

IMPROVING THE TRANSDUCTION EFFICIENCY OF AN AEROSOL-DELIVERED LENTIVIRAL VECTOR FOR CYSTIC FIBROSIS

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BACKGROUND:

Gene therapy is a potential treatment for cystic fibrosis (CF) lung disease, whereby the therapeutic gene is delivered to the lung to produce functional correction. Aerosol delivery of a gene vector to the lung is an ideal treatment approach because it is non-invasive, easy to administer and less cumbersome compared to liquid delivery.

It is thought that the virus particles are subjected to destructive surface tension and shear stress effects during aerosolization [1]. We have utilised a vibrating mesh nebuliser (Aeroneb®Pro) (Figure 1) for in-vitro studies as it is thought to produce minimal shear stress on our lentiviral vector (LV) gene transfer vector carrying the rep68 gene.

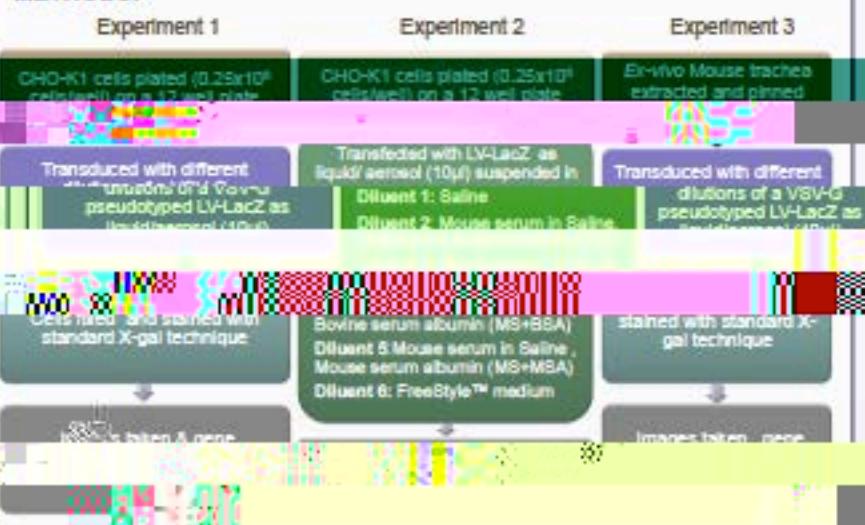
The aim of this study was:

- To test a range of protective agents in which the LV-LacZ is suspended to improve the viability of the LV and in turn gene transduction.
- To study the distribution pattern of gene expression using liquid delivery vs aerosol delivery of LV-LacZ in *In-vitro* and *Ex-vivo* experiments.

Figure 1: Aeroneb®Pro used to aerosolize LV-LacZ

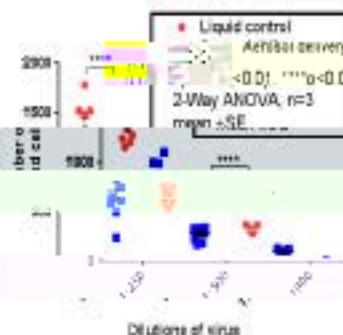


METHODS:



RESULTS:

- The transduction obtained via aerosol was 33% to 51% of the number of cells compared to liquid control, for 1:250 to 1:100 dilutions of the LV-LacZ (Figure 2).



- Virus suspended in FreeStyle™ medium showed significantly higher levels of transduction (58%) when compared to virus suspended in saline (56%) (Figure 3).

Figure 3: LV-LacZ transduction levels (percentage of cells) versus dilutions of virus (1:250, 1:100, 1:50, 1:25, 1:10, 1:5, 1:2, 1:1). Data points are color-coded by delivery method: red for liquid control, blue for aerosol delivery. A significant difference is shown between liquid control and aerosol delivery at all dilutions (p < 0.0001).

- Delivery of LV-LacZ aerosol of different VMD (3.0, 1.5, 0.75, 0.375, 0.1875, 0.09375) no statistically significant difference in expression (not shown).

Figure 4a: LV-LacZ transduction levels (percentage of cells) versus dilutions of virus (1:250, 1:100, 1:50, 1:25, 1:10, 1:5, 1:2, 1:1). Data points are color-coded by delivery method: red for liquid control, blue for aerosol delivery. A significant difference is shown between liquid control and aerosol delivery at all dilutions (p < 0.0001).

- In-vitro tests showed that a homogeneous distribution of the gene expression was produced by lentiviral vector aerosol (Figure 4a) compared to the more discreet clusters (arrows, Figure 4b) observed after liquid bolus vector delivery.

Figure 4b: LV-LacZ transduction levels (percentage of cells) versus dilutions of virus (1:250, 1:100, 1:50, 1:25, 1:10, 1:5, 1:2, 1:1). Data points are color-coded by delivery method: red for liquid control, blue for aerosol delivery. A significant difference is shown between liquid control and aerosol delivery at all dilutions (p < 0.0001).

- Ex-vivo mouse trachea was transduced by LV-LacZ aerosols, with a more uniform distribution of gene expression along the trachea observed (arrows, Figure 4c) compared to the patchy distribution normally observed *In-vivo* (not shown).

Figure 4c: LV-LacZ transduction levels (percentage of cells) versus dilutions of virus (1:250, 1:100, 1:50, 1:25, 1:10, 1:5, 1:2, 1:1). Data points are color-coded by delivery method: red for liquid control, blue for aerosol delivery. A significant difference is shown between liquid control and aerosol delivery at all dilutions (p < 0.0001).

- In liquid bolus delivery, a distinct region of the trachea (arrows on Figure 4d).

Figure 4d: LV-LacZ transduction levels (percentage of cells) versus dilutions of virus (1:250, 1:100, 1:50, 1:25, 1:10, 1:5, 1:2, 1:1). Data points are color-coded by delivery method: red for liquid control, blue for aerosol delivery. A significant difference is shown between liquid control and aerosol delivery at all dilutions (p < 0.0001).

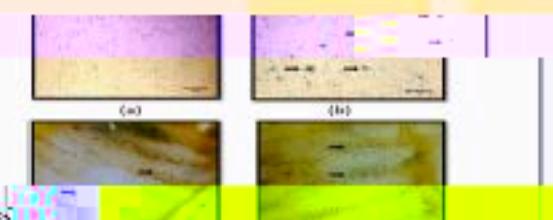


Figure 4: First data (n=1) of planned LV-LacZ transduction for aerosol delivery in CHO-K1 cells by (a) aerosol (b) liquid bolus delivery. LV-LacZ transduction for ex-vivo mouse trachea by (c) aerosol (d) liquid bolus delivery.

CONCLUSION:

- Data showed that LV-LacZ aerosol was able to transduce about 33% to 51% of cells.
- We speculate that the presence of FreeStyle™ media aids in protecting the LV from shear stress compared to other diluents.
- Ex-vivo transduction of mouse trachea via LV-aerosol showed a well distributed uniform distribution of gene expression along the length of the trachea.
- To improve the levels of gene transduction we plan to test different nebulization platforms.
- These findings assist in our understanding of LV aerosolization characteristics and provide practical information for future testing into the lungs of animal models and ultimately for CF airway disease.

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