

**2024 RACHMIEL LEVINE-ARTHUR RIGGS**

# Diabetes Research Symposium

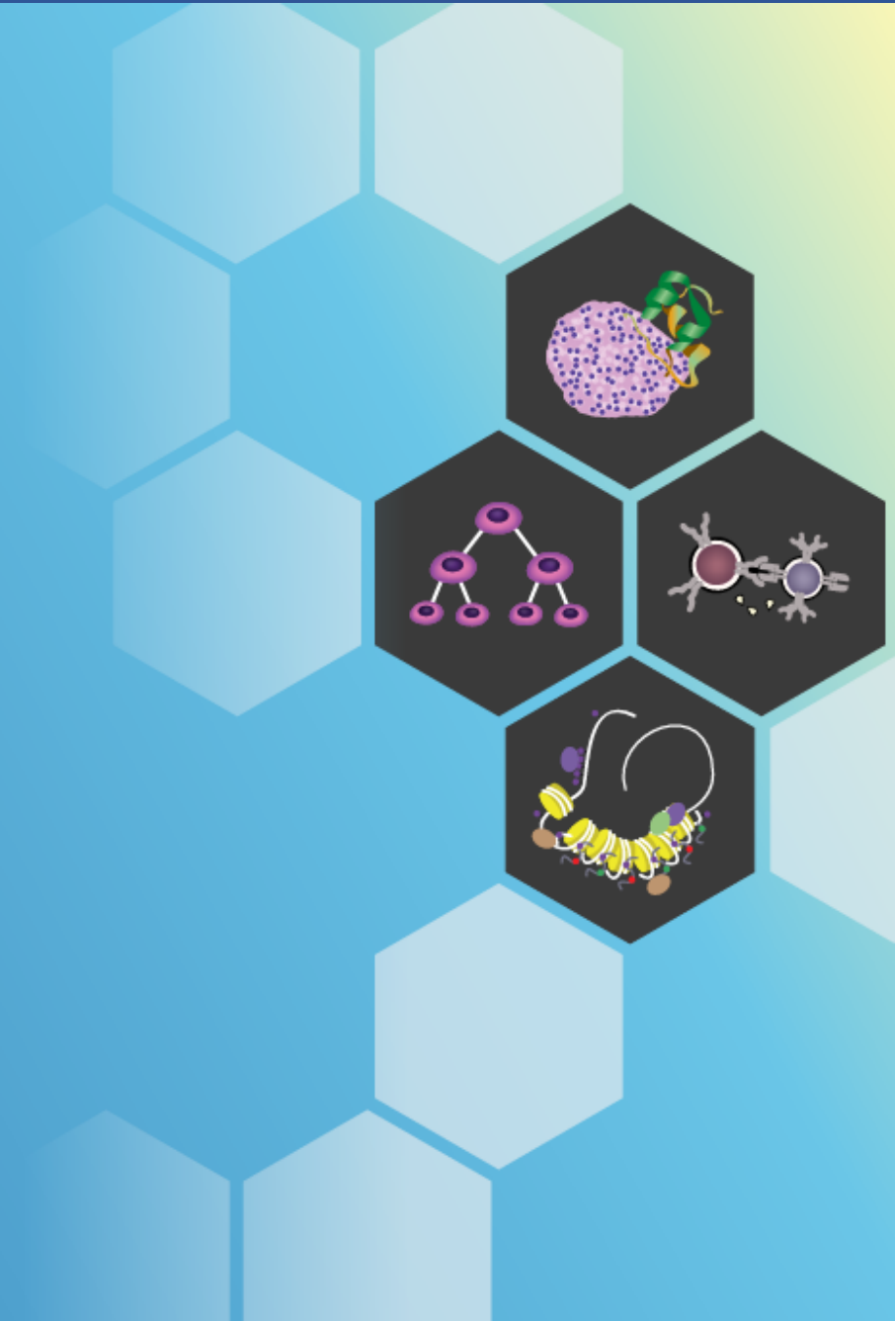
## Encapsulation as a Means for Immune Protection

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Director, Islet Immunoengineering Lab, Diabetes Research Institute

University of Miami



# Disclosures

- Consultant for ISLA Pharmaceuticals.
- Royalties from Sernova Corp.

*This presentation and/or comments will be free of any bias toward or promotion of the above referenced companies or their product(s) and/or other business interests.*

*This presentation and/or comments will provide a balanced, non-promotional, and evidence-based approach to all diagnostic, therapeutic and/or research related content.*

*This presentation has been peer-reviewed and no conflicts were noted.*

# Cultural Linguistic Competency (CLC) & Implicit Bias (IB)

## STATE LAW:

The California legislature has passed Assembly Bill (AB) 1195, which states that as of July 1, 2006, all Category 1 CME activities that relate to patient care must include a cultural diversity/linguistics component. It has also passed AB 241, which states that as of January 1, 2022, all continuing education courses for a physician and surgeon **must** contain curriculum that includes specified instruction in the understanding of implicit bias in medical treatment.

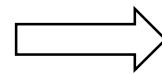
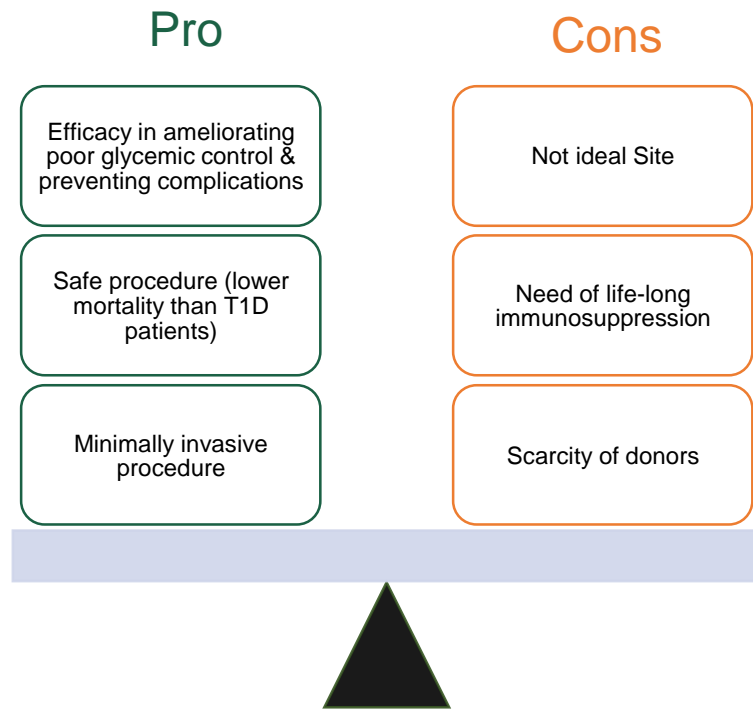
*The cultural and linguistic competency (CLC) and implicit bias (IB) definitions reiterate how patients' diverse backgrounds may impact their access to care.*

## **EXEMPTION:**

Business and Professions Code 2190.1 exempts activities which are dedicated solely to research or other issues that do not contain a direct patient care component.

***This presentation is dedicated solely to research or other issues that do not contain a direct patient care component.***

# Addressing Challenges of Beta Cell Replacement for T1D Treatment



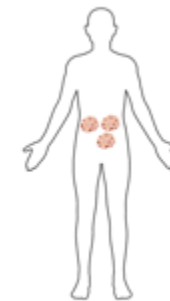
## Cell immunoisolation (Encapsulation) and/or Local Immunomodulation Through Biomaterials

### 1. Localized Delivery of Immunomodulatory Drugs

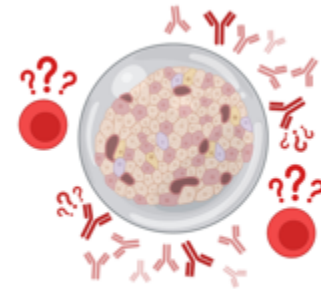
#### 1.1 Locally in Graft



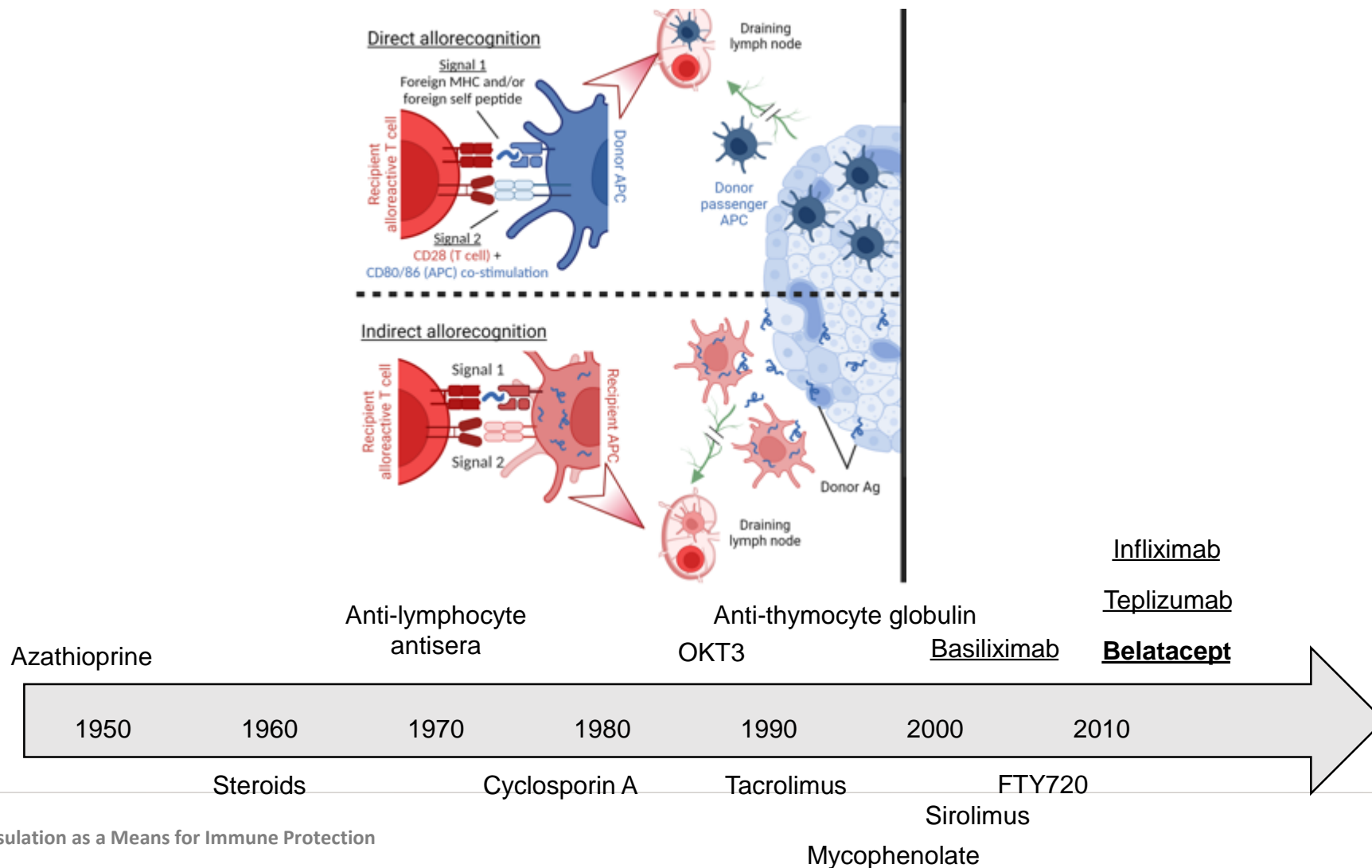
#### 1.2 Locally in graft-draining lymph nodes



### 2. Islet Encapsulation

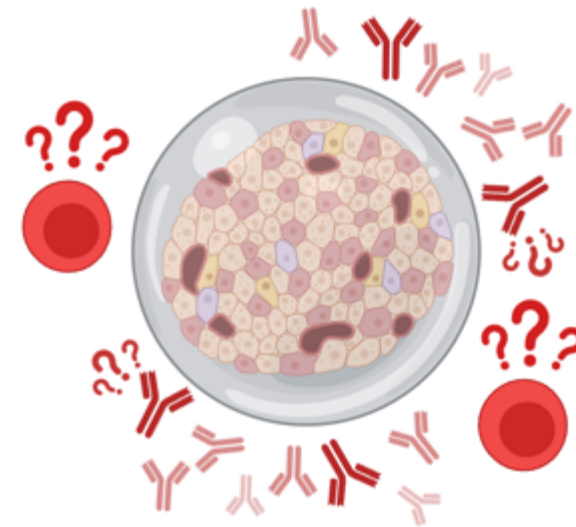
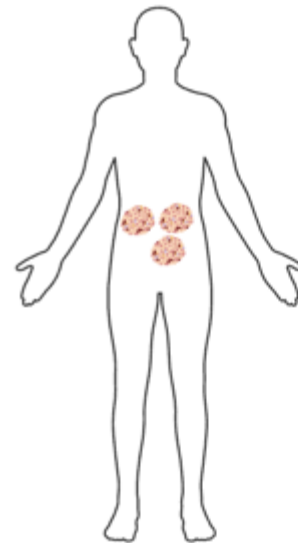


# Mechanisms of Allogeneic Islet Rejection and Anti-Rejection Therapy Evolution

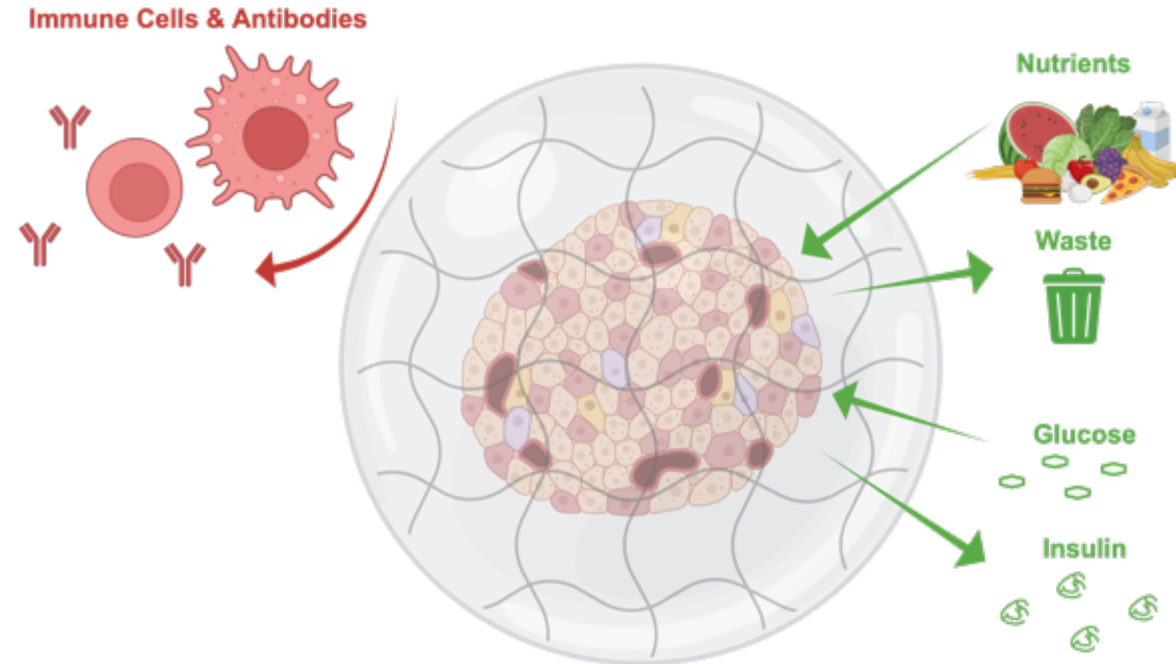


# Cell immunoisolation (Encapsulation) for Beta Cell Replacement Without Chronic Systemic Immunosuppression

## 2. Islet Encapsulation



# Protecting Insulin-Secreting Cells from Rejection through Biomaterial Encapsulation



Biomaterial coatings need selective permeability:

Yes: nutrients, glucose, insulin

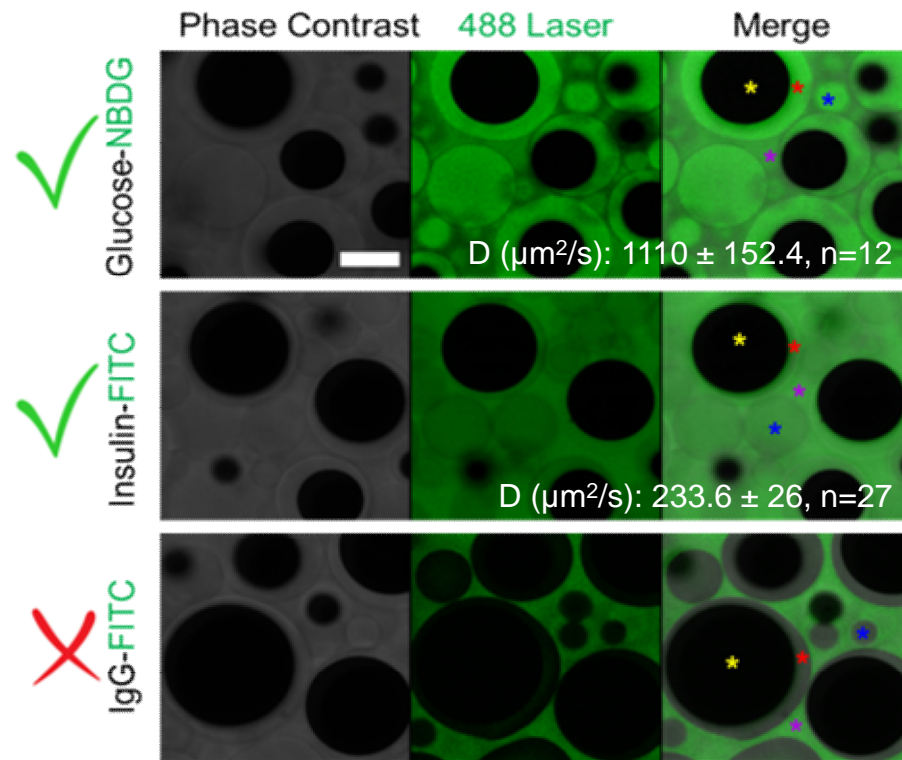
No: cells, antibodies (IgG)

**Selective permeability can be achieved using:**

- Nanoporous membranes
- Hydrogels with controllable permselectivity

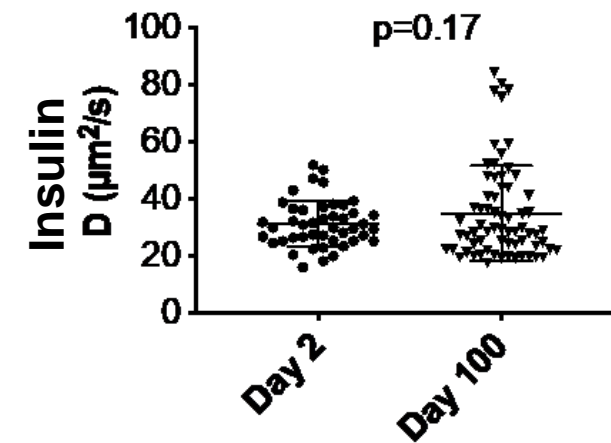
# Biomaterial Capsule Requirement: Stable selective permeability for immunoisolation

## CC selective permeability



Impermeable to IgG

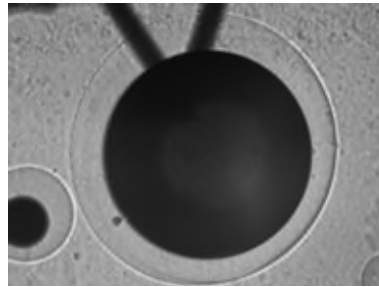
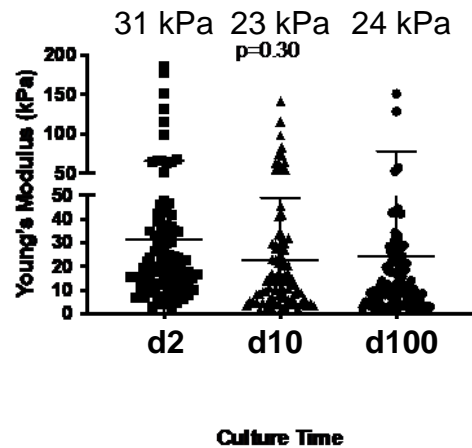
## Long-term stability of CC permeability properties





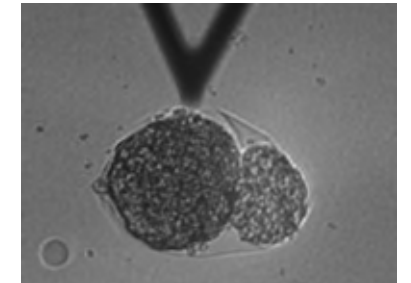
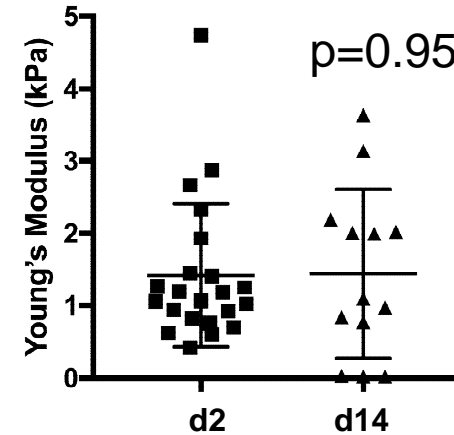
# Biomaterial Capsule Requirement: Stable mechanical properties for immunoisolation

## Stability of CC mechanical properties on model beads



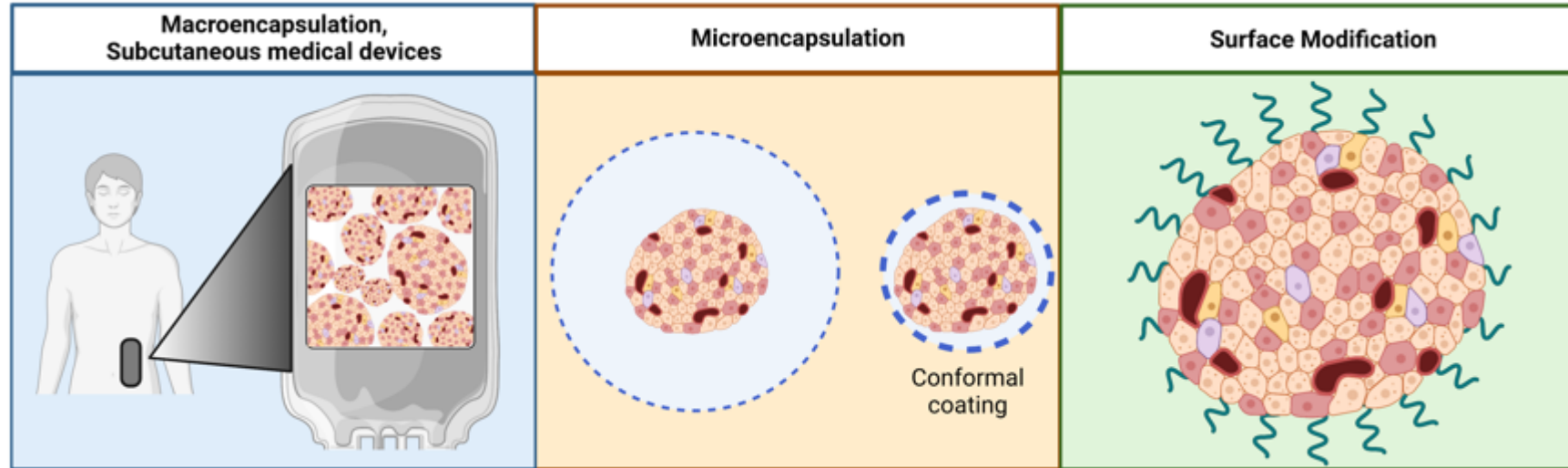
Method: Atomic Force Microscopy

## Stability of CC mechanical properties on rat islets



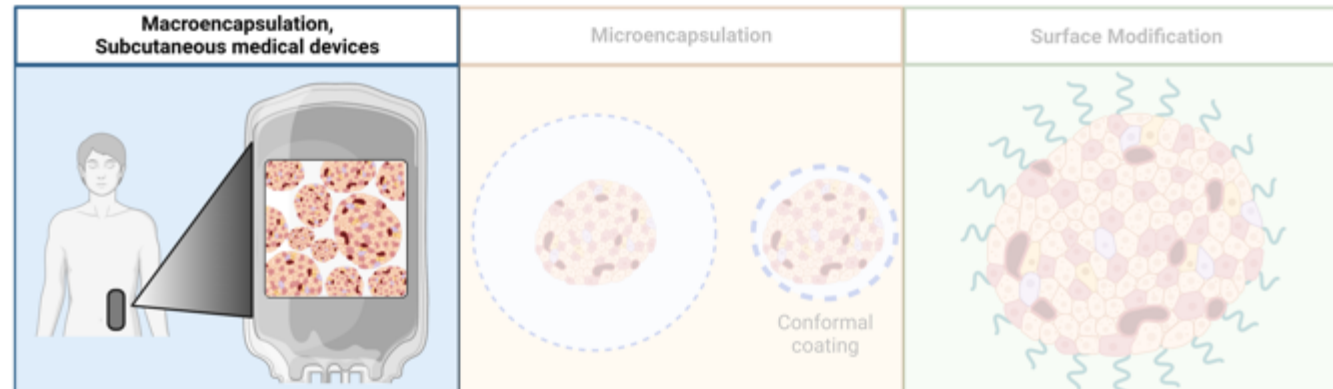
Unpublished

# Islet Encapsulation Strategies – Different Designs



Adapted from SoRelle *et al.*  
Intech. 2011

# Islet Encapsulation Strategies - Macro

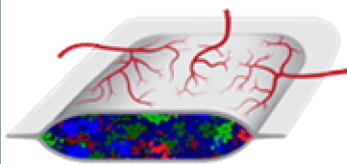


Adapted from SoRelle *et al.*  
Intech. 2011

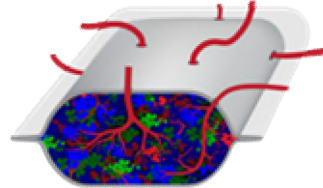
## Viacyte Trials

**PEC-Encap (VC-01)**  
No immunosuppression  
NCT02239354

**PEC-Direct (VC-02)**  
With immunosuppression  
NCT03162926

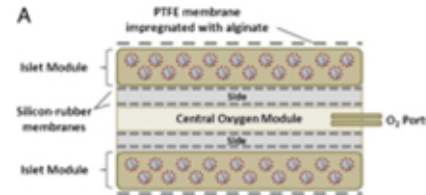


Henry *et al.* *Diabetes.* (2018)



Ramzy *et al.* *Cell Stem Cell.* (2021)

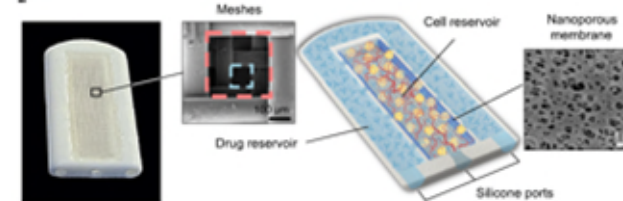
## Beta-O2 Oxygenated Subcutaneous Site



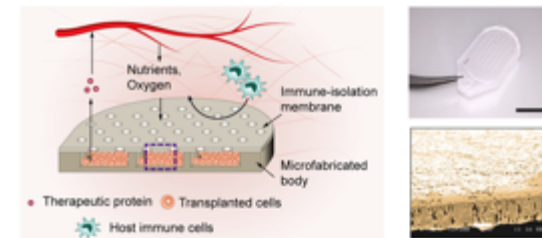
NCT02064309

Carlsson *et al.* *Am J Transplant.* (2018)

## Nanoporous Membrane + Localized Immunomodulation

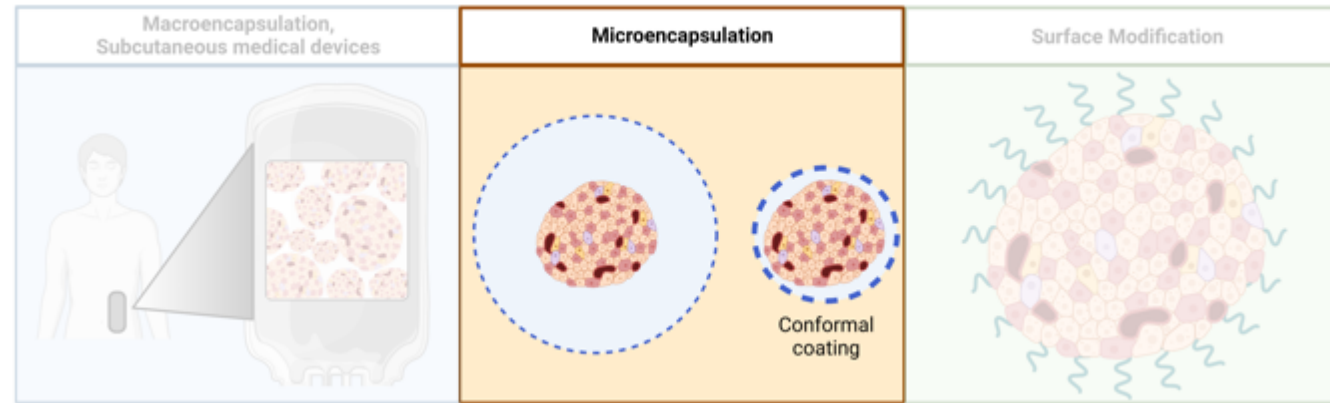


Grattoni's Lab, *Nat Commun.* (2022)



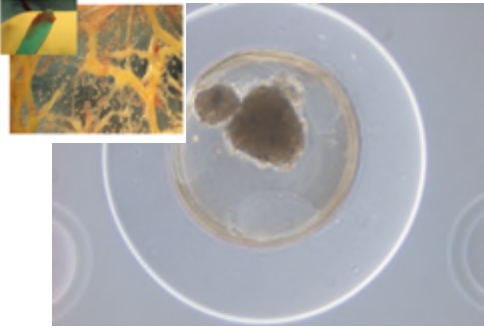
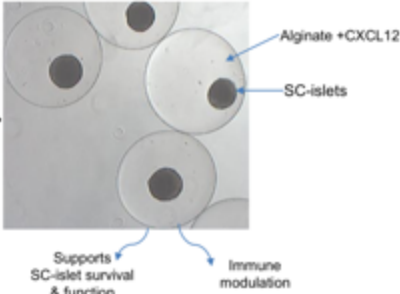
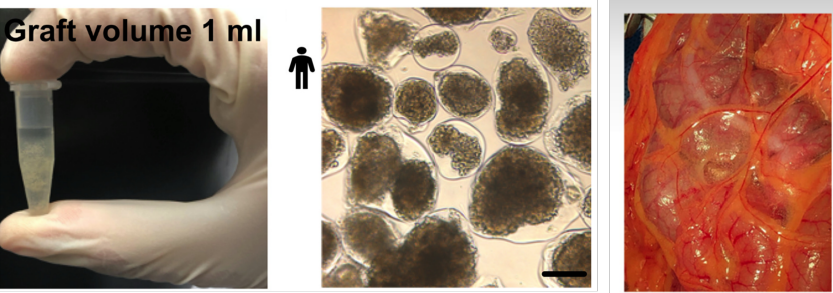
Anderson/Langer's Lab, *Nat Biomed Eng.* (2021)

# Islet Encapsulation Strategies - Micro

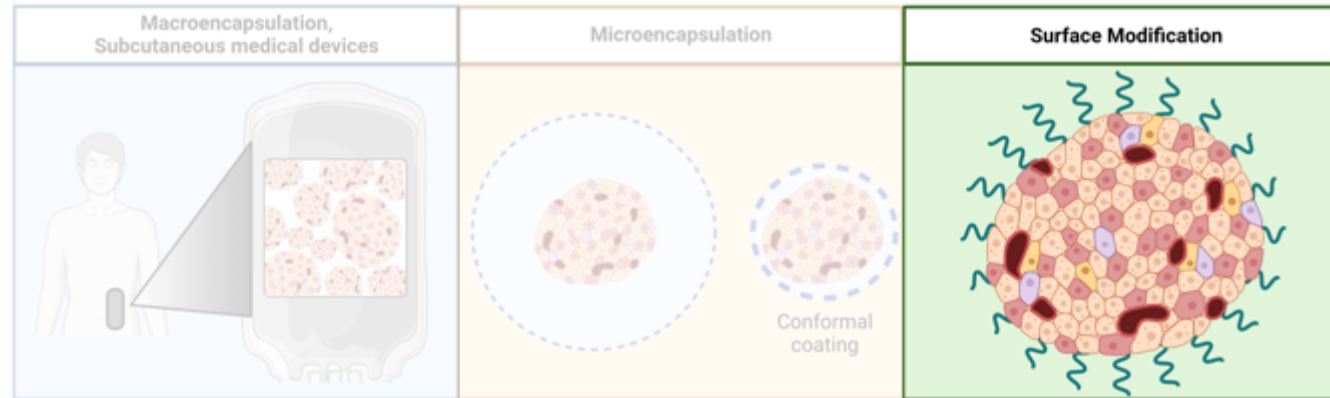


Adapted from SoRelle *et al.*  
Intech. 2011

Microencapsulated islets → non-human primate

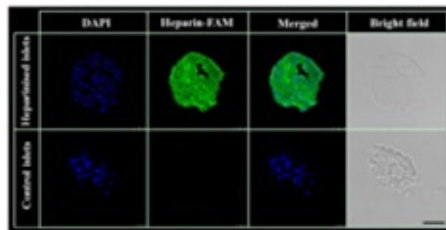
<p><b>Double Alginate Capsule</b></p>  <p>Weber's Lab, Xenotransplantation (2018)</p>	<p><b>Vicapsys CXCL12 Alginate</b></p>  <p>Poznansky's Lab, Xenotransplantation (2023), Am J Transplant (2019)</p>	<p><b>PEG Conformal Coating</b></p>  <p>Graft volume 1 ml</p> <p>Am J Transpl (2018), Stem Cell Reports (2020), Sci Adv (2022)</p> <p>Tomei Lab,</p>
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# Islet Encapsulation Strategies - Nano



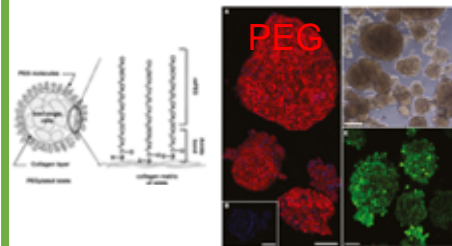
Adapted from SoRelle *et al.* Intech. 2011

## Islet surface modification with heparinized PEG



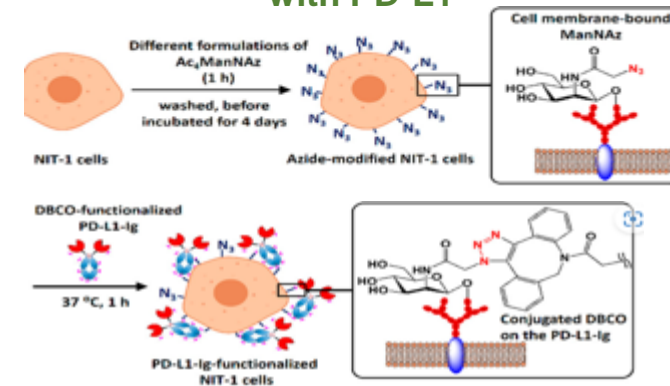
Lou *et al.* Mater Sci Eng. (2017)

## Islet surface modification with PEG (PEGylation)



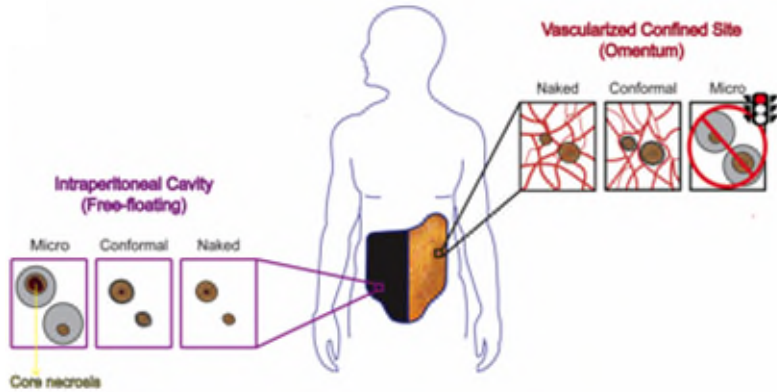
Stabler Lab,  
Am J Transplant (2020)

## Islet metabolic surface engineering with PD-L1

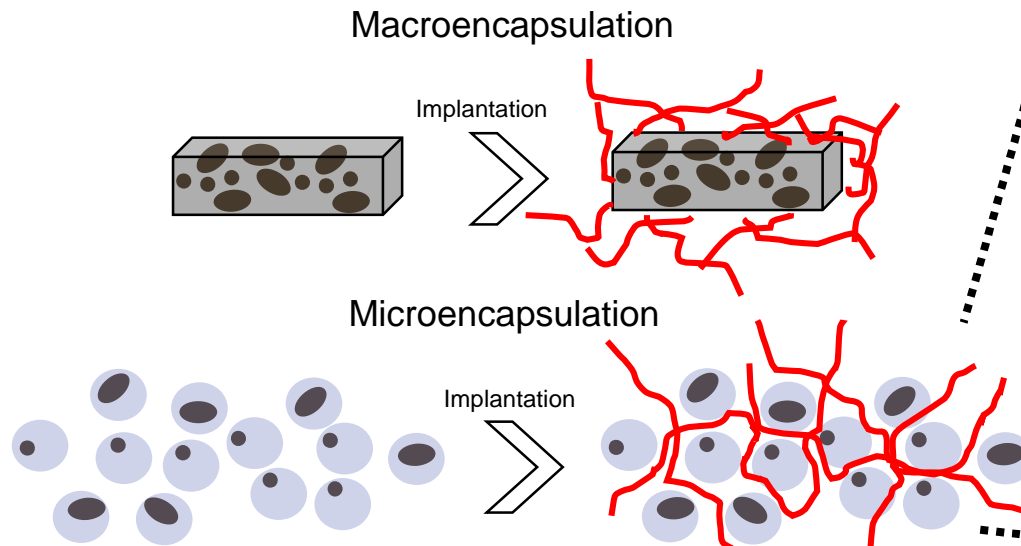


Wang's Lab, ACS Nano. (2021)

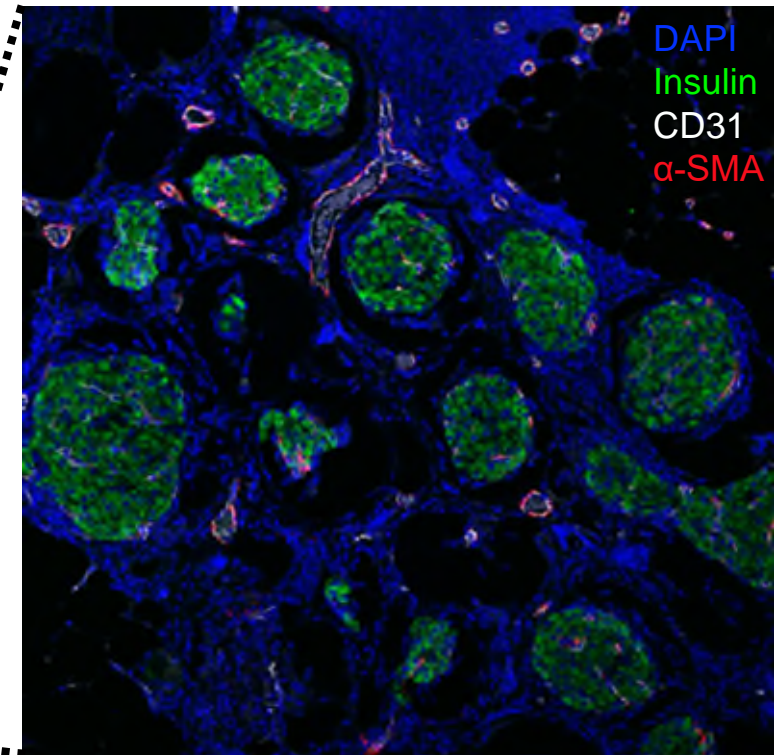
# The issue of the transplant site and the importance of vascularization in confined sites



## Transplantation in Confined Vascularized Sites



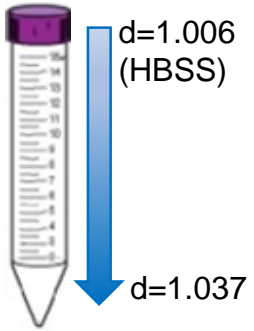
Conformal coated islet allografts in fat pad



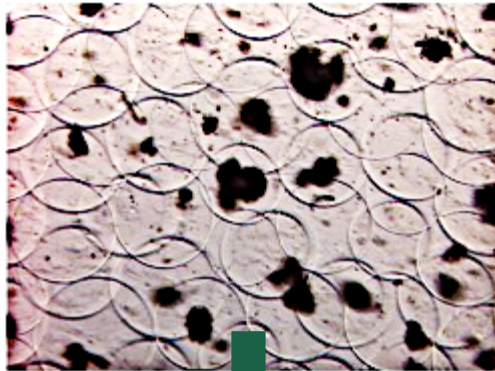
# Purification of cell-free capsules to reduce the volume of therapeutic material

## 1. Continuous gradient to determine coated islet density

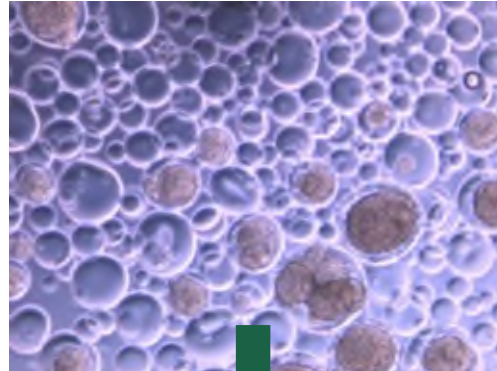
V=15 mL



### Alginate Microcapsules



### PEG Conformal Coating



## 2. Gradient centrifugation to separate coated islets from empties

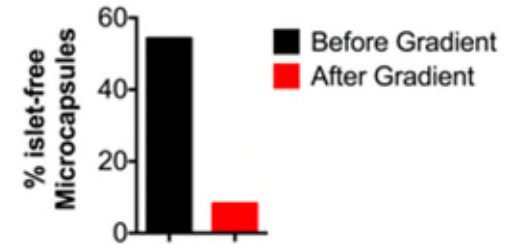
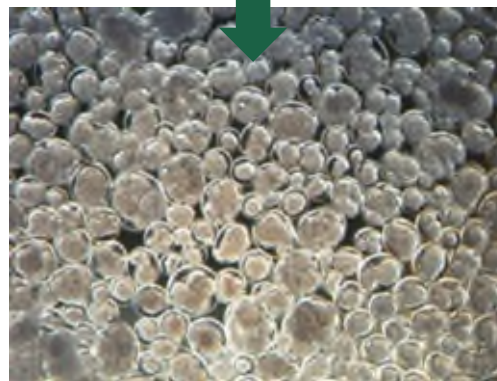
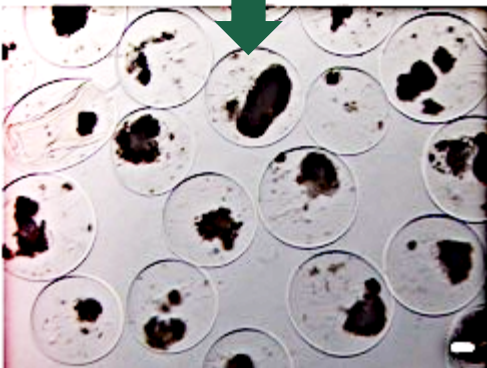
V=15 mL



Centrifugation  
600g for 5min

D=1.037 for CC

D=1.027 for microcapsules

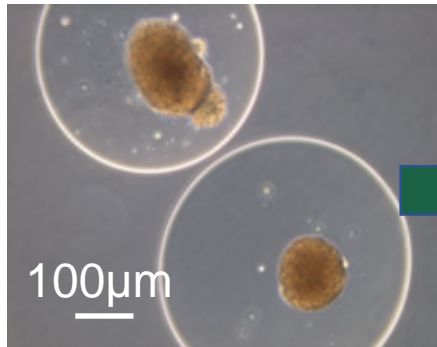


98% reduction in empty capsules

# Minimizing Capsule Size for physiological GSIS

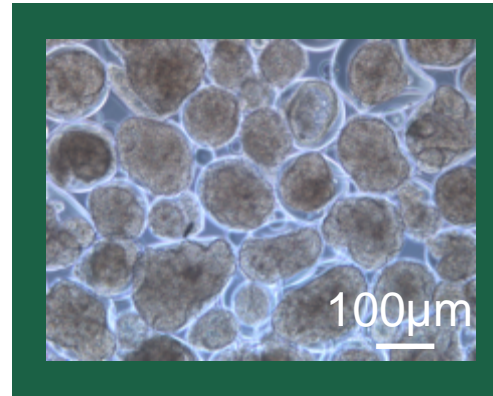
Traditional Microcapsules

One size fits all



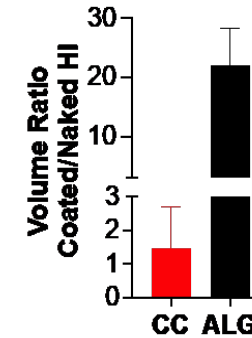
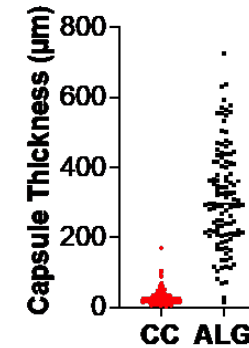
Conformal capsules

conform to the islet size & shape

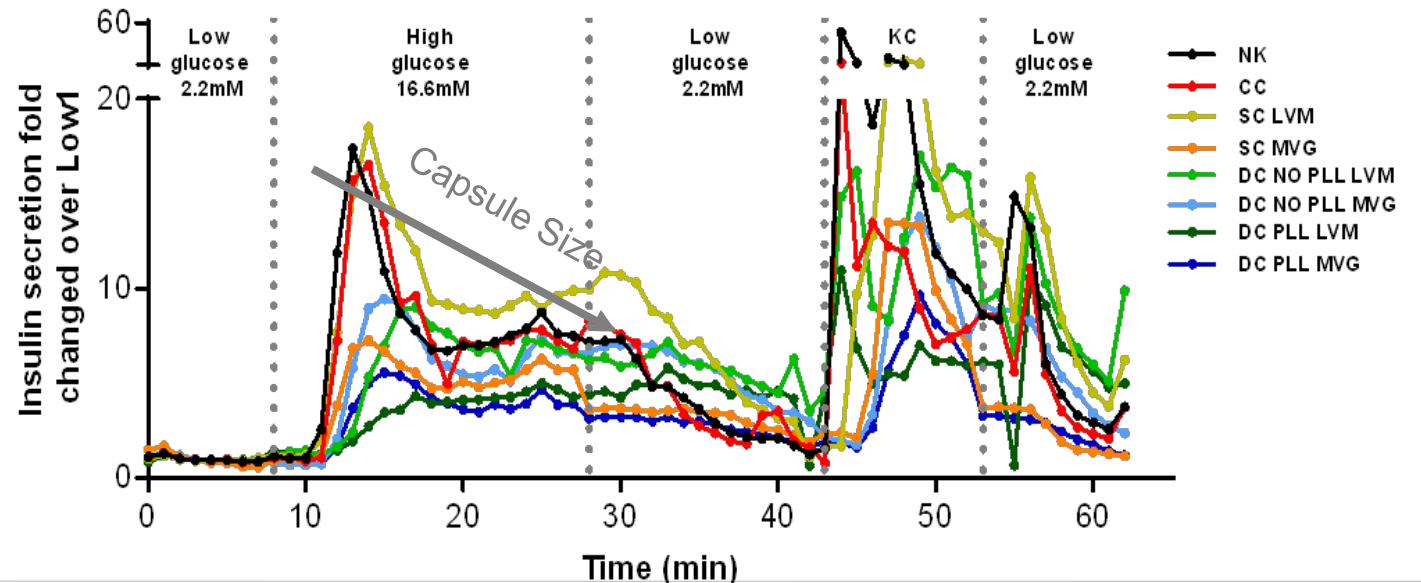


Minimized Capsule

Thickness & Graft Volumes



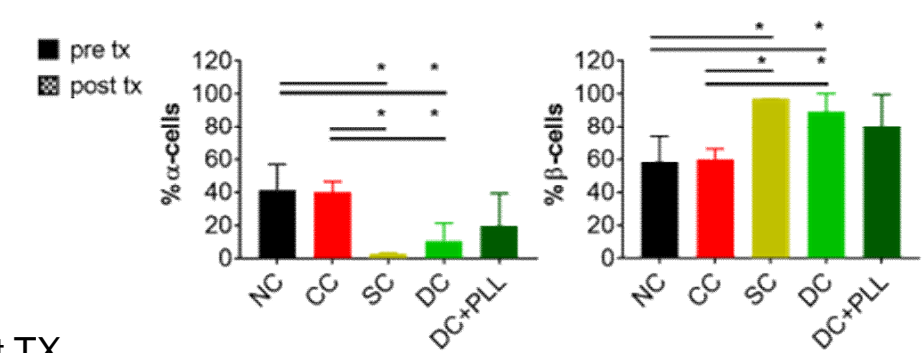
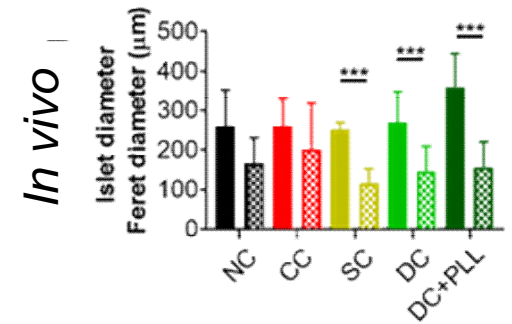
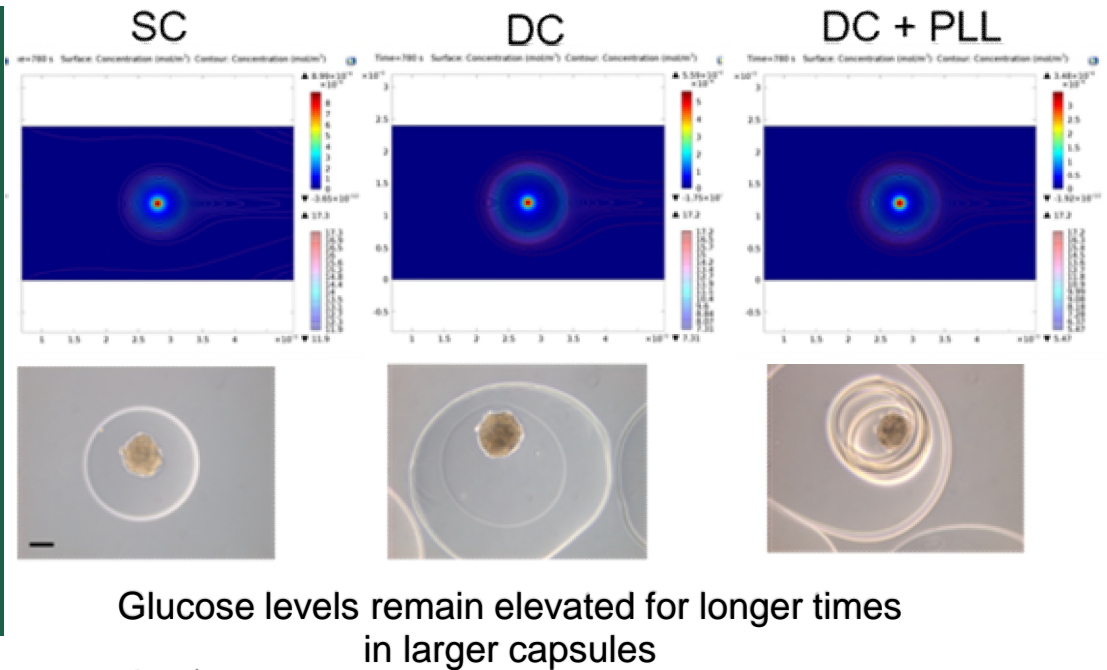
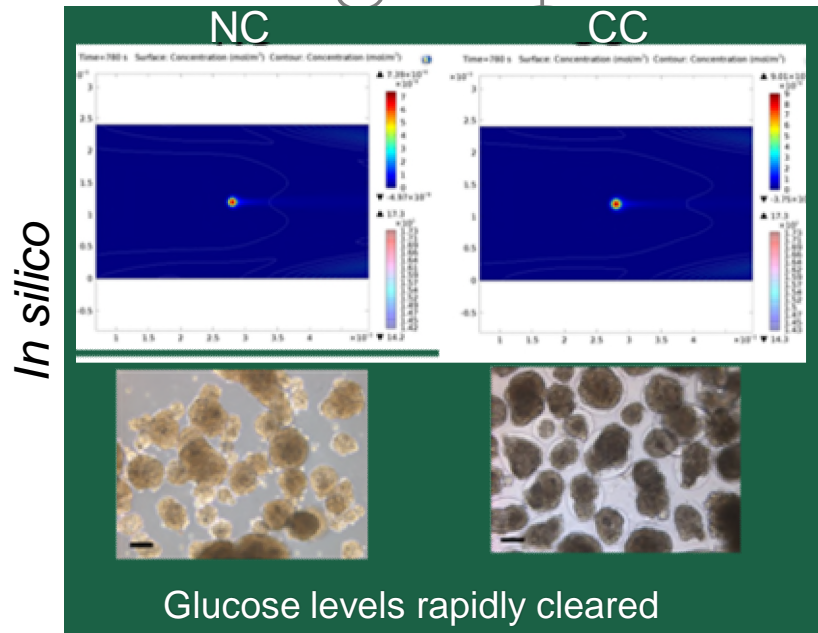
## Physiological Glucose-Stimulated Insulin Secretion



De Toni et al., *Frontiers in Bioeng & Biotech* (2022)



# Minimizing Capsule Size for In Vivo Function



BG	SC 2k	SC 1k	DC 2k	DC 1k	DC+PL L 2k	DC+PL L 1k
Avg	96	72	43	53	44	105
SD	41	11	25	15	12	42

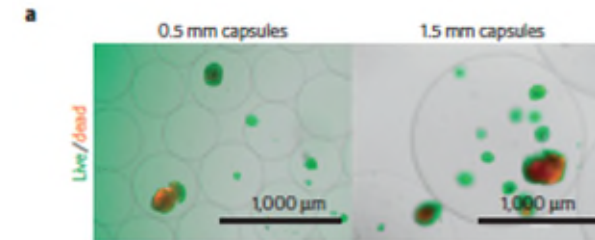
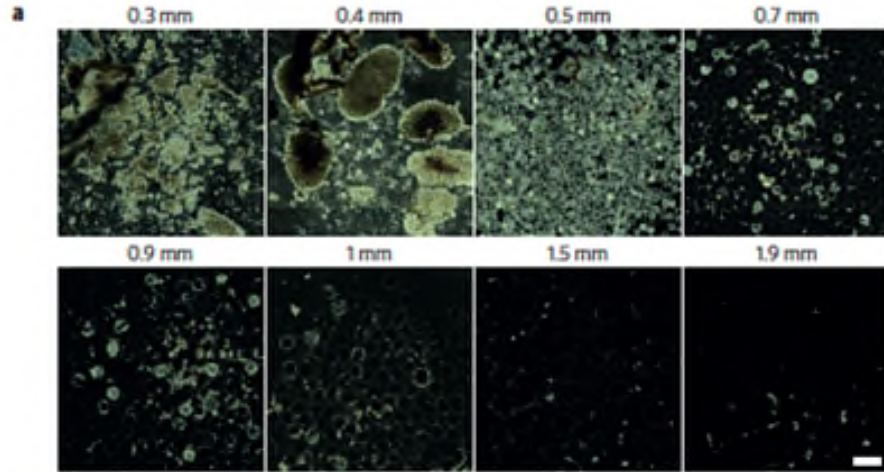
Islet diameter decreases post TX in larger capsules

Change in islet composition in larger capsules

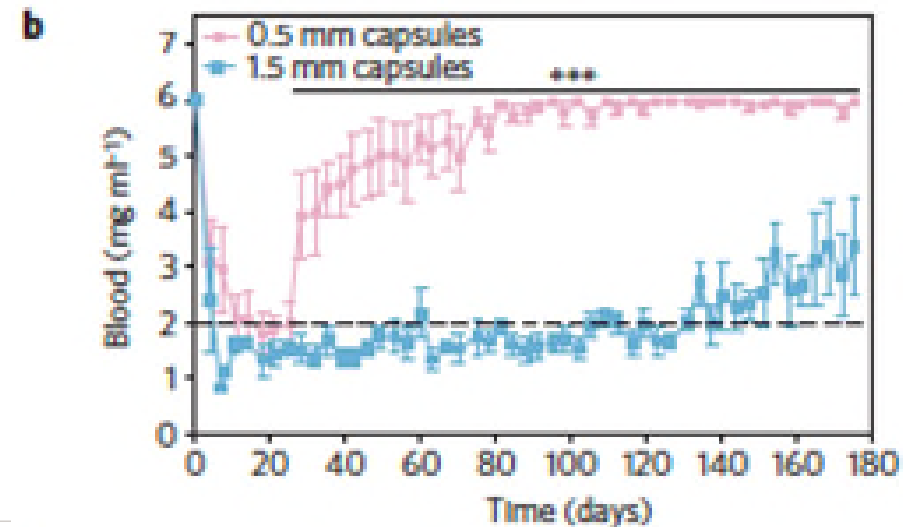
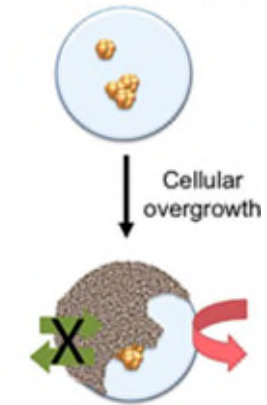
Mice receiving larger capsules experience hypoglycemia

De Toni T. et al. *Front. Bioeng. Biotechnol.*, 2022

# But...small capsules increase foreign body immune responses decreasing functionality



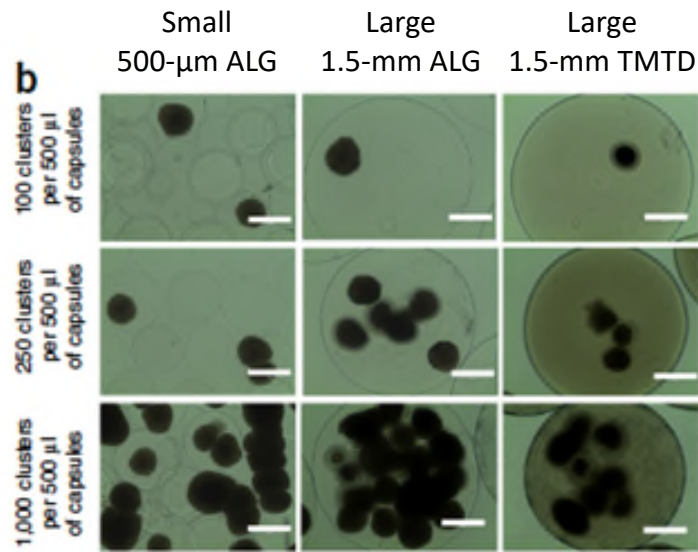
Biocompatibility



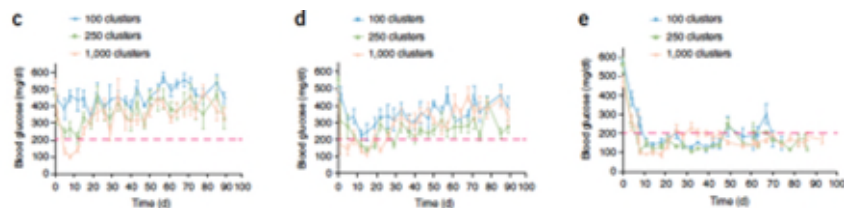
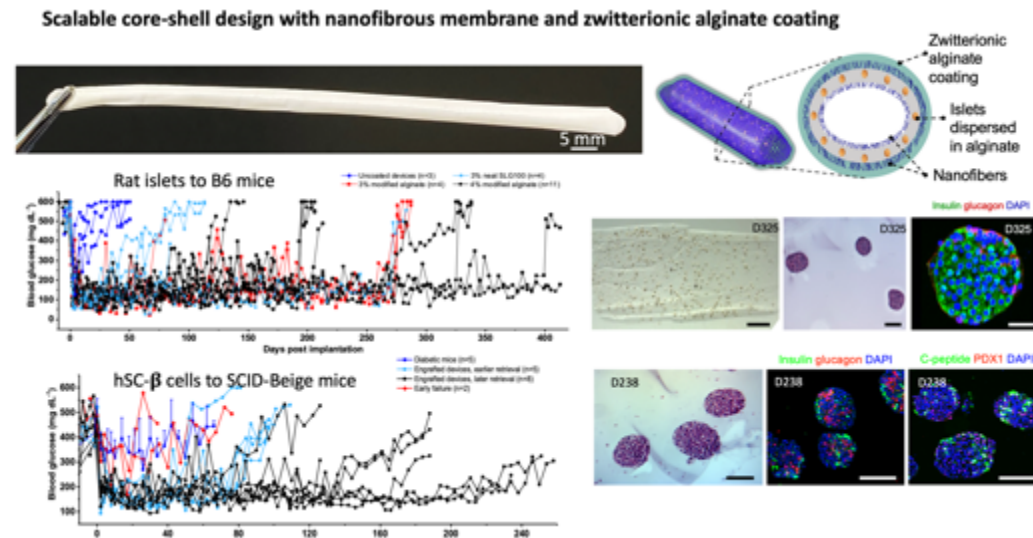
Veisoh O, Nat Mat vol. 14 (2015)

# Biomaterial modifications can reduce foreign body immune responses

SC- $\beta$  cells + TMTD alginate -> C57BL/6J mice



Rat islets in modified macrodevice -> B6 mice  
SC- $\beta$  cells -> SCID-beige mice.



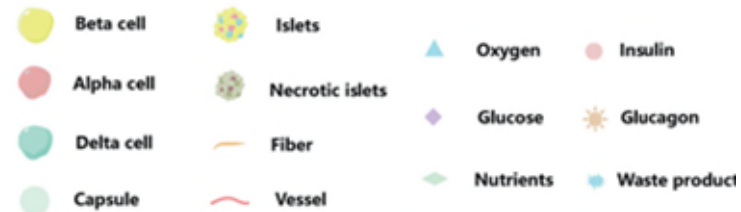
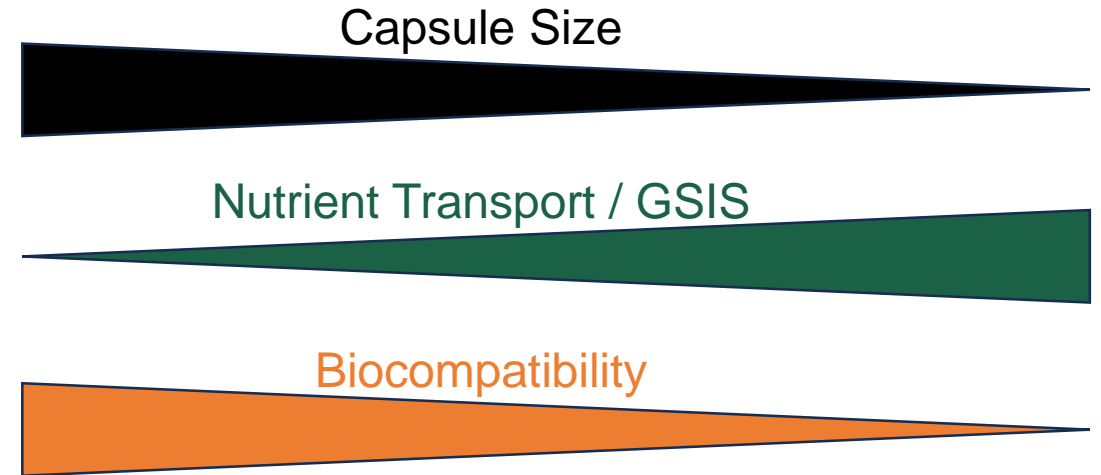
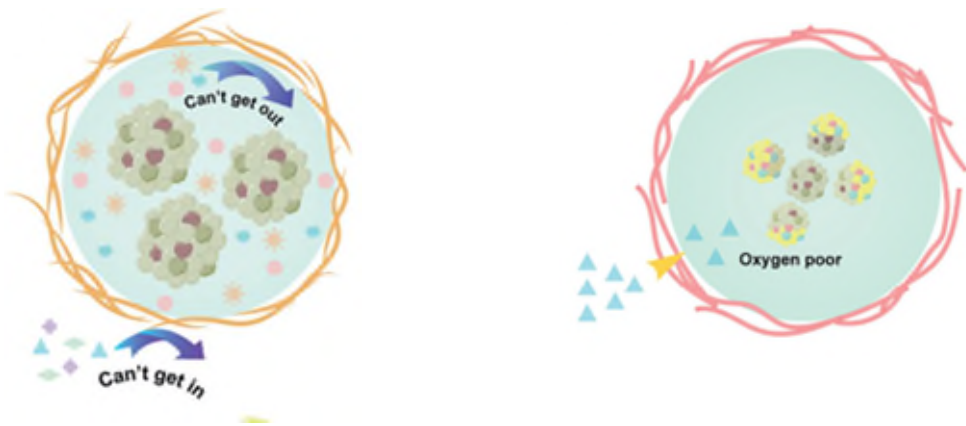
Anderson/Langer, Nature Medicine 2016

Ma, Small, 2022

# Protecting Insulin-Secreting Cells from Rejection through Biomaterial Encapsulation

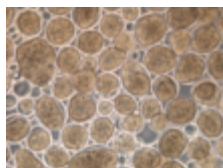
## Encapsulation Issues

- Biomaterial suboptimal *biocompatibility* may lead to fibrotic capsule formation
  - large is better
- Large capsule size even when vascularized may lead to *core hypoxia and delayed GSIS*

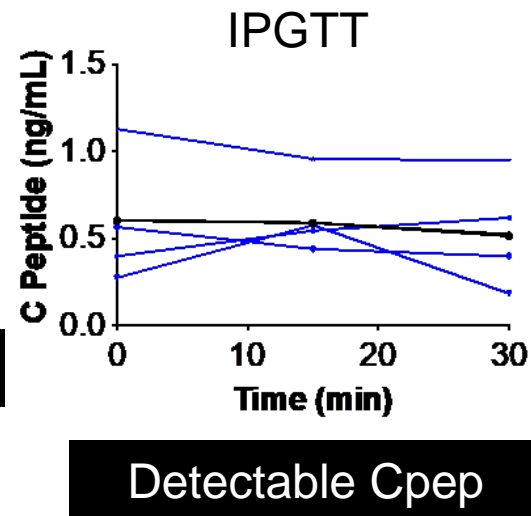
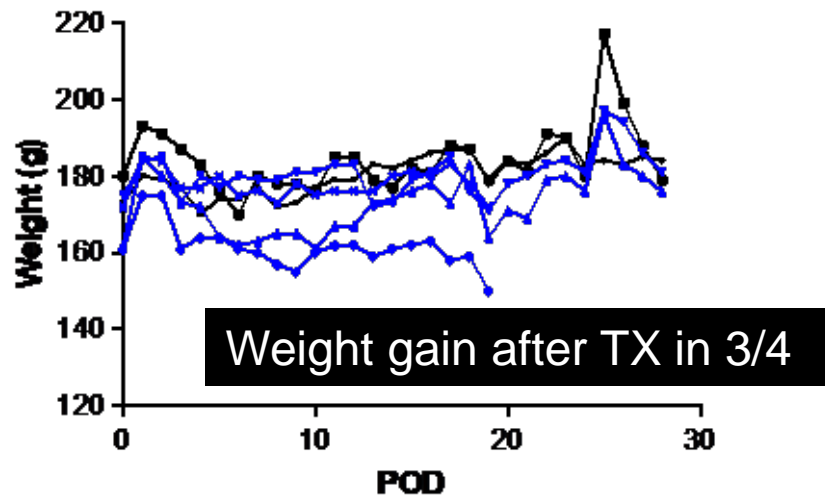
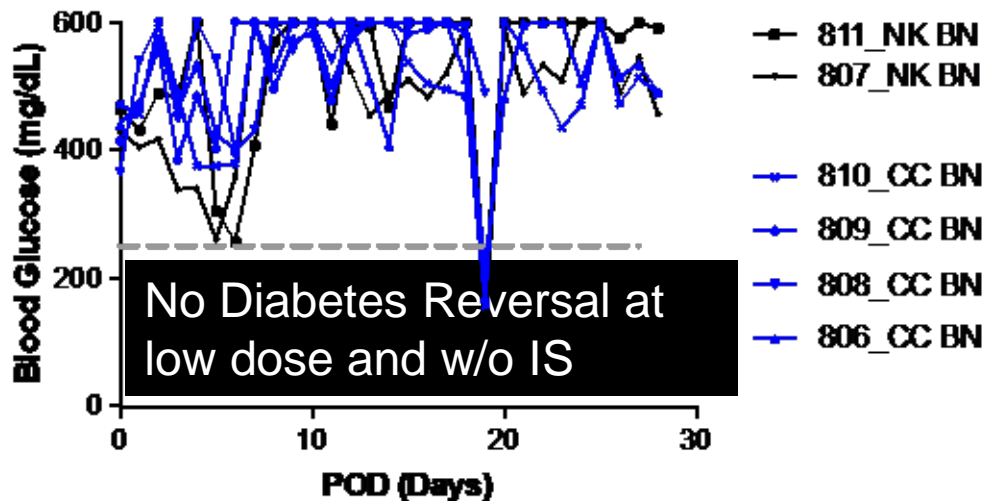


Zhang et al. Frontiers in Immunology 2022

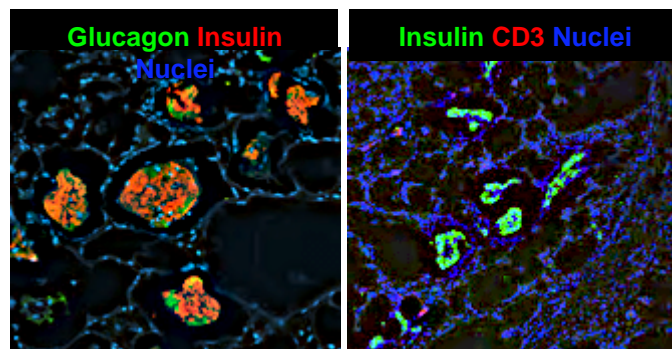
# Pilot Testing of Conformal Coating in Sernova Pre-Vascularized Subcutaneous Cell Pouch in Allogeneic Rat Islet Transplant Models Indicates Only Partial Islet Allograft Protection



Dose 3k IEQ/rat  
Allogeneic TX (BN islets->LW rats) w/o IM

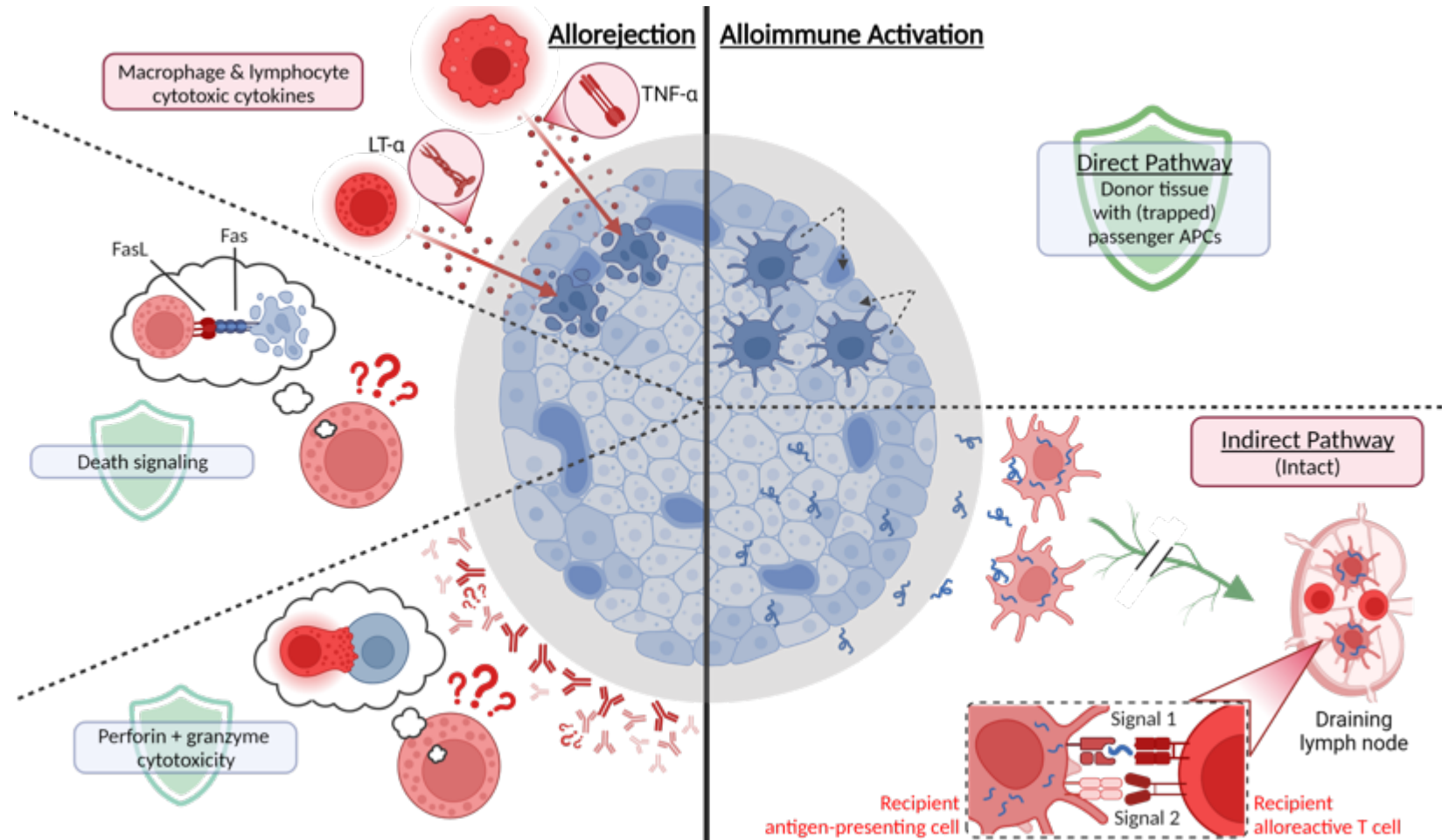


CC islets in Cell Pouch™

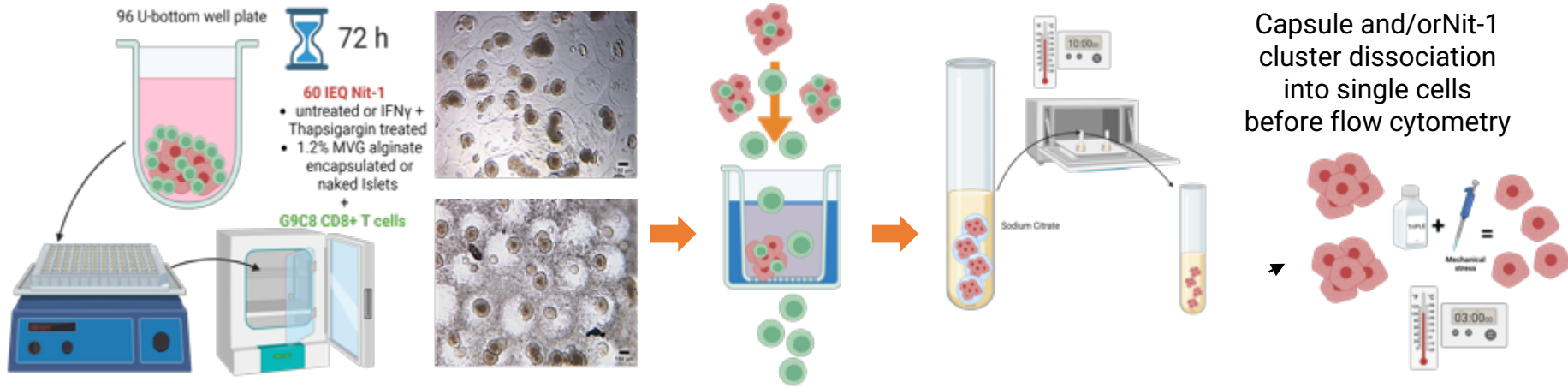


Partial CC allograft islet function w/o IM

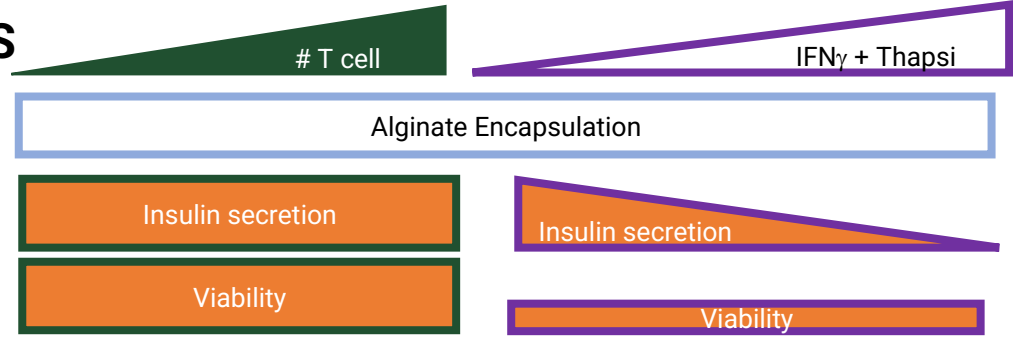
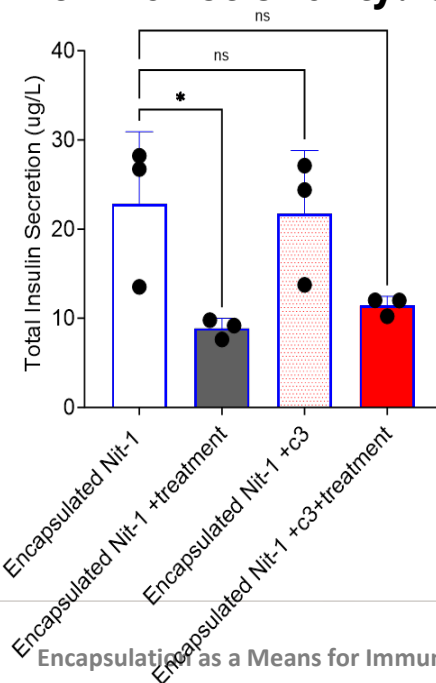
# What encapsulation does (and doesn't do) when encapsulated islets are transplanted in confined well-vascularized sites



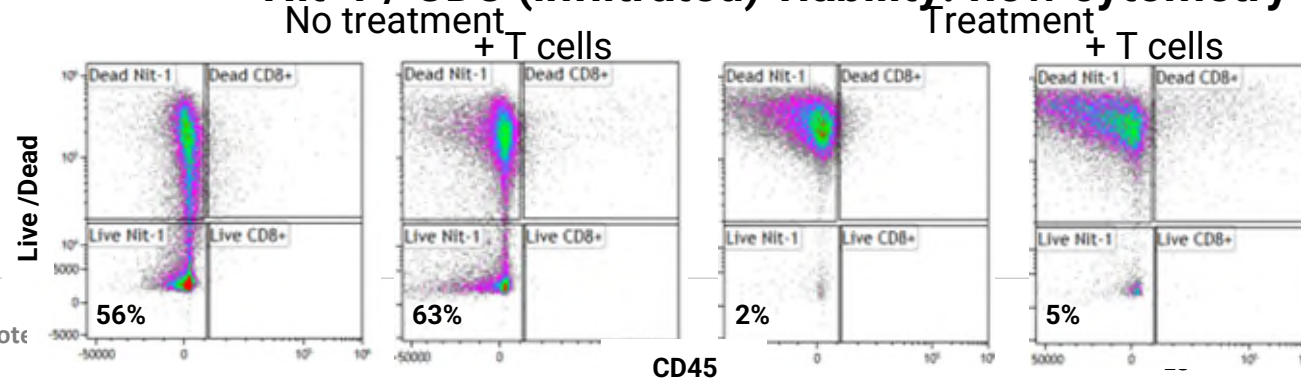
# In vitro model to evaluate the degree of protection by encapsulation on islet immune attacks in localized sites



## Nit-1 functionality: GSIS



## Nit-1 / CD8 (infiltrated) viability: flow cytometry



# Decreasing indirect alloreactive T cell activation by blocking costimulation through CTLA4Ig localized delivery

## Cytotoxic T lymphocyte antigen 4 (CTLA4)

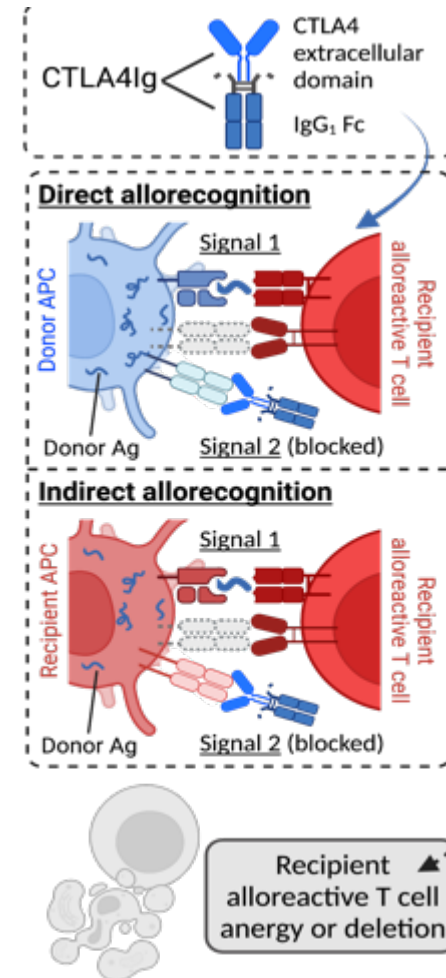
- Immune checkpoint molecule, binds to CD80/86 and interferes with signal 2
- 1991-92: CTLA4 Ig (abatacept) is created and suppresses T cell activation *in vivo*
- 2005: Two amino acid substitution → belatacept, 10x more potent

### Approved for

Belatacept	Abatacept
Heart transplant, prophylaxis of organ rejection	Graft-versus-host disease prophylaxis (acute), adult and pediatric
Kidney transplant, prophylaxis of organ rejection	Psoriatic arthritis
Lung transplant, prophylaxis of organ rejection	Rheumatoid arthritis, adult and pediatric

### Clinical Trials in Islet TX

- NCT00468403
- NCT00501709



Linsley et al. *J Exp Med.* (1991)  
 Linsley et al. *Science.* (1992)  
 Larsen et al. *Am J Transplant.* (2005)



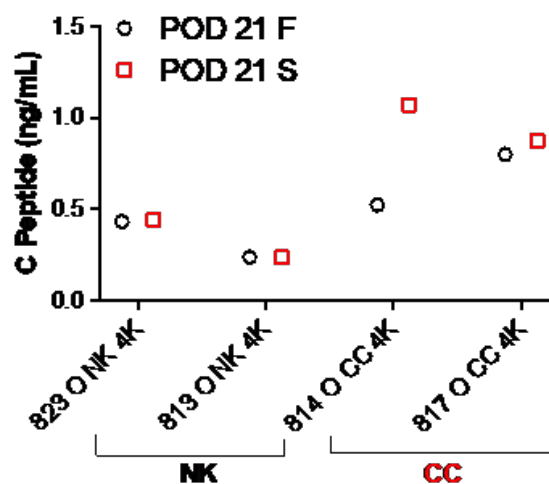
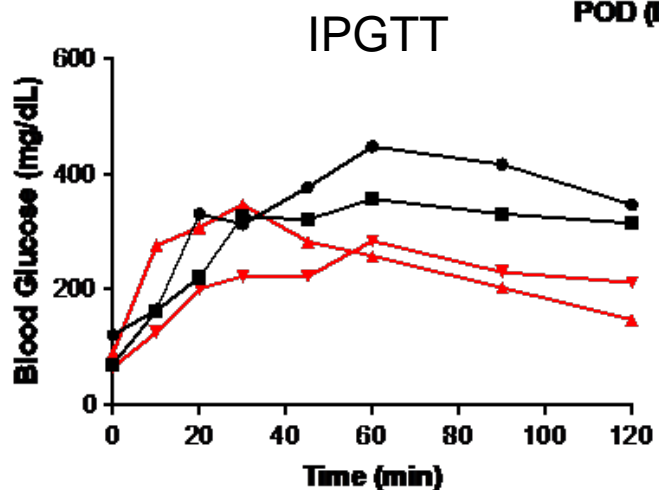
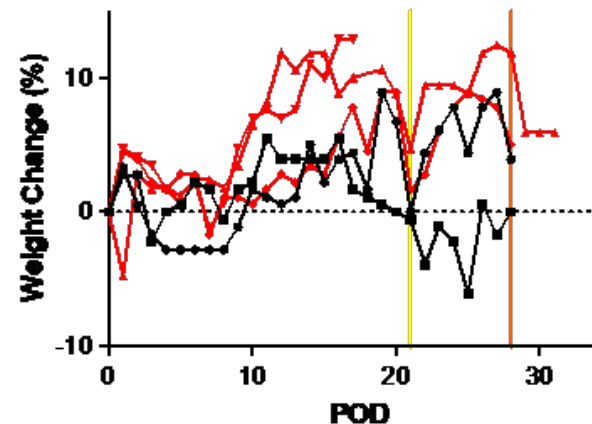
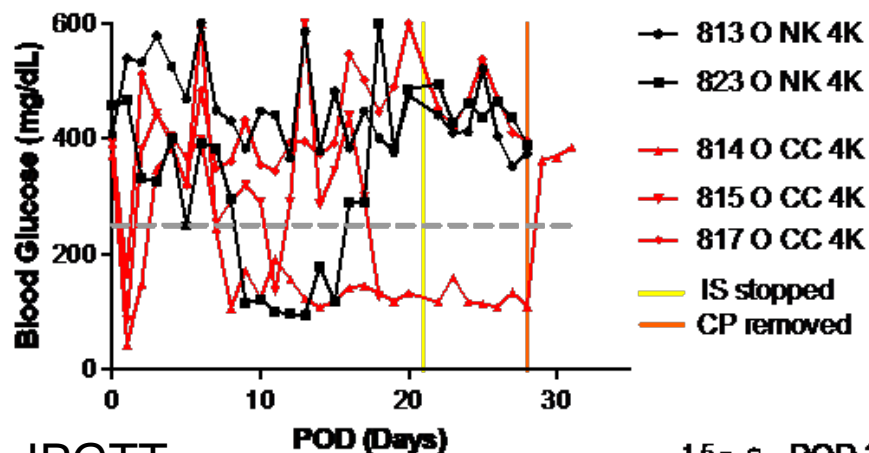
# Combination Therapy of Conformal Coating and CTLA4Ig Systemic Treatment in Sernova Subcutaneous Cell Pouch Improves Allogeneic Rat Islet Allograft Function

Dose 4k IEQ/rat

Allogeneic TX (BN islets->LW rats) w IM

+ Orencia (2mg/rat)

every other day start POD 0 until POD 21

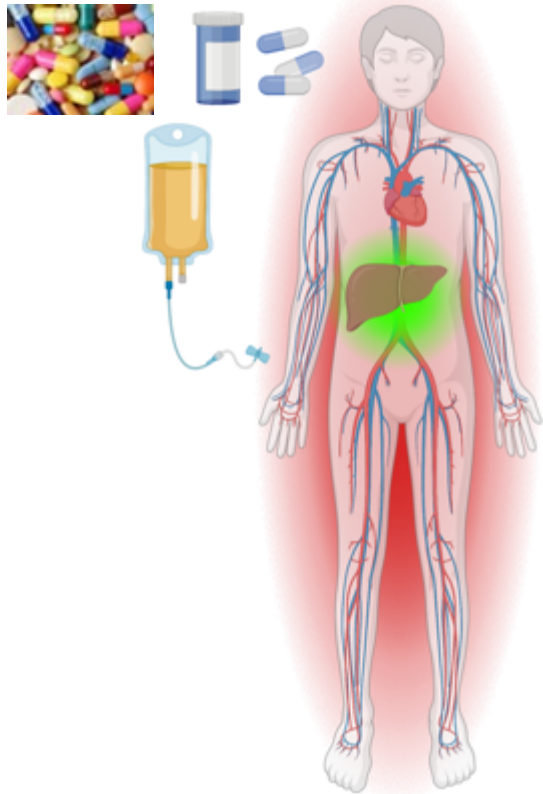


Diabetes Reversal  
in 2/3 CC and  
longer duration  
than NK

# Localized immunomodulation to limit systemic effects and increase anti-rejection efficacy in extrahepatic islet transplantation

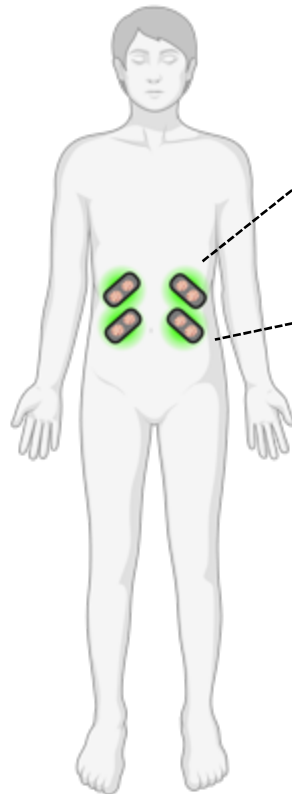
## Systemic Delivery

Therapeutic effect within intrahepatic graft



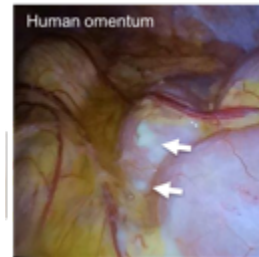
Systemic adverse effects

## Localized Co-Delivery of islets and drugs



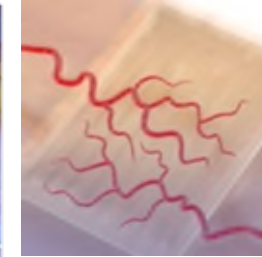
## Islet Transplantation in Extrahepatic Sites

### Omental Pouch

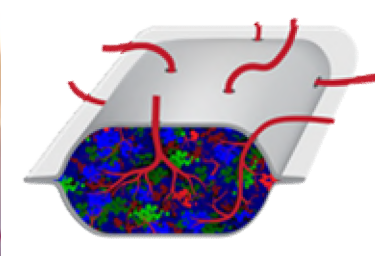


**UMiami**  
NCT02213003

### Prevascularized Subcutaneous Sites



**Sernova Corp**  
NCT03513939



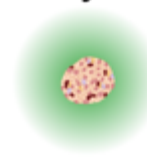
**Vertex VC-02**  
NCT03162926



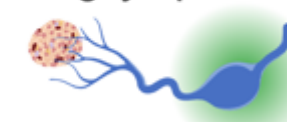
## Could enable localized immunomodulation

- ✓ Minimize systemic toxicity and immune deficiency
- ✓ Decrease drug dose / frequency
- ✓ Increase drug bioactivity

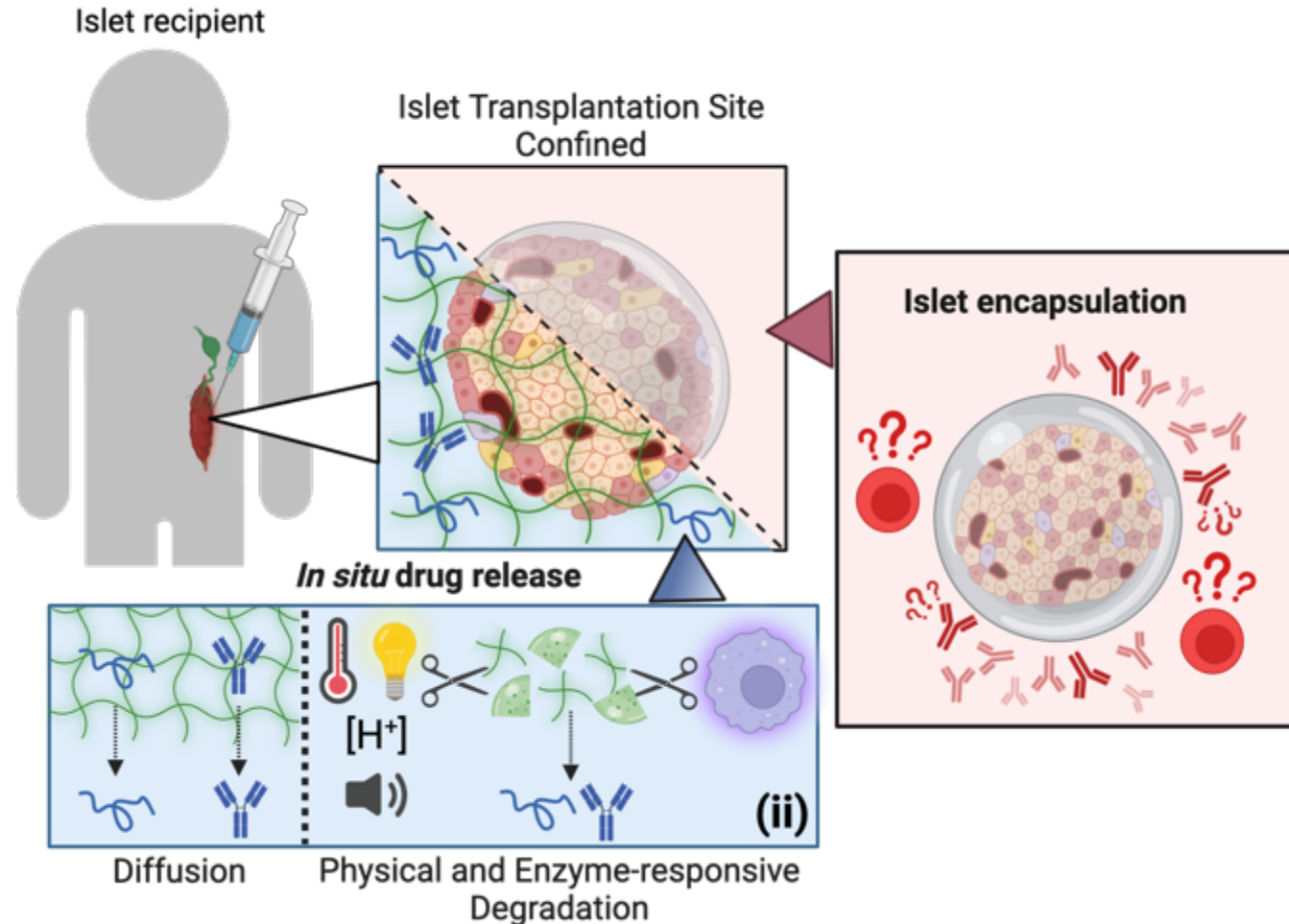
### 1.1 Locally in Graft



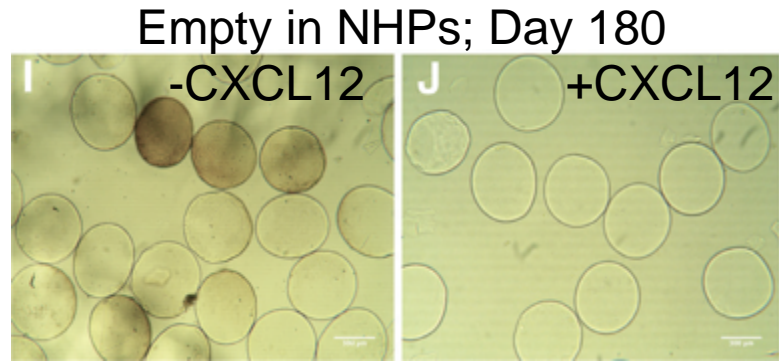
### 1.2 Locally in graft-draining lymph nodes



# Combination of islet encapsulation and local immunomodulation for transplantation in confined sites

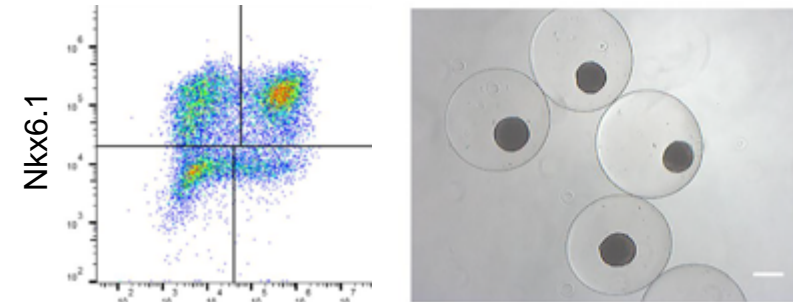


# Example: CXCL12 co-delivery with alginate capsules



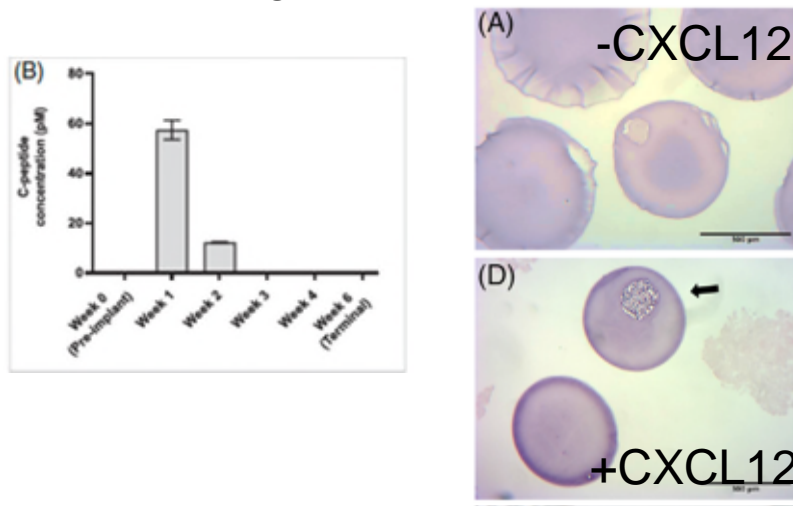
Sremac M et al., Transplantation Direct 2019

## SC-islets -> B6 mice

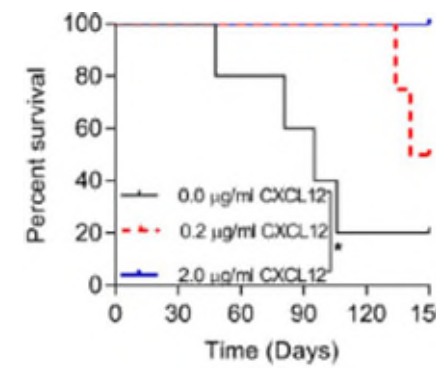
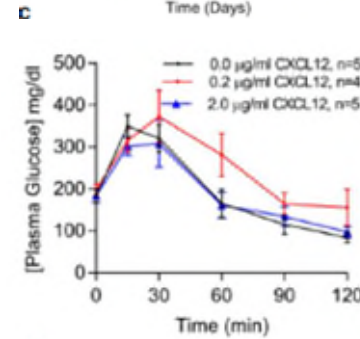
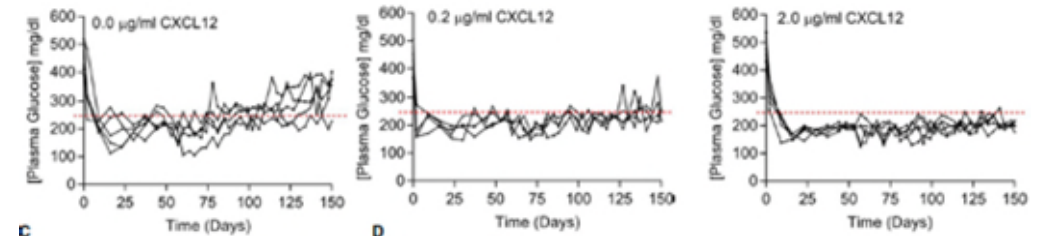


C-peptide

## Pig islets in NHPs



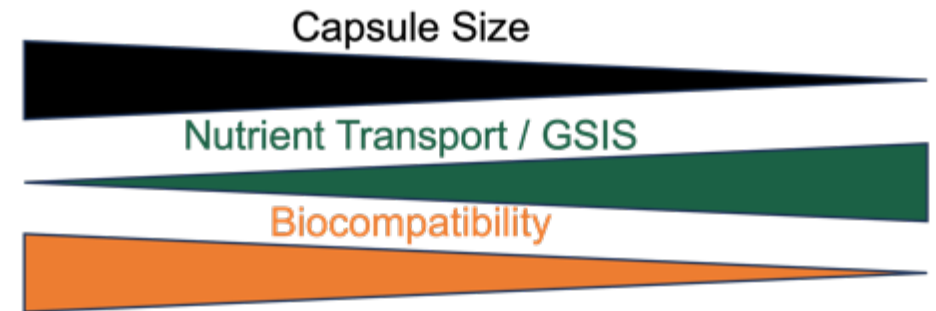
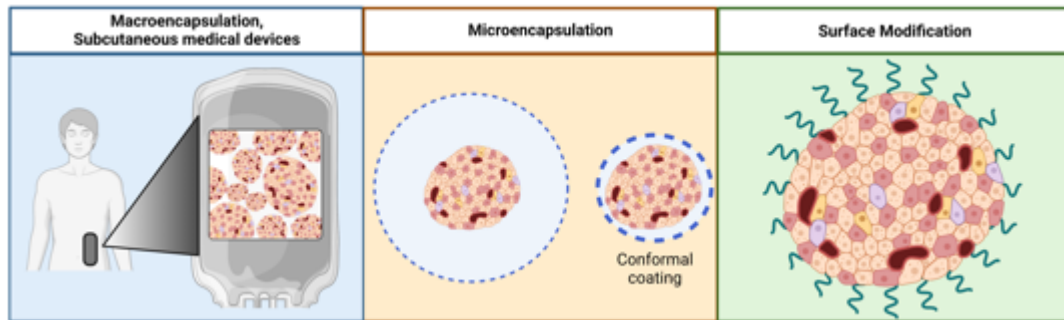
Sremac M et al., Xenotransplantation 2023



Alagpulinsa D et al., Am J Transplant 2019

# Conclusions:

- ✓ Islet immunoisolation through encapsulation requires biomaterials with
- ✓ selective and stable permeability
- ✓ stable mechanical properties
- ✓ Several capsule designs have been tested in small, large animals, and humans characterized by scale (macro / micro / nano) some of these requiring co-administration with immunomodulatory drugs

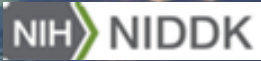


- ✓ Elimination of empty capsules feasible by gradient centrifugation
- ✓ Larger capsules in the peritoneal cavity worse for GSIS and in vivo function but better for biocompatibility
- ✓ Transplantation of islets in minimal thickness coatings (conformal) does not provide protection to indirect alloreactive T cells in rats requiring combination with immunomodulatory drugs which could be delivered locally in the graft
- ✓ Immunomodulatory drugs can be co-delivered with encapsulated islets in localized extrahepatic sites through localized immunomodulation

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