Developing a non-human primate model of dendritic cell based immunotherapy in transplantation: Studies in the common marmoset monkey (Callithrix jacchus)

Dr Michael Gerard Collins, MBChB, FRACP

Transplantation Immunology Laboratory
The Queen Elizabeth Hospital
Discipline of Medicine, Faculty of Health Sciences
University of Adelaide

A thesis submitted in fulfilment of the requirements for the degree of Doctor of Philosophy, University of Adelaide

July 2013

TABLE OF CONTENTS

List	of Tal	bles and Figures	viii
The	sis Ab	stract	XV
Dec	laratio	n	xvii
Awa	ards	x	viii
Pub	licatio	ns	xix
Pres	entati	ons	xx
Ack	nowle	dgments	xxii
Abb	reviat	ionsx	xiv
Cha	pter 1	: Background and Literature Review	1
1.1.	The	context: End-stage kidney disease and transplantation	3
1.2.	Tran	splant tolerance – a coming clinical reality?	5
	1.2.1.	Clinical occurrence of tolerance	5
	1.2.2.	Strategies to induce tolerance used in pre-clinical and clinical studies	6
1.3.	Deno	dritic cells: derivation, biology and classification	10
	1.3.1.	The origins and development of DC	11
	1.3.2.	Classification of DC	14
	1.3.3.	In vitro propagated DC: models for investigating DC development and immunobiology	25
	1.3.4.	DC pattern recognition receptors	26
1.4.	Deno	Iritic cells and tolerance	32
	1.4.1.	Central tolerance	32
	1.4.2.	Peripheral tolerance	32
1.5.	Deno	dritic cells in transplantation	36
	1.5.1.	DC and allo-recognition	36
	152	Using DC to promote tolerance: Tolerogenic DC	40

	1.5.3.	Tolerogenic DC therapy in transplantation	44
	1.5.4.	Targeting DC in situ to promote transplant tolerance	48
1.6.	Non	human primate dendritic cells	50
	1.6.1.	NHP models of DC biology	50
	1.6.2.	In vitro propagated DC in NHP models	51
	1.6.3.	In vivo NHP DC	66
	1.6.4.	NHP DC: conclusions	72
1.7.	Lipo	somes and nanoparticles	74
	1.7.1.	Liposomes	74
	1.7.2.	Polymeric nanoparticles	82
1.8.	Deve	eloping a non-human primate model of DC immunotherapy: the common	
	marr	noset monkey	91
	1.8.1.	The common marmoset as a novel transplant model	91
	1.8.2.	Marmosets as a potential NHP model for DC immunotherapy studies	93
	1.8.3.	DC immunotherapy studies in marmoset monkeys	93
1.9.	Liter	rature Review: Conclusions	96
1.10). Thes	is aims and hypotheses	98
Cha	ipter 2	2: Materials and Methods	99
2.1.	Intro	duction	.100
2.2.	Mate	rials	.100
	2.2.1.	Antibodies	100
	2.2.2.	Cytokines	101
	2.2.3.	Prepared buffers, media and solutions	101
	2.2.4.	Materials for immunoliposomes and polymeric PLGA nanoparticles	102
2.3.	Anin	nals	.104
	2.3.1.	Animals	104
	2.3.2.	Marmoset colony maintenance	104
	233	Ethical clearance	104

	2.3.4.	Peripheral blood sampling	105
	2.3.5.	Urine collection and analysis	105
	2.3.6.	Euthanasia	106
2.4.	Cell	culture protocols	.107
	2.4.1.	Washes	107
	2.4.2.	Marmoset	107
	2.4.3.	Human	110
	2.4.4.	Cryopreservation of cells	111
2.5.	Imm	unofluorescence and microscopy	.113
2.6.	Flow	cytometry	.114
2.7.	Mole	cular biology techniques: cloning of marmoset and human DC-SIGN	.115
	2.7.1.	Cloning of marmoset and human DC-SIGN	115
	2.7.2.	Transfection of CHO cell line with marmoset or human DC-SIGN	117
2.8.	Manı	ıfacturers	.119
CI.			
Cha	ractei	Establishing the basis for a marmoset renal transplant model: risation of marmoset renal histology and correlation with serum and	121
Cha urii	ractei iary fi	risation of marmoset renal histology and correlation with serum and ndings	
Chaurin	ractei nary fi Intro	risation of marmoset renal histology and correlation with serum and ndings	.123
Chaurin	ractei nary fi Intro	risation of marmoset renal histology and correlation with serum and ndings	123
Chaurin	ractei nary fi Intro	risation of marmoset renal histology and correlation with serum and ndings	123
Chaurin	nracter nary fi Intro-	risation of marmoset renal histology and correlation with serum and ndings duction ods. Animals Evaluation of marmoset renal tissues	123
Chaurin	Introduced Methods 3.2.1.	risation of marmoset renal histology and correlation with serum and ndings duction ods. Animals Evaluation of marmoset renal tissues. Assessment of blood and urine parameters	123 125 125 126
Cha urin 3.1. 3.2.	Introd Meth 3.2.1. 3.2.2. 3.2.3. 3.2.4.	risation of marmoset renal histology and correlation with serum and ndings	123 125 125 126 127
Cha urin 3.1. 3.2.	Introd Meth 3.2.1. 3.2.2. 3.2.3. 3.2.4.	risation of marmoset renal histology and correlation with serum and andings	123 125 125 126 127 128
Cha urin 3.1. 3.2.	Introd Meth 3.2.1. 3.2.2. 3.2.3. 3.2.4.	risation of marmoset renal histology and correlation with serum and ndings duction ods Animals Evaluation of marmoset renal tissues Assessment of blood and urine parameters Statistical analysis Its Animals	123 125 125 126 127 128 129
Cha urin 3.1. 3.2.	Introduced Methodological Methodolog	risation of marmoset renal histology and correlation with serum and ndings duction ods Animals Evaluation of marmoset renal tissues Assessment of blood and urine parameters Statistical analysis Its Animals Histology	123 125 125 126 127 128 129
Cha urin 3.1. 3.2.	Introduced Methodological Methodolog	risation of marmoset renal histology and correlation with serum and ndings duction ods Animals Evaluation of marmoset renal tissues Assessment of blood and urine parameters Statistical analysis Its Animals	123125125126127128129129129

	3.3.5.	Biochemistry parameters and urinary protein1	.41
3.4.	Discu	ussion	45
	•	: Donor-derived dendritic cell therapy: Trafficking of allogeneic and	40
auto	nogou	s marmoset dendritic cells <i>in vivo</i> 1	49
4.1.	Intro	duction1	50
4.2.	Meth	ods1	52
	4.2.1.	Animals	52
	4.2.2.	Cell culture1	.52
	4.2.3.	Fluorescent labelling of in vitro propagated marmoset DC	.53
	4.2.4.	Confirmation of suitability of propagated labelled marmoset DC for DC infusion	54
	4.2.5.	Selection of donor and recipient animals for DC administration studies	.54
	4.2.6.	Administration of labelled DC via subcutaneous and intravenous infusion	.55
	4.2.7.	Collection and analysis of marmoset tissues following DC administration	56
4.3.	Resu	lts1	58
	4.3.1.	Suitability of in vitro propagated and fluorescently labelled marmoset DC for DC infusion studies	
	4.3.2.	Selection of donor-recipient pairs	61
	4.3.3.	Yield of marmoset MoDC and HPDC following culture	62
	4.3.4.	Confirmation of allo-reactivity between donors and recipients in allogeneic mixed leucocy reaction	
	4.3.5.	Administration of allogeneic and autologous DC to marmoset recipients and collection of tissues	
	4.3.6.	Trafficking of subcutaneously administered marmoset MoDC in vivo1	66
	4.3.7.	Trafficking of intravenously administered marmoset HPDC in vivo	69
4.4.	Discu	ussion1	73
Cha	pter 5	S: Development of monoclonal antibodies to target DC-SIGN on	
mar	moset	dendritic cells to facilitate targeted therapy1	7 9
5 1	Intro	duction1	80

5.2.	Meth	nods
	5.2.1.	Cell culture
	5.2.2.	Cloning of marmoset and human DC-SIGN
	5.2.3.	Development of monoclonal antibodies targeting marmoset DC-SIGN183
	5.2.4.	Screening of monoclonal antibodies for binding to marmoset and human DC-SIGN185
	5.2.5.	Generation of purified monoclonal antibodies against marmoset DC-SIGN185
	5.2.6.	Identification of DC-SIGN positive cells in marmoset spleen and confirmation of monoclonal antibody binding
	5.2.7.	Confirmation of binding of purified monoclonal antibodies to marmoset and human DC-SIGN
5.3.	Resu	lts188
	5.3.1.	Cloning of human and marmoset DC-SIGN
	5.3.2.	Screening of hybridoma supernatants for binding to marmoset and human MoDC199
	5.3.3.	Screening of hybridoma supernatants for binding to marmoset and human DC-SIGN transfected CHO cells
	5.3.4.	Immunofluorescence microscopy: binding of hybridoma supernatants to DC-SIGN in marmoset and human lymphoid tissues
	5.3.5.	Generation of purified monoclonal antibodies targeting marmoset DC-SIGN from hybridoma supernatants
	5.3.6.	Identification of DC-SIGN positive cells in marmoset spleen; lack of staining with generated monoclonal antibodies
	5.3.7.	Studies of binding of purified monoclonal antibodies to marmoset and human DC-SIGN 208
5.4.	Disc	ussion210
	•	5: Development of immunoliposomes and nanoparticles targeting
		nd marmoset DC-SIGN to modify dendritic cell function214
6.1.	Intro	duction216
6.2.	Meth	nods
	6.2.1.	Materials218
	6.2.2.	Preparation and characterisation of immunoliposomes
	6.2.3.	Preparation and characterisation of PLGA nanoparticles targeting DC-SIGN221

	6.2.4.	DC-SIGN binding assay – enzyme-linked immunosorbent assay (ELISA)	223
	6.2.5.	Protein quantification assay	224
	6.2.6.	Cell culture	225
	6.2.7.	Immunoliposome and PLGA nanoparticle uptake by human MoDC	225
	6.2.8.	PLGA nanoparticle uptake by marmoset splenocytes	227
	6.2.9.	Curcumin-containing PLGA nanoparticles – effects on human MoDC	228
6.3.	Resu	ılts	230
	6.3.1.	Immunoliposomes	230
	6.3.2.	PLGA nanoparticles	240
6.4.	Disc	ussion	253
	6.4.1.	Immunoliposomes targeting DC-SIGN	253
	6.4.2.	PLGA nanoparticles targeting DC-SIGN	257
	6.4.3.	Conclusions	260
Cha	pter 7	7: Conclusions and Future directions	261
7.1.	Sum	mary and Conclusions	262
7.2.	Futu	re directions	265
	7.2.1.	Proposed further studies evaluating allogeneic DC therapy in marmosets: allogeneic D	C
		trafficking and effects on the immune response in vivo	265
	7.2.2.	Proposed further studies of monoclonal antibodies targeted to marmoset DC-SIGN, and	
		evaluation of marmoset DC-SIGN ⁺ cells identified using DCN46 monoclonal antibody	·266
	7.2.3.	Proposed further studies of DC-SIGN targeted immunoliposomes	267
	7.2.4.	Proposed further studies of DC-SIGN targeted PLGA nanoparticles	268
Ref	erence	es	270
			, 0
Anr	endiv		332

LIST OF TABLES AND FIGURES

Figure 1.3.1. Scanning electron micrograph of a mature dendritic cell, demonstrating the presence of abundant well-developed dendrites at the cell surface	.10
Figure 1.3.2. Dendritic cell and monocyte origin and development.	.13
Table 1.3.1. Phenotypic markers of dendritic cell (DC) subsets in the mouse	.17
Figure 1.3.3. Distribution of human DC	.21
Figure 1.3.4. Surface markers of the major human DC populations and their murine homologues	.24
Table 1.3.2. Toll-like receptor and C-type lectin receptor expression by human DC subtypes	.27
Figure 1.3.5. Structure of human DC-SIGN	.31
Figure 1.4.1. The interaction of DC with naïve T-cells can lead to either immune activation or tolerance.	.35
Figure 1.5.1. The role of dendritic cells (DC) in peripheral tolerance and graft rejection.	.39
Table 1.5.1. Efficacy of donor DC pre-treatment on allograft survival in small animal studies.	
Table 1.5.2. Efficacy of recipient DC pre-treatment on allograft survival in small animal studies.	.46
Figure 1.6.1. Simplified phylogenetic tree demonstrating the evolutionary distances and relationships between key NHP species used for biomedical research and humans.	.52
Table 1.6.1. Surface Marker Expression and Response to Maturation Stimuli of NHP DC: Summary of Selected Studies.	.53
Table 1.6.2. Functional studies of NHP DC: summary of selected studies	.56
Figure 1.6.2. Morphology of marmoset and human MoDC differentiated from G-CSF mobilised monocytes.	

Figure 1.6.3. Four-color gating strategy for identification of presumptive pre-DC subsets in blood of rhesus monkeys.	67
Figure 1.6.4. Morphology of flow-sorted rhesus DC subsets	67
Table 1.7.1. Liposome vesicle types, size and lipid layers	75
Figure 1.7.1. Aspects of liposomes and micelles.	75
Figure 1.7.2. Sterically stabilised PEGylated immunoliposome. This schematic representation shows antibodies coupled to the distal end of the PEG-chains	77
Figure 1.7.3. Evolution of liposomes.	78
Figure 1.7.4. Thiolation of antibodies using Traut's reagent and conjugation of thiolated antibody to maleimide groups on the derivatized PEG.	81
Figure 1.7.5. Cartoon depicting the combinatorial approach to the formation of ligand-targeted liposomal anticancer drugs.	81
Figure 1.7.6. Chemical structure of polylactide-co-glycolide (PLGA), showing its degradation to lactic and glycolic acid.	82
Figure 1.7.7. Schematic representation of aspects of the design of targeted nanoparticle systems.	83
Figure 1.7.8. Preparation of polymeric nanocarriers by nanoprecipitation	86
Figure 1.7.9. Chemical structure of PEG- <i>b</i> -PLGA copolymer with terminating carboxyl group.	87
Figure 1.7.10. Schematic illustration of formation of drug containing PLGA nanoparticles using amphiphilic PLGA- <i>b</i> -PEG copolymers	88
Figure 1.7.11. Sulfo-NHS plus EDC (carbodiimide) crosslinking reaction scheme	89
Figure 1.7.12. Schematic illustration of synthesis of targeted PLGA nanoparticles utilising carbodiimide chemistry.	90
Figure 1.8.1. Marmoset recipient immune responses following the infusion of allogeneic donor-derived DC.	94
Table 2.7.1. Ligation reaction for pGEM®-T easy vector	116

Figure 3.3.1. Representative marmoset kidney light microscopy images showing mesangial expansion and hypercellularity
Figure 3.3.2. Representative image of the measurement method used to assess marmoset glomerular diameter in this study
Table 3.3.1. Renal histology, immunofluorescence and ultrastructural analysis in 25 adult marmoset monkeys
Table 3.3.2. Summary of renal histology and ultrastructural quantitative data135
Figure 3.3.3. Glomerular diameter in 25 adult marmoset monkeys
Figure 3.3.4. Frequency distribution of the diameters of 333 non-sclerotic glomeruli in 25 adult marmoset monkeys aged up 14 years
Figure 3.3.5. Representative immunofluorescence microscopy images of marmoset kidneys showing mesangial immunoglobulin deposits
Figure 3.3.6. Representative electron microscopic images of marmoset kidney showing the presence of mesangial deposits
Figure 3.3.7. Ultrastructural analysis of glomerular basement membrane (GBM) thickness in 23 marmoset monkeys
Figure 3.3.8. Frequency distribution of serum creatinine (µmol/L) results from 45 peripheral blood samples taken from 34 marmoset monkeys aged up 14 years141
Table 3.3.3. Serum biochemistry in adult marmoset monkeys
Figure 3.3.9. Urinary dipstick protein measurements from 84 urine samples taken from 34 marmoset monkeys aged up to 14 years
Table 3.3.4. Urine biochemistry and dipstick parameters in adult marmoset monkeys.144
Figure 4.3.1. Fluorescent labelling of <i>in vitro</i> propagated marmoset MoDC with CFSE or DiI does not alter stimulation potential in a xenogeneic mixed leucocyte reaction.
Figure 4.3.2. Marmoset HPDC propagated <i>in vitro</i> have excellent viability, which is not altered by labelling with CFSE
Table 4.3.1. <i>Caja</i> -DRB (Class II MHC) genotyping of the marmoset donors and recipients used in studies of DC trafficking

Figure 4.3.3. Yield of marmoset peripheral blood mononuclear cells (PBMCs) and immature monocyte-derived dendritic cells (MoDC) following G-CSF mobilisation and subsequent MoDC culture
Figure 4.3.4. Yield of haematopoietic progenitor (HP) culture of G-CSF mobilised marmoset PBMCs, and subsequent differentiation of haematopoietic progenitor derived dendritic cells (HPDC).
Figure 4.3.5. Confirmation of allo-reactivity between allogeneic marmoset donors and recipients in allogeneic mixed leucocyte reactions (MLR)
Figure 4.3.6. Marmoset MoDC labelled with DiI and injected subcutaneously are present at the site of injection after 48 hours but do not migrate to the draining lymph node.
Figure 4.3.7. Dil positive marmoset MoDC are not found in the draining lymph node at 48 hours following subcutaneous injection
Figure 4.3.8. Allogeneic marmoset HPDC labelled with CFSE and injected intravenously are not detectable in tissues after 48 hours
Figure 4.3.9. CFSE positive allogeneic marmoset HPDC are not found in the spleen at 48 hours following intravenous injection.
Figure 4.3.10. Autologous marmoset HPDC labelled with CFSE and injected intravenously are detectable in spleen and possibly liver after 48 hours
Table 5.2.1. Sense and anti-sense primers used for cloning of human and marmoset DC-SIGN
Figure 5.2.1. Summary of the steps in the process of generating monoclonal antibodies with the use of hybridoma technology
Figure 5.2.2. Forward and side scatter plot showing representative gate used to select marmoset splenocytes in the flow cytometry studies to identify DC-SIGN positive cells
Figure 5.3.1. Schematic representation of cloning of marmoset and human DC-SIGN into the pGEM®T-easy vector
Figure 5.3.2. Nucleotide sequence alignment of marmoset DC-SIGN191
Figure 5.3.3. Nucleotide sequence alignment of human DC-SIGN193

Figure 5.3.4. Schematic representation of sub-cloning of marmoset and human DC-SIGN into the pCI mammalian expression vector
Figure 5.3.5. Cloned marmoset and human DC-SIGN were successfully ligated into pCI mammalian expression vector in the correct orientation
Figure 5.3.6. Comparison of the amino acid sequences of marmoset and human DC-SIGN, showing the alignment of antigens #1, #2 and #3 within the marmoset peptide.198
Figure 5.3.7. Flow cytometry screening of binding of hybridoma supernatants to marmoset MoDC
Figure 5.3.8. Hybridoma supernatants bind to <u>marmoset</u> DC-SIGN expressed on the surface of CHO cells
Figure 5.3.9. Hybridoma supernatants bind to <u>human DC-SIGN</u> expressed on the surface of CHO cells
Figure 5.3.10. Hybridoma supernatants targeting marmoset DC-SIGN and anti-human DC-SIGN (DCN46) bind to cells in marmoset thymus
Figure 5.3.11. Hybridoma supernatants targeting marmoset DC-SIGN and anti-human DC-SIGN (DCN46) bind to cells in marmoset spleen
Figure 5.3.12. Hybridoma supernatants targeting marmoset DC-SIGN bind to cells in <i>human</i> spleen
Figure 5.3.13. Anti-human DC-SIGN (DCN46) stains a population of Lineage Class II+ Cd11c+ marmoset spleen cells, but no staining is observed with generated monoclonal antibodies
Figure 5.3.14. Anti-human DC-SIGN (DCN46) – but not generated monoclonal antibody 9E6A8 – binds to CHO cells transfected with marmoset and human DC-SIGN
Figure 6.2.1. Forward and side scatter plot showing representative gate used to select DC-SIGN positive MoDC in the flow cytometry studies of immunoliposome and PLGA nanoparticle uptake
Figure 6.2.2. Forward and side scatter plot showing gate used to select marmoset splenocytes in the flow cytometry studies of PLGA nanoparticle uptake228
Table 6.3.1 Physicochemical characteristics of linosome preparations 230.

Figure 6.3.1. Immunoliposomes conjugated to DCN46 show evidence of binding to DC-SIGN in a semi-quantitative ELISA assay
Figure 6.3.2. Dil immunoliposomes targeted to DC-SIGN incubated overnight with human MoDC do not show evidence of significant uptake
Figure 6.3.3. Dil immunoliposomes targeted to DC-SIGN incubated overnight with human MoDC do not show evidence of significant uptake
Figure 6.3.4. Protein quantitation assay: incubation of liposome preparations with Triton X-100 or SDS to remove phospholipid contamination
Figure 6.3.5. Protein quantitation assay: coumarin 6 liposome preparations with differing levels of protein conjugated to liposomes
Table 6.3.2 Protein quantitation assay: Coumarin 6 liposomes spiked with known concentrations of human serum albumin (HSA) to reflect 10%, 60% and 100% conjugation of DCN46 antibody used in immunoliposome preparations
Table 6.3.3 Physicochemical characteristics of PLGA nanoparticles240
Figure 6.3.6. PLGA nanoparticles targeted to DC-SIGN show evidence of strong binding to DC-SIGN in a qualitative ELISA assay
Figure 6.3.7. Coumarin 6-PLGA nanoparticles targeted to DC-SIGN incubated at 4°C with human MoDC are taken up to a greater extent than non-targeted nanoparticles
Figure 6.3.8. Coumarin 6-PLGA nanoparticles incubated at 37°C with human MoDC are taken up non-specifically by cells; targeting to DC-SIGN significantly improves this uptake
Figure 6.3.9. DC-SIGN targeted PLGA nanoparticles are taken up into the cytoplasm of human MoDC to a greater extent than non-targeted nanoparticles245
Figure 6.3.10 Coumarin 6-PLGA nanoparticles incubated overnight with marmoset splenocytes are taken up by a small population of Class II ⁺ CD11c ⁺ cells247
Figure 6.3.11. Human MoDC treated with curcumin containing PLGA nanoparticles targeted to DC-SIGN show alterations in DC maturation markers250

Figure 6.3.12. Human MoDC treated with curcumin containing PLGA nanoparticles	
targeted to DC-SIGN did not exhibit significant differences in allostimulatory	
capacity in a dendritic cell mixed leucocyte reaction (MLR).	.251
Figure 6.3.13. Curcumin containing PLGA nanoparticles cause dose-dependent	
suppression of alloproliferation in a two-way mixed leucocyte reaction (MLR)	.252

THESIS ABSTRACT

Kidney transplantation represents the best treatment for end-stage kidney disease, and in comparison to dialysis treatment has been shown to improve survival, quality of life, and reduce health-care costs over time. However, in order to prevent transplant failure from allograft rejection, immunosuppressive drug therapy is required.

Immunosuppression is associated with significant systemic toxicities, and continues to impair optimal patient and graft outcomes. The avoidance or minimisation of immunosuppression via the promotion of tolerance of the allograft, or the use of targeted therapeutic strategies, in clinical transplantation is therefore an important goal that could have many benefits for patients. Dendritic cells (DC) are potent antigenpresenting cells that play a pivotal role in the initiation and maintenance of immune responses, and therapies utilising or targeting DC offer the potential to manipulate immune responses towards tolerance. This thesis seeks to develop the potential of DC based immunotherapies in a small and clinically relevant non-human primate (NHP) transplant model, the common marmoset monkey, and thereby facilitate translation of these therapies towards human clinical trials.

<u>Chapter 1</u> establishes the context for this thesis by outlining the background and providing a comprehensive review of relevant literature.

<u>Chapter 2</u> describes the materials and methods utilised in this thesis. Additional details of methods are contained in relevant chapters.

<u>Chapter 3</u> presents a comprehensive study of renal pathology in a colony of laboratory marmosets, including histology, immunofluorescence and electron microscopy, and correlates this for the first time with serum and urine biochemistry. This work demonstrates that the spontaneously observed glomerular pathology in marmosets represents a benign occurrence that would not impact on the assessment of renal function or histology in a marmoset kidney transplant model.

<u>Chapter 4</u> examines the trafficking behaviour *in vivo* of intravenously and subcutaneously administered allogeneic marmoset DC propagated *in vitro* from genetically disparate marmoset donors. The findings indicate that allogeneic marmoset

DC do not necessarily exhibit normal trafficking behaviour *in vivo*, as they are not found in secondary lymphoid tissues at 48 hours, in contrast to similarly administered autologous DC. This finding lends weight to other recent studies of donor DC cellular therapy that indicate that the tolerogenic effects of this therapy are not mediated through cell to cell interactions with recipient T-cells, but rather through providing a source of donor antigen for acquisition and processing by recipient DC.

<u>Chapter 5</u> describes studies to develop a monoclonal antibody to marmoset DC-specific ICAM 3-grabbing non-integrin (DC-SIGN), which is a DC-specific marker. Ultimately, a marmoset cross-reactive commercially available anti-human DC-SIGN antibody (DCN46) was identified, and found to be suitable to utilise in the development of DC-SIGN targeted cell-specific therapy. Using this antibody, marmoset DC-SIGN positive cells were identified in the Lineage CD11c Class II fraction of marmoset spleen; in contrast *in vitro* propagated marmoset monocyte-derived DC have been confirmed to lack DC-SIGN expression.

<u>Chapter 6</u> describes the successful development of a novel nanocarrier targeted to DC: PLGA nanoparticles that target DC using the human and marmoset DC-SIGN cross-reactive antibody identified in Chapter 5. A series of preliminary studies have demonstrated that DC-SIGN targeted PLGA nanoparticles are taken up by Class II⁺ CD11c⁺ marmoset spleen cells, and that loading of the nanoparticles with the immunomodulatory drug curcumin shows evidence of *in vitro* immunosuppressive capacity, as shown in mixed leucocyte reaction; however the specificity for DC of immunosuppressive targeted PLGA nanoparticles remains to be demonstrated.

<u>Chapter 7</u> summarises the overall findings from this thesis, and proposes a series of necessary studies to exploit the identified potentials from this work further.

Overall, the work in this thesis significantly advances the marmoset NHP model as a means to translate the potential of DC based immunotherapies towards clinical transplantation. The feasibility of DC-targeted therapy using nanoparticles has been established, and represents an opportunity to specifically target DC with immunosuppressive drugs *in vivo*, and thereby manipulate the immune response towards tolerance, while reducing the burden of non-targeted immunosuppression.

DECLARATION

I certify that this work contains no material which has been accepted for the award of any other degree or diploma in any university or other tertiary institution to Michael Gerard Collins and, to the best of my knowledge and belief, contains no material previously published or written by another person, except where due reference has been made in the text. In addition, I certify that no part of this work will, in the future, be used in a submission for any other degree or diploma in any university or other tertiary institution without the prior approval of the University of Adelaide.

I give consent to this copy of my thesis, when deposited in the University Library, being made available for loan and photocopying, subject to the provisions of the Copyright Act 1968.

I acknowledge that the copyright of any published works contained within this thesis resides with the copyright holder(s) of those works.

I also give permission for the digital version of my thesis to be made available on the web, via the University's digital research repository, the Library catalogue and also through web search engines, unless permission has been granted by the University to restrict access for a period of time.

Michael Gerard Collins
Date

AWARDS

2013	Transplantation Society of Australia and New Zealand Young Investigator Award
2012	The Queen Elizabeth Hospital – Research Day Winner, Best Poster Presentation
2011	The Queen Elizabeth Hospital – Research Day Finalist, Best Presentation – Basic Science Higher Degree
2009	National Health and Medical Research Council Medical Postgraduate Scholarship
2008	The University of Adelaide Australian Postgraduate Award
2008	Royal Australasian College of Physicians Jacquot Research Entry Scholarship

PUBLICATIONS

Published papers

Jesudason S, **Collins MG**, Rogers NM, Kireta S, and Coates PT. Non-human primate dendritic cells. *J Leukoc Biol* 2012; 91: 217-28.

Manuscripts in preparation

Collins MG, Rogers NM, Kireta S, Brealey J and Coates PT. Spontaneous glomerular mesangial lesions in common marmoset monkeys (Callithrix jacchus): a benign non-progressive glomerulopathy. [Manuscript in preparation]

Collins MG, Jesudason S, Kireta S, and Coates PT. Infusion of allogeneic donor derived dendritic cells in marmoset monkeys to promote tolerance: studies of recipient immune responses and trafficking of administered cells in vivo. [Manuscript in preparation

Jesudason S, Kireta S, Collins MG, Rogers NM, and Coates PT. Blood and tissue dendritic cell subsets in common marmoset monkeys. [Manuscript in preparation]

Published abstracts

Collins MG, Rogers NM, Jesudason S, Kireta S, Brealey J and Coates PT. Spontaneous immune complex deposition and proteinuria in the common marmoset monkey (*Callithrix jacchus*) – a model of benign non-progressive glomerulopathy. *Nephrology* 2012; 17 Suppl 2: 43-44.

Collins MG, Rogers NM, Kireta S, Jesudason S, and Coates PT. Developing a monoclonal antibody to target DC-SIGN in non-human primates: a novel tolerogenic cell-specific therapy. *Nephrology* 2011; 16 Suppl 1: 54.

PRESENTATIONS

Invited presentations

"Targeting dendritic cells via DC-SIGN to deliver cell-specific therapy in transplantation: studies in a non-human primate model"

- Basil Hetzel Institute for Medical Research, Adelaide, SA May 2013
- The annual *DC Down Under* Symposium 2012: Applications in Transplantation and Immunotherapy. Sydney, NSW August 2012
- Department of Nephrology, Prince of Wales Hospital, Sydney, NSW May 2012

"Dendritic cell research in transplantation: preclinical cellular transplantation therapy in non-human primates"

- Department of Virology and Immunology, Southwest National Primate Research Center. San Antonio, Texas, USA– November 2009

Conference Presentations

Oral Presentations

Collins MG, Kitto LJ, Jesudason S, Thierry B, Coates PT. Dendritic cell targeted therapy: polymeric nanoparticles targeting human and non-human primate DC-SIGN to inhibit dendritic cell function.

- Transplantation Society of Australia and New Zealand, Annual Scientific Meeting, Canberra ACT, June 2013

Collins MG, Rogers NM, Kireta S, Jesudason S, and Coates PT. Developing a monoclonal antibody to target DC-SIGN in non-human primates: a novel tolerogenic cell-specific therapy

- The Queen Elizabeth Hospital Research Day, Adelaide SA – October 2011

Mini-oral presentations

Collins MG, Rogers NM, Jesudason S, Kireta S, Brealey J and Coates PT. Spontaneous immune complex deposition and proteinuria in the common marmoset monkey (*Callithrix jacchus*) – a model of benign non-progressive glomerulopathy

- Australian and New Zealand Society of Nephrology, Annual Scientific Meeting, Auckland, NZ – August 2012

Collins MG, Rogers NM, Kireta S, Jesudason S, and Coates PT. Development of a novel antibody to target DC-SIGN in non-human primate models of DC immunotherapy for transplant tolerance

- Transplantation Society of Australia and New Zealand, Annual Scientific Meeting, Canberra ACT – June 2012

Poster presentations

Collins MG, Kitto LJ, Jesudason S, Barnes TJ, Thierry B, Prestidge CA, and Coates PT. Targeting dendritic cells using anti-DC-SIGN conjugated immunoliposomes: a novel approach to immunotherapy

- The Queen Elizabeth Hospital Research Day, Adelaide SA October 2012 **Collins MG**, Rogers NM, Kireta S, Jesudason S, and Coates PT. Targeting dendritic cells via the dendritic cell-specific C type lectin DC-SIGN in non-human primates: towards a novel tolerogenic cell-specific therapy
 - XXIV International Congress of the Transplantation Society, Berlin, Germany July 2012

Collins MG, Rogers NM, Kireta S, Jesudason S, and Coates PT. Developing a monoclonal antibody to target DC-SIGN in non-human primates: a novel tolerogenic cell-specific therapy

- Australasian Society of Immunology, Annual Scientific Meeting, Adelaide, SA December 2011
- Australian and New Zealand Society of Nephrology, Annual Scientific Meeting, Adelaide, SA September 2011

ACKNOWLEDGMENTS

No PhD thesis ever occurs through individual work done solely by one's own efforts in isolation. Many people have contributed in large and small ways to this work, and all have played a vitally important role in enabling me to submit this thesis.

Firstly, I would sincerely like to thank my supervisors, Associate Professor Toby Coates, Dr Shilpa Jesudason, and Professor Graeme Russ. Toby convinced me in the first place that doing a PhD was a good idea, and has been the inspiration ever since for my (perhaps misplaced) desire to become a clinician scientist in the field of transplantation. I admire greatly his intellect, brilliance, passion and drive to not only do good science, but also his ability to balance this with his many other commitments while remaining an excellent and very much admired physician. I have been lucky to work with him on this and a number of other projects over the time I have been in Adelaide, and it has been a privilege from start to finish. I am very grateful for the considerable support he has always shown me, and the friendship we have. I look forward to our collaborations into the future.

Shilpa, through her own PhD thesis on marmoset immunobiology, laid the necessary foundations for this thesis. Many of the techniques and procedures involving marmosets that have become standard for me were established through her pioneering work, and she remains a significant world authority on marmoset DC biology. I greatly value all of the contributions she has made to this work, with her many suggestions resulting in things succeeding where they had previously failed. I thank Graeme particularly for the many opportunities he has facilitated for me (perhaps most significantly offering me a position in the first place), without which this work would never have been completed. He has always been there to provide incisive commentary on the progress (or lack thereof) of this work, and I am grateful to him for being part of the team.

In the laboratory, Svjetlana Kireta and Julie Johnston have provided endless assistance with marmoset procedures, cell culture, flow cytometry, and general laboratory skills, always without complaint or expectation. Their input has been vital. I also thank Dr Natasha Rogers for her assistance and contribution to the cloning studies, marmoset

biopsy analysis and data collection; John Brealey for the electron microscopy analysis; Chris Drogemuller for help with cloning and antibody studies; Clare Kelly (née Mee) for help with the antibody development; Dr Claire Jessup for your general good sense and advice; and the other members of our laboratory over the last 4 years who have been my friends and colleagues: Dr Shaundeep Sen, Dr Amy Hughes, Dr Matthew Stephenson, Chris Hope, Dr Darling Rojas, Austin Milton, Clyde Milner, Mariea Bosco, Kisha Sivanathan, and Dr Daisy Mohansundaran. I would also like to thank the staff of TQEH Animal House, and the Research Secretariat at the Basil Hetzel Institute, for their help during the course of this work. Thanks also to the NHMRC for providing me with scholarship funding.

I would like to especially thank Associate Professor Benjamin Thierry from the Ian Wark Institute at the University of South Australia for his assistance and intellectual input to the work on liposomes and PLGA nanoparticles. This work would not have been possible without collaboration with his group. I would also like to thank Benjamin's amazing Honours student, Lisa Kitto (also supervised by Dr Tim Barnes), who assisted with many of the studies in Chapter 6, and whose help with the preparation of liposomes and nanoparticles was vital to this project.

To my parents, John and Jenny, and siblings Francis, David, and Kathryn, you have always inspired me with your commitment to excellence; Mum and Francis, your both having done this before made me think it was possible. I have also been very fortunate at all times to be strongly supported in these endeavours by my Adelaide 'family': Janet and Peter Smith, Kate, Emma, Scott and Adam. Thank you for being there and sharing good times over the last few years.

And finally, to my wife and best friend, Sarah. We weren't yet married when I started this PhD, and I'm sure you've thought at times since that it would never be completed. However, it has been your love, unwavering support and constant encouragement that have made the difference in getting this completed. I dedicate this thesis to you, and to our daughter Eliza, whose birth before I had quite finished helped spur me to get across the finish line.

ABBREVIATIONS

7AAD 7-amino-actinomycin D
AEC animal ethics committee
ALP alkaline phosphatase
ANOVA analysis of variance
APC allophycocyanin

APC antigen presenting cell(s)
BDCA blood dendritic cell antigen

BM bone marrow

BSA bovine serum albumin
C3 complement component 3

CCL chemokine ligand
CCR chemokine receptor
CD cluster of differentiation

cDC conventional dendritic cell(s)

CFSE carboxyfluorescein diacetate succinmidyl ester

CHO Chinese Hamster Ovary

CLEC C-type lectin

CLR C-type lectin (receptor)

CM complete medium COOH carboxyl group

CRD carbohydrate recognition domain
CTLA4 cytotoxic T-lymphocyte antigen 4

CTLA4-Ig CTLA4 immunoglobulin fusion protein

DAPI 4', 6-diamidino-2-phenylindole dihydrochloride

DC dendritic cell(s)

DC-SIGN dendritic cell specific intercellular adhesion molecule (ICAM) 3-

grabbing non-integrin

DiI 1,1'-dioctadecyl-3, 3, 3', 3'-tetramethylindocarbocyanine perchlorate

DMSO dimethyl sufoxide
DNA deoxyribonucleic acid

DPPC 1,2-dipalmitoyl-*sn*-glycero-3-phosphocholine

DSA donor specific antibody

DSPE 1,2-distearoyl-phosphatidyl ethanolamine

EDC 1-ethyl-3-(-3-dimethylaminopropyl) carbodiimide hydrochloride

EDTA ethylenediaminetetraacetic acid

ELISA enzyme-linked immunosorbent assay

ELISPOT enzyme-linked immunospot

EM electron microscopy

ESKD end-stage kidney disease

Fab fragment antigen-binding region (of an immunoglobulin)
Fc fragment crystallisable region (of an immunoglobulin)

FCS fetal calf serum

FITC fluorescein isothiocyanate
Flt3 fms-related tyrosine kinase 3

Flt3L Flt3 ligand

FMO fluorescence minus one

G-CSF granulocyte-colony stimulating factor

GBM glomerular basement membrane

GM-CSF granulocyte macrophage-colony stimulating factor

GVHD graft versus host disease

HEPES 4-(2-hydroxyethyl)-1-piperazineethanesulfonic acid

HIV human immunodeficiency virus

HLA human leukocyte antigen
HP haematopoietic progenitor

HPDC haematopoietic progenitor-derived dendritic cell(s)

HSA human serum albumin

ICAM intercellular adhesion molecule

ICOS inducible costimulator

ICOS-L ICOS ligand IFN interferon

IgA immunoglobulin A
IgG immunoglobulin G
IgM immunoglobulin M

IL interleukin

iNOS inducible nitric oxide synthase

IPTG isopropyl-β-D-1-thiogalactopyranoside

IQR interquartile range

ISIS International Species Information System

KLH keyhole limpet haemocyanin

LB liquid broth

LC Langerhan cell(s)

Lin lineage

LPS (bacterial) lipopolysaccharide

M-CSF macrophage colony-stimulating factor

M-CSFR M-CSF receptor

maleimide mal

MHC major histocompatibility complex

MLR mixed leukocyte reaction

MoDC monocyte-derived dendritic cell(s) mTOR mammalian target of rapamycin

NF-κB nuclear factor of activated T-cells kappa B

National Health and Medical Research Council **NHMRC**

NHP non-human primate **NHS** N-hydroxysuccinimide

NK natural killer

NWP new world primate **NWT** nylon wool T-cells

OCT optimal cutting temperature compound

OWP old world primate

PAMPs pathogen-associated molecular patterns

PAS periodic acid-Schiff

PBMC peripheral blood mononuclear cell(s)

PBS phosphate buffered saline **PCR** polymerase chain reaction pDC plasmacytoid dendritic cell(s) PDL programmed death ligand

phycoerythrin

PE

PEG polyethylene glycol

PLA polylactic acid

PLGA polylactic-co-glycolic acid pre-DC dendritic cell precursor(s) **PRRs** pattern recognition receptors **RCF** relative centrifugal force

RES reticuloendothelial system

rh recombinant human RNA ribonucleic acid

RPMI Roswell Park Memorial Institute medium (aka RPMI-1640)

SCF stem cell factor
SD standard deviation

SIV simian immunodeficiency virus TGFβ transforming growth factor beta

Th1 T helper type 1
Th17 T helper type 17
Th2 T helper type 2
TLR toll-like receptor

TNF tumour necrosis factor

TPO thrombopoietin

Tr1 T regulatory type 1 cell(s)

Treg T regulatory cell(s)

WB whole blood

Xgal 5-bromo-4-chloro-3-indoyl-β-D-galactopyranoside