

1 Dimethyl sulfoxide for cryopreservation of alginate encapsulated liver cell spheroids in bioartificial
2 liver support; assessments of cryoprotectant toxicity tolerance and dilution strategies.

3 **Authors:**

4 Maooz Awan[1]*, Eloy Erro[1], Elise Forster-Brown[1], Thomas Brookshaw[1], Sweta Chandel[1],
5 Sherri-Ann Chalmers[1], Alfie Watt[1], Barry Fuller[2], Clare Selden[1]

6 [1] Institute for Liver and Digestive Health, Division of Medicine, Royal Free Hospital, UCL, London,
7 NW3 2PF, UK

8 [2] Division of Surgery and Interventional Science, Royal Free Hospital, UCL, London NW3 2QG UK

9 *Corresponding Author: maooz.awan.15@ucl.ac.uk

10 **Abstract**

11 The Bioartificial Liver (BAL) is an extra-corporeal liver support designed to support the function of
12 the Liver in patients with impaired liver function. The BAL biomass consists of alginate encapsulated
13 liver spheroids (AELS). To facilitate rapid delivery of a BAL to patients the AELS are cryopreserved
14 using a DMSO-containing cryoprotectant solution.

15 This study assesses toxicity of DMSO in AELS at concentrations and temperatures relevant to the
16 cryopreservation and recovery process of a cellular biomass. Additionally, develops a process to
17 remove DMSO from AELS before delivery of cell product to patients.

18 Exposure of AELS to DMSO, at a concentration of 12% (v/v) for 10 minutes did not have a negative
19 effect on the viability of the AELS up to 24 hours after exposure, irrespective of the exposure
20 temperature between 37 C and 0 C. Evidence of toxicity was only seen with exposure to 40% (v/v)
21 DMSO, which was more notable at warm temperatures.

22 Post-Thaw removal of DMSO was measured by determining the DMSO concentration of the post-
23 thaw washes using refractometry. Washing AELS 3 times in tapering concentrations of Glucose

24 supplemented DMEM at an AELS:wash ratio of 1:2 was sufficient to reduce DMSO to undetectable
25 levels (<1%).

26 The study demonstrated that the thawing method minimised DMSO toxicity to the BAL biomass, and
27 the post-thaw washing protocol successfully removed all the DMSO present in the cryopreserved
28 BAL. Thereby enabling effective cryopreservation of the BAL for future clinical translation.

29 **Keywords**

30 DMSO, DMSO Toxicity, Cryoprotectant Toxicity, BioArtificial Liver, Tissue engineering, Liver Failure

31 **Introduction**

32

33 Liver disease kills over 10000 people a year in UK. Liver failure is a rapid onset disease and can lead
34 to death within a few days. There is a need for a therapy to support and supplement the function of
35 the liver to allow time for a transplant to become available, or the patient's liver to regenerate itself.
36 We have developed a BioArtificial Liver (BAL) based on liver cell spheroids encapsulated in alginate.
37 However, responsive manufacture of the BAL is not logistically feasible and cryopreservation is
38 necessary for 'off the shelf' availability.

39 Dimethyl Sulfoxide (DMSO) was identified as a cryoprotective agent (CPA) in 1959 when it was used
40 to ameliorate freezing induced injury in bull sperm by Lovelock and Bishop [13]. Since then it has
41 become widely used as a CPA in the preservation of cells and tissues. However, despite its
42 cryoprotective properties DMSO is considered to be cytotoxic at physiological temperatures. It has
43 been shown to have adverse effects on the plasma membrane [21,23] and damaging effects on the
44 cytoskeleton [11,22], even causing apoptosis [7]. Therefore, successful cryopreservation strategies
45 minimise the exposure of cells to DMSO at higher temperatures. DMSO loading and removal is
46 generally carried out at <5°C. Moreover, there is now a regulatory push to remove DMSO from
47 cryopreservation protocols, wherever practical.

48 Cellular therapies cryopreserved with DMSO could produce side effects and complications in
49 patients if care is not taken to remove all the cryoprotectant prior to delivering the therapy. Delivery
50 of cell products to patients without removal of DMSO has been linked to a wide range of adverse
51 effects such as neurotoxicity [8,16], cardiac arrhythmia [9] and hepatic dysfunction [20,24,26]

52 The biological component of the BAL consists of a 2.5L biomass of alginate encapsulated liver
53 spheroids (AELS) (~70 billion cells). To prevent toxicity the biomass is cooled before addition of a
54 DMSO-containing cryoprotectant solution (CPS) and the BAL is cryopreserved. However, the
55 cryopreserved BAL is thawed rapidly at 37°C. Due to its size and geometry parts of the BAL biomass
56 maybe exposed to DMSO at temperatures where the CPA may be potentially toxic, before the entire
57 biomass has thawed. We modelled these transient exposures to DMSO over a range of temperatures
58 on AELS to assess any potential toxicity. In routine cryopreservation of small volumes (1 – 2mls),
59 rewarming times, post-thaw handling and dilution can all be completed in about 30 minutes. For
60 large volumes (>2 L), such as the BAL , these times can be up to 60 -90 minutes.

61 Of equal importance, delivery of significant concentrations of DMSO to the patient is also
62 undesirable, so a dilution strategy to remove DMSO effectively from the cell therapy product is
63 required. We have developed a washing protocol that removes DMSO from the biomass without
64 causing undue osmotic stress to the AELS as integrated units, which can be assessed
65 morphologically. To achieve these aims a method was developed to measure removal of DMSO
66 using refractometry.

67 Therefore, the aims of the current study were three-fold; (1) to investigate the potential for CPA
68 toxicity to AELS by viability measurements given the exposure times which correlate to handling
69 steps in our warming and dilution protocols; (2) to measure the stability of the alginate bead
70 component of AELS during DMSO exposure and dilution; and (3) to quantify the effectivity of the
71 sequential dilution steps in reducing the concentrations of DMSO for protocol optimisation.

72 **Materials & Methods**

73 **Cell Culture**

74 HepG2 cells (ECACC Wiltshire) were cultured in modified α -MEM (GE Healthcare) supplemented with
75 10% Fetal Bovine Serum (FBS) (Gibco), 1% Penicillin/Streptomycin (Gibco) and 0.5% Amphotericin
76 (Gibco), to grow sufficient cells in monolayer to seed subsequent 3D culture. Media was changed
77 every 2-3 days.

78 After encapsulation the AELS were cultured in media containing Fresh Frozen Plasma (FFP) in place
79 of FBS.

80 **Cell Encapsulation**

81 HepG2 cells were encapsulated as previously described [5]. Briefly, HepG2 cells were trypsinised and
82 resuspended in culture medium at 4×10^6 cells/mL, mixed 1:1 with 2% alginate to achieve a 1%
83 alginate and cell solution at 2×10^6 cells/ml. 1.5% glass beads added as a density modifier. Using the
84 JetCutter system (GeniaLab), solution was passed through a nozzle and the stream cut using a wire-
85 cutting disk, droplets fell into a crosslinking 0.204M CaCl_2 solution for 5 minutes. Encapsulated cells
86 were washed three times with culture media to remove excess calcium and then cultured as
87 required.

88 **DMSO toxicity assessment**

89 AELS exposure to DMSO was modelled to mimic the potential exposure during the thawing process.
90 AELS were cultured in 6 well plates for 12 days. AELS were exposed to a final concentration of 12%
91 DMSO and 38% viaspan (Belzer UW, Bridge to Life), which is our chosen excipient for CPA delivery,
92 for 10 minutes at 0°C, 20°C or 37°C, with 40% DMSO as a positive control for damage. The time
93 period (10 minutes) was chosen as an indicative time noted from our previous studies to handle
94 AELS at the end of thawing and move them to the dilution process [10]. After treatment, AELS were
95 exposed to 3 subsequent media washes at temperatures of 4°C : 1M glucose α -MEM, 0.5M glucose

96 α -MEM, and unsupplemented α -MEM using protocols previously developed to use the addition of
97 glucose to try and avoid osmotic shock during DMSO removal [3]. Treated and washed AELS were
98 returned to culture medium and cultured for a further 24 hours. Viable cell number was assessed
99 throughout the experiment.

100 **Viability assessment**

101 Metabolic viability was assessed by vital dye staining using Fluorescein Diacetate (FDA) [Sigma
102 #F7378] and Propidium Iodide (PI) [Sigma #P4864] as previously described [14]. Briefly 250 μ L of AELS
103 were washed twice with PBS^{+Ca+Mg}, stained for 90 seconds with 0.0128 mg/mL fluorescein diacetate
104 (FDA) and 0.0256 mg/mL propidium iodide (PI), washed again with PBS^{+Ca+Mg} and imaged using an
105 inverted Fluorescence microscope (Nikon), Quantification was performed with NIS elements
106 software (Nikon)

107 **Nuclei quantification**

108 250 μ L of AELS were washed twice with Hank's Buffered Saline Solution and cells were liberated from
109 the alginate using 16mM Ethylenediaminetetraacetic acid (EDTA), centrifuged at 14000 g, and the
110 pellet was resuspended in PBS^{-Ca-Mg} and disaggregated using a 21G needle followed by automated
111 nuclei quantification using Nucleocounter NC-100 (Chemometec) according to manufacturer's
112 instructions.

113 **Refractive index to measure DMSO removal**

114 Refractive index (RFI) is a dimensionless value calculated from the ratio of the speed of light through
115 a vacuum and a medium of interest. The RFI of a solution is affected by its density; as the mass of
116 DMSO in a solution changes so does the density and therefore the RFI [12]. The efficacy of using RFI
117 to measure DMSO in cells was tested on the cell free scaffolds, alginate beads without cell spheroids.
118 Standard curves of DMSO in each washing solution were constructed. To test CPS removal 2mL of
119 cell-free alginate beads were loaded with CPS in a 1:1 ratio and incubated at room temperature for 5
120 minutes to allow penetration of CPS into beads. The beads were drained through a 100 μ m cell

121 strainer and the supernatant retained. The beads were subsequently washed with reducing
122 concentrations of glucose supplemented DMEM (1M → 0.5M → 50mM → 50mM) in three different
123 bead:wash ratios (1:1, 1:2, 1:3). The supernatant from each wash was collected and RFI was
124 measured, determining the concentration of DMSO with reference to a standard curve.

125 This washing protocol was tested on cryopreserved AELS. Due to the cellular component the same
126 standard curves could not be used to accurately measure DMSO concentration of these washes. The
127 standard curves had to be constructed using washes that had previously been filtered through AELS,
128 thus preventing any cell debris from impacting the RFI.

129 **Morphological assessment of the AELS microbead units during CPA exposure and** 130 **dilution**

131
132 Alginate bead shape and dimensions were analysed through microscopy and image analysis. 0.3 mL
133 of AELS were sampled, transferred to a microscope slide, cover slipped and imaged at 4x
134 magnification. At least 10 photos were taken per condition. AELS were not washed prior to imaging
135 as washing could affect the size and shape of the beads due to osmotic changes. The EqDiameter
136 and Circularity of beads was measured using NIS-Elements Imaging software.

137

138 **Statistical Analyses**

139 Statistical analysis was conducted in R (R Core Team, 2019). Significance was tested using students t-
140 test and threshold was significance was set at $p < 0.05$.

141 **Results**

142 There was no immediate effect on functional viability of AELS after exposure to 12% DMSO at either
143 4°C, 24°C or 37°C. Additionally 12% DMSO also had no effect on viable cell number. After 24 hours in
144 culture there was no difference in viability or viable cell number in AELS exposed to 12% DMSO and
145 washed free from the CPA, regardless of temperature. On the other hand, exposure to 40% DMSO at

146 RT resulted in immediate loss of AELS functional viability, accompanied by a loss in viable cell
147 number **Error! Reference source not found.** However, these were for short exposure times (10
148 minutes) which can result from warming post-thaw handling and dilution; for large volume
149 cryopreservation the exposure times can be up to 5 times longer.

150 Residual DMSO concentrations were measured using refractometry of the collected wash volumes.
151 Already by 1 wash, the CPA concentrations had been reduced by more than 50% using either 1:1. 1:2
152 or 1:3 dilution volumes. There was a trend for greater dilution efficiency using 1:3 but the DMSO
153 concentration was still at some 30% of the starting value. DMSO was undetectable by refractometry
154 in the AELS samples after 3 washes at a 1:2 ratio and 2 washes at a 1:3 ratio. At a 1:1 ratio, trace
155 amounts of DMSO were still detectable (at a percentage of 1% (w/v)) even after 4 washes Error!
156 Reference source not found..

157 Size analyses of the alginate beads through the steps of the protocol are shown in Figure 3. During
158 cooling of AELS in readiness for exposure to DMSO, there was a trend (non-significant) to a reduction
159 in bead diameter. This could reflect a re-arrangement in alginate polymer structure and/or alginate
160 interactions with the cell organoids, their extracellular matrix and free water in the aqueous system.
161 After addition of chilled DMSO solution, bead sizes assumed a statistically significant reduction to
162 about 85% of starting sizes. The alginate polymer in AELS is present as an interwoven network of
163 fibres [18] with large aqueous inclusions and bead size reduction is likely to result from DMSO –
164 water relationships impacting on the alginate polymer as the CPA permeates the internal aqueous
165 spaces. Following cryopreservation and rewarming of the same cohort of AELS, in the thawed
166 suspension, at chilled temperatures, before DMSO dilution, bead size remained reduced. During the
167 3 CPA washing steps using room temperature equilibrated diluents there was an incremental return
168 of bead size towards control, starting size. Finally, on returning the AELS to culture medium at 37 C
169 for 1 hr, bead sizes were not different from those of the control, starting cohort of beads.

170

171 Discussion

172 Exposure of AELS to DMSO, at a final concentration of 12% (v/v) for 10 minutes, in our standard CPA
173 mixture for AELS. This also did not have a negative effect on the metabolic viability of the AELS 24
174 hours after dilution, irrespective of the exposure temperature between 37 C and 0 C. This confirms
175 the empirical studies made in the development of our early cryopreservation regimes [14], that
176 chilled solutions can be used safely. We know from previous work that these lower concentrations of
177 DMSO were without effect on viability compared to batch-equivalent fresh controls when exposure
178 times up to 40 min were investigated [18]. The results also concur with comments in a recent review
179 on DMSO as a cryoprotectant which indicate that DMSO has negligible impact on cell viability as long
180 as exposure times are kept as short as required to achieve efficacy for the permeating CPA [1]. Our
181 current results give an indication that that transient exposure of the BAL biomass to DMSO, at
182 temperatures even up to 37°C, during the thawing process does not negatively impact on the
183 viability of the AELS. However, our data show that if DMSO exposure occurs at higher concentrations
184 [40%] there was a clear toxicity signal even after only 10 minutes at 37 C. Nevertheless, from
185 previous work, AELS can maintain good post-exposure viabilities after exposure to high DMSO
186 concentrations as long as low temperatures are used for exposure [19]. We choose the conditions
187 of high (40%) DMSO exposure to AELS at 37 C in our current studies and from previous experience
188 [18] as conditions of high CPA toxicit to mimic what might happen if thawing stages were not
189 carefully controlled for time before disappearance of the last ice crystals and starting the CPA
190 dilution processes. As stated, in these atypical conditions, toxic effects of the DMSO were clearly
191 seen. This adds weight, both, to the need to maintain rapid re-warming to ensure that the ice matrix
192 dissolves quickly to avoid local areas of higher CPA concentrations in the partially-thawed mixture,
193 and to the notion of sample agitation to mix any pockets of high localised CPA concentrations
194 throughout the thawed aqueous solution, back towards the lower starting concentration. These
195 comments are particularly relevant to cryopreservation in large volumes >1 litre where there are
196 real possibilities of inhomogeneity in solution temperature and composition as the residual ice

197 finally disappears. Elmoazzen et al also investigated the concentration, time and temperature
198 dependent toxicity of DMSO in articular cartilage and chondrocytes, finding significant toxicity at
199 concentrations above 1M but limited toxicity at 1M; these authors suggested that DMSO at 1M may
200 not be toxic in articular cartilage [4]

201

202 The thawing process itself can lead to injurious osmotic stress, as seen by Gupta et al in red blood
203 cells [6], due to ice melting and liberation of osmotically active water in the extracellular space. As
204 discussed by Pegg, cells can only tolerate small changes in cell volume without significant damage
205 [17]. Therefore, it is important to minimise changes in cell volume during the CPA addition and
206 removal steps. Osmotic injury could also impact the stability of the microbead units which carry the
207 liver cell spheroids themselves. In our present study measurement of alginate bead diameter
208 showed a gradual swelling of the bead as it was moved through solutions of changing osmolality,
209 suggesting minimised osmotic injury. We know from previous work [15] that the alginate gel which
210 we use in AELS is highly permeable to small molecules and even to polymers (e.g.150 kD dextran) so
211 it will not impede DMSO diffusion . The osmotic responses of the microbeads themselves in our
212 current study reflect the fact each bead is a network of polymerised alginate fibres, which
213 presumably respond to the external osmotic changes by water movement out of the spherical body.
214 One may consider that external osmotic changes may in some way alter the interactions between
215 alginate fibres themselves, but the fact that microbead diameter quickly returned to pre-osmotic
216 stress values argues against such a physico-chemical change in the polymerised alginate. Introducing
217 the beads to a solution with a radically different osmolality can itself cause osmotic shock.
218 Potentially, if the alginate scaffold and the entrapped liver spheroid were to swell at different rates,
219 the differential expansion could cause detachment of the spheroid from the surrounding matrix,
220 leading to detachment induced cell death [2].

221 Measurement of refractive index was effective in measuring the DMSO concentration on the post-
222 thaw wash supernatant. We have applied this in previous preliminary studies [18]. The technique
223 was also used in studies on organ perfusion with CPA by Wong et al [25]. Alternative methods of
224 determining solute concentration in a solution such as, titration and absorbance measurement are
225 unsuitable for DMSO as it does not appreciably change the pH or absorbance of a solution.
226 Therefore, we were able to determine that the washing protocol removed all DMSO in the
227 cryopreserved AELS, down to the limit of detection of the refractometer which is approximately 1%
228 (w/v) (in the 1:2 & 1:3 bead:wash ratios). During the recovery phase from cryopreservation any
229 residual DMSO will be diluted in 110L of culture medium (the total volume of media in the
230 conditioning vessel) and during treatment the BAL biomass is part of loop with >10L plasma, further
231 diluting the already undetectable concentration of DMSO remaining in the biomass. Therefore,
232 patient contact with DMSO should not be a concern. However, for a full-size BAL (2.5L) this would be
233 7L of washing media per wash, whereas at a 1:2 ratio the volumes are more manageable.

234 **Conclusions**

235 Developing a cryopreservation recovery protocol suitable for GMP manufacture of the biological
236 component of a BioArtificial Liver Machine is a key part of the logistical delivery to patients.
237 Determining the removal of a potentially toxic component, DMSO, has indicated successful removal
238 prior to exposure to patients, an important step in the translation pathway.

239 We have demonstrated that the thawing method minimised DMSO toxicity to the BAL biomass,
240 enabling effective cryopreservation of the BAL for future clinical translation. The post-thaw washing
241 protocol successfully removed all the DMSO present in the cryopreserved BAL, thereby minimising
242 toxicity to the patient. The washing protocol has also been optimised to prevent osmotic injury to
243 the biomass as it is gradually reintroduced to a physiological environment.

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246

247 **Conflicts of Interest**

248 Nothing to declare

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