

CORNING

Innovation Showcase: Advanced 3D Cell Culture Tools and Revolutionary Models



Welcome and Introduction



Tools to Accelerate 3D Cell Culture

Austin Mogen, Ph.D., Senior Field Applications Scientist, Corning Life Sciences



Patient-derived Organoids: A Revolutionary New Model to Advance Precision Medicine

Sylvia Boj, Ph.D., Chief Scientific Officer, HUB Organoids

The background of the slide features several clusters of orange, textured spheres that resemble 3D cell cultures. These clusters are of varying sizes and are positioned in the upper right, lower right, and bottom center areas of the frame. The texture of the spheres is highly detailed, showing individual cells and their interactions within the clusters. The overall color scheme is a warm orange against a white background.

3D Cell Culture: Introduction

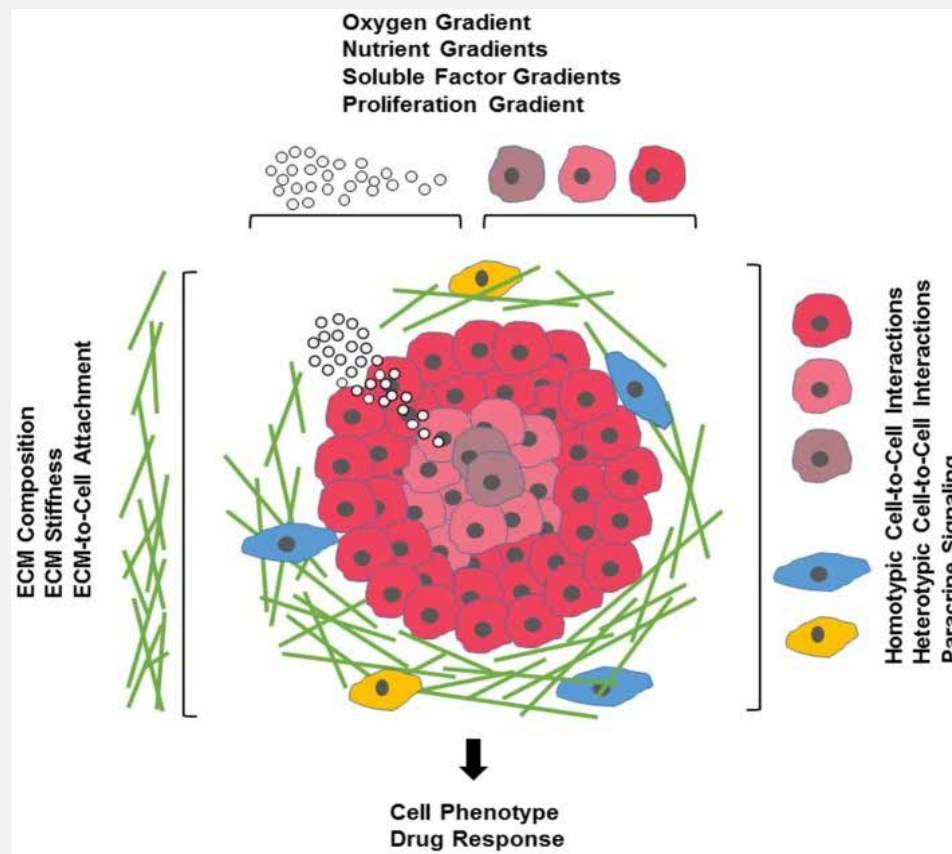
Why 3D? Biological Factors Captured by 3D Cell Culture

**Extracellular
Matrix
Composition**

**Substrate
Stiffness**

**Concentration
Gradients**

**Multiple Cell
Types**



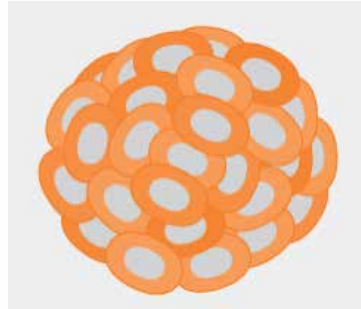
“An ideal 3D cell culture model would include cell-to-cell and cell-to-ECM interactions, tissue-specific stiffness, oxygen, nutrient and metabolic waste gradients, and a combination of tissue-specific scaffolding cells”

Preclinical Models Comparison

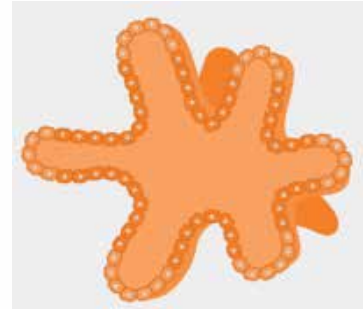
2D



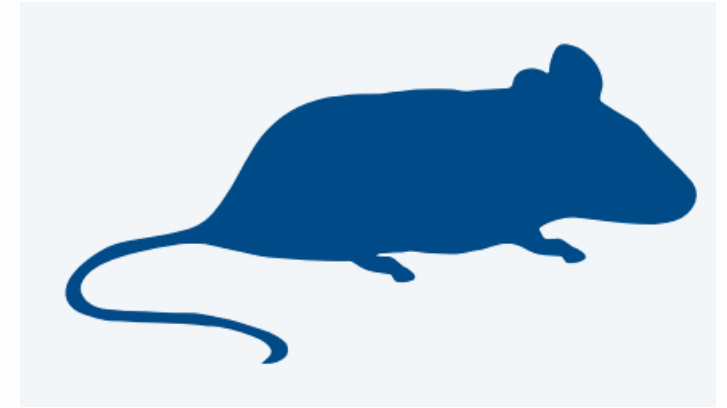
Spheroids



Organoids



Mouse



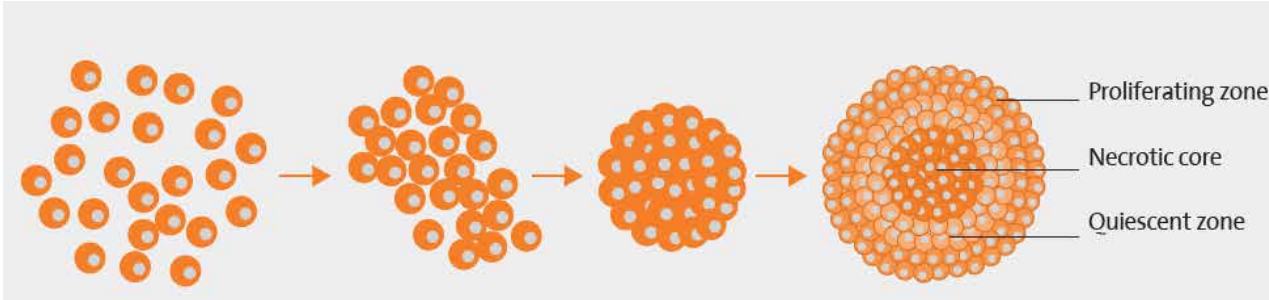
Ease of use

Biological Complexity

Throughput

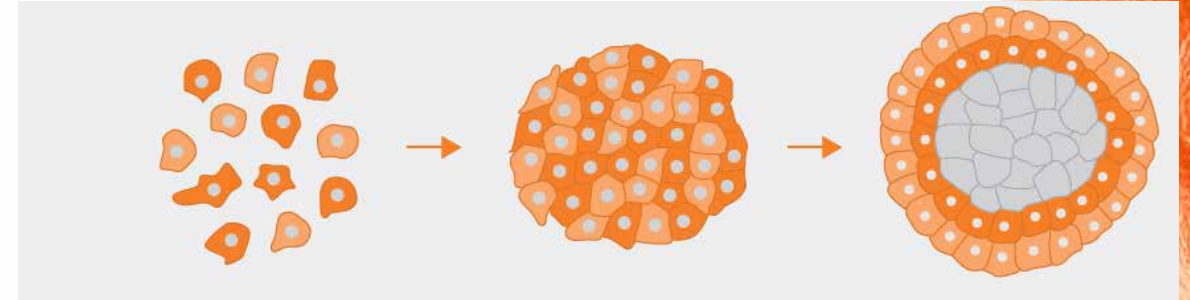
Spheroids vs. Organoids

Spheroids



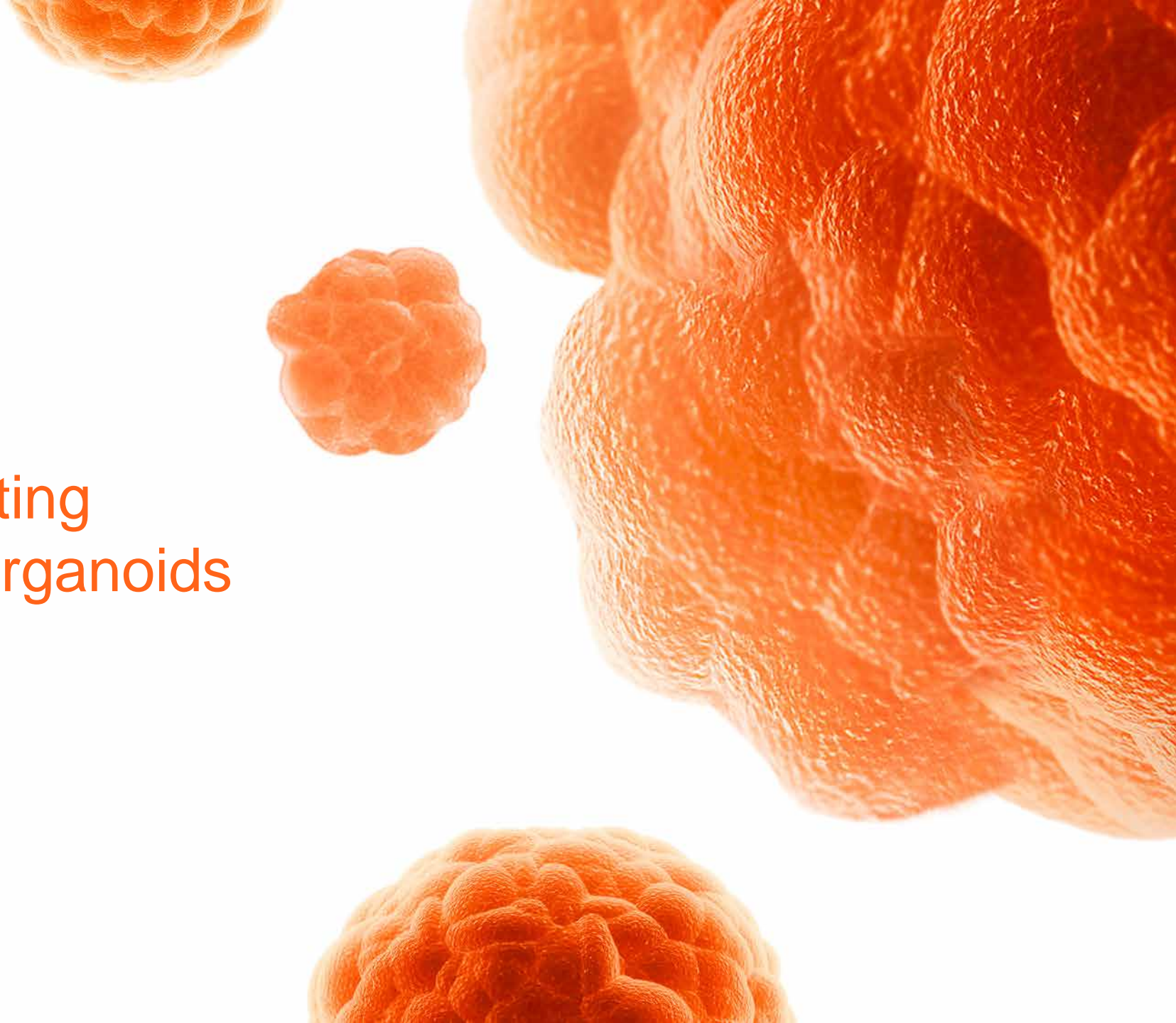
- Cell lines or primary cells
- One or multiple cell types
- Cell and concentration gradients
- Limited self-organization and polarity
- Do not require ECM

Organoids



- Generated from stem or progenitor cells
- Multiple organ-specific cell types
- Self organizes and has polarity
- Require ECM
- Recapitulates organ function

Tools for Generating Spheroids and Organoids



Corning 3D Cell Culture: A History of Innovation

Corning[®]
Matrigel[®] Matrix



Transwell[®]
Permeable Supports



Corning
Spheroid Microplates



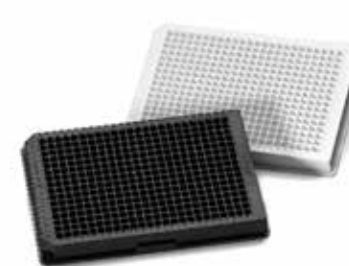
Corning Elplasia[®]
Plates



Corning Matrigel for
Organoids



Corning Matrigel
Matrix-3D Plates



Corning Matribot[®] Bioprinter

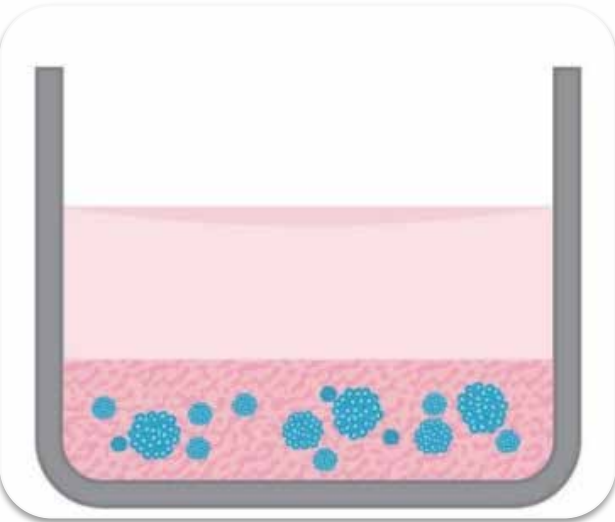


Corning, Falcon[®], Axygen[®], and PYREX[®] brands.

Methods to Form Spheroids and Organoids

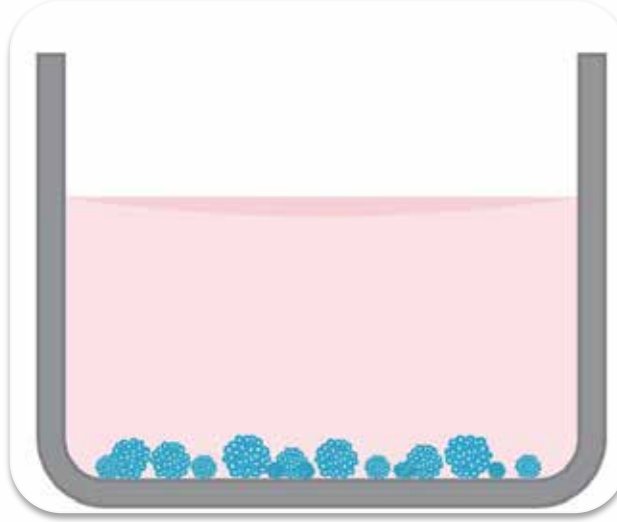
Scaffold

Gel-based



- Corning® Matrigel® Matrix
- Corning Matrigel Matrix-3D Plate
- Other ECM hydrogels (Collagen)

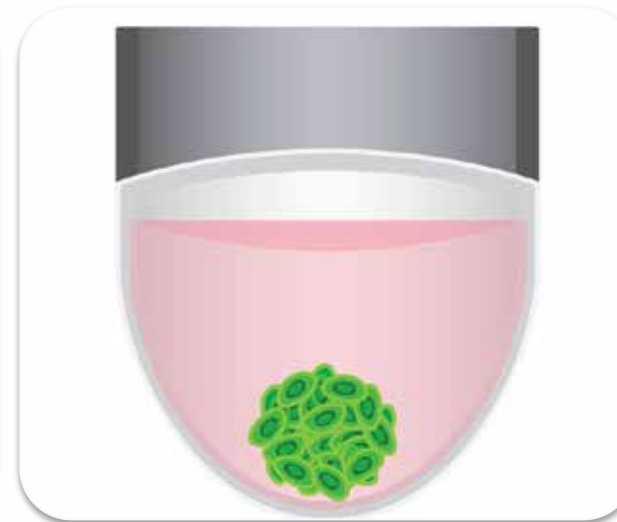
Multiple Non-uniform



Ultra-Low Attachment Surface Products

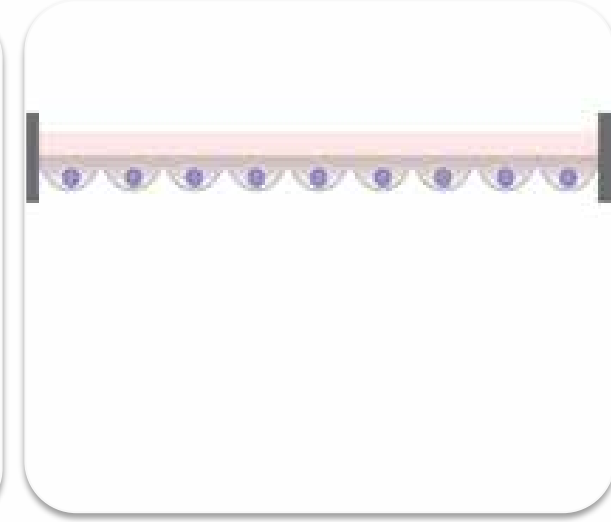
Scaffold-free

Singular Uniform



Corning Spheroid Microplate

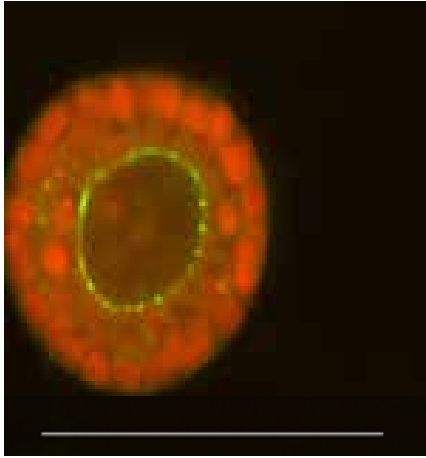
Multiple Uniform



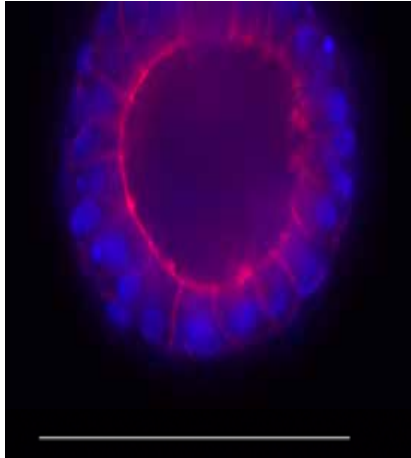
Corning Elplasia® Plate

3D Technologies: Biological Hydrogels

Example: Corning® Matrigel® matrix, Collagen, Fibronectin, BME, Laminin.



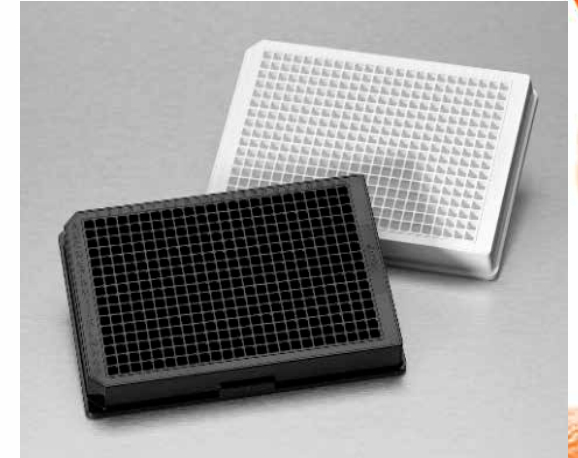
Polarized MDCK Cysts (40X)



Corning Matrigel Matrix



Corning Matrigel Matrix
for Organoid Culture

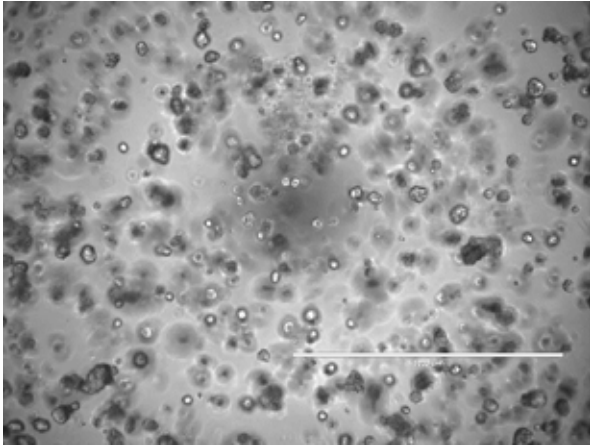


Corning Matrigel Matrix-3D Plates

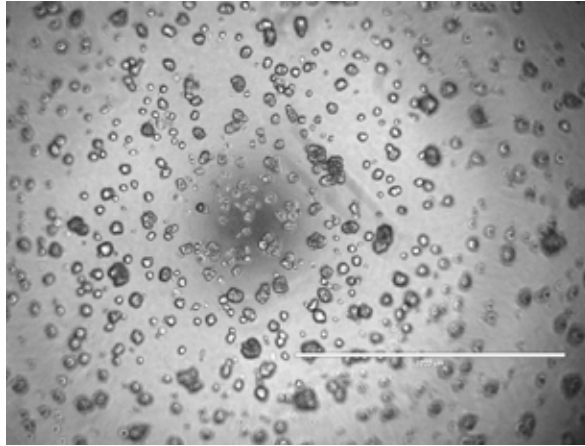
- Mimics ECM
- Allows for cell polarity
- Flexibility to embed cells, culture on top, control stiffness
- Historically difficult to work with for high throughput applications

3D Corning® Matrigel® Culture Methods

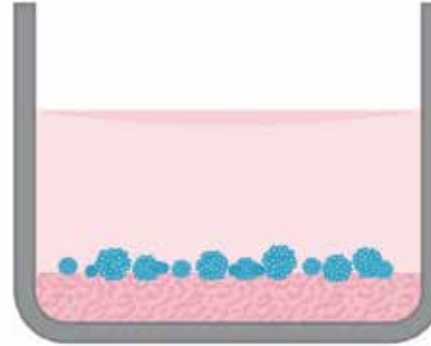
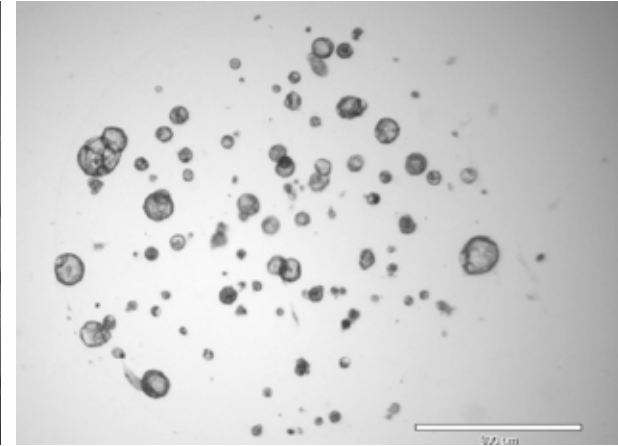
Embedded



Sandwich

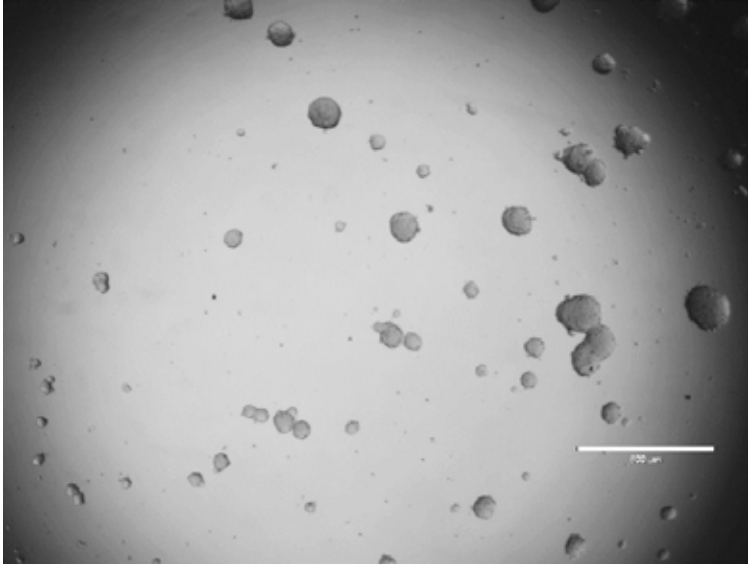


Dome

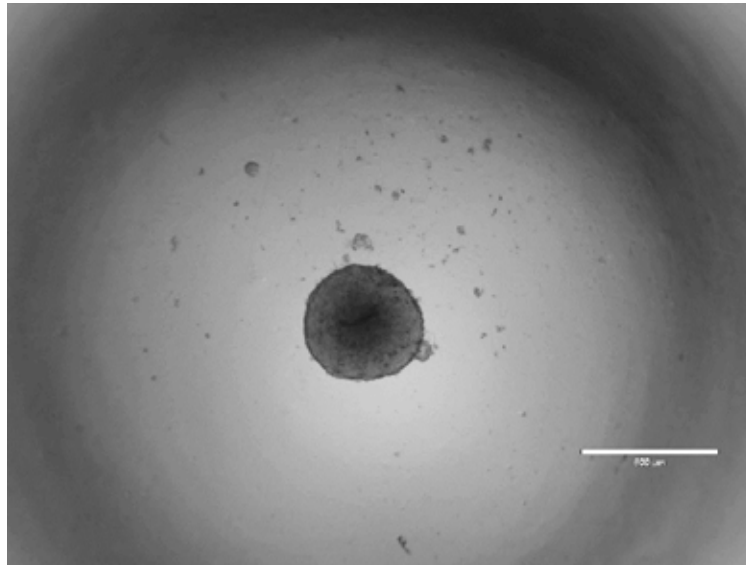


*Often used for
organoid culture*

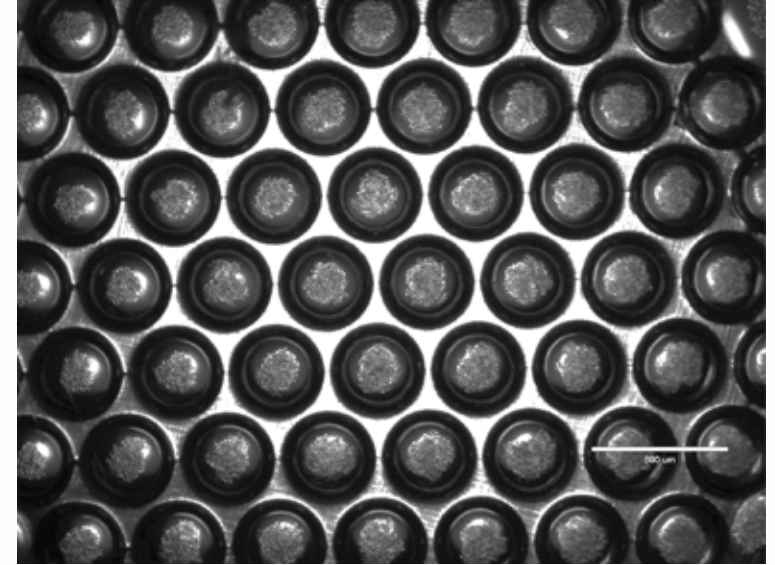
3D Technologies: Ultra-Low Attachment (ULA) Surface



Flat bottom



Round bottom
(spheroid microplate)



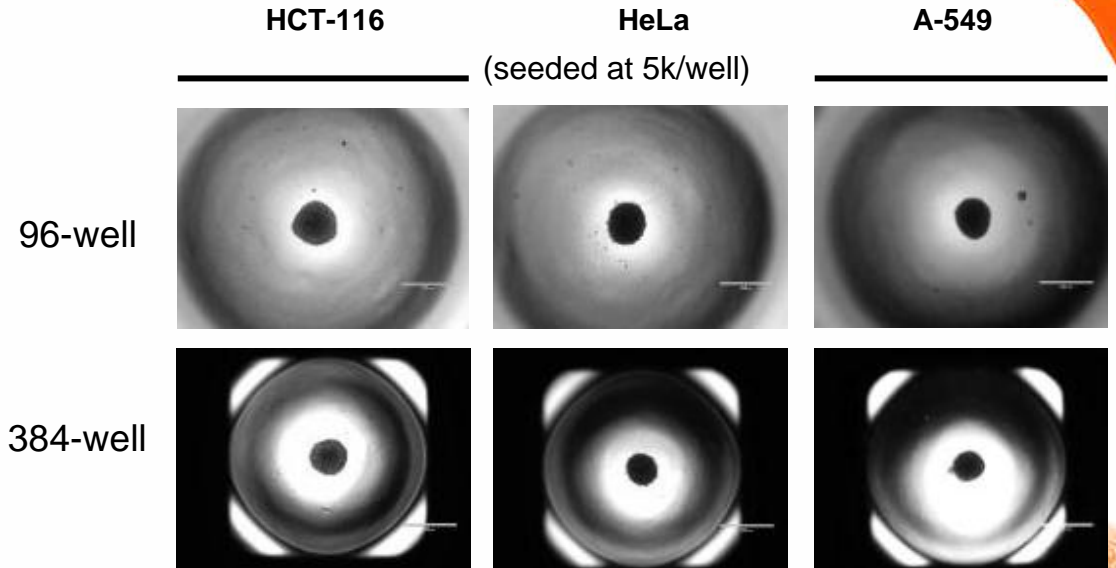
Microcavity
(Corning® Elplasia® plate)

- Hydrogel coating prevents attachment
- Promotes self-aggregation of cells
- Assays can be done directly in plate
- Easy handling and automation friendly

Corning® Spheroid Microplates



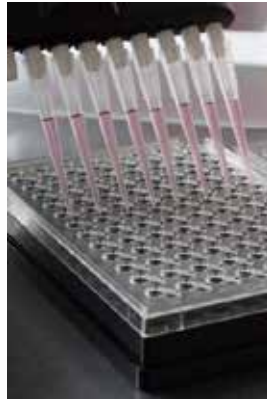
- Unique round bottom geometry
- Single, uniform sized spheroids per well
- Culture and assay in the same plate
- Scalable formats: 96-, 384-, 1536-well
- >40+ cell types demonstrated



Round Bottom Design Enables “Plug and Play” Protocols:

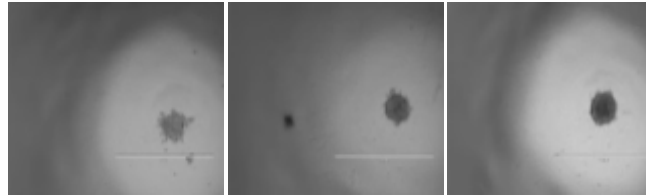
Optimization considerations

1. Plate cells.



Centrifuge
(optional)

2. Generate and culture
spheroids in microplate.

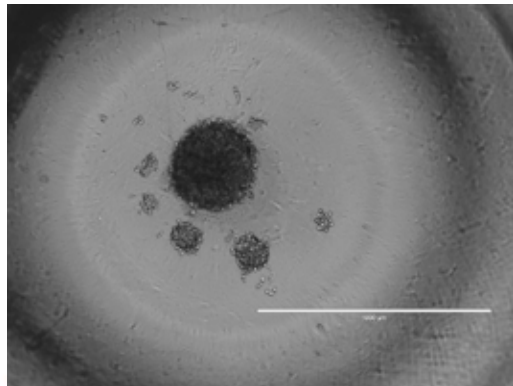
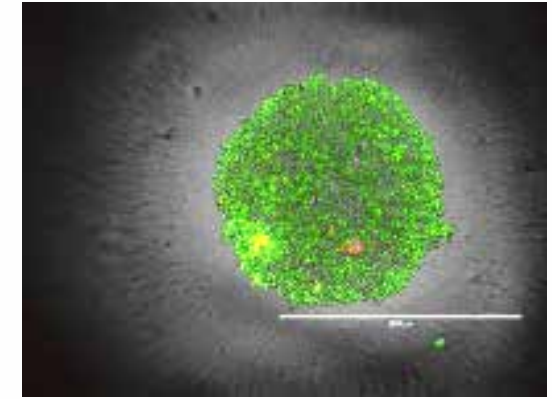


24 hr.

48 hr.

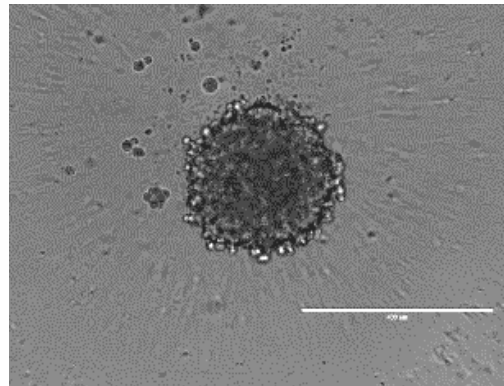
72 hr.

3. Assay spheroid directly in well.



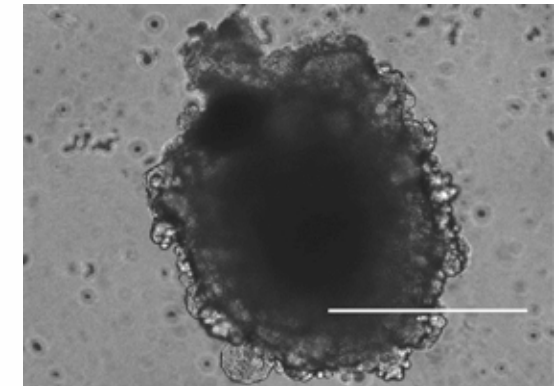
Satellites

Centrifuge and seed with a
single cell suspension



Co-culture

1:1 A549 and fibroblast



Overlay

2.2 mg/mL Corning Matrigel matrix

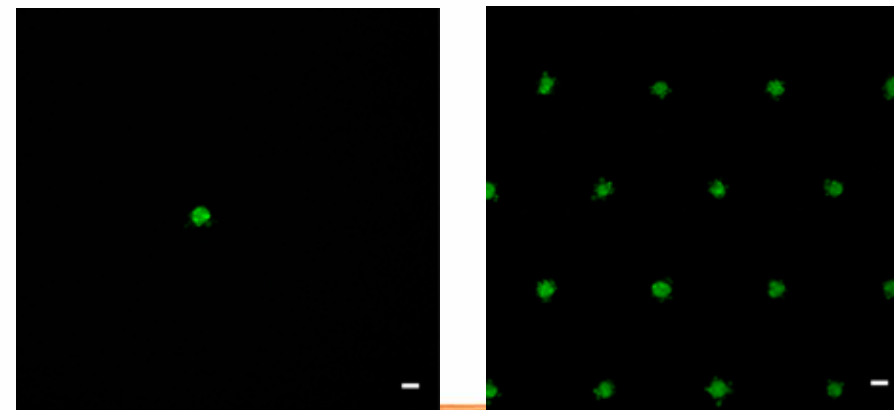
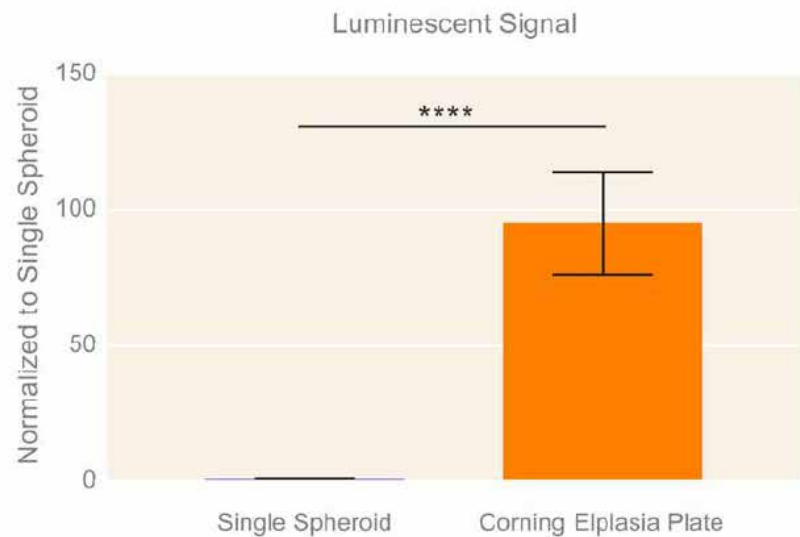
Corning® Elplasia® Microcavity Plates

- Bulk spheroid production
- Increase fluorescent/luminescent signal
- Bulk RNA/Protein isolation in 3D
- No need to pre-wash wells before use
- From 79 to 2,885 spheroids per well

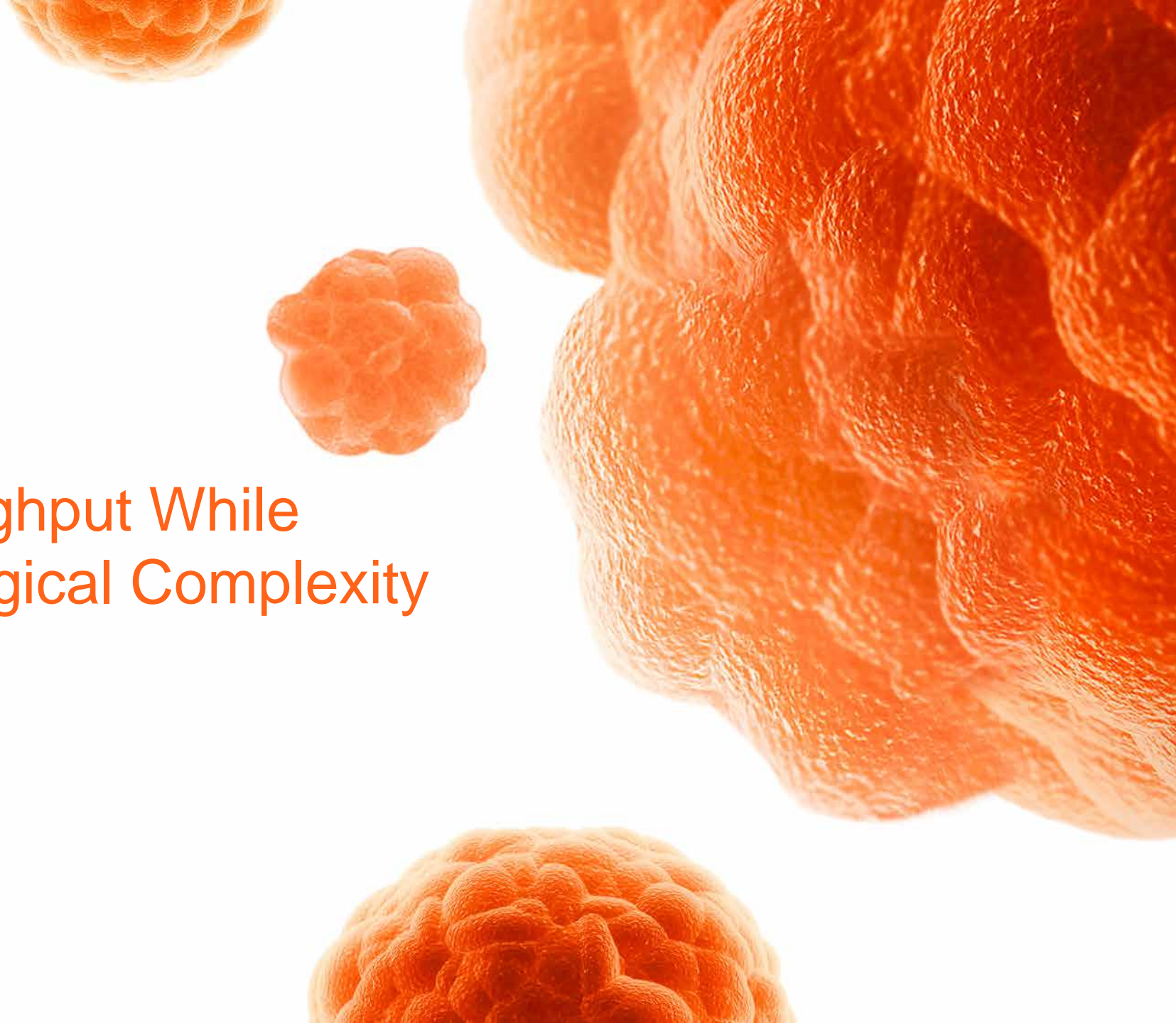
Round Bottom



ULA surface coated – Ideal for bulk spheroid formation



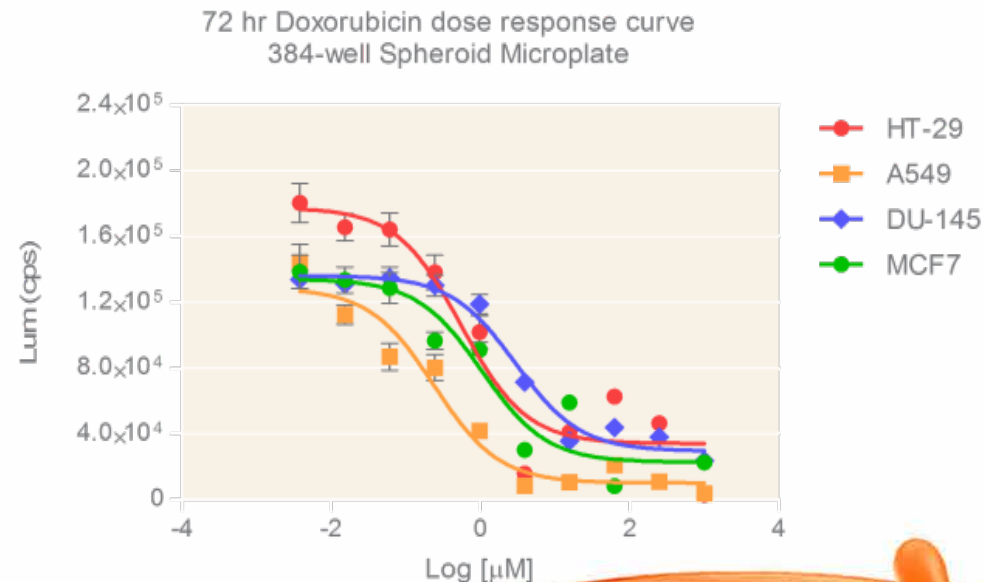
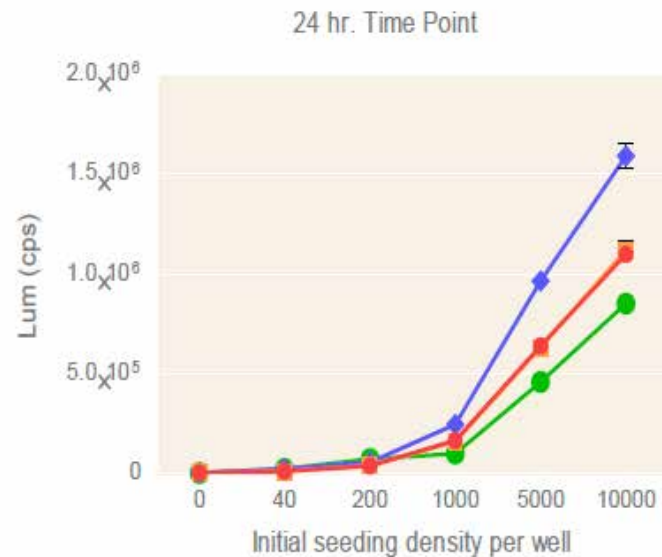
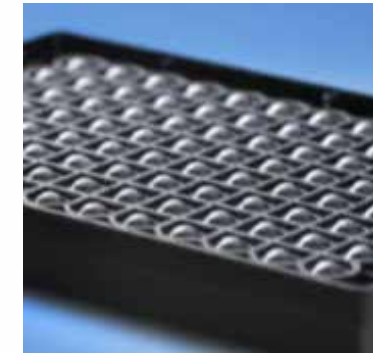
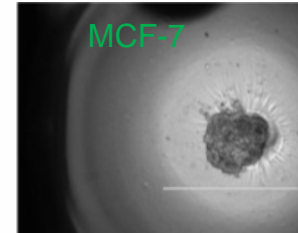
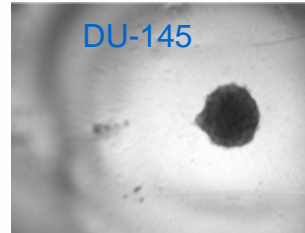
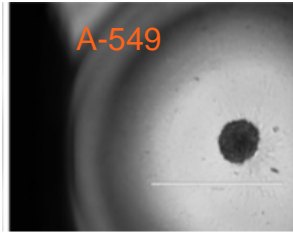
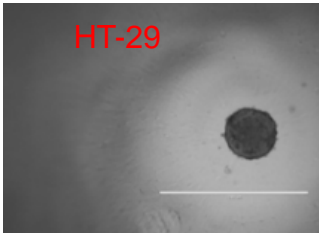
Increasing Throughput While
Maintaining Biological Complexity
in 3D



HT Growth Analysis and Drug Screening

ATP viability assay using Promega CellTiter-Glo[®] 3D

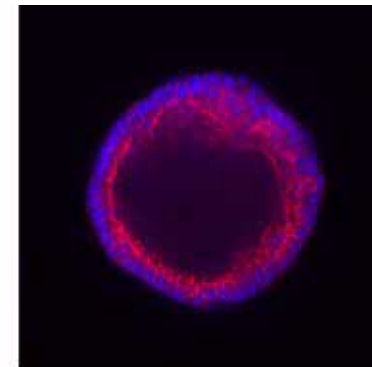
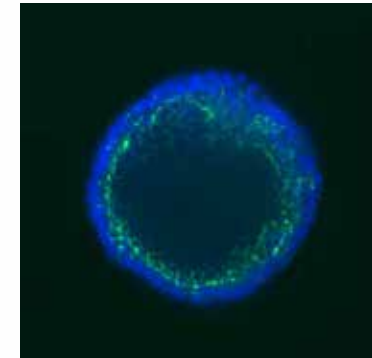
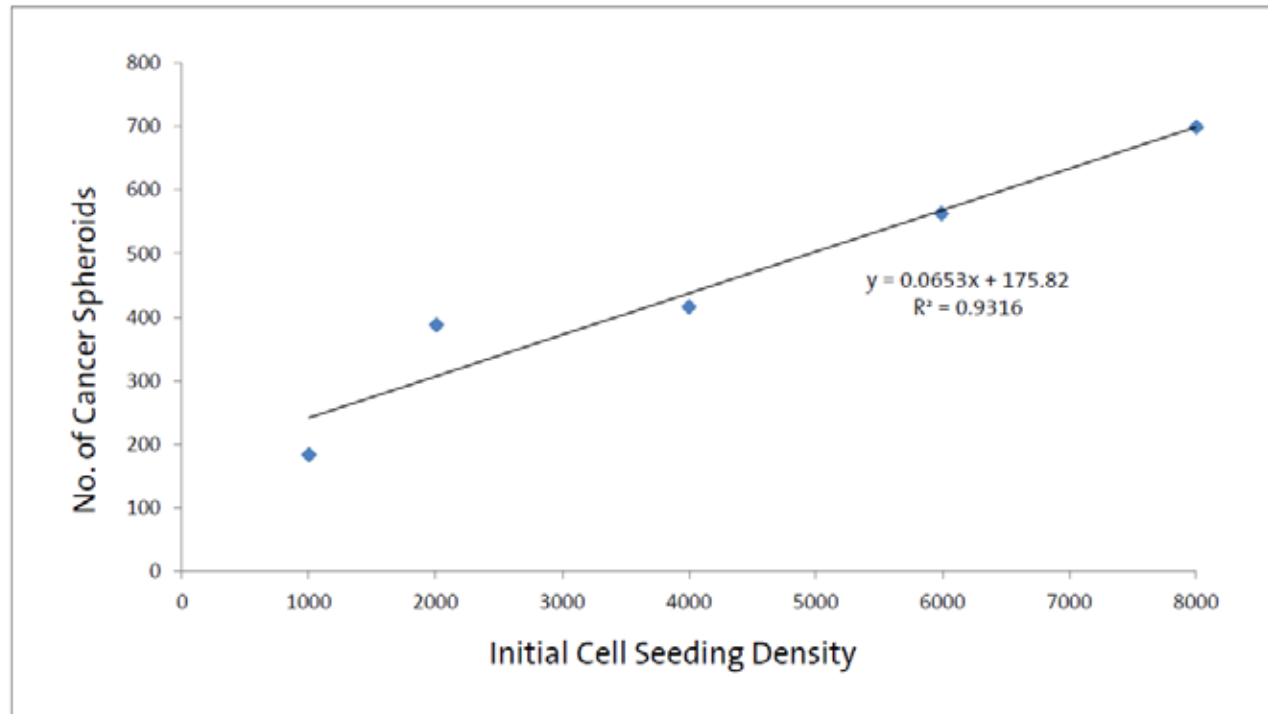
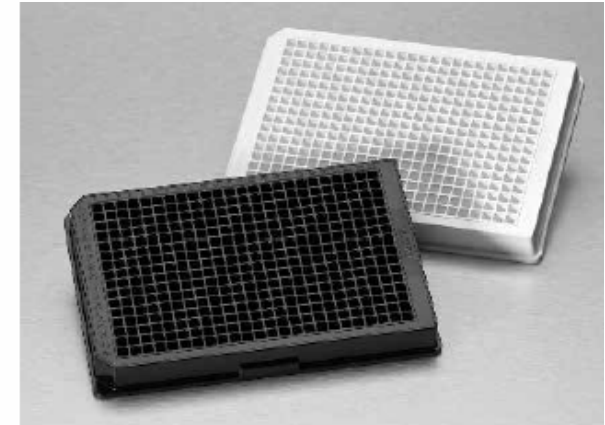
- High throughput method for tumor spheroid growth quantification
- Suitable for drug screening assays in 3D



Pardo 2014. Corning Spheroid microplates and Promega CellTiter-Glo 3D cell viability assay provide a novel approach for high throughput screening of multicellular spheroids. Poster.

Corning® Matrigel® Matrix-3D Plates

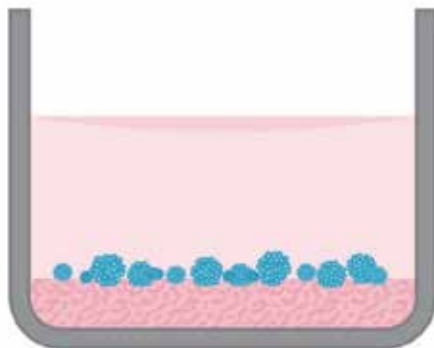
- Convenient – no need to manually prepare Matrigel matrix plates
- Consistent – built in quality control and consistent Z' values
- Optimized – ideal thickness for 3D applications



HT Generation of Pancreatic Cancer Organoids

Using Corning® Matrigel® Matrix-3D Plates

20 μ L of organoid suspension added to polymerized Matrigel matrix



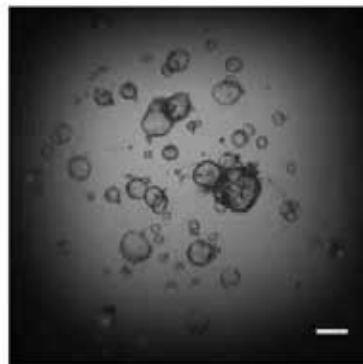
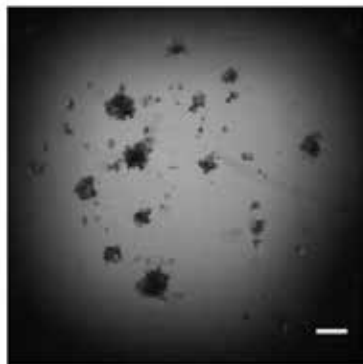
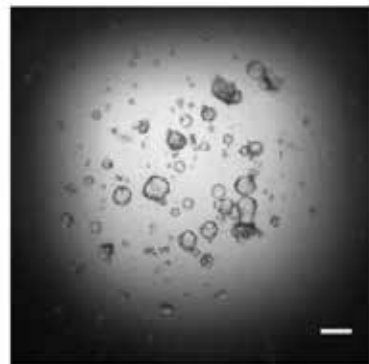
After 48 hours, add drugs and incubate additional 5 days



Pre-Treatment

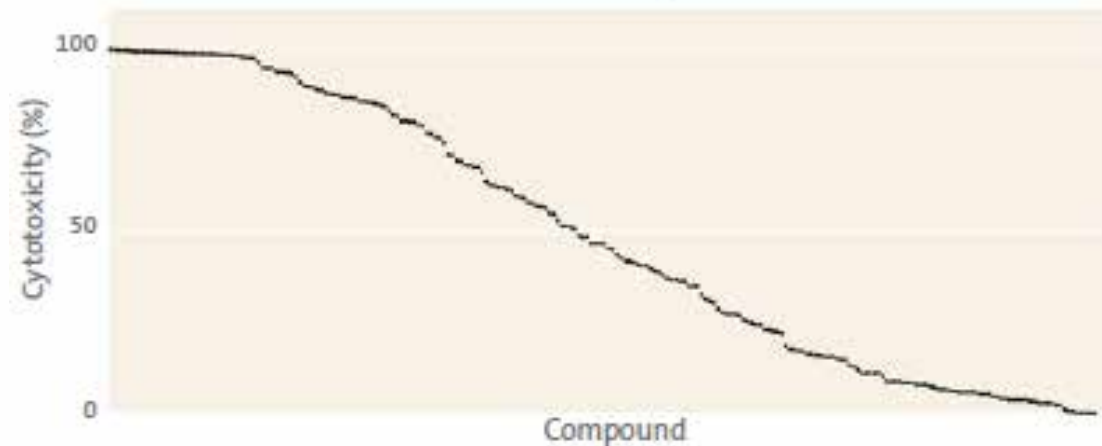
Paclitaxel

Media Control

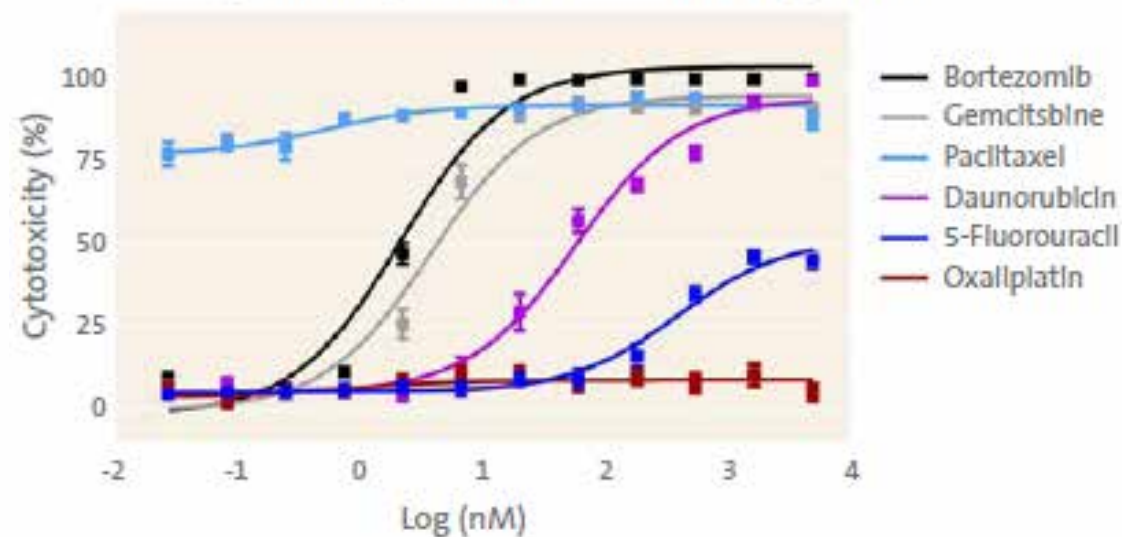


Viability Assessed Using CellTiter-Glo® 3D

Enzo Cancer Library Screen

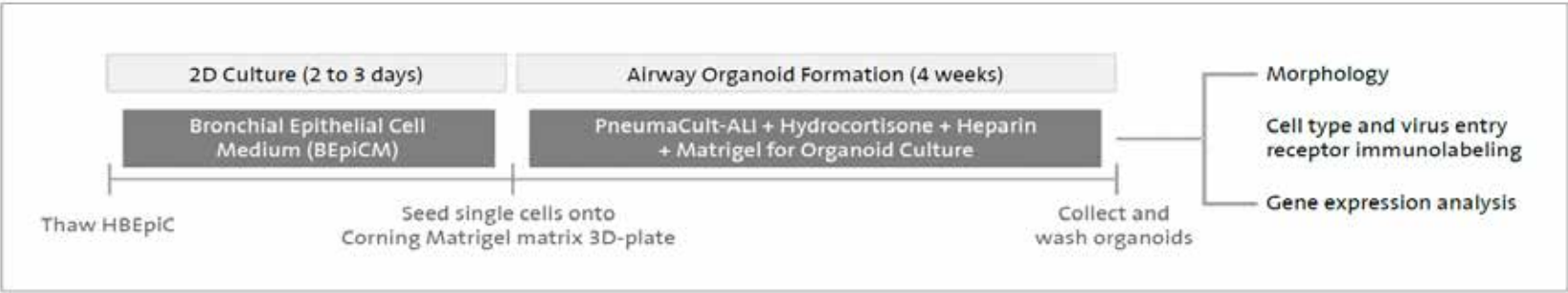


Cytotoxicity of Pancreatic Cancer Organoids

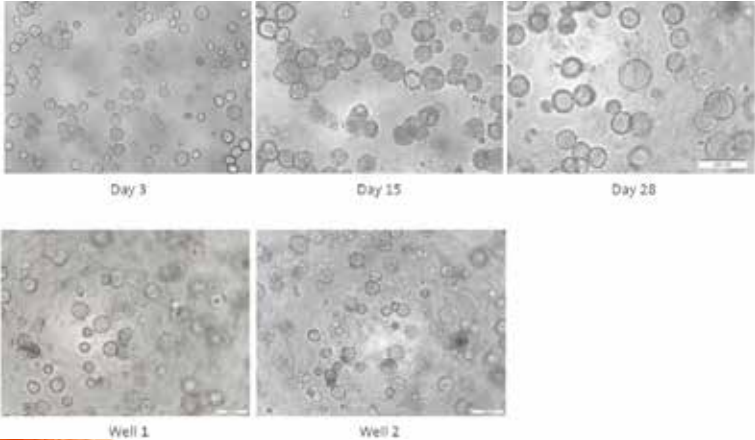


HT Airway Organoid Formation on Corning® Matrigel® Matrix-3D Plates:

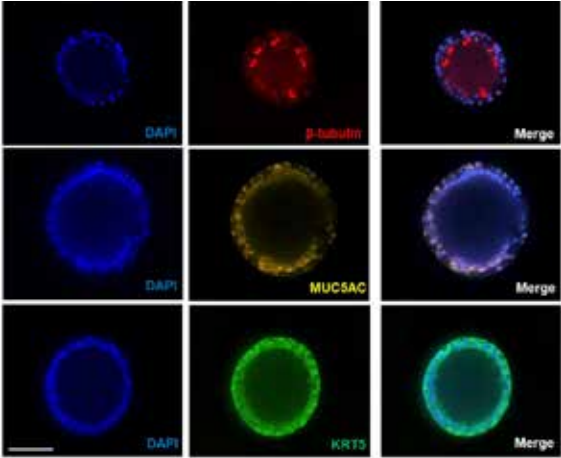
Model for testing respiratory virus infectivity



Images of Airway Organoid Formation

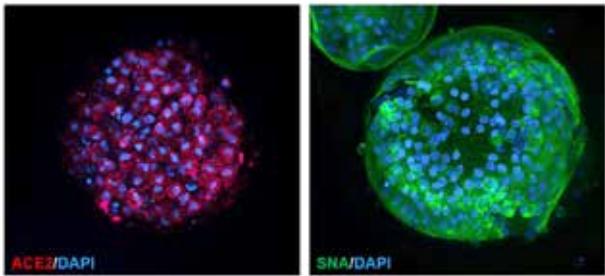


Fluorescent Labeling of Airway Cells



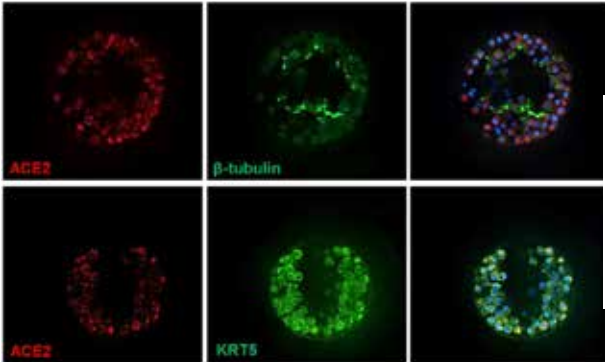
Blue: Nuclei
Red: Ciliated cells
Yellow: Goblet cells
Green: Basal cells

Virus-specific Entry Receptors



Red: ACE2
Green: α 2-6-linked sialic acids
Blue: nuclei

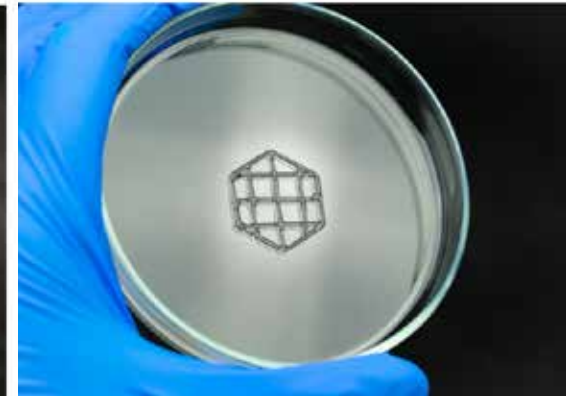
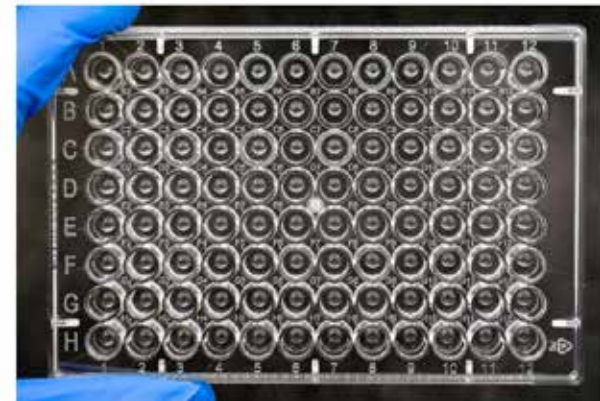
Cell-specific ACE2 Expression



Red: ACE2
Green (top): ciliated cells
Green (bottom): basal cells

New Product Spotlight: Corning® Matribot® Bioprinter

- Accurately dispense hydrogels and print tissues
- Automate 3D workflows
- Ideal for:
 - Dispensing Corning Matrigel® matrix and organoid domes
 - Entry level bioprinting applications



Corning® Matribot® Bioprinter Features



Small footprint
(14.6 x 12.8 x 15 in.)
Benefit: Benchtop unit that fits easily into hood/BSC



Calibration
Automatic and Manual
Benefit: Better Consistency



Cooled syringe printhead (0°C-RT)
Benefit: Use of Corning Matrigel® matrix/Collagen and other RT hydrogels



Receiving Vessels
Microplates, multiwell plates, Petri dishes
Benefit: Compatible with various vessel formats



Thermal nozzle insulators
Benefit: Reduces clogging of at nozzle for temperature-sensitive hydrogels



Controls
LCD screen with knob or software-mediated access. The software supports both Windows® or macOS operating systems.
Benefit: Flexible operations



Curing System
UV 405 nm LED and Temp. of printbed (RT-60°C)
Benefit: Multiple modes to crosslink hydrogels and maintain 3D structure



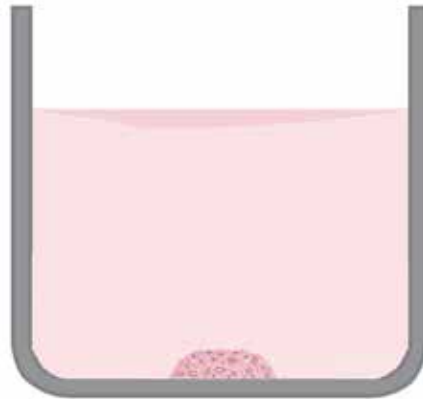
Materials
Bioinks/Hydrogels (with or without cells)
Corning Matrigel matrix and Collagen
Alginate-based bioinks
Benefit: Supports temperature-sensitive and ambient-temperature hydrogels

Corning® Matribot® Bioprinter Application

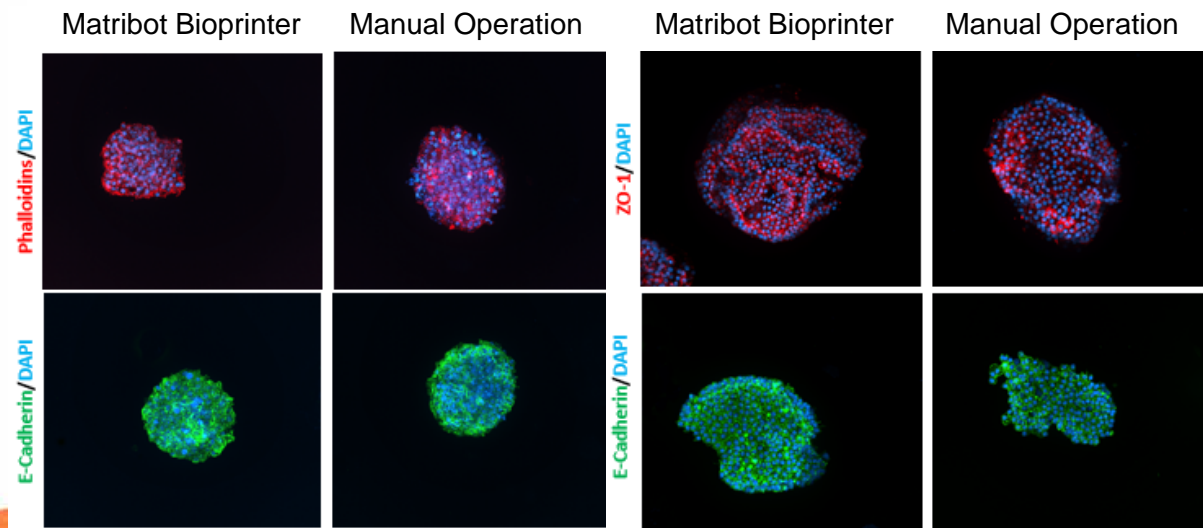
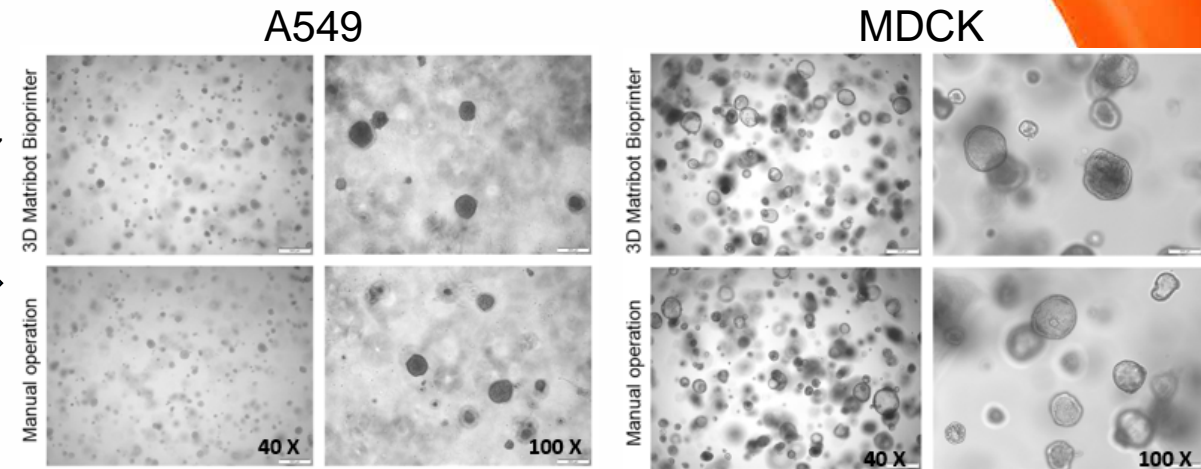
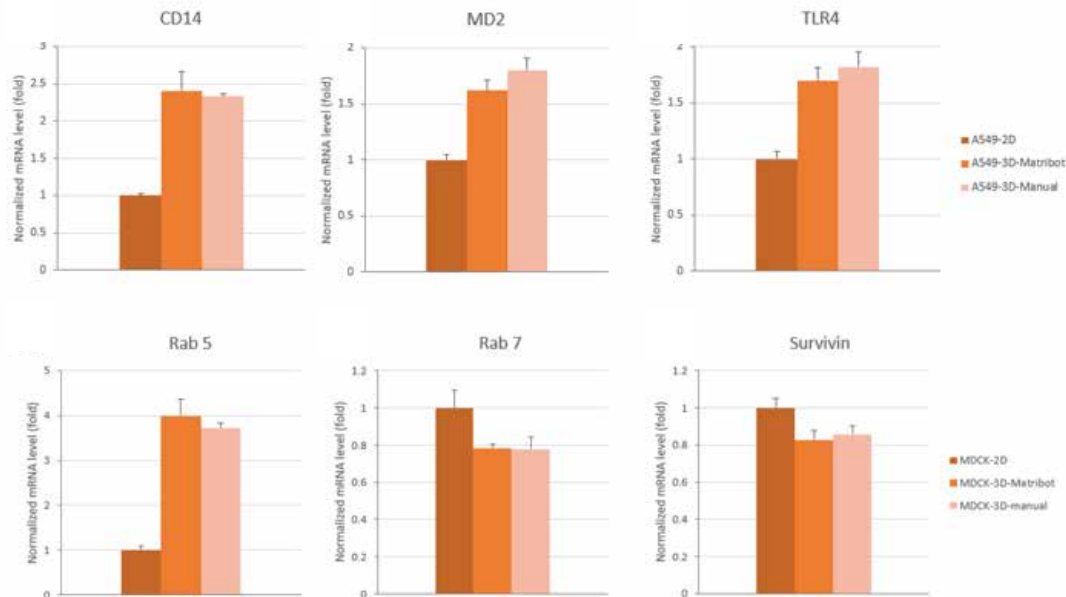
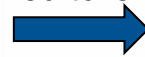
Automating spheroid droplet dispensing



50 μ L droplet
per well of 24-
well microplate



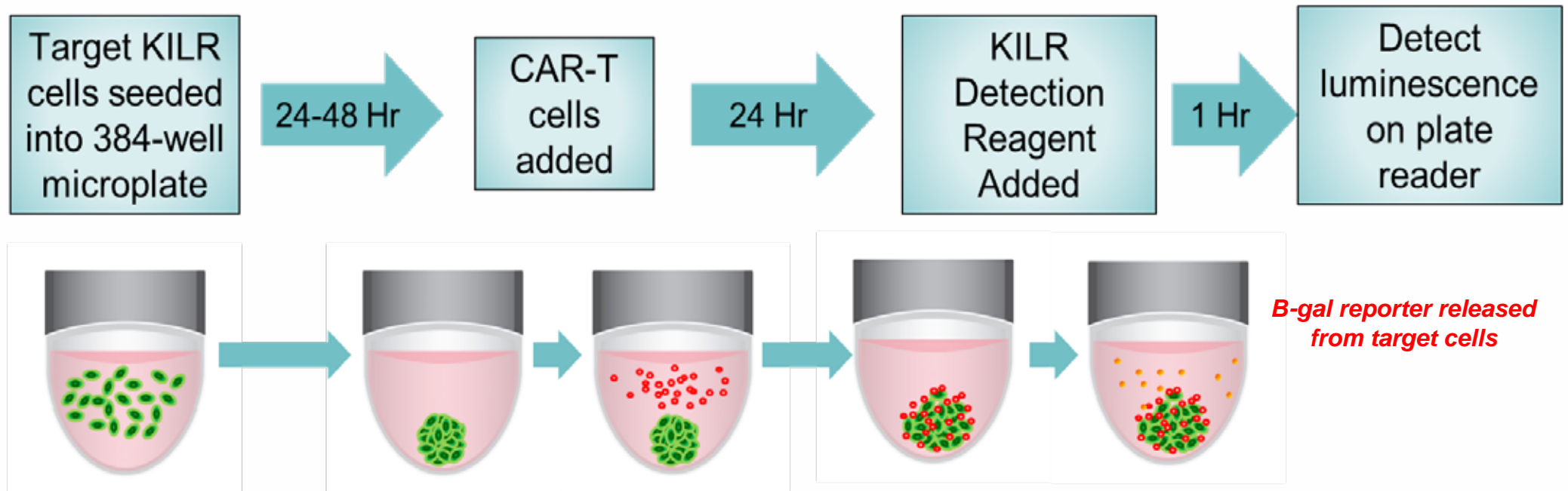
10 and 7
days in
culture



Immuno-oncology Application

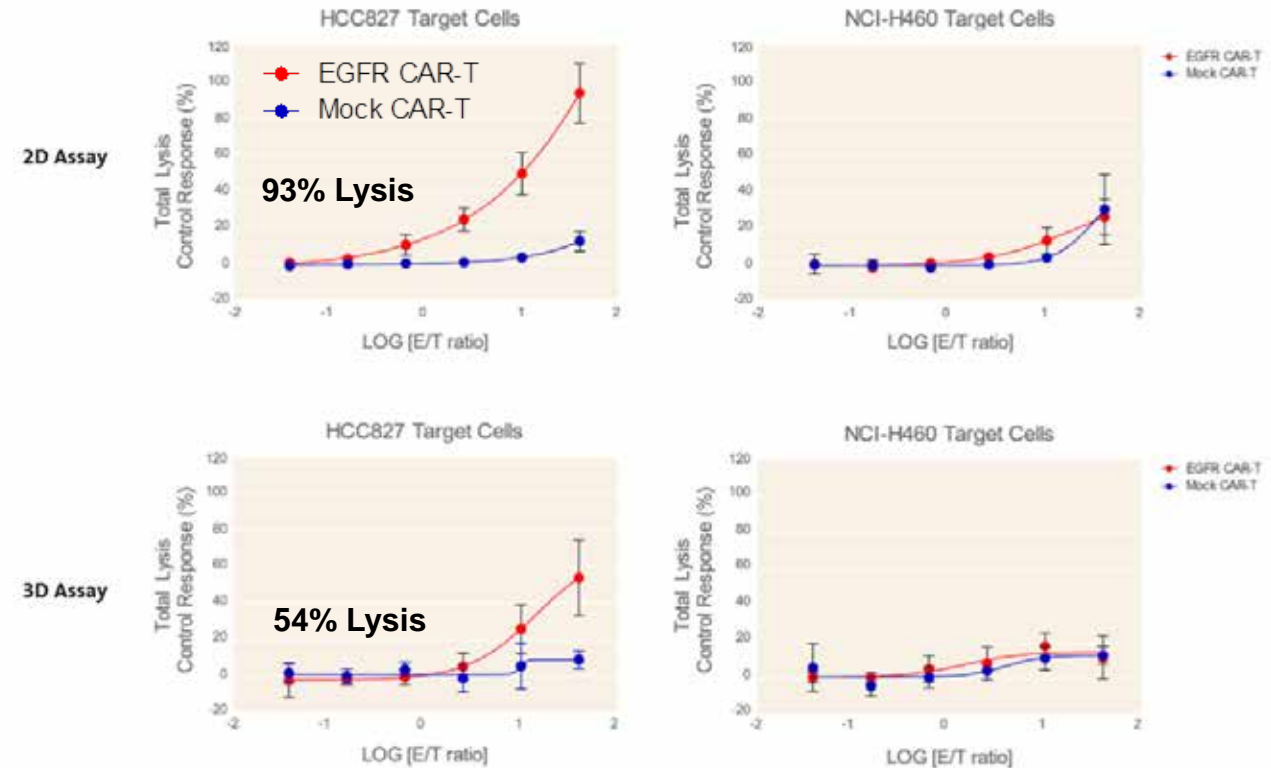
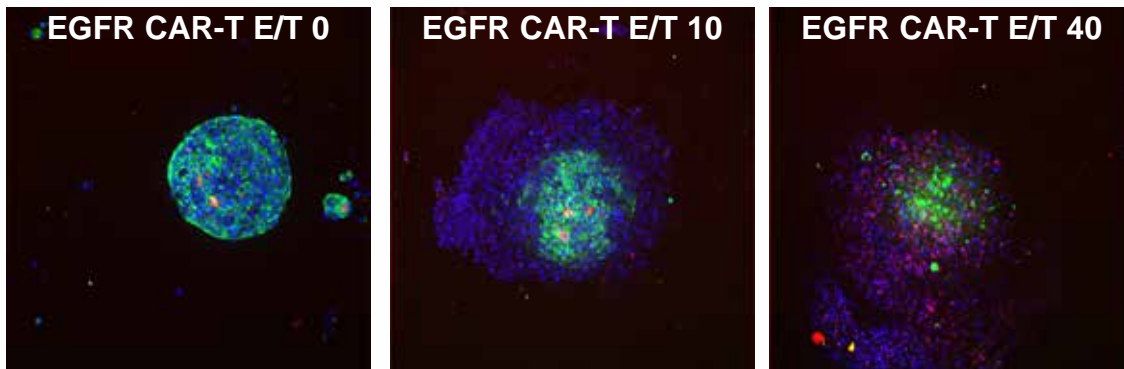
3D Cytotoxicity Assay: CAR-T Cell Screening of Tumor Cytotoxicity

- Corning® Spheroid Microplates – Tumor spheroid formation
- DiscoverX KILR® Cytotoxicity Assay – Quantification of tumor cytotoxicity



CAR-T Cells are More Effective in Lysing 2D vs. 3D Tumor Cells

- Effector: CAR-T cells
- Target: lung adenocarcinoma cell line (HCC827)



Corning® X-LAB® and X-WASH® Platforms: Semi-automated MNC Isolation and Buffer Exchange



Disposable Cartridge

- Starting material volume: 40-240 mL
- Sterile, single-use, easy to use
- Harvest volume: 3-40 mL



Control Module

- Opens and closes cartridge valves
- Runs protocol in centrifuge
- Records speed, time, states

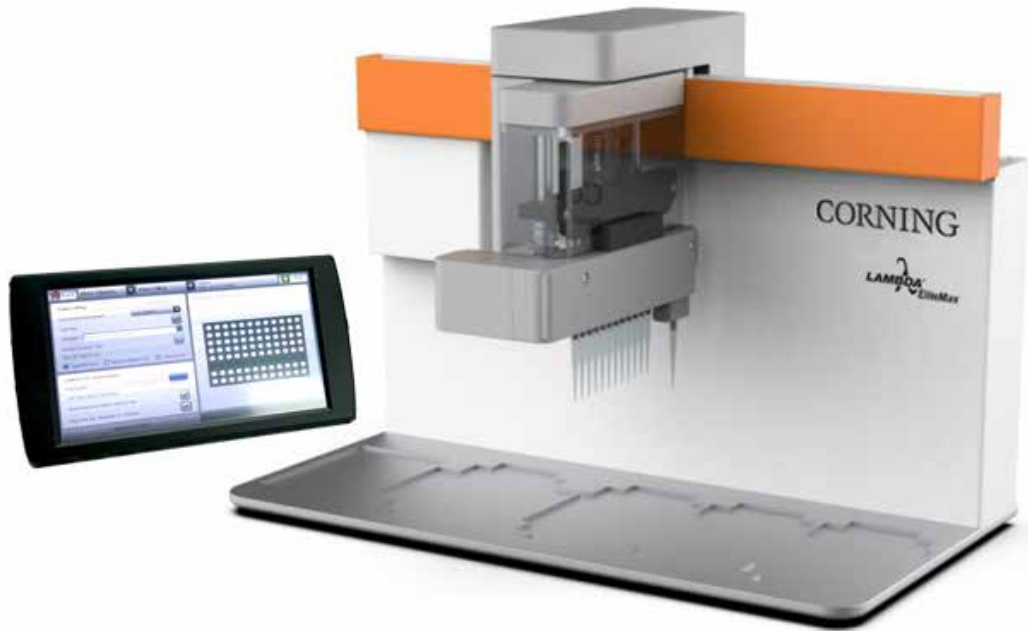


Docking Station

- Charges control module
- Uploads protocols to control module
- Downloads processing data



Corning® Lambda™ EliteMax Semi-automated Benchtop Pipettor



High throughput automation with a small footprint

- Easy-to-use touch screen user-interface controller
- Dual single-channel and multi-channel head configurations
- 5 deck seating positions with both landscape and portrait orientation options
- USB flash drive port supports data exchange and backup files

Coming Soon

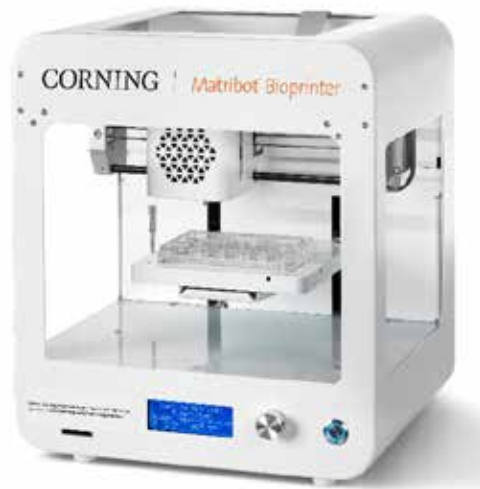
Corning Elplasia Microcavity Flask

~12,000 spheroids per flask

Corning® Elplasia®
Flask



New Product Features



Corning® Matribot® Bioprinter



Corning Cell Counter
for Organoids and Spheroids

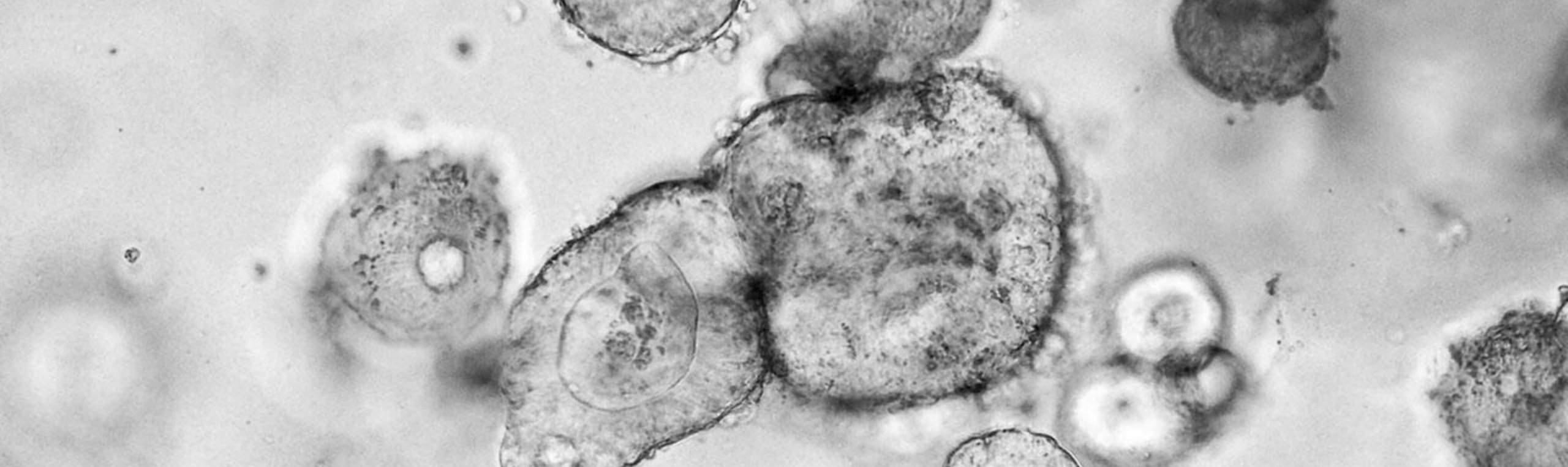


Corning Lambda™ EliteMax
Semi-automated Benchtop Pipettor

CORNING

Warranty/Disclaimer: Unless otherwise specified, all products are for research use or general laboratory use only.* Not intended for use in diagnostic or therapeutic procedures. Not for use in humans. These products are not intended to mitigate the presence of microorganisms on surfaces or in the environment, where such organisms can be deleterious to humans or the environment. Corning Life Sciences makes no claims regarding the performance of these products for clinical or diagnostic applications. *For a listing of US medical devices, regulatory classifications or specific information on claims, visit www.corning.com/resources.

Corning's products are not specifically designed and tested for diagnostic testing. Many Corning products, though not specific for diagnostic testing, can be used in the workflow and preparation of the test at the customers discretion. Customers may use these products to support their claims. We cannot make any claims or statements that our products are approved for diagnostic testing either directly or indirectly. The customer is responsible for any testing, validation, and/or regulatory submissions that may be required to support the safety and efficacy of their intended application.



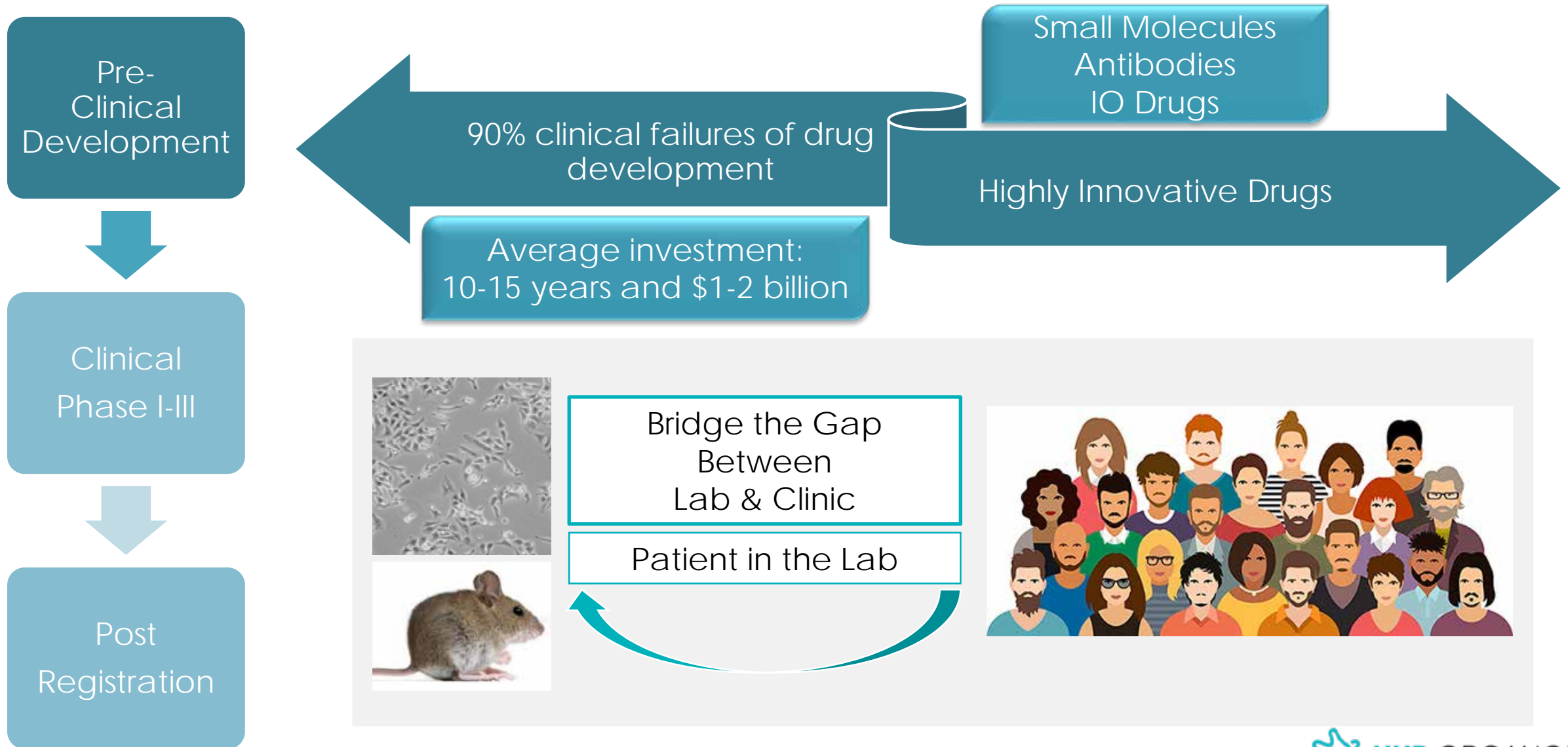
Patient-derived Organoids:
a revolutionary new model to advanced
precision medicine



HUB ORGANOIDS

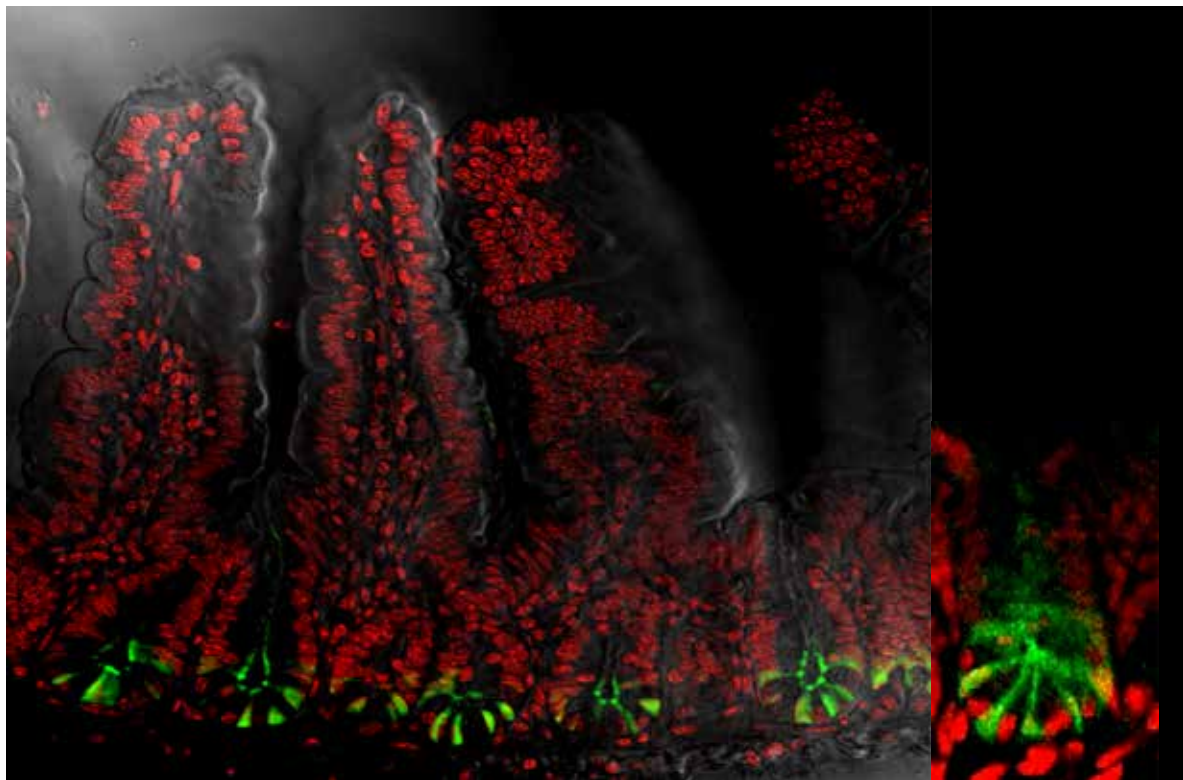
ISSCR
San Francisco, USA
16th June 2022

Drug Development – Inefficient, Unpredictable, Expensive



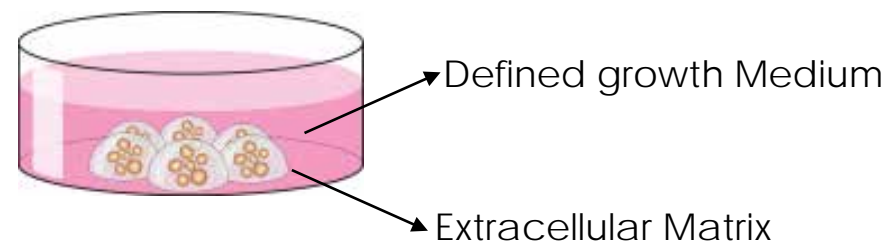
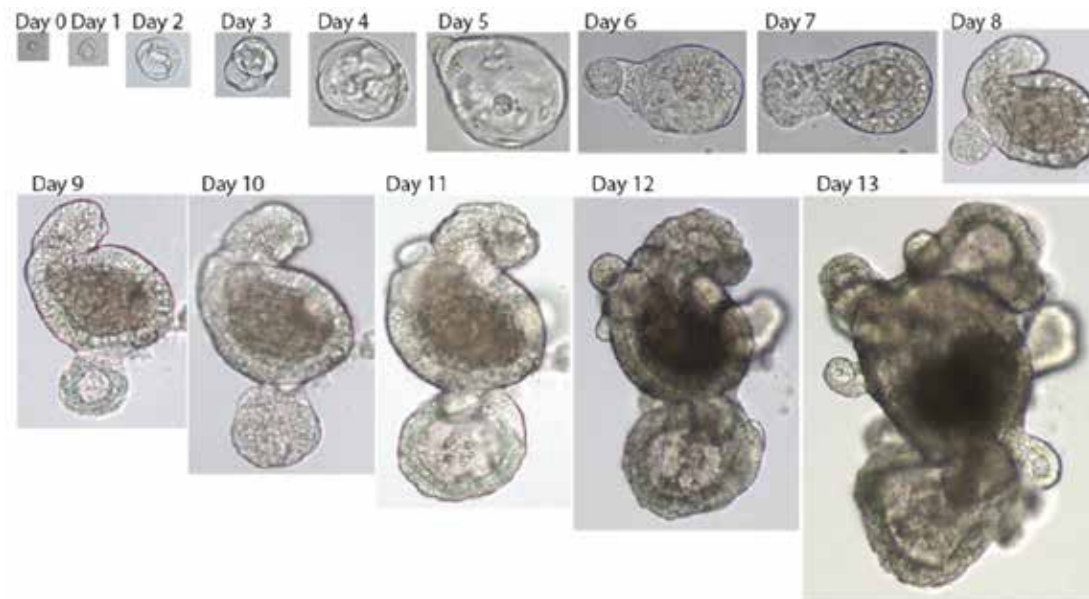
Key Scientific Breakthroughs that Led to ASC-Organoid Technology

- Identification of LGR5 as adult stem cell marker of the intestinal mouse epithelium



Barker N. *et al.* Nature 2007

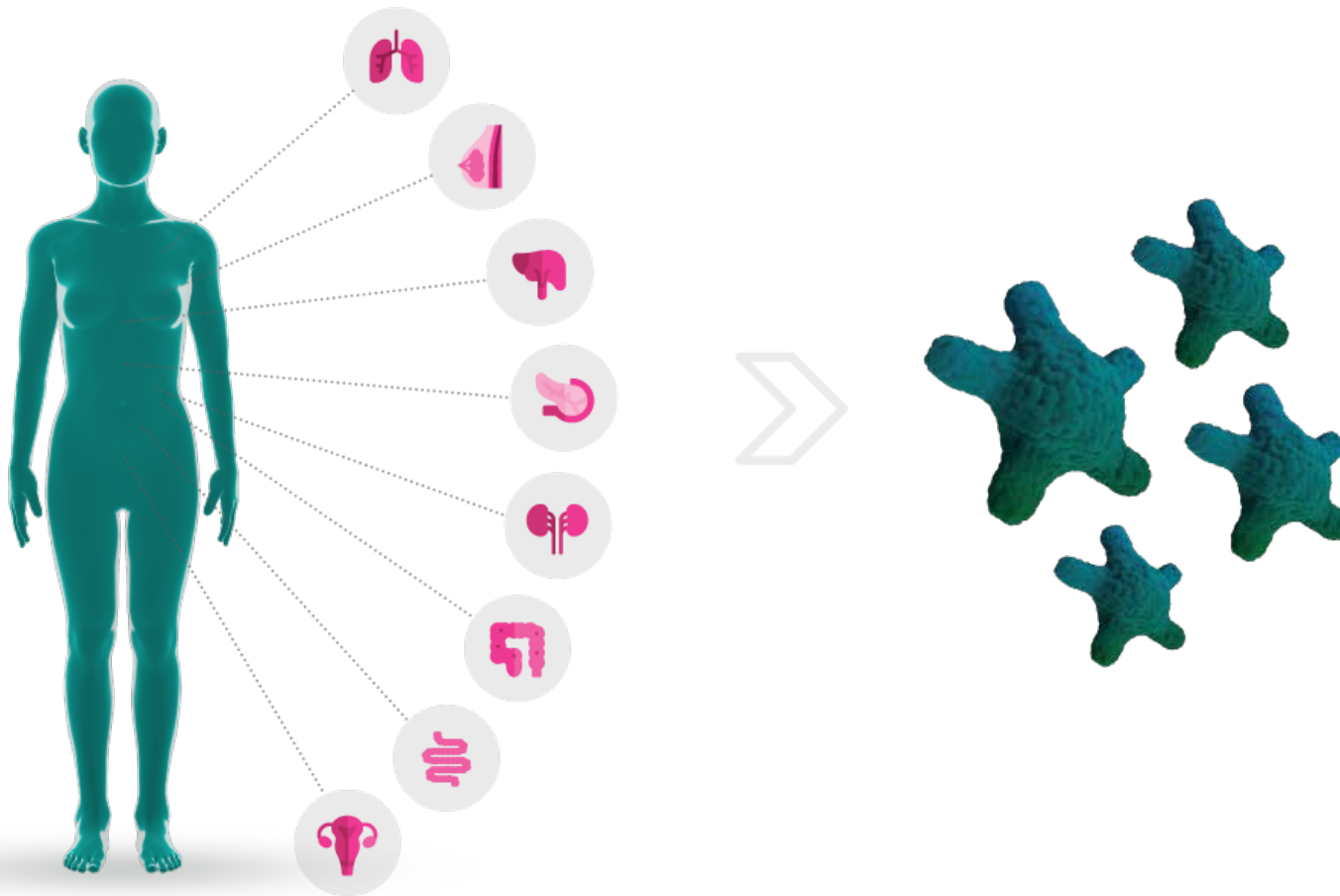
- Identification of LGR5 as adult stem cell marker of the intestinal mouse epithelium



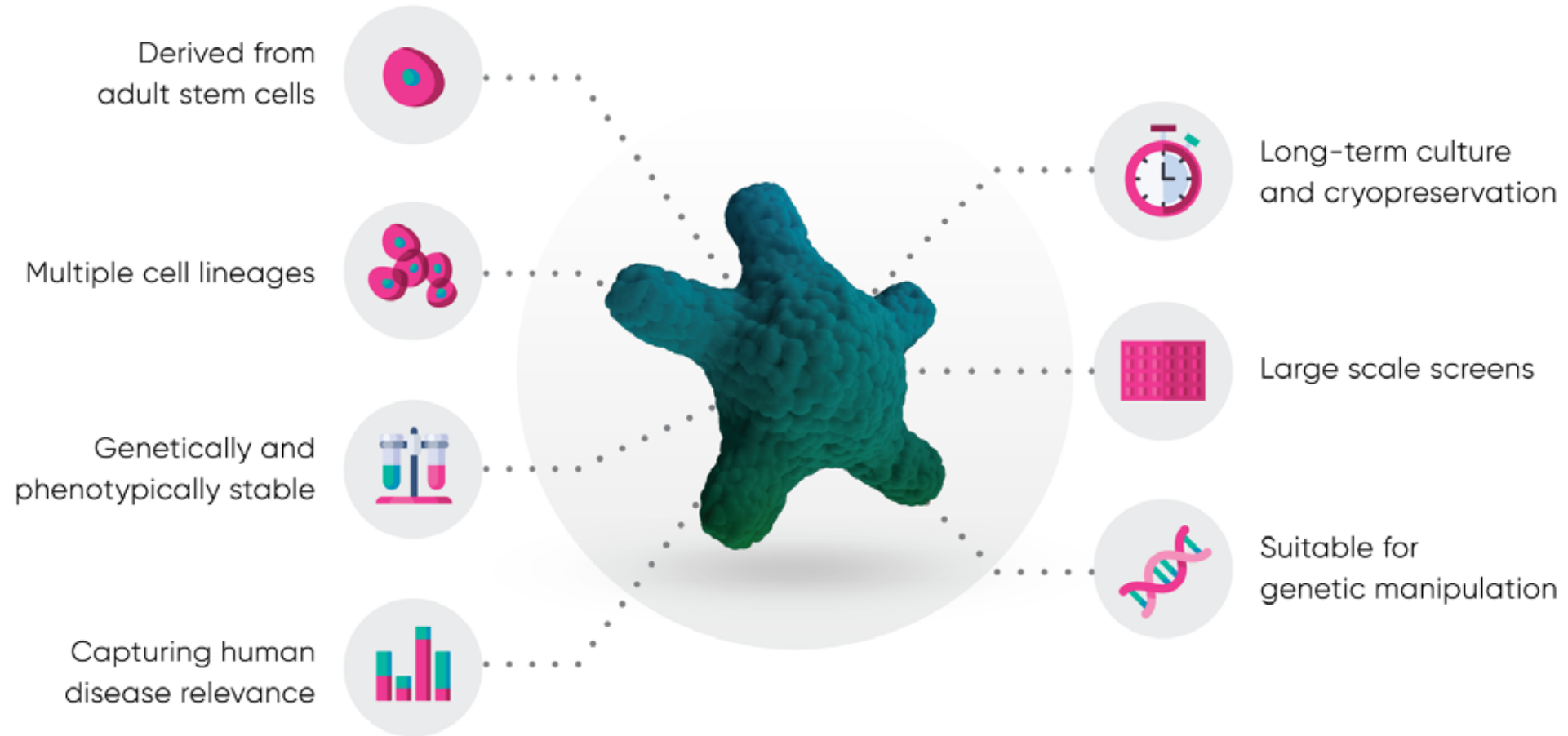
Sato T. *et al.* Nature 2009

Patient-derived Organoid Biobanks at HUB

- ASC-Organoid Technology allows the generation of Patient-derived Organoids models from different tissues to build “living” biobanks representing different diseases with a relevant level of characterization



Key HUB Organoids Features



Applications of HUB Organoid Technology for Drug Discovery and Development



Oncology

colon, pancreas,
breast, lung,
ovarian, H&N
organoids

Cystic fibrosis

colon and lung
organoids

Inflammatory diseases

colon and lung
organoids

Infectious diseases

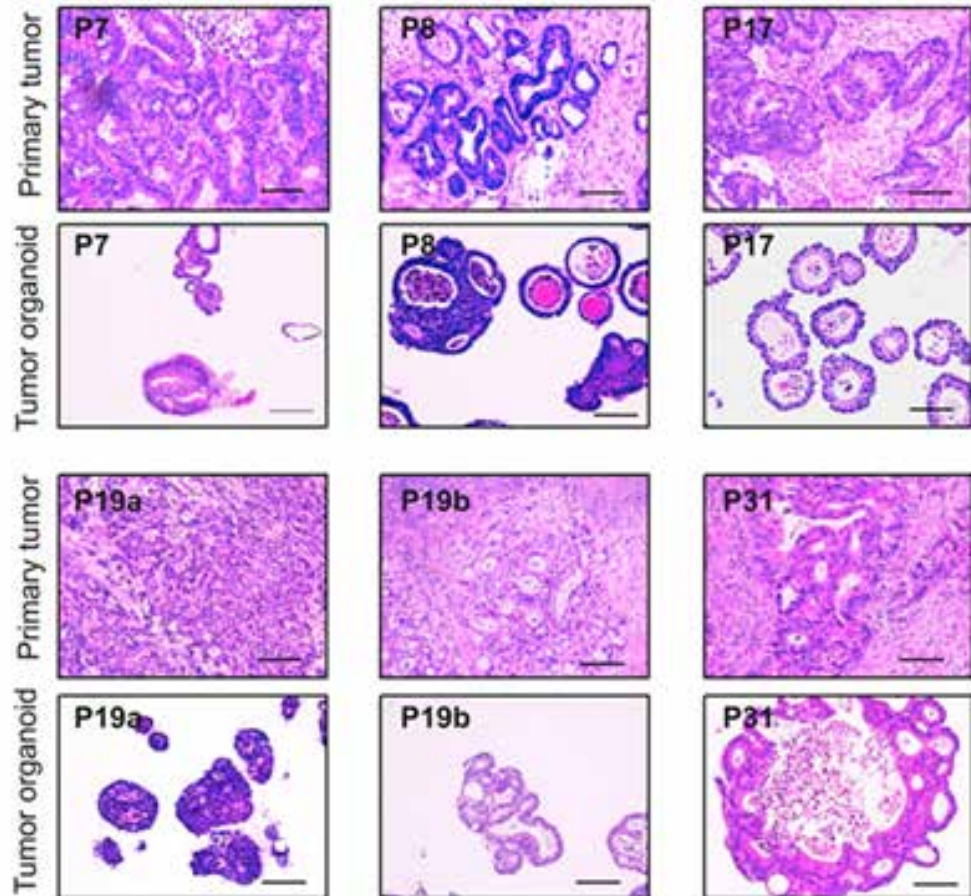
liver, lung and
intestinal tract
organoids

Toxicology

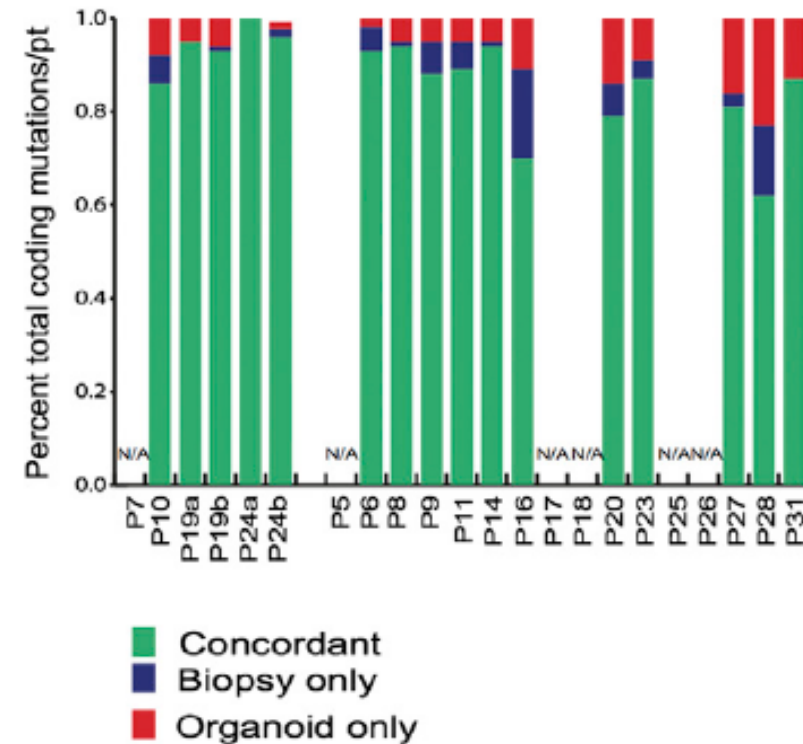
liver and
intestinal tract
organoids

Colorectal Organoids Resembles Primary Tumour

- CRC PDOs show comparable histological characteristics to original tumor tissue

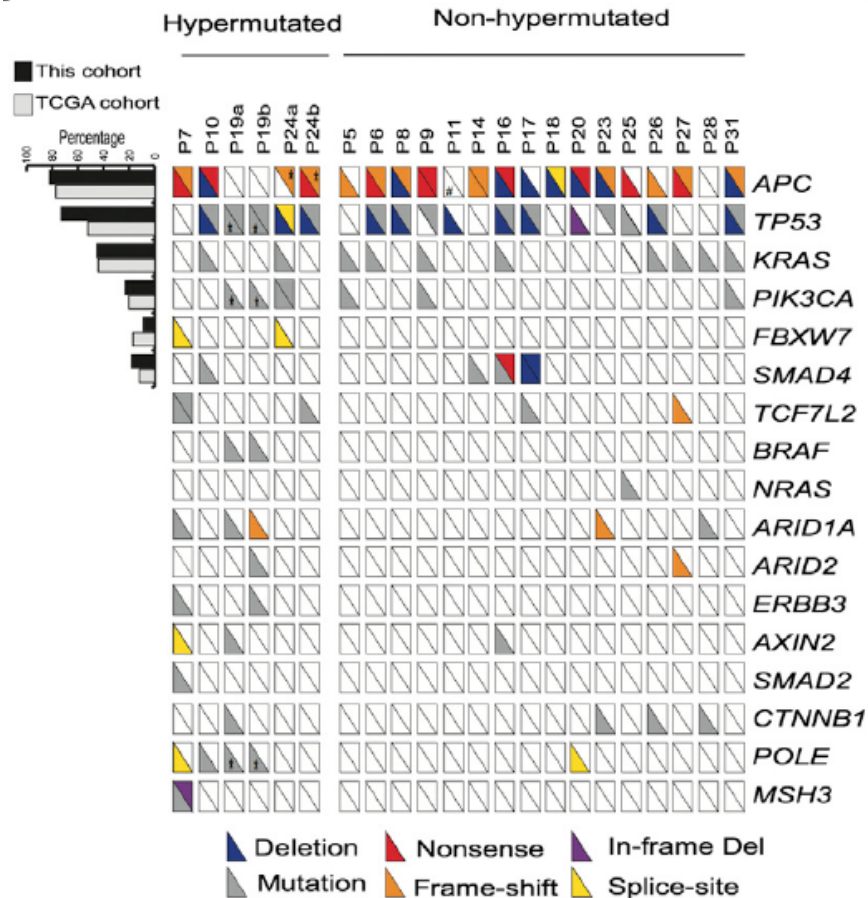


- High concordance of mutations identified in both original tumor tissue and patient-derived organoid

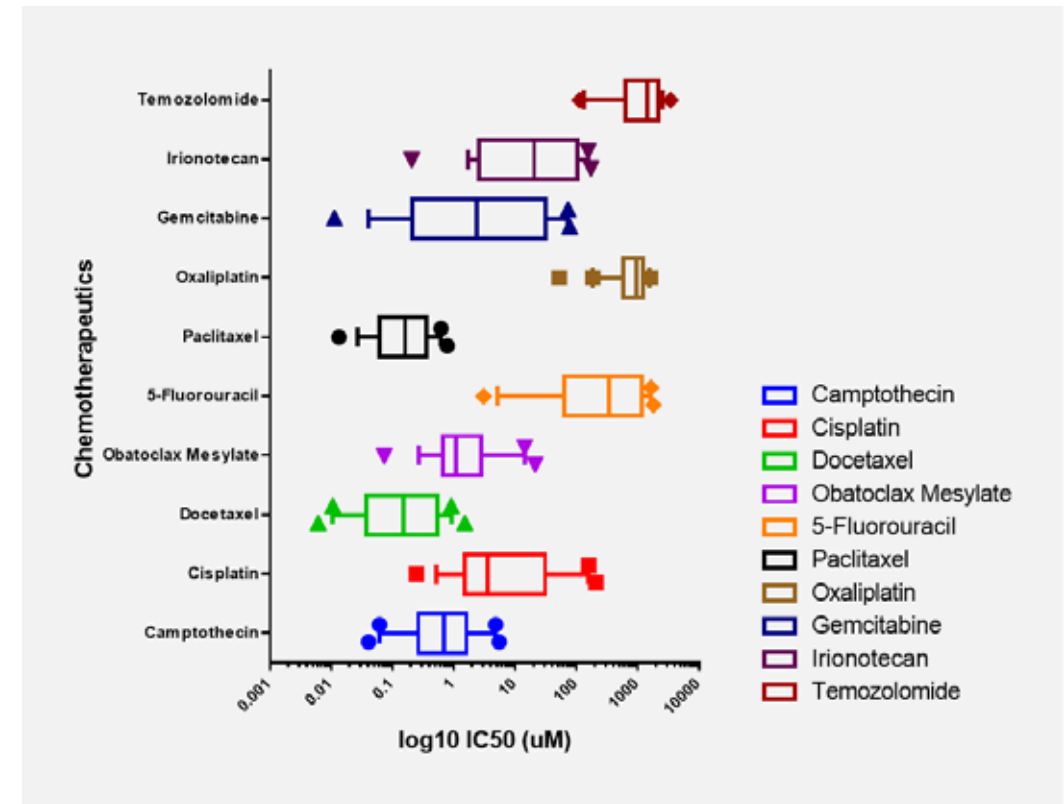


Genomic Alterations and Drug Response in Colon Cancer Patient-derived Organoids

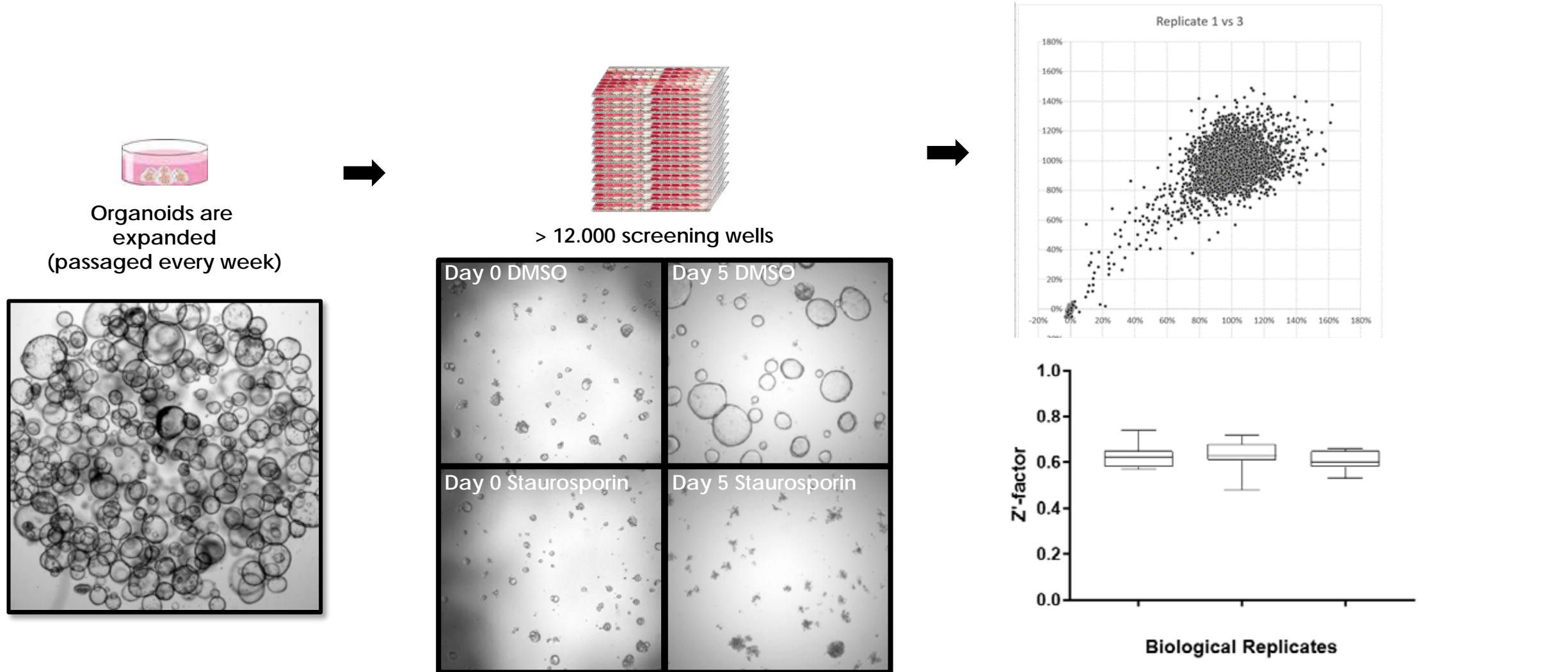
- CRC PDOs represent inter-tumor heterogeneity observed in CRC patient populations



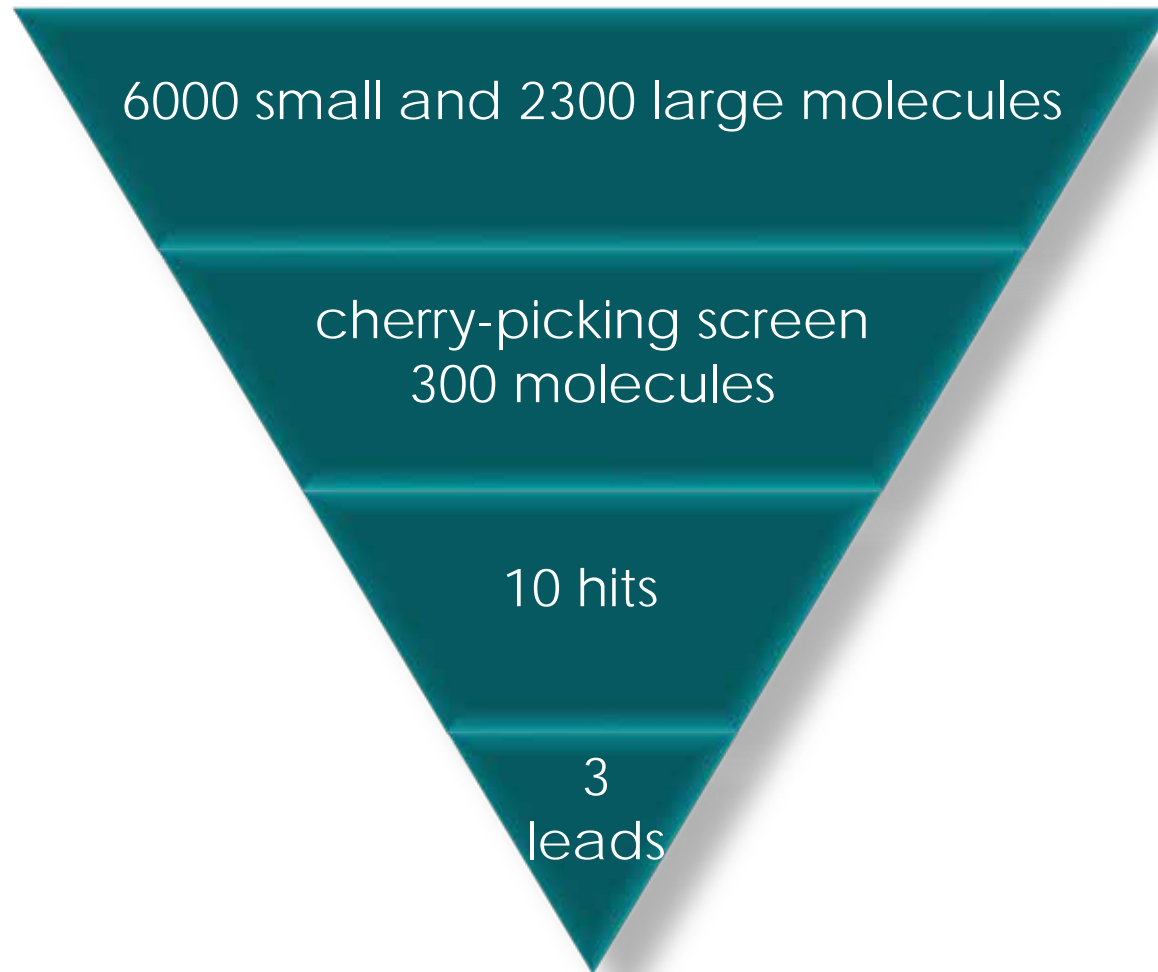
- CRC PDOs show an heterogeneous drug response to standard of care compounds as observed in CRC patient populations



Middle-throughput Drug Screening with Patient-derived Organoids



Drug Discovery Platform using CRC PDOs



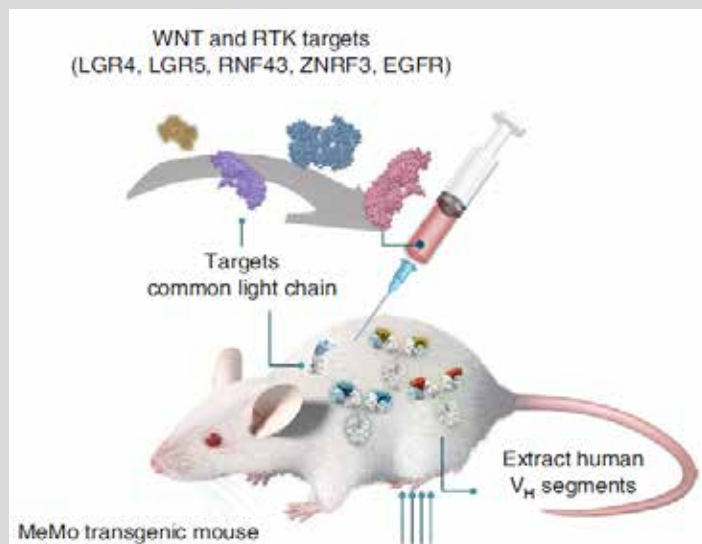
Increasing Number of CRC
PDOs used along the
screening pipeline



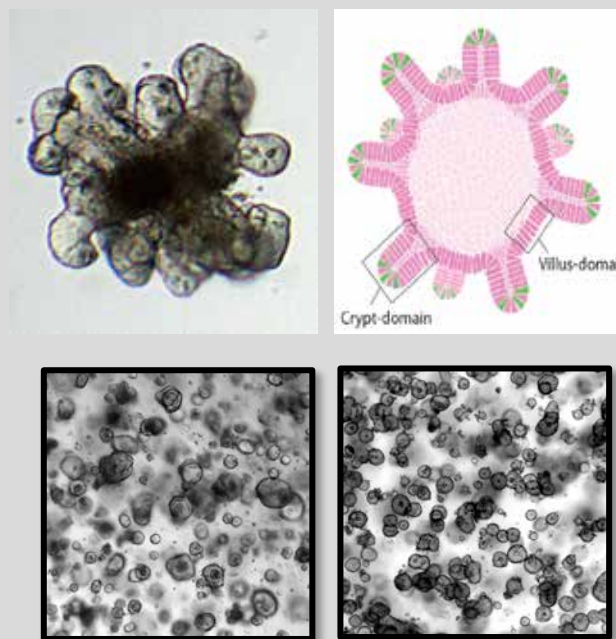
Mechanism and Lead
development

First Organoid Based Drug in Clinical Phase I

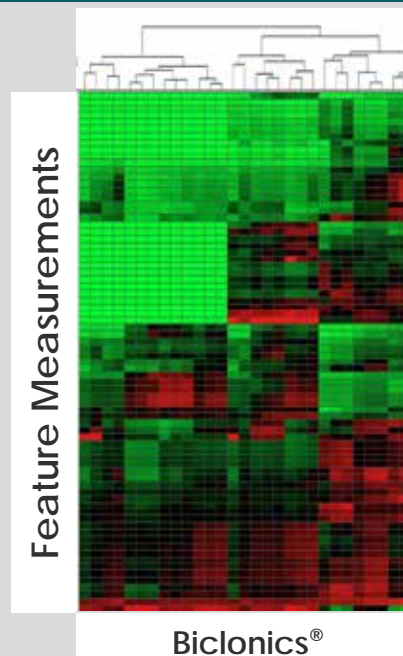
Biclonics® targeting CRC



Organoids – ex vivo patient-derived tumor tissue



High content screening on tumor and normal organoids



Merus

HUB ORGANOIDS

OcellO
Discover the full potential

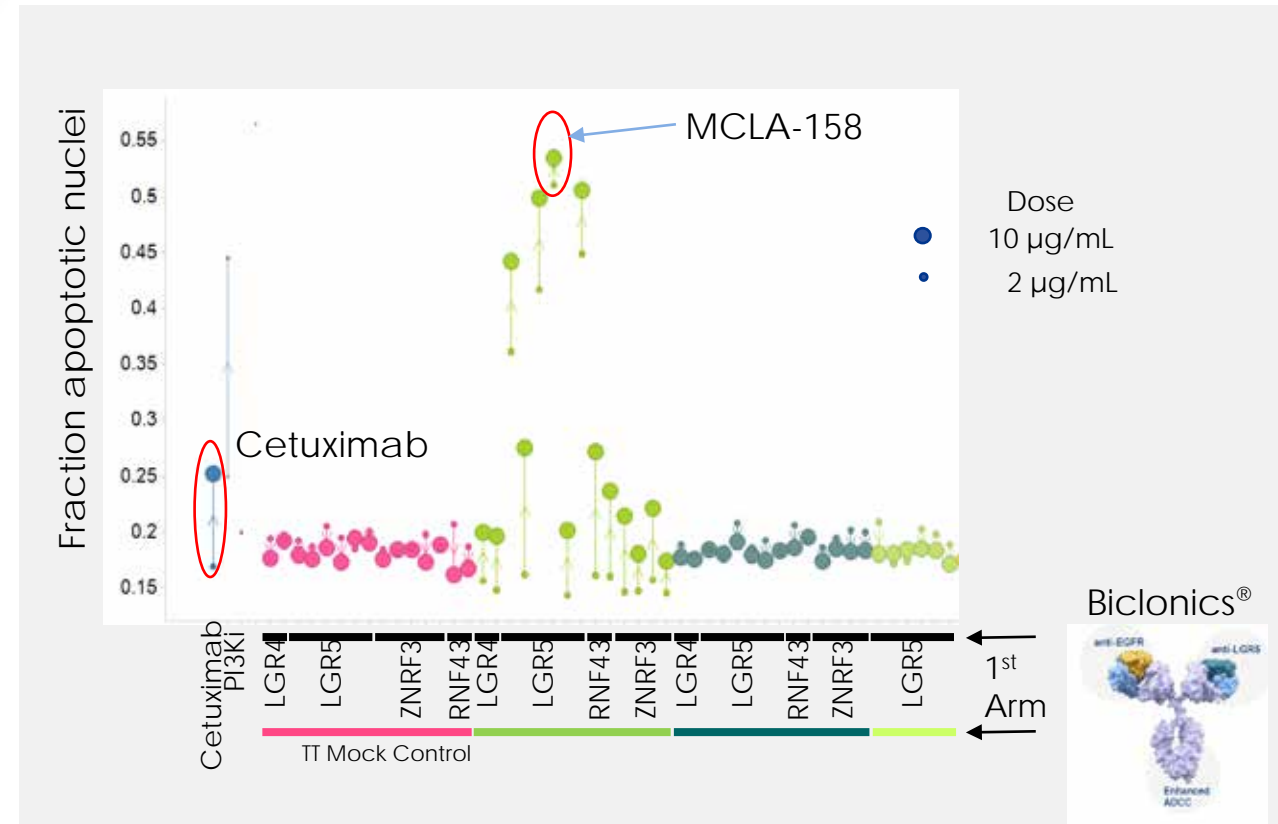
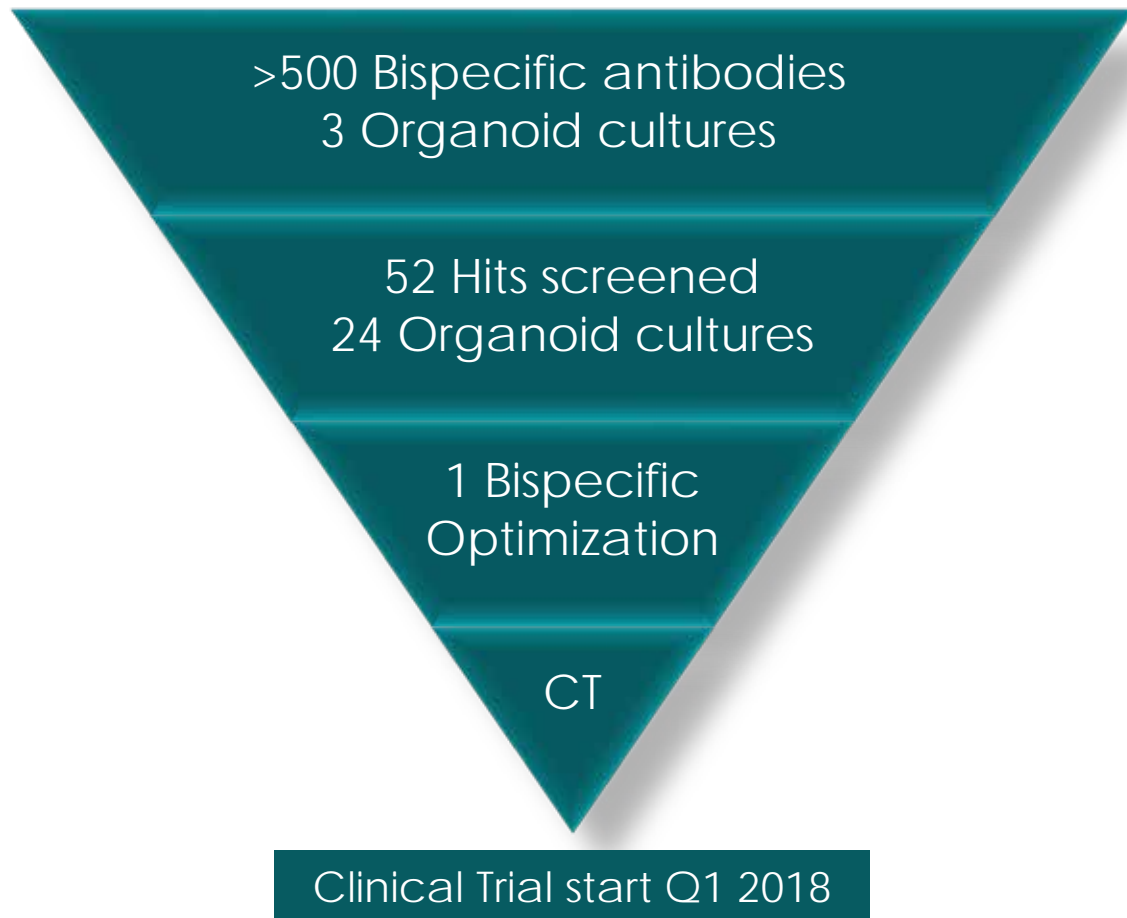
CROWN
BIOSCIENCE

IRB
BARCELONA

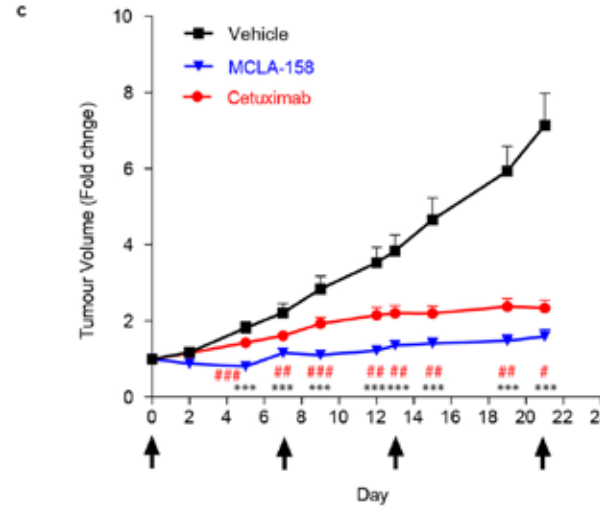
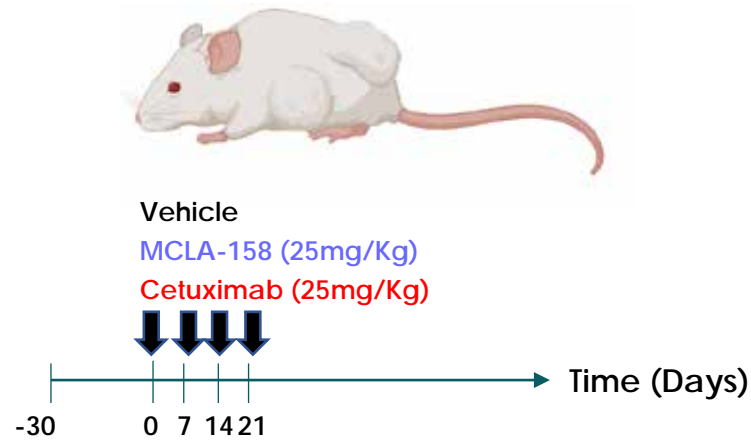
wellcome trust
sanger
institute

HUB ORGANOIDS

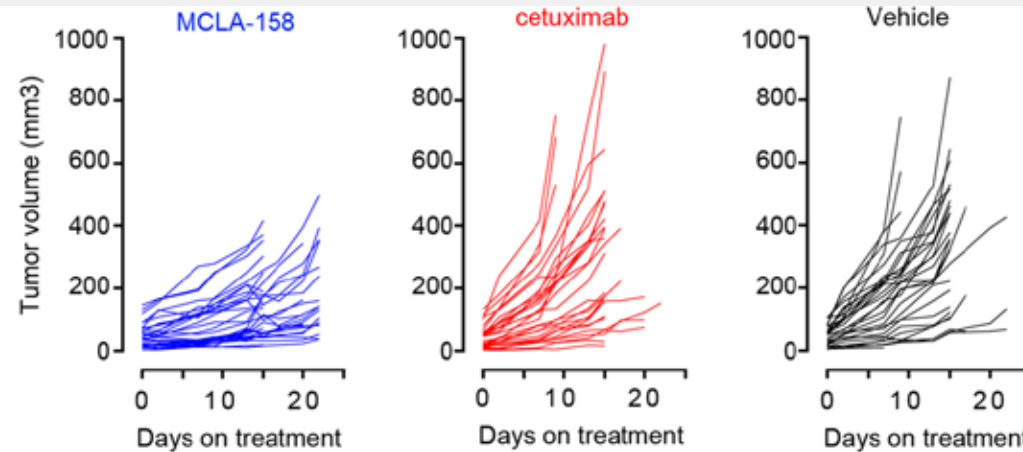
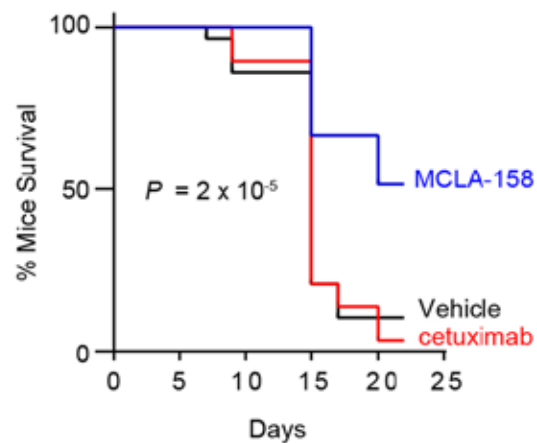
First Organoid Based Drug in Clinical Phase I



Effective Translation Into PDX Model

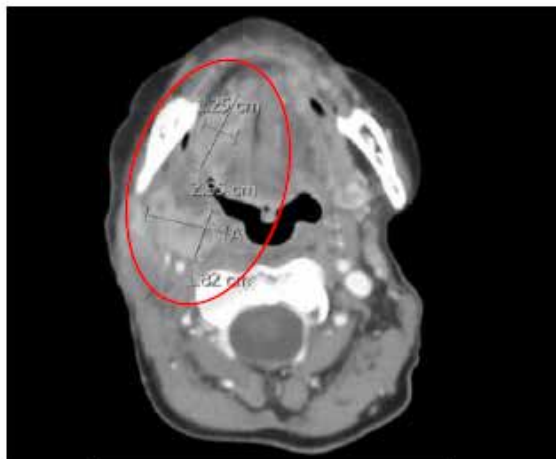


	P values vs MCLA-158		P values vs Vehicle
	Cetuximab		Vehicle
d2	0.005		0.005
d5	### 0.0001		*** 0.0001
d7	## 0.006		*** 0.006
d9	### 0.0005		*** 0.0005
d12	## 0.001		*** 0.001
d13	## 0.004		*** 0.004
d15	## 0.006		*** 0.006
d19	## 0.006		*** 0.006
d21	# 0.01		*** 0.01



Validation of MCLA-158 in Clinical Trials

Baseline



Cycle 4



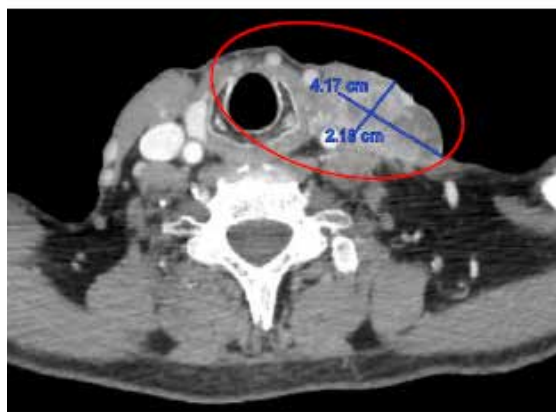
67-year-old male

Lesion location: larynx

MCLA-158 cycles: 6+

Best response: PRc (-41%)

Prior treatment: platinum + paclitaxel
+ durvalumab



59-year-old female

Lesion location: tongue

MCLA-158 cycles: 4+

Best response: PR (-88%; CR
reported after data cut-off)

Prior treatment: RT →
pembrolizumab + platinum + 5-FU

- Substantial and promising antitumor activity was observed in the first 7 patients with HNSCC.
- Well tolerated with a manageable safety profile.
- Exploration of MCLA 158 in HNSCC is continuing and is planned in other tumour indications.



Oncology

colon, pancreas,
breast, lung,
ovarian, H&N
organoids

Cystic fibrosis

colon and lung
organoids

Inflammatory diseases

colon and lung
organoids

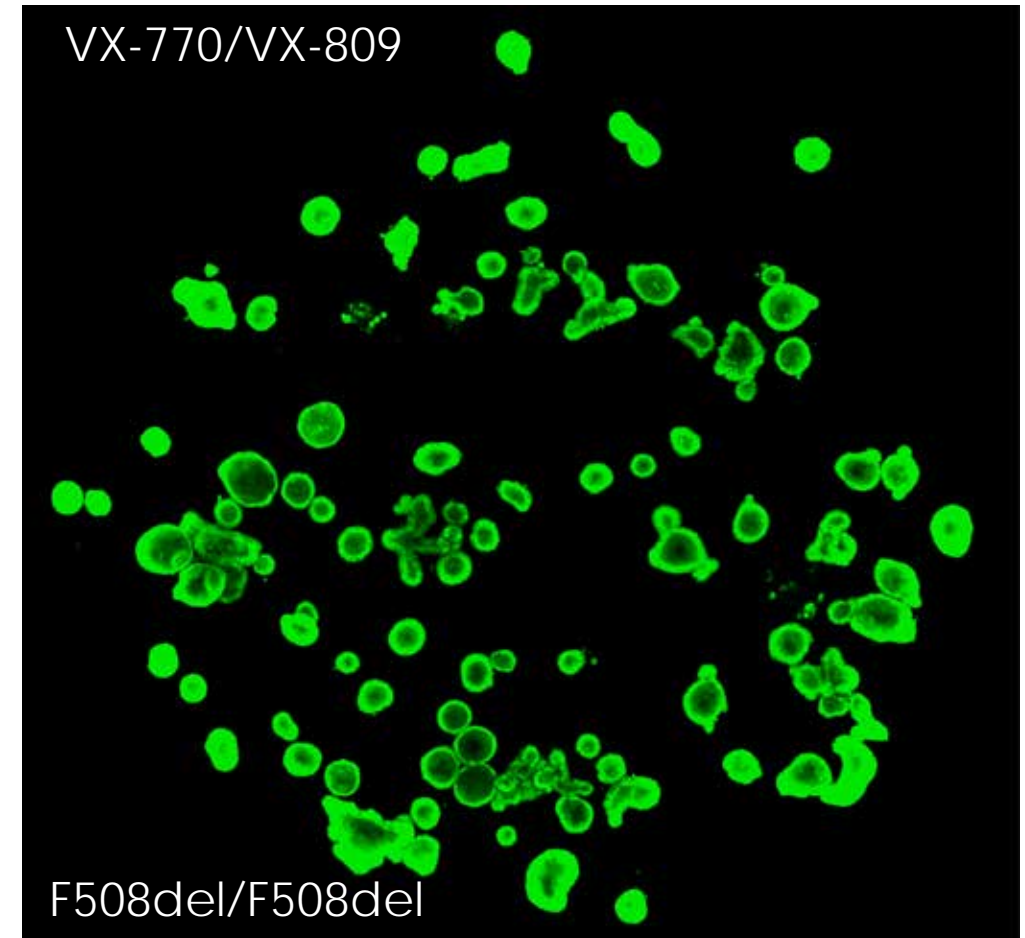
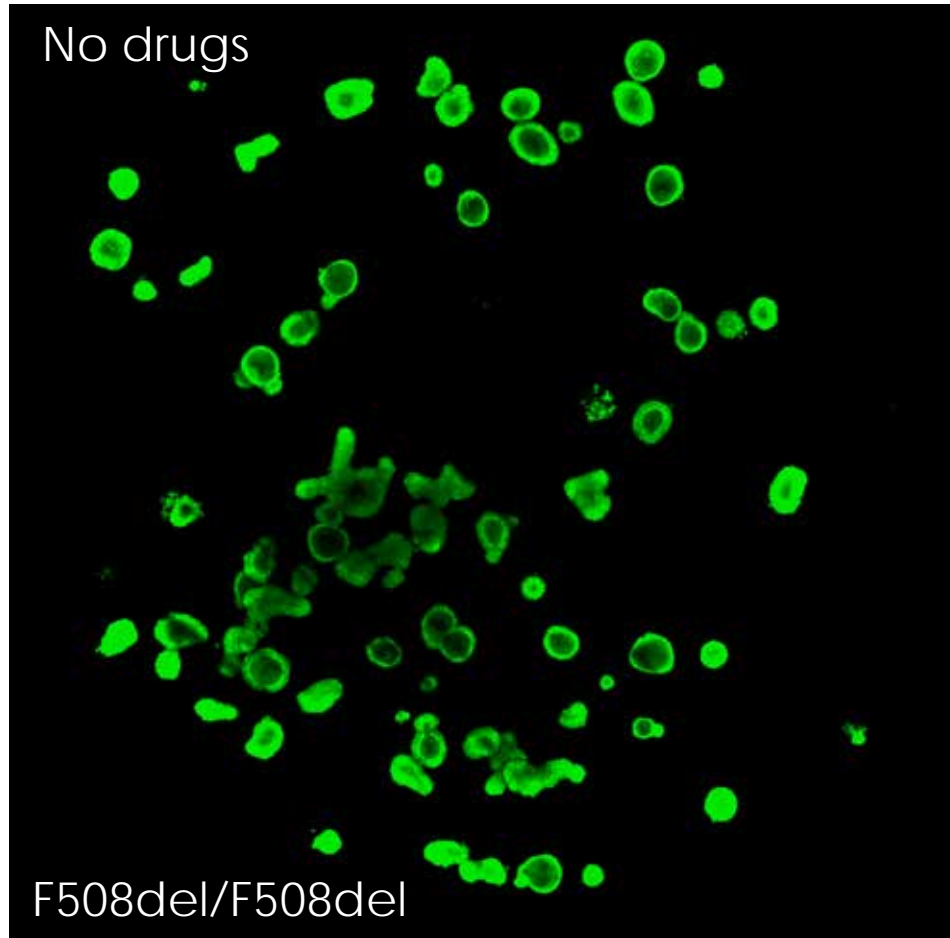
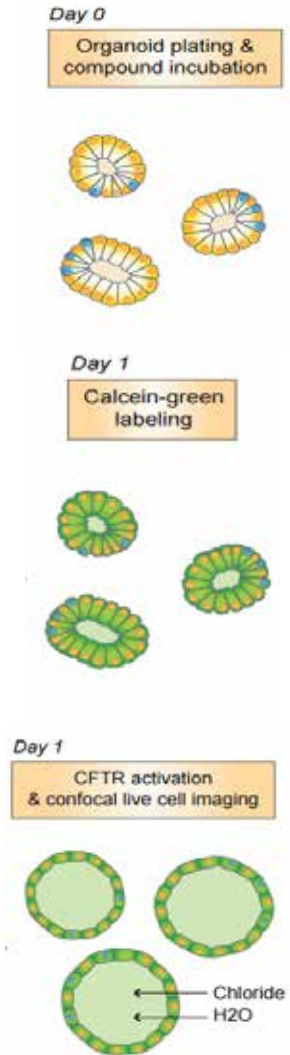
Infectious diseases

liver, lung and
intestinal tract
organoids

Toxicology

liver and
intestinal tract
organoids

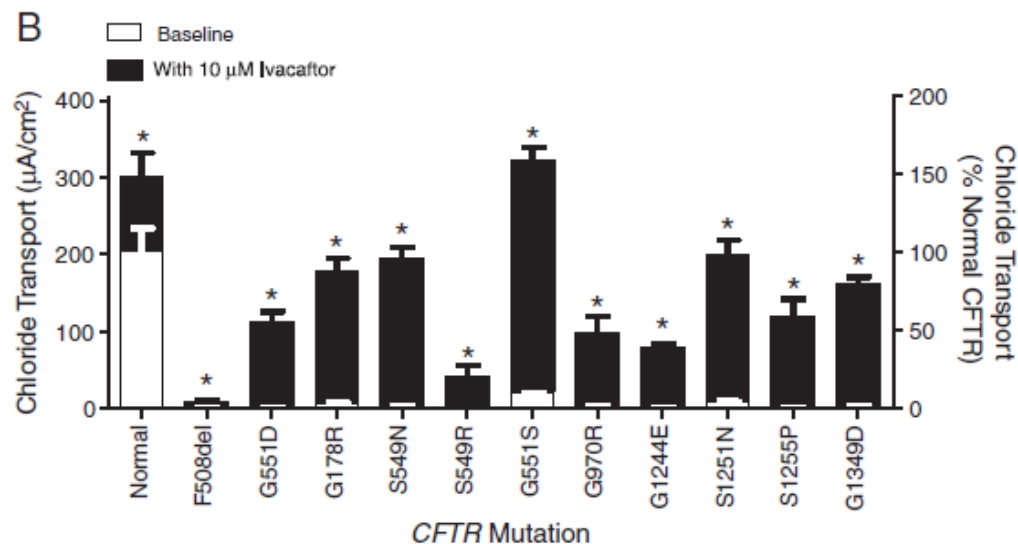
Forskolin-induced swelling (FIS) assay



Rectal Organoids as Predictive Tool for Patient Response

Ivacaftor potentiation of multiple CFTR channels with gating mutations

Haihui Yu, Bill Burton, Chien-Jung Huang, Jennings Worley, Dong Cao, James P. Johnson Jr., Art Urrutia, John Joubran, Sheila Seepersaud, Katherine Sussky, Beth J. Hoffman, Fredrick Van Goor *



Yu et al. *J Cyst Fibros.* 2012

Full Prescribing Information | Important Safety Information | Patient Site

What can we help you find?

Home Role of CFTR Protein Clinical Trials Safety Dosage and Administration Resources

Home Clinical Trials

Clinical Trials

Trials 1 and 2: Evaluation of KALYDECO (ivacaftor) in patients with a *G551D* mutation¹

The efficacy and safety of KALYDECO in patients 6 years of age and older with CF who have a *G551D* mutation in the *CFTR* gene were evaluated in two randomized double-blind, placebo-controlled clinical trials in 213 clinically stable patients with CF (109 receiving KALYDECO 150 mg twice daily). (Click here to access [G551D Mutation Clinical Overview](#))

Trial 4: Evaluation of KALYDECO in patients with additional *CFTR* mutations¹

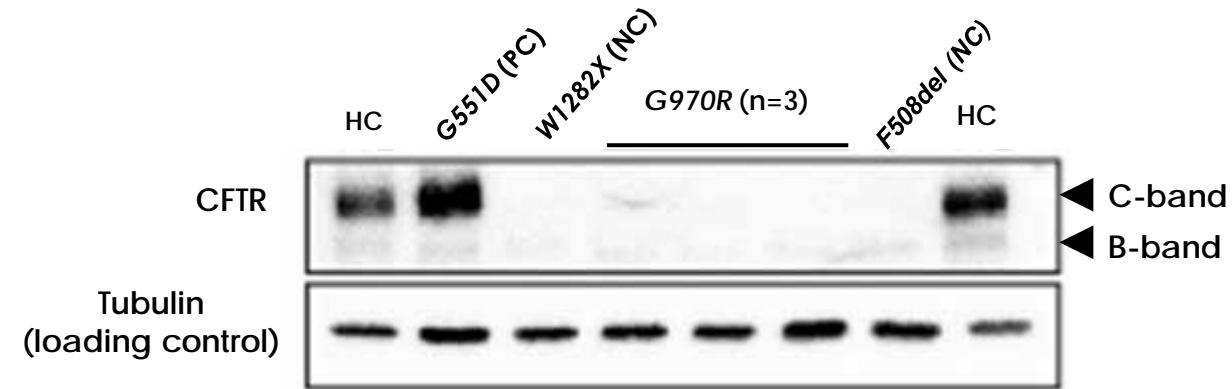
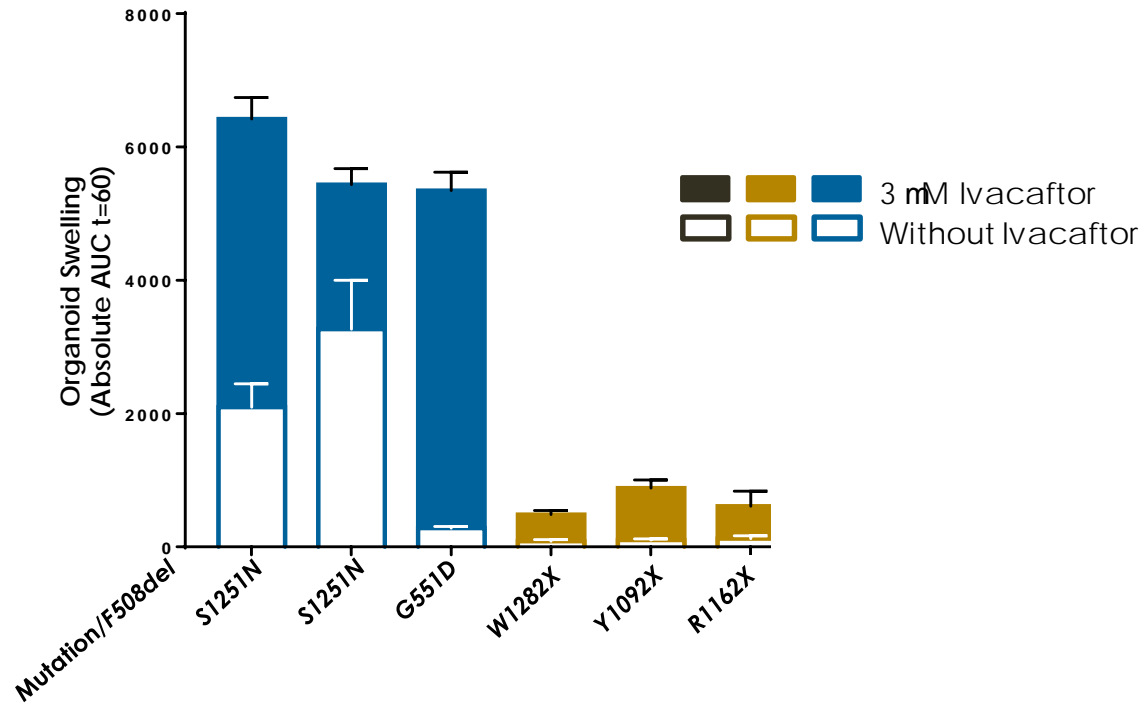
The efficacy and safety of KALYDECO in patients between the ages of 6 and 57 with CF who have a *G1244E*, *G1349D*, *G178R*, *G551S*, *G970R*, *S1251N*, *S1255P*, *S549N*, or *S549R* mutation in the *CFTR* gene were evaluated in a two-part, randomized, double-blind, placebo-controlled, crossover-design clinical trial in 39 patients with CF. (Click here to access [Additional CFTR Mutations Clinical Overview](#))

*In this study, efficacy could not be established in people with the *G970R* mutation. KALYDECO is not indicated for people with CF who have the *G970R* mutation.

Click below for:

- Clinical Trials
- Pharmacodynamics of KALYDECO
- G551D* Mutation
- Additional *CFTR* Mutations
- Homozygous *F508del* Mutation

Rectal Organoids as Predictive Tool for Patient Response



Clinical Predictive Value for Patient-derived Organoids

Patient-derived Organoids Mimic Patient Treatment Response

Clinical Response

Patient A (responder)

- Capecitabine:
 - Progression-free survival: 34.6 month,
 - Best RECIST response: partial response



Liver metastasis (30 mm)



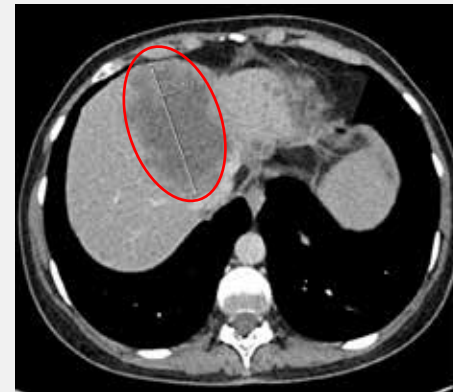
Liver metastasis (18 mm)

Patient B (non-responder)

- 5FU + Oxaliplatin (FOLFOX):
 - Progression-free survival: 1.8 month,
 - Best RECIST response: progressive disease



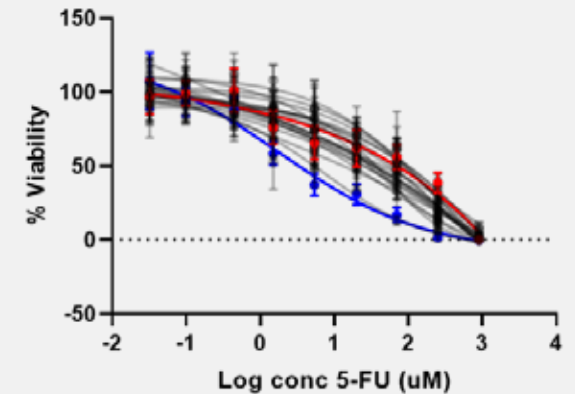
Liver metastasis (57 mm)



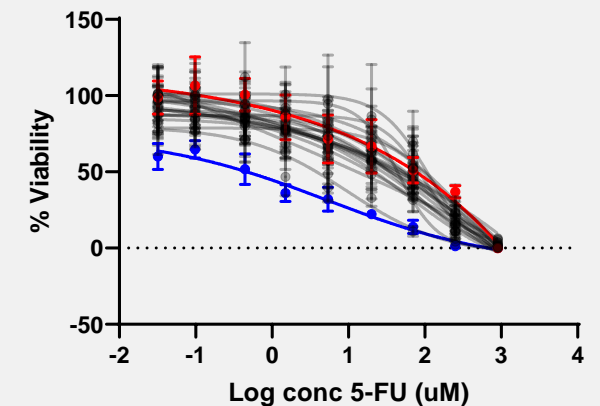
Liver metastasis (80 mm)

Organoid Response

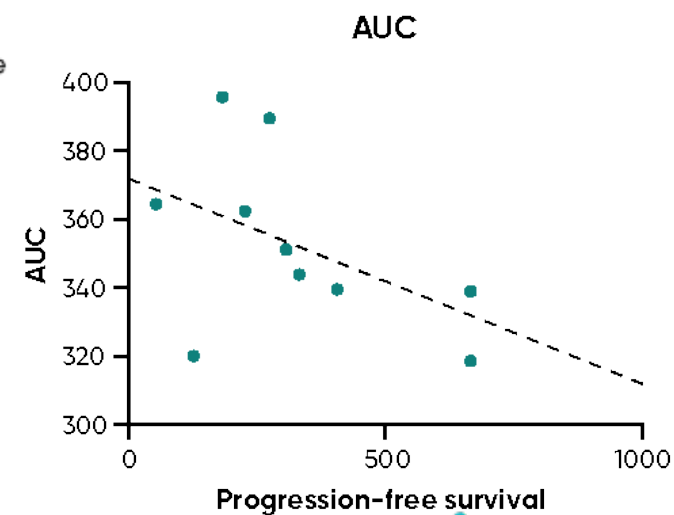
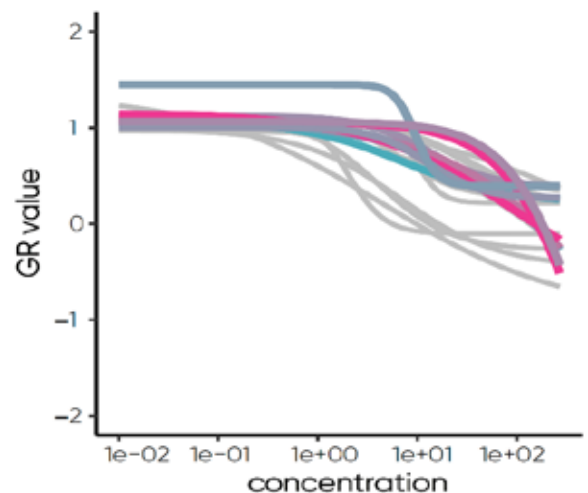
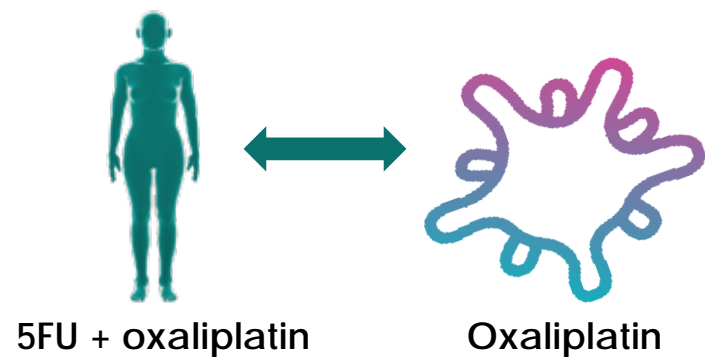
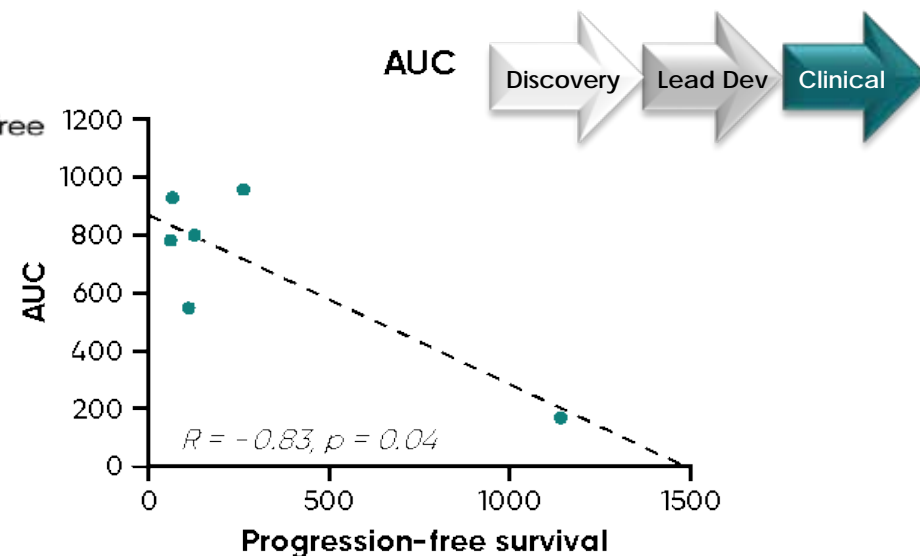
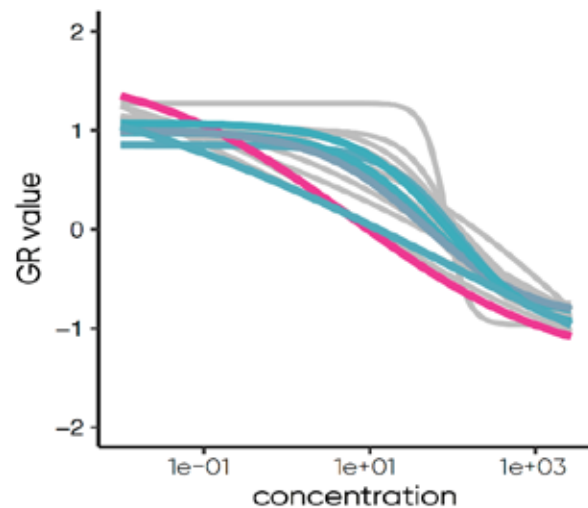
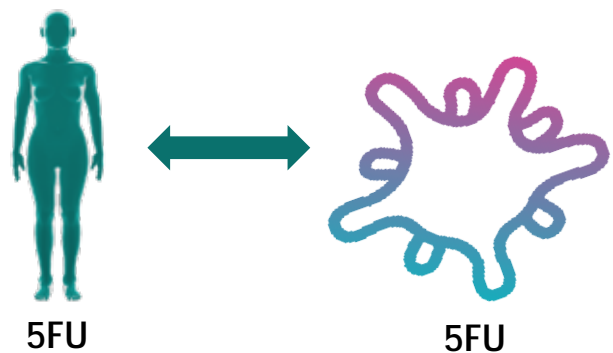
5FU



5FU + 5,3μM Oxaliplatin



CRC Organoids Mimic Patient Clinical Responses

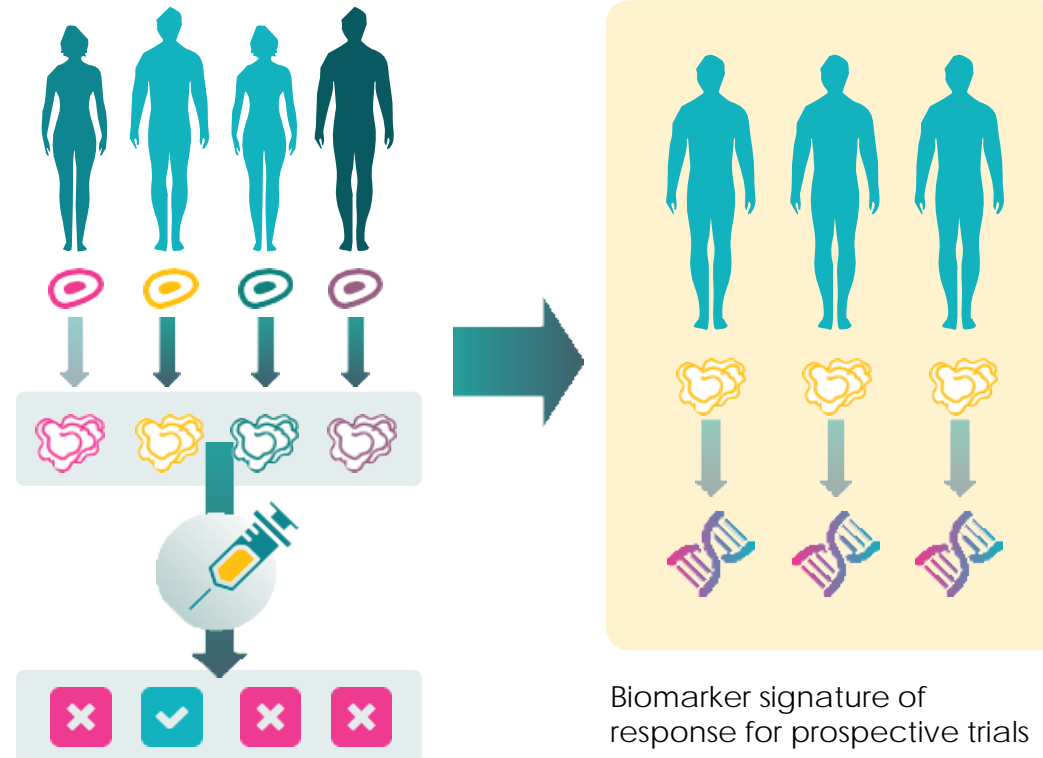
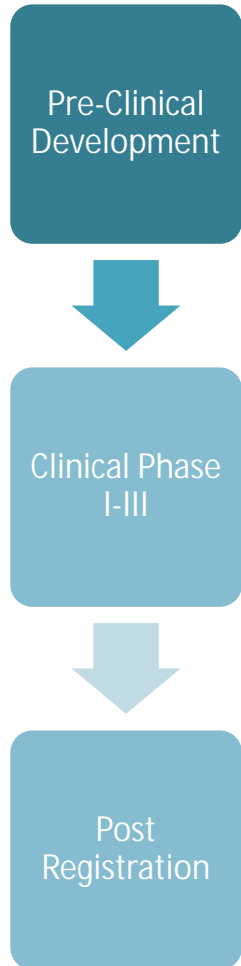


Clinical Trials on a Dish

“Clinical Trials on A Dish or Avatar Clinical Trials”

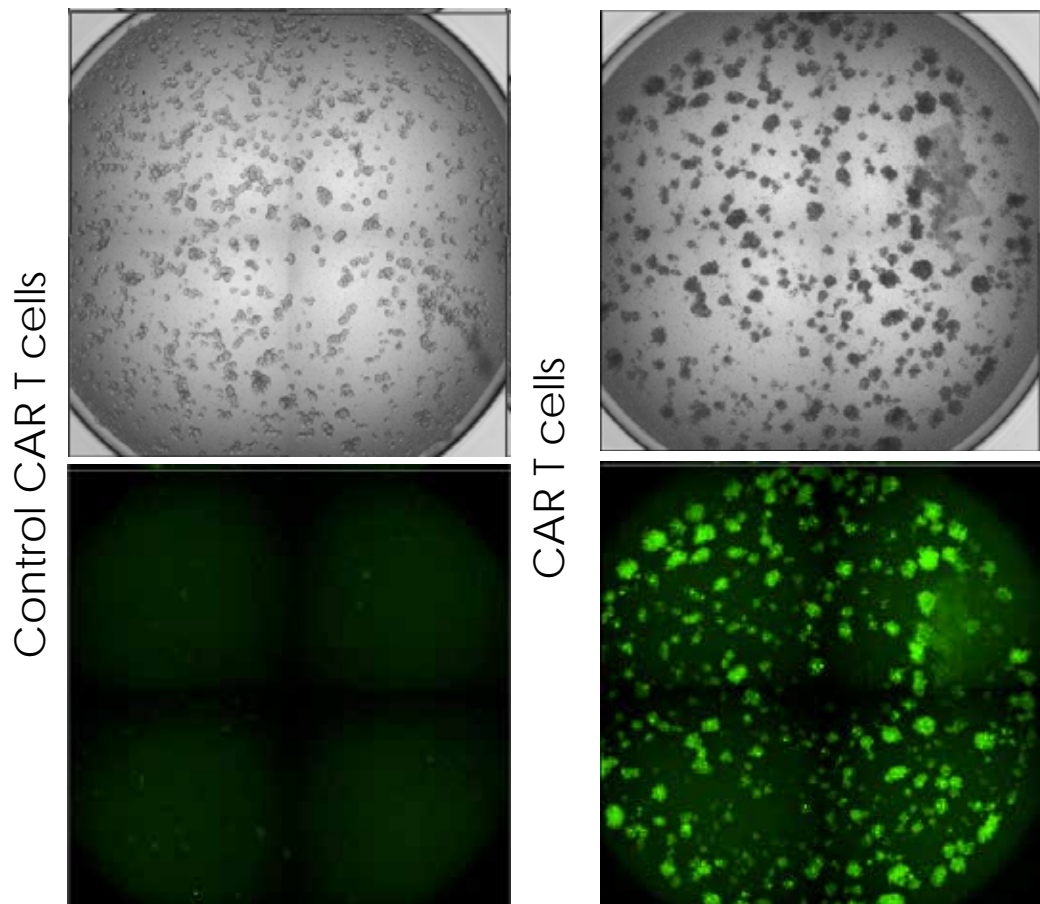


Clinical trial in a dish
Patient-stratification based on PDO response

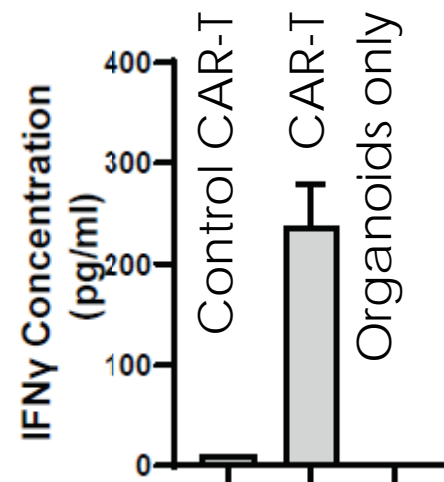
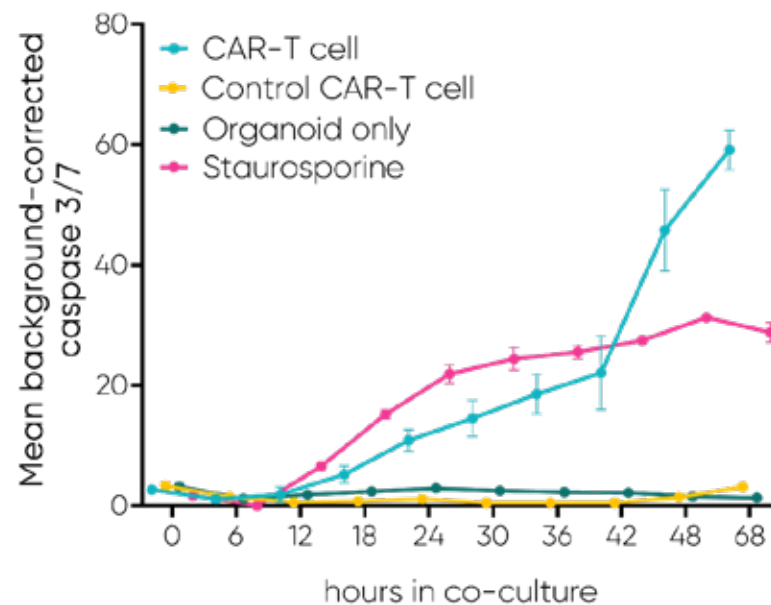


Development of Co-Culture Assays with Imaging-based Readouts

- Caspase3/7 signal can be used to evaluate tumor organoid killing by T-cells in a time course.

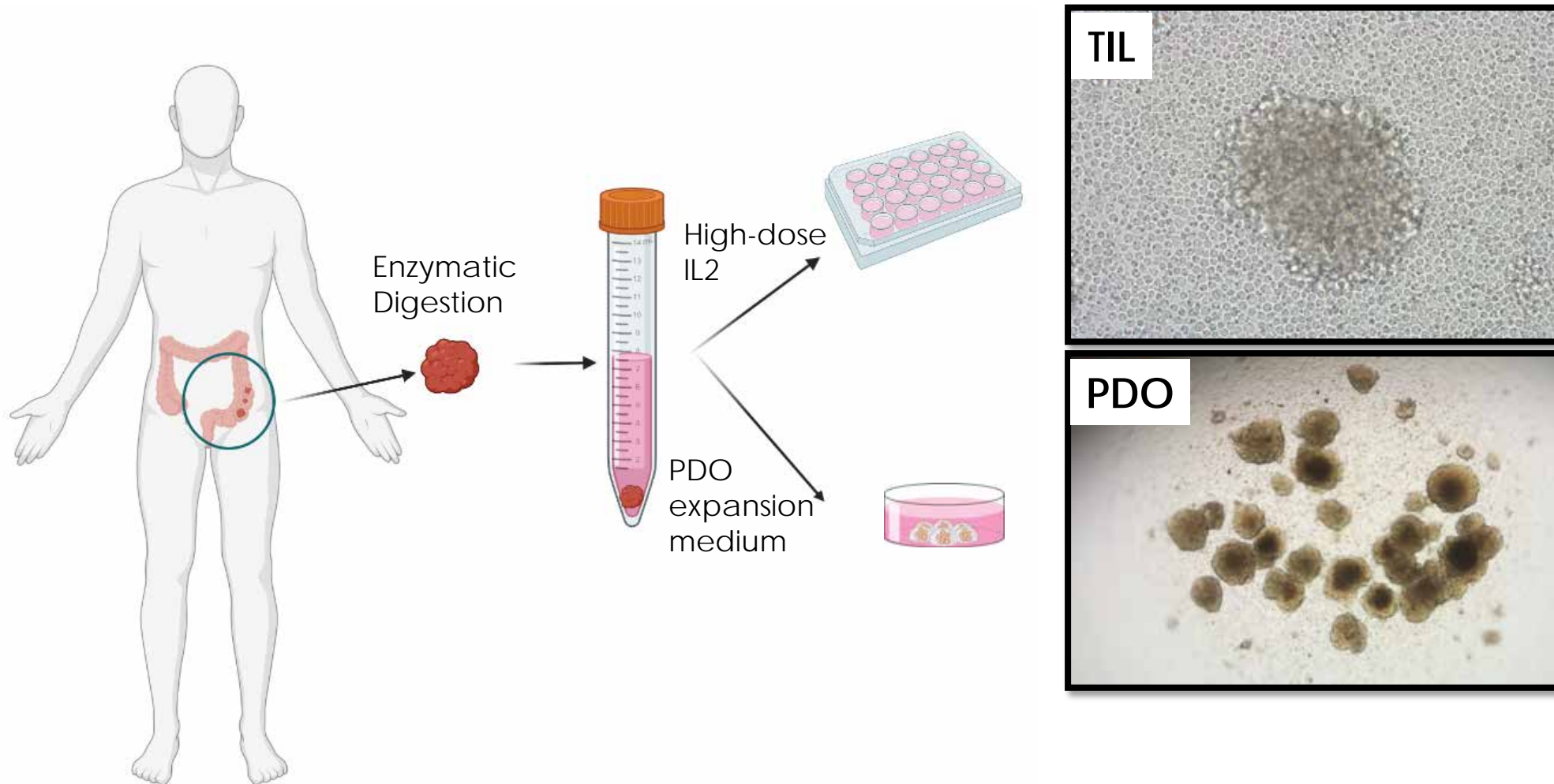


CART-CRC co-culture, 72h



Establishment of autologous TIL - PDO Biobanks

- Generation of IO Biobanks by isolating and establishing biobank of tumor PDOs and associated Tumor Infiltrated lymphocytes (TILs)



HUB Organoids – From Drug Discovery to Patient Application

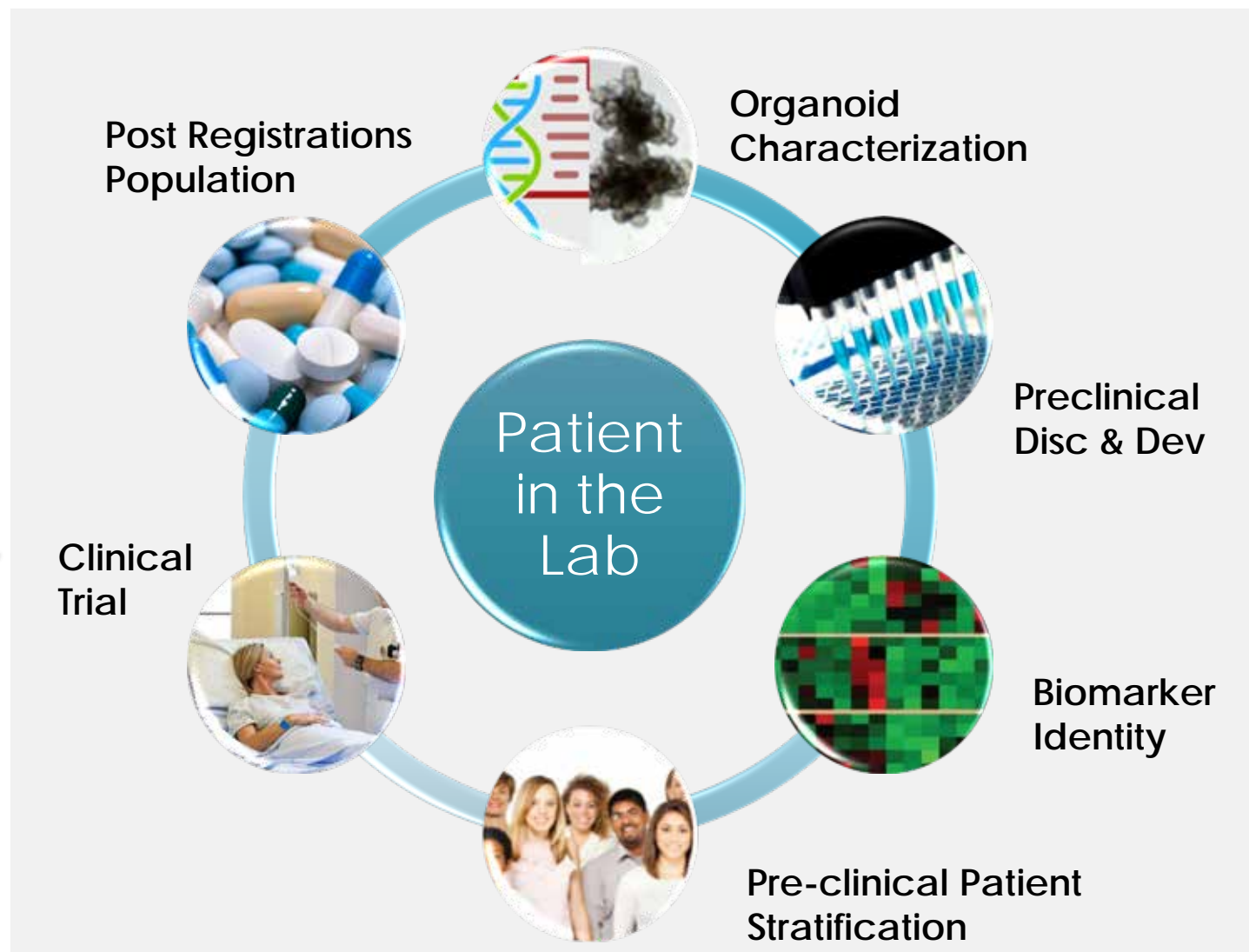
Pre-Clinical Development



Clinical Phase I-III



Post Registration



ABOUT HUB

Hubrecht Organoid Technology (HUB) was founded by the Hubrecht Institute, the University Medical Center Utrecht, and the Royal Netherlands Academy of Arts and Sciences (KNAW).

HUB's technology constitutes a paradigm-shifting platform for drug discovery and development, (pre)clinical patient stratification, predictive diagnostics, personalized medicine, clinical trials, regenerative medicine, and companion diagnostics.

As the global leader in the field of Organoid Technology, HUB offers licenses to its proprietary technology, provides services and access to its living organoid biobanks.

Contact Us:

Business Development
bd@huborganoids.nl

www.huborganoids.nl

