



Cryopreservation

- This process preserves organelles, cells, tissues, or any other biological constructs by cooling the samples to very low temperatures (typically $-80\text{ }^{\circ}\text{C}$ using solid CO_2 or $-196\text{ }^{\circ}\text{C}$ using liquid Nitrogen).
- It converts water present in the cells from liquid to solid-state.
- The cell water requires a much lower temperature to freeze (up to $-68\text{ }^{\circ}\text{C}$) due to the presence of salts and organic molecules in the cells, in comparison to the freezing point of pure water (around $0\text{ }^{\circ}\text{C}$).

- Two commonly used cryoprotective agents(CPA) are dimethyl sulfoxide (DMSO) and glycerol.
- **Glycerol**:- used for cryoprotection of RBC.
- **DMSO**:- used for protection of most other cells and tissues.
- A sugar called **trehalose** is capable of surviving extreme dehydration, so used for the preservation of **sperm, stem cells, and blood cells**.
- First successful cryopreservation of **fish sperm** was reported in the 1950s.



- **Types:**

- (1) slow freezing
- (2) vitrification (solidification of the aqueous part of the cell or tissue into a noncrystalline glassy phase)
- (3) subzero nonfreezing storage
- (4) preservation in the dry state.

Cryopreservation Steps

1. Harvesting or Selection of material–

volume, density, pH, and morphology should be checked

2. Addition of cryo-protectant –

- glycerol, salts, sugars, and glycol is added to the samples
- It **reduces the freezing point** of the medium and allows a **slower cooling rate**, to reduce the risk of crystallization.

3. Freezing –

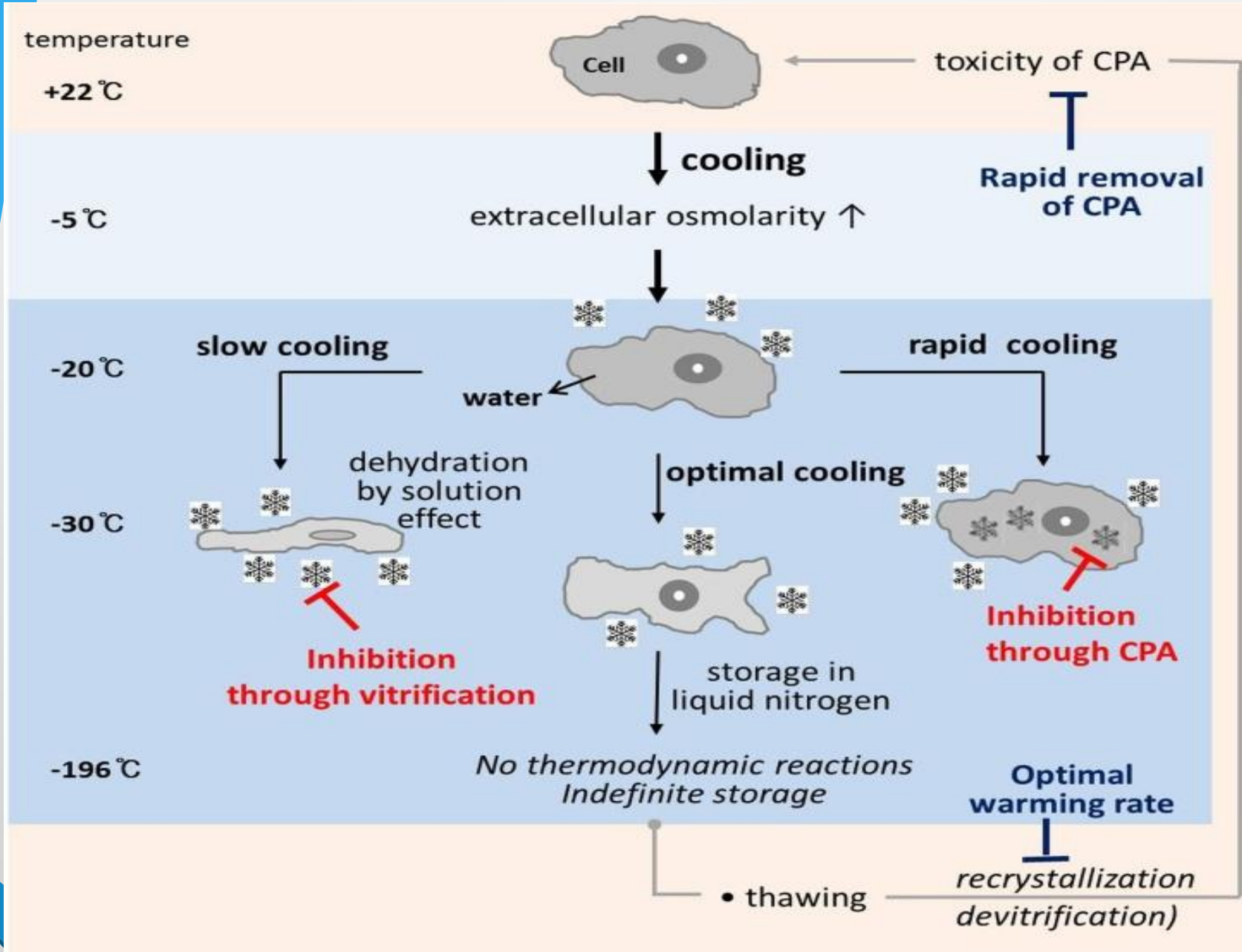
Different methods are applied by exposing the cells to the warm solutions of cryoprotective agents.

4. Storage in liquid nitrogen–

- samples are stored in -80°C for at least 5 to 24 hours.
- Then transferred to the storage vessels.

5. Thawing-

It controls the rate of cooling to prevent cellular damage caused by crystallization.



Cryoinjury

- Caused by extra- or intracellularly concentrated solutes and intracellular ice formation.

CPAs

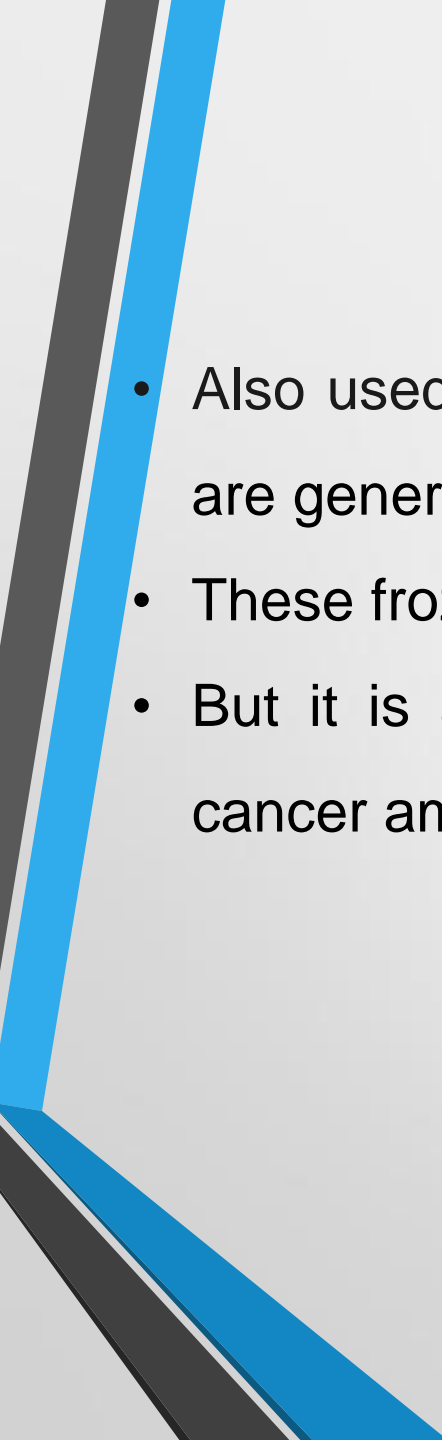
- The CPA, :- usually **fluid** that reduces the freezing injury during the cryopreservation process.
- **It reduces** the amount of ice formed irrespective of temperature, cell type, cooling rate, and warming rate.
- Divided into two categories:
 - (1) **cell membrane-permeating cryoprotectants** :- dimethyl sulfoxide (DMSO), glycerol,
 - (2) **nonmembrane-permeating cryoprotectants** :- 2-methyl-2,4-pentanediol and polyvinyl pyrrolidone, hydroxyethyl starch, and various sugars.

Limitations for Cryopreservation:

- Proper technical and theoretical knowledge s required.
- Can cause genetic drift and can alter cellular activity and structure.
- Higher concentrations of CPAs can damage cells like DMSO may alter chromosome stability, and lead to a risk of tumor formation.

Uses:- in cancer treatments

- freeze and store hematopoietic stem cells, (found in the bone marrow and peripheral blood).
- Hematopoietic stem cells are collected from a patient's bone marrow prior to high-dose chemotherapy treatment since it is toxic to the bone marrow.
- After treatment, the patient's cryopreserved cells are thawed and infused back into the body.

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- Also used to freeze and store human sperm and embryos that are generated by in vitro fertilization (IVF).
 - These frozen embryos are used for late pregnancy.
 - But it is associated with a significant increase in the risk of cancer among children born from such embryos.

Other applications of Cryopreservation:-

- widely used in cryosurgery, molecular biology, ecology, food science, plant physiology, and in many medical applications.

Other applications are:

1. Seed Bank.
2. Gene Bank.
3. Blood transfusion.
4. In vitro fertilization.
5. Organ transplantation.
6. Artificial insemination.
7. Storage of rare germplasm.
8. Freezing of cell cultures.

Benefits of Cryopreservation

- Fertility treatments.
- Minimal space and labor required.
- Safety from genetic contamination.
- Preserve Biological samples for a longer period of time.
- Protects samples from disease and microbial contamination.
- Prevents genetic drift by cryopreservation of gametes, embryos, etc.

Risks associated with cryopreservation

- Cellular damage occurs during the freezing stage, because of :-
 - 1) solution effects,
 - 2) extracellular ice formation,
 - 3) dehydration
 - 4) intracellular ice formation.
- These effects can be reduced by cryoprotectants.
- Once the frozen stage is reached, it is safe from further damage.

Solution effects

High concentrations of some solutes can be very damaging.

Extracellular ice formation:-

When tissues are cooled slowly, water migrates out of cells, and ice forms in the extracellular space.

- Too much extracellular ice can cause mechanical damage to the cell membrane due to crushing.

Dehydration

- The migration of water can also cause cellular dehydration, which directly causes Cellular damage.

Intracellular ice formation

- Some organisms and tissues can tolerate some extracellular ice, but intracellular ice is almost fatal to cells.

Prevention of risks

- intracellular freezing is lethal, so can be avoided by **slow cooling** to permit sufficient water to leave the cell during the freezing of the extracellular fluid.
- An optimum cooling rate of $1^{\circ}\text{C}/\text{min}$ is maintained for many cells after treating them with glycerol or DMSO.