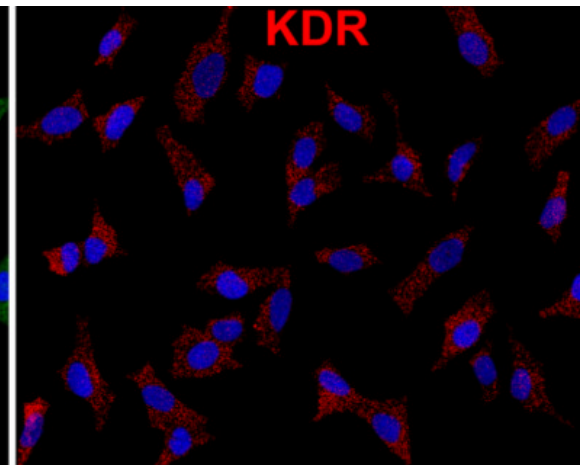
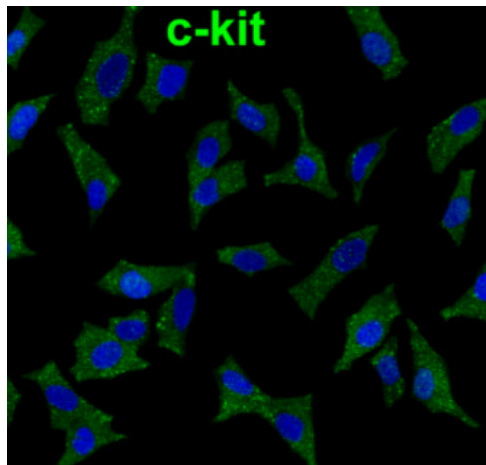
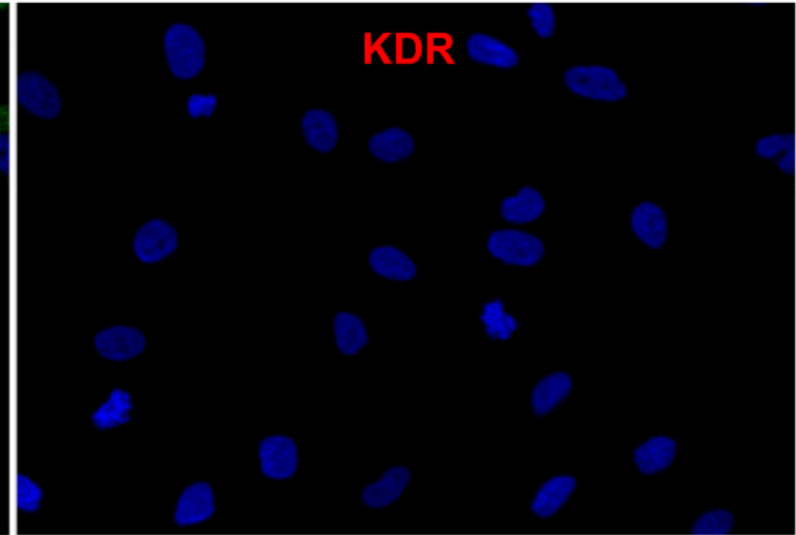
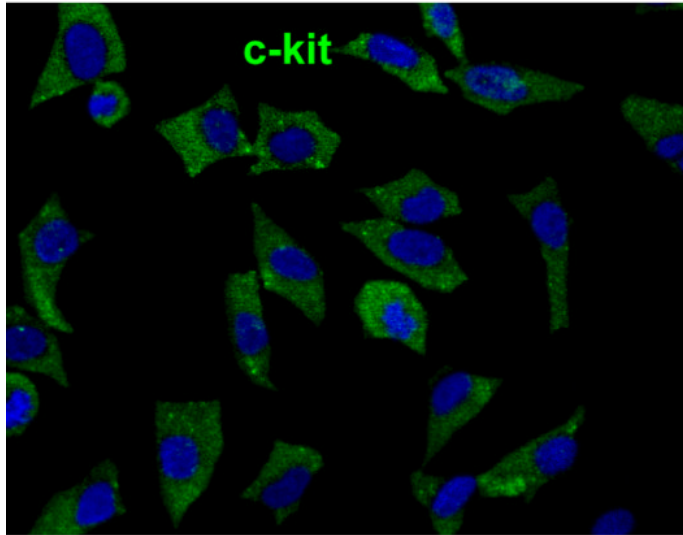
- Multicenter, randomized, double-blinded, sham-procedure controlled, parallel group design
- Treatment: A single dose of transendocardially administered MPCs (150 million cells versus control using a 1:1 randomization) in conjunction with optimal medical/revascularization therapy in patients with advanced chronic HF due to LV systolic dysfunction
- Consists of 3 main time points:
  - Screening
  - Day 0



# Progress of On going Projects



# Endomyocardial biopsies



D'Amario D. et al., Circ Res 2011



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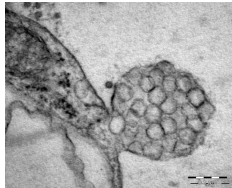
Istituto Associato  
all'Università di Zurigo



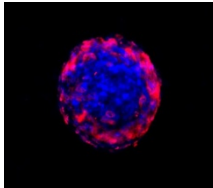
Universität  
Zürich <sup>UZH</sup>



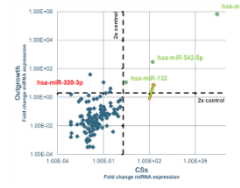
Exosomes



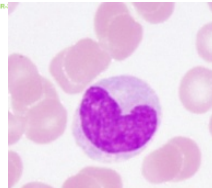
Cardiospheres



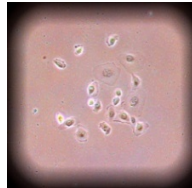
Micro RNA



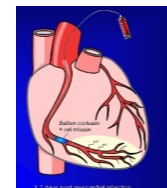
Monociti



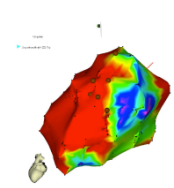
c-kit+ cells



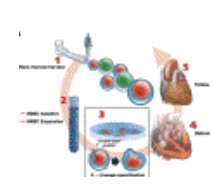
BAMI trial



METHOD trial



C-CURE trial



BASIC AND TRANSLATIONAL PROJECTS



CLINICAL STUDIES



G. Vassalli



L. Barile



E. Cervio



T. Tallone



S. Bardelli



P. Anversa



A. Leri



D. Sürder



M. Moccetti



**GRAZIE**  
Per la vostra attenzione

*Associated Institute  
of the University of Zurich*



**University of  
Zurich**<sup>UZH</sup>



**CARDIOCENTROTICINO**