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## BACKGROUND AND OBJECTIVES

The use of prosthetic mesh for abdominal wall repairs can significantly reduce the risk of hernia recurrence<sup>1</sup>. However, macrophage (MØ) phenotype was reported as a predictor of constructive remodeling of abdominal connective tissue following the implantation of hernia meshes<sup>2</sup>. Inflammation response characterized by an uncontrolled release of pro-inflammatory M1 cytokines or chemokines, and tissue-degrading enzymes has been shown to be responsible for postoperative complications. In contrast, the angiogenic and tissue remodeling activities of the alternative anti-inflammatory M2 pro-remodeling MØ have potential use in tissue regenerative. A new type of hernia implants combines monofilaments, Polypropylene (PP) and a biobased and natural slowly bioabsorbable polymer, Poly-L-Lactic Acid (PLLA). The partially (60%) absorbable PLLA/PP and non absorbable PP meshes manufactured by COUSIN SURGERY are 4DVentral® and Biomesch P1®, respectively. The contribution of PLLA in regulated inflammatory response and in enhancing abdominal repair remains unknown or unclear.

In this present study, we aimed to characterized the inflammatory profiles of macrophages *in vitro* in presence of composite partially absorbable PLLA/PP 4DVentral® compared to permanent PP Biomesch P1® by quantify cytokine release in culture supernatants and mRNA expression levels in human MØs.

## MATERIAL AND METHODS

Mesh. PLLA/PP 4DVentral® vs. PP Biomesch P1® meshes.

Sterilization of Mesh. ETO-sterilized.

*In vitro* assay Human monocytic leukemia cell line. THP-1 (10,000 cells/well in 24-well plate) were differentiated to MØ after stimulation with PMA 100 ng/ml for 3 days. The PMA-differentiated THP-1 MØ (adherent form) were then cultured with or without the meshes and pro-inflammatory cytokines (Figure 1).

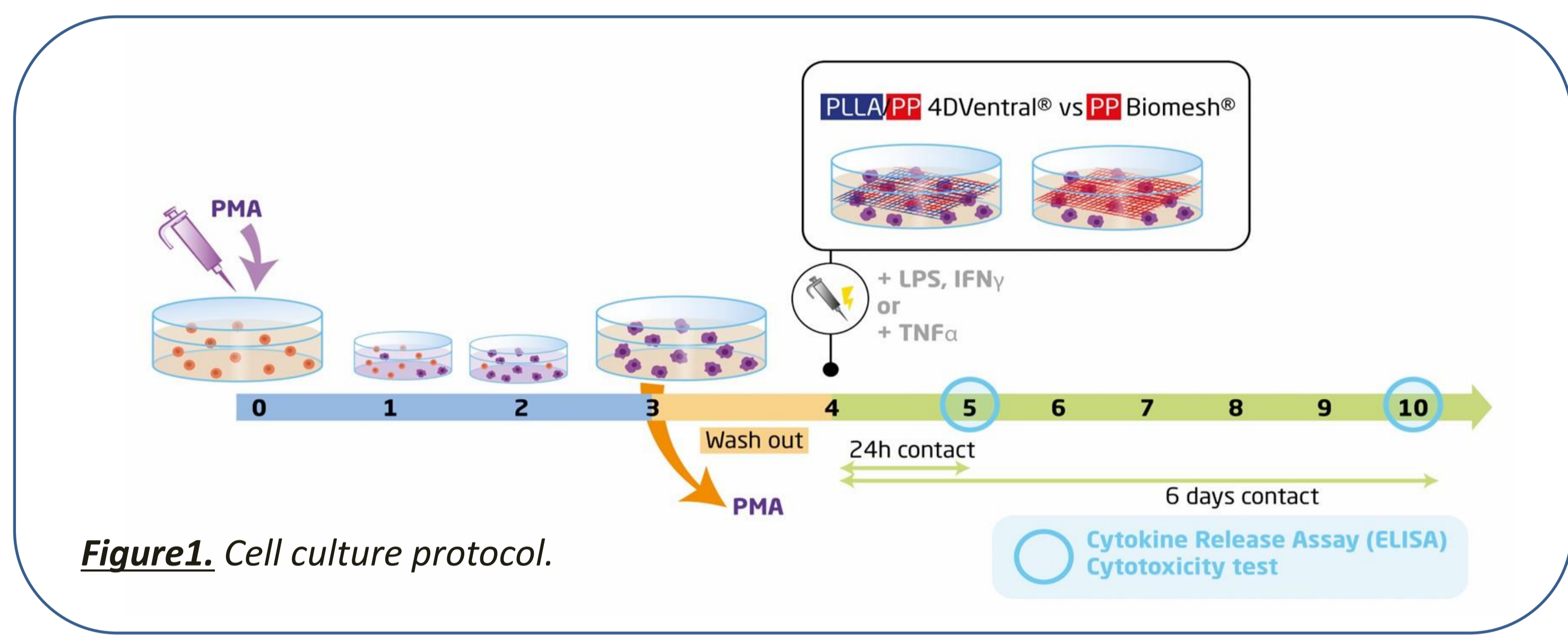


Figure 1. Cell culture protocol.

**Isolation of human peripheral blood monocytes and differentiation.** Human blood-derived monocyte isolated by density centrifugation of heparinized blood on Ficoll-Paque were cultured with fresh complete medium (RPMI 1640) containing recombinant human IL-1β (15 ng/ml) to obtain M1 macrophages or IL-4 (15 ng/ml) to obtain M2 macrophages.

**Cytotoxicity assay.** Cytotoxicity of meshes was evaluated according to the ISO 10993-5 standard. The AlamarBlue® cell viability assay reagent was used to measure cellular metabolic activity as an indicator of cell viability, proliferation and cytotoxicity in direct or indirect (24h mesh-conditioned media) contact with Mesh. \*

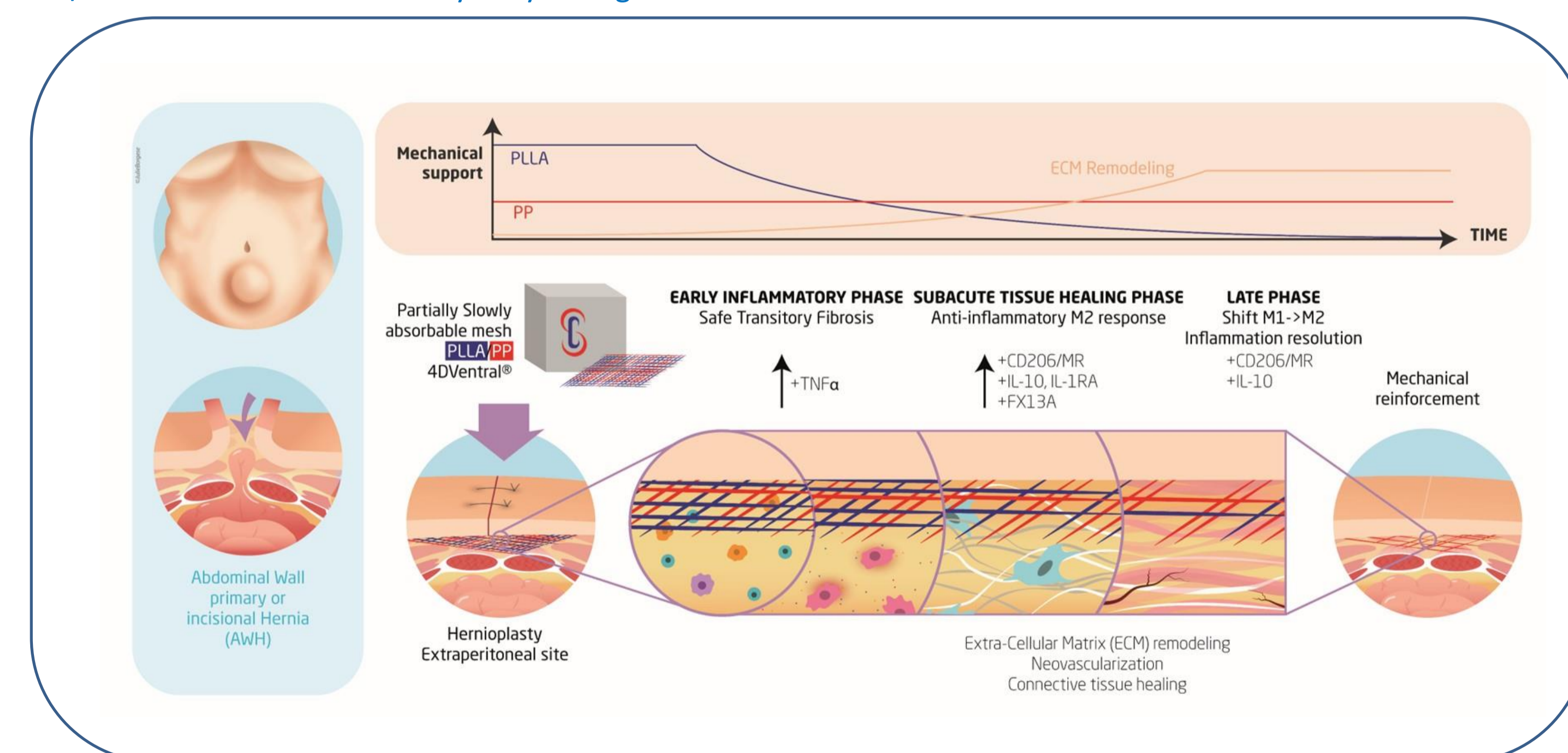
**RNA extraction and analysis :** Cells were homogenized in TRIzol® reagent. Total RNA was extracted using the chloroform/isopropanol/ethanol method. The gene expression were evaluated by TR-qPCR

**Cytokine secretion :** cytokines were quantified by Human TNF-α, IL-10 and IL-1R assay kits (Invitrogen, Carlsbad, CA).

## DISCUSSION

We found that PLLA/PP 4DVentral® enhances polarization of human naïve MØ to an M2-like phenotype at early time (1-6 days) by increased mRNA expression levels and release of anti-inflammatory markers and cytokines. Interestingly, PLLA/PP 4DVentral® shifted the M1 MØ to an M2-like phenotype, mainly through induction of IL-10 secretion.

Our results shown that composite partially absorbable PLLA/PP 4DVentral® modulates the inflammatory profile of human MØ. The controlled transition from M1 to M2 MØ may be due to the hydrophilic properties of PLLA and/or L-lactic acid from PLLA hydrolytic degradation.



## CONCLUSION

It has been reported that with the transformation of MØ phenotype, the increase of IL-10 levels represents the transition of muscle regeneration from proliferation to differentiation and growth [4]. The Composite PLLA/PP partially absorbable 4DVentral® could promote an anti-inflammatory response of MØ leading to initiate the pro-regenerative process of defects of the anterior abdominal wall during hernia repair by targeting the Extra-Cellular Matrix (EMC) homeostasis of abdominal connective tissue.

While waiting to confirm these results in an experimental model, we highlight the interest of using 4DVentral® for treating patients with wound-healing pathologies restricting during hernia repair, with a guarantee to limit the late-stage hernia recurrence by the presence of the non-absorbable PP to abdominal reinforcement.

## RESULTS

### 1. Composite PLLA/PP 4DVentral® and PP Biomesch P1® meshes are safe on naïve THP-1 MØ

The cytotoxicity evaluation was investigated and show that both composite PLLA/PP 4DVentral® and non-absorbable PP Biomesch P1® are nontoxic *in vitro* toward PMA-differentiated naïve THP-1 MØ in direct culture condition (Figure 2). Therefore, the values of cytokines produced by these cells and measured from supernatant's are systematically related to the raw values (UA) of the metabolic activity measured in each condition.

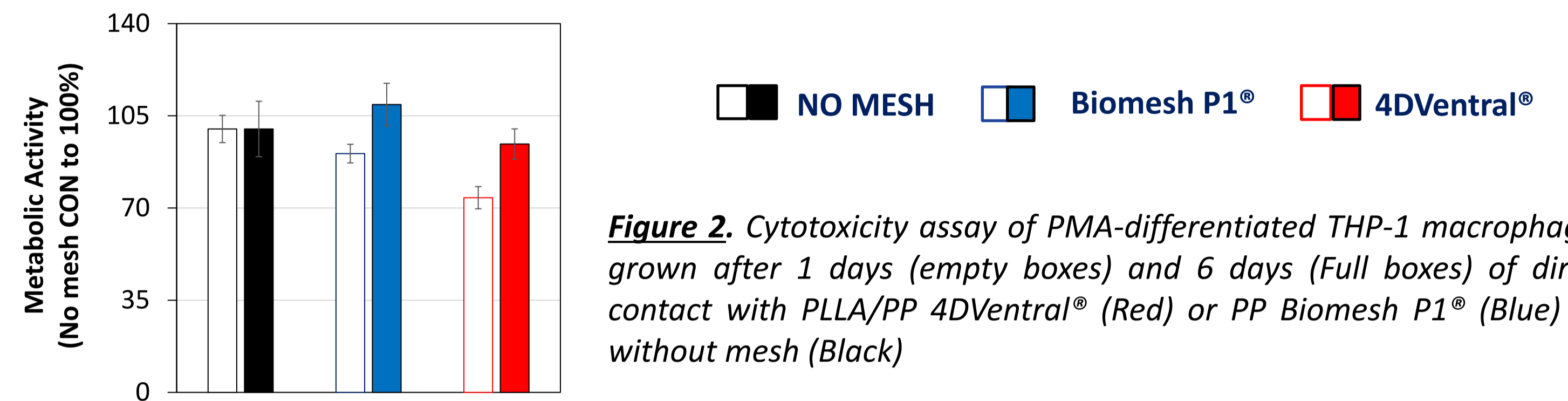


Figure 2. Cytotoxicity assay of PMA-differentiated THP-1 macrophages grown after 1 days (empty boxes) and 6 days (Full boxes) of direct contact with PLLA/PP 4DVentral® (Red) or PP Biomesch P1® (Blue) vs. without mesh (Black)

### 2. Composite PLLA/PP 4DVentral® mesh induces an increased secretion level of anti-inflammatory M2 (IL-10 and IL-1RA) cytokines in naïve THP-1 MØ

The composite PLLA/PP 4DVentral® (red histograms) increases the anti-inflammatory IL-10 release after 24h of culture (Figure 3.A) and potentiates IL-1RA secretion at 6 days (Figure 3.B) in PMA-differentiated THP-1 naïve MØ compared to PP Biomesch P1® and no mesh (red and black histograms, respectively)

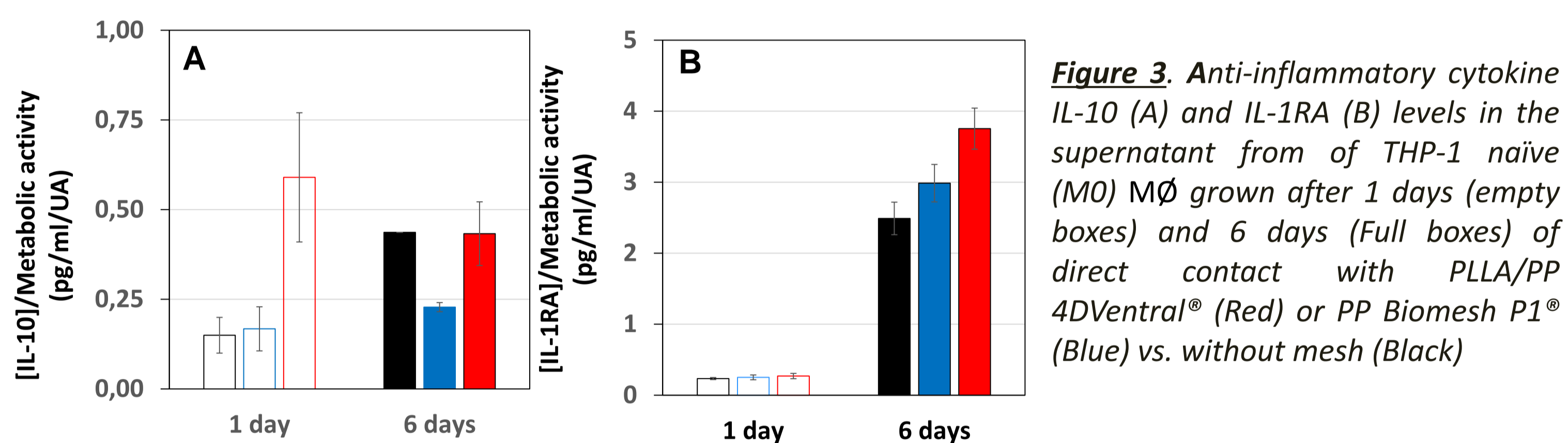


Figure 3. Anti-inflammatory cytokine IL-10 (A) and IL-1RA (B) levels in the supernatant from of THP-1 naïve (MØ) MØ grown after 1 days (empty boxes) and 6 days (Full boxes) of direct contact with PLLA/PP 4DVentral® (Red) or PP Biomesch P1® (Blue) vs. without mesh (Black)

### 3. Composite PLLA/PP 4DVentral® mesh increases secretion levels of the pro-inflammatory cytokine TNFα in naïve THP-1 MØ

According to the literature about fully resorbable P4HB monofilament mesh (Phasix®, Bard)<sup>3</sup>, we found that the composite PLLA/PP 4DVentral® increases also pro-inflammatory cytokine TNFα release in naïve THP-1 MØ (Figure 4).

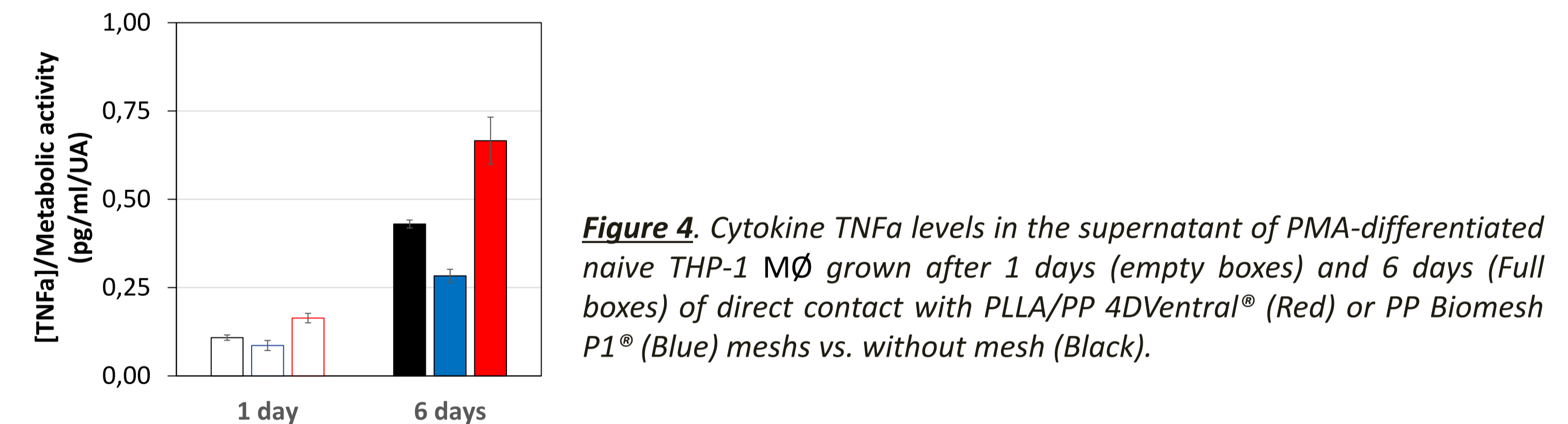


Figure 4. Cytokine TNFα levels in the supernatant of PMA-differentiated naïve THP-1 MØ grown after 1 days (empty boxes) and 6 days (Full boxes) of direct contact with PLLA/PP 4DVentral® (Red) or PP Biomesch P1® (Blue) meshes vs. without mesh (Black).

### 4. Composite PLLA/PP 4DVentral® mesh drives pre-activated THP-1<sub>INFγ/LPS</sub> M1-like to anti-inflammatory M2-Like MØ

The composite PLLA/PP 4DVentral® (red histograms) inhibits the pro-inflammatory IL-6 release (Figure 5.A) and in the same way increases IL-10 secretion (Figure 5.B) compared to PP Biomesch P1® and no mesh (red and black histograms, respectively) in THP-1-derived MØ that were polarized with IFN-γ/LPS to the M1-type both at 24h and 6 days of culture.

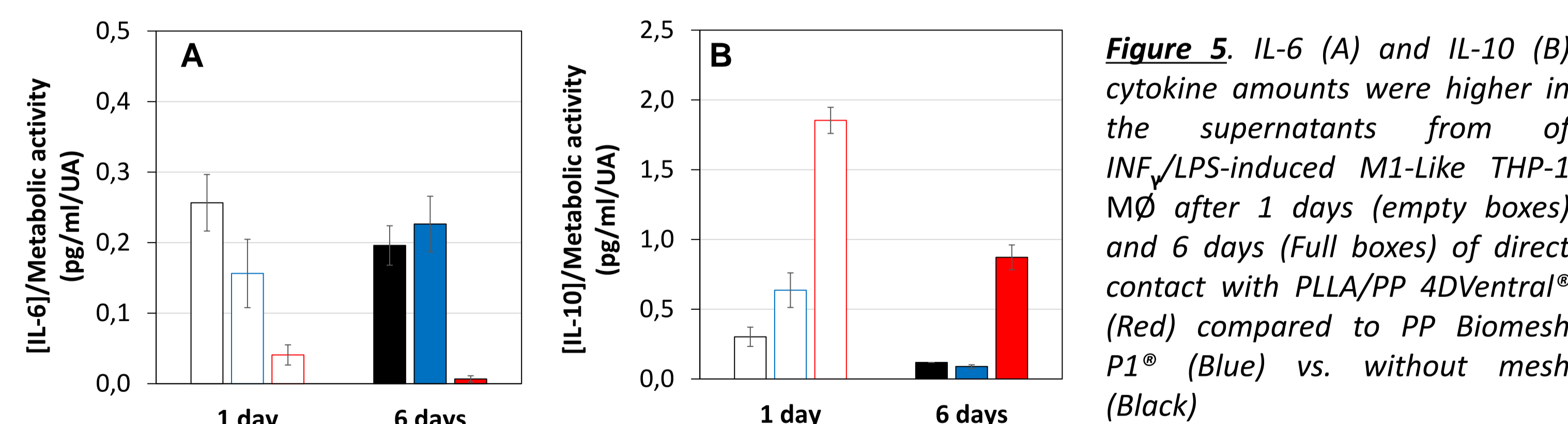


Figure 5. IL-6 (A) and IL-10 (B) cytokine amounts were higher in the supernatants from of INFγ/LPS-induced M1-Like THP-1 MØ after 1 days (empty boxes) and 6 days (Full boxes) of direct contact with PLLA/PP 4DVentral® (Red) compared to PP Biomesch P1® (Blue) vs. without mesh (Black)

### 5. Composite PLLA/PP 4DVentral® mesh potentiates the anti-inflammatory M2 profile of hMDM

The composite PLLA/PP 4DVentral® (red histograms) potentiates the anti-inflammatory CD206 (Figure 6.A) and F13A (Figure 6.B) gene levels in IL-4-induced polarization of hMDM compared to PP Biomesch P1® and no mesh (red and black histograms, respectively)

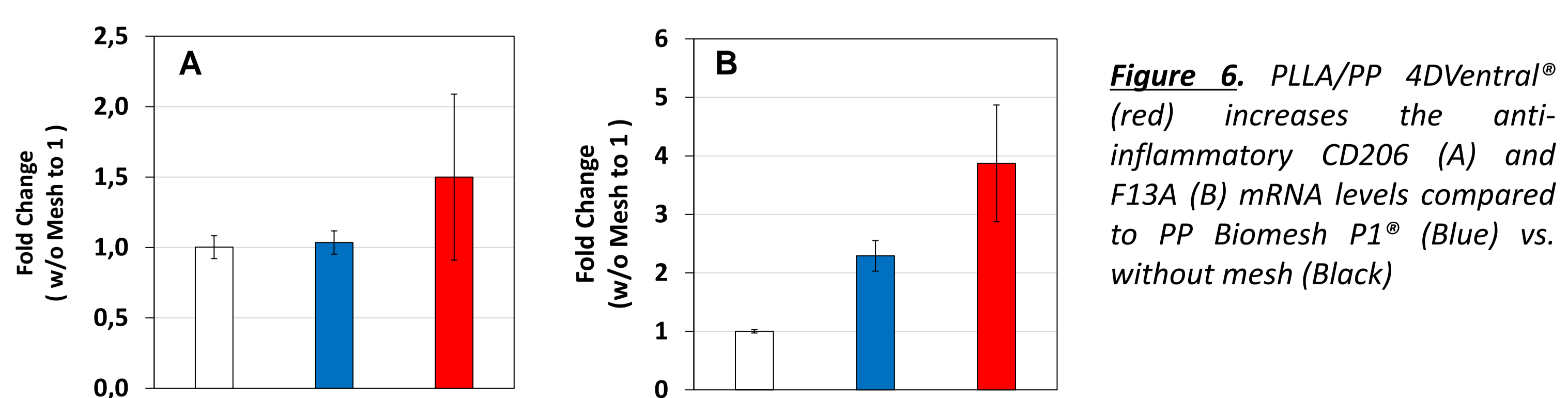


Figure 6. PLLA/PP 4DVentral® (red) increases the anti-inflammatory CD206 (A) and F13A (B) mRNA levels compared to PP Biomesch P1® (Blue) vs. without mesh (Black)

## REFERENCES

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