



HUMAN GENETICS
University of Oldenburg



exonskipping.eu

Short term scientific mission

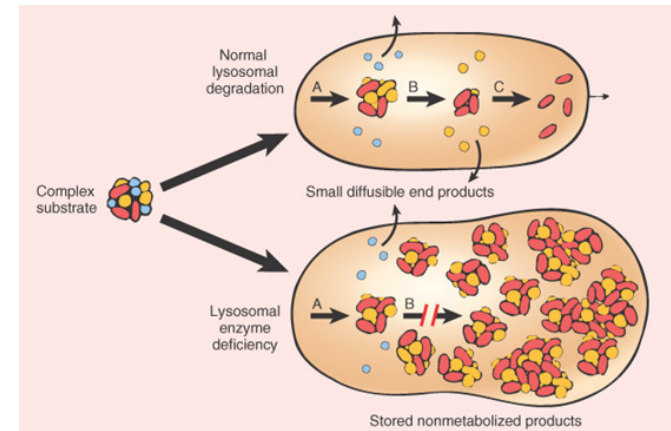
Development of antisense U1 snRNA-mediated therapeutic strategies to modulate splicing in lysosomal storage disorders

Liliana Matos

COST Action BM1207
Porto Meeting
22nd March 2017

Lysosomal Storage Disorders (LSDs)

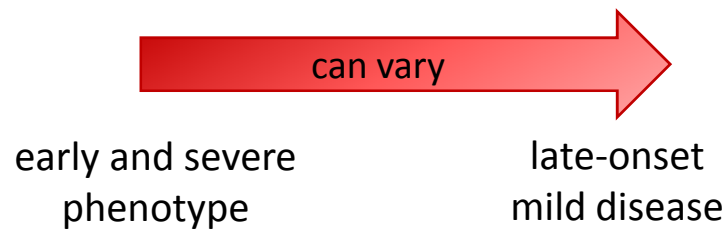
- Large group of **inherited metabolic disorders** (>50)
- Autosomal recessive (majority)
- Individually rare
- Prevalence as a group is estimated in 1:4000 – 1:8000 live births
- The majority are caused by **deficiencies** in specific **lysosomal enzymes**



Progressive **lysosomal accumulation** of **undegraded metabolites** results:

- generalised cell and tissue dysfunction
- multi-systemic pathology

- Clinical presentation:



Work in progress :

Project SPLICETHER from FCT (PTDC /BBB-BMD/6301/2014)

- Study of 2 different splice donor site mutations

found  2 patients diagnosed with different LSDs

Patient	Allele 1	Allele 2	Location
Patient 1 (MPS I)	c.1650+5G>A	c.1205G>A (p.W402X)	Intron 11 /Exon 9
Patient 2 (ML III α/β)	c.3335+6T>G	c.2864C>T (p.A955V)	Intron 17 /Exon 14

✎ Splicing mutations are frequent in these pathologies (10 to ~16% of the mutations described)

5' donor site mutations $\left\{ \begin{array}{l} \sim 64\% \text{ MPS I} \\ \sim 47\% \text{ ML III } \alpha/\beta \end{array} \right. \Rightarrow \text{Good targets for mutation specific U1 snRNA therapeutic approaches}$

Main aim:

👉 To **correct** the pathogenic effect of **both splice donor site mutations** through **U1 snRNA-mediated therapeutic strategies**

Mucopolysaccharidosis I

(Hurler; Hurler-Scheie; Scheie syndromes)

- Autosomal recessive disorder
- Caused by mutations in **IDUA gene** (14 exons)


α-L-Iduronidase


Responsible for the **degradation** of
dermatan and heparan sulfate

Therapy:

- Enzyme replacement therapy – laronidase (Aldurazyme®)
- Hematopoietic stem cell transplantation



Still with some
limitations



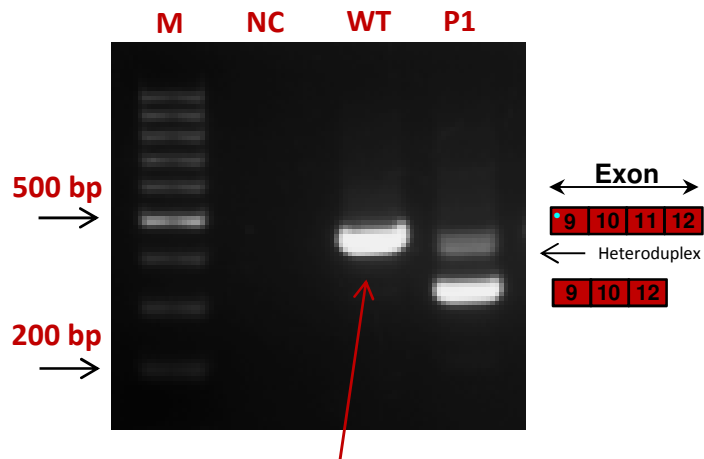
Development of **alternative** or **adjunct**
therapies would be **important**

Mucopolysaccharidosis I

👉 *IDUA* gene mutation analysis (RT-PCR)

c.1650+5G>A/p.W402X

Primers for exon 9 and 12:



- Normal length transcript

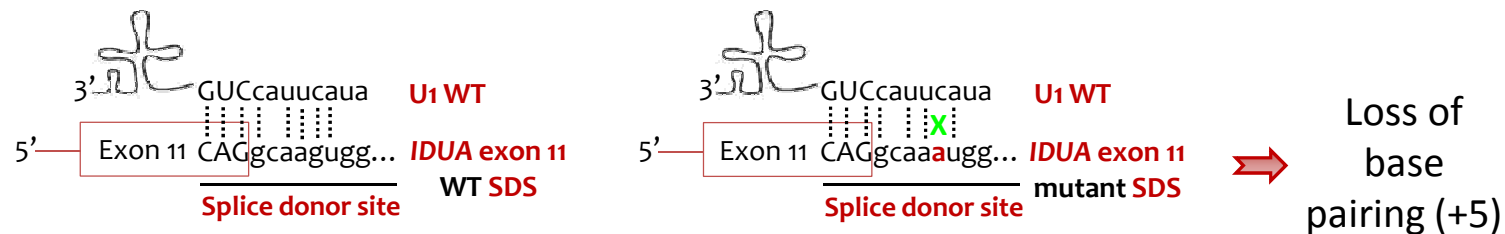
Patient 1: two transcripts

- One with normal length arising from the nonsense allele
- One with exon 11 skipping due to the donor site mutation

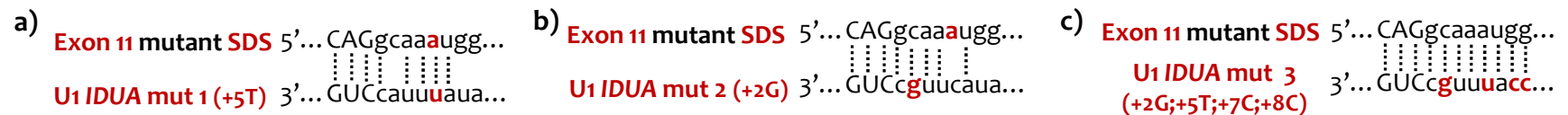
Mucopolysaccharidosis I

👉 Splicing therapeutic approach for the +5 *IDUA* gene mutation with modified U1 vectors

1. Analysis of *IDUA* exon 11 splice donor sites (SDS)



2. Design and construction of U1 modified vectors (pG3U1)



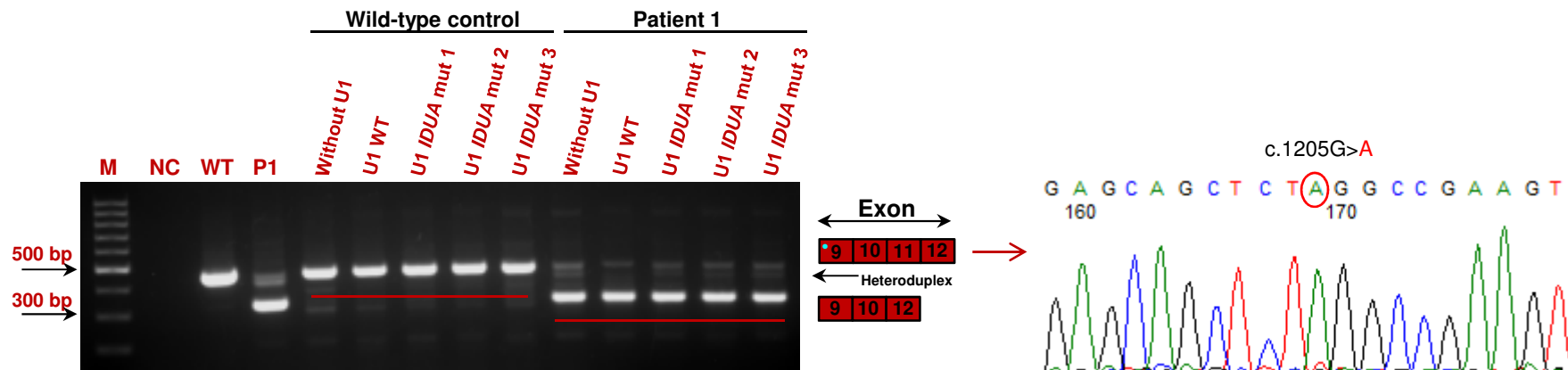
➔ Increased complementarity to the SDS

Mucopolysaccharidosis I

👉 **Transfection of wild-type and patient 1 fibroblasts with 2.5 μ g of modified U1 vectors for 24 h**

- RT-PCR analysis

Primers for exon 9 and 12:



→ No correction with 3.5 or 4.5 μ g of each U1 vector or even in a 48 h treatment

No heterozygous peak

↙ Not even a partial correction observed

Mucopolysaccharidosis III alpha/beta (pseudoHurler polydystrophy)

- Autosomal recessive disorder
- Caused by mutations in **GNPTAB gene** (21 exons)



α/β -subunit of the N-acetylglucosamine
(GlcNAc)-1-phosphotransferase



Formation of the mannose-6-phosphate
residues on lysosomal enzymes

Therapy:

- No causal therapies available for treatment
- Disease management only symptomatic



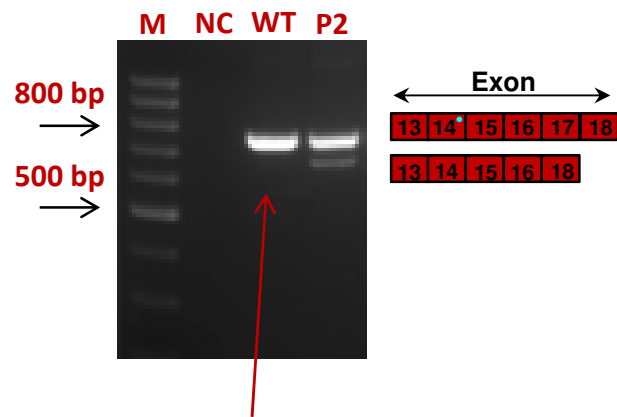
Development of therapeutic strategies is essential

Mucopolysaccharidosis III alpha/beta

👉 *GNPTAB* gene mutation analysis (RT-PCR)

c.3335+6T>G/p.A955V

Primers for exon 13 and 18:



- Normal length transcript

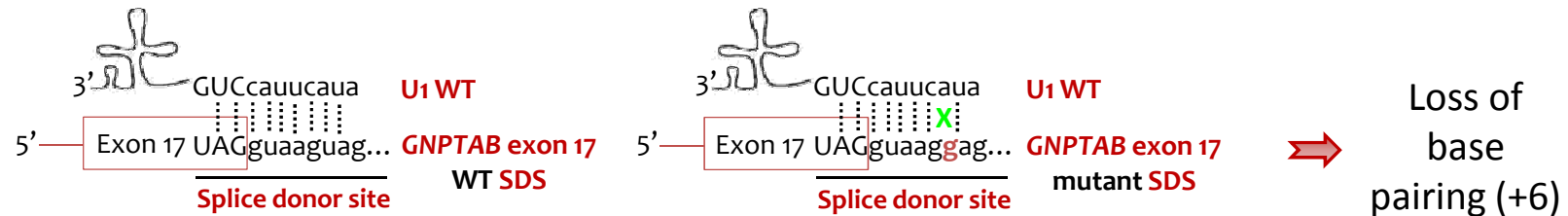
Patient 2: two transcripts

- One with normal length arising from the missense allele
- One with exon 17 skipping due to the donor site mutation

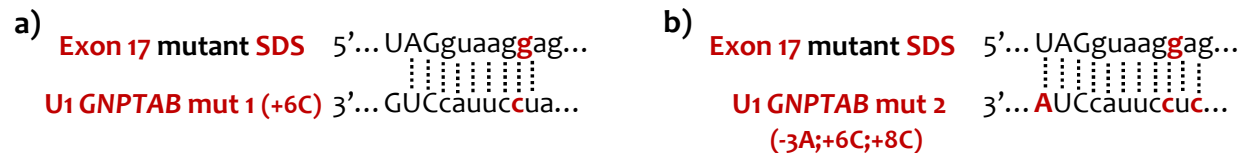
Mucopolipidosis III alpha/beta

👉 **Splicing therapeutic approach for the +6 *GNPTAB* gene mutation with modified U1 vectors**

1. Analysis of *GNPTAB* exon 17 splice donor sites (SDS)



2. Design and construction of U1 modified vectors (pG3U1)



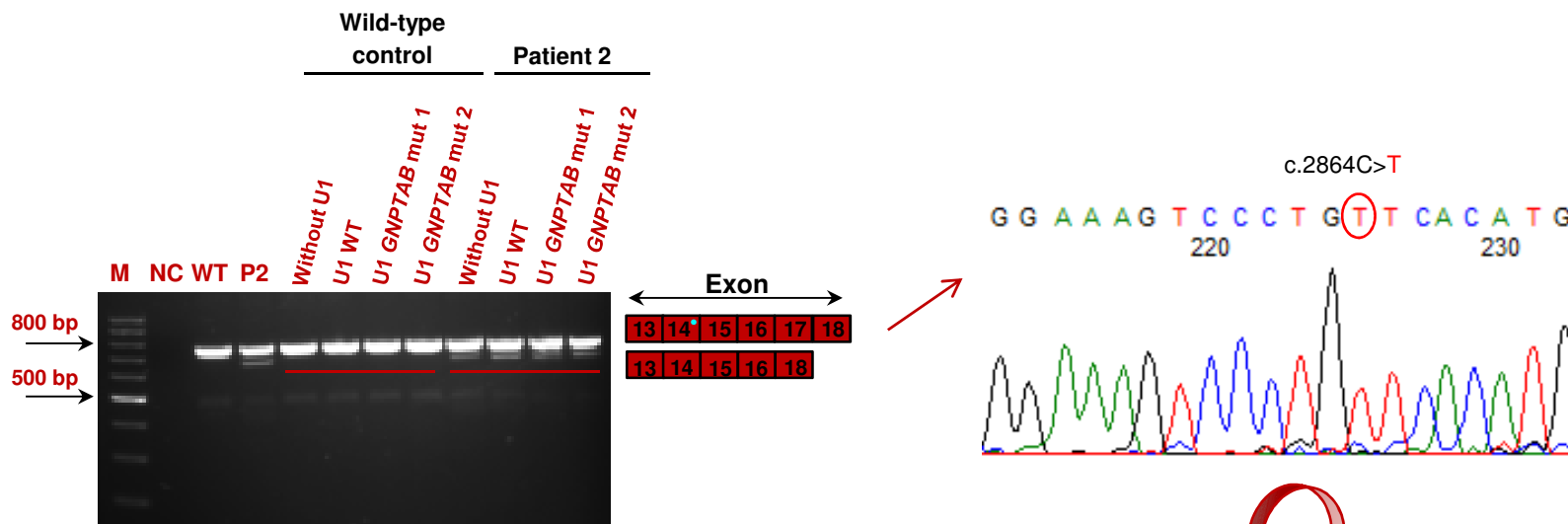
➔ Increased complementarity to the SDS

Mucopolysaccharidosis III alpha/beta

☞ **Transfection of wild-type and patient 2 fibroblasts with 2.5 μ g of modified U1 vectors for 24 h**

- **RT-PCR analysis**

Primers for exon 13 and 18:



→ No correction with 3.5 or 4.5 μ g of each U1 vector or even in a 48 h treatment

No heterozygous peak

↙ Not even a partial correction observed

Transfection results conclusions

↪ Absence of correction for both 5' splice site mutations

- High level of cell death after transfection
- Presence of different modified U1's (?)
- Lipo-mediated transfection toxicity (?)



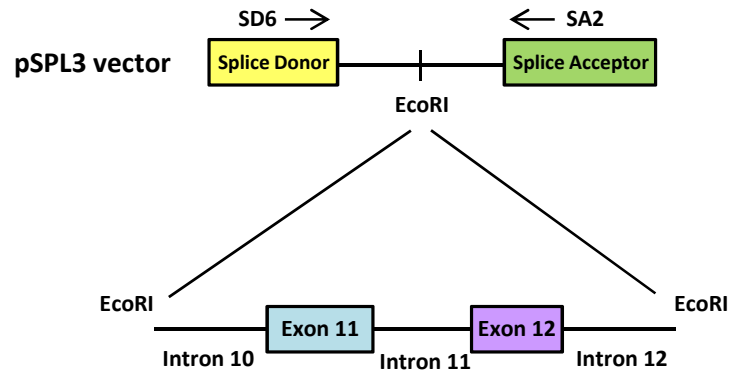
Low transfection efficiency?

Next steps:

- ↪ Co-transfection of minigene constructs with the U1's (Hep 3B cell line)
- ↪ Lentiviral transduction of U1's in patients fibroblasts

Minigenes expression (Hep 3B)

- MPS I (*IDUA* minigenes)**



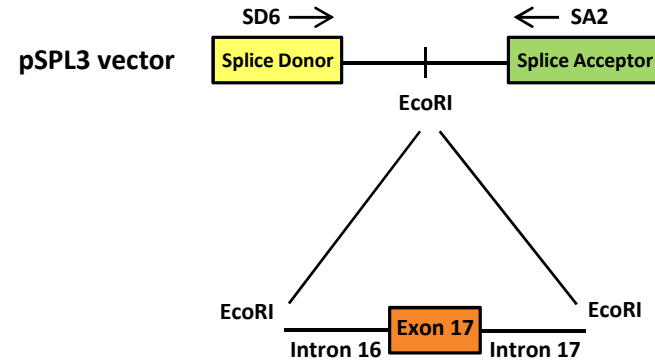
Exon 11/Intron 11

Wild-type: ...CCGGCAGgcaagtgg...

Mutant: ...CCGGCAGgcaaatgg...

c.1650+5G>A

- ML III α/β (*GNPTAB* minigenes)**



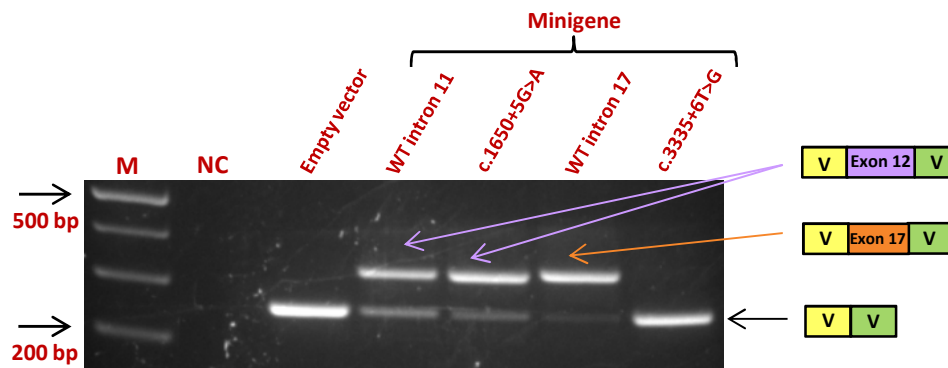
Exon 17/Intron 17

Wild-type: ... AAATATAGgtaagtag...

Mutant: ... AAATATAGgtaaggag...

c.3335+6T>G

- RT-PCR analysis**

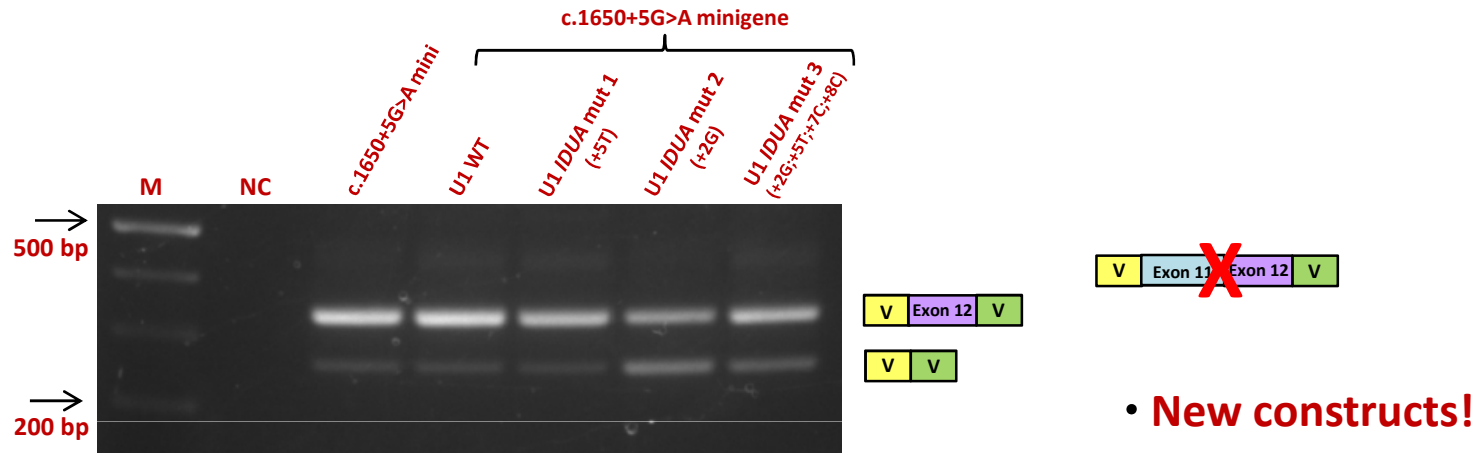


Minigenes:

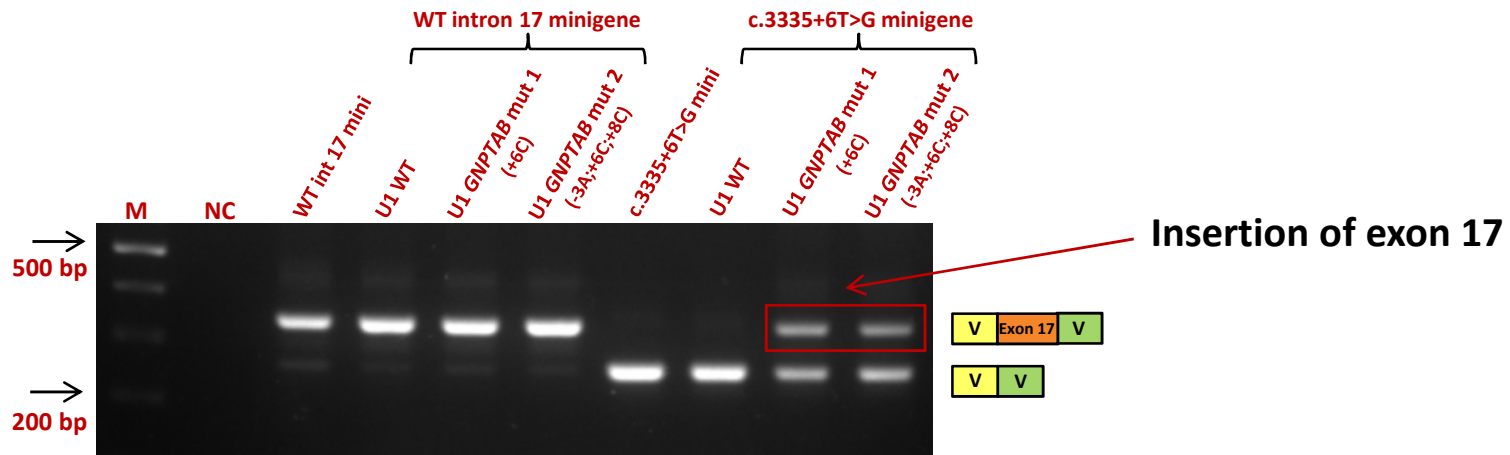
- WT intron 11 **X**
- c.1650+5G>A **✓**
- WT intron 17 **✓**
- c.3335+6T>G **✓**

Minigenes co-transfection with different U1's (Hep 3B)

- **MPS I – IDUA gene** (RT-PCR analysis)



- **ML III α/β – GNPTAB gene** (RT-PCR analysis)



Short term scientific mission



Main aim:

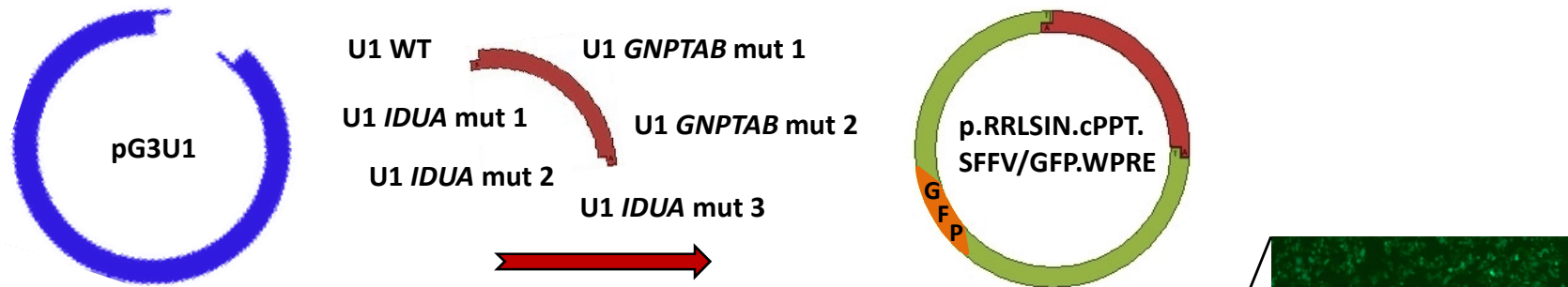
↳ Learn and perform the **lentiviral transduction technique** of the different **modified U1's** into **patients' fibroblasts** to try the therapeutic **rescue** of the 5' splice site mutations, **c.1650+5G>A** (*IDUA* gene) and **c.3335+6T>G** (*GNPTAB* gene)

↳ **Lentiviral transduction** of U1 constructs in fibroblasts

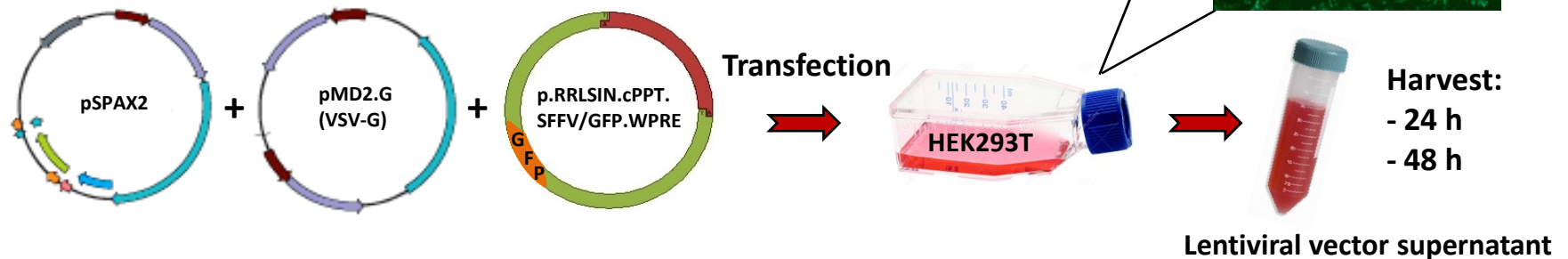
- ✓ More efficient technique to the acquisition of external vectors
- ✓ Less toxic for cells than lipo-mediated transfection (↓ mortality)
- ✓ Some different splice donor site mutations have been partially or totally rescued through viral transduction of U1 snRNAs (Glaus *et al.*, 2011; Schmid *et al.*, 2011; Dal Mas *et al.*, 2015)

Workflow

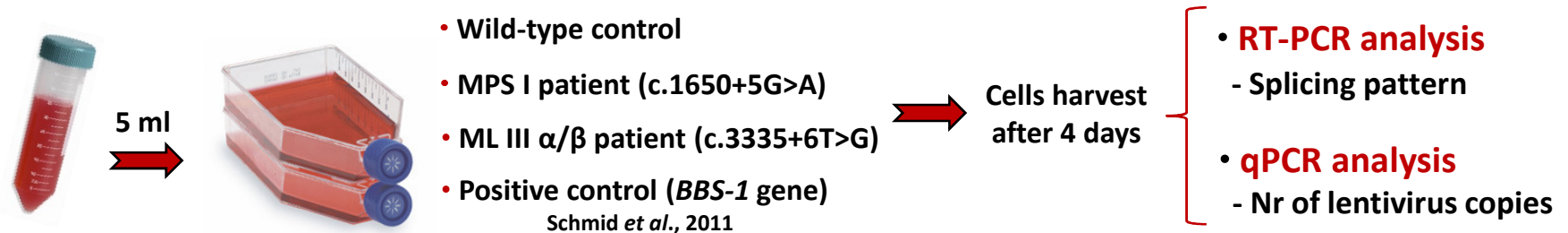
1. Cloning of the different U1 snRNAs in the lentiviral vector



2. HEK293T cells infection for lentivirus production

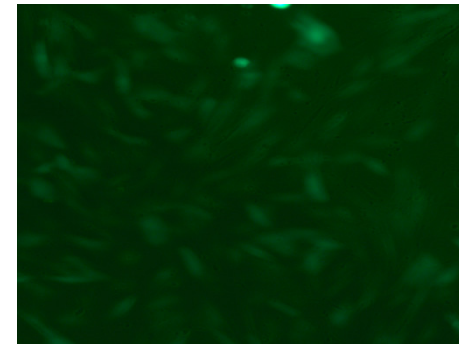
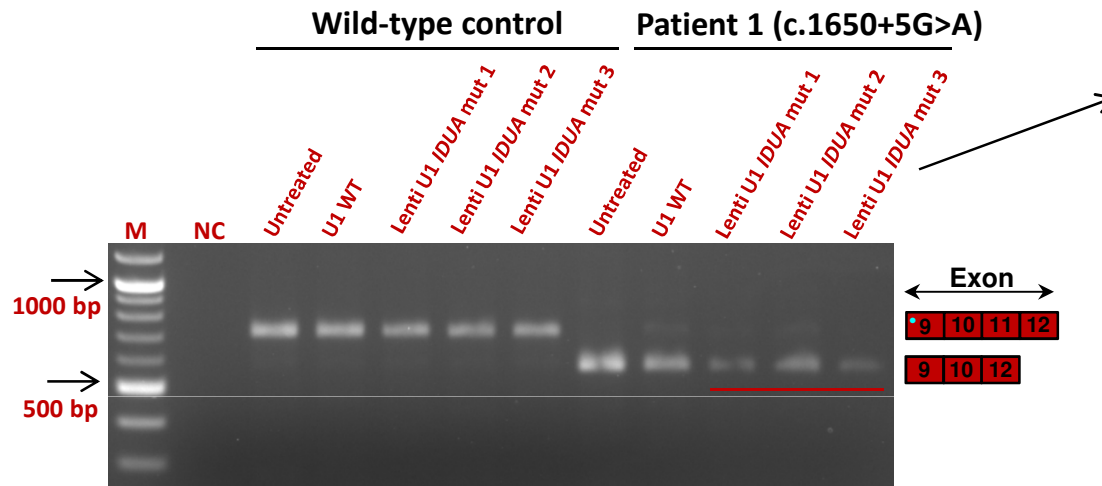


3. Lentivirus transduction in fibroblast cells

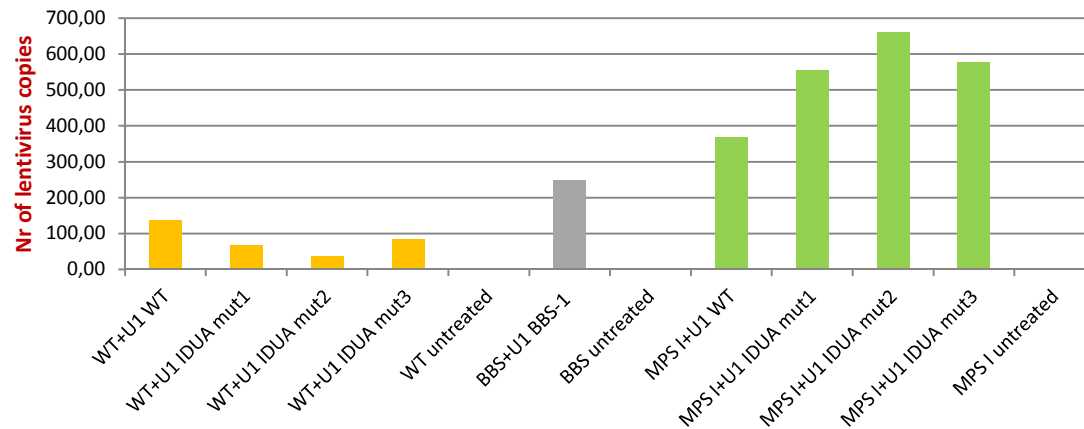


Lentiviral transduction results: MPS I

- RT-PCR analysis



- qPCR analysis



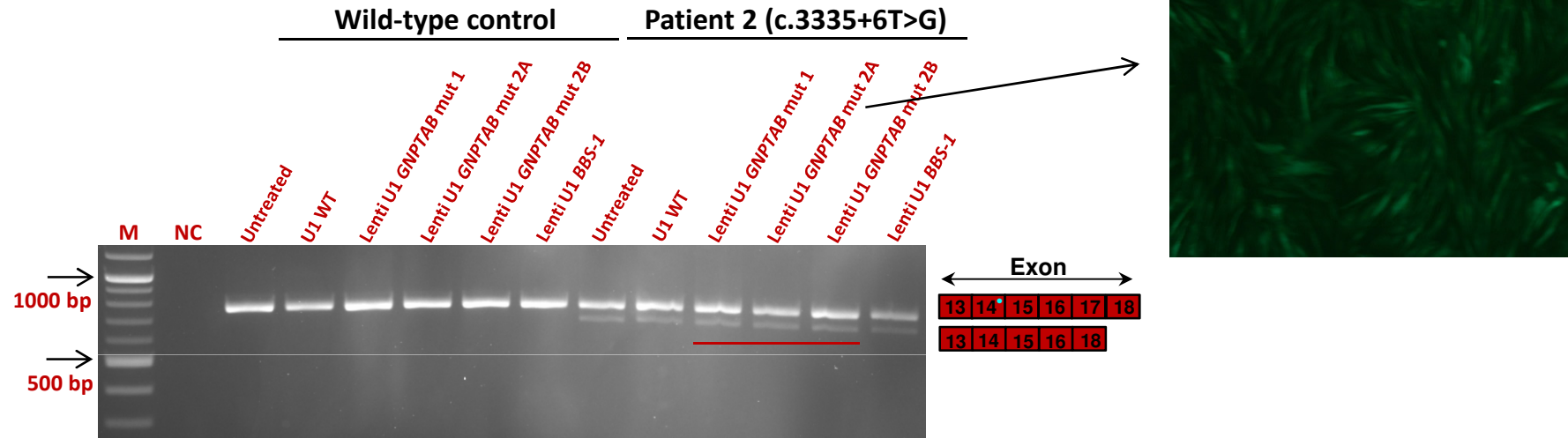
Nr of lentivirus copies = $2^{(1+\Delta Cq)}$

Reference gene vs Target gene:

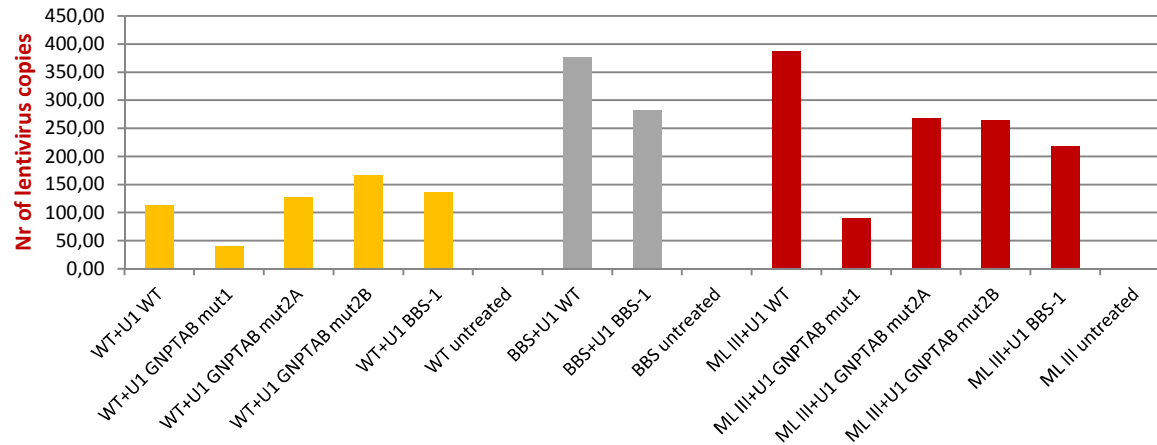
Albumin (n=2) vs GFP (n=?)

Lentiviral transduction results: ML III α/β

• RT-PCR analysis



• qPCR analysis



$$\text{Nr of lentivirus copies} = 2^{(1+\Delta Cq)}$$

Reference gene vs Target gene:

Albumin (n=2) vs GFP (n=?)

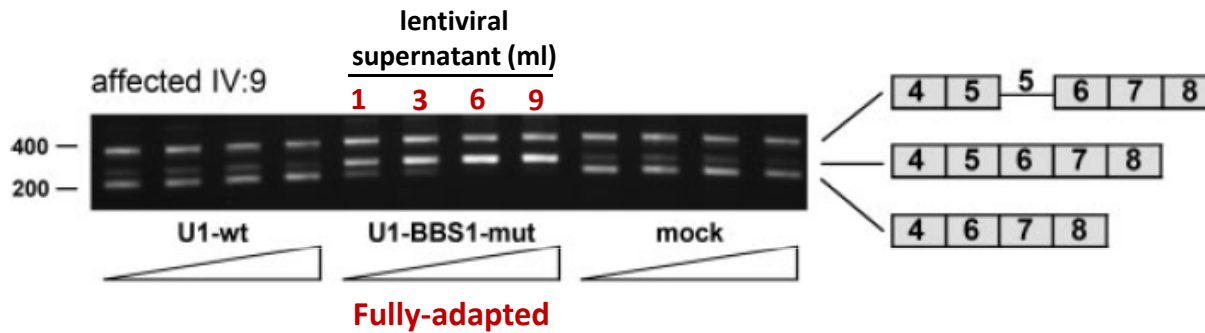
Lentiviral transduction results: BBS (+ control)

RESEARCH ARTICLE **c.479G>A Human Mutation**
Last nt exon 5

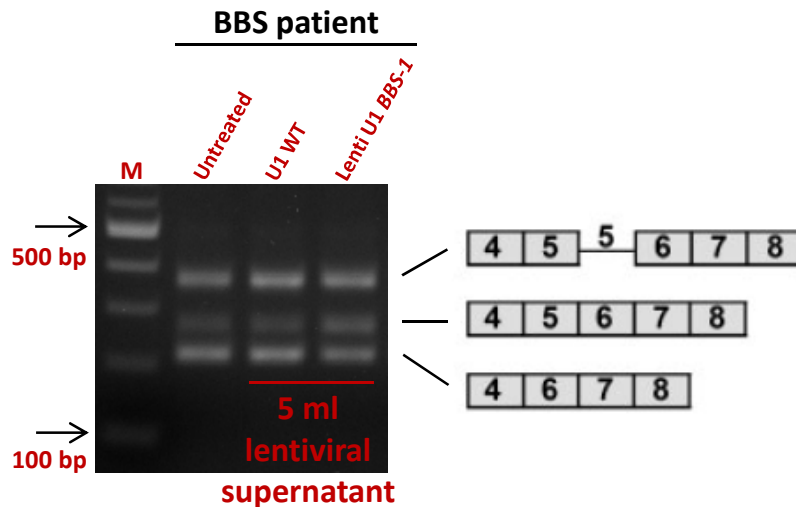
U1 snRNA-Mediated Gene Therapeutic Correction of Splice Defects Caused by an Exceptionally Mild BBS Mutation

OFFICIAL JOURNAL
HGVS
 HUMAN GENOME VARIATION SOCIETY
 www.hgvs.org

Fabian Schmid,¹ Esther Glaus,¹ Daniel Barthelmes,² Manfred Fliegau,³ Harald Gaspar,⁴ Gudrun Nürnberg,⁵ Peter Nürnberg,⁵ Heymut Omran,⁶ Wolfgang Berger,¹ and John Neidhardt^{1*}



- ML III α/β parallel experiment



📌 **Our cases:**

- MPS I (c.1650+5G>A)
- ML III α/β (c.3335+6T>G)
- \uparrow lentivirus volume
- Optimization !!!

Main STSM achievements

- ✓ Cloning of different modified U1's in a lentiviral vector (p.RRLSIN.cPPT.SFFV/GFP.WPRE)
- ✓ Learning and performing the lentiviral transduction technique in human fibroblasts
- ✓ Obtaining the preliminary results of the lentiviral transduction of different modified U1's into MPS I and ML III α/β patients' fibroblasts to try the therapeutic rescue of the 5' ss mutations c.1650+5G>A and c.3335+6T>G
- ✓ Acquisition of the lentiviral transduction technique allowing, in a near future, its implementation in our laboratory to be applied not only to the 5' ss mutations in study as to other donor site mutations reported in LSDs patient's

Acknowledgments



SNS SERVIÇO NACIONAL DE SAÚDE



Instituto Nacional de Saúde
Doutor Ricardo Jorge



Lysosomal storage disorders research group

Dr. Sandra Alves
Dr. Olga Amaral
Francisca Coutinho
Juliana Santos
Regina Vilela
Ana Joana Duarte



HUMAN GENETICS
University of Oldenburg

Prof. John Neidhardt
Dr. Christoph Jüscke
Human Genetics group



Dr. Mirella Filocamo



Prof. M^a João Prata



Prof. Belén Pérez
Prof. Lourdes Ruiz-Desviat

Funding:

FCT SPLICETHER
(PTDC /BBB-BMD/6301/2014)

Fundação para a Ciência e a Tecnologia

MINISTÉRIO DA CIÊNCIA, INOVAÇÃO E DO ENSINO SUPERIOR



BM1207





**Thank you for
your attention**