

The Influence of Engineered Nanomaterials on Keratocyte-Fibroblast-Myofibroblast Transformation in the Corneal Stroma

Maggie Chang¹, Soohyun Kim¹, Laura Van Winkle², Kent E. Pinkerton², Sara M. Thomasy^{1,3}

¹Department of Surgical and Radiological Sciences, School of Veterinary Medicine, University of California, Davis, CA 95616

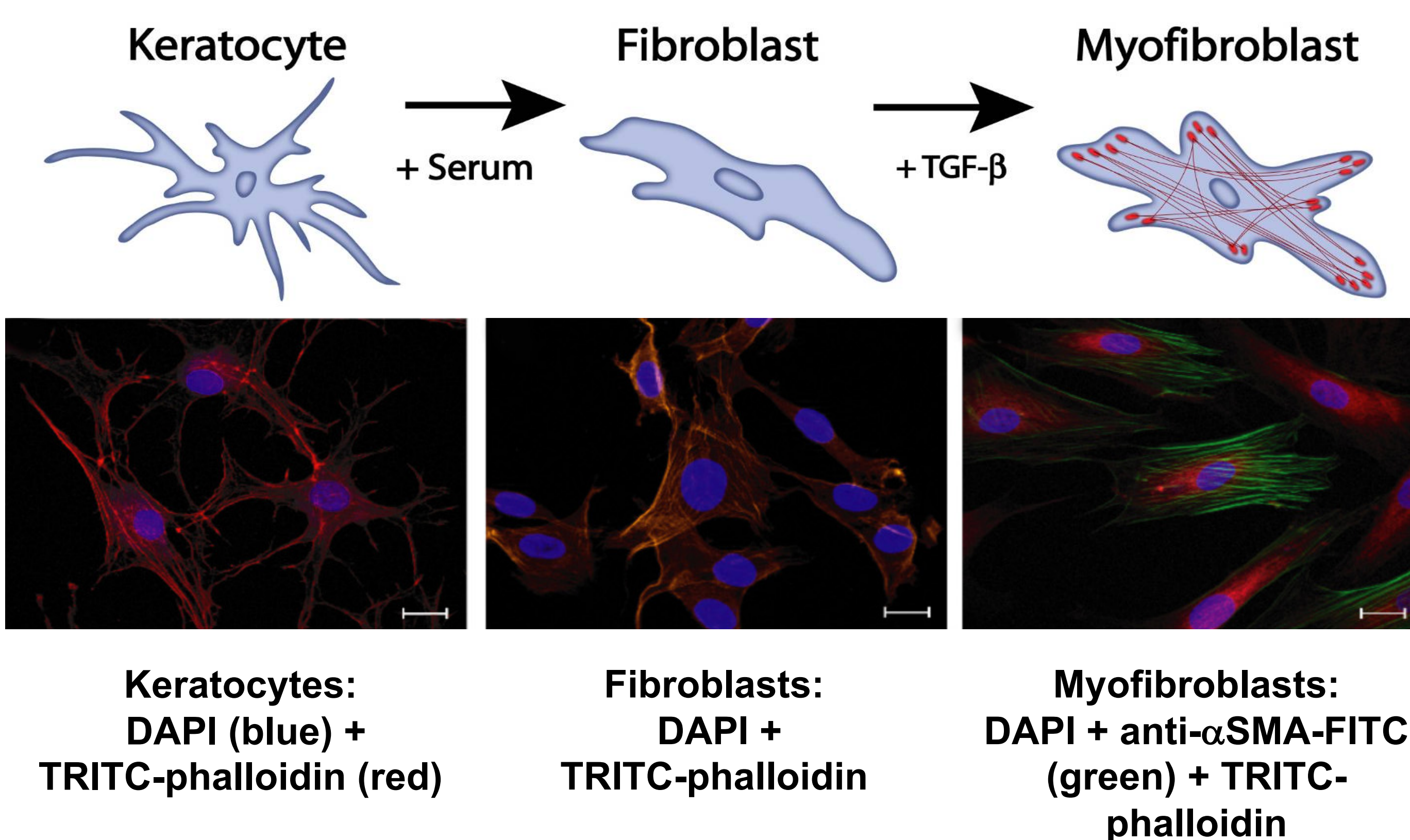
²Center for Health and Environment, University of California, Davis, CA 95616

³Department of Ophthalmology and Vision Science, School of Medicine, University of California, Davis, CA 95616

Introduction

- Demand for engineered nanomaterials (ENMs) embedded in consumer products has dramatically increased in the current years resulting in deposition of ENMs in the air, water, and soil during their manufacturing, use and disposal¹.
- The eye is primarily exposed to substances in air, a major route of exposure to ENMs. In addition, the eye is a current target of ENM based therapeutic delivery²⁻⁴.
- Upon corneal stromal wounding, changes in the microenvironment of the wound promote transformation of the quiescent keratocyte to the activated fibroblast and subsequently the differentiated myofibroblast (KFM transformation, **Figure 1**).
- The most important cytoactive factor to induce this pathway is TGF- β 1
- A better understanding of the effects of ENMs on the genesis and persistence of the myofibroblast within the corneal wound space is critical to understanding their impact on corneal stromal wound healing.
- The purpose of this study is to determine the effects of ENMs on KFM transformation in the presence and absence of TGF- β 1.

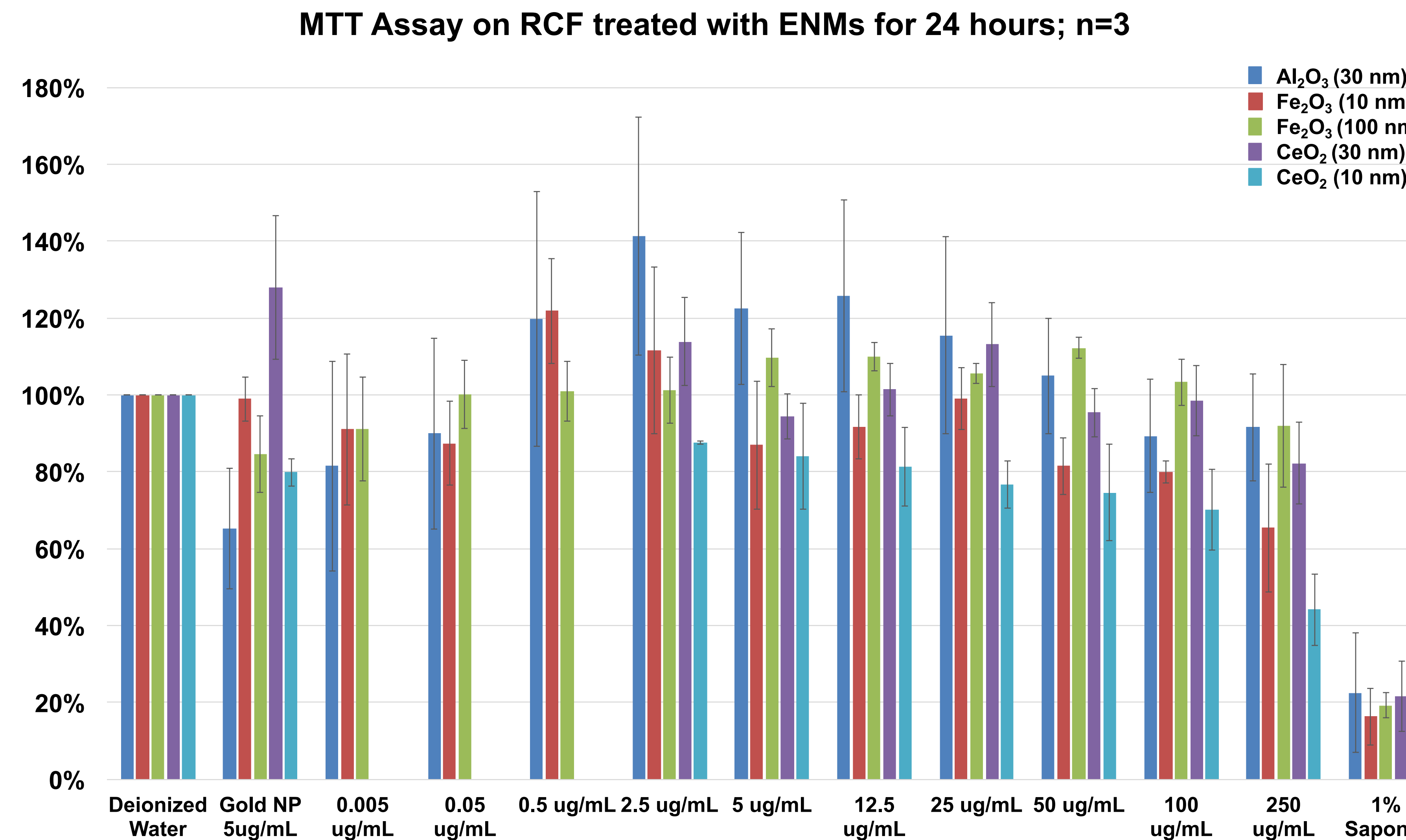
Figure 1: The K-F-M Differentiation Pathway



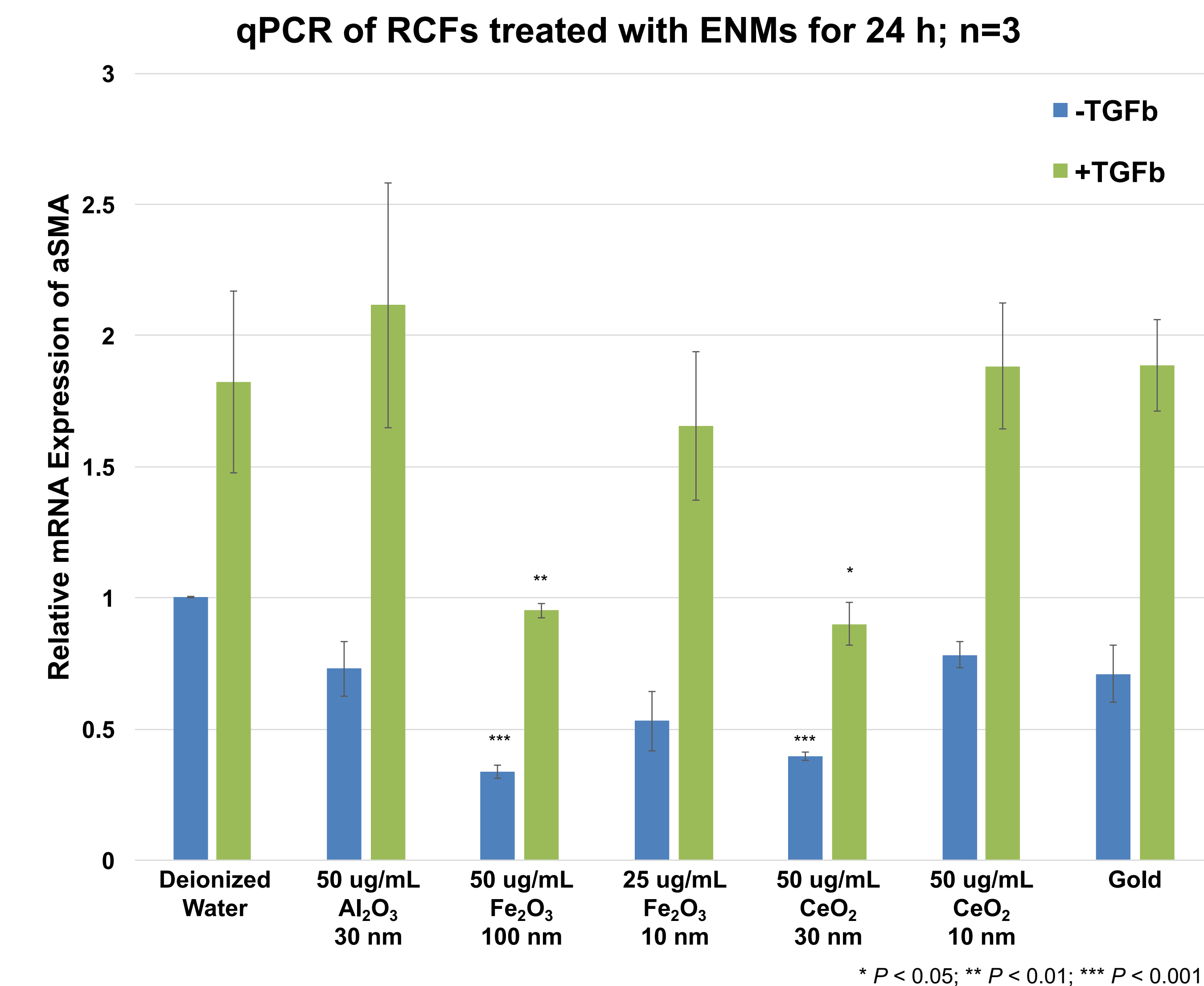
Methods

- Primary rabbit corneal fibroblasts (RCFs) were seeded in 96-well plates and cultured with media for 24 h. Cells were treated for 24 h with varying concentrations of ENMs. Deionized water, gold nanoparticle, and 1% saponin were used as controls.
- MTT assay and Calcein AM assay were conducted to determine cytotoxicity.
- RCFs seeded in 6-well plates and cultured with media for 24 h. Cells were treated for 24 h with ENMs +/- TGF- β 1.
- RNA was harvested and quantitative PCR was performed to determine expression of myofibroblast phenotypic markers α -smooth muscle actin (α -SMA).
- One and two way ANOVA was used to determine statistical differences in mRNA expression.

Results

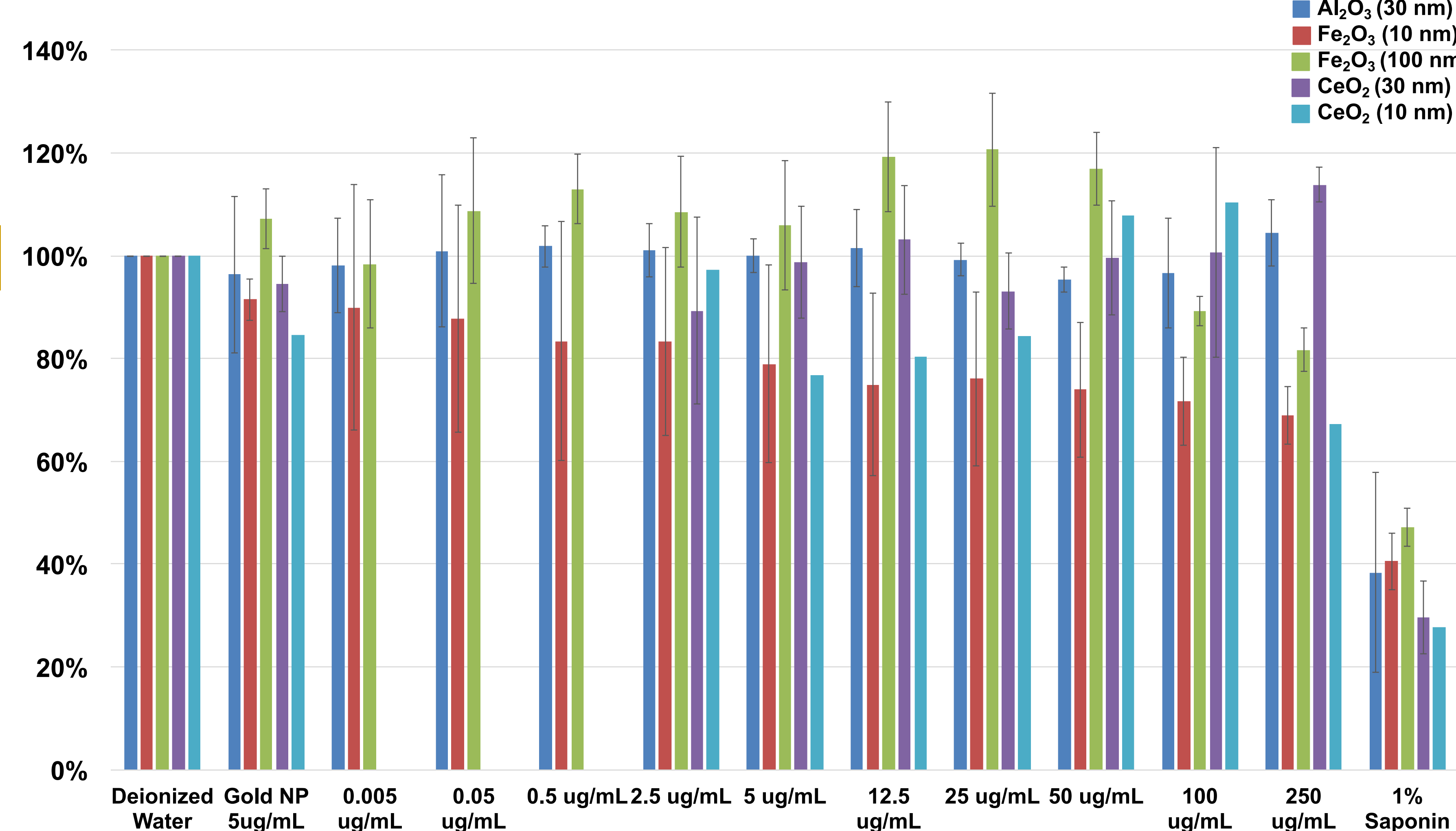


None of the ENMs tested had to have a significant effect on cell viability using the two different assays. However there was a trend towards decreased cell viability with the 10 nm iron oxide and 10 nm cerium oxide ENMs at the 50, 100, and 250 μ g/ml concentrations.



Treatment of RCFs with iron oxide (100 nm) and cerium oxide (30 nm) significantly decreased expression of α SMA in the absence and presence of TGF- β 1.

Calcein AM Assay on RCF treated with ENMs for 24 hours; n=3
(except CeO₂ 10nm n=1)



Conclusions

- The ENMs tested did not markedly alter viability of the RCFs.
- Iron oxide (100 nm) and cerium oxide (30 nm) inhibited KFM transformation.
- Future studies will entail assessing ENMs on corneal wound healing *in vivo*.

Acknowledgements

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Select References

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