

Effects of Stem cell based therapy on acute neural injury

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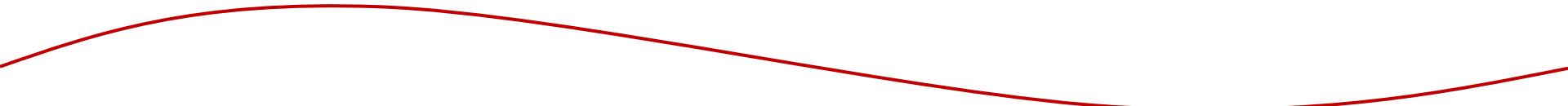


Aims

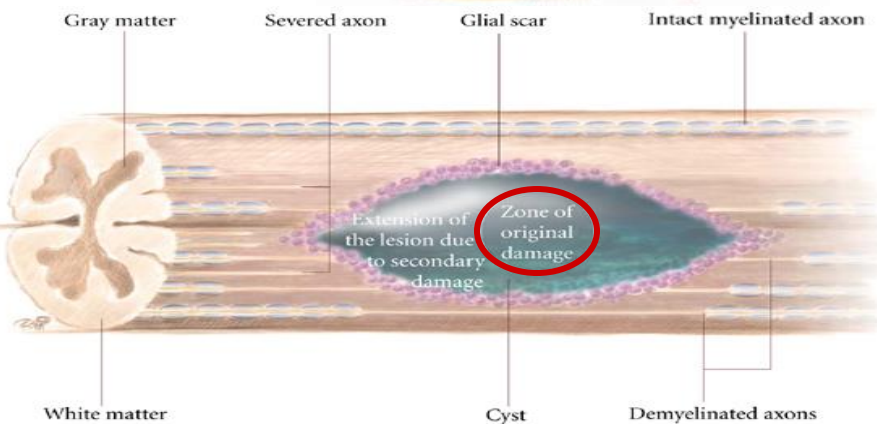
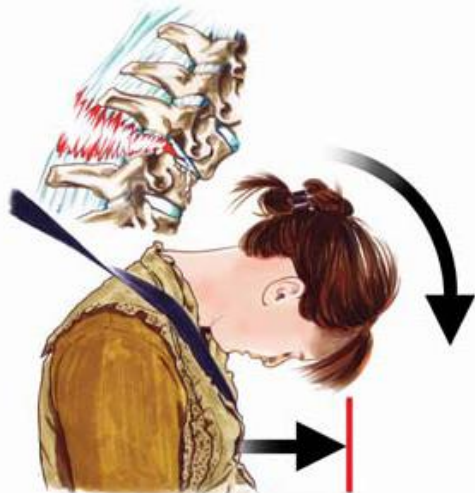
To combine the data from two published systematic reviews and meta-analyses of studies using stem cells to treat animal models of traumatic SCI and stroke and determine the effect of stem cells on neurobehavioural score in this larger dataset.

Objectives

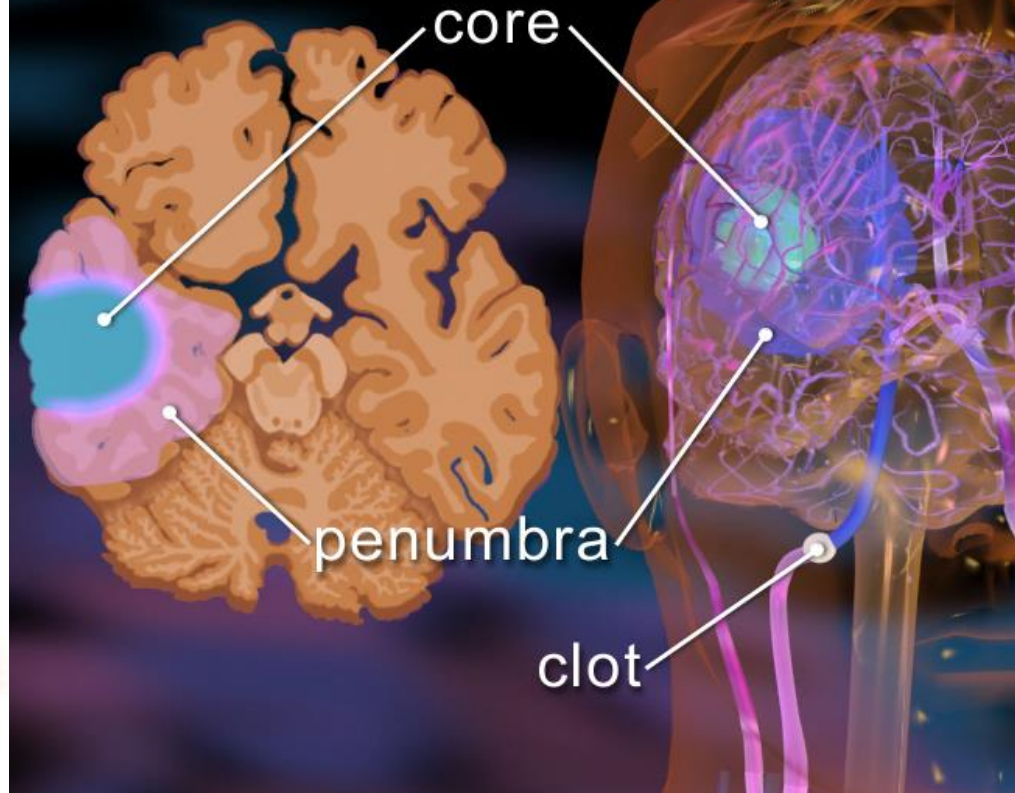
To establish a summary estimate of the efficacy of stem cells in models of SCI and Stroke

- (i) Understanding similarities and differences between these two related diseases to further assess if stem cell therapy works
 - (ii) To ascertain the conditions under which efficacy was the greatest
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SCI

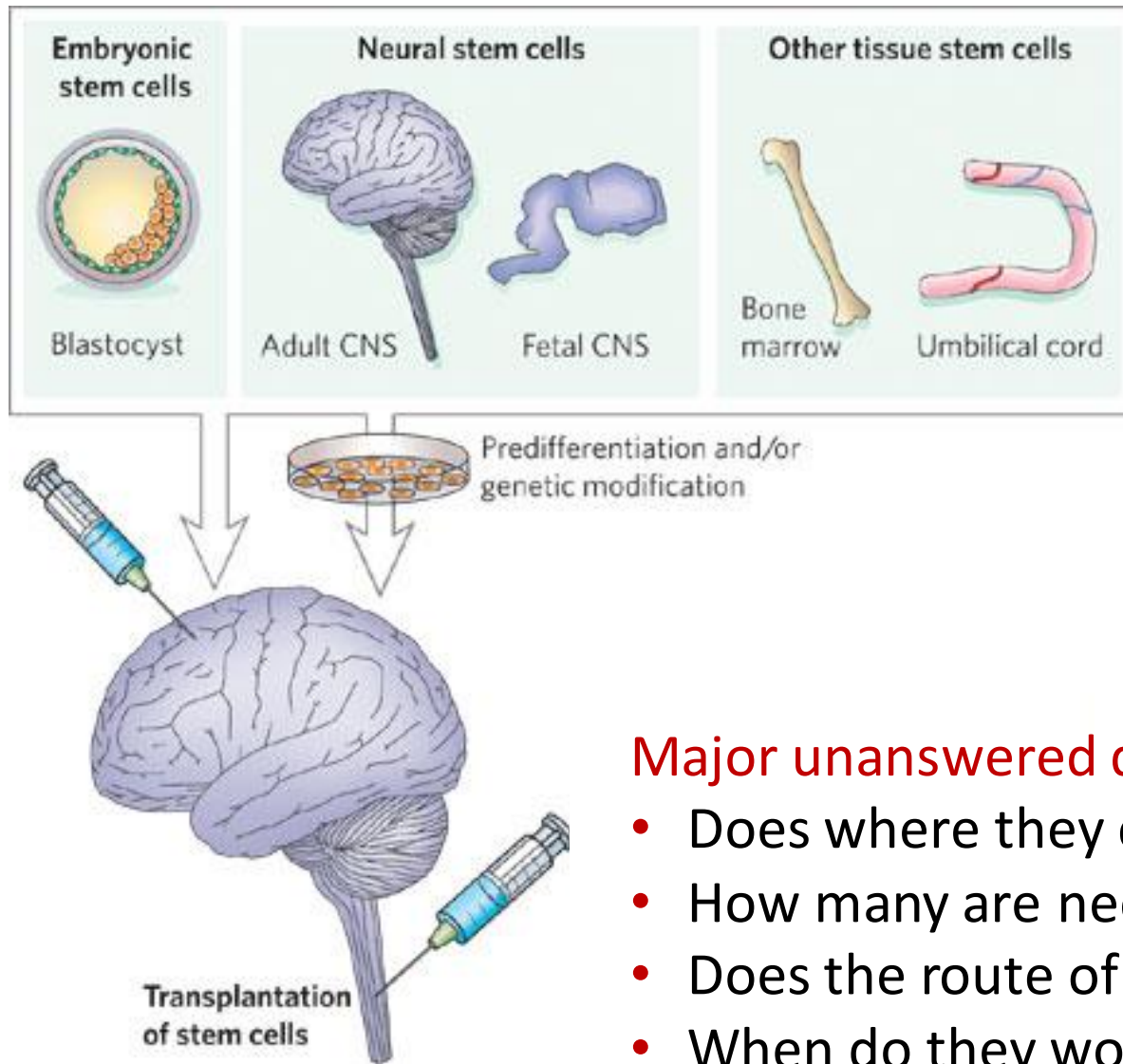


Stroke



Both are acute neurological diseases, and although caused by different processes, the underlying mechanisms of cell death and tissue loss are similar.

Stem cells as a potential treatment



Major unanswered questions

- Does where they come from matter?
- How many are needed?
- Does the route of implantation matter?
- When do they work

Methods

Combination of data from 2 published reviews of stem cell transplantation for treatment of traumatic spinal cord injury and stroke

Inclusion Criteria:

- All the studies included in the original reviews

Primary Outcome:

- Neurobehavioural score

Motor score sub-analysis (most homogeneous data)

- Rats
- With SCI injury created by an impactor or stroke by intraluminal filament/suture
- Assessed by BBB or NSS tests.

DerSimonian and Laird random effects meta-analysis and meta-regression was performed on the combined dataset



Overall analysis

527 experiments involving 8640 animals

Overall improvement in outcome 31.7% (95% CI 29.6 – 34%)

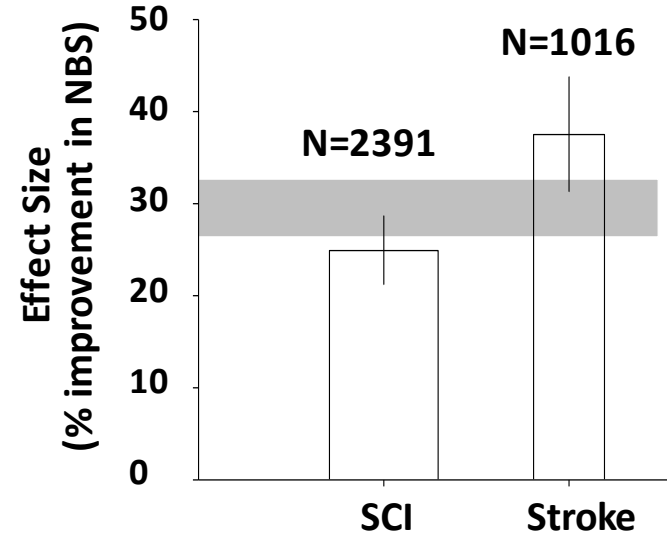
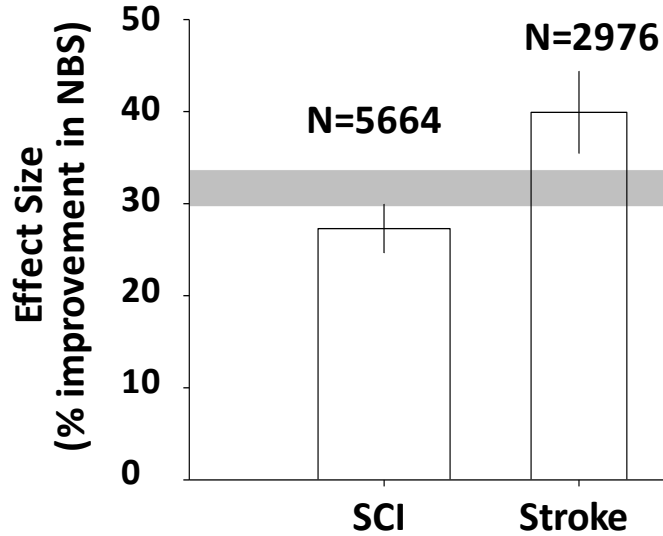
Subset analysis

200 experiments involving 3704 animals

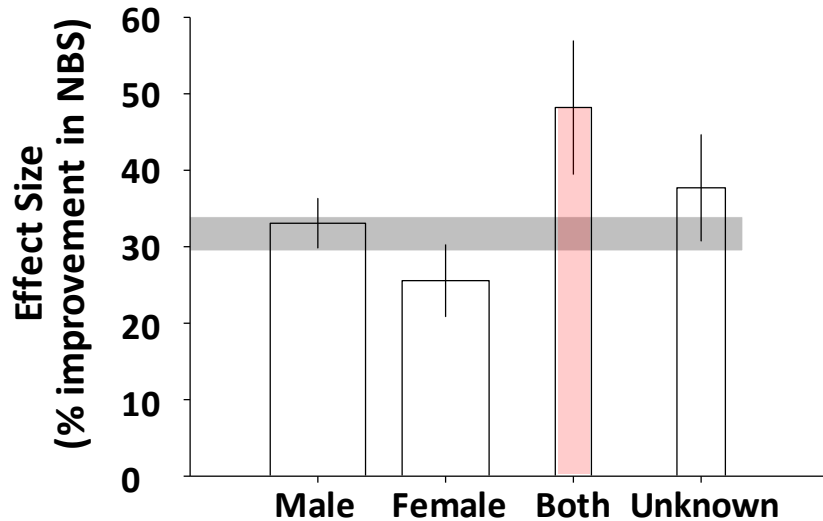
Overall improvement in outcome 29.5% (95% CI 26.4-32.6%)



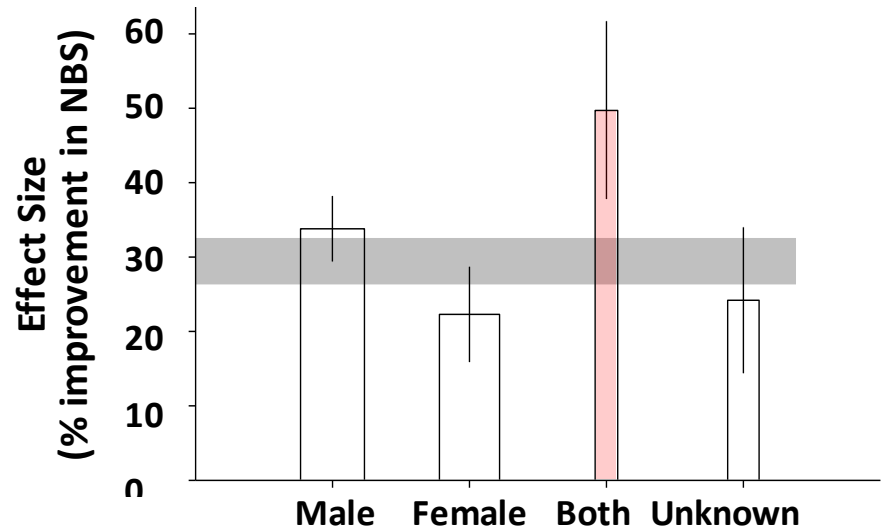
Stem cells are more effective after stroke than SCI



Stem cells are more effective in male than female animals

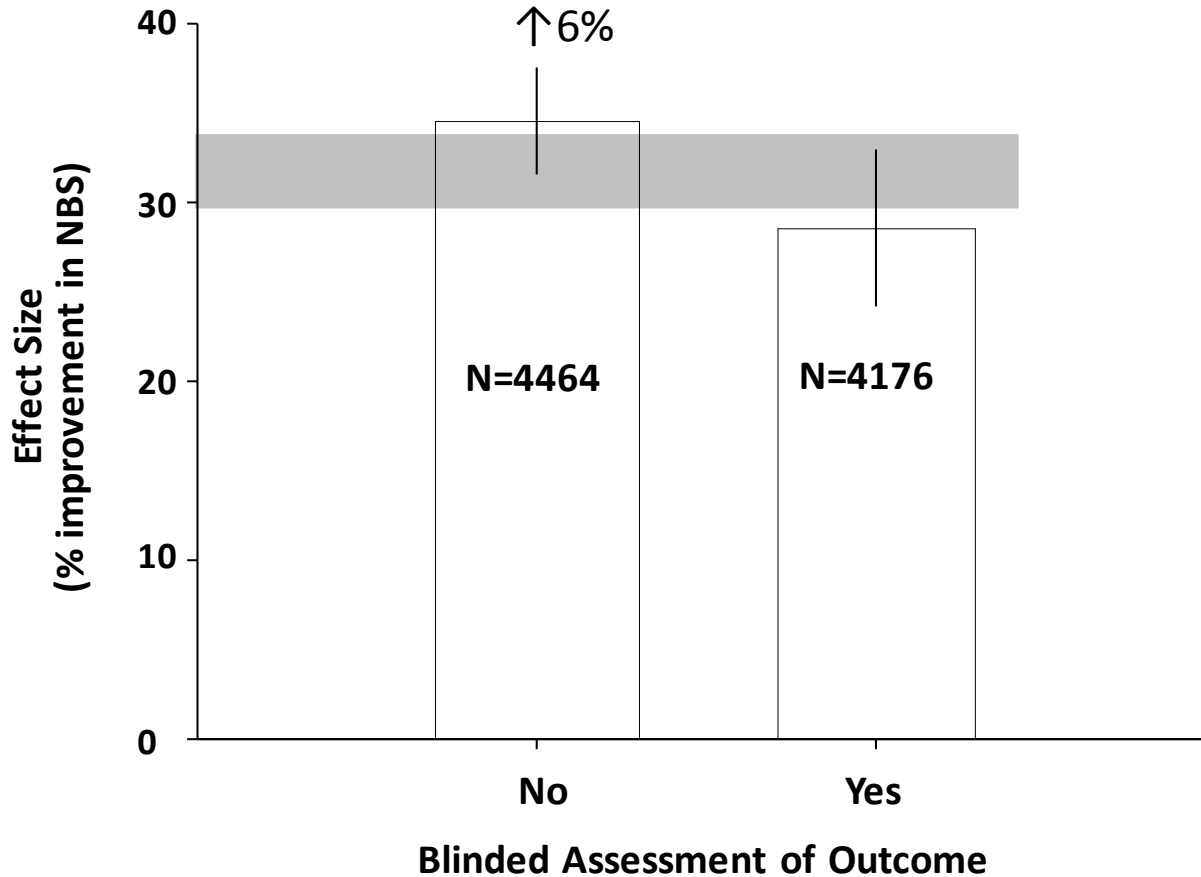


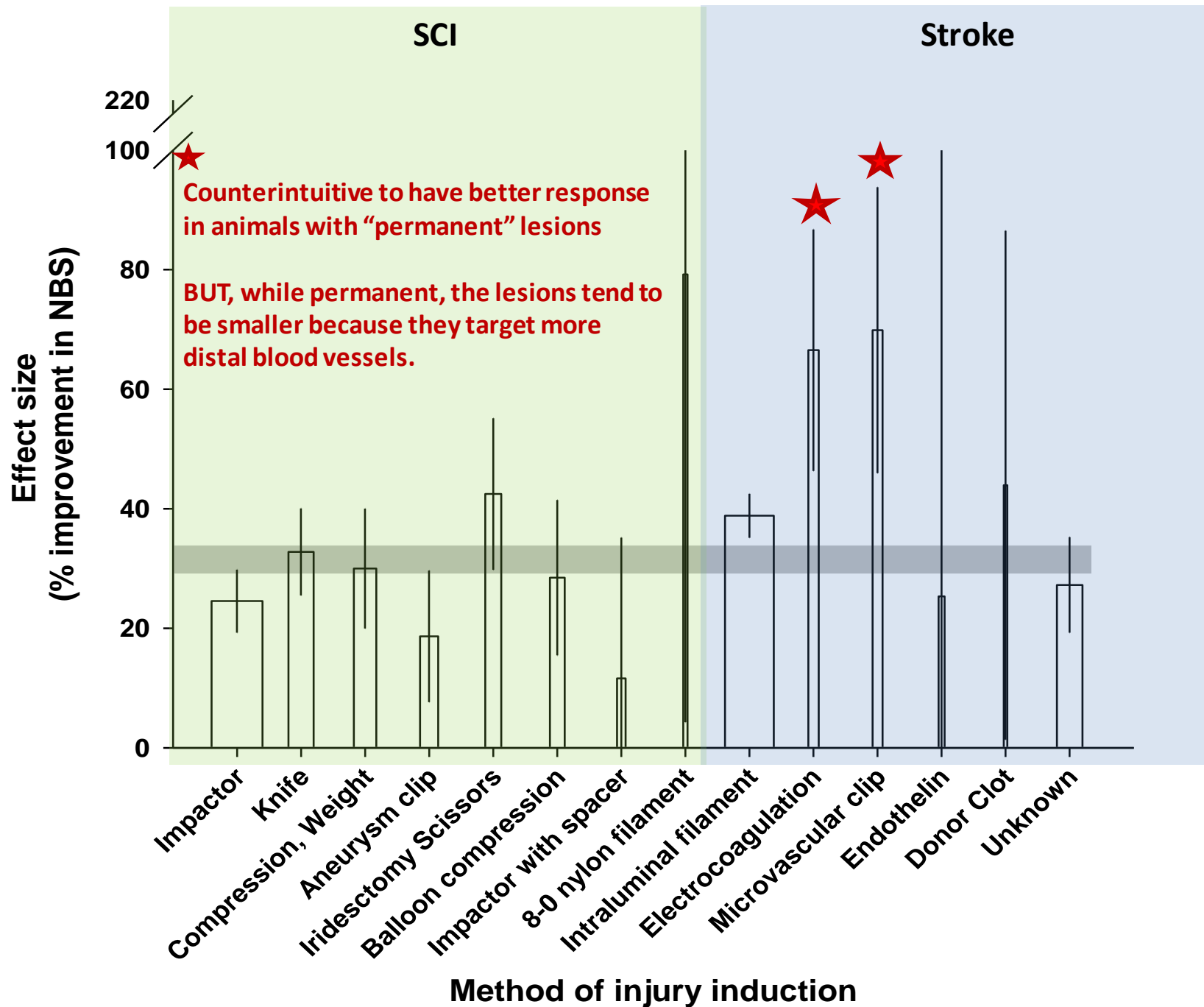
Overall analysis



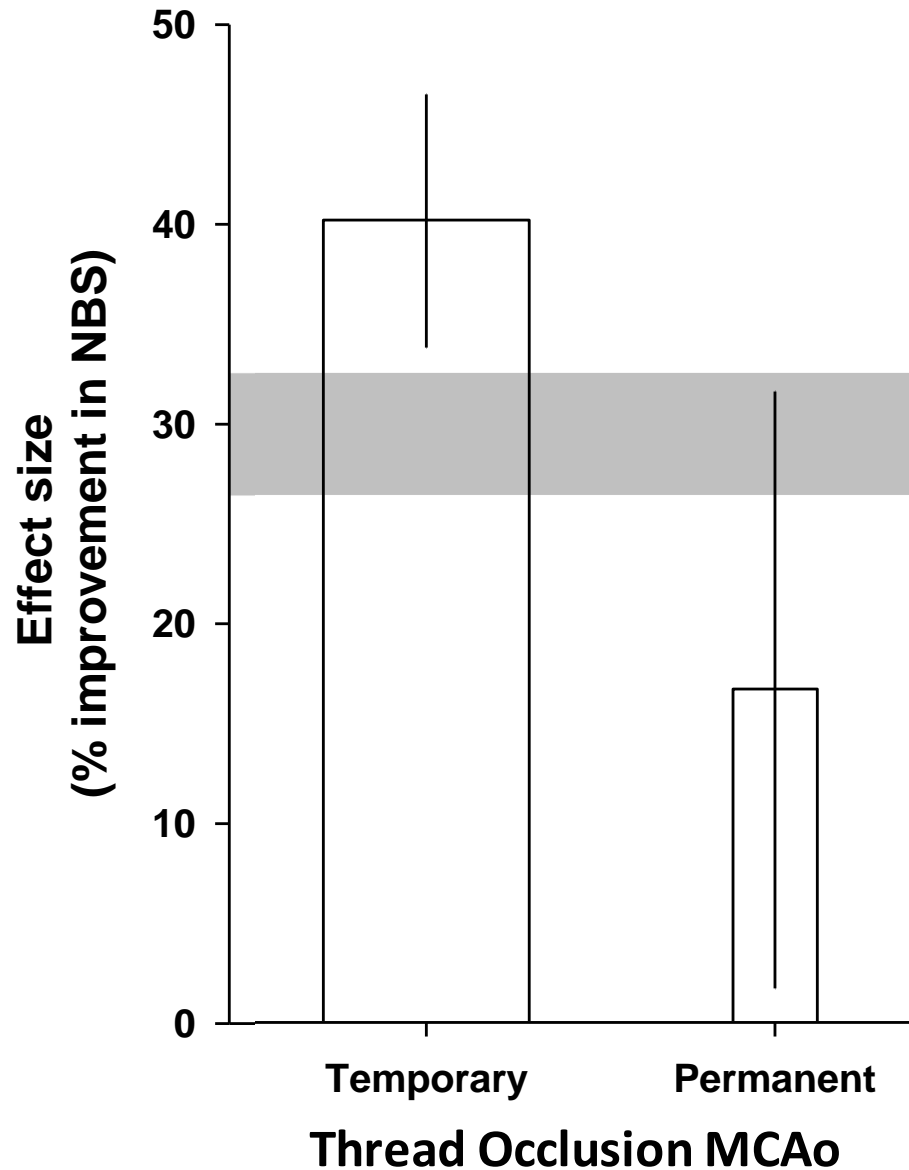
Subset analysis

~50% of studies reported measures to avoid bias, only lack of blinding contributed to inflation of effect size



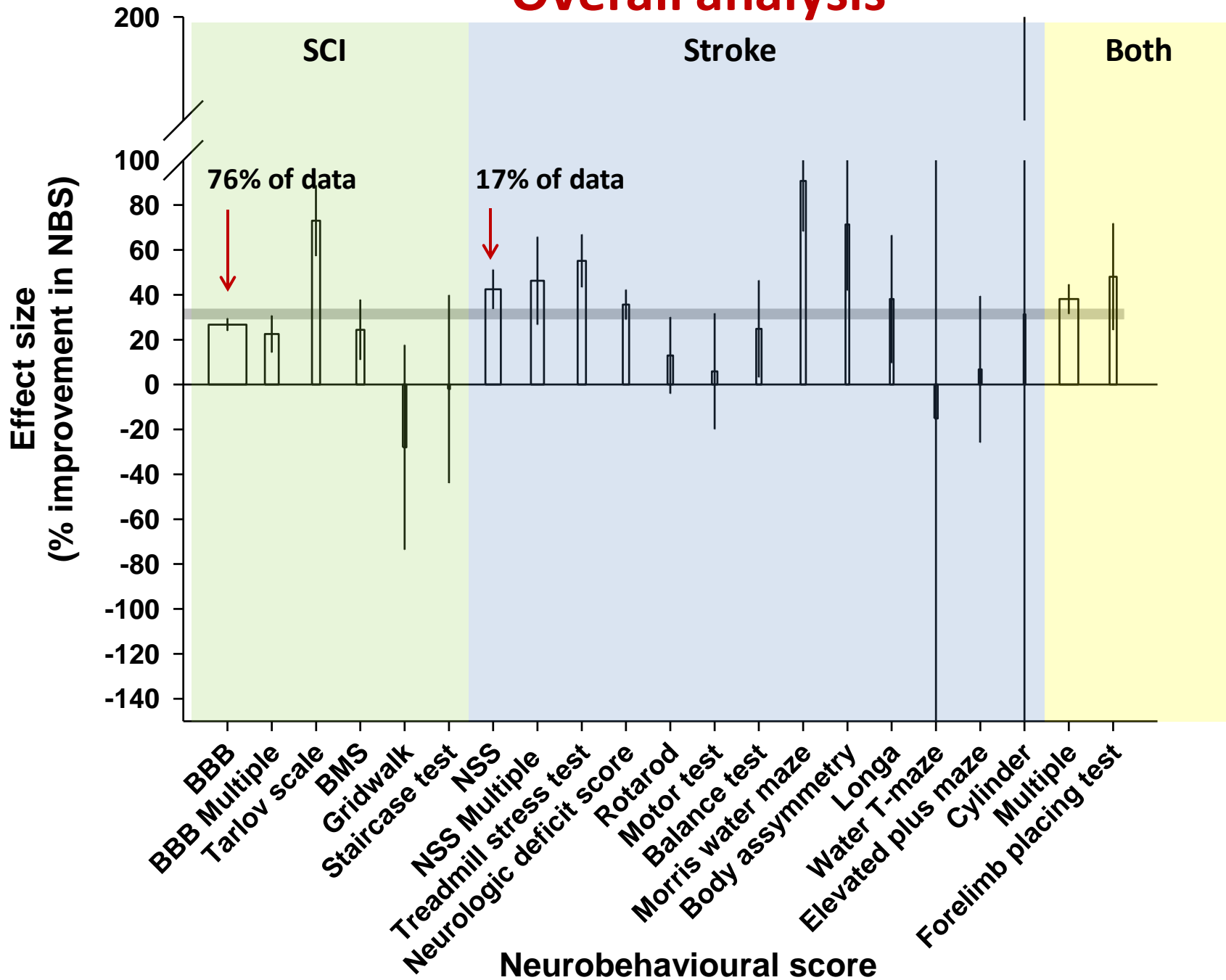


Subset analysis (Stroke)

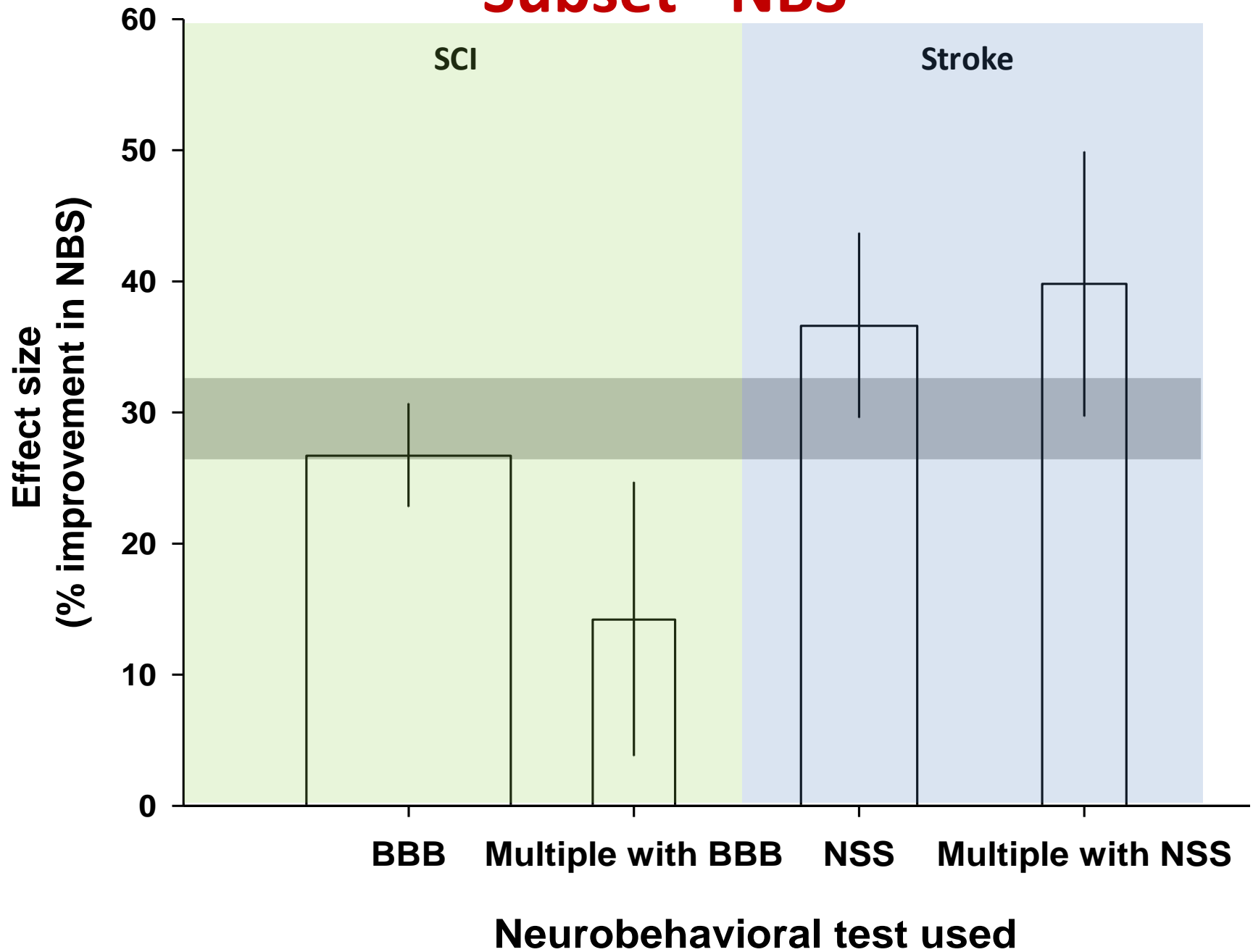


Same degree of initial ischemia but no capacity for reperfusion and recovery in “permanent” animals

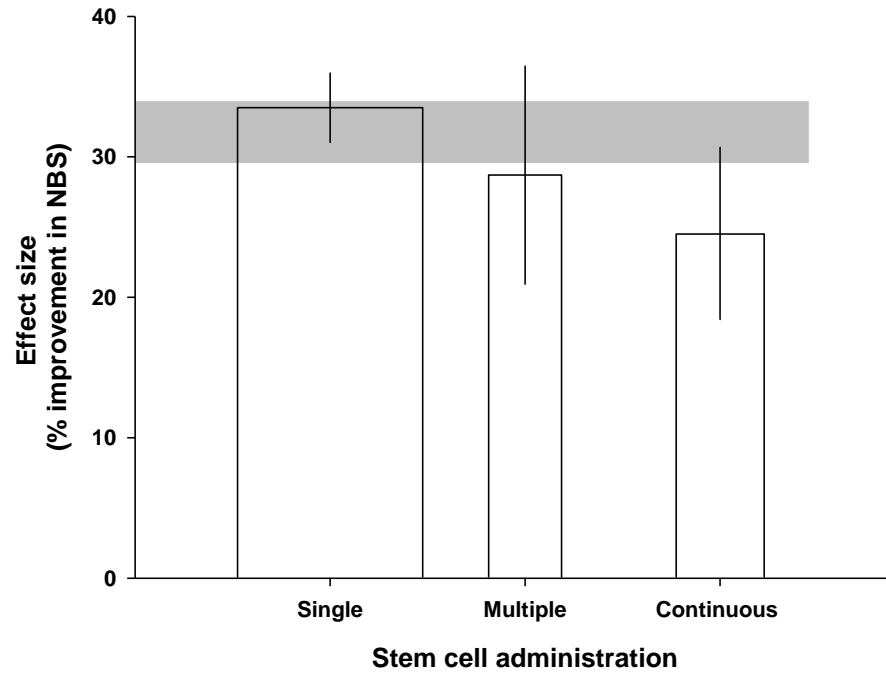
Overall analysis



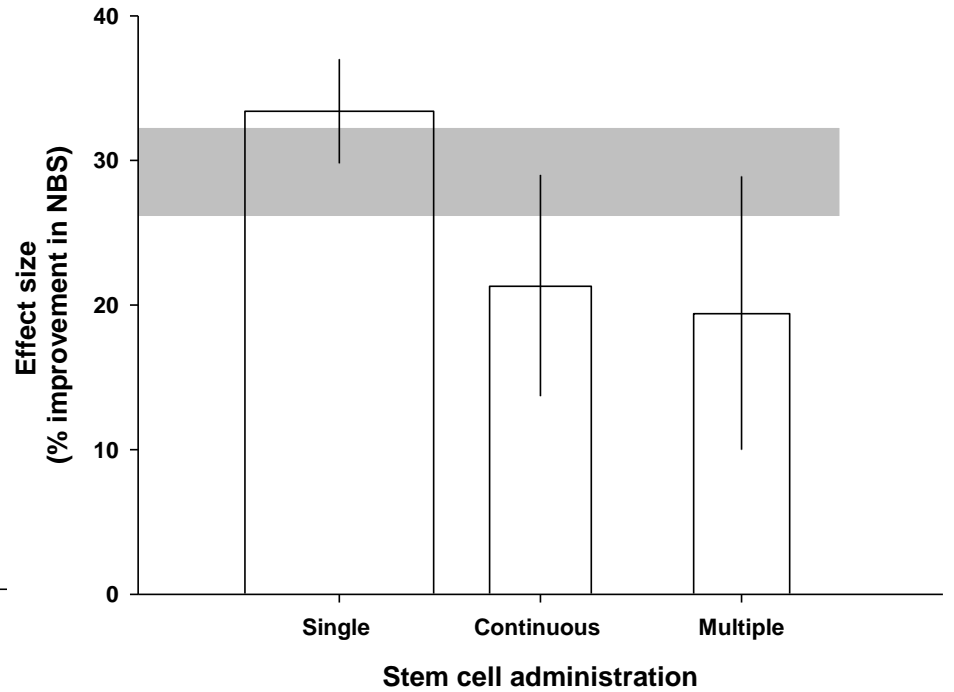
Subset - NBS



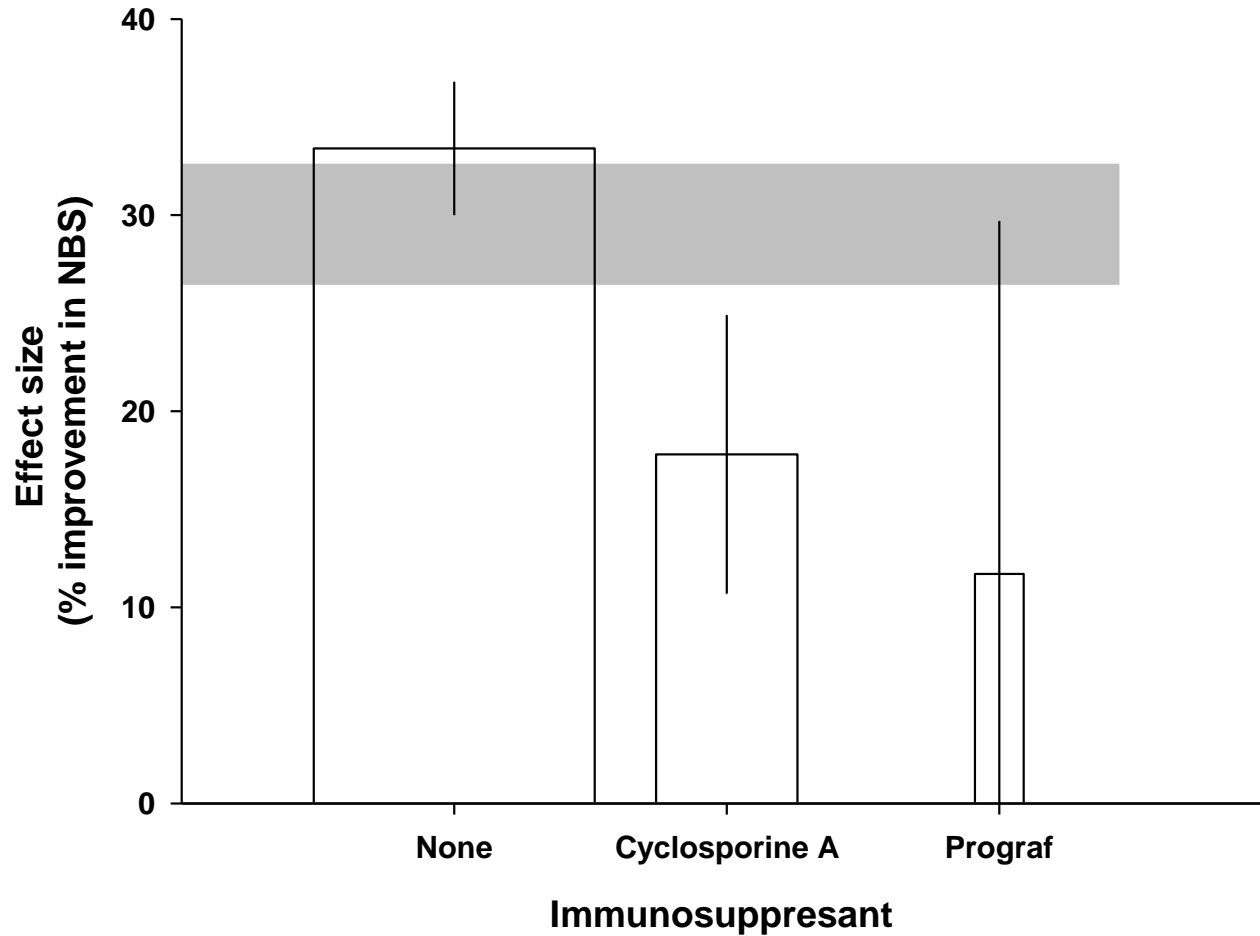
Overall analysis



Subset analysis

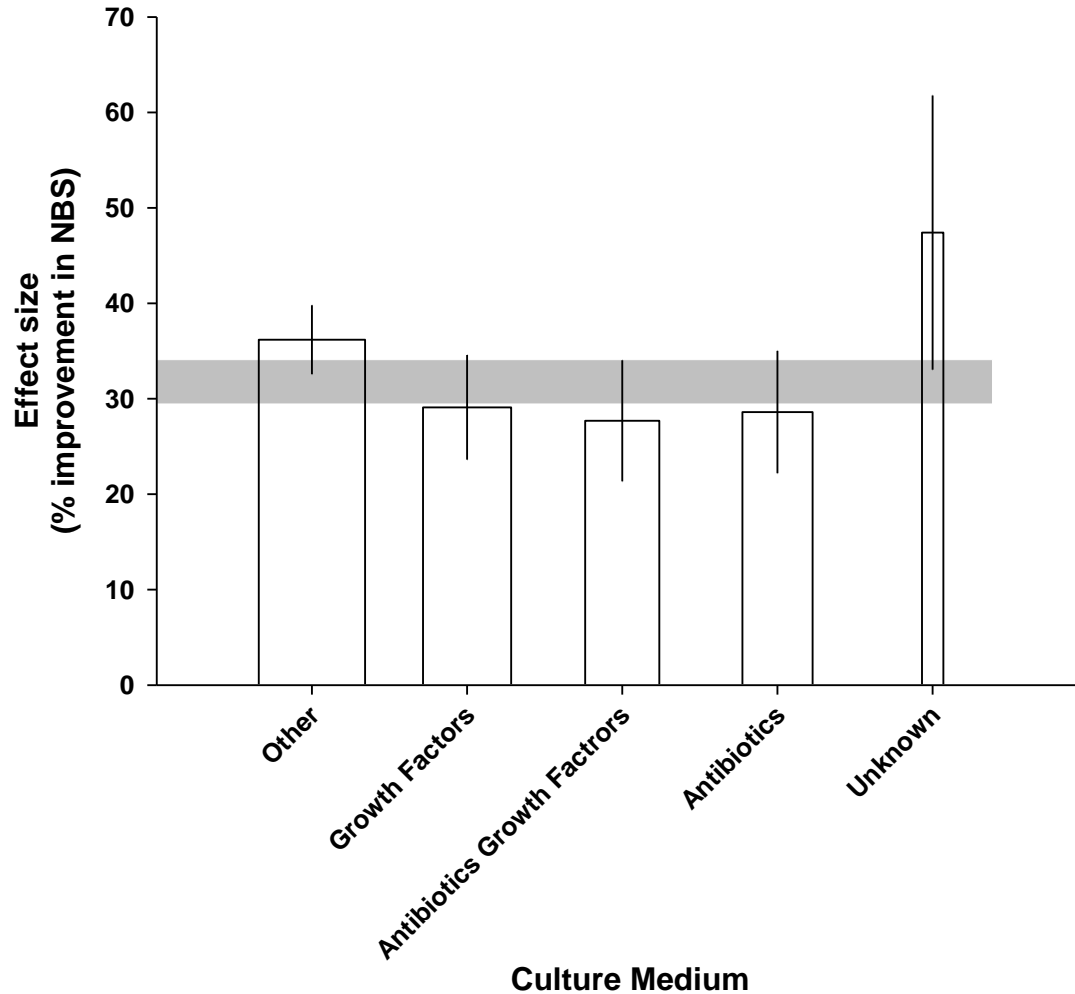


Subset - Immunosuppression

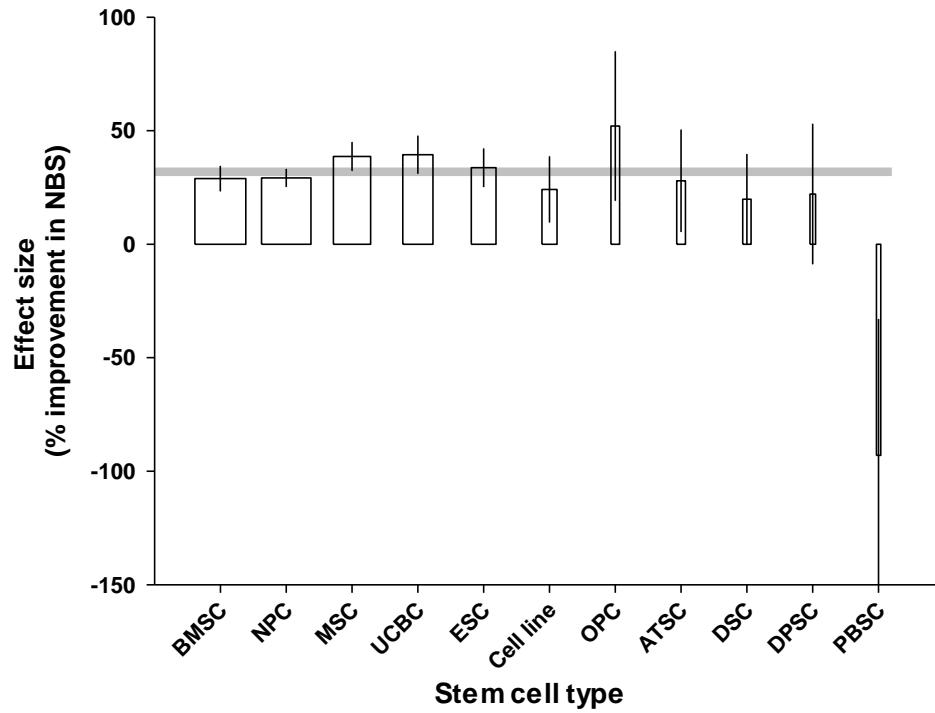


Stem cell biology

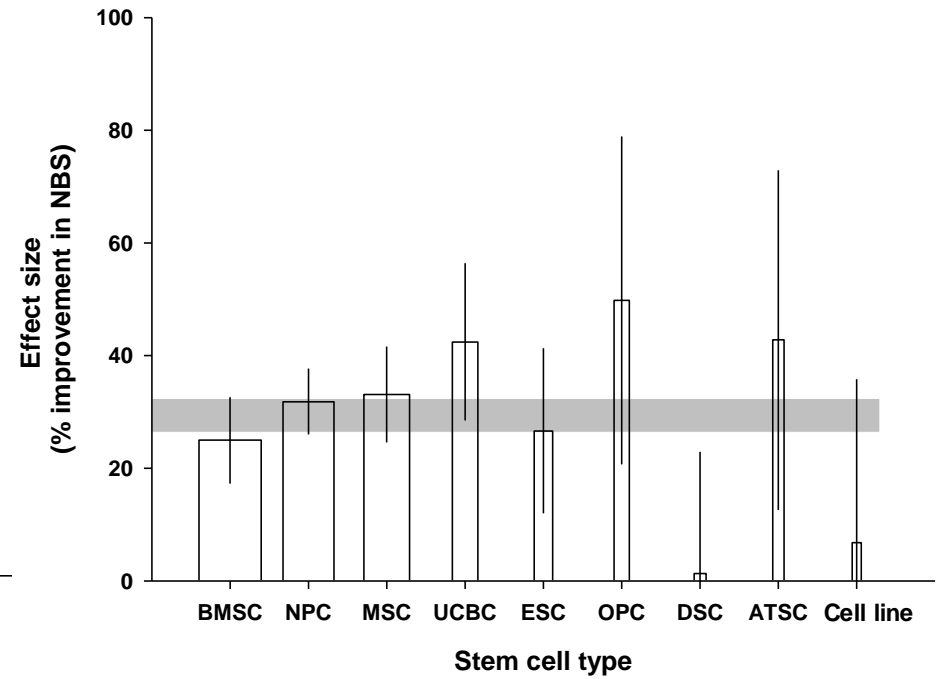
Overall analysis



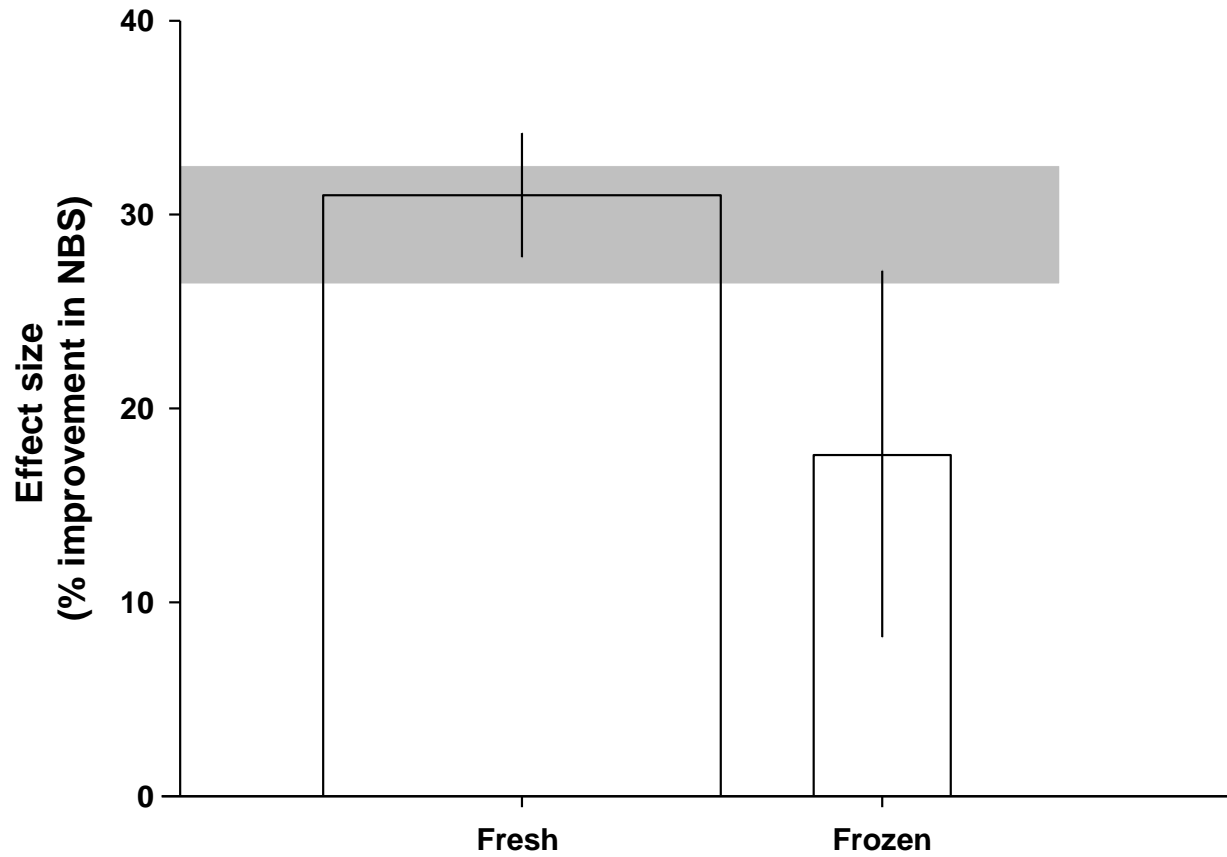
Overall analysis

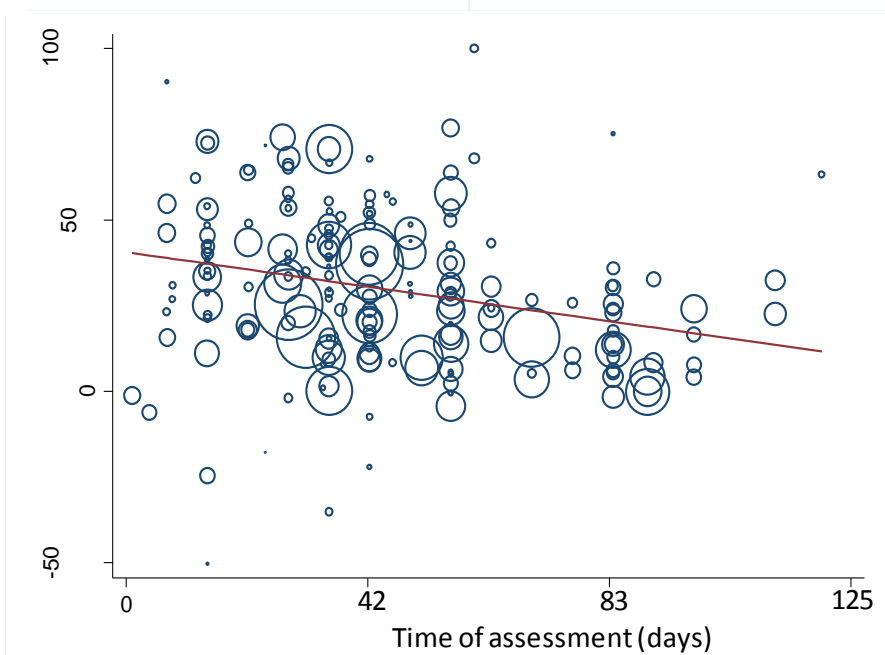
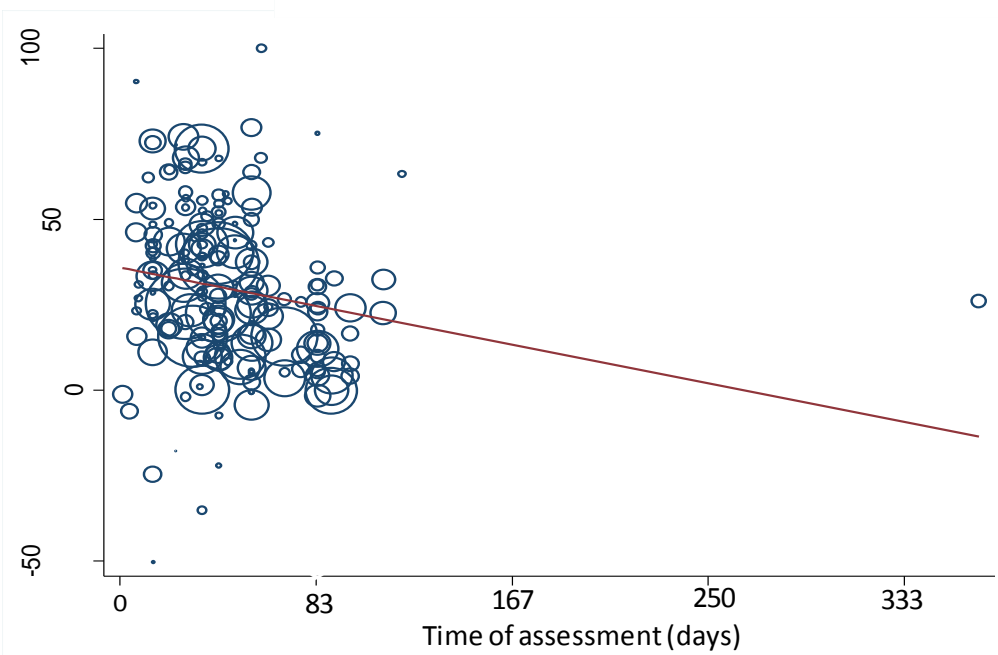
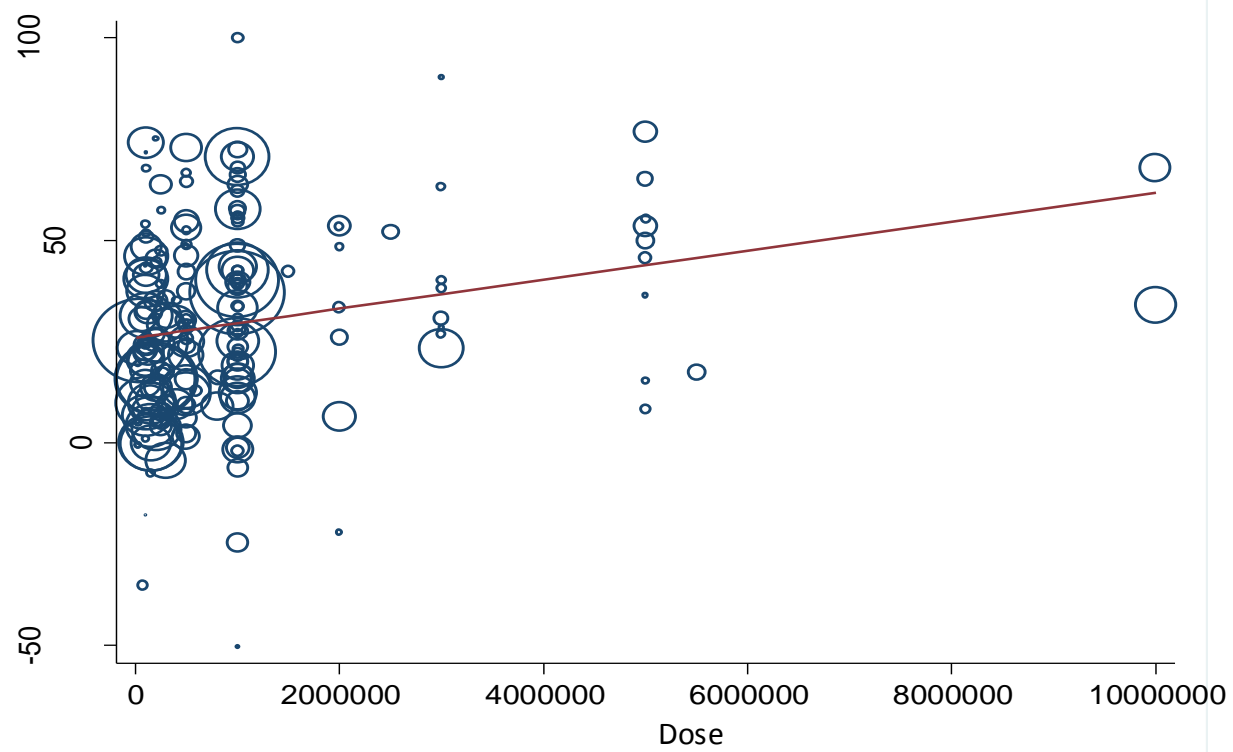


Subset analysis



Subset - Fresh vs Frozen cells





Summary

Stem cells appear to improve neurobehavioral outcome in the combined spinal cord injury and stroke dataset (overall effect size 31.7%).

Stem cells are more effective in improving neurobehavioral outcome in experimental models of stroke.

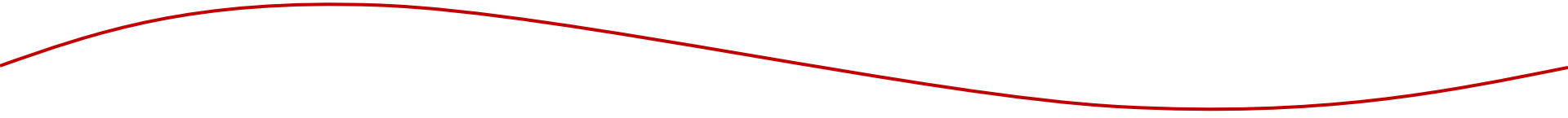
Stem cell biology accounted for more observed heterogeneity in the combined dataset compared to the individual analyses.



Conclusions

The effects of stem cells seem confounded by large heterogeneity in behavioural testing methodologies used suggesting that application of a core assessment protocol might be beneficial.

More preclinical work still seems to be needed to assess the impact of stem cell transplantation on these two acute neurological injuries before developing clinical trial protocols for testing efficacy of this treatment in humans.



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Everyone in Howells Lab

