

From bench to bioterium and back again: DEVELOPMENT OF A U1snRNA-BASED THERAPEUTIC STRATEGY FOR MUCOPOLYSACCHARIDOSIS IIIC

Juliana I. Santos^{1,2*}, Liliana Matos^{1,3*}, Paula A. Oliveira⁴, Mariana Gonçalves⁴, M^a João Pires⁴, M^a Francisca Coutinho^{1,3}, M^a João Prata^{2,5}, Sandra Alves^{1,3}

¹ Research and Development Unit, Department of Human Genetics, INSA, Porto, Portugal; ² Biology department, Faculty of Sciences, University of Porto, Portugal; ³ CECA-ICETA - Center for the Study Animal Science, University of Porto, Portugal; ⁴ CITAB - Center for the Research and Technology of Agro-Environmental and Biological Sciences, Vila Real, Portugal; ⁵ i3S - Health research and innovation institute, University of Porto, Portugal

*These authors contributed equally to the work

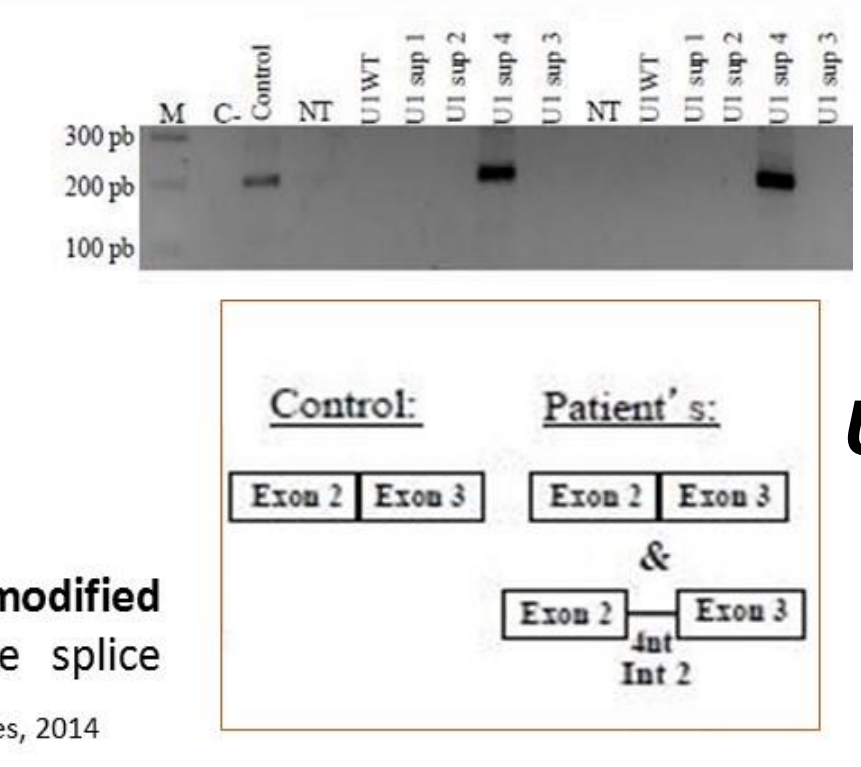
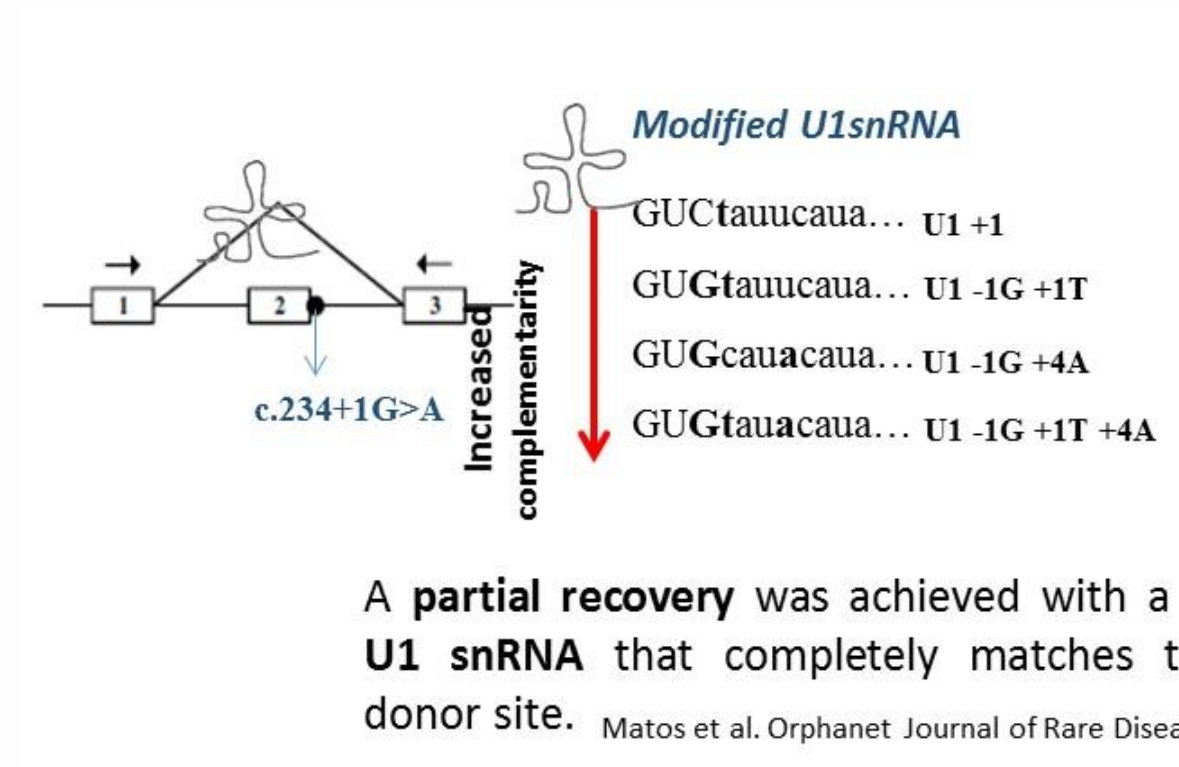
INTRODUCTION

Splicing is an essential cellular process to generate mature transcripts from pre-mRNA. One of the most important factors for mRNA transcription is the U1snRNA, a spliceosomal component that recognizes 5' splicing donor sites (SDS) at specific regions in pre-mRNA. Splicing mutations represent one of the most frequent (~20%) genetic defects in **Mucopolysaccharidosis IIIC (MPS IIIC)**, a Lysosomal Storage Disorder (LSD) caused by mutations in the **HGSNAT** gene, encoding an enzyme involved in heparan sulphate degradation.

Exon-skipping has been demonstrated as, probably, the most frequent aberrant splicing defect, and occurs due to mutations in the 5' SDS. Application of **modified U1snRNAs** to improve recognition of mutated 5' SDS represent a potential therapeutic strategy to recover the normal splicing process.

The **c.234+1G>A** is a frequent mutation among patients of countries around the Mediterranean basin (Portugal, Spain, Morocco and Tunisia). It's located in the + 1 position of intron 2 of **HGSNAT** gene and leads to the **skipping of exon 2**.

We demonstrated in fibroblast cells that a **modified U1snRNA vector** (comprising exon 1 to exon 3) designed to improve the definition of exon 2 5' SDS of the **HGSNAT** can restore the splicing defect caused by the mutation **c.234+1G>A** (Matos et al., 2014).



A **partial recovery** was achieved with a **modified U1snRNA** that completely matches the SDS.

Our goal is to evaluate **in vivo** the therapeutic potential of the modified U1snRNA by testing it in **mice** expressing the human splicing defect

METHODS

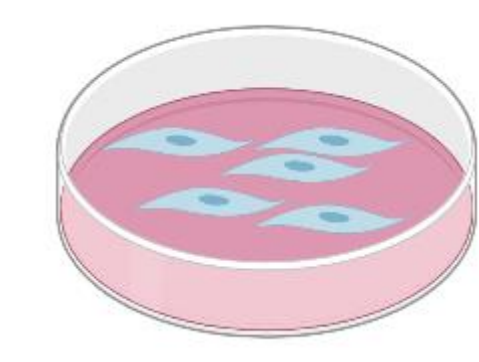
In vitro

1) Generation of **full-length** (containing the full **HGSNAT** cDNA sequence plus part of introns 1 and 2) **splicing competent constructs** of:

- wild-type (wt)
- c.234+1G>A **HGSNAT**



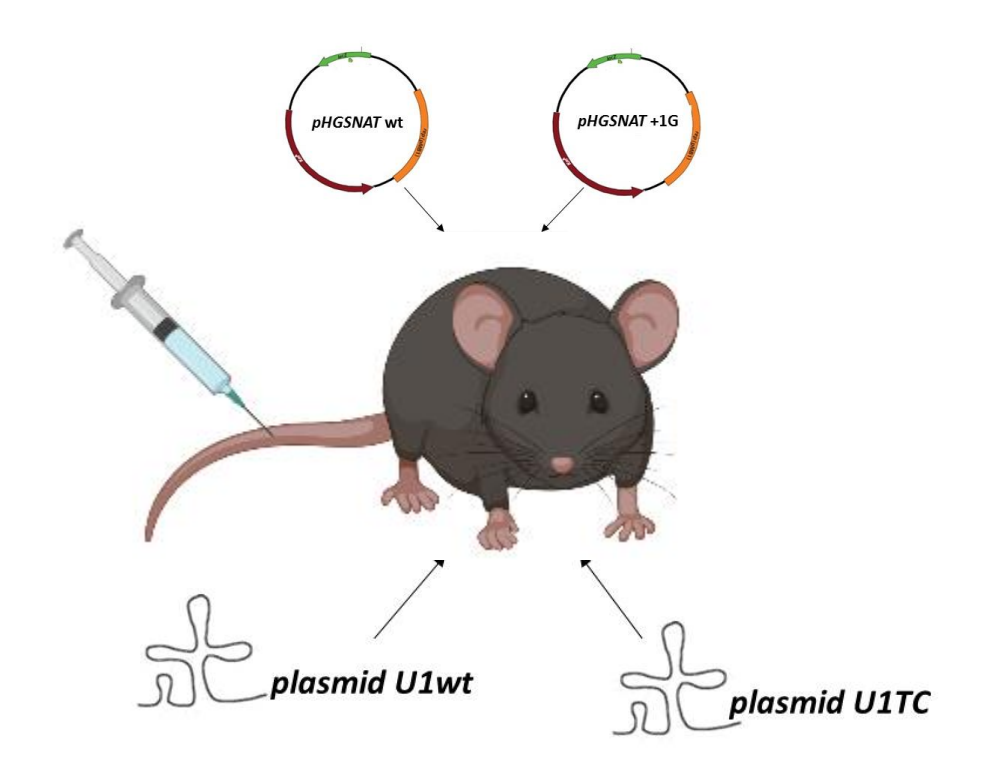
By cloning the wt or the mutated **HGSNAT** splicing-competent cassettes into the pcDNA 3.1 backbone



2) **Transfection of those constructs into COS-7 cells** to check if the splicing pattern is reproduced

In vivo

1) Use the constructed plasmid vectors to promote **transient expression** of the human **HGSNAT** wt or mutant alleles in c57bl/6 mice

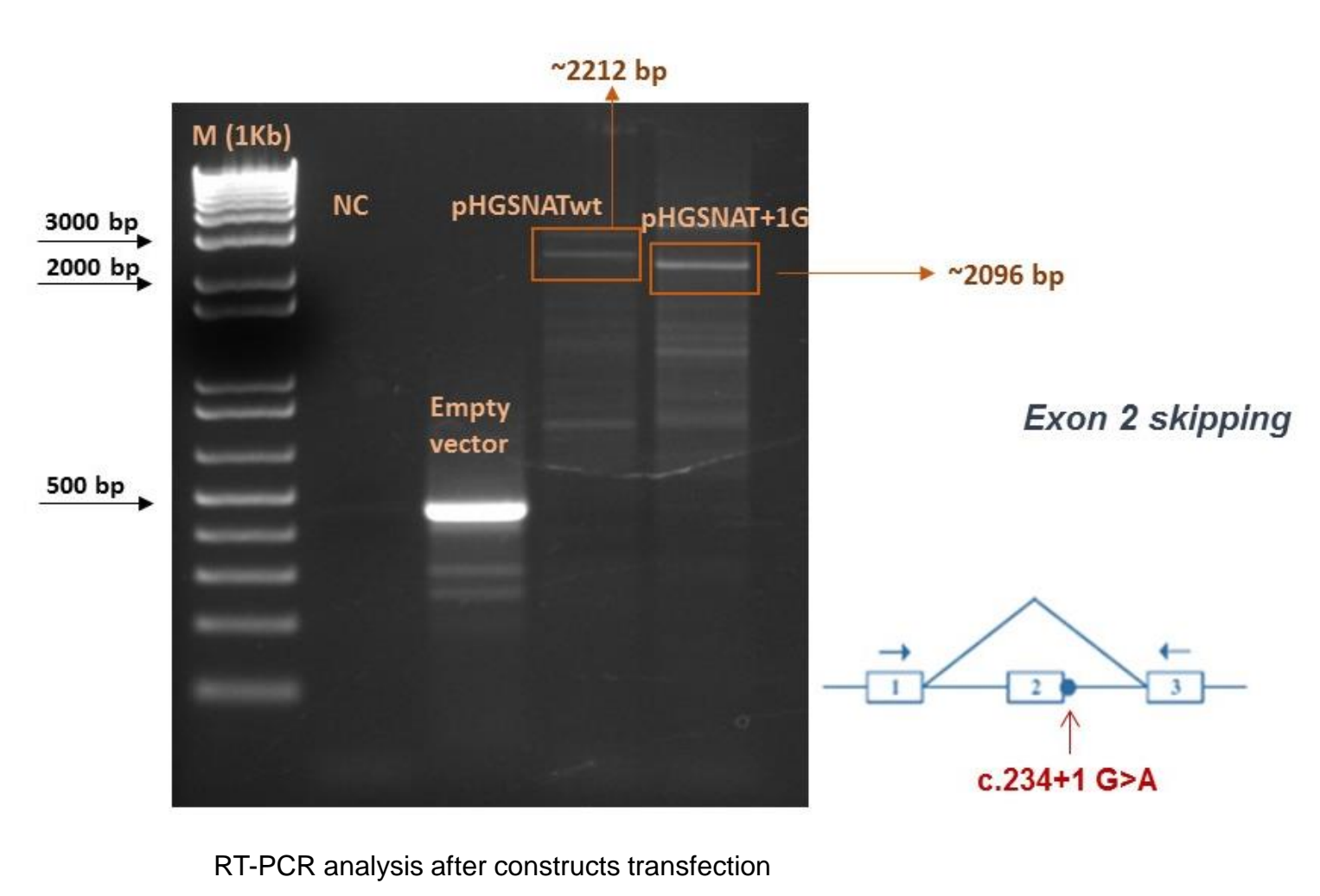


2) **Co-injection** of the wt or mutant vectors plus **modified U1snRNA**

RESULTS

In vitro

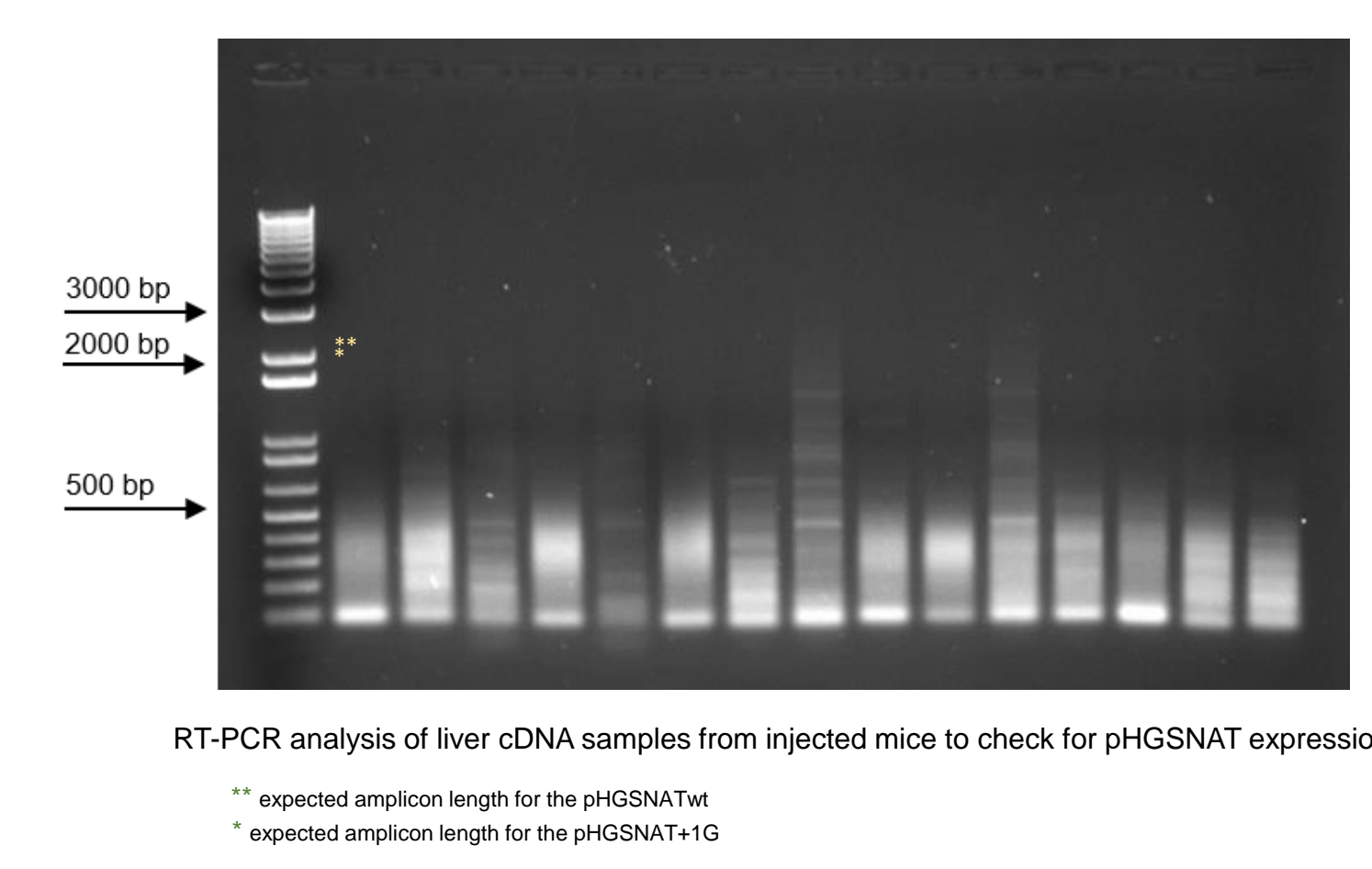
Transfection of COS-7 with **pHGSNATwt** and **pHGSNAT+1G** constructs:



Splicing pattern is reproduced ✓
 proceed to the **in vivo** studies

In vivo

Hydrodynamic injection of c57bl/6 mice with **pHGSNATwt** and **pHGSNAT+1G** constructs:



- 1) animal sacrifice after 48h ✓
- 2) organ collection (liver) ✓
- 3) molecular biology analysis ✓
- 4) **pHGSNAT cDNA expression** ✗
 (i.e., no evidence of effective gene expression in vivo) **REPEAT!**

CONCLUSION/ FUTURE PERSPECTIVES

We have double checked every step of the overall protocol to assess pHGSNAT expression through RT-PCR and everything was OK! So, the **lack of pHGSNAT cDNA expression** was probably due to **sub-optimal hydrodynamic injection conditions**. In fact, when we tried to administrate a volume of 10% of the mice body weight, animals died. So, we **lowered the volume to 7%**. This mice strain is **aggressive**, has a **hyperactive behaviour** and has **black color**, which **difficult the visualization of the tail vein**.

In order to overcome these issues we will now repeat the protocol with ICR mice (albino strain, more easier to handle and known for its docile behaviour) with some alterations:

- Increase the volume of our injection for **8-9%** of the mice body weight
- Dilute our construct in a **commercial delivery solution** to enhance the transfection efficiency