Ignore the stop: translation read-through of nonsense mutations in Usher syndrome genes

Kerstin Nagel-Wolfrum



Department of Cell & Matrix Biology Institute of Zoology Johannes Gutenberg University of Mainz Germany nagelwol@uni-mainz.de



#USH2014

International Symposium on Usher Syndrome

July 10-11, 2014

6th Annual Usher Syndrome Family Conference

July 12, 2014



BOSTON, MASSACHUSETTS, USA

Human Usher syndrome (USH)

- USH is the most common form of combined hereditary deaf-blindness.
- Prevalence: ~ 1:6,000
- Autosomal recessive disorder
- Symptoms:
 - Hearing impairment
 - Vestibular dysfunction
 - Vision loss Retinitis pigmentosa
- 3 clinical types (USH1-3) based on severity, age of onset and progression of symptoms.



- 10 USH causing genes are identified.
- USH proteins are members of different protein families.



Diagnosis and treatment of USH patients

OCT

Hearing impairment: newborn screening



Vision loss: diagnosed in puberty

fundus photography





autofluorescence



USH1C patient, 35 year male (right eye)

Becker et al., in prep

Currently no therapy for vision loss in USH.

http://www.shv-muenchen.de/technik/allgemeine-infos/ci

Therapy:

cochlea implant



Successful gene therapy approaches in LCA2 patients using AAV

Gene Therapy for Leber Congenital Amaurosis Caused by RPE65 Mutations

Safety and Efficacy in 15 Children and Adults Followed Up to 3 Years

Samuel G. Jacobson, MD, PhD; Artur V. Cideciyan, PhD; Ramakrishna Ratnakaram, MD; Elise Heon, MD; Sharon B. Schwartz, MS, CGC; Alejandro J. Roman, MS; Marc C. Peden, MD; Tomas S. Aleman, MD; Sanford L. Boye, MS; Alescander Sumaroka, PhD; Thomas J. Conlon, PhD; Roberto Calcedo, PhD; Ji-Jing Pang, MD, PhD; Kirsten E. Erger, BS; Melani B. Olivares, BA; Cristina L. Mullins, BA; Malgorzata Swider, PhD; Shalesh Kaushal, MD, PhD; William J. Feuer, MS; Alessandro Iannaccone, MD, MS; Gerald A. Fishman, MD; Edwin M. Stone, MD, PhD; Barry J. Byrne, MD, PhD; William W. Hauswirth, PhD

Effect of Gene Therapy on Visual Function in Leber's Congenital Amaurosis

James W.B. Bainbridge, Ph.D., F.R.C.Ophth., Alexander J. Smith, Ph.D., Susie S. Barker, Ph.D., Scott Robbie, M.R.C.Ophth., Robert Henderson, M.R.C.Ophth., Kamaljit Balaggan, M.R.C.Ophth., Ananth Viswanathan, M.D., F.R.C.Ophth., Graham E. Holder, Ph.D., Andrew Stockman, Ph.D., Nick Tyler, Ph.D., Simon Petersen-Jones, Ph.D., Shomi S. Bhattacharya, Ph.D., Adrian J. Thrasher, Ph.D., M.R.C.P., F.R.C.P., Ered W. Eitzke, Ph.D., Barrie L. Carter, Ph.D., Gary S. Rubin, Ph.D.

Gene addition for RP in USH have some hurdles: - several USH genes are large in size and - most are expressed in different isoform.

Sharon B. Schwartz,³ Lili Wang,⁴ Thomas J. Conlon,¹ Sanford L. Boye,¹ Terence Ř. Flotte,⁵ Barry J. Byrne,^{1,2} and Samuel G. Jacobson³

Gene Therapy for Leber's Congenital Amaurosis is Safe and Effective Through 1.5 Years After Vector Administration

Francesca Simonelli^{1,2}, Albert M Maguire³⁻⁵, Francesco Testa¹, Eric A Pierce^{3,5}, Federico Mingozzi⁴, Jeannette L Bennicelli^{3,5}, Settimio Rossi¹, Kathleen Marshall⁴, Sandro Banfi², Enrico M Surace², Junwei Sun⁴, T Michael Redmond⁶, Xiaosong Zhu⁴, Kenneth S Shindler^{3,5}, Gui-Shuang Ying³, Carmela Ziviello^{2,7}, Carmela Acerra^{1,2,4}, J Fraser Wright^{4,5}, Jennifer Wellman McDonnell⁴, Katherine A High^{4,5,8}, Jean Bennett^{3,4} and Alberto Auricchio^{2,9}

Edward N. Pugn, Jr., Ph.D., Federico Mingozzi, Ph.D., Jeannette Bennicelli, Ph.D.,
Sandro Banfi, M.D., Kathleen A. Marshall, C.O.T., Francesco Testa, M.D.,
Enrico M. Surace, D.V.M., Settimio Rossi, M.D., Arkady Lyubarsky, Ph.D.,
Valder R. Arruda, M.D., Barbara Konkle, M.D., Edwin Stone, M.D., Ph.D.,
Junwei Sun, M.S., Jonathan Jacobs, Ph.D., Lou Dell'Osso, Ph.D.,
Richard Hertle, M.D., Jian-xing Ma, M.D., Ph.D., T. Michael Redmond, Ph.D.,
Xiaosong Zhu, M.D., Bernd Hauck, Ph.D., Olga Zelenaia, Ph.D.,
Kenneth S. Shindler, M.D., Ph.D., Maureen G. Maguire, Ph.D., J. Fraser Wright, Ph.D.,
Nicholas J. Volpe, M.D., Jennifer Wellman McDonnell, M.S., Alberto Auricchio, M.D.,
Katherine A. High, M.D., and Jean Bennett, M.D., Ph.D.



Sizes and isoforms of USH genes

USH type	Locus	Gene	cDNA	Protein
USH1B	11q13.5	MYO7A	6.6 kb	Myosin VIIa
USH1C	11p14-15	USH1C	2.6 kb; isoforms	Harmonin
USH1D	10q21-q22	CDH23	10.8 kb; isoforms	Cadherin 23
USH1E	21q21			
USH1F	10q11.2-q21	PCDH15	9 kb; isoforms	Protocadherin 15
USH1G	17q24-25	SANS	1.3 kb; isoform	SANS
USH1H	15q22-23			
USH1J	15q23-q25.1	CIB2	561 bp; isoforms	CIB2
USH2A	1q41	USH2A	15.6 kb; isoforms	USH2A (Usherin)
USH2C	5q13	GPR98	18.9 kb; isoforms	GPR98 (VLGR1b)
USH2D	9q32-q34	DFNB31	4 kb; isoforms	Whirlin
USH3A	3q25	CLRN1	699 bp; i soforms	Clarin-1
atypical USH	20q32.3	CEP250	7.3 kb; isoforms	Cep250
atypical USH	2p23.2	C2orf71	3.9 kb	C2orf71

Harmonin (USH1C) in human retina



PDZ-domain: protein-protein interaction; coiled coil domain: dimerization; PST domain: actin bundeling



RT-PCR

•	-	•
harmonin isoform	RT-PCR	RNAseq
a1	\checkmark	-
a2	na	\checkmark
а3	\checkmark	-
a4	\checkmark	\checkmark
a5	na	\checkmark
b 1-4	\checkmark	\checkmark
c1	\checkmark	\checkmark
c3	✓	-
c4	\checkmark	-
a4 a5 b 1-4 c1 c3 c4	na ✓ ✓ ✓ ✓	✓ ✓ ✓ − −

next generation sequencing

Western blot analysis



USH1C is expressed in various isoforms in human retina

Alternative gene-based therapy strategy?

12-20% disease causing nonsense mutations in USH genes.

Strategies for targeting nonsense mutations are promising.

(see Poster # 17 and # 33)



Read-through of nonsense mutations by translational read-through inducing drugs (TRIDs)



nonsense mutation induces premature stop codon



TGA/STOP

non-functional protein **Usher syndrome**



TRIDs	example	advantage - disadvantage
Aminoglycosid antibiotics	Gentamyicin Paromomycin	 clinically applied as antibiotics high read-through efficacy oto- and nephrotoxizität
Designer aminoglycosids	NB30 NB54 NB84 NB124	 improved biocompatibility continues improvement resulted in increased read-through efficacy not tested in humans
Chemical compound	PTC124	 well tolerated in human Phase III for patients suffering Duchenne/Becker Muscular Dystrophy and cystic fibrosis unknown if PTC124 pass blood- retina barrier







Proof of principle: p.R31X nonsense mutation in *USH1C*





Goldmann et al. (2012) EMBO Mol Med 4:1186-99

TRIDs induced read-through of USH1C



Recovery of harmonin's scaffold function following TRIDs application



Goldmann et al. (2012) EMBO Mol Med 4:1186-99

JGU MINES GUTENBERG

Recovery of harmonin b's actin filament bundling activity following TRIDs application



harmonin b_p.R31X-FLAG + NB54



anti-FLAG

F-actin

merged

Goldmann et al. (2011) Hum Gen Ther; (2012) EMBO Mol Med



TRIDs biocompatibility of human retinal cells



TRIDs application, culture retina for 3 days, analyses of biocompatibility/toxicity:

- histology (molecular markers)
- apoptosis (TUNEL)

Reidel et al., 2006, 2008; Goldmann 2010, 2011, 2012



No increase of apoptotic cells in human retinal explants following NB54 and PTC124 application





No increase of apoptotic cells in human retinal explants following NB54 and PTC124 application





TRIDs induced read-through in vivo

Problem: no USH animal model carries a nonsense-mutation

Currently applied method:



Subretinal injection of an harmonin-p.R31X construct

Electroporation

6 weeks later: subretinal injection of TRIDs

3 days later: detection of recovered protein expression: immunofluorescence and Western blot analyses



Matsuda & Cepko (2006)

Recovered harmonin expression *in vivo* in the murine retina



Goldmann et al. (2012) EMBO Mol Med 4:1186-99

JOHANNES GUTENBERG UNIVERSITÄT MAINZ

Recovered harmonin expression in vivo in the murine retina



Goldmann et al. (2012) EMBO Mol Med 4:1186-99

JGU INNES GUTENBERG

Summary

- Designer aminoglycosides (NBs) and PTC124 have an excellent retinal biocompatibility.
- Read-through of USH1C has been demonstrated in cell culture, organotypic retina cultures and *in vivo*.
- TRIDs induce the read-through of various nonsense mutations in cell culture causing USH, including: USH1C, USH1D, USH1F, USH2A, USH2C, CLRN.

TRIDs have a high potential as therapeutics for the treatment of retinal degenerations caused by nonsense mutations.



Work in Progress - Prospects

Animal model for USH nonsense mutation

Nphp4nmf1192/nmf1192 rd/ciliopathy mouse model; in frame nonsense mutations (Won et al. 2011)

Larger animal model: transgenic USH (mini)pig carrying a nonsense mutation.



- systemic (intravenous, intraperitoneal injection, oral)
- local applications (subretinal injection, eye pump, intravitreal depots, eye drops,)
 - e.g. START PTC124 formulation for topic application. Gregory-Evens et al. (2014) *J Clin Invest.* 124:111-116

The USH therapy team, MZ Kerstin Nagel-Wolfrum T. Goldmann

- N. Overlack
- **F. Möller** Poster #17
- I. Penner
- M. Becker
- A. Samantha
- U. Wolfrum

(**P**RO **R**ETINA

DFG

S. Bolz, E. Sehn,
 G. Stern-Schneider, U.

Maas

Thank you!

<u>Collaboration</u>

T. Bassov, Haifa, Israel

- T. Ben-Yosef, Haifa, Israel
- J. Vetter, Mainz, Germany
- B. Wissinger, Tübingen, Germany EUR-USH members (<u>www.EUR-</u> USH.eu)

Poster #33





Desic research and therapeutic applications



Young investigator consortium: EUR-USH

Kerstin Nagel-Wolfrum JGU Mainz Eduardo da Silva, IBILI Sérgio Leal, AIBILI

Ieva Sliesoraityte INSERM Christel Vaché, INSERM

Erwin van Wijk Radboud University Nijmegen Ana Fakin

Ana Fakin University Medical Centre Ljubljana

Welcome (Kick-off EUR-USH

September, 12th - 13th 2013, Nijmegen, The Netherlands





Contact: nagelwol@uni-mainz.de Poster #33