

免疫疾病的轉譯研究

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我們實驗室的研究方向

- 解決臨床上遇到的問題
- 疾病發生的機轉
- 診斷和治療的研發

- **Henoch-Scholien Purpura (過敏性紫斑)**
- **Allergic rhinoconjunctivitis (過敏性鼻結膜炎)**
- **Atopic dermatitis(異位性皮膚炎)**
- **Asthma(氣喘) and Immune Regulation**

疑惑

1. **50-60%的患童在發病前有感冒或是感染的症狀**
2. **IgA 血中濃度會增加**
3. **Self-limited**

Childhood Henoch-Schönlein Purpura

- 1. One of the most common types of systemic small vessel vasculitis in children**
- 2. Characterized by:**
 - *palpable non-thrombocytopenic purpura**
 - *arthritis or arthralgia**
 - *soft tissue edema**
 - *abdominal pain with or without GI hemorrhage**
 - *glomerulonephritis**



Childhood Henoch-Schönlein Purpura

Table 1

Summary of classification criteria for Henoch-Schönlein purpura (HSP) diagnosis.

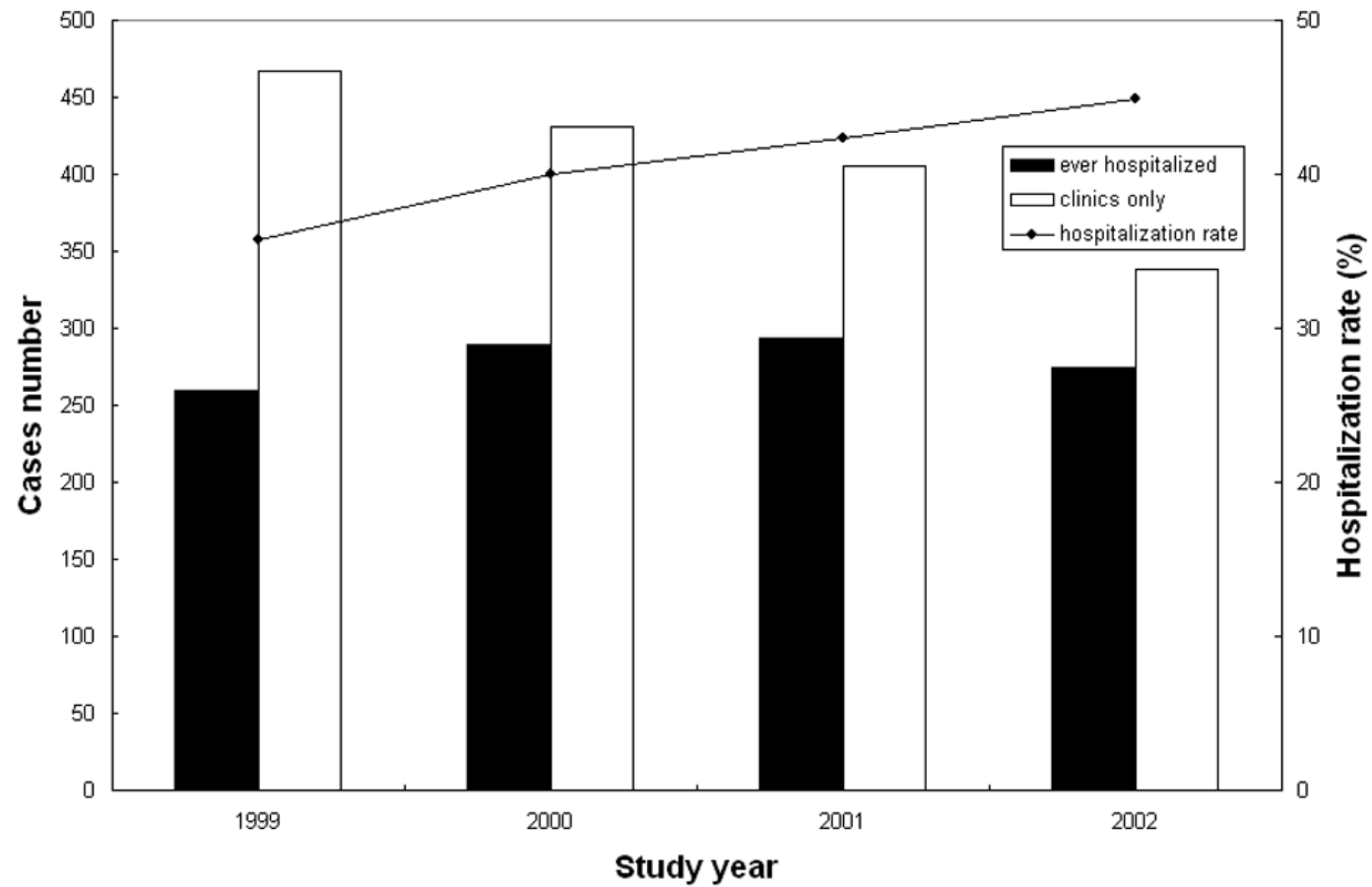
Classification	Diagnostic criteria
ACR 1990 [9]	≥ 2 of the following: <ol style="list-style-type: none"> 1. Palpable purpura, not thrombocytopenic 2. Bowel angina 3. Wall granulocytes on biopsy 4. Age ≤ 20 years at disease onset
Michel et al. 1992 [12]	≥ 3 of the following: HSP; ≤ 2 of the following: HV <ol style="list-style-type: none"> 1. Palpable purpura, not thrombocytopenic 2. Bowel angina 3. Gastrointestinal bleeding 4. Hematuria 5. Age ≤ 20 years at disease onset 6. No history of medication intake at disease onset
CHCC 1994 [13]	Vasculitis, with IgA-dominant immune deposits, affecting small vessels (ie, capillaries, venules, or arterioles); typically involves skin, gut, and glomeruli and is associated with arthralgias or arthritis
Helander et al. 1995 [17]	Palpable purpura, not thrombocytopenic with LCV + ≥ 3 of the following: <ol style="list-style-type: none"> 1. Vascular IgA deposition 2. Age ≤ 20 years at disease onset 3. Gastrointestinal involvement 4. Upper respiratory tract infection prodrome 5. Mesangioproliferative glomerulonephritis with or without IgA deposition
EULAR/PRINTO/PRES 2010 [20]	Palpable purpura, not thrombocytopenic/petechiae (mandatory) + \geq one of the following <ol style="list-style-type: none"> 1. Diffuse abdominal pain 2. Histopathology: typical LCV with predominant IgA deposits or proliferative glomerulonephritis with predominant IgA deposits 3. Arthritis or arthralgias 4. Renal involvement (proteinuria: >0.3 g/24 h or >30 mmol/mg of urine albumin to creatinine ratio on a spot morning sample; and/or hematuria, red blood cell casts: >5 red cells per high power field or $\geq 2+$ on dipstick or red blood cell casts in the urinary sediment)

ACR, The American College of Rheumatology; HV, hypersensitivity vasculitis; CHCC, Chapel Hill Consensus Criteria; LCV, leukocytoclastic vasculitis; EULAR/PRINTO/PRES, European League Against Rheumatism/Paediatric Rheumatology International Trials Organization/Paediatric Rheumatology European Society.

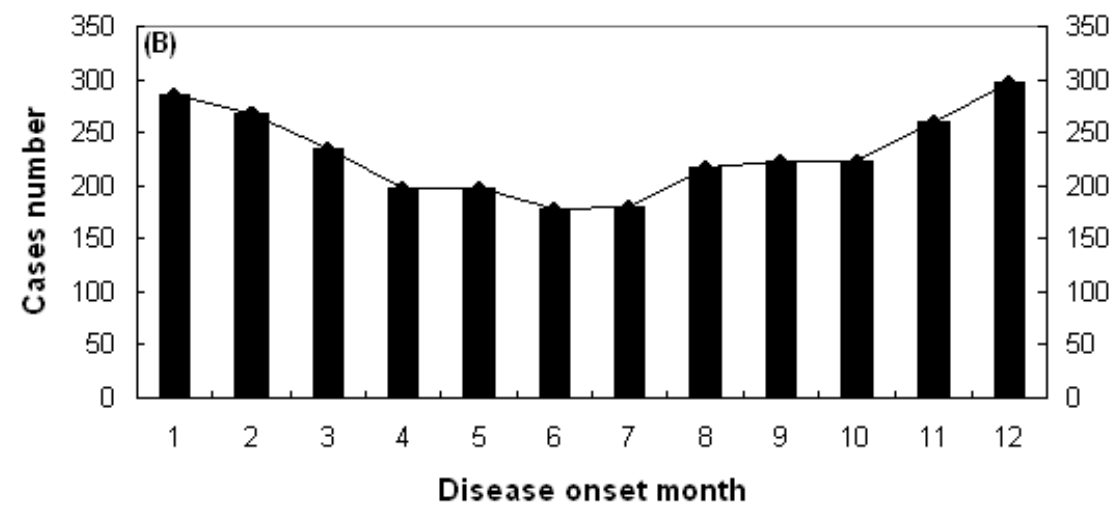
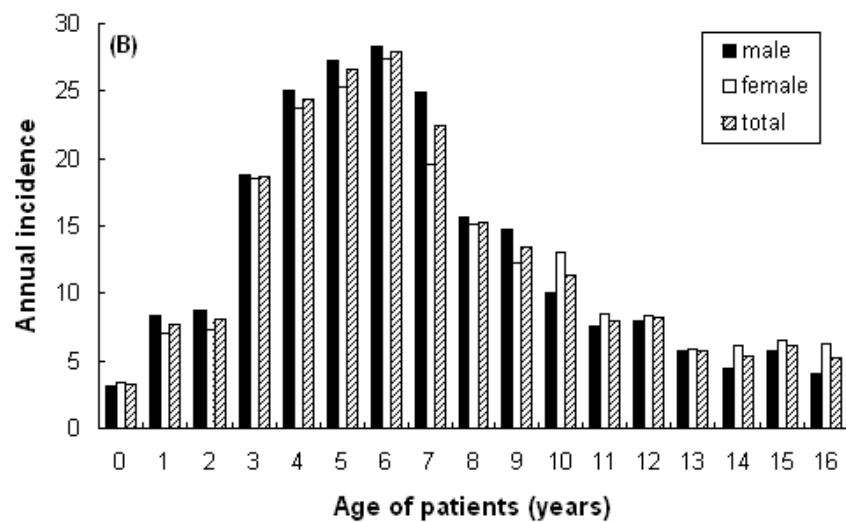
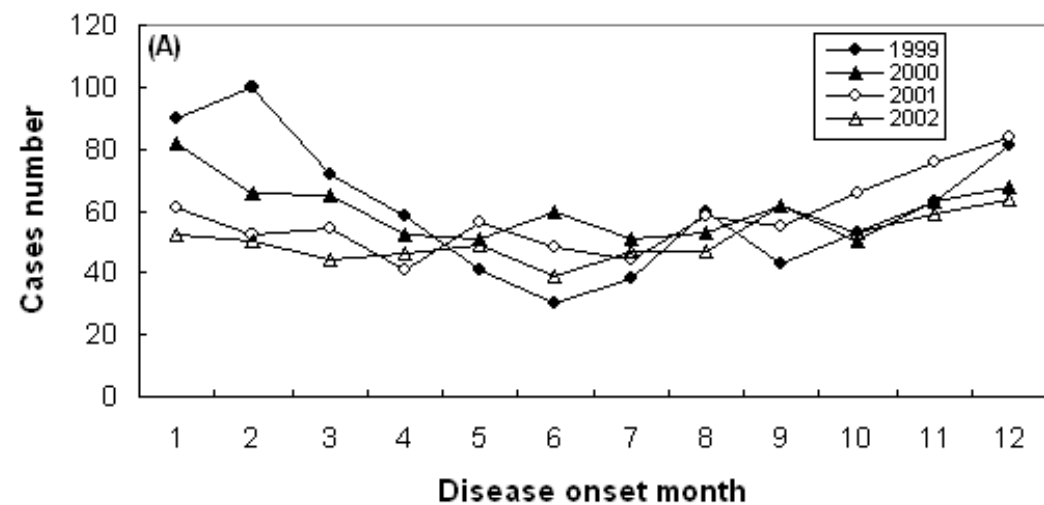
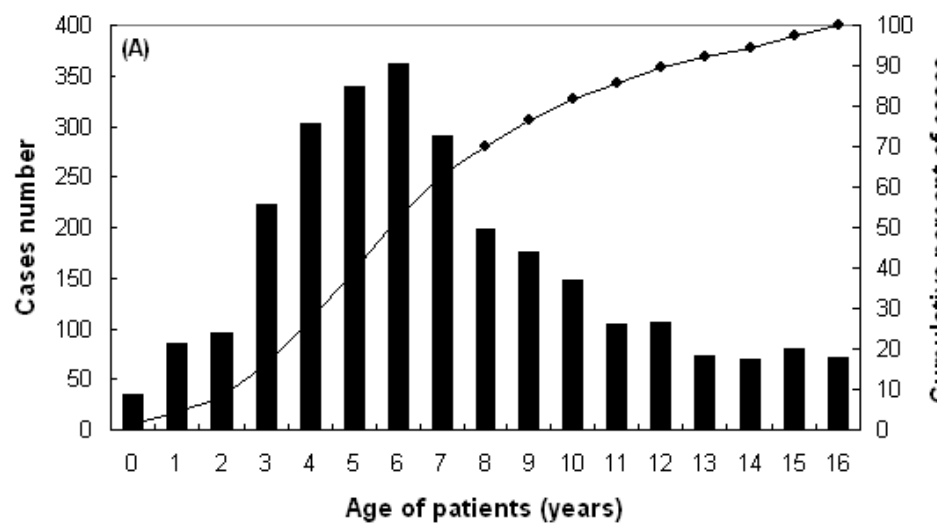
Clinical features of childhood HSP in NTUH

	Number of patients
Total number of patients	261
Gender (male/female)	137/124
Purpura	261 (100%)
Arthralgia/Arthritis	112 (42.9%)
Abdominal pain	151 (57.9%)
Gastrointestinal bleeding	46 (17.6%)
Renal involvement	53 (20.3%)
Micro-hematuria	37 (14.2%)
Gross-hematuria	12 (4.6%)
Proteinuria	30 (11.5%)
Nephrotic syndrome	2 (0.7%)
CNS involvement	3 (1.1%)

Chang WL et al. Acta Pediatr 2004; 93:1427-1431.

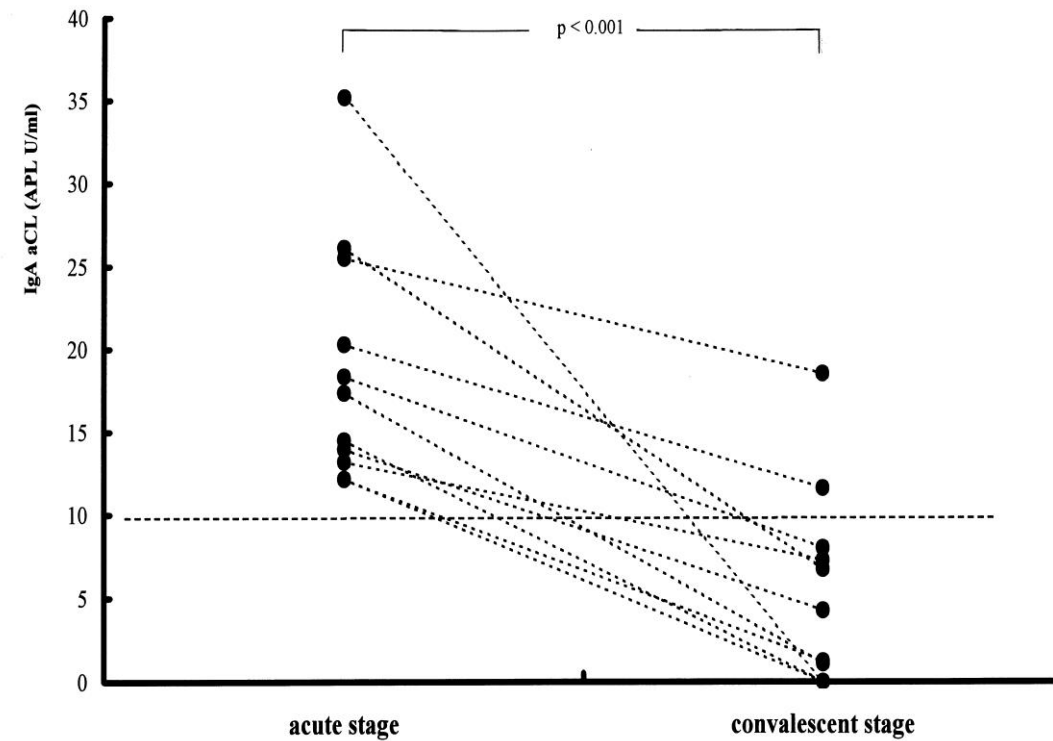
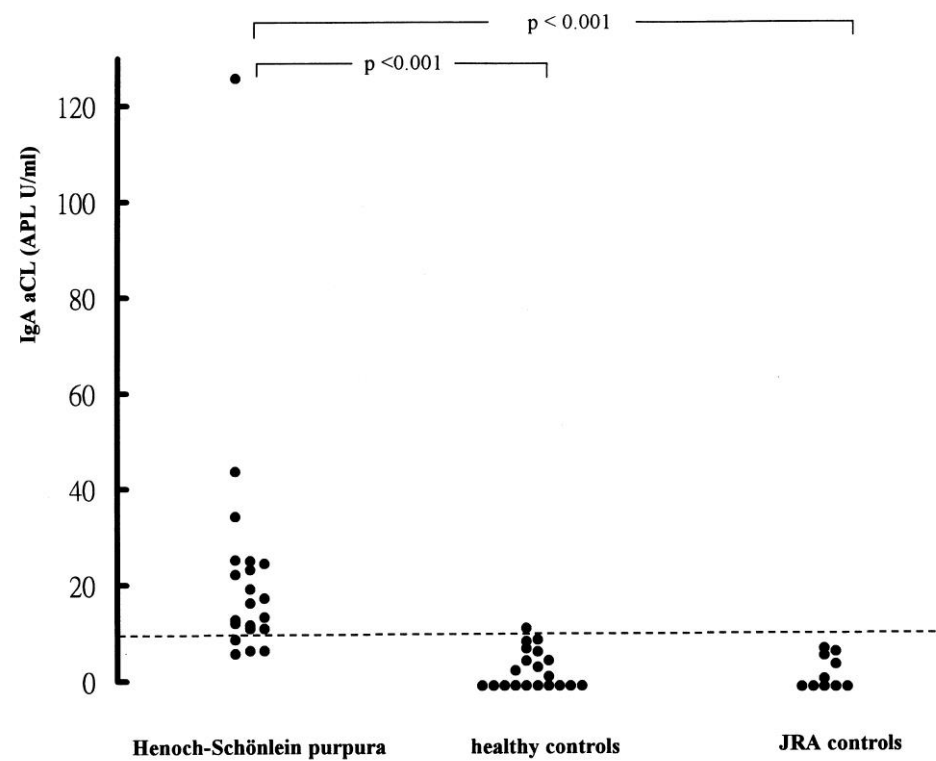


Yang YH et al. Rheumatology 2005; 44:618-622.

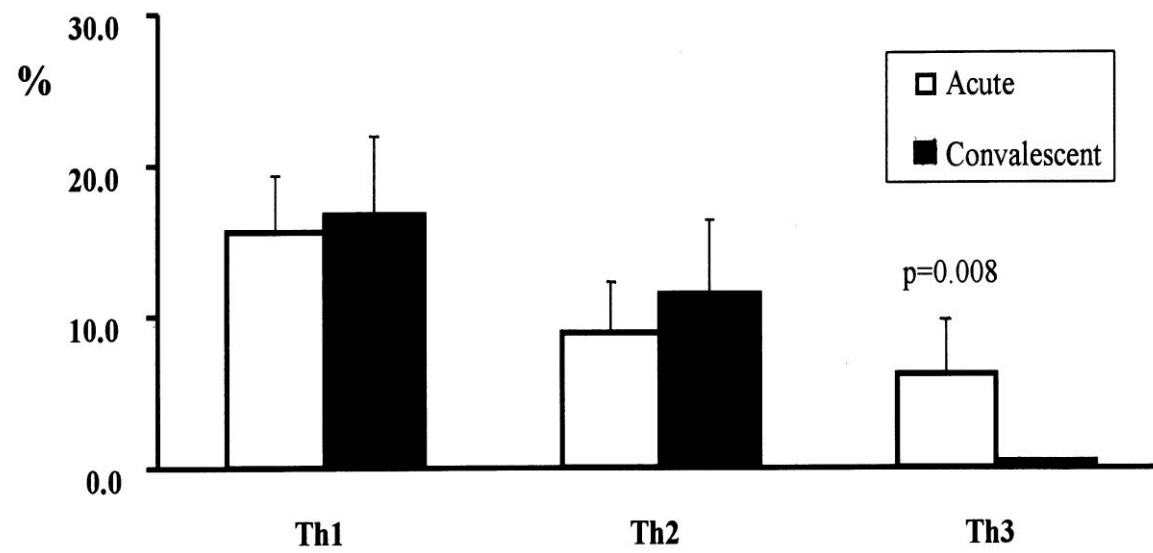
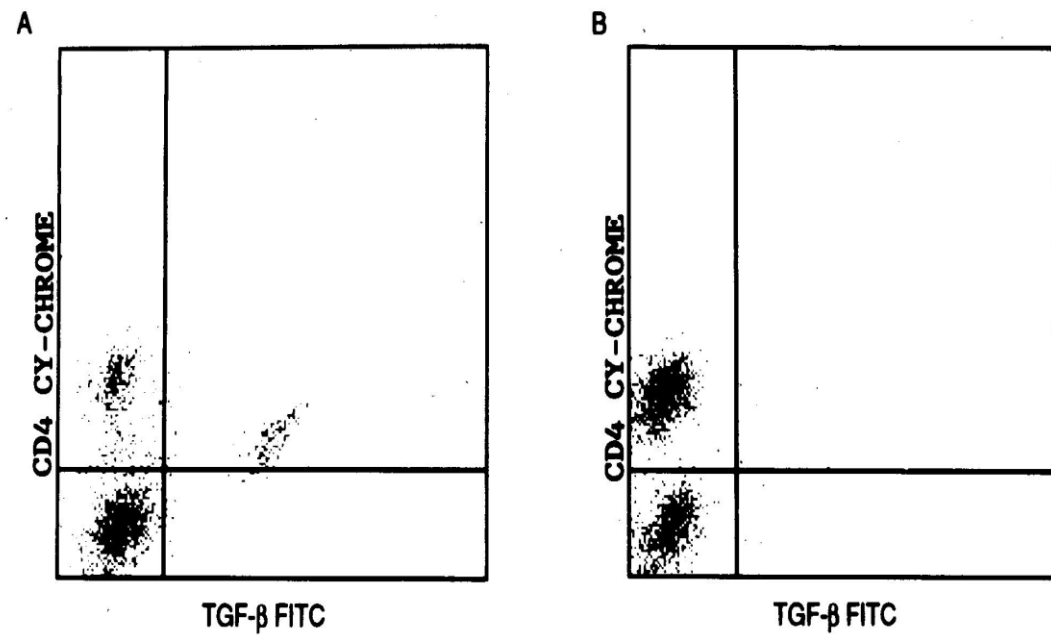


Puzzling questions

- 1. Fifty to 60% of the patients had history of infection about 1-2 weeks before onset**
- 2. Increased IgA levels**
- 3. Self-limited**



- *Yang Y-H et al Increased TGF- β secreting T cells and IgA anticardiolipin antibodies levels during acute stage of childhood Henoch-Schönlein purpura. Clin Exp Immunol 2000, 122:285-290.*



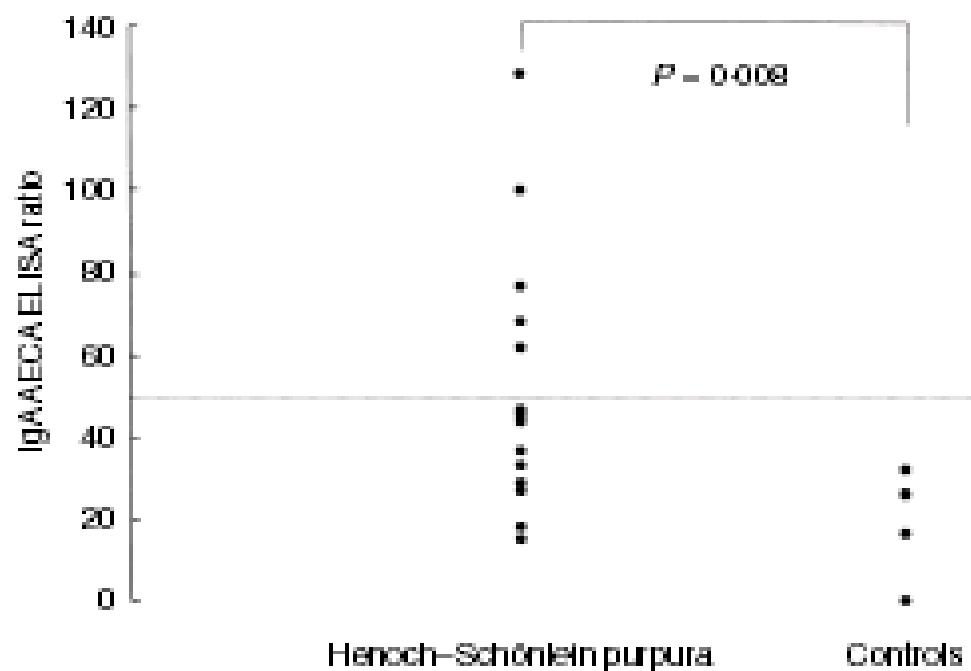
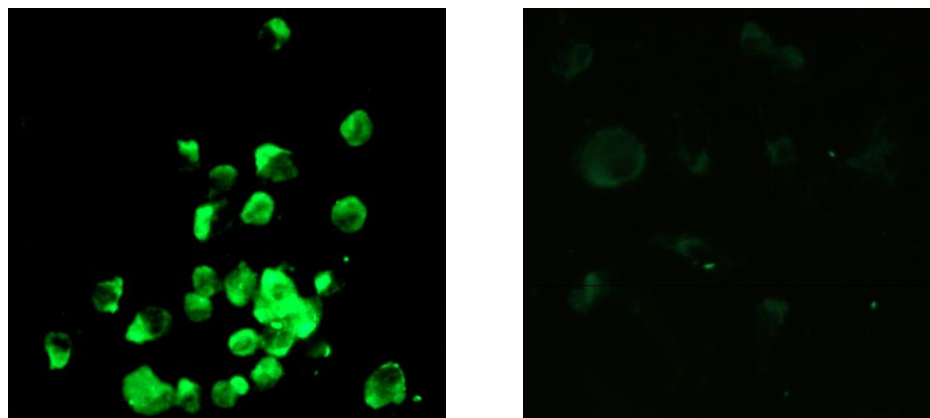


Fig. 3. The values of IgA antibodies against HMVEC-d in patients with acute HSP and normal controls. The dashed line shows the mean \pm 3 s.d. of healthy controls.

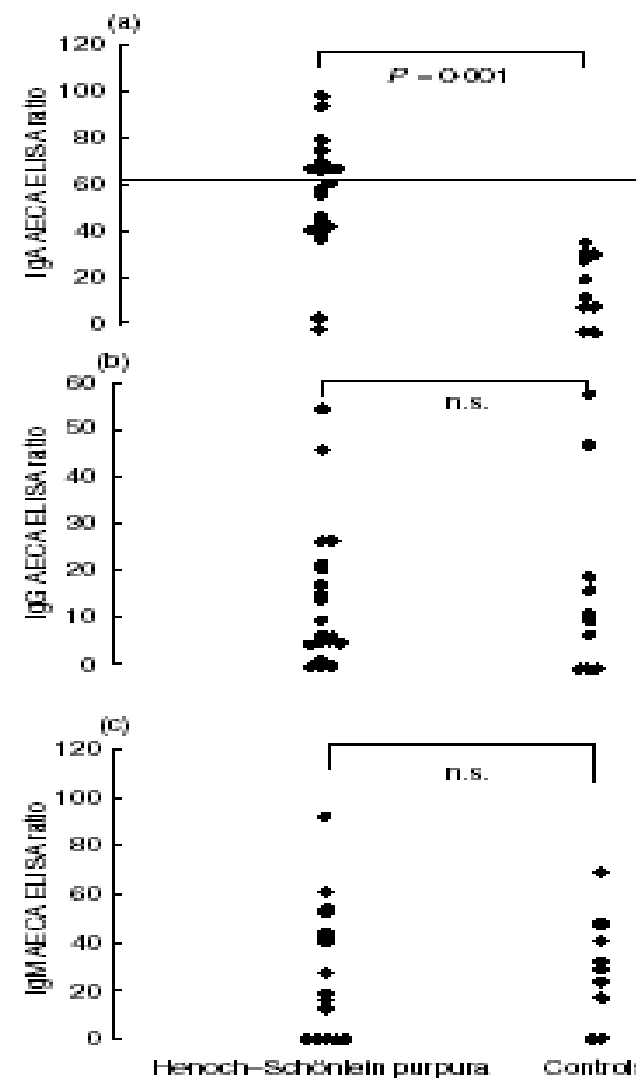
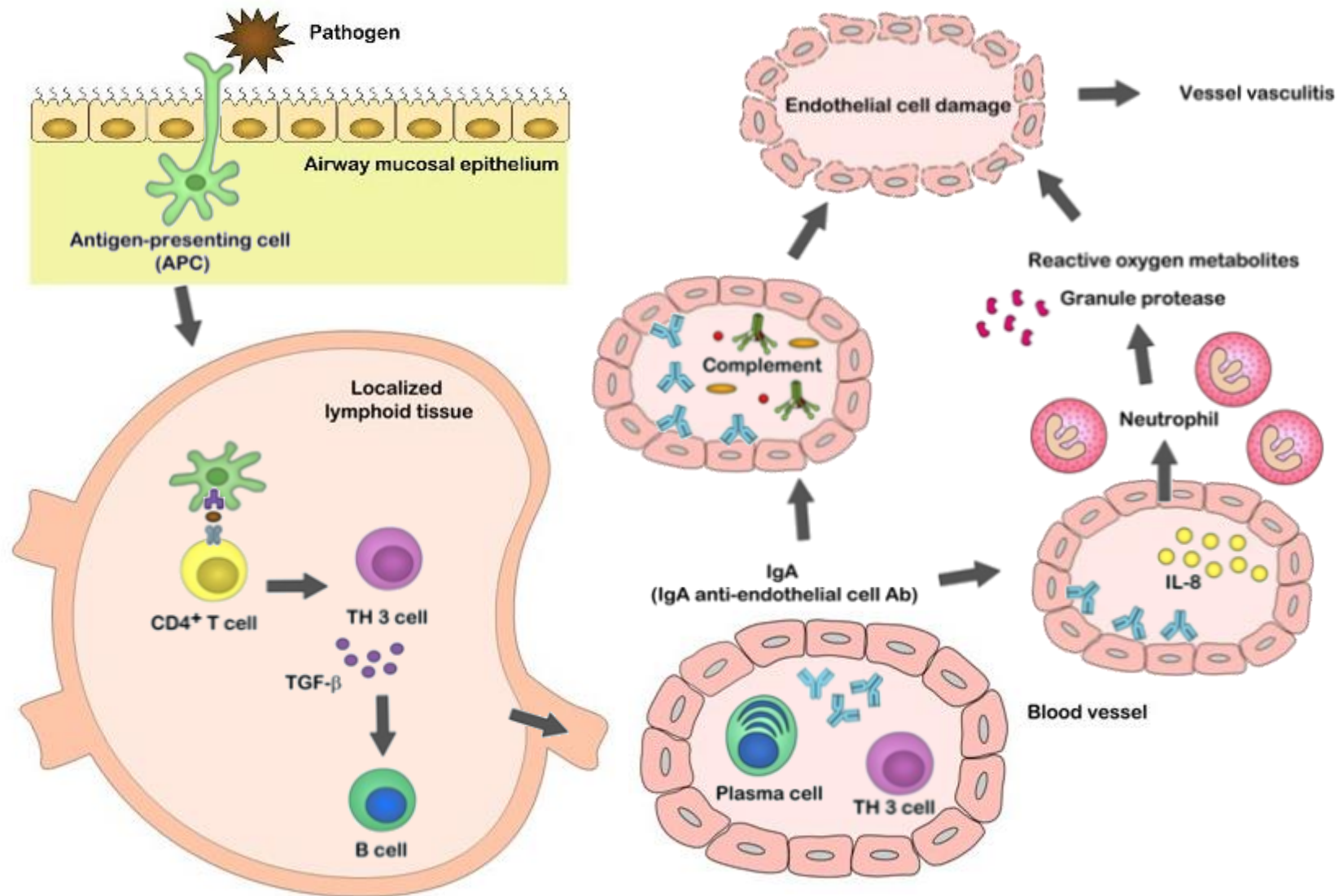
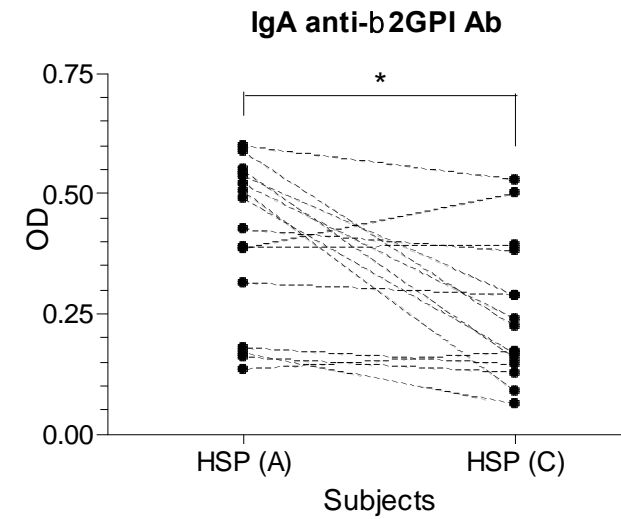
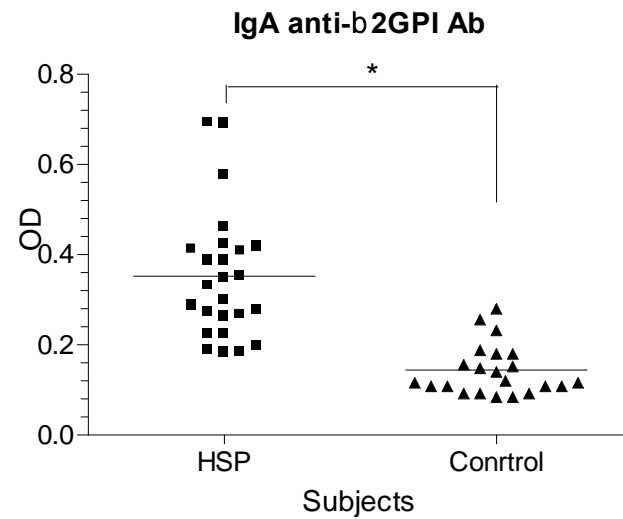
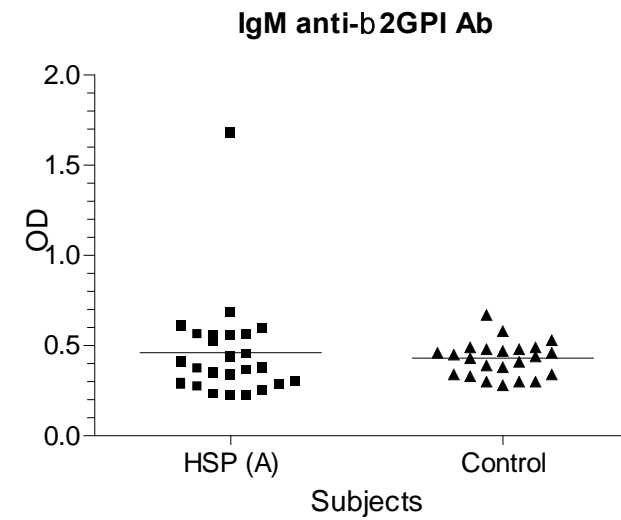
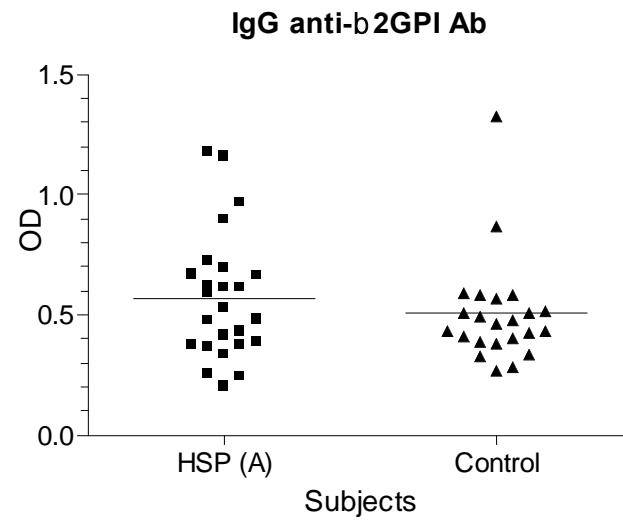


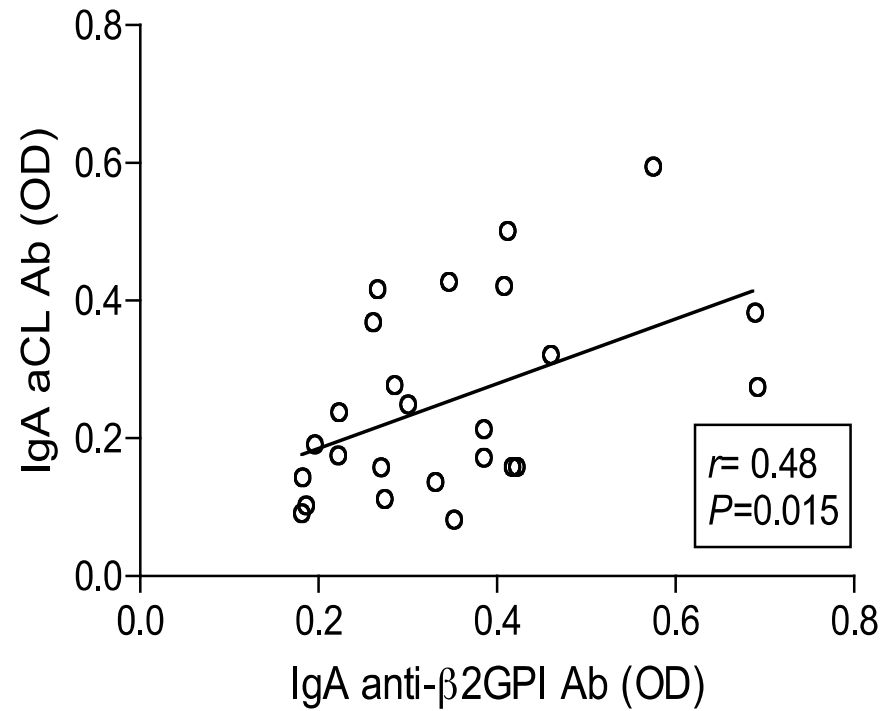
Fig. 2. The values of IgA (a), IgG (b), and IgM (c) antibodies against HUVEC, presented as ELISA ratio, in 20 patients with acute onset of HSP and 10 normal healthy controls. The dashed line in (a) showed the mean ± 3 s.d. of healthy controls; n.s., not significant ($P > 0.05$).



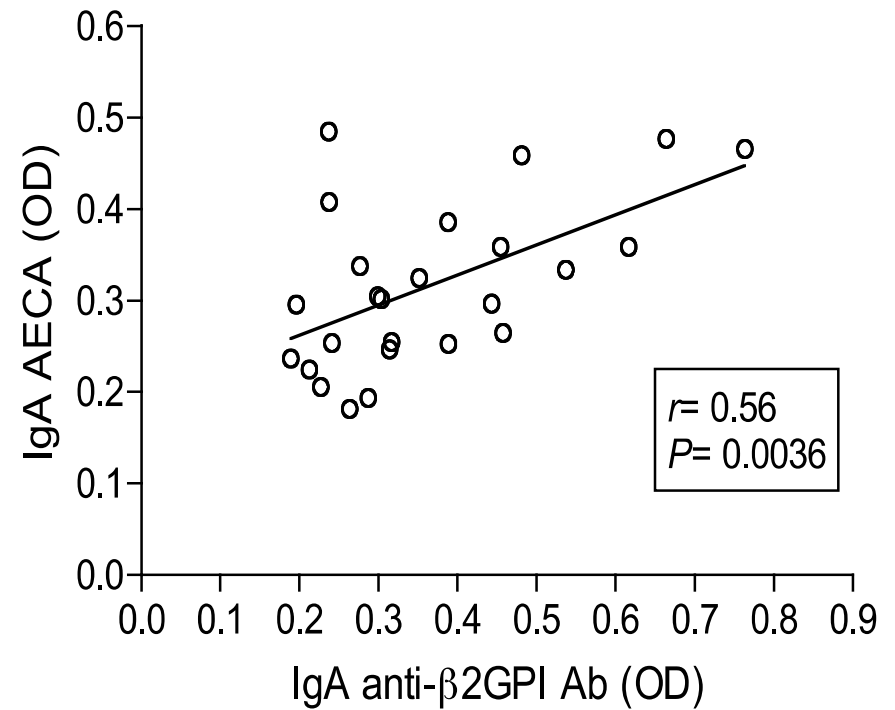
Yang YH, et al: Autoimmunity Rev 2008; 7:179-184.

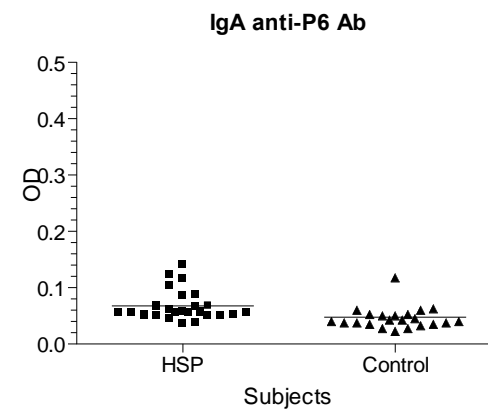
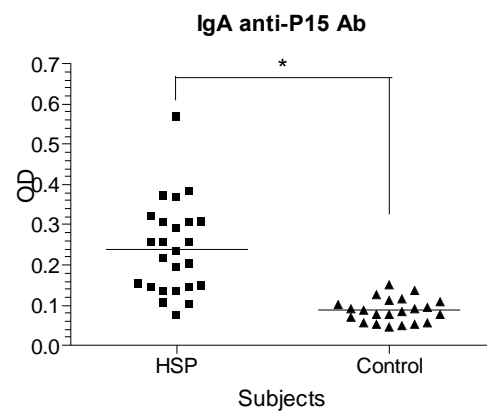
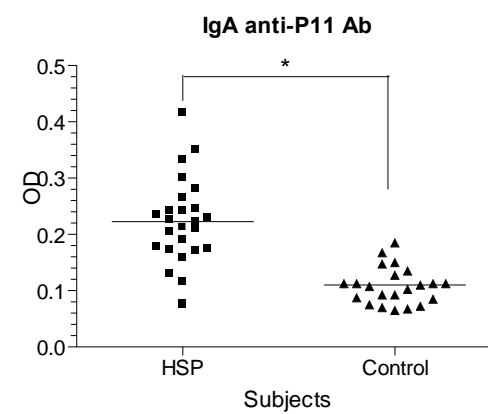
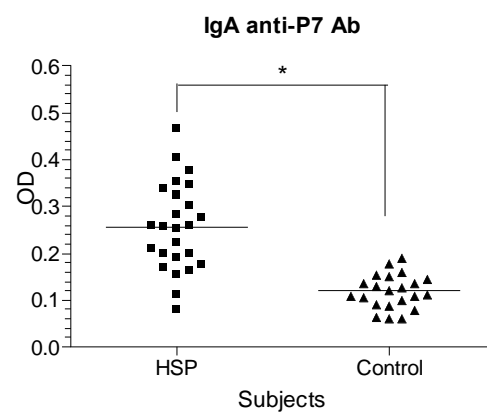
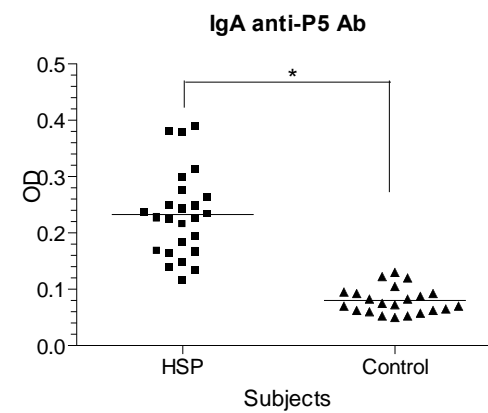
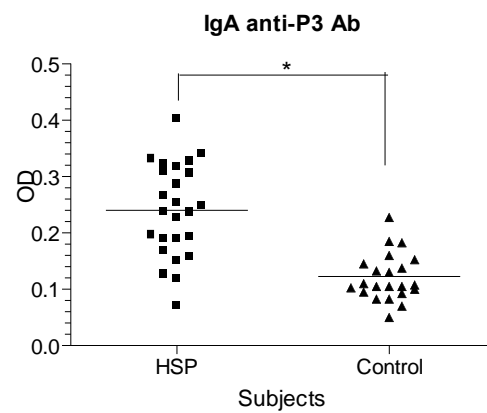


**Correlation between
IgA aCL Ab and IgA anti- β 2GPI Ab**



**Correlation between
IgA AECA and IgA anti- β 2GPI Ab**



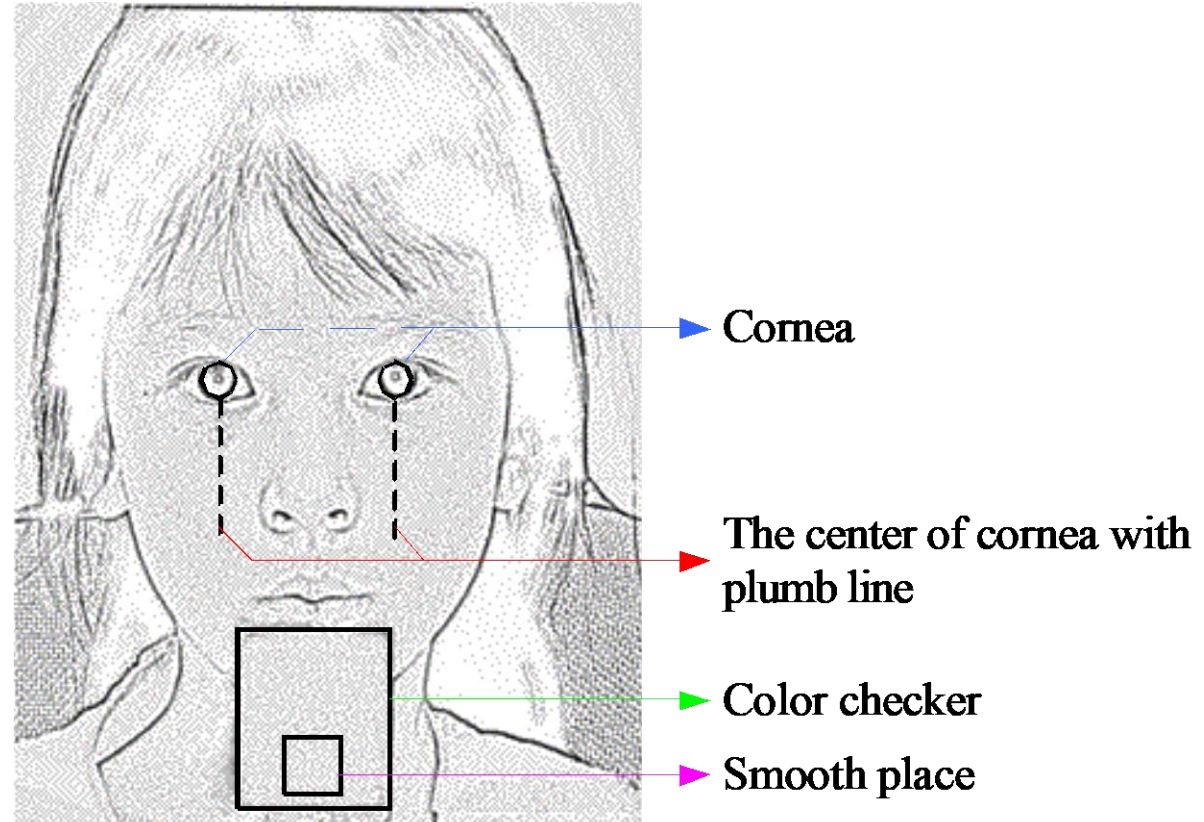


- **Henoch-Scholien Purpura**
- **Allergic rhinoconjunctivitis**
- **Atopic dermatitis**
- **Asthma and Immunotherapy**

**看診時常遇到一個問題：
我們家小朋友有黑眼圈，是不是有過敏？**

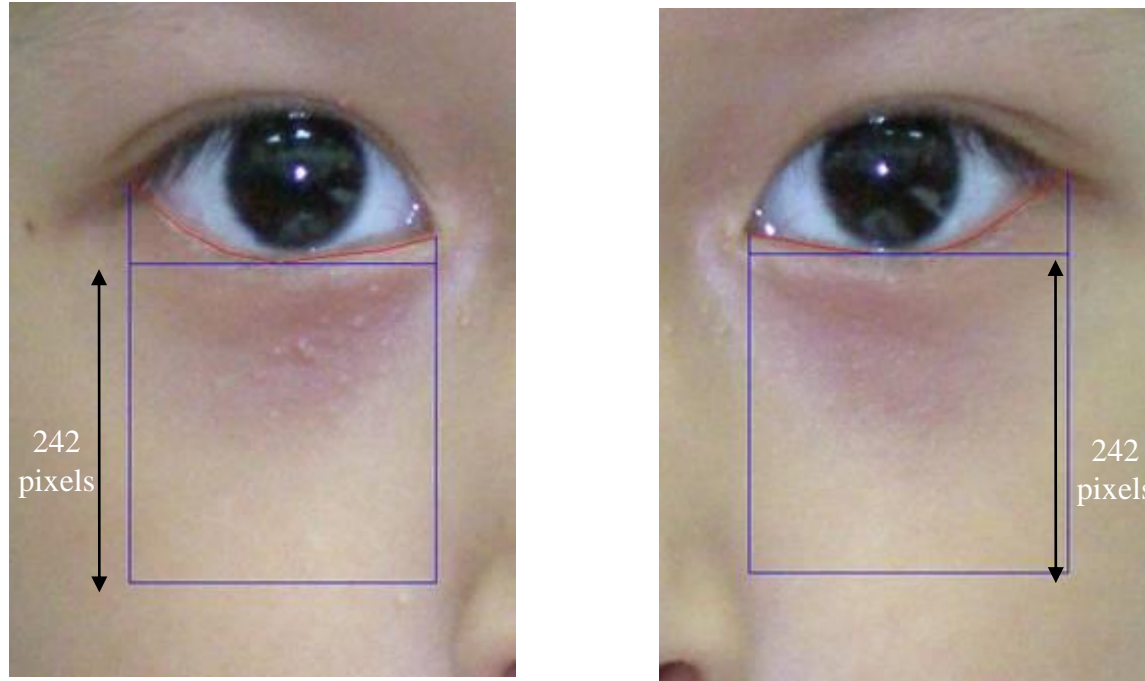
Materials and Methods— Standardized Photograph

For every photograph, we used the identical camera settings, lighting, and patient positioning. A rectangular color checker was placed in front of the chin of the patients, serving as a **reference to standardize both** size and brightness of every image.



Chen C-H et al. Quantitative assessment of allergic shiners in children with allergic rhinitis. *J Allergy Clin Immunol* 2009; 1123:665-671.

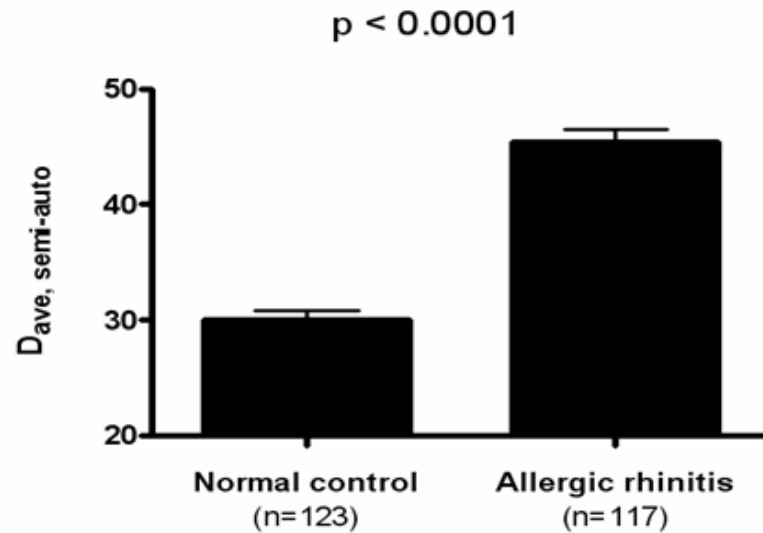
Eyelid Sampling for Measurement of Area Values



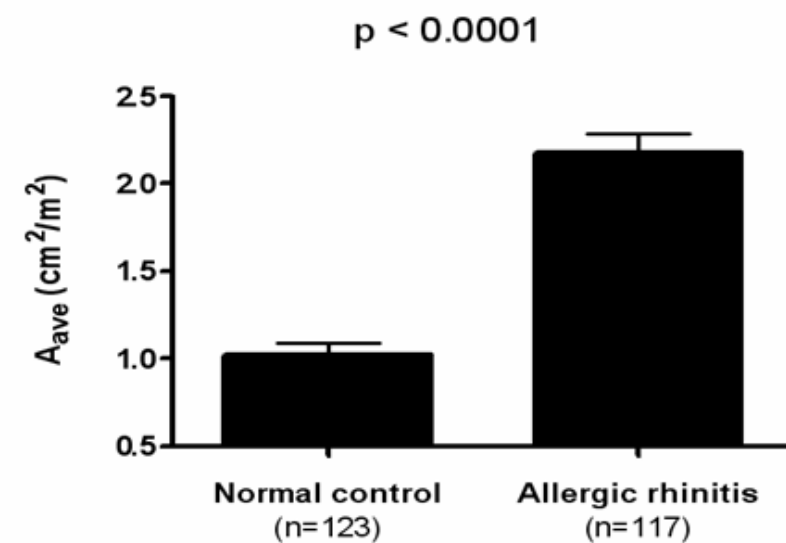
The eyelid sampling was done manually to sample the curve of lower eyelid. After the curve was completed, 242 pixels from the lowest point of the red curve were extended automatically to make a boundary, and we therefore obtained analysis regions.

The impact of allergic rhinitis on the formation of allergic shiners.

2A.

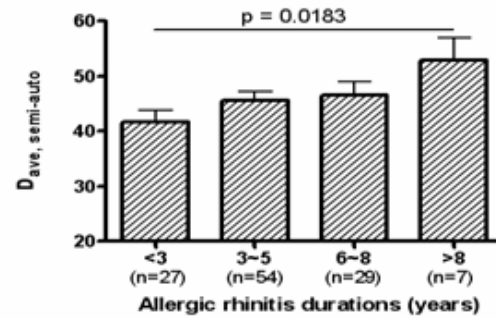


2B.

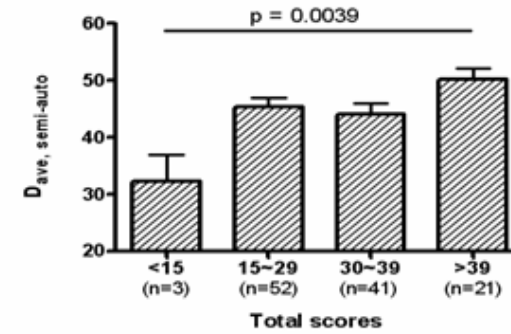


The skins below the lower eyelids were significantly darker and the areas of shiners were significantly larger in the allergic rhinitis group.

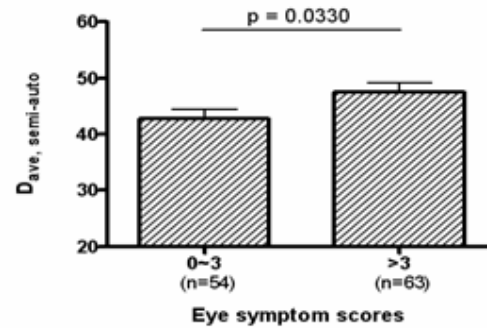
3A.



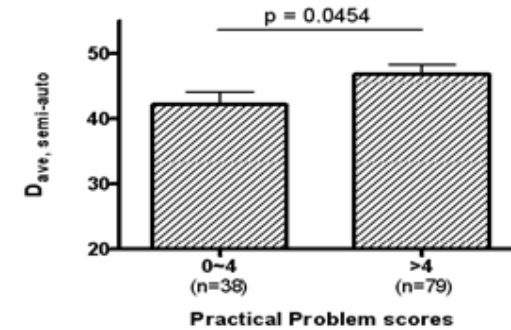
3B.



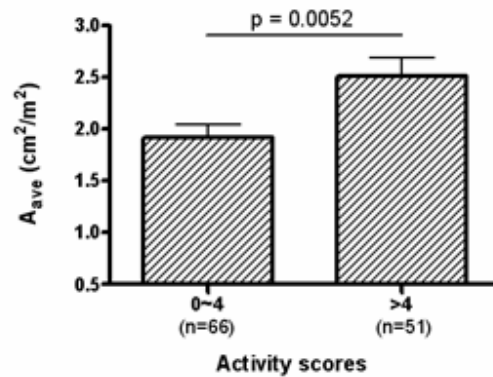
3C.



3D.



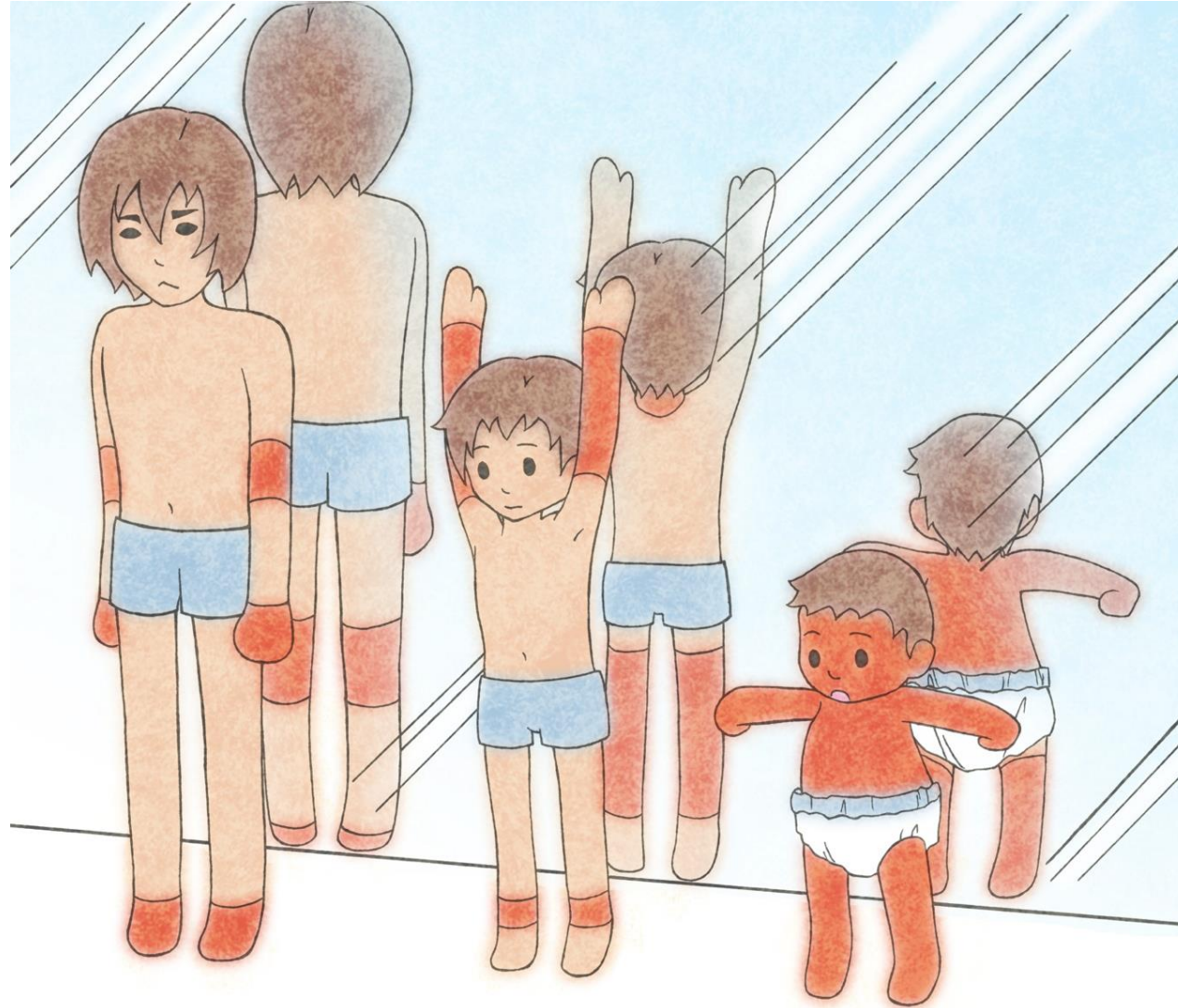
3E.



We divided the values of each possible risk factor into groups.

- **Henoch-Scholien Purpura**
- **Allergic rhinoconjunctivitis**
- **Atopic dermatitis**
- **Asthma and Immunotherapy**

Atopic Dermatitis



ATOPIC DERMATITIS (AD)

- A chronically relapsing pruritic inflammatory skin disease
- Sleep disturbance is highly prevalent (47-60%) and is a leading cause of impaired quality of life



**異位性皮膚炎時常遇到一個問題：
原本控制得很好的皮膚睡覺時抓一抓
就變壞**

Sleep Disturbance in Children with Atopic Dermatitis



Chang et al. Pediatrics. 2014 Aug;134(2):e397-405

Sleep Disturbance in AD

- 47-60% of AD children have disturbed sleep, 86% during exacerbation
 - Night waking (50-73% vs 11-22%)
 - Prolonged nocturnal wakefulness
 - Longer time to resettle after waking (3X)
 - Impaired quality of life
- Disrupted sleep in family members: 23%
 - Behavioral disturbance: 54%
 - irritability& bad temper
 - Infant eczema with concurrent sleeping problems predicted emotional problems(OR 2.63;95%CI 1.2-5.76) and conduct problems(OR 3.03;95%CI 1.01-9.12) at 10 y/o

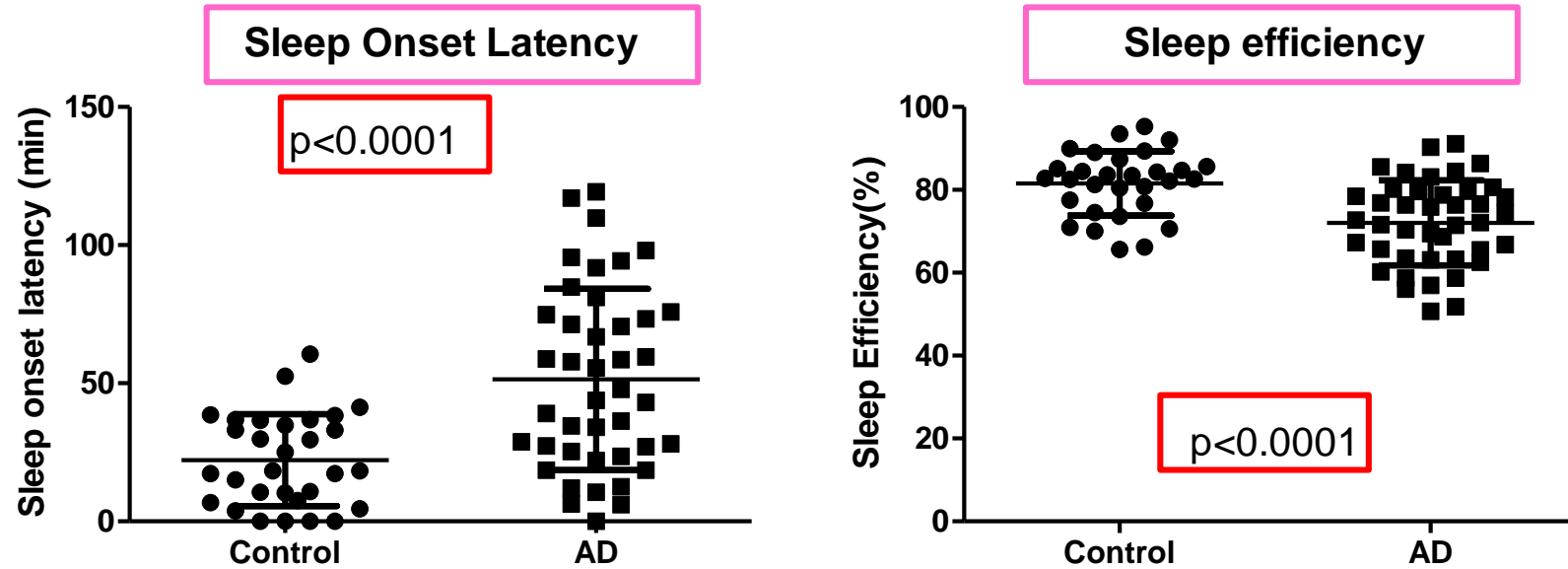
Allergy 2011 Mar;66(3):404-11

Sleep Med Rev. 2010 Dec;14(6):359-69

Demographic Data

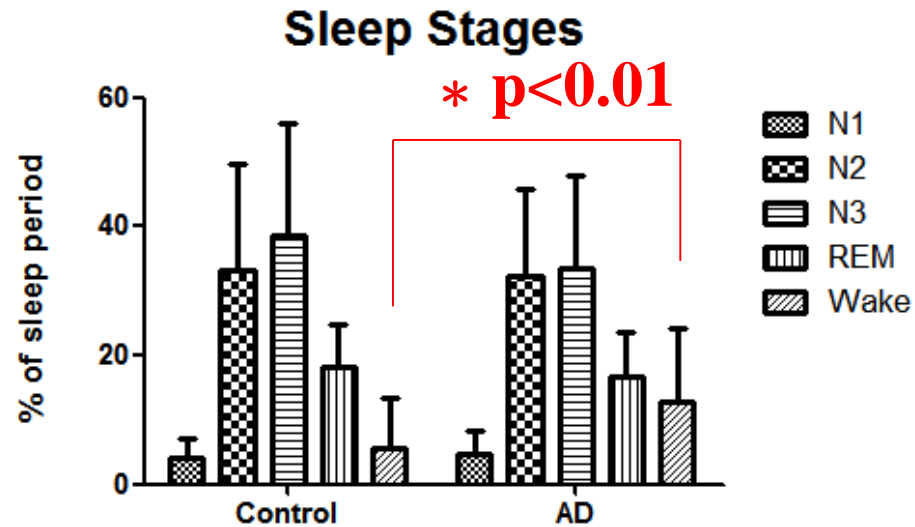
	Patients (n=42)	Control(n=30)
Age, years	7.2±3.8	8.7±3.9
Sex, M/F	22/20	16/14
SCORAD	31.7 (6.7-89.7)	-
PSG participant, number	40	19
Sleep Efficiency(%)	72.02±10.25	81.55±7.74
Wake After Sleep Onset (min)	56.75 (20-229.5)	45.5(5-123.5)
% Wake in Sleep	13.59 (4.79-40.93)	10.5(1.37-24.94)
Sleep Onset Latency(min)	51.37±32.78	22.2±16.64
% Mobile in Sleep	8.99(3.89-36.58)	7.32 (1.94-19.43)

Sleep parameters by Actiwatch



**AD patients have significantly longer sleep onset latency
and lower sleep efficiency than controls**

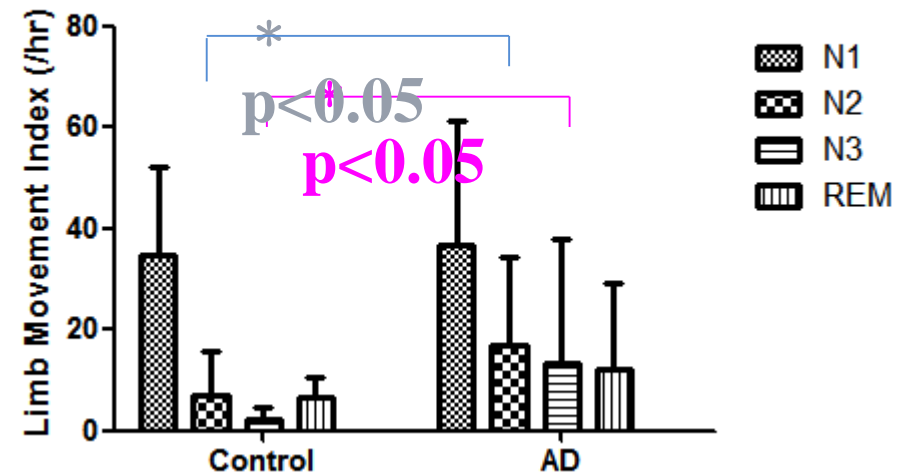
Sleep parameters by PSG



More Wake(%) in AD patients
No significant difference
in percentage of
other stages in sleep

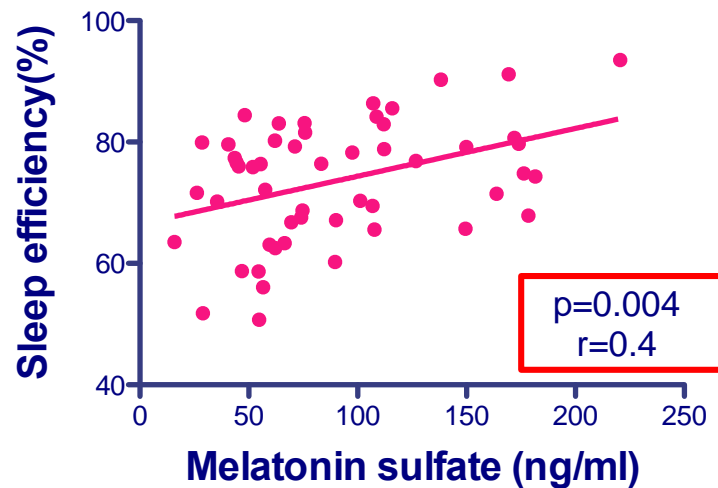
AD patients have more
limb movement
in stage N2 and N3
sleep than control

Limb Movement Index in Sleep Stages

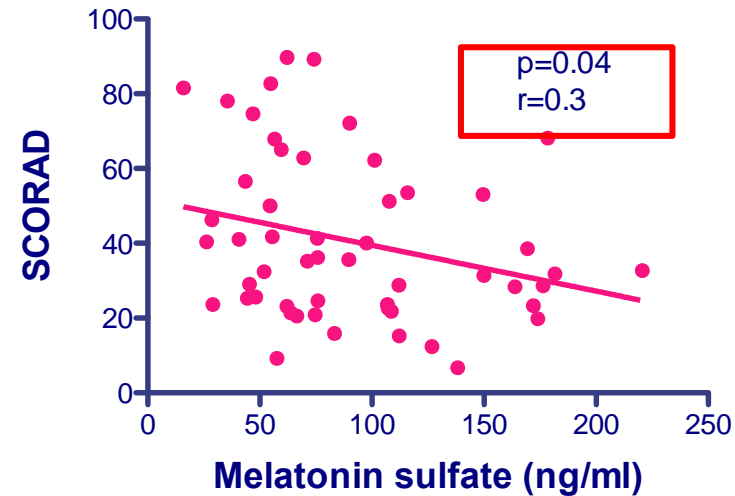


NOCTURNAL MELATONIN LEVELS IN AD

Nocturnal melatonin vs Sleep efficiency

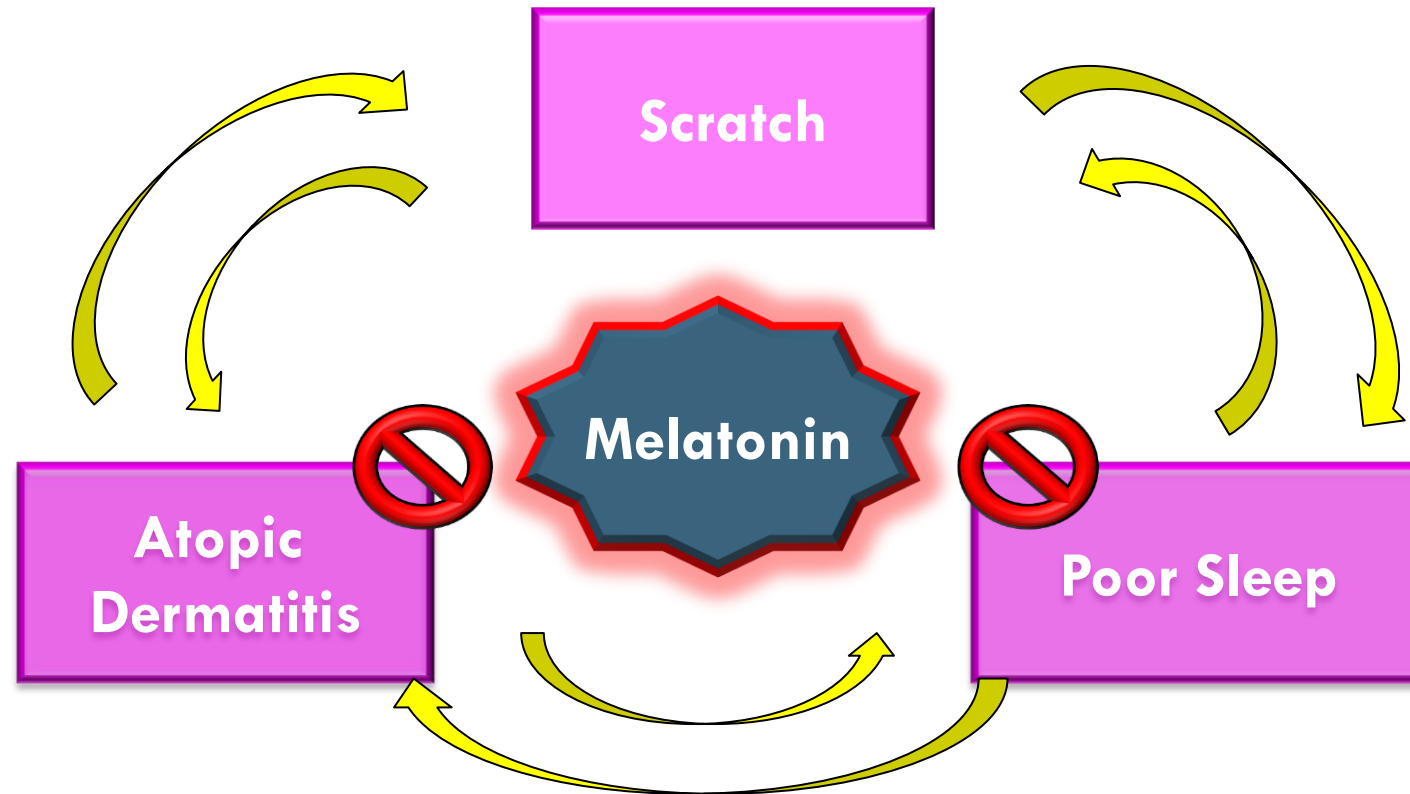


Nocturnal melatonin vs Disease severity

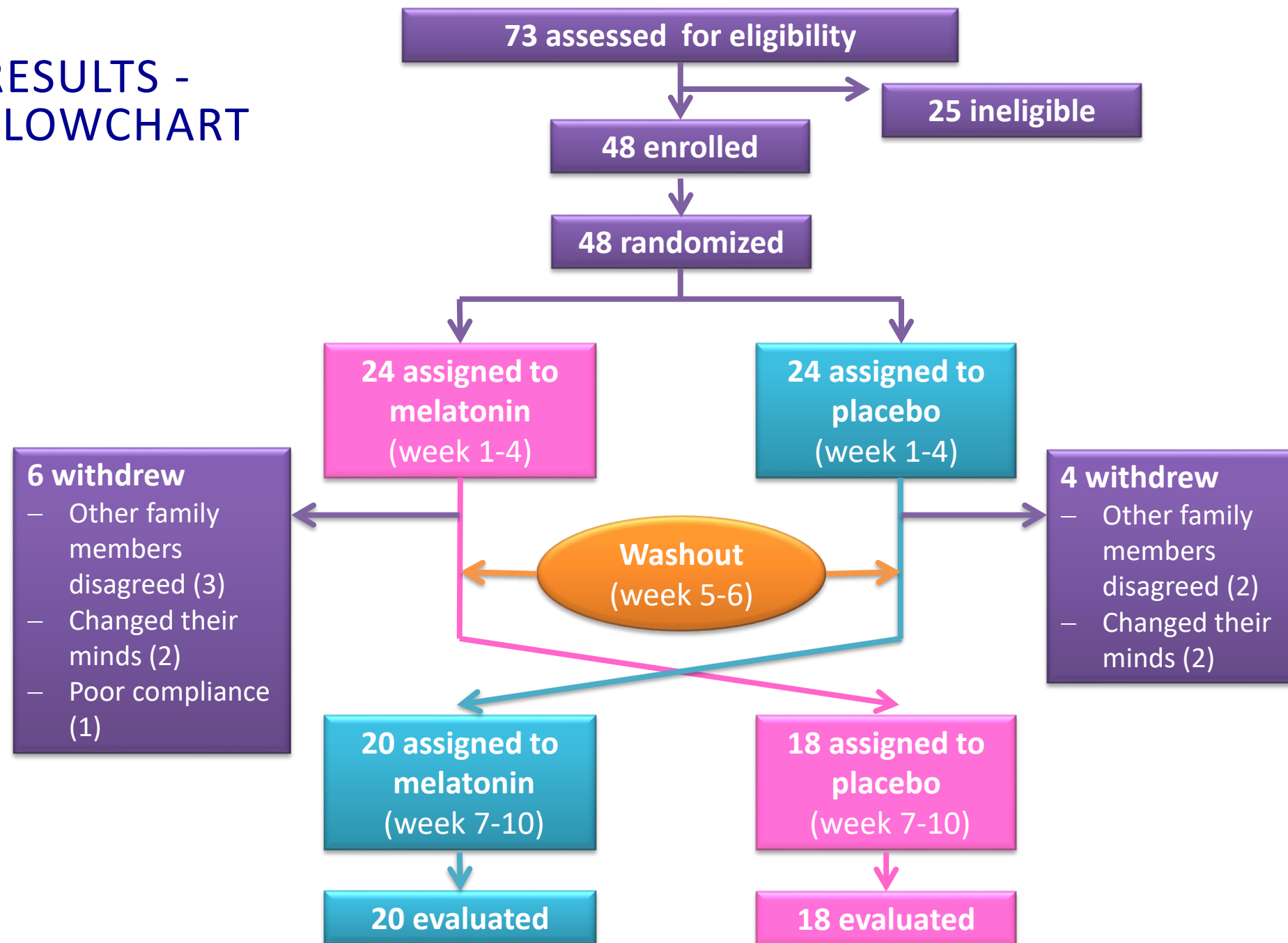


Lower nocturnal melatonin secretion is significantly correlated with lower sleep efficiency and more severe dermatitis in children with AD

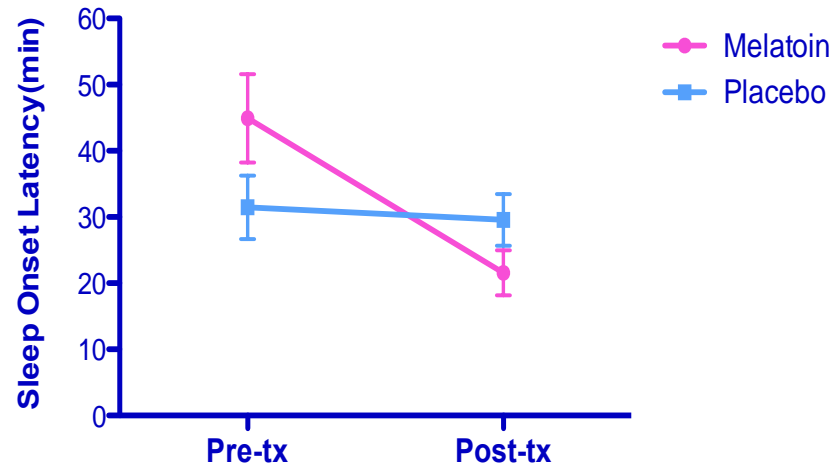
HYPOTHESIS



RESULTS - FLOWCHART

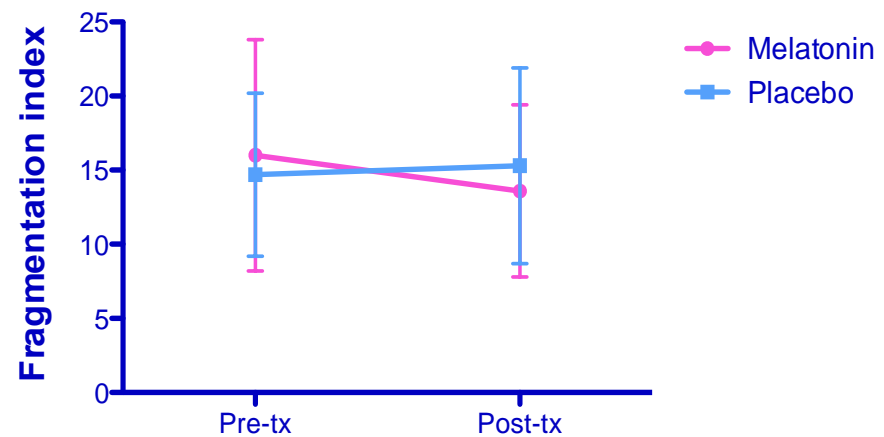
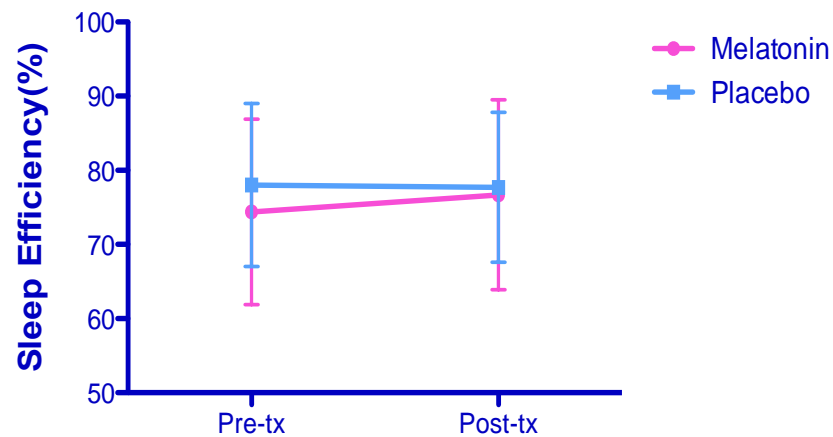


EFFECT OF MELATONIN ON SLEEP

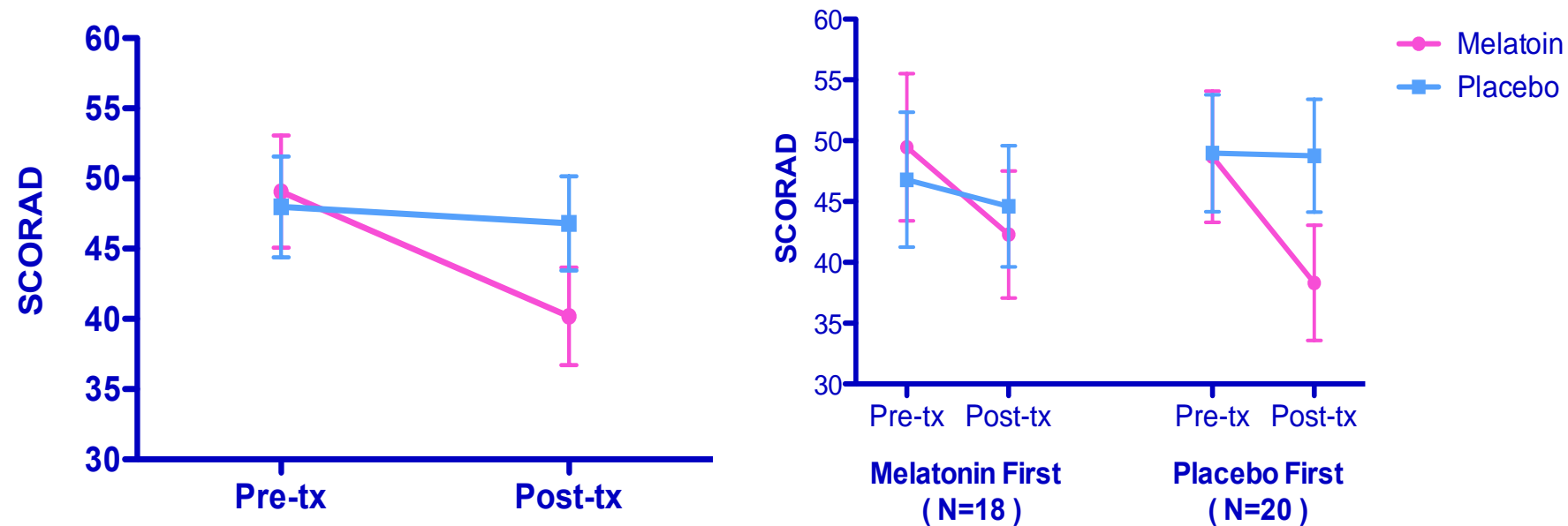


Melatonin significantly shortens sleep onset latency by 21.4 minutes more than placebo (95%CI= -38.6 to -4.2, p=0.015)

No effect on sleep efficiency, wake time during sleep, or sleep fragmentation



EFFECT OF MELATONIN ON AD SEVERITY



AD severity significantly improved after melatonin treatment: SCORAD decreased 9.1 more than placebo (95%CI= -13.7 to -4.6, p=0.0001)

Treatment sequence did not affect treatment effect (p=0.67)

研究成果刊登於國際上小兒科排名第一的醫學雜誌「JAMA PEDIATRICS」，也接受許多國外媒體採訪報導，已申請美國專利

Reuters Health Information

Melatonin Aids Sleep, Eases Atopic Dermatitis in Children

By Megan Brooks



Melatonin Might Help Sleepless Kids With Eczema

Could Melatonin Improve Both Sleep and Skin in Atopic Dermatitis?

Posted on November 23, 2015



— Prof. Chiang

MedicalResearch.com Interview with: Prof. Bor-Luen Chiang

Vice Superintendent, National Taiwan University Hospital
Professor of Graduate Institute of Clinical Medicine and Pediatrics
National Taiwan University
Attending Physician, Department of Medical research
National Taiwan University Hospital and

Yung-Sen Chang, MD MPH

Attending physician, Department of Pediatrics,
Taipei City Hospital Renai Br.

Medscape PEDIATRICS

MedPulse

Top Stories

Melatonin For Kids With Atopic Dermatitis?



1 in 10 Preschoolers Have Suicidal Thoughts, Behaviors

High Physical Activity Tied to Poor Asthma Control in Females

Europe Again Says HPV Vax Safe, but Petition in Spain

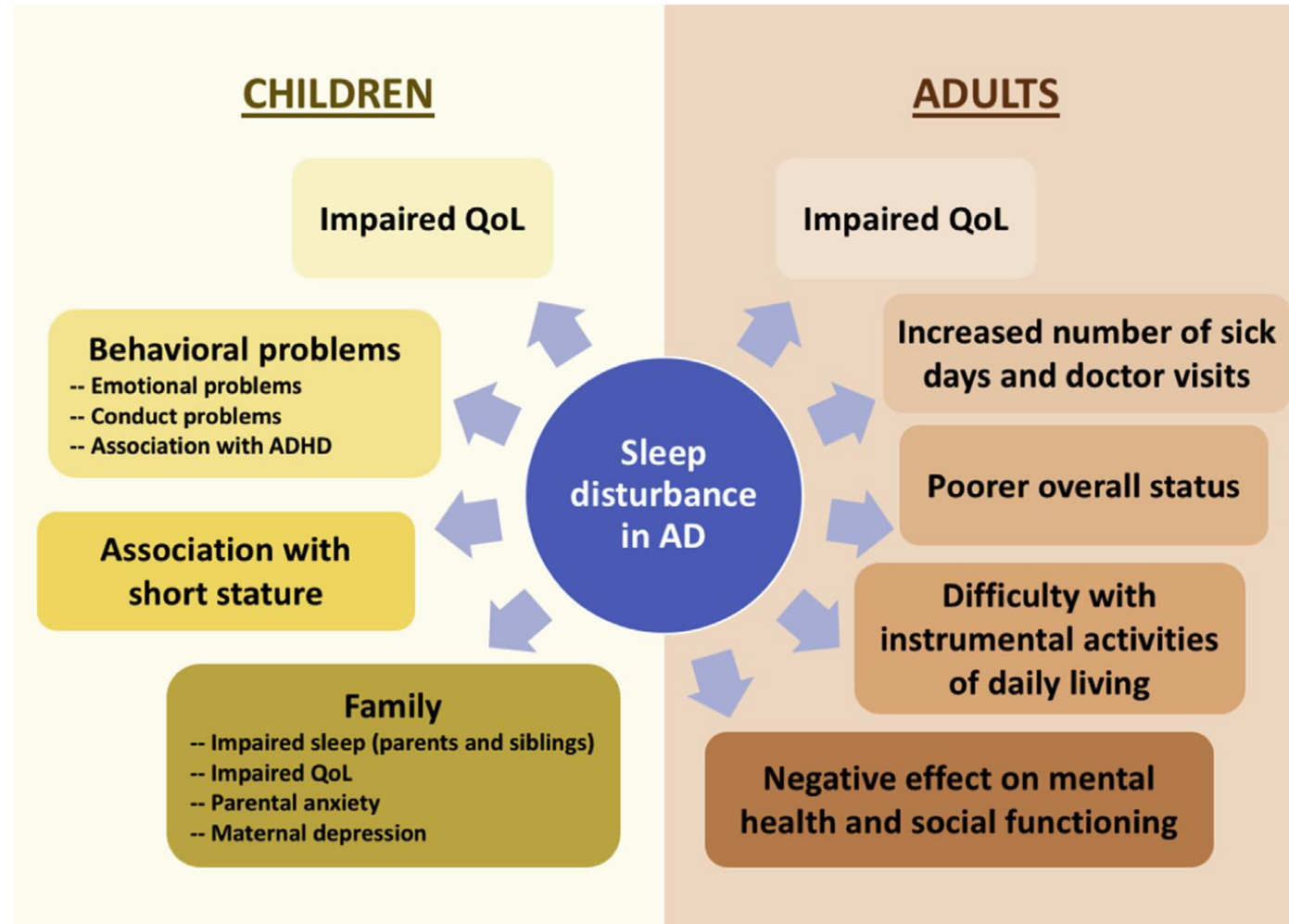


FIG 1. Effect of sleep disorders in patients with AD. Sleep disorders have a wide range of effects on both children and adults with AD. *ADHD*, Attention deficit hyperactivity disorder; *QoL*, quality of life.

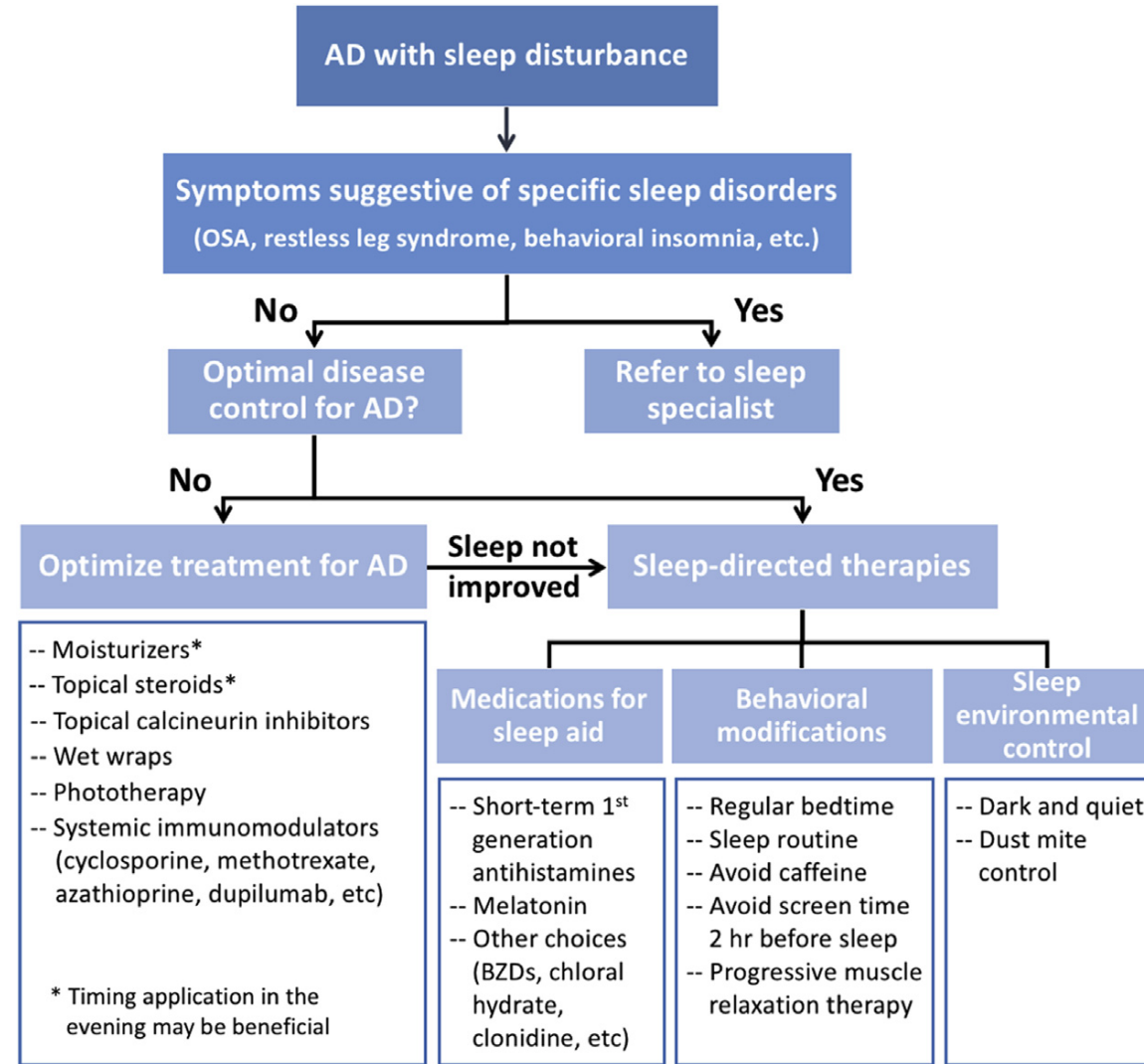
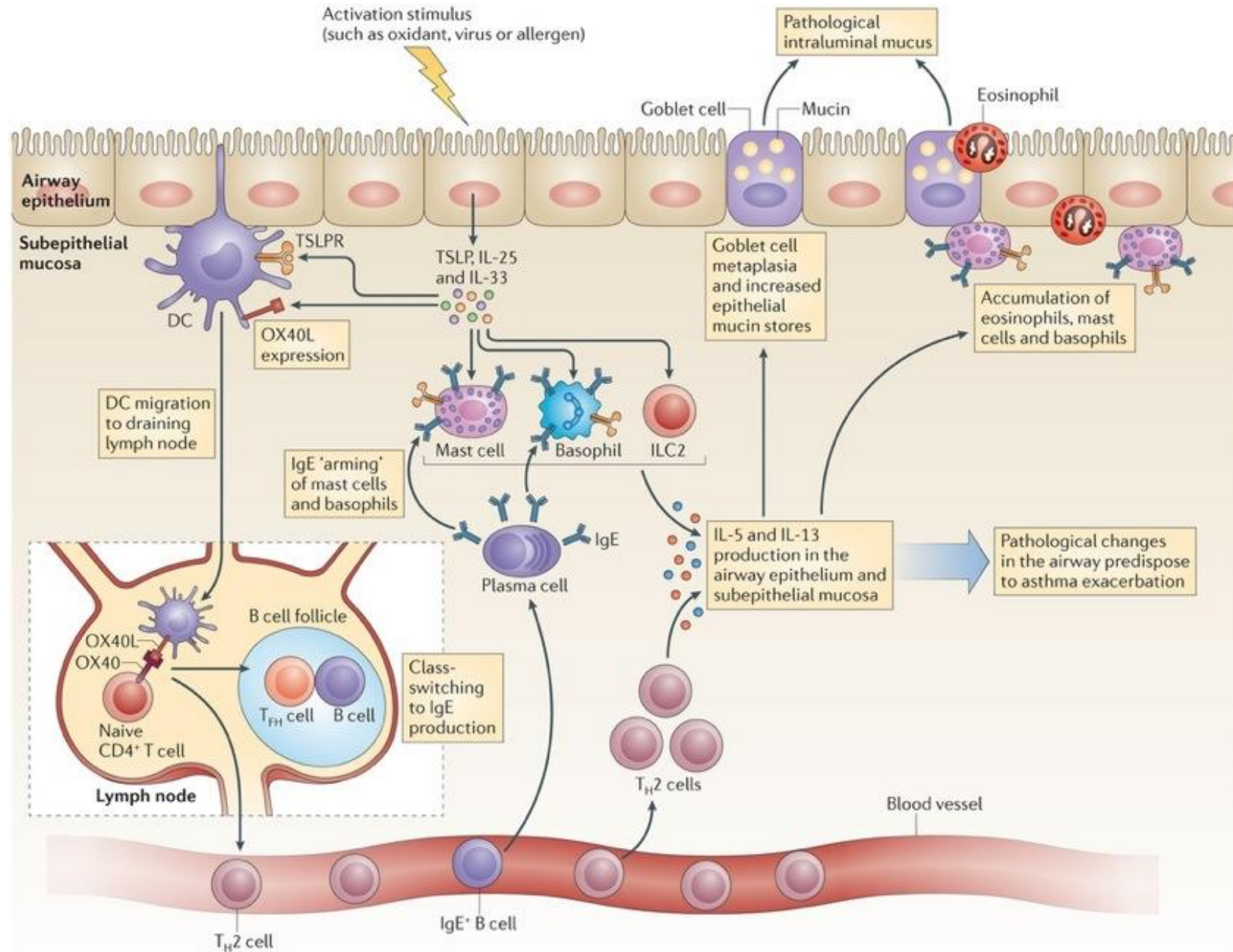


FIG 3. Proposed treatment strategy for sleep disorders in patients with AD. Patients with AD with sleep disturbance should first be screened for specific sleep disorders. Because of the intertwining relationship between sleep disorders and AD, management should be focused on both disease control and strategies to improve sleep. *BZDs*, Benzodiazepines.

- **Henoch-Scholien Purpura**
- **Allergic rhinoconjunctivitis**
- **Atopic dermatitis**
- **Asthma and Immune Regulation**

The pathogenesis of allergic asthma



Immunotherapy

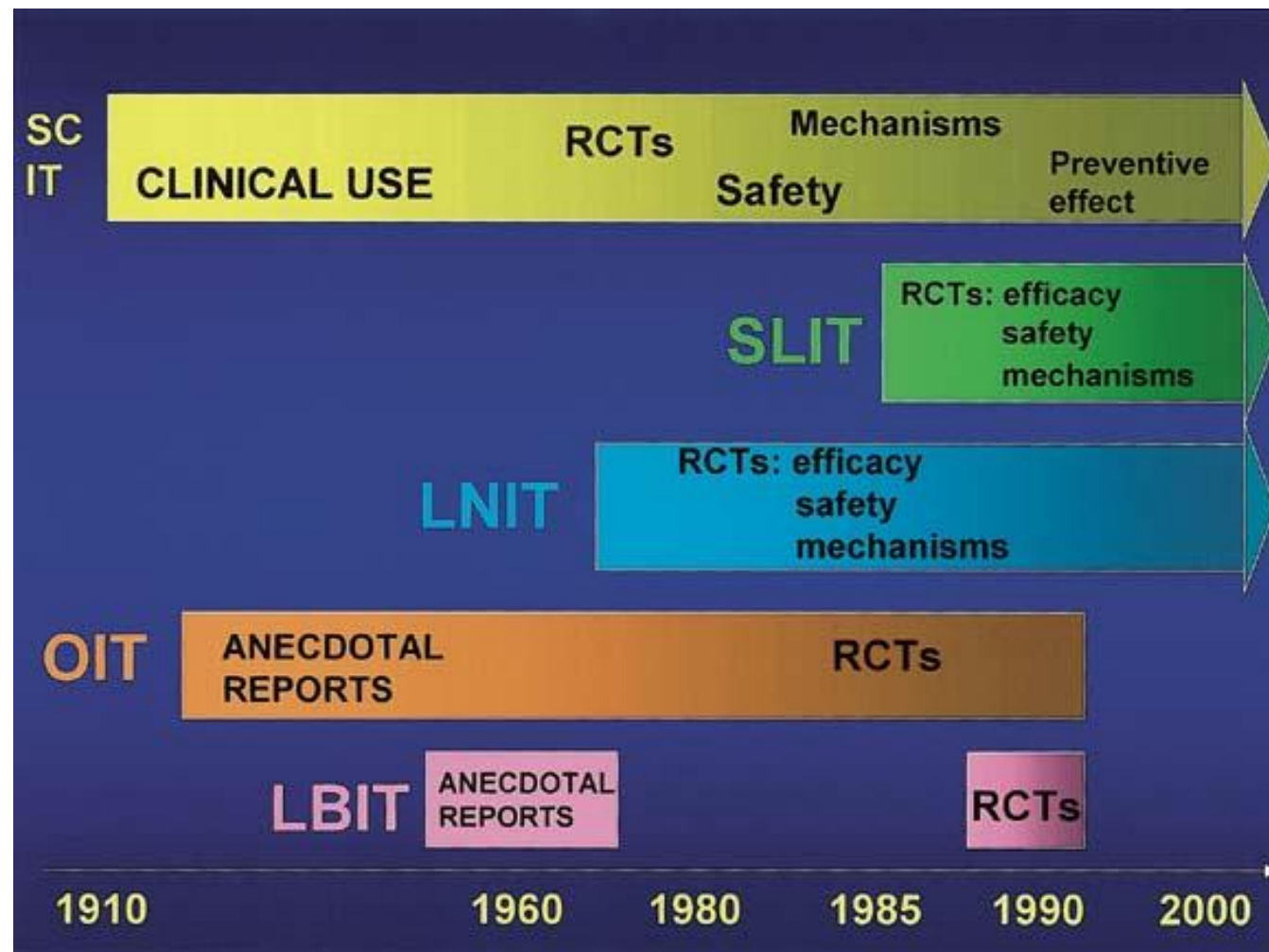
Subcutaneous

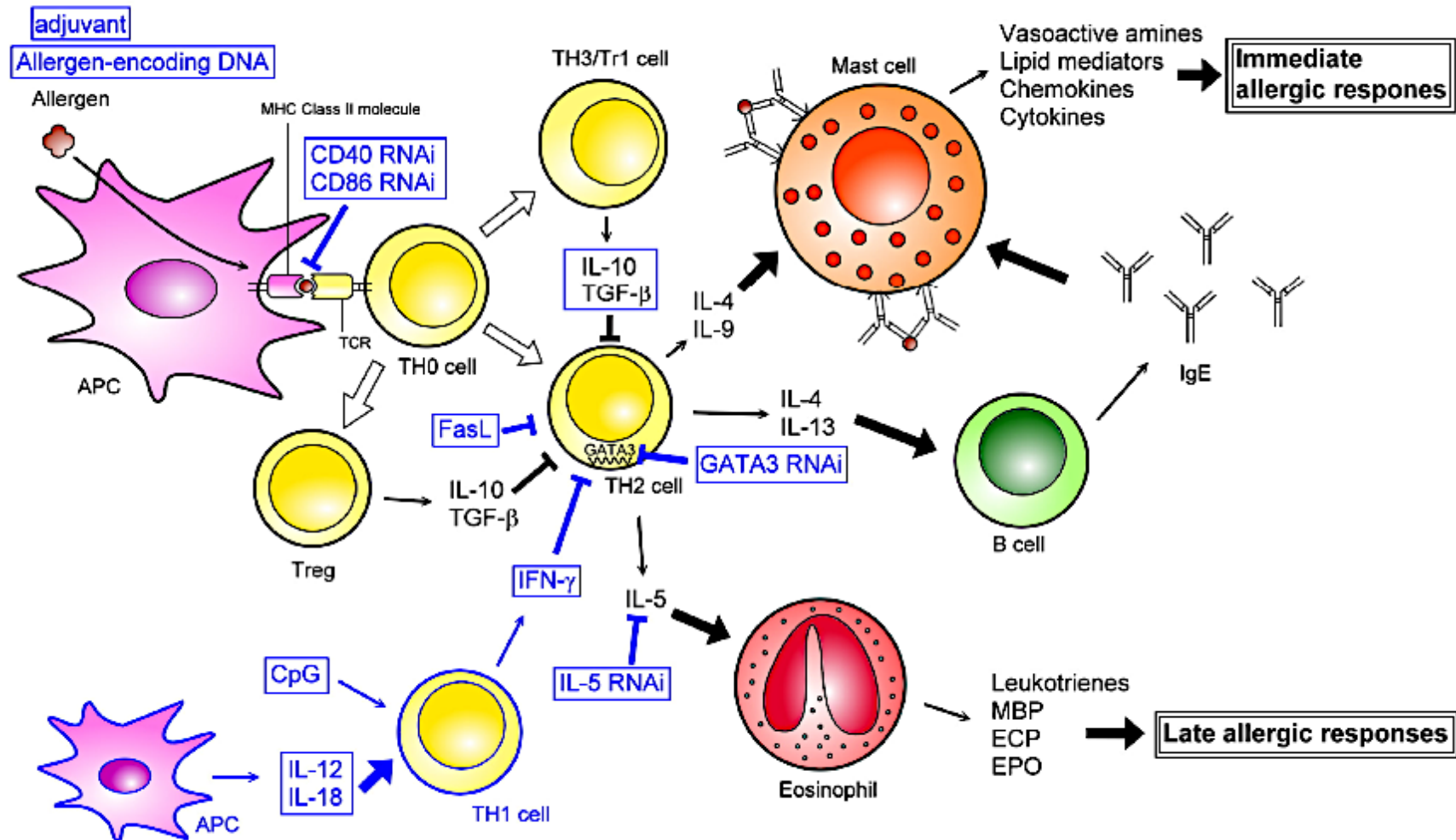
Sublingual

Local nasal

Oral

Local bronchial





Chuang Y-H et al. Gene therapy for allergic diseases. Curr Gene Ther 2009; 9:185-191.

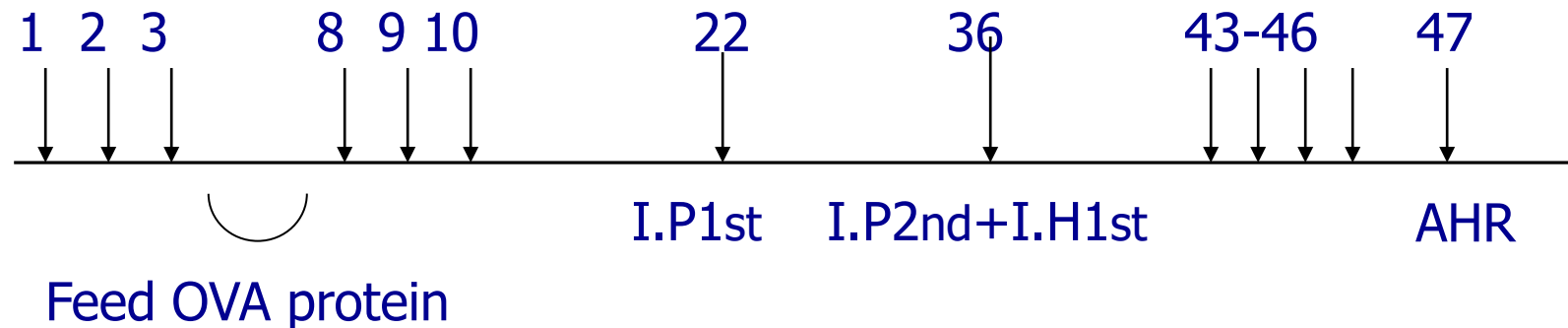
基因療法相關論文

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- Chuang, Y.-H., et al. Dendritic cell expressing Fas ligand decreases antigen-specific T cells and airway inflammation in murine model of asthma. *J Mol Med* 2006; 84:595-603.
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- Fu C.-L., et al. Application of cytokine genes for the treatment of airway inflammation in animal model of asthma. *Respiratory Research* 2006; 7:72.
- Fu, C.-L. et al. Adenovirus-expressing IL-10 gene alleviates airway inflammation in animal model of asthma. *J Gene Med* 2006; 8: 1393-1399.
- Lee, C.-C., et al. Lentiviral mediated RNAi against GATA-3 decreases allergic airway inflammation and hyperresponsiveness. *Molecular Therapy* 2008; 16: 60-65.
- Huang, H.-Y., et al. Specific inhibition of interleukin-5 by small interfering RNA(siRNA) to decrease the eosinophilia and airway inflammation in a murine model of asthma. *Gene Therapy* 2008; 15:660-667.
- Huang, H.-Y., et al. Small interfering RNA against eotaxin decrease airway eosinophilia and hyperresponsiveness. *J Gene Med* 2009; 11:112-118.
- Lee, C.-C., et al. Lentiviral mediated IL-4 and IL-13 RNAi decreases airway inflammation and hyperresponsiveness. *Human Gene Therapy* 2010.
- Tsai, B.-Y., et al. Lentiviral mediated Foxp-3 RNAi suppresses tumor growth of regulatory T cell-like leukemia in a murine tumor model. *Gene Therapy* 2010.

The effect of mucosal DNA vaccine in animal model of asthma

- Immunized and sensitized protocol:

feed chitosan nanoparticle with OVA plasmid



Feed: OVA plasmid 50 ug/mice/day

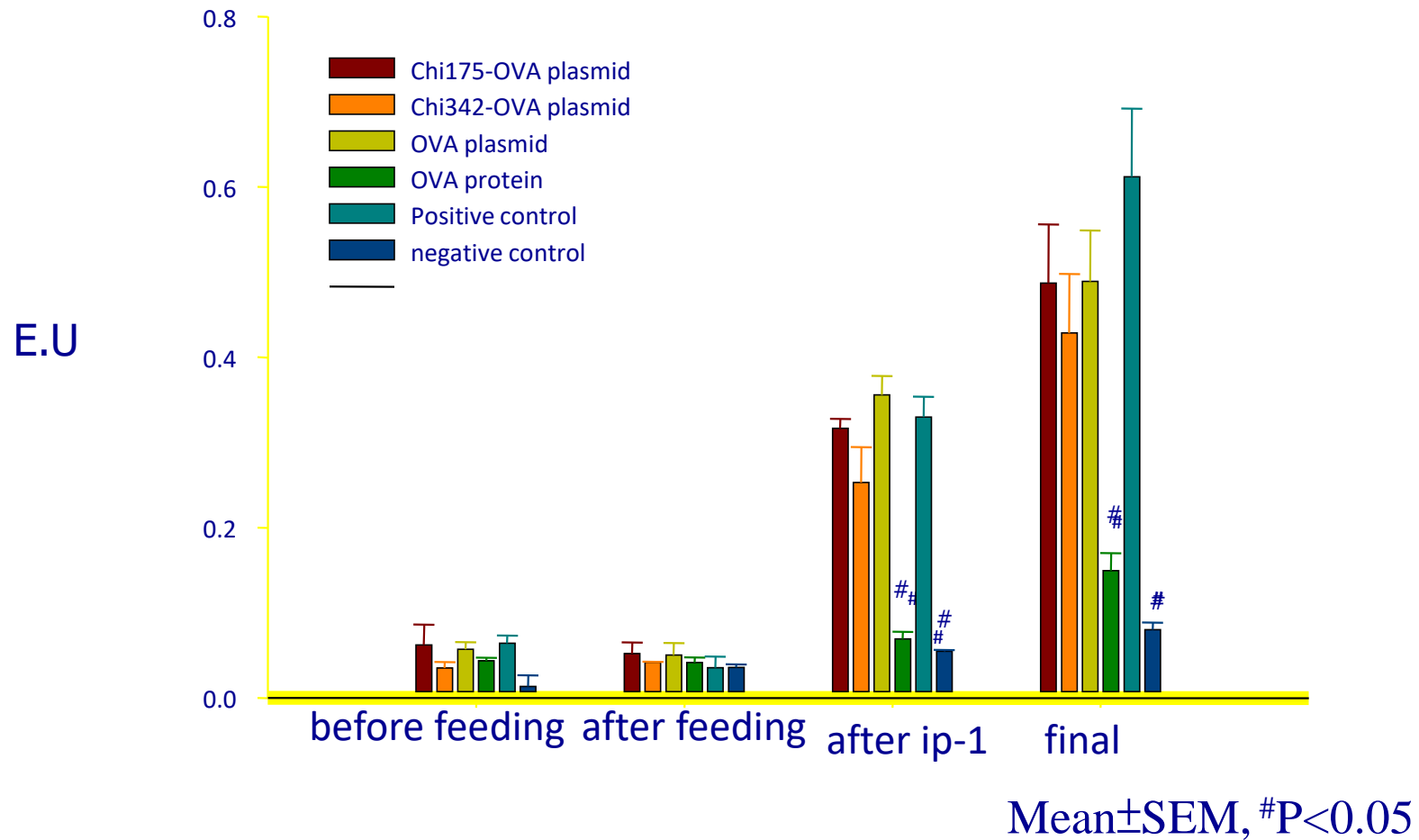
OVA protein 5 mg/mice/day

I.P: 1st-5 ug OVA with 2 mg Alum. in 200ul NS/mice

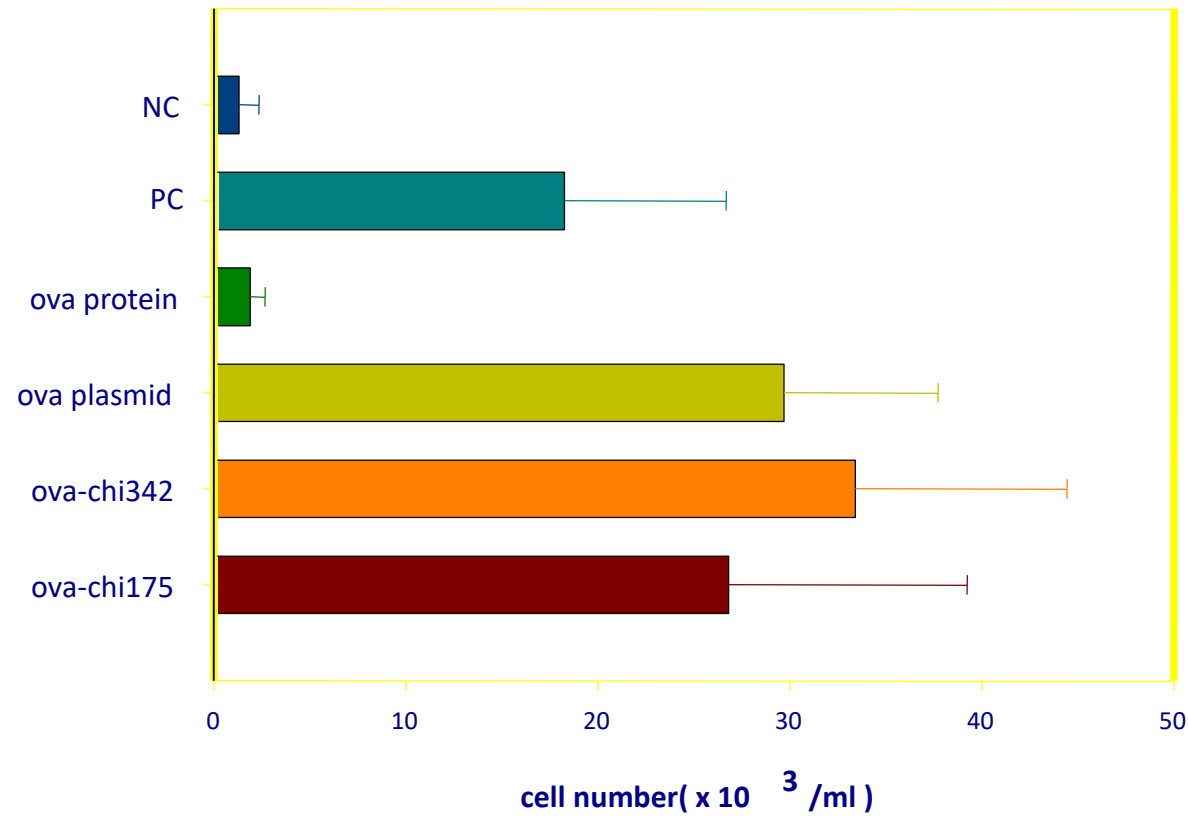
2nd-25 ug OVA with 2 mg Alum. In 200ul NS/mice

I.H: 2% OVA in NS

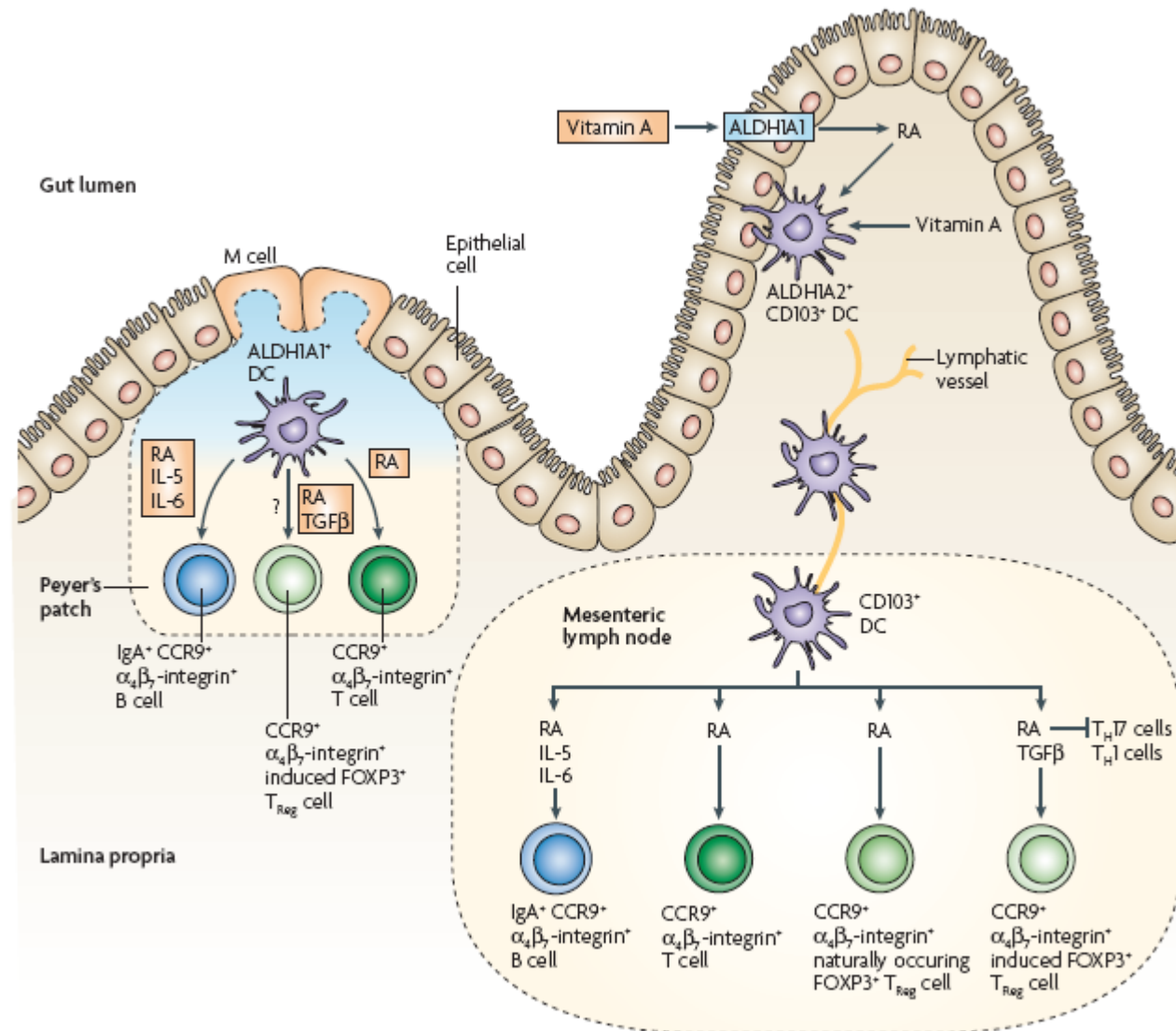
Serum OVA-specific IgE antibody



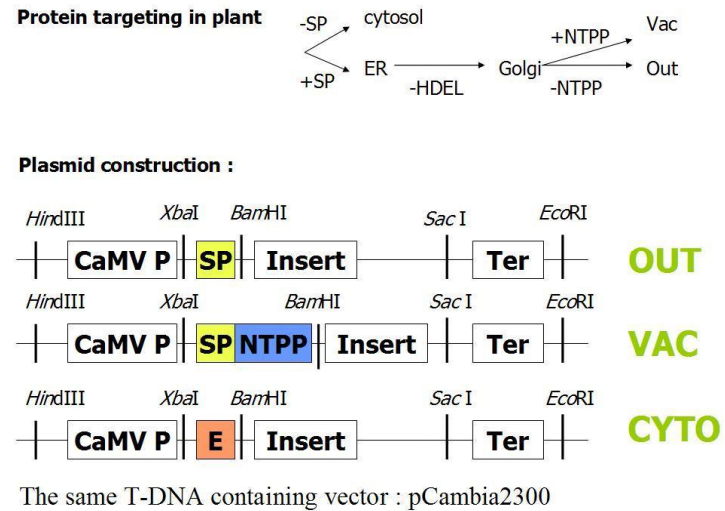
cell number of eosinophils in BALF



Oral tolerance and the mucosal immune system



(A)



(B)

Construct	Total #	Screened #	Positive clones #	Expression level(/100_g TP)
Cyto	96	68	17	388.5-575.66 ng
Out	51	48	1	233.45 ng
Vac	44	40	15	183.64-472.45 ng

Lee C-C et al. Oral delivery of mite allergen Derp2-transgenic plant alleviates airway inflammation in a murine model of asthma. Cell Mol Immunol 2011; 8:404-414.

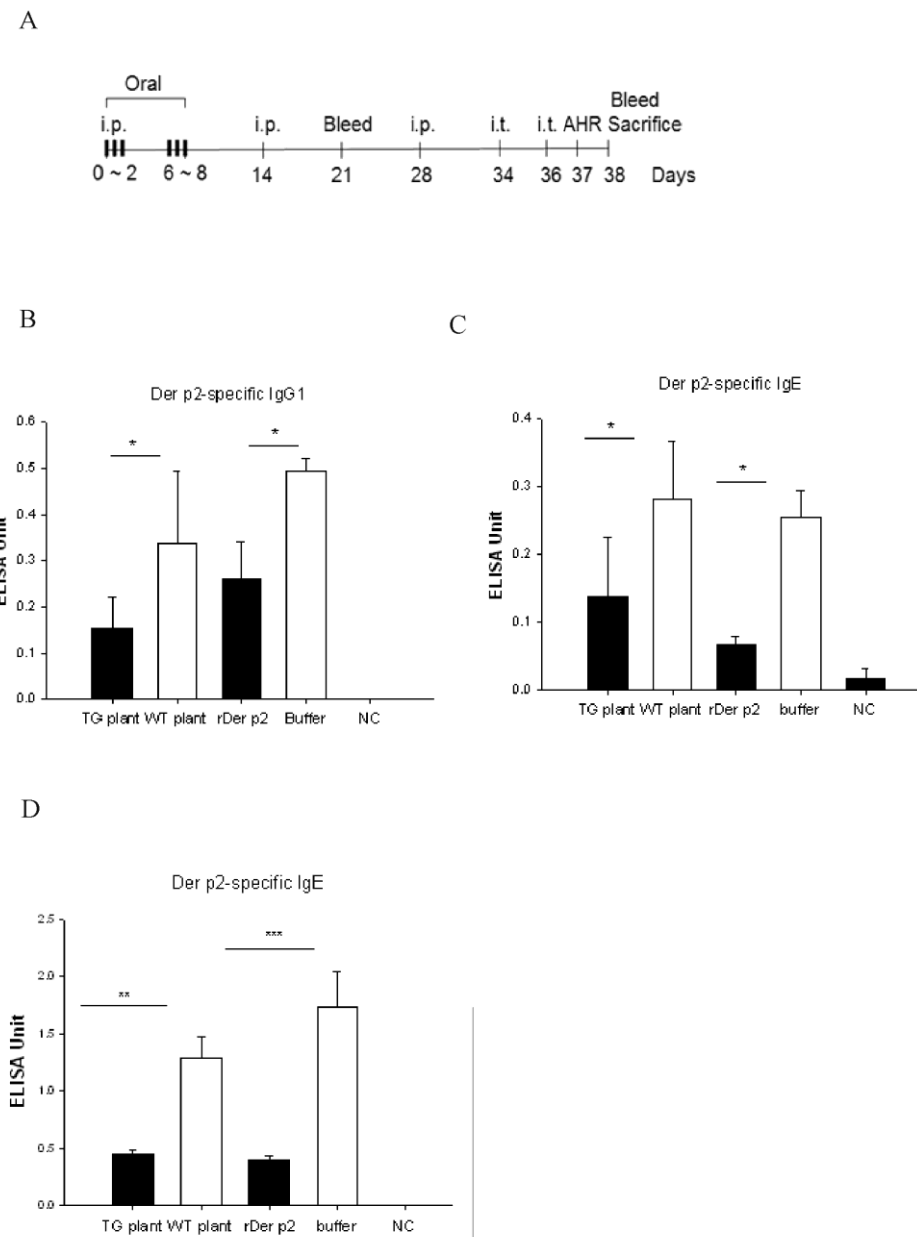


Figure 2

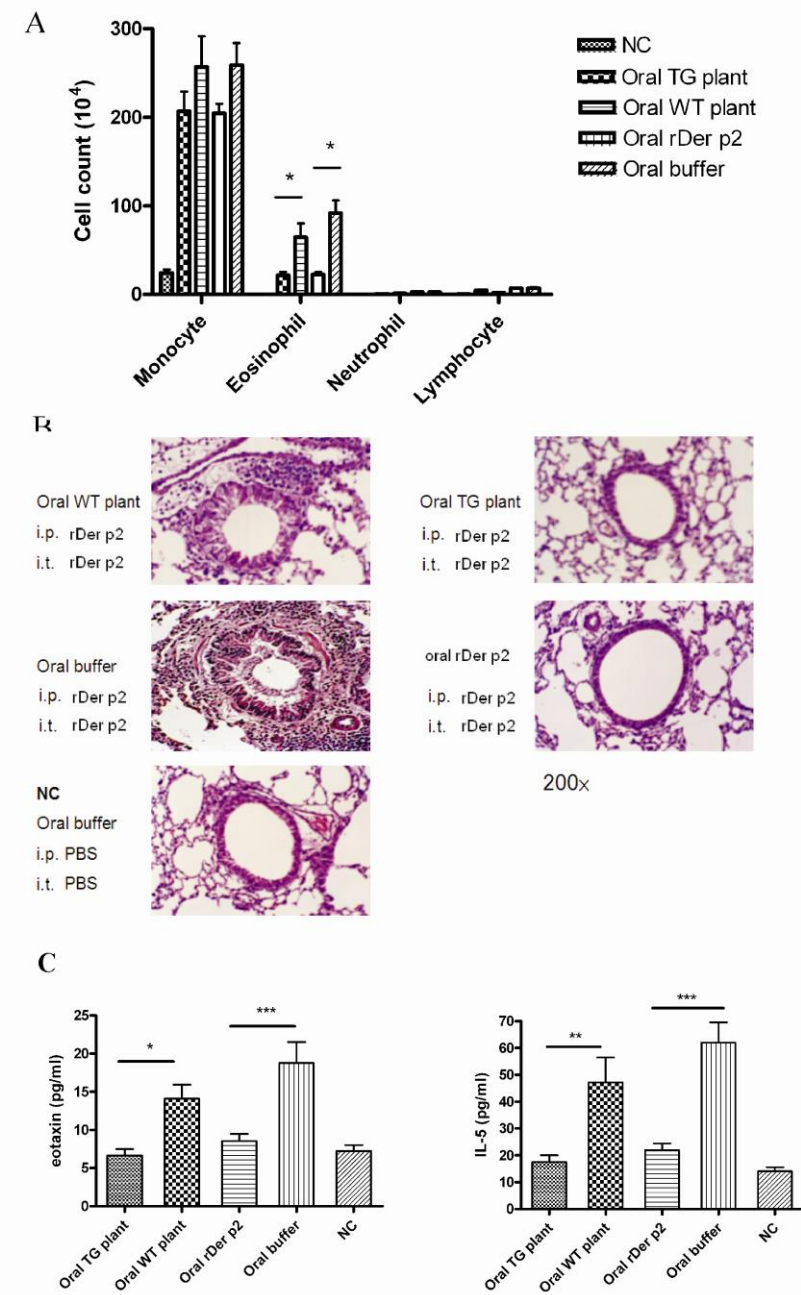
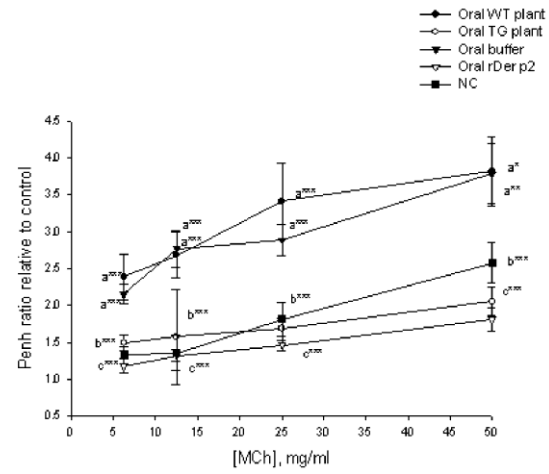
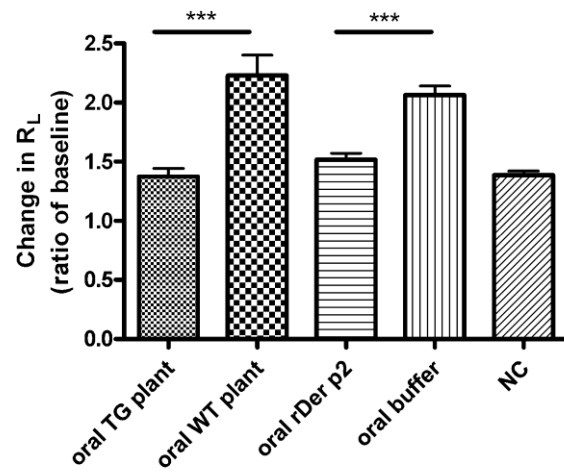


Figure 3

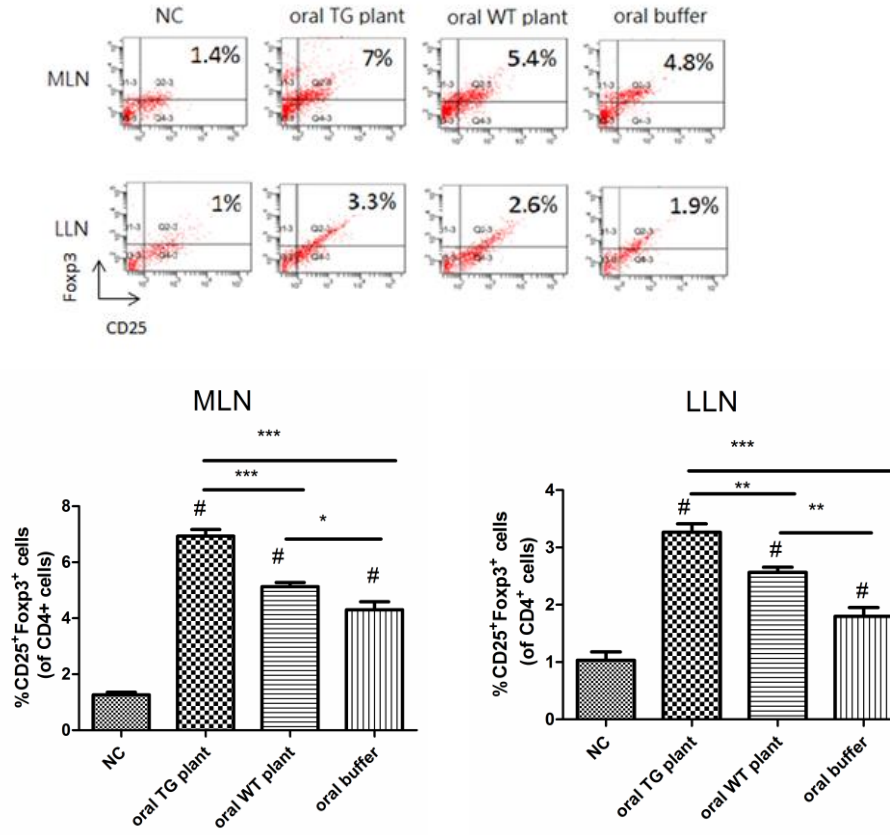
A



B



(a)



(b)

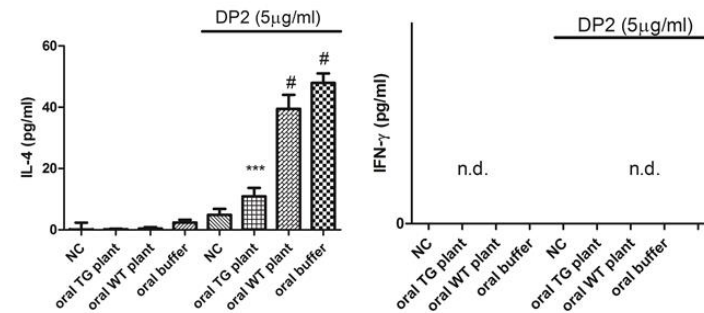


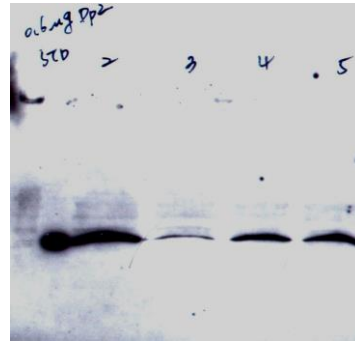
Figure 5

The protocol of Der p 2-transgenic tomato generation



Selected Der p 2-positive clone

total proteins extraction of leaves and Western blot confirmed by α -Der p 2 mAb

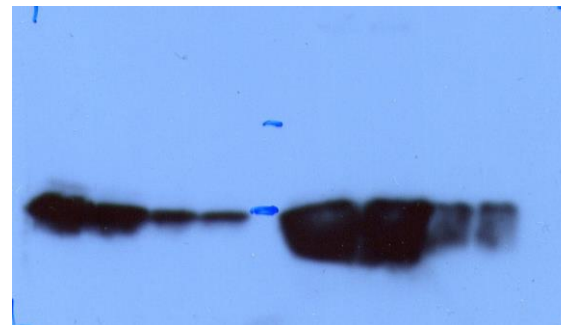


Grow onto soil



Der p 2-transgenic tomato was generated

yeast rDp2 Dp2-TG WT

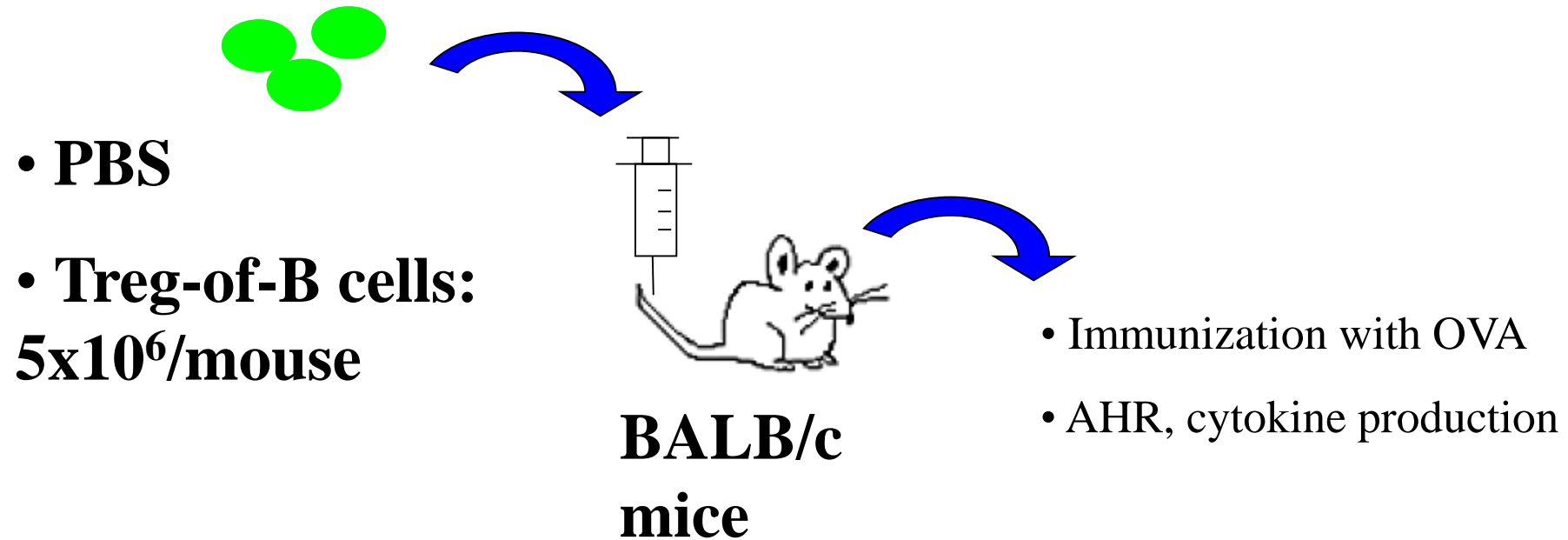


total proteins extraction of tomatoes and Western blot confirmed



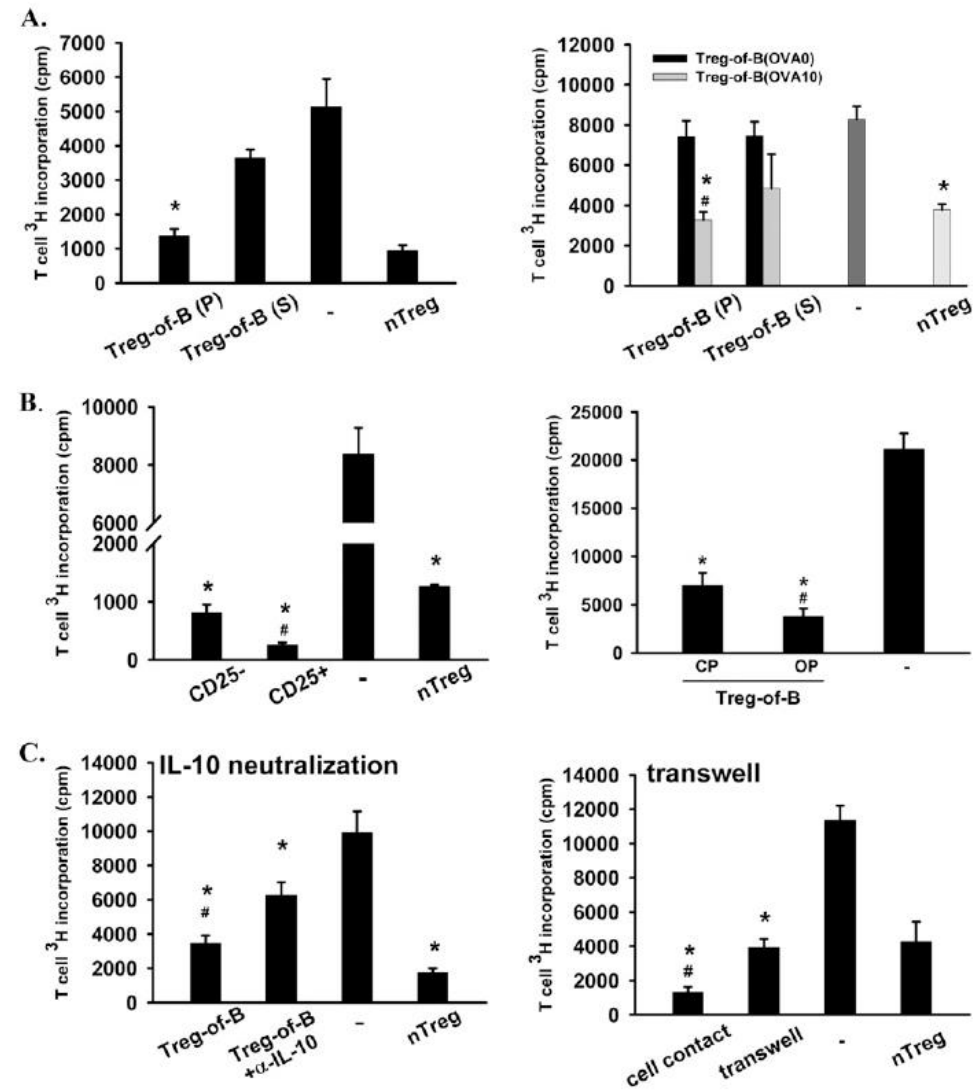
Tomatoes were harvested

Treg-of-B cells for the treatment of asthma

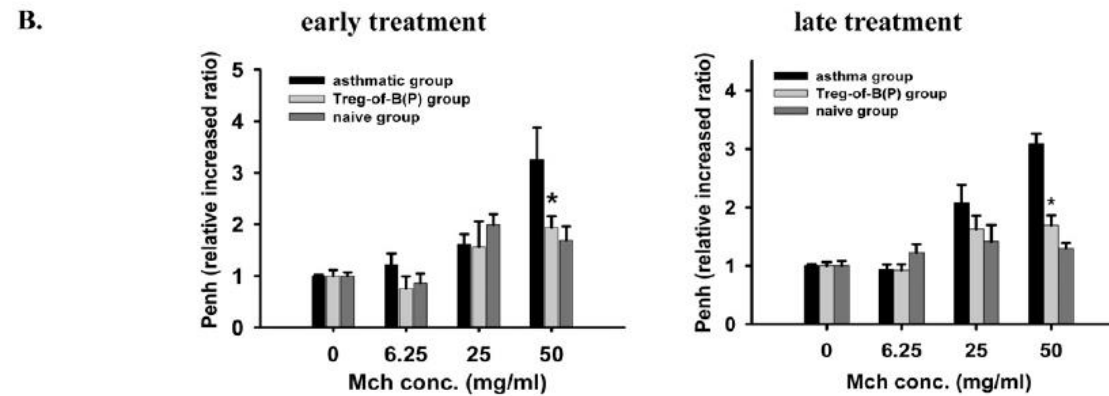
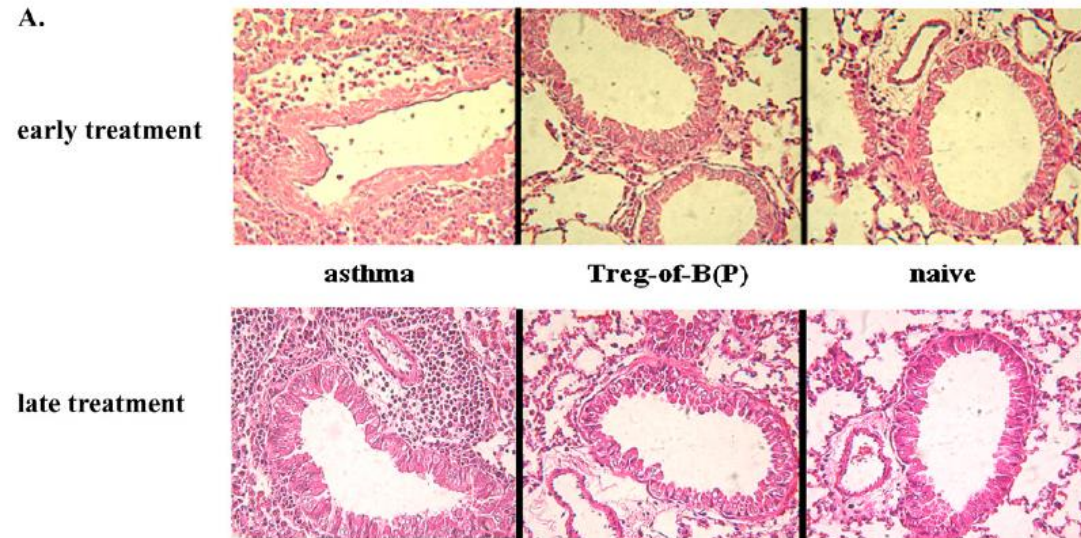


Chu K-H et al. Regulatory T cells induced by mucosal B cells alleviate airway inflammation and hyperresponsiveness in murine model of asthma. *Am J Respir Cell Mol Biol* 2012; 46:651-659.

Regulatory T cells induced by mucosal B cells



Adoptive transfer of Treg/B cells alleviated airway hyperresponsiveness and inflammation



Further characterisation of Treg/B cells

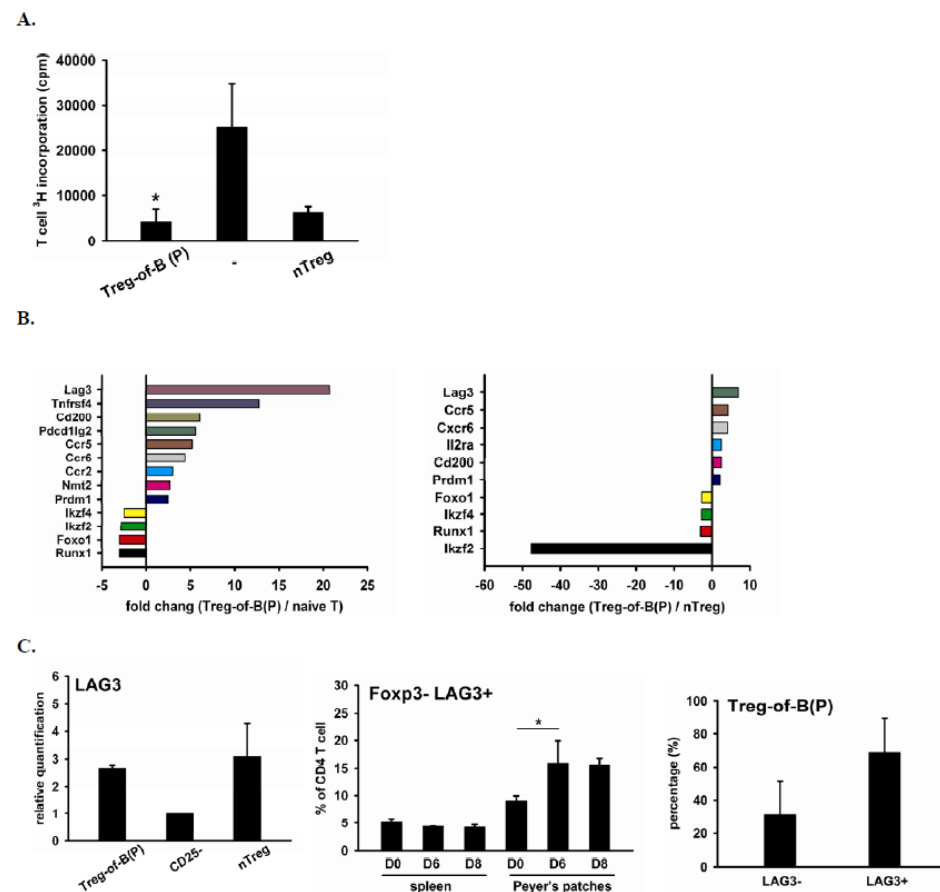
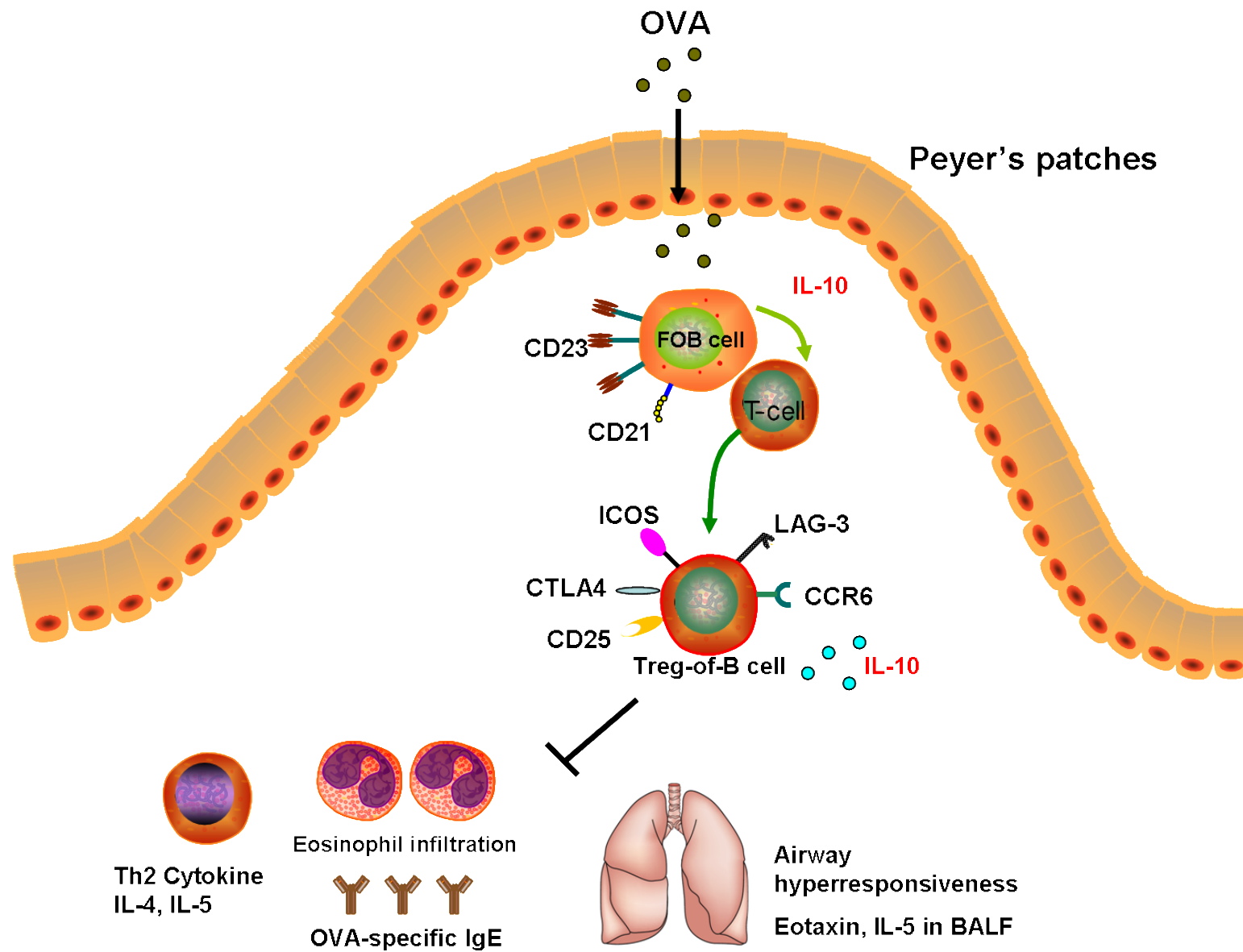
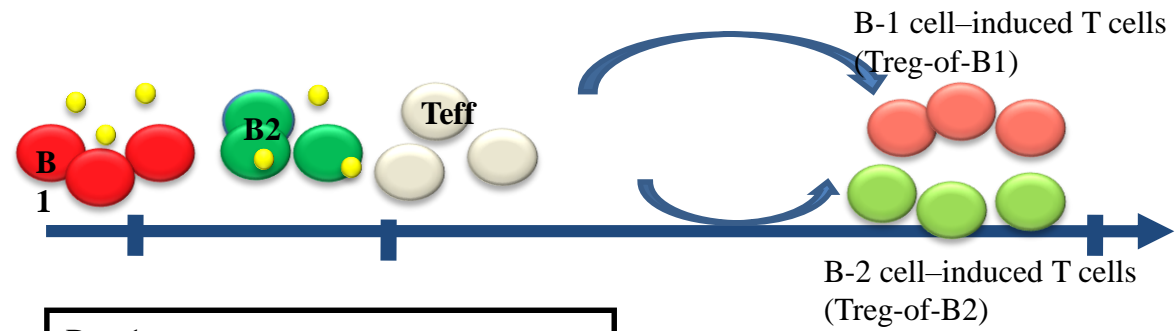


Figure 1. Treg-of-B (P) cells could express LAG3.

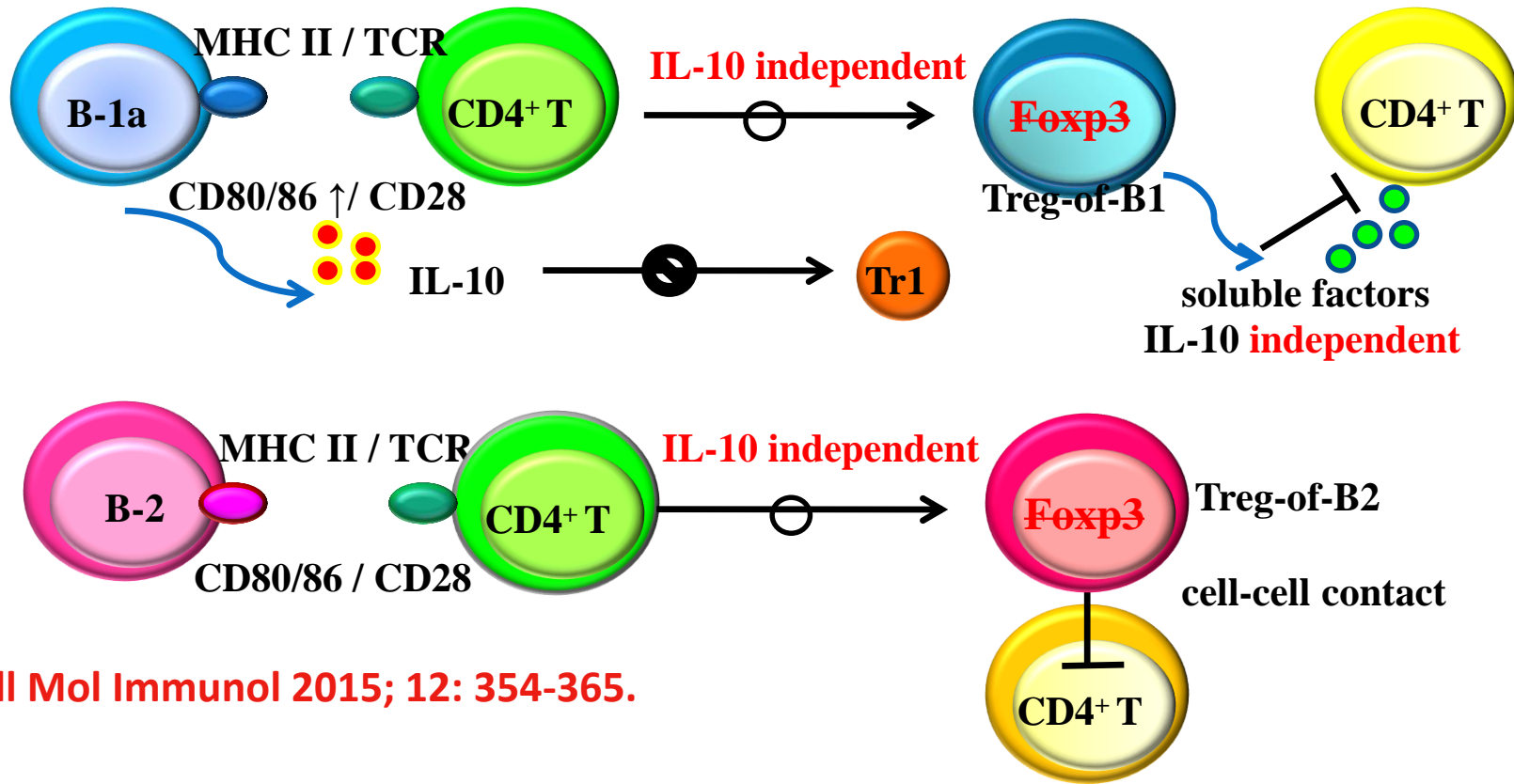
Chu K-H et al. LAG-3+ Foxp-3 - regulatory T cells induced by mucosal B cells alleviate airway inflammation and hyperresponsiveness in murine model of asthma. Clin Exp Immunol 180: 316-328.



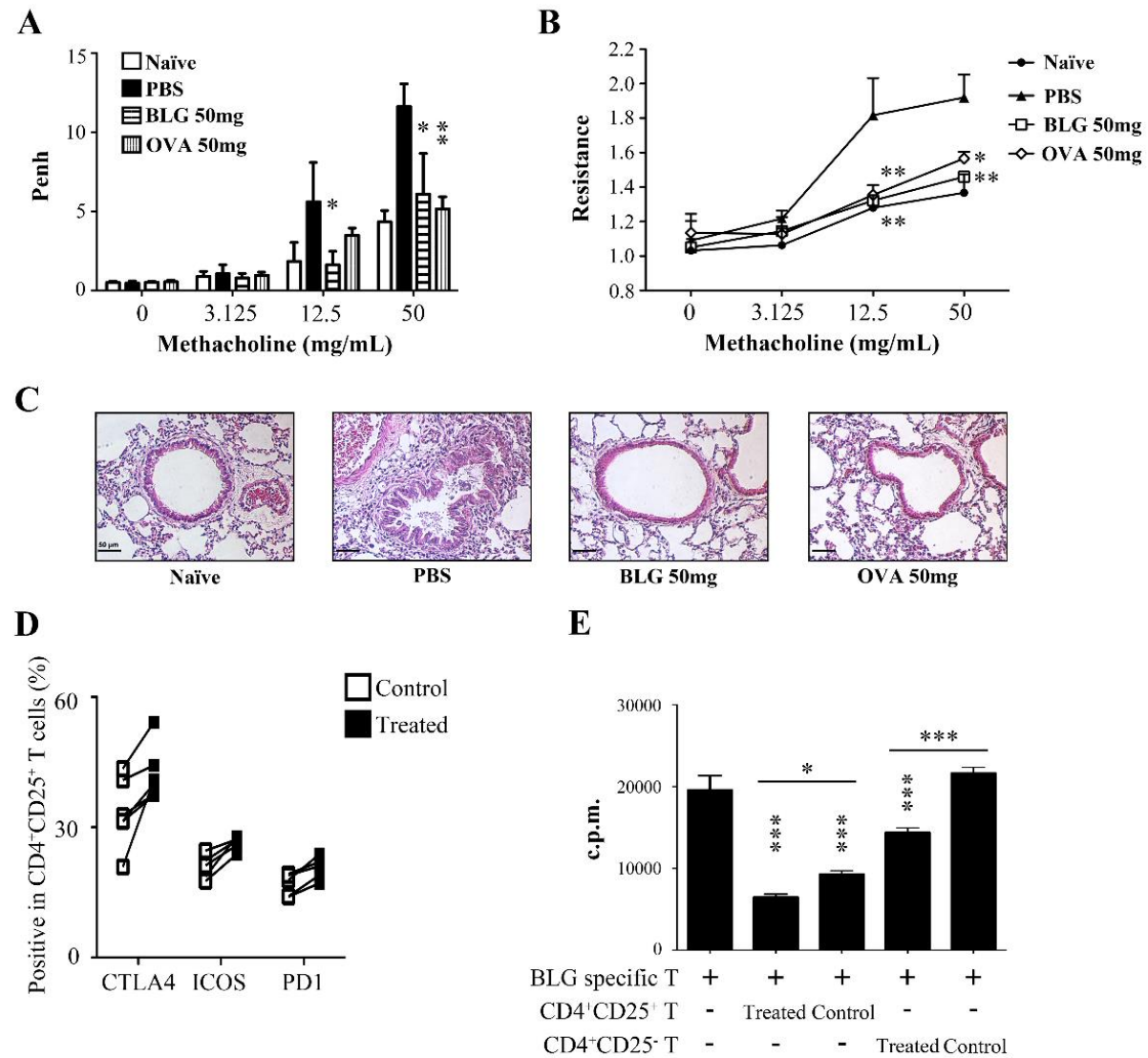


Day 1:
Add naïve $CD4^+CD25^-$ Teff cells and
co-cultured with B-1 and B-2 cells for 3
days.
Under α CD3/28 antibodies stimulation.

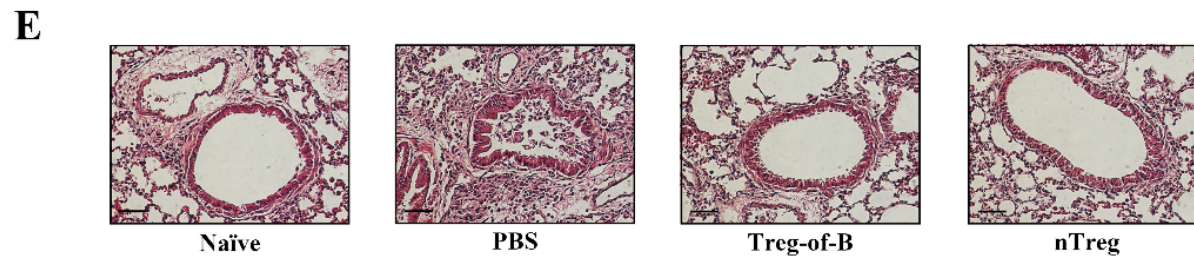
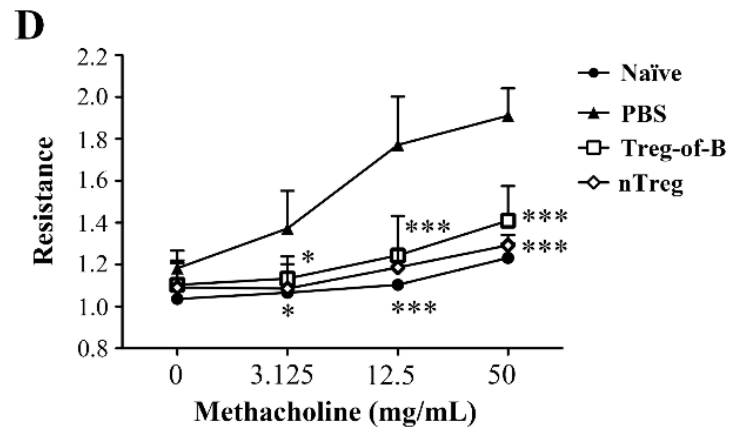
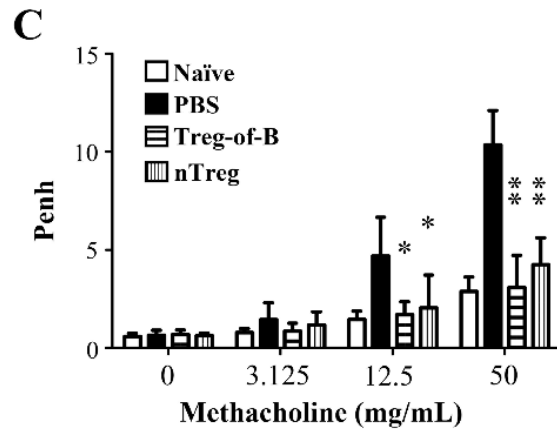
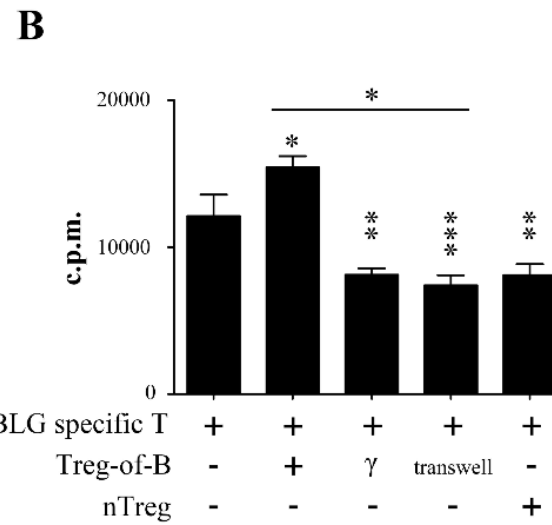
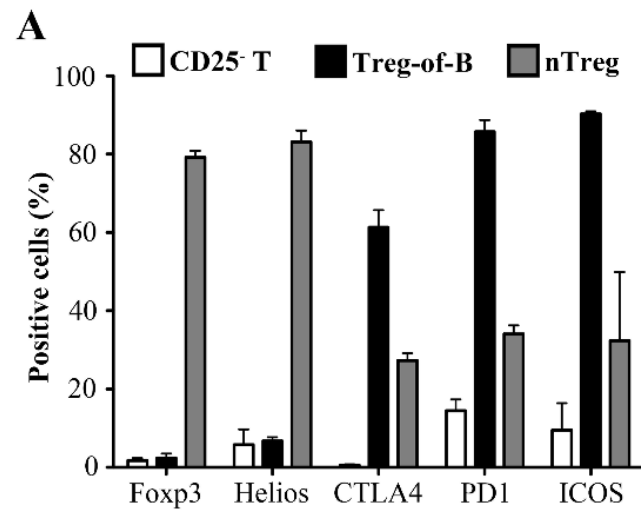
Day 4:
Purify Treg-of-B1/B2
cells from co-culture
system.



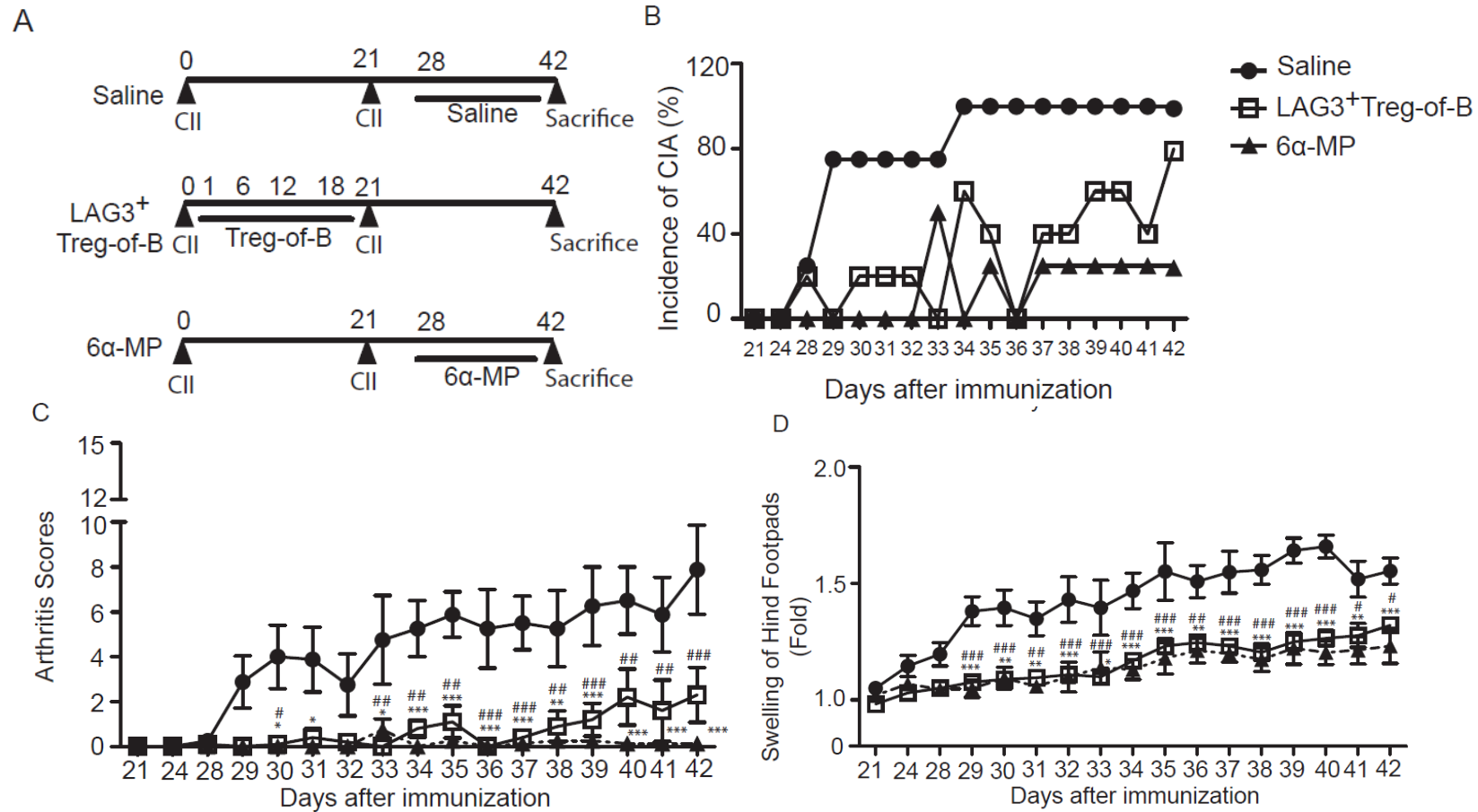
Hsu LH et al. Cell Mol Immunol 2015; 12: 354-365.



Chien C-H et al. Single allergen-induced oral tolerance inhibits airway inflammation in conjugated allergen immunized mice . J Allergy Clin Immunol 2015; 136:1110.

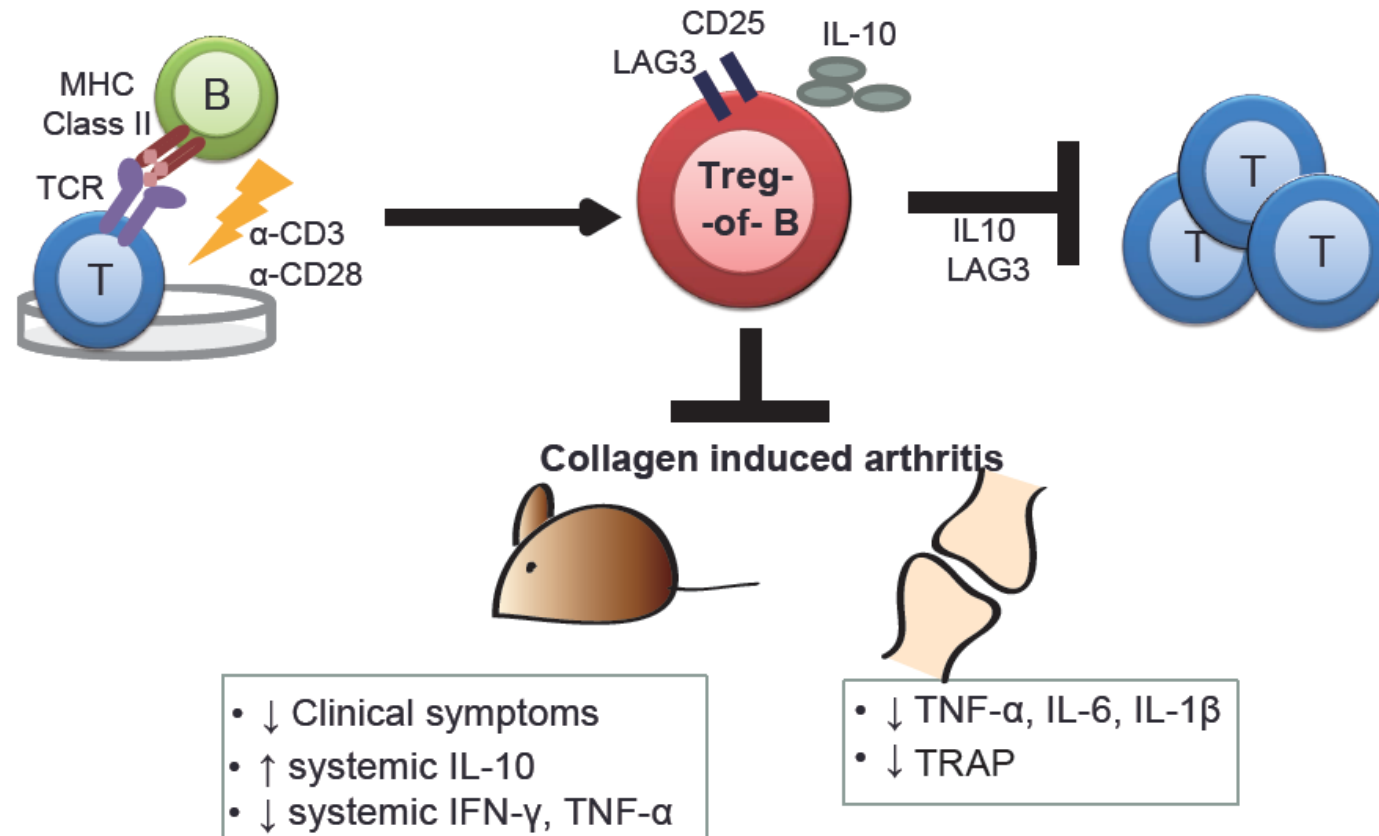


Treatment of LAG3⁺ Treg-of-B cells alleviated the severity of CIA



(A) Experimental protocol and groups. Briefly, mice were randomized to 3 groups including saline, LAG3⁺ Treg-of-B and 6α-MP. In the LAG3⁺ Treg-of-B group, mice were intravenously injected with LAG3⁺ Treg-of-B cells on day1, 6, 12 and 18 (n = 5–6). For saline and 6α-MP group, mice were intravenously given saline and 6α-MP from day 28 to day 41, respectively. (n = 5–6 per group). Evaluation of the incidence of disease (%) (B), arthritis scores (C), and thickness of hind footpads (fold change compared to baseline) (D) during day 21 to day 42. Data of a representative experiment (from 3 experiments performed) are shown (n = 5/group). Values are the means ± SEM. *P<0.05; **P<0.01; ***P<0.001 vs 6α-MP group. #P<0.05; ##P<0.01; ###P<0.001 vs LAG3⁺ Treg-of-B group.

The schematic illustration of LAG3⁺ Treg-of-B cells therapy in CIA model



The figure demonstrates that splenic B cells convert naïve T cells into LAG3⁺ Treg-of-B cells, and inhibit the proliferation of Tresp cells through the cooperation of LAG3 and IL-10. Adoptive transfer of LAG3⁺ Treg-of-B cells in mice ameliorates the inflammation and clinical severity of CIA.

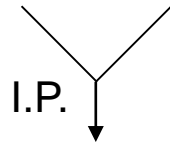
Chen S-Y et al. *J Autoimmunity* 2016; 68: 75.

Treg-of-B cells in inflammatory bowel disease

Shao TY et al. Novel Foxp-3- IL-10- regulatory T cells induced by B cells alleviate intestinal inflammation in vivo. Scientific Report 2016; 6: 32415.

Examine the suppressive function of Treg-of-B cells in IBD mouse

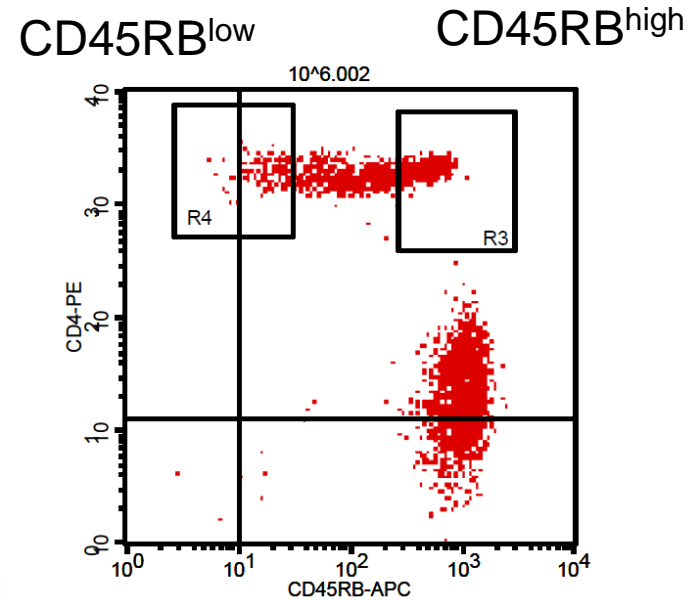
Anti-CD3/CD28 induced Treg-of-B cells



SCID mice: 6-8 weeks



Recording body weight every week



Both WT and IL-10 KO Treg/B alleviated inflammation

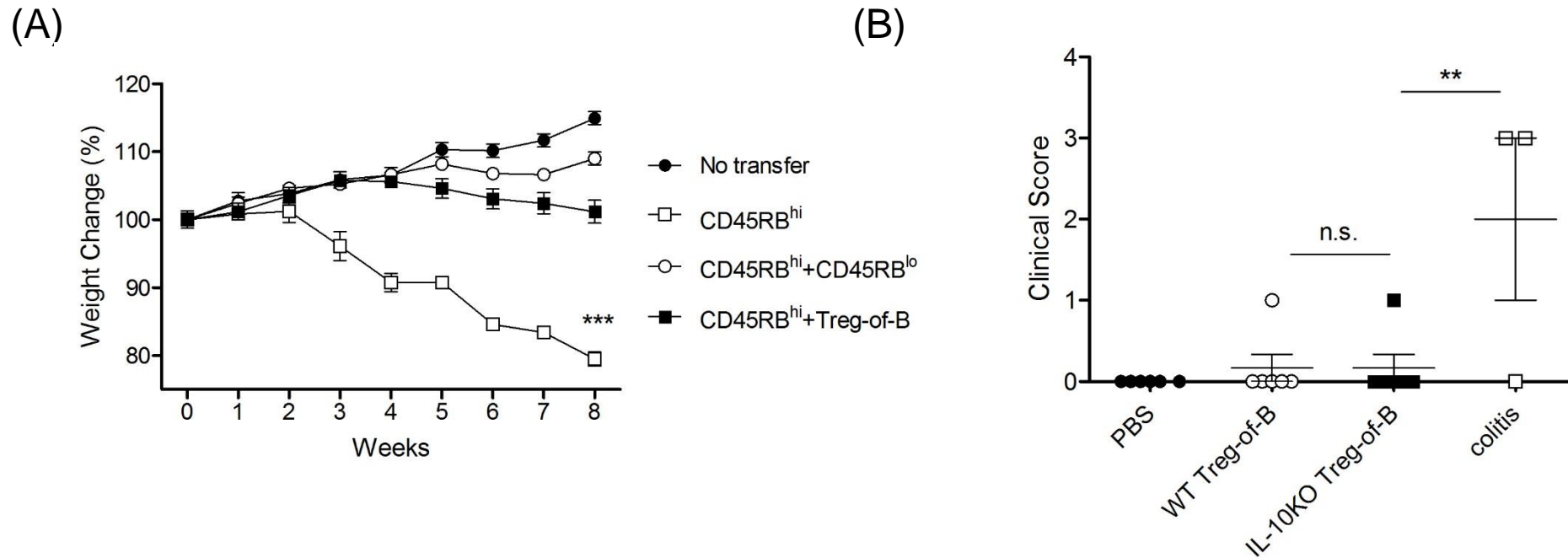


Figure 3. (A) Relative changes in body weight (%) over time for colitis-induced mice. (B) Clinical Scores were measured after eight weeks.

Histological scores

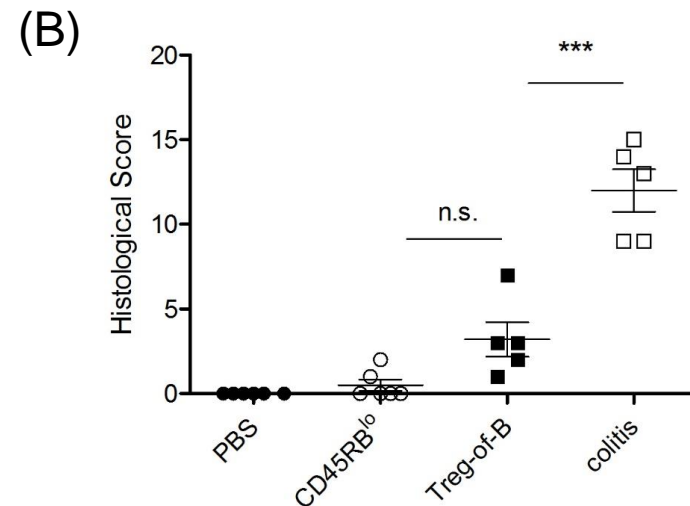
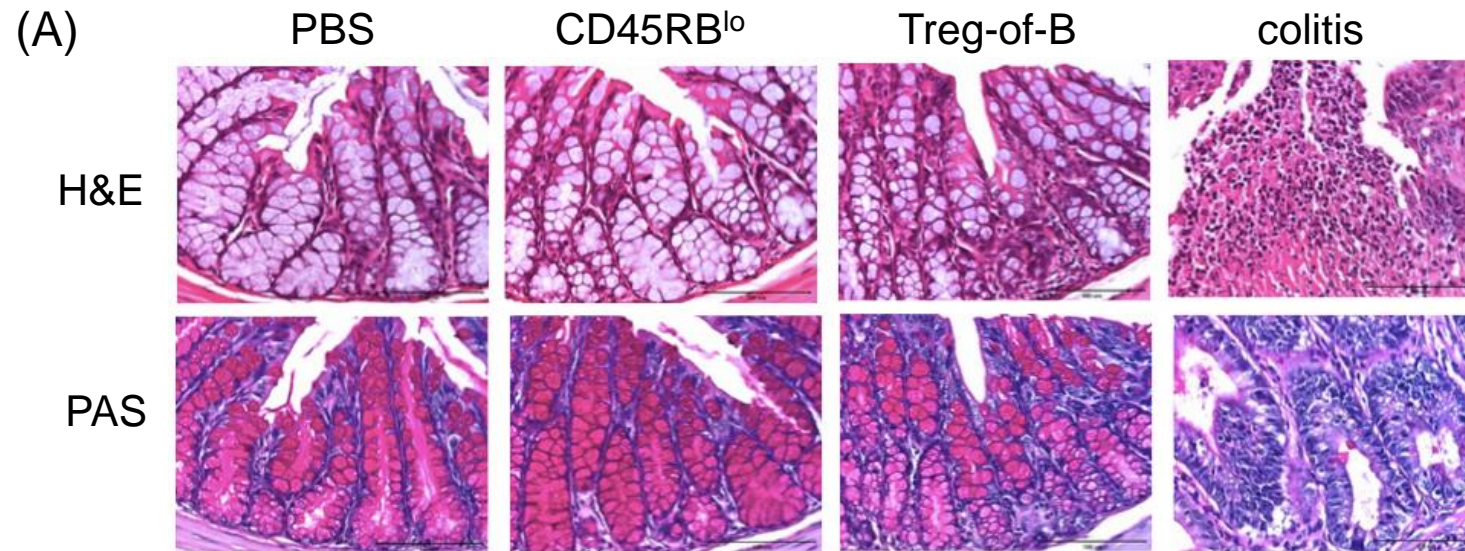
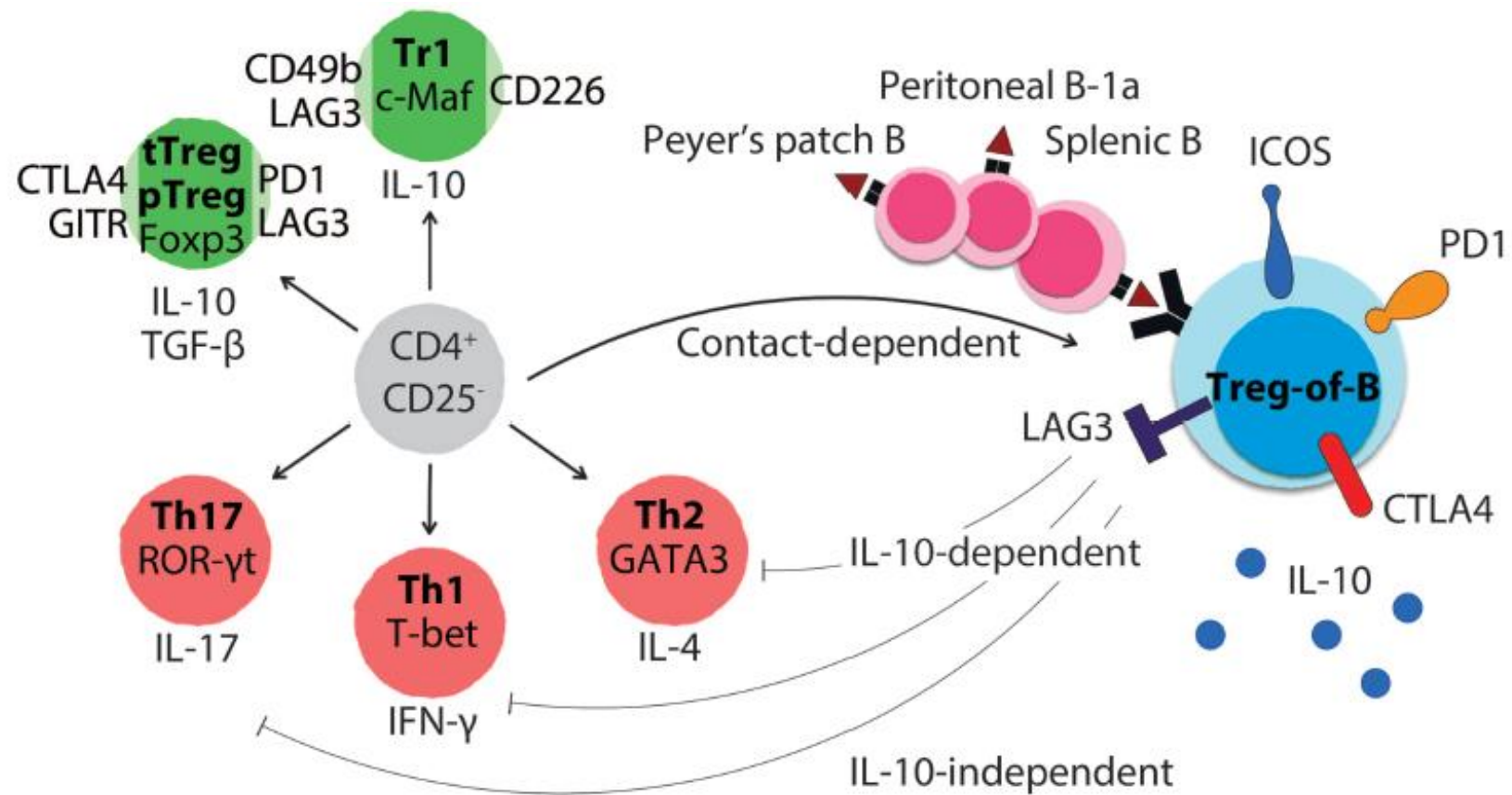
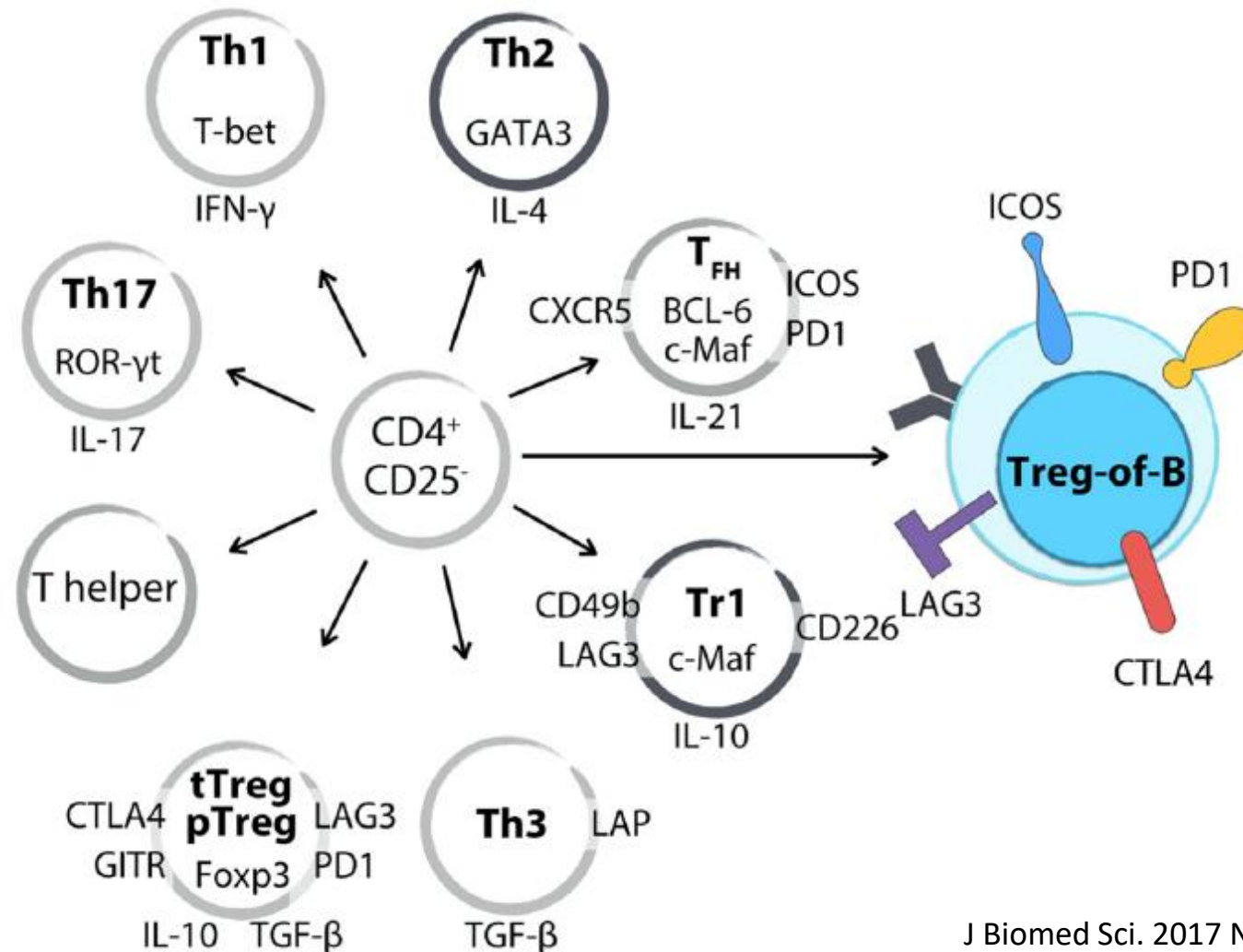


Figure 4. (A) Section of colon stained with H&E and PAS stain. (Scale bar, 100 μ M) (B) Histological scores were measured after eight weeks. (H&E stain, Hematoxylin and eosin stain; PAS stain, Periodic acid–Schiff stain.)

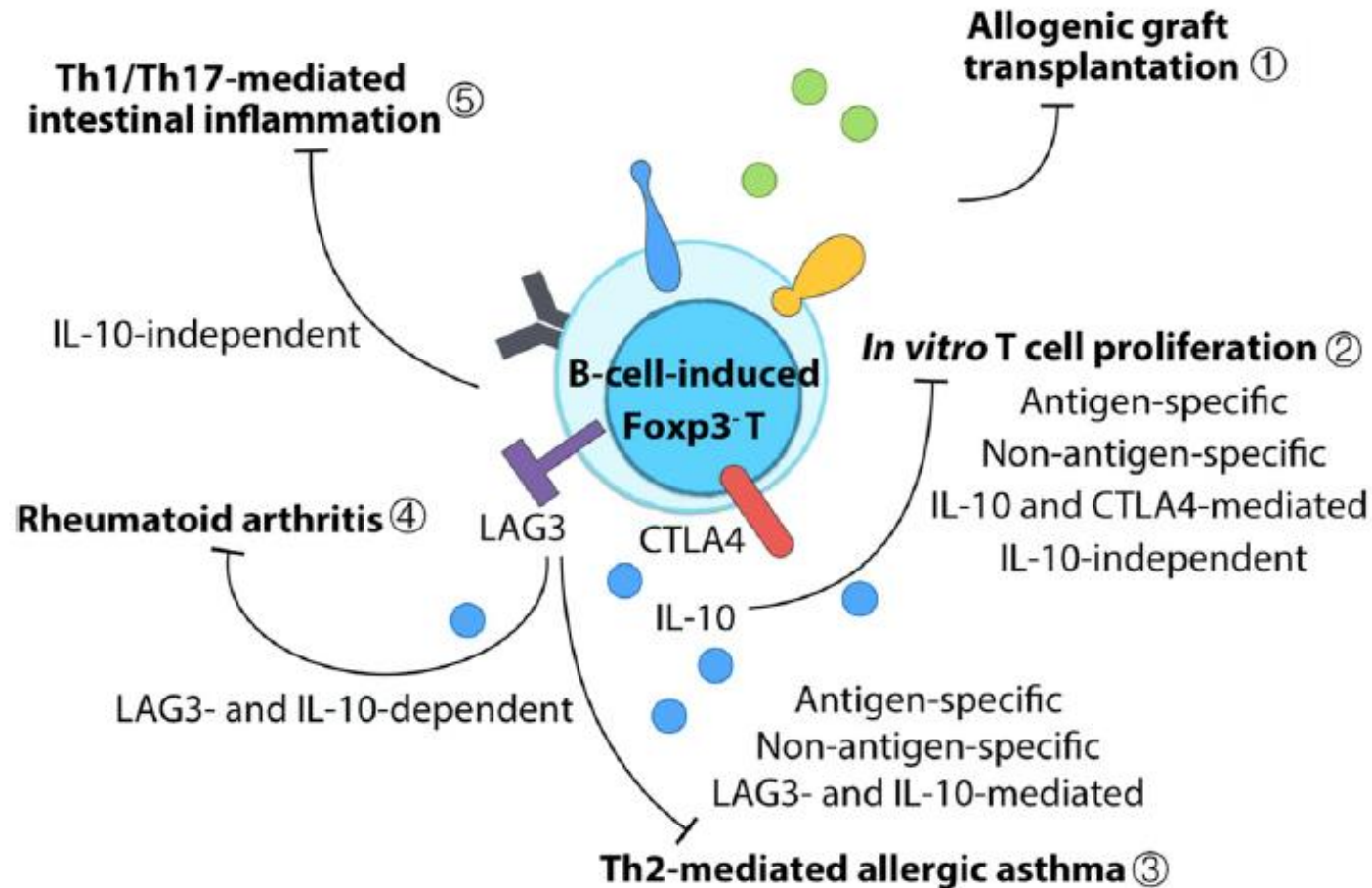
B-cell-induced CD4⁺Foxp3⁻ regulatory T cells

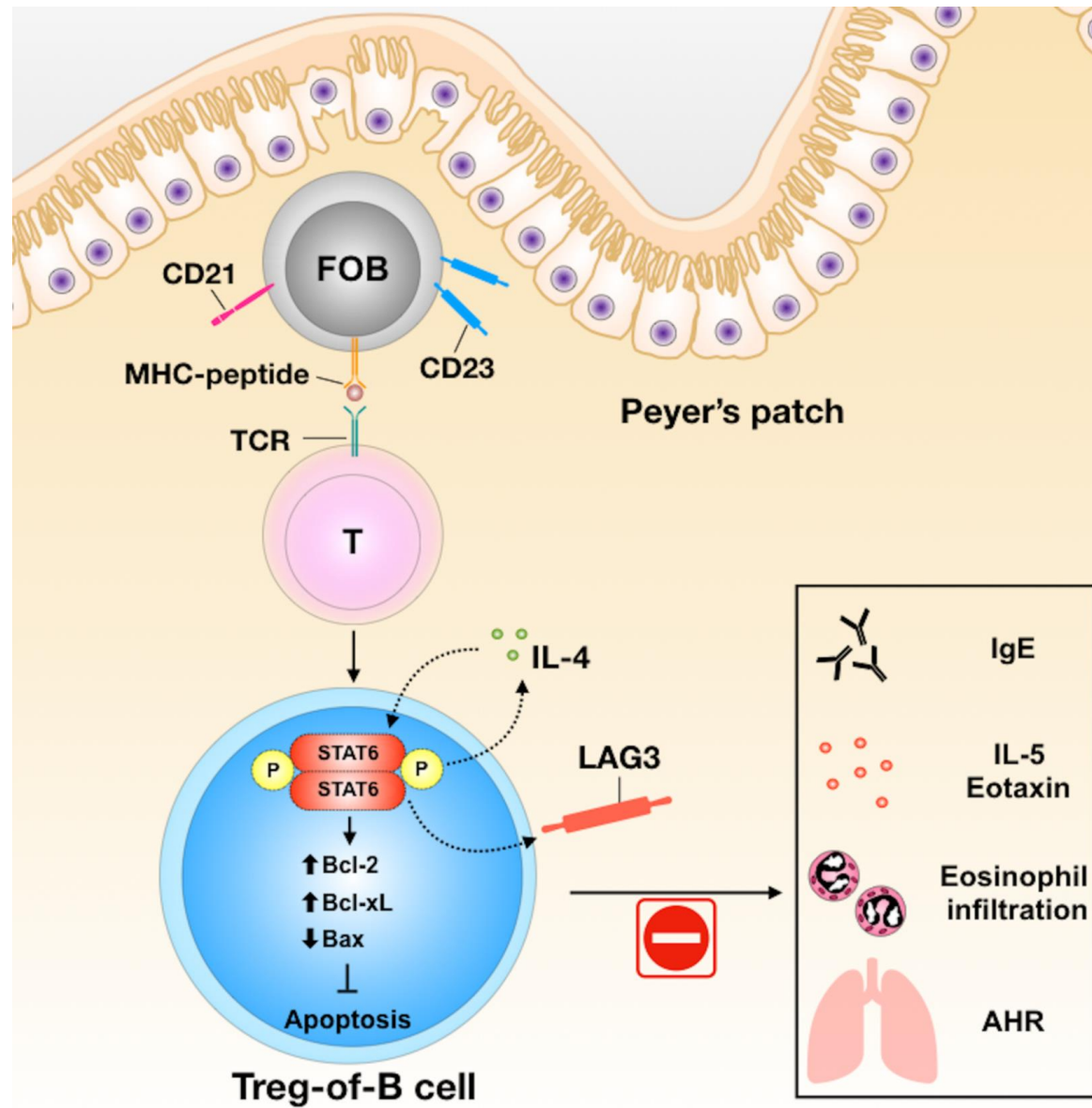


Treg-of-B cells differ from well-known regulatory T cells and T helper cells

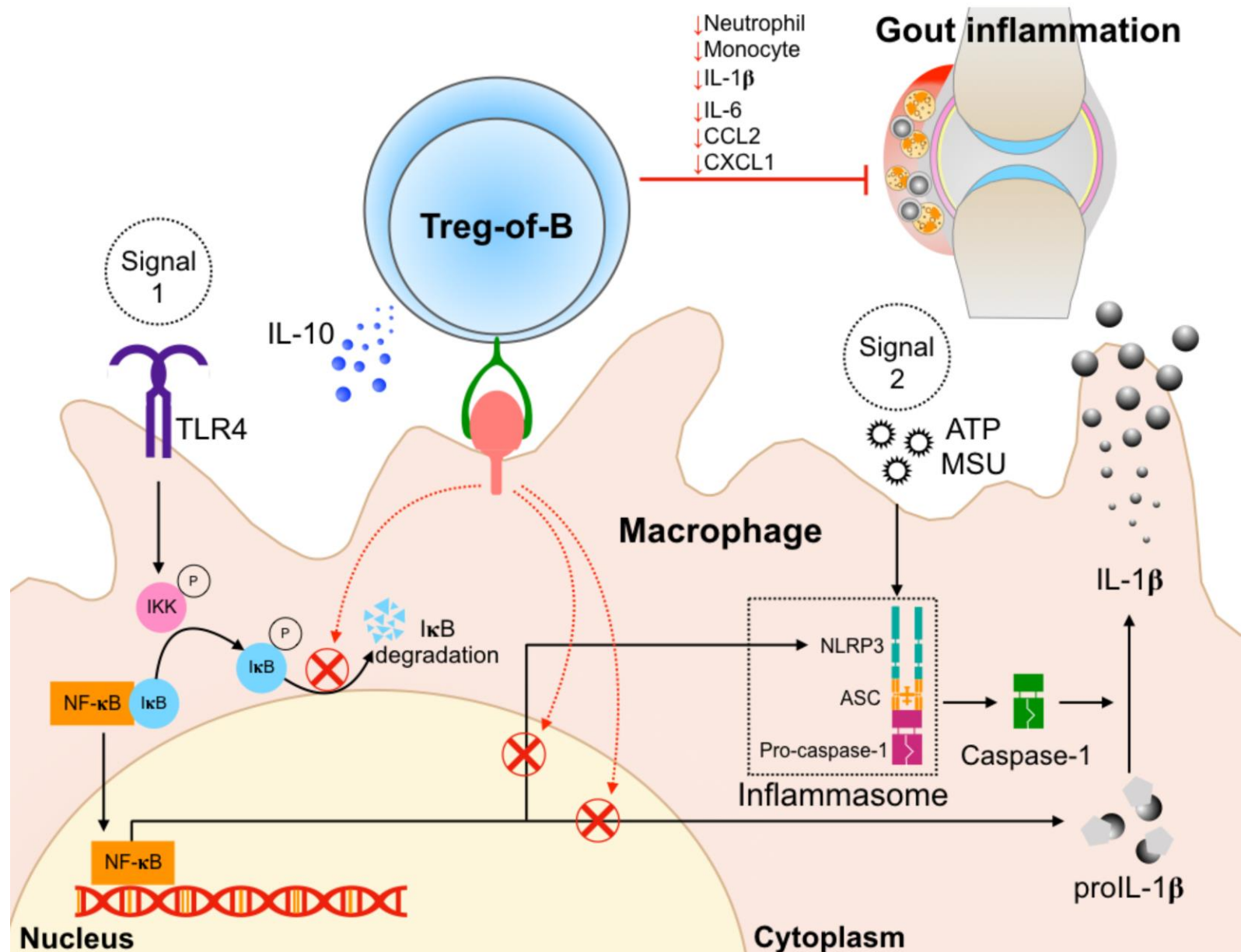


B-cell-induced CD4⁺Foxp3⁻ regulatory T cells treatment in disease models

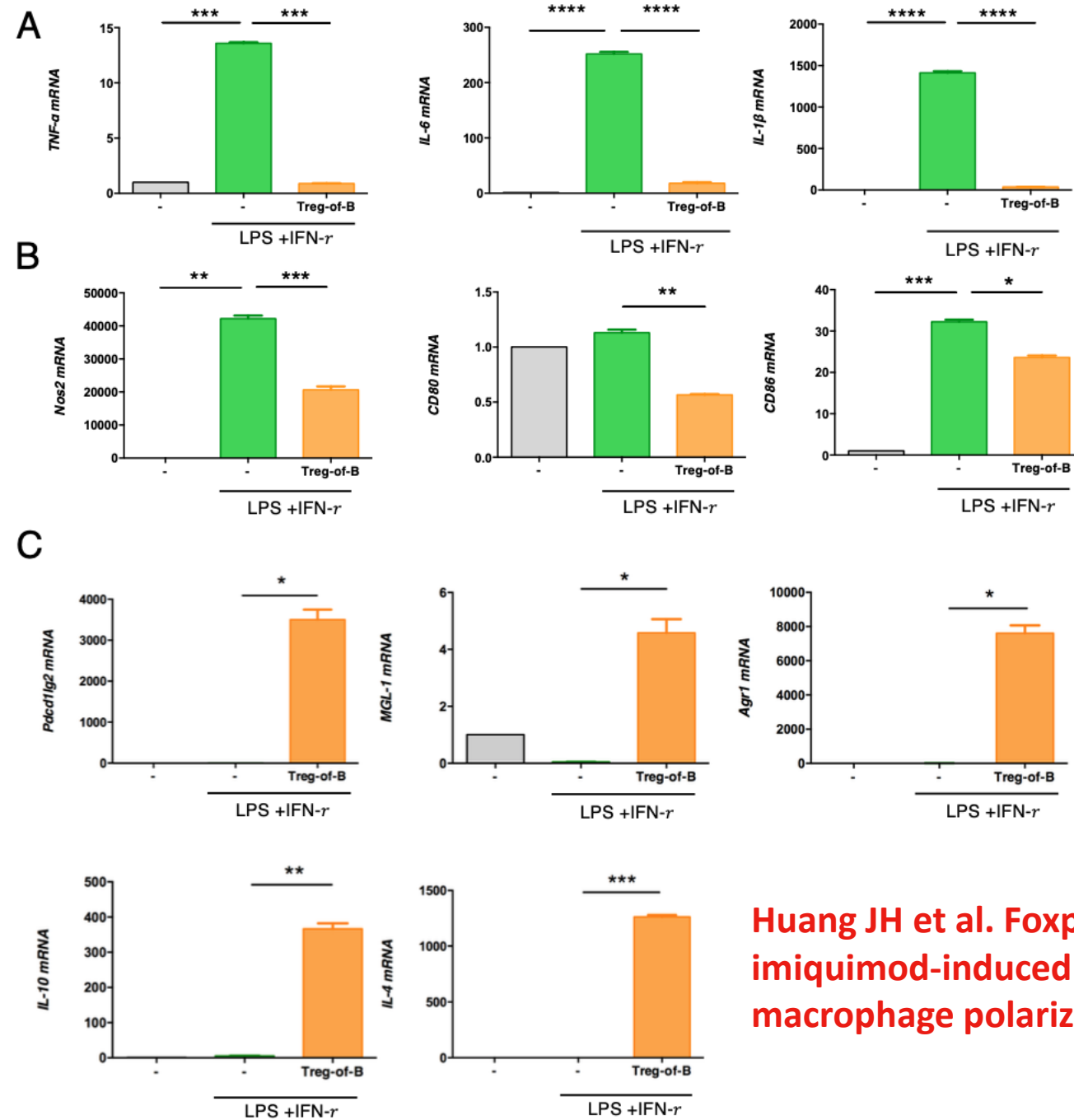




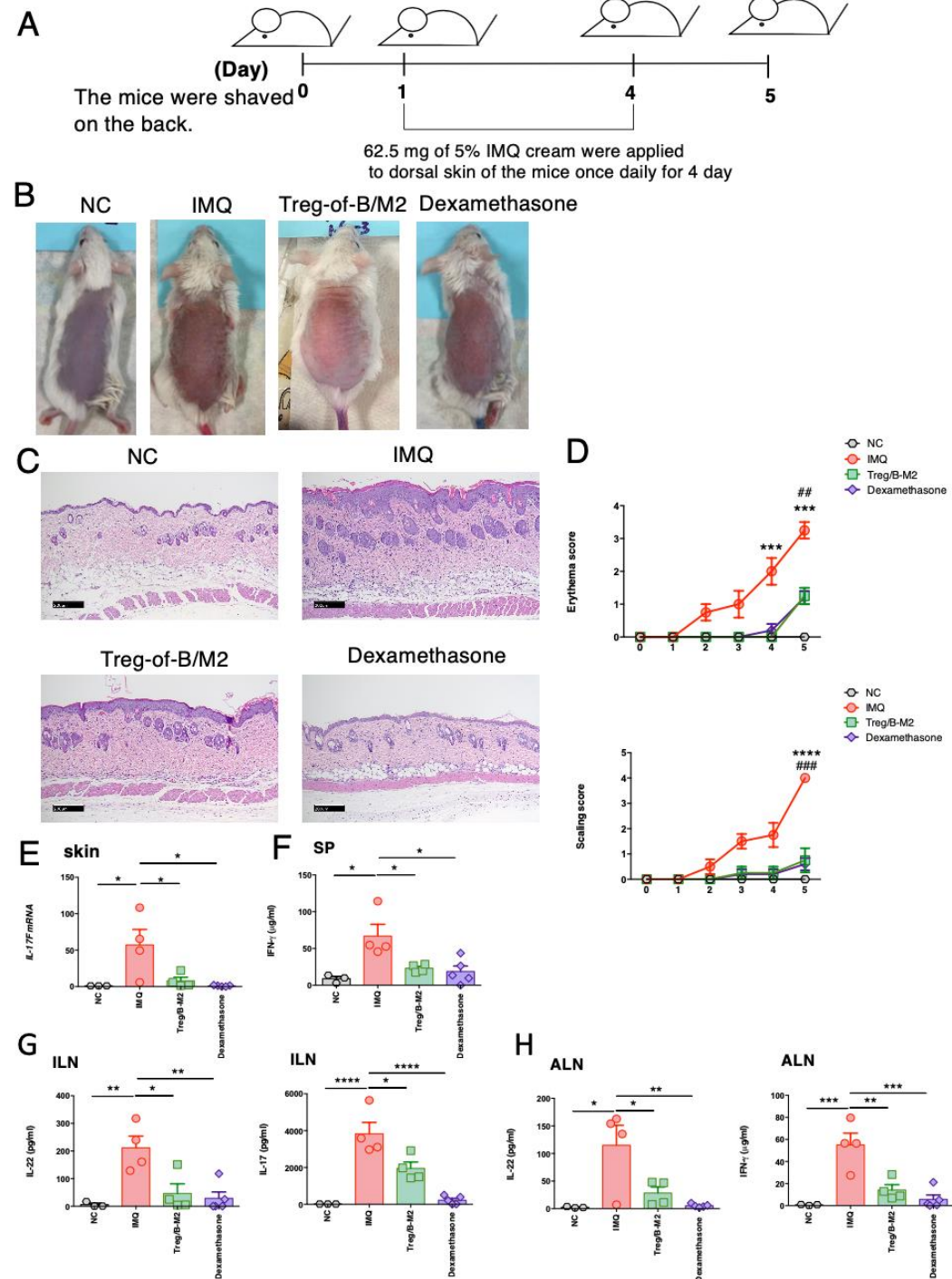
Chu KH et al. STAT6 pathway is critical for the induction and function of regulatory T cells induced by mucosal B cells. Front Immunol 2021; 29:615868.

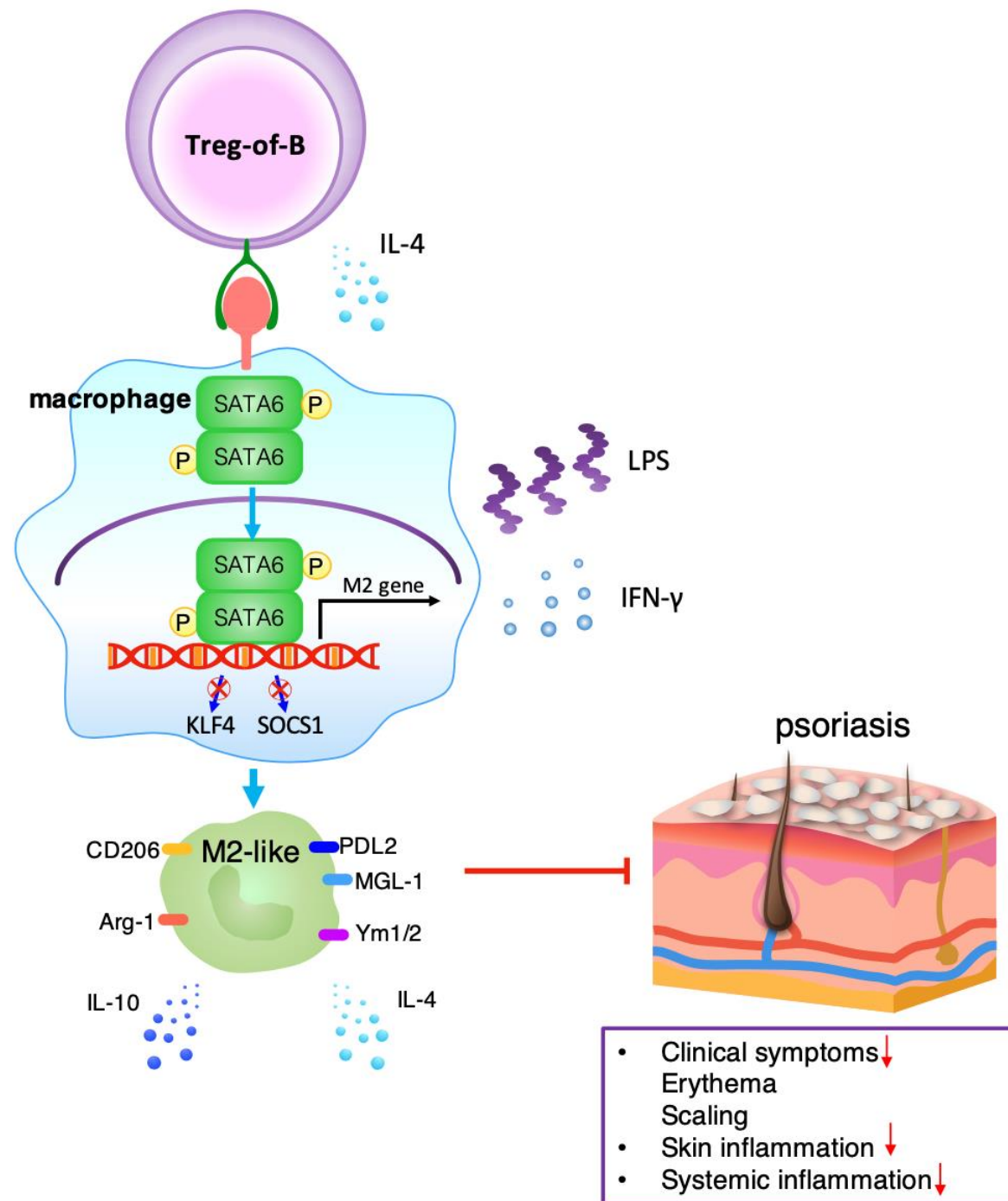


Huang JH and Chiang BL. Regulatory T cells induced by B cells suppress MLRP3 inflammasome activation and alleviate monosodium urate-induced gouty inflammation. *iScience* 2021, 24:102013.

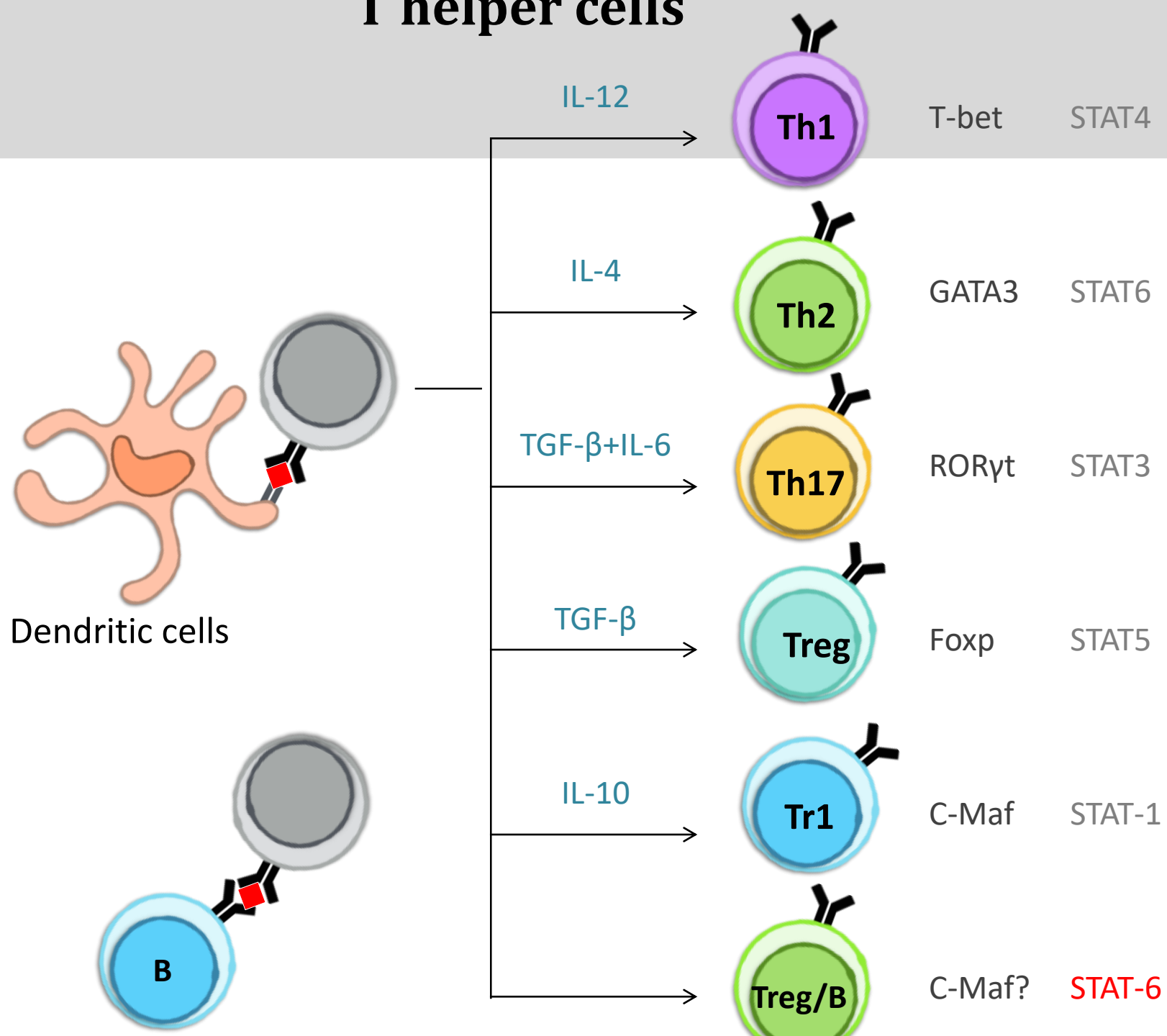


Huang JH et al. Foxp3- Regulatory T cells ameliorate imiquimod-induced psoriasis by inducing M2 macrophage polarization. (In submission)

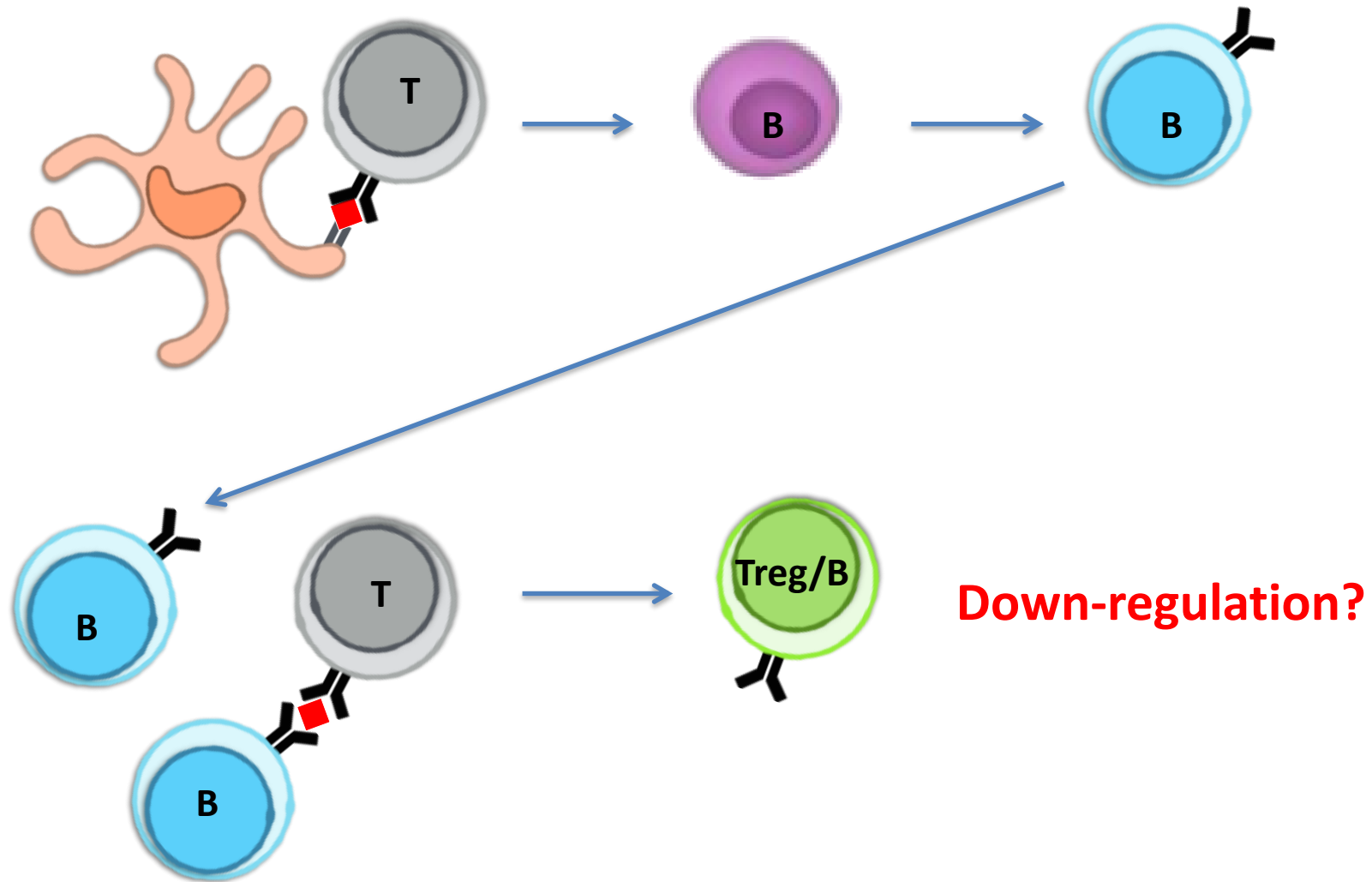




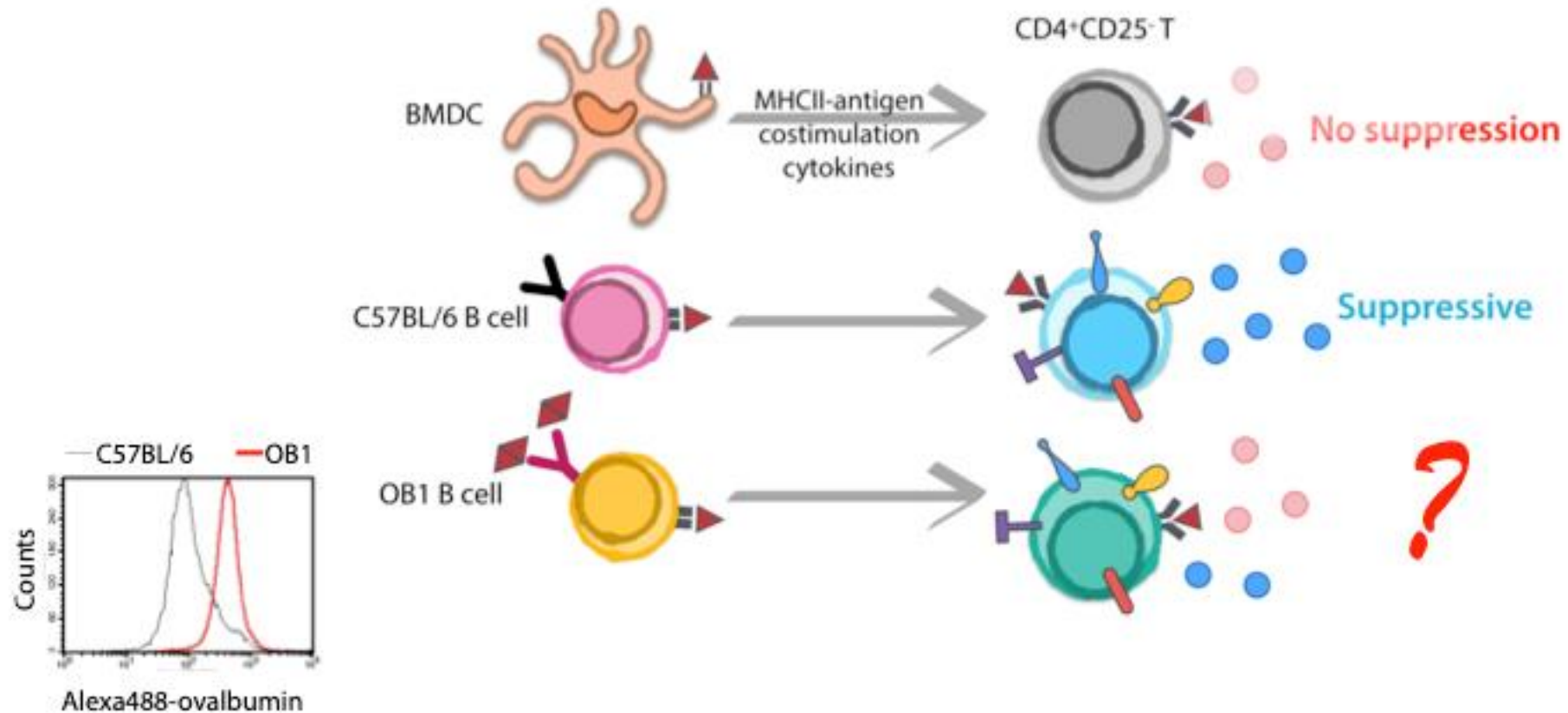
T helper cells

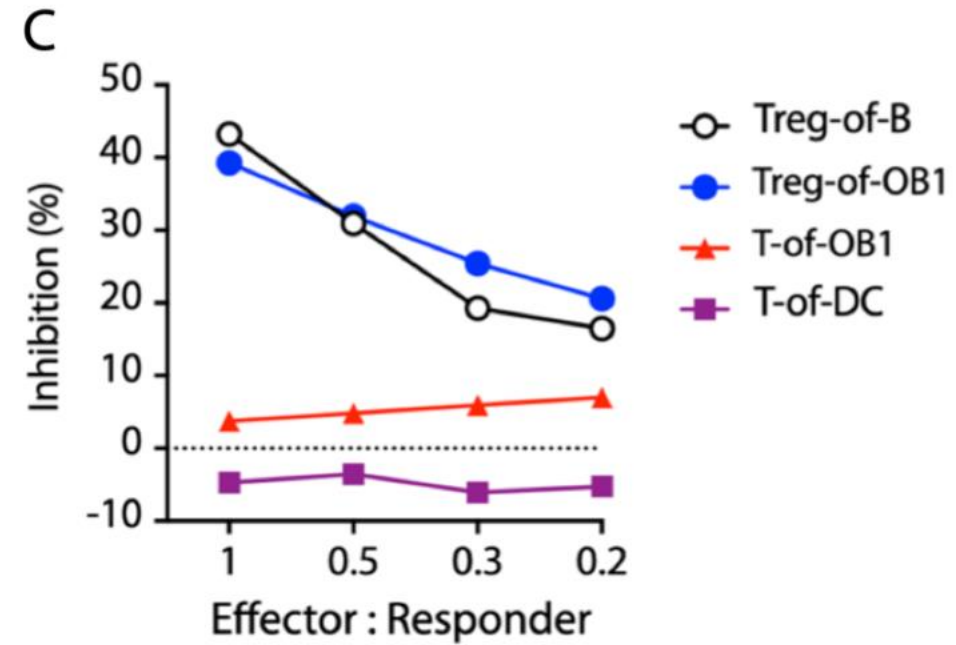
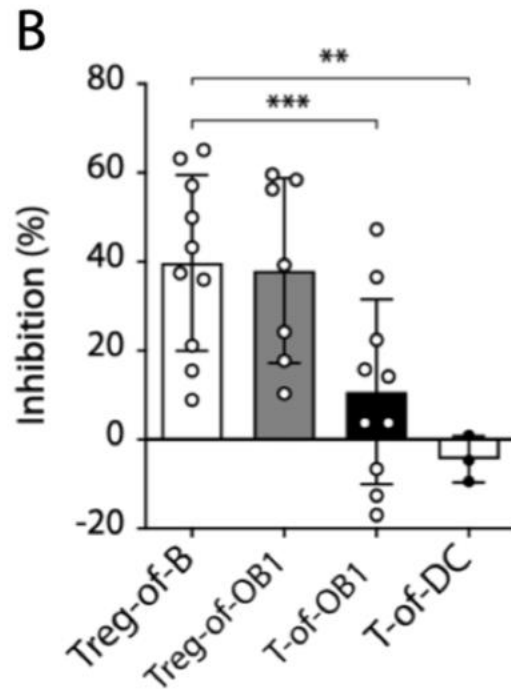
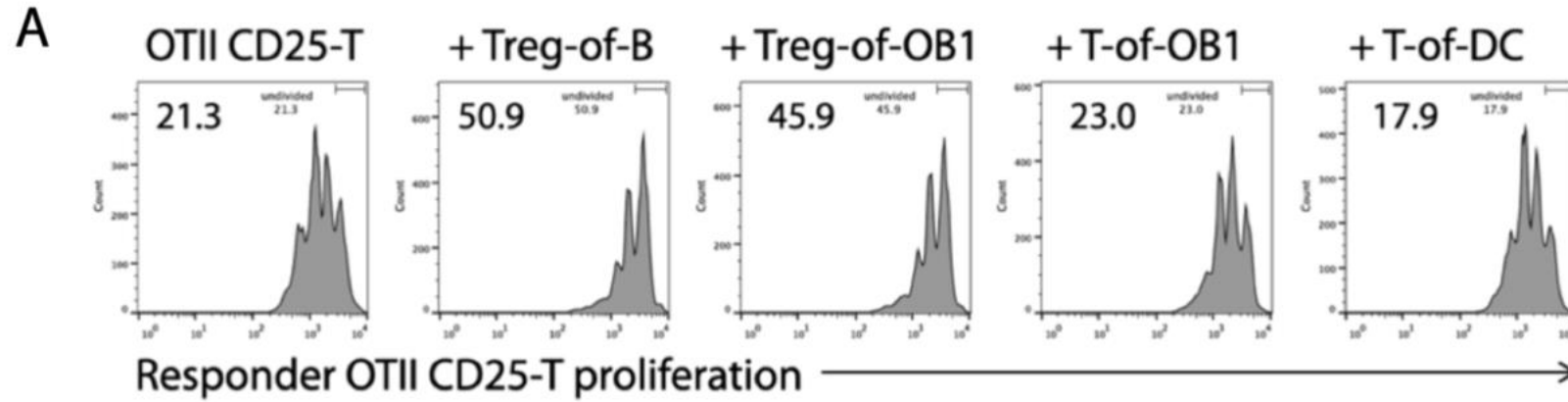


Physiological significance?

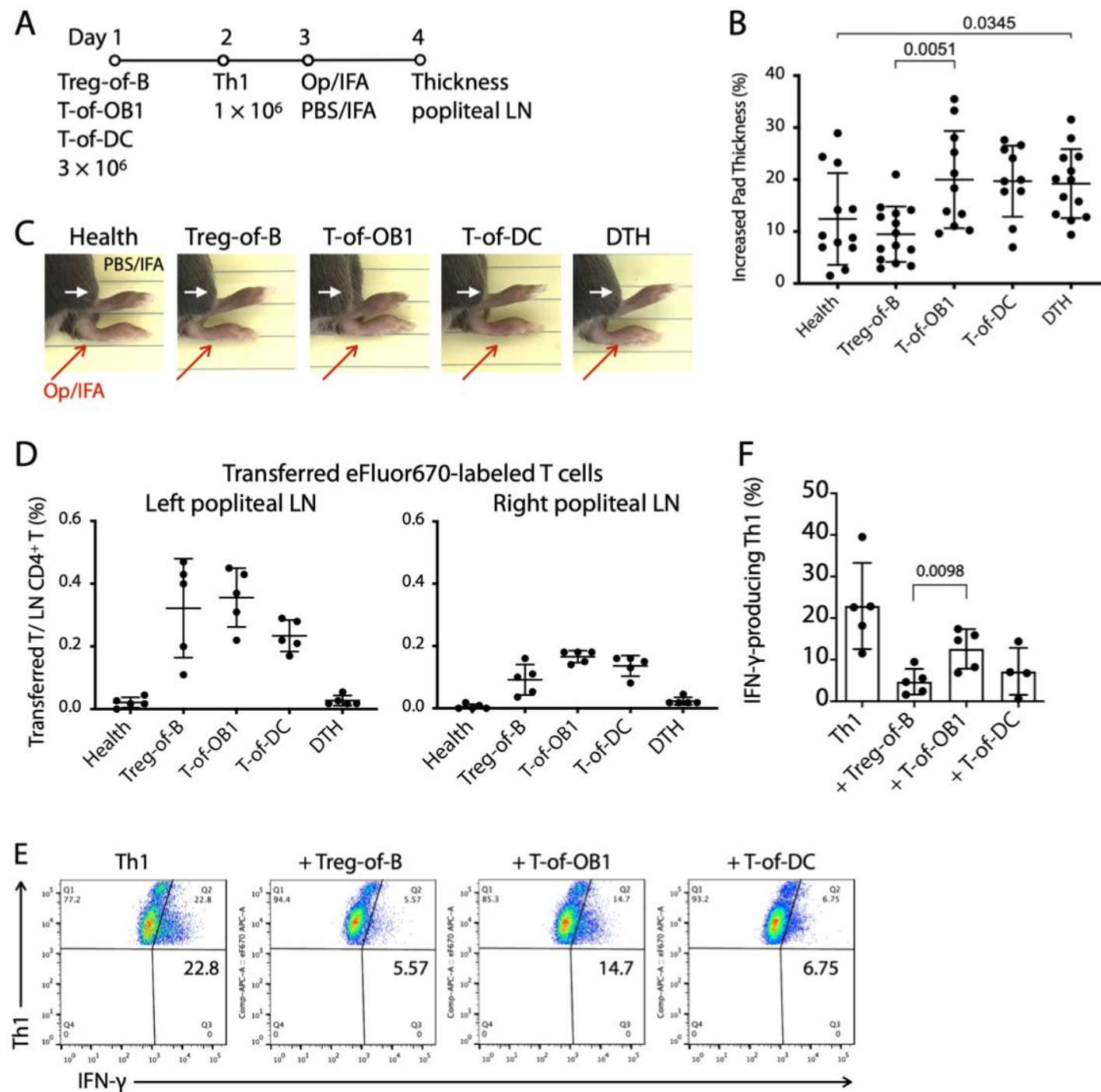


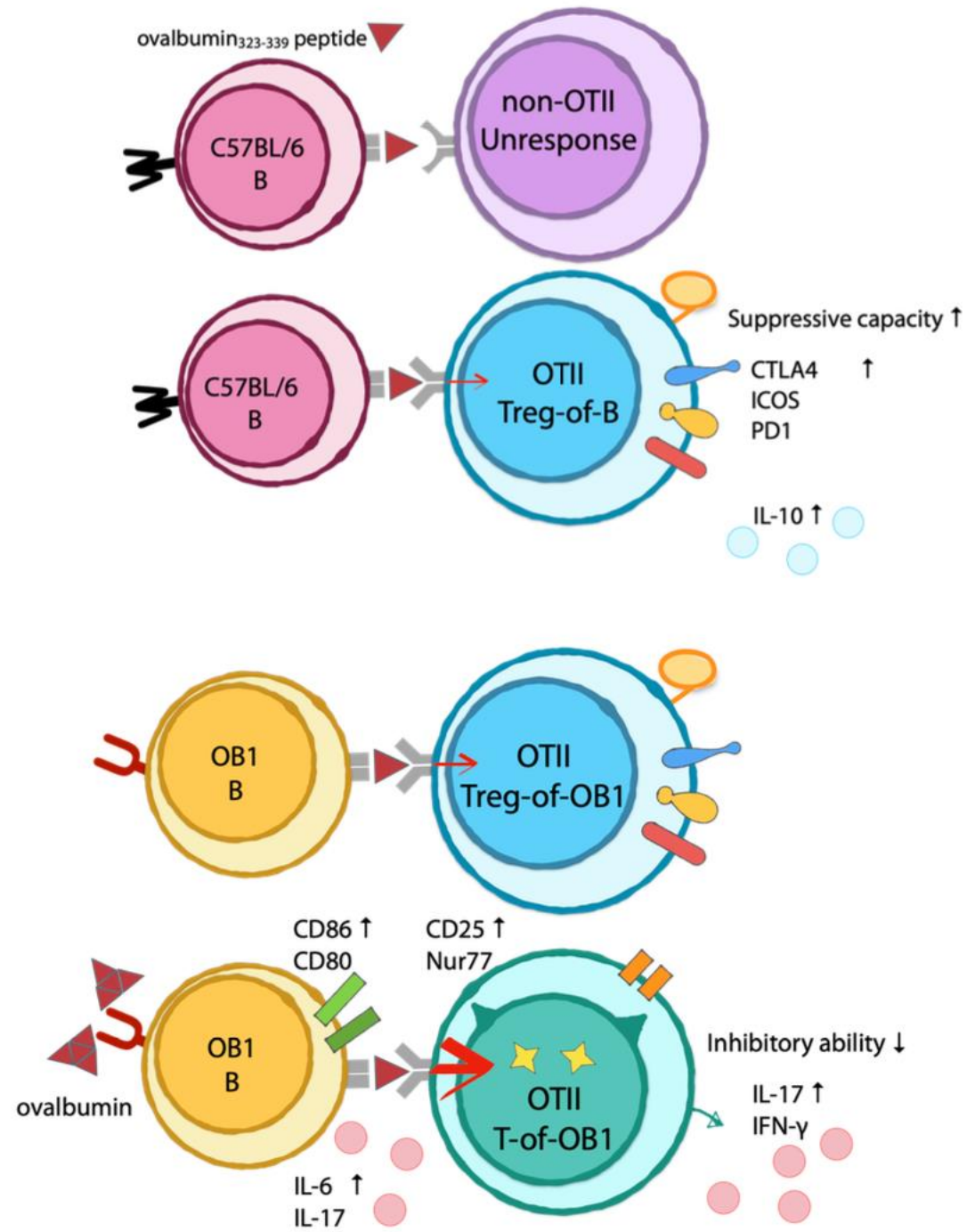
Antigen-activated antigen-specific B cells ?

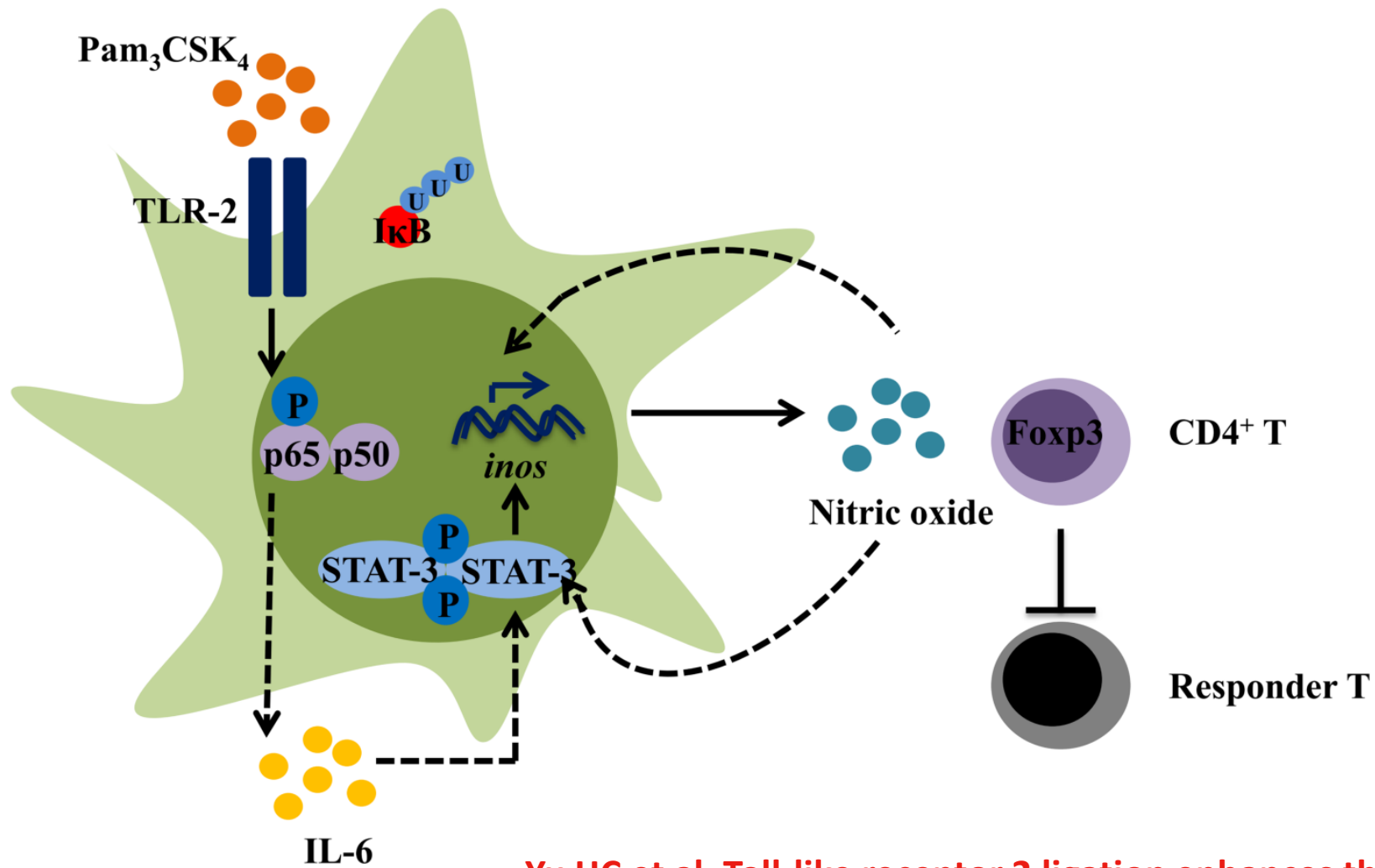




Chien CH et al. Naïve splenic B cells induced CD4⁺ Foxp-3⁺ Treg cells through a fine tuning TCR activation. (In submission)



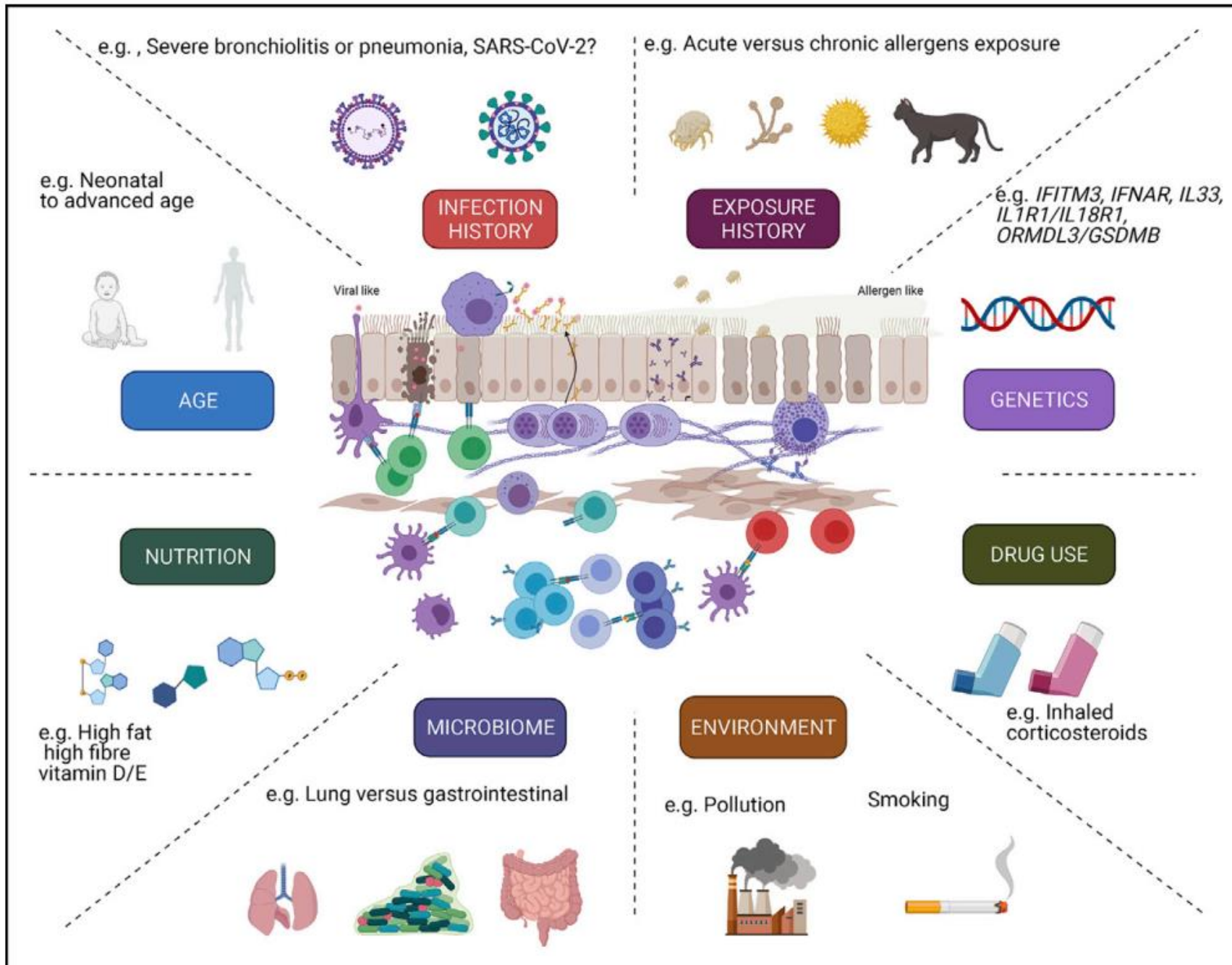




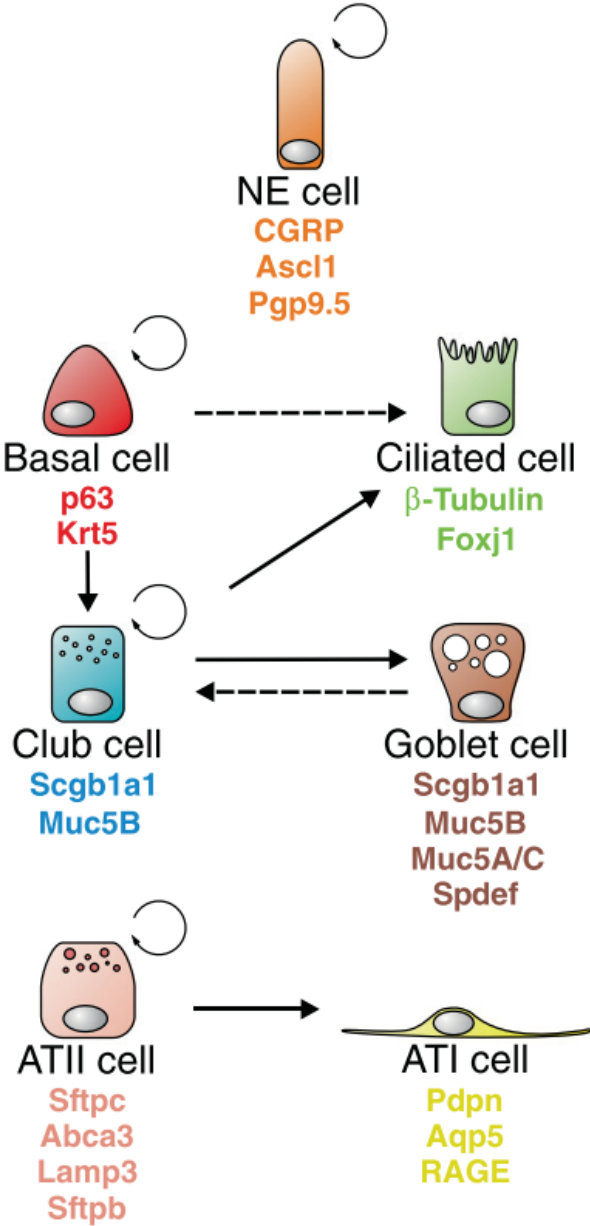
Yu HC et al. Toll-like receptor 2 ligation enhances therapeutic effects of mesenchymal stem cells on murine asthmatic inflammation. J Allergy Clin Immunol 2018; 142: 284.

Lung health













- Environment
- Genetic background
- Microbiota
- Age
- Serial and cumulative effects



Normal homeostasis



Adult lung stem/ progenitor cells

	Stem/ progenitor cells	Marker	Location	Differentiation potential
1.	Basal cells 	P63, Krt5, Krt14	airways	Ciliated  Club 
2.	Club cells 	CCSP, Sca-1, CD104	airways	Ciliated  Goblet 
3.	Bronchoalveolar stem cells (BASCs)	SPC, CCSP, Sca-1	bronchoalveolar duct junctions (BADJs)	Club  AT2 
4.	Integrin $\alpha 6 \beta 4^+$ cells	CD49f (integrin $\alpha 6$) CD104 (integrin $\beta 4$)	BADJs alveolar	Club  AT2 
5.	AT2 	SPC, CD63, ABCA3	alveolar	AT1 

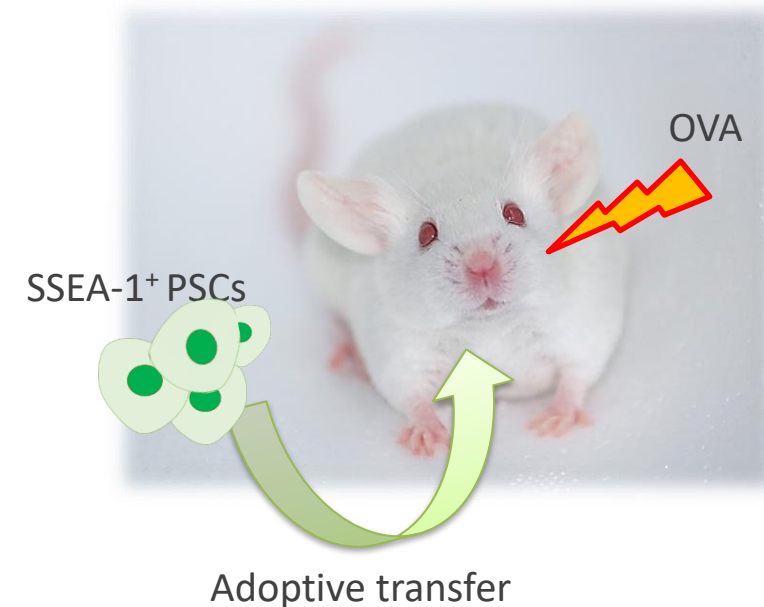
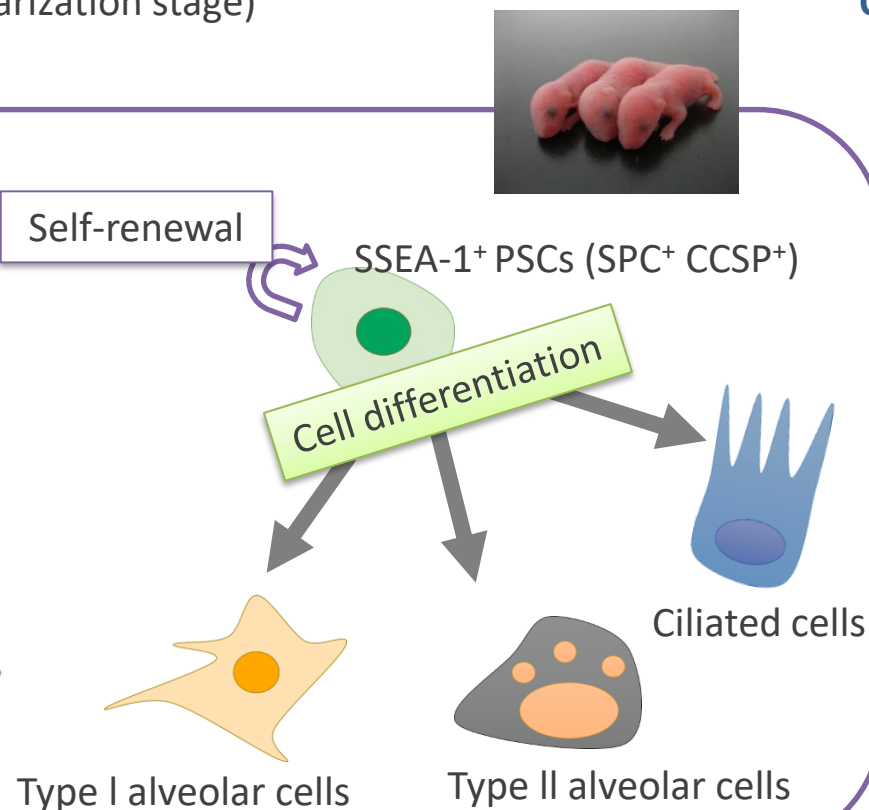
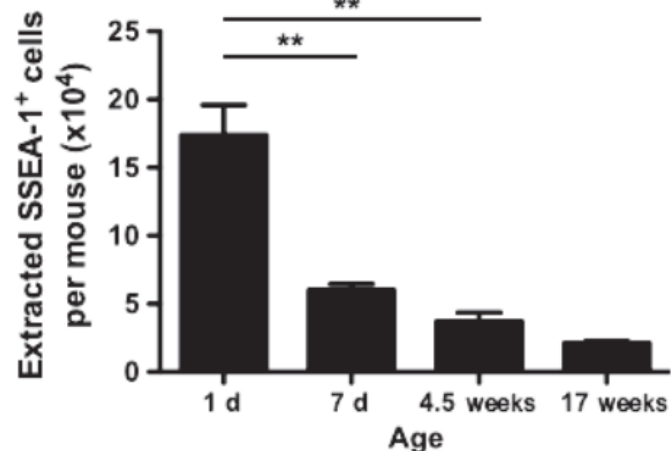
Lung-derived SSEA-1⁺ stem/progenitor cells inhibit allergic airway inflammation in mice

C.-J. Chiu¹, T.-Y. Ling² & B.-L. Chiang^{1,3}

- SSEA-1⁺ pulmonary stem/progenitor cells (SSEA-1⁺ PSCs)**

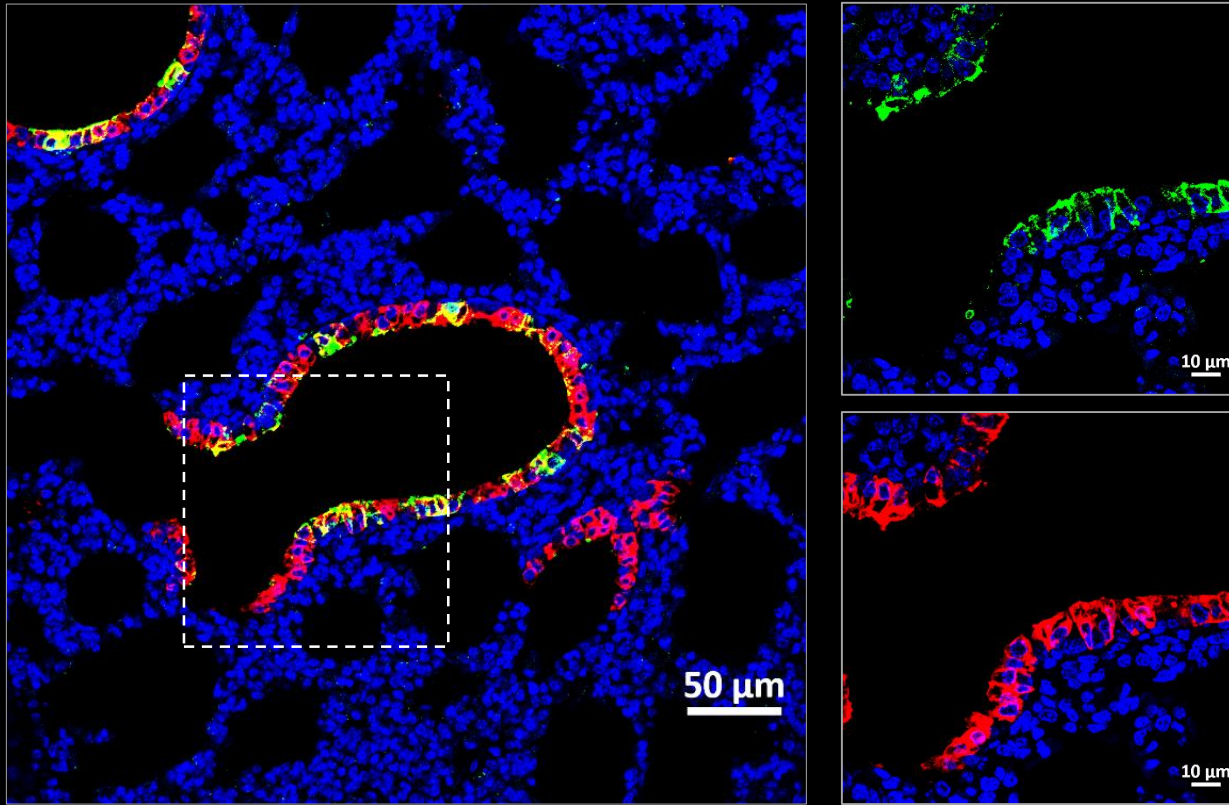
- postnatal day 1 (saccular/ alveolarization stage)
- cells are decreased with ages

- SSEA-1⁺ PSCs regulate allergic airway inflammation in OVA-induced allergic asthma**

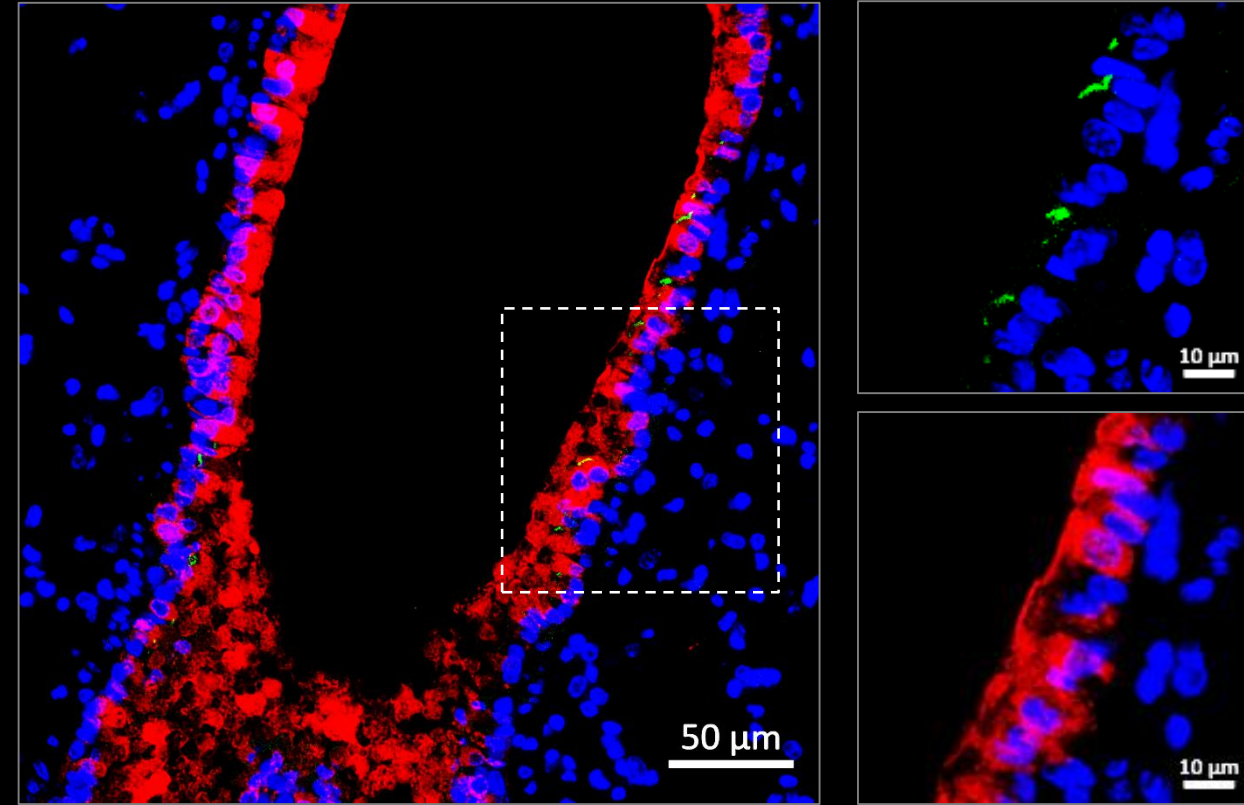


Mice pulmonary SSEA-1⁺ cells

Neonatal lung

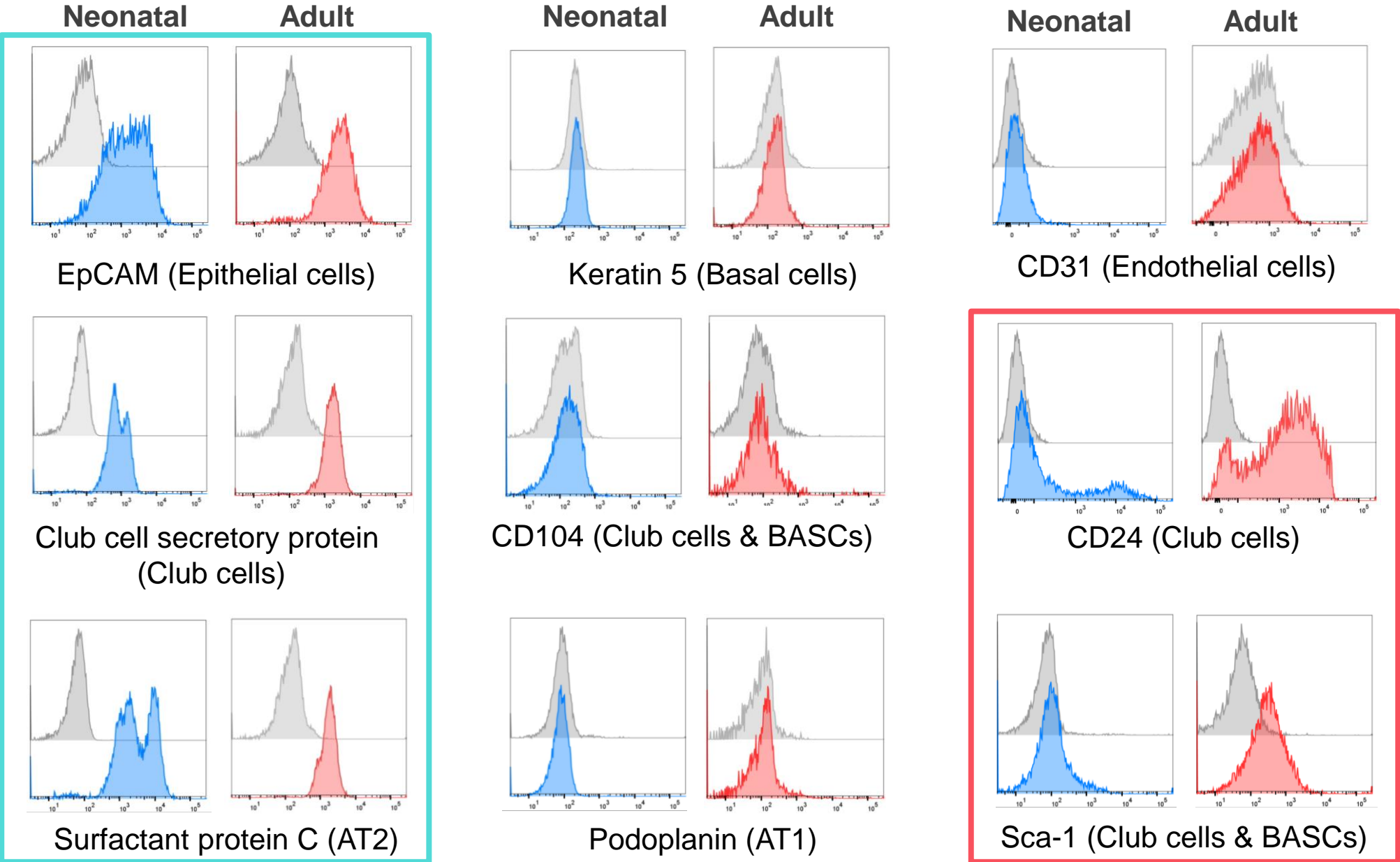


Adult lung

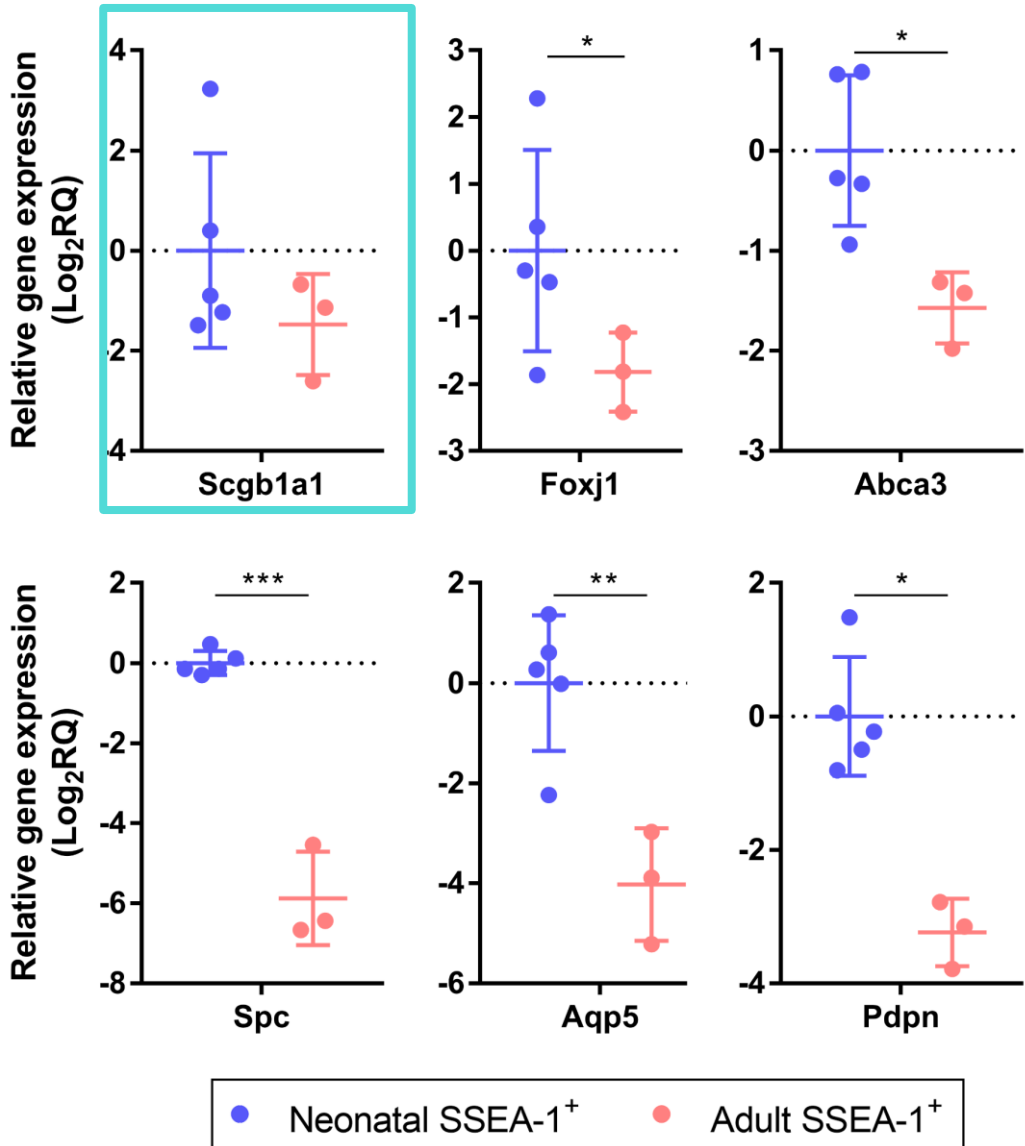
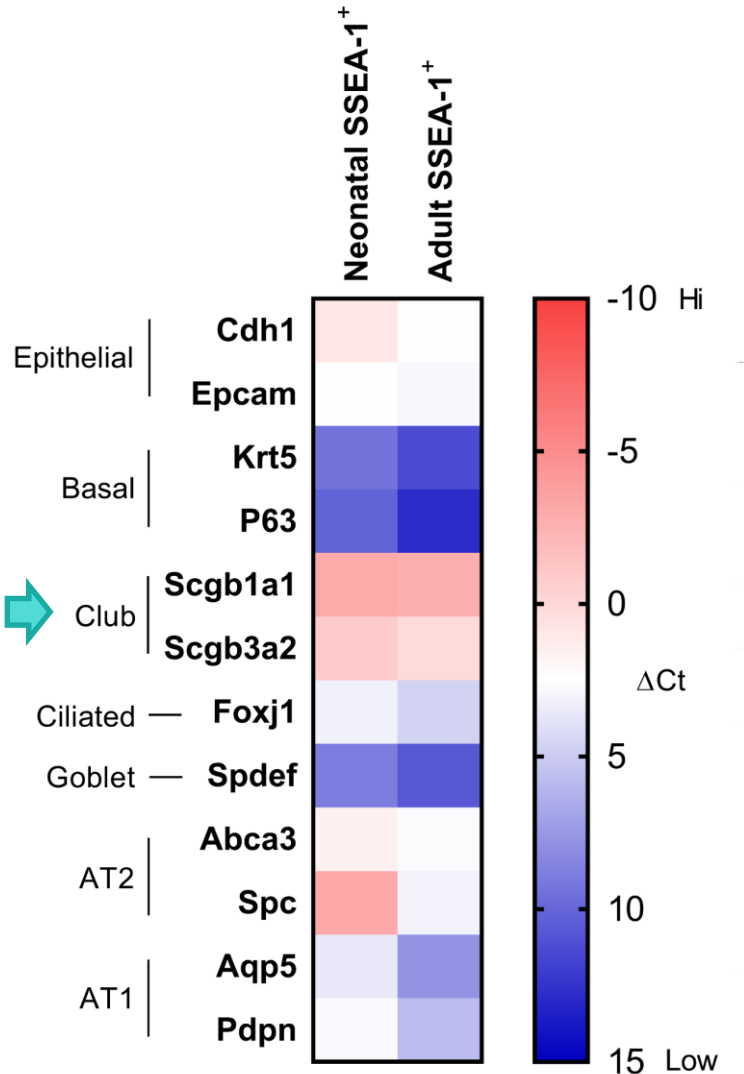


SSEA-1 (Stem cells) **CCSP (Club cell secretory protein, Club cells)** **DAPI (Nuclear)**

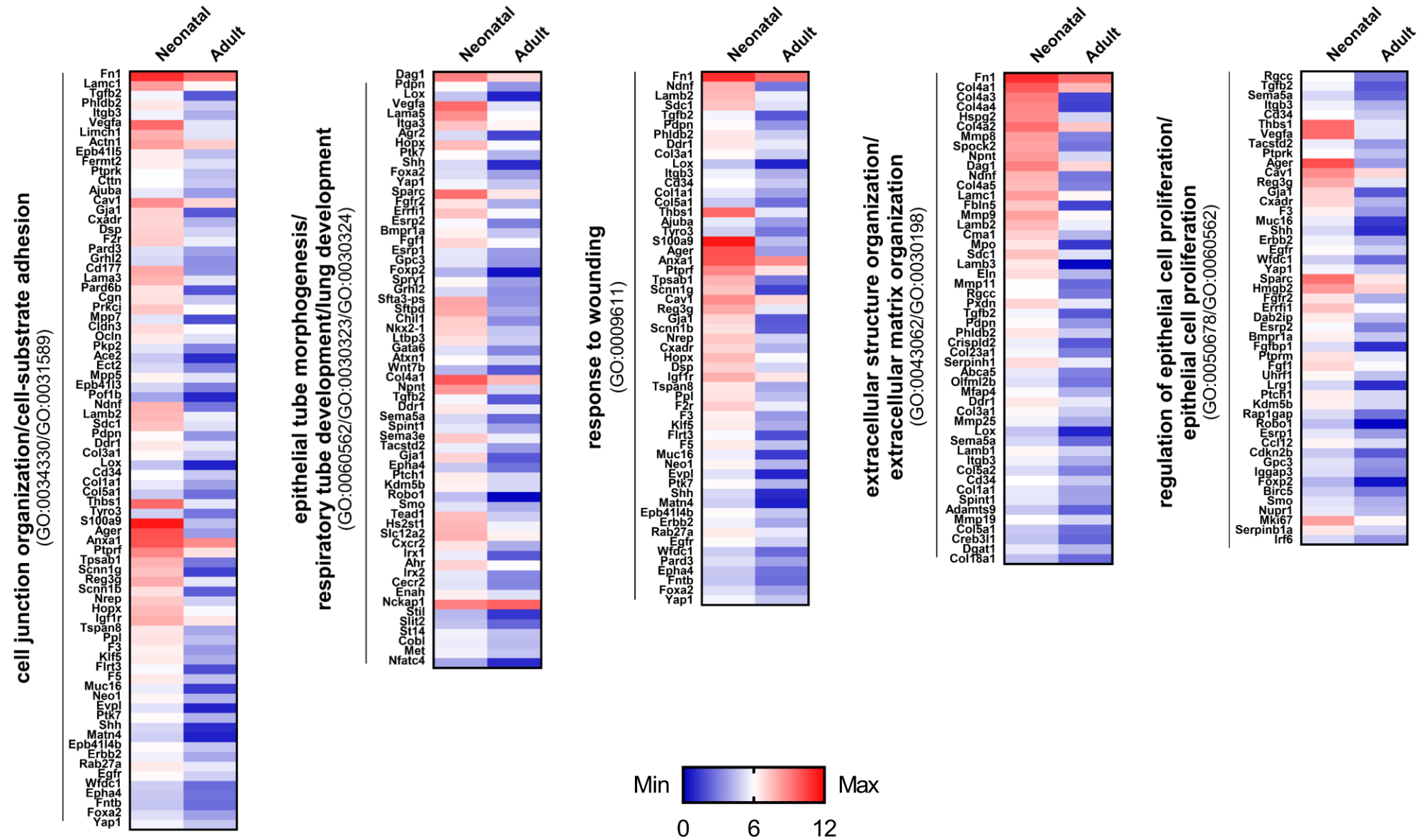
Cell markers of neonatal and adult pulmonary SSEA-1⁺ cells



Lung epithelial-associated gene expression between neonatal and adult pulmonary SSEA-1⁺ cells

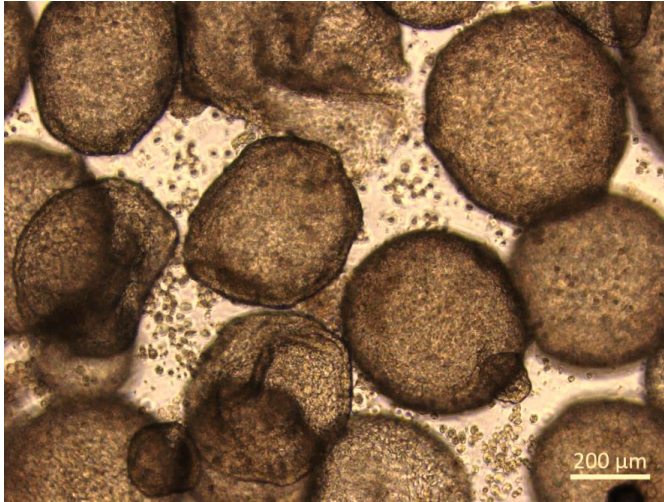


Transcriptome analysis of the neonatal and adult pulmonary SSEA-1⁺ cells

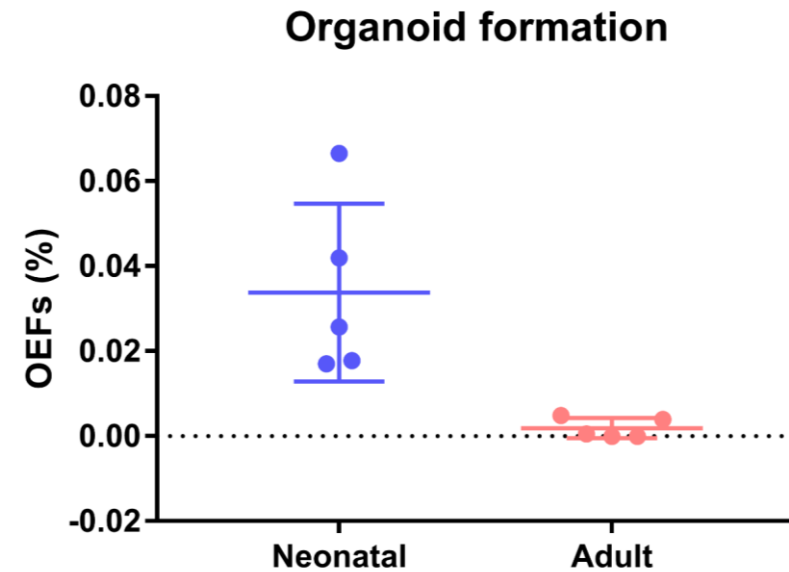
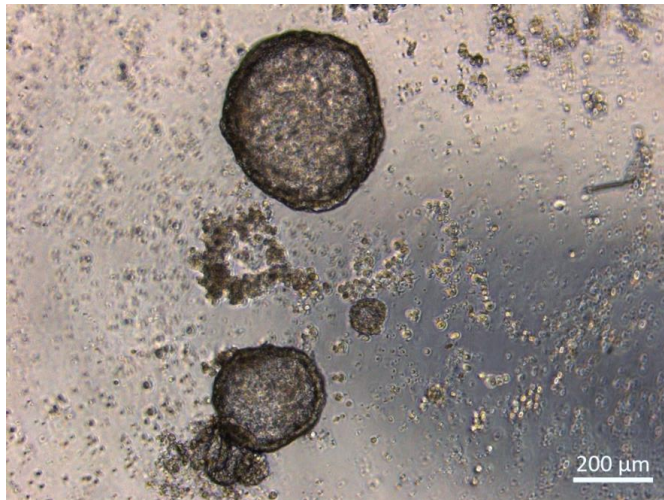


Enhanced organoid generation in neonatal pulmonary SSEA-1⁺ cells

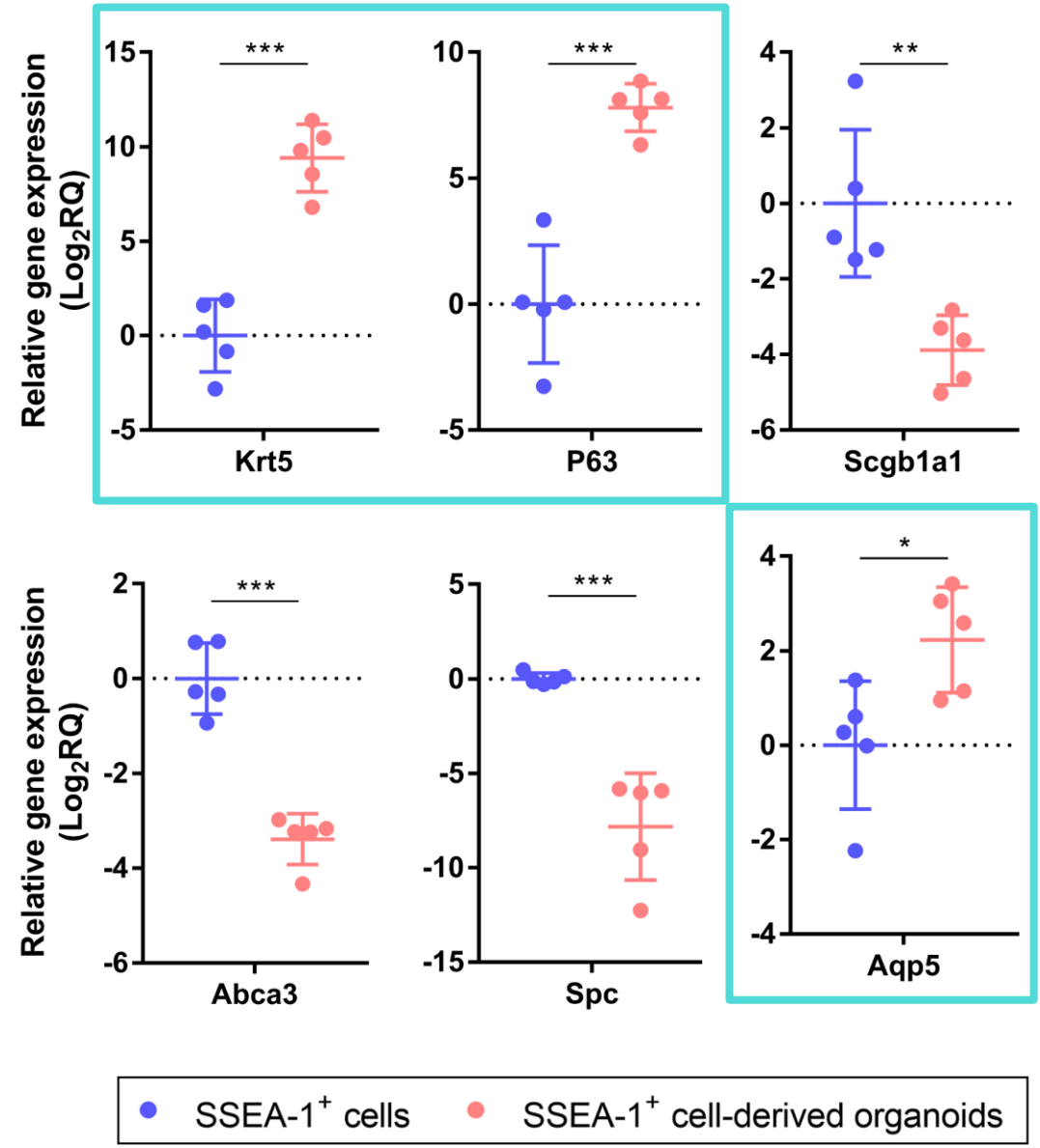
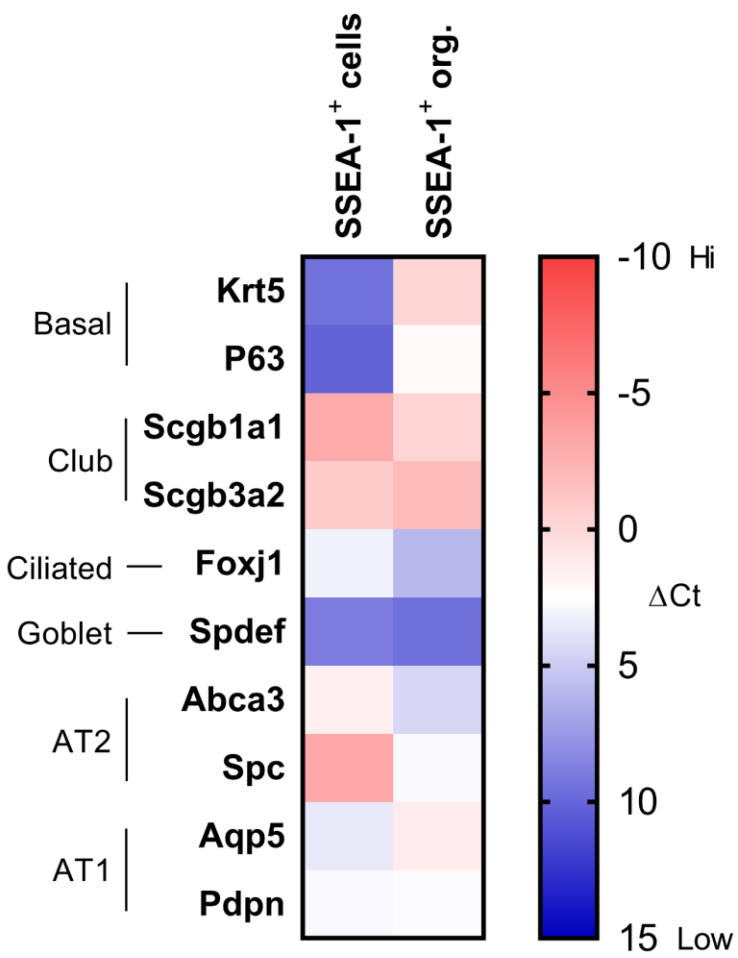
Neonatal



Adult

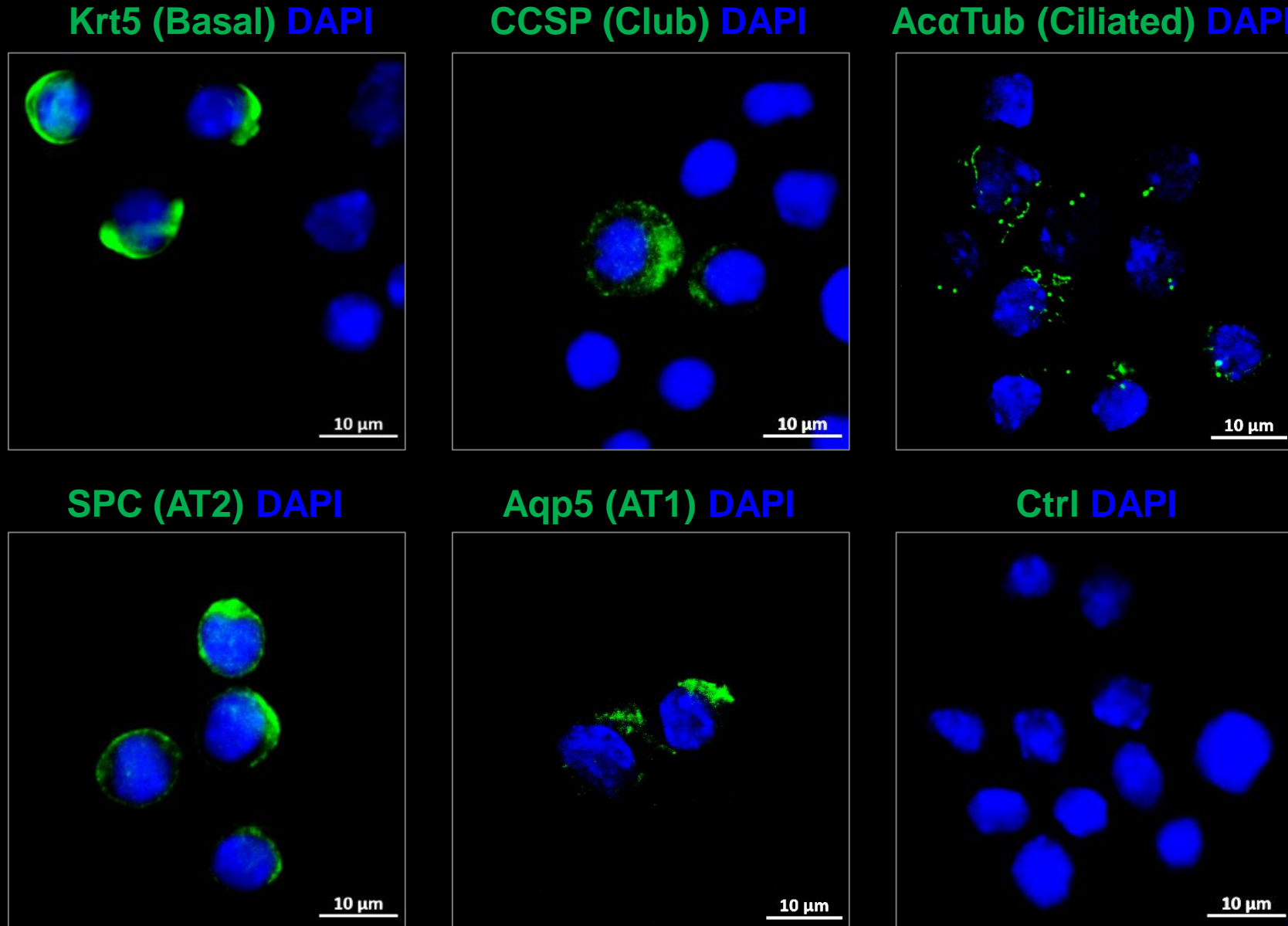


Lung epithelial-associated gene expression in neonatal pulmonary SSEA-1⁺ cell-derived organoids



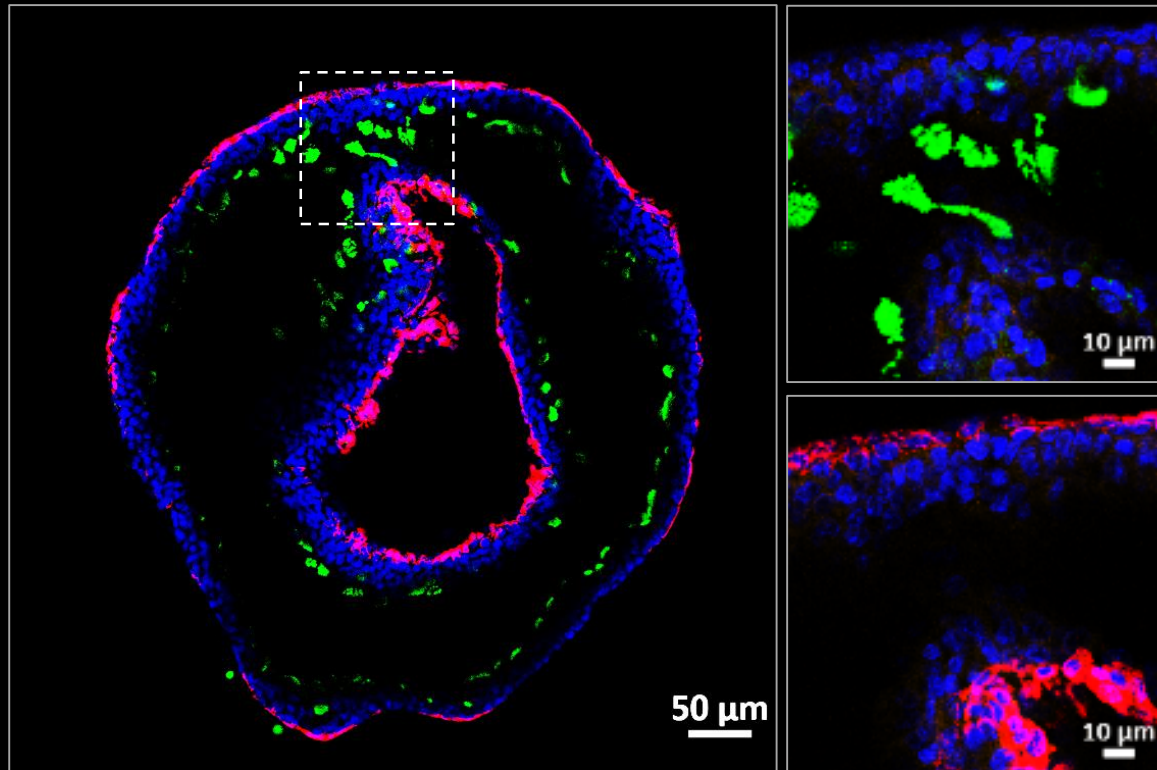
● SSEA-1⁺ cells ● SSEA-1⁺ cell-derived organoids

Multiple cell types developed in the neonatal pulmonary SSEA-1⁺ cell-derived organoids



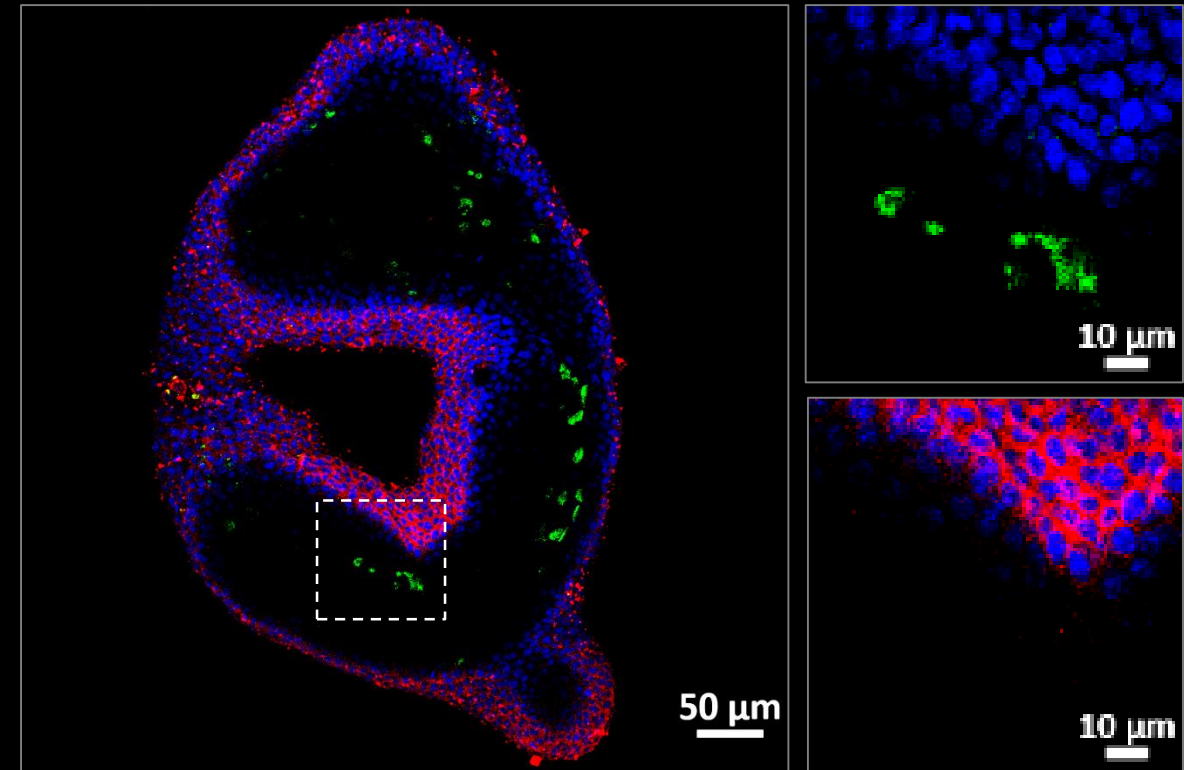
Neonatal pulmonary SSEA-1⁺ cells developed into airway-like organoids

Airway-like organoid



A α Tub (Ciliated cells)
Krt5 (Basal cells)
DAPI (Nuclear)

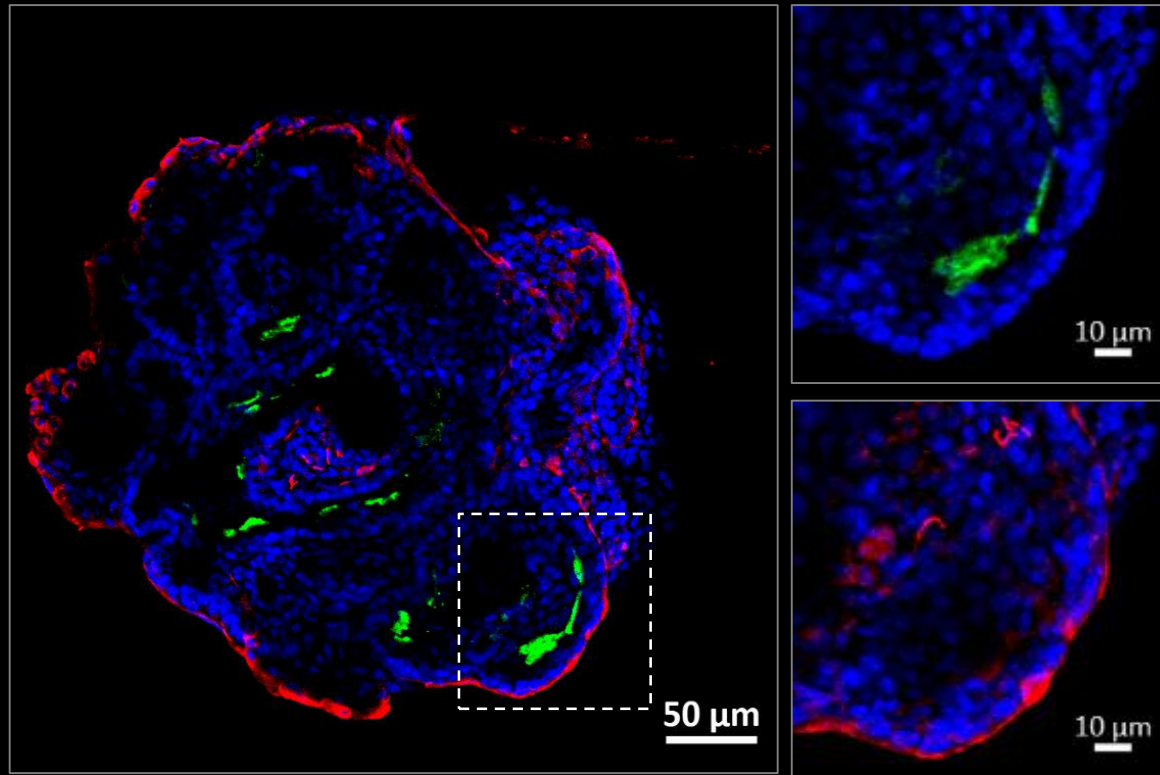
Airway-like organoid



A α Tub (Ciliated cells)
CCSP (Club cells)
DAPI (Nuclear)

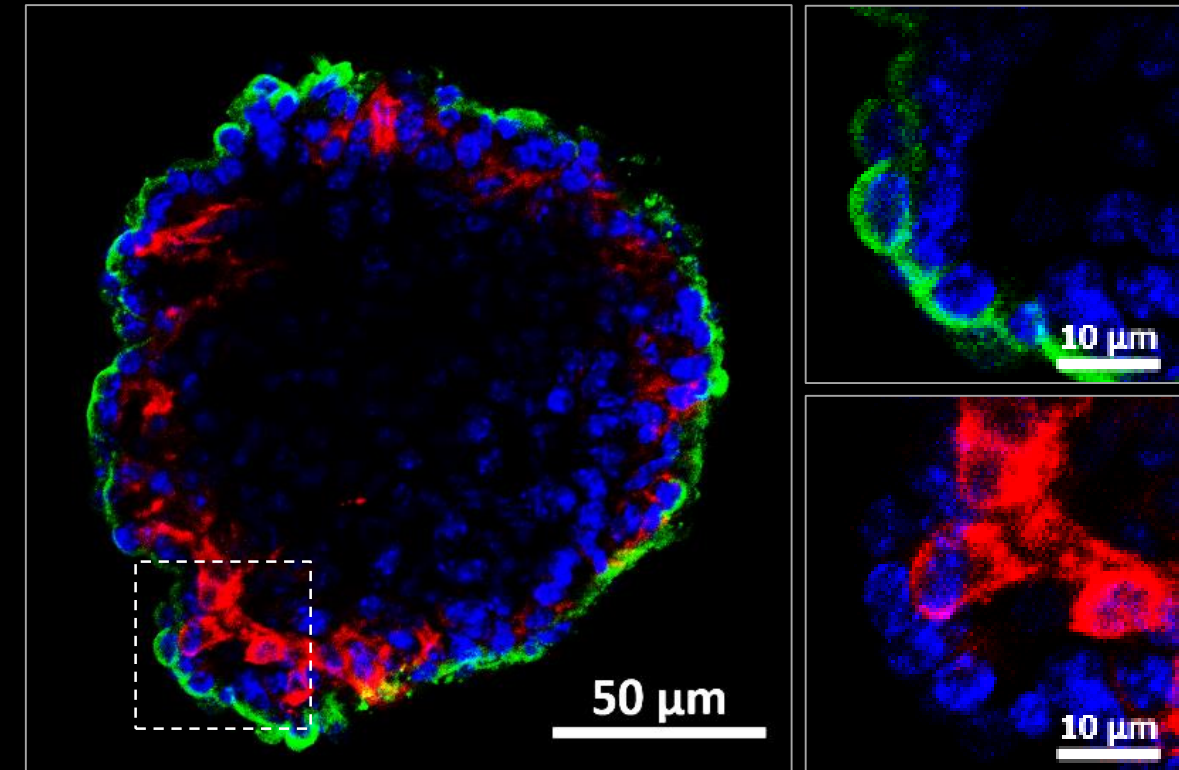
Neonatal pulmonary SSEA-1⁺ cells developed into bronchoalveolar-like and alveolar-like organoids

Bronchoalveolar-like organoid



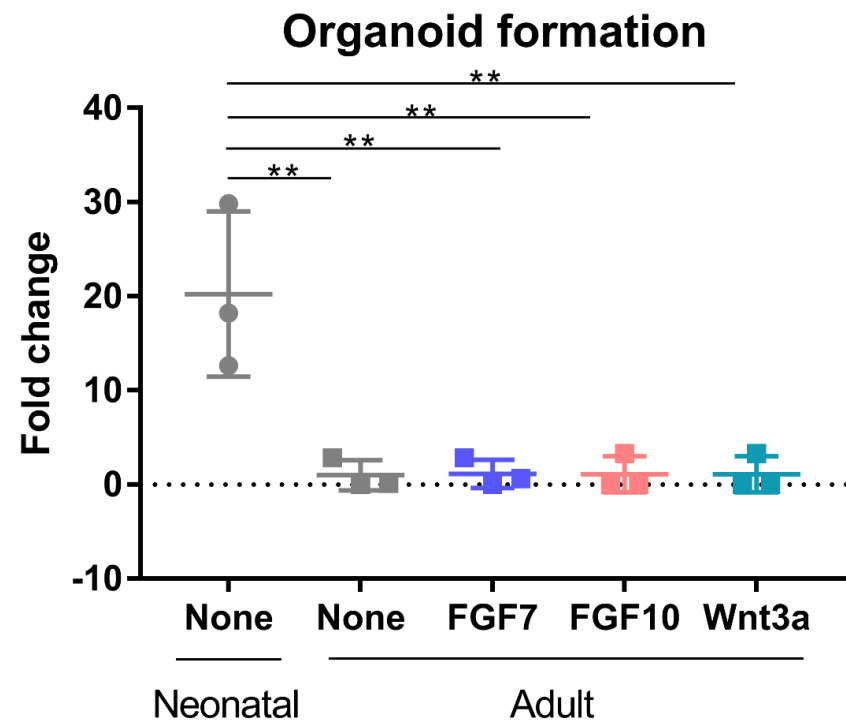
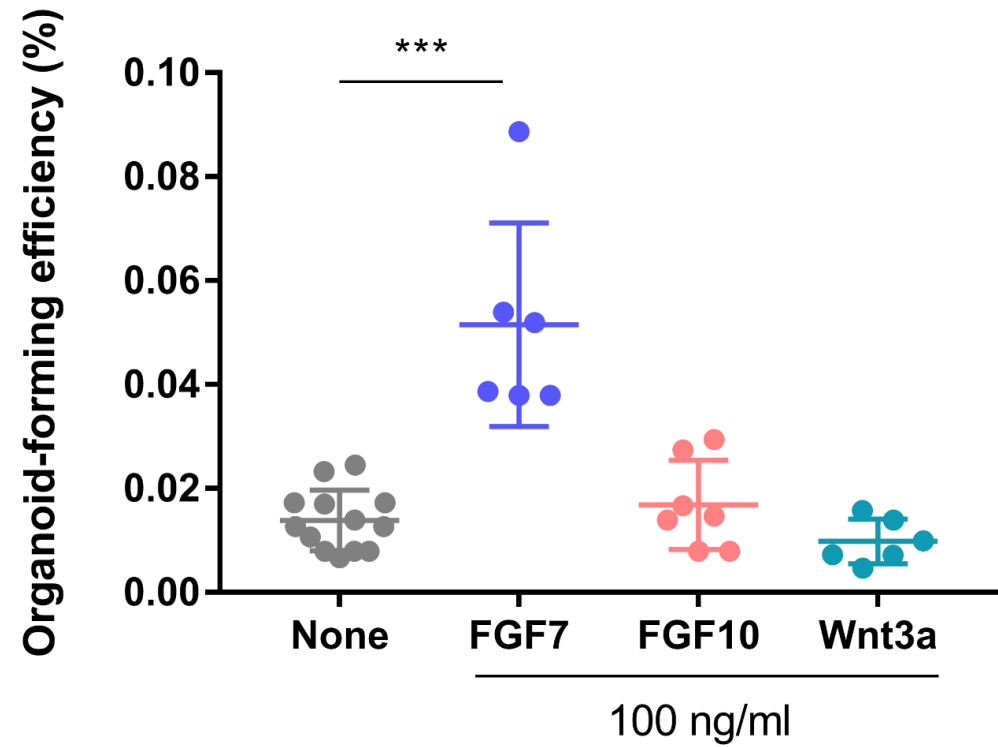
AcaTub (Ciliated cells)
SPC (AT2 cells)
DAPI (Nuclear)

Alveolar-like organoid

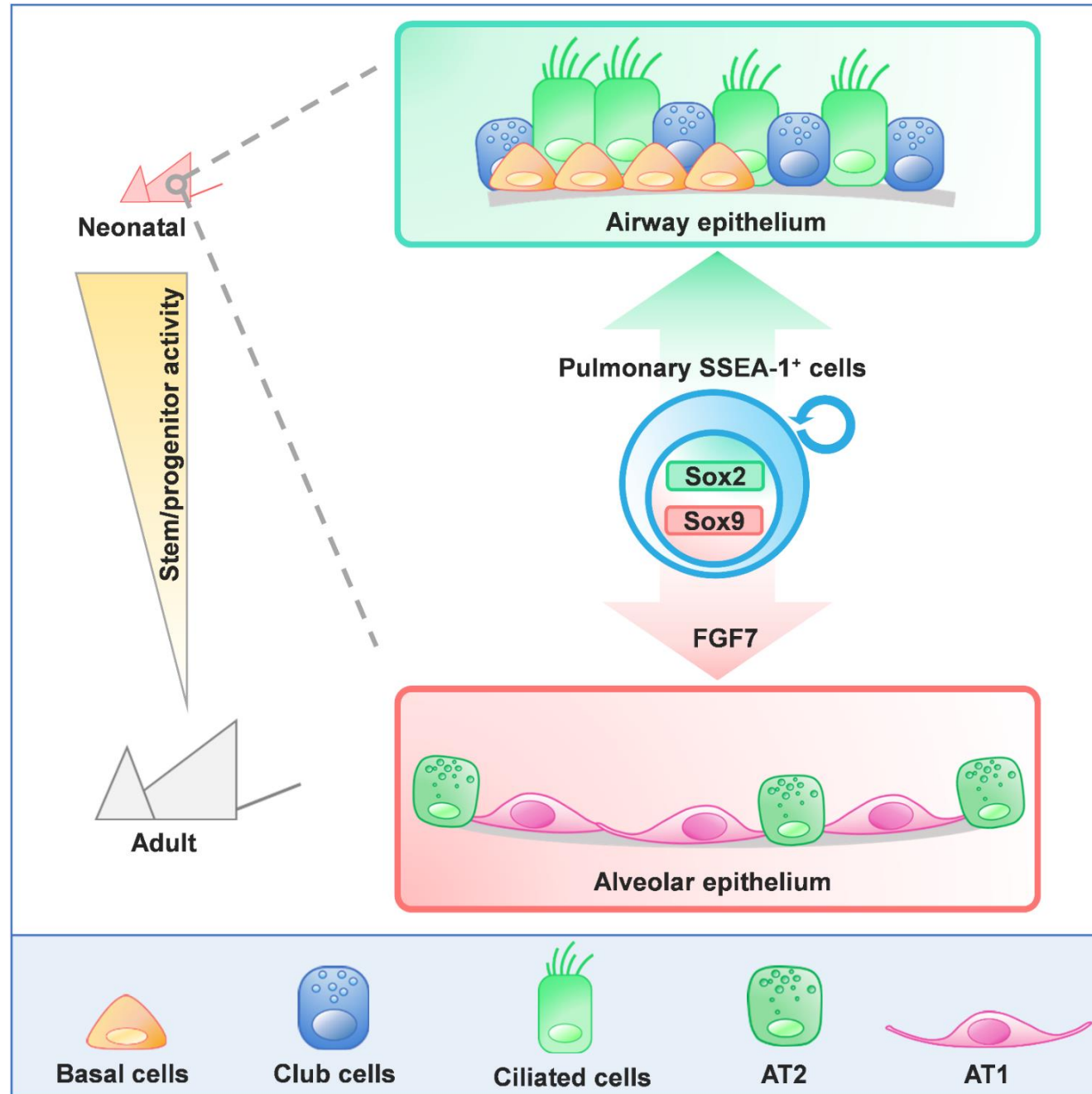


SPC (AT2 cells)
Pdpn (AT1 cells)
DAPI (Nuclear)

FGF7 further enhanced organoid generation of neonatal pulmonary SSEA-1⁺ cells

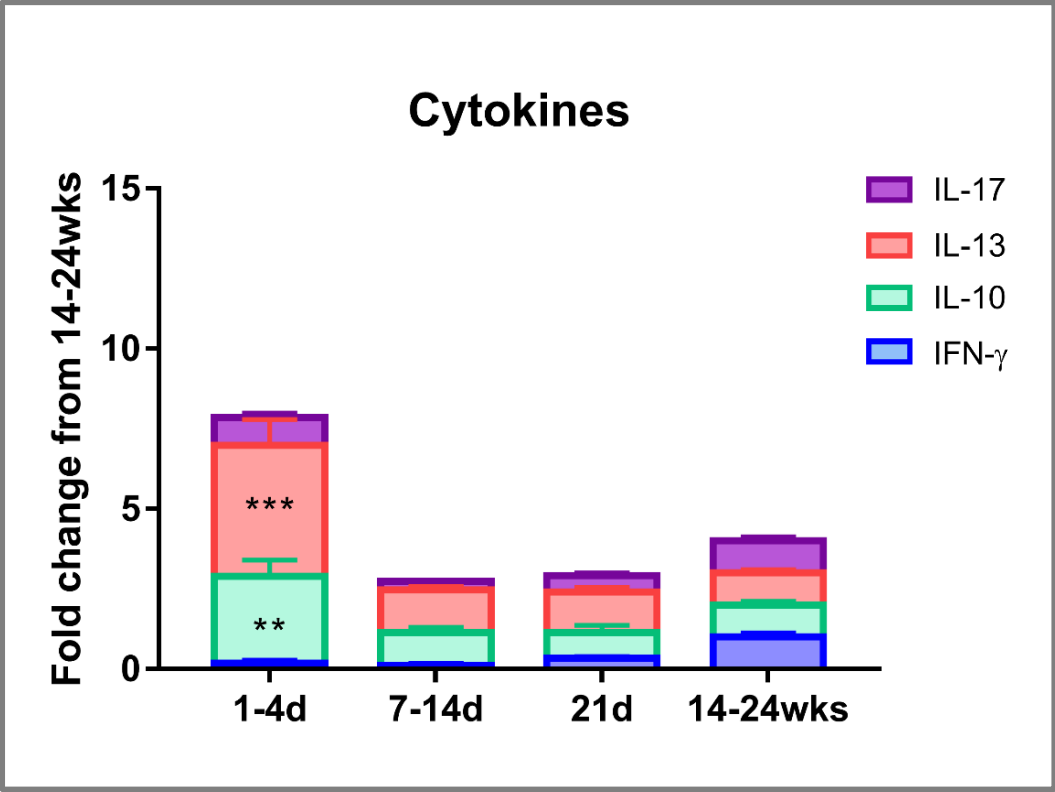
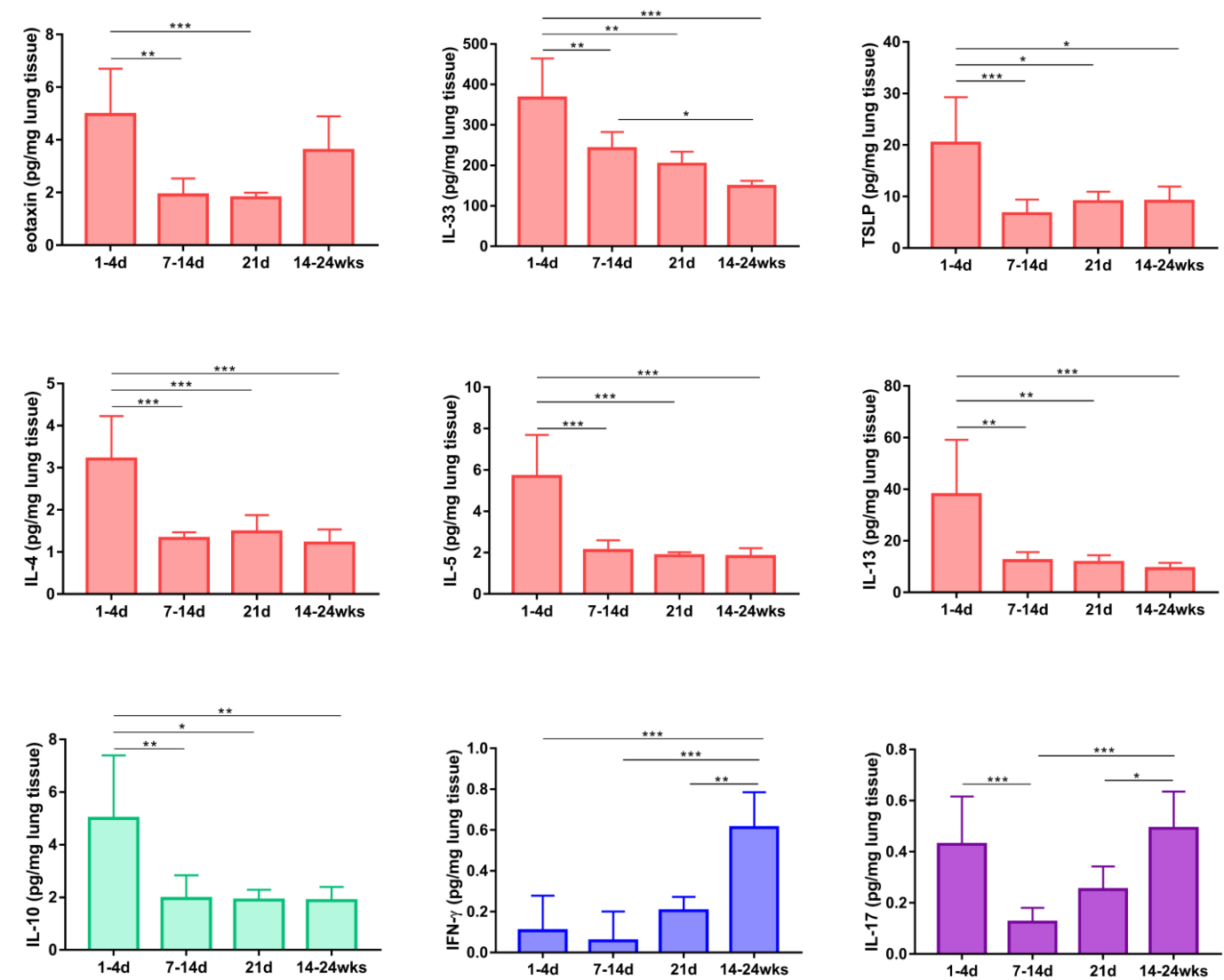


Summary

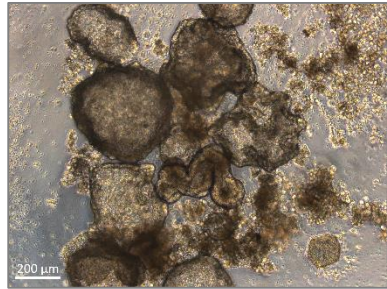


Liao CC et al. Neonatal lung-derived SSEA-1⁺ cells exhibited distinct stem/progenitor characteristics and organoid developmental potential. *iScience* (Revised)

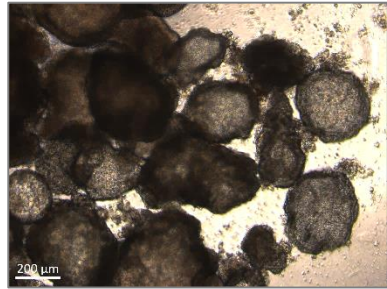
Cytokine production in lung tissues



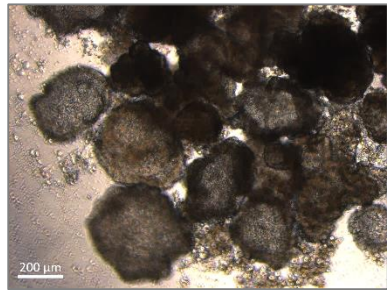
IL-4 and IL-13 enhance the organoid generation of the neonatal lung SSEA-1⁺ cells



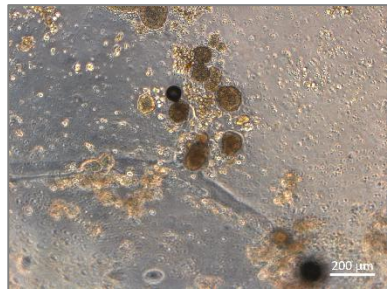
None



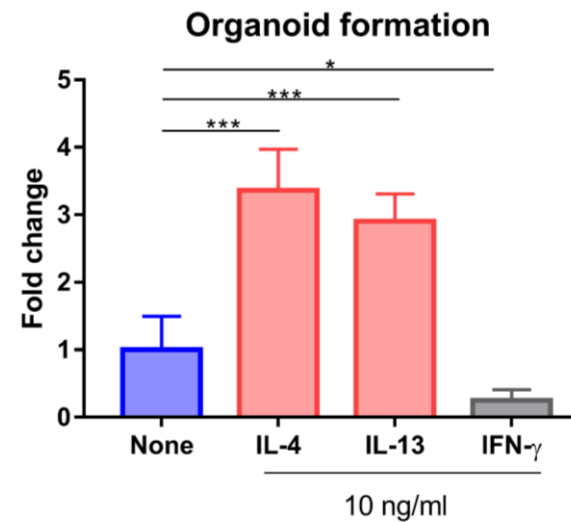
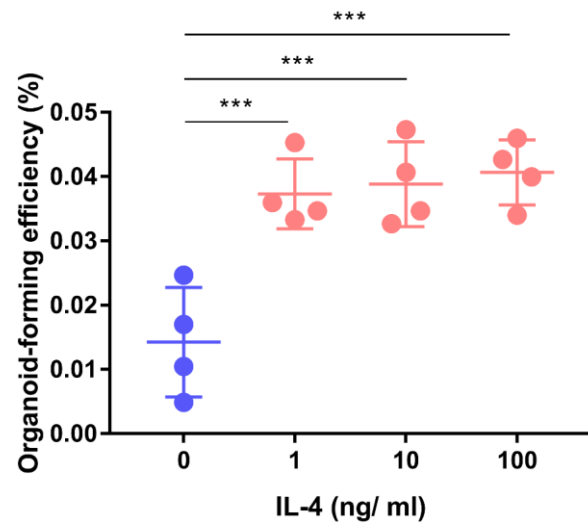
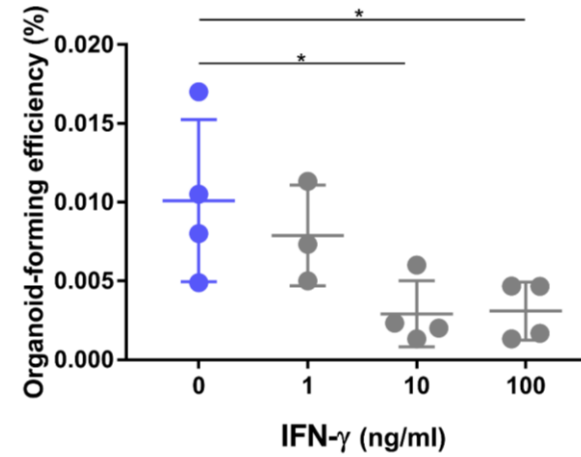
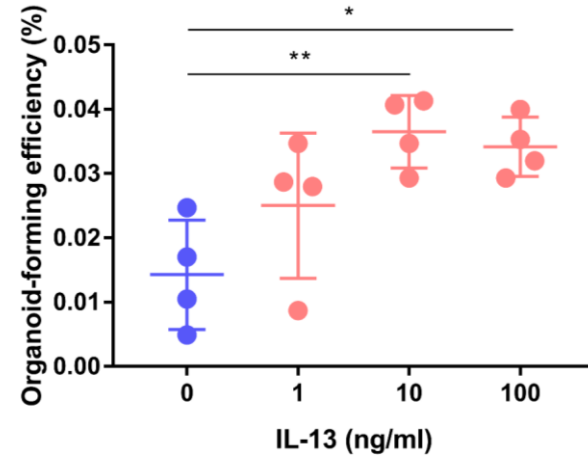
IL-4



IL-13



IFN-γ



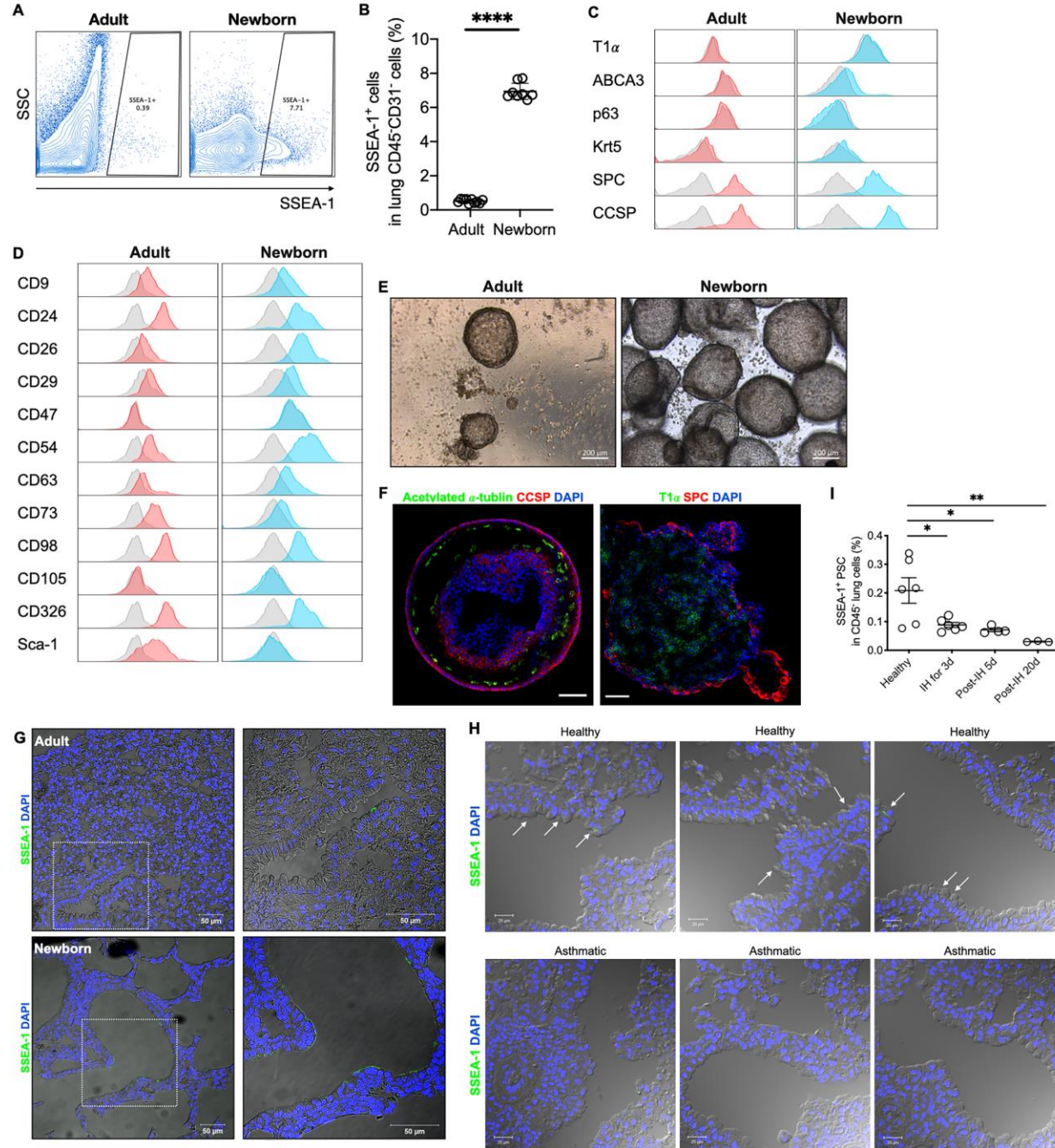


Figure 1

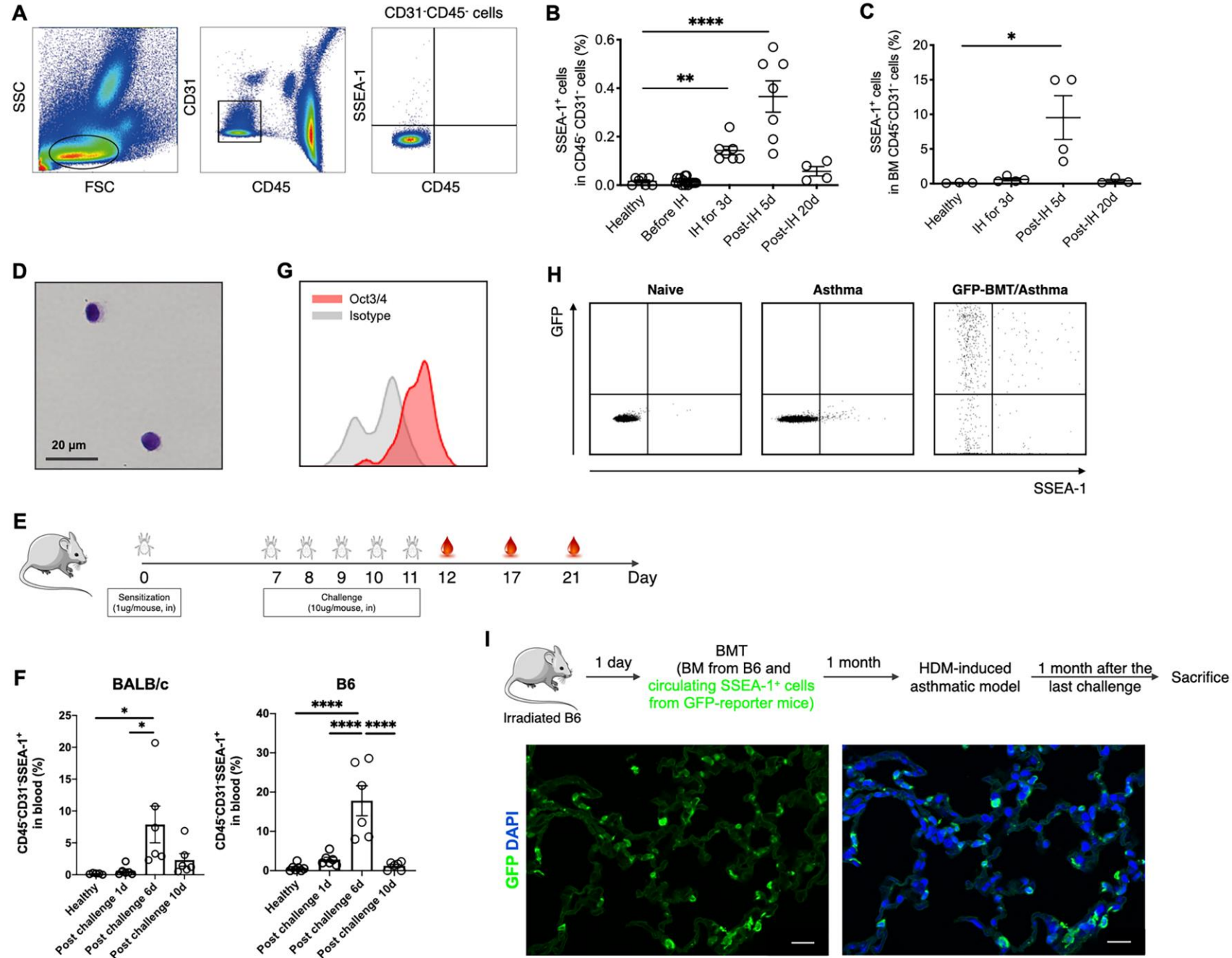


Figure 2

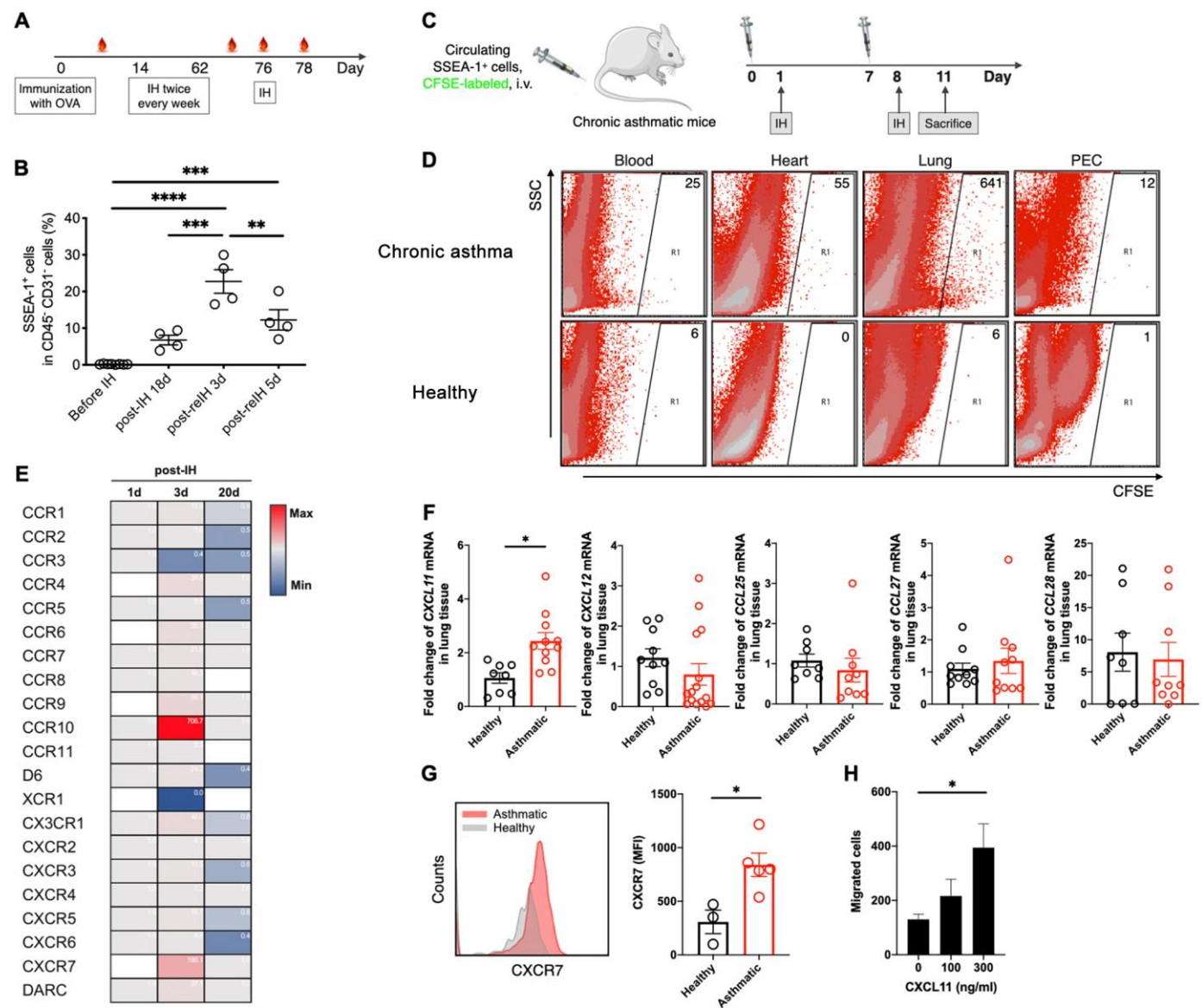


Figure 3

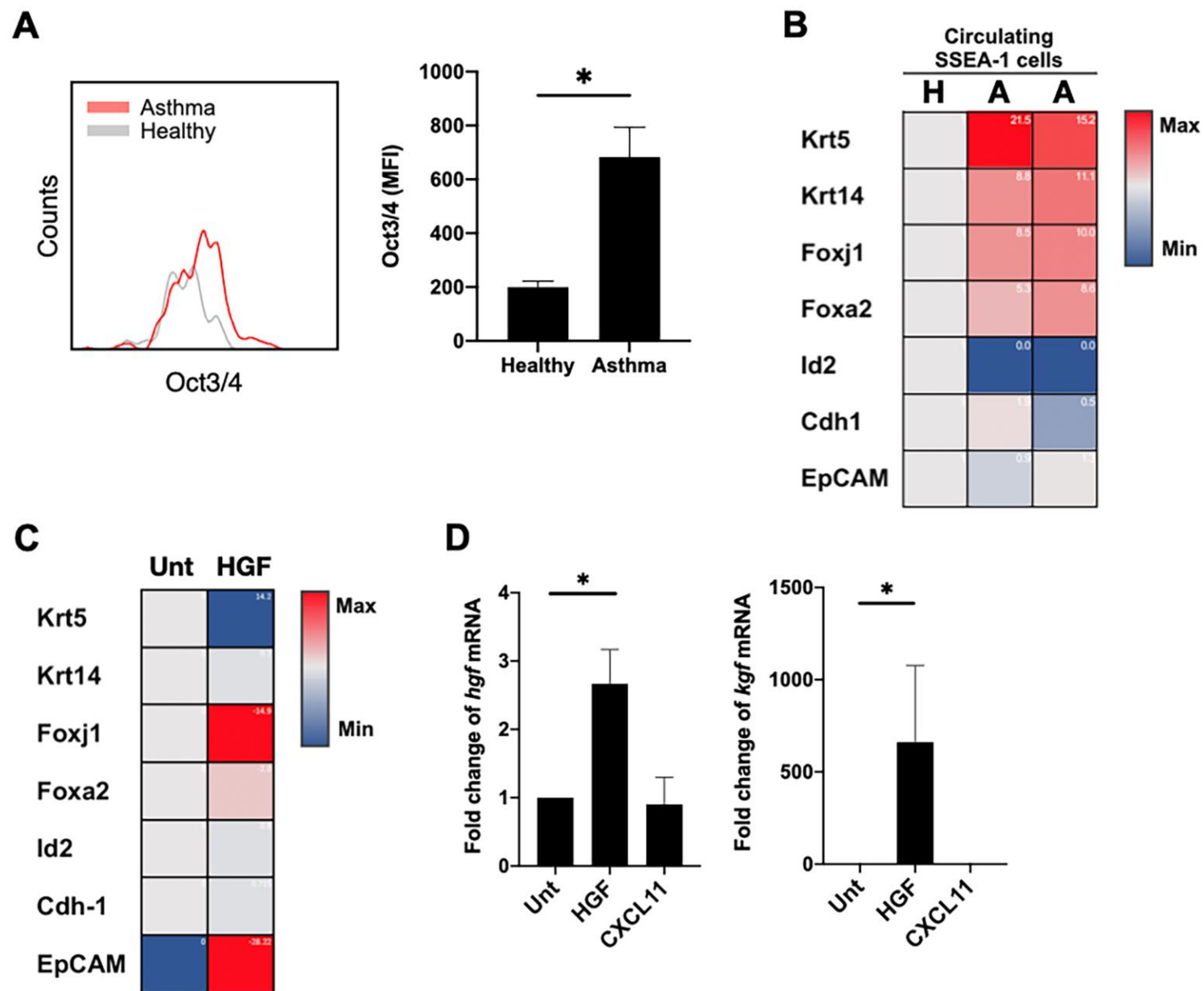


Figure 4

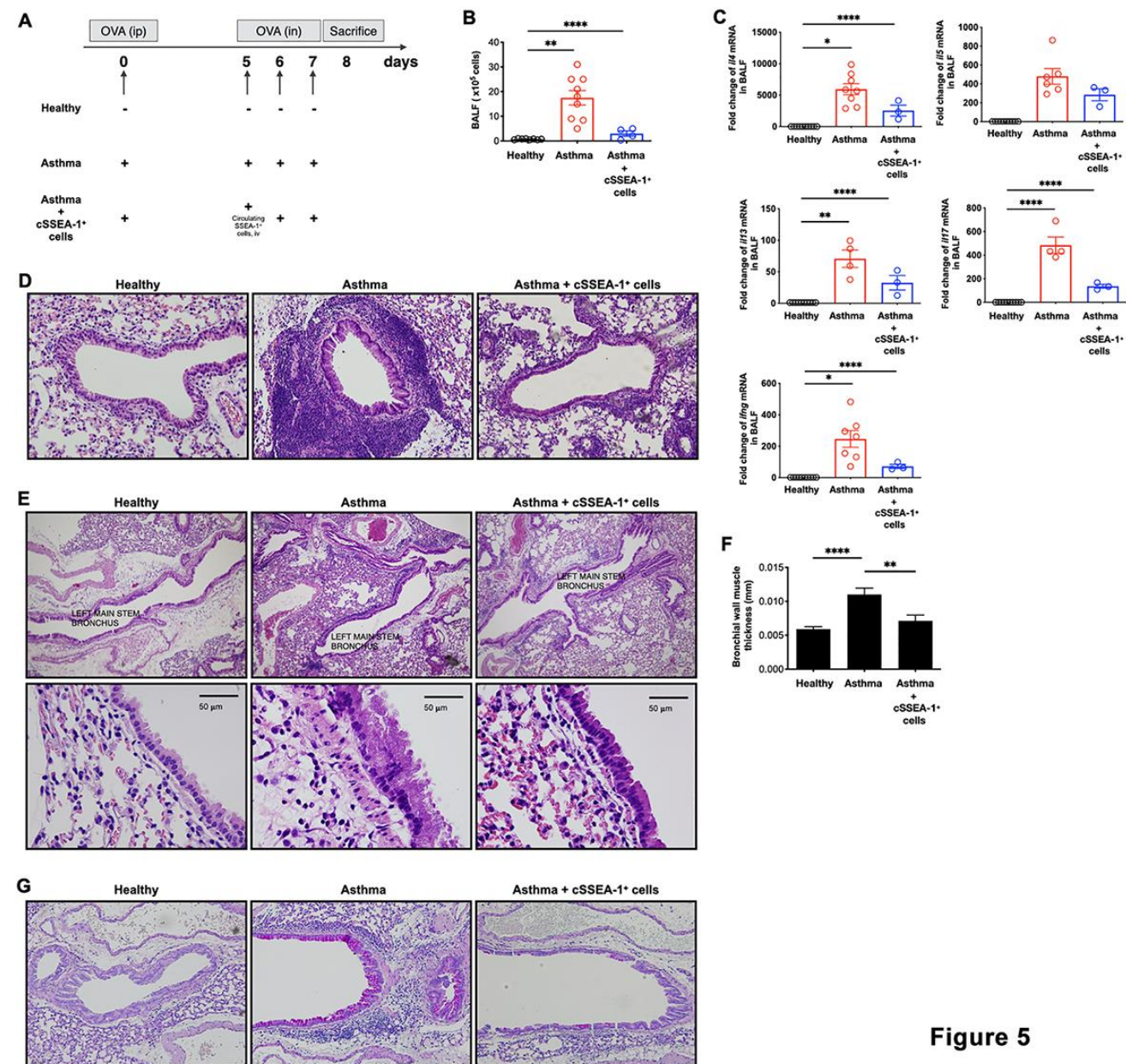
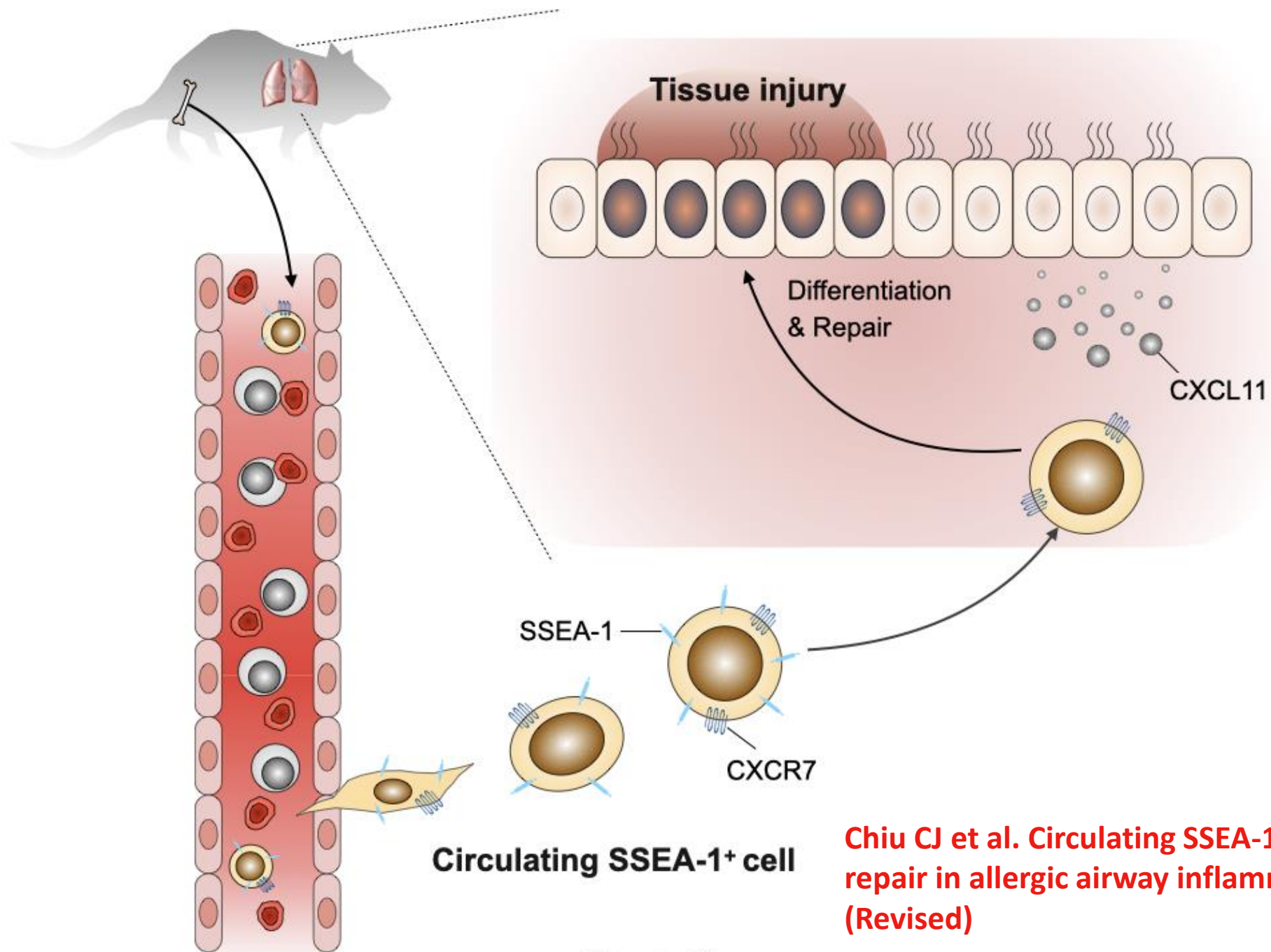


Figure 5



Chiu CJ et al. Circulating SSEA-1+ stem cells-mediated tissue repair in allergic airway inflammation. Cell Mol Life Sci (Revised)

Figure 6

專利

1. 治療呼吸道過敏的醫藥組成物 中華民國專利 第I 281859號
2. 氣喘治療的老藥新用專利 澳洲專利已通過
3. 利用siRNA來治療氣喘 美國和澳洲專利
4. 由紅藻純化的蛋白應用在氣喘的治療 美國和中華民國專利
5. 由忍冬桑寄生純化物應用在氣喘的治療 申請專利中
6. 過敏性紫斑的特異性診斷試劑 中華民國專利
7. 黑眼圈的電腦診斷軟體 中華民國專利
8. 針對Foxp-3的RNAi治療腫瘤 申請專利中

走自己的路！

作自己喜歡的事！

眼光要放遠！



Ph.D. : Doctor of Philosophy

謝謝聆聽！