

# Perinatal stem cells efficacy in the prevention of acute kidney injury progression to chronic kidney injury. Preclinical model

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Introduction: Acute kidney injury (AKI) is a dangerous condition. Its episodes can lead to chronic kidney disease (CKD). There is no effective and timely treatment. Therefore, it is very important to develop a new strategy for maintaining and improving the kidney function. Currently, regenerative medicine, especially human placental mesenchymal stem cells (hPSCs), is the most promising area. Methods: Human placental amniotic and chorionic cells have been isolated. hPSCs have been cultivated and characterized by yield, viability, flow cytometry and potency in vitro. Rats underwent preclinical ischemia-reperfusion injury (IRI). Experimental group received 3x105 of hPSCs in each kidney, control group - phosphate buffer solution (PBS), untreated group - only induced IRI. Urine, blood serum samples and kidneys for histological analysis collected. Results: hPSCs had a consistent yield, viability, mesenchymal stem cell markers expression and suppressed proliferation of T cells in a dose-dependent fashion. hPSCs increased survival and kidneys function by decreased creatinine, urea in serum in compare with surviving rats in control groups. Cells decreased renal injury scores and prevented chronic injury by reduced kidneys structural damage compare with control groups. Conclusion: Although hPSCs are not use widely in preclinical and clinical trial yet, however, in the present study, we demonstrated that hPSCs have the potential to prevent initial kidney fibrosis cascade through ameliorating initial kidney damage and improving kidney function.

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