



Review

Stem cell-based approaches in cardiac tissue engineering: controlling the microenvironment for autologous cells



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ABSTRACT

Cardiovascular disease is one of the leading causes of mortality worldwide. Cardiac tissue engineering strategies focusing on biomaterial scaffolds incorporating cells and growth factors are emerging as highly promising for cardiac repair and regeneration. The use of stem cells within cardiac microengineered tissue constructs present an inherent ability to differentiate into cell types of the human heart. Stem cells derived from various tissues including bone marrow, dental pulp, adipose tissue and umbilical cord can be used for this purpose. Approaches ranging from stem cell injections, stem cell spheroids, cell encapsulation in a suitable hydrogel, use of pre-fabricated scaffold and bioprinting technology are at the forefront in the field of cardiac tissue engineering. The stem cell microenvironment plays a key role in the maintenance of stemness and/or differentiation into cardiac specific lineages. This review provides a detailed overview of the recent advances in microengineering of autologous stem cell-based tissue engineering platforms for the repair of damaged cardiac tissue. A particular emphasis is given to the roles played by the extracellular matrix (ECM) in regulating the physiological response of stem cells within cardiac tissue engineering platforms.

1. Introduction

Cardiovascular disease (CVD) is the leading cause of mortality worldwide accounting for over 30% of deaths [1]. Despite currently available pharmacological approaches for the management of CVD, the quality of life and prolonged survival remain a challenge in the vast majority of patients. Cell-based therapies represent a potential promising approach to promote cardiac regeneration following myocardial infarction (MI), heart failure, heart valve damage, and in congenital heart diseases [2,3]. Over the past several decades, life-saving organ transplantations and the use of biomaterial-based implants have been employed extensively in people with organ damage or failure [4].

However, such interventions are associated with limitations including the lack of available or suitable organs and the need for continuous use of immunosuppressive drugs post organ transplantation, often associated with severe side effects [5]. Recent technological developments in tissue engineering including 3D bioprinting [6] and utilization of pluripotent and multipotent stem cells for organ or tissue regeneration, have shown promising potential [7]. One of the key factors in tissue engineering is the ability to have access to permissive biomaterials for optimal cell viability and function [8]. For instance, porous substrates and biodegradable materials are used to generate scaffolds and facilitate cell adhesion and proliferation [9,10]. Scaffolds based on biodegradable polymers (polylactic acid, polycaprolactone, collagen) or bioresorbable

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