ISSN 2377-1542

GYNECOLOGY AND OBSTETRICS RESEARCH

Open Journal

Openventio PUBLISHERS

Erratum

Erratum: Induced Pluripotent Stem Cells—Derived Stem Cells: A Promising Tool for Disease Modeling

Parveen Parasar, DVM, PhD*

Department of Neurology, Henry Ford Hospital, Detroit 48202, MI, USA

Corresponding author
Parveen Parasar, DVM, PhD
Scientist and Instructor, Department of Neurology, Henry Ford Hospital, Detroit 48202, MI, USA; E-mail: suprovet@gmail.com

Article information
Received: April 11th, 2023; **Accepted:** May 6th, 2023; **Corrected:** May 10th, 2023; **Published:** May 10th, 2023

Cite this article
Parasar P. Erratum: Induced pluripotent stem cells—derived stem cells: A promising tool for disease modeling [published correction appears in *Gynecol Obstet Res Open J*. 2023; 9(1): 9-10. doi: 10.17140/GOROJ-9-160]. *Gynecol Obstet Res Open J*. 2022; 8(1): 19-20. doi: 10.17140/GOROJ-8-158

Erratum

Unfortunately, there was an error in the original version of this article.

The authors wish to delete the following sentence in the conclusion section: *For example, in neurological rare metabolic disease, X-ALD, there is no genotype phenotype correction and due to inaccessibility of tissue samples, research presents caveats in discovery of biomarkers. This statement has been now corrected.*

The publisher and the author would like to apologise for any inconvenience caused to the readers. The change does not affect the scientific results. The corrected manuscript is updated and the original will remain online on the article webpage.

Stem cells possess potential to undergo self-renewability giving rise to any cell type in the body known as pluripotency. This process, also known as differentiation, through which stem cells undergo several morphologic and genetic changes resulting in daughter cell lineages. The end point lineage depends on the growth and differentiation induction factors or proteins added to *in vitro* stem cell culture. These stem cells can be of embryonic source (embryonic stem cells (ESCs)) derived from the inner cell mass of embryo or induced-pluripotent stem cells (iPSCs) which are produced from reprogrammed somatic cells in the body.[1] In this commentary, we will focus on iPSCs and their contribution to disease modeling in the context of reproductive disorders.

Reprogramming of adult somatic cells into iPSCs is a valuable tool holding a promise for regenerative and personalized medicine in the future.[2] Introduction of pluripotency transcription factors or genes *Oct4*, *Sox2*, *Klf4* and *c-Myc* into somatic cells in order to reprogram or induce pluripotency ability in the resulting iPSCs. This pioneer work was first discovered and reported by Yamanaka and colleagues[3] which revolutionized the medical and scientific world. This novel idea devised a way to not only reprogram somatic cells into iPSC with a remarkable pluripotency potential same as ESCs, but also paved a path to generate iPSCs from subjects with diseases carrying gene mutations in order to model a disease.

iPSCs are innovative tools to study molecular mechanisms underlying a disease. Thus, iPSCs provide a robust cellular system to study disease-specific phenotypes. Specifically, iPSCs provide an immensely useful system to investigate pathogenetic mechanisms of diseases for which there is no absolute animal model such as neuronal diseases,[4] mitochondrial diseases, and metabolic diseases,[5] and lens-disorders.[6] iPSC-derived normal and disease-specific tissues or cells, owing to their pluripotency, enable us to establish a high-throughput screening system to strategize and identify therapies for diseases.

In the context of reproductive disease modeling, iPSCs may play a vital role in regenerating reproductive cells and tissues. Specially, female reproductive cells such as oocytes, endometrium, granulosa cells, etc., can be regenerated by reprogrammed female fibroblasts or oocyte-specific cells (e.g., granulosa cells). In a study, functional and steroidogenic ovarian granulosa cells were produced by human amniocyte-derived induced pluripotent stem cells (hAdiPSCs) which secreted estradiol *in vitro*. This provides an opportunity and platform to produce autologous ovarian tissue *ex vivo*[7,8] and thus can be pivotal in improving pregnancy success rate in *in vitro* fertilization (IVF). Furthermore, iPSC technology may provide *in vitro* differentiated ovarian cellular system to study mechanisms of ovarian diseases and high throughput system to screen novel therapeutics.[9] iPSC-derived diseased cell/

tissue types can also be cultured in microfluidic chips[10] and manipulated using genome editing techniques (CRISPR) to silence or overexpress putative or candidate genes to check the effects of perturbation which may provide additional strategies to develop novel therapies.[11]

CONCLUSION

Due to lack of direct translatable animal models, it is needed that an *in vitro* cellular model derived from patient-derived iPSCs be created which provides a platform and cellular system to investigate pathogenetic mechanisms of diseases. Currently, various diseases due to nature of their rare occurrence and/or fatal outcomes, result in lack of patient tissue samples and specimen and subjects to characterize diseases. The development of patient-derived stem cell model enables us to discover novel biomarkers of diseases and design and screen therapies.

CORRECTION STATEMENT

This correction is to keep the overall gist of the manuscript in the context of reproductive diseases and pregnancy disorders. The statement made previously regarding X-ALD is not related to pregnancy and therefore, being an expert in the field of reproductive immunology, I would like to correct this statement. When I gain more experience in the field of neurological diseases, I may write such statement in a neurology-specific journal. Thank you for understanding.

REFERENCES

1. Marchetto MC, Brennand KJ, Boyer LF, Gage FH. Induced pluripotent stem cells (iPSCs) and neurological disease modeling: Progress and promises. *Hum Mol Genet.* 2011; 20(R2): R109-R115. doi: 10.1093/hmg/ddr336

2. Ebert AD, Liang P, Wu JC. Induced pluripotent stem cells as a disease modeling and drug screening platform. *J Cardiovasc Pharmacol.* 2012; 60(4): 408-416. doi: 10.1097/FJC.0b013e318247f642

3. Takahashi K, Yamanaka S. Induction of pluripotent stem cells from mouse embryonic and adult fibroblast cultures by defined factors. *Cell.* 2006; 126(4): 663-676. doi: 10.1016/j.cell.2006.07.024

4. Li L, Chao J, Shi Y. Modeling neurological diseases using iPSC-derived neural cells: iPSC modeling of neurological diseases. *Cell Tissue Res.* 2018; 371(1): 143-151. doi: 10.1007/s00441-017-2713-x

5. Liang KX, Kristiansen CK, Mostafavi S, et al. Disease-specific phenotypes in iPSC-derived neural stem cells with POLG mutations. *EMBO Mol Med.* 2020; 12(10): e12146. doi: 10.15252/emmm.202012146

6. Joseph R, Bales K, Srivastava K, Srivastava O. Lens epithelial cells-induced pluripotent stem cells as a model to study epithelial-mesenchymal transition during posterior capsular opacification. *Biochem Biophys Rep.* 2019; 20: 100696. doi: 10.1016/j.bbrep.2019.100696

7. Lipskind S, Lindsey JS, Gerami-Naini B, et al. An embryonic and induced pluripotent stem cell model for ovarian granulosa cell development and steroidogenesis. *Reprod Sci.* 2018; 25(5): 712-726. doi: 10.1177/1933719117725814

8. Cozzolino M, Marin D, Sisti G. New Frontiers in IVF: mtDNA and autologous germline mitochondrial energy transfer. *Reprod Biol Endocrinol.* 2019; 17(1): 55. doi: 10.1186/s12958-019-0501-z

9. Gulimiheranmu M, Wang X, Zhou J. Advances in female germ cell induction from pluripotent stem cells. *Stem Cells Int.* 2021; 2021: 8849230. doi: 10.1155/2021/8849230

10. Laronda MM, Burdette JE, Kim J, Woodruff TK. Recreating the female reproductive tract in vitro using iPSC technology in a linked microfluidics environment. *Stem Cell Res Ther.* 2013; 4 Suppl 1: S13. doi: 10.1186/scrt374

11. McTague A, Rossignoli G, Ferrini A, Barral S, Kurian MA. Genome editing in iPSC-based neural systems: From disease models to future therapeutic strategies. *Front Genome Ed.* 2021; 3: 630600. doi: 10.3389/fgeed.2021.630600