

Comparison of muscle-derived stem/progenitor cells and bone marrow mesenchymal stem cells for the treatment of acute kidney injury / Egle Pavyde, Romaldas Maciulaitis, Ernesta Ivanauskaite Didziokiene, Neringa Sutkeviciene, Justinas Maciulaitis, Mantas Malinauskas, Judita Zymantiene, Maksim Bratchikov, Arvydas Usas

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Introduction. The skeletal muscle-derived stem/progenitor cells (MDSPCs) have been thoroughly investigated in preclinical studies. However, the therapeutic potential of MDSPCs for acute kidney injury (AKI) has only been evaluated by our research group. We aimed to compare MDSPCs with bone marrow mesenchymal stem cells (BM-MSCs) and to evaluate their feasibility for the treatment of AKI. Materials and methods. Rats were randomly assigned to one of four groups: healthy controls, AKI group, AKI treated with MDSPCs, AKI treated with BM-MSCs. AKI was induced by gentamicin (80 mg/kg/day; i.p.) for 7 consecutive days. PKH-26-labeled MDSPCs and BM-MSCs (1X10⁶ cells/animal) were injected intravenously 24 hours after the last gentamicin injection. Physiological and histological kidney parameters were determined on day 0, 8, 14m 21m 28, 35 (6 animals per time point). Results. Both, MDSPCs and BM-MSCs accelerated functional kidney recovery and regeneration, as reflected by significantly lower serum creatinine levels and renal injury scoring, higher urinary creatinine and GFR levels (p<0.05) compared with the nontreated AKI group. PKH-26 labelled MDSPCs and BM-MSCs were present in the renal cortex on day 9, day 21 and day 35, indicating the capacity of both cell types to migrate and populate the renal tissue. There was no significant difference in any parameters between MDSPCs and BM-MSCs at any time points (p>0.05). [...].

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