

# Final Draft of the original manuscript:

Mayer, A.; Kratz, K.; Hiebl, B.; Lendlein, A.; Jung, F.: Support of HUVEC proliferation by pro-angiogenic intermediate CD163+ monocytes/macrophages: A co-culture experiment In: Clinical Hemorheology and Microcirculation (2012) IOS Press

DOI: 10.3233/CH-2011-1492

# Support of HUVEC proliferation by pro-angiogenic intermediate CD163<sup>+</sup> monocytes/macrophages: A co-culture experiment

A. Mayer<sup>1</sup>, B. Hiebl<sup>1,2</sup>, A. Lendlein<sup>1</sup>, F. Jung<sup>1</sup>

1: Centre for Biomaterial Development and Berlin-Brandenburg Centre for Regenerative Therapies, Institute for Polymer Research, Helmholtz-Zentrum Geesthacht, Kantstr. 55, 14513 Teltow, Germany

2: present adress: Center for Medical Basic Research, Faculty of Medicine, Martin-Luther-University, Halle, Germany

corresponding author: F. Jung, phone +49 3328 352-0, fax +49 3328 352-452, friedrich.jung@hzg.de

#### **ABSTRACT**

So called intermediate (MO2) monocytes/macrophages possess anti-inflammatory properties and express the MO lineage marker CD163. On a hydrophilic, acrylamide-based hydrogel human intermediate (CD14<sup>++</sup> CD16<sup>+</sup>) CD163<sup>++</sup> monocytes/macrophages (aMO2) which were angiogenically stimulated, maintained a pro-angiogenic and non-inflammatory status for at least 14 days. Here we explored, whether this aMO2 subset can positively influence the proliferation of human umbilical venous endothelial cells (HUVECs) without switching back into a pro-inflammatory (MO1) phenotype.

aMO2 or HUVEC were seeded alone on glass cover slips  $(0.5 \times 10^5 \text{ cells} / 1.33 \text{ cm}^2)$  in a HUVEC specific cell culture medium (EGM-2) for 3 hrs, 24 hrs and 72 hrs or under co-culture conditions  $(0.5 \times 10^5 \text{ HUVEC} + 0.25 \times 10^5 \text{ aMO2} / 1.33 \text{ cm}^2)$  in EGM-2 for the same time window as well (n=6 each).

Under co-culture conditions the numbers of adherent HUVEC per unit area were significantly higher (p<0.01; 525±52 HUVEC/mm<sup>2</sup>) compared to control mono-cultures (473±76 HUVEC/mm<sup>2</sup>) after 72 hrs of cultivation and showed their typically spread morphology. The aMO2 remained in their subset status and secreted VEGF-A<sub>165</sub> without release of proinflammatory cytokines until the end of the 72 hrs cultivation time period, thereby supporting the HUVEC proliferation.

These *in vitro* results might indicate that this MO subset can be used as cellular delivery system for pro-angiogenic and non-inflammatory mediators to support the endothelialisation of biomaterials like e.g. cPnBA.

#### INTRODUCTION

Morphology, phenotype and function of circulating peripheral blood monocytes/macrophages (MO) are heterogeneous. The majority of the MO are characterized by flow cytometry to be CD14<sup>++</sup> CD16<sup>-</sup> and named "classical" (= MO1) [14, 35]. Furthermore two other minor subpopulations were described: CD14<sup>++</sup> CD16<sup>+</sup> ("intermediate" = MO2) and CD14<sup>+</sup> CD16<sup>++</sup> ("non-classical" = MO3). The latter subpopulation has been well characterised already and is regarded as pro-inflammatory [5, 13].

MO2 were reported to possess anti-inflammatory properties [27] and to express CD163 also [7]. CD163 is known to be restricted to cells of the monocyte/macrophage (MO) lineage [4, 24] and is expressed on pro-angiogenic/anti-inflammatory MO [19, 30], which are involved in the down-regulation of the inflammatory response [7].

Solely this "intermediate" subset of CD14<sup>++</sup> CD16<sup>+</sup> CD163<sup>++</sup> MO (MO2) secrets VEGF-A<sub>165</sub> in bio-active ranges [1, 23, 34] (>10 ng/ml) after angiogenic stimulation (aMO2) without release of effective pro-inflammatory cytokine levels. This could be shown on a glass surface [20] as well as on elastic polymeric samples [21]. This aMO2 subset might be useful to support the establishment of a functional endothelial layer on body foreign surfaces *ex vivo* as a new strategy in biomaterial-based regenerative therapies [25, 26, 32] or to achieve haemocompatibility [10, 15, 16] on cardiovascular implants.

The formation of a functional endothelium is described not only to be dependent on flow conditions [29] but also on the cytokine milieu of the surrounding environment especially to pro-inflammatory mediators like TNF $\alpha$  [9] mainly secreted by MO1 and pro-angiogenic growth factors like VEGF-A<sub>165</sub> [1]. The study was aimed to investigate, whether aMO2 can accelerate the formation of an endothelial cell (HUVEC) monolayer on a foreign body surface. The morphology of the HUVEC was evaluated by staining the F-actin skeleton and determining the number and density of adherent HUVEC on the substrate by counting the nuclei stained with DAPI. Additionally a set of cytokines was measured to analyse the function of mono- and co-cultured cells (VEGF-A<sub>165</sub>, pro-inflammatory cytokines). Cytokines indicating pro-inflammatory processes were measured as markers for a switch of the cultured aMO2 subset back to MO1 or MO3.

#### **MATERIALS AND METHODS**

In the framework of a three-armed *in vitro* study it was estimated whether angiogenically stimulated intermediate CD163<sup>+</sup> monocytes/macrophages are able to support the endothelialisation of a foreign body surface without releasing pro-inflammatory cytokines. For each of the three groups n=6 samples were used. The experiments were performed in accordance with the ethical guidelines of Clinical Hemorheology and Microcirculation [3].

# Monocyte/macrophage isolation and generating angiogenically stimulated intermediate $CD163^{++}$ MO (aMO2)

Primary peripheral blood MO were isolated and stimulated as previously described [20]. Briefly, peripheral blood was collected from the cubital vein, centrifuged and the majority of plasma and erythrocytes were separated from the buffy coat via apheresis. The buffy coat was diluted 1:2 with phosphate-buffered saline. Subsequently, primary CD14<sup>+</sup> MO were isolated from this buffy coat by density gradient centrifugation and indirect magnetic microbead sorting. Latter was based on antibodies directed against non-monocytes, such as T cells, B cells, NK cells, dendritic cells and basophils (CD3, CD7, CD16, CD19, CD56, CD123, CD235a).

Immediately after primary CD14<sup>+</sup> MO isolation, the cells were stimulated to become a non-inflammatory subtype by 6 days of incubation with IL-4 and dexamethasone resulting in the intermediate (CD14<sup>++</sup> CD16<sup>+</sup>) CD163<sup>++</sup> MO subset (MO2). This was evaluated as previously described [21] by flow cytometry (MACS Quant, Miltenyi Biotec, Germany) using antibodies against CD14, CD16 and CD163 (BD Biosciences, Germany, dilution 1:20).

Additional angiogenic stimulation was performed with 10 ng/ml VEGF-A<sub>165</sub> over 24 hrs.

## Cell cultivation of aMO2 and HUVEC

In a pilot study a possible influence of the HUVEC specific cell culture medium EGM-2 (Lonza, Germany) on the phenotype of aMO2 (n=6) was evaluated and showed no switch into MO1 or MO2 and no loss of the defined surface markers CD14 and CD163 (data not shown). Thereby a negative effect of the EGM-2 on the aMO2 functionality can be excluded.

Biological testing was performed on glass cover slips (n=6, 1.33 cm<sup>2</sup> each), which were placed in 24 multi-well cell culture plates made of polystyrene and seeded with  $0.5 \times 10^5$  aMO2 or HUVEC (Lonza, Germany) each for mono-culture condition. For co-culture condition  $0.25 \times 10^5$  aMO2 and  $0.5 \times 10^5$  HUVEC were used. For cell cultivation, standard

incubation conditions (37 °C, humidified atmosphere, 5 vol% CO<sub>2</sub>) and a HUVEC specific cell culture medium (1 ml/well, EGM-2) were used. After 3 hrs, 24 hrs and 72 hrs the phenotype and number of the HUVEC cells, which became adherent to the substrates, were analysed by fluorescent staining (n=6). The conditioned cell culture medium at each end point was used for cytokine analysis (n=6) after centrifugation at 8,000 g for 5 minutes and subsequent storage at -20 °C until testing.

# Fluorescent staining of aMO2 and HUVEC

Adherent cells on substrate (n=6 each time point) were fixed in 4 wt% paraformaldehyde for 30 minutes on ice and made permeable with Triton X-100 (0.5 vol%) for 10 minutes at room temperature. F-actin was visualised using phalloidin coupled with the fluorescent dye AlexaFluor555® (Molecular Probes, Germany), CD14 and CD163 with specific monoclonal antibodies (BD Pharmingen, Germany) and dsDNA/nuclei were stained with 4',6-diamidino-2-phenylindole (DAPI). Five different fields of view were analysed per sample using confocal laser scanning microscopy (LSM 510 META, Zeiss; Germany) and image analysis software AxioVision (Zeiss, Germany).

# Cytokine secretion analysis of aMO2 and/or HUVEC

Conditioned cell culture medium was analysed after 3, 24 and 72 hrs (n=6 each) for proangiogenic growth factor VEGF-A<sub>165</sub> and immune mediators (IL-1ra, IL-1 $\beta$ , IL-6, IL-10, IFN $\gamma$ , TNF $\alpha$ ) using Multiplex technique (Bio-Plex200<sup>®</sup>, BioRad, Germany). VEGF-A<sub>165</sub> was present in culture medium. This measured background amount was subtracted from the measured quantities to determine the secreted quantities.

### **Statistics**

Mean values and standard deviations are given for continuous data. Gaussian distribution was tested according to Kolmogorov Smirnov. Paired two samples tests were performed using the t-test for Gaussian distributed samples and the Wilcoxon-test for non-Gaussian distributed samples. For time courses, a variance analysis for repeated measures was performed. A one-factorial variance analysis was used for group comparisons. P<0.05 was considered significant. Because of the explorative character of the study, a Bonferoni adjustment was disclaimed.

#### **RESULTS**

# Cell density and morphology of HUVEC under mono- and co-culture conditions

After 3 hrs of cultivation the HUVEC were homogeneously distributed on the samples. The cell numbers did not differ for both culture conditions (mono-culture:  $154\pm63$  cells/mm<sup>2</sup>; co-culture:  $142\pm84$  cells/mm<sup>2</sup>, n=6 each). The cells started to exhibit their typically spread morphology and expressed a physiological actin skeleton (red, Fig. 1) after 24 hrs of cell growth. Also the number of adherent HUVEC was increasing but not different between mono-culture ( $232\pm78$  cell/mm<sup>2</sup>) and co-culture ( $226\pm64$  cells/mm<sup>2</sup>). After 72 hrs the majority of the cells were completely spread and the morphology of the HUVEC in the co-culture was comparable to that in the control culture. However, a significantly higher number of HUVEC was detectable when co-cultured together with aMO2 ( $525\pm52$  cells/mm<sup>2</sup>, n=6, p<0.01) as when cultured alone ( $473\pm46$  cells/mm<sup>2</sup>; n=6 each). After 72 hrs cultivation the aMO2 were still expressing CD14 but CD163 expression was fading (Fig. 1).

# Cytokine secretion analysis of aMO2 on cPnBA

The mean VEGF-A<sub>165</sub> concentration of aMO2 cells ( $2.62\pm0.66$  ng/ml) cultivated for 3 hrs was significantly higher compared to VEGF-A<sub>165</sub> in HUVEC mono- and co-culture (p<0.01, 0.11 $\pm$ 0.03 ng/ml HUVEC alone, 0.17 $\pm$ 0.9 ng/ml HUVEC co-culture). However, 24 hrs after seeding VEGF-A<sub>165</sub> concentration was significantly increased in aMO2 mono-culture (p<0.05, 7.88 $\pm$ 0.72 ng/ml) and remained stable over 72 hrs ( $8.10\pm0.49$  ng/ml) as shown in table 1. 24 hrs after seeding the VEGF-A<sub>165</sub> concentration was significantly higher ( $0.76\pm0.17$  ng/ml, p<0.05) in the supernatant of HUVEC, which were cultured alone compared to the amount in the supernatant of HUVEC and aMO2 cultured together ( $0.16\pm0.05$  ng/ml). Nevertheless, 72 hrs after seeding in both HUVEC cultures (with and without aMO2) the measured VEGF-A<sub>165</sub> concentration was comparable to each other and significantly less than in the supernatant of aMO2 alone (p<0.05, HUVEC mono-culture: 7.6 $\pm$ 0.2 pg/ml, HUVEC/aMO2 co-culture: 6.1 $\pm$ 0.6)

The secretion levels of the cytokines IL-1ra, IL-1 $\beta$ , IL-6, IL-10, IFN $\gamma$  and TNF $\alpha$  were low (0 – 150 pg/ml, table 1) in all three culture conditions. The values of those cytokines were comparable for both HUVEC cultures over time. Interestingly, the IFN $\gamma$  concentration in the supernatant of aMO2 was 3 hrs after seeding 3-fold higher (see table 1) than in the HUVEC cultures but decreased over time similarly strong. Vice versa in both HUVEC cultures the IL-

6 concentration was increasing over time and significantly higher than in the supernatant of the aMO2.

#### **DISCUSSION**

In the present study, it could be shown that the aMO2 remained in their pro-angiogenic non-inflammatory status and secreted VEGF-A<sub>165</sub> in biologically effective ranges [20], while the levels of pro-inflammatory cytokines as TNF $\alpha$  or IL-1 $\beta$  were very low, not increasing and clearly below biologically effective ranges [2, 11, 12, 18, 33]. Thereby the functionality of the aMO2 as cellular VEGF-A delivery system for supporting endothelialisation without inducing inflammatory processes in the HUVECs could be proven.

The VEGF-A<sub>165</sub> concentrations of the HUVEC cultures were comparable after 3 hrs and 72 hrs of cultivation. But, 24 hrs after seeding, in the HUVEC/aMO2 co-culture 49% (p<0.05) more VEGF-A<sub>165</sub> was detected than in the HUVEC mono-culture. This might be due to the presence of the aMO2, which might have induced an increased HUVEC proliferation resulting in a significantly higher number of cells after 72 hrs of cultivation. The occurring VEGF-A<sub>165</sub> during the proliferation [22] entailed a further stimulation of the aMO2 to secrete even more VEGF-A<sub>165</sub> thereby again stimulating the HUVECs and resulting in a positive feedback loop.

The amounts of all other evaluated cytokines (TNF $\alpha$ , IL-1ra and IL-10) beside IFN $\gamma$  and IL-6 were comparable for the two mono-cultures and the co-culture and clearly below biologically effective thresholds [2, 11, 12, 18, 33]. Thus a back switch of the aMO2 into MO1 or MO3 phenotype can be excluded and also that the aMO2 induced stress reactions in the HUVECs. Although there are differences in the secreted amounts of IFN $\gamma$  for the three different cultures, under all three cultivation conditions the detected amounts of IFN $\gamma$  were low and decreasing over time. The initially elevated values were most probably due to the trypsination [6]. An inhibition of proliferation is unlikely based on the low values which decreased to zero.

The IL-6 concentration of aMO2 remained stable over time but was clearly below biologically effective ranges [17, 28], which likewise proved that the aMO2 did not switch back. In the cultures with HUVEC the measured amounts of IL-6 were increasing over time. Although IL-6 is mainly secreted by endothelial cells under inflammatory circumstances [8, 31] in both cultures (co-culture as well as mono-culture) the measured amounts of IL-6 were comparable

and thereby not due to the presence of the aMO2. This indicates that the aMO2 did not induce this HUVEC secretion profile but might be the natural secretion range of endothelial cells lacking further pro-inflammatory stimuli [8].

## **CONCLUSION**

Angiogenically stimulated intermediate CD163<sup>+</sup> monocyte/macrophages (aMO2) increased the number of adherent cells over a time period of 72 hrs significantly thereby accelerating the formation of an endothelial cell monolayer. In addition neither the aMO2 nor the HUVEC gave indications of an inflammatory switch on cytokine level. Future work will test, whether the aMO2 will also accelerate the formation of an HUVEC monolayer of other body foreign surfaces e.g. cPnBA.

Figure 1: HUVEC mono-culture and HUVEC/aMO2 co-culture on glass after three hrs, 24 hrs and 72 hrs of cultivation, n=6, 20-fold magnification, blue = nucleus, red = F-actin skeleton.

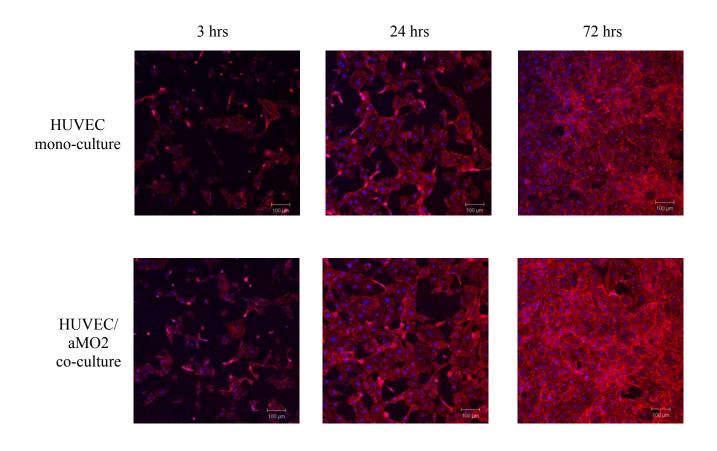


Table 1: Cytokine secretion of aMO2 and HUVEC alone as well as in co-culture after 3 hrs, 24 hrs and 72 hrs of cultivation on glass cover slips in pg/ml, means  $\pm$  standard deviation, n=6, one symbol: p<0.05, doubled symbol: p<0.01, + vs. aMO2, # vs. HUVEC,  $\bullet$  vs. co-culture,  $\blacksquare$  vs. 3 h,  $\Diamond$  vs 24 h.

Cytokine secretion [pg·ml <sup>-1</sup> ]			
	3 h	24 h	72 h
HUVEC mono	-culture		
IL-10	$47,5 \pm 3,6$	8,4 ± 6,3 •	1,9 ± 0,1 •
IFNγ	$84,5 \pm 24,4^{++}$	$35,2 \pm 3,4$	$0,2 \pm 0,1^{+,\bullet,\Diamond\Diamond}$
$TNF\alpha$	$19,4 \pm 0,5$	3,5 ± 1,3 ■	2,4 ± 1,1 •
IL-6	$24,3 \pm 1,8$ <sup>++</sup>	$44,0 \pm 9,7^{+}$	84,9 ± 10,4 <sup>++,■</sup>
IL-1β	$2,1 \pm 0,2$	$1,8 \pm 0,1$	$1,8 \pm 0,1$
IL-1ra	$7,2 \pm 0,9$	$2,4 \pm 0,5$	$1,2 \pm 0,5$
VEGF-A165	$90,1 \pm 18,0^{++}$	$105,3 \pm 10,5^{++,\bullet}$	$7,6 \pm 0,2^{++,\bullet,\diamond\diamond}$
HUVEC/aMO2	2 co-culture		
IL-10	$45,8 \pm 4,5$	11,9 ± 9,0 ■	2,2 ± 0,2 •
IFNγ	$89,9 \pm 19,3^{+}$	$39,5 \pm 6,2^{+, \blacksquare}$	$0,0 \pm 0,0^{+,\blacksquare}$
$TNF\alpha$	$16,7 \pm 2,7$	$2,4 \pm 0,2$	$1,7 \pm 0,1$
IL-6	$21,5 \pm 3,5$ <sup>++</sup>	$43,3 \pm 12,5$	$82.8 \pm 14.0^{++}$
IL-1β	$1,9 \pm 0,1$	$1.8 \pm 0.2$	$1,9 \pm 0,1$
IL-1ra	5,8 ± 1,1	$2,6 \pm 0,3$	$2,4 \pm 0,9$
VEGF-A165	$96,5 \pm 27,0^{++}$	$156,9 \pm 22,6^{++,\#}$	$6,1 \pm 0,6^{++,\blacksquare,\diamondsuit}$
aMO2 mono-co	ulture		
IL-10	53,8 ± 2,9	$47,3 \pm 7,8$	$47,5 \pm 2,7$
IFNγ	$143,5 \pm 38,1$	8,1 ± 1,8 •	15,4 ± 5,1 <b>■</b>
$TNF\alpha$	$20,1 \pm 0,8$	$15,4 \pm 2,4$	$16,3 \pm 0,4$
IL-6	$12,4 \pm 0,3$	$11,4 \pm 0,6^{\#}$	$11,1 \pm 0,5^{\#\#,\bullet\bullet}$
IL-1β	$1,9 \pm 0,1$	$1,8 \pm 0,1$	$1,8 \pm 0,2$
IL-1ra	$8,0 \pm 0,7$	$7,3 \pm 1,7$	$6.5 \pm 0.4$
VEGF-A165	2618,9 ± 657,4 ***,••	$7886,4 \pm 329,8^{\#\#,\bullet\bullet}$	8102,1 ± 489,1 ##,••,■

#### **REFERENCES**

- Akeson, A., Herman, A., Wiginton, D. & Greenberg, J. Endothelial cell activation in a VEGF-A gradient: Relevance to cell fate decisions. *Microvasc Res* **80**, 65-74, (2010).
- Alikhani, M., Alikhani, Z., Raptis, M. & Graves, D. T. TNF-alpha in vivo stimulates apoptosis in fibroblasts through caspase-8 activation and modulates the expression of pro-apoptotic genes. *J Cell Physiol* **201**, 341-348, (2004).
- Anonymous. Ethical guidelines for publication in Clinical Hemorheology and Microcirculation. *Clin Hemorheol Microcirc* **44**, 2, (2010).
- Backe, E., Schwarting, R., Gerdes, J., Ernst, M. & Stein, H. Ber-MAC3: new monoclonal antibody that defines human monocyte/macrophage differentiation antigen. *J Clin Pathol* **44**, 936-945, (1991).
- Belge, K. U., Dayyani, F., Horelt, A., Siedlar, M., Frankenberger, M. *et al.* The proinflammatory CD14+CD16+DR++ monocytes are a major source of TNF. *J Immunol* **168**, 3536-3542, (2002).
- Brown, M. A., Wallace, C. S., Anamelechi, C. C., Clermont, E., Reichert, W. M. *et al.* The use of mild trypsinization conditions in the detachment of endothelial cells to promote subsequent endothelialization on synthetic surfaces. *Biomaterials* **28**, 3928-3935, (2007).
- Buechler, C., Ritter, M., Orso, E., Langmann, T., Klucken, J. *et al.* Regulation of scavenger receptor CD163 expression in human monocytes and macrophages by proand antiinflammatory stimuli. *J Leukoc Biol* **67**, 97-103, (2000).
- 8 Chi, L., Li, Y., Stehno-Bittel, L., Gao, J., Morrison, D. C. *et al.* Interleukin-6 production by endothelial cells via stimulation of protease-activated receptors is amplified by endotoxin and tumor necrosis factor-alpha. *J Interferon Cytokine Res* **21**, 231-240, (2001).
- 9 Cicha, I., Beronov, K., Ramirez, E. L., Osterode, K., Goppelt-Struebe, M. *et al.* Shear stress preconditioning modulates endothelial susceptibility to circulating TNF-[alpha] and monocytic cell recruitment in a simplified model of arterial bifurcations. *Atherosclerosis* **207**, 93-102, (2009).
- 10 Coyle, C. H., Mendralla, S., Lanasa, S. & Kader, K. N. Endothelial cell seeding onto various biomaterials causes superoxide-induced cell death. *J Biomater Appl* **22**, 55-69, (2007).
- Danis, V. A., Millington, M., Hyland, V. J. & Grennan, D. Cytokine production by normal human monocytes: inter-subject variation and relationship to an IL-1 receptor antagonist (IL-1Ra) gene polymorphism. *Clin Exp Immunol.* **99**, 303-310., (1995).
- Edwards, J. P., Zhang, X., Frauwirth, K. A. & Mosser, D. M. Biochemical and functional characterization of three activated macrophage populations. *J Leukoc Biol* **80**, 1298-1307, (2006).
- Frankenberger, M., Sternsdorf, T., Pechumer, H., Pforte, A. & Ziegler-Heitbrock, H. W. Differential cytokine expression in human blood monocyte subpopulations: a polymerase chain reaction analysis. *Blood* **87**, 373-377, (1996).
- Grage-Griebenow, E., Flad, H.-D. & Ernst, M. Heterogeneity of human peripheral blood monocyte subsets. *J Leukocyte Biol* **69**, 11-20, (2001).
- Hoepken, S., Fuhrmann, R., Jung, F. & Franke, R. P. Shear resistance of human umbilical endothelial cells on different materials covered with or without extracellular matrix: controlled in-vitro study. *Clin Hemorheol Microcirc* **43**, 157-166, (2009).
- Jung, F., Wischke, C. & Lendlein, A. Degradable, multifunctional cardiovascular implants: challenges and hurdles. *MRS Bulletin* **35**, 607-613, (2010).
- 17 Kaplanski, G., Marin, V., Montero-Julian, F., Mantovani, A. & Farnarier, C. IL-6: a regulator of the transition from neutrophil to monocyte recruitment during inflammation. *Trends Immunol* **24**, 25-29, (2003).

- Lanfrancone, L., Boraschi, D., Ghiara, P., Falini, B., Grignani, F. *et al.* Human peritoneal mesothelial cells produce many cytokines (granulocyte colony-stimulating factor [CSF], granulocyte-monocyte-CSF, macrophage-CSF, interleukin-1 [IL-1], and IL-6) and are activated and stimulated to grow by IL-1. *Blood* **80**, 2835-2842, (1992).
- Mantovani, A., Sica, A., Sozzani, S., Allavena, P., Vecchi, A. *et al.* The chemokine system in diverse forms of macrophage activation and polarization. *Trends Immunol* **25**, 677-686, (2004).
- Mayer, A., Lee, S., Jung, F., Gruetz, G., Lendlein A & Hiebl, B. CD14+ CD163+ IL-10+ monocytes/macrophages: Pro-angiogenic and non pro-inflammatory isolation, enrichment and long term secretion profile. *Clin Hemorheol Microcirc* **46**, 217-223, (2010).
- Mayer, A., Kratz, K., Cui, J., Hiebl, B., Lendlein, A. & Jung, F. Interaction of angiogenically stimulated intermediate CD163+ monocytes/macrophages with soft hydrophobic poly(*n*-butyl acrylate) networks with elastic moduli matched to that of human arteries. *Artif Organs* **submitted**, (2011).
- Olsson, A.-K., Dimberg, A., Kreuger, J. & Claesson-Welsh, L. VEGF receptor signalling? in control of vascular function. *Nat Rev Mol Cell Biol* **7**, 359-371, (2006).
- Patterson, C. & Runge, M. S. Therapeutic myocardial angiogenesis via vascular endothelial growth factor gene therapy: moving on down the road. *Circulation*. **102**, 940-942, (2000).
- Pulford, K., Micklem, K., McCarthy, S., Cordell, J., Jones, M. *et al.* A monocyte/macrophage antigen recognized by the four antibodies GHI/61, Ber-MAC3, Ki-M8 and SM4. *Immunology* **75**, 588-595, (1992).
- Shastri, V. P. & Lendlein, A. Materials in regenerative medicine. *Adv Mater* **21**, 3231-3234, (2009).
- Shastri V.P., und lendlein A. Eingineering Materials for Regenerative Medicine. *MRS Bull* **35** (2010), 571 578.
- 27 Skrzeczyńska-Moncznik, J., Bzowska, M., Lo"seke, S., Grage-Griebenow, E., Zembala, M. *et al.* Peripheral Blood CD14high CD16+ Monocytes are Main Producers of IL-10. *Scand J Immunol* **67**, 152-159, (2008).
- Sunderkotter, C., Steinbrink, K., Goebeler, M., Bhardwaj, R. & Sorg, C. Macrophages and angiogenesis. *J Leukoc Biol.* **55**, 410-422., (1994).
- Urschel, K., Worner, A., Daniel, W. G., Garlichs, C. D. & Cicha, I. Role of shear stress patterns in the TNF-alpha-induced atherogenic protein expression and monocytic cell adhesion to endothelium. *Clin Hemorheol Microcirc.* **46**, 203-210., (2010).
- Van Gorp, H., Delputte, P. L. & Nauwynck, H. J. Scavenger receptor CD163, a Jack-of-all-trades and potential target for cell-directed therapy. *Mol Immunol* **47**, 1650-1660, (2010).
- Watson, C., Whittaker, S., Smith, N., Vora, A. J., Dumonde, D. C. *et al.* IL-6 acts on endothelial cells to preferentially increase their adherence for lymphocytes. *Clin Exp Immunol* **105**, 112-119, (1996).
- Weigel, T., Schinkel, G. & Lendlein, A. Design and preparation of polymeric scaffolds for tissue engineering. *Expert Rev Med Devices* **3**, 835-851, (2006).
- Worrall, N. K., Chang, K., LeJeune, W. S., Misko, T. P., Sullivan, P. M. *et al.* TNF-alpha causes reversible in vivo systemic vascular barrier dysfunction via NO-dependent and -independent mechanisms. *Am J Physiol.* **273**, 2565-2574, (1997).
- 34 Xue, L. & Greisler, H. P. Angiogenic effect of fibroblast growth factor-1 and vascular endothelial growth factor and their synergism in a novel in vitro quantitative fibrin-based 3-dimensional angiogenesis system. *Surgery* **132**, 259-267, (2002).

Ziegler-Heitbrock, L., Ancuta, P., Crowe, S., Dalod, M., Grau, V. *et al.* Nomenclature of monocytes and dendritic cells in blood. *Blood* **116**, e74-80, (2010).