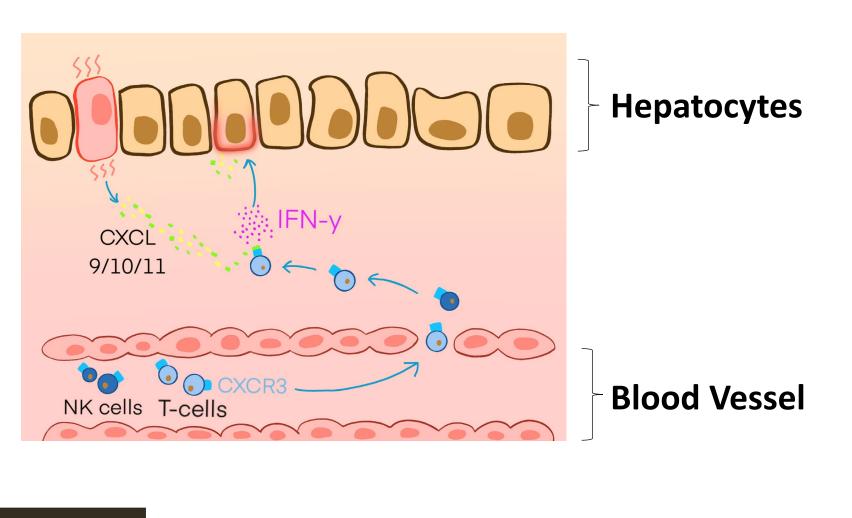
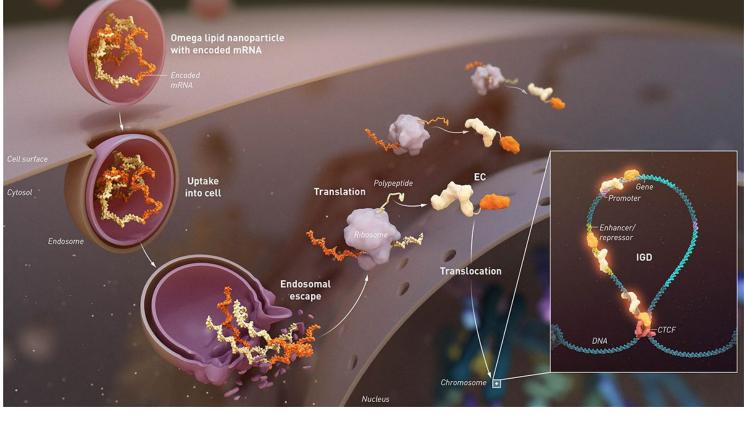
Targeting CXCL9/CXCL10/CXCL11 Using Novel Epigenomic Controllers for the **Treatment of Inflammatory Liver Disease**

Background

Hepatitis is a broad pathophysiological feature common to acute and chronic liver diseases characterized by activation of inflammatory mechanisms, including increased interferon gamma (IFNG) expression. IFNG is a pleotropic proinflammatory cytokine released by immune cells that contributes to liver injury by stimulating the release of the chemokines CXCL9, CXCL10 and CXCL11 from hepatocytes (Figure 1). CXCL9, CXCL10 and CXCL11 bind to the CXCR3 receptor on T cells, promoting T cell recruitment to the site of inflammation. Through our OMEGA platform, we are able to rapidly develop programmable mRNA medicines called Epigenomic Controllers (ECs) to precisely tune gene expression at the pretranscriptional level (Figure 2). ECs are mRNA therapeutics delivered in tissue-specific lipid nanoparticles (LNPs) that site-specifically modulate epigenetic state. Using ECs to simultaneously target all three CXCL9, CXCl10 and CXCL11 genes in a liver-specific manner represents a novel and promising strategy for treatment of inflammatory liver disease.

Figure 1. Proposed mechanism of hepatitis. Graphical representation of IFNG stimulated hepatocytes releasing CXCL 9, CXCL10 and CXCL11 leading to recruitment of immune cells to the liver, a common process in inflammatory liver diseases.





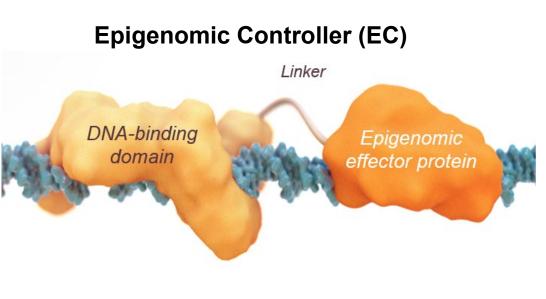
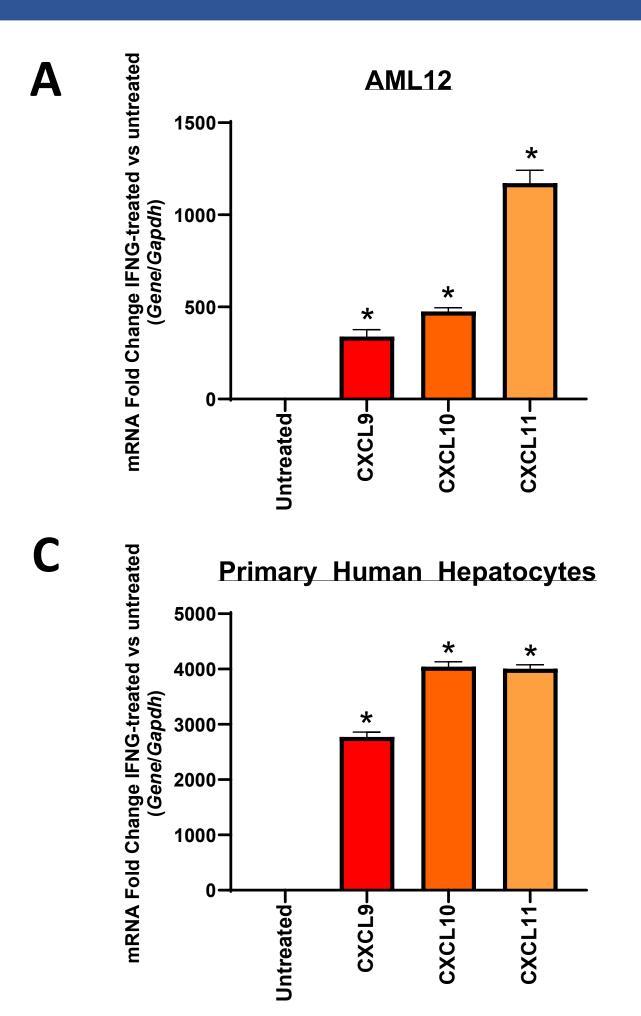


Figure 2. Structure, mechanism of action and design of ECs.

The multigenic Insulated Genomic Domain (IGD) and component sequences driving epigenetic control of the CXCL9, CXCL10 and CXCL11 genes were interrogated and ECs were designed to modulate their expression simultaneously in a multiplexed fashion.

IFNG treatment increased CXCL9, CXCL10 and CXCL11 mRNA expression in hepatocyte cell lines



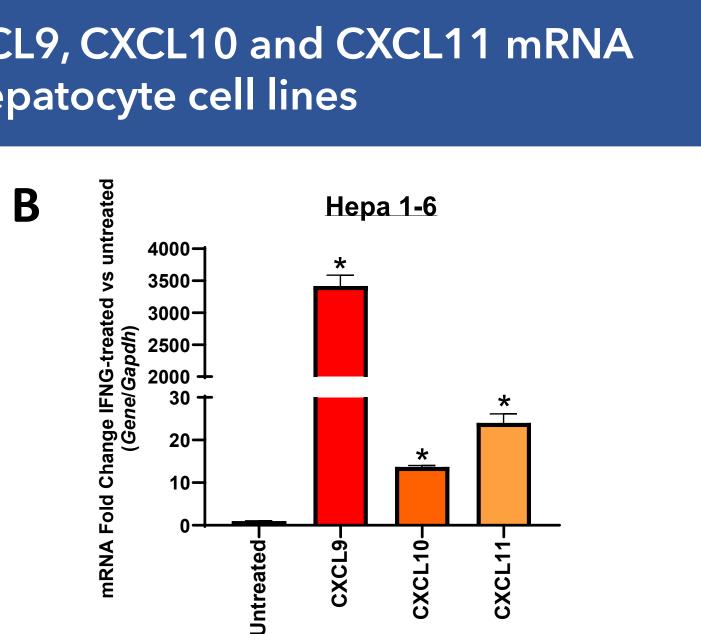


Figure 3: qPCR analysis from IFNGstimulated and human murine lines. Stimulation of hepatocyte cell murine hepatic AML12(A), Hepa1-6(B) and primary human hepatocytes(C) with IFNG resulted in significantly increased CXCL10 and CXCL11 mRNA CXCL9, expression. *p<0.05 vs untreated.

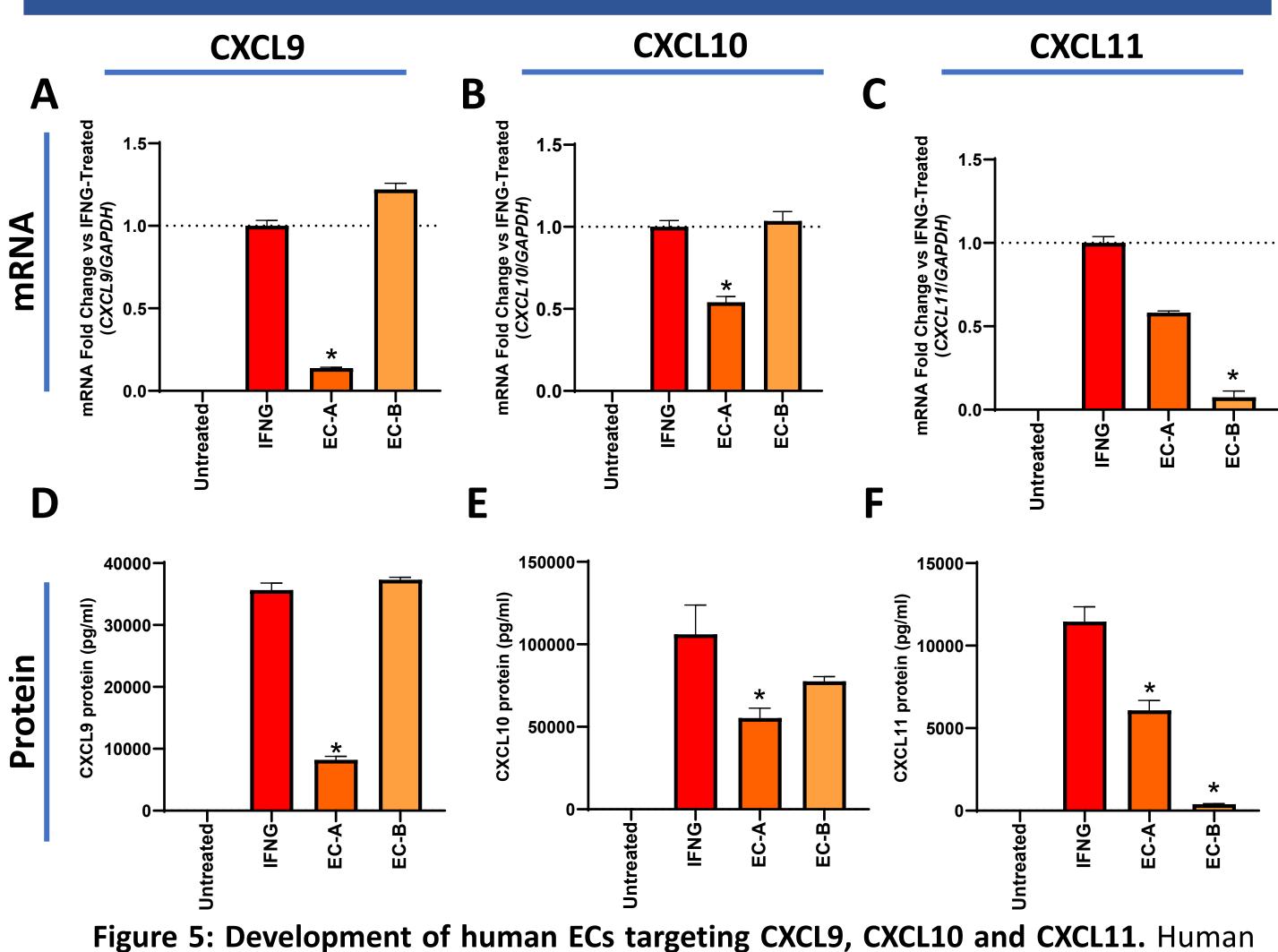
Christopher E. Pedigo, Wanzhu Zhao, Yoseph Kassa, Justin Chen, Jeremiah Farelli, Amy McCurley, Joseph Newman, Charles O'Donnell, Thomas McCauley Omega Therapeutics, Cambridge, MA, USA

Mouse ECs individually reduce CXCL9, CXCL10 and CXCL11 expression in mouse hepatocyte cell lines

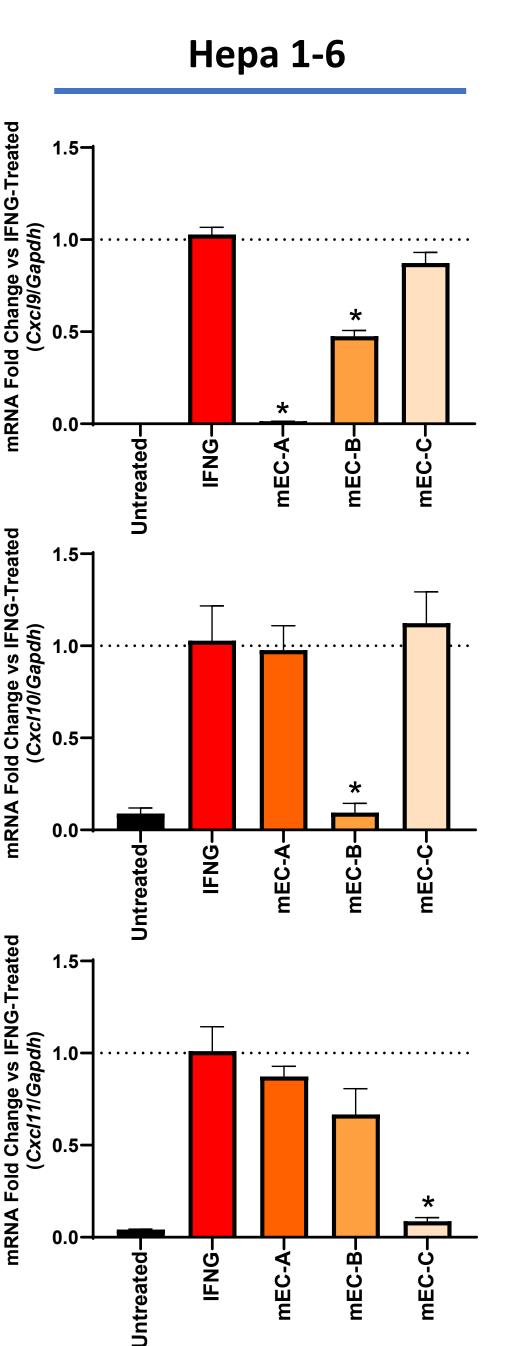
AML12 Α CXCL9 -0.5 کُ رَ 10 × 0.5 CXCL11 <u>ک</u> 0.5

Figure 4: Development of mouse ECs targeting CXCL9, CXCL10 and CXCL11. Mouse ECs (mEC) reduced CXCL9, CXCL10 and CXCL11 mRNA expression respectively in AML12 (A,B,C) and Hepa 1-6(D,E,F) following IFNG stimulation. *p<0.05 vs IFNG.

Human ECs reduce CXCL9, CXCL10 and CXCL11 expression in primary human hepatocytes



ECs reduced CXCL9, CXCL10 and CXCL11 mRNA expression (A) and protein levels in cell culture supernatants (B) following IFNG stimulation. *p<0.05.



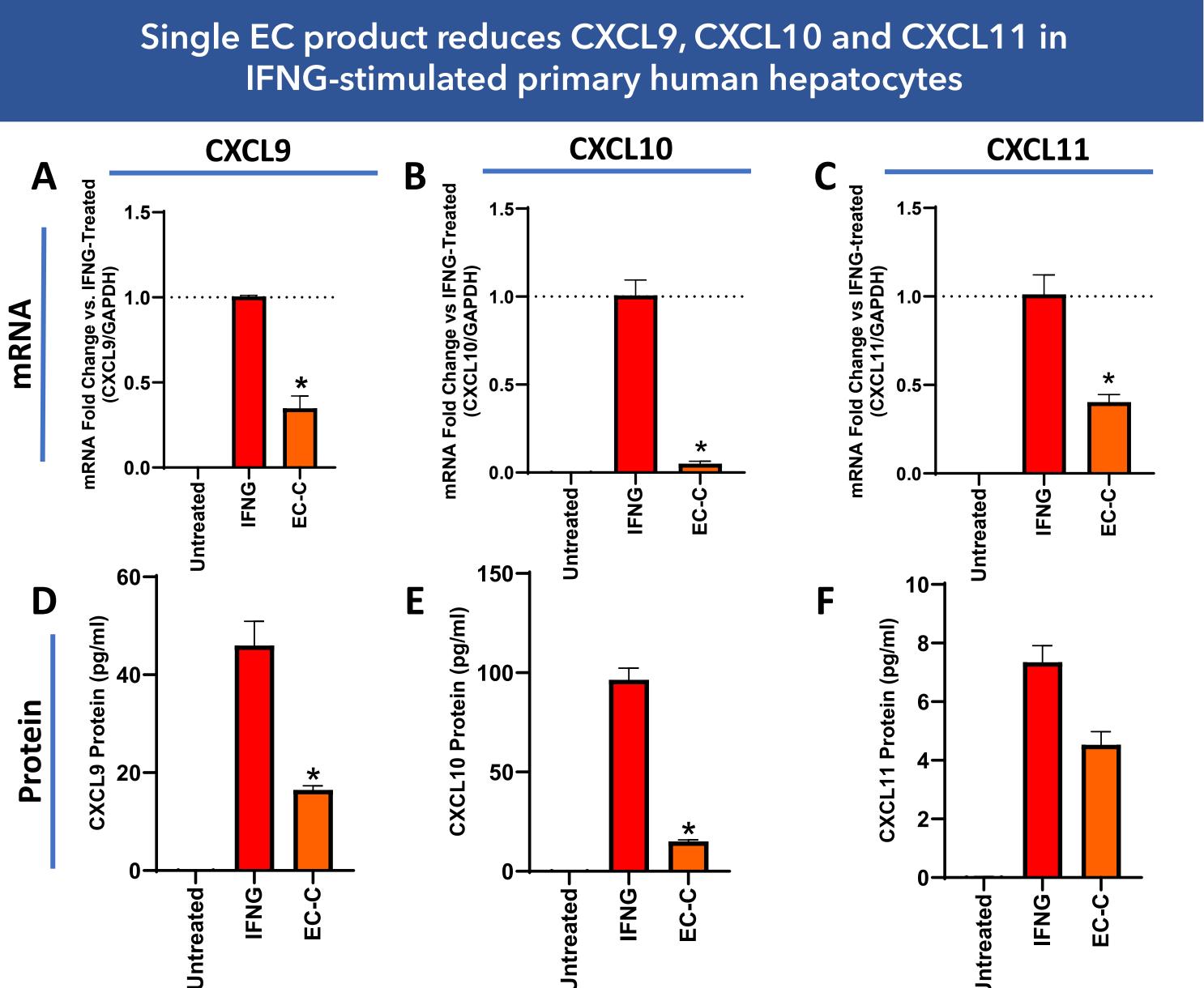
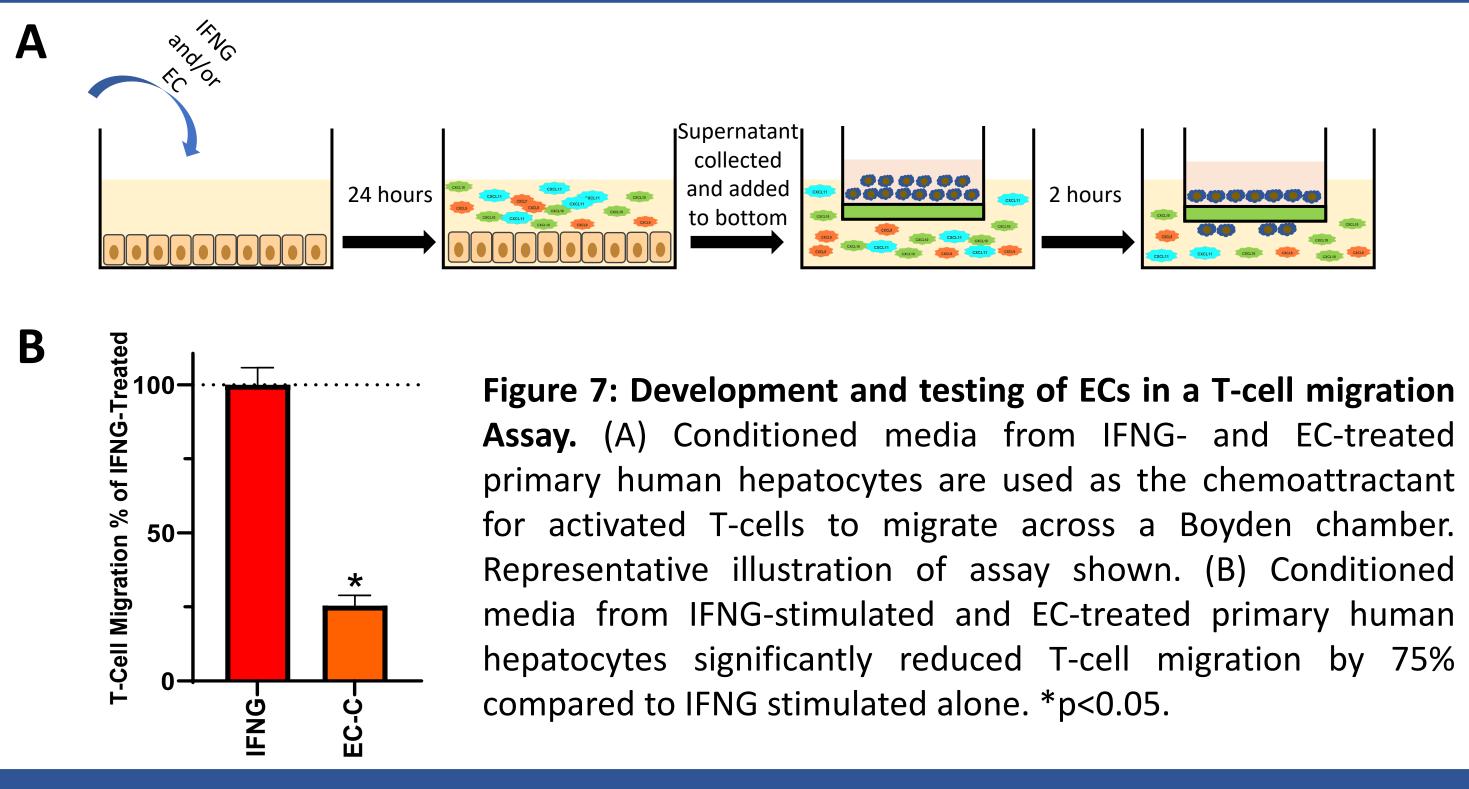


Figure 6: Development of a single EC product that simultaneously targets CXCL9, CXCL10 and **CXCL11.** Human EC product reduced CXCL9, CXCL10 and CXCL11 mRNA expression (A) and protein levels in cell culture supernatants (B) of IFNG-stimulated primary human hepatocytes. *p<0.05.

Novel ex vivo assay demonstrates reduced T-cell migration due to ECtreated human hepatocyte media



In summary, we demonstrate development of a rationally designed and engineered epigenomic controller (EC) which potently reduces CXCL9, CXCL10 and CXCL11 expression in hepatocytes leading to a significant reduction in T-cell migration. Mechanistically, our data demonstrate that we can reduce CXCL9, CXCL10 and CXCL11 expression following IFNG stimulation in multiple mouse liver cell lines and in primary human hepatocytes, showing our platform approach can target mouse and human IGDs. Further, we developed a single EC that was able to potently downregulate all three chemokines (CXCL9, CXCL10 and CXCL11) in the IGD simultaneously. Robust, multiplexed downregulation of this IGD with an EC significantly reduced T-cell migration, a critical driver of inflammation-induced liver injury. Overall, our data support that liver-specific multiplexed targeting of CXCL9, CXCL10 and CXCL11 via a programmable epigenomic mRNA therapy may offer a novel approach for treatment of inflammatory liver diseases.

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Figure 7: Development and testing of ECs in a T-cell migration hepatocytes significantly reduced T-cell migration by 75%

Summary