Epigenetic Classification of Human Mesenchymal Stromal Cells

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SUMMARY

Standardization of mesenchymal stromal cells (MSCs) is hampered by the lack of a precise definition for these cell preparations; for example, there are no molecular markers to discern MSCs and fibroblasts. In this study, we followed the hypothesis that specific DNA methylation (DNAm) patterns can assist classification of MSCs. We utilized 190 DNAm profiles to address the impact of tissue of origin, donor age, replicative senescence, and serum supplements on the epigenetic makeup. Based on this, we elaborated a simple epigenetic signature based on two CpG sites to classify MSCs and fibroblasts, referred to as the Epi-MSC-Score. Another two-CpG signature can distinguish between MSCs from bone marrow and adipose tissue, referred to as the Epi-Tissue-Score. These assays were validated by site-specific pyrosequencing analysis in 34 primary cell preparations. Furthermore, even individual subclones of MSCs were correctly classified by our epigenetic signatures. In summary, we propose an alternative concept to use DNAm patterns for molecular definition of cell preparations, and our epigenetic scores facilitate robust and cost-effective quality control of MSC cultures.

INTRODUCTION

Mesenchymal stromal cells (MSCs) are currently tested for a wide range of clinical applications (Squillaro et al., 2015), but there are no precise measures for their quality control. Molecular markers to clearly discern MSCs and fibroblasts remain elusive. The major difference between these two cell types is that particularly MSCs comprise a multipotent subset often referred to as “mesenchymal stem cells” (Dominici et al., 2006). Several surface markers have been suggested for enrichment of MSCs, such as CD106, CD146, and CD271 (Buhring et al., 2007; Halfon et al., 2011; Sorrentino et al., 2008), but none of them seems to be exclusively expressed on MSCs. Proteomics and gene-expression profiles can discern cells that have been obtained from different tissues or under different culture conditions (Holley et al., 2015; Ishii et al., 2005), and high-content screening assays based on microRNA or RNAi can elucidate cell type-specific responses (Bae et al., 2009; Erdmann et al., 2015). However, all these profiling and high-throughput techniques are relatively time and labor consuming, require complex computational analysis, and can hardly be standardized for quality control of MSC preparations.

Cellular differentiation is reflected by specific epigenetic patterns. DNA methylation (DNAm) is the best characterized epigenetic modification, where cytosine guanine dinucleotides (CpGs) are covalently methylated at the cytosine residue (Jaenisch and Bird, 2003). DNAm has several advantages as a biomarker for classification of cell preparations: (1) it is rather stable; (2) it facilitates quantitative analysis at single-nucleotide resolution, and (3) it is directly coupled to cellular differentiation (Karnik and Meissner, 2013). We have recently described that DNAm levels at two CpG sites can reliably discern between pluripotent and non-pluripotent cells (Lenz et al., 2015). In this study, we followed the hypothesis that the DNAm profile of MSCs might also reflect specific modifications that are indicative for the cell type and/or the tissue of origin. Small epigenetic signatures based on site-specific analysis of DNAm in a few CpG sites might therefore be particularly appealing for the classification of MSCs.

RESULTS

Global Comparison of DNA Methylation Profiles

We compiled a well-curated dataset of publicly available DNAm profiles that were generated on the Illumina HumanMethylation BeadChip platforms: 83 DNAm profiles analyzed on 27K BeadChips were used as a training set; and 107 DNAm profiles of 450K BeadChips were used as
independent validation sets (Tables S1 and S2). Therefore, we focused on 25,014 CpGs that were represented by both platforms. Initially, we performed principal-component analysis (PCA) to estimate the impact of cell type (MSCs or fibroblasts), tissue source (bone marrow [BM], adipose tissue [AT], lung, dermis, etc.), age (stratified by 40 years), passage (stratified by P5), or serum supplement (human platelet lysate [hPL] versus fetal calf/bovine serum [FBS]) on the global DNAm patterns. However, none of the major PCA components could clearly classify cell preparations according to these parameters, and there was only a moderate tendency in the comparisons: MSCs versus fibroblasts, and MSCs derived from BM versus AT (Figure S1).

Subsequently, we determined the number of differentially methylated CpGs in pairwise comparisons (adjusted limma t test: p < 0.05 and at least 10% differential DNAm level). This was performed independently for the 27K-BeadChip training and the 450K-BeadChip validation set. To roughly estimate the reproducibility of DNAm differences, we then focused on CpGs with overlapping DNAm changes in both datasets (Figure 1): 346 and 152 CpGs were methylated higher in MSCs and fibroblasts, respectively, indicating that there are reproducible epigenetic differences between the two cell types. Furthermore, 580 and 307 CpGs were differentially methylated in MSCs from BM versus AT. There were hardly any overlapping age-related DNAm differences in samples from younger or older donors, although it has been shown that age-related DNAm patterns persist in MSCs (Frobel et al., 2014; Weidner et al., 2014). This might be due to the classification into two age groups, whereas age-related changes are continuously acquired throughout life. In analogy, we observed only 242 CpGs that were methylated higher at early passages (<P5) compared with late passages (>P5), although many DNAm changes were shown to be continuously hyper- and hypomethylated during culture expansion (Koch et al., 2013). Serum supplements seemed to induce rather few DNAm changes. Taken together, global analysis indicated that particularly cell type and tissue of origin are reflected by specific DNAm changes.

Epigenetic Score for Classification into MSCs and Fibroblasts

To identify CpGs that facilitate the best discrimination of MSCs and fibroblasts in the 27K-BeadChip training set, we selected CpGs with (1) the highest difference in mean DNAm in MSCs versus fibroblasts, and (2) small variation in DNAm levels within each of the two cell types (Figure 2A). Only three and nine CpGs revealed more than 40% higher DNAm levels in MSCs and fibroblasts, respectively (Figure 2B). These CpGs were subsequently plotted against the sum of variances in MSCs and fibroblasts, and thereby we identified four candidate CpGs that were associated with serpin peptidase inhibitor B5 (SERPINB5: cg00226904), chromosome 3 open reading...
frame 35 (C3orf35: cg22286764), cell death-inducing DFFA-like effector C (CIDEC: cg05684195), and adipocyte-specific adhesion molecule (ASAM: cg19096475; Figures 2C and 2D). Iterative pair combinations of these CpGs demonstrated that the difference in DNAm at the CpGs in C3orf35 and CIDEC, subsequently referred to as the
Epi-MSC-Score, could best discern MSCs from fibroblasts: a positive score is indicative of MSCs and 96% of samples were correctly classified in the 27K-BeadChip training set (Figure 2E). We repeated the analysis after resampling the training set with bootstrapping, and the two CpGs were among the top eight stable CpG sites (Supplemental Experimental Procedures). In the independent 450K-BeadChip validation set, all four candidate CpGs revealed the same trend (Figure 2F) and 83% of the samples were classified correctly (Figure 2G). Overall the differences in mean DNAm levels in MSCs versus fibroblasts were smaller in this dataset. However, applying the two aforementioned criteria for selection of relevant CpGs on the 450K dataset demonstrated that the two CpGs in C3orf35 and CIDE C were again among the best performing (data not shown).

We then designed pyrosequencing assays for these two regions to facilitate robust and more quantitative analysis of the DNAm levels at the two relevant CpG sites (Figure S2A). These pyrosequencing assays were tested on 34 primary cell preparations, all of which were correctly classified into MSCs and fibroblasts (Figures 2H and 2I). Gene-expression profiles demonstrated slightly higher expression of C3orf35 and CIDE C in MSCs (Figure S2B). Thus, the Epi-MSC-Score can be used for the classification of MSCs and fibroblasts.

Epigenetic Score to Discern MSCs from Bone Marrow and Adipose Tissue

We extended this analysis to derive an “Epi-Tissue-Score” for discerning MSCs that were initially isolated from either BM or AT, since these tissues are most frequently used for isolation of MSCs (Figure 3A). 29 and 30 CpGs revealed a more than 40% higher mean DNAm level in MSCs from either BM or AT, respectively (Figure 3B). We focused on 12 CpGs with lowest variances within each of these groups, which were associated with: solute carrier family 41 magnesium transporter member 2 (SLC41A2: cg27149093); single-minded family BHLH transcription factor 2 (SIM2: cg02672220); four and a half LIM domains 2 (FHL2: cg10635061); transmembrane 4 six family member 1 (TM4SF1: cg08124030); src-like-adaptor (SLA: cg02794695); runt-related transcription factor 1 (RUNX1: cg19836199); guanylate cyclase 1, soluble, beta 2 (GUCY1B2: cg16692277); urocortin 2 (UCN2: cg05125838); interleukin-26 (IL26: cg25697314); ectropic viral integration site 2B (EVI2B: cg05109049); tubulin tyrosine ligase-like family member 3 (TTL3: cg03375833); and intestinal trefoil factor 3 (TFF3: cg04806409; Figures 3C and 3D). The difference between the DNAm levels of the CpGs in SLC41A2 and TM4SF1 showed best discrimination in the 27K-BeadChip training set (100% correctly classified) and was therefore considered as the Epi-Tissue-Score (Figure 3E). Notably, all 12 candidate CpGs demonstrated tissue type-specific DNAm patterns also in the 450K-BeadChip validation set (Figure 3F), and 98.4% of these samples were correctly classified by the Epi-Tissue-Score (Figure 3G). Pyrosequencing assays were designed for the two CpGs in SLC41A2 and TM4SF1 (Figure S3A), and thereby 22 analyzed MSC preparations were correctly classified into BM- or AT-deriv ed MSCs (Figures 3H and 3I). We also observed moderate differences in gene expression of SLC41A2 and TM4SF1 between MSCs from BM and AT (Figure S3B). Our analysis pinpoints clear molecular differences in MSCs that have been isolated from BM or AT, which can be reliably tracked by the Epi-Tissue-Score.

Epigenetic Classification of iPSC-Derived MSCs

We have recently demonstrated differentiation of induced pluripotent stem cells (iPSCs) toward MSCs, referred to as iPS-MSCs (Frobel et al., 2014). The DNAm profiles of these iPS-MSCs were now compared with those of primary cell preparations: iP-SMSCs were classified as MSCs by the Epi-MSC-Score (Figures S4A and S4B), and this was validated by pyrosequencing analysis of additional iP-S-MSC preparations (Figure S4F). In contrast, the DNAm patterns at the 12 tissue-specific CpGs were not clearly indicative of BM- or AT-derived MSCs (Figure S4C). PCA analysis using either the four cell type-specific or the 12 tissue-specific CpGs supported the notion that iP-S-MSCs are related to MSCs, whereas they do not reflect a clear tissue-specific association (Figures S4D and S4E). This is in line with our previous report that tissue-specific patterns are erased by reprogramming into iPSCs (Shao et al., 2013), and overall are not reestablished upon differentiation of iPSCs toward MSCs (Frobel et al., 2014).

Epigenetic Classification of Subclones

Mesenchymal stem cells comprise heterogeneous subpopulations (Cai et al., 2014; Schellenberg et al., 2012), and we have therefore challenged our epigenetic signatures on subclones. MSC cultures were seeded in 96-well plates in limiting dilutions and analyzed after 2 weeks. Additional 96-well plates were further differentiated toward adipogenic or osteogenic lineages for 2 weeks (Figure S4G). The individual subclones revealed very heterogeneous in vitro differentiation potential, as described in our previous work (Schellenberg et al., 2012), and could therefore be classified into clones with high or low differentiation potential (Figure 4A). Adipogenic differentiation potential was estimated by the percentage of cells harboring fat droplets (stained with BODIPY) and osteogenic differentiation by the amount of calcium phosphate precipitates (stained...
with Alizarin red; Figure 4B). DNA of 30 clones was subsequently harvested and analyzed with our Epi-MSC-Score and Epi-Tissue-Score. All subclones were correctly classified as BM-derived MSCs, irrespective of their in vitro differentiation potential (Figures 4C, 4D, S4H, and S4I). This indicates that the epigenetic classification is not due to shifts...
in the cellular composition, and rather reflects cell-intrinsic molecular characteristics.

**DISCUSSION**

Reliable measures for quality control are a prerequisite for the standardization of cell preparations to be used in experimental studies and cellular therapy. Here, we demonstrate that epigenetic signatures can support the classification of MSCs. In general, the precision of signatures can be increased by using a higher number of CpGs, but this requires more complex or even genome-wide analysis. Our two CpGs scores, which are based on one hypermethylated and one hypomethylated CpG site, are therefore a tradeoff to facilitate fast, cost-effective, and transparent classification.

Despite extensive efforts, it remains a challenge to distinguish between fibroblasts and MSCs. This definition is usually based on the in vitro differentiation potential of MSCs, although these surrogate assays hardly facilitate quantitative comparison, particularly not between different laboratories (Bortolotti et al., 2015; Dominici et al., 2006; Hematti, 2012). In our comparative study, we had to rely on the classification provided by the authors who deposited the DNA profiles. Hence, they are not based on common standards in cell culture and quality control. At least for the cell preparations that we analyzed by pyrosequencing, we consistently observed higher differentiation potential in MSCs compared with fibroblasts (Koch et al., 2011), and these were all correctly classified by the Epi-MSC-Score. On the other hand, our clonal analysis indicated that this signature is not directly associated with the subset in MSCs that reveals higher in vitro differentiation potential.

The epigenome reflects the tissue of origin even after long-term culture (Reinisch et al., 2015; Schellenberg et al., 2012). MSCs can be isolated from a multitude of different tissues (Crisan et al., 2008), but the vast majority of studies utilize MSCs from BM and AT. In fact, cell preparations derived from other tissues are often rather referred to as fibroblasts, and therefore classification of the Epi-MSC-Score may partly be also attributed to the different tissue sources. Either way, classifications with the Epi-MSC-Score are generally in line with those provided by the corresponding publications. Furthermore, the Epi-Tissue-Score can very reliably distinguish between MSCs from BM and AT. The remarkable difference in the epigenetic makeup of MSCs from different tissues, which are cell intrinsic and not due to cellular heterogeneity, may reflect the stark tissue-specific differences in gene-expression profiles (Wagner et al., 2005), proteome (Wagner et al., 2006), and functional readouts (Reinisch et al., 2015). All the more, such analysis is relevant for quality control.
Researchers are usually aware of the tissue that was initially used for isolation of MSCs, but there is evidence that accidental interchange of samples or contaminations with other cells can occur (Garcia et al., 2010; Torsvik et al., 2010). For established cell lines, some contaminations can be detected by specific SNPs or mutations, but for primary cells with unknown genetic background this can hardly be unraveled. In this regard, our epigenetic signatures provide a perspective for quality control of cell preparations. We expect that the signatures can be further fine-tuned based on the rapidly growing number of available DNAm datasets. This will also facilitate generation of other epigenetic signatures reflecting functional properties of MSCs, such as their immunomodulatory potential or the hematopoiesis supportive function (Wuchter et al., 2015).

Pyrosequencing Analysis
Genomic DNA was isolated from 10⁶ cells (bulk culture) or clones in 96-well plates using the NucleoSpin Tissue/Tissue XS kits (Macherey-Nagel) and quantified with an ND-1000 spectrometer (NanoDrop). Between 100 and 1,000 ng of DNA was sodium bisulfite-converted using the EZ DNA Methylation kit (Zymo Research), and PCR procedures and sequencing assays were performed using the PyroMark PCR and Q96 kits (Qiagen) (Lenz et al., 2015). Primers are specified in Table S4.

SUPPLEMENTAL INFORMATION
Supplemental Information includes Supplemental Experimental Procedures, four figures, and four tables and can be found with this article online at http://dx.doi.org/10.1016/j.stemcr.2016.01.003.

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REFERENCES
Bae, S., Ahn, J.H., Park, C.W., Son, H.K., Kim, K.S., Lim, N.K., Jeon, C.J., and Kim, H. (2009). Gene and microRNA expression signatures of human mesenchymal stromal cells in comparison to fibroblasts. Cell Tissue Res. 335, 565–573.

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pluripotent stem cells. Stem Cell Rep. 8, 315–317.

Erdmann, G., Suchanek, M., Horn, P., Graf, E., Volz, C., Horn, T., Zhang, X., Wagner, W., Ho, A.D., and Boutros, M. (2015). Functional fingerprinting of human mesenchymal stem cells using high-throughput RNAi screening. Genome Med. 7, 46.

Frobel, J., Hemeda, H., Lenz, M., Abagnale, G., Joussen, S., De necklace, B., Saric, T., Zenke, M., and Wagner, W. (2014). Epigenetic rejuvenation of mesenchymal stromal cells derived from induced pluripotent stem cells. Stem Cell Rep. 3, 414–422.

Garcia, S., Bernad, A., Martin, M.C., Cigudosa, J.C., Garcia-Castro, J., and de la Fuente, R. (2010). Pitfalls in spontaneous in vitro transformation of human mesenchymal stem cells. Exp. Cell Res. 316, 1648–1650.

Halfon, S., Abramov, N., Grinblat, B., and Ginis, I. (2011). Markers distinguishing mesenchymal stem cells from fibroblasts are down-regulated with passaging. Stem Cells Dev. 20, 53–66.

Hematti, P. (2012). Mesenchymal stem cells and fibroblasts: a case of mistaken identity? Cytotherapy 14, 516–521.

Holley, R.J., Tai, G., Williamson, A.J., Taylor, S., Cain, S.A., Richardson, S.M., Merry, C.L., Whetton, A.D., Kiely, C.M., and Canfield, A.E. (2015). Comparative quantification of the surfaceome of human multipotent mesenchymal progenitor cells. Stem Cell Rep. 4, 473–488.

Ishii, M., Koike, C., Igarashi, A., Yamanaka, K., Pan, H., Higashi, Y., Kawaguchi, H., Sugiyama, M., Kamata, N., Iwata, T., et al. (2005). Molecular markers distinguish bone marrow mesenchymal stem cells from fibroblasts. Biochem. Biophys. Res. Commun. 332, 297–303.

Jaenisch, R., and Bird, A. (2003). Epigenetic regulation of gene expression: how the genome integrates intrinsic and environmental signals. Nat. Genet. Suppl. 33, 245–254.

Karnik, R., and Meissner, A. (2013). Browsing (Epi)genomes: a guide to data resources and epigenome browsers for stem cell researchers. Cell Stem Cell 13, 14–21.

Koch, C.M., Suschek, C.V., Lin, Q., Bork, S., Goeorgens, M., Joussen, S., Pallua, N., Ho, A.D., Zenke, M., and Wagner, W. (2011). Specific age-associated DNA methylation changes in human dermal fibroblasts. PLoS One 6, e16679.

Koch, C.M., Reck, K., Shao, K., Lin, Q., Joussen, S., Ziegler, P., Walenda, G., Drescher, W., Opalka, B., May, T., et al. (2013). Pluripotent stem cells escape from senescence-associated DNA methylation changes. Genome Res. 23, 248–259.

Lenz, M., Goetzke, R., Schenk, A., Schubert, C., Veeck, J., Hemeda, H., Koschnieder, S., Zenke, M., Schuppert, A., and Wagner, W. (2015). Epigenetic biomarker to support classification into pluripotent and non-pluripotent cells. Sci. Rep. 5, 8973.

Reinisch, A., Etchart, N., Thomas, D., Hofmann, N.A., Fruehwirth, M., Sinha, S., Chan, C.K., Senarath-Yapa, K., Seo, E.Y., Wearda, T., et al. (2015). Epigenetic and in vivo comparison of diverse MSC sources reveals an endochondral signature for human hematopoietic niche formation. Blood 125, 249–260.

Schellenberg, A., Stiehl, T., Horn, P., Joussen, S., Pallua, N., Ho, A.D., and Wagner, W. (2012). Population dynamics of mesenchymal stem cells during culture expansion. Cytotherapy 14, 401–411.

Shao, K., Koch, C., Gupta, M.K., Lin, Q., Lenz, M., Laufs, S., De necklace, B., Schmidt, M., Linke, M., Hennies, H.C., et al. (2013). Induced pluripotent mesenchymal stromal cell clones retain donor-derived differences in DNA methylation profiles. Mol. Ther. 21, 240–250.

Sorrentino, A., Ferracin, M., Castelli, G., Biffoni, M., Tomaselli, G., Baiocchi, M., Fatica, A., Negrini, M., Peshce, C., and Valtieri, M. (2008). Isolation and characterization of CD14+ multipotent mesenchymal stem cells. Exp. Hematol. 36, 1035–1046.

Squillaro, T., Peluso, G., and Galderisi, U. (2015). Clinical trials with mesenchymal stem cells: an update. Cell Transplant. http://dx.doi.org/10.3727/096368915X689622.

Torsvik, A., Rosland, G.V., Svendsen, A., Molven, A., Immervoll, H., McCormack, E., Lonning, P.E., Primon, M., Sobala, E., Tonn, J.C., et al. (2010). Spontaneous malignant transformation of human mesenchymal stem cells reflects cross-contamination: putting the research field on track—letter. Cancer Res. 70, 6393–6396.

Wagner, W., Wein, F., Seckinger, A., Frankhauser, M., Wirkner, U., Krause, U., Blake, J., Schwager, C., Eckstein, V., Ansorge, W., et al. (2005). Comparative characteristics of mesenchymal stem cells from human bone marrow, adipose tissue, and umbilical cord blood. Exp. Hematol. 33, 1402–1416.

Wagner, W., Feldmann, R.E., Jr, Seckinger, A., Maurer, M.H., Wein, F., Blake, J., Krause, U., Kalenka, A., Burgers, H.F., Saffrich, R., et al. (2006). The heterogeneity of human mesenchymal stem cell preparations—evidence from simultaneous analysis of proteomes and transcriptomes. Exp. Hematol. 34, 536–548.

Weidner, C.I., Lin, Q., Koch, C.M., Eisele, L., Beier, F., Ziegler, P., Bauerschlag, D.O., Jockel, K.H., Erbel, R., Muhleisen, T.W., et al. (2014). Aging of blood can be tracked by DNA methylation changes at just three CpG sites. Genome Biol. 15, R24.

Wuchter, P., Bieback, K., Schrezenmeier, H., Bornhauser, M., Muller, L.P., Bonig, H., Wagner, W., Meisel, R., Pavel, P., Tonn, T., et al. (2015). Standardization of good manufacturing practice-compliant production of bone marrow-derived human mesenchymal stromal cells for immunotherapeutic applications. Cytotherapy 17, 128–139.