

Collagen's Critical Role in Uterine Structure and Function and Implications in Placenta Accreta Spectrum

Sohum Shah MD¹, Lior Kashani Ligumsky MD¹, Alex Kot BS, MS¹, Liwen Yu MD¹, Anhyo Jeong BS¹, Guadalupe Martinez BS¹, Scott Shainker DO², Deborah Krakow MD¹, Yalda Afshar MD, PhD¹



1-University of California, Los Angeles2-Harvard Medical School

Background

- Properly synthesized and cross-linked collagen fibrils are the principal source of tensile strength in tissues and altered during pregnancy.
- We previously described changes in collagen at the decidual-stromal interface in placenta accreta spectrum (PAS).

Objective

• We aim to describe the histoarchitectural variables of collagen organization to understand the role of collagen in pregnancy and repair as it related to PAS.

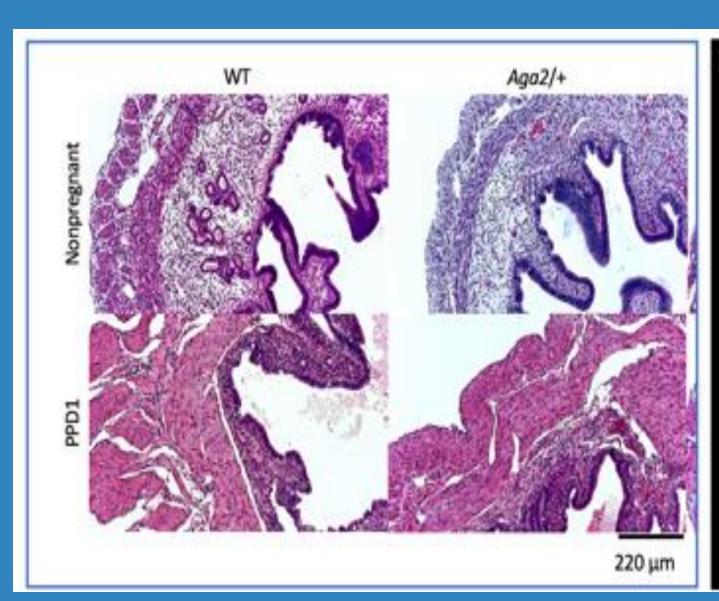
Study Design

- We utilized 2 different mutant type I collagen mice:
 - Col1a1^{Aga2/+} (Aga2/+) mice which express modified Col1a1, C-terminal frameshift mutation
 - Col1a1+/- which express reduced levels of type I collagen.
- These mice, historically used in the study of skeletal dysplasias, allow us to interrogate the role of type I collagen.
- Uteri and placenta from wildtype (WT), Col1a1+/-, and Aga2/+ mice were harvested. Additionally, we utilized a surgical mouse model of PAS.
- We employed quantitative histomorphometry with standard histochemistry as well as label-free 3D spectroscopy to understand collagen fibril orientation and distribution.

Results

- Type I collagen (Col1a1) was expressed in WT nonpregnant mice and at postpartum day 1
- In the WT, collagens were organized around smooth muscle and in the basement membranes of luminal and glandular epithelium (see Fig 1). PP type I collagen staining was prominent within the endometrial stroma.
- Aga2/+ mice demonstrated decreased type I collagen with a compensatory increase in type III collagen but no difference in type I and III collagen PP. Aga2/+ stromal thickness was decreased.
- Utilizing the surgical PAS mouse, RNA and protein expression of COL1A1 was altered and there was an increase deposition of type III collagen at the decidualplacental interface in PAS (see Fig 2).

Collagens are a main component of the dynamic architecture of the uterus. Type I collagen remodeling is a physiologic component of pregnancy and birth and is altered in PAS. The increased abundance and disorganization of collagen fibers at the site of adherence in PAS provide spatiotemporal clues to the mechanisms of PAS.



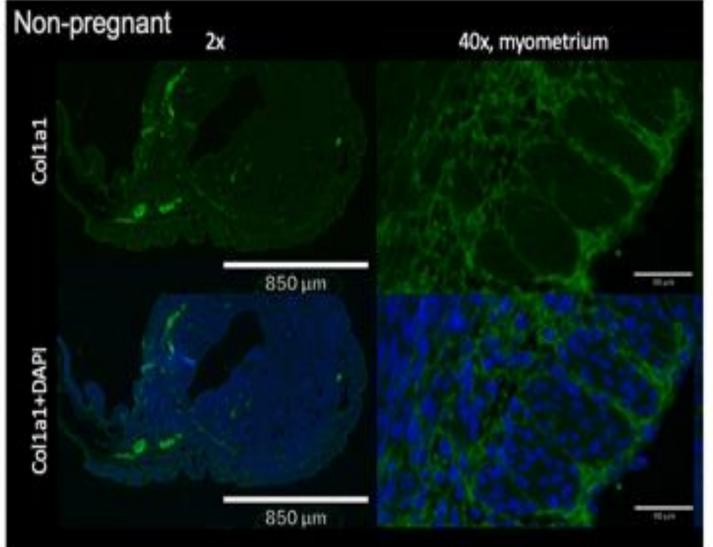
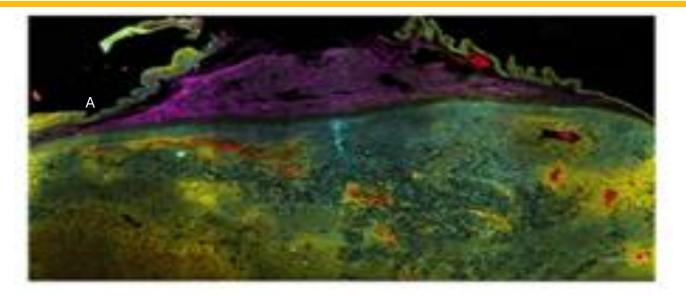


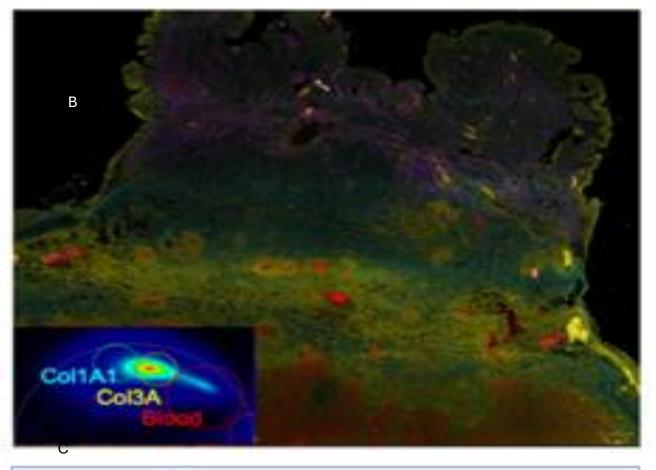
Figure 1. H&E staining of uteri from WT and Col1A1 mutant mice (non-pregnant and postpartum day 1 [PPD1]) without significant gross differences. Immunofluorescence demonstrates visualization of endometrial and myometrial Col1a1 protein (green) relative to nuclear staining (DAPI; blue) in non-pregnant WT mice.

Questions?

Take a picture of this QR code to access the poster or email presenter at sohumshah@mednet.ucla.edu







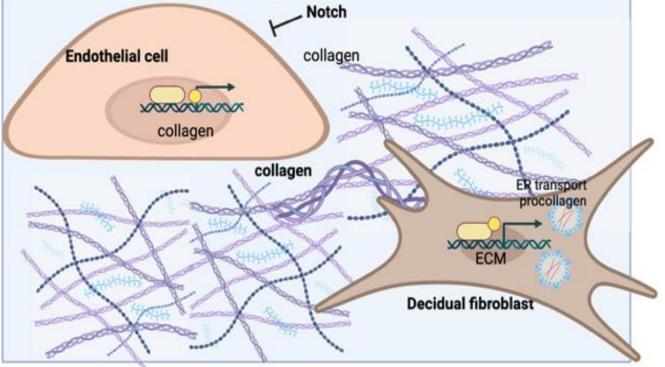


Figure 2. (A) Fluorescence lifetime imaging microscopy of uterine tissues from mouse pregnancies without PAS and without scarring compared to (B) PAS mice. (C) Collagen remodeling is a requirement for endothelial cell migration at the maternal-fetal interface and modulated by decidual fibroblast driven ECM production and regulation through endoplasmic reticulum transport.