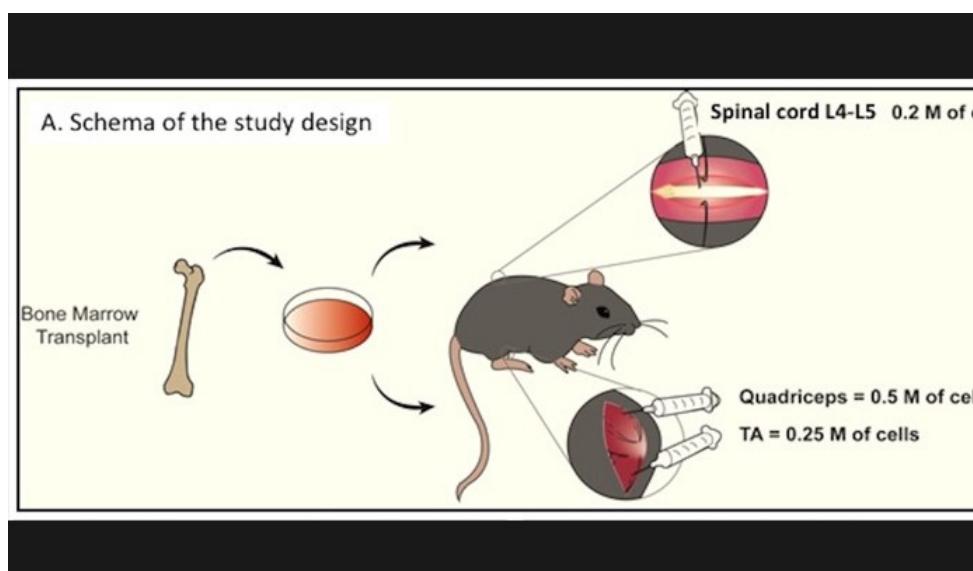


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Multiple strategy with bone marrow cells to t



There is no effective treatment to overcome Amyotrophic Lateral Sclerosis (ALS). The Neuroplasticity and Regeneration group of the UAB Institute of Neurosciences assayed two cell therapy protocols with ALS model mice to study, based on a multifocal approach, to protect motor neurons in the spinal cord and their connections with muscles, both peripheral and central, of the disease.

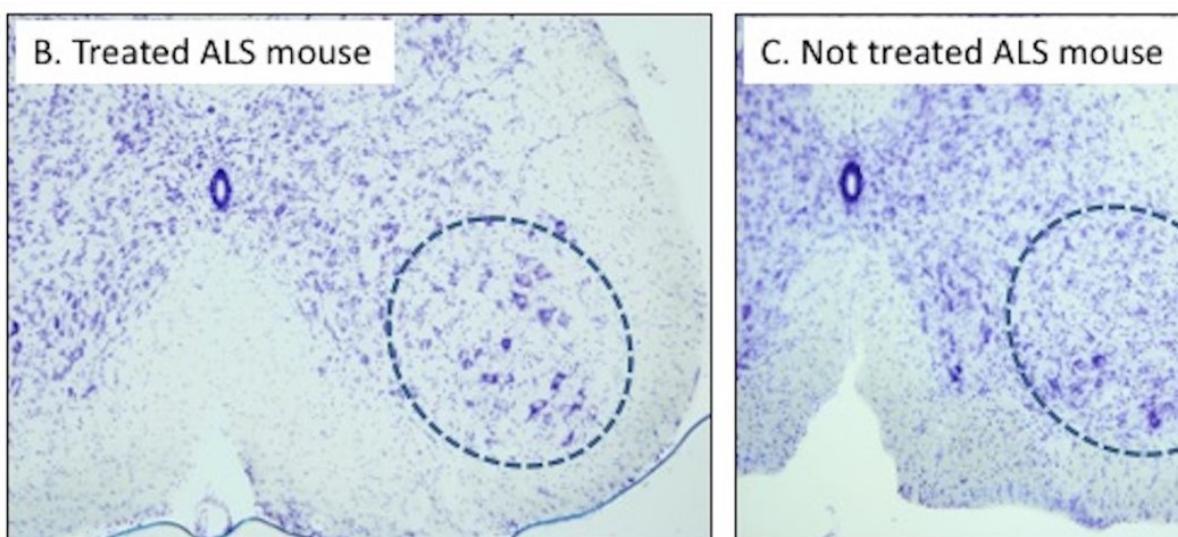
Outline of the study design (A). Bone marrow cells are extracted, purified, and injected into the muscles and spinal cord of SOD1 transgenic mice.

Amyotrophic Lateral Sclerosis (ALS) is a neurodegenerative disease characterized by a progressive degeneration of upper (in the brain) and lower (in the spinal cord) motoneurons. Resulting from neuronal loss, patients develop muscle atrophy and eventual muscle paralysis that leads to their death few years after the onset, since there is no effective treatment to overcome the disease. Most of the cases of ALS are sporadic, of unknown cause.

The concurrence of alterations in several molecular and cellular mechanisms raises the difficulty to find therapies that only target a single factor. In fact, therapies that only target a single factor have largely failed when translated into clinical trials in the last years. For this reason, cell therapy has emerged as a promising way to target several disease-related mechanisms involved in the disease.

In this study, we assayed two different cell therapy protocols to protect both peripheral and central neurons. For this purpose, we combined injections of bone marrow cells in several muscles of the hindlimbs of a mouse (TA and Quadriceps) and in the spinal cord (L4-L5).

the connection of motor axons with the muscle, and an injection of bone marrow cells in the lumbar s mice in order to protect the spinal motoneurons.



Cross section of the lumbar spinal cord, stained with cresyl violet, from a treated mouse (B) and from a not treated mouse (C). A higher number of motoneurons in the anterior horn (in the region marked with a circle) can be seen than in the control.

The mice were repeatedly evaluated along two months after the cell therapy. The results found indicated that the motor outcomes significantly improved the motor outcomes, measured in rotarod test and in electrophysiological tests. The results found that the dual cell therapy tended to preserve the survival of spinal motoneurons at late stages and reduced the neuroinflammatory reaction in the spinal cord, although did not prolong mice survival.

Overall, our findings suggest that targeting more than one affected area of the motor system with both therapies may result in a valuable therapeutic intervention for ALS.

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