

1           **3D Visualisation of trans-syncytial nanopores provides a pathway for paracellular**  
2                           **diffusion across the human placental syncytiotrophoblast**

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4   **Short title:** Trans-syncytial nanopores

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17 **Abstract**

18 The placental syncytiotrophoblast, a syncytium without cell-cell junctions, is the primary  
19 barrier between the mother and the fetus. Despite no apparent anatomical pathway for  
20 paracellular diffusion of solutes across the syncytiotrophoblast size-dependent paracellular  
21 diffusion is observed. Here we report data demonstrating that the syncytiotrophoblast is  
22 punctuated by trans-syncytial nanopores (TSNs). These membrane-bound TSNs directly  
23 connect the maternal and fetal facing sides of the syncytiotrophoblast, providing a pathway  
24 for paracellular diffusion between the mother and fetus. Mathematical modelling of TSN  
25 permeability based on their 3D geometry suggests that 10-37 million TSNs per cm<sup>3</sup> of  
26 placental tissue could explain experimentally observed placental paracellular diffusion. TSNs  
27 may mediate physiological hydrostatic and osmotic pressure homeostasis between the  
28 maternal and fetal circulations but also expose the fetus to pharmaceuticals, environmental  
29 pollutants and nanoparticles.

## 30 Introduction

31 The placenta was once viewed as a perfect barrier, but as the thalidomide tragedy  
32 demonstrated, this is not the case [1]. It is now clear that potentially harmful molecules and  
33 particulates can cross the placenta and adversely affect fetal development. However, the  
34 mechanism by which these molecules and particulates cross the placenta is not always clear  
35 [2, 3]. Understanding how these substances cross the placenta is necessary to identify the  
36 risks and prevent long-term consequences of these exposures, which may adversely affect  
37 fetal and postnatal health [4].

38 The primary placental barrier is the syncytiotrophoblast, a continuous syncytial  
39 monolayer covering the villi at the maternal-fetal interface. As there are no cell-cell junctions  
40 in a syncytium, there is no obvious pathway by which paracellular diffusion can occur. Despite  
41 the absence of an anatomical pathway for diffusion, there is physiological evidence for size-  
42 dependent paracellular diffusion of solutes [5, 6]. Trans-syncytial channels, or nanopores,  
43 have been proposed as mediators of trans-syncytial diffusion, however continuous full-width  
44 nanopores have not been previously demonstrated in the human placenta [7]. An alternative  
45 hypothesis to explain paracellular diffusion is that it occurs through regions of syncytial  
46 damage [8]. These hypotheses are not mutually exclusive but establishing mechanisms of  
47 fetal exposure is necessary to understand the likely risks of different compounds and develop  
48 strategies to mitigate this.

49 Selective placental transfer of nutrients, IgG, wastes and exogenous toxins is  
50 facilitated by membrane transporters and endocytosis [9-11]. However it is not clear how  
51 exogenous drugs and toxins reach the fetus as, with a few exceptions such as the apically  
52 located exchanger OATP4A1 [10], drug transporters in the placenta mediate efflux from the  
53 fetus to the mother [12]. Nanoparticle transfer across the placenta has been observed, but  
54 the mechanism is unclear [13]. A more extensive understanding of how metabolites,  
55 pharmaceuticals and toxins reach the fetal circulation is necessary to protect fetal health.

56 Estimates of placental permeability surface area products for hydrophilic solutes have  
57 been determined *in vivo* and show size-dependent permeability of solutes, which decreases  
58 with increasing molecular radius [5, 6]. In other species with haemochorial placentas,  
59 permeability has also been shown to be size-selective with some species having higher or  
60 lower overall permeability compared to humans [3, 14]. This data suggests a size-selective  
61 permeability of the placenta through low diameter channels [15].

62 Using serial block-face scanning electron microscopy (SBF SEM) to reconstruct  
63 placental ultrastructure in three dimensions, this study demonstrates the presence of full-  
64 width trans-syncytial nanopores (TSNs) in the human placenta.

## 65 Methods

66 Term placental tissue was collected after delivery from uncomplicated pregnancies  
67 with written informed consent and ethical approval from the Southampton and Southwest  
68 Hampshire Local Ethics Committee (11/SC/0529). Villous samples from 8 placentas were  
69 processed and imaged using TEM or SBFSEM as described previously [27]. Regions containing  
70 TSNs were manually segmented in Avizo v2019.4 (ThermoFisher, Eindhoven).

### 71 **Modelling of nanopore diffusive transfer capacity**

72 The nanopore diffusive transfer capacity for a particular molecule is determined by its  
73 diffusivity in free solution as well as the geometry of the pore, specifically the pore length and  
74 cross sectional area. Here we will calculate this geometric contribution in the form of the  
75 effective area-over-length ratio  $A_{pore}/L_{pore}$  [m], which is a measure for the effect of pore  
76 geometry on diffusive transfer, independent of the solute studied. This parameter can then  
77 be used to calculate nanopore diffusive transfer using the concentration gradient and  
78 diffusion coefficient for any specific solute.

79 Briefly, the magnitude of the diffusive flux  $J_{pore}$  [mol/s] through a pore of uniform cross  
80 section is given by:

$$81 \quad J_{pore} = DA_{pore} \frac{|\Delta C|}{L_{pore}} \quad \text{Eq. 1}$$

82 where  $D$  [ $\text{m}^2/\text{s}$ ] is the diffusion coefficient,  $A_{pore}$  [ $\text{m}^2$ ] the pore cross sectional area,  $\Delta C$   
83 [ $\text{mol}/\text{m}^3$ ] the concentration difference over the pore and  $L_{pore}$  [m] the pore length. This can  
84 also be expressed in terms of the permeability surface area product  $PS_{pore}$  [ $\text{m}^3/\text{s}$ ]:

$$85 \quad J_{pore} = PS_{pore} \Delta C \quad , \text{ where } PS_{pore} = \frac{DA_{pore}}{L_{pore}} \quad \text{Eq. 2}$$

86 Since in reality the pore cross sectional area is not uniform, 3D image-based modelling  
87 was used to calculate the effective area-over-length ratio  $A_{pore}/L_{pore}$  [m] based on Eq. 1 by  
88 prescribing the concentration difference and diffusivity and then monitoring the resulting flux  
89 in the simulations. Segmented image stacks were imported in Simpleware ScanIP (P-2019.09;  
90 Synopsys, Inc., Mountain View, USA). Voxels were resampled isotropically so that the x and y  
91 pixel size matched the z axis spacing. Pores were meshed using linear tetrahedral elements.  
92 Different coarseness settings were evaluated to establish convergence, with the final number  
93 of elements used for the different pores ranging from  $1.4\text{--}38 \times 10^5$ .

94 Steady state diffusion simulations were performed in COMSOL Multiphysics (v5.5;  
95 COMSOL AB, Stockholm, Sweden). Since  $A_{pore}/L_{pore}$  does not depend on the choice of  
96 parameters,  $D = 1 \text{ m}^2/\text{s}$  was used and a fixed concentration gradient  $\Delta C = 1 \text{ mol}/\text{m}^3$  was  
97 imposed by constant concentration boundary conditions on the inlet and outlet surface of  
98 the pore, while the remaining external surface was subject to no-flux conditions.

99 After simulations, the magnitude of the diffusive flux  $J_{pore}$  given by the integral of the solute  
100 flux in the direction normal to the pore inlet or outlet taken over the inlet/outlet cross  
101 sectional area, was then used to calculate the effective pore area-over-length ratio  
102  $A_{pore}/L_{pore}$  based on Eq. 1.

103 For a specific solute, the permeability surface area product for a single pore  $PS_{pore}$   
104 was obtained by multiplying the average  $A_{pore}/L_{pore}$  value by the relevant diffusion  
105 coefficient (Eq. 2). The number of pores  $n_{pores}$  [ $g^{-1}$ ] per gram of placental tissue was then  
106 estimated based on Eq. 3:

$$107 \quad n_{pores} = \frac{PS_{placenta}}{PS_{pore}} \quad \text{Eq. 3}$$

108 where  $PS_{placenta}$  [ $m^3 s^{-1} g^{-1}$ ] is the overall experimentally observed placental permeability  
109 surface area product for the corresponding solute from literature.

## 110 Results

111

### 112 *Trans-syncytial nanopores*

113 This study manually inspected 14 SBFSEM image stacks from five different placentas  
114 to identify trans-syncytial nanopores (TSNs) defined as membrane lined pores connecting the  
115 apical and basal plasma membranes of the syncytiotrophoblast. These stacks consisted of  
116 7487 SBFSEM images, representing a total volume of 0.00000017 cm<sup>3</sup>.

117 Inspection of serial sections allowed identification of TSNs crossing the  
118 syncytiotrophoblast. Continuous TSNs with a clear connection between the apical and basal  
119 membranes were identified. Near-continuous TSNs were also identified which had  
120 connections to both the apical microvillous and basal plasma membranes but contained  
121 discontinuities along the length of the nanopore. Unilateral nanopores, ultrastructurally  
122 similar to TSNs but opened from either the apical or basal plasma membrane without  
123 connecting to the opposite membrane were identified. An illustration of these nanopore  
124 types as we defined them is shown in (figure 1). Regions containing TSNs were manually  
125 segmented in Avizo v2019.4 (ThermoFisher, Eindhoven). Cross section from one of these TSNs  
126 are shown in figure 2. The lumens of TSNs typically had low electron density, consistent with  
127 a primarily fluid filled pore (figure 2a, c and d). However, some TSNs and regions of TSNs were  
128 observed with higher electron density indicating diffuse contents (figure 2e). The nanopore  
129 shown in figure 2 can be seen reconstructed in 3D (Supplemental movie 1) and a movie  
130 showing the nanopore lumen highlighted in sequential sections (supplemental movie 2) can  
131 be seen in the supplemental material.

132 Ten continuous TSNs were identified from three different placentas and these did not  
133 have a uniform structure (figure 3). While the least complex TSNs were direct tubes  
134 connecting the apical and basal membranes (figure 3c) the most complex full width TSN was  
135 a double pore with two bifurcated apical openings (4 in total) and two basal openings (figure  
136 3a). Blind ends are present in the TSNs shown in figure 2d, i and g.

137 In addition, 20 near-continuous TSNs were identified, with examples in all five  
138 placentas studied. In two cases, these near-continuous TSNs were highly complicated with  
139 branches, multiple dilations, and blind ends (figure 4b). Finally, 25 unilateral nanopores were  
140 identified arising from either the apical (n = 17) or basal (n = 8) plasma membrane of the  
141 syncytiotrophoblast but not connecting to the opposing plasma membrane.

142 On the basal membrane, continuous and near-continuous TSN were observed opening  
143 adjacent to basal lamina in 16 cases and regions adjacent to cytotrophoblast in 14 cases.

144 Of the ten continuous TSNs, eight contained membrane-bound inclusions which,  
145 surrounded by pore membrane, formed double-membrane structures (figure 4). Inclusions  
146 were also observed in the majority of near-continuous and unilateral nanopores. In three  
147 cases, the inclusions appeared to be trophoblastic in origin. In the first case, the inclusion on  
148 the apical side appeared to be connected to the syncytiotrophoblast by at least one thin stalk  
149 of cytoplasmic material (figure 4a-c). At the available resolution, it was not clear whether  
150 other inclusions were also engulfed syncytiotrophoblast. In two cases, an inclusion on the

151 basal side of the placenta was a clear-cut protrusion from an underlying cytotrophoblast cell  
152 (figure 4d-f).

153 Another less commonly observed feature associated with TSNs were thin nanopores  
154 within the syncytiotrophoblast, where two closely adjacent membranes were joined by  
155 desmosome like adhesions (figure 5). These were observed in two TEM images and one  
156 SBFSEM image stack. In one case a desmosome associated nanopore was seen almost  
157 crossing the placenta from the basal membrane to near the microvillous membrane (figure  
158 5a). Desmosome associated nanopores were observed in one SBF SEM image stack where  
159 they were found to be ribbon or sheet-like structures 5-16 nm wide and estimated at 200-  
160 800 nm deep (figure 5b). Desmosome containing nanopores could be seen appearing and  
161 disappearing within the same 2D section, which is consistent with a pore rather than a cell-  
162 cell junction. Topologically a cell-cell junction would need to either interact with two cell or  
163 image boundaries or form a circular feature (figure 5c).

164

### 165 **Modelling diffusion through TSNs**

166 Depending on their geometry, individual nanopores display a large variation in  
167 estimated effective  $A_{pore}/L_{pore}$  from  $0.14 \times 10^{-8}$  m to  $2.08 \times 10^{-8}$  m (figure 2k). The effective  
168  $A_{pore}/L_{pore}$  ratio based on the results of the computational simulations of the ten pores, as  
169 depicted in figure 2, was in the order of 10 nm ( $8.5 \pm 7.2 \times 10^{-9}$  m, mean  $\pm$  SD). By multiplying  
170 the mean effective  $A_{pore}/L_{pore}$  ratio with the diffusion coefficient for particular solutes using  
171 Eq. 2, the average permeability surface area products for a single pore could then be  
172 calculated (table 1). Dividing the experimentally observed placental permeability surface area  
173 products (from the literature) by the average permeability surface area product for a single  
174 pore, resulted in placental pore number estimates between 13 and 37 million pores per gram.

175

### 176 **Discussion**

177 The demonstration of nanoscale pores punctuating the syncytiotrophoblast  
178 challenges our understanding of the placenta as a barrier. It suggests that rather than being  
179 a continuous physical barrier between mother and fetus, the syncytiotrophoblast is a  
180 molecular sieve facilitating diffusion of small solutes via active maintenance of TSNs.  
181 Computational modelling diffusion through these channels suggests that these solutes may  
182 include nutrients and toxins, so this transfer route may have profound implications for the  
183 fetus.

184 TSNs were structurally heterogeneous, including simple tubes, tubes with dilated  
185 regions and branched structures with blind ends. Many TSNs also contained inclusions of  
186 membrane-bound material, in three cases trophoblastic in origin but in most cases the origin  
187 was unclear. Some TSNs had multiple openings to the syncytiotrophoblast apical microvillous  
188 or basal membranes. The near-continuous and unilateral nanopores are likely in the process  
189 of formation, degradation or remodelling. It is also possible that near-continuous TSNs are  
190 continuous but that the connections were too thin to observe. The relatively large number of

191 near-continuous and unilateral nanopores is consistent with TSNs being dynamically  
192 remodelled.

193 There was a wide range in calculated permeability parameters for the modelled TSNs,  
194 with diffusion through the most permeable being 10 x greater than the least permeable. As  
195 might be expected, shorter, wider TSNs had the greatest permeability while the longer TSNs  
196 had the lowest permeability (excluding the TSN with multiple apical and basal openings).

197 The time scale for diffusion  $T = \frac{L_{pore}^2}{D}$  through the TSNs is < 60 ms for the compounds  
198 studied. As such TSNs will operate under quasi steady state conditions, given that the  
199 timescale of diffusion through the TSN is very fast compared to any changes in concentration  
200 in the much larger volumes of the maternal intervillous space and fetal capillary to either side.

201 There are differences in the placental permeability of different compounds from  
202 literature, which could not be fully explained based on diffusivity and thus affected the  
203 number of pores estimated, with higher estimated pore numbers for smaller molecules. One  
204 explanation for this is that there may be more thinner pores available that only allow passage  
205 of smaller molecules. However, we do not think that this is the explanation for what is  
206 observed here. Paracellular diffusion across the placenta is size-selective, but the TSNs are  
207 likely to be too wide to impose this size selectivity on smaller molecules. Physiological  
208 estimates of placental pore sizes in rodents are in the order of 17 nm, which is consistent with  
209 the thinnest regions of the nanopores described here and with the desmosome associated  
210 channels we observed [15]. For comparison glucose is 1.5 nm long so would be expected to  
211 diffuse freely through pores of this size. If the TSNs do not impose size selectivity, other  
212 structures such as the trophoblast basal lamina or the capillary endothelium might, and  
213 further research is required to understand this better [16].

214 Molecules such as IgG or nanoparticles such as ultrafine diesel exhaust could diffuse  
215 into most regions of the TSNs, but the diameter would sterically hinder their transfer. TSN  
216 diameter might be a significant barrier to the transfer of large molecules unless an additional  
217 biological mechanism facilitates this transfer.

218 On the basal membrane TSNs opened adjacent to both basal lamina and  
219 cytotrophoblast cells. TSNs opening to the basal lamina would provide the most direct  
220 pathway to the fetal circulation. Substances diffusing through TSNs opening adjacent to  
221 cytotrophoblast would have a less direct path to reach the fetus but these solutes could  
222 interact with the cytotrophoblast themselves.

223 Further research is required to determine TSN densities in placental tissue. An initial  
224 approximation for the TSN density was obtained by dividing the number of observed TSNs (10  
225 continuous or 30 including continuous and near-continuous TSNs) by the imaged volume of  
226  $0.00000017 \text{ cm}^3$ . This initial approximation for TSN density is 58 million TSNs per  $\text{cm}^3$ , and  
227 including near-continuous TSNs is 162 million/ $\text{cm}^3$ . This estimate is in line with modelled  
228 estimate of the number of TSNs required to mediate transfer of known paracellular markers  
229 such as inulin and creatinine.

230 The 50 nm z-resolution is a potential technical limitation in this study. Firstly, it may  
231 lead us to classify some continuous TSNs as near continuous and secondly could also affect



232 the accuracy of the geometric representation in the computational models affecting the  
233 calculated permeability parameters. The use of focused ion beam scanning electron  
234 microscopy could reduce z depth, but this approach has a smaller field of view making finding  
235 TSNs more difficult.

236 The physiological role of TSNs is likely to include the maintenance of ionic and osmotic  
237 homeostasis between mother and fetus. Diffusion of ions and bulk fluid flow would balance  
238 osmotic and pressure gradients that could build up across an impermeable placenta. TSNs  
239 may also facilitate the placental transfer of nutrients, such as glucose, with maternal to fetal  
240 gradients to the fetus [17]. However, the physiological roles of TSNs may come at the cost of  
241 allowing non-selective transfer of potentially harmful substances.

242 The presence of membrane-bound inclusions within the TSNs suggests their role could  
243 be more complex than simply being pores for diffusion. The nanopore inclusions and  
244 surrounding TSN membrane create a double membrane structure which show ultrastructural  
245 similarities to autophagosomes [18]. Nanopore inclusions can be observed in a previous study  
246 that sought to identify TSNs using lanthanum perfusion [7].

247 While the origin and nature of the inclusions remains unclear, in some cases they  
248 appeared trophoblastic in origin. One inclusion appeared to be connected to the  
249 syncytiotrophoblast by a stalk of cytoplasmic material which is consistent with  
250 syncytiotrophoblast being pinched off into a nanopore to form an inclusion. If this  
251 interpretation is correct this could potentially represent the initiation of autophagy or  
252 material that will be shed from the placenta. In other cases, inclusions on the basal side of  
253 the placenta were observed to be protrusions from underlying cytotrophoblast cells.

254 A rare feature associated with TSNs were desmosome associated nanopores which  
255 could be observed arising from basal membrane folds [19], and within the cytoplasm but not  
256 observed connecting to the microvillous membrane. The connect to dilations that appear  
257 similar to, or are, the TSNs that are the main focus of this paper. It is possible that the TSNs  
258 represent formation or breakdown of TSNs or that they are a separate class of nanopore that  
259 intersect with TSNs. The desmosome associated nanopores have been observed previously in  
260 2D TEM images where it was suggested that they are remnants of cytotrophoblast-  
261 syncytiotrophoblast fusion. We cannot exclude this trophoblast fusion explanation, but in the  
262 limited number of 3D examples we identified the structures were more like ribbon than a cell-  
263 cell junctions [20]. Desmosome associated nanopores are very thin and so may not be visible  
264 when the block is in the wrong orientation and so could be more common than they appear.

265 Cells that cross or penetrate epithelial barriers have been observed to express tight  
266 junction proteins to facilitate movement through cell-cell junctions, and the desmosome  
267 containing nanopores in the syncytiotrophoblast could provide a route and a mechanism by  
268 which maternal or fetal cells could cross the syncytiotrophoblast [21, 22]. Images of  
269 erythrocytes protruding through the syncytiotrophoblast are consistent with distensible  
270 channels that could allow cell transfer [23].

271 There is considerable diversity in placental structures across species and given the  
272 possibility that the syncytiotrophoblast has evolved independently in different branches of

273 the evolutionary tree, the diversity of TSNs (or similar structures) is of interest. To date, full  
274 width trans-syncytial channels have only been described in the degu which has both short  
275 direct channels in thin regions of syncytiotrophoblast and more complex channels connecting  
276 infoldings of basal and apical surfaces [24]. The human TSNs had a distinct appearance but  
277 were most similar to the more complex Degu channels, although longer and thinner. The  
278 distribution of TSNs across species may inform their biological role and origins.

279 Identifying the molecular processes underlying TSN formation will be key to  
280 understanding these structures. While TSNs may form by a unique mechanism, they are more  
281 likely to co-opt at least some of the known molecular mechanisms that mediate endocytosis.  
282 There are multiple endocytic processes, including clathrin and caveolin, micropinosomes or  
283 CLIC/GEEC, which form tubular structures [25]. The CLIC/GEEC may be of particular interest  
284 as these form tube-like structures [26].

285 In conclusion, this study has demonstrated the existence of TSNs providing a non-  
286 selective diffusion pathway across the placenta. These TSNs may allow pharmacological  
287 drugs, environmental toxins and even particulate pollutants across the syncytiotrophoblast.  
288 Accurately determining the density of TSNs in healthy pregnancy is necessary to confirm the  
289 capacity of TSNs to mediate transfer. Furthermore, establishing the density of TSNs in disease  
290 may provide novel insights into disease processes.

291  
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413 **Figures and tables**

414

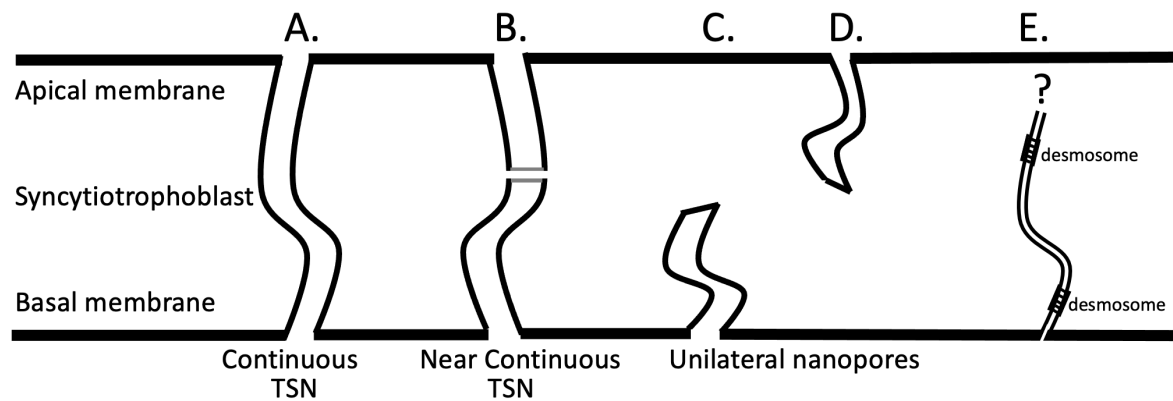
415 **Table 1: Estimated number of pores per gram required to explain the experimentally**  
 416 **observed placental permeability surface area products.**

	MW (da)	$D$ ( $\text{m}^2 \text{s}^{-1}$ )	$PS_{\text{pore}}$ ( $\text{m}^3 \text{s}^{-1}$ )	$PS_{\text{placenta}}$ ( $\text{m}^3 \text{s}^{-1} \text{g}^{-1}$ )	number of pores ( $\text{g}^{-1}$ )
Inulin*	6179	$2.6 \times 10^{-10}$	$2.20 \times 10^{-18}$	$0.28 \times 10^{-10}$	$13 \times 10^6$
CrEDTA*	344	$7.0 \times 10^{-10}$	$5.92 \times 10^{-18}$	$1.06 \times 10^{-10}$	$18 \times 10^6$
Mannitol*	182	$9.9 \times 10^{-10}$	$8.37 \times 10^{-18}$	$2.50 \times 10^{-10}$	$30 \times 10^6$
Creatinine**	113	$12.9 \times 10^{-10}$	$10.9 \times 10^{-18}$	$4.00 \times 10^{-10}$	$37 \times 10^6$

417 \*Placental permeability surface area product data taken from Bain *et al.* (1990) [6] and diffusion coefficients  
 418 from Atkinson *et al.* (1991) [28]. \*\* Placental permeability surface area product based on the average of values  
 419 from Cleal *et al.* (2007)[29], Edwards et al 1993 [30] & Brownbill et al 1995 [31] and diffusion coefficient from  
 420 Collins *et al.* (1979) [32].

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424 **Figure 1, Classification of nanopores found in human placental syncytiotrophoblast. A)**

425 continuous TSNs connecting the apical and basal membrane without any breaks. **B)** near-

426 continuous TSNs with sections connected to the apical and basal plasma membranes but

427 contained discontinuities where no clear connection could be observed but the ends of the

428 discontinuous sections were adjacent. **C & D)** Unilateral nanopores were ultrastructurally

429 similar to TSNs but opened from either the apical or basal plasma membrane but without any

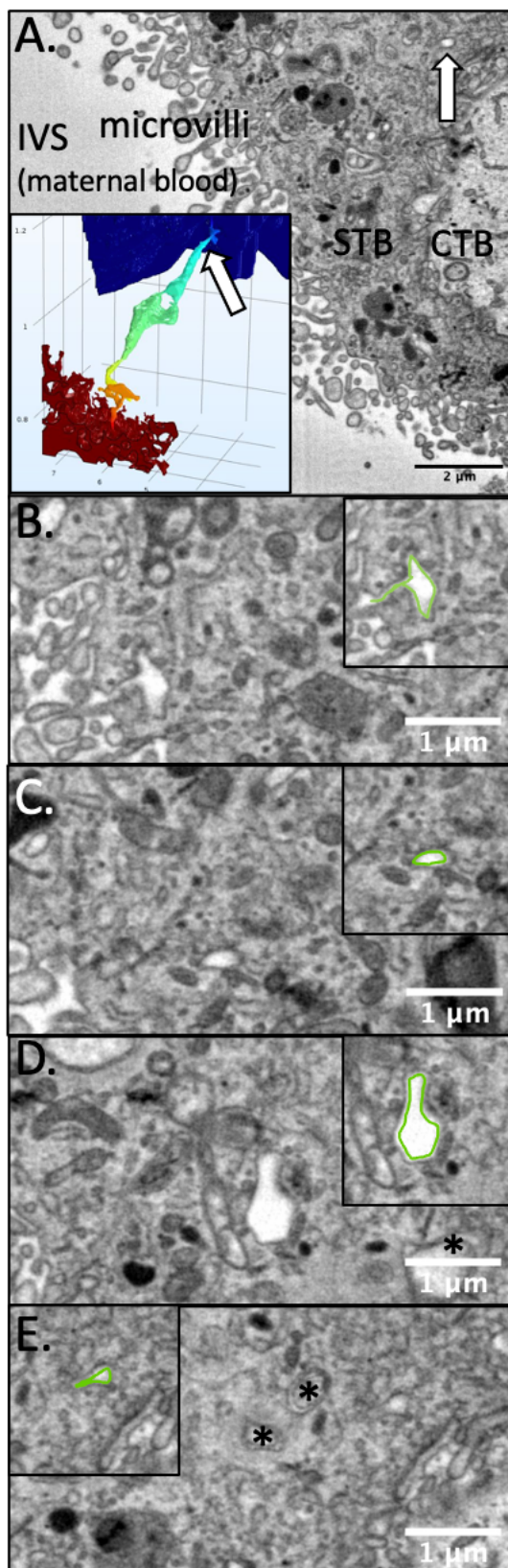
430 apparent connection to the opposing membrane. **E)** Desmosome associated nanopores were

431 also observed arising from the basal membrane but none of these could be observed

432 connecting to the apical membrane.

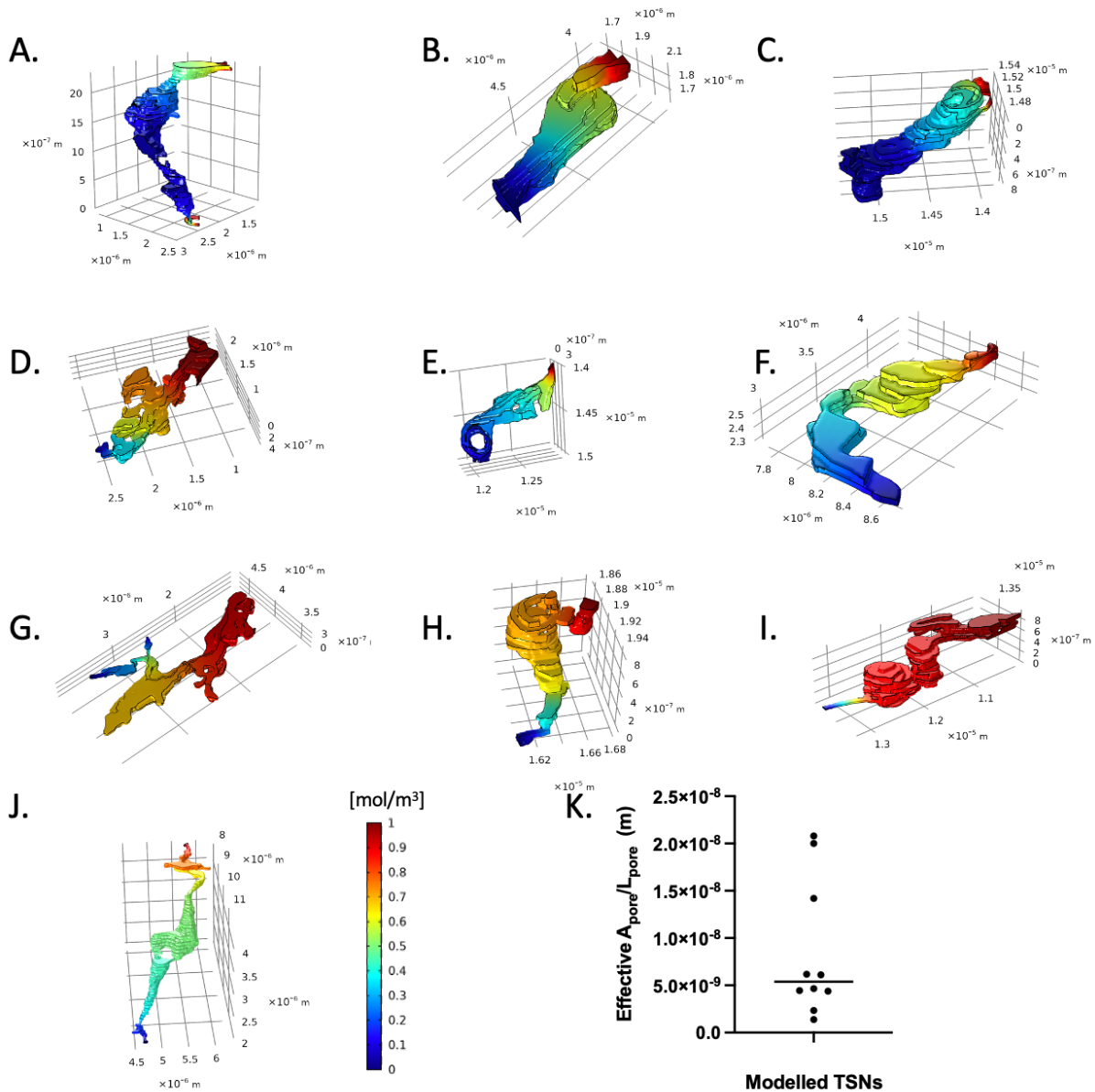
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**Figure 2, SBF SEM serial sectioning allows identification of TSNs crossing the human placental syncytiotrophoblast. A)** An SBF SEM image showing a cross section of the syncytiotrophoblast (STB) from the maternal intervillous space (IVS) to the underlying cytotrophoblast (CTB). Within this image a cross section of a nanopore can be seen (white arrow) illustrating how difficult it would be to identify these structures from individual 2D images. The inset shows the nanopore reconstructed in 3D from 44 consecutive sections with the white arrow indicating where the section comes from and modelled solute concentration indicated by colour from high (red) to low (blue). **B)** the apical opening of the TSN with the inset showing this highlighted in green. **C)** A thin region of nanopore with the inset showing this highlighted in green. **D)** a dilated region of the nanopore with the inset showing this highlighted in green. In B, C and D the nanopore has a low electron density consistent with a fluid filled pore **E)** A region of nanopore where the lumen has a higher electron density than in other regions. The inset showing this cross section of the nanopore highlighted in green. This region is close to the end of the nanopore and the cytotrophoblast boundary can be seen bottom left. \* Indicates inclusions in other TSNs in the section. A movie showing the nanopore reconstructed in 3D and another movie with the nanopore lumen highlighted in sequential sections can be seen in the supplemental material.





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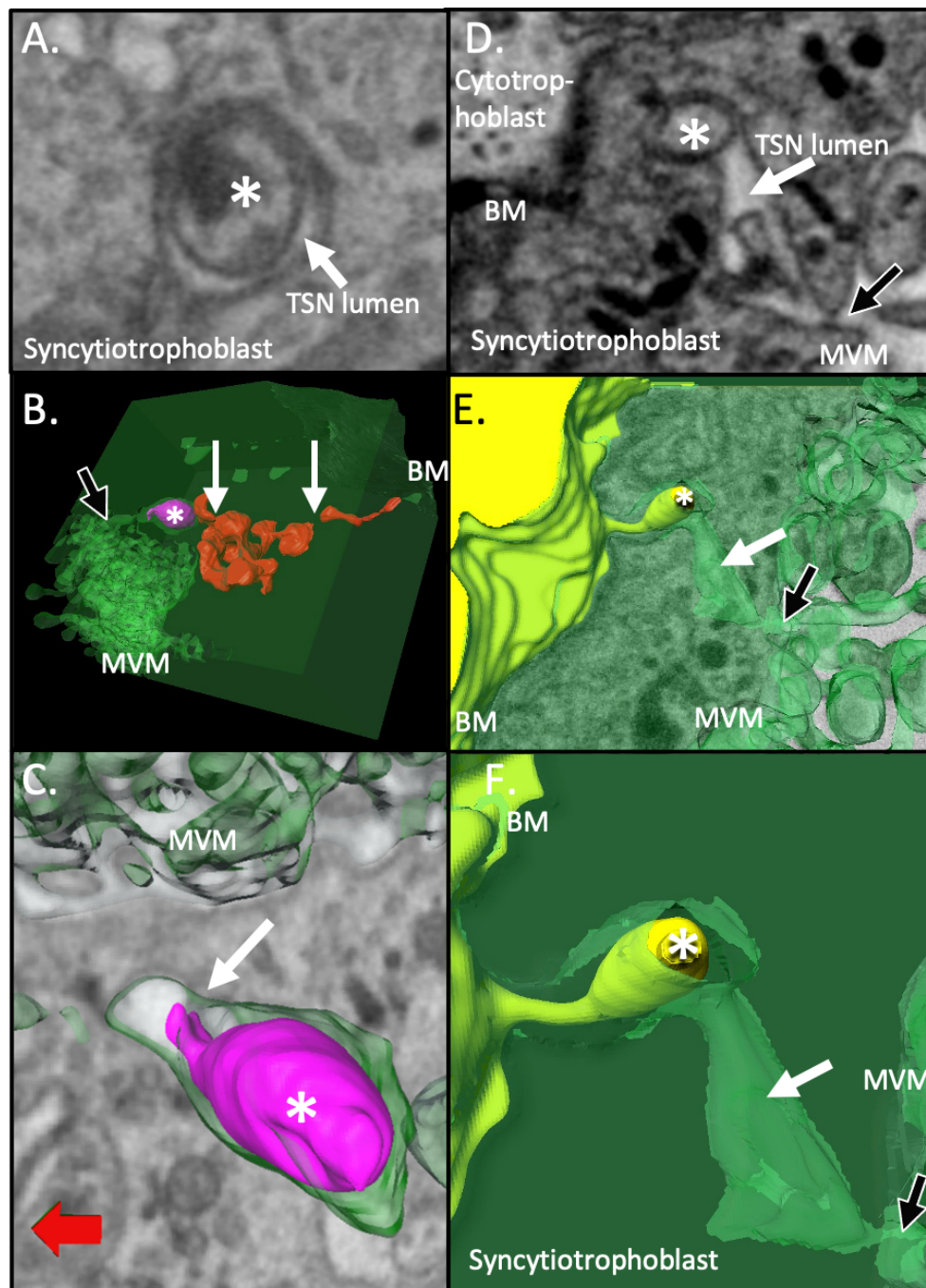
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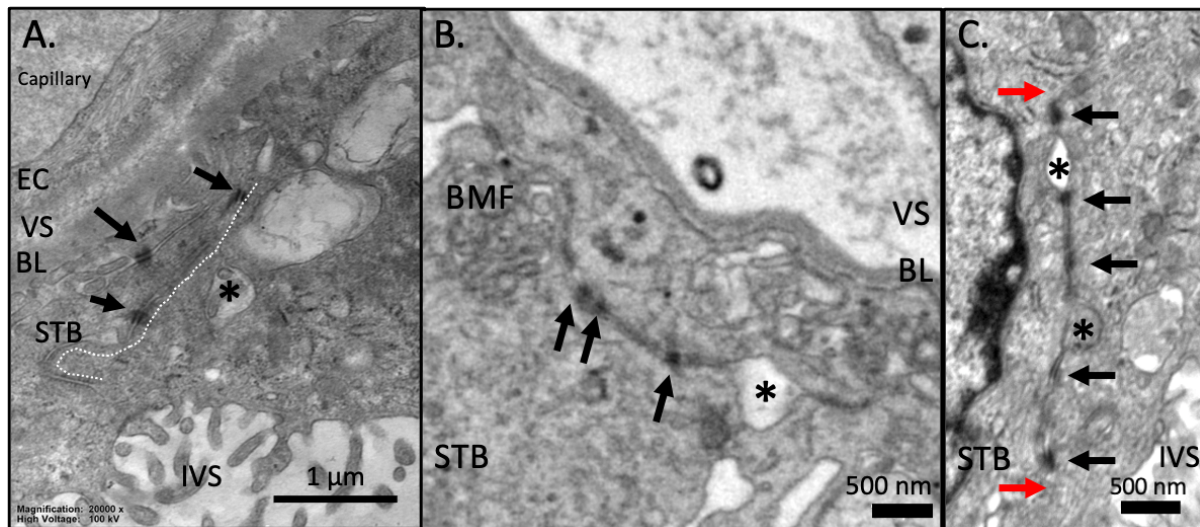
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**Figure 3, Modelled solute concentration gradients within the continuous TSNs.** High concentrations (red) were applied to the maternal facing TSN opening, and concentration gradients are shown for diffusion through the channel. The molecular flux associated with these gradients was used to calculate the effective cross sectional surface area used to calculate permeability. **A-J)** show the nanopores presented in order of calculated permeability from highest to lowest. The apical opening is presented on top right and basal openings on the bottom or left. The TSN shown in A is a double pore with four apical and basal openings and a connection on the basal side which accounts for its higher permeability despite its longer length. Blind ends are present in D, I and G. TSN A has two openings to the microvillous membrane and two openings to the basal membrane of the syncytiotrophoblast. **J)** shows a scatterplot showing the distribution of permeabilities with the line indicating the median value.



483  
 484 **Figure 4, Examples of TSN inclusions formed from engulfed syncytiotrophoblast or villous cytotrophoblast.** A-C) An  
 485 example of an apical nanopore inclusion (highlighted by an \*) which in 3D can be seen to be budding off the  
 486 syncytiotrophoblast within the nanopore. **A)** shows a SBF SEM image containing a cross section of the TSN inclusion. **B)** shows  
 487 the pink inclusion reconstructed in 3D within the TSN formed from green syncytiotrophoblast. This inclusion lies within a  
 488 complex near-continuous TSN which, apart from regions around the inclusion, is shown in red. This TSN has discontinuities  
 489 indicated by white arrows but gives the appearance of being part of a trans-syncytial network. A black arrow indicates the  
 490 apical opening of this TSN. **C)** shows a higher magnification image of the pink inclusion and the connection to the green  
 491 syncytiotrophoblast is indicated by a white arrow. **D-F)** An example of a TSN inclusion, which in 3D is seen to be derived from  
 492 underlying villous cytotrophoblast. In panels D-F an \* indicates the inclusion, white arrows indicate the lumen of the TSN and  
 493 black arrow indicates the apical opening of the TSN on the microvillous membrane. **D)** shows a 2D SBF SEM image of the  
 494 syncytiotrophoblast containing a cross section of a TSN and an inclusion containing an inclusion. **E)** shows the 3D structure  
 495 of this region with the villous cytotrophoblast in yellow and the syncytiotrophoblast in green. **F)** shows a higher magnification  
 496 image of the structure of the villous cytotrophoblast derived inclusion and the TSN channel. BM and MVM are the basal  
 497 membrane and apical microvillous membranes of the syncytiotrophoblast.

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500 **Figure 5, Desmosome associated nanopores. A)** a TEM image of a desmosome associated  
501 nanopore traversing most of the width of the syncytiotrophoblast (white dotted line). The  
502 desmosomes are indicated by black arrows. This type of nanopore was associated with  
503 dilations typical of the TSNs described in the previous figures (indicated by \*). **B)** an SBF SEM  
504 image of a desmosome associated nanopore connecting basal membrane folds to a TSN like  
505 opening (indicated by \*). **C)** A TEM image of a desmosome associated nanopore which begins  
506 and ends in the same field of view (red arrows). This demonstrates that these structures are  
507 not a cell-cell junction, as if this were the case it would need to intersect 2 sides of the image  
508 or be a circle. This channel contains an empty TSN like dilation (indicated by the top\*) and  
509 one which contains inclusion material (indicated by the bottom\*). EC = endothelial cell, VS =  
510 villous stroma, BL = basal lamina, STB = syncytiotrophoblast, BMF = basal membrane folds.  
511 IVS = intervillous space.