

Fibrin Hydrogel-Based Delivery for Pancreatic Organoid Therapies

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INTRODUCTION

Background:

- 1.25 million Americans have Type 1 Diabetes (T1D), a condition where the body is unable to create insulin to regulate glucose^[1]
- Current T1D treatments require stringent and intrusive monitoring of glucose and administering of insulin
- Research has been conducted to create pancreatic organoids (group of cells functioning as an "organ-like" structure) to restore patient's insulin production

Needs Statement:

- Develop a highly immune compatible organoid therapy system for patients with impaired insulin production for recapitulation of pancreatic function without rejection.

Proposed Solution:

- Organoid Therapeutics has developed such an organoid therapy - Said therapy currently lacks a protection/delivery mechanism
- **Objective:** Create an immunomodulating coating that encourages organoid integration and ensures cell survival

We've developed a fibrin-based, immune-compatible organoid encapsulation method

DESIGN OF SOLUTION



Organoid Coating System: "Powdered Doughnut Method"

response



- a) Organoids inside the wells
- b) Fibrinogen solution added to the well binds to the cells c) Thrombin cleaves the fibrinogen to form fibrin and is agitated
- d) Agitation leads to even coating of fibrin around each organoid

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PROOF OF FEASIBILITY

Fibrin Properties Ideal for Organoid Protection

- Elastic and viscous properties
- If cross-linked, can withstand large amounts of stress
- Young's modulus = 14.5 ± 3.5 MPa^[2] - Can stretch up to 3.3 times its original length
 - *Fracture strain* = 332%^[2]

Coating Method Effectively Coats Organoids

- Anticipated coating tests on the following:
 - 1) Fabricated alginate beads
 - 2) Liver tissue spheroids
 - 3) Pancreatic organoids
- Results of preliminary alginate bead testing:



Organoid Survivability During Injection



- Generalized velocity profiles shown above - Calculated wall shear for varying needle gauge and flow
- conditions shown below

| Wall Shear (Pa) | | | | | | | | | |
|-----------------|-----|-----------------------|--------|--------|--------|--------|--------|--------|--------|
| | | Inlet Flow Rate (m/s) | | | | | | | |
| | | 0.005 | 0.01 | 0.015 | 0.02 | 0.025 | 0.03 | 0.035 | 0.04 |
| Needle Gauge | 24G | 136.7 | 273.4 | 410.2 | 546.9 | 683.6 | 820.3 | 957.1 | 1093.8 |
| | 26G | 234.0 | 468.0 | 702.0 | 936.0 | 1170.0 | 1404.0 | 1638.0 | 1872.0 |
| | 27G | 444.1 | 888.2 | 1332.3 | 1776.4 | 2220.4 | 2664.5 | 3108.6 | 3552.7 |
| | 28G | 660.2 | 1320.4 | 1980.6 | 2640.8 | 3301.0 | 3961.2 | 4621.4 | 5281.6 |

- Fibrin elasticity withstands even the largest shear values

Future Testing:

- *Hypothesis: Hydrogel coating will be thinner around organoids* - Integrin binding will allow a thin coating of fibrinogen to adhere to the surface
- Finish coating tests with liver tissue and organoids
- Optimize needle gauge by performing live-dead assay on organoids after injection

- *In vivo* testing in mice over several months monitoring insulin levels to determine number of organoids per dose and frequency of dosages

- Fabricated alginate beads (~ 0.5 mm in diameter)
- Fibrin hydrogel developed evenly around bead

REGULATORY PATHWAY & PATENTS

Regulatory Pathways^[3]:

- Solution is classified as a "biologic"
- therapeutics

 - (e.g. Premarket Approval)

Patent Information^[4, 5, 6, 7, 8]:

- devices

COSTS & REIMBURSEMENT

Cost Breakdown per Dose*:

Total material cost per

Total labor cost per do

50% overhead costs

25% profit margin

Total selling price for

* One Dose = 7000 organoids, does not include one time equipment costs

Reimbursement^[3]:

Organoid therapies could revolutionize T1D care

- distribution setup

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[1] Gale, E.A.M. "Epidemiology of Type 1 Diabetes." Diapedia 2104085168 rev. no. 39, 2014. [2] Litvinov, R. I., & Weisel, J. W. (2017). Fibrin mechanical properties and their structural origins. Matrix biology : journal of the International Society for Matrix Biology, 60-61, 110–123. https://doi.org/10.1016/j.matbio.2016.08.003 [3] FDA. (Dec 2017). Regulatory Considerations for Human Cells, Tissues, and Cellular and Tissue-Based Products: Minimal Manipulation and Homologous Use. Center for Devices and Radiological Health & Center for Biologics Evaluation and Research

https://www.fda.gov/regulatory-information/search-fda-guidance-documents/regulatory-considerations-human-cells-tissuesand-cellular-and-tissue-based-products-minimal [4] Drohan, William N et al. (1995). Supplemented fibrin matrix delivery systems. US7229959B1. Washington, DC: U.S. Patent and Trademark Office.

[5] Feyeux, Maxime et. al. (2017). Neural tissue unit and use of such a unit for implantation into the nervous system of a mammal. US20200063099A1. Washington, DC: U.S. Patent and Trademark Office.

[6] Rubens, Fraser D. & Paul D. Bishop. (1993) Fibrin coated polymer surfaces. CA2133974C. Gatineau: Canadian Intellectual

Property Office. [7] Green, Chad et al. (2016). Loading system for an encapsulation device. US20160374900A1. Washington, DC: U.S. Patent and Trademark Office. [8] Janssen, Robert. (2006). Gloves with hydrogel coating for damp hand donning and method of making same.

US20060141186A1. Washington, DC: U.S. Patent and Trademark Office.





- No official regulatory pathway exists for human cell-based

- Regulatory framework is described by the FDA - Similar recommendations as Class III medical devices

- Fibrin hydrogel coating method is novel and patentable.

- Fibrin not currently used to deliver organoids

- Similar hydrogel encapsulation methods do not exist

- ECM-derived gels not used by competitors as encapsulation

| • • • | |
|----------|----------|
| one dose | \$17,297 |
| | \$2,471 |
| | \$4,942 |
| ose | \$1,246 |
| r dose | \$8,638 |
| | |

- No pancreatic organoid therapies currently on the market - Islet cell transplantation is almost analogous - Covers the acquisition and delivery costs of the cells - Only covered by Medicare in the context of clinical trials

CONCLUSIONS

- Cost of organoid therapy is less than a lifetime of insulin costs (\$17,300 per dose vs. \$1.22 million)

Fibrin hydrogel encapsulation method is promising

- Favorable and tunable mechanical properties

- Easily scaled to match market demand with a localized

- Potential application for other organoids