

## Review Paper

## Amniotic Fluid as a Potential Source of Extracellular Vesicles With Anti-inflammatory and Regenerative Properties

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stem cells (MSCs),  
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(EVs)**ABSTRACT**

Cell therapy, especially with mesenchymal stem cells (MSCs), is a potent treatment for many diseases or disorders. Meanwhile, MSCs-based cell-free products, such as extracellular vesicles (EVs) have been suggested as an alternative to MSCs. These MSC-EVs have been used in different trials to treat various inflammatory-dependent disorders. MSCs, according to their isolated tissue source, could present different therapeutic features and their derived EVs. One of the new sources for MSC isolation is amniotic fluid (AF). In addition, other than MSCs, new studies have used AF as an acceptable source for EV isolation. These isolated EVs from AF (AF-EVs) or AF-derived MSCs EVs (AF-MSC-EVs) have been used in different in-vitro and animal studies to treat a wide variety of inflammatory-dependent pathological conditions due to their confirmed anti-inflammatory potentials (through suppressing different pro-inflammatory cytokines). Meanwhile, in other conditions requiring repairing properties (e.g. wound healing or myocardial infarction), considering their regenerative and angiogenic potentials, these EVs have shown proper therapeutic results. Furthermore, other than the in-vitro and animal studies, AF-EVs containing treatment have successfully been used in some clinical trials and showed no adverse events among the patients and expressed potent anti-inflammatory properties through suppression of two very important pro-inflammatory cytokines, namely interleukin 6 and tumor necrosis factor  $\alpha$ . Accordingly, AF-EVs and AF-MSC-EVs could be suitable choices for treatment due to their anti-inflammatory and regenerative properties. However, further clinical studies are needed.

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## Introduction

Cell therapy has been stated as a new therapeutic approach using major cell categories, including stem, progenitor, or primary cells. Stem cell therapy, as a pioneer treatment option, has been tested in different pathological settings, such as autoimmune, neurological, cardiovascular, liver, renal, ophthalmologic, and skeletal diseases/disorders [1]. The therapeutic potentials of stem cells in clinics have been suggested due to their paracrine secretions which could induce hematopoiesis, angiogenesis, and tissue reconstruction through the released growth factors, cytokines, chemokines, and trophic factors [2-4]. Extracellular vesicles (EVs) are a group of lipid bilayer-surrounded vesicles derived from different types of cells [5] and could be categorized into apoptotic bodies, micro-vesicles, and exosomes [6]. EVs have important roles in physiological and pathological conditions through cell communications [7] and have been used as disease biomarkers, therapeutic agents, and vehicles for drug delivery [8]. These communicating agents carry a wide variety of biomolecules, such as messenger ribonucleic acid, micro ribonucleic acid, DNA, active lipids, cytokines, and growth factors inside them which vary depending on the secreting origin [9]. The most studied EVs are from cells, including cancer-associated fibroblasts, tumor-associated macrophages, immunocytes, and mesenchymal stem cells (MSCs) [5]. Accordingly, this study reviews the therapeutic potentials of amniotic fluid (AF) MSCs (AF-MSCs) as well as their derived EVs in three settings, namely in-vitro, animal, and human studies.

## MSCs

Among cells secreting EVs with therapeutic properties, MSCs have been studied more than others. These cells are known for their ability to self-renew [10], potential for inflammatory response regulation [11], and regenerative properties [12]. MSCs have been used in different clinical trials for inflammatory-dependent diseases or disorders, such as rheumatoid arthritis [13], osteoarthritis [14], liver cirrhosis [15], heart failure [16], COVID-19 [17], psoriasis [18], amyotrophic lateral sclerosis [19], and severe sepsis [20]. Regarding the safety of this treatment, a recent systematic review and meta-analysis has investigated 55 randomized controlled clinical trials (RCTs) and stated that the MSCs therapy is a favorable safe treatment [21].

## MSCs-derived EVs

Following acceptable results from randomized controlled trials performed on therapeutic applications of MSCs in different inflammatory-dependent pathological conditions, investigations on MSC-derived EVs became a field of interest [22]. MSC-derived EVs have been used in clinics on different pathological conditions, such as COVID-19 [23], sensitive skin [24], stages III and IV chronic kidney disease [25], and chronic graft-versus-host disease and dry eye disease [26]. Also, we have great experiences regarding the treatment of COVID-19 [27], chronic cutaneous graft-versus-host disease [28], systemic sclerosis [29], and chemotherapy-induced hair loss [30] with MSC-derived EVs. MSC-EVs, as cell-free products, have been suggested as a potent treatment option instead of MSCs with at least similar therapeutic potential.

## Sources of MSCs and their derived EVs

MSCs can be found in a wide variety of tissues, especially in niches of perivascular areas. The main sources of these cells are two main groups, including adult (bone marrow, adipose tissue, peripheral blood, and menses blood) and neonatal birth-associated tissues (cord blood, umbilical cord, and placenta) [10, 12, 31]. Although MSCs might have similar expressions of surface antigens and phenotypes, they certainly have different potentials [32]. The difference in the function of MSCs by the origin also could be implied by the immunomodulatory functions of their derived EVs. According to Shin et al., the secretomes of fetal-derived MSCs (e.g. placenta and Wharton's jelly) compositionally are more diverse in comparison to adult-derived MSCs (adipose and bone marrow). They hypothesized that the stronger therapeutic potential of fetal-derived MSCs might be due to this difference [33]. Another similar study by Jeon et al. investigated characteristics of MSCs with different origins (adipose tissue, placenta, and bone marrow). According to their results, placental-derived MSCs seemed to be more effective for clinical applications compared to other sources [32].

## AF and MSCs potentials

Human AF harvested (stem) cells (AFSCs) have been used in different in-vitro studies, such as heart valve leaflets [34, 35], fetal tracheal reconstruction [36], and bone grafts [37, 38]. In the in-vivo setting, kidney acute tubular necrosis [39], ischemic heart disease [40], and hyperoxic lung injury [41] are among the other successfully studied pathologies treated by AFSCs. In the early

2000s, after the evaluation of the second trimester's AF, this fluid was introduced as a new source of human MSCs [42-44]. The AF-MSCs have been isolated mostly during the amniocentesis which is performed at weeks 16-28 of gestation [45, 46]. However, other studies isolated these cells before [47] and after [48] this period. AF has some advantages compared to other sources of MSCs among them being a less invasive method of harvesting has attracted attention [49]. In 2012, Moorefield et al. hypothesized that AFSCs might have similar immune-modulatory effects compared to MSCs due to their high similarity in terms of differentiation potential and surface marker expression. After a series of experiments, they found the ability of inflammatory response suppression in these cells [50]. In an in-vivo study, Dionig et al. investigated the therapeutic potential of in-utero treatment of AF-MSCs for spina bifida. According to their results, these stem cells maintained partial to complete coverage in the treated animals [51]. Moreover, AF-MSCs have been used in an in-vivo model of peripheral nerve regeneration which showed an increase in myelination and improvement of motor function [52]. Soler et al. evaluated the potential of AFSCs in a rat model of bladder dysfunction of Parkinson's disease. They showed that cell therapy with AFSCs could ameliorate bladder dysfunction in their studied model [53]. Also, another study on the effects of AFSCs on an animal model of Parkinson disease showed behavioral improvement after the treatment [54]. An in-vivo study by Zani et al. evaluated the therapeutic potentials of AFSCs in a model of necrotizing enterocolitis. Their results showed that AFSCs could improve clinical condition, survival rate, and gut function in an animal model of necrotizing enterocolitis [55]. These cells have been studied for possible applications in regenerative medicine and immune system-dependent diseases due to their angiogenic and anti-inflammatory potentials.

### Angiogenesis

Angiogenesis has been defined as new micro-capillary formation from pre-existing structures. This phenomenon could be seen in pathological (e.g. tumor growth and metastasis, psoriasis, corneal neovascularization, and hemophilic arthropathy) conditions [56-60] as well as physiological (female reproductive cycle, wound healing, and revascularize in ischemic heart tissues) situations [61-63]. This phenomenon consists of different steps among the most important of which are degradation of the basement membrane, endothelial cell activation, migration, proliferation, and tube formation [64]. The main trigger of angiogenesis seems to be hypoxia and lack of nutrients which cells start to release different factors among the most im-

portant of them is hypoxia-inducible factor 1 $\alpha$  (HIF-1 $\alpha$ ). HIF-1 has synergistic correlations with crucial angiogenic factors, such as vascular endothelial growth factor and placental growth factor [65].

### Inflammation

Inflammation is a nonspecific defensive state in tissues against infectious or noninfectious (toxic compounds, damaged cells, endogenous antigens, and irradiation) situations [66, 67] which depending on the onset, divides into acute [68] and chronic [66]. Although acute inflammation has been considered a defense mechanism [69] and is a required step in some physiological events, such as wound repair [70], it could cause severe life-threatening conditions, such as pancreatitis [71] and acute respiratory distress syndrome [72]. Chronic inflammation, on the other hand, has been a destructive phenomenon leading to or involving in pathologies [66], such as psoriasis [73], rheumatoid arthritis [74], ulcerative colitis, Crohn's disease [75], endometriosis [76], and increased risk of infections and malignancies [77]. Among the most important mediators of inflammation, some interleukins (IL; for instance IL-1 $\beta$  and IL-6), tumor necrosis factor  $\alpha$  (TNF- $\alpha$ ), and some chemokines (e.g. CXCL8) [78, 79] are critical.

### Angiogenic and anti-inflammatory potentials of amniotic fluid-derived MSCs

Thus far, some studies have investigated the angiogenic and anti-inflammatory potentials of AF-derived MSCs (AF-MSCs). Mirabella et al. have evaluated the angiogenic potential of AF-MSCs in in-vivo and in-vitro models. The endothelial cells treated with AF-MSC condition media (ACM), containing their secretomes showed to have cytoprotective effects on endothelial cells. Also, in the migration assay, endothelial cells treated with ACM showed better results compared to condition media of human umbilical cord-derived fibroblasts. To assess the tube formation, endothelial cells in Matrigel were treated with ACM and serum-free medium which showed a significant increase in formed tubes in favor of ACM. In the in-vivo angiogenesis assay (hind-limb ischemic mouse), higher neoarteriogenesis was observed following ACM treatment [80]. In another study, investigations showed over-expression of intercellular adhesion molecule 1 (ICAM-1) and vascular cell adhesion protein 1 (VCAM-1) in AF-MSCs. These adhesion molecules are role players in angiogenesis and cell migration [81, 82]. AF-MSCs and ACM could modulate immune activation by blocking lymphocyte activation [50]. In a study on an animal

model of acute hepatic failure, the therapeutic potential of AF-MSCs was drawn through the increased levels of transforming growth factor  $\beta$  (TGF- $\beta$ ) and VEGF [83]. Another in-vivo study on fulminant hepatic failure used AF-MSCs overexpressing IL-1 receptor antagonist (IL-1Ra) as a possible treatment. According to their results, the treatment decreased mortality and increased survival rates as well as prevention of liver failure. Treatment with these cells led to a significant decrease in the serum IL-6 and TNF- $\alpha$  [84]. In a mice model of colitis, Legaki et al. showed that conditioned media of spindle-shaped AF-MSCs could decrease TNF- $\alpha$  and increase TGF- $\beta$  at protein levels. Also, at the expression levels, TNF- $\alpha$  and IL-1 $\beta$  experienced a decrease in expression. On the other hand, an increasing pattern of expression was observed for TGF- $\beta$  and IL-10 [85] as potent anti-inflammatory agents [86]. Another suggested pathway for the anti-inflammatory potential of AF-MSCs is through decreasing IL-6. As it has been shown in a hyperoxia-induced pulmonary alveolar injury animal model, IL-6 levels followed a decreasing pattern in the lung tissue after AF-MSC treatment [87].

#### Amniotic fluid-MSCs-derived EVs

As mentioned previously, MSCs-derived EVs of cells isolated from different sources, such as placenta [27-30], umbilical cord [88, 89], bone marrow [90, 91], and adipose tissue [92, 93] have been used as a possible treatment for different pathological conditions. In pregnant women, the levels of microparticles in AF were 41-fold higher than in their plasma [94] which was a clue for future investigations. Thus far, some studies have investigated the possible therapeutic potentials of AF-MSC-EVs. In an in-vivo model of bronchopulmonary dysplasia, Bellio et al. demonstrated favorable results following the treatment of animals with AF-MSC-EVs which among the proved mechanisms of action were inhibition of IL-1 $\beta$  expression. Also, they showed the EVs derived from AF-MSCs have a network of free radical scavenging [95]. Also, Del Rivero et al. showed that AF-MSC-EVs could affect human T-cells and induce strong immunomodulatory effects in an in-vitro model [96]. AF-MSCs have been used to treat necrotizing enterocolitis in vivo [55]. Another study has used the cell-free product of AF-MSCs, EVs, in the same condition. This specific treatment decreased necrotizing enterocolitis occurrence, intestinal injury, and gut inflammation. This study found a significant decrease in IL-6 and TNF- $\alpha$  as possible pathways for the obtained results [97]. Another study investigated the therapeutic potentials of spindle-shaped AF-MSCs-derived secretomes and exosomes in a model to assess inflammatory bowel disease. This

treatment led to a decrease in LPS-induced inflammation through suppression of IL-1 $\beta$ , IL-6, and TNF- $\alpha$  expression in subepithelial myofibroblasts. Also, the expression of IL-10, an anti-inflammatory cytokine significantly increased after the treatment [98]. Among the regenerative studies, AF-MSC-EVs have been used for improving the clinical status in a rodent model of fetal lung underdevelopment [99]. As Li et al. demonstrated, AF-derived EVs (AF-EVs) were able to induce tube formation and migration in human umbilical endothelial cells in in-vitro models following oxygen and glucose deprivation. Moreover, they found higher expression of HIF-1 $\alpha$  and VEGF in the cerebral cortex of neonatal rodents [100]. Other than the mentioned pathological conditions, AF-MSC-EVs/AF-SC-EVs/AF-EVs have also been used for the treatment of different pathological conditions, such as fetal hypoplastic lungs [101], pulmonary hypoplasia [102], ischemia/reperfusion condition [103], Alzheimer's disease [104], myocardial infarction [105], wound healing and skin regeneration [106, 107], chemotherapy-induced ovarian failure [108, 109], osteoarthritis [110], osteoporosis [111], Alport syndrome [112], and azoospermia [113].

AF-EVs have been used in clinical investigations as well. A study demonstrated the use of AF-derived nanoparticles containing not only EVs and exosomes but also cytokines and growth factors under the manufacturer name of Zofin™ (Organicell Regenerative Medicine, Inc. in Miami, FL, USA). No serious adverse events were observed among the patients caused by this treatment. Following the treatment with Zofin™, COVID-19-associated symptoms resolved or at least not progressed. Also, pro-inflammatory factors including C-reactive protein, IL-6, and TNF- $\alpha$  improved after the treatment [114]. This time, another study investigated the therapeutic potentials of Zofin™ on three patients diagnosed with severe COVID-19 who were hospitalized in the intensive care unit. No adverse event related to the treatment was observed among the patients and intensive care unit clinical status and improvement in their respiratory system were observed [115]. Moreover, Zofin™ was tested on a patient with long COVID-19 presented with respiratory impairment and shortness of breath which evaluation of clinical status and imaging modalities showed improvement in the symptoms [116]. A summary of all the mentioned studies is shown in Table 1.

#### Future studies and concerns

The EVs derived from AF, AFSCs, and AF-MSCs could be potent research avenues for future studies on inflammatory-dependent diseases/disorders as well as

**Table 1.** Sample of important studies on amniotic fluid-derived stem cells, MSCs, and MSCs-derived EVs

Cell Type	Author(s) (Year)	Target of Assessing Therapeutic Potential	Used Model
Amniotic fluid-derived stem cells	Weber et al. (2012) [35]	Fetal heart valve pathologies	Animal (sheep)
	Peister et al. (2009) [38]	Mineral deposition (bone formation)	Animal (rat)
	Perin et al. (2010) [39]	Acute tubular necrosis	Animal (mice)
	Bollini et al. (2011) [40]	Ischemic heart disease	Animal (rat)
	Chang et al. (2013) [54]	Parkinson disease (behavioral improvement)	Animal (rat)
	Zani et al. (2014) [55]	Necrotizing enterocolitis	Animal (rat)
	Carraro et al. (2008) [41]	Hyperoxic lung injury	Animal (mice)
Amniotic fluid-derived MSCs	Kunisaki et al. (2006) [36]	Fetal tracheal reconstruction	Animal (sheep)
	Steigman et al. (2009) [37]	Bone grafting	Animal (rabbit)
	Pan et al. (2009) [52]	Peripheral nerve regeneration	Animal (rat)
	Soler et al. (2012) [53]	Bladder dysfunction of Parkinson's disease	Animal (rat)
	Dionigi et al. (2015) [51]	Spina bifida	Animal (rat)
Amniotic fluid MSCs-derived EVs	Bellio et al. (2021) [95]	Bronchopulmonary dysplasia	Animal (rat)
	O'Connell et al. (2021) [97]	Necrotizing enterocolitis	Animal (mice)
	Antounians et al. (2021) [99]	Fetal lung underdevelopment	Animal (rat)
	Li et al. (2022) [100]	Hypoxic encephalopathy	Animal (mice)
Amniotic fluid stem cell-derived EVs	Xiao et al. (2016) [108]	Chemotherapy-induced ovarian failure	Animal (mice)
	Sedrakyan et al. (2017) [112]	Alport syndrome	Animal (mice)
	Khalaj et al. (2022) [101]	Fetal Hypoplastic Lung	Animal (rat)
	Khalaj et al. (2022) [102]	Pulmonary hypoplasia	Animal (rat)
	Gatti et al. (2020) [104]	Oxidative stress in Alzheimer's disease	Animal (mice)
	Zavatti et al. (2020) [110]	Osteoarthritis	Animal (rat)
	Costa et al. (2022) [105]	Myocardial infarction	Animal (mice)
	Zhang et al. (2021) [106]	Wound healing and skin regeneration	Animal (rat)
	Wgealla et al. (2022) [107]	Wound healing and skin regeneration	Animal (mice)
Amniotic fluid MSCs-derived EVs	Geng et al. (2022) [109]	Premature ovarian failure	Animal (mice)
Amniotic fluid-derived EVs	Mobarak et al. (2021) [113]	Azoospermia	Animal (rat)
	Bellio et al. (2021) [114]	Mild-to-moderate acute COVID-19	Human
	Mitrani et al. (2021) [115]	Severe COVID-19	Human
	Mitrani et al. (2021) [116]	Long COVID-19	Human



regenerative medicine. As mentioned previously, this source (AF) has some advantages, such as easy access and being less invasive. However, there could be some concerns about them. They have been studied less than the other similar cells and EVs. Also, AF is the first human body fluid that their derived EVs have been used in clinical trials and data regarding them is not comparable with EVs derived from isolated cells cultured under good manufacturing practice. However, considering the already discussed advantages and growing evidence on this topic, the answers to these questions and concerns will be found soon.

## Conclusion

Cell therapy (e.g. MSCs) has been introduced as a new treatment approach for many diseases/disorders. Despite many successes in this field, cell-based cell-free therapeutic agents (EVs) have been bolded recently due to their potency and safety. MSC-EVs could be obtained from different sources the most popular one is culturing the cells and then collecting EVs from their conditioned media. Other than MSCs, recently, AF has been used for the isolation of EVs. The EVs obtained from AF or AF-derived cultured cells (MSCs/SCs) have been tested in many in-vitro, animal, and human studies for treating different pathological conditions through their anti-inflammatory and angiogenic potentials. AF could be an acceptable source of both MSCs and EVs for cell-based and cell-free treatments; however, further clinical trials are still needed.

## Ethical Considerations

### Compliance with ethical guidelines

There were no ethical considerations to be considered in this research.

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### Authors' contributions

Conceptualization and supervision: Amir Hossein Norooznejhad; Investigation and writing: All authors.

### Conflict of interest

The authors declared no conflict of interest.

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