

Xenotransplantasyon : Güncel durum ve gelecek perspektifi



Dr. Oğuz Söylemezoğlu

XENOTRANSPLANTASYON NEDİR ?

Neden tartışılıyor?

XENOTRANSPLANTASYON

- Genetik olarak modifiye edilen hayvan organlarının insanlara transplantasyonu
- Böbrekler için genetik olarak modifiye edilmiş domuz organları kullanılıyor
- Bu gelişme organ bekleyen binlerce kişi için yüksek sayıda bir organ sağlanması için büyük umut oldu .

İHTİYAÇ

Dünya genelinde 5-10 milyon
Renal Replasman tedavisi
gerekiyor

2.5 milyon Böbrek Nakli alıcısı var

İdame hemodiyaliz tedavisindeki
hasta survisi 5 yıl için % 42

Bekleme listesinde böbrek nakli
bekleyen hastaların %40 ı 5 yıl
içinde ex oluyor

SDBY hastalarının 1/7 si bekleme
listesinde

Condition	5 year survival
Prostate Cancer	99%
Breast Cancer	91%
Bladder Cancer	79%
Colon Cancer	66%
ESKD Peritoneal Dialysis	51.7%
ESKD Hemodialysis	41.8%
Lung Cancer	19%

BEKLEME LİSTESİ ABD

Böbrek 98.000

Karaciğer 12.000

Kalp 3500

Akciğer 1038

Yılda 35.000 hasta ortalama böbrek bekleme listesinden çıkıyor

Yılda eklenen hasta sayısı (böbrek) ortalama 38.000

20.000 transplant

4000 ex

4000 diğer nedenler ?

3400 nakil için çok hasta

3000 başka ülke-merkez nakil

NAKİL SAYILARI

Böbrek 20.736 (4900 canlı, 15.700 Kadavra)

TÜRKİYE ORGAN VE DOKU BEKLEME LİSTESİ (Eki.2024)

BÖBREK	25.245
KARACİĞER	2.650
KALP	1.477
AKCİĞER	203
PANKREAS	275
İNCE BARSAK	1
KORNEA	3.647
TOPLAM	33.498

Hayvan ve İnsan vücut parçalarının birleştirilmesinin mitolojik kökleri var

Minotaur



Gorgon



Ganesha



Mathieu Jaboulay

- . 1906- ilk solid organ böbrek xenotransplantasyon prosedürü
- . 48 yaş kadın: oligüri, hipertansiyon başağrısı, görme işitme kaybı
- . Organ kaynağı: domuz



1906: Pig and goat kidneys transplanted onto arm vessels survive for 3 days

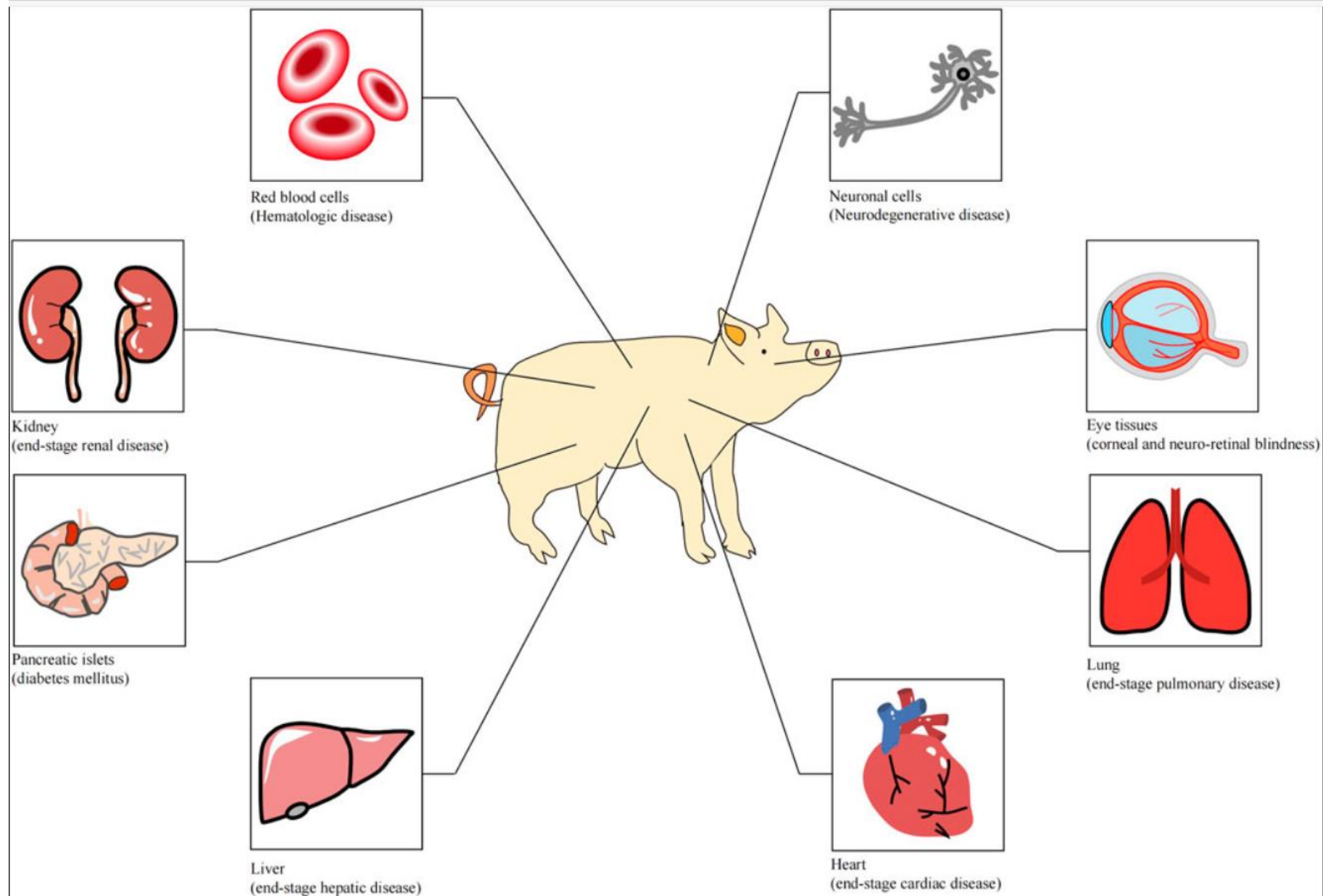
1910: A macaque kidney transplanted into a human survives for 32 hours

1963: A 23-year-old woman survives for 9 months with functioning chimpanzee kidneys

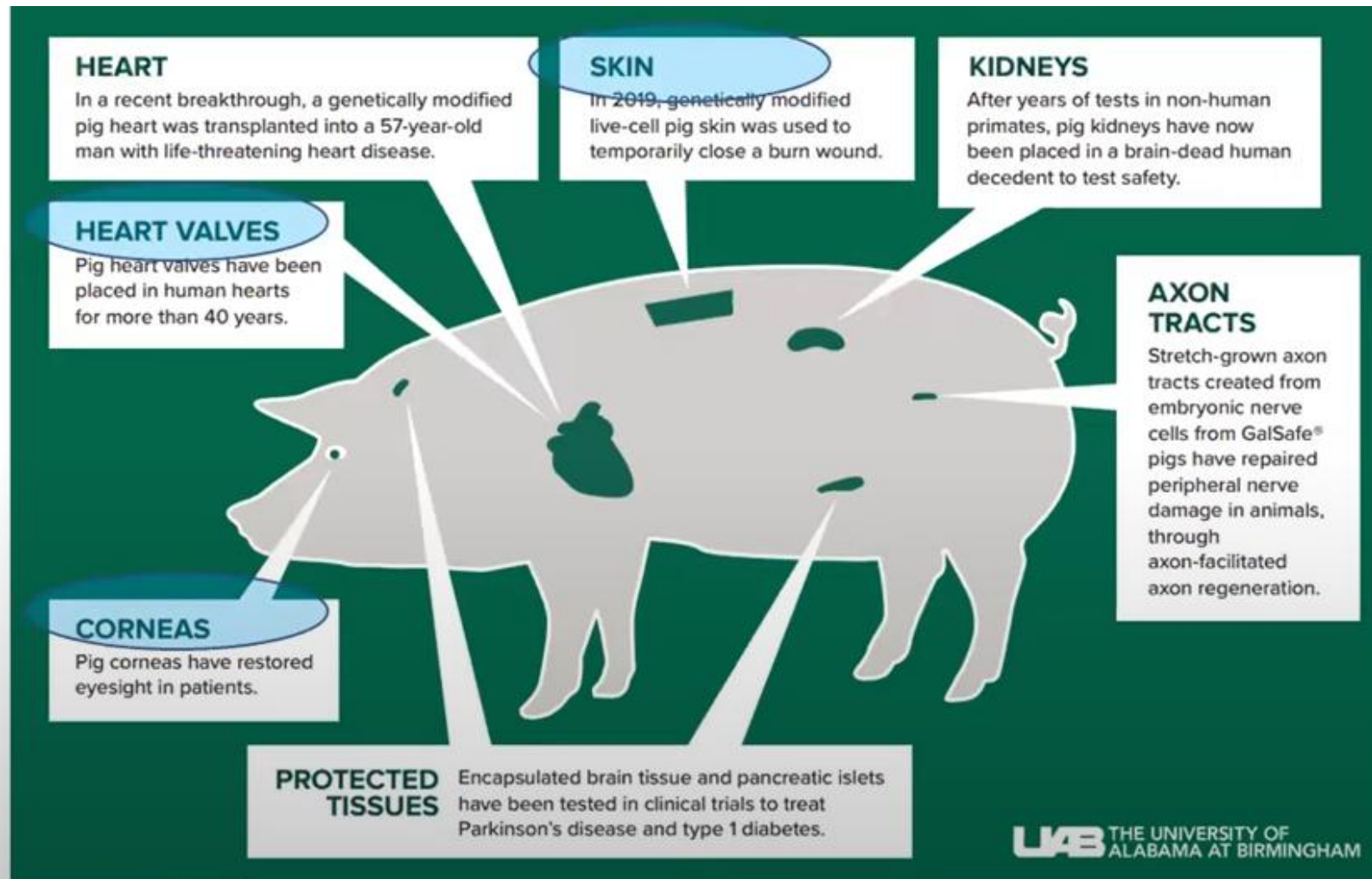
1984: A newborn, Baby Fae, survives for 20 days with a baboon heart



Domuz dokularının kullanımı



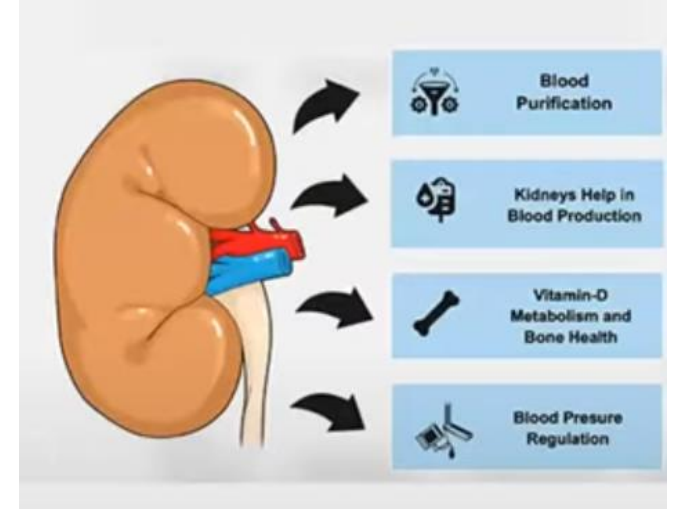
Domuz dokularının Medikal kullanımı umut verici



Neden Domuzlar ?

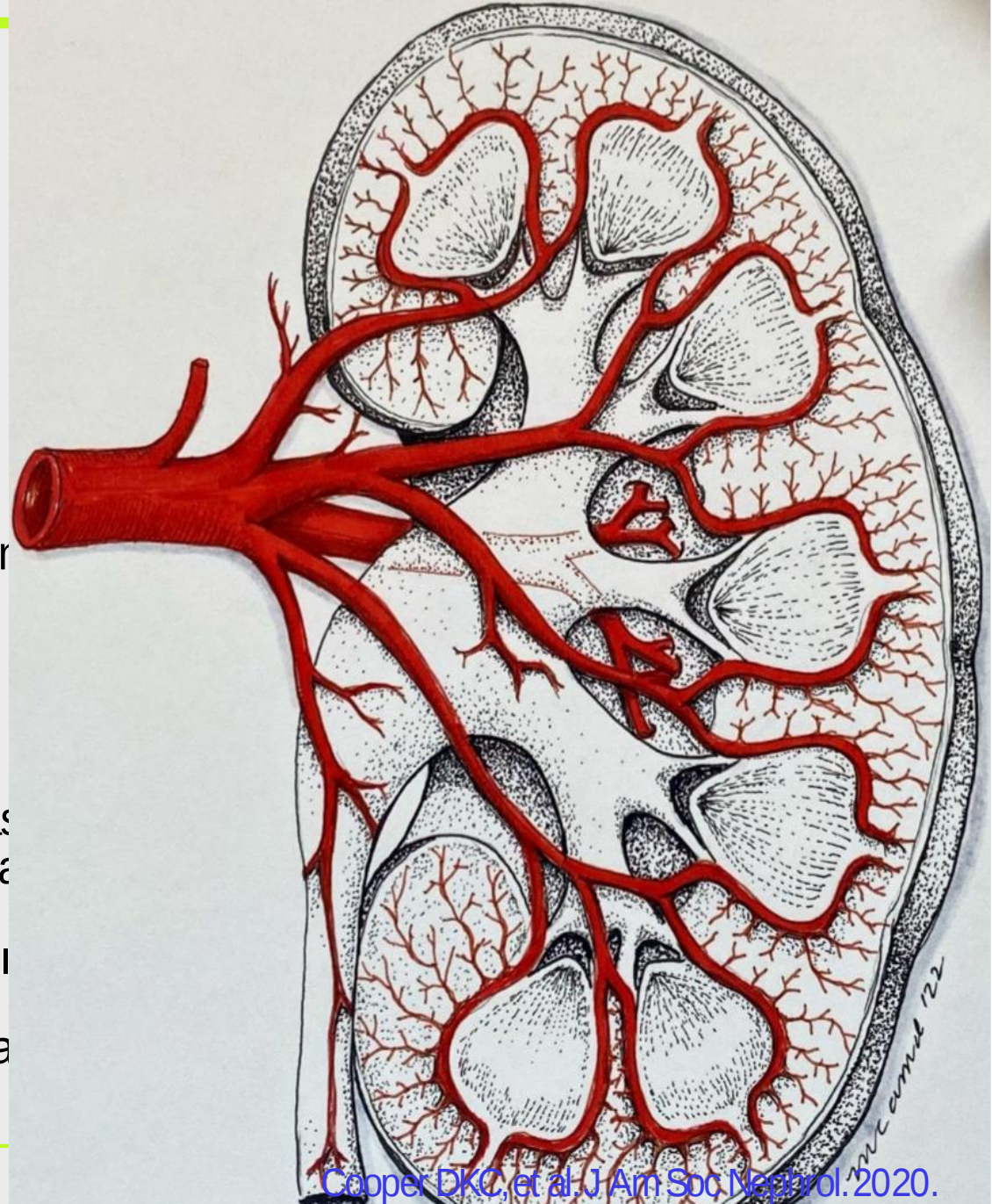


- Domuz böbrekleri insan böbrek büyüklük ve fonksiyonuna benzer özellikler taşıyor
 - Sıvı ve atık atımı
 - Kan basıncı kontrolü
 - Vitamin ve mineral dengesi
 - Boyut insan böbreği ile benzer
 - Kısa sürede Çok sayıda elde ediliyor
 - Rejeksiyonu önlemek için Genetik olarak modifiye edilebiliyor
 - Enfeksiyon geçiş riski az
- Domuz böbrek yaşam süresinin 30 yıl civarında olması allotransplant (insan donör böbreği) ile benzer.



Xenotransplantasyon Avantajları

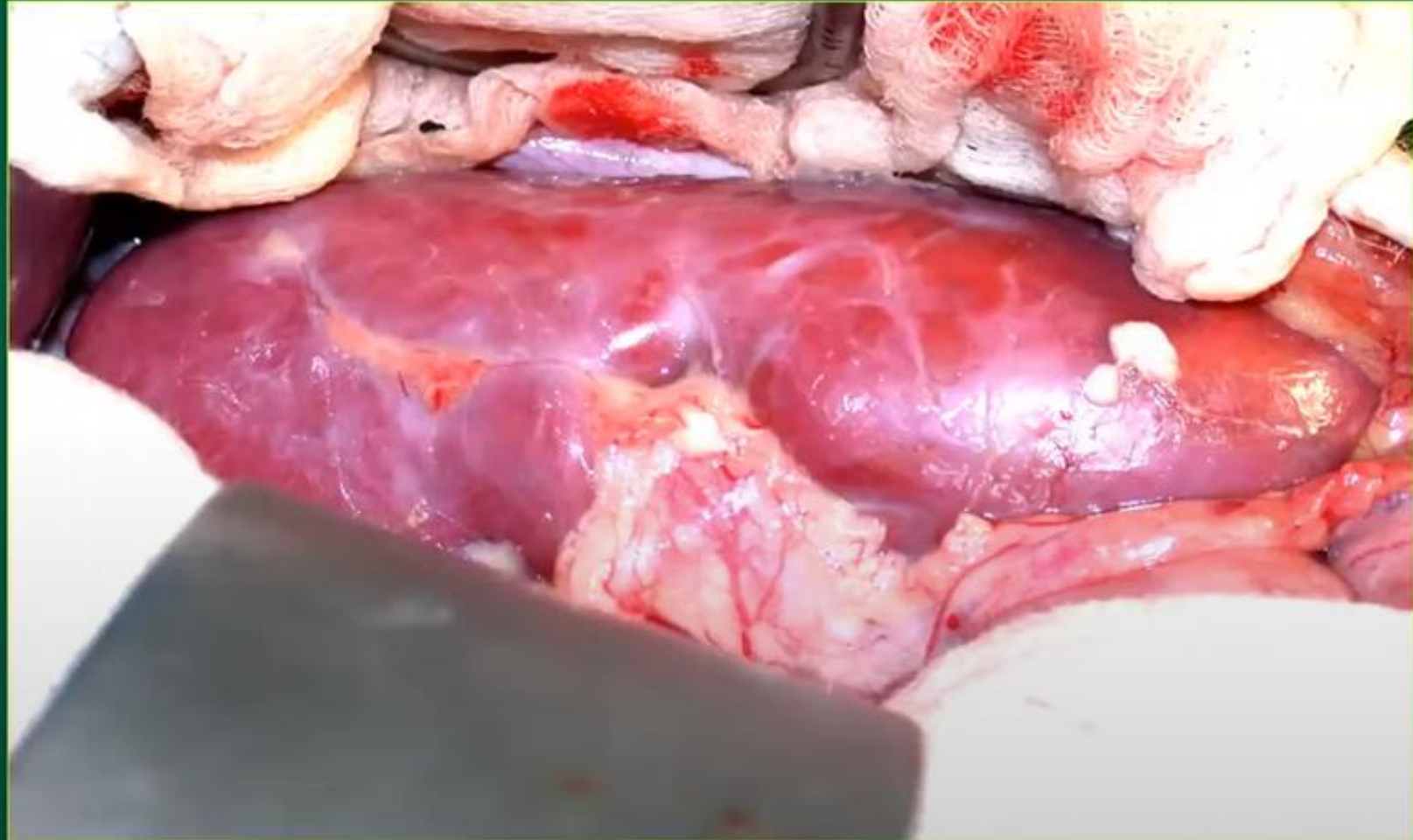
- Sınırsız donör organ kaynağı sağlaması
- Acil veya elektif ihtiyacın karşılanması
- Beyin ölümünün donör organlara olumsuz etkileri ortadan kaldırması
- “Borderline” nakil adayları için de organ sağlanabilmesi
 - Kontrolsüz DM, ASKH, SVH, Periferik arter hastalığı gibi
- Nakil öncesi donörün ayrıntılı mikrobiyoloji taraması xenogeneik dokunun bazı insan patojenlerine dirençli olması
- Canlı donör ihtiyacının ve canlı donör riskini ortadan kaldırması
- Kadavra donör bağışı için kültürel bariyerlerin ortadan kaldırılması



Domuz Xenotransplantasyon modeli: Wild type pigs



wild type PIG-TO-BABOON KIDNEY TX (DAY 0)



Majör Xenoantijenin tanımlanması

Baboons and Human have naturally occurring antibodies to pig organs that attack the organs



Solution:
Treat the recipient with
Immunosuppression (over
treated)

Xenotransplantasyonun 100 yılı



Box 1 | 100 years of xenotransplantation

1906: Pig and goat kidneys transplanted onto arm vessels survive for 3 days

1910: A macaque kidney transplanted into a human survives for 32 hours

1963: A 23-year-old woman survives for 9 months with functioning chimpanzee kidneys

1984: A newborn, Baby Fae, survives for 20 days with a baboon heart

1994: Discovery of natural antibodies against alpha-Gal, which causes the rejection of pig organs

2004: Genetic editing of pigs to modify alpha-Gal, a discovery followed by additional genetic modifications to prevent rejection

2022: Transplantation of genetically modified pig kidneys into two deceased humans

2022: Transplantation of a genetically modified pig heart into a human, who lived for a further 2 months



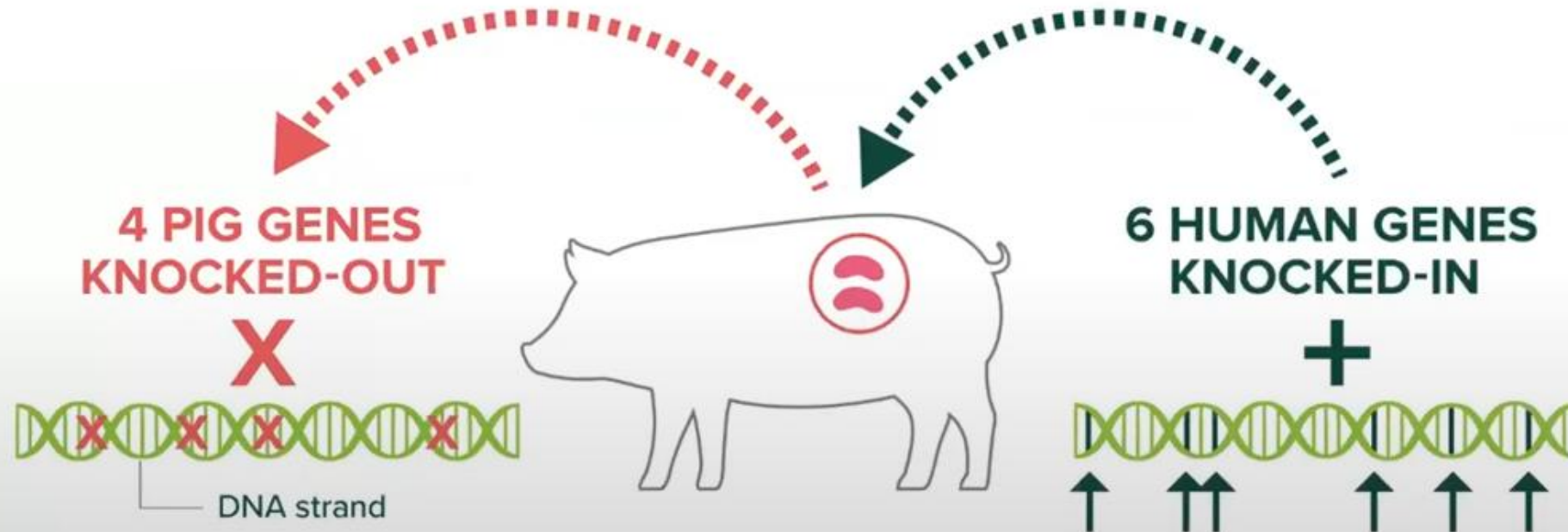
Modifiye Donör

Knock out Domuzlar

Donorü insana benzer hale getirmek

The 10-Gene-Edited Pig

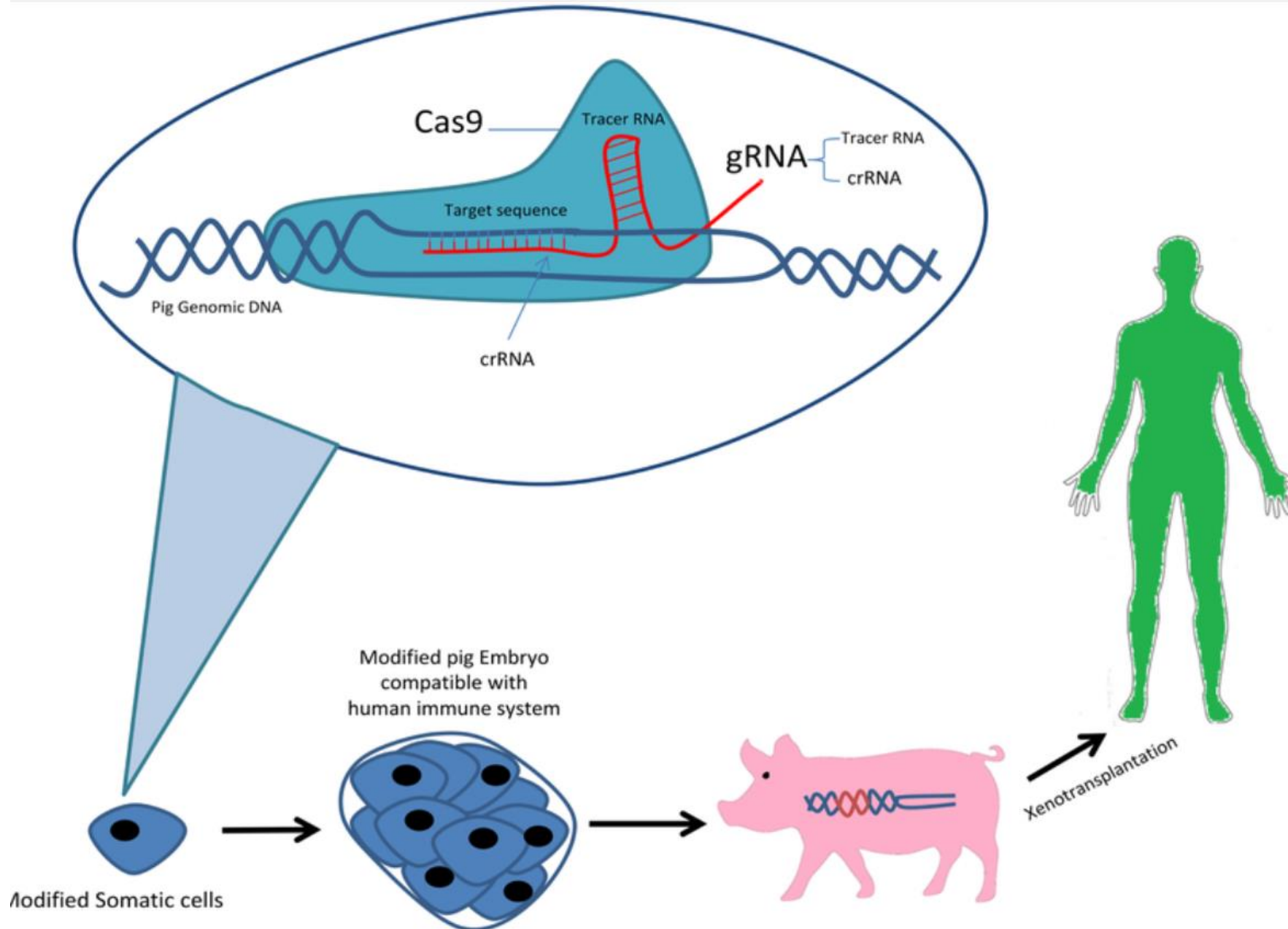
The key to xenotransplantation



Knock –out: GGTA1,CMAH, B4GALLNT2, GHR

Knock-in: CD46,CD55,CD47, THBD, PROCR, HMOX1

CRISPR-Cas9 in Xenotransplantation



Knockout domuz organ modeli : Neler öğrendik

Modified Donor Pig

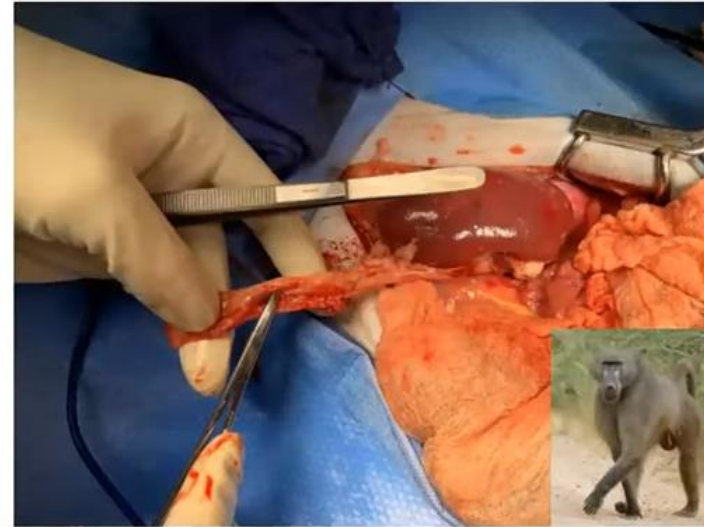


Baboon



insan böbreğine benzeyen domuz önce Baboon larda denendi

Modified Pig	→	Baboon
Modified Pig	X	Human



Tested in Baboons (NHP)

Genetically engineered to look less “foreign” to human immune system:

- TKO & GHRKO
- 6 human transgenes

BUT. . .

1. NHP immunologically different than human
2. Needs to be tested with conventional immunosuppression

Modifiye domuz böbreği insan böbreği ile bazı farklılıklar taşıyor

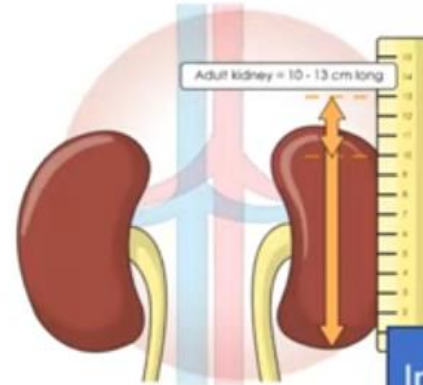


Pig and Human Hormonal
Differences

**TRANSPLANT
REJECTIONS**



Long-term Risk of Rejection



Increased Growth in Kidney Size



Concentrating and Diluting
Urine as Needed

Brief Communication

Pig kidney graft survival in a baboon for 136 days: longest life-supporting organ graft survival to date

Abstract: The longest survival of a non-human primate with a life-supporting kidney graft to date has been 90 days, although graft survival > 30 days has been unusual. A baboon received a kidney graft from an α -1,3-galactosyltransferase gene-knockout pig transgenic for two human complement-regulatory proteins and three human coagulation-regulatory proteins (although only one was expressed in the kidney). Immunosuppressive therapy was with ATG+anti-CD20mAb (induction) and anti-CD40mAb+rapamycin+corticosteroids (maintenance). Anti-TNF- α and anti-IL-6R were administered. The baboon survived 136 days with a generally stable serum creatinine (0.6 to 1.6 mg/dl) until termination. No features of a consumptive coagulopathy (e.g., thrombocytopenia, decreased fibrinogen) or of a protein-losing nephropathy were observed. There was no evidence of an elicited anti-pig antibody response. Death was from septic shock (*Myroides* spp). Histology of a biopsy on day 103 was normal, but by day 136, the kidney showed features of glomerular enlargement, thrombi, and mesangial expansion. The combination of (i) a graft from a specific genetically engineered pig, (ii) an effective immunosuppressive regimen, and (iii) anti-inflammatory agents prevented immune injury and a protein-losing nephropathy, and delayed coagulation dysfunction. This outcome encourages us that clinical renal xenotransplantation may become a reality.

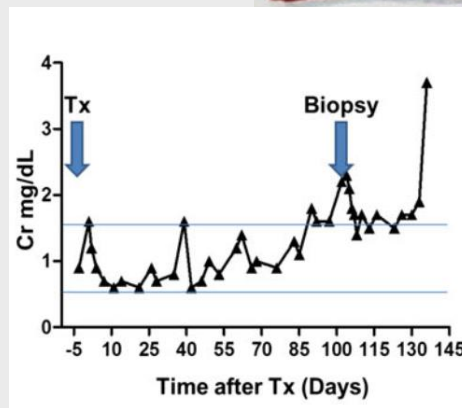


Table 1. Immunosuppressive, anti-inflammatory, and adjunctive therapy

Agent	Dose (Duration)
Immunosuppressive	
Induction	
Thymoglobulin (ATG) (Genzyme, Cambridge, MA)	10 mg/kg (day-3)
Anti-CD20mAb (Rituximab) (Genentech, South San Francisco, CA)	10 mg/kg (day-2)
Cobra venom factor (Complement Technology, Tyler, Texas)	100 IU (days-1 and 0)
Maintenance	
Anti-CD40mAb (2C10R4) (NIH NHP Resource Center, Boston, MA)	50 mg/kg (days-1, 0, 4, 7, 14, and weekly)
Rapamycin (LC Laboratories, Woburn, MA)	0.01 mg/kgx2/day (target 8-12 ng/ml) (from day-3)
Methylprednisolone (MP) (Astellas, Deerfield, IL)	5 mg/kg/day tapering to 0.25 mg/kg/day
Anti-inflammatory	
Tocilizumab (IL-6R blockade) (Genentech, South San Francisco, CA)	10 mg/kg (days-1, 7, 14 and every 2 weeks)
Etanercept (TNF- α antagonist) (Amgen, Thousand Oaks, CA)	0.5 mg/kg (days 0, 3, 7, 28, 40)
Adjunctive	
Aspirin (Bayer, Deland, FL)	40 mg p.o. (alternate days)
Low-molecular weight heparin (LMWH) (Eisai, Woodcliff Lake, NJ)	700 IU/day s.c.

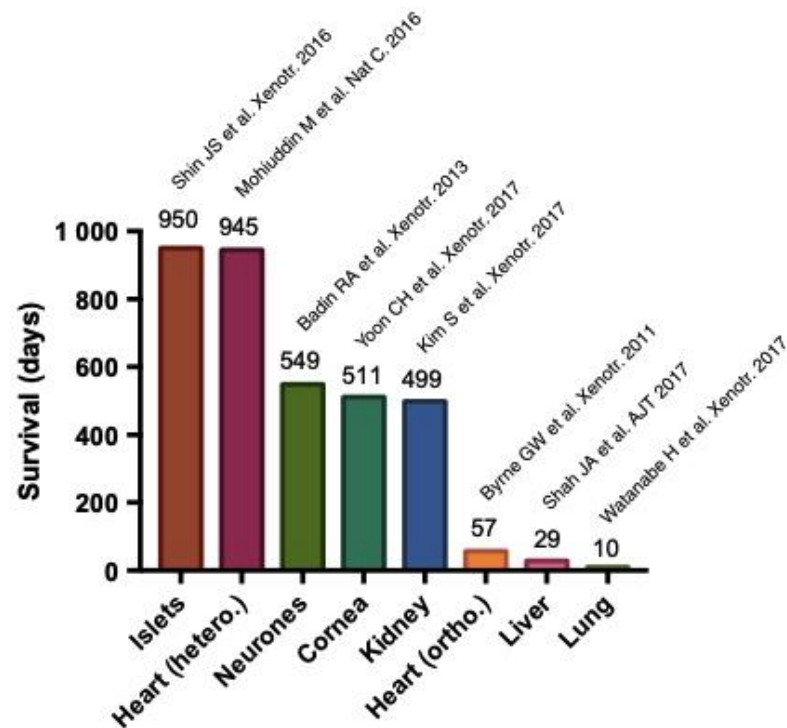


Figure 1 Survival of xenogeneic organs/tissue transplanted in nonhuman primates.

REVIEW

www.jasn.org

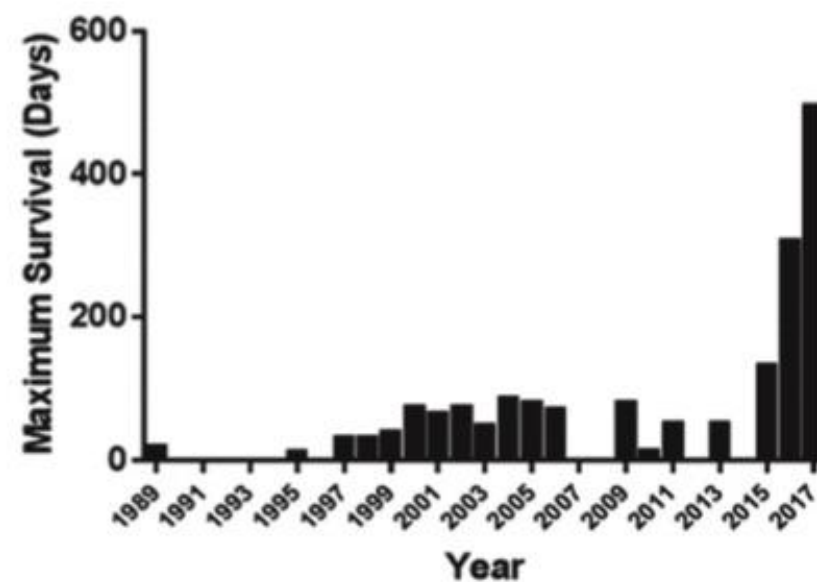


Figure 2. Reported maximum survivals of nonhuman primates with life-supporting pig kidney grafts, some years, no

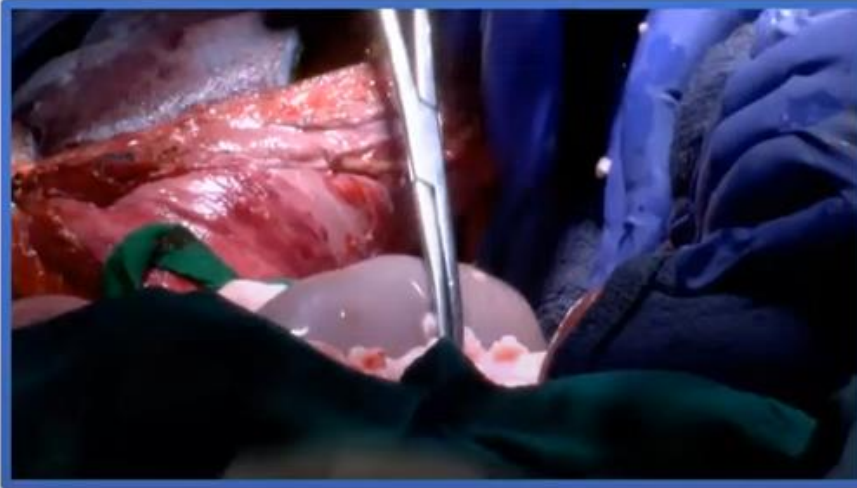
insan böbreği modeli gerekiyor: Beyin ölümü modeli



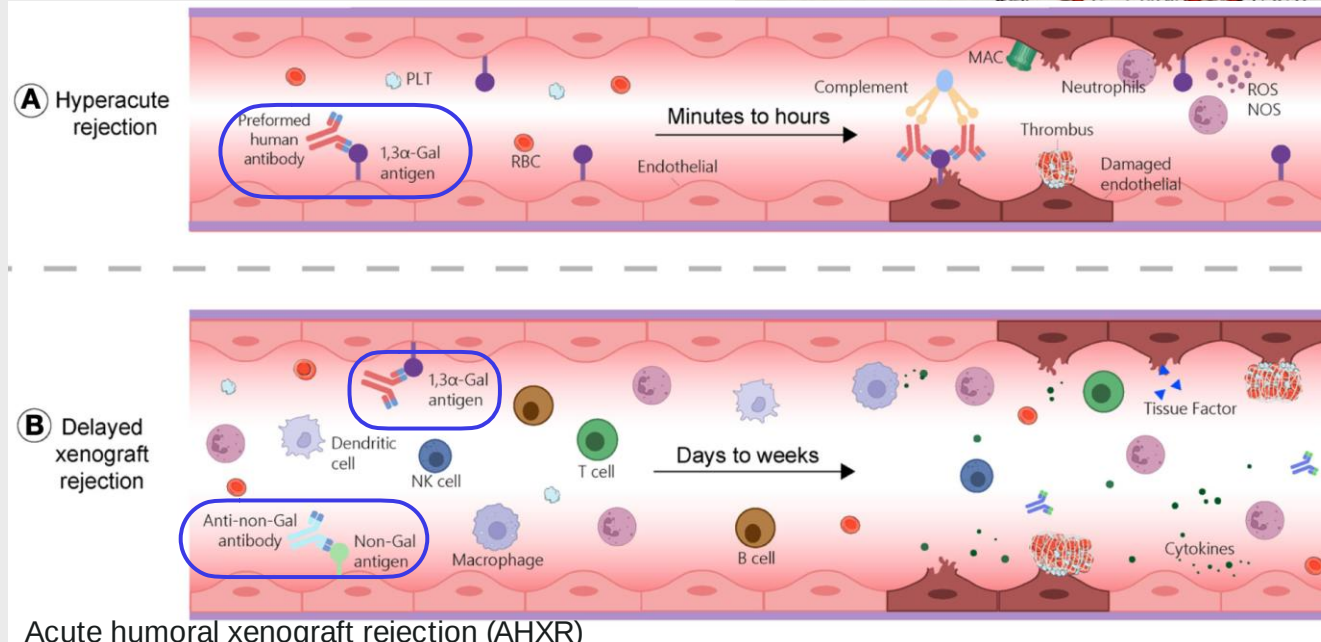
Avantajları :

1. Yaşayan birisi için zararsız
2. Bir insanda genetik mühendisliği test etme şansı ?
3. Bir insanda immunsupresifleri test şansı ?

Xeno-böbrek transplantasyonu cerrahisi benzer bir cerrahi işlem



İmmünolojik Bariyer



Acute humoral xenograft rejection (AHXR)

Cellular xenograft rejection

Coagulation dysregulation

Koagülasyon Disregülasyonu

Domuz endoteli

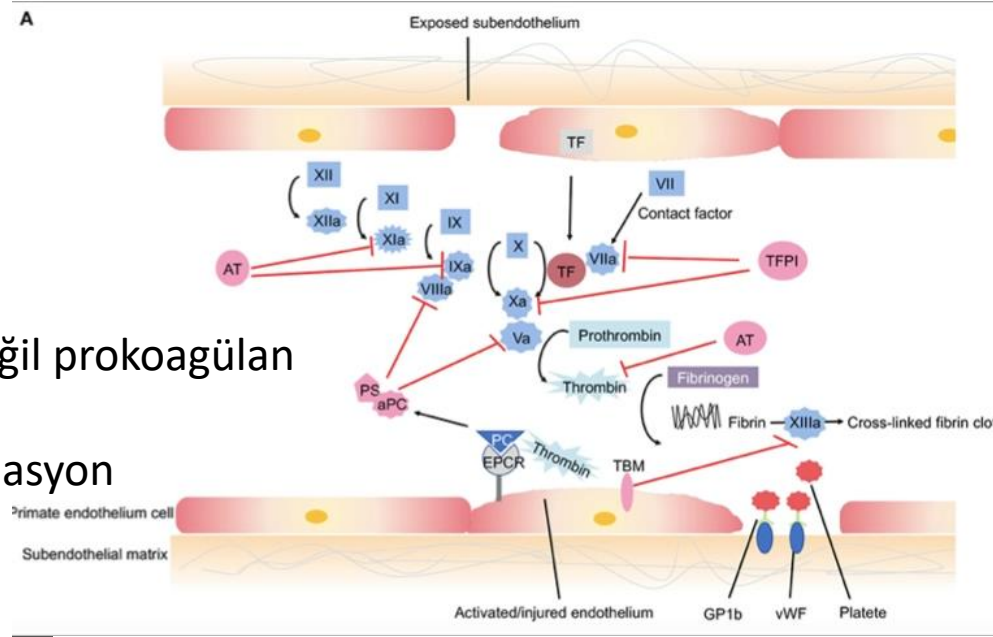
antikoagülan değil prokoagülan

Tissue faktör

Extrinsek koagülasyon

...

trombin



Tissue faktör pathway inhibitör

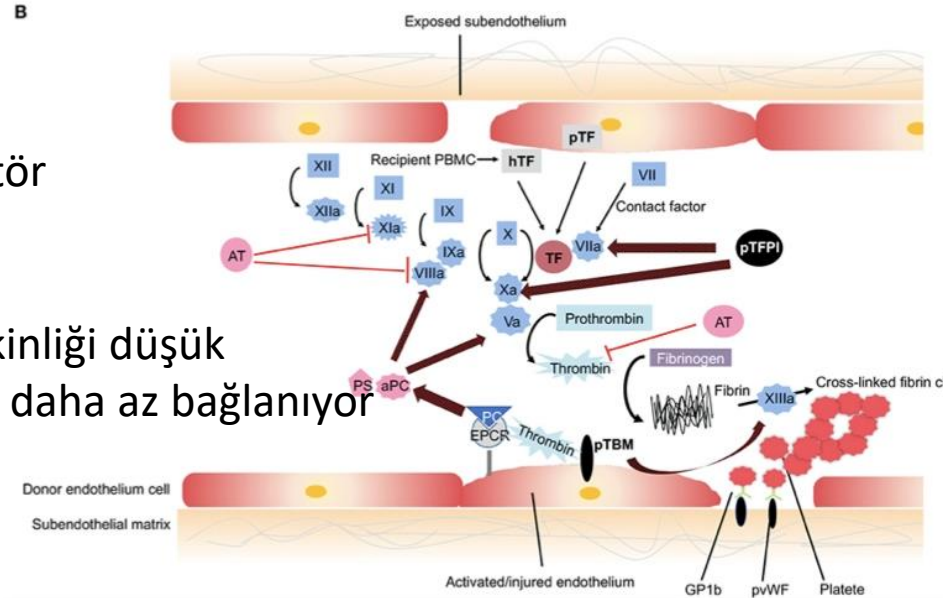
Domuz da daha az etkin

Domuz Thrombomodulin etkinliği düşük

Domuz TBM-İnsan Trombine daha az bağlanıyor

Protein C daha az aktive

Domuz vWB platelet aggre..



Xenotransplantasyon Bariyer

1. Hiperakut rejeksiyon
2. Akut humoral rejeksiyon
3. T hücreli rejeksiyon
4. Kronik rejeksiyon

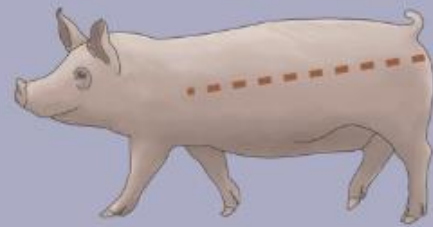
Dakikalar - Saatler
Saatler-Günler
Günler Haftalar
Haftalar -Aylar

Koagülasyon Disregülasyonu



Trombotik mikroanjiopati
Sistemik consumptive koagülopati (sistemik reaksiyon) nadir
İskemi ve hasar ile sonuçlanır

Kompleman Regülatör proteinler



Immunological and Technical Barriers

- Hyperacute rejection
- Acute vascular xenograft rejection
- Acute cellular rejection
- Immunosuppressive medication
- Complement-mediated toxicity and coagulation dysregulation
- Perioperative xenograft dysfunction and ischemia-reperfusion injury

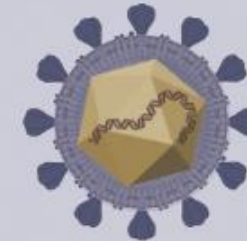


Infectious Barriers

Viral transmission risk



- Porcine endogenous retrovirus
- Suid beta herpes virus 2
- Lymphotropic herpes virus
- Hepatitis E virus



Physiological Barriers

- Detrimental xenograft overgrowth
- Porcine hemodynamic and physiologic differences with humans



Social and Ethical Barriers

- Community acceptance
- Legal regulations
- Allocation system
- Animal rights
- Distributive justice
- Well-informed consent



Healthcare Resource-Based Barriers

- Xenotransplant-associated costs
- Implementation in private versus public healthcare systems

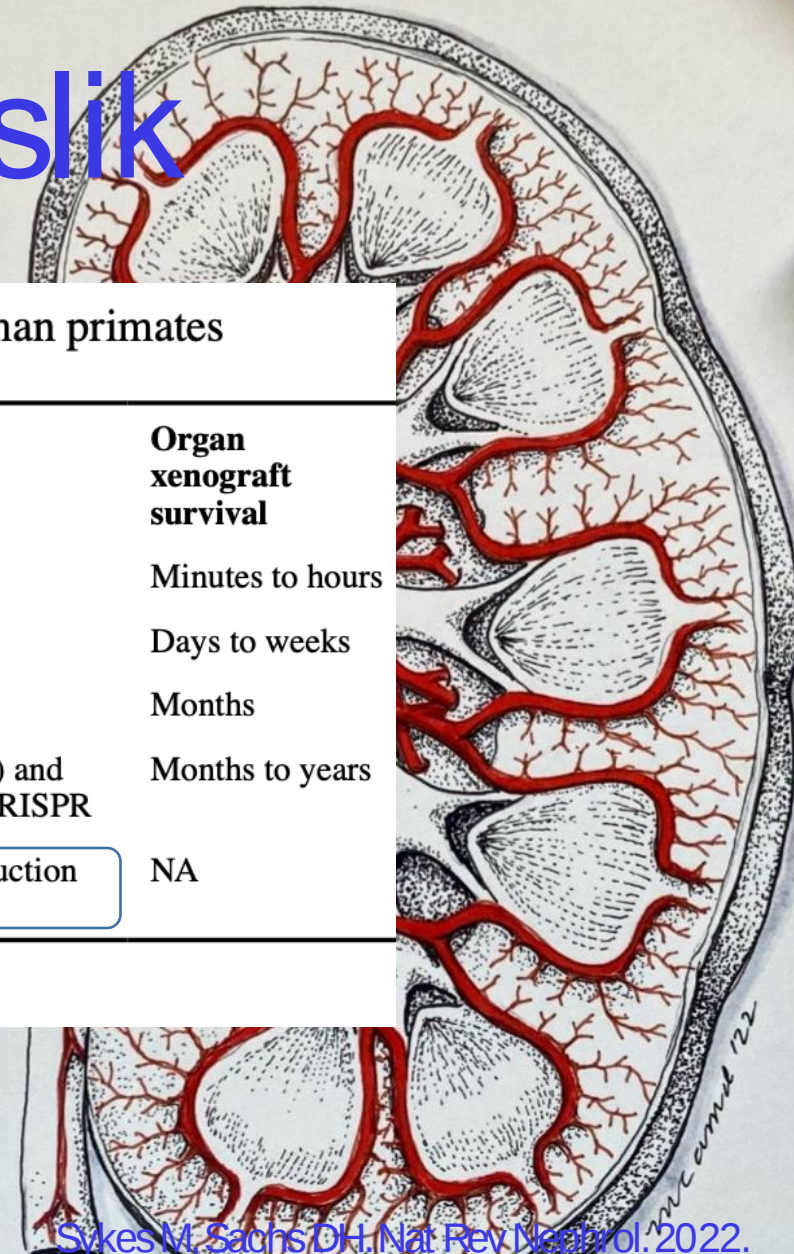


Genetik Mühendislik

Chronology of progress in xenotransplantation from pigs into non-human primates

Date	Innovation	Organ xenograft survival
1980s	Natural antibody absorption	Minutes to hours
1990s	Human CRP transgenic donor pigs	Days to weeks
2000s	GGTA1-knockout donor pigs	Months
2010s	New transgenic (CRPs, hCD47, coagulation inhibitors, anti-inflammatory proteins) and knockout (B4GalNT2, CMAH, porcine endogenous retrovirus) donor pigs using CRISPR	Months to years
2020s	First human xenotransplants, potential clinical trials, development of tolerance induction approaches	NA

CRP, complement regulatory protein; NA, not available.



FDA approves genetically engineered pigs

The first approval for both food and medical use

By Kait Sanchez | @crisp_red | Dec 14, 2020, 7:03pm EST

f t  SHARE



Curing Human Disease Through Regenerative Medicine

[Home](#) [About Us](#) [Technology](#) [Management](#) [Publications](#) [News](#) [Contact Us](#)

[Xenotransplantation Technology](#)

[Islet Transplantation Technology](#)

[Infectious Disease Technology](#)

Xenotransplantation Technology

Revivacor's goal is to produce **genetically engineered (GE)** pigs to provide human compatible cells (i.e., islets) for treatment of diabetes and organs and tissues for use in transplant surgery (xenografts).

XENOGRAFT PLATFORM

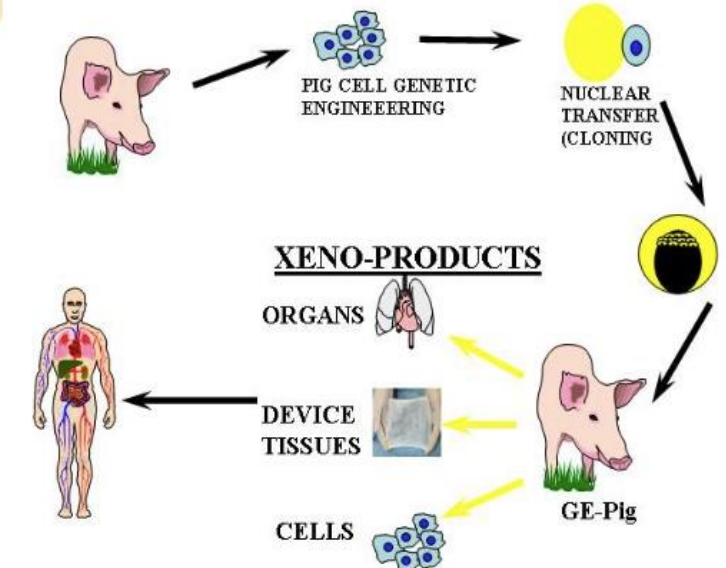


TABLE 1 | Genetically modified pigs currently available for xenotransplantation research.

Abbreviation	Gene name	Function
<u>GTKO</u>	1,3-galactosyltransferase KO (GGTA1 KO)	Deletion of α Gal epitope
CMAH KO	CMP- <i>N</i> -acetylneuraminic acid hydroxylase KO	Deletion of Neu5Gc epitope
β 4GalNT2 KO	β -1,4 <i>N</i> -acetylgalactosaminyltransferase KO	Deletion of SDa epitope
hCD46 (MCP)	Human membrane cofactor protein transgene	Inactivation complement factors C3b and C4b
hCD55 (DAF)	Human decay accelerating factor transgene	Acceleration of complement decay
<u>hCD59 (MAC-IP)</u>	Human membrane attack complex C5b-9 inhibitory protein transgene	Inhibition of the complement membrane attack complex C5b-9
<u>hTBM</u>	Human thrombomodulin	Anticoagulation (activates protein C)
hTFPI	Human tissue factor pathway inhibitor	Antagonize the function of tissue factor
hCD39 (hENTPD1)	Human ectonucleoside triphosphate diphosphohydrolase-1 transgene	Anticoagulation and anti-inflammatory
hA20	Human tumor necrosis factor alpha-induced protein-3 transgene	Inhibition of NF-kappa B activation and TNF-mediated apoptosis
hCD47	Human integrin associated protein transgene	Regulation of macrophage activation and phagocytosis
CTLA4-Ig	Cytotoxic T-lymphocyte-associated protein 4-immunoglobulin transgene	Cellular immune response: Inhibition of T-cell costimulation via CD86/CD80
<u>CIITA-DN</u>	MHC class II transactivator dominant negative	Suppression of T-cell activation
hHO1	Human heme oxygenase 1 transgene	Antiapoptosis; cytoprotection; anti-inflammatory
ASGR1 KO	Asialoglycoprotein receptor 1	Decreases human platelet phagocytosis by pig sinusoidal endothelial cells
<u>PERV inactivation</u>	Porcine endogenous retroviral virus inactivation	Xenozoonosis

Kliniğe geçmeden önceki insan çalışması

Received: 7 December 2021 | Revised: 15 December 2021 | Accepted: 16 December 2021

DOI: 10.1111/ajt.16930

ORIGINAL ARTICLE

AJT

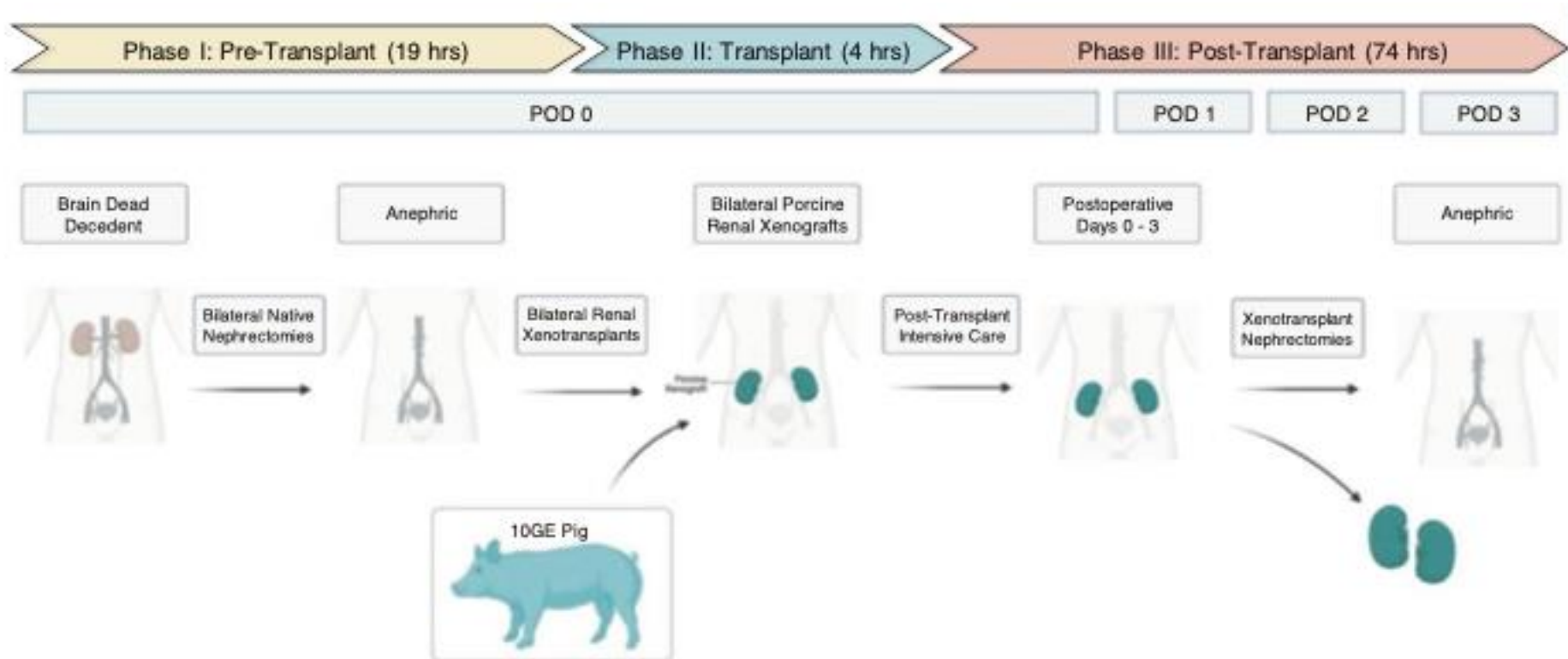
First clinical-grade porcine kidney xenotransplant using a human decedent model

Paige M. Porrett¹  | Babak J. Orandi¹  | Vineeta Kumar¹  | Julie Houp¹ | Douglas Anderson¹ | A. Cozette Killian¹ | Vera Hauptfeld-Dolejssek¹ | Dominique E. Martin² | Sara Macedon¹ | Natalie Budd¹ | Katherine L. Stegner¹ | Amy Dandro³ | Maria Kokkinaki³ | Kasinath V. Kuravi³ | Rhiannon D. Reed¹ | Huma Fatima¹ | John T. Killian Jr.¹ | Gavin Baker¹ | Jackson Perry¹ | Emma D. Wright¹ | Matthew D. Cheung¹  | Elise N. Erman¹ | Karl Kraebber¹ | Tracy Gamblin¹ | Linda Guy¹ | James F. George¹ | David Ayares³ | Jayme E. Locke¹ 

Domuz Kaynağı

- Porcine renal xenografts were procured from genetically engineered (GE) pigs provided by **Revivacor, Inc.**
- **GE domuzlar 10 genetik modifikasyon içeriyor (10-GE pigs),**
 - including targeted insertion of two human **complement inhibitor genes** (hDAF, hCD46),
 - two human **anti- coagulant genes** (hTBM, hEPCR), and two **immunomodulatory genes** (hCD47, hHO1),
 - as well as deletion (knockout) of 3 pig **carbohydrate antigens** and the pig **growth hormone receptor gene**.
 - Importantly, 10-GE pigs do **not express red blood cell antigens** and are therefore universal donors with respect to blood type.

FCXM test nakil öncesi yapılıyor



• Family authorization • Prospective crossmatch • Xenograft procurement • Pre-transplant xenograft histology • Removal of bilateral decedent native kidneys	• Induction immunosuppression • Transplantation of right and left kidney xenografts • Visual assessment for hyperacute rejection • Visual assessment of xenograft perfusion • Post-implantation xenograft biopsies	• Induction and maintenance immunosuppression • Assessment of xenograft function • Visual inspection of xenografts, including vascular and ureteral anastomoses • Assessment of xenograft perfusion • Assessment of sensitization (anti-HLA antibodies) • Assessment for transmission of porcine endogenous retroviruses • Serial xenograft biopsies • Bilateral xenograft nephrectomies
---	--	---

FIGURE 1 Study timeline and event summary. Created with BioRender.com

İmmünsupresyon

İndüksiyon

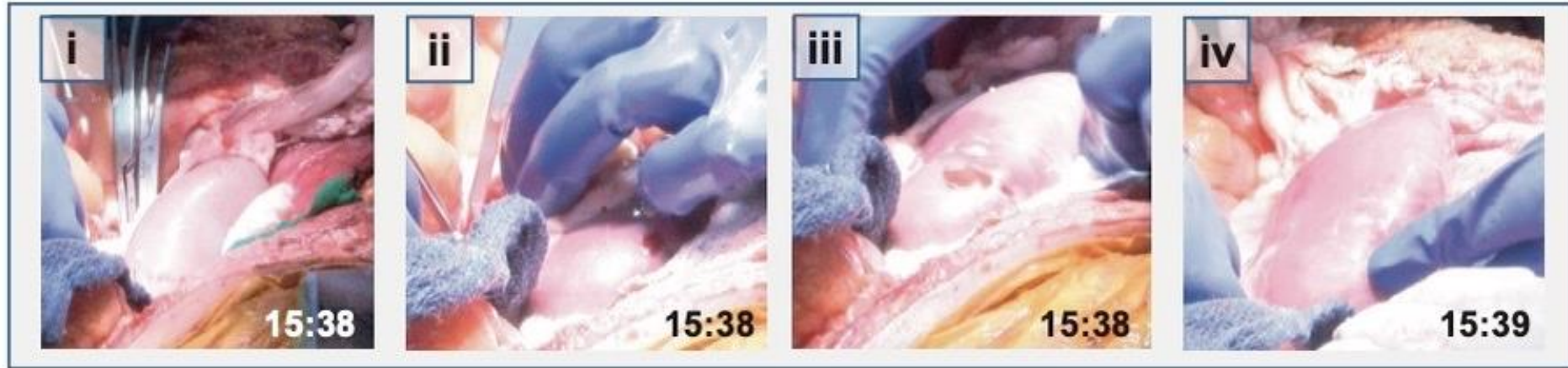
- Metil prednizolon (MP)
- ATG (6 mg/kg)
- Anti-CD20

İdame

- MP
- MMF
- Tacrolimus

(A)

Right Porcine Renal Xenograft Reperfusion



(B)

Right Porcine Renal Xenograft Urine Output

0 h 23 min (Day 0: 16:01)	0 h 40 min (Day 0: 16:18)	4 h 15 min (Day 0: 19:53)
i	ii	iii

Right

Left

POD 1

19 h 32 min
(Day 1: 10:06)



16 h 41 min
(Day 1: 09:56)



POD 3

72 h 54 min
(Day 3: 16:32)



71 h 56 min
(Day 3: 16:19)

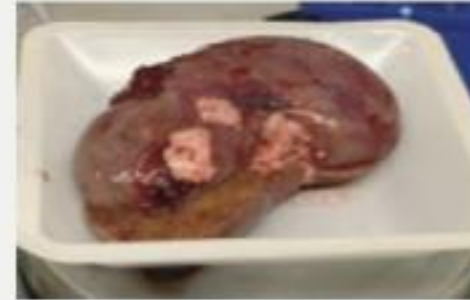


Explant

**Ex vivo
(Day 3: 23:25)**



**Ex vivo
(Day 3: 23:22)**



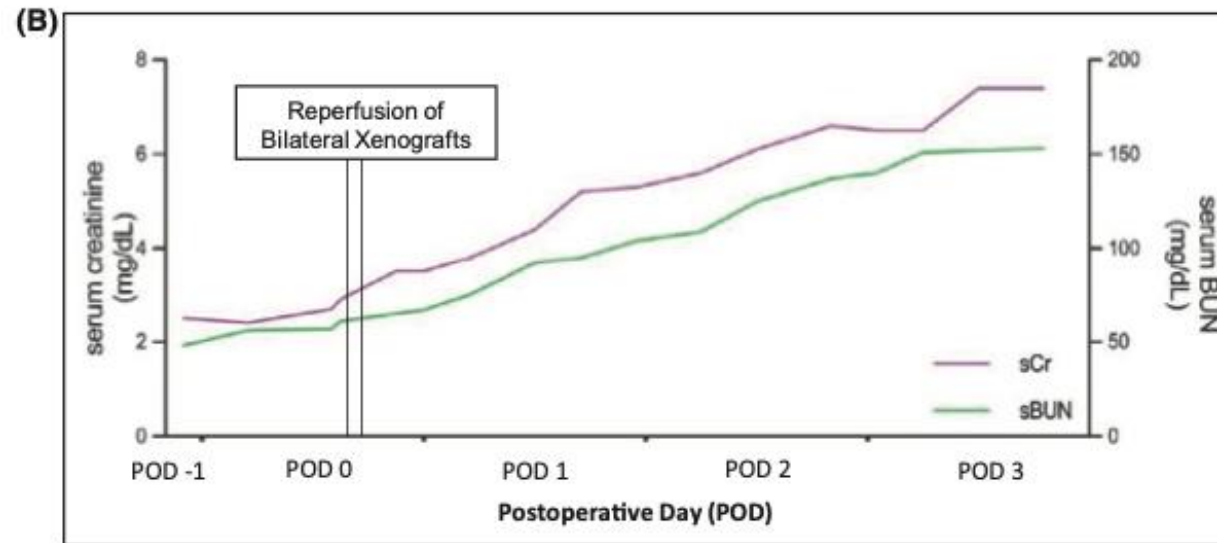
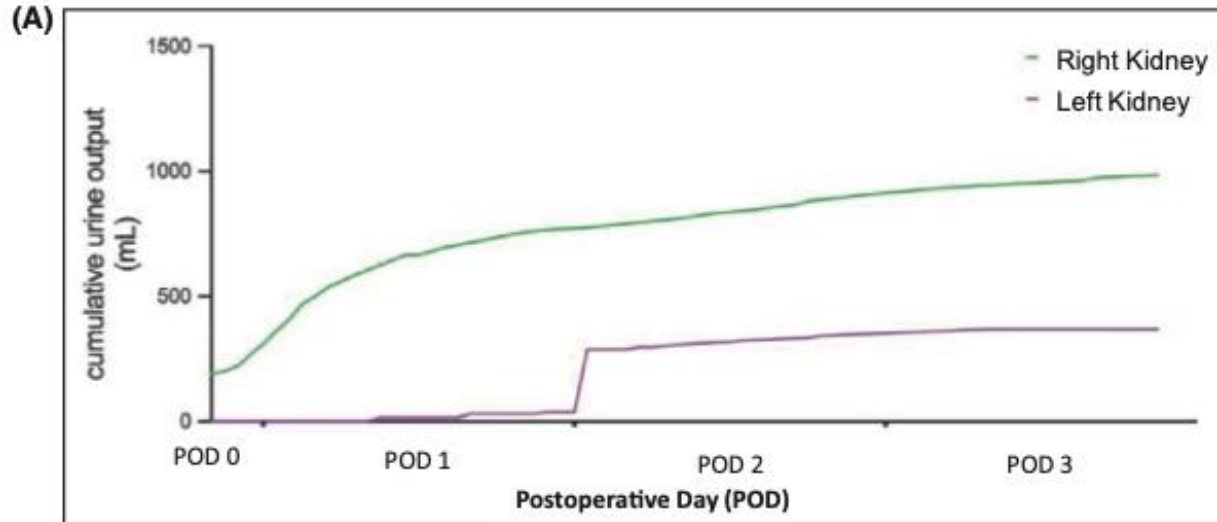


FIGURE 6 Porcine renal xenotransplant function in the human decedent. (A) Cumulative posttransplant urine output from transplantation to study end from right and left xenografts. (B) BUN and creatinine in the decedent's serum. Results prior to POD 0 reflect function of decedent's native kidneys prior to native nephrectomies

ORIGINAL ARTICLE

Results of Two Cases of Pig-to-Human Kidney Xenotransplantation

Robert A. Montgomery, M.D., D.Phil., Jeffrey M. Stern, M.D., Bonnie E. Lonze, M.D., Ph.D., Vasishta S. Tatapudi, M.D., Massimo Mangiola, Ph.D., Ming Wu, M.D., Elaina Weldon, M.S.N., A.C.N.P.-B.C., Nikki Lawson, R.N., Cecilia Deterville, M.S., Rebecca A. Dieter, Pharm.D., B.C.P.S., Brigitte Sullivan, M.B.A., Gabriella Boulton, B.A., Brendan Parent, J.D., Greta Piper, M.D., Philip Sommer, M.D., Samantha Cawthon, B.S., Erin Duggan, M.D., David Ayares, Ph.D., Amy Dandro, M.S., Ana Fazio-Kroll, Ph.D., Maria Kokkinaki, Ph.D., Lars Burdorf, M.D., Ph.D., Marc Lorber, M.D., Jef D. Boeke, Ph.D., Harvey Pass, M.D., Brendan Keating, Ph.D., Adam Griesemer, M.D., Nicole M. Ali, M.D., Sapna A. Mehta, M.D., and Zoe A. Stewart, M.D., Ph.D.

ABSTRACT

BACKGROUND

Xenografts from genetically modified pigs have become one of the most promising solutions to the dearth of human organs available for transplantation. The challenge in this model has been hyperacute rejection. To avoid this, pigs have been bred with a knockout of the alpha-1,3-galactosyltransferase gene and with subcapsular autologous thymic tissue.

METHODS

We transplanted kidneys from these genetically modified pigs into two brain-dead human recipients whose circulatory and respiratory activity was maintained on ventilators for the duration of the study. We performed serial biopsies and monitored the urine output and kinetic estimated glomerular filtration rate (eGFR) to assess renal function and xenograft rejection.

RESULTS

The xenograft in both recipients began to make urine within moments after reperfusion. Over the 54-hour study, the kinetic eGFR increased from 23 ml per minute per 1.73 m² of body-surface area before transplantation to 62 ml per minute per 1.73 m² after transplantation in Recipient 1 and from 55 to 109 ml per minute per 1.73 m² in Recipient 2. In both recipients, the creatinine level, which had been at a steady state, decreased after implantation of the xenograft, from 1.97 to 0.82 mg per deciliter in Recipient 1 and from 1.10 to 0.57 mg per deciliter in Recipient 2. The transplanted kidneys remained pink and well-perfused, continuing to make urine throughout the study. Biopsies that were performed at 6, 24, 48, and 54 hours revealed no signs of hyperacute or antibody-mediated rejection. Hourly urine output with the xenograft was more than double the output with the native kidneys.

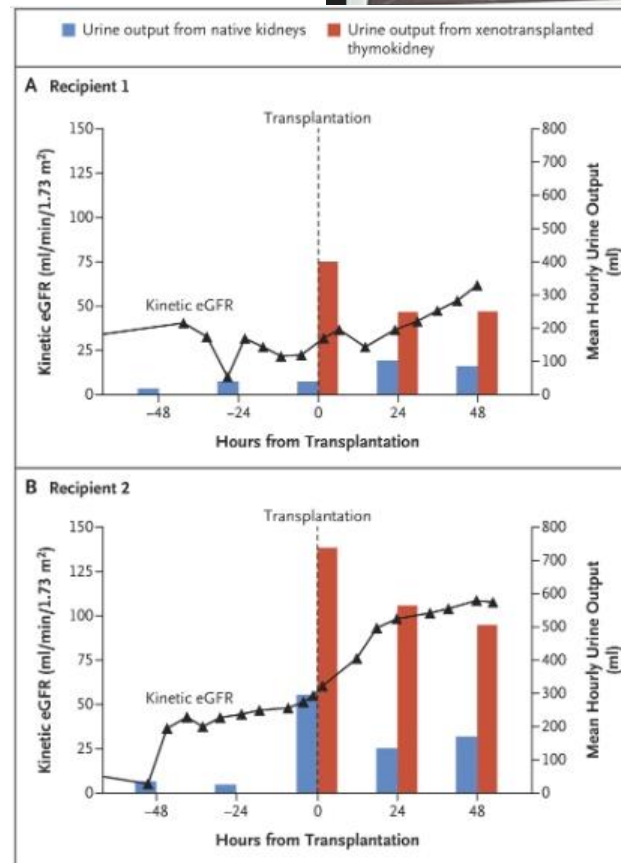
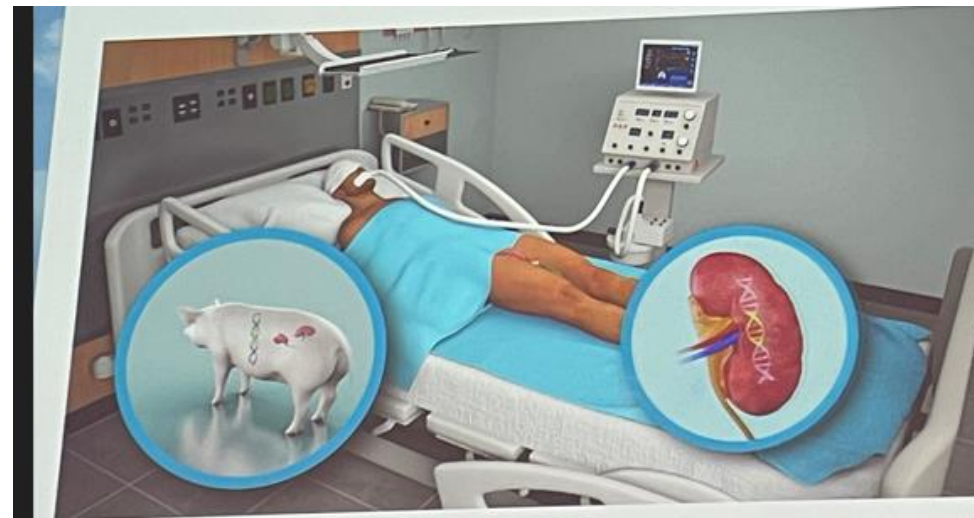
CONCLUSIONS

Genetically modified kidney xenografts from pigs remained viable and functioning in brain-dead human recipients for 54 hours, without signs of hyperacute rejection. (Funded by Lung Biotechnology.)

From the New York University (NYU) Langone Transplant Institute (R.A.M., J.M.S., B.E.L., V.S.T., M.M., E.W., N.L., C.D., R.A.D., B.S., G.B., G.P., N.M.A., S.A.M., Z.A.S.), the Departments of Pathology (M.W.), Anesthesia (P.S.), Biochemistry and Molecular Pharmacology (J.D.B.), and Cardiothoracic Surgery (H.P.), and the Institute for Systems Genetics (J.D.B.), NYU Langone Health, the Department of Population Health, Division of Medical Ethics (B.P.), NYU Grossman School of Medicine (J.S.C.), and the Columbia Center for Translational Immunology and the Department of Surgery, Columbia University (E.D., A.G.) — all in New York; Revivicor, Blacksburg, VA (D.A., A.D., A.F.-K., M.K., L.B.); United Therapeutics, Silver Spring, MD (M.L.); and the Department of Surgery, University of Pennsylvania, Philadelphia (B.K.). Dr. Montgomery can be contacted at robert.montgomery@nyulangone.org or at NYU Langone Health, 550 First Ave., New York, NY 10016.

N Engl J Med 2022;386:1889-98.
DOI: 10.1056/NEJMoa220238
Copyright © 2022 Massachusetts Medical Society.

Mayıs 2022



PRA iki alıcıda da negatif
CDC XM

1. Olguda düşük CDC pozitifliği
2. Olguda CDC XM daha güçlü pozitif

1000 mg/gün Prednisolon
2x1000 mg MMF IV

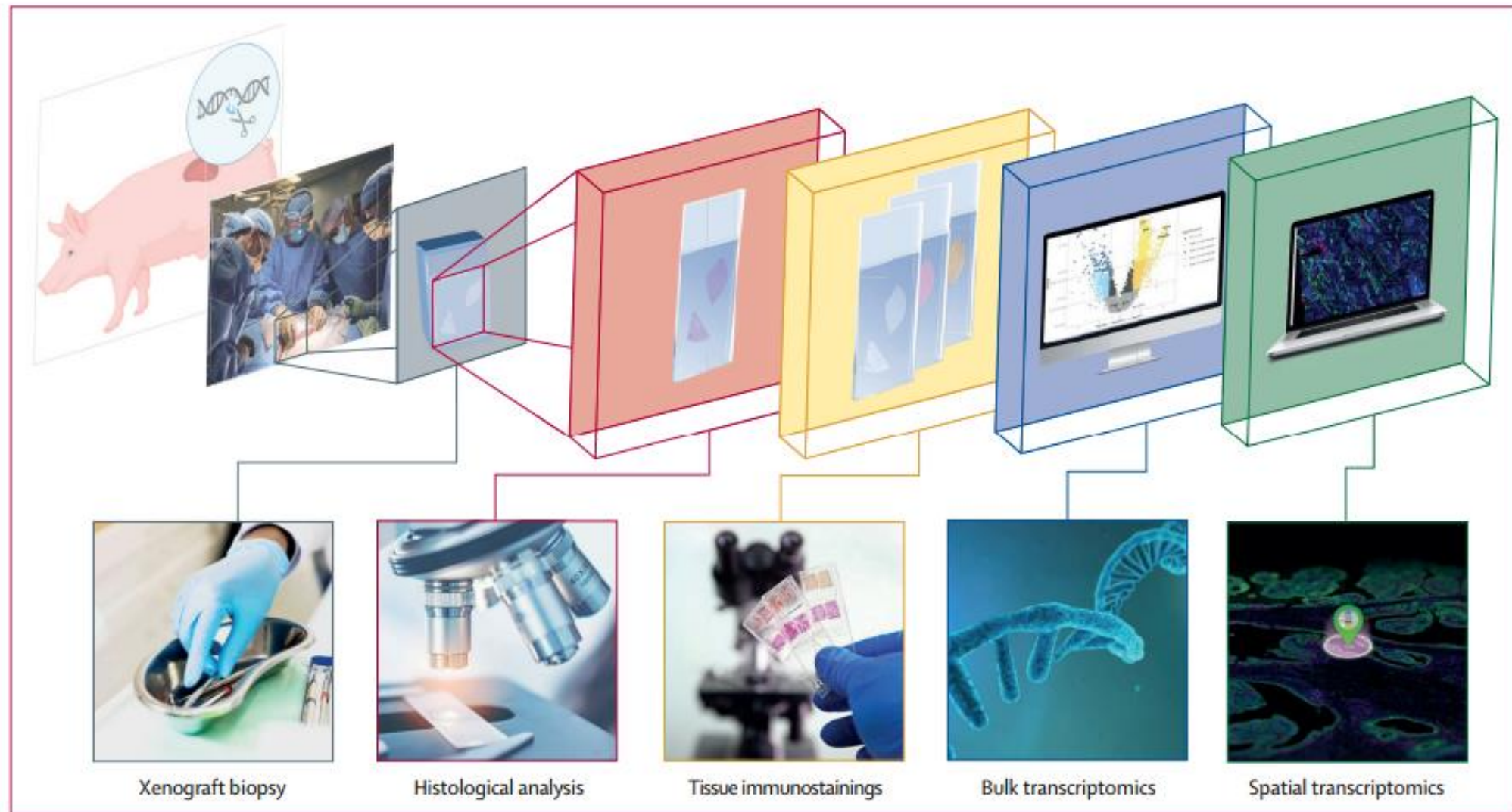


Figure 1: Multimodal deep phenotyping of pig kidney xenografts

We performed a deep phenotyping of xenograft biopsies using a four-step strategy combining a morphological evaluation by histological analysis, immunophenotyping with multiple immunostainings, gene expression profiling with bulk transcriptomics, and whole-transcriptome digital spatial profiling and cell deconvolution. Parts of figure created with BioRender.com.

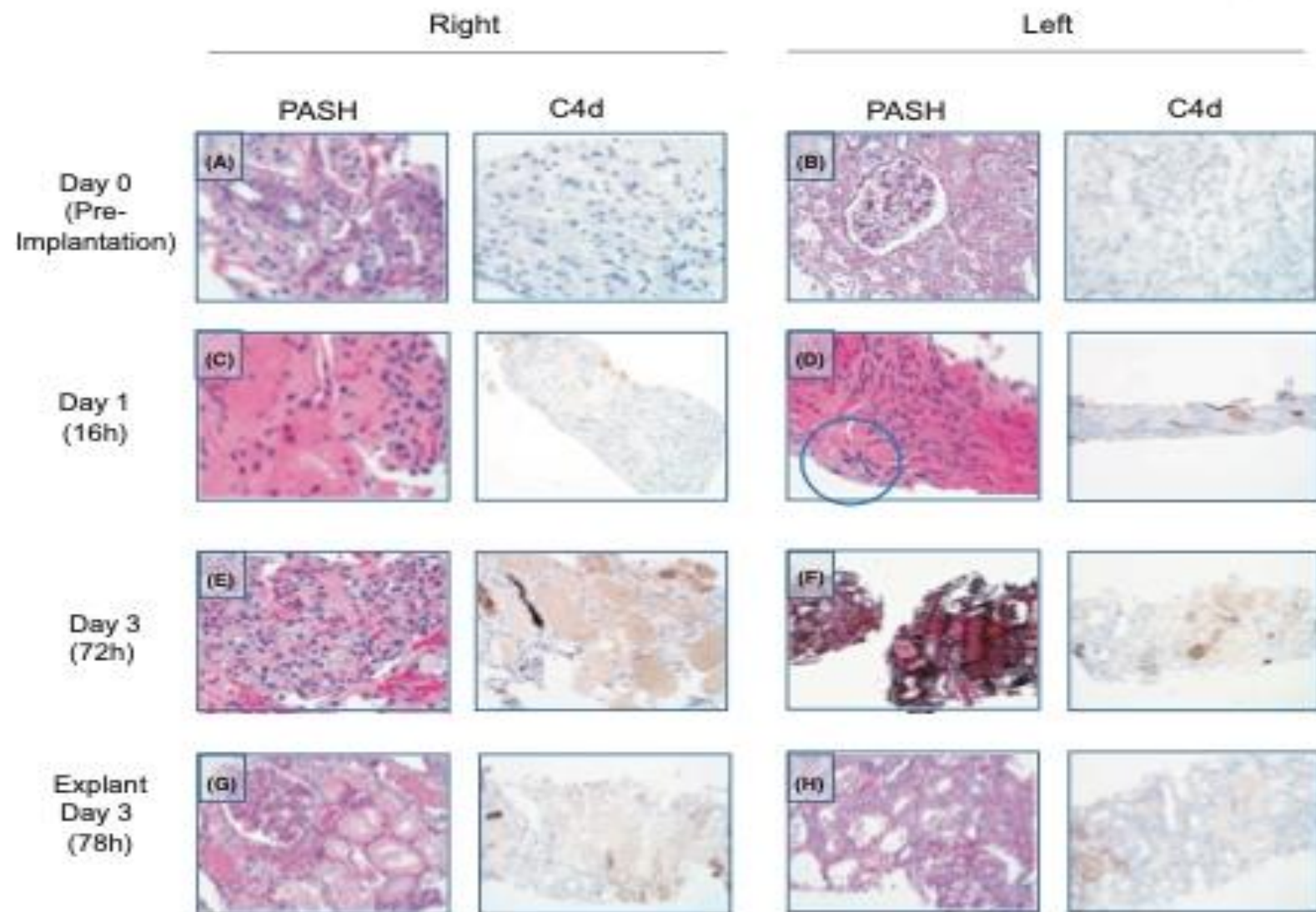


FIGURE 7 Serial histologic examination of the porcine kidney xenografts. All biopsies represent core biopsies. (A, B, G, and H) Were obtained ex vivo. (C, D, E and F) Were obtained in vivo. Sections are stained with PASH and are 10X, except for (C and D) (40X) and (F) (silver stain). C4d negative throughout. (A and B) Mild to moderate acute tubular injury from cold ischemia. Normal appearance of the capillary network, the mesangium, and the podocytes. (C and D) Glomerulus with multiple fibrin thrombi (blue circle). There is diffuse glomerular capillary congestion with swollen endothelial cells and near complete obliteration of the peripheral capillary lumina. There is presence of fibrin thrombi and fragmented red blood cells consistent with thrombotic microangiopathy (TMA). There is evidence of progressive tubular injury with extensive acute tubular necrosis (ATN). No mesangiolysis is appreciated. (E and F) Glomerular congestion and acute tubular necrosis. Endothelial cells remain segmentally swollen with partially obliterated lumina and rare fibrin thrombi with improvement of glomerular injury. (G and H) Acute tubular injury persists. Glomeruli with segmental endothelial swelling. No fibrin thrombi

A Recipient 1, after Perfusion



B Recipient 1, at 54 Hr



C Recipient 2, after Perfusion



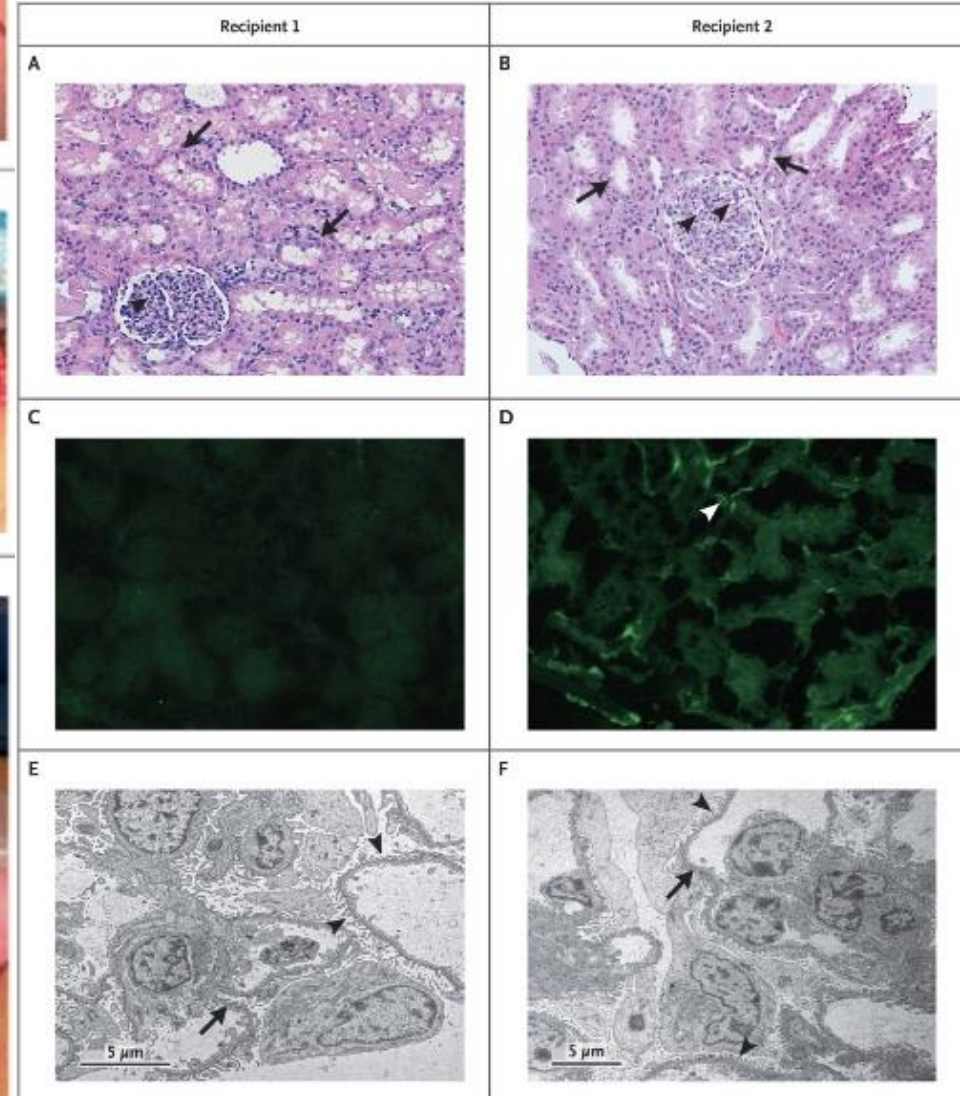
D Recipient 2, at 54 Hr

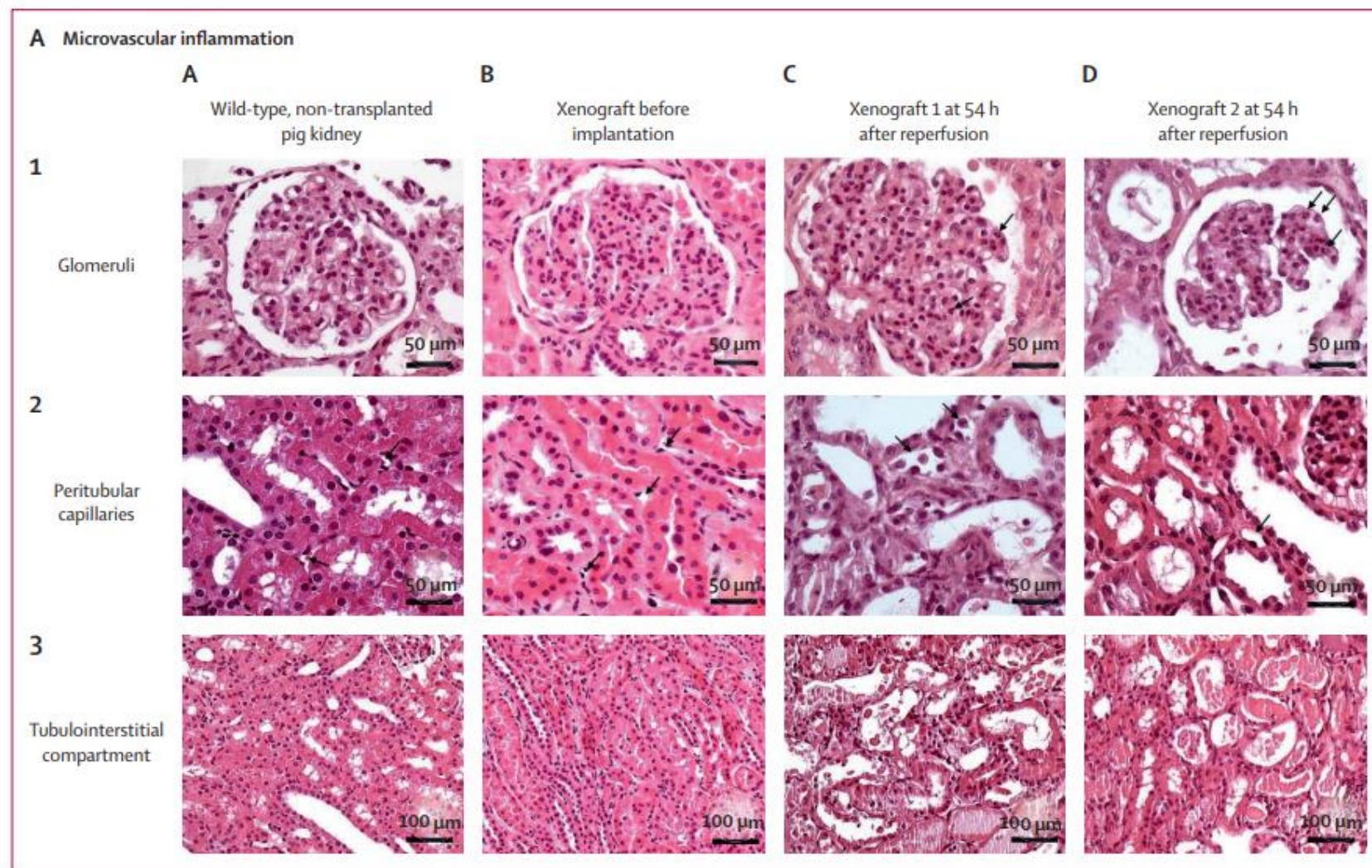


E Urine Drainage System



54 saatte
Hiperakut R. AMR veya T hücreli AR yok
TMA (-), C4d (-) Kapiller fibrin trombüs (-)
Trombositopeni yok





(Figure 2 continues on next page)

Histopatolojik bulgular - post-operatif 1. gün

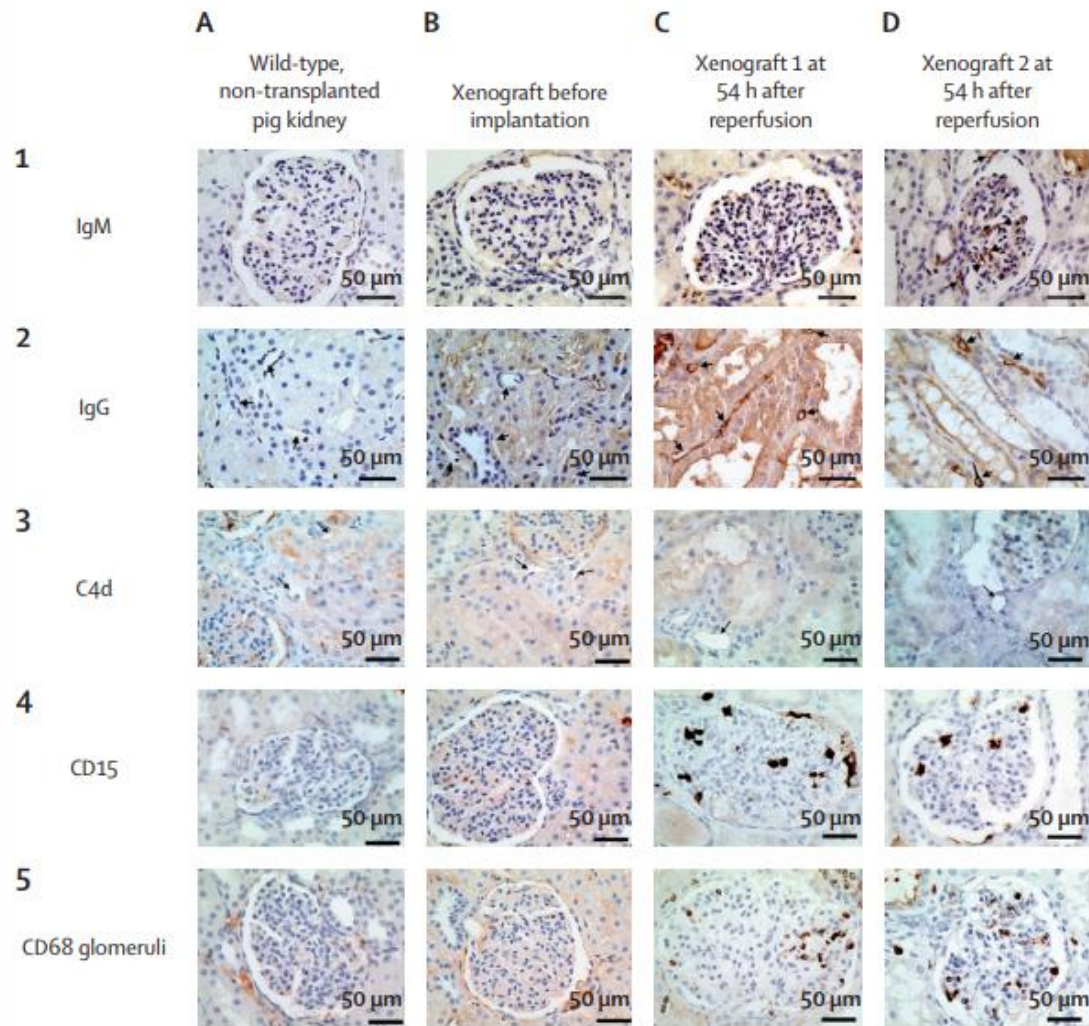
- thrombotik mikroangiopati, TMA
- Diffuse glomeruler kapiller konjesyon KONJESYON
- Endotel hücre şişmesi
- . (FİBRİN TROMBUS) Tam obliterasyona yakın

post-operative 3. gün

- İlerleyici tubular hasar ve tubuler nekroz (ATN)
- TMA görünümünde ek bulgular
- C4d ve IgM, IgG, IgA, C1q, and C3 negatif .
- Kortikal nekroz ve interstisyel hemoraji yok
- glomeruler kapiller konjesyon da azalma .
- Post terminasyon sonrası böbrek dokusu incelemesinde insan transgenlerinde artış

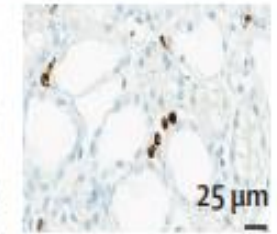
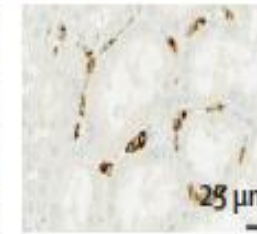
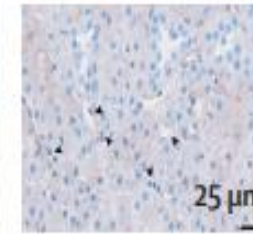
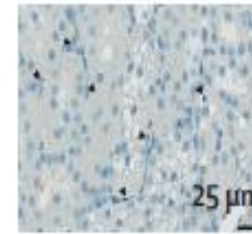
Immun response – Loupy &
Montgomery NEJM

B Immune and endothelial activation



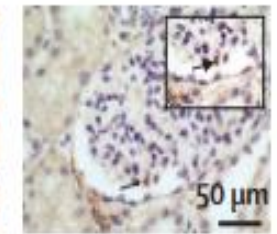
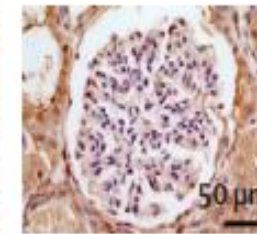
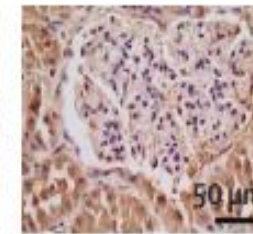
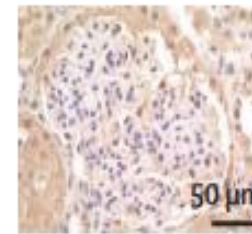
6

CD68 peritubular
capillaries



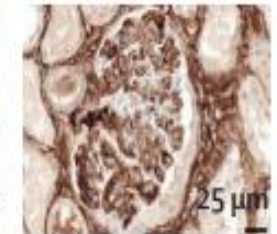
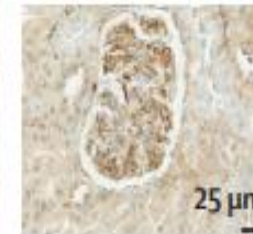
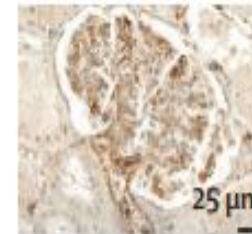
7

NKp46



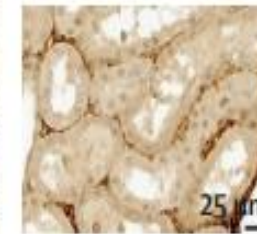
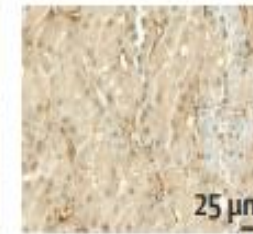
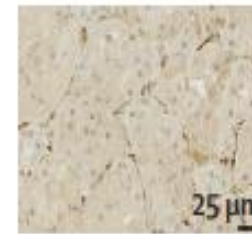
8

vWF glomeruli



9

vWF peritubular
capillaries



Histological and immunological changes occurring in xenografts after transplantation

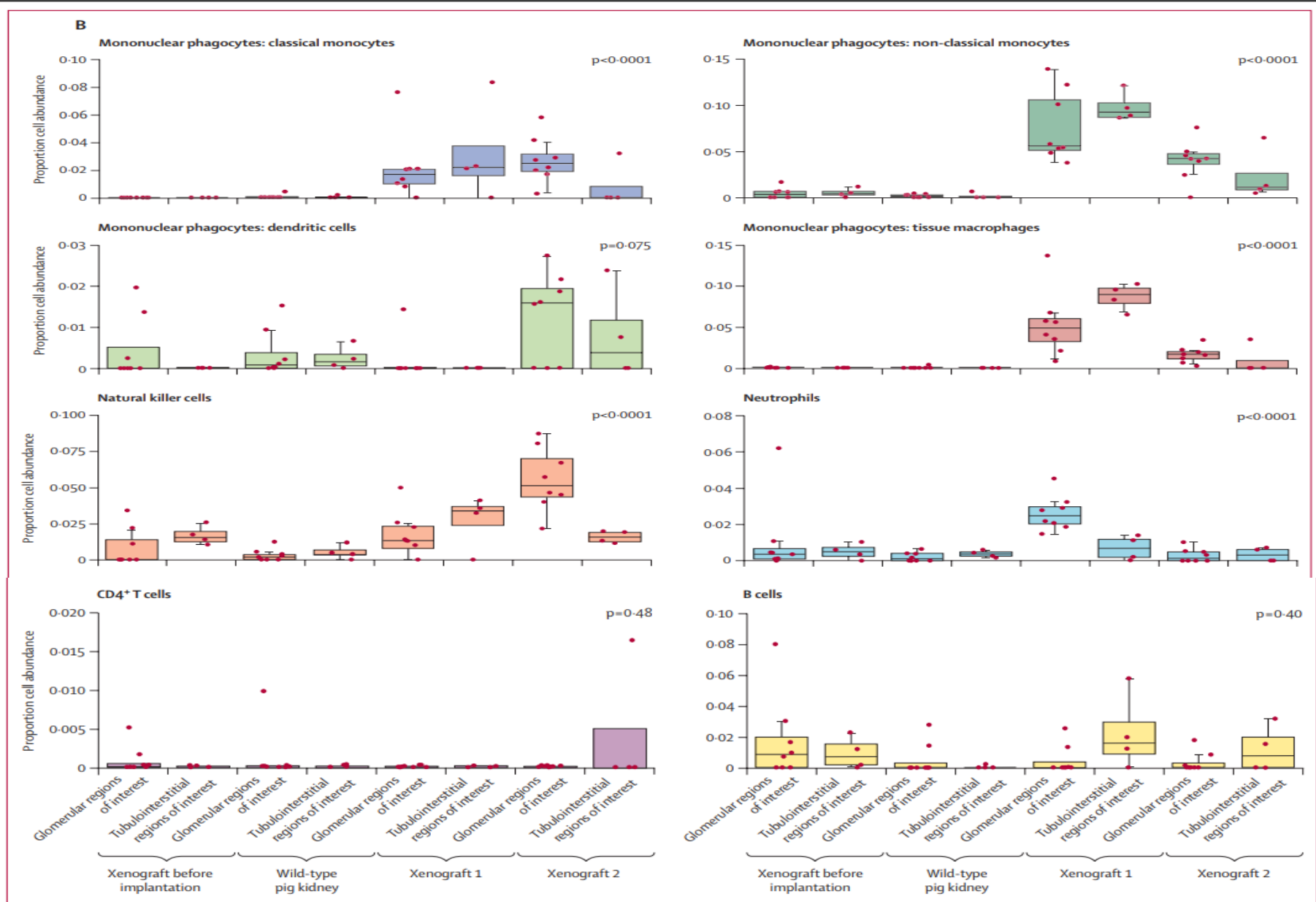


Figure 5: Cell-type spatial profiling of genetically modified pig kidney xenografts

Xenograft Transplantasyon sonrası moleküler profil

Humoral yanıtla ilgili gen
ekspresyonunda artışlar

(HLA-B),

IFN γ yanıtı (IFI30, B2M, and C1QC),
monocyte and macrophage activation
(CD74),

complement aktivasyonu (C1QB),

endothel aktivasyon (POSTN ve
LDB2),

natural killer cell burden (FCGR3A and
HLA-E),

innate immune sistem (CST3, PTPRB ve
TXNIP),

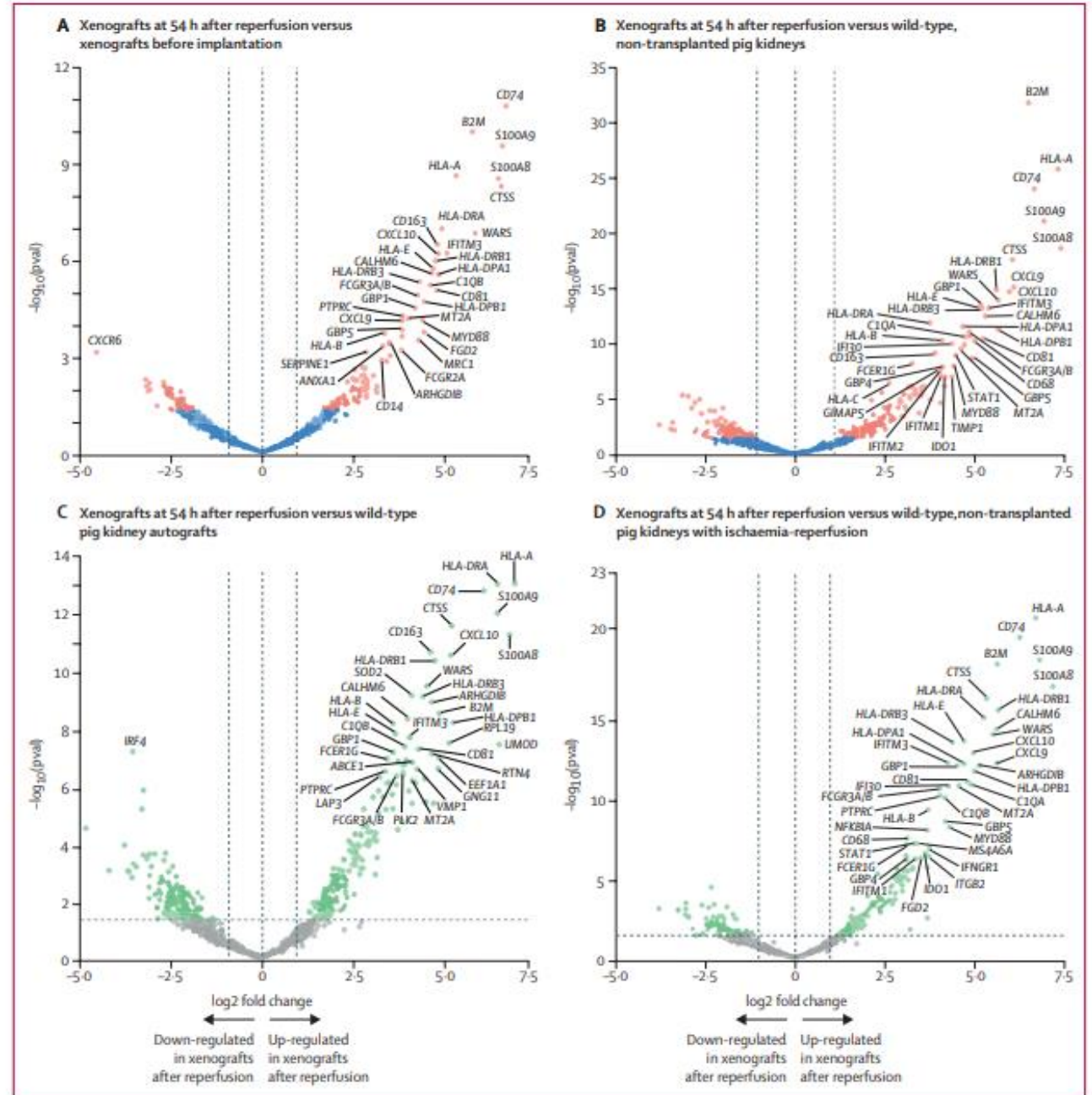


Figure 3: Molecular profiling of xenografts after transplantation

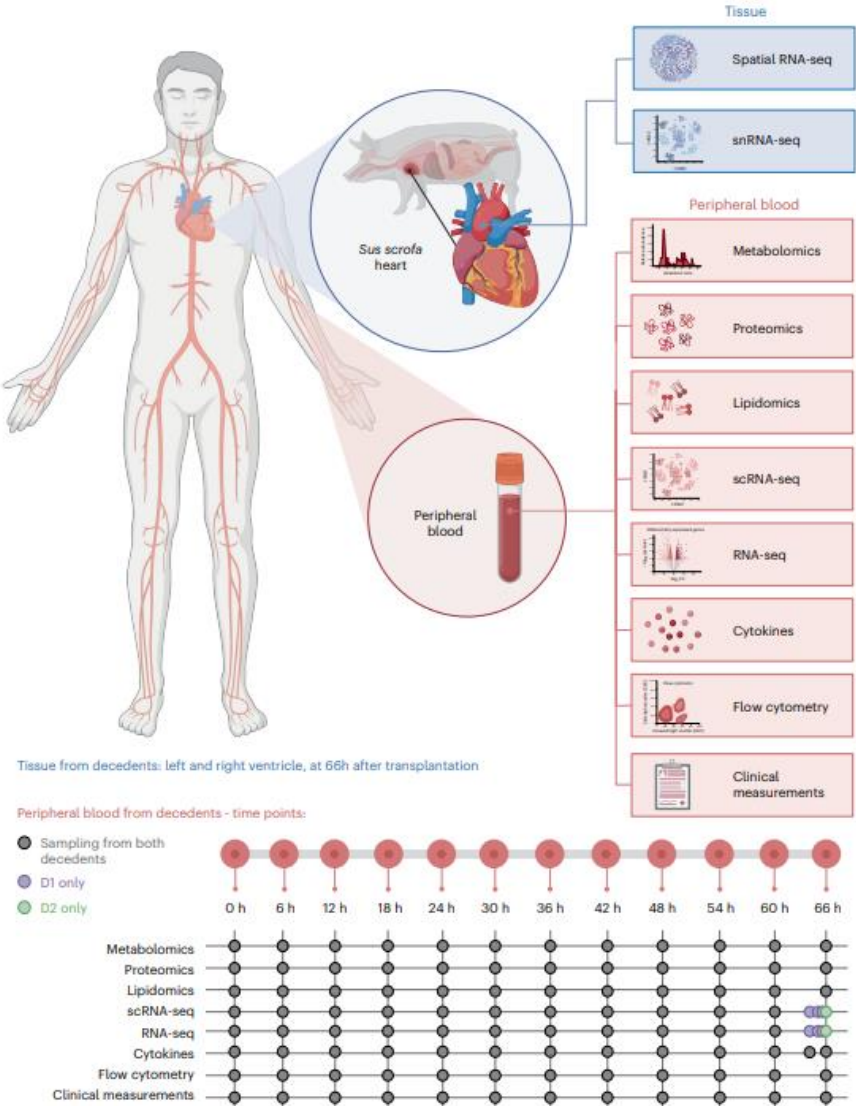
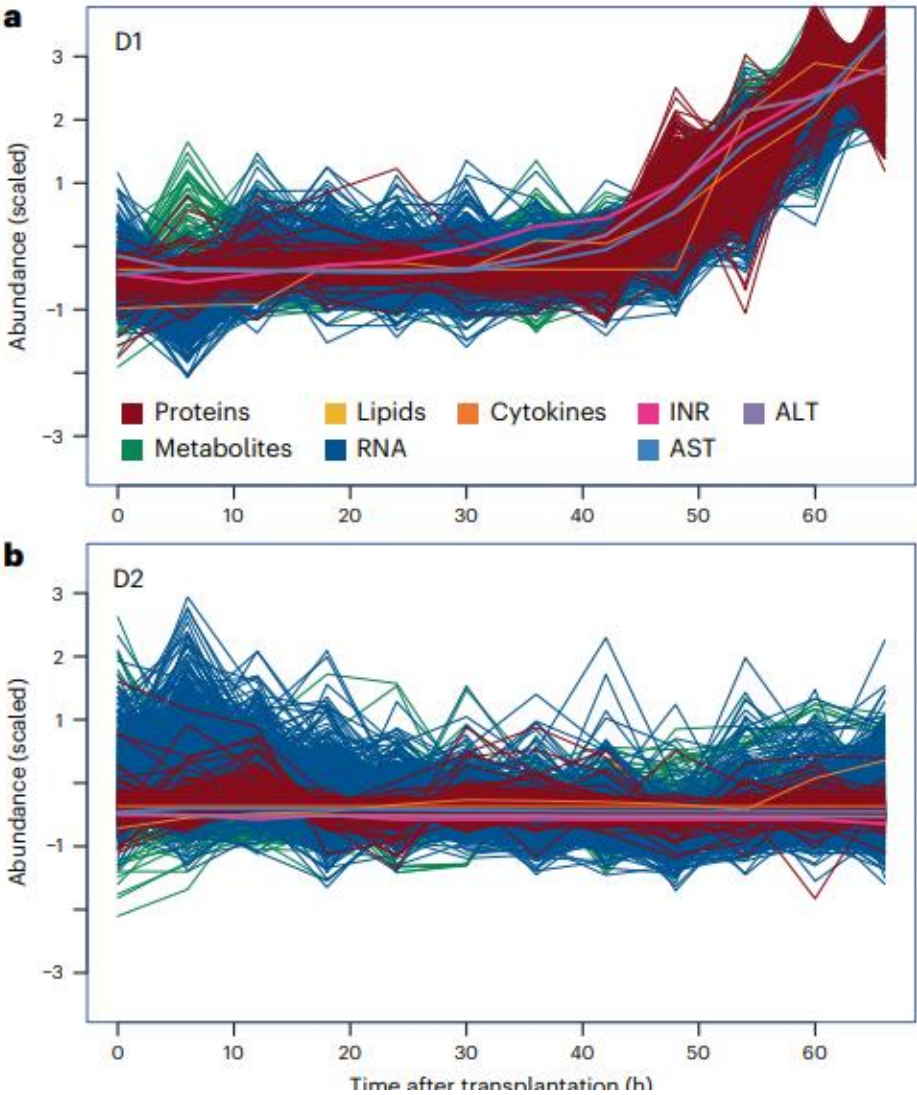


Fig. 1 | Study design and sampling timeline. For both decedents, left and right ventricle tissue samples were obtained 66 h after transplantation for snRNA-seq and spatial transcriptomic analyses. Peripheral blood samples were collected at 6-h intervals for comprehensive analyses, including metabolomic, proteomic, lipidomic, and genomic analyses. Routine clinical measurements including INR, ALT and AST, in addition to arterial blood gas measurements, were performed at 0, 6, 12, 18, 24, 30, 36, 42, 48, 54, 60, and 66 h after transplantation. The timing at which each assay from blood was carried out is indicated with a gray dot for sampling from both decedents and purple or green dots for sampling from only D1 or D2, respectively.



Date	Tx Site	Length (Days)	Organ	Company/(Gene Edits)	PubMed ID/Note
Decedent Studies					
Sept 25th 2021	NYU, USA	3	Kidney	UT, (1, α -Gal)	35584156
Sept 30th 2021	U-Alabama, USA	3	Kidney	UT, (10)	35049121
Nov 2021	NYU, USA	3	Kidney	UT, (1, α -Gal)	35584156
Jan 2022	U-Alabama, USA	3	Kidney	UT, (10)	
Nov 2022	Hainan, MU, China	12	Kidney	Clonorgan (4)	39317190
Spring 2023	U-Alabama, USA	7	Kidney	UT, (10)	37585176
June 2023	Hainan, MU, China	6	Kidney	Clonorgan (5)	39317190
July 2023	NYU, USA	61	Kidney	UT, (1, α -Gal)	pending
Mar 2024	Xijing Hospital, China	9	Kidney	Qihan Biotech (3)	pending
June 2022	NYU, USA	3	Heart	UT, (10)	37488288
July 2022	NYU, USA	3	Heart	UT, (10)	37488288
Dec 2023	U.Penn, USA	3	Liver	eGenesis (69)	pending ex vivo pig liver support
Mar 2024	Xijing Hospital, Chin	10	Liver	Clonorgan (6)	38514875
April 2024	U.Penn, USA	4	Liver	eGenesis (69)	pending ex vivo pig liver support
May 2024	U.Penn, USA	4	Liver	eGenesis (69)	pending ex vivo pig liver support
Spring 2025	U.Penn, USA	5	Liver	eGenesis (69)	pending ex vivo pig liver support

Living Humans					
Jan 2022	U.Maryland	60	Heart	UT, (10)	37393920 Cause of death still not unclear
Sept 2023	U.Maryland	40	Heart	UT, (10)	39779924 Patient died with suspected AbMR
Mar 16th 2024	MGH, USA	65 **	Kidney	eGenesis (69)	39927618 Xenograft was functioning at time of death
April 12th 2024	NYU, USA	47**	Kidney	UT, 1 (α -Gal)	pending Xenograft removed (LVAD complications)
Nov 25th 2024	NYU, USA	130**	Kidney	UT, (10)	pending Xenograft lasted 130 days. Pt back on dialysis
Jan 25th 2025	MGH, USA	110+	Kidney	eGenesis (69)	pending ** As of 5/15/205
Mar 6th 2025	Xijing Hospital, China	30+	Kidney	Qihan Biotech/eGenesis	pending ** As of last media report 4/25/2025
May 17th 2024	Anhui Univ, China	>10**	Liver	Yunnan Univ (10)	pending Patient is reported to have died ater 100 days

The NEW ENGLAND JOURNAL of MEDICINE

BRIEF REPORT

Genetically Modified Porcine-to-Human Cardiac Xenotransplantation

Bartley P. Griffith, M.D., Corbin E. Goerlich, M.D., Ph.D.,
Avneesh K. Singh, Ph.D., Martine Rothblatt, Ph.D., Christine L. Lau, M.D.,
Aakash Shah, M.D., Marc Lorber, M.D., Alison Grazioli, M.D.,
Kapil K. Saharia, M.D., Susie N. Hong, M.D., Susan M. Joseph, M.D.,
David Ayares, Ph.D., and Muhammad M. Mohiuddin, M.D.

SUMMARY

A 57-year-old man with nonischemic cardiomyopathy who was dependent on venoarterial extracorporeal membrane oxygenation (ECMO) and was not a candidate for standard therapeutics, including a traditional allograft, received a heart from a genetically modified pig source animal that had 10 individual gene edits. Immunosuppression was based on CD40 blockade. The patient was weaned from ECMO, and the xenograft functioned normally without apparent rejection. Sudden diastolic thickening and failure of the xenograft occurred on day 49 after transplantation, and life support was withdrawn on day 60. On autopsy, the xenograft was found to be edematous, having nearly doubled in weight. Histologic examination revealed scattered myocyte necrosis, interstitial edema, and red-cell extravasation, without evidence of microvascular thrombosis — findings that were not consistent with typical rejection. Studies are under way to identify the mechanisms responsible for these changes. (Funded by the University of Maryland Medical Center and School of Medicine.)

David Bennett world first human receives a Pig Heart Transplant

Sumit Arora Published On January 13th, 2022



"It was either die or do this transplant. I want to live. I know it's a shot in the dark, but it's my last choice," said Mr. Bennett, the patient, a day before the surgery was conducted.

FDA ilk defa acil kullanım onayı verdi

2. GenetiĐi DeĐiřtirilmiř Domuzdan İnsana kalp nakli : 6 hafta sonra ex



By [Deborah Balthazar](#) Oct. 31, 2023

[Reprints](#)



16 Mart 2024

In a First, Genetically Edited Pig Kidney Is Transplanted Into Human

Procedure marks milestone in quest to provide more organs to patients in need

By MASS GENERAL BRIGHAM COMMUNICATIONS | March 21, 2024 | [Research, Care Delivery](#)
7 min read



The modified kidney was provided by **eGenesis**, a xenotransplantation therapy company [co-founded by HMS geneticist George Church](#) and former HMS postdoctoral fellow Luhan Yang. Over the past five years, Mass General and eGenesis have conducted extensive research, with findings [published in *Nature* in Oct. 2023](#).

RS 62Y, Male

DM

HT ASKH

African American

Vascular Access problem

2. Nakil (ilk nakil 5 yıl)

69 gen edit

Tegoprubart Eledon Pharm

- Anti CD40L

Ravulizumab Alexion

3 knockout
7 genetik ekleme
Toplam 69 gen edit

MEDTECH

Patient discharged with eGenesis' genetically engineered pig kidney after successful xenotransplant procedure

By **Conor Hale** · Apr 4, 2024 12:27pm

eGenesis

xenotransplantation

CRISPR

Massachusetts General Hospital



4.4.2024

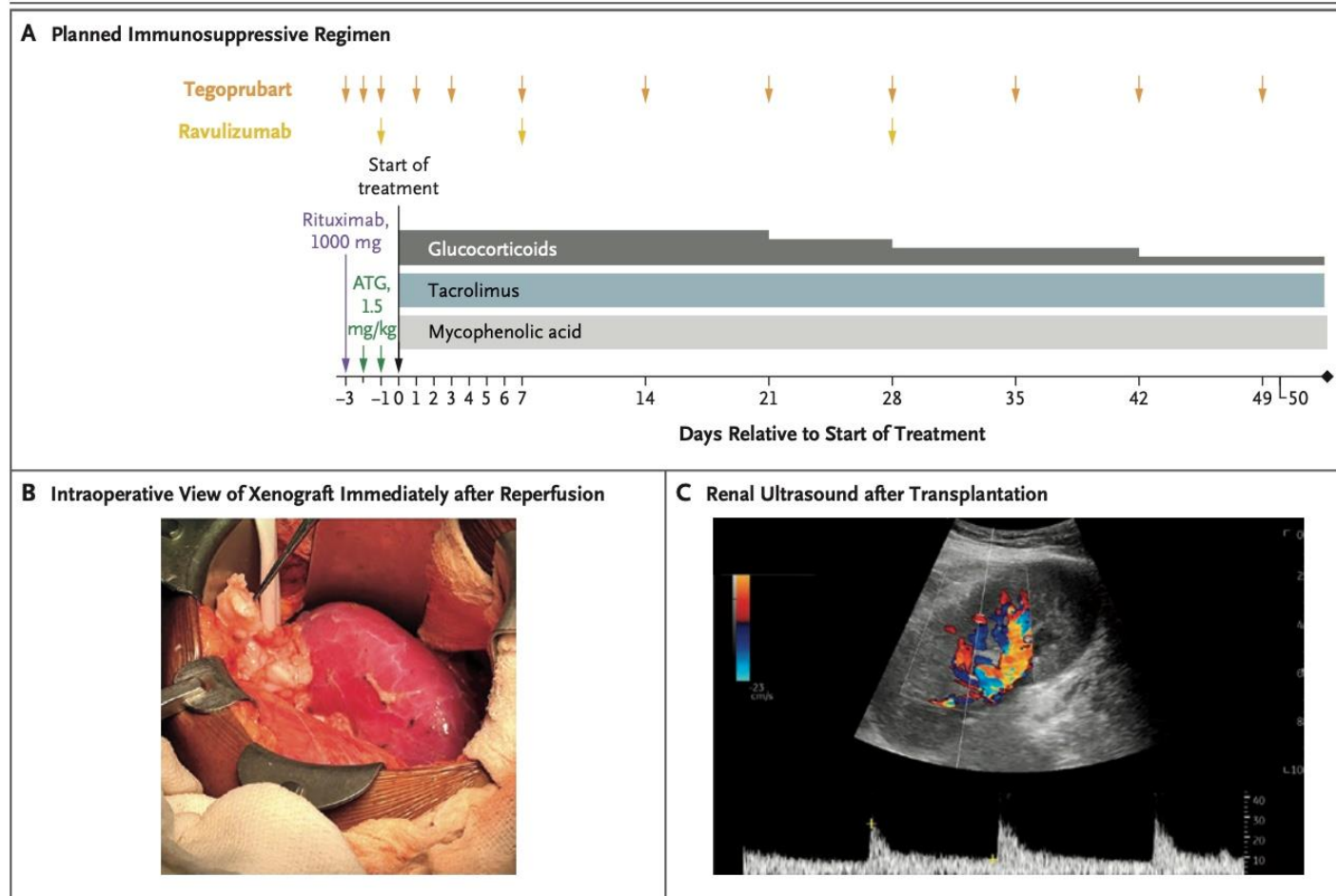
World's first pig kidney transplant recipient discharged from hospital



İmmünespresyon

- ATG
- RTX
- Anti-CD 154 monoklonal Ab (Tegoprubart)
- Anti C5 Ab (Ravulizumab)
- Tac-MMF-PRednizolon

8. G n TCM Rejeksiyon 2A
Tocilizumab
ATG-Steroid



BRIEF REPORT

Xenotransplantation of a Porcine Kidney for End-Stage Kidney Disease

Tatsuo Kawai, M.D., Ph.D.,^{1,4} Winfred W. Williams, M.D.,^{1,4} Nahel Elias, M.D.,^{1,4}
 Jay A. Fishman, M.D.,^{1,4} Kerry Crisalli, R.N.,^{1,4} Alban Longchamp, M.D.,^{1,4}
 Ivy A. Rosales, M.D.,^{2,4} Michael Duggan, D.M.D.,^{3,4} Shoko Kimura, M.D., Ph.D.,^{1,4}
 Leela Morena, M.D.,^{1,4} Thiago J. Borges, Ph.D.,^{1,4}
 Toshihide Tomosugi, M.D., Ph.D.,^{1,4} Ahmad Karadagi, M.D., Ph.D.,^{1,4}
 Tsukasa Nakamura, M.D., Ph.D.,^{1,4} Kassem Safa, M.D.,^{1,4}
 Alessia Giarraputo, Ph.D.,^{2,4} Claire T. Avillach, M.D.,^{2,4} Eva D. Patalas, M.D.,^{2,4}
 R. Neal Smith, M.D., Ph.D.,^{2,4} David H. Sachs, M.D.,^{1,4}
 A. Benedict Cosimi, M.D.,^{1,4} Joren C. Madsen, M.D., D.Phil.,^{1,4}
 David K.C. Cooper, M.D.,^{1,4} Richard Pierson, M.D.,^{1,4} Steve Perrin, Ph.D.,⁵
 Ranjith P. Anand, Ph.D.,⁶ Sagar Chhangawala, Ph.D.,⁶ Matthew Coscarella, M.S.,⁶
 Alexandre Daigneault, B.S.,⁶ Feng Li, Ph.D.,⁶ Owen Pearce, B.S.,⁶
 Wenning Qin, Ph.D.,⁶ William T. Serkin, B.S.,⁶ Vincent Yeung, Ph.D.,⁶
 Kristen Getchell, M.A.,⁶ Susan C. Low, Ph.D.,⁶ Michael Curtis, Ph.D.,⁶
 Robert B. Colvin, M.D.,^{2,4} and Leonardo V. Riella, M.D., Ph.D.^{1,4}

**52 gün sonra ani
Kardiak nedenli Ex**

SUMMARY

Xenotransplantation offers a potential solution to the organ shortage crisis. A 62-year-old hemodialysis-dependent man with long-standing diabetes, advanced vasculopathy, and marked dialysis-access challenges received a gene-edited porcine kidney with 69 genomic edits, including deletion of three glycan antigens, inactivation of porcine endogenous retroviruses, and insertion of seven human transgenes. The xenograft functioned immediately. The patient's creatinine levels decreased promptly and progressively, and dialysis was no longer needed. After a T-cell-mediated rejection episode on day 8, intensified immunosuppression reversed rejection. Despite sustained kidney function, the patient died from unexpected, sudden cardiac causes on day 52; autopsy revealed severe coronary artery disease and ventricular scarring without evident xenograft rejection. (Funded by Massachusetts General Hospital and eGenesis.)

Author affiliations are listed at the end of the article. Dr. Kawai can be contacted at tkawai@mgh.harvard.edu or at the Department of Surgery, Massachusetts General Hospital, 55 Fruit St., Boston, MA 02114. Dr. Riella can be contacted at riella@mgh.harvard.edu at the Department of Medicine, Massachusetts General Hospital, 165 Cambridge St., 3rd Fl., Boston, MA 02114.

This article was published on February 7, 2025, at NEJM.org.

DOI: 10.1056/NEJMoa2412747

Copyright © 2025 Massachusetts Medical Society.

eGENESIS Kidney

She donated a kidney years ago. Last month, she received a kidney transplanted from a gene-edited pig



By Jen Christensen, CNN

7 minute read · Updated 3:35 PM EST, Tue December 17, 2024



T. Looney, 54Y,
1999'da annesine böbrek vermiş
Gebelikte Preeklampsi ve KBH gelişmiş
2016'da Diyalize başlanmış



90 günü geçen ve Genetiği değiştirilmiş Domuz böbreği ile
yaşayan ilk insan
UKIDNEY



30 Ocak 2025- 7 Şubat 2025

Genetiği değiştirilmiş domuz üretimi

Bioteknoloji Firmaları

Revivacor (UT) (NYU)
eGenesis (Mass Gen.)
+ 4 company

edit	10 mutasyon genetikUKidney		10 mut.+59 gen
	1 mutasyon + Uthmyokidney		yok
	125/yıl domuz üretebilecek kapasite	?	
alıcı (taburcu	2 kalp ve 1 böbrek/canlı alıcı		1 böbrek/canlı
	ancak		
greft fonksiyonel	- Kalp alıcıları 45 ve 60 günde ex		52. günde ex
+180	4 böbrek/kadavra alıcı (2 ay fonksiyon)		T. Andrews, Halen hayatta
	Pisano, U thymokidney, 1.5 ay greft, 2.5 ay survi		
	T. Looney, Ukidney, Canlı alıcı halen hayatta +120		

FDA

- United Therapeutics
- *eGENESIS* ?
 - 2025 için UT firmasına
 - Tahmini 50 hasta alımı planlanması için onay verdi

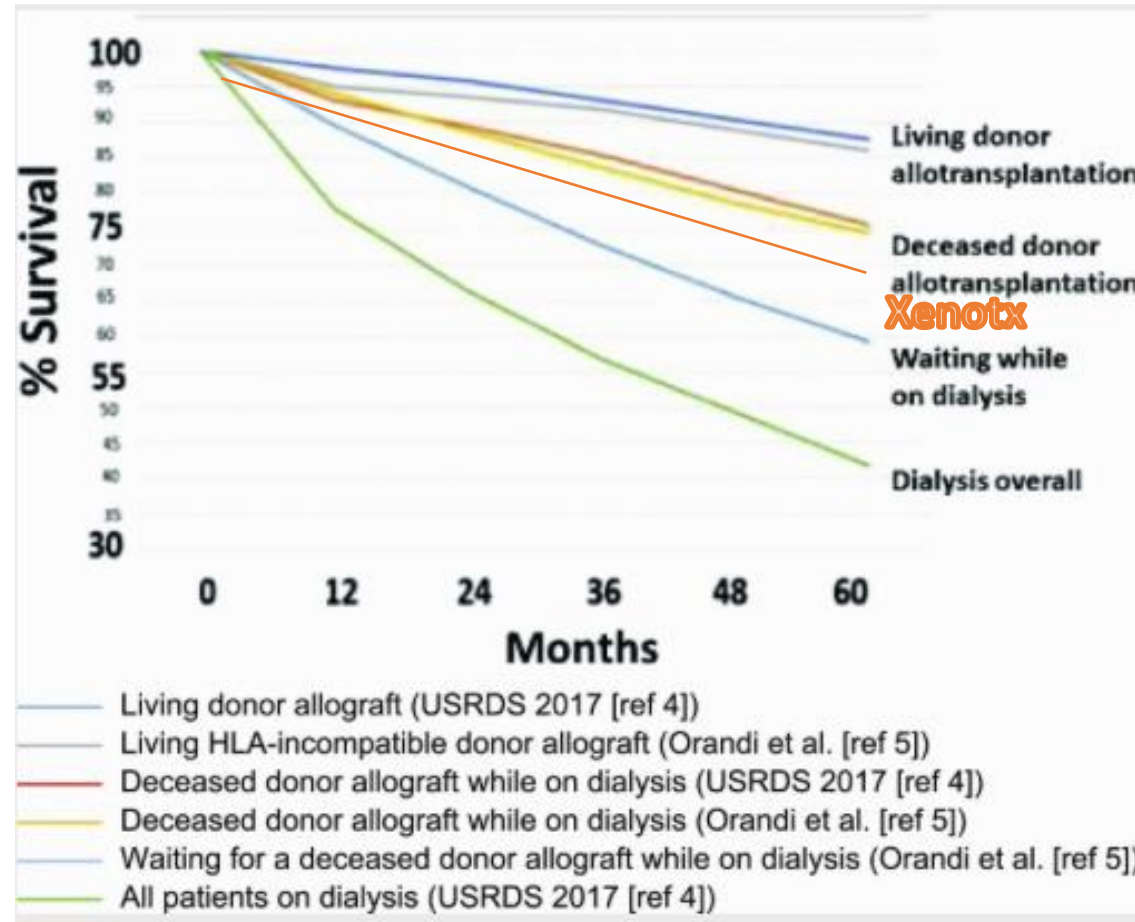
**UNITED THERAPEUTICS CORPORATION ANNOUNCES
FDA CLEARANCE OF ITS INVESTIGATIONAL NEW DRUG
APPLICATION FOR THE UKIDNEY
XENOTRANSPLANTATION CLINICAL TRIAL**

Xenotransplantasyon Klinik Çalışma

- Domuzdan baboon a başarılı nakil
- Domuzdan beyin ölümü olan insana başarılı nakil
- Domuzdan yaşam beklentisi düşük insana nakil
- FDA: 2 yıldan düşük yaşam beklentisi olan hastalar alınmalı
- 6 hasta 1 yıl takip ile başlayabilir
- İlk hasta 3 ay sorun yok
 - Diğer hastalar alınır
- Alıcı adayları
 - Kronik diyaliz tedavisi uygulanmaya başlanmış olmalı
 - Vasküler giriş yolu sorunu olanlardan
 - Yüksek PRA hasta ?
 - Tek değil 2 böbrek nakil edilebilir ?
 - Massachusetts GH
 - NYU- Langone
 - Johns Hopkins

Böbrek Nakli

- Xenotransplantasyon sonuçları : beklenti



The future of xenotransplantation is brighter than at any previous time because what must be done to succeed has become remarkably clear.

Thomas Starzl -2007



‘Amazing feat’: US man still alive six months after pig kidney transplant

The first six months after an organ transplant are the riskiest for recipients.

By [Rachel Fieldhouse](#)



