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INSPIRE PROJECT: *IN VITRO* INHALATION TESTING OF SILANE & SURFACTANT COMPOUNDS

Case studies Evelien Frijns & Sandra Verstraelen June 2nd 2021

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- VITO
- State of the art
- Air-liquid interface cell cultures & exposure techniques @VITO
- Generation & exposure infrastructure @VITO
- Case study INSPiRE

Test chemicals & controls	Generation setups	Exposure setups	Vapor/aerosol characterization – generated concentration	Delivered dose	VITROCELL [®] 6/4 exposure system & parameters
Test systems, parameters & endpoints	Experimental designs	Results	Troubleshooting	Next steps	Acknowledgements



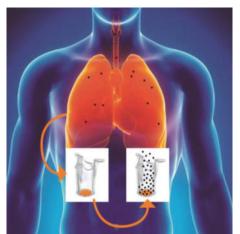
VITO – FLEMISH INSTITUTE FOR TECHNOLOGICAL RESEARCH

Eindhoven Antwerp Bruges E40 Ghent Dunkirk Calais E403 E313 Brussels 2010 A26 Liège Mons Belgium 141 Charleroi 19/1: Strategic research center of Flanders • Funded (1/3) by the Flemish Government Ш Headquarter located in Mol, Belgium Luxer





In vitro platform for inhalation testing



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Non-guideline methods

human-relevant/advanced



OECD







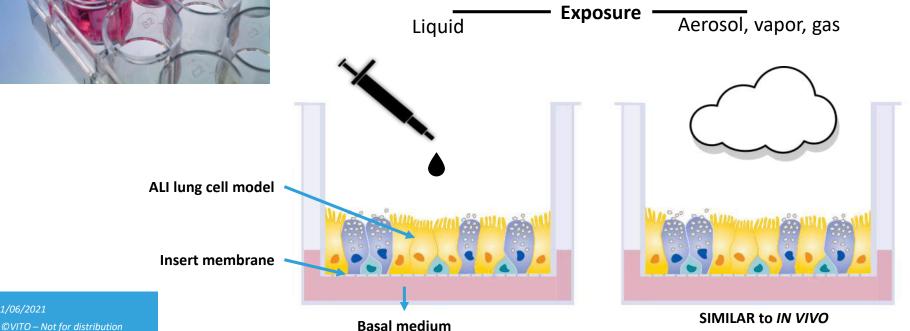
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Air-liquid interface (ALI) expertise:

- Monoculture cell lines (BEAS-2B, Calu-3, A549)
- 3D tri-culture alveolar model (Luxembourg Institute of Science and Technology)
- 3D tissues from human donors (nasal or bronchial MucilAir™, Epithelix Sàrl, Swiss)





GENERATION AND EXPOSURE INFRASTRUCTURE @VITO





NAVETTA



Wet generation

- Vibrating mesh nebulizer
- Atomizers





Dry generation

- PreciseInhale[®]
- Rotating Brush Generator





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INSPIRE: IN vitro System to Predict Respiratory toxicity

- Demonstrate usefulness of different in vitro test systems
- Predict ability of chemicals to cause portal-of entry effects on human respiratory tract

		Differences between project phases
Phase 1 (Completed)	Assess the respiratory toxicity of triethoxysilane in BEAS-2B cells	https://www.piscltd.org.uk/inhalation-webinars/
Phase 2 (Ongoing)	Assess the respiratory toxicity of silanes and surfactants in BEAS-2B cells	 Key differences between Phase 1 and Phase 2: Reduce exposure time to 30 minutes Additional test substances Adding 'true' negative control Using nitrogen gas as a carrier control for silanes Testing only 4 cytokines ALI post-exposure Removed bovine pituitary extract from cell media
Phase 3 (Ongoing)	Assess the respiratory toxicity of silanes and surfactants in MucilAir™	 Key differences between Phase 2 and Phase 3: Using a 3D model Assessing additional endpoints Adding 7 day recovery period
1/06/2021		



SILANES

- Acute toxicity by inhalation
- Hydrolyze quickly: ethanol, methanol, hydrochloric acid
- Corrosion protection, adhesion promotion, surface modifications



Triethoxysilane (TES)

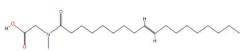
GHS2, CAS 998-30-1 Boiling point: 134-135°C Vapor pressure: 20.25 mmHg @20°C

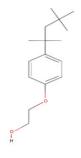
Trimethoxysilane (TMS)

GHS1, CAS 2478-90-3 Boiling point: 86°C Vapor pressure: <7.2 mmHg @20°C

SURFACTANTS

- OS: Corrosion inhibitor in aerosol products
- TX-100: Lyse cells to extract protein/organelles or to permeabilize the living cell membrane for transfection





Oleoyl sarcosine (OS)

GHS4, anionic, CAS 110-25-8 Boiling point: 1413°C Vapor pressure: no data

Triton X-100 (TX-100)

Non-ionic, CAS 9002-93-1 Boiling point: > 200°C @1.013 hPa Vapor pressure: < 1.00 mmHg @20 °C

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NEGATIVE

- Clean air (CA) Compressor, HEPA/Active Carbon filter
- Nitrogen (N₂) Storage tank
- Sodium Chloride (NaCl) Atomization 0.9%



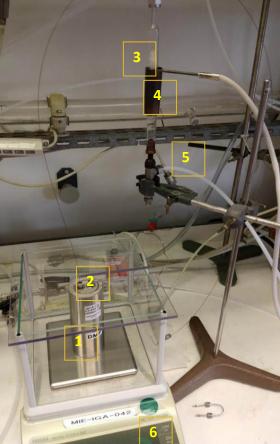
POSITIVE

- Nitrogen dioxide (NO₂) Gas cylinder, N₂ dilution
- BEAS-2B: 25 ppm
- MucilAir™: 800 ppm







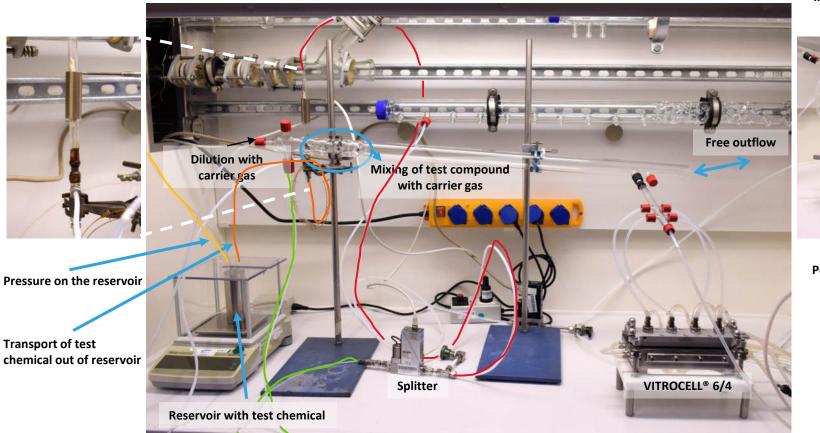


1/06/2021 ©VITO – Not for distribution Capillary dosage (Goelen et al. 1992*)

- 1. Recipient with silane on analytical balance
- 2. Pressure on closed recipient
- 3. Outgoing liquid retained by cotton plug
- 4. Liquid evaporated by local heating element
- 5. Silane vapor transferred by dry N₂ flow to glass distribution line
- 6. Weight loss monitored

*Goelen E, Lambrechts M, Geyskens F, Rymen T (1992). Development and Performance Characteristics of a Capillary Dosage Unit with in Situ Weight Sensor for the Preparation of Known Amounts of Gaseous Voc's in Air. International Journal of Environmental Analytical Chemistry, 47 (4): 217-225.





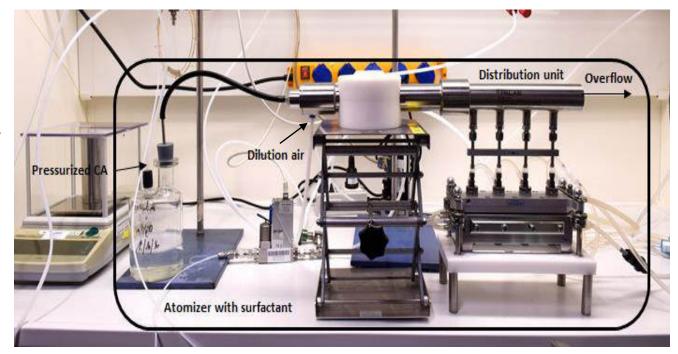
Inlet for vaporized test chemical



Position for inserts with cells

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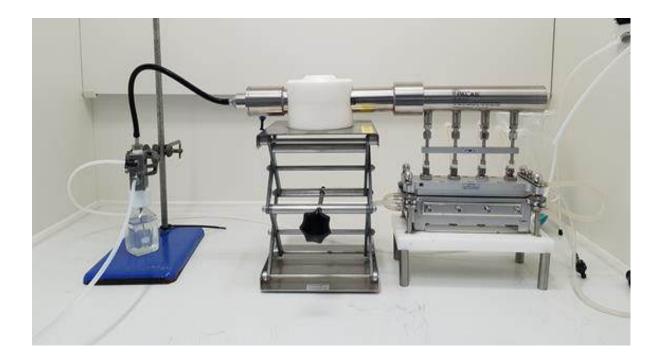


- TX-100 diluted with MilliQ
- Range <2.5% (BEAS-2B)
- Range <10% (MucilAir[™])

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- OS with 10% ethanol to reduce viscosity
- 2.5 bar
- Flow dilution 0, 2, and 5 lpm
- 188-647 mg/m³ (MucilAir™)









Silanes

- Stability of silanes in carrier gas was online monitored with a FID analyzer (JUM model 3-300) and generated concentration was calculated.
- Dose: Insert membrane with cells removed with scalpel blade and stored in a 15 ml tube at -20°C. ICP-AES analysis (to be performed).

OS

- Generated mass concentration determined by sampling on a 25mm quartz fiber filter and weighing the filter before and after sampling. Together with the sampling volume, mass concentration was calculated (mg/m³).
- Dose: Taped dry inserts, after OS exposure, rinsing membrane with 100 μl ethanol. Ethanol was collected for LC-MS analysis.

TX-100

• Dose: Insert membrane with cells removed with scalpel blade and stored in a 15 ml tube at -20°C. LC-MS analysis (to be performed).

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SILANES

- ICP-AES (inductively coupled plasma-atomic emission spectroscopy)
- Silicium standard in 5% TMAH (tetramethylammoniumhydroxide); digestion in TMAH
- Insert membrane with cells



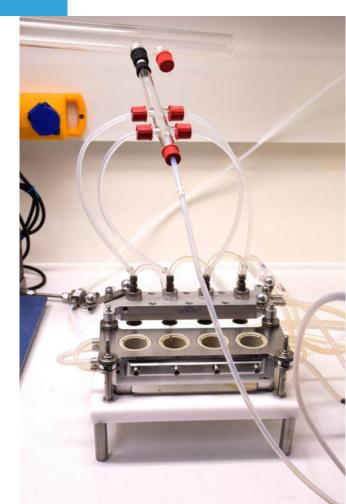
SURFACTANTS

- LC-MS (liquid chromatography-mass spectrometry)
- Mobile phase A: 60% water + 0.02% formic acid; mobile phase B: 40% methanol
- Taped inserts, rinsing with ethanol
- Insert membrane with cells



VITROCELL[®] 6/4 EXPOSURE SYSTEM & PARAMETERS

Parameters			
Flow rate over cells	3 milliliter per minute (mlpm)		
Flow rate elsewhere	Depends on concentration/dose needed		
Trumpet height	3 mm		
Conditioning	 Temperature during exposure: 37 °C Dry exposure because of reactivity silanes 		



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TEST SYSTEMS, PARAMETERS & ENDPOINTS

BEAS-2B: 2D normal human bronchial epithelial cell line

Endpoints:

- Cell viability (cell metabolization activity; PrestoBlue[™])
- Cytotoxicity (cell membrane integrity, release of lactate dehydrogenase (LDH); CytoTox-ONE[™])
- Inflammatory markers (IL-2, IL-6, IL-8, TNF-α; V-PLEX, Meso Scale Discovery)

	Parameters				
	Type of inserts	Precoated Corning [®] Transwell [®] polyester membrane inserts (Sigma- Aldrich), pore size 0.4 μm, diameter 24 mm (6-well)			
	Seeding density on inserts	50.000 cells/cm ²			
	Growth protocol	48 h submerged growth, exchange bronchial epithelial growth medium (BEGM without BPE) for bronchial epithelial basal medium (BEBM) at the day of ALI exposure			

<i>In vivo</i> Key Events <u>silanes</u>				
Cell death				
Loss of epithelial barrier				
Secretion of inflammatory cytokines				
Pulmonary edema/hemorrhage				
<i>In vivo</i> Key Events <u>surfactants</u>				
Interaction with pulmonary surfactant				
Interaction with pulmonary surfactant Disruption epithelial lining & cell membranes				
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Disruption epithelial lining & cell membranes				

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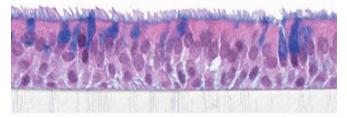
MucilAir[™]: 3D human epithelial tissue model -> normal bronchial male & female mono-donor tissues

Endpoints:

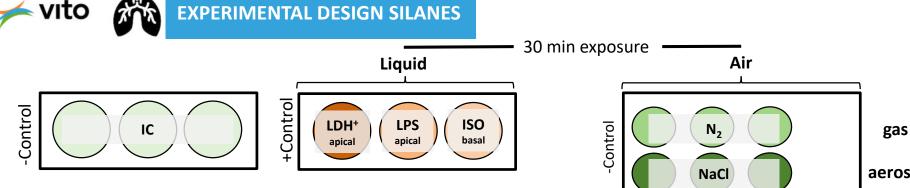
- Cell viability
- Cytotoxicity (LDH Assay Kit-WST)
- Inflammatory markers (IL-2, IL-6, IL-8, TNF-α)
- Barrier integrity (Transepithelial electrical resistance (TEER); Millicell ERS-2)
- Cilia beating frequency (CBF; SAVA system)
- Morphology (hematoxylin and eosin (H&E) staining) Cerba Research

Parameters	
Type of inserts	Corning [®] Transwell [®] polyester membrane inserts (Sigma-Aldrich), 24-well
Thickness epithelium	40-50 μm
Protocol	 Commercially available from Epithelix Sàrl (Swiss) -> standardized platform & maintenance protocol 24 h before exposure: apical wash of each insert to remove mucus + basal TEER measurement





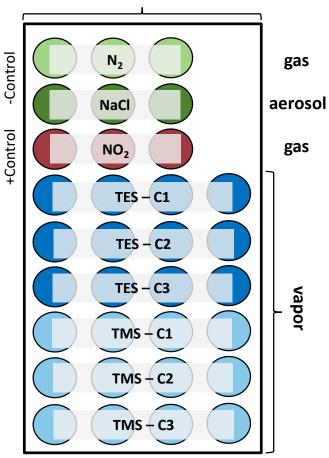


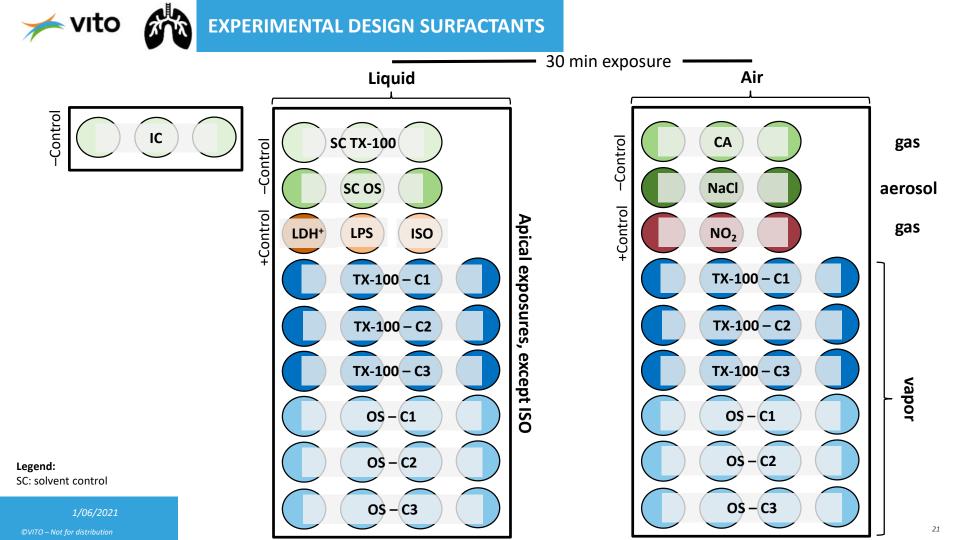


Legend:

IC: incubator control – control for N₂ or CA LDH⁺: positive control for LDH assay LPS: lipopolysaccharide - positive control for inflammatory response ISO: isoproterenol - positive control for CBF (only tested in MucilAir™) C1-C3: lowest – mid – highest concentration of test chemicals

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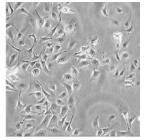






EXPERIMENTAL DESIGN BEAS-2B

30 min exposure





replicates/condition

At least 3 independent biological experiments

ALI post- exposure (PE)	ICP-AES/ LC-MS cells+basal	LDH basal	PrestoBlue cells	Inflammatory markers basal
No	1			
30 min		3		
19-24 h		3	3	3

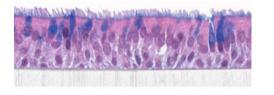
For each experiment of silanes: 10 conditions * 13 readouts -> **130 readouts** For each experiment of surfactants: 17 conditions * 13 readouts -> **221 readouts**

1/06/2021



EXPERIMENTAL DESIGN MUCILAIR™

Adaptors 24-well





At least 4 replicates/condition

At least 3 independent biological experiments

	ALI post- exposure (PE)	ICP-AES/ LC-MS Cells+basal	LDH basal	PrestoBlue cells	Inflammatory markers basal	TEER /	CBF /	H&E cells
	No	1						
	19-24 h		3	1	3	3	3	1
ר	7 d*		2	2	2	2	2	1

*Medium refreshment on d 3 & 6

For each experiment of silanes: 10 conditions * 26 readouts -> **260 readouts** For each experiment of surfactants: 17 conditions * 26 readouts -> **442 readouts**



GENERATED CONCENTRATION VERSUS DELIVERED DOSE (ICP-AES) OF TES

Generated concentration		Delivered dose in <u>cells</u> (µg)			
ppm	mg/m³	N=1	N=2	N=3	Mean +/- SD
0.72	4.9	<1.2	<1.2	<1.2	<1.2
25	169.8	2.6	3.3	3.8	3.2 +/- 0.6
85	577.2	15.4	17.4	20.8	17.9 +/- 2.7
			Deliver	ff :.:	

Delivery efficiency: 14%

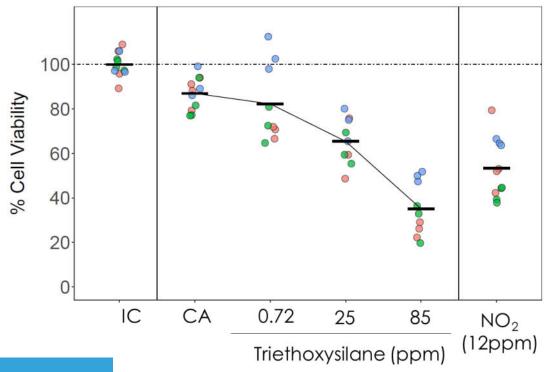


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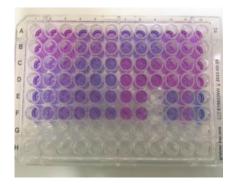




CELL VIABILITY (PRESTOBLUE™, 19-24 H PE)





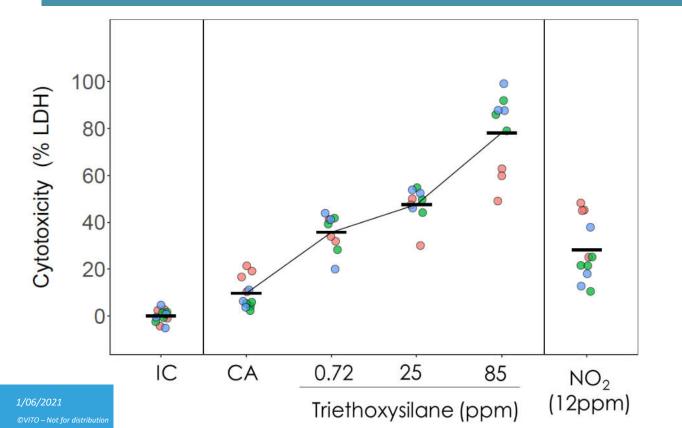


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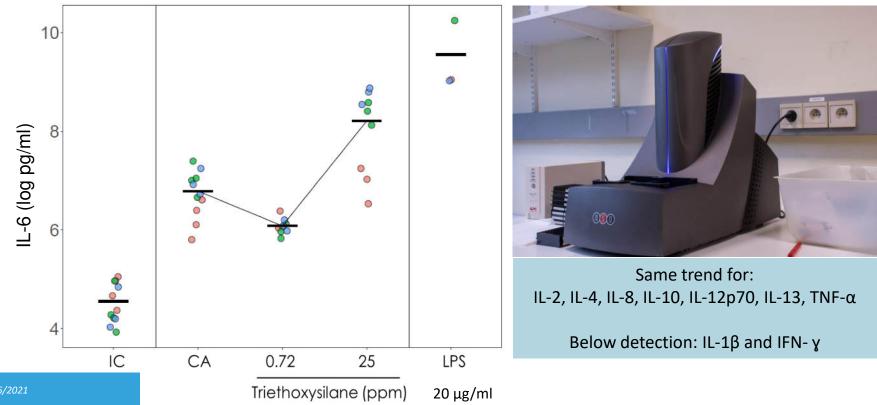


CYTOTOXICITY (LDH RELEASE, 30 MIN PE)





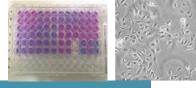
INFLAMMATION (CYTOKINE RELEASE, 19-24 H PE)





		Differences between project phases
Phase 1 (Completed)	Assess the respiratory toxicity of triethoxysilane in BEAS-2B cells	https://www.piscltd.org.uk/inhalation-webinars/
Phase 2 (Ongoing)	Assess the respiratory toxicity of silanes and surfactants in BEAS-2B cells	 Key differences between Phase 1 and Phase 2: Reduce exposure time to 30 minutes Additional test substances Adding 'true' negative control Using nitrogen gas as a carrier control for silanes Testing only 4 cytokines ALI post-exposure Removed bovine pituitary extract from cell media
Phase 3 (Ongoing)	Assess the respiratory toxicity of silanes and surfactants in MucilAir™	 Key differences between Phase 2 and Phase 3: Using a 3D model Assessing additional endpoints Adding 7 day recovery period

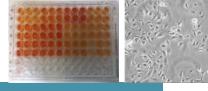




CELL VIABILITY (PRESTOBLUE™, 19-24 H PE)

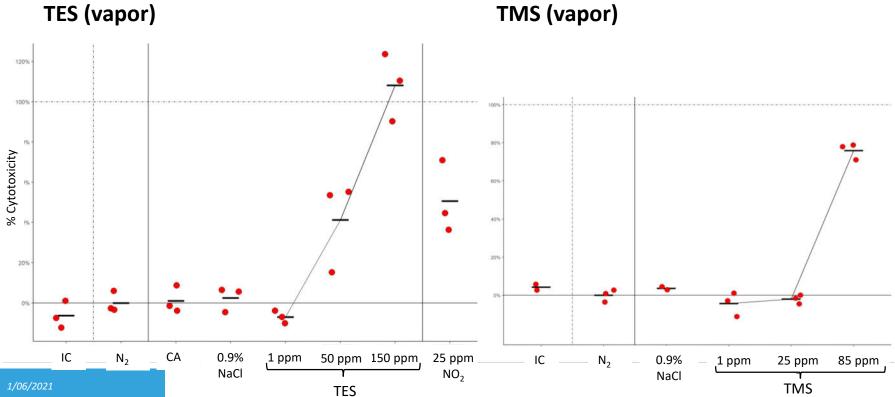
TES (vapor) TMS (vapor) 120% • 100% 80% 80% % Cell viability 60% 40% 40% . 20% 20% 09 IC IC N_2 CA 0.9% 50 ppm 150 ppm N_2 0.9% 25 ppm 85 ppm _1 ppm 25 ppm 1 ppm NaCl NaCl NO_2 TES TMS



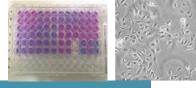


CYTOTOXICITY (LDH, 19-24H PE)

TES (vapor)



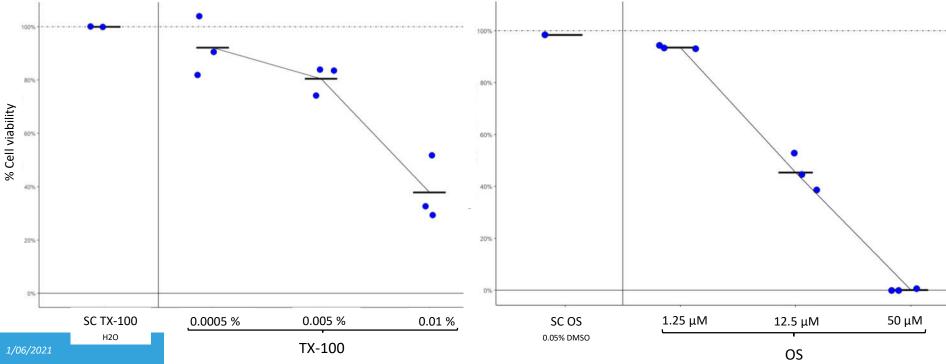




CELL VIABILITY (PRESTOBLUE™, 19-24 H PE)

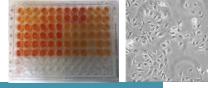
TX-100 (liquid)





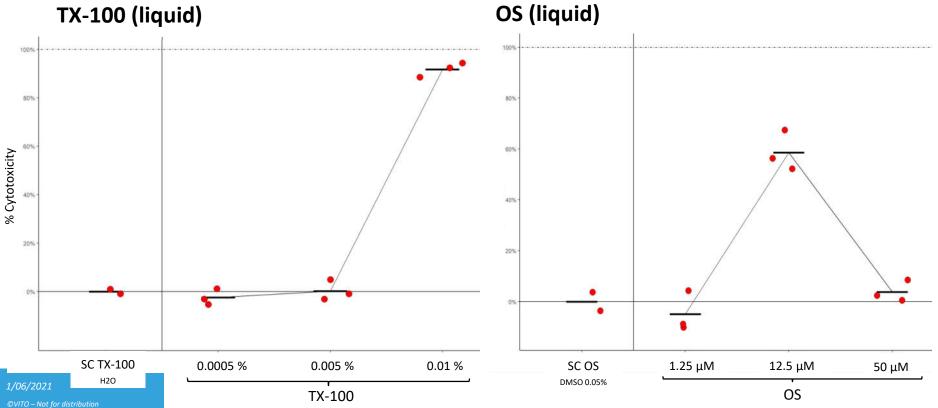
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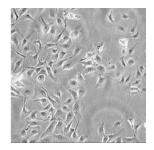


CYTOTOXICITY (LDH, 19-24H PE)

TX-100 (liquid)







LDH read-out 30 min PE (CytoTox-ONE[™], fluorescence-based)

- Lot of handlings at day of exposure -> difficult to perform LDH read-out 30 min PE
- Kept the samples at -20°C or 4°C for LDH read-out the next day -> does not work!
- LDH read-out same day of exposure (extra technician) or switch to absorbance-based kit

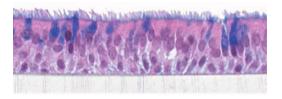
Exclusion 1 run because trumpets were adjusted with wrong insert (Greiner instead of Sigma, ≠ 0.5-1 mm)





Some variability observed:

- Read-out NO₂ positive control
- 800 ppm very high!
- Responder and non-responders?
- Suggestions for good positive controls (aerosol, gas, vapor)?
- Quantity and quality of mucus?





- Fix Troubleshooting
- Obtain at least 3 valid independent runs in BEAS-2B & MucilAir[™] for silanes and surfactants
- Determine if the test systems can detect the decrease in toxicity that correlates with increasing carbon length, which is not evident from available animal inhalation toxicity data
- Compare liquid exposure method and aerosol exposure method for surfactants
- Determine advantages of using a 2D cell line (BEAS-2B) versus a 3D human reconstructed tissue model (MucilAir[™])
- In vitro to in vivo translation (IVIVE)



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Monita Sharma Amy J. Clippinger Andreas Stucki

Evelien Frijns (aerosol expert) <u>evelien.frijns@vito.be</u> Sandra Verstraelen (biomolecular expert) <u>sandra.verstraelen@vito.be</u>

Sven Vercauteren (Business developer) sven.vercauteren@vito.be

Links with:

- Engineering department
- Chemical testing department
- Biomarker discovery team



Researchers: Frederick Maes, Griet Jacobs, Stefan Voorspoels, Lieve Geerts, Sylvie Remy Technicians: An Jacobs, Jeroen Sajdak, Jo Van Laer, David Poelmans, Rob Brabers, Agnieszka Mikolajczuk Business developer: Sven Vercauteren

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