

Version 1.1 Revision Date: 03/21/2018

# Standard Macrophage Depletion Kit (Clodrosome® + Encapsome®)

#### **DESCRIPTION**

Clodrosome® is a multilamellar liposome suspension in which clodronate is encapsulated in the aqueous compartments of the liposomes. Encapsome® is formulated and prepared identically to Clodrosome® except that clodronate is not added to the liposomes. The liposomes are filtered through 2 µm polycarbonate membranes to ensure that the larger particles, which may be toxic to animals, are removed from the suspension. Both are prepared and packaged under sterile conditions. When animals or cells are treated with Clodrosome®, phagocytic cells recognize the liposomes as invading foreign particles and proceed to remove the liposomes from the local tissue or serum via phagocytosis. The liposomes then release clodronate into the cytosol, resulting in cell death. Non-encapsulated clodronate cannot cross the cell membrane to initiate cell death.

Control liposomes (Encapsome®) are recognized and phagocytosed by the same mechanism as Clodrosome®. Since the control liposomes do not contain clodronate, the phagocytic cells are not killed. However, phagocytes do respond to the ingestion of control liposomes by cytokine secretion, temporary suspension of phagocytic activity and other responses described in the literature.



Version 1.1 Revision Date: 03/21/2018

## FORMULATION INFORMATION

# Clodrosome® Liposomal Clodronate Suspension

Lipid Composition	Concentration (mg/ml)	Concentration (mM)	Molar Ratio Percentage
L-α-Phosphatidylcholine	18.8	24.3	70
Cholesterol	4.2	10.9	30
Total	23 mg/ml	35.1 mM	100

Encapsulated Drug	Concentration
Clodronate ((Dichloro-phosphono-methyl)phosphonate), Disodium Salt	18.4* mM

<sup>\*</sup> Depending on the type of the clodronate salt, its concentration (mg/ml) varies. If tetra hydrate salt is used, the concentration of the encapsulated drug will be  $\sim$ 7 mg/ml, and if a non-hydrated salt is used, the concentration will be  $\sim$ 5 mg/ml.

# Encapsome® Control Liposome Suspension

Lipid Composition	Concentration (mg/ml)	Concentration (mM)	Molar Ratio Percentage
L-α-Phosphatidylcholine	18.8	24.3	70
Cholesterol	4.2	10.9	30
Total	23 mg/ml	35.1 mM	100



Version 1.1 Revision Date: 03/21/2018

Buffer and Liposome Size	Specification
Buffer	Phosphate Buffered Saline
рН	7.4
Liposome Size	1.5-2 μm

#### **TECHNICAL NOTES**

- When animals or cells are treated with Clodrosome®, phagocytic cells recognize the liposomes as invading foreign particles and proceed to remove the liposomes from the local tissue or serum via phagocytosis. The liposomes then release clodronate into the cytosol resulting in cell death. Unencapsulated clodronate cannot cross the cell membrane to initiate cell death.
- Encapsome® control liposomes are recognized and phagocytosed by the same mechanism as Clodrosome®. Since the control liposomes do not contain clodronate, the phagocytic cells are not killed. However, phagocytes do respond to the ingestion of the control liposomes by cytokine secretion, temporary suspension of phagocytic activity and other responses described in the literature.
- The product must be removed from the vial using sterile technique. Do not use if sterility is compromised. This is particularly important if a single vial is accessed multiple times over several weeks. The product should not be used more than 60 days after receipt, even if unopened.
- Liposomes may settle when left undisturbed for more than a few hours. Immediately
  prior to use, in order to ensure a homogeneous liposome suspension, slowly invert the
  vial several times until the suspension appears homogeneous by visual inspection.
  Vigorous or erratic shaking will not damage the liposomes; however, may induce
  foaming and bubble formation making it more difficult to accurately measure the desired
  dosage.



Version 1.1 Revision Date: 03/21/2018

- If the personnel performing intravenous injections are not experienced in or familiar with, precautions for injecting larger volumes (~10% animal weight in ml), viscous liquids or particulate suspensions, consider having extra animals available in case serious injection-related adverse events occur. Dose control animals first to become familiar with large volume injections.
- Within hours after systemic administration of Clodrosome®, animals begin to lose
  important components of their immune system. Standard animal handling and housing
  protocols are not suitable for immunocompromised animals. Even when such precautions
  are taken, monitor the general health of each animal for opportunistic infections unrelated
  to the experimental protocol. There is no inherent toxicity to the product at the
  recommended dose levels.
- When dosing intravenously, use standard precautions for dosing larger volumes to animals including the following: a) warm product to room temperature prior to dosing; b) ensure that all air bubbles are removed from the syringe prior to dosing. Intravenous injection of air bubbles may result in air emboli which can kill or seriously injure animals; c) inject product at a slow, steady rate of no more than 1 ml/min; d) decrease infusion rate if animals display any atypical reactions such as unusual agitation.
- Infusion-related adverse reactions usually involve the animal gasping for air or other seizure-like movements. Animals often recover with no apparent permanent injury, but any potential effects on experimental results must be assessed by the researcher.
- Liposomes should be kept at 4 °C and **NEVER** be frozen.

#### **APPEARANCE**

Clodrosome® and Encapsome® are both white milky suspensions made of large micro size multilamellar liposomes. Due to their large size, some liposomes might settle to the bottom of the vial. If left sitting idle in the refrigerator, Encapsome® will phase separate and form pellets in the bottom of the vial leaving a clear solution on top. Clodrosome® might do the same only not as severely. Therefore, both should be shaken to form a homogeneous solution prior to use.



Version 1.1 Revision Date: 03/21/2018

#### STORAGE AND SHELF LIFE

### Storage

Clodrosome® and Encapsome® should always be stored at in the dark at 4 °C, except when brought to room temperature for brief periods prior to animal dosing. DO NOT FREEZE. If the suspension is frozen, clodronate can be released from the liposomes thus limiting its effectiveness in depleting macrophages. ENS is not responsible for results generated by frozen product.

#### Shelf Life

Clodrosome® and Encapsome® are made on daily basis. The batch that is shipped is manufactured on the same day. It is advised to use the products within 60 days of the manufacturing date.

#### REFERENCES AND BACKGROUND READING

- 1. <u>Hinson SR, Clift IC, Luo N, Kryzer TJ, Lennon VA. Autoantibody-induced internalization of CNS AQP4 water channel and EAAT2 glutamate transporter requires astrocytic Fc receptor.</u> Proceedings of the National Academy of Sciences. 2017 May 23;114(21):5491-6.
- 2. <u>Dhupkar P, Gordon N, Stewart J, Kleinerman ES. Anti-PD-1 therapy redirects macrophages</u> from an M2 to an M1 phenotype inducing regression of OS lung metastases. Cancer Medicine. 2018 May 7.
- 3. <u>Xiong Y, Page JC, Narayanan N, Wang C, Jia Z, Yue F, Shi X, Jin W, Hu K, Deng M, Shi R. Peripheral neuropathy and hindlimb paralysis in a mouse model of adipocyte-specific knockout of Lkb1. EBioMedicine. 2017 Oct 1;24:127-36.</u>
- 4. <u>Crider A, Feng T, Pandya CD, Davis T, Nair A, Ahmed AO, Baban B, Turecki G, Pillai A.</u> <u>Complement component 3a receptor deficiency attenuates chronic stress-induced monocyte infiltration and depressive-like behavior. Brain, behavior, and immunity. 2018 Mar 5.</u>



Version 1.1 Revision Date: 03/21/2018

- 5. <u>Kocher T, Asslaber D, Zaborsky N, Flenady S, Denk U, Reinthaler P, Ablinger M, Geisberger R, Bauer JW, Seiffert M, Hartmann TN. CD4+ T cells, but not non-classical monocytes, are dispensable for the development of chronic lymphocytic leukemia in the TCL1-tg murine model. Leukemia. 2016 Jun;30(6):1409.</u>
- 6. Zhu Z, Ding J, Ma Z, Iwashina T, Tredget EE. Systemic depletion of macrophages in the subacute phase of wound healing reduces hypertrophic scar formation. Wound Repair and Regeneration. 2016 Jul 1;24(4):644-56.
- 7. <u>Haque MR, Lee DY, Ahn CH, Jeong JH, Byun Y. Local co-delivery of pancreatic islets and liposomal clodronate using injectable hydrogel to prevent acute immune reactions in a type 1 diabetes. Pharmaceutical research. 2014 Sep 1;31(9):2453-62.</u>
- 8. <u>Mayo L, Cunha AP, Madi A, Beynon V, Yang Z, Alvarez JI, Prat A, Sobel RA, Kobzik L, Lassmann H, Quintana FJ. IL-10-dependent Tr1 cells attenuate astrocyte activation and ameliorate chronic central nervous system inflammation. Brain. 2016 May 31;139(7):1939-57.</u>
- 9. <u>Kermanizadeh A, Chauché C, Balharry D, Brown DM, Kanase N, Boczkowski J, Lanone S, Stone V. The role of Kupffer cells in the hepatic response to silver nanoparticles.</u>

  Nanotoxicology. 2014 Aug 31;8(sup1):149-54.
- 10. Nandi B, Shapiro M, Samur MK, Pai C, Frank NY, Yoon C, Prabhala RH, Munshi NC, Gold JS. Stromal CCR6 drives tumor growth in a murine transplantable colon cancer through recruitment of tumor-promoting macrophages. Oncoimmunology. 2016 Aug 2;5(8):e1189052.