



Mesenchymal stem cell secretome decreases the inflammatory response in annulus fibrosus organ cultures

Journal:	<i>eCM Not-for-profit Open Access Journal</i>
Manuscript ID	Draft
Manuscript Type:	Disc Biology Special Issue
Date Submitted by the Author:	n/a
Complete List of Authors:	Neidlinger-Wilke, Cornelia; Ulm University, Institute of Orthopaedic Research and Biomechanics Eggerlein, Andreas; Ulm University, Institute of Orthopaedic Research and Biomechanics Gonçalves, Raquel; Ulm University; Universidade do Porto Instituto de Investigação e Inovação em Saúde; Universidade do Porto Instituto de Ciências Biomédicas Abel Salazar Ferreira, Joana R.; Universidade do Porto Instituto de Investigação e Inovação em Saúde, Microenvironments for NewTherapies Research Group; INEB, Microenvironments for NewTherapies Research Group; Universidade do Porto Instituto de Ciências Biomédicas Abel Salazar Ignatius, Anita; Ulm University, Institute of Orthopaedic Research and Biomechanics Wilke, Hans-Joachim; Ulm University, Institute of Orthopaedic Research and Biomechanics Teixeira, Graciosa; Ulm University, Institute of Orthopaedic Research and Biomechanics
Keywords:	Intervertebral Disc - General, Intervertebral Disc - Degeneration, Intervertebral Disc - Herniation, Intervertebral Disc - Repair / Regeneration, Mechanical loading, Inflammation, Complement, Paracrine signalling
Abstract:	Mesenchymal stem/stromal cells (MSC)-based therapies have been proposed for back pain and disc degeneration, despite limited knowledge on their mechanism of action. The impact of MSC/their secretome on annulus fibrosus (AF) cells and tissue was analysed in bovine AF organ cultures (AF-OCs) exposed to upper-physiological cyclic tensile strain (CTS, 9 %, 1 Hz, 3 h/day) and interleukin (IL)-1 β in a custom-made device. A 4-days treatment of the CTS+IL-1 β stimulated AF-OCs with MSC secretome downregulated the expression of inflammation markers (<i>IL-6</i> , <i>IL-8</i>), complement system regulators (cluster of differentiation (<i>CD</i>)46, <i>CD55</i> and <i>CD59</i>) and metalloproteinases (<i>MMP-1</i> , <i>MMP-3</i>), but also of tissue inhibitors of metalloproteinases (<i>TIMP-1</i> , <i>TIMP-2</i>) and collagen type I. At protein level, it was confirmed that IL-6, MMP-3 and collagen content were decreased in the AF-OCs treated with the MSC secretome compared to the CTS+IL-1 β stimulation alone. Nine days after treatment, a biomechanical peel-force test showed that the annular adhesive strength was significantly decreased by the MSC secretome treatment. Overall, MSC secretome had stronger impact on AF tissue

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

	<p>than the MSC in co-culture. The secretome contributed to a decrease of the inflammatory and catabolic status of AF cells activated by CTS+IL-1β, and plays a role in the regulation of the complement system. However, it also contributed to a further decrease of collagen at gene/protein level and of the AF mechanical strength. Therefore, the use of MSC secretome as a therapeutic approach for disc-related diseases requires further mechanistic investigations before clinical trials.</p>

SCHOLARONE™
Manuscripts

1
2
3 **Mesenchymal stem cell secretome decreases the inflammatory response in annulus**
4 **fibrosus organ cultures**
5

6
7 C. Neidlinger-Wilke^{1#}, A. Ekkerlein^{1#}, R. M. Goncalves¹⁻⁴, J. R. Ferreira²⁻⁴, A. Ignatius¹,
8 H.J. Wilke¹, G. Q. Teixeira^{1*}
9

10
11 ¹ Institute of Orthopaedic Research and Biomechanics, Trauma Research Centre, Ulm
12 University, Ulm, Germany

13
14 ² Instituto de Investigação e Inovação em Saúde (i3S), Universidade do Porto, Porto,
15 Portugal

16
17 ³ Instituto de Engenharia Biomédica (INEB), Universidade do Porto, Porto, Portugal

18
19 ⁴ Instituto de Ciências Biomédicas Abel Salazar (ICBAS), Universidade do Porto, Porto,
20 Portugal

21
22 # equal contribution
23

24
25 *** Corresponding author:**

26 Dr. Graciosa Quelhas Teixeira

27 Institute of Orthopaedic Research and Biomechanics

28 Trauma Research Centre

29 Ulm University

30 Helmholtzstraße 14, 89081 Ulm, Germany

31 **Phone:** +49-(0)731-500-55324

32 **E-mail:** graciosa.teixeira@uni-ulm.de
33
34
35
36
37

38 **Running Title:** *MSC secretome treatment of AF organ cultures*
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

Abstract

Mesenchymal stem/stromal cells (MSC)-based therapies have been proposed for back pain and disc degeneration, despite limited knowledge on their mechanism of action. The impact of MSC/their secretome on annulus fibrosus (AF) cells and tissue was analysed in bovine AF organ cultures (AF-OCs) exposed to upper-physiological cyclic tensile strain (CTS, 9 %, 1 Hz, 3 h/day) and interleukin (IL)-1 β in a custom-made device. A 4-days treatment of the CTS+IL-1 β stimulated AF-OCs with MSC secretome downregulated the expression of inflammation markers (*IL-6*, *IL-8*), complement system regulators (cluster of differentiation (*CD*)46, *CD55* and *CD59*) and metalloproteinases (*MMP-1*, *MMP-3*), but also of tissue inhibitors of metalloproteinases (*TIMP-1*, *TIMP-2*) and collagen type I. At protein level, it was confirmed that IL-6, MMP-3 and collagen content were decreased in the AF-OCs treated with the MSC secretome compared to the CTS+IL-1 β stimulation alone. Nine days after treatment, a biomechanical peel-force test showed that the annular adhesive strength was significantly decreased by the MSC secretome treatment. Overall, MSC secretome had stronger impact on AF tissue than the MSC in co-culture. The secretome contributed to a decrease of the inflammatory and catabolic status of AF cells activated by CTS+IL-1 β , and plays a role in the regulation of the complement system. However, it also contributed to a further decrease of collagen at gene/protein level and of the AF mechanical strength. Therefore, the use of MSC secretome as a therapeutic approach for disc-related diseases requires further mechanistic investigations before clinical trials.

Keywords: Intervertebral disc, degeneration, herniation, repair/regeneration, mechanical loading, inflammation, complement, paracrine signalling

Introduction

Intervertebral disc (IVD) degeneration and related inflammation are often associated with back, neck and radicular pain, major causes of disability worldwide that represent a large economic burden (Moradi-Lakeh *et al.*, 2017; Murray *et al.*, 2015). Current treatments ranging from physiotherapy to invasive surgeries, as spine fusion or IVD replacement, may decrease symptoms' progression but fail to restore the native IVD properties.

Though IVD degeneration can be linked with ageing (Roberts *et al.*, 2006), cases of early degeneration are often observed. The degenerative IVD pathogenesis may be caused by genetic predisposition, injury and/or lifestyle, among others. Disc degeneration involves the interplay between several mechanisms including mechanical overloading, catabolic cell response, degradation of matrix proteoglycans and loss of water-binding capacity (Adams and Roughley, 2006; Vergroesen *et al.*, 2015), as well as cell senescence and apoptosis (Roberts *et al.*, 2006). These events are often associated with an immune response, which plays an important role in the pathogenesis of IVD degeneration and cell death. During these events, production of extracellular matrix-degrading enzymes (metalloproteinase (MMP)-1, -3, -13, a disintegrin and metalloproteinase with thrombospondin motifs (ADAMTS)-4, -5, -13, etc.), proinflammatory mediators (interleukin (IL)-1 β , -6, -8, tumour necrosis factor- α , etc.) and chemoattractants of immune cells (chemokine (C-C motif) ligand 2 (CCL2), CCL5) has been identified (Molinos *et al.*, 2015; Risbud and Shapiro, 2014). Complement-mediated processes are known coordinators of several events during inflammation, and significantly contribute to inflammation-mediated tissue damage (Ricklin and Lambris, 2013). Upon activation, complement proteins function as chemotactic factors and amplifiers of the inflammatory response (Ricklin and Lambris, 2013). The activation of the terminal complement complex (TCC) formation was shown to be abnormally high in human osteoarthritic joints (Wang *et al.*, 2011) and degenerated IVDs, with predominance in AF cells (Grönblad *et al.*, 2003). However, little is known about complement system regulation by IVD cells through the production of soluble complement factor H (CFH) or the expression of membrane-bound regulators including membrane cofactor protein (CD46), complement decay-accelerating factor (CD55) and protectin (CD59), which inhibits TCC formation and confers protection from complement-mediated lysis (Noris and Remuzzi, 2013).

Ultimately, the progressive structural weakening of the IVD may contribute to AF failure and tissue herniation (Adams and Roughley, 2006). The AF consists in concentric lamellae of regularly arranged collagen fibres, which are interconnected by a network of elastin and fibrillin as shown by Yu *et al.* (Yu *et al.*, 2015). The pathomechanism leading to the mechanical weakness of the AF and consequent disc herniation has not yet been described. Yet, the regenerative potential of the degenerated AF has been hypothesized to benefit from the presence of cells capable of proliferating and differentiating into AF-like cells. Although progenitor cells have been found in the human IVD, their number decreases very rapidly after birth (Sakai *et al.*, 2012), limiting IVD's potential to counteract degeneration or recover from an

1
2
3 injury. Therefore, cell-based therapies to stimulate IVD regeneration, namely those
4 using bone marrow-derived mesenchymal stem/stromal cells (MSC), are being
5 increasingly pursued. MSC transplantation potential has been linked to their ability to
6 differentiate into IVD-like cells, producing IVD matrix components, or promoting
7 stimulation of endogenous IVD cells, thus enabling anti-catabolic and anti-
8 inflammatory effects, as reviewed by Sakai and Anderson (Sakai and Andersson,
9 2015). Patients have reported in clinical trials a reduction of pain after MSC
10 transplantation; however, either no changes in the disc morphology or water binding
11 capacity or only minor Pfirrmann grading improvement were observed (Noriega *et al.*,
12 2017; Orozco *et al.*, 2011; Yoshikawa *et al.*, 2010). MSC were shown to secrete anti-
13 inflammatory factors, and influence matrix turnover, in short-term osteoarthritic
14 synovium and cartilage explant cultures (van Buul *et al.*, 2012). Pereira *et al.* (Pereira *et al.*,
15 2016) has shown that MSC seeded on cartilaginous endplates significantly
16 increased production of growth factors, as well as of collagen type II and aggrecan in
17 IVD, namely in the NP. Cunha *et al.* (Cunha *et al.*, 2017) observed *in vivo*, in a rat disc
18 herniation model, less degeneration/herniation for the MSC-transplanted group.
19 Although no significant changes were detected in the extracellular matrix
20 composition, the transplanted MSC seemed to modulate the immune response
21 towards tissue regeneration (Cunha *et al.*, 2017). A previous study of our group
22 showed that MSC in co-culture with a proinflammatory/degenerative nucleus
23 pulposus (NP) organ culture can modulate the proinflammatory profile of the NP cells,
24 while displaying themselves a proinflammatory profile (Teixeira *et al.*, 2018).
25 However, because very few MSC have been found in the IVD tissue, we hypothesize
26 that their paracrine effect *via* the secretome might have a larger effect on IVD cells than
27 direct contact. MSC secrete numerous soluble factors in response to
28 microenvironmental cues, regulating several mechanisms in neighbour tissues *via*
29 paracrine signalling (Brisby *et al.*, 2013). Thus, several studies suggest the use of MSC
30 secretome for cardiac tissue repair (Dai *et al.*, 2007), recovery of hepatic (Parekkadan *et al.*,
31 2007) and kidney (van Koppen *et al.*, 2012) functions, among others. Moreover, MSC
32 secretome was suggested to stimulate IVD progenitor cells activity *ex vivo* in
33 degenerated human IVD tissue samples toward the repair process (Brisby *et al.*, 2013).
34 Hence, this work compared the therapeutic potential of not only MSC, but also their
35 secretome to improve the understanding of the biochemical processes in the
36 degenerative AF tissue using a standardized model. In that context, the following
37 hypotheses were investigated: i) the proinflammatory environment leads to
38 complement system activation and changes in AF cells phenotype and ii) MSC
39 secretome is more effective in comparison to MSC transplantation to induce immune-
40 mediated changes of AF tissue integrity.
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

Materials and Methods

MSC expansion and secretome production

MSC (Lonza) from human donors (n=3) were seeded at a density of 3000 cells/cm² and routinely expanded in MSC medium composed of low-glucose Dulbecco's Modified Eagle Medium (DMEM, Gibco) supplemented with 10 % HyClone foetal bovine serum (FBS; Thermo Scientific), 1 % Pen Strep (10,000 U/mL penicillin and 10,000 µg/mL streptomycin, Gibco) and 0.5 % amphotericin B (250 µg/mL, Gibco), at 37 °C and humidified atmosphere with 8.5 % CO₂. The medium was exchanged twice a week and cells were trypsinized when reaching 70% confluency.

For the secretome production, 10⁶ MSC were seeded in 6-well plates (Corning) and incubated in 5 mL of MSC medium supplemented with 10 ng/mL recombinant human IL-1β (R&D Systems), at 37 °C and humidified atmosphere with 6 % O₂ and 8.5 % CO₂ for 2 days (Fig. 1a). Afterwards, the secretome was collected and centrifuged at 1800 g for 5 min, at 4°C, to remove cell debris, and then stored at -80 °C until further use. The MSC were harvested for gene expression analysis (Supplemental data). Cells kept under basal conditions were also collected for gene expression analysis prior to co-culture with AF-OCs. MSC in passage 4-9 were used for the experiments.

Tissue dissection and organ culture preparation

AF-organ cultures (AF-OCs) were prepared according to Saggese *et al.* (2019). Bovine tails from 12-24 months-old animals (n=20) were obtained from a local slaughterhouse (Fleischmarkt Donautal, Ulm) and dissected within 2 h after killing. Coccygeal segments 2-3 to 7-8 were isolated and the NP was removed using 14-16 mm diameter punches, depending on the IVD size. The collected AF rings were incubated with IVD medium composed of low-glucose DMEM supplemented with 5 % FBS Superior (Biochrom), 1 % non-essential amino acids (Biochrom), 1 % Pen Strep, 0.5 % amphotericin B and 1.5 % 5 M NaCl/0.4 M KCl solution to adjust osmolarity to 400 mOsm, at 37 °C and humidified atmosphere with 6 % O₂ and 8.5 % CO₂, as previously described (Neidlinger-Wilke *et al.*, 2012; Teixeira *et al.*, 2016). The rings were left for 6 days in 6-well plates (Corning) with membrane filter inserts (Millipore) and 0.46 MPa static loading (Teixeira *et al.*, 2016). The medium was exchanged every second day.

Treatment of AF rings with MSC and MSC secretome

On day 6, the AF-OCs were transferred to silicone dishes and placed in a cyclic tensile strain (CTS) device (Saggese *et al.*, 2019). The experimental timeline and groups are depicted in Fig. 1b.

For the AF-OCs treated with MSC co-culture, 10⁶ MSC were seeded on top of the AF rings in the CTS device and left for 24 h to adhere. On the next day, the medium was exchanged in all experimental groups according to Table 1. The AF-OCs were stimulated with CTS at 1 Hz, 3 h per day. The CTS generated a 9 ± 3 % tensile stress of the AF-OC rings, representing a high physiological loading (Saggese *et al.*, 2019). One group was stimulated with CTS+IL-1β alone, an additional group was stimulated with

1
2
3 CTS+IL-1 β and MSC were co-cultured on top of the AF rings. A third group was
4 stimulated with CTS+IL-1 β and the culture medium was mixed with MSC secretome.
5 The MSC secretome was mixed in a 1:1 ratio with IVD medium before
6 supplementation with 10 ng/mL IL-1 β . Unstimulated AF rings were kept as control
7 group.
8
9

10 At day 11, samples were collected for different analyses. The AF rings were separated
11 into 3 sections: the tissue was either i) immediately shock frozen in RNAlater ICE
12 (Invitrogen) and liquid nitrogen and stored at -80 °C for RNA isolation, ii) weighted
13 (tissues with weight between 70 and 130 mg were collected) and then frozen at -20 °C
14 for DNA and protein quantification or iii) used for metabolic activity quantification
15 and afterwards fixed in 4 % phosphate-buffered formaldehyde solution for
16 immunohistochemical staining.
17
18

19 For the AF-OCs that underwent treatment for 9 days, 50 % of the medium was
20 exchanged at day 11 according to Table 1. At day 16, the AF rings were collected for
21 metabolic activity quantification and mechanical testing. The supernatants were
22 collected for protein quantification.
23
24
25

26 **Metabolic activity of AF cells in organ culture**

27 The metabolic activity of the AF cells was assessed by resazurin reduction assay. AF
28 tissue sections of 70-130 mg wet weight were incubated with 0.02 mg/mL resazurin
29 sodium salt (Sigma-Aldrich) solution in IVD medium. Samples were incubated for 2 h
30 at 37 °C. Fluorescence intensity was measured in a spectrophotometer microplate
31 reader (Tecan), with 530 nm excitation filters and 590 nm emission filters. Results were
32 normalized to wet weight (mg) for each AF tissue. The AF tissues were frozen at -20 °C
33 for protein quantification.
34
35
36

37 **Gene expression analysis of AF cells**

38 The tissues frozen in RNAlater ICE were thawed, the RNAlater was removed and 1 mL
39 of TRIzol was added to the tissue to maintain the RNA integrity during tissue
40 homogenization by a dismembrator (Micra GmbH). Afterwards, 200 μ L of
41 chloroform were added to perform a two-phase extraction of the RNA. After a 5 min
42 incubation step, the mixture was centrifuged at 14000 rpm and 4 °C for 30 min. The
43 RNA was collected and transferred to an RNase-free reaction tube. By adding an
44 equivalent amount of 70 % EtOH, the RNA was precipitated. RNA isolation was
45 performed using the MiraCol Purification Columns and the PicoPure RNA Isolation
46 kit (ThermoFisher Scientific). For cDNA synthesis with integrated removal of DNA
47 contamination, 12 μ L of RNA were treated with the QuantiTect Reverse Transcription
48 kit (ThermoFisher Scientific). Gene expression analysis was performed with primers
49 for the reference gene bovine glyceraldehyde 3-phosphate dehydrogenase (*bGAPDH*),
50 as well as for the target genes in Table 2. The transcribed cDNA was either mixed with
51 custom-designed primers and the Platinum SYBR Green qPCR SuperMix-UDG kit
52 (Invitrogen), or TaqMan Gene Expression Assays and Fast Advanced Master Mix
53 (Applied Biosystems). The runs were performed in the QuantStudio 3 real-time PCR
54
55
56
57
58
59
60

1
2
3 system (Applied Biosystems). The melt curves were analysed to confirm the specificity
4 of the reaction and quantification cycle (Cq) 35 cutoff was used. Relative expression
5 levels were calculated using the Cq method ($\Delta Ct = Ct_{(\text{gene of interest})} - Ct_{(GAPDH)}$),
6 according to published guidelines (Bustin *et al.*, 2009).
7
8
9

10 **Protein quantification in the organ culture supernatants**

11 The concentration of PGE₂ (Arbor Assays), bovine IL-6 (bIL-6, MyBioSource), human
12 IL-6 (hIL-6, BioLegend), hCFH (Abcam), hTIMP-1 and hTIMP-2 (RayBiotech) was
13 measured by enzyme-linked immunosorbent assay (ELISA) in the supernatants at
14 days 11 and 16 of organ culture.
15
16
17

18 **DNA and protein quantification in the AF tissue**

19 AF tissues were digested overnight at 56 °C with 0.5 mg/mL proteinase K (Sigma-
20 Aldrich) solution for DNA and sulfated glycosaminoglycan (sGAG) quantification.
21 DNA content was measured using the PicoGreen dsDNA assay kit (Invitrogen). sGAG
22 content was determined using the Blyscan assay kit (Biocolor). AF tissues were
23 digested for soluble collagen and elastin quantification according to the Sircol and the
24 Fastin assay kits, respectively (Biocolor).
25
26
27
28

29 **Immunohistochemistry**

30 After fixation in formalin for 48 h, the AF samples were washed under running tap
31 water for 2 h, dehydrated and embedded in paraffin. Cross-sections with 7 µm
32 thickness were dewaxed and rehydrated. For antigen retrieval, the sections were
33 incubated with 10 mM citrate buffer (pH 6.0, 85 °C, 20min), followed by hyaluronidase
34 (2 mg/mL in citrate buffer, pH 8.0, 30 min, 37 °C) and collagenase (2 mg/mL in citrate
35 buffer, pH 8.0, 15 min, 37 °C) digestion. Avidin–biotin complex kit (PK-6100, Vector
36 laboratories) and NovaRED Peroxidase (HRP) Substrate kit (SK-4800, Vector
37 Laboratories) were used for the immunostaining. Sections were incubated with rabbit
38 anti-IL-6 (1:200 dilution, Bioss) or rabbit anti-MMP3 (1:200, Abcam) antibodies,
39 overnight at 4 °C. Goat anti-rabbit IgG Biotin-XX (1:200 dilution, Invitrogen) was used
40 as secondary antibody. All samples from the same experiment were stained at the
41 same time for each marker for comparison purposes.
42
43
44
45
46
47

48 **Microscopy and image analysis**

49 From each of the IL-6 and MMP-3 stained sections, pictures were collected from three
50 different areas. For each area, images were taken using bright-field and polarized-light
51 microscopy and 5x magnification. Polarized-light images were used to distinguish the
52 birefringent lamella matrix (LM) from the black translamellar bridging network
53 (TLBN) regions. To evaluate each staining, the bright-field images were processed
54 using ImageJ software and the colour deconvolution function to separate the
55 NovaRED and Haematoxylin colour components. Then, the TLBN and the LM were
56 outlined in the Nova Red colour channel as regions of interest and the average pixel
57 intensity was measured for each region. The TLBN/LM ratio of the colour intensities
58
59
60

1
2
3 was calculated and the average of the three images was used to normalize the values
4 of each sample to the control sample from the same experiment. For each experiment
5 (n = 7-10) all samples were stained at the same time.
6
7

8 **Mechanical testing**

9
10 A peel test was performed to determine the peeling strength of the AF, according to
11 Gregory *et al.* (Gregory *et al.*, 2012). AF segments were incised along a central lamella
12 by 5 mm into a “Y” configuration. The split ends of the specimens were fixed in a “T”
13 configuration in a uniaxial material testing machine (Zwick). The adjacent lamellae
14 were pulled apart at 0.5 mm/s until they complete separation of the tissue. The average
15 force in the plateau regions of each force-displacement curve was normalized to the
16 height of the AF tissue and used to calculate the delamination strength (Gregory *et al.*,
17 2012; Saggese *et al.*, 2019)
18
19
20
21

22 **Statistical analysis**

23 Results are presented as median ± interquartile range. Statistical analysis was
24 performed using GraphPad Prism 8 software (GraphPad Software, Inc., La Jolla, CA,
25 USA). Data normal distribution was tested using D’Agostino–Pearson omnibus
26 normality test. Parametric data were analysed using unpaired *t*-test to determine
27 differences between two groups or one-way ANOVA to determine differences
28 between three or more groups. Nonparametric data were analysed using Kruskal–
29 Wallis test with Dunn’s multiple comparison test to determine differences between
30 three or more groups. Significance was set at $p < 0.05$.
31
32
33
34
35
36

37 **Results**

38 **Analysis of cell viability and gene expression profile of AF cells**

39 To induce a degenerative and proinflammatory environment, AF-OCs were
40 stimulated at day 7 after isolation with CTS+IL-1 β . The rings were either treated with
41 MSC (MSC group) or secretome of pre-conditioned MSC (secretome group) to mimic
42 the physiological conditions of MSC in the AF-OC model. The unstimulated and pre-
43 conditioned MSC were analysed for gene expression of different human markers such
44 as inflammation cytokines (*hIL-6*, *hIL-8*), matrix degrading enzymes (*hMMP-1*, *hMMP-*
45 *3*), complement components (*hC3*, *hC5*, *hC6*, *hC7*, *hC8A*, *hC9*) and complement
46 regulators (*hCD46*, *hCD55*, *hCD59*) (Supplemental data, Fig. 9).
47
48
49

50 To investigate whether AF cell viability was affected by the CTS+IL-1 β conditions, co-
51 culture with MSC or secretome treatment after 4 days of organ culture, mitochondrial
52 metabolic activity and the expression of *bNOS2*, a marker of cell survival, were
53 analysed (Fig. 1a,b). No differences were observed between the experimental groups.
54 The proinflammatory markers *bIL-6* ($p < 0.01$), *bIL-8* ($p < 0.05$), *bPTGS2* ($p < 0.01$) and
55 the inhibitory complement receptor *bCD46* ($p < 0.05$) were significantly upregulated in
56 the group treated with CTS+IL-1 β in comparison to the control (Fig. 1c). The secretome
57 treatment significantly downregulated the expression of *bIL-6* ($p < 0.05$), *bIL-8* ($p < 0.05$),
58
59
60

1
2
3 CD46 ($p < 0.01$), CD55 ($p < 0.05$) and CD59 ($p < 0.001$) *versus* the CTS+IL-1 β stimulation
4 alone. *bIL-8* gene expression was also downregulated in the co-culture with MSC ($p <$
5 0.05). *bPTGS2*, responsible for production of inflammatory prostaglandins, was not
6 affected in the MSC or secretome groups.
7

8 The main AF matrix components *bCOL1A1* and *bACAN*, inhibitors of matrix
9 degradation *bTIMP-1* and *bTIMP-2*, as well as matrix degrading enzymes *bMMP-1*,
10 *bMMP-3*, *bADAMTS-4* and vascularization marker *bVEGF* were also analysed by gene
11 expression (Fig. 3). While *bACAN* expression was not altered in the different groups,
12 *bCOL1A1* was downregulated in the MSC and secretome groups *versus* CTS+IL-1 β (p
13 < 0.001 , Fig. 3a); *bTIMP-1* and *bTIMP-2* were also significantly downregulated by the
14 secretome ($p < 0.001$, Fig. 3b). *bMMP-1*, *bMMP-3* and *bADAMTS-4* were upregulated
15 by the CTS+IL-1 β stimulation, when compared to Control ($p < 0.01$, Fig. 3c), but
16 downregulated by the combination with the secretome treatment ($p < 0.05$). Although
17 not significant, *bVEGF* expression was slightly upregulated with the secretome
18 treatment in comparison to the Control and CTS+IL-1 β groups.
19
20
21
22
23
24

25 AF matrix remodelling

26 After 4 days of stimulation, no differences were found in the DNA content released to
27 the culture supernatant between CTS+IL-1 β and Control (Fig. 4a); however, the group
28 treated with MSC ($p < 0.0001$) or secretome ($p < 0.05$) showed an increase in the DNA
29 released to the culture supernatant. When the DNA content was quantified in the AF
30 tissue itself, no differences were detected between the groups (Fig. 4b). Collagen,
31 elastin and sGAG matrix components were also quantified in the AF tissue (Fig. 4c).
32 Elastin and sGAG content were similar in all the conditions, but the collagen content
33 was lower in the groups treated with MSC ($p = 0.05$) or secretome ($p < 0.05$) in contrast
34 with the CTS+IL-1 β stimulation alone, which was in agreement with the gene
35 expression results for *bCOL1A1*.
36
37
38
39
40

41 Production of soluble factors

42 The distribution of IL-6 and MMP-3 in the AF tissue was assessed by
43 immunohistochemistry at day 11 (Fig. 5). IL-6 and MMP-3 were distributed all over
44 the AF tissue (Fig. 5a). For IL-6, a significantly higher staining intensity was found in
45 the CTS+IL-1 β group in comparison to the Control ($p < 0.01$, Fig. 5b) and to the
46 secretome treatment ($p < 0.01$). A significantly higher staining intensity was also found
47 for MMP3 in the CTS+IL-1 β stimulation alone in contrast to the secretome treatment
48 ($p < 0.01$, Fig. 5c).
49

50 PGE₂, *bIL-6*, *hIL-6*, *hCFH*, *hTIMP-1* and *hTIMP-2* content in the AF-OC supernatants
51 was quantified after 4 days of stimulation and treatment (Fig. 6). PGE₂ production was
52 higher in the CTS+IL-1 β -stimulated group *versus* Control samples ($p < 0.05$, Fig. 6a), as
53 previously observed (Saggese *et al.*, 2019), but no significant changes were detected
54 with the MSC-based treatments. Interestingly, *bIL-6* production was also higher with
55 the CTS+IL-1 β stimulation ($p < 0.05$, Fig. 6b), but this production was decreased by the
56 co-culture with MSC ($p < 0.05$). *hIL-6*, *hCFH*, *hTIMP-1* and *hTIMP-2* were only detected
57
58
59
60

1
2
3 in the supernatants from MSC- and secretome-treated groups, indicating that the
4 assays detected specifically the molecules produced by human MSC (Fig. 6c-e). Higher
5 hIL-6, hCFH, hTIMP-1 and hTIMP-2 were found in the secretome group *versus* the
6 group treated with MSC in co-culture ($p < 0.0001$).

7
8 After 9 days of stimulation and treatment (day 16), it was observed significantly lower
9 mitochondrial metabolic activity in CTS+IL-1 β group ($p < 0.05$, Fig. 7a), which was
10 recovered with the secretome treatment ($p < 0.05$). Similarly to what was observed after
11 4 days of stimulation/treatment (day 11), higher PGE₂ ($p < 0.05$, Fig. 7b) and bIL-6 ($p <$
12 0.05 , Fig. 7c) release to the supernatant were measured in CTS+IL-1 β *versus* Control.
13 The MSC co-culture with the AF-OCs significantly decreased the production of bIL-6
14 in comparison to the CTS+IL-1 β stimulation alone ($p < 0.05$). hIL-6, hCFH and hTIMP-2
15 content in the supernatant was significantly higher in the secretome-treated group in
16 comparison to the release by the MSC in direct co-culture with the AF-OCs ($p < 0.01$,
17 Fig. 7d-f).

23 **Mechanical properties of AF tissue**

24 A biomechanical peel test was performed in AF tissue segments after 9 days of organ
25 culture stimulation/treatment (Fig. 8). Force-displacement curves were obtained and
26 the mean force along one or more plateau regions was used to calculate the average
27 annular delamination strength for each sample. Interestingly, the CTS+IL-1 β did not
28 display differences in comparison to the Control group as expected following the
29 results from Saggese *et al.* (2019) after 5 days of AF-OC stimulation. However, about
30 30% lower delamination strength was found in the groups treated with MSC ($p = 0.07$).
31 and secretome ($p < 0.05$) compared to the CTS+IL-1 β stimulation alone, in line with the
32 lower collagen expression/production observed in the MSC and secretome groups.
33
34
35
36
37
38
39

40 **Discussion**

41 The healthy IVD is characterised by a harsh microenvironment, due to low oxygen
42 levels, high osmolarity, nutritional deficits and high mechanical loading, and these
43 conditions are further aggravated by degeneration and inflammation (Molinos *et al.*,
44 2015; Urban, 2002). The proinflammatory/degenerative microenvironment,
45 particularly low oxygen (5% O₂) and low glucose (1 mM glucose) conditions have been
46 shown to promote stem cell death, and to inhibit proliferation and sGAG and collagen
47 production *in vitro* (Naqvi and Buckley, 2015). Acidic pH conditions have also been
48 found to impair the survival and function of stem cells (Naqvi and Buckley, 2016;
49 Wuertz *et al.*, 2009). In the present study, the proinflammatory and catabolic
50 environment of the IVD was simulated using a previously established *ex vivo* model
51 of bovine AF rings cultured under low oxygen and low glucose supply, iso-osmotic
52 (400 mOsm) conditions and CTS+IL-1 β stimulation (Saggese *et al.*, 2019). This model
53 was characterized by an increased production of cyclooxygenase-2 (COX-2), PGE₂, IL-
54 6 and MMP-3, as well as a decrease in the annular peel strength in comparison to non-
55 stimulated controls (Saggese *et al.*, 2019). The proinflammatory/degenerative
56
57
58
59
60

1
2
3 conditions were replicated in the current study with a longer investigation period of
4 up to 9 days. An increased expression/production of proinflammatory cytokines and
5 matrix degrading enzymes was observed after CTS+IL-1 β stimulation. These results
6 are supported by previous studies which showed activation of an inflammatory and
7 catabolic reaction by human AF and NP cells exposed to high mechanical strain (Gawri
8 *et al.*, 2014; Gilbert *et al.*, 2010; Pratsinis *et al.*, 2016). Interestingly, no changes were
9 observed regarding the expression of membrane-bound regulatory proteins *bCD46*,
10 *bCD55* and *bCD59* (important for the protection of the cells against complement-
11 mediated lysis) with CTS+IL-1 β stimulation. IL-1 β stimulation alone of isolated human
12 articular chondrocytes has been previously described to induce upregulation of
13 complement regulators CD45, CD55 and CD59 (Hyc *et al.*, 2003). Nevertheless, a
14 synergistic interplay between IL-1 β and C3a or C5a was suggested to regulated the
15 release of IL-6 by isolated osteoblasts and to up-regulate RANKL/OPG expression
16 (Ignatius *et al.*, 2011). There results suggest that complement activation may enhance
17 the inflammatory response especially in a pro-inflammatory environment.

18
19 In our CTS+IL-1 β -stimulated AF-OCs, no changes in aggrecan expression, collagen,
20 elastin or sGAG matrix content were detected in comparison to non-stimulated tissues.
21 Though the AF matrix is composed of other proteins that might have been targeted
22 (Melrose *et al.*, 2008), fibrillin was also shown not to be altered by this model after 5
23 days of stimulation, and the decrease in annular strength previously observed
24 (Saggese *et al.*, 2019) seemed to have recovered after 9 days, as shown here. To more
25 closely simulate the human physiological conditions and induce matrix breakdown
26 and annular tear, a model using higher strains and complex loading (Heuer *et al.*, 2008)
27 could be used in the future.

28
29 MSC-based therapies have been investigated for IVD regeneration and back pain
30 treatment due to MSC's ability to differentiate in response to the microenvironment
31 and cell-cell interaction into an NP-like phenotype, promoting matrix synthesis
32 (Strassburg *et al.*, 2010), and to their anti-inflammatory and immune-modulatory
33 activity (Cunha *et al.*, 2017; Miguélez-Rivera *et al.*, 2018; Teixeira *et al.*, 2018). Clinical
34 trials have shown an increase in the IVD water content and an improvement of pain
35 and disability in up to 2 years of follow-up (Noriega *et al.*, 2017; Orozco *et al.*, 2011;
36 Pettine *et al.*, 2016; Pettine *et al.*, 2015; Yoshikawa *et al.*, 2010). These therapies have
37 been mostly focused on restoring extracellular matrix production (particularly
38 aggrecan) due to its impact on disc biomechanics (Adams and Roughley, 2006;
39 Bendtsen *et al.*, 2016), but still little is known regarding the biological effects of MSC
40 transplantation. Moreover, few studies have addressed/targeted a functional AF repair
41 (Sakai and Grad, 2015).

42
43 In a previous study, MSC were cultured on top of punctured bovine IVD tissues under
44 stimulation with low oxygen and low glucose supply, IL-1 β medium supplementation
45 and iso-osmotic (400 mOsm) conditions for 2 days (Teixeira *et al.*, 2018). The MSC in
46 co-culture induced a downregulation of proinflammatory markers *IL-6* and *IL-8* by the
47 disc cells; however, without an effect on ECM remodelling (Teixeira *et al.*, 2018). The
48 study also showed that while the IVD cells displayed a less proinflammatory
49
50
51
52
53
54
55
56
57
58
59
60

1
2
3 phenotype, the MSC produce higher amounts of the proinflammatory molecules IL-6,
4 IL-8 and PGE₂, which suggested an MSC mechanism-of-action dependent on a
5 cytokine feedback loop (Teixeira *et al.*, 2018).

6 MSC secrete numerous soluble factors in response to the microenvironmental cues,
7 tuning several mechanisms in neighbor tissues via paracrine signaling (Ferreira *et al.*,
8 2018). Thus, the therapeutic potential of MSC secretome has been investigated in the
9 context of several disorders, including degenerative joint diseases (Ferreira *et al.*,
10 2018). MSC secretome has been suggested to stimulate IVD progenitor cells activity in
11 human degenerated IVD tissues toward repair (Brisby *et al.*, 2013). Nonetheless, the
12 MSC secretome content may be determined by the microenvironment to which the
13 cells are exposed (Ferreira *et al.*, 2018). Hence, the effect of MSC *versus* pre-conditioned
14 MSC secretome was evaluated in this work.

15 The MSC were exposed to low oxygen atmosphere (6% O₂) and proinflammatory
16 stimulus (IL-1 β medium supplementation), features of the AF-OC microenvironment.
17 The pre-conditioned MSC displayed upregulated expression of proinflammatory
18 markers *IL-6* and *IL-8*, and matrix degrading enzymes *MMP-1* and *MMP-3*
19 (Supplemental data). Preconditioning of MSC *ex vivo* by low oxygen atmosphere,
20 inflammatory stimulus, among others, prior to their use in therapy is recognized as an
21 adaptive strategy that tunes the cells to survive in harsh microenvironments and
22 enhances their regulatory function of the innate and adaptive immune responses
23 (Saparov *et al.*, 2016). MSC-mediated immunomodulation has mainly been attributed
24 to paracrine mechanisms associated with secretion of proinflammatory/
25 immunoregulatory mediators (Krampera *et al.*, 2006; Ren *et al.*, 2008). Nonetheless, the
26 presence of different concentrations of proinflammatory molecules may influence
27 differently MSC immunomodulatory response (Li *et al.*, 2012), which suggests that just
28 the use of the secretome may lead to a more reproducible outcome. Particularly MSC
29 IL-1 β -preconditioning has been shown to significantly upregulate the expression of
30 multiple cytokines such as COX-2, TNF- α , IL-6, IL-8 and IL-23A, chemokines
31 including CCL5, CCL20, CXCL1, CXCL3, CXCL5, CXCL6, CXCL10, and CXCL11, as
32 well as adhesion molecules VCAM-1, ICAM-1, and ICAM-4 expression compared with
33 non-stimulated MSC (Carrero *et al.*, 2012; Fan *et al.*, 2012). IL-1 β preconditioning has
34 also been described, for instance, to improve MSC ability to migrate to the spleen,
35 mesenteric lymph nodes, and colon in a murine experimental model of colitis, and
36 contributed to the reduction of the number of M1 macrophages in the peritoneal cavity
37 (Fan *et al.*, 2012). Moreover, even though IL-1 β -stimulated MSC in co-culture with IVD
38 tissue presented a proinflammatory phenotype, producing high amounts of IL-6 and
39 IL-8, the expression of these factors by the IVD cells was downregulated in response
40 (Teixeira *et al.*, 2018). Complement C3 and C5 and regulatory proteins *CD46*, *CD55* and
41 *CD59* were also shown to be upregulated by the pre-conditioned MSC, whereas TCC
42 components C6 and C9 were downregulated in comparison to MSC cultured under
43 atmospheric oxygen conditions and normal expansion medium (Supplemental data),
44 indicating a preferably active production of anaphylatoxins instead of TCC. MSC were
45 previously described to constitutively secrete CFH, a first line of complement
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

1
2
3 inhibition (Tu *et al.*, 2010). Ignatius *et al.* (Ignatius *et al.*, 2011) showed that human MSC
4 express C3, C5, but also CD46, CD55, and CD59, allowing the inhibition of the
5 complement system activation to a certain extent. Soluble MSC have also been shown
6 to express central complement receptors for anaphylatoxins C3a and C5a (Ignatius *et*
7 *al.*, 2011; Soland *et al.*, 2013), and these receptors were shown to contribute to the
8 recruitment of MSC to sites of injury MSC are recruited and activated by
9 anaphylatoxins after transplantation, potentially causing MSC death and limiting
10 therapeutic benefit (Soland *et al.*, 2013).

11
12
13
14 As mentioned above, this study investigated the effect of MSC *versus* pre-conditioned
15 MSC secretome on AF-OCs. After 4 days of culture, cell metabolic activity and *bNOS2*
16 gene expression indicated a similar cell survival up to this point. *bNOS2* encodes a
17 nitric oxide synthase which is inducible by a combination of lipopolysaccharide and
18 proinflammatory cytokines, such as IL-1 α (Kohyama *et al.*, 2000). Nonetheless, after 9
19 days of AF-OC, a decrease in mitochondrial metabolic activity was observed for the
20 CTS+IL-1 β group, which was only recovered in the secretome-treated group. IVD cell
21 apoptosis has been associated with disc degeneration (Kohyama *et al.*, 2000). MSC-
22 conditioned medium was previously shown to reduce nitric oxide production in
23 cartilage explants (van Buul *et al.*, 2012). Cheng *et al.* (Cheng *et al.*, 2018) provided
24 evidence that NP cell apoptosis and intervertebral disc degeneration can be decreased
25 *in vivo*, in a rat model, by MSC-secreted exosomes, and therefore confirming MSC
26 paracrine effects.

27
28
29
30
31 A paracrine immunomodulatory effect of MSC secretome has been described in
32 osteoarthritic cartilage explant cultures (van Buul *et al.*, 2012) and it was also confirmed
33 in the present study in AF cultures. We observed a decrease in the expression of *bIL-6*
34 and *bIL-8*, as well as of *bCD46*, *bCD55* and *bCD59* by AF cells in presence of pre-
35 conditioned MSC secretome. Because barely any differences were observed in the
36 group with MSC in co-culture and the hIL-6, hCFH, hTIMP-1 and hTIMP-2
37 supernatant content was significantly lower in the group treated with MSC in co-
38 culture than with the secretome, it might indicate low MSC adherence to the AF tissue,
39 as shown by the DNA quantification in the supernatant. Interestingly, in our
40 experiments, *bPTGS2* expression and overall PGE₂ production did not seem to be
41 altered by the MSC or secretome treatments in comparison to CTS-IL-1 β stimulation
42 alone. PGE₂ is an important molecule that converts proinflammatory M1 macrophages
43 into anti-inflammatory M2 macrophages as it has been shown to be highly produced
44 by MSC and IVD cells in co-culture with IL-1 β stimulation (Teixeira *et al.*, 2018). A
45 study by Miguélez-Rivera and colleagues (Miguélez-Rivera *et al.*, 2018) using an *in*
46 *vitro* model of co-culture between rat NP/AF cells, macrophages and adipose-derived
47 stem cells-conditioned medium showed a modulatory effect of the inflammatory
48 response. A different pro-inflammatory/degenerative environment, as well as
49 presence/absence of direct cell-cell communication seems to differently influence MSC
50 and IVD cells response.

51
52
53
54
55
56
57
58 In the present study, it was observed a down-regulation of matrix degrading enzymes
59 *bMMP-1*, *bMMP-3* and *bADAMTS-4* by AF cells in presence of MSC secretome.
60

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

Nonetheless, COL1 expression/production, as well as *bTIMP-1* and *bTIMP-2* expression were also decreased. Moreover, especially the secretome contributed to a weakening of the AF tissue. *In vivo* studies have shown a contribution of MSC transplantation to an upregulation of NP matrix protein COL2 with greater focus on the NP as reviewed by Sakai and Anderson (Sakai and Andersson, 2015); however, it has not been elucidated if this is due to the MSC differentiation into NP cells or to the stimulation of native NP cells to produce matrix proteins. The tissue regenerative potential of MSC secretome has been previously addressed in *in vivo* models of arthritis (Chen *et al.*, 2019; Kay *et al.*, 2017). One study showed that MSC secretome treatment suppressed the immune response and reduced cartilage damage by reducing aggrecan cleavage in arthritic mouse cartilage (Kay *et al.*, 2017). Another study in a rat model of induced osteoarthritis showed a higher cartilage content and a decreased ratio of MMP-13 to TIMP-1 after MSC secretome treatment (Chen *et al.*, 2019). Moreover, MSC-derived exosomes have also been shown to increase COL2 and aggrecan and decreased MMP-13 expression by chondrocytes isolated from a murine osteoarthritis model (Liu *et al.*, 2018), and to promote proliferation of NP cells and upregulation of aggrecan and COL2 (Lu *et al.*, 2017).

The limitations of this study include the proinflammatory degenerative microenvironment of the disc that cannot be completely simulated and the short investigation time in which the simulation of a therapy in a long-term perspective is not possible. Also, the communication between MSC and cells of the immune system cannot be simulated using this model. Moreover, the tensile strain applied to the system might have contributed to reduced MSC adhesion to the AF rings with time in culture and, therefore, explain that almost no effects were found in the co-culture group.

Overall, MSC immunomodulatory properties on the degenerative AF-OCs seemed to be mediated by a paracrine mechanism, indicating that the secretome has a potent modulatory effect on AF matrix turnover and inflammation. The present study confirmed the immunomodulatory and anti-catabolic effect of the MSC secretome in AF tissues in presence of a pro-inflammatory stimulus and supraphysiological loading, but it also seemed to contribute to a decrease in COL1 content and strength of the AF tissue. These results demonstrate that while MSC secretome-based treatment might be beneficial in the modulation of the inflammatory response of the IVD cells, they seem to contribute to further disc degeneration.

Conclusions

AF cells presented a proinflammatory/degenerative phenotype after CTS+IL-1 β stimulation for 4 days. But, the previously described matrix weakening effect of the CTS+IL-1 β stimulation did not correlate with changes in glycosaminoglycan, elastin or collagen tissue content. Interestingly, the MSC secretome contributed to a further decrease of collagen at gene/protein level, but with no changes in the AF mechanical strength. It also seemed to decrease the inflammatory and catabolic status of AF cells

1
2
3 activated by CTS+IL-1 β , and to play a role in the regulation of the complement system
4 and neovascularization. Ongoing studies with extended culture period are necessary
5 to evaluate long-term changes in the AF matrix at protein level and alterations of
6 mechanical properties.
7
8
9

10 11 **Acknowledgements**

12 The study was supported by the Ulm University (L.SBN.0157), German Research
13 Foundation (NE_549/6-1), German Spine Society and German Academic Exchange
14 Service. Andreas Ekkerlein received a dissertation scholarship by the Ulm University,
15 and Raquel M. Goncalves was supported by the Alexander von Humboldt Foundation
16 and by *Conselho de Reitores das Universidades Portuguesas*.
17
18
19
20

21 22 **References**

23 Adams MA, Roughley PJ (2006) What is intervertebral disc degeneration, and
24 what causes it? *Spine (Phila Pa 1976)* **31**: 2151-2161.

25 Bendtsen M, Bunger C, Colombier P, Le Visage C, Roberts S, Sakai D, Urban JP
26 (2016) Biological challenges for regeneration of the degenerated disc using cellular
27 therapies. *Acta Orthop* **87**: 39-46.
28

29 Brisby H, Papadimitriou N, Brantsing C, Bergh P, Lindahl A, Barreto
30 Henriksson H (2013) The presence of local mesenchymal progenitor cells in human
31 degenerated intervertebral discs and possibilities to influence these in vitro: a
32 descriptive study in humans. *Stem Cells Dev* **22**: 804-814.
33

34 Bustin SA, Benes V, Garson JA, Hellemans J, Huggett J, Kubista M, Mueller R,
35 Nolan T, Pfaffl MW, Shipley GL, Vandesompele J, Wittwer CT (2009) The MIQE
36 guidelines: minimum information for publication of quantitative real-time PCR
37 experiments. *Clin Chem* **55**: 611-622.
38

39 Carrero R, Cerrada I, Lledó E, Dopazo J, García-García F, Rubio MP, Trigueros
40 C, Dorronsoro A, Ruiz-Sauri A, Montero JA, Sepúlveda P (2012) IL1 β induces
41 mesenchymal stem cells migration and leucocyte chemotaxis through NF- κ B. *Stem
42 Cell Rev Rep* **8**: 905-916.
43

44 Chen W, Sun Y, Gu X, Hao Y, Liu X, Lin J, Chen J, Chen S (2019) Conditioned
45 medium of mesenchymal stem cells delays osteoarthritis progression in a rat model by
46 protecting subchondral bone, maintaining matrix homeostasis, and enhancing
47 autophagy. *J Tissue Eng Regen Med* **13**: 1618-1628.
48

49 Cheng X, Zhang G, Zhang L, Hu Y, Zhang K, Sun X, Zhao C, Li H, Li YM, Zhao
50 J (2018) Mesenchymal stem cells deliver exogenous miR-21 via exosomes to inhibit
51 nucleus pulposus cell apoptosis and reduce intervertebral disc degeneration. *J Cell
52 Mol Med* **22**: 261-276.
53

54 Cunha C, Almeida CR, Almeida MI, Silva AM, Molinos M, Lamas S, Pereira CL,
55 Teixeira GQ, Monteiro AT, Santos SG, Gonçalves RM, Barbosa MA (2017) Systemic
56
57
58
59
60

1
2
3 delivery of bone marrow mesenchymal stem cells for in situ intervertebral disc
4 regeneration. *Stem Cells Transl Med* **6**: 1029-1039.

5
6 Dai W, Hale SL, Kloner RA (2007) Role of a paracrine action of mesenchymal
7 stem cells in the improvement of left ventricular function after coronary artery
8 occlusion in rats. *Regen Med* **2**: 63-68.

9
10 Fan H, Zhao G, Liu L, Liu F, Gong W, Liu X, Yang L, Wang J, Hou Y (2012) Pre-
11 treatment with IL-1 β enhances the efficacy of MSC transplantation in DSS-induced
12 colitis. *Cell Mol Immunol* **9**: 473-481.

13
14 Ferreira JR, Teixeira GQ, Santos SG, Barbosa MA, Almeida-Porada G,
15 Goncalves RM (2018) Mesenchymal stromal cell secretome: influencing therapeutic
16 potential by cellular pre-conditioning. *Front Immunol* **9**: 2837.

17
18 Gawri R, Rosenzweig DH, Krock E, Ouellet JA, Stone LS, Quinn TM, Haglund
19 L (2014) High mechanical strain of primary intervertebral disc cells promotes secretion
20 of inflammatory factors associated with disc degeneration and pain. *Arthritis Res Ther*
21 **16**: R21.

22
23 Gilbert HT, Hoyland JA, Millward-Sadler SJ (2010) The response of human
24 annulus fibrosus cells to cyclic tensile strain is frequency-dependent and altered with
25 disc degeneration. *Arthritis Rheum* **62**: 3385-3394.

26
27 Gregory DE, Bae WC, Sah RL, Masuda K (2012) Anular delamination strength
28 of human lumbar intervertebral disc. *Eur Spine J* **21**: 1716-1723.

29
30 Grönblad M, Habtemariam A, Virri J, Seitsalo S, Vanharanta H, Guyer RD
31 (2003) Complement membrane attack complexes in pathologic disc tissues. *Spine*
32 (Phila Pa 1976) **28**: 114-118.

33
34 Heuer F, Schmidt H, Wilke H-J (2008) The relation between intervertebral disc
35 bulging and annular fiber associated strains for simple and complex loading. *J*
36 *Biomech* **41**: 1086-1094.

37
38 Hyc A, Osiecka-Iwan A, Strzelczyk P, Moskalewski S (2003) Effect of IL-1beta,
39 TNF-alpha and IL-4 on complement regulatory protein mRNA expression in human
40 articular chondrocytes. *Int J Mol Med* **11**: 91-94.

41
42 Ignatius A, Schoengraf P, Kreja L, Liedert A, Recknagel S, Kandert S, Brenner
43 RE, Schneider M, Lambris JD, Huber-Lang M (2011) Complement C3a and C5a
44 modulate osteoclast formation and inflammatory response of osteoblasts in synergism
45 with IL-1 β . *J Cell Biochem* **112**: 2594-2605.

46
47 Kay AG, Long G, Tyler G, Stefan A, Broadfoot SJ, Piccinini AM, Middleton J,
48 Kehoe O (2017) Mesenchymal Stem Cell-Conditioned Medium Reduces Disease
49 Severity and Immune Responses in Inflammatory Arthritis. *Sci Rep* **7**: 18019.

50
51 Kohyama K, Saura R, Doita M, Mizuno K (2000) Intervertebral disc cell
52 apoptosis by nitric oxide: biological understanding of intervertebral disc degeneration.
53 *Kobe J Med Sci* **46**: 283-295.

54
55 Krampera M, Cosmi L, Angeli R, Pasini A, Liotta F, Andreini A, Santarlaschi V,
56 Mazinghi B, Pizzolo G, Vinante F, Romagnani P, Maggi E, Romagnani S, Annunziato
57 F (2006) Role for interferon-gamma in the immunomodulatory activity of human bone
58 marrow mesenchymal stem cells. *Stem Cells* **24**: 386-398.

1
2
3 Liu Y, Lin L, Zou R, Wen C, Wang Z, Lin F (2018) MSC-derived exosomes
4 promote proliferation and inhibit apoptosis of chondrocytes via lncRNA-KLF3-
5 AS1/miR-206/GIT1 axis in osteoarthritis. *Cell Cycle* **17**: 2411-2422.

6
7 Lu K, Li HY, Yang K, Wu JL, Cai XW, Zhou Y, Li CQ (2017) Exosomes as
8 potential alternatives to stem cell therapy for intervertebral disc degeneration: in-vitro
9 study on exosomes in interaction of nucleus pulposus cells and bone marrow
10 mesenchymal stem cells. *Stem Cell Res Ther* **8**: 108.

11
12 Melrose J, Smith SM, Appleyard RC, Little CB (2008) Aggrecan, versican and
13 type VI collagen are components of annular translamellar crossbridges in the
14 intervertebral disc. *Eur Spine J* **17**: 314-324.

15
16 Miguélez-Rivera L, Pérez-Castrillo S, González-Fernández ML, Prieto-
17 Fernández JG, López-González ME, García-Cosamalón J, Villar-Suárez V (2018)
18 Immunomodulation of mesenchymal stem cells in discogenic pain. *Spine J* **18**: 330-342.

19
20 Molinos M, Almeida CR, Caldeira J, Cunha C, Gonçalves RM, Barbosa MA
21 (2015) Inflammation in intervertebral disc degeneration and regeneration. *J R Soc*
22 *Interface* **12**: 20141191.

23
24 Moradi-Lakeh M, Forouzanfar MH, Vollset SE, El Bcheraoui C, Daoud F, Afshin
25 A, Charara R, Khalil I, Higashi H, Abd El Razek MM, Kiadaliri AA, Alam K, Akseer
26 N, Al-Hamad N, Ali R, AlMazroa MA, Alomari MA, Al-Rabeeah AA, Alsharif U,
27 Altirkawi KA, Atique S, Badawi A, Barrero LH, Basulaiman M, Bazargan-Hejazi S,
28 Bedi N, Bensenor IM, Buchbinder R, Danawi H, Dharmaratne SD, Zannad F, Farvid
29 MS, Fereshtehnejad SM, Farzadfar F, Fischer F, Gupta R, Hamadeh RR, Hamidi S,
30 Horino M, Hoy DG, Hsairi M, Husseini A, Javanbakht M, Jonas JB, Kasaeian A, Khan
31 EA, Khubchandani J, Knudsen AK, Kopec JA, Lunevicius R, Abd El Razek HM, Majeed
32 A, Malekzadeh R, Mate K, Mehari A, Meltzer M, Memish ZA, Mirarefin M,
33 Mohammed S, Naheed A, Obermeyer CM, Oh IH, Park EK, Peprah EK, Pourmalek F,
34 Qorbani M, Rafay A, Rahimi-Movaghar V, Shiri R, Rahman SU, Rai RK, Rana SM,
35 Sepanlou SG, Shaikh MA, Shiue I, Sibai AM, Silva DAS, Singh JA, Skogen JC, Terkawi
36 AS, Ukwaja KN, Westerman R, Yonemoto N, Yoon SJ, Younis MZ, Zaidi Z, Zaki MES,
37 Lim SS, Wang H, Vos T, Naghavi M, Lopez AD, Murray CJL, Mokdad AH (2017)
38 Burden of musculoskeletal disorders in the Eastern Mediterranean Region, 1990-2013:
39 findings from the Global Burden of Disease Study 2013. *Ann Rheum Dis* **76**: 1365-1373.

40
41 Murray CJ, Barber RM, Foreman KJ, Abbasoglu Ozgoren A, Abd-Allah F, Abera
42 SF, Aboyans V, Abraham JP, Abubakar I, Abu-Raddad LJ, Abu-Rmeileh NM, Achoki
43 T, Ackerman IN, Ademi Z, Adou AK, Adsuar JC, Afshin A, Agardh EE, Alam SS,
44 Alasfoor D, Albittar MI, Alegretti MA, Alemu ZA, Alfonso-Cristancho R, Alhabib S,
45 Ali R, Alla F, Allebeck P, Almazroa MA, Alsharif U, Alvarez E, Alvis-Guzman N,
46 Amare AT, Ameh EA, Amini H, Ammar W, Anderson HR, Anderson BO, Antonio CA,
47 Anwari P, Arnlöv J, Arsic Arsenijevic VS, Artaman A, Asghar RJ, Assadi R, Atkins LS,
48 Avila MA, Awuah B, Bachman VF, Badawi A, Bahit MC, Balakrishnan K, Banerjee A,
49 Barker-Collo SL, Barquera S, Barregard L, Barrero LH, Basu A, Basu S, Basulaiman
50 MO, Beardsley J, Bedi N, Beghi E, Bekele T, Bell ML, Benjet C, Bennett DA, Bensenor
51 IM, Benzian H, Bernabé E, Bertozzi-Villa A, Beyene TJ, Bhala N, Bhalla A, Bhutta ZA,

1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

Bienhoff K, Bikbov B, Biryukov S, Blore JD, Blosser CD, Blyth FM, Bohensky MA, Bolliger IW, Bora Başara B, Bornstein NM, Bose D, Boufous S, Bourne RR, Boyers LN, Brainin M, Brayne CE, Brazinova A, Breitborde NJ, Brenner H, Briggs AD, Brooks PM, Brown JC, Brugha TS, Buchbinder R, Buckle GC, Budke CM, Bulchis A, Bulloch AG, Campos-Nonato IR, Carabin H, Carapetis JR, Cárdenas R, Carpenter DO, Caso V, Castañeda-Orjuela CA, Castro RE, Catalá-López F, Cavalleri F, Çavlin A, Chadha VK, Chang JC, Charlson FJ, Chen H, Chen W, Chiang PP, Chimed-Ochir O, Chowdhury R, Christensen H, Christophi CA, Cirillo M, Coates MM, Coffeng LE, Coggeshall MS, Colistro V, Colquhoun SM, Cooke GS, Cooper C, Cooper LT, Coppola LM, Cortinovis M, Criqui MH, Crump JA, Cuevas-Nasu L, Danawi H, Dandona L, Dandona R, Dansereau E, Dargan PI, Davey G, Davis A, Davitoiu DV, Dayama A, De Leo D, Degenhardt L, Del Pozo-Cruz B, Dellavalle RP, Deribe K, Derrett S, Des Jarlais DC, Dessalegn M, Dharmaratne SD, Dherani MK, Diaz-Torné C, Dicker D, Ding EL, Dokova K, Dorsey ER, Driscoll TR, Duan L, Duber HC, Ebel BE, Edmond KM, Elshrek YM, Endres M, Ermakov SP, Erskine HE, Eshrati B, Esteghamati A, Estep K, Faraon EJ, Farzadfar F, Fay DF, Feigin VL, Felson DT, Fereshtehnejad SM, Fernandes JG, Ferrari AJ, Fitzmaurice C, Flaxman AD, Fleming TD, Foigt N, Forouzanfar MH, Fowkes FG, Paleo UF, Franklin RC, Fürst T, Gabbe B, Gaffikin L, Gankpé FG, Geleijnse JM, Gessner BD, Gething P, Gibney KB, Giroud M, Giussani G, Gomez Dantes H, Gona P, González-Medina D, Gosselin RA, Gotay CC, Goto A, Gouda HN, Graetz N, Gugnani HC, Gupta R, Gupta R, Gutiérrez RA, Haagsma J, Hafezi-Nejad N, Hagan H, Halasa YA, Hamadeh RR, Hamavid H, Hammami M, Hancock J, Hankey GJ, Hansen GM, Hao Y, Harb HL, Haro JM, Havmoeller R, Hay SI, Hay RJ, Heredia-Pi IB, Heuton KR, Heydarpour P, Higashi H, Hajar M, Hoek HW, Hoffman HJ, Hosgood HD, Hossain M, Hotez PJ, Hoy DG, Hsairi M, Hu G, Huang C, Huang JJ, Husseini A, Huynh C, Iannarone ML, Iburg KM, Innos K, Inoue M, Islami F, Jacobsen KH, Jarvis DL, Jassal SK, Jee SH, Jeemon P, Jensen PN, Jha V, Jiang G, Jiang Y, Jonas JB, Juel K, Kan H, Karch A, Karema CK, Karimkhani C, Karthikeyan G, Kassebaum NJ, Kaul A, Kawakami N, Kazanjan K, Kemp AH, Kengne AP, Keren A, Khader YS, Khalifa SE, Khan EA, Khan G, Khang YH, Kieling C, Kim D, Kim S, Kim Y, Kinfu Y, Kinge JM, Kivipelto M, Knibbs LD, Knudsen AK, Kokubo Y, Kosen S, Krishnaswami S, Kuate Defo B, Kucuk Bicer B, Kuipers EJ, Kulkarni C, Kulkarni VS, Kumar GA, Kyu HH, Lai T, Lalloo R, Lallukka T, Lam H, Lan Q, Lansingh VC, Larsson A, Lawrynowicz AE, Leasher JL, Leigh J, Leung R, Levitz CE, Li B, Li Y, Li Y, Lim SS, Lind M, Lipshultz SE, Liu S, Liu Y, Lloyd BK, Lofgren KT, Logroscino G, Looker KJ, Lortet-Tieulent J, Lotufo PA, Lozano R, Lucas RM, Lunevicius R, Lyons RA, Ma S, Macintyre MF, Mackay MT, Majdan M, Malekzadeh R, Marcenes W, Margolis DJ, Margono C, Marzan MB, Masci JR, Mashal MT, Matzopoulos R, Mayosi BM, Mazorodze TT, McGill NW, McGrath JJ, McKee M, McLain A, Meaney PA, Medina C, Mehndiratta MM, Mekonnen W, Melaku YA, Meltzer M, Memish ZA, Mensah GA, Meretoja A, Mhimbira FA, Micha R, Miller TR, Mills EJ, Mitchell PB, Mock CN, Mohamed Ibrahim N, Mohammad KA, Mokdad AH, Mola GL, Monasta L, Montañez Hernandez JC, Montico M, Montine TJ, Mooney MD, Moore AR, Moradi-Lakeh M, Moran AE, Mori R, Moschandreas J, Moturi WN,

1
2
3 Moyer ML, Mozaffarian D, Msemburi WT, Mueller UO, Mukaigawara M, Mullany EC,
4 Murdoch ME, Murray J, Murthy KS, Naghavi M, Naheed A, Naidoo KS, Naldi L, Nand
5 D, Nangia V, Narayan KM, Nejjari C, Neupane SP, Newton CR, Ng M, Ngalesoni FN,
6 Nguyen G, Nisar MI, Nolte S, Norheim OF, Norman RE, Norrving B, Nyakarahuka L,
7 Oh IH, Ohkubo T, Ohno SL, Olusanya BO, Opio JN, Ortblad K, Ortiz A, Pain AW,
8 Pandian JD, Panelo CI, Papachristou C, Park EK, Park JH, Patten SB, Patton GC, Paul
9 VK, Pavlin BI, Pearce N, Pereira DM, Perez-Padilla R, Perez-Ruiz F, Perico N, Pervaiz
10 A, Pesudovs K, Peterson CB, Petzold M, Phillips MR, Phillips BK, Phillips DE, Piel FB,
11 Plass D, Poenaru D, Polinder S, Pope D, Popova S, Poulton RG, Pourmalek F,
12 Prabhakaran D, Prasad NM, Pullan RL, Qato DM, Quistberg DA, Rafay A, Rahimi K,
13 Rahman SU, Raju M, Rana SM, Razavi H, Reddy KS, Refaat A, Remuzzi G, Resnikoff
14 S, Ribeiro AL, Richardson L, Richardus JH, Roberts DA, Rojas-Rueda D, Ronfani L,
15 Roth GA, Rothenbacher D, Rothstein DH, Rowley JT, Roy N, Ruhago GM, Saeedi MY,
16 Saha S, Sahraian MA, Sampson UK, Sanabria JR, Sandar L, Santos IS, Satpathy M,
17 Sawhney M, Scarborough P, Schneider IJ, Schöttker B, Schumacher AE, Schwebel DC,
18 Scott JG, Seedat S, Sepanlou SG, Serina PT, Servan-Mori EE, Shackelford KA, Shaheen
19 A, Shahraz S, Shamah Levy T, Shangquan S, She J, Sheikhabahaei S, Shi P, Shibuya K,
20 Shinohara Y, Shiri R, Shishani K, Shiue I, Shrimme MG, Sigfusdottir ID, Silberberg DH,
21 Simard EP, Sindi S, Singh A, Singh JA, Singh L, Skirbekk V, Slepak EL, Sliwa K, Soneji
22 S, Søreide K, Soshnikov S, Sposato LA, Sreeramareddy CT, Stanaway JD, Stathopoulou
23 V, Stein DJ, Stein MB, Steiner C, Steiner TJ, Stevens A, Stewart A, Stovner LJ,
24 Stroumpoulis K, Sunguya BF, Swaminathan S, Swaroop M, Sykes BL, Tabb KM,
25 Takahashi K, Tandon N, Tanne D, Tanner M, Tavakkoli M, Taylor HR, Te Ao BJ,
26 Tediosi F, Temesgen AM, Templin T, Ten Have M, Tenkorang EY, Terkawi AS,
27 Thomson B, Thorne-Lyman AL, Thrift AG, Thurston GD, Tillmann T, Tonelli M,
28 Topouzis F, Toyoshima H, Traebert J, Tran BX, Trillini M, Truelsen T, Tsilimbaris M,
29 Tuzcu EM, Uchendu US, Ukwaja KN, Undurraga EA, Uzun SB, Van Brakel WH, Van
30 De Vijver S, van Gool CH, Van Os J, Vasankari TJ, Venketasubramanian N, Violante
31 FS, Vlassov VV, Vollset SE, Wagner GR, Wagner J, Waller SG, Wan X, Wang H, Wang
32 J, Wang L, Warouw TS, Weichenthal S, Weiderpass E, Weintraub RG, Wenzhi W,
33 Werdecker A, Westerman R, Whiteford HA, Wilkinson JD, Williams TN, Wolfe CD,
34 Wolock TM, Woolf AD, Wulf S, Wurtz B, Xu G, Yan LL, Yano Y, Ye P, Yentür GK, Yip
35 P, Yonemoto N, Yoon SJ, Younis MZ, Yu C, Zaki ME, Zhao Y, Zheng Y, Zonies D, Zou
36 X, Salomon JA, Lopez AD, Vos T (2015) Global, regional, and national disability-
37 adjusted life years (DALYs) for 306 diseases and injuries and healthy life expectancy
38 (HALE) for 188 countries, 1990-2013: quantifying the epidemiological transition.
39 Lancet **386**: 2145-2191.

40
41 Naqvi SM, Buckley CT (2015) Extracellular matrix production by nucleus
42 pulposus and bone marrow stem cells in response to altered oxygen and glucose
43 microenvironments. *J Anat* **227**: 757-766.

44
45 Naqvi SM, Buckley CT (2016) Bone marrow stem cells in response to
46 intervertebral disc-like matrix acidity and oxygen concentration: implications for cell-
47 based regenerative therapy. *Spine (Phila Pa 1976)* **41**: 743-750.

1
2
3 Neidlinger-Wilke C, Mietsch A, Rinkler C, Wilke HJ, Ignatius A, Urban J (2012)
4 Interactions of environmental conditions and mechanical loads have influence on
5 matrix turnover by nucleus pulposus cells. *J Orthop Res* **30**: 112-121.

6 Noriega DC, Ardura F, Hernández-Ramajo R, Martín-Ferrero M, Sánchez-Lite
7 I, Toribio B, Alberca M, García V, Moraleda JM, Sánchez A, García-Sancho J (2017)
8 Intervertebral disc repair by allogeneic mesenchymal bone marrow cells: a
9 randomized controlled trial. *Transplantation* **101**: 1945-1951.

10 Noris M, Remuzzi G (2013) Overview of complement activation and regulation.
11 *Semin Nephrol* **33**: 479-492.

12 Orozco L, Soler R, Morera C, Alberca M, Sánchez A, García-Sancho J (2011)
13 Intervertebral disc repair by autologous mesenchymal bone marrow cells: a pilot
14 study. *Transplantation* **92**: 822-828.

15 Parekkadan B, van Poll D, Suganuma K, Carter EA, Berthiaume F, Tilles AW,
16 Yarmush ML (2007) Mesenchymal stem cell-derived molecules reverse fulminant
17 hepatic failure. *PLoS One* **2**: e941.

18 Pereira CL, Teixeira GQ, Ribeiro-Machado C, Caldeira J, Costa M, Figueiredo F,
19 Fernandes R, Aguiar P, Grad S, Barbosa MA, Gonçalves RM (2016) Mesenchymal
20 Stem/Stromal Cells seeded on cartilaginous endplates promote intervertebral disc
21 regeneration through extracellular matrix remodeling. *Sci Rep* **6**: 33836.

22 Pettine K, Suzuki R, Sand T, Murphy M (2016) Treatment of discogenic back
23 pain with autologous bone marrow concentrate injection with minimum two year
24 follow-up. *Int Orthop* **40**: 135-140.

25 Pettine KA, Murphy MB, Suzuki RK, Sand TT (2015) Percutaneous injection of
26 autologous bone marrow concentrate cells significantly reduces lumbar discogenic
27 pain through 12 months. *Stem Cells* **33**: 146-156.

28 Pratsinis H, Papadopoulou A, Neidlinger-Wilke C, Brayda-Bruno M, Wilke HJ,
29 Kletsas D (2016) Cyclic tensile stress of human annulus fibrosus cells induces MAPK
30 activation: involvement in proinflammatory gene expression. *Osteoarthritis Cartilage*
31 **24**: 679-687.

32 Ren G, Zhang L, Zhao X, Xu G, Zhang Y, Roberts AI, Zhao RC, Shi Y (2008)
33 Mesenchymal stem cell-mediated immunosuppression occurs via concerted action of
34 chemokines and nitric oxide. *Cell Stem Cell* **2**: 141-150.

35 Ricklin D, Lambris JD (2013) Complement in immune and inflammatory
36 disorders: pathophysiological mechanisms. *J Immunol* **190**: 3831-3838.

37 Risbud MV, Shapiro IM (2014) Role of cytokines in intervertebral disc
38 degeneration: pain and disc content. *Nat Rev Rheumatol* **10**: 44-56.

39 Roberts S, Evans H, Trivedi J, Menage J (2006) Histology and pathology of the
40 human intervertebral disc. *J Bone Joint Surg Am* **88 Suppl 2**: 10-14.

41 Saggese T, Teixeira GQ, Wade K, Moll L, Ignatius A, Wilke HJ, Goncalves RM,
42 Neidlinger-Wilke C (2019) GEORG SCHMORL PRIZE OF THE GERMAN SPINE
43 SOCIETY (DWG) 2018: combined inflammatory and mechanical stress weakens the
44 annulus fibrosus: evidences from a loaded bovine AF organ culture. *Eur Spine J* **28**:
45 922-933.

1
2
3 Sakai D, Andersson GB (2015) Stem cell therapy for intervertebral disc
4 regeneration: obstacles and solutions. *Nat Rev Rheumatol* **11**: 243-256.

5 Sakai D, Grad S (2015) Advancing the cellular and molecular therapy for
6 intervertebral disc disease. *Adv Drug Deliv Rev* **84**: 159-171.

7 Sakai D, Nakamura Y, Nakai T, Mishima T, Kato S, Grad S, Alini M, Risbud MV,
8 Chan D, Cheah KS, Yamamura K, Masuda K, Okano H, Ando K, Mochida J (2012)
9 Exhaustion of nucleus pulposus progenitor cells with ageing and degeneration of the
10 intervertebral disc. *Nat Commun* **3**: 1264.

11 Saparov A, Ogay V, Nurgozhin T, Jumabay M, Chen WC (2016) Preconditioning
12 of Human Mesenchymal Stem Cells to Enhance Their Regulation of the Immune
13 Response. *Stem Cells Int* **2016**: 3924858.

14 Soland MA, Bego M, Colletti E, Zanjani ED, St. Jeor S, Porada CD, Almeida-
15 Porada G (2013) Mesenchymal stem cells engineered to inhibit complement-mediated
16 damage. *PLoS One* **8**: e60461.

17 Strassburg S, Richardson SM, Freemont AJ, Hoyland JA (2010) Co-culture
18 induces mesenchymal stem cell differentiation and modulation of the degenerate
19 human nucleus pulposus cell phenotype. *Regen Med* **5**: 701-711.

20 Teixeira GQ, Boldt A, Nagl I, Pereira CL, Benz K, Wilke HJ, Ignatius A, Barbosa
21 MA, Goncalves RM, Neidlinger-Wilke C (2016) A degenerative/proinflammatory
22 intervertebral disc organ culture: an ex vivo model for anti-inflammatory drug and cell
23 therapy. *Tissue Eng Part C Methods* **22**: 8-19.

24 Teixeira GQ, Pereira CL, Ferreira JR, Maia AF, Gomez-Lazaro M, Barbosa MA,
25 Neidlinger-Wilke C, Goncalves RM (2018) Immunomodulation of human
26 mesenchymal stem/stromal cells in intervertebral disc degeneration: insights from a
27 proinflammatory/degenerative ex vivo model. *Spine (Phila Pa 1976)* **43**: E673-E682.

28 Tu Z, Li Q, Bu H, Lin F (2010) Mesenchymal stem cells inhibit complement
29 activation by secreting factor H. *Stem Cells Dev* **19**: 1803-1809.

30 Urban JP (2002) The role of the physicochemical environment in determining
31 disc cell behaviour. *Biochem Soc Trans* **30**: 858-864.

32 van Buul GM, Villafuertes E, Bos PK, Waarsing JH, Kops N, Narcisi R, Weinans
33 H, Verhaar JA, Bernsen MR, van Osch GJ (2012) Mesenchymal stem cells secrete factors
34 that inhibit inflammatory processes in short-term osteoarthritic synovium and
35 cartilage explant culture. *Osteoarthritis Cartilage* **20**: 1186-1196.

36 van Koppen A, Joles JA, van Balkom BW, Lim SK, de Kleijn D, Giles RH,
37 Verhaar MC (2012) Human embryonic mesenchymal stem cell-derived conditioned
38 medium rescues kidney function in rats with established chronic kidney disease. *PLoS*
39 *One* **7**: e38746.

40 Vergroesen PP, Kingma I, Emanuel KS, Hoogendoorn RJ, Welting TJ, van Royen
41 BJ, van Dieën JH, Smit TH (2015) Mechanics and biology in intervertebral disc
42 degeneration: a vicious circle. *Osteoarthritis Cartilage* **23**: 1057-1070.

43 Wang Q, Rozelle AL, Lepus CM, Scanzello CR, Song JJ, Larsen DM, Crish JF,
44 Bebek G, Ritter SY, Lindstrom TM, Hwang I, Wong HH, Punzi L, Encarnacion A,
45 Shamloo M, Goodman SB, Wyss-Coray T, Goldring SR, Banda NK, Thurman JM,
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

1
2
3 Gobezie R, Crow MK, Holers VM, Lee DM, Robinson WH (2011) Identification of a
4 central role for complement in osteoarthritis. *Nat Med* **17**: 1674-1679.

5
6 Wuertz K, Godburn K, Iatridis JC (2009) MSC response to pH levels found in
7 degenerating intervertebral discs. *Biochem Biophys Res Commun* **379**: 824-829.

8
9 Yoshikawa T, Ueda Y, Miyazaki K, Koizumi M, Takakura Y (2010) Disc
10 regeneration therapy using marrow mesenchymal cell transplantation: a report of two
11 case studies. *Spine (Phila Pa 1976)* **35**: E475-480.

12
13 Yu J, Schollum ML, Wade KR, Broom ND, Urban JP (2015) ISSLS Prize Winner:
14 a detailed examination of the elastic network leads to a new understanding of annulus
15 fibrosus organization. *Spine (Phila Pa 1976)* **40**: 1149-1157.

16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

ECM For Peer Review

Figure legends

Fig. 1. Experimental timeline and experimental groups. (a) MSC secretome was produced by 10^6 MSC preconditioned with 10 ng/mL IL-1 β medium supplementation and culture at 37 °C with 6 % O $_2$ and 8.5 % CO $_2$ for 48 h (5 mL/well in 6-well culture plates). (b) The annulus fibrosus (AF) rings were cultured in a custom-made electromechanical device for the application of cyclic tensile strain (CTS) to deformable silicone dishes and with IL-1 β in the culture medium. The stimulated AF-OCs were either treated with MSC in co-culture or MSC secretome.

Fig. 2. Cell viability and gene expression of bovine AF cells at day 11 of organ culture. (a) Mitochondrial metabolic activity of AF organ cultures expressed in relative fluorescence units normalized to tissue wet weight. (b) Relative mRNA expression of bovine cell survival marker *bNOS2*, (c) pro-inflammatory markers, and (d) complement regulators. Results were normalised to expression level of *bGAPDH*. $n = 5-12$, * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

Fig. 3. Gene expression of bovine AF cells at day 11 of organ culture. (a) Relative mRNA expression of bovine matrix components, (b) tissue inhibitors of metalloproteinases, (c) matrix degrading enzymes, and (d) vascularization marker *bVEGF*. Results were normalised to expression level of *bGAPDH*. $n = 6-12$, * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

Fig. 4. DNA and protein content of AF-OCs at day 11. (a) DNA amount (ng) released to the culture supernatants. (b) DNA content in the AF tissues normalized to wet weight (ng/mg). (c) Collagen, elastin and sulphated glycosaminoglycan (sGAG) content in the AF tissues normalized to wet weight ($\mu\text{g}/\text{mg}$). $n = 10-18$, * $p < 0.05$, **** $p < 0.0001$.

Fig. 5. IL-6 and MMP-3 content of AF-OCs at day 11. (a) Representative images under polarized-light and bright-field of IL-6 and MMP-3 distribution within the translamellar bridging network (TLBN, *yellow arrows*) and the lamella matrix (LM, *green arrows*) of AF-OCs; *scale bar*, 500 μm . (b) IL-6 and (c) MMP-3 staining intensity in the TLBM normalized to the LM and to the unstimulated control sample for each experiment. $n = 7-10$; ## $p < 0.01$ (significant effect of control, *dashed line*); * $p < 0.05$, ** $p < 0.01$ (significant effects between CTS+IL-1 β stimulation and treatments).

Fig. 6. Protein content of AF-OC supernatants at day 11. (a) PGE $_2$ (ng/mL), (b) bovine IL-6 (bIL-6, pg/mL), (c) human IL-6 (hIL-6, ng/mL), (d) hCFH (ng/mL), and (e) hTIMP-1 and hTIMP-2 concentration (ng/mL). $n = 6-12$, * $p < 0.05$, *** $p < 0.001$, **** $p < 0.0001$.

Fig. 7. Cell viability and protein content of AF-OC supernatants at day 16. (a) Mitochondrial metabolic activity of AF organ cultures expressed in relative

1
2
3 fluorescence units normalized to tissue wet weight. (b) PGE₂ (ng/mL), (c) bovine IL-6
4 (bIL-6, pg/mL), (d) human IL-6 (hIL-6, ng/mL), (e) hCFH (ng/mL), and (f) hTIMP-2
5 concentration (ng/mL). $n = 6-8$, * $p < 0.05$, ** $p < 0.01$.
6
7

8
9 **Fig. 8. Annular delamination strength of AF-OCs at day 16.** Peel strength as function
10 of displacement rate (N/mm). $n = 6-12$, * $p < 0.05$.
11
12
13
14
15
16
17
18
19
20
21
22
23
24
25
26
27
28
29
30
31
32
33
34
35
36
37
38
39
40
41
42
43
44
45
46
47
48
49
50
51
52
53
54
55
56
57
58
59
60

ECM For Peer Review

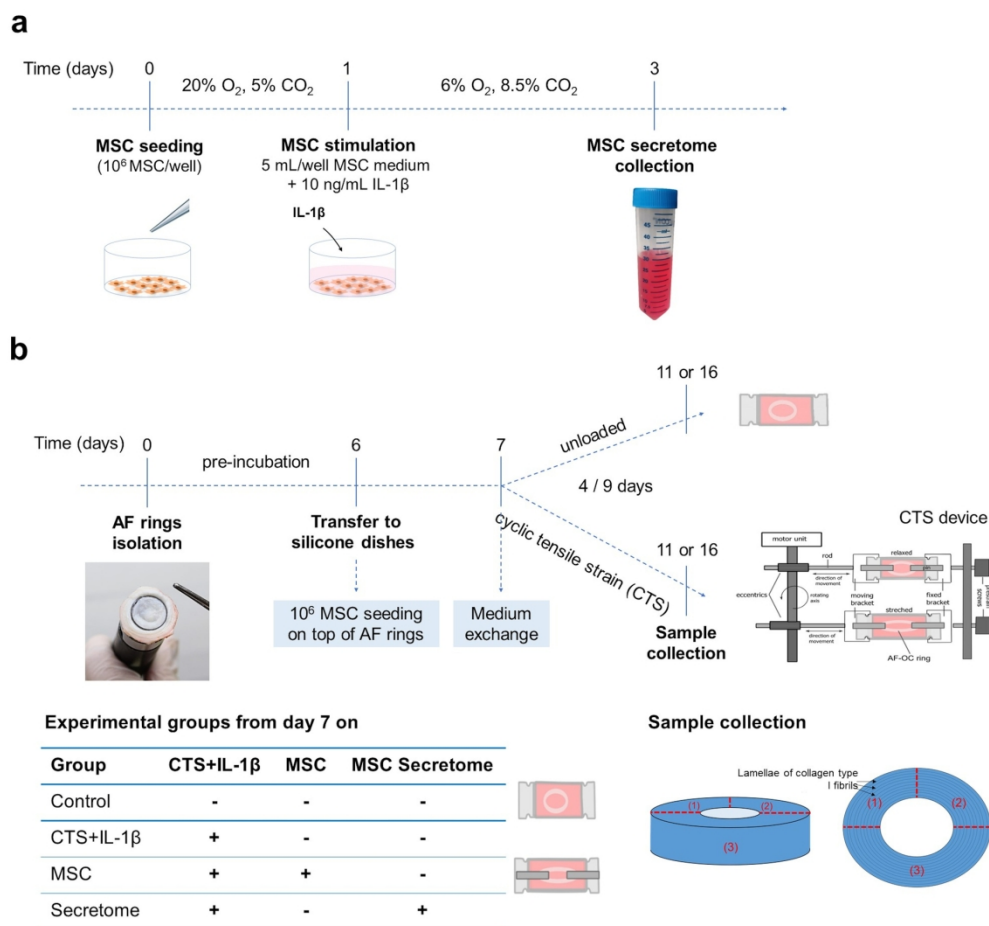


Fig. 1. Experimental timeline and experimental groups. (a) MSC secretome was produced by 10^6 MSC preconditioned with 10 ng/mL IL-1 β medium supplementation and culture at 37 °C with 6 % O₂ and 8.5 % CO₂ for 48 h (5 mL/well in 6-well culture plates). (b) The annulus fibrosus (AF) rings were cultured in a custom-made electromechanical device for the application of cyclic tensile strain (CTS) to deformable silicone dishes and with IL-1 β in the culture medium. The stimulated AF-OCs were either treated with MSC in co-culture or MSC secretome.

170x159mm (300 x 300 DPI)

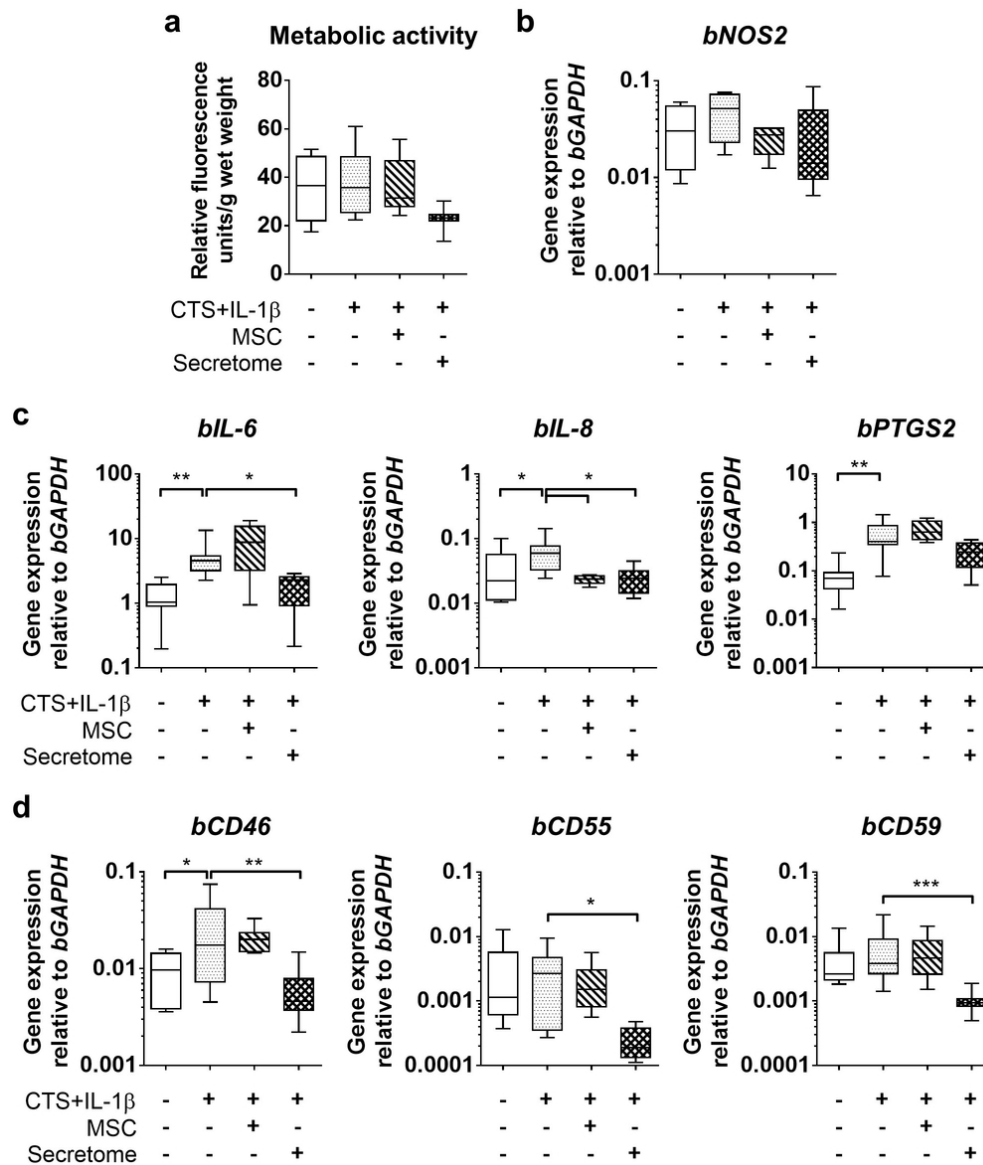


Fig. 2. Cell viability and gene expression of bovine AF cells at day 11 of organ culture. (a) Mitochondrial metabolic activity of AF organ cultures expressed in relative fluorescence units normalized to tissue wet weight. **(b)** Relative mRNA expression of bovine cell survival marker *bNOS2*, **(c)** pro-inflammatory markers, and **(d)** complement regulators. Results were normalised to expression level of *bGAPDH*. $n = 5-12$, * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

85x100mm (300 x 300 DPI)

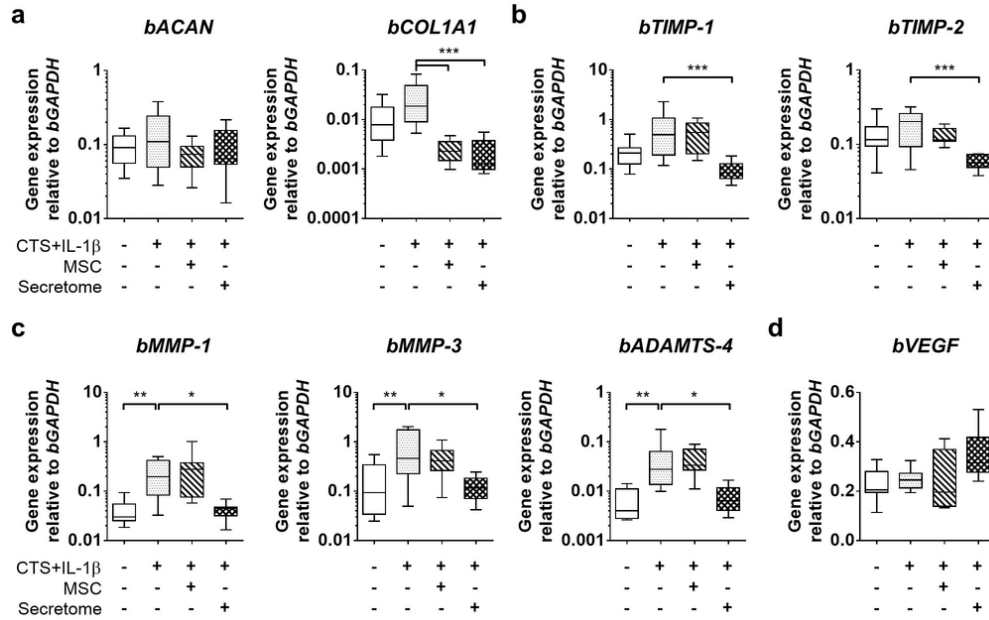


Fig. 3. Gene expression of bovine AF cells at day 11 of organ culture. (a) Relative mRNA expression of bovine matrix components, (b) tissue inhibitors of metalloproteinases, (c) matrix degrading enzymes, and (d) vascularization marker *bVEGF*. Results were normalised to expression level of *bGAPDH*. $n = 6-12$, * $p < 0.05$, ** $p < 0.01$, *** $p < 0.001$.

85x54mm (300 x 300 DPI)

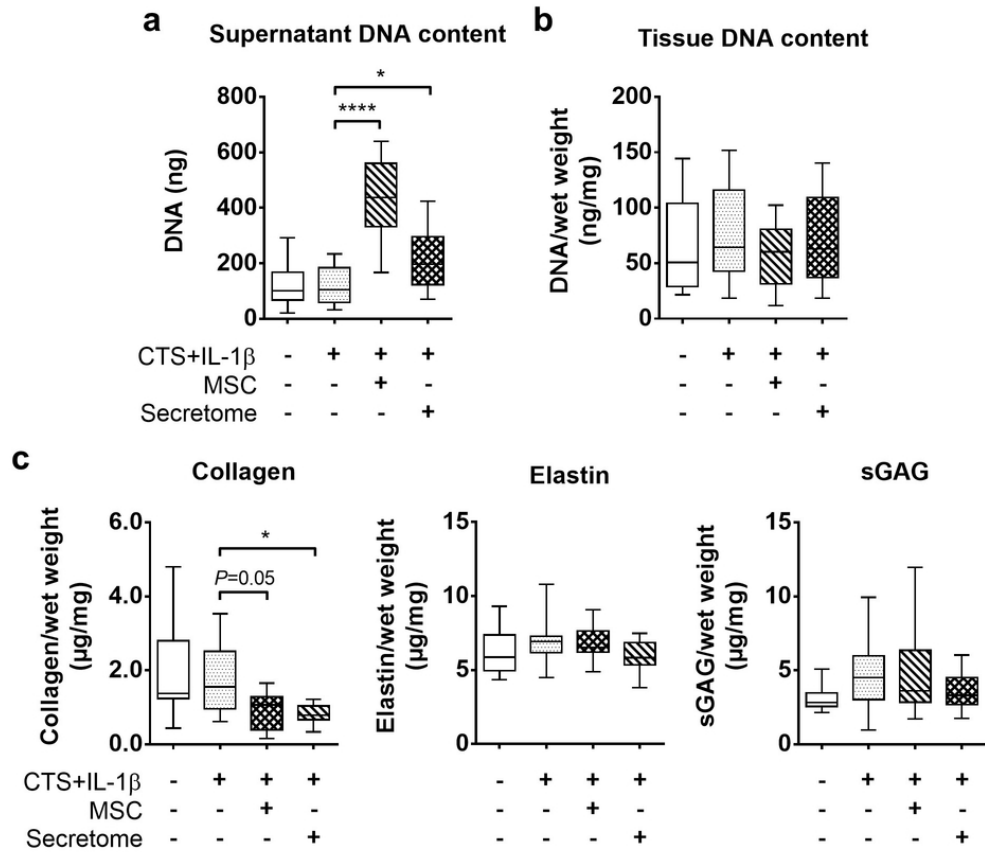


Fig. 4. DNA and protein content of AF-OCs at day 11. (a) DNA amount (ng) released to the culture supernatants. (b) DNA content in the AF tissues normalized to wet weight (ng/mg). (c) Collagen, elastin and sulphated glycosaminoglycan (sGAG) content in the AF tissues normalized to wet weight (μ g/mg). $n = 10-18$, * $p < 0.05$, **** $p < 0.0001$.

79x69mm (300 x 300 DPI)

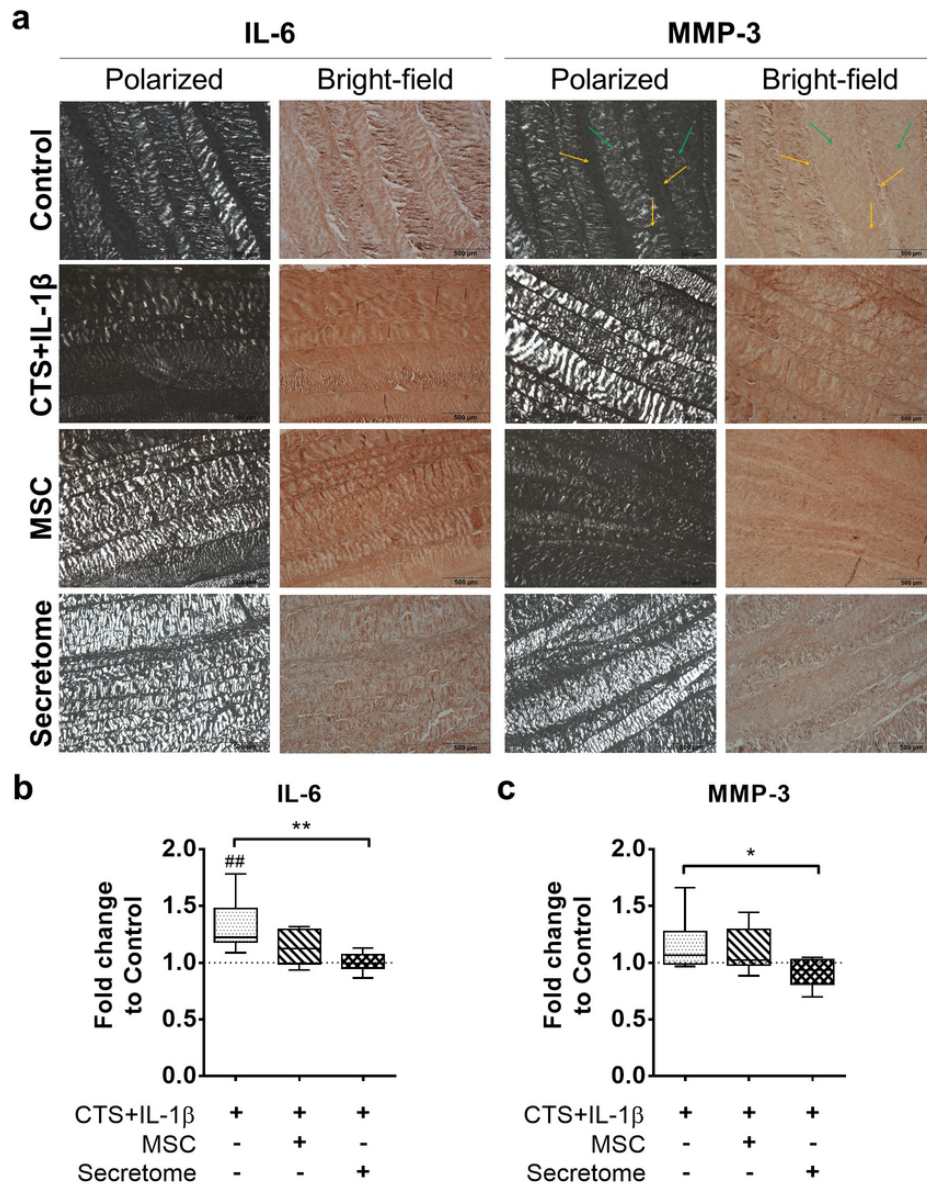


Fig. 5. IL-6 and MMP-3 content of AF-OCs at day 11. (a) Representative images under polarized-light and bright-field of IL-6 and MMP-3 distribution within the translamellar bridging network (TLBN, *yellow arrows*) and the lamella matrix (LM, *green arrows*) of AF-OCs; scale bar, 500 μm. (b) IL-6 and (c) MMP-3 staining intensity in the TLBN normalized to the LM and to the unstimulated control sample for each experiment. $n = 7-10$; ## $p < 0.01$ (significant effect compared to control, *dashed line*); * $p < 0.05$, ** $p < 0.01$ (significant effects between CTS+IL-1β stimulation and treatments).

72x92mm (300 x 300 DPI)

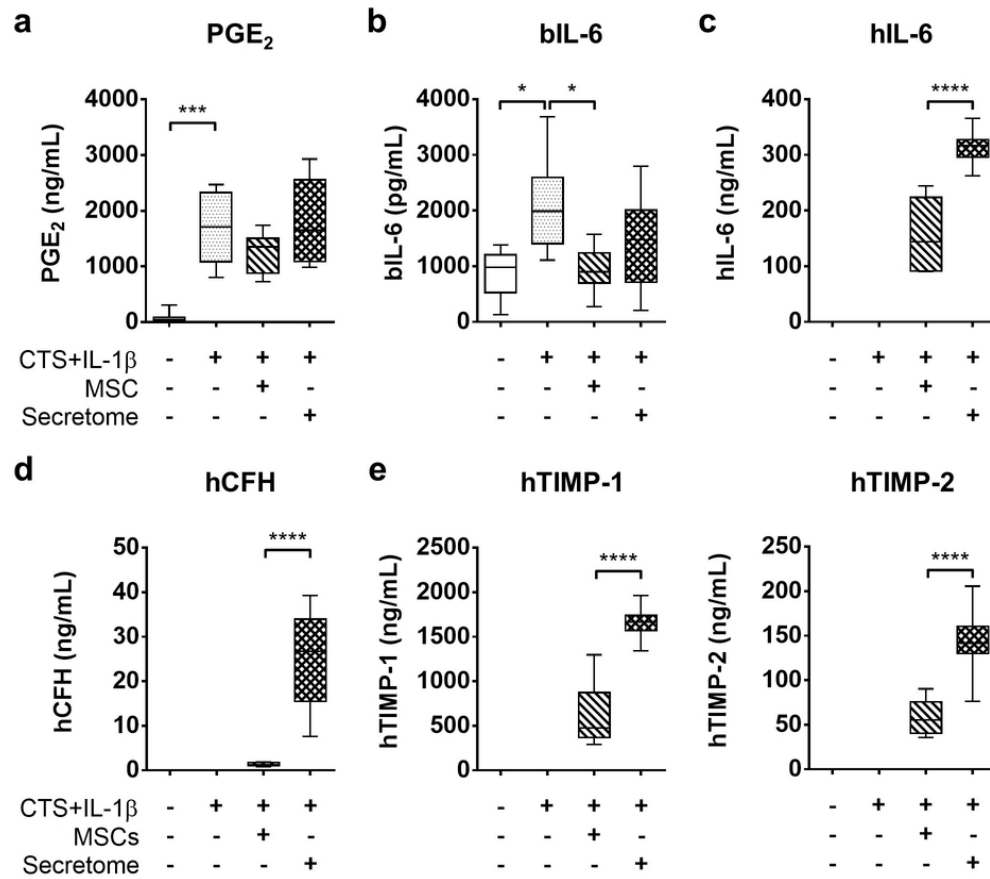


Fig. 6. Protein content of AF-OC supernatants at day 11. (a) PGE₂ (ng/mL), (b) bovine IL-6 (bIL-6, pg/mL), (c) human IL-6 (hIL-6, ng/mL), (d) hCFH (ng/mL), and (e) hTIMP-1 and hTIMP-2 concentration (ng/mL). $n = 6-12$, * $p < 0.05$, *** $p < 0.001$, **** $p < 0.0001$.

79x70mm (300 x 300 DPI)

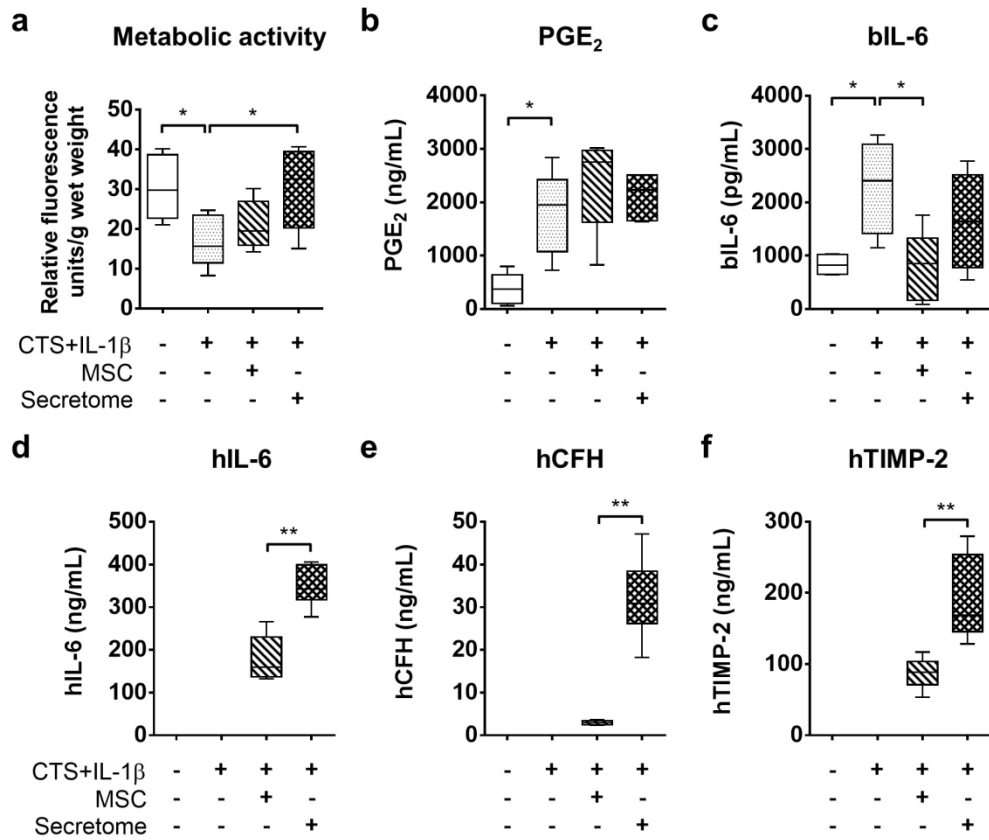


Fig. 7. Cell viability and protein content of AF-OC supernatants at day 16. (a) Mitochondrial metabolic activity of AF organ cultures expressed in relative fluorescence units normalized to tissue wet weight. (b) PGE₂ (ng/mL), (c) bovine IL-6 (bIL-6, pg/mL), (d) human IL-6 (hIL-6, ng/mL), (e) hCFH (ng/mL), and (f) hTIMP-2 concentration (ng/mL). *n* = 6-8, * *p* < 0.05, ** *p* < 0.01.

518x444mm (96 x 96 DPI)

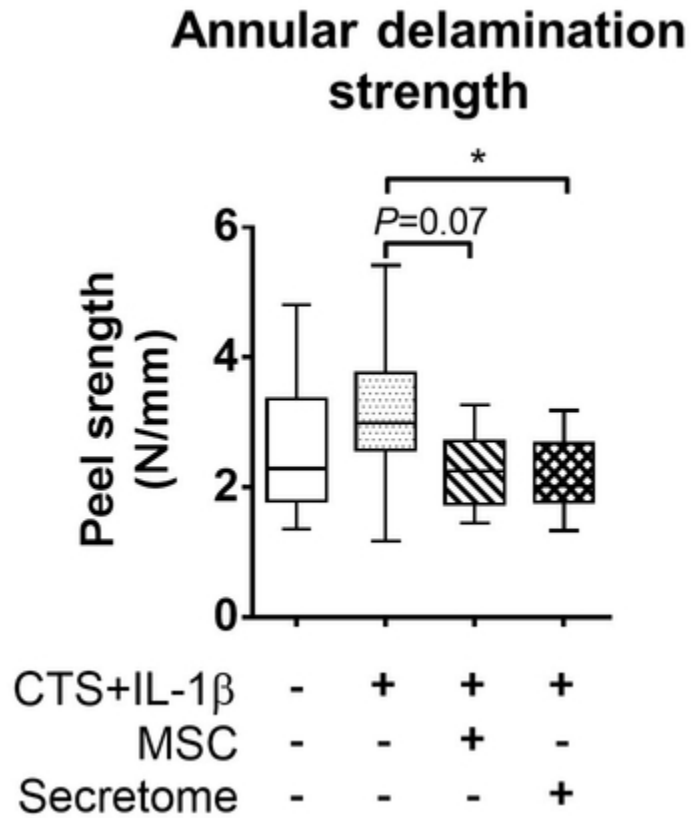


Fig. 8. Annular delamination strength of AF-OCs at day 16. Peel strength as function of displacement rate (N/mm). $n = 6-12$, * $p < 0.05$.

32x35mm (300 x 300 DPI)

Table 1. Media added at days 7 and 11 of culture to the different experimental groups. CTS: cyclic tensile strain; IL-1 β : interleukin-1 β ; IVD: intervertebral disc; MSC: mesenchymal stem cells

Group	Medium
<i>Control</i>	IVD medium
<i>CTS+IL-1β</i>	IVD medium + 10 ng/mL IL-1 β
<i>MSC</i>	IVD medium + 10 ng/mL IL-1 β
<i>Secretome</i>	IVD medium + MSC Secretome (1:1 ratio) + 10 ng/mL IL-1 β

ECM For Peer Review

Table 2. Bovine oligonucleotide primers used for qRT-PCR. Primers with shown sequence were custom designed; primers with assay ID number were purchased from Applied Biosystems. fw: forward; rev: reverse; b: bovine.

Gene	Sequence (forward and reverse primer)	Product size (bp)
<i>bACAN</i>	fw: 5'-ACA GCG CCT ACC AAG ACA AG-3' rev: 5'-ACG ATG CCT TTT ACC ACG AC-3'	155
<i>bADAMTS-4</i>	fw: 5'-GAA GCA ATG CAC TGG TCT GA-3' rev: 5'-CTA GGA GAC AGT GCC CGA AG-3'	155
<i>bCD46</i>	assay ID: Bt03224806_m1	97
<i>bCD55</i>	assay ID: Bt03220649_m1	67
<i>bCD59</i>	assay ID: Bt03229098_m1	135
<i>bCOL1A1</i>	assay ID: Bt01463861_g1	61
<i>bGAPDH</i>	fw: 5'-ACC CAG AAG ACT GTG GAT GG-3' rev: 5'-CAA CAG ACA CGT TGG GAG TG-3'	178
<i>bIL-6</i>	fw: 5'-ACC CCA GGC AGA CTA CTT CT-3' rev: 5'-GCA TCC GTC CTT TTC CTC CA-3'	183
<i>bIL-8</i>	fw: 5'-ATT CCA CAC CTT TCC ACC CC-3' rev: 5'-ACA ACC TTC TGC ACC CAC TT-3'	148
<i>bMMP-1</i>	fw: 5'-ATG CTG TTT TCC AGA AAG GTG G-3' rev: 5'-TCA GGA AAC ACC TTC CAC AGA C-3'	193
<i>bMMP-3</i>	assay ID: Bt04259490_m1	76
<i>bNOS2</i>	assay ID: Bt03249602_g1	56
<i>bPTGS2</i>	assay ID: Bt03214492_m1	87
<i>bTIMP-1</i>	assay ID: Bt03223721_m1	57
<i>bTIMP-2</i>	assay ID: Bt03231007_m1	88
<i>bVEGF</i>	fw: 5'-TTG CCT TGC TGC TCT ACC TT-3' rev: 5'-ACA CAG GAC GGC TTG AAA AT-3'	196

Supplemental Data

To evaluate whether the proinflammatory/degenerative conditions of the annulus fibrosus organ culture (AF-OC) could influence the mesenchymal stem/stromal cells (MSC) phenotype, the gene expression of several markers by the MSC was analysed after expansion (Basal MSC) and after preconditioning with 10 ng/mL IL-1 β medium supplementation and culture at 37 °C with 6 % O₂ and 8.5 % CO₂ for 48 h (pre-conditioned MSC).

Materials and Methods

Gene expression analysis of human MSC

Total RNA was isolated from the MSC using the RNeasy Mini kit (Qiagen). RNA concentration and quality were determined by spectrophotometry (Spark, Tecan). For cDNA synthesis, 1 μ g of RNA was reverse transcribed into cDNA using the QuantiTect Reverse Transcription kit (ThermoFisher Scientific). Gene expression analysis was performed with primers for the reference gene human glyceraldehyde 3-phosphate dehydrogenase (*hGAPDH*), as well as for the target genes in Table 3. The transcribed cDNA was either mixed with custom-designed primers and the Platinum SYBR Green qPCR SuperMix-UDG kit (Invitrogen), or TaqMan Gene Expression Assays and Fast Advanced Master Mix (Applied Biosystems). Gene expression levels were determined by quantitative polymerase chain reaction (qPCR, QuantStudio 3 real-time PCR system, Applied Biosystems). The melt curves were analysed to confirm the specificity of the reaction and quantification cycle (C_q) 35 cutoff was used. Relative expression levels were calculated using the C_q method ($\Delta C_t = C_{t(\text{gene of interest})} - C_{t(\text{GAPDH})}$).

Table 3. Human oligonucleotide primers used for qRT-PCR. Primers with shown sequence were custom designed; primers with assay ID number were purchased from Applied Biosystems. fw: forward; rev: reverse; h: human.

Gene	Sequence (forward and reverse primer)	Product size (bp)
<i>hC3</i>	fw: 5'-TGC TGC CCA GTT TCG AGG TCA-3' rev: 5'-CCC GTC CAG CAG TAC CTT TCG G-3'	248
<i>hC5</i>	fw: 5'-TGT CGT CGC AAG CCA GCT CC-3' rev: 5'-TGC CAA TGC CTT GAA TTT CCC AGG-3'	215
<i>hC6</i>	assay ID: Hs01110040_m1	86
<i>hC7</i>	assay ID: Hs00940408_m1	75
<i>hC8A</i>	Assay ID: Hs00175098_m1	76
<i>hC9</i>	assay ID: Hs01036216_g1	84
<i>hCD46</i>	fw: 5'-GTG AGG AGC CAC CAA CAT TT-3' rev: 5'-GGC GTC ATC TGA GAC AGG T-3'	177
<i>hCD55</i>	fw: 5'- CAG CAC CACCAC AAA TTG AC-3' rev: 5'-CTG AAC TGT TGG TGG GAC CT-3'	215
<i>hCD59</i>	fw: 5'-CCG CTT GAG GGA AAA TGA G-3' rev: 5'-CAG AAA TGG AGT CAC CAG CA-3'	130
<i>hGAPDH</i>	assay ID: Hs99999905_m1	122
<i>hIL-6</i>	fw: 5'-AGG AGA CTT GCC TGG TGA AA-3' rev: 5'-CAG GGG TGG TTA TTG CAT CT-3'	180
<i>hIL-8</i>	fw: 5'-GTG CAG TTT TGC CAA GGA GT-3' rev: 5'- CTC TGC ACC CAG TTT TCC TT-3'	196
<i>hMMP-1</i>	fw: 5'-ATG CTG AAA CCC TGA AGG TG-3' rev: 5'-CTG CTT GAC CCT CAG AGA CC-3'	234
<i>hMMP-3</i>	fw: 5'-GGA GAT GCC CAC TTT GAT GAT-3' rev: 5'-CAT CTT GAG ACA GGC GGA AC-3'	187

Results

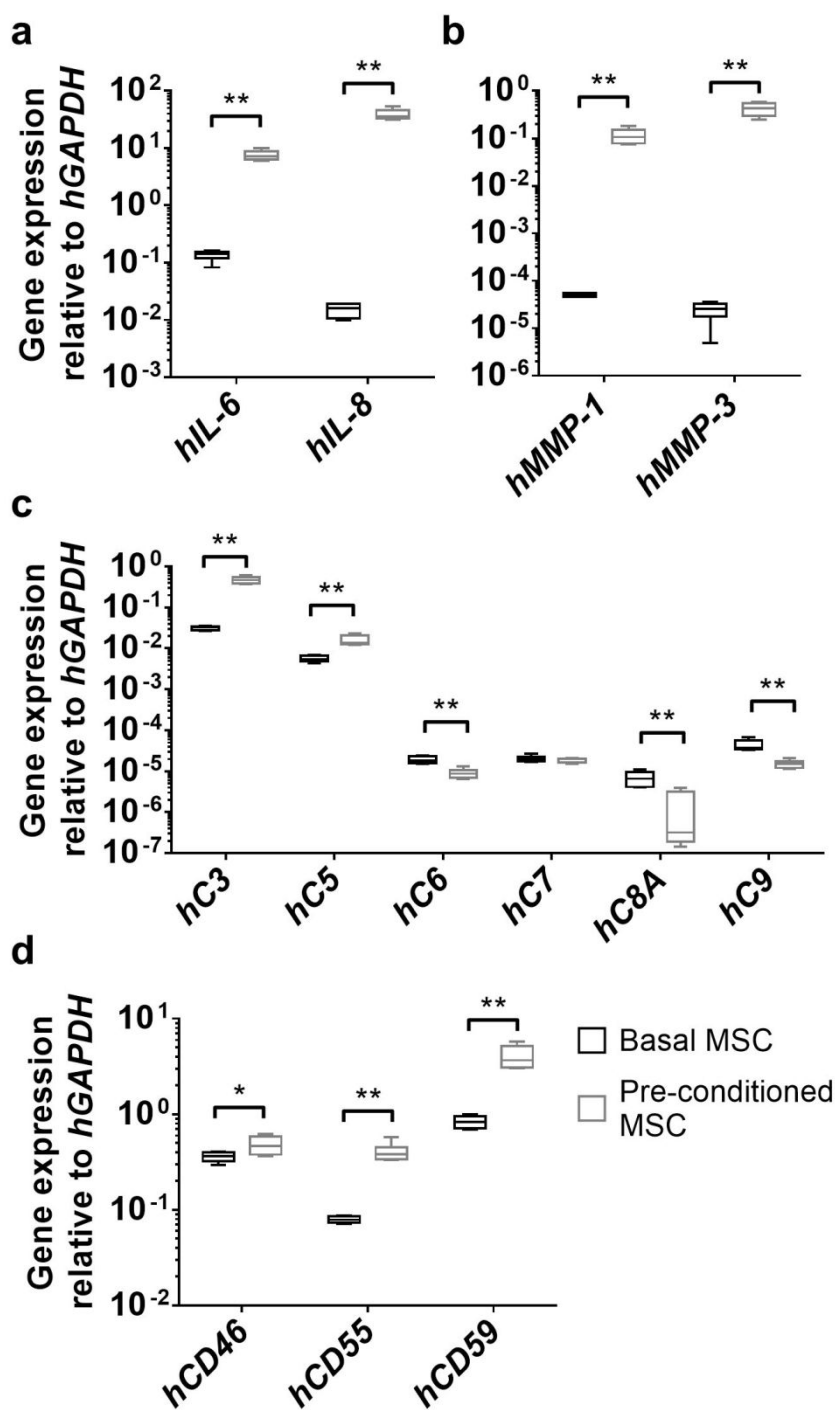


Fig. 9. Gene expression of human MSC after culture under basal (Basal MSC) or preconditioning with 10 ng/mL IL-1 β medium supplementation and culture at 37 $^{\circ}$ C with 6 % O $_2$ and 8.5 % CO $_2$ for 48 h (Pre-conditioned MSC). (a) Relative mRNA expression of human pro-inflammatory cytokines *hIL-6*, *hIL-8*, (b) matrix metalloproteinases *hMMP-1*, *hMMP-3*, (c) complement components *hC3*, *hC5*, *hC6*, *hC7*, *hC8A*, *hC9*, and (d) complement inhibitors *hCD46*, *hCD55* and *hCD59*. Results were normalised to expression level of *hGAPDH*. $n = 6$, * $p < 0.05$, ** $p < 0.01$, non-parametric Mann-Whitney test.