

hTERT-immortalized and Primary Keratinocytes Differentiate into Epidermal Structures in 3D Organotypic Culture

Application Note

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Abstract

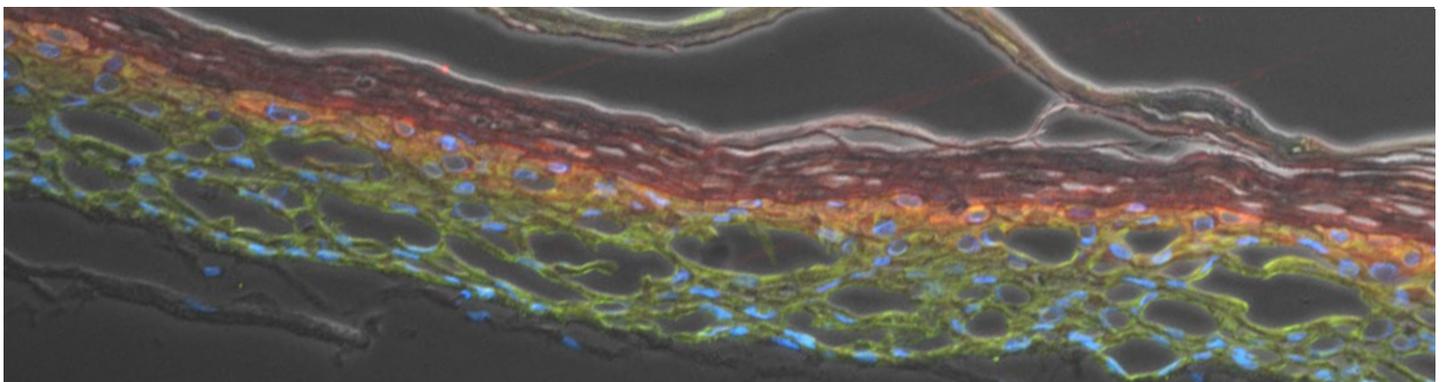
Primary and immortalized keratinocyte cultures are essential models for investigating the normal and pathological biology of the epidermis. In this study, we confirmed that an immortalized keratinocyte cell line, Ker-CT, is able to differentiate into organotypic skin equivalents in a 3D culture model.

Introduction

Human keratinocytes are instrumental for the study of skin biology and the pathogenesis of skin-related disease¹. The limited lifespan of primary keratinocyte cultures greatly limit their potential for advanced mechanism studies. The Ker-CT cell line was developed by the introduction of retroviruses expressing human telomerase (hTERT) and mouse cyclin-dependent kinase 4 genes into human neonatal foreskin keratinocytes². Ker-CT cells express basal epidermal stem cell markers such as tumor protein 63 and keratin 5. These cells are also positive for telomerase expression, fail to senesce, continue proliferation after more than 250 population doublings, and upregulate the expression of differentiation markers in response to increased calcium concentration in conventional 2D culture². Based on these positive cell attributes we examined whether the Ker-CT cells could recapitulate the epidermal organotypic structure when grown in a 3D culture model system.

Materials and Methods

A matrix containing 84% Eagle's Minimum Essential Medium (EMEM; Lonza), 9.28% Fetal Bovine Serum (FBS; ATCC® 30-2020™), 1.48 mM L-glutamine (ATCC® 30-2214™), 0.28% sodium bicarbonate, 0.84 mg/mL rat tail collagen (Corning Cat. No. 354236), and 4.4×10^4 cells/mL primary human neonatal dermal fibroblasts (ATCC® PCS-201-010™) were cast into 3.0 μm Falcon® permeable supports (Corning Cat. No. 354573*) in deep 6-well plates (Corning Cat. No. 355467). After culturing for 7 days at 37°C in a 5% CO₂ incubator, the collagen plug contracts. Medium in the permeable support was then removed from the apical chamber. Primary human neonatal dermal keratinocytes (ATCC® PCS-200-010™) or Ker-CT (ATCC® CRL-4048™) were seeded at 2×10^5 cells/well into a PYREX® cloning cylinder (Corning Cat. No. 3166-6) that was placed on top of the matrix and incubated under the same conditions for 2 hours. Epidermalization Medium (EPM 1), consisting of 73% Dulbecco's Modified Eagle's Medium (DMEM; ATCC® 30-2002™), 24% Ham's F12 Medium, 4 mM L-glutamine, 0.15 μM hydrocortisone, 1X ITES media supplement (Lonza), 0.01 mM O-phosphorylethanolamine, 0.18 mM adenine, 0.004 μM progesterone, 0.02 nM triiodothyronine, and 0.1% FBS, was added to the apical and basal chambers of the permeable support. After two days of incubation at 37°C, the media in the basal chamber was replaced with EPM 2, comprised of 48% DMEM, 48% Ham's F12, 4 mM L-glutamine, 0.15 μM hydrocortisone, 1X ITES, 0.01 mM O-phosphorylethanolamine, 0.18 mM adenine, 0.02 nM triiodothyronine, and 2% FBS, while the media in the apical chamber was removed to create an air-liquid interface (ALI)³. The cells were allowed to differentiate for 11 to 21 days post-



Primary keratinocytes cultured at the Air-Liquid Interface using Falcon permeable supports.

airlift at which time they were fixed with 4% paraformaldehyde, cross sectioned, and either hematoxylin and eosin (H&E) stained or stained for specific markers using primary antibodies directed against keratin 14 (KRT14; Thermo Fisher) and filaggrin (Thermo Fisher). Secondary antibodies used for marker tests were goat anti-mouse 584 (Thermo Fisher) or goat anti-rabbit 488 (Thermo Fisher). See Appendix 1 for a flow diagram of the method.

***Note:** Corning BioCoat™ 3.0 µm PET control permeable supports (Corning Cat. No. 354573, 6/pk, 24/cs) are packaged ready-to-use in Falcon® cell culture insert companion plates. The equivalent permeable support (Corning Cat. No. 353091; individually packaged in blisters, 1/pk, 48/cs) and companion plate (Cat. No. 353502; 1/pk, 50/cs) may also be ordered separately.

Results and Discussion

To evaluate the differentiation capability of Ker-CT cells in a 3D organotypic skin equivalent model after consecutive sub-cultivations, we tested the Ker-CT cells at early passage (passage 6, 10 population doublings (PDL) post-thaw) and late passage (passage 15, 36 PDL post-thaw) after recovery from cryopreservation. Primary human foreskin keratinocytes at passage 2 after recovery from cryopreservation were used as positive controls for skin equivalent differentiation. As shown by H&E stain, primary keratinocytes developed into characteristic stratified epidermis architecture composed of proliferating basal

and differentiated suprabasal keratinocytes, as well as an evident superficial stratum corneum after 11 days in ALI culture (Figure 1).

Ker-CT cells also developed into similar stratified epidermis architecture, although the stratum corneum was thinner than what was observed in primary keratinocytes. No apparent difference was seen between the early and late passages of Ker-CT cells (Figure 1). Further, after 21 days of ALI culture, Ker-CT cells at both early and late passages differentiated into characteristic epidermis structures that are reminiscent of primary keratinocytes (Figure 2). To verify the full differentiation of the cells, frozen cross sections were stained with antibodies directed against filaggrin, which stains for well differentiated keratinocytes, and KRT14, which stains all epidermal cells. Filaggrin in both primary keratinocytes and Ker-CT displayed increased positivity in cells that are closer to the surface and nearing terminal differentiation. Both primary keratinocytes and Ker-CT cells displayed KRT14 immunoreactivity throughout the basal and suprabasal epidermal structure (Figures 3 and 4).

Data demonstrated that the immortalized Ker-CT cells retain differentiation capability after an extended *in vitro* culture period beyond the capacity of normal primary keratinocyte culture. Thus, Ker-CT cells have significant value for a wide variety of investigations of human epithelial biology in a tissue physiology-relevant context.



Figure 1. Micrograph of H&E-stained cross sections of A) primary foreskin keratinocytes at passage 2, B) Ker-CT at passage 6, and C) Ker-CT at passage 15 on top of a collagen gel embedded with primary foreskin dermal fibroblasts after 11 days post-ALI culture.



Figure 2. Micrograph of H&E-stained cross sections of A) primary foreskin keratinocytes at passage 2, B) Ker-CT at passage 6, and C) Ker-CT at passage 15 on top of a collagen gel embedded with primary foreskin dermal fibroblasts after 21 days post-ALI culture.

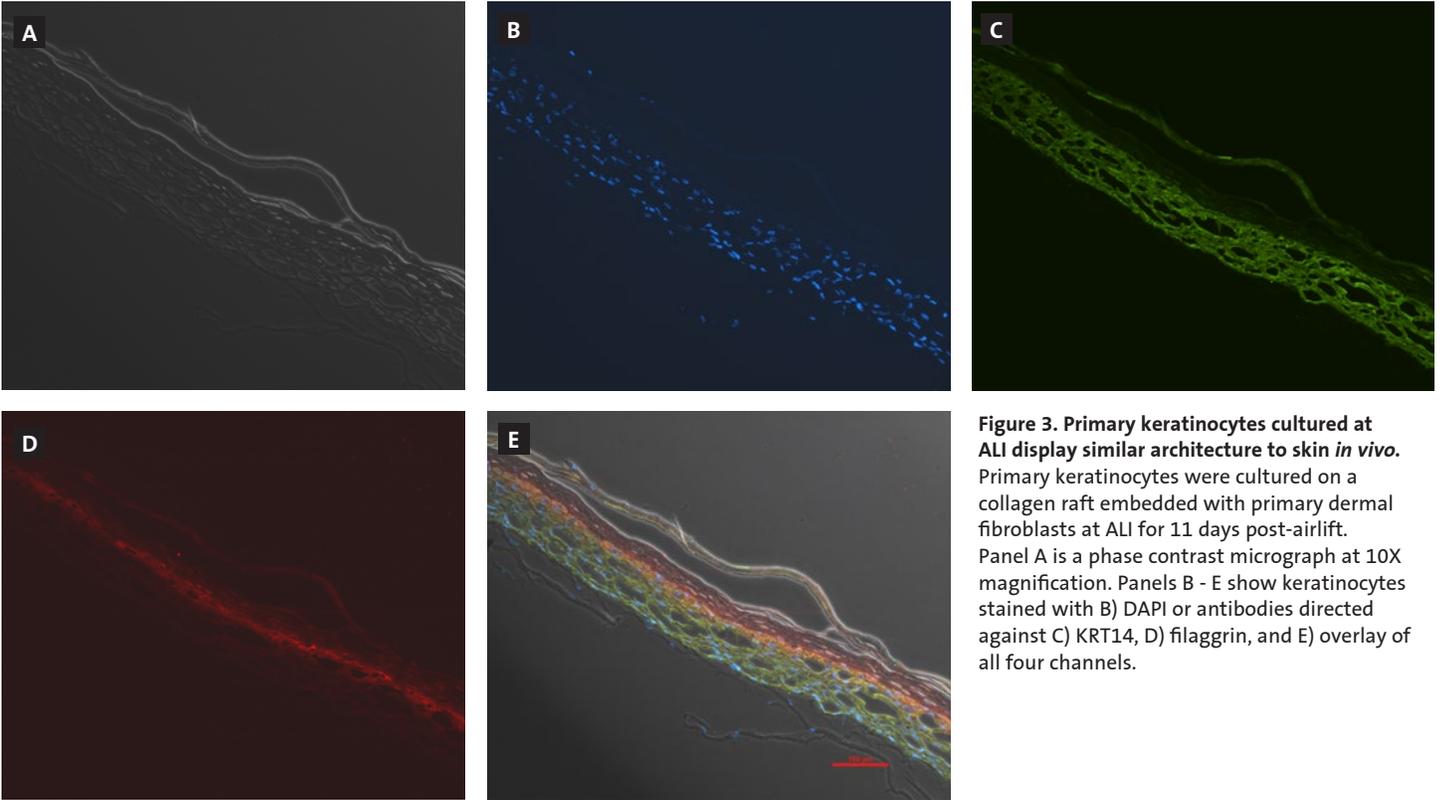


Figure 3. Primary keratinocytes cultured at ALI display similar architecture to skin *in vivo*. Primary keratinocytes were cultured on a collagen raft embedded with primary dermal fibroblasts at ALI for 11 days post-airlift. Panel A is a phase contrast micrograph at 10X magnification. Panels B - E show keratinocytes stained with B) DAPI or antibodies directed against C) KRT14, D) filaggrin, and E) overlay of all four channels.

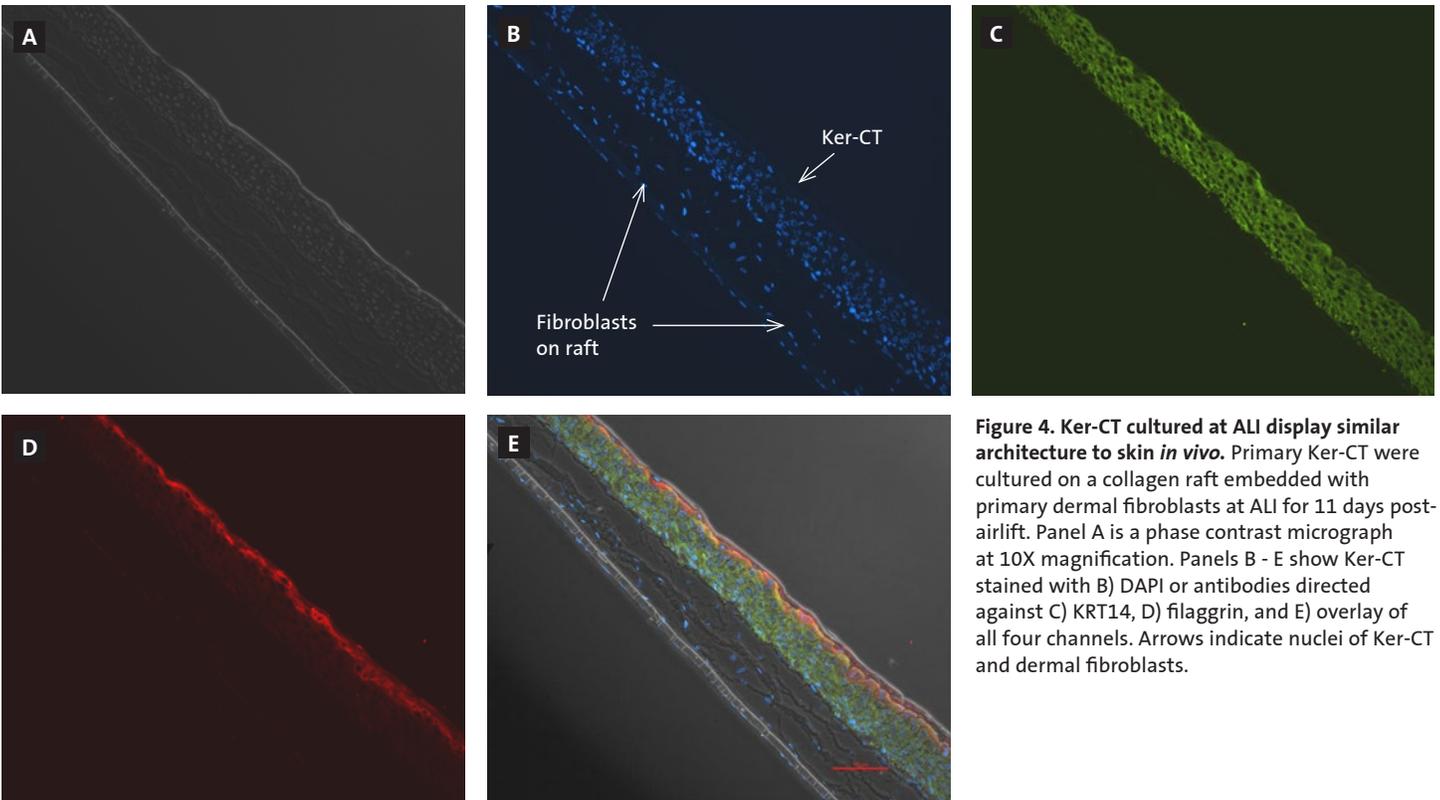


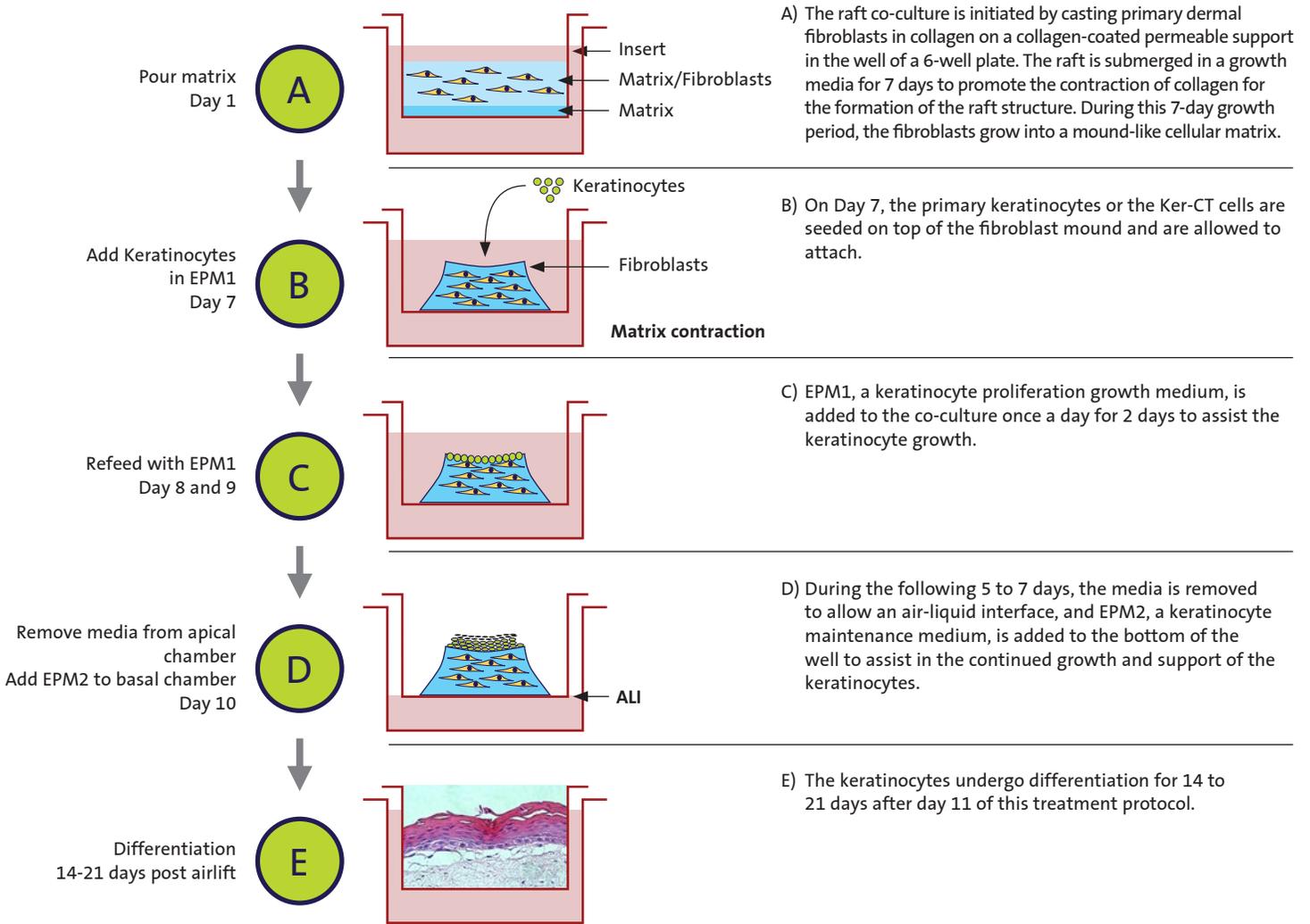
Figure 4. Ker-CT cultured at ALI display similar architecture to skin *in vivo*. Primary Ker-CT were cultured on a collagen raft embedded with primary dermal fibroblasts at ALI for 11 days post-airlift. Panel A is a phase contrast micrograph at 10X magnification. Panels B - E show Ker-CT stained with B) DAPI or antibodies directed against C) KRT14, D) filaggrin, and E) overlay of all four channels. Arrows indicate nuclei of Ker-CT and dermal fibroblasts.

Conclusion

ATCC Ker-CT cells formed 3D epidermal structures when grown under ALI conditions on Falcon® permeable supports, rendering them an excellent and reproducible *in vitro* whole-cell model for the examination of mechanisms regulating keratinocyte biology in the processes of wound healing, dermal remodeling, cancer research, and drug toxicology evaluation in a tissue physiology-relevant context.

Appendix 1.

Overview of co-culture of primary keratinocytes or Ker-CT grown on collagen raft embedded with primary dermal fibroblasts.



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