



Molecular study on gene and protein expression analysis of TGF beta1 - An in vitro model to develop drugs towards dentin tissue remodelling

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ABSTRACT

Introduction: TGF-1–3 are one-of-a-kind multifunctional growth factors. TGF-beta1 is active in the reconstruction of the dental pulp tissue, according to recent reports. Furthermore, dental pulp cells can divide into odontoblast-like cells, which will then develop reparative dentine.

Materials and Methods: DEMM were used to culture and preserve 3T3 cells. The cells were incubated with LPS after differentiation. 3t3 Cells were used to extract total RNA. It was necessary to amplify cDNA. Using specific reagents, Rt PCR was used to measure the genes of interest.

Results: TGF-beta1 mRNA has a role in protein expression in lipopolysaccharide (LPS) induced macrophage-like cells. TGF- β signals are largely related to the magnitude and duration and careful regulation of their ligand activation, both temporally and spatially. If appropriately activated, TGF- β signalling plays an important function in tissue remodelling.

Conclusion: TGF-beta1 mRNA has a role in protein expression in lipopolysaccharide (LPS) induced macrophage-like cells. TGF- β signals are largely related to the magnitude and duration and careful regulation of their ligand activation, both temporally and spatially. If appropriately activated, TGF- β signalling plays an important function in tissue remodelling. The evidence suggests that hVEGF has a therapeutic potential in regeneration and other disorders of the pulp.

Keywords: *Gene expression, Protein expression, TGF beta1, Dentin tissue remodelling*

INTRODUCTION

The precision time-spatial expression of glycoprotein-based bioactive molecules referred to as growth factors (GF) controls the crosstalk from the epithelial to the mesenchymal germ

layers, contributing to the distinction between the odontoblast. Terminally specialised hard tissue is formed by the odontoblast. These cells are responsible for the dentine extracellular

matrix (DECM) secretion, as well as the reconstruction of the dentine extracellular matrix (DECM). The GF fossils in the tissue matrix become a rich source of bioactive molecules after dentin mineralisation. To develop a multicellular organism into ever more complex life forms, coordination and control between individual cells must be established to ensure that the organism remains in order.(1)(2) Fundamental physiological processes, such as replication, differentiation, metabolism and apoptosis, are regulated by a thick, cytokine generating signal network, growth

factors or polypeptide hormones.(3)The family of transforming growth factor- β (TGF- β) is especially significant among the polypeptide/hormone-induced signals. (4,5)

TGF- β 1–3 is a rare multi-functional growth factor since it is only found in mammals that are primarily latently secreted and retained in the extracellular matrix immediately (ECM). Only after ligand activation can the biological activity of a TGF- β be provided.(6) Most notably, activation of TGF- β is required to recruit stem/progenitor cells for tissue regeneration/remodelling at the right time.(7)(8)Our knowledge of these mechanisms, it is essential for the characterisation of molecular and cellular events necessary for dental tissue injury and recovery. However, there is no specific molecular basis for differentiation in odontoblast but signalling molecules have been involved in controlling aspects of tooth growth and tissue repair, particularly those in the superfamily transforming the growth factor-beta (TGF-b). The involvement of TGF-b receptors I and II is observed by odontoblasts and dental pulp cells, which could modulate the activity of the dental pulp and odontoblast. TGF-b1 is also used to improve the formation of reparative dentine in rat molars as a pulp-capping medicine. (9)The regulation of TGF-b1 in dental pulp cells is not well understood, however, as a response to external stimuli.

Vascular endothelial growth factor (VEGF) is a glycoprotein that has the capacity to improve microvascular permeability.(10) In rheumatoid arthritis, delayed hypersensitivity, salivary glands, corpus luteum, and endometrial cells,

VEGF has been identified. VEGF has recently been linked to the initiation and progression of gingivitis to periodontitis.(11)(12)VEGF-A (also known as VEGF) is a member of the VEGF family of growth factors that regulates its effects by binding to its primary receptor, vascular endothelial growth factor receptor-2 (VEGFR2). VEGF promotes endothelial cell (EC) proliferation, increased pulpal blood flow, and capillary hyperpermeability when bound to the receptor. VEGF influences other angiogenic factors and is released mainly by EC's, pulp inflammatory cells and fibroblasts. Several inflammatory mediators, including prostaglandins, interleukin-6, and interleukin-1, have been found to induce VEGF expression in the dental pulp.(13–17)(15,18)

The broad-scale profiling of pulp and odontoblasts gene expression makes it possible to gain an overview of the cellular processes during health and disease in these tissues. It also reveals possible biomarkers of pulp protection potential for diagnosis and estimation and allows identifying potential treatment target proteins.

MATERIALS AND METHODS

Procurement and culture of cell line

The NCCS Pune, India and cultivated 3T3-L1 cells were derived in 5% CO₂/95 percent of humidified air, at 37 NCC. The cells had been held at 25 mM HEPES, 100 U / mL (100 U / mL; 100 μ g / mL) and 10 percent calf serum, in the Dulbecco Eagle Modified Medium (DMEM). The cells were segregated in 10% Fetal Bovine Serum (FBS), 0.25 μ M dexamethasone, 0.5 mM 3-isobutyl 1-methylxanthine, 5 μ g/mL insulin, 2 days after confluence (daily 0) in DMEM, and 10% FBS/DMEM with 72 h insulin. Cells were incubated for 10 per cent FBS/DMEM. Finally, every 2 days 10% of FBS/DMEM is updated.

Cell treatment of T3-L1

On the eighth day Following differentiation, the colonies of cells were pretreated for 24 hours with a 0.1 mM alliin-containing medium (Sigma Chemical Co.). Cells grown in the same environment (100 ng/mL) were then incubated for 1 hour prior to harvesting. The medium

cultivated was gathered and deposited in pipes at -80 C.

Analysis of gene expression by Rt PCR

tRNA Isolation

The Total RNA extracted with the TRIR package (total RNA reagent insulation) from 3T3 cells. In short, cells with 1 ml TRIR were sonicated, and homogeneous material was immediately moved to the microfuge tube at -80 ° C for 60 minutes such that nucleoproteins could be dissociated fully. Add 0,2 ml chloroform, whirl for 1 minute, and drop it on ice for 5 minutes at 4°C. Centrifugation of homogenates took place at 12000 x g for 15 min at 4°C. In a fresh microfuge tube, an equivalent amount of isopropanol has been carefully transported, spurred for 15 sec and placed on ice for 10 minutes at 4 degrees Celsius. At 12,000 g x 10 min at 4°C, the samples were centrifuged. RNA pellets have been washed with 1 mL of 75% ethanol by vortexing and subsequent centrifuge for 5 minutes at 7.500 x g (4°C). Supernatant has been discarded. The supernatant was separated, and the RNA pellets were dissolved in 50 l of autoclaved Milli-Q water by heating in a water bath for 10 minutes at 60°C.

RNA Quantification

The absorbance (A) at 260/280 nm of a diluted RNA sample was measured spectrophotometrically. One absorbance at 260 nm is produced by 40 g of RNA in 1 ml. As a result, the concentration of RNA in a particular sample may be calculated by multiplying its A260 by 40 and adding a dilution factor. The

purity of an RNA preparation may be estimated by dividing its absorbance at 260 and 280 nm by its absorbance at 260 and 280 nm. A 260/280 nm absorbance ratio greater than 1.8 is called high quality RNA. The received RNA purity was 1.8.

Reverse Transcriptase – Polymerase Chain Reaction (RT – PCR)

RT-PCR is a method for translating and Increasing the number of copies of a single-stranded RNA template into a large amount of double-stranded DNA.

1. First strand reaction: Using OligodT, dNTPs, and reverse transcriptase, complementary DNA (cDNA) is synthesised from the mRNA template.
2. Following the reverse transcriptase reaction, normal PCR (also known as the "second strand reaction") is started.

Principle

RT-PCR is a technique for amplifying cDNA copies of RNA. Enzymatic translation of mRNA into a single cDNA template. An oligodeoxynucleotide primer is hybridised to the mRNA and then expanded by an RNA-dependent DNA polymerase to create a cDNA clone.

First strand DNA synthesis

The RT kit was purchased from Eurogentec (Seraing, Belgium).

Procedure

The total reaction volume of 20 µl contains the following.

Components	Volume for 20 µl reaction
10 X RT buffer	2 µl
25 mM MgCl ₂	4 µl
2.5 mM dNTP	4 µl
OligodT	1 µl
RNase Inhibitor	0.4 µl
Euroscript RT	0.5 µl
RNase free water	Varies according to RNA template volume
RNA Template (2 µg)	Varies

The tubes were mixed gently and spun briefly and kept in the thermocycler programmed as initiation step at 25°C for 10 min, Reverse transcriptase step at 48°C for 30 min, inactivation of RT enzyme step at 95°C for 5 min. After the reaction, samples were stored at -20°C or proceeded to the PCR.

Quantitative Real-Time PCR

Principle

The objective of a PCR is to produce a high number of transgene. The Polymerase Chain Reaction. A PCR consists of three main stages, which are as follows: 3 minutes of denaturation at 94°C: Both enzymatic reactions cease as the double strand of DNA breaks, producing single-stranded DNA. at 94°C for 2-5 minutes. Apply for 30 sec at 54°C-65°C. To ensure the extension phase, ionic bonds consistently form and break between the basement and the individual stranded template. Extension at 72°C for 30 sec: Primers which are in positions that don't match exactly (due to the higher temperature) and don't extend the fragment. The foundations (complementing the template) are combined with the 3' sides first (polymerase adds 5' to 3' to dNTP, reading 3' to 5' on the side of the template; the basis is applied in addition to the template). Due to the copying of two strands during the PCR, the number of copies of the gene increases exponentially.

1. 2X Reaction buffer: The PCR master mix kit was purchased from Takara Bio Inc., Japan. Contains TaKaRa Ex Taq HS (a hot-start PCR enzyme) dNTP Mixture, Mg²⁺, TliRNase H (a heat-resistant RNase H that reduces the inhibition of PCR by residual mRNA), and SYBR Green I.

2. Forward primer (10µM)

3. Reverse primer (10µM)

4. cDNA- Template

5. Autoclaved milli Q water

6. Primers: The following gene-specific oligonucleotide primers were used.



FIG 1: RNA Conversion Kit

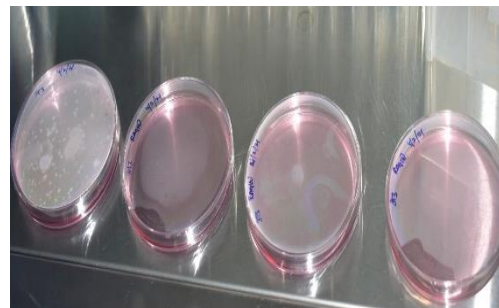


FIG 2A: Cell seeding

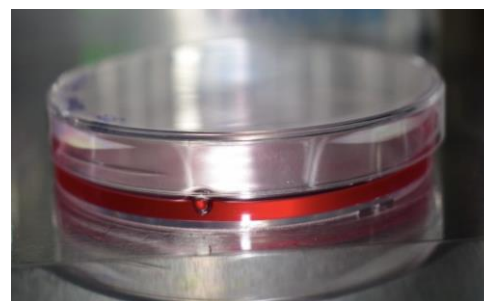


FIG 2B: Cell culture plates



FIGURE 3: Centrifuge

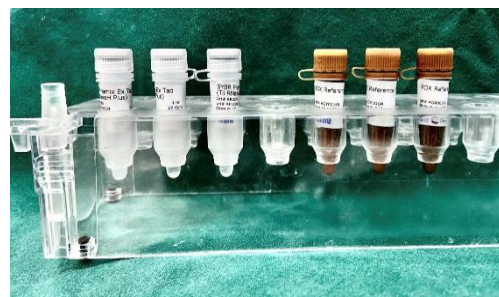


FIGURE 4: Reagents used



FIGURE 5: Rt-PCR

RESULTS

VEGF mRNA

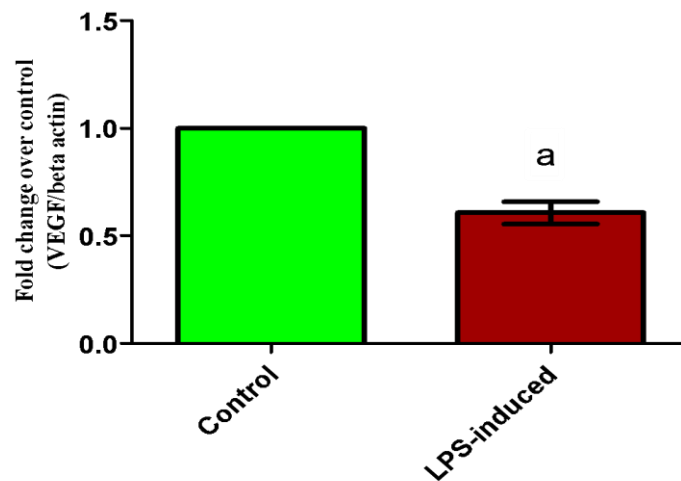


FIGURE 6: Effect of TGF beta1 on mRNA expression of VEGF. The mRNA expression levels were determined using RT-PCR. Each bar represents mean \pm SEM (n=6). Significance at $P < 0.05$, Significantly different from untreated 3t3 fibroblast cells.

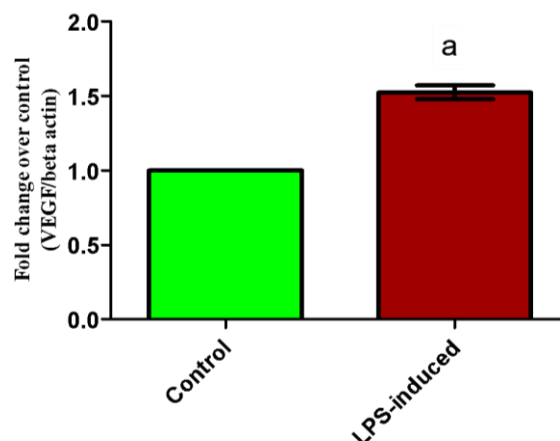


FIGURE 7: Effect of LPS induced cells on mRNA expression of IL-1 β . The mRNA expression levels were determined using RT-PCR. Each bar represents mean \pm SEM (n=6). Significance at $P < 0.05$, a Significantly different from untreated 3t3 fibroblast cells.

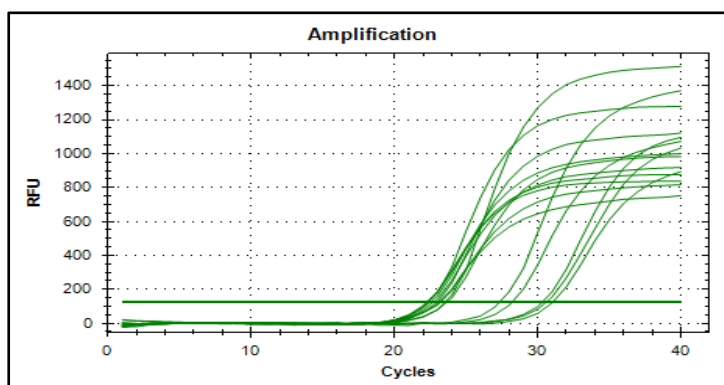


FIGURE 7: Amplification plots showing mRNA expression of IL-1 β in LPS-induced 3T3-fibroblast cells

TABLE 1: Effect of LPS induced cells on mRNA expression of IL-1 β .Statistical analysis done using unpaired t-test,shows a mean of 0.523 \pm 0.04 Significance at P <0.05.

Mean	1.000	0.523
Std. Deviation	0.000	0.08083

TABLE 2: Effect of LPS induced cells on mRNA expression of VEGF-1 .Statistical analysis done using unpaired t-test,shows a mean of 0.6067 \pm 0.09 Significance at P <0.05

Mean	1.000	0.6067
Std. Deviation	0.000	0.09018

DISCUSSION

Odontoblasts are the cells that form dentine and provide the teeth with a natural immunological barrier. (19) Odontoblasts have as their major purpose the synthesis and secretion of collagen, along with other non-collagenous proteins that constitute the dentin biological matrix. By influencing the composition of the cell matrix and the inflow of odontoblasts, mineral ions govern the mineralization of the dentin matrix. (20) Odontoblasts are the secretive elements of a dentine matrix that contain a storage of physiologically active molecules, such as platelets, endothelial growth, fibroblasts, metalloproteinases as well as TGF- β super-family members.

The diffusion of bacterial metabolic acids during cavities may solubilize such bioactive compounds from the dentine matrix's soluble tissue body and expose them to the insoluble fabric body. Further bacterial proteolytics may

help to and maybe control this process at more advanced phases of cavities. Furthermore, these chemicals establish a healing process that provides chemotactic indications for recruiting inflammatory cells and undifferentiated pulp cells to the damage area, stimulates angiogenic reaction and initiates tissue mobility for repair thereafter. (21,22) Releasing TGF- β from the dentin matrix will need its diffusion to the pulp cells for signalling events, predominantly through dentinal tubules. A number of factors may affect the agent's capacity to engage in such occurrences, e.g. its release into biologically active form, its contact with the dentinic material in solubilised form or by immobilising the insoluble matrix, and the dentinal tubule diffusion distance.

The vascular system of the body serves the vital tasks of nutrition supply and disposal of waste materials for cells and tissues. In chronic and acute inflammations such as pulpitis, vascular

permeability is dramatically enhanced (23,24). Endotoxins generated by caries promoting bacteria help in dental pulp cells' synthesis of VEGF, (25) and VEGF is a crucial regulator for pulp damage, which leads to increased permeability of the vascular tissues and angiogenesis. The results of this study show that VEGF is capable of supporting in vitro and in vivo differentiation and proliferation of pulpal tissue cells.

Much TGF- β in the dentine matrix seems to be active and is linked to the components of the dentine matrix, which can control its availability and biodiversity. (26) A research by Lucchini et al.;(27) has shown that differentiated odontoblasts produce and place TGF- β in the dentine matrix, which can react, permitting autocratic action modalities. Detection on odontoblast or other pulpal cells of receptor TGF- β I and II reveals the existence of an active signal complex on those cells for signal transduction. During the carious demineralisation, the target cells for signalling molecules will change, but odontoblast will be of key relevance in terms of healing. (24) TGF- β commences its effects with the signal pathway Smad by engaging two distinct subtypes of serine/threonine kinase receptors killed in odontoblast and pulp cell types Type I and Type II. (28) The type I receptor produced by Ligand-I receptor activation leads to type I receptor kinase activating, which are phosphorylated in turn by receptor-controlled Smads 2/3.

The phosphorylated Smad2/3 will then connect Smad4, an ordinary Smad mediator. These heteromeric complexes are sent to the nucleus where gene transcript is regulated by either DNA binding protein association or by a direct binding to enhance gene sequences. (29,30) Inhibitors Smad6 and Smad7 belong to the Smad's inhibitor and operate as TGF- β inhibitors, maybe by competitive contact with the type I or Smad4 receiver. (31) The solubilized TGF- β s may spread to odontoblast and pulpal cells located underneath a damaged region during reactionary dentinogenesis and indicate an up-regulation of the secretive activity of those cells(32,33) This activation of the odontoblasts survivors will cause new matrices to be focally secreted from the pulp-dentin contact. (34)

A few investigations have shown that TGF- β increases extracellular matrix production and also causes in vitro (35) and in vivo odontoblastic cytodifferentiation. (35,36) In an in vivo investigation using transgenic mice overexpressing TGF- β 2 of DenBesten et al.;(37) their mineral dentine was increased in comparison with their fungal litterates. It was demonstrated that TGF- β 2 was present in mature dentin; hence TGF- β 2 also appears to enhance odontoblast development in the matured dentin, hence increasing the rate of dentine apposition in minerals. (38) An in vitro work by Sloan and Smith(41) has shown that in the region immediately surrounding agarose beads containing those growth factors, TGF- β 1 and TGF- β 3 enhance predentin thickness of the cultivated tooth. The localisation of predentin thickness shows reactive dentinogens. TGF- β also plays a major part in module soft and hard tissue regeneration after a carious lesion, which increases the development of remediated dentine. The production of reparative dentine is caused by the recruitment and multiplication of stem cell pulp cells. Pasavant et al. (39) earlier study The creation of secreted protein acidic, high in protein is shown to have been induced by TGF- β , which in turn causes migration of dental pulp cells towards the odontoblastic layer.(40) The dental pulp stem cells are lured to the site of an injury to replace permanently wounded odontoblasts into second generations of odontoblasts and odontoblasts.(41,42) Pulp cells may be distinguished from pre odontoblast and odontoblast by TGF β 1 and in reparatory dentinogenesis following tissue damage.(43) In a recent in vivo investigation, TGF- β indicated that pre-odontoblasts are differentiated and functional odontoblastic cells are formed. (44,45)

Several studies show that TGF- β 1 and TGF β 3 increase subodontoblastic layer proliferation and the production of cells similar to odontoblast. (46)(47)(45) Furthermore, TGF- β 1 promotes the formation of collagen type I by the odontoblastic pulp cells.(48) TGF- β 3, by elevation of osteocalcin and collagen type I expression, has been observed by Huojia et al.(49) and may govern differentiating the dental pulp stem cells to odontoblasts. During the dentin-pulp complex

repair processes, after tissue damage, such activities might be crucial.(50)

Human Deciduous teeth which were exfoliated showed that there was an expression of the VEGF receptors which are membrane bound (VEGFR-1) and 2, vascular endothelial cadherin and CD31(51) In Another study it was stated that VEGF stimulated the increase and proliferation of ALP in pulp tissue.(52)It has been extensively documented that Runx-2 and ALP gene expression levels play essential roles in the early and intermediate phases of differentiation during bone formation, whereas BSP, OPN, and OCN expression in the late phases help in differentiation of osteoblasts, they play crucial roles.(53)

Two key dentin proteins which are non collagenous are produced by the DSPP gene which are the dentin phosphoprotein and the dentin sialoprotein which is necessary for the remineralisation of the dentin.(54)(55)DMP-1 gene is linked to dentinogenesis imperfecta and is expressed by the odontoblasts.(56)The current study's findings showed that VEGF can stimulate hDPC calcification and segregation and significantly enhance gene expression of Runx2,SP7, ALP, Col 1, DMP1,OCN, BMP2, BMP3, and DSPP in pulp cell culture in vitro. As a result, the findings of this study show that VEGF can promote calcification and osteoblast/odontogenic development in human DPCs in vitro.(57)

Reparative dentin is formed in response to any severe injury and it is formed by the replacement odontoblasts.It is a type of tertiary dentin formation which consists of the reparative and reactionary dentin.(58) In tissue regeneration plays a key role as it helps in supplying nutrients and removes waste and helps in proper functioning of the vascular network(59)

Pulpal tissue typically gets only one-ended blood supply, hence the root apex of the tooth is prone to infection,injury and permanent pulpitis..(59) Local application of angiogenic growth factors has been proposed to promote local angiogenesis at the site of dental tissue regeneration following tooth root fracture.(60) Applying different techniques have been used in various research to

promote angiogenesis for their disease model.(61)(62)(63) Mullane et al (64) showed that recombinant hVEGF enhanced the new vascularization of the pulp tissue. Our present study in vivo results showed that hVEGF increases the growth of the dental pulp and in the tooth pulp, neovascularization and the creation of reparative dentin occur.

In conclusion, the present study shows that, hVEGF has beneficial effects on pulp tissue proliferation, differentiation, mineralization, neovascularization, and the development of the reparative dentin formation in vitro and also in vivo.Our team has a plethora of research and knowledge that has resulted in high-quality publications.(65–80) The evidence suggests that hVEGF has a therapeutic potential in regeneration and other disorders of the pulp. In addition, the current study shows that a gene therapy method might be beneficial in the treatment of dental pulp disorders. In the following phase, researchers will utilise hVEGF and inflammatory inhibitors to see if reversible and irreversible pulpitis can be treated, with an emphasis on irreversible pulpitis.Depending on the strength of the initial reaction and the circumstances surrounding the freshly deposited dentin matrix. was generated, the dentin-pulp complex can respond to a carious lesion by localised deposition of a tertiary dentin matrix that can be described as either reactive or regenerative in nature. Molecular signalling to induce tertiary dentinogenesis is provided by the TGF-super family, which is trapped in the dentin matrix and may be solubilized or exposed during carious demineralization. TGF-s boost the upregulation of odontoblast cells' synthetic and secretory activity in reactionary dentinogenesis, resulting in the secretion of a reactionary dentin matrix.TGFs can also stimulate the proliferation, migration, and differentiation of odontoblast-like cells, resulting in the production of reparative dentin.

REFERENCES

1. Crane JL, Cao X. Bone marrow mesenchymal stem cells and TGF- β signaling in bone remodeling [Internet]. Vol. 124, Journal of Clinical Investigation. 2014. p. 466–72. Available from: <http://dx.doi.org/10.1172/jci70050>

2. Crane JL, Xian L, Cao X. Role of TGF- β Signaling in Coupling Bone Remodeling [Internet]. *Methods in Molecular Biology*. 2016. p. 287–300. Available from: http://dx.doi.org/10.1007/978-1-4939-2966-5_18
3. Annes JP. Making sense of latent TGFbeta activation [Internet]. Vol. 116, *Journal of Cell Science*. 2003. p. 217–24. Available from: <http://dx.doi.org/10.1242/jcs.00229>
4. Annes JP, Chen Y, Munger JS, Rifkin DB. Integrin α V β 6-mediated activation of latent TGF- β requires the latent TGF- β binding protein-1 [Internet]. Vol. 165, *Journal of Cell Biology*. 2004. p. 723–34. Available from: <http://dx.doi.org/10.1083/jcb.200312172>
5. Flaumenhaft R, Abe M, Sato Y, Miyazono K, Harpel J, Heldin CH, et al. Role of the latent TGF-beta binding protein in the activation of latent TGF-beta by co-cultures of endothelial and smooth muscle cells [Internet]. Vol. 120, *Journal of Cell Biology*. 1993. p. 995–1002. Available from: <http://dx.doi.org/10.1083/jcb.120.4.995>
6. Gordon KJ, Blobel GC. Role of transforming growth factor- β superfamily signaling pathways in human disease [Internet]. Vol. 1782, *Biochimica et Biophysica Acta (BBA) - Molecular Basis of Disease*. 2008. p. 197–228. Available from: <http://dx.doi.org/10.1016/j.bbadis.2008.01.006>
7. Ehnert S, Zhao J, Pscherer S, Freude T, Dooley S, Kolk A, et al. Transforming growth factor β 1 inhibits bone morphogenetic protein (BMP)-2 and BMP-7 signaling via upregulation of Ski-related novel protein N (SnoN): possible mechanism for the failure of BMP therapy? [Internet]. Vol. 10, *BMC Medicine*. 2012. Available from: <http://dx.doi.org/10.1186/1741-7015-10-101>
8. Magloire H, Romeas A, Melin M, Couble ML, Bleicher F, Farges JC. Molecular regulation of odontoblast activity under dentin injury. *Adv Dent Res*. 2001 Aug;15:46–50.
9. Nishikawa H, Ueno A, Nishikawa S, Kido J, Ohishi M, Inoue H, et al. Sulfated Glycosaminoglycan Synthesis and Its Regulation by Transforming Growth Factor- β in Rat Clonal Dental Pulp Cells [Internet]. Vol. 26, *Journal of Endodontics*. 2000. p. 169–71. Available from: <http://dx.doi.org/10.1097/00004770-200003000-00010>
10. Grando Mattuella L, Westphalen Bento L, de Figueiredo JAP, Nör JE, de Araujo FB, Fossati ACM. Vascular endothelial growth factor and its relationship with the dental pulp. *J Endod*. 2007 May;33(5):524–30.
11. Tran-Hung L, Laurent P, Camps J, About I. Quantification of angiogenic growth factors released by human dental cells after injury. *Arch Oral Biol*. 2008 Jan;53(1):9–13.
12. Zadeh G, Koushan K, Pillo L, Shannon P, Guha A. Role of Ang1 and Its Interaction with VEGF-A in Astrocytomas [Internet]. Vol. 63, *Journal of Neuropathology & Experimental Neurology*. 2004. p. 978–89. Available from: <http://dx.doi.org/10.1093/jnen/63.9.978>
13. Nishanthine C, Miglani R, R I, Poorni S, Srinivasan MR, Robaian A, et al. Evaluation of Fluoride Release in Chitosan-Modified Glass Ionomer Cements. *Int Dent J*. 2022 Dec;72(6):785–91.
14. Pandiyan I, Sri SD, Indiran MA, Rathinavelu PK, Prabakar J, Rajeshkumar S. Antioxidant, anti-inflammatory activity of -mediated selenium nanoparticles: An study. *J Conserv Dent*. 2022 Jun 13;25(3):241–5.
15. Janani K, Teja KV, Ajitha P. Cytotoxicity of oregano essential oil and calcium hydroxide on L929 fibroblast cell: A molecular level study. *J Conserv Dent*. 2021 Sep-Oct;24(5):457–63.
16. Ramamurthy S, Thiagarajan K, Varghese S, Kumar R, Karthick BP, Varadarajan S, et al. Assessing the Antioxidant and Anti-inflammatory Activity of Crude Extract. *J Contemp Dent Pract*. 2022 Apr 1;23(4):437–42.
17. Shukla AK, Iravani S. Green Synthesis, Characterization and Applications of Nanoparticles. Elsevier; 2018. 548 p.
18. Nandakumar M, Nasim I. Effect of intracanal cryotreated sodium hypochlorite on postoperative pain after root canal treatment - A randomized controlled clinical trial. *J Conserv Dent*. 2020 Nov 5;23(2):131–6.
19. Veerayutthwilai O, Byers MR, Pham TTT, Darveau RP, Dale BA. Differential regulation of immune responses by odontoblasts [Internet]. Vol. 22, *Oral Microbiology and Immunology*. 2007. p. 5–13. Available from: <http://dx.doi.org/10.1111/j.1399-302x.2007.00310.x>
20. Arana-Chavez VE, Massa LF. Odontoblasts: the cells forming and maintaining dentine [Internet]. Vol. 36, *The International Journal of Biochemistry & Cell Biology*. 2004. p. 1367–73. Available from: <http://dx.doi.org/10.1016/j.biocel.2004.01.006>
21. Smith AJ, Murray PE, Sloan AJ, Matthews JB, Zhao S. Trans-dentinal Stimulation of Tertiary Dentinogenesis [Internet]. Vol. 15, *Advances in Dental Research*. 2001. p. 51–4. Available from:

- <http://dx.doi.org/10.1177/08959374010150011301>
22. Duncan HF, Cooper PR. *Clinical Approaches in Endodontic Regeneration: Current and Emerging Therapeutic Perspectives*. Springer; 2018. 194 p.
 23. Vries IG de, de Vries IG, Wisse E. Ultrastructural localization of dentine phosphoprotein in rat tooth germs by immunogold staining [Internet]. Vol. 91, *Histochemistry*. 1989. p. 69–75. Available from: <http://dx.doi.org/10.1007/bf00501914>
 24. Sloan AJ, Matthews JB, Smith AJ. TGF-beta receptor expression in human odontoblasts and pulpal cells. *Histochem J*. 1999 Aug;31(8):565–9.
 25. McLachlan JL, Smith AJ, Sloan AJ, Cooper PR. Gene expression analysis in cells of the dentine–pulp complex in healthy and carious teeth [Internet]. Vol. 48, *Archives of Oral Biology*. 2003. p. 273–83. Available from: [http://dx.doi.org/10.1016/s0003-9969\(03\)00003-7](http://dx.doi.org/10.1016/s0003-9969(03)00003-7)
 26. Goldberg M. *Phosphorylated Extracellular Matrix Proteins of Bone and Dentin*. Bentham Science Publishers; 2012. 464 p.
 27. Lucchini M, Romeas A, Couble ML, Bleicher F, Magloire H, Farges JC. TGF beta 1 signaling and stimulation of osteoadherin in human odontoblasts in vitro. *Connect Tissue Res*. 2002;43(2-3):345–53.
 28. He WX, Niu ZY, Zhao SL, Jin WL, Gao J, Smith AJ. TGF- β activated Smad signalling leads to a Smad3-mediated down-regulation of DSPP in an odontoblast cell line [Internet]. Vol. 49, *Archives of Oral Biology*. 2004. p. 911–8. Available from: <http://dx.doi.org/10.1016/j.archoralbio.2004.05.005>
 29. Wieder R. The Roles of FGF-2 TGF Beta and TGF Beta Receptor 2 in Breast Cancer Dormancy [Internet]. 2003. Available from: <http://dx.doi.org/10.21236/ada418963>
 30. Yan Q, Chen W, Song H, Long X, Zhang Z, Tang X, et al. Tofacitinib Ameliorates Lupus Through Suppression of T Cell Activation Mediated by TGF-Beta Type I Receptor. *Front Immunol*. 2021 Jul 29;12:675542.
 31. Dijke P, Heldin CH. *Smad Signal Transduction: Smads in Proliferation, Differentiation and Disease*. Springer Science & Business Media; 2007. 472 p.
 32. Murray PE, Windsor LJ, Smyth TW, Hafez AA, Cox CF. Analysis of pulpal reactions to restorative procedures, materials, pulp capping, and future therapies. *Crit Rev Oral Biol Med*. 2002;13(6):509–20.
 33. Kiba H, Hayakawa T, Nakanuma K, Yamazaki M, Yamamoto H. Pulpal reactions to two experimental bonding systems for pulp capping procedures [Internet]. Vol. 42, *Journal of Oral Science*. 2000. p. 69–74. Available from: <http://dx.doi.org/10.2334/josnusd.42.69>
 34. Goldberg M. *The Dental Pulp: Biology, Pathology, and Regenerative Therapies*. Springer; 2014. 282 p.
 35. Bègue-Kirn C, Smith AJ, Ruch JV, Wozney JM, Purchio A, Hartmann D, et al. Effects of dentin proteins, transforming growth factor beta 1 (TGF beta 1) and bone morphogenetic protein 2 (BMP2) on the differentiation of odontoblast in vitro. *Int J Dev Biol*. 1992 Dec;36(4):491–503.
 36. Leonard CM, Fuld HM, Frenz DA, Downie SA, Massague J, Newman SA. Role of transforming growth factor- β in chondrogenic pattern formation in the embryonic limb: Stimulation of mesenchymal condensation and fibronectin gene expression by exogenous TGF- β and evidence for endogenous TGF- β -like activity [Internet]. Vol. 145, *Developmental Biology*. 1991. p. 99–109. Available from: [http://dx.doi.org/10.1016/0012-1606\(91\)90216-p](http://dx.doi.org/10.1016/0012-1606(91)90216-p)
 37. DenBesten PK, Machule D, Gallagher R, Marshall GW, Mathews C, Filvaroff E. The Effect of TGF- β 2 on Dentin Apposition and Hardness in Transgenic Mice [Internet]. Vol. 15, *Advances in Dental Research*. 2001. p. 39–41. Available from: <http://dx.doi.org/10.1177/08959374010150010901>
 38. Finkelman RD, Mohan S, Jennings JC, Taylor AK, Jepsen S, Baylink DJ. Quantitation of growth factors IGF-I, SGF/IGF-II, and TGF- β in human dentin [Internet]. Vol. 5, *Journal of Bone and Mineral Research*. 2009. p. 717–23. Available from: <http://dx.doi.org/10.1002/jbmr.5650050708>
 39. Pavasant P, Yongchaitrakul T, Pattamapun K, Arksornnukit M. The synergistic effect of TGF-beta and 1,25-dihydroxyvitamin D3 on SPARC synthesis and alkaline phosphatase activity in human pulp fibroblasts. *Arch Oral Biol*. 2003 Oct;48(10):717–22.
 40. Pavasant P, Yongchaitrakul T. Secreted protein acidic, rich in cysteine induces pulp cell migration via α v β 3 integrin and extracellular signal-regulated kinase [Internet]. Vol. 14, *Oral Diseases*. 2008. p. 335–40. Available from: <http://dx.doi.org/10.1111/j.1601-0825.2007.01383.x>
 41. Téclès O, Laurent P, Zygouritsas S, Burger AS, Camps J, Dejou J, et al. Activation of human

- dental pulp progenitor/stem cells in response to odontoblast injury [Internet]. Vol. 50, Archives of Oral Biology. 2005. p. 103–8. Available from: <http://dx.doi.org/10.1016/j.archoralbio.2004.11.009>
42. Liu J, Jin T, Ritchie HH, Smith AJ, Clarkson BH. In vitro differentiation and mineralization of human dental pulp cells induced by dentin extract. *In Vitro Cell Dev Biol Anim.* 2005 Jul;41(7):232–8.
 43. Tziafas D. The future role of a molecular approach to pulp-dentinal regeneration. *Caries Res.* 2004 May;38(3):314–20.
 44. Tziafas D. Induction of Reparative Dentinogenesis In Vivo: A Synthesis of Experimental Observations [Internet]. Vol. 32, Connective Tissue Research. 1995. p. 297–301. Available from: <http://dx.doi.org/10.3109/03008209509013737>
 45. Tziafas D, Papadimitriou S. Role of exogenous TGF-beta in induction of reparative dentinogenesis in vivo. *Eur J Oral Sci.* 1998 Jan;106 Suppl 1:192–6.
 46. Deng M, Shi J, Smith AJ, Jin Y. Effects of transforming growth factor β 1 (TGF β -1) and dentin non-collagenous proteins (DNCP) on human embryonic ectomesenchymal cells in a three-dimensional culture system [Internet]. Vol. 50, Archives of Oral Biology. 2005. p. 937–45. Available from: <http://dx.doi.org/10.1016/j.archoralbio.2005.03.005>
 47. Sloan AJ, Smith AJ. Stimulation of the dentine-pulp complex of rat incisor teeth by transforming growth factor-beta isoforms 1-3 in vitro. *Arch Oral Biol.* 1999 Feb;44(2):149–56.
 48. Melin M, Joffre-Romeas A, Farges JC, Couble ML, Magloire H, Bleicher F. Effects of TGFbeta1 on dental pulp cells in cultured human tooth slices. *J Dent Res.* 2000 Sep;79(9):1689–96.
 49. Huojia M, Muraoka N, Yoshizaki K, Fukumoto S, Nakashima M, Akamine A, et al. TGF-beta3 induces ectopic mineralization in fetal mouse dental pulp during tooth germ development [Internet]. Vol. 47, Development, Growth and Differentiation. 2005. p. 141–52. Available from: <http://dx.doi.org/10.1111/j.1440-169x.2005.00790.x>
 50. Rajendran R, Nair KR, Sandhya R, Ashik PM, Veedu RP, Saleem S. Evaluation of remineralization potential and cytotoxicity of a novel strontium-doped nanohydroxyapatite paste: An study. *J Conserv Dent.* 2020 Jul-Aug;23(4):330–6.
 51. Sakai VT, Zhang Z, Dong Z, Neiva KG, Machado MAAM, Shi S, et al. SHED differentiate into functional odontoblasts and endothelium. *J Dent Res.* 2010 Aug;89(8):791–6.
 52. Artese L, Rubini C, Ferrero G, Fioroni M, Santinelli A, Piattelli A. Vascular endothelial growth factor (VEGF) expression in healthy and inflamed human dental pulps. *J Endod.* 2002 Jan;28(1):20–3.
 53. Botero TM, Son JS, Vodopyanov D, Hasegawa M, Shelburne CE, Nör JE. MAPK signaling is required for LPS-induced VEGF in pulp stem cells. *J Dent Res.* 2010 Mar;89(3):264–9.
 54. Feng JQ, Luan X, Wallace J, Jing D, Ohshima T, Kulkarni AB, et al. Genomic organization, chromosomal mapping, and promoter analysis of the mouse dentin sialoprophosphoprotein (Dspp) gene, which codes for both dentin sialoprotein and dentin phosphoprotein. *J Biol Chem.* 1998 Apr 17;273(16):9457–64.
 55. MacDougall M, Gu TT, Simmons D. Dentin matrix protein-1, a candidate gene for dentinogenesis imperfecta. *Connect Tissue Res.* 1996;35(1-4):267–72.
 56. Suzuki S, Sreenath T, Haruyama N, Honeycutt C, Terse A, Cho A, et al. Dentin sialoprotein and dentin phosphoprotein have distinct roles in dentin mineralization [Internet]. Vol. 28, Matrix Biology. 2009. p. 221–9. Available from: <http://dx.doi.org/10.1016/j.matbio.2009.03.006>
 57. Sairaman S, Nivedhitha MS, Shrivastava D, Al Onazi MA, Algarni HA, Mustafa M, et al. Biocompatibility and antioxidant activity of a novel carrageenan based injectable hydrogel scaffold incorporated with *Cissus quadrangularis*: an in vitro study. *BMC Oral Health.* 2022 Sep 5;22(1):377.
 58. Mitsiadis TA, Rahiotis C. Parallels between tooth development and repair: conserved molecular mechanisms following carious and dental injury. *J Dent Res.* 2004 Dec;83(12):896–902.
 59. Huang GTJ. Pulp and dentin tissue engineering and regeneration: current progress. *Regen Med.* 2009 Sep;4(5):697–707.
 60. Jin H, Thomas HF, Chen J. Wound healing and revascularization: a histologic observation of experimental tooth root fracture. *Oral Surg Oral Med Oral Pathol Oral Radiol Endod.* 1996 Jan;81(1):26–30.
 61. Kanematsu A, Yamamoto S, Ozeki M, Noguchi T, Kanatani I, Ogawa O, et al. Collagenous matrices as release carriers of exogenous growth factors. *Biomaterials.* 2004 Aug;25(18):4513–20.
 62. Peters MC, Polverini PJ, Mooney DJ. Engineering vascular networks in porous polymer

- matrices. *J Biomed Mater Res.* 2002 Jun 15;60(4):668–78.
63. Homeister JW, Willis MS. *Molecular and Translational Vascular Medicine.* Springer Science & Business Media; 2012. 338 p.
64. Mullane EM, Dong Z, Sedgley CM, Hu JCC, Botero TM, Holland GR, et al. Effects of VEGF and FGF2 on the revascularization of severed human dental pulps. *J Dent Res.* 2008 Dec;87(12):1144–8.
65. Muthukrishnan L. Imminent antimicrobial bioink deploying cellulose, alginate, EPS and synthetic polymers for 3D bioprinting of tissue constructs. *Carbohydr Polym.* 2021 May 15;260:117774.
66. Chakraborty T, Jamal RF, Battineni G, Teja KV, Marto CM, Spagnuolo G. A Review of Prolonged Post-COVID-19 Symptoms and Their Implications on Dental Management. *Int J Environ Res Public Health* [Internet]. 2021 May 12;18(10). Available from: <http://dx.doi.org/10.3390/ijerph18105131>
67. Muthukrishnan L. Nanotechnology for cleaner leather production: a review. *Environ Chem Lett.* 2021 Jun 1;19(3):2527–49.
68. Teja KV, Ramesh S. Is a filled lateral canal - A sign of superiority? *J Dent Sci.* 2020 Dec;15(4):562–3.
69. Reddy P, Krithikadatta J, Srinivasan V, Raghu S, Velumurugan N. Dental Caries Profile and Associated Risk Factors Among Adolescent School Children in an Urban South-Indian City. *Oral Health Prev Dent.* 2020 Apr 1;18(1):379–86.
70. Sawant K, Pawar AM, Banga KS, Machado R, Karobari MI, Marya A, et al. Dentinal Microcracks after Root Canal Instrumentation Using Instruments Manufactured with Different NiTi Alloys and the SAF System: A Systematic Review. *NATO Adv Sci Inst Ser E Appl Sci.* 2021 May 28;11(11):4984.
71. Bhavikatti SK, Karobari MI, Zainuddin SLA, Marya A, Nadaf SJ, Sawant VJ, et al. Investigating the Antioxidant and Cytocompatibility of *Mimusops elengi* Linn Extract over Human Gingival Fibroblast Cells. *Int J Environ Res Public Health* [Internet]. 2021 Jul 4;18(13). Available from: <http://dx.doi.org/10.3390/ijerph18137162>
72. Karobari MI, Basheer SN, Sayed FR, Shaikh S, Agwan MAS, Marya A, et al. An In Vitro Stereomicroscopic Evaluation of Bioactivity between Neo MTA Plus, Pro Root MTA, BIODENTINE & Glass Ionomer Cement Using Dye Penetration Method. *Materials* [Internet]. 2021 Jun 8;14(12). Available from: <http://dx.doi.org/10.3390/ma14123159>
73. Rohit Singh T, Ezhilarasan D. Ethanolic Extract of *Lagerstroemia Speciosa* (L.) Pers., Induces Apoptosis and Cell Cycle Arrest in HepG2 Cells. *Nutr Cancer.* 2020;72(1):146–56.
74. Raj R K, D E, S R. β -Sitosterol-assisted silver nanoparticles activates Nrf2 and triggers mitochondrial apoptosis via oxidative stress in human hepatocellular cancer cell line. *J Biomed Mater Res A.* 2020 Sep;108(9):1899–908.
75. Vijayashree Priyadharsini J. In silico validation of the non-antibiotic drugs acetaminophen and ibuprofen as antibacterial agents against red complex pathogens. *J Periodontol.* 2019 Dec;90(12):1441–8.
76. Vijayashree Priyadharsini J, Smiline Girija AS, Paramasivam A. In silico analysis of virulence genes in an emerging dental pathogen *A. baumannii* and related species. *Arch Oral Biol.* 2018 Oct;94:93–8.
77. Uma Maheswari TN, Nivedhitha MS, Ramani P. Expression profile of salivary micro RNA-21 and 31 in oral potentially malignant disorders. *Braz Oral Res.* 2020 Feb 10;34:e002.
78. Gudipaneni RK, Alam MK, Patil SR, Karobari MI. Measurement of the Maximum Occlusal Bite Force and its Relation to the Caries Spectrum of First Permanent Molars in Early Permanent Dentition. *J Clin Pediatr Dent.* 2020 Dec 1;44(6):423–8.
79. Chaturvedula BB, Muthukrishnan A, Bhuvanaraghan A, Sandler J, Thiruvencatachari B. Dens invaginatus: a review and orthodontic implications. *Br Dent J.* 2021;230(6):345–50.
80. Kanniah P, Radhamani J, Chelliah P, Muthusamy N, Joshua Jebasingh Sathiya Balasingh E, Reeta Thangapandi J, et al. Green synthesis of multifaceted silver nanoparticles using the flower extract of *Aerva lanata* and evaluation of its biological and environmental applications. *ChemistrySelect.* 2020 Feb 21;5(7):2322–31.