# In vitro quality assessment of myogenic stem cells in multiple patient groups with confirmed skeletal muscle atrophy to study their potential for autologous stem cell therapy

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The study aims to isolate and culture mesoangioblasts from muscle biopsies of two patient groups suffering from skeletal muscle atrophy to assess their potential for autologous muscle stem cell therapy. To relate this potential to the underlying...

**Ethical review** Approved WMO **Status** Recruiting **Health condition type** Other condition

**Study type** Observational invasive

## Summary

#### ID

**NL-OMON56403** 

#### Source

**ToetsingOnline** 

**Brief title**ATROMAB

#### Condition

- Other condition
- Muscle disorders

#### **Synonym**

muscle atrophy; muscle wasting

#### **Health condition**

cachexie

1 - In vitro quality assessment of myogenic stem cells in multiple patient groups wi ... 8-05-2025

**Research involving** 

Human

**Sponsors and support** 

**Primary sponsor:** Medisch Universitair Ziekenhuis Maastricht

Source(s) of monetary or material Support: Interreg

Intervention

**Keyword:** atrophy, mesoangioblasts, muscle, stem cells

**Outcome measures** 

**Primary outcome** 

• Immunophenotype characterization of mesoangioblasts (i.e. number of the

correct cells isolated from a muscle biopsy) by Alkaline phosphatase staining

to determine stemness (>50%); and cell sorting via magnetic-activated cell

sorting (MACS) and/or fluorescent-activated cell sorting (FACS) depending on

surface antigens (>50%) • Proliferation rate of mesoangioblasts in vitro

(population doubling level: >2 every 3-4 days) • Muscle regenerative capacity

of mesoangioblasts in terms of the formation of multinucleated mature myotubes

(>25% of total nuclei).

**Secondary outcome** 

- The metabolic health of the mesoangioblasts, based on mitochondrial

parameters (mitochondrial activity, mitochondrial DNA copy number, ATP

production). This should not be below 50%, compared to age-matched controls.

- The homing potential of the mesoangioblasts in these patients by

characterizing inflammatory parameters. Muscle damage reflected by inflammation

is essential for the migration and engraftment of mesoangioblasts in the

affected muscles. (Inflammation) markers are determined in blood via an ELISA

2 - In vitro quality assessment of myogenic stem cells in multiple patient groups wi ... 8-05-2025

assay (descriptive).

- Identify a potential difference between mesoangioblasts and satellite cells as a response to cachexia and sarcopenia.
- o Number of satellite cells present in muscle tissue via (immuno)histochemistry (descriptive)
- o Muscle regenerative capacity of satellite cells in terms of the formation of multinucleated mature myotubes (descriptive).
- o Proliferation rate of satellite cells in vitro (descriptive)

# **Study description**

## **Background summary**

No effective treatment is available for the loss of muscle tissue in non-genetic muscle diseases such as (cancer) cachexia and sarcopenia. Such a treatment would improve the quality of life, therapy success, and independency of these patients. Myogenic stem cells have the potential to regenerate skeletal muscle

## Study objective

The study aims to isolate and culture mesoangioblasts from muscle biopsies of two patient groups suffering from skeletal muscle atrophy to assess their potential for autologous muscle stem cell therapy. To relate this potential to the underlying condition, we will collect information of the patients by questionnaires, muscle strength measurements and blood parameters.

#### Study design

A mono-center observation study.

## Study burden and risks

Muscle biopsies will be collected using the a thin-needle biopsy instrument, which is a fast and routinely used procedure in diagnostic centers to harvest a small (~30 mg) muscle fragment with the patient burden being limited to the time of the procedure (anecdotes multiple patients). Muscle biopsies can be

painful in some cases and infections and bleeding afterward are possible, but rare. Blood will be collected (20cc), according to standard hospital procedures, having a low burden/risk for the participants.

## **Contacts**

#### **Public**

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#### **Scientific**

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## **Trial sites**

## **Listed location countries**

**Netherlands** 

## **Eligibility criteria**

## Age

Adults (18-64 years) Elderly (65 years and older)

## Inclusion criteria

Patient group: cachexia - Diagnosed with non-small cell lung cancer (NSCLC), stage 3-4 - Diagnosed with cachexia (>5% unintentional body weight loss in past six months) - Age 50-60 and 60-70 - Written informed consent Patient group: muscle impaired elderly - Scheduled for knee-, back- or hip surgery - Age 60-70 and 70-80y - Written informed consent Controls - Scheduled for knee-, back- or hip surgery - Age 50-60, 60-70 and 70-80 - Written informed consent

## **Exclusion criteria**

- No informed consent
- Suffering from a muscular dystrophy or other disease known to affect muscle morphology or function
- Have a weekly alcohol intake of  $\geq$  35 units (men) or  $\geq$  24 units (women)
- Ongoing participation in other intervention clinical trials
- Major surgery within 4 weeks of the visit
- Patients unable and/or unwilling to comply with treatment and study instructions
- Any other factor that in the opinion of the investigator excludes the patient from the study

# Study design

## **Design**

Study type: Observational invasive

Intervention model: Other

Allocation: Non-randomized controlled trial

Masking: Open (masking not used)

Control: Active

Primary purpose: Treatment

## Recruitment

NL

Recruitment status: Recruiting
Start date (anticipated): 07-12-2023

Enrollment: 80

Type: Actual

## **Ethics review**

Approved WMO

Date: 26-07-2023

Application type: First submission

Review commission: METC academisch ziekenhuis Maastricht/Universiteit

Maastricht, METC azM/UM (Maastricht)

Approved WMO

Date: 30-10-2023

Application type: Amendment

Review commission: METC academisch ziekenhuis Maastricht/Universiteit

Maastricht, METC azM/UM (Maastricht)

# **Study registrations**

## Followed up by the following (possibly more current) registration

No registrations found.

## Other (possibly less up-to-date) registrations in this register

No registrations found.

## In other registers

Register ID

CCMO NL81090.068.22