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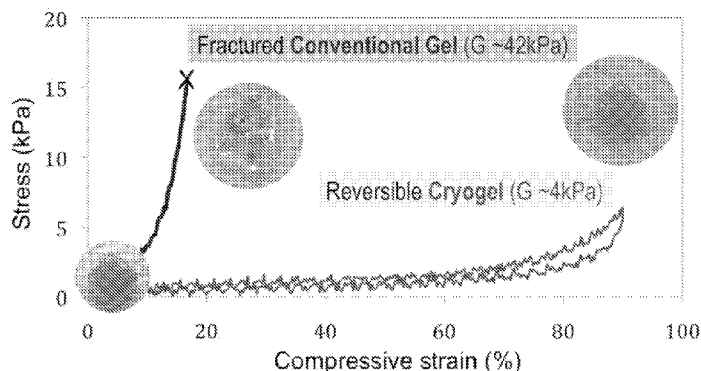
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(54) Title: INJECTABLE PREFORMED MACROSCOPIC 3-DIMENSIONAL SCAFFOLDS FOR MINIMALLY INVASIVE ADMINISTRATION

Figure 2.



(57) Abstract: The invention provides polymer compositions for cell and drug delivery.

## **INJECTABLE PREFORMED MACROSCOPIC 3-DIMENSIONAL SCAFFOLDS FOR MINIMALLY INVASIVE ADMINISTRATION**

### **STATEMENT AS TO FEDERALLY SPONSORED RESEARCH**

5 This invention was made with U.S. Government support under Grant Number R01 DE013349 from the National Institutes of Health. The Government has certain rights in the invention.

### **FIELD OF THE INVENTION**

The invention relates to polymer scaffolds for drug and cell delivery systems.

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### **BACKGROUND**

Tissue engineering is an approach for regeneration, replacement, and improvement of the functions of damaged tissues by manipulating materials according to the specific structure or function of the desired tissues. Porous and biodegradable polymer scaffolds are utilized as a structural supporting matrix or as a cell adhesive substrate for cell-based tissue engineering. A major side effect of the surgical implantation of three dimensional scaffolds is the trauma created by physicians while treating patient illness. For example, current technologies for the surgical implantation of three dimensional scaffolds involve incisions that lead to patient pain, bleeding, and bruising. As such, there is a pressing need in the art to develop less invasive structured polymer scaffolds.

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### **SUMMARY OF THE INVENTION**

The present invention provides compositions and a minimally-invasive method of injecting preformed large macroporous polymer-based hydrogels that are loaded with cargo such as cells and/or therapeutics such as small molecule compounds, proteins/peptides (e.g., antigens to which an immune response is desired), or nucleic acids. Hydrogel (also called aquagel) is a network of polymer chains that are hydrophilic, and are sometimes found as a colloidal gel in which water is the dispersion medium. Hydrogels are highly absorbent (they can contain over 99% water) natural or synthetic polymers that possess a degree of flexibility very similar to natural tissue, due to their significant water content. Unlike conventional hydrogels, a unique characteristic of these cell/scaffold constructs described here is that when an appropriate shear stress is applied, the deformable hydrogel is dramatically and reversibly compressed (up to 90% of its volume) resulting in

injectable macroporous preformed scaffolds. This property allows gel/cell constructs to be delivered via syringe with high precision to target sites.

Accordingly, the invention features a cell-compatible highly crosslinked hydrogel polymer composition comprising a high density of open interconnected pores, wherein the hydrogel is characterized by shape memory following deformation by compression or dehydration. The hydrogel comprises polymers that are modified, e.g., sites on the polymer molecule are modified with a methacrylic acid group (methacrylate (MA)) or an acrylic acid group (acrylate). An exemplary modified alginate is MA-alginate (methacrylated alginate). In the case of Methacrylated-alginate, 50% corresponds to the degree of methacrylation of alginate. This means that every other repeat unit contains a methacrylated group. The degree of methacrylation can be varied from 1% to 90%. Above 90%, the chemical modification may reduce solubility of the polymer water-solubility. Polymers can also be modified with acrylated groups instead of methacrylated groups. The product would then be referred to as an acrylated-polymer. The degree of methacrylation (or acrylation) can be varied for most polymers. However, some polymers (e.g. PEG) maintain their water-solubility properties even at 100% chemical modification. After crosslinking, polymers normally reach near complete methacrylate group conversion indicating approximately 100% of cross-linking efficiency. For example, the polymers in the hydrogel are 50-100% crosslinked (covalent bonds). The extent of crosslinking correlates with the durability of the hydrogel. Thus, a high level of crosslinking (90-100%) of the modified polymers is desirable.

For example, the highly crosslinked hydrogel polymer composition is characterized by at least 50% polymer crosslinking (e.g., 75%, 80%, 85%, 90%, 95%, 98%). The high level of crosslinking confers mechanical robustness to the structure. However, the % crosslinking is generally less than 100%. The composition is formed using a free radical polymerization process and a cryogelation process.

The cryogel comprises at least 75% pores, e.g., 80%, 85, 90%, 95%, and up to 99% pores. The pores are interconnected. Interconnectivity is important to the function of the composition, as without interconnectivity, water would become trapped within the gel. Interconnectivity of the pores permits passage of water (and other compositions such as cells and compounds) in and out of the structure. In a fully hydrated state, the composition comprises between 90-99% water. In a compressed or dehydrated hydrogel, up to 50%, 60%, 70% of that water is absent.

In some examples, the composition comprises a cell adhesion composition chemically linked, e.g., covalently attached, to the polymer. For example, the cell adhesion composition comprises a peptide comprising an RGD amino acid sequence.

For cell therapy, the composition comprises a eukaryotic cell in one or more of the open interconnected pores. For example, the eukaryotic cell comprises a live attenuated cancer cell (e.g., irradiated cell acts as cancer antigen). Optionally, the composition comprises a biomolecule in one or more of the open interconnected pores. Biomolecules include small molecule compounds (e.g., less than 1000 daltons in molecular mass), nucleic acids, proteins or fragments thereof, peptides. Exemplary biomolecules include granulocyte macrophage-colony stimulating factor (GM-CSF), large nucleic acid compositions such as plasmid DNA, and smaller nucleic acid compositions such as CpG oligodeoxynucleotide (CpG-ODN).

Preferably, the cryogel compositions are injectable through a hollow needle. Upon compression or dehydration, the composition maintains structural integrity and shape memory properties, i.e., after compression or dehydration, the composition regains its shape after it is rehydrated or the shear forces of compression are removed/relieved

In one example, the composition comprises an alginate-based hydrogel. Other examples of polymer compositions from which the cryogel is fabricated include hyaluronic acid, gelatin, heparin, dextran, carob gum, PEG, PEG derivatives including PEG-co-PGA and PEG-peptide conjugates. The techniques can be applied to any biocompatible polymers, e.g. collagen, chitosan, carboxymethylcellulose, pullulan, polyvinyl alcohol (PVA), Poly(2-hydroxyethyl methacrylate) (PHEMA), Poly(N-isopropylacrylamide) (PNIPAAm), Poly(acrylic acid) (PAAc), etc. The shape of the cryogel is dictated by a mold and can thus take on any shape desired by the fabricator, e.g., various sizes and shapes (disc, cylinders, squares, strings, etc.) are prepared by cryogenic polymerization. Injectable cryogels can be prepared in the micrometer-scale to millimeter-scale. Volume varies from a few hundred  $\mu\text{m}^3$  to over  $100\text{ mm}^3$ . An exemplary scaffold composition is between  $1\text{ mm}^3$  and  $10\text{ mm}^3$  in size. In another example, the cryogel is defined by volume. For example, the cryogel scaffold composition comprises 25  $\mu\text{l}$  in volume in a hydrated state. The gels are hydrated in an aqueous medium. Exemplary cryogel compositions are typically in the range of 10-70  $\mu\text{l}$  in volume and may be larger or smaller depending on the use and site to be treated.

The cryogel acts as a sponge. The cryogels are sterilized. In some applications, the cryogels are hydrated, loaded with cells or other compounds (e.g., small molecules and other

compounds, nucleic acids, or proteins/peptides) and loaded into a syringe or other delivery apparatus. For example, the syringes are prefilled and rehydrated until use. In another example, the cryogel is dehydrated, e.g., lyophilized, optionally with a drug or other compound loaded in the gel and stored dry or rehydrated. Prior to administration, the cryogel-loaded syringe or apparatus is contacted with a solution containing cells and/or other compounds to be delivered. For example, the barrel of the cryogel pre-loaded syringe is filled with a physiologically-compatible solution, e.g., phosphate-buffered saline (PBS). In practice, the cryogel is administered to a desired anatomical site followed by the volume of solution, optionally containing other ingredients, e.g., cells or therapeutic compounds. For example, a 25  $\mu$ l cryogel is administered with approximately 200  $\mu$ l of solution. The cryogel is then rehydrated and regains its shape integrity in situ. The volume of PBS or other physiologic solution administered following cryogel placement is generally about 10 times the volume of the cryogel itself.

Also within the invention are methods of using the cryogel compositions. For example, a method for repairing, regenerating, or restructuring a tissue comprises administering to a subject the device/cryogel composition described above. If the cryogel contains cells, the cells retain their viability after passage through the syringe or delivery apparatus, cells proliferate in the device/cryogel, then leave the cryogel composition to function outside of the gel and in the bodily tissues of the recipient subject. For example, the cryogel is administered subcutaneously as a dermal filler, thereby restructuring the tissue, e.g., dermal tissue. In another example, the cryogel device comprises a stem cell and the composition/device is administered to a damaged or diseased tissue of a subject, thereby repairing or regenerating the tissue, e.g., muscle, bone, kidney, liver, heart, bladder, ocular tissue or other anatomic structures.

In another example, the cryogel compositions are used in a method for delivering genetic material, e.g., to deliver plasmid DNA.

In yet another example, a method for eliciting an immune response, is carried out by administering to a subject a cryogel composition as described above that further contains a microbial pathogen or tumor cell to which an immune response is elicited. Such a vaccine composition is administered prophylactically or therapeutically.

Cell viability is minimally affected or unaffected by the shear thinning process, and gel/cell constructs stay fixed at the point of introduction. As such, these gels are useful for

the delivery of cells and other compounds to target biological sites in therapeutic methods such as tissue regeneration (cell therapy, drug delivery) efforts.

The invention provides a device comprising an injectable scaffold composition with open, interconnected macropores. Preferably, the scaffold composition is injectable through a hollow needle. For example, the scaffold composition is injectable through a 16-gauge, an 18-gauge, a 20-gauge, a 22-gauge, a 24-gauge, a 26-gauge, a 28-gauge, a 30-gauge, a 32-gauge, or a 34-gauge needle. Upon compression, the scaffold composition maintains shape memory properties. The scaffold composition also maintains structural integrity in that it is flexible (*i.e.*, not brittle) and does not break under sheer pressure. In one aspect, the scaffold composition is an alginate-based hydrogel. The scaffold composition is between 0.01 mm<sup>3</sup> and 100 mm<sup>3</sup>. For example, the scaffold composition is between 1 mm<sup>3</sup> and 75 mm<sup>3</sup>, between 5 mm<sup>3</sup> and 50 mm<sup>3</sup>, between 10 mm<sup>3</sup> and 25 mm<sup>3</sup>. Preferably, the scaffold composition is between 1 mm<sup>3</sup> and 10 mm<sup>3</sup> in size.

The hydrogel, if to be used to transplant cells, comprises pores to permit the structure to be seeded with cells and to allow the cells to proliferate and migrate out to the structure to relocate to bodily tissues such as the injured or diseased muscle in need of repair or regeneration. For example, cells are seeded at a concentration of about  $1 \times 10^4$  to  $1 \times 10^7$  cells/ml and are administered dropwise onto a dried hydrogel device. The dose of the gel/device to be delivered to the subject is scaled depending on the magnitude of the injury or diseased area, *e.g.*, one milliliter of gel for a relatively small defect and up to 50 mls of gel for a large wound. Preferable the hydrogel comprises macropores, *e.g.*, pores that are characterized by a diameter of 2  $\mu\text{m}$ -1mm. The average pore size comprises 200  $\mu\text{m}$ . Cells can move into and out of the cryogel via the open interconnected pores as a typical cell comprises a diameter or about 20  $\mu\text{m}$ . The gel delivery devices are suitable for treatment of human beings, as well as animals such as horses, cats, or dogs.

Preferably, the hydrogel is characterized by shape-memory. The polymer chains of the hydrogel are covalently crosslinked and/or oxidized. Such hydrogels are suitable for minimally-invasive delivery. Prior to delivery into the human body, such a hydrogel is lyophilized and compressed prior to administration to a subject for the regeneration of muscle tissue. Minimally-invasive delivery is characterized by making only a small incision into the body. For example, the hydrogel is administered to a muscle of a subject using a needle or angiocatheter.

Injectable cryogels have been designed to pass through a hollow structure, e.g., very fine needles, such as 18-30G needles, as a tissue filler for applications in cosmetic surgery, for tissue augmentation, and tissue repair which may be due to injury caused by disease and external trauma. The injectable cryogels may be molded to a desired shape, in the form of rods, square, disc, spheres, cubes, fibers, foams. In some situations, the injectable cryogels can be used as scaffolds for cell incorporation. The formed cryogel is mixed with cells to provide tissue engineered products, or can be used as a bio-matrix to aid tissue repair or tissue augmentation. The incorporated cells can be any mammalian cells (e.g. stem cells, fibroblasts, osteoblasts, chondrocytes, immune cells, etc).

Injectable cryogels can also be produced in a form in which pharmaceuticals or other bioactive substances (e.g. growth factors, DNA, enzymes, peptides, drugs, etc) are incorporated for controlled drug delivery.

Injectable cryogels may be further functionalized by addition of a functional group chosen from the group consisting of: amino, vinyl, aldehyde, thiol, silane, carboxyl, azide, alkyne. Alternatively, the cryogel may be further functionalized by the addition of a further cross-linker agent (e.g. multiple arms polymers, salts, aldehydes, etc). The solvent may be aqueous, and in particular acidic or alkaline. The aqueous solvent may comprise a water-miscible solvent (e.g. methanol, ethanol, DMF, DMSO, acetone, dioxane, etc).

The cryo-crosslinking takes place in a mold and the injectable cryogels may be degradable. The pore size can be controlled by the selection of the main solvent used, the incorporation of a porogen, the freezing temperature applied, the cross-linking conditions (e.g. polymer concentration), and also the type and molecule weight of the polymer used.

Therapeutic and cosmetic uses are described throughout the specification. Exemplary applications include use as a dermal filler, in drug delivery, as a wound dressing, for post surgical adhesion prevention, and for repair and/or regenerative medical applications such as cell therapy, gene therapy, tissue engineering, immunotherapy.

Biomolecules are purified naturally-occurring, synthetically produced, or recombinant compounds, e.g., polypeptides, nucleic acids, small molecules, or other agents. For example, the compositions include GM-CSF, pathogen-associated molecular patterns (PAMPs) such as CpG-ODN, and tumor antigens or other antigens. The compositions described herein are purified. Purified compounds are at least 60% by weight (dry weight) the compound of interest. Preferably, the preparation is at least 75%, more preferably at least 90%, and most preferably at least 99%, by weight the compound of interest. Purity is

measured by any appropriate standard method, for example, by column chromatography, polyacrylamide gel electrophoresis, or HPLC analysis.

Other features and advantages of the invention will be apparent from the following description of the preferred embodiments thereof, and from the claims. Unless otherwise  
5 defined, all technical and scientific terms used herein have the same meaning as commonly understood by one of ordinary skill in the art to which this invention belongs. Although methods and materials similar or equivalent to those described herein can be used in the practice or testing of the present invention, suitable methods and materials are described  
10 below. All published foreign patents and patent applications cited herein are incorporated herein by reference. Genbank and NCBI submissions indicated by accession number cited herein are incorporated herein by reference. All other published references, documents, manuscripts and scientific literature cited herein are incorporated herein by reference. In the case of conflict, the present specification, including definitions, will control. In addition, the materials, methods, and examples are illustrative only and not intended to be limiting.

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### DESCRIPTION OF THE DRAWINGS

Figure 1 is a series of photomicrographs showing injectable alginate-based hydrogel systems. Rhodamine-labeled 1% methacrylated (MA)-alginate gels with various sizes and shapes (disc, cylinders, squares, etc.) were prepared by cryogenic polymerization. Square  
20 shape injectable scaffolds are shown. Fluorescent macroscopic gels suspended in 0.2 mL of phosphate buffered saline (PBS) were injected via 16-gauge diameter needles with a complete geometric restoration as illustrated in the microscopy image before and after injection.

Figure 2 is a line graph demonstrating stress vs. strain curves for conventional  
25 nanoporous and macroporous 1% rhodamine-labeled MA-alginate gels subjected to compression tests. In contrast to the brittle nature of the conventional nanoporous gels, alginate cryogels have the ability to withstand reversibly large deformation while keeping their structural integrity and shape memory properties.

Figure 3A is a fluorescence photograph showing minimally invasive subcutaneous  
30 injection of macroporous scaffolds into the lower back of mice. Figure 3B is a photograph showing hydrogel localization after subcutaneous injection of preformed rhodamine-labeled 1% MA-alginate gels (4mm x 4mm x 1mm) in the subcutis of a mouse after 3 days. Figure 3C is a photograph showing merged phase-contrast and fluorescence of a subcutaneously

injected rhodamine-labeled alginate macroporous scaffold with restoration of geometry after placement. Figure 3D is a photograph of a subcutaneously injected rhodamine-labeled alginate macroporous scaffold with restoration of geometry. Dashed lines denote square-shaped geometry restoration of inserted shape-defined scaffolds. Figure 3E is a line graph showing *in vivo* sustained release profiles of crosslinked (chemically anchored) or encapsulated (physically entrapped) rhodamine-labeled bovine serum albumin (BSA) to injected cryogels. Upon dissection 3 days post-injection, rhodamine-labeled gels recovered their square shape features, had soft consistencies, and were integrated into the surrounding tissues. Values represent mean and standard deviation (n= 4).

Figure 4 is a series of photographs showing that injectable pre-seeded scaffolds promote *in situ* localization of bioluminescent B16 cells. Figure 4A is a photograph showing alginate cryogel scaffolds (white) and rhodamine-labeled alginate scaffolds (pink). Bioluminescence B16-F10 cells were seeded on 1% RGD-modified MA-Alginate cryogels at a concentration of  $200 \times 10^3$  cells/scaffold. Luciferase transected melanoma cells were cultured for 6 hr into rhodamine-labeled alginate cryogels before injection into mice. Figure 4B is a photograph showing optical live imaging to demonstrate that macroporous alginate gels are suitable for homogenous encapsulation and distribution of bioluminescent B16 cells. Figure 4C is a photograph showing scanning electron microscope (SEM) imaging to demonstrate that macroporous alginate gels are suitable for homogenous encapsulation and distribution of bioluminescent B16 cells. Figure 4D is a photograph showing live fluorescence imaging of subcutaneous injections of gels. Figure 4E is a photograph showing live fluorescence imaging of subcutaneous injections of gels at 2 days post-injection. Figure 4F is a photograph showing live fluorescence imaging of subcutaneous injections of gels at 9 days post-injection. Bioluminescent B16-cells were visualized by live imaging. Arg-Gly-Asp (RGD; cell-adhering peptide)-Alginate scaffolds significantly promoted target delivery of cells compared to unmodified gels. By contrast, injection of free cells (bolus) did not promote localization of cells (bioluminescent signal absent).

Figure 5 is a diagram showing preparation of an autologous alginate-based active cryogel vaccine containing living attenuated B16-F10 melanoma cells for the prophylactic and therapeutic treatments of skin cancer in mice. CpG (adjuvant) & GM-CSF (cytokine) loaded RGD-modified alginate cryogels were seeded with irradiated B16-F10 cells and cultured for 6h prior animal vaccination via subcutaneous injection.

Figure 6 is a bar graph showing immunity against B16F10 challenge induced by different vaccination protocols. Infection-mimicking microenvironment from injectable alginate-based cryogel conferred potent anti-tumor immunity. A comparison of the survival time in mice treated with Cryogels; (C) antigen + GM-CSF + CpG-ODN ( $0.2 \times 10^6$  irradiated B16F10 melanoma cells +  $3 \mu\text{g}$  GM  $100 \mu\text{g}$  CpG), antigen + GM-CSF ( $0.4 \times 10^6$  -CSF + (D) 6 irradiated B16F10 melanoma cells +  $3 \mu\text{g}$  GM), (E) antigen + CpG-ODN ( $0.4 \times 10^6$  irradiated B16F10 melanoma cells +  $100 \mu\text{g}$  CpG). Animals were also immunized using  $0.4 \times 10^6$  B16F10 melanoma cells transduced with the murine GM-CSF gene (A) and bolus injections of  $0.4 \times 10^6$  irradiated B16F10 melanoma cells +  $3 \mu\text{g}$  GM-CSF +  $100 \mu\text{g}$  CpG-ODN (B). Mice were challenged (Day 6) with  $10^5$  B16-F10 melanoma tumor cells and monitored for the onset of tumor occurrence. Each group contained 10 mice.

Figure 7A and B are line graphs showing that local delivery of cryogel vaccine promotes recruitment of CD11c(+) DCs and proliferation of CD3(+) T cells. (A) Cell recruitment and expansion at the injection site and secondary lymphoid organs (LN, spleen) in response to cryogel vaccination and challenge. The in vivo proliferative responsiveness of the cells was assessed by cell counting. (B) Cryogel matrices co-delivering GM-CSF, CpG-ODN, and presenting attenuated B16F10 melanoma cells stimulate potent local and systemic CD11c(+) DCs and CD3(+) T cells in secondary lymphoid organs (LN and spleen) as well as the cryogel scaffolds. Values in (A-B) represent mean and standard deviation (n=5).

Figure 8 is a line graph showing controlled release of GM-CSF for DC recruitment and programming. Cumulative release of GM-CSF from Alginate-based cryogel matrices over a period of 2 weeks; (A)  $3 \mu\text{g}$  GM-CSF, (B)  $3 \mu\text{g}$  GM-CSF +  $100 \mu\text{g}$  CpG-ODN, (C) PLG microsphere containing  $3 \mu\text{g}$  GM-CSF. Values represent mean and standard deviation (n=5).

Figure 9 is a line graph showing cryogel-enhanced plasmid DNA transfection. Relative bioluminescence over time for cells transfected with a luciferase expression plasmid ( $150 \mu\text{g}/\text{cryogel}$ , 2 injections/animal). Cryogels assist in efficient delivery and cell transfection of polyethylenimine (PEI) /plasmid DNA (blue) when compared to naked PEI/DNA (red). Values represent mean and standard deviation (n=5). The inset is a photograph that shows a

representative localized light emission in response to application of firefly luciferin after 29d post injection in mice inoculated with PEI/DNA -containing cryogels.

Figure 10 is a line graph showing  $^1\text{H}$  NMR for MA-alginate with its characteristic vinylic peaks ( $\sim 5.3\text{-}5.8$  ppm). Deuterated chloroform ( $\text{D}_2\text{O}$ ) was used as solvent, and the  
5 polymer concentration was 1 % wt/v. The efficiency of alginate methacrylation was calculated based on the ratio of the integrals for alginate protons to the methylene protons of methacrylate. MA-alginate macromonomer was found to have approximately a degree of methacrylation (DM) of 49%.

Figure 11 is a series of line graphs showing  $^1\text{H}$  NMR of uncross-linked (left) and  
10 cryopolymerized (right) 1% wt/v MA-alginate in  $\text{D}_2\text{O}$ . Cryogelation is induced directly in an NMR tube. 1mL of macromonomer solution containing the initiator system was transferred into the NMR tube before cryogenic treatment at  $-20^\circ\text{C}$  for 17hr. The vinylic peaks (between 5.3-5.8 ppm) disappeared after cryo-crosslinking. The conversion was evaluated by comparing the relative peaks of uncross-linked and cross-linked methylene protons.

Figure 12 is a series of photographs showing scanning electron microscopic images of  
15 free PLGA microspheres (top left) and PLGA microspheres dispersed in a alginate square-shaped cryogel (top right and bottom).

Figure 13 is a series of photographs showing that cells injected via the cryogels have a  
low apoptosis and cell death. In this example, a RGD-containing peptide was chemically  
20 attached to the cryogels to improve cell adhesion to the 3D-structure alginate-based scaffolds. Cell viability, spreading, and actin cytoskeleton organization process was assessed by confocal microscopy. Cells colonize the porous structure of the alginate-based cryogel and were observed to be growing inside the pores. (Left) live/dead cell viability assay of D1 mesenchymal stem cells (MSC, 1d incubation post-injection) and (right) confocal image  
25 showing injected D1 MSC (6d incubation post-injection) in RGD-modified MA-alginate cryogels.

### DETAILED DESCRIPTION

A major drawback in today's surgical implantation of three dimensional scaffolds is  
the trauma created by physicians while administering the scaffolds/devices. The  
30 compositions and methods described herein reduce the cost and invasiveness of the tissue engineering approach. Prior to the invention described herein, tissue engineering used devices and polymer scaffolds that required surgical implantation. Implantation of polymer scaffolds at a surgical site requires anesthesia and incisions, each of which treatment methods

have undesirable side effects. Described herein are compositions and methods that allow tissue engineers and surgeons to engage in tissue engineering applications in a less invasive manner, thereby removing the need for surgical implantation. As described in detail below, injectable scaffolds were developed to reduce the invasiveness of a tissue engineering system, thereby eliminating the need for, or reduce the size of, any incisions required to implant the material. For a system to be injectable, it must be capable of flowing through a hollow small-bore needle. Methods of implantation of a preformed scaffold or injection of a liquid for polymerization in situ presented a number of challenges including short response time, proper gelation conditions, appropriate mechanical strength and persistence time, biocompatibility, and the likelihood to protect protein drugs or cells in some adverse environments. In order to overcome these limitations, deformable fully-crosslinked and pre-shaped porous scaffold that is easily prepared, processed, and injected through the needle of a syringe was developed.

Earlier injectable hydrogels (e.g., US Pat. 6,129,761) allowed for the formation of scaffolds in situ but had several major drawbacks. First, potential problems occur with in situ polymerization including heat generation and un-reacted toxic chemicals. Additionally, slow gelation kinetics and *in vivo* biofluid dynamics involve dispersion of pre-gel solution leading to poor cell entrapment and physical integrity of the gel. Finally, nanosized pore architecture of scaffolds impedes efficient oxygen delivery, nutrient exchange, cell-movement, and long-term survivability of tissue cells.

The invention described herein provides a minimally-invasive method of injecting preformed macroporous hydrogels that are loaded with cells and/or therapeutics. Cells are implanted and cultured onto the polymeric matrix before or after administration to a subject. FDA-approved polymer-based scaffolds that support the attachment and proliferation of cells, degradable and capable of releasing drugs (e.g., proteins) at a controlled rate *in vivo* are designed in any desirable size and shape, and injected in situ as a safe, preformed, fully characterized, and sterile controlled delivery device. Described in detail below are biologically active cell-seeded injectable scaffolds with structural integrity within the body that controllably deliver growth factors while providing cellular building blocks to enhance tissue formation. Seeding and organizing cells prior administration of macroscopic injectable matrices enhance *in vivo* cell engraftment and provide cell support and guidance in the initial tissue formation stage. This invention is useful for clinical applications including artificial extracellular matrix for tissue engineering, dermal filler in cosmetic surgery, controlled release reservoir for drug and cell delivery, and immune cell reprogramming for cancer

vaccines. Additional benefits include less injection pain, less bleeding/bruising and higher levels of patient satisfaction.

The present invention describes a non invasive strategy to administer large-size macroporous biodegradable hydrogels as a 3-D scaffold and a drug delivery platform. Any biocompatible polymers or monomers undergoing cryopolymerization are utilized. Suitable polymers and monomers include naturally derived polymers (alginate, hyaluronic acid, heparin, gelatin, carob gum, collagen, etc.) and synthetic polymers (poly(ethylene glycol) (PEG), PEGylated glutaminase (PEG-PGA), PEG-poly(L-lactide; PLA), poly(2-hydroxyethyl methacrylate) (pHEMA), PAAm, poly(N-isopropylacrylamide) (PNIPAAm), etc.). This ability to use different materials is useful in different applications and adds a further degree of versatility to the compositions and methods described herein. The highly elastic macroscopic scaffolds with spongy-like morphology are prepared by cryogelation, a technique used to produce polymeric materials with large interconnected pores, high volume fraction porosity within soft, mechanically stable and high water absorbing capacity. As described below, the cryogels allow for the injectability of preformed large-size scaffolds through a needle without the need of an invasive implantation. Flowable material can fill any defect due to the sponginess of the network. Elastic deformation of cryogels by external forces (mechanical deformation) led to abrupt gel shrinkage with full shape recovery capability, which is useful in the design of injectable preformed scaffolds for cell delivery in a minimally-invasive fashion for tissue engineering and regenerative medicine.

The use of large-size preformed scaffolds (>1mm) mimicking the extracellular matrix was evaluated. Described herein is the design of large biomaterials with various shapes and sizes ranging from 2mm up to 8mm that are employed as injectable cell-laden scaffold cryogels. Injectable macroscopic hydrogels are supplied in individual treatment syringes for single patient use and ready for injection (implantation). The gel, consisting of crosslinked alginate suspended in a physiologic buffer, is a sterile, biodegradable, non-pyrogenic, elastic, clear, colorless, homogenized scaffold implant. The injectable gels are packaged in proprietary luer-lock syringes that are injected via a 16-gauge or smaller diameter needle depending on the size of the gel.

The strategies described herein are for delivery of preformed biomaterials suitable for minimally invasive therapies. Injectable macroscopic biomaterials are useful as surgical tissue adhesives, space-filling injectable materials for hard and soft tissue repair, drug delivery, and tissue engineering. Described herein is an approach of pure alginate scaffolds

fabrication, which resulted in the formation of, interconnected, superporous network (pore size in the range of 10  $\mu\text{m}$ -600  $\mu\text{m}$ ). These spongy-like gels are highly flexible and squeezable, capable of releasing up to 70% of their water content without altering the gel microstructure. Optionally, the gel further includes a large range of purified polymers such as hyaluronic acid, heparin, carob gum, gelatin etc; or a cell adhesive molecule such as fibronectin, or integrin binding peptide. In addition, the hydrogel is used as a drug reservoir for the controlled delivery of one or more therapeutic agents. Alginate-based gels have excellent mechanical properties, elongation, and fast shape recovery by elasticity. The shape of the gels, which was deformed by an external force (*e.g.*, shear stress), was recovered by swelling in a very short time ( $<1\text{s}$ ). This recovery had good persistence and repeatability. The superporous (*e.g.*, greater than 75% porosity) scaffolds described herein offer significant advantages such as injectability and easy and efficient cell encapsulation post-polymerization. For example, the cryogels are characterized by porosities of 80-90% or more. Animal studies were performed to examine the integration of the spongy-like gels with the host tissue show that the alginate-based scaffolds are biocompatible and do not elicit an immune response or rejection when injected in mice.

#### Synthesis of Methacrylated-alginate (MA-alginate) and other modified polymers

Methacrylated alginate (MA-alginate) was prepared by reacting high molecular weight alginate with aminoethyl methacrylate (AEMA). To synthesize methacrylated alginate with 100% theoretical methacrylation of uronic acid carboxylate groups, high molecular weight sodium alginate (1 g) was dissolved in a buffer solution (0.6% w/v, pH  $\sim$ 6.5) of 100 mM MES containing 0.5 M NaCl. N-Hydroxysuccinimide (NHS, 1.3 g) and N-(3-Dimethylaminopropyl)-N'-ethylcarbodiimide hydrochloride (EDC, 2.8 g) was added to the reaction mixture to activate the carboxylic acid groups of the alginate. After 5 min, AEMA (2.24 g, molar ratio of NHS:EDC:AEMA = 1:1.3:1.1) was added to the product and the reaction was maintained at room temperature for 24 h. The mixture was precipitated with the addition of excess of acetone, filtered, and dried in a vacuum oven overnight at room temperature.  $^1\text{H}$  NMR was used to confirm the chemical modification of alginate and characterize the degree of functionalization of MA-alginate (Figure 10).

Any biocompatible water-soluble polymer or monomer can be used to make injectable cryogels. Several monomers/polymers or a combination of polymers have been used to make the injectable cryogel devices described herein, *e.g.*, hyaluronic acid, gelatin, heparin, dextran, carob gum, PEG, PEG derivatives including PEG-co-PGA and PEG-peptide

conjugates. For example, the polymers may be a combination of degradable and non-degradable synthetic polymers and natural polymers (polysaccharides, peptides, proteins, DNA). Biocompatible synthetic polymers include Polyethylene glycol (PEG), Polyvinyl alcohol (PVA), Poly(2-hydroxyethyl methacrylate) (PHEMA), Poly(N-isopropylacrylamide) (PNIPAAm), Poly(acrylic acid) (PAAc), Polyesters (e.g. Polylactide, Polyglycolide, Polycaprolactone), and Polyhydrides. Naturally-occurring polymers include Carbohydrates (e.g. Starch, Cellulose, Dextran, Alginate, Hyaluronic Acid, Heparin, Gellan Gum, etc), Proteins (e.g. Gelatin, Albumin, Collagen), Peptides, and DNA. All compositions are purified prior to fabrication of the hydrogels.

In addition to the free radical polymerization process to cross-link the polymers and make chemically cross-linked injectable cryogels (polymerization time is about 17hr), gels are optionally polymerized using other processes. Injectable cryogels can be classified under two main groups according to the nature of their cross-linking mechanism, namely chemically and physically cross-linked gels. Covalent cross-linking processes include radical polymerization (vinyl-vinyl coupling), Michael-type addition reaction (vinyl-thiol cross-linking), Condensation (carboxylic acid-alcohol and carboxylic acid-amine cross-linking), Oxidation (thiol-thiol cross-linking), Click chemistry (1,3-dipolar cycloaddition of organic azides and alkynes), Diels-Alder reaction (cycloaddition of dienes and dienophiles), Oxime, Imine and Hydrazone chemistries. Non-covalent cross-linking include Ionic cross-linking (e.g. calcium-crosslinked alginate), Self assembly (phase transition in response to external stimuli, such as Temperature, pH, ion concentration, hydrophobic interactions, light, metabolite, and electric current).

#### Cryogel Fabrication

Cryogel matrices were synthesized by redox-induced free radical polymerization of MA-alginate in water. Alginate cryogels are synthesized by mixing 10mg (1% wt/v) of MA-alginate macromonomer in deionized water with TEMED (0.5% wt/v) and APS (0.25% wt/v). The mixture is immediately poured into a pre-cooled Teflon mold and frozen at -20°C. After cryo-crosslinking has finished, gels are heated to room temperature to remove ice crystals, and washed with distilled water. Cell-adhesive cryogels were synthesized using a RGD-containing peptide composition, e.g., ACRL-PEG-G4RGDASSKY as a comonomer (0.8% wt/v) during the polymerization. (Acryloyl is abbreviated ACRL.) By mixing the RGD-containing peptide composition (monomers) with the alginate, the RGD becomes chemically attached (covalently attached) to the polymer structure. RGD integrin-binding motif was

used to promote cell–substrate interactions. NMR spectroscopy was used to characterize vinyl conversion of MA-alginate macromonomer after cryopolymerization. As shown in Figure 2, full disappearance of methylene protons (between 5.3-5.8 ppm) for MA-alginate macromonomer (1% wt/v) was reached after the cryopolymerization process in the presence of the initiator system (APS/TEMED). This indicates that high vinyl conversions can be achieved for cryogels (see Figure 11). Injectable cryogels can be prepared at different concentrations depending on the MW and the degree of chemical modification of the polymer itself (1% wt/v was chosen as a proof of concept).

As described above, RGD remains attached to the polymer structure by virtue of covalent bonding (co-polymerization). However, certain biomolecules are to be released following administration of the cryogel to the subject. In this case, the biomolecules are simply mixed with the polymer prior to the cryogelation process.

#### Cryogelation

Cryogels are a class of materials with a highly porous interconnected structure that are produced using a cryotropic gelation (or cryogelation) technique. Cryogelation is a technique in which the polymerization-crosslinking reactions are conducted in quasi-frozen reaction solution. During freezing of the macromonomer (MA-alginate) solution, the macromonomers and initiator system (APS/TEMED) expelled from the ice concentrate within the channels between the ice crystals, so that the reactions only take place in these unfrozen liquid channels. After polymerization and, after melting of ice, a porous material is produced whose microstructure is a negative replica of the ice formed. Ice crystals act as porogens. Pore size is tuned by altering the temperature of the cryogelation process. For example, the cryogelation process is typically carried out by quickly freezing the solution at  $-20^{\circ}\text{C}$ . Lowering the temperature to, e.g.,  $-80^{\circ}\text{C}$ , would result in more ice crystals and lead to smaller pores.

The advantage of these so-called “cryogels” compared to conventional macroporous hydrogels obtained by phase separation is their high mechanical stability. They are very tough, and can withstand high levels of deformations, such as elongation and torsion; they can also be squeezed under mechanical force to drain out their solvent content. The improved mechanical properties of alginate cryogels originate from the high crosslinking density (highly methacrylated alginate polymerizes into cross-linked polymer structures with a relatively high crosslink density) of the unfrozen liquid channels of the reaction system. Thus,

after polymerization, the gel channels with high polymer content are perfect materials for building the pore walls.

Biomolecules, e.g., GM-CSF, CpG nucleic acids, are entrapped in the polymer structure but not chemically linked to it. Thus, these molecules are released from the cryogel by diffusion or gel degradation over time. For example, low molecular weight compositions (less than 10 kDa molecular mass), e.g., CpG oligonucleotides, are released by diffusion. Larger entrapped molecules (greater than about 10 kDa, e.g., 10-50 kDa in molecular mass), e.g., proteins, large DNAs, e.g., plasmid DNA, are released primarily by cryogel degradation. Human Recombinant GM-CSF (e.g., available from PeproTech, Catalog # 300-03) is encoded by the following polypeptide sequence (SEQ ID NO:1):

```
MAPARSPSPS TQPWEHVNAI QEARRLLNLS RDAAEMNET VEVIEMFDL QEPTCLQTRL  
ELYKQGLRGS LTKLKGPLTM MASHYKQHCP PTPETSCATQ IITFESFKEN LKDFLLVIPF  
DCWEPVQE
```

#### Injectable Hybrid Cryogels

Injectable delivery systems for therapeutic proteins (e.g., hydrogels and microspheres) have attracted wide attention. Conventional hydrogels, however, typically release their hydrophilic contents too rapidly in a large initial burst, and phagocytes may clear microspheres within a relatively short time period after administration.

Microsphere/cryogel combination systems achieve a controlled and sustained release of proteins as an injectable delivery system. PLGA microspheres (size ~10-50 $\mu$ m) containing a model protein (GM-CSF) were prepared and then mixed with a MA-alginate pre-gel solution prior cryopolymerization. The mixing ratio of the components was optimized to retain injectability and shape memory properties of pure alginate cryogels. As shown in Figure 12, PLGA microspheres were physically entrapped within the cryogel network (polymeric walls) of cryogels. Also, hybrid cryogel have been created as a carrier for controlled delivery of hydrophobic and/or low molecule weight drugs. The results not only provide a strategy for delivery drugs from an injectable 3-D preformed macroporous scaffolds as a sustained-release drug carrier but also open an avenue for the design of the hybrid injectable hydrogels.

Other examples of hybrid polymer combinations include cryo-ferrogels and polydiacetylene-based cryogels. One class of injectable porous biomaterials for on-demand drug and cell delivery comprises cryo-ferrogels. The magnetic-sensitive scaffolds based on

macroporous elastic alginate-based cryo-ferrogels, were fabricated with 3-D connected macropores and coupled with magnetic particles ( $\text{Fe}_3\text{O}_4$  nano- and micro- particles) and cell-binding moieties. Under applied magnetic fields, the loaded macroporous ferrogel with biological agents lead to large and prompt deformation triggering release of drugs and cells in a controlled fashion. In another example, injectable color-changing biomaterials such as polydiacetylene-based cryogels, which change in response to external stimuli such as mechanical forces. The materials contain mechanophore-molecules (e.g., Polydiacetylene Liposome) that undergo a geometric distortion when a certain amount of force is exerted upon it, leading to a color transition. Smart polymers that change color when the material becomes overstressed are very useful to identify cell-substrate interactions and to accurately measure deformations.

#### Administration of injectable cryogels

Syringes and needles are typically used to introducing the cryogels into the body. The term "syringe" technically refers to the reservoir (that holds the liquid) and the plunger (which pushes the liquid out of the reservoir). The "needle" is the part that enters the body, e.g., into a vein, under the skin, or into muscle or other tissue. The word "syringe" is also sometimes used to refer to the entire reservoir/plunger/needle combination. They come in a variety of sizes, e.g., a common reservoir size is 1cc (1 cubic centimeter (cc) = 1 milliliter), with a 25 gauge needle size or smaller.

The needle gauge refers to the size of the bore or hole in the needle. The higher the gauge, the thinner the needle (and the smaller the hole). A 28 gauge needle (abbreviated 28G) is therefore thinner than a 25 gauge needle, which is in turn thinner than an 18 gauge needle. Insulin needles are typically 1/2 inch in length and tuberculin needles are typically 5/8 of an inch in length. As inscribed on packaging, needle length appears after the gauge number: "28G 1/2" refers to a 28 gauge needle that is 1/2 inch long.

Larger gauge (frequently 23G or 21G), longer needles are often used for intramuscular injections. Muscle syringes are typically 1cc in volumes, but larger volumes are sometimes, e.g., 2 to 5 ccs syringes, depending on the application. Larger volumes and larger bores are appropriate for delivery of cryogels for larger scale muscle repair or regeneration, e.g., after extensive or traumatic laceration of tissue such as injuries incurred in battle or car/plane accidents. Intravenous injectors or needles are used for fine or delicate tissue therapy, e.g., cosmetic dermal filler administration. Such applications typically use shorter needles no larger than 25G.

### Survivability of cells after injection

Reversible compactible behavior enables pre-formed cryogels with desired physical properties, as characterized ex-vivo, to be delivered in-vivo via application of a moderate non-destructive shear stress during injection through a syringe. Studies were carried out to evaluate whether the fluid velocity, dynamic pressure, and shear stress resulting from the injection affects cell viability.

The data indicated that, during the injection, cells integrated in the RGD-modified cryogel were protected by the scaffold from mechanical damage. Although adherent cells may experience some shear stress applied during the injection, cryogels are capable of absorbing most of the energy when the scaffolds are compressed, thereby, maintaining high cell viability (92%) and their proliferative potential as shown in Figure 13.

Thus, the shear stress (or compression) applied to cells in the cryogel as they pass through the bore of a needle or other delivery apparatus such as a catheter does not measurably hurt or damage the cells within the cryogel. Following passage through a needle or other delivery apparatus, cell viability was routinely 90% or greater.

### Example 1: Injectable Biodegradable Preformed Macroscopic Geometric Gels

The compositions and methods described herein provide hydrogels for minimally invasive delivery of shape memory scaffolds for *in vivo* applications. This method has demonstrated highly efficient and reproducible fabrication of injectable shape-defined macroporous scaffolds. Although only one type of covalently alginate-based crosslinked gel system was evaluated herein, the material performance is readily manipulated by altering its composition, formulation, and degradation profile. The formation of specific shapes and structural stability are desirable characteristics for shape-defined materials, and the most important requirement of these types of materials for minimally invasive therapies is the ability to collapse and faithfully reform the scaffold's structure in a stimulus-responsive manner. A combination of mechanical compression and dehydration is sufficient to compress the scaffolds developed in this work, allowing minimally invasive delivery through a conventional-gauge needle.

These results described herein demonstrated that shape-defined macroporous alginate-based scaffolds were prepared with different geometric sizes and shapes, and successfully passed through a surgical needle without mechanical fracture, and all scaffolds regained their three-dimensional shape immediately (<1s) after rehydration (Figure 1). The fabrication method is capable to manufacture biocompatible, biodegradable and complicated

macroporous tissue scaffolds efficiently and economically. In addition to the application described herein, shape memory scaffolds are especially useful in applications in which large, structurally defined implants are required.

#### Example 2: Structural Integrity of Injectable Macroscopic Shape-Defined Gels

5           The deformation of conventional (nanoporous) and macroporous 1% MA-alginate gels under mechanical compression associated with shear forces was examined. Subject to mechanical compression, the gels experience a body of force, which results in a shape change. The influence of the macropores on the gel mechanical properties was also evaluated since the stiffness of the scaffold dictate the extent of the deformation under an applied shear  
10           force. Conventional gels give a Young's modulus (*i.e.*, the slope of the initial part of the stress vs. strain curves in Figure 2) of  $42 \pm 4$  kPa in compression test. However, macroporous gels led to a dramatic reduction in the modulus to  $4 \pm 2$  kPa. As shown in Figure 2, cylindrical (4mm diameter x 8mm height) nanoporous gels reduced their heights by ~16% when subjected to a vertical load before mechanical fracture. In comparison,  
15           cylindrical macroporous gels give much larger deformation under lower mechanical stress, due to its lower modulus. Macroporous scaffolds attained 90% or more of compression strain without mechanical fracture, demonstrating their ability to maintain their structural integrity after compression, compaction, and minimally invasive delivery. Also, these results confirmed that the scaffolds displayed shape memory *in vitro*.

20           In the hydrogels described herein, the large volume change of the macroporous shape-defined gels was caused by reversible collapse of the interconnected pores. The collapsing pores force water contained in the macropores to flow out of the gel. Gel deformation and water convection enhances water transport in and out of the gel. Once the mechanical load is removed, the elastically deformed gel immediately returns to its original, undeformed shape-  
25           defined configuration in less than 1s, as surrounding water was reabsorbed into the gel.

#### Example 3: Shape Memory Injectable Scaffolds As a Controlled Drug Delivery Carrier

          Covalently crosslinked alginate scaffolds possessing shape memory properties were successfully used as a drug delivery system *in vivo*. The gels having a predefined size and structure were able to exceptionally maintain their structural features after minimally invasive  
30           subcutaneously insertion in mice. Suspended gels in PBS were spontaneously hydrated with full geometric restoration after one single injection per site on the lower back of mice. Injected animals did not demonstrate abnormalities in feeding, grooming, or behavior during the time frame of the experiment, nor did they exhibit signs of distress.

The hydrogels maintained their hydrogel shape integrity at the site of injection. Animal studies performed to examine the integration of the spongy-like gels with the host tissue showed that the alginate-based scaffolds were biocompatible and did not elicit an immune response or rejection when injected in mice. After 3 days post-injection, rhodamine-labeled scaffolds were surgically removed from mice and analyzed. As shown in Figure 3B, the scaffold guided *in vivo* tissue formation around the scaffold indicating the scaffolds could support tissue growth and integration. Furthermore, fluorescent microscopy used to visualize the rhodamine-labeled scaffold, noticeably displayed the original geometry, structural integrity, square-defined shape retention of the gels *in vivo* (Figure 3C).

Rhodamine-labeled BSA was also used as a drug delivery model. By providing a drug depot at the site of injection, such devices achieve high local drug concentrations without significant systemic administration. Sustained release of BSA was achieved from the injected square-defined scaffolds as shown in Figure 3D. Targeted and controlled delivery of rhodamine-labeled BSA in mice was quantified via real-time non-invasive live imaging (Figure 3A). Exemplary compound, BSA, was either physically entrapped or chemically grafted to the scaffold during the cryopolymerization process. As illustrated in Figure 3E, sustained controlled release of BSA was achieved over of period of 4 months. Surprisingly, the release profiles for both types of BSA were similar indicating that the release is mainly mediated by matrix degradation over protein diffusion.

#### Example 4: Cryogel Compositions Enhance Survivability and Limit Migration of Injected Cells *in vivo*

One application for the compositions and methods described herein is the non-invasive method of cell injection based on cell-scaffold integration. Cell transplantation is a therapeutic option for patients with impaired regional or global function due to cell death. However, the limited number of transplantation methods of cells is considered a major factor limiting the efficacy of cell therapies. As cell and bioactive molecule carriers, injectable preformed scaffolds offer the possibility of homogeneously distributing cells and molecular signals throughout the scaffold. Moreover, the scaffolds are injected directly into tissues or cavities, e.g., muscle, bone, skin, fat, organs, even of irregular shape and size, in a minimally invasive manner. The compositions and methods described herein offer significant advantages such as injectability and efficient cell encapsulation post-polymerization while allowing sufficient mechanical strength to withstand biomechanical loading and providing temporary support for the cells.

Square-shaped rhodamine-labeled RGD-containing alginate cryogels (4x4x1; units: mm) were prepared, purified, sterilized, and subsequently seeded with bioluminescent B16 cells, and maintained in culture for 6 hr in cell culture medium before animal subcutaneous injection to promote cell-scaffold integration (Figures 4A, 4B, and 4C). Large interconnected pores significantly enhanced cell seeding and distribution, while maintaining relatively high seeding efficiencies (>50%) and viability (>95%). To image bioluminescence of seeded B16 melanoma cells *in vitro*, 0.15 mg/g of luciferin was added on top of the gel, which freely diffused through the gel network, staining the cells and indicating homogeneous infiltration and depth viability of cells throughout the 3-D construct (Figure 4B). This is due to the effective nutrient delivery into and waste removal from the inner regions of the scaffold. SEM images confirmed a homogeneous distribution and engraftment of cells within the scaffold (Figure 4C).

A unique characteristic of these cell/scaffold constructs is that when an appropriate shear stress is applied, the deformable hydrogel is dramatically and reversibly compressed (up to 90% of its volume) resulting in injectable macroporous preformed scaffolds. This property allows gel/cell constructs to be delivered via syringe with high precision to target sites. Homogenous cellular distribution and cell viability are unaffected by the shear thinning process and gel/cell constructs stay fixed at the point of introduction, suggesting that these gels are useful for the delivery of cells to target biological sites in tissue regeneration efforts.

Subsequently, healthy C57BL/6 mice received a subcutaneous injection on their backs of  $200 \times 10^3$  B16's integrated into alginate macroporous scaffolds. The resulting injected gels were delivered to a targeted site where they quickly recovered to their original mechanical rigidity with location permanency. As shown in Figure 4D, cell-loaded rhodamine-labeled alginate scaffolds were syringe-delivered (1cc, 16G) with high precision in the back of mice and visualized by *in vivo* optical live imaging. Integration of melanoma B16 cells to RGD-modified alginate cryogel scaffolds and their injections into healthy mice was investigated to demonstrate successful syringe-delivery and function of pre-cultured cells while promoting homing, survival, and engraftment of tumorigenic cells. The results presented herein demonstrate that the designed tissue-engineered scaffolds mimic the natural environment where cells normally reside, and as a result tumors are formed after every injection of tumorigenic cell-embedded matrix in healthy BALB/c mice. The inoculation of melanoma cells subcutaneously was monitored via real-time non-invasive live imaging (Figure 4D). The incidence of tumor formation and tumor growth was examined over a

period of 9 days. The success of the melanoma B16 tumor model is clearly evident as shown in Figures 4D-4E. As an *in vivo* model, the cell/scaffold construct has fulfilled several criteria: successful syringe-delivery with precision to a target site and cell survival in their current local environment resulting in tumor formation.

5 As described herein rhodamine-labeled (1) and rhodamine-labeled RGD-modified (2) cell-seeded alginate cryogels were administered in mice to study the effect of cell-  
engraftment in cell transplantation and homing. As a control, a bolus of free cells (B) was also injected. Rhodamine-labeled scaffolds were successfully injected subcutaneously as shown in Figure 4D. Except for the bolus injection site, red-emitting rhodamine dyes show  
10 intense fluorescent red spots in each side of the mice's back indicating *in vivo* localization of cell-seeded scaffolds. After 2 days post-injection, bioluminescence of cell-seeded scaffolds was measured 30 min after intraperitoneal injection of luciferin. As shown in Figure 4E, bioluminescence for injected RGD-modified cell-seeded gels was particularly brighter when compared to the plain scaffolds showing the necessity to incorporate RGD to the polymeric  
15 network to support cell-engraftment and thus efficient cell transplantation. For the injection of the cellular bolus, the absence of bioluminescence suggests minimal cell retention at the injection site, rapid cell migration, and likely limited cell transplants survival. Similarly, 9 days post-injection, bioluminescence of cell-seeded scaffolds was mainly apparent for RGD-modified scaffolds confirming the developed non-invasive method for cell injection based on  
20 cell-scaffold integration is crucial to decrease migration, promote homing, enhance survivability, and engraftment of cells *in vivo* (Figure 4F).

Decreasing the rapid cell death that occurs within a few days after transplantation of graft cells is of great relevance for the success of cell transplantation therapies. The results presented herein confirm that the incorporation of the cell-adhesive peptide plays a key role  
25 in regulating interactions between cells and the scaffold and cell-fate. These gels are also suitable for use as a delivery system for the sustained delivery of proteins (*e.g.*, growth factors) involved in cell differentiation and maturation (Figure 3E). This technique is also a tool for enhancing stem cell survival *in vivo*.

#### Example 5: Injectable biodegradable cryogels for immunotherapy applications

30 A minimally invasive scaffold-based active vaccine containing host pathogens was developed for the therapeutic treatment of cancer. In the case of cancer, the immune system needs an external boost from immunotherapies to be able to become more effective in fighting cancer. The active immunotherapy system described herein was designed to

stimulate the patient's immune system, with the objective of promoting an antigen-specific antitumor effect using the body's own immune cells. In addition, the cryogel-vaccine leads to a durable antitumor response that protects tumor recurrence. Dendritic cells (DCs) are antigen-presenting cells critically involved in regulating the immune system. The vaccine  
5 mediates in situ manipulation of dendritic cell recruitment, activation, and their dispersion to the lymph nodes. Cytosine-guanosine oligonucleotide (CpG-ODN) was used as an adjuvant further stimulate responses to the vaccine.

As shown in Fig. 5, both components (adjuvant and cytokine) can be easily incorporated into the cryogel matrix and released in a sustained fashion to recruit and host  
10 DCs, and subsequently present cancer antigens from the irradiated cells (or other cell-associated antigens) and danger signals to activate resident naïve DCs and promote their homing to the lymph nodes, which is necessary for a robust anti-cancer immune response. Specific and protective anti-tumor immunity was generated with our minimally invasive alginate-based active vaccine, as 80% survival was achieved in animals that otherwise die  
15 from cancer within a couple of months. The data using the cryogel-based prophylactic vaccine for melanoma was shown to induce a very strong immunologic memory, as 100% survival was achieved in the rechallenged animals following 100 days post vaccination.

Different tumor cell-associated antigens are used in the cellular cryogel-based vaccine platform, thereby permitting treatment or prophylaxis for a variety of cancers. Active specific  
20 immunotherapy involves the priming of the immune system in order to generate a T- cell response against tumor-associated antigens. One example of the active specific approach is adoptive T-cell therapy, which involves the ex vivo cultivation of T cells with demonstrated activity against a specific target cancer antigen. Cells are obtained from the subject, purified, and cultured. Such ex vivo cultivation increases the frequency of these T cells to achieve  
25 therapeutic levels. The cells are then infused back into the patient via injectable alginate-based cryogel.

Creating an infection-mimicking microenvironment by appropriately presenting exogenous cytokines (e.g., GM-CSF) and danger signals (e.g., CpG-ODN), in concert with cancer antigen provides a means to precisely control the number and timing of DC tr  
30 afficking and activation, in situ. At different time points post scaffold-based vaccine injection (vax C), cells were isolated from the cryogels and surrounding tissues, spleen , and lymph nodes (LN) for cell counting and fluorescence-activated cell sorting (FACS) analysis to determine the overall number of cells and percentage of DCs (CD11c+ cells) and T cells

(CD3+ cells). Cells infiltrating the vaccine site and the enlargement of spleen and LN after vaccination revealed a significant immunologic response to cancer. The increased numbers of immune system cells fighting cancer antigens made the two organs expand and become "swollen." As shown in Fig. 3A, the total numbers of cells increased dramatically for the vaccinated (V) and vaccinated/challenged (VC) mice when compared to the control groups (C) for the spleen, LN, and cryogels. The increase number of cells remained relatively high within the first 2 weeks post vaccination and started to noticeably drop by day 13 impaired with a reduction of immunologic and inflammatory responses.

Macroporous cryogel matrices were fabricated for controlled release of GM-CSF to recruit and house host DCs, and with an interconnected porous structure that allows for cell infiltration and subsequently present cancer antigens (irradiated B16F10 melanoma cells) and danger signals (CpG-ODN) to activate the resident DCs and dramatically enhance their homing to lymph nodes and proliferation. Matrices were loaded with 3mg of GM-CSF and injected into the subcutaneous pockets of C57BL/6J mice. Fig. 3B indicates that the cryogel vaccine controls or therapeutically alters immune cell trafficking and activation in the body. Within the first 10 d post vaccination, a large number of DCs are recruited to the vaccine site. As these activated DCs may home to the inguinal lymph nodes and spleen, present antigens to naive T cells, and stimulate and expand specific T-cell populations that elicit anti-tumor responses, the total number of CD11c(+) DCs is inversely proportional to the total number of CD3(+) T cells. FACS analysis of cells infiltrating the vaccine site revealed a significant CD3(+) T cell response peaking at day 13. Local CD3(+) T cell numbers dropped sharply by day 24 and were negligible at day 30.

These cryogel matrices released approximately 20% of their bioactive GM-CSF load within the first 5 days, followed by slow and sustained release of bioactive GM-CSF over the next 10 days (Fig. 8, cryogel A); this release profile was chosen to allow diffusion of the factor through the surrounding tissue to effectively recruit resident DCs. Cryogels can be successfully used for specific spatiotemporal delivery of several drugs, as the incorporation of a second biomolecule (CpG-ODN) did not alter the release profile of GM-CSF over time (Fig. 8, cryogel B). However, slowly degrading PLG microspheres integrated in the scaffolds seem to release GM-CSF much more slowly than pure cryogels (5% vs 24% release at day 14). Hybrid cryogel have been created as a potential carrier for controlled delivery of hydrophobic and/or low molecule weight drugs. Our results not only provide a new strategy for delivery drugs from an injectable 3-D preformed macroporous scaffolds as a sustained-

release drug carrier but also open an avenue for the design of new hybrid injectable hydrogels.

Example 6: Injectable biodegradable cryogels as a gene delivery system

Nonviral gene delivery systems based upon polycation/plasmid DNA complexes are gaining recognition as an alternative to viral gene vectors for their potential in avoiding immunogenicity and toxicity problems inherent in viral systems. Studies were carried out to determine the feasibility of using a controlled release system based on encapsulated condensed plasmid DNA in injectable cryogels to achieve gene transfer in the surrounding tissues after injection. A unique feature of the cryogel-based gene delivery system is the biodegradability of the polymeric system, which can provide a sustained release of DNA at different rates depending on the polymer, cross-link density, mass fraction, and porosity created during the cryogelation process. Encapsulated DNA complexed with polyethylenimine (PEI), a nondegradable cationic polymer known to be an effective gene carrier, and naked PEI/DNA complexes, which were prepared at a ratio of 7:1 (PEI:DNA) were injected subcutaneously on the lower back of naïve mice using luciferase as a reporter gene (Figure 9). At 1 day after injection, encapsulated PEI/DNA displayed strong bioluminescence providing the highest transgene expression at  $\sim 10^8$  photons/s, about two-order of magnitude higher than that produced by naked PEI/DNA. After 10 days, the expression levels for naked PEI/DNA were about the same as day 1 but increased by 1 order of magnitude when released in a controllable fashion from the cryogels. Till 29 days, encapsulated PEI/DNA still provided a level of transgene expression at  $\sim 10^7$  photons/s, similar to that observed at previous time points. This level was significantly higher than those offered by naked PEI/DNA.

In this study, subcutaneous gene delivery allowed gene expression on the lower back of naïve mice, although the distribution pattern and intensity was vehicle-dependent. Naked PEI/DNA complexes produced limited bioluminescence (signal nearly above background), probably because of its vulnerability to DNAses. However, encapsulated PEI/DNA complexes in cryogels used in this study provided a targeted and sustained high level of gene expression around the injection site for at least 3 weeks. These findings indicate that a 3-D macroporous scaffold may facilitate sustained release and efficient cell transfection of polymer/DNA complexes.

In summary, the present approach has demonstrated that cryogels promote gene transfection to surrounding cells in the subcutis of mice, with an efficiency superior in terms

of prolonged gene expression to naked DNA. The results establish an injectable delivery system as an effective gene carrier applicable to program or treat targeted cells.

### OTHER EMBODIMENTS

5           While the invention has been described in conjunction with the detailed description thereof, the foregoing description is intended to illustrate and not limit the scope of the invention, which is defined by the scope of the appended claims. Other aspects, advantages, and modifications are within the scope of the following claims.

10           The patent and scientific literature referred to herein establishes the knowledge that is available to those with skill in the art. All United States patents and published or unpublished United States patent applications cited herein are incorporated by reference. All published foreign patents and patent applications cited herein are hereby incorporated by reference. Genbank and NCBI submissions indicated by accession number cited herein are hereby incorporated by reference. All other published references, documents, manuscripts and  
15           scientific literature cited herein are hereby incorporated by reference.

          While this invention has been particularly shown and described with references to preferred embodiments thereof, it will be understood by those skilled in the art that various changes in form and details may be made therein without departing from the scope of the invention encompassed by the appended claims.

**WHAT IS CLAIMED IS:**

1. A cell-compatible highly crosslinked hydrogel polymer composition comprising a high density of open interconnected pores, wherein said hydrogel is characterized by shape memory following deformation by compression or dehydration.  
5
2. The composition of claim 1, wherein said composition comprises at least 50% polymer modification.
- 10 3. The composition of claim 1, wherein said composition comprises at least 90% polymer modification.
4. The composition of claim 1, wherein said composition comprises at least 75% pores.
- 15 5. The composition of claim 1, wherein said composition comprises at least 90% pores.
6. The composition of claim 1, wherein said composition comprises at least 90% water in a hydrated state.
- 20 7. The composition of claim 1, wherein said composition comprises less than 25% water in a compressed or dehydrated hydrogel.
8. The composition of claim 1, wherein said composition comprises a cell adhesion composition covalently attached to said polymer.  
25
9. The composition of claim 8, wherein said cell adhesion composition comprises a peptide comprising an RGD amino acid sequence.
10. The composition of claim 1, wherein said composition comprises a eukaryotic cell in one or more of said open interconnected pores.  
30
11. The composition of claim 10, wherein said eukaryotic cell comprises a live attenuated cancer cell.

12. The composition of claim 1, wherein said composition comprises a biomolecule in one or more of said open interconnected pores.

5 13. The composition of claim 12, wherein said biomolecule comprises a small molecule, nucleic acid, or protein.

14. The composition of claim 13, wherein said protein comprises GM-CSF.

10 15. The composition of claim 13, wherein said nucleic acid comprises a CpG nucleic acid oligonucleotide.

16. The composition of claim 1, wherein said composition is injectable through a hollow needle.

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17. The composition of claim 1, wherein upon compression, said composition maintains structural integrity and shape memory properties.

18. The composition of claim 1, wherein said composition is an alginate-based hydrogel.

20

19. The composition of claim 1, wherein said composition comprises hyaluronic acid, gelatin, heparin, dextran, carob gum, PEG, a PEG derivative, collagen, chitosan, carboxymethylcellulose, pullulan, PVA, PHEMA, PNIPAAm, or PAAc.

25 20. The composition of claim 1, wherein said composition comprises the shape of a disc, cylinder, square, rectangle, or string.

21. The composition of claim 1, wherein said scaffold composition is between  $100 \mu\text{m}^3$  to  $100 \text{mm}^3$  in size.

30

22. A method for repairing, regenerating, or restructuring a tissue, comprising administering to a subject the composition of claim 1.

23. The method of claim 22, wherein said composition is administered subcutaneously as a dermal filler, thereby restructuring said tissue.
24. The method of claim 22, wherein said composition comprises a stem cell and wherein said device is administered to a damaged or diseased tissue of a subject, thereby repairing or regenerating said tissue.
25. A method for delivering genetic material to a tissue, comprising administering the composition of claim 1, wherein said composition further comprises a nucleic acid.
26. The method of claim 25, wherein said nucleic acid comprises plasmid DNA.
27. A method for eliciting an immune response, comprising administering to a subject the device of claim 1, wherein said device further comprises a microbial pathogen or tumor cell to which an immune response is elicited.
28. The method of claim 27, wherein said device is administered prophylactically or therapeutically.

Figure 1.

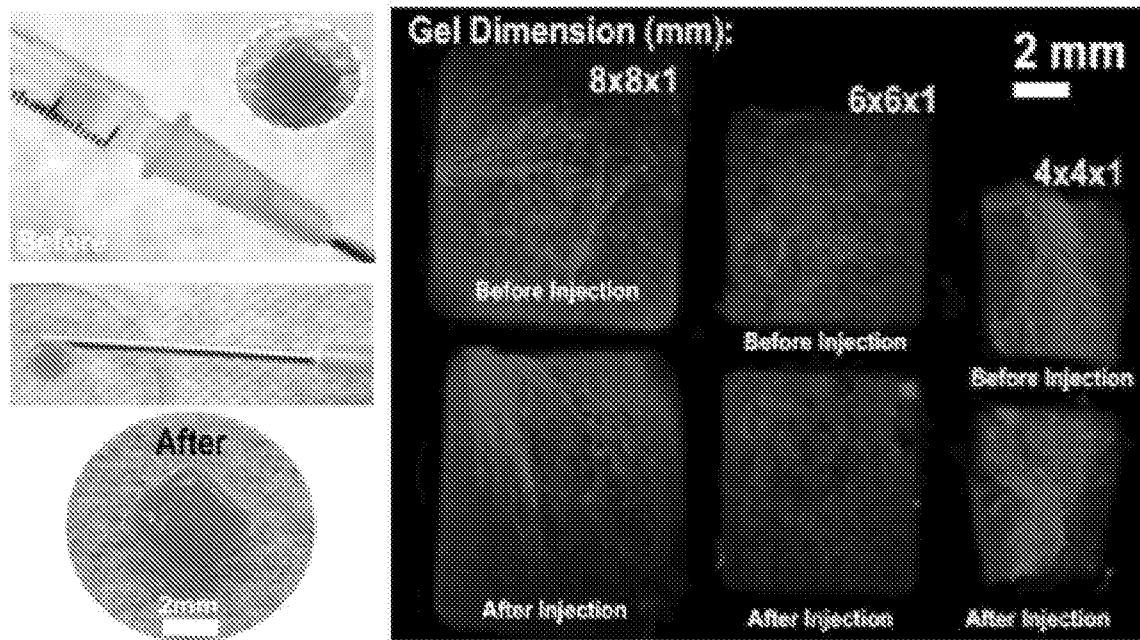


Figure 2.

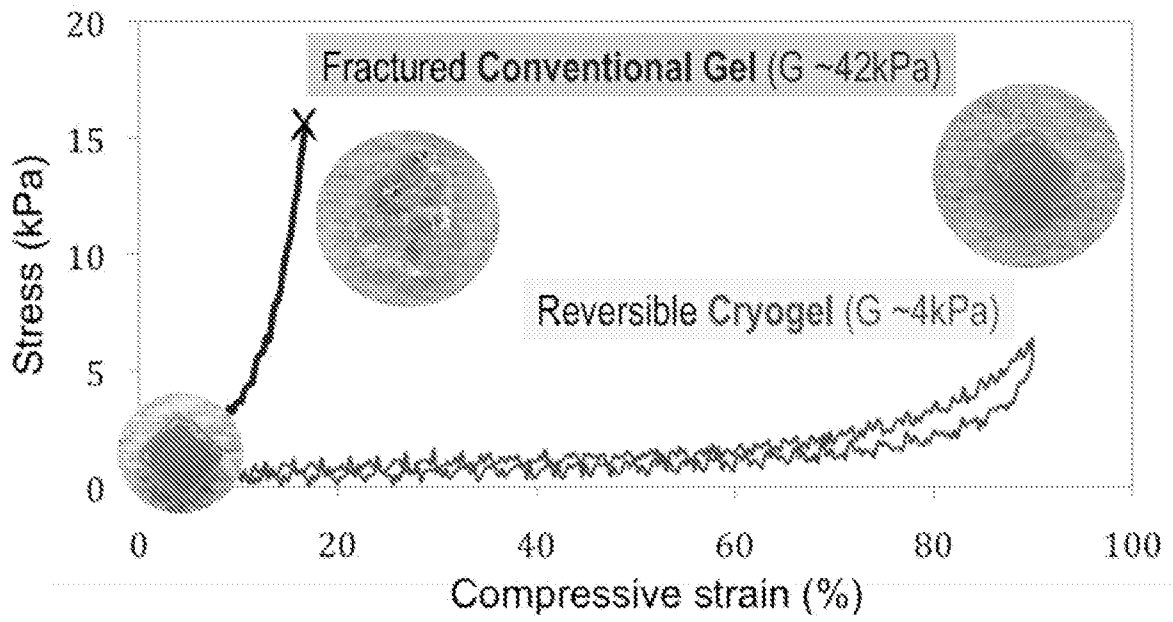


Figure 3.

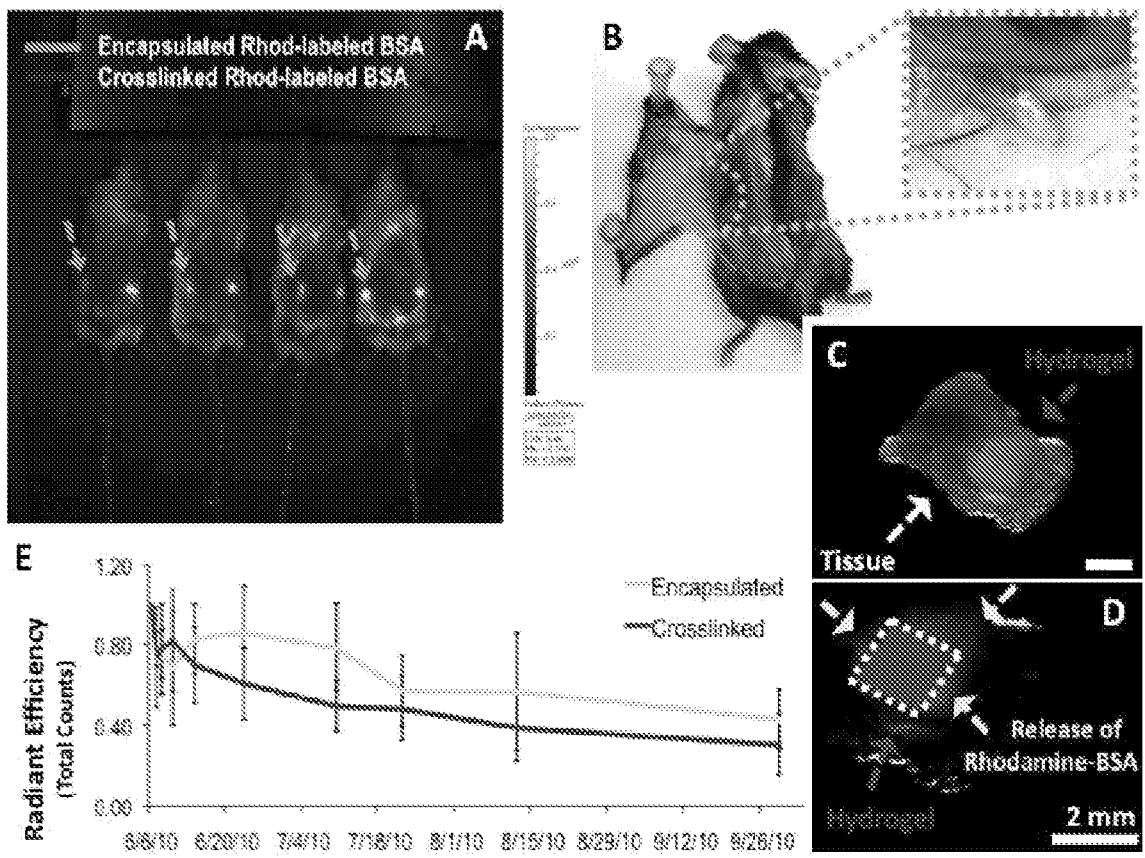


Figure 4.

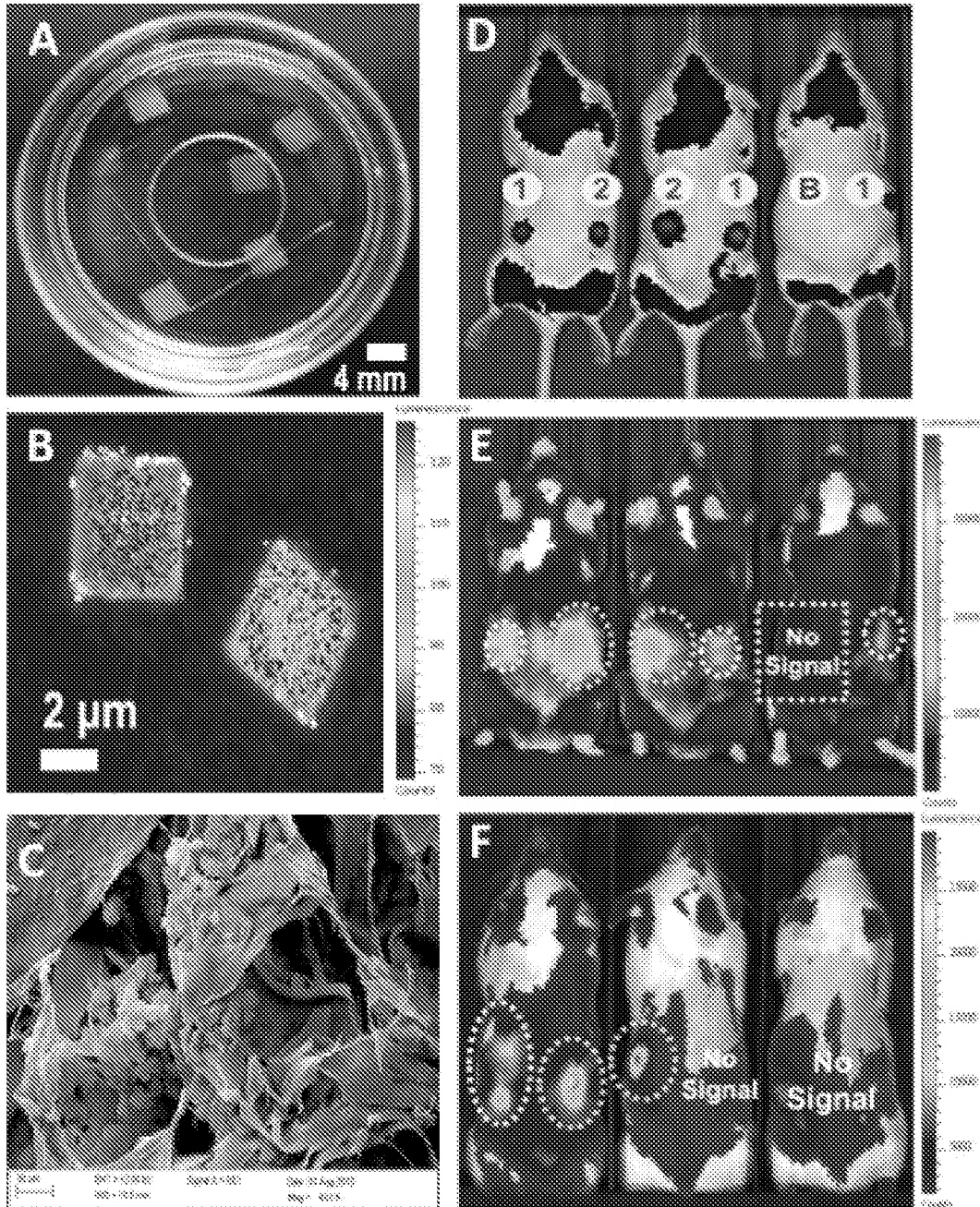


Figure 5.

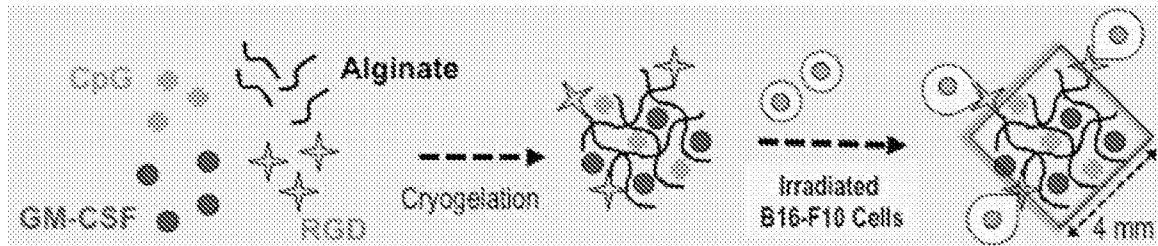


Figure 6.

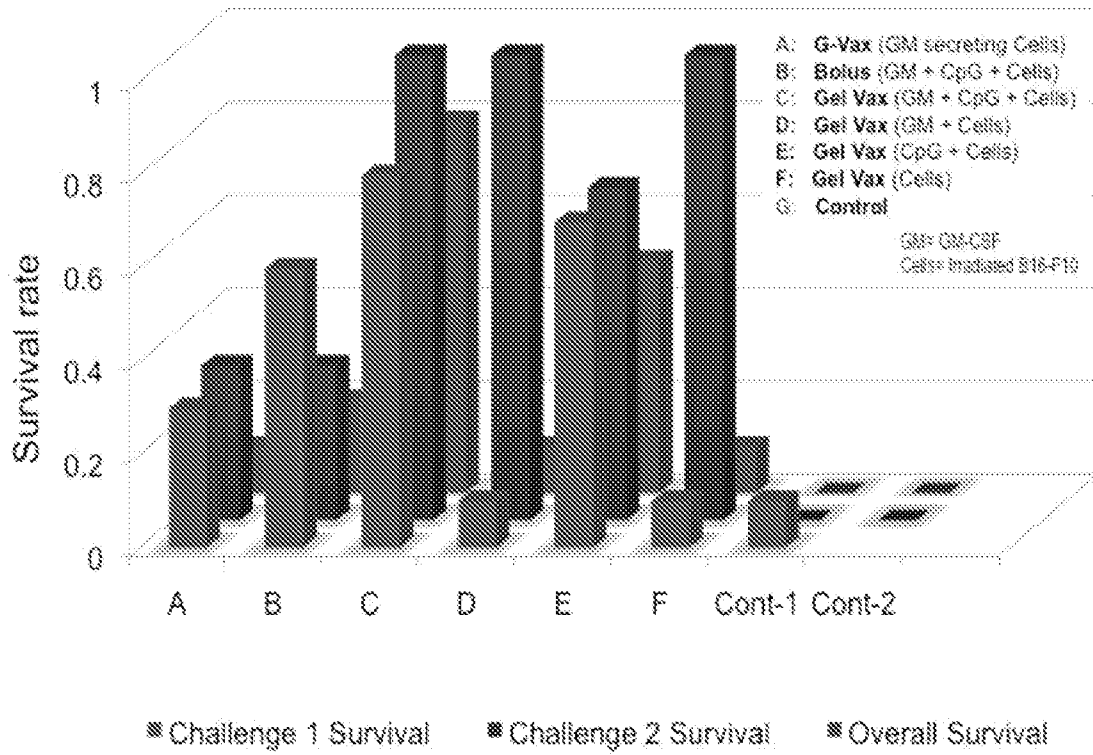


Figure 7.

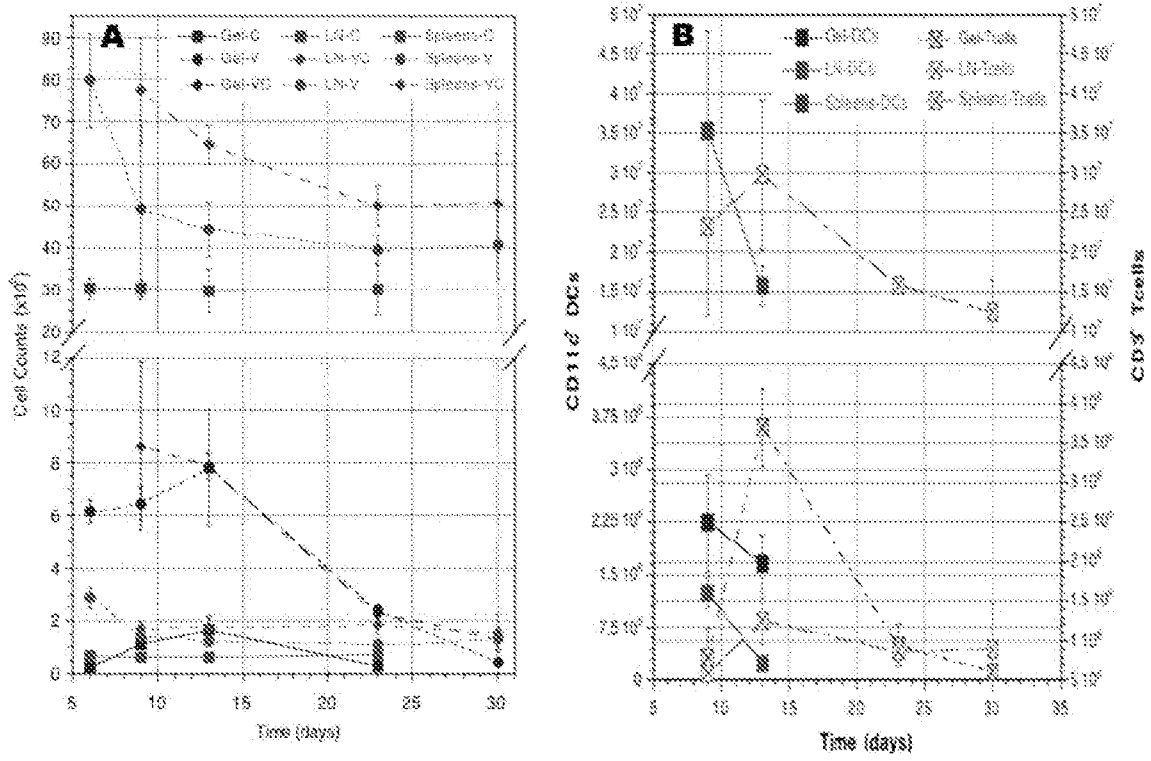


Figure 8.

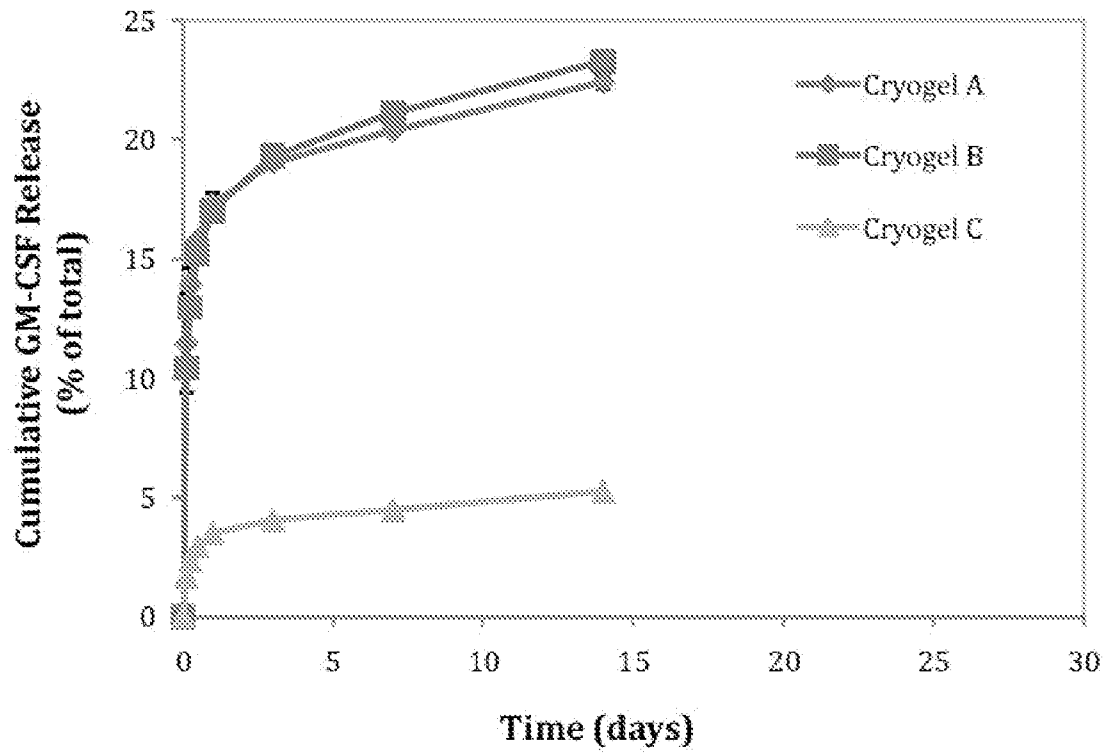


Figure 9.

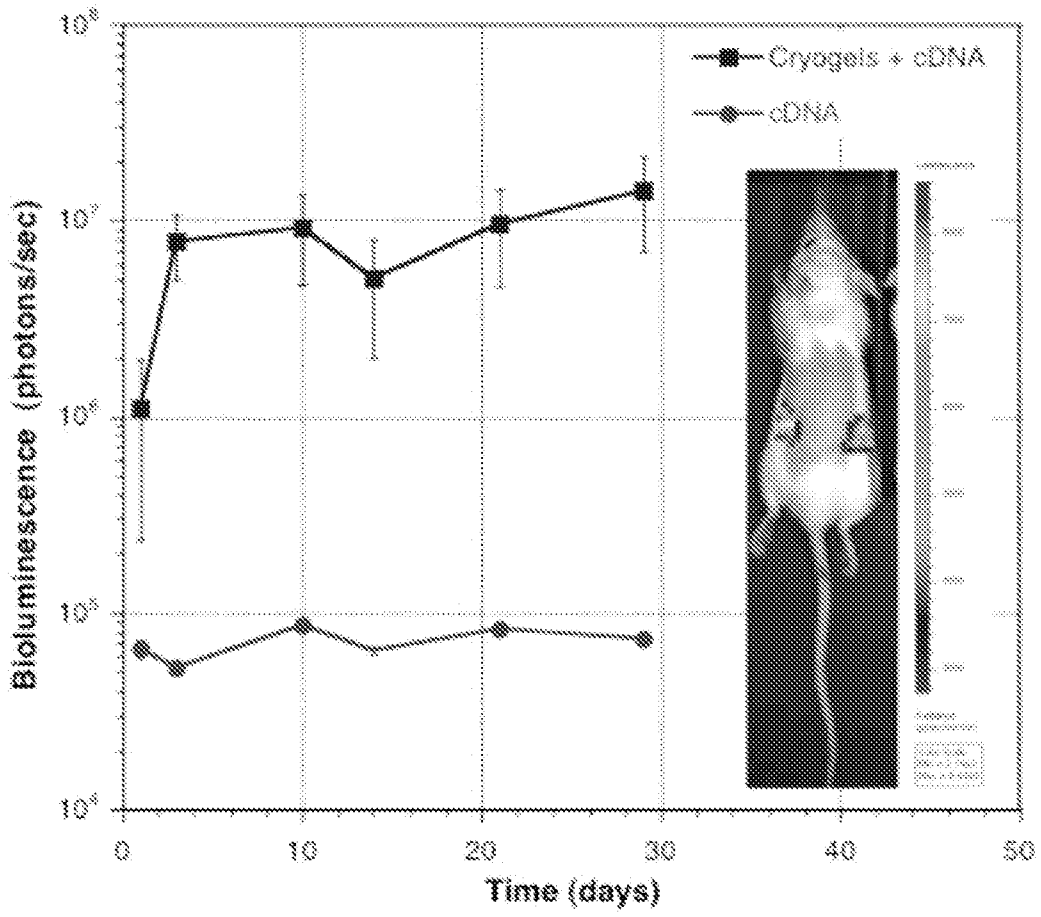


Figure 10.

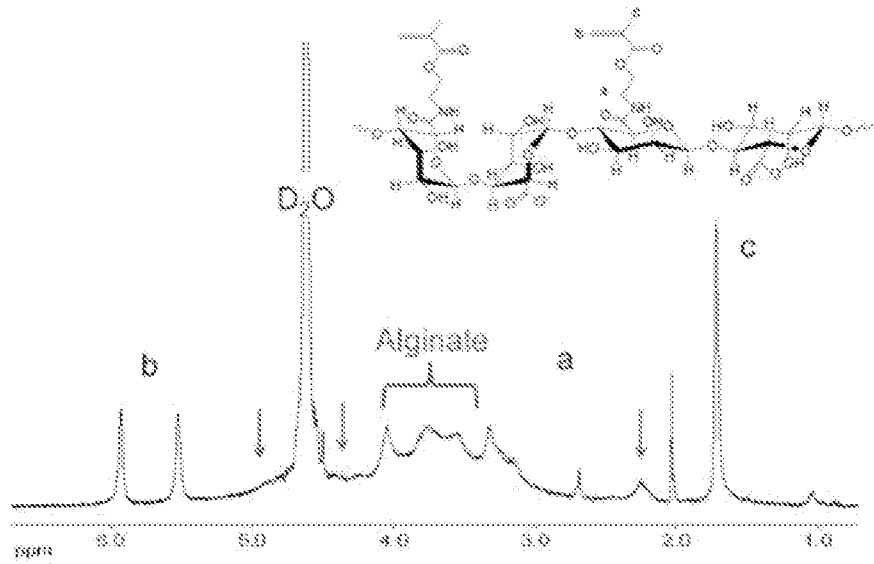


Figure 11.

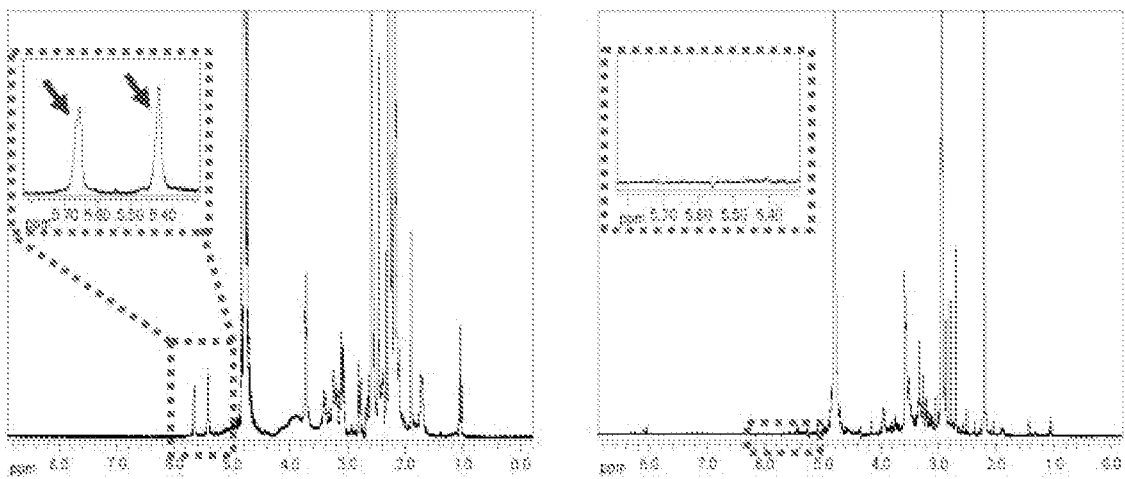


Figure 12.

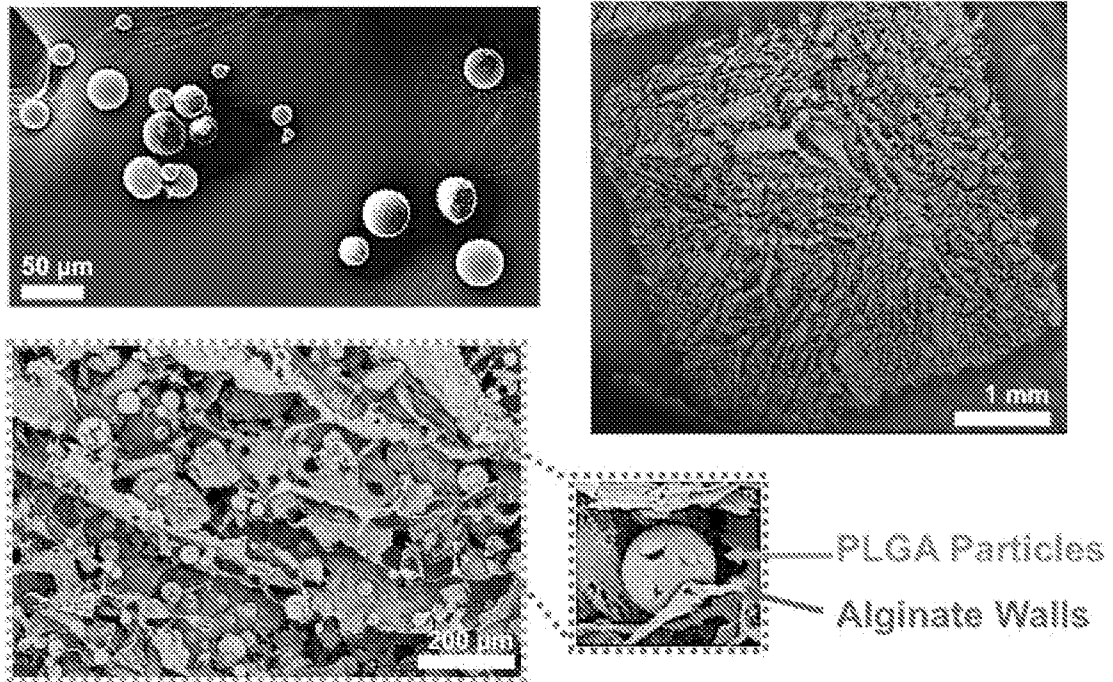
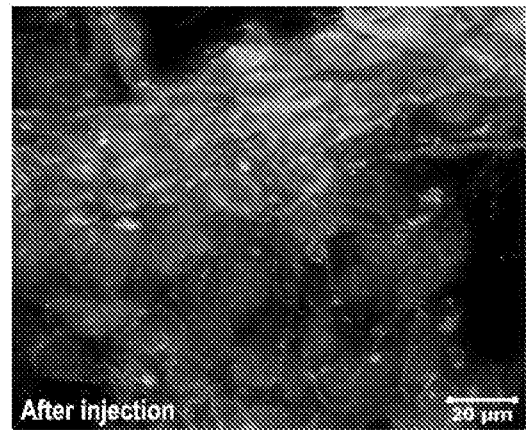
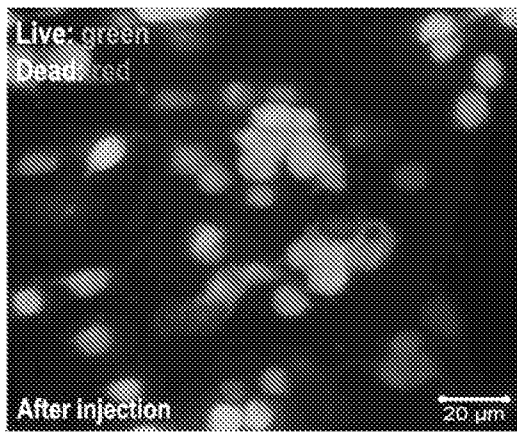


Figure 13.



## INTERNATIONAL SEARCH REPORT

International application No.

PCT/US 2012/035505

A. CLASSIFICATION OF SUBJECT MATTER		<i>A61K 47/48 (2006.01)</i> <i>A61K 47/36 (2006.01)</i> <i>A61K 38/16 (2006.01)</i> <i>A61K 39/00 (2006.01)</i> <i>A61K 31/7088 (2006.01)</i> <i>A61K 48/00 (2006.01)</i> <i>A61P 41/00 (2006.01)</i>
According to International Patent Classification (IPC) or to both national classification and IPC		
B. FIELDS SEARCHED		
Minimum documentation searched (classification system followed by classification symbols)		
A61K 47/48, 47/36, 38/16, 39/00, 48/00, 31/7088, C12N 5/00, A61P 41/00		
Documentation searched other than minimum documentation to the extent that such documents are included in the fields searched		
Electronic data base consulted during the international search (name of data base and, where practicable, search terms used)		
Esp@cenet, USPTO DB, PubMed, RUPAT, PatSearch		
C. DOCUMENTS CONSIDERED TO BE RELEVANT		
Category*	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
X	WO 1998/012228 A1 (THE REGENTS OF THE UNIVERSITY OF MICHIGAN) 26.03.1998, pp. 1-3, 24-25, 27-28, 31-32, 46, examples 3, 14, claims	1-10, 12-13, 17-18, 20-22
Y		11, 14-16, 19, 23-28
Y	WO 2007/070660 A2 (PRESIDENT AND FELLOWS OF HARVARD COLLEGE) 21.06.2007, pp. 6, 8, 16, 18, 20, 28-29, 33-35, 45, claims	11, 14-16, 19, 24-28
Y	WO 2009/002401 A2 (PRESIDENT AND FELLOWS OF HARVARD COLLEGE) 31.12.2008, claims	23
<input type="checkbox"/> Further documents are listed in the continuation of Box C. <input type="checkbox"/> See patent family annex.		
* Special categories of cited documents:		
"A"	document defining the general state of the art which is not considered to be of particular relevance	"T" later document published after the international filing date or priority date and not in conflict with the application but cited to understand the principle or theory underlying the invention
"E"	earlier document but published on or after the international filing date	"X" document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone
"L"	document which may throw doubts on priority claim(s) or which is cited to establish the publication date of another citation or other special reason (as specified)	"Y" document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such documents, such combination being obvious to a person skilled in the art
"O"	document referring to an oral disclosure, use, exhibition or other means	"&" document member of the same patent family
"P"	document published prior to the international filing date but later than the priority date claimed	
Date of the actual completion of the international search		Date of mailing of the international search report
03 August 2012 (03.08.2012)		20 September 2012 (20.09.2012)
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Facsimile No. +7 (499) 243-33-37		Telephone No. (495)531-64-81