PC 8802-0015

豬皮膠原蛋白免疫生成性之探討

Assays of the immunogenicity of the porcine dermal collagen membrane

計畫編號: NSC 88-2314-B-038-141

執行期限:87年8月1日至88年7月31日

主持人:吳金俊 執行機構:台北醫學院牙醫學系

一、中英文摘要

本研究之目的在檢測臺北醫學院自製的豬皮 膠原蛋白膜(porcine dermal collagen membrane; PDCM)是否具免疫生成性;以及戊二 醛之作用是否會改變其免疫反應。30 隻雄 性、重 350 克的白鼠,分為五組,其中四組為 實驗組,一組為對照組,每組6隻,將經三種 不同濃度(3,00%、0.05%、0,01%)戊二醛修飾 的 PDCM 以及未經戊二醛修飾的 PDCM 種入實驗 組的下顎骨區;對照組之手術方式同實驗組, 惟不植入 PDCM·於術後 3;6;9 週進行心臟穿刺 採集血清,並以酵素結合免疫分析法(ELISA) 检测;結果顯示未經戊二醛修飾的 PDCM 之免 疫生成性遠高於經戊二醛修飾之 PDCM,可見 戊二醛可降低 PDCM 之免疫生成性。而未經戊 二醛修飾的 PDCM (抗原)與經 0.01%、0.05%、 3.00%三種不同濃度戊二醛修飾的PDCM刺激產 生之抗體亦會產生交叉免疫反應,顯示經戊二 醛修飾的 PDCM 產生之抗體仍能辨視未經戊二 醛修飾的 PDCM 抗原,意即戊二醛雖能降低免 疫生成性,卻不致使抗原決定部位產生明顯改 變;由本實驗可知 PDCM 雖具免疫生成性,但可 以適宜濃度戊二醛修飾降低之。

關鍵詞:

豬皮膠原蛋白,戊二醛,免疫生成性,交叉免疫反應,酵素結合免疫分析法.

Abstract

Previous studies showed that crosslinking of porcine dermal collagen membrane (PDCM) with glutaraldehyde (GA) could retard its resorption rate and still preserve its biocompatibility. The purpose of this study was to assay the relevant humoral immune response induced by PDCM and the possible effect of GA on PDCM's immunogenicity. Thirty Sprague-Dawley rats were selected and divided into five groups (n=6). **PDCM** reconstituted with 3 different concentrations (0.01%, 0.05%, 3%) of GA and the non-GA crosslinked (non-GAX) PDCM were implanted in the submandibular region of rats. The sham procedure was done on the control without grafting. Three, six, and nine weeks after implantation, sera were collected by cardiac puncture and assayed for anti-collagen antibodies by ELISA. The architecture of PDCMs was also observed under SEM. The results revealed that anti-collagen antibodies induced by non-GAX PDCM were statistically significant higher than GAX PDCM. The sera in rats implanted with non-GAX PDCM cross-reacted with the GAX PDCM and vice versa. It indicated that the immunogenicity of non-GAX PDCM was stronger than GAX PDCMs, and that crossreactivity existed between antibodies induced by GAX antigen and non-GAX antigen. Under SEM, there were four different types of superficial structures: fibrillar structures, open pores, channels, and sheet-like structures. The greater concentration of GA, the surface architecture of PDCM looks denser. It is concluded that crosslinking of GA could change the superficial stereo architecture of PDCM and reduce its immunogenicity.

Keywords: porcine dermal collagen membrane (PDCM); glutaraldehyde; immunogenicity; cross-reactivity; enzyme-linked immunosorbent assay (ELISA).

二、緣由與目的

Collagens are the major component of mammalian connective tissues, and serve as the primary structural skeleton of tissues. Basically, they have phylogenetically conserved primary sequence and helical structure. The chemical structure and biological properties of collagen molecules make them useful in the production of suitable biomaterials.1 It is unsurprising that collagenbased biomaterials have been used since the midnineteenth century, when catgut was used as suture material.2 In the past two decades, numerous collagen-based biomaterials have been used clinically; for example, injectable soluble collagen has been used as a subcutaneous implant to correct dermatological defects.3,4 However, questions concerning the immunogenicity were raised soon after their clinical applications. Although conservation exists among the collagen molecules of different species, there are structural and sequence differences that can induce the host to mount an immune response to heterogenic collagens. The strength of immunogenicity is inversely associated with the degree of similarity of component and structure between host and the foreign protein. Consequently, any foreign protein that shares high degree of similarity with host protein is less likely to induce immune response and reveals high biocompatibility.

A number of immunological studies have been performed on clinically used collagen graft. 5,6 Cooperman' reported that about 3% of patients after receiving bovine collagen implant for therapeutic purpose produced antibody against bovine collagen. In addition, Siegle⁸, Ellingsworth9, pointed out after that intradermal injection of bovine collagen. anticollagen antibody was observed in the serum. These results document that heterologenic collagens do have immunogenicity.

DeLustro¹⁰ compared the immunogenicity of several collagen products prepared by different methods and found that glutaraldehyde (GA) modification resulted in decrease immunogenicity. Also, the experiments conducted by Oliver, Grant¹¹, Griffiths¹² and McPherson^{13,14} proved that GA modified collagen, implanted in human or animal, exhibited a great degree of fibroblast infiltration, vascularization, with only temporary inflammatory reaction, and no obvious immune response. These results indicate that chemical modification of collagen might reduce the immunogenicity of collagen.

Moreover, another problem occurred in Europe beginning in 1991 when it was found that cattle dying from bovine spongiform encephalopathy (BSE). As this infectious agent could infect the human being, concerns about the safety of the use of medical devices derived from bovine species were aroused 15.

We have been interested in developing alternatives of biomaterial from porcine collagen. Since 1992, we have prepared a biomedical device from porcine collagen16 and named it porcine dermal collagen membrane (PDCM). Collagen was extracted from porcine dermis and treated with pepsin to remove the telopeptide, an immunogenic end, and finally GA was added to induce crosslinking reaction. Primary achievements, including studies on its

and biodegradability¹⁷, biocompatibility healing of bony defects in guided regeneration technique¹⁸, and its properties¹⁹, have been made from the tests on the characteristics of PDCM after GA crosslinkage. From the findings thus obtained, the following characteristics of PDCM after GA modification been verified: biocompatibility and have biodegradability, effect in guided regeneration, ideal elastic modulus, controllable resoluble rate, proper cellular permeability, and controlled membrane expansion rate.

We attempted here to examine the possible effects of GA modification on the immunogenicity and surface structure of porcine dermal collagen membrane. PDCM was implanted into submandibular region of rats, and serum anticollagen antibodies were measured by ELISA (Enzyme-Linked Immunosorbent Assay). In assessing cross-reactivity, the serum was allowed to react with both its homologous and heterologous antigens.

三、結果與討論

Results Anti-collagen Antibody

The antibody levels in rats implanted with PDCM were shown in Fig.1. It was observed that the anti-collagen antibody levels in rats implanted with non-GAX PDCM were statistically significant higher than 3 other groups implanted with GAX PDCM (p <0.01). Sera from rats implanted with the GAX PDCM demonstrated low antibody response against their respective implant materials, and the intensities of immune response among the 3 GAX test groups showed no statistically significant difference (p >0.05). The amount of antibody in the non-GAX PDCM group increased gradually in accordance with the length of time after implantation. While no such tendency were observed in rats receiving GAX PDCM implants.

Cross-Reactivity Test

Sera from rats 9 weeks post-implantation with either non-GAX or GAX PDCMs were tested for cross-reactivity by ELISA, and the results were shown in Table 1. The antibody against non-GAX PDCM cross-reacted with GAX PDCM and vice versa. The antibody against non-GAX PDCM reacted stronger to its homologous antigen, the

implanted PDCM, than the heterologous antigens. It is surprising that antibodies against GAX PDCM reacted stronger to its heterologous antigen (the non-GAX PDCM), than to its homologous antigen (the GAX PDCM) significantly (p<0.01). And the antibodies to various different concentrations of GAX PDCM cross-reacted with each other in similar low activity with no statistically significant difference were noted (p>0.05).

SEM Observation

Under SEM examination, the structure of PDCM conditioned with different levels of GA could be divided into four categories. ²⁰ (1) fibrillar structure: collagen fibers composed of aggregated collagen fibrils dispersed on the surface; (2) open pores: characterized by two aspects, surface pores formed from a series of open semiellipsoids, or hemispheres with walls that frequently had sheet-like structure; (3) channels: formed from open surface pores that stretched into the deeper layer of the sponge; and (4) sheet-like structures: formed a flat smooth surface.

In Fig.2, we can see that PDCMs crosslinked by different levels of GA displayed obvious differences in their structural patterns. For the non-GAX PDCM (Fig. 2a), loosely arranged fibrillar structure, different sizes of open pores, and channels connected with deep structure in between collagen fibers could be seen. For PDCM conditioned by 0.01% of GA (Fig. crosslinking effect among collagen fibers could be observed, while less fibrillar structure was seen than that observed in non-GAX PDCM (Fig. 2a). The distribution of pores and channels was still evident. However, its size was obviously smaller than that in Fig. 2a, mild crosslinking effect was noted for the little shallow and flat sheet-like structures. For PDCM conditioned by 0.05% of GA (Fig. 2c), crosslinking effect among collagen fibers was quite obvious, few fibrillar structure could be seen, with small size and amount of pores scattering around occasionally. Nearly complete sheet-like structure was seen on the surface. For the PDCM conditioned by 3.00% of GA (Fig. 2d), crosslinking effect among collagen fibers was quite ideal. Almost all collagen fibers were polymerized into complete sheet-like structure with folds formed. Neither pore nor channel was seen and the structure was tightened and complete.

Discussion

This study allows a comparison of the immunogenicity of GA crosslinked (GAX) and non-GA crosslinked (non-GAX) porcine dermal collagen. PDCMs were implanted into the submandibular region of rats, the original design for this animal model is to simulate the clinical condition under which the collagen membrane is used to repair jaw bone defects. Sera from rats were used to measure anti-collagen antibody by ELISA. Antibody responses to collagen were noted 3 weeks post-implantation. But anti-collagen antibody levels in sera from rats implanted with non-GAX PDCM were higher, and persisted longer, than that of rats implanted with GAX PDCM, as shown in Fig. 1. At any time during the course of immune response, the antibody levels in rats implanted with non-GAX PDCM is higher, and this discrepancy became more obvious 9 weeks post-implantation, when the antibody level is about 7-fold higher (p<0.01). Although the kenetics of antibody responses in all tested rats were similar, i.e., a lag period followed by a logarithmic phase, the antibody levels in rats implanted with GAX PDCMs reached peak at the 6th week post-implantation and then declined. The results suggest that GA crosslinking affect both the strength and duration of antibody response to porcine collagen.

The mechanism responsible for the decrease of immunogenicity of GAX collagen is not vet clearly understood. There might be two possible explanations, at least, as suggested in the present study. First, it is due to decrease in degradability. The development of humoral immune response to protein antigen requires the participation of Th cells. For activation of Th cells, antigen must be taken up, processed, and presented in association with major histocompatibility complex (MHC) molecule by antigen presenting cells. Any foreign protein that cannot be degraded and is inaccessible to Th cells, will as a consequence be poorly immunogenic or nonimmunogenic. As we pointed out in our previous study17, PDCM crosslinked with 3% GA was apparently intact at the 9th week post-operation, while the non-GA crosslinked PDCM was almost completely degraded within 3 weeks. The results suggest that GA crosslinking of collagen render it resistant to degradation, resulting in longer persistence in the body and reduced immunogenicity. And secondly, the conformation of collagen molecule is changed or masked. The antibody specificity is speciesdependent and genetically regulated²¹; it is known that rats recognize the conformational determinants on collagen molecule. Due to conformation changes or stereo hindrance, GA-crosslinked collagen molecule is not recognized by rat lymphocytes any more. As can be seen in Fig. 2, the surface structure of GA-treated PDCM became denser. Recent study²² performed by Bowers et al. showed that the response of cells or tissue interfaces could be affected by surface topography of implants.

As shown in table 1, all sera from rats implanted with either non-GAX or GAX PDCM produced antibody against the implants. The sera in rats implanted with non-GAX PDCM crossreacted with the GAX PDCM and vice versa. The serum from rats implanted with non-GAX PDCM reacts stronger to its homologous antigen (the non-GAX PDCM) than does the heterologous antigen (the GAX PDCM). Of particular interest is one point, we found that the antibody against GAX porcine collagen reacts more strongly to the heterologous antigen than does its homologous antigen. These results suggest that the GA treatment does not change the antigenic determinants of collagen molecule. The possible explanation is that treatment with GA results in intermolecular crosslinking and lattice formation in such a way as to mask the antigenic determinants on the original collagen molecule, making them unavailable to antibody molecule. This speculation is verified by the SEM observation in the present study.

The results as shown in Fig.1 seem to suggest that the immunogenicity of non-GAX PDCM was higher than that of GAX PDCM. However, since the serum samples used in this study are undiluted, this may imply that antibody levels are not high, i.e. the immunogenicity is weak or low. It has been known that the telopeptide domain of collagen molecule contains the greatest species variability.²³ In the present study the telopeptide domain was removed by pepsin, and this minimized the immunogenicity.

四、計畫成果白評

研究內容基本上與原計畫相符,雖增加豬 皮膠原蛋白膜在電子顯微鏡下之研究觀察,惟 實驗動物數量有所減少,但所得實驗結果仍頗 具學術應用價值。在預期目標達成上,除免疫 墨點結果不如預期理想將繼續進行測試外,其 餘部分皆已達成預計目標。 本研究成果足以證實臺北醫學院自製之 豬皮膠原蛋白膜經蛋白脢消化酵素處理後已 不具強烈的免疫生成性,而經由戊二醛之修飾 作用,更可使其免疫生成性降低。

本一年期之研究成果應具相當之學術應用 價值,因此已計畫將之發表於國際性學術研究 期刊。

五、参考文獻

- Chvapil M. Reconstituted collagen. In: Virdok A, Vuust J. eds. Biology of collagen. London: Academic Press Ltd. 1980: 313-324.
- Furthmayr H, Timpl R. Immunochemistry of collagens and procollagens. Int Rev Connect Tissue Res 1976; 7: 61-99.
- Knapp T.R., Luck E, Daniels J.R. Behavior of solubilized collagen as a bioimplant. J Surg Res 1977;23:96-105.
- 4 Knapp T.R., Kaplan E.N., Daniels J.R. Injectable collagen for soft tissue augmentation. Plast Reconstr Surg 1977;60:39-45.
- Quteish D, Dolby AE. Immune responses to implanted human collagen graft in rats. J Periodont Res 1991; 26:114-121.
- 6 Gay S, Fine JD. Characteristics and isolation of poly and monoclonal antibodies against collagen for use in immunochemistry. Methods Enzymal 1987; 145: 148-167.
- Cooperman L, Michaeli D. The immunogenicity of injectable collagen. I: An one year prospective study. J Amer. Acad. Dermatol 1984; 10: 638-646.
- 8. Siegle RJ, McCoy JP, Schade W, Swansan NA. Intradermal implantation of bovine collagen. Humoral immune responses associated with clinical reactions. Archs Dermatol 1984; 120: 183-187.
- 9. Ellingsworth LR, DeLustro F, Breman JE, Sawamura S, McPherson J. The human immune response to reconstituted bovine collagen. J Immunol 1986; 136: 877-882.
- 10. DeLustro F, Condall RA, Nguyen MA, McPherson JM. A comparative study of the biologic and immunologic response to medical device derived from dermal collagen. J Biomed Mater Res 1986; 20: 109-120.
- 11. Oliver RF, Grant FA, Cox RW, Cooke A. Effect of aldehyde cross-linking on human

- dermal collagen implants in the rat. Br.J. Exp. Pathol. 1980; 61:544-549.
- Griffith RW, Shakspere PG. Human dermal collagen allograft -- a three year histological study. Br J Plastic Surg 1982; 35:519-523.
- 13. McPherson J.M., Ledger P.W., Sawamura S., Conti A., Wade S., Reianian H, Wallace D.G. The preparation and physiochemical characterization of an injectable form of reconstituted, glutaraldehyde crosslinked, bovine corium collagen. J. Biomed. Mater Res 1986; 20:79-92.
- McPherson J.M., Sawamura S., Armstrong R. An examination of the biologic response to injectable, glutaraldehyde crosslinked collagen implants. J. Biomed. Mater Res 1986; 20:93-107.
- 15. Sogal, A; Tofe, A J. Risk assessment of bovine spongiform encephalopathy transmission through bone graft material derived from bovine bone used for dental applications. J Periodontol 1999;70: 1053-1063.
- 16. Chen S.R. Physicochemical properties of collagen and retinoic acid and their interaction. Master Thesis, 1992. Graduate Institute of Pharmaceutical Science, Taipei Medical College.
- Lu HK, Wu KJ. An in-vivo study of the biocompatibility and biodegradability of porcine dermal collagen membrane. Chin Dent J 1995; 14:38.
- 18. Lu HK, Wu KJ. The effect of porcine dermal collagen membrane on the healing of bony defects in guided bone regeneration technique. Chin Dent J 1996; 15(2): 106-118.
- Lu HK, Lee SY, Lin FP. Elastic modulus, permeation time and swelling ratio of a new porcine dermal collagen membrane. J Periodont Res 1998; 33:243-248.
- Doillon C.J., Whyne C.F., Brandwein S., Silver F.H. Collagen-based wound dressings: control of the pore structure and morphology. J.Biomed Mat Res 1986;20:1219-1228.
- Pontz B., Meigel W., Rauterberg J., Kuhn K. Localization of two species specific antigenic determinants on the peptide chains of calf skin collagen. Eur. J. Biochem 1970;16: 50-54.
- 22. Bowers KT., Keller J.C., Randolph B.A., Wick D.G., Michaels C.M. Optimization of surface micromorphology for enhanced osteoblast responses in vitro. Int. J. Oral Maxillofac. Impalnts 1992;7:302-310.

23. Timpl R. Furthmayr H. Beil W. Maturation of the immune response to soluble rat collagen: late appearance of antibodies directed to N-terminal sites of the α 2-chain. J.Immunol 1972;108;119-25.

Figure legends

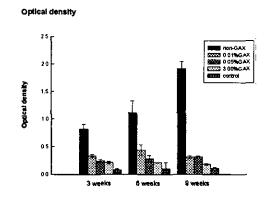


Fig.1. Antibody responses to PDCM treated or untreated with different concentrations of GA measured by ELISA at scheduled time intervals. The results were expressed in OD as mean \pm S.D. for each group. Undiluted serum samples were used.

Fig. 2. Structural patterns of PDCMs treated by different levels of GA examined under SEM (\times 100). (The SEM photographs can't be enclosed in the text)

Table 1. Cross-reactivity* between GAX and non-GAX PDCM

Ag Serum Ab	non-GAX PDCM Ag	0.01%GAX PDCM Ag	0.05%GAX PDCM Ag	3.00%GAX PDCM Ag
Non-GAX				
PDOM Ab.	1.158±0.026	0.277±0.008	0.290±0.012	0.317±0.008
0.01%GAX				
PDOM Ab.	1.189±0.032	0.375±0.013	0.367±0.015*	0.390±0.011
0.05%GAX				
PDCM Ab.	1.293±0.030	0.270±0.006	0.251±0.008	0.268±0.009
3.00%GAX				1
PDCM Ab.	0.821±0.024	0.259±0.011	0.377±0.009	0.322±0.014
Control	0.149±0.007	0.097±0.005*	0.090±0.006°	0.050±0.007

^{*} expressed in OD value (mean±S.D.)

^{&#}x27;Significantly difference (p<0.01)