

# Technical Journal Club

Marco Losa

21.01.2020

# Regulating and controlling gene expression *in vivo* and *in vitro*

Novel tools may open up the next era of gene therapies in medicine

## Paper 1

# A reversible RNA on-switch that controls gene expression of AAV-delivered therapeutics in vivo

Guocai Zhong<sup>1,3,4,5\*</sup>, Haimin Wang<sup>1,4,5</sup>, Wenhui He<sup>1</sup>, Yujun Li<sup>2</sup>, Huihui Mou<sup>1</sup>, Zachary J. Tickner<sup>1</sup>,  
Mai H. Tran<sup>1</sup>, Tianling Ou<sup>1</sup>, Yiming Yin<sup>1</sup>, Huitian Diao<sup>1</sup> and Michael Farzan<sup>1\*</sup>

Nature Biotechnology, 2019

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## Paper 2

# Dose-dependent activation of gene expression is achieved using CRISPR and small molecules that recruit endogenous chromatin machinery

Anna M. Chiarella<sup>1</sup>, Kyle V. Butler<sup>2</sup>, Berkley E. Gryder<sup>3</sup>, Dongbo Lu<sup>1</sup>, Tiffany A. Wang<sup>1</sup>, Xufen Yu<sup>2</sup>, Silvia Pomella<sup>3,4</sup>, Javed Khan<sup>3</sup>, Jian Jin<sup>2\*</sup> and Nathaniel A. Hathaway<sup>1\*</sup>

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→ **Harnessing antisense oligonucleotides (Paper 1) and small molecules (Paper 2) to control and regulate (trans)gene expression**

# Content

- 1.) General introduction
- 2.) Papers
- 3.) Conclusions

# 1.) General introduction

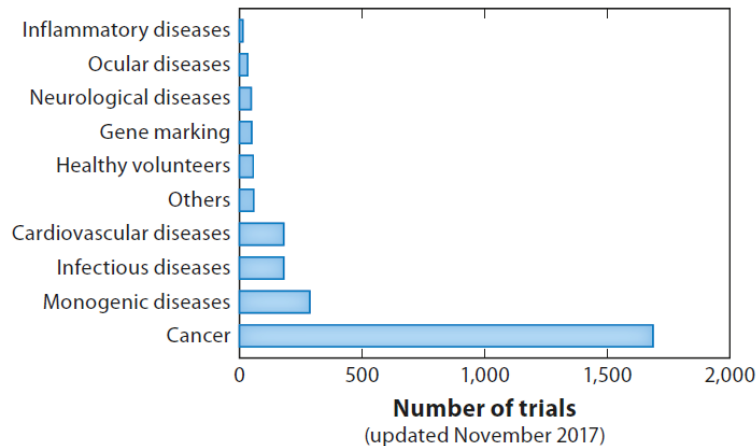
Classification of gene therapies:

- a) Class of disease (genetic vs. complex acquired disorder)
- b) Route of action
- c) Gene delivery vehicle (integrating vs. nonintegrating)
- d) Administration route (in vivo or ex vivo)

# 1.) General introduction

## a) **Class of disease:** Gene therapy trials in medicine

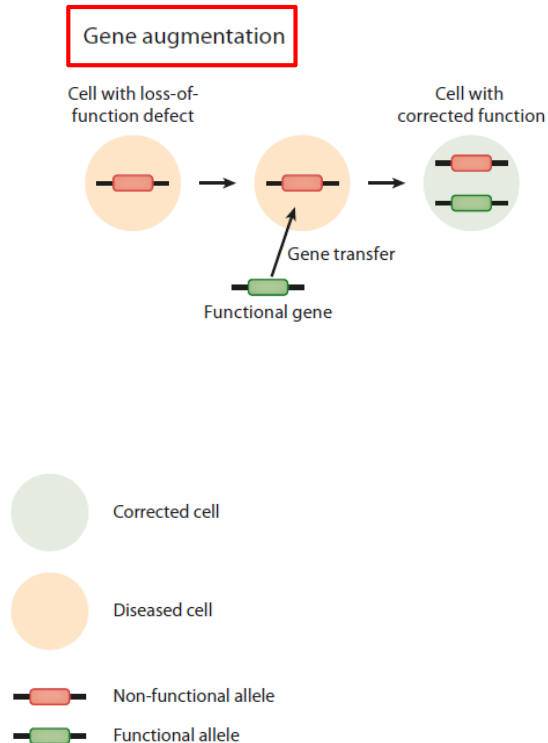
- >2500 clinical studies with gene therapies since late 1990s (first one, X-linked SCID, Fischer and colleagues)
- Monogenic diseases, infectious diseases, complex neurodegenerative disorders and cancers





# 1.) General introduction

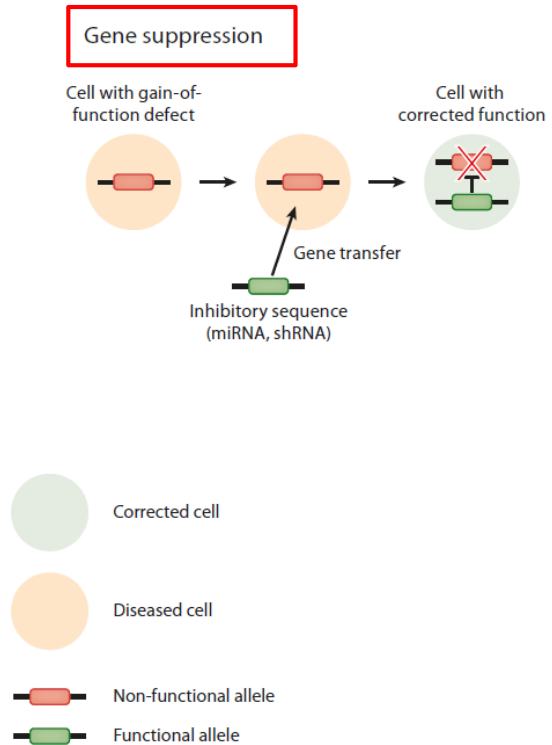
## b) Route of action



- Restore normal cellular function by providing a functional copy of a gene in trans (without affecting diseased gene itself)
- E.g. *in vivo* Leber congenital amaurosis, hemophilias A and B, SMA
- E.g. *ex vivo* SCID

# 1.) General introduction

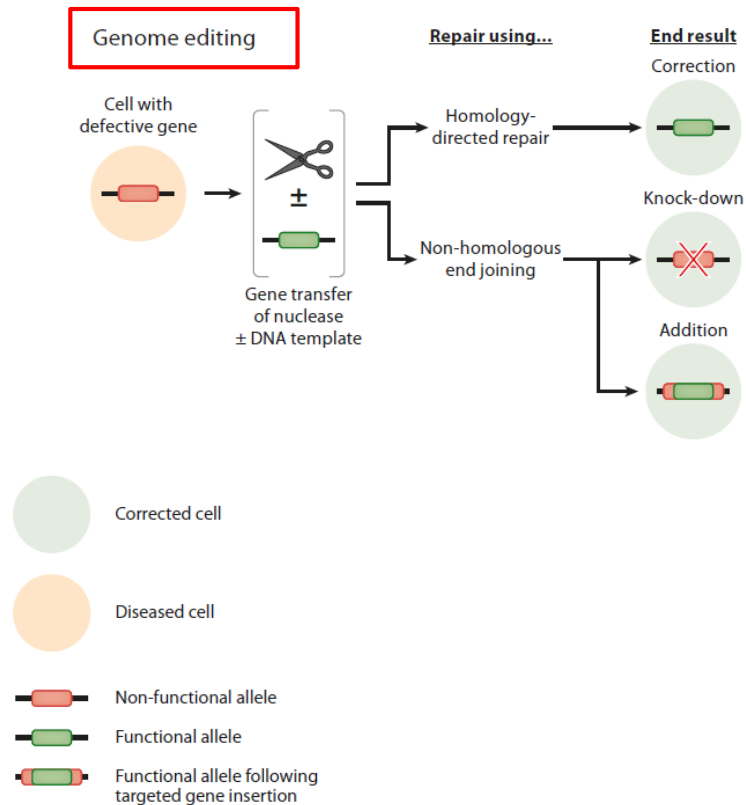
## b) Route of action



- Gene suppression by reducing expression of the mutated gene via RNA interference
- E.g. Huntington's disease

# 1.) General introduction

## b) Route of action



- Gene-specific editing is enhanced by the induction of DNA double-strand breaks at the target site  
→ Choice of DNA repair mechanism over another will determine the outcome of genome editing:
- E.g. exogenous template coding for a functional gene, DNA repair may result in a in situ correction of mutated gene via homologous recombination
- E.g. DNA cleavage occurs, break rejoined by non-homologous end joining → knock-down if repair is imperfect
- E.g. Insertion of DNA template via non-homologous end joining → gene addition rather than correction

# 1.) General introduction

## c) **Gene delivery vehicle:** Viral vectors used

| Features                                  | Retroviral                                 | Lentiviral                                     |
|---|--|--|
| Viral genome                              | RNA  | RNA  |
| Cell division requirement for target cell | Yes  | G1 phase                                       |
| Packaging limitation                      | 8 kb                                       | 8 kb   |
| Immune responses to vector                | Few  | Few  |
| Genome integration                        | Yes  | Yes  |
| Long-term expression                      | Yes  | Yes  |
| Main advantages                           | Persistent gene transfer in dividing cells | Persistent gene transfer in transduced tissues |



### Lentivirus-based systems:

- Belongs to the class of retroviruses (like HIV)
- Carried transgene(s) integrate into genome
- Stable expression in dividing and non-dividing cells (used for stable cell lines)
- Infection of any mammalian cell type possible (VSV-G instead of env gene)

# 1.) General introduction

## c) Gene delivery vehicle: Viral vectors used

| Features                                  | Retroviral                                 | Lentiviral                                     | Adenoviral                                      | AAV   |
|---|--|--|---|---|
| Viral genome                              | RNA  | RNA  | DNA   | DNA   |
| Cell division requirement for target cell | Yes  | G1 phase                                       | No  | No  |
| Packaging limitation                      | 8 kb                                       | 8 kb   | 8–30 kb   | 5 kb  |
| Immune responses to vector                | Few  | Few  | Extensive                                       | Few   |
| Genome integration                        | Yes  | Yes  | Poor  | Poor  |
| Long-term expression                      | Yes  | Yes  | No  | Yes   |
| Main advantages                           | Persistent gene transfer in dividing cells | Persistent gene transfer in transduced tissues | Highly effective in transducing various tissues | Elicits few inflammatory responses, nonpathogenic |

### Lentivirus-based systems:

- Belongs to the class of retroviruses (like HIV)
- Carried transgene(s) integrate into genome
- Stable expression in dividing and non-dividing cells (used for stable cell lines)
- Infection of any mammalian cell type possible (VSV-G instead of env gene)

### AAV-based systems:

- Single-stranded DNA genome, infects human and some primates
- Virus lacks of pathogenicity (very mild immune response)
- Naturally occurring AAV poorly integrates into genome but only at AAVS1 locus on Chr. 19 (safe harbor)
- If no integration occurs (used vectors), genome persists episomal (extrachromosomal)

# 1.) General introduction

## AAV serotypes defines tissue specificity

| Serotype | Primary target tissue   | Description  |
|----------|-------------------------|--|
| AAV-1    | Muscle                  | Best for cardiac muscle, skeletal muscle, neuronal and glial tissue.   |
| AAV-2    | Muscle, Liver, Retina   | Most commonly-used serotype. Best for neurons, muscle, liver, and brain.   |
| AAV-3    | Megakaryocytes          | Best for megakaryocytes, muscle, liver, lung, and retina.  |
| AAV-4    | Retina                  | Best for neurons, muscle, brain, and retina.   |
| AAV-5    | Lung                    | Best for lung, neurons, synovial joint, retina, and pancreas.  |
| AAV-6    | Muscle, Lung            | Best for lung, liver, and heart.   |
| AAV-7    | Muscle, Retina, Neurons | Best for muscle, neurons, and liver.   |
| AAV-8    | Liver                   | Best for muscle, brain, liver, and retina.   |
| AAV-9    | Various                 | Best for muscle, heart, liver, lung, and brain.  |
| AAV-10   | Pleura, CNS             | Cloned from Cynomolgus, almost identical with AAVrh10 except for 12 amino acids in VP1. Best for lung, muscle, heart, NCS and liver.         |
| AAV-DJ   | Various                 | A mixture of 8 naturally-occurring serotypes. Efficiently transduces a wide variety of cell types <i>in vitro</i> .                          |
| AAV-DJ/8 | Various                 | A variant of AAV-DJ with a heparin binding domain (HBD) mutation, which permits infection of liver as well as other tissues <i>in vivo</i> . |

Table 2. List of widely-used AAV serotypes

# 1.) General introduction

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| Serotype | Primary target tissue   | Description  |
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| AAV-3    | Megakaryocytes          | Best for megakaryocytes, muscle, liver, lung, and retina.  |
| AAV-4    | Retina                  | Best for neurons, muscle, brain, and retina.   |
| AAV-5    | Lung                    | Best for lung, neurons, synovial joint, retina, and pancreas.  |
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Table 2. List of widely-used AAV serotypes

## Some clinical trials using AAV-based vectors

| Indication                       | Gene                | Route of administration     | Phase | Subject number | Status                       |
|----------------------------------|---------------------|-----------------------------|-------|----------------|------------------------------|
| Cystic fibrosis                  | <i>CFTR</i>         | Lung, via aerosol           | I     | 12             | Complete                     |
|                                  | <i>CFTR</i>         | Lung, via aerosol           | II    | 38             | Complete                     |
|                                  | <i>CFTR</i>         | Lung, via aerosol           | II    | 100            | Complete                     |
| Hemophilia B                     | <i>FIX</i>          | Intramuscular               | I     | 9              | Complete                     |
|                                  | <i>FIX</i>          | Hepatic artery              | I     | 6              | Ended                        |
| Arthritis                        | <i>TNFR:Fc</i>      | Intraarticular              | I     | 1              | Ongoing                      |
| Hereditary emphysema             | <i>AAT</i>          | Intramuscular               | I     | 12             | Ongoing                      |
| Leber's congenital amaurosis     | <i>RPE65</i>        | Subretinal                  | I-II  | Multiple       | Several ongoing and complete |
| Age-related macular degeneration | <i>sFlt-1</i>       | Subretinal                  | I-II  | 24             | Ongoing                      |
| Duchenne muscular dystrophy      | <i>SGCA</i>         | Intramuscular               | I     | 10             | Ongoing                      |
| Parkinson's disease              | <i>GAD65, GAD67</i> | Intracranial                | I     | 12             | Complete <sup>[24]</sup>     |
| Canavan disease                  | <i>AAC</i>          | Intracranial                | I     | 21             | Ongoing                      |
| Batten disease                   | <i>CLN2</i>         | Intracranial                | I     | 10             | Ongoing                      |
| Alzheimer's disease              | <i>NGF</i>          | Intracranial                | I     | 6              | Ongoing                      |
| Spinal muscular atrophy          | <i>SMN1</i>         | Intravenous and Intrathecal | I-III | 15             | Several ongoing and complete |
| Congestive heart failure         | <i>SERCA2a</i>      | Intra-coronary              | Ib    | 250            | Ongoing                      |

# 1.) General introduction

## Potential complications of clinical gene therapies

| Potential complications of gene therapy  | Strategies to mitigate risks  |
|--|---|
| Gene silencing—repression of promoter  | Use endogenous cellular promoters, avoid viral-derived regulatory sequences   |
| Genotoxicity—complications arising from insertional mutagenesis                                  | Use vectors with safer integration profile (e.g., self-inactivating lentiviral vectors)<br>Sequence-specific integration (i.e., genome editing) |
| Phenotoxicity—complications arising from overexpression or ectopic expression of the transgene   | Control transgene expression spatially (e.g., endogenous, tissue-specific promoters) and temporally (on/off switch)                             |
| Immunotoxicity—harmful immune response to either the vector or transgene                         | Carefully monitor T cell reactivity to the vector and transgene to initiate immune suppression if needed  |
| Risk of horizontal transmission <sup>a</sup> —shedding of infectious vector into the environment | Monitor vector shedding in preclinical models when developing novel vectors   |
| Risk of vertical transmission—germline transmission of donated DNA                               | Use of barrier contraceptive methods until vector shedding is negative  |



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Paper 1 and 2

One remaining challenge (out of many):

→ There is a lack of safe, controllable, small and *in vivo* compatible regulatory mechanisms for gene therapies useful in (human) diseases

# Paper 1

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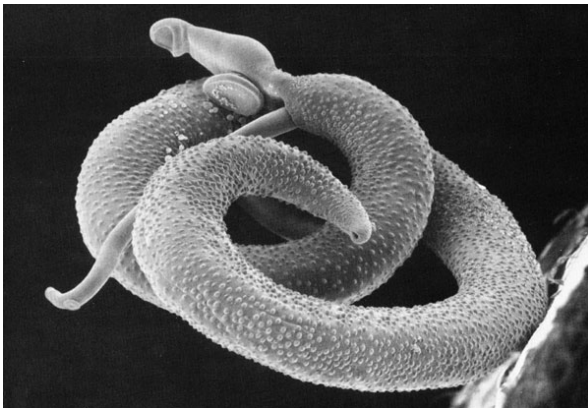
Nature Biotechnology, 2019

# Introduction

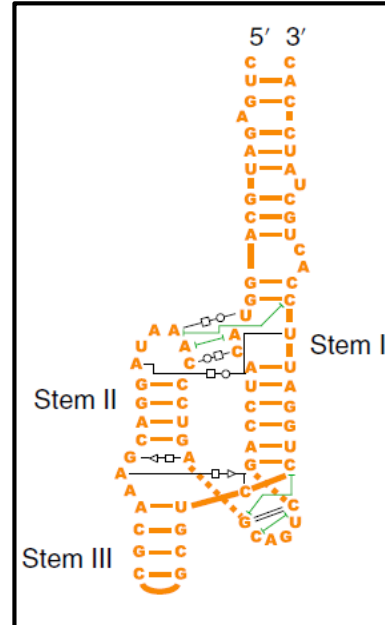
- Gene therapies are limited by the lack of small genetic switches with wide dynamic ranges that control transgene expression without the requirement of additional protein components.
- Problem: ***In vivo* regulation and control** of transgene expression
- **Goals:**
  - (a) Create a novel ON-switch ***in vivo***
  - (b) **Reversible** system which increases safety and reliability
  - (c) The switch must **not be a protein** and should be able to administer in humans/mice
  - (d) Switch should be **small**
  - (e) Switch should be **incorporated into** the gene therapy **vector**
  - (f) The introduced system/transgene should **'by default'** be **inactive without leakage**
  - (g) **Long-term** and high (trans)gene **expression** should be reliable

# Ribozymes

- Ribozymes are RNA molecules with a catalytical ability
- Small in size (<200bp)
- Conserved and present in many species
- Different classes and types of ribozymes:
  - E.g. 28S-rRNA synthetizes peptid bond in translation (protein required for stabilization of ribozyme)
  - E.g. Spliceosomes, which are ribozymes (protein required for stabilization of ribozyme)
- **Ribozymes without the assistance of a protein: Hammerhead-Ribozymes (HHR)**
- **Some** classes of ribozymes do **have self-cleaving capability** to form their final functional state



Parasite causing bilharziosis and bladder cancer in humans



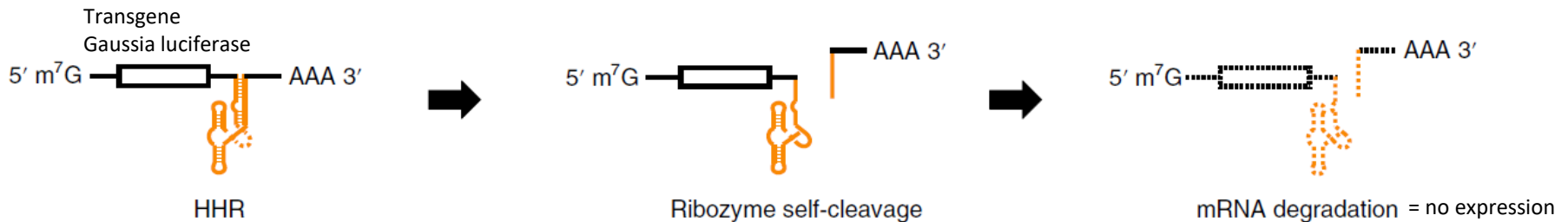
Watson-Crick base-pairing: orange lines  
Hydrogen-bonding interactions: black lines  
Nonadjacent base stacking: green line

*Schistosoma mansoni* **type I HHR**

# Methods

## Rationale/Idea

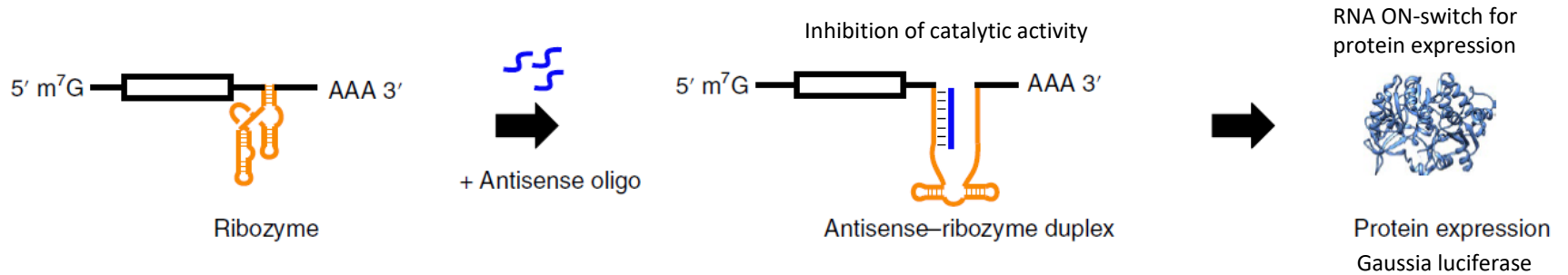
- Introduction of an AAV delivered transgene system
- Usage of a hammer-headed ribozyme (HHR) sequence 3'- to the transgene
- Engineering of a powerful and reliable self-cleaving HHR
- Upon self-cleavage release of mRNA 3'-UTR that leads to mRNA degradation 'by default'



- **Cell culture (293T cells) based reporter inhibition assay** to test ribozymal catalytic activity:
  - Ribozyme sequence introduced 3'-UTR of *Gaussia luciferase* (Gluc) gene
  - Read out: fold inhibition of Gluc expression relative to expression observed with a corresponding inactive mutant)

# Methods

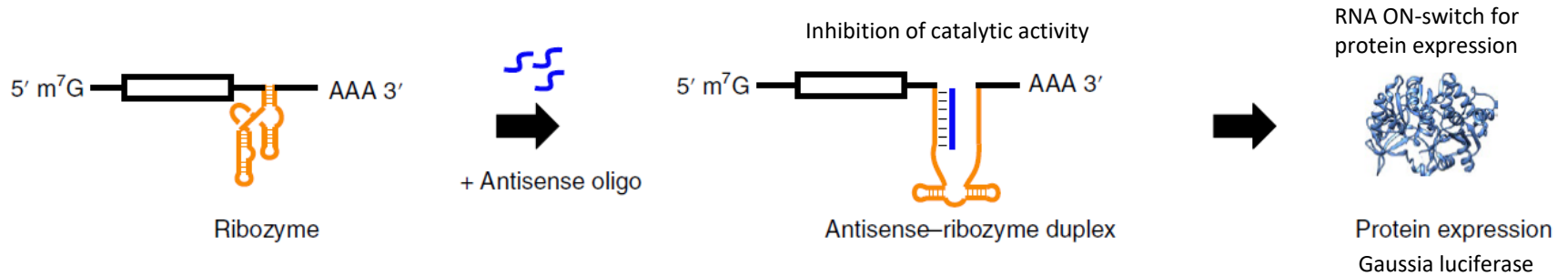
## Rationale/Idea



→ Antisense oligonucleotide (Morpholino) administration leads to cutting deficiency of HHR and 'switches' protein expression on

# Methods

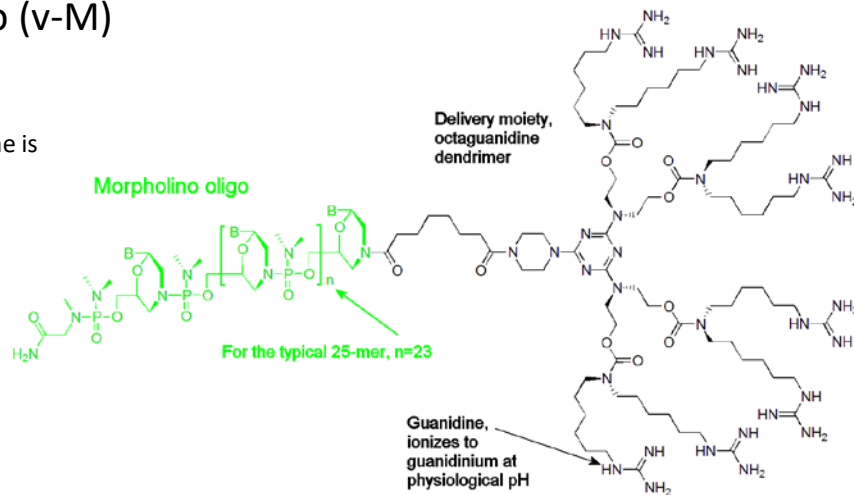
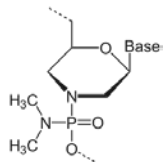
## Rationale/Idea



→ Antisense oligonucleotide (Morpholino) administration leads to cutting deficiency of HHR and 'switches' protein expression on

## Vivo Morpholino (v-M)

Morpholino oligo: backbone is methylene-morpholine



# Results

## Engineering a class of highly efficient hammerhead ribozymes

### Hypothesis



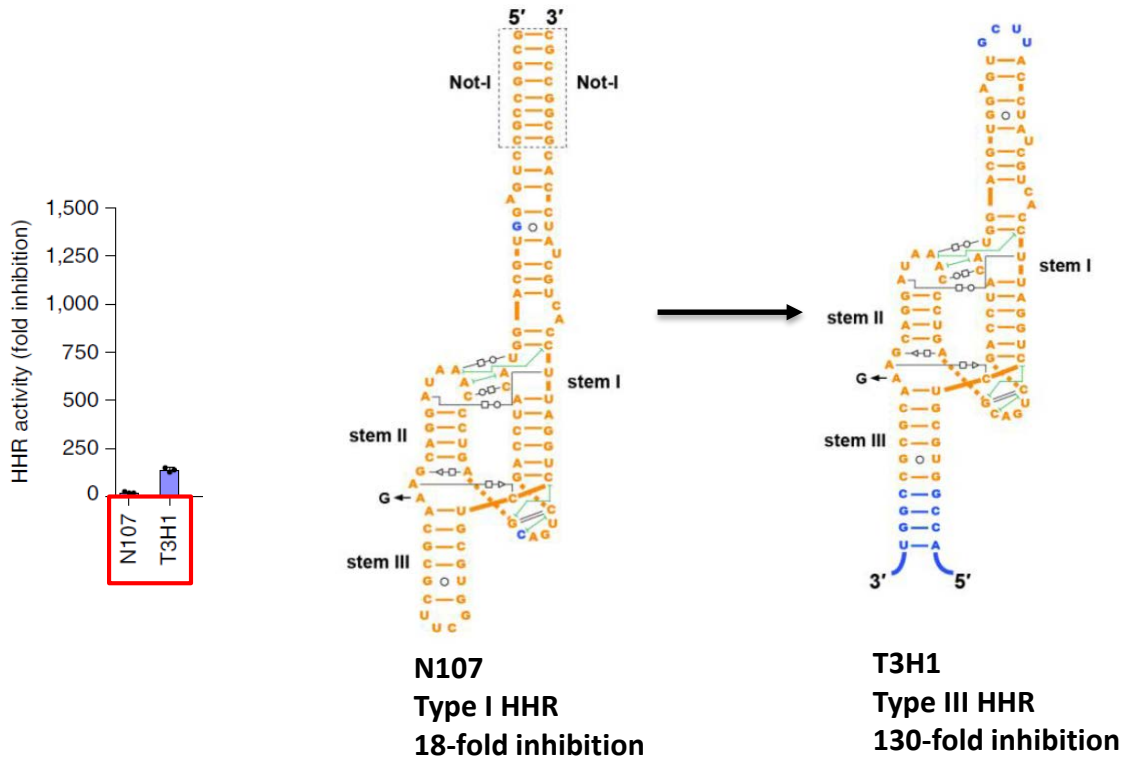
- Idea: Less leakage due to faster disassembly and less re-ligation
- Type III: Faster disassembly and **less re-ligation** due to shorter leaving strand and less energy needed
- Shorter leaving strand may have fewer tertiary interactions



# Results

## Engineering a class of highly efficient hammerhead ribozymes

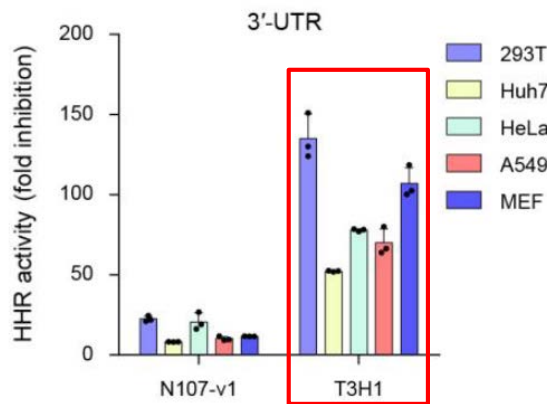
Evolution of N107 ribozyme in this study



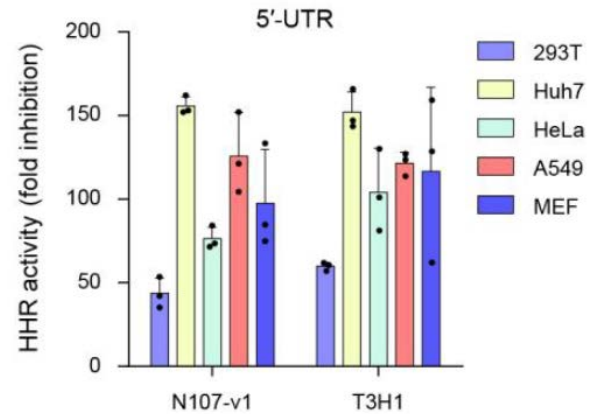
→ Converting type I HHR to type III significantly improved ribozyme activity (from 18-to 134-fold)

# Results

## Ribozyme insertion on 3'-UTR improves inhibition



- **T3H1 outperformed N107 in all cell lines when inserted at 3'-UTR**

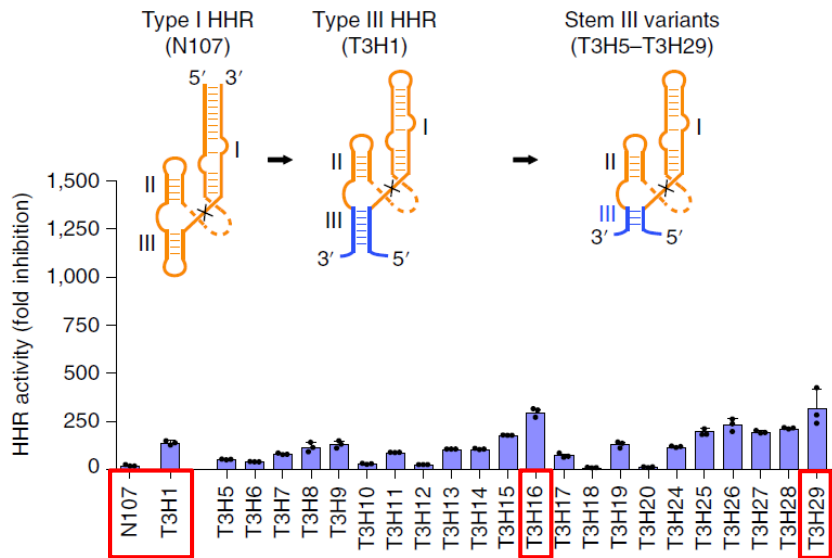


- Insertion on 5'-UTR not much of a difference  
→ Maybe cellular helicases promote disassembly of both ribozymes  
→ Not reasonable to put the switch on 5'-UTR

# Results

## Engineering a class of highly efficient hammerhead ribozymes

Evolution of N107 ribozyme in this study

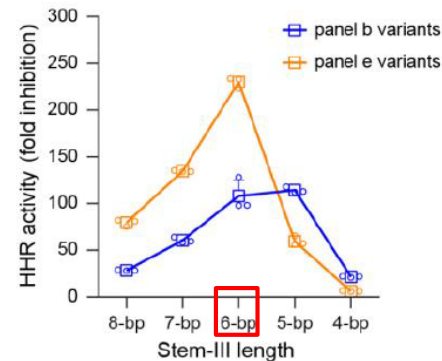


Panel e

| T3H14<br>(8-bp)  | T3H15<br>(7-bp)  | T3H16<br>(6-bp)  | T3H17<br>(5-bp)   | T3H18<br>(4-bp)   |
|--|--|--|---|---|
| 5' 3'<br>A—U<br>G—C<br>G—C<br>G—C<br>G—C<br>G—C<br>G—C<br>C—G<br>3' 5' | 5' 3'<br>A—U<br>C—G<br>C—G<br>C—G<br>C—G<br>C—G<br>C—G<br>C—G<br>3' 5' | 5' 3'<br>A—U<br>C—G<br>C—G<br>C—G<br>C—G<br>C—G<br>C—G<br>C—G<br>3' 5' | 5' 3'<br>A—U<br>C—G<br>C—G<br>C—G<br>C—G<br>C—G<br>C—G<br>3' 5' | 5' 3'<br>A—U<br>C—G<br>C—G<br>C—G<br>C—G<br>C—G<br>C—G<br>3' 5' |

Panel b

| T3H6<br>(8-bp)   | T3H7<br>(7-bp)  | T3H8<br>(6-bp)  | T3H9<br>(5-bp)   | T3H10<br>(4-bp)  |
|--|---|---|--|--|
| 5' 3'<br>A—U<br>G—C<br>G—C<br>G—C<br>G—C<br>G—C<br>G—C<br>G—C<br>3' 5' | 5' 3'<br>A—U<br>G—C<br>G—C<br>G—C<br>G—C<br>G—C<br>G—C<br>3' 5' | 5' 3'<br>A—U<br>G—C<br>G—C<br>G—C<br>G—C<br>G—C<br>G—C<br>3' 5' | 5' 3'<br>A—U<br>G—C<br>G—C<br>G—C<br>G—C<br>G—C<br>3' 5' | 5' 3'<br>A—U<br>G—C<br>G—C<br>G—C<br>G—C<br>G—C<br>3' 5' |



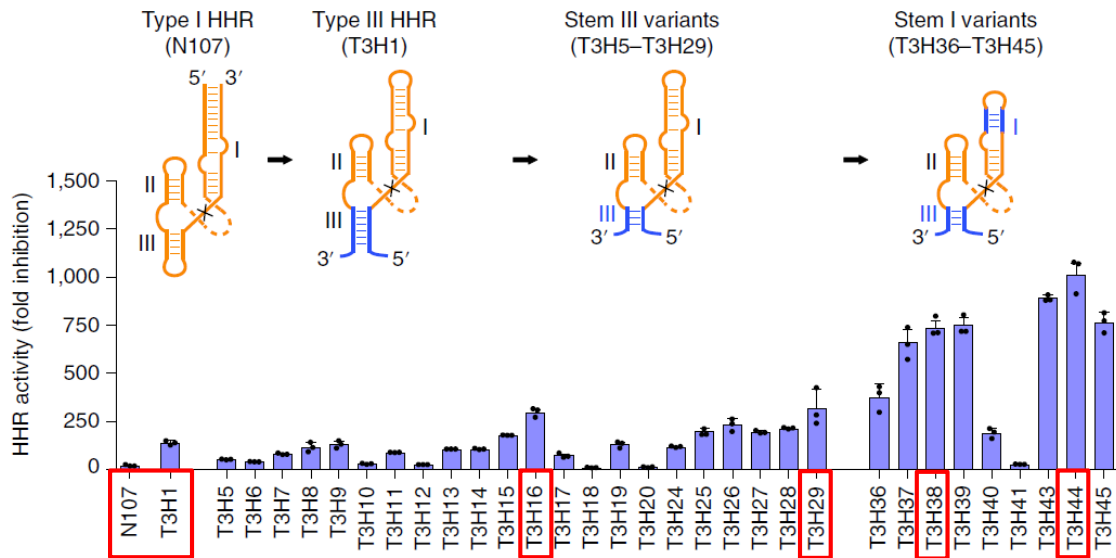
→ Modification of HHR stem III significantly improved ribozyme activity (from 134-fold to approx. 300-fold)

→ Enzymatic activity seems to be optimal with 6-bp stem III

# Results

## Engineering a class of highly efficient hammerhead ribozymes

Evolution of N107 ribozyme in this study



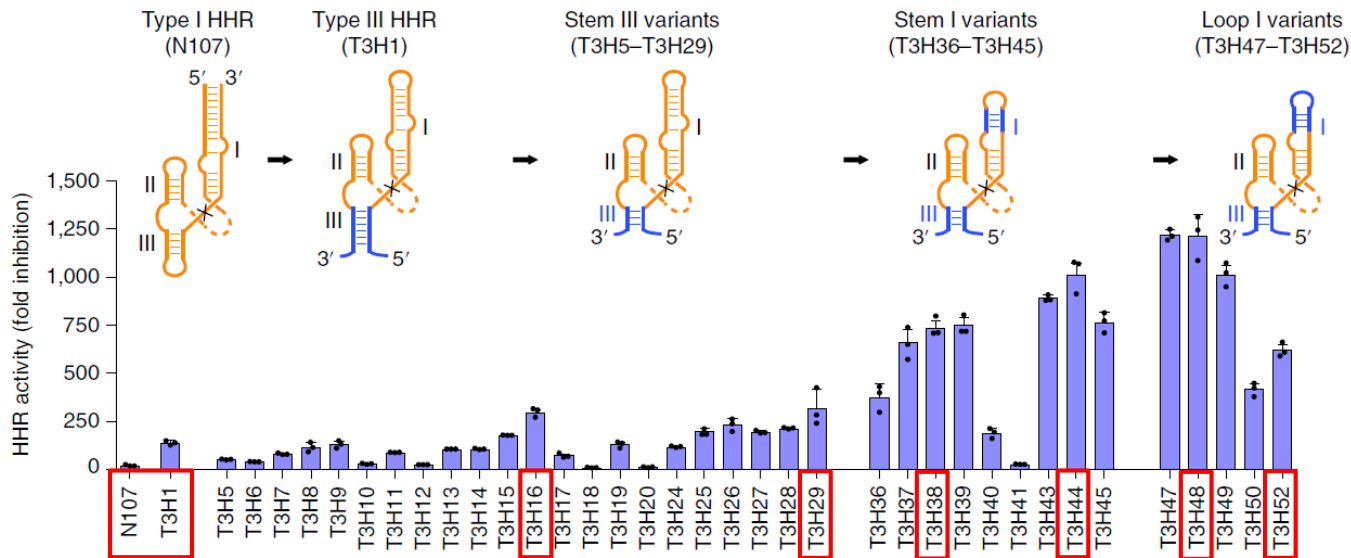
→ Engineer type I HHR to III HHR,

→ Modification of stem III and I significantly improved ribozyme activity (from approx. 300-fold to 730-fold)

# Results

## Engineering a class of highly efficient hammerhead ribozymes

Evolution of N107 ribozyme in this study

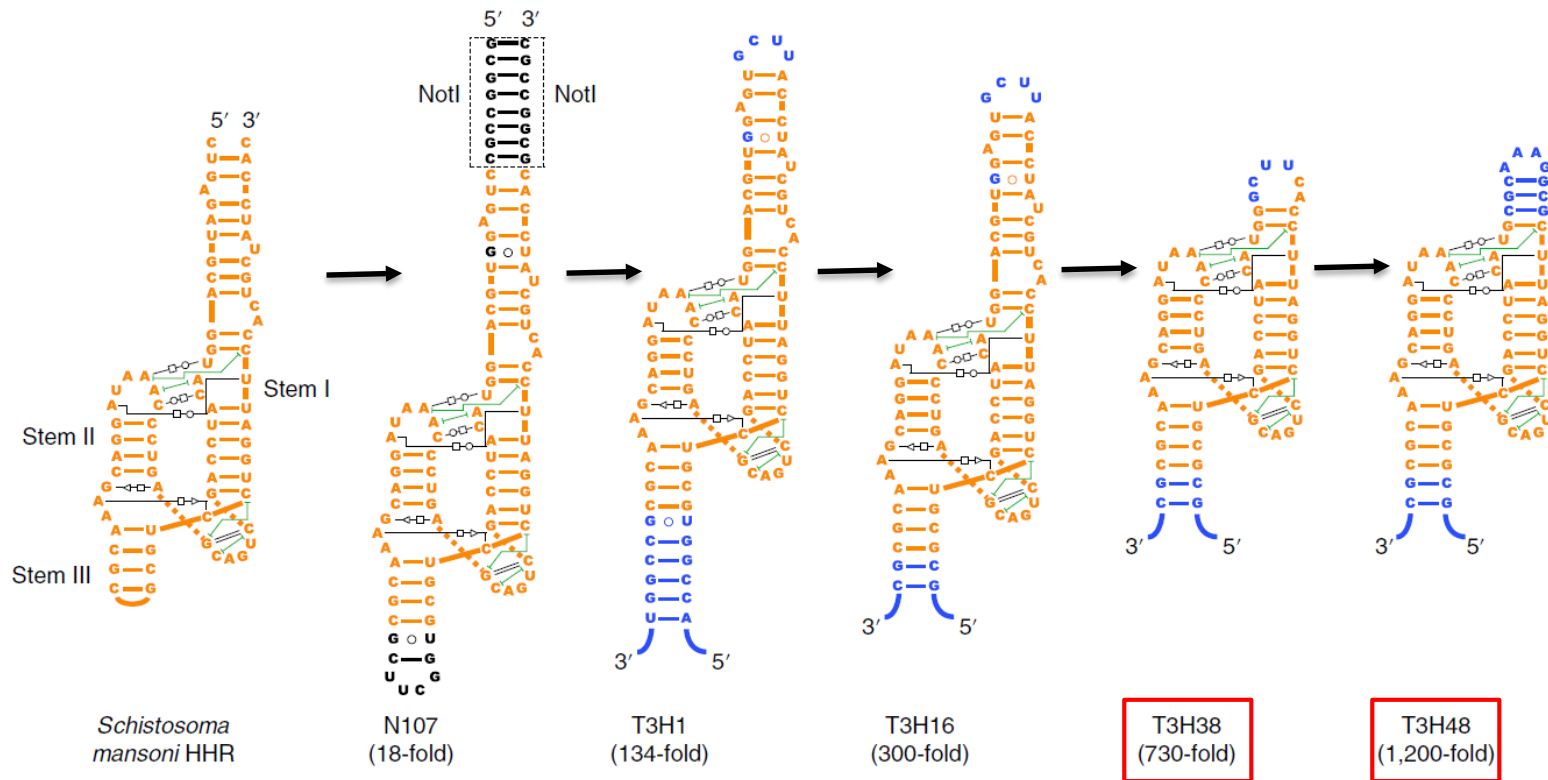


- Engineer type I HHR to III HHR, stem III, stem I on loop I significantly improved ribozyme activity
- Total increase from 18-fold to 1200-fold inhibition (increased catalytic activity → less re-ligation → less GLuc)
- No 'leakage'
- T3H38, T3H48, T3H52 were taken for further experiments

# Results

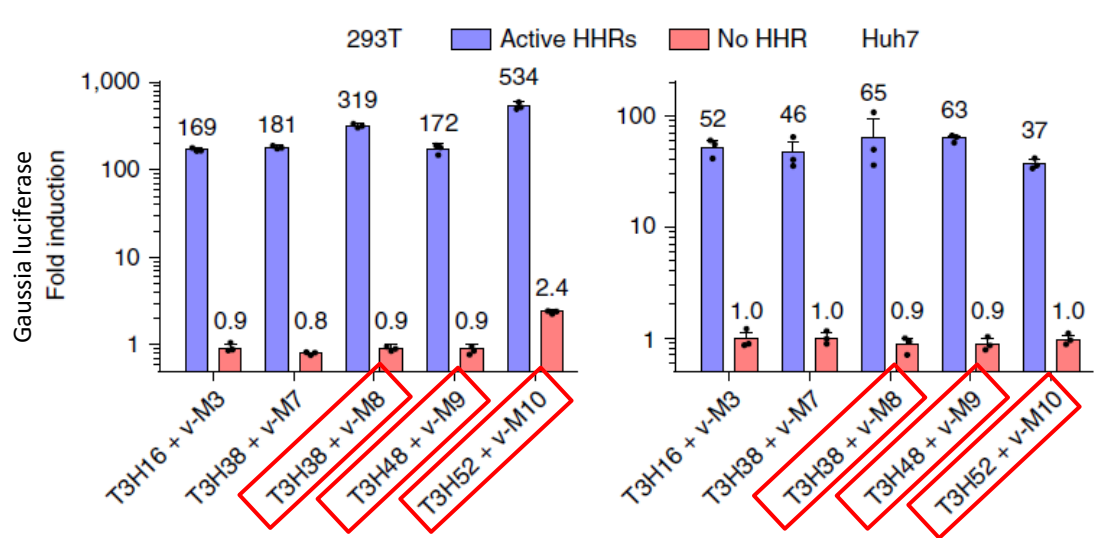
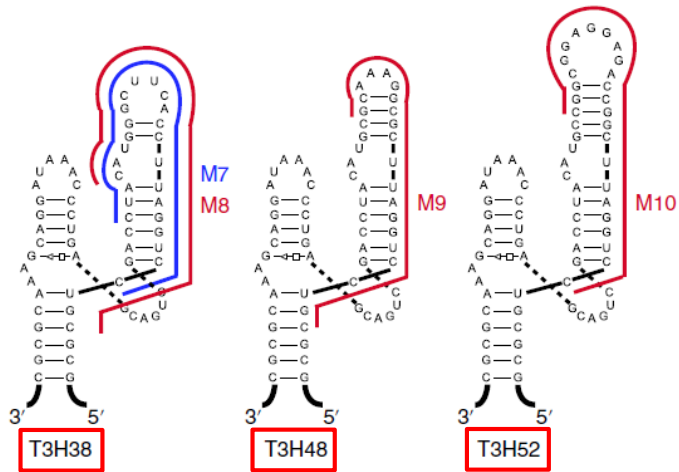
## Engineering a class of highly efficient hammerhead ribozymes

Summary of evolution of N107 ribozyme in this study



# Results

## Efficient regulation of gene expression using optimized type III HHR ribozymes



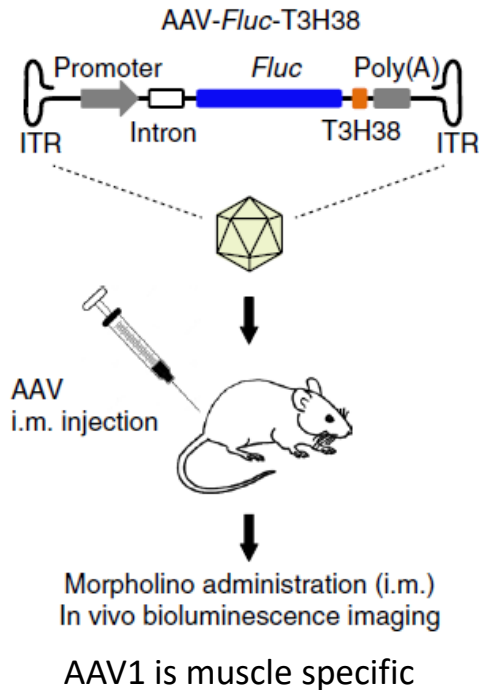
→ Cell type dependent activities of ribozyme variants and v-M8 Morpholino

→ They proceeded with T3H38+v-M8

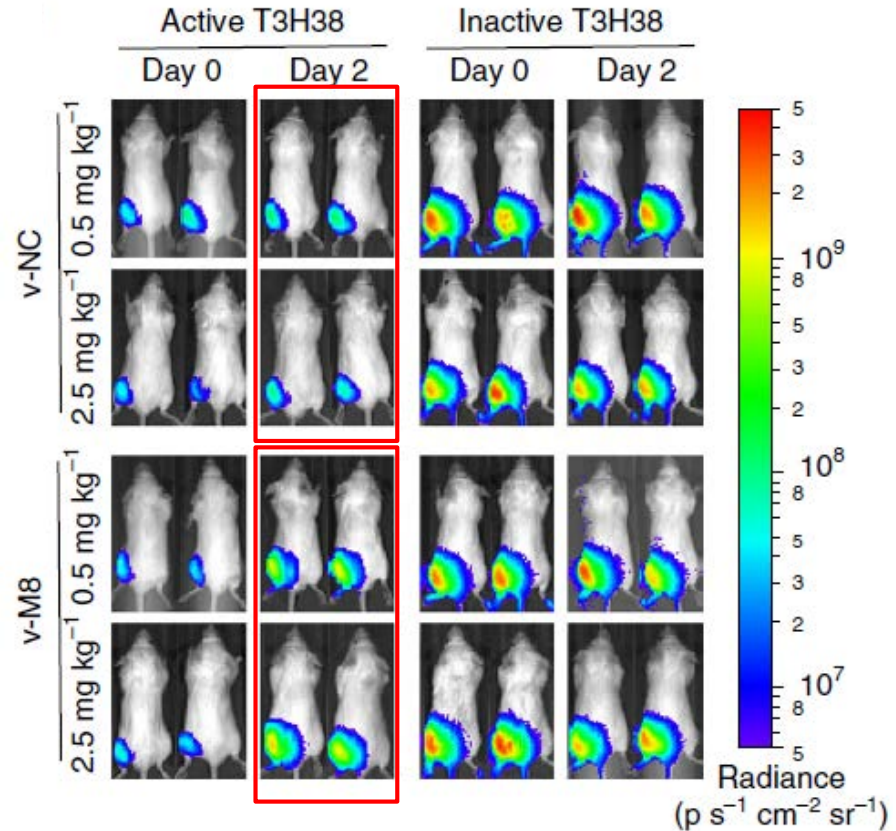
# Results

## *In vivo* induction of an AAV-delivered reporter transgene (fire fly luciferase (Fluc))

### *In vivo* schematic



### Read-out



No Fluc  
Expression  
(catalytic cleavage)  
v-M8 induced expr.  
*in vivo*

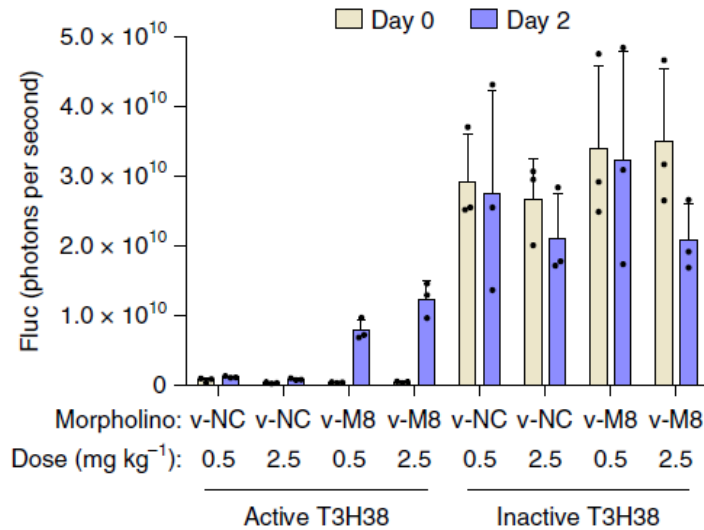
Fluc  
Expression  
(no catalytic cleavage)

- ITRs in cis (close to transgene) and form hairpins (self priming) and allow primase-independent synthesis of second DNA strand
- Can anneal and form concatemers
- Important for encapsidation of virus
- Rep and cap proteins in trans



# Results

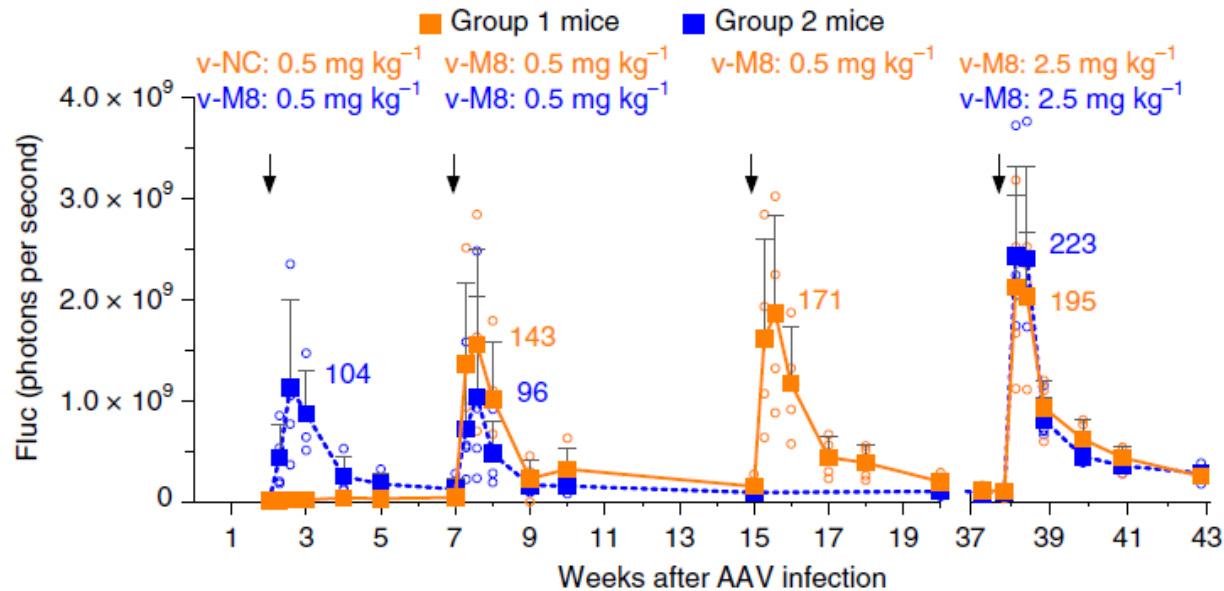
*In vivo* induction of an AAV-delivered reporter transgene (fire fly luciferase (Fluc))



→ Dose-dependent induction of luciferase expression

# Results

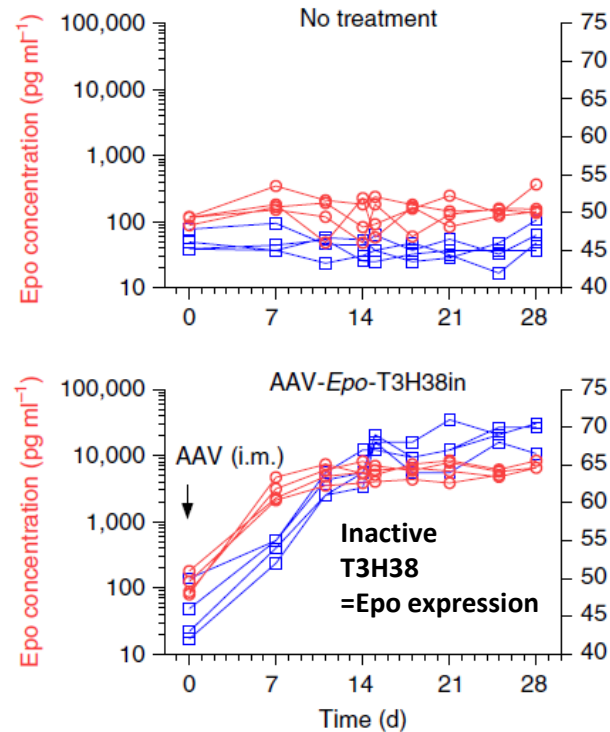
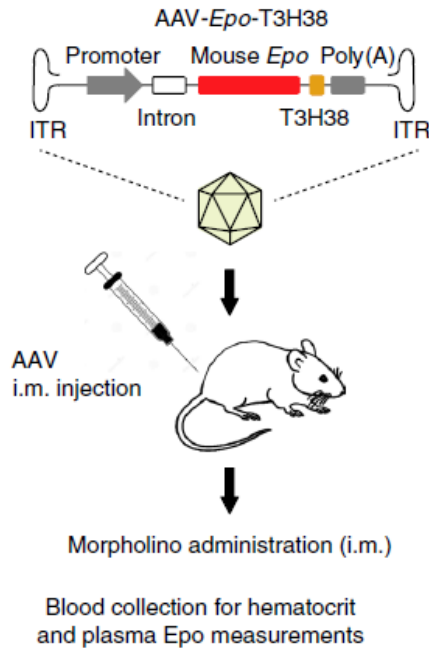
*In vivo* induction of an AAV-delivered reporter transgene (fire fly luciferase (Fluc))



→ T3H38+ v-M8 system induces Fluc for several weeks (long-term gene expression)

# Results

Reliable *in vivo* induction of Erythropoietin (Epo) using the engineered type III HHR system

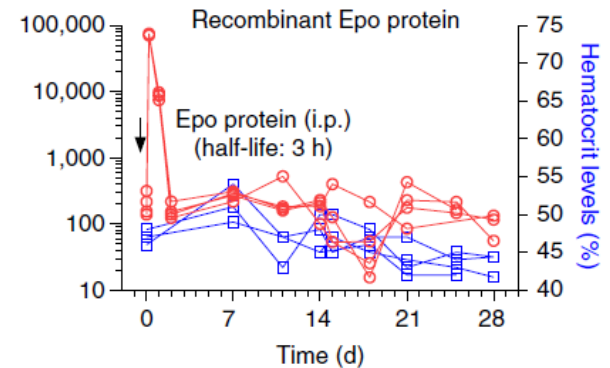
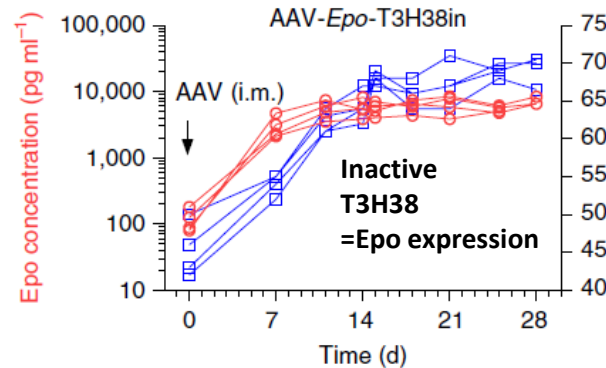
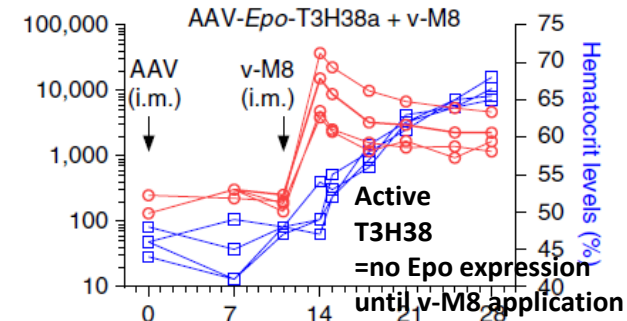
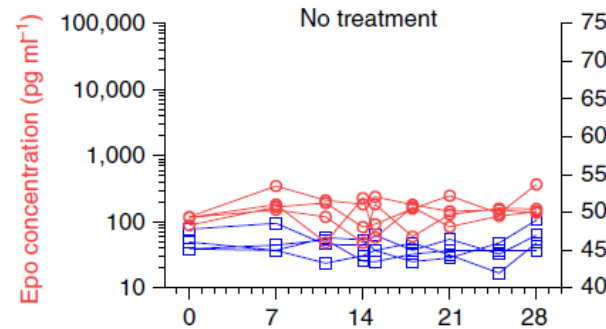
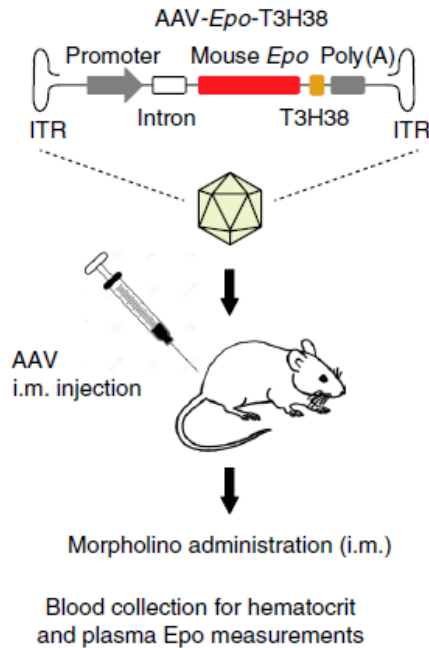


→ T3H38+ v-M8 system induces reliably Epo expression

→ Initial high hematocrit levels

# Results

Reliable *in vivo* induction of Erythropoietin (Epo) using the engineered type III HHR system

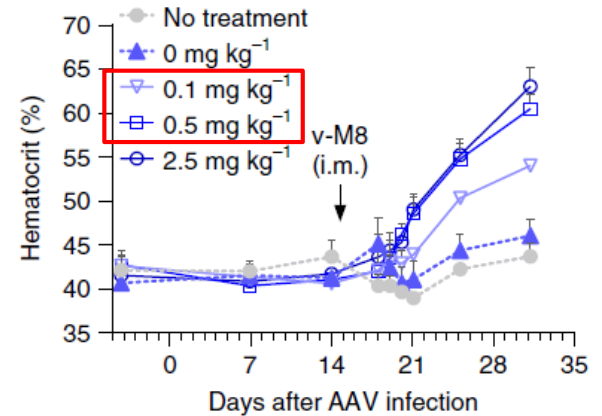
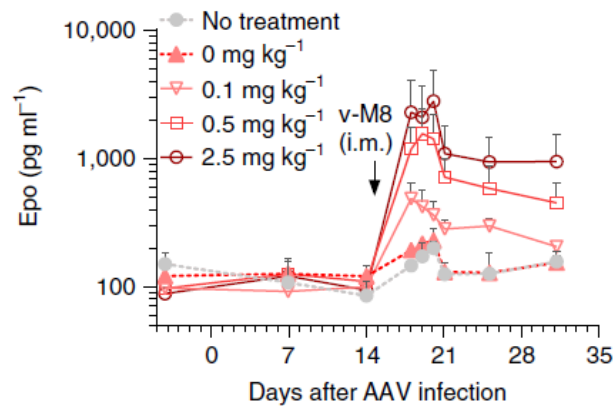
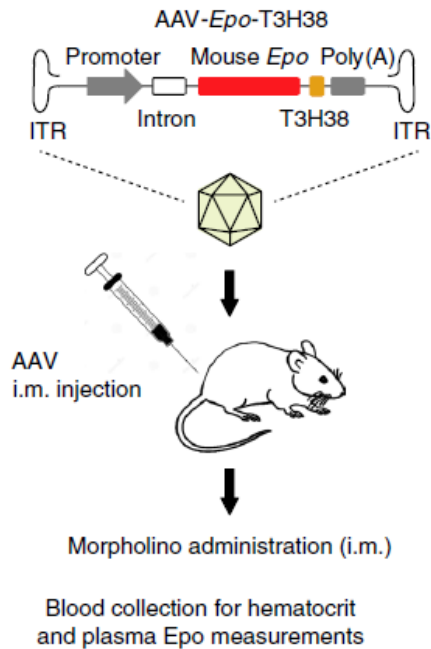


→ T3H38+ v-M8 system induces reliably Epo expression

→ Initial high hematocrit levels

# Results

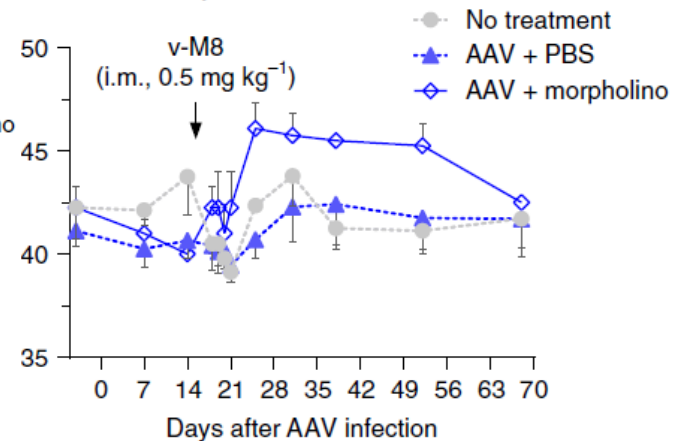
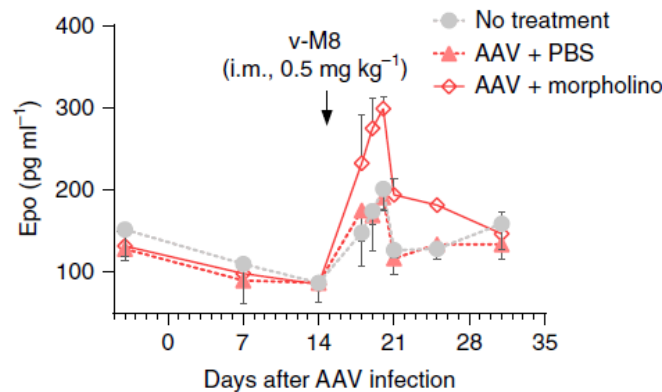
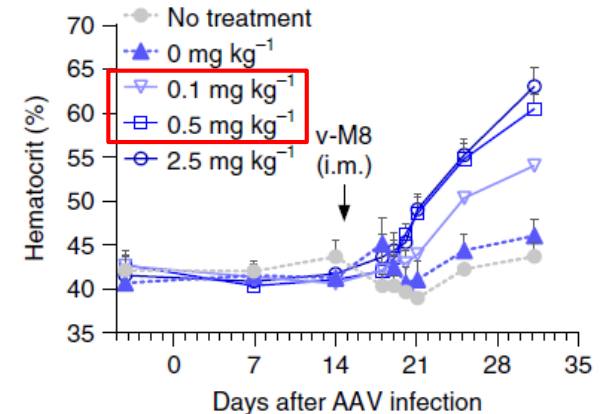
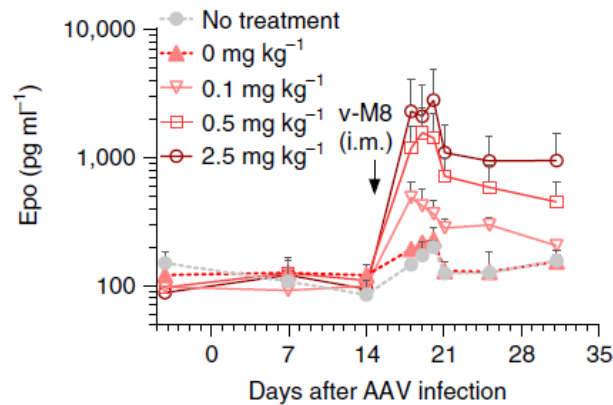
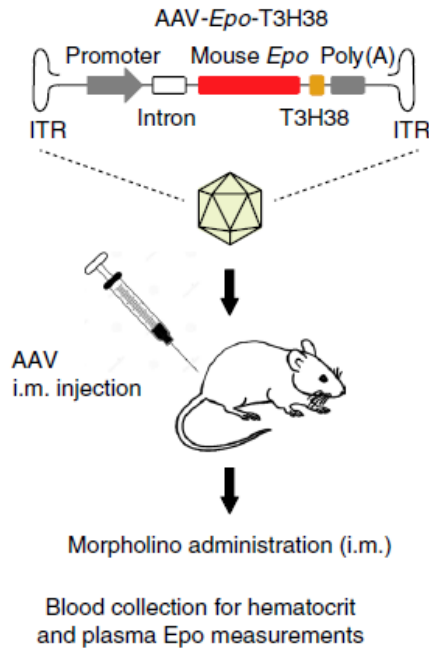
Reliable *in vivo* induction of Erythropoietin (Epo) using the engineered type III HHR system



→ Physiological hematocrit levels seem to be possible

# Results

*Reliable in vivo induction of Erythropoietin (Epo) using the engineered type III HHR system*



→ Physiological hematocrit levels up to 70 days after AAV infection

# Summary Paper 1







- Successful implementation of a promotor independent, well controllable (ON-switch) *in vivo* transgene expression system
- System allows to delay transgene expression well until AAV-induced innate immune responses subside and may prevent emergence of the anti-transgene antibodies observed with other AAV-based systems
- Regulatory element only 63bp
- Local administration and induction allow two or more therapeutics in the same individual
- Morpholinos have been approved for human use from the FDA up to 50 mg/kg
- Long lasting induction of transgene upon Morpholino administration, beneficial for short half-life proteins like Epo.
- Single and well tolerated Morpholino doses can be administered
- Engineered ribozyme allowed the reduction of 'leakage' (protein expression in the absence of antisense oligo)



- Only one transgene (Epo) tested in the study
- Large genes (>4.8kb) are unsuitable for standard AAV vectors

## Paper 2

### **Dose-dependent activation of gene expression is achieved using CRISPR and small molecules that recruit endogenous chromatin machinery**

Anna M. Chiarella <sup>1</sup>, Kyle V. Butler<sup>2</sup>, Berkley E. Gryder <sup>3</sup>, Dongbo Lu<sup>1</sup>, Tiffany A. Wang<sup>1</sup>, Xufen Yu<sup>2</sup>, Silvia Pomella<sup>3,4</sup>, Javed Khan<sup>3</sup>, Jian Jin <sup>2\*</sup> and Nathaniel A. Hathaway <sup>1\*</sup>

Nature Biotechnology, 2019



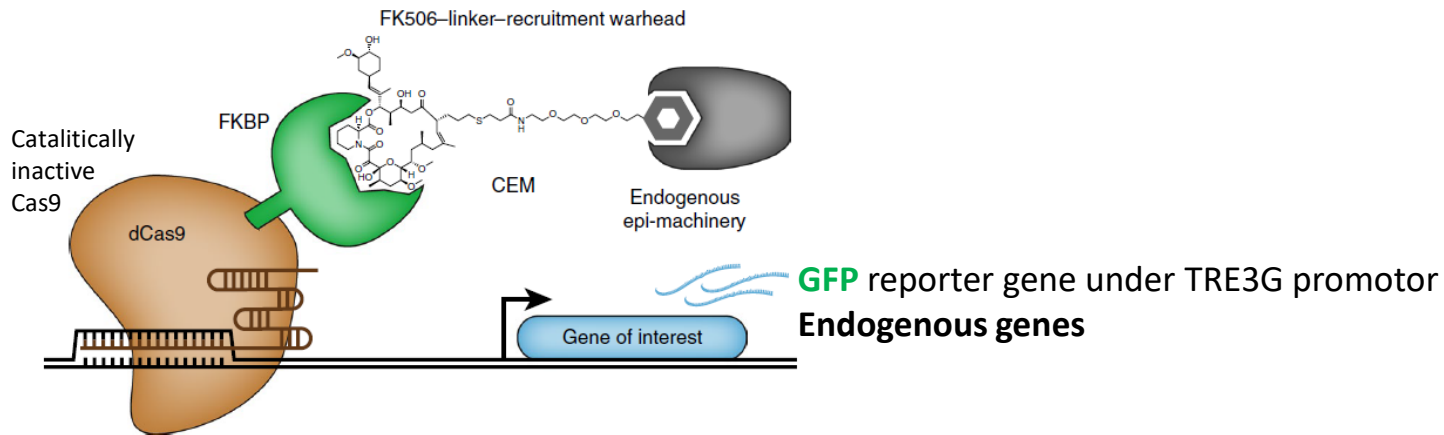
# Introduction

- Genes can be activated or suppressed using CRISPR-Cas9 systems. However, tools that enable dose-dependent activation of gene expression without the use of exogenous transcription of regulatory proteins are lacking.
- Problem: **Dose-dependent activation** of (trans)gene expression using small molecules
- Goals:
  - (a) Create a novel tool which **harnesses small molecules** for gene expression regulation
  - (b) **Reversible and competeable** system
  - (c) Potentially useful for *in vivo* studies
  - (d) **Activation of endogenous genes** should be **similar to established CRISPRa systems** (e.g. d Cas9-VPR)

# Methods

## Rationale/Idea

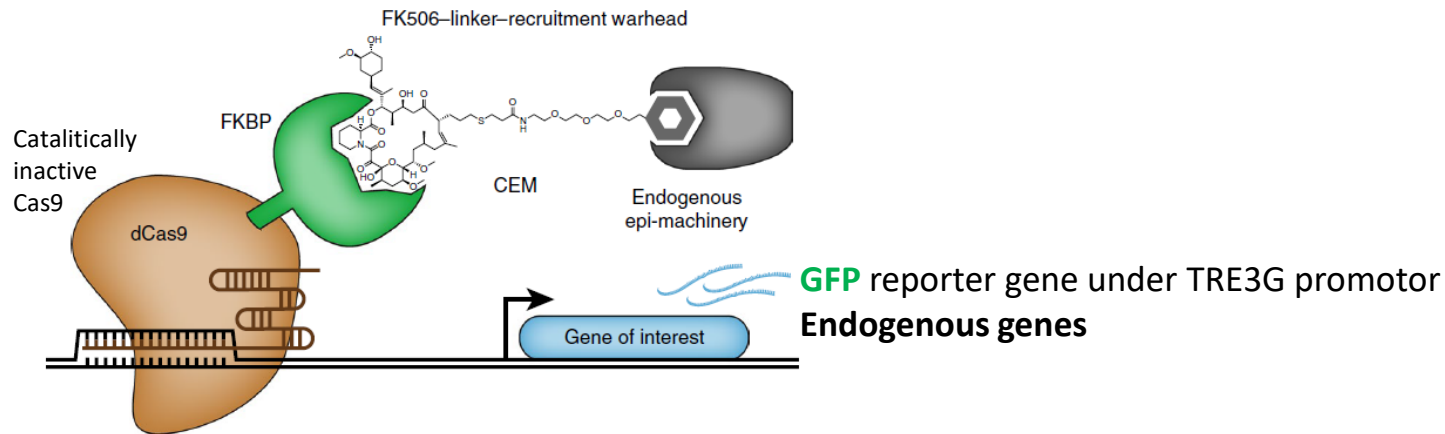
Using chemical epigenetic modifiers (CEMs) to increase gene activation



# Methods

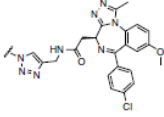
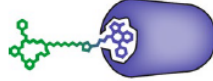
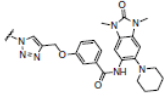
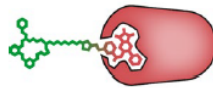
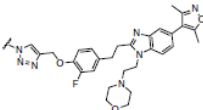
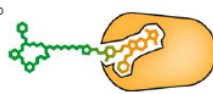
## Rationale/Idea

Using chemical epigenetic modifiers (CEMs) to increase gene activation



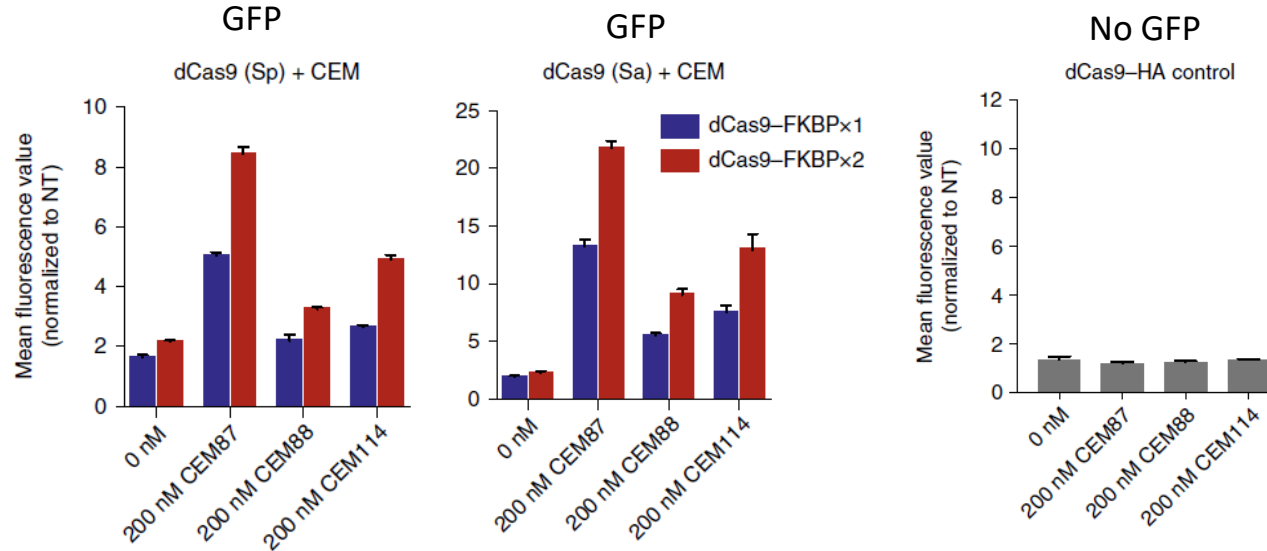
## CEMs with their recruitment protein

Endogenous chromatin machinery

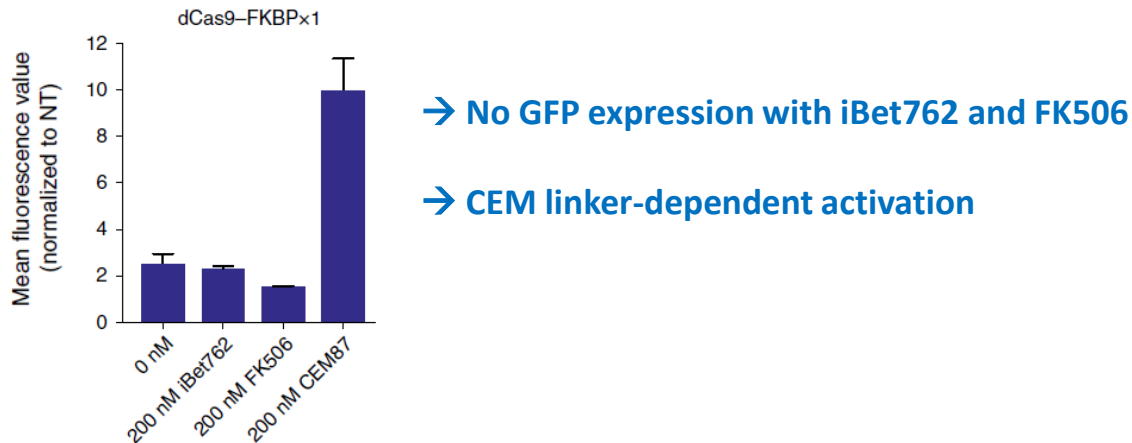
|        |   |   |          |  |
|--------|---|---|----------|--|
| CEM87  |   |   | BRD4     | Associates with chromosomes during mitosis and targets chromatin                                 |
| CEM88  |  |  | BRPF1    | Forms a complex with Moz/Morf-Hbo1 and targets chromatin to regulate transcription (acetylation) |
| CEM114 |  |  | CBP/p300 | Interacts with CRE (cAMP response element) and enhances transcription target genes               |

# Results

## Characterisation of dCas9-FKBP system

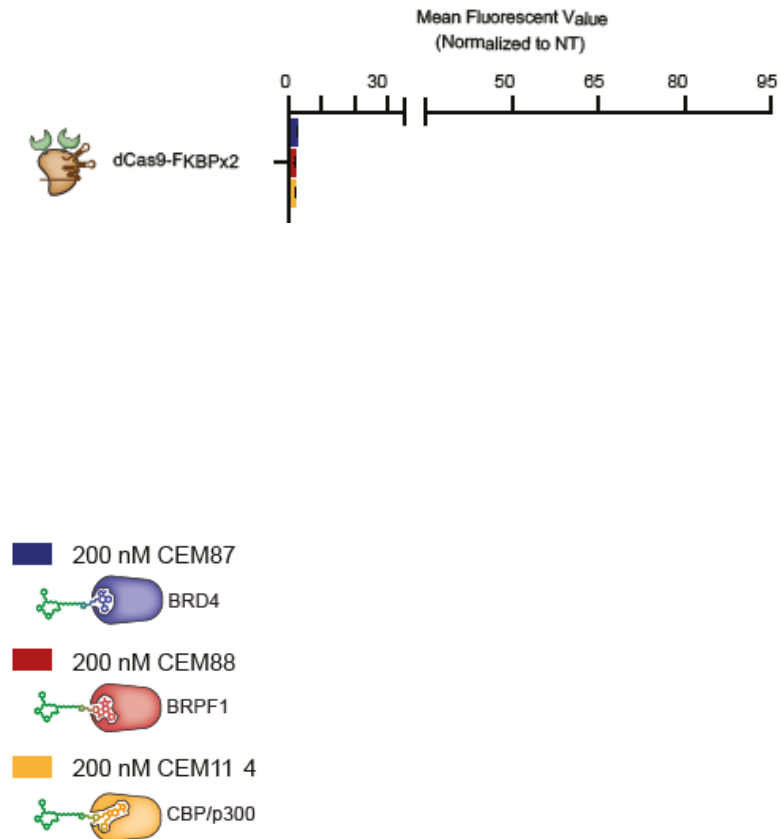


## Treatment with individual recruitment components



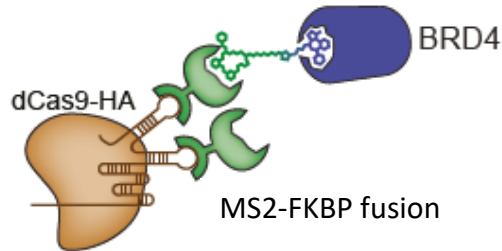
# Results

## Optimisation and characterisation of dCas9 recruitment strategies



# Results

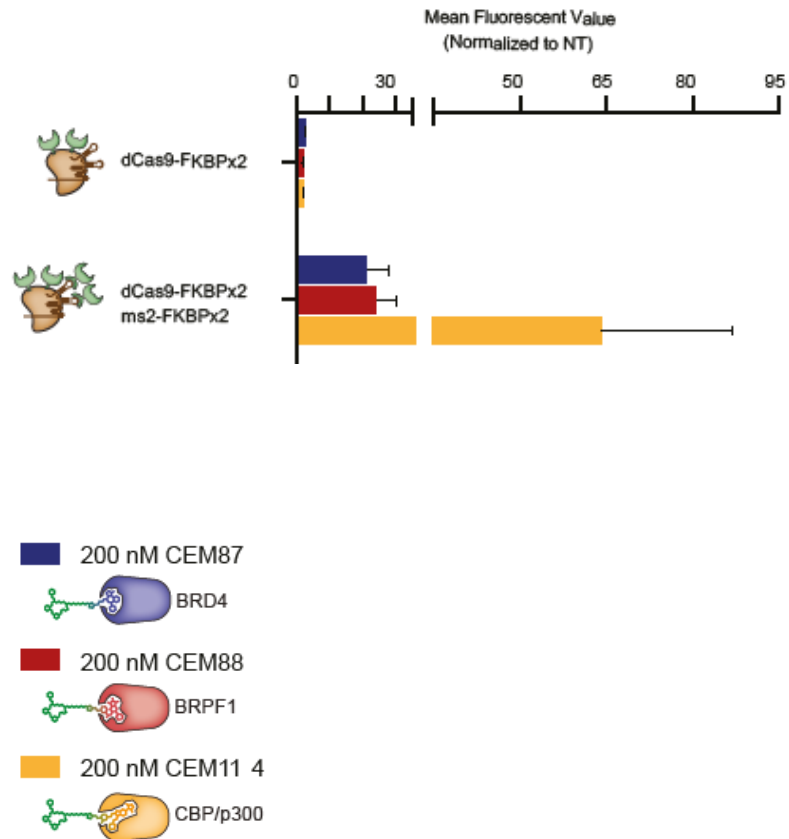
## Ms2-tagging (gRNA containing MS2-compatible stem loops)



- Natural RNA-Protein interaction of MS2 bacteriophage coat protein with a stem loop structure from viral RNA to repress viral replicase in noninfected cells
- Used to monitor RNA at the site of translation
- Here: interaction of MS2 protein and gRNA (stem loops) from CRISPR system

# Results

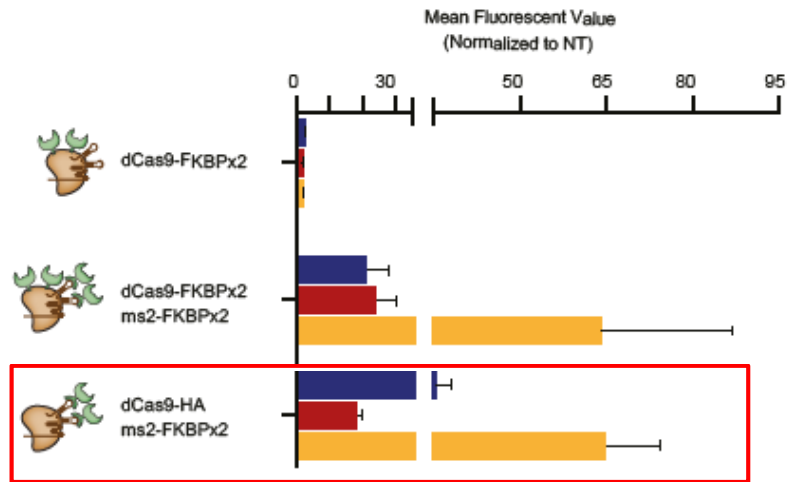
## Optimisation and characterisation of dCas9 recruitment strategies



→ FKBP fusions must be strategically chosen not just increased in numbers

# Results

## Optimisation and characterisation of dCas9 recruitment strategies



200 nM CEM87



→ worked

200 nM CEM88



200 nM CEM11 4



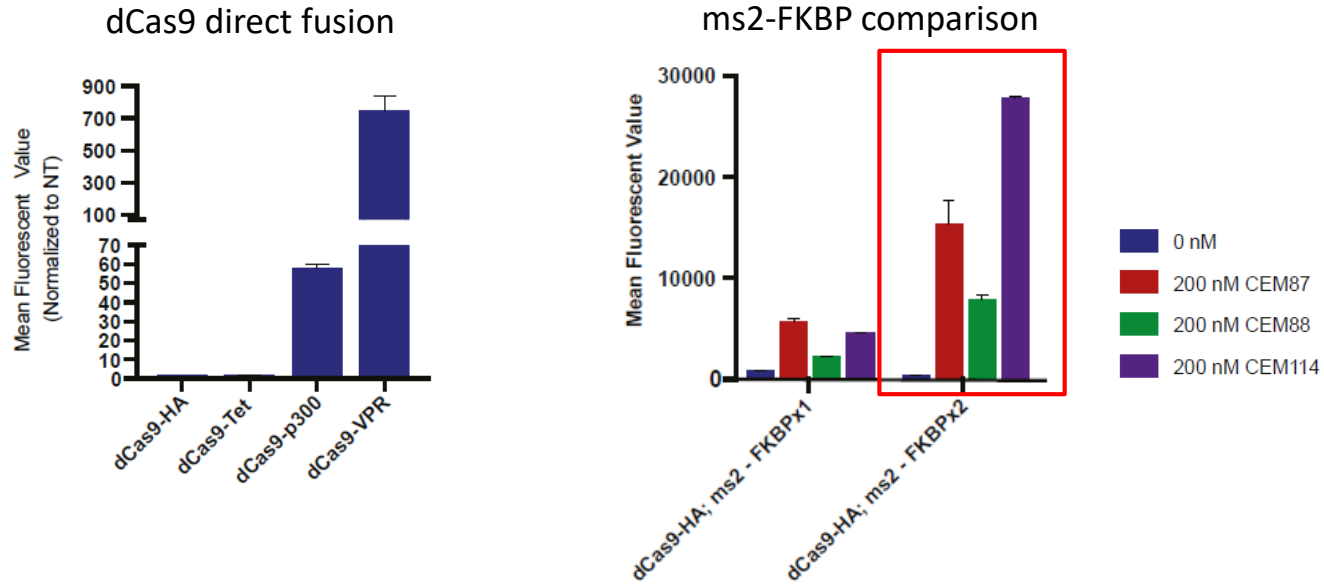
→ worked

→ FKBP fusions must be strategically chosen not just increased in numbers



# Results

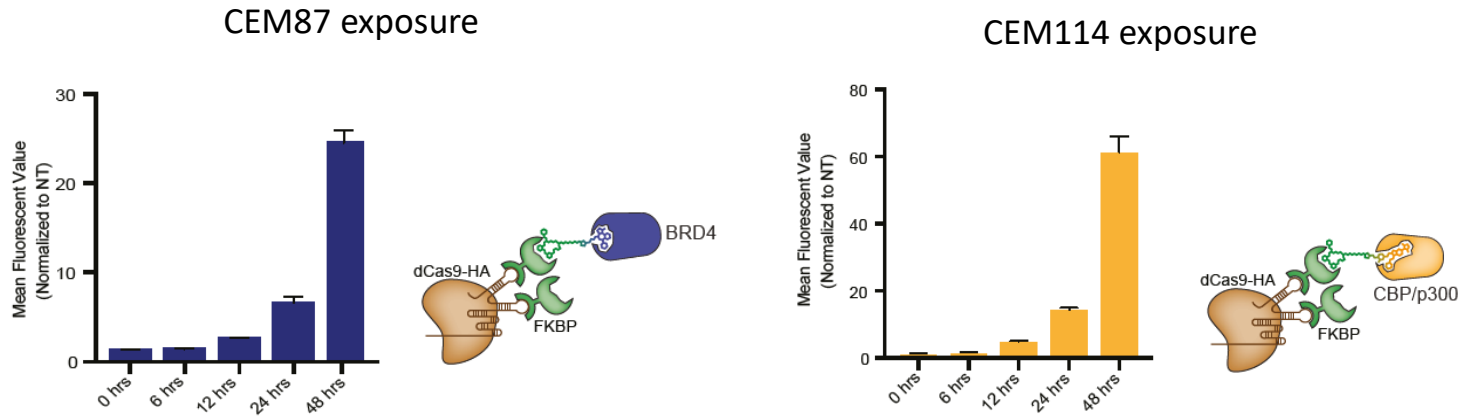
## Optimisation and characterisation of dCas9 recruitment strategies



# Results

## Optimisation and characterisation of dCas9 recruitment strategies

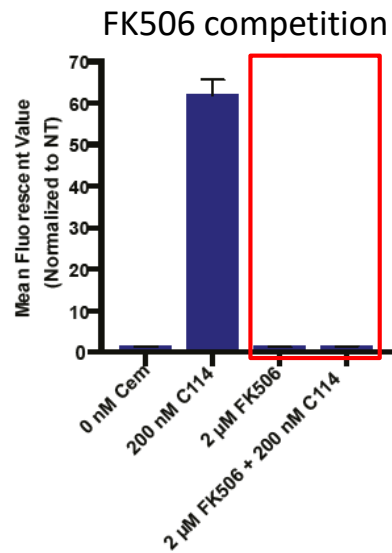
Time-course of final strategy with CEM87 and CEM114



→ GFP expression was highest 48 hours post CEM recruitment

# Results

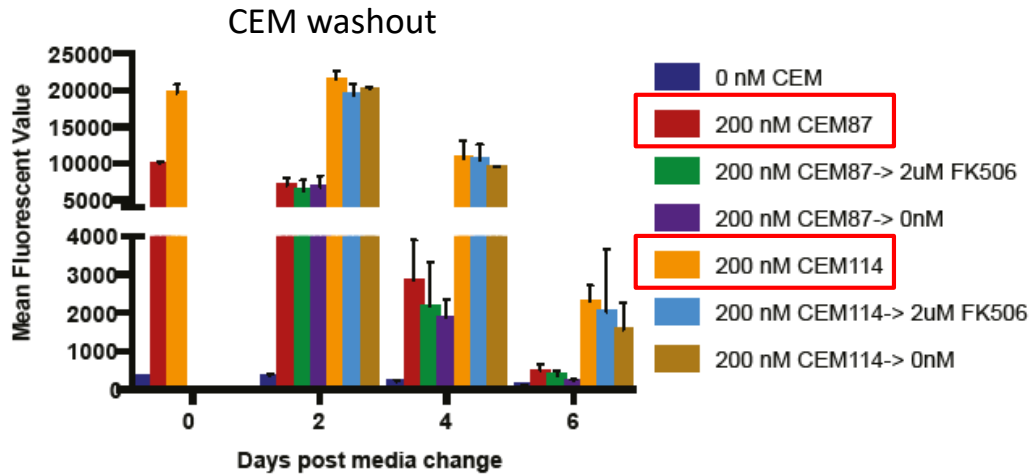
The dCas9-HA; ms2-FKBPx2 system is reversible



→ Gene expression activation is competable

# Results

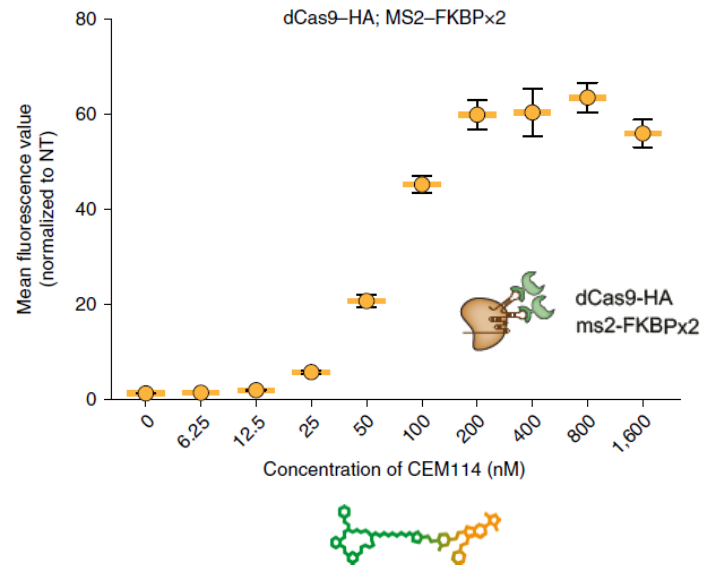
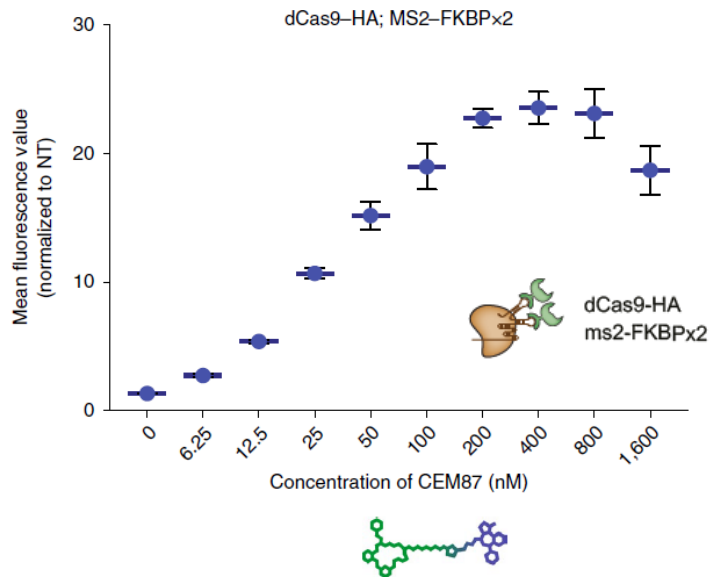
The dCas9-HA; ms2-FKBPx2 system is reversible



→ Gene expression is reversible upon time (CEM washout)

# Results

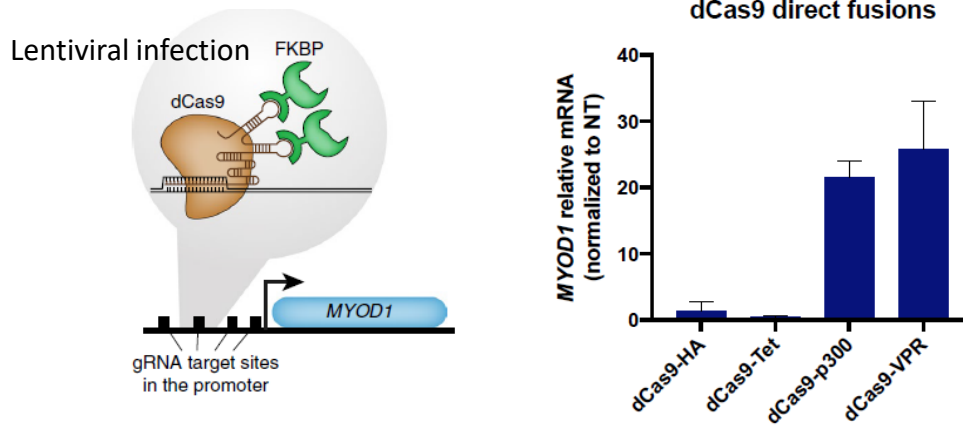
## Dose-dependent **transgene (GFP)** activation using dCas9-HA; MS2-FKBPx2 system



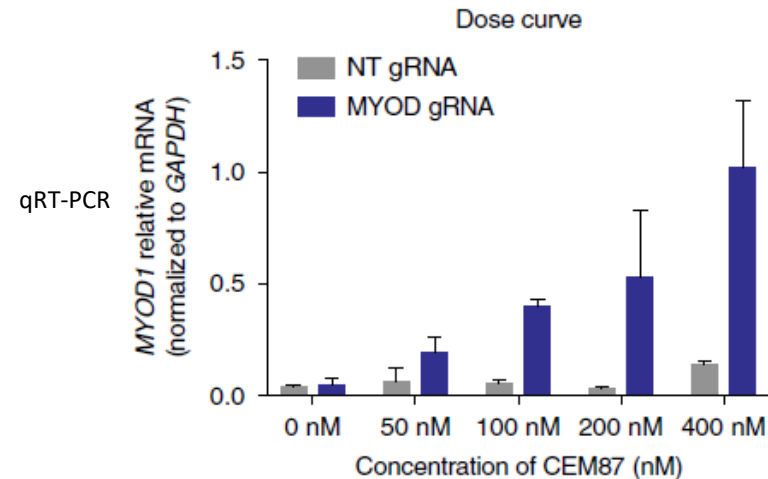
→ Dose-dependent regulation of gene (GFP) activation between 6.25 and 200 nM of CEM87 and CEM114

# Results

## Endogenous gene (MYOD1) targeted using optimized dCas9-CEMa system



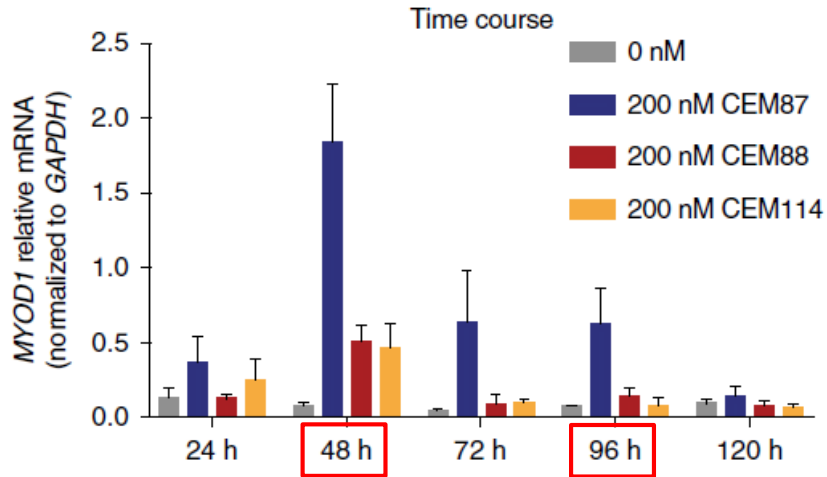
- dCas9-HA system has no MYOD1 expression without CEM87 (almost no leakage)
- dCas9-p300 and dCas9-VPR systems activate MYOD1 expression upon transfection



- dCas9-HA;ms2-FKBP activates MYOD1 gene expression upon CEM87 addition in a dose-dependent manner

# Results

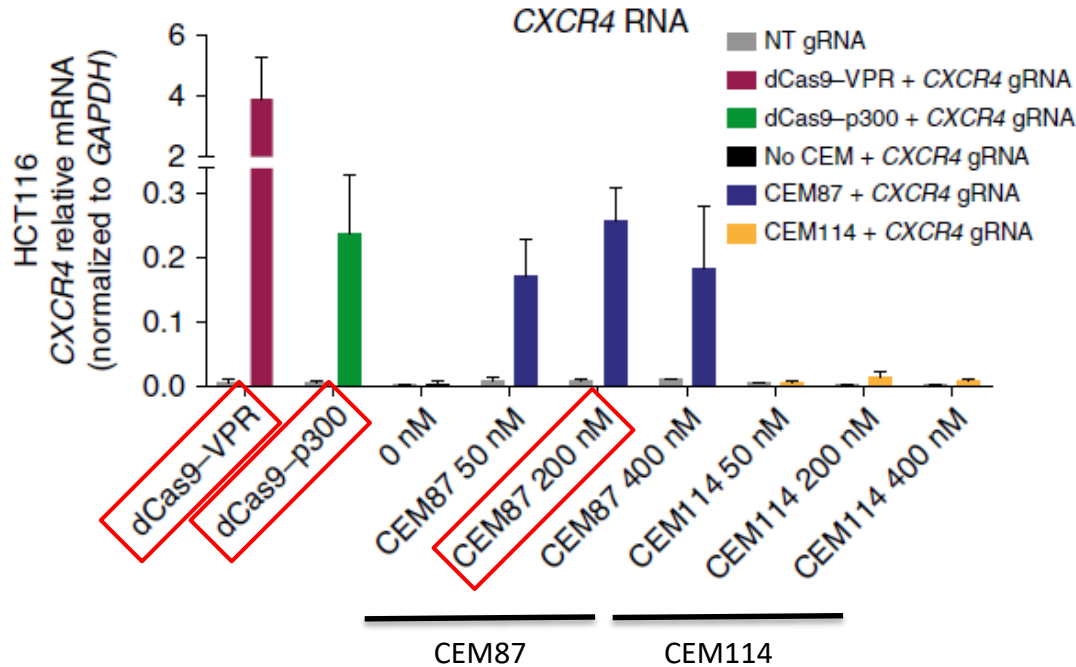
**Endogenous gene (MYOD1) targeted using optimized dCas9-CEMa system**



→ After 96 hrs CEM87 activation of MYOD1 (in HEK293T cells) was no longer significant

# Results

Benchmarking the dCas9-HA;ms2-FKBP system to current dCas9 activating systems



- Similar activation to dCas9-VPR and dCas9-p300
- CEM114 does not activate the CXCR4 gene
- Low expressing genes: IL1RN, OCT4 (both significantly increased)
- High expressed gene: 1 gRNA MYC1 (no significant CEM87-induced activation)
- Groups created a set of gRNA targeting super-enhancer (SE) network controlling MYOD1 and there was a significant increase in MYOD1 expression (indirect activation)



# Summary Paper 2



- Establishment of a tool using small molecules for gene activation *in vitro*
- Successful dose-dependent activation of endogenous/ transgene expression using CRISPR and CEMs
- Reversible and competeable system which may be useful for *in vivo* gene therapies
- Low expressing genes can be activated similarly to established CRISPR activators
- Possible indirect activation of genes (e.g. MYOD1)



- No data regarding bioavailability/toxicity of CEMs since only *in vitro* data published
- Highly expressed genes are difficult to activate/control with the CEMa system

### 3.) Conclusions

- Successful implementation of reversible switches and regulators harnessing antisense oligonucleotides and small molecules
- Efficient and safe regulation of (trans)gene expression may allow the use of modern gene therapies in various (human) diseases in the future

**Thank you for your attention**