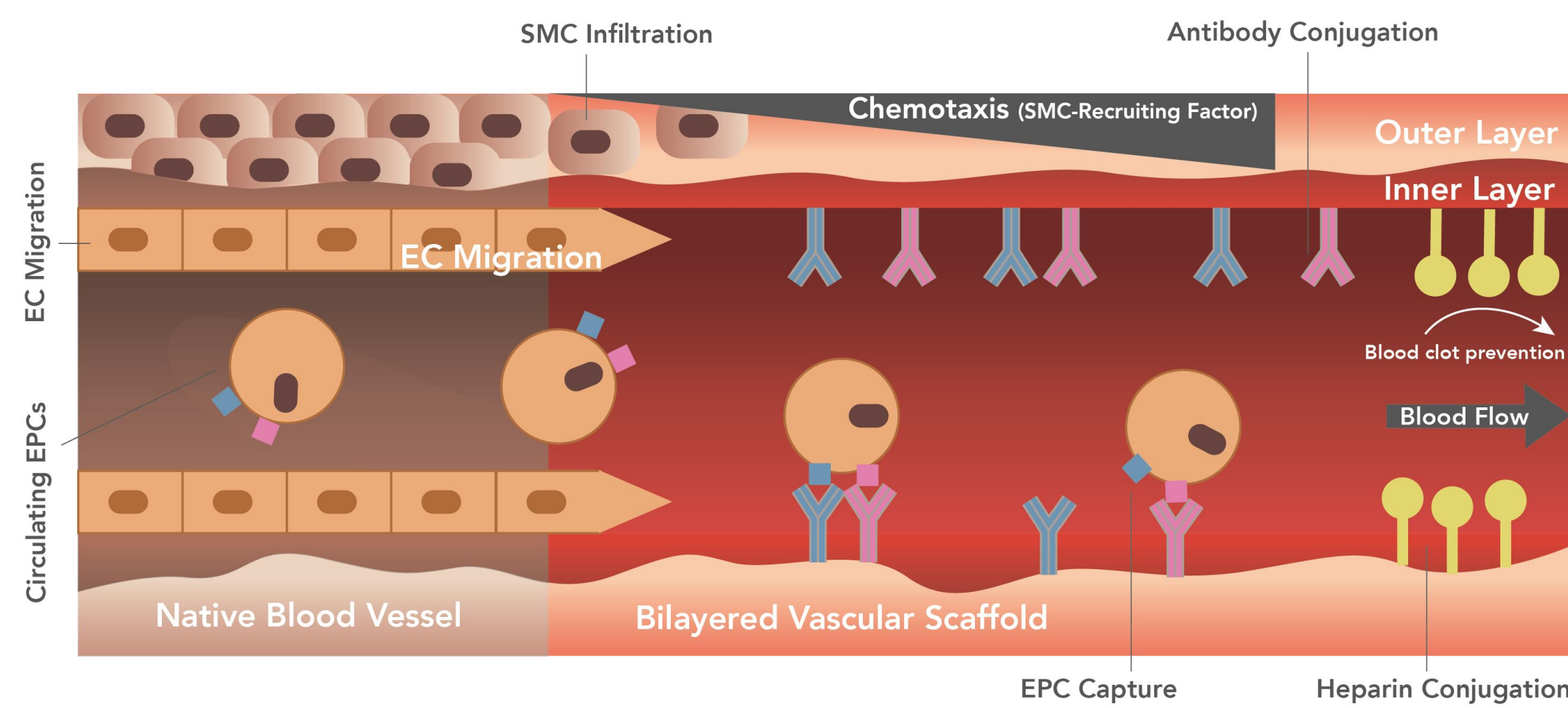


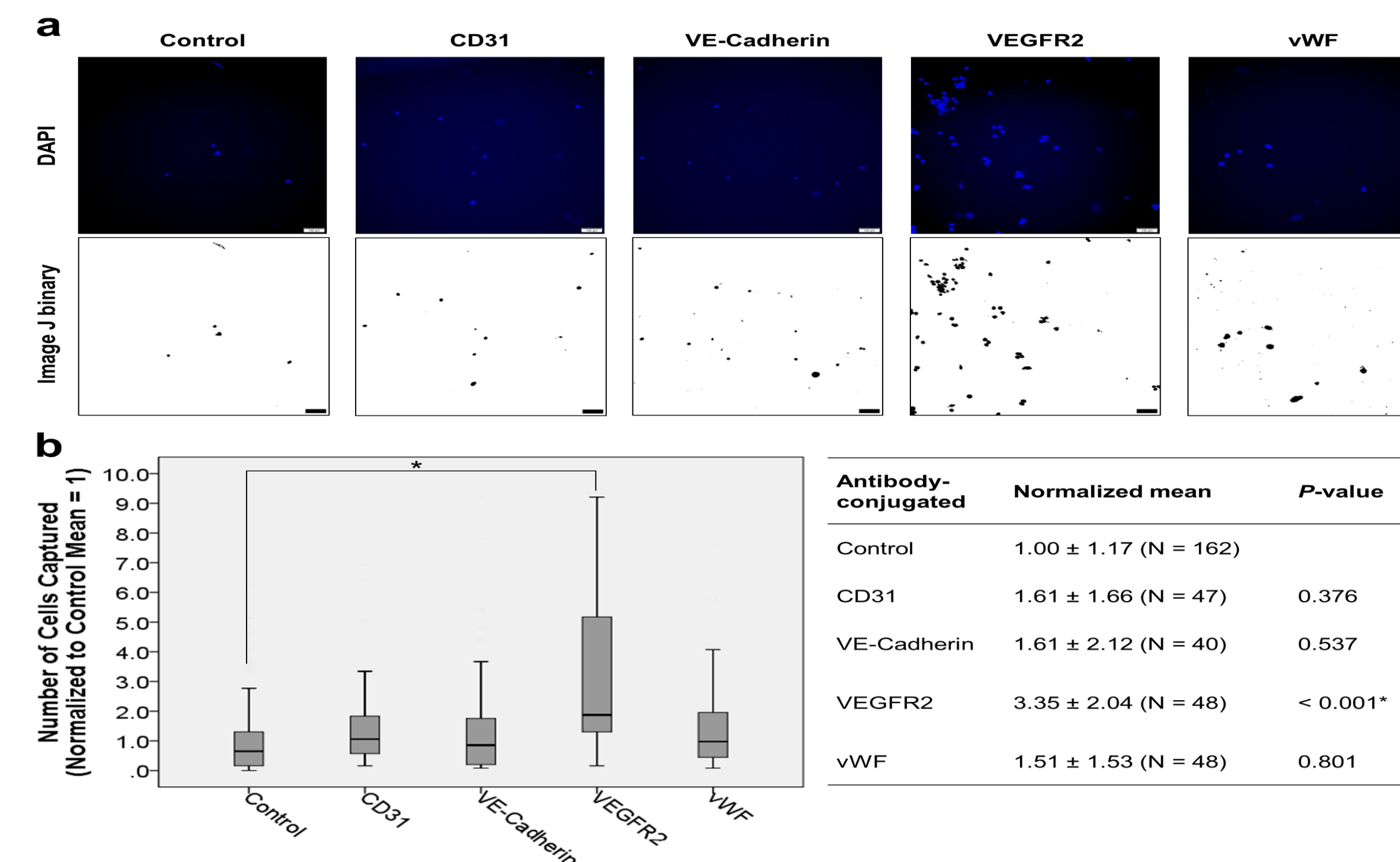
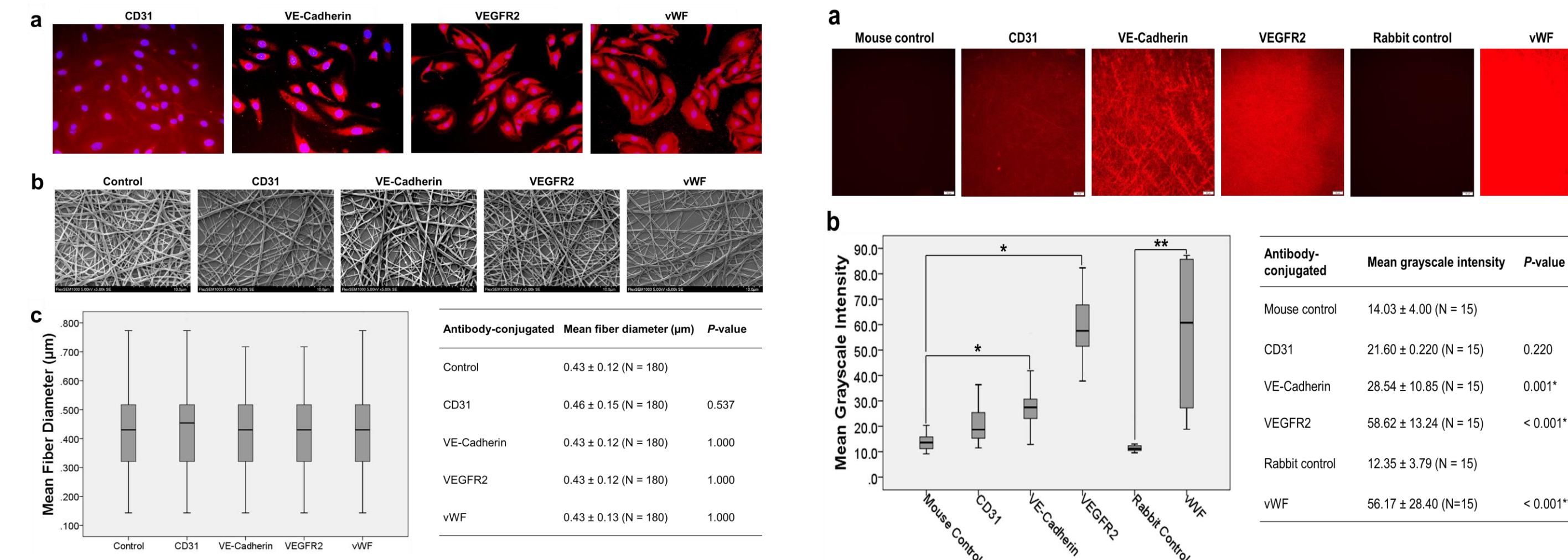
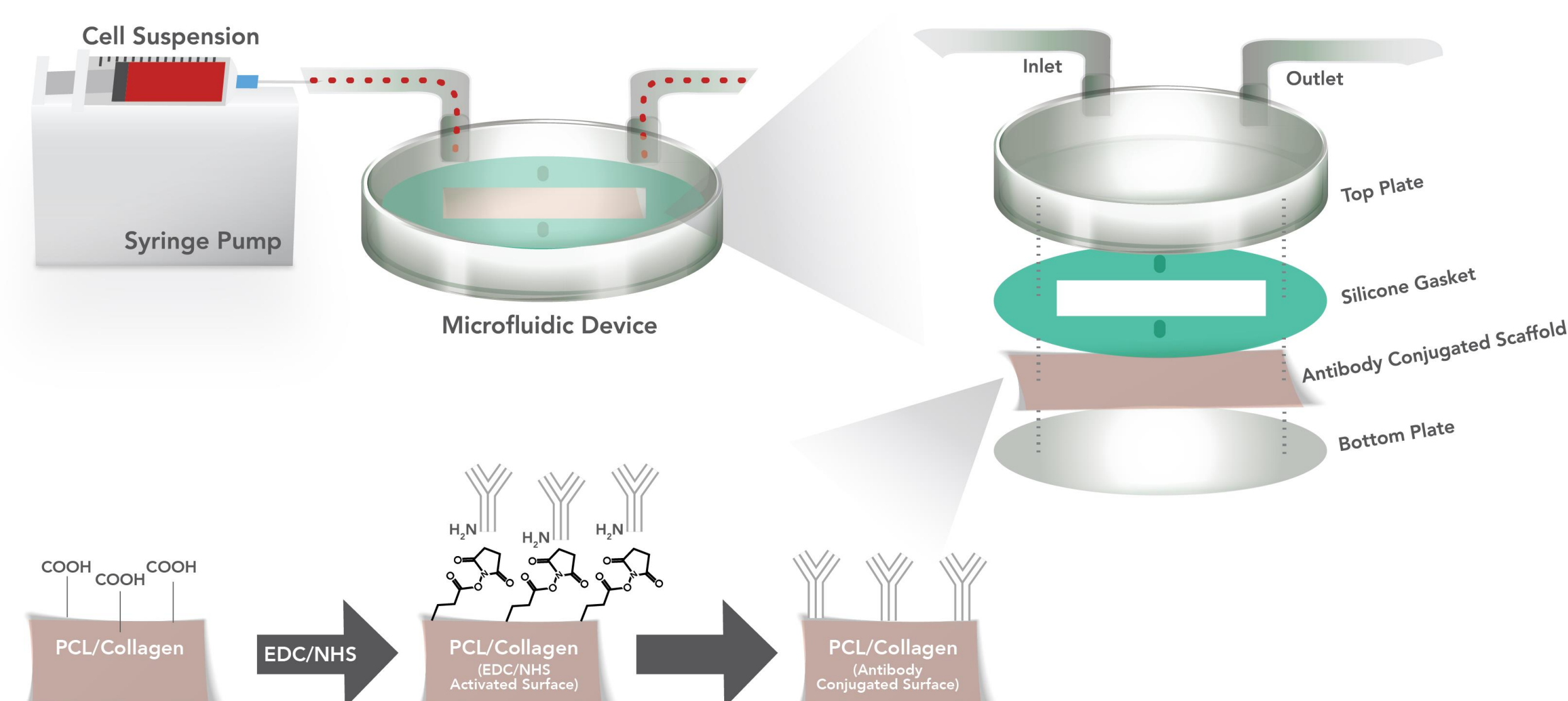
Objective

Tissue engineered vascular grafts (TEVGs) are promising alternatives to small-diameter prosthetic grafts. Previous methods of seeding tubular scaffolds with autologous vascular cells have been successful; however these methods require copious preparation time. Endothelial cell (EC) growth onto the luminal surface of the vascular scaffolds may be critical for integration of a TEVG to the host environment. An alternative approach for TEVGs includes the *in situ* endothelialization of acellular scaffolds by capturing circulating endothelial progenitor cells (EPCs) and ECs from the blood stream through biofunctionalization.

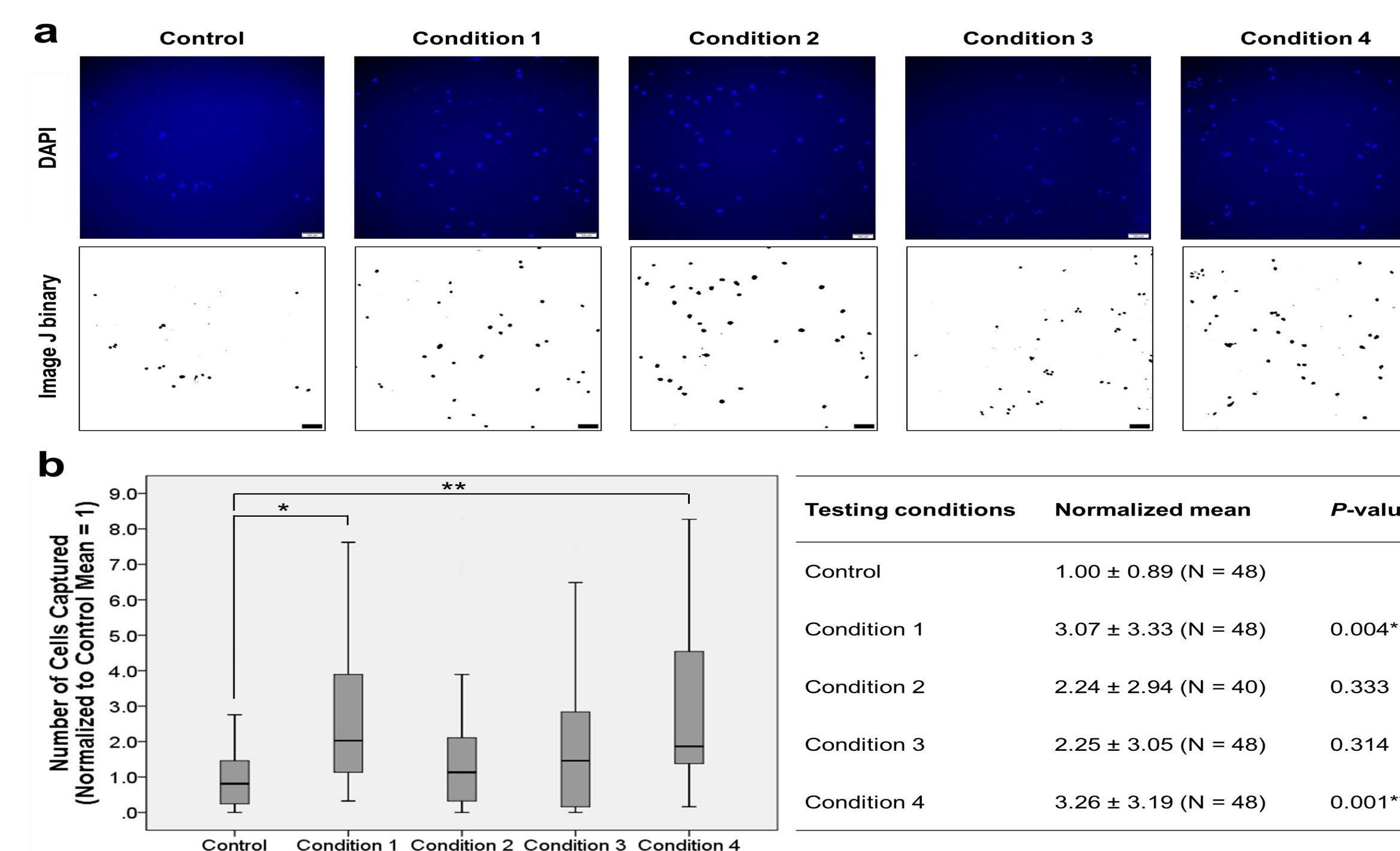


Methods

Fibrous scaffolds, analogous to the vascular lumen, were electrospun with a 1:1 poly(ϵ -caprolactone) (PCL)/collagen blend solution. Scaffolds were surface modified to immobilize EPC- and EC-specific antibodies, and compared to unmodified controls. The antibodies tested were CD31, vascular endothelial cadherin (VE-Cadherin), vascular endothelial growth factor receptor 2 (VEGFR2), and Von Willebrand factor (vWF). Microfluidic cell capture experiments were performed for each antibody using previously optimized conditions. The most efficacious antibodies were paired to examine synergistic cell capturing capabilities.



Testing conditions	Antibody-conjugated	Concentration of dilutions
Control	VEGFR2	100 µg/mL
Condition 1	VEGFR2 + CD31	100 µg/mL
Condition 2	VEGFR2 + VE-Cadherin	100 µg/mL
Condition 3	VEGFR2 + CD31	200 µg/mL
Condition 4	VEGFR2 + VE-Cadherin	200 µg/mL



Results

Antibody-conjugated scaffolds captured circulating cells at higher rates than unmodified scaffolds. Compared to controls, vWF-, CD31-, VE-Cadherin-, and VEGFR2-bound scaffolds captured more ECs than unmodified controls (1.00 ± 1.17 ; 1.51 ± 1.53 ; 1.61 ± 1.66 ; 1.61 ± 2.12 ; and 3.35 ± 3.04 , $p < .001$, respectively). Scaffolds bioconjugated with two antibodies demonstrated synergistic capture efficacy compared to bioconjugation with a single antibody. Compared to scaffolds bioconjugated with 100 µg/mL of VEGFR2, scaffolds bioconjugated with 50 µg/mL of both VEGFR2 and CD31, 50 µg/mL of both VEGFR2 and VE-Cadherin, 100 µg/mL of both VEGFR2 and CD31, and 100 µg/mL of both VEGFR2 and VE-Cadherin all captured more circulating ECs (1.00 ± 0.89 ; 3.07 ± 3.33 , $p < .05$; 2.24 ± 2.94 ; 2.25 ± 3.05 ; and 3.26 ± 3.19 , $p < .05$, respectively).

Conclusions

Capture of circulating EPCs and ECs can be optimized with bioconjugation of one or more antibodies on the luminal surface of TEVGs. This project has the potential to vastly improve upon existing TEVG approaches. While the use of immobilized antibodies has previously been proven to be advantageous in capturing ECs, comparisons between the efficacy of distinct antibodies has yet to be. Furthermore, the use of multiple antibodies for a synergistic effect in honing EC attachment to the lumen of engineered vessels is a novel approach in the application of TEVGs. This project contributes necessary knowledge to the field of tissue engineering in regard to the comparison of existing modalities.

References

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2. Lee, Sang Jin, et al. "Development of a composite vascular scaffolding system that withstands physiological vascular conditions." *Biomaterials* 29.19 (2008): 2891-2898.