Cigarette smoke-induced perturbations of molecular pathways in human organotypic cultures of buccal and gingival mucosa

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INTRODUCTION

Cigarette smoking is associated with cancer and inflammatory diseases of the oral cavity (1). Indeed, smoker's oral mucosa is subject to cigarette smoke (CS)-induced cytological, genomic, and transcriptional changes that could potentially lead to the development of mouth disease. Human organotypic tissue cultures resemble the clinical situation more closely than primary monolayer cultures. To mimic repeated exposure to mainstream CS exposure in smokers, two human organotypic *in vitro* models of the buccal and gingival epithelia (MatTek[®]) were repeatedly exposed to two doses of whole smoke from a reference cigarette at the air-liquid interface (ALI). The cultures were harvested immediately (0 h) and after 4 h, 24 h, and 48 h from the last exposure and various endpoints were assessed i.e. transepithelial electrical resistance (TEER), lactate dehydrogenase (LDH) release assay, cytochrome P450 (CYP) 1A1/1B1 enzyme activity assay, histology analysis, and Luminex-based measurement of inflammatory markers. In addition, using gene expression profiling and network-based approach we assessed biological impact of CS exposure.

EXPERIMENTAL DESIGN



Figure 1. 3D organotypic tissue culture model. EpiOral (buccal) full-thickness tissues with fibroblasts and Langerhans cells (ORL-300-FT-LC) and EpiGingival full-thickness tissues with fibroblasts (GIN-300-FT-1) were purchased from MatTek[®] (Ashland, MA, USA).



Figure 2. Experimental design. Buccal and gingival tissues in triplicate were directly exposed (in parallel) at the ALI to the diluted CS from 3R4F (reference cigarettes obtained from the University of Kentucky) or to 60% humidified air (air-exposed controls) in the Vitrocell exposure modules within a Climatic chamber (Vitrocell Systems GmbH, Germany) at 37°C (2).

The inserts were exposed to the whole smoke generated from one cigarette under Health Canada smoking regimen and diluted with fresh air to 19.7% (v/v) (low concentration) and 40.7% (v/v) (high concentration) (red block) and then kept for 1h in the incubator between each of the four smoke exposures. These dilutions correspond to nicotine concentrations of 0.28 mg/L and 0.56 mg/L, respectively. After exposure, tissue cultures were either collected for endpoints measurement (0h) or incubated with fresh culture medium for 4 h, 24 h, and 48 h before further analysis. As quality control, the tissue integrity was determined on three inserts per tissue type by measuring TEER.

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