

Advances in Biomaterials for Liver Tissue Engineering: Towards Bio Artificial Liver Devices

Kazuki Motoshige^{*}

Department of Internal Medicine, University of South Carolina, Charleston, United States of America

DESCRIPTION

Liver disease, a global health concern, often culminates in liver failure, a condition with limited treatment options. While liver transplantation remains as primary treatment and the scarcity of donor organs necessitates alternative therapies. Tissue engineering, with its focus on creating functional tissues, emerges as a potential approach. Central to this endeavor are biomaterials, which serve as the scaffold upon which new liver tissue can be constructed. Biomaterials are essential to liver tissue engineering. They provide the structural framework for hepatocytes and other liver cells to attach, proliferate, and differentiate into functional tissue. The ideal biomaterial should possess several key properties: biocompatibility to minimize immune responses, degradability to be gradually replaced by new tissue, porosity to allow nutrient and oxygen diffusion, and mechanical properties mimicking the native liver. Decellularized liver matrices offer a unique approach to liver tissue engineering. By removing cellular components while preserving the Extracellular Matrix (ECM), researchers obtain a scaffold that retains the liver's intricate architecture. These natural matrices provide a familiar environment for cell repopulation, contain growth factors that promote liver regeneration, and may reduce the risk of immune rejection. However, challenges such as achieving uniform decellularization and maintaining long-term stability need to be addressed. Synthetic biomaterials offer precise control over material properties, enabling the creation of tailored scaffolds for liver tissue engineering. Hydrogels, with their water-swollen structure, closely mimic the liver's hydrated environment. Incorporating bioactive molecules into hydrogels can further enhance cell function and promote liver-specific differentiation. Polymers, known for their mechanical properties, can be fabricated into various structures to support different tissue components. While synthetic biomaterials show promise, achieving optimal biomimicry and long-term functionality remains a challenge.

3D printing revolutionizes tissue engineering by allowing the precise construction of complex tissue structures. Biomaterials

can be extruded layer by layer to create scaffolds with intricate vascular networks, essential for liver function. This technology enables the incorporation of different cell types and growth factors, mimicking the heterogeneous nature of the liver. However, challenges such as developing suitable bio-inks, maintaining cell viability during the printing process, and ensuring sufficient oxygen and nutrient delivery to the printed tissue need to be overcome. Creating functional liver tissue with complexity remains а significant sufficient hurdle. Vascularization, the formation of blood vessels within the engineered tissue, is crucial for nutrient and oxygen delivery but poses a major challenge. Ensuring the long-term stability and integration of the engineered tissue with the host body are also critical considerations. Additionally, immune responses to the implanted tissue can hinder graft survival. The ultimate goal of liver tissue engineering is to develop Bio-Artificial Liver Devices (BALDs) that can serve as a temporary or long-term solution for patients with liver failure, either until a suitable liver transplant becomes available or as a permanent alternative. These devices incorporate engineered liver tissue within would а bioreactor system, providing a controlled environment for tissue function. While still in the experimental stage, BALDs hold immense potential for improving patient outcomes. The choice of cell source significantly impacts the success of liver tissue engineering. Primary hepatocytes, while exhibiting mature liver functions, have limited availability. Stem cells, including Induced Pluripotent Stem Cells (iPSCs), offer a potential source for generating hepatocytes but require further differentiation and maturation. Strategies to suppress immune responses against the engineered liver tissue are essential for long-term graft survival. Immunomodulatory therapies, such as immunosuppressive drugs or immune tolerance induction, may be necessary. Translating laboratory achievements into clinical applications requires rigorous testing, including preclinical studies and clinical trials, to ensure safety and efficacy. The use of animal models and human-derived cells raises ethical concerns. Careful consideration of animal welfare and informed consent from human donors is potential.

Correspondence to: Kazuki Motoshige, Department of Internal Medicine, University of South Carolina, Charleston, United States of America, E-mail: kazh@chalr.com

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CONCLUSION

Recent advancements in biomaterials have led to significant progress in liver tissue engineering. Decellularized matrices, synthetic biomaterials, and 3D printing provide various strategies for developing functional liver tissue.Overcoming challenges related to vascularization, long-term stability, immune responses, and bioreactor design is essential for realizing the full potential of bio-artificial liver devices. The development of artificial liver replacement is a complex endeavor that could significantly improve the lives of individuals with liver disease. However, the potential long-term consequences of using genetically modified cells in humans necessitate thorough evaluation.