Detailed Response to Reviewer's and Editorial office's Comments

Manuscript ID:90031

Manuscript Title: Advances in the differentiation of pluripotent stem cells into vascular cells

Dear editors and reviewers,

Thank you for arranging a timely review for our manuscript. We have carefully evaluated the reviewer's critical comments and thoughtful suggestions. Our manuscript, *"Advances in the differentiation of pluripotent stem cells into vascular cells"*, was revised according to the comments from the reviewers. The itemized response to each reviewer's comments is attached. All changes made to the manuscript are highlighted with yellow color. Thank you very much for your suggestions.

We hope that the revised manuscript has addressed all the criticisms raised by editors and the reviewers, and if there are any other modifications we could make, we would be pleasure to do .

Thank you again for your positive comments and valuable suggestions to improve the quality of our manuscript.

Yours sincerely,

Fuchen Liu, MD, PhD

The reply of Reviewer #1's comments

Reviewer #1' s comments	Authors' reply
In transplantation, organ damage is one of the	We feel great thanks for your professional
great challenges for graft survival. Using stem	review work on our article. As you are
cell for organ repair or remodeling become an	concerned, our manuscript aims to provide a
attractive approach in transplantation. This	comprehensive summary of the research
review summarizes the latest progresses in the	progress from the establishment of iPSCs to the
field of the induction and differentiation of	in vivo transplantation of derived vascular cells.
iPSCs into vascular cells. More specifically, the	The differentiation of iPSCs into vascular cells is
authors reviewed how to obtain two-	an undeniable cutting-edge technology that
dimensional vascular cells such as endothelial	holds great promise for benefiting patients with
cells, smooth muscle cells or pericytes, as well	vascular diseases. And the use of gene editing to
as three-dimensional vascular organoid or	correct such derivatives for the treatment of
tissue engineered vascular graft. This is a very	diseases shows promise as a personalized
good review covered the most important part	treatment. Coupled with the continuous
of iPSCs induction. The review focused on	advancement of cutting-edge technologies such
progresses and detail technologies in induction	as bioprinting and nanotechnology in
of endothelial cells from iPSCs. Furthermore,	biomaterial development, its combination with
the authors also discussed the progress in co-	iPSC technology will bring new hope for the
differentiation and co-culture of endothelial	study of rare vascular diseases.
cells and myocytes, a key step for tissue	
engineering. Progresses in co-transplantation of	
endothelial cells and pericyte are very	
interesting. The review will certainly provide	
useful knowledge for transplantation	
researchers and other disease researchers.	

Reviewer #2' s comments	Authors' reply
This review introduced the different approaches	Thank you for your valuable comments on our
to differentiate iPSCs into vascular cells and the	article. We have made some modifications in our
applications. This topic is interesting.	revised manuscript based on your suggestions.
Some minor issues are:	
 Please provide the scope of this review at the end of the first part. Please explain the differences and significance of this review with existing reviews. 	 We have provided the coverage of our manuscript at the end of abstract (page 3). Most of the present reviews focus on the introduction of a certain type of vascular models derived from iPSCs, such as the introduction of iPSC-derived vascular cells,
	three-dimensional vascular organoids or vessels-on-chips. Our review made a systematic and comprehensive summary of various types of differentiation strategies to get vascular derivatives, showed the development process of this technology, and compared the advantages and disadvantages of these methods. Additionally, there is a lack of summary of application advances using iPSCs-derived vascular models. This review fills this gap and can reflect the significance of vascular models based on iPSC technology for exploring vascular diseases.
3. Fig. 1, please explain more about this figure in the main text, not in the figure legends.4. In the main text, it is not that necessary to mention about the time of the studies.	 We have given a more detailed description for Figure 1 in the main text (page 6). Thank you for your advice, we have deleted the redundant record of the time in the main text. We did not list the changes here but marked in the revised paper.

The reply of Reviewer #2's comments

Reviewer #3' s comments	Authors' reply
I have thoroughly reviewed the manuscript titled	Thank you very much for your careful review. We
"Advances in the differentiation of pluripotent	have carefully revised the manuscript according
stem cells into vascular cells." The manuscript	to your comments.
offers a comprehensive overview of the current	
state of research in the differentiation of induced	
pluripotent stem cells (iPSCs) into various	
vascular cell types.	
Here are my detailed suggestions for revision:	
1. Clarity and Organization:	1. We feel great thanks for your professional
The manuscript is generally well-organized, but	review work on our article. Based on your
it would benefit from a clearer delineation	suggestion, we have added the following
between sections. Consider adding subheadings	subheadings, "Application" and
within the larger sections to guide the reader	"Conclusions and Future Perspectives".
through the various aspects of iPSC	We have also given a comprehensive
differentiation.	discussion of the main challenges and
The introduction could be more impactful by	coping strategies in the final section(page
briefly highlighting the main challenges in the	21,22).
field and how this review addresses them.	
2. Depth and Coverage:	2. We wholeheartedly appreciate your
While the manuscript does a good job of	professional suggestion. We have added
summarizing various methods of iPSC	more contents about recent advancements
differentiation, it could benefit from more in-	in iPSC technology in vascular disease
depth discussion of the challenges and	modeling and regenerative medicine (page
limitations associated with these methods. For	16,17,18,19,20). More in-depth discussion
instance, issues of scalability, cost, and	of the challenges and limitations have also
replicability in different lab settings could be	been added in the conclusion part of our
addressed.	revised manuscript (page 21).
The applications section is informative but could	
be expanded to include more recent	
advancements in iPSC technology in vascular	
disease modeling and regenerative medicine.	
3. Technical Accuracy and Updates:	3. Based on your suggestion, we have added
Ensure that all the cited studies are accurately	more recent references to make our
represented. In a few instances, the description	manuscript up-to date. We have also added
of the studies seemed overly simplified.	more details of the references in the main
Expanding on these descriptions would help the	text to help readers to understand these
reader appreciate the nuances of the research.	studies better (page13,14).

The reply of Reviewer #3's comments

Consider including the latest developments in the field, especially those from 2023 and early 2024, to ensure the review is up-to-date.

Those references have been cited in this manuscript.

[69]Al-Thani M, Goodwin-Trotman M, Bell S, et al. A novel human iPSC model of COL4A1/A2 small vessel disease unveils a key pathogenic role of matrix metalloproteinases. Stem Cell Reports. 2023 Dec 12;18(12):2386-2399.

[70]Liu G, Li J, Ming Y, et al. A hiPSCderived lineage-specific vascular smooth muscle cell-on-a-chip identifies aortic heterogeneity across segments. Lab Chip. 2023 Mar 28;23(7):1835-1851.

[72]Wang J, Zhang L, Wu G, et al. Correction of a CADASIL point mutation using adenine base editors in hiPSCs and blood vessel organoids. J Genet Genomics. 2023 May 8:S1673-8527(23)00110-8.

[73]Kawakami E, Saiki N, Yoneyama Y, et al. Complement factor D targeting protects endotheliopathy in organoid and monkey models of COVID-19. Cell Stem Cell. 2023 Oct 5;30(10):1315-1330.e10.

[80]Guo Z, Gong A, Liu S, Liang H. Two novel compound heterozygous variants of the GCDH gene in two Chinese families with glutaric acidaemia type I identified by high-throughput sequencing and a

literature review. Mol Genet Genomics.

2023 May;298(3):603-614.

4. Figures and Tables:

The manuscript would benefit from the addition of more figures and tables that summarize key points, such as a table comparing different differentiation protocols or a figure illustrating the stepwise process of differentiation.

Ensure that all figures have clear, descriptive legends.

5. References:

Double-check all references for accuracy and completeness. Ensure that all cited works are relevant and current.

Consider adding more recent references to support statements, especially in rapidly evolving areas of the field. Where possible, include recent studies to demonstrate the manuscript's alignment with current research trends.

In particular, consider including additional references to support the discussion and to provide context to the study's findings. I suggest adding data related to recent bulk transcriptomics studies which could represent a strong substrate to enforce the role of described molecular mechanisms, such as the recent PMID: 36490268, PMID: 27737651, PMID: 26115622 and PMID: 32184807.

 Thank you for your suggestion. We added a summary figure of the existing methods for constructing human vascular model based on iPSC technology (Figure 3). More detailed explanations have been given in figure legends (Figure 1,2,3).

5. We sincerely appreciate your valuable comments. We have checked our manuscript carefully to make sure our cited studies are relevant and current. We also added several references related to the application of cut-edge technology such as gene editing, high-throughput sequencing, proteomics in the field of medical area based on iPSCs. The numbers of these newly added reference are 53,72,73,75,79,80.

[53]Nikolova MT, He Z, Wimmer RA,et al. Fate and state transitions during human blood vessel organoid development. bioRxiv. 2022;2022.03.23.485329.

[72]Wang J, Zhang L, Wu G, et al. Correction of a CADASIL point mutation using adenine base editors in hiPSCs and blood vessel organoids. J Genet Genomics. 2023 May8:S1673-8527(23)00110-8.

[73]Kawakami E, Saiki N, Yoneyama Y, et al. Complement factor D targeting protects endotheliopathy in organoid and monkey models of COVID-19. Cell Stem Cell. 2023 Oct 5;30(10):1315-1330.e10.

6. Language and Style:

The manuscript is generally well-written but could benefit from proofreading to correct minor grammatical errors and improve sentence structure for better readability.

Use consistent terminology throughout the manuscript to avoid confusion (e.g., consistently use either "iPSCs" or "induced pluripotent stem cells").

7. Ethical Considerations:

While the manuscript mentions the ethical advantages of using iPSCs over embryonic stem cells, it could further discuss the ethical considerations in more detail, particularly [75]Song HY, Yang YP, Chien Y, et al. Reversal of the Inflammatory Responses in Fabry Patient iPSC-Derived Cardiovascular Endothelial Cells by CRISPR/Cas9-Corrected Mutation. Int J Mol Sci. 2021 Feb 27;22(5):2381.

[79]Scimone C, Donato L, Alafaci C,et al. High-Throughput Sequencing to Detect Novel Likely Gene-Disrupting Variants in Pathogenesis of Sporadic Brain Arteriovenous Malformations.

Front Genet. 2020 Feb 28;11:146.

[80]Guo Z, Gong A, Liu S, Liang H. Two novel compound heterozygous variants of the GCDH gene in two Chinese families with glutaric acidaemia type I identified by high-throughput sequencing and a literature review. Mol Genet Genomics. 2023 May;298(3):603-614.

- 6. Thanks for your careful checks. Based on your comments, we have made the corrections to make the terminology harmonized within the whole manuscript and we have tried our best to polish our language and eliminate minor grammatical errors to improve the readability of our manuscript. We did not list the changes here because they will not influence the content and framework of the article.
- 7. We think this is an excellent suggestion. We have added more discussions on the disputes existing in the field of iPSC technology, especially the controversy that may arise from the chimeric research. The

concerning patient consent and the use of genetic material.

8. Conclusion and Future Directions:

Strengthen the conclusion by summarizing the key findings more concisely and offering insights into future research directions.Highlight any potential breakthroughs or innovative methods that could significantly impact the field.

revisions can be found in page14 and 15,"Moral and Regulatory Issues".

8. We have rewritten the conclusion according to your suggestion (page 20,21,22). We make a summary from the aspects of ethical and regulatory issue, challenges and limitations,, prospects and opportunities, and strive to conduct a comprehensive discussion on the research status and future potential of iPSCs and its vascular derivatives in the medical field.