



**The union of organs-on-chips and  
mass spectrometric multi-omics:  
a technological convergence that  
will advance drug discovery**

**John Wikswo**

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European Laboratory Research and Innovation Group (ELRIG)  
Alderley Park, Cheshire, England*

*23 May 2018*

# Abstract

After decades of reliance on animal studies and two-dimensional biology-on-plastic, and measurement techniques such as western blot, ELISA, and targeted mass spectrometry, the drug development pipeline is now primed for two new transformative technologies: organs-on-chips and untargeted, multi-omic reconstruction of drug mechanism of action (MOA). Over the past six years, substantial investments in the US, Europe, and Asia support the development and validation of organ-on-chip, tissue-chip, and organoid technologies. This effort has been motivated by a desire to provide earlier termination of toxic drugs and avoid inappropriate drug terminations. Even more rewarding would be the early identification of problematic human haplotypes and drug–drug interactions for small molecules, and improved prediction of human exposure for compounds and clinical formulations. Possibly the greatest return-on-investment will be the discovery of novel mechanisms of human diseases, identification of novel compounds, and the discovery of on- and off-target of drug candidate MOAs. All will benefit from the convergence of microfluidics, advanced mass spectrometry, and machine learning. Despite technological challenges, the near-term opportunities are exciting. As these technologies are refined and their costs reduced, their combined application to basic science, medicine, and drug development will provide revolutionary advances in an already rapidly moving field.

John Wikswo is the Gordon A. Cain University Professor at Vanderbilt University and is the founding Director of the Vanderbilt Institute for Integrative Biosystems Research and Education. Trained as a physicist, he received his B.A. degree from the University of Virginia, and his PhD. from Stanford University. He has been on the Vanderbilt faculty since 1977. His research has included superconducting magnetometry, the measurement and modeling of cardiac, neural and gastric electric and magnetic fields, and non-destructive testing of aging aircraft. His group's current work on organ-on-chips focuses on the development of intelligent well plates that serve as perfusion controllers, microclinical analyzers, and microformulators; developing a blood-brain barrier on a chip; and integrating multiple organs to create a milli-homunculus from coupled organs on chips. As a tenured member of the Departments of Biomedical Engineering, Molecular Physiology & Biophysics, and Physics & Astronomy, he is guiding the development of microfabricated devices, optical instruments, and software for studying how living cells interact with each other and their environment and respond to drugs, chemical/biological agents, and other toxins, thereby providing insights into systems biology, physiology, medicine, and toxicology. He has over 200 publications, is a fellow of seven professional societies, and has received 24 patents.

# Disclosure



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- The authors of this research have no financial or other interests which pose conflicts of interest. Licenses to the Vanderbilt pump and valve technologies have been issued to KIYATEC, Inc. and CN Bio Innovations, which has also licensed the MicroFormulator. Our MicroClinical Analyzer patents have been licensed to Agilent. John Wikswa is an Inaugural Member of the Scientific Advisory Board of biOasis Technologies Inc.
- The views expressed in this document are solely those of the authors and do not necessarily reflect those of any of the funding agencies or companies. The EPA does not endorse any products or commercial services mentioned.

# Why are we here?

## **Decades of preclinical pharmacology R&D are based on**

- Animal studies
- Two-dimensional biology-on-plastic
- Western blot
- ELISA
- NMR
- Targeted mass spectrometry

## ***In vitro* studies cannot predict with the required accuracy**

- First-in-human dose
- Human drug efficacy
- Human off-target effects

## **Will new transformative technologies help?**

- Organs-on-chips
- Untargeted, multi-omic reconstruction of drug mechanism of action (MOA)
- Machine learning and optimal experimental design

## **Together they might!**

## Definition

**mass spec-trom-e-ter** (noun)

/ˈmɑːs ˌspekˈtrəmədər/

An apparatus for separating isotopes, molecules, and molecular fragments according to mass. The sample is vaporized and ionized, and the ions are accelerated in an electric field and deflected by electric or magnetic fields into a trajectory that produces a distinctive mass spectrum.

**mi·cro·phys·i·o·log·i·cal sys·tem** (noun)

/ˈmīkrō ˌfɪzēəˈlājək(ə)l ˈsɪstəm/

A small-scale *in vitro* model that recapitulates selected functions of living organisms and/or their parts.

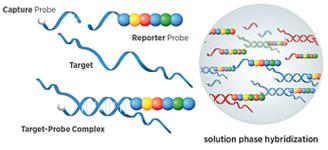
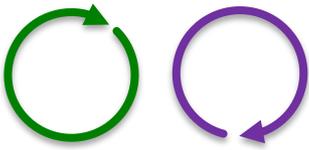
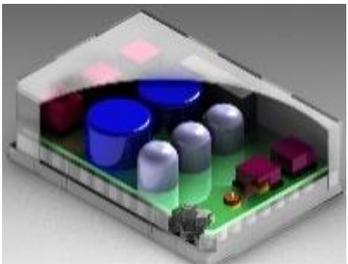
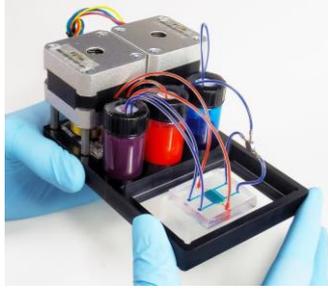
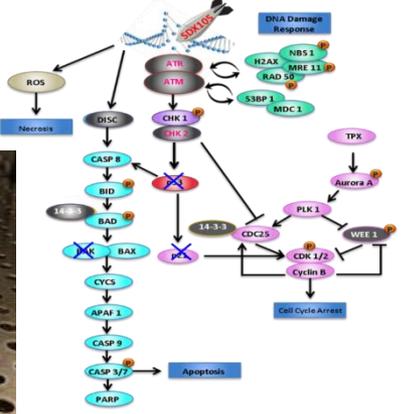
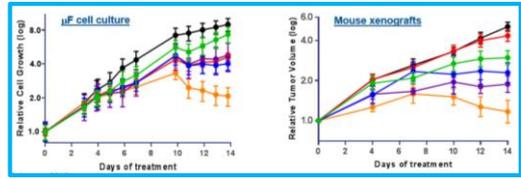
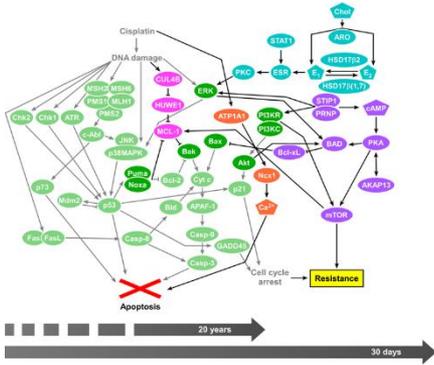
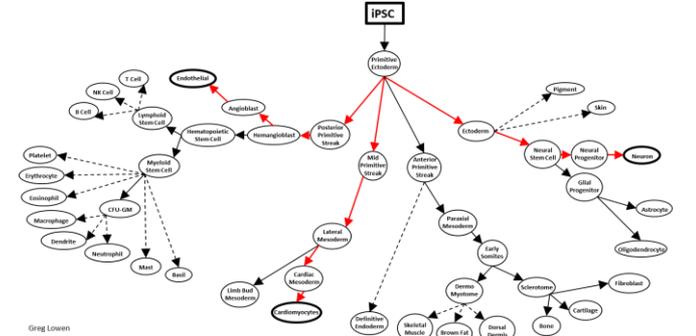
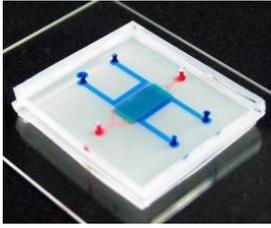
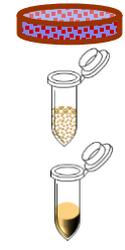
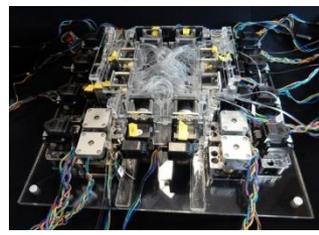
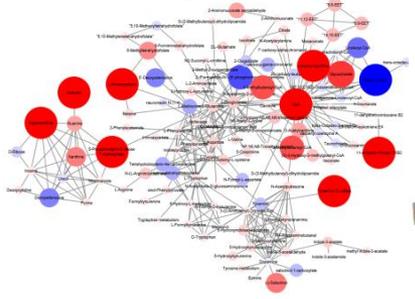
Typically implemented as quasi-two-dimensional barriers that support one or more cellular layers, or three-dimensional tissue constructs.

May involve one or more organs-on-chips, tissue chips, organoids, vascularization, electrospun scaffolds, hydrogels, microfluidics, and sensors.

Usually involves fluidic superfusion or perfusion, and possibly perfusion.

Antonym – two-dimensional biology on plastic.

# Today's goal: Explain this convergence





# Four themes

1. The complexity of biology
2. MicroPhysiological Systems
3. Multi-Omics
4. Putting it all together



# Four themes

**1. The complexity of biology**

2. MicroPhysiological Systems

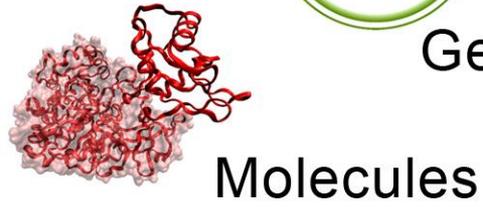
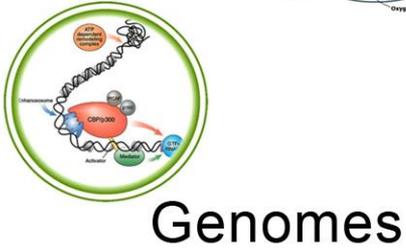
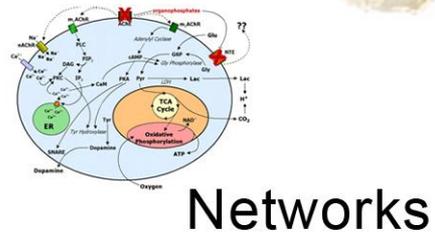
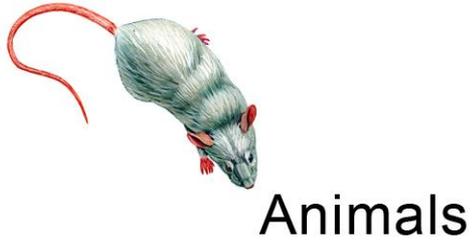
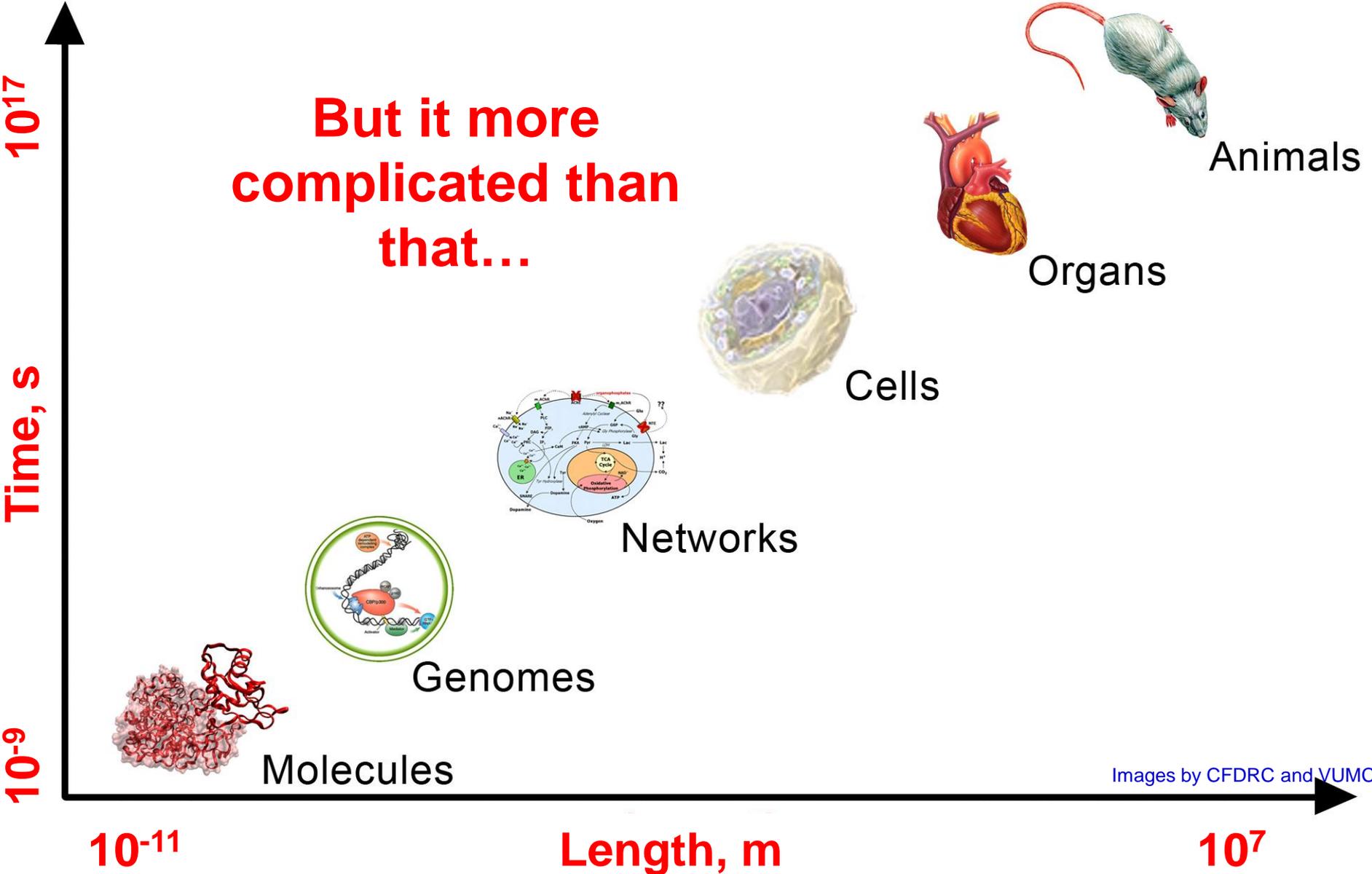
3. Multi-Omics

4. Putting it all together

What makes biology so different from physics, chemistry, and engineering?

# Biology spans lots of space and time

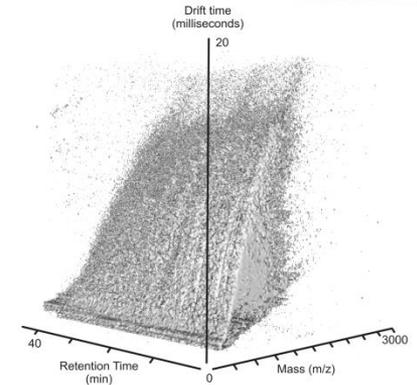
But it more complicated than that...



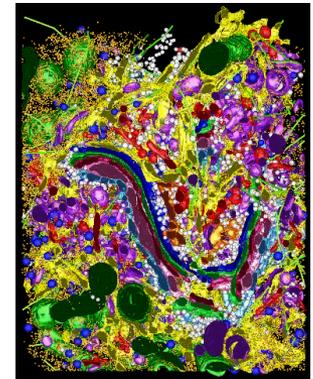
Images by CFDRG and VUMC

# Why is biology so complex, con't?

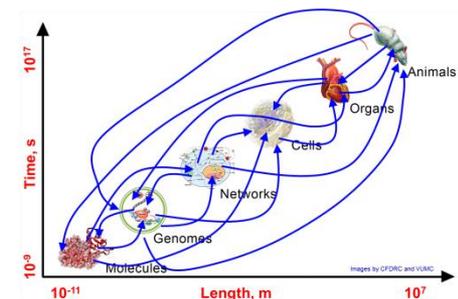
- Today, one can easily detect 100,000 chemical species in 100  $\mu\text{L}$  of rat serum.
- Cells are NOT well-stirred bioreactors but have anomalous diffusion and active transport.
- $10^9 - 10^{11}$  interacting cells in some organs.
- Cell signaling is dynamic, non-linear, multiscale, redundant, has positive and negative feedback, spans spatial scales ...
- Metabolism may have 5,000 reactions.
- Models might need Avogadro's number of PDEs, *i.e.*, a Leibniz of PDEs ( $1 \text{ L} = N_a$ ).
- **We need new experimental approaches.**



UPLC-nESI-IM-MS John McLean

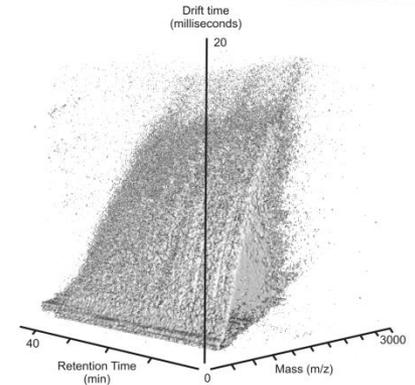


$3.1 \times 3.2 \times 1.2 \mu\text{m}^3$  beta cell  
Brad Marsh, PNAS, 2001

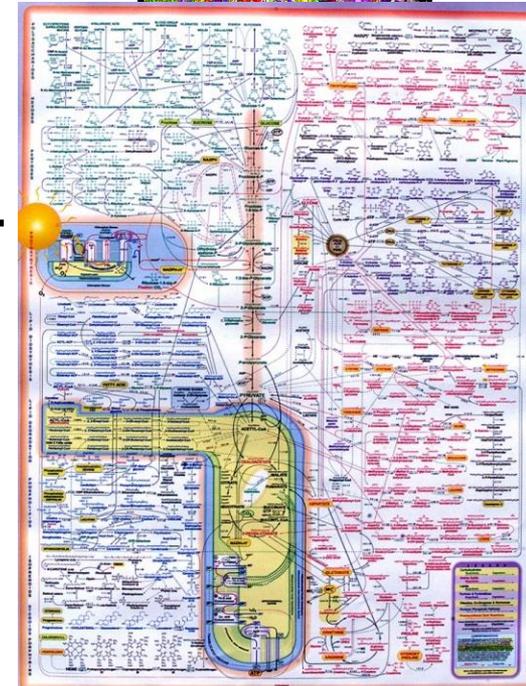
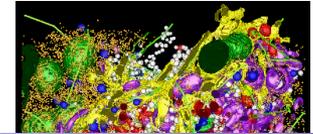


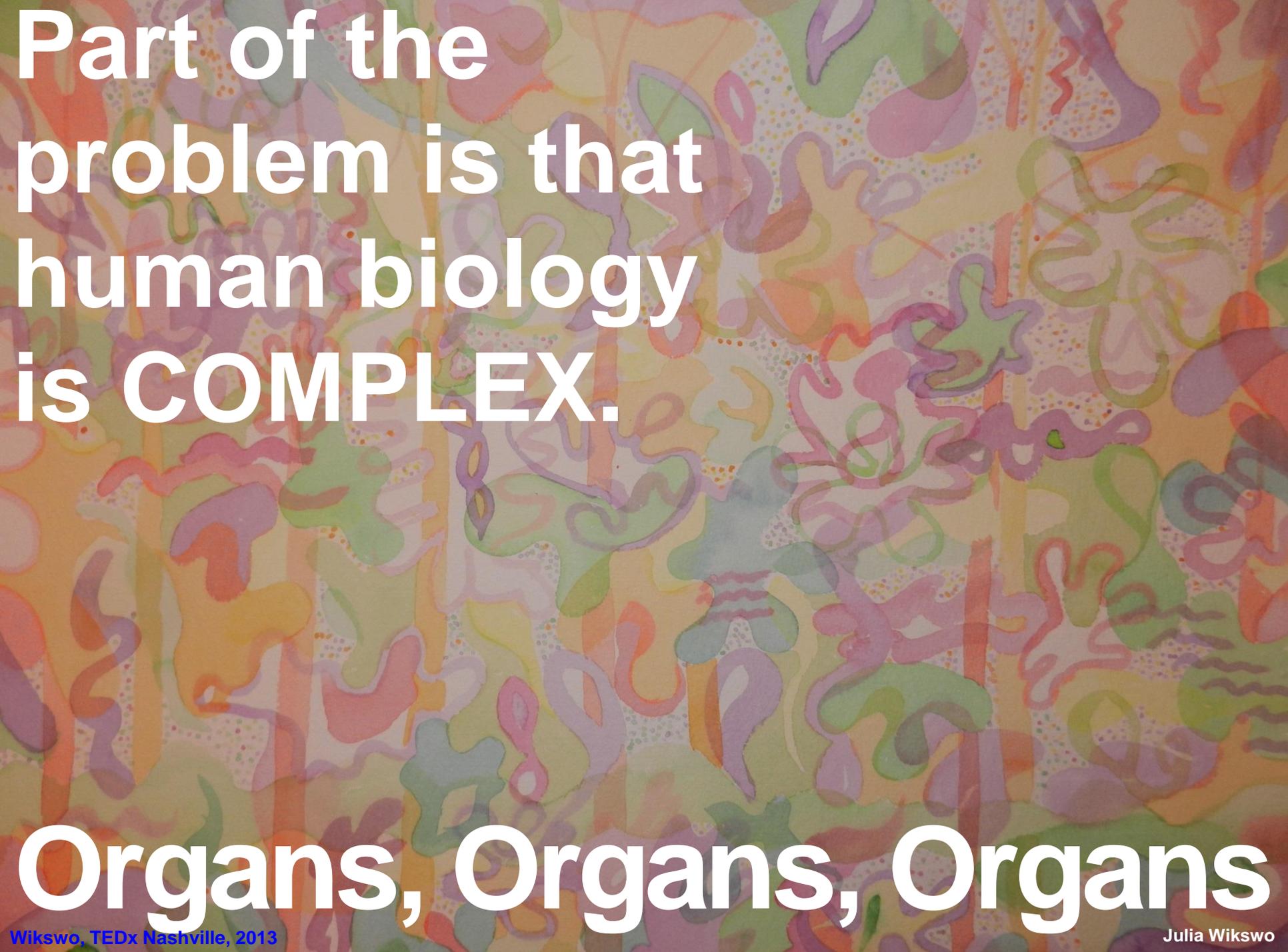
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UPLC-nESI-IM-MS John McLean





**Part of the  
problem is that  
human biology  
is COMPLEX.**

**Organs, Organs, Organs**

# Organs, Organs, Organs

## Cardiovascular

Heart

Blood

Blood vessels

## Digestive

Salivary glands

Esophagus

Stomach

Liver

Gallbladder

Pancreas

Intestines

## Excretory

Kidneys

Ureters

Bladder

Urethra

## Immune

Leukocytes

Tonsils

Adenoids

Thymus

Spleen

Appendix

## Reproductive

Ovaries

Fallopian tubes

Uterus

Vagina

Mammary glands

Testes

Vas deferens

Seminal vesicles

Prostate

Penis

## Respiratory

# Organs, Organs, Organs

Colon

Rectum

Anus

Endocrine

Hypothalamus

Pituitary gland

Pineal gland

Thyroid

Parathyroids

Adrenals

Integumentary

Skin

Hair

Nails

Muscular

Muscles

Golgi tendon organ

Nervous

Brain

Spinal cord

Nerves

Eyes

Pharynx

Larynx

Trachea

Bronchi

Lungs

Diaphragm

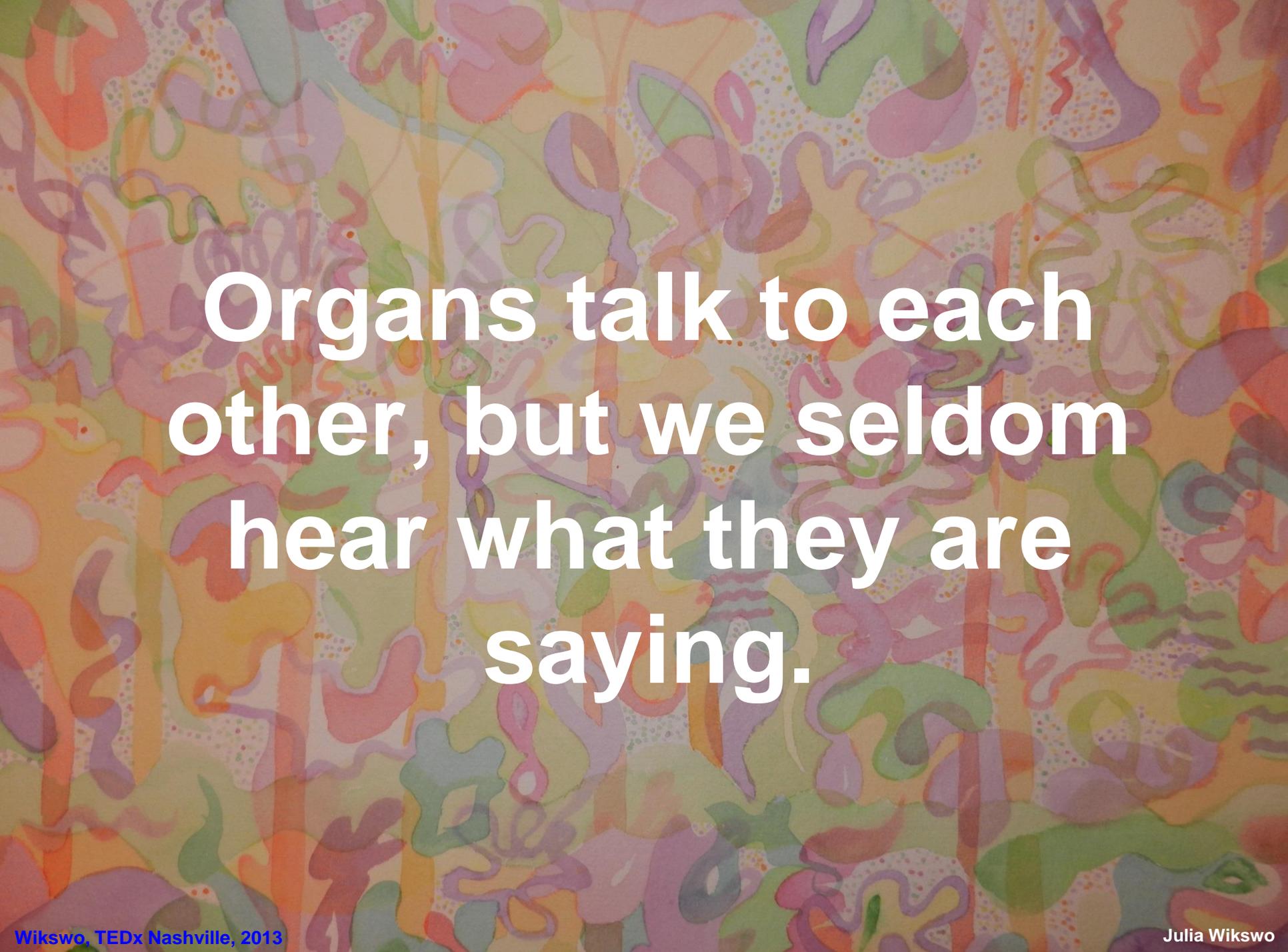
Skeletal

Bones

Cartilage

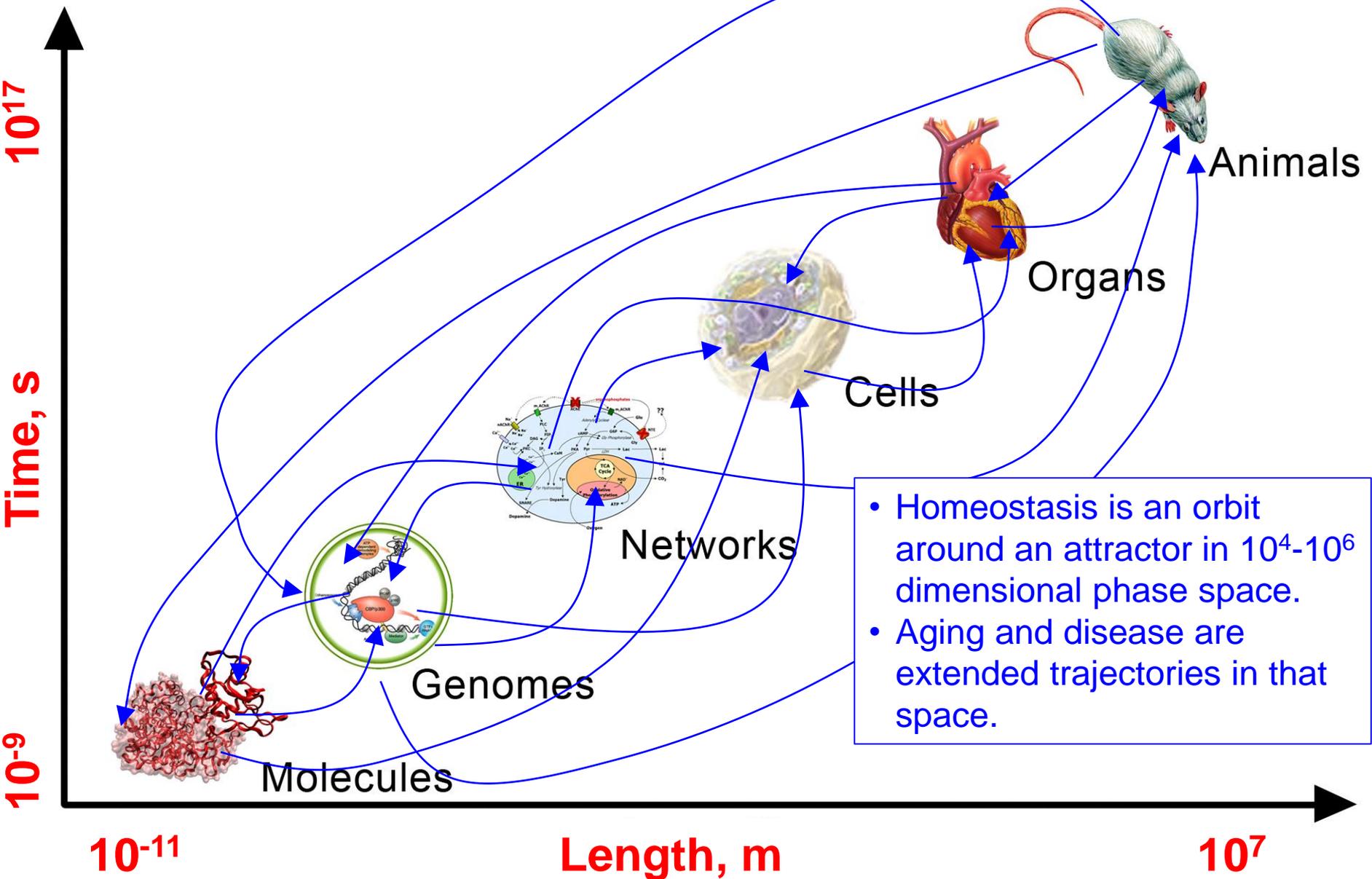
Ligaments

Tendons



**Organs talk to each other, but we seldom hear what they are saying.**

# Complexity from multiscale interactions



# What makes biology different from physics or chemistry?

Physics and chemistry describe dynamic interactions in terms of fundamental or phenomenological laws that govern the state of the matter being studied.

\*Ohm's law, Hooke's law, the Standard Model, ... conservation of mass, Dalton's law, quantum mechanics ...

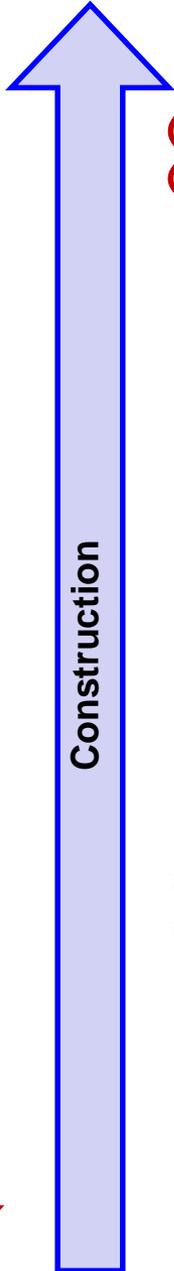
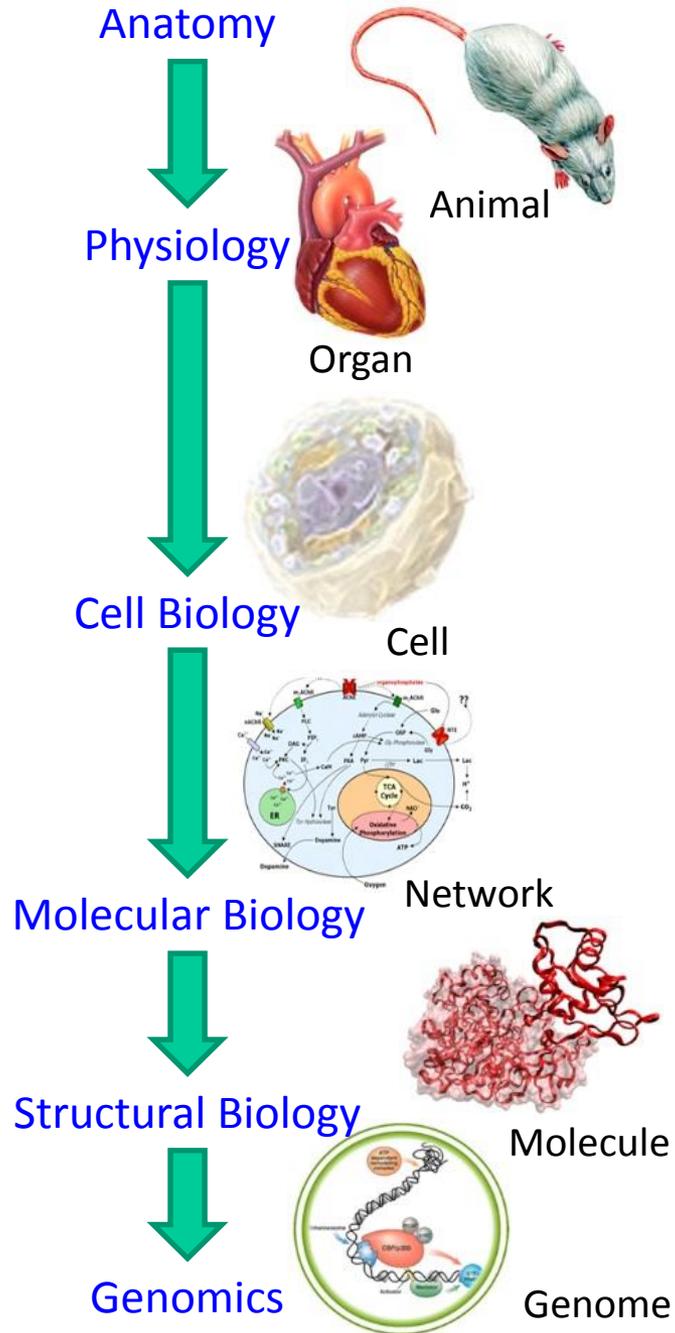
Biology has laws, but the operation of every living organism is determined not only by the laws of biology, physics and chemistry, *but also by historic instructions that may be specific to each individual organism.*

“... any living cell carries with it the experiences of a billion years of experimentation by its ancestors. You cannot expect to explain so wise an old bird in a few simple words.”

Max Delbrück, “A Physicist Looks at Biology,” 1949

Next, “How did Biology get here and where is it going?”

# The Hermeneutic Circle of Biology



Standard biology and medicine

Does this create a problem?

Systems Biology

JP Wikswo. The relevance and potential roles of microphysiological systems in biology and medicine. *Exp.Biol.Med.* 239:1061-1072, 2014.

JP Wikswo and AP Porter, *EBM*, 2015

# How have we been studying biology?

- People

We are severely limited in isogenetic controls, interventions, and data when studying normal subjects and patients.

- Animals

Animals, including non-human primates, are not people and have significant genetic and physiological differences.

- Cells *in vitro*

2D biology on plastic: Many biological experiments are conducted on cells that

- have cancer,
- are inbred,
- are diabetic,
- are potatoes on a stiff plastic couch without exercise
- enjoy neither gender nor sex,
- live almost entirely in the dark,
- gorge themselves on sugar once a day,
- may be slowly suffocating in an increasingly acidic environment,
- live in their own excrement,
- never bury their dead,
- may take a complete or only partial bath every day or two,
- and talk only to cells of like mind.



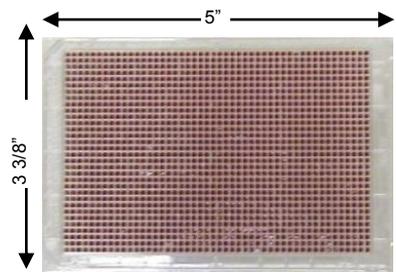
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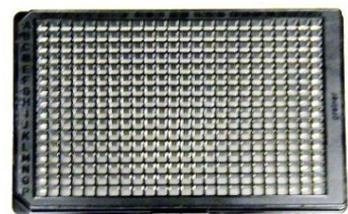
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1536 Well ~8 µl



384 Well ~40 µl

384 and 1536 images courtesy of David Weaver

One might get reproducible, statistically significant results, but are they relevant to human biology and disease?



# Four themes

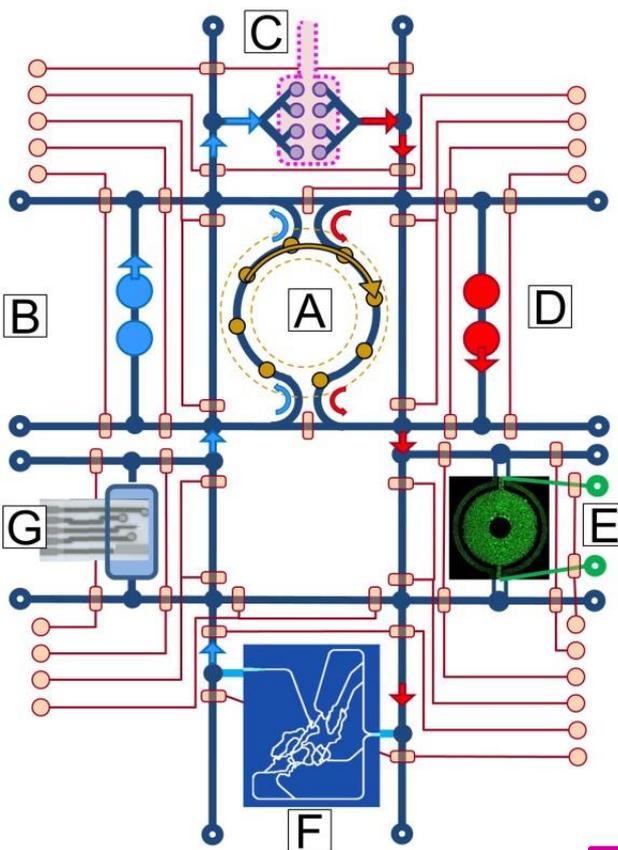
1. The complexity of biology

**2. MicroPhysiological Systems**

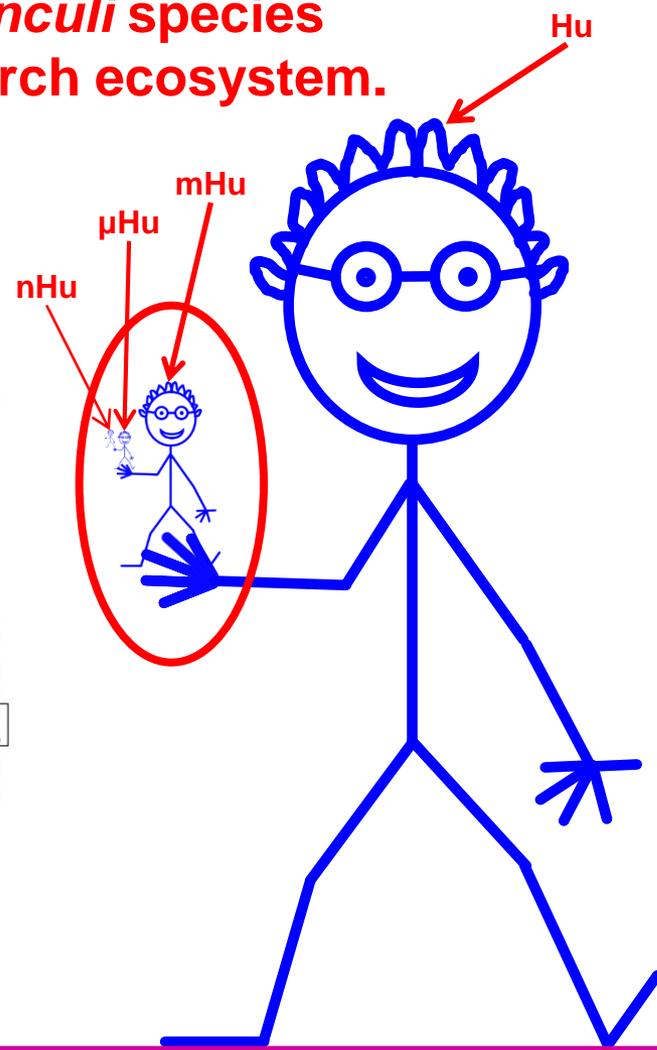
3. Multi-Omics

4. Putting it all together

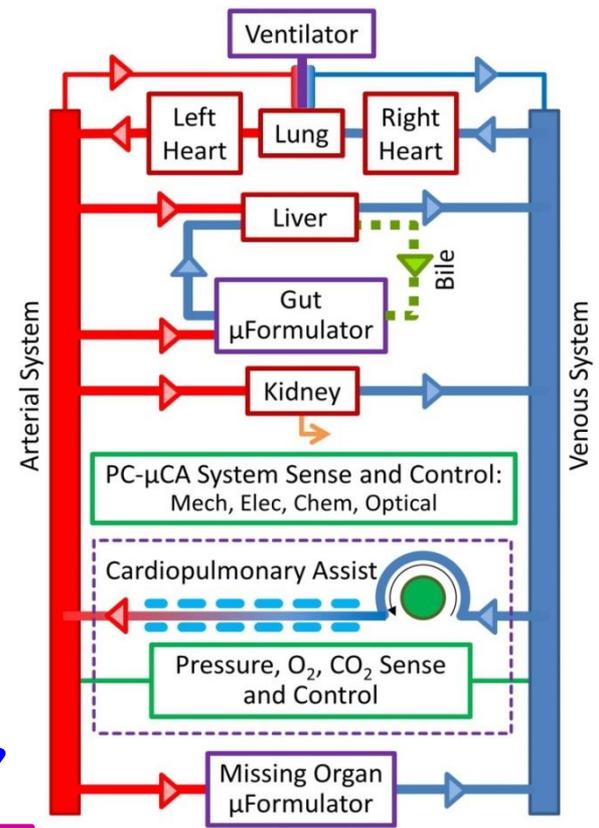
**John Wikswo's goal – Determine how best to fit two new *Homunculi* species into the biomedical research ecosystem.**



*Homo chippiens*  
NanoHuman (nHu)  
(Organoids)



What can organs-on-chips do for basic research and tox-safety? Single organs and/or coupled-organ homunculi?



*Homo minutus*  
MicroHuman (μHu)  
(Tissue Chips)

# *Enter organoids*

Schmeichel and Bissell  
"Modeling tissue-specific  
signaling and organ function in  
three dimensions."

J Cell Science (2003)

[https://www.ted.com/speakers/mina\\_bissell](https://www.ted.com/speakers/mina_bissell)

# Organoids are in the commercial limelight!

## 2017



## Rock the Science of 3D

**Break the 3D barrier**  
Get there fast with Corning 3D Cell Culture Models

[Learn More](#)

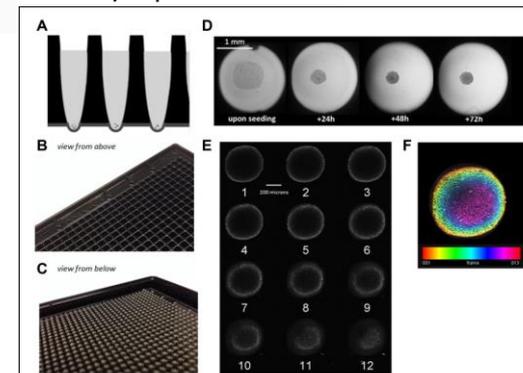
3D Cell Culture, Drug Screening, and Optimization

Home / Products / Life Sciences Product Portfolio / Life Science Applications: See It All Come Together / Cell Culture / 3D Cell Culture

Create *in vivo*-like functionality with optimized 3D cell culture models

### A 1536-Well 3D Viability Assay to Assess the Cytotoxic Effect of Drugs on Spheroids

Franck Madoux<sup>1,3</sup>, Allison Tanner<sup>2</sup>, Michelle Vessels<sup>2</sup>, Lynsey Willetts<sup>2</sup>, Shurong Hou<sup>1</sup>, Louis Scampavia<sup>1</sup>, and Timothy P. Spicer<sup>1</sup>

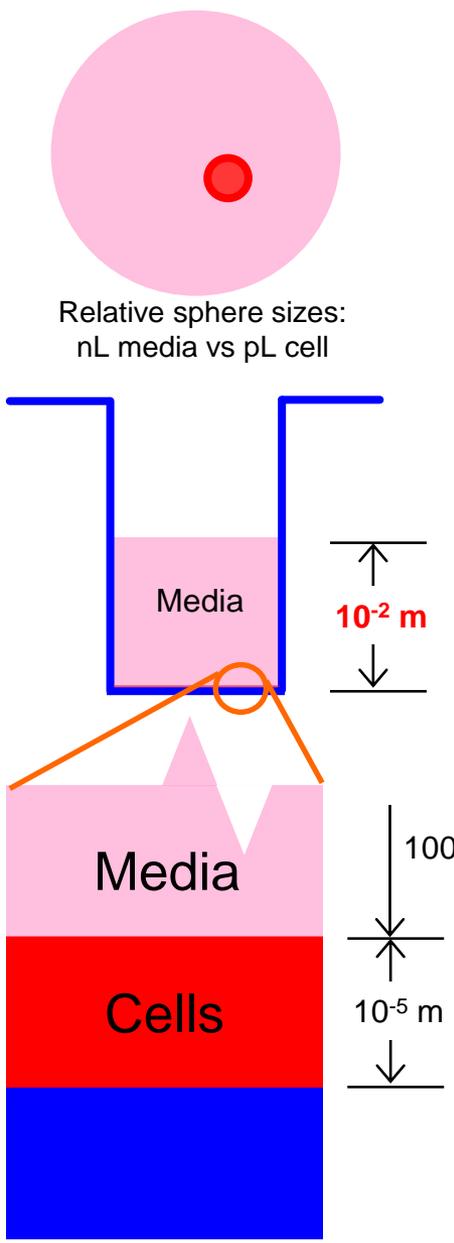


Madoux et al., SLAS Discovery **2017**, Vol. 22(5) 516–524

# The “Media Volume” problem

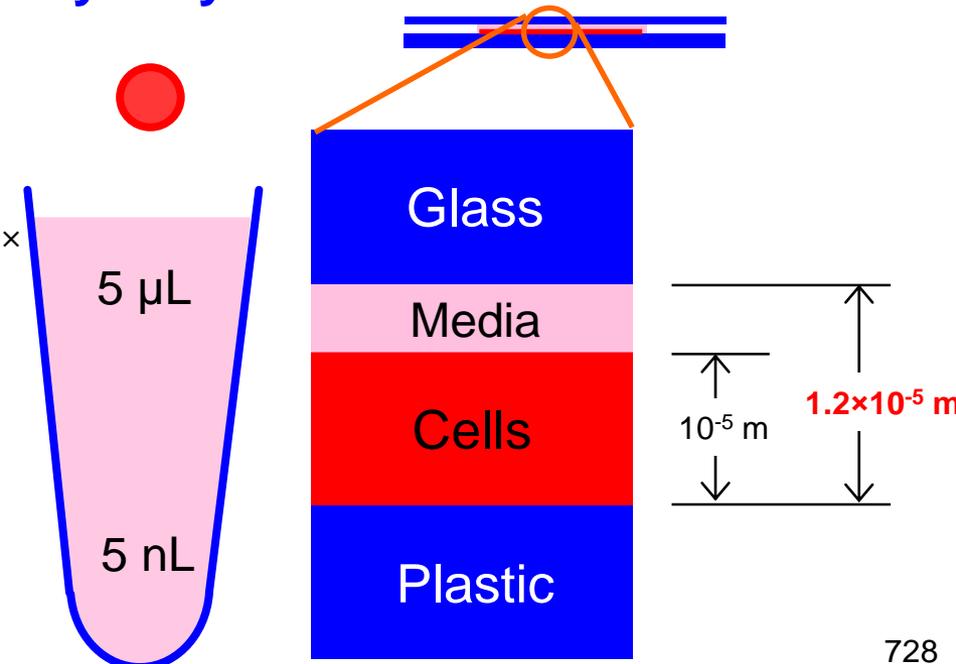
## Conventional culture

- A typical picoliter cell requires a nanoliter of media per day.
- A **10 μm** layer of cells covered by a **10,000 μm** layer of media.
- A 5 nL spheroid in 5 μL of media
- 1 or 2 days between fluid changes
- Metabolites, endocrine, autocrine, and paracrine factors are **diluted 1000-fold**.



## Microfluidic tissue culture

- A typical picoliter cell requires a nanoliter of media per day.
- A **10 μm** layer of cells is covered by a **2 μm** layer of media.
- **5000 fluid changes/day**
- Metabolites, autocrine, paracrine, and endocrine factors are **diluted by only 1.2x**



# A hot, new *in vitro* model for biology



## Complex 3D biology is a better model than 2D biology.

- 3D Organoids**

Are self-organizing models with tissue-level functions and disease phenotypes.

Demonstrate development

Can be transplanted

Can be a medium-to-high throughput assay

Hard to replicate an individual organoid

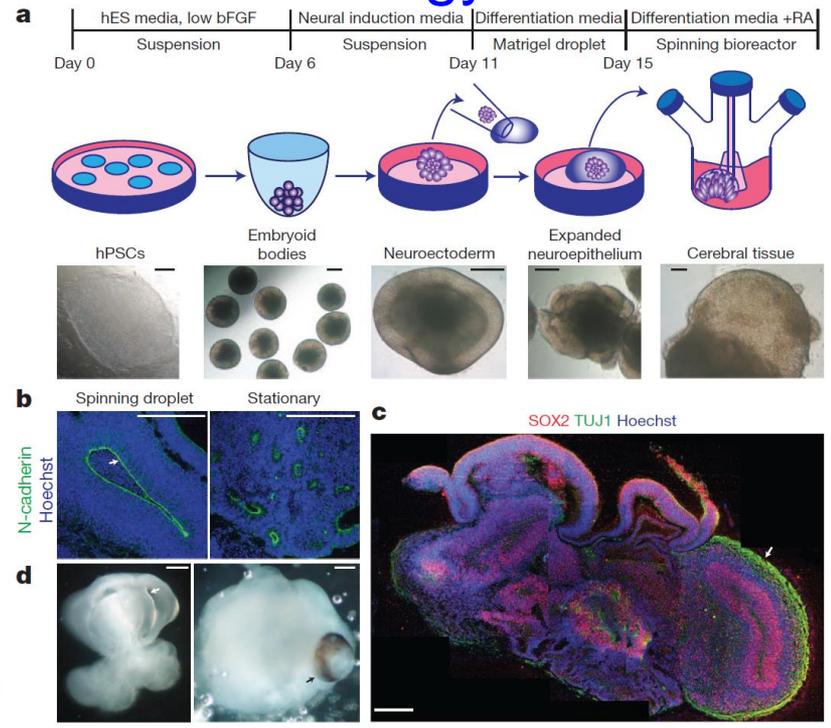
May benefit from engineered hydrogels

Hard to perfuse or apply uniform shear stress

Hard to quantify barrier functions

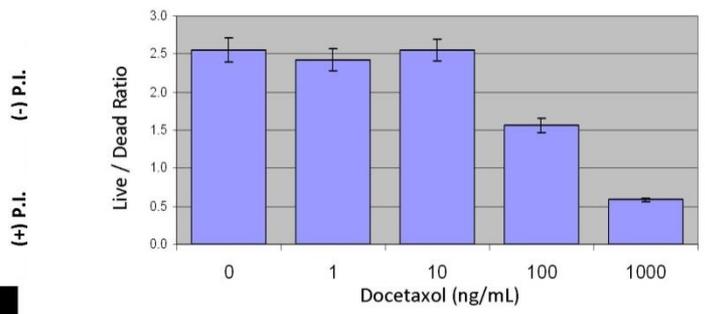
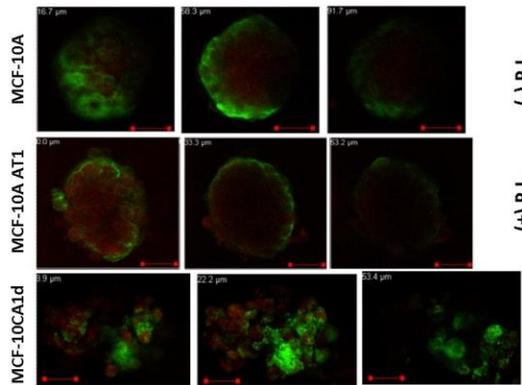
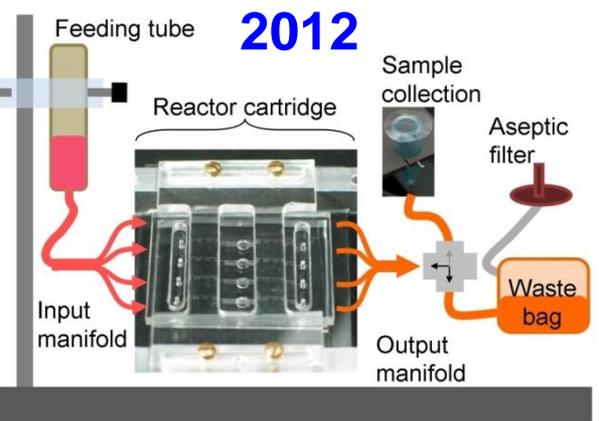
Hard to visualize when living

Hard to integrate with other organ systems with proper volumes



Lancaster, ... , Knoblich. Cerebral organoids model human brain development and microcephaly. *Nature*, **2013**.

Contributions from Kapil Bharti (NIH/NEI)



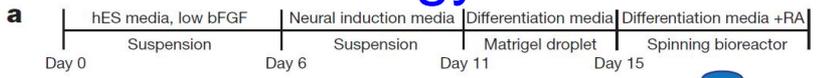
Markov, ... , McCawley. Thick-tissue bioreactor as a platform for long-term organotypic culture and drug delivery. *Lab Chip* 12:4560-4568. **2012**.

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## • 3D Organoids

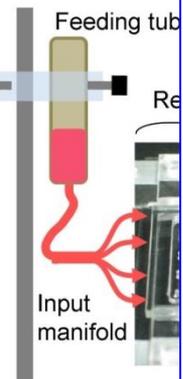
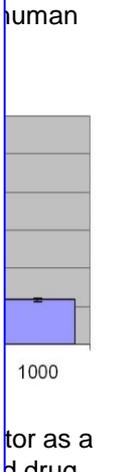
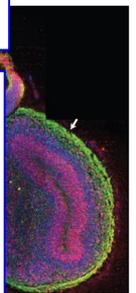
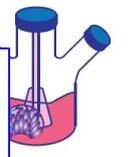


Are self-organizing models with tissue level

- func
- Demon
- Can be
- Can be
- Hard to
- May be
- Hard to
- Hard to
- Hard to
- Hard to
- prop

If you need 1536-well drug screens, then 3D spheroids and organoids may be just what you need!

If you need more sample mass for quantitative analysis, polarized endothelial/epithelial barriers, or are worried about organ-organ interactions, then you need to think about organ chips!



## *Enter organs on chips*

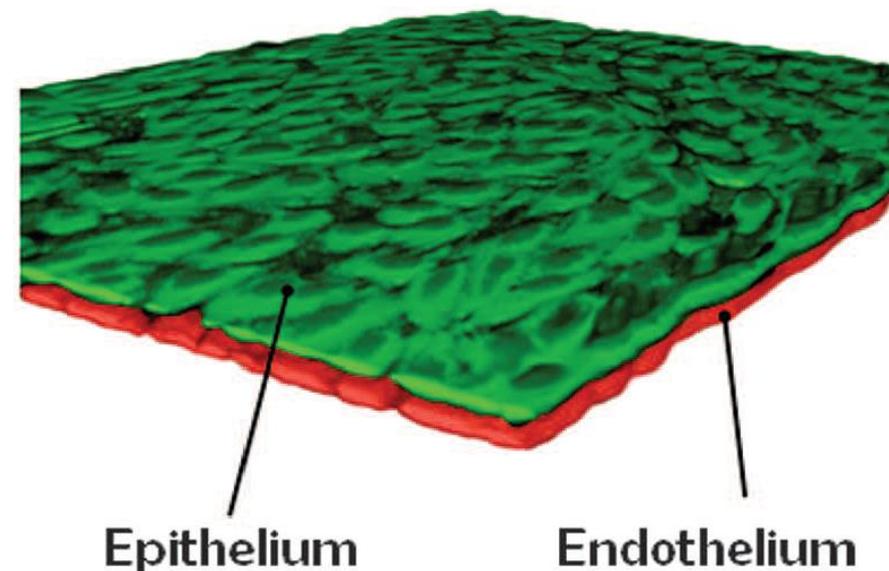
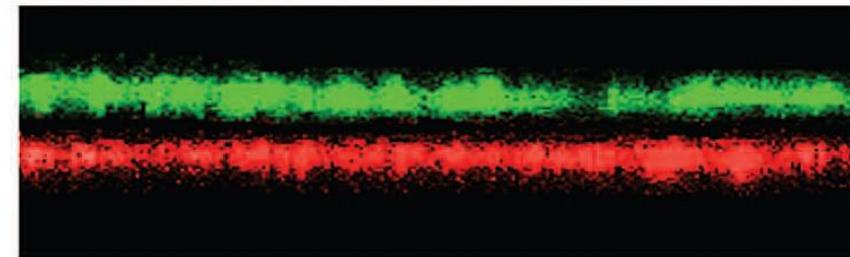
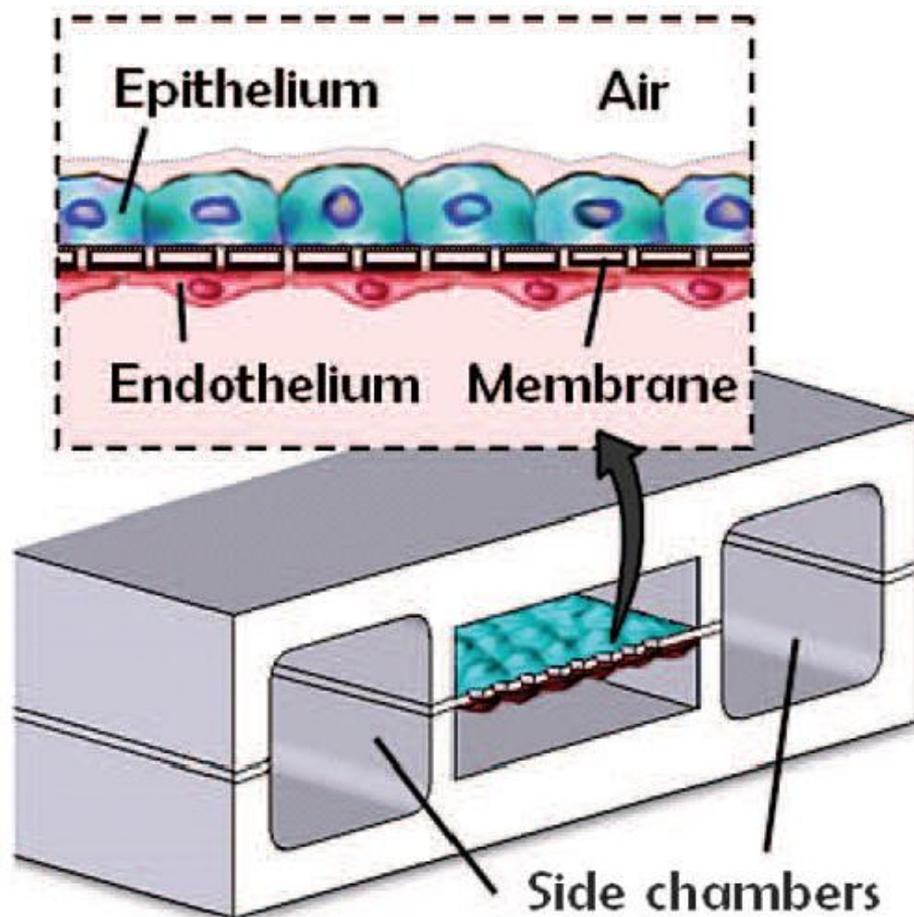
*Sin, A., ... Shuler, "The Design and Fabrication of Three-Chamber Microscale Cell Culture Analog Devices with Integrated Dissolved Oxygen Sensors." *Biotechnology Progress* (2004).*

*Huh ... Ingber, "Reconstituting Organ-Level Lung Functions on a Chip." *Science* (2010)*

# What do organs-on-chips look like?

Perforated PDMS membranes support pulmonary endothelial and epithelial cell layers (Ingber group, Wyss, Harvard)

2010



Interfaces are important, and endothelia can protect cells.

# Another hot new *in vitro* model for biology



Complex 3D biology is a better model than 2D biology.

## • Organ Chips

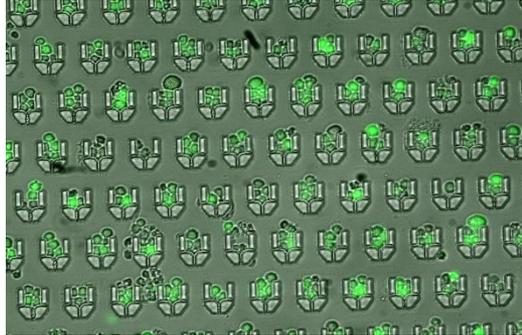
- Better than 2D biology
- Ideal for barrier functions
- Can reproduce physiological flows
- Provide a thick ECM for scaffolding and drug/factor binding
- Support organ-organ interactions
- Sufficient tissue for multi-omics of 10's to 1000's of variables
- Can use minimal media volumes
- Will be vascularized soon
- May ultimately reduce drug costs
- Possible to build a single-patient homunculus
- Could build animals-on-chips
- Can require microfluidics and control
- Not yet high throughput
- Are expensive today (hardware, effort, human cells, real estate)
- Not fully validated vs *in vivo*, e.g., no WGCNA yet
- Can't be transplanted

Mammary gland on a chip



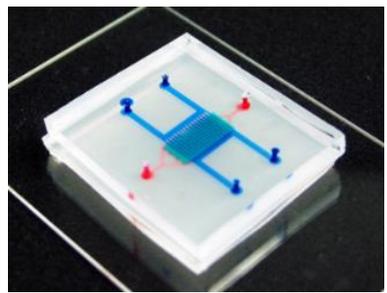
Lisa McCawley and Dmitry Markov, Vanderbilt

T cells in a lymph node on a chip



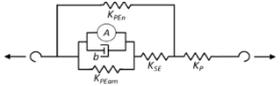
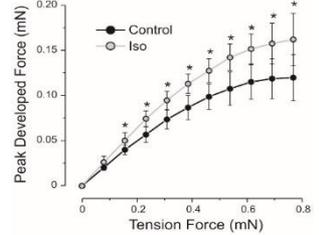
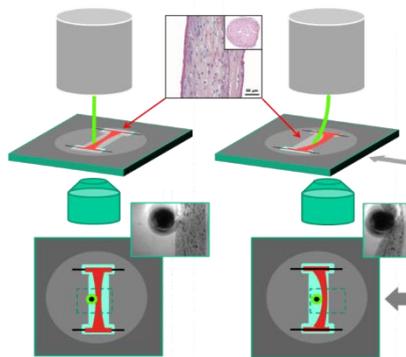
Shannon Faley, Kevin Seale and John Wiksw, Vanderbilt

Brain on a chip



Jacquelyn Brown and John Wiksw, Vanderbilt

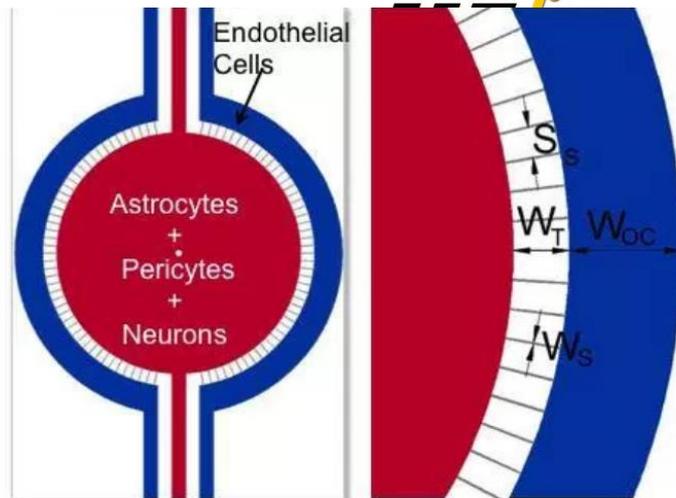
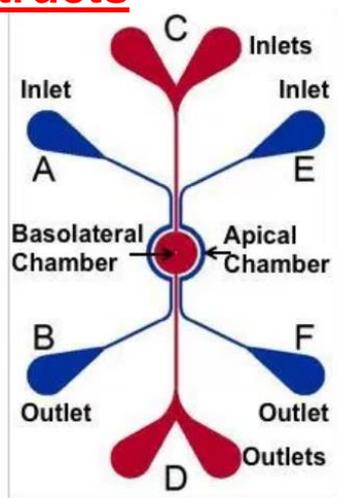
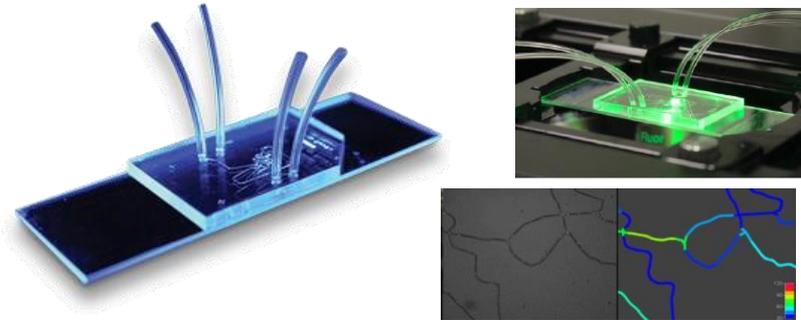
Heart on a chip



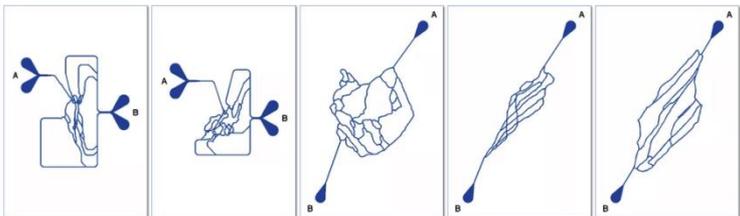
Veniamin Sidorov and John Wiksw, Vanderbilt

# Planar Constructs

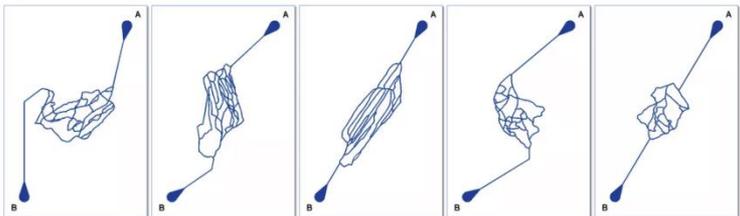
## Microvascular nanoparticle delivery assay



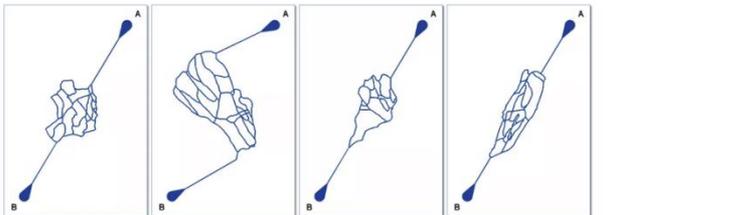
*Schematic of the BBB Model. Apical chamber (outer channels) are for culture of vascular (endothelial cells) while basolateral chamber (central chamber) are for culture of brain tissue cells (astrocytes, pericytes, neurons). Porous architecture enables communication between the vascular and tissue cells.*



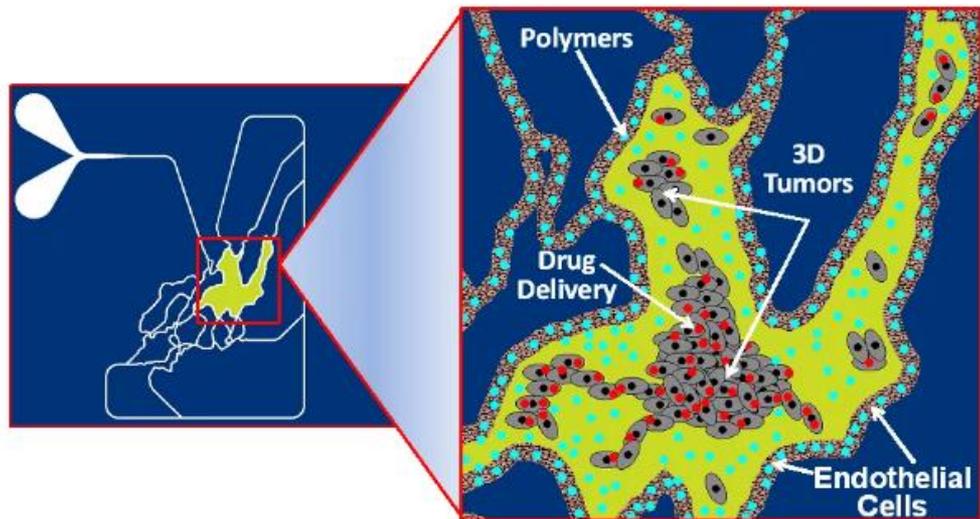
SMN1-C001 (104001)	SMN1-D001 (104002)	SMN1-C002 (104003)	SMN1-C003 (104004)	SMN1-C004 (104005)
\$79 Add to cart				



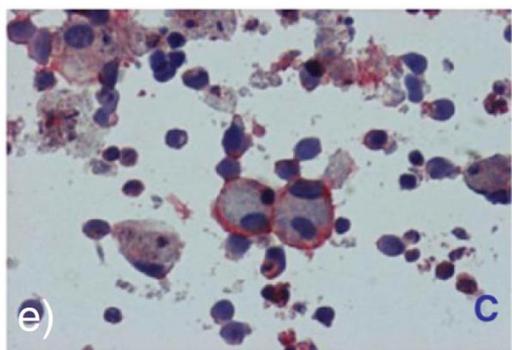
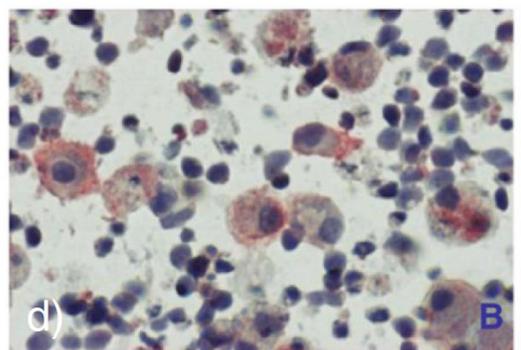
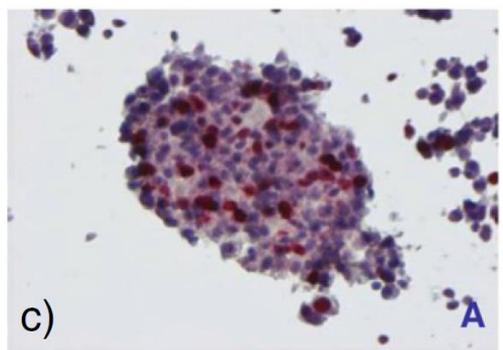
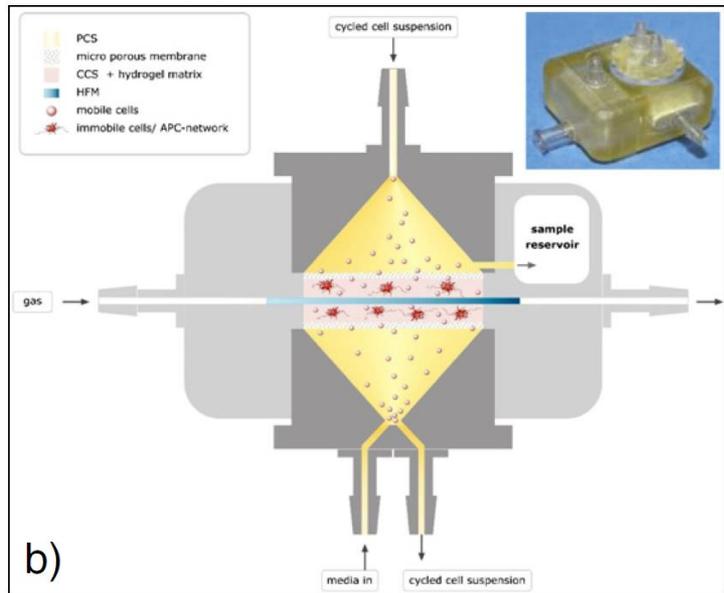
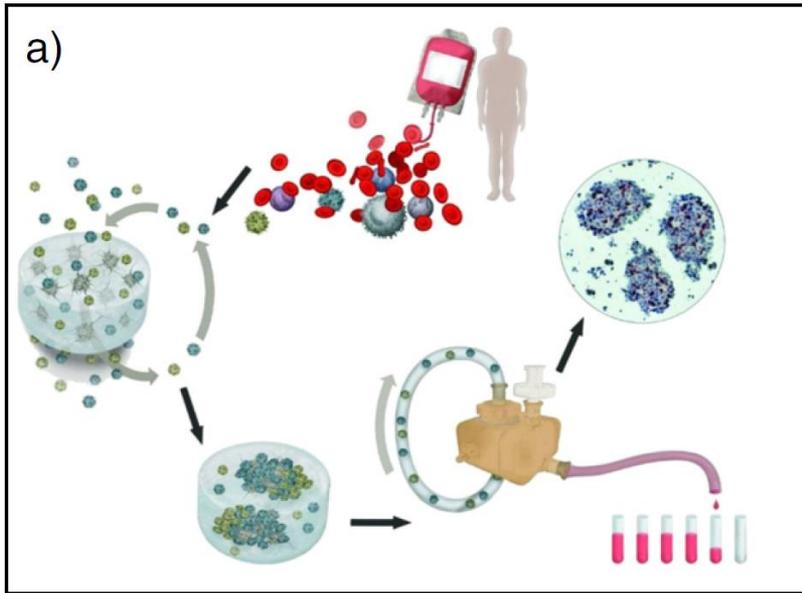
SMN1-C005 (104006)	SMN1-C006 (104007)	SMN1-C007 (104008)	SMN1-D002 (104009)	SMN1-D003 (104010)
\$79 Add to cart				



SMN1-D004 (104011)	SMN1-D005 (104012)	SMN1-D006 (104013)	SMN1-D007 (104014)
\$79 Add to cart			



*Create a realistic 3D co-culture with real time monitoring of cell-cell interactions between tumor, stromal, vascular and immune cells.*



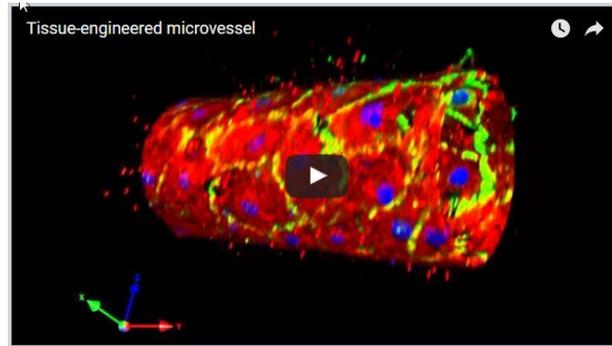
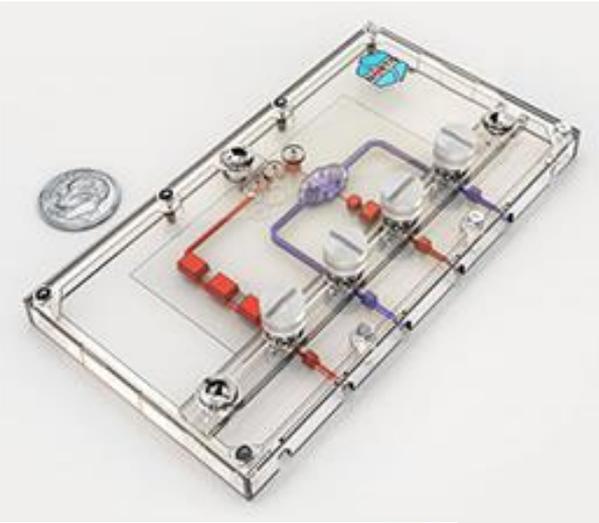
“Immunological substance testing on human lymphatic micro-organoids in vitro,” Giese C, Lubitz A, Demmler CD, Reuschel J, Bergner K, Marx U, *Journal of Biotechnology* 148 (2010) 38–45, as presented in “Human immunity in vitro - Solving immunogenicity and more,” Giese C, and Marx U., *Adv. Drug Del. Rev.* 69:103-122. 2014.

Human Artificial Lymph Node. a) Different cells of the native immunity are separated from donor leukocytes, differentiated into mature cells, seeded into 3D matrices, and mounted into a bioreactor device (b). c) Follicle-like spheroid formation and proliferation (c Ki67; red staining), plasma cell differentiation (c; CD138; red staining) and antigen-specific binding on plasma cells (e; biotinylated CMV-lysate; red staining).

# 3D Vascular Constructs



<https://www.nortisbio.com/>

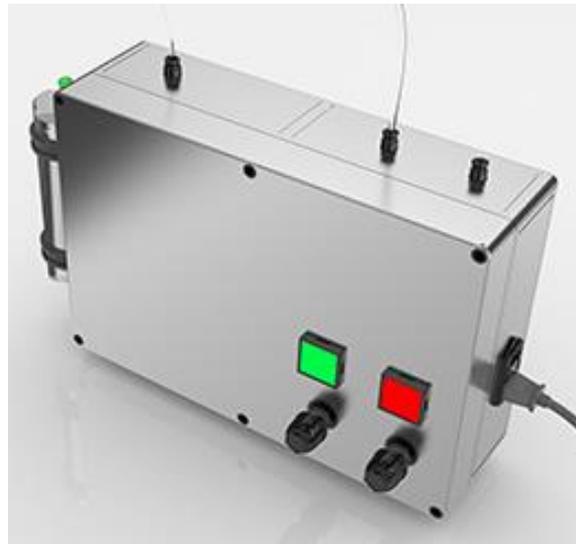


OFFICIAL JOURNAL OF THE INTERNATIONAL SOCIETY OF NEPHROLOGY

## kidney INTERNATIONAL

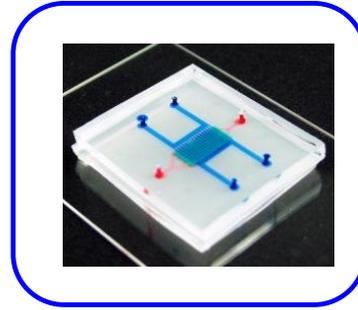
VOLUME 40 | ISSUE 3 | SEPTEMBER 2016  
www.kidney-international.org

- Features of AKI associated with immune checkpoint inhibitors
- Limited health literacy in advanced kidney disease
- NLRP3 inhibition for crystal-induced nephropathy
- New role for hypoxia-inducible factor-1 in vascular calcification

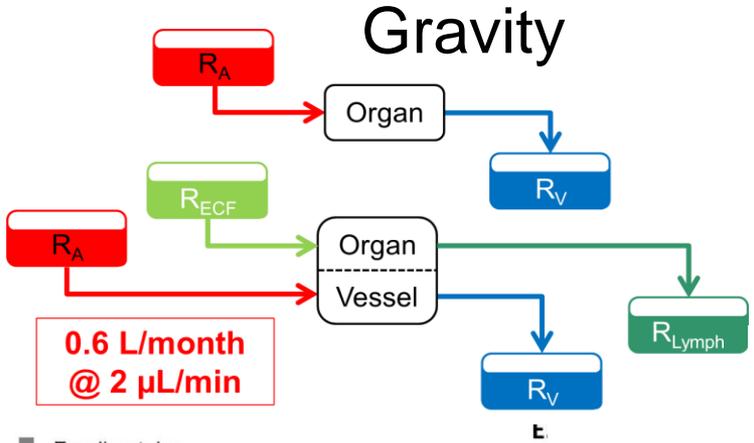


How can we keep a single organ alive for a month?

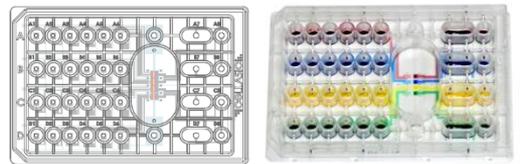
# NeuroVascular Unit (NVU) on a Chip



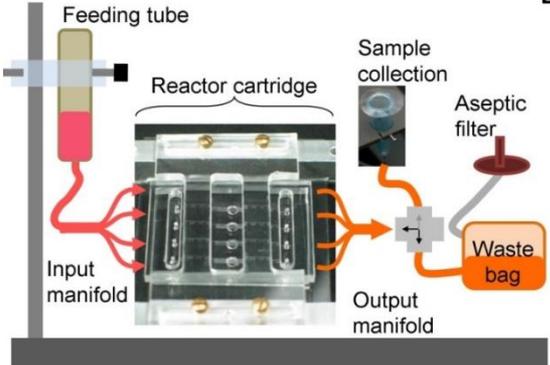
# Organ Perfusion Methods



Air Pressure  
EMD-Millipore CellASIC ONIX™



Pipetting Robot



Microfluidic Pumps

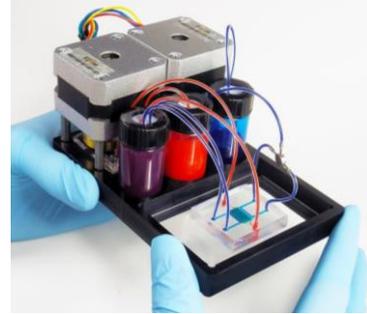
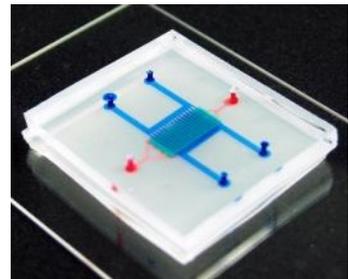
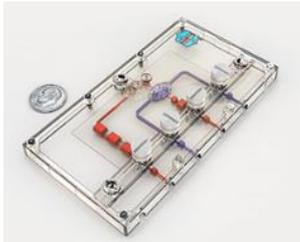
Syringe Pumps



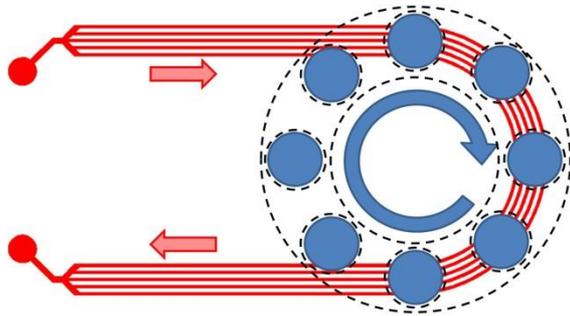
Wyss Institute from long ago...



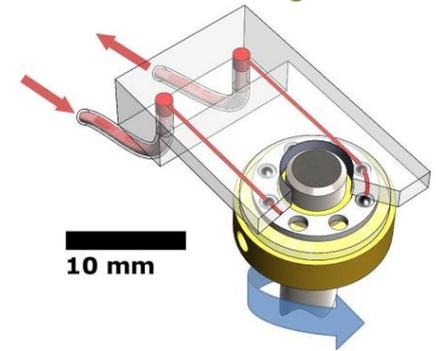
Nortis Bio today...



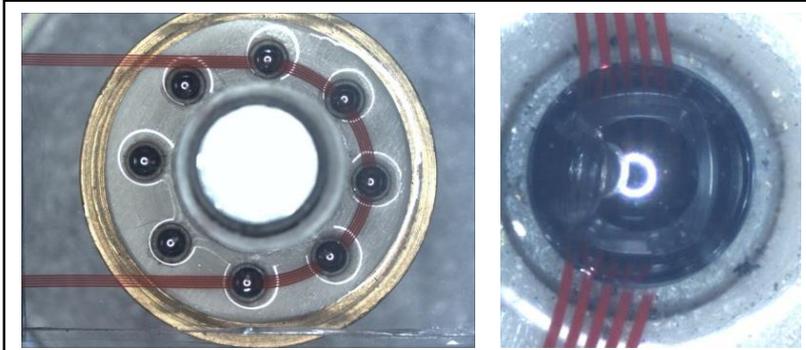
# Rotary planar peristaltic micropump (RPPM) *VIJ BRE*



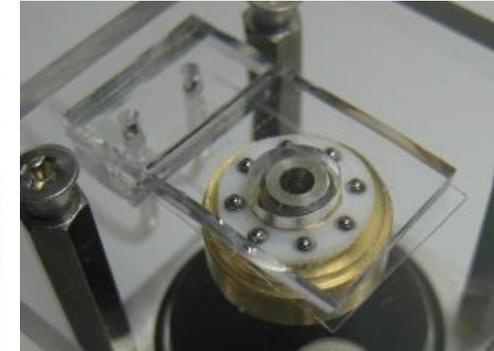
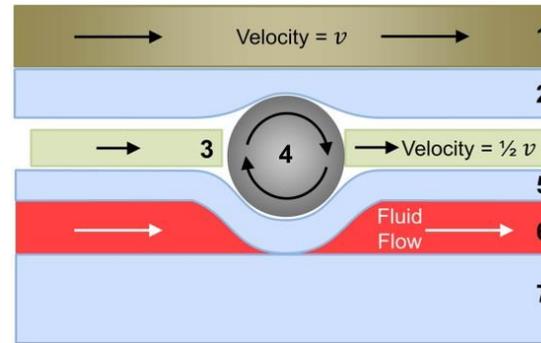
Balls are driven in a circle over microfluidic channels by a rotating disk of PDMS while being held a plastic cage



Imagine rolling an orange in a circle between your hands.

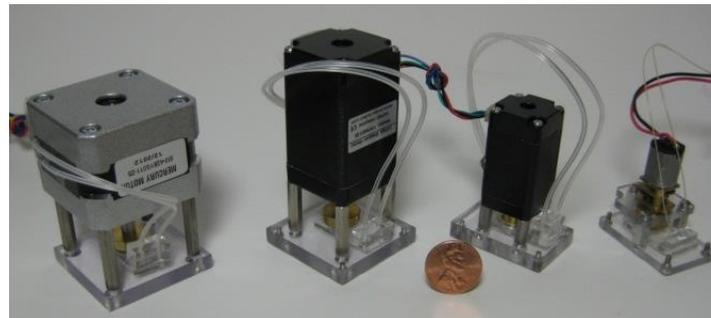


RPPM with dye-filled channels



Arduino controller for four RPPMs

Four different sizes so far. Pumps can operate > 2.5 million cycles



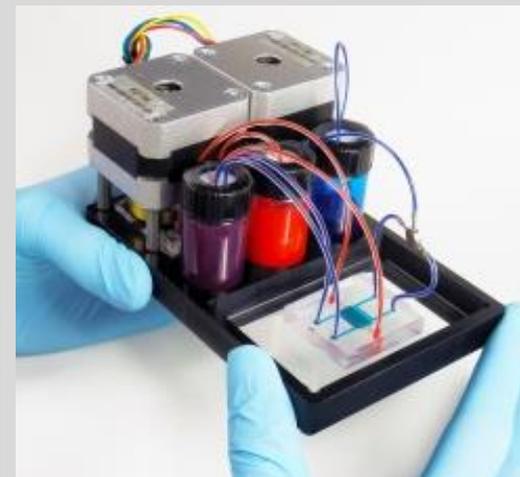
USB Port

**Challenge:** Syringe pumps are expensive and not easy to move during handling.

**Solution:** Our microfluidic pumps and valves allow for stand-alone IOMs at a low cost.

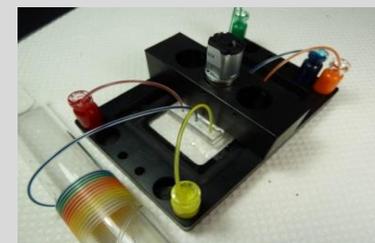
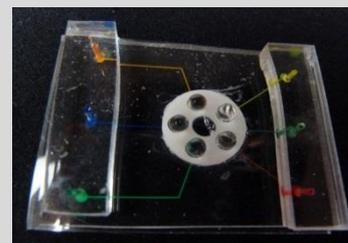
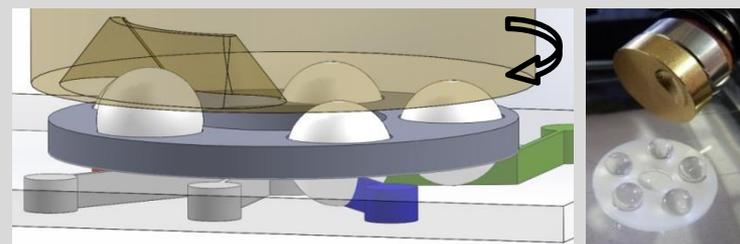
## PUMPS

**Rotary Planar Peristaltic Pumps** enable a Perfusion Controller for a Neurovascular Unit on a Chip.



## VALVES

**Normally-closed rotary planar valves (NC-RPV)** allow us to control perfusion, drug delivery, and sampling on-chip.



Patent US 9,618,129

# Automated MultiPump Experiment Running Environment (AMPERE)



VIIBRE four-motor microcontroller can readily drive:

- MicroClinical Analyzer Module
- Microformulator Module
- Perfusion Controller Modules
- Integration Module

AMPERE drives multiple microcontroller modules

VIIBRE developers since 2013:  
Erik Werner and Greg Gerken

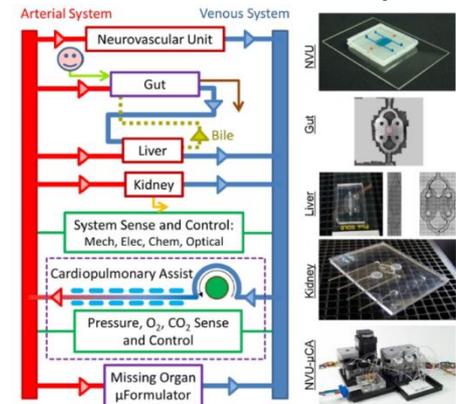
The screenshot shows the AMPERE software interface with several annotated components:

- Change valve position:** Points to a red valve diagram and a vertical red bar.
- Change pump speed:** Points to a green pump diagram and a vertical green bar.
- Controller Widget:** Points to the yellow valve diagram.
- Stop pump:** Points to a stop button on the yellow pump widget.
- Previous protocol step:** Points to a left arrow button in the timer widget.
- Start / Pause:** Points to a play/pause button in the timer widget.
- Next protocol step:** Points to a right arrow button in the timer widget.
- Stop protocol:** Points to a square stop button in the timer widget.
- Timer Widget:** Points to the bottom right corner of the interface.

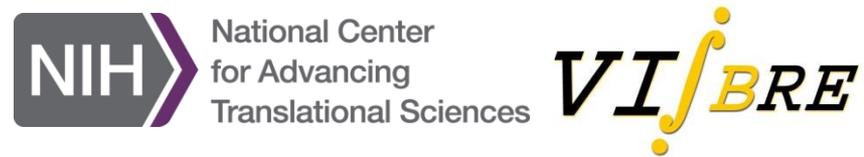
Step	Time (s)	Duration (s)	End Time (s)	Note
Red (S... Move To)	0	0	0	(0)
Blue (S... Run RPM)	0	0	0	(0)
Green (S... Run RPM)	0	0	0	(0)
Yellow (S... Move To)	0	0	0	(0)

# VIIBRE's organ module concept

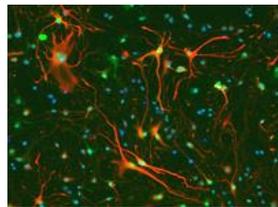
- Create general purpose components
  - Pumps, valves, baseplates, bubble traps, microcontroller, software...
  - Assemble components into modules
    - Perfusion Controller, MicroClinical Analyzer, MicroFormulator, InterConnect...
- Each organ operates as an individual module
  - Low-volume on-board pumps and valves
  - Perfusion, oxygenation, waste removal..
  - Recirculation optimizes media conditioning
  - Replace media at a physiological rate
  - Fluidics disposable after use, hardware reusable
- The organ modules can be coupled together
  - Passive tubing (1 cm of 360  $\mu\text{m}$  PEEK tubing = 20 nL/cm)
  - Can include active valves as required (load, recirculate, sample...)
  - Cardio-pulmonary assist
- System sensing and closed-loop control
  - Mechanical, electrical, chemical, optical
  - Real-time electrochemical metabolic sensing
- Missing Organ MicroFormulator
- Untargeted, in-line, near-real-time analytics



# Tissue Chips at Vanderbilt



- Human iPSC-derived neuronal cells



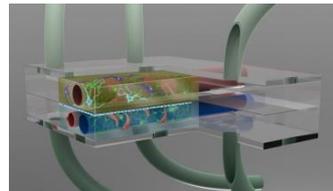
hiPSC glutamatergic neurons



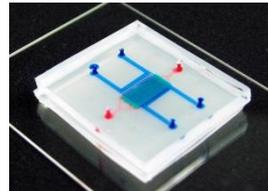
TSC-patient hiPSCs are being used to create brain microvascular endothelial cells, astrocytes, pericytes, and both excitatory and inhibitory neurons 2016



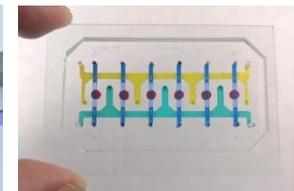
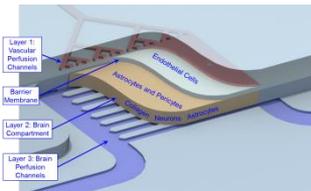
- Bioreactors



VIIBRE NVU concept 2012



VIIBRE NVU as built 2014



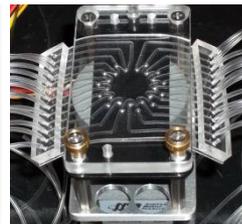
Mammary gland-on-a-chip 2016



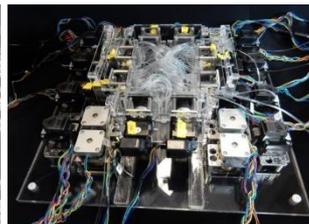
- Control hardware



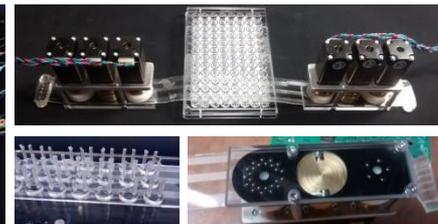
VIIBRE NVU Perfusion Controller 2014



VIIBRE 24-port valve 2015



MicroFormulator 1.0, 2015

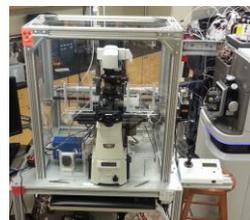


MicroFormulator 2.0, 2016



SmartMotor 2.0, 2016

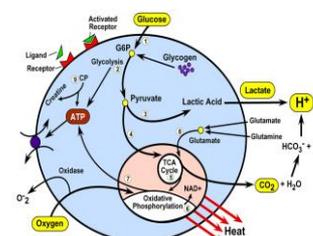
- Analytical chemistry & metabolomics



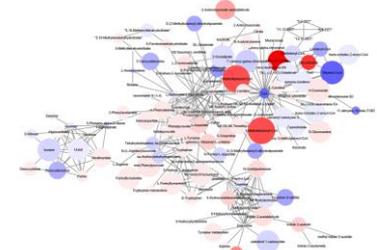
In-line MS of organ chip 2013



VIIBRE MicroClinical Analyzer 2014



Core Carbon Metabolism



MS metabolomics 2016

- Translation



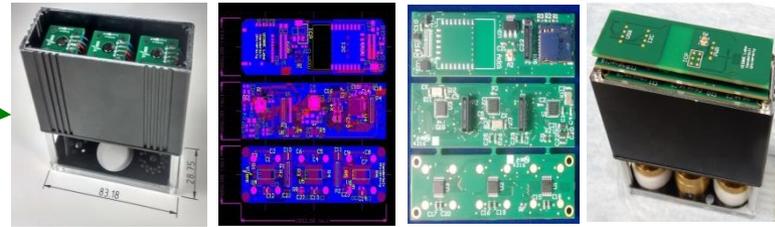
Issued U.S. patents: 7,435,578;  
7,534,601; 7,704,745;  
7,713,733; 7,790,443;  
7,974,003; 7,977,089;  
7,981,649; 8,129,179; 8,339,704

# VIIBRE Hardware Overview - 1



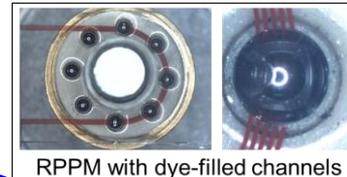
## • Controllers

- 4x Arduino for NEMA-17
- 3x NEMA-8 SmartMotor
- 1x NEMA-17 SmartMotor



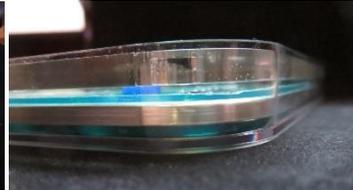
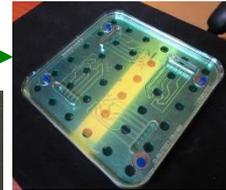
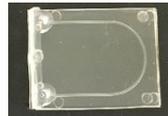
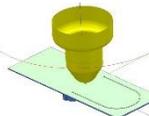
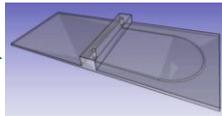
## • Motors

- NEMA-17
- Triple NEMA-8 Smart Motors
- Single NEMA-17



## • Pumps

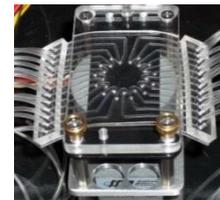
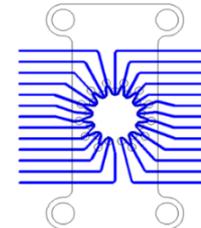
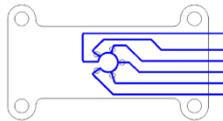
- NEMA-17 Low Flow Classic (0 to 6  $\mu\text{L}/\text{min}$ )
- NEMA-17 High Flow (0 to 1  $\text{mL}/\text{min}$ )
- Advanced molding techniques
- Non-PDMS



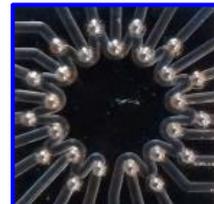
- Triple NEMA-8

## • Valves

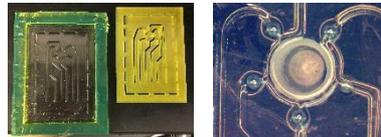
- 5 port
- 25 port



VIIBRE 24-port valve 2015



- New fab techniques

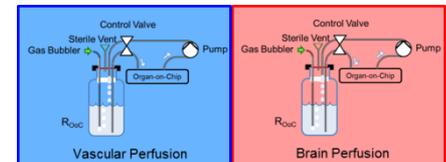
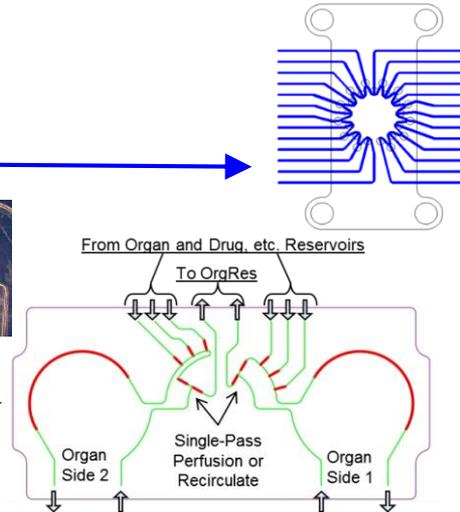


- 2x8 port

- Triple NEMA-8 2x NVU recirculating

- Non-PDMS

- In production
- Under development
- Under consideration



Should we couple organs-on-chips together?

**Homunculus, *noun***

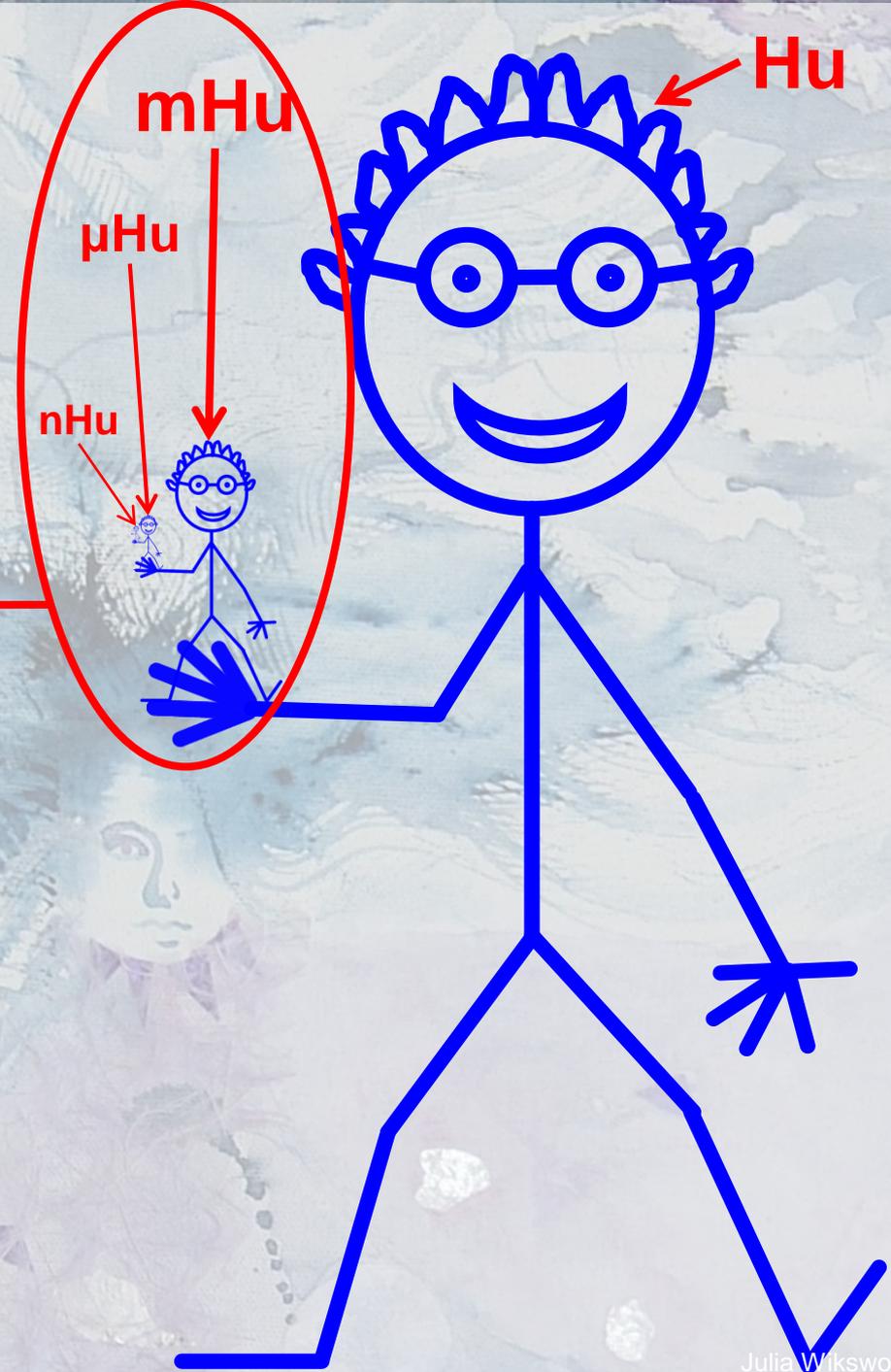
[hō-'məŋ-kyə-ləs]

*plural* ho·mun·cu·li

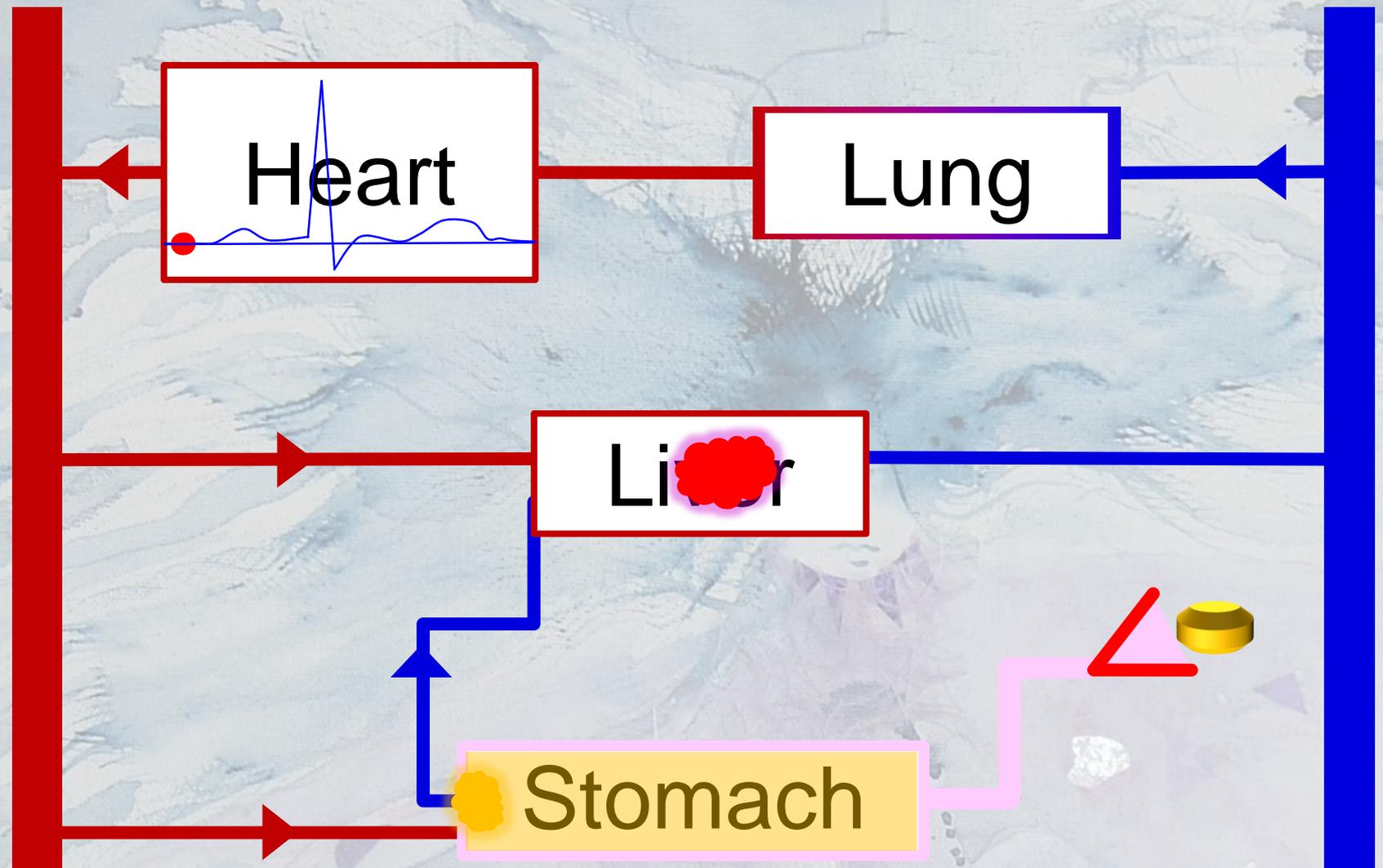
A miniature  
representation of a  
human.



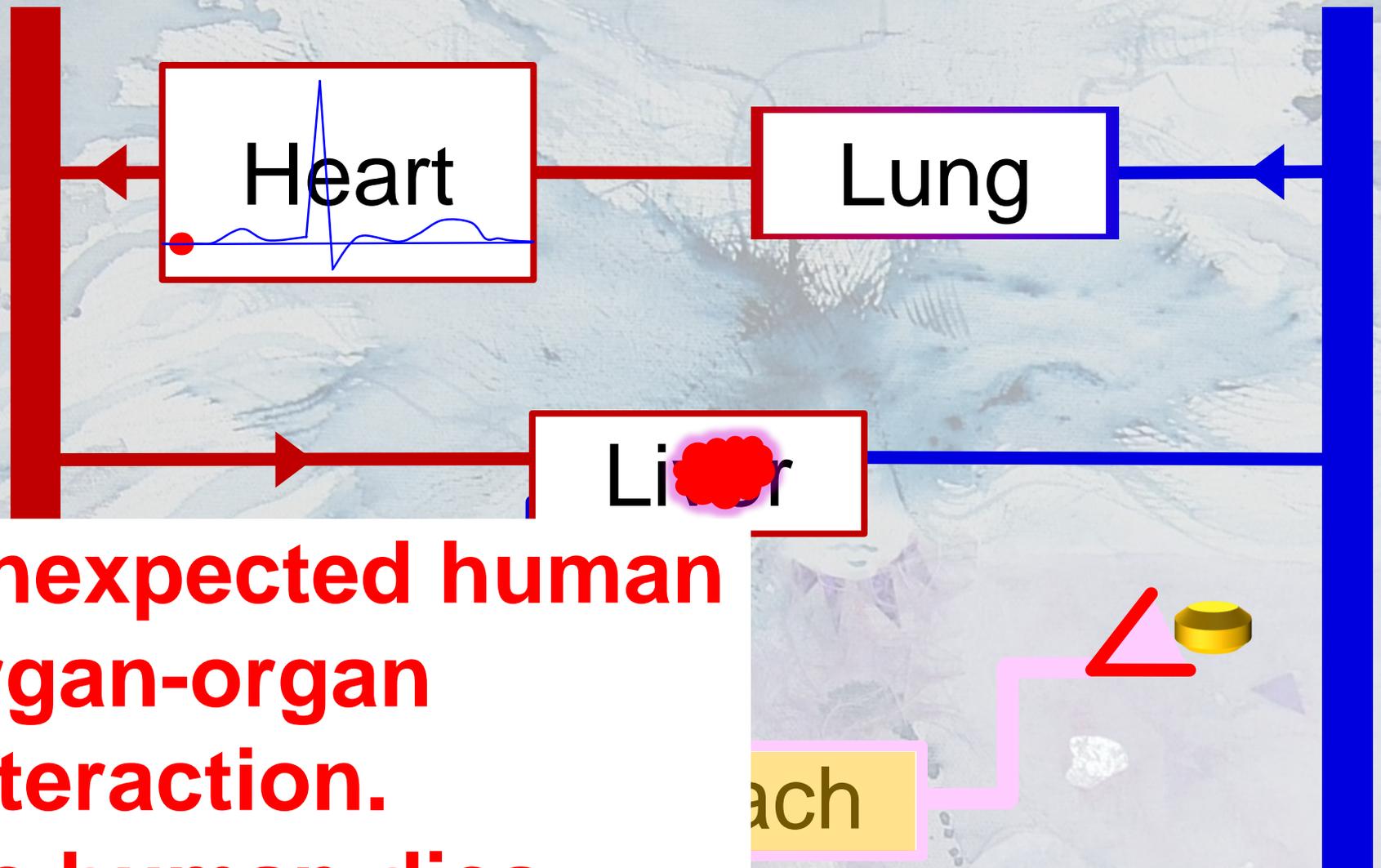
OCM homunculi  
will be alive, built  
with human cells!



# Test drugs in homunculi!



# Test drugs in homunculi!



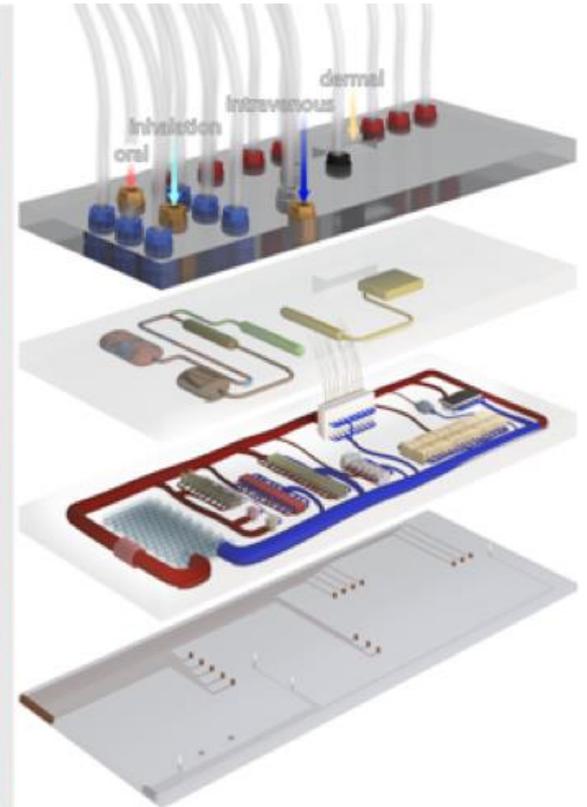
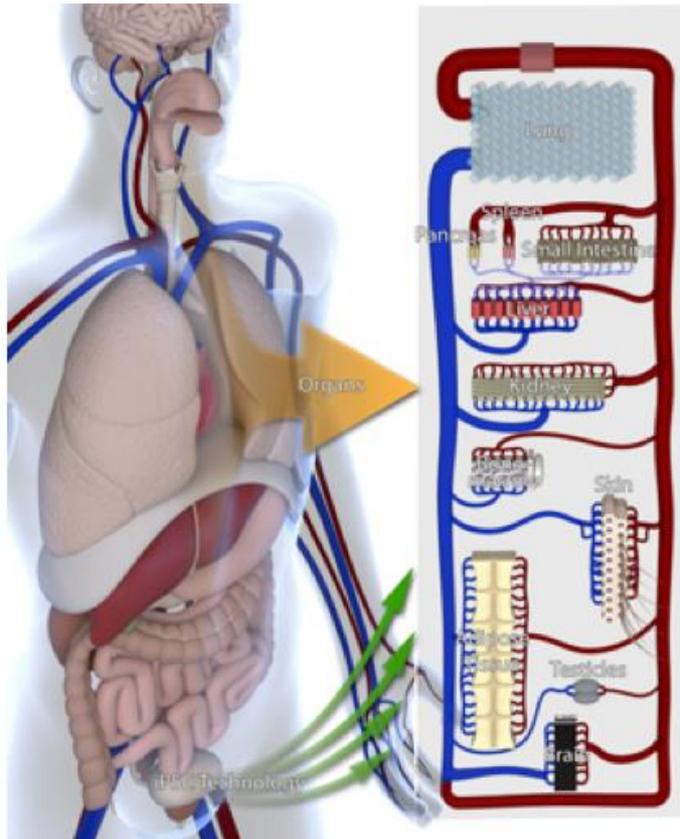
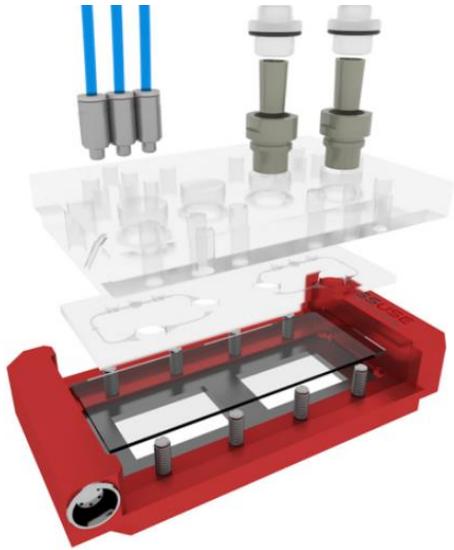
**Unexpected human organ-organ interaction. No human dies.**

# Do we need multiple organs?

- Drugs metabolized by one organ may be toxic to another
- How many?
  - Two organs are obvious: e.g., liver plus something else (heart, kidney, brain...)
    - Drug metabolism
    - Environmental toxicology
  - ADMET could benefit from coupled gut, lung, kidney, liver
  - DoD invested at least ~\$120 million to get 4 to 10 or more interconnected organs.
  - Does Pharma need them today? If not, how soon?
- How are coupled organs useful? How do you do it?

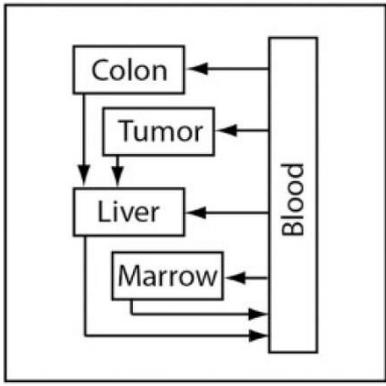


Under license  
from MIT



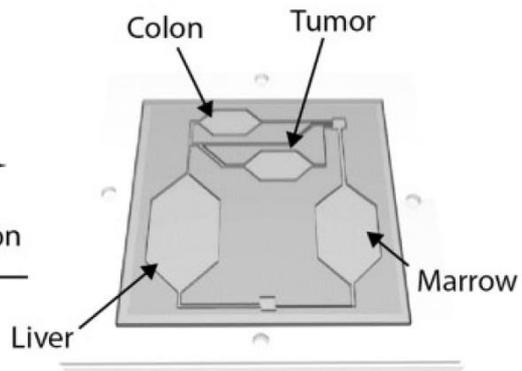
# Coupled organs support PKPD

- Coupled organs on a single chip can scale either volumes or media exposure times
- Supports PKPD analyses

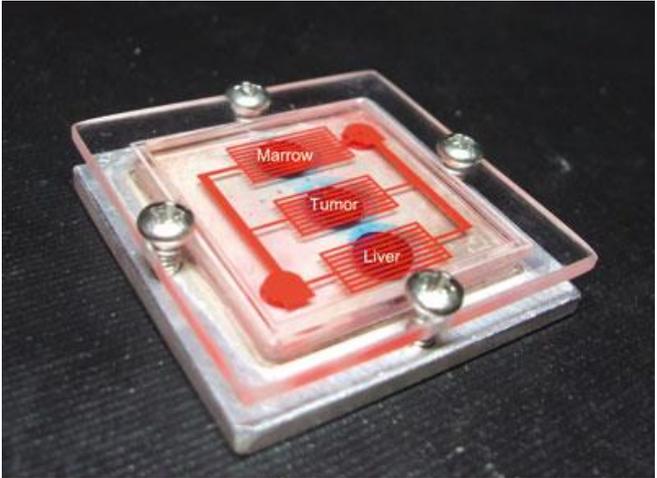
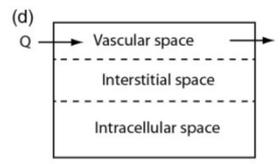
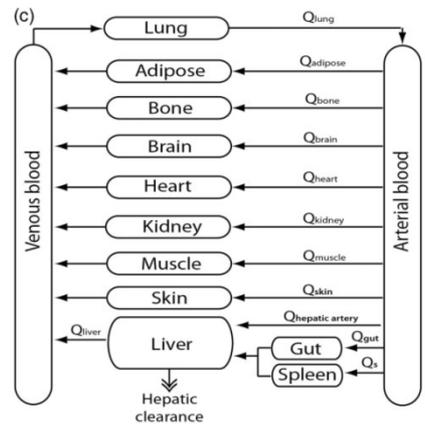
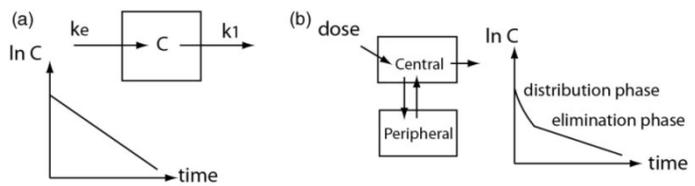


PBPK model

Design  
Interpretation



Body-on-a-chip



Sung ... Shuler, Hickman. *Exp.Biol.Med.* 239 (9):1225-1239, 2014.

# The "Volume problem"

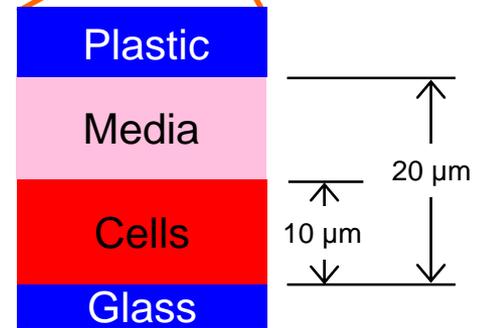
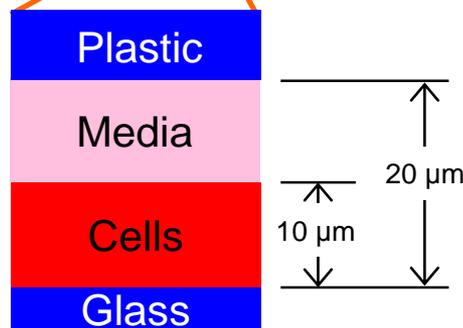
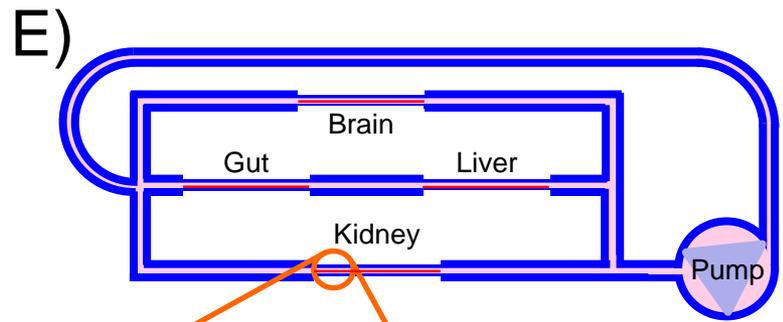
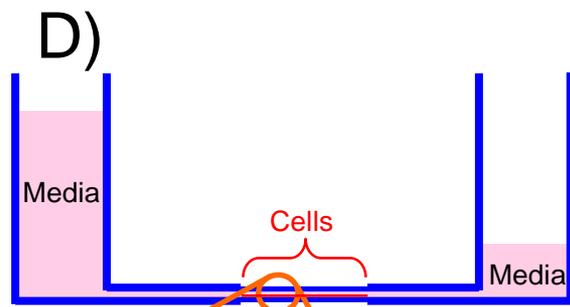
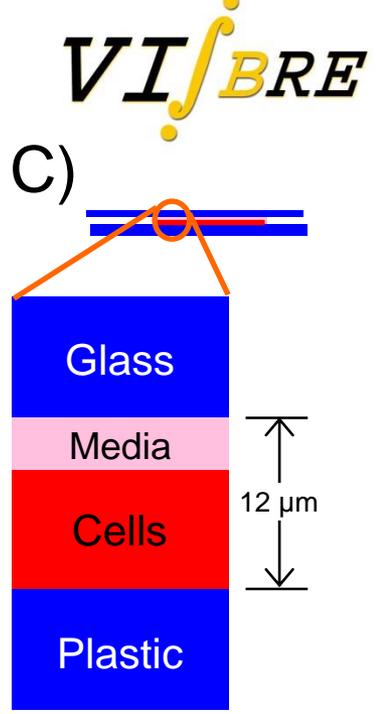
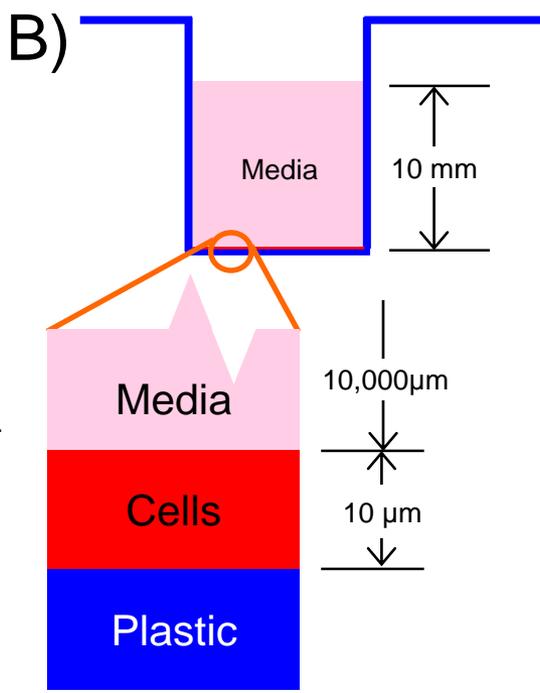
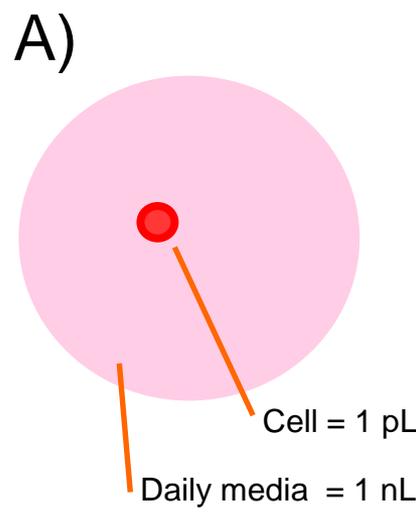
**A)** A pL cell requires a nL of fresh media each day.

**B)** The "Volume problem" in dishes and wells: paracrine, autocrine and endocrine factors diluted by a factor of 1000.

**C)** Microfluidics can reduce the volume of a single organ-on-chip.

**D)** Pipetting between reservoirs may not solve the volume problem

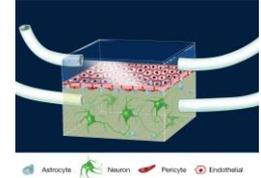
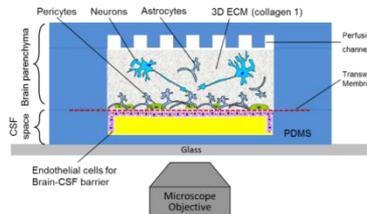
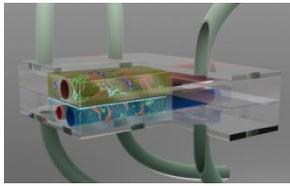
**E)** Integrated microfluidics should solve the coupled organ volume problem.



# VIIBRE's Neurovascular Unit (NVU)

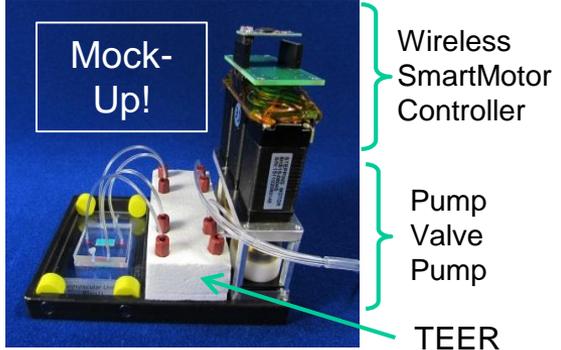
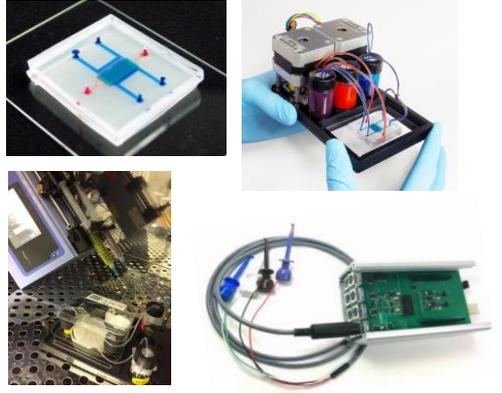
## • Concept

- Vascular and brain spaces
- Planar not hollow fiber
- Four cell types
- Could add CSF and choroid plexus



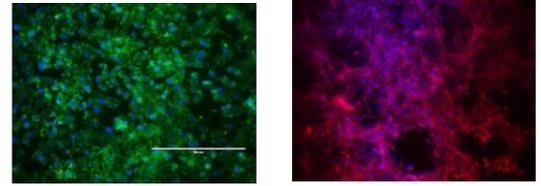
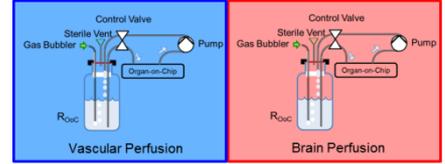
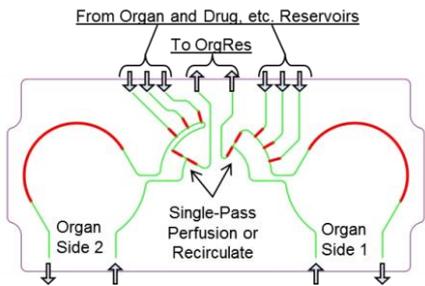
## • Today

- Planar  $\mu$ fluidic NVU
- Perfusion
  - Syringe pumps
  - Two NEMA 17 LoFlow pumps
- TEER / impedance spectroscopy



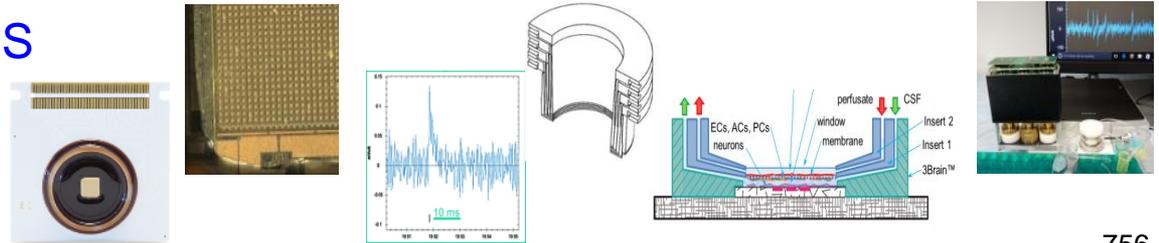
## • Soon

- NEMA-8 SmartMotors
- Drug injection valve
- Recirculation
- On-board wireless TEER
- Transparent membranes

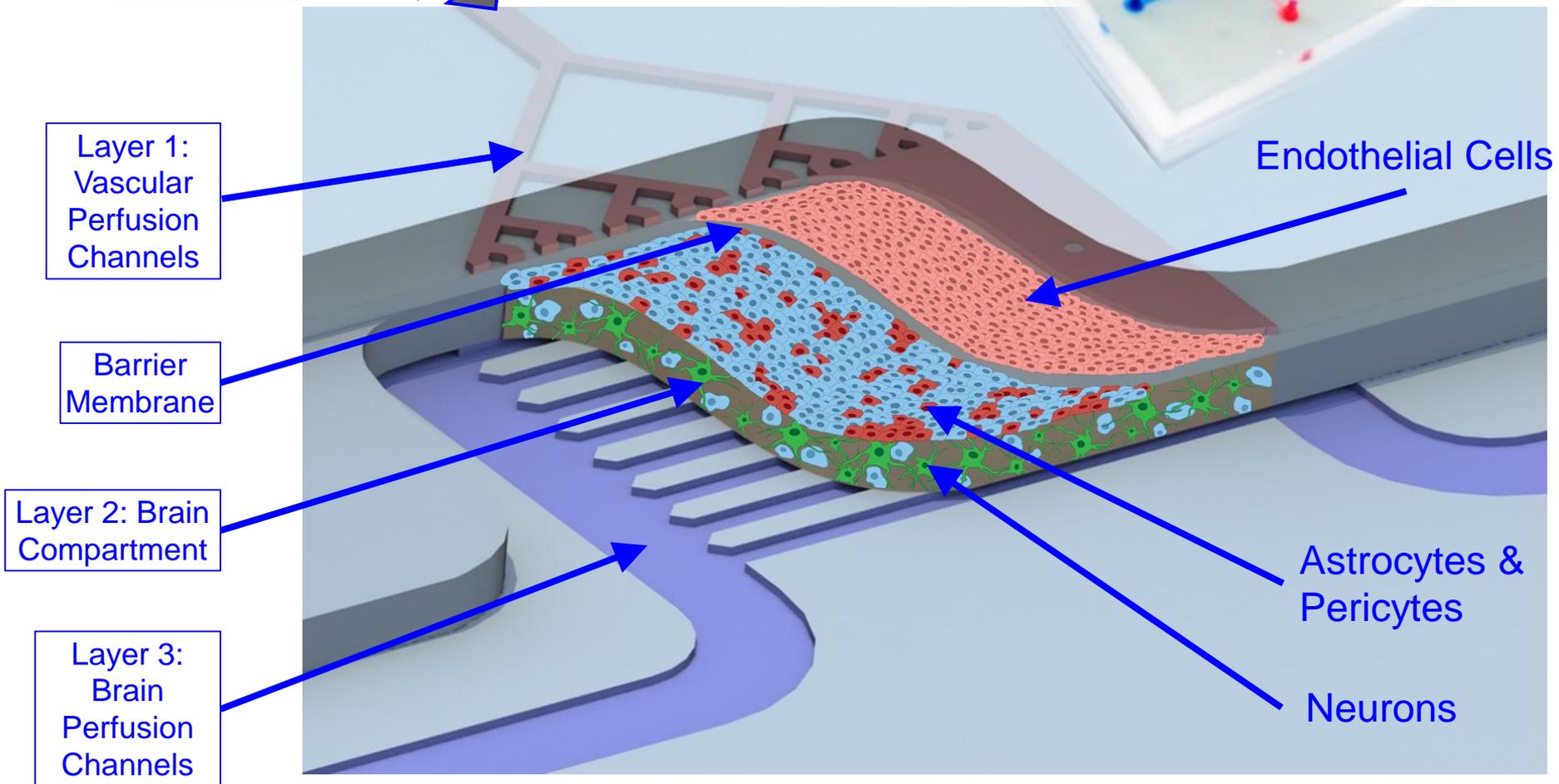
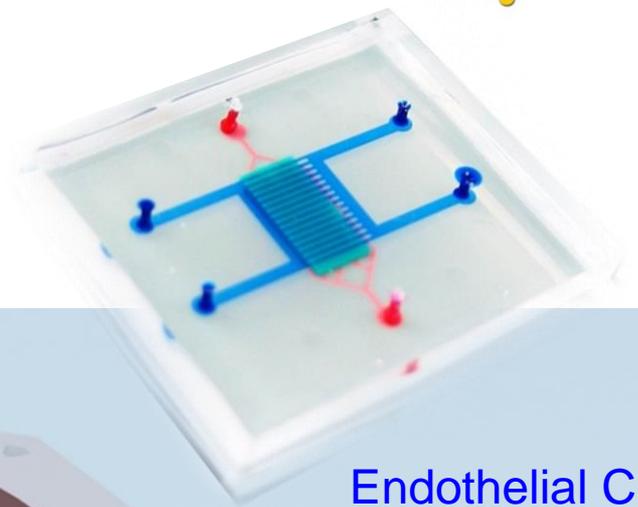
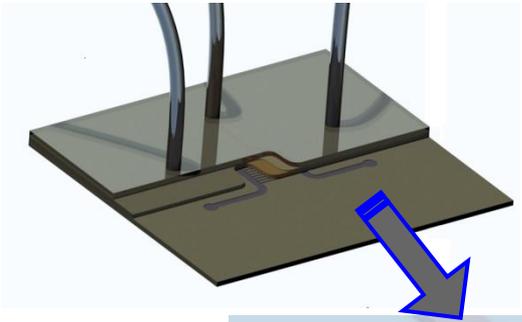


## • Neuro-electric signals

- 4096-channel CMOS
- Stimulation
- 7 kHz recordings
- Stackable



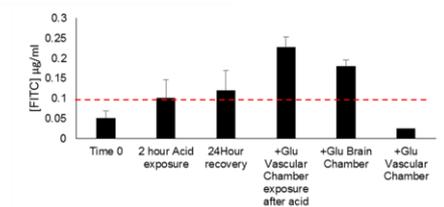
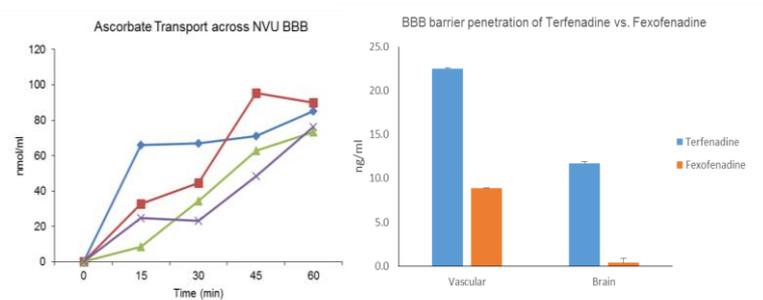
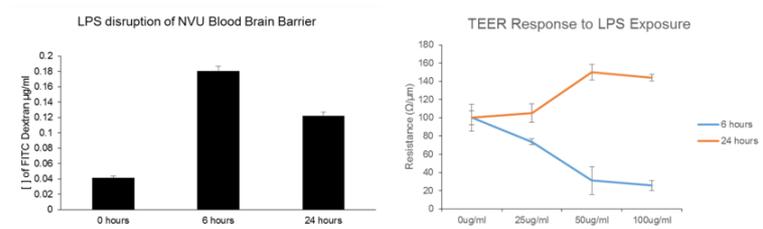
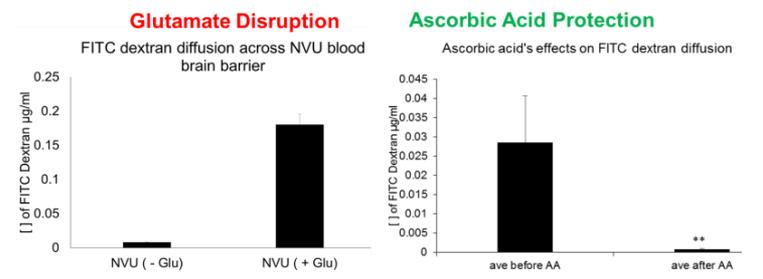
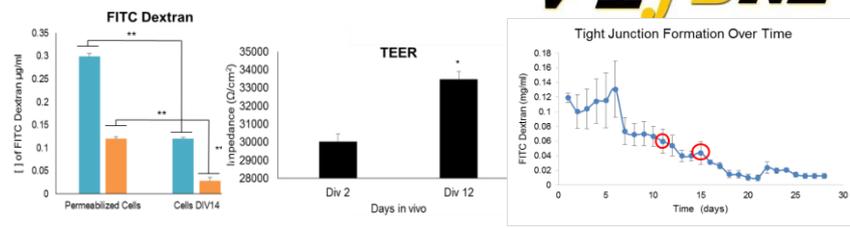
# The VIIBRE NVU and BBB



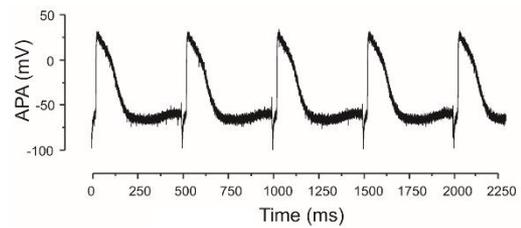
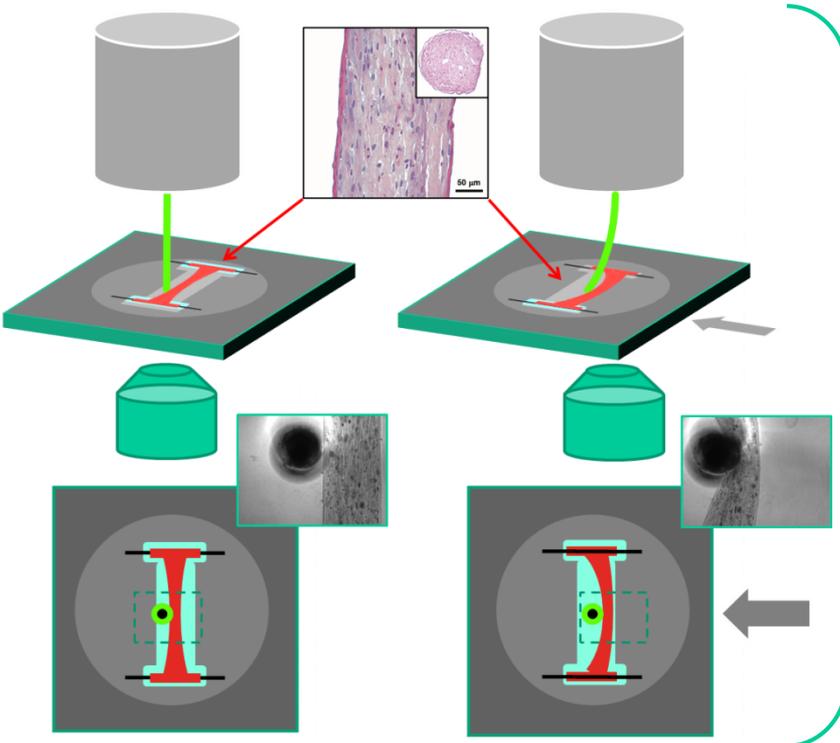
# NVU/BBB measurements



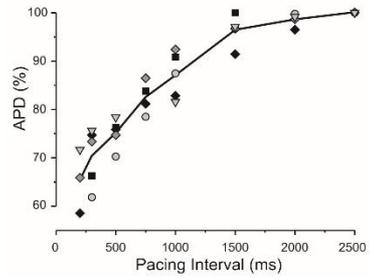
- Tightening of the BBB with time after assembly
- Disruption by glutamate in the brain compartment
- Tightening by ascorbic acid in the vasculature
- Differential responses over time to inflammatory agents (LPS and cytokine cocktails)
- Differential transport across the BBB: ascorbic acid (Y), Terfenadine (Y), Fexofenadine (N)
- Response to combined insults (brain glutamate + acidification)



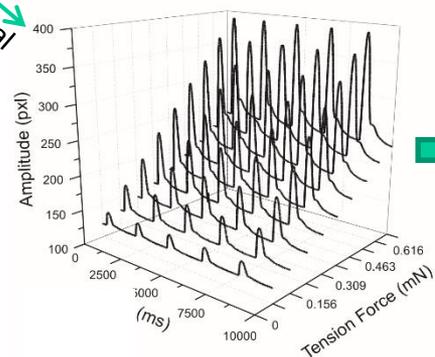
# Cardiac I-Wire



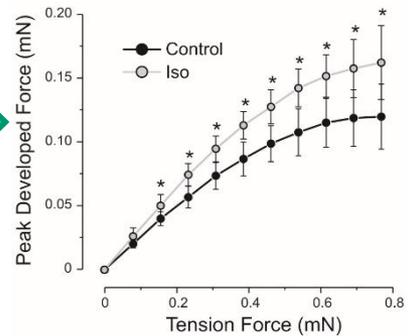
Restitution Curve



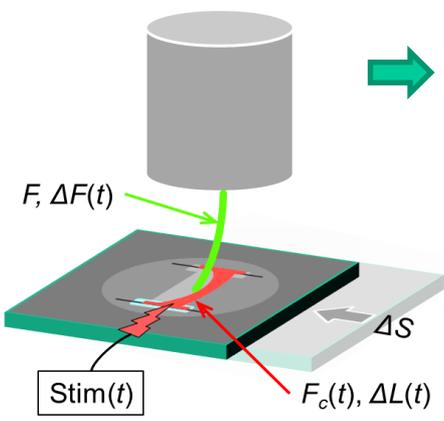
Electrical  
Mechanical



Frank-Starling Curve



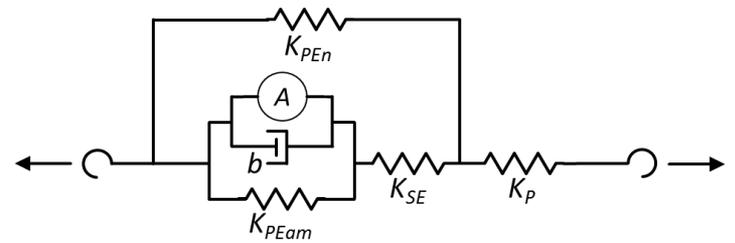
Siderov, et al., Acta Biomaterialia, 2016



$$\begin{aligned}
 F_p &= K_p \Delta s_1 \\
 \Delta s_1 &= \Delta s - \Delta s_2 = \Delta s - \sqrt{\Delta L(2L + \Delta L)} \\
 \Delta s_2 &= \sqrt{(L + \Delta L)^2 - L^2} = \sqrt{\Delta L(2L + \Delta L)} \\
 \Delta L &= \sqrt{L^2 + \Delta s_2^2} - L = \sqrt{L + \left(\Delta s - \frac{F_p}{K_p}\right)^2} - L \\
 F_p &= K_p \Delta s_1 = 2F_C \sin(\theta) = 2F_C \frac{\Delta s_2}{L + \Delta L} \\
 F_C &= \frac{1}{2} K_p \left( \frac{\Delta s}{\sqrt{\Delta L(2L + \Delta L)}} - 1 \right) (L + \Delta L) \\
 F_C &= \frac{(K_{PEam} + K_{PEn} + \frac{K_{PEn} K_{PEam}}{K_{SE}})}{1 + \frac{K_{PEam}}{K_{SE}}} (\Delta L + \Delta L_{offset}) \\
 \dot{\Delta L} &= \frac{\left(1 + \frac{K_{PEam}}{K_{SE}}\right) f_1(\Delta L) - K_M(\Delta L + \Delta L_{offset}) - F_A}{b \left(1 - \frac{f_2(\Delta L) - K_{PEn}}{K_{SE}}\right)}
 \end{aligned}$$

Nashville single-string guitar equation

Cardiac Hill model

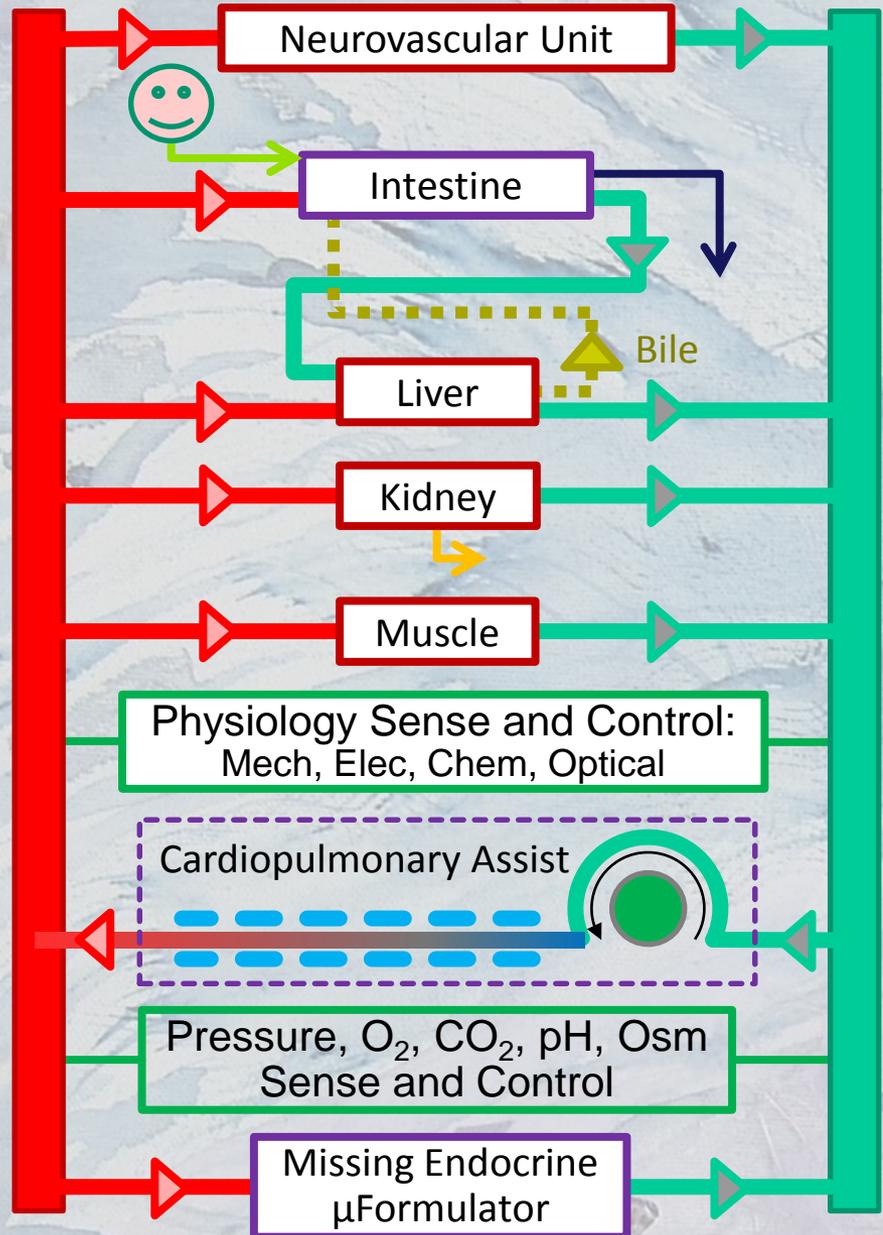


Schroer, et al., Acta Biomaterialia, 2016

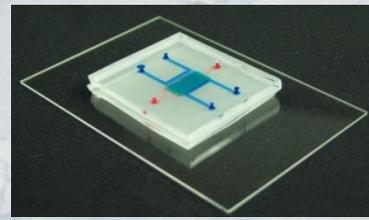
# NIH-NCATS MPS Integration

Arterial System

Venous System

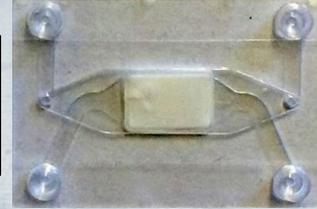


NVU



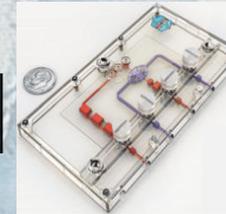
Vanderbilt

Intestine



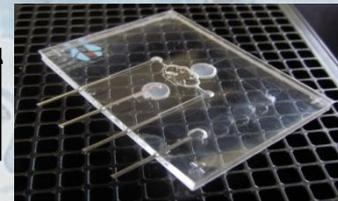
Hopkins, Baylor

Liver



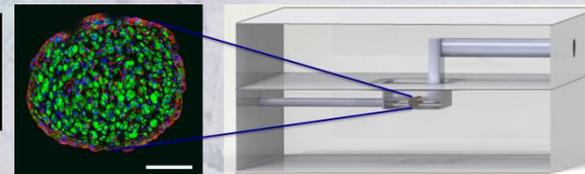
Pittsburgh

Kidney



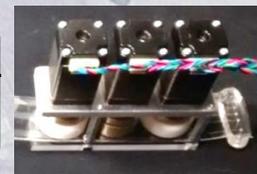
Washington

Muscle



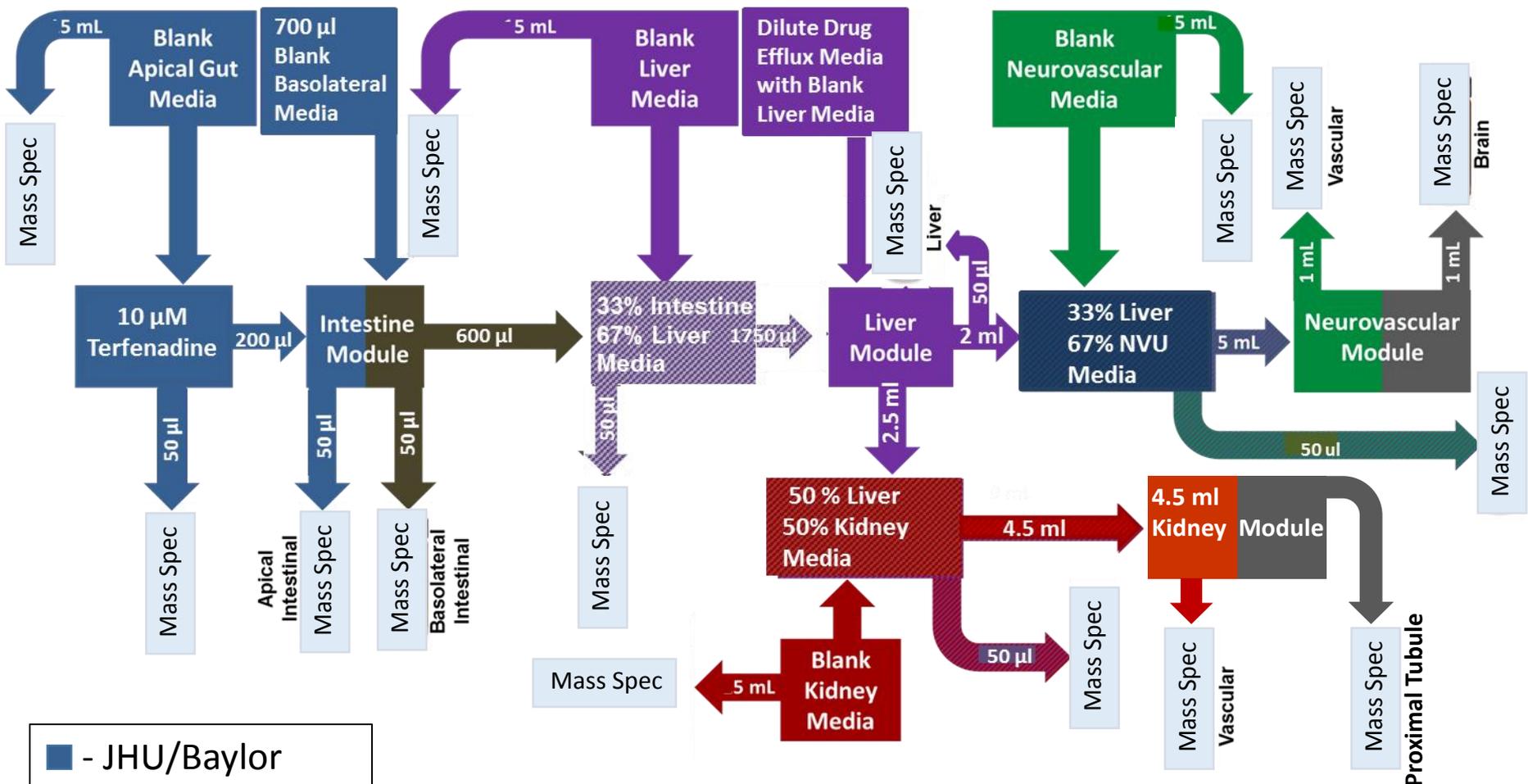
Duke

ME-μF



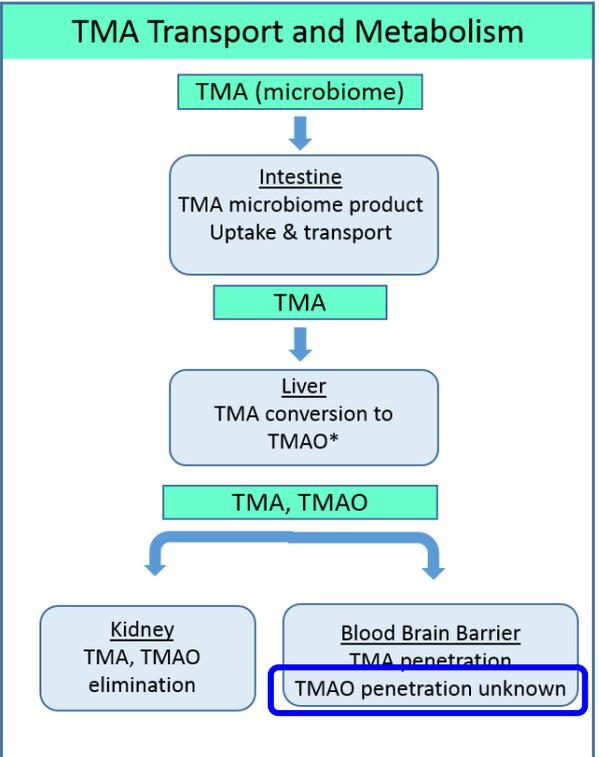
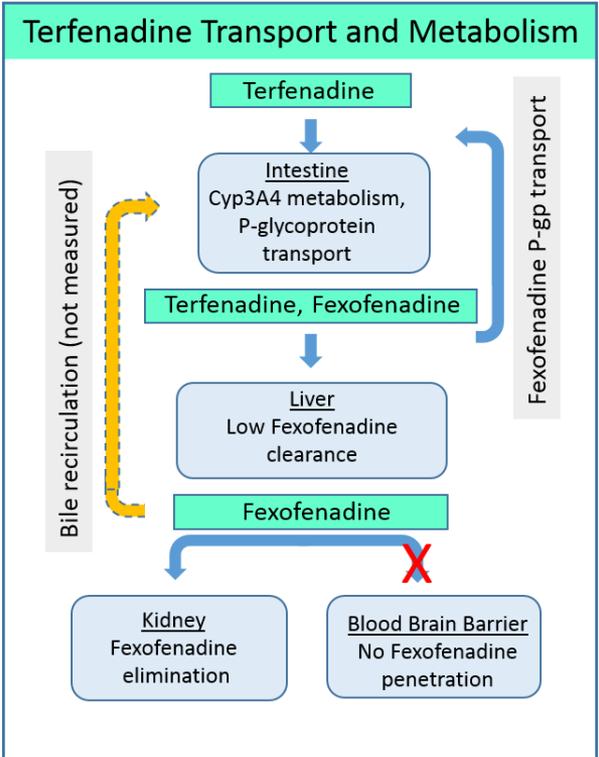
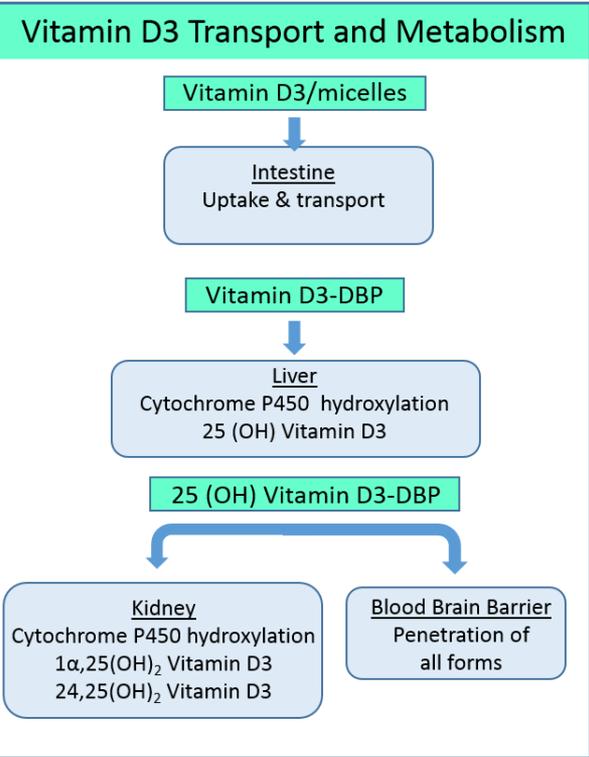
# Work Flow for Functional Coupling Experiment

Goal: Couple Gut, Liver, Brain, and Kidney



- - JHU/Baylor
- - U Pittsburgh
- - U Washington
- - Vanderbilt

# Work Flow for Functional Coupling Experiment



TMAO penetration into human CSF confirmed the NVU observation: Del Rio, et al., Nutrients, 2017

We found 26% TMAO penetration into the NVU brain chamber!

Test Agent/Metabolites	Clinical MPS Model	Intestine	Liver	Kidney	BBB
TMA TMAO	Clinical	Uptake & Transport	TMA → TMAO < 5% TMA Clearance	> 95% TMAO Excreted	TMAO Penetration: Unknown
	MPS	Uptake & Transport	TMA → TMAO < 1% TMA Clearance	~46% TMAO Excreted	26% TMAO Penetration
Terfenadine (Ter) Fexofenadine (Fex)	Clinical	Ter → Fex; Fex CounterTrans	< 1% Bio T < 95% Fex Clearance	11% Fex Excreted	~0% Fex Penetration
	MPS	Ter → Fex; Fex CounterTrans	< 1.4% Bio T (est.) < 80% Fex Clearance	~ 1% Fex Excreted	~ 0% Fex Penetration
Vitamin D3 (VD3) 25(OH)VD3; 1α,25(OH)2VD3; 24,25(OH)2VD3	Clinical	Uptake & Transport No metabolism	VD3 → 25(OH)VD3	25(OH)VD3 → 1α,25(OH)2VD3 & 24,25(OH)2VD3	VD3 & 25(OH)VD3 Penetration
	MPS	Uptake & Transport No metabolism	VD3 → 25(OH)VD3 & 24,25(OH)2VD3	1α,25(OH)2VD3 & 24,25(OH)2VD3 below LOQ	0.4% VD3 & 6% 25(OH)VD3 Penetration

**Key Concordances Between MPS and Clinical Fate for Three Test Agents.** Key: Uptake - by jejunum endothelial cells ; Transport - from apical to basolateral media; → = Metabolism; CounterTrans = Transport from basolateral to apical media; est. = estimated. Excreted - into proximal tubule lumen; LOQ = limit of quantitation; Penetration - through blood-brain barrier.

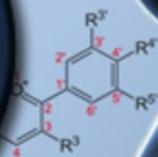
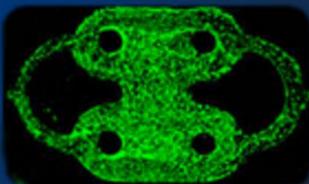
Verneti, et al., Sci. Reports, 2017

# VPR O M P T

Vanderbilt-Pittsburgh Resource for Organotypic Models for Predictive Toxicology

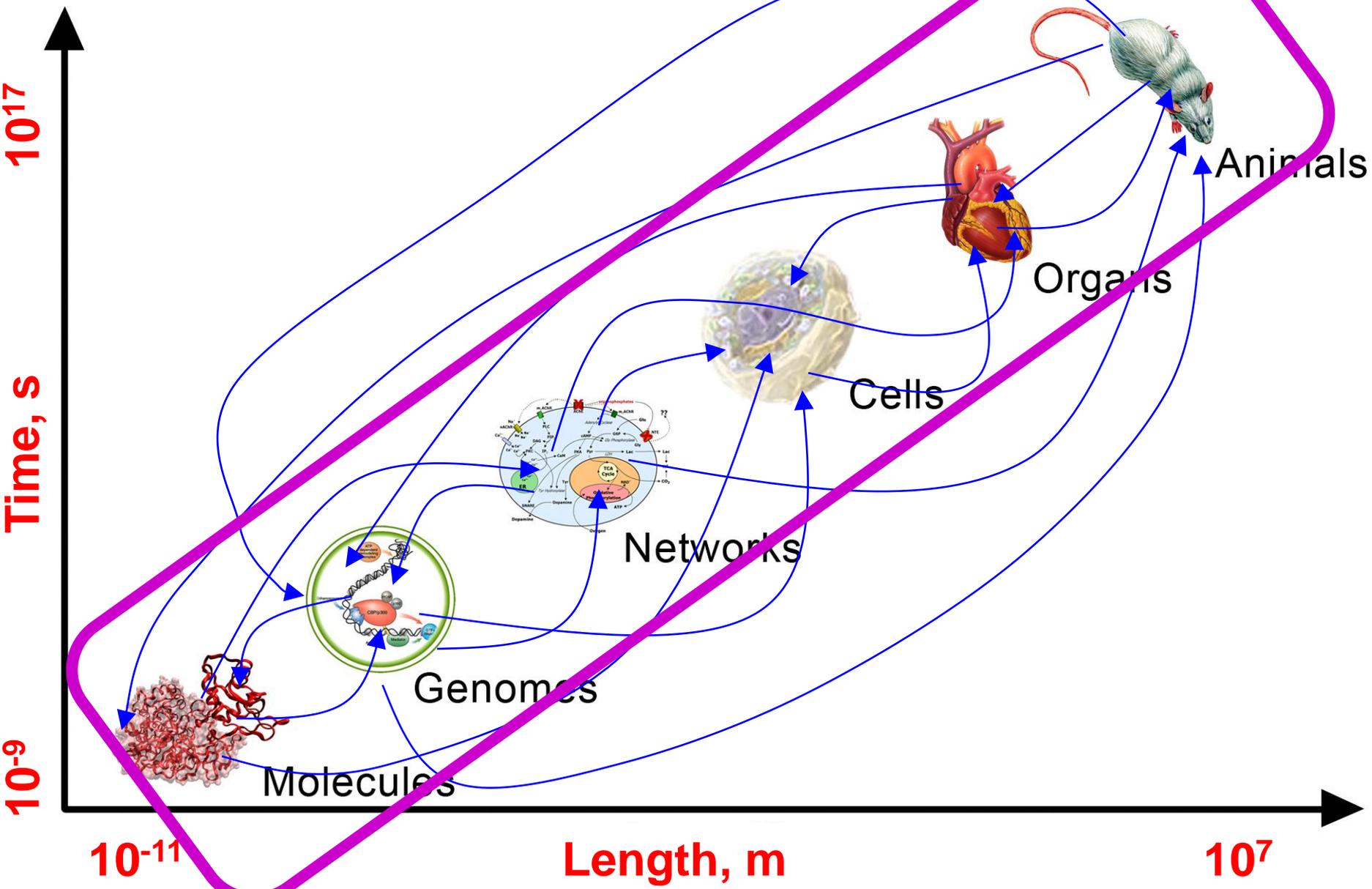


Liver



How do you monitor organ health, performance, and response to drugs and toxins?

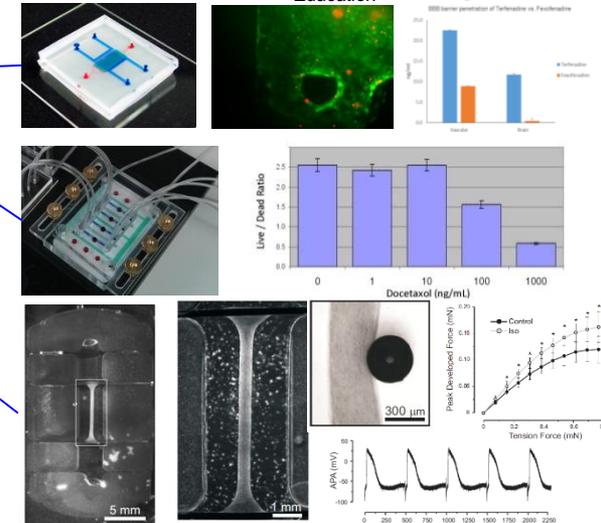
# OCM platforms will provide multiscale control of complex systems



# VIIBRE Analytics for Organs on Chips

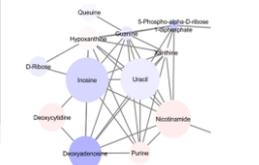
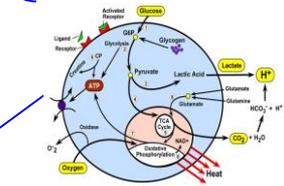
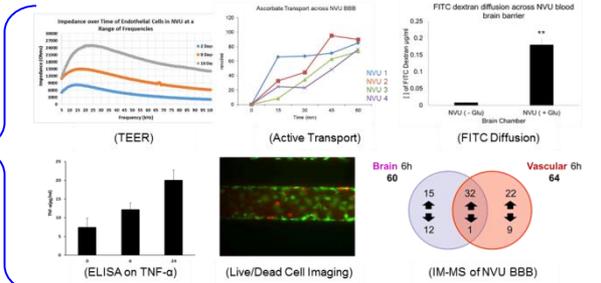
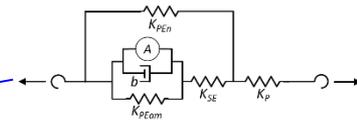
## • Organs-on-Chips

- Brain (in regular production and testing drugs)
- Mammary Gland (demonstrated, published, moving towards production)
- Cardiac Muscle 3D construct (demonstrated, published, being parallelized and automated)
- Fetal Membrane (under development by Osteen @ VU)
- Gut (In prep with Donowitz @ JHU and Estes @ Baylor; Rericha and Lau @ VU)
- Developmental bone-joint (In prep with Tuan @ U. Pitt)



## • Real-Time Evaluations

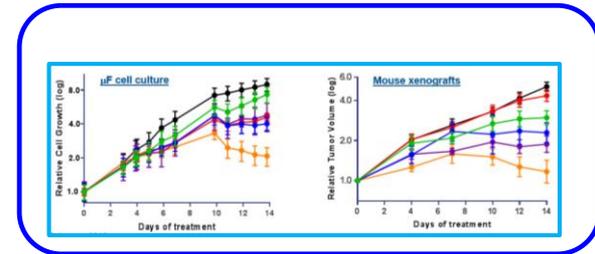
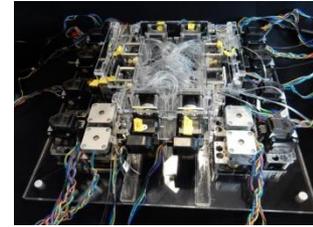
- Myocardial elastomechanics
- TEER – transendothelial electrical resistance (real-time)
- Barrier active transport (off-line microplate or LC-MS)
- Barrier permeability (FITC dextran diffusion)
- Cytokines (ELISA)
- Fluorescence imaging
  - Cell survival – live/dead assay
  - Mitochondrial membrane potential
  - Transmembrane potential
- Metabolic activity (real-time glucose, lactate, pH, oxygen)
- Cell morphology
- Confocal 3D reconstruction
- Secretome proteomics and metabolomics (UPLC-MS)



The sensitivity of many assays is set by the ratio of cell volume to media volume!

# MultiWell MicroFormulators

*VI***BRE**



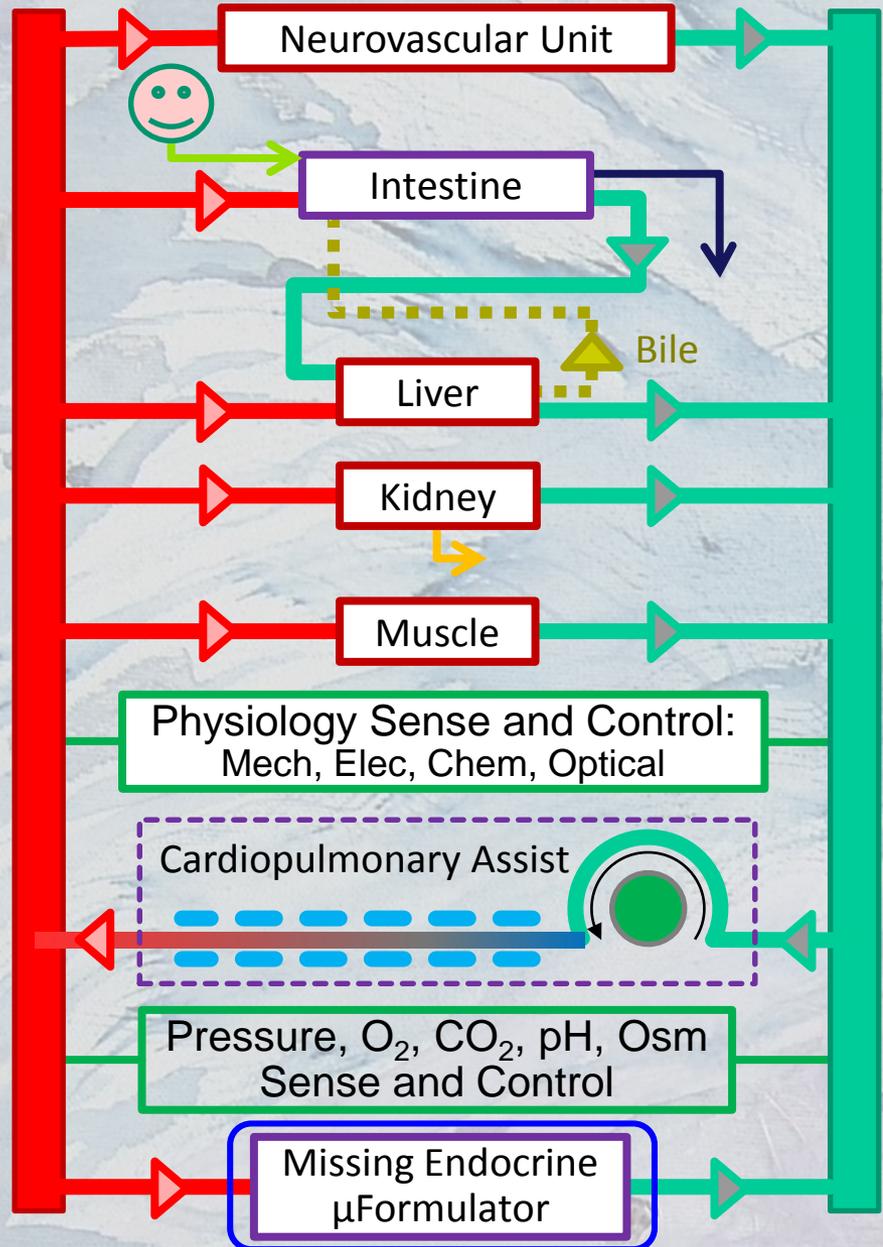
# The “Missing Organ” Problem

- The human body has over a hundred organs.
- The Tissue Chips community is building “toy models” of humans, *i.e.*, Homunculi.
  - We cannot include every organ.
  - We should not include every organ.
- For a coupled organ system, there may always be a key organ that has been omitted.
- Missing secretory organs can be replaced with a ***Missing Organ Microformulator***.
  - Hormones, hormones, hormones

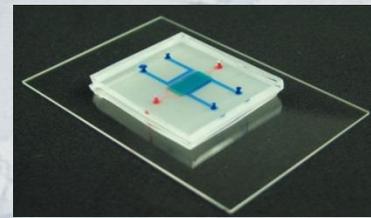
# NIH-NCATS MPS Integration

Arterial System

Venous System

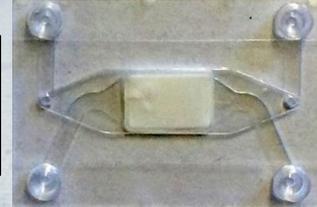


NVU



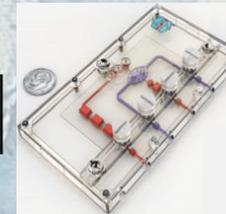
Vanderbilt

Intestine



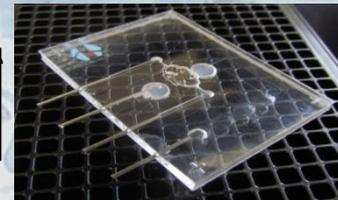
Hopkins, Baylor

Liver



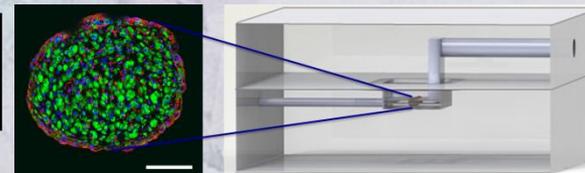
Pittsburgh

Kidney



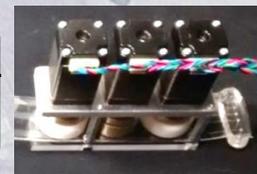
Washington

Muscle

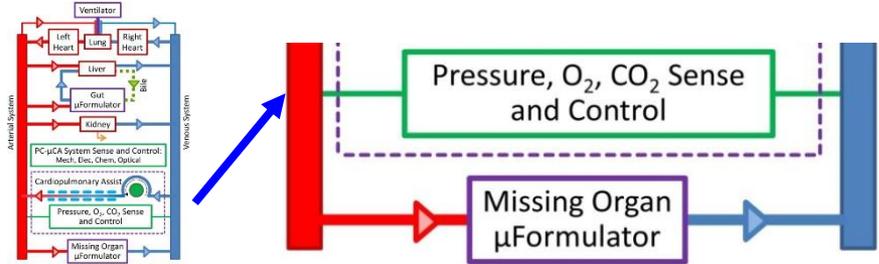


Duke

ME-μF

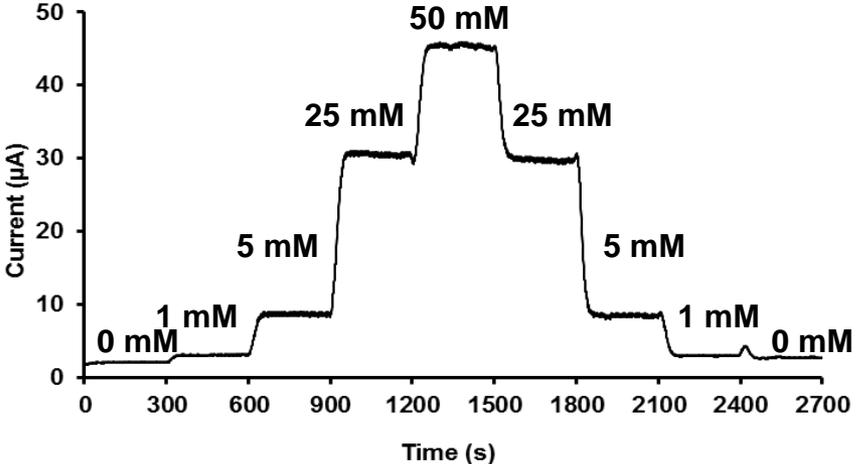


# Missing Organ MicroFormulator ( $\mu$ F)

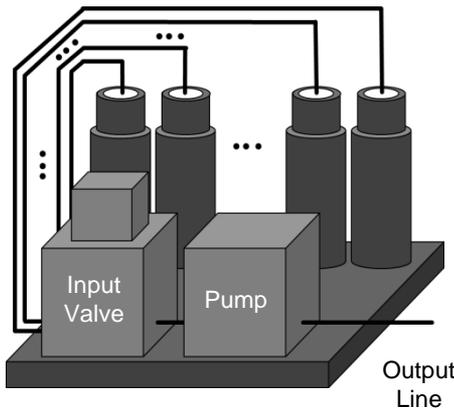
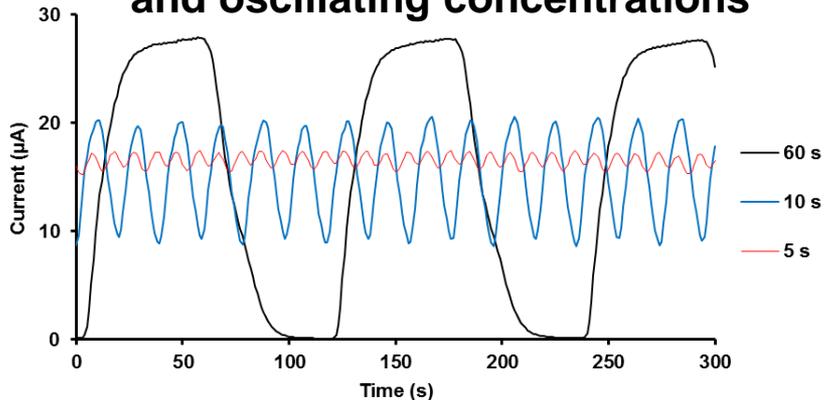


- Cliffler Group:
  - Testing performance with e-chem
  - Reduction of ferricyanide at -0.16V vs. Ag quasi-reference.
- Low leakage between ports
- Programming allows rapid switching between ports for dilution, gradients, and calibration of electrochemical sensors

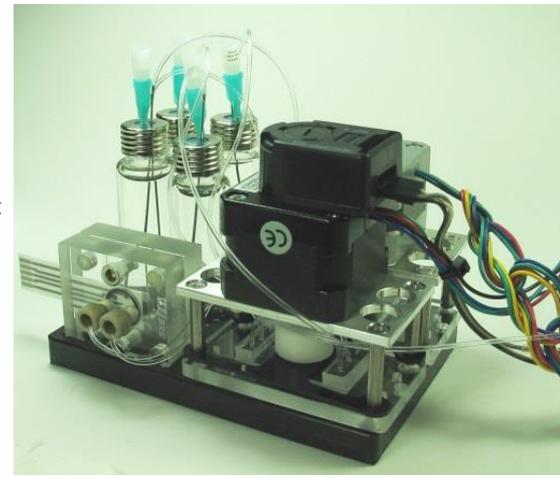
**Delivery of desired concentration**



**Time-division multiplexing and oscillating concentrations**



United States Patent, 9,618,129 B2

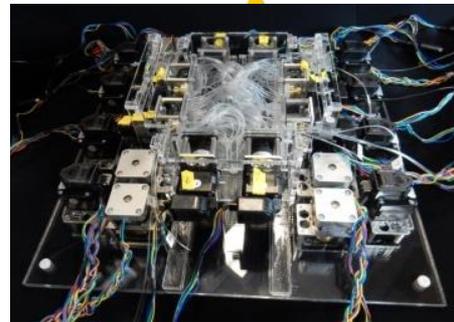
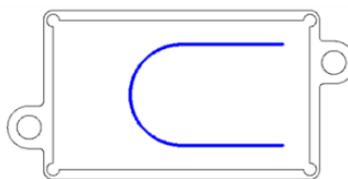
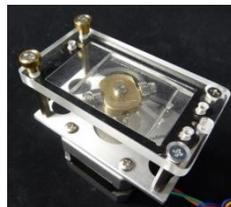
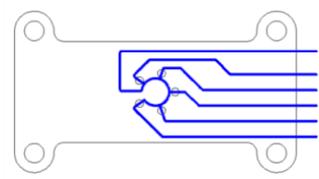
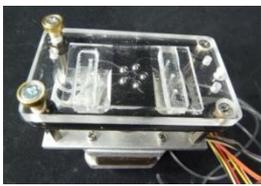
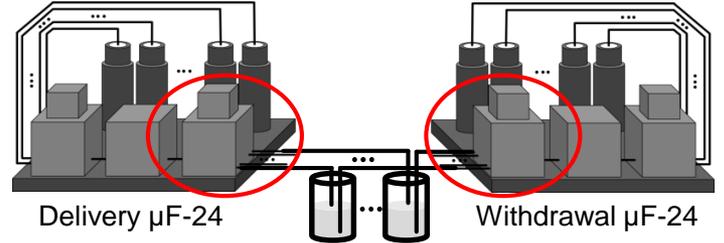


A normally closed rotary planar valve for microfluidic applications, F. E. Block III, J.R. McKenzie, P. C. Samson, D. A. Markov, and J. P. Wiksw, *In Preparation*.

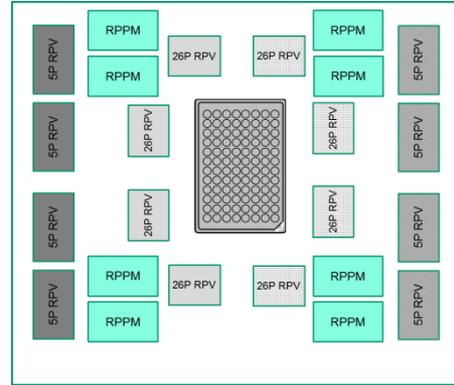
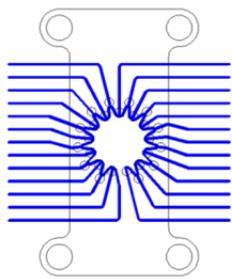
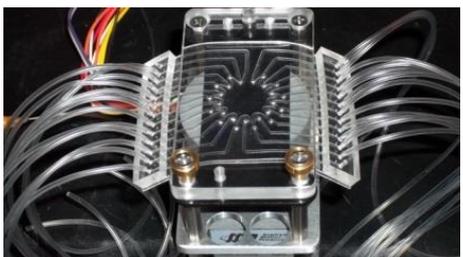
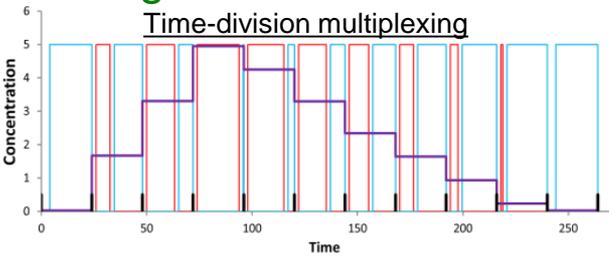
# Multi-MicroFormulators for testing the effects of drug timing



• Matt Wagoner – “Your  $\mu F$  is great, but I need 96 channels.”



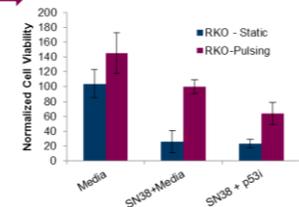
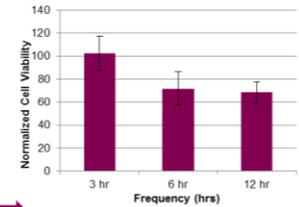
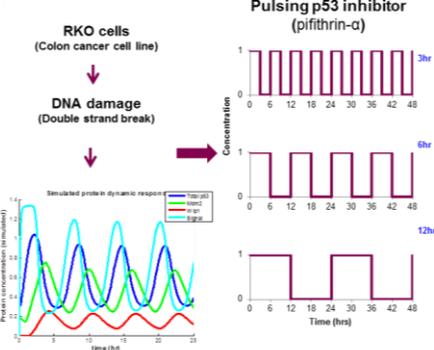
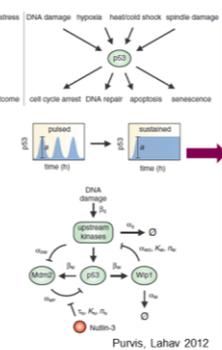
• What can you learn by lengthening or shortening the effective PK profile of a drug *in vitro*?



• What is the optimal timing for repeated or multi-drug dosing?

## Perturbing Cellular Pathways

p53 dynamics control cell fate



Funded by AstraZeneca. In operation at AZ - Waltham, MA since January, 2016



2016-2018

• Currently performing additional experiments to understand signaling dynamics and its influence on cell fate  
Courtesy of Aditya Kolli, Harish Shankaran, Matthew Wagoner, and Jay Mettetal, AstraZeneca

Funded by AstraZeneca and NIH-NCATS/CDFRC

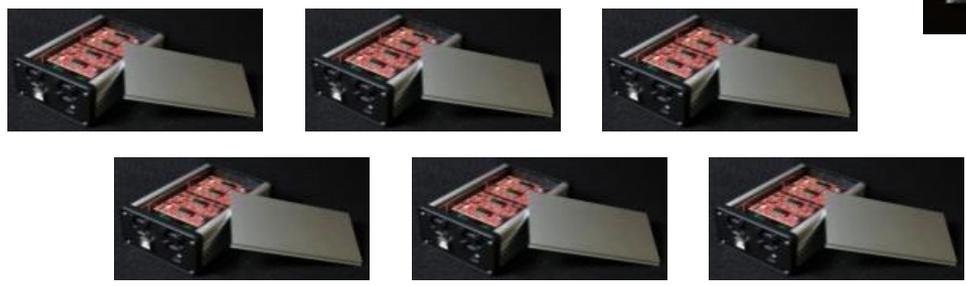
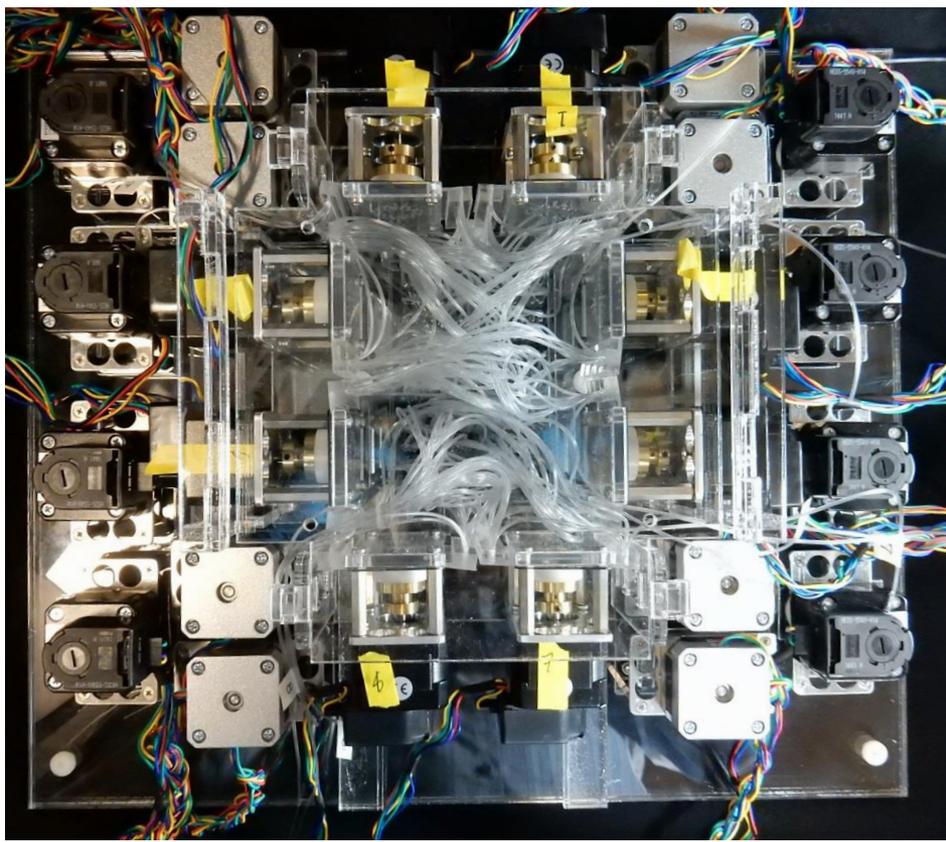
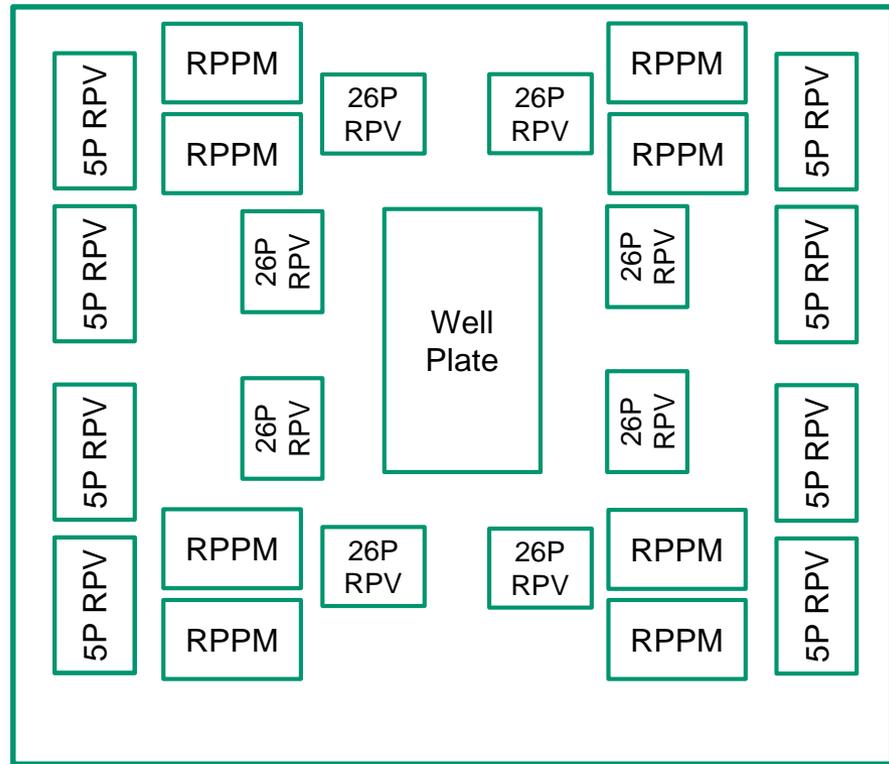
# What can you do with a $\mu$ F-96?

- Use time-division multiplexing to create realistic PK drug-exposure profiles individualized for each and every well in a 96-well-plate HTS assay.
  - Conventional cell culture
  - Massively parallel organs on chips
  - Organoid HTS arrays
    - Hanging drop
    - Transwells
- Explore in a massively parallel manner the multitude of combinations of growth factors and other compounds that are needed to guide iPSC differentiation to specific cellular phenotypes.
  - Readily applicable to organoid developmental biology
  - Suitable for machine learning and automated model inference
- Create circadian rhythms on a well plate or Petri dish
  - Hormones
  - Nutrients
  - Drugs
  - Substances of abuse

# μF-96 v1.0: January 2016



Funded in part by AstraZeneca as a collaborative effort initiated by Matt Wagoner, with Jay Mettetal and postdoc Aditya Kolli. Now involving Kristin Fabre and Clay Scott, and postdocs Sudhir Deosarkar and Jingwen Zhang.

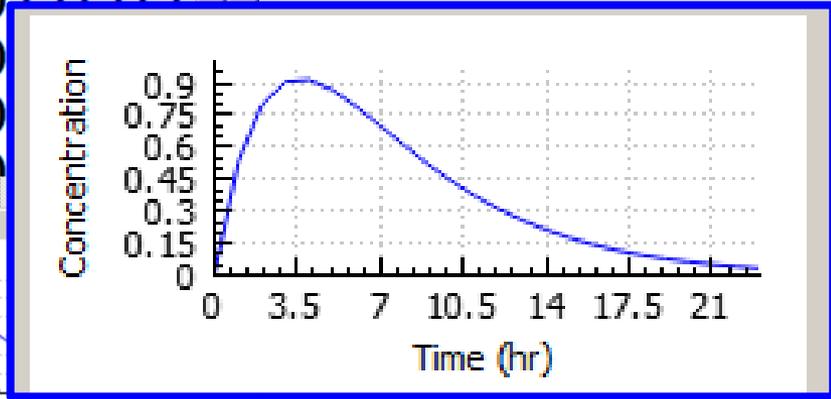


Can individually formulate, deliver, and remove custom media cocktails to each well of a 96-well plate to simulate PK profiles.

# Well Plate Tool



**Challenge:** Develop a tool for configuring and tracking fluid delivery (including PK exposure profiles) to individual wells in a 96-well plate or multiple Organs on Chips.



It is straightforward to adjust PK profiles *in vitro*.

# What can you do with a $\mu$ F-96?



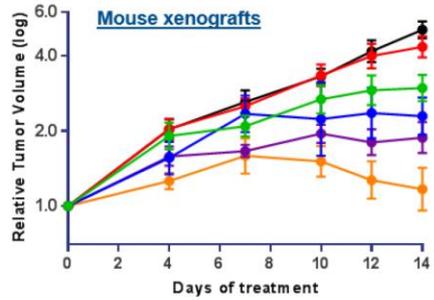
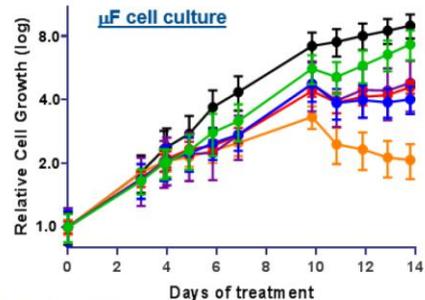
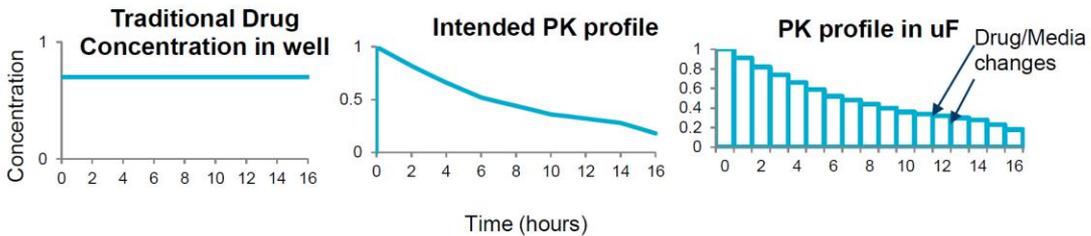
- Use time-division multiplexing to create realistic PK drug-exposure profiles individualized for each and every well in a 96-well-plate HTS assay.

- Conventional cell culture
- Massively parallel organs on chips
- Organoid HTS arrays

24 wells  
18 hours per day for 3 weeks  
1.9 million error free instructions

Emerging data is promising and now we are focussed on increasing model fidelity

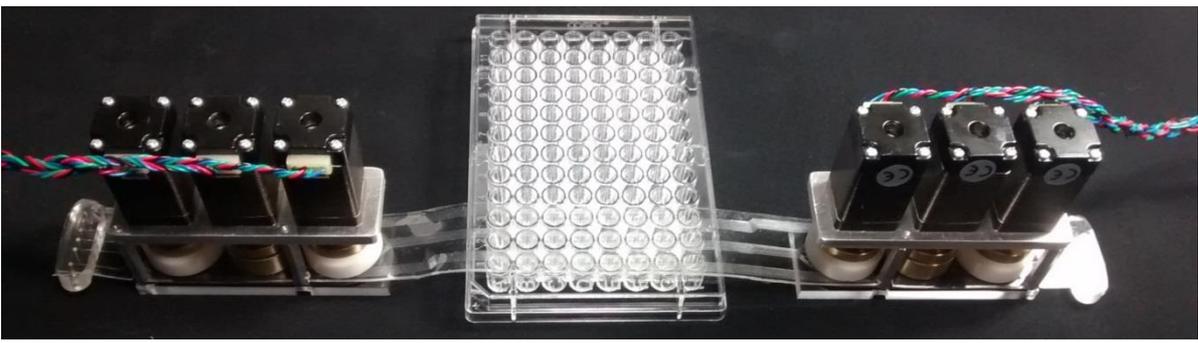
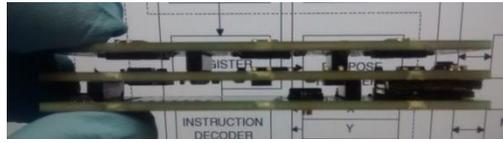
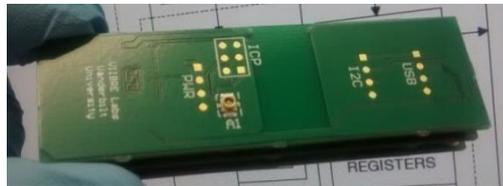
Mimicking in vivo concentrations in vitro using a microformulator ( $\mu$ F)



# 96-Channel MicroFormulator ( $\mu$ F-96), v2.0



- For each well, formulate a custom media/drug mixture in real time.
- Change 10% of the fluid in each well 40x/day.



# Smart Motors

We are developing the next-generation, universal, NEMA-8, three-motor module:

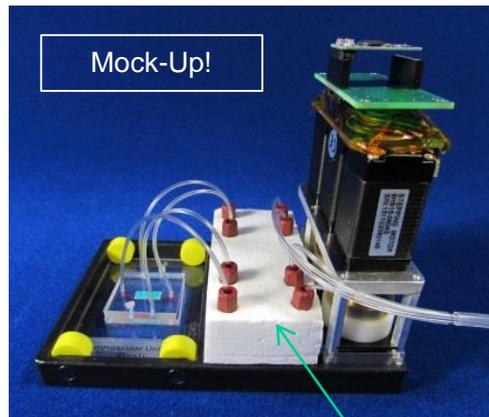
- On-board dedicated TEER
- NVU perfusion controller with a pump for each side of the NVU and a perfusion control valve.
- Independent perfusion, oxygenation, and recirculation for each side.
- Valve select single-pass, recirculation, media injection/removal, osmotic balance, and drug addition
- SmartMotor with five microcontrollers
- Wireless communication will be wireless
- 12 V power
- Battery backup



CFDRC v2.0

NIH National Center for Advancing Translational Sciences

VIIBRE



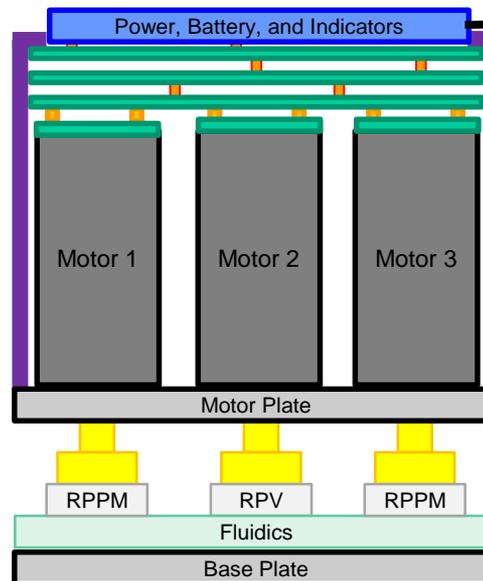
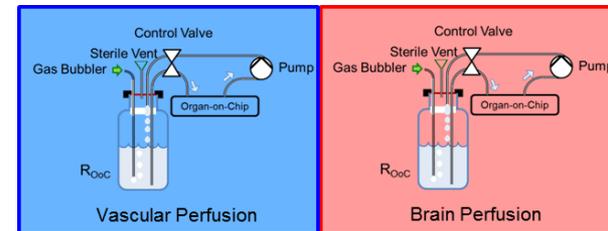
Mock-Up!

TEER

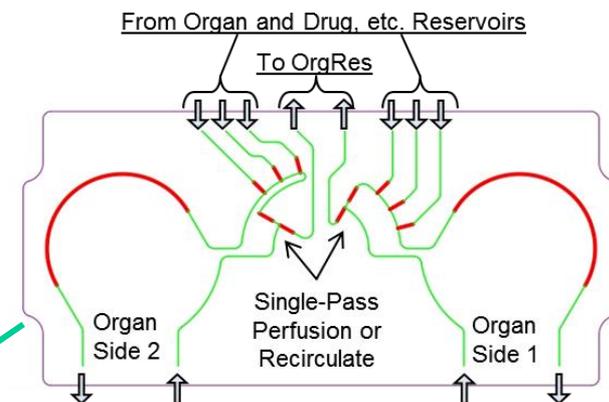
Wireless SmartMotor Controller



Pump Valve Pump

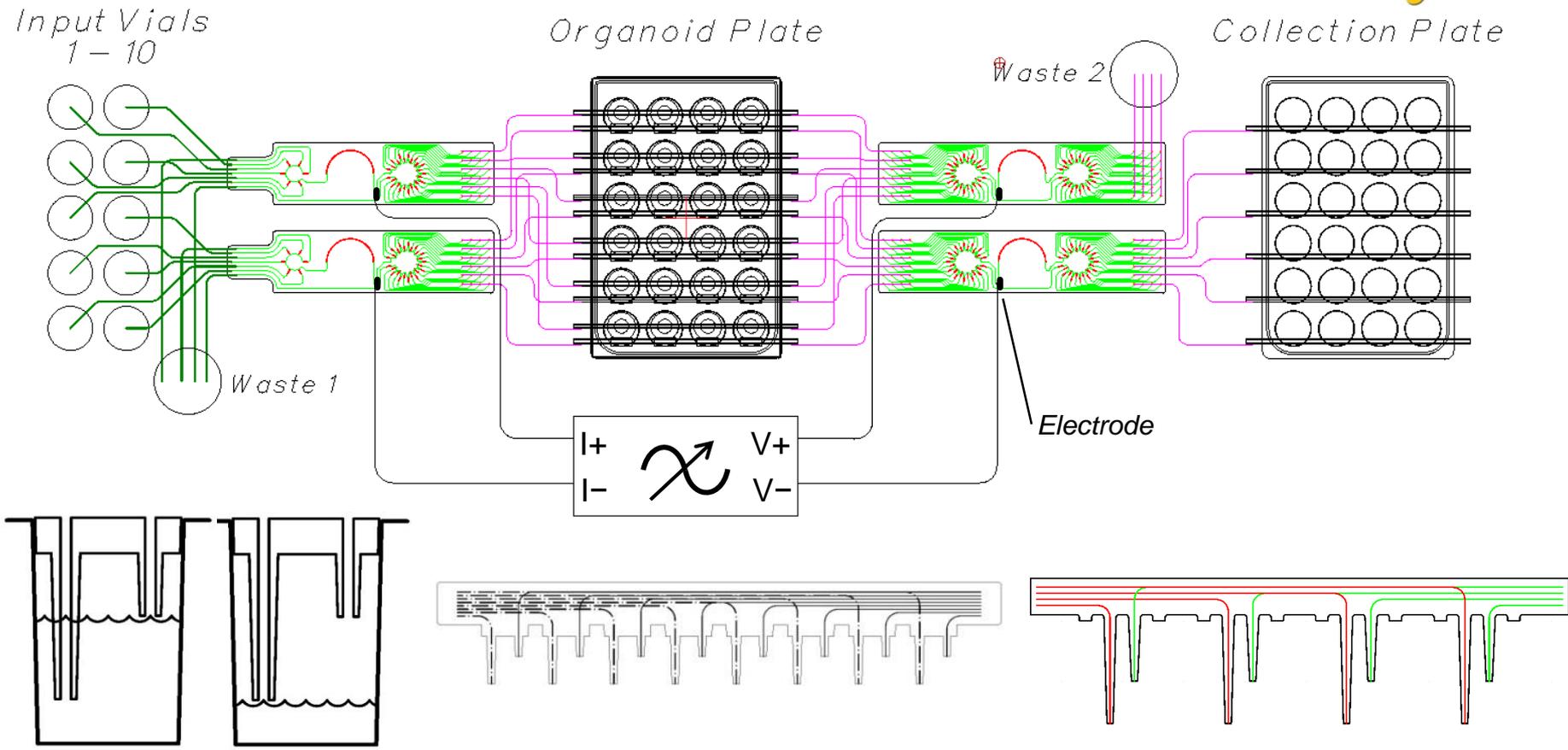


- Wireless communication
- Microcontrollers
- Motor controllers and encoders
- Motor connector



The three NEMA-8 motor unit will simplify production, reduce cost, provide more capabilities, and be better matched to microscopes with large condensers.

# Cartridge Combinations for a 24-well TEER $\mu$ F



- Enables long-term perfusion and sampling of transwell plates
- The fluidic design allows multiplexed TEER measurements
- TEER can provide level verification
- TEER can be measured without removing the plate from the incubator or the lid from the plate
- Fluidics can easily be adapted to any standard plate size up to 96 wells



A team of scientists from Vanderbilt University, led by Professor John Wikswa, have won an R&D 100 Award for their MultiWell MicroFormulator device. The MultiWell MicroFormulator, developed at Vanderbilt and being commercialized by CN Bio Innovations, provides customized real-time formulation, delivery, and removal of cell culture media to each well of a 96-well plate for drug discovery, toxicology research, and personalized medicine. This innovative technology offers a promising alternative to existing fluid-handling systems and greatly reduces the cost and footprint required for long-term cell culture studies. The R&D 100 Awards honor the top 100 most innovative and technologically significant products and advancements each year. Past winners have included the automated teller machine (1973), the liquid crystal display (1980), the Taxol anticancer drug (1993), and HDTV (1998). This is Professor Wikswa's second R&D Award. (VU CTTC announcement)

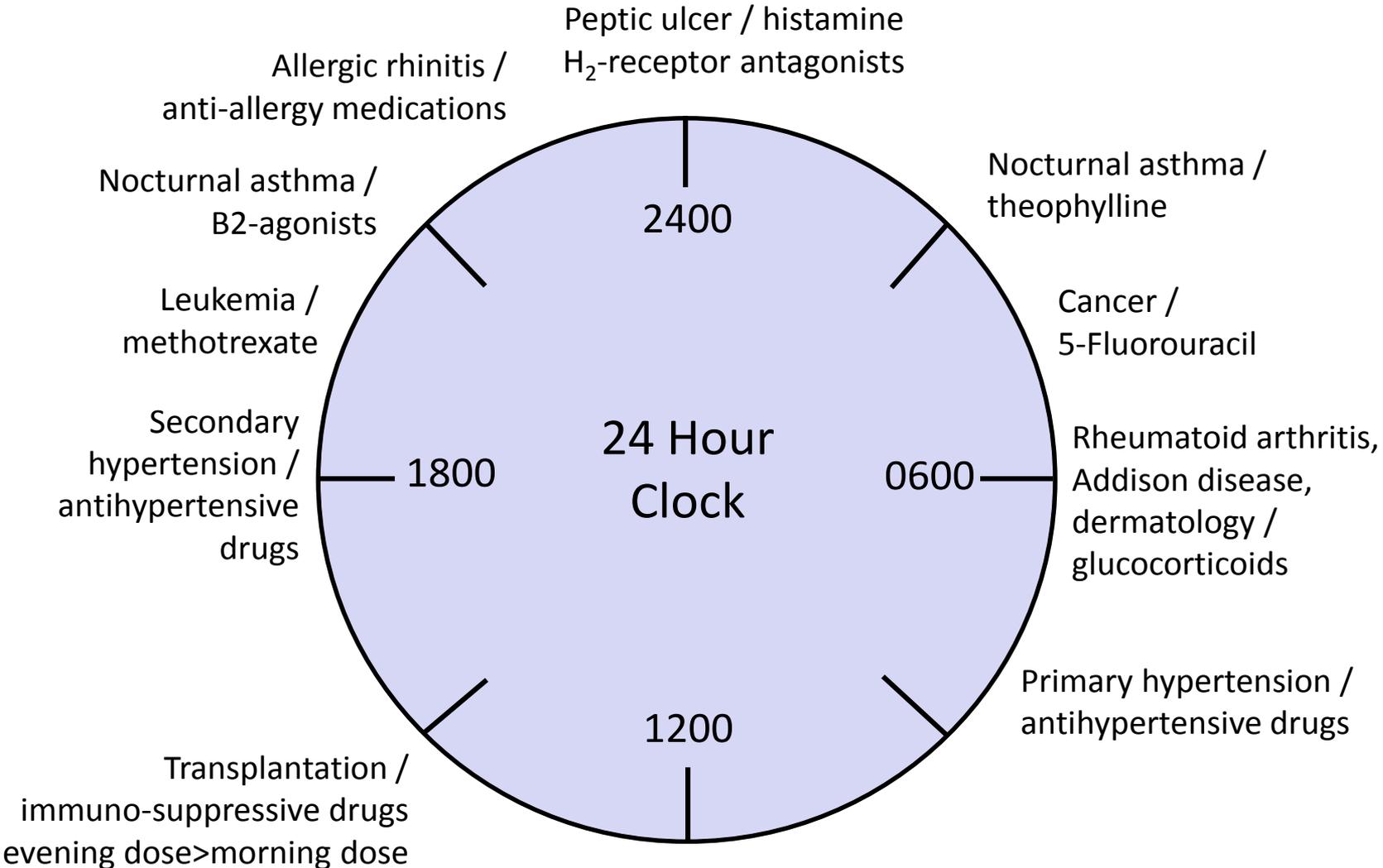
# CN Bio Innovations and the MicroFormulator



# What can you do with a $\mu$ F-96?

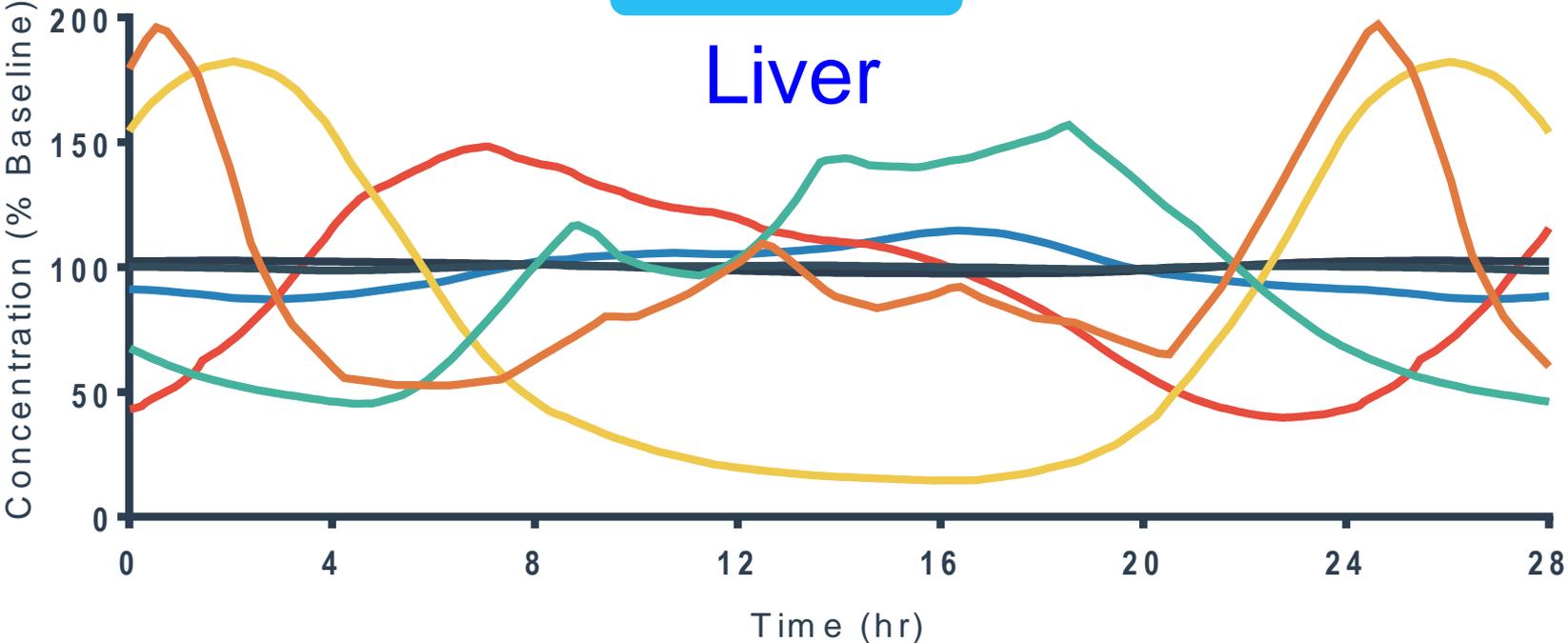
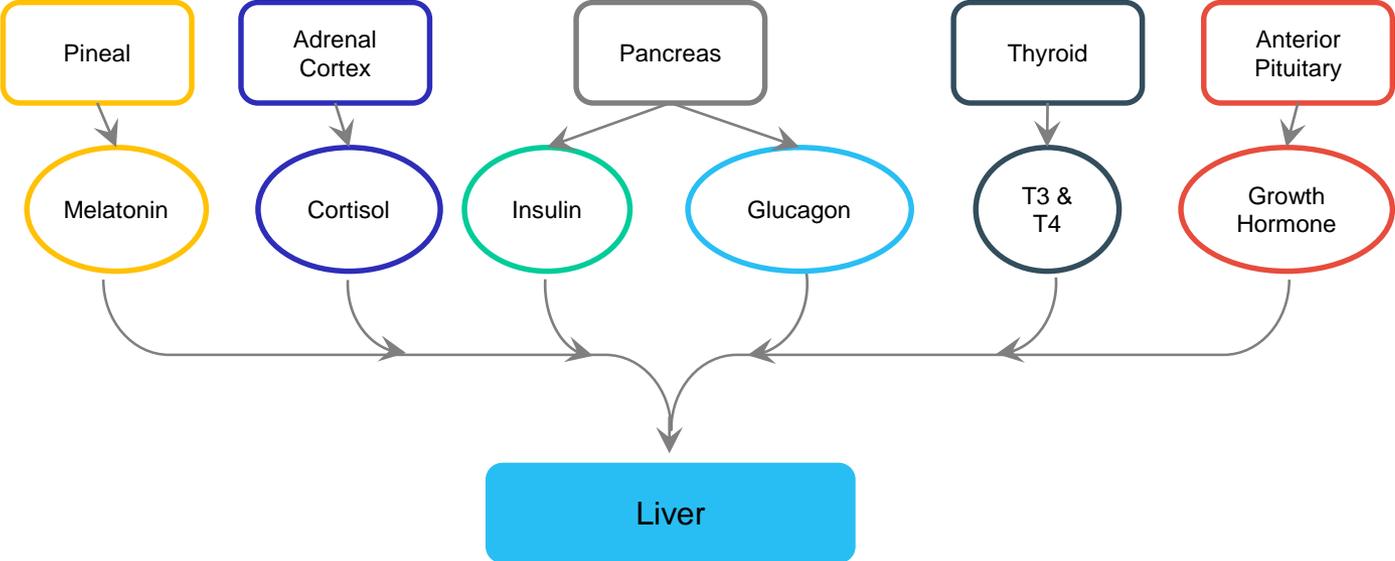
- Use time-division multiplexing to create realistic PK drug-exposure profiles individualized for each and every well in a 96-well-plate HTS assay.
  - Conventional cell culture
  - Massively parallel organs on chips
  - Organoid HTS arrays
    - Hanging drop
    - Transwells
- Create circadian rhythms on a well plate or Petri dish
  - Hormones
  - Nutrients
  - Drugs
  - Substances of abuse
- Explore in a massively parallel manner the multitude of combinations of growth factors and other compounds that are needed to guide iPSC differentiation to specific cellular phenotypes.
  - Readily applicable to organoid developmental biology
  - Suitable for machine learning and automated model inference

# Diseases and Optimal Drug Dosing are Circadian

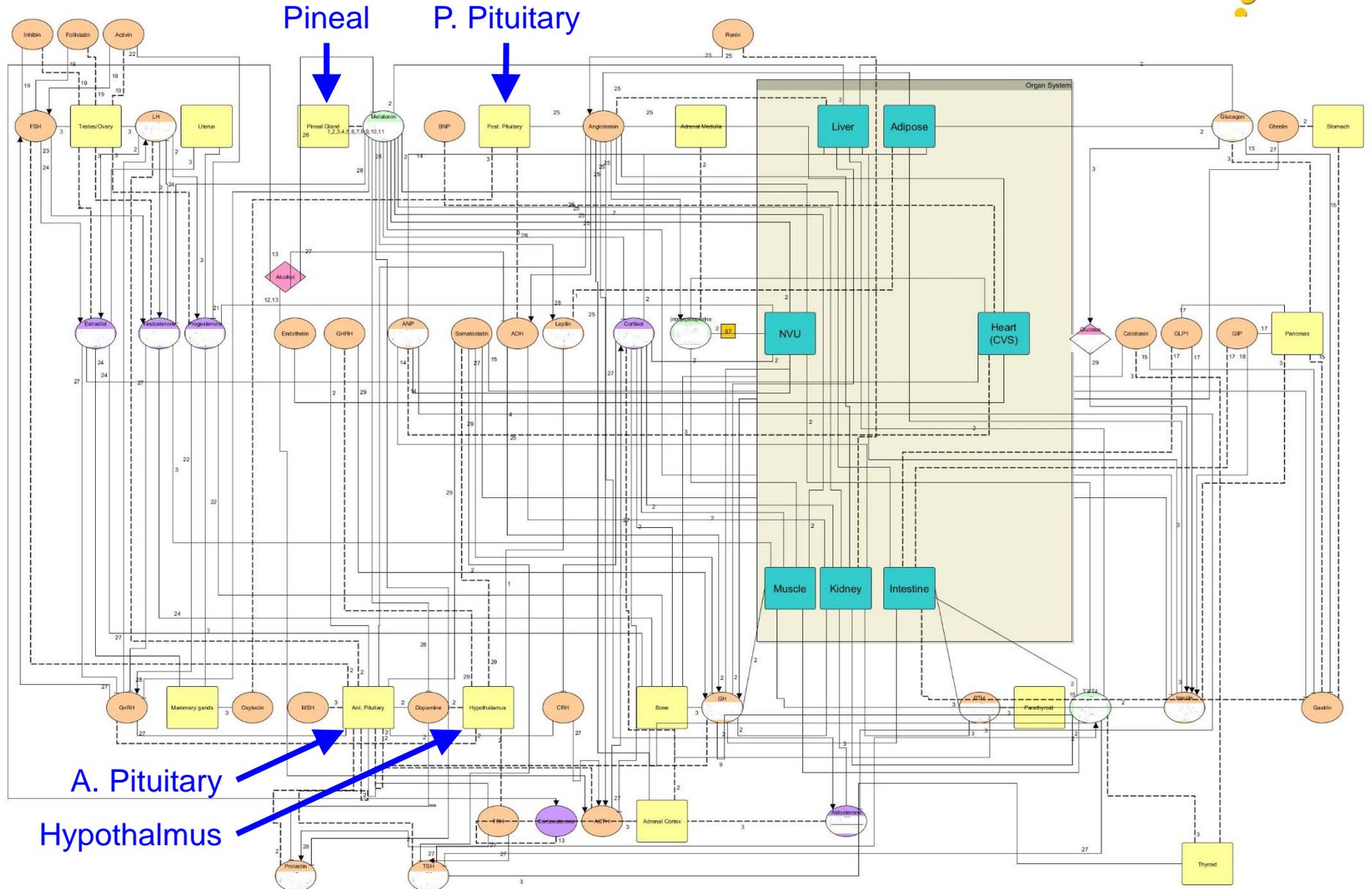


Adapted from Baraldo MD (2008) The influence of circadian rhythms on the kinetics of drugs in humans, Expert Opinion on Drug Metabolism & Toxicology, 4:2, 175-192,

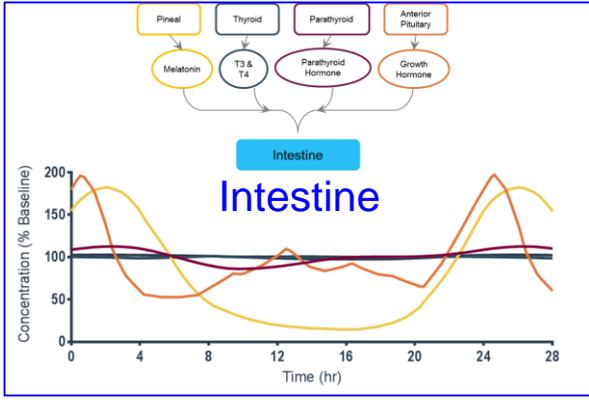
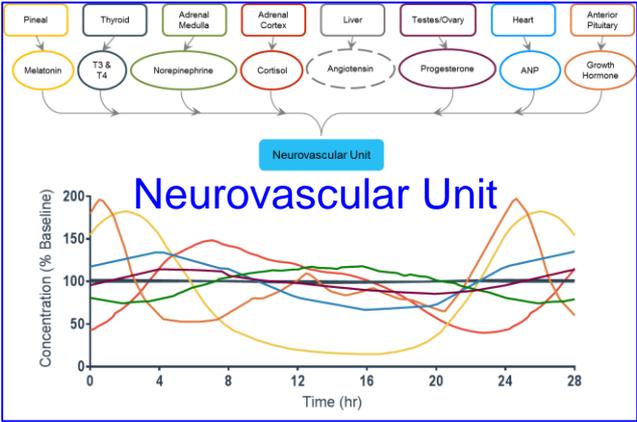
# Diurnal Variations of Liver-Regulating Hormones



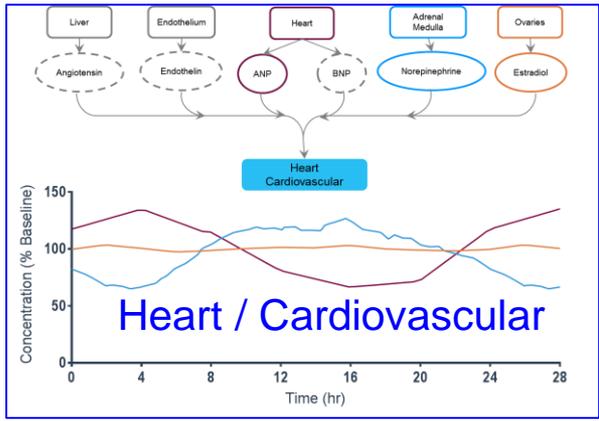
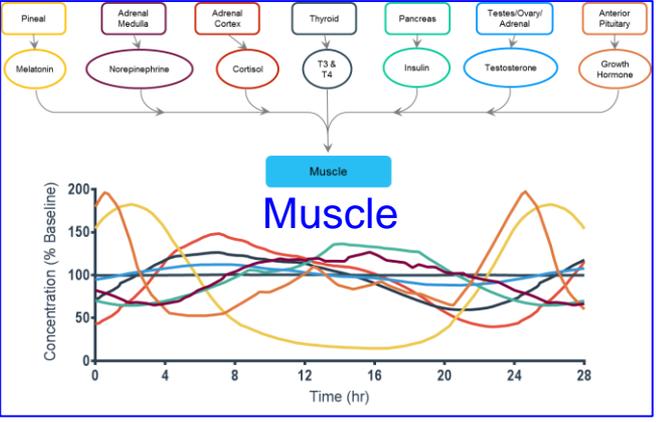
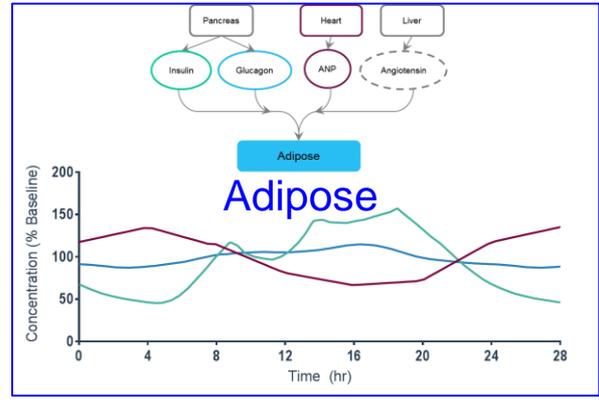
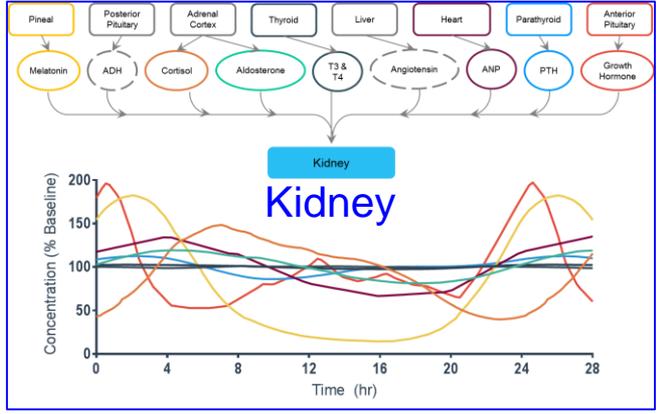
# Which endocrine organs / hormones do we need?



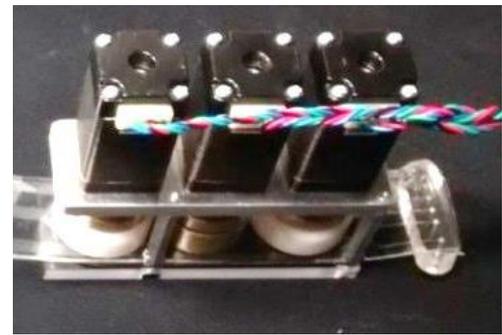
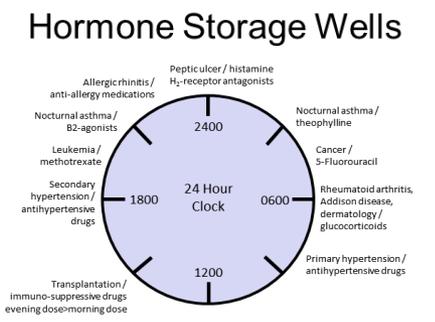
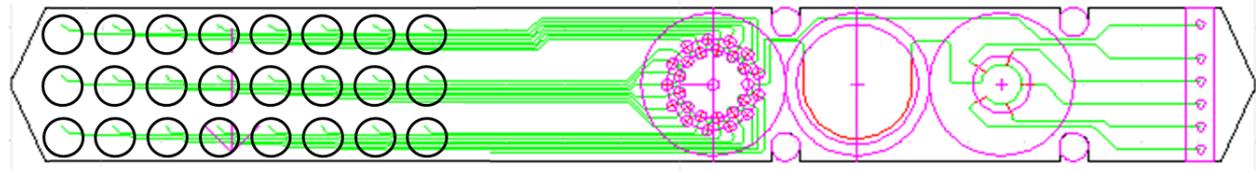
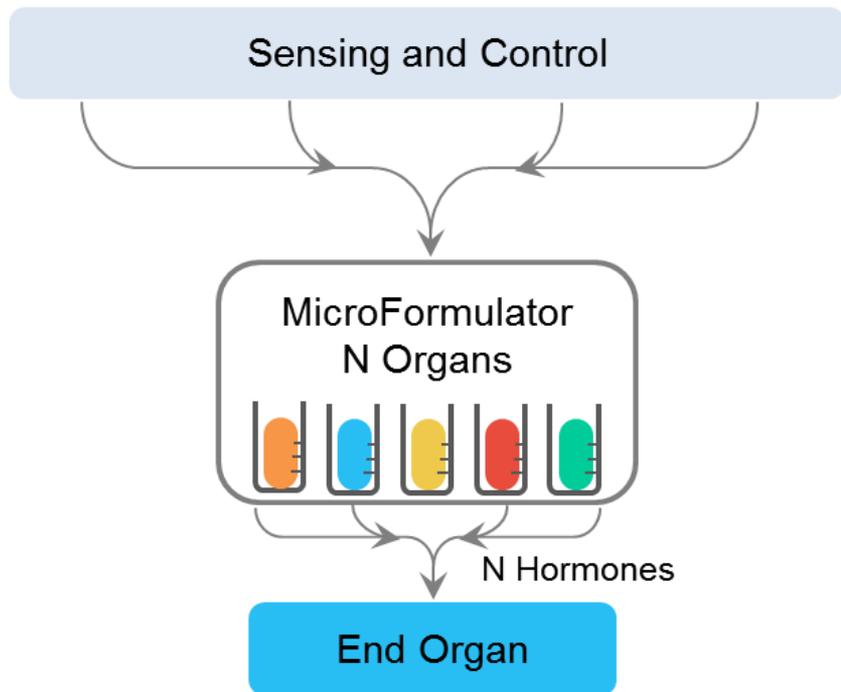
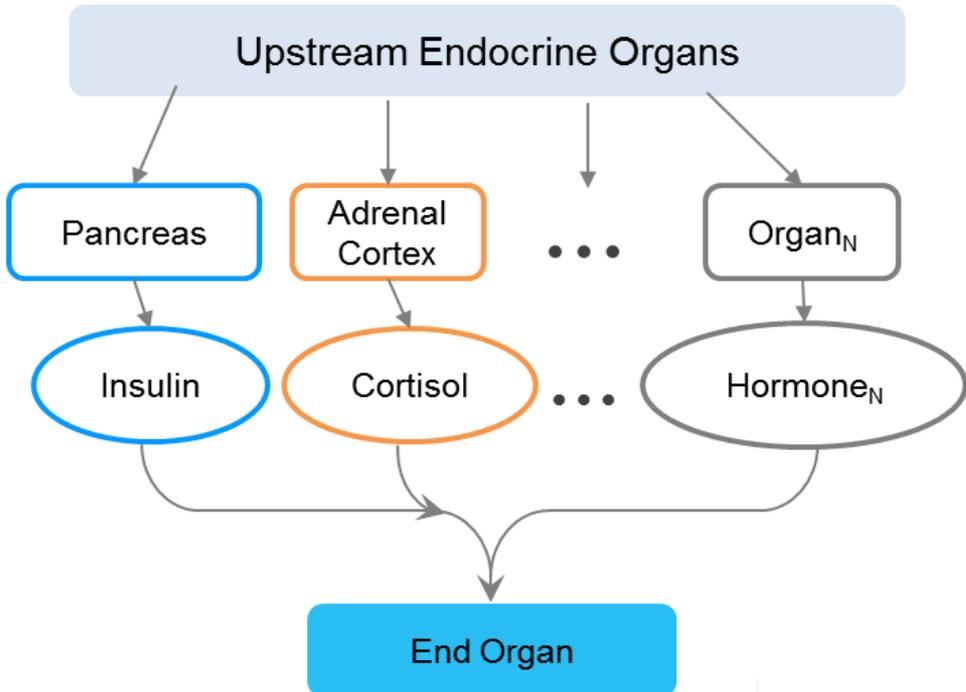
# Diurnal Variations of Organ-Regulating Hormones



- Neurovascular Unit
- Kidney
- Muscle
- Adipose
- Heart / Cardiovascular



# Diurnal Variations of Organ-Regulating Hormones



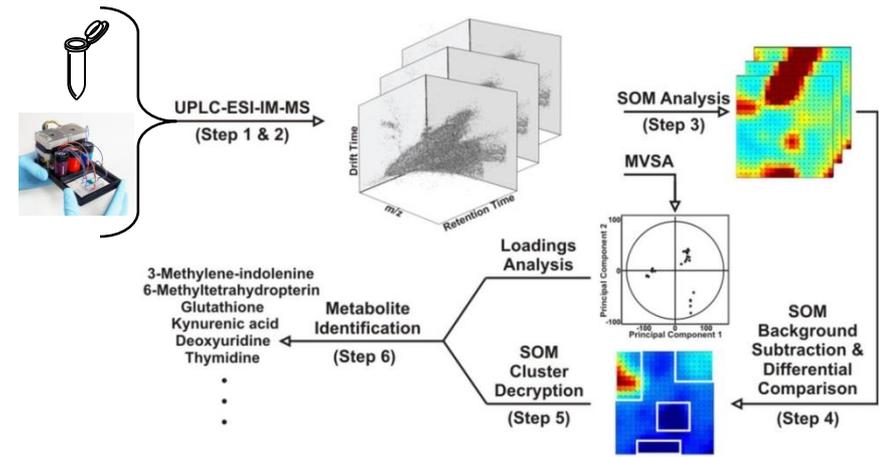
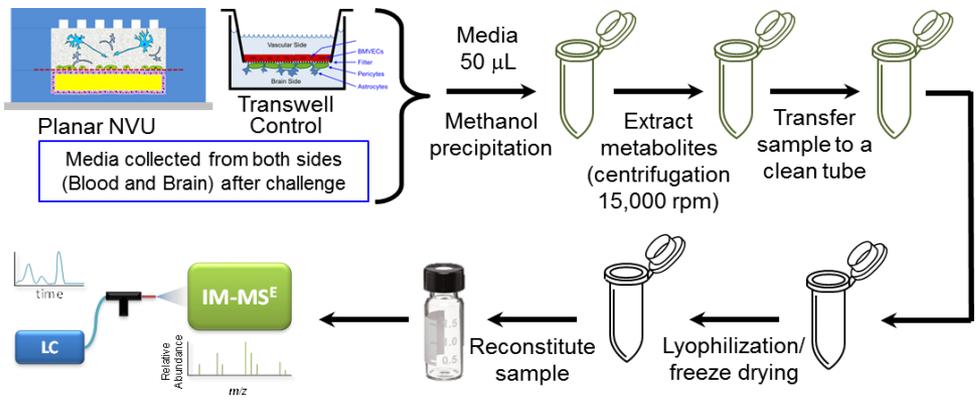
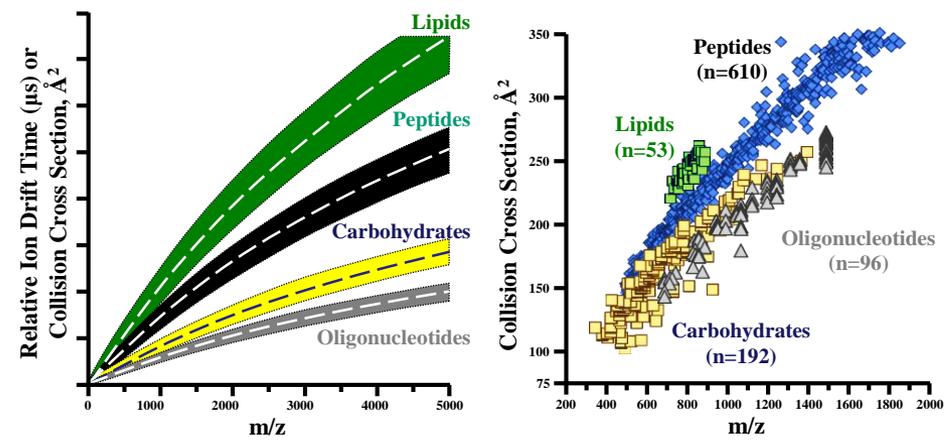
The MicroFormulator can bring diurnal rhythms to biology on plastic.



# Four themes

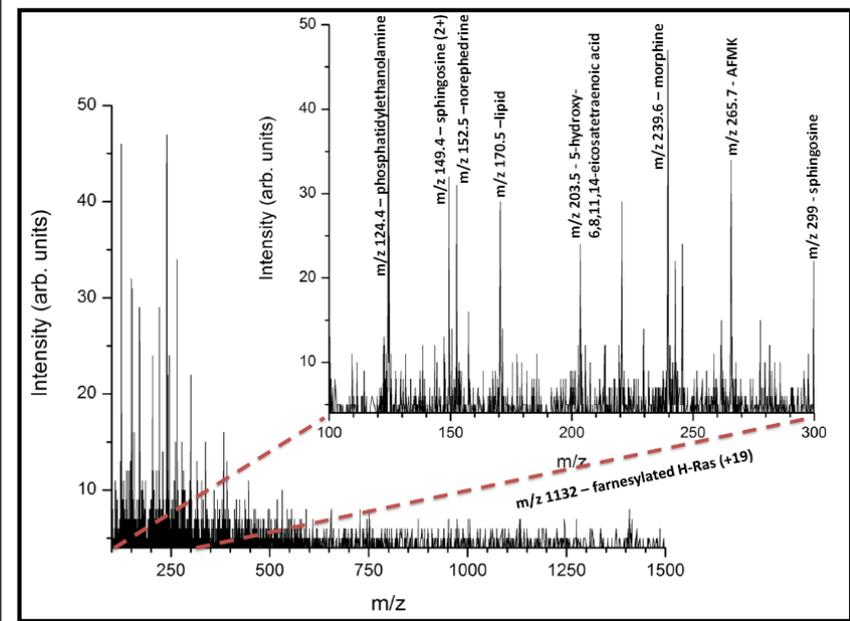
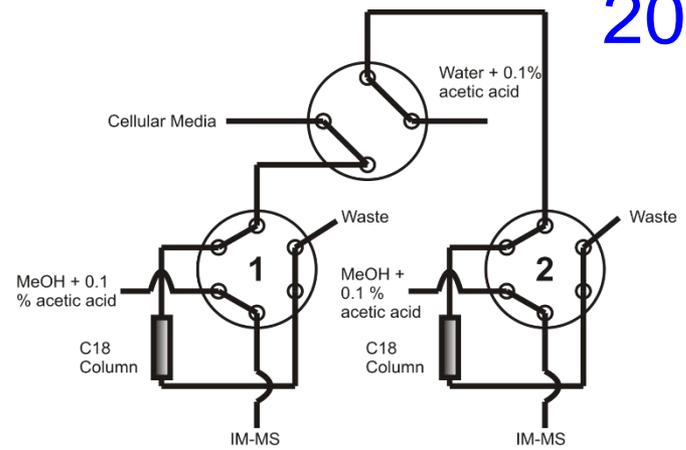
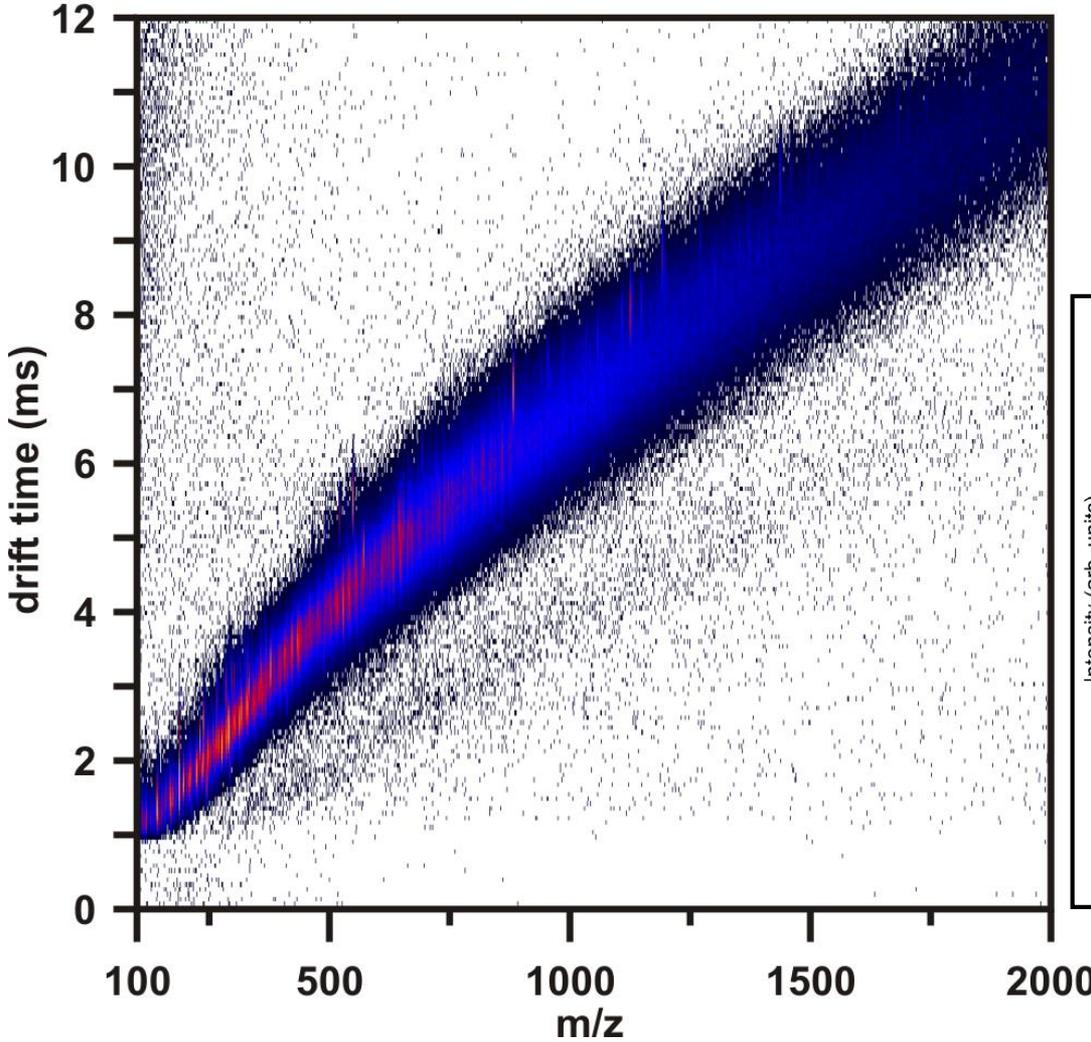
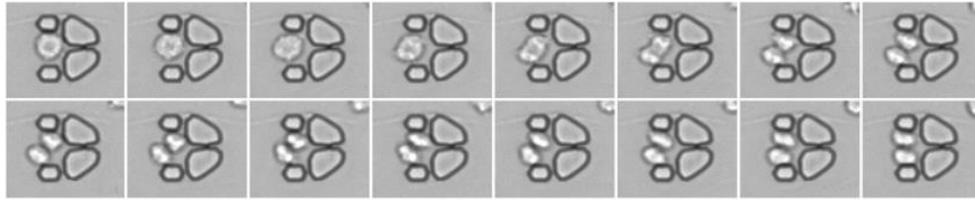
1. The complexity of biology
2. MicroPhysiological Systems
- 3. Multi-Omics**
4. Putting it all together

# Organs-on-chips are matched to UltraPerformance Liquid Chromatography- Ion Mobility-Mass Spectrometry (UPLC-IM-MS)



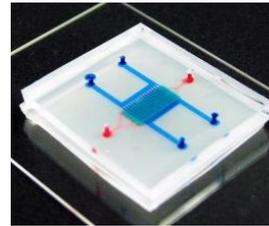
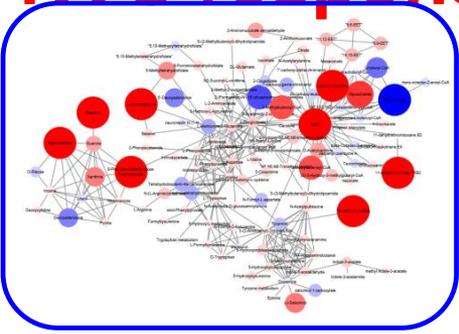
OoC exometabolome can be measured in near-real-time every 10 minutes!

# Real-time desalting enables on-line IM-MS spectra from trapped Jurkat cells

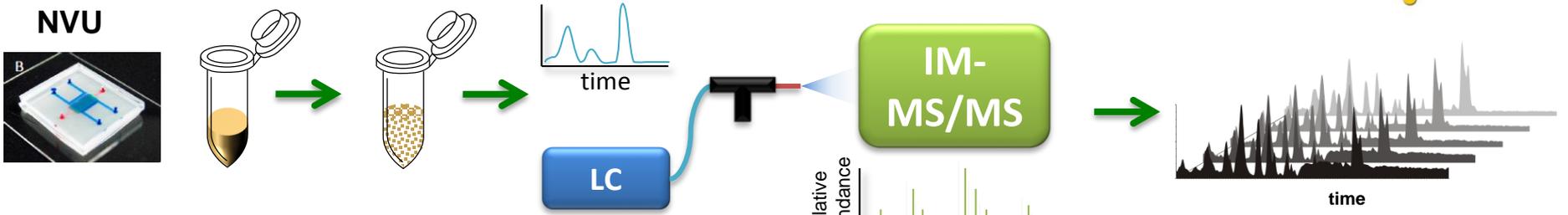


Images from Jeff Enders, Vanderbilt

# NVU response to inflammatory cytokine



# NVU/BBB UPLC-IM-MS workflow

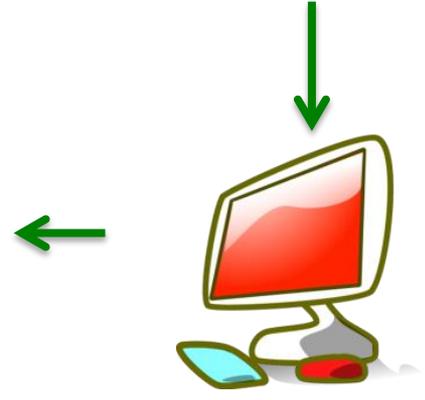
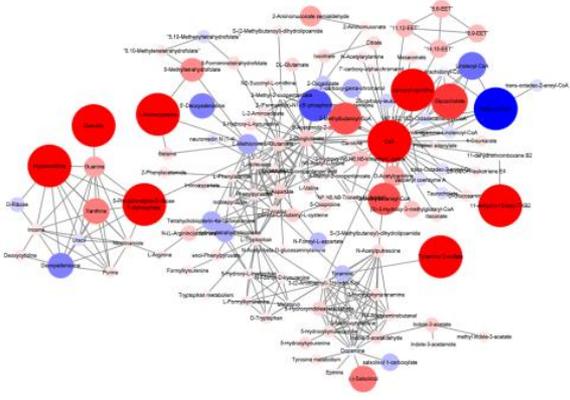


**Sample preparation**  
*metabolites extracted using ice cooled methanol:H<sub>2</sub>O (80:20), incubated -80°C overnight, spun down at 15,000 rpm, 15 min dried down in vacuo*

**Sample Acquisition**  
*LC IM-MS/MS of metabolite extracts*  
*LPS or Cytokine treated samples*

**Data Alignment and Biostatistical Analysis**  
*Progenesis Q1*

Pathways Analysis	p-value
Vitamin E metabolism	8.00E-05
Glutathione Metabolism	1.13E-03
Prostaglandin formation from arachidonate	6.48E-03
Aspartate and asparagine metabolism	9.95E-03
Drug metabolism - cytochrome P450	9.97E-03



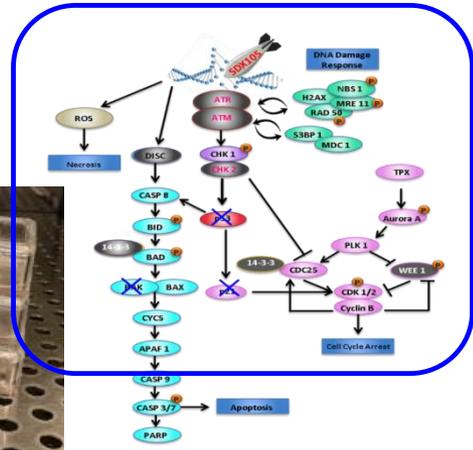
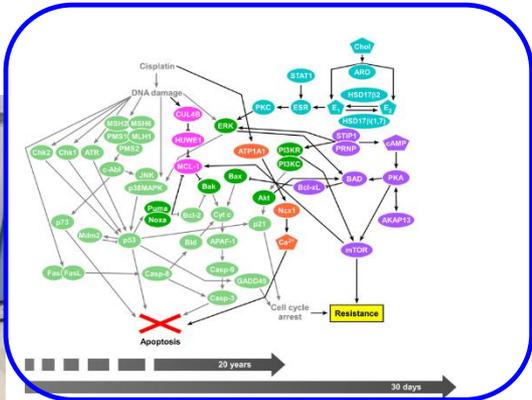
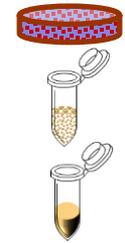
**Network & Pathway Module Output**

**Network and Pathway analysis**  
*Mummichog*

Metabolomic pathway analysis with high mass-accuracy UPLC-IM-MS is accelerating the incorporation of untargeted metabolomics into mechanism of action studies.

# MultiOmic Mechanism of Action

**VI***BRE*



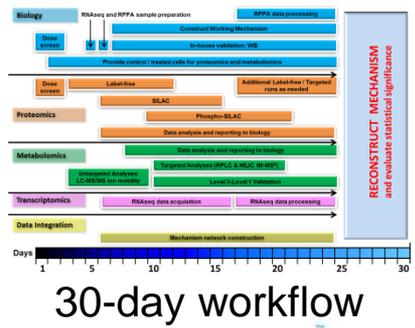
# Rapid Threat Assessment (RTA) of MoA



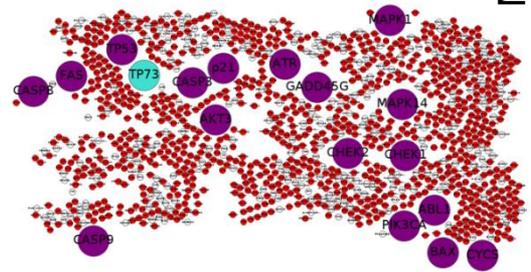
Richard Caprioli, PI, DARPA W911 NF-14-2-0022.

**Objective:** Use multiomics to characterize drug and toxin Mechanism of Action (MoA) in 30 days or less.

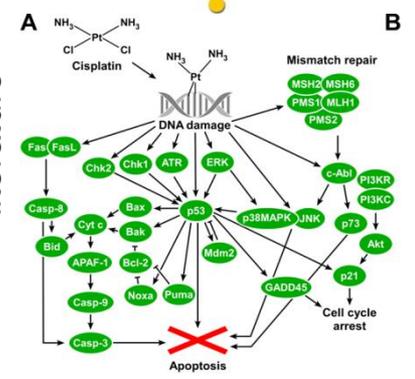
**Challenge 1:** A549 cells treated with 50 μM cisplatin for 1, 6, 24 and 48 h. MS proteomics (mudpit, SILAC, phospho-proteomics), IM-MS metabolomics, RNAseq, etc.



- 254,296 total features
- 55,898 unique species
- 13,483 (24%) species significantly changed



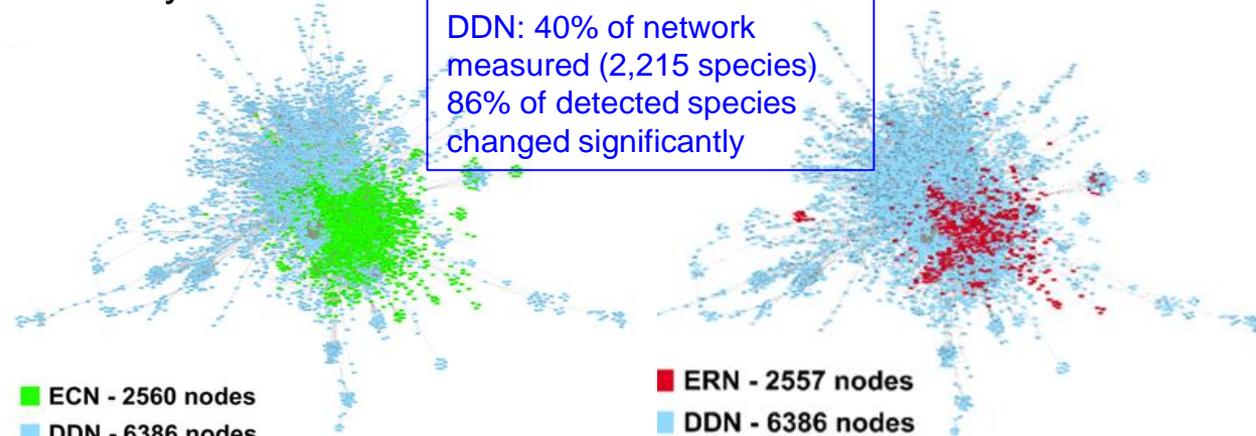
Canonical Cisplatin MoA Siddik 2003 plus literature



- Canonical Species, Detected
- Canonical Species, Not detected
- Expanded Canonical Species, Detected
- Expanded Canonical Species, Not detected

Expanded Canonical, Pino et al., in preparation

DDN: 40% of network measured (2,215 species)  
86% of detected species changed significantly

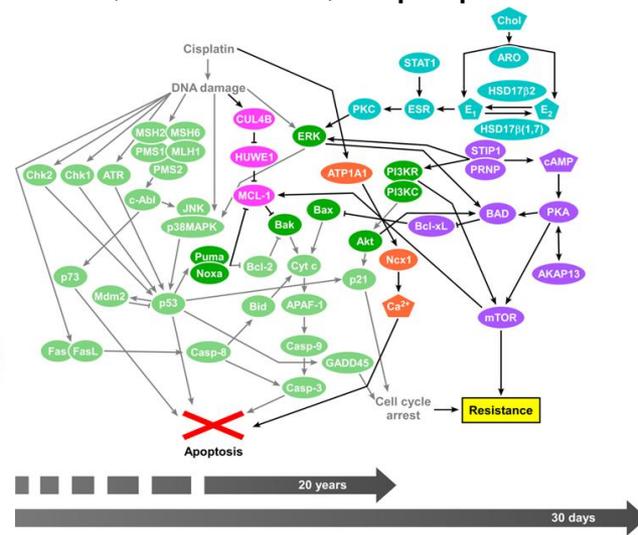


■ ECN - 2560 nodes  
■ DDN - 6386 nodes

■ ERN - 2557 nodes  
■ DDN - 6386 nodes

**Expanded Canonical vs Data Driven Network**

**Expanded Resistance vs Data Driven Networks**



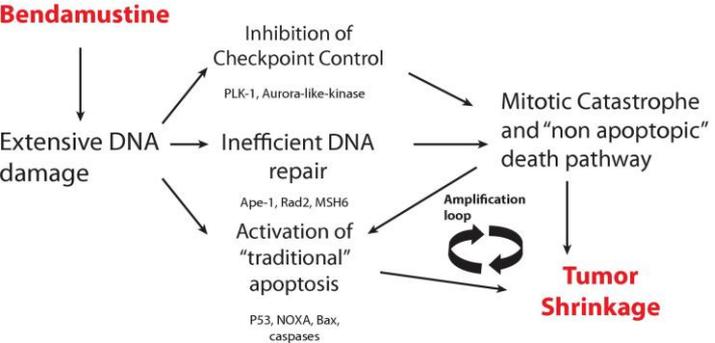
**New Canonical Cisplatin MoA**  
Norris et al., J. Proteome Res. 2017

Time-resolved omni-omics has great potential!

# RTA – Bendamustine MoA



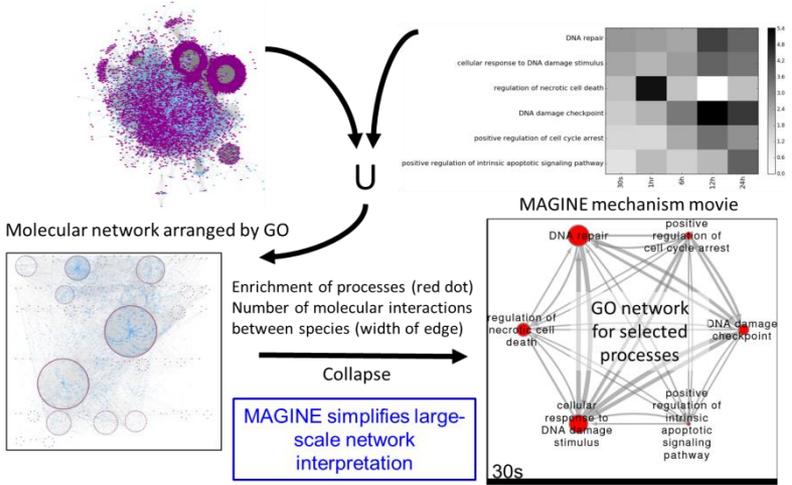
## Known Mechanism of Action of Bendamustine



Leoni and Hartley, Seminars in Hematology (2011)

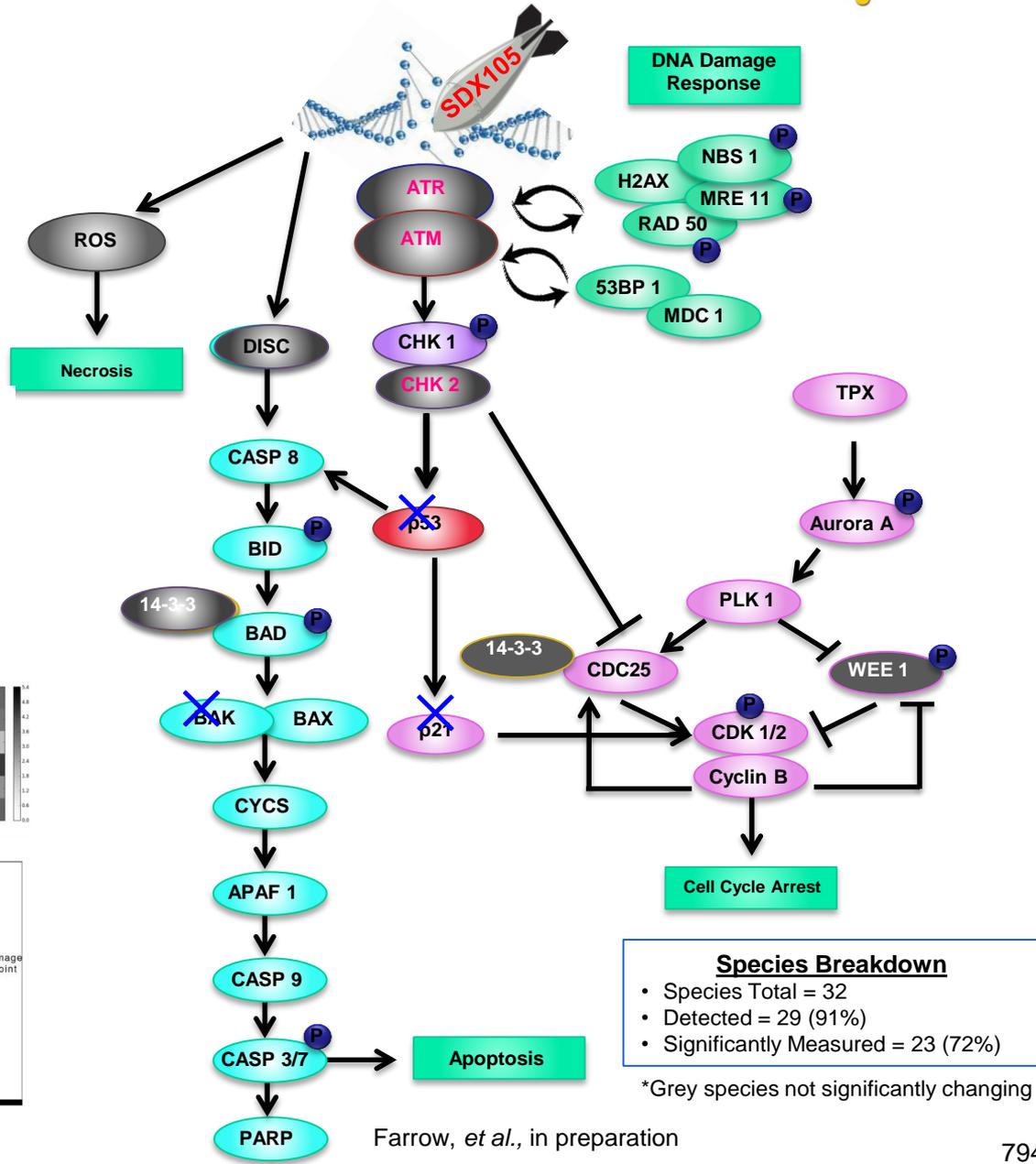
## Vanderbilt RTA 2<sup>nd</sup> 30-day Challenge

- Acquire 781,072 features spanning 12 time points and 7 platforms
- How do we extract and integrate knowledge from these data?



Pino, et al., in preparation

## Vanderbilt-RTA Postulated Mechanism of Action



**Species Breakdown**

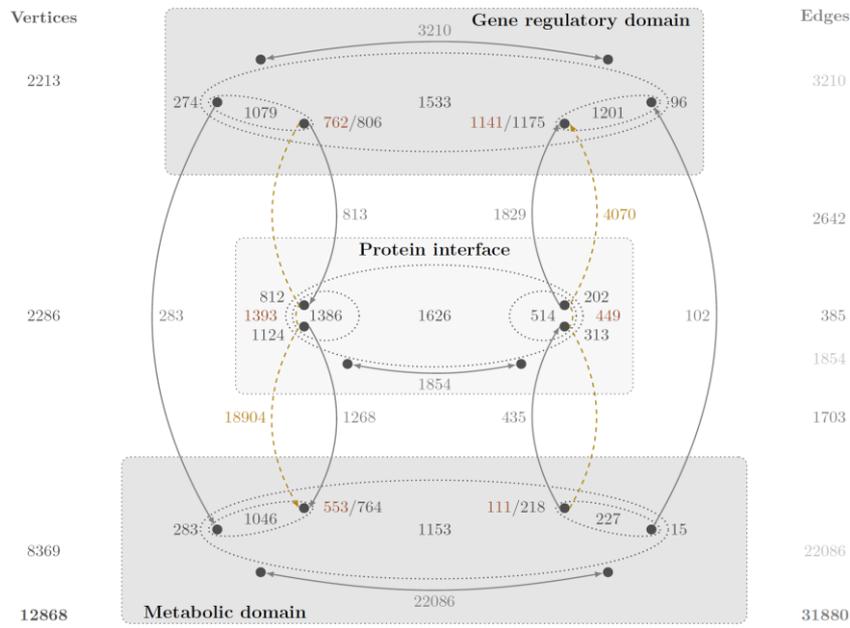
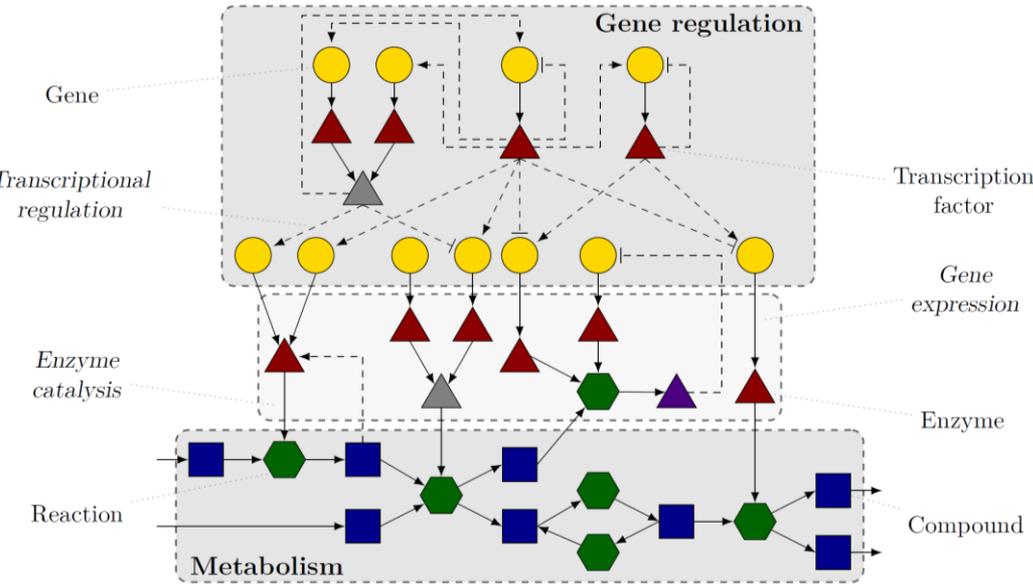
- Species Total = 32
- Detected = 29 (91%)
- Significantly Measured = 23 (72%)

\*Grey species not significantly changing

Farrow, et al., in preparation

**The challenge is to merge genetic,  
proteomic and metabolomics networks**

# E. Coli Gene-Enzyme-Metabolism



Encoding and reaction-associated

Regulatory

Genes

Protein monomers

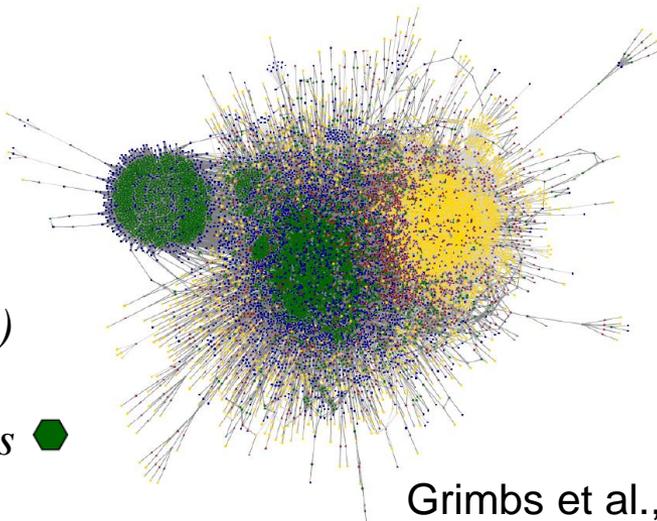
Protein complexes

(mainly transcription factors)

small molecules

catalyzing biochemical reactions

modified proteins



Vertex composition

- Reaction
- Compound
- Gene
- ▲ Protein monomer
- ▲ Protein-protein complex
- ▲ Protein-compound complex
- ▲ Protein-RNA complex

Grimbs et al., arXiv 1803.05429v1. 2018.

It is feasible to link the genome, proteome, and metabolome!

# HL-60 methotrexate gene-enzyme-metabolism linked to phosphatidylinositol signaling system



Enzyme Classes\*

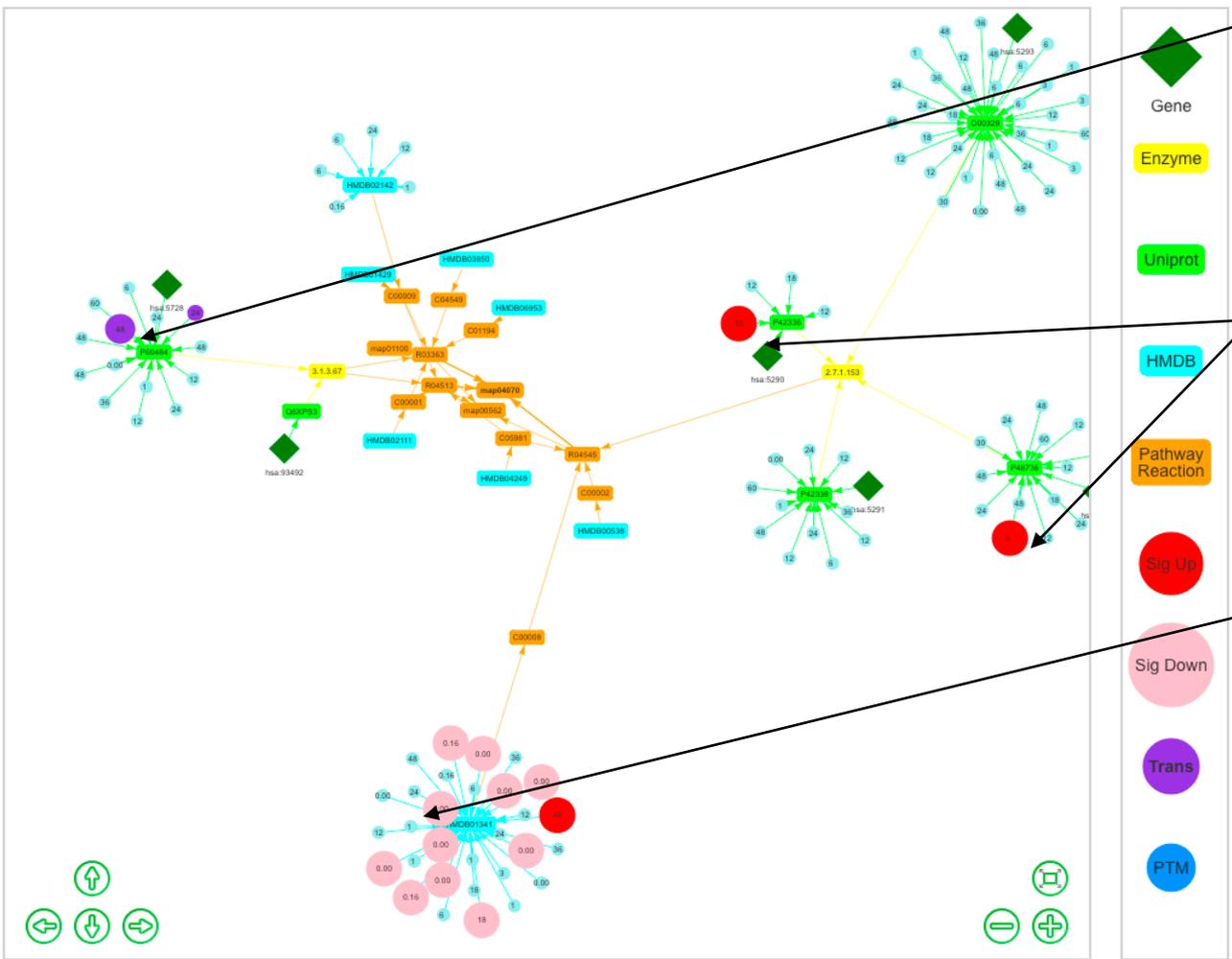
Get Enzymes

Enzymes\*

Get Enzyme Network

Cluster  
 Expand All Uniprot  
 Expand All HMDB

Selected Node  
 Labels:  
 Pathway  
 Properties:  
 keggid map04070  
 name Phosphatidylinositol signaling system  
 Show Kegg



Observed translocation event at 24 hr and 48 hr time points

Observed significant up regulations at 6 hr and 30 hr time points

Observed significant up regulation in metabolite at 48 hr time point

Tina Tsui



# Four themes

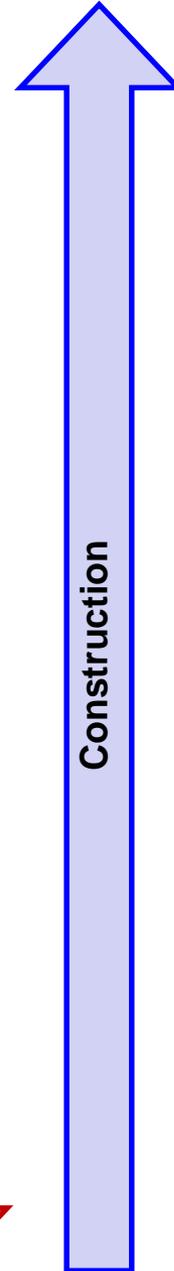
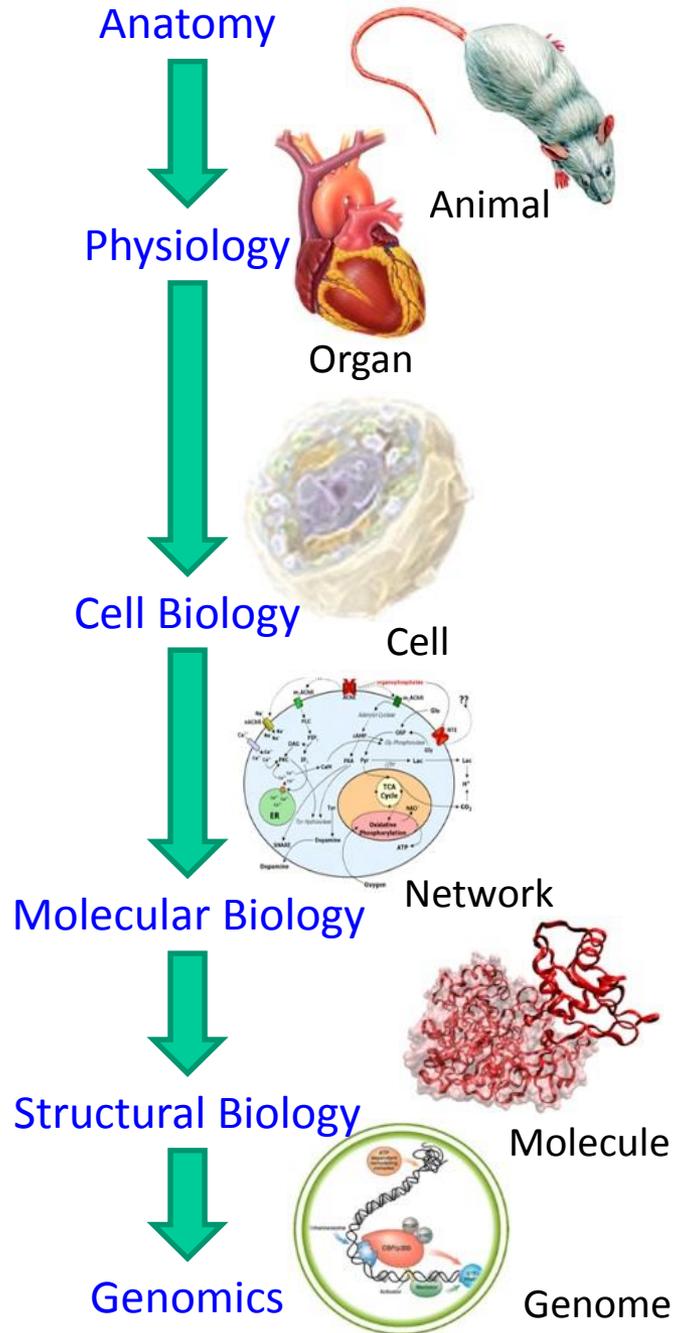
1. The complexity of biology

2. MicroPhysiological Systems

3. Multi-Omics

**4. Putting it all together**

# The Hermeneutic Circle of Biology



Standard biology and medicine

Does this create a problem?

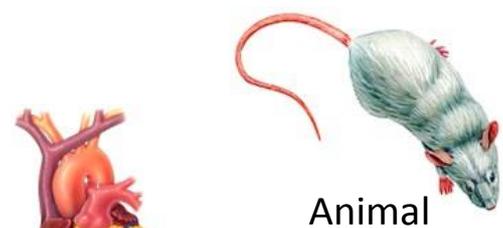
Systems Biology

JP Wikswo. The relevance and potential roles of microphysiological systems in biology and medicine. *Exp.Biol.Med.* 239:1061-1072, 2014.

JP Wikswo and AP Porter, *EBM*, 2015

**Today**

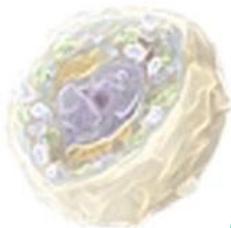
Anatomy  
↓  
Physiology  
↓  
Cell Biology  
↓  
Molecular Biology  
↓  
Structural Biology  
↓  
Genomics



Animal



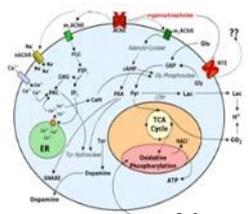
Organ



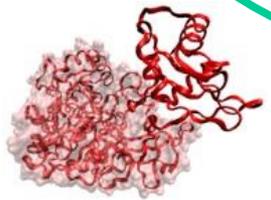
Cell

1960s

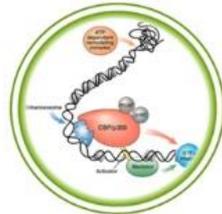
Post-Genomic,  
Post-Proteomic  
Biology and Tissue  
Engineering



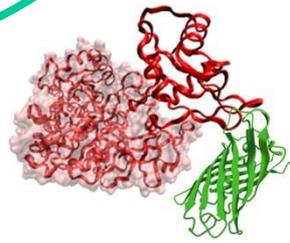
Network



Molecule

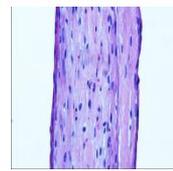


Genome

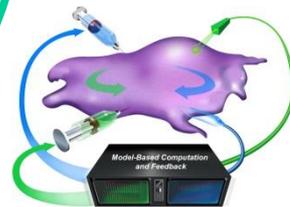


Engineered  
Molecules

2014



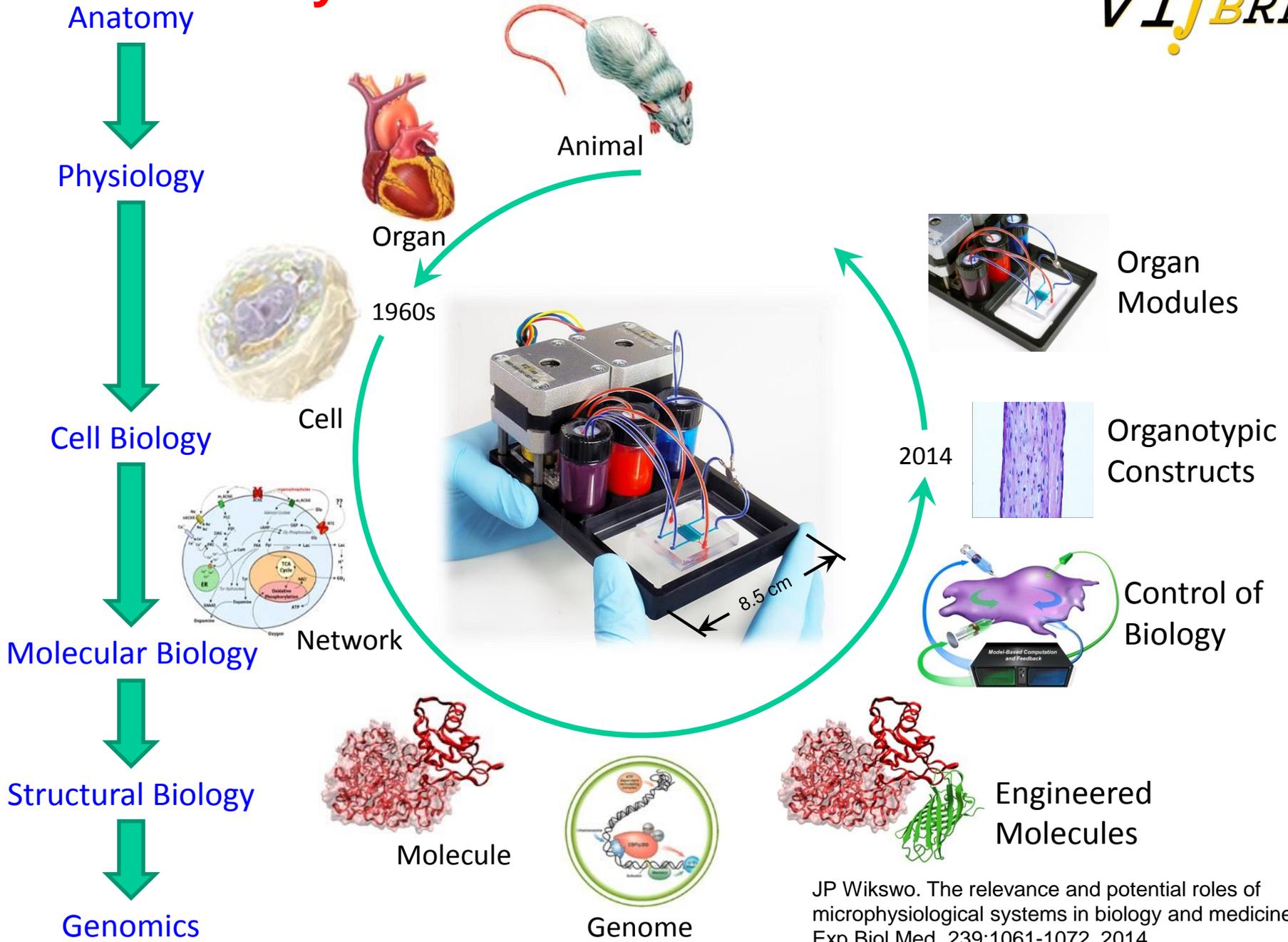
Organotypic  
Constructs



Control of  
Biology

JP Wikswo. The relevance and potential roles of microphysiological systems in biology and medicine. *Exp.Biol.Med.* 239:1061-1072, 2014.

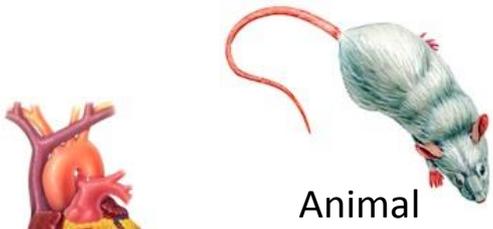
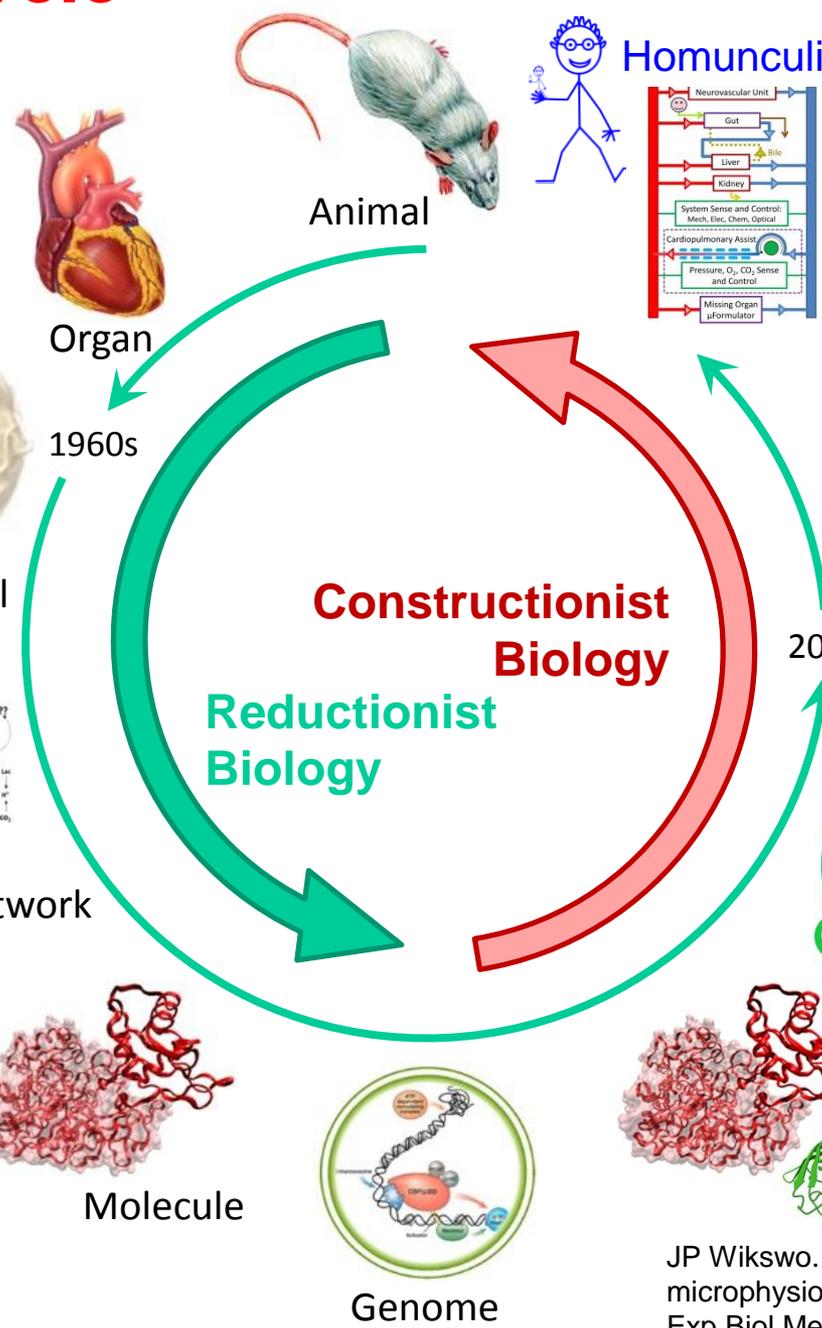
# The next five years



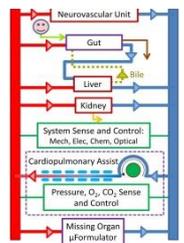
JP Wikswo. The relevance and potential roles of microphysiological systems in biology and medicine. *Exp.Biol.Med.* 239:1061-1072, 2014.

# Closing the Circle

Anatomy  
↓  
Physiology  
↓  
Cell Biology  
↓  
Molecular Biology  
↓  
Structural Biology  
↓  
Genomics



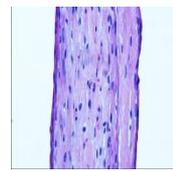
Homunculi!



Coupled Human Microphysiological Systems  
Tomorrow

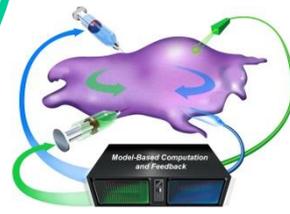


Organ Modules



Organotypic Constructs

2014

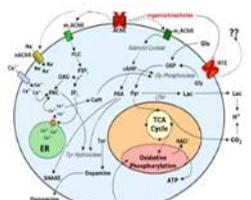


Control of Biology

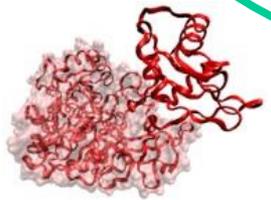


1960s

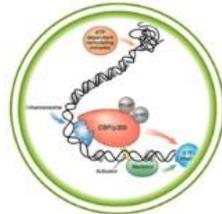
Cell



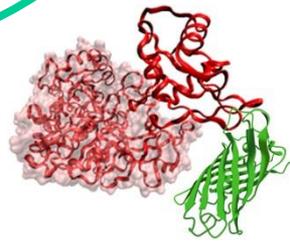
Network



Molecule



Genome

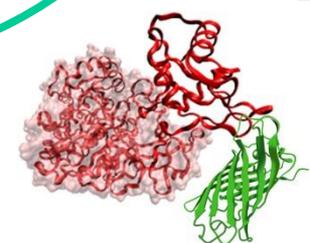
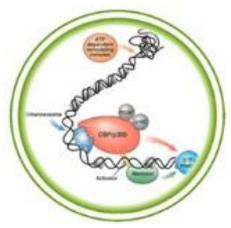
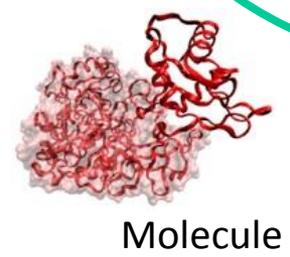
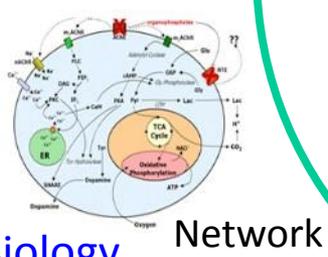
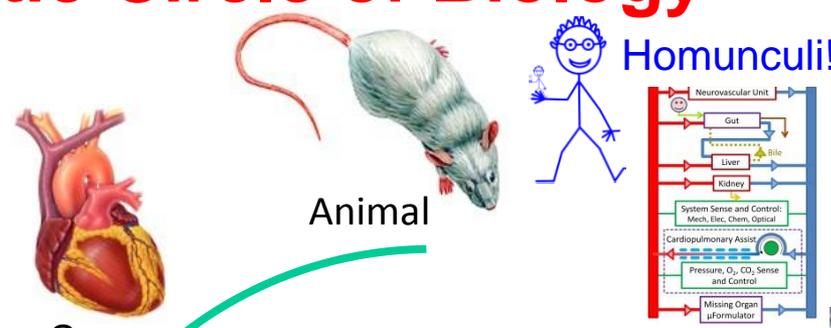


Engineered Molecules

JP Wikwo. The relevance and potential roles of microphysiological systems in biology and medicine. Exp.Biol.Med. 239:1061-1072, 2014.

# The Hermeneutic Circle of Biology

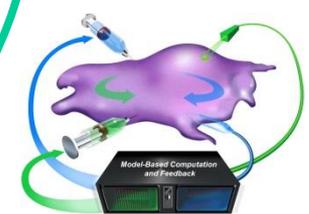
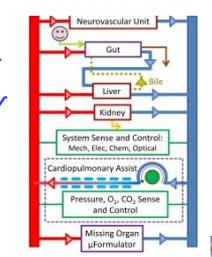
Anatomy  
↓  
Physiology  
↓  
Cell Biology  
↓  
Molecular Biology  
↓  
Structural Biology  
↓  
Genomics



1960s

2014

You cannot understand the whole without understanding the parts, and you cannot understand the parts without understanding the whole.



JP Wikwo. The relevance and potential roles of microphysiological systems in biology and medicine. *Exp.Biol.Med.* 239:1061-1072, 2014.

# Experimental Biology and Medicine

Vol. 239 | No. 10 | October 2014  
ISSN 1535-3702

A Journal Dedicated to the Publication of Multidisciplinary  
and Interdisciplinary Research in the Biomedical Sciences

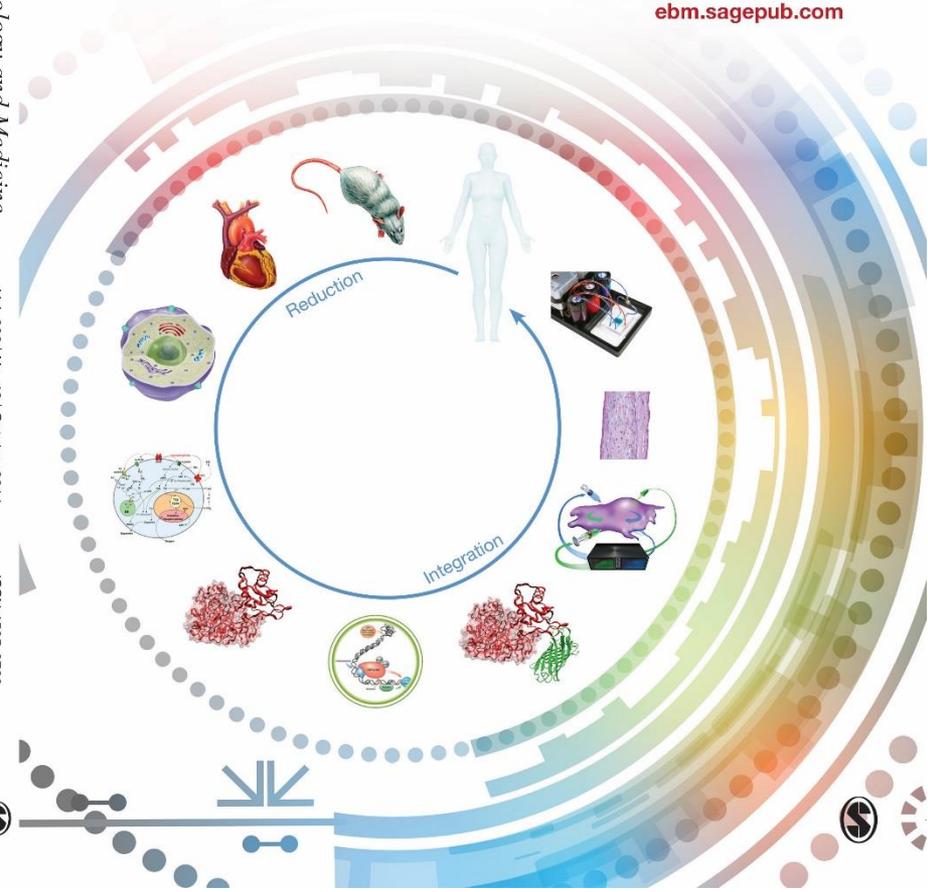
[ebm.sagepub.com](http://ebm.sagepub.com)

Experimental Biology and Medicine

Vol. 239 | No. 10 | October 2014

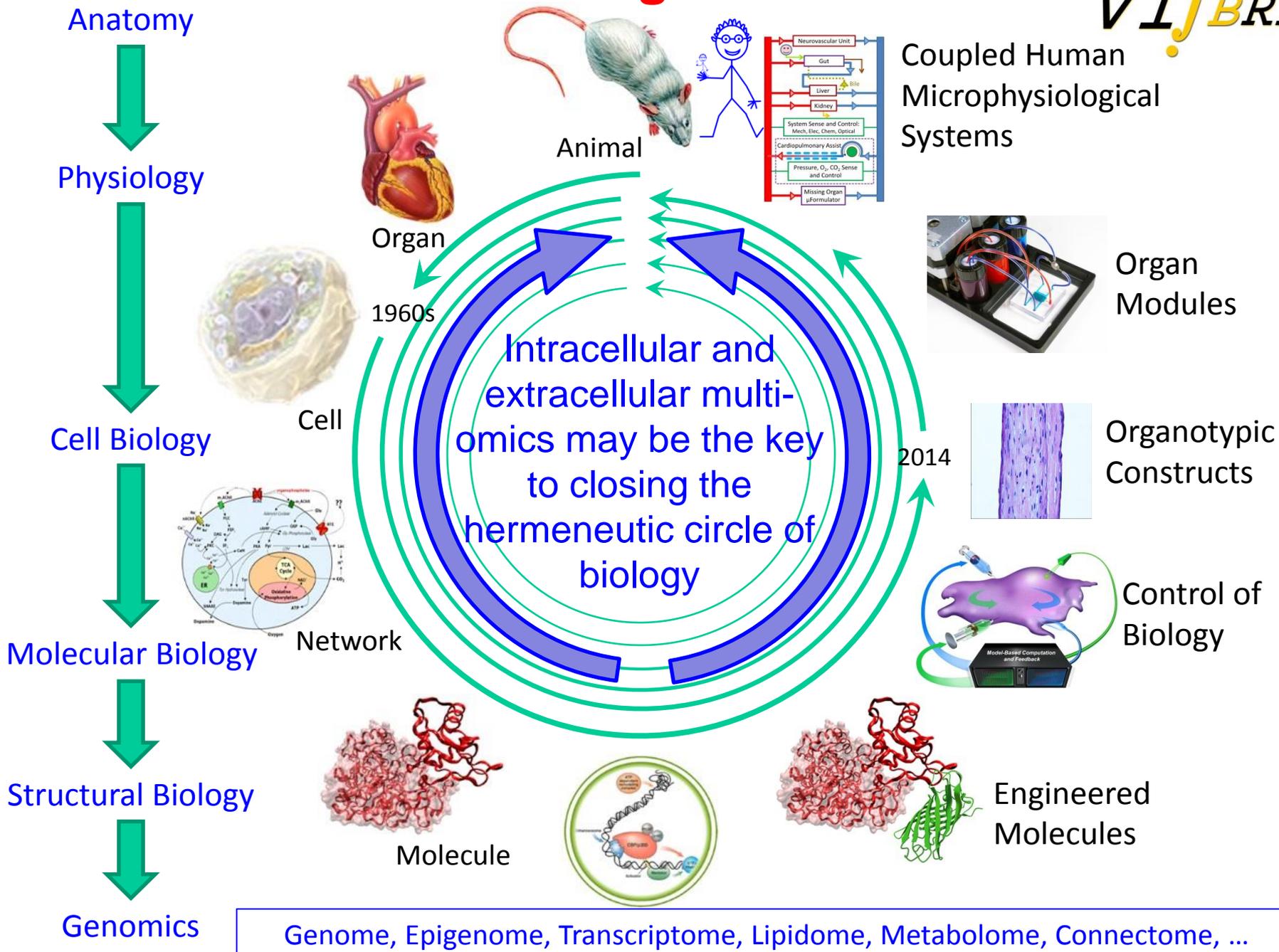
ISSN 1535-3702

- Anatomy/Pathology
- Physiology
- Endocrinology and Nutrition
- Pharmacology and Toxicology
- Biochemistry and Molecular Biology
- Bioimaging
- Cell and Developmental Biology
- Immunology/Microbiology/Virology
- Neuroscience
- Genomics/Proteomics/Bioinformatics
- Systems Biology
- Stem Cell Biology
- Biomedical Engineering
- Bionanoscience
- Translational Research

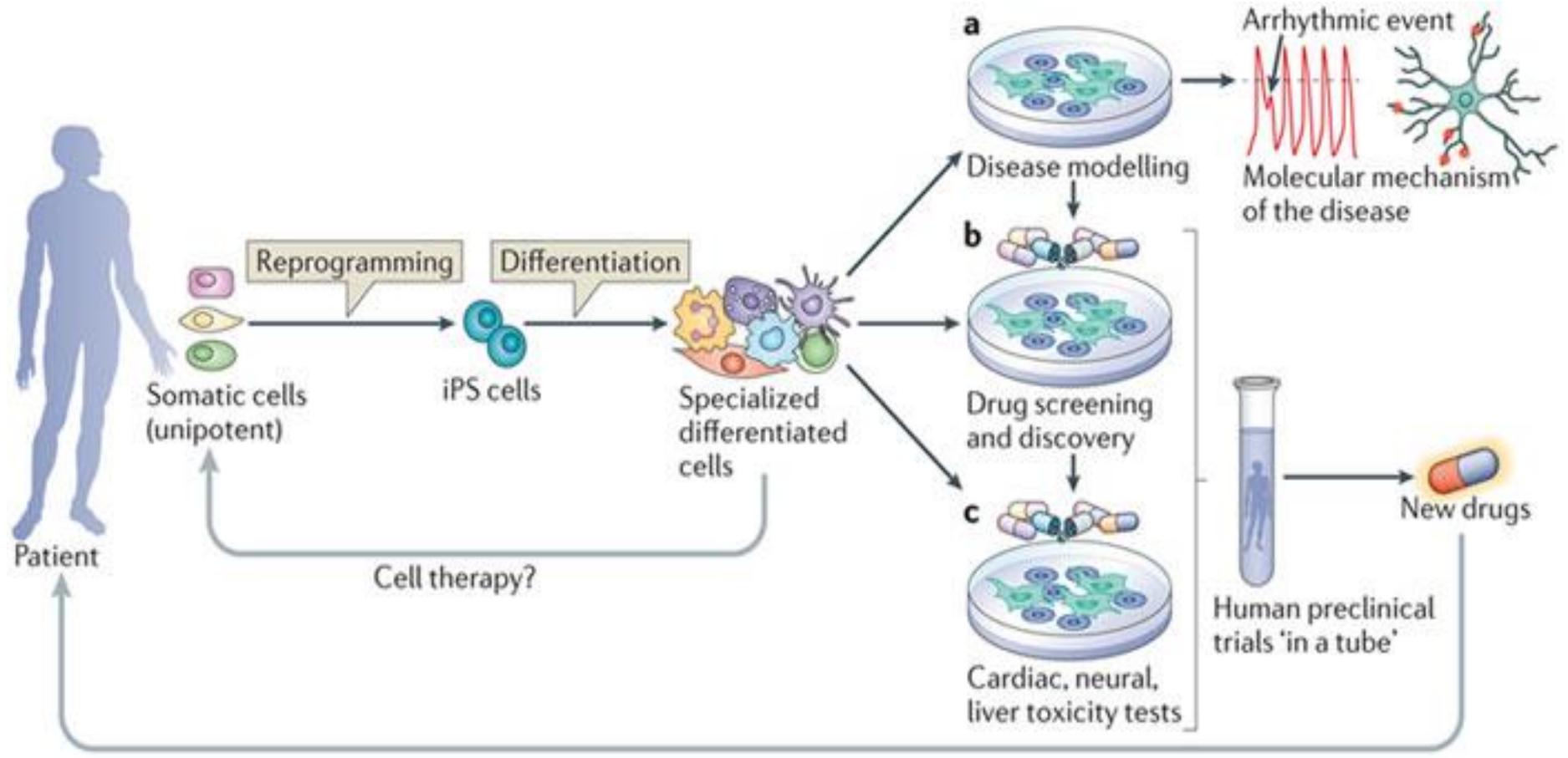


# Convergence!

**VIjBRE**



# Induced Pluripotent Stem Cells



# Neurovascular Unit on a Chip as a Model System for Tuberous Sclerosis Complex



Objective: Create an *in vitro* neurovascular unit (NVU) model of tuberous sclerosis complex (TSC) that replicates the pathology of the disease in the brain and its response to mTOR inhibitors.

Table 1: RDCRN/Dr. Ess available TSC-patient, primary dermal fibroblasts from which iPSC lines have been generated.

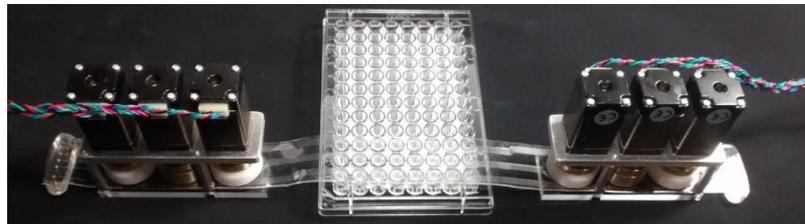
Patient	Gene	GRch38 Genome	mRNA	Protein	rs (if applicable)	Exon
TSP8	TSC2	NC_000016.10:g.2081734C>G	NM_000548.3:c.3750C>G	NP_000539.2:p.Tyr1250Ter	rs45517308	31/42
TSP20	TSC2	NC_000016.10:g.2081734C>G	NM_000548.3:c.3750C>G	NP_000539.2:p.Tyr1250Ter		7/42
TSP21	TSC2	NC_000016.10:g.2081734C>G	NM_000548.3:c.3750C>G	NP_000539.2:p.Tyr1250Ter		14/42
TSP23	TSC2	NC_000016.10:g.2081734C>G	NM_000548.3:c.3750C>G	NP_000539.2:p.Tyr1250Ter	rs65195	27/42
TSP24	TSC2	NC_000016.10:g.2081734C>G	NM_000548.3:c.3750C>G	NP_000539.2:p.Tyr1250Ter		40/42
TSP30	TSC2	NC_000016.10:g.2081734C>G	NM_000548.3:c.3750C>G	NP_000539.2:p.Tyr1250Ter		19/42
TSP31	TSC2	NC_000016.10:g.2081734C>G	NM_000548.3:c.3750C>G	NP_000539.2:p.Tyr1250Ter	rs45487193	34/42
TSP22	TSC1	NC_000009.12:g.132921367C>T	NM_000368.4:c.733C>T	NP_000359.1:p.Arg245Ter	rs118203434	8/23

With TC-2, NIH is supporting personalized organs-on-chips!

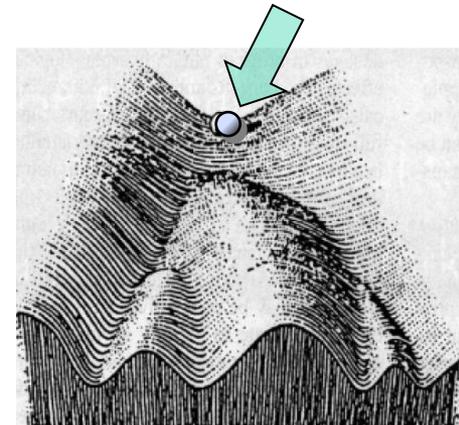
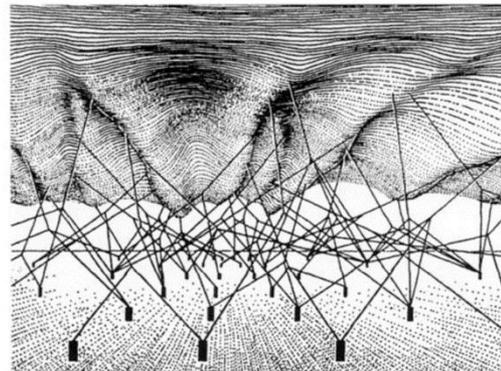
Plan: Generate, for the first time, a basic NVU tissue chip in which all cellular components (ECs, PCs, ACs, Ns) are derived from the same human individual.

# What can you do with a $\mu$ F-96?

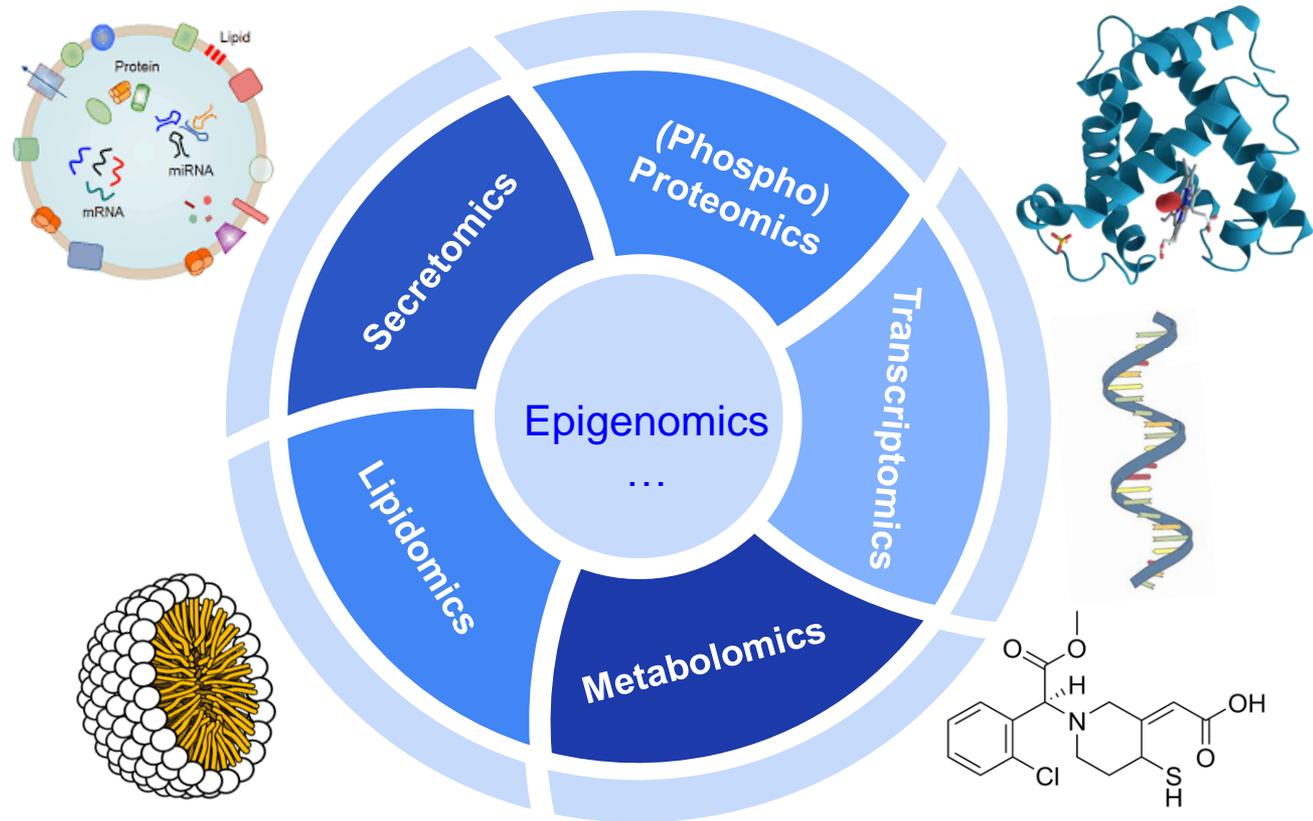
- Use time-division multiplexing to create realistic PK drug-exposure profiles individualized for each and every well in a 96-well-plate HTS assay.
  - Conventional cell culture
  - Massively parallel organs on chips
  - Organoid HTS arrays
- Create circadian rhythms on a well plate or Petri dish
  - Hormones
  - Nutrients
  - Drugs
  - Substances of abuse
- Explore in a massively parallel manner the multitude of combinations of growth factors and other compounds that are needed to guide iPSC differentiation to specific cellular phenotypes.
  - Readily applicable to organoid developmental biology
  - Suitable for machine learning and automated model inference.



Add and remove growth factors, etc., at will







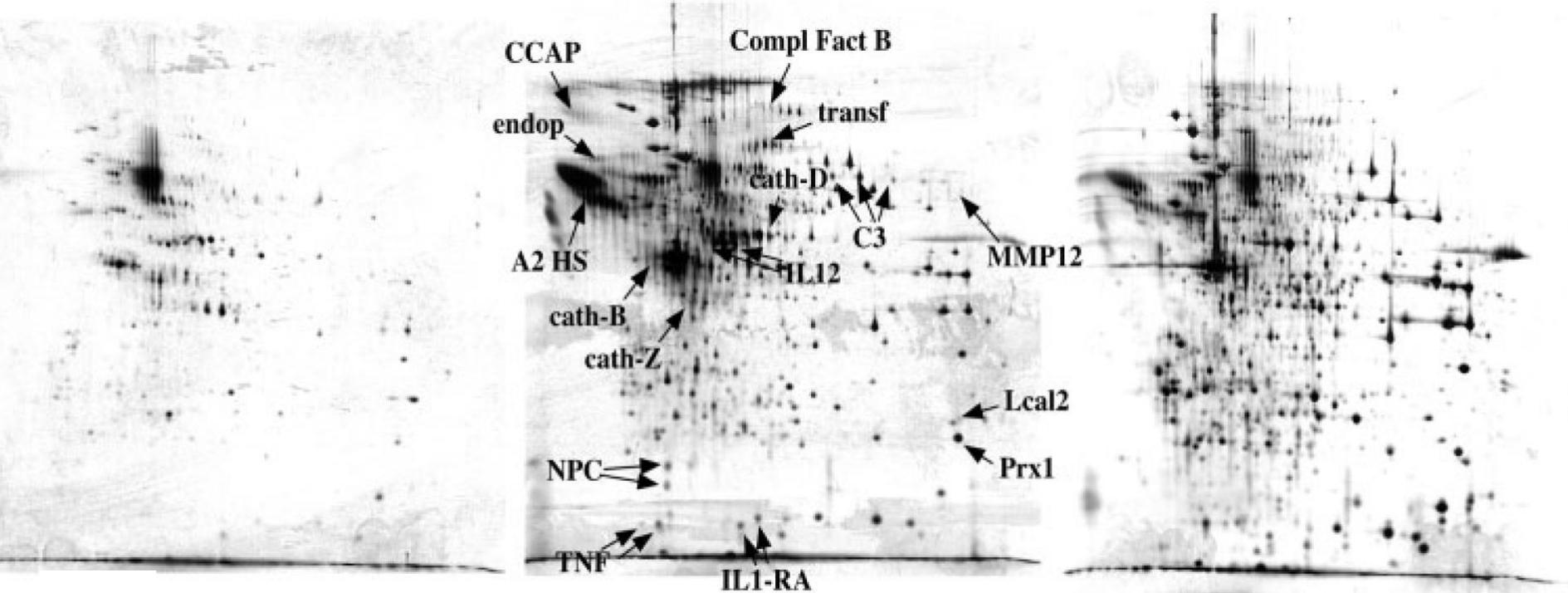
We need to revisit the  
proteomic and metabolomic  
secretome to control iPSC  
differentiation!

# Proteins in Secretome vs Cytosol

Protein Secretome of Immature Dendritic Cells

Protein Secretome of LPS-Activated Dendritic Cells

Proteins From Cell Lysate



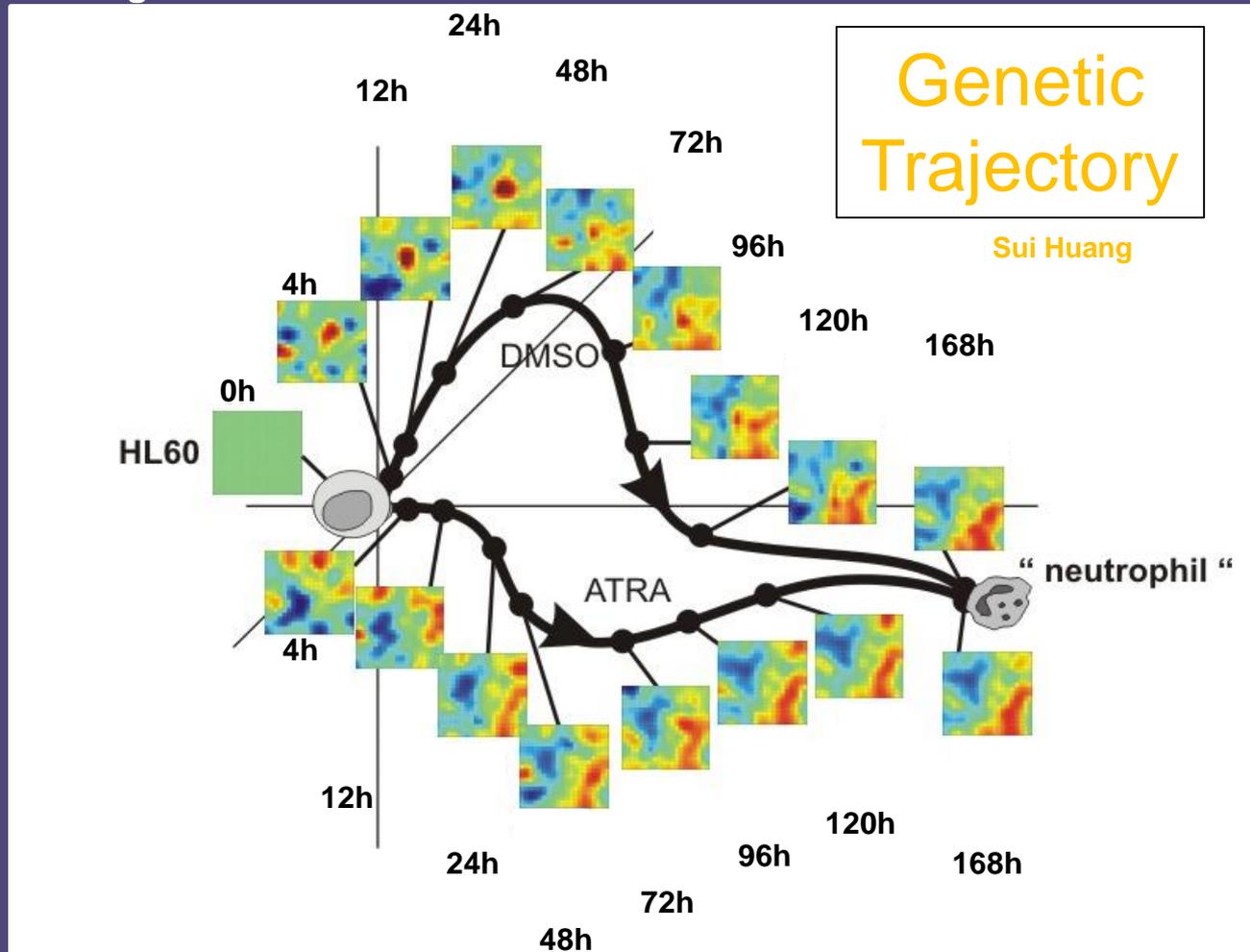
Protein Secretome

Lysate Proteins

What is the small-molecule, metabolite secretome?

# Cell fates as high-dimensional attractor states of complex gene regulatory network

Genome-wide gene regulatory networks govern the behavior of cells (*i.e.*, differentiation, death, etc.). Gene expression profiling can be used to show that two trajectories of neutrophil differentiation converge to a common state from different directions.



# Cell fates as high-dimensional attractor states of complex gene regulatory network

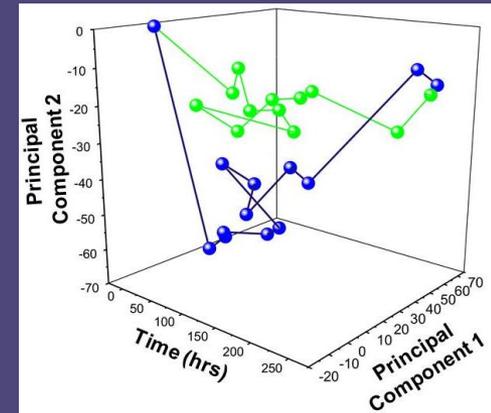
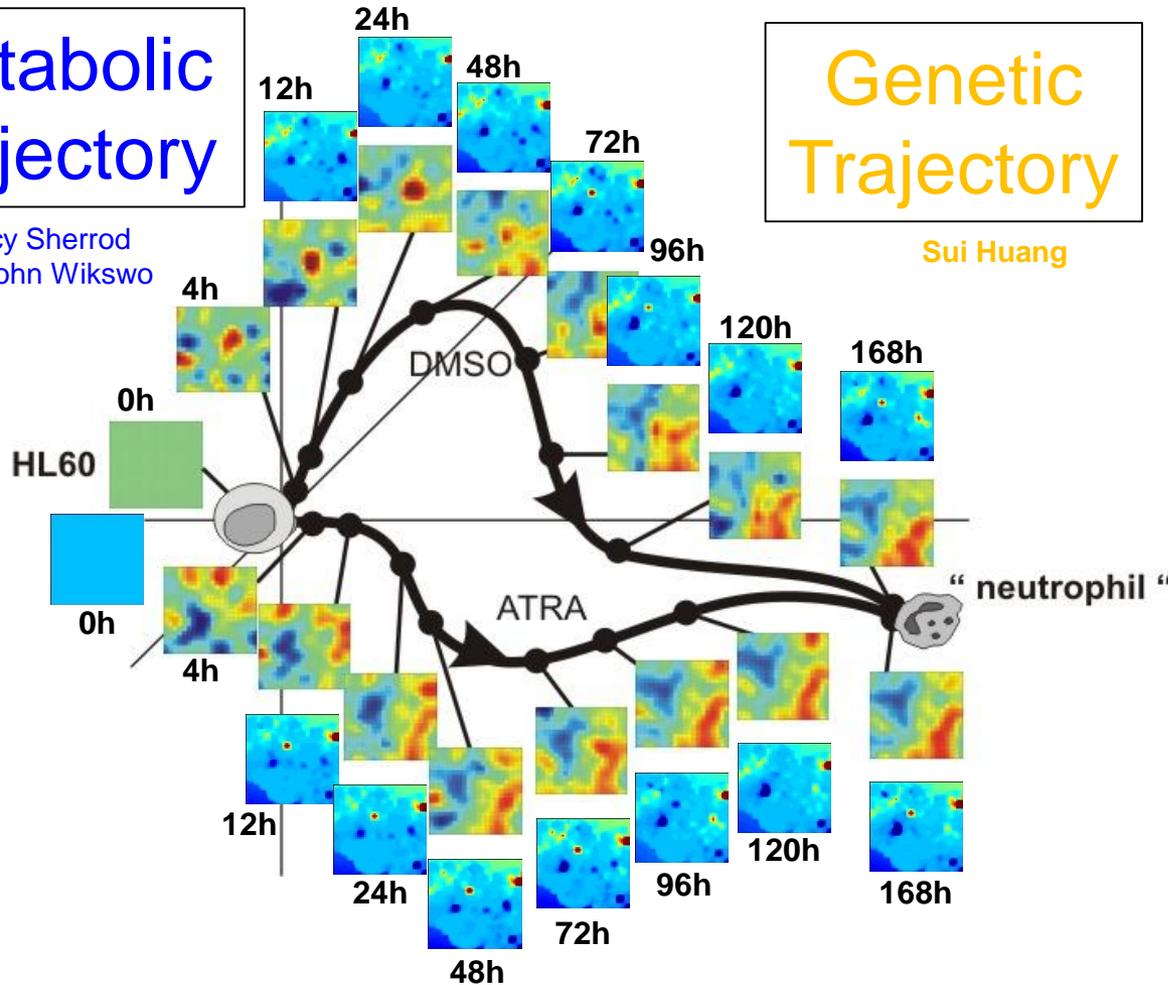
Genome-wide gene regulatory networks govern the behavior of cells (*i.e.*, differentiation, death, etc.). Gene expression profiling can be used to show that two trajectories of neutrophil differentiation converge to a common state from different directions.

## Metabolic Trajectory

Stacy Sherrod and John Wikswo

## Genetic Trajectory

Sui Huang

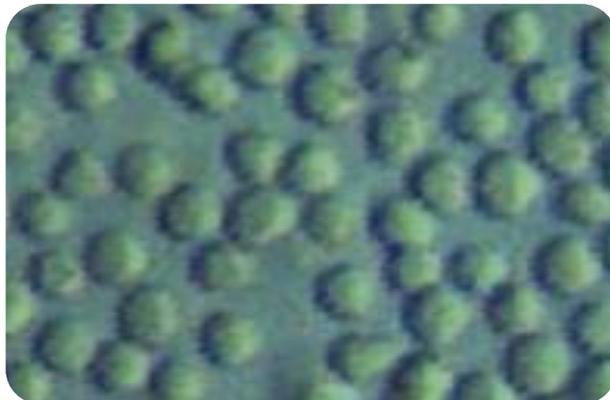


Secretome metabolomics can distinguish transitions in intracellular state

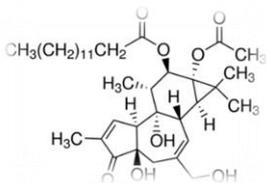
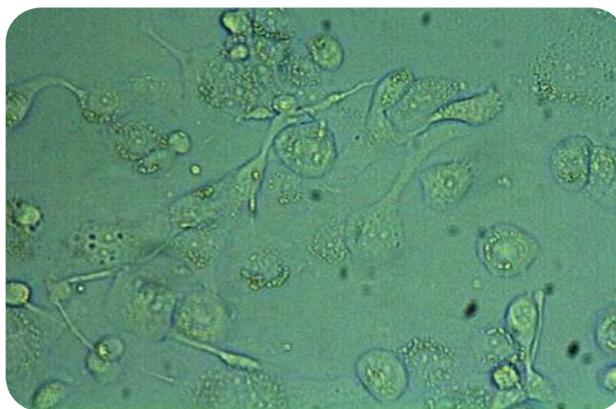
Stacy Sherrod and John Wikswo with the support of the Millipore Corporation

# Phenotypic MALDI Assay for *In-Vitro* Differentiation

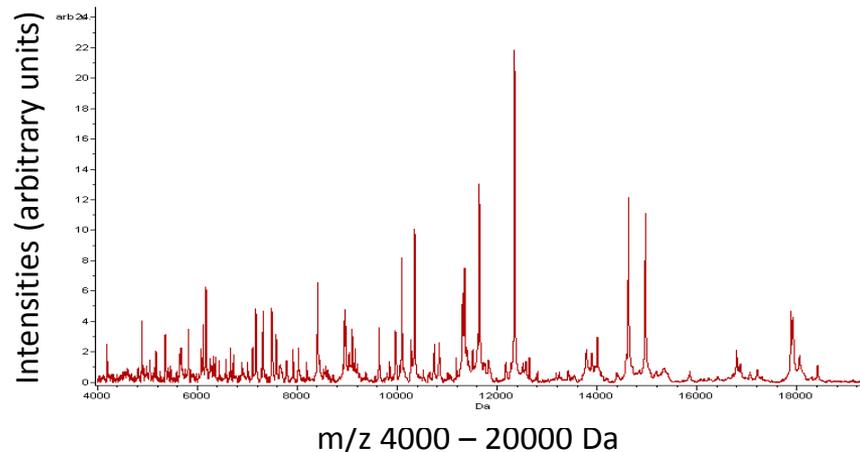
Undifferentiated THP-1  
cells



Differentiated cells  
Macrophage-like



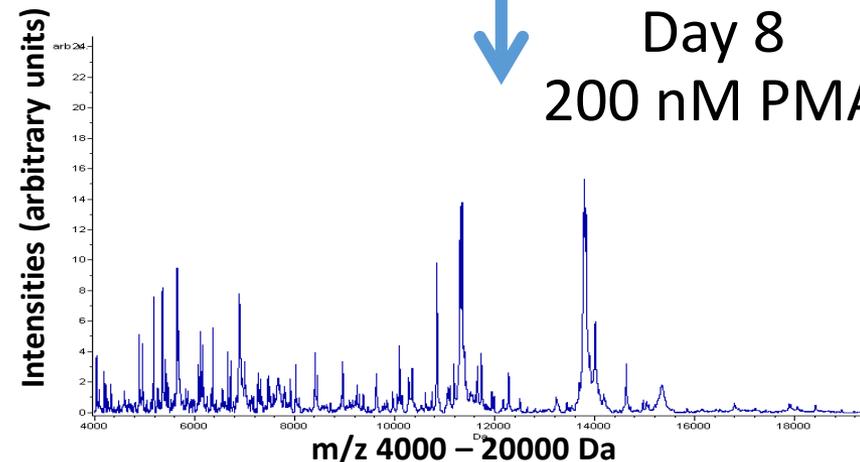
Day 0



m/z 4000 – 20000 Da



Day 8  
200 nM PMA

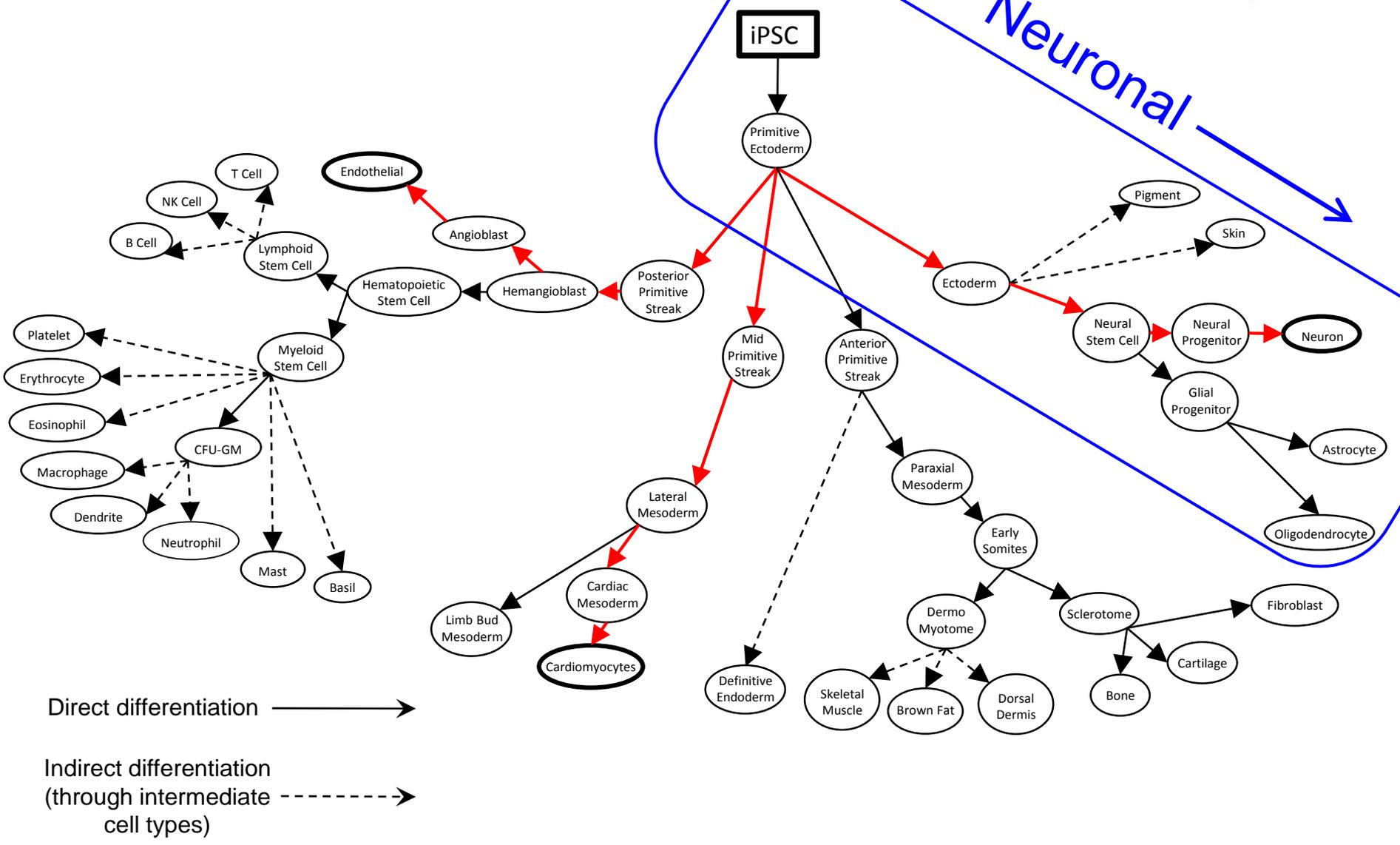


m/z 4000 – 20000 Da

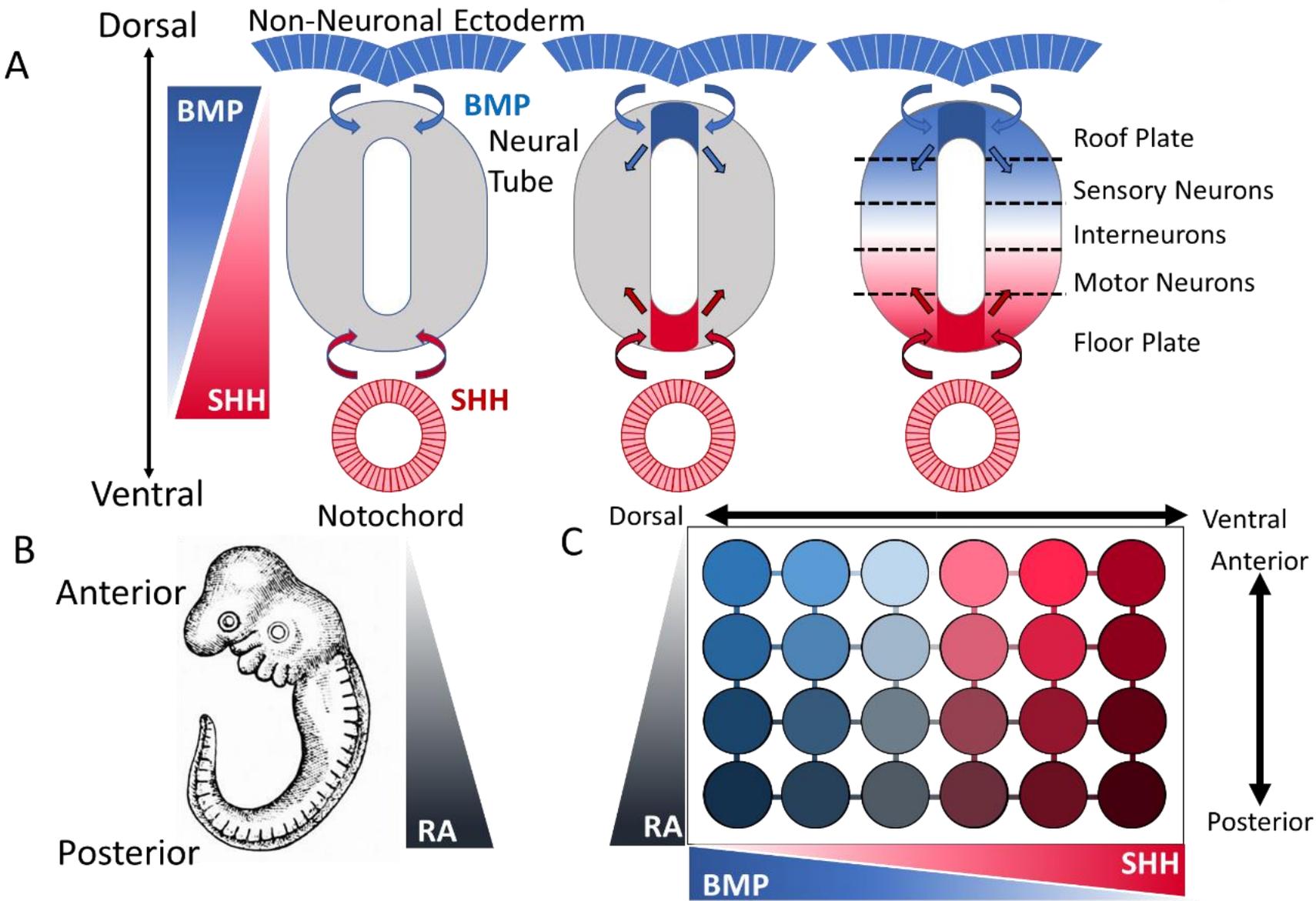
Untargeted transcriptomics, IM-MS  
secretory metabolomics, and MALDI  
MS proteomics can readily track  
cellular differentiation!

All we need to do is correlate the  
metabolic and proteomic secretome  
with the cellular multiome to get a  
non-destructive control signal!

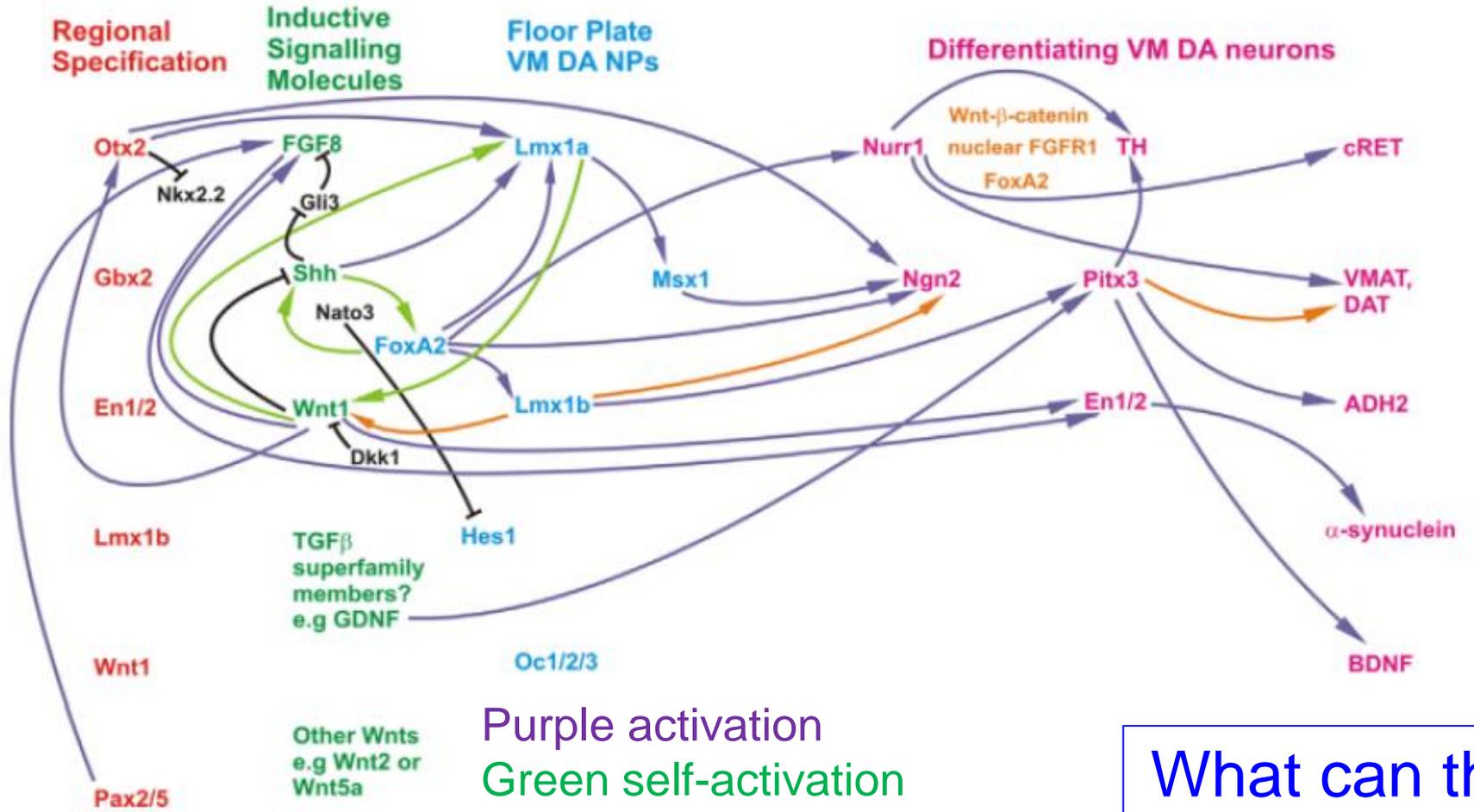
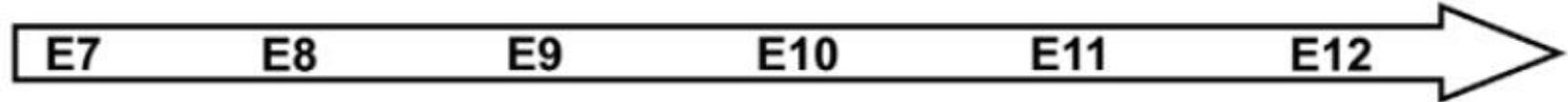
# Map of known iPSC differentiation pathways *VIJ*BRE



# Neural Tube Development



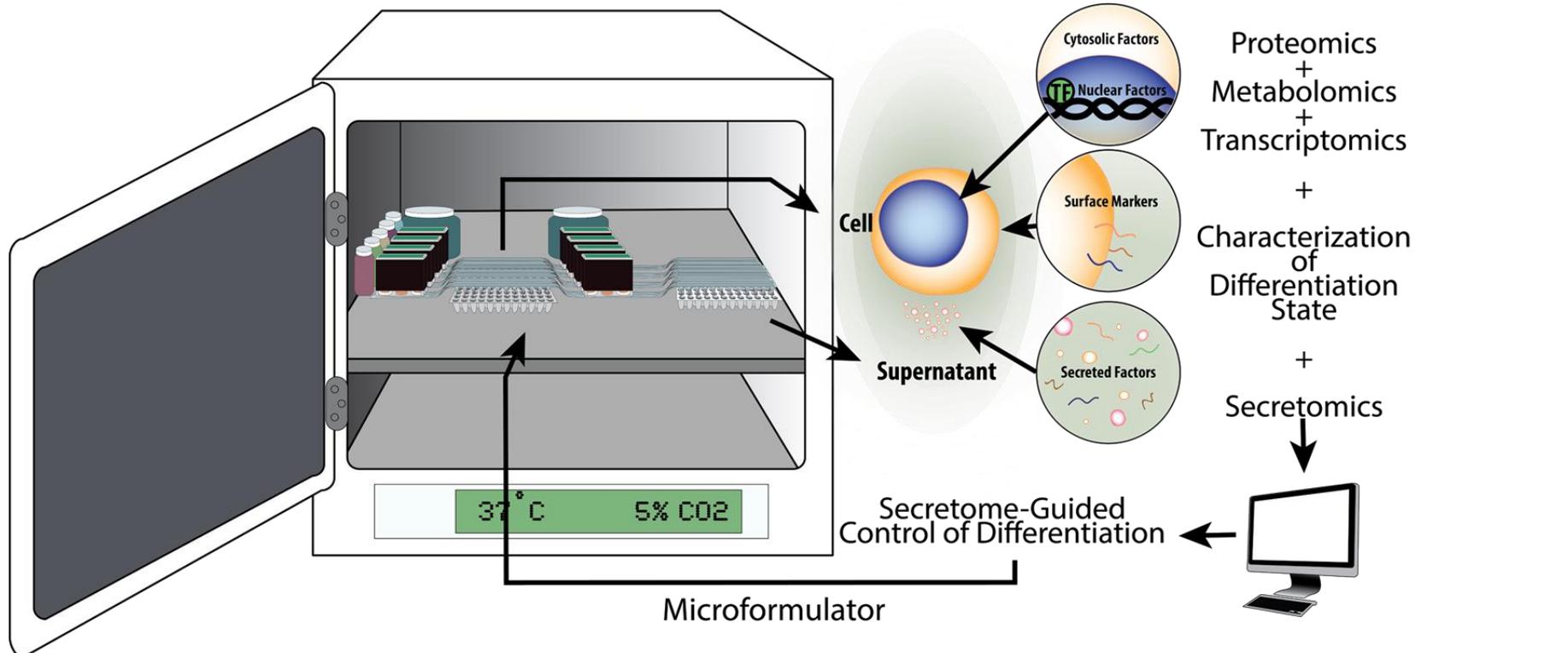
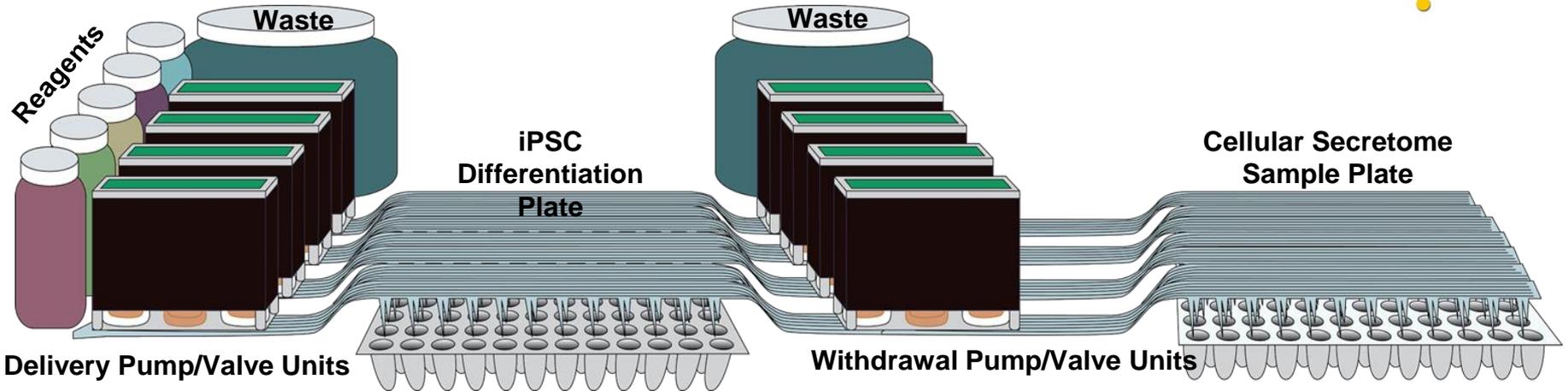
# Genetic regulation of ventral midbrain dopaminergic neuron development.



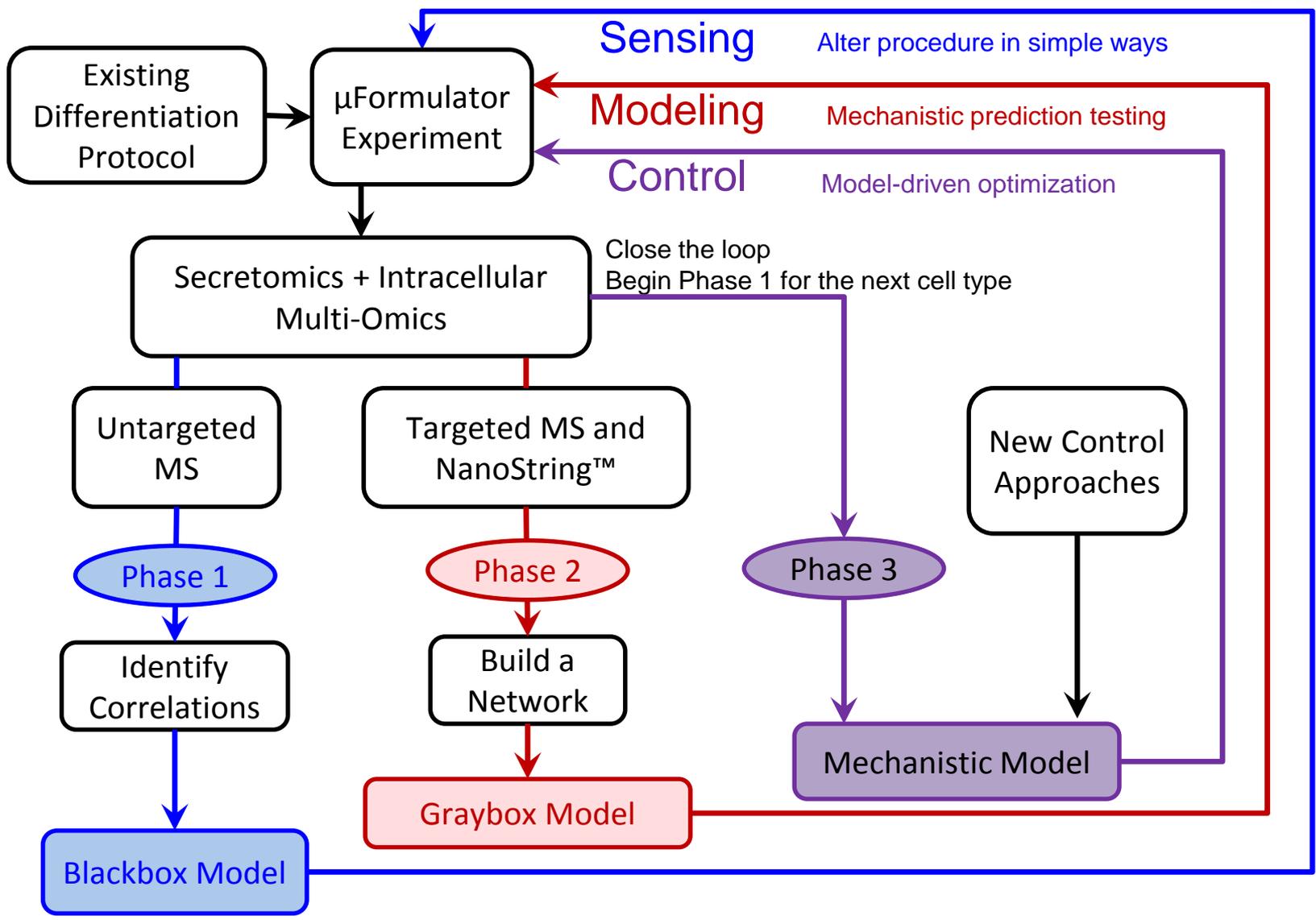
Purple activation  
 Green self-activation  
 Orange cooperative regulation  
 Black arrows inhibition.

What can the  $\mu$ F control?

# MicroFormulator for iPSC Differentiation

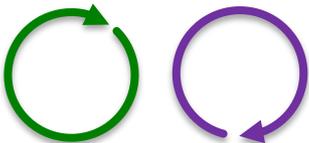
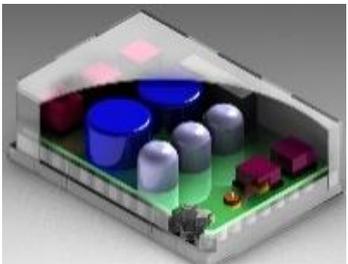
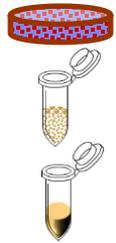


# Development of Closed-Loop Control

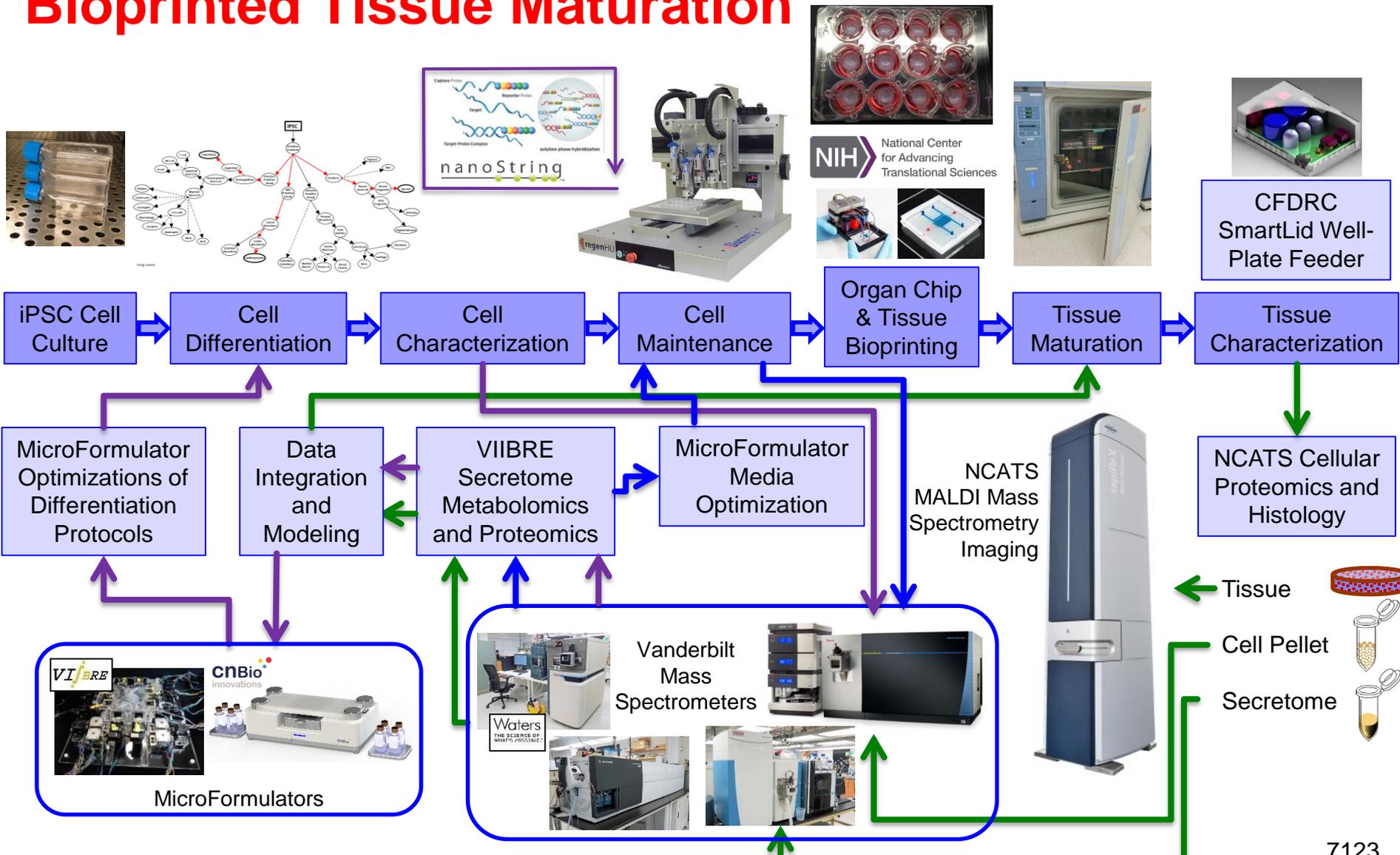


# Controlled Bioprinting of 3D Tissues

**VI***js***BRE**

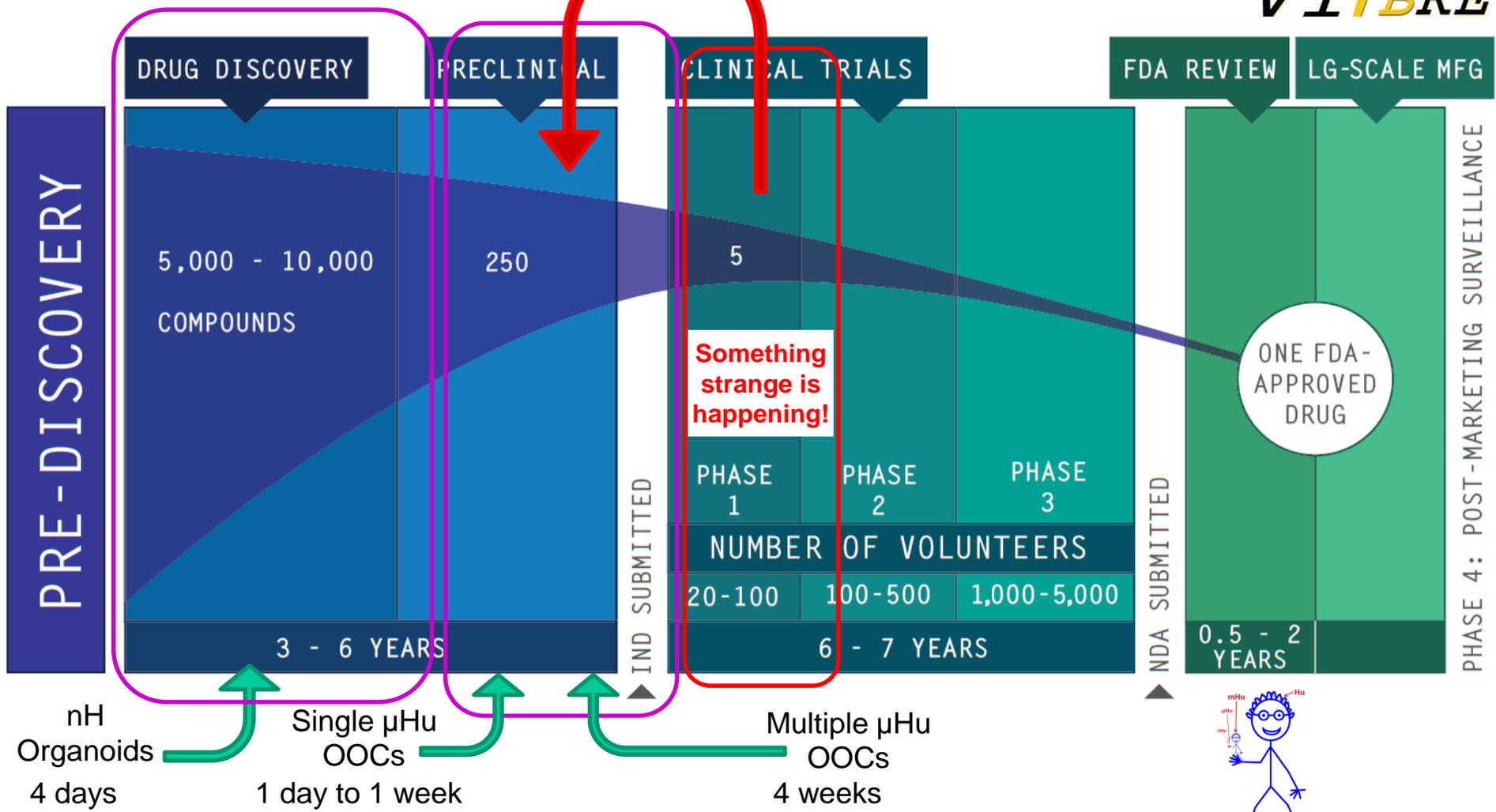


# Secretome and Cellular Multi-Ome for Controlling iPSC Differentiation and Bioprinted Tissue Maturation



Where do organs-on-chips  
fit into the drug discovery  
and development pipeline?

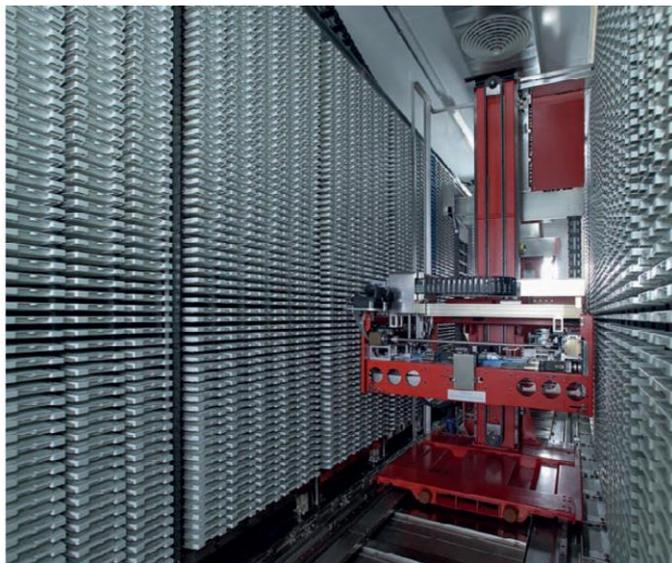
# Where do MPS models belong?



- Improve the transition from cells to animals to humans?
- Introduce human cells and tissue-equivalences earlier?
- Explain mechanism of action when questions arise?

[http://www.phrma.org/sites/default/files/pdf/rd\\_brochure\\_022307.pdf](http://www.phrma.org/sites/default/files/pdf/rd_brochure_022307.pdf)

# Really High Throughput!



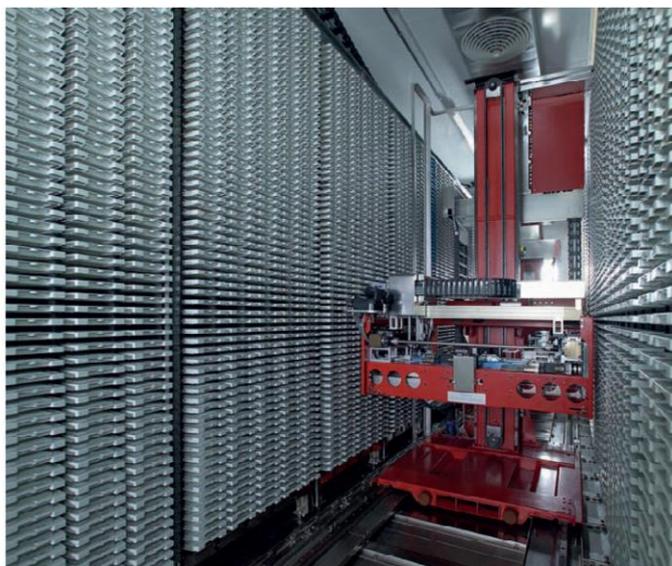
- AstraZeneca has more than two million compounds in its libraries
- Retrieval capacity is approaching 80,000 samples per day
- Trays hold 1,280 acoustic dispensing tubes
- It is possible to plate 100,000 samples in 30 hours
- 2.5 nL increments of compound, up to 1 uL per well



C. Green and P Spencer, Drug Discovery World Winter 2017/2018  
G Schneider, Nature Reviews, Drug Discovery, 2018  
Dawes, JALA, 2016



# Really High Throughput!



**If you need these robots and this library in its entirety, you may need organoids, but you don't need organs-on-chips**

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Dawes, JALA, 2016



# The Grand, Organ-on-a-Chip Vision for Drug Development



## Imagine instead of animals ....

- A “human-on-a-chip” ...
- ... using cells from patients who are in the hospital today
- ... and your Human-on-a-Chip helps you understand whether that person will have a pharmacologic response to your drug
- ... whether that drug is in Phase 3, or Phase 1, or was just this morning synthesized by a medicinal chemist for a novel drug target that may, or may not, bring tremendous value to one or more patients
- ... and by the way, you can also predict the absorption, disposition, metabolism, drug-drug interactions, and safety risks for this drug in the intended patient, as well as a panel of 100's of other patients with that disease.
- And if something goes wrong, you learn this before patients are put at risk.

## • Disease Biology / Pharmacology

- Discovery of novel **mechanisms of human diseases**
- Identification of novel compounds including probes, leads, clinical candidates
- Discovery of the **mechanism of action of drug candidates**
  - **On target**
  - **Off target**

## • ADME-PK-Clinical Pharmacology

- Early identification of problematic human haplotypes and drug–drug interactions (DDIs) for small molecules
- Improved prediction of human exposure for compounds and clinical formulations

## • Toxicology

- Earlier termination of toxic drugs
- Avoid inappropriate drug terminations

**Untargeted MS  
proteomics and  
metabolomics may  
hold the keys!**

# ***In Vitro* Problems that may need today's OoC capabilities**

- Access to both sides of barriers polarized by shear flow
  - Blood-brain barrier
  - Blood-testis barrier
  - GI tract
  - Angiogenesis / vasculogenesis
- Mechanically active systems
  - Alveolar interface
  - Gut
  - Skeletal, smooth, and cardiac muscle
  - Developmental bone-joint
- Complex, well-defined heterogeneous 3D cultures
  - Liver
  - Brain → Electrical recordings of neural network activity
  - Skin
  - ...
- Coupled organs for drug-drug interactions and ADME-Tox
  - Gut-liver
  - Liver-brain
  - Gut-kidney-liver ...

How accurately can we recreate micro-vasculature and the basement membrane?

- **The full metastatic cascade**

- Localized formation of the primary tumor
- Intravasation into vascular and lymph systems
- Dissemination through vascular and lymph systems
- Extravasation into a competent organ
- Colonization and proliferation with seed-soil interactions

How accurately must we recreate adaptive immunity?

- **Testing immuno-oncology drugs**

- Requires isogenetic innate and adaptive immune system, tumor, and metastatic niche to avoid host-versus-graft reactions and MHC-HLA incompatibilities.
- May require organ-specific lymph nodes, immune-active spleen and bone marrow for proper programming of multiple types of immune cells.
- CD34+ progenitor cells and B cells have yet to be derived from iPSCs (Kristina Howard, FDA).

# The Payoff

- Organ on chip systems may reduce costs
  - Drug efficacy
  - Drug toxicity
  - Environmental toxicology
  - Rapid detection of mode of action of hacked CB agents.
- The simultaneous EC and IM-MS measurement of the dynamics of tens to hundreds or even thousands of cellular variables will allow an unprecedented advance in our understanding of living cells
  - Pharmaceuticals, cellular or environmental toxins, CBN agents
  - Toxin-toxin adverse synergism
  - Drugs that are used for toxin prophylaxis and treatment.
- The general application of this technology will support
  - **A deep understanding of biology and complex systems**
  - Development of **new drugs**
  - Screening for unwanted **drug side effects**
  - **More rapid understanding of mechanism of action**
  - **Assessment of yet-unknown effects of environmental toxins.**

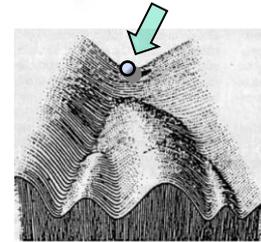
- What is the size of each organ?
  - Scaling criteria
  - Creation and maintenance of cellular heterogeneity
  - Scaling will fail at the single-cell level
- How do you control fluids within the volume and cost budgets?
  - 4.5 mL for milliHuman, 4.5  $\mu$ L for a microHuman
  - Minimize pump, tubing and interconnect dead volume
  - Fluid makeup after sample withdrawal
  - Eliminate bubbles
  - Need thousands of units operating for a month
- Analytical chemistry in nL bioreactors
  - Electrochemical sensing of pH, glucose, lactate, oxygen
  - Optical monitoring of  $[Ca^{2+}]_i$
  - UPLC/MALDI/nESI ETD IM-MS/MS Omni-Omics
  - Non-specific analyte binding
  - Integration, mining, and interpretation of Omni-Omic data
- Blood surrogate
  - Universal media without serum
  - Transport protein
  - Osmolarity
  - Perfluorocarbon or hemoglobin O<sub>2</sub> carrier
- Putting organs together and controlling each and all of them
  - Scaling laws revisited
  - Delivering oxygen without excess fluid
  - Controlling metabolic activity
  - Maintaining correct salinity
  - Preventing, controlling or utilizing oscillations
  - Utilizing Fisher randomized multiparametric questionnaires
- Accounting for missing organs
  - Adding missing compounds
  - Removing compounds that would be metabolized by missing organs
- Modeling of coupled organ systems
  - Multiphysics to design
  - PK/PD of drugs in multiorgan systems
  - Inverse models for data interpretation
  - Learning from regulatory noise
- How do we diagnose health vs disease?
- What will a milli/microHuman cost?
- Utilizing organs on a chip
- How accurate a mHu or  $\mu$ Hu can we produce?

# Tissue Chips Challenges 2018



- Human iPSC-derived neuronal cells

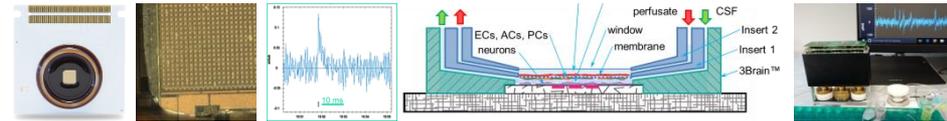
- Reduce costs
- Shorten time from patient to iPSC to mature phenotypes
- Develop genotype libraries
- Learn how to control iPSC differentiation



Waddington 1957

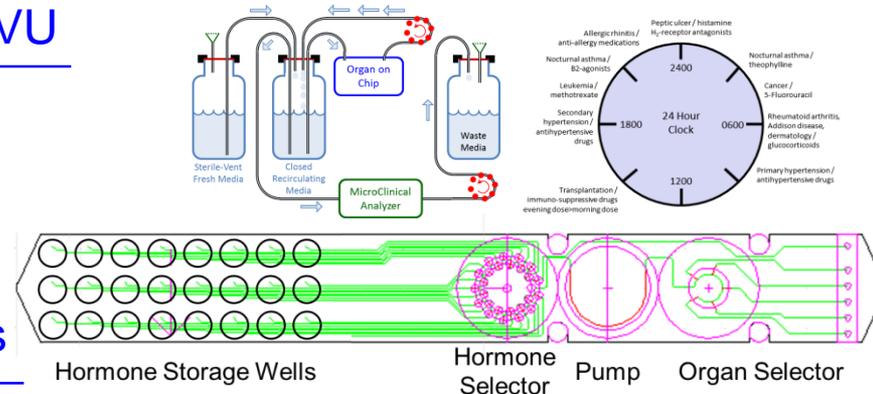
- Bioreactors

- Reduce volumes
- Vascularize
- Eliminate PDMS
- Add electrodes to the NVU



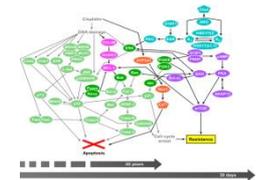
- Control hardware

- Reduce volumes
- Reduce size and cost
- Recirculate
- Add diurnal hormone and nutrient variations



- Analytical chemistry & metabolomics

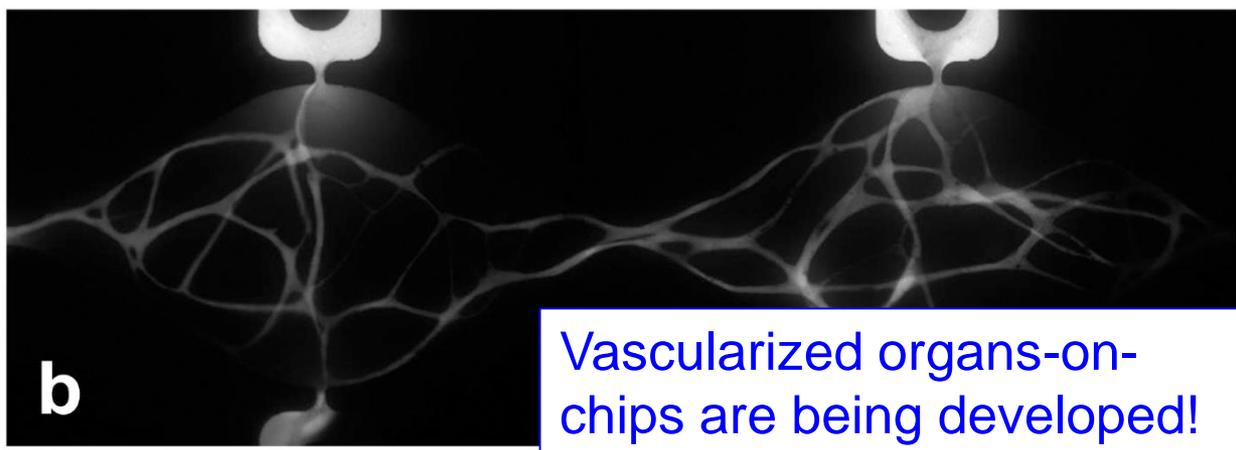
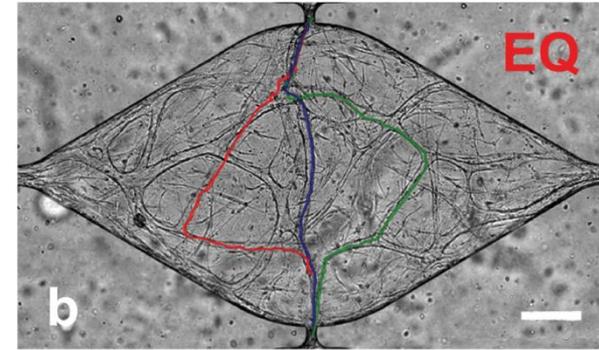
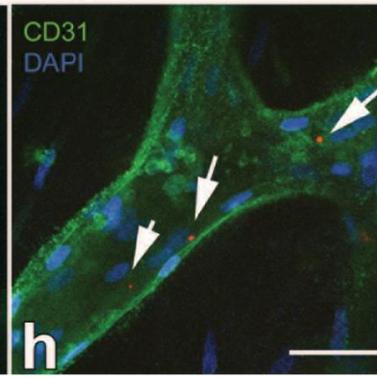
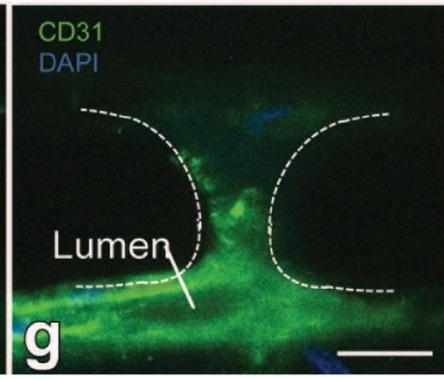
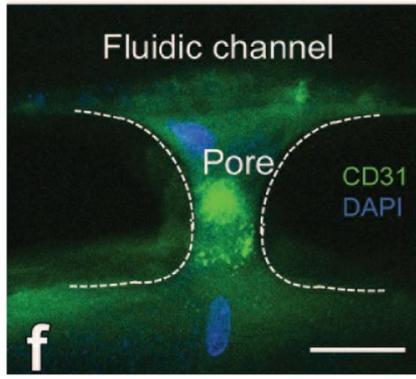
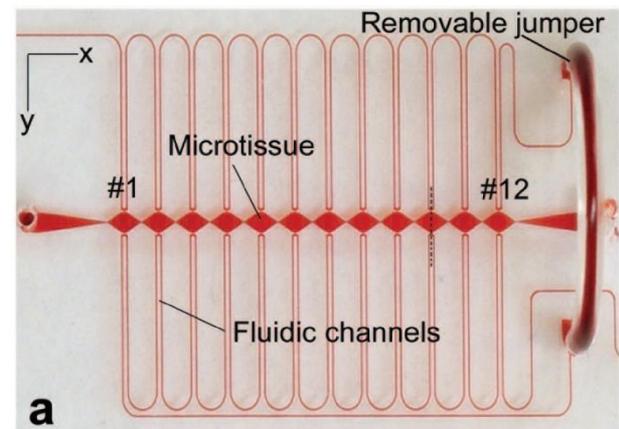
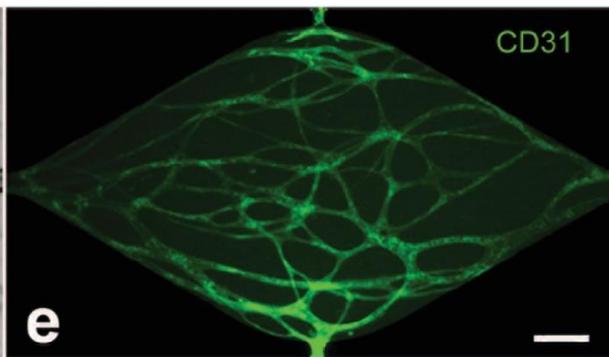
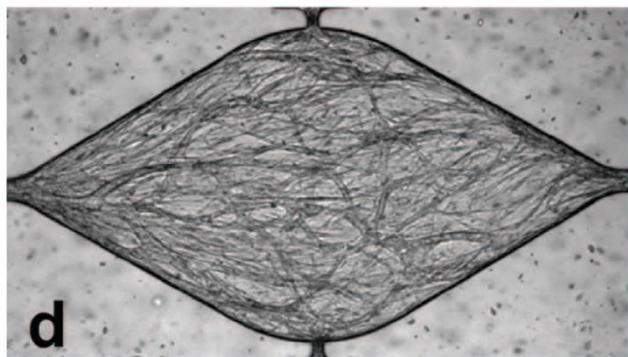
- Reduce volumes
- Detect more analytes on-line at lower cost
- Infer metabolic and signaling networks



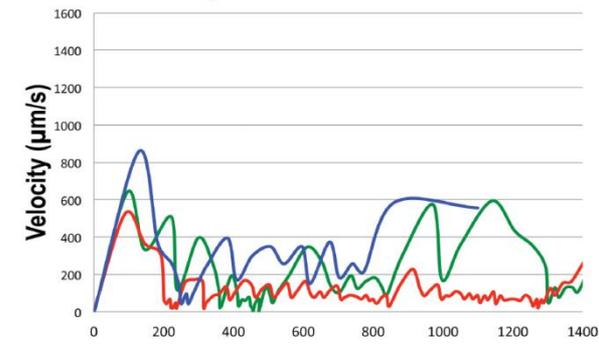
- Translation

- Make it cost-effective and easy for conventional biologists, toxicologists, and pharmacologists to use organs on chips without a gigantic capital investment or an engineering degree
- Start answering medical questions and solving medical problems

# Self-assembling perfused microvasculature *VI<sub>2</sub>BRE* in a microfluidic device (George & Hughes, UCI)



Vascularized organs-on-chips are being developed!



# How kind of model do Pharma need?

- Model type

- *In vivo*

- Animal
- Human

- *In vitro*

- Cell
- Tissue
- Organ
- Multi-organ

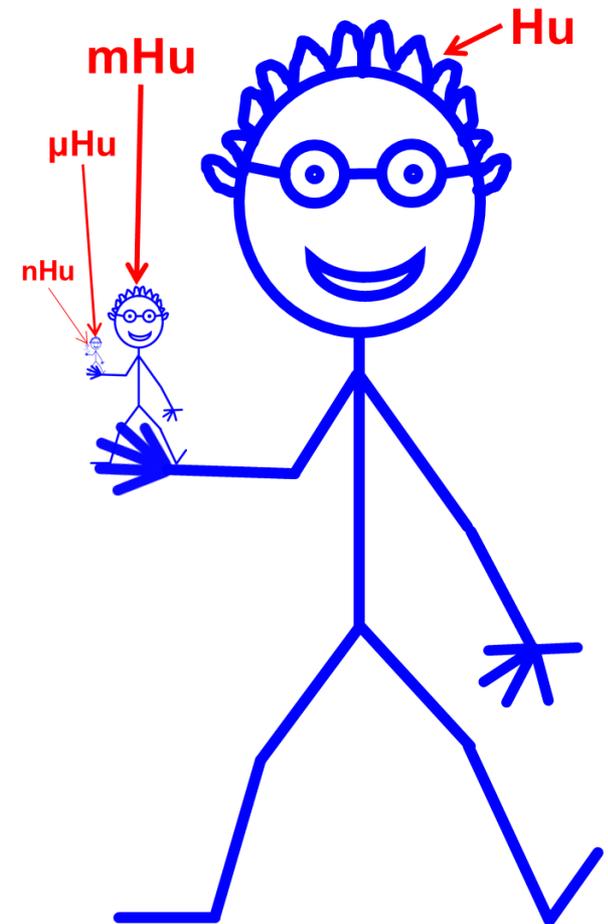
- Mathematical

- Exact, bottoms-up, microscopic functional
- Top-down, phenomenological
- Effective
- Toy

- Hybrid *in vitro* and mathematical

- How do we use it?

- Understanding physiology
- Clarifying a specific mechanism of action
- Predicting response to drugs and toxins
- Guide stem cell differentiation
- Guide cyber drug design
- Interpret untargeted data
- Providing a compact representation of a subsystem in a larger synthesis



# How good a model do we need?

- It depends upon the question you are asking.

***The best material model for a cat is another, or preferably the same cat.***

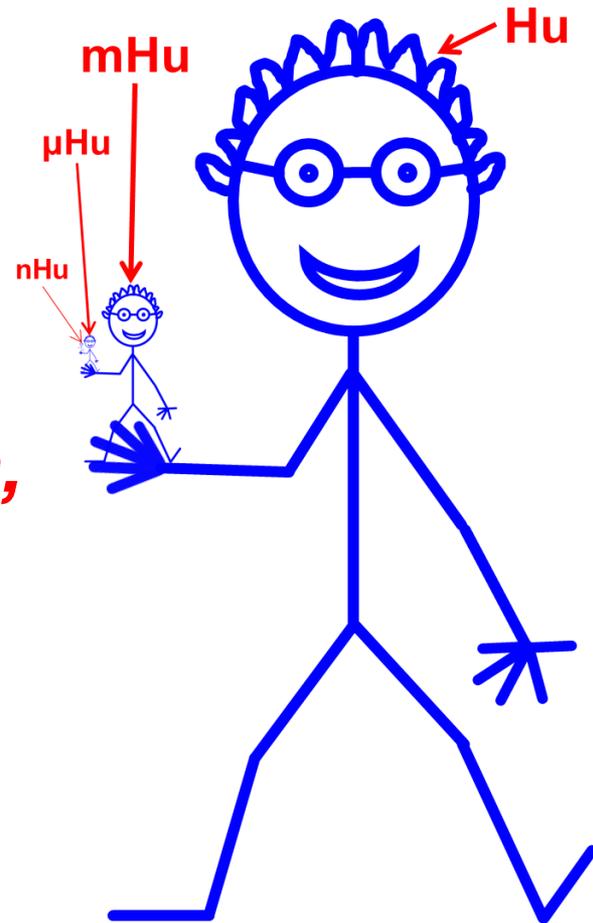
Arturo Rosenblueth and Norbert Wiener. The Role of Models in Science. Philosophy of Science 12 (4):316-321, 1945.

***Make your theories simple enough, but not too simple.***

~Albert Einstein

***Make your organs-on-chips systems simple enough, but not too simple.***

John Wikswo



## Which is better?

- A. A non-human model that is physiologically incomplete, e.g., **rat hepatocytes in a dish.**
- B. A human model that is physiologically incomplete, and of questionable phenotype, e.g., immortalized, **cancer-derived human hepatocytes in a dish.**
- C. A human model that is physiologically incomplete, and may not be functioning normally, e.g., **primary human hepatocytes in a dish.**
- D. A non-human model that has complete functioning physiology, e.g., **a mouse, a rat, or a non-human primate.**
- E. A model that has fully human physiology but is physiologically incomplete, e.g., **a human liver chip.**
- F. **Coupled human organ chips.**

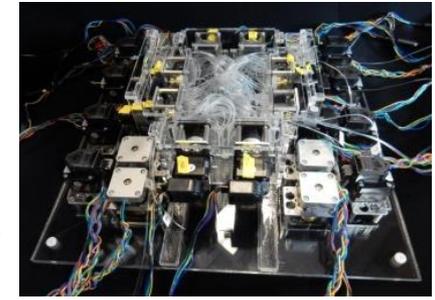
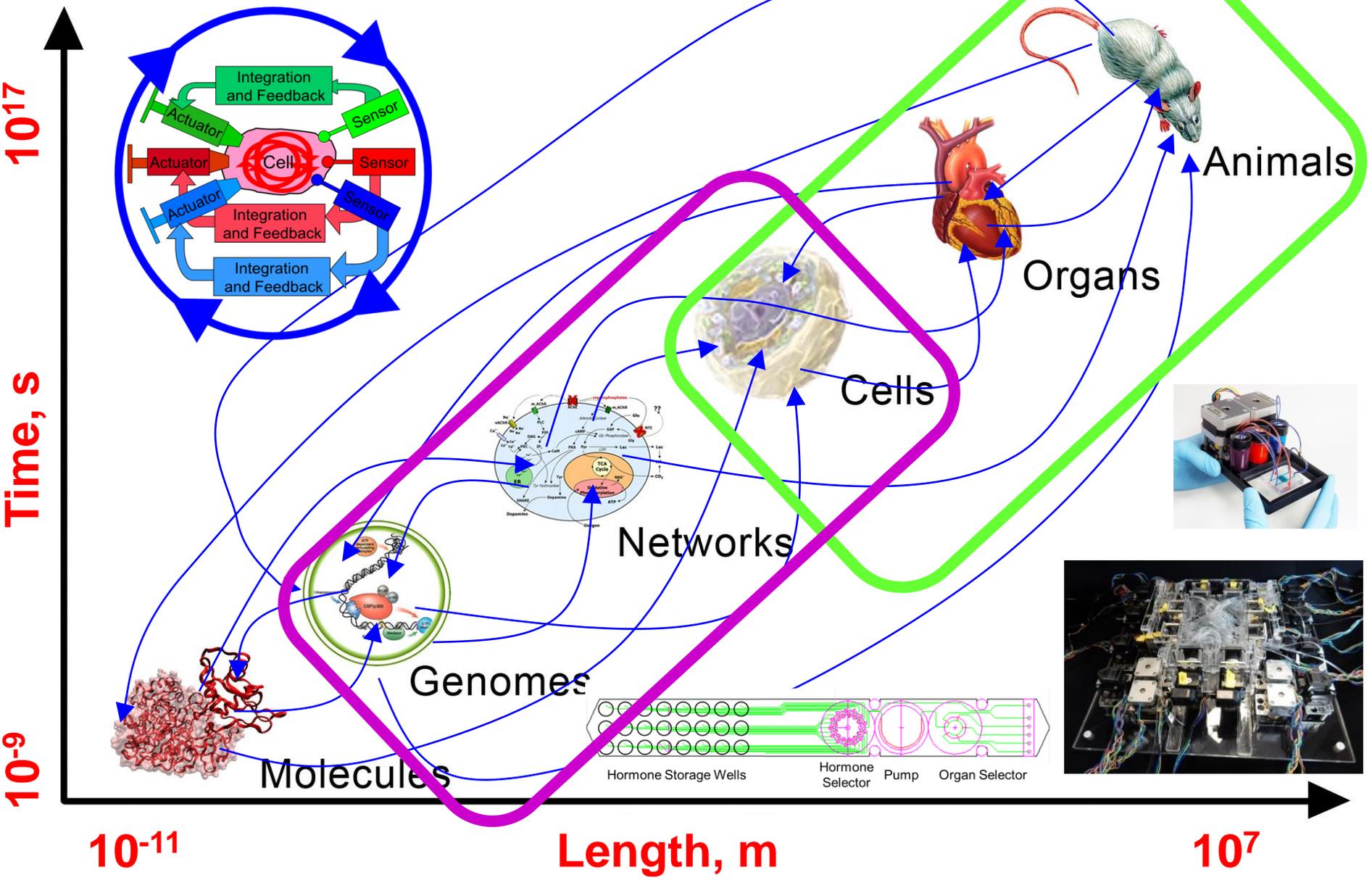
The answer depends upon your budget and your question!

# My hypothesis

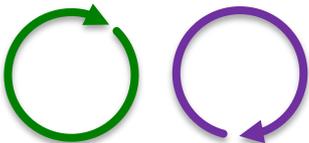
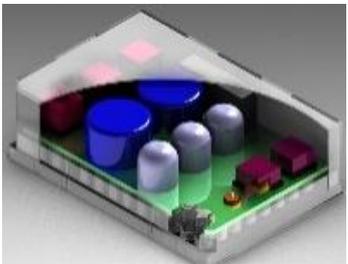
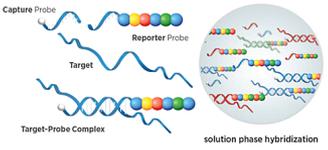
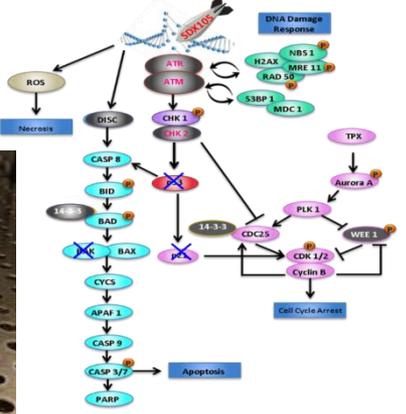
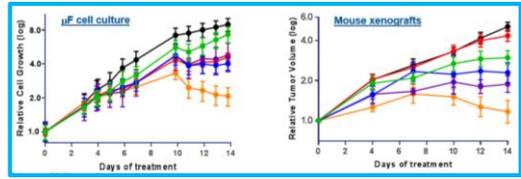
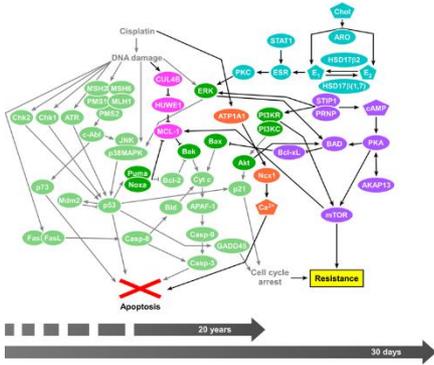
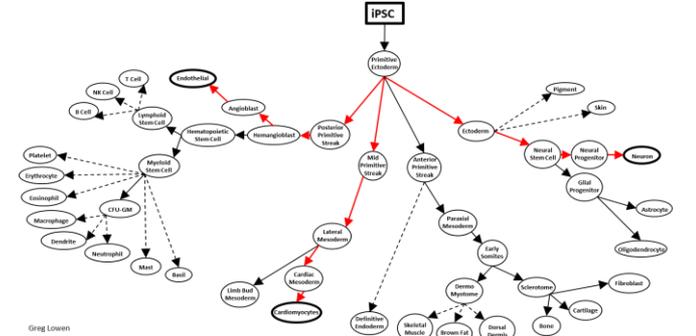
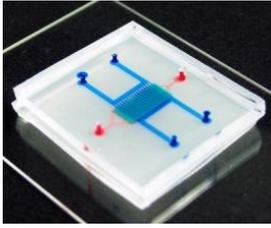
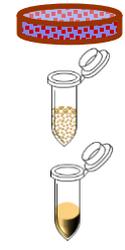
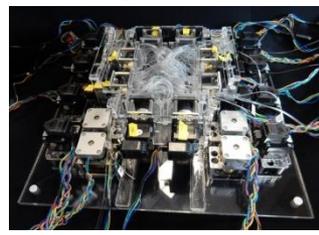
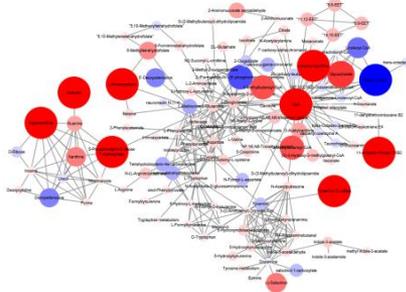
There will be a major shift in the topology of biological experimental apparatus when the size and portability of modular analytical instruments and system controllers for MPS studies reaches that of a well plate and their cost approaches \$100.

- Instruments will be consumables.
- Each experiment will have dedicated hardware.
- Massively parallel, closed-loop, automated 3D MPS tissue experiments can be made at a realistic cost.
- This will advance drug development and toxicology!

# MPS platforms will provide multiscale control of complex systems



# Today's goal: Explain this convergence



# VIIBRE Organ-on-a-Chip Collaborators



## Vanderbilt

- Vanessa Allwardt
- **Frank Block III**
- Frank Block Jr.
- **Aaron Bowman**
- **Clayton Britt**
- **Jacquelyn Brown**
- Young Chun
- **David Cliffl**
- Erica Curtis
- John Scott Daniels
- **Jeffrey Davidson**
- Anna Davis
- **Mona Everheart**
- William Fissell
- **Greg Gerken**
- Lucas Hofmeister
- William Hofmeister
- Orlando Hoilett
- Chaz Hong
- Shane Hutson
- Deyu Li
- Chee Lim
- **Ethan Lippmann**
- **Dmitry Markov**

- **William Matloff**
- **Lisa McCawley**
- **Jennifer McKenzie**
- **BethAnn McLaughlin**
- **John McLean**
- **Dusty Miller**
- **Karoly Mirnics**
- **Nicole Muszynski**
- **Diana Neely**
- **Kevin Niswender**
- **Virginia Pensabene**
- **Ronald Reiserer**
- **Philip Samson**
- **David Schaffer**
- **Kevin Seale**
- **Stacy Sherrod**
- **Mingjian Shi**
- **Matthew Shotwell**
- **Veniamin Sidorov**
- **Hak-Joon Sung**
- **David Tabb**
- **Adam Travis**
- **Donna Webb**
- **Hendrik Weitkamp**
- **Erik Werner**
- **John Wiksw**

## AstraZeneca

- **Matthew Wagoner, Jay Mettetal, Kristin Fabre, Aditya Kolli, Sudhir Deosarkar**

## CFD Research Corporation

- **Kapil Pant, Prabhakar Pandian**
- Andrzej Przekwas

## Charite Hospital, Berlin (2012-2014)

- **Katrin Zeilinger, Marc Lubberstadt, Fanny Knöspel**

## Cleveland Clinic and Flocel Inc.

- Michael Deblock, Kyle Lopin, and **Chaitali Ghosh**
- **Damir Janigro (Flocel)**

## Harvard/Wyss (2011-2015)

- **Don Ingber, Kit Parker, Josh Goss, Geraldine Hamilton, Danny Levner**

## Johns Hopkins University

- **Mark Donowitz**

## Los Alamos National Laboratory (2012-2014)

- **Rashi Iyer**

## University of Pittsburgh

- **Lans Taylor, Albert Gough, Lawrence Vernetti**

## University of Texas Medical Branch

- **Mary Estes**

## University of Washington

- **Jonathan Himmelfarb**

## University of Wisconsin

- **William Murphy, William Daly**