



APCN×TSN 2025

23rd Asian Pacific Congress of Nephrology

Link the Future Kidney Health with **GIVE**



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TaiNEX 2, Taipei Taiwan

Mesenchymal Stem Cell Derived Exosomes Ameliorate Ischemia Reperfusion Induced Acute Kidney Injury: A Preclinical Meta-Analysis

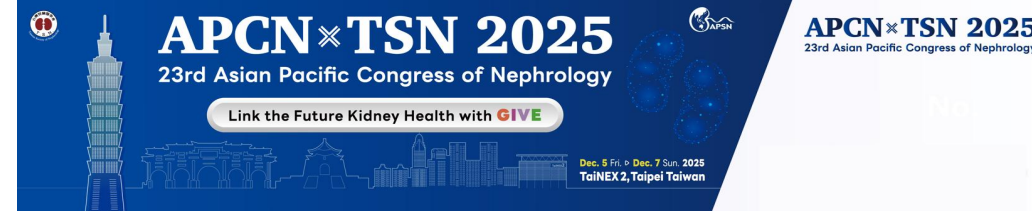
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Background:

- Acute kidney injury (AKI) affects 10–15% of hospitalized patients and over 50% of ICU cases.
- Exosomes derived from mesenchymal stem cells (MSCs) have shown reno-protective effects in animal models mimicking AKI through ischemia reperfusion,
- yet their therapeutic efficacy has not been systematically and quantitatively evaluated.
- Purpose: This meta-analysis determines the overall effect of MSC-derived exosomes in ameliorating IRI-induced AKI.

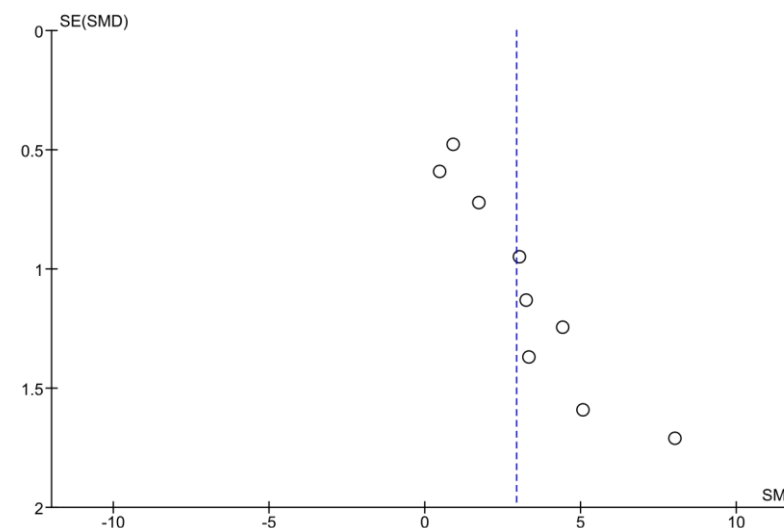
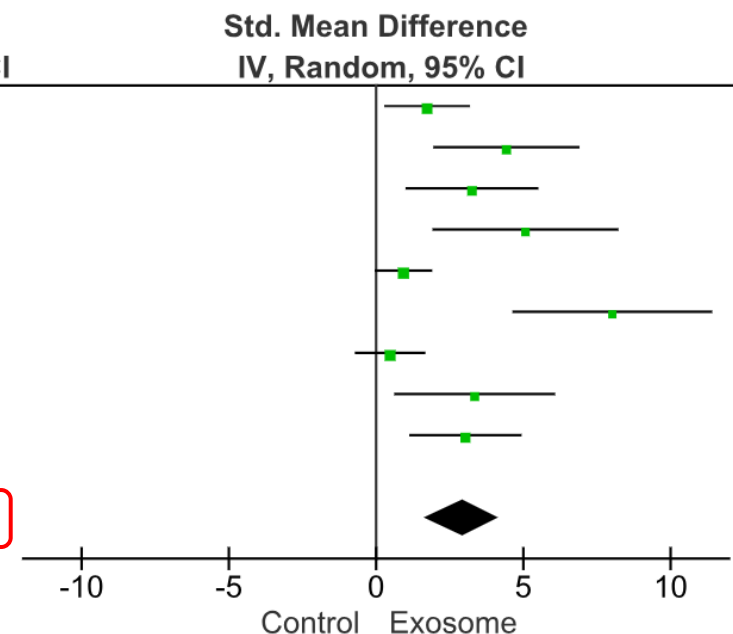
METHODS:



- A systematic review was performed across five major databases,
- A total of 362 were screened focusing on exosomes derived from mesenchymal stem cell therapy for IRI.
- Seven outcome parameters were measured:
 1. serum creatinine (SCr),
 2. blood urea nitrogen (BUN),
 3. tubular damage,
 4. apoptotic cells,
 5. inflammatory markers interleukin-6 (IL-6),
 6. tumor necrosis factor-alpha (TNF- α),
 7. the apoptotic marker caspase-3.
- Data were analyzed using Review Manager (RevMan version 5.4),

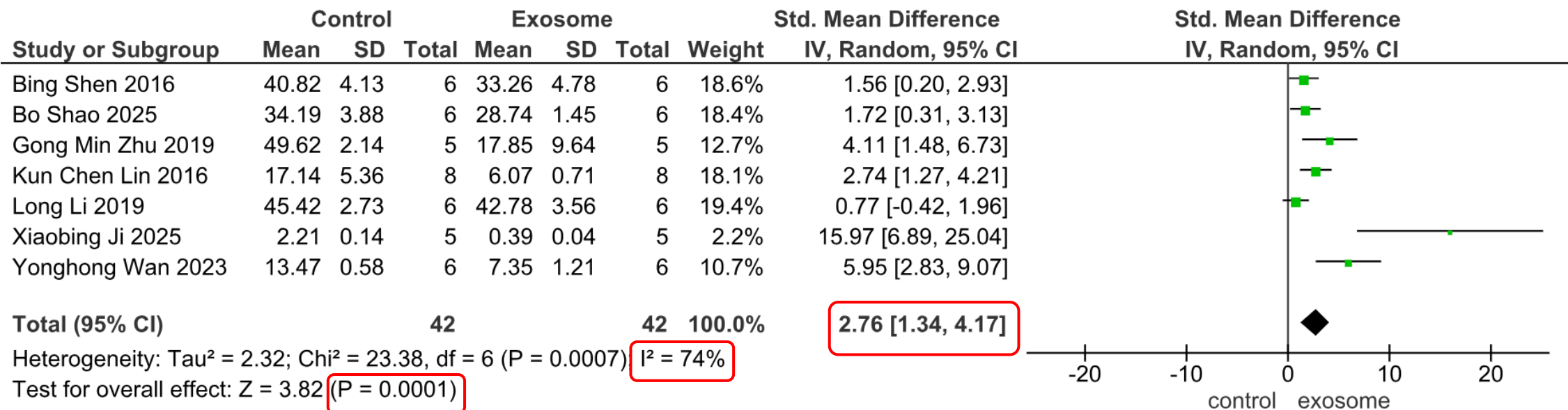
CREATININ

Study or Subgroup	Control			Exosome			Weight	Std. Mean Difference IV, Random, 95% CI
	Mean	SD	Total	Mean	SD	Total		
Bing Shen 2016	147.73	12.3	6	124.55	12.41	6	13.4%	1.73 [0.32, 3.14]
Bo Shao 2025	250.11	34.69	6	122.03	14.98	6	10.1%	4.42 [1.99, 6.86]
Gong Min Zhu 2019	126.94	7.19	5	98.47	8.55	5	10.8%	3.26 [1.04, 5.47]
Jiahui He 2025	582.29	18.56	5	377.61	48.1	5	8.1%	5.07 [1.96, 8.18]
Jing Yuan Cao 2021	75.32	18.47	10	58.19	16.83	10	14.8%	0.93 [-0.00, 1.86]
Kun Chen Lin 2016	136.81	17.83	8	29.78	0.63	8	7.6%	8.02 [4.67, 11.37]
Long Li 2019	482.67	37.12	6	462.44	41.27	6	14.2%	0.48 [-0.68, 1.63]
Samin Taghavi 2025	3.84	0.36	4	2.83	0.09	4	9.3%	3.35 [0.66, 6.03]
Yonghong Wan 2023	33.08	3.21	6	22.65	3.14	6	11.9%	3.03 [1.17, 4.90]
Total (95% CI)			56			56	100.0%	2.92 [1.66, 4.19]
Heterogeneity: Tau ² = 2.59; Chi ² = 34.95, df = 8 (P < 0.0001); I ² = 77%								
Test for overall effect: Z = 4.53 (P < 0.00001)								

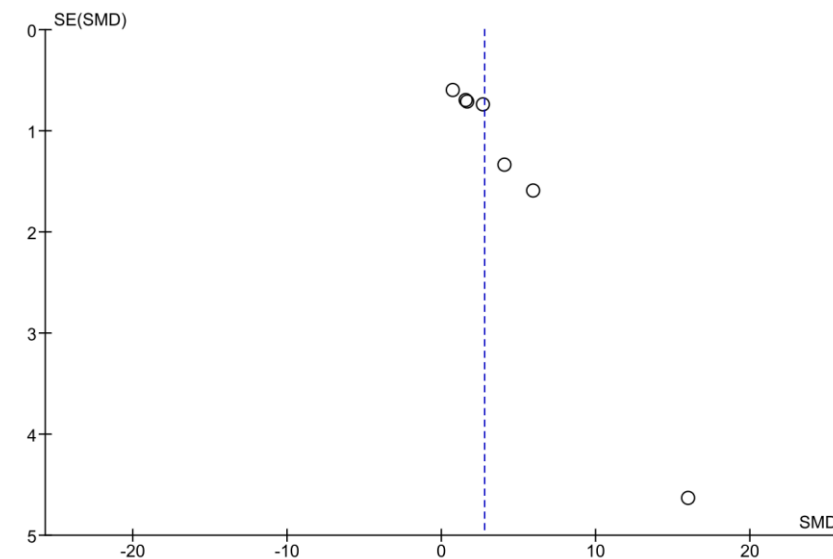


- a significant reduction in serum creatinine levels within 24 hours.
- Indicates clear improvement in glomerular filtration and early renal recovery.
- The effect was consistent across most included studies.

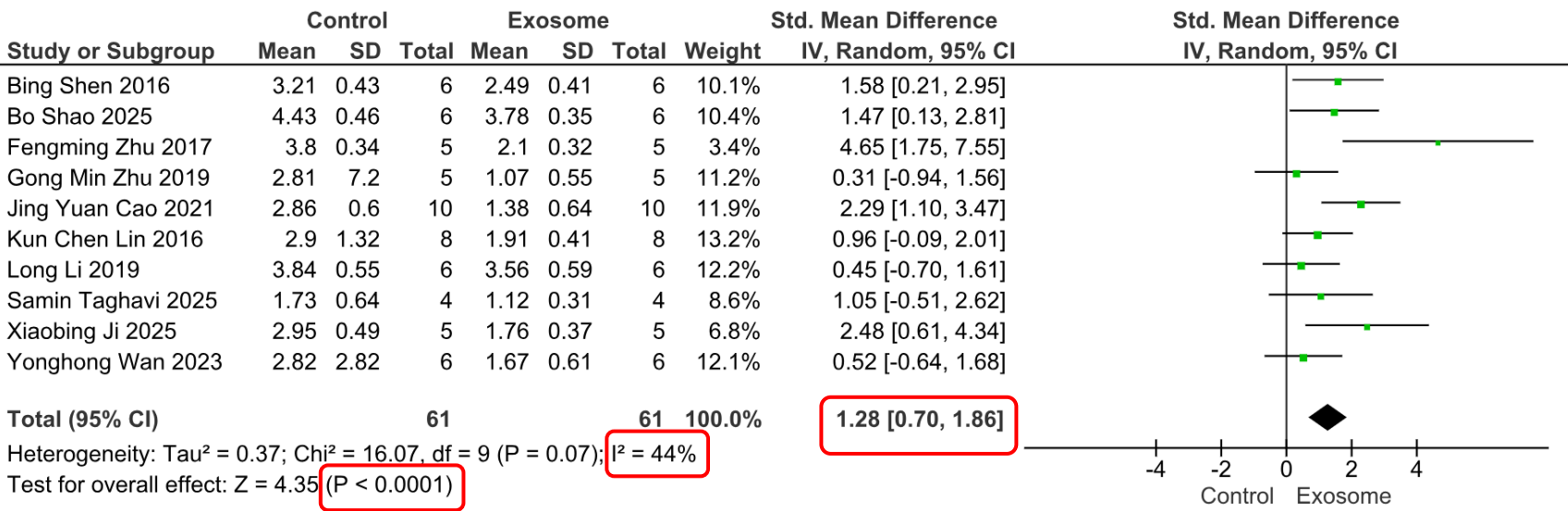
BUN



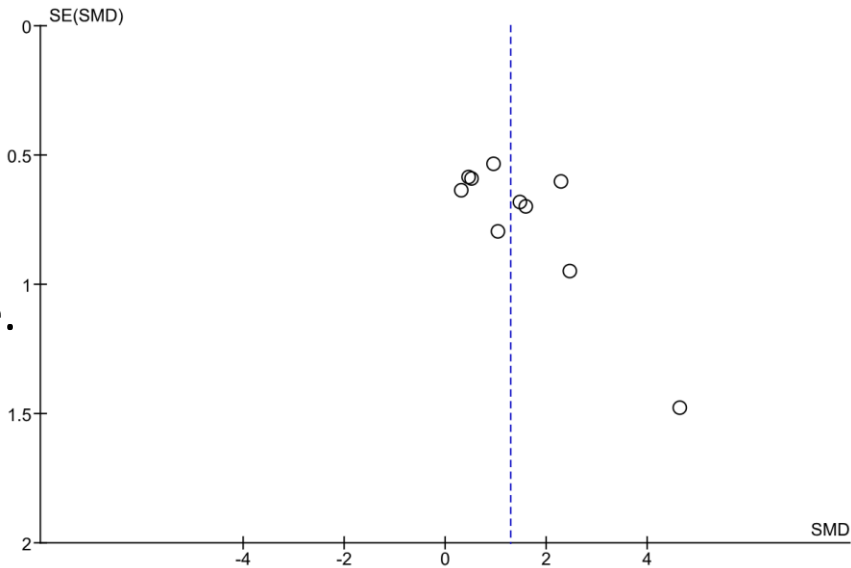
- BUN levels were significantly reduced following exosome administration,
- Supports enhanced renal excretory function



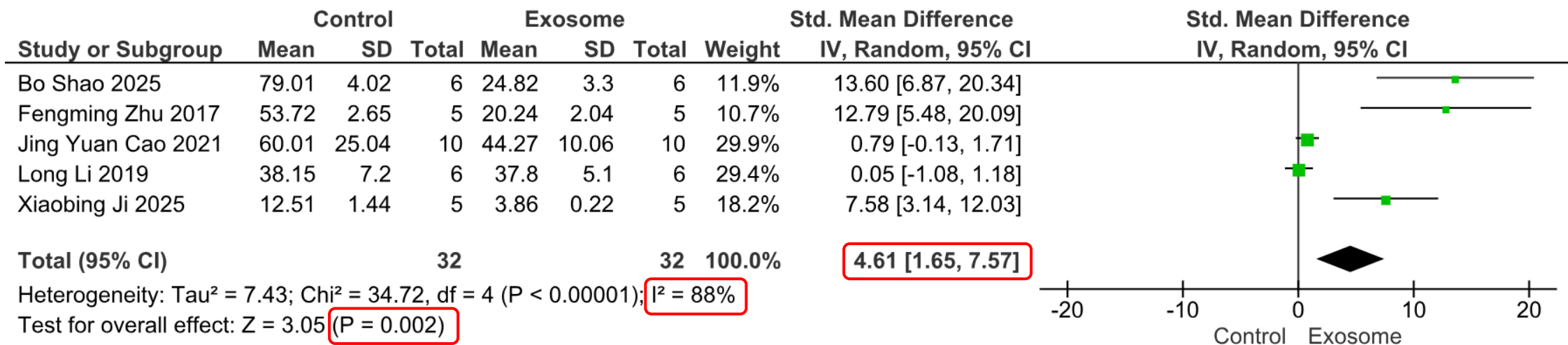
TUBULAR DAMAGE



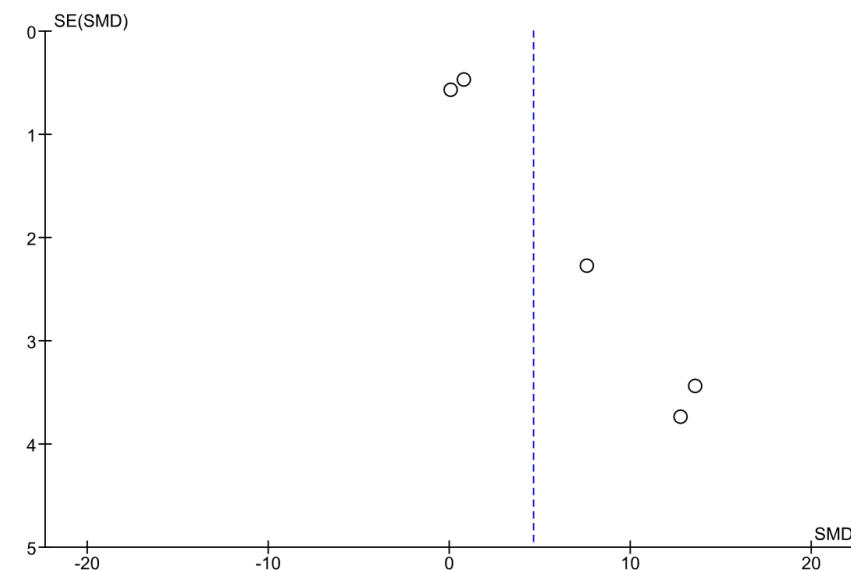
- Exosomes significantly decreased tubular injury scores,
- demonstrating structural preservation of renal tubular epithelium,
- Suggests potent cytoprotective effects against IRI-induced tissue damage.



APOPTOTIC CELLS

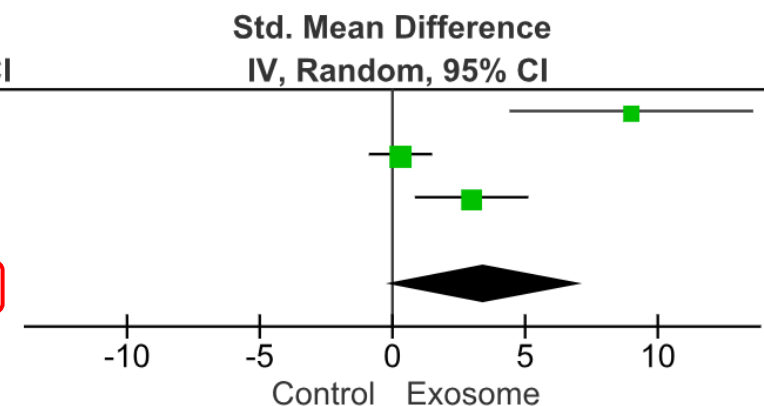


- A marked reduction in apoptotic cell counts was observed in exosome-treated animals.
- Confirms the anti-apoptotic role of MSC-derived exosomes in attenuating IRI-induced cell death.

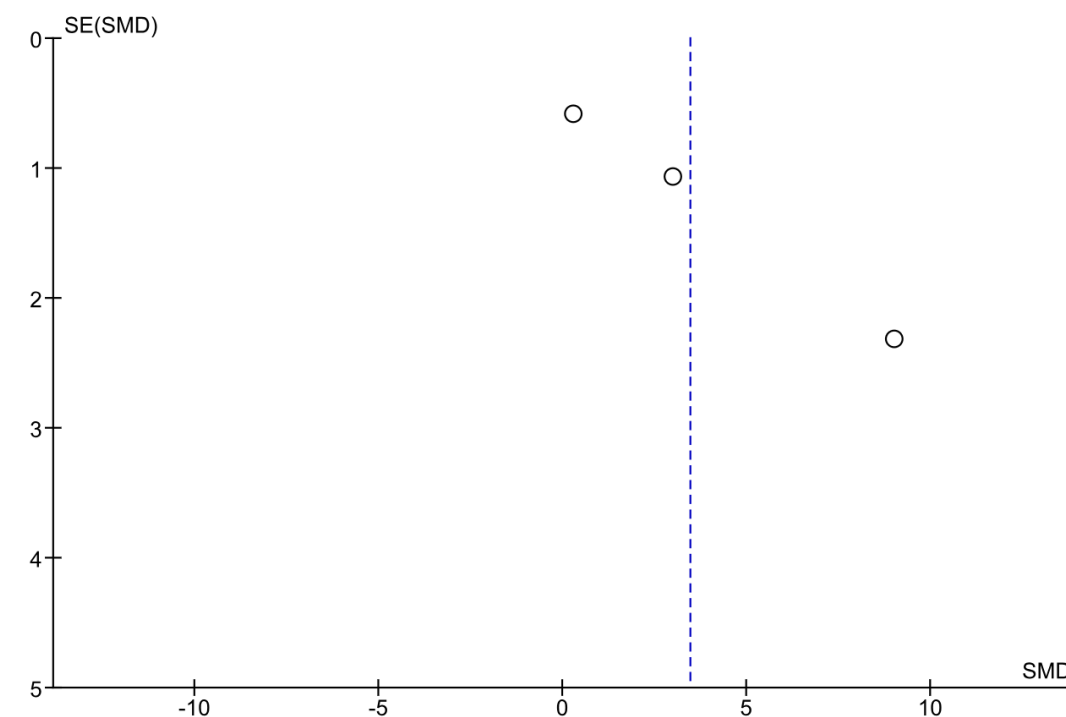


IL-6

Study or Subgroup	Control			exosome			Weight	Std. Mean Difference IV, Random, 95% CI
	Mean	SD	Total	Mean	SD	Total		
Bing Shen 2016	1.09	0.09	6	0.38	0.05	6	25.1%	9.00 [4.46, 13.54]
Bo Shao 2025	13.87	5.32	6	12.35	3.76	6	39.0%	0.30 [-0.84, 1.45]
Fengming Zhu 2017	13.12	2.8	5	5.87	1.34	5	35.9%	2.98 [0.90, 5.07]
Total (95% CI)			17			17	100.0%	3.45 [-0.24, 7.15]
Heterogeneity: $\tau^2 = 8.78$; $\chi^2 = 16.49$, $df = 2$ ($P = 0.0003$) $I^2 = 88\%$								
Test for overall effect: $Z = 1.83$ ($P = 0.07$)								

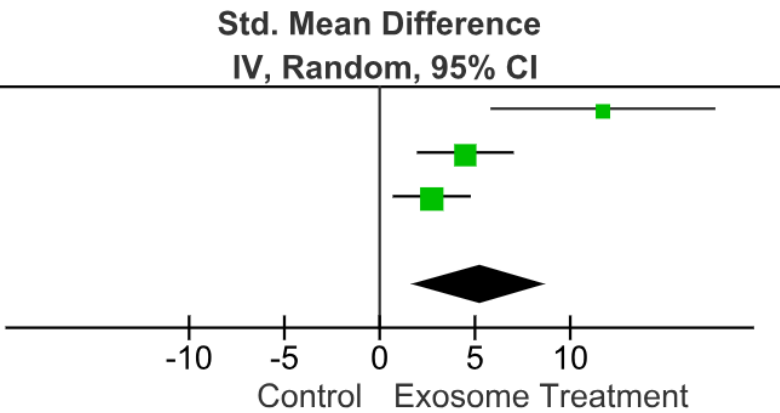


- IL-6 levels were significantly lowered, indicating suppression of early systemic and local inflammatory responses.
- Reinforces the immunomodulatory of exosomal therapy.

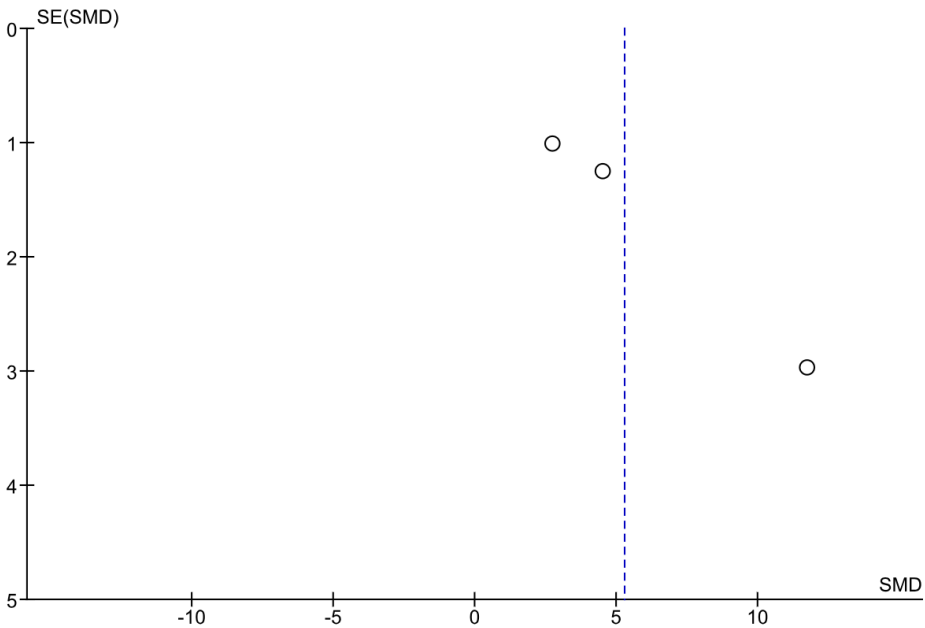


TNF- α

Study or Subgroup	Control			Exosome			Weight	Std. Mean Difference IV, Random, 95% CI
	Mean	SD	Total	Mean	SD	Total		
Bing Shen 2016	1.06	0.08	6	0.32	0.02	6	20.7%	11.71 [5.89, 17.54]
Bo Shao 2025	4.3	0.52	6	2.18	0.33	6	38.3%	4.49 [2.03, 6.96]
Fengming Zhu 2017	8.04	0.56	5	6.76	0.21	5	41.0%	2.73 [0.76, 4.71]
Total (95% CI)			17			17	100.0%	5.27 [1.72, 8.81]
Heterogeneity: Tau ² = 6.95; Chi ² = 8.46, df = 2 (P = 0.01); I ² = 76%								
Test for overall effect: Z = 2.91 (P = 0.004)								

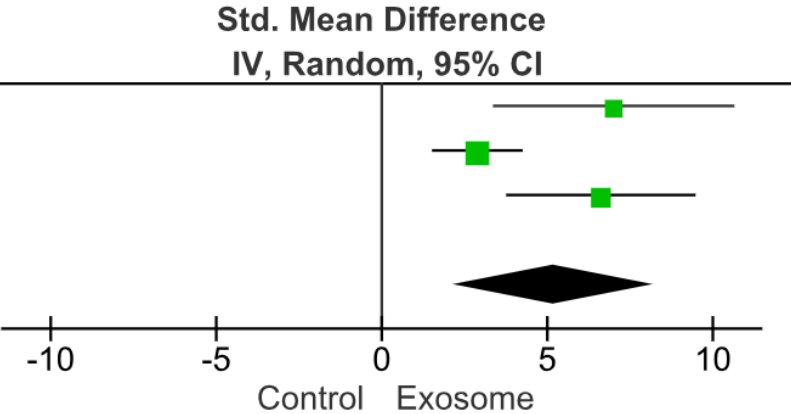


- TNF- α , a key pro-inflammatory cytokine, was consistently reduced across studies.
- Demonstrates attenuation of IRI-associated inflammatory injury.

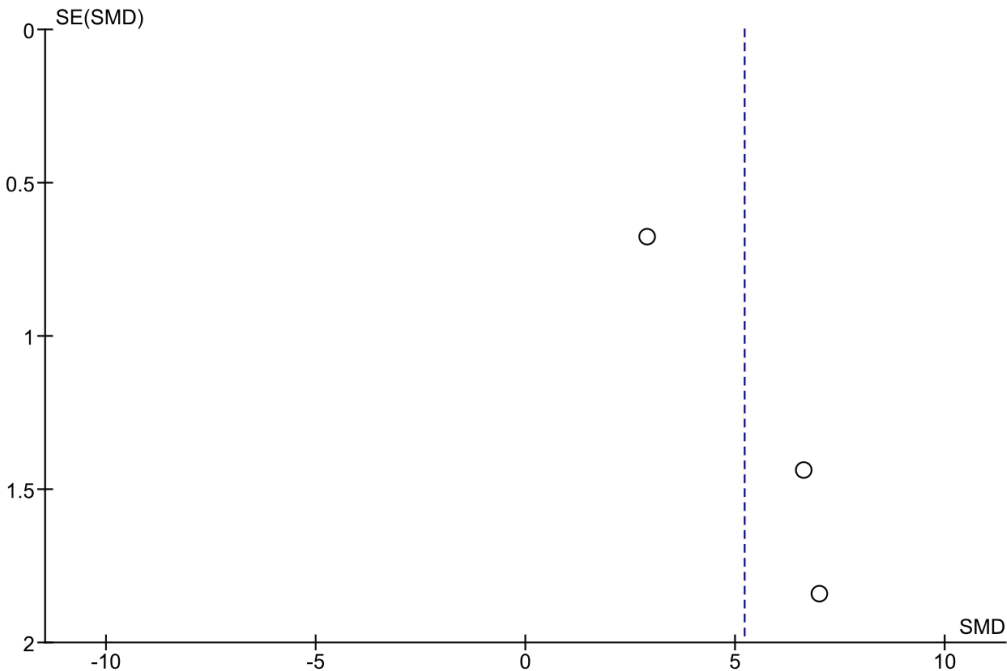


CASPASE 3

Study or Subgroup	Control			Experiment			Weight	Std. Mean Difference IV, Random, 95% CI
	Mean	SD	Total	Mean	SD	Total		
Bo Shao 2025	0.15	0.02	6	0.03	0.01	6	27.2%	7.01 [3.40, 10.61]
Jing Yuan Cao 2021	2.04	0.34	10	1	0.35	10	40.8%	2.89 [1.56, 4.22]
Kun Chen Lin 2016	0.22	0.02	8	0.08	0.02	8	32.0%	6.62 [3.80, 9.44]
Total (95% CI)			24			24	100.0%	5.20 [2.18, 8.22]
Heterogeneity: Tau ² = 5.35; Chi ² = 8.67, df = 2 (P = 0.01); I ² = 77%								
Test for overall effect: Z = 3.38 (P = 0.0007)								



- Exosome treatment reduced caspase-3 expression, confirming inhibition of downstream apoptotic pathways.
- Complements the reduction in apoptotic cell counts.



Discussion:

- A total of 11 in vivo studies published until 2025, involving 132 animals.
- Exosome doses ranged from 50 to 250 μg , with particle sizes of 120 - 140 nm.
- At 24 hours post-treatment, exosomes improved renal function and reduced tissue injury.
- Secondary analyses demonstrated attenuation of inflammatory markers:
IL-6, TNF- α , apoptotic marker caspase-3.
- No exosome-related adverse effects were reported in any of the included studies.
- Highlighting their safety in preclinical settings.
- These findings strongly support exosomes as a promising future therapeutic for AKI.

Conclusions:

- MSC-derived exosomes significantly improve renal function and attenuate tissue damage, apoptosis, and inflammation in preclinical models of ischemia reperfusion induced acute kidney injury.
- Provide robust preclinical evidence for exosomes as a novel regenerative and immunomodulatory therapy.
- Further translational and clinical studies are warranted to validate their therapeutic potential in humans.



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THANK YOU