

Terry K. Morgan, MD, PhD Departments of Pathology, Obstetrics & Gynecology, and Biomedical Engineering Oregon Health & Science University, USA

Eunice Kennedy Shriver

National Institute of Child Health & Human Development

* Dr. Morgan has no conflicts of interest to disclose

Problem of Supply and Demand



Maternal Vascular Malperfusion and Clinical Outcomes

What we know: Snapshots at delivery

What we think: Pathology begins on 1st trimester
 Unknowns:

-Causes vs Consequences?

-In vivo "snapshots" throughout gestation linked to outcomes



<u>Snapshot</u> of Maternal Vascular Malperfusion (MVM) 34 weeks' PET/IUGR

Amsterdam Placental Workshop Consensus Statement: Khong T, et al. Arch Pathol & Lab Med. 140:698-713

Dragon Tree

Socotra Island, East of Aden

Tree of Life/Knowledge

AVM is Reproducible < 38 weeks'



Khong T, et al. J Clin Pathol. 1995; 48:420-3 Morgan T. Am J Perinatol. 2016; 33:258-66 **Amsterdam Placental Workshop Consensus Statement**: Khong T, et al. Arch Pathol & Lab Med. 140:698-713



Naeye R. Hum Pathol. 1987; 18: 387-91: >20,000 cases

Pinar H. Ped Path Lab Med. 1996; 16:903: <200 cases

Table 2. Gross and Histologic Findings in Preterm Birth: Oregon Health & Science University Experience^a

	No. (%) of Cases				
Variable	PTL with IAI ($n = 68$)	PTL without IAI	(n = 179)	Preeclampsia ($n = 121$)	FGR ($n = 29$)
SGA placenta	0 [Reference]	0		12 (10) ^b	28 (97) ^c
Gross infarction	4 (6) [Reference]	21 (12) ^d	<i>1</i> 0,	30 (25) [°]	10 (35) ^c
AVM	13 (19) [Reference]	106 (59) ^c	NOIS	70 (58) ^c	16 (55) [♭]

AVM=accelerated villous maturation; FGR=fetal growth restriction; IAI=intra-amniotic infection; PTL=preterm labor; SGA=small for gestational age. ^aGross and histologic data from the Department of Pathology, Oregon Health & Science University (OHSU), diagnosed by a single placental pathologist (T.K.M.) scoring for small placentas (SGA), which were defined as less than the 10th percentile when using trimmed weight and adjusting for gestational age, gross infarctions (usually 1–2 cm in diameter), and AVM, which was defined as term villous morphologic findings with conspicuous syncytial knotting and perivillous fibrin deposition before 38 weeks' gestation. (9) PTL with or without IAI was defined by the presence or absence of histologic chorioamnionitis (Figure 1). Severe preeclampsia and late-onset FGR were defined clinically by the maternal fetal medicine faculty at the OHSU. Findings were compared by χ^2 analysis with the Fisher exact probability test when appropriate.

 ${}^{\rm b}P < .01.$

 ${}^{c}P < .001.$

 $^{\rm d}P < .05.$

c522 NeoReviews Vol.15 No.12 December 2014

Multifactorial Hypothesis



Severity

Should we Grade MVM?

- What we know: Features associated with outcomes

 - -"Idiopathic" PTL: AVM
 -Severe PET: AVM + Infarctions
 -Early onset IUGR: AVM + Infarctions + SGA placenta
- Unknown: Variable penetrance of an underlying disease process, or separate pathophysiologies?



Adapted from Hamilton & Boyd, 1960 and Harris & Ramsey vascular reconstructions





Roberts & Morgan, et al. Hum Reprod. 2017. 32(12): 2382-93



Allerkamp H, et al. Hum Reprod. 2021; 36(3): 571-86



Maternal Vascular Malperfusion Causes Placental Damage



Placenta. 1980;1:61-76

Blood Sample Could Provide a "Liquid Biopsy of the Placenta"





Placenta @ Day 10 Post Conception (<u>1-2 mm in size</u>)

hCG is detectable!

Are EVs detectable that may provide insights into health, microenvironment regulation, pregnancy outcomes and DOHaD?

Extracellular vesicles (EVs) are abundant (~10⁶⁻⁸/ml) and maintain cell of origin surface markers



(*Trans Res.* 2018; 201:40-48. *AJP-Cell Phys.* 2019; 316:C264-73 **Nat Commun.* 2019; 10(1):4682.)

Flow cytometry is highly sensitive and specific



Extracellular Vesicles (EVs) are Small



Nanoscale Flow Cytometry Side Scatter (SSC) is the Key



Refractive Index of Cell- and Size-specific EVs is currently a mystery



Internal Controls and Target Validation



Adenoviral transduction of EGFR into pregnancy-adapted uterine artery endothelial cells remaps growth factor induction of endothelial dysfunction

Luca Clemente^a, Derek S. Boeldt^a, Mary A. Grummer^a, Mayu Morita^b, Terry K. Morgan^b, Greg J. Wiepz^c, Paul J. Bertics^d, Ian M. Bird^{a,e,*} (Mol & Cell Endocrinol. 2020; 499:110590)





Extracellular Vesicles



Morgan T & Myatt L: in preparation



Liposomes are larger than expected relative to 200nm bead (polystyrene) because they have ~1.3 RI

In contrast, flow sorted "exosomes" appear to be ~ 100nm in size

Could <u>dense exosomes</u> have RI > a cell & more like a virus ~1.5?

miRNA Analysis







200nm sorted 10^5 events/200ul in <u>10 minutes</u>

~10^3/ul=1 event/nl

non-200nm 10^6/2mls

EV Target Dilution in PBS (~ 1 event/drop)

Major Limitation

DENSITY GRADIENT ULTRACENTRIFUGATION

Most of the "exosome" fraction (1.12-1.19 g/ml) is not cell-specific



Transl Res. 2018 Nov;201:40-48.

"Tumor" Microenvironment





Frontier of EV-Biome Exploration: Content analysis, targeting, and function(s) . . <u>where no-one</u> <u>has gone before</u> . . .

μm

Helios

det 2/14/2019 dwell HV HFW mag □ WD **TLD** 10:24:53 AM **1.00 μs 1.50 kV 11.8 μm 35 000 x 3.9 mm**

Questions Please

Nanoscale Flow Cytometry Standardization



Y-axis standardized by voltage and polystyrene Megamix "sizing" beads putting 200nm bead at 10⁴ SSC-H

X- axis standardized by channel-specific laser voltage and BD-MESF beads with brightest at ~10^5 (e.g. FITC, APC, PE)

GFP-conjugated murine 100nm virus





CL2B 16X40 EV 02072020 001







How many antibodies/EV provided FI/Ab ~ 1:1?





<u>~100 Ab/EV-sized "exosome"; whereas:</u>

<u>MVs have ~ 10,000 Ab/EV</u>

Surface area $(4\pi r^2)$ of a 100nm EV is **31,416nm** Surface area of 350nm MV = **385,000nm**

Antibody is ~ 10nm in diameter

We should be able to fit 100s if not 1000s of antibodies on an EV

Reproducibility Between Machines and Technicians Creating Independent Uniform Gates



Reproducible Differences in Placental EV and Platelet EV Profiles



Roberts & Morgan, et al. Hum Reprod. 2017. 32(12): 2382-93



Placental STB Metastases to **Mom's Lungs** Release PLAP+ EVs Into her blood:

Do they have a function?!