



Ready-to-use 3D Human Airway Spheroids SP3D-HAS

Cat. #SP3D-3210

Product Description

Airway remodeling, chronic inflammation, and bacterial colonization in many airway diseases occur in the lower respiratory tract [1]. Primary bronchial epithelial cells are, therefore, an excellent *in vitro* source for studying airway diseases such as cystic fibrosis, chronic obstructive pulmonary disease (COPD), and severe asthma [1]. The bronchial epithelium is made up of three principle cell types: basal, goblet, and ciliated cells, of which the latter two form a suprabasal columnar structure and are necessary for mucociliary clearance [2]. ScienCell's ready-to-use 3D Human Airway Spheroids (SP3D-HAS) are generated using primary bronchial epithelial cells and are embedded in their own secreted extracellular matrix (ECM). Importantly, immunofluorescence staining and qPCR analysis revealed the presence of basal, ciliated, and goblet cells in ScienCell's airway spheroids (see Figures 1 and 2). ScienCell's ready-to-use airway spheroids (Cat #SP3D-3210) are great models for studying airway diseases in a simple and high throughput manner.

Kit Components (Included)

3D Cell Culture Components				
Cat #	# of vials	Product Name	Quantity	Storage
SP-3210	1	Human Bronchial Epithelial Spheroids (SP-HBEpiS)	1×10^4 spheroids	Liquid nitrogen
3D-3211	1	3D-Airway Spheroid Medium(3D-ASpM)	200 mL	2-8 °C
3D-3262	1	3D-Airway Spheroid Supplement (3D-ASpS)	2 mL	-20 °C
0583	1	Penicillin/Streptomycin Solution (P/S)	2 mL	-20 °C
0343 or 0353 or 0383	1	Ultra-Low Binding Culture Plates (24-, 48-, or 96- well plate)	1 plate	RT

Quality Control

SP3D-HAS are tested for the formation of functional and uniform 3D human bronchial epithelial spheroids according to the included protocol. All components are negative for bacterial and fungal contamination.

Product Use

SP3D-HAS are for research use only. It is not approved for human or animal use, or application in clinical or *in vitro* diagnostic procedures.

Shipping

SP-3210, 3D-3262, and 0583 are shipped on dry ice. 3D-3211, and (0343 or 0353 or 0383) are shipped at room temperature.

References

- [1] Awatade NT, Wong SL, Hewson CK, Fawcett LK, Kicic A, Jaffe A and Waters SA. (2018) “Human Primary Epithelial Cell Models: Promising Tools in the Era of Cystic Fibrosis Personalized Medicine.” *Front. Pharmacol.* 9(1429): 1-11.
- [2] Velden VH, Versnel HF. (1998) “Bronchial epithelium: morphology, function and pathophysiology in asthma.” *Eur. Cytokine Netw.* 9: 585-597.

Procedure:

Step I: Preparing the complete 3D culture medium

1. Thaw 3D-airway spheroid supplement (3D-ASpS; Cat. #3D-3262), and penicillin/streptomycin solution (P/S solution; Cat. #0583) at 37°C. Mix 3D-ASpS and P/S solution into the 3D-airway spheroid medium (3D-ASpM; Cat. #3D-3211) by gently swirling the medium bottle around.
 - a. 3D-ASpM is **viscous** and optimized for homogenous spheroid formation.
 - b. Warm the complete 3D-ASpM to **room temperature** before use.
 - c. When stored in the dark at 4°C, the complete medium is stable for one month.

Step II: Thawing and maintaining the ready-to-use 3D spheroids

2. One frozen vial contains $\geq 1 \times 10^4$ spheroids, which is sufficient for plating into half of a multi-well plate (e.g. 24-, 48-, and 96-well ultra-low binding culture plate).
3. Place the frozen vial in a 37°C water bath. Hold and rotate the vial gently until the contents completely thaw. Promptly remove the vial from the water bath, wipe it down with 70% ethanol, and transfer it to the sterile field.
4. Carefully remove the cap without touching the interior threads. Gently pipette the spheroid suspension up and down **two times** to disperse potential spheroid aggregates.
5. Gently transfer the spheroid suspension into a fresh 50 mL conical tube.
6. Add 24 mL of 3D culture medium to the above 50 mL conical tube.
7. Resuspend spheroids in 3D culture medium by gently pipetting up and down for ~ 5 times using a serological pipette.

Note: 3D culture medium has a high viscosity; thus, pipetting slowly is important to avoid bubble formation.

Fig. 2 –Immunostaining analysis of the human airway spheroids showing the presence of markers for basal cells (CK14), ciliated cells (acetylated α -tubulin, α Tub), and goblet cells (MUC5AC).

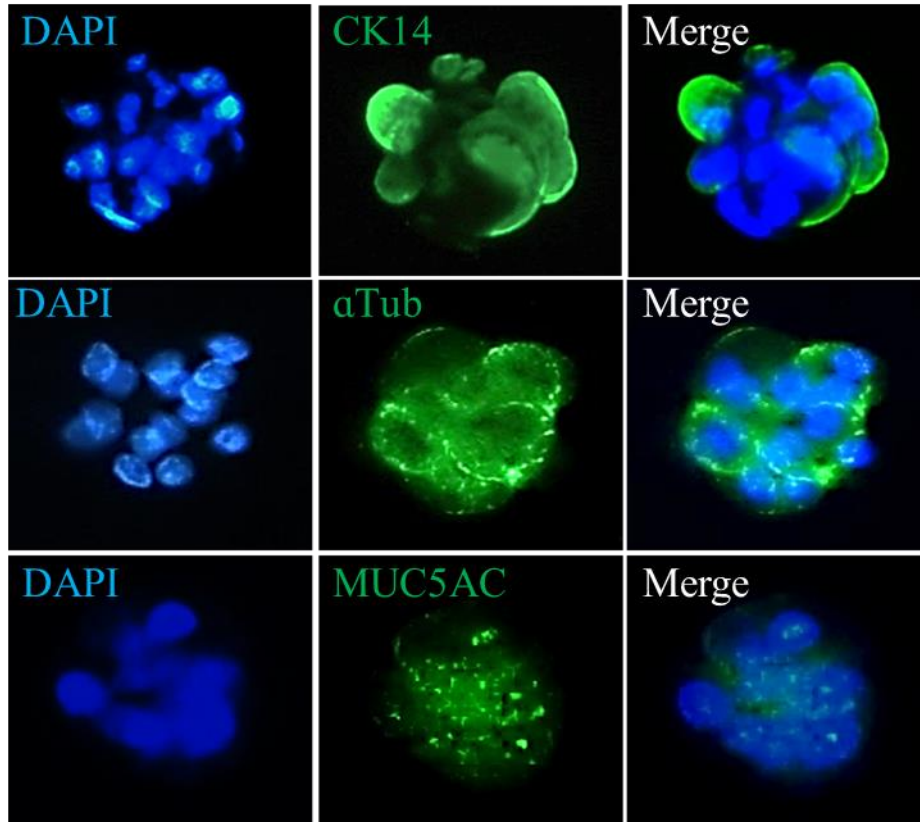


Fig. 3: Quantitative PCR analysis of basal (ITGA6), goblet (MUC5B), and ciliated cell markers (TUBA4A) expressed by bronchial epithelial cells grown in 2D or 3D cell cultures.

