1	Title:Bone marrow mesenchymal stem cells stimulated by tumor necrosis factor- α can									
2	promote the repair of fatty liver cell oxidative stress injury and fatty liver									
3	ischemia-reperfusion injury									
4	Running title: BMSCs stimulated by TNF- α promote the repair									
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21 Abstract Mesenchymal stem cells (MSCs) have great prospects for the treatment of 22 ischemia-reperfusion injury (IRI) after liver transplantation. At this stage, the main factor 23 limiting MSCs in the treatment of fatty liver IRI of the donor liver is the residence time of stem cells at the site of inflammatory injury. This study investigated whether bone 24 25 marrow mesenchymal stem cells (BMSCs) stimulated by tumor necrosis factor- α (TNF- α) 26 can promote the repair of fatty liver cell oxidative stress injury and fatty liver IRI in rats. 27 The results indicated the BMSCs treatment group stimulated by TNF- α had lower indexes 28 and significantly improved oxidative stress damage in vitro through Transwell chamber co-culture experiment, compared with the control group. In vivo, compared with the PBS 29 group and the BMSCs group, the indexes of the BMSCs treatment group stimulated by 30 TNF- α were reduced, and the degree of tissue damage was significantly reduced. BMSCs 31 32 can repair fatty liver cell oxidative stress injury and fatty liver IRI, however, BMSCs 33 stimulated by TNF- α can promote the repair of tissues and cells.

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Key words: Bone marrow mesenchymal stem cells, tumor necrosis factor-α, fatty liver
cells, oxidative stress injury, ischemia-reperfusion injury

37 Introduction

Liver transplantation is the only effective way to treat end-stage liver disease. With the increasing maturity of liver transplantation technology and the increasing number of liver transplant patients, the shortage of donor livers has become more prominent 1. How to safely use marginal donor liver has become a research hotspot. As a kind of marginal donor liver, fatty liver has short storage time and is more sensitive to IRI, these problems are more likely to lead to postoperative complications such as primary no function (PNF) and early graft dysfunction2. With the increase in the national obesity rate and the aging population in my country, the proportion of fatty liver in the donor liver pool in China is also increasing. Finding a repair method to improve the safety and utilization of fatty liver donor liver is what we urgently and urgently need to solve.

In recent years, more and more studies have shown that MSCs have great prospects 48 49 for the treatment of IRI after liver transplantation3,4. At this stage, the main factor limiting MSCs in the treatment of fatty liver IRI of the donor liver is the residence time of 50 51 stem cells at the site of inflammatory injury. TNF- α is the main cytokine in the process of 52 inflammation, and MSCs stimulated by cytokine can specifically bind to a large number 53 of selectin ligands accumulated on the microvascular intima at the site of IRI, there is a scientific hypothesis that allows more BMSCs to stay in the ischemic part of the damaged 54 55 liver 56. Therefore, this experiment aims to explore whether BMSCs stimulated by TNF- α can promote the repair of fatty liver cell oxidative stress injury and fatty liver IRI in rats. 56

57 **Result**

58 Preparation of BMSCs and establishment of oxidative stress model of IAR-20 59 fatty liver cells. There were specific protein expressions on the surface of BMSCs. 60 According to the expression results of CD79, CD45, CD90, and CD29 detected by flow

61 cytometry, the extracted cells were determined to be BMSCs (FIG. 1 A), which can be62 followed up for research.

After stimulating IAR-20 cells with 100 μ M sodium palmitate and 200 μ M sodium oleate for 24 hours, a stable fatty liver cell model was formed (FIG. 1 B). After stimulating fatty liver cells with 3mmol/L H₂O₂ for 3 hours, the cell viability was significantly reduced, which was about 50% of the cell viability of non-oxidative stress (FIG. 1 C).

68 These results confirmed that 3mmol/L H₂O₂ was the optimal concentration for 69 establishing an oxidative stress model.

70 **Repair effect of BMSCs stimulated by TNF-***α* **on fatty liver cells damaged by** 71 oxidative stress in vitro. After 72 hours of co-cultivation in the Transwell chamber, the 72 supernatant of cells in the lower chamber was collected to detect the function of liver 73 cells and the expression levels of inflammatory factors in each experimental group. 74 Compared with the H-IAR 20 group, the ALT and AST of the T-IAR 20 group and the 75 B-IAR 20 group were significantly lower, but there was no significant difference in the ALB level of each group (FIG. 2 A). Compared with the H-IAR 20 group, the 76 inflammatory indexes of the cell supernatant of the T-IAR 20 group were significantly 77 78 reduced, and the T-IAR 20 group had a lower level of inflammatory factor expression 79 than the B-IAR 20 group (FIG. 2 B), indicating that compared with the control group,

80 BMSCs stimulated by TNF- α improved the liver function and inflammation of fatty liver

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81 cells damaged by oxidative stress.

CCK-8 assay was used to detect the cell viability of IAR-20, the greater the absorbance, the stronger the cell viability. The results showed that compared with the H-IAR 20 group, the absorbance of the B-IAR 20 group and the T-IAR 20 group was significantly increased, and the cell viability of the injured hepatocytes was significantly enhanced after BMSCs treatment (FIG. 2 C).

87 Understand cell apoptosis through flow cytometry. According to flow cytometry, the first, second, and fourth quadrants represented cell apoptosis in different periods. 88 89 Compared with the H-IAR 20 group, the apoptosis rate of hepatocytes in the B-IAR 20 and T-IAR 20 groups was significantly lower (FIG. 3 A, B). The expression levels of 90 91 HO-1 and bcl-2 represent the anti-oxidative stress and anti-apoptotic ability of cells, 92 respectively. Western blot showed that the expression of HO-1 and bcl-2 proteins in the 93 T-IAR 20 group were significantly increased, and their anti-oxidative stress and 94 anti-apoptotic capabilities were enhanced (FIG. 3 C, D). The above results indicate that in 95 in vitro experiments, BMSCs stimulated by TNF- α have a repairing effect on fatty liver cells damaged by oxidative stress. 96

97 Repair effect of BMSCs stimulated by TNF-α on IRI of fatty liver in rats in vivo.
98 The fatty liver model of rats was established by high-fat diet, and the degree of fatty liver
99 was confirmed by oil red O staining. The proportion of steatosis in liver lobules reached
100 more than 3/4, showing diffuse steatosis, which is severe fatty liver (FIG. 4 A). An

ischemia-reperfusion model was artificially constructed by surgery (FIG. 4 B). Finally, it
was seen that the clipped liver lobe was dark red and large congestion areas appeared.

103 12 hours after the treatment of ischemia-reperfusion injury in rats, tissues were collected for detection of liver function, inflammatory factors and other related 104 105 indexes. The ALT index level of the BMSCs/TNF- α treatment group was significantly 106 lower than that of the PBS treatment group. The TBil index level of the PBS treatment 107 group was significantly higher than that of the Sham group. After treatment with BMSCs, the TBil expression level decreased, while the TBil index of the BMSCs/TNF-α treatment 108 109 group decreased more significantly, and there was no significant change in AST 110 expression (FIG.5 A). The expression of inflammatory factors in the PBS treatment group was significantly higher than that in the sham group, the BMSCs treatment group and 111 112 BMSCs/TNF-a treatment group were compared with the PBS treatment group, the inflammatory indexes TNF- α and IL-6 were significantly reduced, however IL-1 β and 113 114 INF- γ was not significantly different (FIG. 5 B). Therefore, the BMSCs/TNF- α treatment 115 group had a greater impact on liver function and its inflammatory factors, which can improve liver function status and reduce inflammation. In rat liver tissues, the expression 116 117 levels of bcl-2 and HO-1 proteins tended to be consistent with the in vitro experimental 118 results. The expressions of the two proteins in the BMSCs treatment group and the BMSCs/TNF- α treatment group were significantly higher than those in the PBS treatment 119 120 group (FIG.5 C, D), BMSCs/TNF-α also exerted strong anti-oxidation and anti-apoptosis 121 abilities in vivo.

122	The results of pathological HE staining of liver tissues in each group showed that the
123	BMSCs/TNF- α treatment group reduced liver tissue damage to a greater extent than the
124	other groups (FIG. 6 A). Injecting CM-Dil labeled BMSCs into SD rats can more
125	intuitively observe the status of BMSCs in the liver. It was observed by fluorescence
126	microscope that the number of BMSCs in the liver in the BMSCs/TNF- α treatment group
127	was significantly higher than that in the BMSCs treatment group (FIG. 6 B, C).
128	These results showed that, whether in vivo or in vitro, TNF- α can enhance the
129	functions of cell homing and repair by stimulating BMSCs, and promote the

130 anti-inflammatory, anti-oxidant and other repair effects of IRI.

131 Discussion and Conclusion

132 MSCs are widely distributed in various parts of the body and are a type of adult stem cells with self-renewal and multi-differentiation potential. It can participate in the repair 133 134 process and participate in the inflammatory response 7 through mechanisms such as cell 135 fusion or differentiation, paracrine8, gene carriers, immunomodulatory function9, homing 136 and initiation of endogenous repair. BMSCs are mesenchymal stem cells that exist in the 137 bone marrow stroma without hematopoietic function. Compared with other MSCs, 138 BMSCs have unique advantages such as relatively easy extraction and weak immunogenicity10, it can proliferate indefinitely in vitro and has the potential to 139 140 differentiate into tissue cells derived from mesoderm and neuroectoderm.

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141 BMSC repairs oxidative stress damage through a variety of mechanisms: such as 142 secretion of growth factors, regulation of cell and tissue activity through cytokines and chemokines, and immune regulation 12-15. Related in vitro experimental studies have 143 shown that co-culture of hepatocytes and BMSCs can better maintain the original shape 144 145 of hepatocytes, and maintain the ability of hepatocytes to synthesize albumin and carry 146 out ammonia metabolism at a higher level16, studies have also shown that co-culture of 147 liver cells and MSCs can enhance liver cell function and maintain liver cell metabolism 148 18, CAMUSSI G 19and others believe that the soluble factors produced by BMSCs, the 149 secreted extracellular matrix components, and the ratio of hepatocytes/BMSCs co-culture 150 are all involved in the protection of hepatocytes, in vitro experiments using porcine 151 hepatocytes showed that when hepatocytes/BMSCs were co-cultured at a ratio of 2:1, 152 hepatocytes had the best ability to synthesize albumin and urea. Yu-Ting He 20 and others 153 used hepatocytes/MSCs at a culture ratio of 5:1 for culture to generate stable primary 154 hepatocytes. MINHUI LI 21 and others co-cultured hUc-MSC and HK-2 cells at a ratio of 155 12:1 to prove that hepatocyte growth factor derived from human umbilical cord blood mesenchymal stem cells promoted autophagy in HK-2 cells treated with AOPP. Studies 156 157 have considered that the co-culture system can make BMSCs differentiate into 158 hepatocytes to a certain extent 2125, but the co-culture experiment of BMSCs such as 159 Lange has proved that the proportion of BMSCs differentiation into hepatocytes is very 160 small in a relatively short period of time26, the impact on the experiment is not large.

161 Therefore, in this experiment, the indirect co-cultivation method was used to co-culture

162 IAR-20 and BMSCs, and the co-cultivation ratio was 5:1.

163 The BMSCs stimulated by cytokines can produce specific protein receptors, which bind to the large number of selectin ligands accumulated on the microvascular intima of 164 165 the injured site, so that more BMSCs can act on the injured site, and further repair the 166 tissue. The stimulated MSCs are further activated to further activate the functions of 167 paracrine and immune regulation, and promote tissue repair. It has been reported in the literature that TNF-a can promote the proliferation and migration of BMSCs 26, he 27 168 169 and others proved that low concentrations of IFN-y can promote the proliferation and 170 migration of dental pulp MSCs, and inhibit their differentiation. Koning 28and others proved that inflammatory factors play an important role in stimulating the migration of 171 172 MSCs. Essid 29 and others found that TNF-a at a concentration of 20 ng/ml can induce rat hepatocyte apoptosis. In this experiment, 10 ng/ml TNF-a was selected to 173 174 pre-stimulate BMSCs, which can improve the proliferation and migration ability of 175 BMSCs to a certain extent, further activate BMSCs, and prevent inflammatory factors from inducing rat hepatocyte apoptosis. 176

The liver IRI during liver transplantation includes two parts: cold and warm IRI30. In this experiment, a surgical model established by simulating liver warm IRI was to clamp part of the blood supply vessels of the rat liver to achieve 70% of the liver tissue ischemia31, and open the blood flow after 30 minutes of clamping. Using this method to 181 establish a model can achieve effective liver tissue damage and ensure the survival rate of182 rats during surgery.

183 MSCs have been proved to be safe and effective for clinical treatment, but the treatment effect of MSCs alone is weak. MSCs died in the first few hours of 184 185 transplantation, and their homing efficiency was low due to in vitro culture and other 186 reasons. Therefore, improving the survival rate and homing ability of MSCs in vivo is an 187 important part of improving the therapeutic effect of MSCs. Methods such as overexpression of chemokines32 and increasing the expression level of adhesion 188 189 molecules33 are used to explore and improve the homing, survival, and function of 190 BMSCs. In this experiment, the inflammatory factor TNF- α was used to pre-stimulate BMSCs for 24 hours to promote the expression of cell surface-related adhesion molecules 191 192 and activate cell functions, so as to enhance the homing ability of BMSCs and the 193 anti-inflammatory and anti-oxidant repair effects on damaged liver tissues.

In summary, after low-dose TNF- α pre-stimulated BMSCs, the ability of BMSCs to repair the oxidative stress damage of fatty liver cells in vitro had been significantly enhanced, and TNF- α enhanced the functions of cell homing and repair by stimulating BMSCs, and promoted the anti-inflammatory and anti-oxidant repair effects of HIRI. Therefore, this experiment provides theoretical basis and new ideas for optimizing the clinical treatment plan, improving the therapeutic effect of stem cells, and repairing liver IRI.

201 Materials and Methods

Experimental animals. Healthy SPF male SD rats, 8-10 weeks old, weighing 203 200-250g, and healthy SPF male SD rats, 2-4 weeks old, weighing 40-60g, purchased 204 from China Food and Drug Control Research Institute, the culture environment did not 205 exceed 5 per cage, free drinking water, the breeding environment temperature was 206 (24 ± 2) °C, and the relative humidity was (60 ± 10) %.

Ethics approval. All animal experiments were approved by the Experimental
Animal Ethics Committee of Nankai University and processed according to the national
and international rules of animal welfare.

210 The preparation, identification and pretreatment of BMSCs. Male SD rats of 2 to 4 weeks old and weighing 40 to 60 g were sacrificed under anesthesia with sodium 211 212 pentobarbital (Hubei Hongyunlong Biotechnology Co., Ltd.) and placed in 75% alcohol for 15 minutes, under aseptic conditions, separated the femur and tibia, cutted off the 213 214 epiphyses on both sides, used a 5ml syringe to flush out the cells, filtered twice with a 215 40µm sieve, added 5ml of red blood cell lysate, placed at 4°C for 10-15 minutes, stopped the lysis and centrifuged to collect the buffy coat cells, resuspended in MEM- α medium 216 217 (HyClone, USA) containing 15% FBS (HyClone, USA) and antibiotics (100 U/mL 218 penicillin G and 100 mg/mL streptomycin), cultivated in a 37°C, 5% CO2 cell incubator, 219 and cultivated to the third generation for use.

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Selected the 3rd generation of well-growing BMSCs to adjust the cell concentration

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to 5×10^5 cells/100µl, and added anti-CD 29-PE, anti-CD 90-FITC, anti-CD 45-FITC, and anti-CD 79-PE (eBioscience, USA), incubated for 30 min at room temperature in the dark, washed with PBS (HyClone, USA), centrifuged, and resuspended in 100µl PBS. Used flow cytometry to detect the expression levels of the four proteins on the surface of BMSCs cells.

BMSCs were cultured to the third generation, 10ng/ml TNF-α (Peprotech, USA) was
added to the cell culture medium of BMSCs, and cultured in a cell incubator for 24 hours.

Cell culture and establishment of oxidative stress injury model of fatty liver
cells. Mouse normal liver cells IAR-20 were purchased from the Cell Resource Center of
the Institute of Basic Medicine, Chinese Academy of Medical Sciences. Cultured in
MEM/EBSS (HyClone, USA) medium containing 10% FBS and antibiotics (100 U/mL
penicillin G and 100 mg/mL streptomycin) in a 37°C, 5% CO2 cell incubator.

Inoculated normal IAR-20 in a 96-well plate, the number of cells was about 1×10⁴ cells/well, used high-fat complete medium containing 10% FBS and antibiotics, 200 μ M sodium oleate (Sigma O-7501, USA)-100 μ M sodium palmitate (Sigma P-9767, USA) for 24h. After the hepatocytes were fatty, 3mmol/L H2O2 was added for stimulation, the stimulation time gradient was set to 0h, 0.5h, 1h, 2h, 3h, and the best stimulation time was selected.

Co-cultivation of Transwell Chamber System and Grouping of Cell Experiments. Used transwell chambers (corning, USA) for indirect co-cultivation. The

upper chamber was BMSCs (2×10^{5} /well) and the lower chamber was IAR-20 241 $(1 \times 10^{6}$ /well). The total culture was 72 hours, and each group had 3 replicate wells, taked 242 out the cell, collected the cell culture supernatant, washed twice with PBS, trypsin 243 (Solarbio, China) digestion and centrifugationed to collect the hepatocytes in each well. 244 245 According to different co-cultivation systems, the cells were divided into fatty IAR-20 246 group (IAR 20 group), oxidative stress damaged fatty IAR-20 group (H-IAR 20 group), 247 oxidative stress damaged fatty IAR-20 and BMSCs co-culture group (B-IAR 20 group), fatty IAR-20 damaged by oxidative stress and BMSCs co-culture group (T-IAR 20 group) 248 249 stimulated by TNF- α in 4 groups.

Establishment of fatty liver IRI model and grouping of animal experiments. 250 Choose 8-10 weeks old male SD rats weighing 200-250g, give Methionone- and 251 252 Choline-deficient (MCD) model feed (Nantong Trofe Feed Technology Co., Ltd.) diet for 2 weeks to establish a stable fatty liver model. Intraperitoneal injection of 1% sodium 253 254 pentobarbital (40mg/kg) to maintain the anesthesia of the donor rat, clamped the left outer 255 and left middle hepatic artery trunks, and opened the blood vessels after clamping for 30 minutes, used an insulin needle to inject 0.5ml of the treatment liquid through the portal 256 257 vein, close the abdominal cavity, and put it into the postoperative recovery box for 258 resuscitation. Grouped according to different treatment methods: ① Sham operation group (Sham group), 2) Fatty liver IRI PBS treatment group (PBS group), 3) BMSCs 259 260 treatment group for fatty liver IRI (BMSCs group), (4)BMSCs stimulated by TNF- α 261 treatment group for fatty liver IRI(TNF- α /BMSCs group).

Detection index. Liver function indexes: ALT, AST, ALB, using ELISA kit (Youda,
China) to detect inflammation indicators: IL-1β, IL-6, TNF-α, INF-γ, the luminescence
situation of CM-Dil in BMSCs.

CCK-8 assay. After 72 hours of co-cultivation, the cells from the lower chamber were collected and added to a 96-well plate. The number of cells was about 5000 cells/well. Added 10µl of CCK-8 (Solarbio, China) to each well, incubated for 1h in a cell incubator, and detected the OD value at a wavelength of 450nm using a microplate reader.

270 ANNEXIN V-FITC/PI detects cell apoptosis. After 72 hours of co-cultivation, collected the IAR-20 cells in the six-well plate, washed with PBS, suspended the cells 271 272 with 1ml of $1 \times$ Binding Buffer, centrifuged and discarded the supernatant, and then 273 resuspended the cells with $1 \times$ Binding Buffer. Adjusted the cell density to 1×10^6 cells/ml. 274 took 100µL of cell suspension, added 5µL Annexin V-FITC (Solarbio, China) to the tube, 275 at room temperature, protected from light, mixed gently, 10min, then added 5µL PI, at 276 room temperature, protected from light, and incubated for 5 min, added PBS to 500µL, 277 mixed gently, and detected cell apoptosis by flow cytometry within 1 hour.

Western blotting. Electrophoresis was performed using 10% SDS-PAGE (Solarbio,
China) and transferred to PVDF membrane (Millipore, USA). Next, the membrane was
sealed in 5% skimmed milk powder (BD, USA) for 2h, Antibodies used for

immunoblotting in this study were specific to HO-1, bcl-2 (Abcam, USA) and β-actin
protein antibody (Proteintech, USA). Used enhanced chemiluminescence detection
system to detect target protein.

Statistics. GraphPad 8.0.2 statistical software was used to analyze and graph the data. The measurement data was expressed as mean ± standard deviation. The independent Student's t test was used to compare the differences between the two groups, analysis of variance compares the differences between two or more groups, A P value <0.05 means significant difference, and a P value <0.01 means extremely significant difference. Each experiment was repeated 3 times.

- 290 Author Disclosure Statement
- 291 No competing financial interests exist.
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296 Author contributions

Funding acquisition, Wentao Jiang; Investigation, Yuying Tan and Jiali Qiu;
Methodology, Weiqi Zhang, Yan Xie and Jiang Li; Project administration, Wentao Jiang;
Visualization, Chiyi Chen and Junjie Li; Writing – original draft, Yuying Tan, Jiali Qiu
and Weiqi Zhang; Writing – review & editing, Wentao Jiang.

301 References

302	1.	Baidya R, Crawford DHG, Gautheron J, Wang H and Bridle KR. 2020.
303		lecroptosis in Hepatosteatotic Ischaemia-Reperfusion Injury. Int J Mol Sci,
304		1(16), 5931.

- Michelotto J, Gassner JMGV, Moosburner S, Muth V, Patel MS, Selzner M,
 Pratschke J, Sauer IM and Raschzok N. 2021. Ex vivo machine perfusion:
 current applications and future directions in liver transplantation. Langenbecks
 Arch Surg, 406(1), 39-54.
- 309 3. Haga H, Yan IK, Borrelli DA, Matsuda A, Parasramka M, Shukla N, Lee DD
 310 and Patel T. 2017. Extracellular vesicles from bone marrow-derived
 311 mesenchymal stem cells protect against murine hepatic ischemia/reperfusion
 312 injury. Liver Transpl, 23(6), 791-803.
- 4. Li SW, Cai Y, Mao XL, He SQ, Chen YH, Yan LL, Zhou JJ, Song YQ, Ye LP
- and Zhou XB. 2021. The Immunomodulatory Properties of Mesenchymal StemCells Play a Critical Role in Inducing Immune Tolerance after Liver
- Transplantation. Stem Cells Int, 2021, 6930263.
- 317 5. Cantz T, Manns MP and Ott M. 2008. Stem cells in liver regeneration and
 318 therapy. Cell Tissue Res, 331(1), 271-82.
- García-Bernal D, García-Arranz M, García-Guillén AI, García-Hernández AM,
 Blanquer M, García-Olmo D, Sackstein R, Moraleda JM and Zapata AG. 2020.

- 321 Exofucosylation of Adipose Mesenchymal Stromal Cells Alters Their Secretome
 322 Profile. Front Cell Dev Biol. 8, 584074.
- 323 7. Weiß J, Rau M and Geier A. 2014. Non-alcoholic fatty liver disease:
 324 epidemiology, clinical course, investigation, and treatment. Dtsch Arztebl
 325 Int, 111(26), 447–452.
- 326 8. Liu Y, Ren H, Wang J, Yang F, Li J, Zhou Y, Yuan X, Zhu W and Shi X. 2019.
- 327 Prostaglandin E2 secreted by mesenchymal stem cells protects against acute liver
 328 failure via enhancing hepatocyte proliferation. FASEB J, 33(2), 2514–2525.
- 329 9. Milosavljevic N, Gazdic M, Simovic Markovic B, Arsenijevic A, Nurkovic J,
- 330 Dolicanin Z, Djonov V, Lukic ML, Volarevic V. 2017. Mesenchymal stem cells
 331 attenuate acute liver injury by altering ratio between interleukin 17 producing
 332 and regulatory natural killer T cells. Liver Transpl, 23(8), 1040–1050.
- 333 10. Kemp KC, Hows J and Donaldson C. 2005. Bone marrow-derived
 334 mesenchymal stem cells. Leukemia & lymphoma, 46(11), 1531–1544.
- 335 11. Dikalova AE, Bikineyeva AT, Budzyn K, Nazarewicz RR, McCann L, Lewis W,
 336 Harrison DG and Dikalov SI. 2010. Therapeutic targeting of mitochondrial
 337 superoxide in hypertension. Circulation Res, 107(1), 106–116.
- Jiang Y, Jahagirdar BN, Reinhardt RL, Schwartz RE, Keene CD,
 Ortiz-Gonzalez XR, Reyes M, Lenvik T, Lund T, Blackstad M, Du J, Aldrich S,
 Lisberg A, Low WC, Largaespada DA and Verfaillie CM. 2002. Pluripotency of

341		mesenchymal stem cells derived from adult marrow. Nature, 418(6893), 41–49.
342	13.	Khubutiya MS, Vagabov AV, Temnov AA and Sklifas AN. 2014. Paracrine
343		mechanisms of proliferative, anti-apoptotic and anti-inflammatory effects of
344		mesenchymal stromal cells in models of acute organ injury. Cytotherapy, 16(5),
345		579–585.
346	14.	Liang X, Ding Y, Zhang Y, Tse HF and Lian Q. 2014. Paracrine mechanisms of
347		mesenchymal stem cell-based therapy: current status and perspectives. Cell
348		Transplant, 23(9), 1045–1059.
349	15.	Sensebé L, Krampera M, Schrezenmeier H, Bourin P and Giordano R. 2010.
350		Mesenchymal stem cells for clinical application. Vox Sang, 98(2), 93–107.
351	16.	Deregibus MC, Cantaluppi V, Calogero R, Lo Iacono M, Tetta C, Biancone L,
352		Bruno S, Bussolati B and Camussi G. 2007. Endothelial progenitor cell derived
353		microvesicles activate an angiogenic program in endothelial cells by a horizontal
354		transfer of mRNA. Blood, 110(7), 2440–2448.
355	17.	Liu M, Yang J, Hu W, Zhang S and Wang Y. 2016. Superior performance of
356		co-cultured mesenchymal stem cells and hepatocytes in poly (lactic acid-glycolic
357		acid) scaffolds for the treatment of acute liver failure. Biomed Mater, 11(1),
358		015008.
359	18.	Alzebdeh DA and Matthew HW. 2017. Metabolic Oscillations in Co-Cultures of

18

360

Hepatocytes and Mesenchymal Stem Cells: Effects of Seeding Arrangement and

361 Culture Mixing. J Cell Biochem, 118(9), 3003–3015.

- 362 19. Camussi G, Deregibus MC, Bruno S, Cantaluppi V and Biancone L. 2010.
 363 Exosomes/microvesicles as a mechanism of cell-to-cell communication. Kidney
 364 Int, 78(9), 838–848.
- 365 20. He YT, Zhu XL, Li SF, Zhang BQ, Li Y, Wu Q, Zhang YL, Zhou YY, Li L, Qi
- 366 YN, Bao J and Bu H. 2020. Creating rat hepatocyte organoid as an in vitro model
 367 for drug testing. World J Stem Cells, 12(10), 1184–1195.
- Li M, Jiang T, Zhang W, Xie W, Guo T, Tang X and Zhang J. 2020. Human
 umbilical cord MSC-derived hepatocyte growth factor enhances autophagy in
 AOPP-treated HK-2 cells. Exp Ther Med, 20(3), 2765–2773.
- 371 22. Hannafon BN and Ding WQ. 2013. Intercellular communication by
 372 exosome-derived microRNAs in cancer. Int J Mol sci, 14(7), 14240–14269.
- 373 23. Chen TS, Lai RC, Lee MM, Choo AB, Lee CN and Lim SK. 2010.
- 374 Mesenchymal stem cell secretes microparticles enriched in
 375 pre-microRNAs. Nucleic Acids Res, 38(1), 215–224.
- 376 24. Yoon YJ, Kim OY and Gho YS. 2014. Extracellular vesicles as emerging
 377 intercellular communicasomes. BMB Rep, 47(10), 531–539.
- 378 25. Subra C, Grand D, Laulagnier K, Stella A, Lambeau G, Paillasse M, De Medina
- 379 P, Monsarrat B, Perret B, Silvente-Poirot S, Poirot M and Record M. 2010.
- 380 Exosomes account for vesicle-mediated transcellular transport of activatable

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381		phospholipases and prostaglandins. J Lipid Res, 51(8), 2105–2120.
382	26.	Xiao Q, Wang SK, Tian H, Xin L, Zou ZG, Hu YL, Chang CM, Wang XY, Yin
383		QS, Zhang XH and Wang LY. 2012. TNF- α increases bone marrow mesenchymal
384		stem cell migration to ischemic tissues. Cell Biochem Biophys, 62(3), 409–414.
385	27.	He X, Jiang W, Luo Z, Qu T, Wang Z, Liu N, Zhang Y, Cooper PR and He W.
386		2017. IFN- γ regulates human dental pulp stem cells behavior via NF- κ B and
387		MAPK signaling. Sci Rep, 7, 40681.
388	28.	Koning JJ, Kooij G, de Vries HE, Nolte MA and Mebius RE. 2013.
389		Mesenchymal stem cells are mobilized from the bone marrow during
390		inflammation. Front Immunol, 4, 49.
391	29.	Essid E, Dernawi Y and Petzinger E. 2012. Apoptosis induction by OTA and
392		TNF- α in cultured primary rat hepatocytes and prevention by
393		silibinin. Toxins, 4(11), 1139–1156.
394	30.	Takahashi Y, Soejima Y and Fukusato T. 2012. Animal models of nonalcoholic
395		fatty liver disease/nonalcoholic steatohepatitis. World J Gastroenterol, 18(19),
396		2300–2308.
397	31.	Peralta C, Jiménez-Castro MB and Gracia-Sancho J. 2013. Hepatic ischemia
398		and reperfusion injury: effects on the liver sinusoidal milieu. J Hepatol, 59(5),
399		1094–1106.
400	32.	Ito T, Itakura S, Todorov I, Rawson J, Asari S, Shintaku J, Nair I, Ferreri K,

401		Kandeel	F and	l Mullen	Y.	2010.	Mesenc	hymal s	stem	cell a	ind	islet
402		co-transpl	antation	n pr	omotes	8	graft	revas	culari	zation		and
403		function."	Transpl	antation, 8	9(12),	1438–1	445.					
404	33.	Zhang C,	Zhu Y,	Wang J, H	lou L,	Li W ar	nd An H.	2019. C	XCR4	4-Overez	xpres	sing
405		Umbilical	Cord	Mesenc	hymal	Stem	Cells	Enhance	e Pro	otection	aga	ainst
406		Radiation	-Induce	d Lung In	jury. St	tem Cel	ls Int, 20)19, 2457	082.			
407												
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409 Figure Legends

Fig 1. Preparation of BMSCs and optimal concentration for establishing an oxidative 410 stress model. (A)Flow cytometry detection: The expression of CD79, CD45, CD90, and 411 CD29 on the surface of BMSCs(Mesenchymal stem cells have high expression of CD90 412 413 and CD29, and low expression of CD79 and CD45).(B)IAR-20 Oil Red O Staining: (a) 414 Normal IAR20 cells are in a small spindle shape, the cytoplasm of liver cells is basically 415 blue, and no red-stained lipid droplets are seen; (b) Fatty IAR-20 cells have a small 416 spindle shape, and a large number of red-stained lipid droplets can be seen in the 417 cytoplasm of liver cells. Original magnification, 100× (C) Cell counting kit-8 assay: Cell viability after H₂O₂ stimulates IAR-20. (**P<0.01) 418

Fig 2. In vitro, effects of BMSCs stimulated by TNF- α on liver function, inflammation 419 420 and cell viability of fatty liver cells damaged by oxidative stress. (A) Liver function 421 indexes of cell culture supernatant: The liver function indexes ALT and AST of the T-IAR 422 20 group and the B-IAR 20 group were significantly lower than those of the H-IAR 20 423 group, and there was no significant difference in the ALB levels of each group. (B) Compared with the H-IAR 20 group, the inflammatory indexes IL-1 β , IL-6, TNF- α , and 424 425 INF- γ of the cell supernatant of the T-IAR 20 group were significantly reduced, and the 426 T-IAR 20 group was compared with the B-IAR 20 group the expression level of 427 inflammatory factors is lower. (C) Cell counting kit-8 assay: Hepatocyte activity of each 428 experimental group (**P*<0.05, ***P*<0.01, ****P*<0.001, *****P*<0.0001)

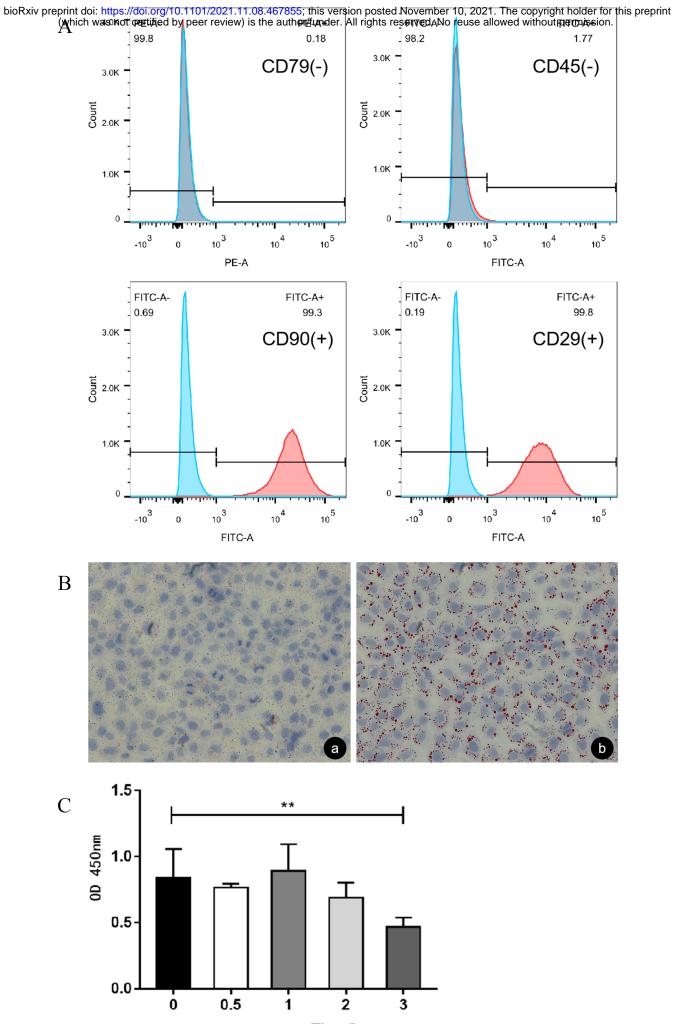
Fig 3. In vitro, effects of BMSCs stimulated by TNF-α on anti-apoptosis and anti-oxidant of fatty liver cells damaged by oxidative stress. (A) Hepatocyte apoptosis of each experimental group. (B) The specific apoptosis rate of hepatocytes in each experimental group. (C) Western blot of HO-1 and bcl-2 in IAR-20, The expressions of HO-1 and bcl-2 were higher in T-IAR 20 group. (D)The bar graph of western blot result for HO-1 and bcl-2. (**P*<0.05, ***P*<0.01, ****P*<0.001)

Fig 4. Establishment rat fatty liver and ischemia-reperfusion injury models. (A) Oil Red
O staining of liver tissue of SD rats: (a) SD rats fed with normal maintenance feed. (b)
SD rats were fed with MCD feed for 2 weeks. (B) SD rat fatty liver ischemia-reperfusion
injury before, during and after operation: (a) Before clamping the vascular trunk. (b)
Begin to clamp the vascular trunk. (c) Clamp the vascular trunk for 30 minutes and open
the blood flow.

Fig 5. In vivo, the effects of BMSCs stimulated by TNF- α treatment on liver function, 441 442 inflammation, anti-oxidation and anti-apoptosis of ischemia-reperfusion injury. (A) 443 Serum liver function index levels in SD rats of each experimental group: Compared with the ALT index level of the Sham group, the ALT index of the PBS treatment group was 444 significantly increased, and the BMSCs/TNF-a treatment group was significantly lower 445 446 than that of the PBS treatment group; P The TBil index level of the PBS treatment group 447 was significantly higher than that of the Sham group. After treatment with BMSCs, the 448 TBil expression level decreased, while the TBil index of the BMSCs/TNF-α treatment 449 group decreased more significantly; There was no significant change in AST expression. 450 (B) Serum inflammation index levels in SD rats of each group. (C) Western blot of HO-1 and bcl-2 in rat liver tissue, the expression of bcl-2 and HO-1 protein in the PBS group 451 was significantly lower than that in the Sham group, the expression of bcl-2 and HO-1 452 453 protein in the BMSCs treatment group and the BMSCs/TNF- α treatment group was 454 significantly higher than that of the PBS treatment group. However, the differences in the expression of their own proteins in the first two groups were not significant. (D) The bar 455 graph of western blot result for HO-1 and bcl-2. (*P < 0.05, **P < 0.01, ***P < 0.001) 456 457 Fig 6. The effect of different treatment methods on the liver tissue of IRI and the retention of BMSCs in the liver of rats. (A) HE staining of liver tissue: (a)In the Sham 458 group, there was a large number of balloon-like changes and a small amount of 459 460 inflammatory cell infiltration, showing the appearance of moderate to severe fatty liver; (b) In the PBS treatment group, loss of liver structure, hepatic cord disintegration, 461 462 hemorrhage, hepatocyte necrosis and disintegration, nuclear pyknosis or even 463 disappearance, neutrophil infiltration, and a large number of inflammatory cell infiltration; (c) In the BMSCs treatment group, the boundaries of liver cells were blurred, the 464 structure of liver lobules was disordered, the hepatic sinusoids were congested, and there 465 466 were more inflammatory cell infiltrations. Compared with the PBS group, the inflammatory response was reduced and cell necrosis was restored; (d) The 467 BMSCs/TNF-α treatment group showed slight damage to the liver lobule structure, mild 468

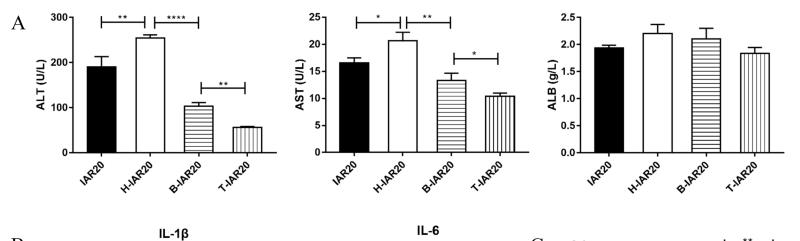
469	local congestion,	and inflammatory	cell infiltration.	The degree of liver	cell damage,

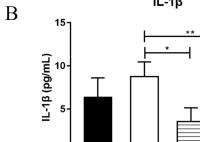
- 470 congestion, and inflammation were alleviated compared with the PBS treatment group
- 471 and the BMSCs treatment group. (B) Fluorescence coloration of BMSCs in liver tissue (a
- 472 BMSCs treatment group; b BMSCs/TNF-α treatment group). (C) The number of BMSCs
- 473 cells per high-power field of view. Original magnification, $200 \times (***P \le 0.001)$



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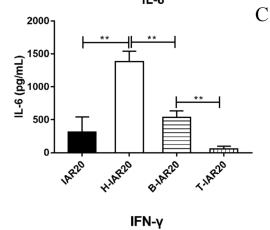
HIAR2O

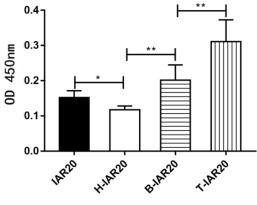
BIAR2O

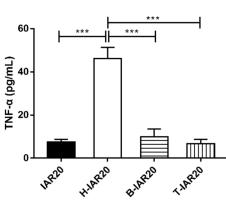
TNF-α

0.

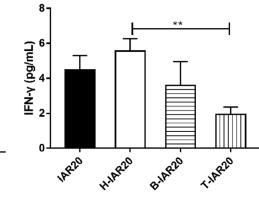
IAR20



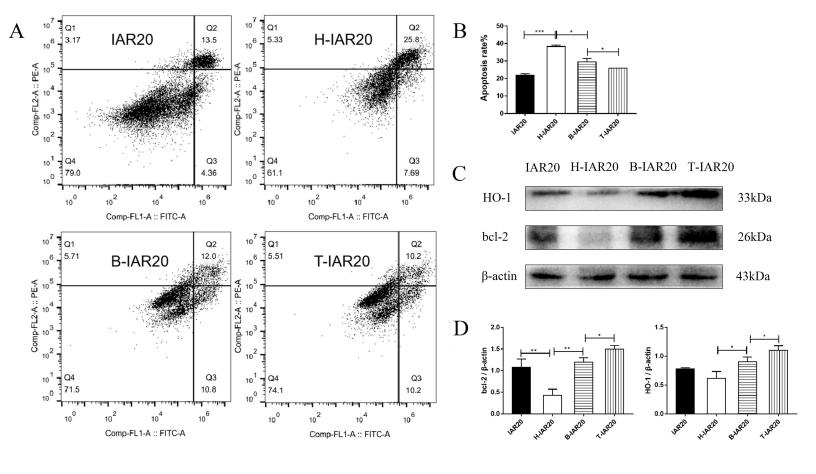


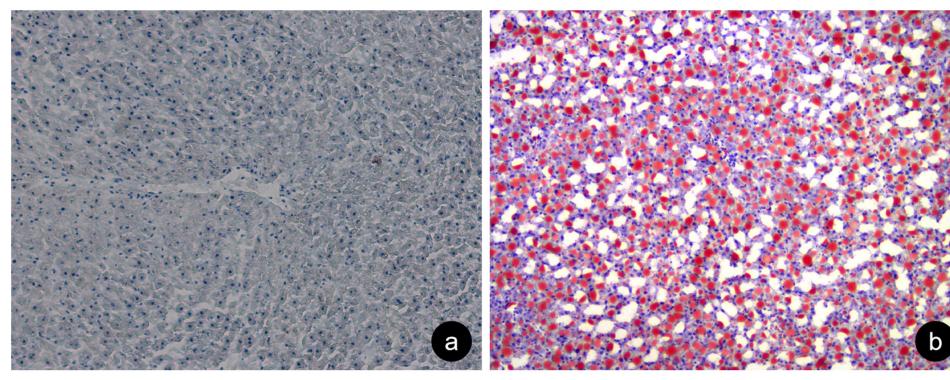


T-IAR20

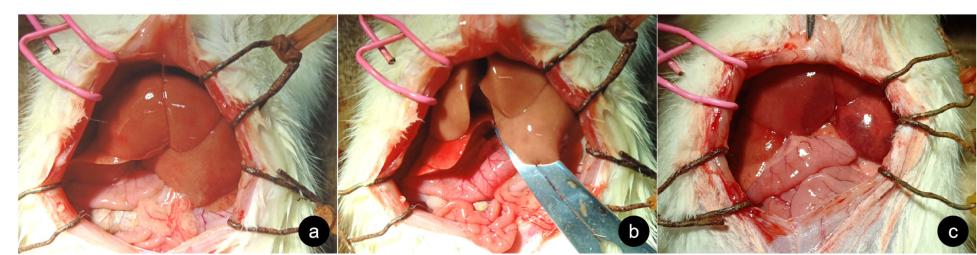


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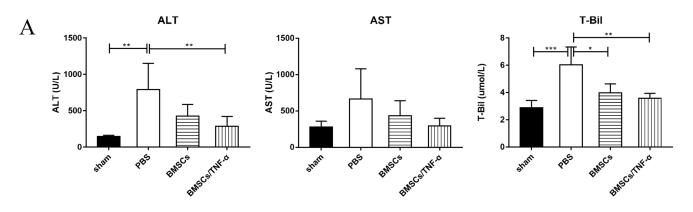


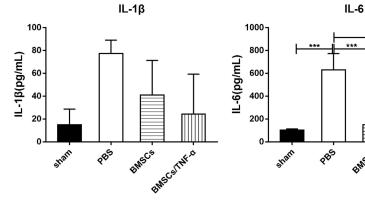


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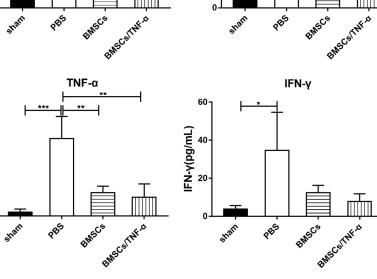
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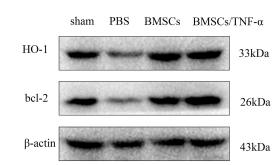
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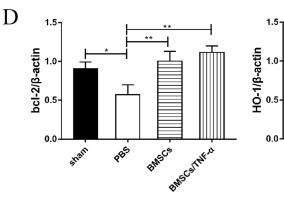
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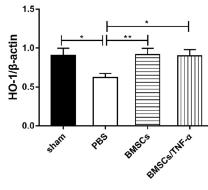
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