



# Efficient Transfection of Biologically Relevant Cells in Immunology Research

13 May 2014 / Speaker: Sean Fuerst

14 May 2014 / Speaker: Dr. Isabella Drewelus

# Agenda

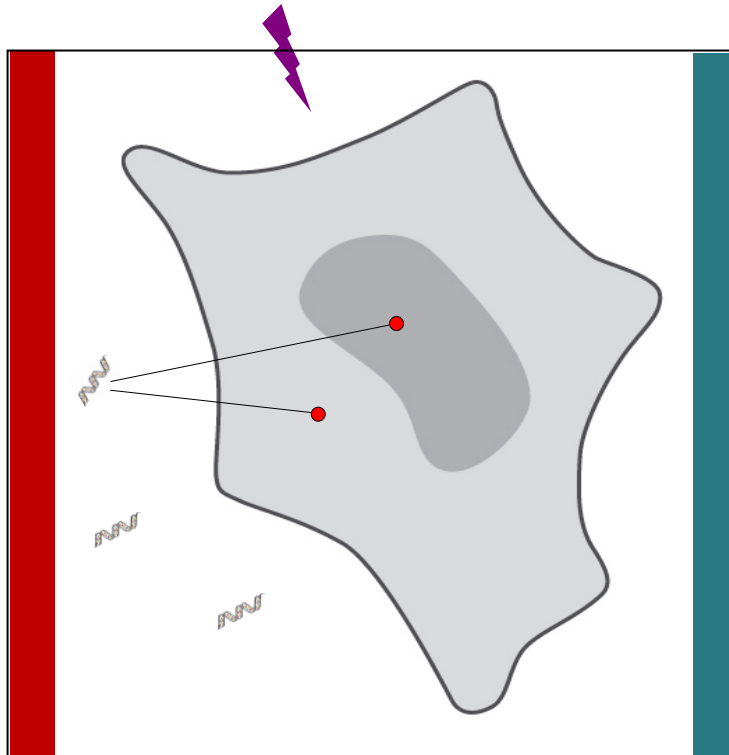
- Technology Introduction
- Nucleofection™ of Immune Cells – Application Examples
  - Generation of specific antigen-presenting cells for stimulating cytotoxic T lymphocytes
  - Suitability of Nucleofection™ for Recombinant T Cell Receptor Transfer
- Tips and Tricks for Successful Nucleofection™
- Nucleofection™ Portfolio – Serving Different Needs
- Summary

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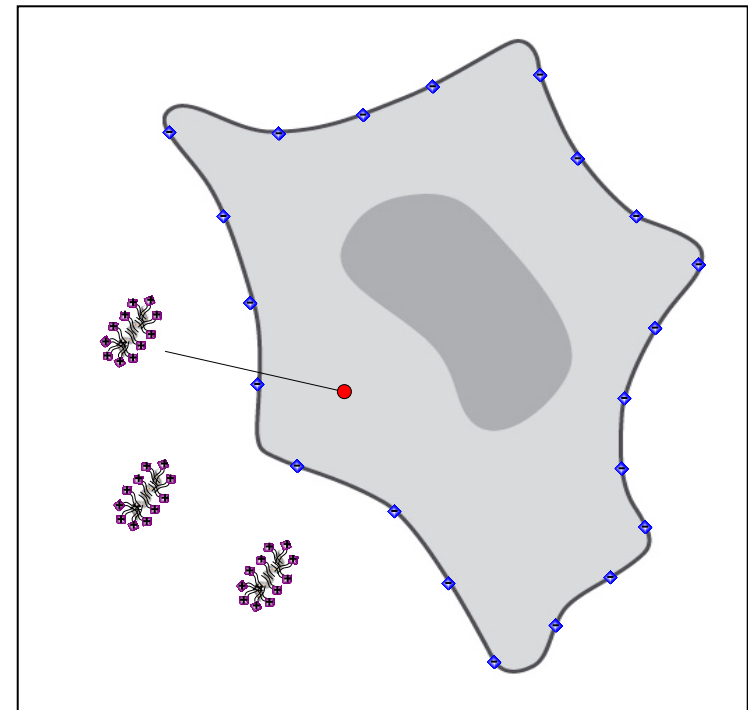
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# Nucleofection™ – The Principle

- High transfection efficiency combined with low mortality
- DNA is directed into the nucleus giving faster gene expression

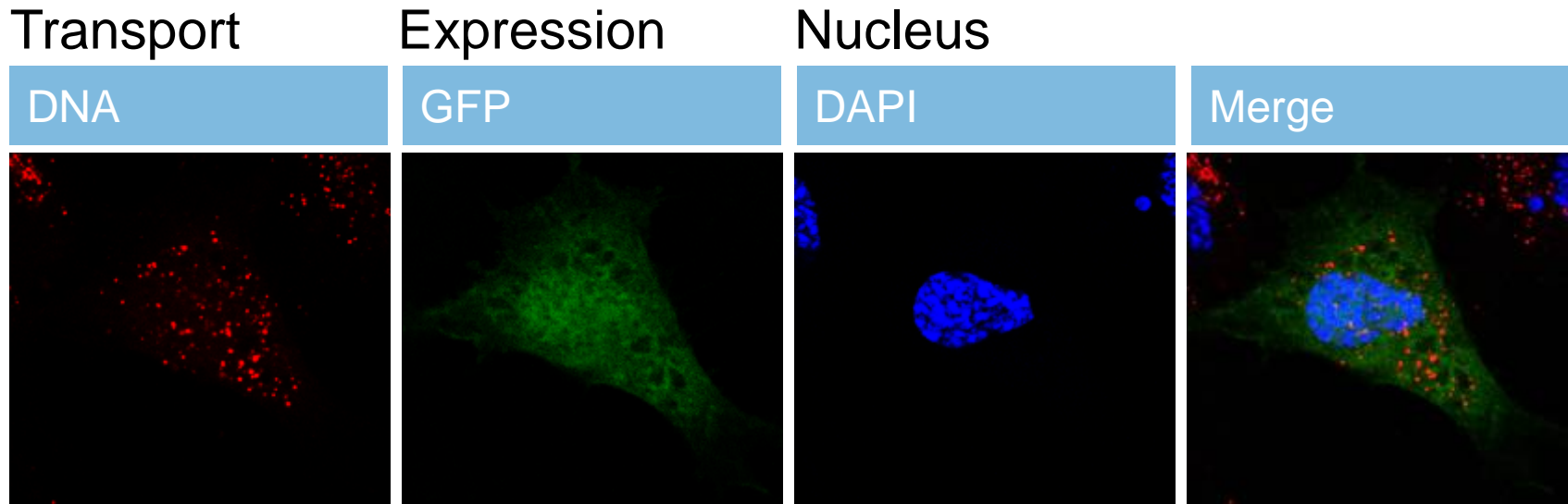


Nucleofection™



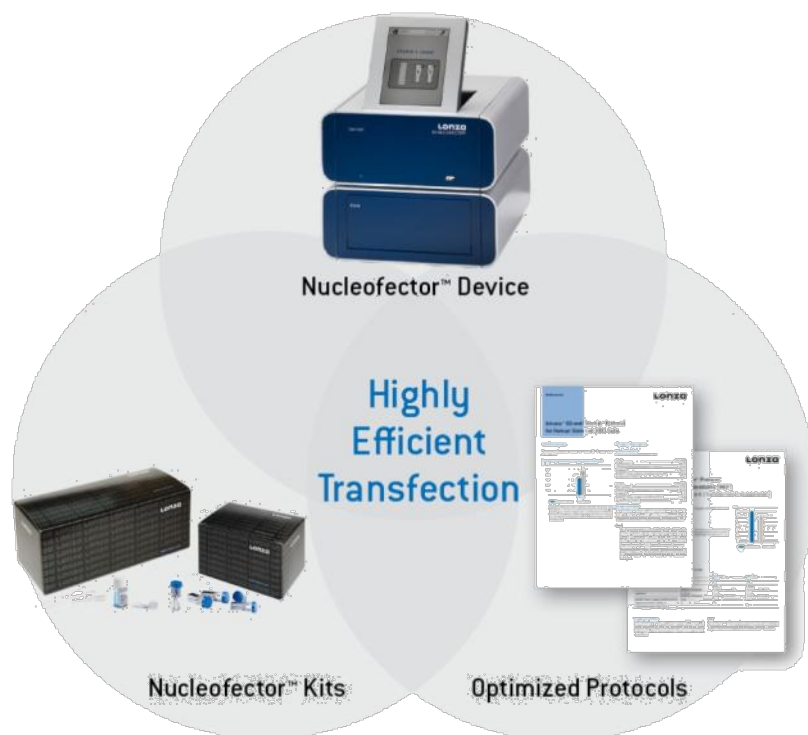
Other transfection methods

# Proven Transport of DNA Into the Nucleus



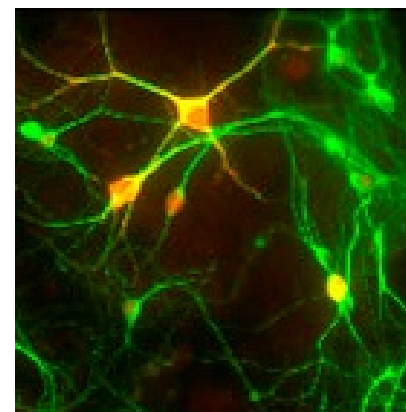
- Primary NHDF-neo cells were transfected with labeled plasmid DNA encoding GFP, fixed **after 2h** in 3.5% PFA and analyzed by confocal microscopy.

# Components of Nucleofector™ Technology



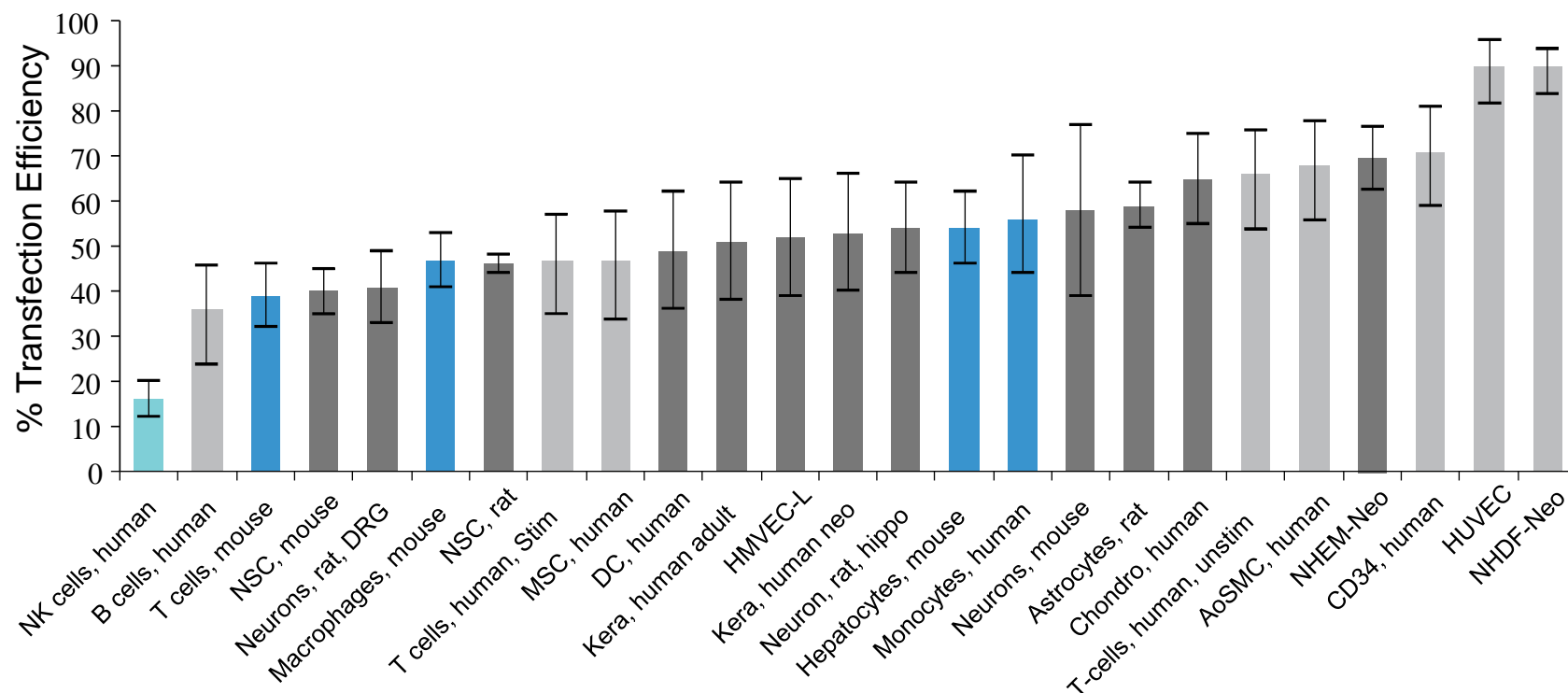
## A Unique Combination:

- Nucleofector™ Device
- Specific Nucleofector™ Kits
- Detailed optimized protocols
- Enabling excellent transfection performance combined with high functionality!



# More Than 80 Primary Cell Types Successfully Transfected

■ Analysis time: 16-48 h post Nucleofection™



Reporter genes

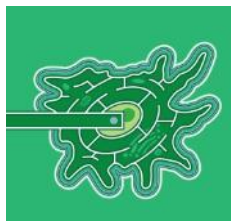
■ H-2K<sup>k</sup>

■ eGFP (customer data)

■ maxGFP™ Reporter Protein

■ GFP/YFP (customer data)

# Nucleofection™ Applications Overview



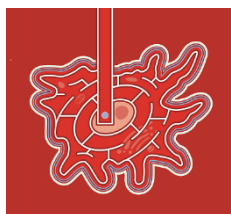
## ■ Immunology

- Human T cells
- Immune system cells



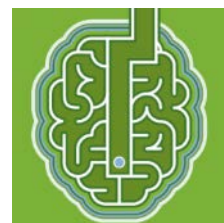
## ■ Metabolic research

- Chondrocytes
- INS-1, MIN-6
- Adipocytes, 3T3-L1



## ■ Cancer

- Mammary epithelial cells
- Prostate epithelial cells



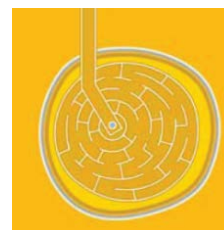
## ■ Neurobiology

- Cortical neurons
- Dorsal root ganglia



## ■ Respiratory/ Cardiovascular research

- Bronchial epithelial cells
- Cardiomyocytes
- HUVEC, HMVEC, SMC



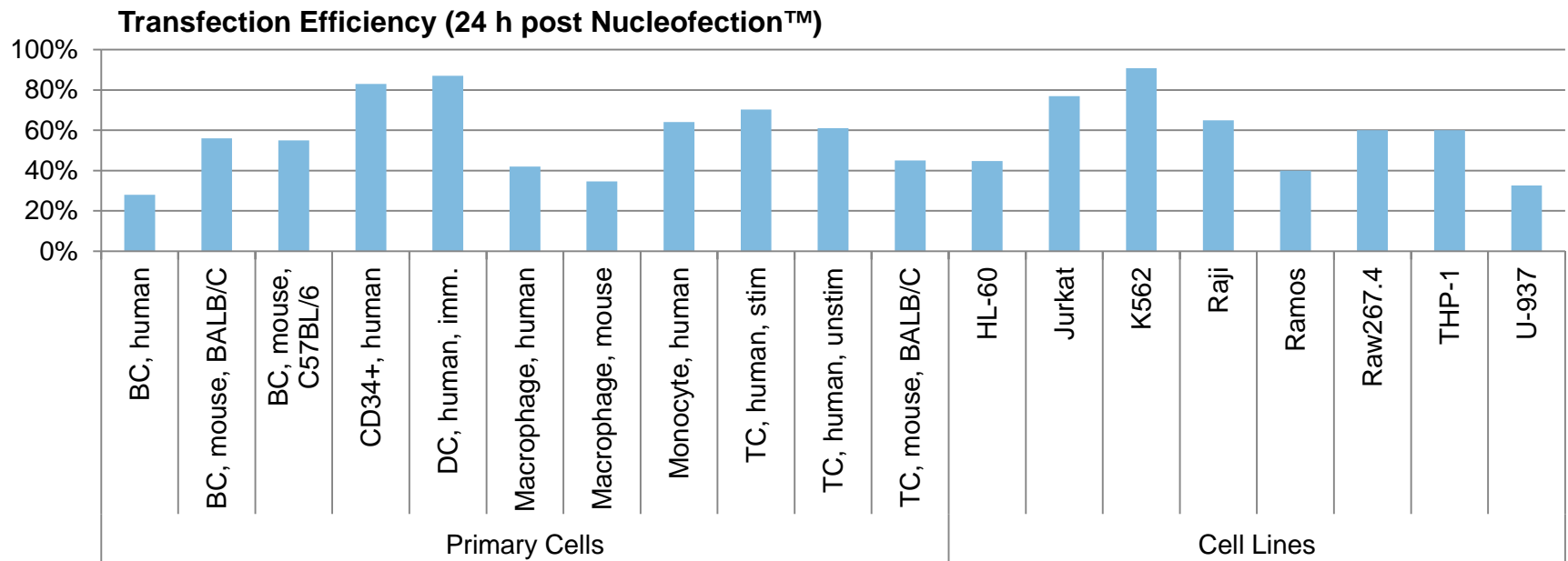
## ■ Stem cell research

- Human fibroblasts
- Human CD34+ cells
- Human monocytes



# More Than 45 Blood Cell Types Successfully Transfected

■ Just a few examples...



# Nucleofection™ Applications in Immunology Research

- HIV research, e.g.
  - Study of mechanisms that lead to apoptosis of CD4+ T cells upon HIV infection (Laforge M et al., 2007)
- T-cell differentiation, e.g.
  - Identification of genes involved in Th1 and Th2 cell differentiation (Lund RJ et al., 2007). Th subtypes are involved in the pathogenesis or progression of many immune-mediated diseases, such as type 1 diabetes and asthma
- Regulation of cytokine expression or cytokine signaling pathways (e.g. via reporter gene assays)
- Generation of specific antigen-presenting cells (APCs, e.g. dendritic cells or B cells) for subsequently stimulating cytotoxic T lymphocytes (CTLs)



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# Treatment or Prevention of Viral Infections with Multivirus-Specific T Cells (1)

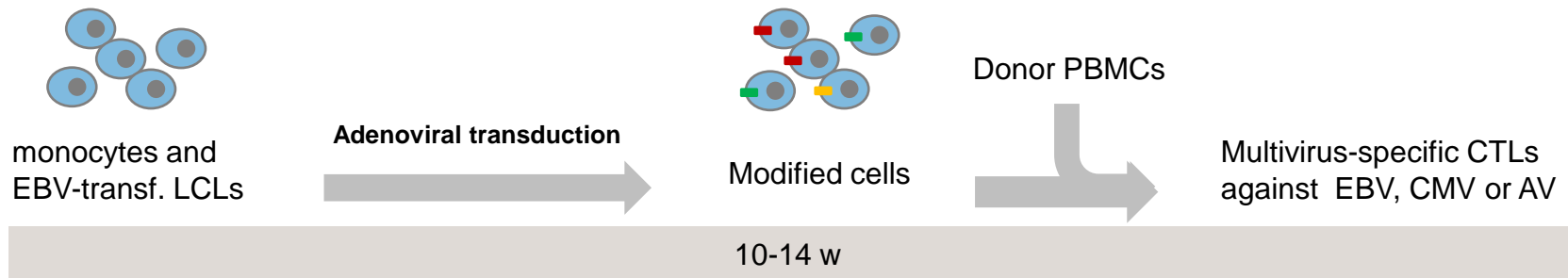
Gerdemann U., Vera J.F., Rooney C.M., Leen A.M. (2011).  
Generation of Multivirus-specific T Cells to Prevent/treat Viral Infections after Allogeneic Hematopoietic Stem Cell Transplant. JoVE. 51. <http://www.jove.com/details.php?id=2736>

## ■ Background

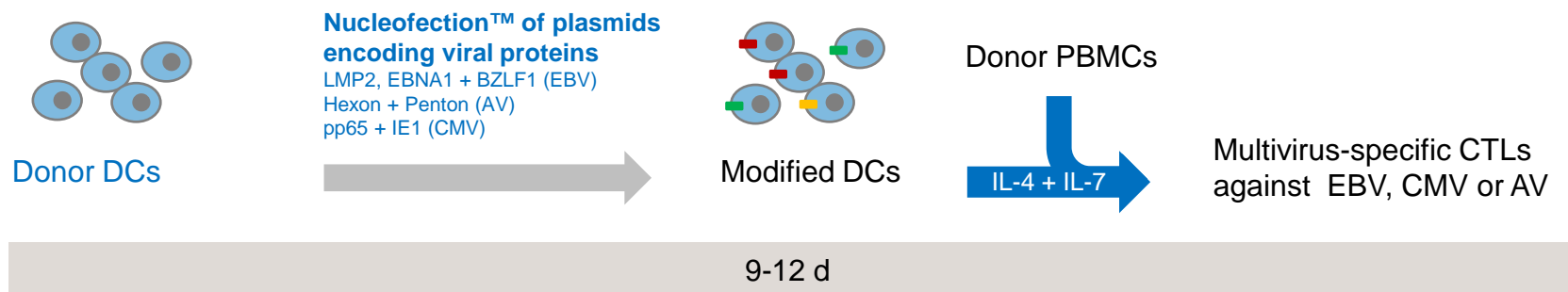
- Viral infections can be severe side effects for transplantation of allogeneic hematopoietic stem cells due to immuno-suppression of recipients
- Infusion of virus-specific cytotoxic T lymphocyte (CTL) from the stem cell donor have proven effective for prevention or treatment

# Treatment or Prevention of Viral Infections with Multivirus-Specific T Cells (2)

## ■ Approach so far:

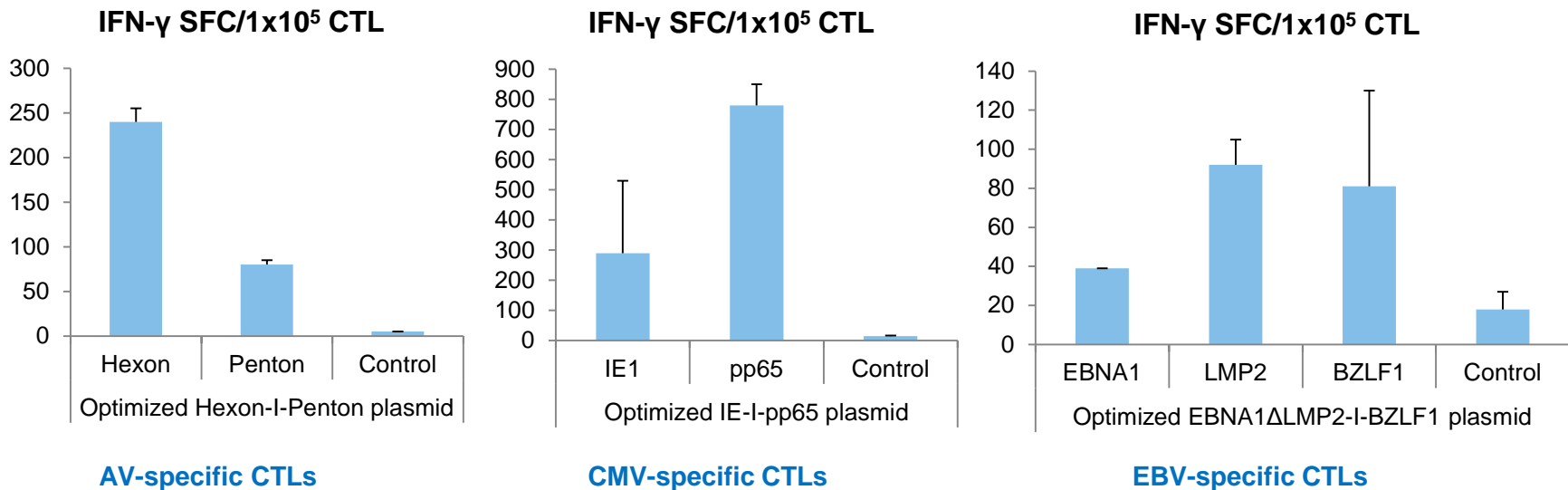


## ■ New approach:



# Treatment or Prevention of Viral Infections with Multivirus-Specific T Cells (3)

- Transfected human DCs were used to stimulate T cells and specificity was analyzed by IFN $\gamma$  ELISpot 10 days post-stimulation



# Treatment or Prevention of Viral Infections with Multivirus-Specific T Cells (4)

## ■ Results:

- Due to non-viral transfection there is no competition of specific antigens of interest with other viral antigens
- Optimized CTL culture conditions improved cell survival and proliferation
- Protocol enables generation of CTLs with the correct phenotype and functionality (data not shown here)
- Significant time savings (~2 weeks vs 10-14 weeks)
- Simple protocol, FDA approved

## ■ Conclusion:

- Reduction of time, cost and complexity may allow broader implementation of T-cell immunotherapy
- Approach can be easily extended to other viruses provided that protective antigens are identified

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# Suitability of Nucleofection™ for Recombinant T Cell Receptor Transfer

Field AC, Vink C, Gabriel R, Al-Subki R, Schmidt M, et al. (2013)

Comparison of Lentiviral and Sleeping Beauty Mediated  $\alpha\beta$  T Cell Receptor Gene Transfer. PLoS ONE 8(6): e68201. doi:10.1371/journal.pone.0068201

## ■ Background:

- Transfer of recombinant T cell receptors, e.g. chimeric antigen receptors (CARs), into T cells → redirecting T cell immunity against tumor or viral antigens

### **Retro- or lentiviral transduction**

- High effort: New viruses required when testing different receptor constructs
- High-costs: Manufacturing clinical grade viral vectors



### **Plasmid-based gene transfer**

using transposable elements, e.g. Sleeping Beauty (SB)

## ■ This study:

- Comparison of lentiviral transduction (LV) versus Nucleofection™ of an enhanced Sleeping Beauty transposition system (SB100X, a hyperactive SB transposase) to deliver a codon optimized  $\alpha\beta$  TCR against WT1 antigen

# Comparable TCR Expression Levels



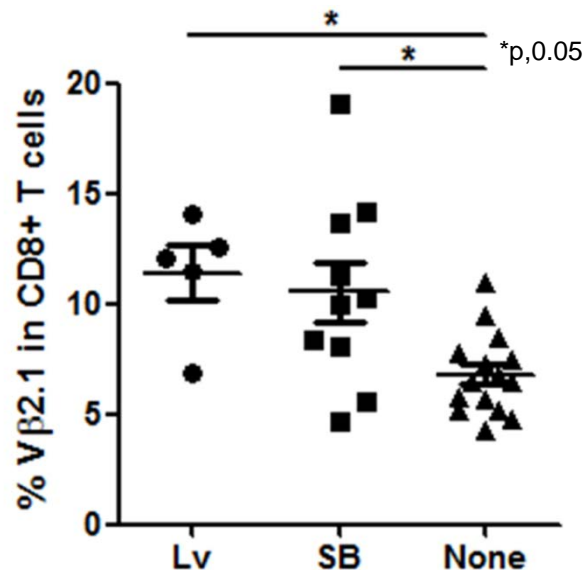
Lentiviral infection (MOI: 20)

48 – 72 h

FACS for TCR expression

**Nucleofection™:**

Co-transfection with plasmids encoding SB transposon and SB transposase (5 µg each)

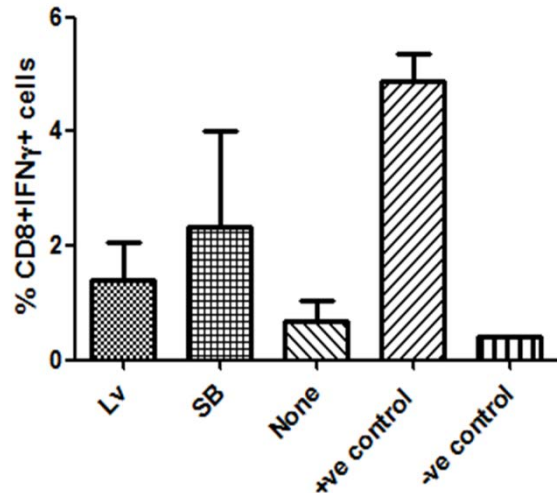


■ **Results:** Comparable levels of WT1-TCR expression for lentiviral versus SB-mediated transfer into CD8+ T cells (donor variability)

- Lentiviral transduction: 11.4% (n=5)
- SB mediated: 10.5% (n=10)

# Comparable In Vitro Functionality

- IFN $\gamma$  release of modified CD8 $^{+}$  T cells after exposure to
  - a WT1 peptide
  - anti-CD3 Ab (positive control)
  - irrelevant peptide (negative control)



## ■ Results:

- LV transduction: 1.4% of all CD8 $^{+}$  IFN $\gamma$  $^{+}$  cells (= 28% of WT1 TCR-positive cells)
- SB mediated: 2.3% of all CD8 $^{+}$  IFN $\gamma$  $^{+}$  cells (= 57% of WT1 TCR-positive cells)

# Conclusion

- Additional results (not shown here):
  - Confirmation of in vivo functionality of SB modified murine T cells in transgenic mice
  - Similar number of integration sites ( $n \geq 150$ ) for both LV and SB, but integration within genes was higher with LV (70.8%) than with SB100X/transposon (40.2%)
- **Conclusion:** SB-mediated transfer of antigen-specific T cell receptor into T cells using Nucleofection™
  - Offers a flexible pathway for rapid evaluation of different receptor configurations
  - May allow – after further optimization and adaptation to GMP conditions – for therapeutic applications to be explored in early phase clinical studies

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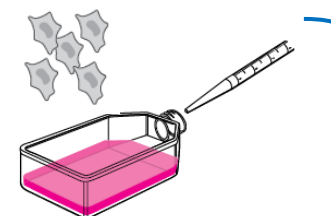
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# Things to Consider For Optimal Nucleofection™ Results

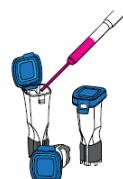
Low passage number  
Log growth phase  
No contamination  
Donor differences  
Minimize physical stress

Highly purified, endotoxin-free  
Low DNA amounts (or mRNA)

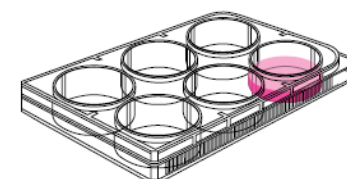
Equilibrate to RT  
Minimize incubation with cells



Use optimized conditions



Fresh medium at 37 °C gentle  
seeding  
No repeated aspiration  
Wait at least 2-4 h before  
adding stimulants

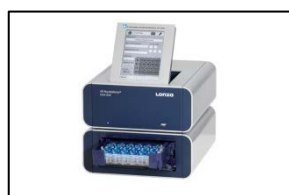


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# Nucleofection™ Portfolio

## Tailored to Your Needs



Device	4D-Nucleofector™ X Unit	4D-Nucleofector™ Y Unit	96-Well Shuttle™ Add-on	HT Nucleofector™ System	Nucleofector™ 2b Device
Throughput	Low (1-16)	Low (24)	Medium (96)	High (384)	Very low (1)
Format	Suspension	Adherent	Suspension	Suspension	Suspension
Reaction Volume	100 µl and 20 µl	350 µl	20 µl	20 µl	100 µl
Electrode Material	Conductive polymer	Conductive polymer	Conductive polymer	Conductive polymer	Aluminum
Cell Numbers	20 µl: 10 <sup>4</sup> to 10 <sup>6</sup> 100 µl: 10 <sup>5</sup> to 10 <sup>7</sup>	10 <sup>4</sup> to 10 <sup>5</sup>	10 <sup>4</sup> to 10 <sup>6</sup>	10 <sup>4</sup> to 10 <sup>6</sup>	10 <sup>5</sup> to 10 <sup>7</sup>



# 4D-Nucleofector™ System

## Consumables Tailored for Your Application

100 µl Nucleocuvette™



$10^5 - 10^6$  cells

Suspension Nucleofection™

20 µl Nucleocuvette™ Strip



$10^4 - 10^6$  cells

24-well Dipping Electrode



Adherent Nucleofection™

### Benefit from

- Transfer of conditions from 20 µl to 100 µl
- Use of Conductive Polymer instead of metal electrodes
- Transfection cells in adherence

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## Nucleofection™ of Immune Cells

Benefit from	
High efficiency combined with high viability/functionality	<ul style="list-style-type: none"> <li>– Suited for notoriously hard-to-transfect cells, like primary blood cells or suspension cell lines</li> <li>– Up to 95% transfection efficiency with DNA or 99% with siRNA</li> <li>– No metal ion release with conductive polymer electrode platforms</li> </ul>
High application flexibility	<ul style="list-style-type: none"> <li>– Same conditions for various substrates (DNA, RNA, siRNA etc.)</li> <li>– Various platforms for different cell numbers or throughput</li> </ul>
Ready-to-use, proven technology	<ul style="list-style-type: none"> <li>– 40+ Optimized Protocols for blood/immune cells</li> <li>– 900+ immunology related publications</li> </ul>

# Your Lonza Immunology Tool Kit

Primary Cells and Media	Transfection	Cell Analysis
<ul style="list-style-type: none"> <li>■ Poietics™ Primary Hematopoietic Cells (bone marrow, cord blood, CD34+)</li> <li>■ Chemically defined, serum-free media (e.g. X-VIVO™)</li> <li>■ BioWhittaker™ Classical Media (e.g. DMEM, RPMI)</li> </ul>	<ul style="list-style-type: none"> <li>■ Nucleofector™ Technology with optimized protocols for primary human or mouse cells, e.g. <ul style="list-style-type: none"> <li>■ T cells</li> <li>■ B cells</li> <li>■ Macrophages</li> <li>■ Monocytes</li> <li>■ CD34+ cells</li> <li>■ Dendritic cells</li> </ul> </li> <li>■ and numerous cell lines, e.g. <ul style="list-style-type: none"> <li>■ Jurkat</li> <li>■ K562</li> <li>■ THP-1</li> <li>■ HL-60</li> <li>■ U937</li> <li>■ .....</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>■ ViaLight™ or ToxiLight™ Cell Viability and Toxicity Assays</li> <li>■ MycoAlert™ Assay for mycoplasma detection in 20 min</li> <li>■ Precast gels for nucleic acid or protein electrophoresis</li> </ul>

# Sources of Information

## Our Online Databases

- Citations: <http://www.lonza.com/citations>
- Cell Transfection: <http://www.lonza.com/celldatabase>
- Optimized Protocols: <http://www.lonza.com/protocols>

## Transfection Experts

- Scientific Support Team EU: +32 87 321 611  
[scientific.support.eu@lonza.com](mailto:scientific.support.eu@lonza.com)
- Scientific Support Team US: 800 521 0390 (toll free)  
[scientific.support@lonza.com](mailto:scientific.support@lonza.com)

# Interested in Learning More?

- Join our upcoming webinar:

## **Convenient Generation and Culture of Induced Pluripotent Stem Cells**

Slot 1: Tuesday, 24 June 2014

2 PM EDT (New York) / 11 AM PDT (Los Angeles)

Slot 2: Wednesday, 25 June 2014

10 AM CEST (Berlin) / 9 AM BST (London) / 5 PM JST (Tokyo)

- Register at: **[www.lonza.com/webinar18](http://www.lonza.com/webinar18)**



**Thank You for Your Kind Attention**