

# In Health and Disease

**11-12 October 2017 - Milano**  
*Index Kick off meeting*

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**EV  
SEARCH**

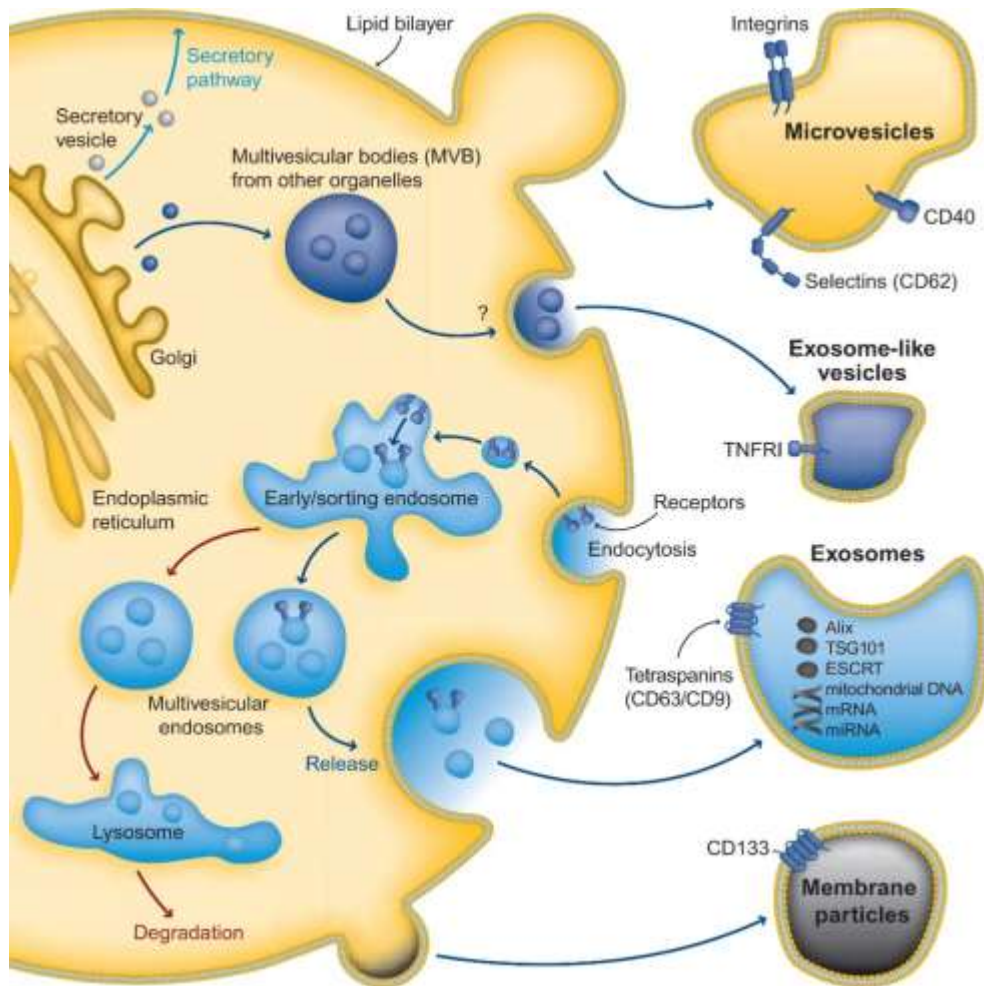
EXTRACELLULAR VESICLE  
RESEARCH CENTER DENMARK



NORTH DENMARK REGION  
AALBORG UNIVERSITY HOSPITAL

[WWW.EVSEARCH.DK](http://WWW.EVSEARCH.DK)

# Extracellular Vesicles



Adapted from Abcam.com

## Microvesicles

Size: 100-1000nm  
Markers: Integrins, selectins, CD40 ligand

## Exosome-like vesicles

Size: 20-50nm  
Markers: TNF RI

## Exosomes

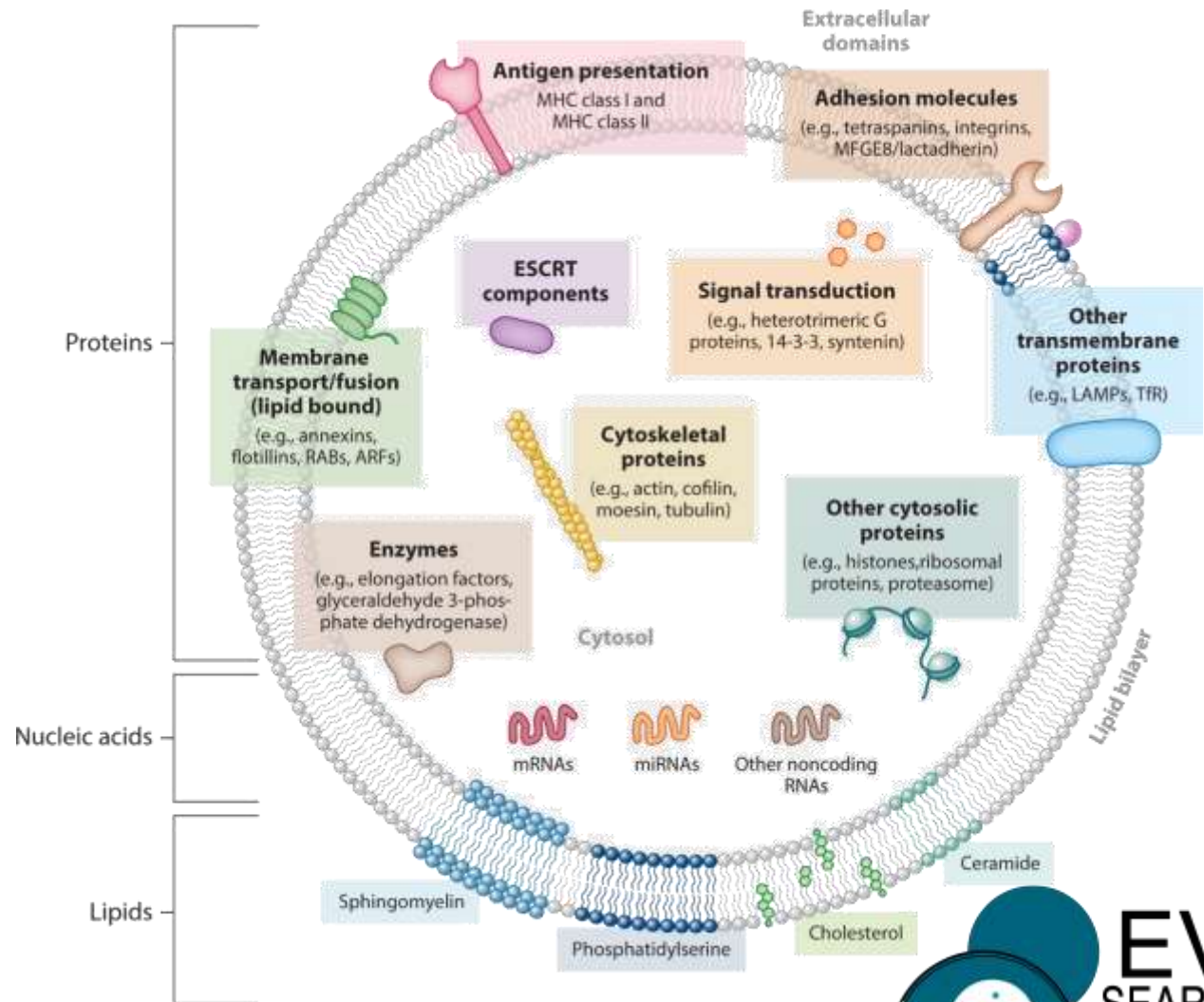
Size: 50-100nm  
Markers: Tetraspanins (CD9,CD63,CD81), Alix, TSG101

## Membrane particles

Size: 50-80nm  
Markers: CD133, no CD63

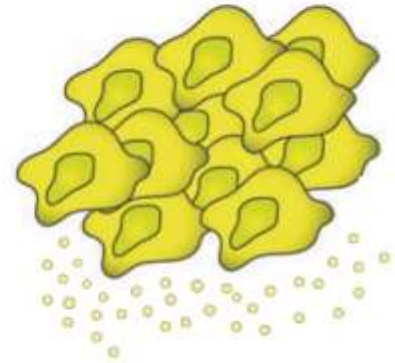
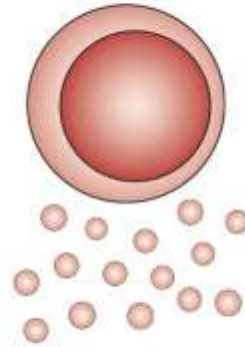
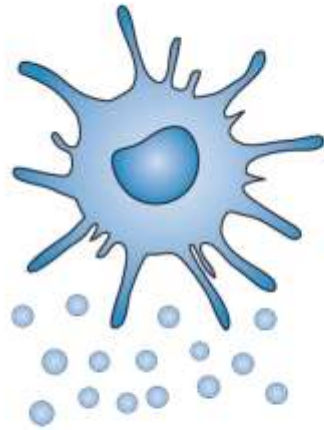


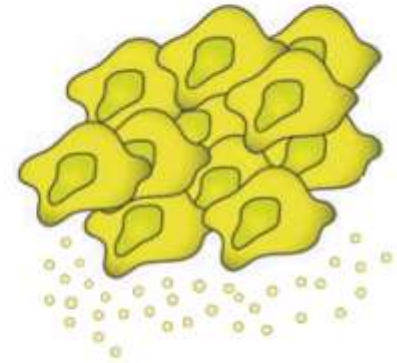
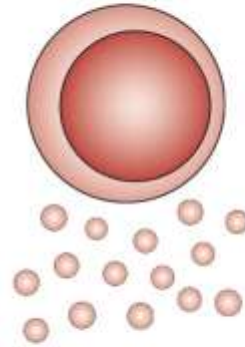
# Overall Composition of Extracellular Vesicles



Adapted from Colombo et al., Ann Rev Cell Dev Biol (2014)







Hypoxia



Activation/stimulation

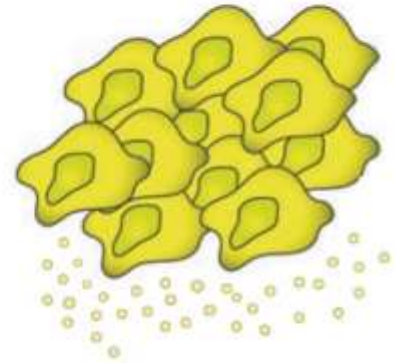
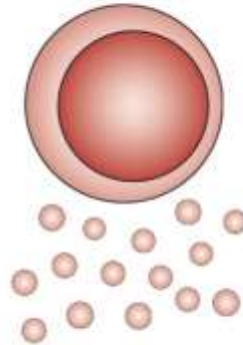
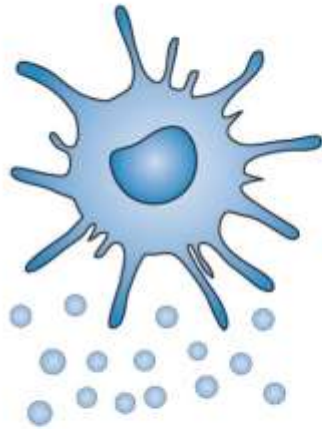


Radiation



Drugs





O<sub>2</sub> ↓

Hypoxia



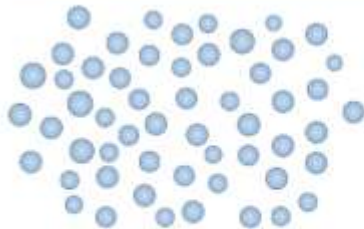
Activation/stimulation



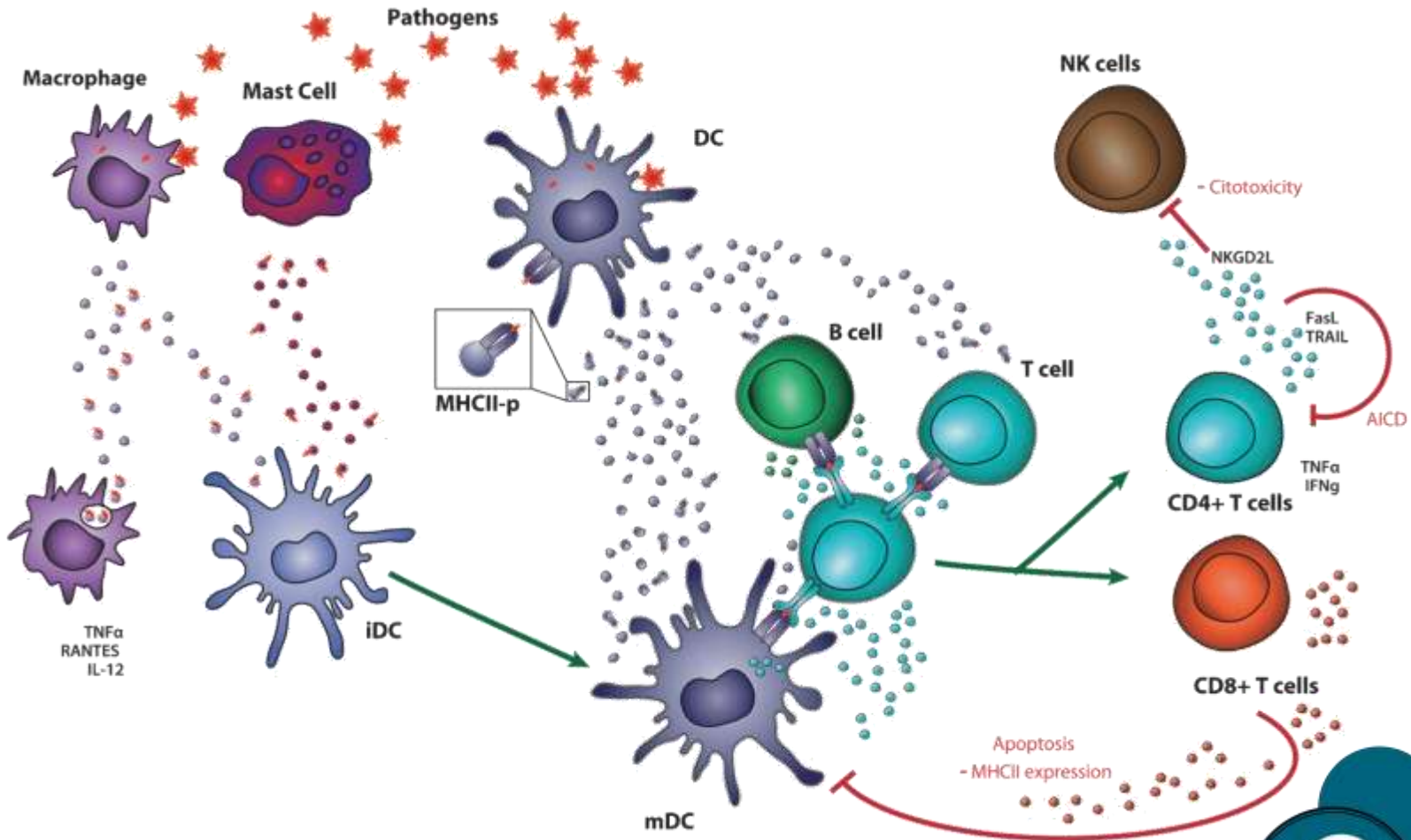
Radiation



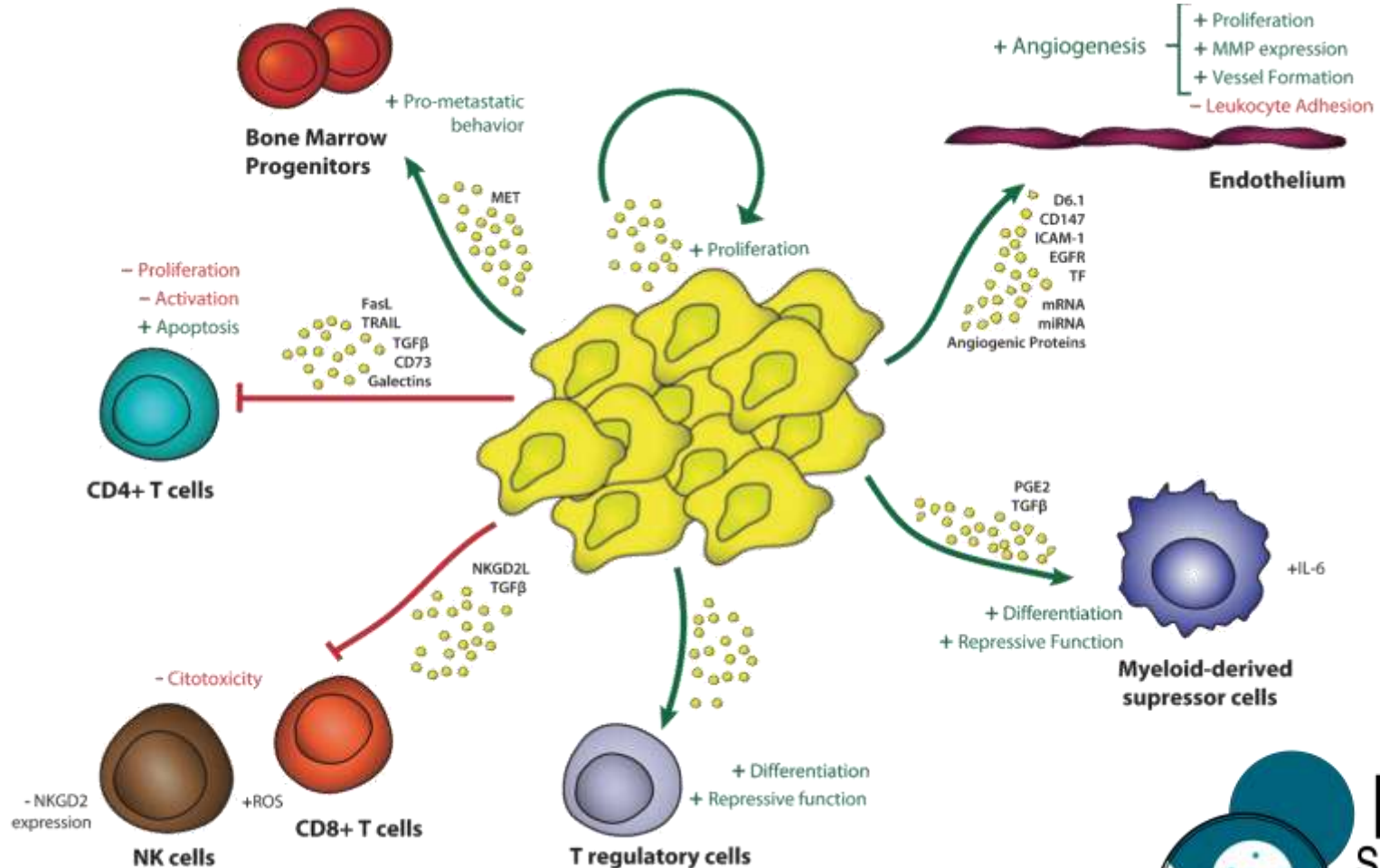
Drugs



# EVs as Immune Regulators

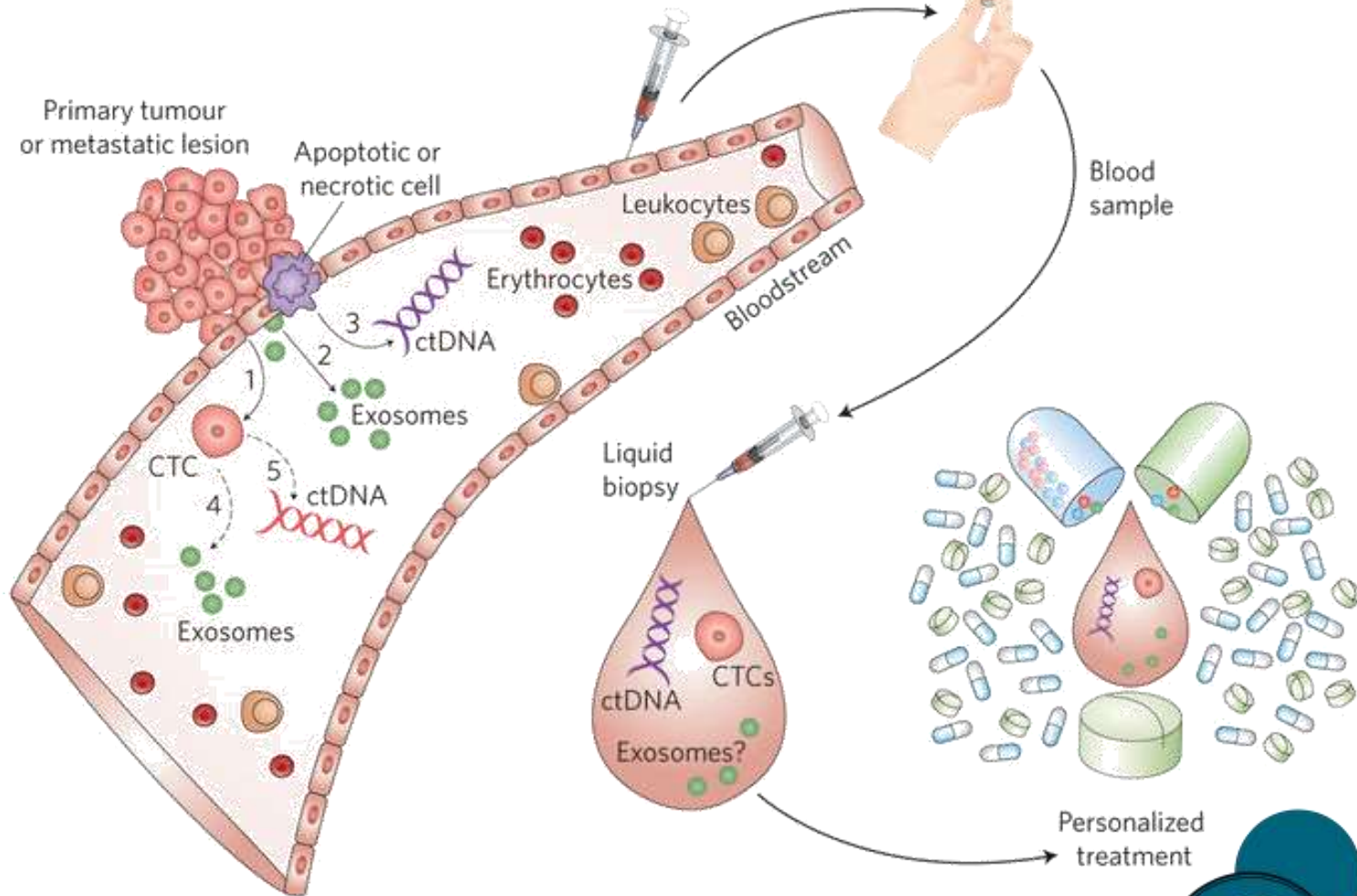


# EVs in Cancer and Immune Respons





# EVs as Liquid Biopsies



Alix-Panabières and Pantel, K. Cancer Discov. (2016)



# Journal of Extracellular Vesicles

ORIGINAL RESEARCH ARTICLE

## Extracellular Vesicle (EV) Array: microarray capturing of exosomes and other extracellular vesicles for multiplexed phenotyping

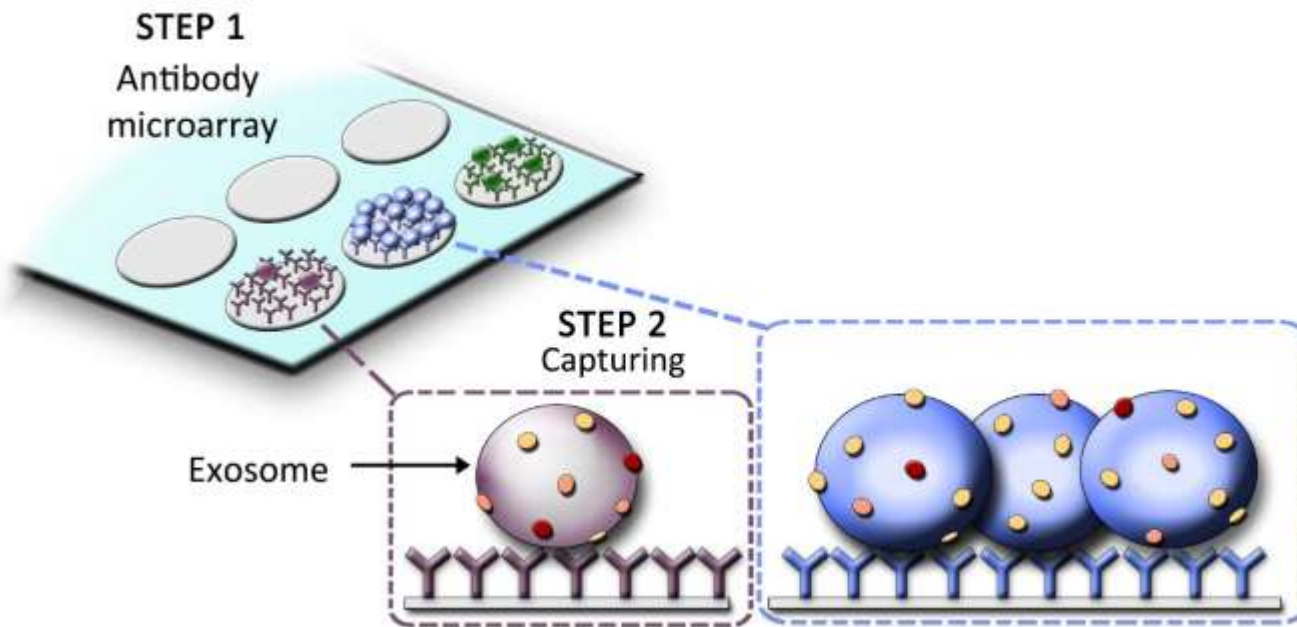
Malene Jørgensen<sup>1\*</sup>, Rikke Bæk<sup>1</sup>, Shona Pedersen<sup>2</sup>,  
Evo K.L. Søndergaard<sup>1</sup>, Søren R. Kristensen<sup>2</sup> and Kim Varming<sup>1</sup>

<sup>1</sup>Department of Clinical Immunology, Aalborg University Hospital, Aalborg, Denmark; <sup>2</sup>Department of Biochemical Chemistry, Aalborg University Hospital, Aalborg, Denmark

Journal of Extracellular Vesicles 2013, **2**



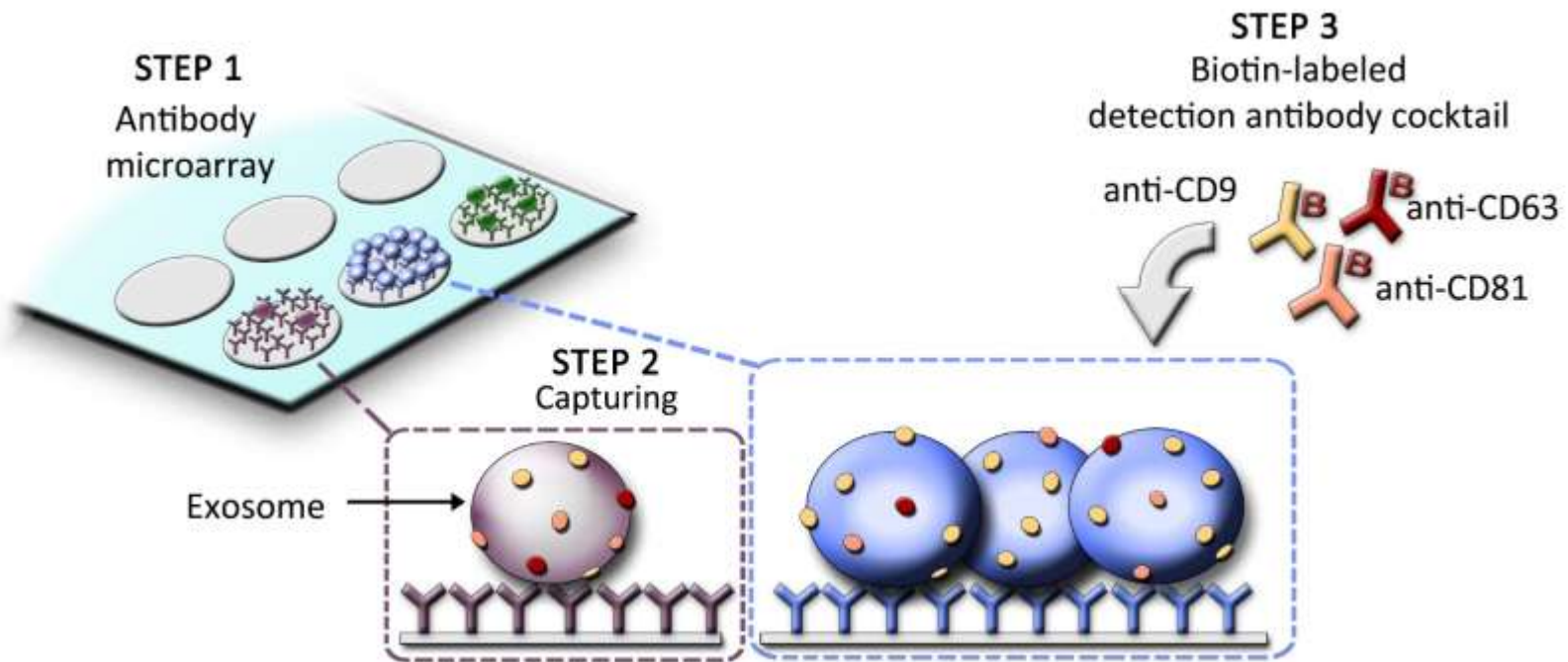
# Principle of the EV Array



Bæk and Jørgensen (2017) Meth. Mol. Biol.; Jørgensen et al., JEV (2013, 2015)



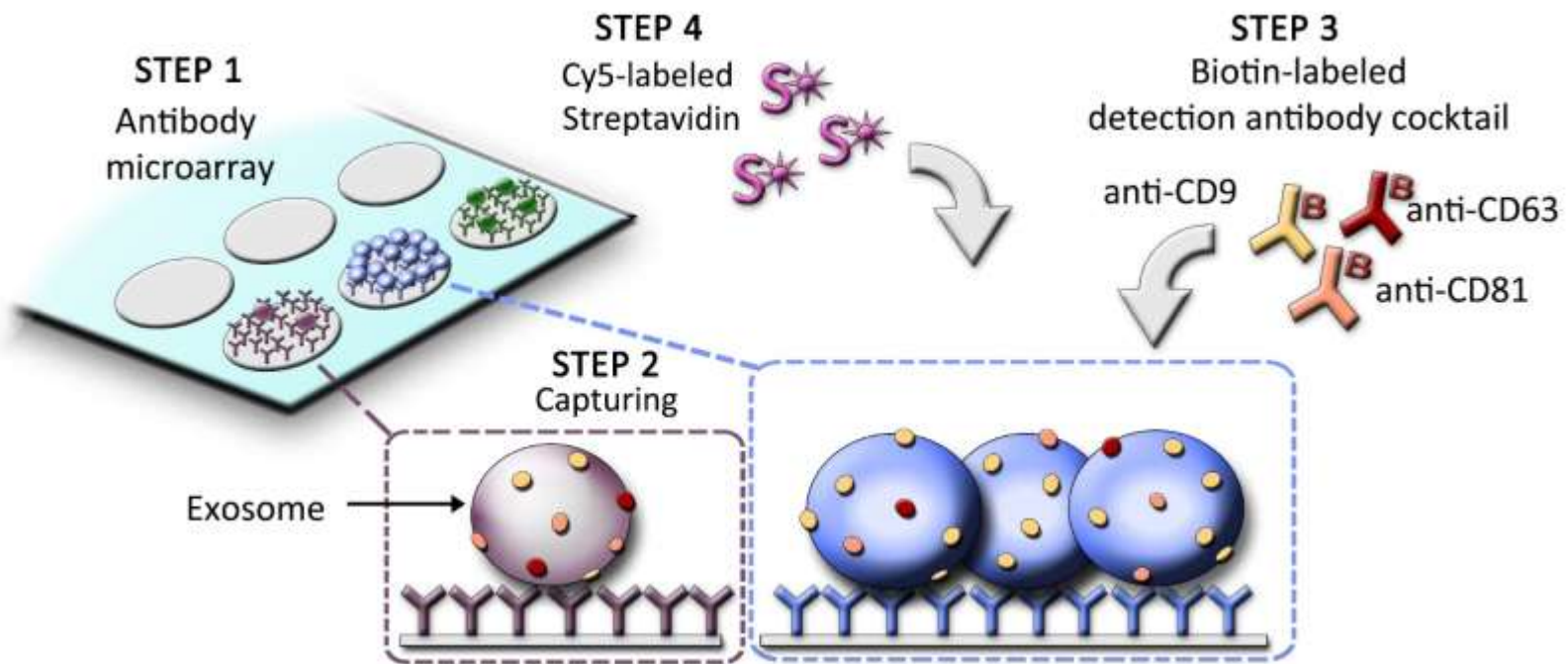
# Principle of the EV Array



Bæk and Jørgensen (2017) Meth. Mol. Biol.; Jørgensen et al., JEV (2013, 2015)



# Principle of the EV Array

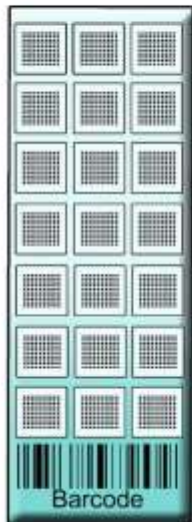


Bæk and Jørgensen (2017) Meth. Mol. Biol.; Jørgensen et al., JEV (2013, 2015)





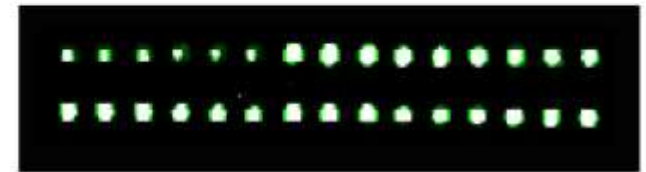
**A** Glass slide printed with antibodies



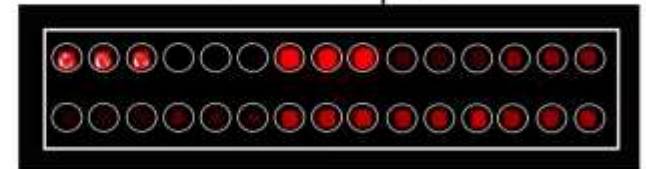
**B** High throughput format



**C** Procedure includes preanalytical quality control

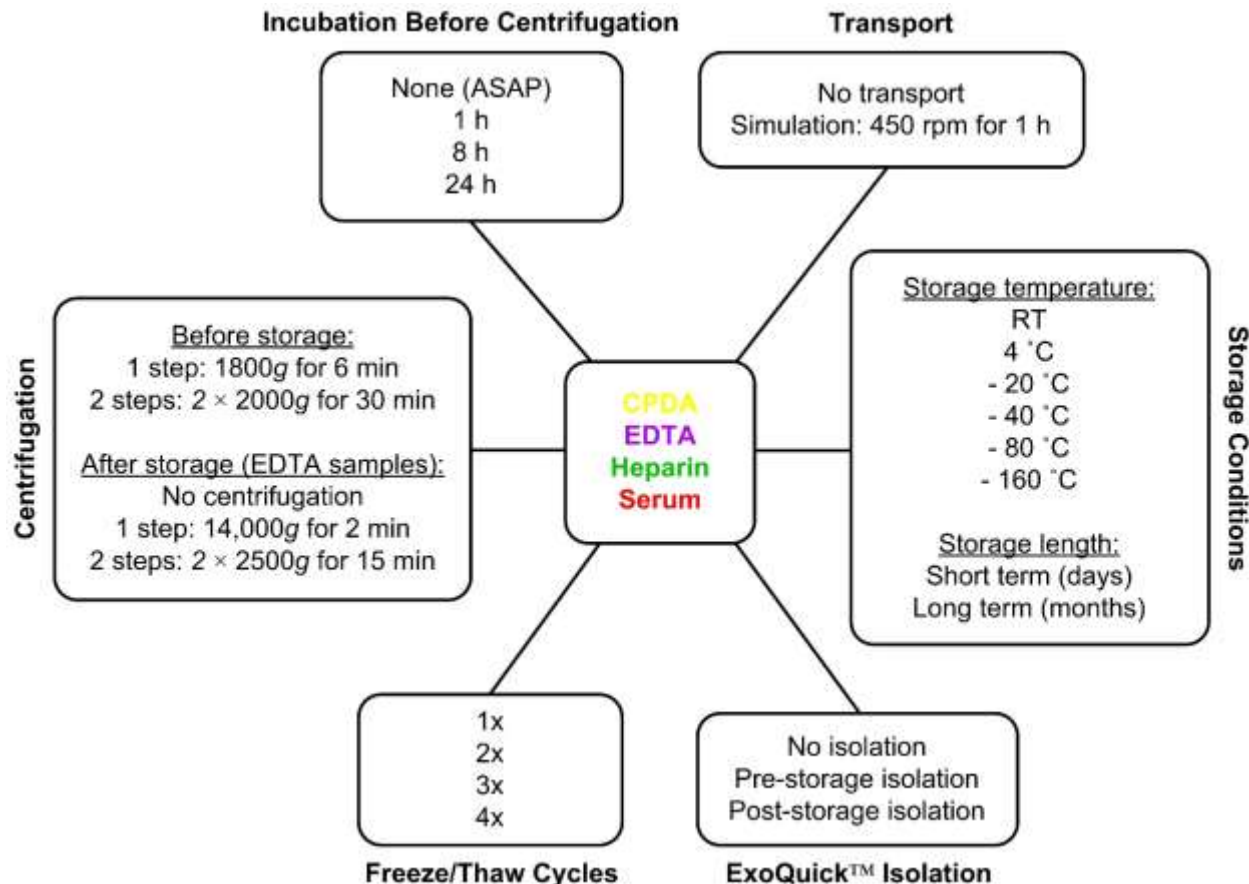


**D** Scanning of fluorescence from EV captures



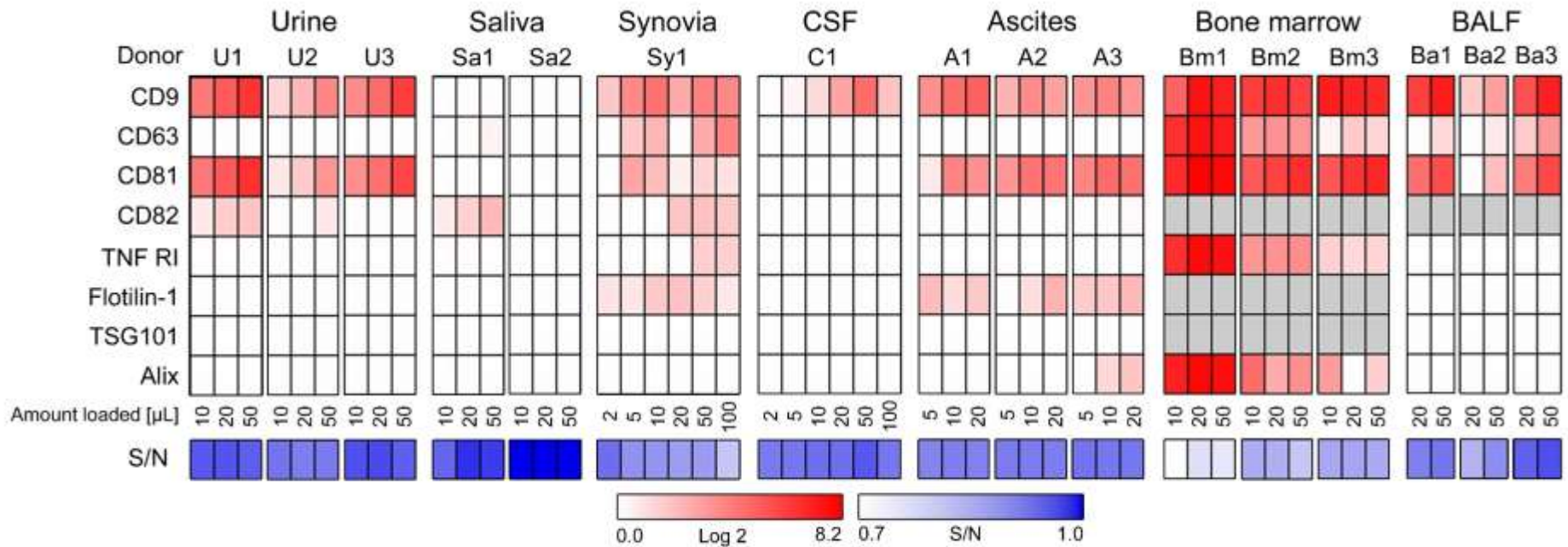
# Clinical Robustness of the EV Array

## The impact of various pre-analytical treatments of plasma



Bæk and Jørgensen, J. Imm. Meth. 2016

# Clinically relevant body fluids

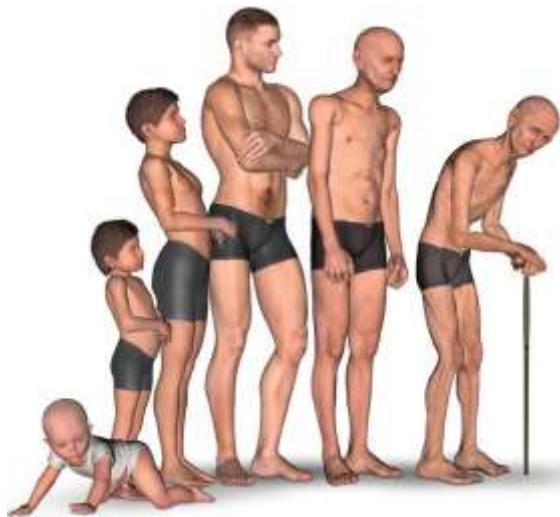


Jørgensen, et al., (2016), EV special issue, Nova Publishers.



# Aims of the studies....

In order to use EVs in a clinical setting, it is of great importance to know whether the characteristics of EVs in a healthy cohort are dependent on demographic parameters such as race, gender, age or smoking status.





# Does smoking, age or gender affect the protein phenotype of extracellular vesicles in plasma?

R. Bæk, K. Varming, M.M. Jørgensen \*



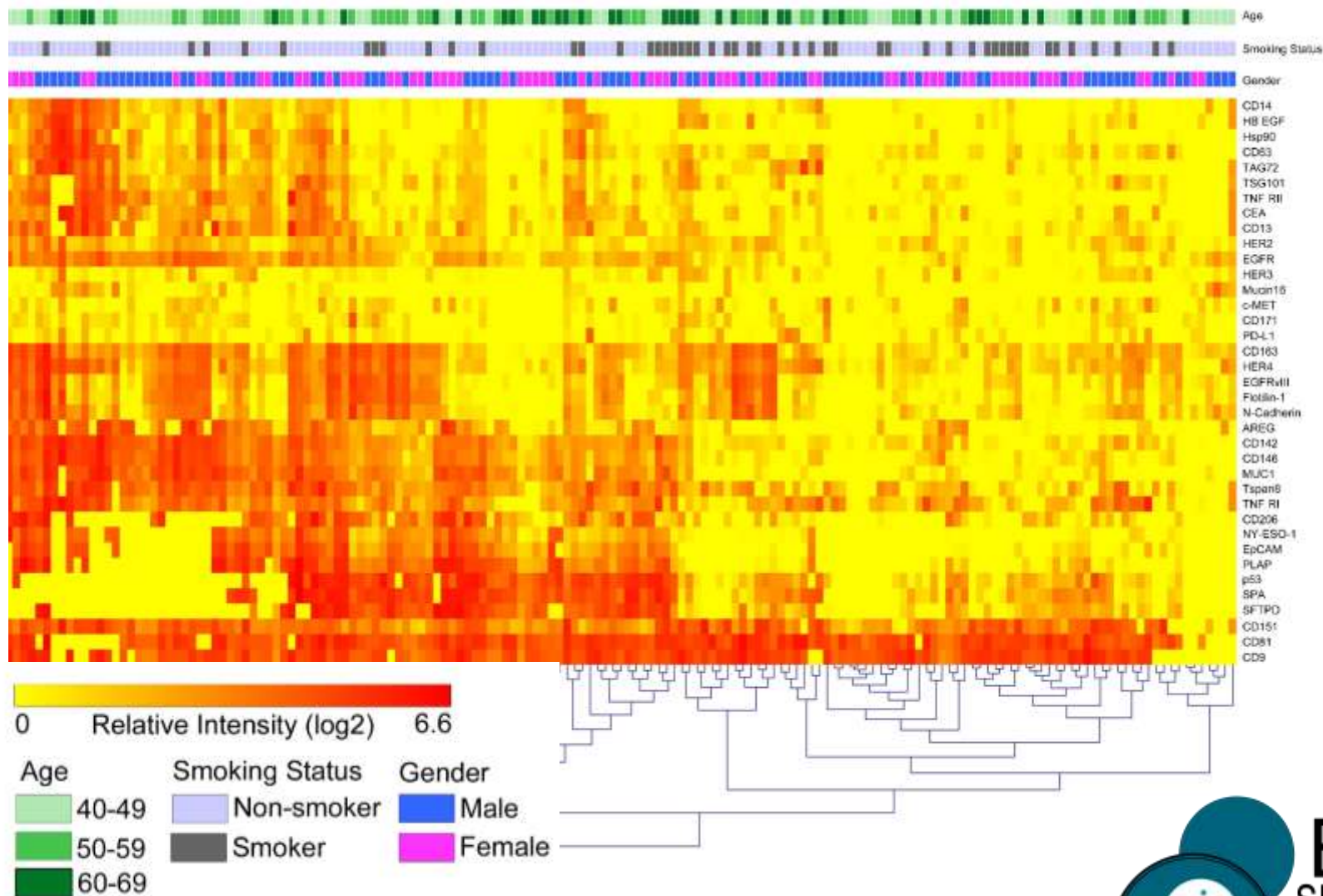
**Table 1**

Demographic characteristics of the 161 included individuals according to gender, smoking status and age.

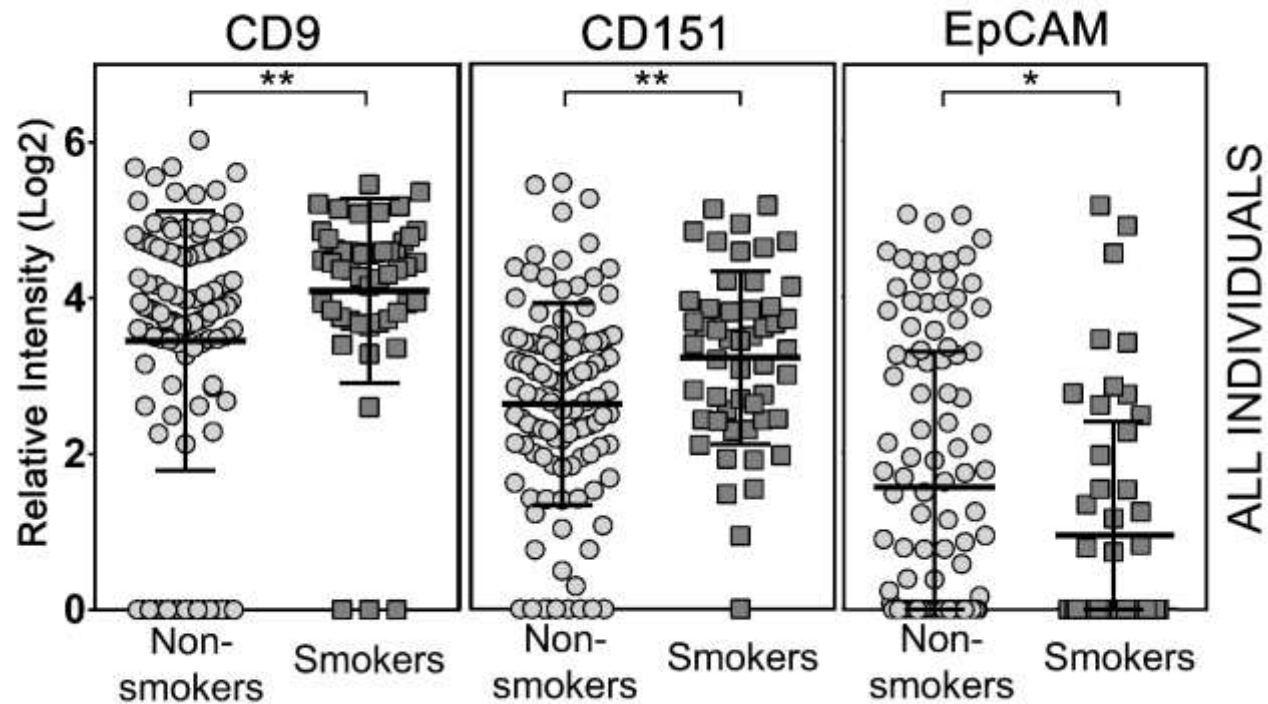
	Female	Male
All individuals	<b>71</b>	<b>90</b>
Non-smokers	<b>48</b>	<b>62</b>
Age 40–49	19	25
Age 50–59	17	25
Age 60–69	12	12
Smokers	<b>23</b>	<b>28</b>
Age 40–49	10	8
Age 50–59	7	13
Age 60–69	6	7



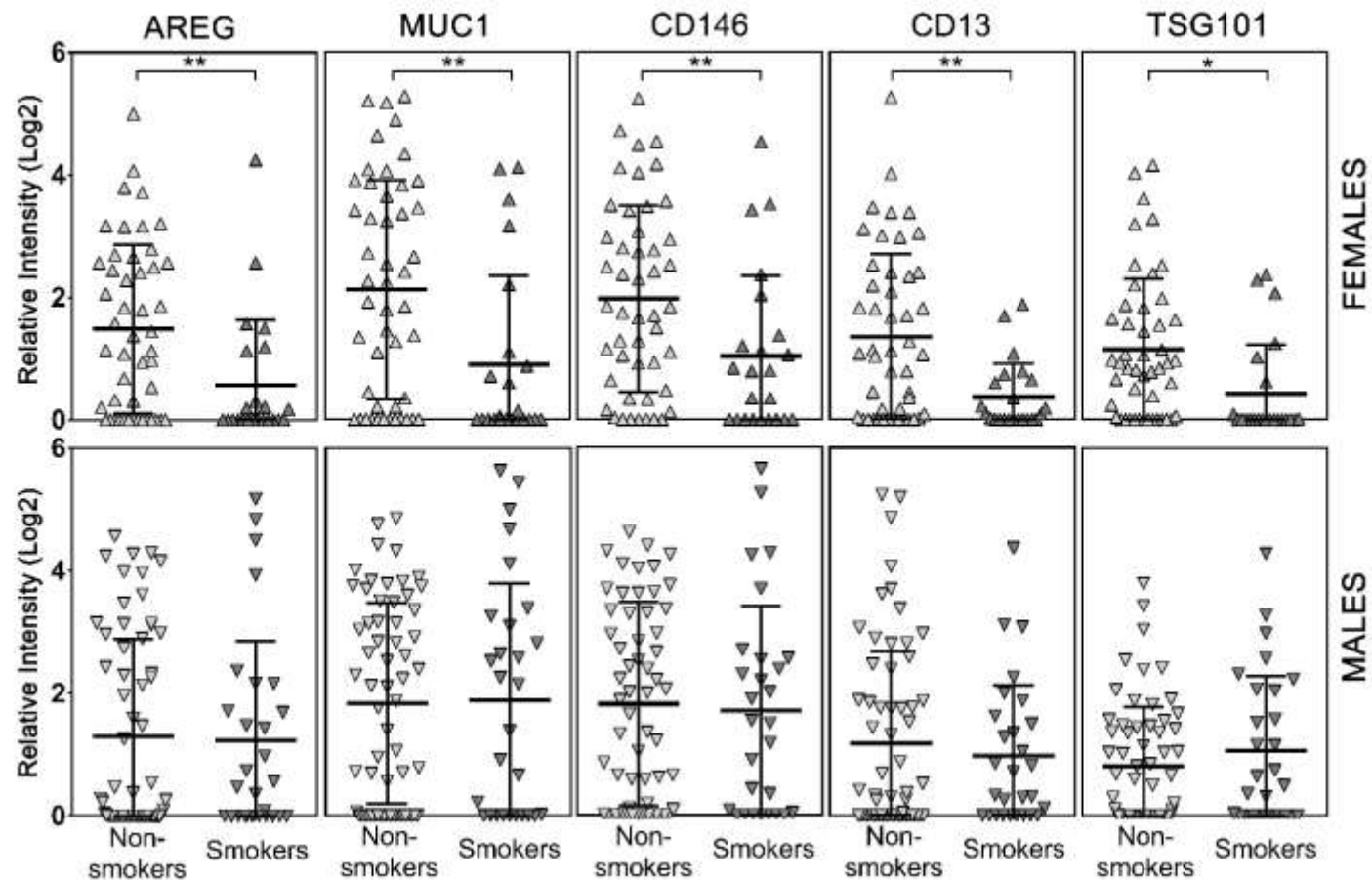




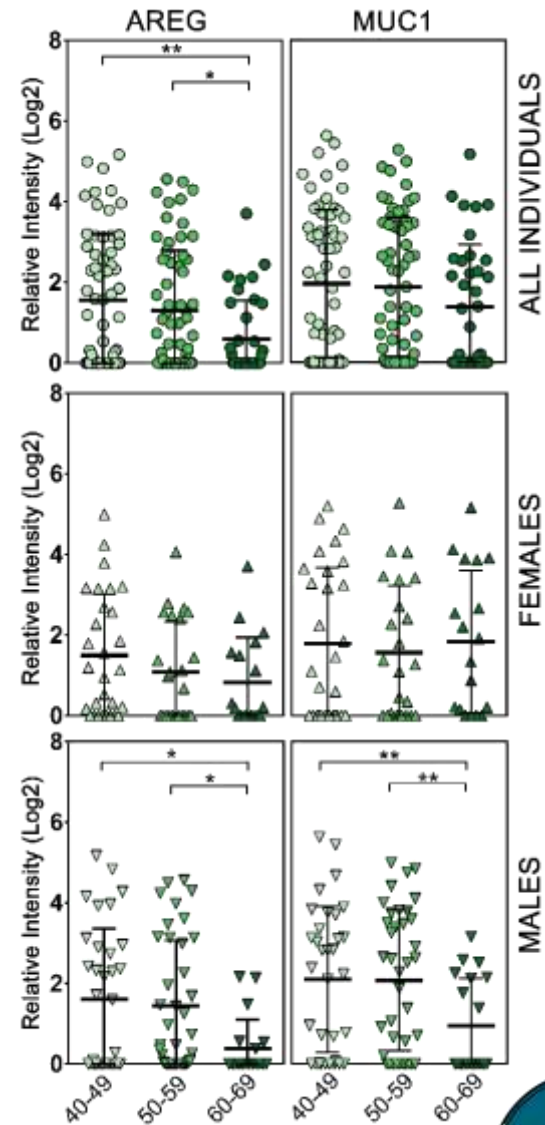
## Changes in markers with relation to smoking



## Changes in markers with relation to smoking



## Changes in markers with relation to age





# SCIENTIFIC REPORTS

OPEN

## Age-Related Changes in Plasma Extracellular Vesicle Characteristics and Internalization by Leukocytes

Received: 5 December 2016  
Accepted: 29 March 2017  
Published online: 02 May 2017

Erez Eitan<sup>1</sup>, Jamal Green<sup>2</sup>, Monica Bodogai<sup>1</sup>, Nicole A. Mode<sup>2</sup>, Rikke Bæk<sup>3</sup>, Malene M. Jørgensen<sup>4</sup>, David W. Freeman<sup>2</sup>, Kenneth W. Witwer<sup>2</sup>, Alan B. Zonderman<sup>2</sup>, Arya Biragyn<sup>2</sup>, Mark P. Mattson<sup>1</sup>, Nicole Noren Hooten<sup>2</sup> & Michele K. Evans<sup>1</sup>



National Institute on Aging  
Turning Discovery Into Health



## *Healthy Aging in Neighborhoods of Diversity across the Life Span*

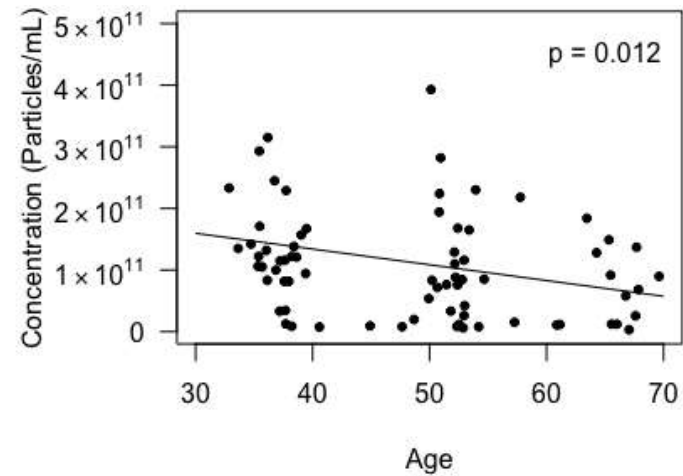
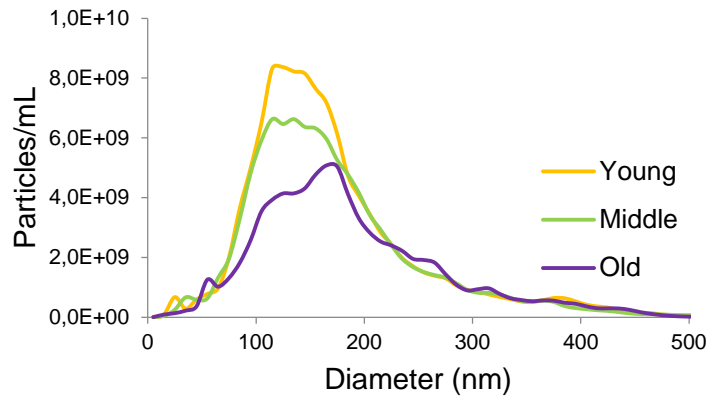
- HANDLS is planned as a 20-year longitudinal study.
- HANDLS participants are a fixed cohort of 3,720 community-dwelling African American and white adults aged 30-64.

74 persons (small subset)  
– samples with a 5-year span



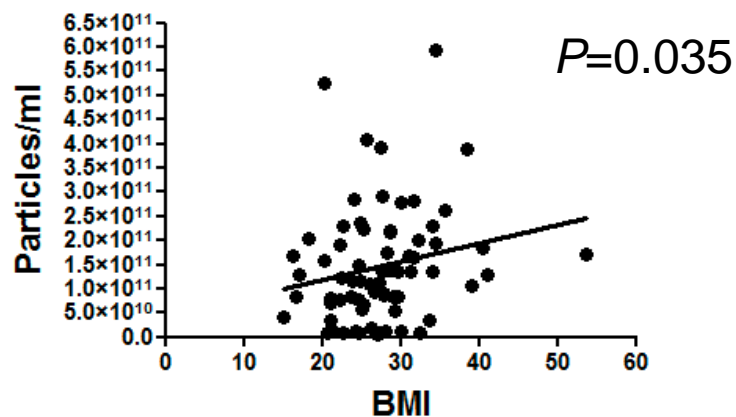


## NTA (Nanoparticle Tracking Analysis)

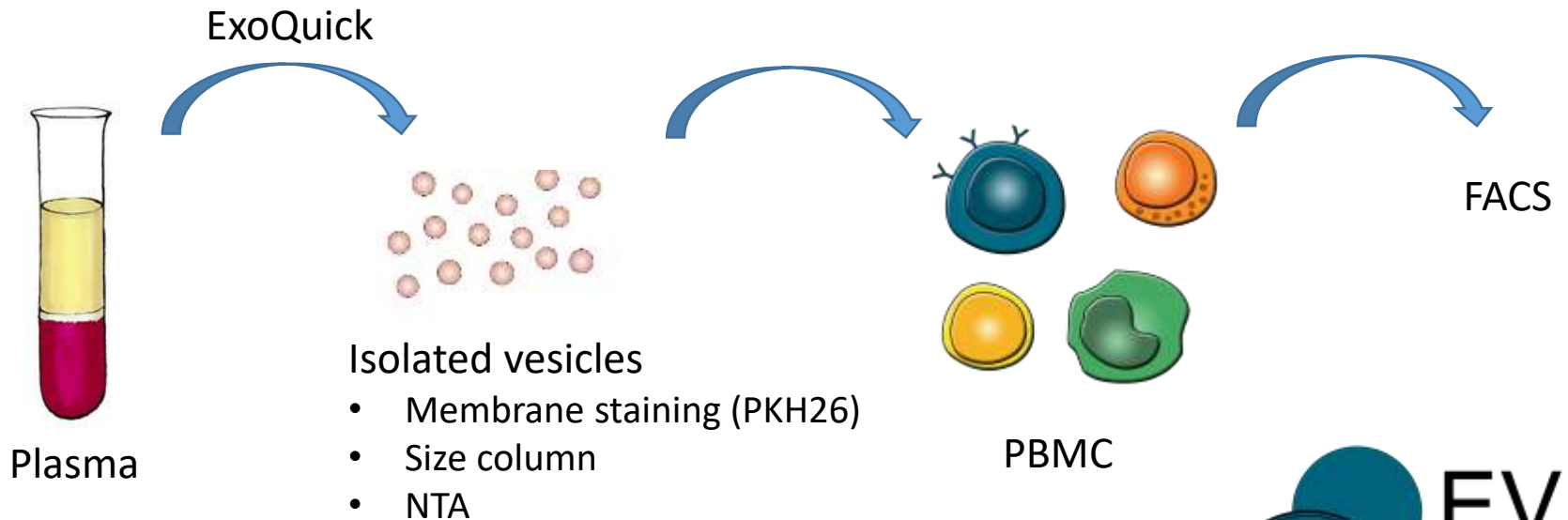
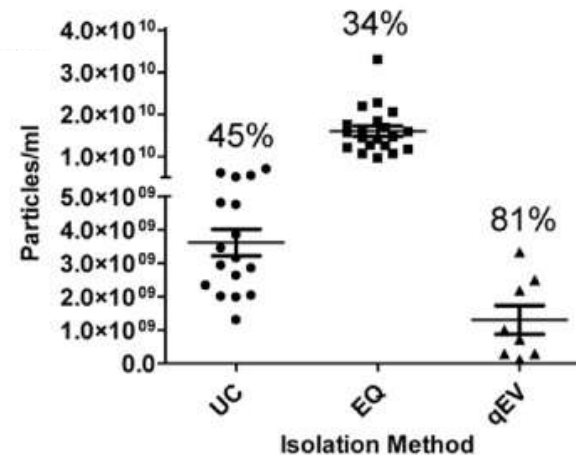


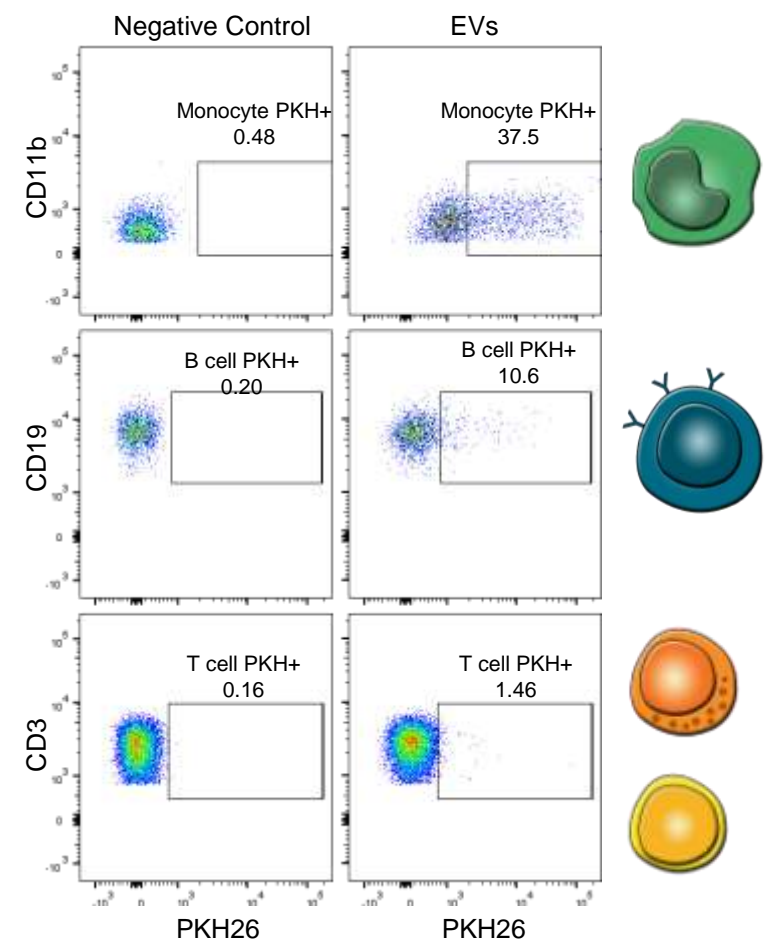
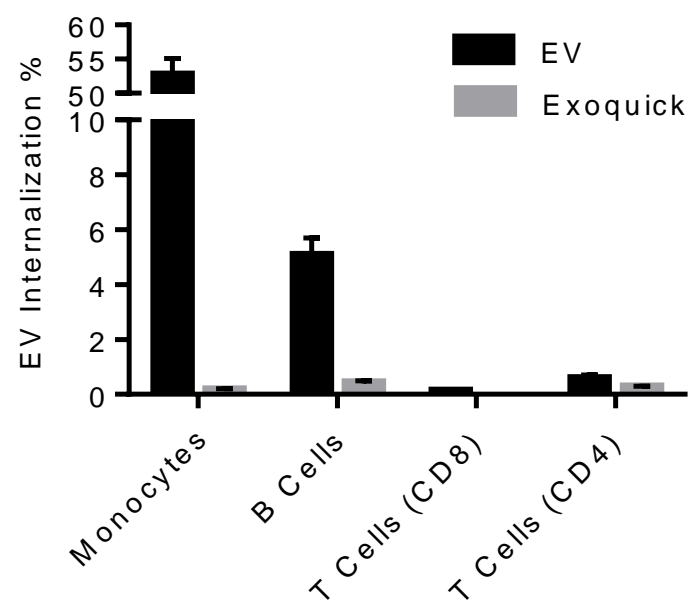
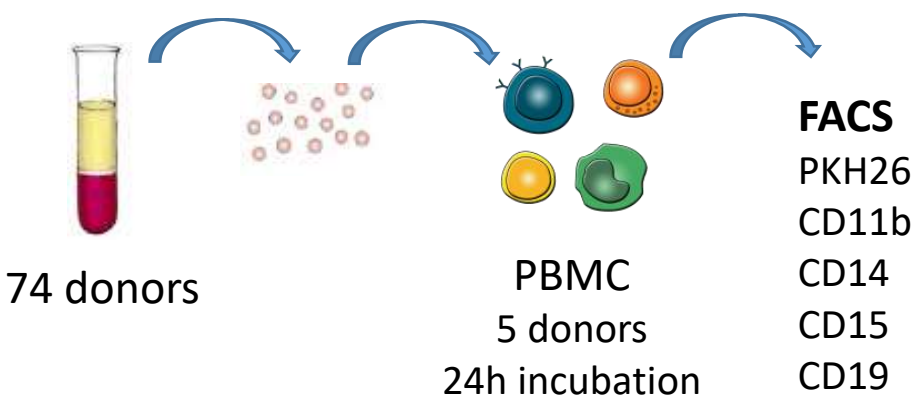
## NTA (Nanoparticle Tracking Analysis)

	Visit			P Value
		Male	Female	
Sex	1	$1.10\text{E} + 11 \pm 0.93\text{E} + 11$	$1.08\text{E} + 11 \pm 0.89\text{E} + 11$	0.928
	2	$1.09\text{E} + 11 \pm 0.87\text{E} + 11$	$1.09\text{E} + 11 \pm 1.16\text{E} + 11$	0.796
		Whites	African American	
Race	1	$1.01\text{E} + 11 \pm 0.92\text{E} + 11$	$1.17\text{E} + 11 \pm 0.90\text{E} + 11$	0.433
	2	$1.05\text{E} + 11 \pm 1.28\text{E} + 11$	$1.19\text{E} + 11 \pm 0.69\text{E} + 11$	0.542
		Smoker	Non-Smoker	
Smoking	1	$1.20\text{E} + 11 \pm 1.02\text{E} + 11$	$0.96\text{E} + 11 \pm 0.79\text{E} + 11$	0.287
	2	$1.66\text{E} + 11 \pm 1.30\text{E} + 11$	$0.89\text{E} + 11 \pm 0.75\text{E} + 11$	0.002

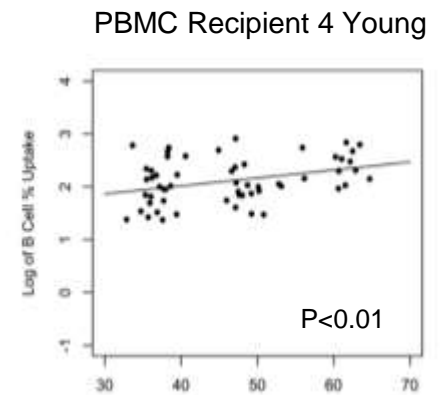
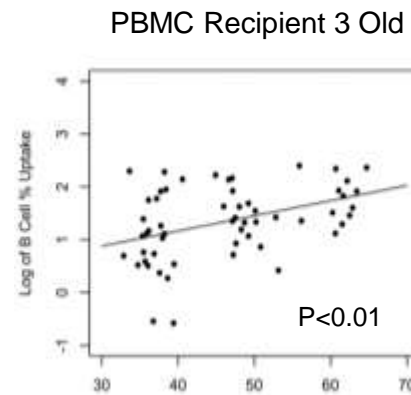
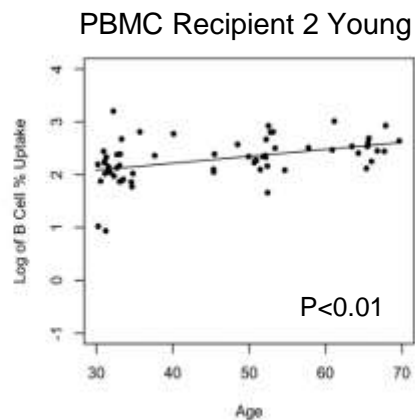
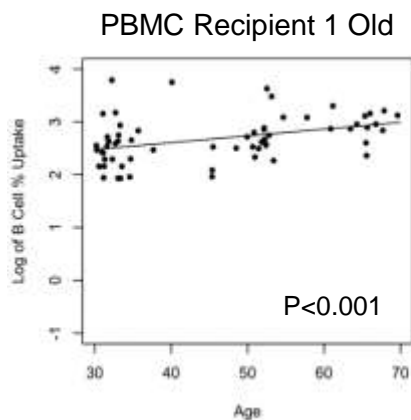
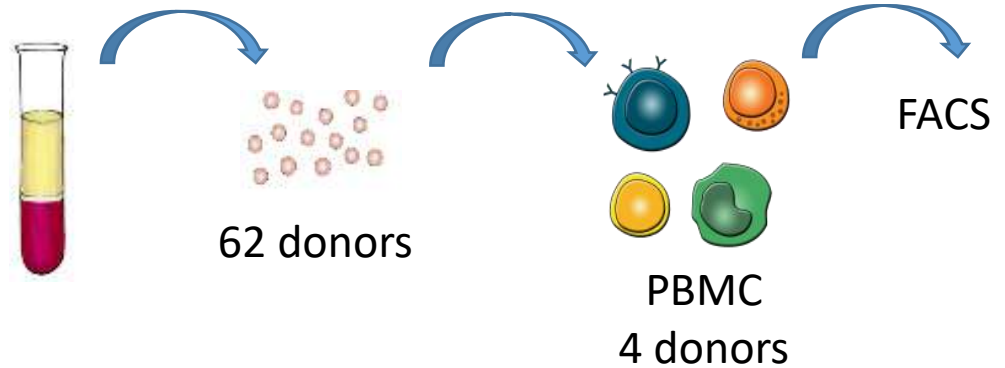


# Which cells take up the vesicles?





# EV uptake by B-cells



## Conclusion:

EVs from older individuals were more readily internalized by B cells





# Conclusions

AALBORG UNIVERSITY HOSPITAL

- The level (numbers) of EVs in plasma decrease with advancing age.
- EV concentration was positively associated with BMI and smoking.
  - No differences with regards to gender or race
- Age, smoking and gender have an influence on the protein characteristics of the EVs in plasma.
- In healthy individuals a high percentage of monocytes internalized EVs.
- EVs from older individuals were more readily internalized by B cells.



# Lung cancer

- To date lung cancer accounts for more deaths each year than any other type of cancer.
- The 5-year survival rate for non-small cell lung cancer (NSCLC) is currently 11 - 18%.
- Because the majority of NSCLC patients present the advanced stage disease, the outcome is often fatal.
- Still, diagnosing NSCLC can be challenging, and new methods to support the already used clinical tools are needed to secure a better overall outcome.



ORIGINAL RESEARCH ARTICLE

## Exosomal proteins as potential diagnostic markers in advanced non-small cell lung carcinoma

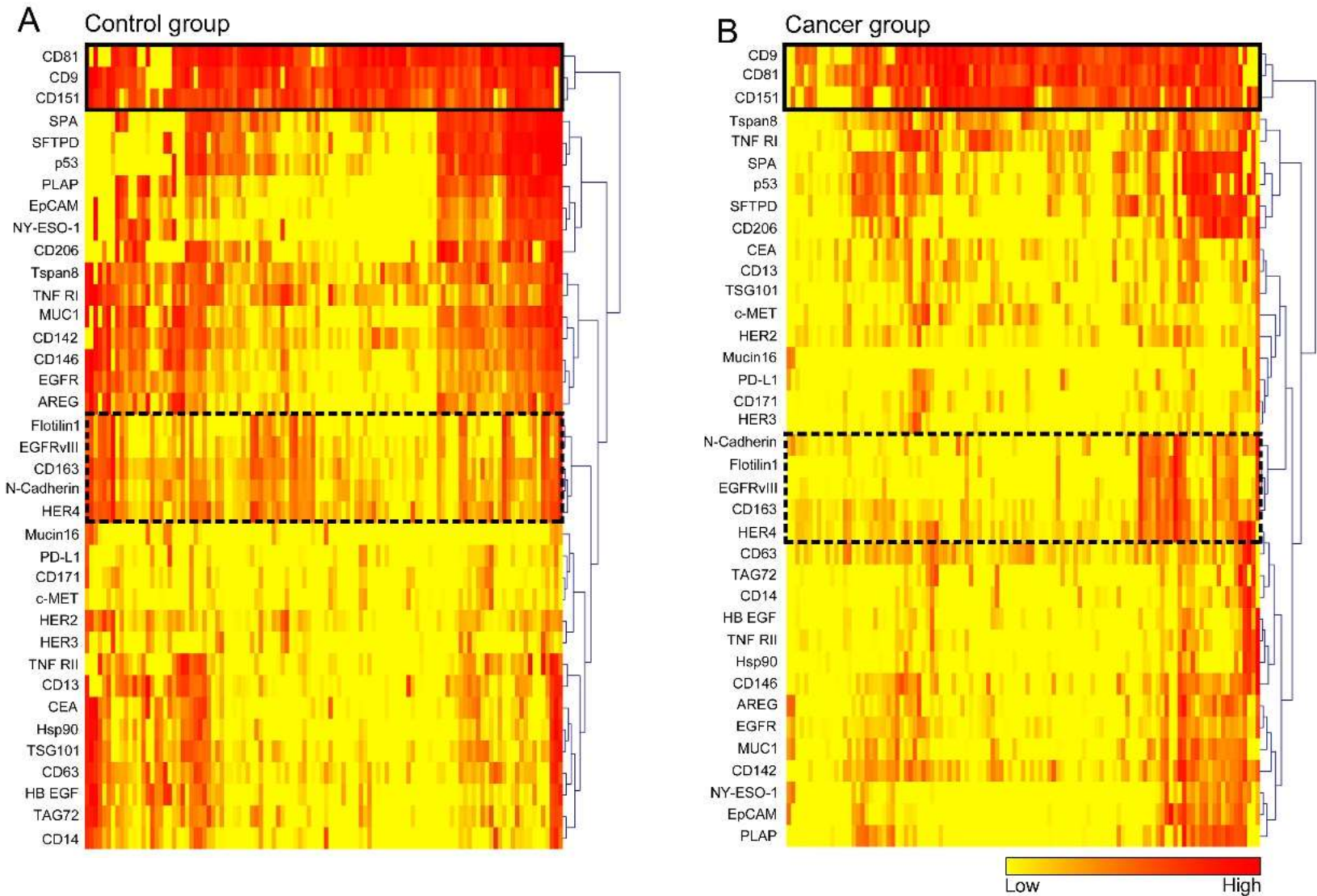
Kristine R. Jakobsen<sup>1,2</sup>, Birgitte S. Paulsen<sup>1,3</sup>, Rikke Bæk<sup>4</sup>, Kim Varming<sup>4</sup>, Boe S. Sorensen<sup>1</sup> and Malene M. Jørgensen<sup>4\*</sup>

<sup>1</sup>Department of Clinical Biochemistry, Aarhus University Hospital, Aarhus, Denmark; <sup>2</sup>Department of Biomedicine, Aarhus University, Aarhus, Denmark; <sup>3</sup>Department of Oncology, Aarhus University Hospital, Aarhus, Denmark; <sup>4</sup>Department of Clinical Immunology, Aalborg University Hospital, Aalborg, Denmark

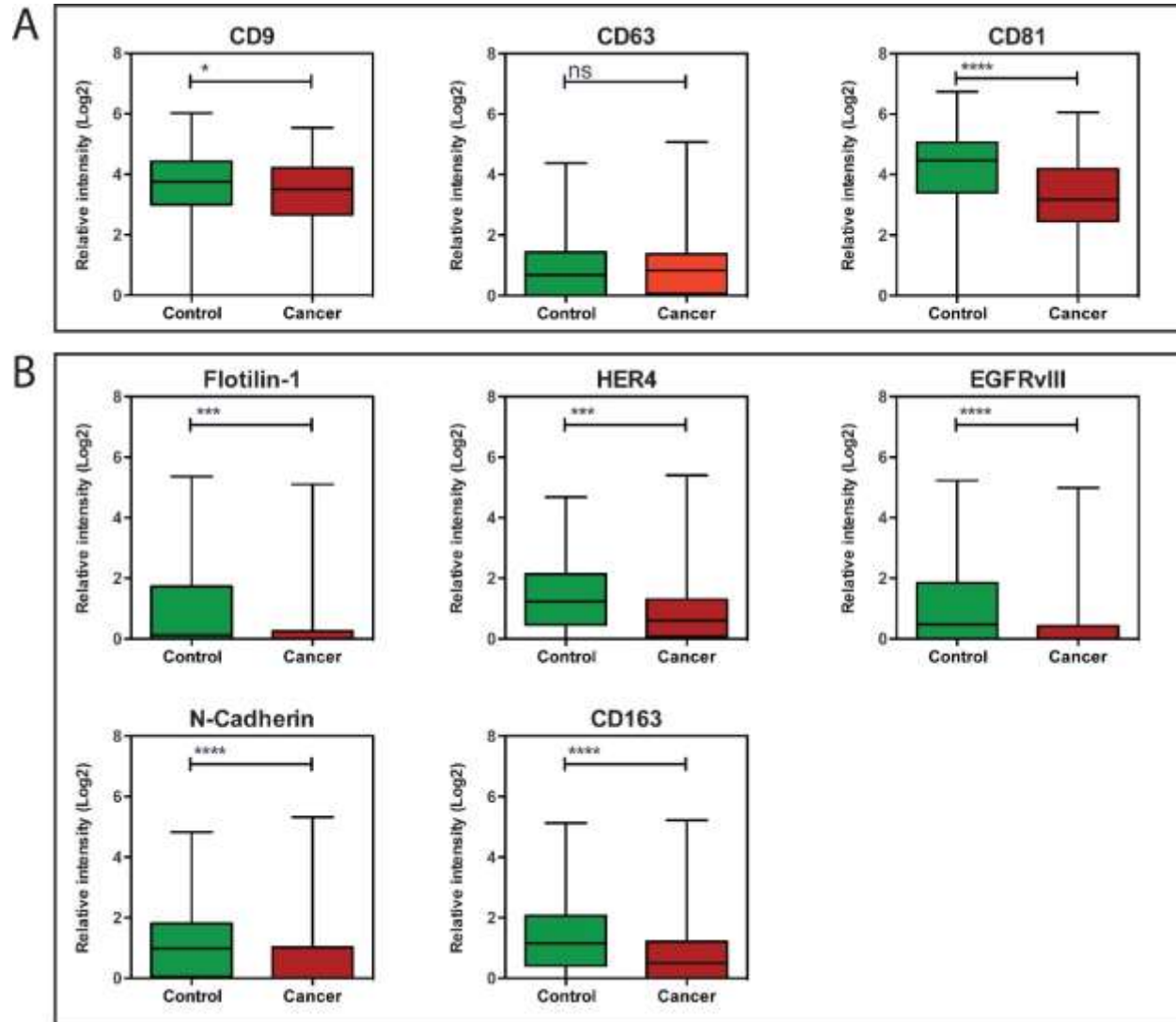
Characteristics	NSCLC group (N = 109)	Control group (N = 110)
	Number (%)	
Age	45–88	21–90
Median	66	65
Gender		
Male	56 (51.4)	64 (58.2)
Female	53 (48.6)	46 (41.8)
Stage		
IIIa	28 (25.7)	
IIIb	20 (18.3)	
IV	61 (56.0)	



# RESULTS



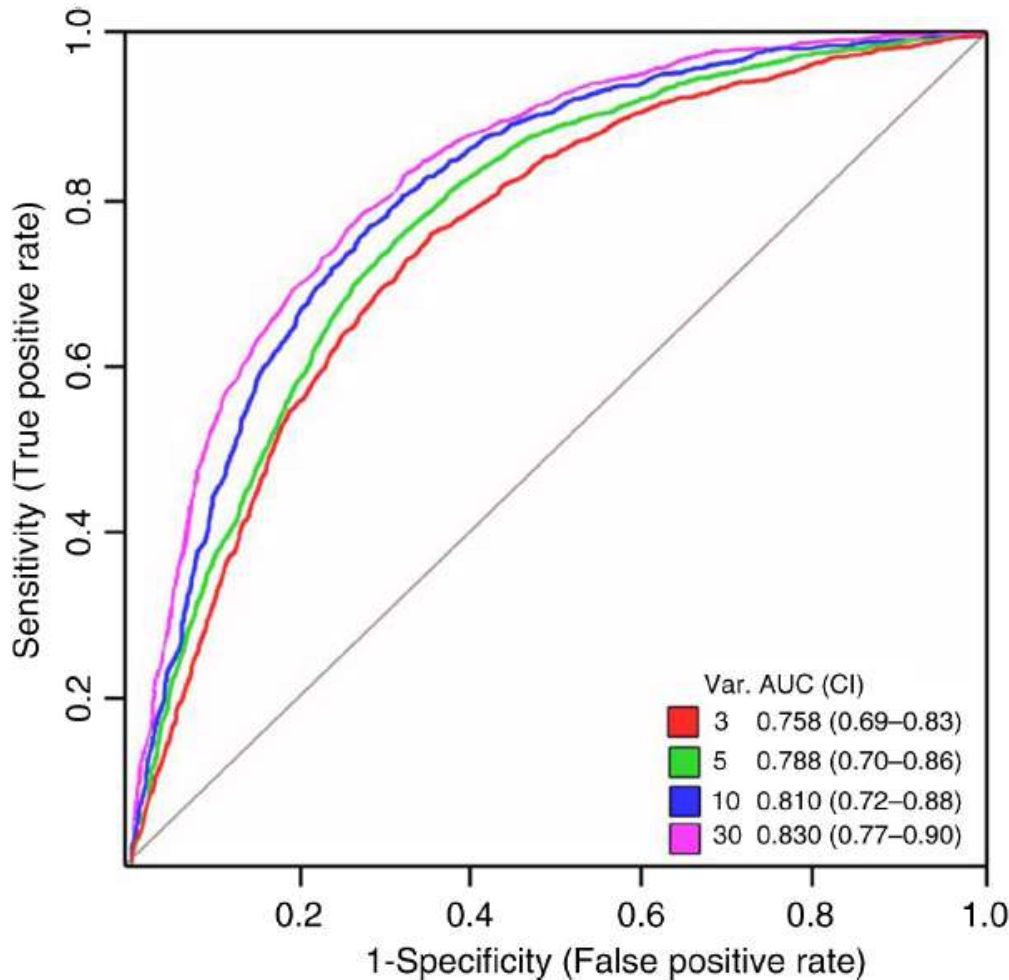
# RESULTS





# RESULTS

## Multivariate Data Analysis



**30-marker model**

Sensitivity: 75%

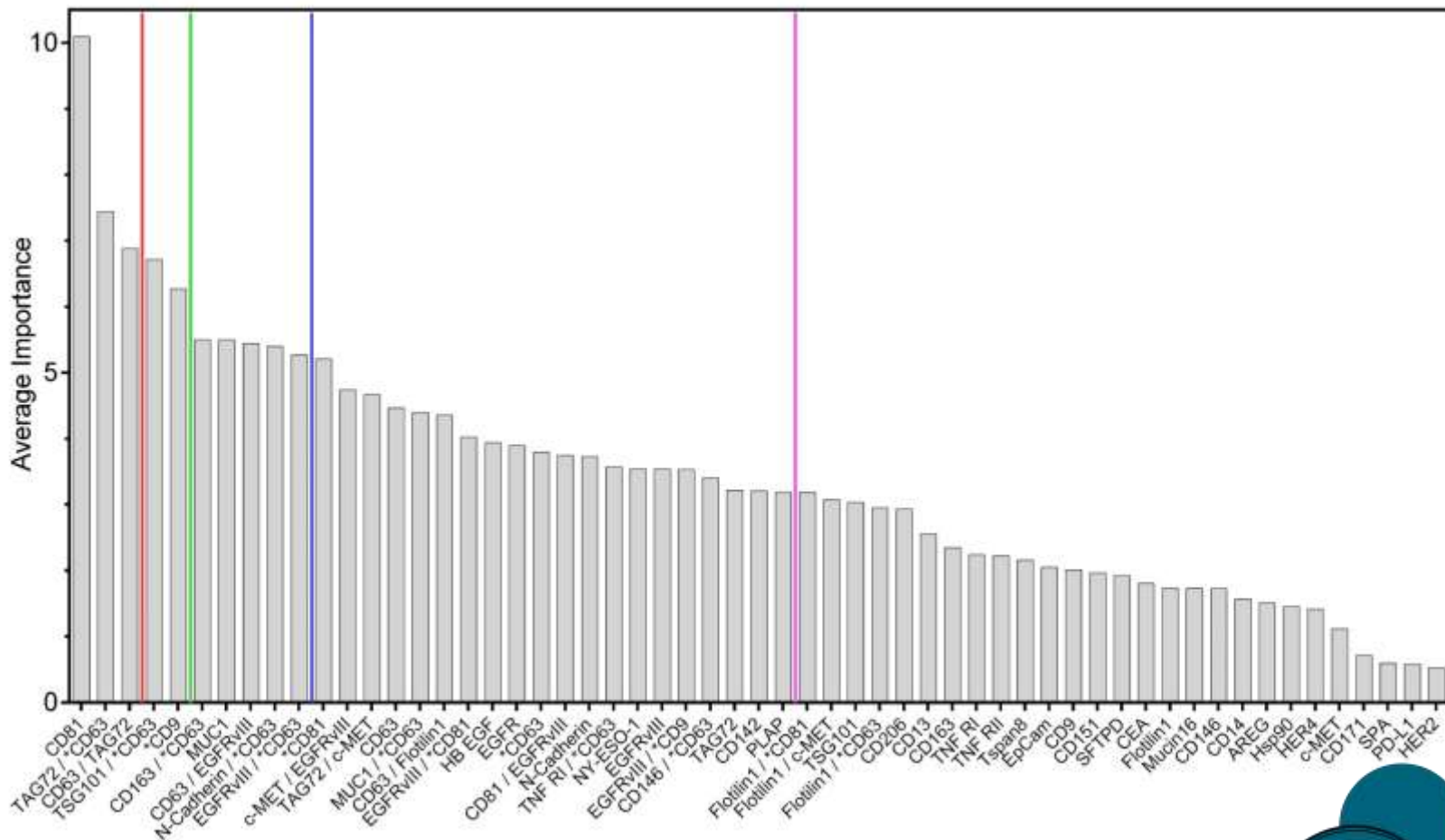
Specificity: 76%

Accuracy: 75%



# RESULTS

## Multivariate Data Analysis / Importance to the model



ORIGINAL ARTICLE



## Exosomal Proteins as Diagnostic Biomarkers in Lung Cancer



Birgitte Sandfeld-Paulsen, MD,<sup>a,\*</sup> Kristine Raaby Jakobsen, MSc,<sup>a,b</sup> Rikke Bæk, MSc,<sup>c</sup>  
Birgitte Holst Folkersen, MD, PhD,<sup>d</sup> Torben Riis Rasmussen, MD, PhD,<sup>d</sup>  
Peter Meldgaard, MD, PhD,<sup>e</sup> Kim Varming, MD, PhD,<sup>c</sup>  
Malene Møller Jørgensen, MSc, PhD,<sup>c</sup> Boe Sandahl Sorensen, MSc, PhD<sup>a</sup>

<sup>a</sup>Department of Clinical Biochemistry, Aarhus University Hospital

<sup>b</sup>Department of Biomedicine, Aarhus University

<sup>c</sup>Department of Immunology, Aalborg University

<sup>d</sup>Department of Pulmonary Medicine, Aarhus University Hospital

<sup>e</sup>Department of Oncology, Aarhus University Hospital



available at [www.sciencedirect.com](http://www.sciencedirect.com)

ScienceDirect

[www.elsevier.com/locate/molonc](http://www.elsevier.com/locate/molonc)

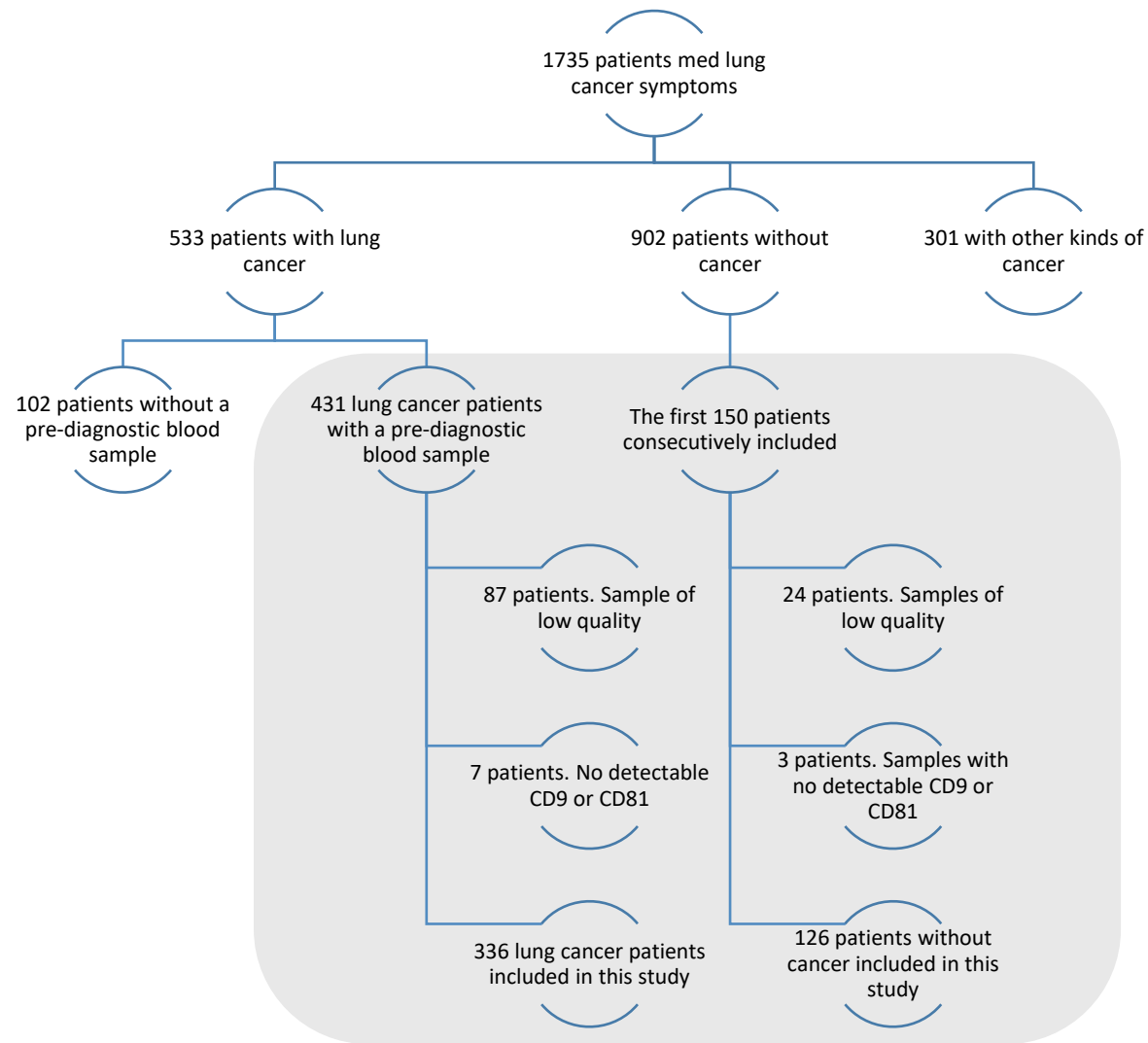


## Exosomal proteins as prognostic biomarkers in non-small cell lung cancer

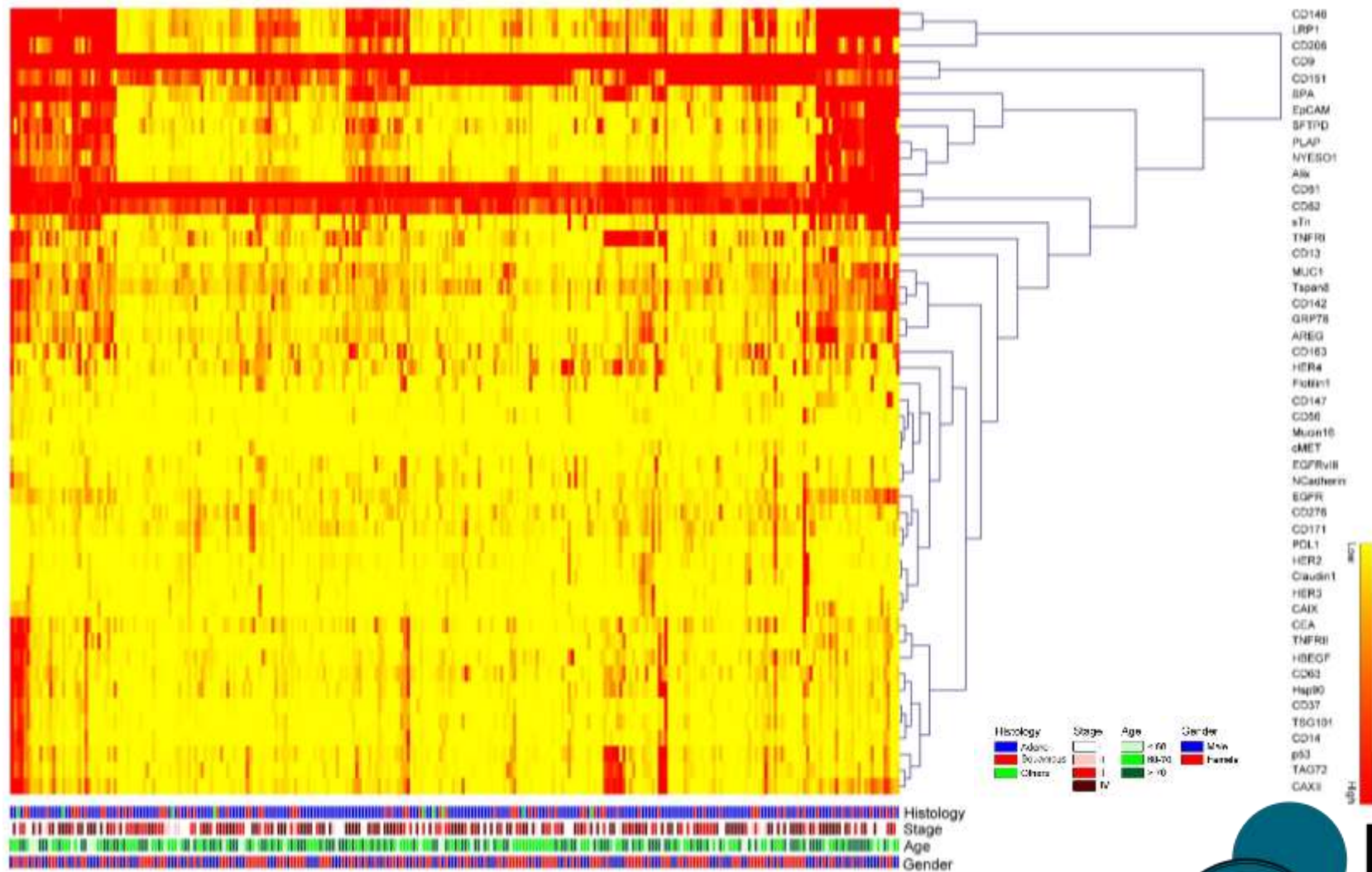


B. Sandfeld-Paulsen<sup>a,\*</sup>, N. Aggerholm-Pedersen<sup>b</sup>, R. Bæk<sup>c</sup>, K.R. Jakobsen<sup>a,d</sup>,  
P. Meldgaard<sup>b</sup>, B.H. Folkersen<sup>e</sup>, T.R. Rasmussen<sup>e</sup>, K. Varming<sup>c</sup>,  
M.M. Jørgensen<sup>c</sup>, B.S. Sorensen<sup>a</sup>



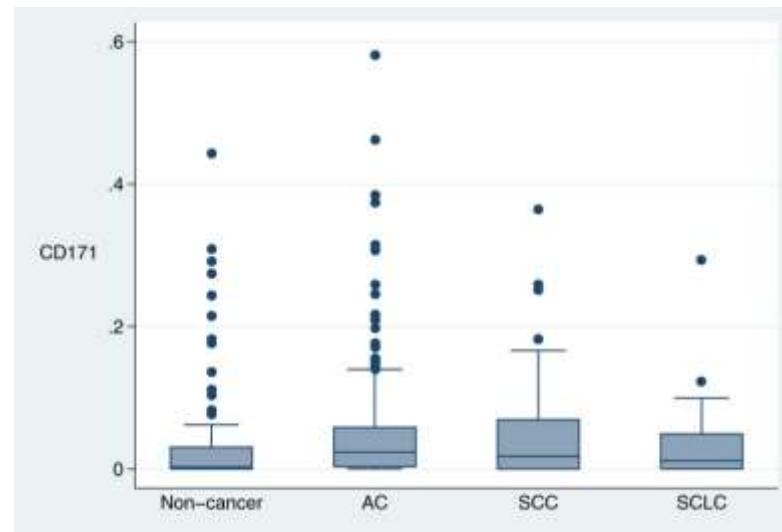
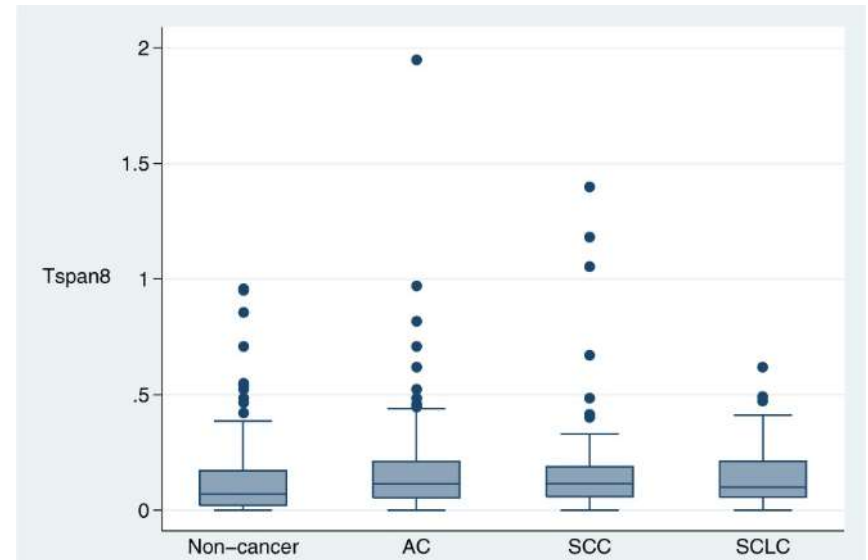
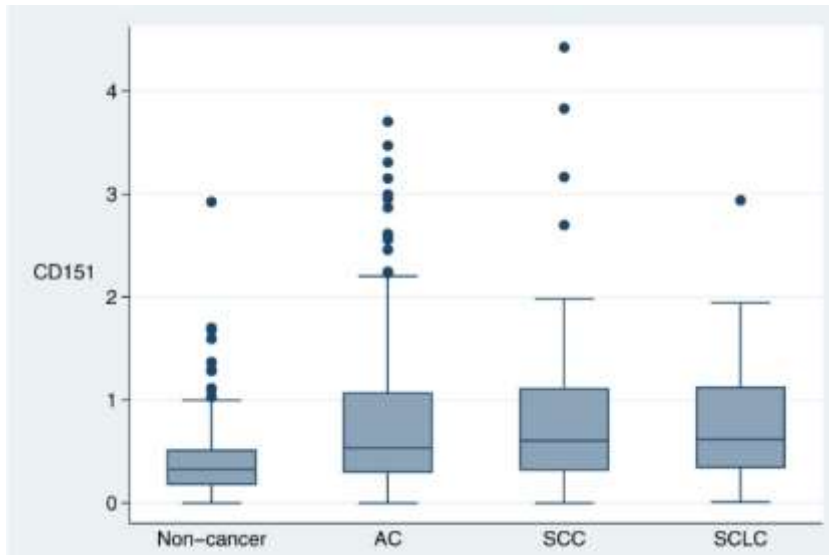


# RESULTS





# RESULTS



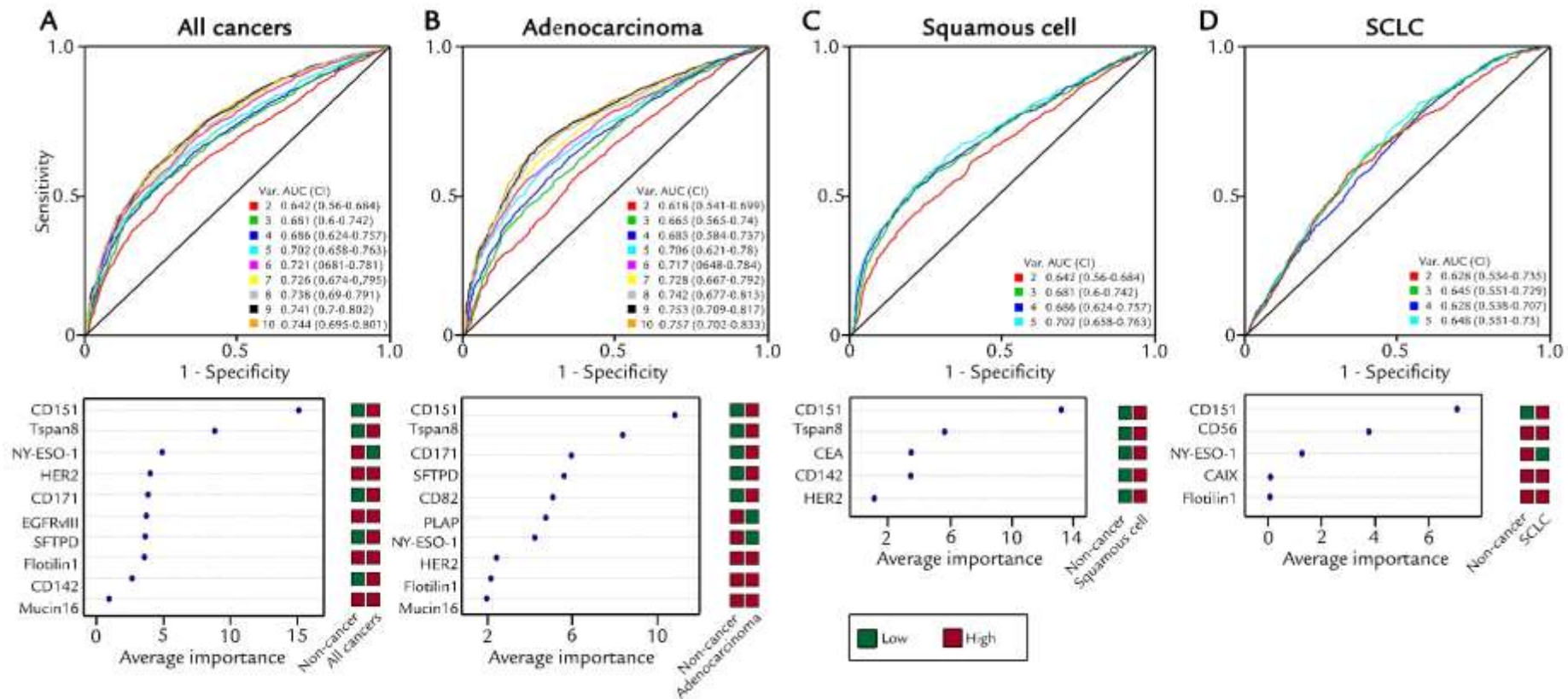
# RESULTS

**Table 2. Exosomal Proteins as Individual Diagnostic Biomarkers**

Markers	All Cancer			AC			SCC			SCLC		
	<i>p</i> Value <sup>a</sup>	AUC	<i>p</i> Value <sup>b</sup>	<i>p</i> Value <sup>a</sup>	AUC	<i>p</i> Value <sup>b</sup>	<i>p</i> Value <sup>a</sup>	AUC	<i>p</i> Value <sup>b</sup>	<i>p</i> Value <sup>a</sup>	AUC	<i>p</i> Value <sup>b</sup>
CD151	0.00001	0.68	0.0002	0.00001	0.68	0.0008	0.00001	0.69	0.001	0.00001	0.71	0.0002
CD171	0.0003	0.61	0.0002	0.00001	0.63	0.00002	ns	0.57	ns	ns	0.54	ns
TSPAN8	0.001	0.60	0.0002	0.002	0.60	0.0004	0.0005	0.61	0.003	ns	0.58	ns
HER2	0.003	0.58	0.003	0.006	0.58	0.006	0.02	0.59	0.04	ns	0.57	ns
Flotilin <sup>c</sup>	0.004	0.58	0.003	0.003	0.59	0.002	ns	0.54	ns	0.03	0.59	0.05
SFTPD	0.008	0.58	0.004	0.02	0.57	0.007	0.05	0.58	ns	ns	0.57	ns
NY-ESO-1 <sup>c</sup>	0.009	0.57	0.01	0.01	0.58	0.02	ns	0.56	ns	ns	0.58	0.09 <sup>d</sup>
CD9	0.01	0.57	ns	ns	0.56	ns	0.005	0.61	ns	ns	0.57	ns
CD81 <sup>c</sup>	0.01	0.57	ns	ns	0.56	ns	0.005	0.57	ns	ns	0.57	ns
CD82 <sup>c</sup>	0.02	0.57	ns	0.005	0.59	0.009	ns	0.57	ns	ns	0.50	ns
Mucin16 <sup>c</sup>	0.02	0.53	0.03	0.01	0.54	0.02	ns	0.52	ns	ns	0.54	ns
EGFRvIII	0.03	0.56	0.05	ns	0.55	ns	ns	0.56	ns	ns	0.57	ns
PLAP <sup>c</sup>	0.03	0.56	ns	0.03	0.57	0.05	ns	0.53	ns	ns	0.55	ns
CD142	ns	0.55	0.03	ns	0.54	ns	0.02	0.60	0.008	ns	0.55	ns
CD206	ns	0.55	ns	0.04	0.57	ns	ns	0.52	ns	ns	0.52	ns
CEA	ns	0.55	ns	ns	0.54	ns	0.009	0.60	0.03	ns	0.50	ns
CAIX	ns	0.52	ns	ns	0.53	ns	ns	0.52	ns	ns	0.55	0.09 <sup>d</sup>
CD56	ns	0.52	ns	ns	0.50	ns	ns	0.53	ns	ns	0.55	0.01



# RESULTS



# CONCLUSION

- We have demonstrated the potential of EV protein profiling by the EV Array in a prospective study including patients with symptoms of lung cancer.
- We found CD151, TSPAN8, and CD171 to be highly expressed in EVs from patients with lung cancer compared with those from patients without cancer.
- In a multimarker model including 10 EV markers, we were able to make a fair separation of adenocarcinoma (AC) and non-cancer, demonstrating the promising perspectives of EV protein profiling as a biomarker.



# Prognostic

- To explore EV membrane-bound proteins as prognostic biomarkers in NSCLC, the presence of the individual marker was evaluated.
- Each marker was dichotomised based on its detection or non-detection.
- The impact of each marker on OS was estimated by univariate and multivariate analysis adjusting for the clinico-pathological characteristics of age, sex, PS, histology and stage.





# RESULTS (Absent or present)

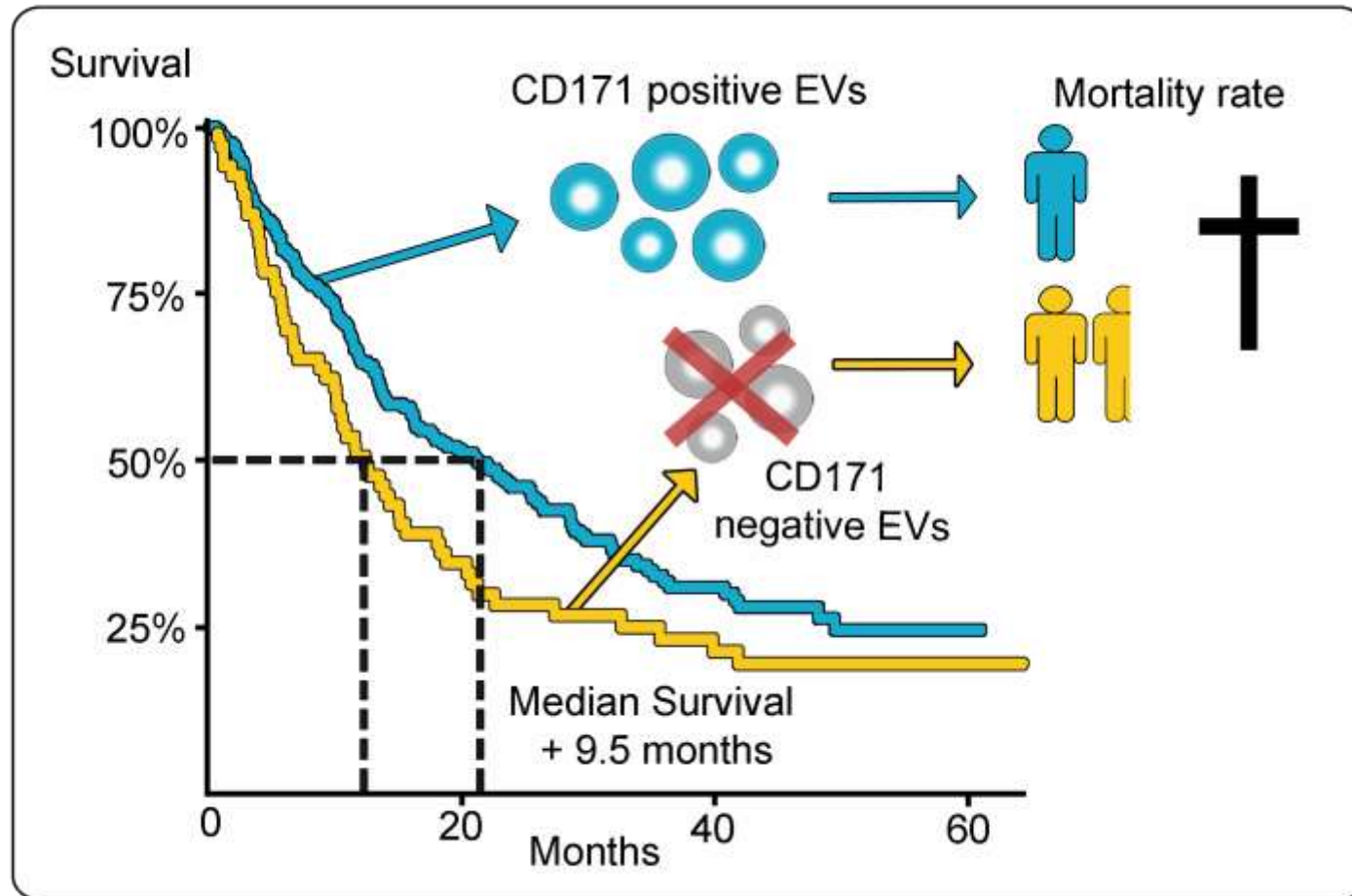
Marker	Univariate			Multivariate				Fraction (%) (n=276) **
	HR	95%CI	p	HR	95%CI	p	Bootstrap	
CD171	0.71	0.52 – 0.98	0.04	0.56	0.41 – 0.79	0.001	*	75
Flotilin1	0.73	0.53 – 0.99	0.04	0.63	0.46 – 0.86	0.004	*	35
HER3	0.68	0.48 – 0.96	0.03	0.61	0.43 – 0.87	0.006	*	24
GRP78	0.75	0.56 – 0.99	0.05	0.69	0.51 – 0.91	0.01	*	57
cMET	1.11	0.79 – 1.57	0.53	1.41	1.00 – 2.01	0.05	-	22
sTn	1.66	1.06 – 2.59	0.03	1.51	0.93 – 2.43	0.07	-	53
Tspan8	2.37	0.97 – 5.76	0.06	2.22	0.91 – 5.47	0.08	-	96

**Table 3.** Membrane-bound exosomal proteins as prognostic biomarkers in NSCLC based on the presence of each marker. Only markers with a trending or significant ( $p \leq 0.10$ ) impact on OS are presented \* multivariate results verified by bootstrapping \*\* number of patients with the individual marker present as a fraction of the total number of patients



# RESULTS (Absent or present)

CD171



# RESULTS (Concentration)

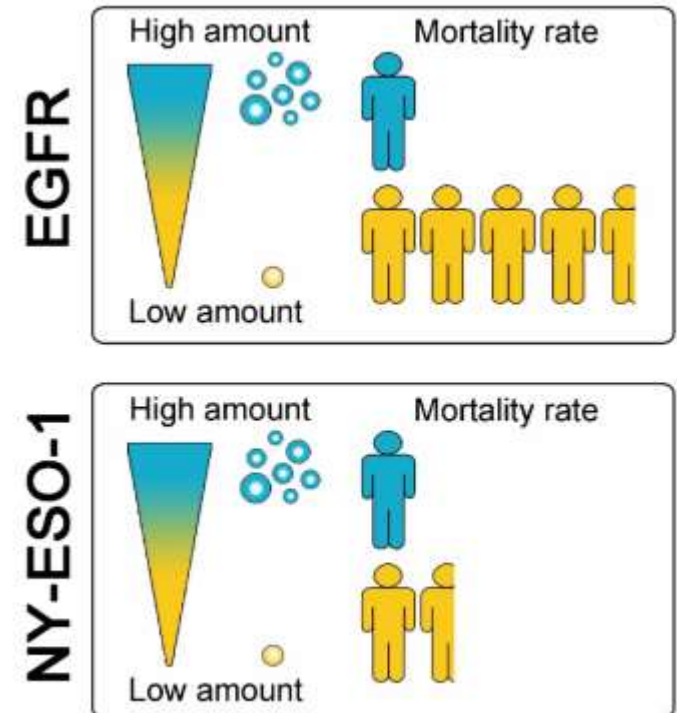
Marker	Univariate			Multivariate			
	HR	95%CI	p	HR#	95%CI	p	Bootstrap
NY-ESO-1	1.11	0.83 – 1.47	0.49	1.53	1.13 – 2.10	0.007	*
EpCam	1.03	0.83 – 1.28	0.80	1.31	1.04 – 1.65	0.02	-
CAIX	2.81	1.00 – 7.84	0.05	2.84	1.18 – 6.81	0.02	-
CD13	1.93	1.11 – 3.37	0.02	1.81	1.09 – 3.03	0.02	-
EGFR	1.21	0.25 – 5.79	0.81	4.43	1.18 – 16.68	0.03	*
PLAP	1.01	0.80 – 1.29	0.91	1.28	1.02 – 1.60	0.03	*
CD276	1.53	0.33 – 7.10	0.59	4.11	1.00 – 17.05	0.05	-
AREG	1.58	0.92 – 2.71	0.09	1.55	0.94 – 2.54	0.08	-
HER2	1.16	0.29 – 4.61	0.83	3.28	0.88 – 12.18	0.08	-

**Table 4.** Membrane-bound proteins as prognostic biomarkers based on the expression level. # Hazard ratio adjusted for stage, histology, PS, age and sex \* multivariate results verified by bootstrapping. Only markers with a significant or a trending impact on OS ( $p < 0.10$ ) are included.



# CONCLUSION

- Exploration of EV membrane-bound proteins as prognostic markers in NSCLC revealed a total of nine markers with potential impact on OS that were independent of known clinico-pathological factors.
- However promising, our results need to be validated in an independent cohort.



# More information on [www.evarray.dk](http://www.evarray.dk)



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