Center for Gene & Cell Therapy

Division of Molecular and Medical Genetics 分子遺伝医学分野

Professor Project Associate Professor Project Senior Assistant Professor Project Senior Assistant Professor Assistant Professor Project Assistant Professor	Takashi Okada, M.D., Ph.D. Yasushi Soda, M.D., Ph.D. Yasunari Matsuzaka, Ph.D. Yuko Nitahara-Kasahara, Ph.D. Yuji Tsunekawa, Ph.D. Hiromi Hayashita-Kinoh, Ph.D.	教 授 特任准教授 特任講師 特任 特 サ サ サ サ サ サ サ サ サ サ サ サ サ	博士(医学) 博士(医学) 博士(医学) 博士(工学) 博士(医学) 博士(医学)	岡曽松笠恒喜	田田坂原川納	尚 恭優雄裕	巳泰成子二美
Project Assistant Professor Project Assistant Professor	Hiromi Hayashita-Kinoh, Ph.D. Ken Sugo, Ph.D.	特任助教 特任助教	博士(医学) 博士(工学)	1 喜 皆	納生	裕	美健

To promote the clinical development of gene therapy in Japan, we have been developing facilities and fundamental technologies for the manufacture of viral vectors such as adeno-associated virus (AAV) vectors and lentivirus vectors under Good Manufacturing Practices (GMP) grade. We are also developing treatments for intractable rare diseases using AAV, next-generation AAV vaccines, new cancer gene therapies, and treatments for Duchenne muscular dystrophy (DMD) using mesenchymal stromal cells (MSC).

Virus vector-related technology development

Viral vector technologies have made significant advances, particularly in the development of AAV and lentiviral vectors for gene therapy applications. AAV vectors have emerged as a leading choice for gene therapy due to their safety profile and ability to target various tissues. Novel AAV variants through improved capsid engineering have shown enhanced transduction efficiency. A nanosensor-based approach has been developed to differentiate between functional and faulty AAV vectors at the single-particle level, addressing manufacturing challenges. Significant progress has been made in AAV vector technology, particularly in manufacturing processes and applications. As for purification techniques, the combination of ultracentrifugation and ion exchange chromatography has enhanced vector purity for clinical applications. These advances in AAV vector technology are paving the way for more efficient and targeted gene therapies, with applications ranging from neurological disorders to infectious diseases.

Development of next-generation AAV vaccines

Next-generation vaccine development focuses on combining AAV and extracellular vesicle (EV) technologies to create hybrid vectors called vexosomes. These innovative vaccines aim to overcome the limitations of traditional approaches and offer improved efficacy against SARS-CoV-2 infection, as well as various other diseases, including cancer and emerging infectious diseases. Vexosomes are hybrid vectors that combine the advantages of both AAVs and EVs. AAVs provide long-term gene expression and minimal pathogenicity. EVs offer natural infection-mimicking properties and enhanced immune system interaction. This combination results in a more effective and targeted vaccine delivery system. Vexosomes can efficiently encapsulate and deliver AAV, improving antigen presentation. The hybrid nature of vexosomes can elicit stronger humoral and cellular immune responses. EV-based vaccines carrying the SARS-CoV-2 spike protein have demonstrated robust neutralizing antibody production and T cell responses in animal models. While vexosomes have great potential, several challenges need to be addressed. We are exploring methods to increase the efficiency of EV production and AAV encapsulation. We are also developing consistent and cost-effective manufacturing processes for clinical applications.

Novel treatment for DMD with MSCs

MSCs have emerged as a promising novel treatment for DMD. MSCs offer several potential benefits for DMD patients, including muscle regeneration, anti-inflammatory effects, and paracrine signaling. MSCs can differentiate into muscle cells, potentially replacing damaged dystrophin-expressing cells and improving muscle function. In addition, MSCs secrete anti-inflammatory cytokines that can modulate the immune response, reducing inflammation and protecting muscle tissue from further damage. MSCs also secrete bioactive molecules that promote tissue repair and regeneration, enhancing the survival and function of existing muscle cells. Several clinical trials are evaluating the safety and efficacy of MSC-based therapies for DMD. Early-phase trials have shown promising results, with patients exhibiting improved muscle strength, reduced fibrosis, and improved quality of life. To date, we have developed a human amnion-derived mesenchymal stromal cell (hAMSC) therapy for the treatment of DMD in collaboration with Kaneka Corporation, which has recently started a clinical trial. While MSC therapy shows significant promise for DMD treatment, challenges still remain, including ensuring consistent cell production, preventing immune rejection, and maximizing cell engraftment and survival in dystrophic muscle. Ongoing research aims to address these hurdles and enhance the potential of MSCs to effectively treat DMD.

Development of gene therapy using lentiviral vectors

In recent years, ex vivo gene therapy, chimeric antigen receptor (CAR) T-cell therapy has been approved for the treatment of hematological malignancies, including leukemia and malignant lymphoma, and its use is increasing due to its high efficacy. CAR-T cells are genetically modified T cells that bind and kill leukemia cells via the transduced CAR and mainly produced using lentiviral vectors. We are working to develop next-generation CAR immune cell therapy by overcoming the problems of current autologous CAR-T cell therapy, such as insufficient persistence in the body, long production time, and low efficacy against solid tumors. In the context of in vivo gene therapy for genetic diseases, lentiviral vectors that enable long-term stable gene expression are also attracting attention. Our laboratory is utilizing our expertise in optimizing AAV vector production to develop a method for producing lentiviral vectors that can be administered in vivo.

Publications

- Honda Y, Nagao S, Kinoh H, Liu X, Matsudaira N, Dirisala A, Nitta-Matsumoto S, Nomoto T, Hayashita-Kinoh H, Miura Y, Okada T, Nishiyama N. Adeno-Associated Virus Self-Assembled with Tannic Acid and Phenylboronic Acid-Polymers to Evade Neutralizing Antibodies and Reduce Adverse Events. *ACS Nano* 2025 Feb 3. doi: 10.1021/acsnano .4c11085. Online ahead of print.
- Nakamura N, Jo T, Arai Y, Kitawaki T, Nishikori M, Mizumoto C, Kanda J, Yamashita K, Nagao M, Takaori-Kondo A. Severe cases of local cytokine release syndrome (CRS); craniocervical edema soon after chimeric antigen T-cell (CAR-T) therapy. Oxf Med Case Reports. 2025 Jan 18;2025(1):omae164. doi: 10.1093/omcr/omae164. PMID: 39839700; PM-CID: PMC11748437.
- Nakamura N, Jo T, Arai Y, Kitawaki T, Nishikori M, Mizumoto C, Kanda J, Yamashita K, Nagao M, Takaori-Kondo A. Increased relative eosinophil counts portend neck oedema after chimeric antigen receptor-T therapy. *Br J Haematol*. 2025 Jan 6. doi: 10.1111/bjh.19992. Epub ahead of print. PMID: 39761673.

- Tsutsui M, Tsunekawa Y, Wada M, Arima A, Onodera A, Nishina M, Nagoya M, Baba Y, Kawai T, Okada T. Enhanced Discriminability of Viral Vectors in Viscous Nanopores. *Small Methods*. 2025 Jan 2:e2401321. doi: 10.1002/smtd.202401321. Online ahead of print. PMID: 39743980
- Sukegawa M, Miyagawa Y, Kuroda S, Yamazaki Y, Yamamoto M, Adachi K, Sato H, Sato Y, Taniai N, Yoshida H, Umezawa A, Sakai M, Okada T. Mesenchymal stem cell origin contributes to the antitumor effect of oncolytic virus carriers. *Mol Ther Oncol.* 32(4):200896. doi: 10.1016/j.omton.2024.200896. eCollection 2024 Dec 19.
- Kardani K, Ghouse SM, Jabbar MAD, Rajasubramanian N, Gil JS, Stemmer-Rachamimov A, Soda Y, Martuza RL, Hara T, Wakimoto H, Rabkin SH. Immunocompetent murine glioblastoma stem-like cell models exhibiting distinct phenotypes. *Neurooncol Adv*. 2024 Dec 7;7(1):vdae215. doi: 10. 1093/noajnl/vdae215. eCollection 2025 Jan-Dec. PMID: 39896074

Nakamura N, Kanda J, Kondo T, Kitano T, Ikeda T,

Imada K, Takaya R, Kubo T, Mitsuyuki S, Oka S, Yonezawa A, Takeoka T, Akasaka T, Hishizawa M, Yago K, Tsunemine H, Watanabe M, Itoh M, Takaori-Kondo A; Kyoto Stem Cell Transplantation Group (KSCTG). Comparison of methotrexate dosing protocols for graft-versus-host disease prophylaxis after unrelated hematopoietic stem cell transplantation. *Cytotherapy*. 2024 Nov 17:S1465-3249 (24)00935-6. doi: 10.1016/j.jcyt.2024.11.009. Epub ahead of print. PMID: 39652019.

- Onishi A, Tsunekawa Y, Mandai M, Ishimaru A, Ohigashi Y, Sho J, Yasuda K, Suzuki K, Izpisua Belmonte JC, Matsuzaki F, Takahashi M. Optimization of HITI-Mediated Gene Insertion for Rhodopsin and Peripherin-2 in Mouse Rod Photoreceptors: Targeting Dominant Retinitis Pigmentosa. *Invest Ophthalmol Vis Sci*. 65(13):38. doi: 10.1167/iovs.65.13.38. 2024 Nov 4.
- Hamada R, Arai Y, Kitawaki T, Nakamura N, Murao M, Matsushita M, Miyasaka J, Asano T, Jo T, Nishikori M, Kanda J, Mizumoto C, Yamashita K, Ikeguchi R, Takaori-Kondo A. Fluctuation of physical function during chimeric antigen receptor T-cell therapy during rehabilitation intervention: Real-world data and risk factor analyses. *EJHaem*. 2024 Nov 4;5(6):1252-1259. doi: 10.1002/jha2.1043. PMID: 39691237; PMCID: PMC11647737.
- Nakamura N, Tsunemine H, Ikunari R, Sakai T, Arima N. COVID-19 antibody titers after tixagevimab-cilgavimab injection in patients with hematologic diseases; a single-center, prospective study. *Leuk Lymphoma*. 2024 Aug;65(8):1117-1126. doi: 10.1080/10428194.2024.2343519. Epub 2024 Apr 16. PMID: 38626450.
- Nakamura N, Ikunari R, Tanaka Y, Tsunemine H, Takeda J, Arima N. Pathogenic TNFRSF13B Variant in an Adult Japanese Patient with Common Variable Immunodeficiency. *Intern Med.* 2024 Jul 11. doi: 10.2169/internalmedicine.4057-24. Epub ahead of print. PMID: 38987180.

Nitahara-Kasahara Y, Posadas-Herrera G, Hirai K,

Oda Y, Snagu-Miyamoto N, Yamanashi Y, Okada T. Characterization of disease-specific alterations in metabolites and effects of mesenchymal stromal cells on dystrophic muscles. *Front Cell Dev Biol*. (section Stem Cell Research) 12:1363541 doi: 10. 3389/fcell.2024.1363541. 2024 Jun 14.

- Nakamura N, Yamamoto N, Kondo T, Matsumoto M, Ikunari R, Sakai T, Tanaka Y, Tsunemine H, Takeda J, Kanda J, Nannya Y, Ogawa S, Takaori-Kondo A, Arima N. Sustained remission after cord blood transplantation for breast cancer with lung metastases and myelodysplastic syndrome. *Int J Hematol.* 2024 Jun;119(6):762-767. doi: 10.1007/s12185-024-03762-8. Epub 2024 Mar 25. PMID: 38523199.
- Tsutsui M, Wada M, Arima A, Tsunekawa Y, Sasaki T, Sakamoto K, Yokota K, Baba Y, Kawai T, Okada T. Identifying viral vector characteristics by nanopore sensing. ACS Nano. Jun 18;18(24):15695-15704. doi: 10.1021/acsnano.4c01888. Epub 2024 Jun 5.
- Kurosawa Y, Tsunekawa Y, Wada M, Aizen Y, Nitahara-Kasahara Y, Okada T. Purification of adenoassociated viral vector serotype 9 using ceramic hydroxyapatite chromatography and its analysis. *Curr Protoc.* 4(6):e1068. doi: 10.1002/cpz1.1068. 2024 Jun.
- Nakamura N, Jo T, Arai Y, Kitawaki T, Nishikori M, Mizumoto C, Kanda J, Yamashita K, Nagao M, Takaori-Kondo A. Utilizing red blood cell distribution width (RDW) as a reliable biomarker to predict treatment effects after chimeric antigen receptor T cell therapy. *Clin Exp Med*. 2024 May 21;24(1):105. doi: 10.1007/s10238-024-01373-5. PMID: 38771501; PMCID: PMC11108946.
- Nakamura N, Tsunemine H, Ikunari R, Tanaka Y, Arima N. Red blood cell distribution width is a useful biomarker to predict bleeding and thrombosis risks in patients with immune thrombocytopenic purpura. *EJHaem*. 2024 Apr 30;5(3):431-439. doi: 10.1002/jha2.897. PMID: 38895062; PMCID: PMC 11182403.