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Adapter Based Strategies For Adenovirus Vector Retargeting To T Lymphocytes

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ADAPTER BASED STRATEGIES FOR ADENOVIRUS VECTOR RETARGETING TO T LYMPHOCYTES

by

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A DISSERTATION

Submitted to the graduate faculty of The University of Alabama at Birmingham, in partial fulfillment of the requirements for the degree of Doctor of Philosophy

BIRMINGHAM, ALABAMA

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ADAPTER BASED STRATEGIES FOR ADENOVIRUS VECTOR RETARGETING TO T LYMPHOCYTES

MATTHEW S. BEATTY

MOLECULAR AND CELLULAR PATHOLOGY

ABSTRACT

Adenoviruses are the most commonly used gene therapy vector for cancer therapy clinical trials. While adenovirus has shown a great track record in a variety of cancer therapeutics it has not progressed as a vector system for the modification of T lymphocytes. One of the major roadblocks towards utilizing adenovirus for T cell therapy is the lack of coxsackie virus and adenovirus receptor on the cell surface of T cell lineages.

Exploitation of alternative receptors has allowed adenovirus vectors to be utilized in a variety of cell types that native adenovirus type 5 cannot infect. Thus, retargeting adenovirus to an alternative receptor expressed on T cells should allow for increased infectivity and full utilization of adenovirus as a gene therapy vector. There are a variety of retargeting strategies employed to retarget adenovirus to alternative cell types. Of the strategies available, we utilized the adapter-based strategy to retarget adenovirus to T cells. This strategy has a variety of advantages including its rapid development, lack of interference with adenovirus biology and assembly, and the ability to utilize secreted biological ligands.

Within, we describe how resistance to adenovirus infection observed in T cells can be overcome utilizing a bi-specific adapter, sCAR-mIL-2, which retargets adenovirus to the murine interleukin 2 receptor. This adapter shows excellent ability to promote adenovirus infection in a murine T cell line, an increase was also observed in isolated

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primary murine T cells. These results show that alternative targeting strategies can bypass native biology and allow for the utilization of adenovirus in genetically modifying T cells for therapy.

ACKNOWLEDGMENTS

I would like to thank my mentor, Dr. David T. Curiel for his guidance and support. I would also like to thank my committee members, Drs. Joel Glasgow, Zdenek Hel, John Mountz, and Gene Siegal. I would also like to thank Dr. Alexander Pereboev. Dr. Pereboev was instrumental in the planning and early stages of developing the sCARmIL-2 and sCAR-hIL-2 adapters. Dr. Pereboev passed away before this work was completed, he will be greatly missed. Lastly, I would like to thank Drs. Hideyo Ugai, and Igor Dmitriev, as well as past and present members in Dr. Curiel's lab for their contributions, guidance, and friendship. I would also like to thank my wife, Kendal, my family, and my friends for their constant love and support.

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CHAPTER I

INTRODUCTION

Adenovirus

Among gene therapy based clinical trials, adenovirus is still the most widely used vector technology [\(1\)](#page-114-0) (http://www.wiley.co.uk/genmed/clinical/). These human adenoviruses, of the genus Mastadenovirus, were first isolated from human adenoids in the 1950s [\(2\)](#page-114-1). Currently, at least 57 serotypes (Table I) of human adenoviruses (HAdVs) have been identified and grouped into seven species (A-G) [\(3-5\)](#page-114-2).

Tuble 1. Chassilication of human addition in as server pes			
Species	Serotypes	Sites of Infection	Receptor(s)
\mathbf{A}	12, 18, 31	Gastrointestinal tract	CAR
B	3, 7, 11, 14, 16, 21, 34, 35, 50, 55	Lung, Urinary tract	CD46, CD80, CD86
	1, 2, 5, 6, 57	Upper respiratory tract	CAR
D	8, 9, 10, 13, 15, 17, 19, 20, 22, 23, 24, 25, 26, 27, 28, 29, 30, 32, 33, 36, 37, 38, 39, 42, 43, 44, 45, 47, 48, 49, 51, 53, 54, 56	Eye, Gastrointestinal tract	CAR, Sialic Acid, CD46
E	$\overline{4}$	Respiratory tract	CAR
F	40, 41	Gastrointestinal tract	CAR
G	52		

Table I. Classification of human adenovirus serotypes

Adenovirus structure and replication

The adenovirus is composed of an icosahedral capsid that is about 920 angstroms in diameter [\(6\)](#page-114-3). This non-enveloped virion is composed of multiple copies of both major and minor structural proteins. The three major proteins include hexon (II), penton base (III), and fiber (IV). The minor proteins encompass proteins IIIa, VI, VIII, and IX [\(6,](#page-114-3) [7\)](#page-114-4). The adenovirus genome is composed of 30-40 kb of linear, double-strand DNA within the capsids core. This DNA is complexed with five additional proteins (V, VII, mu, Iva2, and terminal protein) that together makeup the genome core [\(8\)](#page-114-5) (Figure 1).

The process of HAdV infection (Figure 2) is initiated through receptor-mediated interactions with the host cell. Most of the HAdV serotypes bind to the coxsackie virus and adenovirus receptor (CAR). Roelvink et al. showed that adenovirus from species A, C, D, E, and F all bound to CAR [\(9\)](#page-114-6). Species B HAdVs and HAdV-37, however, have been reported to utilize CD46 [\(10-15\)](#page-114-7) as a cellular attachment receptor. Additionally, adenoviruses HAdV-8, -19 and -37 of species D have been reported to utilize $\alpha(2-3)$ linked sialic acid as a cellular receptor [\(16-19\)](#page-115-0). Following initial binding to the primary receptor, HAdVs require a secondary interaction of the arg-gly-asp (RGD) motif on the viral penton base with αvβ3 and αvβ5 integrins [\(20\)](#page-115-1). This binding promotes virus internalization through clathrin mediated endocytosis [\(21\)](#page-115-2). Acidification of the endosome leads to a partial disassembly of the capsid proteins and a release of fiber, penton base and protein VI [\(22,](#page-115-3) [23\)](#page-115-4), facilitating escape of viral particles into the cytoplasm. Once in the cytoplasm, viral particles interact with motor proteins, such as dynein, to travel along microtubules to the nucleus [\(24-27\)](#page-116-0). Subsequently, viral capsid uncoating through

interactions with nuclear pore proteins and kenesin-1 allows for the viral genome to be imported into nucleus [\(28\)](#page-116-1).

The Ad genome is comprised of two groups of genes that control replication. The early transcription unit (E1A, E1B, E2, E3 and E4) is transcribed during the early phase of viral replication, while the major late unit (L1 to L5) is transcribed during the late phase of viral replication (Figure 3). The E1A protein is responsible for a variety of early transcript regulation in addition to regulating host cell gene expression and proliferation. E1A, binding to the retinoblastoma (Rb) protein, releases E2F which then activates viral and cellular gene expression [\(29\)](#page-116-2). Additionally, E1A also regulates cell division through interactions with both NF-κB and p53. E1B binds to p53, Bax, other cellular proteins to inhibits apoptosis [\(29\)](#page-116-2). The E2 transcription unit transcribes viral proteins responsible for viral DNA replication. These include DNA polymerase (Ad Pol), preterminal protein (pTP) and DNA binding protein (DBP). Proteins in E3 function to interfere with host immune responses [\(30\)](#page-116-3). Lastly, the E4 transcription unit is responsible for down regulation of cellular protein synthesis, inhibition of apoptosis, viral DNA replication, viral mRNA transport, and mRNA splicing [\(31\)](#page-116-4).

The major late promoter (MLP) is responsible for the production of the late transcription unit. This group of genes includes the adenoviral structural proteins that comprise the capsid and aid in assembly. The major-late pre-mRNA sequences contain a tripartite leader sequence (TPL) at the 5' end. This leader is responsible for efficient translation of these proteins [\(32\)](#page-116-5). Following translation, the adenoviral capsid proteins are imported into the nucleus where viral assembly occurs.

Adenovirus fiber

Attachment of adenovirus to its host cell is achieved through binding of the adenoviral fiber protein to its cognate receptor. Harisse et al. first analyzed the adenovirus fiber sequence [\(33\)](#page-116-6), as being comprised of three domains: tail, shaft, and knob. The tail domain is responsible for attachment of the fiber protein to the viral capsid through interactions with penton base protein. This region is also responsible for targeting of fiber to the nucleus during assembly.

The shaft domain is comprised of a number of repeated sequence motifs containing two β-strands. These repeats form a highly stable triple-beta spiral. A wide variation of shaft lengths is found among adenovirus serotypes [\(34\)](#page-116-7). The shaft domain is also responsible for the flexibility seen in the fibers of some adenovirus serotypes. Located in the third repeat of the shaft is a four amino acid insertion. Serotypes from species A, C, and E possess this insertion, providing flexibility, while inflexible fibers from certain species D adenoviruses lack this insertion [\(35\)](#page-116-8).

The knob domain is responsible for primary receptor binding. X-ray crystallography studies have shown that the knob domain is comprised of two antiparallel β-sheets. Within these sheets are six loop structures: AB, CD, DG, GH, HI, and IJ [\(36,](#page-116-9) [37\)](#page-117-0). Of these loops, loop AB was determined, by mutagenesis studies [\(38\)](#page-117-1) and crystal structure [\(39\)](#page-117-2), to be responsible for CAR binding. In addition to receptor binding, the knob domain also contains a trimerization motif that is crucial for tertiary fiber structure. The trimerization of the fiber occurs without additional proteins and is required for docking with penton base [\(40-43\)](#page-117-3).

Coxsackie virus and adenovirus receptor

The coxsackie virus and adenovirus receptor (CAR) is utilized by a wide variety of HAdV serotypes from species A, C, D, E, and F [\(9\)](#page-114-6). CAR was first identified as a receptor for HAdV serotypes 2 and 5 by Bergelson et al. [\(44\)](#page-117-4) Although CAR has a predicted molecular weight based on amino acid sequence of approximately 38kDa, CAR has been shown to migrate on sodium dodecyl sulfate (SDS) polyacrylamide gels at a molecular weight of approximately 46 kDa [\(45\)](#page-117-5). This is likely a product of posttranslational glycosylation.

CAR is a transmembrane protein, comprised of a cytoplasmic domain of 107 amino acids and an extracellular domain of 216 amino acids. This extracellular domain includes two immunoglobulin-like domains, D1 and D2, of which HAdV binds to D1 through residues in the AB loop of the knob domain [\(38,](#page-117-1) [39\)](#page-117-2). Due to the trimerized structure of HAdV fiber, multiple CAR molecules can bind to each fiber. When bound in such fashion this interaction is shown to have a high affinity [\(20\)](#page-115-1).

Biologically, CAR is found in tight junctions of polarized epithelial cells [\(46,](#page-117-6) [47\)](#page-117-7). CAR distribution in humans has been shown to be highest in the brain, heart, pancreas, prostate, small intestine, and testis, with lower amounts in the liver and lung [\(48\)](#page-117-8). CAR is also found in normal tissue of mice. However, the distribution varies with the highest amounts found in the heart, kidney, liver, and lung, and lower amounts in the brain [\(48\)](#page-117-8).

T Lymphocytes

CD4⁺ T cells

T lymphocytes of the CD4⁺ lineage play an important role in immune protection. This T cell lineage coordinates an immune response through aiding B cells in antibody production, inducing macrophages, recruiting neutrophils, eosinophils, and basophils, and modulating immune responses through the production of cytokines and chemokines. The work of classifying CD4⁺ T cells began when Mosmann et al. subdivided CD4⁺ T cells into those that made interferon-gamma (IFN- γ) and those that produced interleukin (IL)-4 [\(49\)](#page-117-9).

CD4⁺ T cells were originally classified into Th1 and Th2 cells, with further classifications developed later. Th1 cells play a critical role in mediating immune responses against intracellular pathogens [\(50,](#page-118-0) [51\)](#page-118-1) and are responsible for induction of some autoimmune diseases. Of the cytokines produced, IFN- γ , lymphotoxin α (LT α), and IL-2 are crucial to their role. IFN- γ plays a role in promoting macrophage activation through binding to IFN-γ receptors on the cell surface of macrohphages [\(52\)](#page-118-2). IL-2 is important for both the development of $CD4^+$ memory T cells [\(53\)](#page-118-3) and the stimulation of CD8⁺ T cells [\(54\)](#page-118-4). Additionally, Th1 cells are also distinguished by their expression of IL-12 receptor. IL-12 receptor is upregulated by T Cell Receptor (TCR) activation and IFN-γ [\(55,](#page-118-5) [56\)](#page-118-6).

While Th1 cells are responsible for intracellular pathogens, Th2 cells mediate immune responses against extracellular parasites. These cells have also been found to be important in the induction of asthma and other allergy based diseases [\(50,](#page-118-0) [51\)](#page-118-1). Th2 cells express a wide variety of cytokines including IL-4, IL-5, IL-10, IL-13, and IL-25. IL-4 acts as a positive feedback cytokine and is responsible for Th2 differentiation [\(57\)](#page-118-7). IL-4 also aids the IgE class switching in B cells.

Th17 T cells. A relatively new lineage of Th cells, labeled Th17, are responsible for immune responses against extracellular bacteria and fungi [\(58\)](#page-118-8) and have been linked to many autoimmune diseases. This T cell lineage differs from the typical Th1/Th2 lineages in that it does not express the "classical" helper T cell cytokines and can be inhibited by cytokines such as IL-4 and IFN- γ . These cells are induced in the presence of IL-6 and TGF-β. Identifying characteristics of this lineage include expression of IL-21, IL-17, IL-22, and other cytokines. In addition, the gene $ROR\gamma t$ has been identified as a master regulator of Th17 cells [\(59,](#page-118-9) [60\)](#page-118-10).

Regulatory T cells. Regulatory T cells play an important role in regards to maintaining self-tolerance and regulating immune response [\(61\)](#page-118-11) through a variety of mechanisms. This ability to balance the immune response makes Treg cells an interesting target for therapeutic manipulation. When Treg cells are increased their suppression of immune response may be beneficial in treating autoimmune diseases. On the other hand, depletion of Treg cells may promote increased immunity against cancer and chronic infectious diseases. These cells have been found to express high amounts of CD25, a subunit of the IL-2 receptor [\(61\)](#page-118-11), and are reported to be transcriptionally regulated by Foxp3 [\(62,](#page-118-12) [63\)](#page-119-0).

CD8⁺ T cells

CD8⁺ T cells are responsible for providing protection against intracellular pathogens that utilize the host-cell cytoplasm in order to evade inactivation by host antibodies. This T cell subset is responsible for cell-mediated lysis of target cells and was

first elucidated from tumor transplant models and allogeneic lymphocyte cultures [\(64-](#page-119-1) [66\)](#page-119-1). Post infection, naïve $CD8⁺$ T cells are primed by antigen-presenting cells (APCs), such as macrophages and dendritic cells, in secondary lymphoid regions [\(67,](#page-119-2) [68\)](#page-119-3). Following activation, $CD8^+$ T cells go through an expansion of up to 500,000 fold [\(69\)](#page-119-4). To achieve this expansion CD8⁺ T cells utilize a variety of signals, including TCR, costimulatory, and inflammatory cytokines [\(70,](#page-119-5) [71\)](#page-119-6). Upon activation and expansion $CD8⁺$ T cells are able to migrate to peripheral tissues through up regulation of CXCR3. Expression of CXCL3 allows CD8⁺ T cells to respond to inflammatory signals from CXCL9 and CXCL10.

Interleukin 2 Pathway

The effects of interleukin 2 were first discovered when Morgan et al. [\(72\)](#page-119-7) and Gilles et al. [\(73\)](#page-119-8) described the proliferative effect of culture from activated T cells on antigen-activated T cells. Following studies showed that this effect was in fact due to a single molecule and was assigned the nomenclature interleukin 2 [\(74\)](#page-119-9).

Interleukin 2

IL-2 is located on chromosome 4 in humans and chromosome 3 in mice. Similar to other cytokines, IL-2 is transcriptionally controlled by multiple factors. Upon interaction of the T cell antigen receptor with MHC/antigen complex on the surface of antigen presenting cells, a multitude of signals are triggered that lead to transcription of IL-2 and other cytokines [\(75\)](#page-119-10). The T cell antigen receptor triggers transcription factors NFAT [\(76,](#page-119-11) [77\)](#page-120-0), NF-κB [\(78\)](#page-120-1), and AP-1 [\(79\)](#page-120-2) through a phospholipase C (PLC) γ -

dependent pathway. For optimal expression, signals from other co-stimulatory receptors such as CD-28 are needed [\(80\)](#page-120-3). IL-2 is also controlled at the mRNA level. Within the IL-2 message are several AU-rich elements that target the transcript for degradation. This is characteristic of a variety of cytokines such as IL-6, GM-CSF, and IL-3 [\(81\)](#page-120-4).

IL-2 is structurally similar to other type 1 cytokines in that it is composed of four α-helical bundles in an up-up-down-down orientation (Figure 4). IL-2 contains an essential disulphide bond which provides structural stability. In addition to its translated structure, IL-2 also shows signs of O-linked glycosylation. The functional properties of this glycosylation are not known but it is not required for biological activity [\(82\)](#page-120-5).

Interleukin 2 receptor

The IL-2 receptor is made up of three subunits: IL-2 R α (CD25), IL-2 R β (CD122) and the common gamma chain (CD132). The gamma chain (γ c) subunit is a commonly expressed subunit. It is found in virtually all hematopoietic cell types and is used by the IL-4, IL-7, IL-9, IL-15, and IL-21 receptors [\(83,](#page-120-6) [84\)](#page-120-7). CD122 is expressed on only a few immune cell types including NK cells, NKT cells, memory CD8⁺ cells, and Foxp3⁺ T regulatory cells. Its expression, however, is induced on antigen activated T cells. While IL-2 has been shown to bind to these two subunits, it is unlikely that this binding is biologically relevant as mouse models that only express these two subunits have the same phenotype as IL-2 knockout models [\(85,](#page-120-8) [86\)](#page-120-9). While most cells do not express CD25, activation of naïve T cells causes a transient expression of CD25 in a twostep process. First, TCR and costimulatory signals cause CD25 expression to be induced

[\(87\)](#page-120-10). Following this, IL-2 then promotes increased levels of expression through a positive feedback loop.

All 3 subunits are required for the high-affinity IL-2 receptor. First IL-2 binds to CD25. This interaction then causes IL-2 and CD25 to associate with CD122 and γc. Once this quaternary complex forms, IL-2 induces signaling through the cytoplasmic tails of CD122 and γc. These signals lead to an activation of mitogen-activated protein kinase (MAPK), phosphotiylinositol 3-kinase (PI3K), and Stat 5 and 3 pathways. MAPK and PI3K pathways promote cell growth and survival [\(83,](#page-120-6) [88\)](#page-120-11) while Stat pathway activation regulates genes important in T cell growth and function. Once IL-2 binds to the high affinity receptor it is rapidly internalized, having a half-life of ten to twenty minutes. While IL-2, CD122, and γc are targeted for lysosomal degradation, CD25 is recycled back to the cell surface [\(89-92\)](#page-120-12).

IL-2 in activated T cells

In vitro studies have shown that IL-2 signaling enhances the initial response of T cells, the number of memory T cells that develop, and the ability to recall proliferation [\(93-95\)](#page-121-0). On the other hand, studies in which IL-2 receptor pathway deficient mice are challenged have shown that an effective immune response can be mounted without IL-2 signaling in vivo [\(96-99\)](#page-121-1). However, some model systems have shown that specific immune responses are lower compared to wild type mice. This may indicate that IL-2 does contribute to immune response but works in concert with other inflammatory cytokines such as IL-12 and IL-4 [\(100,](#page-121-2) [101\)](#page-121-3). Recent studies have also shown that IL-2 may play a more important role in memory responses. IL-2 deficient CD4⁺ T cells will

readily respond to antigen-pulsed dendritic cells but have low survivability and lower numbers of them transition to a memory phenotype [\(102,](#page-121-4) [103\)](#page-121-5).

IL-2 in regulatory T cells

While most T cells can secrete their own IL-2, regulatory T cells lack the ability. In this aspect Foxp3 and other regulatory proteins bind the IL-2 promoter and contribute to the transcriptional repression of IL-2 [\(104,](#page-121-6) [105\)](#page-121-7). At the same time, Foxp3 is also responsible for regulating expression of regulatory T cell markers such as CD25, cytotoxic T lymphocyte-associated antigen (CTLA-4), and glucocorticoid-induced tumor necrosis factor receptor (GITR) [\(104,](#page-121-6) [105\)](#page-121-7). Paracrine IL-2 is important for these developments in that IL-2 signaling increases Foxp3 expression [\(106\)](#page-122-0).

Natural regulatory T cells develop in the thymus and require their own development steps before migrating to peripheral immune tissues [\(107\)](#page-122-1). During this process paracrine IL-2 is needed for developing Treg cells. IL-2 and IL-2 R deficient mouse models have shown two-fold decreases in the number of Foxp3 thymocytes [\(106,](#page-122-0) [108,](#page-122-2) [109\)](#page-122-3). In addition, anti-IL-2 treatment has shown to reduce the number of thymic Treg cells in wild type mice [\(110\)](#page-122-4). IL-2 is also important in the development of induced Treg cells. Naïve T cells can become induced Treg cells upon activation of their TCR when in the presence of TGF- β and IL-2 [\(111,](#page-122-5) [112\)](#page-122-6). In this setting IL-2 plays a two-part role; IL-2 induces Foxp3 and promotes T cell growth [\(113\)](#page-122-7).

IL-2 helps to maintain Treg cells that have migrated to the peripheral immune compartments. IL-2 and IL-2 R deficient mouse models show up to ten-fold less Treg cells when compared with total CD4⁺ T cells [\(106,](#page-122-0) [114\)](#page-122-8). In addition, Tregs from IL-2

deficient mice transferred into IL-2 expressing mice can suppress spontaneous EAE [\(115\)](#page-122-9). Lastly, IL-2 R deficient Treg cells have reduced proliferation [\(106,](#page-122-0) [116\)](#page-122-10). These experiments show that IL-2 signaling provides needed signals for maintaining the number of peripheral Tregs.

Figure 1: Structure of the adenovirus and the adenovirus proteins. Adenovirus is nonenveloped icosohedral capsid containing a linear, double-stranded, DNA genome. The virion is comprised of multiple copies of major proteins, hexon (II), penton base (III), and fiber (IV), and minor proteins, VI, VIII, IX, and IIIa. The adenovirus genome in the interior capsid core is associated with terminal protein (TP), V, VII, and mu.

Figure 2: The pathway of human adenovirus serotype 5 (HAdV-5) infection. Adenovirus infection is initiated through binding of the fiber knob domain to cellular CAR. Adenovirus then interacts with cellular integrins through an Arg-Gly-Asp domain within penton base. This subsequent interaction triggers internalization through clathrinmediated endocytosis. Following endocytosis, the viral capsid disassembles during endosome acidification, leading to viral escape. Upon escape, adenovirus is transported to the nucleus where the viral genome is released and imported into the nucleus.

Figure 3: Transcription map of the adenovirus genome. Early transcription unites (E1- E4) are labeled in Blue. The Late transcription units (L1-L5) are labeled in red.

Figure 4: Interleukin 2 structure. The structure of interleukin 2 is comprised of 4 alphahelical domains in an Up-Up-Down-Down orientation. These domains are color coded in blue, yellow, green, and red.

CHAPTER II: ADENOVIRUS STRATEGIES FOR TISSUE SPECIFIC TARGETING

by

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Advances in Cancer Research **115**:39-67, 2012

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Format adapted for dissertation

Abstract

Cancer gene therapy approaches have benefited greatly from the utilization of molecular-based therapeutics. Of these adenovirus-based interventions hold much promise as a platform for targeted therapeutic delivery to tumors. However, a barrier to this progression is the lack of native adenovirus receptor expression on a variety of cancer types. As such, any adenovirus-based cancer therapy must take into consideration re-targeting the vector to non-native cellular surface receptors. Predicated upon the knowledge gained in native adenovirus biology, several strategies to transductionally retarget adenovirus have emerged. Here-in, we describe the biological hurdles as well as strategies utilized in adenovirus transductional targeting; covering the progress of both adapter-based and genetic manipulation based targeting. Additionally we discuss recent translation of these targeting strategies into a clinical setting.

The development of rationally designed cancer interventions has followed the progress of the molecular understanding of cancer development and progression. To this end, gene therapy has endeavored multiple strategies for molecular targeted therapeutics. Of these strategies, adenovirus (Ad)-based vectors have been used prevalently, especially in the field of cancer. Ad vectors entail many characteristics that make it an ideal choice compared to other vectors. Biologically, Ad is able to efficiently transduce a variety of both dividing and quiescent cell types *in vitro* and *in vivo*. Additionally, the amenability to genetic modification, large genetic payload capacity, and the ability to produce high titers of good manufacturing practice quality are all factors that favor the use of Ad-based vectors as cancer therapeutics. Of importance, Ad-based vectors have shown an impressive safety record in the pre-clinical and clinical setting. However, despite the safety profile and pre-clinical efficacy these vectors have failed to achieve therapeutic efficacy in the clinical setting. Thus efforts have been refocused on basic vector design, especially on maximizing gene delivery by specifically transducing the target cell population. Achievements in Ad transductional targeting technology have steadily progressed and show great promise as a therapeutic for cancer treatment.

Adenovirus Biology

The most common adenovirus used in gene therapy, human adenovirus (Ad) serotype 5, is a member of the Adenoviridae family. This family is comprised of 51 Ad serotypes originally classified by their ability to be neutralized by animal antisera. These serotypes are then divided into six species based upon hemagglutination properties, oncogenicity, and genomic structure [\(1\)](#page-114-0). In addition, there are some correlations between

species and tissue target and clinical presentation. Of importance to current Ad-based gene therapy vectors are species B, C, and D. These Ad species comprise the serotypes most commonly used in gene therapy.

Adenovirus Capsid Structure

The human Ad is a 36 kilobase double-stranded DNA virus encapsulated by an icosahedral protein particle (Figure 1). Progress in X-ray crystallography and cryoelectron microscopy has furthered our understanding of the structural components of the Ad capsid [\(2-4\)](#page-114-1). Three major proteins comprise most of the Ad capsid. Hexon is a homotrimeric protein found in 720 copies and comprises most of the Ad capsid, playing a structural role as the main coating protein. The Ad hexon is highly conserved among human serotypes; however, hexon contains 9 surface exposed hypervariable regions (HVR1-HVR9) which contain serotype variation [\(5\)](#page-114-8). Penton forms a homo-pentamer which makes up the penton base. This pentameric structure is located at each of the 12 vertices and plays a structural role, interacting with each of the Ad capsid 12 fibers. In addition, penton contains an Arg-Gly-Asp (RGD) motif which is responsible for virion internalization. Fiber is found as a homo-trimer at each vertice and non-covalently binds to its corresponding penton base via its N-terminus. Fiber is composed of a shaft domain and a globular knob domain found at the distal tip which plays a role as the primary cellular attachment site [\(6\)](#page-114-3). In addition to the major capsid proteins, the Ad capsid is comprised of an assortment of minor proteins: IIIa, VI, VIII, and IX. Of note, polypeptide IX, which has gained favor as an alternative locus for targeting incorporation (discussed later), is a structural protein that is believed to help stabilize the Ad capsid [\(7\)](#page-114-4). Four

monomers of pIX interact to form a 4 helix bundle with a surface exposed C-terminus [\(4,](#page-114-9) [8\)](#page-114-5).

Adenovirus Entry Biology

Ad entry biology is comprised of two distinct steps: attachment of the virus to its primary receptor subsequently followed by molecular interactions that lead to internalization of the virus. Initially, high-affinity interactions occur when the fiber knob domain binds to its cognate primary receptor. In general, for serotypes from species A, C, E, and F this receptor is the coxsackie and adenovirus receptor (CAR), while serotypes from species B and D tend to utilize alternative receptors. CAR is a 46 kilo Dalton protein that is a member of the immunoglobulin superfamily and is involved in the formation of tight junctions [\(9,](#page-114-6) [10\)](#page-114-7). Once the Ad virion has attached, cellular integrins including $\alpha\beta\beta$, $\alpha\beta\beta$ [\(11\)](#page-115-5), $\alpha\beta\beta$ [\(12\)](#page-115-6), $\alpha\beta\beta$, and $\alpha\beta\beta$ [\(13\)](#page-115-7) interact with RGD motifs in the penton base. This interaction induces cellular responses that lead to cytoskeleton alterations which aid in internalization [\(14,](#page-115-8) [15\)](#page-115-9). Ultimately, virus internalization occurs via clathrin-coated vesicles and the Ad virion is transported to the endosome [\(16\)](#page-115-0). Upon endosomal acidification the Ad virion disassembles and is released into the cytoplasm where it ultimately travels to the infected cells nucleus for viral replication.

Transductional Targeting of Adenovirus Vectors

Knowledge gained from studies concerning native adenovirus entry biology has predicated understanding of findings that non-CAR expressing cancer cells are refractory to Ad infection and gene delivery. Thus, if target cancer cells exhibit low levels of CAR

we are left with a scenario where by high-CAR expressing non-target cells are effectively transduced while low-CAR cancer cells show poor transduction. Higher expression of CAR also appears to be growth inhibitory in some cancers [\(17\)](#page-115-10). In summary, targeting CAR appears to be strategically incompatible with Ad-based cancer therapeutics.

Bio-distribution of Ad, although effected by CAR distribution, is not solely determined by expression profiles *in vivo* [\(18\)](#page-115-11). Systemic administration of Ad, intravenously, results in the majority of transduction occurring in the liver followed by the spleen, heart, lung, and kidneys of mice. This profile however, does not correlate with the highest levels of CAR expression [\(19\)](#page-115-12). This is especially true in regards to liver transduction which absorbs the vast majority of systemic Ad vector via hepatic kupffer cell uptake [\(20\)](#page-115-1) and hepatocyte transduction, potentially resulting in liver toxicity. Due to the toxicity issues regarding liver transduction, this biological interaction *in vivo* has been given great scrutiny.

Early strategies to re-target Ad to non-CAR pathways were initially thought to also de-target the liver, as the initial hypothesis was that liver transduction was CAR and integrin dependent. However, studies that ablated CAR and integrin binding in the Ad capsid had little effect on bio-distribution profiles [\(21,](#page-115-2) [22\)](#page-115-3). Thus, Ad liver tropism was shown to be linked to a novel pathway. Following initial studies implicating motifs in the fiber shaft [\(23-25\)](#page-115-4), *Shayakhmetov et al.* reported a major role for fiber interactions with blood coagulation factors and complement component C4 binding protein in hepatocyte and kupffer cell transduction. Modification of the Ad5 fiber to ablate this interaction resulted in a 50-fold decrease in liver transduction along with reduced levels of liver toxicity. Analysis determined that this *in vivo* tropism was due to Ad associating with

hepatocellular heparin sulfate proteoglycan and low density lipoprotein receptor related protein [\(26\)](#page-116-10).

More recent studies however, have shown that fiber structure and motifs do not play a role in liver sequestration and have elucidated hexon interactions with blood coagulation factors as the major pathway directing hepatocyte transduction by systemic delivery of Ad. *Kalyuzhniy et al.* and *Waddington et al.* defined the specific interaction between blood coagulation factor X (FX) and hexon. In addition, utilizing structural studies, FX was shown to interact with hypervariable regions 3, 5, and 7 of hexon. Both groups showed that this interaction could be inhibited by mutated forms of hexon or by pharmacological methods involving warfarin or snake venom protein X-bp [\(27,](#page-116-11) [28\)](#page-116-1). Additionally, *Waddington et al.* elucidated that different serotypes of Ad interact with FX with different affinities, some to the point of not binding at all. Of note, those Ad serotypes that did not bind FX were all from species D. Following this, candidate viruses from low (Ad35) and non-binding (Ad26 and Ad48) groups were examined *in vivo* by intravenous injection with or without X-bp protein. These viruses showed a lack of liver transduction [\(27\)](#page-116-11).

From this work, several groups have reported success with genetic manipulations of hexon to ablate liver sequestration. These strategies fall into two different categories. From the original studies, hexon mutations blocking the FX/hexon interaction have been utilized and shown to drastically reduce liver sequestration and transduction. This strategy was further developed by *Alba et al*., identifying the exact amino acids in hypervariable regions 5 and 7 responsible for FX binding. Altering either of these points resulted in a drastic decrease in FX binding and FX mediated gene transduction [\(29\)](#page-116-2).

These FX ablated Ad vectors also possessed altered biodistribution, with decreased liver transduction and greater vector accumulation in the spleen, especially following macrophage depletion [\(30\)](#page-116-3). Additionally, since different serotypes have different affinities for FX, some labs have reported that either whole hexon swaps or hypervariable region swaps with lesser binding serotypes have also been successful in preventing liver uptake. *Short et al.* utilized the swapping of Ad5 hexon with that of Ad3 hexon. This modification was shown to block FX binding to Ad virions by surface plasmon resonance (SPR) analysis and prevent FX-mediated gene transduction *in vitro*. Interestingly, ablation of FX binding in an oncolytic Ad vector provided increased tumor killing and prolonged viral replication in a skov3.ip1 subcutaneous flank tumor model [\(31\)](#page-116-4).

In summary, primary biology determined by *in vitro* experimentation as well as host interactions outside of this primary pathway play a role in the over all *in vivo* biodistribution of Ad. It is clear that alternative targets for cell transduction must be explored as a wide variety of target cells including cancer are not amenable to CAR targeted Ad vectors. Two distinct approaches have been utilized to transductionally target Ad-based vectors: 1) adapter based and 2) genetically capsid modification. While these strategies show great efficacy in re-targeting Ad-based therapeutics, it is also clear that liver detargeting must also be considered in any Ad vector as these external biological forces will effect overall target cell transduction *in vivo.* Thus, any Ad-based therapeutic must entail both de-targeting strategies and re-targeting strategies in order to reach its full therapeutic efficacy.

Adenovirus Transductional Targeting: Adapter Based Strategies

The adapter based strategy (Figure 2A) involves the use of a molecular bridge to re-target the adenovirus from its native primary receptor to a different cell surface receptor. This function is performed due to the bi-specific nature of adapter molecules. One end of the adapter binds specifically to the Ad capsid while the alternative end redirects Ad away from its native CAR binding and interacts with the alternative cellular receptor. Of note, this process does not impede with Ad infection as entry biology is determined by a two-step process, with binding being a separate mechanism from internalization. Conceptually, the most elegant location for conjugating an adapter molecule to the Ad virion is the fiber knob domain. This interaction allows for the retargeting of Ad to alternative receptors while also de-targeting Ad from its primary receptor CAR. As such, within this re-targeting strategy, the majority of adapters interact with the Ad knob domain. However, alternative capsid sites have been used as adapter interaction locales and have shown to be effective in re-targeting Ad.

FAB Antibody Adapters

The first *in vitro* manifestations of the adapter strategy were accomplished by conjugating an anti-knob FAB antibody to a re-targeting ligand. This strategy was first shown by chemically conjugating an anti-knob FAB antibody to folate. Conjugated to Ad virions, this adapter showed CAR independent targeting to cancer cells over expressing the folate receptor [\(32\)](#page-116-5). FAB antibody adapters against fibroblast growth factor 2 (FGF2) receptor have also been widely used and shown to retarget Ad-based vectors to a variety of cancers including pancreatic cancer [\(33\)](#page-116-6), melanoma [\(34\)](#page-116-7), Kaposi's sarcoma [\(35\)](#page-116-8),
ovarian cancer [\(36\)](#page-116-0), and head and neck cancer [\(37,](#page-117-0) [38\)](#page-117-1). In all, a wide variety of alternative cancer relevant targeting ligands have been conjugated to anti-knob FAB antibodies and used to re-target adenovirus vectors to cellular receptors such as CD40 [\(39\)](#page-117-2), epidermal growth factor (EGF) receptor [\(40\)](#page-117-3), epithelial cell adhesion molecule (EPCAM) [\(41,](#page-117-4) [42\)](#page-117-5), prostate-specific membrane antigen [\(42\)](#page-117-5), and Tag-72 [\(43\)](#page-117-6), resulting in similar transductional gains over un-targeted Ad. Full utility of this strategy was progressed when *Reynolds et al.* employed an anti-knob FAB antibody chemically conjugated to monoclonal antibody (9B9) against angiotensin-converting enzyme (ACE) [\(44\)](#page-117-7). This cellular marker is found in the pulmonary epithelium and up regulated in various pulmonary diseases. Of note, this study showed a 20 fold-increase in lung gene expression while also reducing liver expression by 83% when compared to an un-targeted Ad vector. More recently an anti-knob FAB antibody fused to FGF2 showed increased transduction efficiency in a mouse model of head and neck carcinoma. The targeted Ad, expressing a mutant Rad50 protein, also demonstrated an increase in tumor suppression compared to un-targeted Ad when combined with cisplatinum, resulting in greater DNA double strand breaks and reduced angiogenesis [\(38\)](#page-117-1).

Recombinant Fusion Adapters

Studies have shown FAB antibody based adapters to be effective in providing a proof-of-principle strategy for re-targeting Ad vectors. However, the production of these molecules has been hampered by the randomness of chemical conjugation, producing heterogeneous populations of molecules. As such, strategies that utilize single component molecules could be advantageous. Thus, more recent efforts have focused on the

development of single component fusion proteins that can be easily expressed and whose population is genetically homogenous. Building on the use of anti-knob antibodies, *Haisma et al.* developed a recombinant fusion protein composed of a single-chain antibody (scFv) against Ad fiber knob domain fused to a scFv against EGF receptor. This adapter could be easily purified without loss of function and increased adenovirus gene transfer compared to un-targeted Ad in EGF receptor expressing cell lines [\(45\)](#page-117-8). Later, *Haisma et al.* showed selective targeting to a variety of angiogenesis related markers including $\alpha v \beta$ 3 integrins, vascular endothelial growth factor (VEGF) receptor 2, and the angiopoietin receptor TIE-2. These adapters re-targeted Ad to both mouse (H5V) and human (HUVEC) endothelial cell lines. In addition, they showed *in vivo* tumor specific targeting to a subcutaneous C26 colon carcinoma [\(46\)](#page-117-9). These scFv diabodies have also shown efficacy in a variety of studies re-targeting Ad to cellular targets such as EGF receptor [\(47,](#page-117-10) [48\)](#page-117-11), EPCAM [\(49\)](#page-117-12), human epidermal growth factor receptor 2 (HER2/neu), carcinoembryonic antigen (CEA), endoglin (CD105) [\(50\)](#page-118-0), and high molecular weight melanoma antigen [\(51\)](#page-118-1).

In addition to scFv diabody based adapters, a novel adapter utilizing a truncated, soluble portion of CAR (sCAR) fused to a targeting molecule was developed. Utilizing the first sCAR based adapters, *Dmitriev et al.* created sCAR adapters fused to either an anti-CD40 antibody or EGF [\(52\)](#page-118-2). With this, they demonstrated in several EGF overexpressing cancer cell lines a 9-fold increase in gene expression when compared to nontargeted Ad vectors. In addition to Ad targeting specificity, *Dmitriev et al.* questioned the stability of these adapters when complexed with Ad virions. They showed through comparing Ad/sCAR-EGF and Ad/sCAR-EGF purified through gel filtration that there

was no difference in targeting profile, confirming the stability of these complexes. Similarly to scFv diabody based adapters, studies have shown this strategy to be efficacious in retargeting Ad vectors utilizing a wide variety of targeting ligands against EGF receptor [\(53\)](#page-118-3), urokinase-type plasminogen activator receptor (UPAR) [\(53\)](#page-118-3), CEA [\(54,](#page-118-4) [55\)](#page-118-5), HER2/neu [\(56\)](#page-118-6), CD40 [\(57\)](#page-118-7), and high-affinity Fcgamma receptor I (CD64) [\(58\)](#page-118-8).

Kashentseva et al. furthered this strategy by incorporating a novel trimerization domain [\(59\)](#page-118-9). This trimeric adapter contained sCAR fused to a HER2/neu specific scFv and displayed increased affinity for the Ad fiber knob. In addition, the adapter augmented gene transduction 17-fold in HER2/neu positive breast and ovarian cancer cell lines. *Kim et al.* additionally reported that adapter trimerization provided drastic increases (100-fold) in gene transduction over its identical monomeric adapter [\(60\)](#page-118-10). These studies have proven the targeting efficacy and stability of adapter virus complexes and have paved the way for these complexes to be utilized in a clinical setting, were complex stability could affect targeting efficacy and safety.

Alternative Adapter Binding Locales

In addition to bi-specific adapters that utilize the adenovirus fiber knob domain for presentation, penton base and hexon have also been explored as sites for adapter based re-targeting. *Li et al.* constructed a bi-specific adapter molecule composed of an anti-penton monoclonal antibody fused to tumor necrosis factor α (TNF- α), insulin-like growth factor 1 (IGF-1), and EFG [\(61\)](#page-118-11). These adapters when complexed with Ad provided increased gene transduction in M21-L12 melanoma cells. The use of hexon as a re-targeting local is predicated on newly identified *in vivo* biology regarding adenovirus

interaction with blood coagulation factors. As previously described, upon entering circulation Ad hexon interacts with FX. *Chen et al.* utilized this interaction to create a novel re-targeting ligand by fusing the GLA domain of FX to a scFv against HER2/neu [\(62\)](#page-118-12). When conjugated to Ad, this novel adapter promoted increased transduction of HER2/neu positive cells versus cells lacking HER2/neu expression. They additionally showed that this strategy could be used to target other cell surface receptors such as EGF receptor and ATP-binding cassette protein G2 (ABCG2). Since this technology utilizes the same binding interaction that leads to liver transduction, gains in re-targeting Ad to an alternative receptor also yield gains in de-targeting the liver.

Adapters Utilizing Genetically Modified Ad Capsid

Alternative to bi-specific adapters, approaches that genetically modify the Ad virion to bind re-targeting ligands have been developed. The benefit of this strategy is that a variety of off the shelf, commercially available ligands can be used without any additional modification. This strategy is best portrayed by incorporation of the immunoglobulin (Ig) binding domain of Staphylococcus aureus protein A into the fiber HI-loop or C-terminus. This fiber modified Ad vector is thus able to bind a wide variety of targeting moieties that contain the Fc region of Ig. Most recently, *Takahashi et al.* utilized this technology to screen antibody libraries against the prostate cancer cell line LNCaP [\(63\)](#page-119-0). Identifying an antibody against neural adhesion molecule 2, they showed that this antibody when conjugated to Ad increase gene transduction in prostate and breast cancer cell lines. A variety of other targets including CD40 [\(64\)](#page-119-1), mesothelin [\(65\)](#page-119-2), EGF2 receptor, HER2/neu, CA242 antigen, and PSMA [\(66\)](#page-119-3) have been explored.

Utilizing the same concept, a biotin acceptor peptide (BAP) has been inserted into fiber [\(67,](#page-119-4) [68\)](#page-119-5). During virus production, BAP is biotinylated by the endogenous biotin ligase in 239 cells. Once purified, this virus can be conjugated to biotin labeled ligand. PIX has also been explored as a site for BAP insertion. *Campos et al.* fused BAP to the terminus of pIX and compared targeting to BAP inserted in fiber. Of interest, using an anti-CD71 (transferin receptor) antibody as ligand, BAP fused to pIX failed to retarget Ad vectors unlike BAP inserted into fiber. However, when pIX-BAP Ad was retargeting with biotinylated transferin transduction was successful [\(69\)](#page-119-6).

Adenovirus Secretion of Adapter

Although, the adapter strategy for re-targeting Ad vectors allows for efficient and specific re-targeting it is reliant upon a two part system. The Ad vector and the adapter molecule are produced separately and are conjugated before being introduced to their cellular target. However, genetic incorporation of targeting ligands is biologically incompatible with a variety of ligands utilized in adapter based strategies, such as scFvs. This is due to the fact that most scFv molecules must be processed through the ER in order to fold and function correctly while Ad assembly takes place in the cytosol. Bridging this gap between cytosolically unstable targeting ligands and single-component Ad vector retargeting have been reports of Ad vectors that secrete their own adapter. With this, single component Ad vectors can utilize targeting ligands which are not biologically compatible with viral assembly. In addition, while adapter conjugated Ad vectors provide efficient targeting this strategy only allows for a single round of targeting. Any viral progeny will regress to their native cellular receptor CAR. As a

result, adenoviruses that secrete their own adapter have targeting advantages over traditional adapter strategies in regards to replicating Ad vectors.

A novel method for achieving this was explored by Glasgow et al. This strategy utilizes a unique leucine zipper based biding motif derived from vittelogenin gene binding protein (VBP) to allow for adapter conjugation. One zipper domain was incorporated into a knob-less fiber while its corresponding zipper domain was fused to the re-targeting ligand and secreted. Utilizing a scFv against CD40, *Glasgow et al.* showed that these novel structures could be incorporated into the Ad capsid and corresponding secreted adapter. Most importantly, upon completion of the Ad native life cycle and Ad release, crude viral lysate was shown to have CD40 specific targeting, thus showing that the virus could interact and bind with its cognate adapter in the inter-cellular space [\(70\)](#page-119-7).

Overall, adapter based Ad targeting studies have provided vast evidence that native Ad tropism can be re-targeted to alternative cellular receptors and increase gene transfer in non-CAR expressing cells *in vitro*. Adapter targeted vectors have also shown to be efficacious in *in vivo* studies, showing great stability and transductional efficacy. With further development of expression systems and rigorous analysis of the stability and kinetics of vector adapter complexes, adapter based strategies could progress to clinical translation.

Adenovirus Transductional Targeting: Genetically Incorporated Strategies

With greater understanding of Ad virion structure, genetic manipulation of capsid proteins has yielded great strides in Ad targeting. Conceptually, genetic manipulation of

the Ad capsid to incorporate novel targeting ligands could yield a multitude of targeting strategies. However, any genetic manipulation must function within the structural and biological constraints of the native Ad capsid. Based on this, most genetic manipulation of the Ad capsid have focused on the fiber, since this domain is the primary determinant of native Ad tropism and can be modified without interfering with capsid assembly.

Chimeric Adenovirus

Although Ad5's primary receptor is CAR and thus non-amenable to a variety of cancer therapeutic strategies, other serotypes of Ad do not use CAR as their primary binding receptor. As such, one genetic strategy for re-targeting Ad, termed pseudotyping, developed as a mechanism to utilize non-CAR targeting serotypes while not abandoning the vast knowledge of Ad5 biology (Figure 2B). These pseudotyped virions have shown great transductional efficacy in a variety of Ad5 refractory cell types such as ovarian carcinoma [\(71,](#page-119-8) [72\)](#page-119-9), prostate cancer [\(73\)](#page-119-10), breast cancer [\(74\)](#page-119-11), colon carcinoma [\(75\)](#page-119-12), glioblastoma [\(76\)](#page-119-13) and others. With pseudotyped Ad vectors, the fiber knob domain or the entire fiber is genetically replaced with its structural counterpart from a different human serotype that recognizes an alternative cellular surface receptor. These alternative serotypes are primarily developed from species B and species D adenoviruses. Species B viruses have been shown to interact with a variety of non-CAR receptors including CD46 [\(77\)](#page-120-0), CD80, and CD86 [\(78\)](#page-120-1). Additionally, subgroup D serotypes have been shown to interact with CD46 and the glycoprotein component α (2-3)-linked sialic acid [\(79\)](#page-120-2). With the great progress developed in pseudotyped Ad vectors, the strategy was also expanded to include the insertion of fiber elements from non-human Ad serotypes. This strategy,

termed xenotyping, has yielded a variety of non-CAR targeted Ad vectors including vectors with fiber elements from avian, bovine, canine, murine, and porcine Ad vectors [\(80-84\)](#page-120-3). Of note, most of the receptor targets for these vectors are undetermined as of today. However, the fiber element from porcine Ad serotype 4 has recently been shown to interact with glycan chains containing repeats of n-acetyllactosamine though evidence that this interaction leads to cellular uptake is unknown [\(85\)](#page-120-4). Bovine Ad serotype 4 fiber has also been elucidated recently. This non-human Ad was shown to interact with two different immunoevasion molecules of the B7 family of proteins, B7-1 and B7-H1, in murine leukemia cells. Of interest, this fiber requires both interactions in order to result in cellular uptake [\(86\)](#page-120-5). In addition to non-human Ads, structurally similar binding domains from other virus species have also been incorporated into the Ad fiber. This was first shown by the incorporation of the fiber like σ l reovirus attachment protein into the Ad fiber. This allowed for effective transduction of target cells expressing junctional adhesion molecule [\(87\)](#page-120-6).

Peptide Targeted Adenovirus

Although Ad pseudotyping has shown great success, it is predicated by the discovery of novel non-CAR targeting Ads. As such, development of re-targeting Ad vectors has progressed into rationally designed targeted Ads. Meticulous structural studies of the knob domain of fiber have yielded two separate locations within the knob that can be exploited for genetic peptide presentation without disrupting fiber function, the C-terminus and a region termed the HI loop (Figure 2C). Conceptually, the Cterminus is an ideal location for peptide insertion. Successful genetic insertions of an

integrin binding RGD motif or poly-lysine peptides have yielded positive *in vitro* and *in vivo* results [\(88\)](#page-120-7). However, other peptide insertions have shown no effect possibly due to steric hindrances. Structural studies using a genetically inserted FLAG tag into the HI loop, an exposed loop structure connecting β sheets H and I in the Ad knob domain, showed proof of principle evidence that this location is structurally amenable to peptide insertion [\(89\)](#page-120-8). In fact, further studies have shown that this location can handle peptides insertions of up to 100 amino acids without detriment to fiber function [\(90\)](#page-120-9). As such, *Dmitriev et al.* inserted an integrin- binding RGD motif into this location and showed that this virus, AdlucRGD, has enhanced transductional efficacy and gene delivery in ovarian cancer cell lines and primary tumors versus non-targeted Ad [\(91,](#page-120-10) [92\)](#page-120-11). This tropism expanded adenovirus has been utilized widely in the field and shown to be efficacious in gene delivery to wide variety of cancers including ovarian ([\(93\)](#page-121-0), cervical [\(94\)](#page-121-1), colon [\(95\)](#page-121-2), melanoma [\(96\)](#page-121-3) and others.

Progressing beyond the tropism expansion seen in RGD and poly-lysine motif insertions, several groups have inserted cellular specific targeting peptides into the HI loop. These peptides developed by traditional phage display biopanning or more novel strategies utilizing peptide incorporated Ad libraries [\(97-99\)](#page-121-4) have been proven to be highly specific and generally amenable to Ad insertion. *Nicklin et al* showed that the vascular endothelial cell targeting peptide, SY-GYLPLP, provided increased transduction in a variety of cancer cell lines [\(100\)](#page-121-5). In addition peptides have been inserted to target a variety of cancers including head and neck [\(101\)](#page-121-6), medullary thyroid carcinoma [\(102\)](#page-121-7), glioma [\(103\)](#page-121-8), and renal cell carcinoma [\(104\)](#page-121-9). In addition to classical target specific short peptides, *Myhre et al.* inserted an Affibody, a small antibody mimetic, into the HI loop

and showed HER2/neu and Taq polymerase specific targeting [\(105\)](#page-121-10). They also showed that HER2/neu specific, Affibody targeted oncolytic Ad provided increased transduction and killing in prostate cancer cells *in vitro* and increased survival time while decreasing serum prostate specific antigen in an orthotopic mouse model of prostate cancer [\(106\)](#page-122-0).

"Knob-less" Targeted Adenovirus

While peptide insertion has shown to be a successful strategy in re-targeting Ad, structural conflicts have emerged from fiber knob modifications. As such, a platform by which a wider variety of targeting ligands could be utilized would be a rational goal in further progressing Ad re-targeting. The observation that Ads lacking various portions of their knob domain could be rescued lead to the concept of utilizing a knob-less fiber as a platform for ligand presentation (Figure 2B). Limiting this concept however was the fact that the knob domain contained the trimerization domain for the fiber that is required for fiber function and insertion into the Ad capsid. Overcoming this structural problem, a foreign trimerization domain, the foldon domain of T4 fibritin, was fused to the native Ad fiber shaft to replace that which was lost by deletion of the knob domain [\(107\)](#page-122-1). *Krasnykh et al.* replaced the fiber and knob with the bacteriaphage T4 fibritin and showed that this platform could present a 6 histadine (6-His) motif inserted into the C-terminus [\(108\)](#page-122-2). This vector showed a 100 fold increase in gene expression in cells expressing an artificial 6-His binding receptor. Variant "de-knobing" strategies have also been explored by *Magnussen et al*, demonstrating that an RGD motif could target integrin expressing cells [\(109\)](#page-122-3). Further, labs have progressed towards larger peptide displays such as small peptides and Affibodies. *Belousova et al.* incorporated a HER2/neu specific Affibody

into a knob-less fiber, showing that the novel Affibody technology was compatible with knobless fiber platforms. This HER2/neu targeted vector also showed increased gene delivery in HER2/neu expressing cancer cells [\(110\)](#page-122-4). The knob-less Ad platform provides the ability to move beyond small ligands and into the use of proteins as targeting ligands. Previously this would be a very problematic strategy as large protein insertions are much more likely to interfere with native Ad assembly and function. Notably, trimeric CD40 has been fused to this fiber providing evidence that this platform can be amenable to large protein ligands. The CD40 incorporated Ad provided CD40 specific gene delivery *in vivo* following systemic delivery [\(111\)](#page-122-5).

Alternative Capsid Locations

Although fiber is the most developed capsid protein for re-targeting Ad, the difficulty of incorporating ligands into the Ad capsid has furthered the development of alternative locales. Potentially, alternative sites could provide increased presentation of the targeting ligand through increased copy number per virion and could also allow for multiple targeting ligands to be utilized on the same capsid. To date a variety of alternative sites have been proposed and explored including hexon, polypeptide IX (pIX), and pIIIa (Figure 2C). The first two have been shown to be compatible with ligand presentation while the latter was shown incompatible due its current structural location within the capsid (112) .

Hexon is the most abundant protein in the Ad capsid and as such is an ideal candidate for ligand incorporation. The potential 720 copies of hexon could allow for a "coating" of the Ad capsid in any incorporated ligand. Although most of the hexon

sequence is highly conserved among serotypes, nine hypervariable regions are found within the hexon and have solvent exposed loops. As such, these loops lay in an ideal location for modification. *Vigne et al.* genetically modified hypervariable region 5 (HVR5) and inserted an integrin binding RGD domain [\(113\)](#page-122-7). This RGD motif had no effect on hexon structure or capsid stability but increased CAR independent transduction of vascular smooth muscle cells. Further HVR's 2, 3, and 5-7 were found to be amenable to insertion of a 6 histadine (6-His) motif [\(114\)](#page-122-8). In addition, anti-6His antibodies recognized Ad vectors with 6-His inserted into HVR's 2 and 5. The rescue of Ad vectors with peptides inserted in various hypervariable regions provides us with a potential platform for various downstream targeting applications.

More recently, pIX has developed as a practical platform for the presentation of targeting ligands. Polypeptide IX is a small protein that plays the role of a cement protein, helping to stabilize hexon interactions. Found in 240 copies within each virion, pIX provides drastically increased ligand presentation over fiber modifications. Structural studies and the observation that the C-terminus of pIX may be solvent exposed lead to several groups exploring the concept of pIX presented ligands. The first reported targeting ligand incorporated into the terminus of pIX was presented by *Dmitriev et al.* By incorporating poly-lysine or FLAG motifs, they showed CAR independent transduction via interactions with heparin sulfate chains on the target cell surface [\(115\)](#page-122-9). Furthering development of pIX as a targeting local, *Vellinga et al.* fused varying sized αhelical linkers to the terminus of pIX and used these linkers to present integrin binding RGD motifs [\(116\)](#page-122-10). Of note, longer linker length corresponded with increased gene delivery in CAR negative endothelial cells. Relatively large proteins fused to pIX have

also been explored. Incorporation of hyper-stable scFv against β-glactosidase fused to pIX showed that the scFv retained its binding affinity to β-glactosidase [\(117\)](#page-122-11). However, this antibody has no targeting applications and the availability of hyper-stable scFv's is limiting. *Poulin et al.* attempted to incorporate a scFv against a mutant form of the EGF receptor (EGFRvIII) fused to pIX but the scFv failed to fold properly, resulting in a lack of targeting [\(118\)](#page-123-0). As a consequence, they attempted to route the pIX-scFv through the endoplasmic reticulum (ER) but biological incompatibility between the cytoplasmically assembled Ad and the ER routed pIX resulted in low levels of incorporation and thus a lack of targeting. However, they were able to incorporate a single domain antibody (AFAI) against CD66c (carcinoembryonic antigen-related cell adhesion molecule family 6 [CEACAM6]). This ligand provided CD66c specific binding and transduction of A549 non-small-cell lung carcinoma cell line. *De Vrij et al.* showed that large single-chain Tcell receptors could also be attached to pIX [\(119\)](#page-123-1). They fused pIX to a single-chain T-cell receptor against the CT antigen melanoma-associated antigen A1 (MAGE-A1). This vector specifically transduced melanoma cell lines. In addition, transduction was shown to correlate with the levels of MAGE-A1 peptide within the cells. However, lack of or down-regulation of HLA-A1 molecules can drastically reduce the transduction efficiency of this vector. As a whole, studies have shown that pIX is a flexible platform for the display of both small and large targeting ligands.

Novel Transductional Strategies

Although Ad-based therapeutics has progressed greatly, the vast majority of targeting strategies have relied upon a single cellular surface receptor for the target. This

strategy has been shown to work remarkably well for homogenous cell line populations. However, some target cells such as cancer are not comprised of a homogenous population. As such, targeting a single cellular surface receptor may lead to a selected population that is resistant to further therapy. Thus, any molecular based therapy should take this into account when designing a targeting strategy. Several groups have begun developing Ad targeting strategies that utilize multiple ligands within the same virion. One of the first vectors reported was an Ad5 containing both an RGD motif and a polylysine ligand [\(120\)](#page-123-2). This vector could thus target both cell surface integrins and heparin sulfate proteoglycans. Following that, *Borovjagin et al.* inserted an integrin binding RGD motif into the C-terminus of a chimeric Ad fiber composed of the shaft domain of Ad5 and the knob domain of Ad3 [\(121\)](#page-123-3). This vector showed 55-fold increase in gene transduction of bladder cancer cell lines. Utilizing adapter based re-targeting, *Grill et al.* combined an adapter composed of a scFv against EGF receptor with genetically incorporated RGD motif in the HI loop of fiber knob [\(48\)](#page-117-11). This virus was shown to be able to target both EGF receptor and cell surface integrins on primary glioma cells and spheroids.

Although these strategies provide insight into the efficacy of dual targeting over single, they are limited in their ability to insert multiple ligands within the same fiber. Using multiple fibers within the same Ad virion would by-pass this restriction and provides a platform for the utilization of multiple complex targeting ligands. *Pereboeva et al.* first showed that this strategy was feasible by generating an Ad vector incorporating both the wild type fiber and a knob-less fiber fibritin presenting a 6-His motif [\(122\)](#page-123-4). Utilizing this mosaic vector, they showed both CAR and artificial 6-His receptor specific

gene transduction, though in high CAR expressing cells no additional gain was seen from the 6-His containing fiber fibritin. The combination of an Ad5/3 chimeric fiber with a fiber containing the reovirus σ-1 protein in the same Ad virion has also shown to provide an increase in infectivity enhancement of ovarian cancer cell lines and primary ovarian cancer tissue slices [\(123\)](#page-123-5). *Murakami et al.* additionally provided evidence that with the correct genetic construct, equal expression and incorporation of the two distinct fibers can be accomplished [\(124\)](#page-123-6). This vector, containing both Ad5 and Ad3 fiber, provided both CAR and CD46 specific gene transduction. Of interest, they showed that this vector could target two distinct cells, PC-3 cells expressing CD46 and Cho-CAR cells expressing CAR, in a mixed culture experiment.

Adenovirus Targeting: Recent Clinical Developments

Although Ad-based therapeutics have shown great promise in pre-clinical studies, in the clinical setting therapeutic efficacy of Ad vectors has not followed. Although ample evidence concludes that lack of CAR expression upon cancer cells drastically limits Ad-based therapeutic efficacy, the vast majority of clinical trials utilizing Ad rely upon native CAR based transduction. One hurdle limiting the translation of Ad-based targeting strategies has been the additional complexity of adapter/Ad conjugates. Since these strategies are two-component systems, they entail additional production complexity and scrutiny in regards to safety before being approved for clinical use. As such, the few clinical trials to date utilizing targeting have relied upon genetically inserted targeting ligands.

Recently, clinical studies involving Ad-based therapies utilizing genetically incorporated integrin binding RGD motifs in the fiber knob have been reported. *Kimball et al*. recently finished a phase I clinical trial examining the therapeutic efficacy and maximum tolerated dose of a tropism-modified, infectivity enhanced conditionally replicative adenovirus (CRAd), Ad5-Δ24-RGD, in patients with malignant gynecologic diseases [\(125,](#page-123-7) [126\)](#page-123-8). Following treatment, of the 21 patients 71% had stable disease while 29% still showed disease progression after 1 month of follow-up. Of note, 7 patients did show a decrease in CA-121 levels, with 4 of these being a greater than 20% decrease. Although no patients showed regression of disease in this study, toxicity associated with therapy was limited to grade 1/2 fever, fatigue, and abdominal pain. A similarly sized trial reported by *Nokisalmi et al*. analyzed an integrin targeted CRAd, ICOVIR-7, in patients with a variety of solid tumors [\(127\)](#page-123-9). Similarly, this trial saw only mild to moderate treatment-related side effects. Of note, 9 of 17 evaluable patients showed evidence of anti-tumor activity, with 1 patient showing partial response and 2 patients with minor responses. This strategy has also shown similar safety and therapeutic outcomes when combined with expression of granulocyte-macrophage colony factor (GMCSF), an immune stimulatory molecule [\(128\)](#page-123-10). Progression of targeted Ad-based cancer therapies in the clinical setting has lead to new studies utilizing chimeric Ad-based vectors replacing the Ad5 knob domain with that of the Ad3 knob (Ad5/3) [\(129\)](#page-123-11). *Pesonen et al*. showed similar safety in a trial of 18 patients with varying solid tumors [\(130\)](#page-123-12). Of these patients 61% showed evidence of anti-tumor activity.

In addition to these CRAd-based trials, *Matthews et al.* reported plans for and are currently finishing another phase I clinical trial involving Ad5.SSTR/TK.RGD (131).

This Ad-based therapeutic utilizes a genetically incorporated RGD ligand to target the expression of a therapeutic suicide gene, herpes simplex virus thymidine kinase (TK), and an imaging motif, somatostatin receptor type 2 (SSTR), for viral tracking via nuclear imaging.

In all, translation of targeted Ad-based therapeutics to the clinical setting has shown a solid safety record similar to their un-targeted counterparts. Although some levels of anti-tumor activity and therapeutic response have been noted, the response rate is still far below that required for therapeutic usage. This emphasizes the need for further targeting trials and the utilization of additional strategies involving Ad virion/host interactions such as liver de-targeting and immune evasion.

Concluding remarks

Adenovirus based vectors are a widely used therapeutic platform for gene delivery. They are especially prominent in the field of cancer gene therapy where shorter gene expression times are not an issue. However, biological hurdles stand between native Ad-based vectors and their full utilization as a therapeutically effective cancer treatment platform. Of these hurdles, effective gene transduction of cancer cells drastically limits potential of Ad-based vectors. Early clinical trials highlighted this issue by reporting Ad vectors safe but therapeutically non-efficacious. In this regard, studies have clearly illustrated the case for increased transduction of target cells leading to increased therapeutic efficacy. To this end, Ad-based vectors utilizing cancer specific targeting should continue to be progressed and examined in stringent models of cancer with the goal of full therapeutic efficacy in the clinical setting.

Figure 1: Adenovirus capsid structure: The adenovirus capsid structure is composed of both major capsid proteins and minor proteins. Labeled here are capsid proteins hexon, penton base, fiber, and polypeptide IX (pIX). These capsid structures have all been utilized as locales for re-targeting Ad strategies.

Figure 2: Transductional re-targeting modifications: Adenoviral vectors can be retargeted to specific cell surface receptors using a variety of strategies: A) Heterologous retargeting ligands (adapters) composed of a variety of ligands including FAB antibodies, single-chain antibodies, and biological ligands. B) Chimeric Ad's composed of fiber / knob domains from alternative serotypes and "knob-less" fiber modifications. C) Genetic incorporation of peptides into fiber, hexon, and pIX.

LIST OF REFERENCES

1. Davison AJ, Benko M, Harrach B. Genetic content and evolution of adenoviruses. J Gen Virol. 2003 Nov;84(Pt 11):2895-908. PubMed PMID: 14573794. Epub 2003/10/24. eng.

2. Fabry CM, Rosa-Calatrava M, Conway JF, Zubieta C, Cusack S, Ruigrok RW, et al. A quasi-atomic model of human adenovirus type 5 capsid. EMBO J. 2005 May 4;24(9):1645-54. PubMed PMID: 15861131. Pubmed Central PMCID: 1142584. Epub 2005/04/30. eng.

3. Reddy VS, Natchiar SK, Stewart PL, Nemerow GR. Crystal structure of human adenovirus at 3.5 A resolution. Science. 2010 Aug 27;329(5995):1071-5. PubMed PMID: 20798318. Pubmed Central PMCID: 2929978. Epub 2010/08/28. eng.

4. Saban SD, Silvestry M, Nemerow GR, Stewart PL. Visualization of alpha-helices in a 6-angstrom resolution cryoelectron microscopy structure of adenovirus allows refinement of capsid protein assignments. J Virol. 2006 Dec;80(24):12049-59. PubMed PMID: 17005667. Pubmed Central PMCID: 1676273. Epub 2006/09/29. eng.

5. Burnett RM. The structure of the adenovirus capsid. II. The packing symmetry of hexon and its implications for viral architecture. J Mol Biol. 1985 Sep 5;185(1):125-43. PubMed PMID: 4046035. Epub 1985/09/05. eng.

6. Zubieta C, Schoehn G, Chroboczek J, Cusack S. The structure of the human adenovirus 2 penton. Mol Cell. 2005 Jan 7;17(1):121-35. PubMed PMID: 15629723. Epub 2005/01/05. eng.

7. Vellinga J, Van der Heijdt S, Hoeben RC. The adenovirus capsid: major progress in minor proteins. J Gen Virol. 2005 Jun;86(Pt 6):1581-8. PubMed PMID: 15914835. Epub 2005/05/26. eng.

8. Marsh MP, Campos SK, Baker ML, Chen CY, Chiu W, Barry MA. Cryoelectron microscopy of protein IX-modified adenoviruses suggests a new position for the C terminus of protein IX. J Virol. 2006 Dec;80(23):11881-6. PubMed PMID: 16987967. Pubmed Central PMCID: 1642590. Epub 2006/09/22. eng.

9. Coyne CB, Bergelson JM. Virus-induced Abl and Fyn kinase signals permit coxsackievirus entry through epithelial tight junctions. Cell. 2006 Jan 13;124(1):119-31. PubMed PMID: 16413486. Epub 2006/01/18. eng.

10. Philipson L, Pettersson RF. The coxsackie-adenovirus receptor--a new receptor in the immunoglobulin family involved in cell adhesion. Curr Top Microbiol Immunol. 2004;273:87-111. PubMed PMID: 14674599. Epub 2003/12/17. eng.

11. Wickham TJ, Mathias P, Cheresh DA, Nemerow GR. Integrins alpha v beta 3 and alpha v beta 5 promote adenovirus internalization but not virus attachment. Cell. 1993 Apr 23;73(2):309-19. PubMed PMID: 8477447. Epub 1993/04/23. eng.

12. Li E, Brown SL, Stupack DG, Puente XS, Cheresh DA, Nemerow GR. Integrin alpha(v)beta1 is an adenovirus coreceptor. J Virol. 2001 Jun;75(11):5405-9. PubMed PMID: 11333925. Pubmed Central PMCID: 114949. Epub 2001/05/03. eng.

13. Davison E, Diaz RM, Hart IR, Santis G, Marshall JF. Integrin alpha5beta1 mediated adenovirus infection is enhanced by the integrin-activating antibody TS2/16. J Virol. 1997 Aug;71(8):6204-7. PubMed PMID: 9223518. Pubmed Central PMCID: 191884. Epub 1997/08/01. eng.

14. Li E, Stupack D, Klemke R, Cheresh DA, Nemerow GR. Adenovirus endocytosis via alpha(v) integrins requires phosphoinositide-3-OH kinase. J Virol. 1998 Mar;72(3):2055-61. PubMed PMID: 9499060. Pubmed Central PMCID: 109499. Epub 1998/03/14. eng.

15. Li E, Stupack D, Bokoch GM, Nemerow GR. Adenovirus endocytosis requires actin cytoskeleton reorganization mediated by Rho family GTPases. J Virol. 1998 Nov;72(11):8806-12. PubMed PMID: 9765425. Pubmed Central PMCID: 110297. Epub 1998/10/10. eng.

16. Meier O, Boucke K, Hammer SV, Keller S, Stidwill RP, Hemmi S, et al. Adenovirus triggers macropinocytosis and endosomal leakage together with its clathrinmediated uptake. J Cell Biol. 2002 Sep 16;158(6):1119-31. PubMed PMID: 12221069. Pubmed Central PMCID: 2173207. Epub 2002/09/11. eng.

17. Okegawa T, Pong RC, Li Y, Bergelson JM, Sagalowsky AI, Hsieh JT. The mechanism of the growth-inhibitory effect of coxsackie and adenovirus receptor (CAR) on human bladder cancer: a functional analysis of car protein structure. Cancer Res. 2001 Sep 1;61(17):6592-600. PubMed PMID: 11522659. Epub 2001/08/28. eng.

18. Fechner H, Haack A, Wang H, Wang X, Eizema K, Pauschinger M, et al. Expression of coxsackie adenovirus receptor and alphav-integrin does not correlate with adenovector targeting in vivo indicating anatomical vector barriers. Gene Ther. 1999 Sep;6(9):1520-35. PubMed PMID: 10490761. Epub 1999/09/22. eng.

19. Wood M, Perrotte P, Onishi E, Harper ME, Dinney C, Pagliaro L, et al. Biodistribution of an adenoviral vector carrying the luciferase reporter gene following intravesical or intravenous administration to a mouse. Cancer Gene Ther. 1999 Jul-Aug;6(4):367-72. PubMed PMID: 10419055. Epub 1999/07/27. eng.

20. Tao N, Gao GP, Parr M, Johnston J, Baradet T, Wilson JM, et al. Sequestration of adenoviral vector by Kupffer cells leads to a nonlinear dose response of transduction in liver. Mol Ther. 2001 Jan;3(1):28-35. PubMed PMID: 11162308. Epub 2001/02/13. eng.

21. Alemany R, Curiel DT. CAR-binding ablation does not change biodistribution and toxicity of adenoviral vectors. Gene Ther. 2001 Sep;8(17):1347-53. PubMed PMID: 11571572. Epub 2001/09/26. eng.

22. Smith T, Idamakanti N, Kylefjord H, Rollence M, King L, Kaloss M, et al. In vivo hepatic adenoviral gene delivery occurs independently of the coxsackievirusadenovirus receptor. Mol Ther. 2002 Jun;5(6):770-9. PubMed PMID: 12027562. Epub 2002/05/25. eng.

23. Vigne E, Dedieu JF, Brie A, Gillardeaux A, Briot D, Benihoud K, et al. Genetic manipulations of adenovirus type 5 fiber resulting in liver tropism attenuation. Gene Ther. 2003 Jan;10(2):153-62. PubMed PMID: 12571644. Epub 2003/02/07. eng.

24. Breidenbach M, Rein DT, Wang M, Nettelbeck DM, Hemminki A, Ulasov I, et al. Genetic replacement of the adenovirus shaft fiber reduces liver tropism in ovarian cancer gene therapy. Hum Gene Ther. 2004 May;15(5):509-18. PubMed PMID: 15144580. Epub 2004/05/18. eng.

25. Smith TA, Idamakanti N, Rollence ML, Marshall-Neff J, Kim J, Mulgrew K, et al. Adenovirus serotype 5 fiber shaft influences in vivo gene transfer in mice. Hum Gene Ther. 2003 May 20;14(8):777-87. PubMed PMID: 12804140. Epub 2003/06/14. eng. 26. Shayakhmetov DM, Gaggar A, Ni S, Li ZY, Lieber A. Adenovirus binding to blood factors results in liver cell infection and hepatotoxicity. J Virol. 2005 Jun;79(12):7478-91. PubMed PMID: 15919903. Pubmed Central PMCID: 1143681. Epub 2005/05/28. eng.

27. Waddington SN, McVey JH, Bhella D, Parker AL, Barker K, Atoda H, et al. Adenovirus serotype 5 hexon mediates liver gene transfer. Cell. 2008 Feb 8;132(3):397- 409. PubMed PMID: 18267072. Epub 2008/02/13. eng.

28. Kalyuzhniy O, Di Paolo NC, Silvestry M, Hofherr SE, Barry MA, Stewart PL, et al. Adenovirus serotype 5 hexon is critical for virus infection of hepatocytes in vivo. Proc Natl Acad Sci U S A. 2008 Apr 8;105(14):5483-8. PubMed PMID: 18391209. Pubmed Central PMCID: 2291105. Epub 2008/04/09. eng.

29. Alba R, Bradshaw AC, Parker AL, Bhella D, Waddington SN, Nicklin SA, et al. Identification of coagulation factor $(F)X$ binding sites on the adenovirus serotype 5 hexon: effect of mutagenesis on FX interactions and gene transfer. Blood. 2009 Jul 30;114(5):965-71. PubMed PMID: 19429866. Pubmed Central PMCID: 2721791. Epub 2009/05/12. eng.

30. Alba R, Bradshaw AC, Coughlan L, Denby L, McDonald RA, Waddington SN, et al. Biodistribution and retargeting of FX-binding ablated adenovirus serotype 5 vectors. Blood. 2010 Oct 14;116(15):2656-64. PubMed PMID: 20610817. Pubmed Central PMCID: 2974579. Epub 2010/07/09. eng.

31. Short JJ, Rivera AA, Wu H, Walter MR, Yamamoto M, Mathis JM, et al. Substitution of adenovirus serotype 3 hexon onto a serotype 5 oncolytic adenovirus reduces factor X binding, decreases liver tropism, and improves antitumor efficacy. Mol Cancer Ther. 2010 Sep;9(9):2536-44. PubMed PMID: 20736345. Pubmed Central PMCID: 2945233. Epub 2010/08/26. eng.

32. Douglas JT, Rogers BE, Rosenfeld ME, Michael SI, Feng M, Curiel DT. Targeted gene delivery by tropism-modified adenoviral vectors. Nat Biotechnol. 1996 Nov;14(11):1574-8. PubMed PMID: 9634824. Epub 1996/11/01. eng.

33. Huch M, Abate-Daga D, Roig JM, Gonzalez JR, Fabregat J, Sosnowski B, et al. Targeting the CYP2B 1/cyclophosphamide suicide system to fibroblast growth factor receptors results in a potent antitumoral response in pancreatic cancer models. Hum Gene Ther. 2006 Dec;17(12):1187-200. PubMed PMID: 17069538. Epub 2006/10/31. eng.

34. Gu DL, Gonzalez AM, Printz MA, Doukas J, Ying W, D'Andrea M, et al. Fibroblast growth factor 2 retargeted adenovirus has redirected cellular tropism: evidence for reduced toxicity and enhanced antitumor activity in mice. Cancer Res. 1999 Jun 1;59(11):2608-14. PubMed PMID: 10363982. Epub 1999/06/11. eng.

35. Goldman CK, Rogers BE, Douglas JT, Sosnowski BA, Ying W, Siegal GP, et al. Targeted gene delivery to Kaposi's sarcoma cells via the fibroblast growth factor receptor. Cancer Res. 1997 Apr 15;57(8):1447-51. PubMed PMID: 9108444. Epub 1997/04/15. eng.

36. Printz MA, Gonzalez AM, Cunningham M, Gu DL, Ong M, Pierce GF, et al. Fibroblast growth factor 2-retargeted adenoviral vectors exhibit a modified biolocalization pattern and display reduced toxicity relative to native adenoviral vectors. Hum Gene Ther. 2000 Jan 1;11(1):191-204. PubMed PMID: 10646650. Epub 2000/01/26. eng.

37. Figures MR, Wobb J, Araki K, Liu T, Xu L, Zhu H, et al. Head and neck squamous cell carcinoma targeted chemosensitization. Otolaryngol Head Neck Surg. 2009 Aug;141(2):177-83. PubMed PMID: 19643248. Epub 2009/08/01. eng.

38. Araki K, Yamashita T, Reddy N, Wang H, Abuzeid WM, Khan K, et al. Molecular disruption of NBS1 with targeted gene delivery enhances chemosensitisation in head and neck cancer. Br J Cancer. 2010 Dec 7;103(12):1822-30. PubMed PMID: 21063405. Pubmed Central PMCID: 3008607. Epub 2010/11/11. eng.

39. Tillman BW, de Gruijl TD, Luykx-de Bakker SA, Scheper RJ, Pinedo HM, Curiel TJ, et al. Maturation of dendritic cells accompanies high-efficiency gene transfer by a CD40-targeted adenoviral vector. J Immunol. 1999 Jun 1;162(11):6378-83. PubMed PMID: 10352250. Epub 1999/06/03. eng.

40. Miller CR, Buchsbaum DJ, Reynolds PN, Douglas JT, Gillespie GY, Mayo MS, et al. Differential susceptibility of primary and established human glioma cells to adenovirus infection: targeting via the epidermal growth factor receptor achieves fiber receptor-independent gene transfer. Cancer Res. 1998 Dec 15;58(24):5738-48. PubMed PMID: 9865732. Epub 1998/12/29. eng.

41. Haisma HJ, Pinedo HM, Rijswijk A, der Meulen-Muileman I, Sosnowski BA, Ying W, et al. Tumor-specific gene transfer via an adenoviral vector targeted to the pancarcinoma antigen EpCAM. Gene Ther. 1999 Aug;6(8):1469-74. PubMed PMID: 10467371. Epub 1999/09/01. eng.

42. Kraaij R, van Rijswijk AL, Oomen MH, Haisma HJ, Bangma CH. Prostate specific membrane antigen (PSMA) is a tissue-specific target for adenoviral transduction of prostate cancer in vitro. Prostate. 2005 Feb 15;62(3):253-9. PubMed PMID: 15389777. Epub 2004/09/25. eng.

43. Kelly FJ, Miller CR, Buchsbaum DJ, Gomez-Navarro J, Barnes MN, Alvarez RD, et al. Selectivity of TAG-72-targeted adenovirus gene transfer to primary ovarian carcinoma cells versus autologous mesothelial cells in vitro. Clin Cancer Res. 2000 Nov;6(11):4323-33. PubMed PMID: 11106250. Epub 2000/12/06. eng.

44. Reynolds PN, Zinn KR, Gavrilyuk VD, Balyasnikova IV, Rogers BE, Buchsbaum DJ, et al. A targetable, injectable adenoviral vector for selective gene delivery to pulmonary endothelium in vivo. Mol Ther. 2000 Dec;2(6):562-78. PubMed PMID: 11124057. Epub 2000/12/22. eng.

45. Haisma HJ, Grill J, Curiel DT, Hoogeland S, van Beusechem VW, Pinedo HM, et al. Targeting of adenoviral vectors through a bispecific single-chain antibody. Cancer Gene Ther. 2000 Jun;7(6):901-4. PubMed PMID: 10880021. Epub 2000/07/06. eng. 46. Haisma HJ, Kamps GK, Bouma A, Geel TM, Rots MG, Kariath A, et al. Selective targeting of adenovirus to alphavbeta3 integrins, VEGFR2 and Tie2 endothelial receptors by angio-adenobodies. Int J Pharm. 2010 May 31;391(1-2):155-61. PubMed PMID: 20211716. Epub 2010/03/10. eng.

47. Carette JE, Graat HC, Schagen FH, Mastenbroek DC, Rots MG, Haisma HJ, et al. A conditionally replicating adenovirus with strict selectivity in killing cells expressing epidermal growth factor receptor. Virology. 2007 Apr 25;361(1):56-67. PubMed PMID: 17184803. Epub 2006/12/23. eng.

48. Grill J, Van Beusechem VW, Van Der Valk P, Dirven CM, Leonhart A, Pherai DS, et al. Combined targeting of adenoviruses to integrins and epidermal growth factor receptors increases gene transfer into primary glioma cells and spheroids. Clin Cancer Res. 2001 Mar;7(3):641-50. PubMed PMID: 11297260. Epub 2001/04/12. eng.

49. Heideman DA, van Beusechem VW, Offerhaus GJ, Wickham TJ, Roelvink PW, Craanen ME, et al. Selective gene transfer into primary human gastric tumors using epithelial cell adhesion molecule-targeted adenoviral vectors with ablated native tropism. Hum Gene Ther. 2002 Sep 20;13(14):1677-85. PubMed PMID: 12396621. Epub 2002/10/25. eng.

50. Nettelbeck DM, Miller DW, Jerome V, Zuzarte M, Watkins SJ, Hawkins RE, et al. Targeting of adenovirus to endothelial cells by a bispecific single-chain diabody directed against the adenovirus fiber knob domain and human endoglin (CD105). Mol Ther. 2001 Jun;3(6):882-91. PubMed PMID: 11407902. Epub 2001/06/16. eng.

51. Nettelbeck DM, Rivera AA, Kupsch J, Dieckmann D, Douglas JT, Kontermann RE, et al. Retargeting of adenoviral infection to melanoma: combining genetic ablation of native tropism with a recombinant bispecific single-chain diabody (scDb) adapter that

binds to fiber knob and HMWMAA. Int J Cancer. 2004 Jan 1;108(1):136-45. PubMed PMID: 14618628. Epub 2003/11/18. eng.

52. Dmitriev I, Kashentseva E, Rogers BE, Krasnykh V, Curiel DT. Ectodomain of coxsackievirus and adenovirus receptor genetically fused to epidermal growth factor mediates adenovirus targeting to epidermal growth factor receptor-positive cells. J Virol. 2000 Aug;74(15):6875-84. PubMed PMID: 10888627. Pubmed Central PMCID: 112205. Epub 2000/07/11. eng.

53. Harvey TJ, Burdon D, Steele L, Ingram N, Hall GD, Selby PJ, et al. Retargeted adenoviral cancer gene therapy for tumour cells overexpressing epidermal growth factor receptor or urokinase-type plasminogen activator receptor. Gene Ther. 2010 Aug;17(8):1000-10. PubMed PMID: 20410926. Epub 2010/04/23. eng.

54. Everts M, Kim-Park SA, Preuss MA, Passineau MJ, Glasgow JN, Pereboev AV, et al. Selective induction of tumor-associated antigens in murine pulmonary vasculature using double-targeted adenoviral vectors. Gene Ther. 2005 Jul;12(13):1042-8. PubMed PMID: 15789059. Epub 2005/03/25. eng.

55. Li HJ, Everts M, Yamamoto M, Curiel DT, Herschman HR. Combined transductional untargeting/retargeting and transcriptional restriction enhances adenovirus gene targeting and therapy for hepatic colorectal cancer tumors. Cancer Res. 2009 Jan 15;69(2):554-64. PubMed PMID: 19147569. Pubmed Central PMCID: 2823090. Epub 2009/01/17. eng.

56. Barker SD, Dmitriev IP, Nettelbeck DM, Liu B, Rivera AA, Alvarez RD, et al. Combined transcriptional and transductional targeting improves the specificity and efficacy of adenoviral gene delivery to ovarian carcinoma. Gene Ther. 2003 Jul;10(14):1198-204. PubMed PMID: 12833129. Epub 2003/07/02. eng.

57. Hakkarainen T, Hemminki A, Pereboev AV, Barker SD, Asiedu CK, Strong TV, et al. CD40 is expressed on ovarian cancer cells and can be utilized for targeting adenoviruses. Clin Cancer Res. 2003 Feb;9(2):619-24. PubMed PMID: 12576427. Epub 2003/02/11. eng.

58. Ebbinghaus C, Al-Jaibaji A, Operschall E, Schoffel A, Peter I, Greber UF, et al. Functional and selective targeting of adenovirus to high-affinity Fcgamma receptor Ipositive cells by using a bispecific hybrid adapter. J Virol. 2001 Jan;75(1):480-9. PubMed PMID: 11119616. Pubmed Central PMCID: 113940. Epub 2000/12/19. eng.

59. Kashentseva EA, Seki T, Curiel DT, Dmitriev IP. Adenovirus targeting to c-erbB-2 oncoprotein by single-chain antibody fused to trimeric form of adenovirus receptor ectodomain. Cancer Res. 2002 Jan 15;62(2):609-16. PubMed PMID: 11809717. Epub 2002/01/26. eng.

60. Kim J, Smith T, Idamakanti N, Mulgrew K, Kaloss M, Kylefjord H, et al. Targeting adenoviral vectors by using the extracellular domain of the coxsackieadenovirus receptor: improved potency via trimerization. J Virol. 2002 Feb;76(4):1892-

903. PubMed PMID: 11799184. Pubmed Central PMCID: 135917. Epub 2002/01/19. eng.

61. Li E, Brown SL, Von Seggern DJ, Brown GB, Nemerow GR. Signaling antibodies complexed with adenovirus circumvent CAR and integrin interactions and improve gene delivery. Gene Ther. 2000 Sep;7(18):1593-9. PubMed PMID: 11021598. Epub 2000/10/06. eng.

62. Chen CY, May SM, Barry MA. Targeting adenoviruses with factor x-single-chain antibody fusion proteins. Hum Gene Ther. 2010 Jun;21(6):739-49. PubMed PMID: 20331369. Pubmed Central PMCID: 2922071. Epub 2010/03/25. eng.

63. Takahashi S, Kato K, Nakamura K, Nakano R, Kubota K, Hamada H. Neural cell adhesion molecule 2 as a target molecule for prostate and breast cancer gene therapy. Cancer Sci. 2011 Apr;102(4):808-14. PubMed PMID: 21214674. Epub 2011/01/11. eng.

64. Korokhov N, de Gruijl TD, Aldrich WA, Triozzi PL, Banerjee PT, Gillies SD, et al. High efficiency transduction of dendritic cells by adenoviral vectors targeted to DC-SIGN. Cancer Biol Ther. 2005 Mar;4(3):289-94. PubMed PMID: 15753654. Epub 2005/03/09. eng.

65. Breidenbach M, Rein DT, Everts M, Glasgow JN, Wang M, Passineau MJ, et al. Mesothelin-mediated targeting of adenoviral vectors for ovarian cancer gene therapy. Gene Ther. 2005 Jan;12(2):187-93. PubMed PMID: 15526007. Epub 2004/11/05. eng.

66. Henning P, Andersson KM, Frykholm K, Ali A, Magnusson MK, Nygren PA, et al. Tumor cell targeted gene delivery by adenovirus 5 vectors carrying knobless fibers with antibody-binding domains. Gene Ther. 2005 Feb;12(3):211-24. PubMed PMID: 15510176. Epub 2004/10/29. eng.

67. Pereboeva L, Komarova S, Roth J, Ponnazhagan S, Curiel DT. Targeting EGFR with metabolically biotinylated fiber-mosaic adenovirus. Gene Ther. 2007 Apr;14(8):627-37. PubMed PMID: 17251987. Pubmed Central PMCID: 2203207. Epub 2007/01/26. eng.

68. Parrott MB, Adams KE, Mercier GT, Mok H, Campos SK, Barry MA. Metabolically biotinylated adenovirus for cell targeting, ligand screening, and vector purification. Mol Ther. 2003 Oct;8(4):688-700. PubMed PMID: 14529842. Epub 2003/10/08. eng.

69. Campos SK, Parrott MB, Barry MA. Avidin-based targeting and purification of a protein IX-modified, metabolically biotinylated adenoviral vector. Mol Ther. 2004 Jun;9(6):942-54. PubMed PMID: 15194061. Epub 2004/06/15. eng.

70. Glasgow JN, Mikheeva G, Krasnykh V, Curiel DT. A strategy for adenovirus vector targeting with a secreted single chain antibody. PLoS One. 2009;4(12):e8355. PubMed PMID: 20027223. Pubmed Central PMCID: 2791226. Epub 2009/12/23. eng.

71. Rocconi RP, Zhu ZB, Stoff-Khalili M, Rivera AA, Lu B, Wang M, et al. Treatment of ovarian cancer with a novel dual targeted conditionally replicative

adenovirus (CRAd). Gynecol Oncol. 2007 Apr;105(1):113-21. PubMed PMID: 17173958. Epub 2006/12/19. eng.

72. Rein DT, Volkmer A, Beyer IM, Curiel DT, Janni W, Dragoi A, et al. Treatment of chemotherapy resistant ovarian cancer with a MDR1 targeted oncolytic adenovirus. Gynecol Oncol. 2011 Jul 7. PubMed PMID: 21741695. Epub 2011/07/12. Eng.

73. Murakami M, Ugai H, Belousova N, Pereboev A, Dent P, Fisher PB, et al. Chimeric adenoviral vectors incorporating a fiber of human adenovirus 3 efficiently mediate gene transfer into prostate cancer cells. Prostate. 2010 Mar 1;70(4):362-76. PubMed PMID: 19902467. Pubmed Central PMCID: 2862273. Epub 2009/11/11. eng.

74. Stoff-Khalili MA, Rivera AA, Stoff A, Michael Mathis J, Rocconi RP, Matthews QL, et al. Combining high selectivity of replication via CXCR4 promoter with fiber chimerism for effective adenoviral oncolysis in breast cancer. Int J Cancer. 2007 Feb 15;120(4):935-41. PubMed PMID: 17131341. Epub 2006/11/30. eng.

75. Silver J, Mei YF. Transduction and oncolytic profile of a potent replicationcompetent adenovirus 11p vector (RCAd11pGFP) in colon carcinoma cells. PLoS One. 2011;6(3):e17532. PubMed PMID: 21455297. Pubmed Central PMCID: 3063781. Epub 2011/04/02. eng.

76. Hoffmann D, Meyer B, Wildner O. Improved glioblastoma treatment with Ad5/35 fiber chimeric conditionally replicating adenoviruses. J Gene Med. 2007 Sep;9(9):764- 78. PubMed PMID: 17640083. Epub 2007/07/21. eng.

77. Gaggar A, Shayakhmetov DM, Lieber A. CD46 is a cellular receptor for group B adenoviruses. Nat Med. 2003 Nov;9(11):1408-12. PubMed PMID: 14566335. Epub 2003/10/21. eng.

78. Short JJ, Pereboev AV, Kawakami Y, Vasu C, Holterman MJ, Curiel DT. Adenovirus serotype 3 utilizes CD80 (B7.1) and CD86 (B7.2) as cellular attachment receptors. Virology. 2004 May 1;322(2):349-59. PubMed PMID: 15110532. Epub 2004/04/28. eng.

79. Arnberg N, Edlund K, Kidd AH, Wadell G. Adenovirus type 37 uses sialic acid as a cellular receptor. J Virol. 2000 Jan;74(1):42-8. PubMed PMID: 10590089. Pubmed Central PMCID: 111511. Epub 1999/12/10. eng.

80. Glasgow JN, Kremer EJ, Hemminki A, Siegal GP, Douglas JT, Curiel DT. An adenovirus vector with a chimeric fiber derived from canine adenovirus type 2 displays novel tropism. Virology. 2004 Jun 20;324(1):103-16. PubMed PMID: 15183058. Epub 2004/06/09. eng.

81. Renaut L, Colin M, Leite JP, Benko M, D'Halluin JC. Abolition of hCARdependent cell tropism using fiber knobs of Atadenovirus serotypes. Virology. 2004 Apr 10;321(2):189-204. PubMed PMID: 15051380. Epub 2004/03/31. eng.

82. Bangari DS, Mittal SK. Porcine adenovirus serotype 3 internalization is independent of CAR and alphavbeta3 or alphavbeta5 integrin. Virology. 2005 Feb 5;332(1):157-66. PubMed PMID: 15661148. Epub 2005/01/22. eng.

83. Bangari DS, Shukla S, Mittal SK. Comparative transduction efficiencies of human and nonhuman adenoviral vectors in human, murine, bovine, and porcine cells in culture. Biochem Biophys Res Commun. 2005 Feb 18;327(3):960-6. PubMed PMID: 15649439. Epub 2005/01/15. eng.

84. Nakayama M, Both GW, Banizs B, Tsuruta Y, Yamamoto S, Kawakami Y, et al. An adenovirus serotype 5 vector with fibers derived from ovine atadenovirus demonstrates CAR-independent tropism and unique biodistribution in mice. Virology. 2006 Jun 20;350(1):103-15. PubMed PMID: 16516257. Epub 2006/03/07. eng.

85. Guardado-Calvo P, Munoz EM, Llamas-Saiz AL, Fox GC, Kahn R, Curiel DT, et al. Crystallographic structure of porcine adenovirus type 4 fiber head and galectin domains. J Virol. 2010 Oct;84(20):10558-68. PubMed PMID: 20686025. Pubmed Central PMCID: 2950603. Epub 2010/08/06. eng.

86. Grellier E, Lecolle K, Rogee S, Couturier C, D'Halluin JC, Hong SS, et al. A fiber-modified adenoviral vector interacts with immunoevasion molecules of the B7 family at the surface of murine leukemia cells derived from dormant tumors. Mol Cancer. 2011;10:105. PubMed PMID: 21884581. Pubmed Central PMCID: 3180432. Epub 2011/09/03. eng.

87. Tsuruta Y, Pereboeva L, Glasgow JN, Luongo CL, Komarova S, Kawakami Y, et al. Reovirus sigma1 fiber incorporated into adenovirus serotype 5 enhances infectivity via a CAR-independent pathway. Biochem Biophys Res Commun. 2005 Sep 16;335(1):205- 14. PubMed PMID: 16061208. Epub 2005/08/03. eng.

88. Wickham TJ, Tzeng E, Shears LL, 2nd, Roelvink PW, Li Y, Lee GM, et al. Increased in vitro and in vivo gene transfer by adenovirus vectors containing chimeric fiber proteins. J Virol. 1997 Nov;71(11):8221-9. PubMed PMID: 9343173. Pubmed Central PMCID: 192279. Epub 1997/10/29. eng.

89. Krasnykh V, Dmitriev I, Mikheeva G, Miller CR, Belousova N, Curiel DT. Characterization of an adenovirus vector containing a heterologous peptide epitope in the HI loop of the fiber knob. J Virol. 1998 Mar;72(3):1844-52. PubMed PMID: 9499035. Pubmed Central PMCID: 109474. Epub 1998/03/14. eng.

90. Belousova N, Krendelchtchikova V, Curiel DT, Krasnykh V. Modulation of adenovirus vector tropism via incorporation of polypeptide ligands into the fiber protein. J Virol. 2002 Sep;76(17):8621-31. PubMed PMID: 12163581. Pubmed Central PMCID: 136983. Epub 2002/08/07. eng.

91. Dmitriev I, Krasnykh V, Miller CR, Wang M, Kashentseva E, Mikheeva G, et al. An adenovirus vector with genetically modified fibers demonstrates expanded tropism via utilization of a coxsackievirus and adenovirus receptor-independent cell entry mechanism. J Virol. 1998 Dec;72(12):9706-13. PubMed PMID: 9811704. Pubmed Central PMCID: 110480. Epub 1998/11/13. eng.

92. Hemminki A, Belousova N, Zinn KR, Liu B, Wang M, Chaudhuri TR, et al. An adenovirus with enhanced infectivity mediates molecular chemotherapy of ovarian cancer cells and allows imaging of gene expression. Mol Ther. 2001 Sep;4(3):223-31. PubMed PMID: 11545613. Epub 2001/09/08. eng.

93. Murugesan SR, Akiyama M, Einfeld DA, Wickham TJ, King CR. Experimental treatment of ovarian cancers by adenovirus vectors combining receptor targeting and selective expression of tumor necrosis factor. Int J Oncol. 2007 Oct;31(4):813-22. PubMed PMID: 17786312. Epub 2007/09/06. eng.

94. Rein DT, Breidenbach M, Wu H, Han T, Haviv YS, Wang M, et al. Gene transfer to cervical cancer with fiber-modified adenoviruses. Int J Cancer. 2004 Sep 20;111(5):698-704. PubMed PMID: 15252838. Epub 2004/07/15. eng.

95. Lavilla-Alonso S, Bauerschmitz G, Abo-Ramadan U, Halavaara J, Escutenaire S, Diaconu I, et al. Adenoviruses with an alphavbeta integrin targeting moiety in the fiber shaft or the HI-loop increase tumor specificity without compromising antitumor efficacy in magnetic resonance imaging of colorectal cancer metastases. J Transl Med. 2010;8:80. PubMed PMID: 20727221. Pubmed Central PMCID: 2936307. Epub 2010/08/24. eng.

96. Okada Y, Okada N, Mizuguchi H, Hayakawa T, Nakagawa S, Mayumi T. Transcriptional targeting of RGD fiber-mutant adenovirus vectors can improve the safety of suicide gene therapy for murine melanoma. Cancer Gene Ther. 2005 Jul;12(7):608-16. PubMed PMID: 15746944. Epub 2005/03/05. eng.

97. Bockmann M, Drosten M, Putzer BM. Discovery of targeting peptides for selective therapy of medullary thyroid carcinoma. J Gene Med. 2005 Feb;7(2):179-88. PubMed PMID: 15508130. Epub 2004/10/28. eng.

98. Nishimoto T, Yoshida K, Miura Y, Kobayashi A, Hara H, Ohnami S, et al. Oncolytic virus therapy for pancreatic cancer using the adenovirus library displaying random peptides on the fiber knob. Gene Ther. 2009 May;16(5):669-80. PubMed PMID: 19225547. Epub 2009/02/20. eng.

99. Miura Y, Yoshida K, Nishimoto T, Hatanaka K, Ohnami S, Asaka M, et al. Direct selection of targeted adenovirus vectors by random peptide display on the fiber knob. Gene Ther. 2007 Oct;14(20):1448-60. PubMed PMID: 17700705. Epub 2007/08/19. eng. 100. Nicklin SA, Dishart KL, Buening H, Reynolds PN, Hallek M, Nemerow GR, et al. Transductional and transcriptional targeting of cancer cells using genetically engineered viral vectors. Cancer Lett. 2003 Nov 25;201(2):165-73. PubMed PMID: 14607330. Epub 2003/11/11. eng.

101. Li D, Guang W, Abuzeid WM, Roy S, Gao GP, Sauk JJ, et al. Novel adenoviral gene delivery system targeted against head and neck cancer. Laryngoscope. 2008 Apr;118(4):650-8. PubMed PMID: 18176343. Epub 2008/01/08. eng.

102. Schmidt A, Eipel C, Furst K, Sommer N, Pahnke J, Putzer BM. Evaluation of systemic targeting of RET oncogene-based MTC with tumor-selective peptide-tagged Ad vectors in clinical mouse models. Gene Ther. 2011 Apr;18(4):418-23. PubMed PMID: 21228881. Epub 2011/01/14. eng.

103. Piao Y, Jiang H, Alemany R, Krasnykh V, Marini FC, Xu J, et al. Oncolytic adenovirus retargeted to Delta-EGFR induces selective antiglioma activity. Cancer Gene Ther. 2009 Mar;16(3):256-65. PubMed PMID: 18927600. Epub 2008/10/18. eng. 104. Diaconu I, Denby L, Pesonen S, Cerullo V, Bauerschmitz GJ, Guse K, et al.

Serotype chimeric and fiber-mutated adenovirus Ad5/19p-HIT for targeting renal cancer and untargeting the liver. Hum Gene Ther. 2009 Jun;20(6):611-20. PubMed PMID: 19239383. Epub 2009/02/26. eng.

105. Myhre S, Henning P, Friedman M, Stahl S, Lindholm L, Magnusson MK. Retargeted adenovirus vectors with dual specificity; binding specificities conferred by two different Affibody molecules in the fiber. Gene Ther. 2009 Feb;16(2):252-61. PubMed PMID: 18946496. Epub 2008/10/24. eng.

106. Magnusson MK, Kraaij R, Leadley RM, De Ridder CM, van Weerden WM, Van Schie KA, et al. A Transductionally Retargeted Adenoviral Vector for Virotherapy of Her2/neu-Expressing Prostate Cancer. Hum Gene Ther. 2011 Oct 12. PubMed PMID: 21875358. Epub 2011/08/31. Eng.

107. Papanikolopoulou K, Forge V, Goeltz P, Mitraki A. Formation of highly stable chimeric trimers by fusion of an adenovirus fiber shaft fragment with the foldon domain of bacteriophage t4 fibritin. J Biol Chem. 2004 Mar 5;279(10):8991-8. PubMed PMID: 14699113. Epub 2003/12/31. eng.

108. Krasnykh V, Belousova N, Korokhov N, Mikheeva G, Curiel DT. Genetic targeting of an adenovirus vector via replacement of the fiber protein with the phage T4 fibritin. J Virol. 2001 May;75(9):4176-83. PubMed PMID: 11287567. Pubmed Central PMCID: 114163. Epub 2001/04/05. eng.

109. Magnusson MK, Hong SS, Boulanger P, Lindholm L. Genetic retargeting of adenovirus: novel strategy employing "deknobbing" of the fiber. J Virol. 2001 Aug;75(16):7280-9. PubMed PMID: 11462000. Pubmed Central PMCID: 114963. Epub 2001/07/20. eng.

110. Belousova N, Mikheeva G, Gelovani J, Krasnykh V. Modification of adenovirus capsid with a designed protein ligand yields a gene vector targeted to a major molecular marker of cancer. J Virol. 2008 Jan;82(2):630-7. PubMed PMID: 17989185. Pubmed Central PMCID: 2224583. Epub 2007/11/09. eng.

111. Izumi M, Kawakami Y, Glasgow JN, Belousova N, Everts M, Kim-Park S, et al. In vivo analysis of a genetically modified adenoviral vector targeted to human CD40 using a novel transient transgenic model. J Gene Med. 2005 Dec;7(12):1517-25. PubMed PMID: 16170831. Epub 2005/09/20. eng.

112. San Martin C, Glasgow JN, Borovjagin A, Beatty MS, Kashentseva EA, Curiel DT, et al. Localization of the N-terminus of minor coat protein IIIa in the adenovirus capsid. J Mol Biol. 2008 Nov 21;383(4):923-34. PubMed PMID: 18786542. Pubmed Central PMCID: 2652759. Epub 2008/09/13. eng.

113. Vigne E, Mahfouz I, Dedieu JF, Brie A, Perricaudet M, Yeh P. RGD inclusion in the hexon monomer provides adenovirus type 5-based vectors with a fiber knobindependent pathway for infection. J Virol. 1999 Jun;73(6):5156-61. PubMed PMID: 10233980. Pubmed Central PMCID: 112562. Epub 1999/05/11. eng.

114. Wu H, Han T, Belousova N, Krasnykh V, Kashentseva E, Dmitriev I, et al. Identification of sites in adenovirus hexon for foreign peptide incorporation. J Virol. 2005 Mar;79(6):3382-90. PubMed PMID: 15731232. Pubmed Central PMCID: 1075677. Epub 2005/02/26. eng.

115. Dmitriev IP, Kashentseva EA, Curiel DT. Engineering of adenovirus vectors containing heterologous peptide sequences in the C terminus of capsid protein IX. J Virol. 2002 Jul;76(14):6893-9. PubMed PMID: 12072490. Pubmed Central PMCID: 136342. Epub 2002/06/20. eng.

116. Vellinga J, Rabelink MJ, Cramer SJ, van den Wollenberg DJ, Van der Meulen H, Leppard KN, et al. Spacers increase the accessibility of peptide ligands linked to the carboxyl terminus of adenovirus minor capsid protein IX. J Virol. 2004 Apr;78(7):3470- 9. PubMed PMID: 15016870. Pubmed Central PMCID: 371045. Epub 2004/03/16. eng. 117. Vellinga J, de Vrij J, Myhre S, Uil T, Martineau P, Lindholm L, et al. Efficient incorporation of a functional hyper-stable single-chain antibody fragment protein-IX fusion in the adenovirus capsid. Gene Ther. 2007 Apr;14(8):664-70. PubMed PMID: 17268536. Pubmed Central PMCID: 2233715. Epub 2007/02/03. eng.

118. Poulin KL, Lanthier RM, Smith AC, Christou C, Risco Quiroz M, Powell KL, et al. Retargeting of adenovirus vectors through genetic fusion of a single-chain or singledomain antibody to capsid protein IX. J Virol. 2010 Oct;84(19):10074-86. PubMed PMID: 20631131. Pubmed Central PMCID: 2937758. Epub 2010/07/16. eng.

119. de Vrij J, Uil TG, van den Hengel SK, Cramer SJ, Koppers-Lalic D, Verweij MC, et al. Adenovirus targeting to HLA-A1/MAGE-A1-positive tumor cells by fusing a single-chain T-cell receptor with minor capsid protein IX. Gene Ther. 2008 Jul;15(13):978-89. PubMed PMID: 18323790. Epub 2008/03/08. eng.

120. Wu H, Seki T, Dmitriev I, Uil T, Kashentseva E, Han T, et al. Double modification of adenovirus fiber with RGD and polylysine motifs improves coxsackievirus-adenovirus receptor-independent gene transfer efficiency. Hum Gene Ther. 2002 Sep 1;13(13):1647-53. PubMed PMID: 12228019. Epub 2002/09/14. eng.

121. Borovjagin AV, Krendelchtchikov A, Ramesh N, Yu DC, Douglas JT, Curiel DT. Complex mosaicism is a novel approach to infectivity enhancement of adenovirus type 5 based vectors. Cancer Gene Ther. 2005 May;12(5):475-86. PubMed PMID: 15706356. Epub 2005/02/12. eng.

122. Pereboeva L, Komarova S, Mahasreshti PJ, Curiel DT. Fiber-mosaic adenovirus as a novel approach to design genetically modified adenoviral vectors. Virus Res. 2004 Sep 15;105(1):35-46. PubMed PMID: 15325079. Epub 2004/08/25. eng.

123. Tsuruta Y, Pereboeva L, Glasgow JN, Rein DT, Kawakami Y, Alvarez RD, et al. A mosaic fiber adenovirus serotype 5 vector containing reovirus sigma 1 and adenovirus serotype 3 knob fibers increases transduction in an ovarian cancer ex vivo system via a coxsackie and adenovirus receptor-independent pathway. Clin Cancer Res. 2007 May 1;13(9):2777-83. PubMed PMID: 17473211. Pubmed Central PMCID: 2211731. Epub 2007/05/03. eng.

124. Murakami M, Ugai H, Wang M, Belousova N, Dent P, Fisher PB, et al. An adenoviral vector expressing human adenovirus 5 and 3 fiber proteins for targeting heterogeneous cell populations. Virology. 2010 Nov 25;407(2):196-205. PubMed PMID: 20828776. Epub 2010/09/11. eng.

125. Page JG, Tian B, Schweikart K, Tomaszewski J, Harris R, Broadt T, et al. Identifying the safety profile of a novel infectivity-enhanced conditionally replicative adenovirus, Ad5-delta24-RGD, in anticipation of a phase I trial for recurrent ovarian cancer. Am J Obstet Gynecol. 2007 Apr;196(4):389 e1-9; discussion e9-10. PubMed PMID: 17403430. Epub 2007/04/04. eng.

126. Kimball KJ, Preuss MA, Barnes MN, Wang M, Siegal GP, Wan W, et al. A phase I study of a tropism-modified conditionally replicative adenovirus for recurrent malignant gynecologic diseases. Clin Cancer Res. 2010 Nov 1;16(21):5277-87. PubMed PMID: 20978148. Pubmed Central PMCID: 2970766. Epub 2010/10/28. eng.

127. Nokisalmi P, Pesonen S, Escutenaire S, Sarkioja M, Raki M, Cerullo V, et al. Oncolytic adenovirus ICOVIR-7 in patients with advanced and refractory solid tumors. Clin Cancer Res. 2010 Jun 1;16(11):3035-43. PubMed PMID: 20501623. Epub 2010/05/27. eng.

128. Pesonen S, Diaconu I, Cerullo V, Escutenaire S, Raki M, Kangasniemi L, et al. Integrin targeted oncolytic adenoviruses Ad5-D24-RGD and Ad5-RGD-D24-GMCSF for treatment of patients with advanced chemotherapy refractory solid tumors. Int J Cancer. 2011 May 31. PubMed PMID: 21630267. Epub 2011/06/02. Eng.

129. Kim KH, Ryan MJ, Estep JE, Miniard BM, Rudge TL, Peggins JO, et al. A new generation of serotype chimeric infectivity-enhanced conditionally replicative adenovirals: the safety profile of ad5/3-Delta24 in advance of a phase I clinical trial in ovarian cancer patients. Hum Gene Ther. 2011 Jul;22(7):821-8. PubMed PMID: 21171861. Pubmed Central PMCID: 3135257. Epub 2010/12/22. eng.

130. Pesonen S, Nokisalmi P, Escutenaire S, Sarkioja M, Raki M, Cerullo V, et al. Prolonged systemic circulation of chimeric oncolytic adenovirus Ad5/3-Cox2L-D24 in patients with metastatic and refractory solid tumors. Gene Ther. 2010 Jul;17(7):892-904. PubMed PMID: 20237509. Epub 2010/03/20. eng.

131. Matthews K, Noker PE, Tian B, Grimes SD, Fulton R, Schweikart K, et al. Identifying the safety profile of Ad5.SSTR/TK.RGD, a novel infectivity-enhanced bicistronic adenovirus, in anticipation of a phase I clinical trial in patients with recurrent ovarian cancer. Clin Cancer Res. 2009 Jun 15;15(12):4131-7. PubMed PMID: 19509153. Epub 2009/06/11. eng.

CHAPTER III: AUGMENTED ADENOVIRUS TRANSDUCTION OF MURINE T LYMPHOCYTES UTILIZING A BI-SPECIFIC PROTEIN TARGETING MURINE INTERLEUKIN 2 RECEPTOR

by

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Accepted into *Cancer Gene Therapy*

Format adapted for dissertation

ABSTRACT

Adenoviruses are currently used in a variety of bench and bedside applications. However, their employment in gene delivery to lymphocyte lineages is hampered by the lack of coxsackie virus and adenovirus receptor on the cell surface. Exploitation of an alternative receptor on the surface of T lymphocytes can allow for utilization of adenovirus in a variety of T lymphocyte based diseases and therapies. Here, we describe how resistance to infection can be overcome by the utilization of a bi-specific fusion protein, sCAR-mIL-2, that retargets adenovirus to the murine interleukin 2 receptor. Infection of a murine T cell line, CTLL-2, with a sCAR-mIL-2/Adenovirus conjugate provided a 9-fold increase in both green fluorescence protein positive cells and luciferase expression. In addition, this increase in infection was also seen in isolated primary murine T lymphocytes. In this context, the sCAR-mIL-2 adapter provided a 4-fold gene transduction increase in activated primary murine T lymphocytes. Our results show that recombinant sCAR-mIL-2 fusion protein promotes interleukin 2 receptor targeted gene transfer to murine T lymphocytes and that alternative targeting can abrogate their native resistance to infection.

ABBREVIATIONS

adenovirus type 5 (Ad5); coxsackie virus and adenovirus receptor (CAR); fetal bovine serum (FBS); green fluorescence protein (GFP); human embryonic kidney (HEK); interleukin 2 receptor (IL-2R); murine interleukin 2 (mIL-2); ubiquitin c promoter (UP)

KEYWORDS

adenovirus; bi-specific adapter; gene transfer; interleukin 2; T lymphocyte; targeting
The utilization of genetically modified T lymphocytes has gained much attention in treating a variety of disorders including autoimmune disorders, cancer, infectious disease, and transplant rejection [\(1-3\)](#page-114-0). Current vector strategies rely upon lentivirus and retrovirus vectors for genetic delivery. These strategies, however, are hampered by variety of vector-related issues. Ineffective transduction [\(4\)](#page-114-1), low viral titers, and their reliance upon host cell-cycle progression [\(5\)](#page-114-2) all impede the full utilization of these vectors. In addition, such vectors raise biosafety concerns such as the occurrence of insertional oncogenesis [\(6,](#page-114-3) [7\)](#page-114-4) and dysregulation [\(8\)](#page-114-5) due to vector integration. In principle, adenoviruses type 5-based vectors (Ad5) retain many properties that could be utilized in genetically modifying T cells. However, full utilization is confounded biologically by the lack of coxsackie virus and adenovirus receptor (CAR) expression in T cells [\(9,](#page-114-6) [10\)](#page-114-7).

To surmount CAR deficiency, multiple strategies have been endeavored to reroute adenoviral into non-CAR pathways. Most of these strategies have included genetically modifying Ad5 to retarget new cellular receptors such as CD46 and $\alpha \nu \beta$ 3 and $\alpha \nu \beta$ 5 integrins [\(11-15\)](#page-115-0). In addition, strategies involving the use adapter molecules like bispecific antibody conjugates against CD3 [\(16\)](#page-115-1), and the use of non-genetic methods of transduction using lipofectamine [\(17\)](#page-115-2) have been endeavored. However, the gains from these approaches have not achieved practical levels of utility.

With this in mind, we endeavored to reroute adenovirus into a CAR independent pathway that would provide enhanced transduction of T lymphocytes. Of the possible T lymphocyte specific targets, interleukin 2 receptor (IL-2R) represented a potentially useful candidate. As an Ad5 retargeting receptor, IL-2R is T lymphocyte specific and

highly expressed in therapeutic T lymphocyte populations such as $CD4+Foxp3+$ regulatory T lymphocytes and activated $CD4^+$ and $CD8^+$ T lymphocytes [\(18\)](#page-115-3). Here, we explored a novel strategy utilizing a bi-specific protein/adapter composed of soluble CAR fused to murine interleukin 2 (mIL-2) to target adenovirus to murine T lymphocytes. We show that this adapter remains biologically active and does not lose its binding potential to IL-2R. More importantly, this adapter promotes improved levels of gene transduction in both murine T cell cultures and primary murine T lymphocytes. These data indicate that alternative targeting strategies to T lymphocytes can yield enhanced levels of gene delivery and, as such, Ad5 may be a novel tool in T lymphocyte-based treatments of disease.

MATERIALS AND METHODS

Animals

C57BL/6J mice (Jackson Laboratory, Bar Harbor, ME, USA) between the ages of 6 to 10 weeks old were used in this study. All methods were approved by the Institutional Animal Care and Use Committee (IACUC) at Washington University at St.Louis and performed according to their and the National Institutes of Health guidelines.

Cell Lines

Human embryonic kidney (HEK) 293 [\(19\)](#page-115-4), HEK293T, CTLL-2 (ATCC, Manassas, VA, USA), and HEK293A (Invitrogen, Grand Island, NY, USA) cells were used in this study. HEK293, HEK293T, and HEK293A cells were cultured in Dulbecco's Modified Eagle's Medium/Nutrient Mixture F-12 Ham, (Sigma-Aldrich, St. Louis, MO,

USA) containing 10% fetal bovine serum (FBS) (Hyclone, Logan, UT, USA), 2 mM Lglutamine, 100 U/ml penicillin and 100 μg/ml streptomycin (Mediatech Inc., Manassas, VA, USA). CTLL-2 cells were cultured in RPMI 1640 (Invitrogen) containing 10% FBS, 100 U/ml penicillin, 100 μg/ml streptomycin, 50 μg/ml beta-mercaptoethanol, and 10 U/ml recombinant human interleukin 2 (eBioscience, San Diego, CA, USA). All cells were propagated at 37 °C in a 5% $CO₂$ atmosphere. The cell lines infected with the Ad5 vectors were maintained using the corresponding cell culture medium but containing 2% instead of 10% FBS.

Primary T Lymphocytes

Primary T lymphocytes were isolated from harvested spleens of C57BL/6J mice. A single cell suspension of splenocytes was made by straining cells through a 70 µm nylon mesh screen. Primary T lymphocytes were then purified by magnetic bead isolation using a Pan T Cell Isolation Kit II (Miltenyi Biotec Inc., Auburn, CA, USA) according to the manufacturer's directions. Isolated primary T lymphocytes were then immediately used for infection studies or incubated using a T Cell Activation/Expansion Kit (Miltenyi Biotec Inc.).

Construction of Recombinant Adenovirus Plasmids

Ad5GL plasmid, encoding an adenovirus expressing both green fluorescence protein (GFP) and firefly luciferase under CMV promoters, was constructed as previously described [\(20\)](#page-115-5). The adenovirus shuttle plasmid, pSH-UP-UP-GFP (R) [\(21\)](#page-115-6), contains an ubiquitin c promoter (UP) driving expression of GFP and a second ubiquitin c promoter

with a multiple cloning site downstream. This plasmid was then digested with NotI and the larger fragment re-ligated, creating a shuttle plasmid with only one ubiquitin c promoter driving GFP, pShUP-GFP.

Adenoviral Vectors

The recombinant adenoviral plasmids were linearized by PacI and transfected into HEK293 cells using Lipofectamine 2000 reagent (Invitrogen). All vectors propagated in HEK293 cells were purified by two rounds of CsCl gradient ultracentrifugation [\(22\)](#page-115-7). CsCl was removed by dialysis against PBS (pH 7.4) containing 10% glycerol. The Ad5 vectors were stored at −80 °C prior to use. The infectious titer (plaque forming units [pfu]/ml) of purified Ad5 vectors was determined by triplicate $TCID_{50}$ assays using HEK293A cells, as described elsewhere [\(22\)](#page-115-7). The physical titer (viral particles [vp]/ml) were determined by Maizel's method with a conversion factor of 1.1×10^{12} vp/ml per absorbance unit at 260 nm [\(23\)](#page-115-8).

Lentiviral vectors

The lentiviral vector used in the study to obtain purified sCAR-mIL-2 was constructed as described previously [\(24\)](#page-116-0). The resulting lentiviral vector contained an internal myeloproliferative sarcoma virus enhancer with the negative control region deleted promoter (MND) [\(25\)](#page-116-1) expressing sCAR-mIL-2 (the ectodomain of human CAR fused to mIL-2 via a short, 6HIS tag containing peptide linker). sCAR-mIL-2 is fused to puromycin N-acetyl-transferase gene via an internal ribosomal entry site [\(26\)](#page-116-2) and is followed by the central polypurine tract/central termination sequence. The virus was

generated as described by Zielske et al [\(24\)](#page-116-0). Briefly, HEK293T cells were triple transfected with the packaging vector (pCMVdeltaR8.91), the VSV-G pseudotyping vector (pMD.G), and the pLVmnd-sCAR-mIL-2 transfer vector at a mass ratio of $3:1:3$, using Lipofectamine 2000 reagent according to the manufacturer's instructions. Virus produced 24–48 hours after transfection was harvested in Dulbecco's Modified Eagle Medium (Sigma-Aldrich, St. Louis, MO, USA) containing 10% FBS and 2 mM Lglutamine. Virus-enriched media was filtered through 0.45 *μ*m syringe filter units (Millipore, Billerica, MA, USA) and stored at −80°C.

Production of stable sCAR-mIL-2 expressing cells

HEK293 cells were infected with the lentivirus, LVmnd-sCAR-mIL-2. Following infection, the cells were distributed in a 96-well plate and grown in medium supplemented with 3 μ g/ml puromycin until about 2/3 of the well surface was covered. The supernatants from the wells were then tested for sCAR-mIL-2 production by dot-blot assay using rabbit antibodies against CAR produced in the laboratory. A sCAR-mIL-2 expressing clone was expanded for future analysis.

Purification of the sCAR-mIL-2 adapter protein

The medium from stable sCAR-mIL-2-expressing cells was collected and proteins precipitated by addition of an equal volume of cold-saturated ammonium sulfate (Sigma-Aldrich). Following centrifugation the precipitate was dissolved in 1/20 the original volume of phosphate buffered saline (PBS) and then dialyzed against PBS. The sCARmIL-2 protein was then purified from the dialyzed solution by immobilized metal-affinity

chromatography using cobalt-immobilized TALON affinity resin (Clontech, Mountain View, CA, USA) followed by dialysis against PBS.

Western blot analysis of sCAR-mIL-2

Aliquots of purified sCAR-mIL-2 equal to 500 ng were denatured by boiling in laemmli sample buffer (Bio-Rad laboratories Inc., Hercules, CA, USA) at 95 °C for 10 min. The protein concentration was determined using the DC protein assay kit (Bio-Rad Laboratories Inc.) according to the manufacturer's instructions. The proteins were separated by electrophoresis in sodium dodecyl sulfate 10% polyacrylamide gels. The separated viral proteins were transferred onto a polyvinylidene difluoride membrane. Subsequently, western blot analysis was performed using a rat monoclonal anti-mIL-2 antibody S4B6 (BD Biosciences, San Jose, CA, USA) or rabbit polyclonal anti-CAR antibody followed by a horseradish peroxidase-conjugated secondary anti-mouse or antirabbit antibody (Dako North America Inc., Carpinteria, CA, USA). The blot was developed using an ECL Plus Western Blotting Detection Kit (Amersham Biosciences, Pittsburgh, PA, USA). Pre-stained protein ladder of Kaleidoscope Standards (Bio-Rad Laboratories Inc.) was used in the stained gel and the western blot. Pre-stained protein ladder of Kaleidoscope Standards was used for identification of the sCAR-mIL-2 protein in western blots.

ELISA assay

The binding specificity of the sCAR-mIL-2 adapter protein to the Ad5 recombinant knob [\(27\)](#page-116-3) was tested by ELISA. Recombinant Ad5 fiber knob or BSA was

diluted in 0.2M sodium carbonate/bicarbonate buffer, absorbed in triplicate on a 96-well plate at 300 ng/well, and incubated at 4°C overnight. The plate was then washed three times in wash buffer (0.1M phosphate, 0.15M sodium chloride, pH7.2 containing 0.05% Tween 20) and incubated in blocking buffer $(5\%$ Non-fat milk in wash buffer) at 4° C overnight. Blocking buffer was then removed, 2-fold dilutions of sCAR-mIL-2 was added, and incubated for 1 hour at room temperature. Following incubation, the plate was washed 3 times, rabbit polyclonal anti-CAR antibody added, and incubated for 1 hour at room temperature. Plate was then washed three times, anti-rabbit-HRP (Bio-Rad Laboratories Inc.) added, and incubated at room temperature for 1 hour. Following this incubation, the plate was washed six times, Sigma Fast o-phenylenediamine dihydrochloride substrate (Sigma-Aldrich) added, and developed according to manufacturer's directions. Absorbance was measured at 492nm.

In Vitro Proliferation Assay

In vitro proliferation assays using CTLL-2 cells we performed as previously described [\(28,](#page-116-4) [29\)](#page-116-5). CTLL-2 cells were plated in flat bottom 96-well tissue culture plates at $1x10^4$ cells per well in quadruplicate. Varying concentrations of either purified sCARmIL-2 or recombinant mIL-2 (eBioscience) were added to each well and incubated at 37 °C in a 5% CO_2 atmosphere for 48 hours. 10 µL of WST-1 reagent (Clontech) was added to each well and incubated for 4 hours. Plates were then read at absorbance 450 nm with a reference wavelength of 690 nm according to manufacturer's instructions.

In vitro proliferation blocking assays were performed in a similar fashion to the proliferation assays previously described. $1x10^4$ CTLL-2 cells were plated in 96 well flat

bottom tissue culture plates in quadruplicate and incubated with varying concentrations of rat monoclonal anti-murine CD25 antibody PC61 (BD Biosciences) or rat monoclonal IgG control antibody (BD Biosciences) for 30 minutes at 37 $^{\circ}$ C in a 5% CO₂ atmosphere. Cells were then incubated with 28 ng/ml of sCAR-mIL-2, a concentration that gave roughly 85% maximum proliferation, and incubated for 48 hours. 10 µL of WST-1 reagent was added to each well and incubated for 4 hours. Plates were then read at absorbance 450 nm with a reference wavelength of 690 nm according to manufacturer's instructions.

Gene transfer assays

CTLL-2 or primary murine T cells were distributed at a density of $5x10⁵$ cells/well in a 24-well plate. Indicated amounts of sCAR-mIL-2 were incubated with $2.5x10^8$ vp (500 vp/cell) of Ad5GL (CTLL-2 cells) or Ad5UP-GFP (primary murine T lymphocytes) for 30 min at 37°C. The sCAR-mIL-2/Ad5 complexes were then transferred to the cells and incubated for 1 h at 37°C followed by virus removal and medium change to growth medium supplemented with recombinant human IL-2. Twenty four (CTLL-2 cells) or forty eight (primary murine T lymphocytes) hours post infection the cells measured for luc and/or GFP expression.

Flow Cytometry

Expression of CAR and CD25 on CTLL-2 cells were analyzed by flow cytometry. CTLL-2 cells were stained for CAR using an anti-CAR antibody RmcB conjugated to biotin. Cells were then incubated with streptavidin labeled with Alexa Flour 647

(Invitrogen). A mouse IgG-biotin (Invitrogen) followed by streptavidin-Alexa Flour 647 and streptavidin-Alexa Flour 647 alone was used as isotype controls. CTLL-2 cells were stained for CD25 using anti-CD25 PC61 conjugated to APC (BD Biosciences). Rat IgG1- APC (BD Biosciences) was used as an isotype control.

Mock, Ad5GL, and sCAR-mIL-2 conjugated Ad5GL transduced CTLL-2 cells were tested for GFP expression. Cells were harvested 24 hrs post infection, washed three times in FACS buffer and analyzed for GFP fluorescence by flow cytometry. Data was represented as percentage of cells expressing GFP protein.

Mock, Ad5UP-GFP, and sCAR-mIL-2-conjugated Ad5UP-GFP transduced naive and activated murine T lymphocytes were tested for CD25 and GFP expression. Cells were harvested 48 hours post infection, washed twice with FACS buffer and stained for CD25 using anti-CD25-APC antibody or rat IgG1-APC control for 1 hr at 4° C. Following incubation, the cells were washed three times in FACS buffer and CD25 and GFP expression were analyzed. Data was represented as percentage of cells positive for CD25 and/or GFP expression.

All data was acquired by flow cytometry using BD FACSAria Special Edition (BD Biosciences) and analyzed by FlowJo software version 10.0.4 (Tree Star, Inc., Ashland, OR, USA).

RESULTS

Generation of sCAR-mIL-2 adapter

Previous work has shown that Ad5 is a poor candidate for gene delivery to T cells due mainly to a lack of the Ad5 receptor, CAR. Therefore, retargeting adenovirus to a

cell surface protein that is highly expressed, such as the IL-2R, should provide for increased gene transduction. Our lab has previously shown that utilizing a bi-specific protein/adapter allows for efficient retargeting of Ad5 [\(30-34\)](#page-116-6). To this end our laboratory has developed the use of bi-specific fusion proteins that bind adenovirus fiber knob and our target of interest, in this case murine IL-2R. These adapters once conjugated to Ad5 have shown dramatically increased gene delivery to otherwise non-infectable cell types (Figure 1B). The aim of the current study was to generate a recombinant fusion protein capable of affecting association between the native CAR binding of the Ad5 fiber and IL-2R. We assembled the cDNA coding for the recombinant fusion protein, sCAR-mIL-2 (Figure 1A), consisting of the ectodomain of human CAR fused to murine interleukin 2 (mIL-2) via a short peptide linker, preceded by a six-histidine (6His) detection/purification tag, into the lentivirus plasmid pLVmnd-sCAR-mIL-2 and confirmed its construction by digest analysis and DNA sequencing. We then used this plasmid to generate lentivirus in HEK293T cells. Virus laden media was then used to make stable HEK293 cell lines producing sCAR-mIL-2 as a secreted protein. We selected for high expressing cells using puromycin selection, expanded the selected culture, and purified the fusion protein by immobilized metal-affinity chromatography from the culture medium.

Characterization of sCAR-mIL-2 adapter

To analyze sCAR-mIL-2 we performed a western blot assay on boiled samples of the purified protein. Probing the membranes with antibodies against CAR and mIL-2 (Figure 2) showed that all portions of the recombinant protein were detected. The

electrophoretic mobility of boiled sCAR-mIL-2 showed a molecular weight of approximately 58 kDa. This is higher than the predicted size of 44.6 kDa, but could be explained by glycosylation in mammalian cells, as has been noted previously [\(34\)](#page-116-7).

Further, we analyzed our sCAR-mIL-2 fusion protein for retention of its individual components binding characteristics. To verify the sCAR portions binding to Ad5 knob, we performed an ELISA assay. Following immobilization of recombinant Ad5 knob or control protein BSA, varying concentrations of sCAR-mIL-2 were incubated and then probed with an anti-mIL-2 antibody (Figure 3A). These results show that our sCAR-mIL-2 fusion protein still retains efficient binding to the Ad5 knob. We then examined binding of sCAR-mIL-2 to murine IL-2R using a CTLL-2 cell proliferation assay. CTLL-2 cells are an ideal tool for analyzing interactions between IL-2 and its cognate receptor, IL-2R. These cells express high concentrations of IL-2R and are dependent upon signaling through IL-2R for survival and proliferation. This assay showed strong proliferation of CTLL-2 cells when presented with recombinant mIL-2 and sCAR-mIL-2 (Figure 3B). This response was also shown to be blockable following incubation of CTLL-2 cells with an anti-murine CD25 antibody (Figure 3C). This shows that our sCAR-mIL-2 fusion protein is not inducing proliferation through an alternative receptor but exploiting the target, IL-2R. Together, these results indicate that the sCARmIL-2 adapter protein was produced in the correct conformation and retains all Ad5 knob and murine IL-2R binding affinity.

SCAR-mIL-2 enhancement of Ad5-mediated gene transfer to murine T cell line

We next tested the capacity of sCAR-mIL-2 to target Ad5 vectors to cells expressing murine IL-2R in gene transfer experiments using the murine T cell line, CTLL-2. These cells were verified for positive expression of CD25 and a lack of CAR expression by flow cytometry (Figure 4). We incubated Ad5GL vector encoding firefly luciferase and GFP under the CMV promoter with different amounts of sCAR-mIL-2 and then used these complexes to transduce CTLL-2 cells. The sCAR-mIL-2 noticeably augmented GFP expression in transduced CTLL-2 cells (Figure 5A). Approximately 87% of CTLL-2 cells treated with sCAR-mIL-2-conjugated Ad5GL exhibited green fluorescence as compared to less than 9% for untargeted Ad5GL as measured by flow cytometry. Secondly, sCAR-mIL-2 enhanced luciferase gene expression in CTLL-2 cells with the Ad5GL vector roughly 9 fold when compared to Ad5GL alone (Figure 5B). These results show that Ad5GL complexed with the sCAR-mIL-2 adapter protein is extremely efficient at transducing murine IL-2R expressing CTLL-2 cells.

sCAR-mIL-2 mediated Ad transduction of primary murine T lymphocytes

To next analyze sCAR-mIL-2-mediated transduction of T lymphocytes, we decided to further analyze our sCAR-mIL-2 adapter in primary murine T lymphocytes as primary cells are frequently more difficult to infect than cell lines. We harvested primary murine T lymphocytes from spleens of C57BL/6J mice. Following isolation, we analyzed the ability of sCAR-mIL-2 to augment gene transduction of an Ad5 expressing GFP under the ubiquitin c promoter, Ad5UP-GFP. Forty-eight hours post infection, 1.4% of CD25 positive T lymphocytes showed GFP expression when infected with sCAR-mIL-2 conjugated Ad5UP-GFP compared to 0.046% with unconjugated Ad5UP-GFP, a 30-fold

enrichment in GFP expressing cells (Figure 6). Considering that only a small portion of these cells initially expressed CD25 we decided to analyze the ability of sCAR-mIL-2 mediated transduction in an activated T lymphocyte population. Following activation, we infected these activated murine T lymphocytes as we did their naive counterparts. These cells showed increased percentages of GFP positive cells following transduction with Ad5UP-GFP (1.2%) or sCAR-mIL-2-conjugated Ad5UP-GFP (5.1%), with sCAR-mIL-2 mediating a 4-fold increase in GFP positive cells (Figure 6).

DISCUSSION

Despite promising new therapies utilizing genetically modified T lymphocytes, the tools used to efficiently deliver genes to T lymphocytes have been limited. In this study we have shown that, through the utilization of an adapter based targeting strategy, Ad5 can be retargeted to the IL-2R on the cell surface of murine T lymphocytes. This strategy was initially chosen because it allows for a rapid exploration of targeting ligands that are not biologically compatible with adenovirus biology. Most secreted biological ligands are not compatible with adenovirus biology because they are folded and transported through the Golgi apparatus while adenovirus assembly occurs in the nucleus and cytoplasm. The adapter strategy allows construction of targeting moieties that

maintain their binding properties and allow for retargeting of adenovirus after conjugation [\(35\)](#page-116-8).

Initial testing and analysis of our sCAR-mIL-2 adapter was performed in CTLL-2 murine T cell lines. This cell line was initially chosen because it is a gold standard for studying IL-2 interactions with its cognate receptor. This cell line, under stimulation from IL-2 signaling, proliferates in a dose-dependent manner [\(36,](#page-116-9) [37\)](#page-117-0). As such we could utilize this cell line to analyze how binding to IL-2Receptor was affected in our sCAR-mIL-2 adapter. This experiment showed that sCAR-mIL-2 adapter was still effective in stimulating CTLL-2 proliferation (Figure 3B) and was IL-2R specific (Figure 3C). Interestingly, our data showed that when molecular weight was taken into consideration, our sCAR-mIL-2 adapter stimulated CTLL-2 cells just as effectively as recombinant mIL-2. These results regarding binding efficiency of sCAR-mIL-2 show that the adapter based strategy for retargeting adenovirus is amenable to cytokine based targeting.

The CTLL-2 cell line was also an ideal cell line for initial analysis of sCAR-mIL-2 mediated adenovirus transduction. The cell line showed no expression of CAR on its surface but showed very high levels of expression of CD25, a subunit of the high affinity IL-2R (Figure 4). Corresponding with this receptor expression, sCAR-mIL-2 mediated a roughly 10 fold increase in GFP expressing cells. Of note, both the luciferase and GFP expression reduce slightly at higher concentrations of sCAR-mIL-2. This could be due to saturation of available Ad5 fiber binding sites and thus excess sCAR-mIL-2 would compete with virus for available mIL-2R sites on the cell surface.

Following the encouraging results in CTLL-2 cells, we studied the ability of sCAR-mIL-2 adapter to mediate Ad5 gene transduction in primary murine T lymphocytes. An important difference at this stage was the utilization of a ubiquitin c promoter [\(21\)](#page-115-6) in place of the CMV promoter analyzed in our CTLL-2 data. Wan et al. [\(38\)](#page-117-1) and Hurez et al. [\(10\)](#page-114-7) have both shown that within primary T cells CMV promoter expression is dependent on the activation status of the cell. We felt that this artifact may limit or inhibit our ability to analyze gene expression in primary T lymphocytes. For this reason we used the ubiquitin c promoter, which both of these groups have shown to provide good gene expression in both naive and activated T lymphocytes. Following primary T lymphocyte isolation from C57BL/6J mice, we transduced naive cells with adenovirus, Ad5UP-GFP, utilizing the same protocol developed for CTLL-2 cells. This experiment showed a modest increase of GFP expressing cells (1.6%) compared to Ad5UP-GFP alone (0.043%). Considering that small percentage of these T lymphocytes expressed CD25 before transduction, we were fairly optimistic in regards to this outcome. To increase our potential pool of targets we activated isolated primary murine T lymphocytes. Under these conditions, our sCAR-mIL-2 adapter showed a modest 4.6 fold increase in the percentage of GFP positive CD25 positive T lymphocytes.

Previous studies have also shown success in improving gene transduction in primary T lymphocytes. Wickham et al. showed that specifically targeting T cells was possible through the use of a chemically conjugated bi-specific antibody against CD3. This strategy allowed for increased transduction of Jurkat, Molt-3, and resting human T cells [\(16\)](#page-115-1). Yotnda et al. applied a panel of fiber modified adenoviruses including type 5, type 11, type 35, RGD, and varying poly-lysine chains to variety of human T cell lines.

They showed that many of these non-CAR targeting moieties can increase adenovirus delivered GFP expression [\(13\)](#page-115-9). They further showed that Ad5/35 could be utilized to infect EBV-specific cytotoxic T cells with a transduction efficiency of roughly 51-58% as measured by GFP expression [\(39\)](#page-117-2). Schroers et al. has also shown that Ad5/35 can be utilized for increased transduction of Jurkat and PM-1 cell lines, and primary CD3+ T cells [\(12\)](#page-115-10). Most recently Sengupta et al. utilized an Ad5 targeted to cell surface integrins through incorporation of an RGD motif into Ad5 fiber knob. Their study showed a 3-fold increase in luciferase gene transfer and a 2.6-fold increase in hexon in ex-vivo infected primary mouse T lymphocytes [\(15\)](#page-115-11).

A variety of issues could be hampering gene transduction efficiency of our sCARmIL-2 adapter strategy and leading to the variation seen between the initial CTLL-2 model and our later primary murine T lymphocyte data. Colin et al. showed that adenovirus type 5 may have post-internalization defects in HSB-2 T cell line. These defects lead to normal levels of infection but drastically lower levels of gene transduction as the Ad5 was unable to escape the endosomal compartment [\(40\)](#page-117-3). They hypothesized that the virus was being internalized through an alternative, clathrin-independent method, and that the virus was not able to promote escape in this pathway. Interestingly IL-2 has been shown to internalize in a clathrin-independent method as well [\(41\)](#page-117-4). It is a possibility that our sCAR-mIL-2 conjugated Ad5 vector is being internalized through the IL-2Receptors pathway instead of through the virus's native pathway that utilizes integrin binding. It may be that this alternative internalization is not amenable to endosomal escape. If this indeed is the case, then alternative T lymphocyte targets may abrogate this issue. Alternative to post-internalization pathways, it may be possible to increase the

transduction efficiency through modification of our sCAR-mIL-2 adapter. We have previously shown that the utilization of a trimerization domain within the adapter allows for increased binding of the adapter with adenovirus and leads to further increases in gene transfer [\(32,](#page-116-10) [34,](#page-116-7) [42\)](#page-117-5).

This study along with other recent studies analyzing adenovirus transduction of T lymphocytes show that although native human adenovirus is lacking transduction affinity, alternative targeting strategies can bypass this roadblock. We have demonstrated that new recombinant sCAR-mIL-2 fusion protein promotes IL-2R targeted gene transfer to murine T lymphocytes. These findings have broad application for the study of T cell biology and genetic modification of T cells for therapeutic use.

ACKNOWLEDGMENTS

I would like to thank Dr. Alexander Pereboev. Dr. Pereboev was instrumental in the planning and early stages of developing the sCAR-mIL-2. Dr. Pereboev passed away before this work was completed, he will be greatly missed. The adenovirus shuttle plasmid, pSH-UP-UP-GFP (R) was kindly provided by Dr. J. DeGregori (University of Colorado School of Medicine, Denver, CO, USA). The plasmids for the self-inactivating lentiviral vector were kindly provided by Dr. Justin Roth (University of Alabama at Birmingham, Birmingham, AL, USA). The rabbit polyclonal anti-CAR antibody was a kind gift of Dr. Hideyo Ugai (Washington University in St. Louis, St. Louis, MO, USA).

DISCLOSURE/DUALITY OF INTEREST

The authors declare no duality of interest.

Figure 1: Schema for adapter based retargeting strategy for adenovirus vectors. Utilization of bi-specific fusion proteins allows for retargeting to a wide variety of cell surface exposed proteins. (A) The sCAR-mIL-2 adapter is composed of the exodomain of CAR fused to murine IL-2 through a short flexible linker containing a 6HIS tag. Scale is in nucleotides. (B) Once the adapter has been purified, adapter can be incubated with any Ad5 vector containing native fiber to retarget the virus to a non-CAR pathway, IL-2R.

Figure 2: Western blot analysis of sCAR-mIL-2 adapter protein. Purified sCAR-mIL-2 was analyzed by western blot analysis for both sCAR (Lane 1) and mIL-2 (Lane 3) portions of the protein. Purified sCAR-6HIS (Lane 2) and recombinant mIL-2 (Lane 4) were used as positive control proteins.

Figure 3: Analysis of sCAR-mIL-2 binding to Ad5 knob and murine IL-2R. (A) Purified sCAR-mIL-2 was analyzed for binding to recombinant Ad5 knob (diamond) or control protein, BSA (square), at varying concentrations by ELISA assay. (B) sCAR-mIL-2 affinity to murine IL-2R was analyzed by induced proliferation of CTLL-2 cells. CTLL-2 cells were incubated with varying concentrations of either sCAR-mIL-2 (square) or recombinant mIL-2 (diamond) for 48 hours. (C) sCAR-mIL-2 specificity to murine IL-2R was analyzed by blocking murine IL-2R. CTLL-2 cells were incubated with anti-mCD25 antibody (hash) or control IgG (dot) for 30 min before addition of sCAR-mIL-2 and incubated for 48 hours. After 48 hours, WST-1 reagent was added for 4 hours and cells were analyzed for proliferation.

Figure 4: CTLL-2 receptor analysis by flow cytometry. CTLL-2 cells were analyzed for CAR and CD25 expression (black line) compared to isotype controls (shaded grey).

Figure 5: SCAR-mIL-2 promotes increased adenovirus transduction of CTLL-2 cells. Varying amounts of sCAR-mIL-2 were incubated with Ad5GL. Following incubation, CTLL-2 cells were infected with no virus, Ad5GL, or Ad5GL conjugated with sCARmIL-2 at 500 vp/cell. Twenty four hours post-infection, cells were measured for GFP expression (A) and luciferase activity (B).

Figure 6: SCAR-mIL-2 promotes increased adenovirus transduction of naïve and activated primary murine T lymphocytes. Varying amounts of sCAR-mIL-2 were incubated with Ad5UP-GFP. Following incubation, naive or activated primary murine T lymphocytes were infected with no virus, Ad5UP-GFP, or Ad5UP-GFP conjugated with sCAR-mIL-2 at 500 vp/cell. Forty eight hours post-infection, cells were measured for GFP and CD25 expression by flow cytometry.

LIST OF REFERENCES

1. Kennedy-Nasser AA, Brenner MK. T-cell therapy after hematopoietic stem cell transplantation. Curr Opin Hematol. 2007 Nov;14(6):616-24. PubMed PMID: 17898565. Epub 2007/09/28. eng.

2. Morgan RA, Dudley ME, Rosenberg SA. Adoptive cell therapy: genetic modification to redirect effector cell specificity. Cancer J. 2010 Jul-Aug;16(4):336-41. PubMed PMID: 20693844. Epub 2010/08/10. eng.

3. Razonable RR. Immune-based therapies for cytomegalovirus infection. Immunotherapy. 2010 Jan;2(1):117-30. PubMed PMID: 20635892. Epub 2010/07/20. eng.

4. Bobisse S, Rondina M, Merlo A, Tisato V, Mandruzzato S, Amendola M, et al. Reprogramming T lymphocytes for melanoma adoptive immunotherapy by T-cell receptor gene transfer with lentiviral vectors. Cancer Res. 2009 Dec 15;69(24):9385-94. PubMed PMID: 19996290. Epub 2009/12/10. eng.

5. Dardalhon V, Jaleco S, Kinet S, Herpers B, Steinberg M, Ferrand C, et al. IL-7 differentially regulates cell cycle progression and HIV-1-based vector infection in neonatal and adult CD4+ T cells. Proc Natl Acad Sci U S A. 2001 Jul 31;98(16):9277-82. PubMed PMID: 11470908. Pubmed Central PMCID: 55411. Epub 2001/07/27. eng.

6. Baum C. Insertional mutagenesis in gene therapy and stem cell biology. Curr Opin Hematol. 2007 Jul;14(4):337-42. PubMed PMID: 17534158. Epub 2007/05/31. eng.

7. Hacein-Bey-Abina S, Garrigue A, Wang GP, Soulier J, Lim A, Morillon E, et al. Insertional oncogenesis in 4 patients after retrovirus-mediated gene therapy of SCID-X1. J Clin Invest. 2008 Sep;118(9):3132-42. PubMed PMID: 18688285. Pubmed Central PMCID: 2496963. Epub 2008/08/09. eng.

8. Hargrove PW, Kepes S, Hanawa H, Obenauer JC, Pei D, Cheng C, et al. Globin lentiviral vector insertions can perturb the expression of endogenous genes in betathalassemic hematopoietic cells. Mol Ther. 2008 Mar;16(3):525-33. PubMed PMID: 18195719. Epub 2008/01/16. eng.

9. Schmidt MR, Piekos B, Cabatingan MS, Woodland RT. Expression of a human coxsackie/adenovirus receptor transgene permits adenovirus infection of primary lymphocytes. J Immunol. 2000 Oct 1;165(7):4112-9. PubMed PMID: 11034423. Epub 2000/10/18. eng.

10. Hurez V, Dzialo-Hatton R, Oliver J, Matthews RJ, Weaver CT. Efficient adenovirus-mediated gene transfer into primary T cells and thymocytes in a new coxsackie/adenovirus receptor transgenic model. BMC Immunol. 2002 May 2;3:4. PubMed PMID: 12019030. Pubmed Central PMCID: 113271. Epub 2002/05/23. eng.

11. Nagel H, Maag S, Tassis A, Nestle FO, Greber UF, Hemmi S. The alphavbeta5 integrin of hematopoietic and nonhematopoietic cells is a transduction receptor of RGD- 4C fiber-modified adenoviruses. Gene Ther. 2003 Sep;10(19):1643-53. PubMed PMID: 12923563. Epub 2003/08/19. eng.

12. Schroers R. Gene transfer into human T lymphocytes and natural killer cells by Ad5/F35 chimeric adenoviral vectors. Experimental Hematology. 2004;32(6):536-46.

13. Yotnda P, Zompeta C, Heslop HE, Andreeff M, Brenner MK, Marini F. Comparison of the efficiency of transduction of leukemic cells by fiber-modified adenoviruses. Hum Gene Ther. 2004 Dec;15(12):1229-42. PubMed PMID: 15684699. Epub 2005/02/03. eng.

14. Segerman A, Lindman K, Mei Y, Allard A, Wadell G. Adenovirus types 11p and 35 attach to and infect primary lymphocytes and monocytes, but hexon expression in Tcells requires prior activation. Virology. 2006;349(1):96-111.

15. Sengupta S, Ulasov IV, Thaci B, Ahmed AU, Lesniak MS. Enhanced transduction and replication of RGD-fiber modified adenovirus in primary T cells. PLoS One. 2011;6(3):e18091. PubMed PMID: 21464908. Pubmed Central PMCID: 3065494. Epub 2011/04/06. eng.

16. Wickham TJ, Lee GM, Titus JA, Sconocchia G, Bakacs T, Kovesdi I, et al. Targeted adenovirus-mediated gene delivery to T cells via CD3. J Virol. 1997 Oct;71(10):7663-9. PubMed PMID: 9311849. Pubmed Central PMCID: 192116. Epub 1997/10/06. eng.

17. Di Nicola M, Milanesi M, Magni M, Bregni M, Carlo-Stella C, Longoni P, et al. Recombinant adenoviral vector-lipofectAMINE complex for gene transduction into human T lymphocytes. Hum Gene Ther. 1999 Jul 20;10(11):1875-84. PubMed PMID: 10446927. Epub 1999/08/14. eng.

18. Malek TR. The Biology of Interleukin-2. Annual Review of Immunology. 2008;26(1):453-79.

19. Graham FL, Smiley J, Russell WC, Nairn R. Characteristics of a human cell line transformed by DNA from human adenovirus type 5. J Gen Virol. 1977 Jul;36(1):59-74. PubMed PMID: 886304. Epub 1977/07/01. eng.

20. Seki T, Dmitriev I, Kashentseva E, Takayama K, Rots M, Suzuki K, et al. Artificial extension of the adenovirus fiber shaft inhibits infectivity in coxsackievirus and adenovirus receptor-positive cell lines. J Virol. 2002 Feb;76(3):1100-8. PubMed PMID: 11773386. Pubmed Central PMCID: 135866. Epub 2002/01/05. eng.

21. Schorpp M, Jager R, Schellander K, Schenkel J, Wagner EF, Weiher H, et al. The human ubiquitin C promoter directs high ubiquitous expression of transgenes in mice. Nucleic Acids Res. 1996 May 1;24(9):1787-8. PubMed PMID: 8650001. Pubmed Central PMCID: 145851. Epub 1996/05/01. eng.

22. Kanegae Y, Makimura M, Saito I. A simple and efficient method for purification of infectious recombinant adenovirus. Jpn J Med Sci Biol. 1994 Jun;47(3):157-66. PubMed PMID: 7823411. Epub 1994/06/01. eng.

23. Maizel JV, Jr., White DO, Scharff MD. The polypeptides of adenovirus. I. Evidence for multiple protein components in the virion and a comparison of types 2, 7A, and 12. Virology. 1968 Sep;36(1):115-25. PubMed PMID: 5669982. Epub 1968/09/01. eng.

24. Zielske SP, Gerson SL. Lentiviral transduction of P140K MGMT into human CD34(+) hematopoietic progenitors at low multiplicity of infection confers significant resistance to BG/BCNU and allows selection in vitro. Mol Ther. 2002 Apr;5(4):381-7. PubMed PMID: 11945064. Epub 2002/04/12. eng.

25. Kohn DB, Bauer G, Rice CR, Rothschild JC, Carbonaro DA, Valdez P, et al. A clinical trial of retroviral-mediated transfer of a rev-responsive element decoy gene into CD34(+) cells from the bone marrow of human immunodeficiency virus-1-infected children. Blood. 1999 Jul 1;94(1):368-71. PubMed PMID: 10381536. Epub 1999/06/25. eng.

26. Martinez-Salas E. Internal ribosome entry site biology and its use in expression vectors. Curr Opin Biotechnol. 1999 Oct;10(5):458-64. PubMed PMID: 10508627. Epub 1999/10/06. eng.

27. Krasnykh VN, Mikheeva GV, Douglas JT, Curiel DT. Generation of recombinant adenovirus vectors with modified fibers for altering viral tropism. J Virol. 1996 Oct;70(10):6839-46. PubMed PMID: 8794325. Pubmed Central PMCID: 190731. Epub 1996/10/01. eng.

28. Davis LS, Lipsky PE, Bottomly K. Measurement of human and murine interleukin 2 and interleukin 4. Curr Protoc Immunol. 2001 May;Chapter 6:Unit 6 3. PubMed PMID: 18432816. Epub 2008/04/25. eng.

29. Khatri A, Husaini Y, Russell PJ. Murine CTLL-2 cells respond to mIL12: prospects for developing an alternative bioassay for measurement of murine cytokines IL12 and IL18. J Immunol Methods. 2007 Sep 30;326(1-2):41-53. PubMed PMID: 17689554. Epub 2007/08/11. eng.

30. Dmitriev I, Kashentseva E, Rogers BE, Krasnykh V, Curiel DT. Ectodomain of coxsackievirus and adenovirus receptor genetically fused to epidermal growth factor mediates adenovirus targeting to epidermal growth factor receptor-positive cells. J Virol. 2000 Aug;74(15):6875-84. PubMed PMID: 10888627. Pubmed Central PMCID: 112205. Epub 2000/07/11. eng.

31. Wesseling JG, Bosma PJ, Krasnykh V, Kashentseva EA, Blackwell JL, Reynolds PN, et al. Improved gene transfer efficiency to primary and established human pancreatic carcinoma target cells via epidermal growth factor receptor and integrin-targeted adenoviral vectors. Gene Ther. 2001 Jul;8(13):969-76. PubMed PMID: 11438831. Epub 2001/07/05. eng.

32. Kashentseva EA, Seki T, Curiel DT, Dmitriev IP. Adenovirus targeting to c-erbB-2 oncoprotein by single-chain antibody fused to trimeric form of adenovirus receptor ectodomain. Cancer Res. 2002 Jan 15;62(2):609-16. PubMed PMID: 11809717. Epub 2002/01/26. eng.

33. Pereboev AV, Asiedu CK, Kawakami Y, Dong SS, Blackwell JL, Kashentseva EA, et al. Coxsackievirus-adenovirus receptor genetically fused to anti-human CD40 scFv enhances adenoviral transduction of dendritic cells. Gene Ther. 2002 Sep;9(17):1189-93. PubMed PMID: 12170383. Epub 2002/08/10. eng.

34. Pereboev AV, Nagle JM, Shakhmatov MA, Triozzi PL, Matthews QL, Kawakami Y, et al. Enhanced gene transfer to mouse dendritic cells using adenoviral vectors coated with a novel adapter molecule. Mol Ther. 2004 May;9(5):712-20. PubMed PMID: 15120332. Epub 2004/05/04. eng.

35. Beatty MS, Curiel DT. Adenovirus strategies for tissue-specific targeting. Adv Cancer Res. 2012;115:39-67. PubMed PMID: 23021241. Epub 2012/10/02. eng.

36. Gillis S, Smith KA. Long term culture of tumour-specific cytotoxic T cells. Nature. 1977 Jul 14;268(5616):154-6. PubMed PMID: 145543. Epub 1977/07/14. eng.

37. Belani R, Weiner GJ. Expression of both B7-1 and CD28 contributes to the IL-2 responsiveness of CTLL-2 cells. Immunology. 1996 Feb;87(2):271-4. PubMed PMID: 8698390. Pubmed Central PMCID: 1384284. Epub 1996/02/01. eng.

38. Wan YY. Transgenic expression of the coxsackie/adenovirus receptor enables adenoviral-mediated gene delivery in naive T cells. Proceedings of the National Academy of Sciences. 2000;97(25):13784-9.

39. Yotnda P. Targeted delivery of adenoviral vectors by cytotoxic T cells. Blood. 2004;104(8):2272-80.

40. Colin M. Factors involved in the sensitivity of different hematopoietic cell lines to infection by subgroup C adenovirus: implication for gene therapy of human lymphocytic malignancies. Virology. 2004;320(1):23-39.

41. Lamaze C, Dujeancourt A, Baba T, Lo CG, Benmerah A, Dautry-Varsat A. Interleukin 2 receptors and detergent-resistant membrane domains define a clathrinindependent endocytic pathway. Mol Cell. 2001 Mar;7(3):661-71. PubMed PMID: 11463390. Epub 2001/07/21. eng.

42. Li HJ, Everts M, Yamamoto M, Curiel DT, Herschman HR. Combined transductional untargeting/retargeting and transcriptional restriction enhances adenovirus gene targeting and therapy for hepatic colorectal cancer tumors. Cancer Res. 2009 Jan 15;69(2):554-64. PubMed PMID: 19147569. Pubmed Central PMCID: 2823090. Epub 2009/01/17. eng.

CHAPTER IV

ADDITIONAL STUDIES

Murine T cell targeting

In addition to the data presented in the accepted article comprising chapter 3, additional experiments were conducted. While these experiments were not included in the published article, they do expand upon the studies performed and further elucidate the role of sCAR-mIL-2 mediated adenovirus infection.

SCAR-mIL-2 enhancement of Ad5-mediated gene transfer to murine T cell line

In addition to using the ubiquitin C promoter in primary murine T cells, we analyzed this promoter's activity in CTLL-2 cells (Figure 1). For this study, we conjugated varying amounts of sCAR-mIL-2 to AdUP-GFP. After incubating the adenovirus with sCAR-mIL-2 for 30 minutes, we infected CTLL-2 cells at 200 virus particle per cell for 1 hour. Following infection, the cells were washed and given fresh growth media supplemented with recombinant murine IL-2. Twenty-four hours post infection, we analyzed the cells by flow cytometry for GFP expression. Utilizing AdUP-GFP alone, we were able to transduce 21.2% of the cell population. However, with the addition of sCAR-mIL-2, 40.2% of the cells expressed GFP. The percentage of GFP positive cells increase with increasing amounts of sCAR-mIL-2 to a maximum gene transduction of 58.8%. Concentrations beyond this point decreased the transduction efficiency.

Receptor analysis of primary murine T lymphocytes

Following isolation of murine primary mouse T lymphocytes, we analyzed the cells for their purity. For this analysis we labeled the cells with fluorescent antibodies against CD4 and CD8 cell markers and measured the percentage of each population by flow cytometry (Figure 2A). We also analyzed the cells for expression of CD25, a subunit of the high affinity IL-2 receptor (Figure 2B). Analysis of freshly isolated primary murine T lymphocytes showed that 5.99% of these cells were CD25⁺. Following activation, as described in chapter 3, we analyzed the percentage of $CD25⁺$ cells. Postactivation, 95.1% of the cultured primary T cells were $CD25^+$ (Figure 2C).

SCAR-mIL-2 mediated gene transduction of isolated splenocytes

In addition to analyzing sCAR-mIL-2 mediated gene transduction in primary T lymphocytes, we wanted to study sCAR-mIL-2 in a heterogeneous cell population. For this study we choose to infect isolated murine splenocytes, as it provided a mix of immune cells found in close proximity with T lymphocytes and would help us elucidate how efficiently sCAR-mIL-2 could target IL-2 receptor positive cells. We harvested and pooled spleens from 8 week old, female, C57BL/6J mice and dissociated them into a single cell suspension of splenocytes. Half of the splenocytes were activated via the addition of concanavalin A (ConA) to the media for 12 hours, while the other half were not. We then infected these naïve or activated splenocytes with either AdUP-GFP or AdUP-GFP conjugated to varying amounts of sCAR-mIL-2 at 500 virus particles per

cell. Twenty-four hours post infection, cells were analyzed by flow cytometry for CD4, CD8, CD25, and GFP expression.

After infection with AdUP-GFP alone, 0.45% of naïve splenocytes were CD25⁺, GFP⁺. However, AdUP-GFP conjugated to sCAR-mIL-2 showed an increase in gene transduction, with 1.29% of naïve splenocytes being $CD25^+$, GFP⁺ (Figure 3A). After infection with AdUP-GFP alone, 0.82% of ConA treated splenocytes were $CD25^+$, GFP⁺. SCAR-mIL-2 mediated an increase in gene transduction, with 4.15% of ConA treated splenocytes expressing both CD25 and GFP. This was a 4.8 fold increase in the percentage of GFP positive cells.

Additionally, we analyzed the transduction of both CD4 and CD8 expressing T cells within the isolated splenocytes. Within the naïve $CD4^+$ T cells, 3.81% were GFP⁺. In addition, if we looked at those cells which were $CD4^+$ GFP⁺, 53.2% were $CD25^+$. Within the activated $CD4^+$ T cells, the percentage of transduction increased to 7.26% and of those GFP^+ cells 88.3% were $CD25^+$ (Figure 3B). The $CD8^+$ population showed lower transduction, with only 1.9% of activated CD8⁺ T cells expressing GFP. However, of those CDS^+ T cells transduced, 93.2% were CDS^+ (Figure 3C). These experiments further support that sCAR-mIL-2 can mediate selective gene transduction of IL-2 receptor positive cells within a mixed culture.

Development of a human T cell targeting adapter

An issue with utilization use of sCAR-mIL-2 is that it is restricted to cells expressing mouse IL-2 receptor. Understanding this issue, we developed a human IL-2 version of our targeting adapter. Utilizing human IL-2 should enable us to analyze

targeting in both mouse and human models (117,118). The adapter, sCAR-hIL-2, will also be translatable to clinical applications.

SCAR-hIL-2 was produced in a similar manner to the previous adapter described. The adapter consists of the ectodomain of human CAR fused to human interleukin 2 (hIL-2) via a short peptide linker containing a 6His tag. Following insertion into a lentivirus expression plasmid, pLVmnd-sCAR-hIL-2 was confirmed by digest analysis and DNA sequencing. We used this plasmid to generate lentivirus in HEK293T cells. Virus laden media was then used to make stable HEK293 cell lines producing sCAR-hIL-2 as a secreted protein. We selected for high expressing cells using puromycin selection, expanded the selected culture, and purified the fusion protein by immobilized metalaffinity chromatography from the culture medium.

SCAR-hIL-2 mediated CTLL-2 proliferation

Following purification, we analyzed sCAR-hIL-2 for its ability to bind to IL-2R. Since human IL-2 can bind to and signal through mouse IL-2R, we utilized the CTLL-2 cell line. As described previously, CTLL-2 cells express IL-2R and proliferate in response to IL-2 signaling. As, such they are an excellent model for studying IL-2 interactions. CTLL-2 cells were plated in flat bottom 96-well tissue culture plates at $1x10⁴$ cells per well in quadruplicate. Varying concentrations of either purified sCARhIL-2 or recombinant hIL-2 were added to each well and incubated at 37 °C in a 5% $CO₂$ atmosphere for 48 hours. 10 μ L of WST-1 reagent was added to each well and incubated for 4 hours. Plates were then read at an absorbance of 450 nm, with a reference wavelength of 690 nm, according to manufacturer's instructions. Analysis of this

experiment showed that the CTLL-2 cells proliferate well in response to recombinant hIL-2. In addition, sCAR-hIL-2 promotes roughly the same amount of proliferation in CTLL-2 cells (Figure 4A). This data shows that sCAR-hIL-2, like sCAR-mIL-2, retains its native binding affinity to IL-2R.

Additionally, we analyzed whether this proliferation was in response to IL-2R signaling. In vitro proliferation blocking assays were performed in a similar fashion to the proliferation assays previously described. $1x10^4$ CTLL-2 cells were plated in 96 well flat bottom tissue culture plates in quadruplicate and incubated with varying concentrations of rat monoclonal anti-murine CD25 antibody PC61 or rat monoclonal IgG control antibody for 30 minutes at 37 °C in a 5% $CO₂$ atmosphere. SCAR-hIL-2 was then added to the media at a concentration that gave roughly 85% maximum proliferation and incubated for 48 hours. 10 μ L of WST-1 reagent was added to each well and incubated for 4 hours. Plates were then read at an absorbance 450 nm, with a reference wavelength of 690 nm, according to manufacturer's instructions. This blocking study showed that as we increase the amount of anti-CD25 antibody we see a dose dependent decrease in the amount of proliferation seen. The addition of a control antibody had no effect on proliferation (Figure 4B). Interestingly, the percent of proliferation blocked is greater than that seen with sCAR-mIL-2.

Figure 1: SCAR-mIL-2 conjugated AdUP-GFP provides increased transduction of CTLL-2 cells. Varying amounts of sCAR-mIL-2 were incubated with AdUP-GFP. Following incubation, CTLL-2 cells were infected with no virus, AdUP-GFP, or AdUP-GFP conjugated with sCAR-mIL-2 at 500 vp/cell. Twenty four hours post-infection, cells were measured for GFP expression.

Figure 2: Receptor analysis of primary murine T cells. Following purification, primary T cells were analyzed by flow cytometry for (A) CD4, CD8, and (B) CD25 expression. (C) Post-activation, primary cells were reanalyzed by flow cytometry for CD25 expression.

Figure 3: SCAR-mIL-2 promotes increased adenovirus transduction of naïve and ConA treated splenocytes. Varying amounts of sCAR-mIL-2 were incubated with AdUP-GFP. Following incubation, naive or ConA treated splenocytes were infected with no virus, AdUP-GFP, or AdUP-GFP conjugated with sCAR-mIL-2 at 500 vp/cell. (A) Twentyfour hours post-infection, cells were measured for GFP and CD25 expression by flow cytometry. (B) $CD4^+$ and (C) $CD8^+$ cell populations from splenocytes treated with AdUP-GFP and $25ng$ of sCAR-mIL-2 were analyzed for GFP expression. Those $GFP⁺$ cells were further analyzed for CD25 expression.

SUMMARY AND GENERAL DISCUSSION

Genetically modified T cells are being used in a variety of experimental treatments for a multitude of diseases including autoimmune disorders, cancer, infectious disease, and transplant rejection (119-121). Currently the ability to genetically modify T cells is reliant upon only a few vector technologies, the most common being retrovirus and lentivirus vectors. However, issues with these vector technologies hamper their full utilization [\(124-126\)](#page-123-0).

Adenovirus vectors have been utilized in more clinical trials than other vectors and their use has been shown to be safe. However, one obstacle with utilizing adenovirus type 5 is native tropism. As explained in chapter 1, human adenovirus type 5 utilizes the coxsackie virus and adenovirus receptor (CAR) as a cellular receptor [\(9\)](#page-114-0). The effectiveness of adenovirus therapies thus depends upon the expression of CAR. This tropism is useful for a variety of therapeutic application but T cell lineages show low to no CAR expression [\(127,](#page-123-1) [128\)](#page-123-2). Considering the lack of CAR expression in T lymphocytes, we looked at alternative targets to replace the native cellular receptor. Interleukin 2 receptor (IL-2R) embodied a potentially advantageous candidate. IL-2R is highly expressed in activated CD4⁺ and CD8⁺ T lymphocyte as well as CD4⁺Foxp3⁺ regulatory T lymphocytes [\(129\)](#page-123-3), all of which are potential therapeutic targets for gene therapy interventions.

The review reported in chapter 2 discusses a variety of strategies that have been developed to circumvent CAR deficiency. Of the strategies available, a genetic retargeting strategy has a lot of advantages. However, any incorporated ligand must be compatible with adenovirus biology. As such, targeting ligands can fail to incorporate due to size restrictions, incorrect folding of the final fiber protein, and other issues regarding the interaction of two proteins that have evolved separately. In addition, adenovirus biology restricts the types of proteins that can be utilized as targeting ligands. Since adenovirus replicate and assemble in the nucleus, all ligands must be compatible with this reducing environment. An alternative strategy utilizes a separate bi-specific protein that bridges the gap between the adenovirus fiber knob domain and an alternative cellular receptor. This strategy relies upon a recombinant protein comprised of a soluble CAR fused to a flexible linker which is in turn fused to a targeting ligand (130,131). Of importance to our strategy of utilizing IL-2 as a targeting ligand, the adapter strategy is compatible with ligands that rely upon disulphide bonds for proper folding and function.

The studies presented in chapters 3 and 4 demonstrate that adenovirus can be retargeted to T lymphocytes through a bi-specific adapter. Though few reports have been published on the topic, previous studies have shown success in improving adenovirus mediated gene transduction in T cells. Wickham et al. utilized a chemically conjugated bi-specific antibody against CD3 and showed that an increase in transduction of Jurkat, Molt-3, and resting human T cells (132). Other groups have studied a variety of fiber modified adenoviruses including type 5, type 11, type 35, RGD, and varying poly-lysine chains in a panel of human T cell lines and EBV-specific cytotoxic T cells. (133,134). Schroers et al. also studied Ad5/35 and demonstrated that this virus had increased

transduction of Jurkat and PM-1 cell lines, and primary $CD3⁺$ T cells (135). Most recently, Ad5-RGD, an Ad5 targeted to cell surface integrins through incorporation of an RGD motif into Ad5 fiber knob, was shown to provide a 3-fold increase in luciferase gene transfer and a 2.6-fold increase in hexon in ex vivo infected primary mouse T lymphocytes (136).

In our study we developed a recombinant protein comprised of a soluble CAR fused to murine interleukin 2 through a flexible linker. As shown, this adapter retained the original binding characteristics of its constituents when fused together. We then analyzed its ability to increase adenovirus infectivity of T lymphocytes. The adenovirus vector, Ad5-GL, which expresses both GFP and luciferase under CMV promoters, was chosen for this experiment. This vector allowed us to analyze both the percentage of cells infected and the amount of recombinant protein expressed. For our initial study we utilized the CTLL-2 murine T cell line. This cell line is easier to maintain than primary cells and had the appropriate surface receptor profile (CD25⁺, CAR) for analyzing our sCAR-mIL-2 adapter. The sCAR-mIL-2 adapter provided a 10-fold increase in adenovirus mediated luciferase and GFP gene expression, with 88% of CTLL-2 cells expressing GFP.

Though the CTLL-2 cell line is a useful analog for T cell studies, cell lines can carry a variety of cellular differences when compared to their primary counterparts. Progressing into primary T lymphocytes, we decided to change the promoter used to drive gene expression. This decision was made on previous studies showing that gene expression through the CMV promoter is influenced by activation status of the cells. As such, we chose to utilize the ubiquitin C promoter to drive our gene expression. Studies

have shown that the ubiquitin promoter has excellent gene expression profiles in T lymphocytes and does not respond to activation status of the cells [\(128,](#page-123-2)137). Following the development of our AdUP-GFP vector we analyzed this vector in CTLL-2 cells. In this experiment we conjugated AdUP-GFP with varying amounts of sCAR-mIL-2 and infected CTLL-2 cells. In this study, sCAR-mIL-2 provided an increase in gene transduction. Of note, the percentage of cells transduced by AdUP-GFP is much greater than the percentages seen using our previous Ad5-GL vector. The difference in GFP expression is probably due to the varying promoter strengths in T cells and helps support our decision to switch from CMV to ubiquitin c promoters. This infection is not CAR mediated since these cells were negative for CAR expression based on flow cytometry. Interestingly, Colin et al. described similar results, demonstrating CAR independent endocytosis in certain T cell lines (138).

Naïve and activated primary T lymphocytes were also infected with adenovirus conjugated to sCAR-mIL-2. In naïve T cells, sACR-mIL-2 mediated a 37-fold increase in gene transduction, infecting 15.7% of CD25⁺ T cells. In activated T cells, sCAR-mIL-2 mediated a 4.6-fold increase in gene transduction, infecting 6.2% of CD25⁺ T cells. While the fold-increase in gene expression was lower in activated T cells, the overall percentage of transduced T cells was higher, compared to the naïve counterpart. This is expected since the pool of targetable cells was much larger. However, this data hints at the possibility that there may be differences in the infectivity of naïve versus activated T cells. Overall, this study showed that a retargeting strategy utilizing a recombinant adapter approach can increase adenovirus mediated gene transduction in T lymphocytes.

In addition to purified primary T cell infection studies we analyzed the ability of sCAR-mIL-2 to mediate infection of IL-2R positive cells in a mixed culture. In the nonactivated splenocytes, sCAR-mIL-2 conjugated Ad transduced 17.4% of CD25⁺ cells, with 1.29% of all cells being GFP⁺ CD25⁺. In ConA treated splenocytes, sCAR-mIL-2 conjugated Ad transduced 7% of $CD25^+$ cells, with 4.15% of all cells being GFP^+CD25^+ . Interestingly, the percentages of $CD25⁺$ cells transduced was very similar to the same experiment performed in purified primary mouse T cells, as described in chapter 3. Also seen is the same decrease in the percentage of transduced CD25⁺ cells after activation. This pattern shows that even in a mixed culture infection, the activation status of the T cells may be interfering with Ad infection.

Future studies will focus on two aspects of the reported studies. Targeting activated T lymphocytes resulted in a small but consistent increase in transduction efficiency. Of note, some studies have shown that adenovirus may fail to escape the endosome when internalized through an alternative, clathrin-independent method (138). The variation in infectivity between the CTLL-2 cell line and activated primary cells may be explained by variations in this internalization pathway. As such, targeting a receptor that utilizes a different internalization pathway may yield increased transduction efficiency. In addition, we may target a non-internalizing receptor and rely up the native adenovirus internalization pathway.

Secondly, the fold change in transduction efficiency between naïve and activated T lymphocytes was intriguing. In non-activated primary T cells, the increase in transduction efficiency was 37-fold. However, the fold increase in transduction decreased to 4.6-fold in activated primary T cells. Since the majority of $CD25⁺$ T cells in a naïve

population are regulatory T cells, this may point to a preferential infectivity of this cell population. Further studies on infectivity of purified regulatory T cells should be progressed, as an adenovirus vector targeting regulatory T cells would have great potential in a variety of autoimmune and cancer therapies.

Lastly, we are developing the use of an IL-2 receptor targeted adenovirus for human therapies. Initial studies were progressed using a mouse IL-2 receptor targeted adenovirus. Unfortunately mouse IL-2 does not bind to the human IL-2 receptor with high affinity (117,118). To remedy this issue we developed a human IL-2R targeting adapter, sCAR-hIL-2. This adapter was shown to retain its IL-2 receptor binding in CTLL-2 cells. Though more studies are needed to fully analyze sCAR-hIL-2, our goal is to develop this adapter into a reagent usable in regulatory T cell and adoptive T cell therapies.

LIST OF REFERENCES

1. Edelstein ML, Abedi MR, Wixon J. Gene therapy clinical trials worldwide to 2007--an update. J Gene Med. 2007 Oct;9(10):833-42. PubMed PMID: 17721874. Epub 2007/08/28. eng.

2. Rowe WP, Huebner RJ, Gilmore LK, Parrott RH, Ward TG. Isolation of a cytopathogenic agent from human adenoids undergoing spontaneous degeneration in tissue culture. Proc Soc Exp Biol Med. 1953 Dec;84(3):570-3. PubMed PMID: 13134217. Epub 1953/12/01. eng.

3. Jones MS, 2nd, Harrach B, Ganac RD, Gozum MM, Dela Cruz WP, Riedel B, et al. New adenovirus species found in a patient presenting with gastroenteritis. J Virol. 2007 Jun;81(11):5978-84. PubMed PMID: 17360747. Pubmed Central PMCID: 1900323. Epub 2007/03/16. eng.

4. Robinson CM, Singh G, Henquell C, Walsh MP, Peigue-Lafeuille H, Seto D, et al. Computational analysis and identification of an emergent human adenovirus pathogen implicated in a respiratory fatality. Virology. 2011 Jan 20;409(2):141-7. PubMed PMID: 21056888. Pubmed Central PMCID: 3006489. Epub 2010/11/09. eng.

5. Liu EB, Wadford DA, Seto J, Vu M, Hudson NR, Thrasher L, et al. Computational and serologic analysis of novel and known viruses in species human adenovirus D in which serology and genomics do not correlate. PLoS One. 2012;7(3):e33212. PubMed PMID: 22427992. Pubmed Central PMCID: 3302849. Epub 2012/03/20. eng.

6. Liu H, Jin L, Koh SB, Atanasov I, Schein S, Wu L, et al. Atomic structure of human adenovirus by cryo-EM reveals interactions among protein networks. Science. 2010 Aug 27;329(5995):1038-43. PubMed PMID: 20798312. Pubmed Central PMCID: 3412078. Epub 2010/08/28. eng.

7. Reddy VS, Natchiar SK, Stewart PL, Nemerow GR. Crystal structure of human adenovirus at 3.5 A resolution. Science. 2010 Aug 27;329(5995):1071-5. PubMed PMID: 20798318. Pubmed Central PMCID: 2929978. Epub 2010/08/28. eng.

8. Russell WC. Adenoviruses: update on structure and function. J Gen Virol. 2009 Jan;90(Pt 1):1-20. PubMed PMID: 19088268. Epub 2008/12/18. eng.

9. Roelvink PW, Lizonova A, Lee JG, Li Y, Bergelson JM, Finberg RW, et al. The coxsackievirus-adenovirus receptor protein can function as a cellular attachment protein for adenovirus serotypes from subgroups A, C, D, E, and F. J Virol. 1998

Oct;72(10):7909-15. PubMed PMID: 9733828. Pubmed Central PMCID: 110119. Epub 1998/09/12. eng.

10. Sirena D, Lilienfeld B, Eisenhut M, Kalin S, Boucke K, Beerli RR, et al. The human membrane cofactor CD46 is a receptor for species B adenovirus serotype 3. J Virol. 2004 May;78(9):4454-62. PubMed PMID: 15078926. Pubmed Central PMCID: 387694. Epub 2004/04/14. eng.

11. Gaggar A, Shayakhmetov DM, Lieber A. CD46 is a cellular receptor for group B adenoviruses. Nat Med. 2003 Nov;9(11):1408-12. PubMed PMID: 14566335. Epub 2003/10/21. eng.

12. Segerman A, Atkinson JP, Marttila M, Dennerquist V, Wadell G, Arnberg N. Adenovirus type 11 uses CD46 as a cellular receptor. J Virol. 2003 Sep;77(17):9183-91. PubMed PMID: 12915534. Pubmed Central PMCID: 187375. Epub 2003/08/14. eng.

13. Marttila M, Persson D, Gustafsson D, Liszewski MK, Atkinson JP, Wadell G, et al. CD46 is a cellular receptor for all species B adenoviruses except types 3 and 7. J Virol. 2005 Nov;79(22):14429-36. PubMed PMID: 16254377. Pubmed Central PMCID: 1280233. Epub 2005/10/29. eng.

14. Fleischli C, Sirena D, Lesage G, Havenga MJ, Cattaneo R, Greber UF, et al. Species B adenovirus serotypes 3, 7, 11 and 35 share similar binding sites on the membrane cofactor protein CD46 receptor. J Gen Virol. 2007 Nov;88(Pt 11):2925-34. PubMed PMID: 17947513. Epub 2007/10/20. eng.

15. Wu E, Trauger SA, Pache L, Mullen TM, von Seggern DJ, Siuzdak G, et al. Membrane cofactor protein is a receptor for adenoviruses associated with epidemic keratoconjunctivitis. J Virol. 2004 Apr;78(8):3897-905. PubMed PMID: 15047806. Pubmed Central PMCID: 374279. Epub 2004/03/30. eng.

16. Arnberg N, Kidd AH, Edlund K, Olfat F, Wadell G. Initial interactions of subgenus D adenoviruses with A549 cellular receptors: sialic acid versus alpha(v) integrins. J Virol. 2000 Aug;74(16):7691-3. PubMed PMID: 10906228. Pubmed Central PMCID: 112295. Epub 2000/07/25. eng.

17. Arnberg N, Edlund K, Kidd AH, Wadell G. Adenovirus type 37 uses sialic acid as a cellular receptor. J Virol. 2000 Jan;74(1):42-8. PubMed PMID: 10590089. Pubmed Central PMCID: 111511. Epub 1999/12/10. eng.

18. Arnberg N, Kidd AH, Edlund K, Nilsson J, Pring-Akerblom P, Wadell G. Adenovirus type 37 binds to cell surface sialic acid through a charge-dependent interaction. Virology. 2002 Oct 10;302(1):33-43. PubMed PMID: 12429514. Epub 2002/11/14. eng.

19. Arnberg N, Pring-Akerblom P, Wadell G. Adenovirus type 37 uses sialic acid as a cellular receptor on Chang C cells. J Virol. 2002 Sep;76(17):8834-41. PubMed PMID: 12163603. Pubmed Central PMCID: 136979. Epub 2002/08/07. eng.

20. Wickham TJ, Mathias P, Cheresh DA, Nemerow GR. Integrins alpha v beta 3 and alpha v beta 5 promote adenovirus internalization but not virus attachment. Cell. 1993 Apr 23;73(2):309-19. PubMed PMID: 8477447. Epub 1993/04/23. eng.

21. Wang K, Huang S, Kapoor-Munshi A, Nemerow G. Adenovirus internalization and infection require dynamin. J Virol. 1998 Apr;72(4):3455-8. PubMed PMID: 9525681. Pubmed Central PMCID: 109852. Epub 1998/04/03. eng.

22. Wiethoff CM, Wodrich H, Gerace L, Nemerow GR. Adenovirus protein VI mediates membrane disruption following capsid disassembly. J Virol. 2005 Feb;79(4):1992-2000. PubMed PMID: 15681401. Pubmed Central PMCID: 546575. Epub 2005/02/01. eng.

23. Wodrich H, Henaff D, Jammart B, Segura-Morales C, Seelmeir S, Coux O, et al. A capsid-encoded PPxY-motif facilitates adenovirus entry. PLoS Pathog. 2010 Mar;6(3):e1000808. PubMed PMID: 20333243. Pubmed Central PMCID: 2841620. Epub 2010/03/25. eng.

24. Leopold PL, Ferris B, Grinberg I, Worgall S, Hackett NR, Crystal RG. Fluorescent virions: dynamic tracking of the pathway of adenoviral gene transfer vectors in living cells. Hum Gene Ther. 1998 Feb 10;9(3):367-78. PubMed PMID: 9508054. Epub 1998/03/21. eng.

25. Suomalainen M, Nakano MY, Keller S, Boucke K, Stidwill RP, Greber UF. Microtubule-dependent plus- and minus end-directed motilities are competing processes for nuclear targeting of adenovirus. J Cell Biol. 1999 Feb 22;144(4):657-72. PubMed PMID: 10037788. Pubmed Central PMCID: 2132937. Epub 1999/02/26. eng.

26. Leopold PL, Kreitzer G, Miyazawa N, Rempel S, Pfister KK, Rodriguez-Boulan E, et al. Dynein- and microtubule-mediated translocation of adenovirus serotype 5 occurs after endosomal lysis. Hum Gene Ther. 2000 Jan 1;11(1):151-65. PubMed PMID: 10646647. Epub 2000/01/26. eng.

27. Suomalainen M, Nakano MY, Boucke K, Keller S, Greber UF. Adenovirusactivated PKA and p38/MAPK pathways boost microtubule-mediated nuclear targeting of virus. EMBO J. 2001 Mar 15;20(6):1310-9. PubMed PMID: 11250897. Pubmed Central PMCID: 145525. Epub 2001/03/17. eng.

28. Strunze S, Engelke MF, Wang IH, Puntener D, Boucke K, Schleich S, et al. Kinesin-1-mediated capsid disassembly and disruption of the nuclear pore complex promote virus infection. Cell Host Microbe. 2011 Sep 15;10(3):210-23. PubMed PMID: 21925109. Epub 2011/09/20. eng.

29. White E. Regulation of the cell cycle and apoptosis by the oncogenes of adenovirus. Oncogene. 2001 Nov 26;20(54):7836-46. PubMed PMID: 11753666. Epub 2001/12/26. eng.

30. Wold WS, Doronin K, Toth K, Kuppuswamy M, Lichtenstein DL, Tollefson AE. Immune responses to adenoviruses: viral evasion mechanisms and their implications for the clinic. Curr Opin Immunol. 1999 Aug;11(4):380-6. PubMed PMID: 10448144. Epub 1999/08/17. eng.

31. Knipe DM, Howley PM, Griffin DE. Fundamental virology. 4th ed. Philadelphia: Lippincott Williams & Wilkins; 2001. xi, 1395 p. p.

32. Young CS. The structure and function of the adenovirus major late promoter. Curr Top Microbiol Immunol. 2003;272:213-49. PubMed PMID: 12747552. Epub 2003/05/16. eng.

33. Herisse J, Rigolet M, de Dinechin SD, Galibert F. Nucleotide sequence of adenovirus 2 DNA fragment encoding for the carboxylic region of the fiber protein and the entire E4 region. Nucleic Acids Res. 1981 Aug 25;9(16):4023-42. PubMed PMID: 6985482. Pubmed Central PMCID: 327412. Epub 1981/08/25. eng.

34. Nicklin SA, Wu E, Nemerow GR, Baker AH. The influence of adenovirus fiber structure and function on vector development for gene therapy. Mol Ther. 2005 Sep;12(3):384-93. PubMed PMID: 15993650. Epub 2005/07/05. eng.

35. Wu E, Nemerow GR. Virus yoga: the role of flexibility in virus host cell recognition. Trends Microbiol. 2004 Apr;12(4):162-9. PubMed PMID: 15051066. Epub 2004/03/31. eng.

36. Xia D, Henry LJ, Gerard RD, Deisenhofer J. Crystal structure of the receptorbinding domain of adenovirus type 5 fiber protein at 1.7 A resolution. Structure. 1994 Dec 15;2(12):1259-70. PubMed PMID: 7704534. Epub 1994/12/15. eng.

37. Xia D, Henry L, Gerard RD, Deisenhofer J. Structure of the receptor binding domain of adenovirus type 5 fiber protein. Curr Top Microbiol Immunol. 1995;199 (Pt 1):39-46. PubMed PMID: 7555059. Epub 1995/01/01. eng.

38. Roelvink PW, Mi Lee G, Einfeld DA, Kovesdi I, Wickham TJ. Identification of a conserved receptor-binding site on the fiber proteins of CAR-recognizing adenoviridae. Science. 1999 Nov 19;286(5444):1568-71. PubMed PMID: 10567265. Epub 1999/11/24. eng.

39. Bewley MC, Springer K, Zhang YB, Freimuth P, Flanagan JM. Structural analysis of the mechanism of adenovirus binding to its human cellular receptor, CAR. Science. 1999 Nov 19;286(5444):1579-83. PubMed PMID: 10567268. Epub 1999/11/24. eng.

40. Novelli A, Boulanger PA. Assembly of adenovirus type 2 fiber synthesized in cell-free translation system. J Biol Chem. 1991 May 15;266(14):9299-303. PubMed PMID: 2026627. Epub 1991/05/15. eng.

41. Henry LJ, Xia D, Wilke ME, Deisenhofer J, Gerard RD. Characterization of the knob domain of the adenovirus type 5 fiber protein expressed in Escherichia coli. J Virol. 1994 Aug;68(8):5239-46. PubMed PMID: 8035520. Pubmed Central PMCID: 236468. Epub 1994/08/01. eng.

42. Louis N, Fender P, Barge A, Kitts P, Chroboczek J. Cell-binding domain of adenovirus serotype 2 fiber. J Virol. 1994 Jun;68(6):4104-6. PubMed PMID: 8189552. Pubmed Central PMCID: 236926. Epub 1994/06/01. eng.

43. Stevenson SC, Rollence M, White B, Weaver L, McClelland A. Human adenovirus serotypes 3 and 5 bind to two different cellular receptors via the fiber head domain. J Virol. 1995 May;69(5):2850-7. PubMed PMID: 7707507. Pubmed Central PMCID: 188980. Epub 1995/05/01. eng.

44. Bergelson JM, Cunningham JA, Droguett G, Kurt-Jones EA, Krithivas A, Hong JS, et al. Isolation of a common receptor for Coxsackie B viruses and adenoviruses 2 and 5. Science. 1997 Feb 28;275(5304):1320-3. PubMed PMID: 9036860. Epub 1997/02/28. eng.

45. Coyne CB, Bergelson JM. CAR: a virus receptor within the tight junction. Adv Drug Deliv Rev. 2005 Apr 25;57(6):869-82. PubMed PMID: 15820557. Epub 2005/04/12. eng.

46. Cohen CJ, Shieh JT, Pickles RJ, Okegawa T, Hsieh JT, Bergelson JM. The coxsackievirus and adenovirus receptor is a transmembrane component of the tight junction. Proc Natl Acad Sci U S A. 2001 Dec 18;98(26):15191-6. PubMed PMID: 11734628. Pubmed Central PMCID: 65005. Epub 2001/12/06. eng.

47. Walters RW, Freimuth P, Moninger TO, Ganske I, Zabner J, Welsh MJ. Adenovirus fiber disrupts CAR-mediated intercellular adhesion allowing virus escape. Cell. 2002 Sep 20;110(6):789-99. PubMed PMID: 12297051. Epub 2002/09/26. eng.

48. Tomko RP, Xu R, Philipson L. HCAR and MCAR: the human and mouse cellular receptors for subgroup C adenoviruses and group B coxsackieviruses. Proc Natl Acad Sci U S A. 1997 Apr 1;94(7):3352-6. PubMed PMID: 9096397. Pubmed Central PMCID: 20373. Epub 1997/04/01. eng.

49. Mosmann TR, Cherwinski H, Bond MW, Giedlin MA, Coffman RL. Two types of murine helper T cell clone. I. Definition according to profiles of lymphokine activities and secreted proteins. J Immunol. 1986 Apr 1;136(7):2348-57. PubMed PMID: 2419430. Epub 1986/04/01. eng.

50. Mosmann TR, Coffman RL. TH1 and TH2 cells: different patterns of lymphokine secretion lead to different functional properties. Annu Rev Immunol. 1989;7:145-73. PubMed PMID: 2523712. Epub 1989/01/01. eng.

51. Paul WE, Seder RA. Lymphocyte responses and cytokines. Cell. 1994 Jan 28;76(2):241-51. PubMed PMID: 7904900. Epub 1994/01/28. eng.

52. Suzuki Y, Orellana MA, Schreiber RD, Remington JS. Interferon-gamma: the major mediator of resistance against Toxoplasma gondii. Science. 1988 Apr 22;240(4851):516-8. PubMed PMID: 3128869. Epub 1988/04/22. eng.

53. Darrah PA, Patel DT, De Luca PM, Lindsay RW, Davey DF, Flynn BJ, et al. Multifunctional TH1 cells define a correlate of vaccine-mediated protection against Leishmania major. Nat Med. 2007 Jul;13(7):843-50. PubMed PMID: 17558415. Epub 2007/06/15. eng.

54. Williams MA, Tyznik AJ, Bevan MJ. Interleukin-2 signals during priming are required for secondary expansion of CD8+ memory T cells. Nature. 2006 Jun 15;441(7095):890-3. PubMed PMID: 16778891. Pubmed Central PMCID: 2776073. Epub 2006/06/17. eng.

55. Szabo SJ, Dighe AS, Gubler U, Murphy KM. Regulation of the interleukin (IL)- 12R beta 2 subunit expression in developing T helper 1 (Th1) and Th2 cells. J Exp Med. 1997 Mar 3;185(5):817-24. PubMed PMID: 9120387. Pubmed Central PMCID: 2196166. Epub 1997/03/03. eng.

56. Afkarian M, Sedy JR, Yang J, Jacobson NG, Cereb N, Yang SY, et al. T-bet is a STAT1-induced regulator of IL-12R expression in naive CD4+ T cells. Nat Immunol. 2002 Jun;3(6):549-57. PubMed PMID: 12006974. Epub 2002/05/15. eng.

57. Le Gros G, Ben-Sasson SZ, Seder R, Finkelman FD, Paul WE. Generation of interleukin 4 (IL-4)-producing cells in vivo and in vitro: IL-2 and IL-4 are required for in vitro generation of IL-4-producing cells. J Exp Med. 1990 Sep 1;172(3):921-9. PubMed PMID: 2117636. Pubmed Central PMCID: 2188542. Epub 1990/09/01. eng.

58. Weaver CT, Harrington LE, Mangan PR, Gavrieli M, Murphy KM. Th17: an effector CD4 T cell lineage with regulatory T cell ties. Immunity. 2006 Jun;24(6):677-88. PubMed PMID: 16782025. Epub 2006/06/20. eng.

59. Park H, Li Z, Yang XO, Chang SH, Nurieva R, Wang YH, et al. A distinct lineage of CD4 T cells regulates tissue inflammation by producing interleukin 17. Nat Immunol. 2005 Nov;6(11):1133-41. PubMed PMID: 16200068. Pubmed Central PMCID: 1618871. Epub 2005/10/04. eng.

60. Harrington LE, Hatton RD, Mangan PR, Turner H, Murphy TL, Murphy KM, et al. Interleukin 17-producing CD4+ effector T cells develop via a lineage distinct from the T helper type 1 and 2 lineages. Nat Immunol. 2005 Nov;6(11):1123-32. PubMed PMID: 16200070. Epub 2005/10/04. eng.

61. Sakaguchi S. Naturally arising CD4+ regulatory t cells for immunologic selftolerance and negative control of immune responses. Annu Rev Immunol. 2004;22:531- 62. PubMed PMID: 15032588. Epub 2004/03/23. eng.

62. Fontenot JD, Gavin MA, Rudensky AY. Foxp3 programs the development and function of CD4+CD25+ regulatory T cells. Nat Immunol. 2003 Apr;4(4):330-6. PubMed PMID: 12612578. Epub 2003/03/04. eng.

63. Hori S, Nomura T, Sakaguchi S. Control of regulatory T cell development by the transcription factor Foxp3. Science. 2003 Feb 14;299(5609):1057-61. PubMed PMID: 12522256. Epub 2003/01/11. eng.

64. Cantor H, Boyse EA. Functional subclasses of T-lymphocytes bearing different Ly antigens. I. The generation of functionally distinct T-cell subclasses is a differentiative process independent of antigen. J Exp Med. 1975 Jun 1;141(6):1376-89. PubMed PMID: 1092798. Pubmed Central PMCID: 2189856. Epub 1975/06/01. eng.

65. Cerottini JC, Nordin AA, Brunner KT. Specific in vitro cytotoxicity of thymusderived lymphocytes sensitized to alloantigens. Nature. 1970 Dec 26;228(5278):1308-9. PubMed PMID: 4922690. Epub 1970/12/26. eng.

66. Golstein P, Wigzell H, Blomgren H, Svedmyr EA. Cells mediating specific in vitro cytotoxicity. II. Probable autonomy of thymus-processed lymphocytes (T cells) for the killing of allogeneic target cells. J Exp Med. 1972 Apr 1;135(4):890-906. PubMed PMID: 5018054. Pubmed Central PMCID: 2139161. Epub 1972/04/01. eng.

67. Hickman HD, Takeda K, Skon CN, Murray FR, Hensley SE, Loomis J, et al. Direct priming of antiviral CD8+ T cells in the peripheral interfollicular region of lymph nodes. Nat Immunol. 2008 Feb;9(2):155-65. PubMed PMID: 18193049. Epub 2008/01/15. eng.

68. John B, Harris TH, Tait ED, Wilson EH, Gregg B, Ng LG, et al. Dynamic Imaging of CD8(+) T cells and dendritic cells during infection with Toxoplasma gondii. PLoS Pathog. 2009 Jul;5(7):e1000505. PubMed PMID: 19578440. Pubmed Central PMCID: 2700268. Epub 2009/07/07. eng.

69. Badovinac VP, Haring JS, Harty JT. Initial T cell receptor transgenic cell precursor frequency dictates critical aspects of the CD8(+) T cell response to infection. Immunity. 2007 Jun;26(6):827-41. PubMed PMID: 17555991. Pubmed Central PMCID: 1989155. Epub 2007/06/09. eng.

70. Mescher MF, Curtsinger JM, Agarwal P, Casey KA, Gerner M, Hammerbeck CD, et al. Signals required for programming effector and memory development by CD8+ T cells. Immunol Rev. 2006 Jun;211:81-92. PubMed PMID: 16824119. Epub 2006/07/11. eng.

71. Parish IA, Kaech SM. Diversity in CD8(+) T cell differentiation. Curr Opin Immunol. 2009 Jun;21(3):291-7. PubMed PMID: 19497720. Epub 2009/06/06. eng.

72. Morgan DA, Ruscetti FW, Gallo R. Selective in vitro growth of T lymphocytes from normal human bone marrows. Science. 1976 Sep 10;193(4257):1007-8. PubMed PMID: 181845.

73. Gillis S, Smith KA. Long term culture of tumour-specific cytotoxic T cells. Nature. 1977 Jul 14;268(5616):154-6. PubMed PMID: 145543. Epub 1977/07/14. eng.

74. Taniguchi T, Matsui H, Fujita T, Takaoka C, Kashima N, Yoshimoto R, et al. Structure and expression of a cloned cDNA for human interleukin-2. Nature. 1983 Mar 24-30;302(5906):305-10. PubMed PMID: 6403867.

75. Kane LP, Lin J, Weiss A. It's all Rel-ative: NF-kappaB and CD28 costimulation of T-cell activation. Trends in immunology. 2002 Aug;23(8):413-20. PubMed PMID: 12133805.

76. Garrity PA, Chen D, Rothenberg EV, Wold BJ. Interleukin-2 transcription is regulated in vivo at the level of coordinated binding of both constitutive and regulated factors. Mol Cell Biol. 1994 Mar;14(3):2159-69. PubMed PMID: 8114746. Pubmed Central PMCID: 358576.

77. Crabtree GR, Olson EN. NFAT signaling: choreographing the social lives of cells. Cell. 2002 Apr;109 Suppl:S67-79. PubMed PMID: 11983154.

78. Novak TJ, White PM, Rothenberg EV. Regulatory anatomy of the murine interleukin-2 gene. Nucleic Acids Res. 1990 Aug 11;18(15):4523-33. PubMed PMID: 2388832. Pubmed Central PMCID: 331273.

79. Jain J, Loh C, Rao A. Transcriptional regulation of the IL-2 gene. Curr Opin Immunol. 1995 Jun;7(3):333-42. PubMed PMID: 7546397.

80. Isakov N, Altman A. Protein kinase C(theta) in T cell activation. Annu Rev Immunol. 2002;20:761-94. PubMed PMID: 11861617.

81. Lindstein T, June CH, Ledbetter JA, Stella G, Thompson CB. Regulation of lymphokine messenger RNA stability by a surface-mediated T cell activation pathway. Science. 1989 Apr 21;244(4902):339-43. PubMed PMID: 2540528.

82. Robb RJ, Munck A, Smith KA. T cell growth factor receptors. Quantitation, specificity, and biological relevance. J Exp Med. 1981 Nov 1;154(5):1455-74. PubMed PMID: 6975347. Pubmed Central PMCID: 2186509.

83. Nelson BH, Willerford DM. Biology of the interleukin-2 receptor. Advances in immunology. 1998;70:1-81. PubMed PMID: 9755337.

84. Leonard WJ. Cytokines and immunodeficiency diseases. Nature reviews Immunology. 2001 Dec;1(3):200-8. PubMed PMID: 11905829.

85. Willerford DM, Chen J, Ferry JA, Davidson L, Ma A, Alt FW. Interleukin-2 receptor alpha chain regulates the size and content of the peripheral lymphoid compartment. Immunity. 1995 Oct;3(4):521-30. PubMed PMID: 7584142.

86. Suzuki H, Kundig TM, Furlonger C, Wakeham A, Timms E, Matsuyama T, et al. Deregulated T cell activation and autoimmunity in mice lacking interleukin-2 receptor beta. Science. 1995 Jun 9;268(5216):1472-6. PubMed PMID: 7770771.

87. Kim HP, Imbert J, Leonard WJ. Both integrated and differential regulation of components of the IL-2/IL-2 receptor system. Cytokine Growth Factor Rev. 2006 Oct;17(5):349-66. PubMed PMID: 16911870.

88. Gaffen S. Signaling Domains of the Interleukin 2 Receptor. Cytokine. 2001;14(2):63-77.

89. Hemar A, Subtil A, Lieb M, Morelon E, Hellio R, Dautry-Varsat A. Endocytosis of interleukin 2 receptors in human T lymphocytes: distinct intracellular localization and fate of the receptor alpha, beta, and gamma chains. J Cell Biol. 1995 Apr;129(1):55-64. PubMed PMID: 7698995. Pubmed Central PMCID: 2120376.

90. Yu CL, Burakoff SJ. Involvement of proteasomes in regulating Jak-STAT pathways upon interleukin-2 stimulation. J Biol Chem. 1997 May 30;272(22):14017-20. PubMed PMID: 9162019.

91. Yu A, Olosz F, Choi CY, Malek TR. Efficient internalization of IL-2 depends on the distal portion of the cytoplasmic tail of the IL-2R common gamma-chain and a lymphoid cell environment. J Immunol. 2000 Sep 1;165(5):2556-62. PubMed PMID: 10946282.

92. Yu A, Malek TR. The proteasome regulates receptor-mediated endocytosis of interleukin-2. J Biol Chem. 2001 Jan 5;276(1):381-5. PubMed PMID: 11032838.

93. Blattman JN, Grayson JM, Wherry EJ, Kaech SM, Smith KA, Ahmed R. Therapeutic use of IL-2 to enhance antiviral T-cell responses in vivo. Nat Med. 2003 May;9(5):540-7. PubMed PMID: 12692546.

94. Cheng LE, Ohlen C, Nelson BH, Greenberg PD. Enhanced signaling through the IL-2 receptor in CD8+ T cells regulated by antigen recognition results in preferential proliferation and expansion of responding CD8+ T cells rather than promotion of cell death. Proc Natl Acad Sci U S A. 2002 Mar 5;99(5):3001-6. PubMed PMID: 11867736. Pubmed Central PMCID: 122462.

95. Cheng LE, Greenberg PD. Selective delivery of augmented IL-2 receptor signals to responding CD8+ T cells increases the size of the acute antiviral response and of the resulting memory T cell pool. J Immunol. 2002 Nov 1;169(9):4990-7. PubMed PMID: 12391213.

96. Kundig TM, Schorle H, Bachmann MF, Hengartner H, Zinkernagel RM, Horak I. Immune responses in interleukin-2-deficient mice. Science. 1993 Nov 12;262(5136):1059-61. PubMed PMID: 8235625.

97. Bachmann MF, Schorle H, Kuhn R, Muller W, Hengartner H, Zinkernagel RM, et al. Antiviral immune responses in mice deficient for both interleukin-2 and interleukin-4. J Virol. 1995 Aug;69(8):4842-6. PubMed PMID: 7609051. Pubmed Central PMCID: 189297.

98. Suzuki H, Hayakawa A, Bouchard D, Nakashima I, Mak TW. Normal thymic selection, superantigen-induced deletion and Fas-mediated apoptosis of T cells in IL-2 receptor beta chain-deficient mice. Int Immunol. 1997 Sep;9(9):1367-74. PubMed PMID: 9310840.

99. Tsunobuchi H, Nishimura H, Goshima F, Daikoku T, Nishiyama Y, Yoshikai Y. Memory-type CD8+ T cells protect IL-2 receptor alpha-deficient mice from systemic infection with herpes simplex virus type 2. J Immunol. 2000 Oct 15;165(8):4552-60. PubMed PMID: 11035096.

100. Malek TR, Yu A, Scibelli P, Lichtenheld MG, Codias EK. Broad programming by IL-2 receptor signaling for extended growth to multiple cytokines and functional maturation of antigen-activated T cells. J Immunol. 2001 Feb 1;166(3):1675-83. PubMed PMID: 11160210.

101. Jin H, Gong D, Adeegbe D, Bayer AL, Rolle C, Yu A, et al. Quantitative assessment concerning the contribution of IL-2Rbeta for superantigen-mediated T cell responses in vivo. Int Immunol. 2006 Apr;18(4):565-72. PubMed PMID: 16540525. 102. Dooms H, Kahn E, Knoechel B, Abbas AK. IL-2 induces a competitive survival advantage in T lymphocytes. J Immunol. 2004 May 15;172(10):5973-9. PubMed PMID: 15128779.

103. Dooms H, Wolslegel K, Lin P, Abbas AK. Interleukin-2 enhances CD4+ T cell memory by promoting the generation of IL-7R alpha-expressing cells. J Exp Med. 2007 Mar 19;204(3):547-57. PubMed PMID: 17312008. Pubmed Central PMCID: 2137906. 104. Wu Y, Borde M, Heissmeyer V, Feuerer M, Lapan AD, Stroud JC, et al. FOXP3 controls regulatory T cell function through cooperation with NFAT. Cell. 2006 Jul 28;126(2):375-87. PubMed PMID: 16873067.

105. Ono M, Yaguchi H, Ohkura N, Kitabayashi I, Nagamura Y, Nomura T, et al. Foxp3 controls regulatory T-cell function by interacting with AML1/Runx1. Nature. 2007 Apr 5;446(7136):685-9. PubMed PMID: 17377532.

106. Bayer AL, Yu A, Malek TR. Function of the IL-2R for thymic and peripheral $CD4+CD25+ Foxp3+ T$ regulatory cells. J Immunol. 2007 Apr $1;178(7):4062-71$. PubMed PMID: 17371960.

107. Liston A, Rudensky AY. Thymic development and peripheral homeostasis of regulatory T cells. Curr Opin Immunol. 2007 Apr;19(2):176-85. PubMed PMID: 17306520.

108. Fontenot JD, Dooley JL, Farr AG, Rudensky AY. Developmental regulation of Foxp3 expression during ontogeny. J Exp Med. 2005 Oct 3;202(7):901-6. PubMed PMID: 16203863. Pubmed Central PMCID: 2213175.

109. Burchill MA, Yang J, Vogtenhuber C, Blazar BR, Farrar MA. IL-2 receptor betadependent STAT5 activation is required for the development of Foxp3+ regulatory T cells. J Immunol. 2007 Jan 1;178(1):280-90. PubMed PMID: 17182565.

110. Bayer AL, Yu A, Adeegbe D, Malek TR. Essential role for interleukin-2 for $CD4(+)CD25(+)$ T regulatory cell development during the neonatal period. J Exp Med. 2005 Mar 7;201(5):769-77. PubMed PMID: 15753210. Pubmed Central PMCID: 2212835.

111. Chen W, Jin W, Hardegen N, Lei KJ, Li L, Marinos N, et al. Conversion of peripheral CD4+CD25- naive T cells to CD4+CD25+ regulatory T cells by TGF-beta induction of transcription factor Foxp3. J Exp Med. 2003 Dec 15;198(12):1875-86. PubMed PMID: 14676299. Pubmed Central PMCID: 2194145.

112. Fantini MC, Becker C, Monteleone G, Pallone F, Galle PR, Neurath MF. Cutting edge: TGF-beta induces a regulatory phenotype in CD4+CD25- T cells through Foxp3 induction and down-regulation of Smad7. J Immunol. 2004 May 1;172(9):5149-53. PubMed PMID: 15100250.

113. Davidson TS, DiPaolo RJ, Andersson J, Shevach EM. Cutting Edge: IL-2 is essential for TGF-beta-mediated induction of Foxp3+ T regulatory cells. J Immunol. 2007 Apr 1;178(7):4022-6. PubMed PMID: 17371955.

114. Fontenot JD, Rasmussen JP, Gavin MA, Rudensky AY. A function for interleukin 2 in Foxp3-expressing regulatory T cells. Nat Immunol. 2005 Nov;6(11):1142-51. PubMed PMID: 16227984.

115. Furtado GC, Curotto de Lafaille MA, Kutchukhidze N, Lafaille JJ. Interleukin 2 signaling is required for $CD4(+)$ regulatory T cell function. J Exp Med. 2002 Sep 16;196(6):851-7. PubMed PMID: 12235217. Pubmed Central PMCID: 2194060.

116. Malek TR, Yu A, Vincek V, Scibelli P, Kong L. CD4 regulatory T cells prevent lethal autoimmunity in IL-2Rbeta-deficient mice. Implications for the nonredundant function of IL-2. Immunity. 2002 Aug;17(2):167-78. PubMed PMID: 12196288.

117. Mosmann TR, Yokota T, Kastelein R, Zurawski SM, Arai N, Takebe Y. Speciesspecificity of T cell stimulating activities of IL 2 and BSF-1 (IL 4): comparison of normal and recombinant, mouse and human IL 2 and BSF-1 (IL 4). J Immunol 1987 Mar 15;138(6):1813-6. PMID: 3493289

118. Liu K, Greene WC, Goldsmith M. The alpha chain of the IL-2 receptor determines the species specificity of high-affinity IL-2 binding. Cytokine 1996 Aug;8(8):613-21. PMID: 8894436

119. Kennedy-Nasser AA, Brenner MK. T-cell therapy after hematopoietic stem cell transplantation. Curr Opin Hematol. 2007 Nov;14(6):616-24. PubMed PMID: 17898565. Epub 2007/09/28. eng.

120. Morgan RA, Dudley ME, Rosenberg SA. Adoptive cell therapy: genetic modification to redirect effector cell specificity. Cancer J. 2010 Jul-Aug;16(4):336-41. PubMed PMID: 20693844. Epub 2010/08/10. eng.

121. Razonable RR. Immune-based therapies for cytomegalovirus infection. Immunotherapy. 2010 Jan;2(1):117-30. PubMed PMID: 20635892. Epub 2010/07/20. eng.

122. Bobisse S, Rondina M, Merlo A, Tisato V, Mandruzzato S, Amendola M, et al. Reprogramming T lymphocytes for melanoma adoptive immunotherapy by T-cell receptor gene transfer with lentiviral vectors. Cancer Res. 2009 Dec 15;69(24):9385-94. PubMed PMID: 19996290. Epub 2009/12/10. eng.

123. Dardalhon V, Jaleco S, Kinet S, Herpers B, Steinberg M, Ferrand C, et al. IL-7 differentially regulates cell cycle progression and HIV-1-based vector infection in neonatal and adult CD4+ T cells. Proc Natl Acad Sci U S A. 2001 Jul 31;98(16):9277-82. PubMed PMID: 11470908. Pubmed Central PMCID: 55411. Epub 2001/07/27. eng. 124. Baum C. Insertional mutagenesis in gene therapy and stem cell biology. Curr Opin Hematol. 2007 Jul;14(4):337-42. PubMed PMID: 17534158. Epub 2007/05/31. eng. 125. Hacein-Bey-Abina S, Garrigue A, Wang GP, Soulier J, Lim A, Morillon E, et al. Insertional oncogenesis in 4 patients after retrovirus-mediated gene therapy of SCID-X1. J Clin Invest. 2008 Sep;118(9):3132-42. PubMed PMID: 18688285. Pubmed Central PMCID: 2496963. Epub 2008/08/09. eng.

126. Hargrove PW, Kepes S, Hanawa H, Obenauer JC, Pei D, Cheng C, et al. Globin lentiviral vector insertions can perturb the expression of endogenous genes in betathalassemic hematopoietic cells. Mol Ther. 2008 Mar;16(3):525-33. PubMed PMID: 18195719. Epub 2008/01/16. eng.

127. Schmidt MR, Piekos B, Cabatingan MS, Woodland RT. Expression of a human coxsackie/adenovirus receptor transgene permits adenovirus infection of primary lymphocytes. J Immunol. 2000 Oct 1;165(7):4112-9. PubMed PMID: 11034423. Epub 2000/10/18. eng.

128. Hurez V, Dzialo-Hatton R, Oliver J, Matthews RJ, Weaver CT. Efficient adenovirus-mediated gene transfer into primary T cells and thymocytes in a new coxsackie/adenovirus receptor transgenic model. BMC Immunol. 2002 May 2;3:4. PubMed PMID: 12019030. Pubmed Central PMCID: 113271. Epub 2002/05/23. eng. 129. Malek TR. The Biology of Interleukin-2. Annual Review of Immunology. 2008;26(1):453-79.

130. Dmitriev I, Kashentseva E, Rogers BE, Krasnykh V, Curiel DT. Ectodomain of coxsackievirus and adenovirus receptor genetically fused to epidermal growth factor mediates adenovirus targeting to epidermal growth factor receptor-positive cells. J Virol. 2000 Aug;74(15):6875-84. PubMed PMID: 10888627. Pubmed Central PMCID: 112205. Epub 2000/07/11. eng.

131. Harvey TJ, Burdon D, Steele L, Ingram N, Hall GD, Selby PJ, et al. Retargeted adenoviral cancer gene therapy for tumour cells overexpressing epidermal growth factor receptor or urokinase-type plasminogen activator receptor. Gene Ther. 2010 Aug;17(8):1000-10. PubMed PMID: 20410926. Epub 2010/04/23. eng.

132. Wickham TJ, Lee GM, Titus JA, Sconocchia G, Bakacs T, Kovesdi I, et al. Targeted adenovirus-mediated gene delivery to T cells via CD3. J Virol. 1997

Oct;71(10):7663-9. PubMed PMID: 9311849. Pubmed Central PMCID: 192116. Epub 1997/10/06. eng.

133. Yotnda P, Zompeta C, Heslop HE, Andreeff M, Brenner MK, Marini F. Comparison of the efficiency of transduction of leukemic cells by fiber-modified adenoviruses. Hum Gene Ther. 2004 Dec;15(12):1229-42. PubMed PMID: 15684699. Epub 2005/02/03. eng.

134. Yotnda P. Targeted delivery of adenoviral vectors by cytotoxic T cells. Blood. 2004;104(8):2272-80.

135. Schroers R. Gene transfer into human T lymphocytes and natural killer cells by Ad5/F35 chimeric adenoviral vectors. Experimental Hematology. 2004;32(6):536-46.

136. Sengupta S, Ulasov IV, Thaci B, Ahmed AU, Lesniak MS. Enhanced transduction and replication of RGD-fiber modified adenovirus in primary T cells. PLoS One. 2011;6(3):e18091. PubMed PMID: 21464908. Pubmed Central PMCID: 3065494. Epub 2011/04/06. eng.

137. Wan YY. Transgenic expression of the coxsackie/adenovirus receptor enables adenoviral-mediated gene delivery in naive T cells. Proceedings of the National Academy of Sciences. 2000;97(25):13784-9.

138. Colin M. Factors involved in the sensitivity of different hematopoietic cell lines to infection by subgroup C adenovirus: implication for gene therapy of human lymphocytic malignancies. Virology. 2004;320(1):23-39.

APPENDIX A

INSTITUTIONAL REVIEW BOARD FOR HUMAN USE DESIGNATION OF NOT HUMAN SUBJECTS RESEARCH

The reviewer has determined that this proposal is **not** subject to FDA regulations and is **not** Human Subjects Research. Note that any changes to the project should be resubmitted to the Office of the IRB for determination.

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APPENDIX B

ANIMAL STUDIES COMMITTEE APPROVAL OF PROTOCOL FOR EXPERIMENTS URILIZING ANIMALS

Washington University in St. Louis

Animal Studies Committee

Animal Welfare Assurance # A-3381-01 May 20, 2013

The Animal Studies Committee of Washington University has reviewed this protocol for the use of animals in conjunction with the research project named above. Federal laws and guidelines require that institutional animal care and use committees review ongoing projects annually. For the first two years after initial approval of this protocol, you will be asked to submit an annual progress report describing any changes in this protocol.

Approval Date: 02/11/2011 Approval No. 20100254 Expiration Date: 02/11/2014 Amendment (#1, Year 3) approved 05/20/2013 SPECIES: Mouse

It is your responsibility to see that all persons who use animals under your direction understand and follow the approved protocol. Should it become necessary to make substantial changes in this protocol, you must submit a new protocol. **Failure to comply with these provisions can result in suspension of the research.**

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