

# Aseptic technology of vitrification of human pronuclear oocytes using open-pulled straws

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**BACKGROUND:** The aim of this study was to compare the viability of human pronuclear oocytes subjected to vitrification using cooling by direct submerging of open-pulled straws in liquid nitrogen versus vitrification by cooling of open-pulled straws located inside a closed 0.5 ml straw (aseptic system). **METHODS:** Two- and three-pronuclear stage oocytes ( $n = 114$ ) were cryopreserved in super-open-pulled straws by vitrification in 20% ethylene glycol + 20% dimethylsulphoxide (DMSO) + osmotic active and neutral non-permeable cryoprotectants with a four-step exposure in 20, 33, 50 and 100% vitrification solution for 2, 1 and 1 min, and 30–50 s, respectively at room temperature, and plunging into liquid nitrogen. Oocytes of group 1 ( $n = 42$ ) were rapidly cooled at a speed of 20 000°C/min by direct plunging of open-pulled straws into liquid nitrogen. Oocytes of group 2 ( $n = 44$ ) were first located in 0.5 ml straws, which were closed at both sides by metal balls, and then plunged into liquid nitrogen. This method resulted in a cooling speed of 200°C/min. For both groups, oocytes were thawed rapidly at a speed of 20 000°C/min using an identical protocol. Oocytes subsequently were expelled into a graded series of sucrose solutions (1.0, 0.75, 0.5, 0.25 and 0.12 mol/l) at 2.5 min intervals. **RESULTS:** Oocyte development up to expanded blastocyst stage after *in vitro* culture was 15% in group 1, 14% in group 2 and 29% in an untreated control group. **CONCLUSION:** The deposition of human pronuclear oocytes in open-pulled straws which are placed inside a hermetically closed container guarantees a complete isolation of oocytes from liquid nitrogen and avoids potential contamination by pathogenic microorganisms. The combination of direct plunging of this container into liquid nitrogen and rapid warming makes this process as efficient as conventional vitrification.

**Key words:** aseptic application/microbial contamination/oocytes/open-pulled straw/vitrification

## Introduction

There have been several recent reports of the successful cryopreservation of human pronuclear oocytes by direct plunging into liquid nitrogen (vitrification) (Park *et al.*, 2000; Jelinkova *et al.*, 2002; Liebermann and Tucker, 2002; Liebermann *et al.*, 2002a,b; Selman and El-Danasouri, 2002; Isachenko *et al.*, 2004a).

For the cryopreservation of embryos or oocytes, standard 0.25 ml insemination straws were used almost exclusively (Kuleshova and Shaw, 2000). The achievable cooling rate by direct plunging into liquid nitrogen (Palasz and Maplettoft, 1996) was  $\sim 2500^\circ\text{C}/\text{min}$ . However, new methods based on the immersion of very small amounts of solutions in liquid nitrogen were developed and most authors have attributed the improved developmental rate of cells after cryopreservation to an increased ( $>10\,000^\circ\text{C}/\text{min}$ ) speed of freezing and warming (Martino *et al.*, 1996; Vajta *et al.*, 1998; Lane *et al.*,

1999; Lane and Gardner, 2001; Dinnyes *et al.*, 2000; Kuwayama and Kato, 2000).

All methods mentioned above have a common parameter: exposure of the vitrification solution holding the biological object directly to liquid nitrogen during freezing. Isolation of vitrifying samples from liquid nitrogen in order to avoid direct contact results in a decreased speed of cooling which, in the opinion of the majority of authors, can decrease the efficacy of the vitrification protocol.

Bielanski *et al.*, (2000) reported the contamination of bovine embryos by viral pathogens during storage of these embryos in liquid nitrogen. Even the vapour of liquid nitrogen can be contaminated by microorganisms (Fountain *et al.*, 1997). Consequently, long-term banking of spermatozoa and embryos in liquid nitrogen can have a potential risk of cross-contamination when specimens are not sealed properly (Bielanski *et al.*, 2003).

The aim of our investigations was to assess the viability of vitrified human pronuclear oocytes after slow cooling of samples which were protected from direct contact with liquid nitrogen followed by rapid warming.

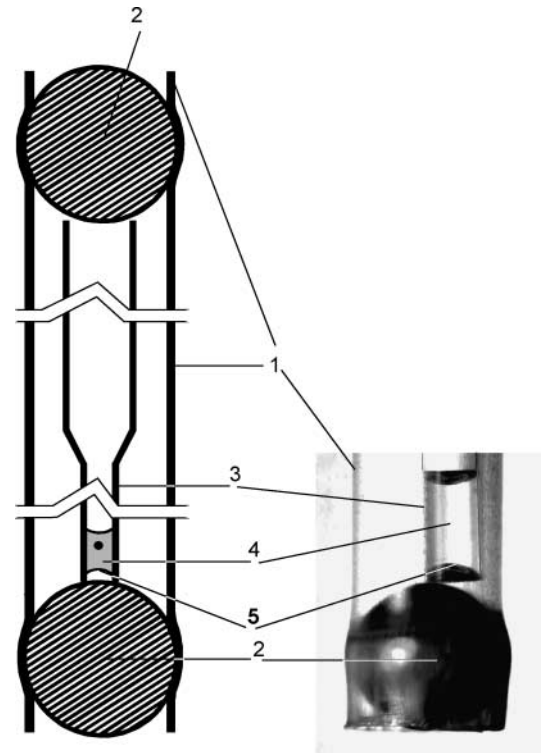
## Materials and methods

Except where otherwise stated, all chemicals were obtained from Sigma (Sigma Chemical Co., St Louis, MO). Written informed consent was obtained from the participating couples for the cryopreservation and culture of oocytes. The study was performed in Russia and obtained approval from the State Ethics Committee.

Patients with unexplained infertility were stimulated for IVF-ICSI with triptorelin (Decapeptyl®; Ferring, Kiel, Germany) and recombinant FSH (Puregon®; Organon, Oss, The Netherlands) according to the 'long' protocol. Ovulation was induced by the administration of 10000 IU of HCG (Pregnil®; Organon). Oocytes were retrieved 34–36 h later and inseminated with the husband's sperm through conventional IVF or ICSI techniques. Fertilization was assessed 14–18 h after insemination. Abnormally fertilized oocytes [at the three-pronuclei (PN) stage,  $n = 102$ ] or 2PN stage (from patients who did not want cryopreservation of oocytes,  $n = 12$ ) were used for vitrification, warming and subsequent culture.

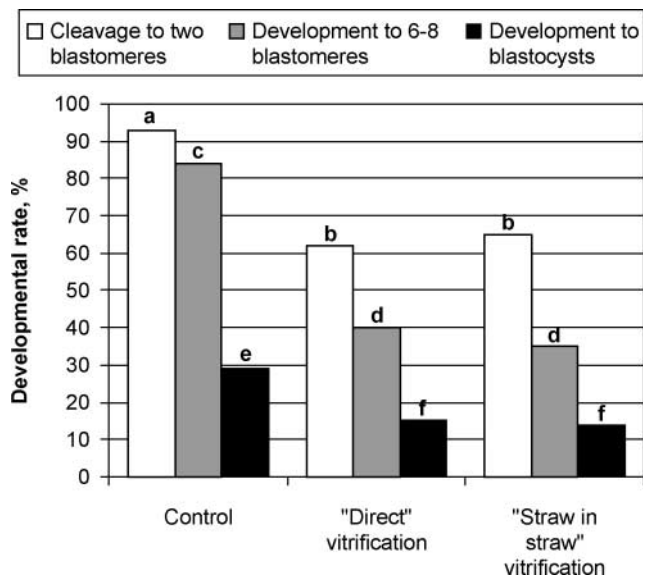
In total, 62 patients ranging in age from 24 to 39 years (median age  $32 \pm 3.9$ ) volunteered to have their oocytes cryopreserved by vitrification at the 2PN or 3PN stage.

Twelve oocytes with 2PN and 102 oocytes with 3PN were assigned randomly to a control ( $n = 28$ ) and two experimental groups. As we found no difference in the developmental rate of embryos derived from these two stages, all data were combined and presented together. The oocytes in the experimental groups were non-equilibrium cryopreserved (vitrified) by plunging into liquid nitrogen. All the cryopreservation solutions were prepared in TCM-199 supplemented with 20% serum supplement (Irvine Scientific, Santa Aria, CA). Oocyte cryopreservation was performed in open-pulled-straws (OPS) (Medical Technology GmbH, Altdorf, Germany) (Vajta *et al.*, 1998) with a four-step exposure in 20, 33, 50 and 100% vitrification solution [20% ethylene glycol + 20% dimethylsulphoxide (DMSO) + 0.75 mol/l sucrose] for 2, 1 and 1 min, and 30–50 s, respectively at 37°C and cooled. The volume of final vitrification solution in the OPS was 2–2.5 µl. For group 1, rapid cooling of oocytes ( $n = 42$ ) was realized by direct plunging of OPS into liquid nitrogen. For group 2, OPS with oocytes ( $n = 44$ ) were first placed inside a sterile 0.5 ml insemination straw (Medical Technology GmbH), which was hermetically closed by metal balls at both sides (Figure 1), and then plunged into liquid nitrogen. It should be noted that there was no contact between the metal ball and the vitrification solution holding the oocytes due to the presence of a meniscus of the vitrification solution (Figure 1). The potential risk of contact of vitrification solution with the metal ball is not a big problem because the metal balls and 0.5 ml straws are sterile; oocytes locate in the upper part of a column of vitrification solution (Figure 1). The speed of cooling in 'straw in straw' vitrification was determined using a Testo 950 electrical thermometer (Testo AG, Lenzkirch, Germany). For rapid warming, the OPS of group 1 were removed from liquid nitrogen and immediately plunged into a 1.5 ml microcentrifuge tube (Eppendorf-Netheler-Hinz GmbH, Hamburg, Germany) containing 1 ml of 1 mol/l sucrose. Before plunging into sucrose solution, the OPS of group 2 were first removed from the 0.5 ml straws in the following way. On removal of the ball using scissors, the part of the 0.5 ml straw which was still half submerged in liquid nitrogen is exposed and then, using fine forceps, OPS were taken out of the 0.5 ml straw and plunged into



**Figure 1.** Scheme and photographs of the container for vitrification using the 'straw in straw' mode: (1) 0.5 ml straw; (2) metal closing ball; (3) open-pulled straw; (4) vitrification medium with oocyte; (5) meniscus of vitrification medium.

sucrose solution as described above. This mode of thawing allows for the simultaneous removal of cryoprotectant and rapid warming. After warming, oocytes of both groups were expelled into a graded series of sucrose solutions (1.0, 0.75, 0.5, 0.25 and 0.12 mol/l) for gradual removal of the cryoprotectant in five 2.5 min steps. All



**Figure 2.** Development of oocytes after vitrification with direct cooling of open-pulled straws (OPS) in liquid nitrogen versus vitrification using cooling of OPS previously located in hermetically closed 0.5 ml straws. Superscripts a–b, c–d and e–f indicate significant differences ( $P < 0.05$ ).

the oocytes were then cultured for an additional 6 days in 5% CO<sub>2</sub> at 37°C in Blast-Assist Medium (I and II) (Medicult, Denmark) according to a standard protocol.

Results were analysed by logistic regression with dummy variables using the LOGISTIC procedure of SAS (SAS Stat Software, 1996). Statistical significance was denoted as  $P < 0.05$ .

## Results

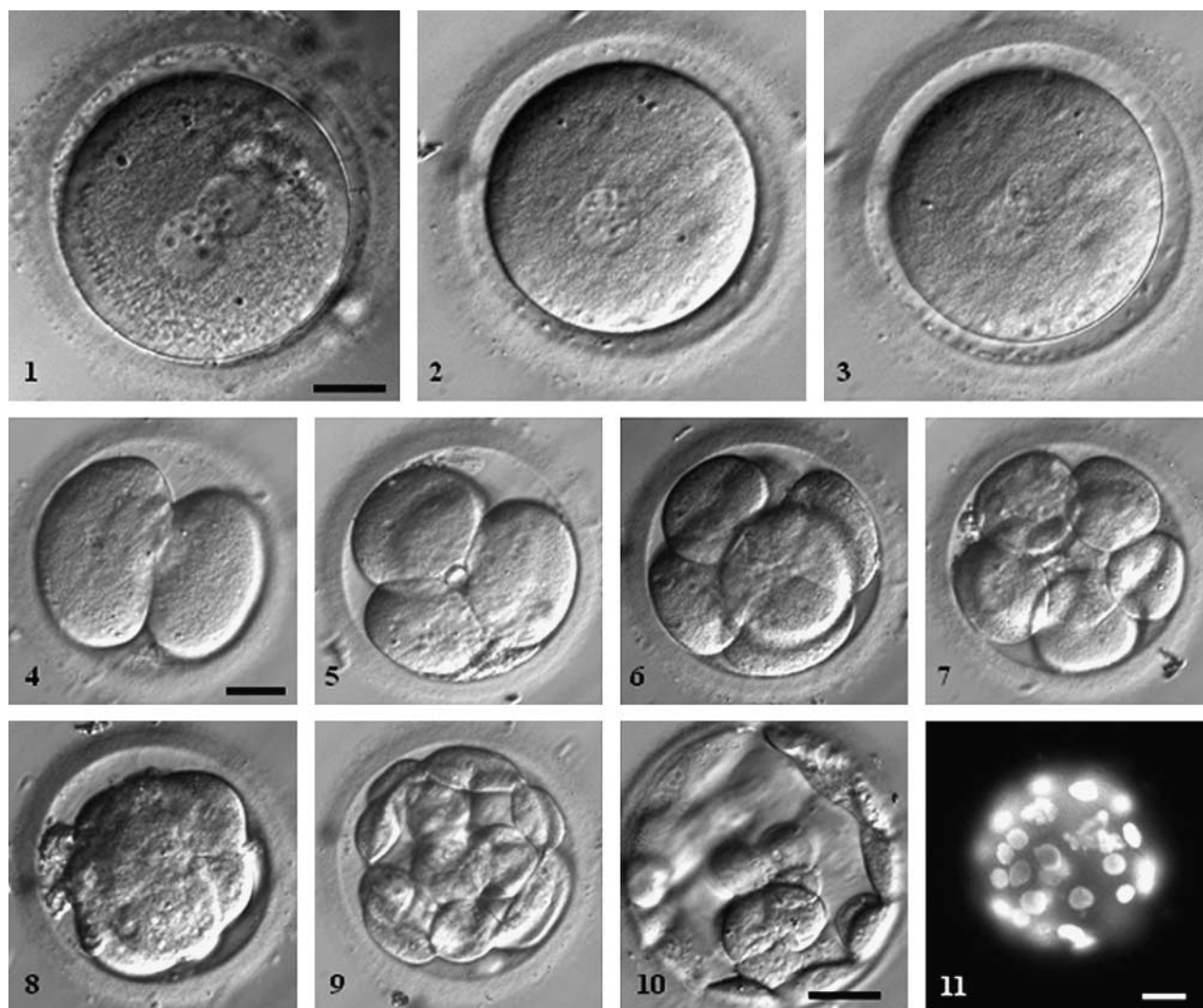
In the control group, 25 out of 28 (93%) fresh oocytes were viable and cleaved to the two-blastomere stage (Figure 2). The developmental rate to the 6–8 blastomere stage and to blastocysts was 84 and 29%, respectively.

For experimental group 1 (vitrification with cooling by direct plunging into liquid nitrogen), the rates of formation of the 2-cell embryo, 6–8 blastomere embryo and blastocysts were 62, 40 and 15%, respectively. For group 2 (vitrification with cooling of OPS located in a 0.5 ml straw), these rates were 65, 35 and 14%, respectively (Figure 2), and not significantly different from group 1.

Figure 3 shows the appearance of the vitrified pronuclear oocytes subjected to vitrification using OPS located inside the closed 0.5 ml straw. Just after warming, a dispersion of nucleoli was occasionally detected; later nucleoli were re-organized to a more polarized pattern and the initial dispersion had no influence on the further development of embryos.

## Discussion

There are two different technologies for cooling of cells prior to storage in liquid nitrogen: cooling by direct plunging into liquid nitrogen (at a temperature of  $>1000\text{--}10\,000^\circ\text{C}/\text{min}$ ; Isachenko *et al.*, 1997, 2000, 2001, 2003a,b, 2004a; Vajta *et al.*, 1998) and cooling in vapour of liquid nitrogen (at  $\sim 200^\circ\text{C}/\text{min}$ ; Szell *et al.*, 1990; Rall, 1993; Darvelid *et al.*, 1994; Rall and Wood, 1994; Dinnyes *et al.*, 1995; Vajta *et al.*, 1996; Mukaida *et al.*, 1998; Donnay *et al.*, 1998; Yokota *et al.*, 2001). This second methodology of ‘slow’



**Figure 3.** The same 2PN oocyte before vitrification (1), and after warming: for 5 min (2 and 3 at a different focus), 6 h (4), 18 h (5), 30 h (6), 42 h (7), 66 h (8), 78 h (9), 96 h (10) and 96 h, stained by Hoechst 33342 (11). Bar = 30  $\mu\text{m}$ .

cooling of cells prior to storage in liquid nitrogen is another proof of the secondary role of this parameter for the vitrification process.

All combinations of 'slow' or 'quick' cooling with 'slow' warming were the main cause for a decreasing viability of vitrified mouse embryos (Rall and Fahy, 1985; Rall, 1987; Rall and Wood, 1994).

Elevated warming rates and the absence of visible crystal formation during thawing of oocytes was shown to be most effective when the warming/cooling proportion was  $>1.3$ . For example, cooling at  $200^{\circ}\text{C}/\text{min}$  followed by warming at  $360^{\circ}\text{C}/\text{min}$  (warming/cooling proportion 1.3) is a more effective regime than cooling at  $2000^{\circ}\text{C}/\text{min}$  followed by warming at  $2400^{\circ}\text{C}/\text{min}$  (warming/cooling proportion 1.2) (Isachenko *et al.*, 1998, 1999).

In the opinion of the majority of authors, the high effectiveness of different protocols for the vitrification of oocytes and embryos with decreased volumes of cooled medium can be explained by the combination of high speeds of cooling and warming (Martino *et al.*, 1996; Vajta *et al.*, 1998; Lane *et al.*, 1999; Lane and Gardner, 2001; Mukaida *et al.*, 2003; Son *et al.*, 2003; Vanderzwalmen *et al.*, 2003). The results of our investigations with human oocytes do not support this point of view. For human oocytes, the relatively slow cooling rate in combination with rapid warming is as efficient as 'conventional' vitrification with regard to survival rates and embryo development.

Cremades *et al.*, (2004) reported the successful vitrification of human embryos using fine diameter plastic micropipettes, which were cooled in the vapour of liquid nitrogen and subsequently placed inside a pre-cooled cryotube. Similarly to our findings, this methodology also includes the parameter 'slow cooling' and 'rapid warming'; however, this methodology does not prevent the contact with nitrogen of an open system holding the biological objects.

'Slow' cooling of biological objects can also be used for cooling of a relatively large volume. To prevent the 0.25 ml straw from coming into direct contact with liquid nitrogen and eliminating the potential contamination risk associated with storage in liquid nitrogen, Kuleshova and Shaw (2000) have reported 'straw in straw' vitrification of mouse embryos. In their protocol, a standard 0.25 ml straw containing vitrification medium was located inside another 0.5 ml straw which was hermetically closed before plunging into liquid nitrogen. However, this method, in contrast to the one described herein, does not allow for rapid warming of a small volume and simultaneous removal of the cryoprotectant during the thawing process. Other data regarding 'straw in straw' cryopreservation of ovine germinal vesicle stage oocytes (Isachenko *et al.*, 2001) and mouse embryos (Walker *et al.*, 2004) have also been published.

Our finding regarding the minor importance of the speed of cooling for the vitrification of oocytes and embryos can probably be applied to all reproductive human cells including spermatozoa. We recently reported that vitrification of human spermatozoa by fast ( $20\,000^{\circ}\text{C}/\text{min}$ ) or relatively slow ( $200^{\circ}\text{C}/\text{min}$ ) cooling resulted in similar post-thaw characteristics (Isachenko *et al.*, 2004b).

The major point of the work presented here is that the described technique completely avoids direct contact between liquid nitrogen and the oocytes. In fact, any technology in reproductive biology and especially in a therapeutic medical approach must ensure and guarantee the full protection of biological objects from microorganisms (Gardner, 1998; Bielanski *et al.*, 2000). Liquid nitrogen, which is used for storage of frozen material, can be a source of contamination by these microorganisms (Tedder *et al.*, 1995; Bielanski *et al.*, 2000). Filtration or ultraviolet treatment of liquid nitrogen cannot guarantee the absence of contamination of biological material by viruses including human immunodeficiency virus (HIV). For example, Tedder *et al.* reported the contamination of blood probes by hepatitis virus during the time of storage of probes in liquid nitrogen (Tedder *et al.*, 1995). Different types of viruses, which are simple and very cryo-stable structures, may increase their virulence after direct plunging and storage in liquid nitrogen, like hepatitis virus (Hawkins *et al.*, 1996), papova virus (Charles and Sire, 1971), vesicular stomatitis virus (Schaffer *et al.*, 1976) and herpes virus (Jones and Darville, 1989).

In conclusion, vitrification of human pronuclear oocytes in OPS which are placed inside a hermetically closed container before plunging into liquid nitrogen allows a reliable isolation of oocytes from liquid nitrogen and avoids contamination by pathogenic microorganisms. Although this technique is associated with a relatively slow cooling rate, the developmental potential of these pronuclear oocytes is not compromised if the thawing process involves rapid warming and simultaneous removal of cryoprotectants.

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