



OVARIAN CLUB VIII

Genes expression profile or microRNAs to explore endometrial receptivity: What is the best?

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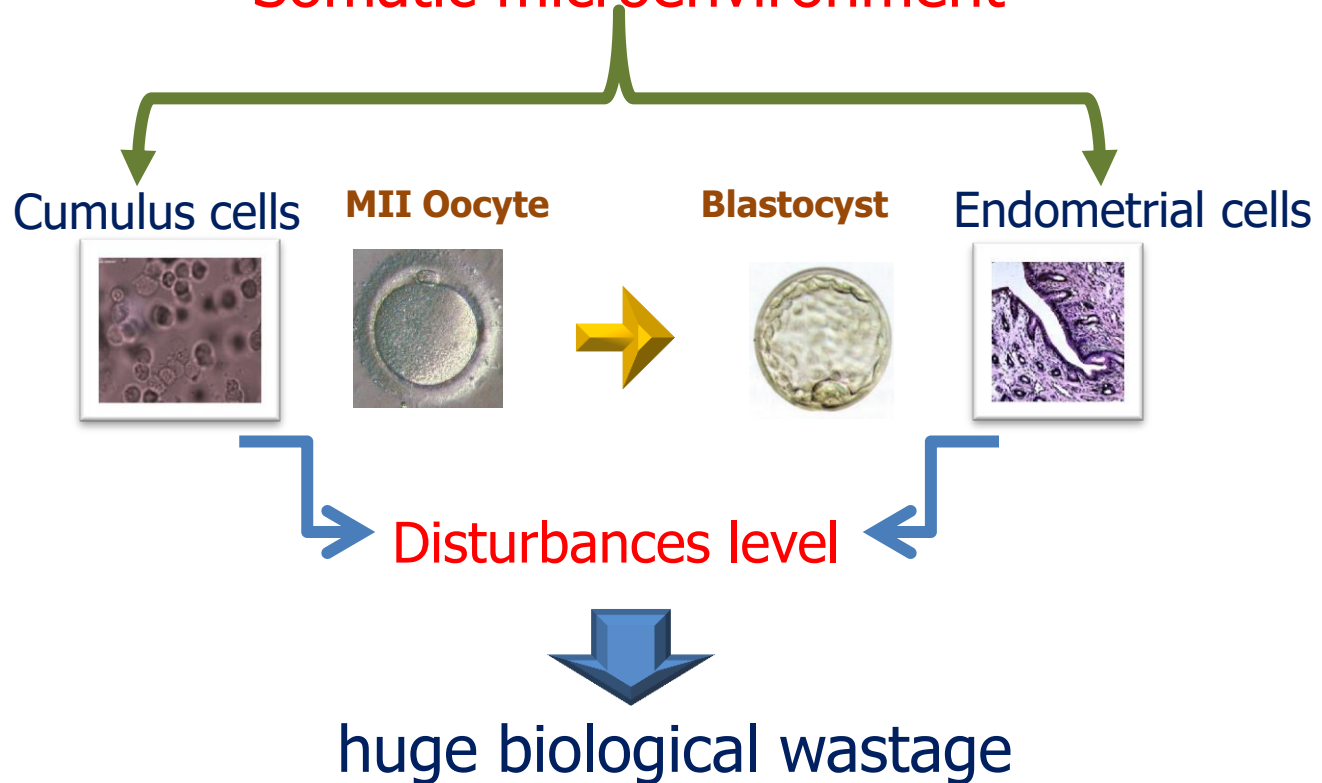
University-hospital of Montpellier

INSERM U 1203 'Early embryo development and pluripotency'

Montpellier-34295, France

Oocytes and embryos during manipulation

Somatic microenvironment



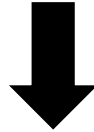
huge biological wastage

- . Inadequate COS
- . Inadequate of Competent Embryo Selection
- . Non optimum In vitro culture conditions
- . **Inadequate endometrial receptivity**
- . Fresh embryo replacement systematically should be reconsidered

Insufficient knowledge even
38 years after first IVF birth
!

Context

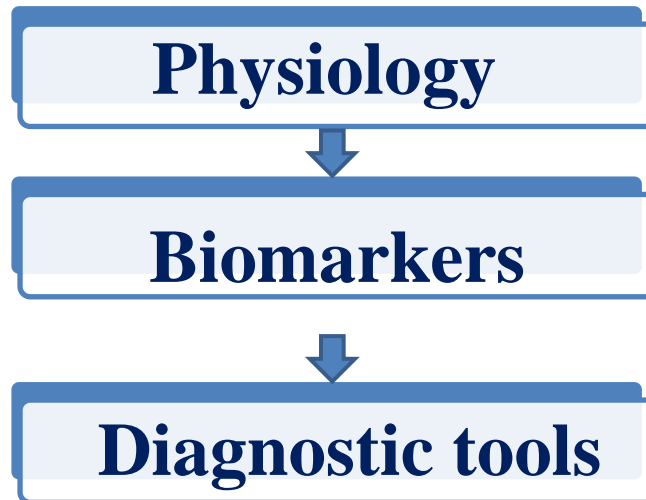
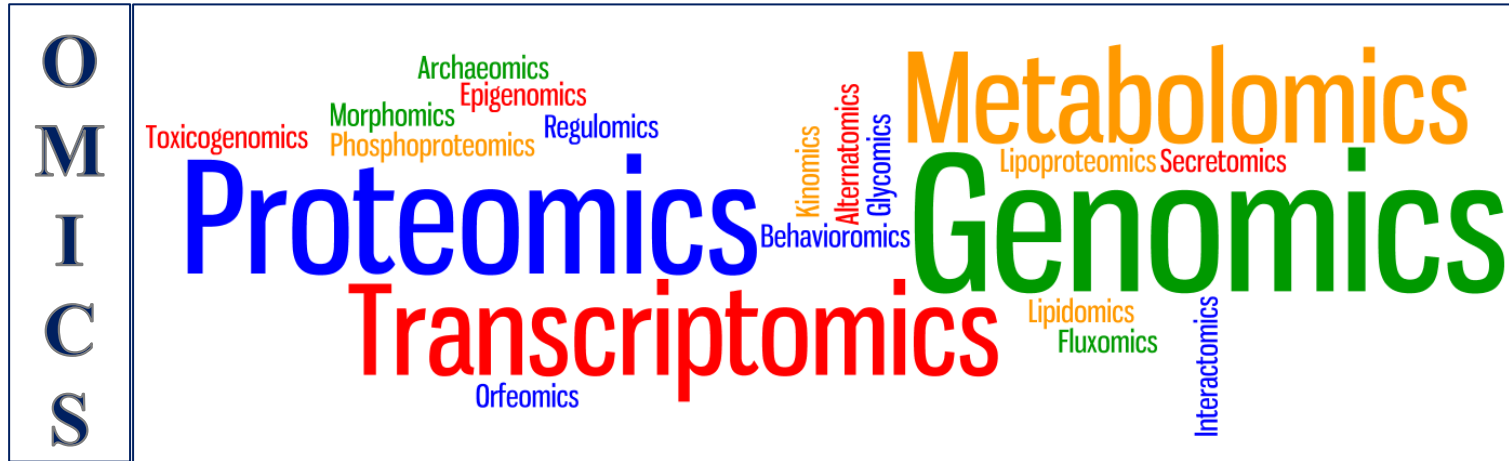
Assisted Reproductive Technology (ART)



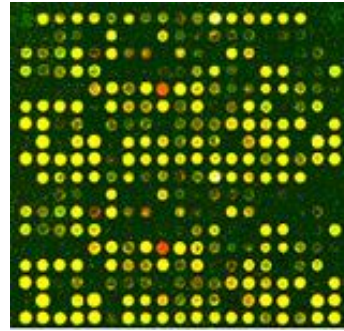
- More than 7/10 transferred embryos fail to implant
- Birth live rate < 20%

>30% of implantation failures are thought to result from abnormal endometrial receptivity and/or to defects in the embryo-endometrium dialogue

Interests of the Omics technologies



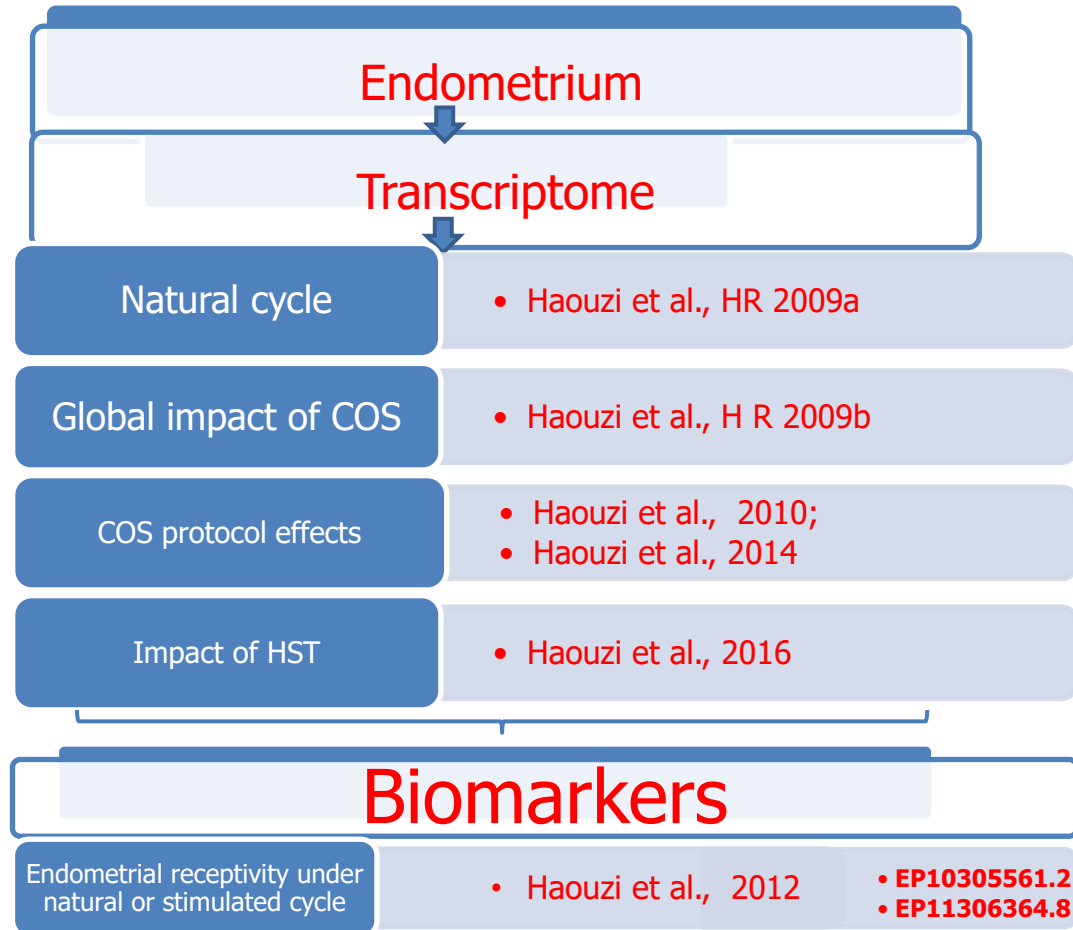
Endometrial receptivity and COS



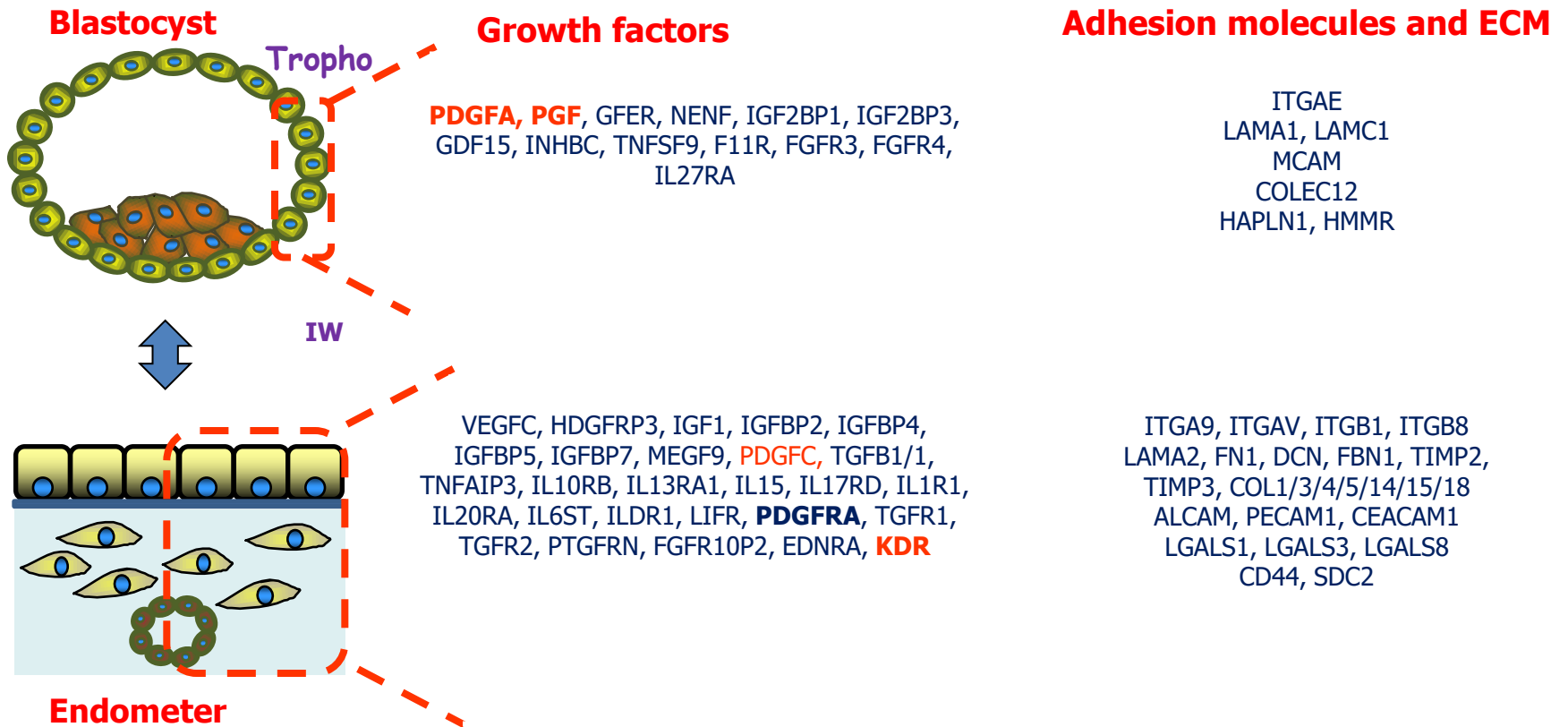
- Advanced endometrial maturation
- Supraphysiological levels of steroids
- Morphological and biochemical alterations

Ubaldi F et al. Fertil Steril 1997;
Lass A et al. Hum Reprod 1998;
Haouzi et al Hum Reprod, 2009a, b;
Cha J et al. Nature Med 2012

Endometrial transcriptome profile during the IW



Embryo-Endometrial tissue dialogue during IW



Understand the molecular mechanisms governing the human endometrial receptivity



OMICS

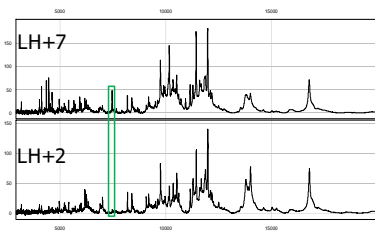
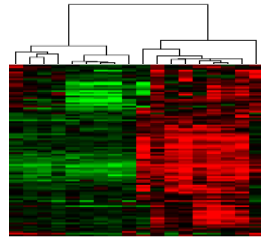
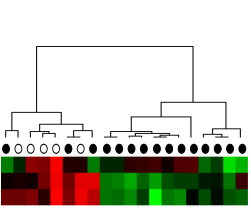
BIOLOGY

miRNome
microRNAs

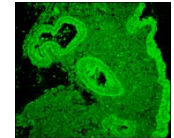
Transcriptome
mRNAs

Proteome
Proteins

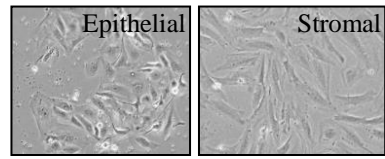
qRT-PCR/western blot
in fertile and RIF patients



Immunofluorescences of
endometrium sections



Purification and primary culture of
Human endometrial cells



**Affymetrix® miRNA 4.1
Array Strips**

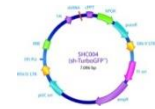
**GeneChip® Human Genome
U133 Plus 2.0 Array**

Seldi-Tof + LC/MS/MS
(anion exchange, pH9)

(Haouzi et al., 2009a, b; 2010;
2011; 2012; 2014; 2015)

(Bissonnette et al., 2016)

shRNA



Complete overview to select/identify relevant biomarkers of endometrial receptivity

Principle of the **Win-Test**

Biopsy

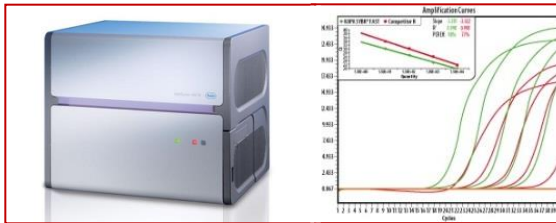
qRT-PCR

Results

Implantation window

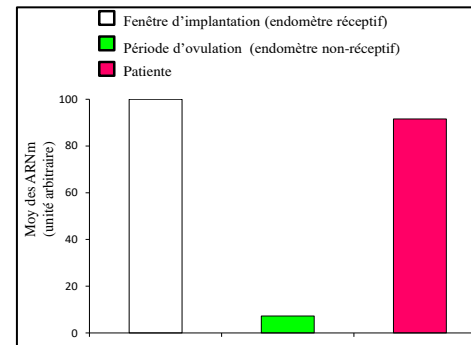


RNA extraction and quantification by qRT-PCR

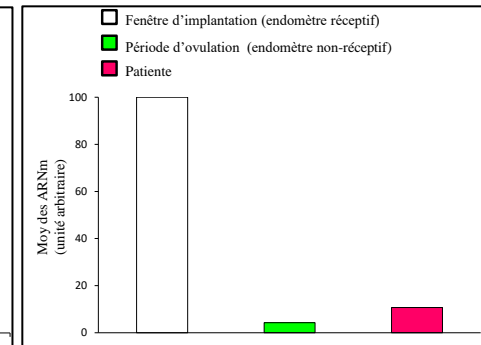


Analysis et interpretation

Receptive endometrium



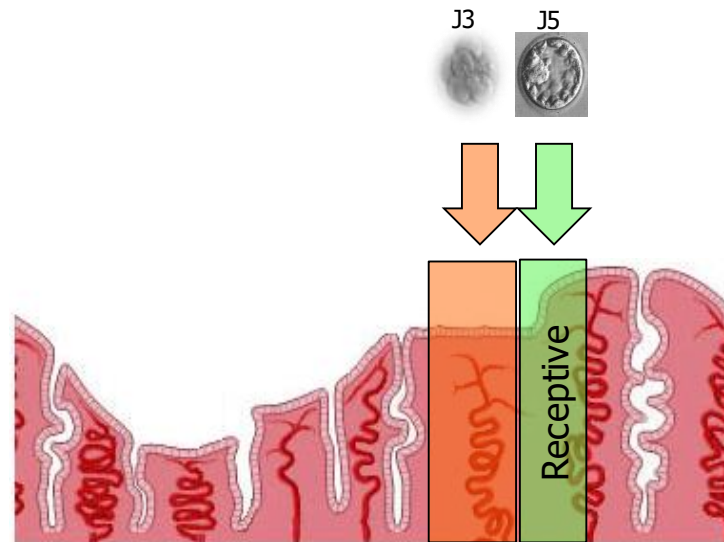
Non-receptive endometrium



Personalized embryo transfers according to the Win-Test® results

To detect the IW under natural cycle or hormone replacement therapy (HRT)

To perform personalized embryo transfer in the respect of the synchronization of the foeto-maternal dialogue



Receptive endometrium



Blastocysts

72h/48h before the endometrium
become receptive

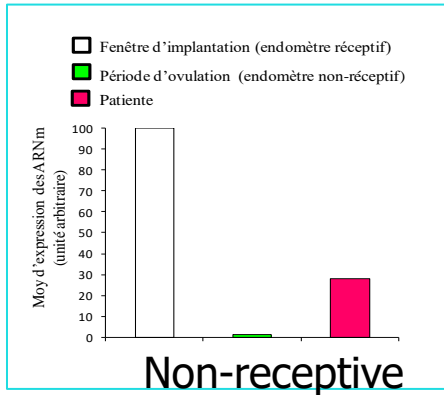


Day 2/3 embryos

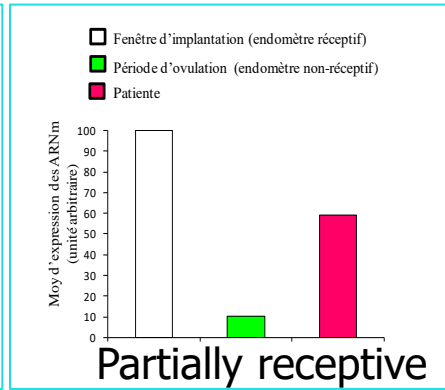
Detection of the implantation window

Patient:
33 years, male infertility

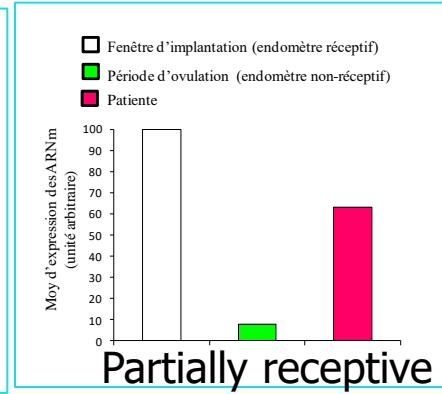
1st evaluation:
Pg+6



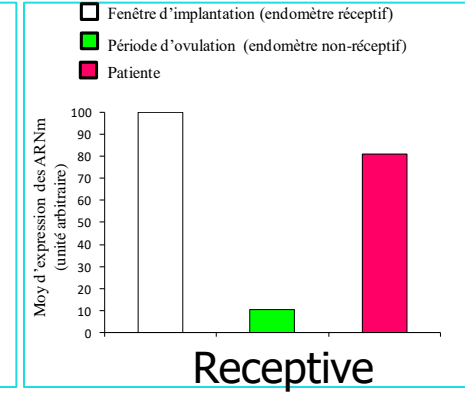
2nd evaluation
Pg+7



3rd evaluation
Pg+8

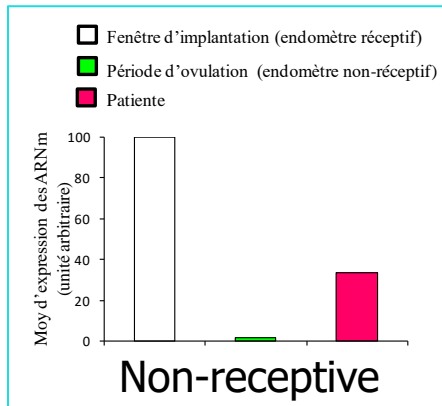


4th evaluation
Pg+9

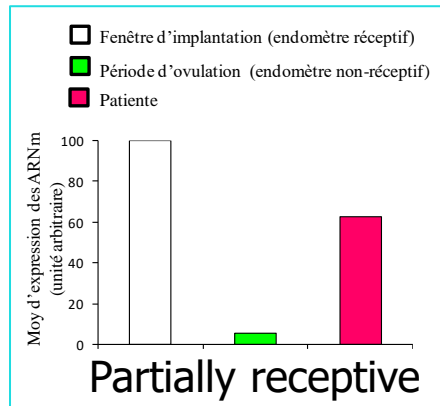


Patient:
37 years, unexplained infertility

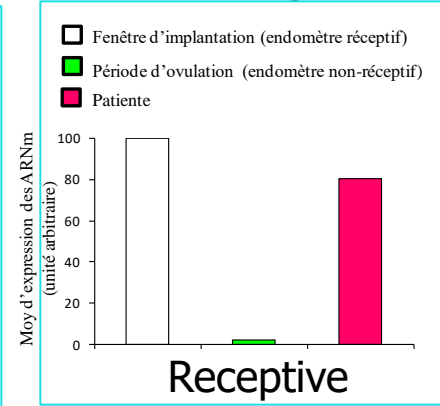
1st evaluation
LH+7



2nd évaluation
LH+8



3rd évaluation:
LH+9



Des exemples de transferts personnalisés

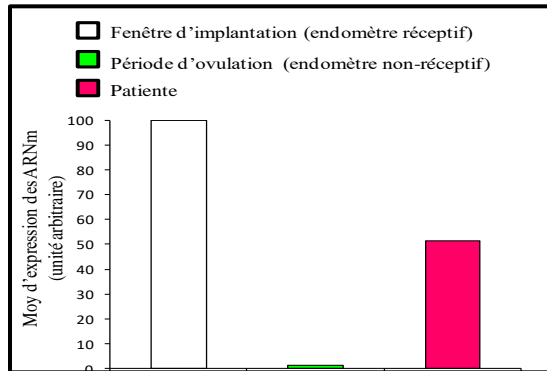
Patient:

32 years

3 IVF attempts ↔ 6 fresh embryos transferred: failures

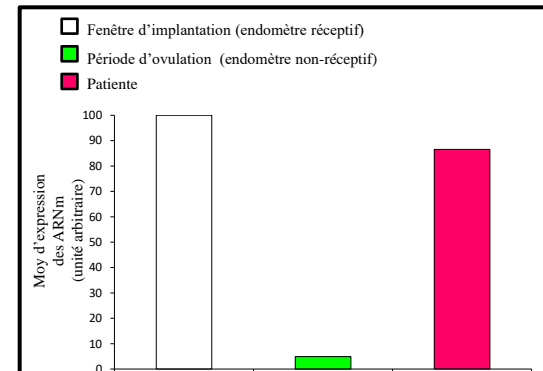
3 egg donation (Spain, Czech republic) ↔ 7 fresh transferred embryos+ 2 frozen embryos transferred : failures

1st evaluation: Win-Test at Pg+6



Partially receptive

2nd evaluation: Win-Test at Pg+8



Receptive

Suggestion : Day-5 embryo transfer at Pg+8 or a day-3 at Pg+6

2 day-3 frozen embryos transferred, subsequent cycle

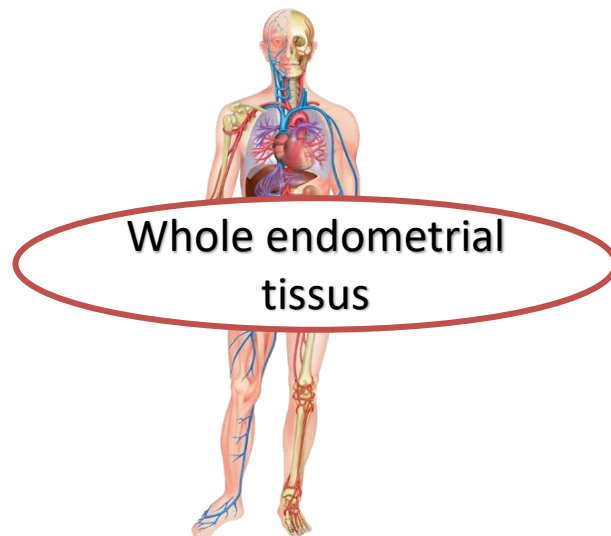
Pg+6

Birth
(2 boys)

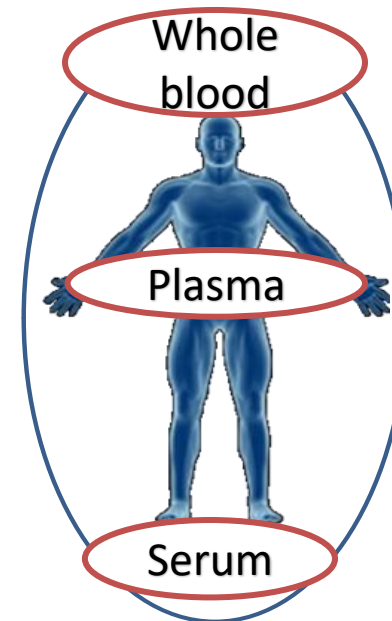
Toward a new generation of the Win-Test: non-invasive endometrial receptivity test

Objective: avoid to perform an endometrial biopsy

Tissue/cells

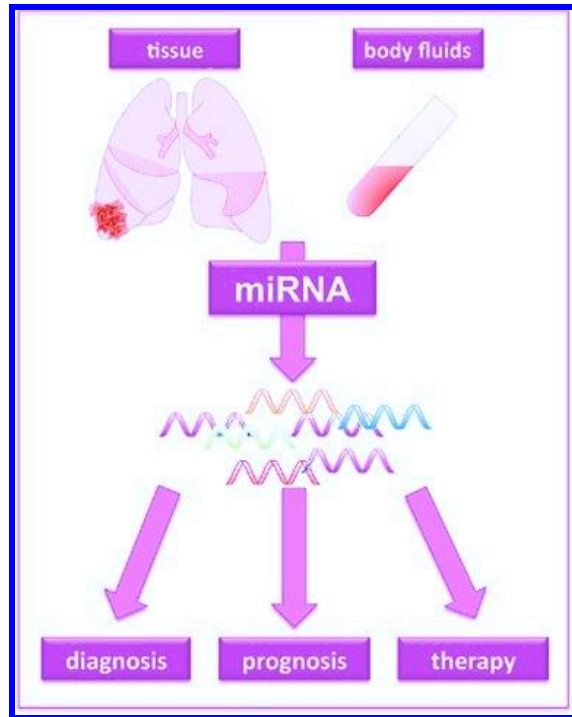


Bloodstream ?



Circulating microRNAs as biomarkers of human
endometrial receptivity: myth or reality ?

Circulating microRNAs: diagnostic, prognostic tools and therapeutic target in Oncology



- Circulating miRNAs: diagnostic and prognostic tools for certain cancers
- OncomiRs, over-expressed in tumour
 - Therapeutic targets
 - Anti-miR drug

Lindinger et al., *Cancer Genetics*, 2012

Circulating microRNAs:
powerful tools in oncology and in other pathologies,
including gynecological and obstetric disorders

Overview of studies on miRNAs and Human endometrial receptivity

Study	Patients	Number of patients	Biological samples	Approach	Compared samples (number, cycle day)	Number of microRNAs	
						up-regulated	down-regulated
Kuokkanen <i>et al.</i> , 2010	Fertile volunteers	8	Endometrial tissue	miRNAs microarrays	Purified epithelial cells from biopsies obtained during the late proliferative (n=4) vs. Mid-secretory phase (n=4) (day 12±1) (day 19-23)	12	12
Sha <i>et al.</i> , 2011	Infertile patients	5	Endometrial tissue	Deep sequencing	Prereceptive (1 pool of 5) vs. Receptive (1 pool of 5) (LH+2) (LH+7)	8	12
Altmäe <i>et al.</i> , 2013	Fertile patients	7	Endometrial tissue	miRNAs microarrays	Prereceptive (n=4) vs. receptive (n=3) (LH+2) (LH+7)	2	2
Kresowik <i>et al.</i> , 2014	Fertile patients	12	Endometrial tissue	RTqPCR of 8 selected miRNAs	Proliferative phase (n=12) vs. Secretory phase (n=12) (day 7-10) (day 20-24)	4	2
					Serum	1	0
Vilella <i>et al.</i> , 2015	Fertile patients	20	Endometrial fluid	miRNAs microarrays	Early proliferative phase (n=4) vs. implantation windows (n=4) (day 6-8) (day 19-23)	9	0
					Late proliferative phase (n=4) vs. implantation windows (n=4) (day 9-14) (day 19-23)	8	0
					Early secretory phase (n=4) vs. implantation windows (n=4) (day 15-18) (day 19-23)	1	5
					Late secretory phase (n=4) vs. implantation windows (n=4) (day 24-28) (day 19-23)	0	4
Revel <i>et al.</i> , 2011	Fertile and RIF patients	16	Endometrial tissue	TaqMan miRNA arrays	Fertile patients (n=5) vs. RIF patients (n=11) day 20-24	10	3
Qin <i>et al.</i> , 2016	Healthy and infertile patients	6	Plasma	miRNAs microarrays	Unexplained recurrent spontaneous abortion (n=3) vs. normal early pregnancies (n=3) 6–10 weeks of gestation	9	16

RIF, repeated implantation failure

To date, there are very few studies on miRNAs profiles during the menstrual cycle

miRNAs throughout the menstrual cycle

	Kuokkanen <i>et al.</i> , 2010	Kresowik <i>et al.</i> , 2014	Sha <i>et al.</i> , 2011	Altmäe <i>et al.</i> , 2013	Vilella <i>et al.</i> , 2015
MIR30D	2.2	2.74	6.92	3.29	2.62 (/ES), 2.98 (/EP), 3.04 (/LP)
MIR30B	2.6	2.96	2.99	4.23	-
MIR31	2.1	1.49	3.32	-	-
MIR203	2.5	2.42	2.01	-	-
MIR503	-3.6	-2.01	-4	-	-
MIR193A-3P	5.2	-	2.27	-	-
MIR455-3P	-	-	-2.23	-	-3.14 (/ES)
MIR455-5P	-	-	-2.53	-	-1.95 (/ES)
MIR424	-	-	-3.18	-	-5.02 (/ES)
MIR29B	2.8	-	-	-	4 (/EP), 3.67 (/LP)
MIR29C	2.6	-	-	-	2.22 (/LP)
MIR200C	2.1	-	-	-	2.51 (/EP), 2.46 (/LP)
MIR210	7.1	-	-	-	2.11 (/LP), 2.16 (/EP)

Fold changes during the implantation window are indicated

ES, early secretory
EP, early proliferative
LP, late proliferative

And few miRNAs are in common between these studies

Study design

Patients under hormone replacement therapy (HRT)
Biopsies during IW (Pg+6 to Pg+9)

WIN TEST

Endometrial receptivity status

Non-receptive vs. Receptive

(n=5)

(n=15)



Affymetrix[®] miRNA 4.1 Array Strips

miRNAs associated with endometrial receptivity ?

Personalized embryo transfers
in **receptive** patients

Outcome

Negative β -hCG vs. Positive β -hCG

(n=5)

(n=5)



Affymetrix[®] miRNA 4.1 Array Strips

miRNAs associated with IF ?

Miscarriage* vs. Live birth

(n=5)

(n=5)



Affymetrix[®] miRNA 4.1 Array Strips

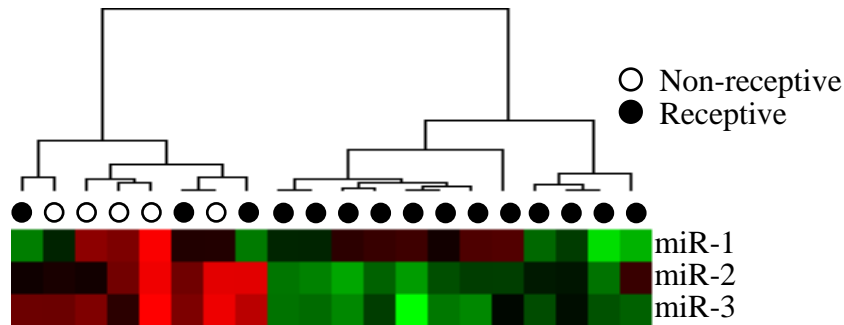
*8-12 weeks post-amenorrhoea

miRNAs associated with miscarriage ?

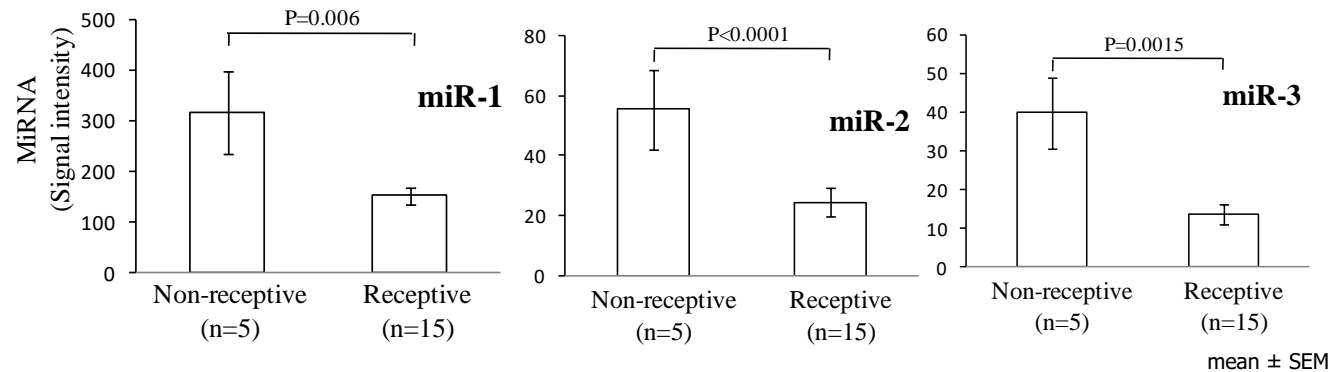
Endometrial miRNAs associated with endometrial receptivity

Supervised classification

Hierarchical clustering of 20 endometrium samples diagnosed as receptive or non-receptive during the theoretical implantation window



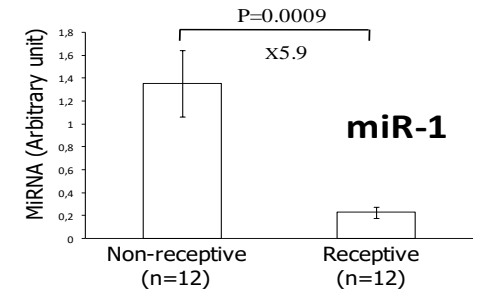
The microarray signals of each candidate



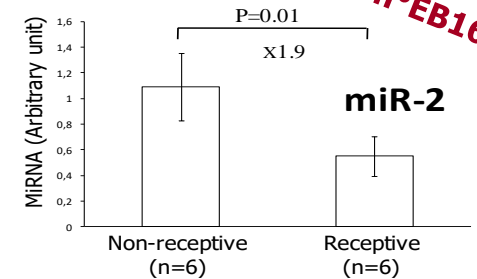
Validation by RT-qPCR in an independent cohort



TaqMan miRNA assay



Patent n°EB16391



For the miR-3, ongoing validation

Identification of 3 miRNAs over-expressed in non-receptive endometrium

Endometrial miRNAs associated with implantation failure

Positive β -hCG vs. Negative β -hCG

Number of miRNAs differentially expressed

Expression console (Affymetrix)	Significant analysis of microarrays	
ANOVA	T-test	Wilcoxon
240	242	257

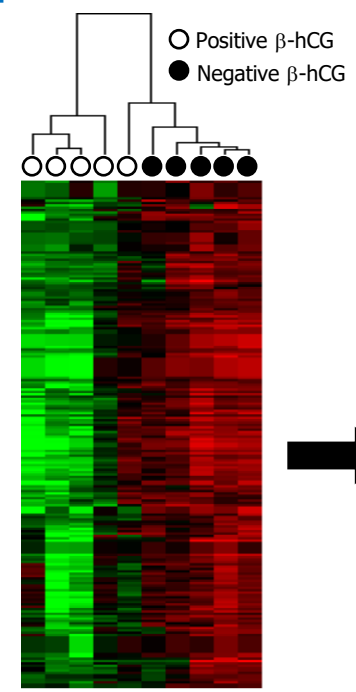
Fold change ≥ 2 , FDR $\leq 5\%$

215 miRNAs

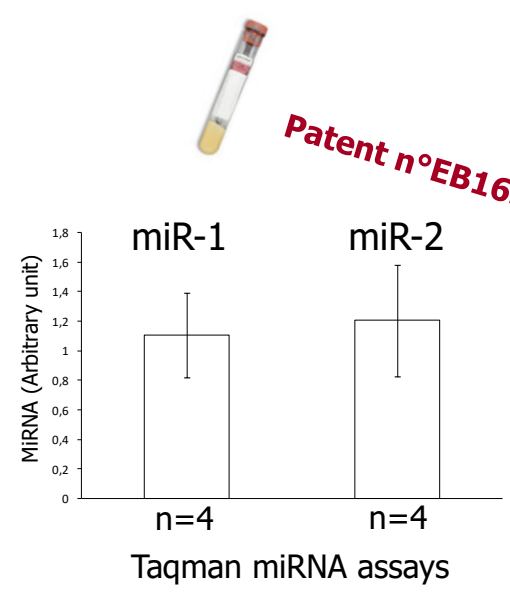
in common to the 3 statistical analyses

All **over-expressed** in the endometrium from the '**negative β -hCG**' group

Supervised cluster



Selection of two miRNAs for quantification in serum samples



Identification of endometrial miRNAs associated with implantation failure that can be detected in serum samples

Endometrial miRNAs associated with miscarriage

Miscarriage vs. Live birth

Number of miRNAs differentially expressed

Expression console (Affymetrix) ANOVA	Significant analysis of microarrays	
	T-test	Wilcoxon
146	206	208

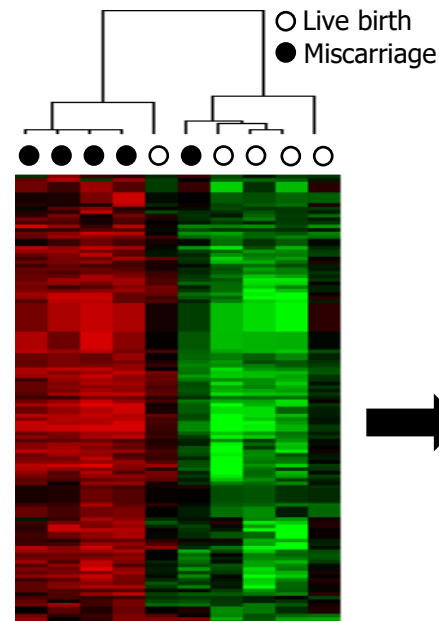
Fold change ≥ 2 , FDR $\leq 5\%$

126 miRNAs

in common to the 3 statistical analyses

All **over-expressed** in the endometrium from the 'miscarriage' group

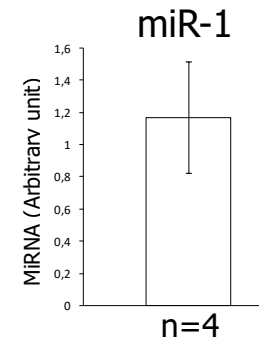
Supervised cluster



Selection of five miRNAs for quantification in serum samples



Patent n°EB16393



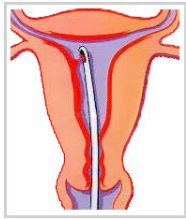
Taqman miRNA assays

Ongoing validation...

Identification of endometrial miRNAs associated with miscarriage that can be detected in serum samples

Conclusion and perspectives

Endometrial tissue



miRNA associated
With:

Endometrial receptivity,
Implantation failure &
miscarriages

Bloodstream



Quantification in
the bloodstream ?

Develop a non-invasive
diagnostic/pronostic tool
to limit the use of invasive
endometrial biopsies for
the evaluation of
endometrial receptivity
AND predict attempt
outcomes

This circulating miRNA-based test might become a rapid, easy and cheaper clinical diagnostic tool to allow performing personalized embryo transfer.

It would be possible to select strategies by which miRNA technologies might be utilized in novel, non-hormonal therapeutic approaches to avoid miscarriages and consequently, to increase the pregnancy rate.



Nicolas NAFATI



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Samir HAMAMAH



Delphine HAOUZI



Frédéric BANCEL



Anne BOISSIERE



Hervé DECHAUD



Anna GALA



Rafii ARASH



Loubna DRISSENEK



Alice FERRIERES



Hervé DECHAUD



Anna GALA



Rafii ARASH



Charlène INNOCENTI

Inserm U 1203
Human early embryonic development and pluripotency