

角膜类器官: 眼刺激评估与药物筛选新模型

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摘要 角膜是眼表关键屏障, 易受药物、化学品及环境刺激损伤, 传统动物实验与二维模型难以精准模拟人眼反应。角膜类器官(corneal organoids)作为原代组织或干细胞定向分化构建的三维体外模型, 主要用于发育研究、角膜疾病建模, 还可辅助眼刺激性评估与眼科药物筛选。相较于传统动物实验, 它更能捕捉人体生理反应, 可部分替代动物研究, 减少伦理争议。未来, 随着与器官芯片/微生理系统(microphysiological system, MPS)等工程化平台的融合及评价标准的完善, 角膜类器官有望加速迈向可重复、可量化、与临床相关性更高的转化应用。该文系统综述其构建策略; 重点介绍其在化学品与化妆品眼刺激评价、抗炎与抗感染药物筛选及高通量平台整合中的应用进展。

关键词 角膜类器官; 眼刺激评估; 眼科药物筛选; 三维模型

Corneal Organoids: a New Model for Eye Irritation Assessment and Ophthalmic Drug Screening

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Abstract The cornea serves as a critical barrier of the ocular surface and is susceptible to damage from pharmaceuticals, chemicals, and environmental irritants. Traditional animal experiments and two-dimensional models fall short in accurately simulating human ocular responses. Corneal organoids—three-dimensional *in vitro* models constructed from primary tissues or through directed differentiation of stem cells—are primarily employed in developmental studies and corneal disease modeling. They also support ocular irritation assessment and ophthalmic drug screening. Compared with conventional animal experiments, these organoids better capture human physiological reactions, offering a viable alternative that reduces ethical concerns. Looking ahead, integration with engineered platforms such as organ-on-a-chip or MPS (microphysiological system), along with the refinement of evaluation standards, is expected to advance corneal organoids toward reproducible, quantifiable, and clinically relevant translational applications. This review systematically summarizes their construction strategies and highlights recent advancements in their use for evaluating chemical and cosmetic eye irritation, screening anti-inflammatory and anti-infective drugs, and integrating with high-throughput platforms.

Keywords corneal organoids; eye irritation assessment; ophthalmic drug screening; three-dimensional model

角膜是眼球前部透明的纤维膜, 是光线进入眼内的必经之路, 其基本功能包括: 保护眼睛结构, 提高眼睛的屈光力, 并以最小的散射以及光学降解把

光线聚焦在视网膜上^[1]。角膜主要由五层结构组成, 从外到内依次为上皮层、前弹力层、基质层、后弹力层和内皮层。上皮层为复层鳞状上皮, 具有自我修复能力; 前弹力层为无细胞的透明纤维膜, 对机械损伤有一定抵抗力; 基质层占角膜总厚度的90%, 主要由胶原纤维和角膜基质细胞构成; 后弹力层为坚

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韧的透明薄膜, 具备再生能力; 内皮层为单层细胞, 负责维持角膜透明性与水分平衡^[2]。眼刺激等角膜相关疾病一直是眼科学领域的重要挑战。传统的眼刺激评估以及眼科药物筛选多依赖于动物实验, 动物模型虽具备完整的角膜组织架构及眼表微环境如泪膜、结膜囊等, 但其解剖生理特征存在物种特异性差异, 人类的角膜直径约为11 mm, 而兔和小鼠的角膜直径分别为13 mm和2.2~3.5 mm, 影响研究结果的代表性^[3]。除此以外, 动物模型的角膜细胞可维持体内正常的生理功能状态, 但受物种遗传背景的差异影响, 其角膜组织中部分关键分子的表达谱、信号通路调控模式与人类存在显著分歧, 制约了研究结果向人体的转化应用^[4]。而传统细胞模型多采用二维单层贴壁培养模式, 通常仅包含角膜上皮细胞等单一细胞组分, 缺失天然角膜固有的上皮-基质-内皮多层级结构^[5]。二维细胞模型因脱离体内复杂的微环境调控, 易发生细胞功退化, 典型表现为角膜上皮细胞的增殖活性下降、分化成熟度不足等^[6]。类器官作为三维(three-dimensional, 3D)培养技术的重要分支, 自2009年问世以来便得到了迅速发展^[7]。“类器官”是指以干细胞自组织能力为核心, 在体外经定向诱导或自发分化形成的、具备对应天然器官的层级结构与特定生理功能的三维组织模型^[8]。它们可以由多能干细胞[人胚胎干细胞(human embryonic stem cells, hESCs)或人诱导多能干细胞(human induced-pluripotent stem cells, hiPSCs)]或直接来自活检样本中获取的组织细胞衍生而来^[9]。类器官可部分重现其来源组织的核心生理功能, 如定向分泌、主动转运及代谢排泄等^[10-11]。近年来, 在干细胞技能以及三维培养技能快速发展机制中, 角膜类器官应运而生, 角膜类器官是一种运用原代角膜细胞及干细胞, 在体外特定培养体系中构建的三维角膜组织模型。该模型能够在细胞组成与组织分层结构上模拟天然角膜的核心特征, 可部分重现角膜的局部生理微环境。这种模型不仅避免了动物实验的伦理困境, 还能更精准地模拟人体角膜的病理生理过程^[10-12]。角膜类器官的出现, 为眼科学基础研究和眼科药物开发开辟了一条崭新的道路。它凭借自身的稳定性和可重复性, 正逐渐成为眼科学领域的研究热点和重要工具。本文将围绕角膜类器官在眼刺激性评价与眼科药物筛选中的应用进展进行综述, 并展望未来发展方向, 以期对眼科学研究与新药研发提供参考。

1 角膜类器官的构建

1.1 角膜类器官的发展历史

角膜类器官的构建以细胞来源为核心, 并结合对培养体系的精准调控, 形成了多条成熟技术路径。针对不同的细胞来源, 其对应的构建策略各有特色。

1993年, MINAMI等^[13]运用组织工程学方法, 在胶原凝胶培养基中对分离获得的牛角膜上皮细胞、基质细胞及内皮细胞进行体外3D共培养。该研究通过体外模拟角膜的细胞组成与分层排布, 建立了早期角膜三维培养模型, 为后续角膜类器官的技术研发奠定了重要的方法学基础。1999年, GERMAIN团队^[14]采用相同的组织工程技术路线, 成功培养出拥有正常角膜上皮生物学特性的人角膜上皮层。2007年, AHMAD等^[15]以hESCs为起始材料, 通过诱导分化技术获得角膜上皮层, 该研究标志着干细胞诱导生成角膜部分结构的研究方向正式确立。

2012年, HAYASHI等^[16]以人成纤维细胞和人角膜缘上皮细胞来源的iPSC为研究对象, 成功诱导其分化为角膜上皮层, 并据此提出了干细胞诱导生成角膜上皮层的第2条技术路径。2015年, MELLOUGH团队^[17]在诱导hESCs分化培育视网膜类器官的研究过程中, 获得了包含上皮层与基质层的双层角膜结构。2017年, FOSTER等^[18]首次以hiPSCs为种子细胞, 采用全程三维培养模式, 成功构建出具有典型三层结构的角膜类器官。研究人员通过特异性细胞标志物检测及电子显微镜形态学观察, 证实了该角膜类器官中上皮层、基质层和内皮层的完整存在; 此外, FOSTER团队^[18]还在培养产物中成功检测到角膜细胞外基质特有的胶原蛋白与蛋白聚糖。同年, SU-SAIMANICKAM等^[19]对AHMAD团队^[15]和HAYASHI团队^[16-20]建立的角膜上皮细胞诱导体系进行了优化改良, 通过培养hiPSCs和hESCs均成功诱导生成角膜类器官。该团队不仅大幅提升了HAYASHI团队角膜类器官培养方法的效率并简化了培养步骤, 还在其培养的角膜类器官中首次发现了角膜后弹力层的存在。

2020年, FOSTER等^[21]公开了利用hiPSCs通过全程三维培养技术构建具有典型三层结构角膜类器官的详细实验方案, 为角膜类器官体外培养技术的推广和发展奠定了重要基础。2021年, ISLA-MAGRANÉ团队^[4]以hiPSCs为研究材料, 采用二维与三维培养相结合的技术策略, 构建出可用于探究细胞

间相互作用机制的角膜类器官模型。值得注意的是, ISLA-MAGRANÉ团队^[4]在该研究中首次成功培养出角膜前弹力层,但由于未能同步获得角膜后弹力层,因此截至目前,尚未有能够同时具备角膜五层完整结构的角膜类器官问世(表1)。

1.2 角膜类器官的表征

1.2.1 表征方法 角膜类器官的表征已构建起多技术协同融合的综合评估体系,核心涵盖形态学成像与分子生物学分析两大技术方法,二者互为补充,实现了从宏观形态表型到微观分子表达的系统

化检测。其中,形态学成像技术以结构可视化与量化分析为核心目标:苏木精-伊红(hematoxylin-eosin staining, H&E)染色作为经典的组织形态学检测方法,可直观呈现类器官的宏观组织结构及细胞分层特征^[22];共聚焦显微镜联合3D重建技术则进一步突破了传统成像的局限,能够清晰剖析类器官的空间结构细节,结合图像分析软件可实现细胞密度等关键结构参数的精准量化表征^[23]。分子生物学分析技术聚焦于标志物表达的精准检测与动态评估:逆转录-实时荧光定量聚合酶链式反应(reverse

表1 角膜类器官的构建
Table 1 Construction of corneal organoids

作者及文献 Authors and references	细胞来源 Sources of cells	细胞类型 Type of cells	构建方法 Construction methods	功能特征 Functional characteristics
MINAMI et al ^[13]	Isolated bovine corneal cells	Multicellular	Tissue engineering approach: culture in a collagen gel-based <i>in vitro</i> culture system	Achieved the first <i>in vitro</i> reconstruction of a three-dimensional corneal equivalent, inaugurating the era of <i>ex vivo</i> corneal organoid research
GERMAIN et al ^[14]	Human corneal epithelial cells, fibroblasts	Single cellular (epithelial cells only)	Tissue engineering-based <i>in vitro</i> culture	Generated an epithelial sheet that recapitulates the structural and functional phenotype of native corneal epithelium
AHMAD et al ^[15]	hESCs	Single cellular (epithelial cells only)	hESCs differentiation technology	Established the research direction for stem cell-derived corneal partial structures, laying the foundation for subsequent stem cell induction studies
HAYASHI et al ^[16]	hiPSCs	Single cellular (epithelial cells only)	hiPSCs directed differentiation technology	Proposed the second technical pathway for generating corneal epithelial layers from stem cells, expanding the cell source options for corneal epithelium construction
MELLOUGH et al ^[17]	hESCs	Multicellular	hESCs differentiation technology	Achieved <i>in vitro</i> construction of a bilayer corneal structure, advancing research on the structural integrity of corneal organoids
FOSTER et al ^[18]	hiPSCs	Multicellular	Full 3D culture model, combined with specific cell marker detection and electron microscopy observation	Constructed the first complete three-layer corneal organoid from hiPSCs, clarified extracellular matrix components, and provided a reference for optimizing culture techniques
SUSAIMANICKAM et al ^[19]	hESCs, hiPSCs	Multicellular	Streamlined, feeder-free adaptation of Ahmad's and Hayashi's protocols	Simplified culture methods and improved efficiency, enabling <i>in vitro</i> simulation of corneal and related structure development; successfully prepared functional corneal epithelial grafts for limbal stem cell deficiency models
FOSTER et al ^[21]	hiPSCs	Multicellular	Full 3D culture technology	Verified the reproducibility of the three-layer corneal organoid culture system
ISLA-MAGRANÉ et al ^[4]	hiPSCs	Multicellular	Combined 2D and 3D culture strategy	Constructed a corneal organoid model suitable for investigating intercellular interaction mechanisms, and successfully cultured the corneal Bowman's layer for the first time

hESCs表示人胚胎干细胞, hiPSCs表示人诱导多能干细胞。

hESCs represent human embryonic stem cells, while hiPSCs represent human induced pluripotent stem cells.

transcription-quantitative real-time polymerase chain reaction, RT-qPCR)可特异性分析目标基因的表达量及时序变化规律,为类器官中干细胞特性维持及分化进程调控提供转录水平的核心依据^[24-25];蛋白质印迹(Western blot, WB)技术能够实现目标蛋白表达量的定量检测,明确功能相关蛋白的表达趋势及含量特征^[26];免疫荧光染色技术凭借高特异性与可视化优势,不仅可精准定位标志物的细胞内表达位置、验证其特征性表达模式,还可支撑跨物种的类器官表征验证研究^[12-27];近年来,单细胞转录组测序技术逐步应用于该研究领域,可在单细胞分辨率下揭示类器官的细胞分化状态与异质性特征,为培养体系的优化与完善提供精准实验依据。

1.2.2 表征内容 角膜类器官的关键表征内容聚焦于结构完整性与功能成熟度两大核心维度,通过上述表征方法的应用,可全面评估其与天然角膜的生理相似性。结构完整性是评估类器官模拟能力的核心指标。KOC等^[22]利用无虹膜症患者hiPSCs生成的角膜类器官,经H&E染色观察显示:其半透明/透明区域可见分层上皮与类基质腔隙,细胞组织学特征与天然角膜相近。共聚焦三维重建进一步证实类器官具备清晰的三层结构,其中上皮层厚度约30~50 μm ,由5~7层细胞组成;基质层厚度可达100~150 μm ,包含大量梭形基质细胞;内皮层为单层扁平细胞,厚度约5~8 μm ^[23]。经图像分析软件量化,优化培养条件后的类器官上皮细胞密度可达2 000~3 000/mm²,基质细胞分布均匀性也显著提升^[23]。此外,基于3D打印技术的聚二甲基硅氧烷(polydimethylsiloxane, PDMS)微孔平台制备的人角膜基质细胞球体,展现出良好的结构一致性,为类器官构建提供了稳定的结构支撑^[25]。

功能成熟度主要通过分子标志物的特异性及时序性表达验证:在干细胞特性方面,WANG等^[24]通过RT-qPCR检测发现,随着培养时间延长,角膜缘干细胞标志物角蛋白15(keratin 15, KRT15)和P63表达量逐渐升高,证实类器官中存在具有自我更新能力的干细胞群体,而角膜基质细胞球体中多能干细胞标志物Krüppel样因子4(Krüppel-like factor 4, Klf4)、Nanog同源框蛋白(Nanog homeobox)、SRY相关高迁移率族框蛋白2(SRY-related HMG-box 2, Sox2)及神经嵴标志物神经上皮干细胞蛋白(neuroepithelial stem cell protein, Nestin)均呈阳性,提示该细胞球体

保留了部分原始干细胞特性,具备进一步分化与组织重塑的潜力^[25];在上皮功能方面,复旦大学研究团队通过免疫荧光染色发现,含表皮生长因子(epidermal growth factor, EGF)的培养条件可显著增强角膜上皮标志物角蛋白12(cytokeratin 12, KRT12)的表达,且类器官中 ΔN 亚型肿瘤蛋白p63 α (delta-N tumor protein p63 alpha, $\Delta\text{Np63}\alpha$)、KRT12、角蛋白3(cytokeratin 3, KRT3)、配对盒蛋白6(paired box protein 6, PAX6)和角蛋白14(cytokeratin 14, KRT14)的表达模式与天然角膜一致, $\Delta\text{Np63}\alpha$ 和KRT12在传代过程中表达稳定^[12],WB分析也显示上皮细胞中KRT3蛋白表达量随培养时间逐渐增加,于第3个月达到峰值,与mRNA表达趋势一致^[26];在基质功能方面,WB结果证实类器官基质层中存在胶原蛋白I、V、VI的表达,其中胶原蛋白I含量可达天然角膜基质的60%左右,角膜基质细胞球体也可稳定表达特征性标志物角蛋白聚糖(keratocan, KERA)^[25];跨物种研究进一步支撑了模型的通用性,BEDOS等^[27]对犬和猫角膜上皮类器官的免疫荧光染色显示,水通道蛋白1(aquaporin 1, AQP1)在两类动物的类器官及原始组织中均有mRNA和蛋白水平表达,从上皮谱系维持与基质表型角度验证了类器官的可比性。

2 化学品和化妆品眼刺激评价的应用

眼刺激评估是化学品和化妆品安全性评价的重要环节,传统Draize眼刺激试验因动物伦理争议和结果可变性面临严峻挑战^[28]。角膜类器官凭借其接近天然角膜的屏障功能和生理响应特性,成为体外眼刺激测试的新型模型。

2.1 结构完整性检测

结构完整性检测是评估眼刺激效应的基础方法。XU等^[29]研究了两种表面活性剂,十二烷基硫酸钠(sodium lauryl sulfate, SLS)和苯扎氯铵(benzalkonium chloride, BAK)对眼上皮的刺激反应。研究通过表面生物素标记法检测角膜上皮紧密连接(tight junction, TJ)屏障功能的破坏程度,并结合电泳迁移率变动分析(electrophoretic mobility shift assay, EMSA)监测应激转录因子激活蛋白1(activator protein 1, AP-1)和核因子 κB (nuclear factor kappa-B, NF- κB)的活性变化。该模型在短时(2 min)暴露后即可呈现浓度依赖性的刺激程度,且与Draize兔眼结果具有较高一致性。结果显示,0.3% SLS使AP-1活性

升高1.5倍,而当浓度升至3%时,AP-1和NF- κ B活性分别下降至对照的29%和28%,提示“应激激活-高剂量失活”的双相剂量-反应关系。将相同浓度系列与Draize兔眼最大平均评分(maximum average score, MAS)进行比对发现,0.3%、1%和3% SLS的MAS依次为1、16.9和59.2,与TJ破坏深度及转录因子活性变化呈同步递增关系。在一项新型3D重建人角膜模型MCTT HCE™评估固体物质眼刺激潜力的可行性的研究中^[30],该模型模拟了人角膜上皮的多层结构,经2% SLS处理后,H&E组织病理学检查可见上皮层厚度变化、细胞排列紊乱以及脱落/坏死等典型结构损伤,为刺激分级提供直观证据。

2.2 分子标志物检测

分子标志物检测为眼刺激效应提供量化指标。研究人员使用蛋白质组学方法,在重建的人角膜样上皮模型和人角膜上皮细胞系中,研究了眼刺激的候选生物标志物^[31]。研究者发现埃兹蛋白(Ezrin, EZR)在经SLS或BAK处理后表达显著上调,通过RT-qPCR和WB分析证实了这一点,荧光素酶基因报告实验进一步证实刺激可诱导EZR启动子活性,提示EZR表达可能作为检测眼刺激的潜在生物标志物^[32]。ISLAMAGRANÉ等^[33]以hiPSCs来源的多眼类器官为模型探究全反式维甲酸(all-trans retinoic acid, ATRA)对角膜类器官的调控作用,提出以“细胞角蛋白3(cytokeratin 3, CK3)与细胞角蛋白12(cytokeratin 12, CK12)的表达阳性率比值”作为上皮完整性的量化指标;比值越高,上皮分化与屏障性越完善,对应的刺激效应越弱。

2.3 功能指标测定

功能指标测定提升了刺激评估的精准度。角膜类器官的屏障功能可通过跨上皮电阻(trans-epithelial electrical resistance, TEER)值进行动态监测^[34]。角膜内皮的屏障功能对维持角膜基质脱水和透明度至关重要,而TEER可用于衡量角膜内皮的屏障功能^[35]。TAKEZAWA等^[36]以胶原玻璃化凝胶膜为基质,在适用于TEER测量的Millicell小室中培养人角膜上皮转化细胞(human corneal epithelial cell line-transformed, HCE-T),构建出具有5~6层细胞的人角膜上皮模型,满足TEER连续测定的稳定性要求。该模型将人角膜上皮培养于胶原玻璃质凝胶膜上,可在24 h内形成均一TJ,TEER值迅速升至平台期($\approx 1.2 \text{ k}\Omega \cdot \text{cm}^2$)并维持48 h变异 $< 5\%$,满足连续电阻监测的稳定性要

求。此外,MAITI等^[37]通过单细胞RNA测序(single-cell RNA sequencing, scRNA-seq)描绘了4月龄的人类角膜类器官与供体角膜的转录组细胞命运图谱,识别出类器官包含上皮、基质、内皮样细胞簇及早期发育状态亚群,并验证上皮标志物KRT3和基质标志物KERA的空间分布,该多层次表征为刺激评估中解读“外源刺激或信号异常导致的上皮分化紊乱、基质重塑与内皮功能受损”等机制性终点提供了依据。

3 眼科药物筛选的应用

角膜类器官凭借其结构功能完整性,为药物筛选提供了更接近体内环境的测试平台^[38]。它能够加快候选药物的早期筛选过程,缩短研发时间,模拟天然微环境以进行疗效测试^[39-40]。

3.1 角膜病治疗药物

在角膜疾病治疗药物筛选方面,角膜类器官模型展现出独特优势。HIRAYAMA等^[41]通过构建功能性iPSC来源角膜内皮细胞(induced pluripotent stem cell-derived corneal endothelial cell, iPSC-CEC)体外培养体系,为角膜内皮类器官用于角膜疾病治疗药物筛选奠定关键基础。该团队利用iPSC来源的角膜内皮细胞产品CLS001构建类器官模型,该模型能筛选出可显著提高细胞体外存活率并长期维持细胞功能稳定的小分子药物或生长因子,为细胞的体外制备提供优化方案。AGRAWAL等^[42]构建了2019新型冠状病毒(2019 novel coronavirus, 2019-nCoV)感染的角膜类器官模型,并结合生物信息技术中的功能富集分析等研究方法筛选药物,发现当角膜组织感染2019-nCoV时,金柑苷对应的靶基因表达水平出现显著升高。金柑苷作为一种具有抗病毒、抗炎和抗菌作用的传统药物,可治疗2019-nCoV感染性角膜病。

3.2 抗炎药物

抗炎药物筛选是角膜类器官模型的重要应用领域。复旦大学附属眼耳鼻喉科医院洪佳旭教授团队^[12]建立了可长期培养的人角膜上皮类器官,重现了角膜上皮的细胞谱系和基因表达特征。研究人员通过高渗透压处理建立了干眼症类器官模型,并分别用三种不同的药物[地夸磷索滴眼液^[43]、环孢素A^[44]和重组牛碱性纤维细胞生长因子(recombinant bovine basic fibroblast growth factor, rb-bFGF)]^[45]处

理类器官,以模拟角膜上皮对药物的响应。结果表明,环孢素A显著抑制了炎症反应,地夸磷索降低了炎症因子的表达水平,而bFGF促进了干眼症模型中的细胞增殖,提示该类器官模型可差异化评价抗炎药物的多维药效,适用于候选化合物的早期筛选。此外,CHACÓN等^[46]提出的人源角膜上皮体外模型QobuR,在脂多糖(lipopolysaccharide, LPS)或白细胞介素-1 β (interleukin-1 beta, IL-1 β)诱导下重现促炎因子释放与屏障破坏;筛选时通过检测药物对白细胞介素-6(interleukin-6, IL-6)、肿瘤坏死因子- α (tumor necrosis factor- α , TNF- α)的抑制情况,分析NF- κ B/丝裂原活化蛋白激酶(mitogen-activated protein kinase, MAPK)通路活性与屏障修复能力,人源角膜上皮体外模型QobuR体现出生理相关性与初筛通量兼具的特点,可与类器官疾病模型形成互补。

3.3 抗感染药物

在抗感染药物筛选领域,角膜类器官提供了关键助力。角膜和角膜内皮细胞表达血管紧张素转换酶2(angiotensin-converting enzyme 2, ACE2)和跨膜丝氨酸蛋白酶2(transmembrane protease serine 2, TMPRSS2)^[47-48],并且感染严重急性呼吸综合征冠状病毒2(severe acute respiratory syndrome coronavirus 2, SARS-CoV-2)后可产生炎症反应,这表明眼部是潜在的病毒入侵途径^[49]。基于hESCs衍生的眼类器官为阻断ACE2/TMPRSS2途径的抗SARS-CoV-2药物筛选提供了生理相关模型。眼表外胚层亚群内16%细胞表达ACE2,6%表达TMPRSS2,二者在角膜-缘相关簇共定位,使该部位感染负荷最高。给药后24至48 h内,通过RT-qPCR定量病毒亚基因组RNA(subgenomic RNA, sgRNA)并结合批量RNA测序(bulk RNA-seq)测定基因组覆盖度,可同步评估候选药物对病毒进入及复制的抑制效果^[50]。SASANO等^[51]研究者采用永生生化人角膜上皮细胞系(HCE-T),构建人腺病毒(human adenovirus, HAdV)感染模型,替代传统兔眼感染模型。该模型成功筛选出两种有效抑制HAdV的药物(Brincidofovir、3'-脱氧-3'-氟胸苷),可在2天内评估药物的抗腺病毒活性与细胞毒性,且对多种HAdV亚型(C1、C2、E4、C6)均有效。

4 总结与展望

本文从构建途径、表征体系至应用场景三个

层次系统梳理了角膜类器官的最新进展。总体来看,角膜类器官能够高度模拟天然角膜结构与功能,为相关研究提供了理想模型。在构建方面,原代角膜细胞与干细胞培养技术不断发展,其中干细胞来源(如角膜缘干细胞、hiPSCs、hESCs)因具有分化潜能等优势,为构建包含上皮、基质和内皮的完整角膜类器官提供了可能。在表征技术层面,采用形态学、分子与功能多维度检测,可有效保障类器官的标准化制备及检测结果的可靠性。在应用方面,角膜类器官在眼刺激评估上可有效弥补传统Draize试验的局限性。在药物筛选方面,角膜类器官在角膜疾病、炎症、感染等场景展现出良好的应用前景,为候选药物早期遴选与机制验证提供了新的证据链。

与传统研究模型相比,角膜类器官展现出不可替代的核心优势。在结构层面,其成功复现了天然角膜上皮、基质、内皮的三层分层结构,细胞组成与空间排布接近体内生理状态,上皮层厚度达30~50 μ m,基质层可达100~150 μ m^[23];且基质中胶原蛋白I含量可达天然角膜的60%左右,为功能模拟提供了结构基础^[25]。在功能层面,角膜类器官不仅具备完整的角膜屏障功能,可通过TEER值动态监测屏障完整性,还能重现角膜干细胞自我更新、上皮分化等生理过程,分子标志物KRT3及KRT12表达与天然角膜高度同源^[33-36]。在应用价值层面,该模型既减少了动物实验的伦理争议,又弥补了二维细胞模型无法模拟复杂微环境的缺陷,其对人体生理反应的捕捉能力显著优于传统模型,使得眼刺激评估与药物筛选结果更具临床参考价值,同时为罕见角膜疾病的个体化研究提供了患者特异性模型。

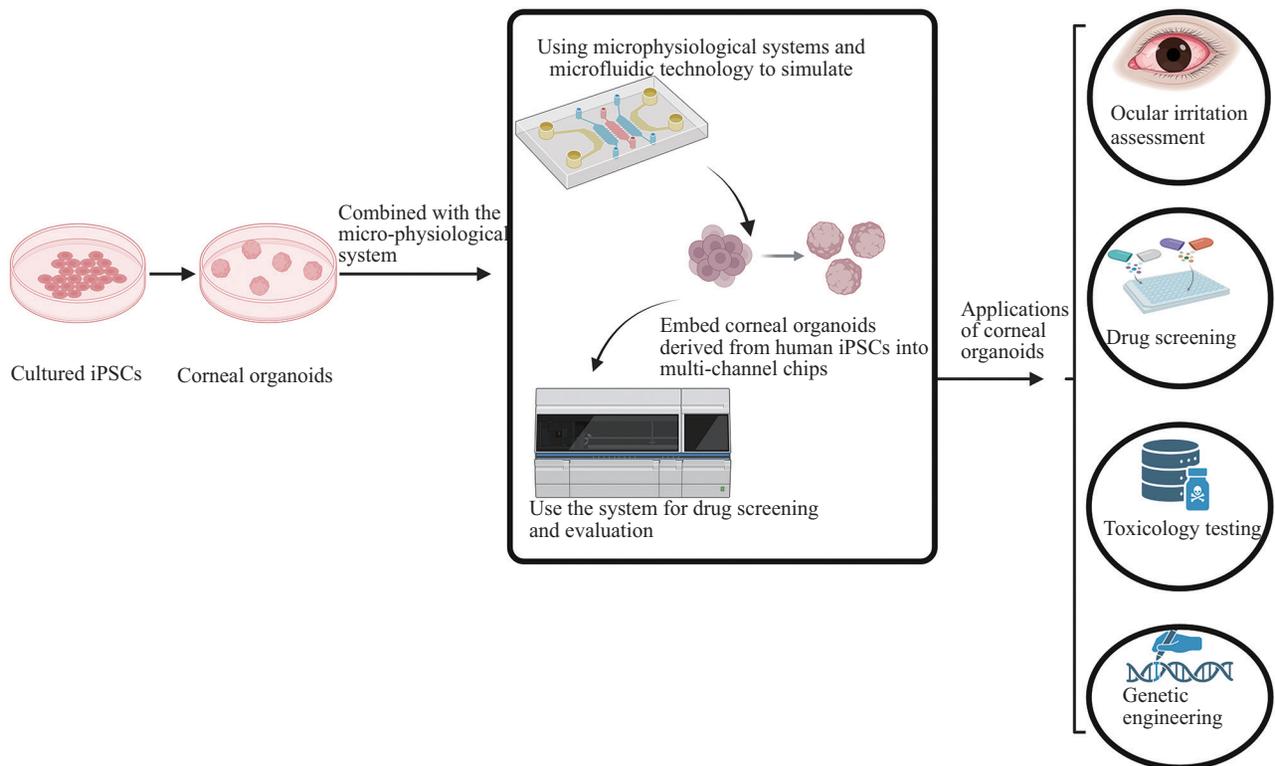
尽管角膜类器官已展现出广阔应用前景,但要实现临床转化仍需攻克多重关键难题。其一,构建标准化不足制约了结果的可重复性,不同实验室采用的细胞来源、培养基质成分、诱导分化方案存在差异,导致类器官在结构厚度、细胞密度、标志物表达水平等方面存在批间差异,缺乏统一的质控标准^[52]。其二,均一性与规模化制备面临挑战,在当前类器官构建过程中,干细胞分化方向的精准调控难度较大,部分类器官存在结构发育不完全、功能成熟度不均等问题,且现有技术难以实现低成本、大规模的标准化生产,无法满足高通量筛选与临床应用的批量需求^[53-54]。其三,诱导效率与功能完整性

有待提升,角膜类器官的培养周期较长,部分干细胞诱导体系的分化效率偏低,且在模拟角膜神经支配、泪液-角膜相互作用等复杂生理过程方面仍存在欠缺,功能模拟的全面性不足。

展望未来,与微生理系统结合将成为重要发展方向(图1)。微流控(microfluidics)技术可精准调控培养微环境,模拟眼表泪液流动、眼压变化等生理条件,解决传统静态培养无法模拟药物动态渗透的问题^[55]。CHO等^[56]将人iPSC来源的角膜类器官(含上皮-基质双层结构,高表达KRT3/KRT12等标志物)嵌入多通道芯片。该系统通过上层微通道灌注含药培养液,下层通道维持营养梯度与生理眼压,集成多检测单元实现自动化监测。筛选时通过TEER值、荧光染色、RT-qPCR等多指标,评估药物对角膜屏障、细胞活力及炎症的影响。相较于传统模型,其筛选周期缩至24 h,药物透过率与人体临床结果相关性

($R^2=0.85$)更高,为眼科药物临床前毒性评估提供了标准化高通量方案。BENNET等^[57]构建了一种多孔膜嵌入的微流控平台,将永生化的人角膜上皮细胞在经纤连蛋白功能化处理的膜表面培养,以创建模拟人角膜上皮屏障特性的微型工程化角膜上皮芯片模型。通过观察药物透过角膜类器官的情况,分析不同药物的角膜通透性,以此评估潜在治疗药物在角膜的转运特征,进而筛选出具有合适角膜渗透性能的药物。

综上所述,角膜类器官因其对角膜层次结构与屏障功能的高度复现,正在成为眼科学研究与药物开发的核心体外平台。展望未来,通过建立可操作的构建与质控标准并与微生理系统深度耦合,其在眼刺激性评价与药物筛选等场景的临床相关性与通量将进一步提升,从而以更高的精准度与可重复性推动眼科基础与转化研究的规范化发展。



该图展示了基于人诱导多能干细胞(human induced pluripotent stem cells, hiPSCs)的角膜类器官在微生理系统中的应用步骤。先培养hiPSCs,再将其诱导分化为角膜类器官;利用微生理系统与微流控技术,将角膜类器官嵌入多通道芯片中;通过该系统开展药物筛选、毒性测试等评估,最终实现角膜类器官在眼刺激评估、药物筛选、毒性检测、基因工程等领域的应用。

This figure illustrates the application process of corneal organoids derived from hiPSCs (human induced pluripotent stem cells) in microphysiological systems: firstly, culture hiPSCs, then induce their differentiation into corneal organoids; using microphysiological systems and microfluidic technology, the corneal organoids are embedded in multi-channel chips; through this system, evaluations such as drug screening, toxicity testing, etc. are conducted to ultimately achieve the application of corneal organoids in areas such as eye stimulation assessment, drug screening, toxicity detection, and genetic engineering.

图1 角膜类器官的应用

Fig.1 The applications of corneal organoids

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