



24 **Highlights**

25

26 • A high progesterone concentration is associated with improvement in the decidualisation  
27 process.

28 • The most functionally and morphologically active part of the decidualisation process occurred  
29 7-9 days after progesterone exposure.

30 • According to a pathway enrichment analysis, inhibition of cell cycle progression is the major  
31 effect of progesterone on Human Endometrial Stromal Cells (HESC).

32

33

34

## Abstract

35 This study aimed to evaluate the influence of progesterone (concentration and time of exposure) on  
36 endometrial decidualisation using an in vitro model cell line: Human Endometrial Stromal Cells  
37 (HESCs). HESCs exposed to progesterone (1 and 10  $\mu\text{M}$ ) had higher percentages of decidualised cells  
38 and higher expression of the decidual marker (Insulin Like Growth Factor Binding Protein 1  
39 (IGFBP1)) compared with those exposed to (0.1  $\mu\text{M}$ ) . Among those HESCs cultured with 1  $\mu\text{M}$   
40 progesterone for 11 days, the highest rate of morphological differentiation (40-50%) occurred  
41 between days 7-9 and IGFBP1 peaked on day 7. The cell-cycle pathway was significantly down-  
42 regulated in HESCs exposed to at least 1  $\mu\text{M}$  progesterone regardless of the incubation period. We  
43 conclude that exposure to high progesterone concentration for 7-9 days is essential to maximise the  
44 process of decidualisation.

45 **Keywords:** progesterone, endometrium, implantation window, decidualisation, human endometrial  
46 stromal cells, microarray.

## 47 1. Introduction

48 The endometrium is a highly dynamic tissue undergoing extensive growth and repeated regeneration  
49 in a cyclical manner (Henriet, Chevronnay and Marbaix, 2012, Petracco, Kong, Grechukhina et al.,  
50 2012). The endometrium undergoes a cycle of dislodgment, proliferation, and secretory differentiation  
51 regulated by the sequentially timed interplay of circulating steroid hormones. Oestrogen is necessary  
52 for inducing expression of progesterone receptors (PR) and increasing endometrial thickness in the  
53 proliferative phase (Hamilton, Arao and Korach, 2014, Koos, 2011). Progesterone plays an important  
54 role in the secretory transformation of the endometrium and receptivity to the implanting embryo  
55 (Okada, Tsuzuki and Murata, 2018). Decidualisation occurs during the implantation window during  
56 the secretory phase corresponding to the physiological peak in progesterone concentrations in the  
57 menstrual cycle (Reed and Carr, 2015).

58 Decidualisation is a progesterone-dependent differentiation process of endometrial stromal cells  
59 characterised by differentiation from elongated fibroblast-like mesenchymal cells in the stromal  
60 compartment into rounded epithelioid-like cells during the secretory phase (Coulam, 2016). The peak  
61 of morphological differentiation during the secretory phase is observed during the implantation  
62 window (Luesley and Kilby, 2016). Decidualisation process is a prerequisite for successful embryo  
63 implantation and provides nutritional support for the implanting blastocyst (Su and Fazleabas, 2015).  
64 The decidualisation process provides both a protective function to limit trophoblast invasion and a  
65 supportive role in placentation by secreting growth factors and cytokines that assist remodel the  
66 implantation site and the maternal vasculature to promote embryo implantation and growth  
67 (Ramathal, Bagchi, Taylor et al., 2010). Insulin Like Growth Factor Binding Protein 1 (IGFBP1) is a  
68 major product of decidualised endometrial stromal cells and ~~may regulate endometrial differentiation~~  
69 ~~and implantation~~ thus it is considered a preferred molecular marker of human decidualisation (Tseng,  
70 Gao, Chen et al., 1992, Gellersen and Brosens, 2003). Furthermore, IGFBP-1 produced by  
71 decidualised endometrium can directly stimulate endometrial stromal cell decidualisation by  
72 interacting with  $\alpha 5\beta 1$  integrin on the surface of endometrial stromal cells (Matsumoto, Sakai and  
73 Iwashita, 2008). It has been shown that defective decidualised stromal cells secrete lower IGFBP1

Formatted: Font color: Auto

74 (Garrido-Gomez, Dominguez, Quiñonero et al., 2017). With this concept, although there is no cut-off  
75 level of IGFBP1 and no randomised controlled trial indicating lower levels of IGFBP1 is associated  
76 with impaired decidualisation: lower expression of IGFBP1 compared with the reference or control  
77 samples is commonly considered as possible indicator of poor decidualisation in the scientific  
78 literature (Vinketova, Mourdjeva and Oreshkova, 2016). Impairment of decidualisation is associated  
79 with various reproductive disorders, such as infertility, recurrent miscarriages, and uteroplacental  
80 disorders (Garrido-Gomez et al., 2017, Wu, Kimura, Zheng et al., 2017, Cha, Sun and Dey, 2012).

81  
82 Progesterone supports endometrial receptivity and decidualisation. Abnormally low serum  
83 progesterone concentrations during the implantation window have been shown to be associated with  
84 poorer pregnancy rates in both natural cycles (Jordan, Craig, Clifton et al., 1994, Radwanska,  
85 Hammond and Smith, 1981, Hull, Savage, Bromham et al., 1982) and frozen-thawed cycles  
86 (Basnayake, Volovsky, Rombauts et al., 2018, Labarta, Mariani, Holtmann et al., 2017, Cédrin-  
87 Durnerin, Isnard, Mahdjoub et al., 2019). In frozen-thawed cycles, the number of days of  
88 progesterone exposure prior to embryo transfer is based on the stage of the frozen embryos to be  
89 transferred. Too early or delayed progesterone administration results in a poorer pregnancy rate  
90 (Sharma and Majumdar, 2016). Those finding suggests that both progesterone concentrations and  
91 timings of exposure are critical factors to achieve implantation.

92 Decidualisation can be artificially induced using progesterone supplementation. In vitro studies using  
93 artificial decidualisation models have allowed us to improve our insights into the effect of  
94 progesterone on the process of decidualisation. The in vitro model offers a controlled environment to  
95 define the particular genes differentially expressed under the influence of progesterone with stratified  
96 datasets based on time and concentration and it can be used to identify progesterone-associated  
97 pathways. Human Endometrial Stromal Cells (HESC) respond to progesterone stimulation and show  
98 the morphological pattern and biochemical endpoints of decidualisation (Krikun, Mor, Alvero et al.,  
99 2004). These cells are karyotypically, morphologically, and phenotypically similar to the primary  
100 parent cells retrieved from the human uterus. The consistency and reproducibility of results is also the

101 major advantage of HESC culture, as HESC can be cultured and tested repeatedly. Importantly, the  
102 exact progesterone concentration and timing of exposure can be controlled precisely under in vitro  
103 conditions, Therefore in vitro models of artificial decidualisation are an excellent model to study the  
104 effect of progesterone on decidualisation and the potential for implantation (Krikun et al., 2004).

105 Defective decidualisation has been found as a root cause for implantation failure and subsequent early  
106 embryo miscarriage (Gellersen and Brosens, 2014, Kommagani, Szwarc, Vasquez et al., 2016). If we  
107 know the optimal progesterone concentration and duration of progesterone exposure that maximises  
108 decidualisation process, it could guide how to improve this process by adjusting progesterone  
109 administration. We aim to investigate the impact of different progesterone concentrations and  
110 different timings of progesterone exposure on the decidualised endometrium using endometrial  
111 morphology, decidual markers, and global gene expression using microarray-based technology.

## 112 **2. Objectives**

113 To study endometrial HESC gene expression profiles and endometrial morphology following in vitro  
114 incubation for 3, 7, and 11 days with increasing concentrations of progesterone (0.1, 1, and 10 $\mu$ M).

## 115 **3. Methods**

### 116 3.1 Characterisation and culture of HESCs

117 This study consisted of morphological and functional assessments of HESCs. HESCs decidualisation  
118 in response to progesterone was assessed morphologically (change from elongated to rounded cells)  
119 and by expression of a decidualisation marker (IGFBP1). The day of peak expression of IGFBP1 (day  
120 7) was used as a reference to compare the whole transcriptomic profile of HESCs between different  
121 progesterone concentrations and between different incubation periods using microarray (Figure 1).

122 The human endometrial stromal cells (HESCs; ATCC CRL-4003; American Type Culture Collection  
123 Co., Virginia, USA) were cultured in Dulbecco's modified Eagle's medium and Ham's F-12 medium  
124 (DMEM/F12, Sigma, Poole, UK) supplemented with 1% ITS+ Premix (Thermo Fisher Scientific,

125 Loughborough, UK), 500 ng/mL puromycin (Thermo Fisher Scientific, Loughborough, UK), 10%  
126 charcoal/dextran treated fetal bovine serum (HyClone, Thermo Fisher Scientific, Loughborough, UK)  
127 at 37°C in a humidified chamber with 5% CO<sub>2</sub>. The medium was changed every 48 hours (Huang,  
128 Yu, Li et al., 2017).

129  
130 To induce in vitro decidualisation, HESCs were incubated in DMEM/F12 medium supplemented with  
131 2% CS-FBS, 10 nM  $\beta$ -oestradiol, 0.5 mM 8-Bromoadenosine 3',5'-cyclic monophosphate sodium salt  
132 (8-Br-cAMP, Sigma, Poole, UK) and increasing concentrations of progesterone (P4, 0.1, 1 and 10  
133  $\mu$ M; 4-pregnene-3,20-dione; Sigma, Poole, UK) (Li, Kang, Qiao et al., 2017). The progesterone  
134 concentration of 1  $\mu$ M is the standard concentration of HESC decidualisation in vitro (Krikun et al.,  
135 2004). These doses were based on a preliminary dose-response experiment (data not presented),  
136 showing that doses above 30  $\mu$ M, decreased survival within 48 hours. A dose of 20  $\mu$ M decreased  
137 survival in some replicates after 96 hours. A dose of 10  $\mu$ M did not decrease cell survival in a period  
138 of 11 days, this concentration was used as the highest concentration in this experiment. A light  
139 microscope was used to differentiate rounded (decidualised) cells from elongated stromal cells. The  
140 percentages of decidualised HESCs were visually estimated in 10 fields at 10X magnification and  
141 expressed as the average percentage from the total cells in each field on days 3, 5, 7, 9, and 11.

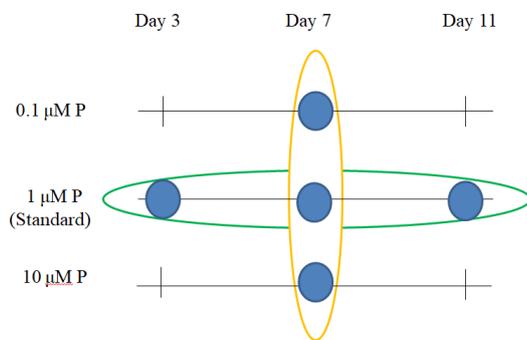
142  
143 Moreover, IGFBP1 expression, a marker of decidualisation and endometrial receptivity (Tseng et al.,  
144 1992, Gellersen and Brosens, 2003), was assessed by PCR following incubation for 3, 5, 7, 9, and 11  
145 days, to determine the incubation time required to induce decidualisation in HESC under increasing  
146 concentrations of progesterone, similar to morphological assessment. The day of peak expression of  
147 IGFBP1 was used as a reference for microarray analysis.

148

### 149 **3.2 Determining whole transcriptomic profile by microarray**

150 The experimental design for the microarray experiment is presented in Figure 1. To determine the  
151 effect of different progesterone concentrations on endometrial transcriptomics, the gene expression of  
152 HESCs treated with 0.1, 1, and 10  $\mu\text{M}$  progesterone was analysed on day 7 (peak IGFBP1 based on  
153 our findings (Figure 3)). To evaluate the effect of the incubation period, the global gene expression of  
154 HESCs treated with a standard concentration of progesterone (1  $\mu\text{M}$ ) was studied on days 3, 7, and 11  
155 of incubation (Li et al., 2017). The standard progesterone concentration of 1  $\mu\text{M}$  was taken from the  
156 standard protocol of HESC decidualisation in vitro (Krikun et al., 2004). Differentially expressed  
157 genes with fold changes were obtained from the comparison of gene expression between HESCs  
158 exposed to progesterone in a particular concentration and incubation period (intervention groups) and  
159 HESCs cultured in the medium without progesterone for the same period (control groups). On a  
160 corresponding day, media was collected and lysis buffer added (150  $\mu\text{L}/\text{well}$ ), followed by scrapping  
161 to remove cells. Lysis buffer containing the cells was pipetted into an Eppendorf tube (1.5ml) and  
162 stored at  $-80^{\circ}\text{C}$  until RNA extraction. Each treatment was run in triplicate.

163



164

165 **Figure 1:** Diagram representing HESCs treated with increasing progesterone concentrations (0.1  $\mu\text{M}$ ,  
166 1  $\mu\text{M}$ , and 10  $\mu\text{M}$ ) and different incubation periods (3, 7, 11 days).

167

168 **3.2.1 Transcriptome profiling with Affymetrix GeneChip**

169 The whole-genome transcriptome analysis of HESCs treated with different progesterone  
170 concentrations at specific incubation periods was conducted at the Nottingham Arabidopsis Stock  
171 Centre (NASC). The RNA concentration and quality were assessed using the Agilent 2100  
172 Bioanalyzer (Agilent Technologies Inc., Palo Alto, CA, USA) and the RNA 600 Nano Kit (Caliper Life  
173 Sciences, Mountain View, CA, USA). Samples with a minimum RNA concentration of 100 ng/μl and  
174 RNA Integrity Number (RIN)  $\geq$  8 were used for gene expression analysis. Single-stranded  
175 complementary DNA was prepared from 200 ng of total RNA as per the GeneChip™ WT PLUS  
176 Reagent Kit (Applied Biosystems and Affymetrix, Loughborough, UK). Total RNA was first  
177 converted to cDNA, followed by in vitro transcription to make cRNA. Single-stranded cDNA was  
178 synthesized, end-labeled, and hybridized for 16 h at 45°C to Clariom™ S Assay arrays (Thermo  
179 Fisher Scientific, Loughborough, UK).

180

### 181 3.2.2 Expression array analysis

182 Gene expression data and pathway analysis were used to compare endometrial response between  
183 HESC exposed to different progesterone concentrations and incubation periods. Gene expression data  
184 were analysed using Partek Genomics Suite 6.6 software (Partek Incorporated). The raw CEL files  
185 were normalized using the RMA background correction with quantile normalization, log base 2  
186 transformation, and mean probe-set summarization with adjustment for GC content. Differentially  
187 expressed genes (DEG) were identified by a two-way ANOVA. DEGs were considered significant if  
188 p-value with FDR was  $\leq$  0.05 and fold change of  $>1.5$  or  $<-1.5$ .

189 Venn diagrams were generated to display the number of overlapping genes among three different  
190 progesterone concentrations and three different incubation periods. Gene Ontology (GO) and  
191 pathways enrichment analyses were carried out by using the webgestalt web tool  
192 (<http://www.webgestalt.org/>) (Liao, Wang, Jaehnig et al., 2019). The microarray data has been  
193 deposited in the NCBI Gene Expression Omnibus (GEO; [www.ncbi.nlm.nih.gov/geo](http://www.ncbi.nlm.nih.gov/geo)), accession  
194 number: GSE146777. Microarray validation was carried out by RT-PCR on four significantly

195 upregulated (IGFBP1, SPP1, GPX3, and MAOA) and four downregulated genes (IFIT1, MOXD1,  
196 CDK15, and CDC20) in all progesterone concentrations on days 3, 7, and 11.

197

### 198 **3.2.3 RNA preparation and PCR**

199 Total RNA was extracted using the RNeasy Mini Kit (QIAGEN, Manschester, UK) following the  
200 manufacturer's indications. Quantification of RNA was assessed using a Nanodrop  
201 Spectrophotometers (Thermo Fisher Scientific, Loughborough, UK). After extraction, a High-  
202 Capacity cDNA Reverse Transcription Kit with RNase inhibitor (Catalog number: 4374967, Thermo  
203 Fisher Scientific, Loughborough, UK) was used to prepare the cDNA template. A mixture of 1.5 µL  
204 of cDNA, 0.75 µL of TaqMan Assays, 7.5 µL TaqMan fast universal mastermix; and 5.25 µL RNase-  
205 Free Water was prepared to perform PCR. To determine the expression of the genes of interest, the  
206 following Taqman primers (Thermo Fisher Scientific, Loughborough, UK) were used as appropriate:  
207 SPP1 (Hs00959010\_m1), GPX3 (Hs00173566\_m1), MAOA (Hs00165140\_m1), IGFBP1  
208 (Hs00236877\_m1), IFIT1 (Hs03027069\_s1), MOXD1 (Hs01026922\_m1), CDK15  
209 (Hs00287045\_m1), and CDC20 (Hs00961704\_g1). All PCR reactions were performed in triplicate.  
210 The PCR was performed with a heating step at 95°C for 20 minutes and then cycled 40 times at 95°C  
211 for 3 seconds followed by 60°C for 30 seconds on the ABI 7500 fast real-time PCR system (Thermo  
212 Fisher Scientific, Loughborough, UK). A housekeeping gene expression (18S, Hs99999901\_s1), was  
213 used to normalise the gene expression data. The gene expression was expressed as the n-fold  
214 difference relative to the control.

215

### 216 **3.3 Statistical analysis**

217 Statistical analysis was performed using SPSS (v26; IBM; Portsmouth, UK). A two-way ANOVA  
218 was conducted to compare the effect of progesterone concentrations and incubation periods on  
219 decidualisation. A one-way ANOVA was performed to examine the effect of three different  
220 progesterone on the number of decidualised cells. Student's t-test was used to determine the difference

221 of expression of selected genes between control and experimental groups for microarray validation. A  
222 p-value < 0.05 was considered to be statistically significant.

223

224

225

226

## 227 **4 Results**

228

### 229 **4.1 Decidualisation in vitro**

230 The morphology of non-decidualised and decidualised HESCs are shown in Figure 2A and 2B,

231 respectively. There was a difference in the mean percentage of decidualised cells between

232 progesterone concentrations ( $p < 0.001$ ) and incubation periods ( $p < 0.001$ ), with an interaction

233 between these ( $p < 0.001$ ) (Figure 2). Decidualised cells were present on days 3 and 5, but the

234 percentage increased from day 7 onwards, peaking on day 11. This was similar across all progesterone

235 concentrations (0.1, 1, 10  $\mu\text{M}$ ; Figure 2C). On days 7, 9, and 11, higher progesterone concentrations

236 allowed higher accumulative percentages of decidualised cells (Figure 2C). The findings suggest that

237 higher progesterone concentration and a longer incubation period increase the percentage of

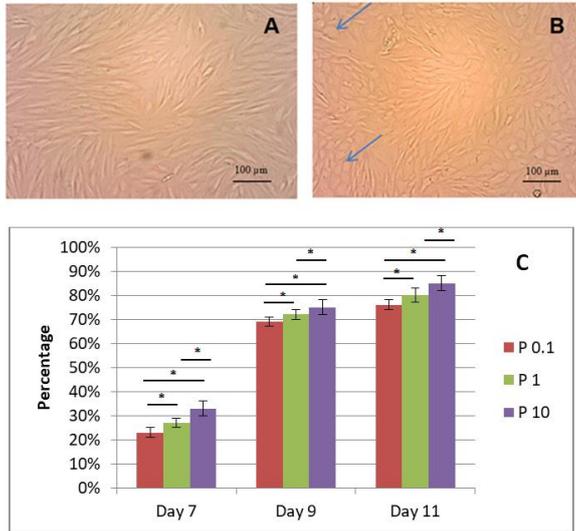
238 decidualised cells. Furthermore, there was a statistically significant difference between the three

239 concentrations on days 7, 9, and 11 (Figure 2C). Therefore, the number of decidualised cells cultured with 10

240  $\mu\text{M}$  are higher than those cultured with 0.1 and 1  $\mu\text{M}$ . A concentration of 1  $\mu\text{M}$  progesterone resulted in a higher

241 number of decidualised cells than 0.1  $\mu\text{M}$  progesterone.

242



243

244

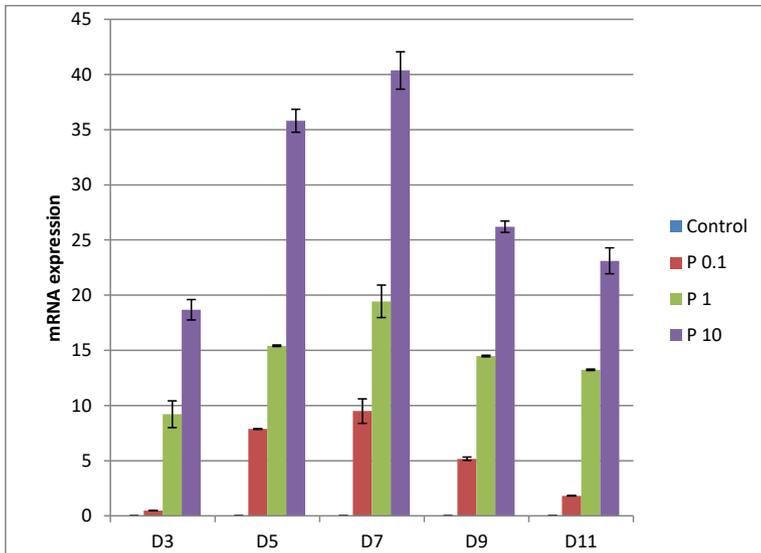
245 **Figure 2:** Non-decidualised cells present a fusiform shape (2A), while decidualised cells (arrows) are  
 246 characterised by a round shape (2B), 10 x magnification. The accumulative percentages of  
 247 decidualised cells following an incubation period of 7, 9, and 11 days with progesterone are shown in  
 248 Figure 2C, the percentage was calculated from the average percentages of 10 fields. There was an  
 249 effect of progesterone (P) concentration ( $p < 0.001$ ), incubation time ( $p < 0.001$ ) and its interaction ( $p$   
 250  $< 0.001$ ). \* = significant difference between groups,  $p < 0.001$  for all comparison.

251

#### 252 4.2 IGFBP1 expression

253 The IGFBP1 expression increased as progesterone concentrations increased, the highest concentration  
 254 (10 µM) showed the highest ( $p < 0.001$ ) expression of IGFBP1 (Figure 3). The IGFBP1 expression  
 255 peaked on day 7, regardless of progesterone concentration (Figure 3).

256



257

258 **Figure 3:** Mean ( $\pm$ s.e.m) IGFBP1 expression in human endothelial stromal cells (HESC) cultured in  
 259 media containing increasing progesterone concentrations (0.1  $\mu$ M, red bars; 1  $\mu$ M, green bars; and, 10  
 260  $\mu$ M, purple bars) for 11 days. There was an effect of progesterone (P) concentration ( $p < 0.001$ ),  
 261 incubation time ( $p < 0.001$ ), however its interaction was not statistically significant ( $p = 0.15$ ).

262

### 263 4.3 Pathway enrichment analysis

264

265 The results of pathway enrichment analysis were unique depending on different progesterone  
 266 concentrations/incubation periods (Figure 4). The pathway related to cell cycle was significantly  
 267 down-regulated in most experimental conditions, except when cells were incubated with 0.1  $\mu$ M  
 268 progesterone on day 7 (Figure 4). A full list of differentially expressed genes in each condition was  
 269 provided in Supplementary 1.

270

271 To determine the gene expression trend of cell cycle-regulated genes, the overlapping cell cycle-  
 272 regulated genes between different concentrations (16 genes) and incubation periods (14 genes) were  
 273 extracted (Figure 5) and the change of their gene expression was evaluated in Figure 6. With HESC

274 exposed to 10  $\mu$ M progesterone, genes that are associated with cell-cycle regulation had higher  
275 negative fold change compared with HESCs exposed to 1  $\mu$ M (Figure 6). The majority of cell cycle-  
276 regulated genes (12/14 genes) were expressed the most on day 3 compared with days 7 and 11. A list  
277 of cell cycle-regulated genes with fold changes in each condition was provided in Supplementary 2.

278

279 We further examined the gene expression trend of decidualisation-related genes, as described by (Liu  
280 and Wang, 2015), between different concentrations and incubation periods. We found that four out of  
281 the 12 decidualisation-related genes were significantly up-regulated in all experimental conditions  
282 regardless of concentrations or incubation periods (PRL, VIM, IL1B, and FOXO1). The expression of  
283 these and IGFBP1 increased with increasing progesterone concentrations (Figure 7). The highest fold  
284 change was observed on day 3 and decreased thereafter (Figure 7). A list of decidualisation-regulated  
285 genes with fold changes in each condition was provided in Supplementary 3.

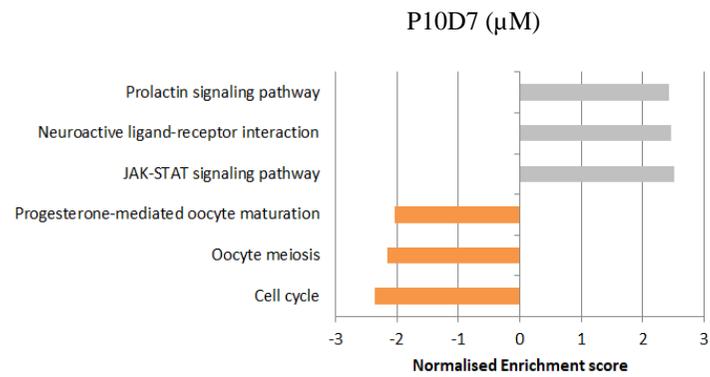
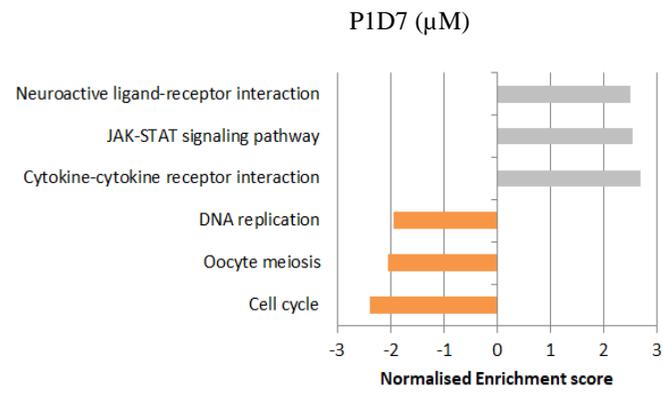
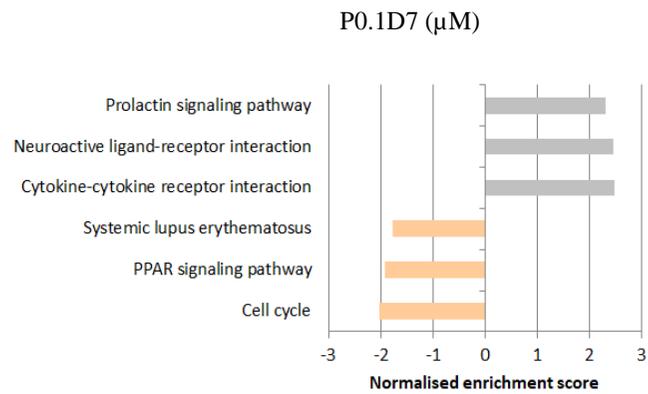
286

#### 287 **4.4 Microarray validation by RT-PCR**

288 Microarray results were validated by RT-PCR. All genes selected showed a similar pattern to that  
289 observed in the microarray analysis (Supplementary 4).

290

291

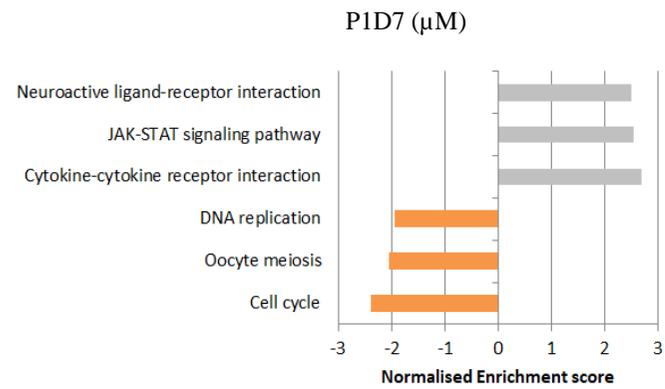
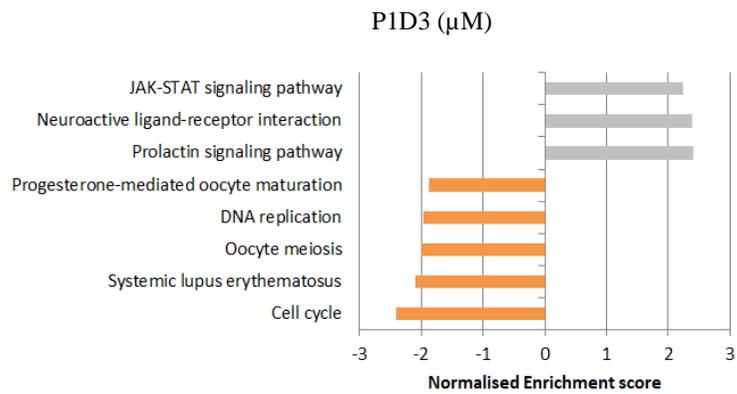


**A**

■ FDR ≤ 0.05   ■ FDR > 0.05

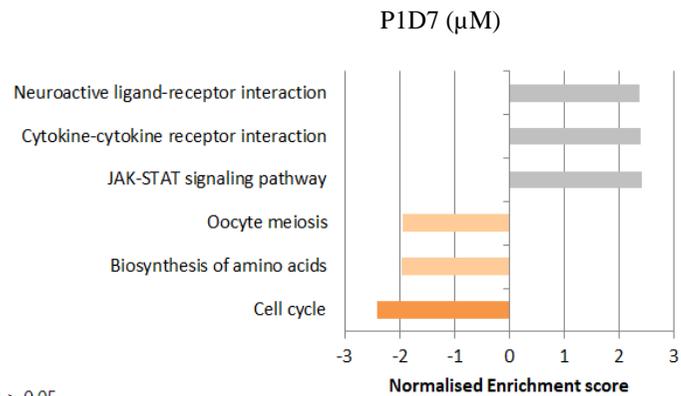
292  
293

294  
295



296  
297

**B**

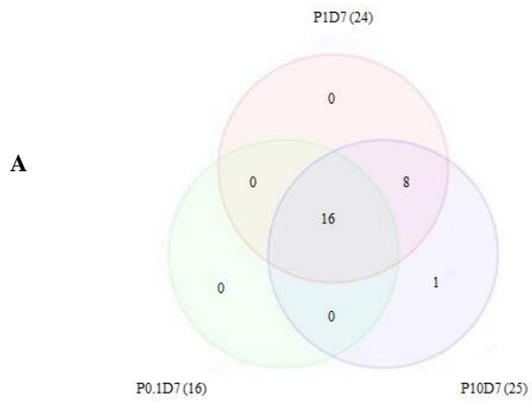


298  
299

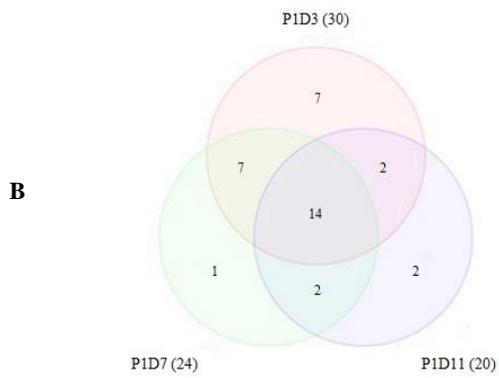
■ FDR ≤ 0.05   ■ FDR > 0.05

300 **Figure 4:** Bar charts representing pathway analysis between (A) increasing progesterone concentrations on day 7 (0.1, 1 and 10 µM) and (B) different  
301 incubation periods (3, 7 and 11 days). P=progesterone concentration and D=incubation day

302



303



304

305 **Figure 5:** Overlap of cell cycle-regulated genes between different progesterone concentrations on day  
306 7 (A; 0.1,1, and 10  $\mu$ M) and on different incubation periods (B; 3, 7 and 11 days). P = progesterone  
307 concentration; D = incubation day.

308

309

310

311

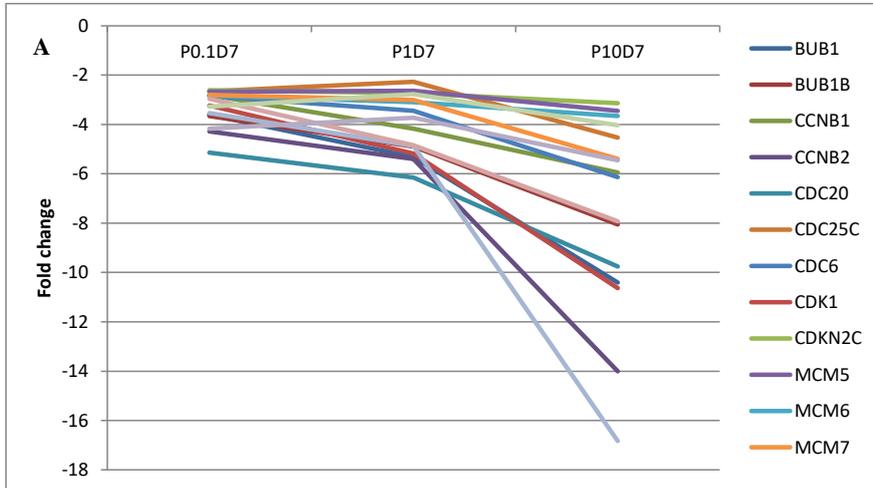
312

313

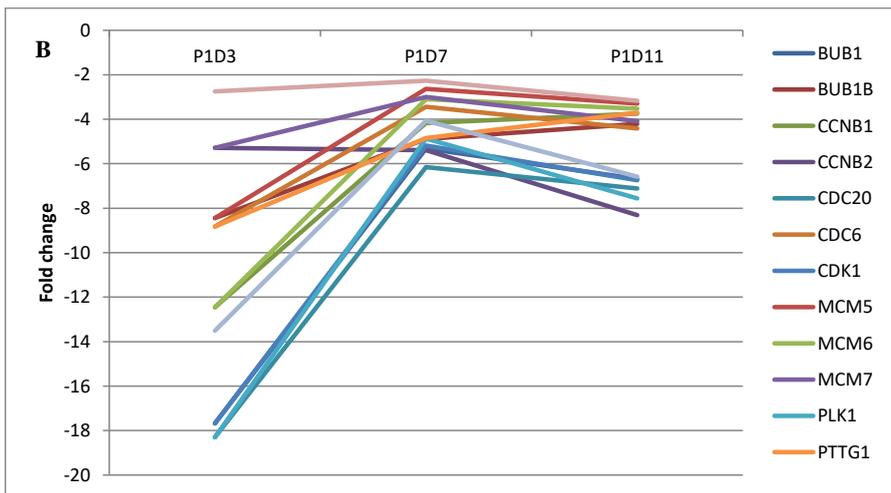
314

315

316



317



318 **Figure 6:** Gene expression of overlapping genes involved in cell-cycle pathway between different  
319 progesterone concentrations on day 7 (A; 0.1,1, and 10  $\mu$ M); and the progesterone concentration of 1  
320  $\mu$ M between different incubation periods (B; 3, 7, and 11 days). P = progesterone concentration; D =  
321 incubation day.

322

323

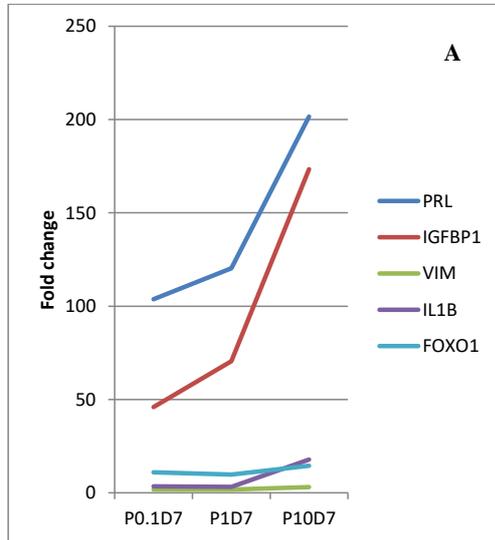
324

325

326

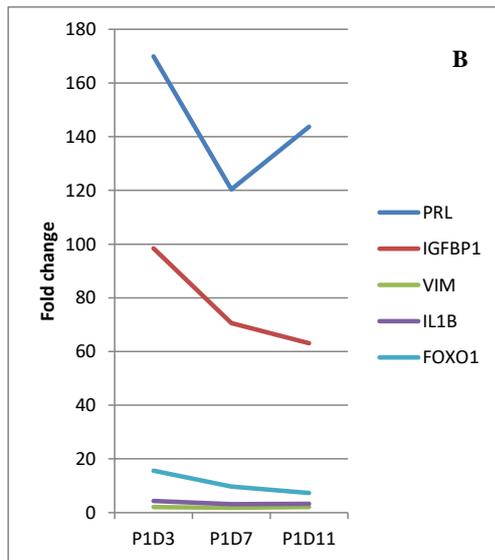
327

328



329

330



331

332 **Figure 7:** Gene expression of decidualisation-related genes between different progesterone  
333 concentrations (A; 0.1, 1, and 10  $\mu$ M); and the progesterone concentration of 1  $\mu$ M between different  
334 incubation periods (B; 3, 7, and 11 days). P = progesterone concentration; D = incubation day.

335

## 336 5. Discussion

337

338 The results indicate that endometrial decidualisation is regulated by progesterone in a time and  
339 concentration-dependent fashion- Morphological differentiation was initially visualised on day 7. On  
340 day 7, 9, and 11, lower progesterone concentrations induced lower accumulative percentages of  
341 decidualised cells and lower expression of the decidualisation marker, IGFBP1. The findings suggest  
342 that lower progesterone concentration is potentially associated with impaired decidualisation. Several  
343 studies showed that women with low serum progesterone during the window of implantation had a  
344 significantly lower pregnancy rate in a natural cycle (Radwanska et al., 1981,Hull et al., 1982), fresh  
345 IVF cycle (Kaur, Naidu, Kumkum et al., 2018), IUI cycle (Labarta et al., 2017,Hansen, Eisenberg,  
346 Baker et al., 2018,Warne, Tredway, Schertz et al., 2011) and frozen-thawed embryo transfer cycle  
347 (Basnayake et al., 2018,Labarta et al., 2017). Therefore, adequate progesterone concentration is  
348 required during implantation to enhance the potential for implantation. Although the cut-off value is  
349 uncertain, a previous report from our group (Suthaporn, Jayaprakasan, Thornton et al., 2020) and  
350 other authors suggest a progesterone threshold ranging between 10 and 15 ng/ml. Our results suggest  
351 that lower progesterone concentration are potentially associated with compromised decidualisation,  
352 resulting in implantation failure.

353

354 In fact, spatio-temporal changes are required to transform the endometrium from a non-receptive to a  
355 receptive stage during the implantation window (Paria, Lim, Das et al., 2000,Aghajanova, Hamilton  
356 and Giudice, 2008). The peak of morphological differentiation during the secretory phase is observed  
357 during the implantation window following progesterone exposure for 7-9 days post-ovulation in a  
358 natural cycle (Luesley and Kilby, 2016). In this in vitro study, the expression of IGFBP1 peaked at  
359 day 7 and the greatest change of morphological differentiation occurred between days 7 to 9 (40-50%)  
360 suggesting that the peak of decidual change in HESCs occurred 7-9 days following progesterone  
361 exposure which is consistent to the physiological findings observed in a natural cycle. Because  
362 ovulation typically occurs on day 14 of the menstrual cycle in women with a 28-day cycle, 7-9 days

363 after ovulation is approximately days 21-23 which is the period of implantation window (Harper,  
364 1992, Wilcox, Baird and Weinberg, 1999), This suggests that the increased morphological  
365 differentiation could be associated with improved implantation potential. In a conception cycle,  
366 decidualisation spreads throughout the entire endometrium (Salamonsen and Evans, 2018). It is  
367 plausible that a greater number of decidualised cells will provide a larger area for blastocyst  
368 implantation, therefore higher progesterone concentration that allows a greater number of  
369 decidualised cells would be more favourable for implantation.

370

371 Decidualisation is characterised by stromal cell differentiation from fibroblast-like into larger and  
372 rounder decidual cells. This process is regulated by progesterone which promotes cell cycle arrest and  
373 inhibits proliferation before the cells start the differentiation process into decidual cells (Logan,  
374 Steiner, Ponnampalam et al., 2012). In this study, higher progesterone concentrations (1 and 10  $\mu\text{M}$ )  
375 were associated with significant downregulation of the cell-cycle pathway, whereas the lowest  
376 concentration (0.1  $\mu\text{M}$ ) was not. In addition, higher progesterone concentrations activate higher  
377 expression of cell cycle-regulated genes (down-regulation) suggesting that greater progesterone  
378 concentration more effectively inhibits cell cycle progression, potentially resulting in a higher chance  
379 that cells stop cycling in order to further differentiate. Higher progesterone concentration also allows  
380 higher expression of decidualisation-regulated genes (PRL, IGFBP1, VIM, IL1B, and FOXO1; up-  
381 regulation). This suggests that after cell cycle progression is stopped, higher progesterone  
382 concentrations effectively promote stromal cell differentiation leading to higher chance of cells  
383 undergoing decidualisation. These mechanisms explain why the highest percentages of differentiated  
384 cells and the decidualisation marker, IGFBP1, were observed in HESCs exposed to the highest  
385 progesterone concentration.

386

387 The pathway involved in the cell cycle was the only pathway significantly down-regulated on all  
388 incubation periods (days 3, 7, and 11). In comparing the expression of cell cycle-regulated genes  
389 between those three conditions, it was found that the majority of those genes (12/14 genes) had the

390 highest expression (down-regulation) on day 3 suggesting that cell cycle progression was actively  
391 inhibited early on day 3, but increasingly inactivated on days 7 and 11. Interestingly, the highest  
392 expression of decidulisation-related genes (PRL, IGFBP1, VIM, IL1B, and FOXO1) also occurred on  
393 day 3 and subsequently reduced corresponding to the gene expression pattern of cell cycle-regulated  
394 genes. The findings indicate that the functional regulation of cell cycle arrest and differentiation was  
395 actively regulated in the early stage on day 3 after progesterone exposure consistent with the study by  
396 Takano et al. (Takano, Lu, Goto et al., 2007). In the study by Lucas et al., single-cell RNA  
397 sequencing (scRNA-seq) was used to assess temporal transcriptomic changes every 2 days for a  
398 period of 8 days in HESCs treated with progesterone, 5/12 decidualisation-regulated genes according  
399 to the study by (Liu and Wang, 2015), were significantly expressed on day 2 in response to  
400 progesterone (PGR, FOXO1, STAT3, VIM, and FN1) before morphological differentiation was  
401 observed, subsequently, those genes were less expressed in the later stage (Lucas, Vrljicak, Muter et  
402 al., 2020). Similarly, in this study, after extensive activation of decidualisation-related genes in an  
403 early stage on day 3 in response to progesterone, it takes a few days to generate morphological  
404 differentiation identified by light microscopy on day 7. After initiation of morphological  
405 differentiation, it is possible that extensive inhibition of cell cycle progression and activation of  
406 decidualisation-related genes is no longer needed, therefore the expression of those genes decreases  
407 on days 7 and 11.

408  
409 The limitation of the study is that the conversion method of progesterone concentration in vitro to in  
410 vivo is not well-established. A concentration of 0.1, 1, and 10 uM can be converted to 31.5, 314.5,  
411 and 3144.6 ng/ml. The concentration of 0.1 uM (31.5 ng/ml) is close to physiologic serum  
412 progesterone during implantation. The higher concentration of 1 and 10 uM is supraphysiologic levels  
413 that are unlikely to occur in a natural cycle, yet 1 uM has been proposed as a standard concentration in  
414 vitro (Krikun et al., 2004). Therefore, this study provides informative details regarding the favourable  
415 trend of endometrial progesterone concentrations (high or low) and duration of progesterone exposure  
416 that maximises decidulisation process rather than point out an exact cut-off for progesterone

417 [concentration. We believe that more research is needed to translate progesterone concentration from](#)  
418 [in vitro to in vivo study.](#)

419

## 420 **6. Conclusion**

421 Decidualisation is modulated by progesterone exposure in a time and concentration-dependent  
422 manner. Exposure to below toxic (30  $\mu\text{M}$ ) but high (10  $\mu\text{M}$ ) progesterone concentration for 7-9 days is  
423 essential to maximise the process of decidualisation. [Further pieces of evidence are required to](#)  
424 [determine whether higher decidualisation will translate into better clinical outcomes.](#)

425

426

427

## 428 **Funding**

429 The University of Nottingham provided financial support for this study.

## 430 **Disclosure of interests**

431 The authors declare that they do not have any conflict of interest.

## 432 **Authors' contributions**

433 WEM conceived this research project. SS, WEM, and JHM designed the study. SS, MC, and SM  
434 performed the experiments, processed the experimental data, and performed the analysis. SS, WEM,  
435 JHM, KFW, JGT, and KJ assisted in writing the paper.

## 436 **Acknowledgments**

437 We are grateful to all the women who participated in this study. We would also like to thank Iqbal  
438 Khan and Li Guo for assistance in cell culture and microarray techniques.

440 **References**

- 441 [1] Henriet, P., Chevronnay, H.P.G. and Marbaix, E., 2012. The endocrine and paracrine control  
442 of menstruation, *Molecular and cellular endocrinology*. 358, 197-207.
- 443 [2] Petracco, R.G., Kong, A., Grechukhina, O., Krikun, G. and Taylor, H.S., 2012. Global gene  
444 expression profiling of proliferative phase endometrium reveals distinct functional  
445 subdivisions, *Reproductive sciences*. 19, 1138-1145.
- 446 [3] Hamilton, K.J., Arao, Y. and Korach, K.S., 2014. Estrogen hormone physiology: reproductive  
447 findings from estrogen receptor mutant mice, *Reproductive biology*. 14, 3-8.
- 448 [4] Koos, R.D., 2011. Minireview: putting physiology back into estrogens' mechanism of action,  
449 *Endocrinology*. 152, 4481-4488.
- 450 [5] Okada, H., Tsuzuki, T. and Murata, H., 2018. Decidualization of the human endometrium,  
451 *Reproductive medicine and biology*. 17, 220-227.
- 452 [6] Reed, B.G. and Carr, B.R., 2015. The normal menstrual cycle and the control of ovulation,  
453 *Endotext* [Internet]. MDText. com, Inc.
- 454 [7] Coulam, C., 2016. What about superfertility, decidualization, and natural selection?, *Journal*  
455 *of assisted reproduction and genetics*. 33, 577-580.
- 456 [8] Su, R.-W. and Fazleabas, A.T., 2015. Implantation and establishment of pregnancy in human  
457 and nonhuman primates, *Regulation of Implantation and Establishment of Pregnancy in*  
458 *Mammals*. Springer, pp. 189-213.
- 459 [9] Ramathal, C.Y., Bagchi, I.C., Taylor, R.N. and Bagchi, M.K., 2010. Endometrial decidualization:  
460 of mice and men, *Seminars in reproductive medicine*. NIH Public Access, pp. 17.
- 461 [10] Tseng, L., Gao, J.-G., Chen, R., Zhu, H.H., Mazella, J. and Powell, D.R., 1992. Effect of  
462 progestin, antiprogestin, and relaxin on the accumulation of prolactin and insulin-like growth  
463 factor-binding protein-1 messenger ribonucleic acid in human endometrial stromal cells,  
464 *Biology of reproduction*. 47, 441-450.
- 465 [11] Gellersen, B. and Brosens, J., 2003. Cyclic AMP and progesterone receptor cross-talk in  
466 human endometrium: a decidualizing affair, *The Journal of endocrinology*. 178, 357-372.
- 467 [12] Matsumoto, H., Sakai, K. and Iwashita, M., 2008. Insulin-like growth factor binding protein-1  
468 induces decidualization of human endometrial stromal cells via  $\alpha 5\beta 1$  integrin, *MHR: Basic*  
469 *science of reproductive medicine*. 14, 485-489.
- 470 [13] Garrido-Gomez, T., Dominguez, F., Quiñonero, A., Diaz-Gimeno, P., Kapidzic, M., Gormley,  
471 M., Ona, K., Padilla-Iserte, P., McMaster, M. and Genbacev, O., 2017. Defective  
472 decidualization during and after severe preeclampsia reveals a possible maternal  
473 contribution to the etiology, *Proceedings of the National Academy of Sciences*. 114, E8468-  
474 E8477.
- 475 [14] Vinketova, K., Mourdjeva, M. and Oreshkova, T., 2016. Human decidual stromal cells as a  
476 component of the implantation niche and a modulator of maternal immunity, *Journal of*  
477 *pregnancy*. 2016.
- 478 [15] Wu, D., Kimura, F., Zheng, L., Ishida, M., Niwa, Y., Hirata, K., Takebayashi, A., Takashima, A.,  
479 Takahashi, K. and Kushima, R., 2017. Chronic endometritis modifies decidualization in human  
480 endometrial stromal cells, *Reproductive Biology and Endocrinology*. 15, 16.
- 481 [16] Cha, J., Sun, X. and Dey, S.K., 2012. Mechanisms of implantation: strategies for successful  
482 pregnancy, *Nature medicine*. 18, 1754.
- 483 [17] Jordan, J., Craig, K., Clifton, D.K. and Soules, M.R., 1994. Luteal phase defect: the sensitivity  
484 and specificity of diagnostic methods in common clinical use, *Fertility and sterility*. 62, 54-62.
- 485 [18] Radwanska, E., Hammond, J. and Smith, P., 1981. Single midluteal progesterone assay in the  
486 management of ovulatory infertility, *The Journal of reproductive medicine*. 26, 85-89.

- 487 [19] Hull, M.G., Savage, P.E., Bromham, D.R., Ismail, A.A. and Morris, A.F., 1982. The value of a  
488 single serum progesterone measurement in the midluteal phase as a criterion of a  
489 potentially fertile cycle ("ovulation") derived from treated and untreated conception cycles,  
490 *Fertility and sterility*. 37, 355-360.
- 491 [20] Basnayake, S.K., Volovsky, M., Rombauts, L., Osianlis, T., Vollenhoven, B. and Healey, M.,  
492 2018. Progesterone concentrations and dosage with frozen embryo transfers—What's best?,  
493 *Australian and New Zealand Journal of Obstetrics and Gynaecology*. 58, 533-538.
- 494 [21] Labarta, E., Mariani, G., Holtmann, N., Celada, P., Remohi, J. and Bosch, E., 2017. Low serum  
495 progesterone on the day of embryo transfer is associated with a diminished ongoing  
496 pregnancy rate in oocyte donation cycles after artificial endometrial preparation: a  
497 prospective study, *Human Reproduction*. 32, 2437-2442.
- 498 [22] Cédric-Durnerin, I., Isnard, T., Mahdjoub, S., Sonigo, C., Seroka, A., Comtet, M., Herbemont,  
499 C., Sifer, C. and Grynberg, M., 2019. Serum progesterone concentration and live birth rate in  
500 frozen-thawed embryo transfers with hormonally prepared endometrium, *Reproductive  
501 biomedicine online*. 38, 472-480.
- 502 [23] Sharma, S. and Majumdar, A., 2016. Determining the optimal duration of progesterone  
503 supplementation prior to transfer of cryopreserved embryos and its impact on implantation  
504 and pregnancy rates: a pilot study, *International journal of reproductive medicine*. 2016.
- 505 [24] Krikun, G., Mor, G., Alvero, A., Guller, S., Schatz, F., Sapi, E., Rahman, M., Caze, R., Qumsiyeh,  
506 M. and Lockwood, C.J., 2004. A novel immortalized human endometrial stromal cell line with  
507 normal progesterational response, *Endocrinology*. 145, 2291-2296.
- 508 [25] Gellersen, B. and Brosens, J.J., 2014. Cyclic decidualization of the human endometrium in  
509 reproductive health and failure, *Endocrine reviews*. 35, 851-905.
- 510 [26] Kommagani, R., Szwarc, M.M., Vasquez, Y.M., Peavey, M.C., Mazur, E.C., Gibbons, W.E.,  
511 Lanz, R.B., DeMayo, F.J. and Lydon, J.P., 2016. The promyelocytic leukemia zinc finger  
512 transcription factor is critical for human endometrial stromal cell decidualization, *PLoS  
513 genetics*. 12, e1005937.
- 514 [27] Huang, J.-Y., Yu, P.-H., Li, Y.-C. and Kuo, P.-L., 2017. NLRP7 contributes to in vitro  
515 decidualization of endometrial stromal cells, *Reproductive Biology and Endocrinology*. 15,  
516 66.
- 517 [28] Li, Y., Kang, Z.-L., Qiao, N., Hu, L.-M., Ma, Y.-J., Liang, X.-H., Liu, J.-L. and Yang, Z.-M., 2017.  
518 Effects of Excess Copper Ions on Decidualization of Human Endometrial Stromal Cells,  
519 *Biological trace element research*. 177, 10-15.
- 520 [29] Liao, Y., Wang, J., Jaehnig, E.J., Shi, Z. and Zhang, B., 2019. WebGestalt 2019: gene set  
521 analysis toolkit with revamped UIs and APIs, *Nucleic acids research*. 47, W199-W205.
- 522 [30] Liu, J.-L. and Wang, T.-S., 2015. Systematic analysis of the molecular mechanism underlying  
523 decidualization using a text mining approach, *PLoS One*. 10, e0134585.
- 524 [31] Kaur, J., Naidu, P., Kumkum, R. and Mahajan, N., 2018. Impact of mid-luteal serum  
525 progesterone levels on pregnancy outcome in fresh and frozen embryo transfer cycles in  
526 women of Indian ethnicity, *The Onco Fertility Journal*. 1, 30.
- 527 [32] Hansen, K.R., Eisenberg, E., Baker, V., Hill, M.J., Chen, S., Talken, S., Diamond, M.P., Legro,  
528 R.S., Coutifaris, C. and Alvero, R., 2018. Midluteal progesterone: A marker of treatment  
529 outcomes in couples with unexplained infertility, *The Journal of Clinical Endocrinology &  
530 Metabolism*. 103, 2743-2751.
- 531 [33] Warne, D.W., Tredway, D., Schertz, J.C., Schnieper-Samec, S., Alam, V. and Eshkol, A., 2011.  
532 Midluteal serum progesterone levels and pregnancy following ovulation induction with  
533 human follicle-stimulating hormone: results of a combined-data analysis, *The Journal of  
534 reproductive medicine*. 56, 31-38.
- 535 [34] Suthaporn, S., Jayaprakasan, K., Thornton, J., Walker, K., Medrano, J.H., Castellanos, M.,  
536 May, S., Polanski, L., Raine-Fenning, N. and Maalouf, W.E., 2020. Suboptimal mid-luteal

537 progesterone concentrations are associated with aberrant endometrial gene expression,  
538 potentially resulting in implantation failure, *Reproductive BioMedicine Online*.  
539 [35] Paria, B., Lim, H., Das, S., Reese, J. and Dey, S., 2000. Molecular signaling in uterine  
540 receptivity for implantation, *Seminars in cell & developmental biology*. Elsevier, pp. 67-76.  
541 [36] Aghajanova, L., Hamilton, A. and Giudice, L., 2008. Uterine receptivity to human embryonic  
542 implantation: histology, biomarkers, and transcriptomics, *Seminars in cell & developmental*  
543 *biology*. Elsevier, pp. 204-211.  
544 [37] Harper, M.J., 1992. 10 The implantation window, *Bailliere's clinical obstetrics and*  
545 *gynaecology*. 6, 351-371.  
546 [38] Wilcox, A.J., Baird, D.D. and Weinberg, C.R., 1999. Time of implantation of the conceptus and  
547 loss of pregnancy, *New England Journal of Medicine*. 340, 1796-1799.  
548 [39] Salamonsen, L.A. and Evans, J., 2018. Menstruation and endometrial repair, *Encyclopedia of*  
549 *Reproduction*. Academic Press, pp. 320-325.  
550 [40] Logan, P.C., Steiner, M., Ponnampalam, A.P. and Mitchell, M.D., 2012. Cell cycle regulation  
551 of human endometrial stromal cells during decidualization, *Reproductive sciences*. 19, 883-  
552 894.  
553 [41] Takano, M., Lu, Z., Goto, T., Fusi, L., Higham, J., Francis, J., Withey, A., Hardt, J., Cloke, B. and  
554 Stavropoulou, A.V., 2007. Transcriptional cross talk between the forkhead transcription  
555 factor forkhead box O1A and the progesterone receptor coordinates cell cycle regulation  
556 and differentiation in human endometrial stromal cells, *Molecular endocrinology*. 21, 2334-  
557 2349.  
558 [42] Lucas, E.S., Vrljicak, P., Muter, J., Diniz-da-Costa, M.M., Brighton, P.J., Kong, C.-S., Lipecki, J.,  
559 Fishwick, K.J., Odendaal, J. and Ewington, L.J., 2020. Recurrent pregnancy loss is associated  
560 with a pro-senescent decidual response during the peri-implantation window,  
561 *Communications biology*. 3, 1-14.

562