Review Article

Extracellular Vesicles: A New Prospective in Crosstalk between Microenvironment and Stem Cells in Hematological Malignancies

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The bone marrow (BM) microenvironment in hematological malignancies (HMs) comprises heterogeneous populations of neoplastic and nonneoplastic cells. Cancer stem cells (CSCs), neoplastic cells, hematopoietic stem cells (HSCs), and mesenchymal stromal/stem cells (MSCs) are all components of this microenvironment. CSCs are the HM initiators and are associated with neoplastic growth and drug resistance, while HSCs are able to reconstitute the entire hematopoietic system; finally, MSCs actively support hematopoiesis. In some HMs, CSCs and neoplastic cells compromise the normal development of HSCs and perturb BM-MSCs. In response, “reprogrammed” MSCs generate a favorable environment to support neoplastic cells. Extracellular vesicles (EVs) are an important cell-to-cell communication type in physiological and pathological conditions. In particular, in HMs, EV secretion participates to unidirectional and bidirectional interactions between neoplastic cells and BM cells. The transfer of EV molecular cargo triggers different responses in target cells; in particular, malignant EVs modify the BM environment in favor of neoplastic cells at the expense of normal HSCs, by interfering with antineoplastic immunity and participating in resistance to treatment. Here, we review the role of EVs in BM cell communication in physiological conditions and in HMs, focusing on the effects of BM niche EVs on HSCs and MSCs.

1. Introduction

Normal hematopoietic stem cells (HSCs) reside in bone marrow (BM) and are supported by specialized and strictly organized stem cell niches, like endosteal and vascular [1]. The communication with other BM cells, including mesenchymal stromal/stem cells (MSCs), is crucial for HSC self-renewal, survival, and behavior. This dialogue within BM cell populations takes place through numerous extracellular and intracellular factors including hematopoietic growth factors and their receptors, signaling pathways, and cell cycle signaling [2].

Genetic alterations in HSCs or progenitors are associated to several hematologic malignancies (HMs) such as myelodysplastic syndrome (MDS), myeloproliferative neoplasia, acute myeloid leukemia (AML), chronic myeloid leukemia (CML), chronic lymphocytic leukemia (CLL), and acute lymphoblastic leukemia [3]. Following genetic alterations, HSCs or progenitors are transformed into leukemia stem cells (LSCs) that retain self-renewal capability and uncontrolled...
differentiation into leukemic blasts [4]. LSCs reside in the same niche as healthy HSCs and, on one side, they benefit from BM niche support and, on the other side, they modify the BM niche in order to induce a favorable environment for leukemic growth hampering normal hematopoiesis [5]. In addition, the interactions between LSCs and the endosteal niche sustain their silent state and protect them from the cytotoxicity of conventional chemotherapy [6, 7].

Studying the crosstalk between HSCs, LSCs, hematological neoplastic cells, and the BM microenvironment will enhance our comprehension of some human diseases including several HMs and the discovery of new potential therapies.

Extracellular vesicles (EVs) are emerging as new players in the intercellular communication and as new potential biomarkers for diagnosis and prognosis of human diseases [8–12]. They are a heterogeneous group of cell-derived vesicles including exosomes (Exo) and microvesicles (MVs) with a size ranging between 15 nm and 10 μm in diameter and with diverse biogenesis [13]. Different cells in physiological and pathological conditions, including tumor cells, can secrete EVs [14]. They act both in short-range intercellular communication, for example in the medullary microenvironment or in coculture conditions, and in long-range communication when released into the bloodstream through which they can reach secondary sites and give rise to premetastatic niches [15–17]. EVs carry part of DNA, RNA, proteins, lipids, and metabolites of the origin cells. Since EVs are present in biological fluids such as blood, urine, and sperm, [18, 19] and are a representative part of the whole cell for their phenotype and content, they could be used as a diagnostic tool by mimicking a “liquid biopsy.” These last characteristics make them excellent candidates as diagnostic and/or prognostic biomarkers in different diseases, especially in tumors, through noninvasive or minimally invasive procedures. In our recent study, we found that serum EV number and their specific oncomiRNA155 are higher in HM patients than in healthy subjects and, more importantly, EVs exposed specific tumor-associated surface markers [20, 21].

Stem cells (SCs) from embryos [22, 23], from different adult tissues such as BM, liver, and adipose tissue, and from induced pluripotent SCs, release EVs [24, 25]. Moreover, embryonic SC-EVs deliver mRNAs of pluripotent transcriptional factors such as HoxB4, Nanog, Oct3/4, and Rex-1, and transfer them to recipient cells, supporting hematopoietic progenitor cell expansion [26]. In addition, SC-EV microRNAs (miRNA) downregulate cell adhesion molecule levels, contributing to hematopoietic progenitor cell mobilization [27]. In a tumor context, SCs secrete EVs, which act as a means of communication in the tumor microenvironment playing multiple roles in tumorigenesis, and both in tumor angiogenesis and metastasis [28]. Finally, in vivo models, SC-EVs mainly exhibit an inhibitory effect on the immune system suppressing proinflammatory processes and reducing oxidative stress and fibrosis [29]. Remarkably, MSC-EVs promote tissue renewal by inducing a preregenerative environment allowing stem and progenitor cells to successfully maintain tissue homeostasis. Importantly, MSC-EVs were used in two human disease therapies. In the first study, the administration of MSC-EVs reduces graft-versus-host disease (GvHD) symptoms and reduces steroid doses in an allogeneic transplantation of patients suffering from steroid refractory GvHD [30]. In the second study, the MSC-EV therapy triggers the regeneration within the affected kidney in patients with chronic kidney disease [31].

Although much has been reported about the stem cell and MSC-EV role, less is known about the influence of BM-EVs on HSCs and MSCs in physiological conditions and in malignancy onset, progression, and therapy resistance. In this review, therefore, we will discuss the recent advances in the field of EVs as actors in communication between cells within the BM niche in physiological conditions and in HMs, underlining the role and the effects in the tumor microenvironment-stem cell crosstalk. In particular, we will focus on the effects of EVs from BM niche cells on HSCs and MSCs.

2. Stem Cells

2.1. Hematopoietic Stem Cells (HSCs). HSCs are the only cells into the hematopoietic system that possess the potential for both pluripotency and self-renewal [1]. Pluripotency is the ability to differentiate into all functional blood cells; self-renewal is the ability to generate identical daughter cells without differentiation [32]. Postnatally, the BM is the primary site of HSC maintenance and hematopoiesis, but hematopoietic stress reallocates the niche to the spleen and induces extramedullary hematopoiesis. Although HSCs comprise only about 0.005–0.01% of the BM cell population, each single HSC retains the capability alone to reconstruct the entire hematopoietic system [33].

In AML, leukemia initiating cells (also named LSCs) represent a rare cell population that self-renews and generates an immature progeny invading and perturbing normal hematopoietic tissues [34]. HSCs and LSCs physically and functionally interact with the BM niche [35]. It is demonstrated that both HSCs and LSCs can be extended in vitro for a long time either in environmental conditions that mimic BM support or in coculture with BM stromal cells. These observations reinforce the crucial role that the BM niche, in particular the stroma, plays in healthy and leukemic stem cell homeostasis [5, 36–38]. It is still controversial whether cell-cell contact between hematopoietic stem/progenitor cells (HSPCs) and stromal cells is necessary to promote the hematopoietic cell expansion [39–43]; it is indeed clear that the definition of niche components and how they regulate hematopoiesis will provide the opportunity to improve regeneration after injury or HSC transplantation and to understand how disordered niche function could contribute to diseases, in particular to HMs.

2.2. Mesenchymal Stromal/STEM Cells (MSCs). The International Society for Cellular Therapy reported the minimal criteria for MSC definition: (i) they adhere to plastic under standard culture conditions; (ii) they express CD73, CD90, and CD105; (iii) they lack the expression of CD45, CD34, CD11b or CD14, CD19 or CD79a, and HLA-DR; and (iv) they have the potential to differentiate into the osteogenic, chondrogenic, and adipogenic cell lineages [44, 45]. MSCs
may be isolated from BM, umbilical cord, liver, adipose tissue, and multiple dental tissues [46, 47]; here, we will focus on MSCs derived from BM. They maintain long-term, quiescent HSCs through the presentation of surface signals and the secretion of major stemness supportive cytokines such as leukemia inhibitor factor and IL-6 [48, 49].

On the contrary, MSCs from leukemic patients hamper in vitro hematopoietic cell expansion and differentiation. In particular, AML-patient MSCs significantly impair the expansion of human umbilical cord blood CD34⁺ progenitors and limit their differentiation to maintain a stable pool of immature quiescent precursors (CD34⁺ CD38⁻) compared to healthy donor-derived MSCs (hereafter healthy MSCs) [50]. Remarkably, healthy MSCs maintain AML patient blasts in a quiescent state resulting in increased leukemic survival after treatment with cytarabine [51]. Overall, MSCs have a functional role in the regulation of the BM microenvironment, in particular by influencing the immune system and angiogenesis and in supporting hematopoiesis [52–55] and, consequently, they are widely used in allogeneic hematopoietic stem cell transplantation [56, 57].

However, much work remains in defining the relationship between MSCs, HSCs, and other niche cells, especially on how they interact with each other and how these interactions regulate the hematopoiesis. Uncovering how the microenvironment participates in normal and HM progression will enhance new approaches to hematological disorders.

3. Extracellular Vesicles

On the basis of biophysical properties (i.e., size and shape) and the mechanism of biogenesis, EVs are classified into Exo, MVs, apoptotic bodies, and oncosomes [58, 59].

Exo are the smallest EVs (20–150 nm) that are generated inside multivesicular bodies which are secreted after their fusion with the plasma membrane [60, 61]. They show a higher rigidity of their lipid bilayer compared with that of cell membranes, making them resistant to degradation and useful as vehicle of different biomolecules. The formation and the release of Exo take place through both endosomal sorting complex required for transport-dependent or -independent mechanisms [60, 61].

MVs enclose EVs with a more heterogeneous size (50–1000 nm) that are generated inside multivesicular bodies which are secreted after their fusion with the plasma membrane [60, 61]. They show a higher rigidity of their lipid bilayer compared with that of cell membranes, making them resistant to degradation and useful as vehicle of different biomolecules. The formation and the release of Exo take place through both endosomal sorting complex required for transport-dependent or -independent mechanisms [60, 61].

Apoptotic bodies are membrane blebs that are released during cell apoptosis [62] with a diameter ranging between 50 nm and 5 μm, contain DNA binding histones, and are depleted in glycoproteins [63, 64].

Lastly, oncosomes are the largest EVs (1–10 μm in size) produced by membrane protrusions of malignant cells that lug bioactive molecules involved in the progression of cancer [64, 65].

The release of EVs from donor cells can be constitutive or be induced in response to activation or stress signals [64], including glucose and intracellular Ca²⁺ concentrations, oxygen tension, and microenvironmental pH [66]. Interestingly, EVs contain cargos of diverse nature including nucleic acids (i.e., mRNA, noncoding RNA such as miRNA, transferRNA, and genomic and mitochondrial DNA), cytosolic and membrane proteins, lipids, cellular organelles like mitochondria [67, 68], and metabolites [69, 70]. Interestingly, some databases such as EVpedia, Vesiclepedia, and ExoCarta collect the currently known components of EVs [71–73].

Notwithstanding, the content of EVs generally reflects the nature and the status of the donor cell: EVs could be enriched or depleted of specific materials with respect to origin cells [64, 74]. Likewise, EV cargo nature and abundance are also influenced by the pathways that lead to the formation of different EV subtypes [75].

The total cargo of human MSC-EVs is recently defined by next generation sequencing and proteomic analyses. They are enriched in proteins that support tumor (PDGFR-β, TIMP-1, and TIMP-2), lipids (sphingomyelin and diacyl-glycerol), metabolites (glutamic and lactic acid), several oncomiRNAs (miRNA21 and miRNA34a) [76], critical surface markers, and signalling molecules characteristic of MSCs [77]. A recent work reports that BM-MSC-Exo are highly enriched in transferRNAs that represent more than 35% of the total small RNAs, while miRNAs account for only 2–5% [78]. This composition differs in MSC-Exo released from other tissues. In addition, BM-MSC-EVs contain a pattern of miRNAs essential for the metabolism, proliferation, differentiation, and homing of SCs [79]. Additionally, different chemokines, such as MCP-1, IP-10, and SDF-1, are found in BM-MSC-Exo in multiple myeloma (MM) [62]. These chemokines are important in supporting MM cell viability.

3.1. EV Uptake from Recipient Cells. Once released, EVs reach recipient cells where they exert pleiotropic effects through distinct signalling cascades via autocrine, paracrine, and juxtacrine feedback loops [80].

EVs can be internalized into recipient cells with different mechanisms including endocytosis, direct cell surface membrane fusion, and a lipid raft-mediated energy-dependent process, or they can remain permanently associated with plasma membrane [81].

Surface molecules, such as integrins or receptors, and microenvironment conditions control the EV uptake by regulating their specific cell tropisms, while EV cargo, released into target cells, alters their composition by inducing phenotypic, functional, and epigenetic modifications [17, 82].

In particular, the specific integrin-mediated adhesion of tumor Exo to specific cell types and organs induces the metastatic niche formation [83]. Similarly, BM dendritic cell Exo are preferentially internalized by splenic conventional dendritic cells, rather than by B-lymphocytes, macrophages, or splenic T cells [84]. Moreover, Exo from mantle cell lymphoma cells are preferentially taken up by themselves while only a minor fraction of Exo was internalized into T-cell leukemia and BM stroma cell lines [85]. The specific cell type uptake of EVs has also been observed in vivo. In fact, human MSC-EVs injected into the blood stream of mice primarily accumulated in the liver, spleen, and in sites of acute kidney injury, where they facilitated injury recovery [86]. Similarly, melanoma-derived Exo accumulated in the lungs, bone, liver,
and spleen and they increased the frequency of metastasis at these sites [87]. Finally, Parolini et al. reported that low pH favors Exo uptake by melanoma cells [88].

4. Role of EVs in Physiological BM Niche

As reported, MSCs are commonly studied as EV donor cells. EVs from BM-MSCs shuttle the selected molecular cargo to recipient cells targeting genes involved in organogenesis, cell survival and differentiation, tissue regeneration, immunomodulation, and angiogenesis [79, 89–91]. Nevertheless, the role of MSC as EV target cells must not be ignored. In fact, EVs derived from differentiated cells are able to modulate the MSC phenotype [92]. In particular, miRNA contained in EVs released from neuronal [93], endothelial [94–96], and kidney epithelial [97] cells induce proliferation, migration, and secretion of soluble factors in MSCs.

Immune cells, such as monocytes, use EVs to communicate with MSCs modulating their phenotype by upregulating osteogenic gene expression [98]. In fact, Ekström et al. demonstrated that both RUNX2 and BMP-2 expression is significantly increased in MSCs after monocyte-EV stimulation, whereas no significant difference is observed in osteocalcin [99], an osteoblastic gene regulated by BMP-2 via RUNX2 [100].

Regarding the hematopoietic system, Ratajczak et al. demonstrated that, besides coagulation, MVs derived from activated platelets play a role in important biological processes. In particular, these last enhance the chemotactic responsiveness of HSPCs, and increase their survival and proliferation by transferring specific mRNA and proteins [101].

In another study, the same authors reported that EVs released from embryonic SCs sustain HSPC stemness and multipotency by delivering specific “stemness” miRNAs [101].

More recently, it was demonstrated that mRNA and miRNA in mast cell EVs have been transferred to CD34+ progenitors. In fact, Ekström et al. identified, by using miRNA microarray analysis, 116 miRNAs in Exo and 134 in donor mast cells. Furthermore, microarray experiments revealed the presence of approximately 1800 mRNA in Exo, which represent 15% of the donor cell mRNA content. Transfer experiments reveal that Exo could shuttle RNA between human mast cells and CD34+ hematopoietic progenitor cells suggesting their role in cell communication [102].

A recent discovery showed that stromal cells release biologically active EVs which act on HSPCs. Specifically, two murine stromal cell lines, one with and the other without HSPC supportive capacity, produce different EV types in terms of size and of small RNA and mRNA signature. Lin−Sca1−cKit−HSPCs preferentially take up EVs produced by a supportive stromal line (suppEVs) but not those released by a nonsupportive one. SuppEVs transfer mRNA and miRNA in Lin−Sca1−cKit−HSPCs by modifying their gene expression profile. Importantly, suppEVs maintain the survival and clonogenic potential of Lin−Sca1−cKit−HSPC by inhibiting their apoptosis [103]. Collectively, these data assert that EVs constitute an important novel communication system in mediating the HSPC-supporting capacity of MSCs.

5. EV Role in BM Niche of Hematological Malignancies

It is now clear that BM cell populations, including malignant cells, influence the tumor microenvironment, via autocrine [104] or paracrine mechanisms through the secretion of soluble factors including EVs [105]. In HMs, neoplastic EVs promote tumor progression via an autocrine loop which includes interacting with their producing malignant cells, supporting autosustainability, and increasing aggressiveness [58, 105]. This relevant cross-talk mechanism is clearly demonstrated in MM [106], in pre-B acute lymphoblastic leukemia [107], in erythromyeloblastoid, and CML [108].

EVs from resistant neoplastic cells can transfer drug resistance to sensitive cells in AML [109, 110]. In particular, EVs from apoptosis-resistant AML cells modulate the expression of apoptosis-associated proteins in chemotherapy sensitive blasts [109]. A multiresistant AML cell line transfers, through EVs, chemoresistance to sensitive acute promyelocytic leukemia cells [110].

BM-MSC derived EVs induce survival, proliferation, and migration of MM cells in vitro and in vivo in a mouse model [111, 112]. Finally, Exo from AML MSCs and not from healthy MSCs protected a leukemic cell line carrying FLT3 internal tandem duplication from treatment with a specific FLT3 inhibitor [113].

HM-EVs exert also the immune modulation effects; malignant EVs inhibit natural killer cell cytotoxicity, promote T cell apoptosis, and enhance immunosuppressive activity of myeloid-derived suppressor cells in vitro and in vivo. These EV effects are reported in B and T cell lymphomas [114, 115], CLL [116], AML [117], and MM [62, 118, 119]. Overall these data support the idea that there is indeed a complex and intriguing EV-mediated cross talk between malignant cells and BM cells that defines a favorable neoplastic microenvironment. In this context, we summarize the role of HM niche EVs on SCs and MSCs in Figure 1.

5.1. HM Niche EVs versus SCs. Different studies reported that Exo released from AML cell lines impair hematopoiesis by suppressing HSPC clonogenicity and by reprogramming stroma [120, 121]. According to Razmkhah et al., BM-AML-MVs promote the survival of healthy HSCs by inducing leukemic molecular characteristics, like high level of miRNA21 and miRNA29 [122]. Interestingly, an essential role of VPS33B in Exo pathways in HSCs and in leukemia development at early stage was demonstrated. In fact, its deletion in an in vivo AML model impairs the maturation and secretion of Exo and delays the AML onset [123]. Interestingly, MVs released from LSCs enhance proliferation, migration, and inhibition of apoptosis of AML cells. LSC-MVs containing a high level of miRNA34a inhibits the effects of LSCs on AML cells [124, 125].

Muntion et al. suggested that MVs derived from MSCs of MDS patients modify CD34+ cell properties, promoting their cell viability and clonogenic capacity and altering their miRNA and gene expression profiling [126].
EVs released by myeloproliferative neoplastic MSCs, enriched in miRNA155, induce an increase of granulocyte colony forming unit number in neoplastic CD34+ cells [127]. Collectively the reported studies show that the leuke-mia niche, in terms of LCSs and MSCs, is able to deregulate normal HSCs and neoplastic cells by EV-mediated communication.

5.2. HM Niche EVs versus MSCs. In the tumor context, MSC-EVs have a controversial role: they can promote or inhibit the tumor progression. These opposite effects of MSC-EVs can likely depend from both MSC source and culture conditions [128–130].

In general, EVs from healthy cells have a beneficial effect on recipient cells; on the contrary, EVs from cancer cells, have a detrimental influence also on MSCs [131]. MSCs exposed to tumor EVs acquire a series of functions such as migration to the tumor site [54, 132], production of proinflammatory cytokines [133], induction of metastatic niches [134, 135], promotion of tumor growth in vivo [130], epithelial-to-mesenchymal transition induction [136, 137], recruitment of neoplastic cells in the BM [138], improvement of angiogenesis [139, 140], and modulation of the immune system [141–143].

Intriguingly, the crosstalk between tumor cells and MSCs seems to occur with a certain sequence: tumor cells, through EVs, communicate and modify MSCs; these reprogrammed MSCs, in response, produce EVs that can return on cancer cells or other cells creating a favorable environment for tumor [144, 145].

In HMs, less is known about the effect of neoplastic EVs on MSCs.

In CLL, Ghosh et al. found that MVs play an important role in the activation of the microenvironment in favor of disease progression [146]. CLL-MVs can activate the AKT signaling pathway in BM-MSCs by inducing the production of vascular endothelial growth factor, an important element for CLL cell survival [147]. In addition, Paggetti et al. demonstrated that CLL-derived Exo induce an inflammatory phenotype in endothelial cells and MSCs resembling the phenotype of cancer-associated fibroblasts [148]. In this way, leukemic Exo create a favorable environment for promoting CLL progression.

Exo derived from adult T-cell leukemia/lymphoma cells induce changes in cellular morphology and promote proliferation in MSCs by transferring epigenetic regulators, like miRNA21 and miRNA155 [149].

Horiguchi et al. found that EV miRNA7977 derived from AML/MDS CD34+ cells, is transferred into BM-MSCs where it reduces the poly binding protein 1 levels by compromising their ability to support CD34+ cells [150]. Huan et al. studied the role of Exo in developing the BM AML niche [151]. They
reported that leukemic Exo are taken up by BM stroma. These Exo deliver important AML pathogenesis miRNAs such as miRNA150 which binds the receptor for SDF-1 and CXCR4 mRNA. Consequently, these Exo reduce the expression of CXCR4 and thus cell migration versus SDF-1 of target cells. The CXCR4/SDF-1 axis is fundamental for HSPC retention in BM and their di- 

In order to render more transparent the field of EVs, an EV-TRACK platform is created to collect biological and technical information of EVs [155]. Further studies are needed to clarify not only the mechanism of action of EVs in disease and health, but also to define EV population-specific identity and cell origin, and the standardization of protocols for their isolation and characterization.

**Conflicts of Interest**

The authors declare no conflicts of interest.

**References**

1. C. J. Eaves, "Hematopoietic stem cells: concepts, definitions, and the new reality," *Blood*, vol. 125, no. 17, pp. 2605–2613, 2015.
2. S. J. Morrison and D. T. Scadden, “The bone marrow niche for haematopoietic stem cells,” *Nature*, vol. 505, no. 7483, pp. 327–334, 2014.
3. A. Sánchez-Aguilera and S. Méndez-Ferrer, "The hematopoietic stem-cell niche in health and leukemia," *Cellular and Molecular Life Sciences*, vol. 74, no. 4, pp. 579–590, 2017.
4. K. Schepers, T. B. Campbell, and E. Passegué, "Normal and leukemic stem cell niches: insights and therapeutic opportunities," *Cell Stem Cell*, vol. 16, no. 3, pp. 254–267, 2015.
5. E. Griessinger, F. Anjos-Afonso, I. Pizzitola et al., "A niche-like culture system allowing the maintenance of primary human acute myeloid leukemia-initiating cells: a new tool to decipher their chemoresistance and self-renewal mechanisms," *Stem Cells Translational Medicine*, vol. 3, no. 4, pp. 520–529, 2014.
6. D. Bonnet and J. E. Dick, "Human acute myeloid leukemia is organized as a hierarchy that originates from a primitive hematopoietic cell," *Nature Medicine*, vol. 3, no. 7, pp. 730–737, 1997.
7. R. Zagozdzon and J. Golab, "Review. Cancer stem cells in haematological malignancies," *Współczesna Onkologia*, vol. 1-A, pp. 1–6, 2015.
8. C. Lawson, D. Kovacs, E. Finding, E. Ulfelder, and V. Luis-Fuentes, "Extracellular vesicles: evolutionarily conserved mediators of intercellular communication," *Yale Journal of Biology and Medicine*, vol. 90, no. 3, pp. 481–491, 2017.
9. C. F. Ruivo, B. Adem, M. Silva, and S. A. Melo, "The biology of cancer exosomes: insights and new perspectives," *Cancer Research*, vol. 77, no. 23, pp. 6480–6488, 2017.
10. L. De Luca, G. D’Arena, V. Simeon et al., "Characterization and prognostic relevance of circulating microvesicles in chronic lymphocytic leukemia," *Leukemia & Lymphoma*, vol. 58, no. 6, pp. 1424–1432, 2017.
11. T. L. Whiteside, "Extracellular vesicles isolation and their biomarker potential: are we ready for testing?," *Annals of Translational Medicine*, vol. 5, no. 3, pp. 54–54, 2017.
12. L. Han, J. Xu, Q. Xu, B. Zhang, E. W.-F. Lam, and Y. Sun, "Extracellular vesicles in the tumor microenvironment: therapeutic resistance, clinical biomarkers, and targeting strategies," *Medicinal Research Reviews*, vol. 37, no. 6, pp. 1318–1349, 2017.
13. M. Nawaz and F. Fatima, "Extracellular vesicles, tunneling nanotubes, and cellular interplay: synergies and missing links," *Frontiers in Molecular Biosciences*, vol. 4, 2017.
[14] Y. Yuana, A. Sturk, and R. Nieuwland, “Extracellular vesicles in physiological and pathological conditions,” Blood Reviews, vol. 27, no. 1, pp. 31–39, 2013.

[15] A. Becker, B. K. Thakur, J. M. Weiss, H. S. Kim, H. Peinado, and D. Lyden, “Extracellular vesicles in cancer: cell-to-cell mediators of metastasis,” Cancer Cell, vol. 30, no. 6, pp. 836–848, 2016.

[16] M. Tkach and C. Théry, “Communication by extracellular vesicles: where we are and where we need to go,” Cell, vol. 164, no. 6, pp. 1226–1232, 2016.

[17] H. Zhao, A. Achreja, E. Iessi et al., “The key role of extracellular vesicles in the metastatic process,” Biochimica et Biophysica Acta (BBA) - Reviews on Cancer, vol. 1869, no. 1, pp. 64–77, 2018.

[18] M. Yáñez-Mó, P. R.-M. Siljander, Z. Andreu et al., “Extracellular vesicles: satellites of information transfer in cancer development,” Frontiers in Cell and Development Biology, vol. 4, 2016.

[19] L. Kordelas, V. Rebmann, A.-K. Ludwig et al., “MSC-derived exosomes: a novel tool to treat therapy-refractory graft-versus-host disease,” Leukemia, vol. 28, no. 4, pp. 970–973, 2014.

[20] W. Nassar, M. El-Ansary, D. Sabry et al., “Umbilical cord mesenchymal stem cells derived extracellular vesicles can safely ameliorate the progression of chronic kidney diseases,” Biomaterials Research, vol. 20, no. 1, p. 21, 2016.

[21] J. Isern, B. Martín-Antonio, R. Ghazanfari et al., “Establishing long-term cultures with self-renewing acute myeloid leukemia stem/progenitor cells,” Experimental Hematology, vol. 35, no. 10, pp. 1538–1549, 2007.

[22] M. Zöller, “CD44, Hyaluronan, the hematopoietic stem cell, and leukemia-initiating cells,” Frontiers in Immunology, vol. 6, p. 235, 2015.

[23] S. Wasnik, S. Kantipudi, M. A. Kirkland, and G. Pande, “Enhanced ex vivo expansion of human hematopoietic progenitors on native and spin coated acellular matrices prepared from bone marrow stromal cells,” Stem Cells International, vol. 2016, Article ID 1073140, 13 pages, 2016.

[24] T. Waland, G. Boekermann, M. S. Ventura Ferreira et al., “Synergistic effects of growth factors and mesenchymal stromal cells for expansion of hematopoietic stem and progenitor cells,” Experimental Hematology, vol. 39, no. 6, pp. 617–628, 2011.

[25] J. Isern, B. Martín-Antonio, R. Ghazanfari et al., “Self-renewing human bone marrow mesenchromespheres promote hematopoietic stem cell expansion,” Cell Reports, vol. 3, no. 5, pp. 1714–1724, 2013.
Cellular Therapy position statement," Cytotherapy, vol. 7, no. 5, pp. 393–395, 2005.

[45] M. Dominici, K. Le Blanc, I. Mueller et al., “Minimal criteria for defining multipotent mesenchymal stromal cells. The International Society for Cellular Therapy position statement,” Cytotherapy, vol. 8, no. 4, pp. 315–317, 2006.

[46] I. R. Murray and B. Peault, “Q&A: mesenchymal stem cells—where do they come from and is it important?,” BMC Biology, vol. 13, p. 99, 2015.

[47] W. Wagner, F. Wein, and A. Seckinger et al., “Comparative characteristics of mesenchymal stem cells from human bone marrow, adipose tissue, and umbilical cord blood,” Experimental Hematology, vol. 33, no. 11, pp. 1402–1416, 2005.

[48] L. M. Calvi, G. B. Adams, K. W. Weibrecht et al., “Osteoblastic cells regulate the haematopoietic stem cell niche,” Nature, vol. 425, no. 6960, pp. 841–846, 2003.

[49] F. Arai, A. Hirao, M. Ohmura et al., “Tie2/Angiopoietin-I signaling regulates hematopoietic stem cell quiescence in the bone marrow niche,” Cell, vol. 118, no. 2, pp. 149–161, 2004.

[50] P. Chandran, Y. Le, Y. Li et al., “Mesenchymal stromal cells from patients with acute myeloid leukemia have altered capacity to expand differentiated hematopoietic progenitors,” Leukemia Research, vol. 39, no. 4, pp. 486–493, 2015.

[51] S. Ito, A. J. Barrett, A. Dutra et al., “Long term maintenance of myeloid leukemic stem cells cultured with unrelated human mesenchymal stromal cells,” Stem Cell Research, vol. 14, no. 1, pp. 95–104, 2015.

[52] Q. Zhao, H. Ren, and Z. Han, “Mesenchymal stem cells: immunomodulatory capability and clinical potential in immune diseases,” Journal of Cellular Immunotherapy, vol. 2, no. 1, pp. 3–20, 2016.

[53] S. M. Watt, F. Gullo, M. van der Garde et al., “The angiogenic properties of mesenchymal stem/stromal cells and their therapeutic potential,” British Medical Bulletin, vol. 108, no. 1, pp. 25–53, 2013.

[54] B. A. Anthony and D. C. Link, “Regulation of hematopoietic stem cells by bone marrow stromal cells,” Trends in Immunology, vol. 35, no. 1, pp. 32–37, 2014.

[55] Y. Kfoury and D. T. Scadden, “Mesenchymal stem cell contributions to the stem cell niche,” Cell Stem Cell, vol. 16, no. 3, pp. 239–253, 2015.

[56] M. J. Hoogduijn and F. J. M. F. Dor, “Mesenchymal stem cells in transplantation and tissue regeneration,” Frontiers in Immunology, vol. 2, p. 84, 2011.

[57] K. Zhao and Q. Liu, “The clinical application of mesenchymal stromal cells in hematopoietic stem cell transplantation,” Journal of Hematology & Oncology, vol. 9, no. 1, p. 46, 2016.

[58] A. Caivano, L. Del Vecchio, and P. Musto, “Do we need to distinguish exosomes from microvesicles in hematological malignancies?,” Leukemia, vol. 31, no. 9, pp. 2009–2010, 2017.

[59] G. Raposo and W. Stoorvogel, “Extracellular vesicles: exosomes, microvesicles, and friends,” Journal of Cell Biology, vol. 200, no. 4, pp. 373–383, 2013.

[60] A. A. Farooqi, N. N. Desai, M. Z. Qureshi et al., “Exosome biogenesis, bioactivities and functions as new delivery systems of natural compounds,” Biotechnology Advances, vol. 36, no. 1, pp. 328–334, 2018.

[61] N. P. Hessvik and A. Llorente, “Current knowledge on exosome biogenesis and release,” Cellular and Molecular Life Sciences, vol. 75, no. 2, pp. 193–208, 2018.

[62] J. Wang, S. Faikt, K. Maes et al., “Extracellular vesicle cross-talk in the bone marrow microenvironment: implications in multiple myeloma,” Oncotarget, vol. 7, no. 25, pp. 38927–38945, 2016.

[63] C. Lynch, M. Panagopoulos, and C. D. Gregory, “Extracellular vesicles arising from apoptotic cells in tumors: roles in cancer pathogenesis and potential clinical applications,” Frontiers in Immunology, vol. 8, article 1174, 2017.

[64] M. P. Zaborowska, L. Balaj, X. O. Breakefield, and C. P. Lai, “Extracellular vesicles: composition, biological relevance, and methods of study,” Bioscience, vol. 65, no. 8, pp. 783–797, 2015.

[65] B. Meehan, J. Rak, and D. Di Vizio, “Oncosomes—large and small: what are they, where they came from?,” Journal of Extracellular Vesicles, vol. 5, no. 1, article 33109, 2016.

[66] W. Guo, Y. Gao, N. Li et al., “Exosomes: new players in cancer,” Oncology Reports, vol. 38, no. 2, pp. 665–675, 2017.

[67] A. M. Falchi, V. Sogos, S. F. M. Piras, T. Congiu, and M. Piludu, “Astrocytes shed large membrane vesicles that contain mitochondria, lipid droplets and ATP,” Histochemistry and Cell Biology, vol. 139, no. 2, pp. 221–231, 2013.

[68] E. Griessinger, R. Moschoi, G. Biondani, and J.-F. Peyron, “Mitochondrial transfer in the leukemia microenvironment,” Trends in Cancer, vol. 3, no. 12, pp. 828–839, 2017.

[69] M. Puhka, M. Takatalo, M.-E. Nordberg et al., “Metabolomic profiling of extracellular vesicles and alternative normalization methods reveal enriched metabolites and strategies to study prostate cancer-related changes,” Theranostics, vol. 7, no. 16, pp. 3824–3841, 2017.

[70] L. B. Sullivan, “Extracellular vesicles: taking metabolism on the road,” Nature Chemical Biology, vol. 13, no. 9, pp. 924–925, 2017.

[71] D.-K. Kim, J. Lee, S. R. Kim et al., “EVpedia: a community web portal for extracellular vesicles research,” Bioinformatics, vol. 31, no. 6, pp. 933–939, 2015.

[72] H. Kalra, R. J. Simpson, H. Ji et al., “Vesiclepedia: a compendium for extracellular vesicles with continuous community annotation,” PLoS Biology, vol. 10, no. 12, article e1001450, 2012.

[73] S. Keerthikumar, D. Chisanga, D. Arumya et al., “ExoCarta: a web-based compendium of exosomal cargo,” Journal of Molecular Biology, vol. 428, no. 4, pp. 688–692, 2016.

[74] V. Dozio and J.-C. Sanchez, “Characterisation of extracellular vesicle-subsets derived from brain endothelial cells and analysis of their protein cargo modulation after TNF exposure,” Journal of Extracellular Vesicles, vol. 6, no. 1, article 1302705, 2017.

[75] V. R. Miniaciachi, M. R. Freeman, and D. Di Vizio, “Extracellular vesicles in cancer: exosomes, microvesicles and the emerging role of large oncosomes,” Seminars in Cell & Developmental Biology, vol. 40, pp. 41–51, 2015.

[76] K. C. Vallabhaneni, P. Penfornis, S. Dhule et al., “Extracellular vesicles from bone marrow mesenchymal stem/stromal cells transport tumor regulatory microRNA, proteins, and metabolites,” Oncotarget, vol. 6, no. 7, pp. 4953–4967, 2015.

[77] H.-S. Kim, D.-Y. Choi, S. J. Yun et al., “Proteomic analysis of microvesicles derived from human mesenchymal stem cells,” Journal of Proteome Research, vol. 11, no. 2, pp. 839–849, 2012.

[78] S. R. Baglio, K. Rooijers, D. Koppers-Lalic et al., “Human bone marrow- and adipose-mesenchymal stem cells secrete
exosomes enriched in distinctive miRNA and tRNA species,”
Stem Cell Research & Therapy, vol. 6, no. 1, p. 127, 2015.

[79] F. Collino, M. C. Deregibus, S. Bruno et al., “Microvesicles derived from adult human bone marrow and tissue specific mesenchymal stem cells shuttle selected pattern of miRNAs,” PLoS One, vol. 5, no. 7, article e11803, 2010.

[80] S. K. Gopal, D. W. Greening, A. Rai et al., “Extracellular vesicles: their role in cancer biology and epithelial-mesenchymal transition,” Biochemical Journal, vol. 474, no. 1, pp. 21–45, 2016.

[81] I. Prada and J. Meldolesi, “Binding and fusion of extracellular vesicles to the plasma membrane of their cell targets,” International Journal of Molecular Sciences, vol. 17, no. 8, p. 1296, 2016.

[82] D. Choi, T. H. Lee, C. Spinelli, S. Chennakrishnaiah, E. D’Asti, and J. Rak, “Extracellular vesicle communication pathways as regulatory targets of oncogenic transformation,” Seminars in Cell & Developmental Biology, vol. 67, pp. 11–22, 2017.

[83] A. Hoshino, B. Costa-Silva, T.-L. Shen et al., “Tumour exosome integrins determine organotropic metastasis,” Nature, vol. 527, no. 7578, pp. 329–335, 2015.

[84] A. Montecalvo, A. T. Larregina, W. J. Shufesky et al., “Mechanism of transfer of functional microRNAs between mouse dendritic cells via exosomes,” Blood, vol. 119, no. 3, pp. 756–766, 2012.

[85] I. Hazan-Haley, D. Rosenblum, S. Weinstein, O. Barrey, P. Raanani, and D. Peer, “Cell-specific uptake of mantle cell lymphoma-derived exosomes by malignant and non-malignant B-lymphocytes,” Cancer Letters, vol. 364, no. 1, pp. 59–69, 2015.

[86] C. Grange, M. Tapparo, S. Bruno et al., “Biodistribution of mesenchymal stem cell-derived extracellular vesicles in a model of acute kidney injury monitored by optical imaging,” International Journal of Molecular Medicine, vol. 33, no. 5, pp. 1055–1063, 2014.

[87] H. Peinado, M. Aleckovic, S. Lavotshkin et al., “Melanoma exosomes educate bone marrow progenitor cells toward a pro-metastatic phenotype through MET,” Nature Medicine, vol. 18, no. 6, pp. 883–891, 2012.

[88] I. Parolini, C. Federici, C. Raggi et al., “Microenvironmental pH is a key factor for exosome traffic in tumor cells,” Journal of Biological Chemistry, vol. 284, no. 49, pp. 34211–34222, 2009.

[89] L. De Luca, S. Trino, I. Laurenzana et al., “miRNAs and pI RNAs from bone marrow mesenchymal stem cell extracellular vesicles induce cell survival and inhibit cell differentiation of cord blood hematopoietic stem cells: a new insight in transplantation,” Oncotarget, vol. 7, no. 6, pp. 6676–6692, 2016.

[90] F. Fatima, K. Ekstrom, I. Nazarenko et al., “Non-coding RNAs in mesenchymal stem cell-derived extracellular vesicles: deciphering regulatory roles in stem cell potency, inflammatory resolve, and tissue regeneration,” Frontiers in Genetics, vol. 8, p. 161, 2017.

[91] V. Börger, M. Bremer, R. Ferrer-Tur et al., “Mesenchymal stem/stromal cell-derived extracellular vesicles and their potential as novel immunomodulatory therapeutic agents,” International Journal of Molecular Sciences, vol. 18, no. 7, p. 1450, 2017.

[92] G. Dostert, B. Mesure, P. Menu, and E. Velot, “How do mesenchymal stem cells influence or are influenced by microenvironment through extracellular vesicles communication?,” Frontiers in Cell and Development Biology, vol. 5, p. 6, 2017.

[93] Y. S. Takeda and Q. Xu, “Neuronal differentiation of human mesenchymal stem cells using exosomes derived from differentiating neuronal cells,” PLoS One, vol. 10, no. 8, article e0135111, 2015.

[94] T. P. Lozito and R. S. Tuan, “Endothelial and cancer cells interact with mesenchymal stem cells via both microparticles and secreted factors,” Journal of Cellular and Molecular Medicine, vol. 18, no. 12, pp. 2372–2384, 2014.

[95] Y. J. Kim, H. K. Kim, H. H. Cho, Y. C. Bae, K. T. Suh, and J. S. Jung, “Direct comparison of human mesenchymal stem cells derived from adipose tissues and bone marrow in mediating neovascularization in response to vascular ischemia,” Cellular Physiology and Biochemistry, vol. 20, no. 6, pp. 867–876, 2007.

[96] K. L. Pricola, N. Z. Kuhn, H. Haleem-Smith, Y. Song, and R. S. Tuan, “Interleukin-6 maintains bone marrow-derived mesenchymal stem cell stemness by an ERK1/2-dependent mechanism,” Journal of Cellular Biochemistry, vol. 108, no. 3, pp. 577–588, 2009.

[97] G. Chiabotto, S. Bruno, F. Collino, and G. Camussi, “Mesenchymal stromal cells epithelial transition induced by renal tubular cells-derived extracellular vesicles,” PLoS One, vol. 11, no. 7, article e0159163, 2016.

[98] O. M. Omar, C. Granéli, K. Ekström et al., “The stimulation of an osteogenic response by classical monocyte activation,” Biomaterials, vol. 32, no. 32, pp. 8190–8204, 2011.

[99] K. Ekström, O. Omar, C. Granéli, X. Wang, F. Vazirzisani, and P. Thomsen, “Monocyte exosomes stimulate the osteogenic gene expression of mesenchymal stem cells,” PLoS One, vol. 8, no. 9, article e75227, 2013.

[100] W.-G. Jang, E.-J. Kim, D.-K. Kim et al., “BMP2 protein regulates osteocalcin expression via Runx2-mediated Atf6 gene transcription,” Journal of Biological Chemistry, vol. 287, no. 2, pp. 905–915, 2012.

[101] J. Ratajczak, M. Wysoczynski, F. Hayek, A. Janowska-Wieczorek, and M. Z. Ratajczak, “Membrane-derived microvesicles: important and underappreciated mediators of cell-to-cell communication,” Leukemia, vol. 20, no. 9, pp. 1487–1495, 2006.

[102] K. Ekström, H. Valadí, M. Sjöstrand et al., “Characterization of miRNA and microRNA in human mast cell-derived exosomes and their transfer to other mast cells and blood CD34 progenitor cells,” Journal of Extracellular Vesicles, vol. 1, no. 1, article 18389, 2012.

[103] G. Stik, S. Crequitt, L. Petit et al., “Extracellular vesicles of stromal origin target and support hematopoietic stem and progenitor cells,” Journal of Cell Biology, vol. 216, no. 7, pp. 2217–2230, 2017.

[104] G. Piro, C. Carbone, I. Cataldo et al., “An FGFR3 autocrine loop sustains acquired resistance to trastuzumab in gastric cancer patients,” Clinical Cancer Research, vol. 22, no. 24, pp. 6164–6175, 2016.

[105] A. Caivano, F. La Rocca, I. Laurenzana et al., “Extracellular vesicles in hematological malignancies: from biology to therapy,” International Journal of Molecular Sciences, vol. 18, no. 6, p. 1183, 2017.

[106] B. K. Arendt, D. K. Walters, X. Wu, R. C. Tschumper, and D. F. Jelinek, “Multiple myeloma cell-derived microvesicles
are enriched in CD147 expression and enhance tumor cell proliferation,” *Oncotarget*, vol. 5, no. 14, pp. 5686–5699, 2014.

[107] X.-H. Wu, "Leukemia-derived exosomes induce paracrine and autocrine cell proliferation in pediatric ALL,” in *Proceedings of the 58th ASH Annual Meeting and Exposition*, p. 4080, San Diego, CA, USA, December 2016.

[108] G. Milani, T. Lana, S. Bresolin et al., “Expression profiling of circulating microvesicles reveals intercellular transmission of oncogenic pathways,” *Molecular Cancer Research*, vol. 15, no. 6, pp. 683–695, 2017.

[109] A. Wojtuszkiewicz, G. J. Schuurhuis, F. L. Kessler et al., “Exosomes secreted by apoptosis-resistant acute myeloid leukemia (AML) blasts harbor regulatory network proteins potentially involved in antagonism of apoptosis,” *Molecular & Cellular Proteomics*, vol. 15, no. 4, pp. 1281–1298, 2016.

[110] C. Bouvy, A. Wannez, J. Laloy, Ch. Chatelain, and J.-M. Dogné, “Transfer of multidrug resistance among acute myeloid leukemia cells via extracellular vesicles and their microRNA cargo,” *Leukemia Research*, vol. 62, pp. 70–76, 2017.

[111] A. M. Roccaro, A. Sacco, P. Maiso et al., “BM mesenchymal stromal cell-derived exosomes facilitate multiple myeloma progression,” *The Journal of Clinical Investigation*, vol. 123, no. 4, pp. 1542–1555, 2013.

[112] L. Raimondi, A. De Luca, N. Amadio et al., “Involvement of multiple myeloma cell-derived exosomes in osteoclast differentiation,” *Oncotarget*, vol. 6, no. 15, pp. 13772–13789, 2015.

[113] S. Viola, E. Traer, J. Huan et al., “Alterations in acute myeloid leukemia bone marrow stromal cell exosome content coincide with gains in tyrosine kinase inhibitor resistance,” *British Journal of Haematology*, vol. 172, no. 6, pp. 983–986, 2016.

[114] Y. Xie, H. Zhang, W. Li et al., “Dendritic cells recruit T cell exosomes via exosomal LFA-1 leading to inhibition of CD8+ CTL responses through downregulation of peptide/MHC class I and Fas ligand-mediated cytotoxicity,” *The Journal of Immunology*, vol. 185, no. 9, pp. 5268–5278, 2010.

[115] M. Hedlund, O. Nagaeva, D. Kargl, V. Baranov, and L. Minceva-Nilsson, “Thermal- and oxidative stress causes enhanced release of NGK2D ligand-bearing immunosuppressive exosomes in leukemia/lymphoma T and B cells,” *PLoS One*, vol. 6, no. 2, article e16899, 2011.

[116] K. S. Reiners, D. Topolar, A. Henke et al., “Soluble ligands for NK cell receptors promote evasion of chronic lymphocytic leukemia cells from NK cell anti-tumor activity,” *Blood*, vol. 121, no. 18, pp. 3658–3665, 2013.

[117] C.-S. Hong, L. Muller, T. L. Whiteside, and M. Boyiadzis, “Plasma exosomes as markers of therapeutic response in patients with acute myeloid leukemia,” *Frontiers in Immunology*, vol. 5, p. 160, 2014.

[118] J. Wang, K. De Veirman, S. Faict et al., “Multiple myeloma exosomes establish a favourable bone marrow microenvironment with enhanced angiogenesis and immunosuppression,” *The Journal of Pathology*, vol. 239, no. 2, pp. 162–173, 2016.

[119] T. K. Garg, J. I. Gann, P. A. Malaviarachchi et al., “Myeloma-derived exosomes and soluble factors suppress natural killer cell function,” *Proceedings of 58th ASH Annual Meeting and Exposition*, 2066, San Diego, CA, USA, December 2016, 2066.

[120] N. I. Hornick, B. Doron, S. Abdelhamed et al., “AML suppresses hematopoiesis by releasing exosomes that contain microRNAs targeting c-MYB,” *Science Signaling*, vol. 9, no. 444, article ra88, 2016.

[121] J. Huan, N. I. Hornick, N. A. Golovizina et al., “Coordinate regulation of residual bone marrow function by paracrine trafficking of AML exosomes,” *Leukemia*, vol. 29, no. 12, pp. 2285–2295, 2015.

[122] F. Razmkhah, M. Soleimani, D. Mehrabani et al., “Leukemia microvesicles affect healthy hematopoietic stem cells,” *Tumor Biology*, vol. 39, no. 2, article 101042831769223, 2017.

[123] H. Gu, C. Chen, X. Hao et al., “Sorting protein VPS33B regulates exosomal autocrine signaling to mediate hematopoiesis and leukemogenesis,” *The Journal of Clinical Investigation*, vol. 126, no. 12, pp. 4537–4553, 2016.

[124] Y. Wang, Q. Cheng, J. Liu, and M. Dong, “Leukemia stem cell-released microvesicles promote the survival and migration of myeloid leukemia cells and these effects can be inhibited by microRNA34a overexpression,” *Stem Cells International*, vol. 2016, Article ID 9313425, 8 pages, 2016.

[125] S. Trino, D. Lamorte, A. Caivano et al., “MicroRNAs as new biomarkers for diagnosis and prognosis, and as potential therapeutic targets in acute myeloid leukemia,” *International Journal of Molecular Sciences*, vol. 19, no. 2, p. 460, 2018.

[126] S. Muntión, T. L. Ramos, M. Diez-Campello et al., “Microvesicles from mesenchymal stromal cells are involved in HPC-microenvironment crosstalk in myelodysplastic patients,” *PLoS One*, vol. 11, no. 2, article e0146722, 2016.

[127] T. L. Ramos, L. I. Sánchez-Abarca, and B. Rosón, “Extracellular vesicles play an important role in intercellular communication between bone marrow stroma and hematopoietic progenitor cells in myeloproliferative neoplasms,” in *Proceedings of the 58th ASH Annual Meeting and Exposition*, p. 1957, San Diego, CA, USA, December 2016.

[128] T. Lopatina, C. Gai, M. C. Deregibus, and G. Camussi, “Cross talk between cancer and mesenchymal stem cells through extracellular vesicles carrying nucleic acids,” *Frontiers in Oncology*, vol. 6, article 125, 2016.

[129] X. Zhang, H. Tu, Y. Yang, L. Fang, Q. Wu, and J. Li, “Mesenchymal stem cell-derived extracellular vesicles: roles in tumor growth, progression, and drug resistance,” *Stem Cells International*, vol. 2017, Article ID 1758139, 12 pages, 2017.

[130] W. Zhu, L. Huang, Y. Li et al., “Exosomes derived from human bone marrow mesenchymal stem cells promote tumor growth in vivo,” *Cancer Letters*, vol. 315, no. 1, pp. 28–37, 2012.

[131] R. S. Lindoso, F. Collino, and G. Camussi, “Extracellular vesicles derived from renal cancer stem cells induce a pro-tumorigenic phenotype in mesenchymal stromal cells,” *Oncotarget*, vol. 6, no. 10, pp. 7959–7969, 2015.

[132] C. A. Sánchez, E. I. Andahur, R. Valenzuela et al., “Exosomes from bulk and stem cells from human prostate cancer have a differential microRNA content that contributes cooperatively over local and pre-metastatic niche,” *Oncotarget*, vol. 7, no. 4, pp. 3993–4008, 2016.

[133] K. Lee, H. Park, E. H. Lim, and K. W. Lee, “Exosomes from breast cancer cells can convert adipose tissue-derived mesenchymal stem cells into myofibroblast-like cells,” *International Journal of Oncology*, vol. 40, pp. 130–138, 2011.

[134] V. Luga and J. L. Wrana, “Tumor-stroma interaction: revealing fibroblast-secreted exosomes as potent regulators of Wnt-planar cell polarity signaling in cancer metastasis,” *Cancer Research*, vol. 73, no. 23, pp. 6843–6847, 2013.
Stem Cells International

[135] J. D. McBride, L. Rodriguez-Menocal, W. Guzman, A. Candanedo, M. Garcia-Contreras, and E. V. Badiavas, “Bone marrow mesenchymal stem cell-derived CD63+ exosomes transport Wnt3a exteriorly and enhance dermal fibroblast proliferation, migration, and angiogenesis in vitro,” Stem Cells and Development, vol. 26, no. 19, pp. 1384–1398, 2017.

[136] N. Syn, L. Wang, G. Sethi, J.-P. Thiery, and B.-C. Goh, “Exosome-mediated metastasis: from epithelial-mesenchymal transition to escape from immunosurveillance,” Trends in Pharmacological Sciences, vol. 37, no. 7, pp. 606–617, 2016.

[137] S. Shi, Q. Zhang, Y. Xia et al., “Mesenchymal stem cell-derived exosomes facilitate nasopharyngeal carcinoma progression,” American Journal of Cancer Research, vol. 6, no. 2, pp. 459–472, 2016.

[138] R. Narayanan, C.-C. Huang, and S. Ravindran, “Hijacking the cellular mail: exosome-mediated differentiation of mesenchymal stem cells,” Stem Cells International, vol. 2016, Article ID 3808674, 11 pages, 2016.

[139] M. Gong, B. Yu, J. Wang et al., “Mesenchymal stem cells release exosomes that transfer miRNAs to endothelial cells and promote angiogenesis,” Oncotarget, vol. 8, no. 28, pp. 45200–45212, 2017.

[140] J. D. Anderson, H. J. Johansson, C. S. Graham et al., “Comprehensive proteomic analysis of mesenchymal stem cell exosomes reveals modulation of angiogenesis via nuclear factor-KappaB signaling,” Stem Cells, vol. 34, no. 3, pp. 601–613, 2016.

[141] A. Del Fattore, R. Luciano, L. Pascucci et al., “Immuno-regulatory effects of mesenchymal stem cell-derived extracellular vesicles on T lymphocytes,” Cell Transplantation, vol. 24, no. 12, pp. 2615–2627, 2015.

[142] A. Conforti, M. Scarsella, N. Starc et al., “Microvesicles derived from mesenchymal stromal cells are not as effective as their cellular counterpart in the ability to modulate immune responses in vitro,” Stem Cells and Development, vol. 23, no. 21, pp. 2591–2599, 2014.

[143] W. Chen, Y. Huang, J. Han et al., “Immunomodulatory effects of mesenchymal stromal cells-derived exosome,” Immunologic Research, vol. 64, no. 4, pp. 831–840, 2016.

[144] Y. Yang, V. Bucan, H. Baehe, J. Von Der Ohe, A. Otte, and R. Hass, “Acquisition of new tumor cell properties by MSC-derived exosomes,” International Journal of Oncology, vol. 47, no. 1, pp. 244–252, 2015.

[145] H. Haga, I. K. Yan, K. Takahashi, J. Wood, A. Zubair, and T. Patel, ”Tumour cell-derived extracellular vesicles interact with mesenchymal stem cells to modulate the microenvironment and enhance cholangiocarcinoma growth,” Journal of Extracellular Vesicles, vol. 4, no. 1, article 24900, 2015.

[146] A. K. Ghosh, C. R. Secreto, T. R. Knox, W. Ding, D. Mukhopadhyay, and N. E. Kay, “Circulating microvesicles in B-cell chronic lymphocytic leukemia: implications for disease progression,” Blood, vol. 115, no. 9, pp. 1755–1764, 2010.

[147] J. Boysen, M. Nelson, G. Magzoub et al., “Dynamics of microvesicle generation in B-cell chronic lymphocytic leukemia: implication in disease progression,” Leukemia, vol. 31, no. 2, pp. 350–360, 2017.

[148] J. Paggetti, F. Haderk, M. Seiffert et al., “Exosomes released by chronic lymphocytic leukemia cells induce the transition of stromal cells into cancer-associated fibroblasts,” Blood, vol. 126, no. 9, pp. 1106–1117, 2015.