

NAVIGATING CHALLENGES IN DRUG TESTING AND DISEASE MODELING: 3D SKIN ORGANOIDS VS. 2D CELL LINES

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Abstract. *Developing new and effective therapeutics relies on using robust preclinical models that can closely mimic human physiological and immunological responses. Two-dimensional (2D) cell culture systems fail to replicate the complex tissular architecture and specialized microenvironments, which limits their ability to translate early findings into clinical success. Three-dimensional (3D) organoid models have also several drawbacks, such as handling complexity, variability in growth and differentiation, scalability issues, and reliability concerns, particularly in the context of high-throughput drug screening. This review provides a critical examination of skin related 2D and 3D models in the context of drug testing and disease modeling, evaluating their respective strengths and limitations. We also explore emerging technologies (e.g. immune-competent skin organoids) designed to overcome current barriers in organoid research, particularly those aimed at enhancing throughput, standardization, and data reproducibility in drug screening and toxicity testing.*

Keywords: skin 3D organoids, 2D cell culture, drug discovery, diseases modelling, toxicity testing

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Introduction

The well-documented limitations of conventional two-dimensional (2D) cell culture systems in accurately replicating human tissue physiology have underscored the urgent need for more advanced models. In this context, three-dimensional (3D) organoids—particularly skin organoids—have emerged as

promising tools, warranting a critical assessment of their role in drug screening and disease modeling.

Since its inception, organoid research has revolutionized the way biological assessments are conducted, offering enhanced *in vitro* relevance and improved translation to *in vivo* systems. One major limitation in evaluating the efficacy and potential toxicity of drugs, for example, was the reliance on 2D monolayer cultures or basic co-culture systems, which lacked the complexity of native tissue architecture. These simplified models not only limited clinical applicability but also generated misleading false positives that advanced prematurely to animal studies or microfluidic chip-based systems. Over time, pharmaceutical companies and research institutions have moved away from these approaches in favor of more physiologically relevant models, such as 3D organoids (Ghiță-Răileanu et al 2025).

As we now understand, developing new and effective therapeutics relies on using robust preclinical models that can closely mimic human physiological and immunological responses. Indeed, 2D cell culture systems have long served as the gold standard for *in vitro* drug screening due to their simplicity and scalability. However, their failure in replicating the complex tissular architecture and specialized microenvironments, has limited their ability to translate early findings into clinical success (Chouhury et al 2011). Not surprisingly, many drugs that perform well in 2D cultures ultimately fail in later stages of development.

In order to surpass these limitations, 3D organoid models are being considered as preclinical models due to their high physiological fidelity in replicating tissue organization and function (Yu et al 2016, Tong et al 2016): These models can be derived from stem cells (embryonic stem cells – ESCs, induced pluripotent stem cells – iPSCs, mesenchymal stem cells – MSCs, etc.) or primary tissues (skin biopsies, liver tissue, urothelial tissue, etc.) and recapitulate specific architectures and multicellular interactions, making them valuable tools for screening therapeutic effect of novel compounds, toxicity testing, and studying disease mechanisms.

As encountered with every biomimicry system, 3D organoid systems have some drawbacks, including handling complexity, variability in growth and differentiation, scalability, and reliability issues, particularly when it comes to high-throughput drug screening.

Here, we provide a critical examination of 2D and 3D skin-focused models in the context of drug testing and disease modeling, evaluating their respective strengths and limitations. We also explore emerging technologies such as microphysiological systems (so called skin-on-chip -SoC), 3D bioprinting, CRISPR-based, skin-on-chip (SoC) or artificial intelligence/machine learning

(AI/ML), aimed at overcoming current barriers in organoid research, particularly those designed to enhance throughput, standardization, and data reproducibility in drug efficacy screening and toxicity testing.

Brief history of two-dimensional and three-dimensional *in vitro* cell culture models

2D cell culture systems have been extensively used for studying cell motility, screening drugs in early discovery, and performing toxicity analyses, a technique that involves a significant level of simplicity and low maintenance costs. Although its use was of great significance for several decades, the restrictions it imposed in mimicking the *in vivo* environment forced researchers to push forward, because the controlled environment, uniformity of nutrients, and modified morphologies (Ballav et al., 2021) resulted in limited translation into pre-clinical advances.

3D cell culture systems have emerged as powerful alternatives to traditional 2D models, offering enhanced biological relevance by better replicating the structural, functional, and microenvironmental characteristics of native tissues. These systems can be broadly classified into spheroids – which consist of a single or multiple cell types and are useful for basic biological studies and high-throughput screening, and organoids – which are composed of various differentiated cell types that self-organize into tissue-like structures capable of mimicking the architecture and function of real organs. Depending on the complexity and intended application, 3D cultures can be developed using static approaches, (scaffold-based cultures), or dynamic ones such as constrained spheroids, or dynamic systems, often referred to as microphysiological systems which incorporate perfusion and mechanical stimuli via platforms like organ-on-a-chip (Ballav *et al.*, 2021). These advanced culture systems are increasingly leveraged for two major biomedical directions: disease modeling by enabling the recreation of pathophysiological processes *in vitro*, and personalized medicine using patient-derived cells for customized drug testing and therapeutic development.

Accurate 3D organoids – a miniature, simplified versions of organs grown *in vitro* from stem cells, first appeared in scientific literature in the early 2000s, with a significant breakthrough in 2009. Up until then, researchers had been experimenting with 3D cultures of stem cells and tissue fragments for decades. The history of organoids dates back to 1907, with Wilson *et al* successful *in vitro* cultivation of dissociated sponge cells (Corrò, Novellademunt, and Li 2020). From then on, the approaches to such new endeavors concentrated on the isolation and reorganization of cells (Yang et al., 2023). In 2006–2007, advances in stem cell biology, including the development of induced iPSCs), laid the groundwork. Clevers' lab in the Netherlands reports that iPSCs grow intestinal organoids from a

single Lgr5+ adult stem cell (Sato *et al*, 2009). This was the first well-defined 3D organoid derived from adult stem cells that mimicked the structure and function of a real organ. This pivotal study paved the way for a wave of organoid research throughout the 2010s, resulting in the development of organoids for various organs, including the brain, liver, kidney, lung, pancreas, and others (Yang *et al*, 2023). These models have since become essential tools for studying human development, disease mechanisms, drug responses, and potential regenerative therapies.

Besides organoids, 3D cell culture systems encompass a range of techniques and methods used in research to replicate and mimic the *in vivo* microenvironment as physiologically relevant as possible. This includes hydrogel-based scaffolds (Rivero *et al.*, 2020; Mavil-Guerrero *et al.*, 2025), with a focus on cell proliferation, maturation, and the long-term physicochemical and mechanical stability of the systems. The common denominator is the development and evaluation of biomaterials suitable for supporting 3D culture environments in tissue-engineering applications. Besides this, a highly controlled systems that support the co-cultivation of cells are bioreactors. A bioreactor that mechanically guided 3D mesenchymal stem cell chondrogenesis using a novel thermo-reversible methylcellulose-based hydrogel (Cochis *et al.* 2017) was reported for potential use in cartilage repair. The novel systems focused on developing a 3D-printed perfusion bioreactor (3D-PBR) to facilitate the *in situ* growth and differentiation of human bone marrow (BM)-derived mesenchymal stem cells (MSCs), enabling co-culture with vascular cells (Jun *et al.* 2025). Organ-on-chip (OoC) systems are also intensely studied (Leung *et al.*, 2022), particularly those that enable high-throughput screening and multifunctional organ representation (Lee *et al.*, 2022).

To conclude, compared to 2D cell culture systems, 3D systems provide essential insights into cell-cell interaction, cell polarity, matrix interactions, and nutrient access, surpassing the uniformity, simplicity and cost encountered by 2D cell models (Fig. 1).

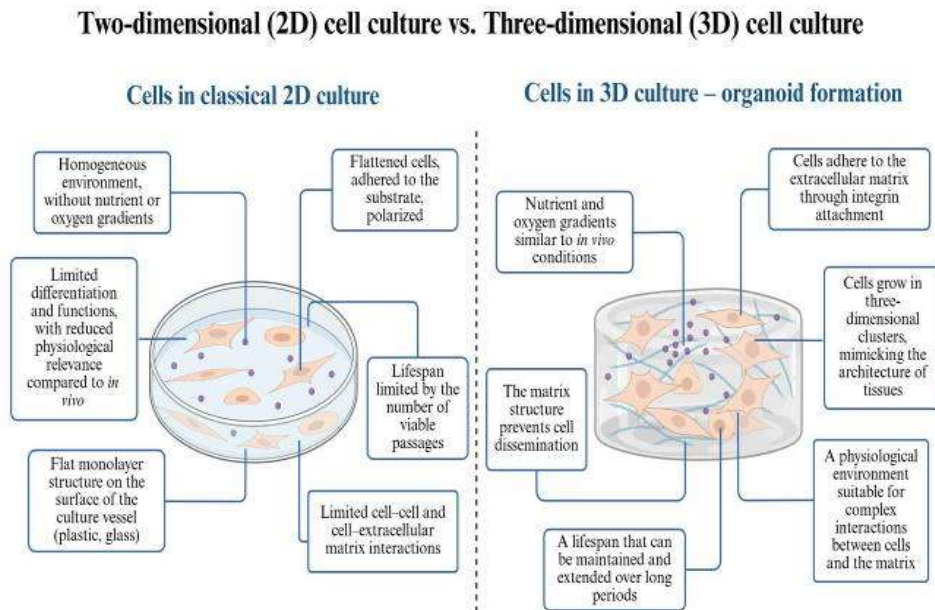


Fig. 1. Key structural, morphological, and physiological differences between 2D and 3D systems

3D Organoids in biomedical applications and drug discovery

Advantages in comparison with 2D models

3D cell cultures, including organoids, offer numerous advantages over conventional 2D models. Organoids have been shown to more accurately replicate the spatial architecture, cellular composition, and physiological functions of human organs while preserving the genetic and phenotypic heterogeneity of the tissue of origin (Cristobal et al., 2017). These 3D structures facilitate more realistic cell-cell interactions, thereby reflecting *in vivo* conditions with greater accuracy compared to 2D cultures (Lee et al., 2018).

Furthermore, 3D cultures exhibit augmented proliferative capacity, enhanced visualization, and facilitate high-throughput drug screening (Cristobal et al., 2017). These cultures are expedient, economical, and entail reduced ethical implications compared to animal models (Cruz et al., 2017). Due to these characteristics, organoids offer a superior platform for testing the efficacy and toxicity of therapeutics, as well as for developing personalized treatments in precision medicine (Pauli et al., 2017).

Specialized organoid approaches for skin

Skin organoids, like any other type of organoid, are created by using pluripotent stem cells or primary cells, and they have emerged as transformative tools in dermatological and developmental research. These three-dimensional structures replicate certain features of the skin, including the stratified epidermis, dermis, and appendages such as hair follicles and sebaceous glands. The development of skin organoids presents promising avenues for studying skin development, modeling diseases, testing drugs, and regenerative therapies.

Depending on the research purpose, various strategies are employed to cultivate skin organoids in a dish. Bioengineering and bioprinting are primarily intended to ensure the correct placement of keratinocytes, fibroblasts, melanocytes, and stem cells in architectures that mimic the native stratified epidermis, dermis, and hypodermis. This technique enhances the structural fidelity of organoids, enabling the spatial patterning necessary for appendage development, including hair follicles and sebaceous glands. This approach yields reproducible skin constructs with enhanced structural fidelity, facilitating both translational grafting applications and drug screening (Lee et al., 2020; Hong et al., 2023).

However, the aforementioned skin organoids lack a specific feature of the primary tissue, that being vascularization. The skin relies on a constant supply of nutrients and oxygen, which are delivered through the blood vessels. A significant limitation of conventional skin organoids is the lack of vascularization, which restricts long-term culture and maturation. The recent integration of microfluidic systems, such as skin-on-a-chip platforms, enables the creation of vascularized organoids with perfusable channels that support angiogenesis and immune cell interactions. These systems enable more accurate modeling of inflammatory conditions, transdermal delivery, and wound healing, and they offer an ethically superior alternative to animal testing (Abaci et al., 2016; Derman et al., 2024).

Recently, the development of single-cell RNA sequencing (scRNA-seq) and spatial transcriptomics has revolutionized our understanding of cellular heterogeneity and developmental trajectories within skin organoids. These tools enable researchers to map epidermal differentiation, melanocyte maturation, and appendage-specific signaling gradients, such as Wnt, BMP, and SHH (Ramovs et al., 2022; Stabel et al., 2023). This has been particularly valuable in assessing how closely organoids replicate fetal or adult human skin at the transcriptomic level.

Skin organoids have the great advantage of being able to form from patient-derived cells, and can be reprogrammed and induced into pluripotent stem cells (iPSCs). In this way, disease models can be created *in vitro* for molecular mechanistic research and testing of treatments. For example, CRISPR-Cas9 technology enables the precise genetic manipulation of skin organoids derived

from patient-specific induced pluripotent stem cells (iPSCs). This allows for the correction of monogenic disorders such as epidermolysis bullosa (COL7A1) or Netherton syndrome (SPINK5), the creation of disease models, and the insertion of fluorescent reporters for real-time tracking of differentiation and cell fate (Jacków et al., 2019; Nasrallah et al, 2024). Such models are now being explored in preclinical gene therapy pipelines and personalized dermatology.

Lately, skin organoid research has advanced by introducing the co-culturing of other cell types to add complexity to the model, because the skin is deeply intertwined with both the immune and nervous systems. Recent studies have integrated Langerhans cells, T cells, and nociceptors into skin organoids to investigate neuroimmune interactions, which are relevant in conditions such as atopic dermatitis and psoriasis. This co-culture approach provides mechanistic insights into pain, itch, and inflammation, moving beyond structural mimicry to functional disease modeling (Tang et al., 2024; Quilez et al, 2024).

Another breakthrough in organoid applications is the use of machine learning (ML) and AI tools for handling the variability and complexity in skin organoid data. Deep learning systems can quantify epidermal thickness, stratification, pigmentation, and even predict differentiation success based on imaging or transcriptomic profiles (Wang et al, 2024). These tools are also increasingly used in high-throughput screening setups to classify organoid morphology and response to drugs or cosmetic compounds.

Besides using skin organoids for drug testing or genetic manipulation, one other important application is studying the development and self-organization of the skin. Breakthroughs in differentiation protocols have enabled the self-organization of appendages such as hair follicles, sebaceous glands, and even pigment-producing units within skin organoids. In a pioneering study, Lee et al. (2020) demonstrated that pluripotent stem cells could give rise to hair-bearing skin with innervation and vascular integration.

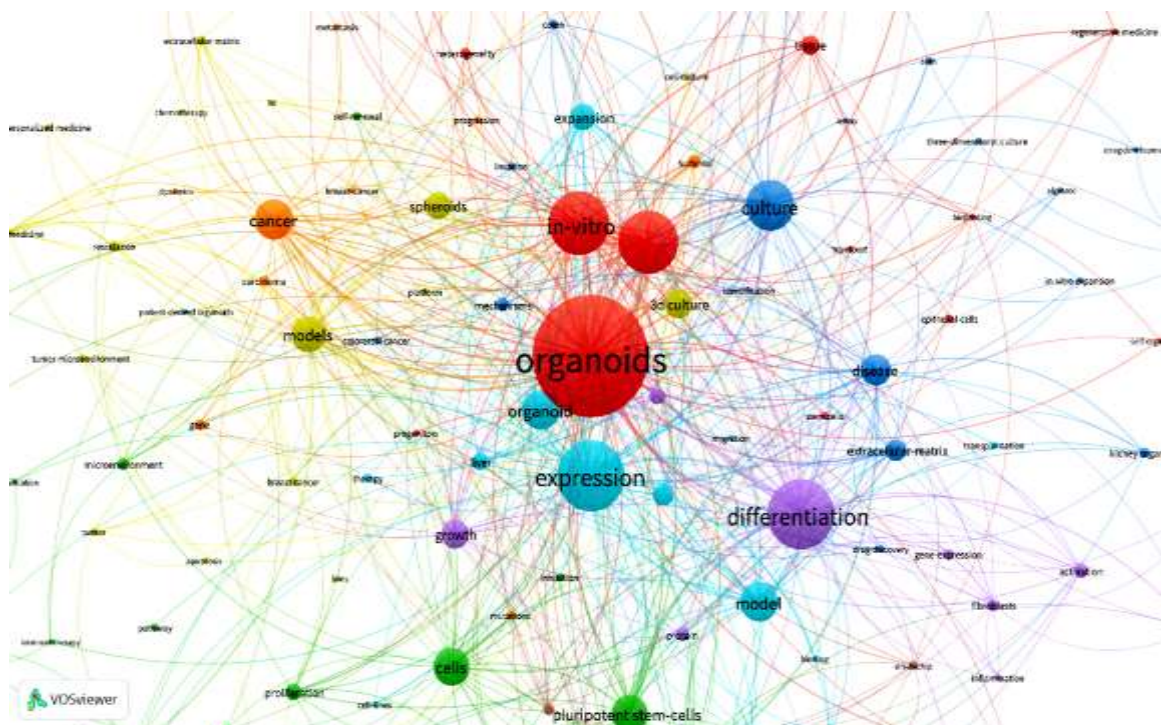


Fig. 2. VOSviewer Map representation of the keyword co-occurrence in the top-cited articles from Web of Science. Made by analyzing the bibliographic data of the 369 resulting articles, after applying advanced data searching of 2D cell culture, 3D cell culture, and organoids. The most occurring keyword in the most relevant papers in the field is organoids, which is a telling fact on the importance of this subject for further research.

These models hold promise not only for cosmetic testing but also for regenerative transplantation in patients with burns or wounds. Skin organoids have also been successfully adapted to model infectious diseases, such as EV-A71, Mpox, and *Staphylococcus aureus*, allowing for the real-time study of viral entry, immune response, and antimicrobial efficacy (Li et al., 2023; Li et al., 2025; Xie et al., 2023). Additionally, their use in skin aging studies has illuminated pathways involved in collagen degradation, senescence, and barrier dysfunction, providing platforms for anti-aging drug discovery (Wang et al., 2024).

Emerging technologies in skin organoids research

Recent advances in tissue engineering, imaging, and genomics are propelling the development of increasingly sophisticated skin organoid models. These emerging technologies aim to enhance physiological relevance, reproducibility, and clinical applicability by overcoming limitations such as poor vascularization, lack of immune components, or insufficient maturation. Below, we explore some of the most promising directions.

Vascularized Skin Organoids Using Organoid-on-a-Chip Platforms

The integration of skin organoids with microfluidic organ-on-a-chip platforms is enabling the development of perfusable, vascularized skin models. By incorporating endothelial cells and simulating flow dynamics, these platforms enable more accurate modeling of dermal capillary beds and nutrient diffusion, which is essential for long-term culture and tissue viability (Derman et al., 2025). Techniques include co-culturing with iPSC-derived endothelial cells and using microfabricated channels that mimic vascular geometry (Hong et al., 2023). These approaches have shown promise in creating stratified, vascularized skin layers that closely mimic *in vivo* histology (Hong et al, 2023).

3D and 4D Bioprinting for Architectural Precision and Dynamic Remodeling

3D bioprinting has enabled the layer-by-layer deposition of multiple skin cell types (e.g., keratinocytes, fibroblasts, melanocytes) in biomimetic patterns using ECM-mimicking hydrogels. Advanced techniques, such as 4D bioprinting, incorporate time as a dimension, enabling constructs to undergo programmed shape changes or self-assembly in response to environmental cues, including pH or temperature. This is particularly useful for simulating wound healing dynamics or scar formation, as well as for producing large-scale skin grafts with embedded vasculature and appendages, such as sweat glands (Zhang et al., 2024).

Multi-Omics and Spatial Transcriptomics Integration

Single-cell and spatial transcriptomics technologies are now routinely applied to skin organoids to profile differentiation dynamics, epidermal stratification, and dermal-epidermal crosstalk. For example, transcriptomic analysis has helped identify basal progenitor cell zones and melanocyte stem cell niches within skin organoids (Lee et al., 2020; Hong et al, 2023). When combined with proteomics and metabolomics, these tools enable high-resolution mapping of pathways involved in barrier function, immune signaling, and aging.

CRISPR-Based Functional Genomics and Disease Modeling

The use of CRISPR/Cas9 in skin organoids enables the precise modeling of genetic skin diseases, such as epidermolysis bullosa or psoriasis, by introducing disease-relevant mutations in keratin genes or cytokine pathways (Jacków et al., 2019). Gene editing is also employed for lineage tracing, fluorescent reporter tagging, and rescuing disease phenotypes using isogenic control lines, making skin organoids powerful tools for therapeutic screening and personalized medicine.

Immune-Competent Skin Organoids

One major limitation of conventional organoid models is the absence of immune cells. Recent strategies now integrate Langerhans cells, T cells, and macrophages into skin organoid cultures, either through co-differentiation or transplantation of immune precursors. This is particularly relevant for studying inflammatory skin diseases (e.g., atopic dermatitis), tumor-immune interactions in melanoma, and responses to immunotherapies (Jung et al., 2022; Lee et al., 2021). Incorporating immune cells has also improved the modeling of pathogen-host interactions, such as viral entry through skin epithelia.

AI and Machine Learning for Skin Organoid Analysis and Design

Artificial intelligence (AI) is being employed to analyze high-content imaging data from skin organoid cultures. Convolutional neural networks (CNNs) can classify morphological phenotypes (e.g., layer thickness, pigmentation) and predict outcomes of differentiation protocols (Bai et al., 2024). Generative AI tools are also being developed to design optimal bioprinting patterns or ECM compositions for improved organoid self-organization, accelerating hypothesis generation and protocol optimization.

Ex vivo models used in toxicity testing and drug screening

Ex vivo cellular models, either derived from explants, engineered from spheroids, and monocultures, or OoCs, are currently reported as preferred options for toxicity testing and drug screening applications. In the case of epidermal and transdermal evaluations, whether for drug discovery or testing, we benefit from several *in-house* and commercially available skin-mimicking models. Among the first reported was the reconstructed human epidermis (RHE) (Rosdy and Clauss 1990), adopted by OECD guidelines as a reliable test method for *in vitro* skin irritation (TG 439) in 2010, through the European Centre for the Validation of Alternative Methods (ECVAM) validation study (Alépée et al. 2010).

Recent models report a medium-throughput drug-screening platform (METPlatform) based on organotypic cultures. This platform was used specifically to evaluate inhibitors against metastases growing *in situ* (Zhu et al., 2022), for example. With this approach, authors focus on brain metastasis, displaying how ex vivo organotypic cultures can bridge the gap between *in vitro* and *in vivo* models, providing a more physiologically relevant environment for drug screening and identifying novel therapeutic targets.

Key breakthroughs reported include the already well-researched bio-printing techniques (Armbricht and Dittrich 2017; Xiang et al 2022), OoC, gene editing with the CRISPR-Cas9 system (Sun et al. 2023), advanced imaging techniques,

synthetic biomaterials, and their role, application, and perspectives in the furtherance of biomedical research and medication development (Dave et al. 2025).

However, scientific progress must be supported by adequate legislation. Therefore, the implementation of *ex vivo* tools into drug testing legislation is evolving, driven by the desire to improve the predictivity of preclinical studies, reduce reliance on animal testing (the 3Rs: Replace, Reduce, Refine), and accelerate the drug development process. The first progress towards this goal was made by the FDA Modernization Act 2.0 (Han 2023), which permits the utilization of alternative testing platforms, including cell-based assays (like human induced pluripotent stem cells - iPSCs), organoids, OoCs, and advanced artificial intelligence (AI) methods, to assess drug safety and effectiveness during the preclinical phase. This represents a significant shift away from the previous requirement for mandatory animal testing of all drugs before human trials. European Medicines Agency (EMA) has been actively encouraging the incorporation of alternative methods, including *ex vivo* models, by supporting institutes and researchers with targeted funds for developing such tools. In one of their latest reports, EMA focuses on the regulatory acceptance and implementation of **New Approach Methodologies (NAMs)** in the development of human medicines (European Medicines Agency (EMA) 2025). It provides an overview of current trends, ongoing initiatives, and challenges/opportunities from a regulatory perspective, offering recommendations to facilitate the integration of these innovative methods (which include *ex vivo* models) and reduce reliance on animal testing (the 3Rs principles).

Challenges and Perspective

Despite the significant progress made in the development and application of 3D skin organoid models, several challenges continue to limit their full integration into mainstream drug discovery and disease modeling pipelines. These obstacles span technical, biological, and regulatory domains, often hindering reproducibility, scalability, and clinical translation (Dave et al. 2025). At the same time, emerging technologies and innovative approaches are actively addressing these limitations, paving the way for more robust, physiologically relevant, and ethically sound models. The following table provides an overview of the main challenges associated with 3D organoids, alongside current perspectives and potential solutions aimed at overcoming these hurdles (Table 1).

Table 1. Overview of the challenges and perspectives reported in the development and application of 3D skin organoid models

Challenges	Perspectives / Solutions
Complex handling and growth variability of 3D organoids	Development of standardized protocols and automation tools to improve reproducibility and scalability (Lee et al. 2024; “CellXpress.Ai Automated Cell Culture System Molecular Devices” n.d.)
Limited vascularization impairs nutrient delivery and maturation	Integration of vascularized organoid-on-a-chip platforms to simulate perfusion and support tissue viability (Quintard et al. 2024)
Absence of immune components in traditional skin organoids	Co-culturing with immune cells (e.g., Langerhans, T cells, macrophages) for better modeling of inflammation and immune response (Van Os, Engelhardt, and Guenat 2023; Moon, Kim, and Shin 2021)
Structural and functional limitations	3D and 4D bioprinting technologies enabling precise architecture and dynamic remodeling of skin organoids (Zhang et al. 2024; Kennedy et al. 2025; Phang et al. 2022)
Limited insight into cellular heterogeneity and signaling	Use of multi-omics approaches and spatial transcriptomics for mapping differentiation and functional pathways (Li et al. 2025)
Genetic disease modeling constraints	CRISPR-Cas9 for creating skin disease-specific mutations, functional genomics, and personalized therapeutic testing (Wang et al. 2023; Abdelnour et al. 2021; Rossi et al. 2024)
Variability in morphology and drug response	Application of AI/ML to classify skin morphology, predict outcomes, and design optimal culture conditions (Ahammed, Mamun, and Uddin 2022; Abbas et al. 2025)
Legislative and regulatory barriers	Adoption of the FDA Modernization Act 2.0 and EMA support for New Approach Methodologies (NAMs) (Van Norman 2019; European Medicines Agency (EMA) 2025)

Conclusions

2D cell culture systems, although still used and considered relevant for some assays, have been surpassed in complexity, biological relevance, mimicry, and *in vivo* comparability by 3D systems.

Skin organoids represent a transformative platform in dermatological and developmental research, leveraging pluripotent stem cells and highly interdisciplinary technologies, such as bioengineering, microfluidics, and CRISPR-Cas9, to recapitulate skin structure and function. Innovations such as vascularized OoC systems, 3D/4D bioprinting, single-cell RNA sequencing, and AI-driven analysis have overcome limitations like poor vascularization and lack of immune components, enhancing physiological relevance. These models enable precise disease modeling, drug screening, and regenerative therapies for conditions like epidermolysis bullosa, atopic dermatitis, and skin aging, while also advancing our understanding of skin development and pathogen interactions. As these technologies evolve, skin organoids hold immense potential for personalized medicine and ethical alternatives to animal testing, paving the way for clinical applications and novel therapeutic strategies.

As seen, 3D systems are reported in numerous forms, from scaffolds to explants, *ex vivo* reconstructions, spheroids, or OoC. Their use is benefiting from growing legislative support, with organizations such as the FDA and EMA implementing new methodologies to integrate alternative testing platforms.

Recent advances in high-throughput platforms have enabled the study of multi-organ systems, providing unprecedented insights into the molecular effects of new drugs and a rapid pathway for laboratory-to-clinical studies.

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