

# EDI-Co Skin 3D-Co-culture model combined with RBM MAP analyses: Optimized examination of human immune cell function in skin product testing

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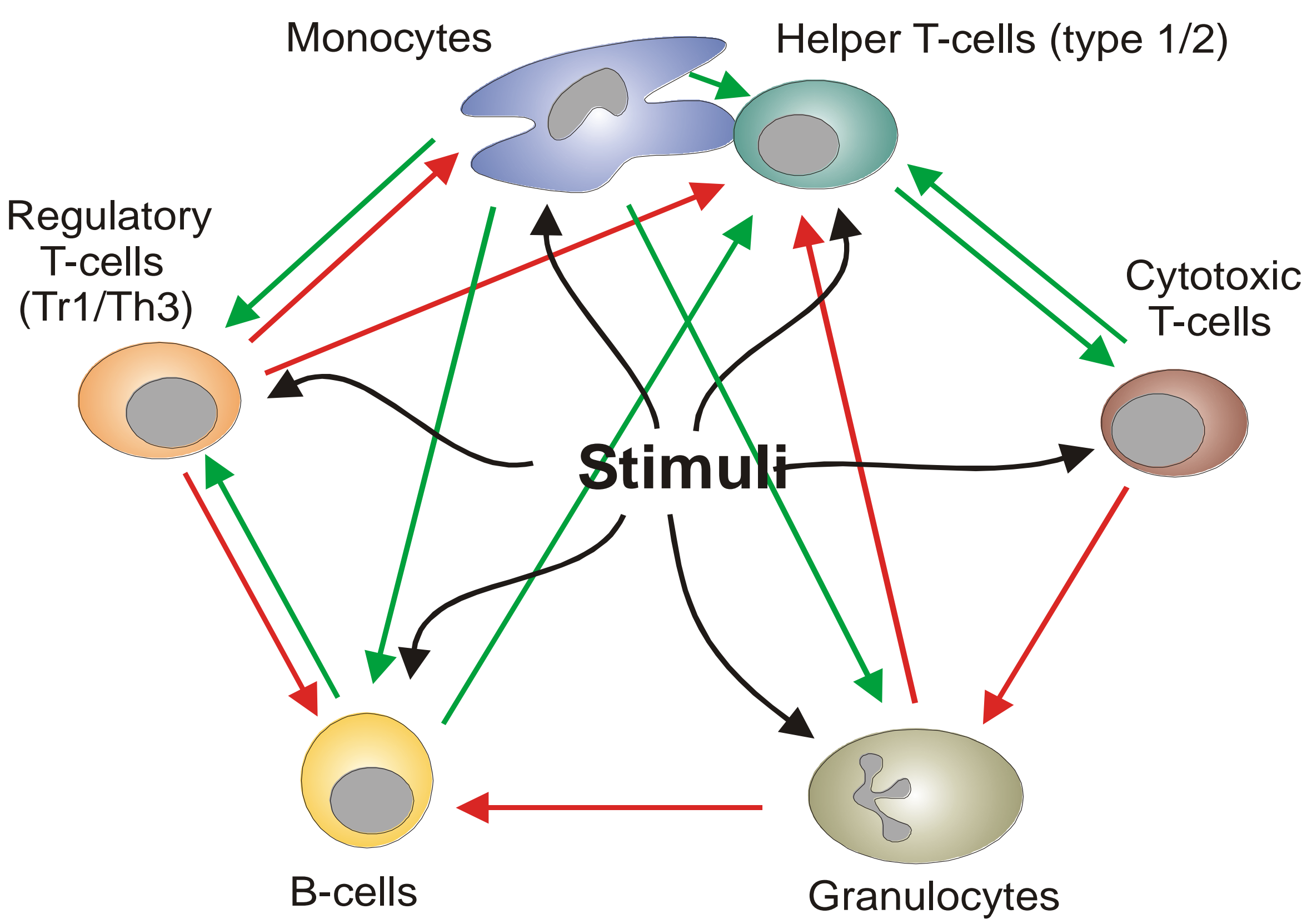
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## Background

### Complex interaction of immunocompetent cells

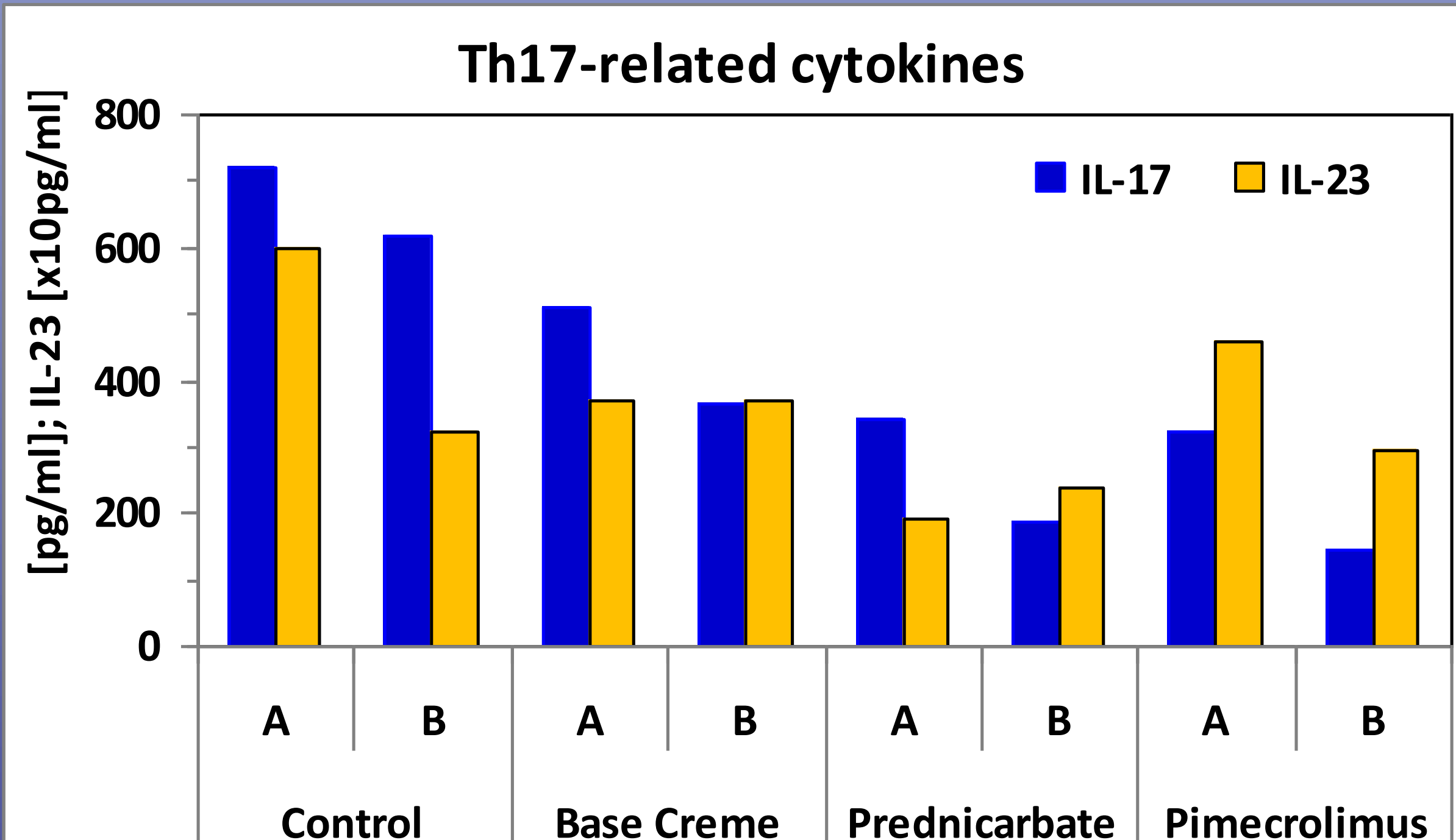
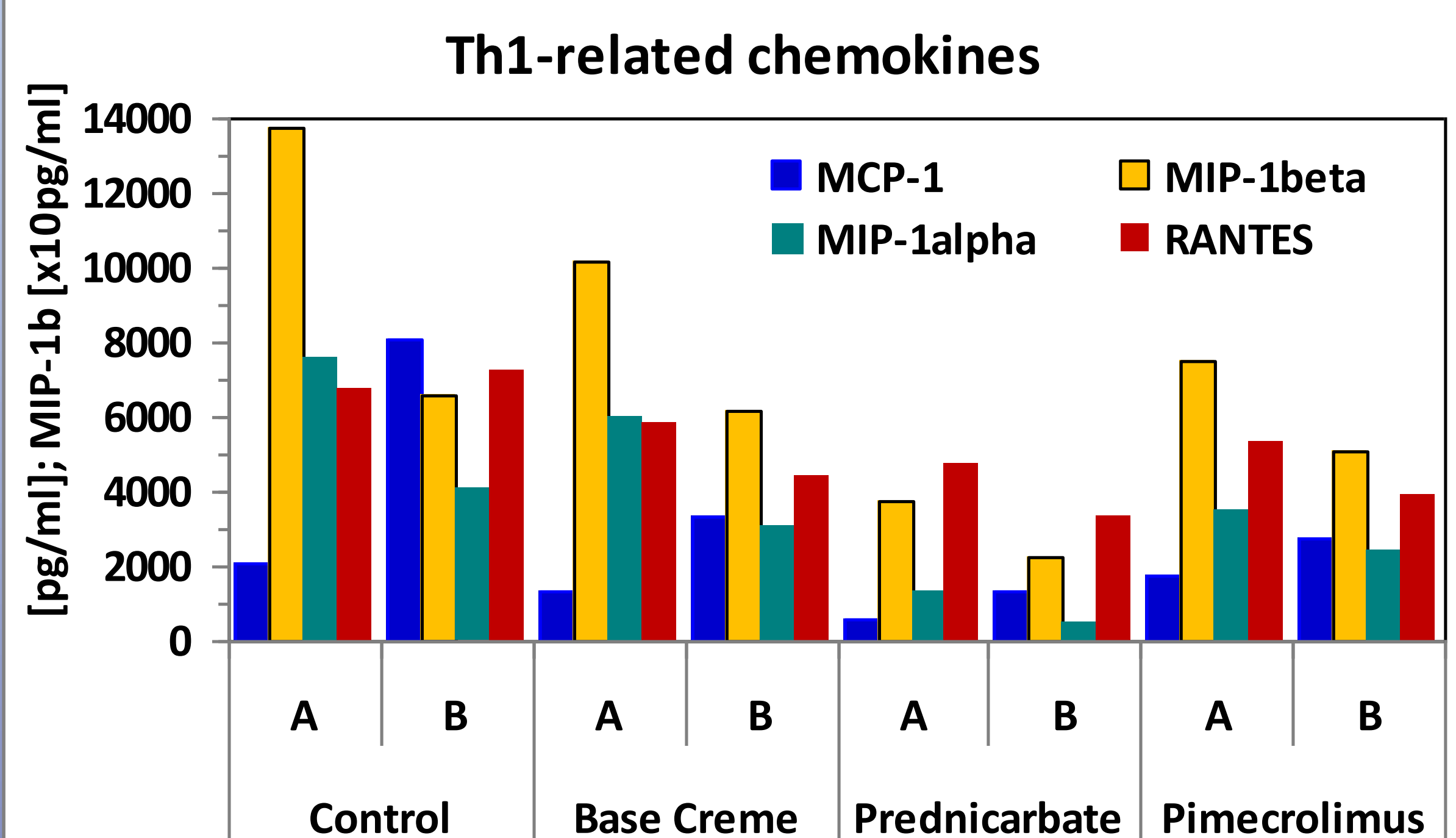
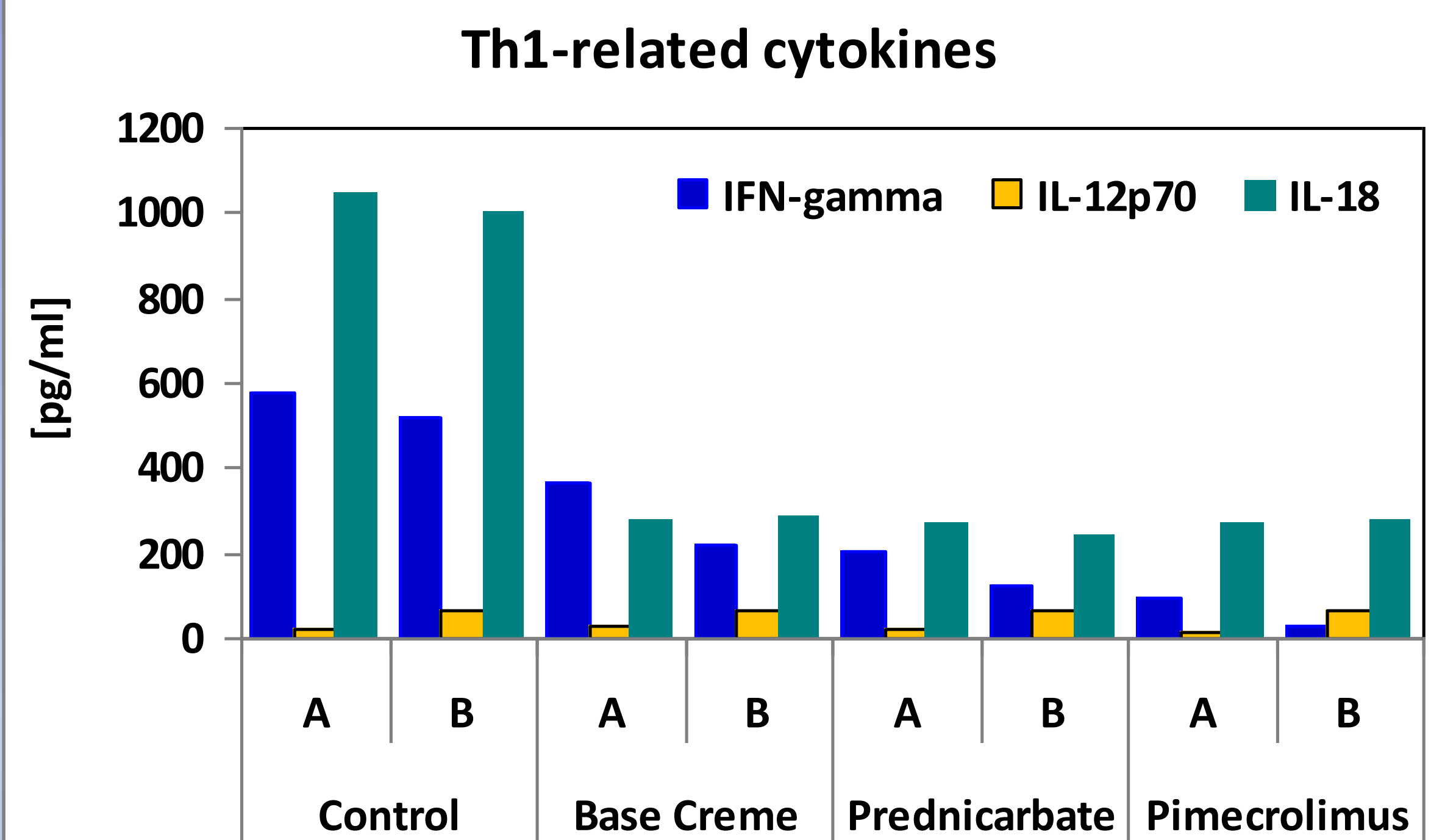


Immune reaction and inflammation is highly controlled by a dialogue between cells of the immune system and cells of the various tissues. This is accomplished by the release of messenger substances (cytokines, chemokines etc.) that are part of a complex regulation network and synthesized in response to various stimuli. Application of remedies may exert a strong influence on this network in health and diseases. Organo-typical conditions to investigate drug effects on immunocompetent cells can be obtained e.g. by combining differentiated human 3D-epidermis together with human whole blood cell cultures in a two-chamber culture model. To study the effect of two standard drugs used in the treatment of atopic dermatitis we analyzed the interactions of the glucocorticosteroid *Prednicarbate* and *Pimecrolimus*, a calcineurin inhibitor on immune cells from two healthy donors in the EDI-Co skin, a co-culture model of epidermis and whole-blood. Mediators were tested by RBM (Luminex) MAP assays.

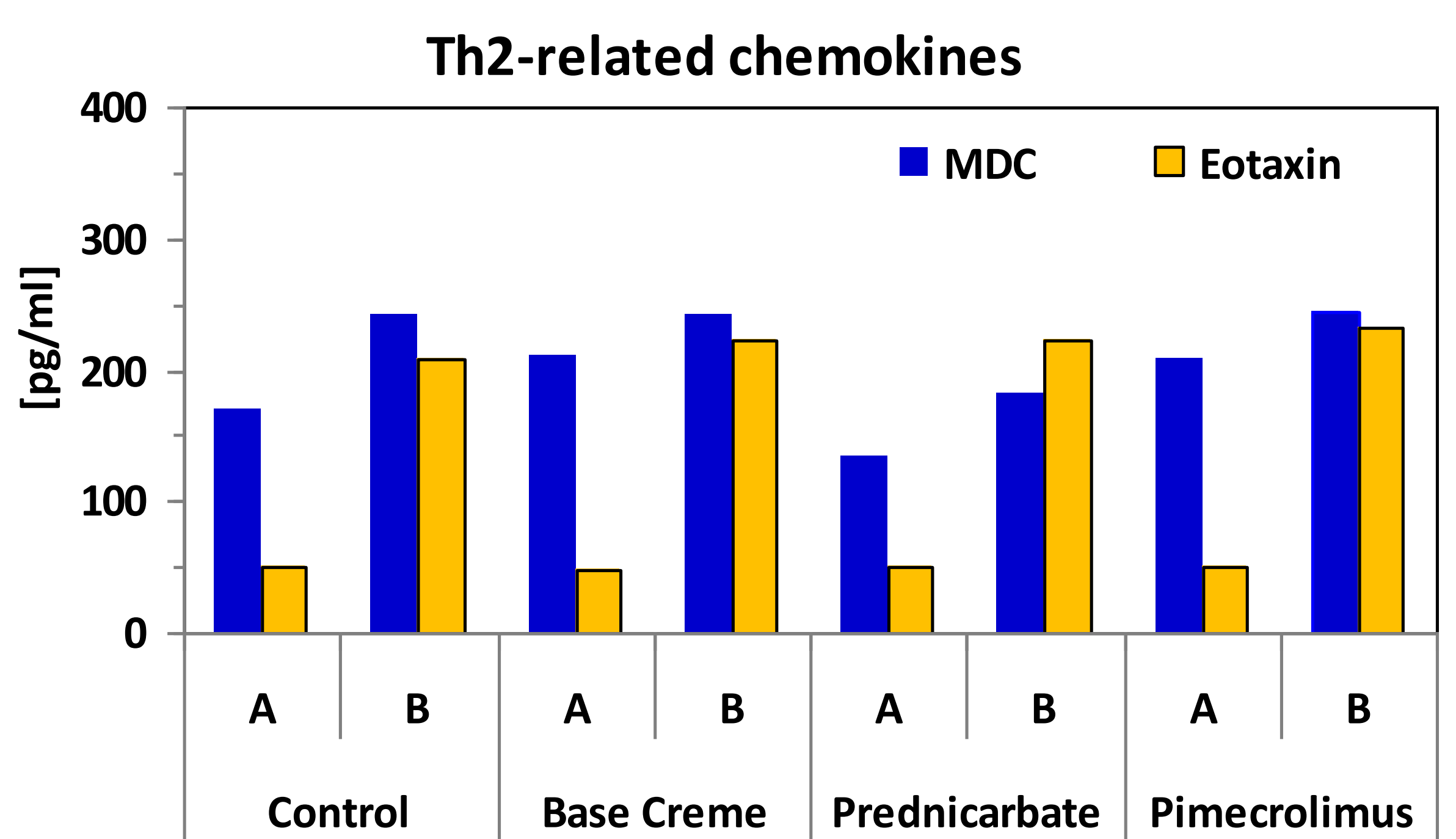
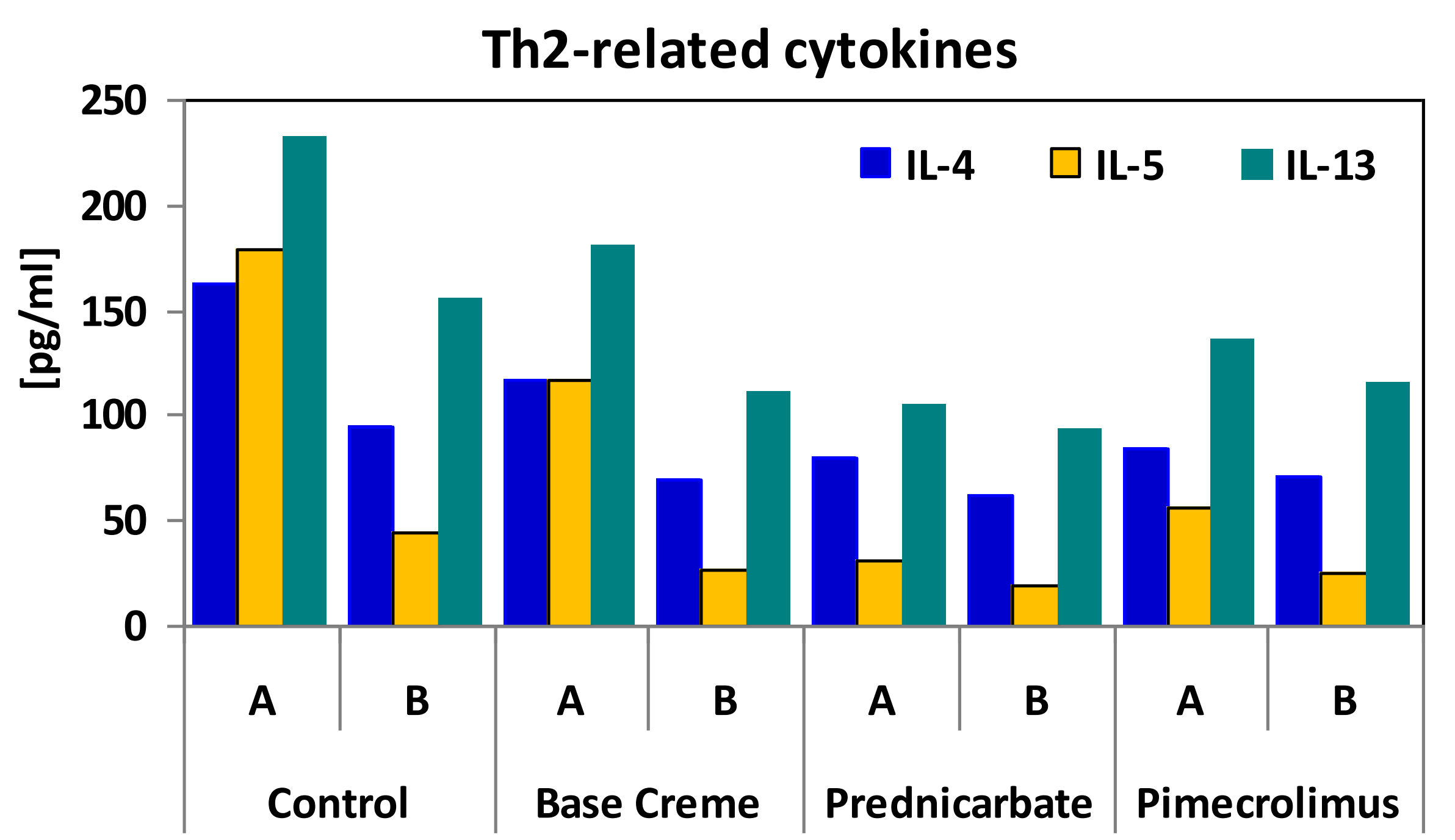
### Multi-Analyte Profiles (MAPs)

Th1-related	Th2-related	Treg-related	Chemokines	Cancer antigens
Interferon- $\gamma$ Interleukin-12p40 Interleukin-12p70	Interleukin-4 Interleukin-5 Interleukin-13	Interleukin-10	ENA-78 Eotaxin Interleukin-8 Lymphotactin MCP-1 MDC MIP-1 $\alpha$ MIP-1 $\beta$ RANTES	Alpha-Fetoprotein Cancer Antigen 19-9 Cancer Antigen 125 Carcinoembryonic Antigen Prostatic Acid Phosphatase PSA, Free
Monocyte/M $\phi$ -related	Others		Cardio-/vascular disease related proteins	
G-CSF Interleukin-1ra Interleukin-1 $\alpha$ Interleukin-1 $\beta$ Interleukin-6 Tumor Necrosis Factor- $\alpha$	Epidermal Growth Factor FGF-basic GM-CSF IGF-1 Stem Cell Factor Tumor Necrosis Factor- $\beta$	Interleukin-2 Interleukin-3 Interleukin-7 Interleukin-15 Interleukin-16	Apolipoprotein A-1 Apolipoprotein C-III CK-MB Endothelin-1	Fatty Acid BP Lipoprotein (a) Myoglobin PAPP-A
Enzymes	Hormones/BP	Receptors/Ligands	Others	
GST MMP-2 MMP-3 MMP-9 Myeloperoxidase SGOT	Adiponectin Calcitonin Erythropoietin Growth Hormone Insulin Leptin Sex Hormone Binding Globulin Thrombopoietin Thyroid Binding Globulin Thyroid Stimulating Hormone	CD40 CD40Ligand ICAM-1 Tissue Factor Tumor Necrosis Factor RII VCAM-1	Alpha-1 Antitrypsin Alpha-2 Macroglobulin Apolipoprotein H BDNF Beta-2 Microglobulin Complement 3 C-Reactive Protein ENRAGE Ferritin Haptoglobin Serum Amyloid P	Immunoglobulin A Immunoglobulin M Immunoglobulin E VEGF Factor VII Fibrinogen von Willebrand Factor PAI-1 TIMP-1

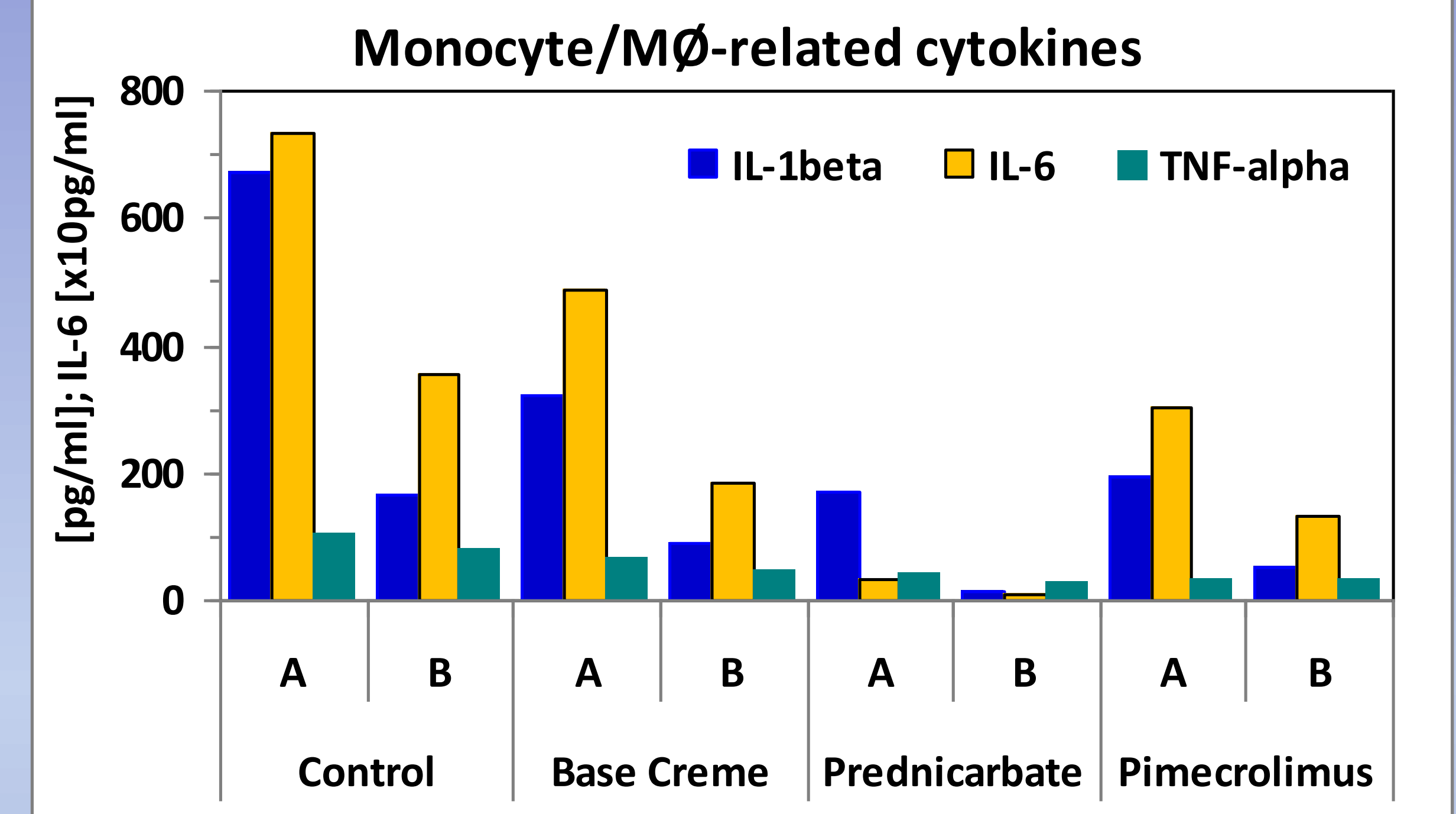
## Th1 / Th17-related mediators



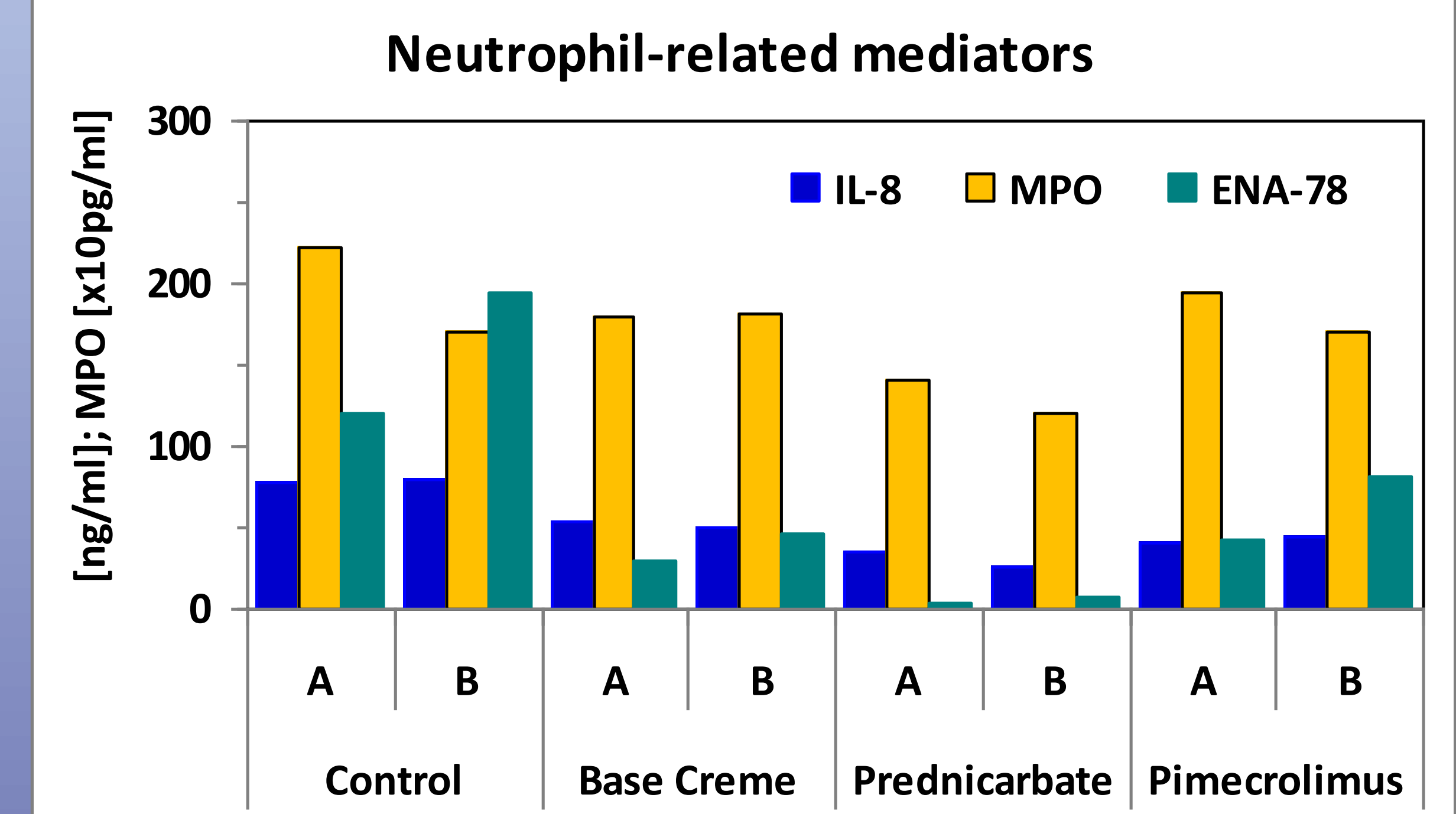
## Th2-related mediators



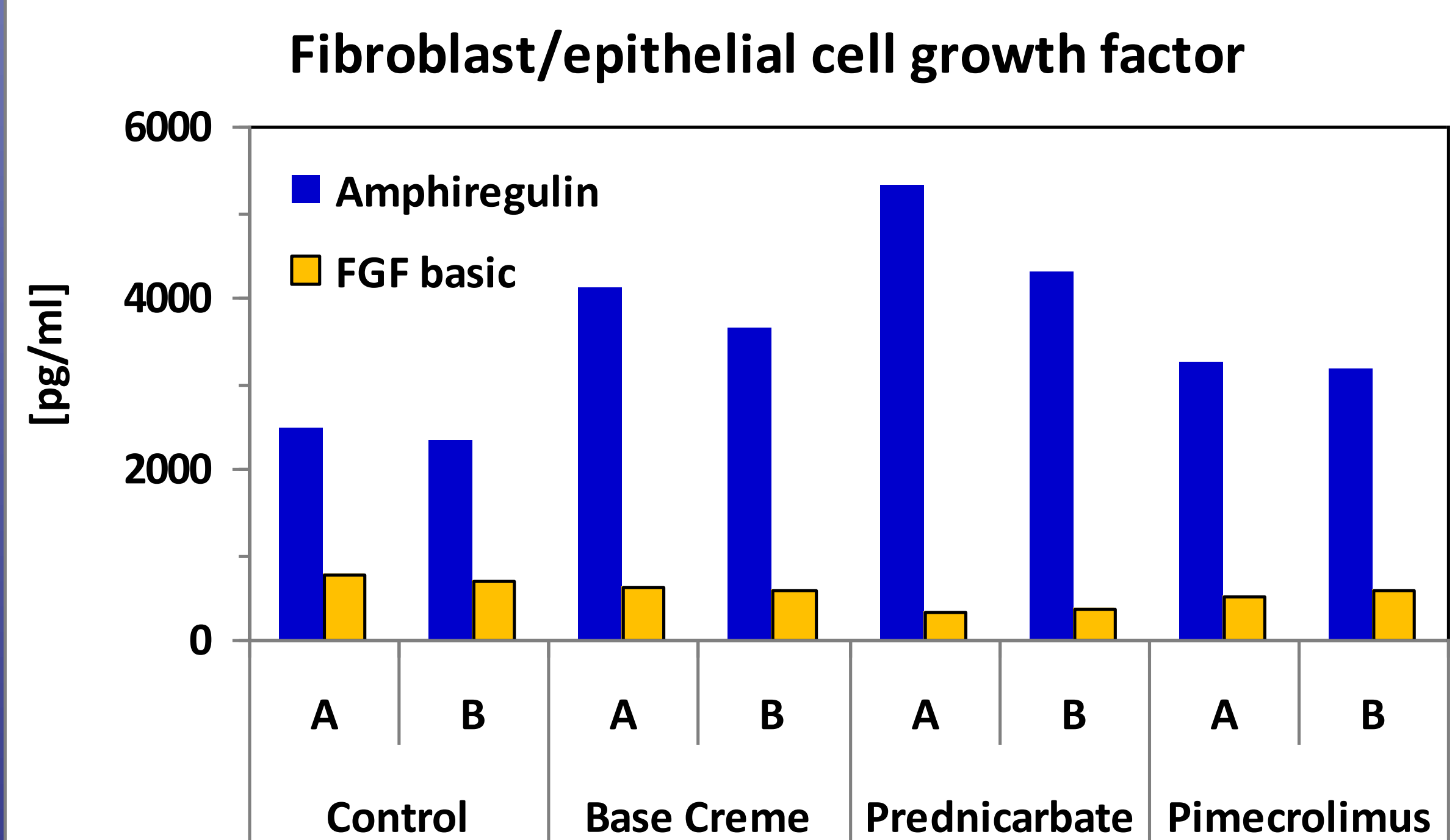
## Monocyte/M $\phi$ -related mediators



## Neutrophil-related mediators



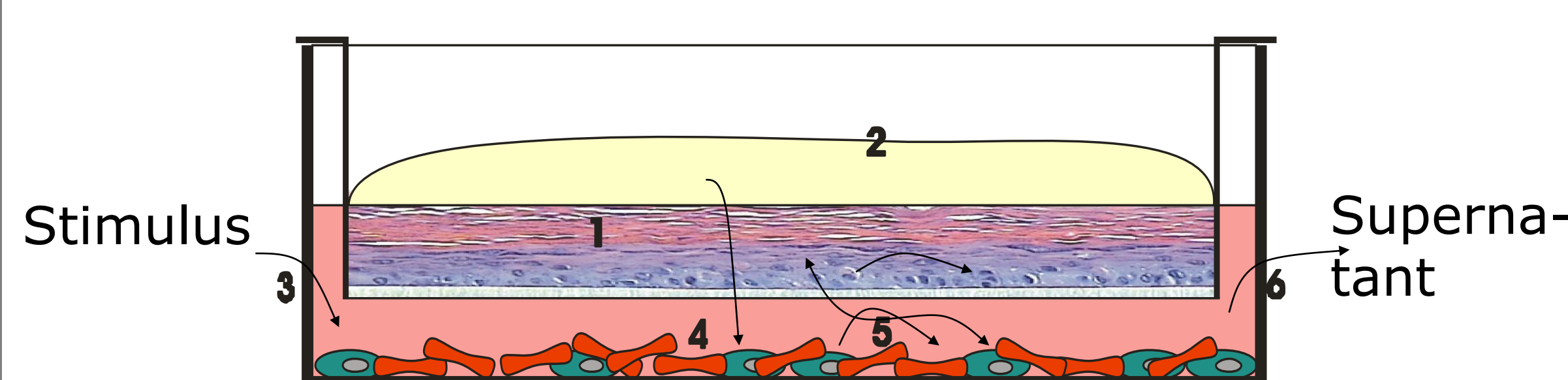
## Fibroblast / epithelial cell growth factors



## Results and Conclusions

EDI-Co skin, a co-culture model consisting of differentiated human 3D epidermis together with whole-blood was used to get deeper insight into the complex interaction of the glucocorticosteroid *Prednicarbate* and the calcineurin inhibitor *Pimecrolimus* with the human immune system during dermal application in an inflamed skin environment. Mediators were analyzed by RBM MAP analysis. We could demonstrate that both drugs were able to inhibit a variety of inflammatory mediators being either Th1- or Th17-cell, monocyte/M $\phi$ - or granulocyte-associated. *Pimecrolimus* exerted its strongest inhibitory activity on the release of the Th1 cytokine IFN- $\gamma$ , while Th2-cell mediators were less affected. *Prednicarbate* proved very potent in this model with respect to the inhibition of most inflammatory cytokines and chemokines. Interestingly, among a variety of 98 mediators amphiregulin was the only mediator which was clearly up-regulated. This molecule has been suggested to be involved into keratinocyte and epithelial cell proliferation, probably indicating that, besides an anti-inflammatory activity of the two drugs, further mechanisms may be of relevance. From the data presented here, it is evident that the complex drug effects can be tested under in-vivo-like conditions with even final formulations of skin products when combining the EDI-Co skin co-culture model with the multiplexed Luminex mediator analysis MAP, as offered by RBM.

## EDI-Co skin A completely human 3D Co-Culture System



1. Differentiated, multi-layered epidermis in the upper chamber
2. Incubation with drug preparation (soluble or even insoluble)
3. Immune cell activation (whole-blood in lower chamber)
4. Drug transportation/penetration
5. Mediator cross-talk within and between the compartments
6. Determination of various endpoints (mediators, enzymes, etc.)



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