

the polyprotein into 16 subunits[40-42]. PL2PRO is responsible for cleavage of ORF1a and 1b in N-terminal region and 3CLPRO is responsible for cleavage in C-terminal region. RNA-dependent RNA polymerase (RdRp) and helicase are products of proteolytic cleavage and essential components of the replicase complex which may contain other viral and cellular proteins.

5' and 3' UTR

In addition to the genomic RNA, subgenomic mRNAs are transcribed by the replicase complex. The genomic and subgenomic RNAs of coronaviruses include an identical 5' leader sequence and common 3'-ends. Recent evidence indicates that transcription-regulating sequences (TRSs) at the 5'-end of each gene represent signals which regulate the discontinuous transcription of subgenomic mRNAs [43, 44]. The leader sequence and the TRSs play important roles in the gene expression of coronavirus.

Applications of RNAi for SARS-CoV

Target sequence

RNAi has been widely used in studies of human diseases including cancers and infectious diseases. RNAi is an ideal tool to inhibit replication of viruses because siRNA can interact with specific viral RNA and silence its expression. To date, many researchers have shown that siRNAs could inhibit replication of SARS-CoV in cultured cells [45-58] (Table 2). The target sequences for silencing SARS-CoV were selected from the regions of 5'UTR, leader sequence, replicase(nsp1, nsp2, nsp3, nsp4, nsp6, RNA-dependent RNA polymerase, helicase, nsp14, and nsp16), spike, ORF3, envelope, matrix, ORF7, nucleocapsid, and 3'UTR as shown in table 2 and 3. A total of 116 siRNAs were tested and 23 siRNAs (19.8%) exhibited more than 80% reduction(Table 3). The target sites of these highly potent siRNAs were limited to following regions: leader sequence, nsp1, nsp2, nsp3, RNA-dependent RNA polymerase, helicase, nsp16 and spike.

We designed anti-SARS-CoV replicase siRNA with chemical modification(stealth siRNA, Invitrogen) and investigated the effect of siRNA on SARS-CoV replication. The targets of siSARS-1, -2, -3, -4, -5, and -6 were nsp 1, nsp 3, nsp3, 3CL proteinase, nsp 8, and nsp 14 respectively(Table 4). Vero E6 cells were transfected with siRNA duplexes 6 h before infection and infected with SARS-CoV (FFM-1 strain) at the M.O.I. of 0.01. Culture supernatants were collected 24 h after infection to purify SARS-CoV RNA. Collected RNA samples were subjected to real time RT-PCR for quantification of SARS-CoV RNA.

The results of quantitative RT-PCR showed that all of these siRNA duplexes could inhibit SARS-CoV replication in Vero E6 cells. The siSARS-3, -5, and -6 showed higher reduction activity (63%, 77%, and 69 % reduction

respectively), while the others (siSARS-1, -2, and -4) exhibited lower activity (50%, 48%, and 42% reduction respectively)(Fig. 3). Target sites of siRNAs with higher activity were nsp3, nsp8, and nsp14. Not all of siRNAs targeting the replicase gene exerted strong inhibition on viral replication, but we could identify some effective siRNAs for inhibition of SARS-CoV.

Table 2. Description of siRNA duplexes tested in the published reports.

| siRNA sequence | Number | Start | End | Reference | Effectiveness(1-5)* | T arg et | Material | Validation |
|------------------------|--------|-------|-------|-----------|---------------------|-----------------|----------------|--|
| agccaaccaactcgatct | 19 | 28 | 46 | 55 | 1 | 5'UTR | RNA | SARS-CoV infection |
| gccaaccaactcgatct | 19 | 29 | 47 | 45 | 5 | Leader sequence | Plasmid vector | SARS-CoV infection |
| alctgtctctaaacgaac | 19 | 54 | 72 | 55 | 1 | 5'UTR | RNA | SARS-CoV infection |
| gttctctaaacgaactta | 19 | 58 | 76 | 51 | 1 | 5'UTR | Plasmid vector | SARS-CoV infection |
| aacgagtaactgccccttt | 21 | 161 | 181 | 46 | <4 | 5'UTR | RNA | SARS-CoV infection |
| gatggagagcctgttctt | 19 | 264 | 282 | 56 | 5 | Nsp1 | Plasmid vector | SARS-CoV infection |
| cagccctatglttcatla | 19 | 460 | 478 | 56 | 5 | Nsp1 | Plasmid vector | SARS-CoV infection |
| aatlgcatalaccgcaatg | 21 | 609 | 629 | 46 | <4 | Nsp1 | RNA | SARS-CoV infection |
| gtgaactcactcgtagct | 19 | 776 | 794 | 57 | 3 | Nsp1 | RNA | SARS-CoV infection |
| ctcactcgtagctcaatg | 19 | 781 | 799 | 56 | 5 | Nsp1 | Plasmid vector | SARS-CoV infection |
| gtaccctctgattgcatc | 19 | 849 | 867 | 57 | 4 | Nsp2 | RNA | SARS-CoV infection |
| gagtcgaagagagggtct | 19 | 931 | 949 | 57 | 5 | Nsp2 | RNA | SARS-CoV infection |
| gcactgtctacctgatg | 19 | 1209 | 1227 | 57 | 5 | Nsp2 | RNA | SARS-CoV infection |
| aacctlggagaagatactg | 21 | 2736 | 2756 | 46 | <4 | Nsp3 | RNA | SARS-CoV infection |
| aatcacaatltagctgtaga | 21 | 2787 | 2807 | 46 | <4 | Nsp3 | RNA | SARS-CoV infection |
| ccctcagatgaggagaag | 19 | 3043 | 3061 | 57 | 3 | Nsp3 | RNA | SARS-CoV infection |
| aacctacacctgaagaaccg | 21 | 3251 | 3271 | 46 | <4 | Nsp3 | RNA | SARS-CoV infection |
| aaggalgtcgtggtatcac | 21 | 4187 | 4207 | 46 | <4 | Nsp3 | RNA | SARS-CoV infection |
| gggtttccattccatg | 19 | 5539 | 5557 | 57 | 5 | Nsp3 | RNA | SARS-CoV infection |
| aaaggaccagtagctgatt | 21 | 5773 | 5793 | 46 | <4 | Nsp3 | RNA | SARS-CoV infection |
| aaagggtgtgtgataccgatg | 21 | 8111 | 8131 | 46 | <4 | Nsp3 | RNA | SARS-CoV infection |
| atlgcagtagcagacactg | 19 | 9771 | 9789 | 51 | 1 | Nsp4 | Plasmid vector | SARS-CoV infection |
| aagcacgcatctctgtctg | 21 | 11089 | 11109 | 46 | <4 | Nsp6 | RNA | SARS-CoV infection |
| caatltagaggagtagg | 19 | 12714 | 12732 | 51 | 1 | Nsp9 | Plasmid vector | SARS-CoV infection |
| aaaggtaggaaggcaatta | 21 | 13545 | 13565 | 46 | 5 | RdRp | RNA | SARS-CoV infection |
| ggatgaggaaggcaatta | 19 | 13547 | 13565 | 50 | 5 | RdRp | RNA | SARS-CoV infection |
| ggatgaggaaggcaatta | 19 | 13547 | 13565 | 54 | 3 | RdRp | RNA | Transfection of target-encoding plasmids |
| aagagacatlttalaacttgg | 21 | 13618 | 13638 | 46 | <4 | RdRp | RNA | SARS-CoV infection |
| ctggtagcttctggtag | 19 | 14015 | 14033 | 54 | 1 | RdRp | RNA | Transfection of target-encoding plasmids |
| cttatacagctcgcctc | 19 | 14450 | 14468 | 51 | 5 | RdRp | Plasmid vector | SARS-CoV infection |
| actgtcaaacocgglaatt | 19 | 14595 | 14613 | 54 | 1 | RdRp | RNA | Transfection of target-encoding plasmids |
| aacctcatttagctgtagg | 21 | 14773 | 14793 | 46 | <4 | RdRp | RNA | SARS-CoV infection |
| gaatltaggcagcaggctg | 19 | 15877 | 15895 | 51 | 5 | RdRp | Plasmid vector | SARS-CoV infection |
| aaggtagctatgtagctg | 21 | 16771 | 16791 | 46 | <4 | NTPase/HEL | RNA | SARS-CoV infection |
| aaggtagctatgtagctg | 21 | 17559 | 17579 | 46 | 5 | NTPase/HEL | RNA | SARS-CoV infection |
| atctaggattgacctcagc | 19 | 17739 | 17757 | 48 | 5 | NTPase/HEL | Plasmid vector | SARS-CoV infection |
| latgaclatgcatatcca | 19 | 17787 | 17805 | 48 | <4 | NTPase/HEL | Plasmid vector | SARS-CoV infection |
| gtcaaccgctccaatg | 19 | 17837 | 17855 | 48 | <4 | NTPase/HEL | Plasmid vector | SARS-CoV infection |
| gtcgtatgagatcttca | 19 | 17893 | 17911 | 48 | <4 | NTPase/HEL | Plasmid vector | SARS-CoV infection |
| aggacatgacctaccgtag | 19 | 18109 | 18127 | 48 | <4 | Nsp14 | Plasmid vector | SARS-CoV infection |
| aacctacctccagclagga | 21 | 18279 | 18299 | 46 | <4 | Nsp14 | RNA | SARS-CoV infection |
| aacctacctccagclagga | 21 | 20858 | 20878 | 46 | 5 | Nsp16 | RNA | SARS-CoV infection |
| aagctcctaataacacacac | 21 | 21568 | 21588 | 46 | 5 | Spike | RNA | SARS-CoV infection |
| gctcctaataacacacac | 19 | 21570 | 21588 | 50 | 5 | Spike | RNA | SARS-CoV infection |
| aatgttacagggttcaatct | 21 | 21684 | 21704 | 46 | <4 | Spike | RNA | SARS-CoV infection |
| gtttgtatacagcagctg | 19 | 21857 | 21875 | 55 | 1 | Spike | RNA | SARS-CoV infection |
| aacctctcttctgtcttct | 21 | 21894 | 21914 | 53 | 5 | Spike | RNA | Transfection of target-encoding plasmids |
| aaaggctatcaacctatagat | 21 | 22083 | 22103 | 46 | <4 | Spike | RNA | SARS-CoV infection |
| gggtctcaacctatagat | 19 | 22085 | 22103 | 55 | 5 | Spike | RNA | SARS-CoV infection |
| aatcacagatgctgtgattg | 21 | 22304 | 22324 | 46 | <4 | Spike | RNA | SARS-CoV infection |
| aagagcttgagattgacaaa | 21 | 22362 | 22382 | 53 | 5 | Spike | RNA | Transfection of target-encoding plasmids |
| gagacalataatgtgcc | 19 | 22849 | 22867 | 52 | 5 | Spike | Plasmid vector | Transfection of target-encoding plasmids |
| aaccttacagattgtaglac | 21 | 22966 | 22986 | 46 | <4 | Spike | RNA | SARS-CoV infection |
| aagatgtaactgcacatg | 21 | 23287 | 23307 | 46 | <4 | Spike | RNA | SARS-CoV infection |
| caaggcattagctcaaat | 19 | 24221 | 24239 | 55 | 5 | Spike | RNA | SARS-CoV infection |
| gggtaccaccattatgctc | 19 | 24572 | 24590 | 52 | 5 | Spike | Plasmid vector | Transfection of target-encoding plasmids |
| aagagctggacaagctactca | 21 | 24886 | 24906 | 46 | <4 | Spike | RNA | SARS-CoV infection |
| aaglacgttcatgctacagc | 21 | 25345 | 25365 | 46 | <4 | ORF3a | RNA | SARS-CoV infection |
| aalgcatacagcatgtagaa | 21 | 25614 | 25634 | 46 | <4 | ORF3a | RNA | SARS-CoV infection |
| aatattatgagatgttgct | 21 | 25633 | 25653 | 46 | <4 | ORF3a | RNA | SARS-CoV infection |
| aaggtagcagcattcaacac | 21 | 25779 | 25799 | 46 | <4 | ORF3a | RNA | SARS-CoV infection |
| aaatactacagacactggta | 21 | 25920 | 25940 | 46 | <4 | ORF3a | RNA | SARS-CoV infection |
| aaaalgctacattctcatct | 21 | 25944 | 25964 | 46 | <4 | ORF3a | RNA | SARS-CoV infection |
| aatlacacacaaatcgaggctc | 21 | 25999 | 26019 | 46 | <4 | ORF3a | RNA | SARS-CoV infection |
| aagaacaagtagctlaalag | 21 | 26136 | 26156 | 46 | <4 | ORF3b/E | RNA | SARS-CoV infection |
| taaatagtaalagcgtact | 21 | 26150 | 26170 | 47 | 2 | ORF3b/E | RNA | Transfection of target-encoding plasmids |
| aatagtaalagcgtactct | 21 | 26152 | 26172 | 46 | <4 | ORF3b/E | RNA | SARS-CoV infection |
| ctcgtggtatctctgtagtc | 21 | 26183 | 26203 | 47 | 2 | E | RNA | Transfection of target-encoding plasmids |
| ctcgtggtatctctgtagtc | 21 | 26226 | 26246 | 47 | 2 | E | RNA | Transfection of target-encoding plasmids |
| gtgctgactgctgcaatalt | 21 | 26234 | 26254 | 46 | <4 | E | RNA | SARS-CoV infection |
| aacggtttacgtctactcgcg | 21 | 26278 | 26298 | 47 | 3 | E | RNA | Transfection of target-encoding plasmids |
| tgaaggattctgatctctct | 21 | 26320 | 26340 | 47 | 4 | E | RNA | Transfection of target-encoding plasmids |
| aaggagttctgatctctctg | 21 | 26322 | 26342 | 46 | <4 | E | RNA | SARS-CoV infection |
| agctlaacaactcctggaac | 21 | 26429 | 26449 | 47 | 4 | M | RNA | Transfection of target-encoding plasmids |
| aacctglaalaggtttccta | 21 | 26455 | 26475 | 46 | <4 | M | RNA | SARS-CoV infection |
| gtcgtgctlacagaaitaa | 21 | 26595 | 26615 | 47 | 2 | M | RNA | Transfection of target-encoding plasmids |
| aalggctgtattgtaggct | 21 | 26643 | 26663 | 46 | <4 | M | RNA | SARS-CoV infection |
| taattaggctgtatgtaggct | 21 | 26652 | 26672 | 47 | 3 | M | RNA | Transfection of target-encoding plasmids |

Table 2. Continued

| | | | | | | | | |
|------------------------|----|-------|-------|----|----|-------|----------------|--|
| tagctactctgtgcttcct | 21 | 26673 | 26693 | 47 | 3 | M | RNA | Transfection of target-encoding plasmids |
| aatgtgaccagaccgctcat | 21 | 26775 | 26795 | 48 | <4 | M | RNA | SARS-CoV infection |
| ccagaccgctcatggaaagtg | 21 | 26783 | 26803 | 47 | 2 | M | RNA | Transfection of target-encoding plasmids |
| ttgcgaatggccggacactcc | 21 | 26839 | 26859 | 47 | 2 | M | RNA | Transfection of target-encoding plasmids |
| aagagatcactlgggctacat | 21 | 26891 | 26911 | 46 | <4 | M | RNA | SARS-CoV infection |
| agagatcactlgggctacatc | 21 | 26892 | 26912 | 47 | 3 | M | RNA | Transfection of target-encoding plasmids |
| cgctgcagcgtgtaggcactg | 21 | 26942 | 26962 | 47 | 3 | M | RNA | Transfection of target-encoding plasmids |
| ttctgcalacaaccgctacc | 21 | 26972 | 26992 | 47 | 4 | M | RNA | SARS-CoV infection |
| aaccgctaccglatggaaac | 21 | 26983 | 27003 | 46 | <4 | M | RNA | Transfection of target-encoding plasmids |
| aaactataaataaatacaga | 21 | 27000 | 27020 | 47 | 2 | M | RNA | SARS-CoV infection |
| aaacttgccatcaggaaacat | 21 | 27370 | 27390 | 46 | <4 | ORF7a | RNA | SARS-CoV infection |
| aaactgcaactgacacacact | 21 | 27440 | 27460 | 46 | <4 | ORF7a | RNA | SARS-CoV infection |
| aagagctactctgcccacttt | 21 | 27556 | 27576 | 46 | <4 | ORF7a | RNA | SARS-CoV infection |
| gtclaaacgaacalgaaac | 19 | 27767 | 27785 | 51 | 1 | ORF7b | Plasmid vector | SARS-CoV infection |
| galaatggcccacaacaac | 21 | 28126 | 28146 | 47 | 4 | N | RNA | Transfection of target-encoding plasmids |
| gtggaccacagatccaac | 19 | 28175 | 28193 | 49 | 3 | N | Plasmid vector | Transfection of target-encoding plasmids |
| aactgacaataaccagaatgg | 21 | 28191 | 28211 | 46 | <4 | N | RNA | SARS-CoV infection |
| aaggccaaaacagcgcgacc | 21 | 28227 | 28247 | 47 | 2 | N | RNA | Transfection of target-encoding plasmids |
| aataatactcgtctgggtc | 21 | 28261 | 28281 | 47 | 3 | N | RNA | Transfection of target-encoding plasmids |
| aaggaggaaacttagatccct | 21 | 28303 | 28323 | 47 | 3 | N | RNA | Transfection of target-encoding plasmids |
| ggaggaaacttagatccct | 19 | 28305 | 28323 | 58 | 4 | N | Plasmid vector | Transfection of target-encoding plasmids |
| aaattggctactaccgaagag | 21 | 28370 | 28390 | 46 | <4 | N | RNA | SARS-CoV infection |
| aagagctaccgacgagttcg | 21 | 28386 | 28406 | 47 | 1 | N | RNA | Transfection of target-encoding plasmids |
| aacaaagaaggcactcgtatgg | 21 | 28498 | 28518 | 47 | 2 | N | RNA | Transfection of target-encoding plasmids |
| ggcatcgtatgggtgcaact | 21 | 28507 | 28527 | 58 | 5 | N | Plasmid vector | Transfection of target-encoding plasmids |
| aatacaccacaagaccacatt | 21 | 28540 | 28560 | 47 | 2 | N | RNA | Transfection of target-encoding plasmids |
| aatcclataacaatgctgcc | 21 | 28570 | 28590 | 47 | 3 | N | RNA | Transfection of target-encoding plasmids |
| tcaggaaacaacatgccaaa | 21 | 28608 | 28628 | 47 | 3 | N | RNA | Transfection of target-encoding plasmids |
| gaaatcaactcctggcag | 19 | 28706 | 28724 | 58 | 3 | N | Plasmid vector | Transfection of target-encoding plasmids |
| eaccagcttgagagcaaaatt | 21 | 28804 | 28824 | 46 | <4 | N | RNA | SARS-CoV infection |
| tgaggcatclaaaagccctcg | 21 | 28878 | 28898 | 47 | 2 | N | RNA | Transfection of target-encoding plasmids |
| aacgtactgccaaaacacat | 21 | 28904 | 28924 | 47 | 2 | N | RNA | Transfection of target-encoding plasmids |
| aacagtacaacgctactcaag | 21 | 28919 | 28939 | 46 | <4 | N | RNA | SARS-CoV infection |
| gtcactcaacgacttgggaga | 21 | 28930 | 28950 | 58 | 3 | N | Plasmid vector | Transfection of target-encoding plasmids |
| aagcacatgacgcalacaaa | 21 | 29185 | 29205 | 46 | <4 | N | RNA | SARS-CoV infection |
| aagactgatgaagctcagcct | 21 | 29245 | 29265 | 46 | <4 | N | RNA | SARS-CoV infection |
| ttcgaattcgtttacg | 19 | 29432 | 29450 | 55 | 1 | 3'UTR | RNA | SARS-CoV infection |
| cgtaactaacagcacaag | 19 | 29484 | 29502 | 55 | 3 | 3'UTR | RNA | SARS-CoV infection |

* Effectiveness 1 : 0-20% reduction, 2 : 20-40% reduction, 3 : 40-60% reduction, 4 : 60-80% reduction, 5 : 80-100% reduction

Table 3. Effectiveness of tested siRNAs.

| Target of siRNA | Synthetic RNA | | | Plasmid vector | | | Total | | |
|-----------------|-----------------------------|---|-------------------------------|-----------------------------|---|-------------------------------|-----------------------------|---|-------------------------------|
| | The number of tested siRNAs | The number of effective siRNAs (>80% reduction) | Ratio of effective siRNAs (%) | The number of tested siRNAs | The number of effective siRNAs (>80% reduction) | Ratio of effective siRNAs (%) | The number of tested siRNAs | The number of effective siRNAs (>80% reduction) | Ratio of effective siRNAs (%) |
| 5'UTR/Leader | 3 | 0 | 0.0 | 2 | 1 | 50.0 | 5 | 1 | 20.0 |
| Replicase | 25 | 7 | 28.0 | 12 | 6 | 50.0 | 37 | 13 | 35.1 |
| Spike | 13 | 6 | 46.2 | 2 | 2 | 100.0 | 15 | 8 | 53.3 |
| ORF3 | 10 | 0 | 0.0 | 0 | 0 | NC | 10 | 0 | 0.0 |
| E | 6 | 0 | 0.0 | 0 | 0 | NC | 6 | 0 | 0.0 |
| M | 15 | 0 | 0.0 | 0 | 0 | NC | 15 | 0 | 0.0 |
| ORF7 | 3 | 0 | 0.0 | 1 | 0 | 0.0 | 4 | 0 | 0.0 |
| N | 17 | 0 | 0.0 | 5 | 1 | 20.0 | 22 | 1 | 4.5 |
| 3'UTR | 2 | 0 | 0.0 | 0 | 0 | NC | 2 | 0 | 0.0 |
| Total | 94 | 13 | 13.8 | 22 | 10 | 45.5 | 116 | 23 | 19.8 |

Table 4. Description of siRNAs tested in our study.

| siRNA | sequence | Number | Start | End | Effectiveness(1-5) | Target | Material | Variation |
|----------|--------------------------|--------|-------|-------|--------------------|---------|----------|--------------------|
| siSARS-1 | gctatggcatcgcacaaagtcta | 25 | 668 | 692 | 3 | Nsp1 | RNA | SARS-CoV infection |
| siSARS-2 | gccattaaatgtttgacatcgta | 25 | 3313 | 3337 | 3 | Nsp3 | RNA | SARS-CoV infection |
| siSARS-3 | gccacacgcgttgaggtacaacta | 25 | 7447 | 7471 | 4 | Nsp3 | RNA | SARS-CoV infection |
| siSARS-4 | gctggcaatgtcaactcgtgtta | 25 | 10192 | 10216 | 3 | 3CL pro | RNA | SARS-CoV infection |
| siSARS-5 | gctctaagagccaactcagctgta | 25 | 12583 | 12607 | 4 | Nsp8 | RNA | SARS-CoV infection |
| siSARS-6 | gcacatgtggctagtgtgatgcta | 25 | 18768 | 18792 | 4 | Nsp14 | RNA | SARS-CoV infection |

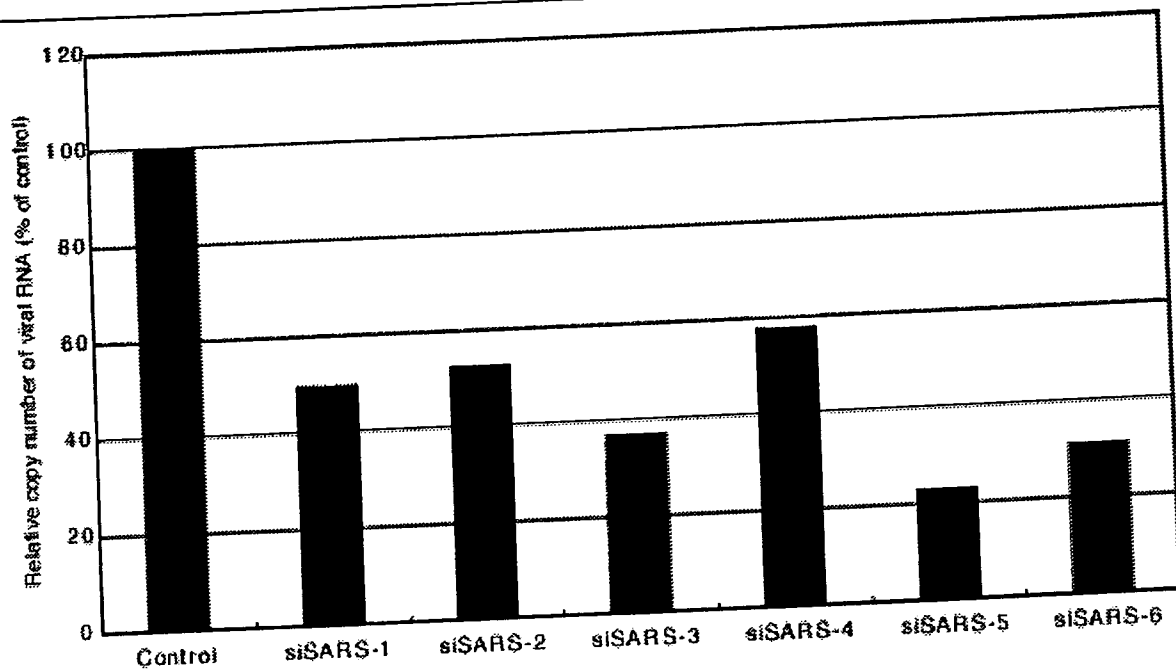


Figure 3. Inhibition of SARS-CoV replication by siRNAs targeting ORF1. We designed anti-SARS-CoV replicase siRNA with chemical modification and investigated the effect of siRNA on SARS-CoV replication by real-time RT-PCR. The targets of siSARS-1, -2, -3, -4, -5, and -6 were nsp 1, nsp 3, nsp3, 3CL proteinase, nsp 8, and nsp 14 respectively. The siSARS-3, -5, and -6 showed higher reduction activity (63%, 77%, and 69 % reduction respectively), while the others (siSARS-1, -2, and -4) exhibited lower activity (50%, 48%, and 42% reduction respectively).

Targeting leader sequence

Li et al. showed that siRNA targeting the leader sequence of SARS-CoV could strongly inhibit virus replication[45]. The common feature of the coronaviruses is the similar discontinuous transcription of subgenomic mRNA regulated by the pretranscribed leader sequence and the specific TRSs in the genome[43, 44]. It was shown that targeting the leader sequence in the mRNA of SARS-CoV structural proteins was a powerful way to control virus replication because the leader sequence contributes to the regulation of virus gene expression and because the leader sequence remained almost identical in all the strains of SARS-CoV identified.

Targeting nsp1,2 and 3

Ni et al. reported that shRNA-expression plasmids targeting nsp1 gene in replicase complex could effectively block SARS-CoV replication[56]. They demonstrated that the siRNA against nsp1 resulted in the global reduction of viral gene expression including spike and nucleocapsid. Since the sequence of nsp1 is highly conserved, it is reasonable to select this sequence as a target to control SARS-CoV infection. He and Zheng et al. tested six siRNAs targeting

different sites in the nsp1, nsp2 and nsp3, and showed that three siRNAs targeting nsp2 had stronger inhibitory effect on SARS-CoV replication than those against nsp1 and nsp3[57]. These siRNAs could protect cells from SARS-CoV-induced cytopathic effect and inhibit production of SARS-CoV antigens. The reduction of the viral genomic RNA copies was 92.5%, 89.6%, and 85.8% in the cells transfected with SARSi-4, SARSi-2 and SARSi-2 all of which targeted nsp2 region of SARS-CoV. They transfected FRhk-4 cells with a combination of 2 or 3 effective siRNAs to check whether siRNAs could show synergistic inhibition of viral replication. However, no obvious synergistic effects were observed from any of these combinations.

Targeting RNA-dependent RNA polymerase

RNA-dependent RNA polymerase plays a critical role in synthesis of viral RNAs and it is logically acceptable to use siRNAs targeting RNA-dependent RNA polymerase for blocking SARS-CoV replication. Two groups designed various kinds of siRNAs including that specific to RNA-dependent RNA polymerase and both groups proved that siRNAs targeting RNA polymerase could remarkably inhibit SARS-CoV replication[46, 51]. Zheng et al. transfected the cells with seven combinations of the active siRNAs including polymerase-targeting siRNA duplexes to test the hypothesis that multiple active siRNAs could improve the prophylactic and therapeutic effects. Interestingly, all combinations presented much improved potency of the prophylactic and therapeutic effects. [46]

Targeting spike

Several groups tested the effectiveness of siRNAs which have a sequence corresponding to spike gene of SARS-CoV[46, 50, 52, 53, 55]. Spike protein can be a good target for inhibition of SARS-CoV replication because SARS-CoV spike protein plays a critical role during infection. Qin et al. showed that the siRNAs transcribed in vitro were effective in silencing S glycoprotein expression; [Qin, 2004 #1901], and Zhang et al. showed that DNA vector-driven siRNA could selectively silence S gene expression in Vero E6 cells infected with SARS-CoV[52]. Wu et al. demonstrated that synthetic siRNA duplexes directed against spike sequence could inhibit SARS-CoV replication in Vero E6 cells more strongly than siRNAs targeting the other regions[55].

Targeting genes encoded in subgenomic RNA except spike

Many researchers tested various kinds of siRNAs and showed that siRNAs targeting leader sequence, replicase and spike could inhibit SARS-CoV

replication[45, 46, 50, 52, 53, 55, 56]. However, it was difficult to find strongly active siRNA in the genes encoded in subgenomic RNAs excepting spike. Almost all of the siRNAs directed against ORF3, envelope, matrix, ORF7a, and nucleocapsid were weak in blocking virus replication[46, 51](Table 2 and 3). These results suggest that genomic RNA disruption may be the major mechanism in inhibition of viral replication by active siRNAs, rather than viral protein knockdown. Zheng showed that the effective siRNA targeting spike region could reduce both viral titer and viral genome copy number by destruction of genomic RNA, in addition to knockdown of spike protein expression[46].

Using siRNA against SARS-CoV in vivo

Many reports indicated that selected siRNA could effectively inhibit SARS-CoV replication in vitro, but siRNA-mediated inhibition of SARS had scarcely been shown in animal models. Li et al. demonstrated for the first time that siRNAs have a significant effect on suppression of SARS-like symptoms in a macaque model[50]. Importantly, this approach was shown to be effective both prophylactically and therapeutically with no adverse effects.

The authors selected two siRNAs targeting RNA-dependent RNA polymerase and spike which were shown to be effective in cultured cells. They first tested two solutions for intranasal delivery of the siRNA duplexes and the luciferase reporter plasmid into mouse lungs, and identified D5W (a glucose solution) as the reagent with higher delivery efficiency.

They also used this D5W reagent for delivery of siRNAs to Rhesus macaque lungs. Although concern remains over whether the macaque SARS models are clinically relevant, the Rhesus macaque model used in this study mirrors the sequence of pathogenesis in humans with SARS and the cynomolgus macaque SARS model[3, 59]. Clear clinical relevance of this model could be found in most of the parameters studied, including elevated body temperature, lung pathology and SARS-CoV antigen detection in type I pneumocytes, type II pneumocytes and macrophages. Therefore, this Rhesus macaque model is one of the ideal system for evaluation of new therapeutic agents against SARS.

Using this model, Li et al. observed that all the monkeys in the siRNA-treated groups showed less severe symptoms than the control groups. For instance, during the 20-day period of observation after administration of the siRNAs, the treated monkeys kept an average body temperature lower than 38.9 °C while the control monkeys had an average of body temperature above 39.1 °C. All of the three siRNA-treated groups showed relatively mild severity of acute diffuse alveolar damage (DAD) and none showed lung damage beyond a score of ++, whereas the control animals suffered from severe DAD with a score of +++. Furthermore, it was shown that three of the four animals

in each of the siRNA-treated groups were free of SARS-CoV RNA in the oropharyngeal swab specimens. These results indicated that the siRNA treatments blocked the spread of SARS-CoV within the lungs and suppressed SARS-like symptoms. The total accumulated dosage of siRNA administered to individual macaques ranged from 10 mg/kg to 40 mg/kg and did not cause any visible differences in appearance, behavior or sign of organ damage, which indicated that siRNA was safe for prophylactic and therapeutic treatments *in vivo*. This study has important implications on strategies for combating emerging infectious diseases such as SARS.

RNAi and viral diseases other than SARS-CoV

RNAi has been developed into a widely used technique, and many researchers have reported inhibition of virus replication by means of RNAi for various viruses, including human immunodeficiency virus type 1, hepatitis B virus, hepatitis C virus, dengue virus, poliovirus and influenza A virus [26-30, 60-69].

Treatment of HIV-infected patients with combination of antiviral drugs is effective, but there are problems concerning chronic toxicity of drugs and the emergence of drug-resistant HIV-1 strains. Various research groups have investigated effectiveness of RNAi on HIV-1 in search for alternative strategies to block HIV-1 replication. Target sequences of siRNA in these reports were the structural proteins Gag, Pol and Env, and the regulatory proteins Tat and Rev, and two accessory proteins Nef and Vif [26-28, 70-73].

Although it was demonstrated that HIV-1 replication could be inhibited by RNAi, the question remains whether siRNA targets the incoming genomic RNA, the newly synthesized transcripts or both. Evidences have been obtained suggesting that the incoming genomic RNA is indeed targeted for siRNA-mediated destruction [26, 27, 71]. In these studies the amount of integrated provirus was found to be reduced when cells were pre-treated with siRNAs. However, it was reported in the other studies that the level of proviral DNA was not decreased by treatment of siRNA [70, 72, 74]. It is possible that different siRNAs induce different effects. It seems that targeting the incoming genomic RNA can explain only a small part of the inhibition and that viral transcripts are much more susceptible to RNAi-mediated degradation. This is in agreement with studies on the other retroviruses, which revealed that the incoming RNA was protected against RNAi-mediated degradation by the nucleocapsid [70].

In addition to targeting the viral RNA, an alternative way to inhibit virus replication by RNAi is to silence the expression of cellular genes that are required for viral replication. The targets of siRNA against host factors included CD4, CCR5, CXCR4 and p65 subunit of NF-kappa B [26, 74-76]. *In vivo* suppression of CD4 and NF kappa B is limited because of the important

functions of these molecules. The HIV-1 co-receptor CCR5 may be a more suitable target because an inactivating mutation in the CCR5 gene is compatible with normal life. By using a lentivirus-based vector system carrying the siRNA expression cassette against CCR5, expression of CCR5 on the surface of peripheral blood T lymphocytes was reduced by 10-fold, which resulted in a 3- to 7-fold reduction in the number of infected cells [76]. Compared with direct HIV-RNA targeting, the indirect approach silencing a viral receptor by siRNA appears less effective in blocking HIV-1 replication.

Several groups also investigated the effects of siRNA targeting host factors to control replication of viruses other than HIV-1. Gaggar et al. [77] used CD46-specific siRNAs to show the role of CD46 as a cellular attachment receptor for most group B adenoviruses. Similarly, the role of the ubiquitous glucose transporter GLUT-1 as a component of the receptor for the human T cell leukemia virus (HTLV) was demonstrated by silencing GLUT-1 expression with siRNAs specific for the 3'NC region of GLUT-1 mRNA [78]. Adenovirus vectors encoding siRNAs have been used to confirm the role of putative cellular cofactors for HCV. HCV replication in Huh-7 cells was substantially inhibited by silencing either La (a protein potentially involved in HCV internal initiation of translation), polypyrimidine tract binding protein (a protein interacting with both 5'- and 3'-NC regions), or gamma subunit of eukaryotic initiation factors 2B (a cofactor of HCV cap-independent translation) [79]. Similarly, targeting the human RNA helicase p68 by specific siRNAs reduced the transcription of negative strand of HCV RNA [80]. Moreover, caveolin-1 knockdown by RNAi reduced human coronavirus 229E infection, because this virus binds to CD13 in rafts and enters the cell through caveolae [81].

On the study of SARS-CoV, there has been no report using siRNA which targets cellular factors required for multiplication such as ACE2. Combining siRNAs targeting SARS-CoV RNA with those targeting host factors may result in stronger inhibition of virus replication.

Improvement of RNAi technology for application

Chemical modification

Although duplex RNA is more resistant to nuclease than single-stranded RNA, unmodified siRNAs are rapidly degraded when added into culture medium containing serum or when administered intravenously in mammals. Degradation of siRNA duplex can be delayed or avoided by chemical modification of the oligonucleotide. Various kinds of chemical modifications that confer nuclease resistance have been developed in single-stranded antisense oligonucleotides and many of these modifications can be used in siRNA. The chemical modification in siRNA duplexes include boranophosphate modification,

phosphorothioate modification, 2'-O-methyl modification, 2'-fluoro modification, locked nucleic acids (LNAs) and cholesterol conjugation.

Phosphorothioate or boranophosphate modification of the inter-nucleoside linkage improves nuclease stability. Unfortunately, it is difficult to synthesize boranophosphate-modified RNA by standard chemical synthesis methods. Instead, borano-modified bases were incorporated in RNA using an in vitro transcription method[82], which made site-selective placement of this modification difficult. In contrast to boranophosphate modification, phosphorothioate modification can be easily placed in siRNA duplexes at any position and will increase stability of siRNA duplexes in serum or other nuclease sources[83-86].

Modification of the 2' position of the ribose can increase binding activity of both strands in siRNA duplexes (can increase T_m value) and confers nuclease resistance. The 2'-O-methyl RNA is a naturally occurring base that exists in mammalian ribosomal RNA. Alternating modification by 2'-O-methyl substitution retains potency and confers substantial nuclease resistance[87].

The 2'-fluoro modification has also been used with good results and this modification at pyrimidine bases can be combined with 2'-O-methyl purines[83-85, 88].

LNA are a different class of 2' modification in which a methylene bridge connects the 2'-O with the 4'-C of the ribose. LNA can improve binding activity of both strands and increase resistance against nuclease. LNAs can be used in siRNA duplexes but placement of modified nucleic acids to achieve best activity is more restricted than nucleic acids containing 2'-O-methyl or 2'-fluoro modification [54, 85, 89].

Cholesterol-conjugated siRNA (chol-siRNA) was shown to be effective in silencing an endogenous gene by systemic administration [90]. The conjugation of cholesterol to the 3' end of the sense strand of a siRNA molecule did not result in a significant loss of gene-silencing activity in cell culture. Moreover, unlike unconjugated siRNAs, chol-siRNA targeting luciferase showed reduction of luciferase activity in HeLa cells with a half-maximal inhibitory concentration (IC₅₀) of about 200 nM in the absence of transfection reagents. Although no detectable amounts of unconjugated siRNAs were observed in tissue samples, significant levels of chol-siRNAs were detected in liver, heart, kidney, adipose, and lung tissue samples.

In the study of siRNA-mediated inhibition of SARS-CoV replication, siRNAs with chemical modification have not been tested yet. We investigated the effect of chemically modified siRNAs targeting replicase gene and found that some of these siRNAs could block replication of SARS-CoV.

It may be possible to develop siRNAs with higher anti-SARS-CoV activity by optimization of target sequence and chemical modification especially for in vivo use.

Delivery of siRNA

Cationic liposomes and polymers are two major classes of nonviral carriers for siRNA delivery and they were used in the majority of studies on inhibition of SARS-CoV replication by siRNA. Both of them are positively charged and can form complexes with negatively charged siRNA. The complexes of siRNA and carriers can be condensed into nanoparticles, which allows efficient uptake of siRNA by endocytosis.

A different type of lipid particle was employed by Morrissey and colleagues to deliver anti-HBV siRNAs in a mouse hepatitis B model system[91]. The stable nucleic acid lipid particles (SNALP) consists of lipid bilayer containing cationic and fusogenic lipids that enables the cellular uptake and endosomal release of nucleic acids. SNALPs are also coated with a diffusible polyethylene glycol-lipid(PEG-lipid) conjugate that provides a neutral, hydrophilic exterior. Surface coating also shields the cationic bilayer *in vivo*, preventing rapid systemic clearance. Upon administration, PEG-lipid conjugate dissociates from the SNALP and the particle was transformed into a transfection-competent entity.

For *in vivo* study of anti-SARS-CoV siRNA, D5W solution (5% D-glucose in water) was used as a carrier of siRNA duplex instead of cationic liposomes[50]. It may be necessary to select the best carrier according to the target organ.

Vectors for RNAi

At the beginning of RNAi research, only the synthesized short RNA duplexes could be used to knock down the expression of target genes. Several groups developed plasmid-based systems for RNAi and these expression systems have been widely used for gene silencing. It is shown in table 2 and 3 that plasmid-based systems could knock down more efficiently than the duplexes of synthesized short RNA. Higher ratio of effective siRNA in vector-based system may be due to (1) higher stability of DNA than RNA and (2) higher copy number of siRNA in vector-based expression systems than that in synthesized RNA. The intracellular production of siRNAs can provide long-term resistance to viral infection. However, the limitation of plasmid-based system is the dependence on transfection. Only certain cell lines can be transfected and efficient transfection of primary cells is virtually impossible. To overcome the problems in plasmid-based system, various kinds of virus-based vectors have been developed which include adenovirus vector, adeno-associated virus vector, retrovirus vector and lentivirus vector. The best vector for delivering an siRNA template would be a lentivirus vector derived from HIV-1, because lentivirus vectors can stably infect nondividing cells. Lentiviral vectors have proven to be effective in expressing genes within

multiple lineages over prolonged periods. To date, there has been no report on inhibition of SARS-CoV replication with lentivirus-based vectors, but it is likely that siRNAs mediated by lentivirus vectors can inhibit replication of SARS-CoV more efficiently than those mediated by plasmid vectors.

Concluding remarks

SARS-CoV was identified as the etiological agent of SARS and was shown to be a novel member in the coronavirus family by phylogenetic analysis. A number of prophylactic and therapeutic strategies for SARS were reported which included glycyrrhizin, HIV-1 protease inhibitors, and interferons, but specific treatment for this disease has not been established yet. RNAi is a recently discovered antiviral mechanism in plant and animal cells that induces specific degradation of target RNA. RNAi is considered as a good alternative approach to the infectious diseases such as SARS because of its specificity and efficiency. SARS-CoV replication could be potently inhibited by siRNA targeting leader sequence, nsp1, nsp2, nsp3, RNA-dependent RNA polymerase, helicase, nsp16 and spike. Moreover, the recent work demonstrated that selected siRNAs could suppress SARS-CoV replication and SARS-like symptoms in Rhesus macaque model. RNAi technology will be improved by development of new siRNAs with chemical modification, new reagents for efficient delivery of siRNAs, and virus-based vector systems for stable and efficient degradation of target mRNA. Treatment of infectious diseases including SARS with RNAi is promising and in the future RNAi may be used in human for treatment of diseases after solving the present problems in utilization of RNAi in vivo.

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NEW METHODS AND TECHNOLOGIES

Long-term transgene expression and inhibition of HIV-1 replication by a Cre/loxP-EBNA-1/oriP HIV-1-dependent ribozyme vector: Applications for HIV-1 gene therapy

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ABSTRACT

The cleavage of target mRNA by ribozymes is being exploited as a means of gene silencing in nucleic-acid-based therapies. We previously established an HIV-1-dependent ribozyme-expression vector system, based on Cre-loxP technology with an LTR-*gag-p17* promoter as a molecular switch for use in acute HIV-1 infection. The simultaneous expression of the Cre protein and loxP homologous recombination induced a high level of HIV-1-replication inhibition, but ribozyme expression was transient. In the current study, we overcame this limitation by inserting *EBNA-1* and *oriP* genes from the Epstein-Barr virus (EBV) into the vector. When this plasmid was introduced into HeLa CD4⁺ cells, we observed long-term expression of both the *EGFP* reporter gene and the ribozyme. Moreover, HIV-1 replication was inhibited in the long-term in transfected cells. These data suggest that the HIV-1-dependent ribozyme-expression vector containing EBNA-1/oriP sequences would be a useful tool in HIV-1 gene therapy applications.

KEYWORDS: *Cre/loxP recombination, EBNA-1/oriP, gene therapy, HIV-1, ribozyme*

INTRODUCTION

In the application of therapeutics to HIV-1 infection, prevention is of greater importance than treatment. With this aim, many antiviral RNA-expression vector systems have been developed for use in anti-HIV-1 gene therapy (Banerjee et al, 2003; Barnor et al, 2004; Boden et al, 2004; Cordelier P et al, 2004; Habu et al, 2005; Mautino and Morgan, 2002; Takaku, 2004). Recently, small RNA molecules such as, siRNAs and snRNAs, have also been shown to affect gene silencing by RNA interference (Boden et al, 2003; Chang et al, 2002; Li et al, 2003).

Increasing the efficiency of transgene expression is of prime importance for human gene therapy (Davis and McNeilly, 2001). The Epstein-Barr Virus (EBV) is an autonomously replicating episomal vector that has been utilized to overcome the problem of rapid elimination of intracellularly delivered plasmid DNA in nonviral gene transfer. EBV is a gammaherpesvirus that is maintained as an episome of approximately 172 kb in size in a small number of resting B cells and epithelial cells in most of the human population. It latently infects human B cells with a high efficiency, after which its linear double-stranded genome circularizes and is sustained as a stable

episome (Hirai and Shirakata, 2001). The EBV replication system is present at a frequency of about 1-100 copies per cell, and maintains a non-covalent attachment to the host chromosome.

The latent origin of replication *oriP* and the viral transactivator protein EBNA-1 are essential components for EBV latent replication and maintenance of the viral genome (Daikoku et al, 2004; Lee et al, 1999). Both elements have been employed for long-term transgene expression in gene-therapy studies (Otomo et al, 2001; Tsujie et al, 2001).

Previously, we described an HIV-1-dependent ribozyme-expression vector capable of achieving site-specific excision of loxP sequences by using the HIV-1 minimal LTR-Cre-loxP system as a molecular switch in an acute HIV-1 infection (Habu et al, in press). However, we were unable to detect long-term expression of the anti-HIV-1 ribozyme. We hypothesized that the length of HIV-1-dependent transgene expression could be significantly increased in mammalian cells by introducing EBNA-1/*oriP* sequences to the vector.

In this study, we constructed an HIV-1-dependent long-term transgene (RNA ribozyme) expression vector (LTR-*gag-p17*/Cre-loxP-Rz-U5-EBNA-1-*oriP*-EGFP (EOG)) using the EBV replicon system, which was propagated in *Escherichia coli* and transfected into mammalian cells. We measured transgene-expression levels, including EBNA-1 and *oriP*, in the presence and absence of HIV-1 infectious molecular clone (pNL4-3, Adachi et al, 1986). The potential anti-HIV-1 activity of the expression vector was evaluated with a view to establishing a highly effective therapeutic agent that could be further developed for HIV gene-therapy applications.

MATERIALS AND METHODS

Construction of plasmids

The retroviral vector pLEGFP-C1 (Clontech, Mountain View, CA) was digested with *Nhe* I and *Xho* I to release the DNA fragment encoding enhanced green fluorescent protein (EGFP). This was inserted into the *Nhe* I/*Xho* I sites of pCEP4 (Invitrogen, Carlsbad, CA), which contains EBNA-1 and *oriP*, to create pCEP4-EGFP. An *Ssp* I fragment containing EGFP, EBNA-1, and *oriP* was cloned into the *Stu* I sites of pLTR-*gag-p17*-Cre/loxP-Rz-U5 (Habu et al, in press) and ploxP-Rz-U5, which been previously described with a high cleavage affinity (Habu et al, 2002) to yield pLTR-*gag-p17*-Cre/loxP-Rz-U5-EOG (Figure 1A) and ploxP-Rz-U5-EOG (Figure 1C), respectively. The control plasmid vector ploxP-Rz-U5-EOG lacks the LTR-*gag-p17*-Cre gene and so does not trigger expression of the ribozyme. A *Pvu* II fragment containing the EGFP-expression unit was excised from pCMV-EGFP previously constructed (unpublished data) and cloned into the *Stu* I sites of ploxP-Rz-U5 (Habu et al, 2002) or pLTR-*gag-p17*-Cre/loxP-Rz-U5 to generate ploxP-Rz-U5-G (Figure 1D) and pLTR-*gag-p17*-Cre/loxP-Rz-U5-G (Figure 1B), which are the EBNA-1 and *oriP* negative-control plasmids, respectively.

Cell culture and transfections

HeLa CD4⁺ cells were grown in RPMI 1640 medium (Sigma, Saint Louis, MO) supplemented with 10% (v/v) heat-inactivated FBS, 100 U/ml penicillin, and 100 µg/ml streptomycin. HEK 293T cells were grown in DMEM containing 10% FBS, 100 U/ml penicillin, and 100 µg/ml streptomycin. All cells were maintained at 37 °C in a 5% CO₂ atmosphere. HeLa CD4⁺ and 293T cell transfections were carried out using FuGENE™6 (Roche Diagnostics, Basel, Switzerland) according to the manufacturer's protocol.

Luciferase assay

Luciferase activity was measured with the PicaGene kit (Toyo-inki, Tokyo, Japan) according to the manufacturer's protocol. The target gene-expressing plasmid pNL4-3-luc (Akkina et al, 1996), lacking an *emv* gene and with a firefly luciferase gene replacing the *nef* gene, was co-transfected into HeLa CD4⁺ cells with the pLTR-*gag-p17*-Cre/loxP-Rz-U5-EOG plasmid, which expresses the ribozyme following Cre/loxP homologous recombination. Transfected HeLa CD4⁺ cells were lysed in 200 µl PicaGene cell lysis buffer for 15 min and then harvested. Cell debris was removed by centrifugation. Centrifuged lysate (10 µl) was added to 100 µl luminous substrate, and the luminescent signal was immediately quantitated with a luminometer (Lumat LB 9507; Berthold, Bad Wildbad, Germany).

Flow cytometry

Transfected HeLa CD4⁺ cells were trypsinized, washed twice in PBS, and fixed in PBS containing 1% formaldehyde. Direct fluorescence of EGFP was analyzed by FACS Calibur (Clontech). Data acquisition and analysis were performed with CellQuest software (Clontech). Gates for detection of EGFP were established using mock-transfected cells as background.

Fluorescent microscopy

To evaluate the self-replicating function of the loxP ribozyme as an index for stable transgene expression in cells, transfected HeLa CD4⁺ cells were trypsinized and seeded at a low cell density. Direct fluorescence microscopy of EGFP was carried out at the mitotic stage of cell division, after each passage on days 1, 3, 7, 13, 19 and 25 and the data were acquired with a DP12 digital microscope camera (Olympus Company, Tokyo, Japan).

RNA isolation and RT-PCR

Total cellular RNA was isolated from transfected HeLa CD4⁺ cells with the GenElute Mammalian Total RNA kit (Sigma) using the manufacturer's protocol. RNA samples were treated with DNase I (Promega, Madison, WI) according to the manufacturer's instructions. RT-PCR assays were carried out using previously described primers (Habu et al, 2002) and the RT-PCR high-Plus-kit (Toyobo, Osaka, Japan) according to the manufacturer's protocol.

Assay of HIV-1 replication

HIV-1 production was monitored by determining the HIV-1 p24 antigen concentration. The culture medium from HeLa CD4⁺ cells co-transfected with pNL4-3 and pLTR-*gag-p17*-Cre/loxP-Rz-U5-EOG was harvested on days 1,

3, 5, 7, 9, 11, 13 and 15 post-transfection. p24 Gag protein production was detected by the HIV-1 p24 CLEIA assay (Lumipulse, Fujirebio Inc., Tokyo, Japan), according to the manufacturer's protocol (Sakai et al, 1999).

RESULTS AND DISCUSSION

Design and construction of an HIV-1-dependent Cre-expression vector

Tissue-specific gene transfer and expression are crucial for the development of safe and effective gene-therapy protocols. To this end, the HIV-1 LTR can serve as an efficient and inducible promoter dependent on the HIV-1 trans-activation factor, Tat. In a previous study, we constructed the HIV-1-dependent RNA ribozyme expression Cre/loxP vector, pLTR-gag-p17-Cre/loxP-Rz-U5-G, which targets mRNAs encoded by the U5 region

(548–578) of the LTR (Figure 1E). This vector showed HIV-1-dependent ribozyme expression in HeLa CD4⁺ cells (Habu et al, 2002; Habu et al, in press), but expression was not long term. Hence, in the current study, we constructed an HIV-1-dependent expression vector containing Cre/loxP and EBNA-1/oriP sequences, with the aim of increasing the duration of transgene expression. Moreover, we inserted the reporter gene EGFP to enable visualization of transgene expression (Figure 1A). The plasmid vectors pLTR-gag-p17-Cre/loxP-Rz-U5-G (Figure 1B), ploxP-Rz-U5-EOG (Figure 1C), and ploxP-Rz-U5-G (Figure 1D) served as controls. The advantage of this vector system over previously reported ribozyme vector systems (Chang et al, 2002; Li et al, 2003) is that it is not constitutively expressed to trigger off non-specific inhibition, but specifically expressed only in the event of HIV infection.

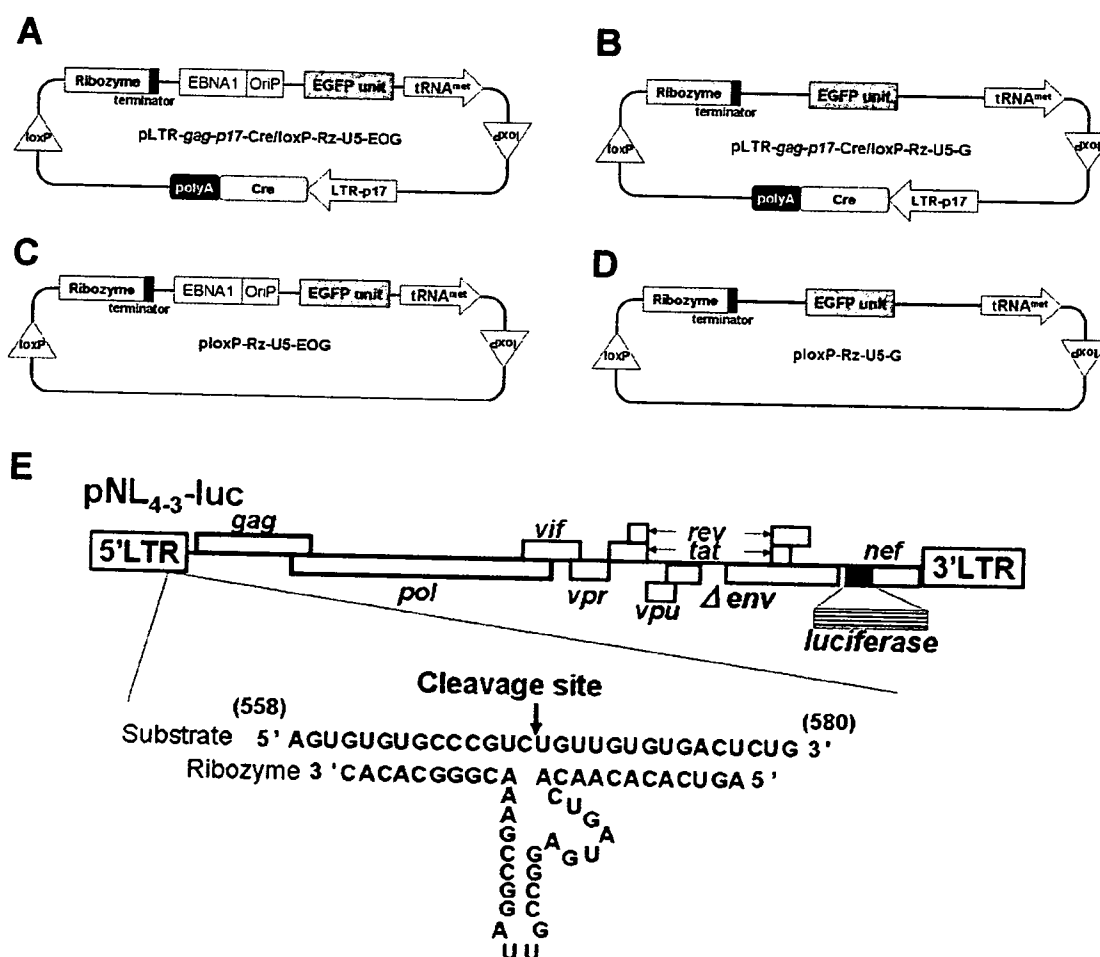


Figure 1. Schematic representation of HIV-1-dependent ribozyme-expression vectors. (A) The ribozyme expression (off switch) vector pLTR-gag-p17-Cre/loxP-Rz-U5-EOG, containing *EBNA-1* and *oriP* genes for long-term expression. (B) Control ribozyme-expression vector pLTR-gag-p17-Cre/loxP-Rz-U5-G, which lacks *EBNA-1* and *oriP* genes. (C) Control vector ploxP-Rz-U5-EOG, which lacks the *LTR-gag-p17-Cre* genes. (D) Control vector ploxP-Rz-U5-G, which lacks *EBNA-1/oriP* and *LTR-gag-p17-Cre* genes. (E) HIV-1 NL4-3 molecular clone pNL₄₋₃-luc containing the luciferase reporter gene, showing the target site and structure of the constructed ribozyme.

Long-term transgene expression of pLTR-gag-p17-Cre/loxP-Rz-U5-EOG in 293T and HeLa CD4⁺ cells

To characterize the ability of the EBV replication system to effect long-term transgene expression we compared EGFP expression of control vector (pLTR-gag-p17-Cre/loxP-Rz-U5-G) with that of the EBNA-1/oriP plasmid pLTR-gag-p17-Cre/loxP-Rz-U5-EOG. EGFP expression in pLTR-gag-p17-Cre/loxP-Rz-U5-G-transfected 293T cells was observed for a maximum of 3 days, while EGFP expression persisted for more than 25 days in pLTR-gag-p17-Cre/loxP-Rz-U5-EOG-transfected 293T cells (Figure 2). As it has been reported that the EBNA-1 protein potentiates gene transcription (Mackey and Sugden, 1999), we measured the enhancement of gene expression by determining EGFP fluorescence intensity. FACS analysis showed that HeLa CD4⁺ cells transfected with the EBNA-1-containing plasmids demonstrated longer-term EGFP expression (until day 7; Figure 3) than HeLa CD4⁺ cells transfected with plasmids lacking EBNA-1. This is of therapeutic importance, because EBNA retains the therapeutic molecule to sensor for infective HIV-1 to release the catalytic ribozyme for cleavage.

Measurement of the mean fluorescence intensity (MFI) revealed a twofold increase in the EGFP expression level of HeLa CD4⁺ cells transfected with pLTR-gag-p17-Cre/loxP-Rz-U5-EOG compared with pLTR-gag-p17-Cre/loxP-Rz-U5-G-transfected cells (data not shown). These results indicate that EBNA-1/oriP sequences mediate efficient and stable replication of transgene expression by enhancing nuclear localization of EBNA-1 (Mackey and Sugden, 1999; Marechal et al, 1999). The nuclear localization of this vector system is of cardinal importance since its function is induced by HIV-1 tat which is nuclear-based.

Dose-dependent inhibition of HIV-1 replication by pLTR-gag-p17-Cre/loxP-Rz-U5-EOG

The effect of pLTR-gag-p17-Cre/loxP-Rz-U5-EOG on HIV-1 (pNL_{4.3}-luc) replication was measured in a transient assay following its co-transfection with pNL_{4.3}-luc into HeLa CD4⁺ cells. At 72 h post-transfection, the luciferase activity of cell lysate was measured as an indirect marker of viral replication. The plasmid vector ploxP-Rz-U5-EOG (Figure 1C), which does not trigger ribozyme expression as it lacks the LTR-gag-p17-Cre gene, was used as a control. Our analysis showed a dose-dependent inhibition of HIV-1 replication by pLTR-gag-p17-Cre/loxP-Rz-U5-EOG with a maximum inhibitory efficacy of >90% at a vector DNA concentration of 1.67 µg (Figure 4). Control vector alone had no inhibitory effect. This result suggests that the Rz-U5 ribozyme was expressed using Cre/loxP recombination and EBNA/oriP systems in HIV-1 infected cells, and successfully cleaved its target HIV-1 mRNA (Figure 1E).

EBNA-1 mediates long-term ribozyme expression in HIV-1-dependent vector-transfected HeLa CD4⁺ cells

As long-term ribozyme-U5 (Rz-U5) expression is an important determinant of its efficiency, we compared the level of expression in HeLa CD4⁺ cells transfected with pLTR-gag-p17-Cre/loxP-Rz-U5-EOG or pLTR-gag-p17-Cre/loxP-Rz-U5-G in the presence or absence of pNL4-3 (Figure 5). RT-PCR analysis showed that Rz-U5 expression persisted for more than 19 days following pLTR-gag-p17-Cre/loxP-Rz-U5-EOG transfection in the absence of pNL4-3 (Figure 5). By contrast, pLTR-gag-p17-Cre/loxP-Rz-U5-G-transfected cells demonstrated Rz-U5 expression for only 3 days. Ribozyme expression was not observed following transfection of either plasmid DNA in the absence of pNL4-3. These results confirm that

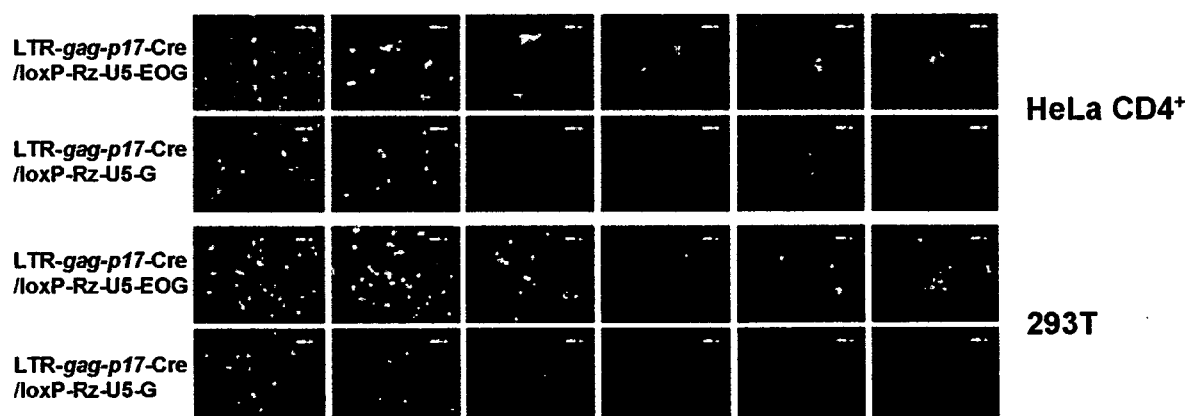


Figure 2. EBNA-1 and oriP increase the duration of EGFP expression in transfected HeLa CD4⁺ and 293T cells. EGFP expression was evaluated on days 1, 3, 7, 13, 19, and 25 post-transfection.