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Differentiation of Human Induced Pluripotent Stem Cells Into Testosterone-Producing Leydiglike Cells

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Abstract

 Late-onset hypogonadism (LOH) syndrome due to a partial lack of testosterone, which is mainly secreted by Leydig cells in the testes, decreases the quality of life of older men. Leydig cell transplantation is expected to be a promising alternative to conventional testosterone replacement therapy (TRT) for LOH syndrome. We herein report a simple and robust protocol for directed differentiation of human induced pluripotent stem cells (hiPSCs) into Leydig-like cells by doxycycline-inducible overexpression of NR5A1 and treatment with a combination of 8-bromoadenosine-3',5'-cyclic monophosphate (8-Br-cAMP) and forskolin. The differentiated cells expressed the steroidogenic enzyme genes StAR, CYP11A1, CYP17A1 and HSD3β2 and the specific markers of adult Leydig cells HSD17B3, INSL3 and LHCGR. Furthermore, we confirmed the secretion of functional testosterone from the cells into the culture supernatant by a testosterone-sensitive cell proliferation assay. These findings showed that the hiPSCs were able to be differentiated into Leydig-like cells, supporting the expectation that hiPSC-derived Leydig-like cells can be novel tools for treating LOH syndrome.

Introduction

 Late-onset hypogonadism (LOH) syndrome is caused by a reduction in testicular testosterone production in aging males and is characterized by various symptoms, such as fatigue, decreased libido, erectile dysfunction, depression, anemia, and decreased muscle mass and bone density, leading to a poor quality of life (1,2). In addition, low serum testosterone levels have been reported to be associated with metabolic syndrome and diabetes mellitus (3,4). The decline in testosterone levels in LOH syndrome has been thought to be due to a decrease and dysfunction in Leydig cells in the testes (5), which are the primary source of testosterone in males. LOH syndrome has been treated with testosterone replacement therapy (TRT), which 45 has been shown to ameliorate the symptoms attributed to LOH syndrome (1). TRT is presently available in injectable, oral and ointment form, but the length of effectiveness of a single testosterone administration is limited in these forms, making repeated administrations necessary(6). Injectable testosterone needs to be replenished every two to four weeks, whereas ointment form of testosterone requires fewer hospital visits but everyday application, and the issue of secondary exposure of the coating formulation has been noted. Oral administration requires dosing four times in a day, and users must be alert for various adverse effects(2,6). Furthermore, presently available TRTs do not restore the physiological fluctuation patterns of blood testosterone levels regulated by gonadotropin and gonadotropin-releasing hormone with

 feedback mechanisms(2). Thus, novel therapeutic approaches as an alternative to TRT for LOH syndrome are required.

 Leydig cell transplantation may overcome the issues of the present TRTs for patients with LOH syndrome. Once the transplanted Leydig cells engraft, the effectiveness might last the entire life of the recipient, or at least much longer than a few weeks, which is the effective duration of a single injection of a testosterone product. Furthermore, the transplanted Leydig cells might secrete testosterone in a physiological manner. One group previously reported the induction of Leydig-like cells from mouse embryonic stem (ES) cells by the forced expression of NR5A1 (7) and another group reported direct reprogramming of mouse fibroblasts to Leydig-like cells by three transcriptional factors: NR5A1, Dmrt1 and Gata4 (8). A protocol reported by another group for the induction of Leydig cells from human induced pluripotent stem cells (hiPSCs) without the overexpression of NR5A1 or any other factors consists of six steps and it also requires the use of two different mediums with complex compositions, and the resultant cells in the protocol showed only slight production of testosterone (9). Crucially, to our knowledge, nobody has demonstrated the function of testosterone secreted by artificially induced human Leydig cells as a potent transplantation therapy for LOH syndrome.

 In the present study, we established a simple and robust differentiation protocol into functional testosterone-producing Leydig-like cells from hiPSCs via doxycycline-inducible

- overexpressing NR5A1 and showed not only marker gene expression but also the secretion of
- functional testosterone from the resultant cells.

Material and methods

hiPSCs and culture conditions

 In the present study, we used four iPSC clones: two male clones (3AB4 (10), 73E1) and two female clones (201B7(11), 46C2-s4 (12)). The 73E1 clone was established from healthy donors' peripheral blood mononuclear cells using CytoTune-iPSC 2.0 (ID Pharma Co., Ltd., Tsukuba, Japan) according to a previously described method (12). The institutional review board of Kobe University Graduate School of Medicine approved this study (No. 1722), and informed consent was obtained from the donor. The 73E1 clone showed typical human ES cell-like morphology (S-Fig. 1A), expressed 84 pluripotent stem cell markers OCT3/4, SOX2 and NANOG at the protein (S-Fig. 1B) and mRNA levels (S-Fig. 1C). Removal of Sendai virus was confirmed by immunostaining (S-Fig. 1D) and reverse transcription polymerase chain reaction (RT-PCR) (S-Fig. 1E). An embryoid body (EB)-mediated *in vitro* differentiation experiment showed that 73E1 had the ability to differentiate into cells comprising all three germ layers (S-Fig. 1F). We cultured these iPSCs according to a previously described method (12). In brief, the culture plates were precoated 90 with recombinant laminin-511 E8 fragments (iMatrix-511, Nippi, Tokyo, Japan; $0.5 \mu g/cm^2$), 91 and the iPSCs were cultured in Stem Fit medium (Ajinomoto, Tokyo, Japan) at 37 °C with 5% 92 $CO₂$. The medium was changed every other day and passaged every seven days using 0.5x TrypLE Select (TrypLE Select diluted 1:1 with 0.5 mM EDTA/PBS (-); Life Technologies,

 Tokyo, Japan) and 10 μM of Rock inhibitor (Y-27632; WAKO, Osaka, Japan) for one day after passage.

Generation of a doxycycline-inducible NR5A1-hiPS cell line

 Using Gateway cloning, the NR5A1 cDNA was transferred to the PB-TAC-ERN (KW111) destination vector to yield the transposon PB-TAC-ERN-NR5A1 (13,14). The PB-TAC-ERN- NR5A1 vector was transfected together with PB transferase (PBase) into four independent hiPSC clones using FuGENE HD (Roche, Swiss), according to the manufacturer's instructions. A total of 100 µg/ml G418 (Nacalai Tesque, Kyoto, Japan) was added to media for 10 days to generate NR5A1-hiPSCs containing genomic transposon integrations. The appropriate NR5A1-hiPSC clones with high mCherry expression were selected. We then maintained NR5A1-hiPSCs under the same conditions as the hiPSCs before vector introduction, except for adding 100 µg/ml G418.

Differentiation into Leydig-lineage

109 For EB formation, 3×10^4 NR5A1-iPSCs were allowed to aggregate in maintenance medium (DMEM high glucose [Nacalai Tesque], 15% KSR [Thermo Fisher Scientific, Tokyo, Japan], doxycycline [1 µM; Tocris, Bristol, UK]) and plated into each well of a 96-well nonadherent 112 culture plate (96-well prime surface; Sumitomo Bakelite) for incubation in 5% CO₂ at 37 °C

 Shiga, Japan) with oligo-dT primers according to the manufacturer's instructions. We used water as a negative control for each reaction. The primer sequences of the RT-PCR are listed in Table S1.

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- *Histological and immunocytochemical examinations*

 Tissue sections of the induced Leydig-like cells and the human testis were stained with Hematoxylin and Eosin (H&E). Immunostaining for hiPSCs and EB-mediated differentiated cells was performed as previously described (12). The used primary antibodies included OCT3/4 (BD, 611202, RRID: AB_398736), SOX2 (abcam, ab97959, RRID: AB_2341193), NANOG (R&D Systems, AF1997, RRID: AB_355097), Sendai virus (MBL, PD029, RRID: 142 AB 10597564), β-III-tubulin (Chemicon, MAB1637, RRID: AB 2210524), α-SMA (DAKO, M0851, RRID: AB_2223500) and SOX17 (R&D systems, AF1924, RRID: AB_355060). The secondary antibodies (Alexa 594-conjugated anti-goat, -rabbit, -mouse IgG and Alexa Fluor 488-conjugated anti-mouse, anti-goat IgG) were obtained from Life technologies. Hoechst (Life Technologies, 33342, RRID: AB_10626776) was used for nuclear staining. For Figure 2D, differentiated NR5A1-3AB4 cells (Day 21) were coated with alginate acid, fixed with formalin and embedded in paraffin. The paraffin sections were reacted with

- Tyramide signal amplification (TSA) (Perkin-Elmer, Waltham, MA, USA) and stained with
- polyclonal rabbit anti-human INSL3 antibody (Sigma-Aldrich, St. Louis, MO, USA; dilution

Results

Generation of hiPSC lines expressing NR5A1 in a doxycycline-dependent manner

 To examine whether or not Leydig cells could be induced from hiPSCs via the forced expression of NR5A1, we constructed the vector PB-TAC-ERN NR5A1, which expresses NR5A1 in a doxycycline-dependent manner (Fig. 1A), and introduced it into four iPSC lines: two male lines (3AB4, 73E1) and two female lines (201B7 and 46C2-s4). We established four doxycycline-inducible NR5A1-hiPSC lines showing human ES cell-like morphologies (Fig. 1B and S-Fig. 2A) and expressing undifferentiated markers (OCT3/4, SOX2 and NANOG), similarly to the parental iPSC line, which had not been transduced with the vector (Fig. 1C and S-Fig. 2B). Most of the iPSC colonies became mCherry-positive, indicating exogenous NR5A1 expression, when doxycycline (1 μM) was added for one day (Fig. 1D and S-Fig. 2C), and the expression of NR5A1 was confirmed at the mRNA level (Fig. 1E and S-Fig. 2D) and protein level (Fig. 1F and S-Fig. 2E) by RT-PCR and Western blotting, respectively. We used HepG2 cell line as positive control, as these cells are known to highly express NR5A1 (16).

 Testosterone-producing Leydig-like cells were induced only from iPSCs that forcibly expressed NR5A1

 To differentiate hiPSCs into Leydig cell lineage, we first established embryoid bodies (EBs) and then performed suspension culture with 8-bromoadenosine-3',5'-cyclic monophosphate

 FBS was also detected in the medium used as a negative control (0.12-0.15 ng/ml), but since there was 50- to 460-fold difference from the level of testosterone secreted from Leydig-like cells into the culture supernatant, we regarded it as having a negligible effect on our study and decided to use the same FBS.

 To examine whether or not testosterone produced from the induced Leydig-like cells was functional, we assessed the effect of the testosterone on the proliferation of two prostate cancer cell lines: LNCaP cells and PC3, which are known to be testosterone-sensitive and testosterone-insensitive, respectively (15, 22). The results showed that testosterone produced 229 by induced Leydig-like cells had the ability to increase the number of LNCaP cells just as much as commercially available synthetic testosterone of the same concentration (Fig. 2G left panel).In contrast, when PC3 cells were cultured using the same protocol, only a slight effect of the supernatant, probably due to some proliferation-promoting factors other than testosterone, was noted (Fig. 2G right panel). As the magnitude of the proliferation-promoting effect of the supernatant on LNCap was larger than PC3, the proliferation-promoting effect of the culture supernatant on LNCaP may be mainly attributed to testosterone. These data therefore indicated that the testosterone secreted by the iPSC-derived Leydig-like cells was functional.

 As NR5A1 is known to also be involved in the differentiation into adrenal steroid hormone- producing cells (23), we examined the expression of adrenal cortex marker genes by RT-PCR for the purpose of investigating the differentiation of adrenal cortex cells in iPSC-derived cells which had been induced to differentiate by the Leydig cell lineage differentiation protocol. We observed the expression of CYP21A2, CYP11B1 and CYP11B2, which are the adrenal cortex- specific steroid hormones metabolizing enzymes for producing aldosterone and cortisol (24), as well as ACTH receptor gene (ACTHR) (S-Fig. 3A). The concentrations of aldosterone and cortisol in the culture supernatant were higher than those in the fresh medium, indicating the production of these hormones by the iPSC-derivatives (S-Fig. 3B). Taken together, our present differentiation protocol for Leydig cells induced not only Leydig cells but also cortex cells (aldosterone- and cortisol-producing cells).

Leydig-like cells were not induced from female iPSCs

 Leydig cells exist in male but not in female bodies. We therefore examined whether or not Leydig-like cells could be induced from female-derived iPSCs under the same conditions where Leydig-like cells were induced from male-derived iPSCs. At day 6, EBs formed from both female and male iPSCs with no obvious differences (Fig. 2B left panel, S-Fig. 4A upper panels). However, after additional induction with two molecules for 15 days, the shape of the

 Regarding female steroid hormone-producing cells, one report showed that the forced expression of NR5A1 in female skin, skeletal muscle, fat and other somatic stem cells induced differentiation into theca cells, granulosa cells and corpus luteum, which comprise the ovary (Japanese Patent Publication No. 2007071416). Theca cells, which are testosterone-secreting cells in women, were reported to express INSL3 (25), but the expression of INSL3 was not detected in the female iPSC-derived cells in this study (Fig. 3B), suggesting that theca cells were not induced in the present study.

 Similarly to male iPSC-derived cells, female iPSC-derived cells expressed adrenal cortex marker genes (Fig. 3B). Cortisol and aldosterone were observed in the supernatant of the female iPSC-derived cells (S-Fig. 4B).

 Taken together, these findings show that Leydig-like cells were not induced from female iPSCs, and the slight testosterone secretion noted might have been derived from adrenal cortex-like cells that unintentionally arose with our differentiation procedure.

Induced Leydig-like cells can secrete testosterone for at least four weeks

 Finally, to examine how long testosterone secretion is maintained in the Leydig-like cells induced by our protocol, the concentration of testosterone in the culture supernatant was measured every other week from day 21 to day 49 after the start of doxycycline addition to NR5A1-3AB4. While the peak testosterone levels varied among experiments up to day 35, the levels gradually decreased after day 35 in all six experiments (Figure 4A). The testosterone levels on day 49 ranged from 4.04 to 28.2 ng/ml, and these values were higher than those detected when female-derived iPSCs were cultured in our Leydig-cell differentiation induction protocol (0.2-3.63 ng/ml, shown in Figure 3A). Based on these results, Leydig-like cells induced by our protocol seem able to continue to produce testosterone for at least 4 weeks (from day 21 to day 49), although the testosterone levels at days 42 and 49 were significantly lower than those at day 21 (Fig. 4B).

Discussion

 We succeeded in differentiating human iPSCs into Leydig-like cells with a simple protocol by expressing NR5A1. Since our experimental system regulates the expression of NR5A1 in a doxycycline-dependent manner, NR5A1-iPSCs can be maintained and expanded and cryopreserved in the absence of doxycycline, and differentiation can be started promptly at any time by adding doxycycline. Our protocol consists of two steps with basic medium, FBS, KSR and two molecular compounds and requires medium be changed just once a week. In contrast, the protocol reported by Chen et al. (9) is more complex than the present protocol; namely, it consists of six steps using a basic medium, BSA, FBS, HS and 13 molecular compounds and it also requires that the medium be changed every two days. In addition, whereas Leydig- lineage differentiated cells from stem cells in some previous reports (7,26,27) required the *in vivo* testis environment after transplantation for maturation to testosterone-producing cells, we were able to create cells capable of producing testosterone *in vitro*. Furthermore, we differentiated Leydig cells from two iPSC lines in this study, and both showed the expression of Leydig cell markers and secretion of testosterone. Previous reports about Leydig-like cell differentiation from mouse ESCs by Yang et al. (8) and from hiPSCs by Chen et al. (9) showed experiments using only one cell line, and reproducibility of the differentiation processes was

 not clarified. We repeated experiments multiple times and showed lack of consistency in testosterone levels from experiment to experiment. The present results of multiple experiments shown here demonstrated the robustness of our protocol and its issues to be addressed. The differentiated Leydig-like cells were able to continue to secrete testosterone for four weeks after the end of differentiation (Fig. 4A). In previous reports, testosterone levels in the culture supernatant of Leydig-like cells from mouse ESCs, mesenchymal stem cells (MSCs), mouse fibroblasts and hiPSCs had only been measured at one time point: at day 8 (7), day 7 (28), day 10 (8) and day 30 (9), respectively. This is therefore the first report showing testosterone production for a long time after the completion of the differentiation processes. The induced Leydig-like cells generated in this study showed a gradually reduced testosterone production in long-term culture and seemed to not grow according to morphological observation (data not shown). Our current technology cannot determine whether the amount of testosterone secretion by individual cells decreased over time or the number of cells decreased. Consistently, Chen et al. reported that the hiPSC-derived cells gradually withered after day 25, and Yang et al. also mentioned that their mouse ESCs-derived Leydig-like cells did not proliferate (7). Long term culture of not only these cells artificially induced *in vitro* but also primary Leydig cells has been difficult, and there is no report of the establishment of any protocol for long-term culture of primary human Leydig cells, to our knowledge. Future studies

 should search for novel culture conditions that will enable us to maintain and expand Leydig cells in order to realize Leydig cell transplantation therapy.

 Another issue to address is the lack of consistency in testosterone levels from experiment to experiment. We should identify and control factors that cause inconsistency in the differentiation process in order to establish more robust differentiation protocols for the generation of Leydig cells in future studies. Furthermore, we were unable to observe responsiveness of testosterone secretion by iPSC-derived Leydig-like cells following LH treatment in this study. LH responsiveness is an essential attribute of cells for ensuring testosterone secretion in a physiological manner when cells are transplanted into patients. We need to perform pre-clinical transplantation experiments, such as the transplantation of iPSC- derived Leydig-like cells into immune-deficient animals, or the transplantation of cells encapsulated in alginate into immune-competent animals in order to evaluate the engraftment and function of the cells *in vivo*. Alternatively, we should transplant the resultant cells into mouse testis from which Leydig cells have been ablated by administering ethane diethylstilbestrol (DES) and assess whether or not the cells can colonize the testis and sustain a proper steroidogenic function.

 In the present study, the resultant cell cluster of our experiments included both Leydig cells that produced testosterone and adrenal cortex cells that produced cortisol and aldosterone. In previous studies, steroid hormone (cortisol and aldosterone)-producing cells were

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Uncategorized References

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 E) HE staining of differentiated NR5A1-3AB4 cells with doxycycline (+) (left panel) and human testis tissue (right panel)

F) Testosterone was secreted into the culture supernatant only in the differentiated NR5A1-

- 3AB4 cells with doxycycline treatment. Data of six independent differentiation experiments were shown. Statistical analyses were evaluated using an unpaired Student's
- 551 *t*-test. $p<0.05$ was considered statistically significant *($p<0.05$).
- G) Culture supernatant of doxycycline (+) differentiated NR5A1-3AB4 enhanced LNCaP cells proliferation just as much as commercially available synthetic testosterone of the same concentration (T) (left panel), and only slightly enhanced PC3 cells proliferation (right panel). Cell proliferation was examined using Cell Titer-Glo® in three independent differentiation induction experiments. Statistical analyses were performed using an 557 Student's t-test. p<0.05 was considered statistically significant. $*(p \le 0.05)$; n.s.: not significant

Figure 3. Only the cells differentiated from male-derived NR5A1-hiPSCs with doxycycline secreted testosterone and expressed ALC markers

 A) Testosterone levels were measured in culture supernatants of doxycycline (+)- differentiated cells from male-derived NR5A1-hiPSCs (3AB4 shown in blue, number of independent differentiation experiments: n=37; 73E1 shown in red, n=7) and female-derived NR5A1-hiPSCs (201B7 shown in yellow: n=7, 46C2 shown in grey: n=3).

 S-Figure 1. The characterization of newly established hiPSC line 73E1. A) Phase contrast images of hiPSC line 73E1. The scale bars are shown in the images. B) Immunofluorescent staining of the hES cell markers OCT3/4 (green, upper panels), SOX2 (red, middle panels) and NANOG (red, lower panels) in 73E1. Nuclei were stained with Hoechst 33342 (blue). Scale bars, 100 μm C) Expression of undifferentiated markers (OCT3/4, SOX2 and NANOG) was examined by RT-PCR in 73E1 and the conventional hiPSC clone 201B7. D) & E) Removal of Sendai virus (SeV) vector from 73E1 clone was checked by immunofluorescence (D, scale bars: 100 μm) and RT-PCR (E). 46A1 is a SeV (+) hiPSC clone (12), and 201B7 is a SeV (-) clone reprogrammed using retroviral vectors. F) *In vitro* differentiation via embryoid body formation of 73E1. The images show immunofluorescent staining for β-III-tubulin (ectodermal marker, shown in upper panels), α-smooth muscle actin (α-SMA; mesodermal marker, shown in middle panels) and SOX17 (endodermal marker, shown in lower panels). The nuclei were stained with Hoechst 33342 (blue). Scale bars, 50 μm. **S-Figure 2. Established NR5A1-hiPSCs expressed NR5A1 in response to doxycycline.** A) Phase contrast images of hiPSC lines: NR5A1-201B7, NR5A1-46C2-s4 and NR5A1- 73E1. The scale bars are shown in the images.

differentiated into the adrenal lineage

Figure 1

Figure 3

Figure 4

Differentiation days

