Is it still necessary to conduct research on human embryos, including the creation of embryos for research purposes?

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Centre for Reproductive Medicine Reproduction and Immunology



Symposium FCE 25 November, 2016

Conflict of interest

Nothing to declare

Outline

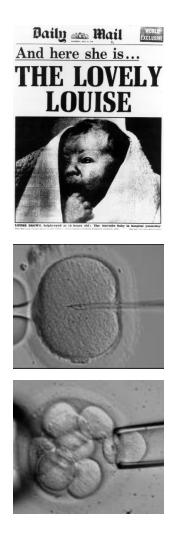


- Plea for research on human embryos
 - → Spare human embryos
 - \rightarrow Examples
 - → Compare with research on mouse embryos
 - → Belgium UZ Brussel

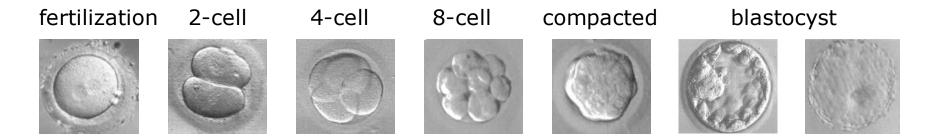
- Need to create human embryos for research
 - → Belgium UZ Brussel
 - → Examples

Revolution in ART procedures

- IVF (Steptoe and Edwards, 1978)
 → Female infertility
- ICSI (Palermo et al. 1992)
 - → Male infertility
 - → Invasive
- Embryo biopsy for genetic testing (Handyside et al. 1993)
- In vitro culture of human embryos
 - → Available for research



ART children



New ART procedures are introduced without appropriate testing

Ca2+ ionophore for poor fertilization

Extended embryo culture Culture media supplemented with growth factors Ca2+ ionophore for poor embryo development

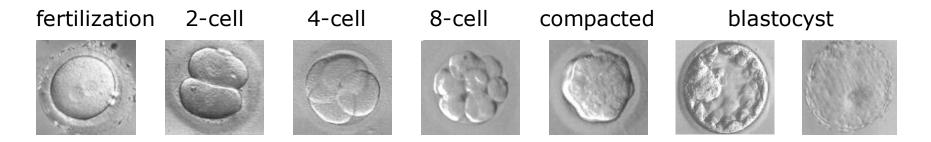
Oocyte and embryo vitrification

IVM

Mitochondrial transfer

Genome editing

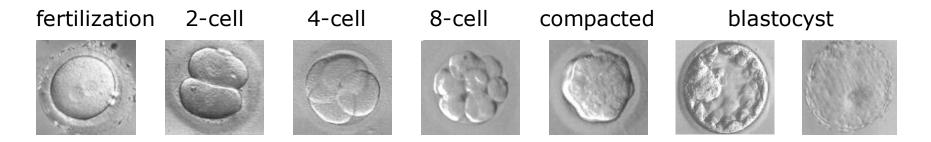
ART children



- New ART procedures are introduced without appropriate testing
- Developmental origin of disease
 - → Metabolic disorders
 - Diabetes
 - Obesitas
 - → Cardiac diseases
 - → Imprinting disorders



ART children



- New ART procedures are introduced without appropriate testing
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Research on the efficacy and safety of ART procedures

- Hypothesis
- Preclinical research in animal models
 - → Small animals (rodents)
 - → Large animals (cows and pigs)
- Preclinical research with human gametes and embryos donated to research
- Prospective clinical trials in IVF centres
 - → Small scale single centre
 - → Large RCT multi centre
- Assess clinical and cost effectiveness
- Longterm children follow up



Harper et al. 2012; Brison et al. 2013

- Reproductive medicine
 - → Efficacy and safety of ART techniques
 - → Infertility treatment
- Basic knowledge
 - → Reproductive biology
 - Fertilization
 - Preimplantation development
 - Implantation
 - → Stem cell biology
 - Model early embryogenesis
 - Transplantation therapy
 - Infertility treatment: germ cell differentiation
 - Cancer





- Hypothesis
- Basic research in animal models
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Research in animal models

- Human population is outbred whereas many animals are inbred
- Humans are subfertile whereas animals are fertile
- Species differences: data cannot always be extrapolated to the human



Animal models extrapolated to the human

- The human being is 'unique'
 - → Ethical and legal issues



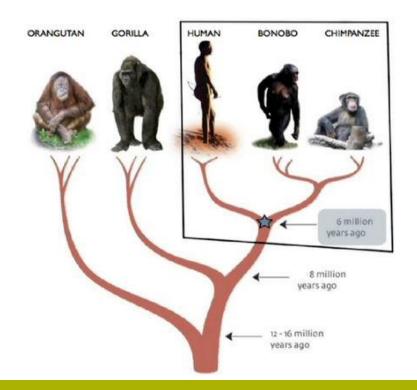
animalarium stress embryos after natural conception



cadavers IVM oocytes

Animal models extrapolated to the human

- The human being is 'unique'
 - → Higher primates
 - Similar ethical and legal issues
 - → Treat the human embryo with respect



- Hypothesis
- Basic research in animal models
 - → Small animals (rodents)
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- Hypothesis
- Basic research in animal models
 - → Small animals (rodents)
 - → Large animals (cows and pigs)
- Basic research with human gametes and embryos donated to research
 - → Spare (supernumerary) embryos
 - → Embryos created for research

Research on spare human embryos

- Created for the couple undergoing IVF/ICSI treatment
- Supernumerary: not used for transfer in the fresh cycle
 - Bad quality non-PGD/PGS and PGD/PGS
 - Not transferred
 - Not cryopreserved
 - \rightarrow Good quality
 - Non-PGD/PGS
 - Cryopreserved (available after the legally determined period)







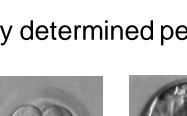
Day 3

Day 6



Research on spare human embryos

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 - → Good quality
 - Non-PGD/PGS
 - Cryopreserved (available after the legally determined period)
 - PGD/PGS
 - Genetically abnormal
 - Fresh after Pb or blastomere biopspy
 - Cryopreserved after TE biopsy









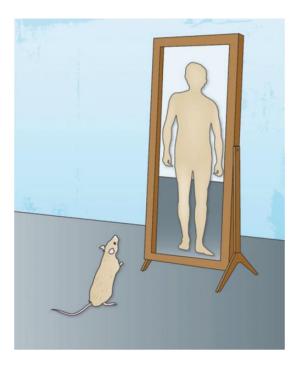


Day 3

Day 6

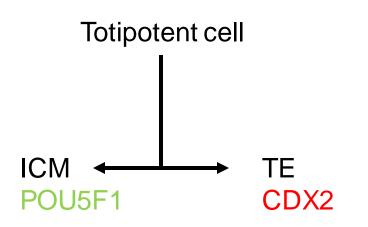
Use of spare human embryos for research

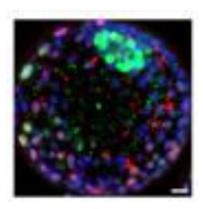
- A mouse is not a human being
 - → First lineage differentiation
 - → Second lineage differentiation
 - → Implantation
 - → Embryonic stem cells (ESC)



First lineage differentiation

- Cell lineages are similar, timing and pathways are different
 - \rightarrow Inner cell mass (ICM) \rightarrow embryo proper
 - Extraembryonic endoderm, mesoderm, ectoderm
 - Embryonic endoderm, mesoderm, ectoderm
 - Germ cells
 - \rightarrow Trophectoderm (TE) \rightarrow trophoblast (TB)





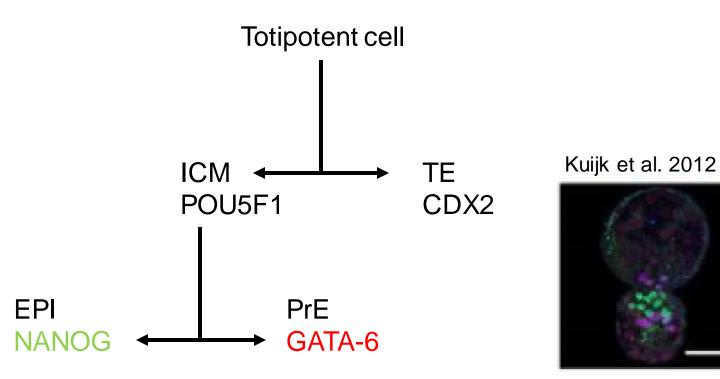
Niakan and Eggan, 2013

First lineage differentiation

- Mouse
 - → KO mice, CRISPR/Cas9
 - → siRNA, morpholinos, small inhibitors
 - → TE: CDX2, GATA3, EOMES, ELF5, TCFAP2C
 - → Position, polarization, compaction (Hippo: TEAD4 and YAP)
- Human
 - → Descriptive studies
 - Immunocytochemistry (protein) (Cauffman et al. 2006 and 2009; Niakan and Eggan, 2013)
 - qPCR (mRNA) (Wong et al. 2010; Yan et al. 2013; Kleijkers et al. 2015; Blakely et al. 2015)
 - → Functional studies: proof of evidence is lacking
 - Small inhibitors (Krivega et al. 2015)
 - None with growth factors
 - None with genetic modifications

Second lineage differentiation

- Cell lineages are similar, timing and pathways are different
- Inner cell mass (ICM)
 - → Epiblast (EPI)
 - → Hypoblast or primitive endoderm (PrE)



Second lineage differentiation

- Mouse
 - → EPI: NANOG (FGF4)
 - \rightarrow PrE: GATA6 (FGF2R)
- Human
 - → Descriptive and functional studies (small inhibitors)
 - Not FGF4 (Kuijk et al. 2012; Roode et al. 2012)
 - TGFbeta (Van der Jeught et al. 2013)

Reproduction - Implantation

- Mouse
 - \rightarrow Polyestrous cycle (4-5 days)
 - → Short day breeder, "in heat"
 - → No menstruation (the endometrium is reabsorbed)
 - → Decidualization after implantation (in presence of an embryo)
 - → Embryo encapsulation
 - \rightarrow LH
- Human
 - → Menstrual cycle (28 days)
 - → Continuous breeder, hidden ovulation
 - → Menstruation (endometrium is shed)
 - → Spontaneous decidualization (in absence of an embryo)
 - \rightarrow Embryo invasion
 - \rightarrow hCG

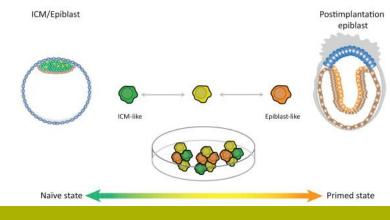




Embryonic stem cells

- Naive ESC
 - → Originate from preimpantation ICM/EPI
 - → Ground state in mice (permissive strains)
 - → Flat colonies
 - → BMP4 and LIF
 - → Sperm cells (Zhou et al. 2016)
 - \rightarrow Oocytes (Hikabe et al. 2016)

- Primed ESC: EpiSC
 - → Originate from postimplantation EPI
 - → Ground state in human (outbred)
 - \rightarrow Pilled up colonies
 - → FGF2 and Activin A
 - → Review (Hendriks et al. 2015)



Research on human embryos in Belgium

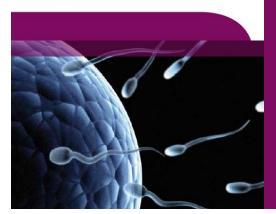
- Belgian law May 2003: research on human embryos *in vitro*
 - → Permission Local Ethical Committee (LEC)
 - → Permission Federal Committee Embryo (FCE)
- Do's
 - → Project and goal
 - → Benefit for science (reproduction and/or disease)
 - → No alternative research methodology
- Don'ts
 - → Commercialization (patents)
 - \rightarrow Eugenetics
 - → Reproductive cloning
- Donor autonomy and privacy are respected
- Embryos are ultimately destroyed (not transferred)
 - → In vitro development until day 14

Research on human embryos at the VUB

Brochure and informed consents

MEDICALLY ASSISTED PROCREATION **SCIENTIFIC** RESEARCH using human gametes and/or embryos





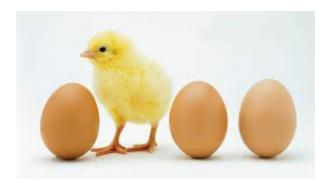
Advances in fertility medicine owe a great deal to the scientific research that is constantly taking place in this area. This would not be possible, however, without the help of patients who are willing to donate their tissues. This brochure explains more about the various research projects at UZ Brussel and your rights as a (participating) patient.

Centrum Reproductieve Geneexkunde Laarbeeklaan 101 – 1090 Brussel	Tel. +32 (0)2 477 66 59 - Fax +32 (0)2 477 66 49 www.brunat
10	CONSENT FOR ENTIFIC RESEARCH N FRESH GAMETES OT BE USED IN YOUR TREATMENT
The Centrum voor Reproductieve Geneeskunde (CRO)	and Ms -
of the Universitair Ziekenhuis Brussel,	date of birth -
represented by Prof. Dr. H. Tournaye,	and partner -
head of the CRE department and administrator	date of birth -
of the reproductive human tissue bank (MLM),	IMing at (please mention both addresses if applicable)
hereafter called UZ Brussel, on the one hand,	
In accordance with the law of 19 December 2008 on procurement	and -
and use of human tissue for medical purposes in humans or for	alla -
scientific research, the use of excess human tissue in scientific	
research requires the consent of the person from whom the tissue	hereafter called the undersigned on the other hand.
originates.	have agreed on the following.
Information on scientific research*	Project 6 - Research Into the Interface between human
Dear Madam, Dear Sir,	reproduction: obtaining human embryonic stem cells from
In the course of fertility treatment it is possible that your gameles (eggs,	tation embryos.
sperm) will not be eligible for use in your treatment. In that case you may decide to donate them for scientific research.	Project 13 - Genome-wide haplotyping of blastomeres method for preimplantation genetic diagnosis.
This contract is accompanied by a brochure (the SR Brochure [*]), contai-	Project 14 – Implantation immunology: the role of uterine of
ning information on scientific research involving gametes and embryos	Project 15 – Research into regulators of implantation i
which cannot (can no longer) be used for you.	embryo.
By signing this contract you indicate that you have read this brochure	construction of the second sec
and understood the information.	Projects for which embryos ARE created
	Project 7 - Tolipotency and allocation during human pre-
The following research projects are discussed in the brochute:	development.
Projects for which embryos ARE NOT created	Project 8 - Totipotency in early human embryos and embryos
Project 1 - Refinement of INF techniques.	Project 9 - Totipotency and differentiation in early human en
Project 2 - Refinement of PGD techniques (PGD - pre-implantation	Project 10 - Research into the genetic stability and safe
genetic diagnosis).	reproduction techniques.
Project 3 - Detection of chromosomal abnormalities in pre-implantati-	Project 11 - Vitrification of human eggs and embryos.
on embryos using array CBH.	Project 12 - Research into the characteristics of human
Project 4 - Chromosomal abnormalities in pre-implantation human em-	stem cells: differences and similarities in gene expression
bryos and embryonic stem cells: causes, mechanisms and consequences	tiation capacity.
for in-vitro fertilisation and regenerative medicine.	
Project 5 - Epigenetic stability in gametes, pre-implantation embryos	If you give your consent for scientific research in this ag
and human embryonic stem cells, focusing on the behaviour of dynamic	wish to exclude specific projects, please indicate the co
mutations in myotonic dystrophy and fraglie X syndrome.	numbers

Centrum voor Reproductieve Geneeskunde

Research on human embryos at the VUB

- Brochure and informed consents
 - \rightarrow Particular permission LEC and FCE
 - Create embryos if there is no alternative way to answer the research question
 - → Specific informed consent
 - Sperm
 - One consenting sperm donor
 - Eggs
 - No sperm found in TESE
 No oocyte vitrification
 - Egg bank donors



- Cryopreserved embryos
 - → Good quality
 - → Available after the legally determined period of cryopreservation
 - 5 years in Belgium
 - → Slow freezing protocols ⊗
 - → Vitrification \bigcirc
- But ...

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- But
 - \rightarrow Exposed to cryoprotectants and stored in liquid N2
 - Bias in the study
 - Overnight culture before use
 - \rightarrow Day 5/6 > day 3 >> day 2 >>> day 1 (zygotes)
 - Stock of cryopreserved zygotes will be exhausted

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 - \rightarrow Day 5/6 > day 3 >> day 2 >>> day 1 (zygotes)
 - Stock of cryopreserved zygotes will be exhausted
 - Need to create fresh zygotes/early embryos

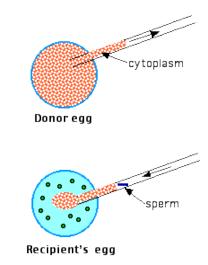
Need to create human embryos for research at the VUB

- Van de Velde H, Cauffman G, Tournaye H, Devroey P and Liebaers I. The four blastomeres of a 4-cell stage human embryo are able to develop into blastocysts with inner cell mass and trophectoderm. Hum. Reprod. 23: 1742-1747, 2008
- Geens M, Mateizel I, Sermon K, De Rycke M, Spits C, Cauffman G, Devroey P, Tournaye H, Liebaers I and Van de Velde H. Human embryonic stem cell lines derived from single blastomeres of two 4-cell stage embryos. Hum. Reprod. 24: 2709-2717, 2009
- De Paepe C, Cauffman C, Verloes A, Sterckx J, Devroey P, Tournaye H, Liebaers I, Van de Velde H. Human trophectoderm cells are not yet committed. Hum. Reprod. 28,740-749, 2013
- De Munck N, Verheyen G, Van Landuyt L, Stoop D, Van de Velde H. Survival and post-warming in vitro competence of human oocytes after high security closed system vitrification. J. Assist. Reprod. Genet. 30: 361-369, 2013
- Petrussa L, Van de Velde H, De Rycke M. 1. Dynamic regulation of DNA methyltransferases in human oocytes and preimplantation embryos after assisted reproductive technlogies. Mol. Hum. Reprod. 2014.20: 861-874, 2014
- Krivega M, Geens M, Van de Velde H. Differential CAR expression in human embryos and embryonic stem cells illustrates its role in pluripotency and tight junction formation. Reproduction.148: 531-544, 2014
- De Munck N, Petrussa L, Verheyen G, Staessen C, Vandeskelde Y, Sterckx J, Bocken G, Jacobs K, Stoop D, De Rycke M, Van de Velde H. Chromosomal meiotic segregation, embryonic developmental kinetics and DNA (hydroxyl)methylation analysis consolidate the safety of human oocyte vitrification. Mol. Hum. Reprod. 21: 535-44, 2015
- Krivega M, Essahib W, Van de Velde H. WNT3 and membrane-associated b-catenin promote trophectoderm lineage differentiation in human blastocysts. Mol. Hum. Reprod. 21: 711-722, 2015.
- Krivega M, Geens M, Heindryckx B, Tournaye H, Van de Velde H. In human embryonic cells CCNE1 plays a key role in balancing between totipotency and differentiation. Mol. Hum. Rep. 21: 942-956, 2015
- Petrussa L, Van de Velde H and De Rycke M. DNA methylation and DNA hydroxymethylation follow similar kinetics during human preimplantation development in vitro. Mol. Dev. Rep. 83: 594-605, 2016

- Germ line modification
 - → Mitochondria replacement therapy
 - → Genome editing
- Embryonic genome activation
- Mosaicism

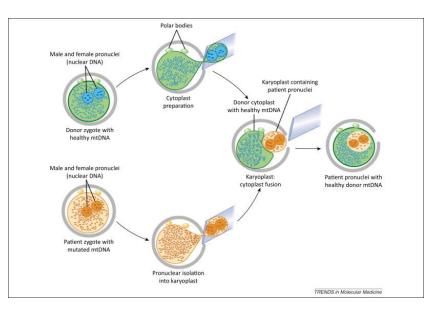
Mitochondrial replacement therapy

- Cytoplasmic transfer to iuvenate oocytes
 - → Mitochondria
 - \rightarrow IVF failure
 - → Allogeneic cytoplasm (Cohen et al. 1997)
 - 1996-2001
 - 17 babies born
 - 2 implantations with XO
 - Follow up
 - Ethical concerns (3 parent babies)
 - → Autologous mitochondria from ovaria (Fakih et al. 2015)
 - Stem cells?
 - Efficacy and safety concerns



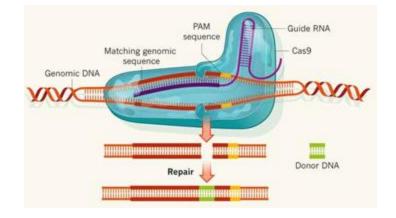
Mitochondrial replacement therapy

- Nuclear (GV, spindle, PN, Pb) transfer
 - → To avoid mitochondrial diseases: baby born (Zhang unpublished)
 - → To treat infertility: block at 2-cell stage (Zhang et al. 2016)
 - → Efficacy and safety concerns
- Basic research in models
 - → Animals
 - Mice and monkeys
 - \rightarrow hESC (Tachibana et al. 2013)



Genome editing

- Proof of principle CRISPR/Cas9 (Liang et al. 2015)
 - → Easy and cheap
 - → 3PN embryos
 - → Beta-thalassemia (beta-globin)
 - → Safety concerns
 - Inefficient
 - Mosaic
 - Off-target mutations
- Ethical concerns
 - → Moratorium for human reproduction
 - > HIV receptor (CCR5 Δ 32) (Kang et al. 2016)
 - \rightarrow Replace PGD only in very rare cases
- KO human embryos for basic research
 - → Study key mediators early embryogenesis



- Mouse
 - \rightarrow 1- to 2-cell stage (Hamatani et al. 2004; Wang et al. 2004)
- Human
 - → Minor wave 2- to 4-cell stage (Dobson et al. 2004; Vassena et al. 2011)
 - → Major wave 4- to 8- cell stage (Braude et al. 1988; Vassena et al, 2011)

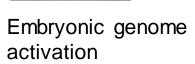


Maternal RNA Maternal proteins degradation

- Human
 - \rightarrow Poor embryo development < day 3
 - Oocyte problem
 - Donor oocytes
 - → Poor embryo development > day 3
 - Sperm problem
 - Donor sperm



Maternal RNA Maternal proteins degradation



- Human
 - → Poor embryo development < day 3</p>



- \rightarrow Poor (\rightarrow 2 >velopment > day 3
 - Sperm problem
 - Donor sperm



Maternal RNA Maternal proteins degradation



Maternal genome Paternal genome activation

- Human
 - → Paternal factors
 - DNA and protamines
 - Centriole
 - Histones (Hammoud et al. 2009)

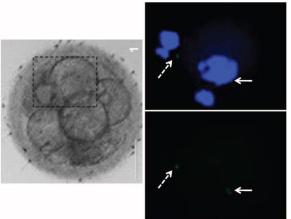


- mRNA (Miller et al. 2011; Hamatani et al. 2012; Neff et al. 2014)
- miRNA (Abu-Halima et al. 2014; Pantano et al. 2015; Yao et al. 2015)
- Proteins (Amaral et al. 2014; Azpiazu et al. 2014)
- → Somatic cell nuclear transfer
 - Therapeutic cloning
 - Often arrest at 4- to 8-cell stage (Noggle et al. 2011; Egli et al. 2011; Tachibana et al. 2013)

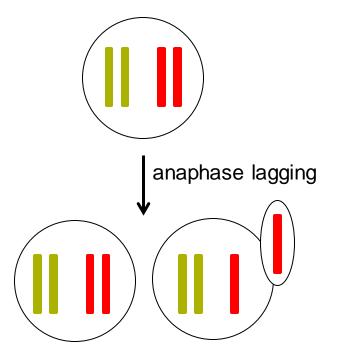
- Aneuploidy and mosaicism (Vanneste et al. 2009; Chavez et al. 2012; Mertzanidou et al. 2012 and 2013)
 - → Mainly mitotic errors
 - \rightarrow 50-80% at cleavage stages and compaction
 - → No cell cycle check points proteins before EGA (Kiessling et al. 2010)
 - → Anaphase lagging and non-disjunction during mitosis in the early cleavage stages
 - \rightarrow Origin?

- Aneuploidy and mosaicism
 - → Less at blastocyst stage
 - \rightarrow Self-correction?
- Solving the problem without knowing the cause
 - → TE biospy + PGS/CCH (Scott et al. 2013)
 - Multiple pregnancy rate ↓
 - Time to pregnancy ↓
 - Healthy babies after transfer of mosaic embryos (Greco et al. 2015)
 - RCTs?
 - Origin?
 - → Fragments with micronuclei

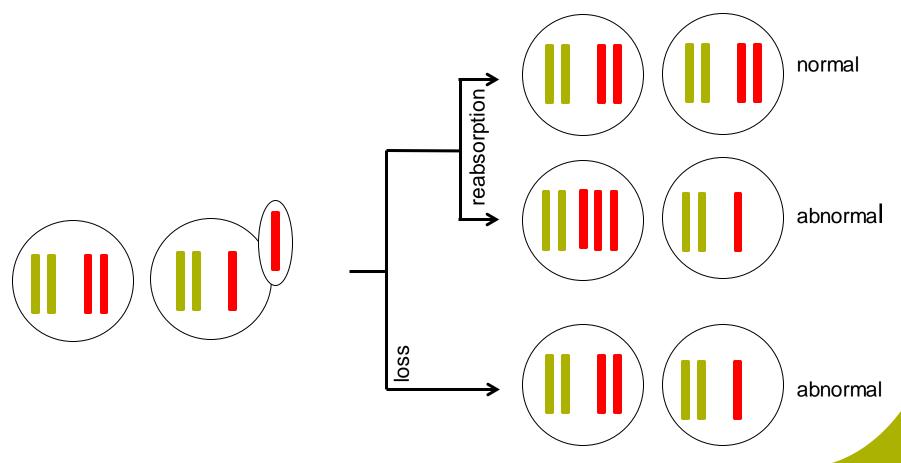
(Chavez et al. 2012)



- Aneuploidy and mosaicism
 - → Fragments with micronuclei (Chavez et al. 2012)



- Aneuploidy and mosaicism
 - → Fragments with micronuclei (Chavez et al. 2012)



Conclusion



- Research on human embryos is needed because humans are "unique"
- It is necessary to create fresh human zygotes/early embryos for research because those stages are not available

