

# Infectious Risk and the Challenge of Safe Xenotransplantation

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- **Relationships with commercial interests:**

- **Grants/Research Support:** NIH (PO1, T32, R01, U01)
- **Consulting Fees:** Elion, Eledon, Jura, Well Medical, eGenesis, Markana, United Therapeutics, Bain, CLD Inc, OM1.
- **Other:** Employee of Mass General Brigham Healthcare Inc (owner of MGH)
- Ad hoc consultant on Xenotransplantation (SGE) for FDA Cellular, Tissue, and Gene Therapies Advisory Committee (CTGTAC), WHO, and Harvard Medical School.
- My presentation does not include discussion of off-label or investigational use drugs.

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## The Growing Problem of Organ Shortages



Every ten minutes, someone is added to the USA transplant waiting list.



On average, ~20 people die in the USA each day while waiting for a transplant – many more worldwide.

### In the United States:

**105,766 people are waiting for an organ transplant**  
(Likely a big underestimate)

**First 6 months of 2022: 12,104 donors & 24,414 transplants**

**But**

**~7000 DIED WAITING FOR AN ORGAN LAST YEAR**

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## Alternative Therapies for Organ Failure:

- Better disease prevention (hypertension, diabetes, smoking, autoimmune diseases ...)
- Treatments (e.g., Hepatitis C)
- Gene therapies (CRISPR)
- Stem cell therapies (stem cell derived islets, organ repair therapies)
- Improved organ transplantation and survival
  - Better immunosuppression
  - Organ perfusion systems and perfusion solutions
- Artificial organs – re-engineered, decellularized organs or 3D printed scaffolds?
- **Animal organs?** Immunologic and Metabolic Barriers

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# Why Pigs?



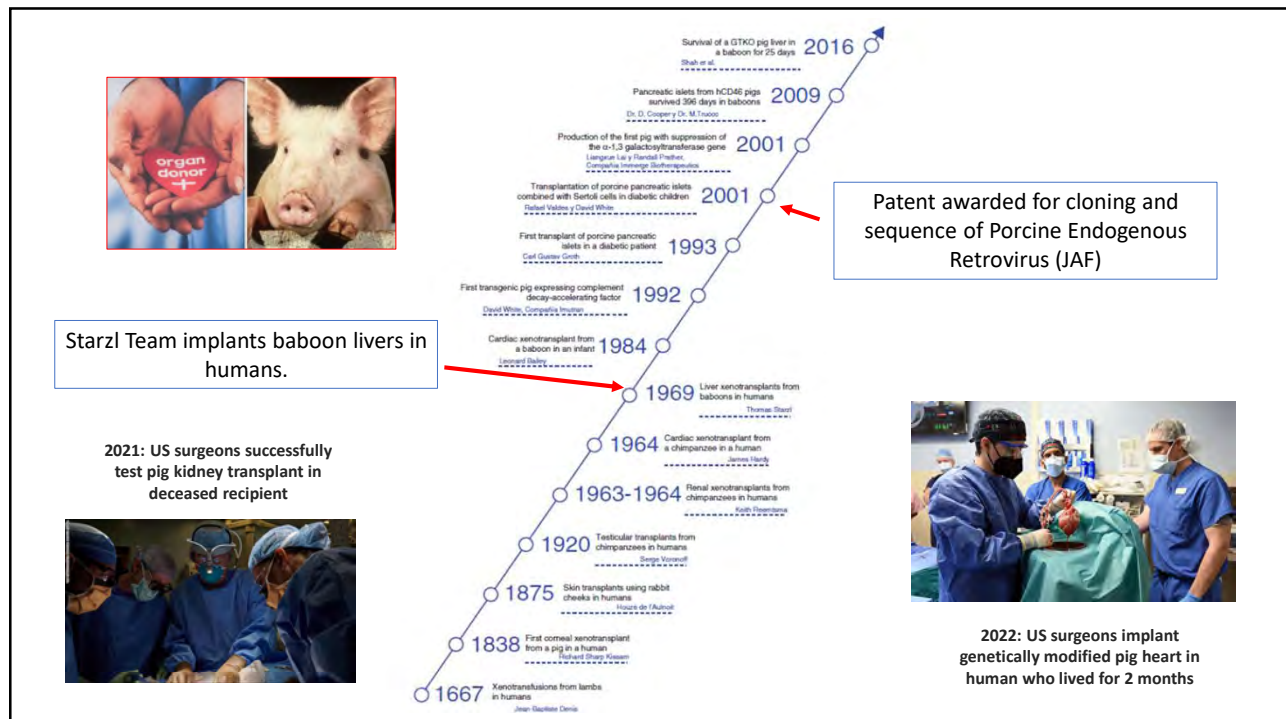
## ADVANTAGES OF SWINE

- Breeding characteristics well described for commercial use
- Can size to humans
- Experience with inbreeding and genetic manipulation → reagents for study of cell surface antigens
- Advanced genetics (CRISPR) → can derive new strains of swine with desired characteristics
- Sequence data are available from some important viruses and veterinary lab experience with microbiology, vaccines
- Resistance to HIV, HBV, HCV

## DISADVANTAGES

- Preformed natural antibodies to α-Gal sugars (hyperacute rejection)
- Metabolic incompatibilities
- Histo-incompatibility for humans

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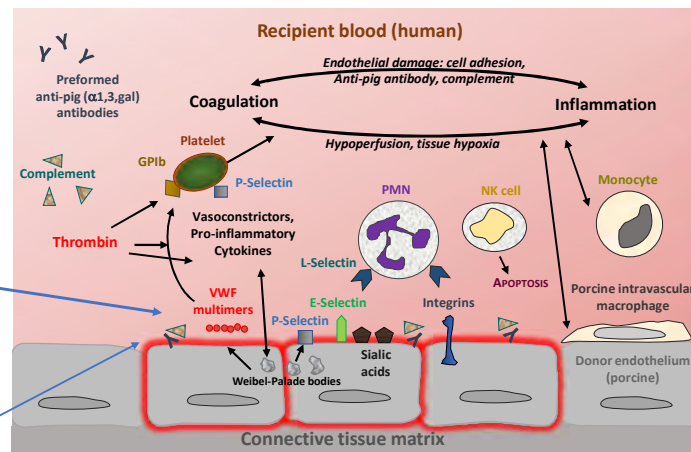
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## Challenges: Mechanisms of Porcine Endothelial Injury by Human Blood

**Preformed human anti-pig antibodies** bind to porcine endothelium, triggering complement binding and Fc-receptor-mediated ligation of platelets and leukocytes and upregulation of adhesion molecules on both adherent formed blood elements and inflamed endothelium.

**Complement cascade activation, adhesion of human platelets to porcine endothelium** → prothrombotic, proinflammatory milieu → loss of vascular barrier function and organ failure.

**Dysregulated Anticoagulation by Porcine Endothelium with Human Blood**



**Lack of non-self signals** → NK, T-cell activation against graft, may lack immune function to protect vs. infection.

GP = glycoprotein; ICAM, intercellular adhesion molecule; IL-6, interleukin-6; PMN, polymorphonuclear; PSGL-1, P-selectin glycoprotein ligand 1; TNF, tumor necrosis factor; and vWF, von Willebrand factor

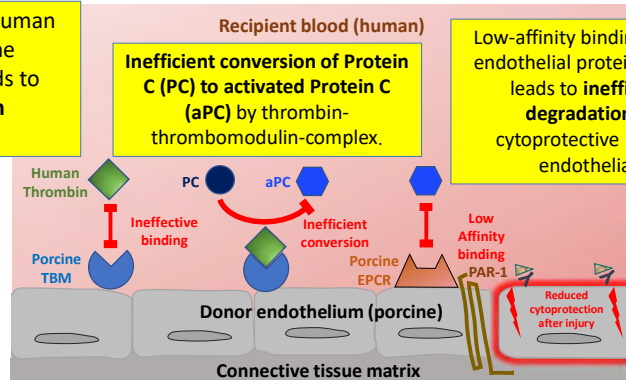
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## Dysregulated Anticoagulation for Porcine Endothelium with Human Blood

**Ineffective binding of human thrombin** by porcine thrombomodulin leads to **reduced thrombin deactivation**.

**Inefficient conversion of Protein C (PC) to activated Protein C (aPC)** by thrombin-thrombomodulin-complex.

**Low-affinity binding of aPC to porcine endothelial protein C receptor (EPCR)** leads to **inefficient thrombin degradation** and reduced cytoprotective signaling through endothelial cell PAR-1.



*Porcine endothelium exposed to human blood activated by binding of anti-pig antibodies* → prothrombotic environment.

**Amplification of blood clotting by multiple factors:** *ineffective neutralization of human thrombin* by porcine thrombomodulin, *poor conversion of protein C (PC) to activated PC (aPC)* by thrombin-thrombomodulin complex, and *low-affinity binding of human aPC to porcine endothelial protein C receptor (EPCR)*, which in turn leads to **inefficient thrombin degradation** and reduced cytoprotective signaling via PAR-1 (endothelial cell proteinase-activated receptor).  
**Genetic modifications include:** expression of human thromboregulatory proteins including human thrombomodulin and human endothelial protein C receptor (EPCR) & human tissue factor pathway inhibitor.

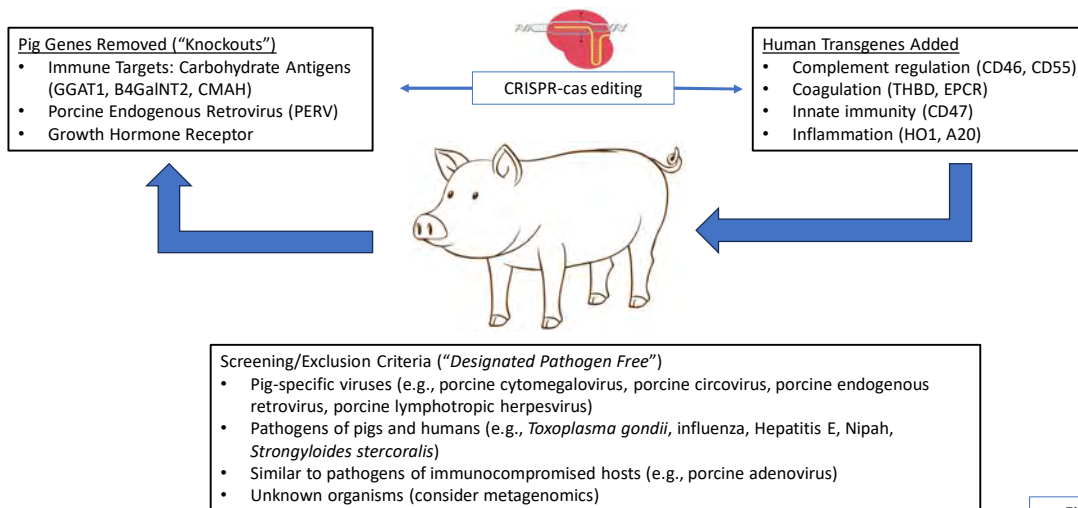
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## Mechanistic Barriers to Pig-to-Human Xenotransplantation

Phenomenon	Kinetics	Mechanisms
Hyperacute rejection	Minutes to hours	Preformed antibody, complement, clot formation, endothelial injury
Initial xenograft dysfunction	Minutes to hours	Metabolic/physiologic? Immune? Ischemia/reperfusion?
Delayed Xenograft rejection	Days – Weeks	Preformed antibody rebound, elicited antibody
Chronic Rejection	Weeks	Elicited immunity, dysregulated coagulation

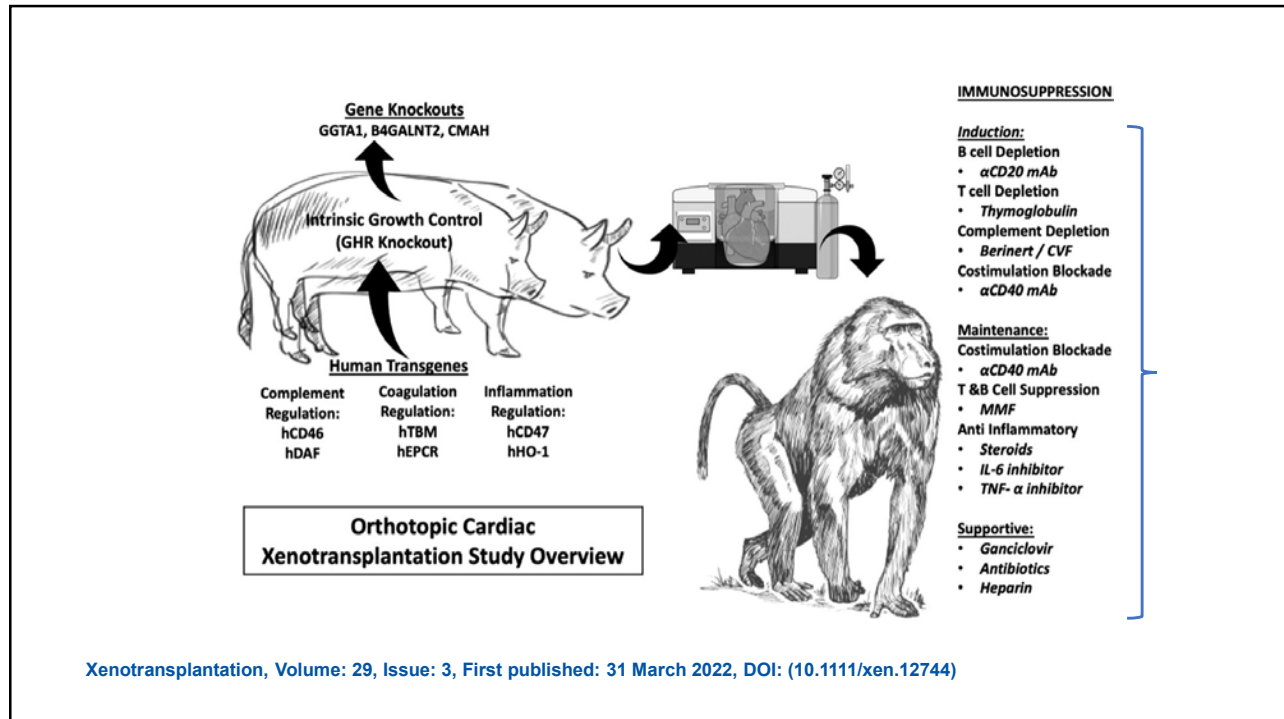
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Figure 1. Advances in genetic engineering have allowed creation of pigs with advantages in terms of infection, (virus deleted), immunology (less rejection), coagulation (less blood clotting), size, and inflammation. Breeding of source animals in biosecure facilities allows screening for potential pathogens.



Fishman, 2024

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## Optimizing safety in clinical xenotransplantation: Infectious Disease Risks

**The risk for infection depends on the *nature, intensity, and duration of immunosuppression* as well as on infectious exposures (epidemiology).**

Each clinical trial will be a “package” of:

- Specific organs required by recipient
- Patients with various latent infections and exposures
- Source swine with different genetics and breeding characteristics (microbiological screening)
- Various immunosuppressive regimens
- Various approaches to monitoring recipient

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## Infectious Disease Gaps to enhance safety and efficacy of clinical xenotransplantation (*requires human data*)

- **Potential zoonoses: Develop microbiologic surveillance and *exclusion criteria* for pig production and to monitor recipients and contacts.**
  - **Which organisms** infect human cells or cause clinical syndromes in immunosuppressed recipients?
  - **Microbiologic surveillance** (e.g., PERV infect non-human primates)
  - **Approach** (e.g., surveillance of pig production)
  - Any impact on recipients?
- **Diagnostic assays**
  - **Which new assays** are needed?
  - **Monitoring** (e.g., surveillance of pig production)
  - Databank (e.g., surveillance of pig production)
- **Management of novel immunosuppressive regimens?** And risk for infection?
- **Infection Control:** How and who?
  - Protocols for managing “sick” recipients. (Isolation?)
  - Protocols for staff and others in contact with pigs and recipients (sample archiving)
  - Handling of surgical equipment and sterilization of rooms
- **Unknowns** (few data on infectious risks) → Ethical issues for informed consent

Its not complicated!

Can organisms from pigs cause significant infection in humans?

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Bulk Of Confirmed Human Cases Of Swine Flu In US Since 2011 Have Been Connected To Agricultural Showcases (New York Times July 25, 2023)

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### Take Home Message: Considerations for Xenotransplantation in Clinical Trials

- ✓ The goal is to **define parameters for safety in clinical xenotransplantation** (focus on pig model) – e.g., *As safe as allotransplantation relative to infectious risk?*
- ✓ **Develop assays** and preventative strategies for potential human pathogens (focus on viruses, pig-specific pathogens)
- ✓ Characterize the **biology of potential pathogens in clinically relevant models** (*immunocompromised hosts in vivo*)
- ✓ **Science:** Understand the impact of *immune suppression, tolerance induction, and genetically engineered source animals* on infectious risk

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### Framework: Categories of Potential Human Pathogens Resulting from Xenotransplantation

- **Common Human Pathogens of Allotransplant Recipients** (EBV, CMV, herpes simplex virus, varicella zoster virus, *Apergillus*, *Listeria*, *Mycobacteria*)
  - **Specific serologic tests and microbiological assays are generally available**
  - **Therapies generally available**
- **Traditional Zoonoses:** well-characterized *clinical syndromes of humans* (*Toxoplasma*)
  - **Specific microbiological assays are generally available**
  - **Therapies generally available**
- **Species-specific agents:** organisms thought to be incapable of causing infection outside the xenograft (e.g., porcine CMV, Porcine lymphotropic herpesvirus, circovirus)
  - **Some specific microbiological assays are available; few validated assays available for use in humans**
  - **Impact of infection limited to xenograft and unknown host response to infection**
- **Potential pathogens:** Organisms of broad “host range” which may spread beyond the xenograft (adenovirus, influenza, coronaviruses, actinomycetes, mycobacteria)
  - **Specific microbiological assays are available for use in humans; may not be standardized for porcine strains; limited therapies available**
- **New/Unknown pathogens:** Organisms not known to be human pathogens
  - **Unknown pathogenicity within the new host (e.g., retroviruses)**
  - **Unknown clinical syndromes; microbiologic assays limited; some therapies**

See: Fishman, JA. *Xenotransplant*, 1994, 47-57; *Kidney International*, 1997, 51(supp): 41-45; *Xenotransplant* 2007, 14:349-352; *J Cardiac Surg*, 2001, 16: 363-373.

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### Viruses of Swine: Potential Causes of Infection or Adverse Effects in Human Xenograft Recipients?

- *Adenovirus sp.*
- African swine fever
- Encephalomyocarditis virus
- **Influenza virus (swine, avian, human)**
- Lymphocytic choriomeningitis virus (LCMV)
- *Nipah (Hendra-like) respiratory virus of humans*
- *Menangle virus (fruit bat and swine, human infection mild, + serology)*
- **Porcine circovirus 1, 2 and 3 – nonproductive infection in vitro, in vivo (Graft infection)**
- Porcine coronavirus
- **Porcine cytomegalovirus (PCMV)**
- **Porcine endogenous retrovirus (PERV)**
- **(Porcine) Hepatitis E virus – HEV genotypes 1 and 2 common in humans**
- Porcine lymphotropic herpesvirus (PLHV-1, -2, -3)
- Porcine parvovirus (PPV) – ?
- Porcine polyomavirus
- Porcine Reproductive and Respiratory Syndrome virus (increased by coinfection with *Streptococcus suis*) - ?
- Pseudorabies virus
- *Rabies virus*
- Rotavirus
- **Anellovirus /Torque tenovirus -?**

Need consistent surveillance plan in source animals and recipients

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### “Designated-Pathogen-Free” Miniature Swine: Potential Human Pathogens?

Bacteria:	Parasites:	Viruses:
<i>Brucella suis</i>	<i>Ascaris suum</i>	<i>Adenovirus</i> (porcine)
<i>Leptospira spp.</i>	<i>Cryptosporidium parvum</i>	<i>Circovirus 1, 2 and 3 (vaccine)</i>
<i>Listeria monocytogenes</i>	<i>Isospora sp.</i>	Porcine Cytomegalovirus
<i>Mycobacterium bovis</i>	<i>Neospora</i>	Encephalomyocarditis virus
<i>Mycobacterium tuberculosis</i>	<i>Strongyloides ransomi</i>	<i>Hepatitis E Virus</i>
<i>Mycobacterium avium</i> - intracellulare complex	<i>Toxoplasma gondii</i>	<i>Influenza virus</i> (porcine and human)
<i>Mycoplasma hyopneumoniae</i> (lungs?)	<i>Trichinella spiralis</i>	Porcine Lymphotropic Herpes (PLHV)?
<i>Salmonella typhi, typhimurium, cholerasuis</i>		Porcine Reproductive and Respiratory Syndrome Virus
<i>Shigella</i>		<i>Nipah (Hendra-like) and Menangle virus</i>
<i>Trypanosoma spp.</i>		Porcine Parvovirus
	<b>Fungi:</b>	<i>Porcine endogenous retrovirus (A,B,C, AC)</i>
	<i>Aspergillus species</i> (colonized or lesions)	Porcine Hemmagglutinating encephalomyelitis
	<i>Candida species</i> (Lesions)	Porcine Teschovirus
	<i>Cryptococcus neoformans</i>	Pseudorabies / Rabies
	<i>Histoplasma capsulatum</i>	<i>Rotavirus</i>

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Need validated assays for studies of swine organisms in human recipients of xenografts

**Serology** – useful for screening (past exposures)

**Cultures** – routine and viral

**Single or Multiplex Molecular** (Quantitative PCR) Assays for potential human pathogens:

- Screening – generally not useful for this indication
- Monitoring – for activation
- Diagnosis of acute infectious syndrome

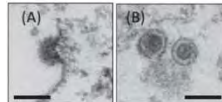
**Metagenomics** – whole genome sequencing

- Currently available databases are for human pathogens
- Requires larger database of pig pathogens
- Reverse transcribed for RNA viruses
- Pig genome data useful for correction for circulating pig cells and cell-free DNA/RNA

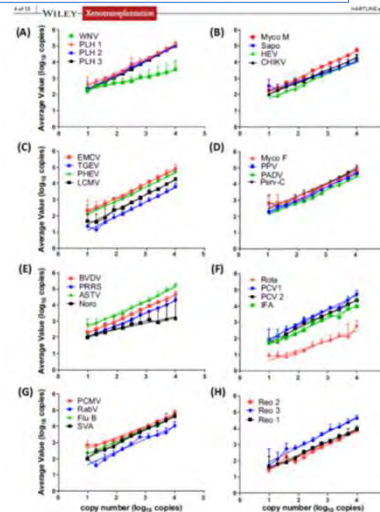
Others:

- **ELISA**, Western Blot, Serologies (vs. viral proteins)
- **Electron Microscopy**

EM From Denner, J.  
Xenotransplantation. 2020;00:e12594.  
<https://doi.org/10.1111/xen.12594>



Hartline CB et al. Xenotrans. 2018;  
25:e12427



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How does one get into this field?

“ I have some sick pigs.”

David Sachs, MGH, circa 1993.

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## Xenotransplantation and Xenosis: Are the Risks Enhanced?

- **Transplant Bypasses Host Defenses:** no “vector” needed for transmission
- Increased **intensity of immunosuppression required?**
- **Xenograft provides ecologic niche** in the body (culture plate) for swine-specific organisms.
- Potentially **protected site** from cellular immunity due to MHC-mismatch
- **Organisms not detected by current clinical microbiologic assays, not identified as human pathogens, no pre-existing immunity, or “xenotropic”** (causing disease in non-native host)
- **Swine organisms: New clinical syndromes?** Non-recognition of infection.
- **Genetic modification of donor or treatment of recipient may alter susceptibility to and manifestations of infection**

Fishman, JA. Infection and Xenotransplantation: Assessing the Risks. Clin. Micro. News 1998, 20:141-143; Fishman, JA. Infection and Xenotransplantation: Developing strategies towards clinical trials. Graft, 1998, 1(5): 181-185.

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## Source Animal Health (veterinary practice)

- Organisms to be excluded based on regulations or animal health
- Goal is to minimize use of antimicrobial agents in herd (selection of resistant organisms)
- Standard vaccinations
- Environment (breeding and transportation) and feed, human and animal (and insect) contacts regulated to exclude introduction of infection
- *Novel risks (e.g., susceptibility) due to genetic manipulation?*



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## Viral Activation in Transplantation

Common factors in the activation of latent herpesviruses and retroviruses are present in both allo- and xeno-transplantation

- **Immune Responses** (graft rejection)
- **Immunosuppression** (T-cell depleting antibodies)
- **Infection/Inflammation/Cytokines**
- **Cytotoxic Agents**
- **Radiation Therapy**

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## Xenopathogen Surveillance

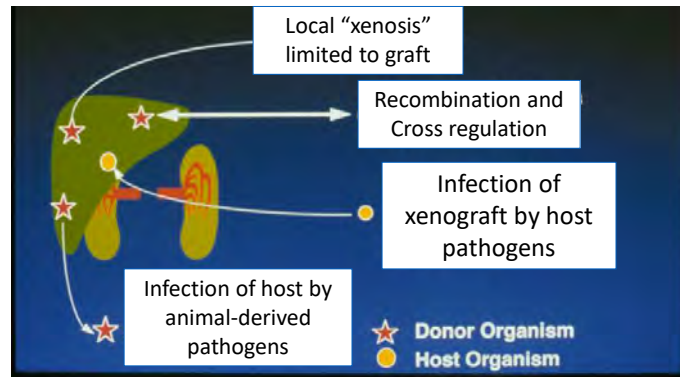
Test	Sample	Assay	Result	Date
Hepatitis E	Feces	Real-time PCR	Negative	1/7/22
Herpes virus gamma	Buffy coat	PCR	Negative	1/7/22
Influenza A	Nasal swab	Real-time PCR	Negative	1/7/22
Mycoplasma hyopneumoniae	Nasal swab	Real-time PCR	Negative	1/7/22
Porcine cytomegalovirus	Nasal swab	Real-time PCR	Negative	1/7/22
Porcine circovirus type 2	Serum	Real-time PCR	Negative	1/7/22
Porcine circovirus 3	Serum	Real-time PCR	Suspect [Ct 39]	1/7/22
Porcine Epidemic Diarrhea virus (S gene)	Feces	Real-time PCR	Negative	1/7/22
Porcine deltacoronavirus	Feces	Real-time PCR	Negative	1/7/22
Transmissible Gastroenteritis virus	Feces	Real-time PCR	Negative	1/7/22
Porcine reproductive and respiratory syndrome virus (PRRSV)	Serum	Real-time PCR	Negative	1/7/22
Porcine endogenous retrovirus A	Buffy coat	PCR	Positive [Ct 20]	12/21/21
Porcine endogenous retrovirus B	Buffy coat	PCR	Positive [Ct 22]	12/21/21
Porcine endogenous retrovirus C	Buffy coat	PCR	Negative	12/21/21

Patient developed PCMV despite negative PCR!

Griffith, BP e al. 2022. NEJM; 387:35-44.

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Sites of infection in xenotransplantation:  
Model for Donor-derived Infection



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Known Effects of Porcine Viruses in Immunosuppressed Baboons

- **Porcine cytomegalovirus (PCMV)** (also called Porcine roseolovirus, Suid betaherpesvirus 2) – species specific (no human infection)
  - **Infection of graft with endothelial activation (tissue factor) → systemic neutropenia, coagulopathy, graft rejection**
  - Can be bred out of colony (easily reintroduced)
  - Poorly susceptible in vitro to common antivirals
- **Porcine lymphotropic herpesvirus (PLHV)** – 3 known viruses → lymphoma-PTLD in swine
  - *No evidence of disease in baboons (species-specific)*
- **Porcine Circovirus (1,2,3)** – pneumonitis, lymphadenitis in swine
  - No disease in baboon, human, possible infection of xenograft?
- **Coronaviruses: Pigs not infectable by SARS-CoV-2** & do not carry CoV's pathogenic for humans. However, pigs carry angiotensin-converting enzyme 2 (ACE2) the common cellular receptor for spike (S-glycoprotein) of SARS-CoV-2. (Schlottau K, et al. Lancet Microbe 2020;1(5):e218-e225. DOI: 10.1016/S2666-5247(20)30089-6.)
- **PERV – Porcine Endogenous Retrovirus (A, B, C, AC)**
  - No effects identified in swine; cell surface receptors exist in humans
  - No productive infection in baboons (lack functional receptor)
  - Unknown virulence in human host (*carry functional receptors; replication only on transformed cells*)
  - Susceptible in vitro to available antivirals

All pig-to-primate studies performed in collaboration with lab of David Sachs. All studies generously supported by NIH-NIAID.

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## Likely Pig-specific organisms

- **Porcine Circovirus (PCV)** – *worldwide distribution of three species: PCV 1 (nonpathogen), PCV 2 (post-weaning multi-systemic wasting syndrome, PMWS), and PCV 3 (important swine pathogen). Non-enveloped spherical particles with a single-stranded circular small DNA genome.*
  - PCV3 may be limited pathogen (colonizer?) without other coinfecting viruses such as PCV 2 or porcine reproductive and respiratory syndrome virus (PRRSV). Associated with porcine dermatitis and nephropathy syndrome (PDNS), reproductive failure, cardiac and multisystemic inflammation. Not reported in immunosuppressed swine.
  - PCV 3 in xenotransplantation reported in Göttingen Minipigs (GöMP) knocked out for  $\alpha$ 1,3-galactosyltransferase (GT-KO), and expressed human membrane cofactor protein (CD46) and human thrombomodulin (hTM)
  - Maintenance immunosuppression based on mycophenolate mofetil, CD40/CD40L costimulation blockade (monkey-specific anti-CD40 monoclonal antibody or PASylated  $\alpha$ CD40L Fab), and corticosteroids in addition to an induction therapy with an anti-CD20 antibody and anti-thymocyte-globulin
  - Higher viral loads were found in animals with longer survival times, **indicating the replication of the virus** per the authors but no demonstration of infection made.
- **No infection of human cells in vitro** (PCV 3-positive pig PBMCs stimulated with a T cell mitogen cocultured with human 293 cells for various time points, no transmission was observed)

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## PCV3 in Cardiac xenografts: Rising Viral Load with Pig-Specific Organism

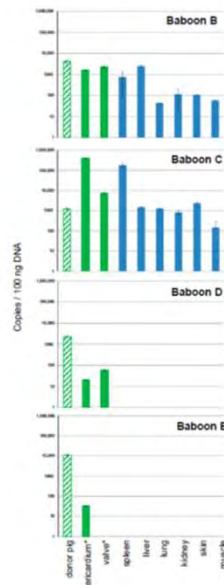


Figure 1. Detection of PCV3 in the organs of four PCV3-positive donor pigs (green hatched), in the transplanted pig heart after its removal at the end of the study (green) and in different organs of the baboon recipient (blue).

*Comment: Baboons with longer survival had greater viral loads. No demonstration of infection of baboon cells.*

Krüger L et al. Transmission of Porcine Circovirus 3 (PCV3) by Xenotransplantation of Pig Hearts into Baboons. *Viruses*. 2019 Jul 16;11(7):650. doi: 10.3390/v11070650. PMID: 31315245; PMCID: PMC6669873.

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## Porcine lymphotropic herpesvirus (PLHV)

- Porcine lymphotropic herpesviruses (PLHV 1, PLHV 2, PLHV 3) are gamma herpesviruses common in swine.
  - PLHV has some characteristics of both Epstein-Barr virus (EBV, cause of PTLN) and Kaposi's sarcoma virus (KSHV, sarcoma).
  - PLHV 1 causes post-transplantation lymphoproliferative disease (PTLD) with immunosuppression and experimental transplantations in mini-swine.
  - PLHV 1 not transmitted to baboon recipients in preclinical studies and not activated in graft. Not excluded by early weaning.
- Mueller NJ, Livingston C, Knosalla C, Barth RN, Yamamoto S, Gollackner B, Dor FJMF, Buhler L, Sachs DH, Yamada K, Cooper DKC, **Fishman JA**. Activation of Porcine Cytomegalovirus but not Porcine Lymphotropic Herpesvirus in Pig-To-Baboon Xenotransplantation, *J Infect Dis*, 2004, 189:1628-1633.
  - Mueller NJ, Kuwaki K, Knosalla C, Dor FJ, Gollackner B, Wilkinson RA, Arn S, Sachs DH, Cooper DK, **Fishman JA**. Early weaning of piglets fails to exclude porcine lymphotropic herpesvirus. *Xenotransplantation*. 12(1):59-62, 2005 Jan.
  - Nicolas C, Issa NC, Wilkinson RA, Griesemer A, Cooper DKC, Yamada K, Sachs DH, **Fishman JA**. Absence of Replication of Porcine Endogenous Retrovirus and Porcine Lymphotropic Herpes Virus type 1 with Prolonged Pig-Cell Microchimerism after Pig-to-Baboon Xenotransplantation. *J Virol*, 2008, 82(24):12441-8.

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## Porcine Cytomegalovirus (PCMV)

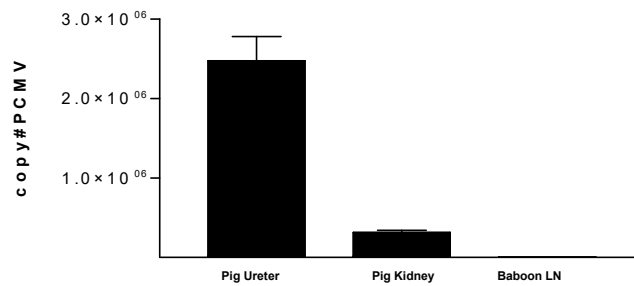
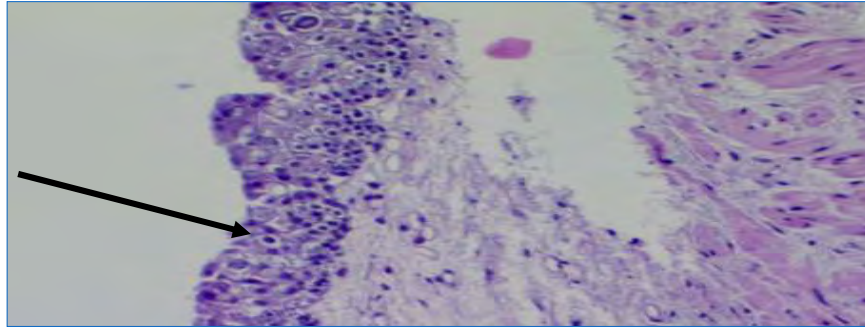
- **Replicates only in pig cells/tissues** – can see simultaneous PCMV in pig cells and BCMV in baboons
- **Provokes consumptive coagulopathy, activation of tissue factor, graft rejection in xeno-baboons** – prevented by removal of PCMV.
- **Diagnostic tools developed** (Serology, QPCR and culture)
- Relatively resistant to ganciclovir therapy (compared with human or baboon CMV)
- Some in vitro data suggest that human CMV has limited capacity to infect porcine vascular endothelial cells in vitro (Mueller et al)
- **Can be removed from herd** by early weaning or Caesarian section but easily reintroduced

- Mueller NJ, Kuwaki K, Dor FJ, Knosalla C, Gollackner B, Wilkinson RA, Sachs DH, Cooper DK, **Fishman JA**. Reduction of consumptive coagulopathy using porcine cytomegalovirus-free cardiac porcine grafts in pig-to-primate xenotransplantation. *Transplantation*. 78(10):1469-53, 2004 Nov 27.
- Fryer JF, Griffiths PD, **Fishman JA**, Emery VC, Clark DA. Quantitation of porcine cytomegalovirus in pig tissues by PCR. *Journal of Clinical Microbiology*. 39(3):1155-6, 2001 Mar.; Jacqueline F. L. Fryer et al. *J. Antimicrob. Chemother.* 2004;53:975-980; Gollackner B, Mueller NJ, Houser S, Gawi I, Sozic D, Knosalla C, Dor FJMF, Awwad M, Sachs DH, Cooper DKC, Robson SC, **Fishman JA**. Porcine Cytomegalovirus And Coagulopathy In Pig-To-Primate Xenotransplantation. *Transplantation* 2003; 75(11): 1841-1847.
- Yamada K, Tasaki M, Sekijima M, Wilkinson RA, Villani V, Moran SG, Cormack TA, Hanekamp JA, Arn JS, **Fishman JA**, Shimizu A, Sachs DH. Porcine CMV Infection Is Associated with Early Rejection of Kidney Grafts in a Pig to Baboon Xenotransplantation Model. *Transplantation*. 2014, 98(4):411-8. doi: 10.1097/TP.0000000000000232. PMID:25243511
- **Fishman JA, Sachs DH, Yamada K, Wilkinson RA**. Absence of Interaction between Porcine Endogenous Retrovirus and Porcine Cytomegalovirus in pig-to-baboon renal xenotransplantation in vivo. *Xenotransplant* 2018. 2018 Sep;25(5):e12395. doi: 10.1111/xen.12395. Epub 2018 Apr 6. PMID:29624743.

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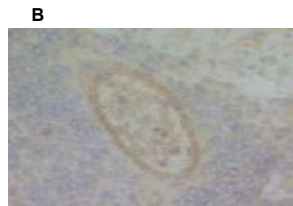
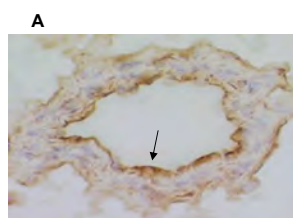


## Host-specific PCMV Infection

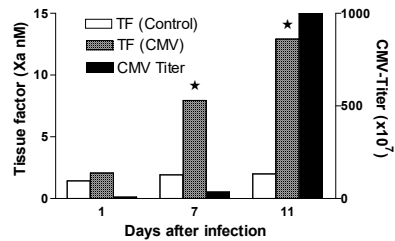


Mueller et al. PCMV in pig-to-primate xenotransplantation

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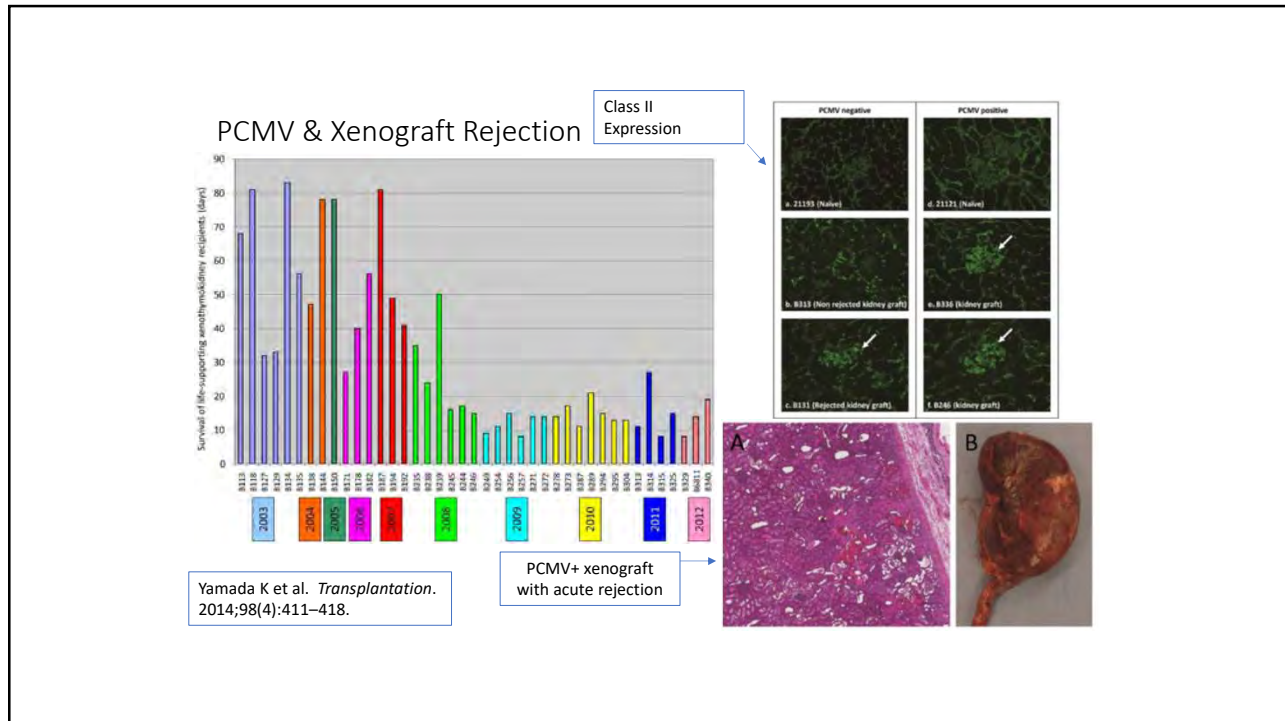


Bernd Gollackner et al.

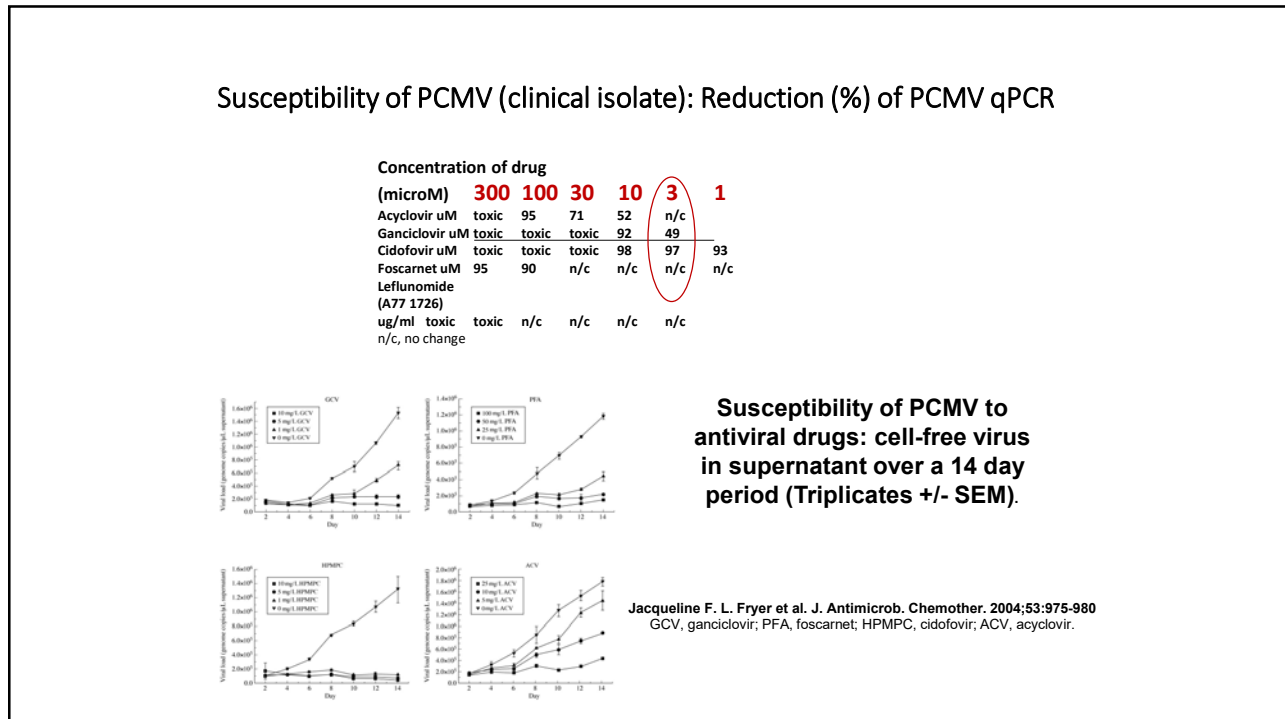


*PCMV induces endothelial cell activation in vitro and in vivo with procoagulant expression: porcine tissue factor (pTF) upregulation in CMV-infected PAEC. White bars show TF in control cells, shaded bars show upregulation in infected cells. Immunohistochemistry for porcine TF of a pig kidney excised on day 29 for consumptive coagulopathy.*

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### Porcine Endogenous Retrovirus (PERV): A Long Story

- ☺ Todaro (1974): C-type retrovirus from PK-15
- ☺ Suzuka (1985): C-type retrovirus from swine malignant lymphoma (Tsukuba-1 virus)
- ☺ Kaeffer (1990): Tsukuba-1 causes lymphomas in wild boar (but not infective for human cell lines or mice; has RT activity in vitro)
- ☺ Le Tissier (1997): Two classes of PERV from PK-15 cell line (PERV A and B) and Patience (1997): PK-15 virus infective for transformed human cell lines
- ☺ Akiyoshi & Fishman (1997): **Full-length sequence of Tsukuba-1 and PERV from *normal pig cells* (PERV C) - constitutive expression; copy number & distribution vary by pig strain.** (Akiyoshi DE, Denaro M, Zhu H, Greenstein JL, Banerjee P, Fishman J. Identification of a Full-length cDNA for an Endogenous Retrovirus of Miniature Swine. *J. Virology*, 1998, 72:4503-4507.)

35

Infectious risks of xenotransplantation cannot be assessed in the absence of clinical trials.



What do we need to learn?

36



Dateline: 1997

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## When will we have clinical xenotransplantation?

“When Jay Fishman stops writing papers!”

*Thomas Starzl, M.D.*

*International Transplant Infectious Disease  
Congress, Orlando, FLA, 1997*

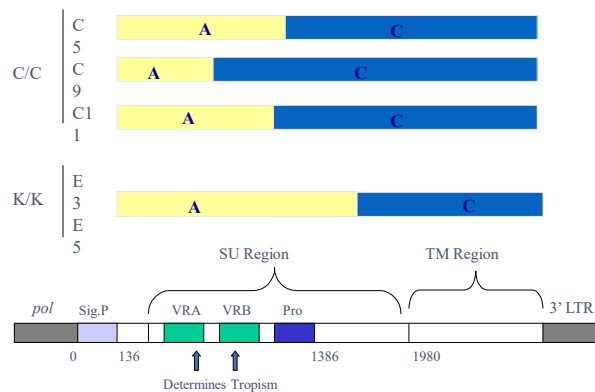
38

Human-tropic, replication competent (HTRC) porcine endogenous retrovirus (PERV AC) *in vitro*

- Three types of PERV (A, B, C) exist that differ in *env* region and receptor binding. **PERV-A and PERV-B are capable of infecting human cells** and are present in the genome of most pigs. **PERV-C infects only pig cells** and is present in the genome of many, but not all pigs.
- **PERV receptors are present on human cells.** However, *productive infection of normal human cells by PERV by normal porcine tissues has not been demonstrated*
- *In vitro* infection of **permissive human cell line** (HEK297, adenovirus transformed) by PERV A and B requires high titer virus or direct contact with pig cells.
- **Replication efficiency increases with passage in vitro** → produces a recombinant PERV A and C (**HTRC PERV AC**) with improved replication. PERV AC is present in genome of some normal swine
- **No human infection demonstrated in recipients of alginate encapsulated porcine islets or >200 individuals exposed to pig cells/tissues.**

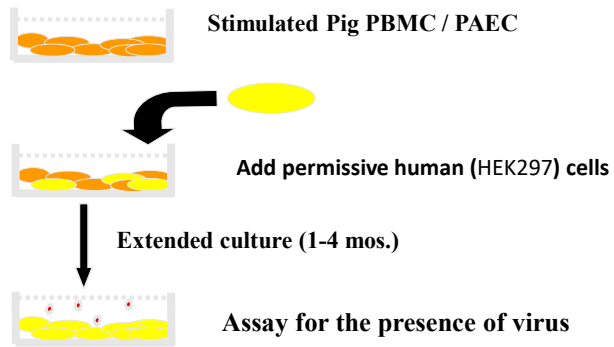
39

**HIGHLY REPLICATION COMPETENT PERV ARE RECOMBINANT VIRUSES *IN-VITRO***



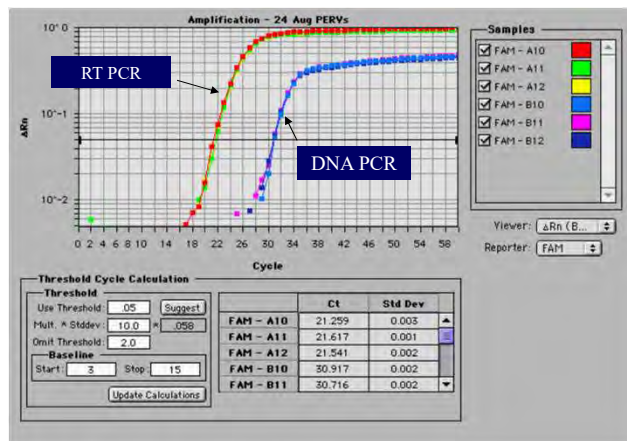
40

## PERV TRANSMISSION ASSAYS



41

## PERV pol Taqman PCR



42

## Porcine Endogenous Retroviruses (PERV)

Enveloped RNA viruses can integrate into the genome of infected individuals as proviruses where they can remain as fragments or full length copies, potentially reactivated.

Many endogenous type C retroviruses are present in all reptiles, birds and mammals without effect on host species – but with capacity to infect across species (xenotropic host range)

Three replication-competent subtypes of PERV: PERV-A, PERV B, and PERV C. PERV A and B are polytropic, capable of infecting both porcine and human cells (receptors present in humans, not in baboons)

PERV A/C recombinants represent the PERV A sequence for receptor-binding (SU region in the env) and remaining sequence coming from PERV C.

**Infectivity is demonstrated ONLY on adenovirus transformed human cells (HEK 293). No infection (virus or serology) has been demonstrated in individuals with exposure to pig tissues.** Erroneous publication suggested infection of humanized mice after islet transplantation.

PERV AC develops in vivo in swine as well as in vitro. PERV A/C is significantly more infective for HEK-293 cells than PERV A.

Wilhelm M, Fishman JA, Pontikis R, Aubertin A-M, Grierson DS, Wilhelm FX. Susceptibility of Recombinant Porcine Endogenous Retrovirus Reverse Transcriptase to Nucleoside and Non-nucleoside Inhibitors. Cellular and Molecular Life Science, 2002, 59:2184-90.

Wood JC, Quinn G, Suling KM, Oldmixon BA, Van Tine BA, Cina R, Arn S, Huang CA, Scobie L, Onions DE, Sachs DH, Schuurman H-J, Fishman J, Patience C. Identification of exogenous recombinant human-tropic porcine endogenous retrovirus. J. Virol 2004; 78:2494-2501.

Yang YG, Wood JC, Lan P, Wilkinson RA, Sykes M, Fishman JA, Patience C. Mouse retrovirus mediates porcine endogenous retrovirus transmission into human cells in long-term human-porcine chimeric mice. Journal of Clinical Investigation. 114(5):695-700, 2004

Martin SJ, Wilkinson RA, Fishman JA. Genomic presence of recombinant porcine endogenous retrovirus in transmitting miniature swine. Virology J., Virology Journal 2006, 3:1743-422(<http://www.virology.com/content/3/1/91>)

Nicolas C, Issa NC, Wilkinson RA, Griesemer A, Cooper DKC, Yamada K, Sachs DH, Fishman JA. Absence of Replication of Porcine Endogenous Retrovirus and Porcine Lymphotropic Herpes Virus type 1 with Prolonged Pig-Cell Microchimerism after Pig-to-Baboon Xenotransplantation. J. Virol, 2008, 82(24):12441-8.

Yang L, Güell M, Niu D, George H, Leshia E, Grishin D, Aach J, Shrock E, Xu W, Poci J, Cortazio R, Wilkinson RA, Fishman JA, Church G. Genome-wide inactivation of porcine endogenous retroviruses (PERVs). Science DOI: 10.1126/science.aad1191 Online October 11 2015

Argaw, T., Colon-Moran, W., Wilson, C., Susceptibility of porcine endogenous retrovirus to antiretroviral inhibitors. Xenotransplantation, 2016. 23(2): p. 151-158

43

## Human-tropic, replication competent (HTRC) porcine endogenous retrovirus (PERV AC) *in vitro*

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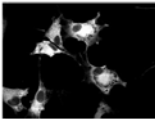
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## Host Range of PERV's

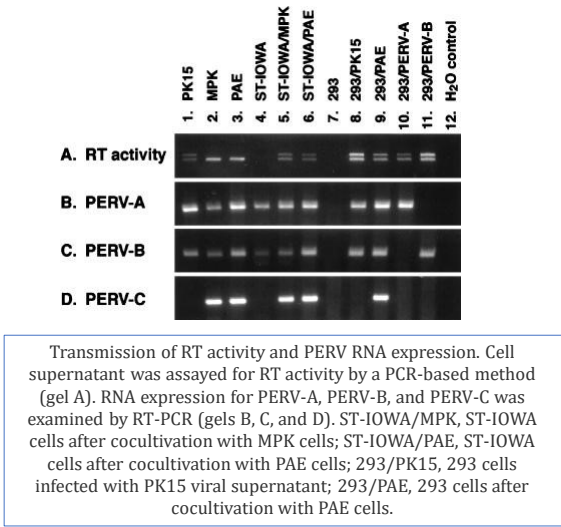
- Sequence studies have identified PERVs carrying three different *env* genes. The three *env* genes specify interactions with three different receptors.
- PERV-A and PERV-B are capable of infecting a number of human cell lines while PERV-C is not.
- PERV AC can infect human cell lines.
- None of the PERVs replicate on primate cells.
- All three PERV Env's recognize receptors on some pig cell lines → they have potential to replicate in pigs as well as likely in transplanted pig tissues.
- It is not known whether integrations occurring in pig tissues may occur at chromosomal sites favoring provirus expression or recombination.

B



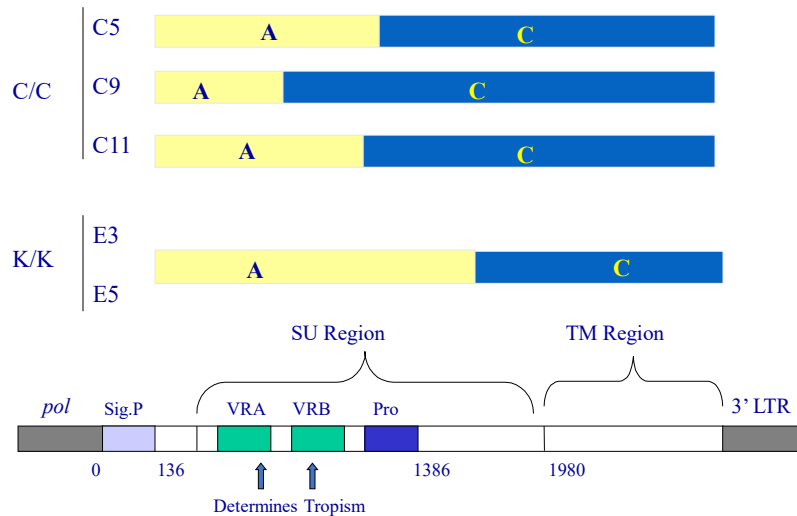
PERV receptor activity in vitro HuPAR-2EGFP protein is expressed at the plasma membrane of transduced SIRC cells. Intracellular protein, particularly in the perinuclear endoplasmic reticulum region, is also evident.

Takeuchi Y, Patience C, Magre S, et al. Host range and interference studies of three classes of pig endogenous retrovirus. *J Virol.* 1998;72(12):9986-9991. doi:10.1128/JVI.72.12.9986-9991.1998; Ericsson TA et al. Identification of receptors for pig endogenous retrovirus. *Proc Natl Acad Sci U S A.* 2003 May 27;100(11):6759-64. doi: 10.1073/pnas.1138025100. Epub 2003 May 9. PMID: 12740431; PMCID: PMC164520.



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## Human-tropic, replication competent (HTRC) porcine endogenous retrovirus (PERV AC) are recombinant viruses *in vitro*

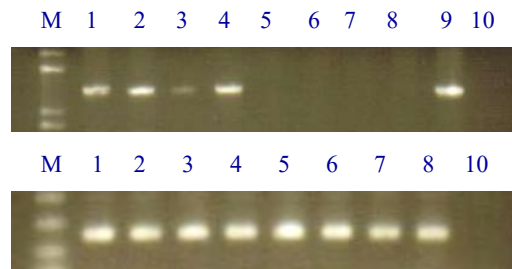


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## Recombinant PERV AC Exist in the Genome of Normal Mini-swine tissues: On-going infection

PCR with PERV-A SU region forward primers and PERV-C TM region reverse primers in the total cellular DNA harvested from tissues of swine (mitochondrial markers control)

The envelope glycoproteins of the mammalian type C retroviruses consist of two subunits, a surface (SU) protein and a transmembrane (TM) protein. SU binds to the viral receptor and is thought to trigger conformational changes in the associated TM protein that ultimately lead to the fusion of viral and host cell membranes.



1-4: transmitting swine

5-8: Gal-T-KO swine

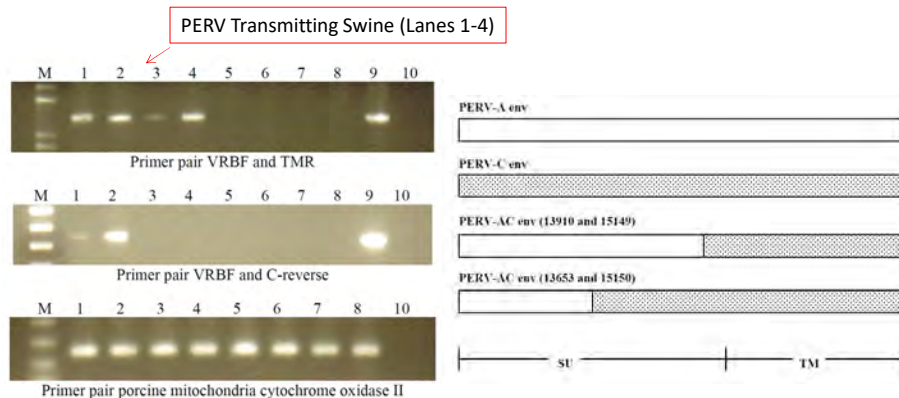
9: Positive control

10: Negative control

**Martin and Fishman *Virology J.*, *Virology J* 2006, 3:1743-422**

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**PERV AC Auto-infectious Cycle:** Two different recombinant PERV-AC sequences were identified and sequenced from tissues (cellular DNA) of PERV-transmitting miniature swine and from cell cultures. **This was the first evidence of PERV-AC recombinant virus in porcine genomic DNA** that may have resulted from autoinfection following exogenous viral recombination.



**Recombinant PERV AC Exist in the Genome of Normal Mini-swine tissues: On-going infection (from Martin and Fishman *Virology J.*, *Virology J* 2006, 3:1743-422)**

48

## Quantification challenges

- Microchimerism – what does a high level of virus mean?

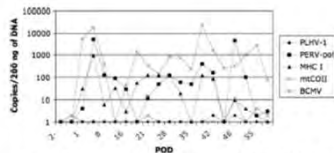


FIG. 1. Viral loads of PLHV-1, PERV-pol, MHC-I, mtCOII, and BCMV in baboon B113. POD, postoperative day.

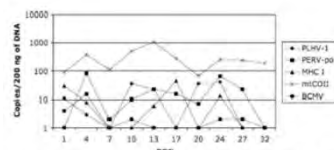


FIG. 2. Viral loads of PLHV-1, PERV-pol, MHC-I, mtCOII, and BCMV in baboon B114. POD, postoperative day.

JOURNAL OF VIROLOGY, Dec. 2008, p. 12441-12448  
 0022-538X/08/80(24)12441-08  
 Copyright © 2008, American Society for Microbiology. All Rights Reserved.

Vol. 82, No. 24

### Absence of Replication of Porcine Endogenous Retrovirus and Porcine Lymphotropic Herpesvirus Type 1 with Prolonged Pig Cell Microchimerism after Pig-to-Baboon Xenotransplantation<sup>1</sup>

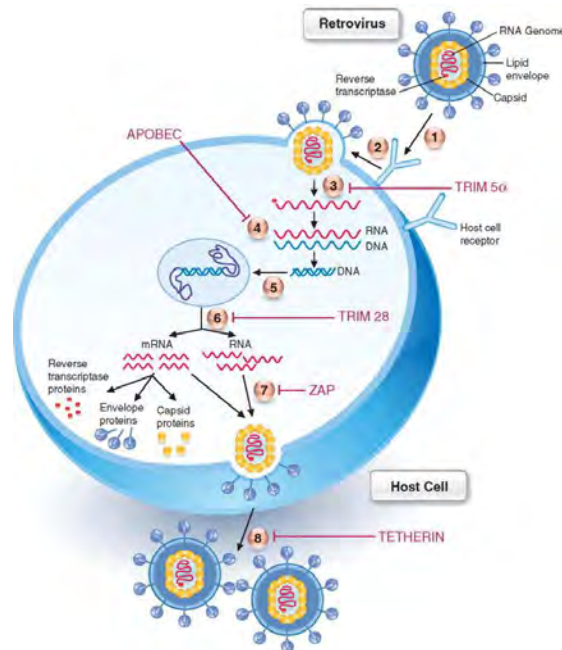
Nicolas C. Issa,<sup>1</sup> Robert A. Wilkinson,<sup>1</sup> Adam Griesemer,<sup>3</sup> David K. C. Cooper,<sup>2</sup> Kazuhiko Yamada,<sup>2</sup> David H. Sachs,<sup>2</sup> and Jay A. Fishman<sup>1\*</sup>

- **Quantification requires correction for circulating cells or free DNA to distinguish “infection” from pig cell carriage (e.g., PCMV or PERV).**

- Pig- MHC-I gene (low copy number)
- Pig Mitochondrial Cytochrome c oxidase subunit II (high copy number)

- Lack of correlation of viral load with immunosuppression may suggest chimerism or graft injury.

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The retroviral life cycle and sites of activity of the major antiviral restriction factors. Envelope glycoproteins of the retrovirus interact with specific host-cell membrane protein receptors. (1) The retroviral envelope fuses with the plasma membrane and enters the host cell. (2) Following fusion, the nucleocapsid enters the cytoplasm and (3) uncoating of viral core occurs. (4) Viral reverse transcriptase copies single strand viral RNA into double-stranded DNA. (5) Viral DNA is transported into the nucleus and integrated into host-cell chromosomal DNA. (6) Integrated viral DNA is transcribed by the host-cell RNA polymerase, generating mRNA molecules and new viral genomic RNA molecules [TRIM28 blocks viral transcription]. Viral mRNAs are translated into viral proteins (envelope, capsid, and reverse transcriptase). (7) Newly synthesized viral proteins and genomic RNA gather to form immature viral particles [ZAP degrades viral RNAs]. (8) New virions bud from the cell surface, acquiring an envelope including host-cellular and viral proteins from the cell membrane [Tetherin traps virions on the cell surface].

Meije Y, Tönjes RR, Fishman JA. Retroviral Restriction Factors and Infectious Risk in Xenotransplantation. *American journal of transplantation : official journal of the American Society of Transplantation and the American Society of Transplant Surgeons*. 2010;10(7):1511-1516.

50

## Strategies to reduce risk of PERV Transmission?

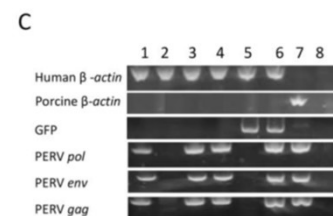
- **Choice of non-transmitting or null animal donor** (Garkavenko et al, 2008; Hector et al, 2007)
  - Is it desirable or necessary to have source animals lacking functional PERV-A and -B and without any PERV-C sequences?
- **Neutralising antibodies/vaccine development** (Fiebig et al 2003)
- **Intrinsic antiviral activities**
  - APOBEC (Dorrschuck et al 2008; Jonsson et al 2007)
  - Telithrin overexpression reduces PERV release from pig cells in vitro (Mattiuzzo et al, 2010)
- **Antiviral chemotherapies: Multiple classes of agents effective in vitro** (Powell et al 2000; Qari et al 2001; Stephan et al 2001; Wilhem et al 2001; Argaw, T et al. *Xenotransplantation* 2016: 23: 151– 158)
- **Genetically engineered source animals**
  - Intracellularly-expressed single chain antibodies (Dekker et al 2003)
  - shRNA (short hairpin RNA) in vitro (Karlas et al 2004; Miyagawa et al 2005; Dieckhoff et al 2007) and in vivo (Dieckhoff et al 2008; Ramsoondar et al 2009).
  - siRNA to silence PERV production
  - **CRISPR-Cas9 engineering** -- RNA-programmable nuclease → Advantage to the **inducible CRISPR-Cas9** circuit could protect against future PERV infection.

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## PERV-free Pigs?

- Confirmed that PERVs infect human cells (HEK293T-GFP cells) with horizontal transfer of PERVs among these cells by direct contact.
- Novel PERV junctions produced in the human cell genomes; overrepresented in intra-genic regions and in active chromatin areas.
- CRISPR-Cas9 → inactivated all PERVs in a porcine primary cell line and generated PERV-inactivated pigs via somatic cell nuclear transfer.
- No evident off-site mutations

Detection of human-to-human PERVs transmission in HEK293T cells.



D. Niu et al., *Science* 10.1126/science.aan4187 (2017).

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# Amino Acid Sequence of PERV A, C, and AC recombinants

- Over time **individual swine may activate PERV loci and develop new recombinant viruses** (i.e., non-transmitting trait is not permanent).
- **Driven by activity of PERV C genomic locus**
- **Absence of PERV-C in swine suggests no new infectious loci**
- Present assays are cumbersome and inadequate to assess “infectiousness” of a tissue-derived strain (in vitro)

```

PERV-C  YTSRQGFNTV-----LQWVYDGF  KQSFSLDYL  KLSPTFRKQ  38
PERV-A  FTITGTFNYS  RQWVWQQR  VQWVWVNGI  SQWLSLDTL  KLSPTFRKQ  50
13151  FTITGTFNYS  RQWVWQQR  VQWVWVNGI  SQWLSLDTL  KLSPTFRKQ  50
15149  FTITGTFNYS  RQWVWQQR  VQWVWVNGI  SQWLSLDTL  KLSPTFRKQ  49
13453  FTITGTFNYS  RQWVWQQR  VQWVWVNGI  SQWLSLDTL  KLSPTFRKQ  50
15150  FTITGTFNYS  RQWVWQQR  VQWVWVNGI  SQWLSLDTL  KLSPTFRKQ  50

PERV-C  ENLQWVWQH  SWQVYVGS  GRKSGVLT  FLRLTQRF  PVALGRNGL  100
PERV-A  ENLQWVWQH  SWQVYVGS  GRKSGVLT  FLRLTQRF  PVALGRNGL  100
13151  ENLQWVWQH  SWQVYVGS  GRKSGVLT  FLRLTQRF  PVALGRNGL  99
13453  ENLQWVWQH  SWQVYVGS  GRKSGVLT  FLRLTQRF  PVALGRNGL  100
15150  ENLQWVWQH  SWQVYVGS  GRKSGVLT  FLRLTQRF  PVALGRNGL  100

PERV-C  TQGRFFTS-----DQFV-DN  ITDSDPTF  RPTDNGAL  PSLIQGAP  112
PERV-A  AQGFPIQK  RFRWFDVW  TDSQVPTF  NITDNGAL  PSLIQGAP  150
13910  AQGFPIQK  RFRWFDVW  TDSQVPTF  NITDNGAL  PSLIQGAP  150
15149  AQGFPIQK  RFRWFDVW  TDSQVPTF  NITDNGAL  PSLIQGAP  149
13453  AQGFPIQK  RFRWFDVW  TDSQVPTF  NITDNGAL  PSLIQGAP  150
15150  AQGFPIQK  RFRWFDVW  TDSQVPTF  NITDNGAL  PSLIQGAP  150

PERV-C  LNTTFEATL  SQMLGASQ  PYSQWAGS  RFWVTESS  QTWGQML  182
PERV-A  LNTTFEATL  SQMLGASQ  PYSQWAGS  RFWVTESS  QTWGQML  200
13910  LNTTFEATL  SQMLGASQ  PYSQWAGS  RFWVTESS  QTWGQML  200
15149  LNTTFEATL  SQMLGASQ  PYSQWAGS  RFWVTESS  QTWGQML  199
13453  LNTTFEATL  SQMLGASQ  PYSQWAGS  RFWVTESS  QTWGQML  200
15150  LNTTFEATL  SQMLGASQ  PYSQWAGS  RFWVTESS  QTWGQML  200

PERV-C  TLETVGKST  CIGWVFFSQ  RLCNTEAF  QTEGQILV  QYHWKACT  232
PERV-A  TLETVGKST  CIGWVFFSQ  RLCNTEAF  QTEGQILV  QYHWKACT  250
13910  TLETVGKST  CIGWVFFSQ  RLCNTEAF  QTEGQILV  QYHWKACT  249
15149  TLETVGKST  CIGWVFFSQ  RLCNTEAF  QTEGQILV  QYHWKACT  248
13453  TLETVGKST  CIGWVFFSQ  RLCNTEAF  QTEGQILV  QYHWKACT  250
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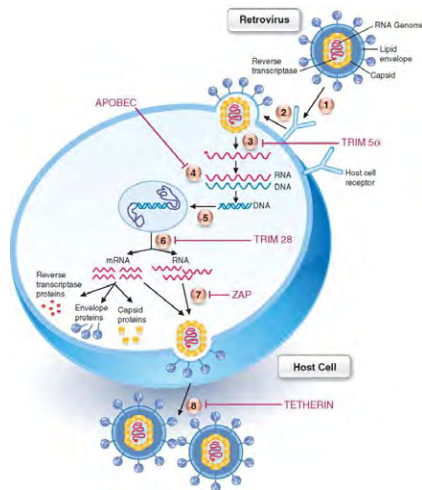
PERV-C  GLTPCVTLV  FNGKDFPCN  VQIVFVTV  FKAALLET  VSRWQKSP  282
PERV-A  GLTPCVTLV  FNGKDFPCN  VQIVFVTV  FKAALLET  VSRWQKSP  300
13910  GLTPCVTLV  FNGKDFPCN  VQIVFVTV  FKAALLET  VSRWQKSP  299
15149  GLTPCVTLV  FNGKDFPCN  VQIVFVTV  FKAALLET  VSRWQKSP  298
13453  GLTPCVTLV  FNGKDFPCN  VQIVFVTV  FKAALLET  VSRWQKSP  300
15150  GLTPCVTLV  FNGKDFPCN  VQIVFVTV  FKAALLET  VSRWQKSP  300

PERV-C  ILSLAVRGL  LQVAVDQTS  TAAVTFQD  LKTLNLSR  IYTESQALE  332
PERV-A  ILSLAVRGL  LQVAVDQTS  TAAVTFQD  LKTLNLSR  IYTESQALE  350
13910  ILSLAVRGL  LQVAVDQTS  TAAVTFQD  LKTLNLSR  IYTESQALE  349
15149  ILSLAVRGL  LQVAVDQTS  TAAVTFQD  LKTLNLSR  IYTESQALE  348
13453  ILSLAVRGL  LQVAVDQTS  TAAVTFQD  LKTLNLSR  IYTESQALE  350
15150  ILSLAVRGL  LQVAVDQTS  TAAVTFQD  LKTLNLSR  IYTESQALE  350

PERV-C  RQVWLEEL  TSLRVPVQ  RQGLLELFL  RQGLVALR  RQCFYDMS  382
PERV-A  RQVWLEEL  TSLRVPVQ  RQGLLELFL  RQGLVALR  RQCFYDMS  400
13910  RQVWLEEL  TSLRVPVQ  RQGLLELFL  RQGLVALR  RQCFYDMS  399
15149  RQVWLEEL  TSLRVPVQ  RQGLLELFL  RQGLVALR  RQCFYDMS  398
13453  RQVWLEEL  TSLRVPVQ  RQGLLELFL  RQGLVALR  RQCFYDMS  400
15150  RQVWLEEL  TSLRVPVQ  RQGLLELFL  RQGLVALR  RQCFYDMS  400

PERV-C  AIGDMMKIL  SLEKFRFE  ETLQWTF  408
PERV-A  AIGDMMKIL  SLEKFRFE  ETLQWTF  424
13910  AIGDMMKIL  SLEKFRFE  ETLQWTF  425
15149  AIGDMMKIL  SLEKFRFE  ETLQWTF  425
13453  AIGDMMKIL  SLEKFRFE  ETLQWTF  424
15150  AIGDMMKIL  SLEKFRFE  ETLQWTF  424
    
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53



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### Targeted genome-wide inactivation of porcine endogenous retrovirus activities (PERVs)

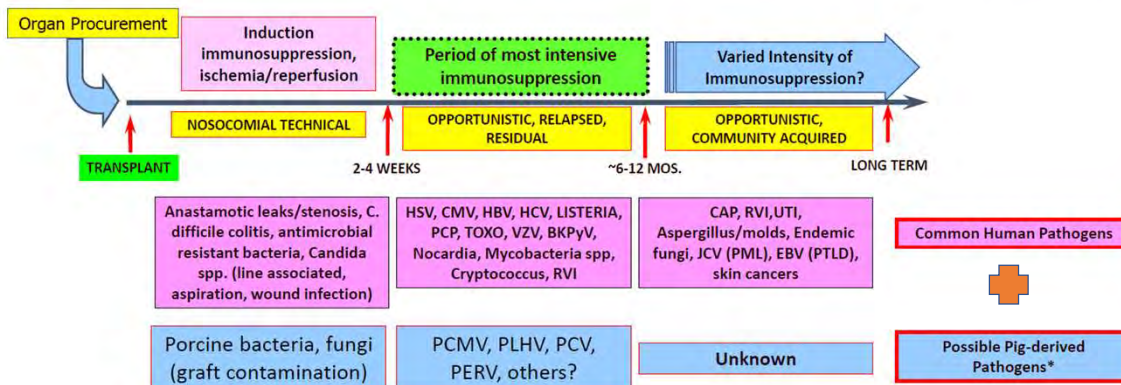
Luhan Yang<sup>1,2,3,\*</sup>, Marc Güell<sup>1,2,3,\*</sup>, Dong Niu<sup>1,4,\*</sup>, Haydy George<sup>1,\*</sup>, Emal Lesho<sup>1</sup>, Dennis Grishin<sup>1</sup>, Weihong Xu<sup>6</sup>, Jürgen Poci<sup>1</sup>, Ellen Shrock<sup>1</sup>, Rebeca Cortazio<sup>1</sup>, Robert A Wilkinson<sup>5</sup>, Jay A. Fishman<sup>5</sup>, George Church<sup>1,2,3,#</sup>

- CRISPR-Cas9 based strategy to inactivate all PERV elements in the porcine genome = 62 copies of PERV elements in the porcine kidney epithelial cell line PK15.
- Using CRISPR-Cas9, we disrupted the catalytic center of the *pol* gene, which catalyzes reverse transcription and is essential for virus replication.
- We isolated cells in which ~100% of the PERV elements had been inactivated and demonstrated a > 1000-fold reduction in transmission of PERVs to human cells, as compared with WT PK15 cells.
- Genome editing demonstrates the possibility of eradicating PERVs *in vitro* for possible application to porcine-to-human xenotransplantation.



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### The Timeline of Post-Porcine Xenotransplant Infections



Fishman, 2022

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Deployment of Microbiological Assays in Xenotransplantation				
Assay Type	Screening Source Animals	Xenograft Recipients Monitoring	Xenograft Recipients – Symptomatic Infection or Increased Risk*	Hospital Staff, Healthy Contacts of Recipient
Cultures (Active Infection)	X		X	
Serology (Past Exposures)	X	X	+/-	X
Molecular Assay or Antigen Detection (Active Infection)	X	X	X	+/-
Next Generation Sequencing (Active Infection)		X	X	
Sample Storage	<b>X</b>	<b>X</b>	<b>X</b>	<b>X</b>

\*Increased risk may be associated with treatment of graft rejection or intercurrent viral infection. Fishman, 2022.

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## Infection Control

- Recipient: (T-/B-cell/complement depletion, costimulatory blockade + MMF + steroids?)
  - Universal precautions; vaccinations (Neisseria, H. Flu, COVID, Pneumococcus)
  - Baseline and serial blood (and tissue) samples for common human pathogens and likely pig organisms (not excluded already) – cultures, PCR, metagenomics, histology (PERV, PCMV, PCV, PLHV) – archived cells and sera for nucleic acid and antibody studies.
  - Routine prophylaxis (as for allotransplants)
  - Isolation for readmissions
  - What is not excluded from source herd?
- Surgical and Clinical Facility:
  - Separate from other clinical areas – negative pressure?
- Procurement & Surgical Teams (no known infections in teams studying xeno in primate models)
  - Baseline blood samples (informed consent) stored as cells and sera
  - Blood borne pathogen exposure (fluids) – serial blood samples, consider post-exposure prophylaxis with activity vs PERV (28-day regimen of raltegravir 400mg twice a day with the combination tablet tenofovir DF 300mg/emtricitabine 200mg daily)
- Social contacts of recipient – unknown (baseline samples?)

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## Infection Control: Consider ...

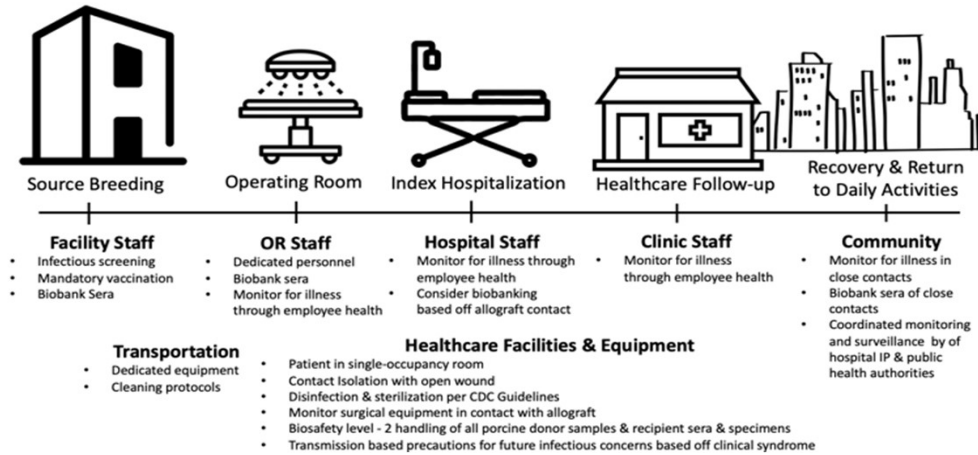


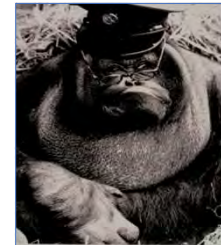
Fig 1. Infection Prevention in Xenotransplant Clinical Trials

From: Nellore, A, Walker, J, Kahn, MJ, Fishman, JA. Moving xenotransplantation from bench to bedside: Managing infectious risk. *Transpl Infect Dis.* 2022;e13909. <https://doi.org/10.1111/tid.13909>

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## Approaching clinical trials

- Each Xenotransplantation Clinical Trial is a “**package**” including:
  - Patient Need (Organ) +**
  - Specific Pig (Breeding/Screening) +**
  - Immunosuppression (Studied in primate models)**
- Likely the infectious risk is not much greater than for allotransplantation – but also not zero.
- Careful screening of source animals is required. Need serologic assays. Have developed quantitative diagnostic methods for some common organisms.
- With immunosuppression, common human pathogens can be expected.
- Decisions regarding PERV's and PCMV in each trial. Some unexpected swine pathogens may be present -- high throughput sequencing tools available.
- Need archiving of donor and recipient specimens for epidemiologic studies
- **Advantages:** Resistance of porcine xenograft cells to human viruses (HIV, HCV, HBV)
- **Will only understand risk when data from clinical trials emerge.**



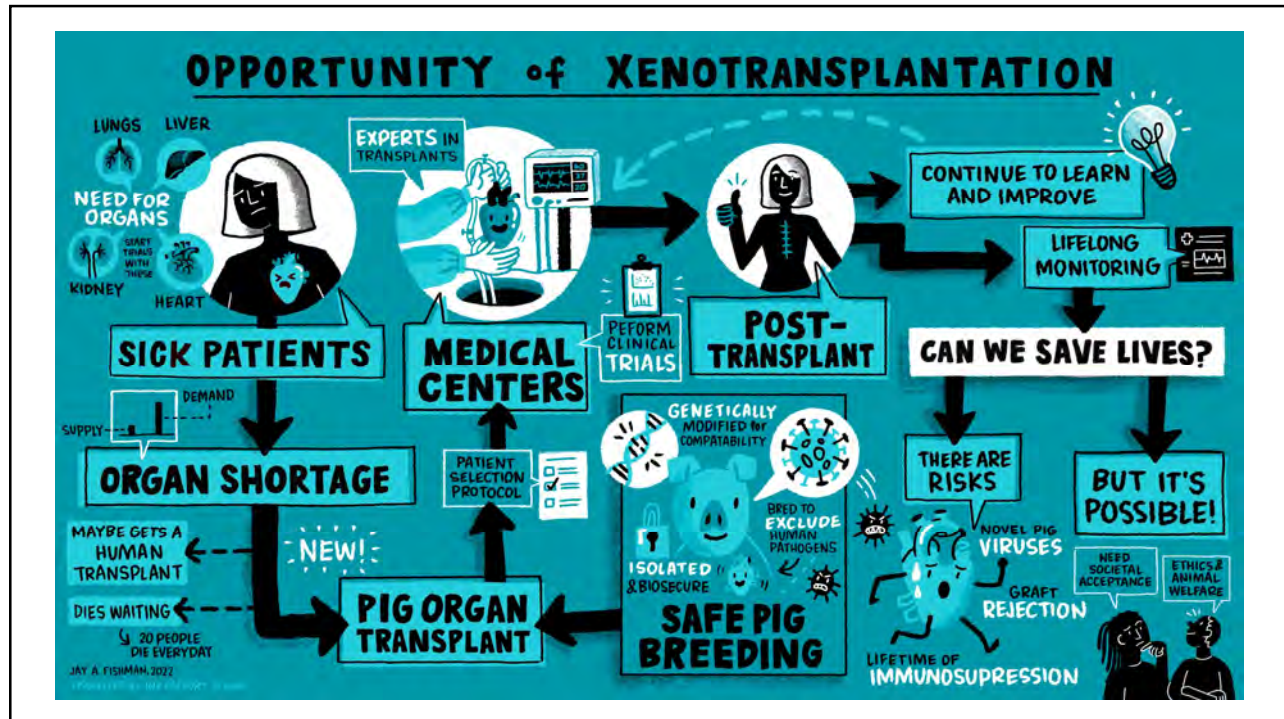
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AST Infectious Disease  
Community of Practice



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Thank you.  
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