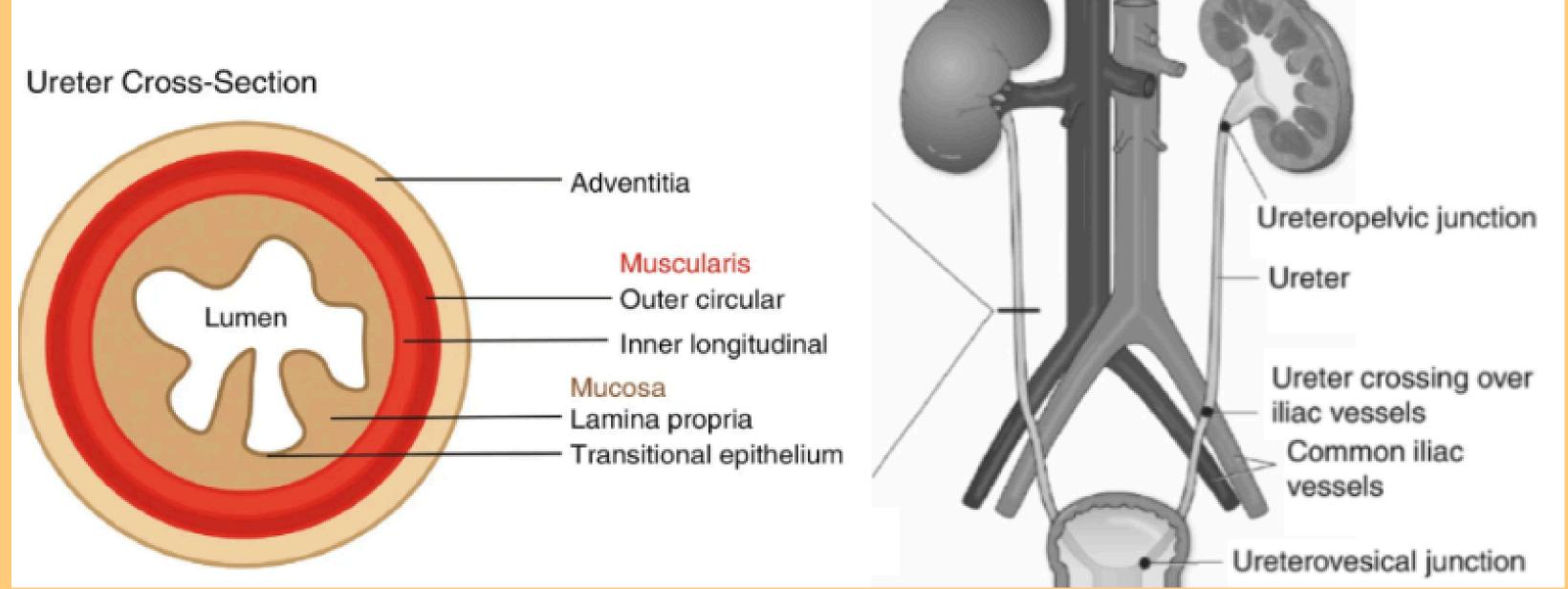
# Assessing the Feasibility of Ureter Engineering using Rotational Internal Flow Layer Engineering (RIFLE)

A Novel Biofabrication Method for Tissue Engineering Marissa Mansor<sup>1</sup>, Jamie A. Davies<sup>1</sup>, Ian Holland<sup>1</sup> <sup>1</sup>Deanery of Biomedical Science and the Centre for Engineering Biology, University of Edinburgh, Edinburgh, United Kingdom

## 1) INTRODUCTION

- Ureters can be damaged by diseases or injuries. Current treatment techniques, including artificial, non-living tubes lead to inflammation
- Bioengineering living tubes with the properties of natural tissue would be a potential way to reconstruct the ureter which is composed of three distinct layers (adventitia, muscularis, mucosa)

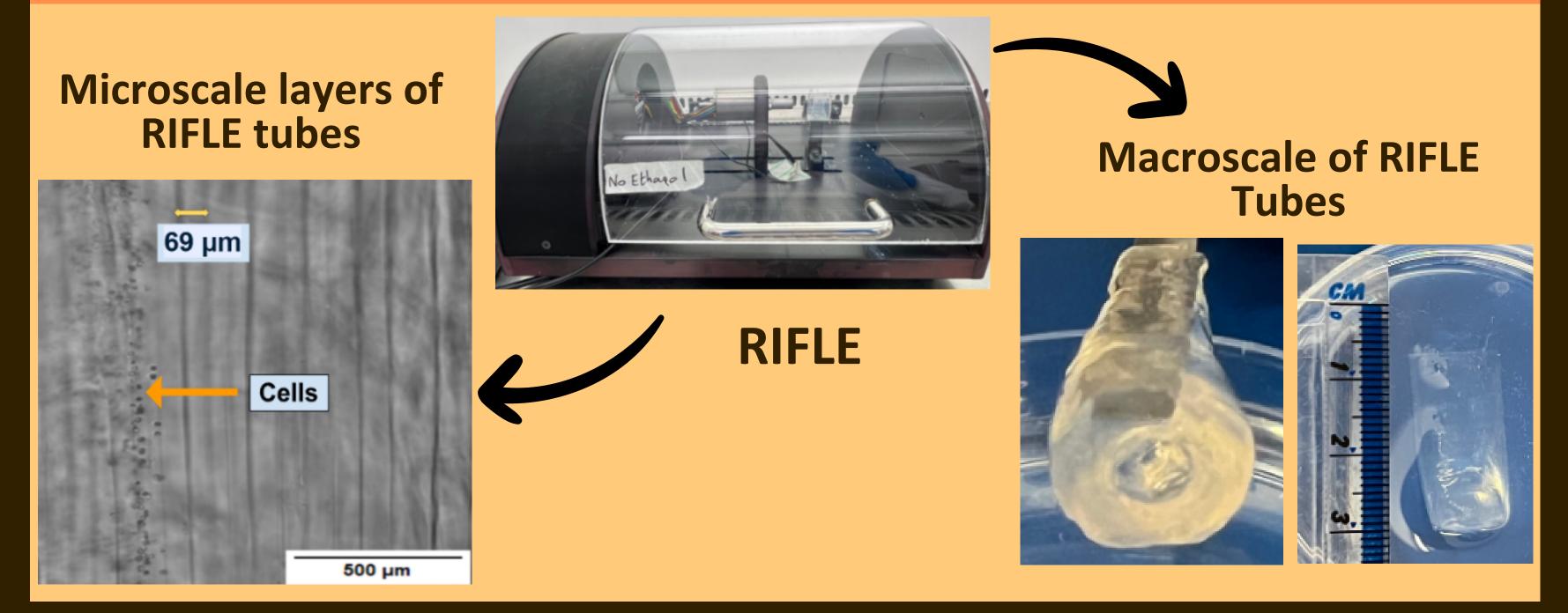


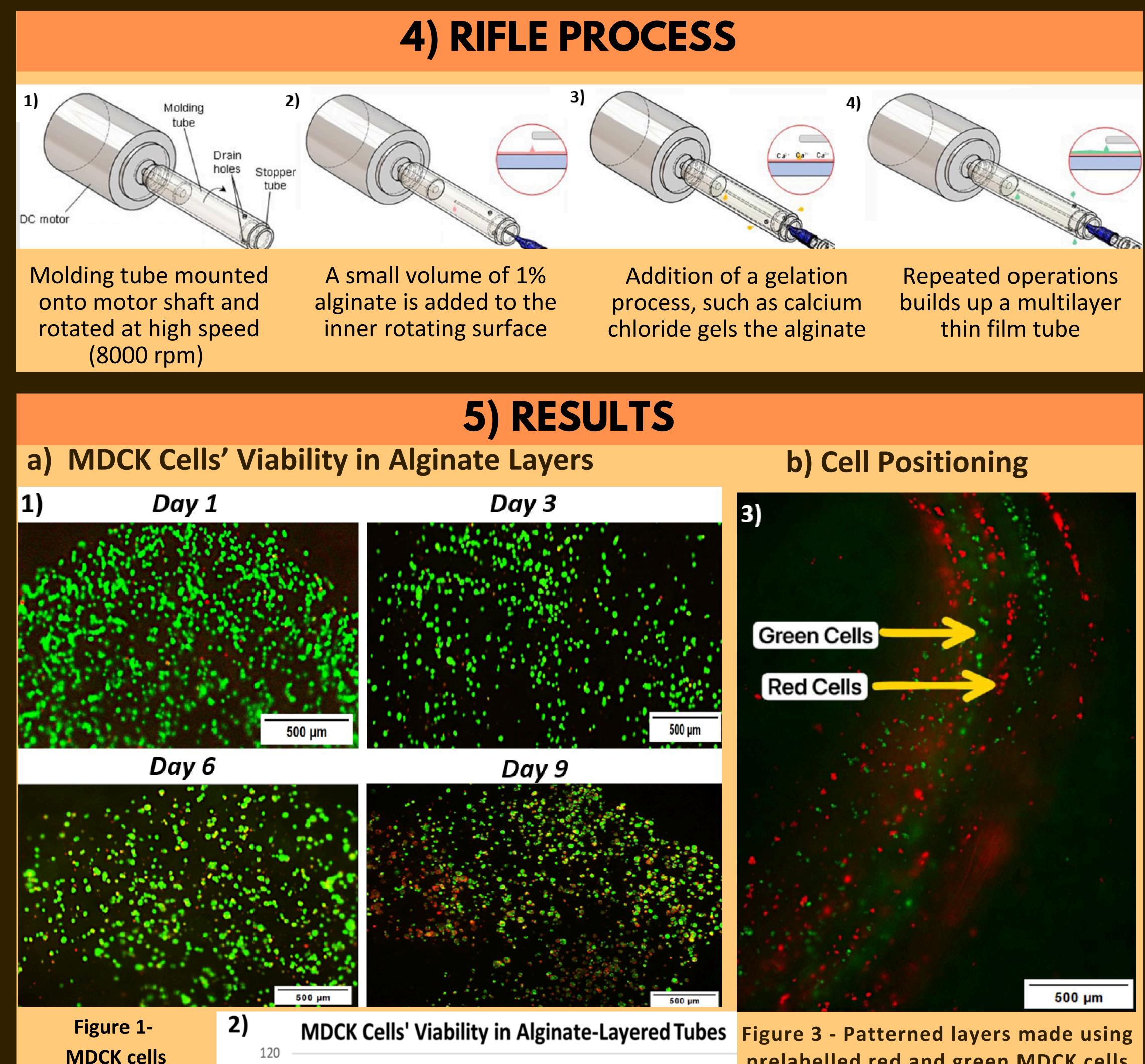
- Existing 3D printing with low resolution cannot effectively generate a finely layered structure of ureter that is 1.5-6 mm in diameter.
- RIFLE can create layered tubes with each layer tuneable from one cell thick to hundreds at high density cell layers

### 2) MAIN OBJECTIVE

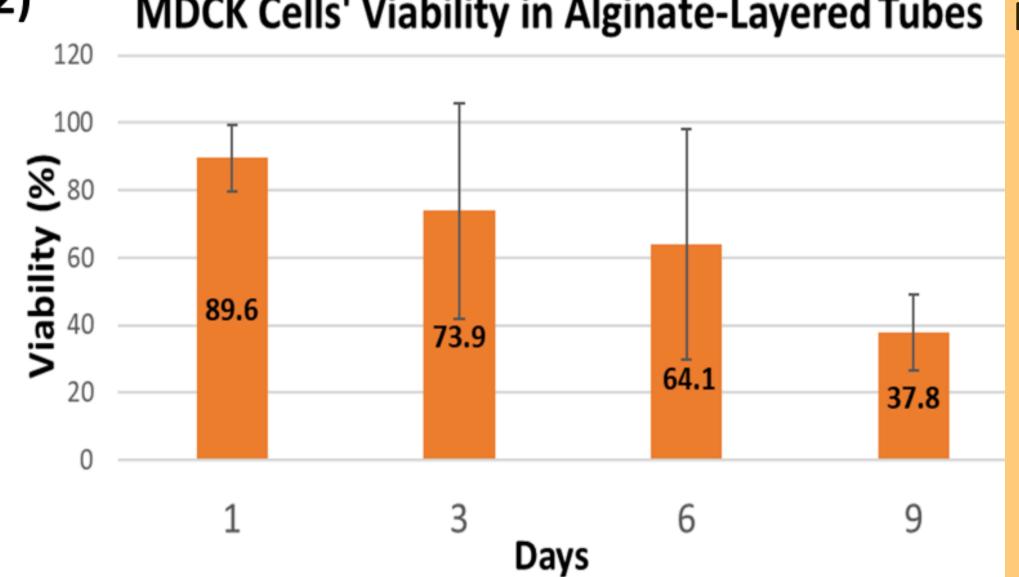
Using RIFLE to generate tubes with MDCK cells (representative of urinary tissue) encapsulated in alginate layers.

### **3) METHODOLOGY**





**MDCK cells** encapsulated within alginate layers using RIFLE. **Sections of the tube** were stained with live/dead staining



prelabelled red and green MDCK cells (10<sup>°</sup> cells per ml)

Figure 2 - Plot of MDCK cells' viability data, n=3



# 6) CONCLUSION

- MDCK cells survived in alginate until day 9. The decline in their viability suggests that alginate is not a suitable material for ureter tissue engineering
- The cell layer remains distinct from the surrounding adjacent layers, suggesting the ability to form heterogeneous composite layered structures

# **7) FUTURE DIRECTIONS**

Using RIFLE to fabricate ureter-like tissues by co-culturing different cell types within collagen layers such as fibroblasts (adventitia), smooth muscle cells (muscularis), and MDCK (urothelium)

### **8) REFERENCES**

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