

Advancements in Gene Therapy and Stem Cell Applications in Interventional Cardiology: A Comprehensive Review

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ABSTRACT

Gene therapy and stem cell applications represent the forefront of innovative treatments in interventional cardiology, offering potential solutions for previously intractable cardiovascular conditions. This review explores the current advancements, mechanisms, and clinical implications of gene therapy and stem cell technologies in the treatment of ischemic heart disease, heart failure, and myocardial infarction. The integration of these modalities into interventional procedures has the potential to revolutionize patient outcomes by promoting myocardial repair, enhancing angiogenesis, and improving cardiac function. Despite promising preclinical and early clinical results, challenges such as delivery methods, immunogenicity, and long-term efficacy remain. This article provides a detailed analysis of the latest research, clinical trials, and future directions in the field, highlighting the transformative potential and obstacles that need to be addressed for widespread clinical adoption.

KEYWORDS: Gene therapy, stem cells, cardiology

ARTICLE DETAILS

Published On:
25 June 2024

Available on:
<https://ijmscr.org/>

INTRODUCTION

The burden of cardiovascular diseases (CVDs) continues to escalate globally, representing the leading cause of morbidity and mortality. Traditional therapeutic approaches, while effective to an extent, often fall short in addressing the underlying pathophysiological mechanisms and fail to achieve complete myocardial repair. In recent years, the advent of gene therapy and stem cell technologies has heralded a new era in interventional cardiology, offering promising alternatives to conventional treatments.^{1,2}

Gene therapy, involving the introduction, modification, or silencing of genes within a patient's cells, aims to correct genetic defects, enhance regenerative processes, and modulate disease pathways. Techniques such as viral vector-mediated gene transfer, CRISPR-Cas9 gene editing, and RNA-based therapies have shown substantial potential in preclinical models for treating various cardiovascular conditions. These innovative approaches can potentially restore normal cardiac function, promote angiogenesis, and prevent adverse remodeling post-myocardial infarction.^{1,2}

Concurrently, stem cell therapy has emerged as a pivotal strategy for cardiac regeneration. Various stem cell types, including embryonic stem cells (ESCs), induced pluripotent stem cells (iPSCs), and mesenchymal stem cells (MSCs), have been investigated for their capacity to differentiate into cardiomyocytes, endothelial cells, and smooth muscle cells. Stem cells' paracrine effects, which include the secretion of growth factors and cytokines, further contribute to tissue repair and angiogenesis. The integration of stem cell therapy with interventional cardiology techniques, such as transendocardial injection and intracoronary infusion, has demonstrated potential in enhancing cell delivery and retention, leading to improved therapeutic outcomes.^{1,2,3} Despite the significant promise, the translation of gene and stem cell therapies from bench to bedside faces numerous challenges. Efficient and targeted delivery systems, minimization of immunogenic responses, and ensuring long-term safety and efficacy are critical hurdles that need to be addressed. Moreover, the ethical considerations surrounding the use of certain stem cell types and genetic modifications necessitate careful deliberation.^{3,4}

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This review aims to provide an exhaustive examination of the current state of gene therapy and stem cell applications in interventional cardiology. We will delve into the mechanisms of action, delivery methods, preclinical and clinical trial outcomes, and future perspectives. By elucidating the potential and limitations of these cutting-edge therapies, we hope to offer valuable insights into their role in transforming the landscape of cardiovascular medicine.

Clinical Challenges in Gene Therapy and Stem Cell Applications in Interventional Cardiology

The integration of gene therapy and stem cell applications into interventional cardiology heralds a new frontier in the treatment of cardiovascular diseases (CVDs). While the potential of these therapies is immense, translating them from experimental stages to clinical practice presents several formidable challenges. These challenges span across the realms of safety, efficacy, delivery mechanisms, and ethical considerations, necessitating a comprehensive understanding and strategic approach to overcome them.^{2,3}

1. Safety and Immunogenicity

Immunogenic Response: One of the primary concerns with both gene therapy and stem cell applications is the risk of immunogenicity. The introduction of viral vectors for gene delivery, such as adenoviruses or lentiviruses, can elicit an immune response, potentially leading to inflammation, tissue damage, or even anaphylactic reactions. Similarly, allogeneic stem cell transplantation may provoke an immune response, leading to graft rejection or graft-versus-host disease (GVHD).^{4,5}

Genotoxicity and Oncogenesis: The integration of genetic material into the host genome poses a risk of insertional mutagenesis, which can potentially activate oncogenes or inactivate tumor suppressor genes, leading to malignancies. This risk necessitates the development of safer vectors and targeted delivery methods to minimize off-target effects.^{4,5}

2. Efficacy and Longevity

Transgene Expression: Achieving sustained and controlled expression of the therapeutic gene is critical for the success of gene therapy. However, transient expression or silencing of the transgene can diminish therapeutic efficacy. Ensuring stable and long-term expression while avoiding overexpression, which may lead to toxicity, remains a significant challenge.^{4,5}

Stem Cell Differentiation and Integration: For stem cell therapy, the ability of stem cells to differentiate into functional cardiac cells and integrate seamlessly into the host tissue is paramount. Inconsistent differentiation, poor integration, and lack of electrical coupling with the host myocardium can result in arrhythmias and suboptimal cardiac function.^{4,5}

3. Delivery Mechanisms

Targeted Delivery: Efficient and targeted delivery of therapeutic genes and stem cells to the myocardium is essential for maximizing therapeutic benefits while minimizing systemic side effects. Current delivery methods,

such as intracoronary infusion, transendocardial injection, and epicardial placement, each have limitations in terms of cell retention, homing, and survival.^{4,5}

Homogeneity and Distribution: Achieving homogeneous distribution of stem cells or gene vectors within the myocardial tissue is crucial. Uneven distribution can lead to areas of hyperplasia or insufficient coverage, undermining the therapeutic effect. Advances in imaging-guided delivery and biomaterials for encapsulation may enhance targeting and distribution.^{4,5}

4. Ethical and Regulatory Considerations

Ethical Concerns: The use of certain stem cell types, particularly embryonic stem cells, raises ethical issues related to the source of these cells and their potential for human cloning. Ensuring ethical sourcing and adherence to regulatory guidelines is imperative to gain public trust and acceptance.^{4,5}

Regulatory Hurdles: The path to clinical approval for gene and stem cell therapies is fraught with regulatory challenges. Rigorous preclinical and clinical trials are required to demonstrate safety, efficacy, and reproducibility. Regulatory agencies demand robust evidence of benefit-risk profiles, necessitating extensive and often lengthy research phases.^{4,5}

5. Technical and Logistical Challenges

Manufacturing and Scalability: The production of gene vectors and stem cells at a clinical scale presents significant technical challenges. Ensuring consistency, purity, and potency of the therapeutic products while maintaining cost-effectiveness is a complex task that requires advanced biomanufacturing technologies.^{4,5}

Standardization and Quality Control: Establishing standardized protocols for the isolation, expansion, and characterization of stem cells is crucial for reproducibility and quality control. Variability in cell preparation can lead to inconsistent clinical outcomes, underscoring the need for stringent standardization.^{4,5}

6. Clinical Trial Design and Outcome Measures

Trial Design: Designing clinical trials for gene and stem cell therapies involves unique considerations, including patient selection, dosing regimens, and long-term follow-up. Identifying appropriate biomarkers and endpoints that accurately reflect therapeutic benefits and potential risks is essential for evaluating clinical efficacy.^{4,5}

Outcome Measures: Traditional outcome measures, such as mortality and morbidity, may not fully capture the benefits of gene and stem cell therapies. Developing novel outcome measures that encompass functional improvement, quality of life, and biomarker-based assessments is critical for comprehensive evaluation.^{6,7}

The clinical challenges associated with gene therapy and stem cell applications in interventional cardiology are multifaceted and complex. Addressing these challenges requires a multidisciplinary approach, combining advances in molecular biology, immunology, bioengineering, and clinical sciences. Continued research and collaboration among

scientists, clinicians, regulatory bodies, and ethicists are essential to navigate these challenges and unlock the full potential of these revolutionary therapies. As the field progresses, overcoming these obstacles will pave the way for more effective and safer treatments, ultimately transforming the landscape of cardiovascular medicine.^{6,7}

Applications and Uses of Gene Therapy and Stem Cell Technologies in Interventional Cardiology

The advent of gene therapy and stem cell technologies has revolutionized the field of interventional cardiology, offering unprecedented opportunities to address complex cardiovascular diseases. These innovative approaches provide therapeutic strategies that target the underlying mechanisms of disease, promote tissue regeneration, and enhance cardiac function. This section explores the diverse applications and uses of gene therapy and stem cell technologies in interventional cardiology, highlighting their potential to transform patient care.^{6,7}

1. Ischemic Heart Disease and Myocardial Infarction

Gene Therapy for Angiogenesis: Ischemic heart disease, characterized by reduced blood flow to the myocardium, can benefit significantly from gene therapy aimed at promoting angiogenesis. The delivery of genes encoding angiogenic factors, such as vascular endothelial growth factor (VEGF) and fibroblast growth factor (FGF), can stimulate the formation of new blood vessels, improving myocardial perfusion and oxygenation. Techniques such as direct intramyocardial injection or catheter-based delivery during percutaneous coronary intervention (PCI) have been explored to enhance localized gene transfer.^{6,7}

Stem Cell Therapy for Myocardial Repair: Stem cell therapy offers a promising avenue for repairing damaged myocardium following myocardial infarction (MI). Mesenchymal stem cells (MSCs), induced pluripotent stem cells (iPSCs), and cardiac progenitor cells (CPCs) can differentiate into cardiomyocytes, endothelial cells, and smooth muscle cells, contributing to myocardial regeneration. Additionally, the paracrine effects of stem cells, including the secretion of growth factors and cytokines, can further enhance tissue repair and angiogenesis. Techniques such as transendocardial injection and intracoronary infusion are employed to deliver stem cells directly to the infarcted myocardium.^{6,7}

2. Heart Failure

Gene Therapy for Cardioprotection: In the context of heart failure, gene therapy can be employed to modulate pathways involved in myocardial survival and function. The overexpression of genes encoding anti-apoptotic proteins, such as Bcl-2, or calcium-handling proteins, such as SERCA2a, has shown potential in improving cardiac contractility and reducing adverse remodeling. Viral vector-mediated gene transfer during catheter-based procedures offers a targeted approach to enhance gene delivery to the failing myocardium.^{7,8}

Stem Cell Therapy for Cardiac Function Improvement: Stem cells can be utilized to replace damaged cardiomyocytes and improve cardiac function in heart failure patients. The differentiation of stem cells into functional cardiomyocytes and their integration into the host myocardium can enhance contractile performance and reduce symptoms of heart failure. Moreover, the anti-fibrotic and anti-inflammatory properties of stem cells can mitigate adverse remodeling and preserve cardiac function. Emerging techniques, such as bioprinting and tissue engineering, are being explored to create bioengineered cardiac patches for implantation.⁹

3. Peripheral Artery Disease

Gene Therapy for Vascular Regeneration: Peripheral artery disease (PAD), characterized by the narrowing of peripheral arteries, can benefit from gene therapy aimed at enhancing vascular regeneration. The delivery of genes encoding angiogenic factors can promote the formation of collateral vessels, improving blood flow to ischemic tissues. Intra-arterial delivery during endovascular procedures offers a minimally invasive approach to achieve localized gene transfer.¹⁰

Stem Cell Therapy for Limb Ischemia: Stem cell therapy holds promise for the treatment of critical limb ischemia, a severe form of PAD. The transplantation of stem cells can enhance angiogenesis and tissue repair, reducing the risk of limb amputation. Techniques such as intramuscular injection or intra-arterial infusion of stem cells are employed to deliver therapeutic cells to the ischemic limb.¹⁰

4. Arrhythmogenic Disorders

Gene Therapy for Arrhythmia Management: Gene therapy can be utilized to correct genetic mutations associated with arrhythmogenic disorders. The delivery of genes encoding ion channel proteins or anti-arrhythmic factors can modulate electrical signaling in the heart, reducing the risk of arrhythmias. Techniques such as catheter-based delivery during electrophysiological procedures offer a targeted approach to enhance gene transfer to arrhythmogenic foci.¹⁰

Stem Cell Therapy for Conduction System Repair: Stem cell therapy can potentially repair damaged conduction tissue in patients with arrhythmias. The differentiation of stem cells into pacemaker cells or Purkinje fibers can restore normal conduction and reduce the risk of arrhythmias. Techniques such as transendocardial injection or epicardial placement are employed to deliver stem cells to the conduction system.¹⁰

5. Cardiovascular Gene Editing

CRISPR-Cas9 for Genetic Correction: The CRISPR-Cas9 gene editing technology offers a revolutionary approach to correct genetic mutations associated with cardiovascular diseases. By targeting specific genetic loci, CRISPR-Cas9 can introduce precise modifications, potentially curing monogenic disorders such as hypertrophic cardiomyopathy or familial hypercholesterolemia. The delivery of CRISPR components via viral vectors or lipid nanoparticles during interventional procedures enables localized gene editing in the heart.¹⁰

Advancements in Gene Therapy and Stem Cell Applications in Interventional Cardiology: A Comprehensive Review

Base Editing for Precision Therapy: Base editing, a novel gene editing technique, allows for precise single-nucleotide changes without creating double-strand breaks. This approach holds promise for correcting point mutations associated with cardiovascular diseases. The integration of base editing into interventional cardiology offers a potential avenue for precision therapy, providing tailored treatments based on individual genetic profiles.¹¹

The applications and uses of gene therapy and stem cell technologies in interventional cardiology are vast and varied, encompassing a wide range of cardiovascular conditions. These innovative approaches offer the potential to address the underlying mechanisms of disease, promote tissue regeneration, and enhance cardiac function, ultimately transforming patient care. As research and clinical trials continue to advance, the integration of these technologies into interventional cardiology will likely become a cornerstone of cardiovascular medicine, offering new hope for patients with intractable cardiovascular diseases.¹²

The burgeoning fields of gene therapy and stem cell technology in interventional cardiology represent a significant paradigm shift in the treatment of cardiovascular diseases (CVDs). These innovative approaches offer transformative potential by targeting the underlying pathophysiological mechanisms, promoting myocardial repair, and enhancing cardiac function. However, realizing their full clinical potential requires addressing a myriad of scientific, technical, and ethical challenges. This conclusion synthesizes the key insights, challenges, and future directions gleaned from the current state of research and clinical application.¹²

KEY INSIGHTS

1. **Therapeutic Potential:** Gene therapy and stem cell applications have demonstrated substantial promise in preclinical and early clinical studies. Gene therapy, through the delivery of therapeutic genes, has shown potential in promoting angiogenesis, enhancing cardioprotection, and correcting genetic defects associated with cardiovascular disorders. Similarly, stem cell therapy has exhibited the ability to regenerate damaged myocardium, improve cardiac function, and mitigate adverse remodeling through differentiation into cardiomyocytes and the secretion of paracrine factors.¹²
2. **Innovative Delivery Methods:** Advancements in delivery techniques, including catheter-based methods and targeted intramyocardial injections, have improved the precision and efficiency of gene and stem cell therapies. These methods facilitate localized delivery, enhancing the therapeutic effect while minimizing systemic exposure and adverse effects. Additionally, the development of biomaterials and scaffolds for encapsulating and delivering stem cells has shown promise in

improving cell retention, survival, and integration into the host tissue.¹²

3. **Personalized Medicine:** The integration of gene editing technologies, such as CRISPR-Cas9 and base editing, with interventional cardiology paves the way for personalized medicine. These technologies enable precise genetic modifications tailored to individual patients' genetic profiles, potentially correcting monogenic disorders and optimizing therapeutic outcomes. Personalized approaches hold the potential to transform the management of genetic cardiovascular diseases, offering targeted and effective treatments.¹²

CHALLENGES AND LIMITATIONS

1. **Safety and Immunogenicity:** Ensuring the safety of gene therapy and stem cell applications remains a critical concern. The risk of immunogenic responses to viral vectors, potential genotoxicity, and the possibility of oncogenesis require rigorous safety evaluations. For stem cell therapy, the challenges of immune rejection and graft-versus-host disease necessitate the development of immunomodulatory strategies and the use of autologous or well-matched allogeneic cells.¹²
2. **Efficacy and Longevity:** Achieving sustained and controlled therapeutic effects is paramount. For gene therapy, ensuring stable and long-term expression of the therapeutic gene while avoiding overexpression is crucial. For stem cell therapy, the differentiation and integration of stem cells into functional cardiac tissue remain significant hurdles. Strategies to enhance cell survival, retention, and functional integration are essential to improve therapeutic efficacy.^{13,14}
3. **Regulatory and Ethical Considerations:** The translation of gene and stem cell therapies from bench to bedside is hindered by regulatory and ethical challenges. Rigorous regulatory requirements necessitate extensive preclinical and clinical evaluations to demonstrate safety and efficacy. Ethical concerns surrounding the use of certain stem cell types, particularly embryonic stem cells, require careful consideration and adherence to ethical guidelines to ensure public trust and acceptance.¹⁵

FUTURE DIRECTIONS

1. **Advancing Delivery Technologies:** Continued advancements in delivery technologies are critical to enhancing the precision, efficiency, and safety of gene and stem cell therapies. The development of novel biomaterials, scaffolds, and minimally invasive delivery methods will improve the targeted delivery and retention of therapeutic agents.

Innovations in imaging-guided delivery and real-time monitoring will further enhance the precision and efficacy of these therapies.¹⁶

2. **Optimizing Genetic Modifications:** The refinement of gene editing techniques, including CRISPR-Cas9 and base editing, will enable more precise and efficient genetic modifications. Enhancing the specificity and reducing off-target effects of these technologies will be crucial for their safe and effective application in clinical settings. Combining gene editing with advanced delivery methods will pave the way for personalized and targeted therapies.¹⁷
3. **Integrating Multidisciplinary Approaches:** The successful implementation of gene and stem cell therapies in interventional cardiology requires a multidisciplinary approach, integrating insights from molecular biology, bioengineering, immunology, and clinical sciences. Collaborative efforts among researchers, clinicians, regulatory bodies, and ethicists will be essential to navigate the complex challenges and accelerate the translation of these therapies into clinical practice.¹⁸
4. **Clinical Trials and Real-World Evidence:** Conducting well-designed clinical trials to evaluate the safety, efficacy, and long-term outcomes of gene and stem cell therapies is essential. Collecting real-world evidence through post-market surveillance and patient registries will provide valuable insights into the practical applications and potential risks of these therapies. Developing standardized protocols and outcome measures will enhance the comparability and generalizability of clinical trial results.¹⁹

Gene therapy and stem cell applications in interventional cardiology hold the potential to revolutionize the treatment of cardiovascular diseases, offering targeted and regenerative approaches that address the underlying mechanisms of disease. While significant progress has been made, the successful translation of these therapies into clinical practice requires addressing safety, efficacy, delivery, and ethical challenges. Continued research, technological advancements, and collaborative efforts will be essential to harness the full potential of these innovative therapies, ultimately transforming the landscape of cardiovascular medicine and improving patient outcomes.^{17,18,19}

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