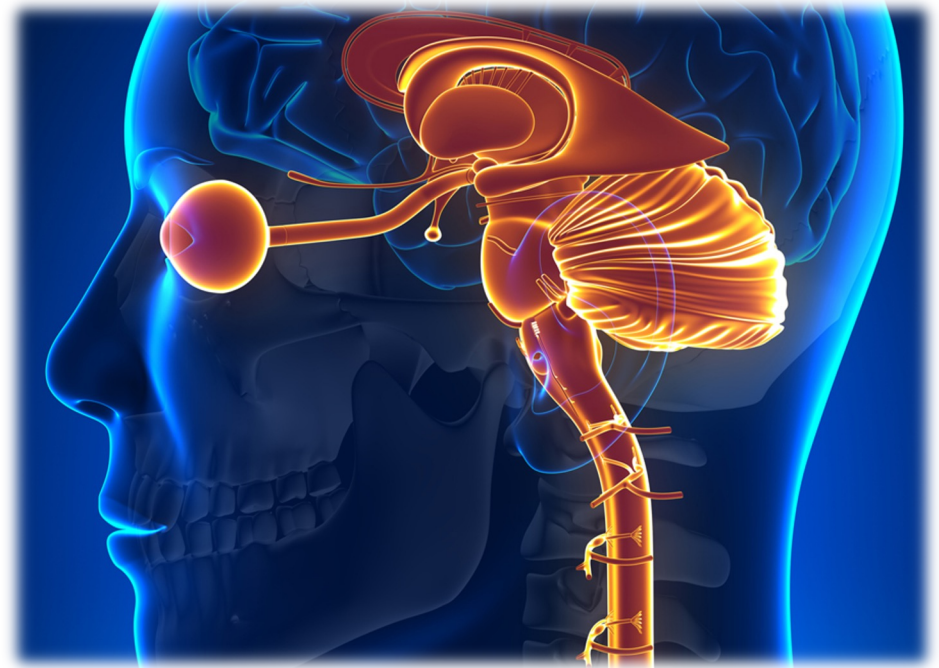




SAPIENZA
UNIVERSITÀ DI ROMA

AAV-mediated gene therapy for **Neuromyelitis Optica**



POLYPEPTIDE TRANSDUCTION TO INHIBIT IgG AUTOANTIBODIES-AQUAPORIN 4 BINDING IN SPINAL CORD ASTROCYTES

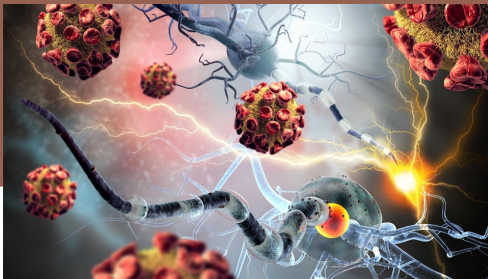
Terapia Genica e Neuroscienze, aa 2022/2023
Beatrice Borhy, Beatrice Cannata, Francesca Landi, Francesca Marsili, Valeria Marsili

Background

NEUROMIYELITIS OPTICA (NMO)

WHAT IS IT?

- neurodegenerative autoimmune disease of CNS.



<https://iiman.co/terapias-naturales-para-las-enfermedades-autoinmunes/>

WHAT CAUSES?

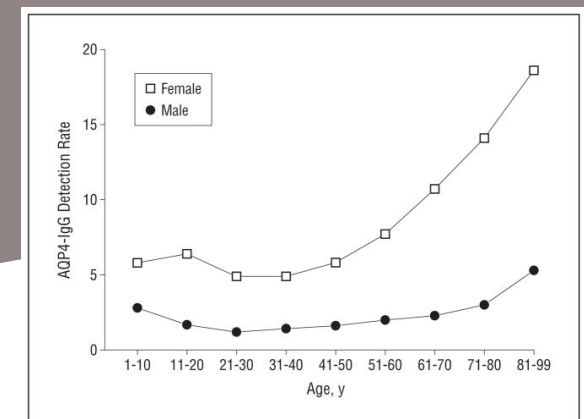
- Optic neuritis (A) and spinal cord myelitis (B)
- Course: blindness, paralysis and death for acute neurogenic respiratory failure.
- Disability associated with relapses



<https://www.clinicabaviera.it/>

EPIDEMIOLOGY

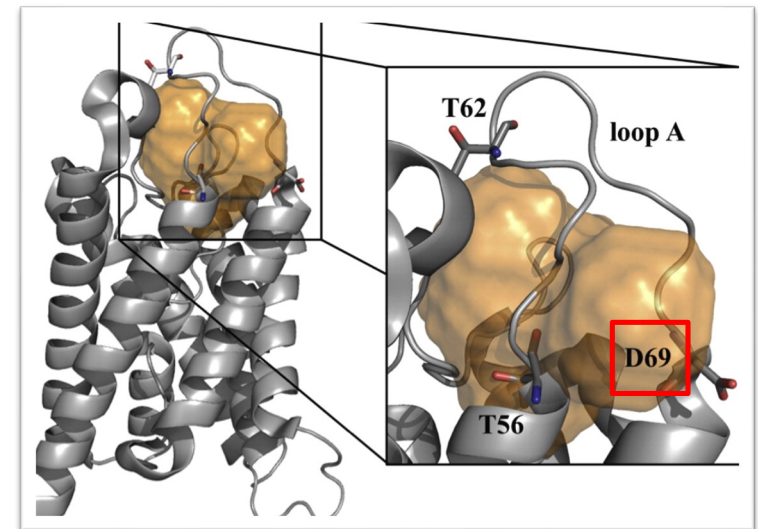
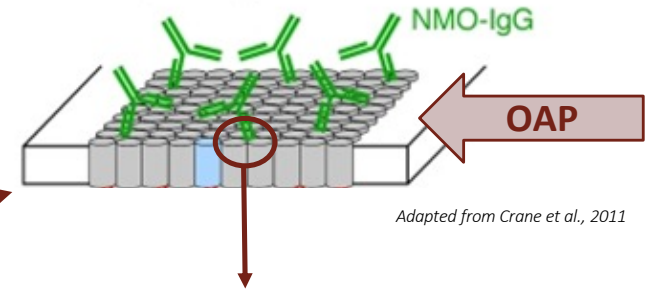
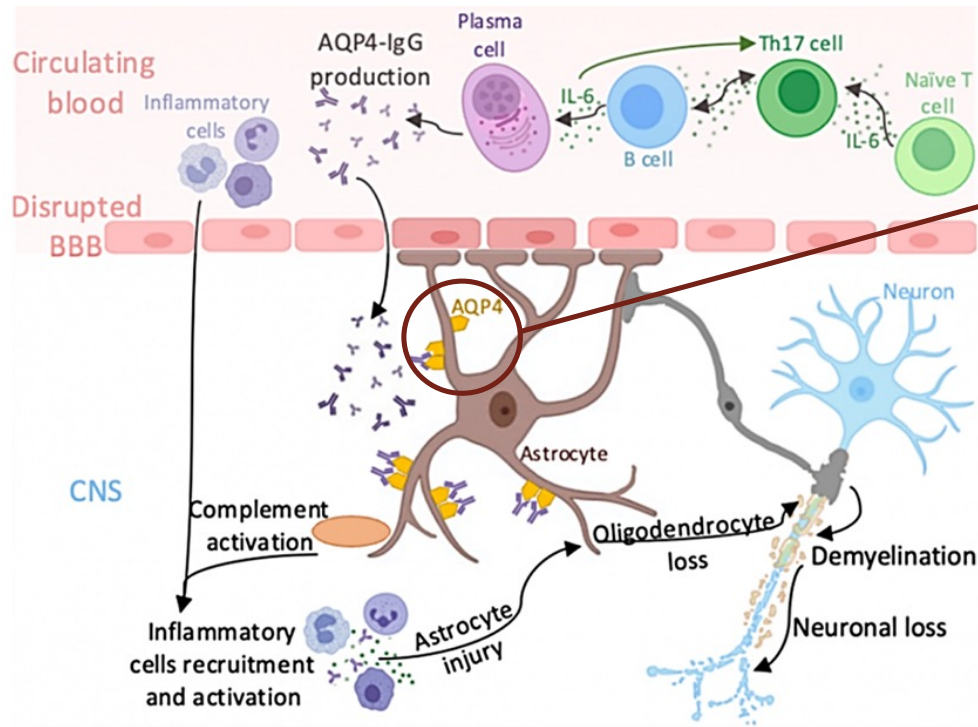
- Mean age : 40 years
- Women > Men
- Prevalence ranges from 0.1–4.4 cases per 100,000



Quek et al., 2012

Background

MOLECULAR BASES



AIM OF THE PROJECT

Reduction of NMO-IgG target recognition to decrease neurodegeneration

WHY? To reduce myelitis and avoid death

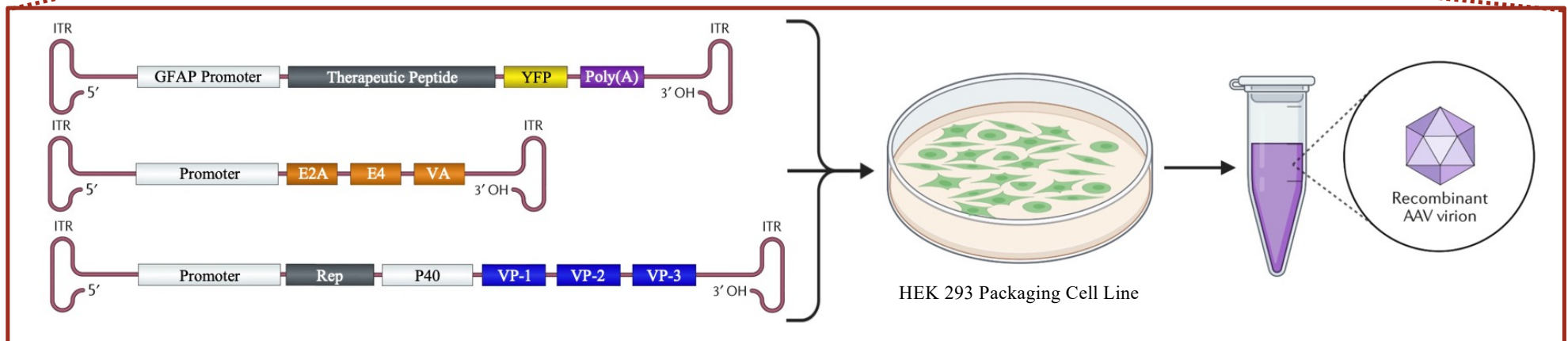
WHERE? In spinal cord astrocytes

HOW?

Insertion of a PEPTIDE by
AAV-MEDIATED DELIVERY

MASKING OF ASP69

PREVENTION OF
AUTOANTIBODY
RECOGNITION



EXPERIMENTAL PLAN:

IN VITRO

- **Chinese hamster ovary (CHO) cells** expressing human **M23-AQP4** to test:
- → vector safety: toxicity's assessment
- → vector functionality: binding between antibody and channel

1.5 months

EX VIVO

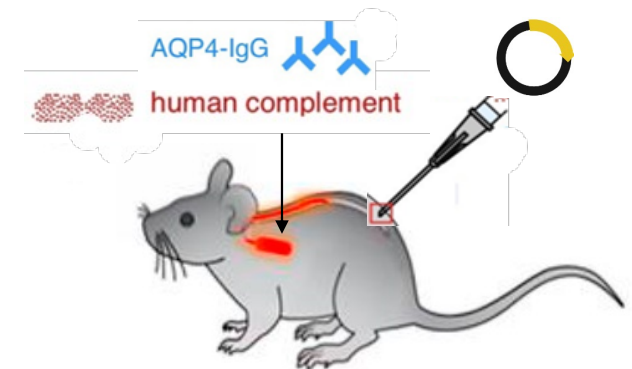
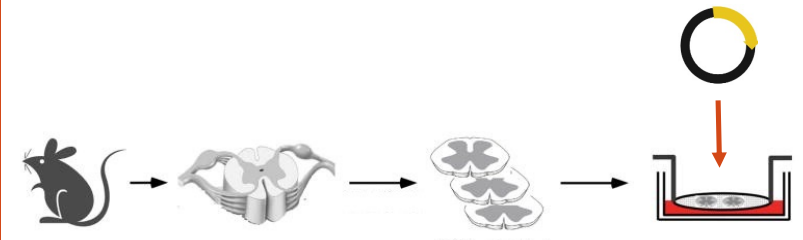
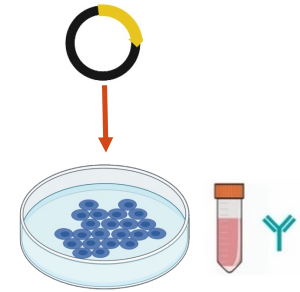
- Transverse **slices of spinal cord from CD1 mice** to test:
- → AAV therapy blocks downstream cytotoxic effects of complement activation

3 months

IN VIVO

- **Aldh11:GFP transgenic mice** to test vector functionality in:
- → limiting astrogliopathy (in vivo imaging)
- → preventing motor impairment

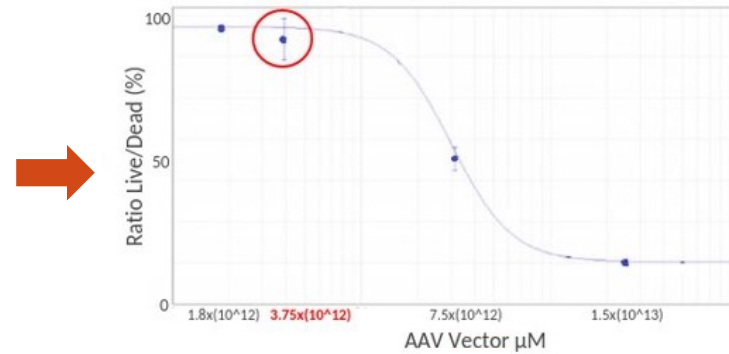
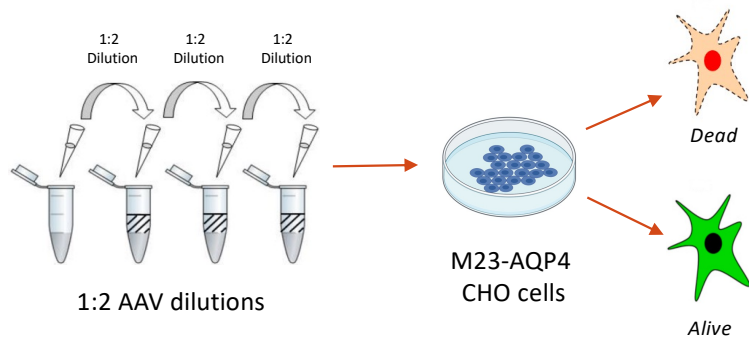
9 months



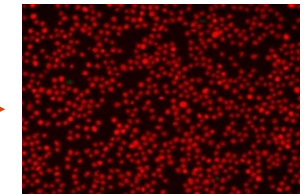
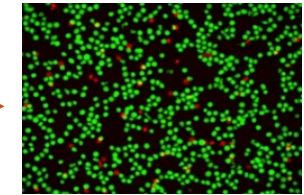
IN VITRO

Adapted by: <https://www.aatbio.com/products/live-or-dead-cell-viability-assay-kit>

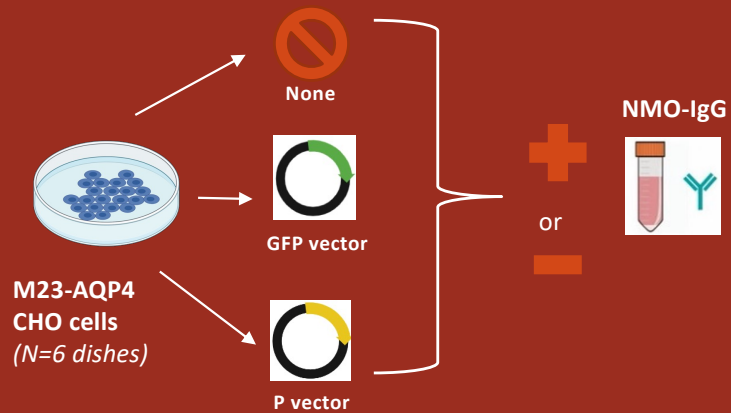
A Vector's toxicity: Serial dilutions of AAV vector and Vitality assay (Live/Dead)



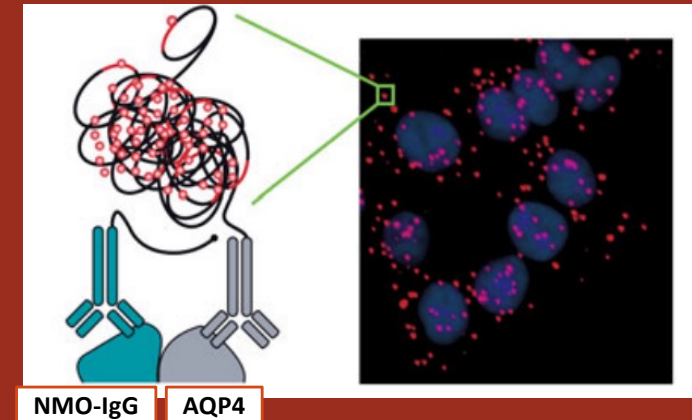
Adapted by: <https://it.moleculardevices.com/applications/cell-viability-proliferation-cytotoxicity-assays>



B Vector's functionality: Binding assay (PLA)



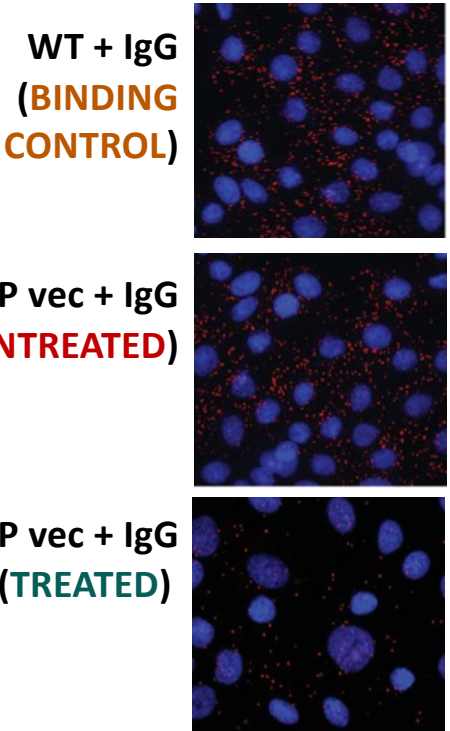
Proximity Ligation Assay



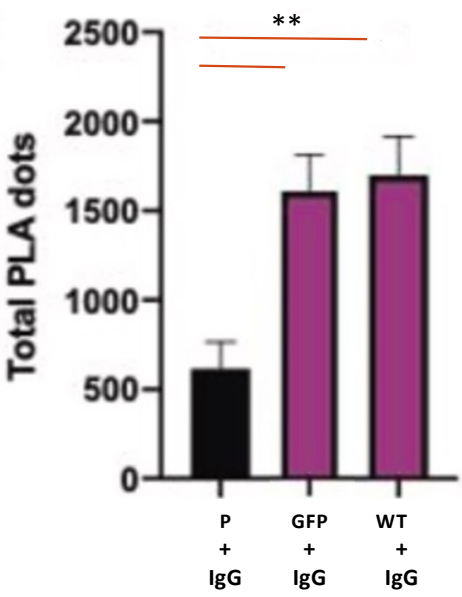
Adapted by: Digital Comprehensive Summaries of Uppsala Dissertations from the Faculty of Medicine 1099

RESULTS: *in vitro*

Binding assay (PLA)

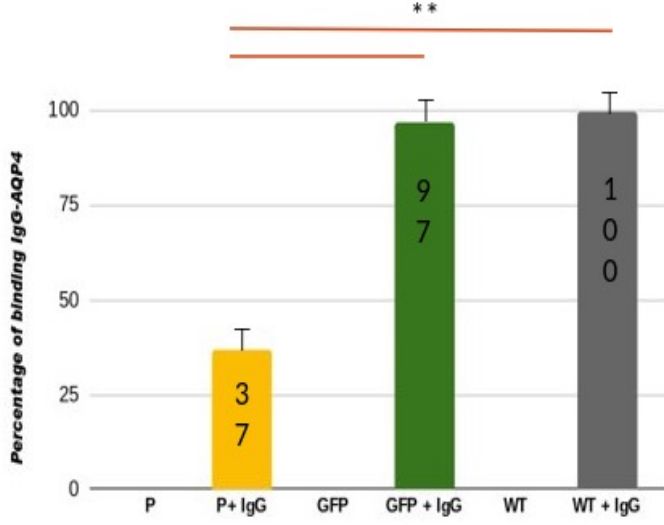


Adapted by: Hegazy et al., 2020



**= significant reduction of the PLA dots in P+IgG samples compared to controls

Adapted by: Ching et al., 2021

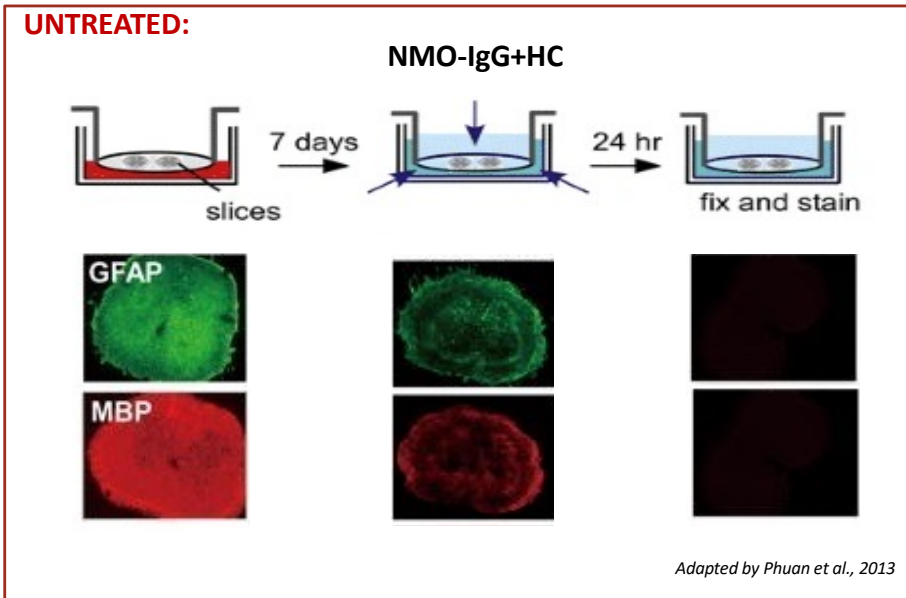


** = significant reduction of the binding's percentage in P+IgG sample compared to controls

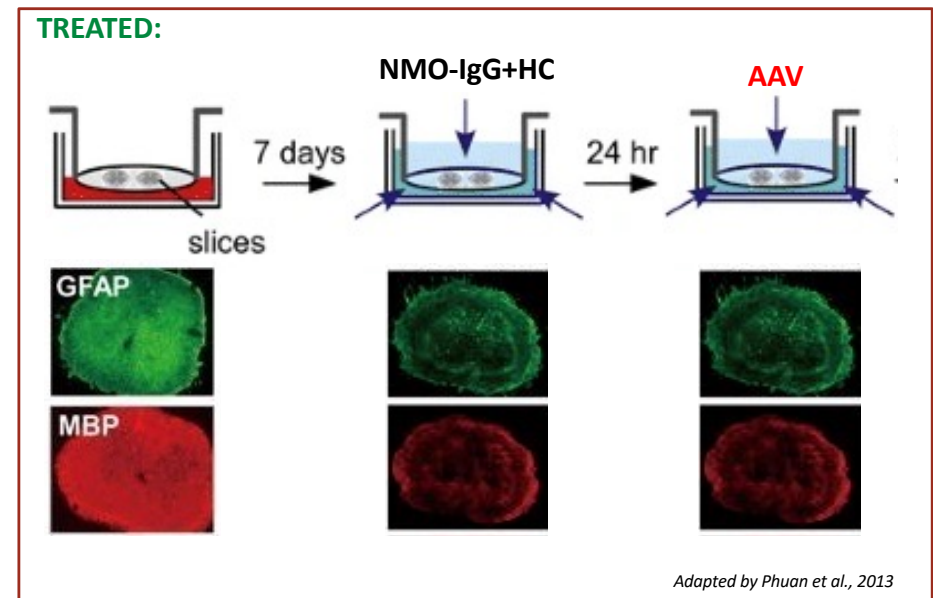
EX VIVO

EXPERIMENTAL PLAN AND RESULTS

A

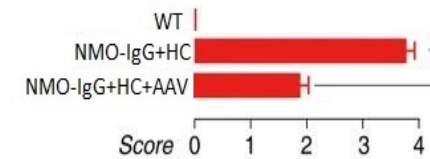
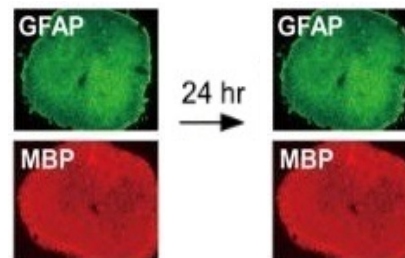


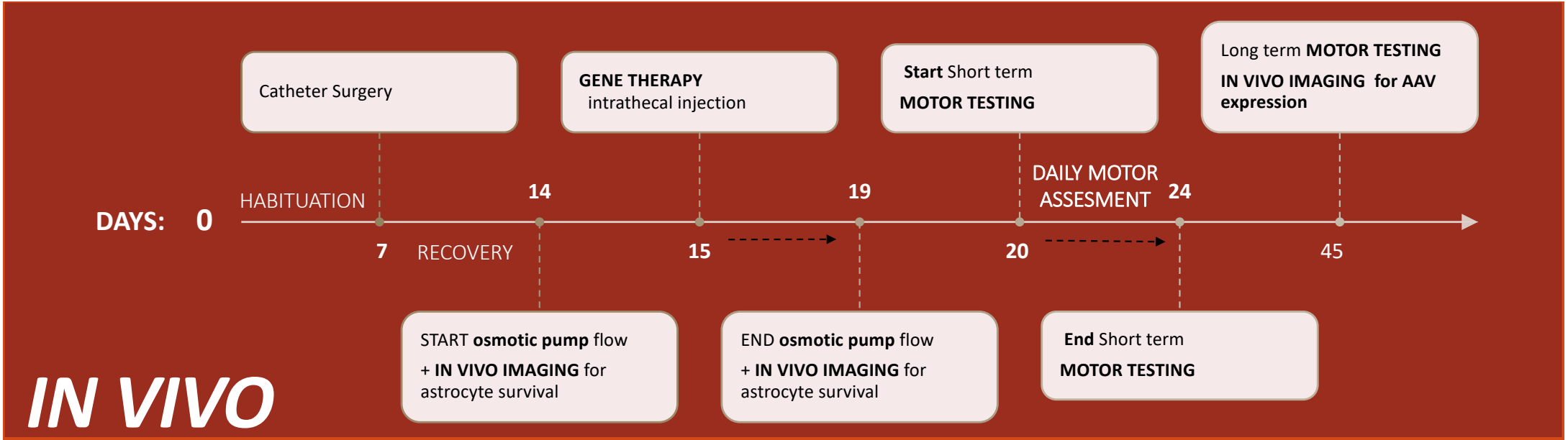
B



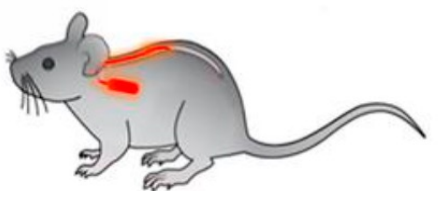
C NOT-PATHOGENIC CONTROLS:

1. WT
2. HC
3. NMO-IgG
4. AAV

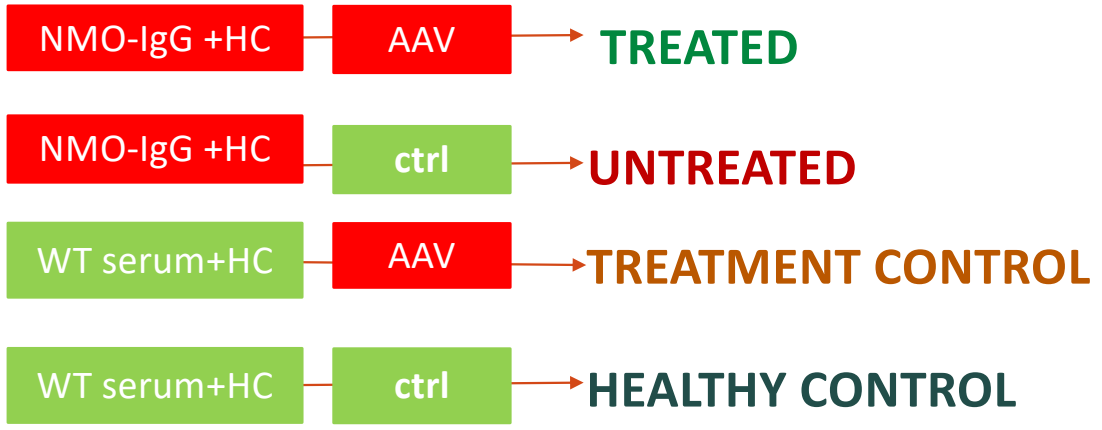




Strain
Aldh1l1:GFP
marked astrocytes



N=24
Male and female

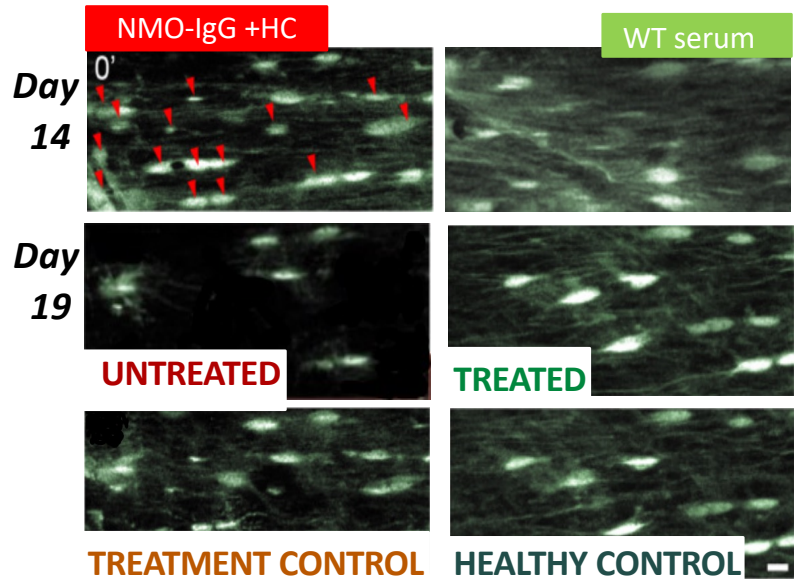


N=6 per group

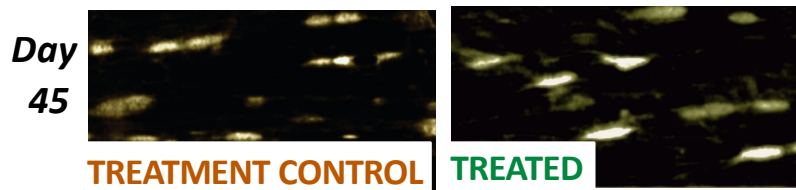
RESULTS: *in vivo*

in vivo Imaging

Astrocytopathy (GFP):

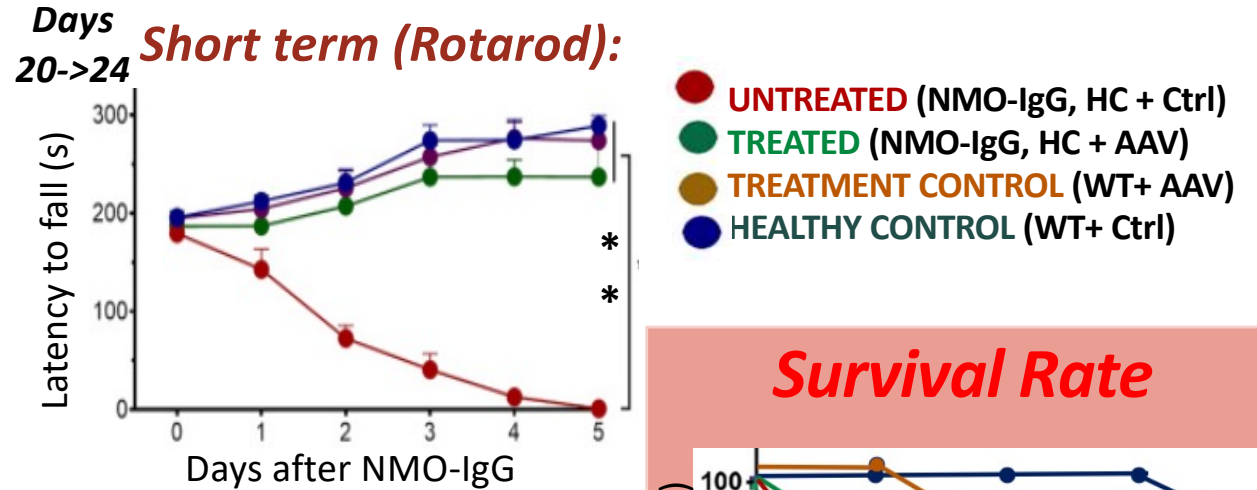


AAV Long term expression (YFP):

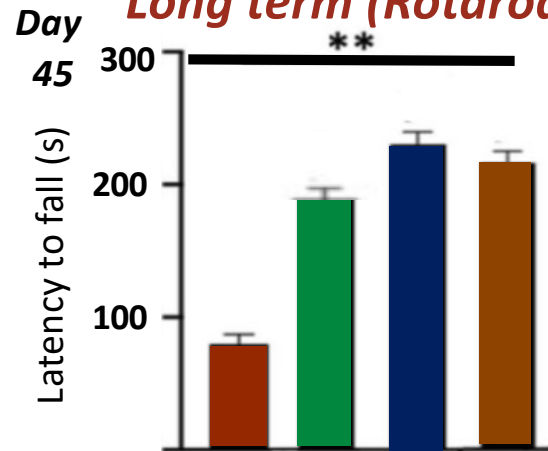


Motor Assessment

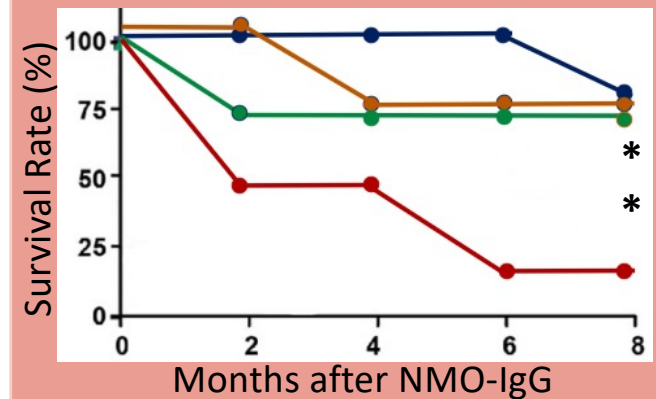
Short term (Rotarod):



Long term (Rotarod):



Survival Rate



Pitfalls and Solutions



Gene therapy after late diagnosis:

progression of pathology with multiple lesions and invasive demyelination



Additional remyelinating treatment

(es. *Clobetasol*)



Safe dose of vector is shorter than circulant NMO-IgG:

fewer bonds locked than created



Preventive anti-inflammatory treatment to reduce NMO-IgG

(es. *azathioprine, mycophenolate* and *Rituximab*)

Conclusions and future perspectives

- ✓ AAV is not immunogenic.
- ✓ It reduces recognition and subsequent binding of the autoantibodies leaving AQP4 structure and functionality unaffected.
- ✓ Peptide is better tolerated by the immune system than a foreign protein.
- ✓ It prevent severe myelitis that is the main cause of death.

**ABOUT OUR
THERAPY**

- It could be a preventive therapy in presence of an early quick diagnosis.
- Masking epitope also in optic nerve to fully treat NMO.

**OUR THERAPY IN THE
FUTURE**

Investigation of the molecular function of OAPs to consider dysregulation of their formation to further decrease the probability of autoantibody binding.


**OTHER FUTURE
THERAPIES**

BUDGET

- HEK293 cell line - 3.500\$
- AAV2, AAV.DJ/AAV8 vectors - 1.550\$
- Immunofluorescence staining protocol - 250\$
- IgG purification Kit - 365\$
- Live/Dead Kit - 293\$
- Machinery rent - 3.000\$
- Transgenic mouse strain - 3.5000\$
- Patients' serum and complement donated from red cross and hospitals - 0\$
- Salary per year x 2 PhD students and 2 Post-doc - about 86.000\$
- Duolink PLA Control Kit – PPI (Sigma-Aldrich, DUO92202-1KT) - 322\$
- Renting Olympus FV1000 MPE Multiphoton Laser Scanning Microscope (With Multi-line Argon laser source for both GFP and YFP.) - 600\$
- Additional costs and supplies about - 5.500\$



**TOT. about
\$110.000/year**

 **Experimentation
time: 2.5 years**

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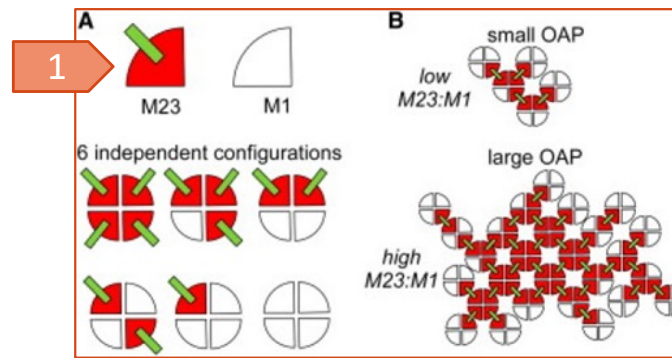
Supplementary: OAPs

- AQP4-M23 alone forms stable OAPs (fig. 2).
- M1 is unable to form on its own OAPs (fig 2).
- When M1-M23 are co-expressed, they form OAPs of intermediate size because M1 blocks intertetrameric M23 associations (fig. 1-2)

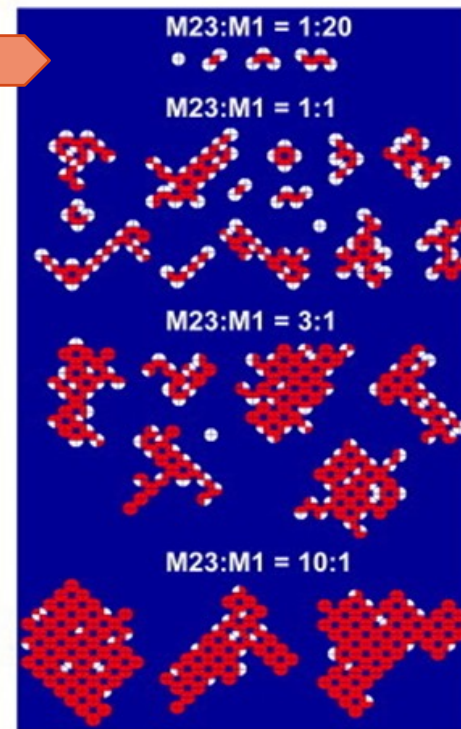
Many OAP configurations are possible in order to concentration M23/M1 ratio (fig. 1-3-4).

The greater the M23 isoform expression, the larger the pool and the OAPs' size (fig. 3-4).

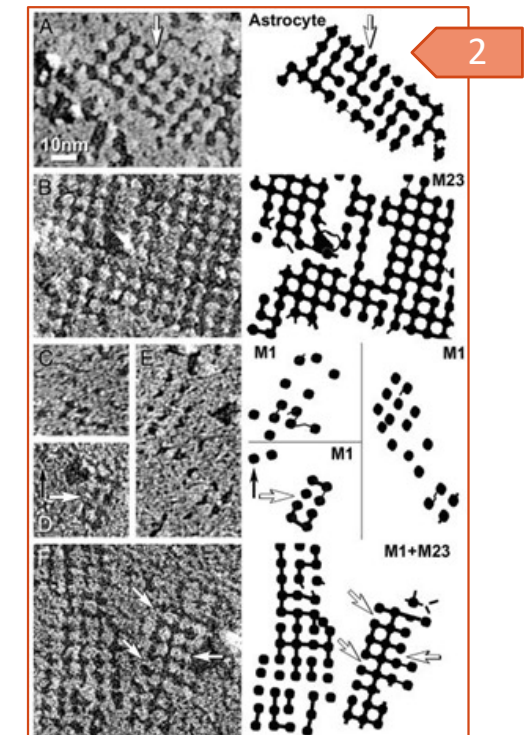
1,3: Jin et al., 2011



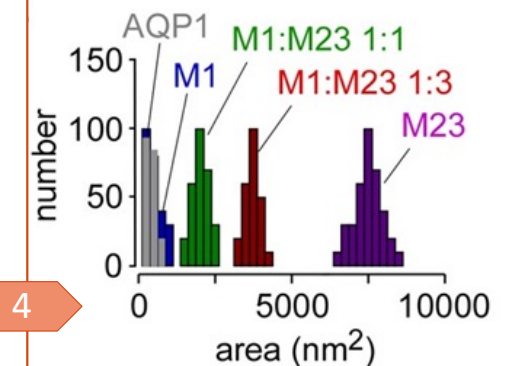
3



Furman et al., 2003



4



Rossi et al., 2012