

# Therapeutic Targeting of SARS-CoV-2

Group 3

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# Coronaviruses and SARS-CoV-2

- **Coronaviruses**

- Bats act as viral reservoirs<sup>1</sup>
- Common traits<sup>2</sup>
  - Positive-sense, single-stranded RNA genome
  - Spherical shape
  - Structural and non-structural proteins
  - Genome organization

- **Recent bat-coronavirus outbreaks<sup>3</sup>**

- SARS (2003)
- MERS (2012)
- SADS (2016)
- ❖ Covid-19 (2019)

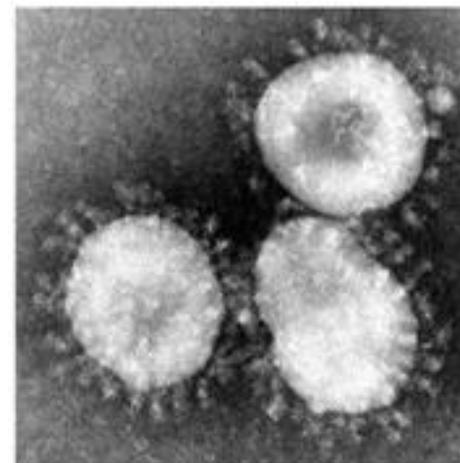


Image from Aronson, 2020

# Coronavirus Genome

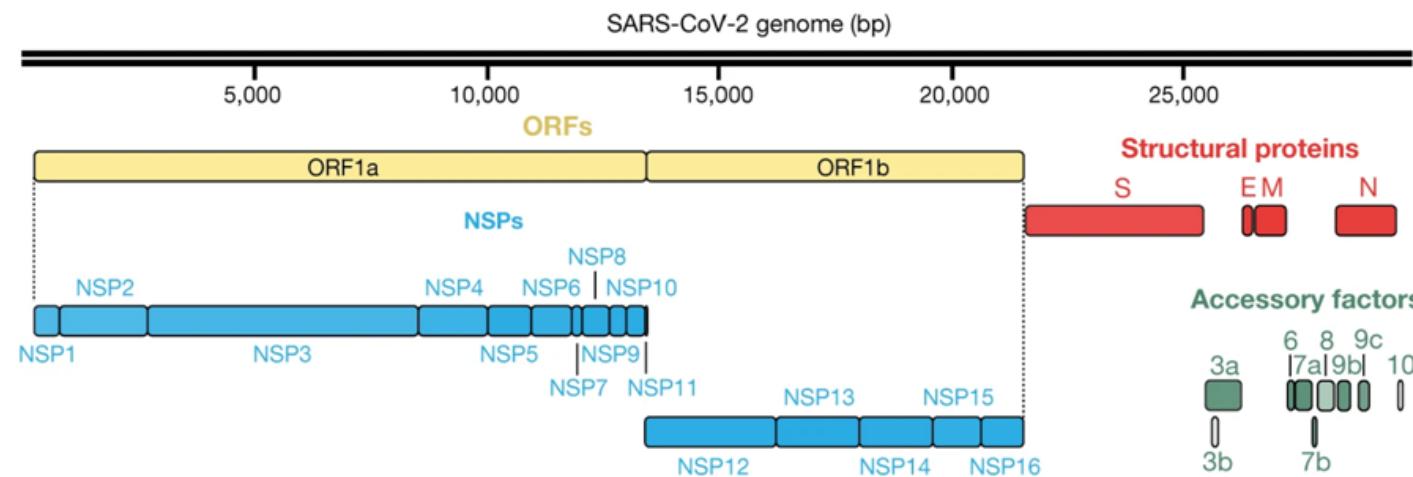
- Positive-sense, single-stranded RNA genome (27-32 kb)<sup>3</sup>

- 2/3 Non-structural proteins<sup>3</sup>**

- ORF1a and ORF1b polyproteins

- 1/3 Structural proteins + accessory factors<sup>3</sup>**

- Spike
- Envelope
- Membrane
- Nucleocapsid



# Coronavirus Structure

- Spherical<sup>2</sup>
- 125 nm diameter<sup>2</sup>
- **Four structural proteins<sup>2</sup>**
  - **Spike (S)** - Mediates attachment of the virus to host cells
  - **Envelope (E)**
  - **Membrane (M)**
  - **Nucleocapsid (N)**

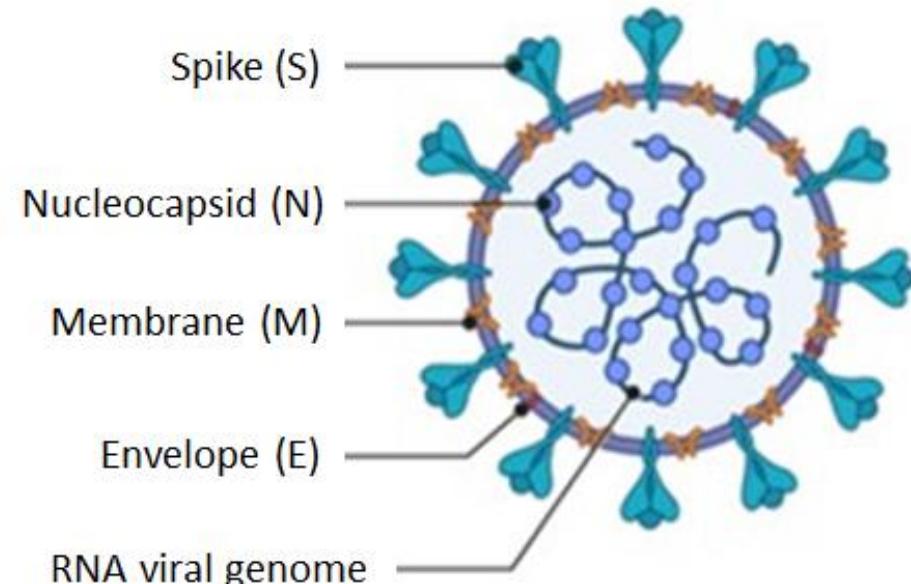


Image from King et al., 2020

# SARS-CoV-2 Infection and the Spike Protein

- Binding of SARS-CoV-2 to host cell is mediated by **S protein** homotrimers<sup>4</sup>
- SARS-CoV-2 **S protein** contains two subunits: **S1** and **S2**<sup>4</sup>
- The receptor binding domain (RBD) of the **S1** subunit binds the **ACE2** receptor<sup>4</sup>
- The **S2** subunit anchors the virus to the host cell membrane<sup>4</sup>

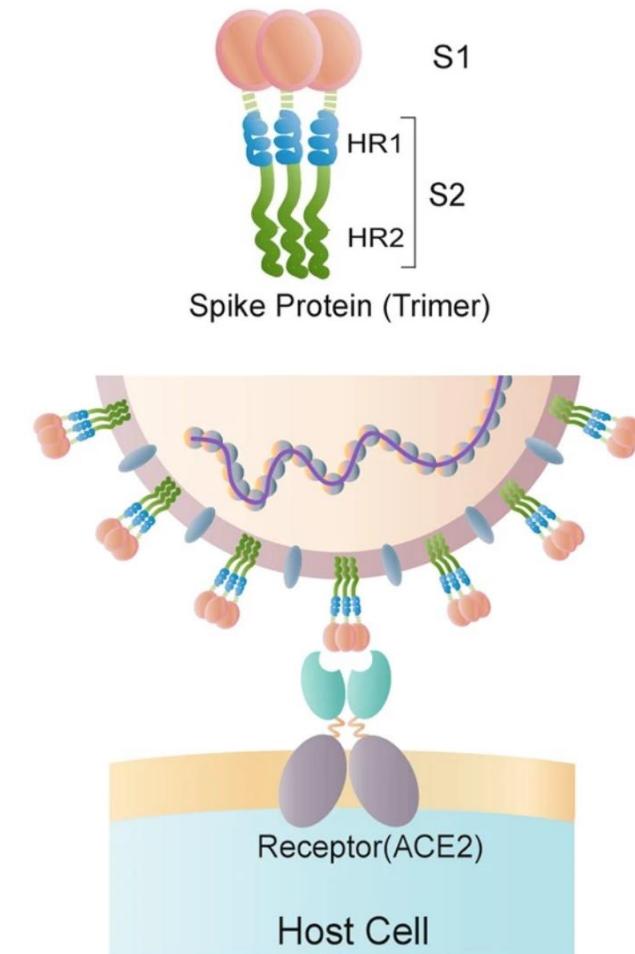


Image from Huang et al., 2020

# Viral Therapies

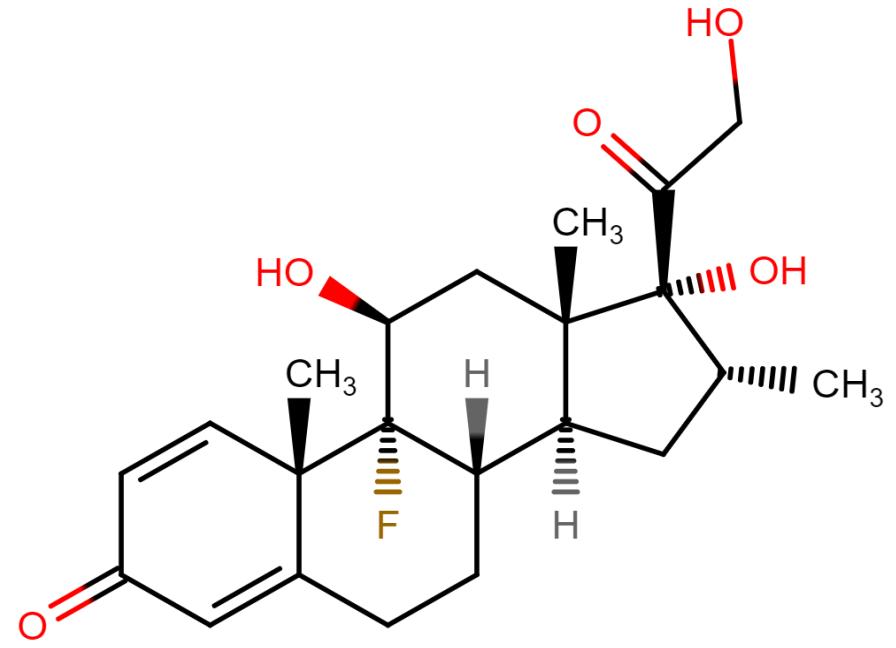
- **Vaccines<sup>5,6</sup>**
  - long-term protection
  - Protection is not immediate

- **Need for alternative therapies**
  - Rapid protection against viral infection
  - Alleviate disease symptoms

- **Immunotherapeutics<sup>7</sup>**

- **Small molecules<sup>8</sup>**

- e.g., Dexamethasone<sup>9</sup>



Dexamethasone

Image created by M. D'Ercole using Chem Space

# Monoclonal Antibodies (mAbs)

- **Purpose:** The use of antibodies to target specific antigens
- **Targets:**<sup>10</sup>
  - Cell Surface Antigens
  - Plasma Proteins
- **Therapeutic Uses:**
  - Cancer therapy, Autoimmune Diseases & Viral Infections

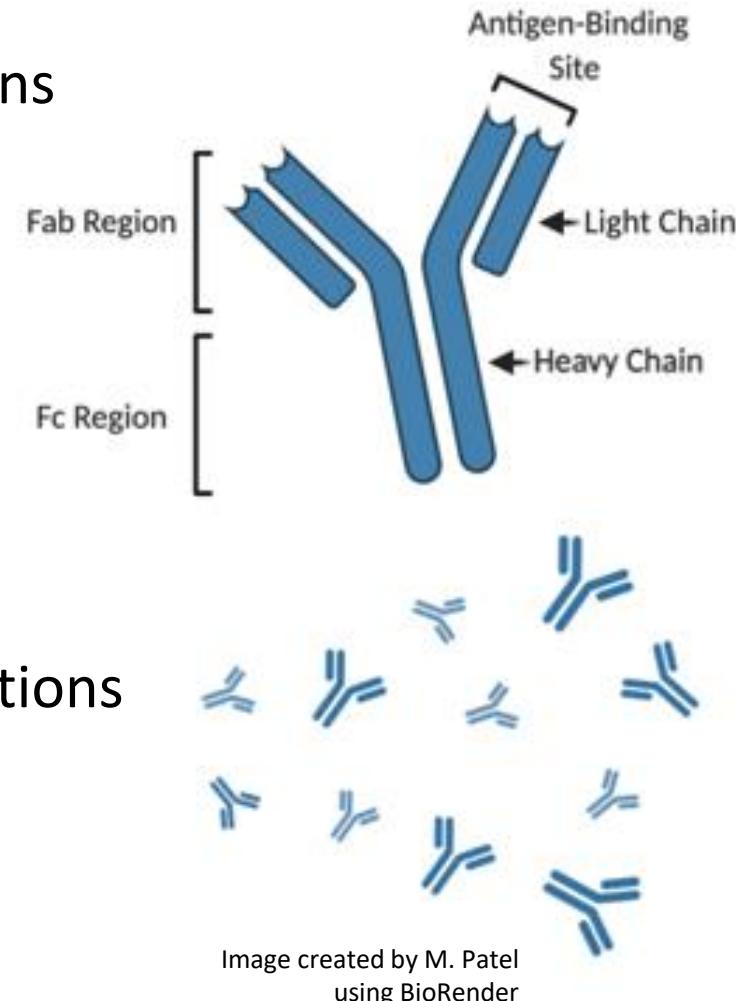


Image created by M. Patel  
using BioRender

# Overview of Human mAbs (-umab) Production

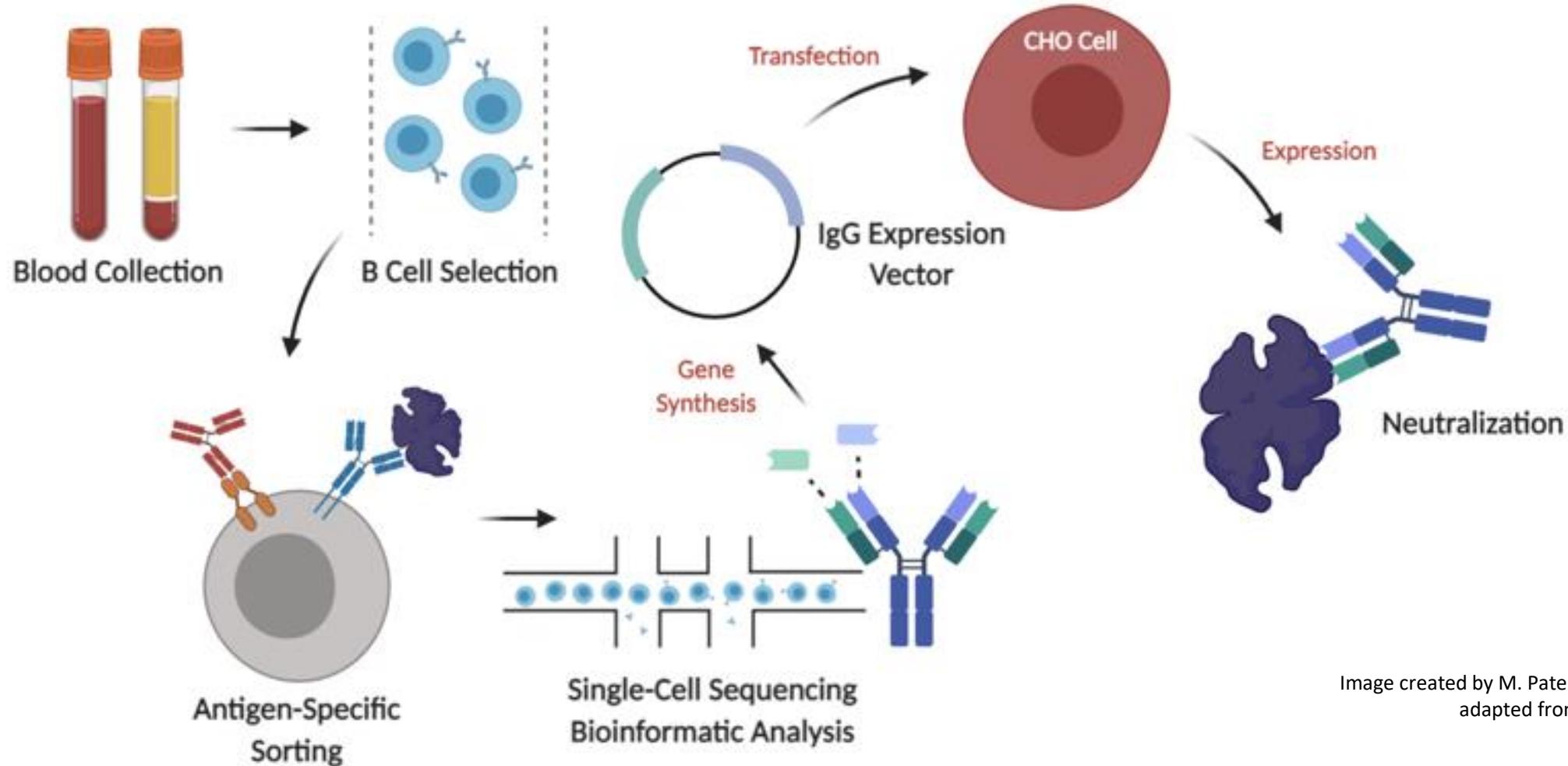


Image created by M. Patel using BioRender,  
adapted from Zost et al., 2020

# Advantages & Disadvantages to mAbs

Advantages <sup>11,12</sup>	Disadvantages <sup>11,12</sup>
<ul style="list-style-type: none"><li>• High-specificity for a single epitope of an antigen</li></ul>	<ul style="list-style-type: none"><li>• Mono-specificity limits their applications</li></ul>
<ul style="list-style-type: none"><li>• Renewably generate once suitable hybridoma or CHO cells are developed</li></ul>	<ul style="list-style-type: none"><li>• Minor changes in antigen epitope structure affects the function of mAbs</li></ul>
<ul style="list-style-type: none"><li>• mAbs are homogenous &amp; highly consistent</li></ul>	<ul style="list-style-type: none"><li>• Production is expensive</li></ul>
<ul style="list-style-type: none"><li>• Immediately treat an existing SARS-CoV-2 infection</li></ul>	<ul style="list-style-type: none"><li>• Protection is short-term (Weeks to Months)</li></ul>

# Cross-Neutralization of SARS-CoV

- One focus of therapeutic efforts: blocking infection capacity of virus using specific human mAb<sup>7</sup>
  - **Neutralizing Antibodies**
- One specific neutralizing mAb is a potential candidate for further testing as a therapeutic agent<sup>7,13</sup>
  - Capable of neutralizing SARS-CoV-2 and several SARS-CoV pseudoviruses
  - Identified from B cells of a SARS-CoV patient

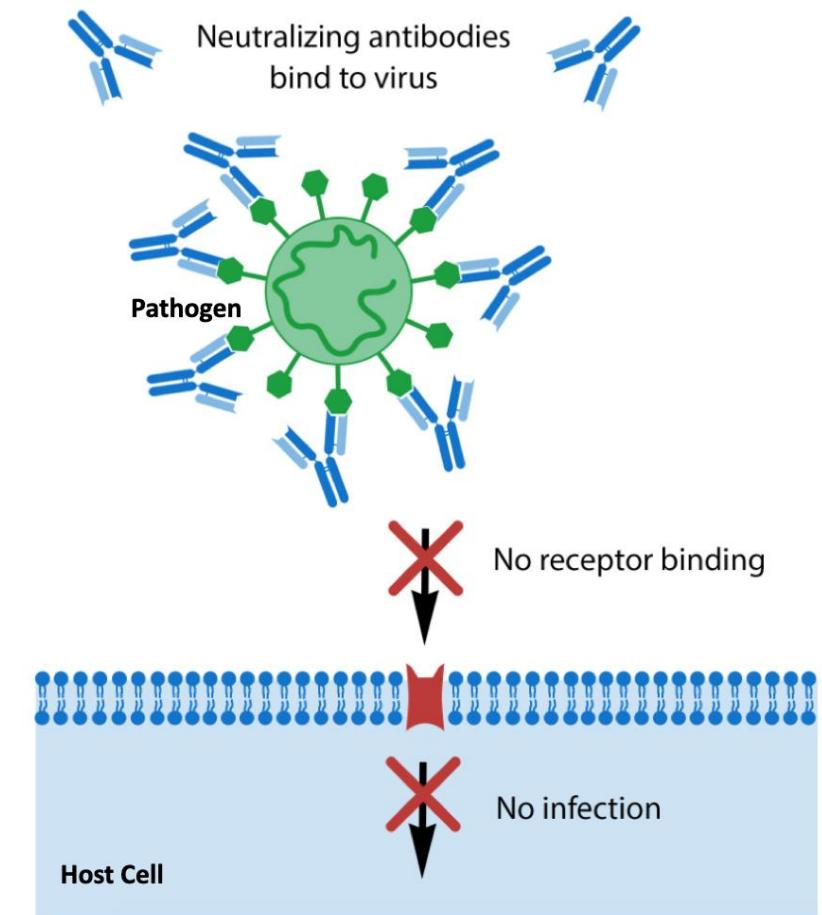


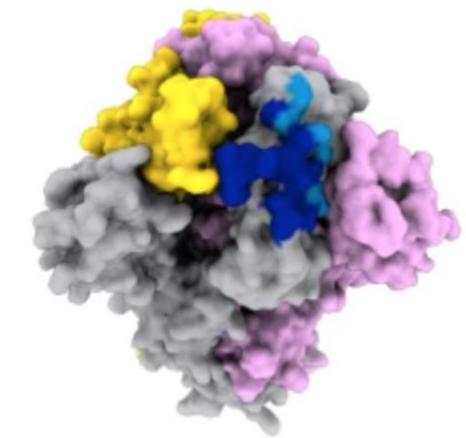
Image created by A. Nagi using BioRender, adapted from Ringe et al., 2013

# Neutralizing Monoclonal Antibodies

- **S glycoprotein** of SARS-CoV-2 is the main focus for therapeutic agents<sup>7</sup>
- The neutralizing antibody in focus: **S309**
  - specific IgG antibody, which can bind to immobilized **SARS-CoV-2 S<sup>B</sup> domain** and **S glycoprotein** with significant affinities<sup>7</sup>
- One or more IgG-specific mechanisms might be involved<sup>7,14</sup>:
  - **Cross-linking** of S-glycoprotein trimer
  - **Steric hindrance**
  - **Aggregation of virions**<sup>15</sup>

Molecular surface representation of SARS-CoV-2 S-glycoprotein

S309 epitope conservation

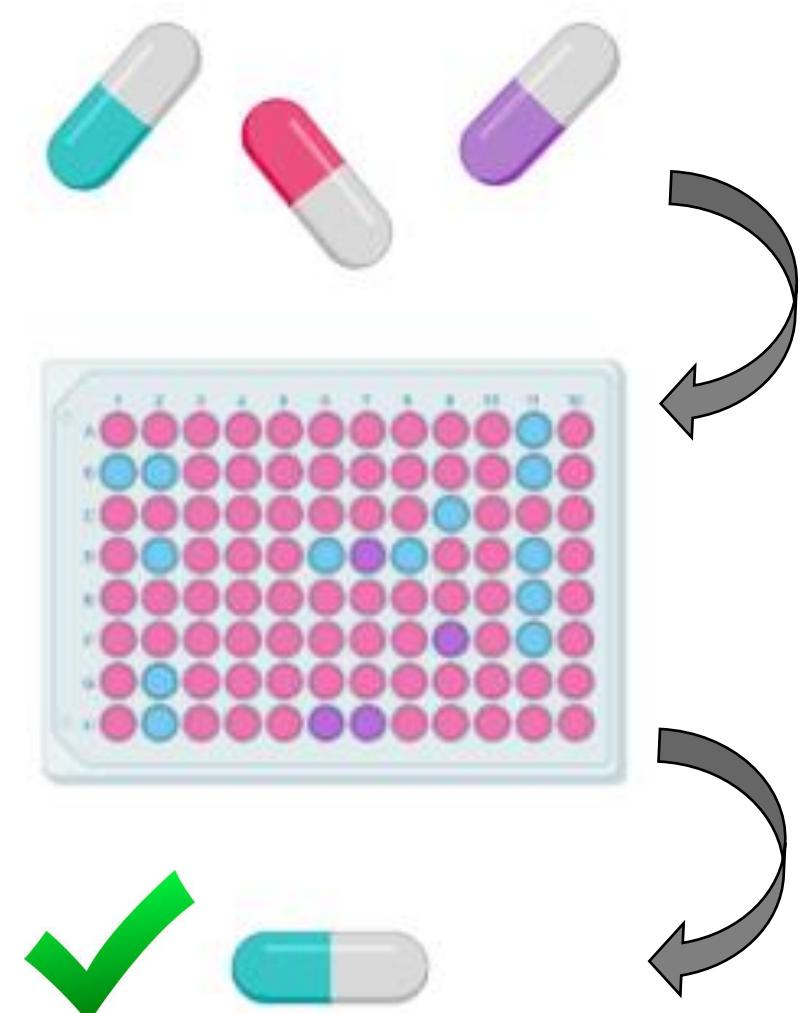


■ Conserved  
■ Conservative substitution

Image adapted from Pinto et al., 2020

# Small Molecules as Therapeutics

- Organic compounds with low molecular weights
- **Benefits<sup>16</sup>:**
  - Can test multiple variants with high throughput screening methods
  - Cheap to manufacture and administered orally
- Candidates for **SARS-CoV-2**:
  1. Nucleoside analog **RdRp** inhibitors<sup>8</sup>
  2. **Mpro** inhibitors<sup>8</sup>
  3. Blocking **S protein-ACE-2** binding<sup>8</sup>
  4. **Corticosteroids** for reduced inflammation<sup>17</sup>



# 1. Nucleoside Analogs as RdRp Inhibitors

- RdRp is essential for SARS-CoV-2 genome replication and production of viral proteins<sup>2</sup>

- How it Works<sup>18</sup>:**
  - Nucleoside analogs (e.g., **Remdesivir & Sofosbuvir**) bind to nsp12 region of RdRp

- Limitations<sup>19</sup>:**
  - Conversion from prodrug to active form produces toxic metabolites
  - Not cell-specific in delivery

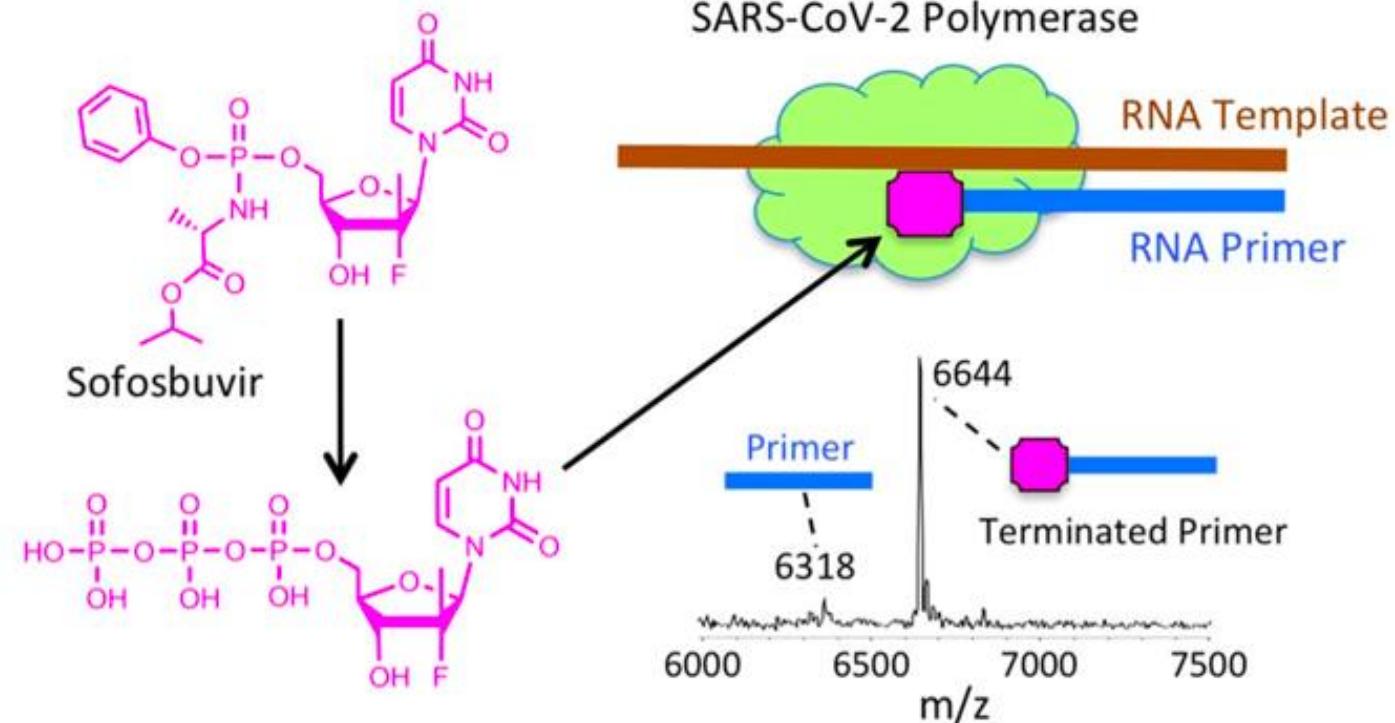


Image from Chien et al., 2020

## 2. Mpro (Main Protease) Inhibitors

- Main protease (Mpro) is essential for post-translational modifications of viral proteins<sup>20</sup>
- **How it Works<sup>20</sup>:**
  - **Ebselen** covalently binds to catalytic region of Mpro
- **Limitations<sup>21</sup>:**
  - Differences in catalytic site of SARS-CoV and SARS-CoV-2

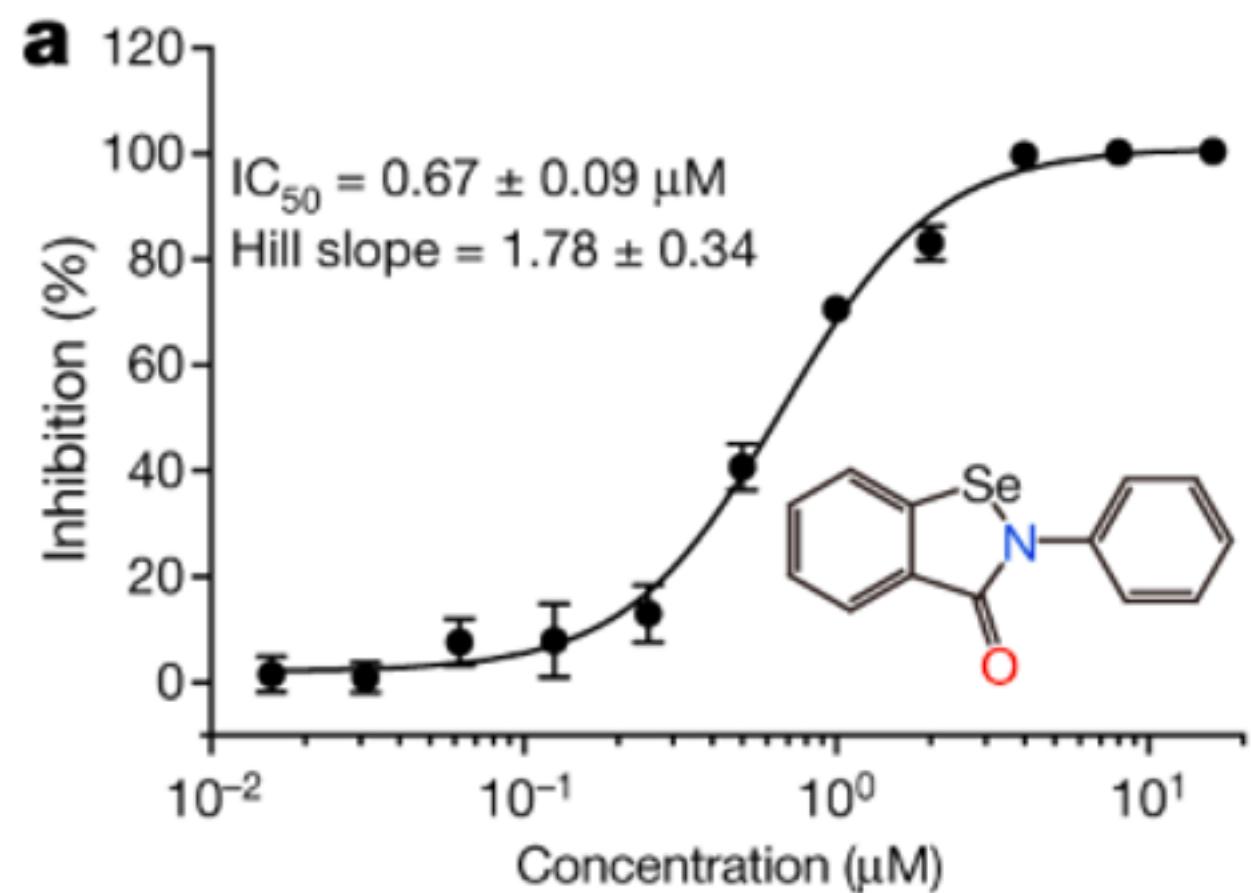


Image from Jin et al., 2020

# 3. Blocking S Protein-ACE2 Interaction

- S-protein and ACE-2 binding is essential for viral entry into cells<sup>2</sup>

- **How it Works<sup>22</sup>:**

- **Reprotoxol** binds to His34 and Asp30 residues of ACE-2

- **Limitations<sup>22</sup>:**

- More research must be done
  - Most studies focus on neutralizing antibodies with the same purpose

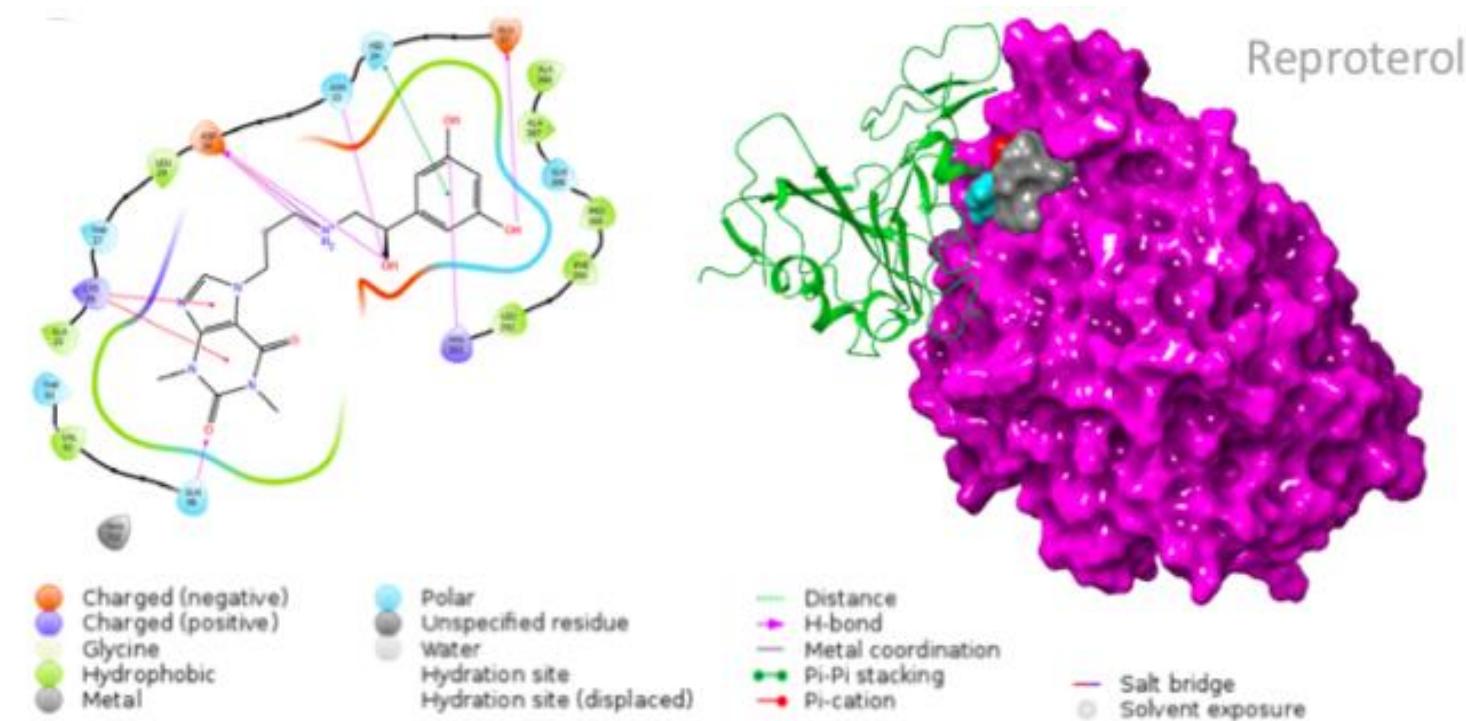


Image from Smieszek et al., 2020

# 4. Corticosteroids: Reduce Inflammation

- Corticosteroids like **hydrocortisone** and **dexamethasone** are being considered for COVID-19 severe cases<sup>23</sup>
- **How it Works<sup>17</sup>:**
  - Reduce inflammation caused by proinflammatory cytokines (e.g., IL-1)
- **Limitations<sup>17</sup>:**
  - Research findings for COVID-19 use are inconsistent
  - Chance of secondary infections



Image from Denise, 2020

# Other Immunotherapies

- **Purpose:** control immune responses in diverse directions to achieve therapeutic effect <sup>24</sup>
- **Immunological mediated disorders** (e.g., autoimmune disease, inflammatory disorders, infectious diseases) <sup>24</sup>
- The use of
  - Drugs (e.g., immunosuppressors) <sup>25</sup>
  - Biologicals (e.g., cytokines, antibodies) <sup>25</sup>
  - Immunizations (e.g., therapeutic vaccines) <sup>25</sup>
- **Limitation**
  - Side effects <sup>25</sup>
  - Does not work for everyone <sup>25</sup>

# 1. Cytokine Antagonists

- Anti-inflammatory drugs limit inflammatory processes <sup>26</sup>
- **SARS-CoV-2**
  - **IL-1 $\beta$**  - Important cytokine induce further inflammatory cytokines production <sup>26</sup>
- **Recombinant IL-1 receptor antagonist (rIL-1Ra, Anakinra)**
  - Immunosuppressive drugs <sup>26</sup>
  - Blocks the binding of both IL-1 $\alpha$  and IL-1 $\beta$  to the IL-1 receptor <sup>26</sup>
  - Inhibits IL-1 pro-inflammatory effects <sup>26</sup>
- **Limitation**
  - Target treatment to individuals with **hyperinflammation** <sup>27</sup>
  - Risk of harm by potentially targeting beneficial inflammation <sup>27</sup>



Image from MedPage Today, n.d.

## 2. Passive immunotherapy

- **Convalescent plasma treatment**
  - Passive polyclonal antibody administration <sup>26</sup>
  - Supply immunity against viral infection & improves survival rate <sup>26</sup>
- **SARS-CoV-2**
  - Immunomodulatory effect via inhibiting cytokine storm <sup>26</sup>
  - Presence of antibodies against SARS-CoV-2 in serum such as IgG, IgM, and IgA <sup>26</sup>
  - Improved clinical symptoms & decreased CRP level <sup>26</sup>
- **Limitation**
  - Immunological reactions <sup>28</sup>
  - Risk of reinfection <sup>28</sup>

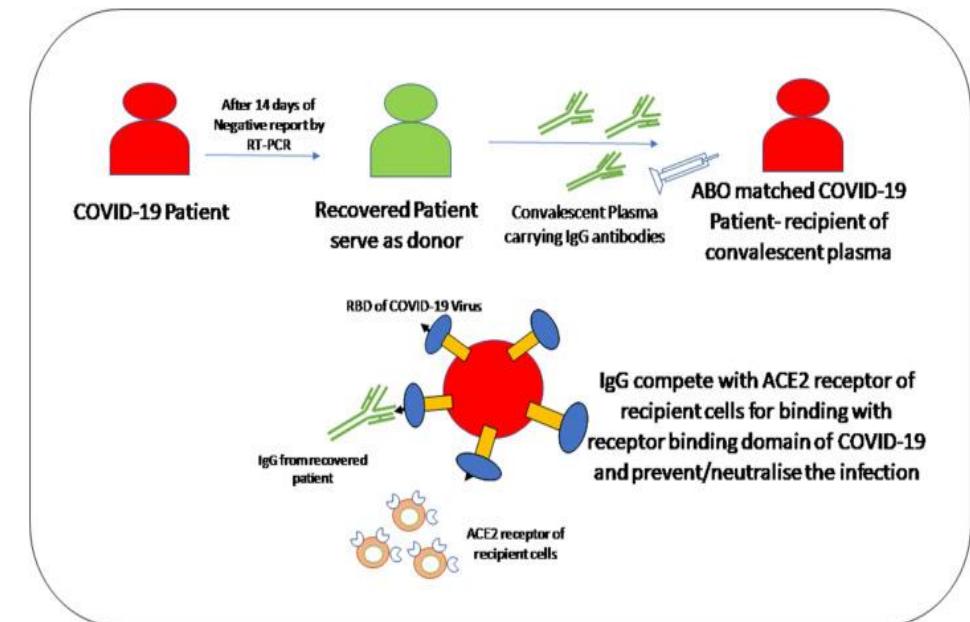


Image from Kumar et al., 2020

# Summary

	Benefits	Limitations
<b>Antibody</b>	<ul style="list-style-type: none"> <li>• High-specificity for a single epitope of an antigen</li> <li>• Renewably generate once suitable hybridoma or CHO cells are developed</li> <li>• mAbs are homogenous &amp; highly consistent</li> <li>• Immediately treat an existing SARS-CoV-2 infection</li> <li>• Neutralizing antibody: S309 <ul style="list-style-type: none"> <li>• targets S glycoprotein trimer</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• Mono-specificity limits their applications</li> <li>• Minor changes in antigen epitope structure affects the function of mAbs</li> <li>• Production is expensive</li> <li>• Protection is short-term (Weeks to Months)</li> </ul>
<b>Small molecule</b>	<ul style="list-style-type: none"> <li>• Can test multiple candidates with high throughput screening methods</li> <li>• Can be ingested orally</li> <li>• More affordable than other therapeutics</li> <li>• Target many different biochemical pathways</li> </ul>	<ul style="list-style-type: none"> <li>• Target cells and viruses may develop drug resistance mechanisms (e.g., drug inactivation, efflux pumps)</li> <li>• Can only target one protein/pathway</li> </ul>
<b>Other Immunotherapy</b>	<ul style="list-style-type: none"> <li>• Immunomodulatory effect</li> <li>• Supply immunity against viral infection</li> <li>• Target specific interleukin</li> </ul>	<ul style="list-style-type: none"> <li>• Side effects</li> <li>• Does not work for everyone</li> <li>• Immunological reaction</li> </ul>

# Conclusion

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## **Cross-neutralization of SARS-CoV-2 by a human monoclonal SARS-CoV antibody**

Dora Pinto, Young-Jun Park, Martina Beltramello, Alexandra C. Walls, M. Alejandra Tortorici, Siro Bianchi, Stefano Jaconi, Katja Culap, Fabrizia Zatta, Anna De Marco, Alessia Peter, Barbara Guarino, Roberto Spreafico, Elisabetta Cameroni, James Brett Case, Rita E. Chen, Colin Havenar-Daughton, Gyorgy Snell, Amalio Telenti, Herbert W. Virgin, Antonio Lanzavecchia, Michael S. Diamond, Katja Fink, David Veesler✉ & Davide Corti✉

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