

human M-MLCs, cardiotoxin was re-administered into the same muscles without additional transplantation. Two weeks after the second cardiotoxin treatment (6 weeks after initial transplantation), many regenerating GFP-positive myofibers with centrally-located nuclei were observed. This implies that, upon transplantation of M-MSCs to muscles of patients, those retained as satellite cells should be able to continue to contribute to future muscle regeneration¹⁰.

Compared to the various muscle stem cell systems that have been reported, this system offers several important advantages. Since our induction system does not depend on a rare stem cell population, but can utilize the general population of adherent MSCs, which can be easily isolated and expanded, functional skeletal muscle cells can be obtained within a reasonable time course on a therapeutic scale. In case of MSCs derived from inherited muscle dystrophy patients, genetic manipulation is possible after the isolation and expansion of MSCs. Moreover, transplantation of MSC-derived cells should encounter fewer ethical problems.

General conclusions

While ES cells and tissue stem cells have great potential, MSCs also provide hopeful possibilities for clinical application, since they can be efficiently expanded *in vitro* and we could acquire a therapeutic scale of induced cells. In addition, transplantation of MSC-derived cells should pose fewer ethical problems by preventing stem cell controversy, since bone marrow transplantation has already been widely performed. As MSCs are easily obtained from patients or marrow banks, autologous transplantation of induced cells or transplantation of induced cells with the same HLA subtype from a healthy donor may minimize the risks of rejection. Needless to say, bone marrow should at least be 'normal and healthy' for transplantation.

Although we showed the high ratio and specific induction of Schwann cells, neurons and skeletal muscle cells, we still have to solve the following problems⁸⁻¹⁰. Although there have been so far few reports referring to tumor formation after transplantation of untreated MSCs, further studies are needed to ensure safety, tumor formation and efficacy of manipulated MSCs over a long-term period using primates. In fact, recent reports raised the possibility of transformation in the long term cultivation of MSCs^{25,26}. Second, as the potential of differentiation would differ by age, individual, race, and sexes, each of these must be investigated in the future. Third, MSCs have been shown to be heterogeneous in terms of growth kinetics, morphology, phenotype and plasticity. With the development of specific markers

and detailed characterization of heterogeneous general adherent MSCs, their properties and plasticity can be studied and defined with more certainty.

Notch-Hes signaling are known to inhibit neuronal and myogenic differentiation in conventional development¹⁶. However, in our system, NICD introduction accelerated the induction of neuronal and skeletal muscle cells from MSCs. Although our results appear inconsistent with previous work, they do not refute the known role of Notch-Hes signals during development. In the previous report, JAK/STAT inhibitor administration and constitutive active STAT1/3 transfection showed that down regulation of STATs was tightly associated with NICD-mediated neuronal induction, whereas Hes, down stream of Notch, was not involved in the induction event⁹. Skeletal muscle induction was also revealed to be independent of Hes1/5. Thus, our results suggest the distinct cellular responses to Notch signals; for example, the repertoire of second messengers and active factors may well be different between conventional neural stem cells and/or neural progenitor cells and MSCs. It might be possible that unknown signaling pathway downstream of Notch may be involved in these events, and thus further studies are needed to identify the factor involved in this phenomenon.

Since MSCs can be obtained from patients, it is possible to establish a "self-regenerative system" using MSCs. To realize this ideal, it is necessary to develop the regulatory system of differentiating MSCs into cells with a purpose. Our method would be one of possible way to regulate MSC differentiation into functional Schwann cells, neurons and skeletal muscle cells which will be applicable to neurodegenerative and muscle degenerative diseases.

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