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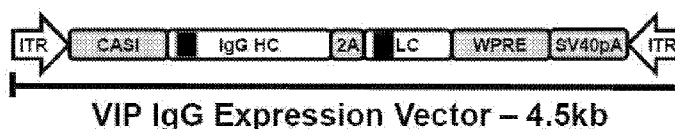
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(54) Title: DELIVERY OF PROTEINS USING ADENO-ASSOCIATED VIRUS (AAV) VECTORS

Figure 1
E.



(57) Abstract: Disclosed herein are compositions, systems and methods for delivery of proteins of interest using adeno-associated virus (AAV) vectors. AAV vectors comprising 5' and 3' inverted terminal repeats (ITR), a promoter, a restriction site for insertion of a polynucleotide and a posttranscriptional regulatory element are disclosed. The use of AAV vectors for the expression of neutralizing antibodies is further disclosed.

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PATENT

**DELIVERY OF PROTEINS USING ADENO-ASSOCIATED VIRUS (AAV)
VECTORS**

RELATED APPLICATIONS

[0001] The present application claims priority under 35 U.S.C. § 119(e) to U.S. Provisional Application Nos. 61/445,449, filed February 22, 2011; 61/550,123, filed October 21, 2011; and 61/598,728, filed February 14, 2012. These priority applications are herein expressly incorporated by reference in their entireties.

STATEMENT REGARDING FEDERALLY SPONSORED R&D

[0002] This invention was made with government support under HHSN266200500035C awarded by the National Institutes of Health. The government has certain rights in the invention.

REFERENCE TO SEQUENCE LISTING

[0003] The present application is being filed along with a Sequence Listing in electronic format. The Sequence Listing is provided as a file entitled SEQLISTING.TXT, created February 21, 2012, which is 148 Kb in size. The information in the electronic format of the Sequence Listing is incorporated herein by reference in its entirety.

BACKGROUND

Field of the Invention

[0004] The present application relates generally to the fields of immunology and gene delivery. More particularly, the application relates to compositions, systems and methods for producing proteins of interest, such as antibodies.

Description of the Related Art

[0005] Despite tremendous efforts, no effective vaccine has been developed for human immunodeficiency virus (HIV) so far. Many antibodies have been identified as capable of neutralizing most circulating HIV strains. Although substantial effort has focused

on the design of immunogens capable of eliciting antibodies *de novo* that would target similar epitopes, it remains uncertain whether a conventional vaccine will be able to elicit analogues of the existing broadly neutralizing antibodies. As an alternative to immunization, the vector-mediated gene transfer described herein can be used to engineer secretion of the existing broadly neutralizing antibodies into the circulation.

[0006] Existing methods aimed at producing genetically encoded therapeutic proteins result in only limited levels of gene expression. For example, previous efforts to engineer humoral immunity using adeno-associated virus (AAV)-based vectors resulted in modest antibody production (Lewis *et al.*, J. Virol. 76: 8769–8775 (2002)), which was subsequently improved through the use of alternative capsids (Fang *et al.* Nature Biotechnol., 23: 584–590 (2005)) and self-complementary AAV (scAAV) vectors (McCarty., Mol. Ther., 16: 1648–1656 (2008)) that increase expression at the expense of carrying capacity. Recently, scAAV vectors were used to direct expression of simian immunodeficiency virus (SIV)-neutralizing immunoadhesins consisting of small, artificially fused antibody fragments (Johnson *et al.*, Nature Med., 15(8): 901–906 (2009)). However, the efficacy of this prophylaxis was limited by an endogenous immune response directed against the immunoadhesin proteins. In addition, the lack of effectiveness of the existing AAV-based methods can be traced to the inability of AAV vectors to transmit sequences greater than approximately 4800 base pairs in length. Dong *et al.*, Human Gene Therapy, 7:2101-2112 (1996). This limitation of AAV vectors has made it difficult to design vectors containing both a gene encoding a therapeutic protein as well as expression promoting elements to allow for high levels of production, particularly *in vivo*. Therefore, there is a pressing need for the development of compact vectors and systems capable of efficiently expressing genes.

SUMMARY

[0007] Some embodiments disclosed herein provide a viral vector, where the viral vector comprises: a 5' inverted terminal repeat (ITR) of adeno-associated virus (AAV) and a 3' AAV ITR; a promoter; a restriction site downstream of the promoter to allow insertion of a polynucleotide encoding one or more proteins of interest, and a posttranscriptional regulatory element downstream of the restriction site, where the promoter, the restriction site

and the posttranscription regulatory element are located downstream of the 5' AAV ITR and upstream of the 3' AAV ITR.

[0008] In some embodiments, the viral vector further comprises a polynucleotide inserted at the restriction site and operably linked with the promoter, where the polynucleotide comprises a coding region of a protein of interest.

[0009] In some embodiments, the polynucleotide comprises a signal peptide sequence immediately upstream of the coding region of the protein of interest. In some embodiments, the signal peptide is selected from the group consisting of a signal peptide of interferon, a signal peptide of human growth hormone, a signal peptide of erythropoietin (EPO), a signal peptide of granulocyte colony-stimulating factor (G-CSF), a signal peptide of insulin, and any combination thereof.

[0010] In some embodiments, the viral vector comprises a nucleotide sequence having at least about 70%, at least about 80%, at least about 90% sequence identity, or more to the Kozak consensus sequence.

[0011] In some embodiments, the protein of interest is selected from the group consisting of full-length antibodies, growth hormones (GHs), insulin-like growth factors (IGFs), G-CSFs, erythropoietins (EPOs), insulins, antibody Fab fragments, antibody scFV fragments, hemophilia related clotting proteins, dystrophin, lysosomal acid lipase, phenylalanine hydroxylase (PAH), glycogen storage disease-related enzymes, and any variants thereof.

[0012] In some embodiments, the protein of interest is a virus neutralizing antibody. In some embodiments, the virus neutralizing antibody is a neutralizing antibody for a human immunodeficiency virus (HIV), a hepatitis C virus (HCV), or an influenza virus. In some embodiments, the neutralizing antibody for HIV is selected from the group consisting of b12 anti-HIV antibody, 2G12 anti-HIV antibody, 4E10 anti-HIV antibody, 2F5 anti-HIV antibody, and any variant thereof. In some embodiments, the neutralizing antibody for HCV is selected from the group consisting AR3A anti-HCV antibody, AR3B anti-HCV antibody, AR4A anti-HCV antibody, and any variant thereof. In some embodiments, the neutralizing antibody for influenza virus is selected from the group consisting F10 anti-influenza antibody, CR6261 anti-influenza antibody, FI6 anti-influenza antibody, TCN32 anti-influenza antibody, and any variant thereof.

[0013] In some embodiments, the protein of interest is a neutralizing antibody for malaria.

[0014] In some embodiments, the promoter comprises cytomegalovirus (CMV) immediate early promoter, chicken beta-actin (CAG) promoter, ubiquitin C (UBC) promoter, or any variant thereof. In some embodiments, the promoter comprises a splice donor, a splice acceptor, or any variant thereof. In some embodiments, the splice donor comprises a nucleotide sequence having at least 90% sequence identity to SEQ ID NO: 5. In some embodiments, the splice acceptor comprises a nucleotide sequence having at least 90% sequence identity to SEQ ID NO: 6. In some embodiments, the promoter comprises a nucleotide sequence having at least 90% sequence identity to SEQ ID NO: 1. In some embodiments, the promoter comprises a nucleotide sequence having at least 90% sequence identity to any one of SEQ ID NOs: 2-4.

[0015] In some embodiments, the posttranscriptional regulatory element is a viral posttranscriptional regulatory element. In some embodiments, the viral posttranscriptional regulatory element is woodchuck hepatitis virus posttranscriptional regulatory element (WPRE), hepatitis B virus posttranscriptional regulatory element (HBVPRE), RNA transport element (RTE), or any variant thereof.

[0016] In some embodiments, the viral vector further comprises a transcription termination region downstream of the posttranscriptional regulatory element. In some embodiments, the transcription termination region comprises an SV40 late poly(A) sequence, a rabbit beta-globin poly(A) sequence, a bovine growth hormone poly(A) sequence, or any variant thereof.

[0017] In some embodiments, the promoter comprises an intron. In some embodiments, the intron is a synthetic intron comprising a nucleotide sequence having at least 90% sequence identity to SEQ ID NO: 8.

[0018] In some embodiments, the polynucleotide comprises a first coding region for the heavy chain variable region of an immunoglobulin and a second coding region for the light chain variable region of the immunoglobulin. In some embodiments, the first coding region and the second coding region are separated by a 2A sequence. In some embodiments, the 2A sequence is an F2A sequence.

[0019] In some embodiments, 5' of the first coding region is fused with a first signal peptide sequence and 5' of the second coding region is fused with a second signal peptide sequence. In some embodiments, the first signal peptide sequence and the second signal peptide sequence are different.

[0020] In some embodiments, the region starting from the 5' ITR and ending at the 3' ITR is at least about 2.5 kb.

[0021] Some embodiments herein provide a method for producing a protein of interest *in vivo*, where the method comprises: providing a recombinant adeno-associated virus (AAV) comprising a nucleotide sequence encoding the protein of interest; and administering the recombinant AAV to the subject, whereby the recombinant AAV expresses the antibody in the subject, wherein the nucleotide is at least about 1.4 kb.

[0022] In some embodiments, the protein of interest is an antibody. In some embodiments, the antibody is a full length antibody. In some embodiments, the antibody is selected from the group consisting of b12 anti-HIV antibody, 2G12 anti-HIV antibody, 4E10 anti-HIV antibody, 2F5 anti-HIV antibody, F10 anti-influenza antibody, FI6 anti-influenza antibody, TCN32 influenza antibody, CR6261 anti-influenza antibody, AR3A anti-HCV antibody, AR3B anti-HCV antibody, AR4A anti-HCV antibody, anti-malaria antibody, and any variant thereof.

[0023] In some embodiments, the protein of interest is expressed in the serum of the subject in the amount of at least about 9 µg/ml. In some embodiments, the protein of interest is expressed in the serum of the subject in the amount of at least about 100 µg/ml. In some embodiments, the protein of interest is expressed in the serum of the subject in the amount of at least about 500 µg/ml.

[0024] In some embodiments, the recombinant AAV is produced by providing a packaging cell line with a viral vector, helper functions for generating a productive AAV infection, and AAV cap genes, where the viral vector comprises a 5' AAV inverted terminal repeat (ITR), a 3' AAV ITR and a nucleotide sequence encoding the protein of interest; and recovering a recombinant AAV virus from the supernatant of the packaging cell line.

[0025] In some embodiments, the viral vector is the viral vector of any one of viral vectors disclosed herein.

[0026] Some embodiments disclosed herein provide a method for reducing or inhibiting the infection risk of a virus in a subject, where the method comprises: providing a recombinant adeno-associated virus (AAV) comprising a nucleotide sequence encoding a neutralizing antibody for the virus; and administering the recombinant AAV to the subject, whereby the recombinant AAV expresses the antibody in the subject.

[0027] In some embodiments, the method further comprises providing a second recombinant AAV comprising a nucleotide sequence encoding a second neutralizing antibody for the virus.

[0028] In some embodiments, the subject is a mammal. In some embodiments, the subject is a human.

[0029] In some embodiments, the neutralizing antibody is a full-length antibody.

[0030] In some embodiments, the method reduces the infection risk in the subject by at least about 5 fold as compared to the subjects without the viral vector treatment. In some embodiments, the method reduces the infection risk in the subject by at least about 20 fold as compared to the subjects without the viral vector treatment. In some embodiments, the method inhibits the viral infection in the subject.

[0031] In some embodiments, the antibody is expressed in the serum of the subject in the amount of at least about 9 µg/ml. In some embodiments, the antibody is expressed in the serum of the subject in the amount of at least about 100 µg/ml. In some embodiments, the antibody is expressed in the serum of the subject in the amount of at least about 500 µg/ml

[0032] In some embodiments, the virus is a human immunodeficiency virus (HIV), a hepatitis C virus (HCV), or an influenza virus.

[0033] In some embodiments, the neutralizing antibody is selected from the group consisting of b12 anti-HIV antibody, 2G12 anti-HIV antibody, 4E10 anti-HIV antibody, 2F5 anti-HIV antibody, F10 anti-influenza antibody, CR6261 anti-influenza antibody, TCN32 influenza antibody, FI6 anti-influenza antibody, AR3A anti-HCV antibody, AR3B anti-HCV antibody, AR4A anti-HCV antibody, and any variant thereof.

[0034] In some embodiments, the recombinant AAV is administered to the subject by intramuscular injection, intravaginal injection, intravenous injection,

intraperitoneal injection, subcutaneous injection, epicutaneous administration, intradermal administration, or nasal administration.

[0035] In some embodiments, the recombinant AAV is administered to the subject at most once every year. In some embodiments, the recombinant AAV is administered to the subject at most once every 5 years. In some embodiments, the recombinant AAV is administered to the subject at most once every 10 years.

[0036] Some embodiments disclosed herein provide a method of producing a recombinant adeno-associated virus (AAV), where the method comprises: providing a packaging cell line with a viral construct comprising 5' AAV inverted terminal repeat (ITR) and 3' AAV ITR, helper functions for generating a productive AAV infection, and AAV cap genes; and recovering a recombinant AAV virus from the supernatant of the packaging cell line.

[0037] In some embodiments, the AAV cap genes encode a capsid from serotype 1, serotype 2, serotype 4, serotype 5, serotype 6, serotype 7, serotype 8, serotype 9, or a variant thereof.

[0038] In some embodiments, the viral construct is any of the viral vectors disclosed herein.

[0039] In some embodiments, the recombinant AAV is not a self-complementary AAV (scAAV).

[0040] Some embodiments disclosed herein provide an isolated, synthetic or recombinant polynucleotide, where the polynucleotide comprises: a nucleic acid sequence having at least about 90% or more sequence identity to SEQ ID NO: 1. In some embodiments, the polynucleotide comprises a nucleotide sequence selected from SEQ ID NOs: 2-4.

BRIEF DESCRIPTION OF THE DRAWINGS

[0041] **Figure 1A** is a graph showing luciferase activities 15 weeks after intramuscular injection of 2×10^9 GC of AAV2/8 vectors expressing luciferase from a panel of promoters ($n = 2$). **Figure 1B** is a schematic presentation of an embodiment of the CASI promoter combining the CMV enhancer and chicken β -actin promoter followed by a splice donor (SD) and splice acceptor (SA) flanking the ubiquitin enhancer region. **Figure 1C** is a

graph showing luciferase activities from AAV vectors driven by CASI as compared to conventional CMV and CAG promoters 8 weeks after intramuscular injection of 1×10^9 GC of AAV2/8 encoding luciferase driven by the indicated promoter ($n = 2$). **Figure 1D** is a graph showing luciferase activities 6 weeks post-administration of CMV-driven AAV vectors with or without WPRE, terminated by the indicated polyadenylation signal ($n = 2$). **Figure 1E** is a schematic presentation of an expression cassette for antibody expression comprising the inverted terminal repeats (ITR), the CASI promoter, an IgG1 heavy chain linked to kappa light chain separated by a self-processing 2A sequence, a WPRE for improved expression, and SV40 late-polyadenylation signal. Antibody V-regions of heavy and light chains are cloned into the vector at positions indicated in filled boxes.

[0042] **Figure 2** is a schematic representation of an embodiment of the AAV vector that is within the scope of the present application.

[0043] **Figure 3A** is a bar graph showing comparison of antibody expression *in vitro* by ELISA following transfection with vectors carrying the antibody transgene shown above with standard or optimized F2A sequences that include a furin cleavage site. **Figure 3B** is a bar graph showing comparison of 4E10 antibody expression *in vitro* by ELISA following transfection with vectors carrying 4E10 with natural or human growth hormone (HGH) derived signal peptides fused to the heavy chain gene, the light chain gene or both genes. **Figure 3C** is a bar graph showing comparison of 4E10 antibody expression *in vitro* by ELISA following transfection with vectors carrying 4E10 in the standard expression cassette or a cassette in which the splice donors and acceptors were mutated to reduce the potential for extraneous splicing. **Figure 3D** is a schematic presentation of an exemplary IgG1 transgene that was optimized for expression *in vitro*. Highlighted are the heavy and light chain signal sequences (“SS”), the F2A self-processing peptide (“F2A”) and the predicted splice donor and acceptor sites (solid lines in the “Heavy Chain Constant Region” and “Kappa Constant”).

[0044] **Figure 4A-D** shows neutralization of HIV by antibodies expressed from an optimized-expression transgene: b12 (Fig. 4A), 2G12 (Fig. 4B), 4E10 (Fig. 4C) and 2F5 (Fig. 4D) ($n = 3$, RLU = Relative luciferase Units).

[0045] **Figure 5A** shows Xenogen images of a representative Rag2/ γ c mouse 15 weeks after intramuscular injection of 1×10^{10} genome copies of AAV2/8 expressing luciferase. **Figure 5B** is a graph showing quantitation of luciferase activity by Xenogen imaging of Rag2/ γ c $^{-/-}$ mice receiving intramuscular injection of 1×10^{10} or 1×10^{11} GC of AAV2/8 encoding luciferase demonstrates long-term dose-dependent expression (n = 2). **Figure 5C** is a graph showing concentration of human IgG in circulation as measured by total human IgG ELISA on serum samples taken after intramuscular injection of 1×10^{10} or 1×10^{11} GC of AAV2/8 expressing 4E10-IgG1 into Rag2/ γ c $^{-/-}$ mice (n = 2).

[0046] **Figure 6** is a plot showing quantification of human IgG by ELISA after intramuscular injection of 1×10^{11} genome copies of the optimized expression vector producing b12-IgG in either immunodeficient NOD/SCID/ γ c (NSG) and Rag2/ γ c (Rag2) or immunocompetent C57BL/6 (B6) and Balb/C mice (plot shows mean and standard error, n = 4).

[0047] **Figure 7** is a graph showing depletion of CD4 cells in HuPBMC-NSG humanized mice following HIV challenge.

[0048] **Figure 8A** is graph showing concentration of human IgG in circulation as measured by ELISA on serum samples taken 6 weeks after intramuscular injection of vector expressing either luciferase or b12-IgG (ND, not detected). **Figure 8B** shows depletion of CD4 T cells in humanized mice after intraperitoneal challenge with 10 ng p24 NL4-3 into animals that received AAV2/8 vectors expressing luciferase (left graph) or b12-IgG1 (right graph) 6 weeks earlier (n = 6).

[0049] **Figure 9** shows a comparison of protection mediated by various broadly neutralizing HIV antibodies. **Figure 9A** shows concentration of antibody in circulation as measured by total human IgG ELISA on serum samples taken after intramuscular injection of vectors expressing four broadly neutralizing HIV antibodies (n = 8). **Figure 9B** shows comparison of the relative effectiveness of four broadly neutralizing HIV antibodies in protecting huPBMC-NSG humanized mice against CD4 cell depletion after intravenous HIV challenge with 5 ng p24 NL4-3 (n = 8). **Figure 9C** shows HIV p24 detection by immunohistochemical staining of sections taken from spleens 8 weeks after challenge. Arrows indicate cells scored as positive for p24 expression. Scale bar, 40 μ m. **Figure 9D**

shows quantification of immunohistochemical staining of spleen denoting the relative frequency of p24-expressing cells in spleens of infected animals. ND, not detected. Asterisks indicate outcomes significantly different from luciferase control mice versus mice expressing antibodies by two-tailed t-test ($n = 4-6$) ** $P, 0.01$, *** $P, 0.0001$. Figs. 9A-B show mean and s.e.m.; Fig. 9D shows mean and s.d.

[0050] **Figure 10** shows serum concentrations of total human IgG and gp120 binding IgG prior to HIV challenge. **Figure 10A** is a graph showing concentration of total human antibody produced by engrafted cells and VIP as measured by human IgG ELISA on serum samples taken 5 weeks after intramuscular injection of vectors expressing either luciferase or b12 antibody and 3 weeks after adoptive transfer of human PBMCs and the day prior to IV HIV challenge ($n = 8$). **Figure 10B** is a graph showing concentration of antibody at the same time point quantified using a gp120-specific ELISA to measure the concentration of antibody specific for HIV ($n = 8$).

[0051] **Figure 11** are graphs showing b12 antibody-mediated CD4 cell protection over time. CD4 cell depletion in huPBMC-NSG humanized mice as a result of intravenous challenge with the dose of NL4-3 indicated on the far right. Mice expressing luciferase (left plots) were susceptible to CD4 cell loss, whereas those expressing b12 (right plots) demonstrated protection from HIV at all doses ($n = 8$).

[0052] **Figure 12A** is a plot showing b12 expression over time as a function of dose as determined by total human IgG ELISA on serum samples taken following AAV administration ($n = 8$). Mice receiving luciferase-expressing vector exhibited no detectable human antibodies ($n = 12$). **Figure 12B** is a graph showing concentration of b12 in serum one day prior to challenge, 3 weeks after adoptive transfer of human PBMCs and 15 weeks after intramuscular administration of the indicated dose of AAV as determined by a gp120-specific ELISA to measure the fraction of antibodies capable of binding HIV ($n = 8-12$). **Figure 12C** is a plot showing CD4 cell depletion in HuPBMC-NSG humanized mice as a result of intravenous challenge with 10ng of NL4-3 into animals expressing a range of b12 demonstrating the minimum dose of antibody necessary to protect against infection. Figs. 12A and 12C show mean and standard error, and Fig. 12B shows individual animals and mean ($n = 8-12$).

[0053] **Figure 13A** is a graph showing VRC01 expression over time as a function of dose as determined by total human IgG ELISA on serum samples taken after AAV administration ($n = 8$). Mice receiving luciferase-expressing vector exhibited no detectable human antibodies ($n = 12$). **Figure 13B** is a graph showing concentration of VRC01 in serum 1 day before challenge, 3 weeks after adoptive transfer of human PBMCs and 15 weeks after intramuscular administration of the indicated dose of AAV, as determined by a gp120-specific ELISA to measure the fraction of antibodies capable of binding HIV ($n = 8-12$). **Figure 13C** is a graph showing CD4 cell depletion in huPBMC-NSG humanized mice as a result of intravenous challenge with 10 ng of NL4-3 into animals expressing a range of VRC01, demonstrating the minimum dose of antibody necessary to protect against infection. Figs. 13A and 13C show mean and standard error, and Fig. 13B shows individual animals and mean ($n = 8-12$).

[0054] **Figure 14** is a graph showing quantitation of human IgG in serum by ELISA following intramuscular injection of 1×10^{11} genome copies (GC) of recombinant AAV viruses expressing unmodified b12, F10, or CR6261 antibodies in Balb/C mice (plot shows mean and standard error, $n = 8$).

[0055] **Figure 15** shows the increased expression of modified F10 and CR6261 antibodies. **Figure 15A** is a bar graph comparing b12 antibody with F10 and CR6261 WT sequences as compared to chimeric constructs consisting of F10 or CR6261 heavy chain with b12 light chain. **Figure 15B** is a table listing various modified b12 and/or 4E10 antibody light chain used in the AAV vector. **Figure 15C** is bar graph comparing the expression level of F10 antibody light chain variants consisting of F10 VL sequences fused to b12 and/or 4E10 antibody light chain sequences. **Figure 15D** is bar graph comparing the expression level of CR6261 antibody light chain variants consisting of CR6261 VL sequences fused to b12 and/or 4E10 antibody light chain sequences.

[0056] **Figure 16A** is a graph showing quantitation of human IgG in serum by ELISA following intramuscular injection of 1×10^{11} GC of the optimized expression vector producing b12, F10, or CR6261 antibodies in Balb/C mice (plot shows mean and standard error, $n = 6$). **Figure 16B** is a plot showing neutralizing activity of sera taken from mice given VIP expressing b12, F10, or CR6261 antibodies as measured against five strains of

influenza (PR/8, CA/09, SI/06, VN/04, JP/57) using a GFP reporter assay. Values are calculated as the fold dilution of serum that resulted in 50% neutralization of influenza infection. Dashed line represents the lowest dilution tested (20-fold) and values below this line are extrapolated from the curve fit or are plotted along the axis to represent no detectable neutralization activity.

[0057] **Figure 17A** is a graph showing concentration of human IgG in circulation as measured by total human IgG ELISA in serum samples taken 5 weeks after intramuscular injection of vector expressing b12, F10, or CR6261 and two days prior to viral challenge. **Figure 17B** is a graph showing weight loss observed in Balb/C mice following intranasal challenge with 1×10^4 PFU of CA/09 influenza in animals that received VIP expressing control (b12) or F10-IgG ($n = 8$). **Figure 17C** is a graph showing correlation of weight loss 4 days post challenge with CA/09 and CR6261-IgG concentration. d, Weight loss observed in Balb/C mice following intranasal challenge with 5×10^4 PFU of SI06 in animals that received VIP expressing control (b12) or F10-IgG ($n = 8$). **Figure 17D** is a graph showing survival rate in Balb/C mice expressing b12 and F10 following intranasal challenge of PR/8. **Figure 17E** is a graph showing weight loss observed in Balb/C mice following intranasal challenge with 1000 PFU of PR/8 in animals that received VIP expressing control (b12) or F10 ($n = 8$). **Figures 17F-G** are plots showing *in vitro* neutralization of five strains of influenza (PR/8, CA/09, SI/06, VN/04, JP/57) as detected by GFP reporter assays using serums taken from animals receiving recombinant AAV expressing either b12, F10 or CR6261 following CA/09 (Fig. 17F) or SI06 (Fig. 17G) challenge. Values are calculated as the fold dilution that resulted in 50% neutralization of influenza infection. Dashed line represents the lowest dilution tested (20-fold dilution) and values below this line are extrapolated from the curve fit or are plotted along the axis to represent no detectable neutralization activity.

[0058] **Figure 18A** is a graph showing quantitation of luciferase expression by Xenogen imaging of young (3 month) or old (12 month) NOD/SCID/ $\gamma c^{-/-}$ (NSG) mice following intramuscular injection of 1×10^{11} GC of vector expressing luciferase ($n = 8$). **Figure 18B** is a graph showing quantitation of human IgG by ELISA in the serum of young (3 month) or old (12 month) NSG mice following intramuscular injection of 1×10^{11} GC of

vector expressing F10-IgG (n = 8). **Figure 18C** are graphs showing survival (left) and weight loss (right) of 3 month old NSG mice receiving recombinant AAV expressing luciferase or F10-IgG following intranasal challenge with 1000 PFU of PR/8 influenza (n = 6-8). **Figure 18D** are graphs showing survival (left) and weight loss (right) of 12 month old NSG mice receiving recombinant AAV expressing luciferase or F10-IgG following intranasal challenge with 1000 PFU of PR/8 influenza (n = 4-6). **Figure 18E** shows hematoxylin and eosin staining of representative lung sections taken from 3 month old NSG mice receiving either luciferase or F10-IgG expressing VIP 5 days post-challenge with 1000 PFU of PR/8 influenza (scale bar = 100 microns). **Figure 18F** is a plot showing ordinal score denoting inflammation as quantified by a trained pathologist (0 = no inflammation, 5 = maximal inflammation). **Figure 18G** is a plot showing quantitation of influenza RNA in lung tissues as a function of time as animals were sacrificed for analysis.

[0059] **Figure 19A** is a schematic representation of the low-dose mucosal HIV challenge regimen employed in Example 12. Each week, mice were bled and then challenged with 50ng p24 of JR-CSF by non-abrasive intravaginal administration of inoculum as indicated by the solid arrows. **Figure 19B** is a graph showing CD4 cell depletion in the circulation over time as a result of HIV infection as measured by flow cytometry. **Figure 19C** is a plot showing HIV plasma viral load at time of sacrifice following 13 intravaginal challenges as measured by Abbott RealTime HIV-1 Viral Load qPCR assay. Limit of detection for this assay was 200 copies/mL. Undetectable samples were plotted at the limit of detection.

[0060] **Figure 20** is a graph showing quantitation of human IgG in serum by ELISA following administration of recombinant AAV viruses expressing B12, AR3A and AR3B antibodies.

DETAILED DESCRIPTION

[0061] In the following detailed description, reference is made to the accompanying drawings, which form a part hereof. The illustrative embodiments described in the detailed description, drawings, and claims are not meant to be limiting. Other embodiments may be utilized, and other changes may be made, without departing from the spirit or scope of the subject matter presented here. It will be readily understood that the

aspects of the present disclosure, as generally described herein, and illustrated in the Figures, can be arranged, substituted, combined, and designed in a wide variety of different configurations, all of which are explicitly contemplated and make part of this disclosure.

[0062] The present application provides viral vectors useful in producing recombinant adeno-associated viruses (AAVs), and recombinant AAVs capable of expressing one or more proteins of interest in an appropriate environment, for example, in a cell, a tissue, an organ, or a subject transfected with the recombinant AAVs. Also disclosed herein are the methods for making and using the recombinant AAVs. For example, the recombinant AAVs can be used to produce a protein of interest *in vivo*, *ex vivo*, or *in vitro*. In some embodiments, the expression of the protein of interest can be used to diagnose, prevent, or treat one or more diseases or disorders, such as to reduce or inhibit the risk of viral infections.

[0063] In some embodiments, the viral vector comprises a 5' inverted terminal repeat (ITR) of AAV and a 3' AAV ITR, a promoter, a restriction site downstream of the promoter to allow insertion of a polynucleotide encoding one or more proteins of interest, and a posttranscriptional regulatory element downstream of the restriction site, where the promoter, the restriction site and the posttranscription regulatory element are located downstream of the 5' AAV ITR and upstream of the 3' AAV ITR. The viral vector can be used, for example, to express one or more proteins of interest (*e.g.*, antibodies). For example, the viral vector can include a polynucleotide encoding one or more anti-HIV antibodies, anti-HCV antibodies, anti-influenza antibodies, or combinations thereof. The viral vector can, for example, be used to produce high level of the protein(s) of interest (*e.g.*, antibodies) in a subject for diagnostic or therapeutic purposes.

Definitions

[0064] Unless defined otherwise, technical and scientific terms used herein have the same meaning as commonly understood by one of ordinary skill in the art to which this invention belongs. *See, e.g.* Singleton *et al.*, Dictionary of Microbiology and Molecular Biology 2nd ed., J. Wiley & Sons (New York, N.Y. 1994); Sambrook *et al.*, Molecular Cloning, A Laboratory Manual, Cold Springs Harbor Press (Cold Springs Harbor, N.Y. 1989). For purposes of the present invention, the following terms are defined below.

[0065] As used herein, the term “vector” refers to a polynucleotide construct, typically a plasmid or a virus, used to transmit genetic material to a host cell. Vectors can be, for example, viruses, plasmids, cosmids, or phage. A vector as used herein can be composed of either DNA or RNA. In some embodiments, a vector is composed of DNA. An “expression vector” is a vector that is capable of directing the expression of a protein encoded by one or more genes carried by the vector when it is present in the appropriate environment. Vectors are preferably capable of autonomous replication. Typically, an expression vector comprises a transcription promoter, a gene, and a transcription terminator. Gene expression is usually placed under the control of a promoter, and a gene is said to be “operably linked to” the promoter.

[0066] As used herein, the term “operably linked” is used to describe the connection between regulatory elements and a gene or its coding region. Typically, gene expression is placed under the control of one or more regulatory elements, for example, without limitation, constitutive or inducible promoters, tissue-specific regulatory elements, and enhancers. A gene or coding region is said to be “operably linked to” or “operatively linked to” or “operably associated with” the regulatory elements, meaning that the gene or coding region is controlled or influenced by the regulatory element. For instance, a promoter is operably linked to a coding sequence if the promoter effects transcription or expression of the coding sequence.

[0067] The term “construct,” as used herein, refers to a recombinant nucleic acid that has been generated for the purpose of the expression of a specific nucleotide sequence(s), or that is to be used in the construction of other recombinant nucleotide sequences.

[0068] As used herein, the terms “nucleic acid” and “polynucleotide” are interchangeable and refer to any nucleic acid, whether composed of phosphodiester linkages or modified linkages such as phosphotriester, phosphoramidate, siloxane, carbonate, carboxymethylester, acetamidate, carbamate, thioether, bridged phosphoramidate, bridged methylene phosphonate, bridged phosphoramidate, bridged phosphoramidate, bridged methylene phosphonate, phosphorothioate, methylphosphonate, phosphorodithioate, bridged phosphorothioate or sultone linkages, and combinations of such linkages. The terms “nucleic

acid” and “polynucleotide” also specifically include nucleic acids composed of bases other than the five biologically occurring bases (adenine, guanine, thymine, cytosine and uracil).

[0069] The term “regulatory element” and “expression control element” are used interchangeably and refer to nucleic acid molecules that can influence the expression of an operably linked coding sequence in a particular host organism. These terms are used broadly to and cover all elements that promote or regulate transcription, including promoters, core elements required for basic interaction of RNA polymerase and transcription factors, upstream elements, enhancers, and response elements (*see, e.g.*, Lewin, “Genes V” (Oxford University Press, Oxford) pages 847-873). Exemplary regulatory elements in prokaryotes include promoters, operator sequences and a ribosome binding sites. Regulatory elements that are used in eukaryotic cells can include, without limitation, transcriptional and translational control sequences, such as promoters, enhancers, splicing signals, polyadenylation signals, terminators, protein degradation signals, internal ribosome-entry element (IRES), 2A sequences, and the like, that provide for and/or regulate expression of a coding sequence and/or production of an encoded polypeptide in a host cell.

[0070] As used herein, 2A sequences or elements refer to small peptides introduced as a linker between two proteins, allowing autonomous intraribosomal self-processing of polyproteins (*See e.g.*, de Felipe. Genetic Vaccines and Ther. 2:13 (2004); deFelipe *et al.* Traffic 5:616-626 (2004)). These short peptides allow co-expression of multiple proteins from a single vector. Many 2A elements are known in the art. Examples of 2A sequences that can be used in the methods and system disclosed herein, without limitation, include 2A sequences from the foot-and-mouth disease virus (F2A), equine rhinitis A virus (E2A), *Thosea asigna* virus (T2A), and porcine teschovirus-1 (P2A) as described in U.S. Patent Publication No. 20070116690.

[0071] As used herein, the term “promoter” is a nucleotide sequence that permits binding of RNA polymerase and directs the transcription of a gene. Typically, a promoter is located in the 5’ non-coding region of a gene, proximal to the transcriptional start site of the gene. Sequence elements within promoters that function in the initiation of transcription are often characterized by consensus nucleotide sequences. Examples of promoters include, but are not limited to, promoters from bacteria, yeast, plants, viruses, and mammals (including humans). A promoter can be inducible, repressible, and/or constitutive. Inducible promoters

initiate increased levels of transcription from DNA under their control in response to some change in culture conditions, such as a change in temperature.

[0072] As used herein, the term “enhancer” refers to a type of regulatory element that can increase the efficiency of transcription, regardless of the distance or orientation of the enhancer relative to the start site of transcription.

[0073] As used herein, the term “antibody” is used in the broadest sense and specifically covers human, non-human (*e.g.*, murine) and humanized monoclonal antibodies (including full-length monoclonal antibodies), polyclonal antibodies, multi-specific antibodies (*e.g.*, bispecific antibodies), and antibody fragments so long as they exhibit the desired biological activity. Various antibodies can be expressed using the system and method disclosed herein. “Antibodies” and “immunoglobulins” are usually heterotetrameric glycoproteins, composed of two identical light (L) chains and two identical heavy (H) chains. Each light chain is linked to a heavy chain by a disulfide bond. The number of disulfide linkages varies among the heavy chains of different immunoglobulin isotypes. Each heavy chain comprises a variable domain (V_H) followed by a number of constant domains. Each light chain comprises a variable domain at one end (V_L) and a constant domain at its other end. The constant domain of the light chain is aligned with the first constant domain of the heavy chain, and the light-chain variable domain is aligned with the variable domain of the heavy chain. While antibodies exhibit binding specificity to a specific antigen, immunoglobulins include both antibodies and other antibody-like molecules that lack antigen specificity. Polypeptides of the latter kind are, for example, produced at low levels by the lymph system and at increased levels by myelomas.

[0074] As used herein, the term “variant” refers to a polynucleotide (or polypeptide) having a sequence substantially similar to a reference polynucleotide (or polypeptide). In the case of a polynucleotide, a variant can have deletions, substitutions, additions of one or more nucleotides at the 5' end, 3' end, and/or one or more internal sites in comparison to the reference polynucleotide. Similarities and/or differences in sequences between a variant and the reference polynucleotide can be detected using conventional techniques known in the art, for example polymerase chain reaction (PCR) and hybridization techniques. Variant polynucleotides also include synthetically derived polynucleotides, such as those generated, for example, by using site-directed mutagenesis. Generally, a variant of a

polynucleotide, including, but not limited to, a DNA, can have at least about 50%, about 55%, about 60%, about 65%, about 70%, about 75%, about 80%, about 85%, about 90%, about 91%, about 92%, about 93%, about 94%, about 95%, about 96%, about 97%, about 98%, about 99% or more sequence identity to the reference polynucleotide as determined by sequence alignment programs known by skilled artisans. In the case of a polypeptide, a variant can have deletions, substitutions, additions of one or more amino acids in comparison to the reference polypeptide. Similarities and/or differences in sequences between a variant and the reference polypeptide can be detected using conventional techniques known in the art, for example Western blot. Generally, a variant of a polypeptide, can have at least about 60%, about 65%, about 70%, about 75%, about 80%, about 85%, about 90%, about 91%, about 92%, about 93%, about 94%, about 95%, about 96%, about 97%, about 98%, about 99% or more sequence identity to the reference polypeptide as determined by sequence alignment programs known by skilled artisans.

[0075] As used herein, the term “transfection” refers to the introduction of a nucleic acid into a host cell, such as by contacting the cell with a recombinant AAV virus as described below.

[0076] As used herein, the term “transgene” refers to any nucleotide or DNA sequence that is integrated into one or more chromosomes of a target cell by human intervention. In some embodiment, the transgene comprises a polynucleotide that encodes a protein of interest. The protein-encoding polynucleotide is generally operatively linked to other sequences that are useful for obtaining the desired expression of the gene of interest, such as transcriptional regulatory sequences. In some embodiments, the transgene can additionally comprise a nucleic acid or other molecule(s) that is used to mark the chromosome where it has integrated.

[0077] As used herein, “treatment” refers to a clinical intervention made in response to a disease, disorder or physiological condition manifested by a patient or to which a patient may be susceptible. The aim of treatment includes, but is not limited to, the alleviation or prevention of symptoms, slowing or stopping the progression or worsening of a disease, disorder, or condition and/or the remission of the disease, disorder or condition. “Treatments” refer to one or both of therapeutic treatment and prophylactic or preventative measures. Subjects in need of treatment include those already affected by a disease or

disorder or undesired physiological condition as well as those in which the disease or disorder or undesired physiological condition is to be prevented.

[0078] As used herein, the term “effective amount” refers to an amount sufficient to effect beneficial or desirable biological and/or clinical results.

[0079] As used herein, a “subject” refers to an animal that is the object of treatment, observation or experiment. “Animal” includes cold- and warm-blooded vertebrates and invertebrates such as fish, shellfish, reptiles, and in particular, mammals. “Mammal,” as used herein, refers to an individual belonging to the class Mammalia and includes, but not limited to, humans, domestic and farm animals, zoo animals, sports and pet animals. Non-limiting examples of mammals include mice; rats; rabbits; guinea pigs; dogs; cats; sheep; goats; cows; horses; primates, such as monkeys, chimpanzees and apes, and, in particular, humans. In some embodiments, the mammal is a human. However, in some embodiments, the mammal is not a human.

Adeno-associated virus (AAV) vector

[0080] Adeno-associated virus (AAV) is a replication-deficient parvovirus, the single-stranded DNA genome of which is about 4.7 kb in length including 145 nucleotide inverted terminal repeat (ITRs). The ITRs play a role in integration of the AAV DNA into the host cell genome. When AAV infects a host cell, the viral genome integrates into the host’s chromosome resulting in latent infection of the cell. In a natural system, a helper virus (for example, adenovirus or herpesvirus) provides genes that allow for production of AAV virus in the infected cell. In the case of adenovirus, genes E1A, E1B, E2A, E4 and VA provide helper functions. Upon infection with a helper virus, the AAV provirus is rescued and amplified, and both AAV and adenovirus are produced. In the instances of recombinant AAV vectors having no Rep and/or Cap genes, the AAV can be non-integrating.

[0081] AAV vectors that comprise coding regions of one or more proteins of interest, for example proteins that are more than 500 amino acids in length, are provided. The AAV vector can include a 5’ inverted terminal repeat (ITR) of AAV, a 3’ AAV ITR, a promoter, and a restriction site downstream of the promoter to allow insertion of a polynucleotide encoding one or more proteins of interest, wherein the promoter and the restriction site are located downstream of the 5’ AAV ITR and upstream of the 3’ AAV ITR.

In some embodiments, the recombinant AAV vector includes a posttranscriptional regulatory element downstream of the restriction site and upstream of the 3' AAV ITR. In some embodiments, the AAV vectors disclosed herein can be used as AAV transfer vectors carrying a transgene encoding a protein of interest for producing recombinant AAV viruses that can express the protein of interest in a host cell.

[0082] Generation of the viral vector can be accomplished using any suitable genetic engineering techniques well known in the art, including, without limitation, the standard techniques of restriction endonuclease digestion, ligation, transformation, plasmid purification, and DNA sequencing, for example as described in Sambrook *et al.* (Molecular Cloning: A Laboratory Manual. Cold Spring Harbor Laboratory Press, N.Y. (1989)).

[0083] The viral vector can incorporate sequences from the genome of any known organism. The sequences can be incorporated in their native form or can be modified in any way to obtain a desired activity. For example, the sequences can comprise insertions, deletions or substitutions.

Promoter

[0084] Various promoters can be operably linked with a nucleic acid comprising the coding region of the protein of interest in the viral vector disclosed herein. In some embodiments, the promoter can drive the expression of the protein of interest in a cell infected with a virus derived from the viral vector, such as a target cell. The promoter can be naturally-occurring or non-naturally occurring.

[0085] Examples of promoters, include, but are not limited to, viral promoters, plant promoters and mammalian promoters. Examples of viral promoters include, but are not limited to cytomegalovirus (CMV) immediate early promoter, CAG promoter (which is a combination of the CMV early enhancer element and chicken beta-actin promoter, described in Alexopoulou *et al.* BMC Cell Biology 9:2, (2008)), simian virus 40 (SV40) promoter, the 35S RNA and 19S RNA promoters of cauliflower mosaic virus (CaMV) described in Brisson *et al.*, Nature 1984, 310:511-514, the coat protein promoter to tobacco mosaic virus (TMV), and any variants thereof. Examples of plant promoters include, but are not limited to, heat shock promoters, such as soybean hsp17.5-E or hsp17.3-B described in Gurley *et al.*, Mol. Cell. Biol. 1986, 6:559-565, and any variants thereof. Examples of mammalian promoters include, but are not limited to, human elongation factor 1 α -subunit (EF1-1 α) promoter,

human ubiquitin C (UCB) promoter, murine phosphoglycerate kinase-1 (PGK) promoter, and any variants thereof.

[0086] In some embodiments, the promoter is a synthetic promoter comprising at least a portion of the CAG promoter. The portion of the CAG promoter can comprise a nucleic acid sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about 98%, at least about 99%, or more, sequence identity to SEQ ID NO: 3.

[0087] In some embodiments, the promoter comprises a CMV enhancer. In some embodiments, the promoter comprises a UBC enhancer. In some embodiments, the promoter comprises at least a portion of the CMV enhancer. For example, the CMV enhancer can comprise a nucleic acid sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about 98%, at least about 99%, or more, sequence identity to SEQ ID NO: 2. In some embodiments the promoter comprises at least a portion of the UCB enhancer. The UCB enhancer can comprise a nucleic acid sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about 98%, at least about 99%, or more, sequence identity to SEQ ID NO: 4.

[0088] In some embodiments, the promoter is a synthetic CASI promoter having a nucleotide sequence of SEQ ID NO: 1. The synthetic CASI promoter contains a portion of the CMV enhancer, a portion of the chicken beta-actin promoter, and a portion of the UBC enhancer. In some embodiments, the promoter can include a nucleic acid sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about 98%, at least about 99%, or more, sequence identity to SEQ ID NO: 1. In some embodiments, the promoter comprises a nucleic acid sequence that is at least about 90% identical to SEQ ID NO: 1. In some embodiments, the promoter comprises a nucleic acid sequence that is at least about 95% identical to SEQ ID NO: 1. In some embodiments, the promoter comprises a nucleic acid sequence of SEQ ID NO: 1.

[0089] In some embodiments, the vector can include one or more introns to facilitate processing of the RNA transcript in mammalian host cells. A non-limiting example of such an intron is the rabbit β -globin intron. In some embodiments, the intron is a synthetic intron. For example, the synthetic intron can include a nucleotide sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about

98%, at least about 99%, or more, sequence identity to SEQ ID NO: 8. The location of the intron in the vector can vary. In some embodiments, the intron is located between the promoter and the restriction site. In some embodiments, the intron is located within the promoter. In some embodiments, the intron includes a UCB enhancer. The UCB enhancer can comprise a nucleotide sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about 98%, at least about 99%, or more, sequence identity to SEQ ID NO: 4.

[0090] In some embodiments, the promoter is operably linked with a polynucleotide encoding one or more proteins of interest. In some embodiments, the promoter is operably linked with a polynucleotide encoding the heavy chain and/or the light chain of an antibody of interest (such as the heavy and light variable region of the antibody). In some embodiments, the promoter is operably linked with a polynucleotide encoding the heavy chain and the light chain of an antibody of interest to allow multicistronic expression of the heavy and light chain genes. In some embodiments, a 2A sequence or IRES element is located between the coding region of the heavy chain variable region and the coding region of the light chain variable region in the vector to facilitate equivalent expression of each subunit. Alternatively, polynucleotides encoding the heavy and light chains can be introduced separately into the target cell, each in an appropriate viral vector.

[0091] The size of the promoter can vary. Because of the limited packaging capacity of AAV, it is preferred to use a promoter that is small in size, but at the same time allows high level production of the protein(s) of interest in host cells. For example, in some embodiments the promoter is at most about 1.5 kb, at most about 1.4 kb, at most about 1.35 kb, at most about 1.3 kb, at most about 1.25 kb, at most about 1.2 kb, at most about 1.15 kb, at most about 1.1 kb, at most about 1.05 kb, at most about 1 kb, at most about 800 base pairs, at most about 600 base pairs, at most about 400 base pairs, at most about 200 base pairs, or at most about 100 base pairs.

[0092] The nucleotide sequence of the promoter can also be modified for improving expression efficiency. For example, the promoter can include one or more splice donors, one or more splice acceptors, and/or combination thereof. In some embodiments, the promoter includes a splice donor and a splice acceptor. In some embodiments, the promoter includes one or more splice donors, and no splice acceptor. In some embodiments, the

promoter includes no splice donor, and one or more splice acceptors. For example, in some embodiments the splice donor can comprise a nucleic acid sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about 98%, at least about 99%, or more, sequence identity to SEQ ID NO: 5. In some embodiments the splice acceptor can comprise a nucleic acid sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about 98%, at least about 99%, or more, sequence identity to SEQ ID NO: 6.

Regulatory elements

[0093] Various posttranscriptional regulatory elements can be used in the viral vectors, for example to increase expression level of the protein of interest in a host cell. In some embodiments, the posttranscriptional regulatory element can be a viral posttranscriptional regulatory element. Non-limiting examples of viral posttranscriptional regulatory element include woodchuck hepatitis virus posttranscriptional regulatory element (WPRE), hepatitis B virus posttranscriptional regulatory element (HBVPRE), RNA transport element (RTE), and any variants thereof. The WPRE can comprise a nucleic acid sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about 98%, at least about 99%, or more, sequence identity to SEQ ID NO: 7. The RTE can be a rev response element (RRE), for example, a lentiviral RRE. A non-limiting example is bovine immunodeficiency virus rev response element (RRE). In some embodiments, the RTE is a constitutive transport element (CTE). Examples of CTE include, but are not limited to Mason-Pfizer Monkey Virus CTE and Avian Leukemia Virus CTE.

[0094] The viral vector described herein can include a prokaryotic replicon (that is, a DNA sequence having the ability to direct autonomous replication and maintenance of the recombinant DNA molecule extrachromosomally in a prokaryotic host cell), such as a bacterial host cell, transformed therewith. Such replicons are well known in the art. In addition, vectors that include a prokaryotic replicon may also include a gene whose expression confers a detectable marker such as a drug resistance. Typical bacterial drug resistance genes are those that confer resistance to ampicillin or tetracycline.

[0095] In some embodiments, the AAV vector can include a gene for a selectable marker that is effective in a eukaryotic cell, such as a drug resistance selection marker. This selectable marker gene can encode a factor necessary for the survival or growth of

transformed host cells grown in a selective culture medium. Host cells not transformed with the vector containing the selection gene will not survive in the culture medium. Typical selection genes encode proteins that confer resistance to antibiotics or other toxins, *e.g.*, ampicillin, neomycin, methotrexate, kanamycin, gentamycin, Zeocin, or tetracycline, complement auxotrophic deficiencies, or supply critical nutrients withheld from the media.

[0096] The viral vectors disclosed herein can include various regulatory elements, such as a transcription initiation region and/or a transcriptional termination region. Examples of transcription termination region include, but are not limited to, polyadenylation signal sequences. Examples of polyadenylation signal sequences include, but are not limited to, Bovine growth hormone (BGH) poly(A), SV40 late poly(A), rabbit beta-globin (RBG) poly(A), thymidine kinase (TK) poly(A) sequences, and any variants thereof. In some embodiments, the transcriptional termination region is located downstream of the posttranscriptional regulatory element. In some embodiments, the transcriptional termination region is a polyadenylation signal sequence. In some embodiments, the transcriptional termination region is SV40 late poly(A) sequence.

[0097] The viral vectors disclosed herein can also include one or more A nucleotides immediately after a restriction site downstream of the promoter, where the restriction site allows the insertion of a polynucleotide encoding the protein(s) of interest. For example, one or more A nucleotides are located immediately after the TAA stop codon of the protein of interest after the insertion of the polynucleotide encoding the protein of interest into the vector. In some embodiments, one A nucleotide, two A nucleotides, three A nucleotides, or more are located immediately after the restriction site. In some embodiments, one A nucleotide, two A nucleotides, three A nucleotides, or more are located immediately after the TAA stop codon of the protein of interest.

[0098] In some embodiments, the viral vectors can include additional sequences that make the vectors suitable for replication and integration in eukaryotes. In other embodiments, the viral vectors disclosed herein can include a shuttle element that makes the vectors suitable for replication and integration in both prokaryotes and eukaryotes. In some embodiments, the viral vectors can include additional transcription and translation initiation sequences, such as promoters and enhancers; and additional transcription and translation terminators, such as polyadenylation signals.

[0099] In some embodiment, the viral vectors can include a regulatory sequence that allows, for example, the translation of multiple proteins from a single mRNA. Non-limiting examples of such regulatory sequences include internal ribosome entry site (IRES) and 2A self-processing sequence. In some embodiments, the 2A sequence is a 2A peptide site from foot-and-mouth disease virus (F2A sequence). In some embodiments, the F2A sequence has a standard furin cleavage site. For example, the F2A sequence having a standard furin cleavage site can include a nucleotide sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about 98%, at least about 99%, or more, sequence identity to SEQ ID NO: 9. In some embodiments, the F2A sequence has a modified furin cleavage site. For example, the F2A sequence having a modified furin cleavage site can include a nucleotide sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about 98%, at least about 99%, or more, sequence identity to SEQ ID NO: 10.

[0100] The viral vectors can also, in some embodiments, have one or more restriction site(s) located near the promoter sequence to provide for the insertion of nucleic acid sequences encoding one or more proteins of interest and other protein(s).

Protein of interest

[0101] As used herein, a “protein of interest” can be any protein, including naturally-occurring and non-naturally occurring proteins. In some embodiments, a polynucleotide encoding one or more proteins of interest can be inserted into the viral vectors disclosed herein, wherein the polynucleotide is operably linked with the promoter. In some instances, the promoter can drive the expression of the protein(s) of interest in a host cell (*e.g.*, a human muscle cell).

[0102] Examples of protein of interest include, but are not limited to, luciferases; fluorescent proteins (*e.g.*, GFP); growth hormones (GHs) and variants thereof; insulin-like growth factors (IGFs) and variants thereof; granulocyte colony-stimulating factors (G-CSFs) and variants thereof; erythropoietin (EPO) and variants thereof; insulin, such as proinsulin, preproinsulin, insulin, insulin analogs, and the like; antibodies and variants thereof, such as hybrid antibodies, chimeric antibodies, humanized antibodies, monoclonal antibodies; antigen binding fragments of an antibody (Fab fragments), single-chain variable fragments of an antibody (scFV fragments); dystrophin and variants thereof; clotting factors and variants

thereof; cystic fibrosis transmembrane conductance regulator (CFTR) and variants thereof; and interferons and variants thereof.

[0103] In some embodiments, the protein of interest is a therapeutic protein or variant thereof. Non-limiting examples of therapeutic proteins include blood factors, such as β -globin, hemoglobin, tissue plasminogen activator, and coagulation factors; colony stimulating factors (CSF); interleukins, such as IL-1, IL-2, IL-3, IL-4, IL-5, IL-6, IL-7, IL-8, IL-9, etc.; growth factors, such as keratinocyte growth factor (KGF), stem cell factor (SCF), fibroblast growth factor (FGF, such as basic FGF and acidic FGF), hepatocyte growth factor (HGF), insulin-like growth factors (IGFs), bone morphogenetic protein (BMP), epidermal growth factor (EGF), growth differentiation factor-9 (GDF-9), hepatoma derived growth factor (HDGF), myostatin (GDF-8), nerve growth factor (NGF), neurotrophins, platelet-derived growth factor (PDGF), thrombopoietin (TPO), transforming growth factor alpha (TGF- α), transforming growth factor beta (TGF- β), and the like; soluble receptors, such as soluble TNF- α receptors, soluble VEGF receptors, soluble interleukin receptors (*e.g.*, soluble IL-1 receptors and soluble type II IL-1 receptors), soluble γ/δ T cell receptors, ligand-binding fragments of a soluble receptor, and the like; enzymes, such as α -glucosidase, imiglucerase, β -glucocerebrosidase, and alglucerase; enzyme activators, such as tissue plasminogen activator; chemokines, such as IP-10, monokine induced by interferon-gamma (Mig), Gro α /IL-8, RANTES, MIP-1 α , MIP-1 β , MCP-1, PF-4, and the like; angiogenic agents, such as vascular endothelial growth factors (VEGFs, *e.g.*, VEGF121, VEGF165, VEGF-C, VEGF-2), transforming growth factor-beta, basic fibroblast growth factor, glioma-derived growth factor, angiogenin, angiogenin-2; and the like; anti-angiogenic agents, such as a soluble VEGF receptor; protein vaccine; neuroactive peptides, such as nerve growth factor (NGF), bradykinin, cholecystokinin, gastrin, secretin, oxytocin, gonadotropin-releasing hormone, beta-endorphin, enkephalin, substance P, somatostatin, prolactin, galanin, growth hormone-releasing hormone, bombesin, dynorphin, warfarin, neurotensin, motilin, thyrotropin, neuropeptide Y, luteinizing hormone, calcitonin, insulin, glucagons, vasopressin, angiotensin II, thyrotropin-releasing hormone, vasoactive intestinal peptide, a sleep peptide, and the like; thrombolytic agents; atrial natriuretic peptide; relaxin; glial fibrillary acidic protein; follicle stimulating hormone (FSH); human alpha-1 antitrypsin; leukemia inhibitory factor (LIF); transforming growth factors (TGFs); tissue factors, luteinizing hormone; macrophage

activating factors; tumor necrosis factor (TNF); neutrophil chemotactic factor (NCF); nerve growth factor; tissue inhibitors of metalloproteinases; vasoactive intestinal peptide; angiogenin; angiotropin; fibrin; hirudin; IL-1 receptor antagonists; and the like. Some other non-limiting examples of protein of interest include ciliary neurotrophic factor (CNTF); brain-derived neurotrophic factor (BDNF); neurotrophins 3 and 4/5 (NT-3 and 4/5); glial cell derived neurotrophic factor (GDNF); aromatic amino acid decarboxylase (AADC); hemophilia related clotting proteins, such as Factor VIII, Factor IX, Factor X; dystrophin or mini-dystrophin; lysosomal acid lipase; phenylalanine hydroxylase (PAH); glycogen storage disease-related enzymes, such as glucose-6-phosphatase, acid maltase, glycogen debranching enzyme, muscle glycogen phosphorylase, liver glycogen phosphorylase, muscle phosphofructokinase, phosphorylase kinase (*e.g.*, PHKA2), glucose transporter (*e.g.*, GLUT2), aldolase A, β -enolase, and glycogen synthase; lysosomal enzymes (*e.g.*, beta-N-acetylhexosaminidase A); and any variants thereof.

[0104] In some embodiments, the protein of interest is an active fragment of a protein, such as any of the aforementioned proteins. In some embodiments, the protein of interest is a fusion protein comprising some or all of two or more proteins. In some embodiments a fusion protein can comprise all or a portion of any of the aforementioned proteins.

[0105] In some embodiments, the viral vector comprises a polynucleotide comprising coding regions for two or more proteins of interest. The two or more proteins of interest can be the same or different from each other. In some embodiments, the two or more proteins of interest are related polypeptides, for example neutralizing antibodies for the same virus.

[0106] In some embodiments, the protein of interest is a multi-subunit protein. For examples, the protein of interest can comprise two or more subunits, or two or more independent polypeptide chains. In some embodiments, the protein of interest can be an antibody. Examples of antibodies include, but are not limited to, antibodies of various isotypes (for example, IgG1, IgG2, IgG3, IgG4, IgA, IgD, IgE, and IgM); monoclonal antibodies produced by any means known to those skilled in the art, including an antigen-binding fragment of a monoclonal antibody; humanized antibodies; chimeric antibodies; single-chain antibodies; antibody fragments such as Fv, F(ab')₂, Fab', Fab, Facb, scFv and

the like; provided that the antibody is capable of binding to antigen. In some embodiments, the antibody is a full-length antibody. In some embodiments, the protein of interest is not an immunoadhesin.

[0107] In some embodiments, the antibody is an anti-Malaria antibody. Non-limiting examples of anti-Malaria include 2A10 anti-Malaria antibody and 2C11 anti-Malaria antibody.

[0108] In some embodiments, the antibody is a viral neutralizing antibody. For example, the antibody can be a neutralizing antibody for HIV, HCV or influenza viruses. In some embodiments, the antibody is a neutralizing anti-HIV antibody. In some embodiments, a neutralizing anti-HIV antibody may be, for example, a human monoclonal neutralizing antibody that neutralizes many primary isolates of different genetic subtypes of HIV-1.

[0109] In some embodiments, the antibody is a neutralizing anti-HCV antibody.

[0110] In some embodiments, the antibody is a neutralizing anti-influenza antibody. Non-limiting examples of neutralizing viral antibodies include b12 anti-HIV antibody, 2G12 anti-HIV antibody, 4E10 anti-HIV antibody, 2F5 anti-HIV antibody, VRC01 anti-HIV antibody, 3BNC60 anti-HIV antibody, 3BNC117 anti-HIV antibody, NIH45-46 anti-HIV antibody, NIH45-46W anti-HIV antibody, VRC-PG04 anti-HIV antibody, VRC-CH31 anti-HIV antibody, PGT121 anti-HIV antibody, PGT128 anti-HIV antibody, F10 anti-influenza antibody, CR6261 anti-influenza antibody, TCN32 influenza antibody, FI6 anti-influenza antibody, FI6v3 anti-influenza antibody, AR3A anti-HCV antibody, AR3B anti-HCV antibody, AR4A anti-HCV antibody, and any variants thereof.

[0111] As described herein, the nucleotide sequence encoding the protein of interest can be modified to improve expression efficiency of the protein. The methods that can be used to improve the transcription and/or translation of a gene herein are not particularly limited. For example, the nucleotide sequence can be modified to better reflect host codon usage to increase gene expression (*e.g.*, protein production) in the host (*e.g.*, a mammal). As another non-limiting example for the modification, one or more of the splice donors and/or splice acceptors in the nucleotide sequence of the protein of interest is modified to reduce the potential for extraneous splicing.

[0112] The protein of interest can be of various lengths. For example, the protein of interest can be at least about 200 amino acids, at least about 250 amino acids, at least

about 300 amino acids, at least about 350 amino acids, at least about 400 amino acids, at least about 450 amino acids, at least about 500 amino acids, at least about 550 amino acids, at least about 600 amino acids, at least about 650 amino acids, at least about 700 amino acids, at least about 750 amino acids, at least about 800 amino acids, or longer in length. In some embodiments, the protein of interest is at least about 480 amino acids in length. In some embodiments, the protein of interest is at least about 500 amino acids in length. In some embodiments, the protein of interest is about 750 amino acids in length.

[0113] When it is desired to include coding regions for two or more proteins of interest, two or more individual polypeptide chains, or two or more subunits of a protein of interest in one viral vector, each additional coding region beyond the first is preferably linked to an element that facilitates co-expression of the proteins in host cells, such as an internal ribosomal entry sequence (IRES) element (U.S. Patent No. 4,937,190), or a 2A element. For example, IRES or 2A elements are preferably used when a single vector comprises sequences encoding each subunit of a multi-subunit protein. In the case of that the protein of interest is immunoglobulin with a desired specificity, for example, the first coding region (encoding either the heavy or light chain of immunoglobulin) is located downstream from the promoter. The second coding region (encoding the remaining chain of immunoglobulin) can be located downstream from the first coding region, and an IRES or 2A element can be disposed between the two coding regions, preferably immediately preceding the second coding region. The incorporation of an IRES or 2A element between the sequences of a first and second gene (encoding the heavy and light chains, respectively) can allow both chains to be expressed from the same promoter at about the same level in the cell.

[0114] In some embodiments, the protein of interest comprises two or more subunits, for example an immunoglobulin (Ig). The viral vector can include a coding region for each of the subunits. For example, the viral vector can include both the coding region for the Ig heavy chain (or the variable region of the Ig heavy chain) and the coding region for the Ig light chain (or the variable region of the Ig light chain). In some embodiments, the vectors include a first coding region for the heavy chain variable region of an antibody, and a second coding region for the light chain variable region of the antibody. The two coding regions can be separated, for example, by a 2A self-processing sequence to allow multi-cistronic transcription of the two coding regions.

[0115] The viral vector can include coding regions for two or more proteins of interest. For example, the viral vector can include the coding region for a first protein of interest and the coding region for a second protein of interest. The first protein of interest and the second protein of interest can be the same or different. In some embodiments, the viral vector can include the coding region(s) for a third or a fourth protein of interest. The third and the fourth protein of interest can be the same or different. The total length of the two or more proteins of interest encoded by one viral vector can vary. For example, the total length of the two or more proteins can be at least about 400 amino acids, at least about 450 amino acids, at least about 500 amino acids, at least about 550 amino acids, at least about 600 amino acids, at least about 650 amino acids, at least about 700 amino acids, at least about 750 amino acids, at least about 800 amino acids, or longer.

[0116] The Kozak consensus sequence, Kozak consensus or Kozak sequence, is known as a sequence which occurs on eukaryotic mRNA and has the consensus (gcc)gccRccAUGG, where R is a purine (adenine or guanine) three bases upstream of the start codon (AUG), which is followed by another "G." In some embodiments, the vector comprises a nucleotide sequence having at least about 70%, at least about 80%, at least about 90% sequence identity, or more to the Kozak consensus sequence. In some embodiments, the vector comprises a Kozak consensus sequence. In some embodiments, the vector includes a Kozak consensus sequence after the polynucleotide encoding one or more proteins of interest is inserted into the vector, *e.g.*, at the restrict site downstream of the promoter. For example, the vector can include a nucleotide sequence of GCCGCCATG (SEQ ID NO: 41), where the ATG is the start codon of the protein of interest. In some embodiments, the vector comprises a nucleotide sequence of GCGGCCGCCATG (SEQ ID NO: 42), where the ATG is the start codon of the protein of interest.

[0117] The protein of interest can be isolated and purified, if desired, in accordance with conventional methods known to those skilled in the art. For example, a lysate can be prepared of the expression host cells and the lysate can be purified using HPLC, hydrophobic interaction chromatography (HIC), anion exchange chromatography, cation exchange chromatography, size exclusion chromatography, ultrafiltration, gel electrophoresis, affinity chromatography, and/or other purification techniques.

Signal peptide sequence

[0118] Various signal peptide sequences can be used in the viral vector disclosed herein. The signal peptide sequence can be naturally-occurring or non-naturally occurring.

[0119] In some embodiments, a signal peptide can provide for secretion from a mammalian cell. Examples of signal peptides include, but are not limited to, the endogenous signal peptide for HGH and variants thereof; the endogenous signal peptide for interferons and variants thereof, including the signal peptide of type I, II and III interferons and variants thereof; and the endogenous signal peptides for known cytokines and variants thereof, such as the signal peptide of erythropoietin (EPO), insulin, TGF- β 1, TNF, IL1- α , and IL1- β , and variants thereof. In some embodiments, the signal peptide is a modified HGH signal peptide. In some embodiments, the nucleotide sequence encoding the signal peptide comprises a nucleotide sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about 98%, at least about 99%, or more, sequence identity to SEQ ID NO: 11. In some embodiments, the nucleotide sequence encoding the signal peptide comprises a nucleotide sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about 98%, at least about 99%, or more, sequence identity to SEQ ID NO: 12.

[0120] In some embodiments, the signal polypeptide for a protein that is different from the protein of interest can be used. In some embodiments, the native signal polypeptide for the protein of interest is used. In some instances, a non-naturally occurring signal peptide can be used.

[0121] Typically, the nucleotide sequence of the signal peptide is located immediately upstream of the coding region of the protein of interest (*e.g.*, fused at the 5' of the coding region of the protein of interest) in the vector. In the instances where the viral vector includes the coding regions of two or more proteins of interest, signal peptide sequence can be inserted immediately upstream of one or more of the coding regions. In some embodiments, each of the coding regions has a signal peptide sequence fused at the 5' end. The signal peptide sequence added to each of the coding region can be the same or different. For example, when the protein of interest has two subunits, the viral vector can include a coding region for one of the subunits and a coding region for the other subunit, and a signal peptide sequence can be inserted immediately upstream of either one of the coding

regions, or both of the coding regions. As another non-limiting example, the viral vector can include a coding region for the heavy chain variable region of an immunoglobulin and a coding region for the light chain variable region of the immunoglobulin, and each of the coding regions is fused with a signal peptide sequence at the 5' end. In some embodiments, the two signal peptide sequences are the same. In some embodiments, the two signal peptide sequences are different.

[0122] In some embodiments, following protein expression and/or secretion, the signal peptides can be cleaved from the precursor proteins resulting in mature proteins.

[0123] In some embodiments, the region in the viral vector starting from the 5' AAV ITR and ending at the 3' AAV ITR can be delivered to a host cell and integrate into the host cell genome. The length of this region can vary. For example, the length of this region can be at least about 2kb, at least about 2.25 kb, at least about 2.5 kb, at least about 2.75 kb, at least about 3 kb, at least about 3.25 kb, at least about 3.5 kb, at least about 3.75 kb, at least about 4 kb, at least about 4.25 kb, or at least about 4.5 kb. In some embodiments, this region is at least about 2.5 kb. In some embodiments, this region is about 4.5 kb. In some embodiments, the viral vector is not a self-complementary AAV (scAAV) vector.

[0124] As disclosed above, the viral vectors can include various elements, for example, but not limited to, a promoter, a transgene encoding the protein of interest, a signal peptide sequence, a posttranscriptional regulatory element, a transcriptional terminal element, and a regulatory sequence allowing translation of multiple proteins from a single mRNA. A skilled artisan will appreciate that a viral vector can include one of these elements, or any combinations of two or more of these elements. For example, the viral vector can include at least one element or a combination of elements listed in Table 1. The convention used in Table 1 is as follows:

A = promoter

B = transgene

C = signal peptide sequence

D = posttranscriptional regulatory element

E = transcriptional terminal element

F = regulatory sequence allowing translation of multiple proteins from a single mRNA

G = Kozak consensus sequence

Table 1. Element or combination of elements included in some embodiments of the viral vector

A	B	C	D	E
F	G	A+B	A+C	A+D
A+E	A+F	A+G	B+C	B+D
B+E	B+F	B+G	C+D	C+E
C+F	C+G	D+E	D+F	D+G
E+F	E+G	F+G	A+B+C	A+B+D
A+B+E	A+B+F	A+B+G	A+C+D	A+C+E
A+C+F	A+C+G	A+D+E	A+D+F	A+D+G
A+E+F	A+E+G	A+F+G	B+C+D	B+C+E
B+C+F	B+C+G	B+D+E	B+D+F	B+D+G
B+E+F	B+E+G	C+D+E	C+D+F	C+D+G
C+E+F	C+E+G	C+F+G	D+E+F	D+E+G
E+F+G	A+B+C+D	A+B+C+E	A+B+C+F	A+B+C+G
A+B+D+E	A+B+D+F	A+B+D+G	A+B+E+F	A+B+E+G
A+B+F+G	A+C+D+E	A+C+D+F	A+C+D+G	A+C+E+F
A+C+E+G	A+C+F+G	A+D+E+F	A+D+E+G	A+D+F+G
A+E+F+G	B+C+D+E	B+C+D+F	B+C+D+G	B+C+E+F
B+C+E+G	B+C+F+G	B+D+E+F	B+D+E+G	B+D+F+G
B+E+F+G	C+D+E+F	C+D+E+G	C+D+F+G	C+E+F+G
D+E+F+G	A+B+C+D+E	A+B+C+D+F	A+B+C+D+G	A+B+C+E+F
A+B+C+E+G	A+B+C+F+G	A+B+D+E+F	A+B+D+E+G	A+B+D+F+G
A+B+E+F+G	A+C+D+E+F	A+C+D+E+G	A+C+D+F+G	A+C+E+F+G
A+D+E+F+G	B+C+D+E+F	B+C+D+E+G	B+C+D+F+G	B+C+E+F+G
B+D+E+F+G	C+D+E+F+G	A+B+C+D+E+F	A+B+C+D+E+G	A+B+C+D+F+G
A+B+C+E+F+G	A+B+D+E+F+G	A+C+D+E+F+G	B+C+D+E+F+G	A+B+C+D+E+F+G

[0125] As described above, the nucleotide sequence of each of the above-listed elements can be modified to increase the expression efficiency of the protein of interest in a host cell. In some embodiments wherein more than one transgenes are present in the viral vector, a sequence that can facilitate the co-expression of the transgenes can be used. Non-limiting examples of such sequence include IRES, 2A sequence, and variants thereof.

[0126] Sequences of non-limiting examples of the AAV vectors are provided in SEQ ID NOs: 13-30. For example, the nucleotide sequence for an AAV vector including the CMV promoter, coding sequences for b12 anti-HIV antibody and SV40 late poly(A) sequence is set forth in SEQ ID NO: 13; the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for luciferase protein, WPRE, and SV40 late poly(A) sequence is set forth in SEQ ID NO: 14; the nucleotide sequence for an

AAV vector including the CASI synthetic promoter, coding sequences for luciferase protein, WPRE, and rabbit beta-globin (RBG) poly(A) sequence is set forth in SEQ ID NO: 15; the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for luciferase protein, WPRE, and bovine growth hormone (BGH) poly(A) sequence is set forth in SEQ ID NO: 16; the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for b12 anti-HIV antibody, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 17; the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for 4E10AB anti-HIV antibody, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 18; the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for 2G12 anti-HIV antibody, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 19; the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for 2F5AB anti-HIV antibody, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 20; the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for b12 anti-HIV antibody, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 21; the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for AR3 antibody, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 22; the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for AR3 antibody, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 23; the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for VRC01 anti-HIV antibody, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 24; the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for TCN32 anti-influenza antibody, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 25; the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for CR6261 antibody, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 26; the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for F10 antibody, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 27; the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for AR4 antibody, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 28; the nucleotide sequence for an AAV vector including the

CASI synthetic promoter, coding sequences for FI6 antibody, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 29; and the nucleotide sequence for an AAV vector including the CASI synthetic promoter, coding sequences for FI6 antibody, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 30. In some embodiments, the coding sequences of the antibody are variants of the wildtype coding sequence of the antibody. As another example, the nucleotide sequence for an AAV vector including the CASI promoter, WPRE, and SV40 poly(A) sequence is set forth in SEQ ID NO: 40. A skilled artisan will appreciate that in each of the viral vectors described above, the nucleotide sequence encoding the antibody can be replaced with any other nucleic acid sequence encoding a protein of interest, such as any other nucleic acid sequence encoding an antibody, for example any known anti-HIV, anti-HCV, and/or anti-influenza antibody.

[0127] In some embodiments, the AAV vector comprises a nucleotide sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about 98%, at least about 99%, or more, sequence identity to SEQ ID NOs: 13-30. In some embodiments, the AAV vector comprises a nucleotide sequence having at least about 90%, at least about 95%, at least about 96%, at least about 97%, at least about 98%, at least about 99%, or more, sequence identity to SEQ ID NO: 40.

[0128] In some embodiments, the viral vector includes the CMV promoter and SV40 late poly(A) sequence. In some embodiments, the AAV vector includes the CASI synthetic promoter, WPRE and SV40 late poly(A) sequence. In some embodiments, the AAV vector includes the CASI synthetic promoter, WPRE and rabbit beta-globin (RBG) poly(A) sequence. In some embodiments, the AAV vector includes the CASI synthetic promoter, WPRE and bovine growth hormone (BGH) poly(A) sequence. In some embodiments, the AAV vector includes. In some embodiments, the viral vector includes the CAG promoter and SV40 late poly(A) sequence. In some embodiments, the viral vector includes the CAG promoter, WPRE and SV40 late poly(A) sequence.

Method for producing recombinant AAVs

[0129] The present application provides methods and materials for producing recombinant AAVs that can express one or more proteins of interest in a host cell. As

described herein, the methods and materials disclosed herein allow for high production of the proteins of interest, for example, an antibody, such as a full-length antibody.

[0130] In some embodiments, methods for producing a recombinant AAV include providing a packaging cell line with a viral construct comprising a 5' inverted terminal repeat (ITR) of AAV and a 3' AAV ITR, such as described herein, helper functions for generating a productive AAV infection, and AAV cap genes; and recovering a recombinant AAV from the supernatant of the packaging cell line. Various types of cells can be used as the packaging cell line. For example, packaging cell lines that can be used include, but are not limited to, HEK 293 cells, HeLa cells, and Vero cells, for example as disclosed in US Patent Publication No. 20110201088.

[0131] In some embodiments, the supernatant of the packaging cell line is treated by PEG precipitation for concentrating the virus. In some embodiments, the precipitation occurs at no more than about 4°C (for example about 3°C, about 2°C, about 1°C, or about 1°C) for at least about 2 hours, at least about 3 hours, at least about 4 hours, at least about 6 hours, at least about 9 hours, at least about 12 hours, or at least about 24 hours. In some embodiments, the recombinant AAV is isolated from the PEG-precipitated supernatant by low-speed centrifugation followed by CsCl gradient. The low-speed centrifugation can be at about 4000 rpm, about 4500 rpm, about 5000 rpm, or about 6000 rpm for about 20 minutes, about 30 minutes, about 40 minutes, about 50 minutes or about 60 minutes. In some embodiments, the recombinant AAV is isolated from the PEG-precipitated supernatant by centrifugation at about 5000 rpm for about 30 minutes followed by CsCl gradient

[0132] In some embodiments, the viral construct further comprises a promoter and a restriction site downstream of the promoter to allow insertion of a polynucleotide encoding one or more proteins of interest, wherein the promoter and the restriction site are located downstream of the 5' AAV ITR and upstream of the 3' AAV ITR. In some embodiments, the viral construct further comprises a posttranscriptional regulatory element downstream of the restriction site and upstream of the 3' AAV ITR. In some embodiments, the viral construct further comprises a polynucleotide inserted at the restriction site and operably linked with the promoter, where the polynucleotide comprises the coding region of a protein of interest. As a skilled artisan will appreciate, any one of the AAV vector

disclosed in the present application can be used in the method as the viral construct to produce the recombinant AAV.

[0133] In some embodiments, the helper functions are provided by one or more helper plasmids or helper viruses comprising adenoviral helper genes. Non-limiting examples of the adenoviral helper genes include E1A, E1B, E2A, E4 and VA, which can provide helper functions to AAV packaging.

[0134] In some embodiments, the AAV cap genes are present in a plasmid. The plasmid can further comprise an AAV rep gene. It is contemplated by the present application that the cap genes and/or rep gene from any AAV serotype (including, but not limited to, AAV1, AAV2, AAV4, AAV5, AAV6, AAV7, AAV8, AAV9, and any variants thereof) can be used herein to produce the recombinant AAV disclosed herein to express one or more proteins of interest. In some embodiments, the AAV cap genes encode a capsid from serotype 1, serotype 2, serotype 4, serotype 5, serotype 6, serotype 7, serotype 8, serotype 9, or a variant thereof,

[0135] In some embodiments, the packaging cell line can be transfected with the helper plasmid or helper virus, the viral construct and the plasmid encoding the AAV cap genes; and the recombinant AAV virus can be collected at various time points after co-transfection. For example, the recombinant AAV virus can be collected at about 12 hours, about 24 hours, about 36 hours, about 48 hours, about 72 hours, about 96 hours, about 120 hours, or a time between any of these two time points after the co-transfection.

[0136] Helper viruses of AAV are known in the art and include, for example, viruses from the family Adenoviridae and the family Herpesviridae. Examples of helper viruses of AAV include, but are not limited to, SAdV-13 helper virus and SAdV-13-like helper virus described in US Publication No. 20110201088, helper vectors pHELP (Applied Viromics). A skilled artisan will appreciate that any helper virus or helper plasmid of AAV that can provide adequate helper function to AAV can be used herein.

[0137] The recombinant AAV viruses disclosed herein can also be produced using any convention methods known in the art suitable for producing infectious recombinant AAV. In some instances, a recombinant AAV can be produced by using a cell line that stably expresses some of the necessary components for AAV particle production. For example, a plasmid (or multiple plasmids) comprising AAV rep and cap genes, and a

selectable marker, such as a neomycin resistance gene, can be integrated into the genome of a cell (the packaging cells). The packaging cell line can then be co-infected with a helper virus (e.g., adenovirus providing the helper functions) and the viral vector comprising the 5' and 3' AAV ITR and the nucleotide sequence encoding the protein(s) of interest. The advantages of this method are that the cells are selectable and are suitable for large-scale production of the recombinant AAV. As another non-limiting example, adenovirus or baculovirus rather than plasmids can be used to introduce rep and cap genes into packaging cells. As yet another non-limiting example, both the viral vector containing the 5' and 3' AAV ITRs and the rep-cap genes can be stably integrated into the DNA of producer cells, and the helper functions can be provided by a wild-type adenovirus to produce the recombinant AAV.

[0138] In some embodiments, the recombinant AAV is not a self-complementary AAV (scAAV).

[0139] As will be appreciated with a skilled artisan, any conventional methods suitable for purifying AAV can be used in the embodiments described herein to purify the recombinant AAV. For example, the recombinant can be isolated and purified from packaging cells and/or the supernatant of the packaging cells. In some embodiments, the AAV can be purified by separation method using a CsCl gradient. Also, US Patent Publication No. 20020136710 describes another non-limiting example of method for purifying AAV, in which AAV was isolated and purified from a sample using a solid support that includes a matrix to which an artificial receptor or receptor-like molecule that mediates AAV attachment is immobilized.

Applications of the viral vectors and recombinant AAV

[0140] The viral vectors disclosed herein can be used to generate recombinant AAV expressing the protein(s) of interest. The proteins produced by the recombinant AAV generated by the methods and systems described herein have a wide variety of utilities, for example, they can be useful in applications such as diagnostics, therapeutics, research, compound screening and drug discovery.

Production of proteins in vitro

[0141] As a non-limiting example, the recombinant AAV disclosed herein can be used to produce a protein of interest *in vitro*, for example, in a cell culture. As one non-limiting

example, in some embodiments, a method for producing a protein of interest *in vitro*, where the method includes providing a recombinant AAV comprising a nucleotide sequence encoding the protein of interest; and contacting the recombinant AAV with a cell in a cell culture, whereby the recombinant AAV expresses the protein of interest in the cell. The size of the nucleotide sequence encoding the protein of interest can vary. For example, the nucleotide sequence can be at least about 1.4 kb, at least about 1.5 kb, at least about 1.6 kb, at least about 1.7 kb, at least about 1.8 kb, at least about 2.0 kb, at least about 2.2 kb, at least about 2.4 kb, at least about 2.6 kb, at least about 2.8 kb, at least about 3.0 kb, at least about 3.2 kb, at least about 3.4 kb, or at least about 3.5 kb in length. In some embodiments, the nucleotide is at least about 1.4 kb in length.

[0142] As disclosed above, the protein of interest is not in any way limited. For example, the protein of interest can be an antibody, for example a viral neutralizing antibody. The recombinant AAV disclosed here can produce high levels of the proteins of interest *in vitro*.

[0143] In some embodiments, the protein of interest is luciferase or a fluorescent protein (e.g., GFP). The recombinant AAV expressing the fluorescent protein can be used for labeling cells with fluorescent allowing visualization of the infected cells, for example muscle cells.

Production of proteins in vivo

[0144] As a non-limiting example, the recombinant AAV disclosed herein can be used to produce a protein of interest *in vivo*, for example in an animal such as a mammal. Some embodiments provide a method for producing a protein of interest *in vivo*, where the method includes providing a recombinant AAV comprising a nucleotide sequence encoding the protein of interest; and administering the recombinant AAV to the subject, whereby the recombinant AAV expresses the protein of interest in the subject. The subject can be, in some embodiments, a non-human mammal, for example, a monkey, a dog, a cat, a mouse, or a cow. The size of the nucleotide sequence encoding the protein of interest can vary. For example, the nucleotide sequence can be at least about 1.4 kb, at least about 1.5 kb, at least about 1.6 kb, at least about 1.7 kb, at least about 1.8 kb, at least about 2.0 kb, at least about 2.2 kb, at least about 2.4 kb, at least about 2.6 kb, at least about 2.8 kb, at least about 3.0 kb, at least about 3.2 kb, at least about 3.4 kb, or at least about 3.5 kb in length. In some embodiments, the nucleotide is at least about 1.4 kb in length.

[0145] As disclosed above, the protein of interest is not in any way limited. For example, the protein of interest can be an antibody, for example a viral neutralizing antibody. The recombinant AAV disclosed here can produce high levels of the proteins of interest *in vivo*. For example, the protein of interest can be expressed in the serum of the subject in the amount of at least about 9 µg/ml, at least about 10 µg/ml, at least about 50 µg/ml, at least about 100 µg/ml, at least about 200 µg/ml, at least about 300 µg/ml, at least about 400 µg/ml, at least about 500 µg/ml, at least about 600 µg/ml, at least about 700 µg/ml, at least about 800 µg/ml, at least about 900 µg/ml, or at least about 1000 µg/ml. In some embodiments, the protein of interest is expressed in the serum of the subject in the amount of about 9 µg/ml, about 10 µg/ml, about 50 µg/ml, about 100 µg/ml, about 200 µg/ml, about 300 µg/ml, about 400 µg/ml, about 500 µg/ml, about 600 µg/ml, about 700 µg/ml, about 800 µg/ml, about 900 µg/ml, about 1000 µg/ml, about 1500 µg/ml, about 2000 µg/ml, about 2500 µg/ml, or a range between any two of these values. In some embodiments, the protein of interest is expressed in the serum of the subject in the amount of at least about 9 µg/ml. In some embodiments, the protein of interest is expressed in the serum of the subject in the amount of at least about 100 µg/ml. In some embodiments, the protein of interest is expressed in the serum of the subject in the amount of at least about 500 µg/ml.

[0146] We might also want to have explicit support just for expression of antibodies in general in animals – want to make sure we have a section with a good description, and maybe something about level of expression? I was thinking that we might want to have claims to expression of, for example, HCV or HIV or Influenza antibodies in an animal (at a certain level?) – without mentioning therapy – just expression using a particular context (and possibly at a certain level) so it would be good to have specific description related to that.

Diagnostic Applications

[0147] In some embodiments, the viral vector can be used to generate recombinant AAV expressing one or more proteins of interest useful in detecting a disease or disorder and/or monitoring the progression of a disease or disorder. As used herein, the term “diagnostic” refers identifying the presence or absence of or nature of a disease or disorder. For example, when the protein of interest is an antibody, the recombinant AAV virus can be used to detect an antigen. The detection of an antigen (*e.g.*, an antigen protein, an antigen nucleic acid sequence, an antigen peptide, an antigen lipid, an antigen carbohydrate, and an antigen small

molecule) associated with a disease or disorder provides a means of diagnosing the disease or disorder. Such detection methods can be used, for example, for early diagnosis of the condition, to determine whether a subject is predisposed to a disease or disorder, to monitor the progress of the disease or disorder or the progress of treatment protocols, to assess the severity of the disease or disorder, to forecast the an outcome of a disease or disorder and/or prospects of recovery, or to aid in the determination of a suitable treatment for a subject. The detection can occur *in vitro* or *in vivo*.

[0148] Diseases contemplated for diagnosis in embodiments described herein include, but not limited to, any disease in which an antigen, such as an antigen associated with the disease, can bind specifically to the antibody of interest. For example, the antigen can be a tumor antigen, a viral antigen, a microbial antigen, an allergen, and an autoantigen. In some embodiments, the antigen is a viral antigen, such as an HIV antigen. In some embodiments, the antigen is a tumor associated antigen (TAA).

[0149] Many antibodies to diseases are known and can be used herein as the proteins of interest. For example, anti-cyclic citrullinated peptide antibodies (anti-CCP2) can be used as the protein of interest to detect rheumatoid arthritis.

[0150] In some embodiments, the disease to be diagnosed is a type of cancer, such as, for example, leukemia, carcinoma, lymphoma, astrocytoma, sarcoma and particularly Ewing's sarcoma, glioma, retinoblastoma, melanoma, Wilm's tumor, bladder cancer, breast cancer, colon cancer, hepatocellular cancer, pancreatic cancer, prostate cancer, lung cancer, liver cancer, stomach cancer, cervical cancer, testicular cancer, renal cell cancer, and brain cancer.

[0151] In some embodiments, the disease to be diagnosed is associated with infection by an intracellular parasite. For example, the intracellular parasite may be a virus such as, for example, an adenovirus, cytomegalovirus, Epstein-Barr virus, herpes simplex virus (HSV), human herpesvirus 6, varicella-zoster virus, hepatitis viruses, papilloma virus, parvovirus, polyomavirus, measles virus, rubella virus, human immunodeficiency virus (HIV), or human T cell leukemia virus. In some embodiments, the intracellular parasite may be a bacterium, protozoan, fungus, or a prion. More particularly, the intracellular parasite can be, for example, Chlamydia, Listeria, Salmonella, Legionella, Brucella, Coxiella,

Rickettsia, Mycobacterium, Leishmania, Trypanasoma, Toxoplasma, and Plasmodium. In some embodiments, the disease is malaria.

[0152] In some embodiments, the method of detecting a disease in a subject comprises selecting an antibody for the disease to be detected, inserting a polynucleotide comprising the coding region of the antibody to the viral vector disclosed herein, producing a recombinant AAV from the viral vector, infect the recombinant AAV to the subject, and determining the presence or absence of the disease in the subject based on presence or absence of specific binding between the antibody and its specific antigen.

[0153] Many other uses for antibodies are well known in the art, including therapeutic, diagnostic, forensic, environmental, and commercial applications. For example, an antigen, either *in vitro* or *in vivo*, can bind to an antibody of interest. Thus, methods disclosed herein can be used for detecting the presence of an organisms and/or an antigen (for example, polypeptides, carbohydrates, lipids or nucleic acids), in a forensic/environmental sample or tissues/cells. In some embodiments, the methods can be used in producing antibody that can allow the detection of activated state of an enzyme.

[0154] In some embodiments, the methods can be used to purify proteins, *e.g.*, in laboratory or industrial scales.

Therapeutic applications

[0155] The recombinant AAV and methods described herein can be used to express one or more therapeutic proteins to prevent or treat one or more diseases or disorders in a subject.

[0156] The recombinant AAV and methods described herein can be used to inhibit or reduce the risk of various viral infections. Some embodiments disclose a method for reducing or inhibiting the infection risk of a virus in a subject, where the method include providing a recombinant AAV comprising a nucleotide sequence encoding a neutralizing antibody for the virus; and administering the recombinant AAV to the subject, whereby the recombinant AAV expresses the antibody in the subject. The recombinant AAV can produce high level of viral neutralizing antibody. For example, in some embodiments, the recombinant AAV can express in the serum of the subject in the amount of at least about 9 µg/ml, at least about 10 µg/ml, at least about 50 µg/ml, at least about 100 µg/ml, at least about 200 µg/ml, at least about 300 µg/ml, at least about 400 µg/ml, at least about 500 µg/ml, at least about 600

μg/ml, at least about 700 μg/ml, at least about 800 μg/ml, at least about 900 μg/ml, or at least about 1000 μg/ml of the viral neutralizing antibody. In some embodiments, the viral neutralizing antibody is expressed in the serum of the subject in the amount of about 9 μg/ml, about 10 μg/ml, about 50 μg/ml, about 100 μg/ml, about 200 μg/ml, about 300 μg/ml, about 400 μg/ml, about 500 μg/ml, about 600 μg/ml, about 700 μg/ml, about 800 μg/ml, about 900 μg/ml, about 1000 μg/ml, about 1500 μg/ml, about 2000 μg/ml, about 2500 μg/ml, or a range between any two of these values.

[0157] The method disclosed herein can, for example, reduce the infection risk in the subject by at least about 2 fold, at least about 3 fold, at least about 4 fold, at least about 5 fold, at least about 8 fold, at least about 10 fold, at least about 15 fold, at least about 20 fold, at least about 25 fold, or at least about 30 fold as compared to the subjects without the viral treatment. In some embodiments, the method can reduce the infection risk in the subject by about 2 fold, about 3 fold, about 4 fold, about 5 fold, about 8 fold, about 10 fold, about 15 fold, about 20 fold, about 25 fold, about 30 fold, or a range between any two of these values as compared to the subjects without the viral treatment. In some embodiments, the method reduces the infection risk in the subject with the viral treatment by at least about 5 fold as compared to the subjects without the viral treatment. In some embodiments, the method reduces the infection risk in the subject with the viral treatment by at least about 20 fold as compared to the subjects without the viral treatment. In some embodiments, the method prevents the viral infection from occurring in the subject. In some embodiments, the method inhibits the viral infection in the subject.

[0158] Non-limiting examples of the viral infection include infections caused by a virus selected from an adenovirus, an Alphaviridae, an Arbovirus, an Astrovirus, a Bunyaviridae, a Coronaviridae, a Filoviridae, a Flaviviridae, a Hepadnaviridae, a Herpesviridae, an Alpha herpesvirinae, a Beta herpesvirinae, a Gamma herpesvirinae, a Norwalk Virus, an Astroviridae, a Caliciviridae, an Orthomyxoviridae, a Paramyxoviridae, a Paramyxoviruses, a Rubulavirus, a Morbillivirus, a Papovaviridae, a Parvoviridae, a Picornaviridae, an Aphthoviridae, a Cardioviridae, an Enteroviridae, a Coxsackie virus, a Polio Virus, a Rhinoviridae, a Phycodnaviridae, a Poxviridae, a Reoviridae, a Rotavirus, a Retroviridae, an A-Type Retrovirus, an Immunodeficiency Virus, a Leukemia Viruses, an Avian Sarcoma Viruses, a Rhabdoviruses, a Rubiviridae, a Togaviridae, and any

combinations thereof. Non-limiting examples of the viral infections include human immunodeficiency virus (HIV) infection, hepatitis C virus (HCV) infection, hepatitis B virus (HBC) infection, Epstein Barr virus infection, influenza virus infection, respiratory syncytial virus infection. In some embodiments, the viral infection is a hepatitis C viral infection. In some embodiments, the viral infection is an HIV infection. In some embodiments, the viral infection is an influenza infection.

[0159] Some embodiments provide a method of reducing the risk of viral infection for a subject who has been exposed to a virus (for example, a subject who has come into contact with another subject infected with a virus). Some embodiments provide a method of reducing the risk of viral infection for a subject who will be exposed to a virus (for example, a subject who will come into contact with another subject infected with a virus). In some embodiments, a method of preventing the viral infection is provided.

[0160] The viral vectors, recombinant AAV and methods described herein can be used to express one or more therapeutic proteins to treat various diseases. Non-limiting examples of the diseases include cancer such as carcinoma, sarcoma, leukemia, lymphoma; and autoimmune diseases such as multiple sclerosis. Non-limiting examples of carcinomas include esophageal carcinoma; hepatocellular carcinoma; basal cell carcinoma, squamous cell carcinoma (various tissues) ; bladder carcinoma, including transitional cell carcinoma; bronchogenic carcinoma; colon carcinoma; colorectal carcinoma; gastric carcinoma; lung carcinoma, including small cell carcinoma and non-small cell carcinoma of the lung; adrenocortical carcinoma; thyroid carcinoma; pancreatic carcinoma; breast carcinoma; ovarian carcinoma; prostate carcinoma; adenocarcinoma; sweat gland carcinoma; sebaceous gland carcinoma; papillary carcinoma; papillary adenocarcinoma; cystadenocarcinoma; medullary carcinoma; renal cell carcinoma; ductal carcinoma in situ or bile duct carcinoma; choriocarcinoma; seminoma; embryonal carcinoma; Wilm's tumor; cervical carcinoma; uterine carcinoma; testicular carcinoma; osteogenic carcinoma; epithelial carcinoma; and nasopharyngeal carcinoma. Non-limiting examples of sarcomas include fibrosarcoma, myxosarcoma, liposarcoma, chondrosarcoma, chordoma, osteogenic sarcoma, osteosarcoma, angiosarcoma, endotheliosarcoma, lymphangiosarcoma, lymphangioendotheliosarcoma, synovium, mesothelioma, Ewing's sarcoma, leiomyosarcoma, rhabdomyosarcoma, and other soft tissue sarcomas. Non-limiting examples of solid tumors include glioma,

astrocytoma, medulloblastoma, craniopharyngioma, ependymoma, pinealoma, hemangioblastoma, acoustic neuroma, oligodendroglioma, meningioma, melanoma, neuroblastoma, and retinoblastoma. Non-limiting examples of leukemias include chronic myeloproliferative syndromes; acute myelogenous leukemias; chronic lymphocytic leukemias, including B-cell CLL, T-cell CLL prolymphocytic leukemia, and hairy cell leukemia; and acute lymphoblastic leukemias. Examples of lymphomas include, but are not limited to, B-cell lymphomas, such as Burkitt's lymphoma; Hodgkin's lymphoma; and the like. Other non-limiting examples of the diseases that can be treated using the AAV vectors, recombinant viruses and methods disclosed herein include genetic disorders including sickle cell anemia, cystic fibrosis, lysosomal acid lipase (LAL) deficiency 1, Tay-Sachs disease, Phenylketonuria, Mucopolysaccharidoses, Glycogen storage diseases (GSD, e.g., GSD types I, II, III, IV, V, VI, VII, VIII, IX, X, XI, XII, XIII, and XIV), Galactosemia, muscular dystrophy (e.g., Duchenne muscular dystrophy), and hemophilia.

[0161] The amount of the protein of interest expressed in the subject (e.g., the serum of the subject) can vary. For example, in some embodiments the protein can be expressed in the serum of the subject in the amount of at least about 9 µg/ml, at least about 10 µg/ml, at least about 50 µg/ml, at least about 100 µg/ml, at least about 200 µg/ml, at least about 300 µg/ml, at least about 400 µg/ml, at least about 500 µg/ml, at least about 600 µg/ml, at least about 700 µg/ml, at least about 800 µg/ml, at least about 900 µg/ml, or at least about 1000 µg/ml. In some embodiments, the protein of interest is expressed in the serum of the subject in the amount of about 9 µg/ml, about 10 µg/ml, about 50 µg/ml, about 100 µg/ml, about 200 µg/ml, about 300 µg/ml, about 400 µg/ml, about 500 µg/ml, about 600 µg/ml, about 700 µg/ml, about 800 µg/ml, about 900 µg/ml, about 1000 µg/ml, about 1500 µg/ml, about 2000 µg/ml, about 2500 µg/ml, or a range between any two of these values. A skilled artisan will understand that the expression level in which a protein of interest is needed for the method to be effective can vary depending on non-limiting factors such as the particular protein of interest and the subject receiving the treatment, and an effective amount of the protein can be readily determined by a skilled artisan using conventional methods known in the art without undue experimentation.

[0162] A skilled artisan will appreciate the one or more of the viral vectors and recombinant AAV can be used together in the applications described herein. For example, recombinant AAV viruses expressing different proteins of interest or different subunit of a

protein of interest can be administered to the same subject for diagnostic and/or therapeutic purposes. In some embodiments, the recombinant viruses are co-administered to the subject. In some embodiments, the recombinant viruses are administered to the subject separately. In some embodiments, a first recombinant AAV expressing a first protein of interest and a second recombinant AAV expressing a second protein of interest can be administered to the subject together or separately, wherein the first protein of interest and the second protein of interest can be the same or different. In some embodiments, the first protein of interest is an anti-HIV neutralizing antibody and the second protein of interest is a different anti-HIV neutralizing antibody. In some embodiments, the first protein of interest is an anti-influenza neutralizing antibody and the second protein of interest is a different anti-influenza neutralizing antibody. In some embodiments, a first recombinant AAV expressing a first subunit of the protein of interest and a second recombinant AAV expressing a second subunit of the protein of interest can be administered to the subject together or separately.

Pharmaceutical composition and method of administration

[0163] Also disclosed herein are pharmaceutical compositions comprising the recombinant AAV viruses disclosed herein and a pharmaceutically acceptable carrier. The compositions can also comprise additional ingredients such as diluents, stabilizers, excipients, and adjuvants. As used herein, “pharmaceutically acceptable” carriers, excipients, diluents, adjuvants, or stabilizers are the ones nontoxic to the cell or subject being exposed thereto (preferably inert) at the dosages and concentrations employed or that have an acceptable level of toxicity as determined by the skilled practitioner.

[0164] The carriers, diluents and adjuvants can include buffers such as phosphate, citrate, or other organic acids; antioxidants such as ascorbic acid; low molecular weight polypeptides (*e.g.*, less than about 10 residues); proteins such as serum albumin, gelatin or immunoglobulins; hydrophilic polymers such as polyvinylpyrrolidone; amino acids such as glycine, glutamine, asparagine, arginine, or lysine; monosaccharides, disaccharides, and other carbohydrates including glucose, mannose, or dextrans; chelating agents such as EDTA; sugar alcohols such as mannitol or sorbitol; salt-forming counterions such as sodium; and/or nonionic surfactants such as TweenTM, PluronicTM or polyethylene glycol (PEG). In

some embodiments, the physiologically acceptable carrier is an aqueous pH buffered solution.

[0165] Titers of the recombinant AAV virus to be administered will vary depending, for example, on the particular recombinant AAV virus, the mode of administration, the treatment goal, the individual, and the cell type(s) being targeted, and can be determined by methods standard in the art.

[0166] As will be readily apparent to one skilled in the art, the useful *in vivo* dosage of the recombinant virus to be administered and the particular mode of administration will vary depending upon the age, weight, the severity of the affliction, and animal species treated, the particular recombinant virus expressing the protein of interest tat is used, and the specific use for which the recombinant virus is employed. The determination of effective dosage levels, that is the dosage levels necessary to achieve the desired result, can be accomplished by one skilled in the art using routine pharmacological methods. Typically, human clinical applications of products are commenced at lower dosage levels, with dosage level being increased until the desired effect is achieved. Alternatively, acceptable *in vitro* studies can be used to establish useful doses and routes of administration of the compositions identified by the present methods using established pharmacological methods.

[0167] Although the exact dosage will be determined on a drug-by-drug basis, in most cases, some generalizations regarding the dosage can be made. In some embodiments, the recombinant AAV expressing a protein of interest can be administered via injection to a subject at a dose of between 1×10^{11} genome copies (GC) of the recombinant virus per kg of the subject and 1×10^{13} GC per kg, for example between 5×10^{11} GC/kg and 5×10^{12} GC/kg.

[0168] The recombinant viruses disclosed herein can be administered to a subject (*e.g.*, a human) in need thereof. The route of the administration is not particularly limited. For example, a therapeutically effective amount of the recombinant viruses can be administered to the subject by via routes standard in the art. Non-limiting examples of the route include intramuscular, intravaginal, intravenous, intraperitoneal, subcutaneous, epicutaneous, intradermal, rectal, intraocular, pulmonary, intracranial, intraosseous, oral, buccal, or nasal. In some embodiments, the recombinant virus is administered to the subject by intramuscular injection. In some embodiments, the recombinant virus is administered to the subject by intravaginal injection. In some embodiments, the recombinant AAV is

administered to the subject by the parenteral route (*e.g.*, by intravenous, intramuscular or subcutaneous injection), by surface scarification or by inoculation into a body cavity of the subject. Route(s) of administration and serotype(s) of AAV components of the recombinant AAV virus can be readily determined by one skilled in the art taking into account the infection and/or disease state being treated and the target cells/tissue(s) that are to express the protein of interest. In some embodiments, the recombinant virus is administered to muscle cells.

[0169] Actual administration of the recombinant AAV virus can be accomplished by using any physical method that will transport the recombinant AAV virus into the target tissue of the subject. For example, the recombinant AAV virus can be injected into muscle, the bloodstream, and/or directly into the liver. Capsid proteins of the recombinant AAV virus may be modified so that the recombinant AAV virus is targeted to a particular target tissue of interest such as muscle and vagina. Pharmaceutical compositions can be prepared as injectable formulations or as topical formulations to be delivered to the muscles by transdermal transport.

[0170] For intramuscular injection, solutions in an adjuvant such as sesame or peanut oil or in aqueous propylene glycol can be employed, as well as sterile aqueous solutions. Such aqueous solutions can be buffered, if desired, and the liquid diluent first rendered isotonic with saline or glucose. Solutions of the recombinant AAV virus as a free acid (DNA contains acidic phosphate groups) or a pharmacologically acceptable salt can be prepared in water suitably mixed with a surfactant such as hydroxypropylcellulose. A dispersion of the recombinant AAV virus can also be prepared in glycerol, liquid polyethylene glycols and mixtures thereof and in oils. Under ordinary conditions of storage and use, these preparations contain a preservative to prevent the growth of microorganisms.

[0171] The recombinant virus to be used can be utilized in liquid or freeze-dried form (in combination with one or more suitable preservatives and/or protective agents to protect the virus during the freeze-drying process). For gene therapy (*e.g.*, of neurological disorders which may be ameliorated by a specific gene product) a therapeutically effective dose of the recombinant virus expressing the therapeutic protein is administered to a host in need of such treatment. The use of the recombinant virus disclosed herein in the manufacture

of a medicament for inducing immunity in, or providing gene therapy to, a host is within the scope of the present application.

[0172] In instances where human dosages for the recombinant AAV viruses have been established for at least some condition, those same dosages, or dosages that are between about 0.1% and 500%, more preferably between about 25% and 250% of the established human dosage can be used. Where no human dosage is established, as will be the case for newly-discovered pharmaceutical compositions, a suitable human dosage can be inferred from ED₅₀ or ID₅₀ values, or other appropriate values derived from *in vitro* or *in vivo* studies, as qualified by toxicity studies and efficacy studies in animals.

[0173] A therapeutically effective amount of the recombinant AAV can be administered to a subject at various points of time. For example, the recombinant AAV can be administered to the subject prior to, during, or after the infection by a virus. The recombinant AAV can also be administered to the subject prior to, during, or after the occurrence of a disease (*e.g.*, cancer). In some embodiments, the recombinant AAV is administered to the subject during cancer remission. In some embodiments, the recombinant AAV is administered prior to infection by the virus for immunoprophylaxis.

[0174] The dosing frequency of the recombinant AAV virus can vary. For example, the recombinant AAV virus can be administered to the subject about once every week, about once every two weeks, about once every month, about one every six months, about once every year, about once every two years, about once every three years, about once every four years, about once every five years, about once every six years, about once every seven years, about once every eight years, about once every nine years, about once every ten years, or about once every fifteen years. In some embodiments, the recombinant AAV virus is administered to the subject at most about once every week, at most about once every two weeks, at most about once every month, at most about one every six months, at most about once every year, at most about once every two years, at most about once every three years, at most about once every four years, at most about once every five years, at most about once every six years, at most about once every seven years, at most about once every eight years, at most about once every nine years, at most about once every ten years, or at most about once every fifteen years.

EXAMPLE

[0175] Additional embodiments are disclosed in further detail in the following examples, which are not in any way intended to limit the scope of the claims.

Experimental Materials and Methods

[0176] The following experimental materials and methods were used for Examples 1-9 described below.

AAV quantification and functional validation

[0177] Purified AAV was quantified by qPCR using the following general procedure. Frozen aliquots of AAV were thawed and diluted tenfold in digestion buffer containing 10 units of DNase I (Roche) and incubated at 37 °C for 30 minutes. DNase-digested virus was serially diluted and 5 µl of each dilution was used in a 15 µl qPCR reaction with PerfeCTa SYBR Green SuperMix, ROX (Quanta Biosciences) and primers designed against the CMV enhancer (5' CMV: AACGCCAATAGGGACTTTCC (SEQ ID NO: 31) and 3' CMV: GGGCGTACTTGGCATATGAT (SEQ ID NO: 32)) or the luciferase transgene (5' Luc: ACGTGCAAAAGAAGCTACCG (SEQ ID NO: 33) and 3' Luc: AATGGGAAGTCACGAAGGTG (SEQ ID NO: 34). Samples were run in duplicate on an Applied Biosystems 7300 Real Time PCR System. The following cycling conditions were used: one cycle of 50 °C for 2 minutes, one cycle of 95 °C for 10 minutes, 40 cycles of 95 °C for 15 seconds and 60 °C for 60 seconds. Virus titre was determined by comparison with a standard curve generated using either a purified DNA fragment cut with *XhoI/NheI* from the pVIP luciferase-expressing vector or a reference standard consisting of purified AAV2/8 expressing 4E10 antibody previously titred against the DNA standard.

[0178] To validate the functional activity of each lot of the titred virus, *in vitro* infection assays were performed using 293T cells and the concentration of the antibody was measured in the cell supernatant. Twenty-four hours before infection, 12-well plates were seeded with 500K cells in 1 ml of media. Two hours before infection, media was replaced with 500 µl per well of fresh media. Genome copies (10^{11}) of each virus were added to each well and allowed to infect for 6 days. Supernatants were removed and quantified for total IgG production by ELISA.

Mouse strains

[0179] Immunodeficient NOD/SCID/ γ c (NSG), immunocompetent C57BL/6 (B6) and Balb/C mice were obtained from the Jackson Laboratory. Immunodeficient Rag2/ γ c mice were obtained from A. Berns.

AAV intramuscular injection and bioluminescent imaging

[0180] Aliquots of previously titered viruses were thawed slowly on ice and diluted in TFB2 to achieve the predetermined dose in a 40 μ l volume. Mice were anaesthetized by isoflurane inhalation and a single 40 μ l injection was administered into the gastrocnemius muscle with a 28G insulin syringe. At various times after vector administration, mice were either bled to determine antibody concentration in serum or imaged using a Xenogen IVIS 200 Series imaging system (Caliper Lifesciences). To image, mice were anaesthetized by isoflurane inhalation and given 100 μ l of 15 mg ml⁻¹ D-luciferin (Gold Biotechnology) by intraperitoneal injection. Images were taken between 5 and 10 minutes after D-luciferin injection.

Quantification of antibody production by ELISA

[0181] For detection of total human IgG, ELISA plates were coated with 1 μ g per well of goat anti-human IgG-Fc antibody (Bethyl) for 1 hour. Plates were blocked with 1% BSA (KPL) in TBS for at least 2 hours. Samples were incubated for 1 hour at room temperature in TBST containing 1% BSA (KPL), then incubated for 30 minutes with HRP-conjugated goat anti-human kappa light chain antibody (Bethyl). Sample was detected with TMB Microwell Peroxidase Substrate System (KPL). A standard curve was generated using either Human Reference Serum (Lot 3, Bethyl) or purified Human IgG/Kappa (Bethyl).

[0182] For detection of gp120-binding IgG, ELISA plates were coated with 0.04-0.10 μ g per well HIV-1 gp120MN protein (Protein Sciences) for 1 hour. Plates were blocked with 1% BSA (KPL) in TBS for at least 2 hours. Samples were incubated for 1 hour at room temperature in TBST containing 1% BSA (KPL), then incubated for 30 minutes with HRP-conjugated goat anti-human IgG-Fc antibody (Bethyl). Sample was detected with TMB Microwell Peroxidase Substrate System (KPL). A standard curve was generated using either purified b12 or VRC01 protein as appropriate for the samples.

HIV virus production and titring

[0183] 293T cells were maintained in DMEM medium supplemented with 10% fetal bovine serum, 1% penicillin-streptomycin mix (Mediatech), 1% glutamine (Mediatech)

in a 5% CO₂ incubator at 37 °C. Three days before transfection, two 15cm plates were seeded with 3.75×10^6 cells each in 25 ml media. Two hours before transfection, media was changed to 15 ml of new media. Forty micrograms of the pNL4-3 plasmid36 encoding an infectious molecular clone of HIV was transfected using Trans-IT reagent (Mirus) according to the manufacturer's instructions. Supernatant collections were performed at 24, 48 and 72 hours after transfection and 15 ml of fresh media was gently added back to plate after each harvest. Pooled supernatants were filtered using a 0.45 µm filter to remove cell debris and aliquoted for storage at -80 °C. HIV was quantified following the manufacturer's instructions using an Alliance HIV-1 p24 antigen ELISA kit (Perkin-Elmer).

In vitro HIV protection assay

[0184] *In vitro* neutralization assays in luciferase reporter cells were performed according to the typical procedure described as follows. TZM-bl cells from the National Institutes of Health AIDS Research and Reference Reagent Program were maintained in DMEM medium supplemented with 10% fetal bovine serum, 1% penicillin–streptomycin mix (Mediatech), 1% glutamine (Mediatech) in a 5% CO₂ incubator at 37 °C. Before the assays, TZM-bl cells were trypsinized, counted and re-suspended in a concentration of 105 cells per millilitre, in a total volume of 15 ml. Cells were mixed with 75 µg ml⁻¹ DEAE-dextran and varying concentrations of each antibody as indicated and allowed to incubate on ice during the preparation of the virus. To prepare virus dilutions, stock NL4-3 was diluted to 250 ng ml⁻¹ in growth media and subsequently fourfold serially diluted in the assay plate. One hundred microlitres of media containing 10,000 cells pre-incubated with antibody were added to wells containing previously diluted virus. Infection was allowed to proceed for 48 hours in a 5% CO₂ incubator at 37 °C. Before reading the plate, 100 µl of BriteLite reagent (Perkin Elmer) was added to each well, and the plate was incubated for 2 minutes at room temperature. One hundred and twenty microlitres of each well was then transferred to an opaque plate and read by VICTOR3 (Wallac 1420 VICTOR3 plate reader, PerkinElmer).

Production of humanized mice for in vivo challenge

[0185] Humanized mice were produced essentially according to the procedure described as follows. Human peripheral mononuclear blood cells (AllCells) were thawed from -80 °C, expanded in RPMI medium supplemented with 10% fetal bovine serum, 1% penicillin–streptomycin mix (Mediatech), 1% glutamine (Mediatech), 50 µM β-

mercaptoethanol, 10 mM HEPES(Gibco), 13 non-essential amino acids (Gibco), 13 sodium pyruvate (Gibco) and stimulated for T-cell expansion with $5 \mu\text{g ml}^{-1}$ phytohemagglutinin (Sigma) and 10 ng ml^{-1} human IL-2 (Peprotech) in a 5% CO_2 incubator at 37°C . Cells were expanded for 7–13 days before use. For engraftment, 2 million to 4 million cells were injected intraperitoneally into NSG mice in a 300 ml volume of media.

HIV protection experiments

[0186] One day before HIV challenge, blood samples from each mouse were subjected both to ELISA for antibody quantification and flow cytometry to determine baseline CD4/CD8 ratios. The following day, mice were challenged through either intraperitoneal or intravenous injection of 100 μl containing the specified dose of HIV diluted in PBS. Infected mice were subjected to weekly blood sampling to determine the ratio of CD4 to CD8 cells in the T-lymphocyte subset by flow cytometry.

Flow cytometry

[0187] Blood samples were taken from mice by retro-orbital bleeding and were centrifuged for 5 minutes at 1,150g in a microcentrifuge to separate plasma from cell pellets. Plasma was removed and frozen for future analysis and cell pellets were re-suspended in 1.1 ml of $1\times$ RBC lysis buffer (Biolegend) and incubated on ice for at least 10 minutes to remove red blood cells. After lysis, samples were pelleted at 1,150g in a microcentrifuge for 5 minutes at room temperature, and stained with 65 μl of a cocktail containing 5 μl anti-human CD3-FITC, 5 μl anti-human CD4-PE, 5 μl anti-human CD8a-APC antibodies (Biolegend) and 50 μl of phosphate buffered saline supplemented with 2% fetal bovine serum (PBS1). Samples were washed with 1 ml PBS+ and again pelleted at 1,150g in a microcentrifuge for 5 minutes. Pelleted cells were re-suspended in 200 μl of PBS+ supplemented with $2 \mu\text{g ml}^{-1}$ propidium iodide (Invitrogen) and analysed on a FACSCalibur flow cytometer (Beckton-Dickinson). Samples were first gated by CD3 expression before determining the ratio of CD4 to CD8 cells within this subset. Samples containing fewer than 20 CD3^+ events were excluded from the analysis.

Histological staining for HIV p24

[0188] At the conclusion of the *in vivo* challenge experiments, spleens were removed from mice and immersed in 10% neutral buffered formalin for 24 hours. After fixation, tissues were removed and placed in 70% ethanol until standard paraffin embedding

and processing. Sections (4 mm thick) were then taken and immunohistochemical staining was performed for HIV-p24 detection using the Kal-1 murine monoclonal antibody and standard antigen retrieval techniques. The slides were reviewed by a pathologist (D.S.R.) on an Olympus BX51 light microscope and images obtained using a SPOT Insight Digital Camera (Diagnostic Instruments).

Example 1

Construction and cloning of modular AAV transfer vectors

[0189] To construct the AAV transfer vectors, oligonucleotides encoding the 145-base-pair (bp) AAV2-derived inverted terminal repeat 1 (ITR1) in the ‘flip’ orientation and ITR2 in the ‘flop’ orientation flanked by unique restriction sites were synthesized (Integrated DNA Technologies) and annealed before ligation into PBR322 plasmid vector. Subsequently, promoters, transgenes and polyadenylation signals flanked by compatible sites were amplified by PCR and cloned between the ITRs, resulting in a modular AAV transfer vector in which unique combinations of restriction sites flanked each element.

[0190] To evaluate the expression potential of various promoters in muscle expression, a series of vectors carrying the luciferase gene driven by a panel of ubiquitous and tissue-specific promoters were made. These vectors were administered intramuscularly via a single injection in the gastrocnemius muscle and luciferase expression was monitored to determine the relative expression potential of each promoter in this target tissue. The cytomegalovirus immediate early promoter (CMV), chimeric chicken- β -actin (CAG), and ubiquitin C (UBC) promoters provided robust muscle expression (Fig. 1A).

[0191] A novel synthetic CASI promoter (about 1.05 kb in length) (Fig. 1B) was generated. The CASI promoter consists of the cytomegalovirus immediate early promoter (CMV) followed by a fragment of chicken- β -actin (CAG) promoter containing the transcription initiation site. This fusion is immediately followed by a synthetically designed intron that utilizes consensus splice donor and splice acceptor sequences flanking the enhancer region of the human ubiquitin C (UBC) promoters. *In vivo* testing demonstrated that the CASI promoter was considerably more active in muscle than the CAG promoter despite being 34% more compact (Fig. 1C). The woodchuck hepatitis virus posttranscriptional regulatory element (WPRE) was then incorporated into the AAV transfer vector, which significantly enhanced expression of transgenes (Fig. 1D).

[0192] The efficiencies of various polyadenylation signals were also examined for muscle-derived expression. The SV40 late poly(A), the rabbit beta-globin (RBG) poly(A) and the bovine growth hormone (BGH) poly(A) all demonstrated comparable levels of expression (Fig. 1D).

[0193] Fig. 1E shows a schematic illustration of a portion of the muscle-optimized expression vector encoding an IgG1 scaffold into which heavy and light chain V regions derived from monoclonal antibodies could be inserted.

[0194] Fig. 2 shows a schematic presentation of the map of a muscle-optimized expression vector with a luciferase transgene inserted. As shown in Supplementary Figure 2, the vector has unique restriction sites flanking each modular element (*e.g.*, *XhoI*, *SpeI*, *NotI*, *BamHI*, *Acc65I*, *HindIII*, and *NheI*). In this vector, AAV sequences begin immediately following the *XhoI* restriction site with a 145bp “flip”-inverted terminal repeat (ITR) from AAV2 followed by a *SpeI* restriction site and the CAG promoter. The CAG promoter is followed by a *NotI* restriction site and one additional C residue following the consensus recognition sequence of GCGGCCGC (SEQ ID NO: 35) cleavage site to mimic a Kozak consensus sequence prior to the ATG of the luciferase transgene. The 3' end of the transgene is terminated with a TAA stop codon followed by one additional A residue prior to the *BamHI* site. The WPRE element follows this restriction site and continues until an *Acc65I* restriction site that precedes an SV40 late polyadenylation signal and *HindIII* restriction site. In addition, a second 145bp AAV2 “flop”-ITR is located prior to a *NheI* site.

Example 2

Production and purification of recombinant AAV viruses

[0195] Recombinant AAV virus was produced and purified from culture supernatants according to the procedure as described in the following.

[0196] 293T cells were maintained in DMEM medium supplemented with 10% fetal bovine serum, 1% penicillin-streptomycin mix (Mediatech) and 1% glutamine (Mediatech) in a 5% CO₂ incubator at 37 °C. Three days before transfection, four 15 cm plates were seeded with 3.75×10⁶ cells each in 25 ml media. Alternatively, 1.875 x 10⁶ cells can be plated per plate four days before the day of transfection (7.5 x 10⁶ cells plated per virus). Two hours before transfection, media was changed to 15 ml of fresh media.

[0197] The AAV transfer vector was co-transfected with adenoviral helper vectors (pHELP (Applied Viromics) or pAd-delta-F6) and helper plasmid expressing the Rep and Cap gene products of AAV (pAAV 2/8 SEED) at a ratio of 0.25:1:2 using BioT transfection reagent (Bioland Scientific). The total amount of DNA used per transfection was 80 µg. Five AAV virus collections were performed at 36, 48, 72, 96, and 120 hours after transfection. For each time point, media was filtered through a 0.2 µm filter and 15 ml of fresh media was gently added to the plate.

[0198] After collection, approximately 75 ml of 5×PEG solution (40% polyethylene glycol, 2.5M NaCl) was added to the total volume of supernatant collected (~300 ml) and the virus was precipitated on ice for at least 2 hours. Precipitated virus was pelleted at 7,277g for 30 minutes (Sorvall RC 3B Plus, H-6000A rotor) and re-suspended in 1.37 g ml⁻¹ caesium chloride. Resuspended virus was split evenly into two Quick-Seal tubes (Beckman) and spun at 329,738g at 20 °C for 24 hours (Beckman Coulter, Optima LE-80K, 70Ti rotor). Fractions of 100-200 ml were collected in a 96-well flat-bottom tissue culture plate, and a refractometer was used to quantify the refractive index of 5 ml of each fraction. Wells exhibiting refractive indexes between 1.3755 and 1.3655 were combined and diluted to a final volume of 15 ml using Test Formulation Buffer 2 (TFB2, 100mM sodium citrate, 10mM Tris, pH 8). Virus was loaded onto 100 kDa MWCO centrifugal filters (Millipore) and subjected to centrifugation at 500g at 4 °C until 1 ml retentate remained. Retained virus was then again diluted to 15 ml total volume in TFB2 and this process was repeated such that the virus was washed three times. Final retentate volume was between 500-1000 ml total, which was aliquoted and stored at -80 °C.

Example 3

Optimization of the antibody transgene

[0199] To create an optimal framework for the expression of antibody, the heavy and light chains of several broadly neutralizing HIV antibodies separated by an F2A self-processing peptide sequence were cloned into a mammalian expression vector under the control of the CMV promoter. 293T cells transfected with these vectors demonstrated secretion of human IgG into the culture supernatant that could be detected by ELISA (Fig. 3A). To improve expression, the F2A sequence was re-engineered to better reflect mammalian codon usage and incorporated a furin cleavage site at the N-terminus for optimal

processing. Comparison of the vectors with optimized F2A sequence (SEQ ID NO: 9) to the vector with standard F2A sequence (SEQ ID NO: 10) by transfection showed the vectors with optimized F2A sequence produced higher levels of all four antibodies tested.

[0200] To improve secretion of the antibody, the endogenous signal sequences was replaced with a codon optimized sequence derived from the human growth hormone (HGH) and created versions of the 4E10 expression vector in which either the heavy chain, the light chain, or both chains were driven by separate HGH signal sequences and compared their expression by transfection. To minimize repetitive sequence in the vectors, two HGH sequences (SEQ ID NOs: 11 and 12) were synthesized which had distinct nucleotide sequences but encoded identical amino acids, and each were used for either the heavy or light chain exclusively. Replacement of the endogenous signal sequences with HGH sequences at either the heavy or light chains resulted in higher levels of antibody production, and signal sequence replacement of both chains yielded the best results (Fig. 3B).

[0201] To remove the potential for inappropriate splicing of the transcript encoding the antibody, the sequence was subjected to *in silico* splice prediction and removed all potential splice donor and acceptor sequences through the use of conservative mutations to the site or, when this was not possible, the surrounding sequences. Improved expression of the 4E10 antibody was observed when placed in this splice-optimized framework (Fig. 3C).

[0202] A schematic illustration of the structure of the final antibody transgene is shown in Fig. 3D. As shown in Fig. 3D, the antibody transgene consists of an HGH signal sequence followed by a swappable VH region, a splice-optimized heavy chain constant region, a furin cleavage site linked to an optimized F2A peptide which is fused to a second HGH signal sequence, a swappable VL region, and a spliceoptimized kappa light chain constant region.

[0203] To confirm that the above-described optimizations made to improve gene expression did not impact the neutralizing efficacy of the antibodies, several well-studied broadly neutralizing antibodies (e.g., b12, 2G12, 4E10, and 2F5 anti-HIV antibodies) were expressed from the optimized expression vector. The produced antibodies were purified and tested in an *in vitro* protection assay using TZM-bl luciferase reporter cells. Cells carrying a luciferase gene under the control of HIV-induced transcriptional elements (TZM-bl cells)

were incubated with dilutions of each antibody prior to challenge with increasing amounts of HIV. Cells were plated with various concentrations of the antibodies prior to challenge with increasing titers of NL4-3 HIV strain. Two days after challenge, cells were lysed and quantitated for luciferase activity following the addition of luciferin substrate. Robust reduction in TZM-bl cell infection was observed at antibody concentrations that correlated well with the previously established IC₅₀ and IC₉₀ values for all four antibodies tested against this strain (Fig. 4A-D).

Example 4

In vivo expression of antibody transgenes

[0204] Recombinant AAV viruses with the capsid from serotype 8 that expressed either luciferase or 4E10 HIV neutralizing antibody driven from cytomegalovirus (CMV) promoters were administered to mice through a single injection of the gastrocnemius muscle. The Xenogen images of a representative Rag2/ γ c mouse 15 weeks after intramuscular injection of 1×10^{10} genome copies of AAV2/8 expressing luciferase are shown in (Fig. 5A). Within one week of the administration, either luciferase or antibody gene expression was detectable (Figs. 5B and 5C, respectively). Expression continued to rise, achieving maximum levels after 12–16 weeks and then decreasing two- to three-fold before stabilizing for the duration of the 64-week study. Figs 5B-C show that antibody production is dose-dependent and is maintained for at least 64 weeks.

[0205] The heavy- and light-chain variable regions of the HIV-neutralizing b12 antibody were cloned into the AAV transfer vector, and recombinant AAV stock was produced for intramuscular administration of 1×10^{11} genome copies into the gastrocnemius muscle of two immunodeficient and two immunocompetent mouse strains: NOD/SCID/ γ c (NSG), Rag2/ γ c (RAG), C57BL/6 (B6) and Balb/C. Mice produced the encoded antibody at serum concentrations that were 100-fold higher than the levels achieved with the nonoptimized vector, and this level of expression persisted for at least 52 weeks (Fig. 6 compared with Figs. 5C). Very limited mouse antibodies were raised against human b12-IgG in B6 mice, whereas Balb/C animals generated detectable mouse antibodies against the transgene that did not appear to impact human IgG levels.

Example 5

Prevention of loss of CD4 cells caused by HIV challenge

[0206] HuPBMC-NSG humanized mice exhibits CD4 cell depletion following challenge with replication competent HIV (20 ng p24 NL4-3, n = 4, Fig. 7). This mouse model was used to test ability of the vectors described herein to protect mice from *in vivo* challenge.

[0207] Recombinant AAV viruses expressing either luciferase or b12 antibody were administered to NSG mice, producing stable serum b12 antibody concentrations of approximately 100 $\mu\text{g ml}^{-1}$ within 6 weeks (Fig. 8A). These mice were adoptively populated with expanded human peripheral blood mononuclear cells (huPBMCs), which engrafted over a period of 2 weeks. Mice were then challenged by intraperitoneal injection of the NL4-3 strain of HIV.

[0208] After HIV challenge, most mice expressing luciferase showed dramatic loss of CD4 cells whereas mice expressing b12 antibody showed no CD4 cell depletion (Fig. 8B).

[0209] This example demonstrates that the recombinant AAV virus expressing an anti-HIV antibody can protect mice from CD4 cell loss caused by HIV infection.

Example 6

Protection using various HIV neutralizing antibodies

[0210] To compare the protective abilities of various broadly neutralizing HIV antibodies, recombinant AAV viruses expressing b12, 2G12, 4E10 and 2F5 were produced and administered to NSG mice, respectively. Seven weeks after administration, NSG mice produced 20–250 $\mu\text{g ml}^{-1}$ of the indicated antibodies (Fig. 9A). *In vivo* serum concentrations of each of the HIV antibodies were measured. The results are shown in (Fig. 3A).

[0211] Transduced mice were adoptively populated with huPBMCs, challenged by intravenous injection with HIV and sampled weekly to quantify CD4 cell depletion over time (Fig. 9B). As shown in Fig 9B, animals expressing b12 were completely protected from infection, and those expressing 2G12, 4E10 and 2F5 were partly protected. Groups demonstrating partial protection consisted of animals with delayed CD4 cell depletion as well as animals that maintained high CD4 cell levels throughout the course of the experiment.

[0212] Eight weeks after challenge, mice were killed and paraffin-embedded spleen sections underwent immunohistochemical staining for the HIV-expressed p24 antigen to quantify the extent of infection (Fig. 9C). As shown in Fig. 9D, mice expressing b12 had no detectable p24-expressing cells.

Example 7

Determination of the robustness of anti-HIV protection

[0213] A large cohort of mice expressing b12 antibody were adoptively populated with huPBMCs. Before challenge, all mice expressed high levels of human IgG, presumably owing to engrafted human B-cells (Fig. 10A), but only those receiving the b12-expressing vector produced IgG specific for gp120, which reached 100 $\mu\text{g ml}^{-1}$ (Fig. 10B).

[0214] Mock-infected mice expressing either luciferase or b12 demonstrated consistent high-level CD4 cell engraftment throughout the course of the experiment, showing that transgene toxicity was not contributing to CD4 cell loss (Fig. 11). In contrast, mice expressing luciferase that received 1 ng of HIV experienced rapid and extensive CD4 cell depletion. At higher doses, infection in luciferase expressing mice became more consistent and resulted in depletion of CD4 cells below the level of detection in some cases (25, 125 ng doses). Remarkably, all mice expressing b12 demonstrated protection from CD4 cell loss, despite receiving HIV doses over 100-fold higher than necessary to deplete seven out of eight control animals (Fig. 11).

[0215] This example shows that the recombinant AAV virus disclosed herein can be used to provide effective and robust immunoprophylaxis against HIV infection.

Example 8

Expression of b12 anti-HIV antibody

[0216] Fig. 12A is a plot showing b12 expression over time as a function of dose as determined by total human IgG ELISA on serum samples taken following AAV administration (n=8). Mice receiving luciferase-expressing vector exhibited no detectable human antibodies (n=12). Fig. 12B shows concentration of b12 in serum one day prior to challenge, 3 weeks after adoptive transfer of human PBMCs and 15 weeks after intramuscular administration of the indicated dose of AAV as determined by a gp120-specific ELISA to measure the fraction of antibodies capable of binding HIV (n=8-12). Fig. 12C shows CD4 cell depletion in HuPBMC-NSG humanized mice as a result of intravenous

challenge with 10ng of NL4-3 into animals expressing a range of b12 demonstrating the minimum dose of antibody necessary to protect against infection. Figs 12A and C show mean and standard error, plot b shows individual animals and mean (n = 8-12).

Example 9

Comparison of b12 and VRC01 antibodies in anti-HIV protection

[0217] In this examples, b12 antibody was compared with VRC01 antibody, an anti-HIV antibody found to neutralize over 90% of circulating HIV strains *in vitro*. Decreasing doses of vector expressing either b12 or VRC01 were administered to NSG mice, and expression of the antibodies over time was monitored.

[0218] For both antibodies, dose-dependent expression was observed at all time points analysed (Fig. 12A and Fig. 13A). Mice expressing luciferase or antibodies at various levels were adoptively populated with huPBMCs. Just before challenge, a gp120-specific enzyme-linked immunosorbent assay (ELISA) confirmed the effective antibody concentration in each group (Fig. 12B and Fig. 13B). After intravenous challenge with 10 ng of HIV, CD4 cells were monitored to determine the impact of antibody concentration. An average b12 concentration of 34 $\mu\text{g ml}^{-1}$ and VRC01 concentration of 8.3 $\mu\text{g ml}^{-1}$ protected mice from infection (Fig. 12C and Fig. 13C). Groups expressing lower concentrations of b12 and VRC01 were partly protected, with several animals showing no detectable loss of CD4 cells and others exhibiting delayed CD4 cell depletion.

Example 10

Protection from influenza infection

[0219] In this example, the AAV vector disclosed herein were used to produce recombinant AAV viruses expressing anti-influenza antibodies, and the recombinant AAV viruses were found to be effective in protecting mice from influenza virus infection.

Experimental materials and methods

Influenza virus production and quantification

[0220] All influenza viruses used for the mouse infections in this example derived their six internal genes (PB2, PB1, PA, NP, M, and NS) from the A/Puerto Rico/8/1934 (H1N1) strain. The HA and NA genes were derived from the following three strains and given the following name abbreviations:

(1) PR8: the HA and NA derived from A/Puerto Rico/8/1934 (H1N1), a widely used lab-adapted strain.

(2) CA/09: the HA and NA derived from A/California/07/2009 (H1N1), a strain isolated early during the emergence in humans of the 2009 swine-origin H1N1 pandemic.

(3) SI/06: the HA and NA derived from A/Solomon Islands/3/2006 (H1N1), a human seasonal H1N1 vaccine strain.

[0221] The influenza viruses were generated using the 8-plasmid bidirectional reverse-genetics system. Briefly, 293T and MDCK cells were maintained in DMEM (Mediatech) supplemented with 10% fetal bovine serum (Omega Scientific), 100 IU/mL penicillin (Mediatech), 100 µg/mL streptomycin (Mediatech), and 1% L-glutamine (Mediatech). 6-well tissue culture dishes (Corning) containing co-cultures of 293T and MDCK cells were co-transfected with 250 ng of each of the 8 plasmids. At 14 hours post-transfection, the media was aspirated, the cells were washed once with PBS, and influenza growth medium plus 3 µg/mL of TPCK-treated trypsin (Sigma-Aldrich) was added to the cells. Influenza growth medium consists of Opti-MEM I (Invitrogen) with 0.01% fetal bovine serum, 0.3% bovine serum albumin (Invitrogen), 100 IU/mL penicillin, 100 µg/mL streptomycin, and 100 µg/mL calcium chloride. After 72 hours, the supernatant was collected and passaged to 15 cm dishes (Corning) containing nearly confluent MDCK cells in influenza growth medium plus 3 µg/mL trypsin. After 72 hours, the viral supernatant was harvested and centrifuged at 2,000xg for 5 minutes. The viral supernatant was removed and aliquoted, and the aliquots were frozen at -80°C.

Plaque assays

[0222] The influenza viruses were quantified by plaque assays on MDCK cells using an Avicel microcrystalline cellulose overlay. Briefly, MDCK cells were seeded into 6-well tissue culture dishes. When the cells were 95% confluent, the media was removed and serial 10-fold dilutions of viral inoculum were added to a 1 mL final volume of influenza growth medium. After 40 minutes, the inoculum was removed by aspiration and replaced by 4 ml of influenza growth media with 2.4% Avicel microcrystalline cellulose and 3 µg/ml of TPCK-treated trypsin. The plates were grown undisturbed for 3 days at 37°C. The overlay was then removed by aspiration, the cell layer was washed twice with PBS, and the cells

were stained with 0.1% crystal violet in 20% ethanol for 15 minutes. This staining solution was then removed by aspiration, the cells were washed again with PBS, and the plaques were counted visually to determine the viral titer in terms of plaque forming units (PFU).

Mouse strains

[0223] Immunocompetent BALB/cJ (BALB/c) and immunodeficient NOD/SCID/ $\gamma^{-/-}$ (NSG) mice of approximately 4-5 weeks of age were obtained from the Jackson Laboratory (JAX). For experiments involving aged mice, these animals were bred and housed under barrier conditions for the period of time prior to influenza challenge.

Cloning of influenza neutralizing antibodies into AAV vector

[0224] Sequences corresponding to the heavy and light chain variable regions of various influenza antibodies were synthesized (Integrated DNA Technologies) and cloned into an AAV transfer vector containing the IgG1 constant region framework. In some instances, the antibody gene was optimized to improve antibody production *in vivo*.

AAV production and administration to mice

[0225] AAV production and intramuscular injection were performed according to the procedure described as follows. Briefly, 1.2×10^8 293T cells were transfected with 80 μ g of the vector encoding the antibody of interest, pHELP (Applied Viromics), and pAAV 2/8 SEED (University of Pennsylvania Vector Core) at a ratio of 0.25:1:2. Supernatant was collected 5 times over the course of 120 hours. Virus was purified by PEG precipitation and cesium chloride fractionation before being diafiltrated, concentrated, and buffer exchanged through 100k MWCO centrifuge filters (Millipore) into buffer consisting of 100 mM sodium citrate and 10 mM Tris pH 8 prior to aliquoting and storage at -80°C . To quantify aliquots, virus was thawed, treated with DNase, and titered by qPCR as previously described (13). Briefly, virus titer was determined by quantitative PCR using a standard curve generated from previously-titered, purified, AAV2/8 encoding 4E10 antibody. Infectivity of virus aliquots was confirmed *in vitro* by transducing 293T cells and quantifying antibody concentration in the cell supernatant by ELISA.

AAV transduction of mice and quantitation of gene expression

[0226] Prior to intramuscular injection, recombinant AAV viruses were thawed and diluted to the indicated dose with buffer (100 mM sodium citrate, 10 mM Tris pH 8) in a

40 μ L volume. Mice were anesthetized by isoflurane inhalation, and viruses were administered as a single injection of 40 μ L into the gastrocnemius muscle.

[0227] Bioluminescent imaging and was performed using an IVIS 200 instrument essentially as previously described with the following modifications: Bioluminescent images were taken 10 minutes after intraperitoneal injection of 1.5 mg D-luciferin (Gold Biotechnology). The concentration of human IgG in mouse serum was determined by performing ELISAs using a standard curve generated from purified Human IgG/Kappa (Bethyl).

Challenge of mice with influenza

[0228] Influenza viruses were thawed and diluted in PBS to deliver the indicated dose in a 20 μ L volume. Prior to inoculation, mice were weighed and anaesthetized by intraperitoneal injection of 200 μ L of a cocktail containing 2 mg of ketamine and 0.2 mg xylazine diluted in PBS. Mice were challenged with influenza by intranasal inoculation with 20 μ L of diluted virus, 10 μ L per nostril. Infected mice were weighed at the same time each day.

GFP influenza virus production and quantification

[0229] PB1flank-GFP influenza viruses were generated in which GFP is packaged in the PB1 segment according to the methods described in Bloom *et al.* Science 328:1272 (2010). PB1flank-GFP viruses were grown and assayed in 293T-CMV-PB1 and MDCK-SIAT1-CMV-PB1 cells that supplied the missing PB1 protein in trans, as described in Bloom *et al.* PB1flank-GFP viruses were generated using the 8-plasmid bidirectional reverse-genetics system, but with the standard PB1 plasmid replaced by pHH-PB1flank-eGFP. For these viruses, the other five internal genes (PB2, PA, NP, M, and NS) were derived from the PR8 strain as for the viruses used in the mouse infections. In addition to viruses with the HA and NA from PR8, CA/09, and SI/06, two additional viruses were used in these assays:

(1) JP/57: the HA and NA derived from A/Japan/305/1957 (H2N2), an early strain from the Asian Flu pandemic.

(2) Viet/04: the HA from A/Vietnam/1203/2004 (H5N1), a highly pathogenic avian influenza strain. The NA for this virus was derived from the lab-adapted A/WSN/1933 (H1N1) strain. The polybasic cleavage site was removed from the HA.

[0230] PB1flank-GFP viruses were quantified by flow cytometry. MDCK-SIAT1-CMV-PB1 cells were seeded in 12-well dishes (Corning) at 10⁵ cells per well in 1 mL of influenza growth medium. 8 hours after seeding, viruses were diluted 1:10, 1:100, and 1:1000 in media. Wells were infected with 50 μ L of each of these dilutions. Cells were harvested 16.5 h post-infection by incubation with 250 μ L of trypsin-EDTA (Invitrogen) for five minutes, removal of trypsin by aspiration, and re-suspension in 250 μ L of PBS supplemented with 2% fetal bovine serum and 2 μ g/mL propidium iodide (Invitrogen). Samples were analyzed on a FACSCalibur flow cytometer (Beckton-Dickinson), and samples with a percentage of GFP-positive cells between 0.3-3% were used to quantify viral titer. Titer was calculated from the percentage of GFP-positive cells, the dilution factor, and the total count of 10⁵ cells per well.

Neutralization assays

[0231] Neutralization assays were performed using PB1flank-GFP influenza viruses and MDCK-SIAT1-CMV-PB1 cells. 40 μ L of influenza growth medium were added to all wells of a flat-bottom 96-well tissue culture dish (Corning), except for Row A, which received 57 μ L of media. Mouse sera samples were serially diluted by adding 3 μ L of serum to the 57 μ L of influenza growth medium in Row A, then performing 1:3 serial dilutions down to Row G, resulting in an initial dilution of 1:20 and final dilution of 1: 4.374 x 10⁴. 2 x 10⁴ infectious particles of PB1flank-GFP virus (as determined by flow cytometry titering) were added to samples in a 20 μ L volume of influenza growth medium. The mixtures of diluted serum and virus were incubated for 1 h in a 5% CO₂ incubator at 37°C. After incubation, 2 x 10⁴ MDCK-SIAT1-CMV-PB1 cells in a 20 μ L volume of influenza growth medium were added to all wells for an MOI of 1. A cell-only control, which received naive BALB/c mouse serum and no virus, and a virus control, which received naive BALB/c mouse serum, were included for each virus. Plates were incubated in a 5% CO₂ incubator at 37°C for 18 hours. Post-incubation, 40 μ L of 1.5% Triton X-100 (Sigma-Aldrich) in PBS was added to each well to give a final concentration of 0.5% Triton X-100, and plates were incubated at room temperature for 5 minutes. 100 μ L of each sample was transferred into opaque 96-well plates (Corning) for reading. GFP fluorescence was quantified using a Safire2 plate reader (Tecan) configured to read from the top with an excitation of 485 nm, emission of 515 nm, 12 nm slit widths for both excitation and emission, gain set to

“optimal,” an integration time of 500 μ s, and 5 reads per well. Baseline fluorescence from the cell-only control was subtracted from all readings. Samples were normalized to the virus control.

Histology

[0232] At the conclusion of the *in vivo* challenge experiments, lungs were removed from mice and half of this tissue was immersed in 10% neutral buffered formalin for 24 hours. Following fixation, tissues were removed from formalin and placed in 70% ethanol until standard paraffin embedding and processing. Four-micron thick sections were then taken, and hematoxylin and eosin staining (H&E) staining was performed. The slides were reviewed by a pathologist (D.S.R.) on an Olympus BX51 light microscope, and images were obtained using a SPOT Insight Digital Camera (Diagnostic Instruments). Inflammation was scored as follows: 0= no to minimal inflammation; 1= occasional infiltrates in bronchioles (less than 10% of bronchioles); 2= easily identified infiltrates in bronchioles (10-50% of bronchioles); 3= easily identified infiltrates in bronchioles with parenchymal infiltrates and/or early patchy fibrosis; 4= >50% of bronchioles with infiltrates, OR 10-50% bronchiole involvement with extensive necrotic epithelium in bronchioles, angioneclerosis, or extensive fibrosis. Scoring was done in a blinded fashion and an ordinal scale was assumed for any statistical tests.

Relative viral quantification by RT-qPCR

[0233] Lung tissue was homogenized in 100 μ L PBS. 25 μ L of homogenate was used for RNA extraction via TRIzol Reagent (Invitrogen). Purified RNA was re-suspended in nuclease-free water, and RNA concentration was normalized to 150 ng/ μ L. Real-time RT-qPCR was performed using qScript One-Step SYBR Green qRT-PCR Kit, Rox (Quanta Biosciences) with primers designed against PR8 M and an endogenous control consisting of mouse ribosomal protein L32. Forward-M: CAAGCAGCAGAGGCCATGGA (SEQ ID NO: 36), Reverse-M: GACCAGCACTGGAGCTAGGA (SEQ ID NO: 37), Forward-L32: AAGCGAAACTGGCGGAAAC (SEQ ID NO: 38), Reverse-L32: TAACCGATGTTGGGCATCAG (SEQ ID NO: 39). Samples were DNase-treated using Turbo DNase kit (Invitrogen) and run in triplicate on an ABI 7300 Real-Time PCR System (Life Technologies) with the following program: 50°C for 10 minutes, 95°C for 5 minutes, 40 cycles of 95°C for 15 seconds and 55°C for 30 seconds, followed by a melt curve

analysis. Each sample was individually normalized by L32 signal to account for variation in input RNA.

Expression of anti-influenza antibody *in vivo*

[0234] Recombinant AAV viruses expressing unmodified full-length F10 or CR6261 anti-influenza antibody were produced. A single intramuscular injection of 1×10^{11} genome copies (GC) of the recombinant AAV virus was administered into the gastrocnemius muscle of Balb/c mice. Serum samples were obtained weekly and human IgG was quantified by ELISA (Fig. 14). Significant expression of the b12 antibody above 100 $\mu\text{g/mL}$ was observed. In contrast, both F10 and CR6261 antibodies demonstrated approximately 1 $\mu\text{g/mL}$ of expression at one week that became undetectable at the following time point prior to slowly rising to several micrograms per mL of serum by week 7.

[0235] To improve the *in vivo* expression of F10 and CR6251 antibodies, chimeric antibody constructs in which the light chains of each of the F10 and CR6251 antibodies were replaced with the light chain of b12. Following transfection of 293T cells, substantially higher expression of both antibodies were observed when paired with b12 light chains, indicating that the non-native light chain improved antibody expression (Fig. 15A). To improve expression of the natural light chains, a set of modified light chain variable regions containing 5' and 3' junctional sequences derived from the light chains of either b12 or 4E10 antibodies was created. The modified light chain variable regions used are listed in Fig. 15B. Following transfection of 293T cells, the F10LO24 light chain containing sequences from b12 as well as 4E10 exhibited as much as 12-fold higher expression *in vitro* (Fig. 15C)]. Likewise, transfection of constructs containing CR6261LO13 light chain with sequences from b12 antibody exhibited as much as 20-fold higher expression *in vitro* (Fig. 15D). These modified antibodies were tested using *in vitro* neutralization assays, and the results confirmed that antibodies containing modified light chains maintained their ability to neutralize two strains of influenza. In light of the substantially improved antibody expression observed for modified light chains, all subsequent experiments were carried out with the F10LO24 and CR6261LO13 modified sequences and referred to as F10 and CR6261 respectively. The complete variable region sequences used, including the chimeric light chain variable regions, are provided in SEQ ID NOs: 40-43.

[0236] As shown in Fig. 16A, a single intramuscular injection of 1x10¹¹ genome copies (GC) of AAV into BALB/c mice produced detectable antibody within one week of injection. Antibody concentrations transiently declined prior to increasing over the following 6-8 weeks, reaching a plateau between 50-200 µg/mL that was maintained for the duration of the 40 week study.

In vitro neutralization assays

[0237] To determine the breadth of neutralizing potential of sera from animals treated with the recombinant AAV viruses, *in vitro* neutralization assays were performed using GFP-reporter influenza virions containing five diverse hemagglutinins from three different HA subtypes (H1, H2, and H5). As shown in Fig. 16B, sera from mice expressing a negative control antibody (b12, an antibody against HIV) demonstrated no appreciable neutralization of any of the five strains tested. In contrast, sera from animals receiving recombinant AAV viruses expressing either F10 or CR6261 showed significant ability to neutralize all five strains.

In vivo protection

[0238] To determine the ability of the recombinant AAV viruses to protect mice from influenza infection, the recombinant viruses were administered to animals and allowed five weeks for antibody expression. Just prior to influenza challenge, approximately 100-200 µg/mL of both b12 and F10 antibodies and a broad range of CR6261 concentrations ranging from 0.1 µg/mL to 100 µg/mL were observed in the circulation of mice (Fig. 17A). Following intranasal administration of the CA/09 strain, a dramatic loss of weight was observed in animals expressing the control b12 antibody, but no appreciable loss in mice expressing F10 antibody (Fig. 17B). Mice expressing CR6261 demonstrated a range of weight loss that was inversely proportional to the serum IgG concentration, suggesting that a minimum serum concentration of approximately 7.5 µg/mL of this antibody was required to prevent illness from CA/09 infection.

[0239] To examine the ability of VIP to protect against other strains *in vivo*, animals expressing b12 control or F10 antibody were challenged with the SI/06 strain (Fig. 17C). Mice expressing the control antibody exhibited weight loss over a period of two

weeks. In contrast, mice expressing F10 showed no signs of illness following SI/06 challenge.

[0240] To determine the ability of VIP to protect animals from a lethal influenza challenge, 1000 PFU of the mouse-lethal PR/8 strain were intranasally administered to the animals. Mice expressing b12 control experienced a dramatic loss of weight and reached the endpoint of our study within 4 days (Figs. 17D-E). In contrast, mice expressing F10 showed no significant signs of illness or weight loss, demonstrating that the animals treated with the recombinant AAV viruses were protected against at least three diverse influenza strains.

[0241] To determine the impact of CA/09 and SI/06 challenge on the endogenous immune response in influenza-challenged mice, serum samples from such animals were analyzed using neutralization assays. Sera from previously challenged mice expressing the control b12 antibody demonstrated strong neutralizing activity against the challenge strain, but no detectable activity against heterologous strains (Figs. 17F-G). In contrast, mice treated with recombinant AAV viruses expressing F10 or CR6261 continued to demonstrate broad serum neutralizing activity against all strains tested. Also, while serum neutralizing activity against PR8, VN/04 and JP/57 was not differentially affected by CA/09 or SI/06 challenge, enhanced serum neutralizing activity against the challenge strain was observed in mice treated with the recombinant AAV viruses (Compare Figs. 17F and 17G). These results suggests that expression of broadly neutralizing antibodies protected against illness, yet still allowed for the formation of additional, even more potent, endogenous humoral immunity.

[0242] This example shows that the recombinant AAV virus disclosed herein can be used to provide effective immunoprophylaxis against infection caused by various influenza viruses.

Example 11

Protection from influenza infection in older and immunocompromised animals

[0243] Recombinant AAV viruses expressing the variable regions from the F10 and CR6261 broadly neutralizing influenza antibodies were produced.

[0244] Immunodeficient NOD/SCID/ $\gamma^{-/-}$ (NSG) mice are mice completely lack adaptive immunity and exhibit significantly impaired innate immune responses. The recombinant AAV viruses expressing F10 and CR6261 antibodies were administered at a normalized dose of 5×10^{12} GC per kg to NSG animals that were relatively young (14-19

weeks old) or of an advanced age (46-55 weeks old). Gene expression was quantified over four weeks using Xenogen imaging or ELISA (Figs. 18A and 18B respectively). Both animal groups demonstrated remarkably similar levels of gene expression at all time points, suggesting that age did not impact the capacity for muscle-based gene expression from AAV. To determine whether the *in vivo* antibody expression was sufficient to protect these immunocompromised animals from challenge with influenza, 1000 PFU of the lethal PR8 strain was administered to both young and old groups of mice (Figs. 18C and 18D respectively).

[0245] In both cases, illness and weight loss were observed in control mice expressing luciferase, which resulted in death of all such animals over the course of the study. In contrast, both young and old NSG animals expressing F10 were completely protected from influenza-induced weight loss, suggesting that these concentrations of F10 antibody alone were sufficient to protect mice in the absence of an endogenous immune response. To further characterize the extent to which F10 was capable of preventing illness in NSG mice, the animals were sacrificed throughout the period of study and the level of inflammation was scored in histological samples of lung tissue. Infected mice expressing luciferase demonstrated substantial luminal infiltration of the bronchioles five days post-infection (Fig. 18E left). In contrast, animals protected by F10 showed very low levels of inflammation and clear bronchioles consistent with a substantially lower level of pathology in these mice (Fig. 18E right). Scoring of lung inflammation in histological samples over time demonstrated that animals at early time points exhibited the most severe inflammation (Fig. 18F). Mice expressing F10 antibody exhibited significantly less inflammation at all time points analyzed as compared with luciferase control mice.

[0246] To directly quantify the ability of the recombinant AAV viruses to control viral replication, we determined the amount of virus in NSG mice by extracting total RNA from lung tissue harvested at the time of sacrifice and measured viral RNA by quantitative RT-PCR. As show in Fig. 18G, lungs from mice expressing luciferase exhibited high viral load throughout the course of the experiment. In contrast, F10-expressing animals analyzed at early time points contained moderate levels of viral RNA that declined substantially over time, as a result of dramatically reduced viral replication in the presence of F10 antibody despite the lack of endogenous adaptive immunity.

Example 12

Protection from HIV infection in Bone Liver Thymus (BLT) humanized mice

[0247] The Bone Liver Thymus (BLT) humanized mouse model is a well-established model for prevention of intravaginal HIV infection. The BLT humanized mouse is produced by surgical implantation of fetal tissues into immunodeficient NOD/SCID/ γ C (NSG) recipients, followed by engraftment of hematopoietic stem cells. These engrafted cells give rise to a complete repertoire of immune cells trained in the mouse that can produce functional immune responses following HIV infection. The BLT model has been found to exhibit significant human cell engraftment of mucosal tissues including vagina and colon and has been shown to support HIV transmission following mucosal exposure to concentrated CCR5-tropic JR-CSF HIV virus. In this example, BLT mice were used to test the ability of the recombinant AAV viruses expressing anti-HIV antibodies to prevent HIV transmission through mucosal routes.

[0248] Recombinant AAV viruses expressing VRC01 anti-HIV antibody or luciferase protein were produced according to the methods disclosed herein. To test the efficacy of VRC01 antibody to prevent the transmission of HIV at the mucosal surface, a cohort of BLT animals was produced and the recombinant AAV viruses expressing VRC01 were administered to the BLT mice to generate animals expressing either VRC01 neutralizing antibody at a serum concentration of 100 μ g/mL or luciferase protein as a negative control.

[0249] To model the relatively infrequent nature of human mucosal HIV transmission, a low-dose repetitive challenge regimen of weekly non-abrasive vaginal administrations of unconcentrated JR-CSF HIV virus was adopted. A schematic representation of the HIV challenge regimen is shown in Figure 19A. During a 14-week period, mice were bled and then challenged each week with 50ng p24 of JR-CSF HIV virus by non-abrasive intravaginal administration of inoculum. CD4 cell levels were measured weekly using flow cytometry (Figure 19B). As shown in Figure 17B, there was a modest but statistically significant decline in CD4+ cell level in animals expressing luciferase relative to those producing VRC01. After 13 weeks of repetitive vaginal HIV challenge, HIV plasma viral loads at the time of sacrifice were measured by Abbott RealTime HIV-1 Viral Load qPCR assay (limit of detection for this assay was 200 copies/mL). The results are shown in

Figure 19C, which revealed that while all animals expressing luciferase became infected, only two of the eight mice expressing VRC01 showed significant evidence of viral replication. These results show that the recombinant AAV viruses expressing anti-HIV antibodies can prevent mucosal HIV transmission in BLT mice.

Example 13

Production of Hepatitis C virus (HCV) antibodies in FVB mice

[0250] This example illustrates that recombinant AAV viruses can be used to produce high level of HCV antibody *in vivo*.

[0251] AAV vectors comprising coding sequences for B12, AR3A and AR3B antibodies were constructed. The AAV vectors were used to produce recombinant AAV viruses expressing B12, AR3A and AR3B antibodies, respectively. The recombinant AAV viruses were administered to FVB mice. Expression levels of the corresponding antibody in animal serum were measured weekly. The results are shown in Figure 20. As shown in Figure 20, significant levels of HCV antibodies have been produced in the animal.

Example 14

Prevention of HIV infection

[0252] This example illustrates immunoprophylaxis of a patient at risk of developing HIV infection.

[0253] A recombinant AAV is produced using an AAV transfer vector comprising a polynucleotide encoding an anti-HIV neutralizing antibody. Any known anti-HIV neutralizing antibody can be used, including but not limited to, b12 anti-HIV antibody, 2G12 anti-HIV antibody, 4E10 anti-HIV antibody, 2F5 anti-HIV antibody, and any variant thereof. For example, an AAV transfer vector having the CASI promoter, coding sequences for an anti-HIV neutralizing antibody, WPRE and SV40 poly(A) sequence can be used. Examples of such AAV transfer vectors include the vectors provided in SEQ ID NOs: 17-21 and 24. A patient is identified as being at risk of developing HIV infection and administered an effective amount of the recombinant AAV. The recombinant AAV is administered to the patient by intramuscular injection. The recombinant AAV expresses the anti-HIV antibody in the patient, thereby reducing the risk for the patient to develop HIV infection. The HIV viral load in the patient can be determined at various timepoints after the patient being administered with the recombinant AAV. The appropriate dosage (*i.e.*, the expression level

of the anti-HIV antibody) and treatment regimen can be readily determined by skilled artisans based on a number of factors including, but not limited to, the route of administration and the extent of HIV exposure for the patient. The immunoprophylaxis efficacy is evaluated by observing reducing the risk of HIV infection as compared to the patients receiving no AAV treatment.

Example 15

Treatment of colon cancer

[0254] This example illustrates the treatment of a patient suffering from or at risk of developing colon cancer.

[0255] A recombinant AAV is produced using an AAV transfer vector comprising a polynucleotide encoding IMC-C225 antibody (CetuximabTM, an epidermal growth factor receptor (EGFR) antibody). For example, coding sequences for IMC-C225 antibody can be inserted in an AAV transfer vector having the CASI promoter, WPRE and SV40 poly(A) sequence. A patient suffering from or at risk of developing colon cancer is identified and administered an effective amount of the recombinant AAV. The recombinant AAV is administered to the patient by intramuscular injection. The recombinant AAV expresses IMC-C225 antibody in the patient, thereby inhibiting cancer progression in the patient. The appropriate dosage (i.e., the expression level of IMC-C225 antibody) and treatment regimen can be readily determined by skilled artisans based on a number of factors including, but not limited to, the route of administration and the patient's disease state. The treatment efficacy is evaluated by observing delay or slowing of disease progression, amelioration or palliation of the disease state, and remission.

Example 16

Prevention of HCV infection

[0256] This example illustrates immunoprophylaxis of a patient at risk of developing HCV infection.

[0257] A recombinant AAV is produced using an AAV transfer vector comprising a polynucleotide encoding an anti-HCV neutralizing antibody. Any known anti-HCV neutralizing antibody can be used, including but not limited to, AR3A anti-HCV antibody, AR3B anti-HCV antibody, AR4A anti-HCV antibody, and any variant thereof. For example, an AAV transfer vector having the CASI promoter, coding sequences for an anti-

HCV neutralizing antibody, WPRE and SV40 poly(A) sequence can be used. Examples of such AAV transfer vectors include the vector provided in SEQ ID NO: 22, 23 and 28.

[0258] A patient is identified as being at risk of developing HCV infection and administered an effective amount of the recombinant AAV. The recombinant AAV is administered to the patient by intramuscular injection. The recombinant AAV expresses AR3A antibody in the patient, thereby reducing the risk for the patient to develop HCV infection. The appropriate dosage (*i.e.*, the expression level of the anti-HCV antibody) and treatment regimen can be readily determined by skilled artisans based on a number of factors including, but not limited to, the route of administration and the extent of HCV exposure for the patient. The HCV viral load in the patient can be determined at various time points after the patient being administered with the recombinant AAV. The immunoprophylaxis efficacy is evaluated by observing reducing the risk of HCV infection as compared to the patients receiving no AAV treatment.

Example 17

Prevention of influenza virus infection

[0259] This example illustrates immunoprophylaxis of a patient at risk of developing influenza virus infection.

[0260] A recombinant AAV is produced using an AAV transfer vector comprising a polynucleotide encoding an anti-influenza neutralizing antibody. Any known anti- influenza neutralizing antibody can be used, including but not limited to, F10 anti-influenza antibody, CR6261 anti-influenza antibody, FI6 anti-influenza antibody, TCN32 anti-influenza antibody,, and any variant thereof. For example, an AAV transfer vector having the CASI promoter, coding sequences for an anti- influenza neutralizing antibody, WPRE and SV40 poly(A) sequence can be used. Examples of such AAV transfer vectors include the vector provided in SEQ ID NO: 25-27, 29 and 30.

[0261] A patient is identified as being at risk of developing influenza infection and administered an effective amount of the recombinant AAV. The recombinant AAV is administered to the patient by intramuscular injection. The recombinant AAV expresses F10 antibody in the patient, thereby reducing the risk for the patient to develop influenza virus infection. The appropriate dosage (*i.e.*, the expression level of the anti-influenza neutralizing antibody) and treatment regimen can be readily determined by skilled artisans based on a

number of factors including, but not limited to, the route of administration and the extent of influenza virus exposure for the patient. The influenza viral load in the patient can be determined at various time points after the patient being administered with the recombinant AAV. The immunoprophylaxis efficacy is evaluated by observing reducing the risk of influenza infection as compared to the patients receiving no AAV treatment.

[0262] In at least some of the previously described embodiments, one or more elements used in an embodiment can interchangeably be used in another embodiment unless such a replacement is not technically feasible. It will be appreciated by those skilled in the art that various other omissions, additions and modifications may be made to the methods and structures described above without departing from the scope of the claimed subject matter. All such modifications and changes are intended to fall within the scope of the subject matter, as defined by the appended claims.

[0263] With respect to the use of substantially any plural and/or singular terms herein, those having skill in the art can translate from the plural to the singular and/or from the singular to the plural as is appropriate to the context and/or application. The various singular/plural permutations may be expressly set forth herein for sake of clarity.

[0264] It will be understood by those within the art that, in general, terms used herein, and especially in the appended claims (*e.g.*, bodies of the appended claims) are generally intended as “open” terms (*e.g.*, the term “including” should be interpreted as “including but not limited to,” the term “having” should be interpreted as “having at least,” the term “includes” should be interpreted as “includes but is not limited to,” etc.). It will be further understood by those within the art that if a specific number of an introduced claim recitation is intended, such an intent will be explicitly recited in the claim, and in the absence of such recitation no such intent is present. For example, as an aid to understanding, the following appended claims may contain usage of the introductory phrases “at least one” and “one or more” to introduce claim recitations. However, the use of such phrases should not be construed to imply that the introduction of a claim recitation by the indefinite articles “a” or “an” limits any particular claim containing such introduced claim recitation to embodiments containing only one such recitation, even when the same claim includes the introductory phrases “one or more” or “at least one” and indefinite articles such as “a” or “an” (*e.g.*, “a”

and/or “an” should be interpreted to mean “at least one” or “one or more”); the same holds true for the use of definite articles used to introduce claim recitations. In addition, even if a specific number of an introduced claim recitation is explicitly recited, those skilled in the art will recognize that such recitation should be interpreted to mean at least the recited number (*e.g.*, the bare recitation of “two recitations,” without other modifiers, means at least two recitations, or two or more recitations). Furthermore, in those instances where a convention analogous to “at least one of A, B, and C, etc.” is used, in general such a construction is intended in the sense one having skill in the art would understand the convention (*e.g.*, “a system having at least one of A, B, and C” would include but not be limited to systems that have A alone, B alone, C alone, A and B together, A and C together, B and C together, and/or A, B, and C together, etc.). In those instances where a convention analogous to “at least one of A, B, or C, etc.” is used, in general such a construction is intended in the sense one having skill in the art would understand the convention (*e.g.*, “a system having at least one of A, B, or C” would include but not be limited to systems that have A alone, B alone, C alone, A and B together, A and C together, B and C together, and/or A, B, and C together, etc.). It will be further understood by those within the art that virtually any disjunctive word and/or phrase presenting two or more alternative terms, whether in the description, claims, or drawings, should be understood to contemplate the possibilities of including one of the terms, either of the terms, or both terms. For example, the phrase “A or B” will be understood to include the possibilities of “A” or “B” or “A and B.”

[0265] In addition, where features or aspects of the disclosure are described in terms of Markush groups, those skilled in the art will recognize that the disclosure is also thereby described in terms of any individual member or subgroup of members of the Markush group.

[0266] As will be understood by one skilled in the art, for any and all purposes, such as in terms of providing a written description, all ranges disclosed herein also encompass any and all possible sub-ranges and combinations of sub-ranges thereof. Any listed range can be easily recognized as sufficiently describing and enabling the same range being broken down into at least equal halves, thirds, quarters, fifths, tenths, etc. As a non-limiting example, each range discussed herein can be readily broken down into a lower third, middle third and upper third, etc. As will also be understood by one skilled in the art all

language such as “up to,” “at least,” “greater than,” “less than,” and the like include the number recited and refer to ranges which can be subsequently broken down into sub-ranges as discussed above. Finally, as will be understood by one skilled in the art, a range includes each individual member. Thus, for example, a group having 1-3 articles refers to groups having 1, 2, or 3 articles. Similarly, a group having 1-5 articles refers to groups having 1, 2, 3, 4, or 5 articles, and so forth.

[0267] While various aspects and embodiments have been disclosed herein, other aspects and embodiments will be apparent to those skilled in the art. The various aspects and embodiments disclosed herein are for purposes of illustration and are not intended to be limiting, with the true scope and spirit being indicated by the following claims.

WHAT IS CLAIMED IS:

1. A viral vector, comprising:
 - a 5' inverted terminal repeat (ITR) of adeno-associated virus (AAV) and a 3' AAV ITR;
 - a promoter;
 - a restriction site downstream of the promoter to allow insertion of a polynucleotide encoding one or more proteins of interest, and
 - a posttranscriptional regulatory element downstream of the restriction site,wherein the promoter, the restriction site and the posttranscription regulatory element are located downstream of the 5' AAV ITR and upstream of the 3' AAV ITR.
2. The viral vector of Claim 1, further comprising a polynucleotide inserted at the restriction site and operably linked with the promoter, wherein the polynucleotide comprises a coding region of a protein of interest.
3. The viral vector of Claim 2, wherein the polynucleotide comprises a signal peptide sequence immediately upstream of the coding region of the protein of interest.
4. The viral vector of Claim 3, wherein the signal peptide is selected from the group consisting of a signal peptide of interferon, a signal peptide of human growth hormone, a signal peptide of erythropoietin (EPO), a signal peptide of granulocyte colony-stimulating factor (G-CSF), a signal peptide of insulin, and any combination thereof.
5. The viral vector of any one of Claims 2-4, wherein the vector comprises a nucleotide sequence having at least about 70%, at least about 80%, at least about 90% sequence identity, or more to the Kozak consensus sequence.
6. The viral vector of any one of Claims 1-5, wherein the protein of interest is selected from the group consisting of full-length antibodies, growth hormones (GHs), insulin-like growth factors (IGFs), G-CSFs, erythropoietins (EPOs), insulins, antibody Fab fragments, antibody scFV fragments, hemophilia related clotting proteins, dystrophin, lysosomal acid lipase, phenylalanine hydroxylase (PAH), glycogen storage disease-related enzymes, and any variants thereof.
7. The viral vector of any one of Claims 1-5, wherein the protein of interest is a virus neutralizing antibody.

8. The viral vector of Claim 7, wherein the virus neutralizing antibody is a neutralizing antibody for a human immunodeficiency virus (HIV), a hepatitis C virus (HCV), or an influenza virus.

9. The viral vector of Claim 8, wherein the neutralizing antibody for HIV is selected from the group consisting of b12 anti-HIV antibody, 2G12 anti-HIV antibody, 4E10 anti-HIV antibody, 2F5 anti-HIV antibody, and any variant thereof.

10. The viral vector of Claim 8, wherein the neutralizing antibody for HCV is selected from the group consisting AR3A anti-HCV antibody, AR3B anti-HCV antibody, AR4A anti-HCV antibody, and any variant thereof.

11. The viral vector of any one of Claims 1-5, wherein the protein of interest is a neutralizing antibody for malaria.

12. The viral vector of any one of Claims 1-11, wherein the promoter comprises cytomegalovirus (CMV) immediate early promoter, chicken beta-actin (CAG) promoter, ubiquitin C (UBC) promoter, or any variant thereof.

13. The viral vector of any one of Claims 1-11, wherein the promoter comprises a splice donor, a splice acceptor, or any variant thereof.

14. The viral vector of Claim 13, wherein the splice donor comprises a nucleotide sequence having at least 90% sequence identity to SEQ ID NO: 5.

15. The viral vector of Claim 13, wherein the splice acceptor comprises a nucleotide sequence having at least 90% sequence identity to SEQ ID NO: 6.

16. The viral vector of any one of Claims 1-11, wherein the promoter comprises a nucleotide sequence having at least 90% sequence identity to SEQ ID NO: 1.

17. The viral vector of any one of Claims 1-11, wherein the promoter comprises a nucleotide sequence having at least 90% sequence identity to any one of SEQ ID NOs: 2-4.

18. The viral vector of any one of Claims 1-16, wherein the posttranscriptional regulatory element is a viral posttranscriptional regulatory element.

19. The viral vector of Claim 18, wherein the viral posttranscriptional regulatory element is woodchuck hepatitis virus posttranscriptional regulatory element (WPRE), hepatitis B virus posttranscriptional regulatory element (HBVPRE), RNA transport element (RTE), or any variant thereof.

20. The viral vector of any one of Claims 1-19, further comprising a transcription termination region downstream of the posttranscriptional regulatory element.

21. The viral vector of Claim 20, the transcription termination region comprises an SV40 late poly(A) sequence, a rabbit beta-globin poly(A) sequence, a bovine growth hormone poly(A) sequence, or any variant thereof.

22. The viral vector of any one of Claims 1-21, wherein the promoter comprises an intron.

23. The viral vector of Claim 22, wherein the intron is a synthetic intron comprising a nucleotide sequence having at least 90% sequence identity to SEQ ID NO: 8.

24. The viral vector of Claim 2, wherein the polynucleotide comprises a first coding region for the heavy chain variable region of an immunoglobulin and a second coding region for the light chain variable region of the immunoglobulin.

25. The viral vector of Claim 24, wherein the first coding region and the second coding region are separated by a 2A sequence.

26. The viral vector of Claim 25, wherein the 2A sequence is an F2A sequence.

27. The viral vector of any one of Claims 24-26, wherein 5' of the first coding region is fused with a first signal peptide sequence and 5' of the second coding region is fused with a second signal peptide sequence.

28. The viral vector of Claim 27, wherein the first signal peptide sequence and the second signal peptide sequence are different.

29. The viral vector of any one of Claims 1-28, wherein the region starting from the 5' ITR and ending at the 3' ITR is at least about 2.5 kb.

30. A method for producing a protein of interest *in vivo*, comprising:

providing a recombinant adeno-associated virus (AAV) comprising a nucleotide sequence encoding the protein of interest; and

administering the recombinant AAV to the subject, whereby the recombinant AAV expresses the antibody in the subject, wherein the nucleotide is at least about 1.4 kb.

31. The method of Claim 30, wherein the protein of interest is an antibody.

32. The method of Claim 31, wherein the antibody is a full length antibody.

33. The method of any one of Claims 30-32, wherein the antibody is selected from the group consisting of b12 anti-HIV antibody, 2G12 anti-HIV antibody, 4E10 anti-HIV antibody, 2F5 anti-HIV antibody, AR3A anti-HCV antibody, AR3B anti-HCV antibody, AR4A anti-HCV antibody, anti-malaria antibody, and any variant thereof.

34. The method of any one of Claims 30-33, wherein the protein of interest is expressed in the serum of the subject in the amount of at least about 9 µg/ml.

35. The method of any one of Claims 30-33, wherein the protein of interest is expressed in the serum of the subject in the amount of at least about 100 µg/ml.

36. The method of any one of Claims 30-33, wherein the protein of interest is expressed in the serum of the subject in the amount of at least about 500 µg/ml.

37. The method of any one of Claims 30-36, wherein the recombinant AAV is produced by

providing a packaging cell line with a viral vector, helper functions for generating a productive AAV infection, and AAV cap genes, wherein the viral vector comprises a 5' AAV inverted terminal repeat (ITR), a 3' AAV ITR and a nucleotide sequence encoding the protein of interest; and

recovering a recombinant AAV virus from the supernatant of the packaging cell line.

38. The method of Claim 37, wherein the viral vector is the viral vector of any one of Claims 2-29.

39. A method for reducing or inhibiting the infection risk of a virus in a subject, comprising:

providing a recombinant adeno-associated virus (AAV) comprising a nucleotide sequence encoding a neutralizing antibody for the virus; and

administering the recombinant AAV to the subject, whereby the recombinant AAV expresses the antibody in the subject.

40. The method of Claim 39, wherein the method further comprises providing a second recombinant AAV comprising a nucleotide sequence encoding a second neutralizing antibody for the virus.

41. The method of any one of Claims 39-40, wherein the subject is a mammal.

42. The method of any one of Claims 39-40, wherein the subject is a human.

43. The method of any one of Claims 39-42, wherein the neutralizing antibody is a full-length antibody.

44. The method of any one of Claim 39-43, wherein the method reduces the infection risk in the subject by at least about 5 fold as compared to the subjects without the viral vector treatment.

45. The method of Claim 44, wherein the method reduces the infection risk in the subject by at least about 20 fold as compared to the subjects without the viral vector treatment.

46. The method of any one of Claims 39-45, wherein the method inhibits the viral infection in the subject.

47. The method of any one of Claims 39-46, wherein the antibody is expressed in the serum of the subject in the amount of at least about 9 µg/ml.

48. The method of any one of Claims 39-46, wherein the antibody is expressed in the serum of the subject in the amount of at least about 100 µg/ml.

49. The method of any one of Claims 39-46, wherein the antibody is expressed in the serum of the subject in the amount of at least about 500 µg/ml

50. The method of any one of Claims 39-49, wherein the virus is a human immunodeficiency virus (HIV) or a hepatitis C virus (HCV).

51. The method of any one of Claims 39-49, wherein the neutralizing antibody is selected from the group consisting of b12 anti-HIV antibody, 2G12 anti-HIV antibody, 4E10 anti-HIV antibody, 2F5 anti-HIV antibody, AR3A anti-HCV antibody, AR3B anti-HCV antibody, AR4A anti-HCV antibody, and any variant thereof.

52. The method of any one of Claims 39-51, wherein the recombinant AAV is administered to the subject by intramuscular injection, intravaginal injection, intravenous injection, intraperitoneal injection, subcutaneous injection, epicutaneous administration, intradermal administration, or nasal administration.

53. The method of any one of Claims 39-52, wherein the recombinant AAV is administered to the subject at most once every year.

54. The method of Claim 53, wherein the recombinant AAV is administered to the subject at most once every 5 years.

55. The method of Claim 53, wherein the recombinant AAV is administered to the subject at most once every 10 years.

56. A method of producing a recombinant adeno-associated virus (AAV), comprising:

providing a packaging cell line with a viral construct comprising 5' AAV inverted terminal repeat (ITR) and 3' AAV ITR, helper functions for generating a productive AAV infection, and AAV cap genes; and

recovering a recombinant AAV virus from the supernatant of the packaging cell line.

57. The method of Claim 56, wherein the AAV cap genes encode a capsid from serotype 1, serotype 2, serotype 4, serotype 5, serotype 6, serotype 7, serotype 8, serotype 9, or a variant thereof.

58. The method of Claim 56, wherein the viral construct is the viral vector of any one of Claims 1-29.

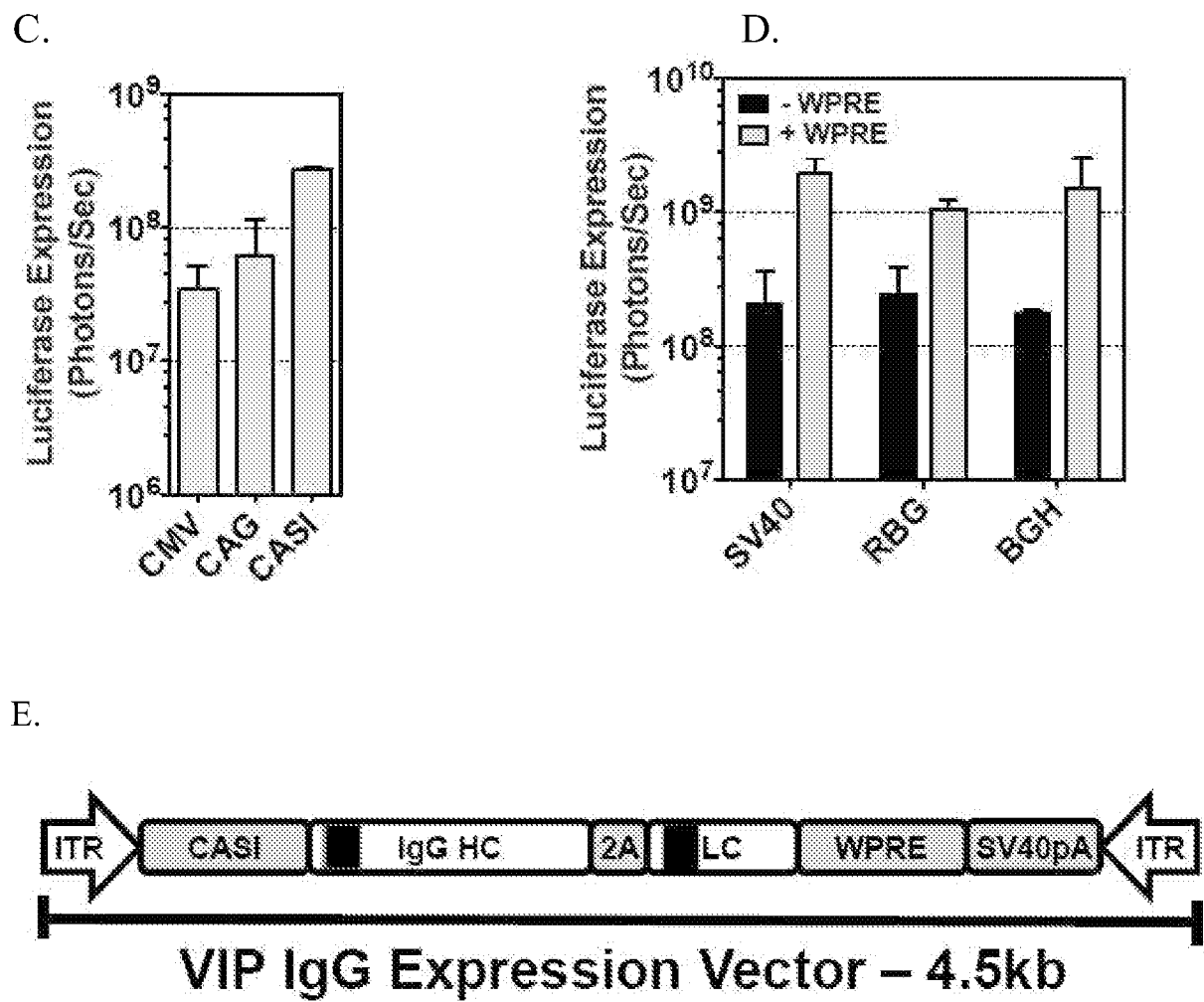
59. The method of any one of Claims 56-57, wherein the recombinant AAV is not a self-complementary AAV (scAAV).

60. An isolated, synthetic or recombinant polynucleotide, comprising:

a nucleic acid sequence having at least about 90% or more sequence identity to SEQ ID NO: 1.

61. The polynucleotide of Claim 60, wherein the polynucleotide comprises a nucleotide sequence selected from SEQ ID NOs: 2-4.

Figure 1 (continued)



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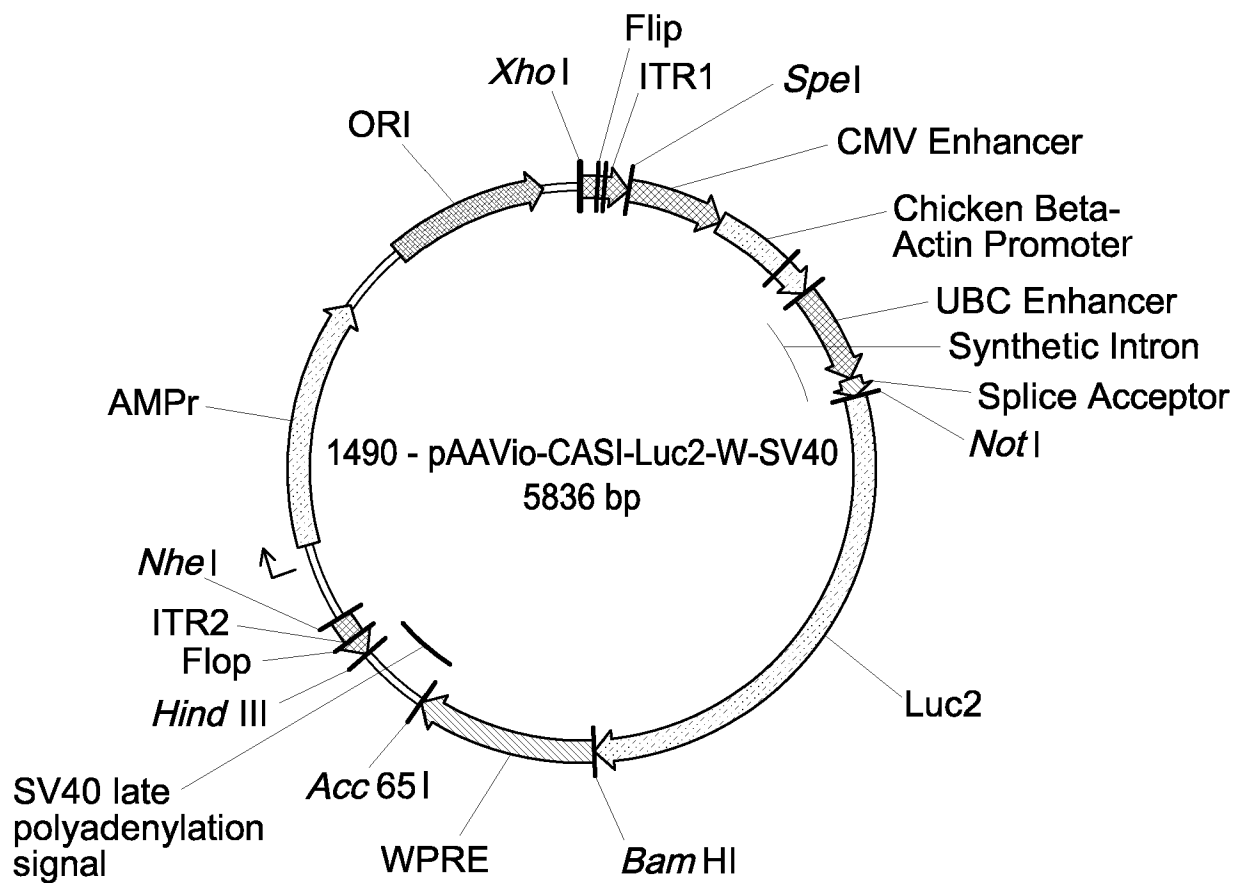
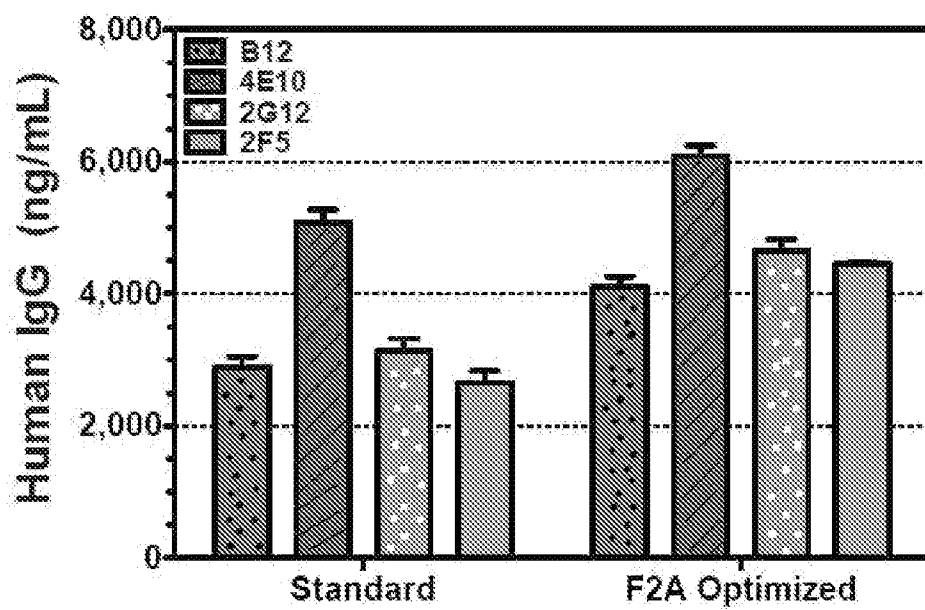
**FIG. 2**

Figure 3

A.



B.

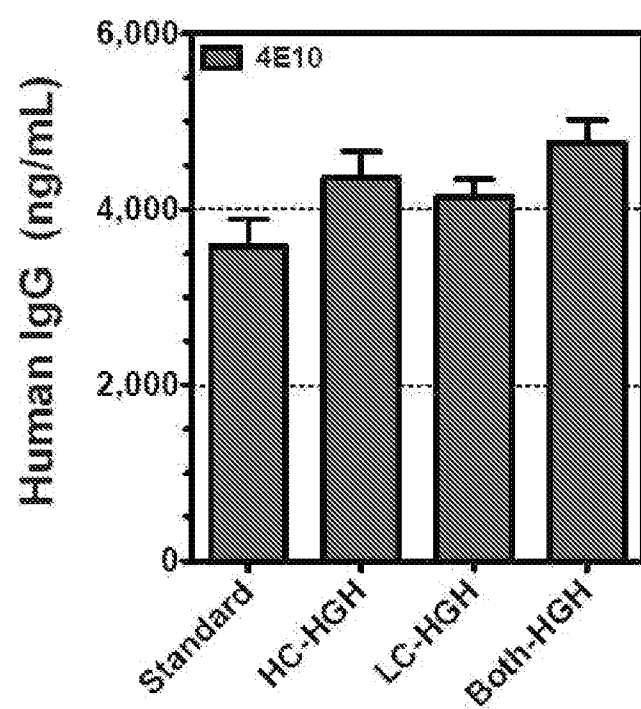
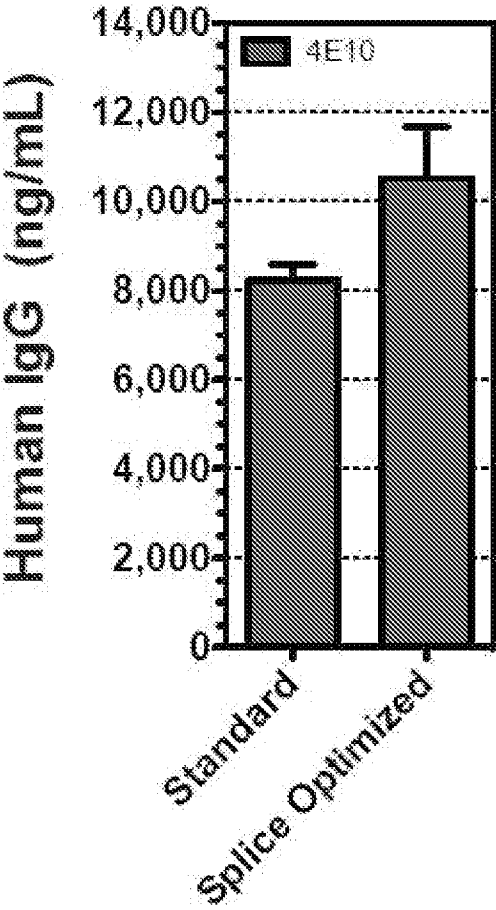


Figure 3 (continued)

C.



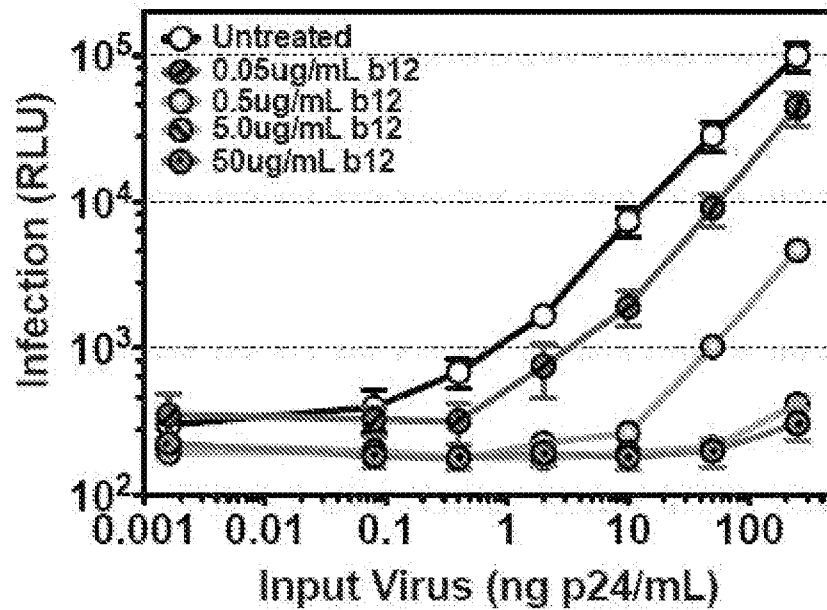
D.



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Figure 4

A.



B.

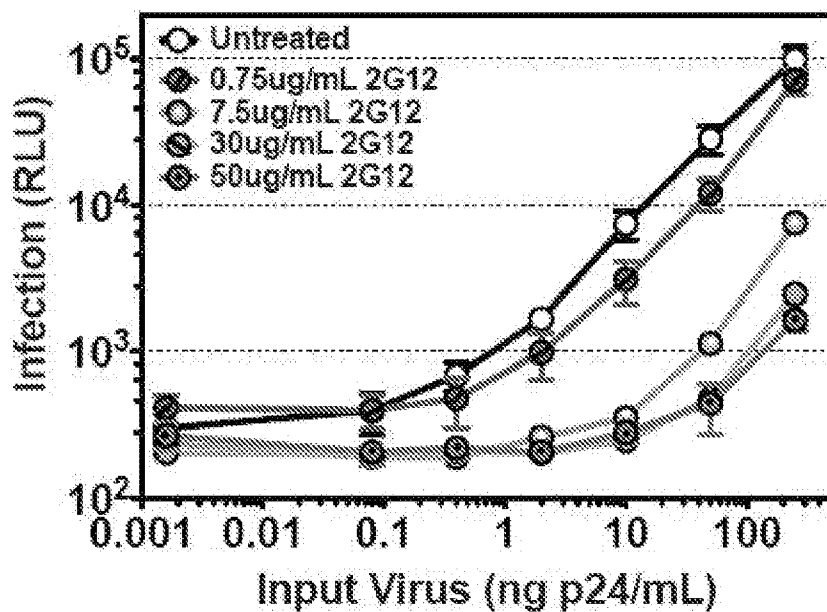
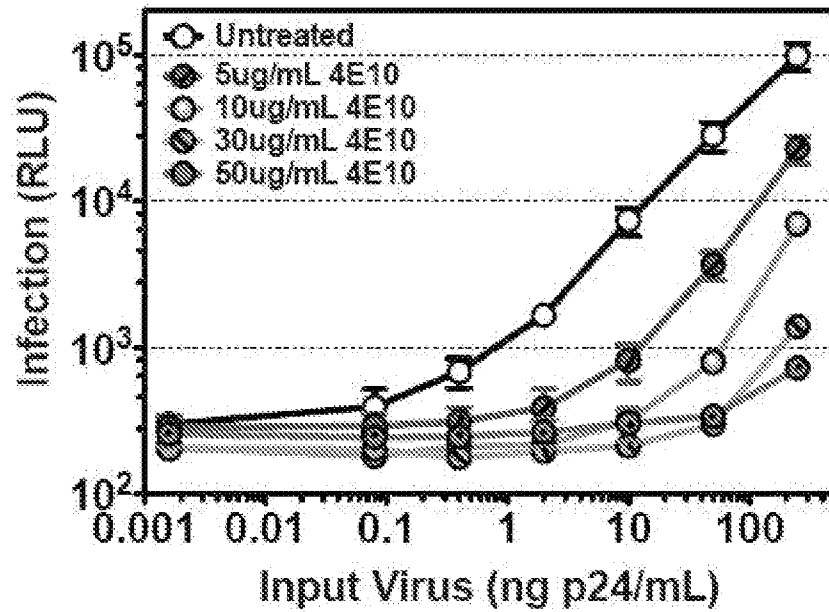


Figure 4 (continued)

C.



D.

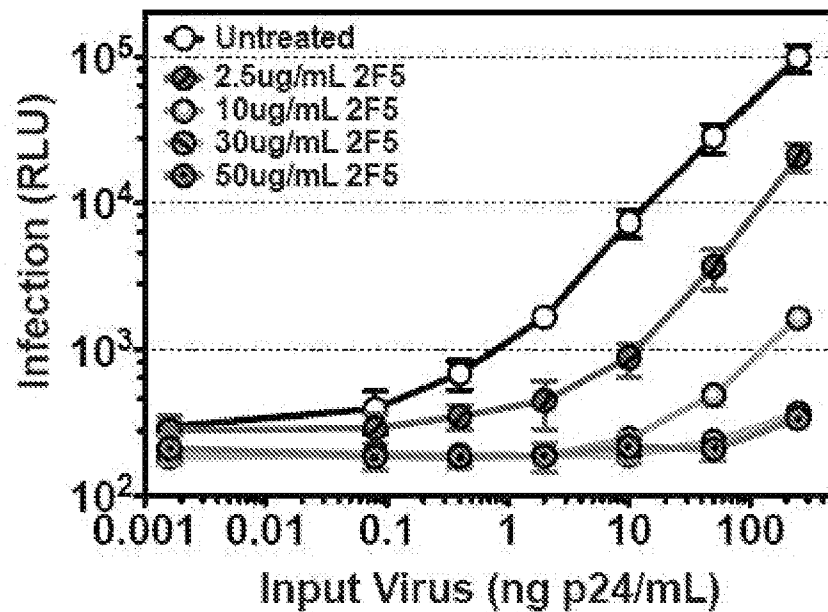
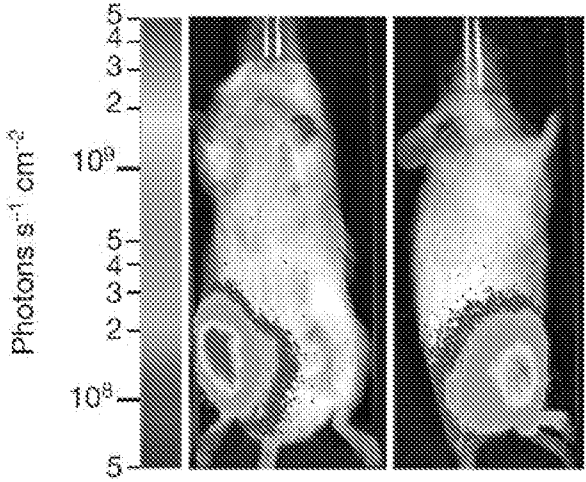
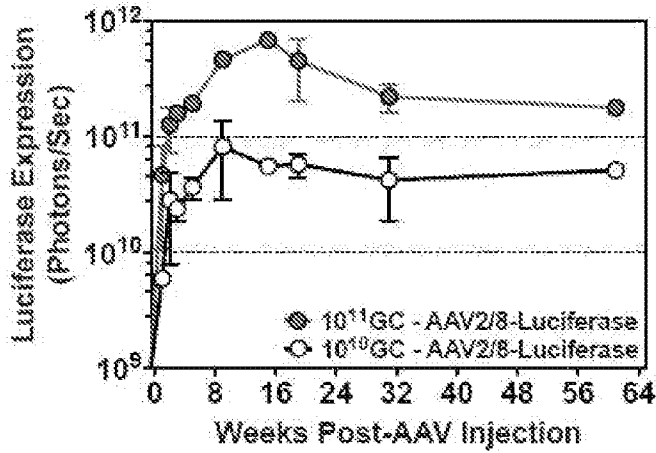


Figure 5

A.



B.



C.

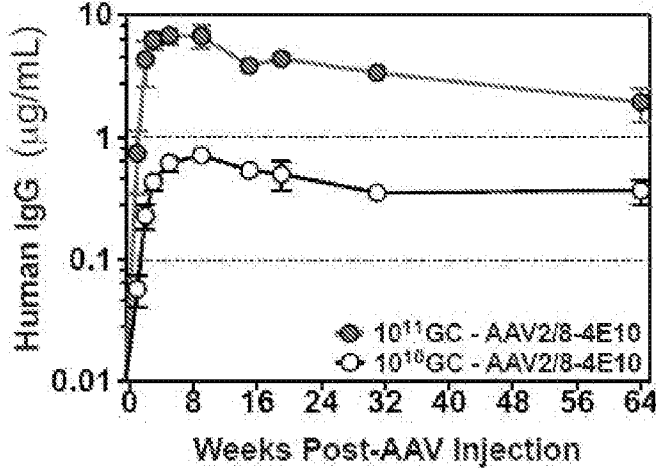


Figure 6

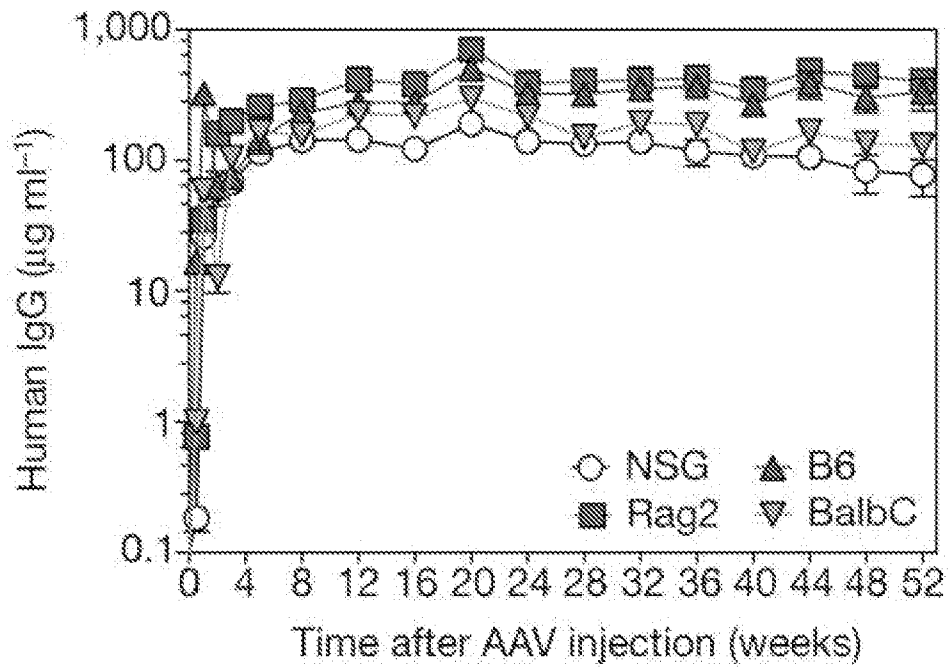


Figure 7

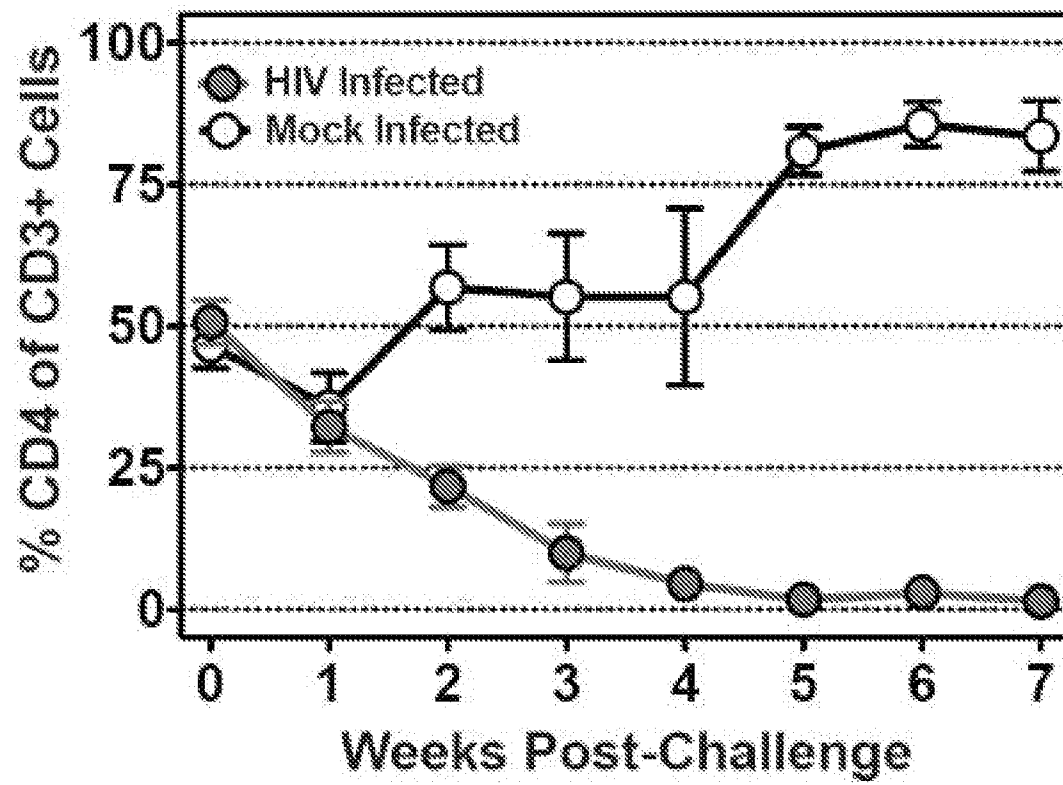
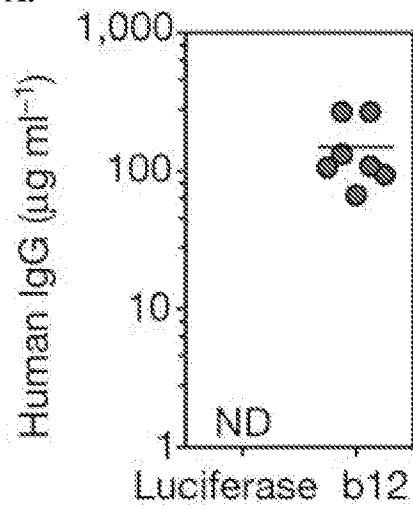


Figure 8

A.



B.

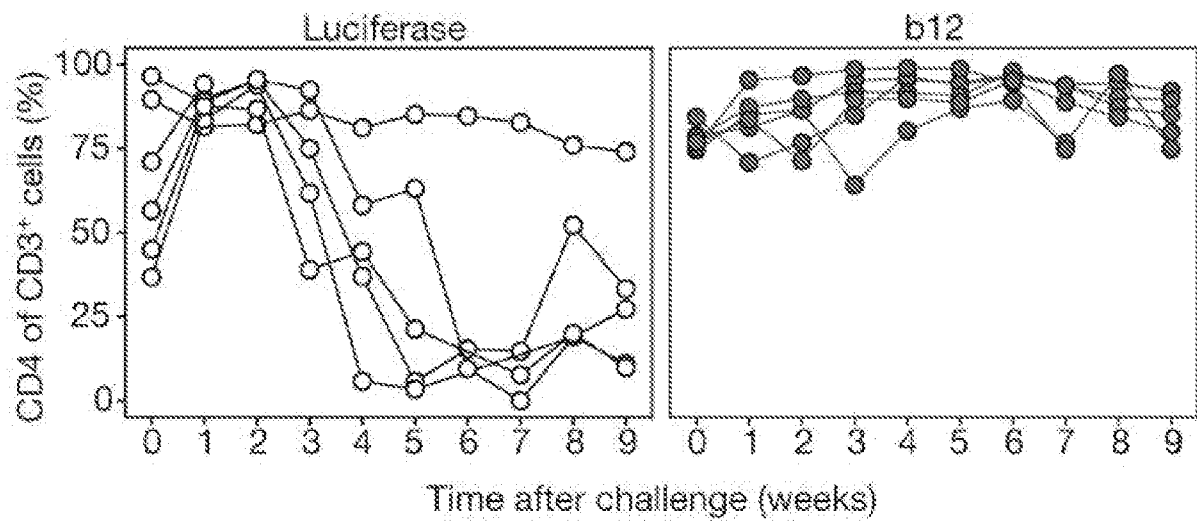
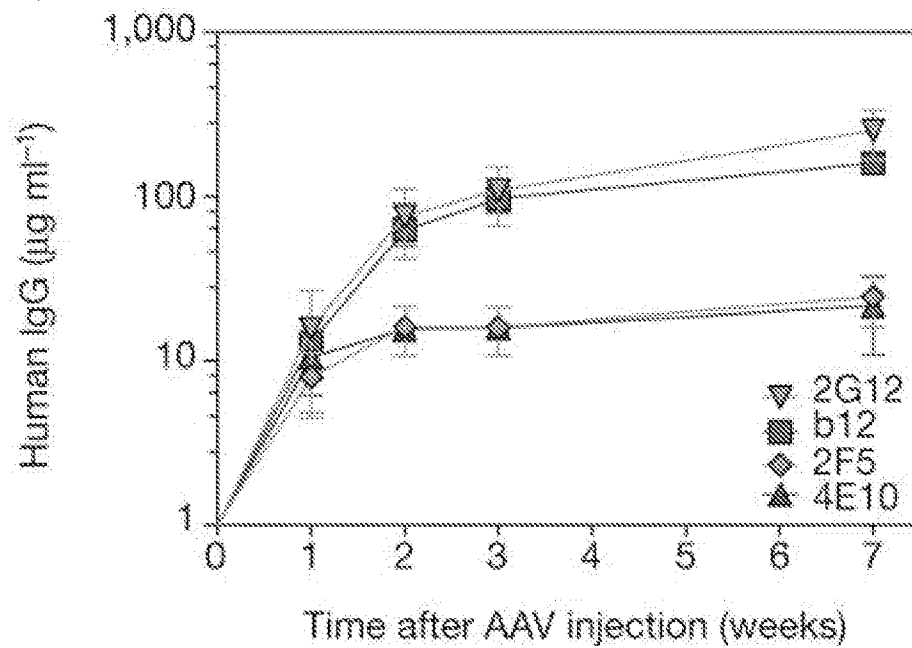


Figure 9

A.



B.

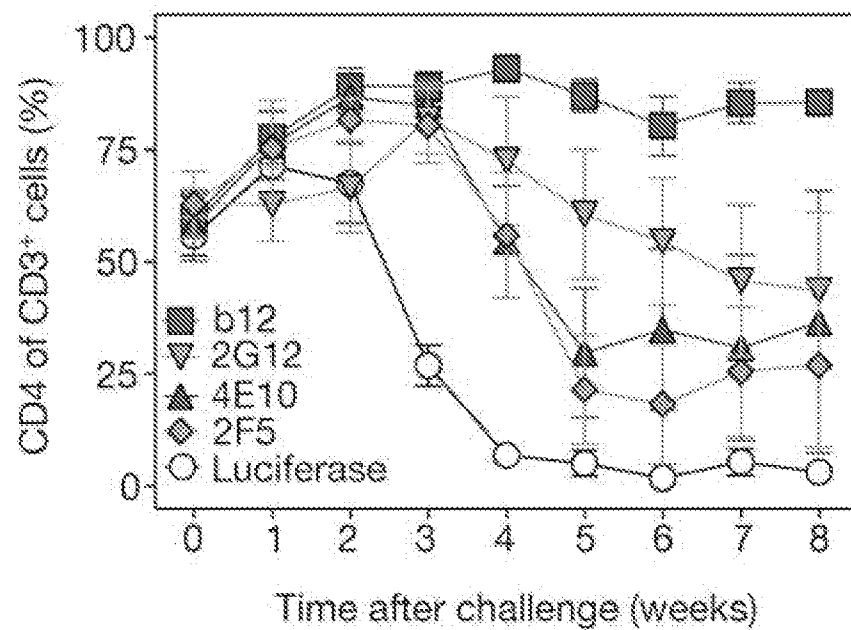
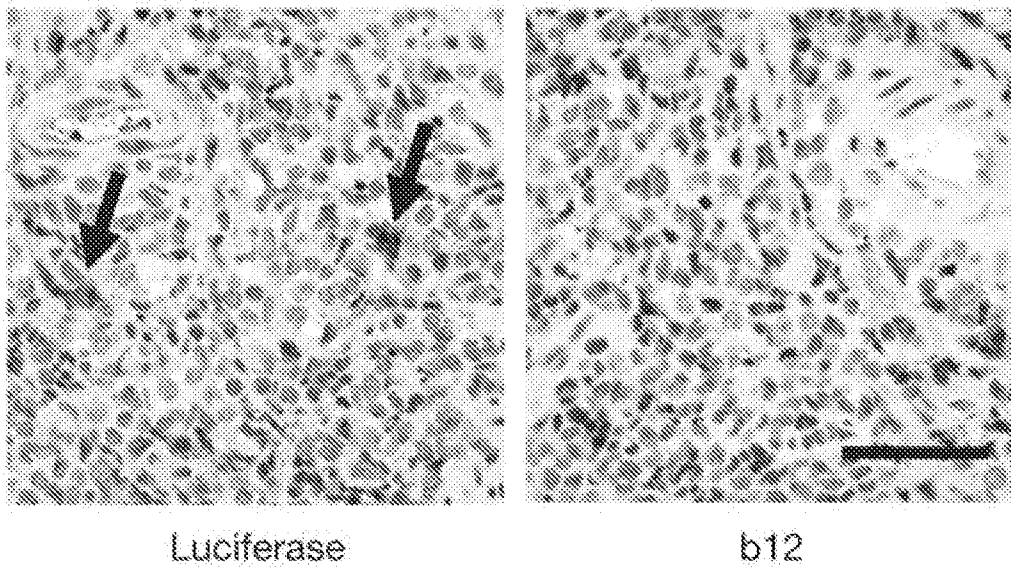


Figure 9 (continued)

C.



D.

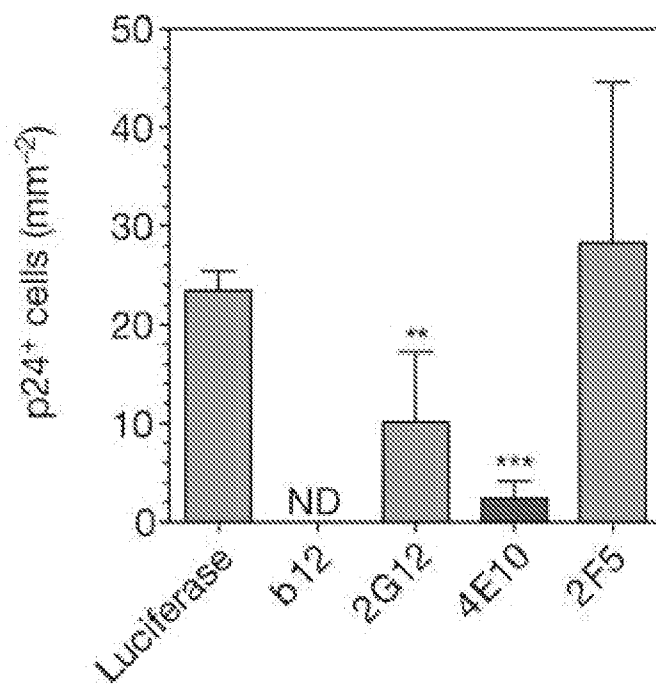
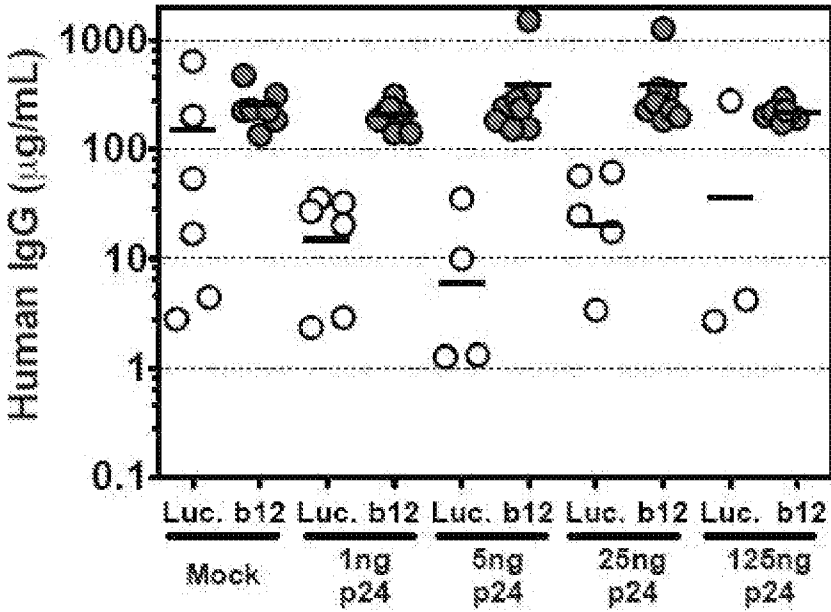
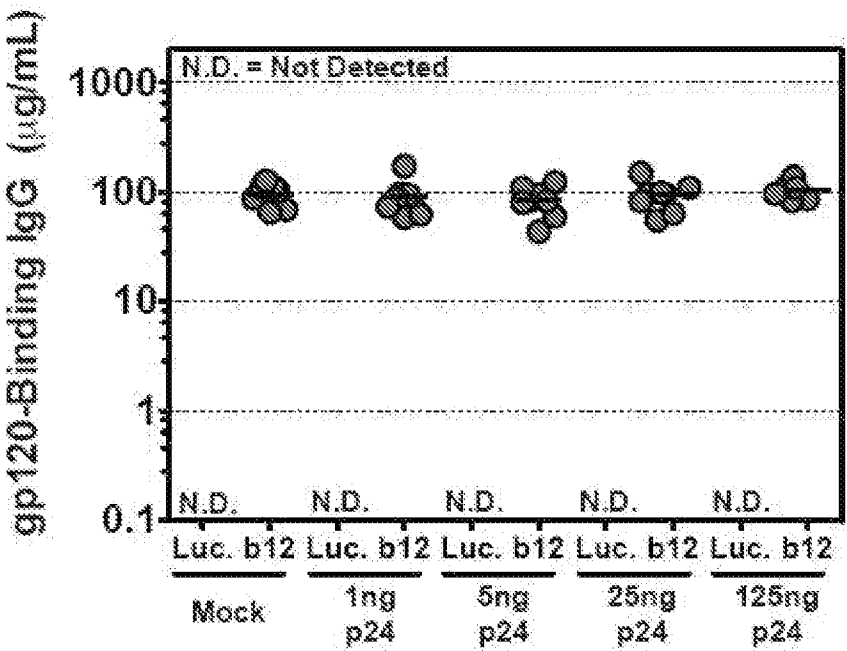


Figure 10

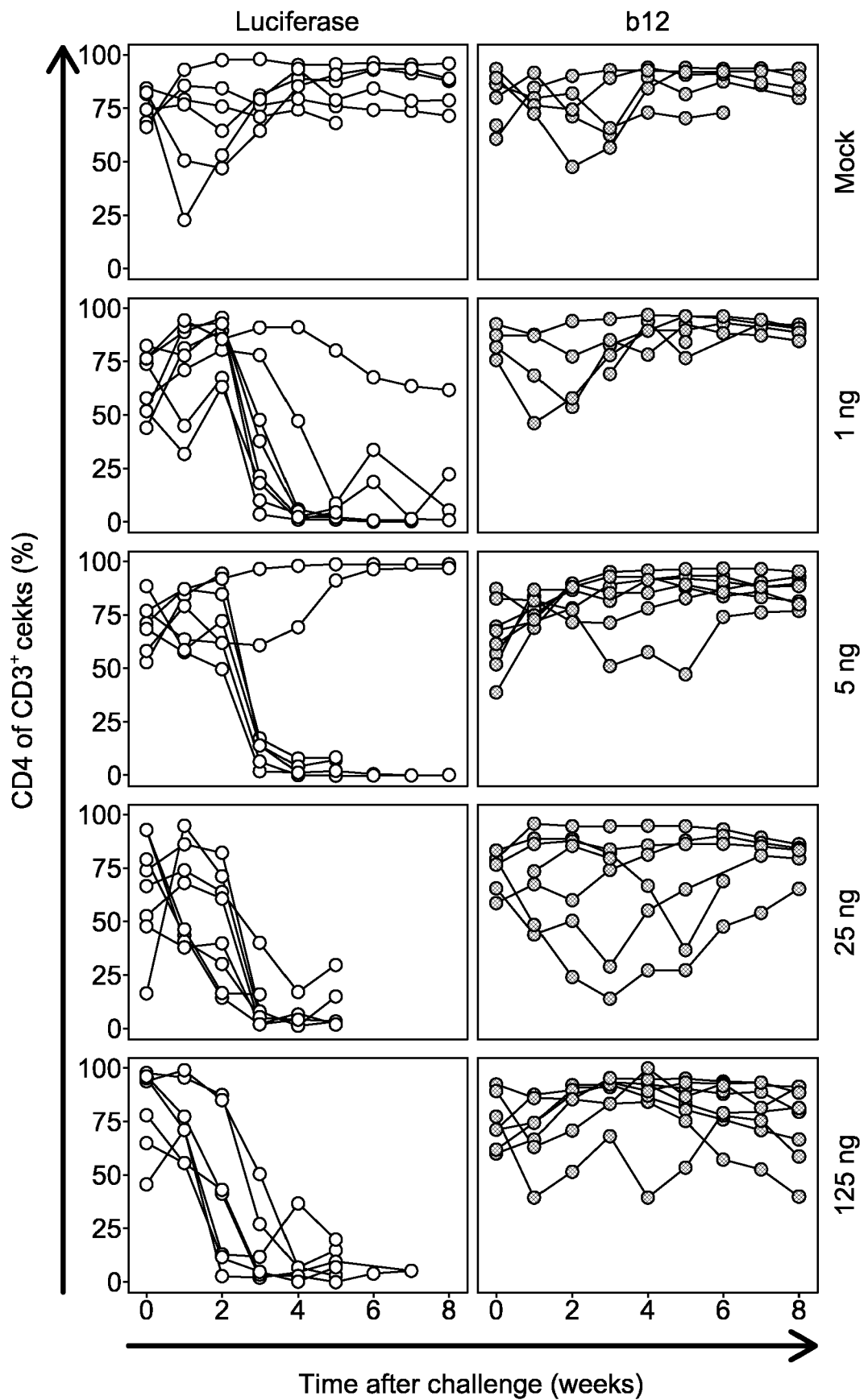
A.



B.

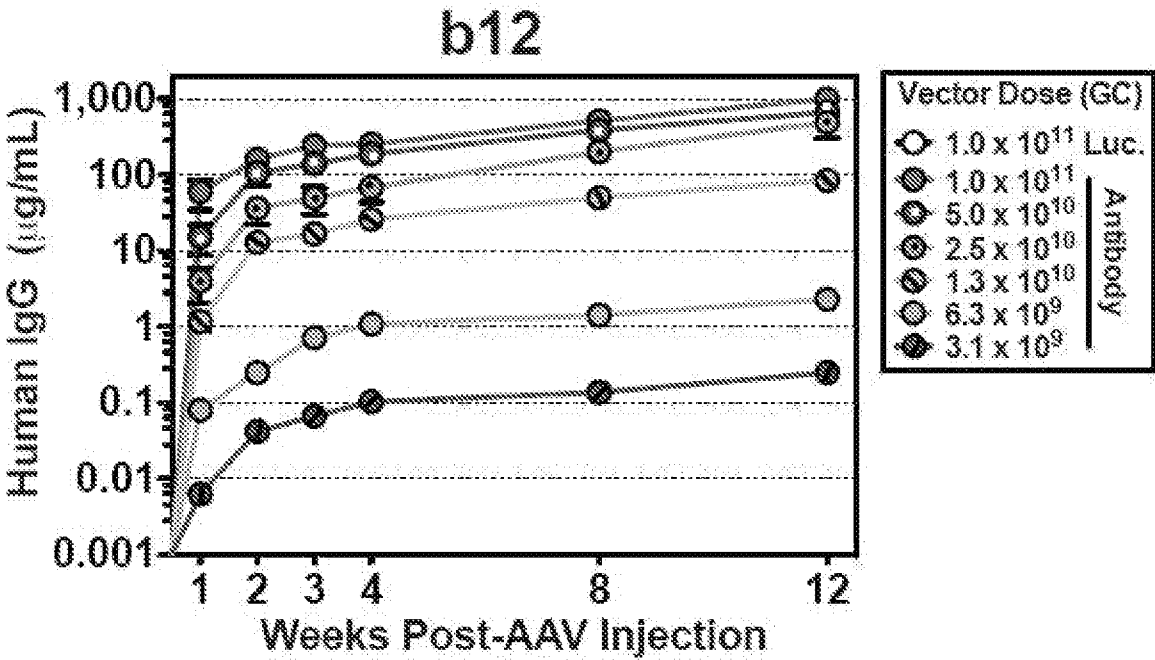


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**FIG. 11**

SUBSTITUTE SHEET (RULE 26)

Figure 12
A.



B.

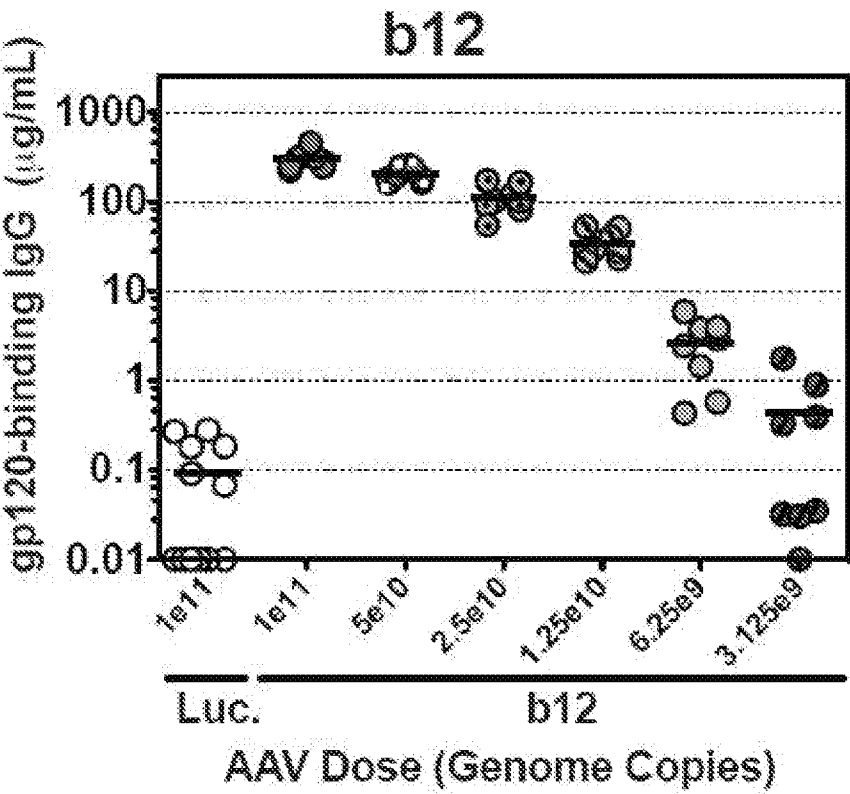


Figure 12 (continued)

C.

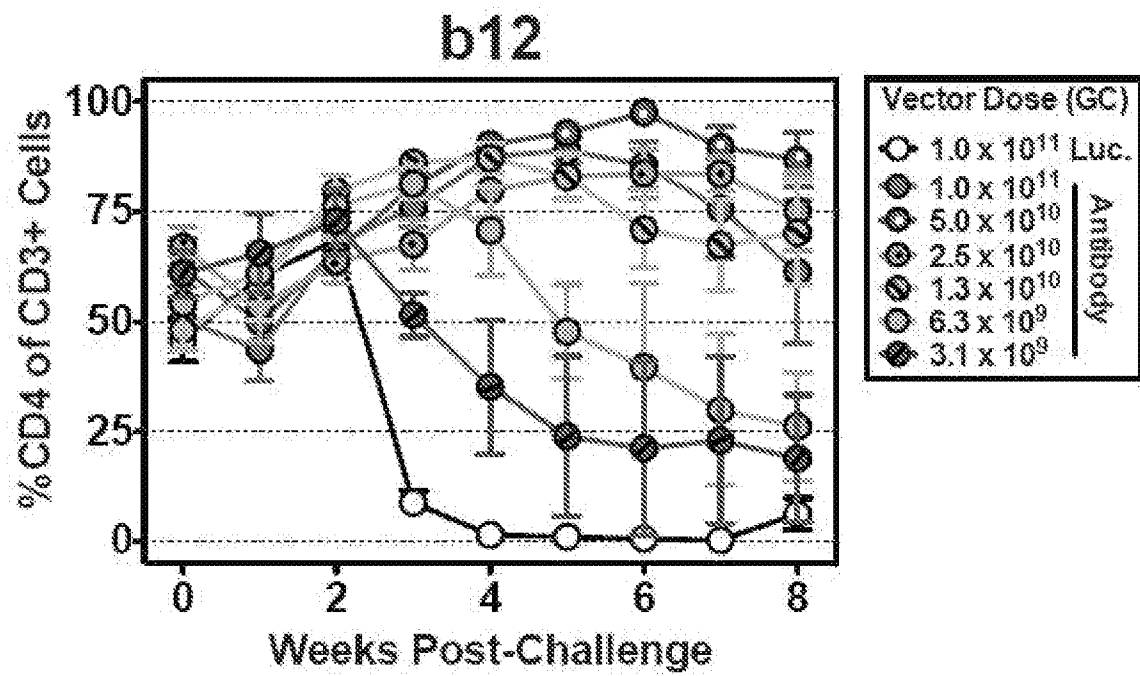
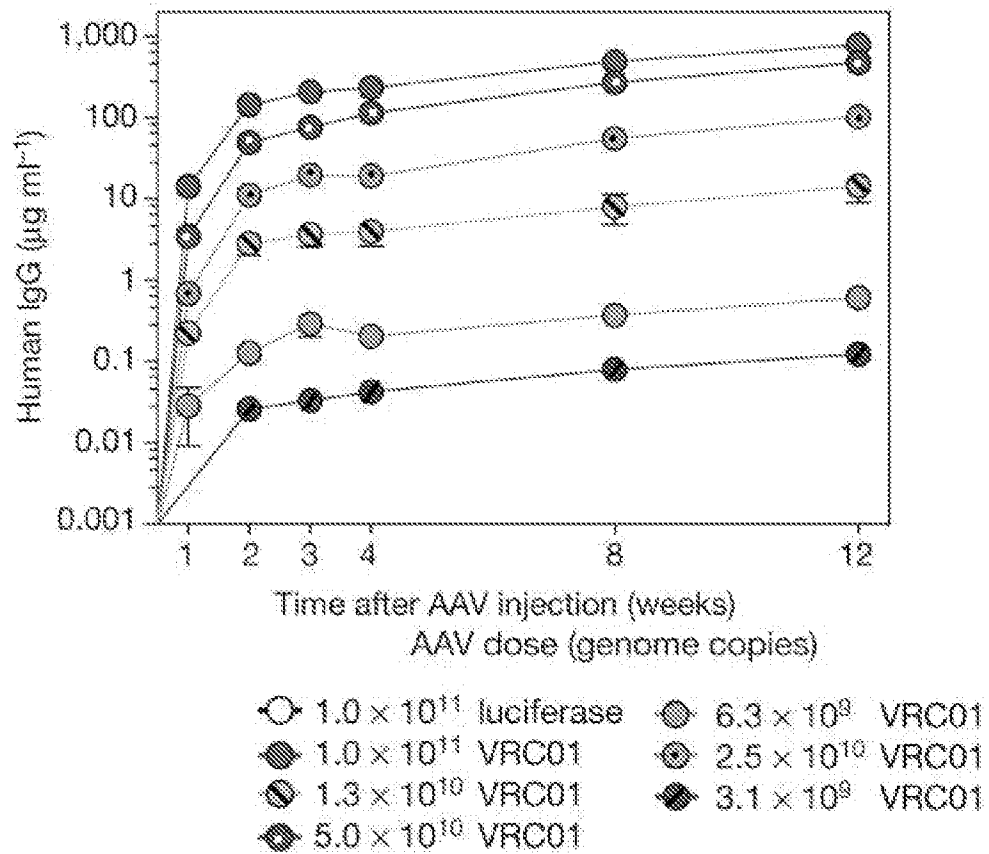


Figure 13

A.



B.

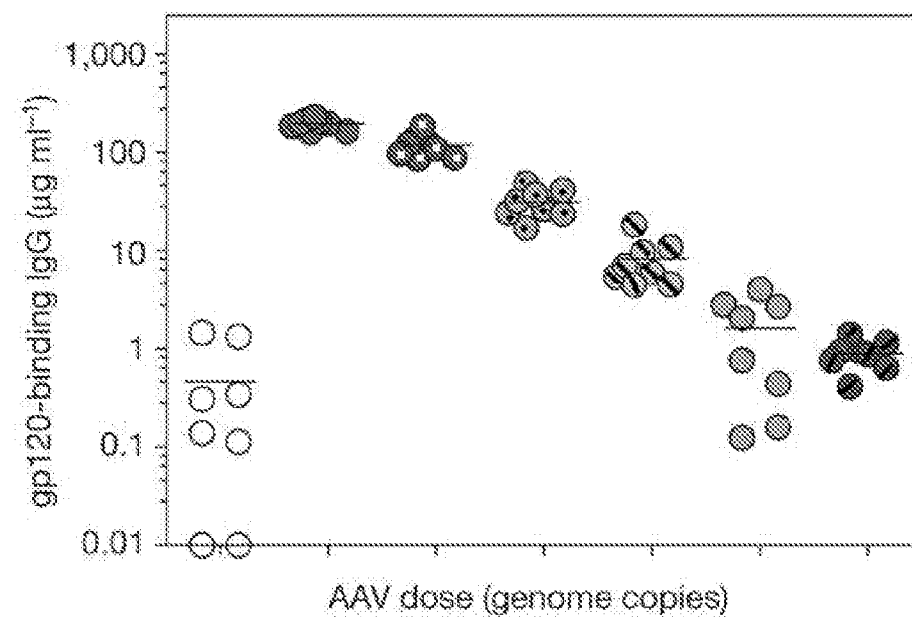


Figure 13 (continued)

C.

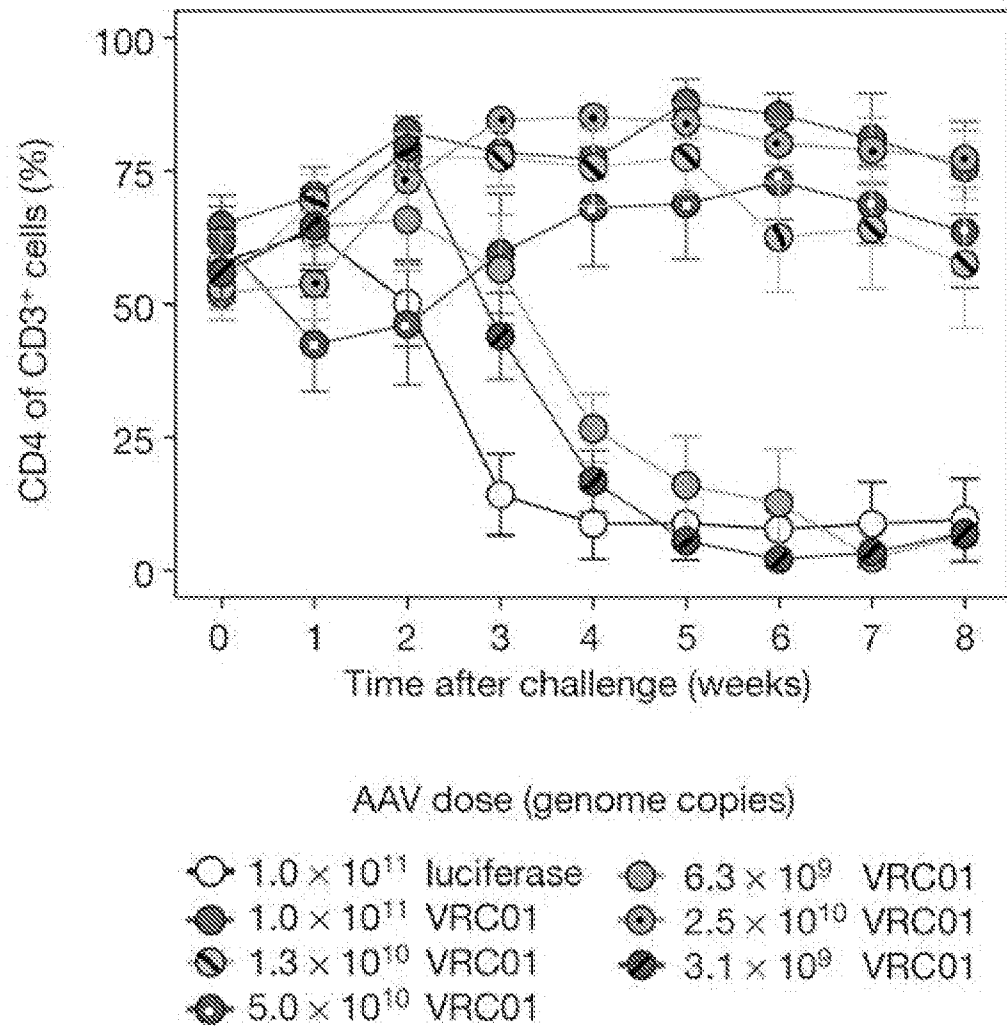


Figure 14

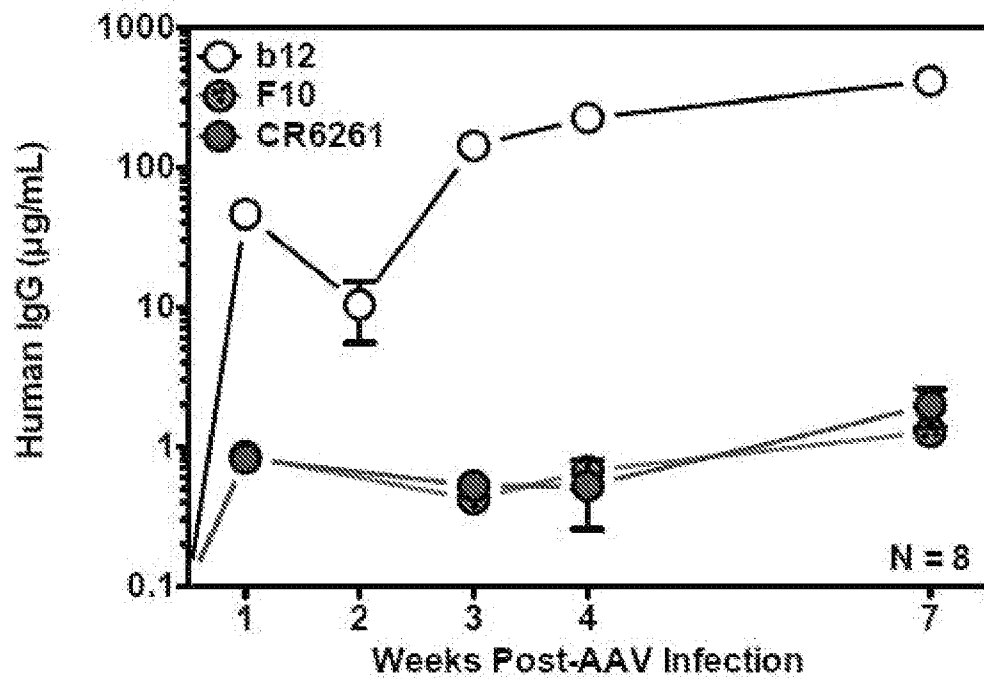
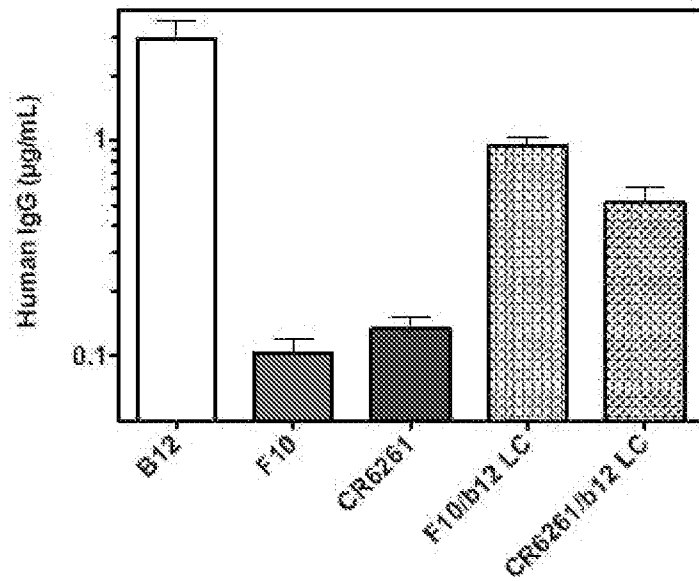


Figure 15

A.



B.

Abbreviation	Description of Substitution
LO1	5' b12 (6aa)
LO2	5' b12 (22aa)
LO3	3' b12 (6aa)
LO4	3' 4E10 (6aa)
LO13	5' b12 (6aa) + 3' b12 (6aa)
LO14	5' b12 (6aa) + 3' 4E10 (6aa)
LO23	5' b12 (22aa) + 3' b12 (6aa)
LO24	5' b12 (22aa) + 3' 4E10 (6aa)

Figure 15 (continued)

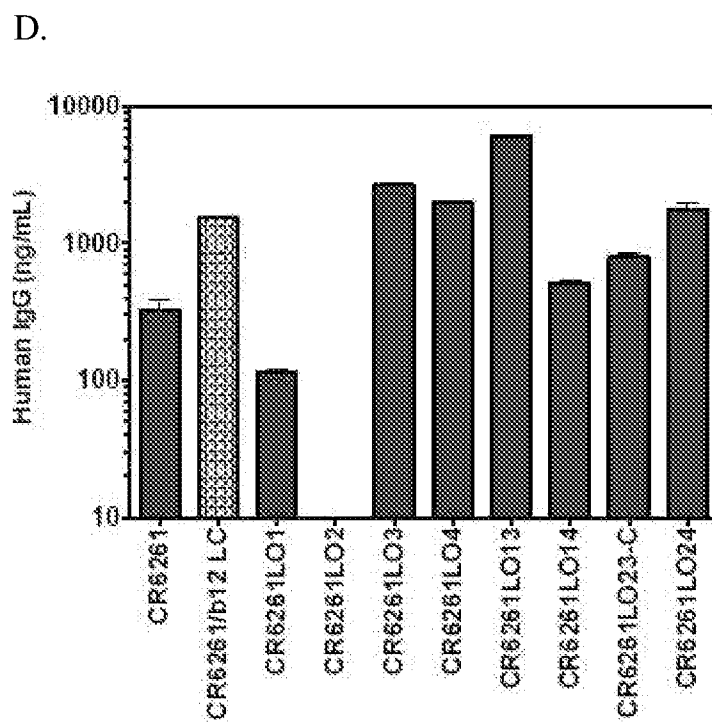
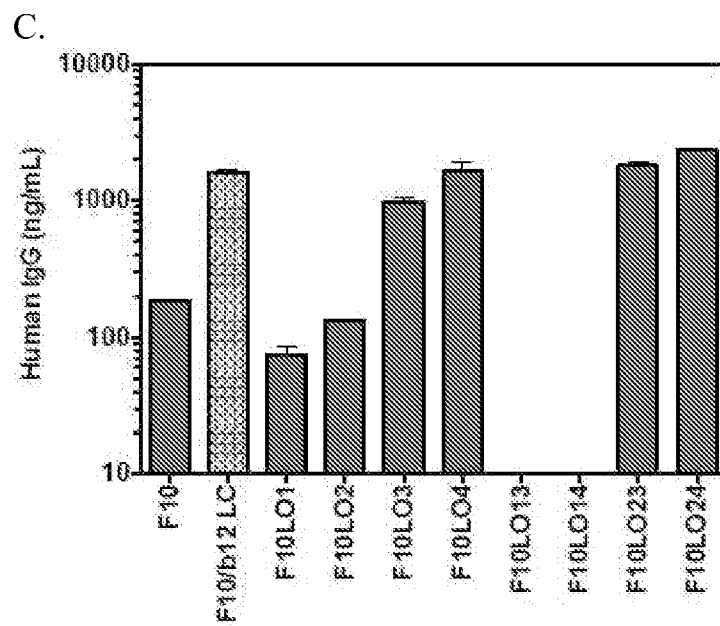
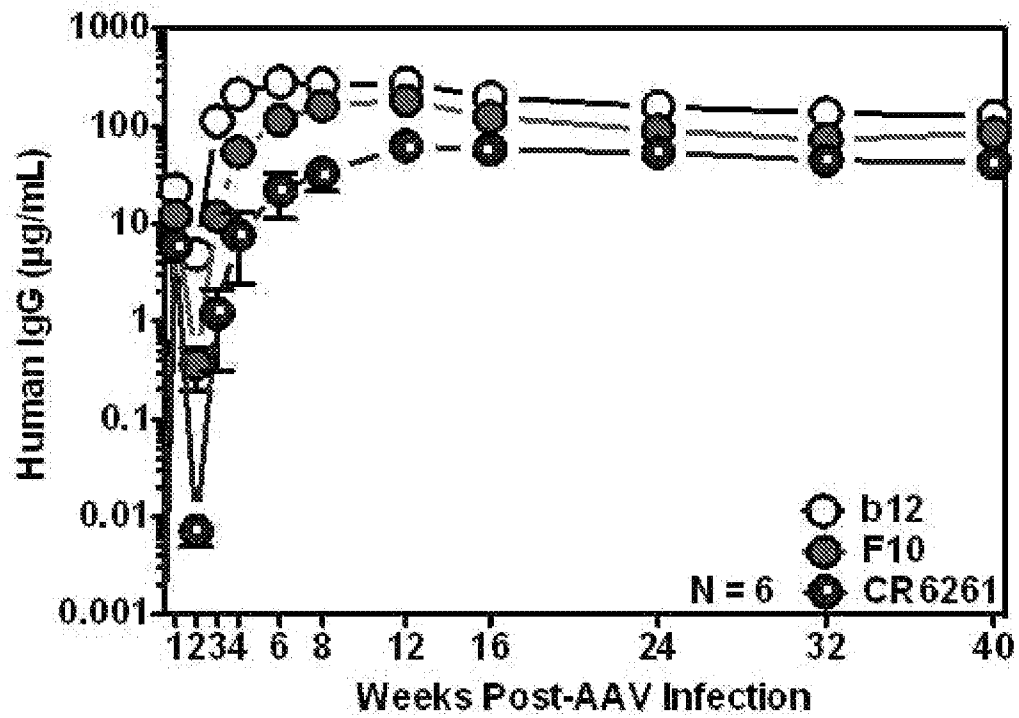


Figure 16

A.



B.

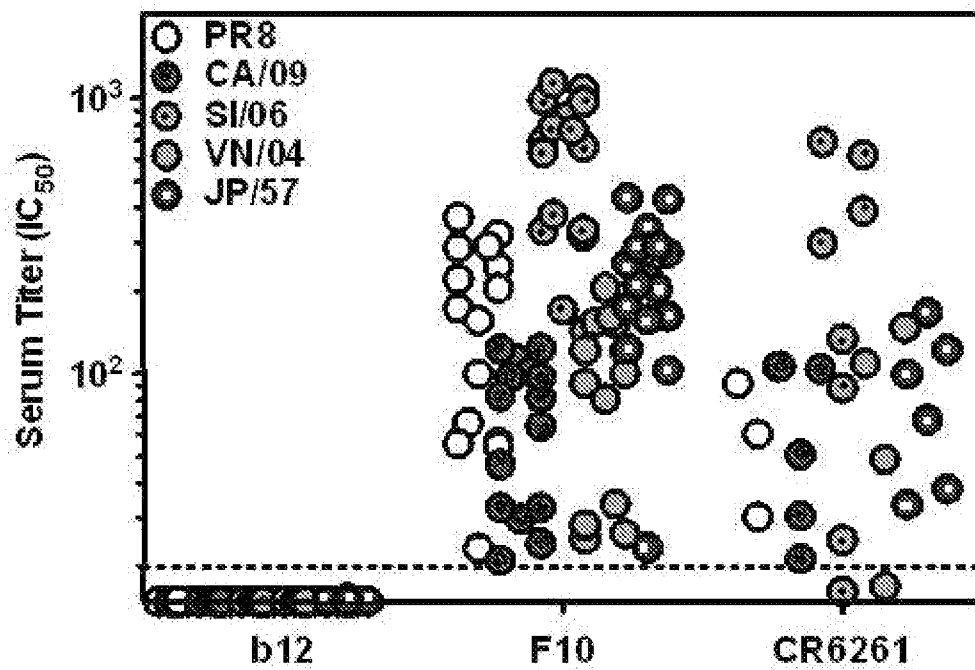
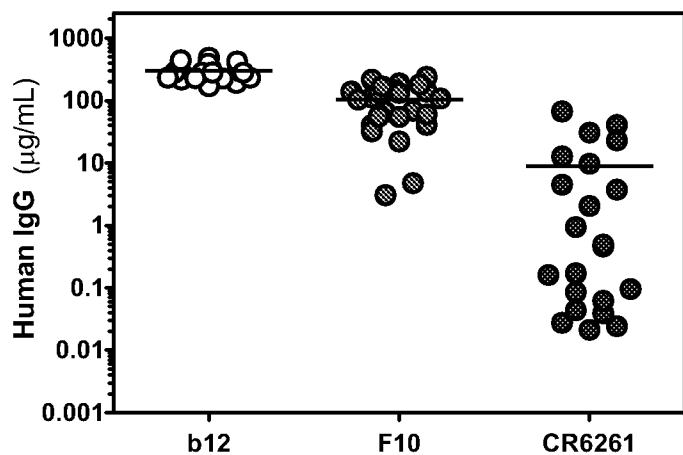
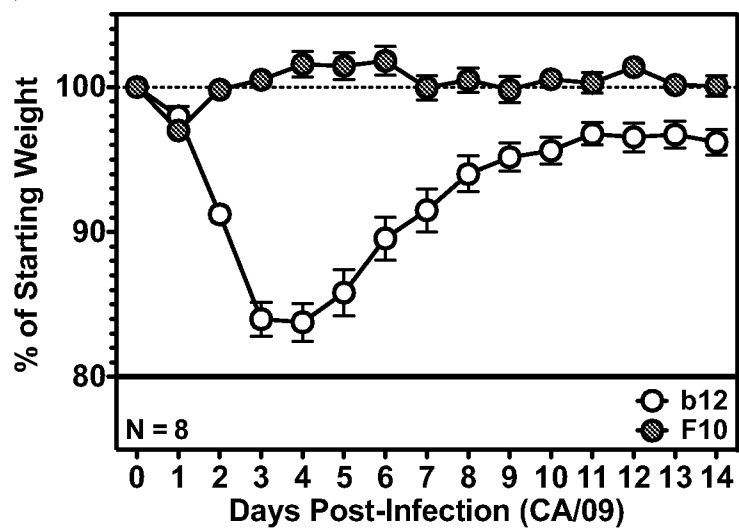


Figure 17

A.



B.



C.

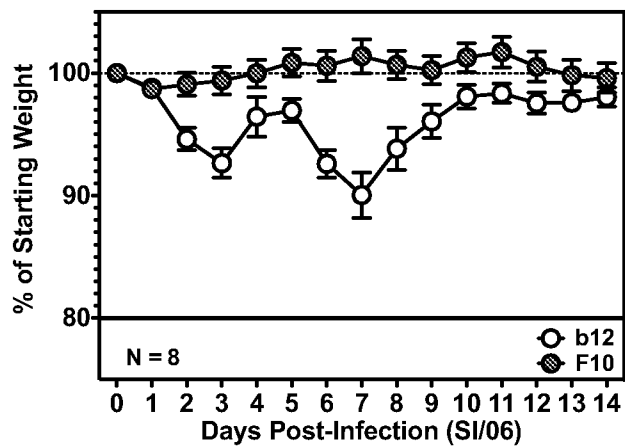
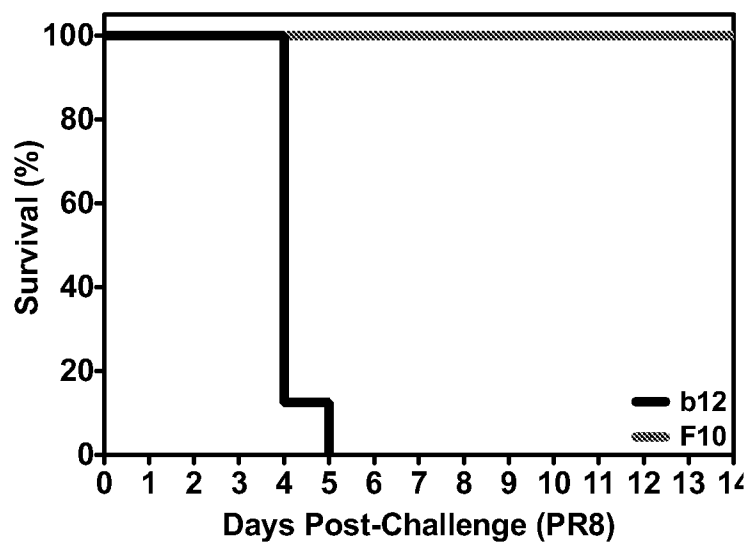


Figure 17 (continued)

D.



E.

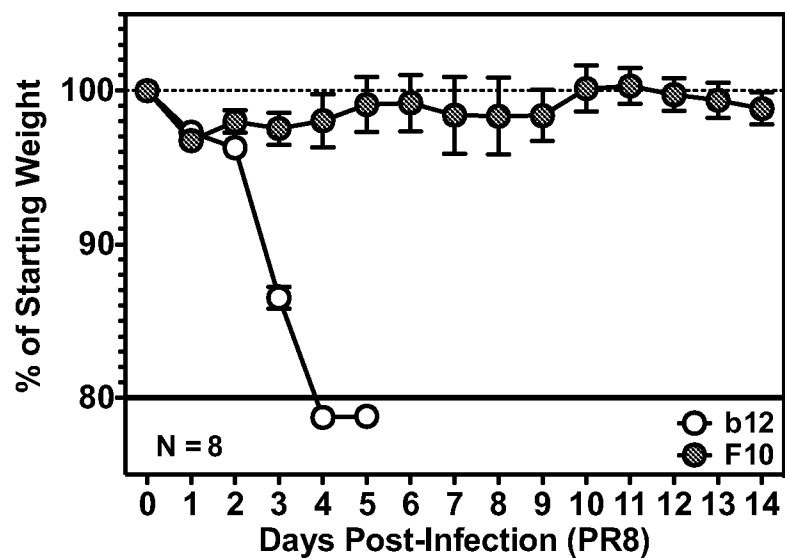
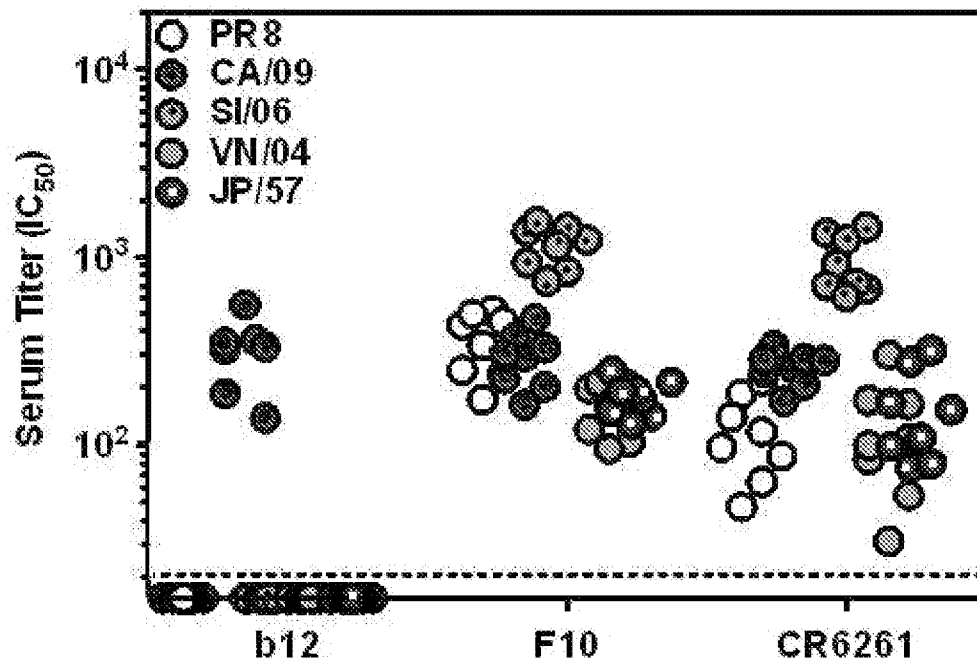


Figure 17 (continued)

F.



G.

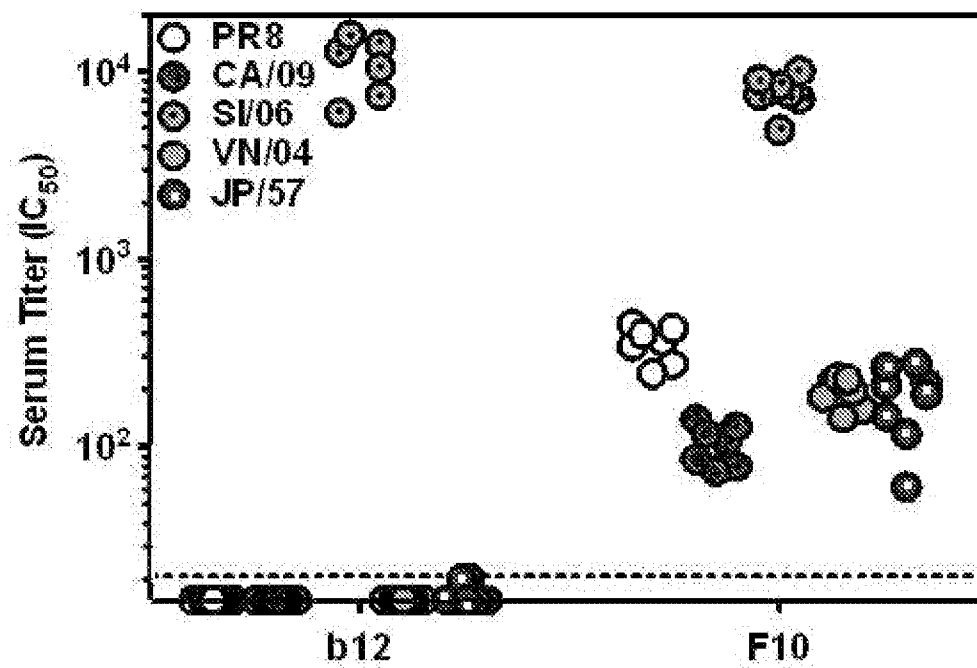
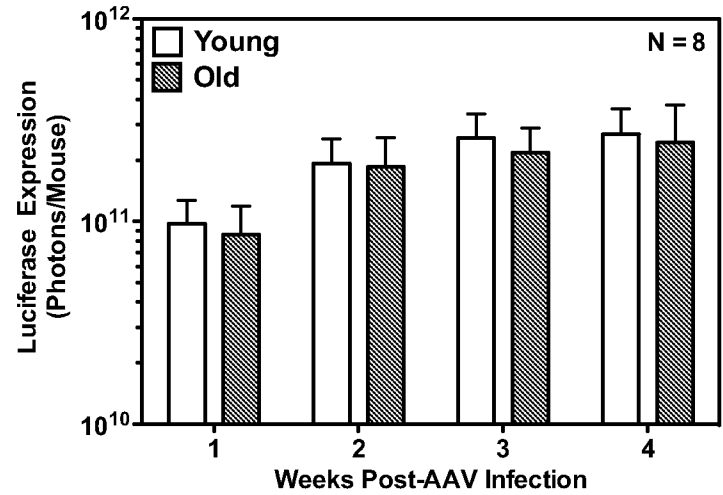
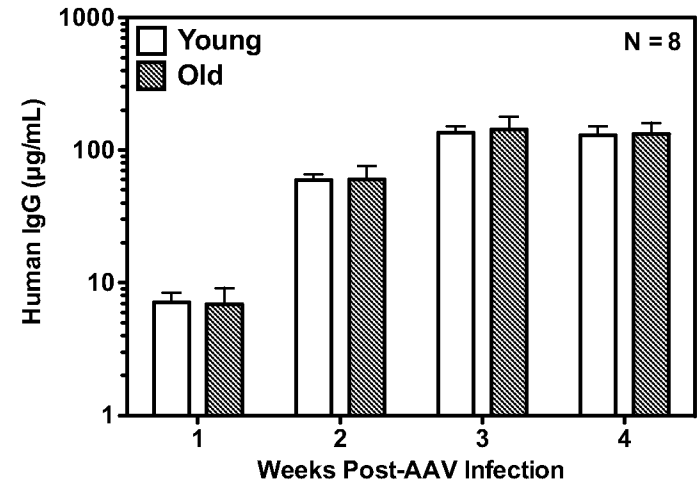


Figure 18

A.



B.



C.

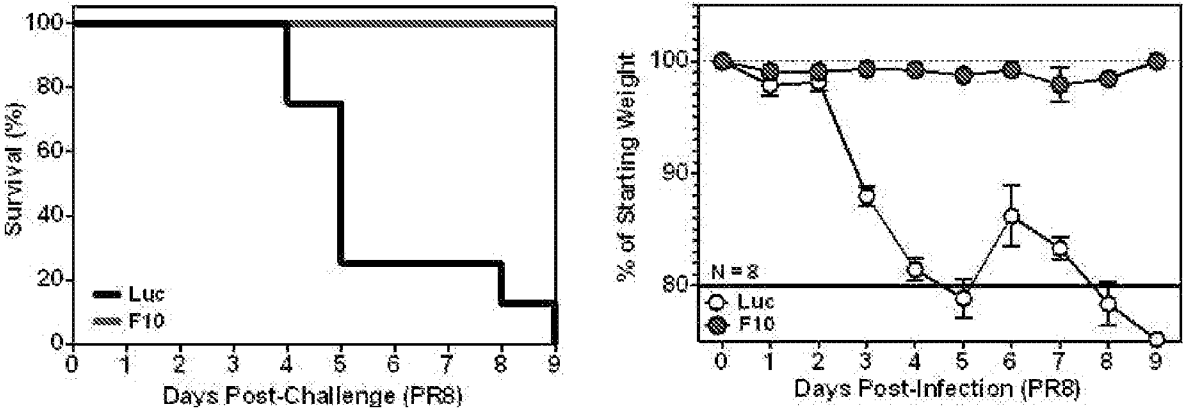
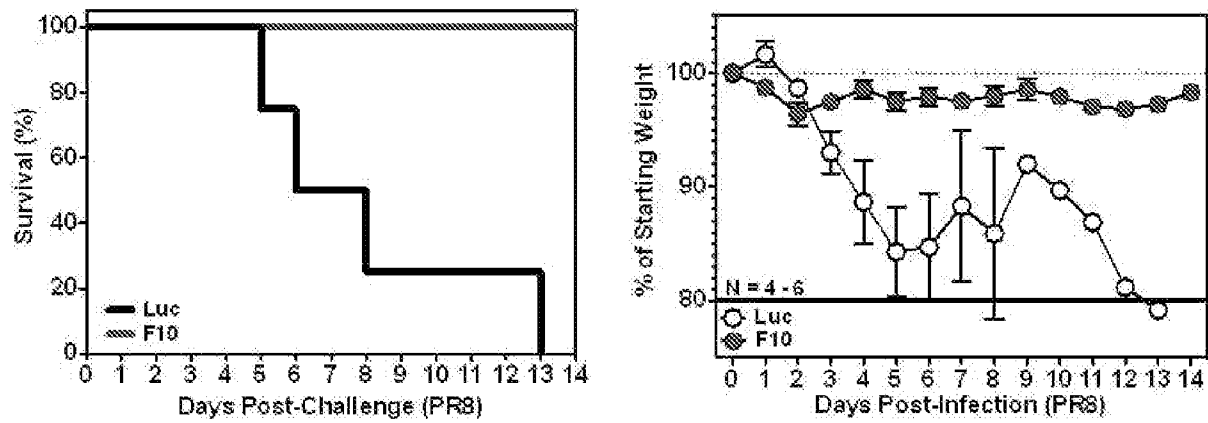


Figure 18 (continued)

D.



E.

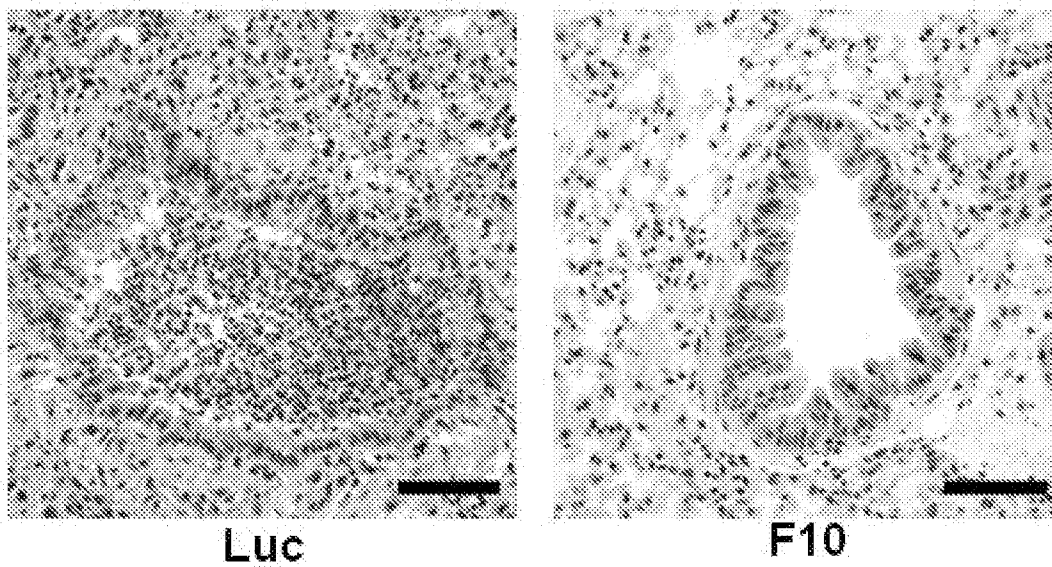
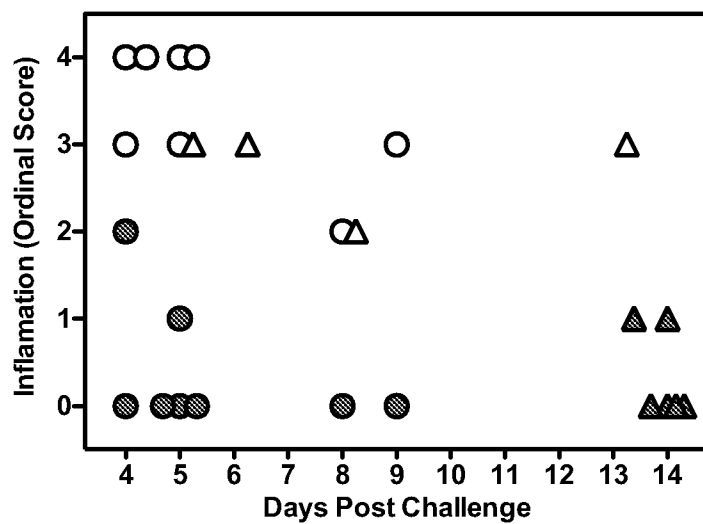


Figure 18 (continued)

F.



G.

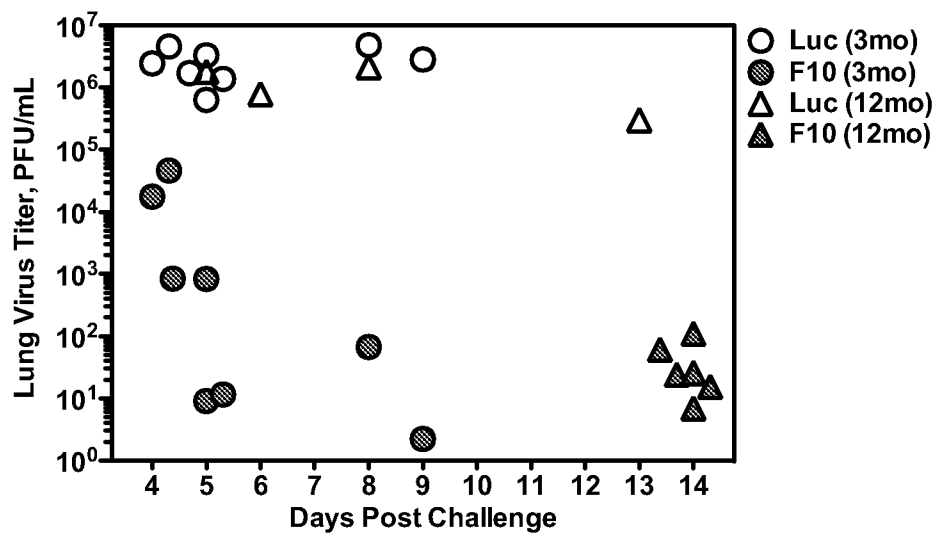


Figure 19

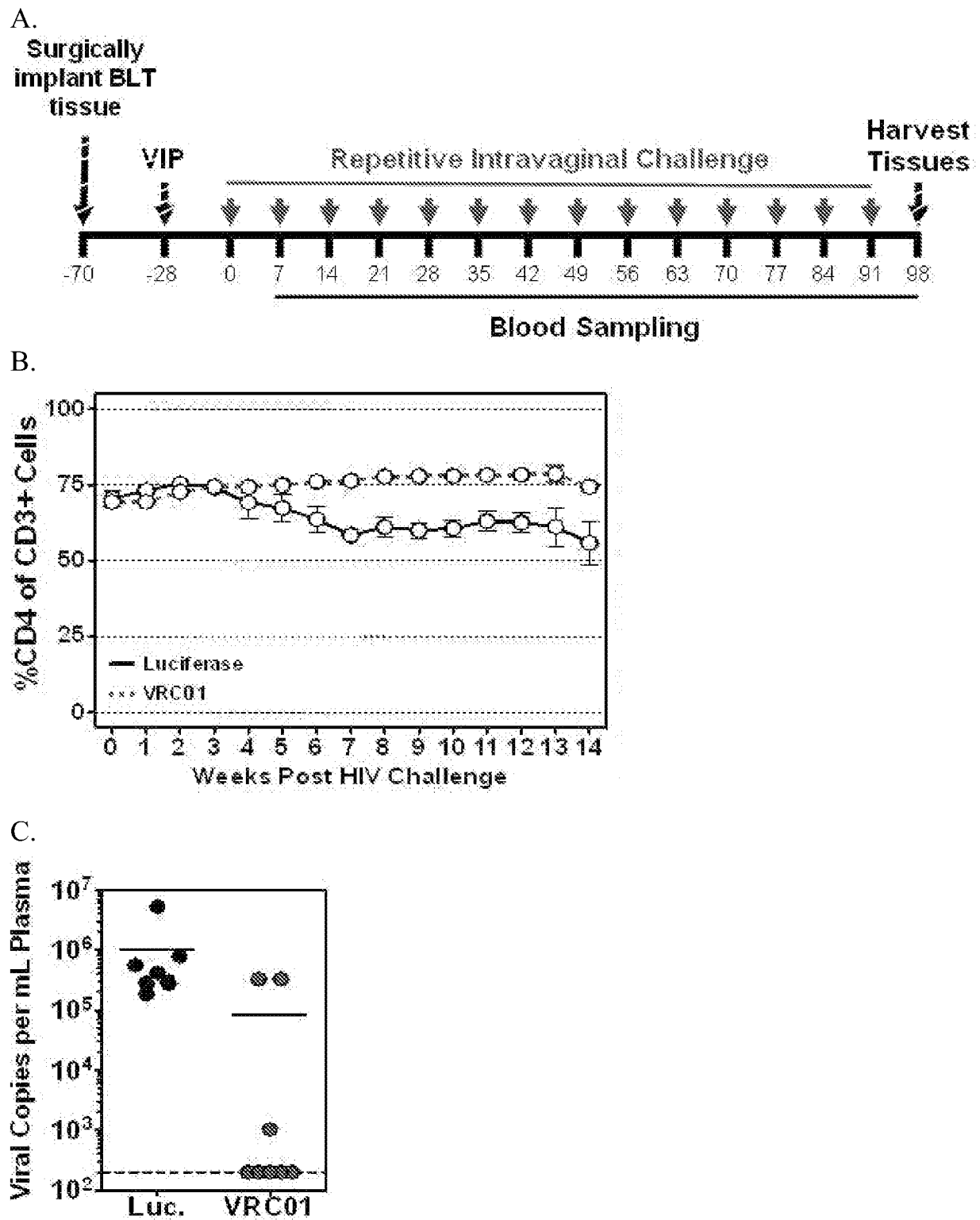
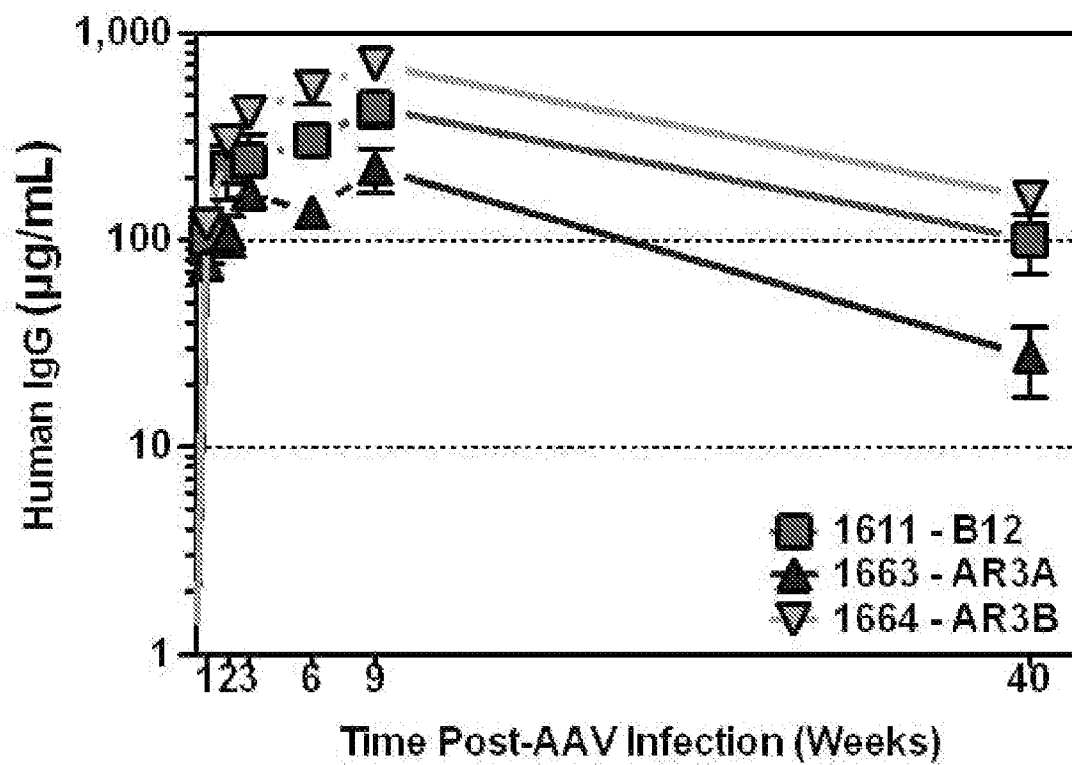


Figure 20



INTERNATIONAL SEARCH REPORT

International application No.

PCT/US2012/025970

A. CLASSIFICATION OF SUBJECT MATTER

Int. Cl.

C12N 15/83 (2006.01)

A61K 39/395 (2006.01)

C12N 15/11 (2006.01)

According to International Patent Classification (IPC) or to both national classification and IPC

B. FIELDS SEARCHED

Minimum documentation searched (classification system followed by classification symbols)

Documentation searched other than minimum documentation to the extent that such documents are included in the fields searched

Electronic data base consulted during the international search (name of data base and, where practicable, search terms used)

EPODOC, WPI, MEDLINE, BIOSIS (adeno-associated virus, AAV, vector, construct, gene therapy, recombinant, gene, sequence, nucleotide, nucleic, protein, interest, target, heterologous, insert, antibody, immunoglobuline, neutralizing, NAb, HIV, hepatitis, HCV, influenza, malaria, plasmodium, muscle, myocyte, express, optimize, splice, chimeric, combine, promoter, CMV, cytomegalovirus, CAG, beta actin, ubiquitin c, UBC, WPRE, HBVPRE, RTE) GENOMEQUEST (SEQ ID No's 1 – 4)

C. DOCUMENTS CONSIDERED TO BE RELEVANT

Category*	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
X	WO 2006/047250 A2 (NEUROLOGIX, INC.) 4 May 2006. See Figure 1, Example 1, page 5 lines 4 – 18, page 26.	1 – 5, 12 – 15, 17 – 22, 56, 58, 59
Y	As above.	6 – 11, 24 – 28, 38
X	US 2004/0156828 A1 (XU et al) 12 August 2004. See Example 1, Example 2, Claims, Figure 2.	1 – 4, 12 – 15, 17 – 22, 29
Y	As above.	6 – 11, 24 – 28, 38



Further documents are listed in the continuation of Box C



See patent family annex

* "A"	Special categories of cited documents: document defining the general state of the art which is not considered to be of particular relevance	"T"	later document published after the international filing date or priority date and not in conflict with the application but cited to understand the principle or theory underlying the invention
"E"	earlier application or patent but published on or after the international filing date	"X"	document of particular relevance; the claimed invention cannot be considered novel or cannot be considered to involve an inventive step when the document is taken alone
"L"	document which may throw doubts on priority claim(s) or which is cited to establish the publication date of another citation or other special reason (as specified)	"Y"	document of particular relevance; the claimed invention cannot be considered to involve an inventive step when the document is combined with one or more other such documents, such combination being obvious to a person skilled in the art
"O"	document referring to an oral disclosure, use, exhibition or other means	"&"	document member of the same patent family
"P"	document published prior to the international filing date but later than the priority date claimed		

Date of the actual completion of the international search
8 June 2012

Date of mailing of the international search report
12 June 2012

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INTERNATIONAL SEARCH REPORT

International application No.

PCT/US2012/025970

C (Continuation). DOCUMENTS CONSIDERED TO BE RELEVANT		
Category*	Citation of document, with indication, where appropriate, of the relevant passages	Relevant to claim No.
X	WO 2003/087324 A2 (CHILDREN'S HOSPITAL, INC.) 23 October 2003. See Figures 1 and 2, pages 7 – 10, 15, Examples 1, 6 and 8.	30 – 33, 37, 39 – 57, 59
Y	As above.	6 – 11, 24, 27, 28, 38
X	WO 2006/017325 A2 (CELL GENESYS, INC.) 16 February 2006. See Figures 1, 4 – 6, Examples 1 and 2, pages 37, 38.	30 – 32, 34 – 37, 56, 57, 59
Y	As above.	6, 24 – 28, 38
L	CRYSTAL, R.G. et al. "Clinical Protocol: Administration of a Replication-Deficient Adeno-Associated Virus Gene Transfer Vector Expressing the Human CLN2 cDNA to the Brain of Children with Late Infantile Neuronal Ceroid Lipofuscinosis", Human Gene Therapy, 2004, Vol. 15, pages 1131 – 1154. See Abstract, Figure 3.	
L	HALBERT, C.L. et al. "High-Efficiency Promoter-Dependent Transduction by Adeno-Associated Virus Type 6 Vectors in Mouse Lung", Human Gene Therapy, 2007, Vol. 18, pages 344 – 354. See Abstract.	
P,X	BALAZS, A.B. et al. "Antibody-based protection against HIV infection by vectored immunoprophylaxis", Nature, 2012, Vol. 481, pages 81 – 84. See whole document.	

INTERNATIONAL SEARCH REPORT

International application No.
PCT/US2012/025970**Box No. II Observations where certain claims were found unsearchable (Continuation of item 2 of first sheet)**

This international search report has not been established in respect of certain claims under Article 17(2)(a) for the following reasons:

1. ☐ Claims Nos.:
because they relate to subject matter not required to be searched by this Authority, namely:

2. ☐ Claims Nos.:
because they relate to parts of the international application that do not comply with the prescribed requirements to such an extent that no meaningful international search can be carried out, specifically:

3. ☐ Claims Nos.:
because they are dependent claims and are not drafted in accordance with the second and third sentences of Rule 6.4(a)

Box No. III Observations where unity of invention is lacking (Continuation of item 3 of first sheet)

This International Searching Authority found multiple inventions in this international application, as follows:

See Supplemental Box

1. ☐ As all required additional search fees were timely paid by the applicant, this international search report covers all searchable claims.
2. ☒ As all searchable claims could be searched without effort justifying additional fees, this Authority did not invite payment of additional fees.
3. ☐ As only some of the required additional search fees were timely paid by the applicant, this international search report covers only those claims for which fees were paid, specifically claims Nos.:

4. ☐ No required additional search fees were timely paid by the applicant. Consequently, this international search report is restricted to the invention first mentioned in the claims; it is covered by claims Nos.:

Remark on Protest

- ☐ The additional search fees were accompanied by the applicant's protest and, where applicable, the payment of a protest fee.
- ☐ The additional search fees were accompanied by the applicant's protest but the applicable protest fee was not paid within the time limit specified in the invitation.
- ☐ No protest accompanied the payment of additional search fees.

Supplemental Box

(To be used when the space in any of Boxes I to IV is not sufficient)

Continuation of Box No: III

The specification does not comply with Section 40(4) because the claims do not relate to one invention only. I have found different inventions based on the following features that separate the claims into distinct groups:

- Claims 1 – 29, 37, 38, 56 – 59. The feature of a recombinant adeno-associated viral vector comprising 5' and 3' ITR regions and methods for producing said vector is specific to this group of claims.
- Claims 30 – 36. The feature of producing a protein of interest using an adeno-associated viral vector is specific to this group of claims.
- Claims 39 – 55. The feature of reducing or inhibiting the infection risk of a virus comprising providing an adeno-associated viral vector that expresses a neutralizing antibody is specific to this group of claims.
- Claims 60 – 61. The feature of an isolated polynucleotide according to SEQ ID No. 2 is specific to this group of claims.

Unity of invention is only fulfilled when there is at least one “special technical feature” present in the claims that both:

- provides a technical relationship among all the claims; and,
- makes a contribution over the prior art.

When there is no special technical feature common to all the claimed inventions there is no unity of invention.

In the above groups of claims, the identified distinguishing features may have the potential to make a contribution over the prior art but are not common to all the claimed inventions and therefore cannot provide the required technical relationship. The only feature common to all of the claimed inventions and which provides a technical relationship among them is the use of adeno-associated viral vectors, or components capable of being included/expressed therein.

However this feature does not make a contribution over the prior art because recombinant adeno-associated viral vectors are well known in the art, as can be exemplified using any of the documents cited in the International Search Report.

In the light of these documents, this common feature cannot be a special technical feature. Therefore there is no special technical feature common to all the claimed inventions and the requirements for unity of invention are consequently not satisfied *a posteriori*.

It is noted however, that as all of the claimed inventions could be searched without undue additional effort, the International Search Report covers all inventions.

INTERNATIONAL SEARCH REPORT

Information on patent family members

International application No.

PCT/US2012/025970

This Annex lists the known "A" publication level patent family members relating to the patent documents cited in the above-mentioned international search report. The Australian Patent Office is in no way liable for these particulars which are merely given for the purpose of information.

Patent Document Cited in Search Report				Patent Family Member			
WO	2006047250	CA	2584986	EP	1807157	EP	2353651
		US	2006210538	US	8017385	US	2012039991
US	2004156828	CN	1761757	WO	2004061113		
WO	03087324	AU	2003223517	CA	2481813	EP	1572917
		EP	2036985	EP	2278020	JP	2006506948
		JP	2010006846	US	2003219733	US	2009035327
		US	2012027798				
WO	2006017325	CA	2573656	EP	1765846	JP	2008506389
		US	2006034805	US	7714119	US	2011065779
Due to data integration issues this family listing may not include 10 digit Australian applications filed since May 2001.							
END OF ANNEX							