Contents lists available at ScienceDirect



Editorial

North American Spine Society Journal (NASSJ)

journal homepage: www.elsevier.com/locate/xnsj



## Introduction to the NASSJ special issue on advances in regenerative therapy for spinal diseases



The spine is a complex and essential component of the human body, responsible for providing structural support, protecting the spinal cord, and facilitating movement. However, the spine is also susceptible to a range of injuries and degenerative conditions that can lead to chronic pain and disability. Regenerative medicine is expected to play a major role in treating this loss of spinal function.

Regenerative therapies targeting the elements that make up the spine can be divided broadly into bone, intervertebral disks, and spinal nerves.

Bone tissue regeneration has a long history of clinical application. Several proteins [1] and peptides [2] are already in widespread clinical use. Numerous studies are ongoing to enhance and improve the efficiency of bone regeneration capabilities. However, bone regeneration is often aimed at achieving bone fusion in spinal fusion procedures rather than at restoring the spine to its original state. Therefore, cytokine and cellular therapies for the intervertebral disks have been reported based on elucidating the cellular functions [3] and metabolic pathways of the disks to regenerate the spine while preserving spinal mobility [4].

In spinal cord research, there have been reports of active regenerative medicine that re-establishes spinal cord conduction pathways by regenerating neurons and their connections [5] rather than the passive approach to attenuate secondary injury mechanisms after spinal cord injury.

Although not in the true meaning of regeneration, this special issue also includes a review paper on advances in robotic assistance from the perspective of restoring motor function. Robotic assistance has emerged as a promising approach to facilitate gait function acquisition in individuals with neurological injuries, disorders, and age-related muscle weakness. It will play an essential role by combining robot technology and artificial intelligence (AI).

Regenerative medicine is spreading and expanding its reach and is still developing rapidly with the rise of new technologies such as genome editing, organoids [6], neuromodulation [7], and AI and data science. This special issue will help our readers understand the current state of regenerative therapy for spinal diseases, the avenues for future progress, and the implications for spine care.

## Declarations of competing interest

The author declare that there is no conflict of interet regarding the content of this manuscript.

Takashi Kaito, MD, PhD<sup>1</sup>

Department of Orthopaedic Surgery, Osaka University Graduate School of Medicine, 2-2 Yamadaoka, Suita, Osaka 565-0871, Japan

> *E-mail address:* takashikaito@ort.med.osaka-u.ac.jp <sup>1</sup> Tel: +81-06-6879-3552, Fax: +81-06-6879-3559

## References

- Seeherman H, Wozney JM. Delivery of bone morphogenetic proteins for orthopedic tissue regeneration. Cytokine Growth Factor Rev 2005;16(3):329–45. doi:10.1016/j.cytogfr.2005.05.001.
- [2] Arnold PM, Sasso RC, Janssen ME, et al. Efficacy of i-Factor bone graft versus autograft in anterior cervical discectomy and fusion: results of the prospective, randomized, single-blinded Food and Drug Administration Investigational Device Exemption Study. Spine (Phila Pa 1976) 2016;41(13):1075–83. doi:10.1097/BRS.00000000001466.
- [3] Sakai D, Nakamura Y, Nakai T, et al. Exhaustion of nucleus pulposus progenitor cells with ageing and degeneration of the intervertebral disc. Nat Commun 2012;3:1264. doi:10.1038/ncomms2226.
- [4] Kamatani T, Hagizawa H, Yarimitsu S, et al. Human iPS cell-derived cartilaginous tissue spatially and functionally replaces nucleus pulposus. Biomaterials 2022;284:121491. doi:10.1016/j.biomaterials.2022.121491.
- [5] Kitagawa T, Nagoshi N, Kamata Y, et al. Modulation by DREADD reveals the therapeutic effect of human iPSC-derived neuronal activity on functional recovery after spinal cord injury. Stem Cell Rep 2022;17(1):127–42. doi:10.1016/j.stemcr.2021.12.005.
- [6] Zhao Z, Chen X, Dowbaj AM, et al. Organoids. Nat Rev Methods Primers 2022;2(1):94. doi:10.1038/s43586-022-00174-y.
- [7] Powell MP, Verma N, Sorensen E, et al. Epidural stimulation of the cervical spinal cord for post-stroke upper-limb paresis. Nat Med 2023;29(3):689–99. doi:10.1038/s41591-022-02202-6.

FDA device/drug status: Not applicable. Author disclosure: *TK*: Nothing to disclose.

https://doi.org/10.1016/j.xnsj.2023.100215

Received 27 March 2023; Accepted 27 March 2023

Available online 3 April 2023

2666-5484/© 2023 The Author(s). Published by Elsevier Ltd on behalf of North American Spine Society. This is an open access article under the CC BY-NC-ND license (http://creativecommons.org/licenses/by-nc-nd/4.0/)