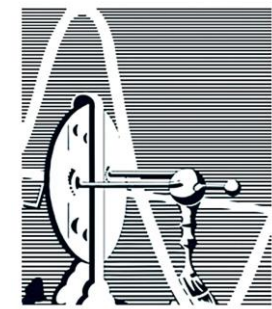




UFRJ



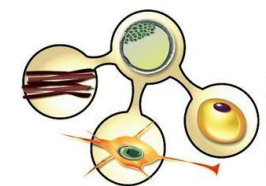
**IBCCF**

Instituto de Biofísica  
Carlos Chagas Filho

# Facing health challenges with science and technology

Antonio Carlos Campos de Carvalho

[acarlos@biof.ufrj.br](mailto:acarlos@biof.ufrj.br)



**INCT - Regenera**

Instituto Nacional  
de Ciência e Tecnologia  
em Medicina Regenerativa

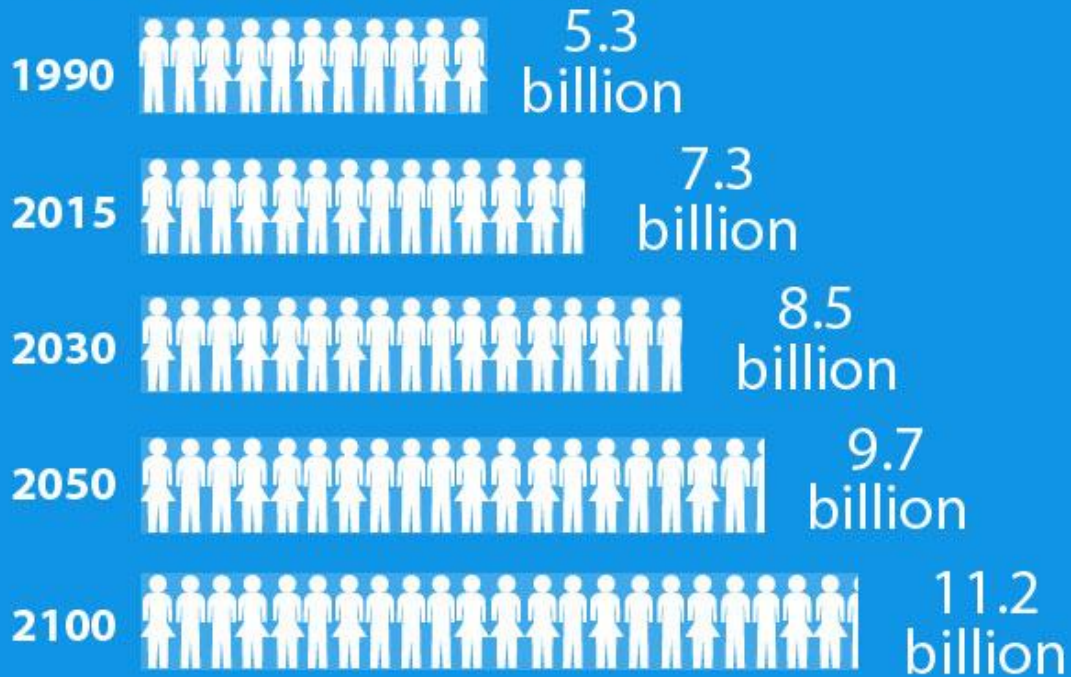


**RNTC**  
Rede Nacional de Terapia Celular

# STATING THE PROBLEM

## World Population

Projected world population until 2100

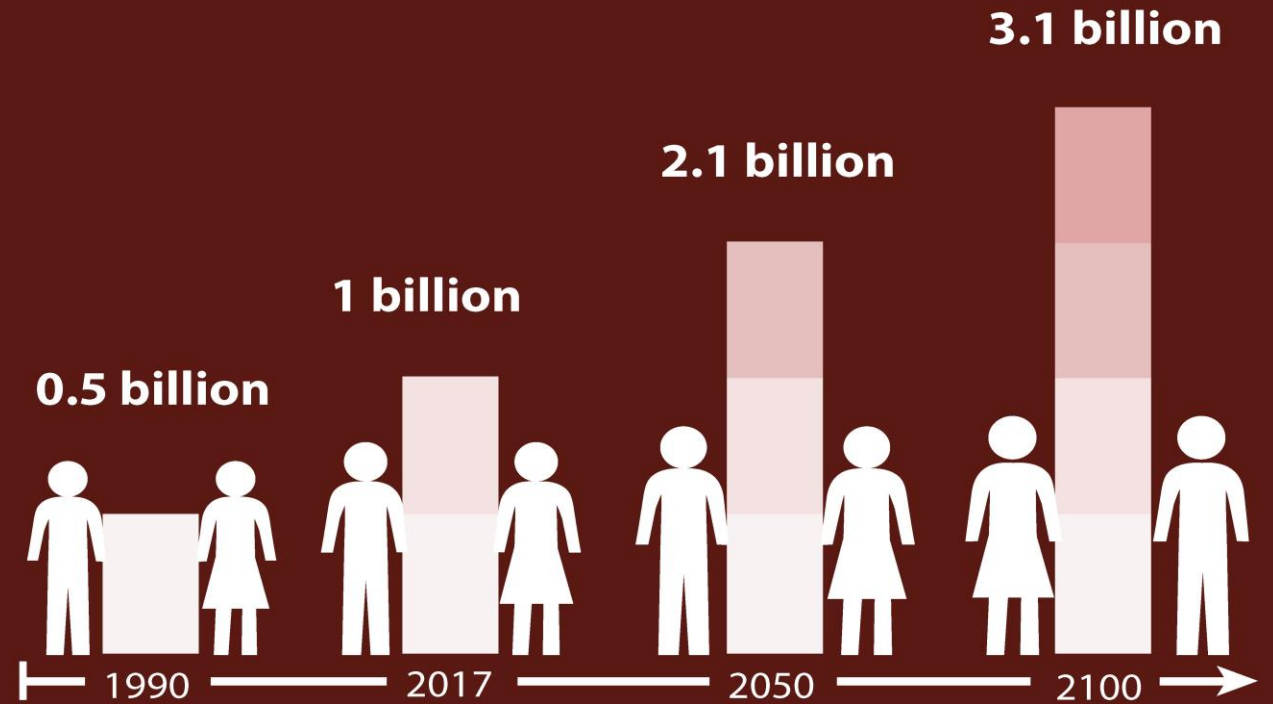


Source: United Nations Department of Economic and Social Affairs, Population Division, *World Population Prospects: The 2015 Revision*  
Produced by: United Nations Department of Public Information



## Ageing Population

Projected global population aged 60 years or over

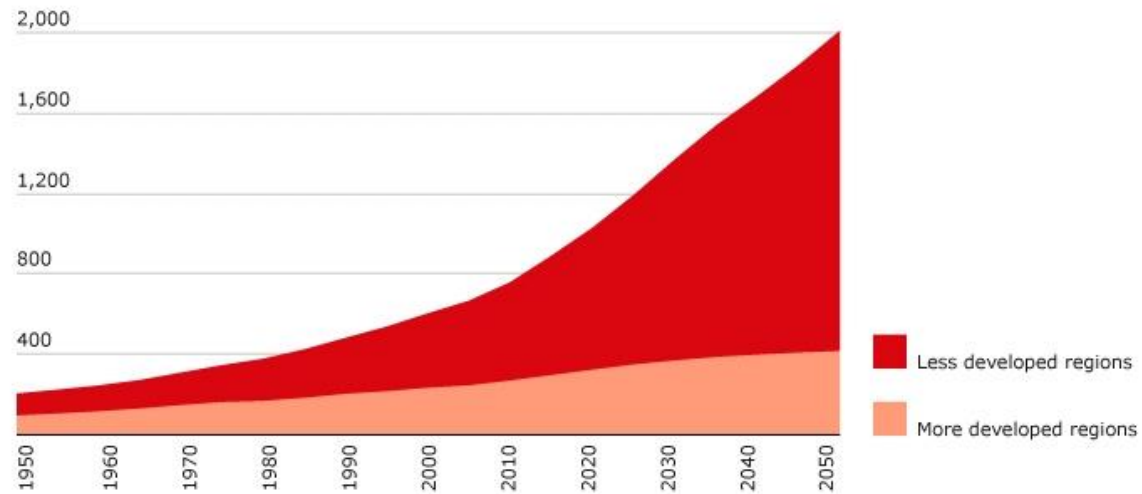


Source: United Nations Department of Economic and Social Affairs, Population Division, *World Population Prospects: The 2017 Revision*  
Produced by: United Nations Department of Public Information



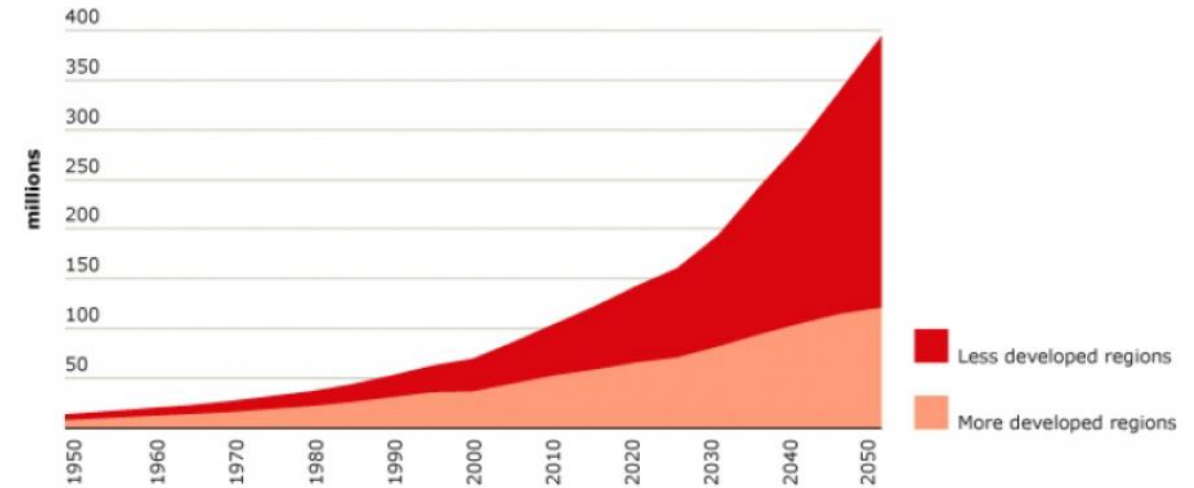
# AGING RATE IS GREATER IN LESS DEVELOPED REGIONS

## 1. Population over 60 by region



Source: World Population Prospects: The 2004 Revision Population Database, UN Department of Economic and Social Affairs  
<http://esa.un.org/unpp/index.asp?panel=2> (23 November 2006)

## 2. Population over 80 by region



Source: Population Division of the Department of Economic and Social Affairs of the United Nations Secretariat, *World Population Prospects: The 2008 Revision*; <http://esa.un.org/unpp>, accessed 13 May 2010

# AGING IN THE WORLD

Ageing and Health

#yearsahead

## Populations are getting older



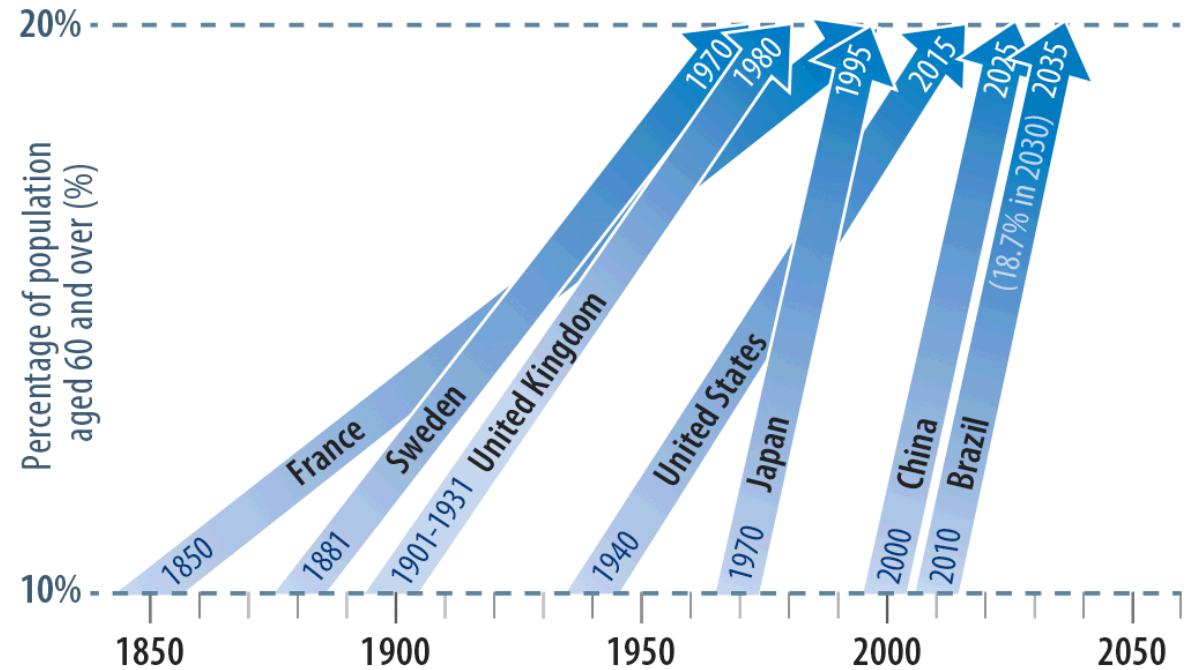
# 2015

Ageing and Health

#yearsahead

## Speed of population ageing

Time for percentage of population **over age 60** to double



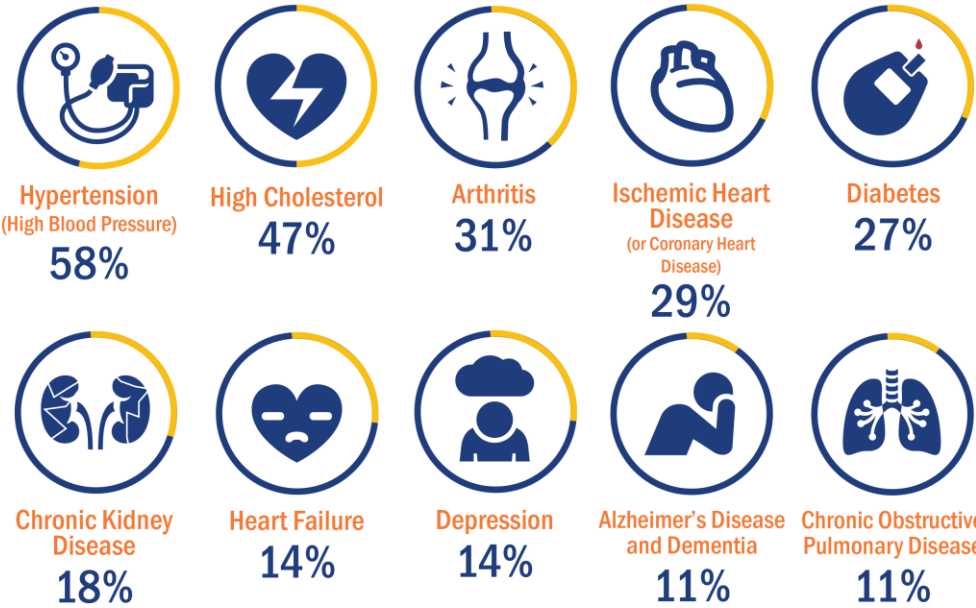
# AGING AND CHRONIC DISEASES

## 10 Common Chronic Conditions for Adults 65+

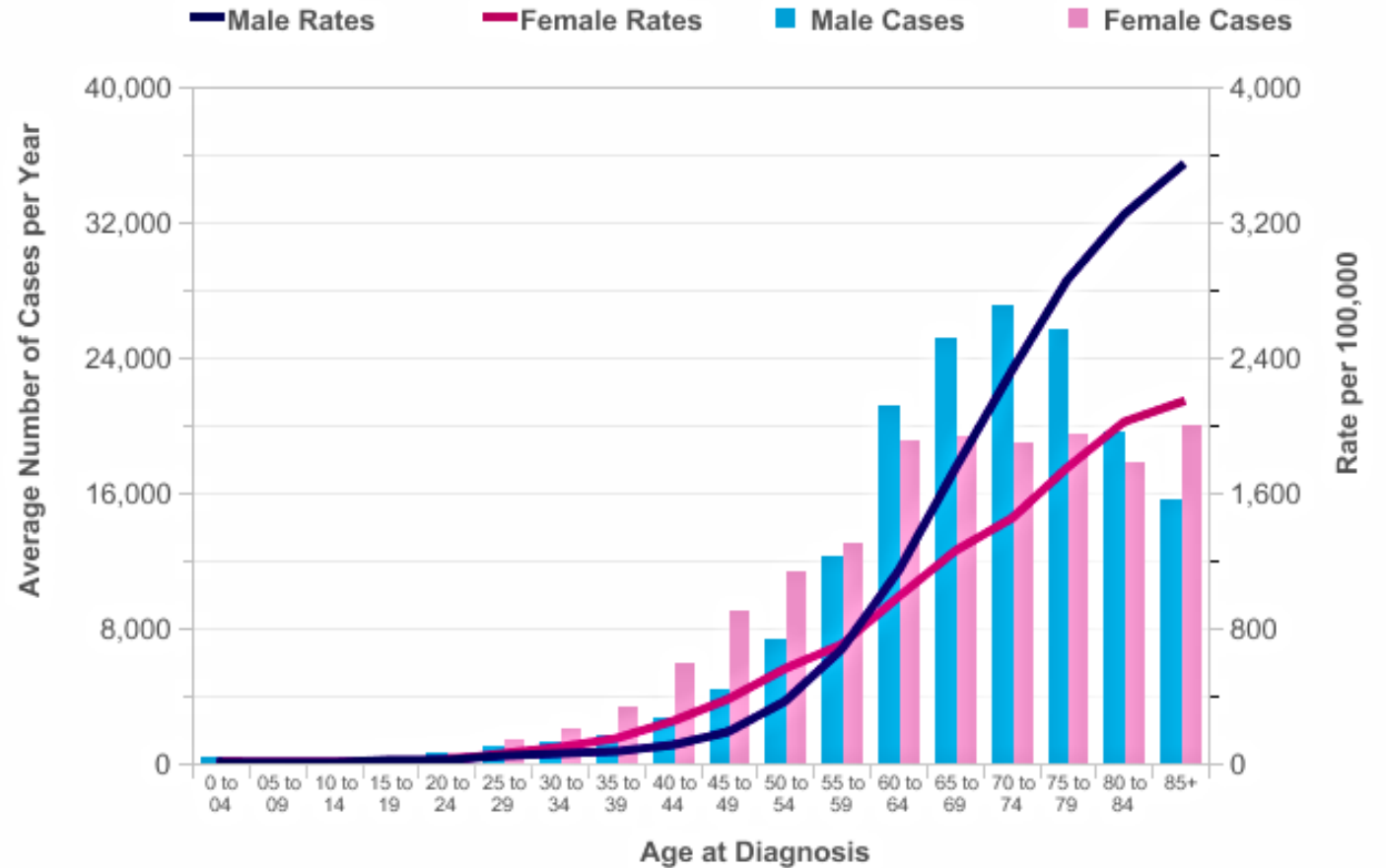
**Quick Facts**

80% have at least 1 chronic condition

68% have 2 or more chronic conditions



Source: Centers for Medicare & Medicaid Services, Chronic Conditions Prevalence State/County Table: All Fee-for-Service Beneficiaries, 2015



## Distribution of **YLL** for ten main causes, by sex in Brazil

Order	Men	%	Women	%
1	Homicide & violence	11,3	Ischemic Heart dis.	10,9
2	Ischemic heart dis.	10,1	Stroke	10,7
3	Transit accident	7,2	Diabetes mellitus	6,3
4	Stroke	7,0	Lung infections	4,9
5	Lung infections	3,9	Breast cancer	3,5
6	Diabetes mellitus	3,3	Hypertension	3,2
7	Cirrhosis – alcohol & other	3,1	COPD	2,7
8	COPD	2,3	Transit accident	2,4
9	HIV/AIDS	2,2	Uterine cancer	2,3
10	Hypertension	2,1	Lung cancer	1,9

## Distribution of YLD for ten main causes, by sex in Brazil

Order	Men	%	Women	%
1	Alcohol abuse & dep.	9,6	Depression	22,3
2	Depression	8,3	Bipolar disease	4,9
3	Bipolar disease	6,4	Alzheimer & other dementias	4,7
4	Diabetes mellitus	6,0	Diabetes mellitus	4,2
5	COPD	5,1	COPD	4,0
6	Asthma	3,6	Asthma	3,5
7	Ischemic heart dis.	3,1	Ischemic heart dis.	3,4
8	Alzheimer & other dementias	2,7	Osteoarthritis	2,6
9	Schizophrenia	2,2	Alcohol abuse & dep.	1,7
10	Epilepsy	2,1	Anemia by iron deficiency	1,7

# WHY DO WE NEED MORE SCIENCE AND TECHNOLOGY IN THE HEALTH SECTOR?

## IMPRECISION MEDICINE

For every person they do help (blue), the ten highest-grossing drugs in the United States fail to improve the conditions of between 3 and 24 people (red).

**1. ABILIFY (aripiprazole)**  
Schizophrenia



**2. NEXIUM (esomeprazole)**  
Heartburn



**3. HUMIRA (adalimumab)**  
Arthritis



**4. CRESTOR (rosuvastatin)**  
High cholesterol



**5. CYMBALTA (duloxetine)**  
Depression



**6. ADVAIR DISKUS (fluticasone propionate)**  
Asthma



**7. ENBREL (etanercept)**  
Psoriasis



**8. REMICADE (infliximab)**  
Crohn's disease



**9. COPAXONE (glatiramer acetate)**  
Multiple sclerosis



**10. NEULASTA (pegfilgrastim)**  
Neutropenia



Based on published number needed to treat (NNT) figures. For a full list of references, see Supplementary Information at [go.nature.com/4dr78f](https://go.nature.com/4dr78f).

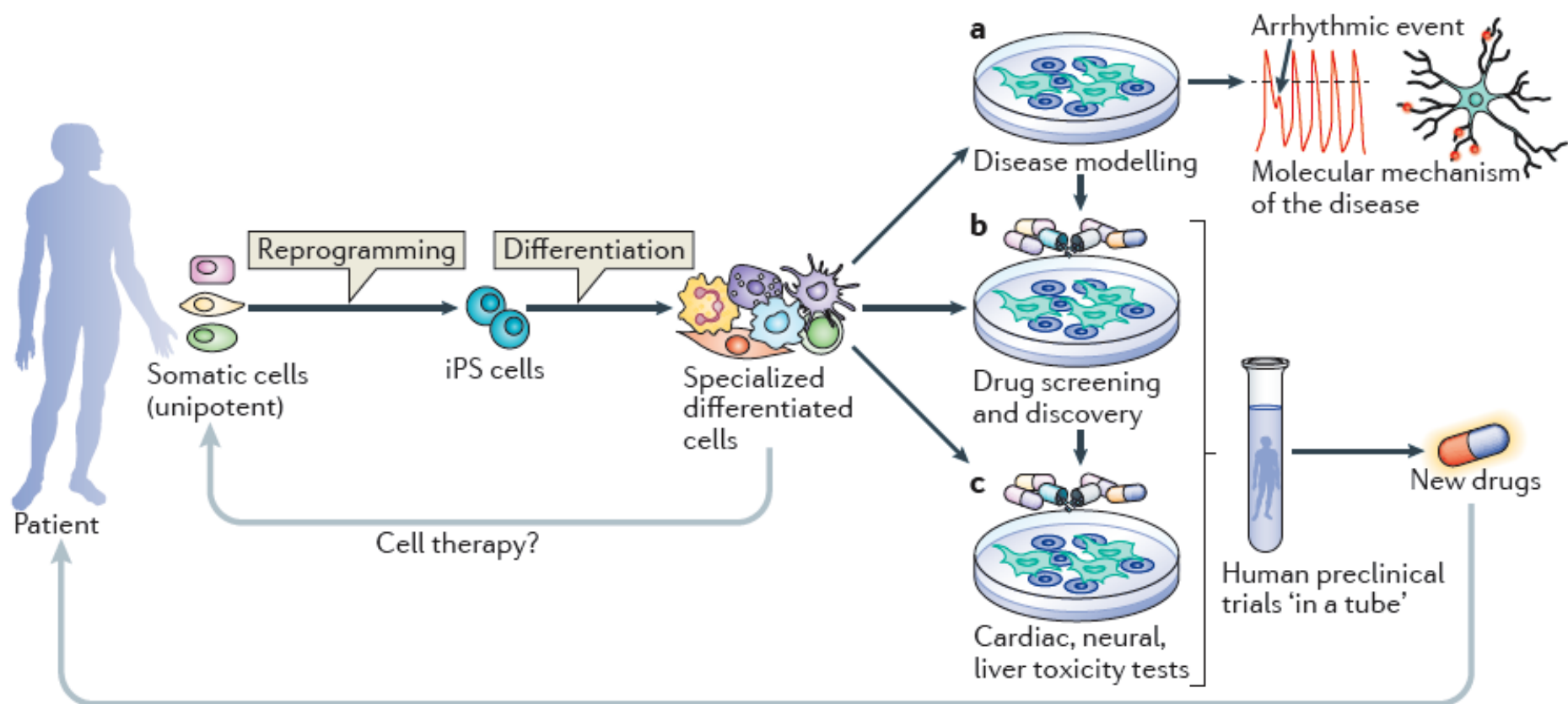
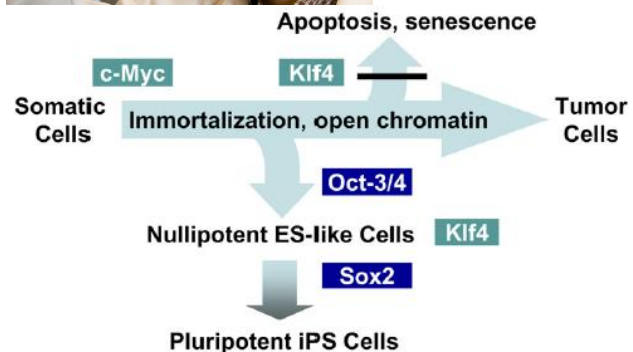
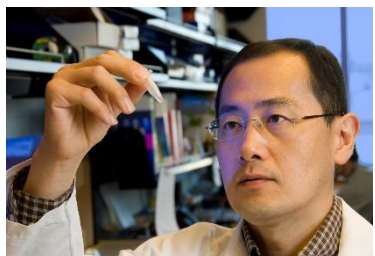


# **HOW CAN WE IMPROVE THIS SCENARIO?**

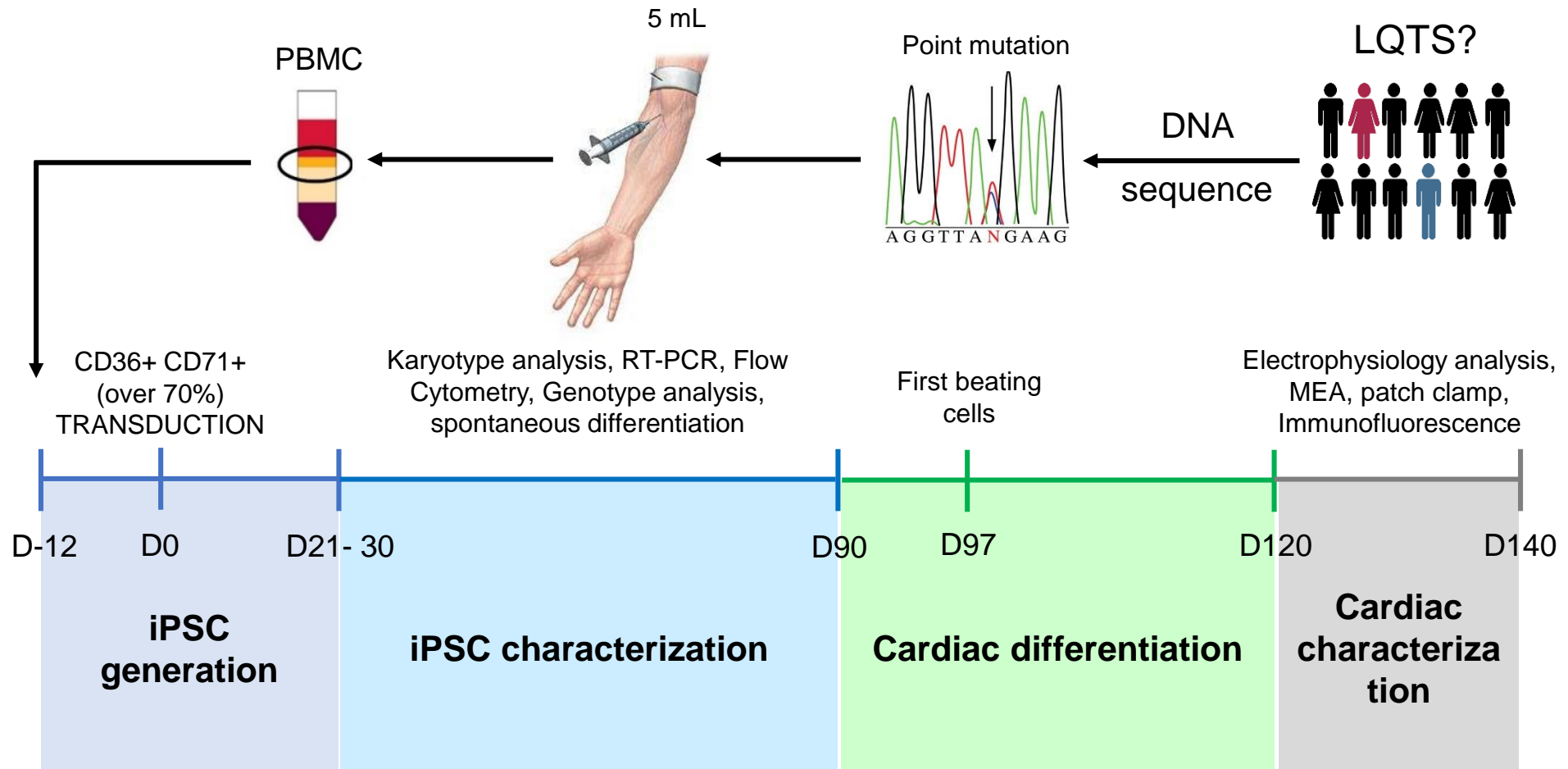
- **WE NEED BETTER DISEASE MODELS**
- **WE NEED TO IMPROVE DRUG SCREENING**
- **WE NEED AFFORDABLE PERSONALISED MEDICINE**
- **WE NEED NEW THERAPIES FOR INCURABLE DISEASES**

**IS THIS ACHIEVABLE?**

# INDUCIBLE PLURIPOTENT STEM CELLS - iPS

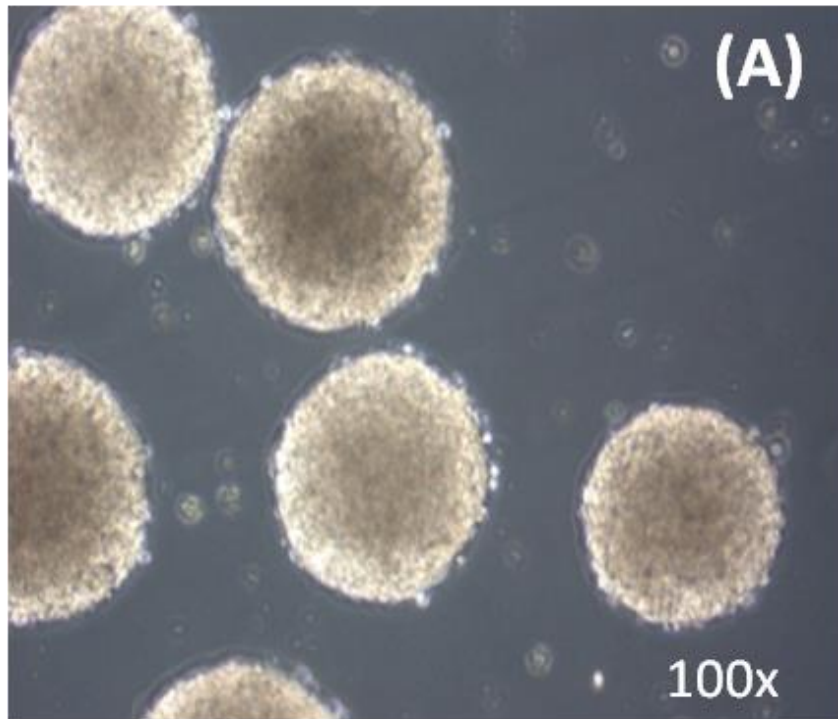


# USING iPS FOR DISEASE MODELLING

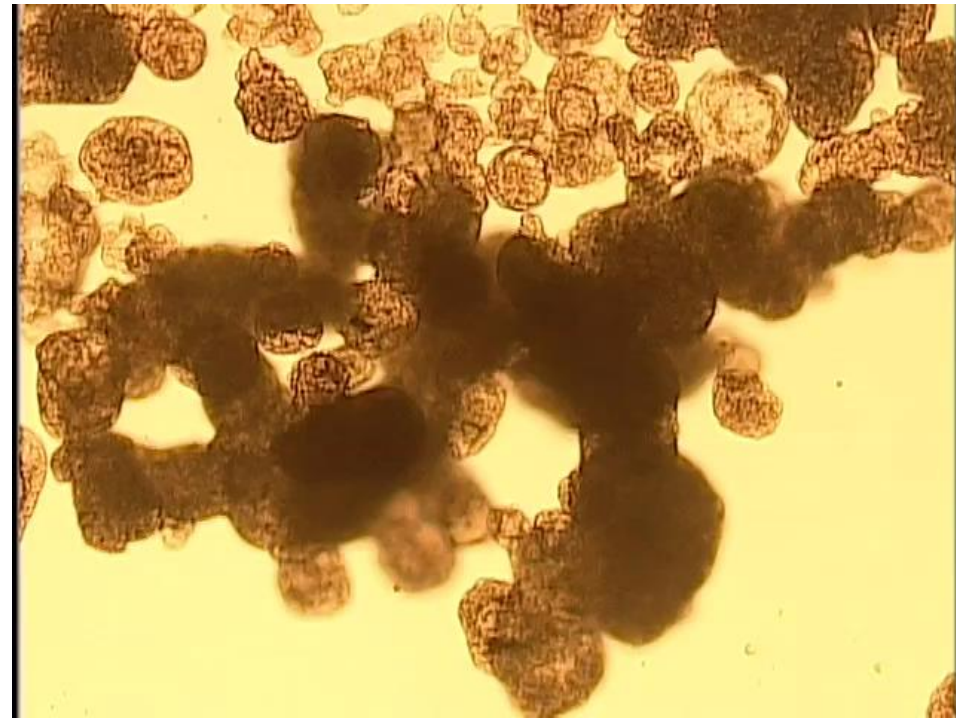


# Embryoid Bodies (EB)

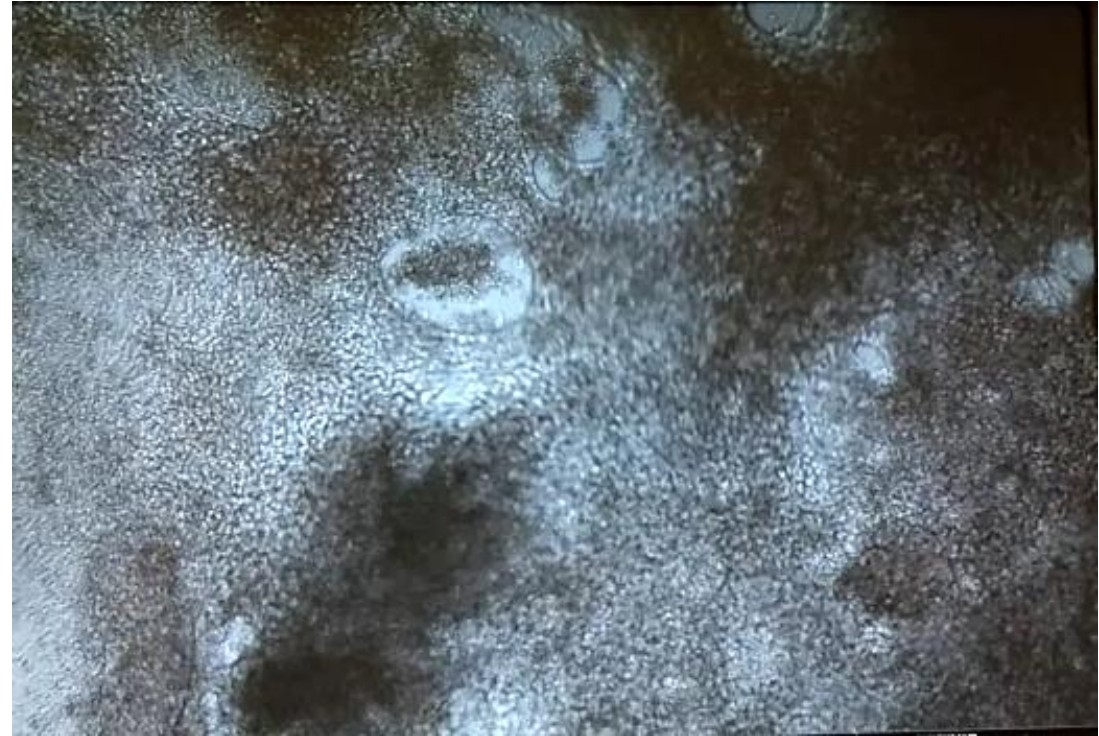
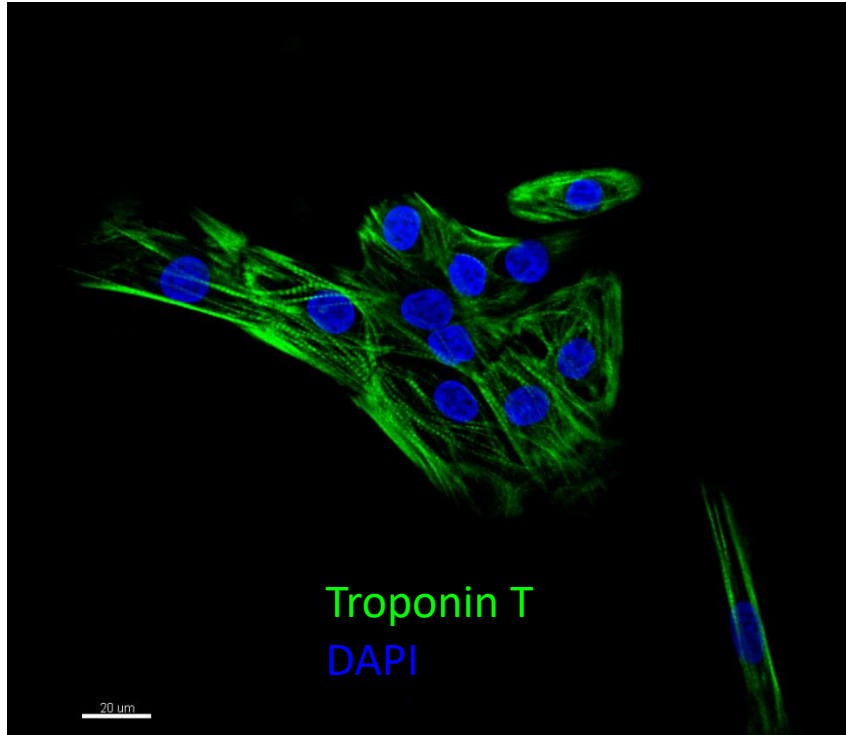
EB 2 days in suspension



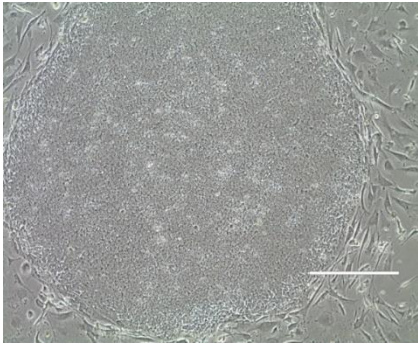
EB post differentiation



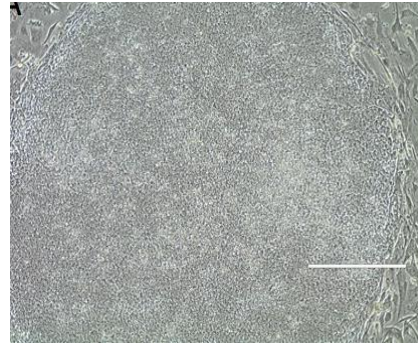
# iPS DERIVED CARDIOMYOCYTES



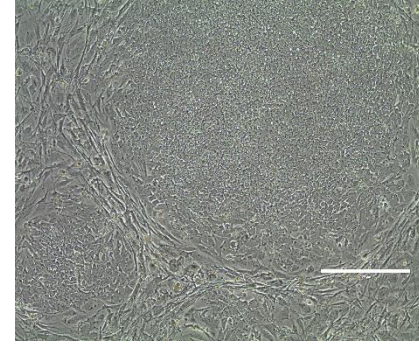
**CONTROL (iBM1.2)**



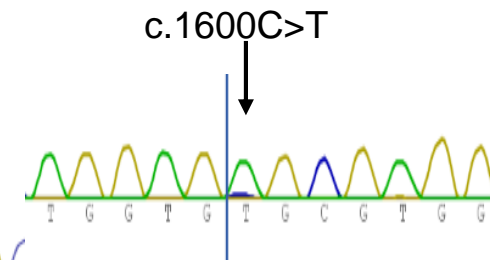
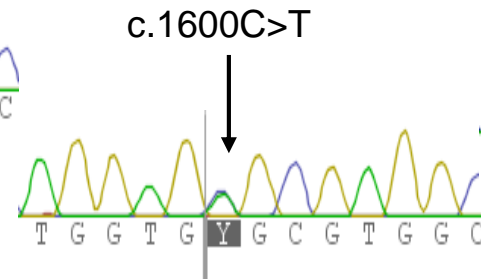
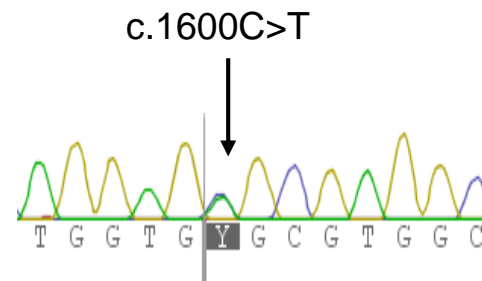
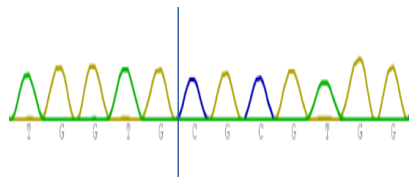
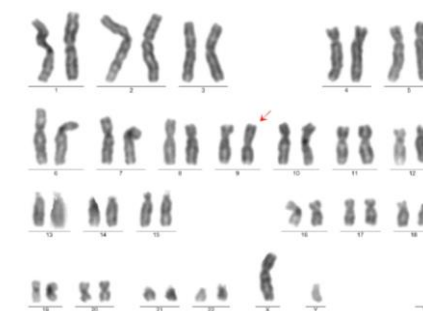
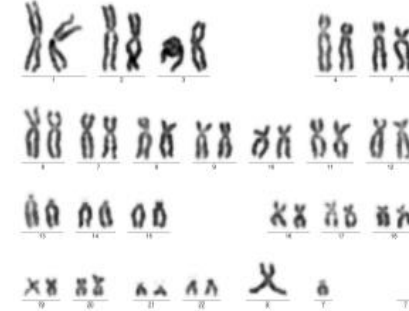
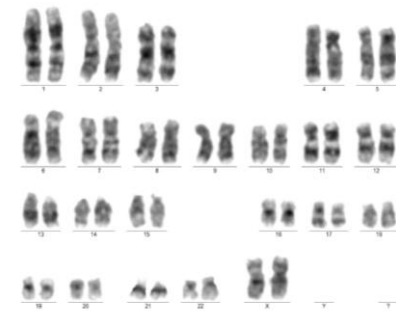
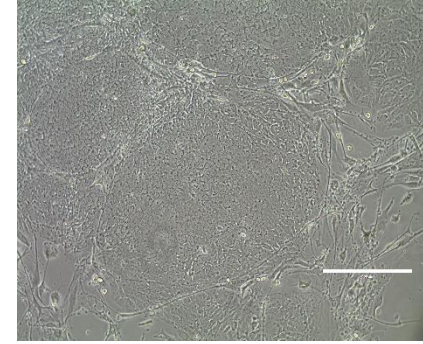
**PAC1 CI9**



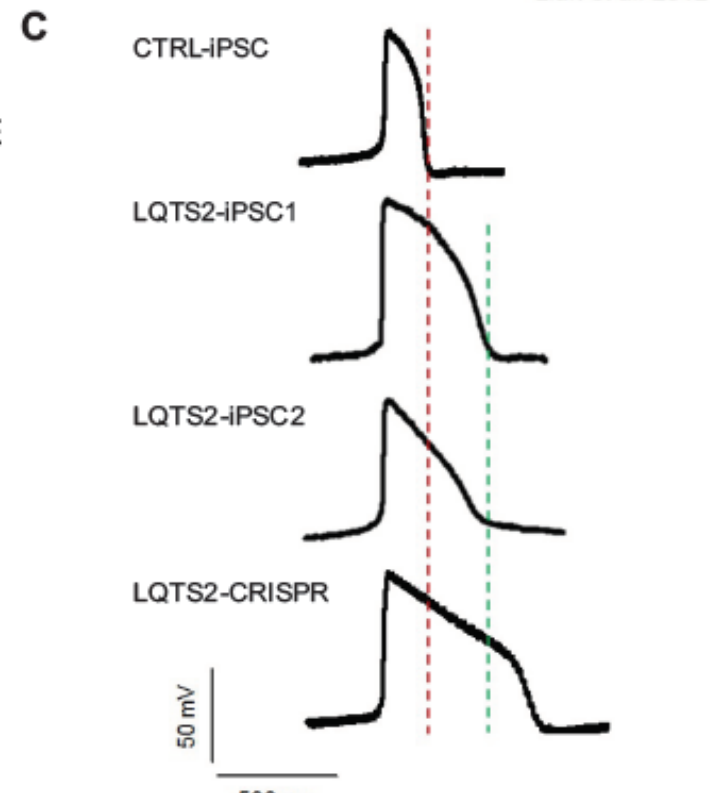
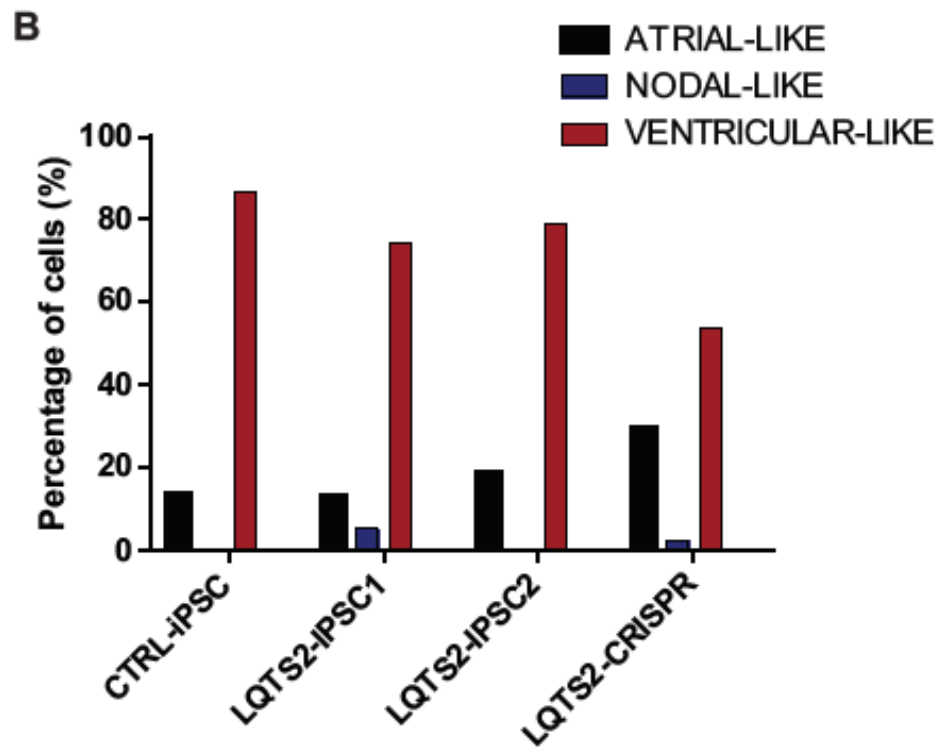
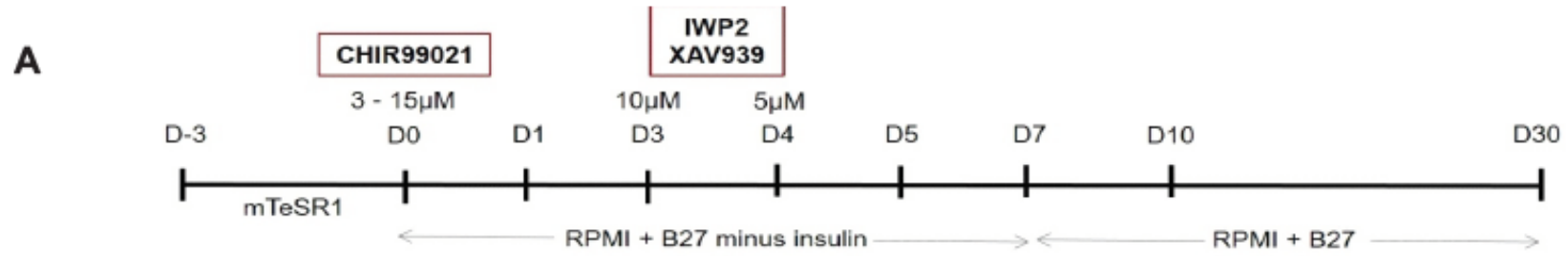
**PAC2 CI11**



**iBM\_CRISPR\_CI12**

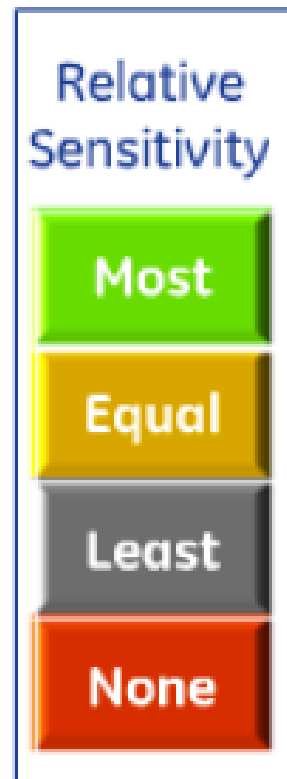


# ACTION POTENTIAL DURATION AFTER DIFFERENTIATION



# BETTER DRUG SCREENING

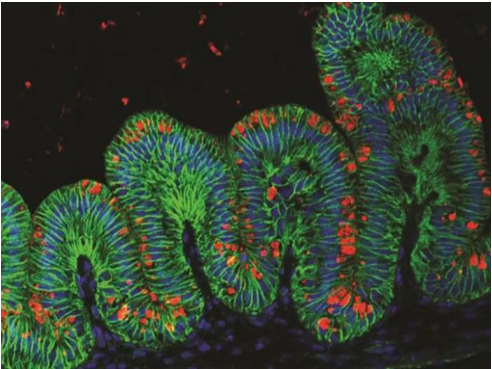
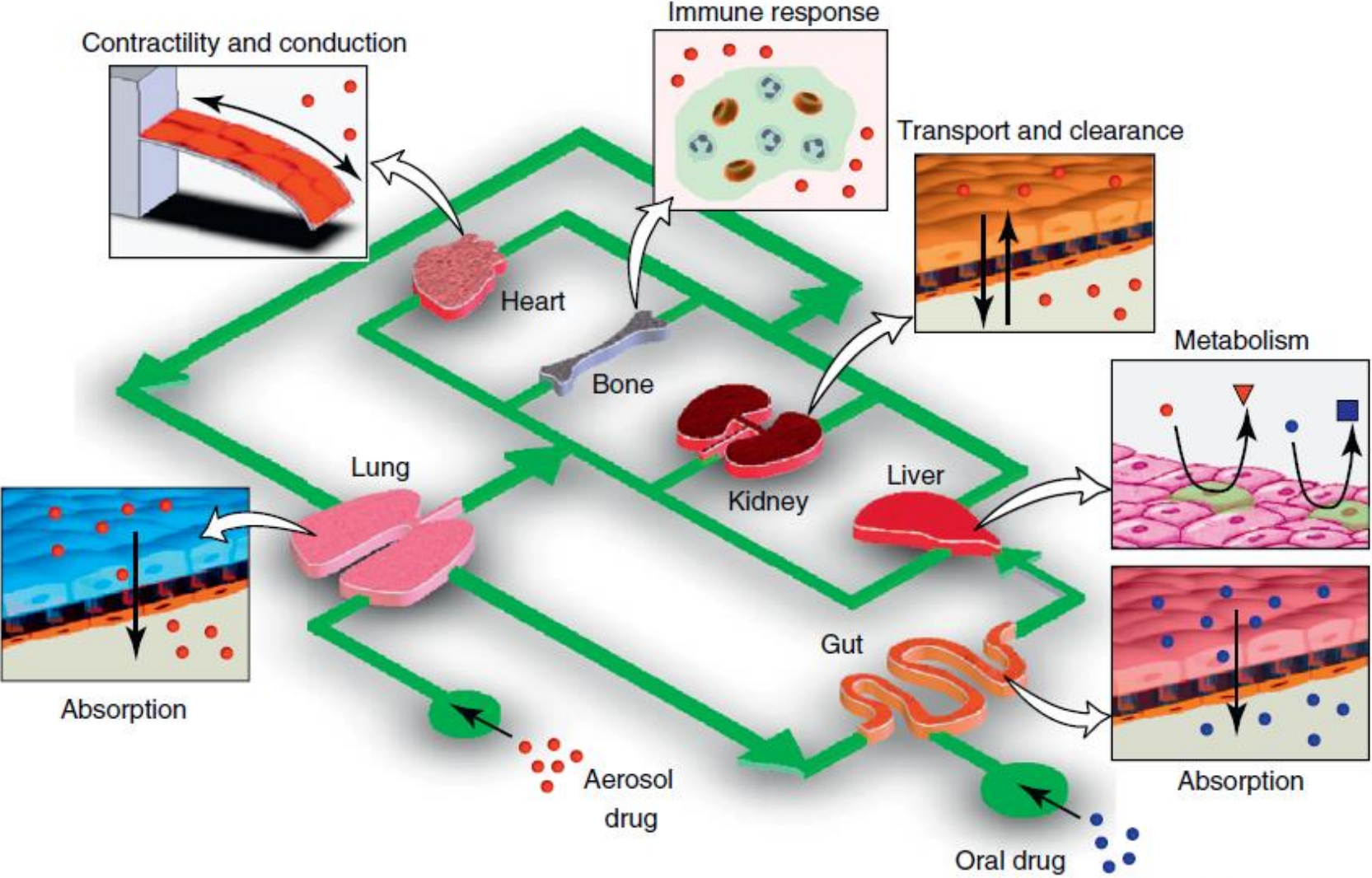
Compound	RABBIT Purkinje Fibre	CANINE Purkinje Fibre	HUMAN hESC-VM
Terfenadine	1.0 $\mu$ M ⊕	False ⊖	0.03 $\mu$ M ⊕
Quinidine	1.0 $\mu$ M ⊕	1.0 $\mu$ M ⊕	0.3 $\mu$ M ⊕
Cisapride	0.1 $\mu$ M ⊕	0.1 $\mu$ M ⊕	0.01 $\mu$ M ⊕
Sotalol	10 $\mu$ M ⊕	100 $\mu$ M ⊕	10 $\mu$ M ⊕
Chromanol 293B	False ⊖	False ⊖	300 $\mu$ M ⊕
E-4031	N/A	0.1 $\mu$ M ⊕	0.1 $\mu$ M ⊕
Nifedipine	N/A	>10 $\mu$ M ⊕	0.03 $\mu$ M ⊕



⊕ Change in APD<sub>90</sub> >10%



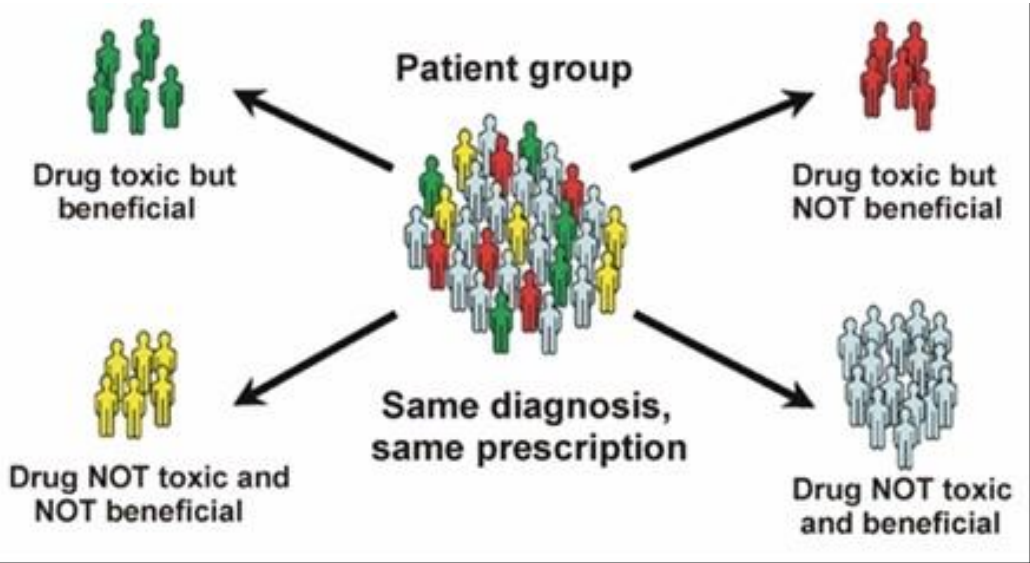
# BETTER DRUG SCREENING



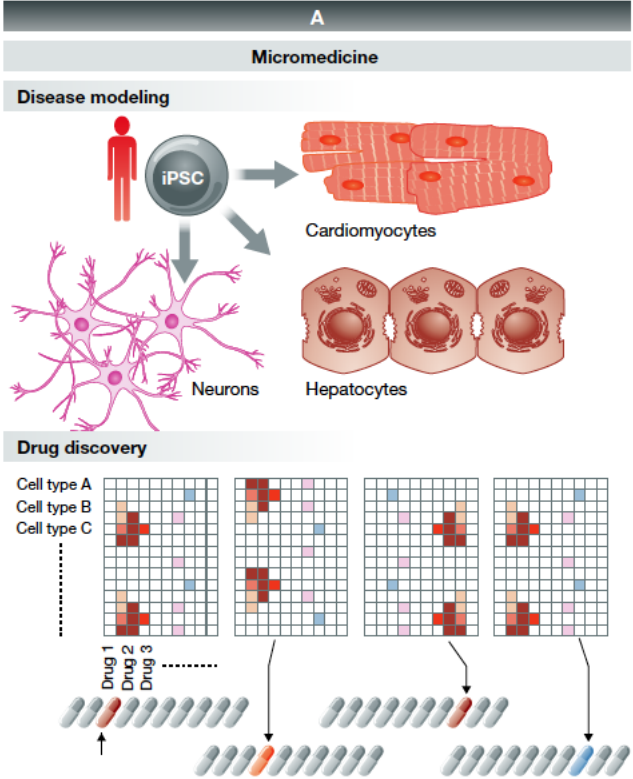
INTESTINAL  
ORGANOID

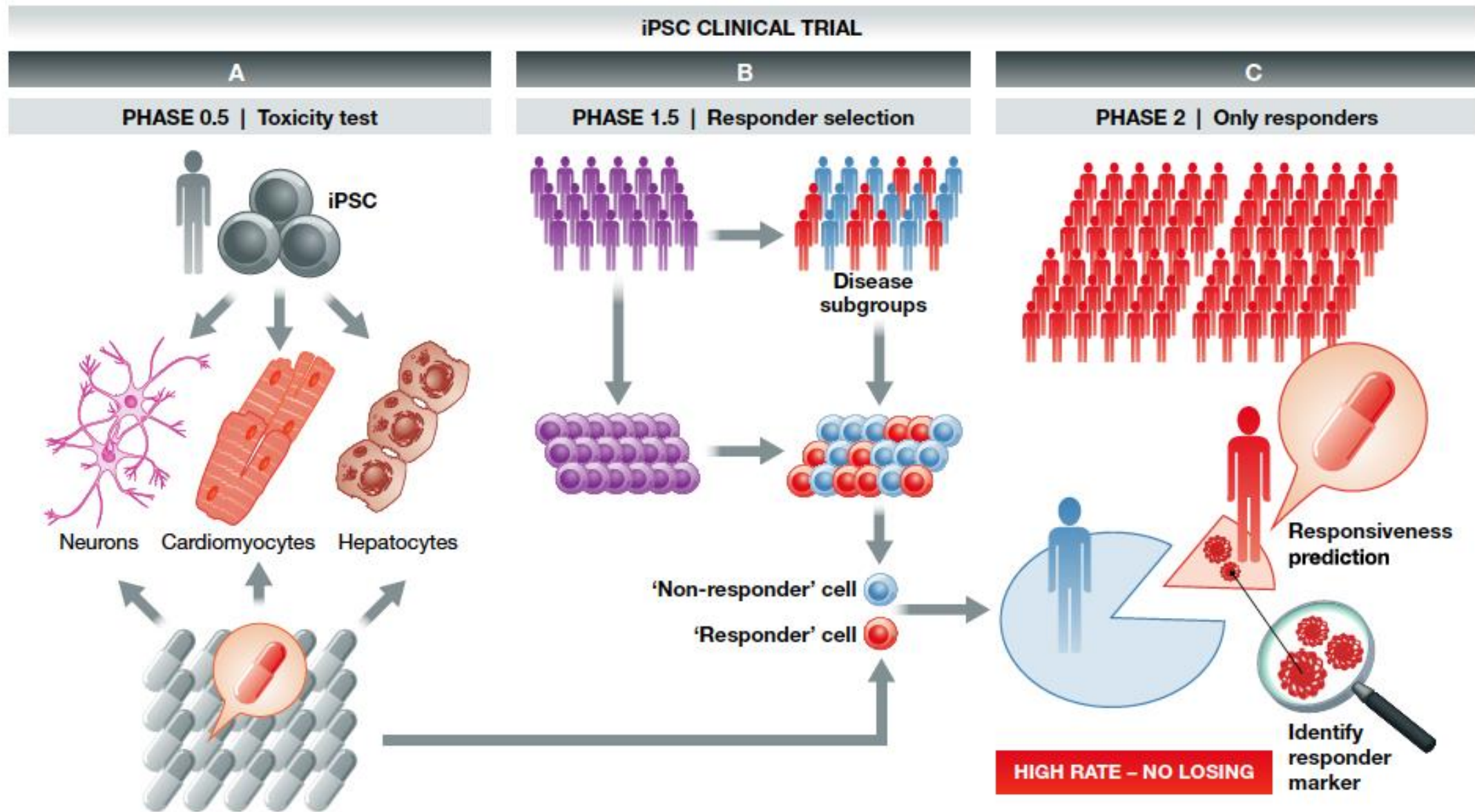
# PERSONALISED MEDICINE

## THE OLD MODEL



## THE NEW MODEL





# CELL THERAPIES FOR INCURABLE DISEASES

The NEW ENGLAND JOURNAL of MEDICINE

BRIEF REPORT

## Autologous Induced Stem-Cell-Derived Retinal Cells for Macular Degeneration

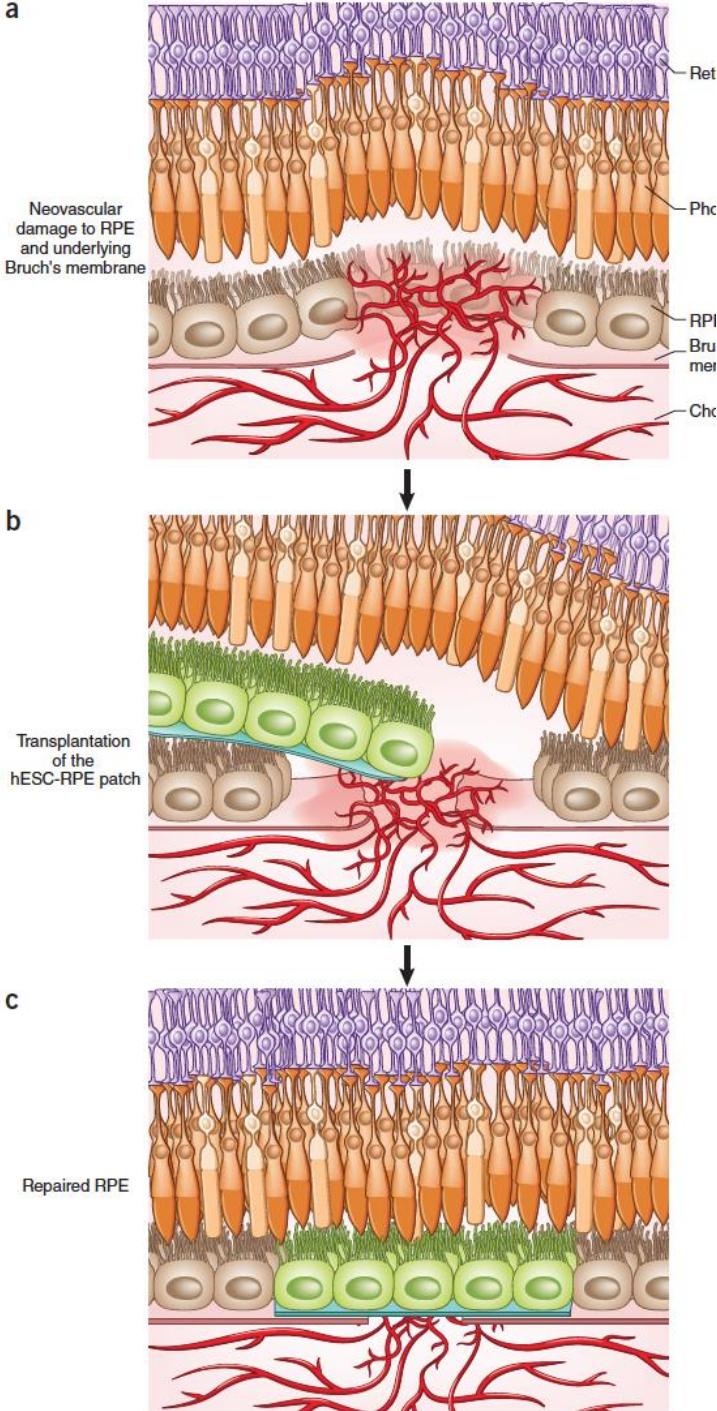
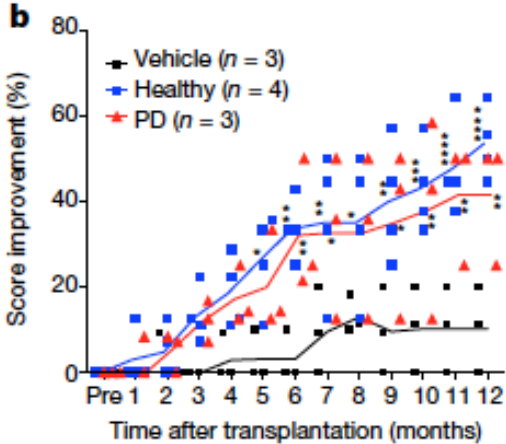
n engl j med 376;11 nejm.org March 16, 2017

## Human iPS cell-derived dopaminergic neurons function in a primate Parkinson's disease model

Tetsuhiro Kikuchi<sup>1</sup>, Asuka Morizane<sup>1</sup>, Daisuke Doi<sup>1</sup>, Hiroaki Magotani<sup>1</sup>, Hiroataka Onoe<sup>2</sup>, Takuya Hayashi<sup>2</sup>, Hiroshi Mizuma<sup>2</sup>, Sayuki Takara<sup>2</sup>, Ryosuke Takahashi<sup>3</sup>, Haruhisa Inoue<sup>4</sup>, Satoshi Morita<sup>5</sup>, Michio Yamamoto<sup>5</sup>, Keisuke Okita<sup>6</sup>, Masato Nakagawa<sup>6</sup>, Malin Parmar<sup>7</sup> & Jun Takahashi<sup>1,8</sup>

592 | NATURE | VOL 548 | 31 AUGUST 2017

Clinical trial to start in 2019 in Japan



# GENE THERAPIES FOR INCURABLE DISEASES

The NEW ENGLAND JOURNAL of MEDICINE

BRIEF REPORT

## Gene Therapy in a Patient with Sickle Cell Disease

N ENGL J MED 376:9 NEJM.ORG MARCH 2, 2017

The NEW ENGLAND JOURNAL of MEDICINE

ESTABLISHED IN 1812

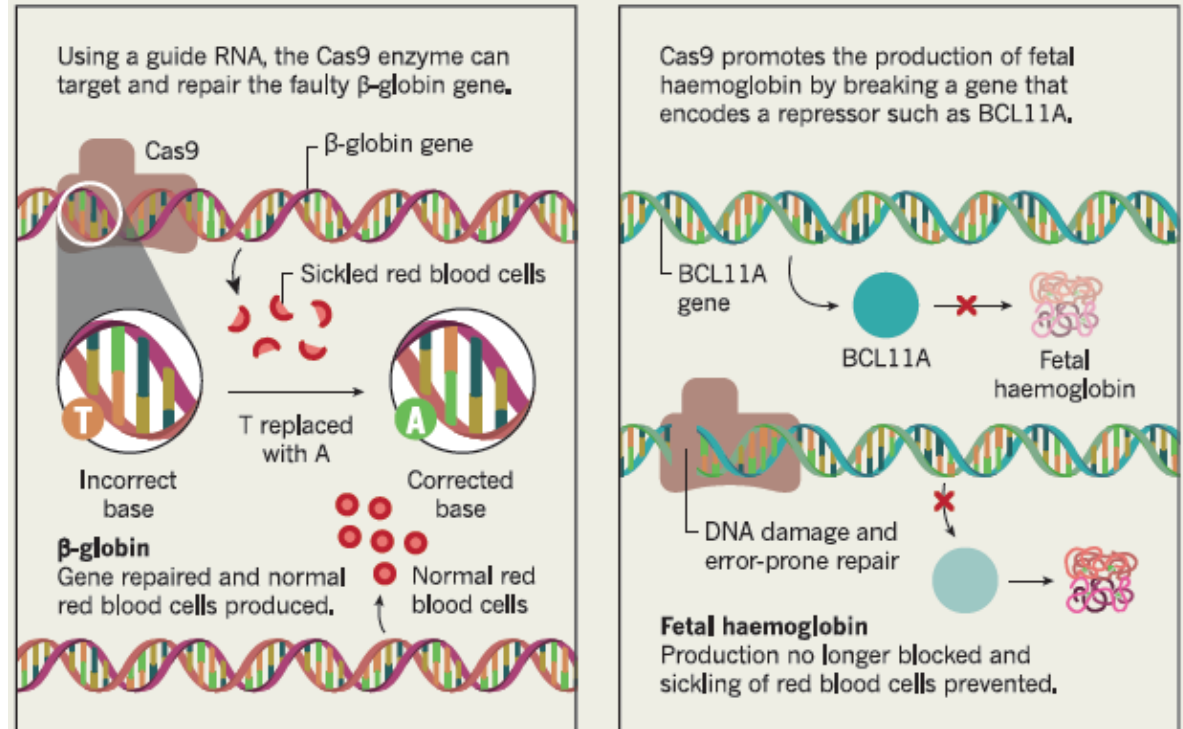
APRIL 19, 2018

VOL. 378 NO. 16

Gene Therapy in Patients with Transfusion-Dependent  $\beta$ -Thalassemia

### GENE EDITING WITH CRISPR

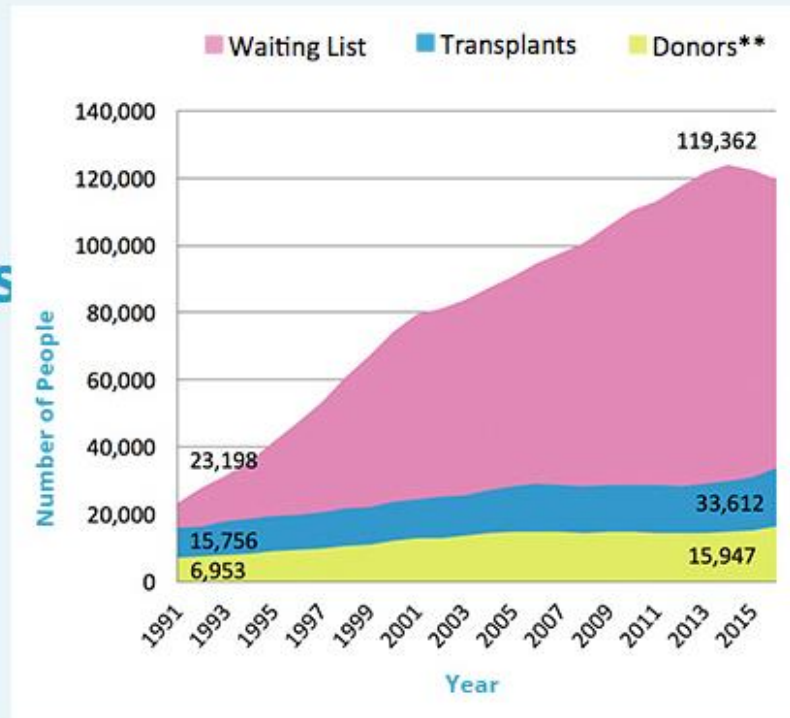
CRISPR-Cas9 gene editing is helping to tackle sickle-cell disease in two ways.



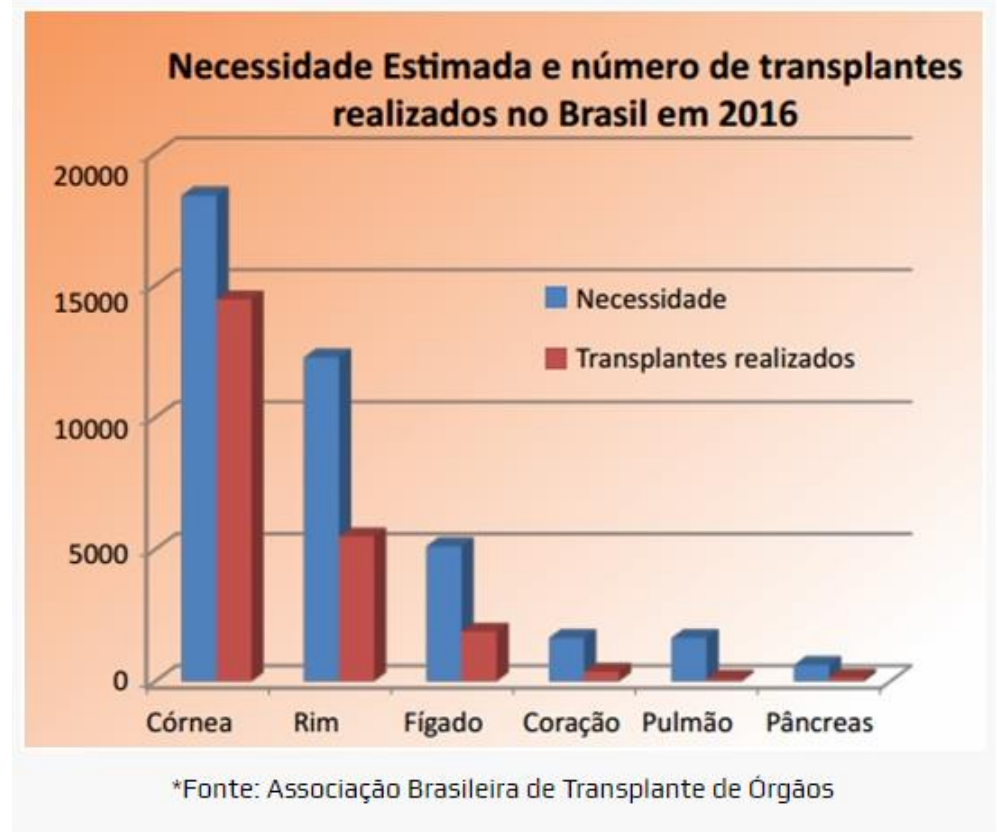
# HOW TO DEAL WITH THE SHORTAGE OF ORGAN TRANSPLANTS

## the organ shortage continues

Each year, the number of people on the waiting list continues to be much larger than both the number of donors and transplants, which grow slowly.



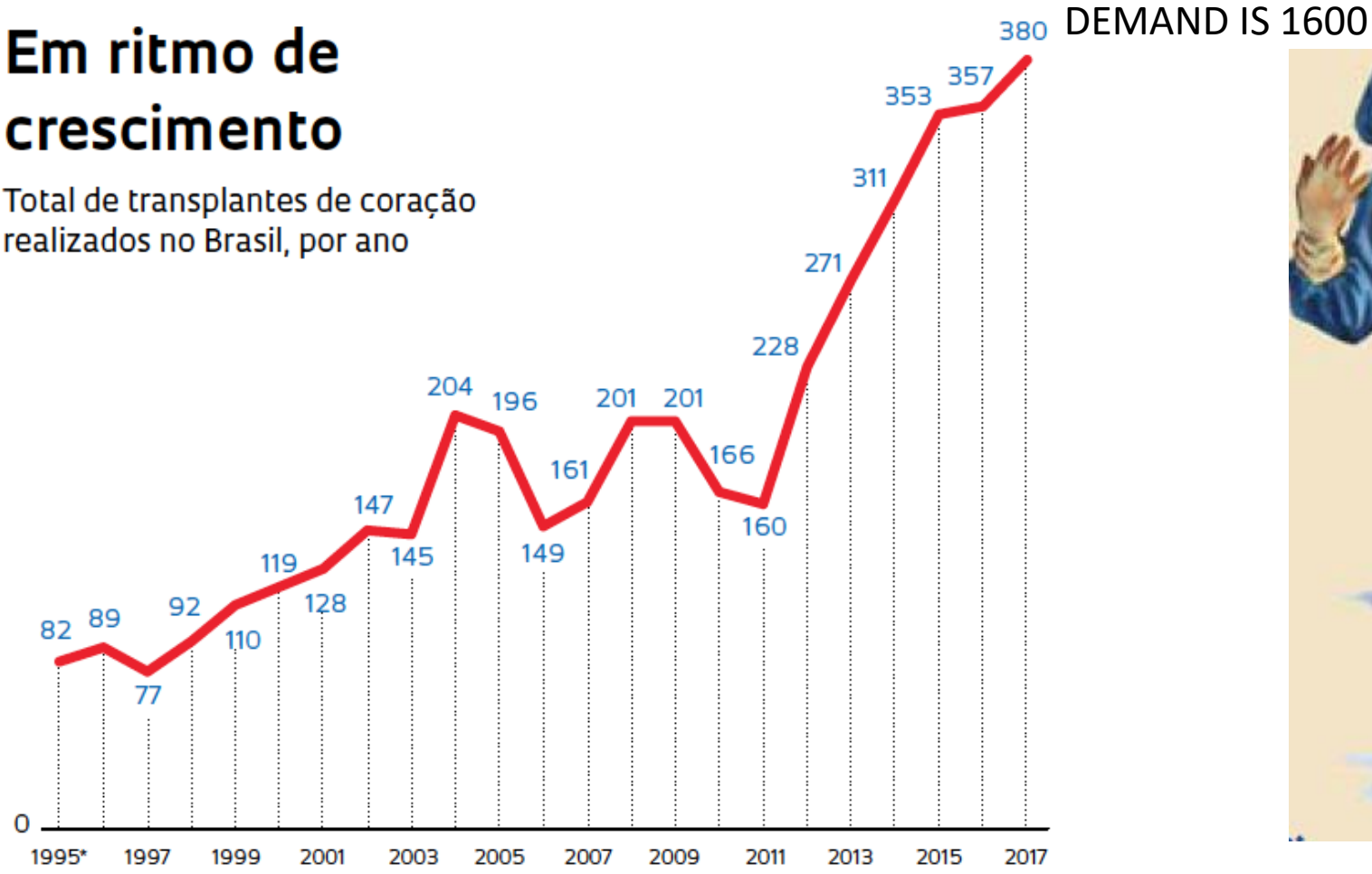
Data from [optn.transplant.hrsa.gov](http://optn.transplant.hrsa.gov) and OPTN/SRTR Annual Report. OPTN has current, in-depth statistics. [Click to view.](#)



# HEART TRANSPLANTS IN BRAZIL

## Em ritmo de crescimento

Total de transplantes de coração realizados no Brasil, por ano



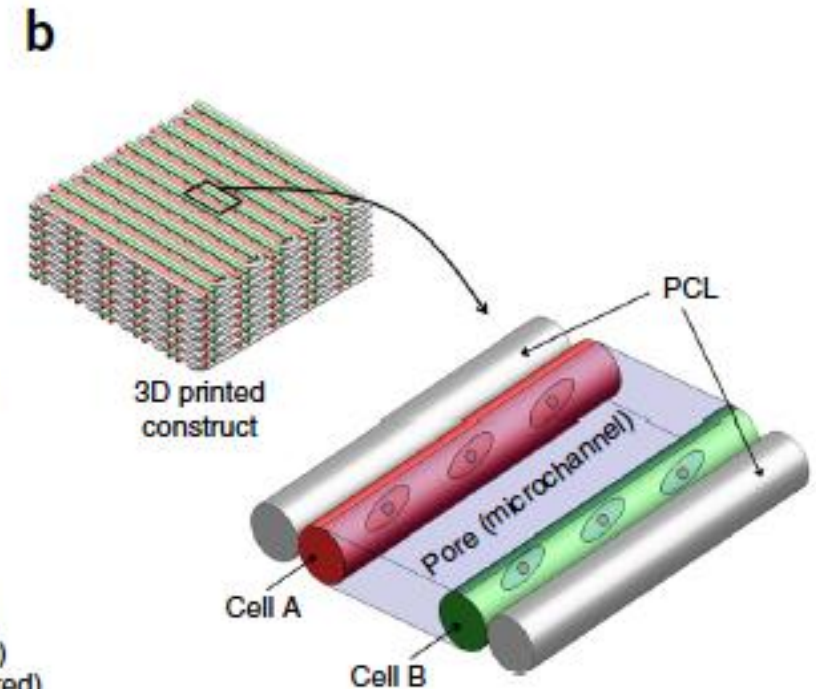
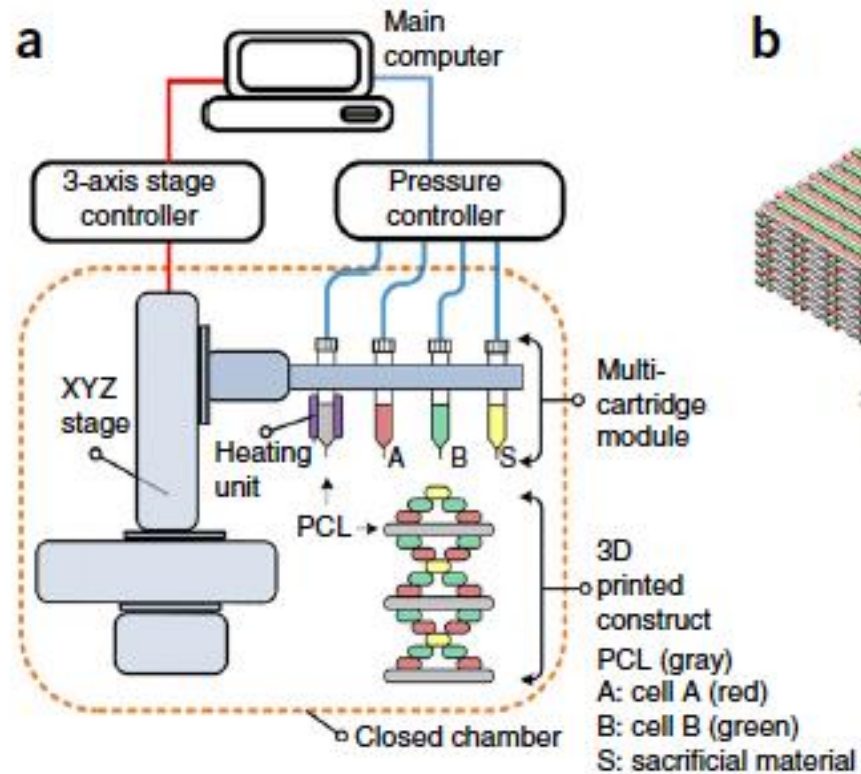
\* Primeiro ano dos registros anuais de transplantes da ABTO

FONTE ABTO



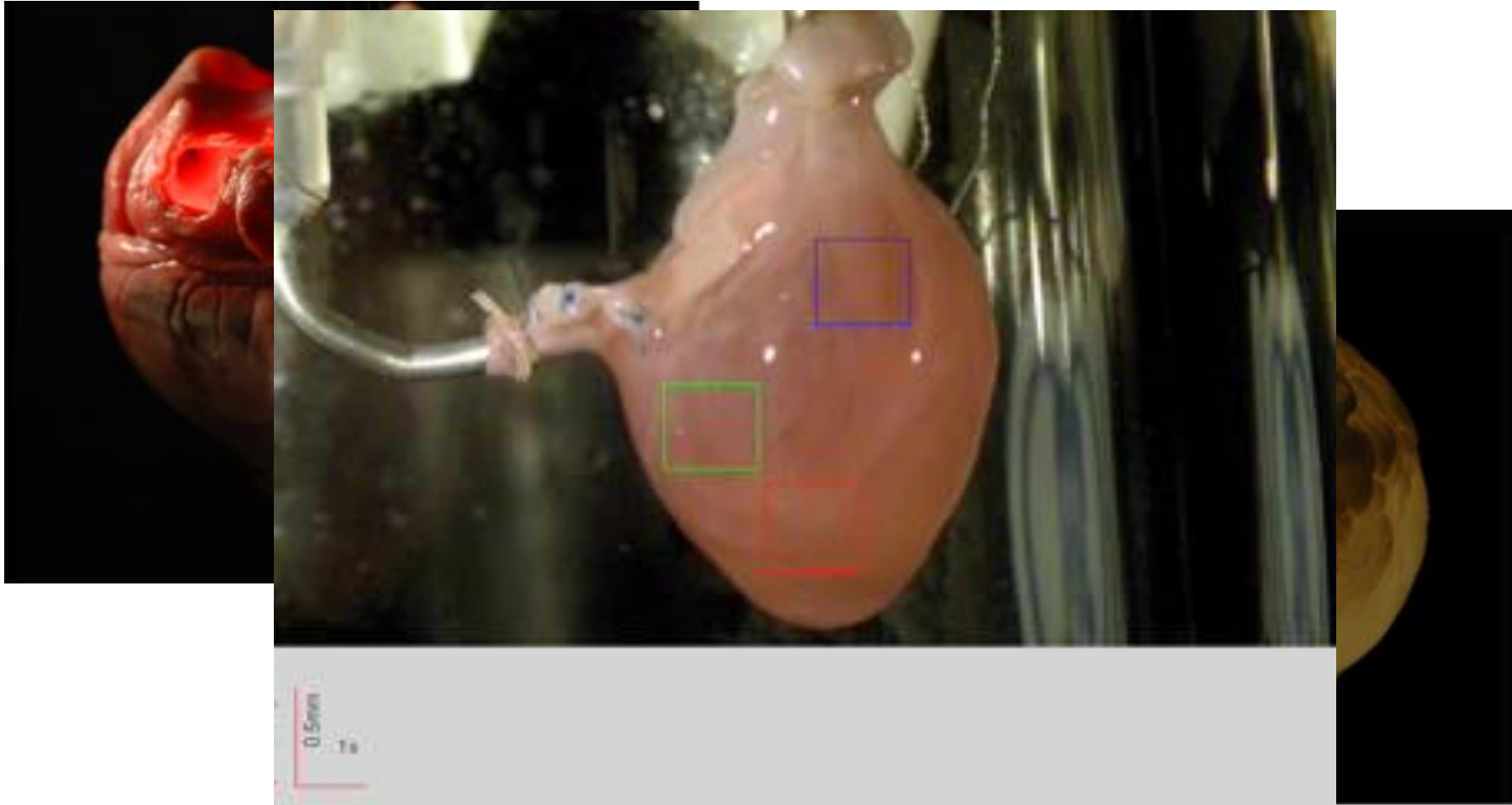
# BIOENGINEERING ORGANS AND TISSUES

## 3D PRINTING





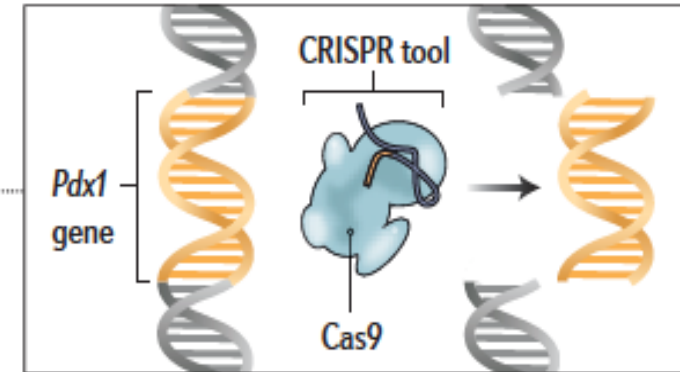
# BIOENGINEERING ORGANS AND TISSUES



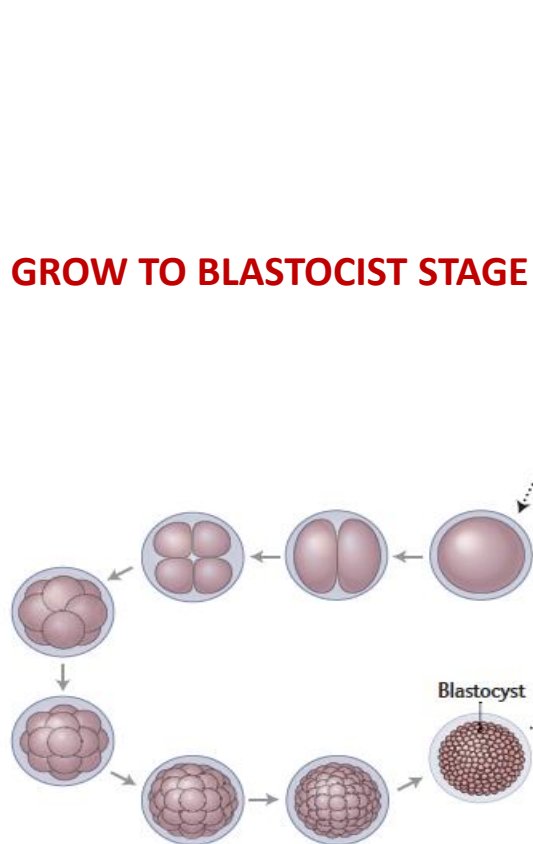
# USING BIOREACTOR-ANIMALS AS A SOURCE

## 1. GENE EDIT THE EMBRYO

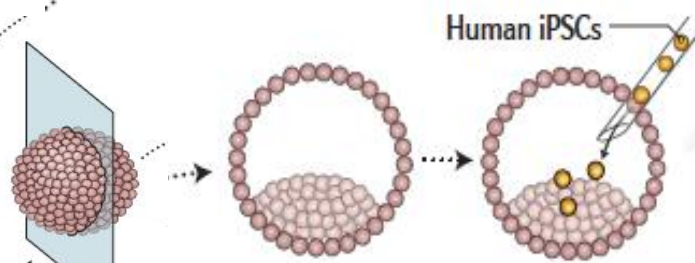
Delete Pdx1



## 2. GROW TO BLASTOCYST STAGE



## 3. INJECT HUMAN iPS

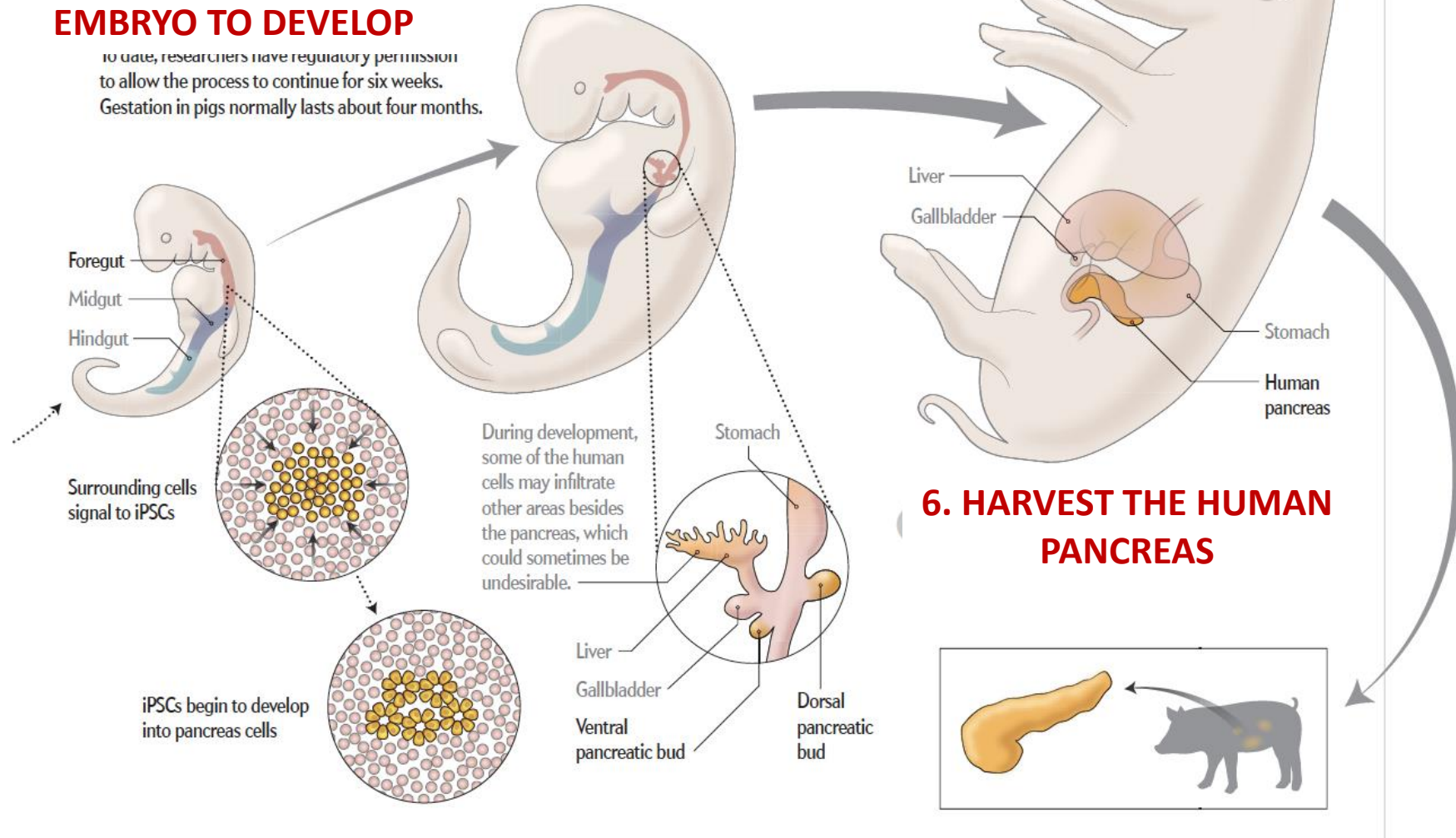


## 4. IMPLANT THE CHIMERIC EMBRYO



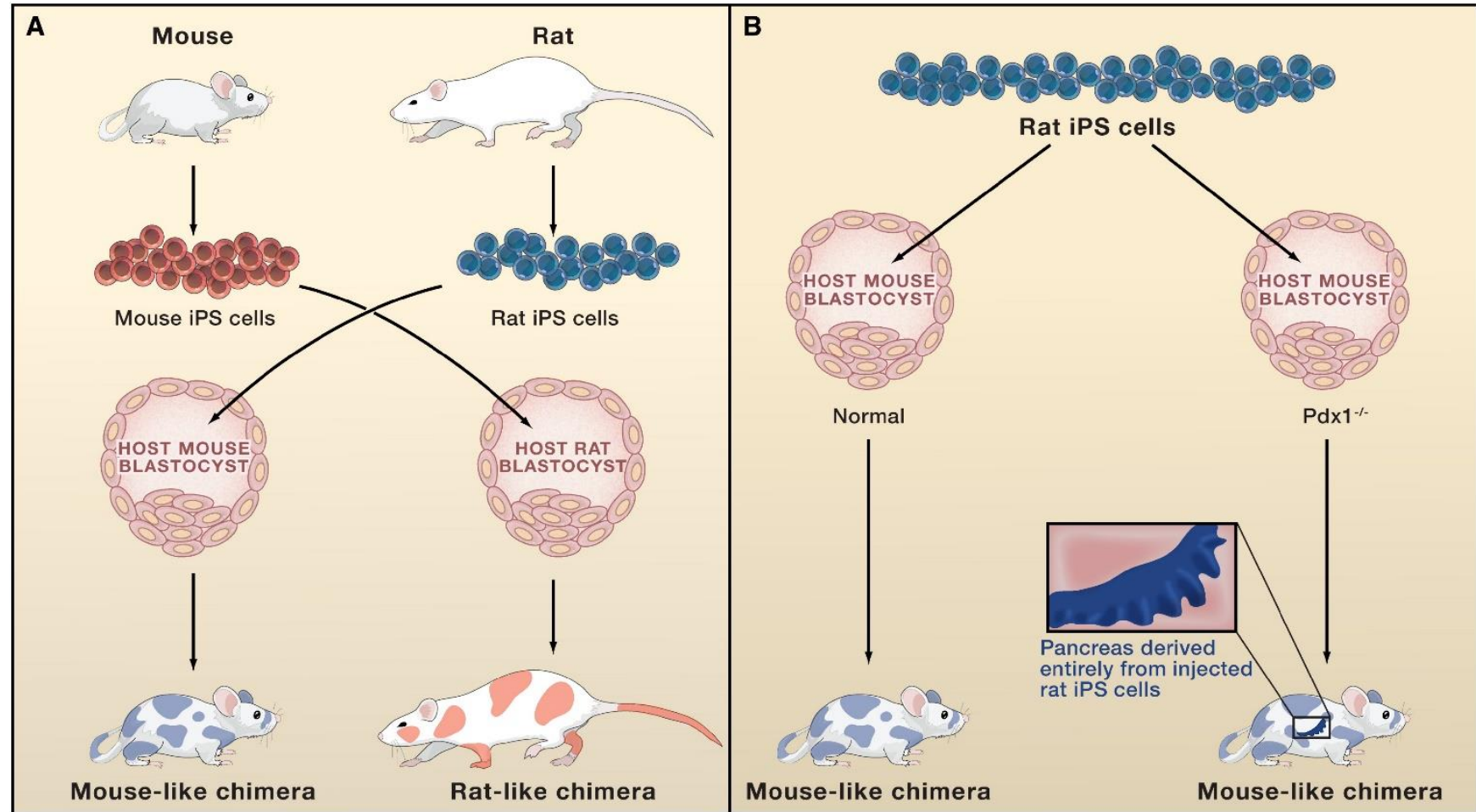
## 5. ALLOW CHIMERIC EMBRYO TO DEVELOP

To date, researchers have regulatory permission to allow the process to continue for six weeks. Gestation in pigs normally lasts about four months.



# Generation of Rat Pancreas in Mouse by Interspecific Blastocyst Injection of Pluripotent Stem Cells

Toshihiro Kobayashi,<sup>1,2</sup> Tomoyuki Yamaguchi,<sup>1,2</sup> Sanae Hamanaka,<sup>1,2</sup> Megumi Kato-Itoh,<sup>2,3</sup> Yuji Yamazaki,<sup>1,2</sup> Makoto Ibata,<sup>2</sup> Hideyuki Sato,<sup>1,2</sup> Youn-Su Lee,<sup>1,2</sup> Jo-ichi Usui,<sup>1,6</sup> A.S. Knisely,<sup>5</sup> Masumi Hirabayashi,<sup>3,4</sup> and Hiromitsu Nakauchi<sup>1,2,\*</sup>





**Dilza**



**Fernanda**



**Taís**



**Gustavo**



**Adriana**



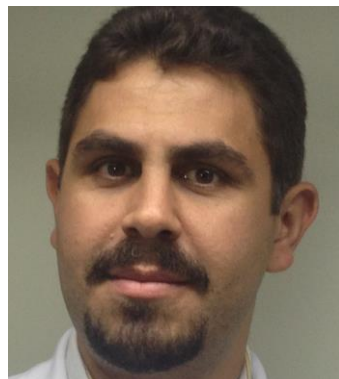
**Emiliano**



**Regina**



**Fernando**



**Glauber**



**Jorge**

