

A Novel Platform for Enhanced Intracellular Delivery of Therapeutic Peptides to Promote Tissue Vasorelaxation

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Statement of Purpose: Elucidation of the molecular interactions underlying vasoconstriction and its associated pathologies (e.g. vascular graft vasospasm and sub-arachnoid hemorrhage) has led to the identification of plethora of promising peptide based therapeutics. However, major barriers exist against therapeutic utilization of intracellular-acting peptides: proteolysis of the peptide in the *in vivo* environment prior to or following cellular internalization, translocation across the cell membrane, escape from the intracellular endo-lysosomal and exocytosis trafficking pathways, and achieving an effective peptide dose within the intracellular compartment (i.e., cytoplasm) where the therapeutic target is located¹. To address these delivery barriers, we have synthesized and characterized a library of pH-responsive, endosomolytic polyplex nanoparticles for the intracellular delivery of two peptides that modulate smooth muscle cell physiology by interfering with the p38 mitogen activated protein kinase signaling pathway².

Methods: A poly(propylacrylic acid) (PPAA) homopolymer ($M_n = 22,000$, PDI = 1.47) was synthesized via RAFT polymerization. A cell penetrant MAPKAP Kinase II inhibitory peptide (MK2i) and a heat shock protein-20 (HSP20) peptide mimetic were synthesized through standard Fmoc chemistry and purified via reverse-phase HPLC. The MK2i and HSP20 peptides were mixed with the PPAA polymer at a range of charge ratios (CR, defined $[\text{NH}_3^+]/[\text{COO}^-]$) from 10:1 to 1:10 to form polyplexes. The size and zeta potential of the polyplexes were determined by dynamic light scattering (DLS) analysis. For MK2i nano-polyplexes (MK2i-NPs), a CR of 1:3 was chosen as the optimal formulation for further study (hydrodynamic diameter = 110.9 ± 6.89 nm, $\zeta = -11.9 \pm 3.18$ mV). For HSP20 nano-polyplexes (HSP20-NPs) a CR of 3:1 was chosen as the optimal formulation for further study (hydrodynamic diameter = 240.9 ± 15.51 nm, $\zeta = -0.91 \pm 2.56$ mV). The pH-responsive, endosomolytic behavior of the polyplexes was assessed through a red blood cell hemolysis assay. The ability of MK2i-NPs and HSP20-NPs to inhibit actin polymerization was assessed with an F-actin stress fiber assay in human coronary artery vascular smooth muscle cells (HCAVSMCs) stimulated with angiotensin II (ANG II). Human saphenous vein (HSV) explants were obtained from consenting patients for the evaluation of MK2i-NP mediated vasorelaxation: 1 mm HSV rings were treated for 2 hours with MK2i-NPs, MK2i peptide, or controls and subsequently contracted with phenylephrine (PE, 10^{-6} - 10^{-7} M) and relaxed with cumulative log doses of sodium nitroprusside (SNP) to determine % relaxation. Rat aorta smooth muscle was harvested from fresh cadaver hearts from discarded animals from the Vanderbilt Medical Center: 1 mm aortic rings were treated for 30 mins with HSP20-NPs, HSP20 peptide, or controls and subsequently contracted with

phenylephrine (5×10^{-8} M) to determine % inhibition of contraction vs. pretreatment.

Results: NPs showed no hemolytic behavior at pH 7.4 or 6.8 but showed switch-like, robust hemolysis at pH 6.2 and 5.6, suggesting that NPs will enable peptide cytosolic delivery. Actin stress fiber assays with both MK2i-NPs and HSP20-NPs showed enhanced inhibition of stress fiber formation compared to the peptide alone (fig. 1A). HSV explants treated with MK2i-NPs showed significantly more relaxation than the peptide alone, and achieved the same level of relaxation at 1/10th of the dose of peptide (100 μM vs 10 μM , fig. 1B). HSP20-NPs displayed a 5-fold increase in inhibition of contraction of rat aortic smooth muscle compared to the HSP20 peptide alone (500 μM vs 100 μM , fig. 1C).

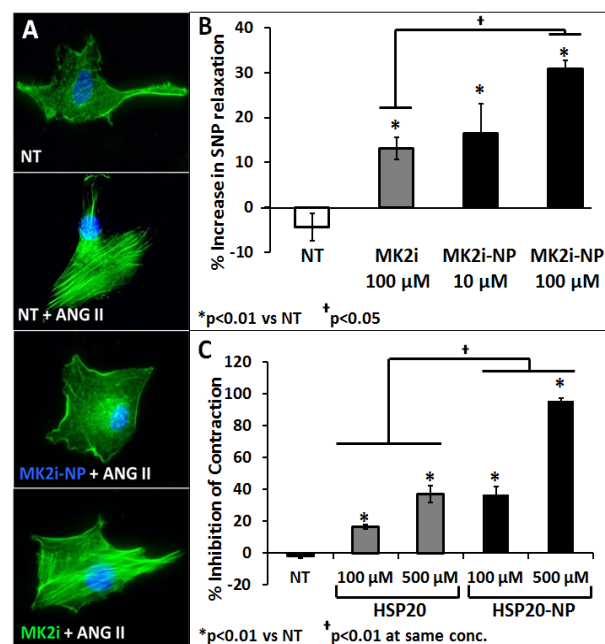


Figure 1: A) Actin stress fiber formation in ANG II stimulated HCAVSMCs treated with MK2i or MK2i-NPs B) HSV SNP induced relaxation following 2 hr treatment with MK2i or MK2i-NPs. C) Inhibition of PE induced contraction in rat aortic smooth muscle following 30 min treatment with HSP20 and HSP20-NPs.

Conclusions: We have developed a platform for enhanced intracellular delivery and bioactivity of therapeutic peptides to treat vasoconstriction with pH-responsive, endosomolytic nano-polyplexes. We have proven the ability of these polyplexes to modulate smooth muscle physiology *in vitro* and *ex vivo*. Our results suggest that these nano-polyplexes present a promising approach to the intracellular delivery of peptide-based therapeutics to treat vasospasm in vascular pathologies.

References:

- [1] Li et al. *Curr Pharm Design*. 2011;17(3):293-319.
- [2] Cornelissen et al. *ATVB*. 2004;24:451-456.