

Next-Generation Antisense Oligonucleotides Targeting TGF- β mRNAs

Frank JASCHINSKI, Hanna KORHONEN, Stephan BRAUN, Andreas MITSCH, Tanja ROTHHAMMER-HAMPL & Michel JANICOT

Isarna Therapeutics. Munich. Germany (www.isarna-therapeutics.com)

BACKGROUND: Transforming Growth Factor beta isoforms (TGF- β 1, - β 2 and - β 3) are cytokines encoded by different genes but sharing strong and structure homology (Fig. 1A). TGF- β has been shown to play critical and pleiotropic roles in the biology of several human diseases. In particular, the different TGF- β isoforms are overexpressed to various degrees in many cancers in a spatio-temporal manner. Correlations between expression, disease stage and clinical parameters have been reported and over-expression linked to poor prognosis. TGF- β is associated with a wide range of biological processes in oncology including tumor cell invasion and migration, angiogenesis, immunosuppression, as well as regulation of tumor stem cells properties (Fig. 1B). Hence, selectively blocking the TGF- β signaling pathways via antisense oligonucleotide-mediated inhibition of TGF- β expression may have a multifold therapeutic benefit. Isarna Therapeutics^(S) has launched an extensive discovery program for the identification of novel potent 'next-generation' antisense oligodeoxynucleotides (ASOs) based on the various TGF- β isoform mRNA sequences. Several hundreds of ASOs selectively targeting TGF- β 1 or TGF- β 2 mRNA, or simultaneously targeting both TGF- β 1 and TGF- β 2 (dual 'inhibitors') or all three TGF- β isoforms (*pan-specific* 'inhibitors') have been designed, produced (with a wide range of nucleotide chemical modifications^(S9) and Gap-mer structures) and tested in various cell-based assays and animal xenograft models.

(S) : formerly Antisense Pharma

(S9) : company is working under a license from Santaris Pharma

Figure 1A : TGF- β mRNA (a) and protein (b) sequence and structure homologies between isoforms and across species.

Only three bonafide TGF- β s (TGF- β 1, - β 2 and - β 3) that are distinguished from the rest of the TGF- β superfamily by being the only ligands that bind to and signal via the type II TGF- β receptor (TbRII)

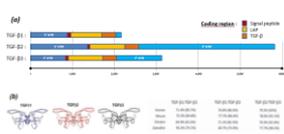
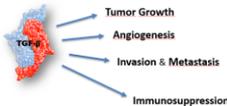


Figure 1B : TGF- β represents an attractive therapeutic target that has multi-modal cancer-promoting effects.

In human:
- Largely overlapping functions
- Different spatial and temporal expression patterns
- Overexpression in many tumors



EXPERIMENTAL DESIGN

In vitro experiments: Human A-172 glioma or Panc1 pancreatic carcinoma cells – maintained in 2D cell culture – were treated with the indicated ASO concentrations by either lipofectamine-aided lipofection or gymnotic delivery for the indicated treatment periods. Subsequently cells were lysed and analyzed for TGF- β mRNA expression using the bDNA assay. TGF- β mRNA levels were normalized to corresponding GAPDH mRNA levels. IC₅₀ values from dose-response experiments were obtained using the program XLfit.

In vivo experiments: Human 786-O renal cancer cells or Panc1 pancreatic cancer cells were implanted in the flank of CB17 SCID or Balb/c nude mice, respectively. Mice with established subcutaneous tumors (150-300 mm³) were treated subcutaneously with the indicated doses of TGF- β 2 specific ASOs daily for five consecutive days. Animals were sacrificed 24 hr after the last administration, and TGF- β mRNA levels were determined in tumors using the bDNA assay. TGF- β mRNA levels were normalized to corresponding GAPDH mRNA expression levels.

Figure 2 : LNA-modified ASO gapmers are more potent than ENA-gapmer counterparts in suppressing TGF- β 2 mRNA expression after lipofection as well as after gymnotic delivery in cell-based assays

LNA- or ENA-modified ASO gapmers of different lengths (13mer, 14mer, 16mer and 17mer) directed against the TGF- β 2 mRNA were tested in human A-172 glioma cells after lipofection (Top), and in human Panc-1 cells after gymnotic delivery (Bottom). TGF- β 2 mRNA levels were determined 24 hr (lipofection) or 72 hr (gymnotic) after start of transfection. IC₅₀ values for the 13mer and 16mer ENAs after gymnotic transfection could not be calculated from dose-response experiments (up to 10 μ M)

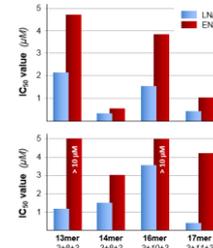
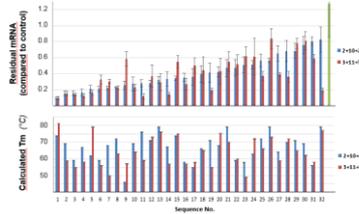


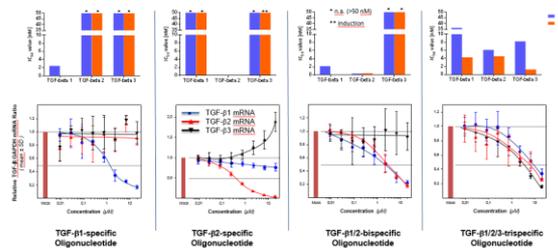
Figure 3 : ASO sequence and modification pattern determine potency of LNA-modified ASOs in cell-based assays

14mer ASO sequences specific for the TGF β 2 mRNA modified either using a 2+10+2 LNA-gapmer, or a 3+11+2 gap modification pattern were transfected by lipofection (10 nM) into human A-172 glioma cells. TGF- β 2 mRNA levels were determined 24 hr after start of lipofection.



Theoretical melting temperatures (Tm) were calculated using the LNATM Oligo Tm Prediction Tool from Exiqon

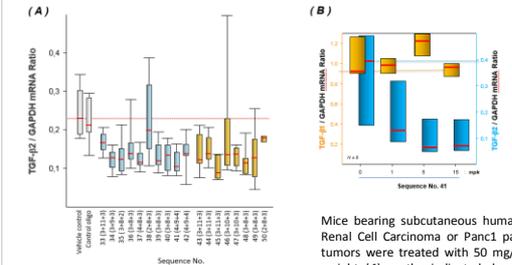
Figure 4 : LNA-modified ASOs potently and specifically suppress mRNA of TGF- β isoforms after lipofection and after gymnotic delivery



Top panels: Human A-172 glioma cells were treated with different concentrations of LNA-modified ASOs by lipofection. TGF- β mRNA levels were determined 7 or 24 hr after start of transfection. IC₅₀ values are shown.

Lower panels: Human Panc-1 pancreatic cancer cells were treated with different concentrations of LNA-modified ASOs by gymnotic delivery. TGF- β mRNA levels were determined 96 hr after start of delivery.

Figure 5 : TGF- β 2 specific ASOs potently and specifically suppress TGF- β 2 mRNA in human 786-O RCC (A) or Panc1 pancreatic (B) subcutaneous tumor models



Mice bearing subcutaneous human 786-O Renal Cell Carcinoma or Panc1 pancreatic tumors were treated with 50 mg/kg body weight (A) or the indicated doses (B) of TGF- β 2 specific ASOs daily, s.c., for five consecutive days. Animals were sacrificed 24 hr after last administration and tumor TGF- β 2 mRNA levels were determined

SUMMARY

In cell-based assays:

- LNA-modified ASOs have higher potency (downregulation of target mRNA) than ENA-modified counterparts
- Comparison of different modification patterns show high contribution of sequence for efficacy with modulating effect of modification pattern in some cases
- Most active LNA-modified ASOs potently and specifically suppress the different TGF- β isoforms with IC₅₀ values in the picomolar range (lipofection) and submicromolar range (gymnotic delivery)

In xenograft models:

- After systemic subcutaneous administration, LNA-modified ASOs targeting TGF- β 2 potently and selectively suppress target mRNA expression in established subcutaneous tumors (and in kidneys, data not shown) at doses in the single-digit mg per kg body weight range

CONCLUSIONS & PERSPECTIVES

1. TGF- β isoforms represent attractive molecular targets for therapeutic intervention in Oncology (multi-modal cancer-promoting effects)
2. We have designed highly selective 'next-generation' ASOs targeting TGF- β isoforms with demonstrated high potency in cell-based assays and in several human xenograft models (TGF- β 2)
3. Highly potent and selective TGF- β ASO molecules could provide tool agents and novel therapeutic opportunities for antagonism of the multiple tumor-promoting effects of TGF- β

The authors wish to acknowledge Axolabs (Kulmbach, Germany) and Oncadesign (Dijon, France) for the quality of their technical contribution in the presented studies; and Dr. Eugen Uhlmann for expert advices in oligonucleotide design

ISARNA
THERAPEUTICS