

# Determining cell composition of clinical transplants

Susan Bonner-Weir



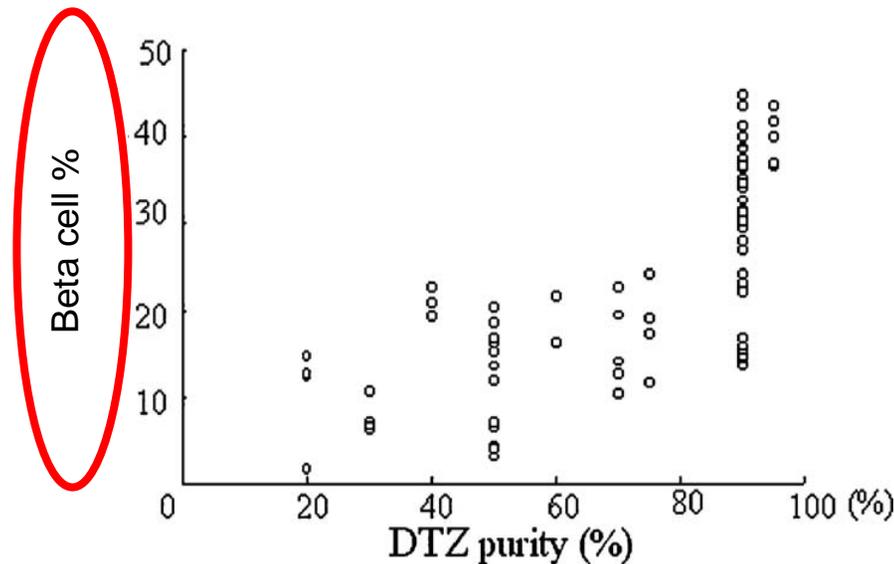
Joslin Diabetes Center

**How many islets/  $\beta$  cells were transplanted?**

**What was their health at time of transplant?**

**There are the assessments made at time of transplant, but in order to evaluate outcomes we need rigorous data, even if “after the fact”.**

# Even in experienced hands DTZ overestimates % $\beta$ cell



*Ichii et al, AmJ Tx 05*

**This is not islet purity but %beta cell of whole preparation**

# Islet Purity Assessment

By EM :  $48.0 \pm 2.8$  % (range: 16.7 - 86.3%).

By dithizone:  $68.2 \pm 3.2$ % (range: 30 - 95%).

**Dithizone considerably over-estimates islet purity !**

# Assessment of Purity and Amount of Islets/ $\beta$ cells

1. Dithizone staining before transplant.
2. Dispersion of tissue and immunochemical analysis by laser scanning cytometer or Cytospin.
3. Morphological (both 1 $\mu$ m and ultrastructural) assessment of cell composition after transplant and possibly before.

# Are Dispersed Cells Accurate for Cell Composition?

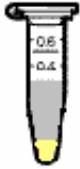
Street et al: n= 69,  $23.4 \pm 1.4\%$  b cells/total prep

Ichii et al: n= 62,  $21.6 \pm 1.4\%$  b cells /total prep

Our preps: n= 31,  $34.8 \pm 2.3\%$  b cells /total prep  
(range 13.1-63.7%)

1. Recovery of cells (30-70%)
2. Selective loss of specific cells?  $\beta$ ? acinar?
3. Identification of all cells?

# Determination of cell composition of human islet preparations by EM

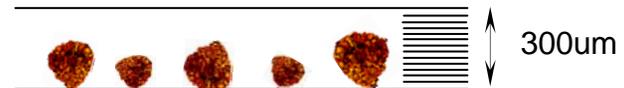


0.5 ml aliquot from  
255ml final islet prep →

Fix in 2.5% glutaraldehyde

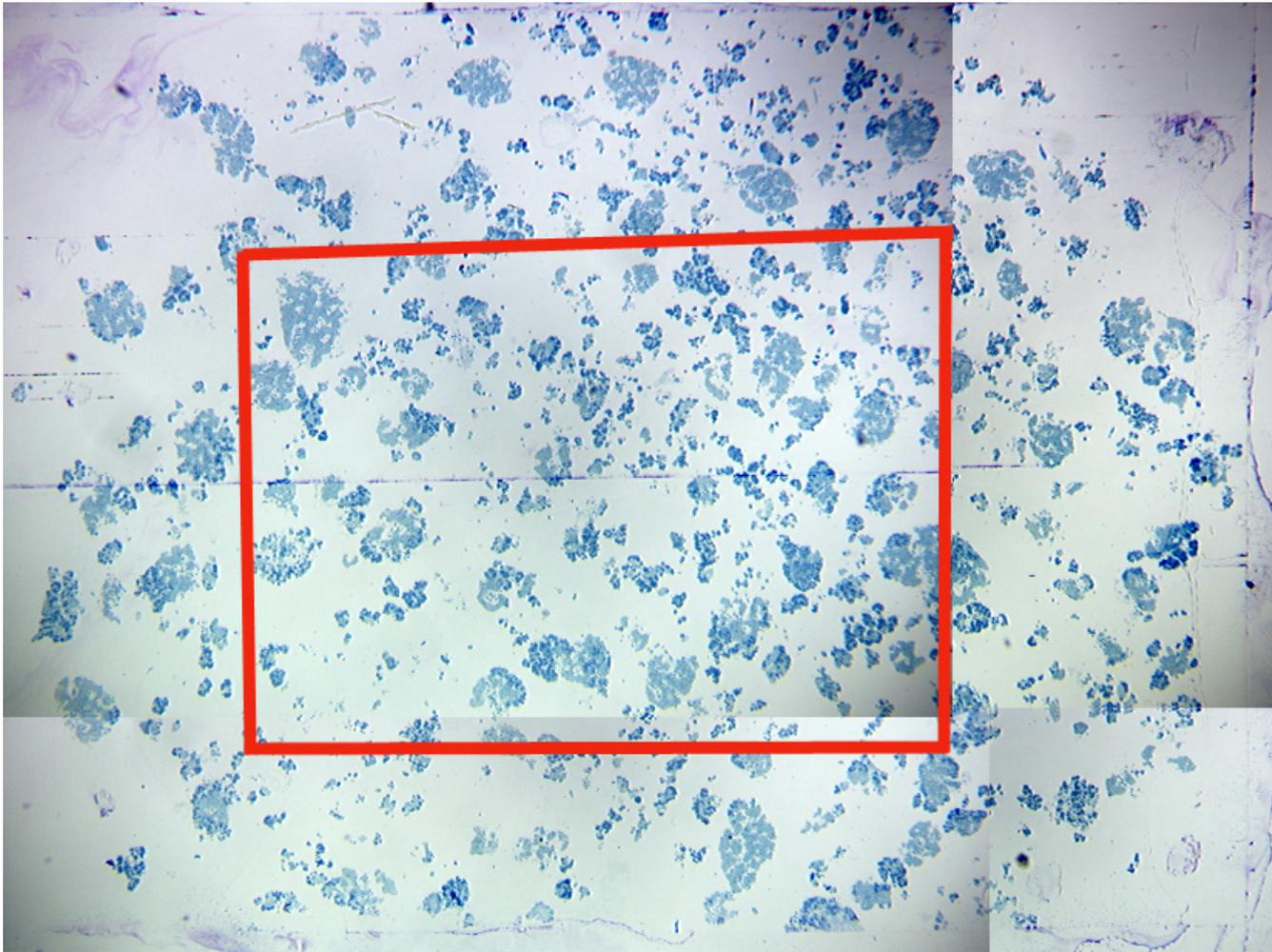
Dehydrate, osmicate, divide into 2 blocks,  
Embed, cure, trim, section

**1  $\mu$ m sections (LM)**  
**60 nm sections (EM)**



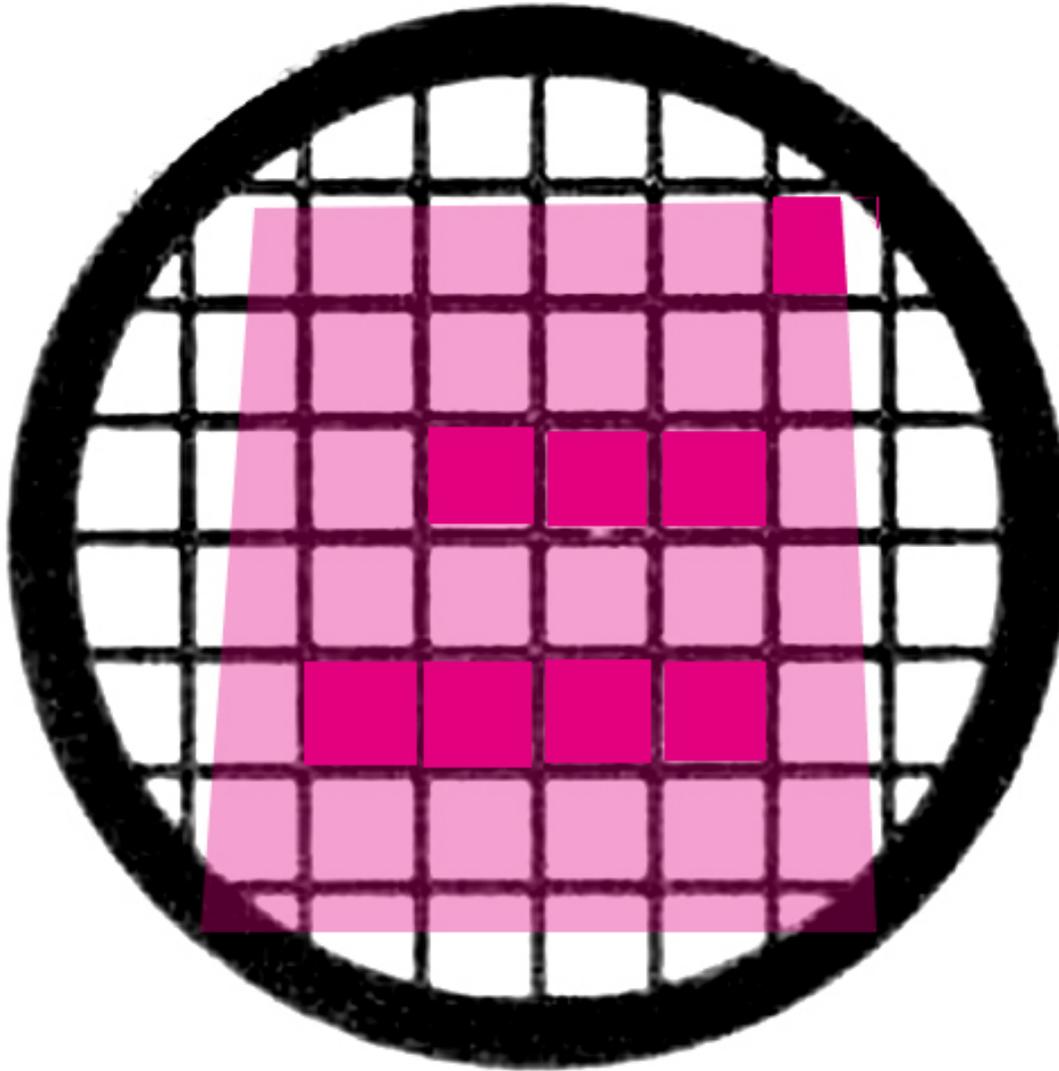
sections parallel to surface

**EM section usually includes 70% of the sample:  
random sampling of each of 2 replicates**



**1 um section**

# Sampling of EM Section in Systematic Manner



16 images of each  
of 2 blocks

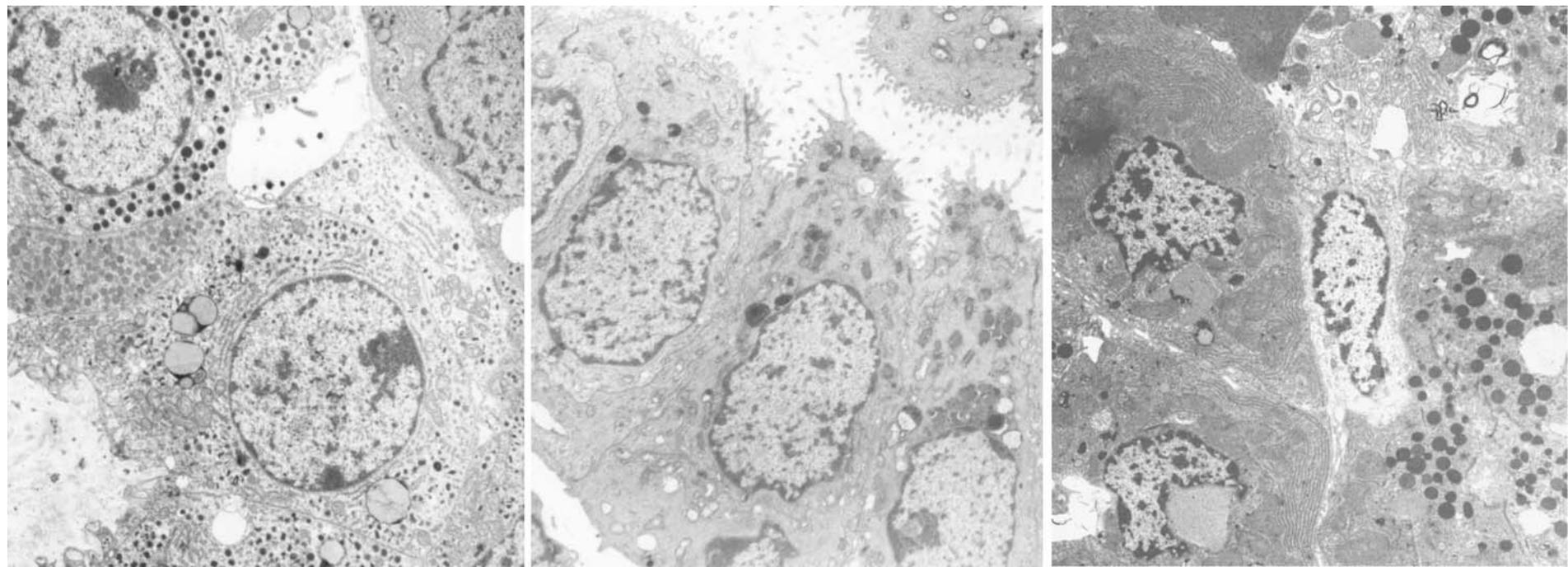
1900 X (negative)  
4000 X final mag

Total: 500-800 cells  
assigned to  $\beta$  or  
non  $\beta$  endocrine,  
acinar, duct, dead or  
endothelial.

**islet**

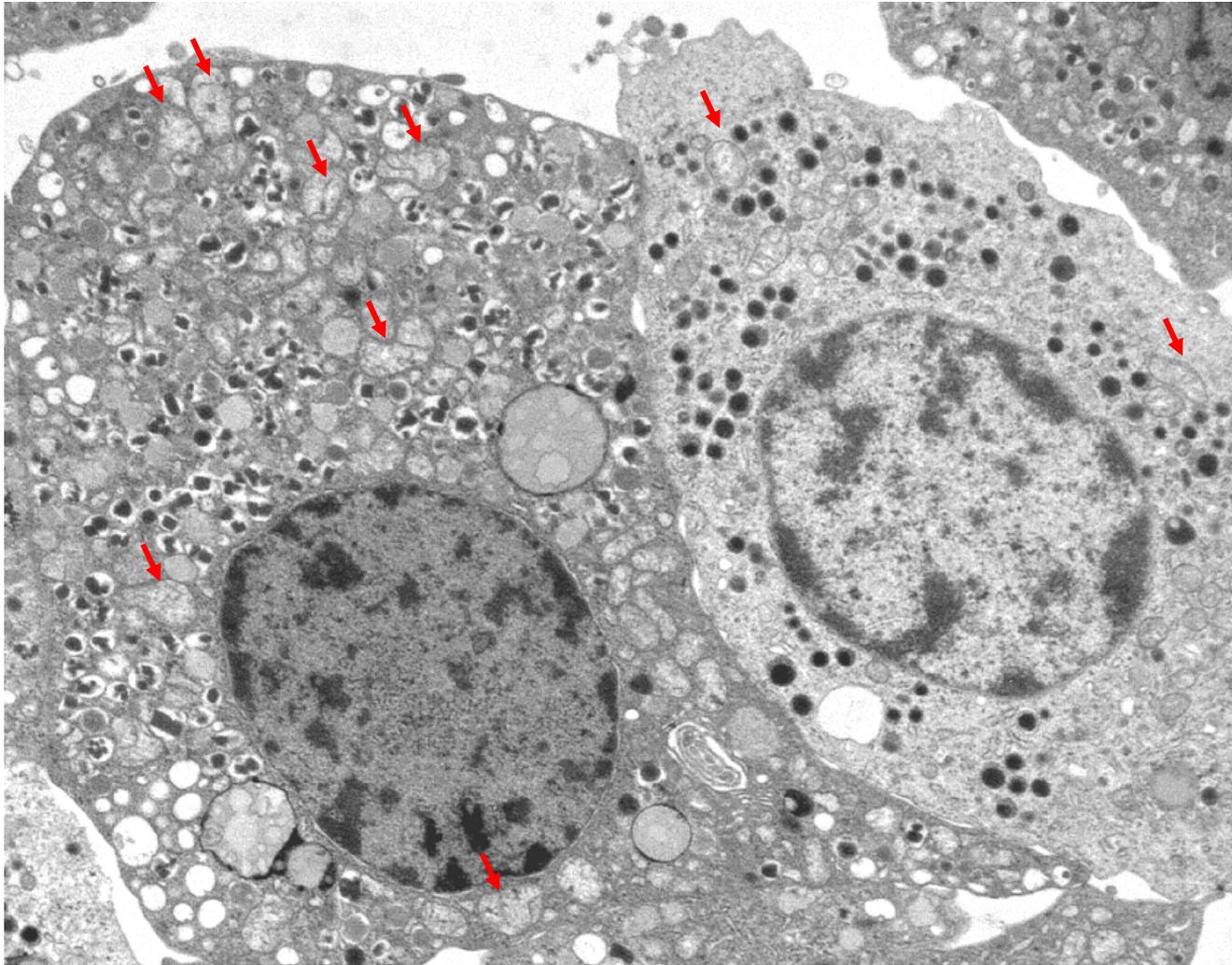
**duct**

**acinar/duct**



**Ultrastructurally one can distinguish  
cell types of islet preps**

**All cells can be assigned to cell type by morphology,  
as well as be assessed for health**



**Human islet cells: insulin and glucagon**

# Islet purity assessment

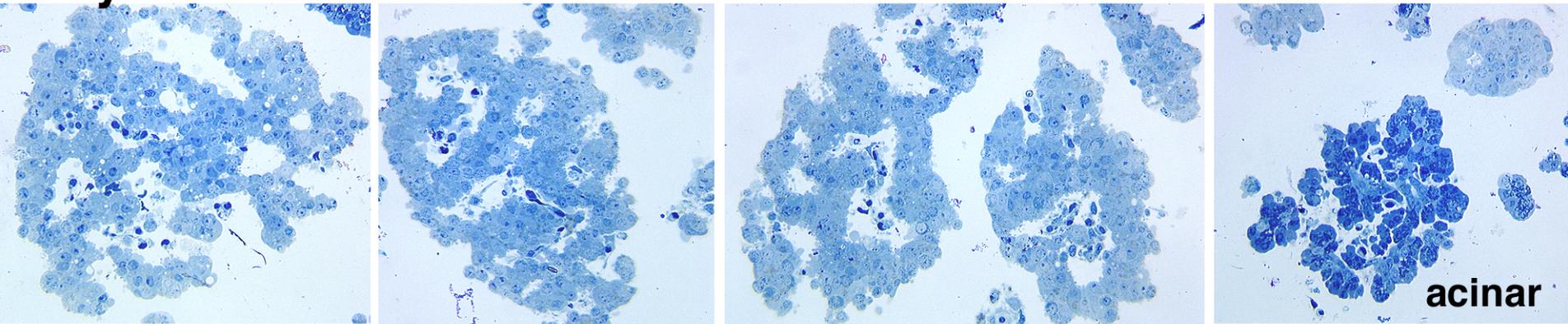
By EM :  $48.0 \pm 2.8$  % (range: 16.7 - 86.3%).

By dithizone-staining:  $68.2 \pm 3.2$ % (range: 30 - 95%).

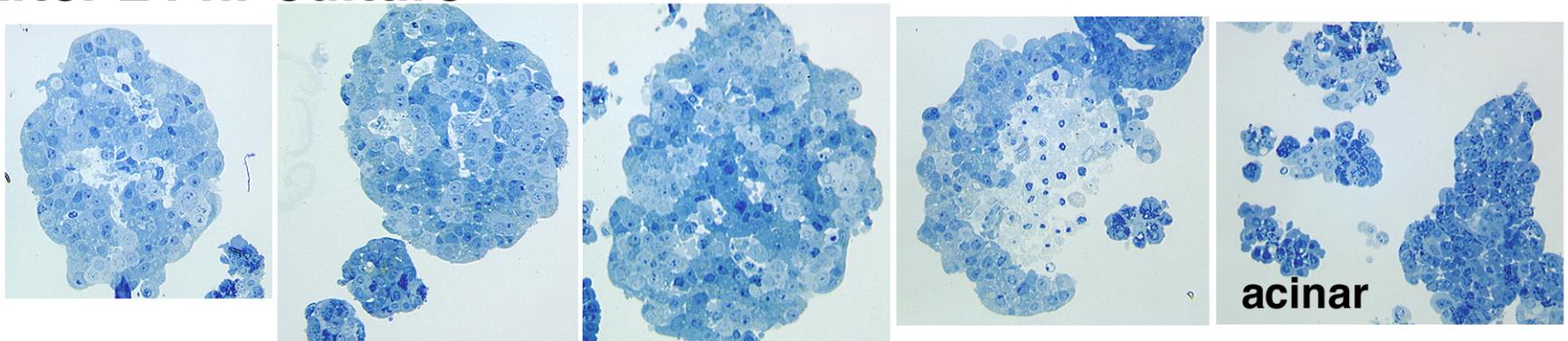
**Why does dithizone over-estimate the % islet and number of islet equivalents(IE) ?**

**Vascular channels are enlarged during isolation and distort the volume of freshly isolated islets; they account for 15-20% of the islet cross sectional area.**

### **Day of isolation**



### **After 24 hr culture**



# Composition of human islets by EM

**$72.6 \pm 1.7\%$   $\beta$  cells (Range : 40.9 - 83.8 %)**

**The value of 40.9 % was associated with islet amyloid;  
the next lowest value was 57.1 %.**

**31 pancreases.**

# Is the EM Assessment Accurate for % $\beta$ Cell/Islet?

Taking 7 clinical preps from 2004,

EM	$72.2 \pm 3.5$ % $\beta$ cells (Range 57.1 - 83.9)
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LM of immunostained pancreas of prep

	$70.3 \pm 3.0$ % $\beta$ cells (Range 56.3 - 76.5)
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These values are cell number, not volume.

**Can we develop a new assay for determining islet purity and IE that is more accurate, fast and without need of expensive large equipment?**

**Combination of:**

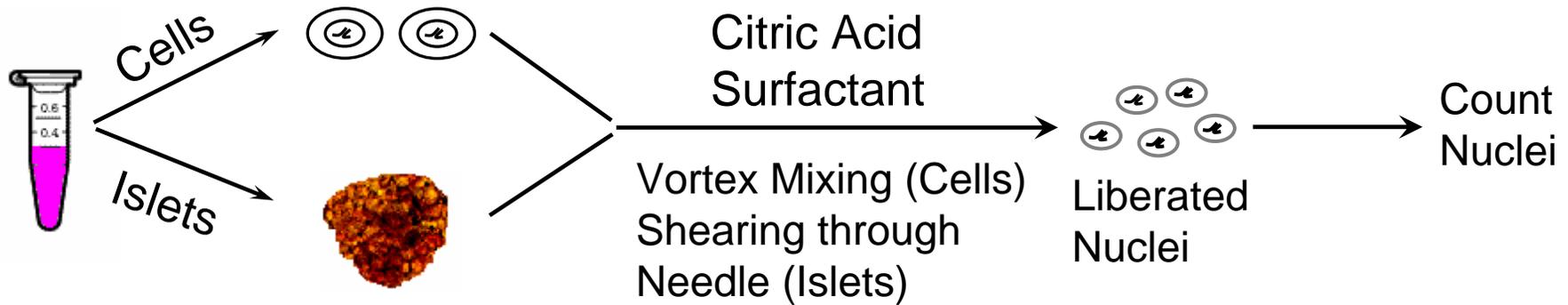
**nuclei counting (Pisania & Colton)  
morphological identification**

**We have so far tested the technique using the 1 um plastic sections but now need to validate with frozen sections.**

# Nuclei Counting Assay

*Anna Pisania & Clark Colton*

Determine number of cells in preparation, and with modification the number of viable cells.

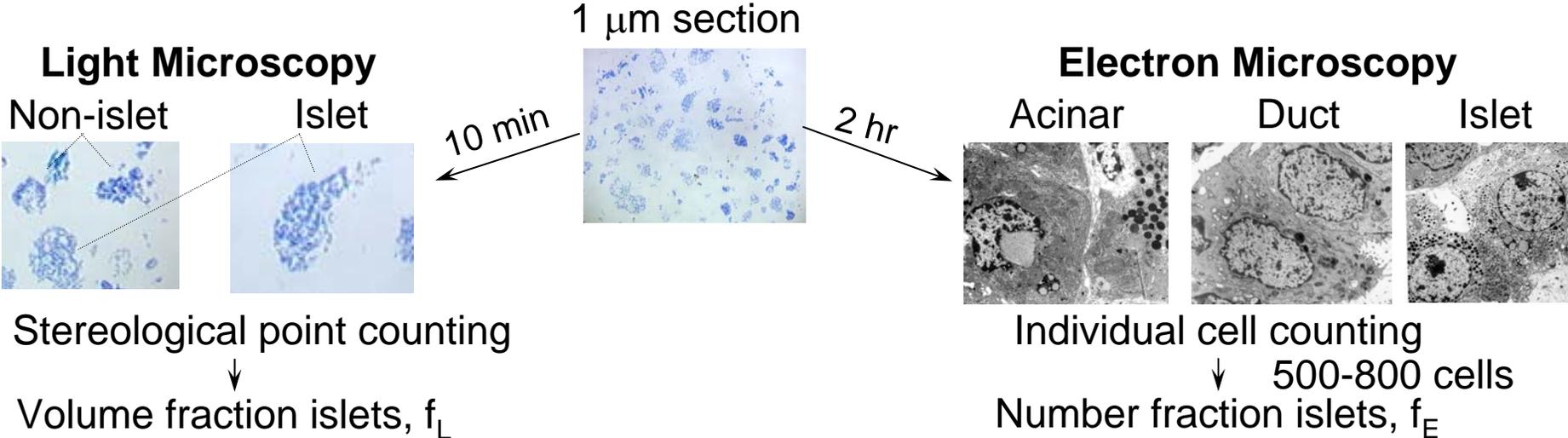


**Accurate: using 125 IE: COV~ 6%**

**Rapid: Guava Flow Cytometer- 10 min**

**Visual counting - 60 min**

# Combine Nuclei Counting with Morphological Assay



Preparation	Fraction Islets				$N_{\text{Total}}$	$N_{\text{Islets}}$	IEQ	
	Light $f_L$	EM $f_E$	DTZ $f_{\text{DTZ}}$	$\frac{f_{L+E}}{f_{\text{DTZ}}}$			Nuclei Counting	Conventional Method*
1	0.60 ± 0.10	0.49	0.85	0.64	-	-	-	-
2	0.56 ± 0.01	0.62	0.90	0.66	-	-	-	-
3	0.66 ± 0	0.68	0.80	0.84	-	-	-	-
4	0.86 ± 0	-	0.95	0.91	10.8	9.3	47,000	100,000
5	0.64 ± 0.01	-	0.80	0.80	6.4	4.1	21,000	55,000

$$N_{\text{Islets}} = f_L \cdot N_{\text{Total}}$$

$$\text{IEQ} = \frac{N_{\text{Islets}}}{2000}$$

**Can we use frozen sections to do this before transplant?**

\*DTZ as reported by the isolation center

# SUMMARY

- 1. Purity of islets by EM analysis (31 clinical islet preparations) showed  $48.0 \pm 2.8\%$ .**
- 2. Purity assessed by dithizone staining was  $68.2 \pm 3.2\%$ .**
- 3. Overestimation of islet equivalents is partly due to dilated vascular channels in freshly isolated islets. ( 15-20 % of the islet area).**
- 4. Human islets are composed of  $72.6 \pm 1.7\%$   $\beta$  cells.**

# Acknowledgements

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