



Adenovirus-Mediated *In Utero* Expression of CFTR Does Not Improve Survival of CFTR Knockout Mice

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Overview

- In utero** gene therapy has been proposed as a viable treatment for a range of genetic diseases including cystic fibrosis (CF)
- Potential advantages include targeting of expanding progenitor cell populations and reduced tissue and immunological barriers to gene transfer
- Published studies (Larsen *et al*, Lancet (2000), 349; 619-620) have suggested that transient expression of CFTR *in utero* is sufficient to rescue the fatal intestinal defect observed in S489X Cfr^{tm1UNC} knockout mice
- We have replicated these studies using an identical adenoviral CFTR vector and sufficient numbers of mice to provide robust Kaplan-Meier survival data

Results

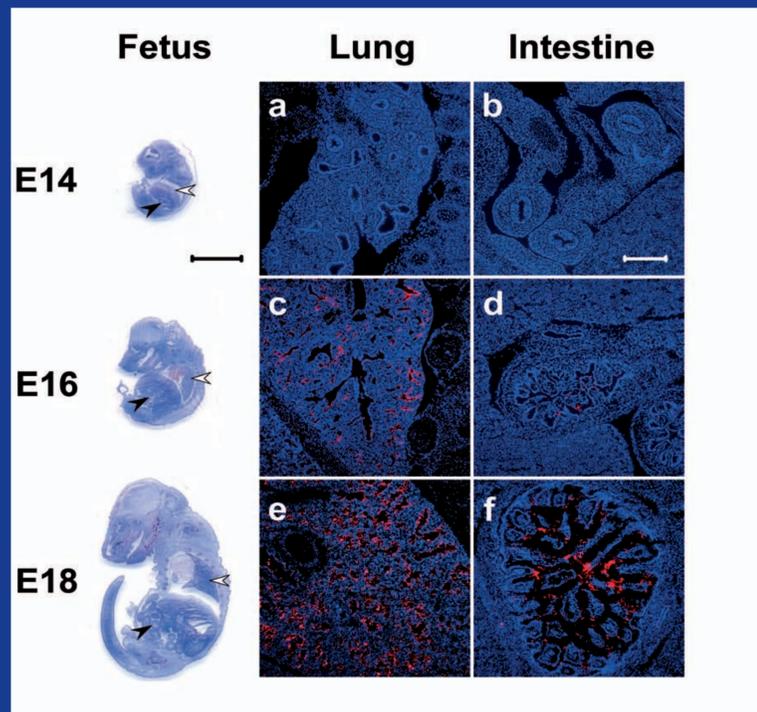


Figure 1 Bio-distribution of fluorescent beads following intra-amniotic injection

To investigate the potential distribution of adenoviral vectors following intra-amniotic injection, 100 nm red fluorescent beads were injected into C57BL6 fetuses at days 14 (E14), 16 (E16) and 18 (E18) of gestation

Effective delivery of virion sized beads to the developing lungs and intestines was only observed following injection at day 16 (E16) and day 18 (E18) of gestation

E16 was selected as the delivery timepoint for future studies to ensure adequate delivery to CF related organs

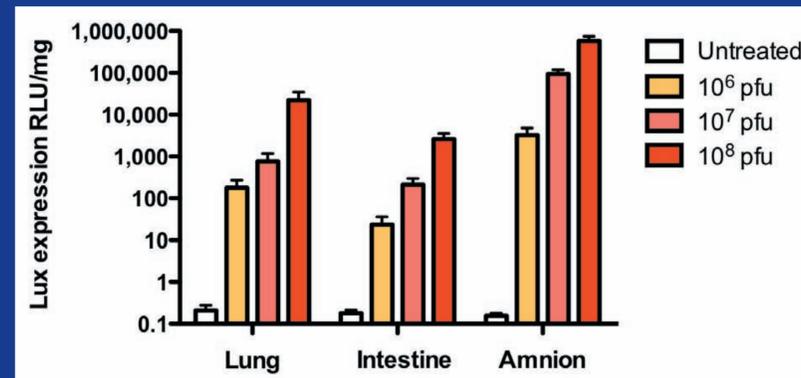


Figure 2 Luciferase expression following *in utero* delivery of AdLuc

To investigate gene expression following intra-amniotic injection of adenoviral vectors, C57BL6 fetuses were injected with between 10⁶ and 10⁸ pfu of the luciferase expression vector AdLuc at E16 and expression measured 48 hr later

Dose dependent luciferase expression was observed in both the lungs and the intestines of treated fetuses

Intra-amniotic injection of adenovirus at E16 results in robust gene expression in CF related organs

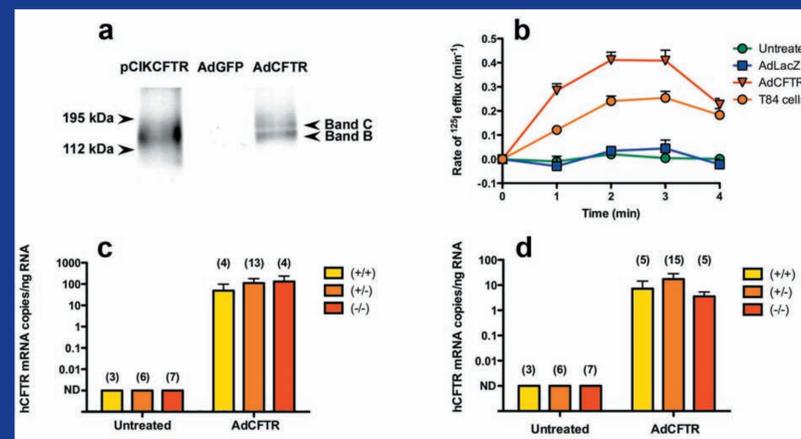


Figure 3 hCFTR expression in S489X knockout mice

Litters resulting from heterozygote matings of S489X Cfr^{tm1UNC} mice were injected with 10⁸ pfu of the hCFTR expression vector Av1CF2 at E16 and expression of hCFTR mRNA was assayed 48 hr later

Generation of fully mature and functional hCFTR by Av1CF2 was confirmed by western blotting (a) and ¹²⁵I efflux analysis (b)

Robust hCFTR expression was detected in both the lungs (c) and intestines (d) of Cfr (-/-) mice at equivalent levels to (+/-) and (+/+) littermates

Intra-amniotic injection of Av1CF2 at E16 results in robust hCFTR expression in CF related organs in S489X Cfr^{tm1UNC} mice

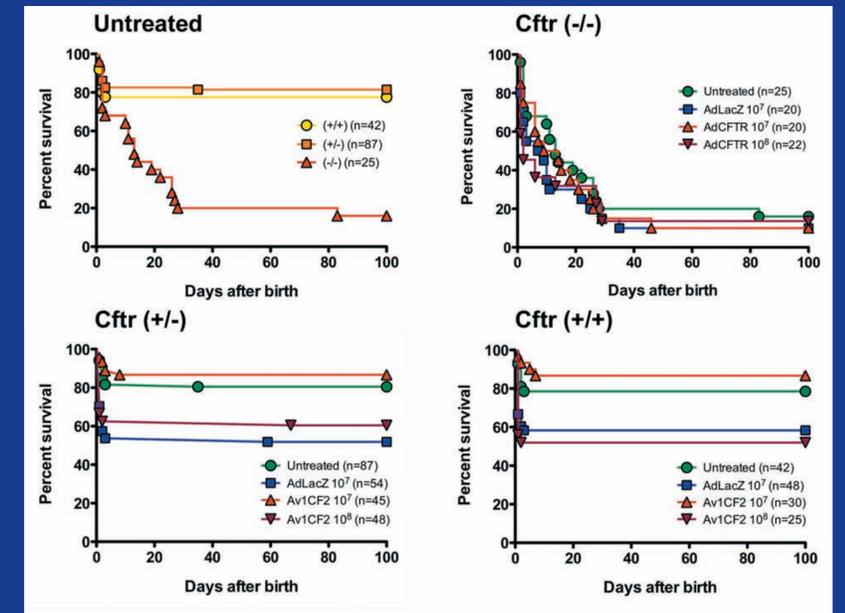


Figure 4 Survival of S489X Cfr^{tm1UNC} knockout mice after *in utero* gene therapy

Litters resulting from heterozygote matings of S489X Cfr^{tm1UNC} mice were injected with 10⁷ pfu or 10⁸ pfu of Av1CF2 at E16. Pregnancies ran to term and survival of Cfr (-/-) pups as well as (+/-) and (+/+) littermates was monitored for 100 days after birth and compared with mice from untreated litters or litters that received 10⁷ pfu of the control vector AdLacZ

Without intervention, Cfr (-/-) mice die within several weeks of birth due to intestinal complications

Cfr (+/-) and (+/+) littermates demonstrate normal survival

Only 16% of untreated Cfr (-/-) S489X Cfr^{tm1UNC} mice survived to 100 days after birth

No improvement in survival was observed in Cfr (-/-) S489X Cfr^{tm1UNC} mice following intra-amniotic injection of Av1CF2

Conclusions

- Intra-amniotic injection of gene transfer agents at an appropriate gestational stage can mediate gene expression in organs appropriate for CF gene therapy
- However, transient expression of CFTR *in utero* does not correct the fatal intestinal defect in S489X Cfr^{tm1UNC} mice
- In utero* gene therapy remains a potentially valuable approach for the treatment of a range of genetic diseases