

MDS-L Cells | 305826

General information

Description

MDS-L is a human myelodysplastic syndrome (MDS)-derived cell line originally established from the MDS92 cell line, which itself was derived from the bone marrow of a patient with MDS exhibiting a del(5q) chromosomal abnormality. While MDS92 contained a heterogeneous mix of myeloid cells at varying stages of differentiation, MDS-L represents a blastic subline with more uniform features characteristic of immature myeloid progenitor cells. MDS-L retains interleukin-3 (IL-3) dependency for proliferation in vitro, mirroring the cytokine sensitivity seen in primary MDS progenitor cells. The line harbors multiple genetic alterations, including homozygous TP53 mutations and additional acquired mutations in NRAS and CEBPA. These alterations collectively reflect the clonal evolution and leukemic transformation potential typical of high-risk MDS.

MDS-L has been widely used as a model to investigate the molecular mechanisms underlying MDS pathogenesis, differentiation block, and therapeutic resistance. One significant finding using MDS-L was the demonstration that forced expression of granulocyte colony-stimulating factor receptor (G-CSFR) via retroviral transduction enabled granulocytic differentiation upon G-CSF stimulation. This was evidenced by morphological changes, increased CD11b expression, and enhanced nitroblue tetrazolium (NBT) reduction activity-indicative of terminal granulocyte maturation. These results revealed the intrinsic capacity of MDS-L to differentiate if the appropriate signaling components are restored, offering insights into potential gene therapy approaches targeting differentiation defects in MDS.

In addition to genetic and functional studies, MDS-L has been instrumental in characterizing the role of histone modifications in disease progression. Notably, the histone H3-K27M mutation, commonly associated with pediatric gliomas but rare in hematologic malignancies, was identified in MDS-L and found to inhibit EZH2-mediated histone methylation. This epigenetic alteration led to widespread reduction in H3-K27 methylation and was linked to altered expression of tumor suppressor genes such as p16. MDS-L sublines with or without this mutation-derived through differential IL-3 culture conditions-have further allowed exploration of epigenetic heterogeneity within MDS and its implications for IL-3-dependent growth and therapeutic response. These unique properties make MDS-L a powerful in vitro and in vivo model for studying the molecular evolution and therapeutic targeting of MDS and its transformation into acute myeloid leukemia.

Organism

Human

Tissue

Bone marrow

Disease

Myelodysplastic syndrome

Synonyms

MDSL

Characteristics

Age

52 years

Gender

Male

Ethnicity

Japanese

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Growth
properties

Suspension

Regulatory Data

Citation MDS-L (Cytion catalog number 305826)**Biosafety level** 1**NCBI_TaxID** 9606**CellosaurusAccession** CVCL_A8QV

Biomolecular Data

Mutational profile Mutation: CEBPA, Simple, p.Gln311Ter (c.931C>T), Heterozygous, H3C3, Simple, p.Lys28Met (c.83A>T), Heterozygous, NRAS, Simple, p.Gly12Ala (c.35G>C), Heterozygous, TP53, Simple, c.672+1G>A, Homozygous, Note=Splice donor mutation

Handling

Culture Medium RPMI 1640, w: 2.0 mM stable Glutamine, w: 2.0 g/L NaHCO₃ (Cytion article number 820700a)**Supplements** Supplement the medium with 10% FBS and 20 ng/ml IL-3 human recombinant**Dissociation Reagent** None**Freeze medium** As a cryopreservation medium, we use complete growth medium (including FBS) + 10% DMSO for adequate post-thaw viability, or CM-1 (Cytion catalog number 800100), which includes optimized osmoprotectants and metabolic stabilizers to enhance recovery and reduce cryo-induced stress.

MDS-L Cells | 305826

Thawing and Culturing Cells

1. Confirm that the vial remains deeply frozen upon delivery, as cells are shipped on dry ice to maintain optimal temperatures during transit.
2. Upon receipt, either store the cryovial immediately at temperatures below -150°C to ensure the preservation of cellular integrity, or proceed to step 3 if immediate culturing is required.
3. For immediate culturing, swiftly thaw the vial by immersing it in a 37°C water bath with clean water and an antimicrobial agent, agitating gently for 40-60 seconds until a small ice clump remains.
4. Perform all subsequent steps under sterile conditions in a flow hood, disinfecting the cryovial with 70% ethanol before opening.
5. Carefully open the disinfected vial and transfer the cell suspension into a 15 ml centrifuge tube containing 8 ml of room-temperature culture medium, mixing gently.
6. Centrifuge the mixture at 300 x g for 3 minutes to separate the cells and carefully discard the supernatant containing residual freezing medium.
7. Gently resuspend the cell pellet in 10 ml of fresh culture medium. For adherent cells, divide the suspension between two T25 culture flasks; for suspension cultures, transfer all the medium into one T25 flask to promote effective cell interaction and growth.
8. Adhere to established subculture protocols for continued growth and maintenance of the cell line, ensuring reliable experimental outcomes.

Incubation Atmosphere

37°C, 5% CO₂, humidified atmosphere.

Shipping Conditions

Cryopreserved cell lines are shipped on dry ice in validated, insulated packaging with sufficient refrigerant to maintain approximately -78 °C throughout transit. On receipt, inspect the container immediately and transfer vials without delay to appropriate storage.

Storage Conditions

For long-term preservation, place vials in vapor-phase liquid nitrogen at about -150 to -196 °C. Storage at -80 °C is acceptable only as a short interim step before transfer to liquid nitrogen.

Quality Control & Molecular Analysis

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Sterility

Mycoplasma contamination is excluded using both PCR-based assays and luminescence-based mycoplasma detection methods.

To ensure there is no bacterial, fungal, or yeast contamination, cell cultures are subjected to daily visual inspections.