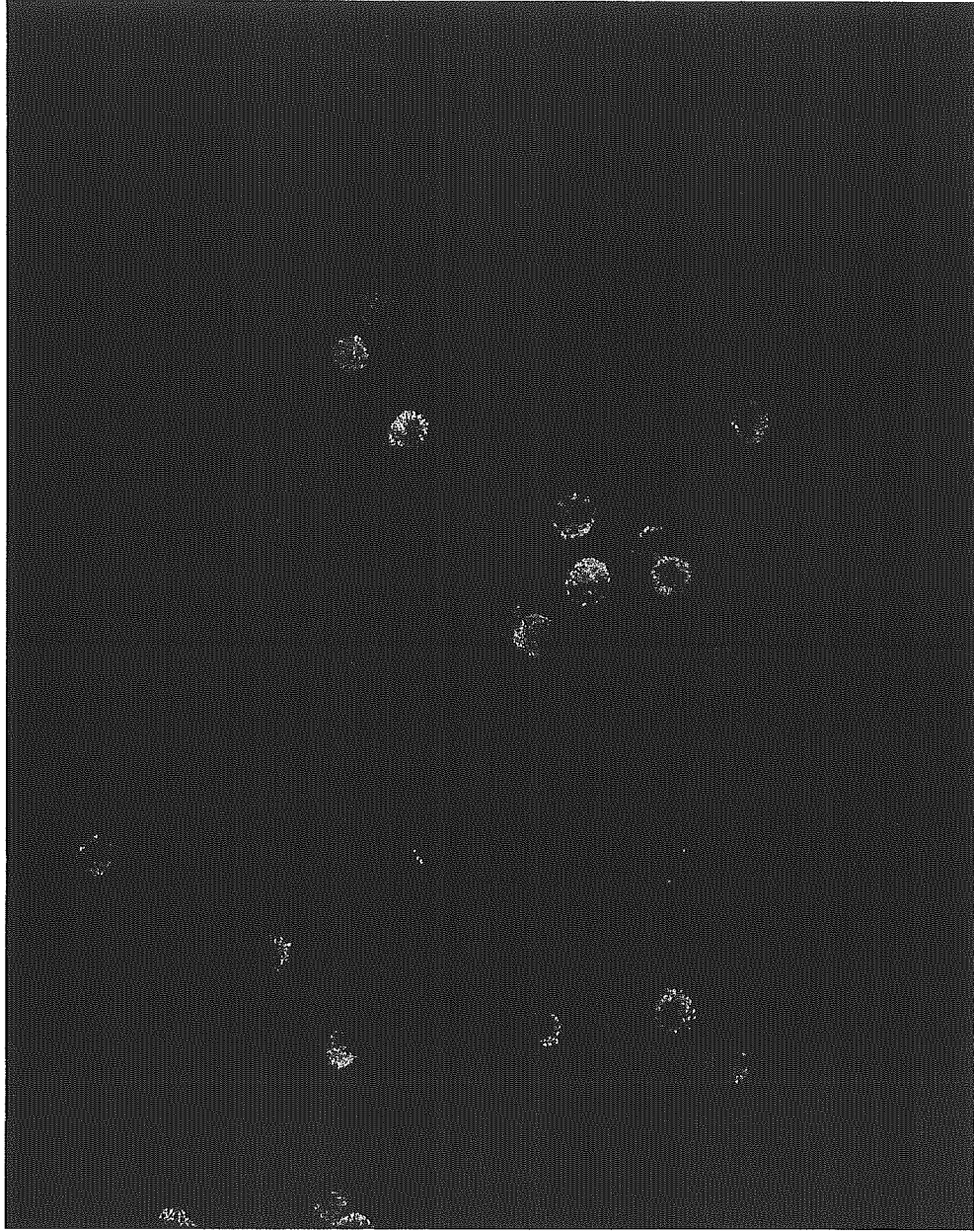


LCM汚染マウス血清のIFA



研究成果の刊行に関する一覧表

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—Note—

## Transgene Insertion Pattern Analysis Using Genomic Walking in a Transgenic Mouse Line

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**Abstract:** A transgene mapping technique (Noguchi et al., *Exp. Anim.* 53:103-111, 2004) is described that can be used to analyze transgene integration patterns in transgenic mice. The technique was used to reveal that a transgenic mouse line (GM1-sy#116) harbored inverted and direct tandem repeats of both intact and partial pCAGGS-based transgenes in the G2 region of chromosome 1. This complicated concatenation of transgenes may have been caused by simple end-joining of DNA constructs fragmented by exposure to UV transillumination during gel-purification, and by nuclease digestion inside zygote pronuclei. The results suggest that care should be taken to avoid unwanted fragmentation during the preparation of vector constructs.

**Key words:** genomic walking, integration pattern, transgene

Simple and accurate genotyping methods, especially those designed to assess zygosity, are necessary for the efficient use and management of transgenic laboratory animals. In a previous report, we described a simple and efficient method for genetic mapping and zygosity analysis of transgenes [12]. Sequences flanking the transgenes are determined using genomic walking, which allows the transgene insertion sites in chromosomes to be located by searching a genome database. In addition, flanking primers can be designed to assess the zygosity of the transgene loci in transgenic animals using PCR [10]. Here, we report that the genomic walking

technique can be used to determine the transgene insertion pattern, as well as the flanking sequences, and we discuss the mechanism of transgene integration into chromosomes.

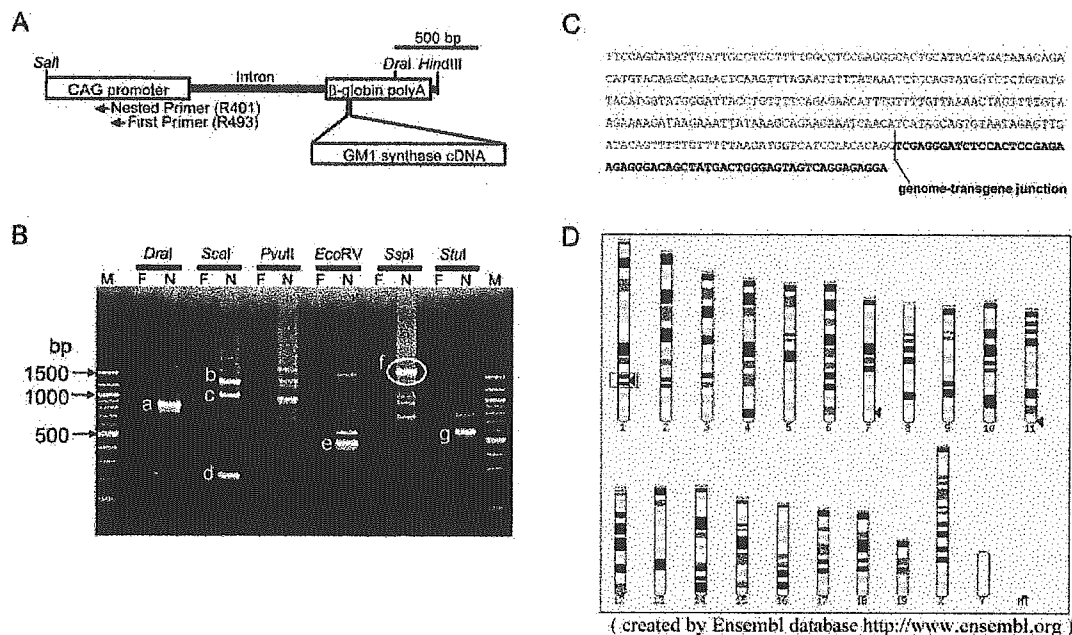
We used a transgenic mouse line, GM1-sy#116, with a C57BL/6JmsSlc background, which was produced in our laboratory by zygote microinjection of transgene constructs based on a pCAGGS plasmid [11]. The constructs (Fig. 1A) consisted of fragments generated from the *SalI-HindIII* site of plasmid pCAGGS, which contains a ganglioside GM1 synthase cDNA [5] cloned in our laboratory from C57BL/6J genomic DNA. All ani-

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(Received 4 July 2005 / Accepted 26 September 2005)

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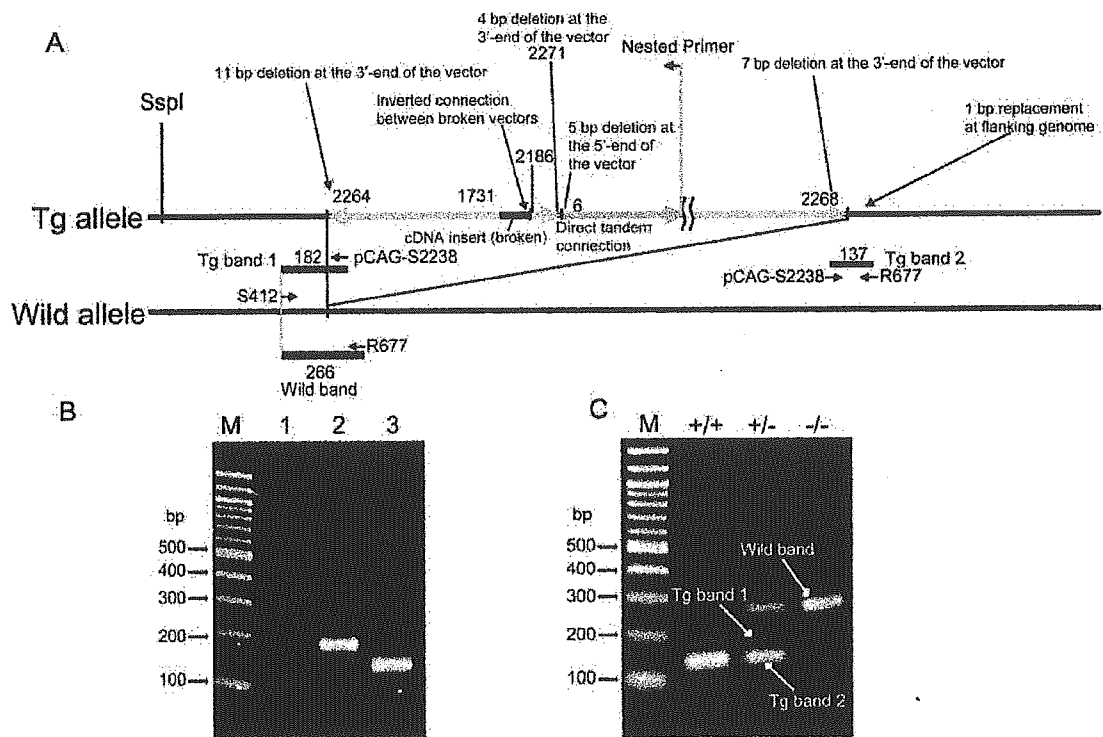
**Fig. 1.** Chromosomal mapping in the transgenic mouse line GM1sy#116. The integrated transgene construct contained GM1 synthase cDNA (A). The products of first (F) and nested (N) PCR amplifications using GM1sy#116 genomic libraries were separated by agarose gel electrophoresis (B). The sequence (C) flanking the transgene was determined using an approximately 1.5-kb band amplified from an *SspI* library (band f in B). Other bands (a-e and g) did not provide flanking sequence information. A search of the Ensembl genome database using the flanking sequence, under the condition *Expectation value* < 0.001, located the transgene to the G2 region of chromosome 1 (boxed in D). M, 100-bp DNA ladder.

mal experiments were performed according to the Guides for Animal Experiments Performed at the NIID.

The sequences around the transgenes were determined by genomic walking using the method described previously [12], but with different transgene-specific primers, R493 (CCG CCC CCA TCG CTG CAC AAA ATA AT) and R401 (GTG GGG CTC ACC TCG ACC CAT GGT AAT). Some of the PCR amplicons (bands a-g in Fig. 1B) were gel-purified and sequenced directly using a DYEnamic ET Terminator Cycle Sequencing Kit (Amersham Biosciences, Piscataway, NJ, USA) with a DNA sequencer (RISA384, Shimadzu Biotech, Kyoto, Japan). The transgene insertion sites in the chromosomes were determined by BLAST search in the Ensembl genome database [9] of the sequences flanking the transgene (Fig. 1C). Searches were conducted over the Internet (<http://www.ensembl.org>), and were based on the mouse genome assembly NCBI build m33 (Fig. 1D).

Sequences of both transgene-genomic junctions were confirmed by PCR analyses using the flanking primer

method. Two flanking primers, designated S412 (CAT GGT ATG GGA TTA CCT GTT TTC AGA) and R677 (CCC GGG CCC CAC ACT CAG AAC CTC TCT; Fig. 2A), were designed with the Primer3 program [15], using the flanking sequence around the transgene retrieved from the Ensembl database. A primer for the 3'-tail of the construct was also designed (pCAG-S2238; CCC TCT TCT CTT ATG AAG ATC CCT CGA CCT). PCR product formation was checked by PCR with tail DNA from transgenic mice and three combinations of primers (Fig. 2B): pCAG-S2238 only; pCAG-S2238 and S412; and pCAG-S2238 and R677. The zygosity of homozygous transgenic, hemizygous transgenic, and non-transgenic animals were determined by PCR of their tail DNA, the flanking primers, and pCAG-S2238 (Fig. 2C). Both PCR analyses were done under the following thermal conditions: 95°C for 15 min, followed by 30 cycles of 94°C for 5 s, 60°C for 5 s, and 72°C for 30 s. All PCR amplifications, including the genomic walking analysis, were conducted using a hot-start DNA



**Fig. 2.** Genomic configuration of GM1-sy#116, and the use of PCR to assess zygosity (A). The configuration of the transgene insert in the transgenic allele (Tg) and its corresponding wild-type allele (wild) are shown. One end of the insert was determined by genomic walking, and the other end by PCR with flanking primers. The directions of arrows over the inserts represent the 5'- to 3'-orientations of the vector constructs (arrowhead = 3'-end). Numbers along the inserts indicate the positions in pCAGGS. Approximately 10-bp deletions at each junction were detected, as shown in the figure. The positions of the three primers (S412, R677, and pCAG-S2238) used in a PCR experiment to determine zygosity, and the sizes of expected PCR products are also indicated. (B) Pre-evaluation of the PCR experiment. The primers were: lane 1, pCAG-S2238 only; lane 2, S412 and pCAG-S2238; lane 3, R677 and pCAG-S2238. M, 100-bp DNA ladder. (C) Determination of zygosity using PCR with the three primers, and genomic DNA from homozygous transgenic (+/+), hemizygous transgenic (+/-), and non-transgenic (-/-) mice. M, 100-bp DNA ladder.

polymerase (HotStarTaq; Qiagen, Hilden, Germany) in a Hybaid PCR Express Thermal Cycler (Thermo Hybaid, Ashford, Middlesex, UK). PCR products were separated by electrophoresis on a 2% agarose gel in Tris-acetate-EDTA buffer, and bands were detected by ethidium bromide staining and ultraviolet illumination (Figs. 1B, 2B and 2C).

Our method allowed the overall configuration of both ends of the transgene insert to be determined (Fig. 2A). One of the PCR bands (band f in Fig. 1B), which was approximately 1.5 kbp in length, contained about 500 bp of genome sequence flanking the transgene (Fig. 1C). A BLAST search of the sequence in the Ensembl database indicated that the transgene was inserted in the G2 region of chromosome 1 (Fig. 1D). The pres-

ence of an *SspI* restriction site in the genome sequence flanking the transgene was confirmed by the sequence around the transgene, which was retrieved from the database (data not shown). The full sequence of band f indicates the complicated insertion of constructs in the genome: one side of the genome faced the 3'-tail of a vector construct, and the construct was truncated at the middle of the inserted cDNA. Next to the truncated construct, direct repeats of the transgenes containing a short fragment of the 3'-tail of the construct were inversely concatenated and stretched at least to the position where the nested transgene-specific primer annealed. The structure of the other genome-transgene junction was revealed by PCR using three sets of flanking primers (Fig. 2B). No amplicons were produced by

PCR with pCAG-S2238 only (Fig. 2B-1), indicating the absence of tail-to-tail junction of transgenes as well as no formation of non-specific products by pCAG-S2238. The second set of primers (S412 and pCAG-S2238) confirmed one genome-transgene junction and showed a 182-bp band, as expected (Fig. 2B-2). The third set of primers (R677 and pCAG-S2238) showed a band of approximately 140 bp (Fig. 2B-3), which came from the other genome-transgene junctions. Direct sequencing confirmed that the band, which turned out to be 137 bp in length, was derived from the junction. Therefore, the 3'-tails of the transgenes were connected at both genome-transgene junctions. Although the full internal structure of the insert could not be identified by genomic walking, this is an example of irregular head-to-head type transgene-transgene junction, as described previously [12]. The zygosity was accurately determined using all three primers (Fig. 2C).

The mechanism of transgenesis is not fully understood, even though many kinds of transgenic animals have been produced (reviewed by e.g., [2]). Nevertheless, transgenesis seems to be accomplished in two steps: extrachromosomal concatenation of vector constructs, followed by integration into chromosomes [3]. Broad variation has been found at transgene-transgene and transgene-genome junctions in concatemers, such as deletions [7, 14], duplications [16], translocations of chromosomal DNA at the integration site [6, 13], and even insertions of sequences of unknown origin [16]. In our study, both types of junctions had approximately 10-base deletions, which may have been caused by so-called end-nibbling [14]. As Hamada *et al.* [7] discussed, the presence of nibbling at each junction suggests that linear concatemers were preferentially involved in the integration of the transgene into genomic DNA. Bishop [3] proposed a model in which concatemers are created by homologous recombination of circularly permuted linear molecules, which may explain the preferential formation of direct, rather than inverted, tandem repeats. In our case, however, it is more likely that concatemers of mixed orientation were formed by a simple random end-joining of DNA constructs, some of which had been fragmented before concatenation. While the fragmentation of DNA constructs can occur enzymatically inside zygote pronuclei, we suspect that the exposure to UV transillumination during gel-purification of our vector constructs was the

most probable cause, because it has been shown that even a short period of transillumination induces serious DNA damage and profoundly reduces transformation frequencies [8]. Our results suggest that care should be taken to avoid unwanted fragmentation during the preparation of vector constructs.

Our results indicate that Bishop's model should be re-evaluated using a wide collection of transgenic patterns because of discrepancies with the fit of this model. In addition to events at transgene integration, attention should be paid to the possible involvement of the effect of transgene integration patterns on embryonic viability and modifications that occur after transgene integration, which are not accounted for by Bishop's model. If concatemer orientation affects embryonic viability, an embryo with direct (head-to-tail) tandem repeats of the transgene may be more viable than an embryo with inverted (head-to-head, tail-to-tail) tandem repeats. It is possible that inverted repeats that are integrated into the embryonic chromosome may be removed by palindrome deletion mechanisms [1]; if so, genomes of non-transgenic organisms may have transgene remnants (small fragments). Although difficult ( $\leq 20\%$  of transformed embryos reach birth [4]), further analysis of transgenic organisms would test the validity of this hypothesis.

Our results demonstrate the usefulness of the genomic walking technique to determine both the structure of transgenes and their flanking sequences. Together with gene expression assays, this technique should provide a powerful tool for revealing relationships between insertion pattern and expression efficiency of transgenes.

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# Thymus-derived leukemia-lymphoma in mice transgenic for the Tax gene of human T-lymphotropic virus type I

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Adult T-cell leukemia-lymphoma (ATLL) is a group of T-cell malignancies caused by infection with human T-lymphotropic virus type I (HTLV-I). Although the pathogenesis of ATLL remains incompletely understood, the viral regulatory protein Tax is centrally involved in cellular transformation. Here we describe the generation of HTLV-I Tax transgenic mice using the Lck proximal promoter to restrict transgene expression to developing thymocytes. After prolonged latency periods, transgenic mice developed diffuse large-cell lymphomas and leukemia with clinical, pathological and immunological features characteristic of acute ATLL. Transgenic mice were functionally immunocompromised and they developed opportunistic infections. Fulminant disease also developed rapidly in SCID mice after engraftment of lymphomatous cells from transgenic mice. Flow cytometry showed that the cells were CD4<sup>-</sup> and CD8<sup>-</sup>, but CD44<sup>+</sup>, CD25<sup>+</sup> and cytoplasmic CD3<sup>+</sup>. This phenotype is indicative of a thymus-derived pre-T-cell phenotype, and disease development was associated with the constitutive activation of NF- $\kappa$ B. Our model accurately reproduces human disease and will provide a tool for analysis of the molecular events in transformation and for the development of new therapeutics.

HTLV-I infection is endemic in a number of well-defined geographical regions and it is estimated that as many as 20 million individuals are infected worldwide<sup>1</sup>. Although the vast majority of infected individuals remain clinically asymptomatic, some 2–5% will develop ATLL, which is a group of mature T-cell malignancies with distinct clinical presentations<sup>2</sup>. ATLL generally occurs in individuals infected around the time of birth and presents after prolonged latency periods ranging from 20 to 60 years. This is consistent with an age-dependent accumulation of leukemogenic events<sup>1</sup>. Transformed cells in ATLL are generally CD4<sup>+</sup> T lymphocytes<sup>2</sup>, although other, less common

phenotypes have been observed. These include CD4<sup>-</sup>CD8<sup>-</sup> (refs. 3–7), CD8<sup>+</sup> (ref. 8) and CD4<sup>+</sup>CD8<sup>+</sup> transformed cells<sup>9,10</sup>, which suggests that infection and transformation of distinct cell populations during thymic development is important in the pathogenesis of ATLL.

The distinct clinical subtypes of ATLL include the two indolent forms, smoldering and chronic, and the extremely aggressive forms, acute and lymphomatous<sup>2,11</sup>. Individuals with aggressive ATLL present with extensive lymphadenopathy, hepatosplenomegaly, visceral invasion and characteristic cutaneous infiltration by malignant cells. Acute ATLL is also characterized by an aggressive high-grade T-cell leukemia, with leukemic cells showing a characteristic morphology of abnormally enlarged and cleaved nuclei, which are termed 'flower cells.' In addition to being poorly responsive to treatment, individuals with ATLL are functionally immunocompromised and develop a range of opportunistic infections similar to those seen in individuals with AIDS, such as *Pneumocystis jirovecii* pneumonia<sup>2,11</sup>.

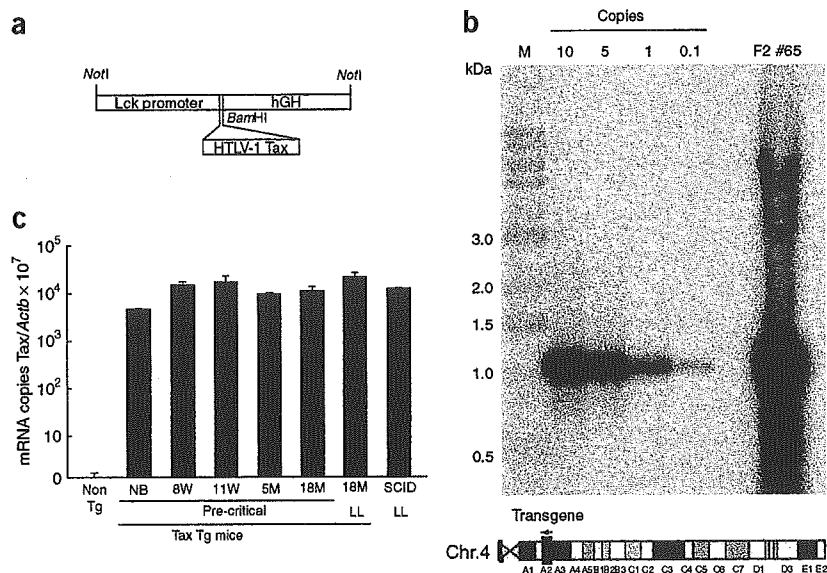
Although the pathogenesis of ATLL remains incompletely understood, the viral regulatory protein Tax seems to have a central role<sup>1,12,13</sup>. Tax, an extremely pleiotropic protein, has been shown to transform primary lymphocytes. This transformation is related to the ability of Tax to dysregulate the transcription of genes involved in cellular proliferation, cell-cycle control and apoptosis. Tax is a potent transcriptional transactivator not only of viral but also of cellular gene expression. The protein physically interacts with a number of cellular transcription factors, which include components of the NF- $\kappa$ B–Rel signaling complex, and persistent and constitutive activation of NF- $\kappa$ B is central to the development and maintenance of the malignant phenotype in ATLL<sup>12–14</sup>. Activation of NF- $\kappa$ B by Tax results in upregulation of the expression of a large number of cellular genes involved in cell proliferation, including a number of cytokines and their corresponding receptor genes<sup>1,12–15</sup> and this is believed to contribute to the autonomous expansion of infected and transformed cell populations.

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Received 11 August 2005; accepted 5 December 2005; published online 19 March 2006; doi:10.1038/nm1389



# TECHNICAL REPORTS



**Figure 1** Construction of the Tax transgene and Tax mRNA expression in transgenic mice. (a) Schematic representation of the Tax transgene. HTLV-1 Tax cDNA was inserted in the BamHI site of the p1017 vector at the 3' end of the Lck proximal promoter. (b) Estimation of integrated Tax copy number and mapping of the Tax integration site (transgenic mouse #65) by chromosomal walking analysis. Tax copy numbers were investigated by Southern blot analysis of BamHI-digested genomic DNA from the transgenic mouse (#65) in parallel with a serially diluted plasmid containing HTLV-1 Tax cDNA. (c) Expression of Tax mRNA in Tax transgenic mice and SCID mice. RT-PCR was carried out on mRNAs extracted from spleens of newborn mice (NB), transgenic mice (Tg) at 8 weeks (8w), 11 weeks (11w), 5 months (5m), 18 months (18m), all without disease; 18 months with leukemia-lymphoma (18m LL) and in SCID mice with fulminant disease (SCID LL).

Attempts to directly show the oncogenic potential of Tax *in vivo* have been for the most part restricted to studies on expression of Tax in transgenic mouse models. These studies have resulted in a wide range of phenotypes, which have included the development of arthropathies, exocrinopathies, mesenchymal tumors, neurofibromas and large granular lymphocytic leukemia, a malignancy of natural killer cells<sup>16–21</sup>. None of the models, however, has developed T-cell lymphoma or leukemia identical to ATLL. To address this discrepancy, we have generated transgenic mice with expression of Tax restricted to devel-

oping thymocytes, and we have shown that after prolonged latency periods these mice develop lymphoma and leukemia with the clinical, pathological and immunological features characteristic of human disease.

## RESULTS

### Lymphoma and leukemia in HTLV-1 Tax transgenic mice

We generated transgenic mice expressing Tax under the control of the Lck proximal promoter, which restricts expression to developing thymocytes<sup>22,23</sup> because infection and transformation of cells during thymic development seems to be important in the pathogenesis of the disorder (Fig. 1a). We obtained three founder mice for each of the three lineages (#53, #14 and #17) and although each of the lineages was cross-bred with transgene-negative littermates, offspring were obtained from only one founder (#53; Table 1). PCR and Southern blot analysis of all founders and the progeny mice confirmed that all progeny carried the transgene. We studied transgene copy numbers and integration sites in selected mice. This number ranged from 10 to >20 copies, and genome walking analysis showed that the transgenes were tandemly inserted and integrated in the A2 region at position 14783143 of chromosome 4, which is a non-coding region (Fig. 1b).

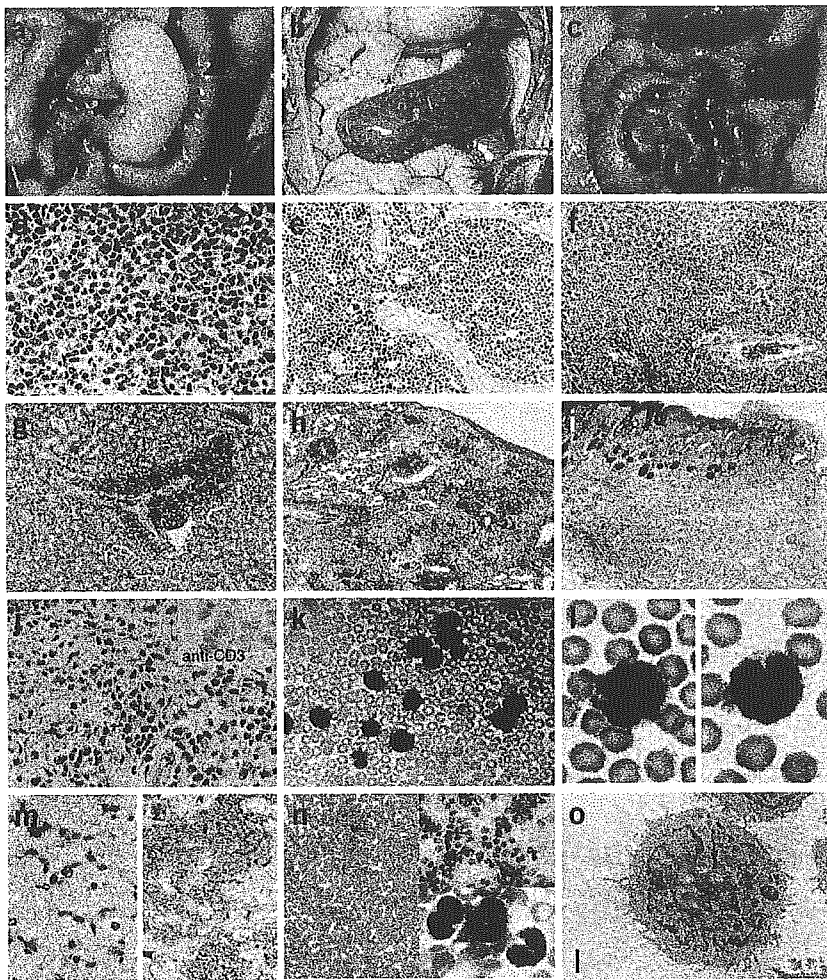
Gross pathological examination of Tax founder mice #14 and #17 killed at 23 months, and of all selected offspring from founder #53 ( $n = 9$ ) beginning at 10 months, showed the development of marked splenomegaly, hepatomegaly, lymphadenopathy and the presence of large mesenteric tumors (Fig. 2a,b and Table 1). Hepatosplenomegaly was characteristically a 5–20-fold increase in organ size (Fig. 2a–c). Lymphadenopathy

**Table 1** Establishment of HTLV-1 Tax transgenic mice

Founder	F1	F2	Gender	Killed (month)	Involvement	Leukemia
#53	#50	M	12	Liver, spleen, bone marrow	+	
		M	17	Liver, spleen, kidney, lymph nodes, lung, skin, bone marrow, thymus	+	
	#11	M	11	Early killing	–	
	#12	F	14 (dead)	Liver, spleen, kidney, lymph nodes, lung, skin	ND	
	#20	F	12 (dead)	Thymus <sup>a</sup>	ND	
	#22	F	10	Liver, spleen, kidney, lymph nodes, lung, skin, eyelid, meninges, bone marrow	+	
	#33	M	10	Early killing	–	
	#36	F	18	Liver, spleen, lymph nodes, lung, bone marrow, thymus	–	
	#44	F	19 (dead)	Liver, spleen, lymph nodes, lung	ND	
	#52	F	17	Early killing	–	
#65	M	8	Early killing	–		
#14		M	23	Liver, spleen, kidney, lymph nodes, lung, skin	+	
#17		F	23	Liver, spleen, kidney, lymph nodes, lung, skin	+	

Offspring were generated from one of three founder mice (#53). Three mice (#11, #52, #65) were killed before the development of disease (early death). One mouse (#20) unexpectedly died. The remaining mice were killed at the time points indicated. Gross lymphomatous involvement was as noted and all tissues were subjected to histological examination. Peripheral blood smears were examined for leukemic cells using Giemsa staining. M, male; F, female; ND, not determined.

<sup>a</sup>Thymus was exclusively examined; other organs were not examined.



**Figure 2** Pathological findings of T-cell lymphoma and leukemia in Tax transgenic mice. (a) Mesenteric tumor (black arrows) in the abdominal cavity of transgenic mouse #52. (b) Marked splenomegaly in transgenic mouse #22 with a greater than fivefold increase in size compared to an age-matched control littermate. (c) No tumors, lymphadenopathy or splenomegaly were evident in the control mice. Histological findings using H&E staining showed diffuse large-cell lymphoma in mesenteric lymph node (d), bone marrow with complete replacement of the marrow by lymphomatous cells (e), liver (f), kidney (g), lung (h) and lymphomatous infiltration of the skin with associated ulceration (i). (j) H&E staining and immunohistochemical staining with positive CD3-specific antibody staining (insert) of lymphomatous cells in the skin. (k,l) Peripheral blood smears from transgenic mouse #22. Leukemic cells with large and cleaved nuclei morphologically identical to flower cells found in human disease were present in peripheral blood smears of five mice. (m) H&E and Grocott staining of the lung showing opportunistic infection with *P. jiroveci*. (n) Peripheral blood smear with a large number of leukemia cells with segmented nuclei in a SCID mouse at 28 d after intraperitoneal injection of splenic lymphomatous cells from a transgenic mouse (lower magnification, left upper panel; higher magnification, left lower panel). Blood smear of a control age-matched SCID mouse is shown in the left panel. (o) Electron microscopic examination of leukemic cells from ascites fluid of SCID mice (original magnification,  $\times 6,000$ ). Cells showed enlarged cerebriform nuclei with disrupted chromatin and scanty cytoplasm typical of human ATLL cells. Scale bar, 500 nm.

was most often observed in the mesenteric, cervical and axillary lymph nodes but, in several cases, inguinal nodes were also involved. The mesenteric tumors ranged in size from 0.5 to 2.5 cm. All nine transgenic mice examined developed pathology beginning at 10 months of age, and findings were evenly distributed between males and females (Table 1). Histological examination showed diffuse, large-cell lymphomas involving spleen, lymph nodes, liver, thymus, bone marrow, kidney, lung, meninges and skin (Fig. 2 and Table 1). Specifically, perivascular infiltration of lymphomatous cells was readily observed in the liver, kidney and lungs (Fig. 2f-h) and in mice with liver involvement; it seems likely that the cells had spread from the mesentery to the liver through the portal vein (Fig. 2f). Four mice examined had bone marrow involvement (Fig. 2e) with complete replacement of the marrow by lymphomatous cells. We documented involvement of the meninges in one mouse, but there was no evidence of invasion of the central nervous system parenchyma. Five of seven mice had cutaneous involvement with gross ulceration of the skin, and histologically had prominent infiltration of leukemic cells into the dermis, which is characteristic of ATLL. Immunohistochemical staining indicated that these cells expressed CD3 but not B220, showing that they were T-cell lymphomas (Fig. 2j). Overall, the histopathological findings are identical to those observed in ATLL, and the cytological characteristics of the lymphomatous cells are consistent with an aggressive

malignancy and with the myriad of chromosomal abnormalities found in the disease<sup>13</sup>.

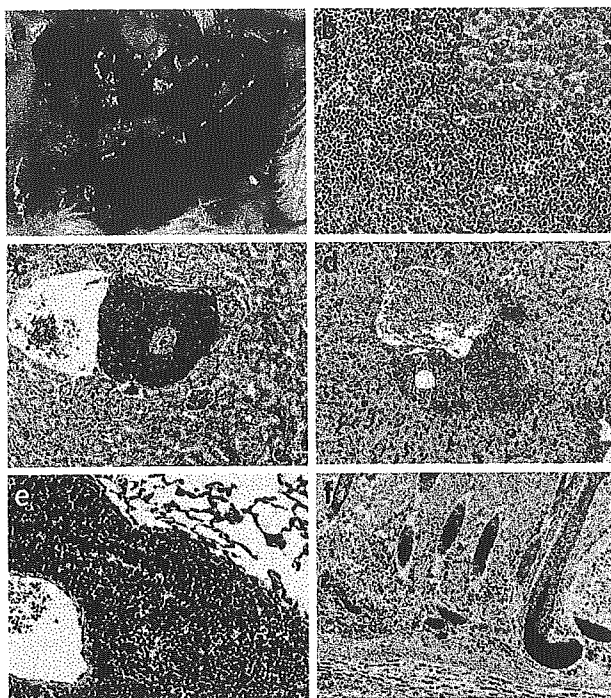
Giemsa staining of peripheral blood smears in five mice showed the presence of large and abnormal leukemic cells with cleaved nuclei, which were morphologically identical to the flower cells observed in ATLL (Fig. 2k,l).

We also examined age- and sex-matched transgene-negative littermates in parallel for each mouse. We did not detect lymphoma in any of the nontransgenic littermates; however, two littermates that died from unknown causes did not have any abnormal gross or microscopic pathology. Three mice were killed before the development of disease, but there was no evidence of leukemia or lymphoma (Table 1). In addition to the development of leukemia and lymphoma, we found that transgenic mice were clinically immunocompromised. Mice with disease, but not control mice housed under identical conditions, developed severe pulmonary infections with *P. jiroveci* (Fig. 2m), which is characteristic of human ATLL.

#### Transfer of leukemia and lymphoma to immunodeficient mice

To develop a more consistent and rapid model of disease development and to facilitate immunological analyses, we attempted to induce leukemia and lymphoma in mice with severe combined immunodeficiency (SCID) after intraperitoneal and intradermal injection of lymphomatous spleen cells from individual transgenic mice. After





**Figure 3** Gross and histological findings of lymphoma in SCID mice at 28 d after intradermal injection of lymphomatous cells from Tax transgenic mice. (a) Gross splenomegaly. Histological findings in spleen (b; insert, immunostaining showing positive staining for CD3-specific antibody), liver (c), kidney (d), lung (e) and skin (f). All organs showed extensive lymphomatous invasion.

activation marker CD69 was also found to be expressed at high levels on the lymphomatous cells (Fig. 4d).

**NF-κB activation in transgenic and SCID mice**

As it is well established that activation of NF-κB by Tax has a crucial role in transformation of cells by HTLV-I and in the maintenance of the malignant phenotype<sup>12–14</sup>, we examined activity of NF-κB using both electrophoretic mobility shift assays (EMSA) and enzyme-linked immunosorbent assays (ELISAs). EMSAs on nuclear extracts from transgenic splenic lymphoma cells showed marked NF-κB activity (Fig. 5) similar to that in an Epstein-Barr virus-transformed lymphoblastoid cell line used as a positive control. In contrast, no activity was evident in cells from normal mice (Fig. 5a). In addition, supershift assays (Fig. 5b) showed supershifted bands in the presence of antibodies for p50 and c-Rel, suggesting that formation of the p50-c-Rel complex is involved in the development and maintenance of the malignant phenotype (Fig. 5b). Evaluation of lymphomatous cells from SCID mice also confirmed activation of NF-κB. In contrast to the case of transgenic mice, this activation was found to involve only c-rel (Supplementary Fig. 1 online). We also examined SCID mice by ELISA for activation of CREB, which was shown to be absent (Supplementary Fig. 1 online).

**Expression of Tax in transgenic mice**

We used RT-PCR analysis of RNAs from splenic tissues to determine whether development of disease in both transgenic and SCID mice was associated with active expression of Tax (Fig. 1c). Although expression levels were low (10<sup>4</sup> less than expression of *Actb*, which encodes β-actin), Tax mRNA could be readily detected in newborn, asymptomatic, early-killed mice and in both transgenic and SCID mice with overt disease.

**DISCUSSION**

Here we showed that Tax expression alone in transgenic mice is sufficient to initiate the development of T-cell lymphoma and leukemia with clinical, pathological and immunological features similar or identical to those observed in ATLL. Specifically, the disorder in mice occurs after prolonged latency periods ranging from 10 to 23 months, which would be equivalent to the 20–60 years observed in human disease. The long time period before the onset of disease in the transgenic mouse model is also consistent with a multistep process of transformation. The clinical and pathological features of the disease were identical to those observed in the aggressive forms of ATLL, with widespread organ invasion by lymphomatous cells and the development of leukemia. Notably, the leukemia displayed the typical appearance of flower cells characteristic of ATLL, and these cells also had the expected morphological features when examined by electron microscopy.

ATLL has prominent cutaneous involvement, and this was reproduced in the transgenic model. Transgenic mice were also clinically immunocompromised and developed pulmonary infections with *P. jiroveci*, which is also characteristic of ATLL. The development of disease in transgenic mice and after transfer of disease to SCID mice was associated with activation of NF-κB, which is also found in ATLL.

direct transfer of cells from three transgenic mice, all SCID mice died within 28 d, having developed both an extremely aggressive leukemia with characteristic flower cells (Fig. 2m) and extensive lymphomatous involvement of the spleen, lymph nodes, bone marrow, liver, kidney and lung, which was identical to that observed in the original transgenic mice (Fig. 3). Notably, cutaneous involvement was only observed in those mice into which cells had been transferred by intradermal injection. Transmission electron microscopy of leukemic cells recovered from ascites fluid from SCID mice showed grossly enlarged and segmented cerebriform nuclei with markedly thin and scanty cytoplasm and a loss of polarity similar to that reported for ATLL and Sezary syndrome (Fig. 2o).

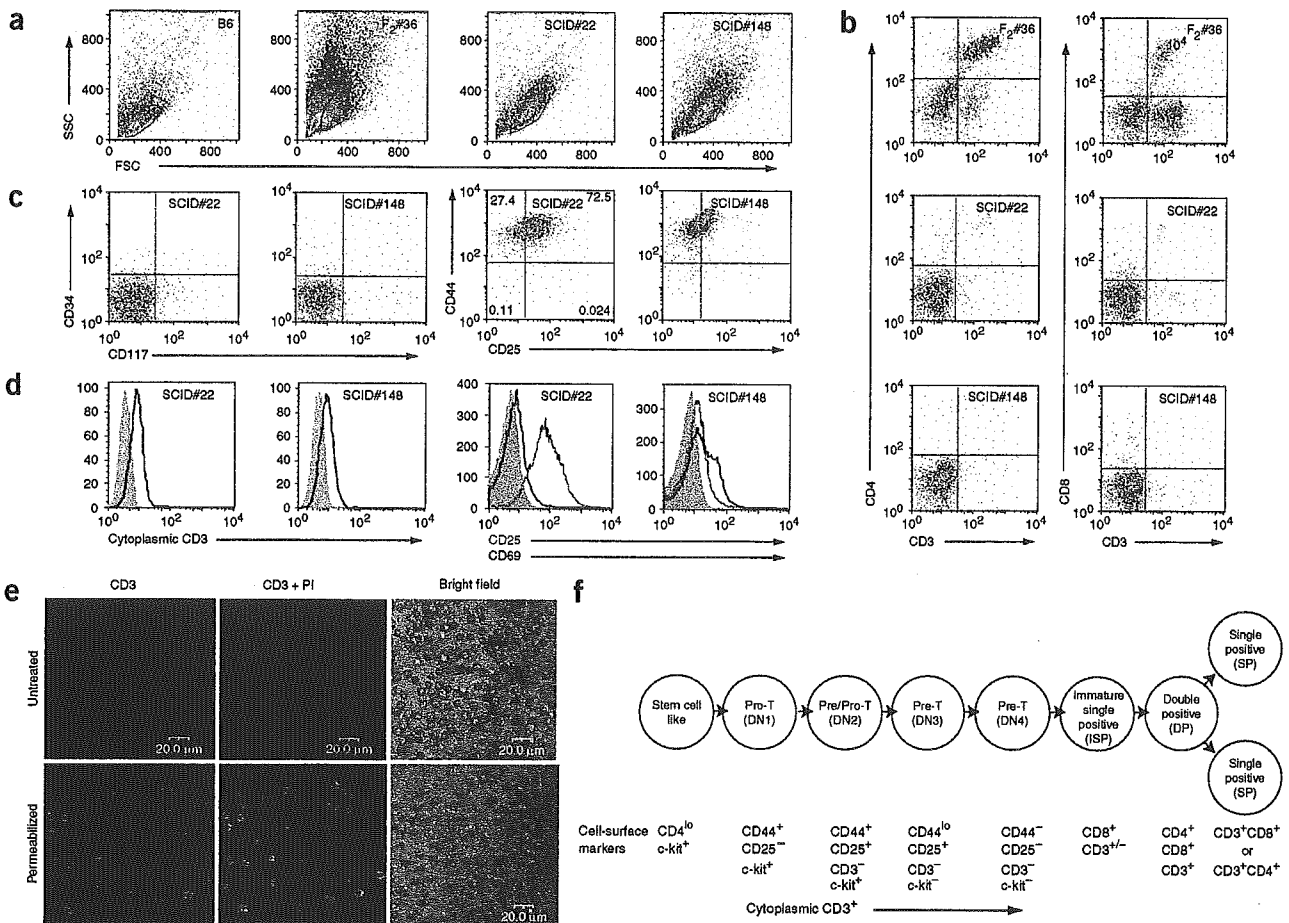
**Flow cytometry analysis**

We used flow cytometry to characterize the cell populations in both transgenic and SCID mice. Cells from transgenic spleens showed marked size heterogeneity with considerably higher forward scatter and side scatter compared to cells derived from spleens of control mice (Fig. 4a). Immunostaining of cells from SCID mice showed these were a distinct population and had a CD3<sup>+</sup>CD4<sup>+</sup>CD8<sup>+</sup>CD34<sup>+</sup>c-kit<sup>+</sup> phenotype (Fig. 4b,c). Staining for B-cell markers (B220) and macrophage markers (Mac 1) was negative (data not shown). Further analysis of SCID mice showed that the cells were CD44<sup>+</sup>CD25<sup>+</sup> (Fig. 4c) and positive for cytoplasmic but not surface CD3 in both flow cytometric and immunofluorescence studies (Fig. 4d,e), all of which is consistent with a pre-T-cell, double-negative phenotype (Fig. 4f). A characteristic feature of ATLL is overexpression of CD25 (also known as IL-2 receptor α) on the surface of the transformed cells, and it is believed that Tax-mediated upregulation of both interleukin (IL)-2 and the IL-2 receptor has a major role in the autonomous proliferation of the transformed cell populations<sup>14</sup>. We examined the expression of CD25 in splenic lymphoma cells, and although the expression levels varied between tumor cells from different mice, a marked increase in expression was always evident (Fig. 4d). In addition, the T-cell

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**Figure 4** Flow cytometry analysis of cell-surface and intracellular markers in lymphomatous cells. We analyzed spleen-cell suspensions from transgenic mice with leukemia-lymphoma (#36), littermate control mouse (B6) and two SCID mice (#22, #148) with overt disease. (a) Forward-scatter (FSC) and side-scatter (SSC) analysis. (b) Expression of cell-surface markers CD3, CD4 and CD8. (c) Expression of cell-surface markers CD34, CD117 (also known as c-kit), CD44 and CD25. (d) Expression of CD25, CD69 and cytoplasmic CD3. (e) Surface and cytoplasmic CD3 staining of lymphomatous cells from SCID mice (SCID #22) with fulminant disease. Immunofluorescence studies show an absence of CD3 surface staining (untreated) but consistent and uniform cytoplasmic staining in permeabilized cells. Staining of nuclei using propidium iodide (PI) is indicated. (f) Schematic representation of T-cell development and corresponding immunological markers in the mouse thymus.

In the transgenic mice, this involved both the p50 and c-rel components, whereas after transfer to SCID mice, only c-rel seemed to be involved. The reasons for this are unclear, but such differences have also been observed in individuals with ATLL<sup>24</sup>.

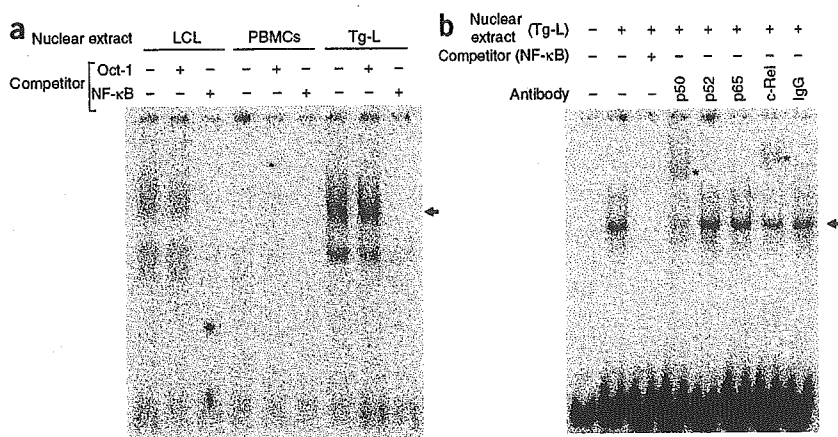
The malignant phenotype observed in the transgenic mice was a CD4<sup>+</sup>CD8<sup>-</sup> double negative. Flow cytometric analysis also showed that transformed cells were CD44<sup>+</sup> and c-kit<sup>-</sup>. Although surface staining for CD3 was negative, cytoplasmic CD3 staining was readily shown, and overall the cell markers were consistent with a thymic pre-T-cell phenotype<sup>25,26</sup>. The most common presenting phenotype in ATLL is CD4<sup>+</sup>; however, there have been numerous reports describing the CD4<sup>+</sup>CD8<sup>-</sup> phenotype in a considerable number of individuals with ATLL<sup>3-7</sup>. The different phenotypes observed in ATLL may well reflect the temporal relationships between infection with expression of Tax and the cell populations present at different stages of thymic development. It is likely that infection in most cases of human disease occurs after birth and much later than in our model. We are currently exploring the possibility of modifying the Lck promoters to allow control of Tax expression at different stages of thymic development to

assess whether this will result in different phenotypes. It seems highly probable that use of the Lck promoter, which restricts expression of the transgene to developing thymocytes, has been crucial to the success of our mouse model. As noted previously, ATLL occurs after vertical transmission and is specifically associated with a history of breastfeeding. In rat models, intravenous or intraperitoneal inoculation of HTLV-I-infected cell lines results in considerable humoral and cellular immune responses. In contrast, these are absent after oral inoculation, and this hyporesponsiveness seems to contribute to successful infection<sup>27</sup>. Thus, both oral tolerance and the tropism of the virus for infection of developing T lymphocytes seem to be two key factors in the development of ATLL.

One major difference between our model and human disease is expression of Tax. Expression of Tax is rarely detected in ATLL, and this circumstance is thought to result primarily from highly efficient Tax-specific cellular immune responses that can effectively eliminate Tax-expressing T lymphocytes. Such responses, however, would certainly not occur in either transgenic or SCID mice. It has also been suggested that the lack of Tax expression in ATLL may be the result of



## TECHNICAL REPORTS



**Figure 5** EMSAs showing activation of NF-κB in lymphomatous cells. (a) EMSAs of nuclear extracts from lymphomatous cells of transgenic mice and a positive control, the Epstein-Barr virus-transformed lymphoid cell line, and normal mouse PBMCs with a radiolabeled NF-κB binding oligonucleotide probe. Specific shifted bands of NF-κB binding proteins (arrow) were exclusively detected in nuclear extracts from lymphoblastoid cell line and transgenic mice with disease (Tg-L) in the presence of the competitor. (b) Supershift assay of nuclear extracts from Tg-L using antibodies against p50, p65, p52, and c-Rel. Normal IgG was used as control. Supershifted bands were detected in extracts with p50-specific and c-Rel-specific antibodies.

epigenetic changes that restrict viral gene expression, but it is presently unclear whether such changes might at some point develop in this transgenic mouse model.

The models of ATLL developed in both transgenic and SCID mice will now allow detailed investigation of the role of Tax and the identification of specific molecular events associated with transformation. Moreover, the rapid development of fulminant disease in SCID mice will uniquely facilitate the evaluation of a range of therapeutic interventions that may ultimately lead to more effective treatments of human disease.

### METHODS

Details are in **Supplementary Methods** online.

**Mice.** All mouse experimental protocols were approved by the Animal Care and Use Committee of the National Institute of Infectious Diseases, Tokyo, Japan, and by the Animal Research Ethics Committee of University College Dublin, Ireland. We purchased C57BL/6 mice from Charles River and the Oriental Yeast Company. We obtained SCID mice from Clea Japan.

**Plasmid construction and generation of transgenic mice.** We generated transgenic mice using inbred C57BL/6 mice and standard methods. We prepared the transgene construct (pLck-Tax) by subcloning the HTLV-I Tax coding sequence into the *Bam*HI site of p1017 (provided by R.M. Perlmutter, University of Washington). We amplified Tax cDNA by PCR from DNA extracted from infected peripheral blood mononuclear cells (PBMCs). The pLck-Tax plasmid was linearized by digestion with *Not*I (Boehringer Mannheim), resulting in a 6.3-kb fragment containing the transgene, and this was purified using a Qiaex gel extraction kit (Qiagen) before injection. All mice were housed under specific pathogen-free conditions. Mice were killed after anesthesia with chloroform by syringe cardiac exsanguination. For detection of the transgene, we performed Southern blotting on genomic DNA extracted from tail-tip biopsies.

**Chromosomal mapping of the inserted transgene.** We identified genomic sequences flanking the transgenes by genomic walking methods<sup>28</sup> using the Universal Genome Walker kit (BD Bioscience Clontech) according to the manufacturer's instructions. Briefly, we constructed adaptor-ligated genomic

DNA libraries of the transgenic mice using tail-tip DNA digested with four restriction enzymes: *Dra*I, *Pvu*II, *Eco*RV and *Stu*I; the genomic walk consisted of two PCR amplifications. We determined nucleotide sequences of PCR products by direct sequencing and identified specific chromosomal transgene insertion sites using BLAST searches of the flanking sequences in the Ensembl genome database.

**Histopathological examination and immunohistochemistry.** We directly fixed tissues in neutral-buffered formalin (Sigma), embedded them in paraffin, and sectioned and stained them with H&E. We stained additional sections with Grocott staining for detection of *P. jiroveci* cysts. We stained skin sections with CD3-specific antibody (Santa Cruz Biotechnology). We prepared peripheral blood smears using Giemsa staining and examined them with light microscopy.

**Flow cytometry.** We performed flow cytometry with a FACSCalibur (BD Bioscience Clontech) using standard methods. Briefly, we prepared single-cell suspensions from spleen in PBS containing 2% FCS and 0.05% sodium azide. For detection of surface antigens, we washed cells and stained them with saturating amounts of antibodies conjugated with FITC, PE or APC in the presence of blocking antibody 2.4G2 (FcR-specific) monoclonal antibody for 20 min on ice. For analysis of live cells, we added propidium iodide at a final concentration of 5 μg/ml. For detection of intracellular CD3, we stained cells with ethidium monoazide bromide (5 μg/ml), fixed them with 4% formaldehyde in PBS and incubated them in permeabilization buffer containing 0.5% saponin. We incubated cells with FITC-conjugated CD3-specific antibody or control monoclonal antibody (rat IgG2b). We carried out analysis using the Cell Quest program and reanalyzed data using FlowJo software (Tree Star) by gating live cells. Specific monoclonal antibodies used are detailed in **Supplementary Methods** online.

**Immunofluorescence studies of surface and cytoplasmic CD3 staining.** We collected cells ( $10^6$ ) directly from spleen tissues from SCID mice, and washed and incubated them with CD3-specific antibody. Thereafter, we incubated samples with Alexa 488R-conjugated goat rabbit-specific IgG and then stained with propidium iodide (1 μg/ml). We permeabilized cells before incubation with primary antibody and detected immunofluorescent signals using a confocal microscope (IX70, Olympus).

**EMSAs.** We prepared nuclear extracts from  $1-10 \times 10^6$  of lymphomatous cells from spleens of transgenic mice, an Epstein-Barr virus-transformed lymphoblastoid cell line, and PBMCs from control mice as previously described<sup>29</sup>. We performed an EMSA with the Gel Shift Assay Systems kit (Promega) according to the manufacturer's protocol. We separated samples by electrophoresis on 4% polyacrylamide gels in 0.25% Tris-boric acid-EDTA, and dried and analyzed them using a BAS 2000 image analyzer (Fujifilm).

**Real-time quantitative PCR.** We used real-time PCR (RT-PCR) to quantify expression of Tax mRNA in transgenic and SCID mice. We harvested spleens at birth and at 8 weeks, 11 weeks, 5 months, 18 months in transgenic mice without disease, and at 18 months in mice with leukemia-lymphoma, from control littermates and from SCID mice after intraperitoneal transfer of lymphomatous cells. We measured levels of Tax mRNA by RT-PCR after reverse transcription using the ABI PRISM 7900 sequence detection system (Applied Biosystems) with a QuantiTect Probe PCR kit (Qiagen).

**Transfer of leukemia and lymphoma to SCID mice.** We harvested spleen cells from transgenic mice and directly suspended them in RPMI medium. We directly injected cells ( $10^6$ ) intraperitoneally or intradermally into SCID mice

from three individual transgenic animals. At 28 d, when mice were clearly ill, we carried out pathological and immunological studies as above.

**Electron microscopy.** We collected cells from ascites of SCID mice and fixed them in 2.5% glutaraldehyde and 2% paraformaldehyde, postfixed them in 1% osmium tetroxide, dehydrated them and embedded them in epoxy resin. We stained ultrathin, 80-nm sections with uranyl and lead acetate and examined them with a JEM-1220 electron microscope (Jeol Datum) at 80 kV.

**URL.** Ensembl, <http://www.ensembl.org>

*Note: Supplementary information is available on the Nature Medicine website.*

**ACKNOWLEDGMENTS**

We thank Y. Sato and E. Tao for their technical assistance. We also thank O. Suzuki, T. Suzuki, M. Moriyama, K. Iwabuchi and Y. Misaki for advice. Y.O. is a Research Fellow of the Japanese Society for the Promotion of Science. These studies were supported by the Japanese Foundation for AIDS Prevention, Core Research for Evolutional Science and Technology (CREST), Ministry of Education and Culture, Japan and the National Virus Reference Laboratory, University College Dublin, Ireland.

**COMPETING INTERESTS STATEMENT**

The authors declare that they have no competing financial interests.

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## Sensitivity to chilling of medaka (*Oryzias latipes*) embryos at various developmental stages

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Received 15 July 2004

### Abstract

As an essential step toward cryopreservation of fish embryos, we examined the chilling sensitivity of medaka (*Oryzias latipes*) embryos at various developmental stages. Embryos at the 2–4 cell, 8–16 cell, morula, blastula, and early gastrula stages were suspended in Hanks solution. They were chilled to various temperatures (usually 0 °C), kept for various periods (usually 20 min), then cultured for up to 14 d to determine survival (assessed by the ability to hatch). Embryos at the 2–4 cell stage were the most sensitive to chilling to 0 °C, but sensitivity decreased as development proceeded. The survival rate of 2–4 cell embryos was affected after 2 min of chilling at 0 °C; although the rate decreased gradually as the duration of chilling increased, 38% of them still survived after 40 min of chilling. Embryos at the 2–4 cell stage were sensitive to chilling at 0 or –5 °C, but much less sensitive at 5 or 10 °C. The survival rate of 2–4 cell embryos subjected to repeated rapid cooling and warming was similar to that of those kept chilled. When early gastrula embryos were preserved at 0 or 5 °C, the hatching rate did not decrease after 12 and 24 h of chilling, respectively, but then decreased gradually as storage was prolonged; however, 3–10% of the embryos hatched even after storage for 10 d. In conclusion, although later-stage medaka embryos would be suitable for cryopreservation (from the perspective of chilling sensitivity), chilling injury may not be serious in earlier stage embryos.

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**Keywords:** Medaka; Embryo; Chilling injury; Refrigeration; Developmental stage

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