

APPLIED LABORATORY IMMUNOLOGY IN THE ERA OF THE SARS CoV2 PANDEMIC

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SARS COV2 Pandemic

- Wuhan China Developed a Surge of a Unique SARS virus classified as SARS COV2.
- The virus was unique from SARS COV which generated a pandemic in Canada and parts of Europe.
- SARS_COV2 has a 5-14 incubation time before symptoms develop resulting in the lack of isolating the virus in China and the current global pandemic.
- •Scientific communities around the world focused almost completely on issues related to treatment, containment and managing the socioeconomic consequences of the disease causing virus.
- •Directives focused on minimizing viral multiplication, treating patients and understanding the host immune response related to the symptoms ranging from mild to severe.

Greater Cleveland Collaborative

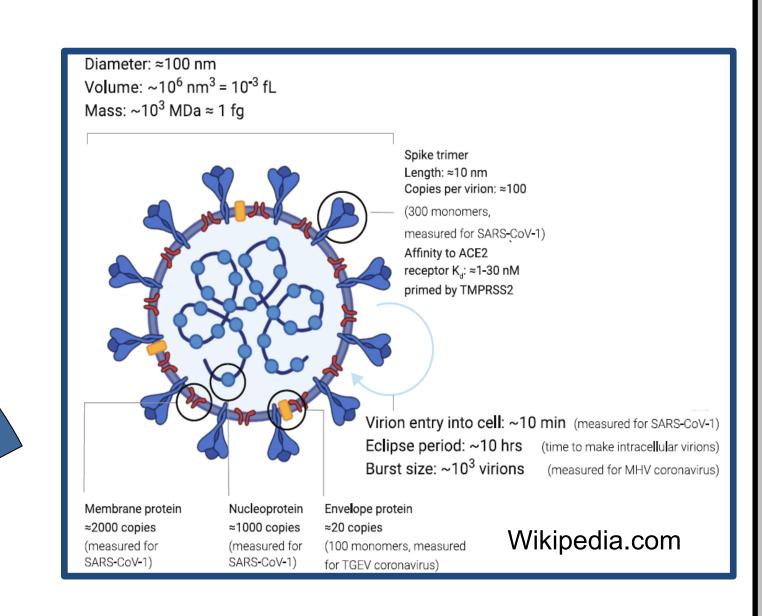
- Case Western Reserve University
- Cleveland Clinic
- MetroHealth Medical Center
- University Hospitals
- Global Collegial/Clinical Interactives

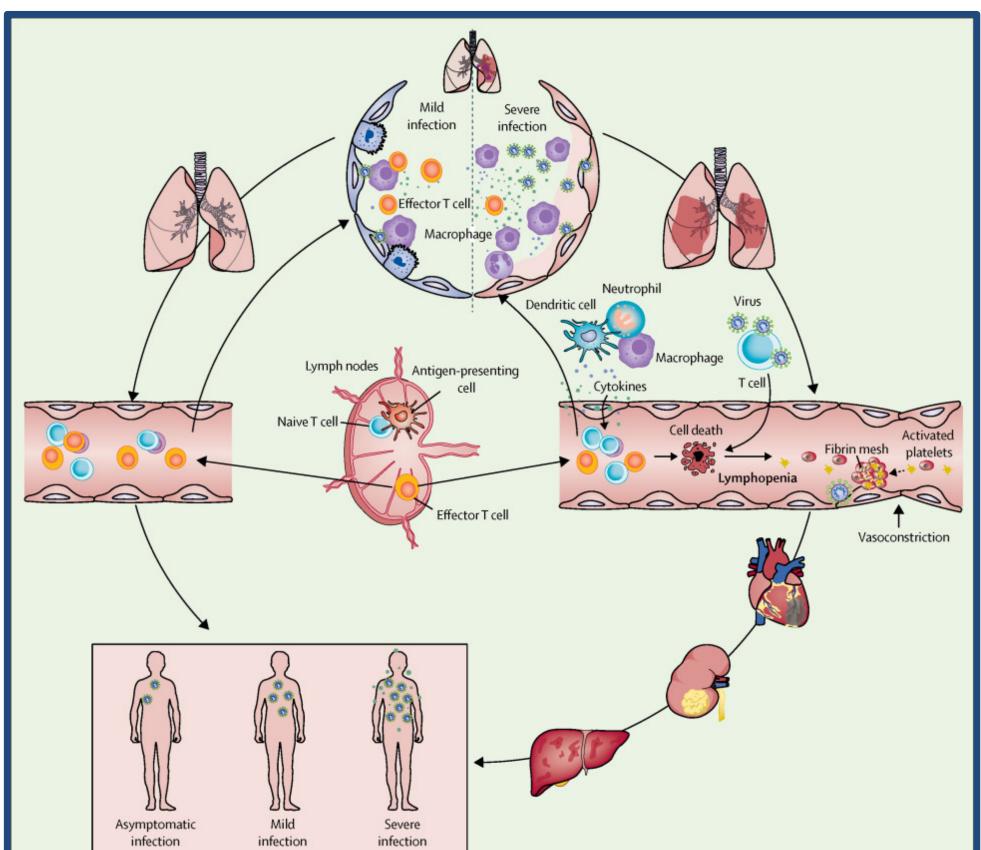
Case Western Reserve University

- Virology and Drug Discovery
- Immunology and Immunotherapeutic
 - T-cell
 - B-cell Innate Immunity
 - Systems Biology
 - Cell Based Therapies
- Clinical Samples and Clinical Trials
- Behavioral Health and

Safety

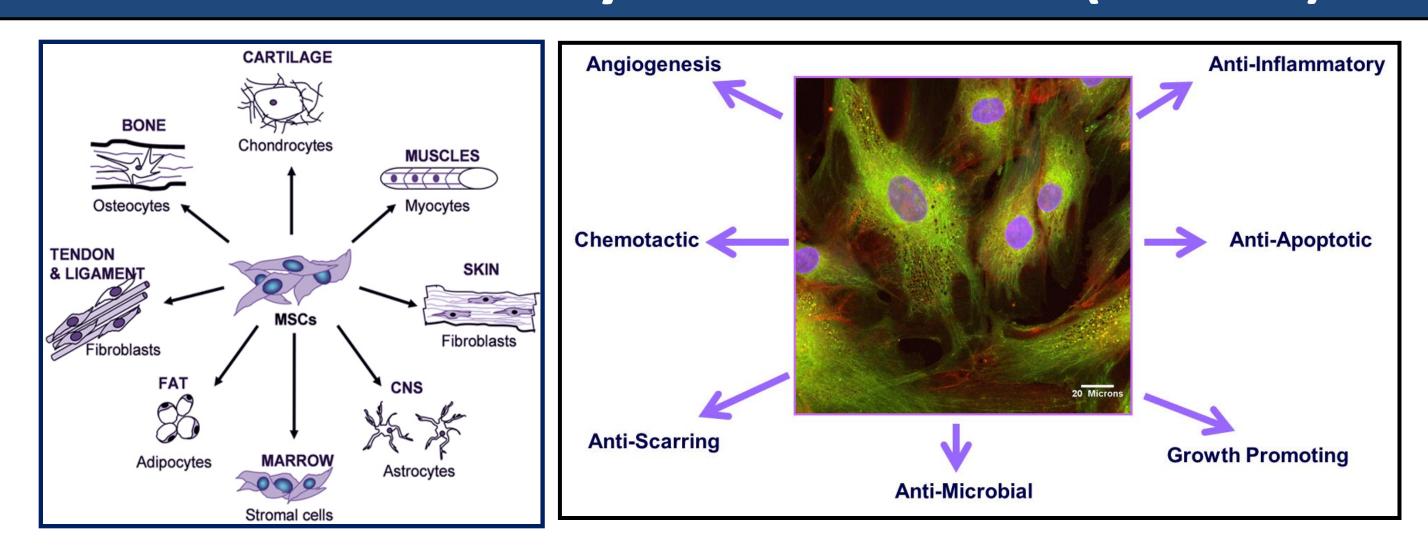






Sars-CoV-2and viral sepsis: observations and hypotheses. . Hui Li. Lancet . 2020. 395:1517-1520

Human Mesenchymal Stem Cells (hMSCs)



Mesenchymal Stem Cells (MSCs)

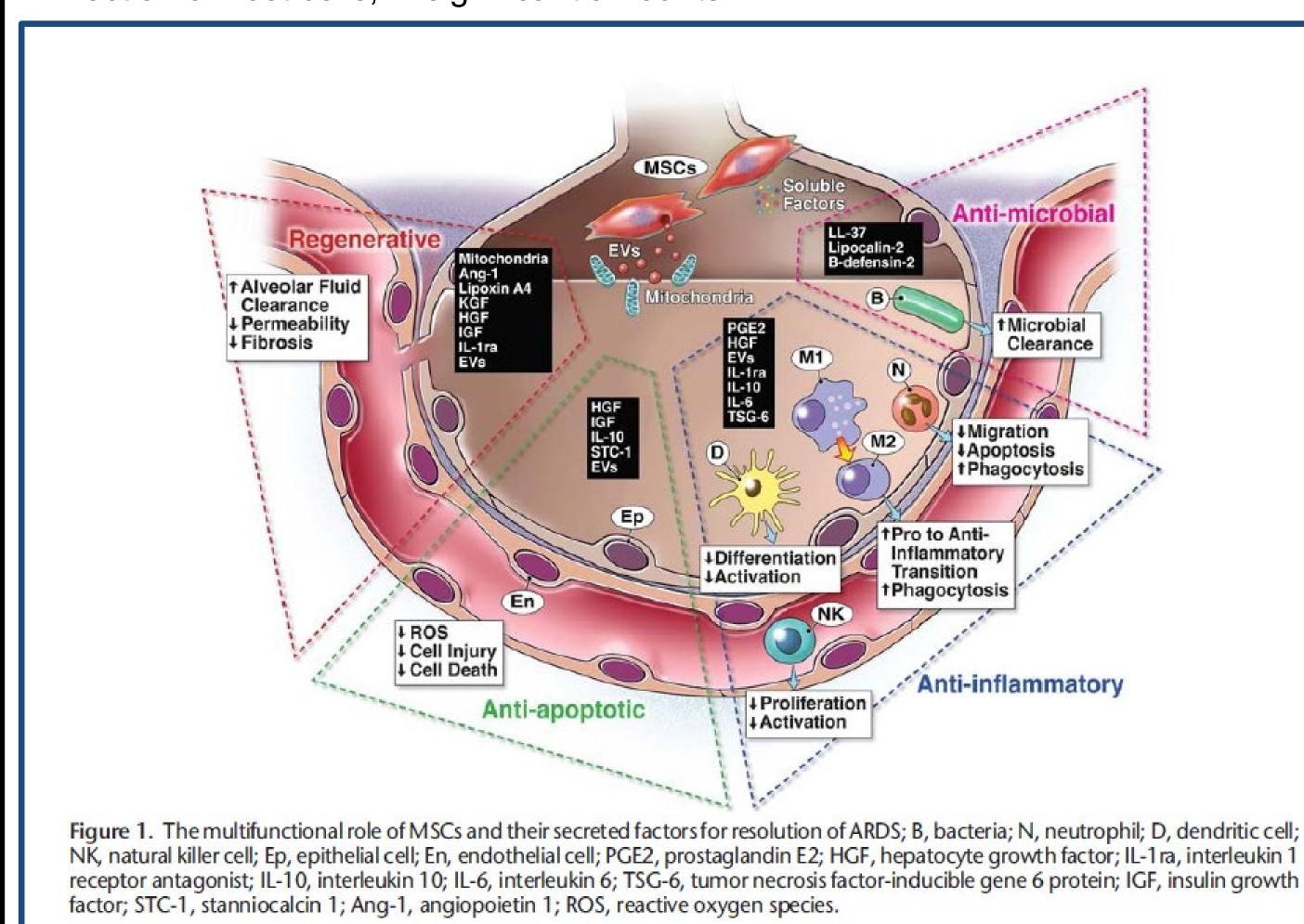
- Are multipotent cells that secrete a variety of bioactive factors that contribute favorably to their environment within damaged tissues
- Have anti-inflammatory, antimicrobial, immunomodulatory, and regenerative properties
- Express low levels of MHC-I molecules and no MHC-2 molecules making them relatively immune-evasive
- Have been evaluated in clinical trials of diseases involving multiple organ systems including bone, cartilage, lungs, pancreas, intestines, neurons, heart, and blood vessels

In clinical trials of CF, Influenza and Acute respiratory Distress Syndrome hMSCs.

- Attenuated pulmonary inflammation
- Decreased bacterial growth
- Enhanced antibiotic efficiency

Rationale

Mesenchymal stem cells have immunomodulatory properties and have previously been studied in a number of respiratory illnesses including ARDS (Lancet Respiratory Medicine 2015 Phase 1 Trial). Infusion of MSCs has been shown to be safe. A small trial of hMSCs in COVID-19 patients showed improvement in inflammatory markers (Aging and Disease) as well as showing by scRNA-seq that hMSCs do not express ACE2 or TMPRSS2, both of which are needed for viral infection of host cells, in significant amounts.

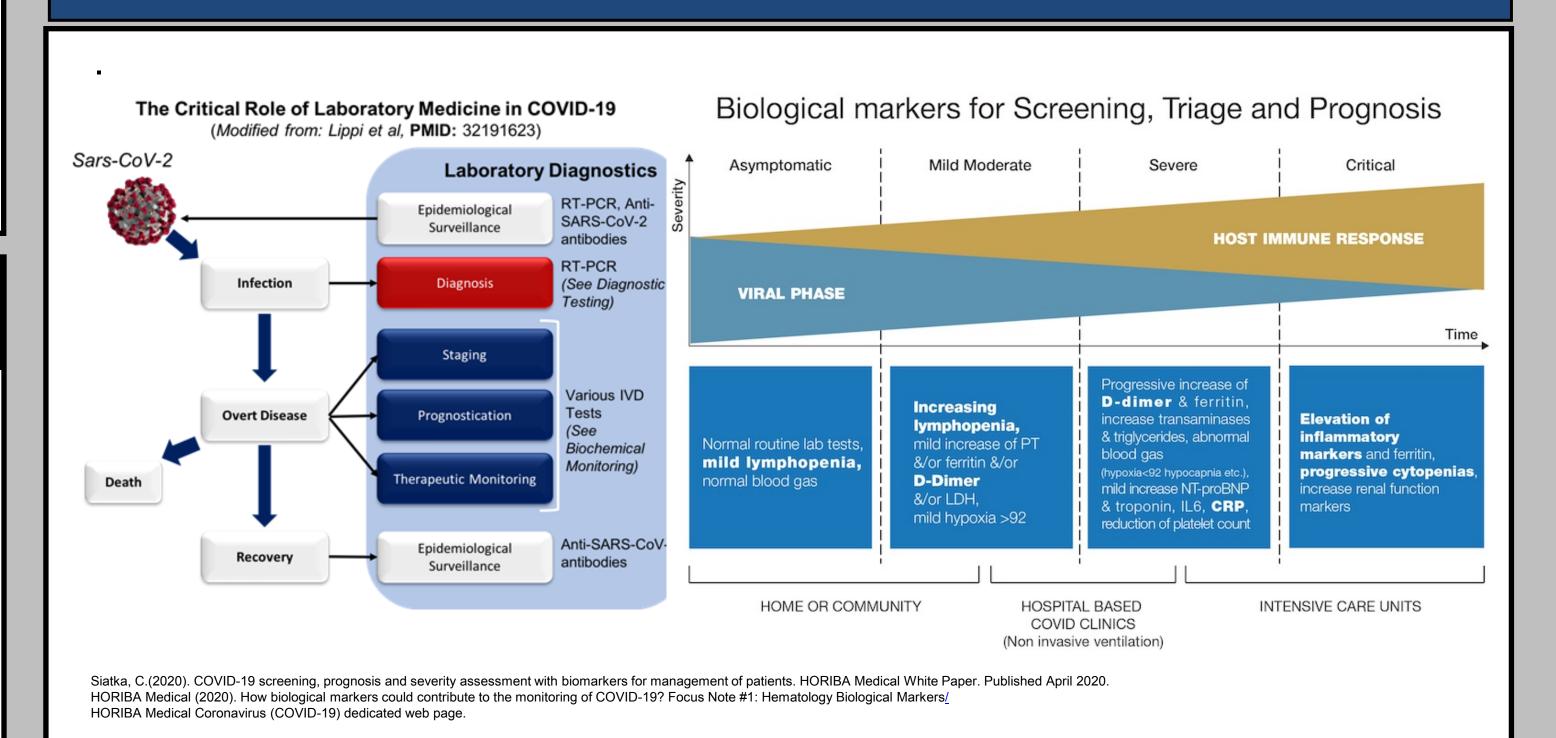


Antebi et.al. The promise of mesenchymal stem cell therapy for acute respiratory distress syndrome. J Trauma Acute Care Surg Volume 84, Number 1. 2017

NIH Clinical Trials of hMSCs in COVID_19 ARDS



Biomarker for Diagnosis and Treatment



Outline of ARDS Trials and Applications

Clinical Diagnostics

- Need for non-invasive ventilator support
- Requirement for intubation and mechanical ventilation.
- Body Temperature, Duration of fever, Changes in systemic
- •Biomarkers: C-reactive protein (>5mg/dL), D-dimer and ferritin (>1000mg/dL).
- •Innovations in Biomarkers: Study Specific
- •Secondary outcomes:
- Mortality
- Duration of ICU stay
- Duration of hospital stay
- Development of fluid refractory shock
- Change in left ventricular ejection fraction
- •SpO2 (<94% on 4L vs 94% on RA)
- •Required FiO2
- •Change in P/F ratio at 24, 48, 72 hours and 7 and 14 days post hMSC infusion
- Need for supplemental oxygen at 14 days after hMSC infusion

Acknowledgments and References

Inamdar AC, Inamdar AA. *Exp Lung Res.* Oct 2013;39(8):315-327. Bonfield TL, Lennon DP, Ghosh SK, Dimarino AM, Weinberg A, Caplan AI.. Stem Cell Discovery. 2013;3:138-159.