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공학박사 학위논문

**Development of spleen targeting H<sub>2</sub>S  
donating liposome for therapeutic  
immunomodulation of inflammatory  
bowel disease**

대장염의 치료적 면역조절을 위한 비장 표적  
황화수소 공여 리포솜의 개발

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**Development of spleen targeting H<sub>2</sub>S donating  
liposome for therapeutic immunomodulation of  
inflammatory bowel disease**

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## **Abstract**

### **Development of spleen targeting H<sub>2</sub>S donating liposome for therapeutic immunomodulation of inflammatory bowel disease**

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Nanoparticles systemically administrated are mostly ingested by immune cells of mononuclear phagocyte system (MPS) related organs. Among MPS related organs, the spleen filters the pathogens and is involved in systemic immunity. Thus, there have been studies to develop spleen targeting nanoparticles for systemic immune modulation of tumor or inflammatory diseases. Inflammatory bowel disease (IBD) is characterized by chronic inflammation in the gastrointestinal tract and is considered incurable despite many treatment options including immunomodulators. Hydrogen sulfide (H<sub>2</sub>S), one of gasotransmitters, involved in various anti-inflammatory related processes, and have shown therapeutic potential in various



inflammatory disease models including IBD. However, systemically injected hydrogen sulfide donors have high reactivity and are difficult to deliver specifically.

Herein, we developed H<sub>2</sub>S donor delivering liposome for spleen targeting (ST-H<sub>2</sub>S lipo) and studied its immune modulation and therapeutic potential in dextran sulfate sodium (DSS) induced colitis model. In part 1 (chapter 2), we compared liposomes with different polyethylene glycol (PEG) types and ratios to find the liposome which has high loading efficiency, stability, and the ability of spleen targeting. In in vitro studies, H<sub>2</sub>S lipo showed significantly higher H<sub>2</sub>S release ability and immune modulatory effect than those of unloaded H<sub>2</sub>S donor. In in vivo studies, ST-H<sub>2</sub>S lipos demonstrated substantial splenic accumulation and potent immune modulatory effects. In part 2 (chapter 3), ST-H<sub>2</sub>S lipo and conventional long-circulating liposomes loaded with H<sub>2</sub>S donors (LC-H<sub>2</sub>S lipo) could reduce the inflammation degree of colitis model whereas unloaded H<sub>2</sub>S donors could not. Moreover, ST-H<sub>2</sub>S lipo showed significantly higher therapeutic effects than LC-H<sub>2</sub>S lipo, which can be attributed to the systemic immunomodulatory effect of ST-H<sub>2</sub>S lipo. Our results illustrate that spleen targeting H<sub>2</sub>S lipo may be a new treatment option for IBD.

**Keyword: Nanoparticle, Spleen targeting, H<sub>2</sub>S, IBD, Anti-inflammation,  
Systemic immune modulation**  
**Student Number: 2018-21910**

## Table of Contents

<b>Abstract .....</b>	<b>i</b>
<b>List of Figures .....</b>	<b>vii</b>
<b>List of Tables .....</b>	<b>x</b>
<b>List of Abbreviation.....</b>	<b>xi</b>
<b>Chapter 1. Introduction .....</b>	<b>17</b>
1.1 Inflammatory bowel diseases (IBD) .....	18
1.2 Hydrogen sulfide (H <sub>2</sub> S).....	22
1.3 Spleen targeting nanoparticle .....	26
1.4 Research Objectives .....	35
<b>Chapter 2. Development of spleen targeting H<sub>2</sub>S donating liposome .</b>	<b>37</b>
2.1 Backgrounds.....	38
2.2 Material and methods .....	48
2.2.1 Materials.....	48
2.2.2 Synthesis of H <sub>2</sub> S lipo .....	49
2.2.3 Detection of H <sub>2</sub> S release from H <sub>2</sub> S lipo.....	50
2.2.4 Size stability and loading efficiency of H <sub>2</sub> S lipos.....	53
2.2.5 In vitro experiments using H <sub>2</sub> S lipo .....	53
2.2.6 The Comparison of in vitro H <sub>2</sub> S release between various PEGylation strategies of H <sub>2</sub> S lipo .....	54
2.2.7 The cell viability assessment after treating H <sub>2</sub> S lipo.....	55
2.2.8 Radiolabeling method of H <sub>2</sub> S lipo .....	55
2.2.9 In vivo PET images of radiolabeled H <sub>2</sub> S lipo. ....	56
2.2.10 Flowcytometry .....	57
2.3 Results and discussion.....	59
2.3.1 Identification of ideal composition of H <sub>2</sub> S lipo .....	59
2.3.2 In vitro H <sub>2</sub> S releasing and immune modulatory effects of H <sub>2</sub> S lipo	

.....	66
2.3.3 Assessment of the spleen targeting ability of H <sub>2</sub> S lipo .....	77
2.3.4 The in vivo analysis of splenic T <sub>reg</sub> differentiation by ST-H <sub>2</sub> S lipo .....	78
2.3.5 Reflecting properties of PEG in H <sub>2</sub> S lipos .....	83
2.4 Summary .....	85

### **Chapter 3. Therapeutic effect of the systemic immune modulator in the**

<b>colitis model .....</b>	<b>86</b>
3.1 Backgrounds.....	87
3.2 Material and methods .....	90
3.2.1 Transcriptomics-level analysis of gasotransmitters .....	90
3.2.2 In vivo biodistribution of fluorescent H <sub>2</sub> S lipo in DSS induced colitis model .....	91
3.2.3 Animals and DSS induced colitis model.....	91
3.2.4 DSS induced colitis model treatment.....	92
3.2.5 Immunofluorescence .....	95
3.2.6 Statistical analyses.....	95
3.2.7 Comparison of H&E-stained images and fluorescent images.....	96
3.3 Results and discussion.....	97
3.3.1 Transcriptomics-level evidence for the potential of H <sub>2</sub> S based therapeutics in ulcerative colitis.....	97
3.3.2 In vivo biodistribution of H <sub>2</sub> S lipo in a colitis model .....	103
3.3.3 Therapeutic effect of H <sub>2</sub> S lipo in the colitis model .....	108
3.3.4 Comparison of therapeutic effect of colitis model between ST-H <sub>2</sub> S lipo and LC-H <sub>2</sub> S lipo.....	118
3.3.5 Therapeutic potential of various spleen targeting nanoparticles .....	133
3.3.6 Possibility of H <sub>2</sub> S lipo as a new clinical immunomodulator in IBD .....	138

3.4 Summary .....	141
<b>Chapter 4. Conclusion.....</b>	<b>142</b>
<b>References.....</b>	<b>146</b>
<b>Abstract in Korean .....</b>	<b>162</b>

## List of Figures

<b>Figure 1.1</b>	Inflammatory Bowel Disease (IBD) .....	20
<b>Figure 1.2</b>	Hydrogen sulfide (H <sub>2</sub> S) involving various physiological processes .....	24
<b>Figure 1.3</b>	Schematic illustration of the H <sub>2</sub> S lipo treatment in DSS induced colitis model.....	36
<b>Figure 2.1</b>	H <sub>2</sub> S related anti-inflammatory responses .....	40
<b>Figure 2.2</b>	Spleen's structure and roles of various splenic immune cells .....	44
<b>Figure 2.3</b>	Mononuclear phagocyte system (MPS) .....	47
<b>Figure 2.4</b>	Released H <sub>2</sub> S detection method .....	51
<b>Figure 2.5.</b>	Gating Strategy of flow cytometry .....	58
<b>Figure 2.6</b>	The scheme of H <sub>2</sub> S lipo composition, the comparison of loading efficiency, and the comparison of surface net charge .....	62
<b>Figure 2.7</b>	The stability test of H <sub>2</sub> S lipo with different PEGylation strategies .....	63
<b>Figure 2.8</b>	The cell viability test and Cryo-TEM images of H <sub>2</sub> S lipo ..	64
<b>Figure 2.9</b>	The fluorescence images of released H <sub>2</sub> S by H <sub>2</sub> S lipos .....	67
<b>Figure 2.10</b>	The cell uptake images of H <sub>2</sub> S lipo .....	69
<b>Figure 2.11.</b>	Morphological analysis of M2 macrophage differentiation .....	70
<b>Figure 2.12</b>	Radiochemical stability test of <sup>64</sup> Cu-H <sub>2</sub> S lipo.....	73
<b>Figure 2.13</b>	The in vivo PET images of <sup>64</sup> Cu radiolabeled H <sub>2</sub> S lipo .....	74
<b>Figure 2.14</b>	The time activity curve graphs of blood pool and indicate circulation half-life .....	75
<b>Figure 2.15</b>	Quantitative analysis of in vivo PET images .....	76
<b>Figure 2.16</b>	In vivo experiments of spleen targeting ability .....	79

<b>Figure 2.17</b>	T <sub>reg</sub> cell differentiation in spleen .....	81
<b>Figure 3.1</b>	The schematic design of therapeutic experiments in DSS induced colitis model.....	94
<b>Figure 3.2</b>	The RNA expression analysis of enzymes related with H <sub>2</sub> S in both DSS induced colitis model and ulcerative colitis patients.....	99
<b>Figure 3.3</b>	The RNA expression analysis of enzymes related with NO and CO.....	101
<b>Figure 3.4</b>	The ex vivo biodistribution in DSS induced colitis model .....	105
<b>Figure 3.5</b>	Analysis using images of fluorescent H <sub>2</sub> S lipo and H&E images.....	107
<b>Figure 3.6</b>	The comparison of weight change (%) between normal, saline, GYY4137, and H <sub>2</sub> S lipo.....	111
<b>Figure 3.7</b>	The comparison of inflammatory process between normal, saline, GYY4137, and H <sub>2</sub> S lipo.....	112
<b>Figure 3.8</b>	Alcian blue colon staining of treatment of DSS induced colitis model .....	113
<b>Figure 3.9</b>	The comparison of colon lengths between normal, saline, GYY4137, and H <sub>2</sub> S lipo.....	114
<b>Figure 3.10</b>	Gating Strategy of flow cytometry.....	115
<b>Figure 3.11</b>	The comparison of systemic immune modulation effects between normal, saline, GYY4137, and H <sub>2</sub> S lipo using the dot plot of flow cytometry .....	117
<b>Figure 3.12</b>	The comparison of weight change (%) between normal, saline, ST-H <sub>2</sub> S lipo, and LC-H <sub>2</sub> S lipo.....	122
<b>Figure 3.13</b>	The comparison of inflammatory process between normal, saline, LC-H <sub>2</sub> S lipo, ST-H <sub>2</sub> S lipo .....	123
<b>Figure 3.14</b>	Representative H&E images about general criteria of histomorphology scores for colitis model .....	124

<b>Figure 3.15</b>	The comparison of colon lengths between normal, saline, LC-H <sub>2</sub> S lipo, ST-H <sub>2</sub> S lipo.....	125
<b>Figure 3.16</b>	Comparison of in vivo immune cell differentiation between ST-H <sub>2</sub> S lipo and LC-H <sub>2</sub> S lipo in spleen.....	126
<b>Figure 3.17</b>	Immunofluorescence images of FOXP3 differentiation in spleen and colon .....	128
<b>Figure 3.18</b>	Plasma cytokine analysis in the treatment of comparison between ST-H <sub>2</sub> S lipo and LC-H <sub>2</sub> S lipo.....	130
<b>Figure 3.19</b>	H&E staining of extracted organs in the treatment of comparison between ST-H <sub>2</sub> S lipo and LC-H <sub>2</sub> S lipo .....	132



## List of Tables

<b>Table 1</b>	Varied response rate of newer immunomodulators .....	21
<b>Table 2</b>	Treatment studies using H <sub>2</sub> S donors .....	25
<b>Table 3</b>	Various spleen targeting strategies .....	31
<b>Table 4</b>	Strategies for targeting nanoparticles to specific splenic immune cells .....	33
<b>Table 5</b>	The stability test of H <sub>2</sub> S lipo with different PEGylation strategies .....	65
<b>Table 6</b>	The table of time activity curve data.....	77
<b>Table 7</b>	Therapeutic potential of various spleen targeting nanoparticles .....	136

## List of Abbreviation

<i>Full name</i>	<i>Abbreviations</i>
%ID/g	Percentage of the injected dose per tissue weight
(p-SCN-Bn)-NOTA	2-(p-Isothiocyanatobenzyl)-1,4,7-triazacyclononane-N,N',N'-triacetic acid trihydrochloride
<sup>64</sup> Cu-H <sub>2</sub> S lipo	<sup>64</sup> Cu radiolabeled H <sub>2</sub> S lipo
Ag	Antigen
AgNO <sub>3</sub>	Silver nitrate
AgS	Silver sulfide
AHR	Air hyperresponsiveness
AmB	Amphotericin B
ANOVA	One-way analysis of variance
APCs	Antigen presenting cells
APCs	Antigen presenting cells
APOA1	Apolipoprotein A1
AUC	Area under curve
CBS	Cystathionine-beta-synthase
CNP	Chitosan nanoparticle

COVID-19	Coronavirus disease 2019
COX-2	Cyclooxygenase-2
CRP	C-reactive protein
CTH	Cystathionine-gamma-lyase
CTL	Cytotoxic T lymphocyte
DC	Dendritic cells
DC-SIGN	Dendritic cell-specific intercellular adhesion molecule-3-grabbing non- integrin
DDAB	Dimethyldioctadecylammonium
DIPEA	N,N-Diisopropylethylamine
DIPEA	N,N-Diisopropylethylamine 1,1'-dioctadecyl-3,3,3',3'-
DiR	tetramethyl-indotricarbocyanine iodide
DLS	Dynamic scattering light
DMG-PEG	PEGylation of myristoyl diglyceride
DMPC	1,2-dimyristoyl-sn-glycero-3- phosphocholine
DODAP	1,2-dioleoyl-3-dimethylammonium- propane
DOPE	Dioleoylphosphatidylethanolamine

DOTAP	1,2-Dioleoyl-3-trimethylammoniumpropane
DSPC	Distearoyl phosphatidylcholine
DSPE-PEG2k	1,2-Distearoyl-sn-glycero-3-phosphoethanolamine (methoxy(polyethylene glycol)-2000)
DSPE-PEG2K-NH <sub>2</sub>	1,2-Distearoyl-sn-glycero-3-phosphoethanolamineN-[amino(polyethylene glycol)-2000]
DSS	Dextran sulfate sodium
EAE	Encephalomyelitis
FITC	Fluorescein 5(6)-isothiocyanate
FOXP3	Forehead box P3
H <sub>2</sub> S	Hydrogen sulfide
H <sub>2</sub> S lipo	H <sub>2</sub> S donor, GYY4137, loaded liposome
HEPC	Hydrogenated egg phosphatidylcholine
HMOXs	Ham oxygenases
IBD	Inflammatory bowel disease
IFN- $\gamma$	Interferon- $\gamma$

IL	Interleukin
IL-10	Interleukin-10
iNOS	Inducible nitric oxide synthase
JAK	Janus kinase
LC-H <sub>2</sub> S lipo	Conventional long-circulating liposomes with H <sub>2</sub> S donors
LNPs	Lipid nanoparticles
MHPC	1-myristoyl-2-hydroxy-sn-glycero-phosphocholine
MI	Myocardial infarct
MPS	Mononuclear phagocyte system
MPST	3-mcaptopyruvate sulfurtransferase
mTOR	Rapamycin
MTT	3-[4,5-dimethylthiazol-2-yl]-2,5-diphenyltetrazolium bromide reagent
MZ	Marginal zone
NF-κB	Nuclear factor-κB
NOSs	NO synthases
NPSCs	Nanoparticle-stabilized nanocapsules
NSAIDs	Nonsteroidal anti-inflammatory drugs

O.D	Optical density
PBS	Phosphate buffered saline
pDNA	Plasmid DNA
PEG	Polyethylene glycol
PEG-b1-PPS	poly(ethylene glycol)-bl- poly(propylene sulfide)
PET	Positron emission tomography
PFA	Paraformaldehyde
PHPC	1-palmitoyl-2-hydroxy-sn-glycero- 3-phosphocholine
PLA	Poly(DL-lactide)
PLG-H	Poly(DL-lactide-co-glycolide) with high molecular weights
PLGA	Poly(lactide-coglycolide)
POPC	1-palmitoyl-2-oleoyl-sn-glycero-3- phosphocholine
PPAR $\gamma$	Peroxisome proliferator-activated receptor gamma
PS	Phosphatidylserine
RBC	Red blood cell
RNA-LPX	RNA-lipoplex
ROI	Region of interest

ROS	Reactive oxygen species
RP	Red pulp
S6K1	S6 kinase-1
SCNPs	4-sulfated N-acetyl galactosamine conjugated chitosan nanoparticles
siRNA	Short interfering RNA
sLNPs	Solid lipid nanoparticles
SORT	Selective organ targeting
SPF	Specific pathogen free
ST-H <sub>2</sub> S lipo	H <sub>2</sub> S donor delivering liposome for spleen targeting
SUV	Standard uptake value
SUV	Standard uptake value
TEM	Transmission microscopy
TET	Ten-eleven translocation protein
TLC	Thin layer chromatography
TNF	Tumor necrosis factor
TPP	Sodium tripolyphosphate
T <sub>reg</sub>	Regulatory T cells
UC	Ulcerative colitis
WP	White pulp
αGC	α-galactosylceramide

## **Chapter 1.**

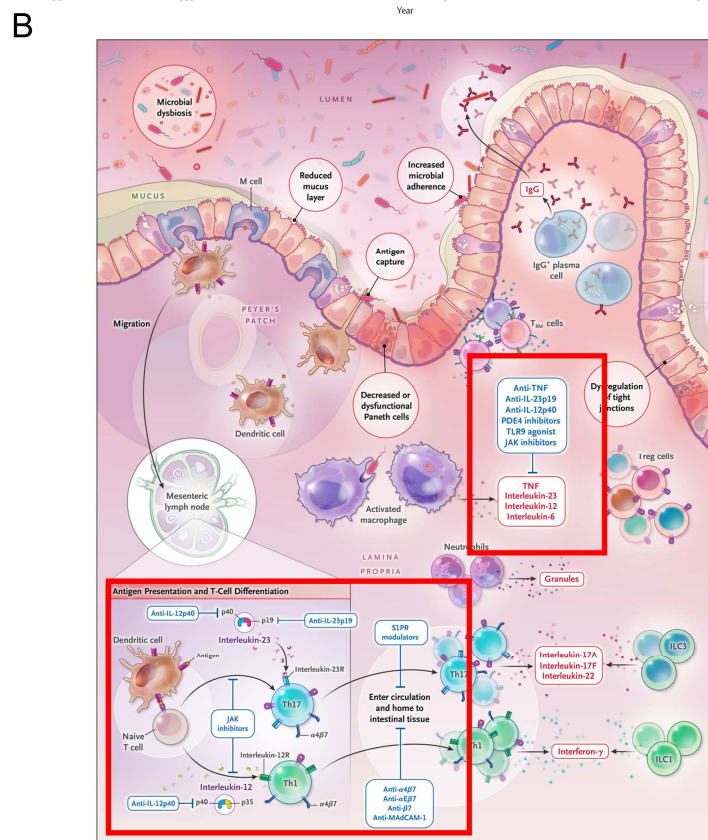
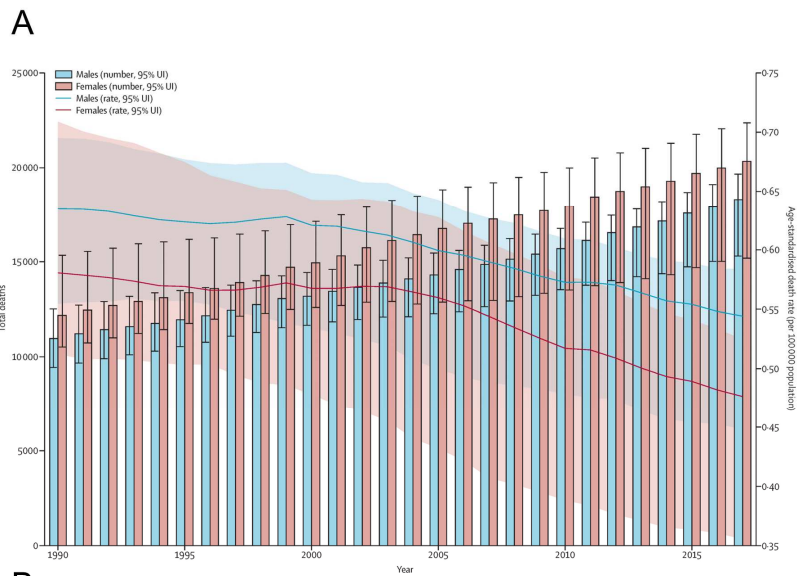
### **Introduction**



## 1.1 Inflammatory bowel diseases (IBD)

IBD, which consists of ulcerative colitis and Crohn's disease, is characterized by a chronic incurable inflammatory process in the gastrointestinal tract with an uncertain pathophysiology (1, 2). IBD is one of the growing global health problems with 6.8 million cases in 2017 globally, and its prevalence rate is increasing from 79.5 among 100,000 in 1990 to 84.3 among 100,000 in 2017 (**Figure 1.1A**) (3). Although the mechanism of IBD has not been clearly identified, it is reported that abnormalities in immune regulation, genetic susceptibility, changes in the intestinal microflora, and environmental factors are associated with its pathophysiology (4, 5). Therapeutic options for IBD include conventional anti-inflammatory agents such as 5-aminosalicylate, steroids, newer immunomodulatory agents such as tumor necrosis factor (TNF)-alpha antagonist, anti-interleukin (IL) 23 and IL12 agents, and Janus kinase (JAK) inhibitors (**Figure 1.1B**) (6). These newer immunomodulatory agents have shown an efficacy in patients who did not respond to the conventional agents; however, the response rates have widely varied from 16~70% and 10~15% in patients who eventually underwent a colectomy due to refractory disease (**Table 1**) (7). Furthermore, these immunomodulatory agents can

increase the probability of opportunistic infections due to immune suppression (6, 8-10).



**Figure 1.1** Inflammatory Bowel Disease (IBD) A. Increase of the IBD related deaths. From reference (3). B. Pathophysiology of IBD. From reference (5).

Drugs	Target	Efficacy(%)
Infliximab	TNF- $\alpha$	69.4
		45.5
Adalimumab	TNF- $\alpha$	18.5
		16.5
		17.3
Golimumab	TNF- $\alpha$	51
Vedolizumab	Adhesion-molecules	47.1
		44.8
Etrolizumab	Adhesion-molecules	21
Tofacitinib	JAK	78

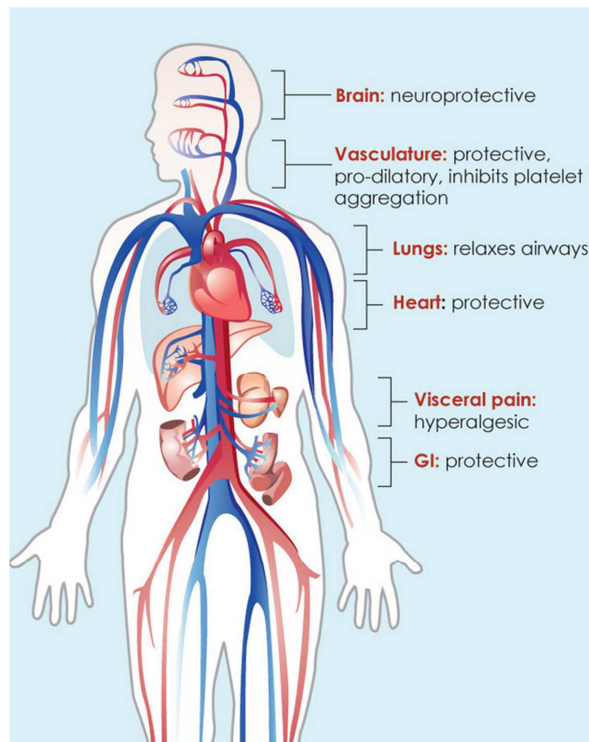
**Table 1** Varied response rate of newer immunomodulators.

From reference (7)

## 1.2 Hydrogen sulfide (H<sub>2</sub>S)

Hydrogen sulfide (H<sub>2</sub>S) is one of the endogenous gasotransmitters that involves various physiological processes (11, 12). Because H<sub>2</sub>S has a crucial role in the homeostasis of multiple physiological functions, abnormally decreased or increased H<sub>2</sub>S levels are associated with multiple diseases including hypertension (13), atherosclerosis (14), diabetes (15), and gastrointestinal disorders (16) (**Figure 1.2**). In particular, H<sub>2</sub>S has pronounced anti-inflammatory and cytoprotective effects in the gastrointestinal tract; therefore, H<sub>2</sub>S donors are considered promising treatment agents in various gastrointestinal diseases. Additionally, several studies have demonstrated that a H<sub>2</sub>S donor that escalates the H<sub>2</sub>S level in tissues elicited notable therapeutic effects in a gastritis or colitis model (17-19). However, in previous studies, H<sub>2</sub>S donors were administered directly as an experiment to demonstrate proof-of-concept for H<sub>2</sub>S treatment, and studies on the development drug delivery systems for H<sub>2</sub>S donors are lacking. An adequate drug delivery system for a H<sub>2</sub>S donor is needed because direct administration has the following limitations: 1) it may not be suitable for clinical translation because local administration needs an expansive and cumbersome procedure such as endoscopy; 2) H<sub>2</sub>S donors are not stable after they are dissolved in solution, and 3) a systemic

immunomodulation effect is less likely when it is administered locally  
**(Table 2).**



**Figure 1.2** Hydrogen sulfide (H<sub>2</sub>S) involving various physiological processes. From reference (11)

<b>Disease model</b>	<b>Administration</b>	<b>Drugs</b>	<b>Inflammatory processes</b>	<b>References</b>
Gastric ulcer	Intragastric	ATB-429	Not mentioned	(19)
Colitis	Intracolonic	Diallyl disulfide	Not mentioned	(17)
Colitis	Intracolonic	NaHS or Lawesson's reagent	COX-2	(18)
Acute joint inflammation	Intraperitoneal	GY4137	IL-1 $\beta$ /6/8, TNF- $\alpha$	(20)
Asthma	Intraperitoneal	NaHS	IL-5/13	(21)
Myocardial infarction	Intraperitoneal	NaHS	M2 macrophage	(22)
Obesity-induced kidney injury	Intraperitoneal	NaHS	IL-6/10, MCP-1	(23)
Acute lung injury	Intraperitoneal	NaHS	IL-6/8/10	(24)
Diaphragm dysfunction	Intraperitoneal	NaHS	NF- $\kappa$ B, ROS	(25)

**Table 2** Treatment studies using H<sub>2</sub>S donors



### 1.3 Spleen targeting nanoparticles

The majority of nanoparticles that are systematically injected are captured by immune cells including macrophages, dendritic cells, and lymphocytes (26-28). Therefore, nanoparticles are considered highly suitable drug delivery vehicles for immunomodulation in various types of diseases. In particular, there have been studies utilizing spleen-targeting nanoparticles for immunomodulation (29) because the spleen is the largest lymphatic organ and modulates immune responses locally and systemically in the body (**Table 3**) (30). For example, Zhai et al. developed a spleen targeting cancer nano-vaccine based on the damaged membrane of red blood cells (29). Kranz et al. developed RNA-lipoplex (RNA-LPX) with a net charge suitable for DCs targeting (31). LoPresti et al. studied the lipid types of lipid nanoparticles (LNPs) suitable for spleen targeting. It was identified that LNP using phosphatidylserine (PS) is 24-fold higher spleen accumulation than that of using dioleoylphosphatidylethanolamine (DOPE) (32). Schmid et al. reported that anti-CD8 antibody labeled nanoparticles can be used as immune cell targeting delivery vehicles for cancer immunotherapy (33). Sago et al. identified ratios and compositions of LNP suitable for spleen targeting among over 250 compositions of LNPs using a high throughput method which is selectively read functional mRNA delivery (34). Kimura et

al. demonstrated high loading efficiency of plasmid DNA (pDNA) and spleen targeting efficiency by using a certain ratio of 1,2-dioleoyl-3-dimethylammonium-propane (DODAP), an ionizable lipid, and DOPE, a helper lipid (35). Kimura et al. reported double coating method using a specific ratio of pH-responsive ionizable lipid and octaarginine peptide as a spleen targeting strategy (36). Cheng et al developed selective organ targeting (SORT), a strategy to target specific organ by adding supplementary components to LNPs. They demonstrated the higher the molar percentage of 1,2-Dioleoyl-3-trimethylammoniumpropane (DOTAP), the more it accumulates in spleen than in liver (37). Alvarez-benedicto et al. reported that the more negatively charged LNPs were, the more they accumulated in the spleen than the liver (38). Ye et al. developed a solid lipid nanoparticles (sLNPs) for passive spleen targeting. sLNPs with specific ratios of stearic acid, soya lecithin, and poloxamer 188 has characteristics of high spleen targeting efficiency (39). Li et al. identified the appropriate PEG length for spleen targeting glabridin loaded nanoparticles by comparing various PEG lengths (40). Yi et al. reported the polymersome as the most suitable form for spleen targeting through a comparison of morphological structures composed of poly(ethylene glycol)-bl-poly(propylene sulfide) (PEG-bl-PPS) block copolymers (41). Several

studies have studied the ratio of composition of nanoparticles suitable for spleen targeting. In addition, various spleen targeting strategies including appropriate PEG length, lipid type, surface charge, and morphological structure have been reported.

Among spleen targeting strategies, there have been studies to develop nanoparticles targeting specific splenic immune cells for immune modulation (**Table 4**). Shimizu et al. reported that a large amount of antigen (Ag) encapsulated in PEGylated liposome (PL) was delivered to splenic B cell in marginal zone by pre-injecting empty PL (42). Fenton et al. reported that mRNA encapsulated in LNPs was successfully delivered to splenic B cells using organ-specific degradability of ionizable lipid including degradable linkages (43). Jeught et al. synthesized a hybrid mRNA nanoparticle (lipopolyplex) with a trimannose sugar tree and demonstrated that the nanoparticle induced antitumor T-cell immunity by delivering mRNA to splenic dendritic cells (DC) without causing an inflammatory response (44). Maldonado et al. reported dendritic cell targeting through intravenously injecting tolerogenic nanoparticles which improve immune tolerance (45). Stead et al. developed porous silicon nanoparticles containing c-type lectin, dendritic cell-specific intercellular adhesion molecule-3-grabbing non-integrin (DC-SIGN), and CD11c antibody to

deliver immunosuppressive drugs to DC (46). Leuschner et al. developed LNPs carrying CCR2-silencing short interfering RNA (siRNA). the LNP suppressed CCR2 expression by targeting inflammatory monocytes, resulting in blocking localization to inflammatory sites (47). Tripathi et al. developed 4-sulfated N-acetyl galactosamine conjugated chitosan nanoparticles (SCNPs) for targeting splenic macrophage (48). Jiang et al. developed the nanoparticle-stabilized nanocapsule for cytosolic siRNA delivery to splenic macrophages. After intravenously injection of the NPSCs, inflammation in mice was alleviated by silencing TNF- $\alpha$  expression (49). Van leent et al. delivered rapamycin (mTOR) inhibitor and ribosomal protein S6 kinase-1 (S6K1) inhibitor to myeloid cell using apolipoprotein A1 (APOA1) based nanobiologics. As a result, the inflammatory response of macrophages in the plaque was reduced (50). Saito et al developed a drug-free biodegradable nanoparticle targeting inflammatory monocytes and neutrophils. The nanoparticle composed of 50:50 poly(DL-lactide-co-glycolide) with high molecular weights (PLG-H) alleviated the inflammation by monocyte and neutrophil after intravenously injection (51). To summarize, several studies developed nanoparticles with targeting moieties for splenic immune cells and showed therapeutic potential in various diseases, including inflammatory diseases and tumors.

Nanoparticles	Targeting strategies	Preparation methods	Composition	Size	Zeta potential	Spleen targeting efficiency (%)	Ref
iPSC@RBC Mlipo	Including damaged RBC membrane	Extrusion	DPPC, cholesterol, DDAB, mannose lipid, $\alpha$ -tocopherol, DSPE-PEG <sub>2000</sub>	184	4.7	160	(29)
RNA-LPX	Negatively charged LNP	Pipetting or vortex-mixing	Cationic lipid: DOTMA, helper lipid: DOPE, cholesterol	200-320	- 30	N/M	(31)
Anionic LNP	Using the anionic helper lipid	Vortex-mixing	Lipidoid, PS, cholesterol, C <sub>14</sub> -PEG <sub>2000</sub>	N/M	- 6	300	(32)
7C3 LNP	Fining the ideal composition and ratio	Microfluidic-mixing	7C3, DOPE, cholesterol C <sub>14</sub> -PEG <sub>2000</sub>	Around 60	NM	50	(34)
DODAP-LNP	Lipid combination	Vortex-mixing	DODAP, DOPE, cholesterol, DMG-PEG	221 $\pm$ 27.8	- 30 $\pm$ 11.5	69	(35)
MEND	Double coating	Sonication	DOPE, DOTAP, YSK05, STR-R8, DMG-PEG	201 $\pm$ 32	- 21.5 $\pm$ 4.2	170	(36)
SORT LNP	Adding a supplementary molecule	Ethanol dilution method	18PA, 5A2-SC8, DOTAP, DOPE, DMG-PEG	142.1	- 2.11	150	(37)
SORT LNP	Selecting the appropriate phospholipid	Pipetting	BMP,4A3-SC8, DOPE, DMG-PEG	Around 140	Around - 4	488	(38)

Nanoparticles	Targeting strategies	Preparation methods	Composition	Size	Zeta potential	Spleen targeting efficiency (%)	Ref
Actarit loaded SLNs	Passive targeting to RES organs	Modified solvent diffusion-evaporation	Stearic acid, soya lecithin, poloxamer 188	241 ± 23	-17.14 ± 1.6	120	(39)
Gla-loaded nanoparticle	Ideal PEG size	Double emulsion	DSPE-PEG <sub>5000</sub>	80.67 ± 5.71	-3.57 ± 0.12	150	(40)
PS	Changing the nanostructure morphology	Controlled self-assembly	PEG-bl-PPS	113.7	- 0.2 ± 1.68	16.7	(41)

**Table 3** Various spleen targeting strategies. Spleen targeting efficiency (%) is calculated by the (spleen uptake of the nanoparticle/ the liver uptake of the nanoparticle) × 100. iPSC@RBC-Mlipo: iPSCs encapsulated in coalescent erythrocyte-liposome, DPPC: The phospholipid 1,2-dihexadecanoyl-sn-glycero-3-phosphocholine, DDAB: Dimethyldioctadecylammonium, DSPE: 1,2- Distearoyl-sn-glycero-3-phosphoethanolamine, PEG: polyethylene glycol, RNA-LPX: RNA-lipoplexes, DOTMA: N-[1-(2,3-Dioleoyloxy)propyl]-N,N,N-trimethylammonium, PS: phosphatidylserine, SORT: selective organ targeting DOPE: dioleoylphosphatidylethanolamine, DOTAP: 1,2-Dioleoyl-3-trimethylammoniumpropane, DMG-PEG: PEGylation of myristoyl diglyceride, Gla: glabridin, PEG-bl-PPS: poly(ethylene glycol)-bl-poly(propylene sulfide).

Targeted splenic immune cells	NP Type	Targeting composition of NP	Encapsulated reagents	Composition	Targeted disease	Spleen targeting efficiency (%)	Ref
<b>B cells</b>	liposome	DSPE-PEG <sub>2000</sub>	$\alpha$ GC, OVA	HEPC, DSPE-PEG <sub>2000</sub> ,	Tumor	Not mentioned	(42)
<b>B cells</b>	LNP	OF-Deg-Lin	mRNA	OF-Deg-Lin, DOPE, C <sub>14</sub> -PEG <sub>2000</sub>	N/A	81	(43)
<b>DC</b>	LNP	TriMan-Lip	mRNA/PEG-HpK polyplexs	TriMan-Lip, Lip1, Lip2	Tumor	Not mentioned	(44)
<b>DC</b>	PLGA	N/A	Rapamycin, OVA <sub>323-339</sub>	PLGA, OVA	Encephalomyelitis Hemophilia A	128	(45)
<b>DC</b>	Silicon NP	CD11c DC-SIGN	Rapamycin, OVA <sub>323-339</sub>	Silicon	N/A	52.1	(46)
<b>Monocyte</b>	LNP	N/A	CCR2-siRNA	C12-200, DSPC, DMG-PEG	Atherosclerosis Pancreatic islet transplantation Tumor	296	(47)
<b>Macrophage</b>	CNP	4-SO <sub>4</sub> GalNAc	AmB	Chitosan, TPP	Leishmaniasis	50.9	(48)

Targeted splenic immune cells	NP Type	Targeting composition of NP	Encapsulated reagents	Composition	Targeted disease	Spleen targeting efficiency (%)	Ref
<b>Macrophage</b>	NPSCs	N/A	si_TNF- $\alpha$	Linoleic acid, Arg-AuNP	LPS induced inflammation	44	(49)
			si_GADPH				
<b>Myeloid cells</b>	Lipid based NP	APOA1	mTORi	MHPC, DMPC	Atherosclerosis	66.7	(50)
			S6K1i	POPC, PHPC			
<b>Neutrophil</b>	PLGA	PLG-H	N/A	PLA, PLG-H	Encephalomyelitis	14.3	(51)
<b>Monocyte</b>							

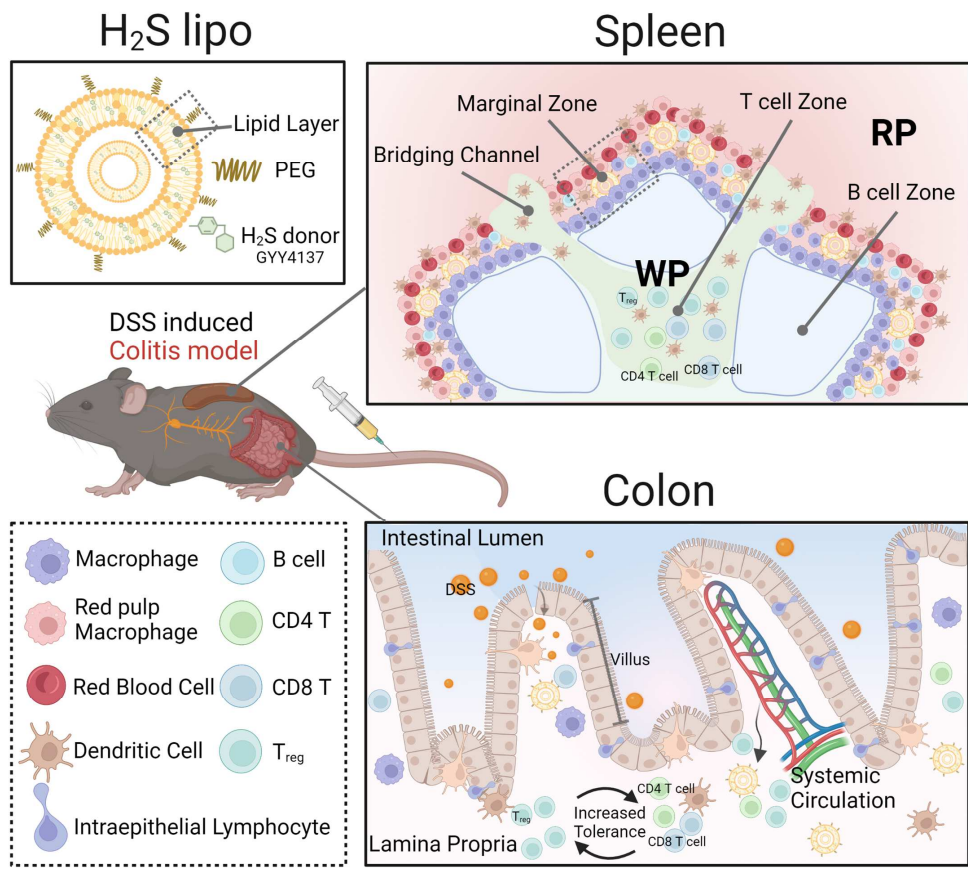
**Table 4** Strategies for targeting nanoparticles to specific splenic immune cells. Spleen targeting efficiency (%) is calculated by the  $(\text{spleen uptake of the nanoparticle} / \text{the liver uptake of the nanoparticle}) \times 100$ . DPSE: phosphatidylethanolamine, PEG: Poly(ethylene glycol),  $\alpha$ GC:  $\alpha$ -galactosylceramide, HEPC: Hydrogenated egg phosphatidylcholine, LNP: lipid nanoparticle, OF-Deg-Lin: the ionizable lipid designed to include degradable linkages, DOPE: dioleoylphosphatidylethanolamine, TriMan-Lip: trimannosyl diether lipid. Lip1: O,O-dioleyl-N-[3N-(N-methylimidazolium iodide)propylene] phosphoramidate, Lip2: O,O-dioleyl-



N-histamine phosphoramidate, PLGA: poly(lactide-coglycolide), DC-SIGN: dendritic cell-specific intercellular adhesion molecule-3-grabbing non-integrin, DMG-PEG: PEGylation of myristoyl diglyceride, DPSC: 1,2-distearoyl-sn-glycero-3-phosphocholine, CNP: chitosan nanoparticle, 4-SO<sub>4</sub> GalNAc: 4-sulfated N-acetyl galactosamine, AmB: amphotericin B, TPP: Sodium tripolyphosphate, NPSCs: nanoparticle-stabilized nanocapsules, APOA1: apolipoprotein A1, MHPC: 1-myristoyl-2-hydroxy-sn-glycero-phosphocholine, DMPC: 1,2-dimyristoyl-sn-glycero-3-phosphocholine, POPC: 1-palmitoyl-2-oleoyl-sn-glycero-3-phosphocholine, PHPC: 1-palmitoyl-2-hydroxy-sn-glycero-3-phosphocholine, PLG-H: 50:50 poly(DL-lactide-co-glycolide) with high molecular weights, PLA: poly(DL-lactide).

## 1.4 Research objectives

We developed H<sub>2</sub>S donor, GYY4137, loaded spleen-targeting liposomes and tested their immunomodulatory properties in a dextran sulfate sodium induced mouse colitis model (**Figure 1.3**). Based on the anti-inflammatory effect of the H<sub>2</sub>S donor and the intrinsic immune cell targeting ability of the nanoparticles, we hypothesized that 1) liposomal delivery of the H<sub>2</sub>S donor would elicit a higher immunomodulation effect compared to the unloaded H<sub>2</sub>S donor and that 2) delivery of the H<sub>2</sub>S donor using spleen-targeting liposomes would show a better immunomodulatory effect compared to the conventional long circulating liposome loaded H<sub>2</sub>S donor.



**Figure 1.3** Schematic illustration of the H<sub>2</sub>S lipo treatment in DSS induced colitis model. Immune responses according to H<sub>2</sub>S lipo of spleen and colon are illustrated. DSS: dextran sulfate sodium, WP: white pulp, RP: red pulp. The figure is created with BioRender.com

## **Chapter 2.**

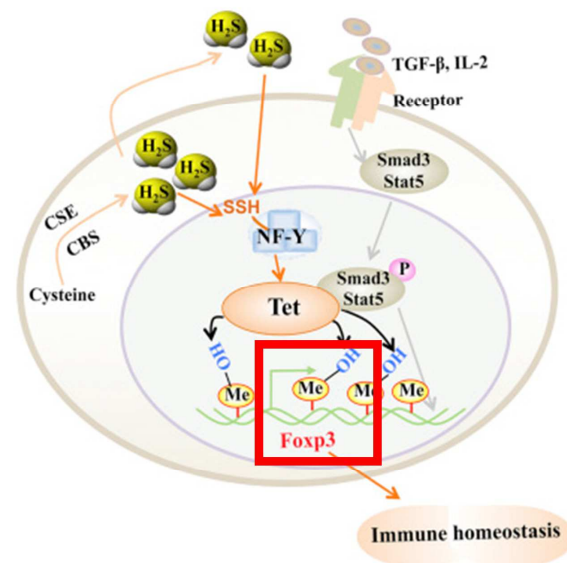
### **Development of spleen targeting H<sub>2</sub>S donating liposome**

## 2.1 Backgrounds

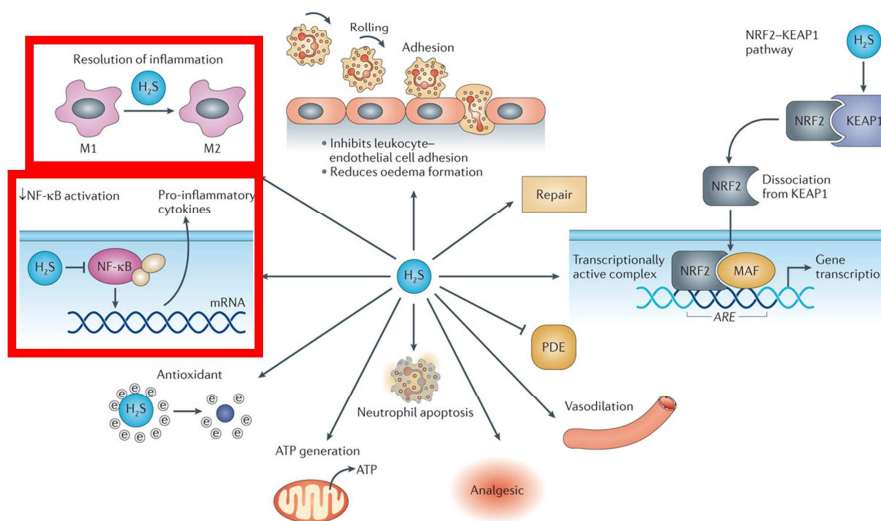
H<sub>2</sub>S has an anti-inflammatory activity in cardiovascular, respiratory, gastrointestinal systems in various pathological conditions (**Figure 1.1**) (20, 21, 52). H<sub>2</sub>S is rapidly diffused into the cytoplasm without a specific transporter and involved in several anti-inflammatory processes (**Figure 2.1**) (12, 53-55). H<sub>2</sub>S promotes T<sub>reg</sub> differentiation, which is important for preventing autoimmunity. H<sub>2</sub>S promotes the expression of ten-eleven translocation protein (TET1) and TET2 to maintain the demethylation of forkhead box P3 (FOXP3), resulting in more T<sub>reg</sub> differentiation and immune homeostasis(56, 57). H<sub>2</sub>S also promotes the secretion of interleukin-10 (IL-10) associated with T<sub>reg</sub> (23, 24, 58). In macrophage polarization, H<sub>2</sub>S facilitates the production of peroxisome proliferator-activated receptor gamma (PPAR $\gamma$ ) and PPAR $\gamma$  coactivator-1 $\beta$ , resulting in inducing anti-inflammatory M2 macrophage (22). In the inflammatory signaling pathway, The nuclear factor- $\kappa$ B (NF- $\kappa$ B) signaling pathway induces the expression of pro-inflammatory cytokines and chemokines such as IL-1/6/8/b, interferon- $\gamma$  (IFN- $\gamma$ ), inducible nitric oxide synthase (iNOS), cyclooxygenase-2 (COX-2), and tumor necrosis factor-  $\alpha$  (TNF- $\alpha$ ). Several studies have been showed that H<sub>2</sub>S inhibits the NF- $\kappa$ B signaling pathway,

resulting in alleviating inflammation (25, 59, 60). To sum up, hydrogen sulfide has anti-inflammatory activity in a wide range of ways, from signaling pathway to anti-inflammatory related immune cell differentiation.

A



B



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**Figure 2.1** H<sub>2</sub>S related anti-inflammatory processes. A. H<sub>2</sub>S promotes T<sub>Reg</sub> differentiation by regulating expression of FOXP3, resulting in immune homeostasis. From reference (56). B. H<sub>2</sub>S is involved in M2 polarization and NF-κB signaling pathway. From reference (61). FOXP3: forehead box P3

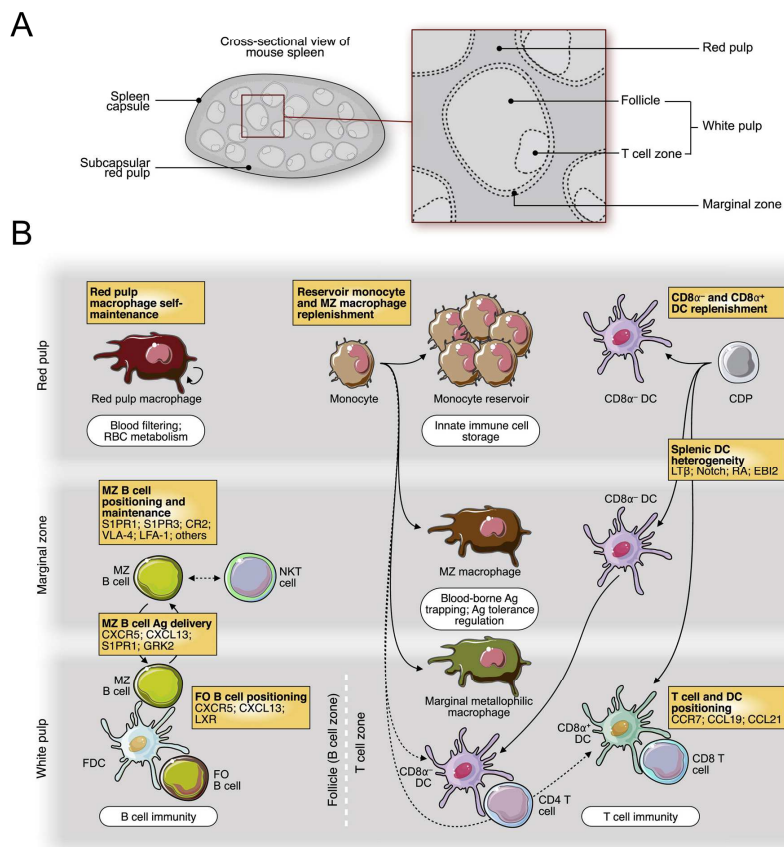
Several studies have demonstrated that treatment using H<sub>2</sub>S donors alleviates symptoms in various disease models, resulting from facilitating anti-inflammatory responses (**Table 2**) (17-24). Li et al. reported that GYY4137 mitigated knee joints swelling by decreasing expressions of IL-1 $\beta$ /6/8 and TNF- $\alpha$  in the acute joint inflammatory model (P< 0.05) (20). Zhang et al. reported that NaHS diminished air hyperresponsiveness (AHR) by reducing activation of IL-5/13 in asthma model (P< 0.05) (21). Miao et al. reported that NaHS attenuated myocardial infarct (MI) size by promoting differentiation of M2 macrophage in MI model (P< 0.01) (22). Wu et al. reported NaHS relieved kidney dysfunction by increasing expression of IL-10 and decreasing expression of IL-6 and MCP-1 in obesity induced kidney injury model (P< 0.05) (23). Li et al. reported that NaHS alleviated degree of acute lung injury (ALI) by promoting expression of IL-10 and diminishing of IL-6/8 in ALI model (P< 0.05) (24). Zhang et al. reported that NaHS preserved diaphragmatic function and structure by inhibiting NF- $\kappa$ B signaling pathway and reactive oxygen species (ROS) in diaphragm dysfunction model (25). To sum up, versatile H<sub>2</sub>S involved in several anti-inflammatory processes has shown therapeutic potential in various disease models.

The spleen, the largest lymphatic organ, is composed of various structures



and has different roles. Structurally, the spleen consists of red pulp (RP), white pulp (WP) and marginal zone (MZ) (**Figure 2.2A**). The spleen is a reservoir of various immune cells (**Figure 2.2B**). In the RP, monocytes, macrophages, and dendritic cells are abundant. The primary role of the RP is to filter blood borne pathogens and damaged erythrocytes. WP consists of B cells, T cells and dendritic cells, which are responsible for antigen specific immune responses to viral, bacterial, and fungal infections (62). Macrophages and metallophilic macrophages, B cells and dendritic cells are located in the MZ. Marginal zone macrophages can internalize blood borne pathogens and damaged molecules (63). Moreover, in the MZ, antigen presenting cells (APCs) ingest antigens and migrate into the white pulp for interaction with lymphocytes. The interaction between the lymphocytes of the white pulp and APCs could induce T<sub>reg</sub> cell differentiation from naïve T cells (30, 64). The spleen has a crucial role in regulating immunological responses in various pathological states such as ischemic stroke (65), myocardial infarction (66) and infections including coronavirus disease 2019 (COVID-19) (30, 67). The progression of these pathological conditions is strongly associated with the regulation of immune cells in the spleen. For example, in ischemic myocardial injury, monocytes in the spleen are mobilized and recruited to the ischemic myocardium. The recruited

monocytes have critical roles in the regulation of inflammation and repair of damaged tissue (68). Therefore, spleen mediated immune modulation is gaining momentum as a therapeutic target in various pathologic conditions related to unregulated inflammation (29, 69, 70).



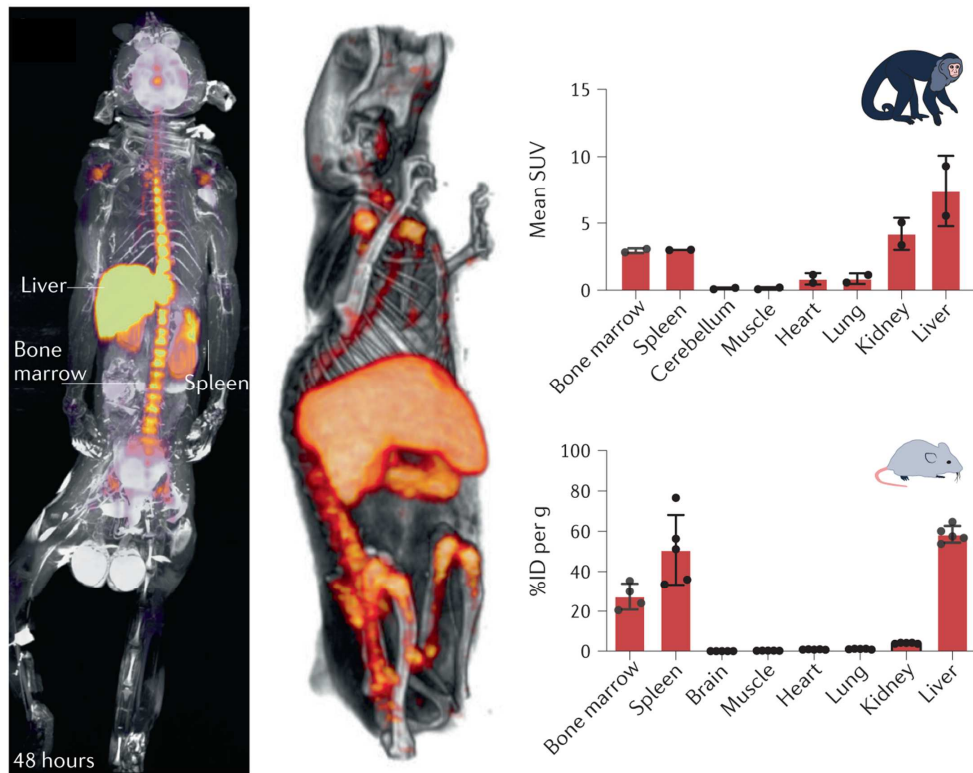
**Figure 2.2** Spleen's structure and roles of various splenic immune cells. A. Spleen consists of RP, MZ, and WP. B. The scheme demonstrates roles of splenic immune cells. Orange boxes illustrate mechanism or the cell's origin. White boxes indicate various roles according to splenic structure. From reference (30)

RP: red pulp, MZ: marginal zone, WP: white pulp

The liver and spleen have a natural characteristic to clear nanoparticles from systemic circulation because they are a natural filter for blood borne pathogens and antigens which can have a similar size with nanoparticles (**Figure 2.3**). This characteristic can reduce the drug delivery efficiency to diseased tissue such as tumors or inflammatory lesions; therefore, long circulating nanoparticles have been developed to reduce and delay nanoparticle uptake in the liver and spleen. However, recently, studies on the re-direction of nanoparticles to target the spleen are gaining attention for immune modulative therapy (71). In an experiment on polystyrene nanoparticle biodistribution during systemic inflammation, nanoparticles with a 20, 100, and 500 nm size mostly accumulated in the marginal zone of the spleen. Particularly, the nanoparticles were more dramatically accumulated in the spleen when inflammation was induced in mice by lipopolysaccharide (72, 73).

Conventionally, one of the most effective strategies for a longer circulation was to modify the nanoparticle surface using polyethylene glycol (PEG). PEG helps nanoparticles to maintain a more stable condition, evade the immune system, and enhance the delivery efficacy to the target region (74). Considering spleen targeting, surface PEG does not appear to be an appropriate component of nanoparticles. Therefore, we tested various sizes

and ratios of PEG to achieve a high stability, high loading efficiency of GYY4137, and effective spleen targeting.



**Figure 2.3** Mononuclear phagocyte system (MPS). MPS related organs capture NPs and rapidly excrete from the systemic circulation. Among MPS related organs, the liver and spleen make up a large portion of clearing systemically administered nanoparticle. From reference (75)

## 2.2 Material and Methods

### 2.2.1 Materials

Raw 264.7 cell line was purchased from Korean Cell Line Bank (Seoul, Korea). Distearoyl phosphatidylcholine (DSPC) was purchased from Avanti Polar Lipids, Inc. (AL, USA). 1,2-Distearoyl-sn-glycero-3-phosphoethanolamine (methoxy(polyethylene glycol)-2000) (DSPE-PEG2k) and DSPE-PEG5k, and 1,2-Distearoyl-sn-glycero-3-phosphoethanolamineN-[amino(polyethylene glycol)-2000] (DSPE-PEG2K-NH<sub>2</sub>) were obtained from Creative PEGworks (NC, USA). Cholesterol, N,N-Diisopropylethylamine (DIPEA), Silver nitrate (AgNO<sub>3</sub>), GYY 4137 (SML0100), phosphate buffered saline (PBS) tablet, 3-[4,5-dimethylthiazol-2-yl]-2,5-diphenyltetrazolium bromide reagent (MTT), Triton X-100 were purchased from Sigma Aldrich (MO, USA).

Antibody: CD45 (23-0451-81), CD4 (11-0041-81), FOXP3 (41-5773-82 and 45-5773-82), F4/80 (53-4801-80), CD80 (12-0801-82), CD206 (53-2061-82), Fluorescein 5(6)-isothiocyanate (FITC), and Hoechst 33342 were purchased from Thermo Fisher Scientific (MA, USA). 2-(p-Isothiocyanatobenzyl)-1,4,7-triazacyclononane-N,N',N'-triacetic acid

trihydrochloride ((p-SCN-Bn)-NOTA) was purchased from FUTURECHEM (Seoul, Korea). Hsip-1 was purchased from Dojindo (Kumamoto, Japan). Dextran sulfate sodium (DSS) salt, colitis grade (36000-50000) was purchased from MP Biomedicals (OH, USA). 4% paraformaldehyde (PFA) was purchased from Biosesang (Seongnam, Korea).

The PET images were acquired by GENISYS4, small PET scanner (Sofie Bioscience, CA, USA), The in vivo imaging system (IVIS, Perkin Elmer, MA, USA) was used to fluorescence images. The optical density was acquired by a microplate reader (SYNERGY H1, BioTek, VT, USA). The size distribution by dynamic light scattering (DLS) was performed to using the ZETASIZER Nano ZS (Malvern Instrument, Worcs, UK). The Cryo-TEM images were acquired by TALOS L120C (OR, USA).

### **2.2.2 Synthesis of H<sub>2</sub>S lipo**

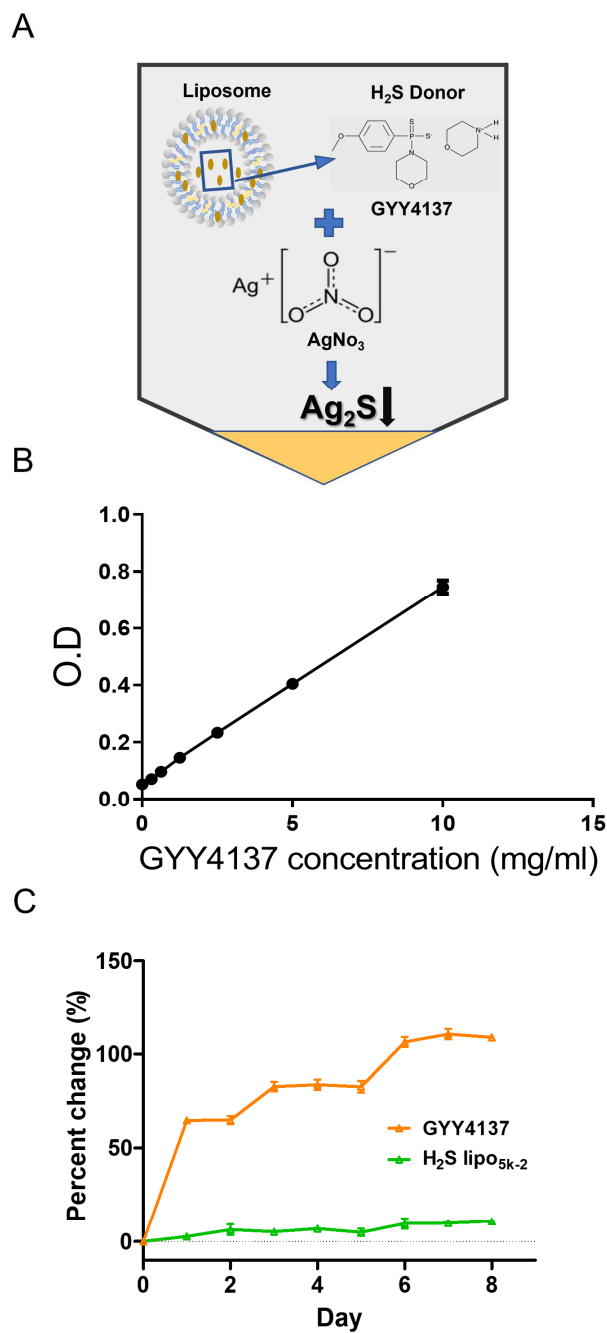
Self-assembled H<sub>2</sub>S lipo comprised DSPC, cholesterol, GYY4137, and DSPE-PEG (**Figure 2.6A**). GYY4137 has been studied in diverse fields (20, 76, 77). All experimental group comprised identical mass ratio of DSPC and cholesterol (6:1). 133.3  $\mu$ M of H<sub>2</sub>S donor was prepared for H<sub>2</sub>S lipo. Additionally, 600  $\mu$ M of H<sub>2</sub>S donor was prepared for reducing



administration volume of DSS treatment. The composition of H<sub>2</sub>S lipo was dissolved in organic solvent; chloroform/methanol (3:1 v/v) and evaporated. Dried lipids were vacuumed overnight for removing residual organic solvent. Dried lipids formed bilamellar vesicles through adding distilled water (DW) at 37°C. Then, H<sub>2</sub>S lipo was formed with several cycles of ultrasonication.

### **2.2.3 Detection of H<sub>2</sub>S release from H<sub>2</sub>S lipo**

H<sub>2</sub>S released by H<sub>2</sub>S donor or H<sub>2</sub>S lipo was identified by precipitation reaction with silver nitrate (AgNO<sub>3</sub>)(**Figure 2.4**) (78). Firstly, AgNO<sub>3</sub> was added to solution including H<sub>2</sub>S donor or H<sub>2</sub>S lipo. D.W with H<sub>2</sub>S lipo added methanol to destroy liposomal structure. Released H<sub>2</sub>S reacted with AgNO<sub>3</sub> and then the product, silver sulfide (AgS), was sedimented. AgS was detected through colorimetric assay. The optical density (O. D) of AgS was 405 nm. H<sub>2</sub>S donor or H<sub>2</sub>S lipo were quantitatively calculated by standard curve. When doing colorimetric assay, we added reagent, AgNO<sub>3</sub>, and methanol as 1:1:3 ratio.



**Figure 2.4** Released H<sub>2</sub>S detection method. A. Schematic design of H<sub>2</sub>S detection by AgNO<sub>3</sub> precipitation. When encapsulated H<sub>2</sub>S donor,

GY4137, was released,  $\text{AgNO}_3$  reacted with  $\text{H}_2\text{S}$  and precipitation of  $\text{Ag}_2\text{S}$  occurred. B. The standard curve of serial diluted GY4137 solution. The calculated O.D of GY4137 concentration was 10 mg/ml, 5 mg/ml, 2.5 mg/ml, 1.25 mg/ml, 0.6125 mg/ml, and 0.30625. The equation is  $y = 0.0692x + 0.0559$ ,  $R^2 = 0.997$ . Conversion mass to mole used molar mass of GY4137 which is 376.47 g/mol. C. Loading stability test. GY4137 and  $\text{H}_2\text{S}$  lipo<sub>5k-2</sub> were stored in 4°C.  $\text{H}_2\text{S}$  detection method repeatedly performed the same amount of stored samples every day. The graph indicated the percent change of O.D with reagents and  $\text{AgNO}_3$  (N= 3). O.D: optical density, D.W: distilled water,  $\text{AgNO}_3$ : silver nitrate

#### **2.2.4 Size stability and loading efficiency of H<sub>2</sub>S lipos**

The stability of H<sub>2</sub>S lipos was investigated using size distribution profiles. Investigated H<sub>2</sub>S lipo was suspended with DW and stored at room temperature. Size distribution profiles were acquired by dynamic scattering light (DLS). The acquisition time points were day 0, 3, 7 and 14. Loading efficiency of H<sub>2</sub>S lipos was compared by colorimetric assay at 90 mins after precipitation reaction. Serial concentration group of GYY4137 were simultaneously performed for calculating the standard curve. Measured O.D value is converted into molar concentration using indicated GYY4137 molecular weight and the standard curve. Loading efficiency (%) of H<sub>2</sub>S lipo was calculated using below formula: loading efficiency (%) =  $\frac{\text{GYY4137 mass converted from measured O.D}}{\text{initial GYY4137 mass}} \times 100\%$ .

#### **2.2.5 In vitro experiments using H<sub>2</sub>S lipo**

Macrophage cell line, RAW 264.7, was used to in vitro experiments. 10<sup>5</sup> cells were incubated in confocal dish. Next day, saline, GYY 4137, and fluorescent H<sub>2</sub>S lipo were treated in RAW 264 cells respectively.

Fluorescent H<sub>2</sub>S lipo was used for examining cell uptake of H<sub>2</sub>S lipo. The FITC was mixed with DSPE-PEG2k-Amine in the same molecular weight. The mixture was dissolved in organic solvent when H<sub>2</sub>S lipo was synthesized. The time point of cell uptake images was 0, 1, 2, and 3 hours. The fluorescence intensity is quantified using ImageJ. In cell differentiation study, we assessed ability of promoting anti-inflammatory (M2) macrophage differentiation. The 64.57  $\mu$ M of GYY4137 and H<sub>2</sub>S lipo were treated in RAW 264.7 cells. We observed elongated RAW 264.7 cells after 48 hours. The elongation factor (A.U) is used as assessment method of macrophage differentiation (79). The elongation factor is the number of dividing longitudinal cell length into cross-sectional cell length. It indicates M2 macrophage differentiation that the elongation factor is increased. Saline, bare lipo, GYY 4137, and H<sub>2</sub>S lipo are used as the reagents respectively. All images are acquired by confocal scanning microscope.

### **2.2.6 The Comparison of in vitro H<sub>2</sub>S release between various PEGylation strategies of H<sub>2</sub>S lipo**

In the H<sub>2</sub>S release test, 10<sup>5</sup> cells of RAW 264.7 were incubated in confocal dish. Next day, cells were treated with reagents. The reagents are

saline, GYY 4137, and H<sub>2</sub>S lipos. Various PEGylation strategies of H<sub>2</sub>S lipo were used for comparing H<sub>2</sub>S release ability depending on the mass ratio of DSPC/DSPE-PEG and the type of PEG. After 2 hours from treating the reagents H<sub>2</sub>S detection probe, Hsip-1, was used to identify released H<sub>2</sub>S (80). The fluorescence intensity of released H<sub>2</sub>S was quantified using ImageJ. All images were acquired by confocal scanning microscope.

### **2.2.7 The cell viability assessment after treating H<sub>2</sub>S lipo**

RAW 264.7 cell line was treated with H<sub>2</sub>S lipo in medium (DMEM with 5% fetal bovine serum). H<sub>2</sub>S lipo serially diluted based molar concentration. After 24 hours treating with H<sub>2</sub>S lipo, 0.5 mg/ml of 3-[4,5-dimethylthiazol-2-yl]-2,5-diphenyltetrazolium bromide reagent (MTT) was added and incubated at 37 °C for 3 hours. After reagent removal, 100 µl of DMSO was added. Absorbance at 540 nm was detected by microplate spectrophotometer (81).

### **2.2.8 Radiolabeling method of H<sub>2</sub>S lipo**

The Composite structure made of chelator and PEG was used to

synthesize radiolabeled H<sub>2</sub>S lipo. Firstly, 2-(p-Isothiocyanatobenzyl)-1,4,7-triazacyclononane-N,N',N'-triacetic acid trihydrochloride ((p-SCN-Bn)-NOTA) as chelator and PEG-amine were dissolved in methanol with same molar ratio. N,N-Diisopropylethylamine (DIPEA) was added in the mixture for inducing covalent bond. The mixture was reacted for overnight. Then, PEG conjugated chelator was added in H<sub>2</sub>S lipo synthesis before evaporating process. Chelated H<sub>2</sub>S lipo was mixed with radioisotope in pH 5 solution adjusted by 2 M sodium acetate. The final mixture was incubated at 37 °C for 30 minutes. In the end, serial size exclusion chromatography was proceeded for sorting purified radiolabeled H<sub>2</sub>S lipo. The radiolabeling efficiency was assessed by radio-thin layer chromatography (TLC) which is iTLC plates with 50 mM EDTA solution.

### **2.2.9 In vivo PET images of radiolabeled H<sub>2</sub>S lipo.**

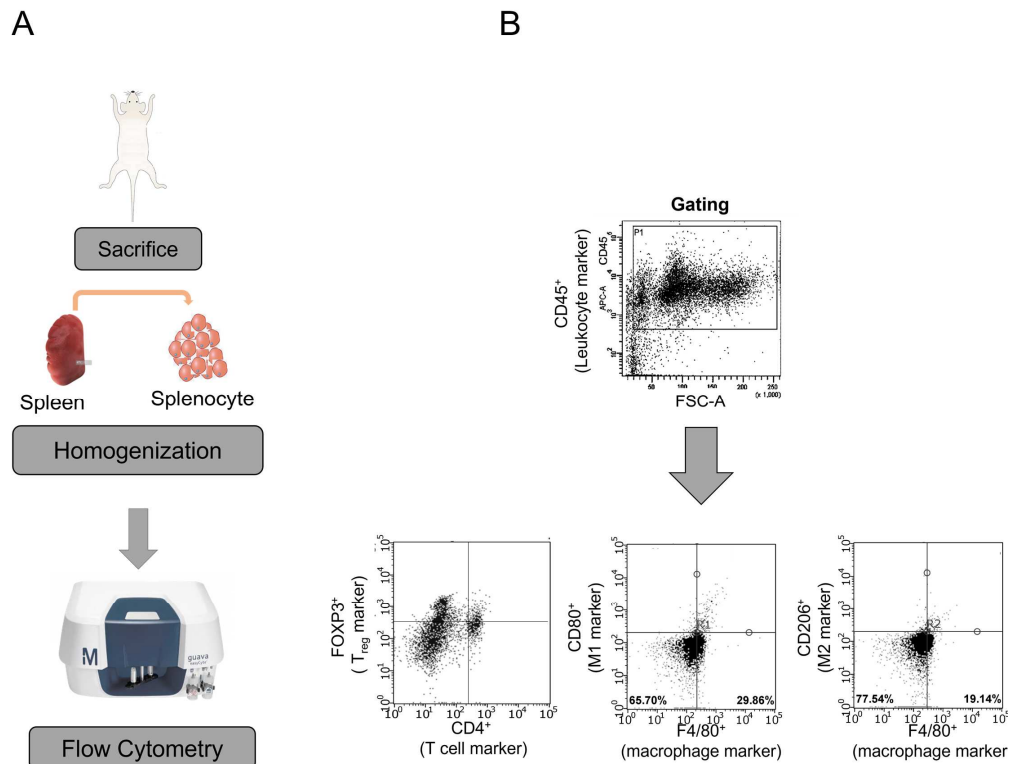
Compared compositions are H<sub>2</sub>S lipo<sub>5k-2</sub>, H<sub>2</sub>S lipo<sub>5k-6</sub>, and H<sub>2</sub>S lipo<sub>5k-12</sub>. 50 μCi of <sup>64</sup>Cu radiolabeled H<sub>2</sub>S lipo (<sup>64</sup>Cu-H<sub>2</sub>S lipo) at saline was injected to normal C57/BL6N mouse intravenously. The chronological PET Images were acquired by PET scanner (GENESYS4). The acquisition time point of PET Images was 0, 2, 12, and 36 hours. Quantitative analysis was conducted

by MIM Encore (MIM software Inc., OH, USA). The calculated region of interest (ROI) was Bloodpool, spleen, liver, muscle. The time-activity curve of bloodpool was calculated by fit curve equation. The ROI was quantified as percentage of the injected dose per tissue weight (%ID/g). The standard uptake value (SUV) was calculated by (tissue radioactivity concentration)/[(injected dose)/(bodyweight)]. A time activity curve was calculated by fitting equation ( $y=y_0+a*e^{-b \times}$ ) using SUV<sub>mean</sub> of Bloodpool at 0, 2, 12, and 36 hours.

#### **2.2.10 Flowcytometry**

Flow cytometry was conducted for assessing immune cell differentiation in spleen and bone marrow. FOXP3<sup>+</sup> and CD4<sup>+</sup> antibodies were used for T<sub>reg</sub> markers. CD80<sup>+</sup> and CD206<sup>+</sup> antibodies were used for M1 and M2 macrophage respectively. The scheme of gating strategy was illustrated (**Figure 2.5**). Extracted spleen and bone marrow were homogenized. The PBS washing was performed between each procedure. All data is acquired by flow cytometer. All data is analyzed by Guava Incyte program.





**Figure 2.5** Gating Strategy of flow cytometry. A. Procedures of flow cytometry using splenocyte B. Gating strategy of flow cytometry analysis. CD45 antibody was used as leukocyte marker. CD4 and FOXP3 antibodies were used as regulatory T cell markers. CD80 and F4/80 antibodies were used as M1 macrophage markers. CD206 and F4/80 antibodies were used as M2 macrophage markers.

## 2.3 Results and Discussion

### 2.3.1 Identification of ideal composition of H<sub>2</sub>S lipo

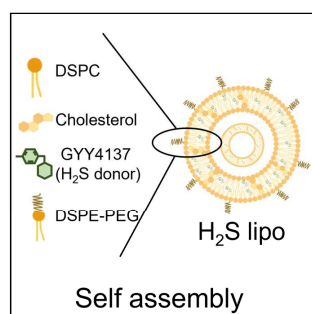
We synthesized a H<sub>2</sub>S donor, GYY4137, loaded liposome (H<sub>2</sub>S lipo) (**Figure 2.6A**). We tested various PEGylation strategies to develop the H<sub>2</sub>S lipo with high stability and an efficient spleen targeting ability. Two types of 1,2- distearoyl-sn-glycero-3-phosphoethanolamine – polyethylene glycol (DSPE-PEG) (PEG: 2 kDa or 5kDa) and four different mass ratios of distearoyl phosphatidylcholine (DSPC) and DSPE-PEG (1:12, 1:6, 1:2, and 1:1) were tested in the synthesis of the H<sub>2</sub>S lipo. The four different mass ratios using 2kDa PEG (1:12, 1:6, 1:2 and 1:1) were named H<sub>2</sub>S lipo<sub>2k-1</sub>, H<sub>2</sub>S lipo<sub>2k-2</sub>, H<sub>2</sub>S lipo<sub>2k-6</sub> and H<sub>2</sub>S lipo<sub>2k-12</sub>, respectively. The four groups using 5 kDa PEG (1:12, 1:6, 1:2 and 1:1) were named H<sub>2</sub>S lipo<sub>5k-1</sub>, H<sub>2</sub>S lipo<sub>5k-2</sub>, H<sub>2</sub>S lipo<sub>5k-6</sub> and H<sub>2</sub>S lipo<sub>5k-12</sub>, respectively. First, we tested the size stability of the various H<sub>2</sub>S lipos in DW at room temperature for 14 days using dynamic light scattering (DLS). We calculated the size changes of the H<sub>2</sub>S lipos between day 0 and day 14 to assess the degree of size stability, and the sizes of H<sub>2</sub>S lipo<sub>2k-1</sub>, H<sub>2</sub>S lipo<sub>2k-2</sub>, H<sub>2</sub>S lipo<sub>2k-6</sub>, H<sub>2</sub>S lipo<sub>2k-12</sub>, H<sub>2</sub>S lipo<sub>5k-1</sub>, H<sub>2</sub>S lipo<sub>5k-2</sub>, H<sub>2</sub>S lipo<sub>5k-6</sub> and H<sub>2</sub>S lipo<sub>5k-12</sub> were increased by 21.21%, 38.22%, 20.98%, 6.44%, 36%, 8.52%, 4.65%, and 12.53%,

respectively (**Figure 2.7, Table 5**). We considered H<sub>2</sub>S lipo groups with over a 20% size change as unstable forms of H<sub>2</sub>S lipo. Additionally, H<sub>2</sub>S lipo<sub>2k-12</sub> was the only H<sub>2</sub>S lipo with 2 kDa PEG left'; thus, we could not compare characteristics of the H<sub>2</sub>S lipo with different 2 kDa PEG ratios. Therefore, H<sub>2</sub>S lipo<sub>5k-2</sub>, H<sub>2</sub>S lipo<sub>5k-6</sub> and H<sub>2</sub>S lipo<sub>5k-12</sub> were used in further characterization experiments. The H<sub>2</sub>S donor loading efficiency was tested by a precipitation method using silver nitrate (AgNO<sub>3</sub>) (**Figure 2.4A**) (78). The detected optical density (O.D) can be converted to the molar concentration using the weight concentration and molecular weight of GYY4137 calculated from the standard curve (**Figure 2.4B**). There was no significant difference in the loading efficiency between the various H<sub>2</sub>S lipos (P = N.S.) (**Figure 2.6B**). Next, the surface net charge was analyzed (**Figure 2.6C**). The zeta potential (mV) of H<sub>2</sub>S lipo<sub>5k-2</sub>, H<sub>2</sub>S lipo<sub>5k-6</sub>, and H<sub>2</sub>S lipo<sub>5k-12</sub> were -28.1±0.9, -24.8±0.8, and -23.2±0.2, respectively. The surface net charge of the H<sub>2</sub>S lipo tended to increase as the mass of the PEG was increased (H<sub>2</sub>S lipo<sub>5k-2</sub> vs. H<sub>2</sub>S lipo<sub>5k-6</sub>, P < 0.01; H<sub>2</sub>S lipo<sub>5k-2</sub> vs. H<sub>2</sub>S lipo<sub>5k-12</sub>, P < 0.001 and H<sub>2</sub>S lipo<sub>5k-6</sub> vs. H<sub>2</sub>S lipo<sub>5k-12</sub>, P = 0.08). Moreover, the loading stability test was confirmed with the H<sub>2</sub>S detection method to identify whether the H<sub>2</sub>S donor was well encapsulated and preserved in the H<sub>2</sub>S lipo. We checked the percent change of the O.D of GYY4137 and H<sub>2</sub>S

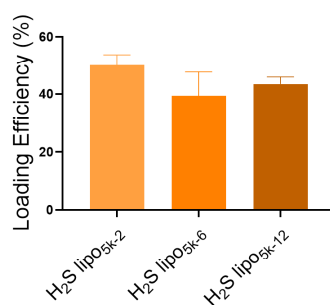
lipo<sub>5k-2</sub> in D.W for 8 days. The O.D of GYY4137 increased over time up to 100% and was saturated at day 7; however, the O.D of H<sub>2</sub>S lipo<sub>5k-2</sub> was only increased less than 10%, which indicated GYY4137 was stably loaded in the liposome. We speculated that GYY4137 is loaded in the hydrophobic layer of the liposome because GYY4137 releases H<sub>2</sub>S in aqueous solution and does not release H<sub>2</sub>S in a hydrophobic environment (**Figure 2.4C**). Taken together, the H<sub>2</sub>S lipo is a drug delivery vehicle that could stably encapsulate the H<sub>2</sub>S donor without any unwanted H<sub>2</sub>S release.

Additionally, cell viability after treatment with GYY4137 and H<sub>2</sub>S lipo was tested by MTT assay in RAW 264.7 cells. GYY4137 and H<sub>2</sub>S lipo were not cytotoxic up to 120  $\mu$ M of GYY4137 (**Figure 2.8A**). In the cryogenic transmission microscopy (TEM) images, we identified that H<sub>2</sub>S lipo<sub>5k-2</sub> are uniformly shaped bilamellar liposomes (**Figure 2.8B**).

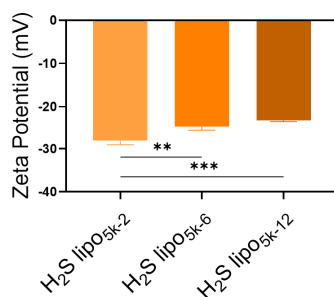
A



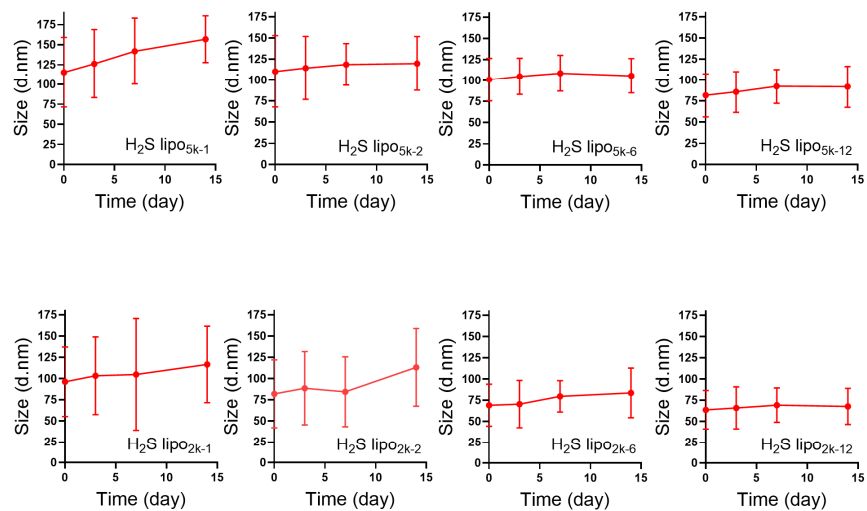
B



C



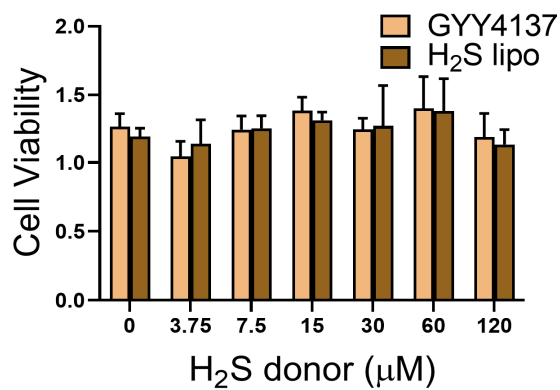
**Figure 2.6** The scheme of H<sub>2</sub>S lipo composition, the comparison of loading efficiency, and the comparison of surface net charge. A. The schematic design of H<sub>2</sub>S lipo composition. B. The comparison of H<sub>2</sub>S loading efficiency between different H<sub>2</sub>S lipos using the H<sub>2</sub>S detection method (n = 3). C. The comparison of surface net charge using zeta potential of DLS. \*\*: P < 0.01, \*\*\*: P < 0.001.



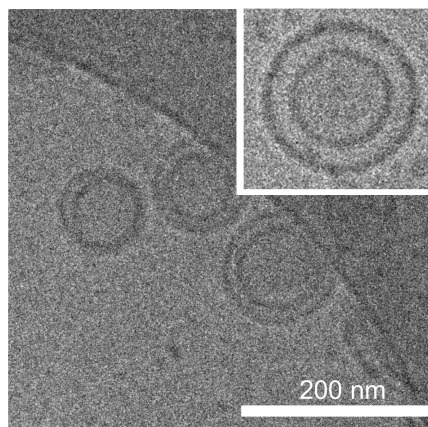
**Figure 2.7** The stability test of H<sub>2</sub>S lipo with different PEGylation strategies.

A. The stability of H<sub>2</sub>S lipo was analyzed using size distribution profiles of DLS. The size distribution of H<sub>2</sub>S lipo was acquired up to 14 days. B. The table of H<sub>2</sub>S lipo stability test. The data of size and PDI according to composition are filled in the table up to 14 days. PDI: polydispersity index.

A



B



**Figure 2.8** The cell viability test and Cryo-TEM images of H<sub>2</sub>S lipo. A. The cell viability test of H<sub>2</sub>S lipo and GYY4137 using colorimetric MTT assay. Raw 264.7 cell line was used for MTT assay. The range of H<sub>2</sub>S donor or H<sub>2</sub>S lipo concentration is 0 to 120 μM. B. Cryo-TEM images of H<sub>2</sub>S lipo.

Composition	Measures	Time (day)			
		0	3	7	14
<b>H<sub>2</sub>S lipo<sub>2k-1</sub></b>	Size (d.nm)	96.2±4	103.3±45.8	104.8±65.9	116.6±45
	PDI	0.262	0.259	0.251	0.252
<b>H<sub>2</sub>S lipo<sub>2k-2</sub></b>	Size (d.nm)	81.9±40.1	88.6±43.2	84.4±41.3	113.2±45.8
	PDI	0.243	0.266	0.229	0.188
<b>H<sub>2</sub>S lipo<sub>2k-6</sub></b>	Size (d.nm)	69.1±24.7	70.5±28	79.6±18.5	83.6±29.2
	PDI	0.162	0.145	0.148	0.151
<b>H<sub>2</sub>S lipo<sub>2k-12</sub></b>	Size (d.nm)	63.7±22.8	66±24.6	69.2±20.2	67.8±21.4
	PDI	0.157	0.134	0.460	0.150
<b>H<sub>2</sub>S lipo<sub>5k-1</sub></b>	Size (d.nm)	115.3±43.8	114.4±37.6	141.8±41.4	156.8±29.24
	PDI	0.193	0.22	0.207	0.200
<b>H<sub>2</sub>S lipo<sub>5k-2</sub></b>	Size (d.nm)	110.3±42.4	114.4±37.6	118.6±24.74	119.7±32.1
	PDI	0.211	0.220	0.252	0.227
<b>H<sub>2</sub>S lipo<sub>5k-6</sub></b>	Size (d.nm)	101±25.4	104.9±21.6	108.7±21.4	105.7±20.58
	PDI	0.076	0.060	0.073	0.089
<b>H<sub>2</sub>S lipo<sub>5k-12</sub></b>	Size (d.nm)	81.6±25.7	85.8±24.3	92.3±20.1	91.83±24.48
	PDI	0.171	0.160	0.163	0.152

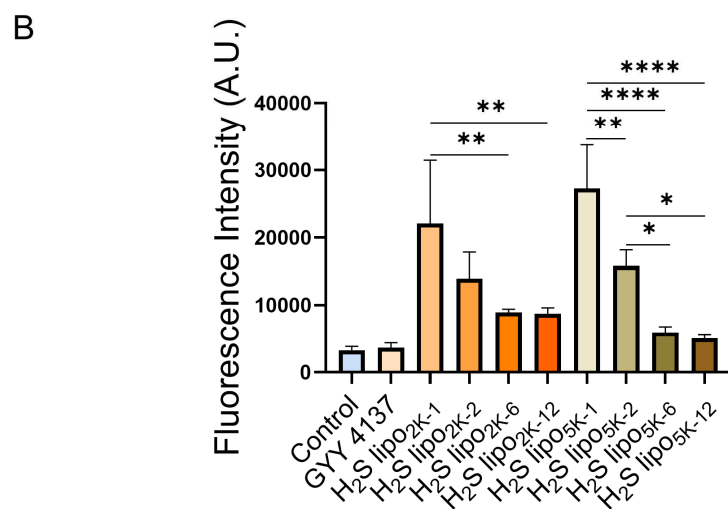
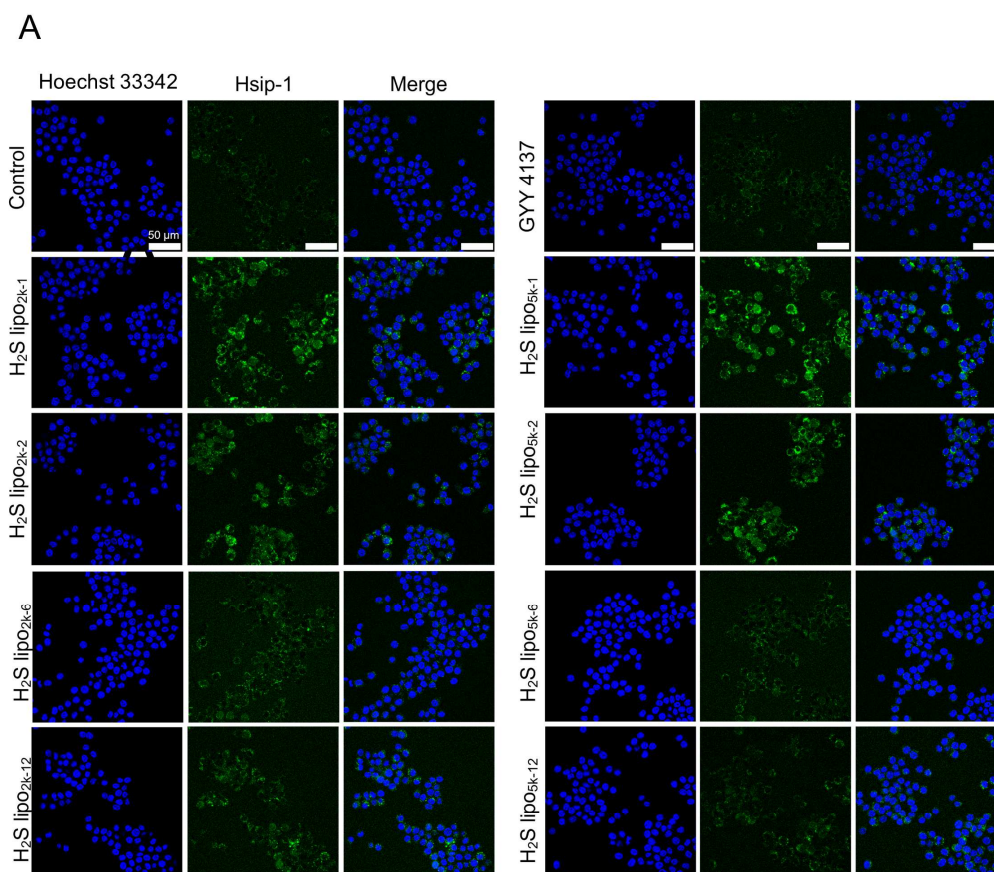
**Table 5** The stability test of H<sub>2</sub>S lipo with different PEGylation strategies. Table indicates size (d.nm) and PDI up to 14 days. PDI:

polydispersity index.



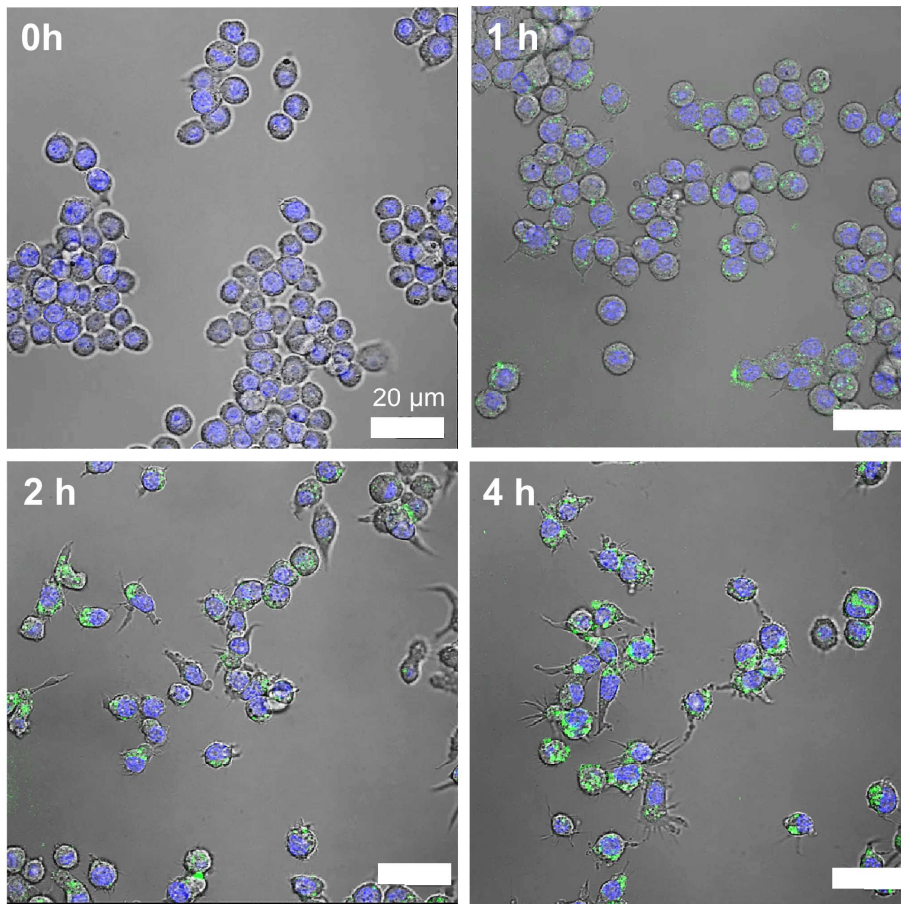
### 2.3.2 In vitro H<sub>2</sub>S releasing and immune modulatory effects of H<sub>2</sub>S lipo

When RAW 264.7 cells were treated H<sub>2</sub>S lipos, they were able to release H<sub>2</sub>S. We found that the H<sub>2</sub>S releasing ability of H<sub>2</sub>S lipo is superior to that of the unloaded H<sub>2</sub>S donor, GYY4137. Moreover, as the PEG composition included in the H<sub>2</sub>S lipo was decreased, more H<sub>2</sub>S release was detected (**Figure 2.9**). However, H<sub>2</sub>S lipo<sub>2k-1</sub> and H<sub>2</sub>S lipo<sub>5k-1</sub> were not used for further experiments because they were unstable in the size stability test (**Figure 2.7, Table 5**). Additionally, further studies were done using H<sub>2</sub>S lipo<sub>5k-2</sub> because it has the highest degree of H<sub>2</sub>S releasing ability among the stable H<sub>2</sub>S lipos. In a cell uptake study, we found that a fluorescent H<sub>2</sub>S lipo gradually was phagocytosed by RAW 264.7 cells over time (**Figure 2.10**). To assess the immunomodulatory effect of the H<sub>2</sub>S lipo in RAW 264.7 cells, we calculated the elongation factor of the cells which is a phenotypic marker for anti-inflammatory M2 macrophages (**Figure 2.11A**) (82). H<sub>2</sub>S lipo was able to induce macrophage elongation, and the degree of elongation was higher in the H<sub>2</sub>S lipo treated cells compared to the control, liposome, and unloaded H<sub>2</sub>S donor treated cells ( $P < 0.001$ ,  $P < 0.01$ ,  $P < 0.001$ , respectively) (**Figure 2.11B, C**).

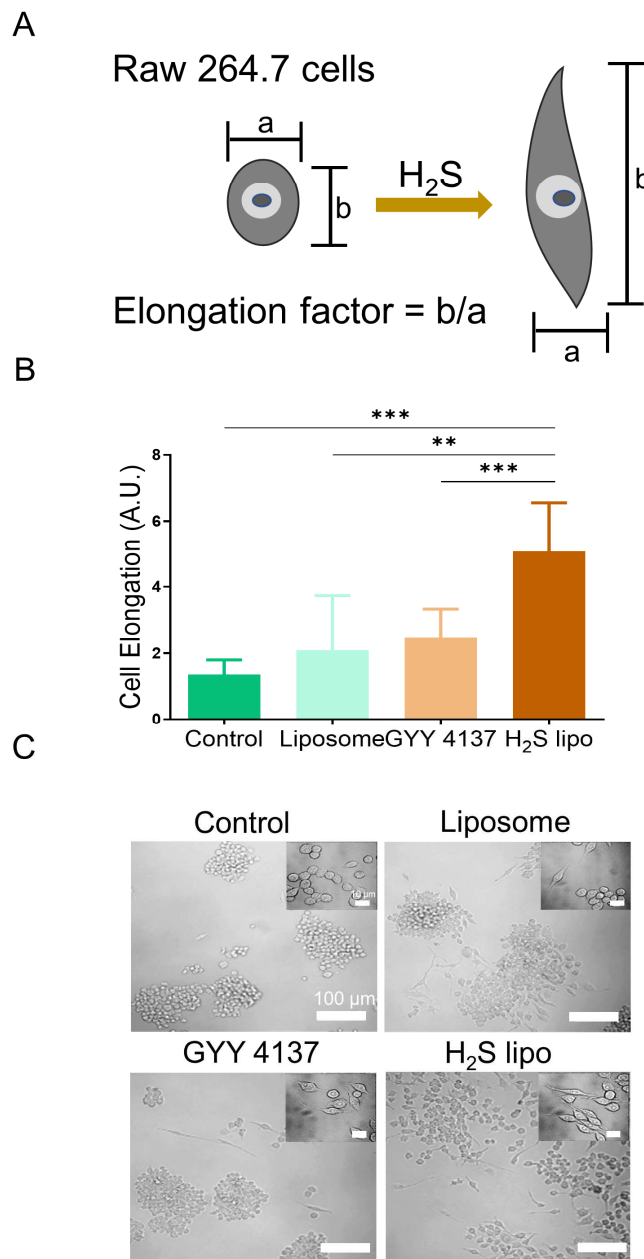


**Figure 2.9** The fluorescence images of released H<sub>2</sub>S by H<sub>2</sub>S lipos. A. The fluorescence images of released H<sub>2</sub>S by H<sub>2</sub>S lipo after cell uptake. Hoechst

33342 was used for staining nucleic acid. Hsip-1 was used for detecting released H<sub>2</sub>S by H<sub>2</sub>S lipo after 1 hour from adding reagents (n = 4). B. The graph indicates the comparison of quantified fluorescence intensity between control, GYY 4137, and H<sub>2</sub>S lipos. \*: P < 0.05, \*\*: P < 0.01, \*\*\*\*: P < 0.0001.



**Figure 2.10** The cell uptake images of H<sub>2</sub>S lipo. FITC labeled H<sub>2</sub>S lipo is used (n = 6). The confocal images were acquired at 0, 1, 2, and 4 hours.

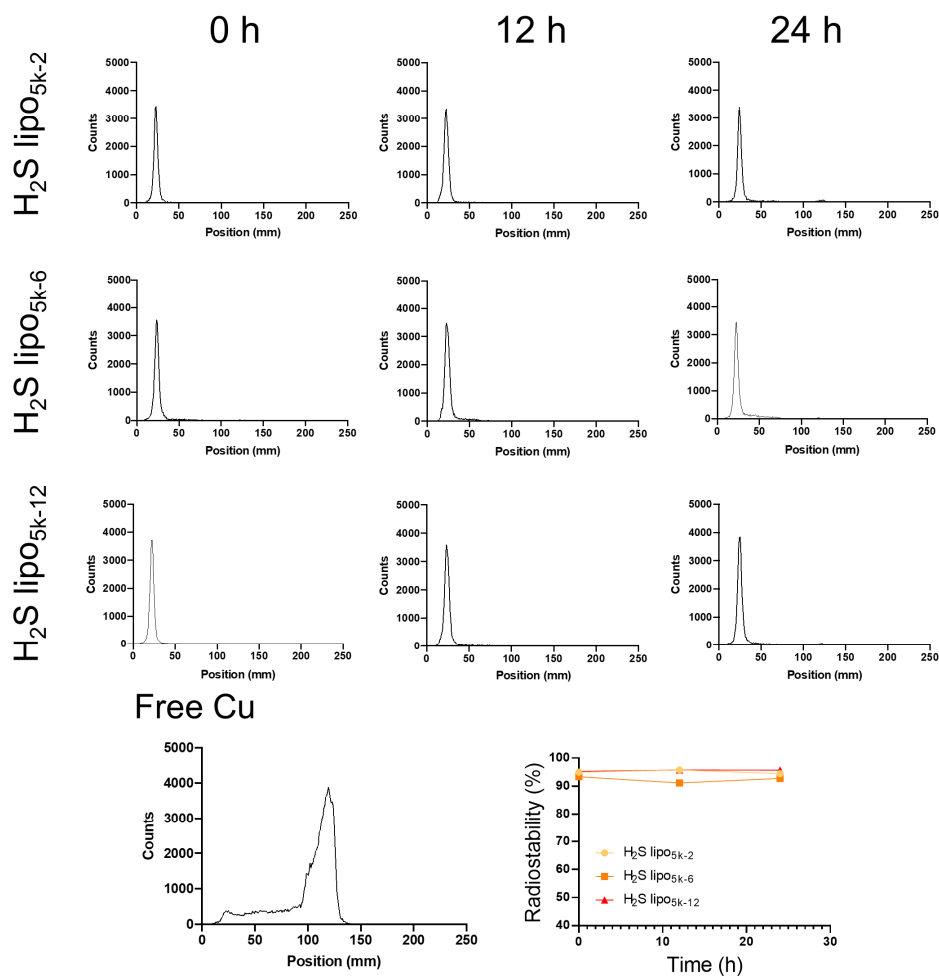


**Figure 2.11** Morphological analysis of M2 macrophage differentiation. A. The schematic design of elongation factor analysis. B. The graph indicates the comparison of quantified cell elongation factor between control, liposome, GYY4137, and H<sub>2</sub>S lipo (n = 8, respectively). C. The comparison of M2 macrophage differentiation between bare liposome, GYY4137, and H<sub>2</sub>S lipo using morphological analysis. \*\*: P < 0.01, \*\*\*: P < 0.001.

### 2.3.3 Assessment of the spleen targeting ability of H<sub>2</sub>S lipo.

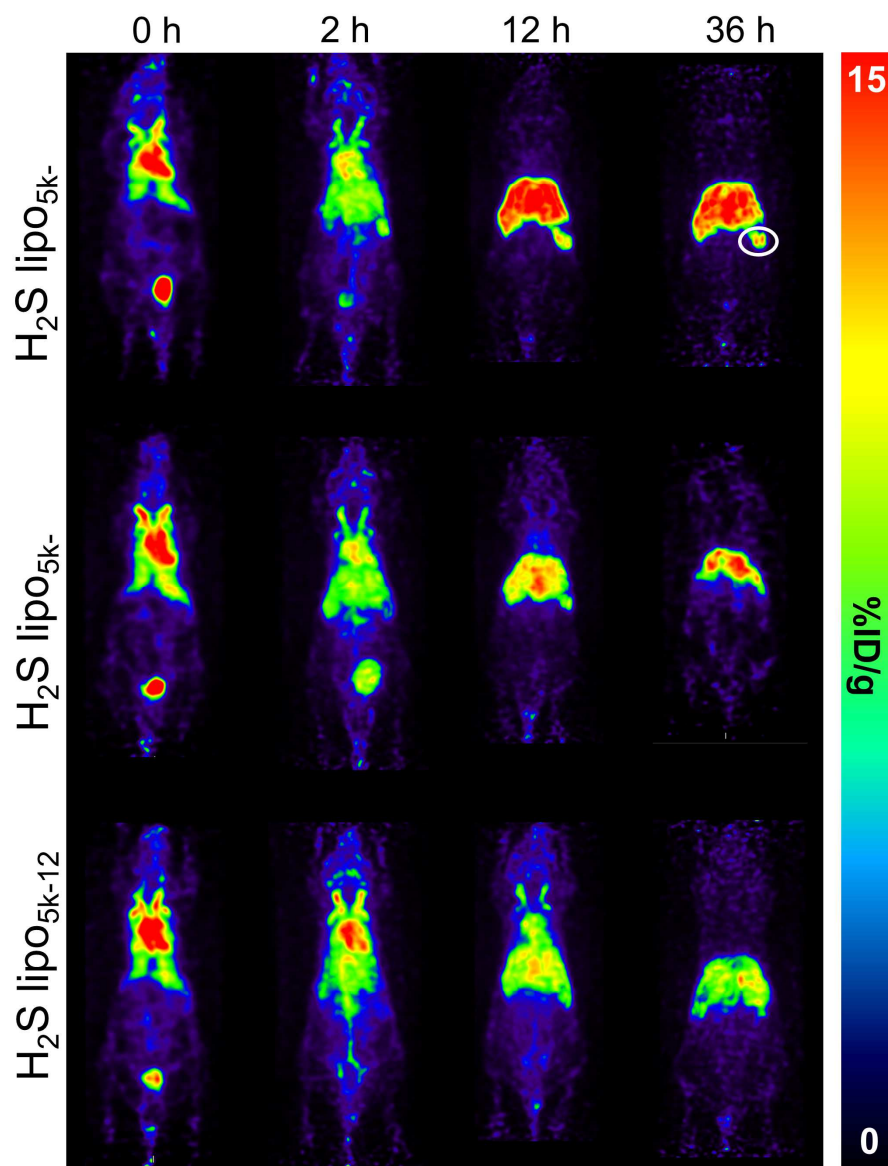
Positron emission tomography (PET) image based biodistribution analysis was done to assess the spleen targeting ability of H<sub>2</sub>S lipo. We selected H<sub>2</sub>S lipo<sub>5k-2</sub>, H<sub>2</sub>S lipo<sub>5k-6</sub> and H<sub>2</sub>S lipo<sub>5k-12</sub> to assess the spleen targeting ability because 1) PEG 2 kDa included H<sub>2</sub>S lipos were more unstable compared to the PEG 5 kDa included ones, and 2) H<sub>2</sub>S lipo<sub>5k-1</sub> was unstable. PET has the advantage of showing the biodistribution of nanoparticles because it has excellent sensitivity and can detect an altered biodistribution by minor changes in the nanoparticles (83). To evaluate the appropriate PEGylation strategy for spleen targeting, we compared the in vivo biodistribution of <sup>64</sup>Cu radiolabeled H<sub>2</sub>S lipo<sub>5k-2</sub>, H<sub>2</sub>S lipo<sub>5k-6</sub>, and H<sub>2</sub>S lipo<sub>5k-12</sub>. First, we investigated the radiolabeling efficiency and radiochemical stability using thin layer chromatography (TLC). Even after 24 hours, the radiolabeling efficiency of H<sub>2</sub>S lipo<sub>5k-2</sub>, H<sub>2</sub>S lipo<sub>5k-6</sub>, and H<sub>2</sub>S lipo<sub>5k-12</sub> remained 94.46%, 92.79%, and 95.74% in phosphate buffered solution (PBS), confirming successful radiolabeling (**Figure 2.12**). From the in vivo biodistribution shown on the PET image, it was identified that H<sub>2</sub>S lipo<sub>5k-2</sub> rapidly accumulated in the spleen (**Figure 2.13**). The circulation half-life of H<sub>2</sub>S lipo<sub>5k-2</sub>, H<sub>2</sub>S lipo<sub>5k-6</sub>, and H<sub>2</sub>S lipo<sub>5k-12</sub> was 4.4, 9.8, and 14.7

hours, respectively, making H<sub>2</sub>S lipo<sub>5k-12</sub> suitable for a long circulating liposome loaded H<sub>2</sub>S donor (**Figure 2.14, Table 6**). In the standard uptake value (SUV<sub>mean</sub>) graph, which quantitatively calculated the H<sub>2</sub>S lipos targeted to the spleen, the SUV<sub>mean</sub> of H<sub>2</sub>S lipo<sub>5k-2</sub> was significantly higher than that of H<sub>2</sub>S lipo<sub>5k-12</sub>. ( $P < 0.001$ ). In the area under curve (AUC) of the SUV<sub>mean</sub> graph, the AUC of H<sub>2</sub>S lipo<sub>5k-2</sub> was significantly higher than that of H<sub>2</sub>S lipo<sub>5k-12</sub> ( $P < 0.001$ ). In the spleen to muscle ratio, H<sub>2</sub>S lipo<sub>5k-1</sub> was significantly more accumulated than that of H<sub>2</sub>S lipo<sub>5k-6</sub> and H<sub>2</sub>S lipo<sub>5k-12</sub> ( $P < 0.05$ ,  $P < 0.05$ , respectively) (**Figure 2.15**). We found a simple PEGylation strategy suitable for spleen-targeting by quantitatively analyzing the PET images and designated H<sub>2</sub>S lipo<sub>5k-2</sub> as a spleen-targeting H<sub>2</sub>S lipo (ST-H<sub>2</sub>S lipo) and H<sub>2</sub>S lipo<sub>5k-12</sub> as a long-circulating H<sub>2</sub>S lipo (LC-H<sub>2</sub>S lipo).

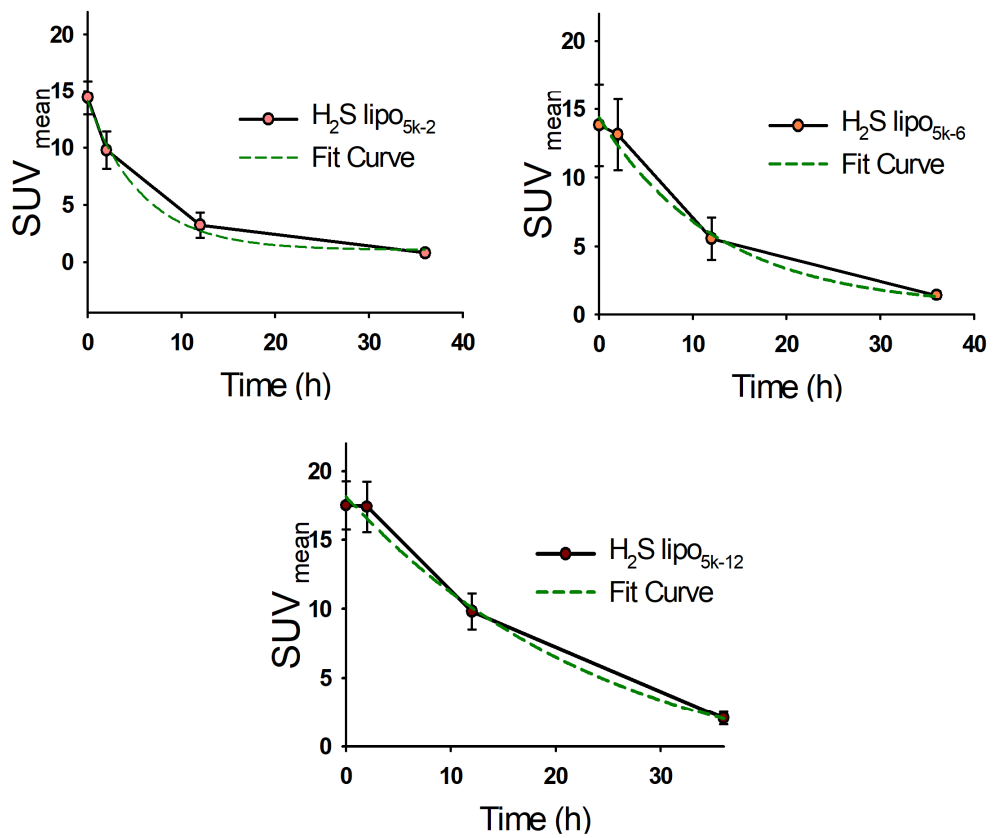


**Figure 2.12** Radiochemical stability test of  $^{64}\text{Cu}$ -H<sub>2</sub>S lipo.  $^{64}\text{Cu}$  radiolabeled H<sub>2</sub>S lipo with 5k-1, 5k-3, 5k-6 and free  $^{64}\text{Cu}$  were compared. The radiostability of compared group were calculated at 0h, 12h, and 24h. 5k: DSPE-PEG5k, 1: 1 mg, 3: 3 mg, 6: 6 mg.

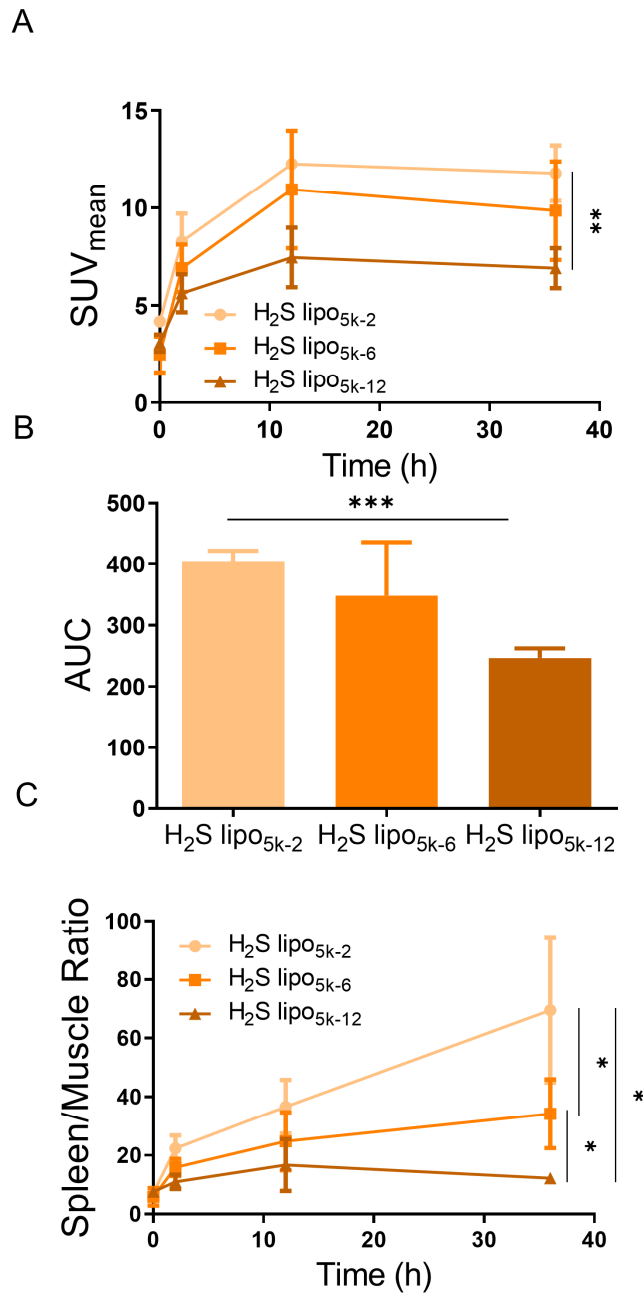




**Figure 2.13** The in vivo PET images of  $^{64}\text{Cu}$  radiolabeled  $\text{H}_2\text{S}$  lipo. The PET images were acquired using intravenously injected  $^{64}\text{Cu}$  radiolabeled  $\text{H}_2\text{S}$  lipos which include  $\text{H}_2\text{S}$  lipo<sub>5k-2</sub>,  $\text{H}_2\text{S}$  lipo<sub>5k-6</sub>, and  $\text{H}_2\text{S}$  lipo<sub>5k-12</sub> ( $n = 3$ , respectively). The time points of image acquisition are 0, 2 hours, 12 hours, and 36 hours after injection. White circle indicates spleen.



**Figure 2.14** The time activity curve graphs of blood pool and indicate circulation half-life.



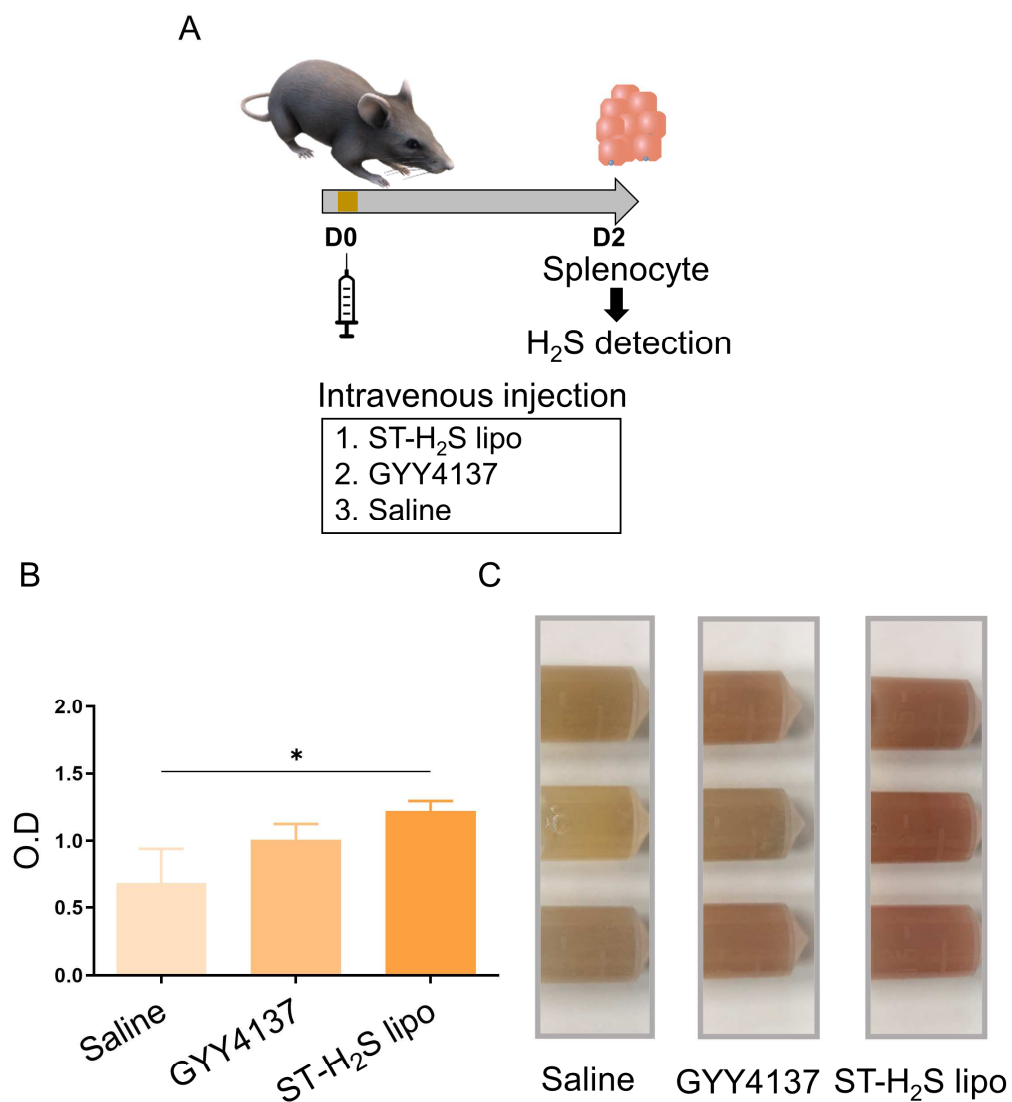
**Figure 2.15** Quantitative analysis of in vivo PET images. The graph (A) indicates comparison of quantified spleen uptake. The graph (B) indicates comparison of quantified AUC of spleen uptake graph. The graph (C) indicates comparison of quantified spleen/muscle ratio. PET: Positron emission tomography \*:  $P < 0.05$ , \*\*:  $P < 0.01$ , \*\*\*:  $P < 0.001$ .

Group (PEG)	H <sub>2</sub> S lipo <sub>5k-2</sub>	H <sub>2</sub> S lipo <sub>5k-6</sub>	H <sub>2</sub> S lipo <sub>5k-12</sub>
Fitting equation	a: 13.0357	a: 13.7958	a: 21.0601
$y=y_0+a*e^{-b \times}$	b: -0.0794	b: -0.0794	b: -0.0402
$R^2=c$	c: 0.997	c: 0.995	c: 0.996
Half-life (t <sub>1/2</sub> )	4.4 hours	9.8 hours	14.7 hours

**Table 6** The table of time activity curve data. The table includes fitting equation and half-life data

### 2.3.4 The in vivo analysis of splenic T<sub>reg</sub> differentiation by ST-H<sub>2</sub>S lipo

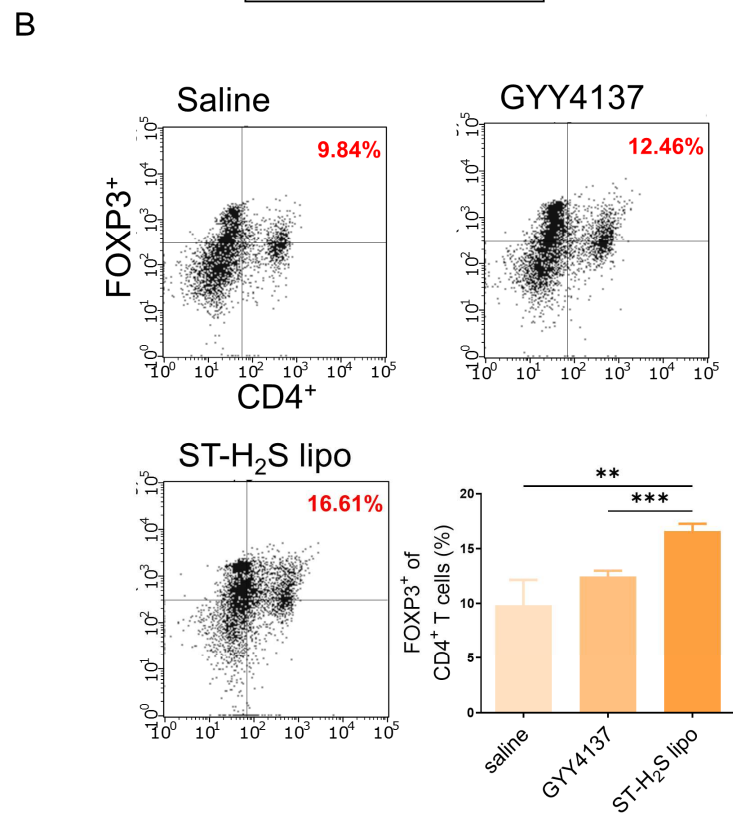
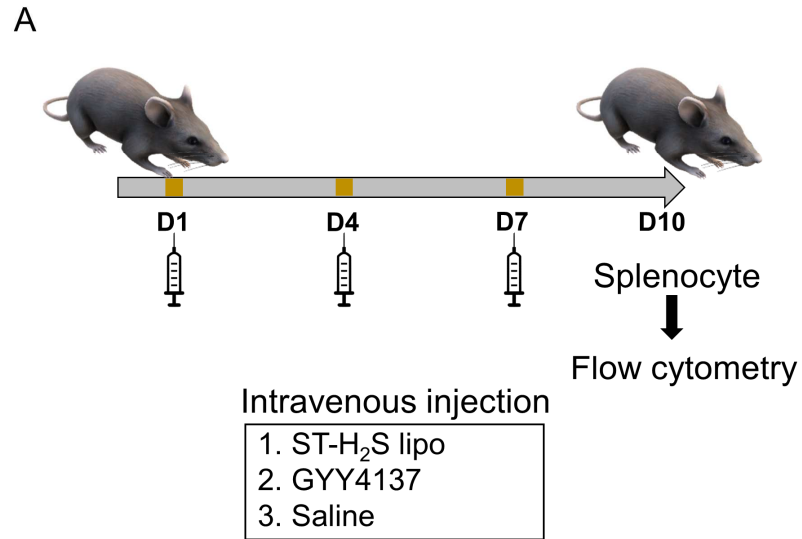
We also tested whether ST-H<sub>2</sub>S lipo successfully delivers H<sub>2</sub>S donors to the spleen (**Figure 2.16A**). We intravascularly injected saline, GYY4137, and ST-H<sub>2</sub>S lipo each into mice. Next day, the mice were euthanized, and the spleens were collected. The extracted spleens were homogenized and reacted with AgNO<sub>3</sub>. After the reaction, the spleen sample from the ST-H<sub>2</sub>S lipo injected mice showed the darkest color and the highest O.D. among the compared groups (**Figure 2.16B, C**), which confirmed that ST-H<sub>2</sub>S lipo can efficiently deliver H<sub>2</sub>S donors to the spleen. Furthermore, we studied whether the delivered H<sub>2</sub>S to the spleen affects the differentiation of immune cells using flow cytometry (**Figure 2.16A**). We observed changes in the differentiation of regulatory T cells (T<sub>reg</sub>, CD45<sup>+</sup>FOXP3<sup>+</sup>CD4<sup>+</sup> T cells) among the splenocyte population. The ST-H<sub>2</sub>S lipo injected group showed more T<sub>reg</sub> differentiation than that of the saline and GYY4137 injected groups ( $P < 0.01$  and  $P < 0.001$ , respectively) (**Figure 2.16B**).



**Figure 2.16** In vivo experiments of spleen targeting ability. A. The schematic design of spleen targeting ability of intravenously injected ST-H<sub>2</sub>S lipo (N= 3). After 48 hours of intravenous injection, extracted spleen were homogenized to splenocytes. Splenocytes of saline, GYY 4137, and

ST-H<sub>2</sub>S lipo were reacted with AgNO<sub>3</sub> then solution was calculated for O.D using 405 nm absorbance of microplate reader. B. The graph indicated that the optical density of saline, GYY4137, and ST-H<sub>2</sub>S lipo C. The images were splenocytes with AgNO<sub>3</sub>. Each tube is a spleen of each mouse.

\*: P < 0.5.



**Figure 2.17** T<sub>reg</sub> cell differentiation in spleen. A. The schematic design of comparing T<sub>reg</sub> cell differentiation in spleen. The reagents are intravenously



injected every 3 days (N= 3) in normal mice. The spleen was extracted at day10, and then splenocyte are analyzed B. The dot plot of flow cytometry. The graph indicated that  $T_{reg}$  of ST-H<sub>2</sub>S lipo is significantly more differentiated than GYY4137 (P < 0.001) and saline (P < 0.01). ST-H<sub>2</sub>S lipo: spleen targeting H<sub>2</sub>S lipo,  $T_{reg}$ : regulatory T cell, \*\*: P < 0.01, \*\*\*: P < 0.001.

### 2.3.5 Reflecting properties of PEG in H<sub>2</sub>S lipos

The PEG is the most widely used polymer for drug delivery. By adding PEG to nanoparticles, the effects of 1) preventing self-aggregation, 2) enhancing stability, and 3) extending circulation time are brought about. The PEG shapes a steric barrier on the surface of the liposome to inhibit membrane fusion, resulting in preventing self-aggregation and increasing stability. In the size stability test of H<sub>2</sub>S lipo, it was confirmed that the size change tends to decrease as the mass ratio of PEG increases (**Figure 2.7, Table 5**). Also, PEG extends circulation time because it has excellent water solubility and reduces biological interaction. In in vivo PET images, the circulation half-life of H<sub>2</sub>S lipo<sub>5k-2</sub> was 4.4 hours, and that of H<sub>2</sub>S lipo<sub>5k-12</sub> was 14.7 hours, which increased more 3-fold changes (**Table 6**). From this, it can be seen that the circulation time increases as the PEG density of H<sub>2</sub>S lipo increases. PEG reduces biological interaction because it has characteristics of a steric barrier and conformational cloud. In the fluorescence images of released H<sub>2</sub>S, it was identified that as the PEG density increased, less H<sub>2</sub>S was released (**Figure 2.9**). This may be due to the decrease in biological interaction with the increase in PEG.

H<sub>2</sub>S lipos reflect the characteristics of PEG, which is non-ionic

hydrophilic polymer. First, in the result of zeta potential study, the non-ionic characteristic of PEG is reflected because the surface net charge becomes neutral as the PEG density of H<sub>2</sub>S lipo increases (**Figure 2.6C**). Second, the size changes of H<sub>2</sub>S lipo according to the PEG lengths was identified. At the same mass ratio (DSPC : PEG), it was confirmed that the size of H<sub>2</sub>S lipos containing PEG; 2 kDa was smaller than that of H<sub>2</sub>S lipos containing PEG; 5 kDa (**Table 5**). In addition, it is known that PEG affects drug loading efficiency. As the PEG density increases, the membrane permeability increases, and the loading of water-soluble drugs decreases. Conversely, it prevents the desorption of hydrophobic drugs. In the result of the loading efficiency experiment of H<sub>2</sub>S lipo, it was confirmed that there was no significant difference according to PEG density (**Figure 2.6B**). It could be because GYY4137, the H<sub>2</sub>S donor, is a water-soluble drug and can be dissolved in an organic solvent. To sum up, H<sub>2</sub>S lipos showed different characteristics depending on the type and amount of PEG, reflecting the characteristics of PEG, a non-ionic hydrophilic polymer (74, 76, 84-88).

## 2.4 Summary

In chapter 2, we developed a simple spleen targeted delivery strategy for H<sub>2</sub>S donor using one of the most widely used drug delivery systems, a PEGylated liposome, through functional evaluations by in vitro and in vivo experiments. First, through various characterization methods, H<sub>2</sub>S lipos with high stability among PEGylation strategies were identified, and excellent loading ability and no cytotoxicity were confirmed. In in vitro experiments, H<sub>2</sub>S lipos showed superior H<sub>2</sub>S release ability and inducing anti-inflammatory differentiation of macrophage cell line. In vivo PET imaging quantitatively showed that H<sub>2</sub>S lipo<sub>5k-2</sub> has excellent spleen targeting ability. In the in vivo studies using normal mouse, we identified a significant uptake of spleen of ST-H<sub>2</sub>S lipo and distinctive ability of H<sub>2</sub>S release. In addition, ST-H<sub>2</sub>S lipo successfully induced T<sub>reg</sub> differentiation in the spleen compared to the unloaded H<sub>2</sub>S donor. These results suggest the potential of the immunomodulatory function of ST-H<sub>2</sub>S lipo and lead us to the next experiment.

### **Chapter 3.**

#### **Therapeutic effect of the systemic immune modulator in the colitis model**

### 3.1 Backgrounds

Gasotransmitters are endogenously produced by various enzymes in mammalian cells. NO production is catalyzed from L-arginine by a family of NO synthases (NOSs). CO production is catalyzed by a family of heme oxygenases (HMOXs, also known as HOs) which drives oxidative degradation of heme. H<sub>2</sub>S production is catalyzed by CBS, CSE, and MPST (also known as MST) (11, 89, 90). Studies have reported the expression of gasotransmitter related enzymes in UC patients and the colitis model. For H<sub>2</sub>S related enzymes, their degree of expression is dissimilarly reported. Kyle et al. reported that CSE expression and H<sub>2</sub>S synthase are significantly increased in the colitis model (>12-fold and >7-fold, respectively) (91). Additionally, Hirata et al. reported that the expression of CBS and CSE is significantly increased (92). These studies suggested that the increased H<sub>2</sub>S by up-regulated enzymes promotes ulcer healing and ameliorates inflammation as an anti-inflammatory molecule and not pathogenesis. In contrast, Wallace et al. reported that the expression of CBS and CSE is significantly decreased in severe colonic injury of the colitis model (18). De et al. reported that the expression of CBS mRNA and protein in the colitis model is significantly down-regulated and H<sub>2</sub>S levels decreased (93). In UC patients, Shanwen et al. reported that CBS expression is decreased

compared to normal sites (94). To sum up, studies have shown that 1) expression of H<sub>2</sub>S related enzymes could be increased or decreased, and 2) increased H<sub>2</sub>S by up-regulated enzymes drives anti-inflammatory reaction. This evidence could be one of the rationales to use H<sub>2</sub>S donor therapeutics in UC. In CO related enzymes, HMOX-1 has been mainly studied. In UC patients, HMOX-1 expression was heterogeneous according to severity. HMOX-1 expression is increased at the site of a mild inflammatory reaction. On the other hand, HMOX-1 expression is decreased at the site of a severe inflammatory reaction (95). These results may explain our observation using transcriptomics data that showed an increased expression of HMOX-1 in the colitis model but decreased the expression in patients with UC. Because CO is decreased in severe UC, it could be a therapeutic material as well. Recently, it has been reported that CO delivery by gas-entrapping materials induced a therapeutic effect in the DSS induced colitis mouse model (96). NO has long been known to be involved in inflammatory reactions in UC. NO especially leads to tissue injury by oxidative metabolism and is produced in activated macrophages and neutrophils. Additionally, the NOS activity in UC patients was 10-fold higher than in the normal group (97, 98), which is a similar finding with our transcriptomics data analysis in the colitis model and patients with UC.

In gastrointestinal systems, the effects of H<sub>2</sub>S in immune modulation are well reported in various pathological conditions. Induction of a stomach ulcer in a rat resulted in an increased endogenous H<sub>2</sub>S level, and an inhibitor of endogenous H<sub>2</sub>S reduced the ulcer healing process (19). In the colitis model, H<sub>2</sub>S donors showed notable therapeutic effects. Inhibiting the endogenous synthesis of H<sub>2</sub>S resulted in severe mucosal injury and inflammation of the colon. In contrast, H<sub>2</sub>S donors significantly reduced the colitis severity and proinflammatory tumor necrosis factor (TNF)- $\alpha$  cytokine (18). Furthermore, delivering H<sub>2</sub>S into the colon helps to restore the microbiota biofilm and increases the mucus granules (17). Among immune cells, T<sub>reg</sub> has an important role in the pathogenesis of IBD (5). In T<sub>reg</sub> depleted mice, inflammatory cytokine and aggravated inflammation of the intestine were increased. In addition, T<sub>reg</sub> cells are responsible for inhibiting the interaction between T cell and antigen presenting cells (APCs) (22, 56, 79, 99). Additionally, IBD patients showed apoptosis of T<sub>reg</sub> at the inflammation site of the colon (100-103). Therefore, we selected T<sub>reg</sub> differentiation as a key immune modulation marker to assess the protective effect of the ST-H<sub>2</sub>S lipo in the DSS induced colitis model in this study.



## **3.2 Material and Methods**

### **3.2.1 Transcriptomics-level analysis of gasotransmitters**

The RNA expression profiles of UC patients (GSE38713) and DSS induced colitis model (GSE31906) were derived from gene expression omnibus (GEO) of national center for biotechnology information (NCBI). Investigated RNA expression of gasotransmitter related enzymes were cystathionine-beta-synthase (CBS), cystathionine-gamma-lyase (CTH), 3-mecaptopyruvate sulfurtransferase (MPST), nitric oxide synthase 1(NOS1), nitric oxide synthase 2 (NOS2), heme Oxygenase 1 (HMOX1), heme oxygenase 2 (HMOX2). The CBS, CTH, and MPST released H<sub>2</sub>S. NOS1 and 2 released NO. HMOX1 and 2 released CO. In GSE38713, rectum or sigmoid colon was extracted from UC patients (n = 23) and control group (n = 20) for RNA expression analysis. Subjects which were diagnosed at least 6 months before were selected to UC patients. Subjects which had no lesion or mild symptoms in gastrointestinal tracts were selected to control group. In GSE31906, distal colon (about 8 cm) was extracted from colitis model (n = 27) and control group (n = 9). The raw data of GSE38713 and GSE31906 was analyzed using Bioconductor tool of R software (Parteck Inc, MO, USA) (104, 105).

### **3.2.2 In vivo biodistribution of fluorescent H<sub>2</sub>S lipo in DSS induced colitis model**

Fluorescent H<sub>2</sub>S lipo was used to compare biodistribution between ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo in DSS induced colitis model. Fluorescence dye, 1,1'-dioctadecyl-3,3,3',3'-tetramethyl-indotricarbocyanine iodide (DiR), was dissolved in organic solvent with H<sub>2</sub>S lipo composite before evaporate phase. The 8-week-old C57/BL6 mice were induced colitis model using DSS. The reagents were intravenously injected to colitis model mice at 7 days from giving DSS. Next day, injected mice were sacrificed and dissected organ. The collected organs were heart, muscle, lung, kidney, liver, spleen, small intestine, and colon. Fluorescence images of organs were acquired by IVIS instrument. All fluorescence images of organs were quantified using living image 2.5.

### **3.2.3 Animals and DSS induced colitis model**

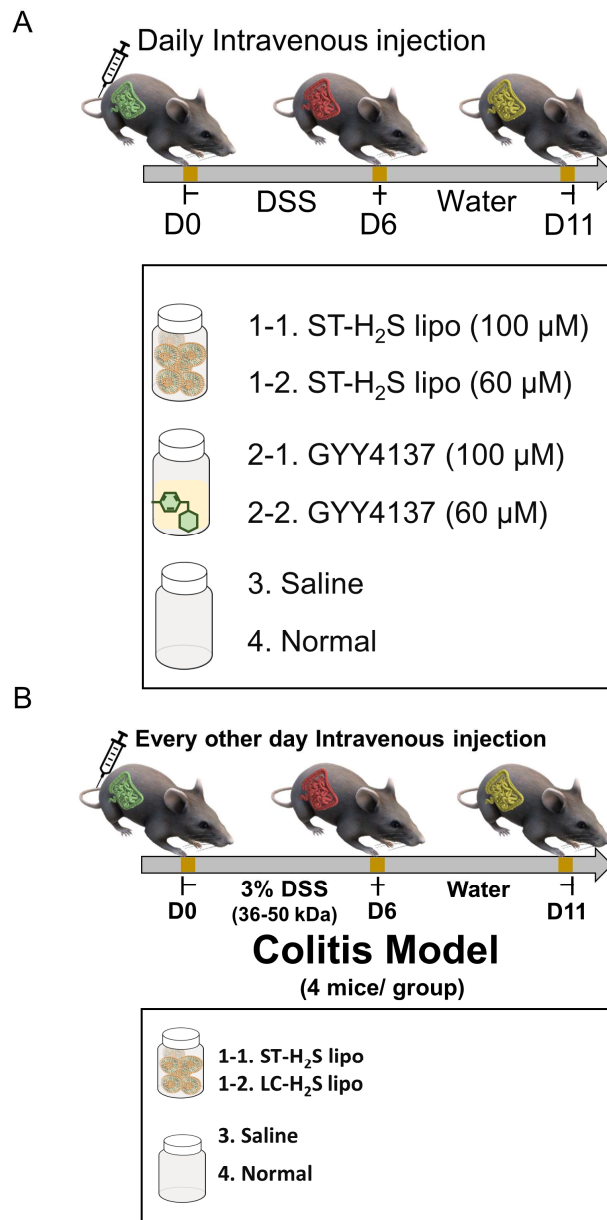
The C57BL/6 female mice were purchased from the Institute for Experimental Animals, College of Medicine, Seoul National University. All

experimental protocols were screened and approved by the Institutional Animal Care and Use Committee of Seoul National University. All mice were housed in specific pathogen free (SPF) facility. The colitis model was induced by 3% DSS (36-50 kDa). The mice received 3% DSS water for 7 days. Then normal drinking water were given for 5 days. All animal experimental protocols were approved by the Institutional Animal Care and Use Committee of Seoul National University.

#### **3.2.4 DSS induced colitis model treatment**

The 8-week-old C57/BL6 female mice were induced colitis model using DSS. Tap water with 3% DSS was given except for normal group (106). 3% DSS water was given up to 7 days in the study for comparing groups which are normal, saline, GYY 4137 (60  $\mu$ M and 100  $\mu$ M), ST-H<sub>2</sub>S lipo (60  $\mu$ M and 100  $\mu$ M) (107). In comparison test between ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo, 3% DSS water was given up to 6 days in the study. The reagents were intravenously injected every day or every other day (**Figure 3.1**). The weight change (%) was daily recorded for checking disease condition. The colitis models were sacrificed using CO<sub>2</sub> chamber. The spleen and colon were extracted. The red blood cell (RBC) lysis buffer was used when spleen

was extracted. The whole colon length was examined for comparing contraction by inflammation. Distal 3 cm of colon samples were used to colon weight and H&E staining. The colon per length was examined for granular immune cell accumulation. The histological analysis was conducted using H&E images of colon. The method of inflammation score was performed according to the reference (57, 108). The score is marked by 0 to 11. The categories of inflammation score are severity of inflammation (1 to 4), extent of inflammation (1 to 3), presence of epithelial hyperplasia (0 or 1), and presence of ulceration (0 or 3).



**Figure 3.1** The schematic design of therapeutic experiments in colitis model.

A. The comparison of therapeutic effect between normal, saline, GYY4137, and H<sub>2</sub>S lipo in DSS induced colitis model. B. The comparison of therapeutic effect between normal, saline, ST-H<sub>2</sub>S lipo, LC-H<sub>2</sub>S lipo in DSS induced colitis model.

### **3.2.5 Immunofluorescence**

The extracted spleen and distal colon were stored in 4% paraformaldehyde solution. After paraffin blocking, the paraffins were sectioned to 4  $\mu\text{m}$  thickness. The sectioned slices were processed by several phase for immunofluorescence. The xylene was used to remove paraffin in tissue and then ethanol with serial concentration was used to remove xylene in tissue. The distilled water was used between each procedure. For antigen retrieval, sectioned tissue was incubated with 0.1% of trypsin for 25 min at 37 °C. Then 0.1% of Triton X-100 was used to permeabilization for 10 min. The 10% fetal bovine serum was used for blocking. After procedure of antibody incubation overnight at 4 °C, Hoechst 33342 was used to stain nuclei for 10 min. All Images were acquired using confocal scanning microscope.

### **3.2.6 Statistical analyses**

The statistics were performed using GraphPad Prim 8 statistical analysis. Student's T tests or Mann-Whitney tests were used to compare RNA expression differences from GEO data. One-way analysis of variance

(ANOVA) with Tukey post hoc test was used to compare three or more groups. The differences with  $P < 0.05$  were considered significant.

### **3.2.7 Comparison of H&E-stained images and fluorescent images**

It is widely accepted that hematoxylin and eosin (H&E) staining can exhibit histological characteristics in diverse tissues such as lymphoma, breast cancer, and prostate cancer. When identifying spatial clusters from H&E-stained images, various clustering algorithms, including K-means algorithm, Watershed algorithm and Otsu thresholding method, have been proposed. Among them, K-means algorithm is most popular. Spleen tissues are especially characterized by the structure of red pulp, white pulp, and marginal zone, so it is expected that identification of these histological structures through clustering algorithms can be easily performed. K-means clustering was used according to the literature. After defining a patch of  $32 \times 32$  size around each pixel in a H&E staining image, 512 features were extracted for each patch by using the VGG16 pre-trained CNN model. After that, K-means clustering was applied to cluster pixels in the image. K was set as 5 to represent background, border of each tissue, red pulp, marginal zone, and white pulp, and then the border of each tissue was also indicated as the background. Lastly, each defined section of the H&E image was

compared with the corresponding fluorescence image to quantify the amount of fluorescence in each histological region.

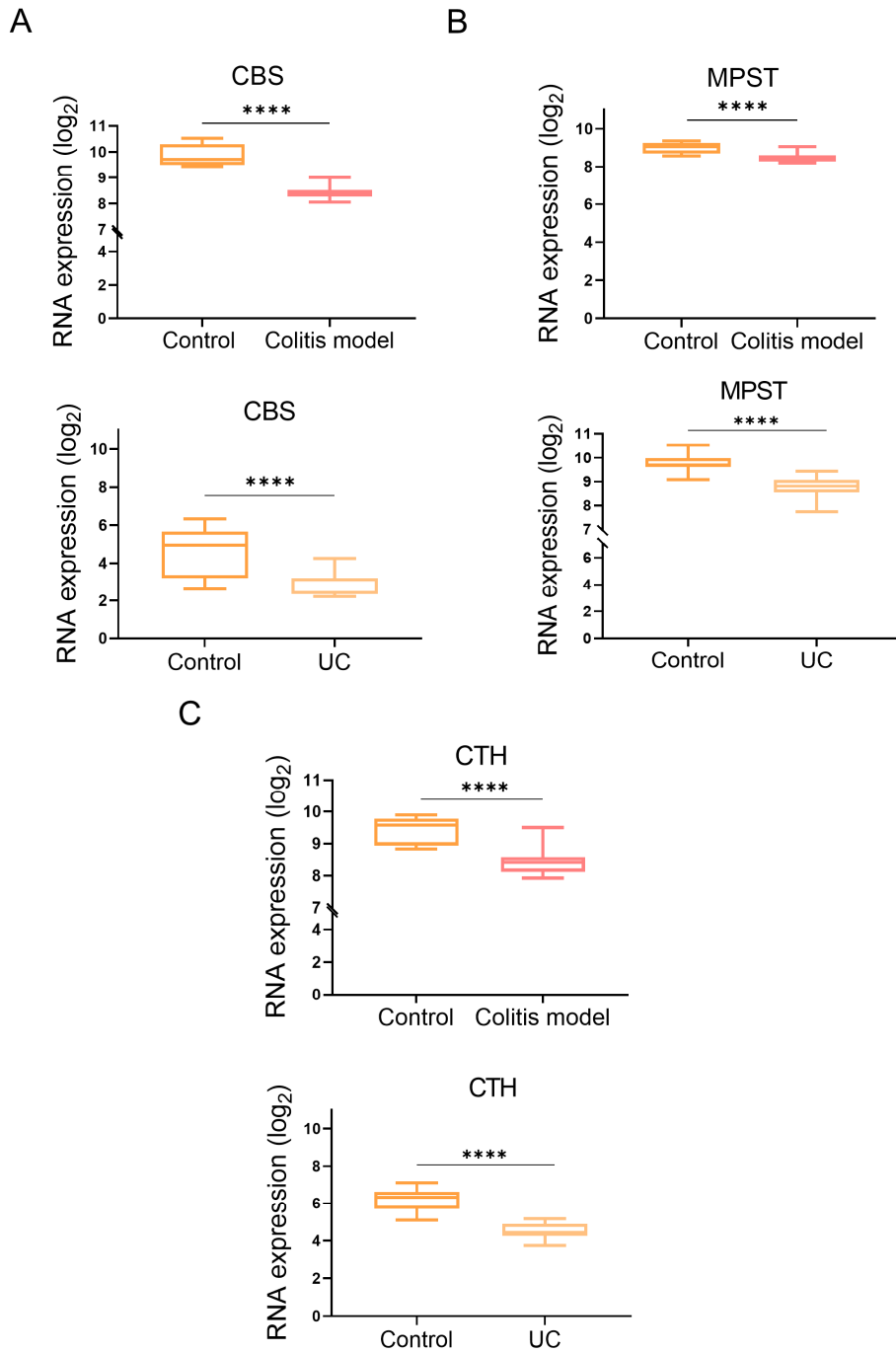
### **3.3 Results and Discussion**

#### **3.3.1 Transcriptomics-level evidence for the potential of H<sub>2</sub>S based therapeutics in ulcerative colitis**

To explore the potential of H<sub>2</sub>S based therapeutics in UC, we examined the gene expression of H<sub>2</sub>S synthesizing enzymes in patients with ulcerative colitis (UC) and in the mouse model of colitis. H<sub>2</sub>S is synthesized by three enzymes, cystathionine-beta-synthase (CBS), cystathionine-gamma-lyase (CTH), and 3-mercaptopyruvate sulfurtransferase (MPST) (109). In both the UC patients and mouse model of colitis, gene expressions of H<sub>2</sub>S synthesizing enzymes were significantly reduced compared to those of the normal control (**Figure 3.2**) ( $P < 0.0001$ , all graphs). This observation could be one of the rationales to use H<sub>2</sub>S donor therapeutics in UC patients. Meanwhile, the gene expression of the other gasotransmitters (NO and CO) synthesizing enzymes were not significantly decreased in colitis. In contrast to the H<sub>2</sub>S synthesizing enzymes, the CO synthesizing enzymes, HMOX1 and HMOX2, showed a significantly higher expression in the colitis model

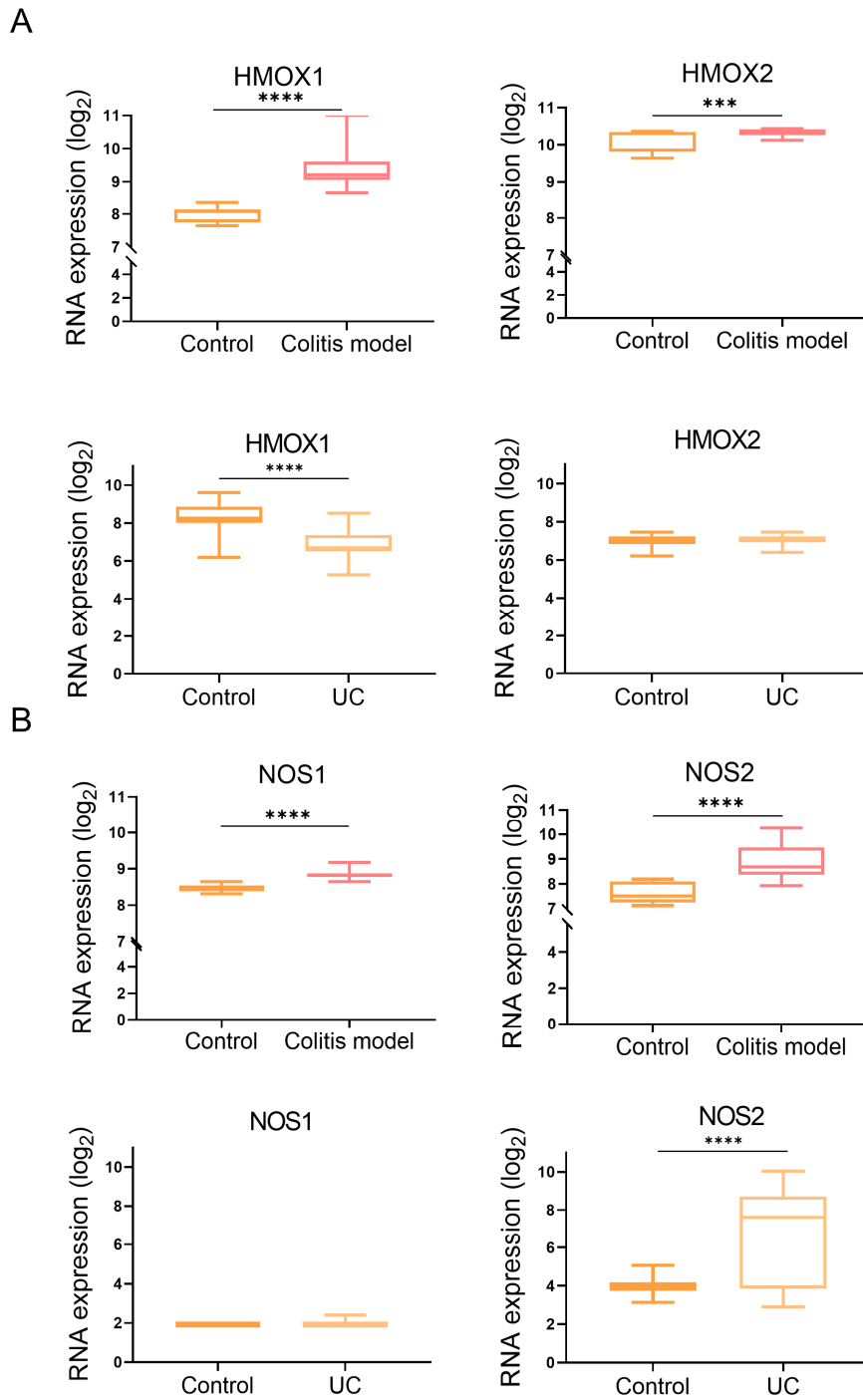


compared to the control group ( $P < 0.0001$ ,  $P < 0.001$ , respectively). In the UC patients, HMOX1 expression was significantly lower than in the control group, and HMOX2 expression was not significantly different compared to normal tissue ( $P < 0.0001$ ) (**Figure 3.3A**). Moreover, the NO related enzymes, NOS1 and NOS2, showed an increased expression in the mouse colitis model compared to the control group (**Figure 3.3B**) ( $P < 0.0001$ , all graphs). Taken together, H<sub>2</sub>S is the only gasotransmitter whose related genes are downregulated in both the mouse model of colitis and patients with UC.



**Figure 3.2** The RNA expression analysis of enzymes related with H<sub>2</sub>S in both DSS induced colitis model and ulcerative colitis patients. The

comparison of expression of H<sub>2</sub>S related enzymes which are CBS, MPST, and CTH. The graphs of DSS colitis model (top) and ulcerative colitis patient (bottom) indicate quantified RNA expression differences.



**Figure 3.3** The RNA expression analysis of enzymes related with NO and CO. The graphs of DSS induced colitis model (top) and ulcerative colitis

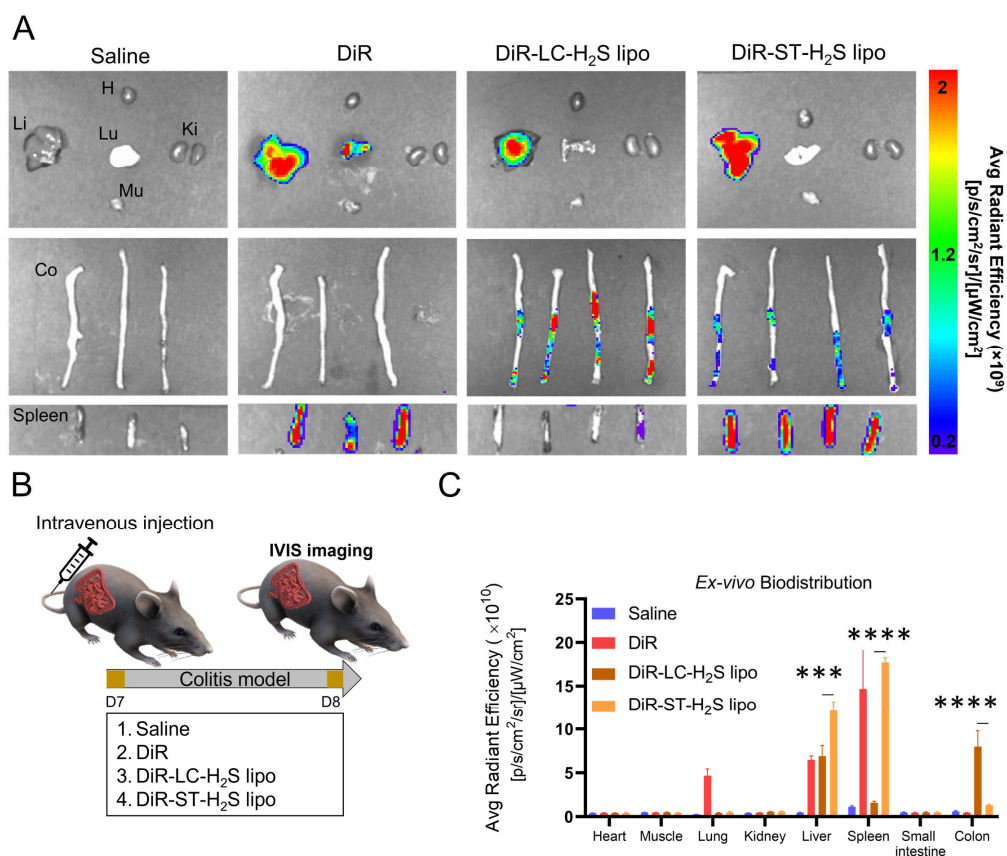
patient (bottom) indicate RNA expression differences compared to control group A. The comparison of expression of NO related enzymes which are HMOX1 and HMOX2. B. The comparison of expression of CO related enzymes which are NOS1 and NOS2. \*\*\*:  $P < 0.001$ . \*\*\*\*:  $P < 0.0001$ .

### 3.3.2 In vivo biodistribution of H<sub>2</sub>S lipo in a colitis model

Before we moved on to examine the therapeutic effect of H<sub>2</sub>S lipo in a DSS-induced colitis model, we evaluated the biodistribution of ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo in the model. H<sub>2</sub>S lipo as a versatile platform could signal fluorescence through the intercalation of DiR which is the one of the fluorescent dyes. Saline, DiR, DiR labeled ST-H<sub>2</sub>S lipo and DiR labeled LC-H<sub>2</sub>S lipo were each systemically administered into the colitis model. Organs were removed after 24 hours, and fluorescence images were obtained. We hypothesized that ST-H<sub>2</sub>S lipo accumulates in the spleen, and LC-H<sub>2</sub>S lipo accumulates more in the inflamed site of the colon due to a longer circulation time. As expected, ST-H<sub>2</sub>S lipo showed prominent uptake in the spleen while LC-H<sub>2</sub>S lipo showed minimal uptake ( $P < 0.0001$ ). In the colon, both LC-H<sub>2</sub>S lipo and ST-H<sub>2</sub>S lipo accumulated in the colon, and the uptake was significantly higher for LC-H<sub>2</sub>S lipo compared to ST-H<sub>2</sub>S lip ( $P < 0.0001$ ) (**Figure 3.4**). Consequently, we identified that the PEGylation strategies of H<sub>2</sub>S lipo could be suitable for systemic or local immunomodulation in the colitis model. ST-H<sub>2</sub>S lipo demonstrated an excellent spleen targeting ability and a moderate targeting ability to inflammatory sites which therefore may elicit a systemic and local

immunomodulatory effect. Meanwhile, LC-H<sub>2</sub>S lipo may be suitable for delivery of H<sub>2</sub>S to an inflamed site due to its long-circulating property.

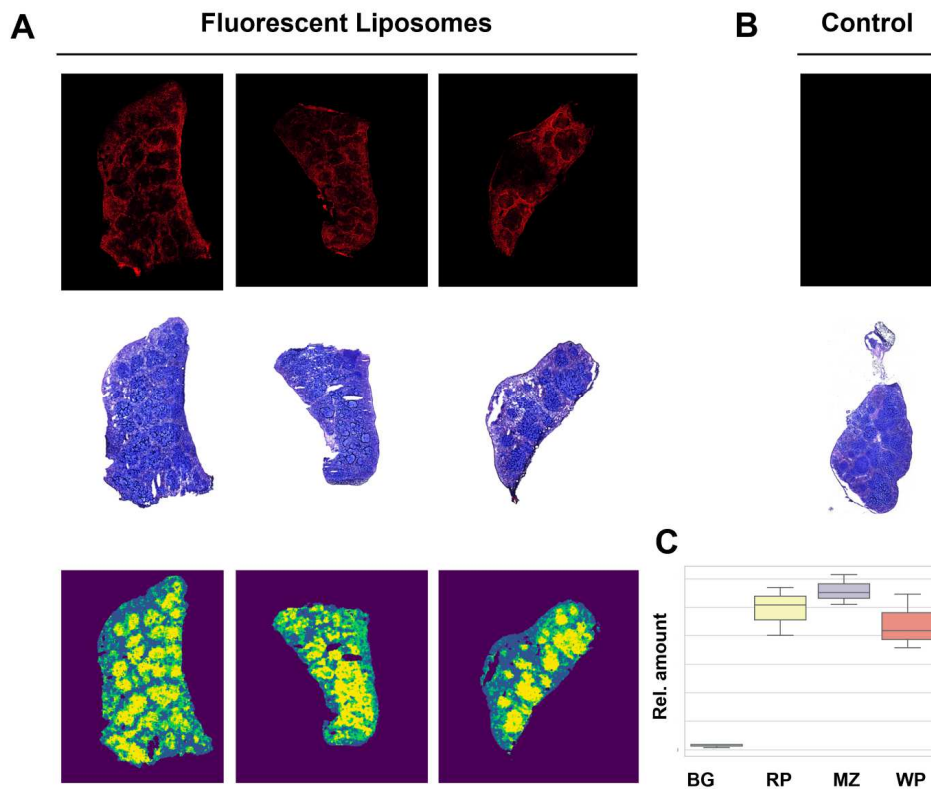
We further explored the splenic distribution of H<sub>2</sub>S lipo through analysis using fluorescent H<sub>2</sub>S lipo and H&E images (**Figure 3.5**). We systemically administrated DiD labeled ST-H<sub>2</sub>S lipo in normal mice. After 24 hours, spleen was extracted and used for the analysis. As expected, the fluorescence intensity was not shown in the control tissue. Also, the fluorescence signals were well aligned with the histological structures in the spleen. Through evaluating the amount of fluorescent signal in each compartment of the spleen, relatively high uptake of fluorescent nanoparticles in marginal zone and relatively low uptake in white pulp were observed. This suggests that immune cells in the Marginal Zone significantly affect the action of H<sub>2</sub>S lipo.



**Figure 3.4** The ex vivo biodistribution in DSS induced colitis model. A. Biodistribution of saline injected group, DiR injected group, DiR-LC-H<sub>2</sub>S lipo injected group, and DiR-ST-H<sub>2</sub>S lipo injected group were compared (n = 3; saline and DiR, n = 4; DiR-LC-H<sub>2</sub>S lipo, DiR-ST-H<sub>2</sub>S lipo). The ex vivo fluorescence images showed organs which are heart (h), liver (Li), lung (Lu), kidney (Ki), muscle (Mu), colon (Co), and spleen. Organs were collected after 24 hours intravenously injection. Ex vivo fluorescence images were acquired by IVIS. B. The schematic design of ex vivo biodistribution imaging in DSS induced colitis model. C57BL/6 mice were



induced colitis using 3% DSS (36-50 kDa). C. The graph indicates comparison of quantified average radiant efficiency of extracted organs between saline, DiR, DiR-LC-H<sub>2</sub>S lipo, and DiR-ST-H<sub>2</sub>S lipo. \*\*\*: P < 0.001. \*\*\*\*: P < 0.



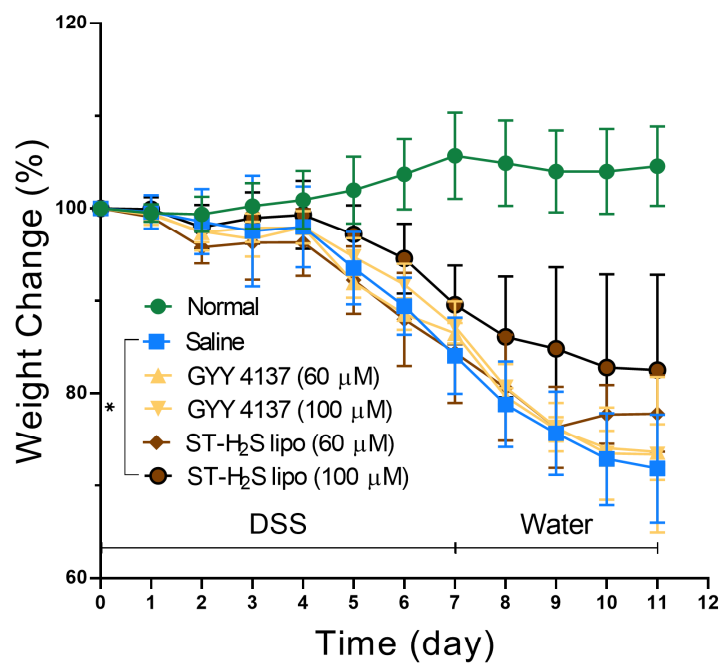
**Figure 3.5 Analysis using images of fluorescent H<sub>2</sub>S lipo and H&E images** (A) Three spleen tissues from mice intravenously injected with DiD ST-H<sub>2</sub>S lipo. From top to bottom, fluorescent images, H&E images, and resultant images from K-means clustering with H&E images were represented in order. (B) A spleen tissue from an untreated mouse. A fluorescent image of the same condition with a and a H&E image were represented. (C) Comparison of the amount of fluorescence intensity in each spatial compartment demarcated by background (BG), red pulp (RP), marginal zone (MZ), and WP (white pulp).

### 3.3.3 Therapeutic effect of H<sub>2</sub>S lipo in the colitis model

The therapeutic effect of the H<sub>2</sub>S lipo and unloaded H<sub>2</sub>S donor was compared in the DSS-induced colitis model (**Figure 3.1A**). We daily intravenously injected GYY4137 (60 μM), GYY4137 (100 μM), ST-H<sub>2</sub>S lipo (60 μM), and ST-H<sub>2</sub>S lipo (100 μM) each. The weights change (%) between day 0 and day 11 for the normal, saline, GYY4137 (60 μM), GYY4137 (100 μM), ST-H<sub>2</sub>S lipo (60 μM), and ST-H<sub>2</sub>S lipo (100 μM) treated groups were  $104.57 \pm 4.3\%$ ,  $71.84 \pm 5.85\%$ ,  $73.62 \pm 3.01\%$ ,  $73.34 \pm 8.41\%$ ,  $77.80 \pm 4.15\%$ , and  $82.52 \pm 10.28\%$ , respectively. Only the ST-H<sub>2</sub>S lipo (100 μM) treated group showed a statistically significant less weight reduction compared to the saline treated DSS colitis model (Repeated Measure Analysis Of Variance, Tuckey post-hoc test,  $P = 0.032$ ) (**Figure 3.6**). The degree of inflammatory process for each group was observed with H&E stained slides of the colon epithelium. In the saline treated DSS induced colitis models, the epithelial structure was almost entirely destructed, and immune cells were massively infiltrated. In the GYY4137 (100 μM) treated models, although the mucosal structures were slightly more preserved compared to the saline treated model, mucosal ulcerations

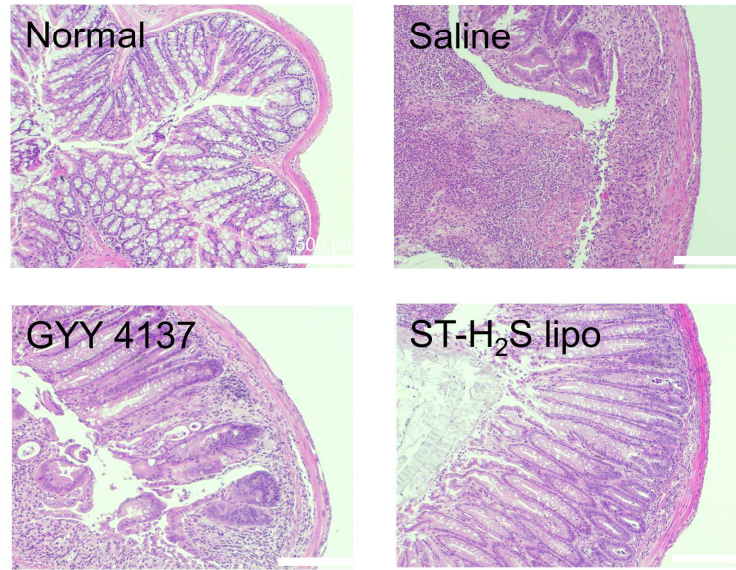
were found. Moreover, immune cells were infiltrated into level of the muscularis mucosa. Interestingly, the ST-H<sub>2</sub>S lipo (100 μM) treated models showed a preserved mucosa structure with intact goblet cells, and only a small number of immune cells were infiltrated (**Figure 3.8A**). Inflammation scores were measured with the H&E slides and compared between the groups. The GYY4137 treated models showed a significantly lower score than that of the saline treated model ( $P < 0.01$ ). The ST-H<sub>2</sub>S lipo (100 μM) treated group showed a significantly lower score than those of the saline and GYY4137 (100 μM) treated groups ( $P < 0.0001$  and  $P < 0.05$ , respectively) (**Figure 3.8B**). Furthermore, alcian blue staining of the colon epithelium was performed to evaluate the mucin component after treatment. The GYY4137 treated models tended to preserve mucin to some extent, unlike the saline treated models in which the mucin component was barely detected ( $P = 0.14$ ). The ST-H<sub>2</sub>S lipo (100 μM) treated group showed a significantly higher alcian blue intensity than that of the saline treated group ( $P < 0.5$ ) (**Figure 3.8**). In terms of colon length, only the ST-H<sub>2</sub>S lipo group showed significant less contraction of colon compared to the saline group (ST-H<sub>2</sub>S lipo (60 μM),  $P < 0.05$ ; ST-H<sub>2</sub>S lipo (100 μM),  $P < 0.01$ ). In terms of colon weight and length which reflect the degree of inflammation of the colon, we identified that the ST-H<sub>2</sub>S lipo (100 μM) treated model had a significantly

lower value compared to the saline, GYY4137 (60  $\mu\text{M}$ ), GYY4137 (100  $\mu\text{M}$ ), and ST-H<sub>2</sub>S lipo (60  $\mu\text{M}$ ) treated models ( $P < 0.001$ ,  $P < 0.05$ ,  $P < 0.01$ , and  $P < 0.05$ , respectively) (**Figure 3.9**). To explore the systemic immune modulation effect, the T<sub>reg</sub> proportion was evaluated in bone marrow and spleen samples after treatment (**Figure 3.11**). The ST-H<sub>2</sub>S lipo (100  $\mu\text{M}$ ) treated group showed more T<sub>reg</sub> differentiation than that of the saline treated group in the spleen ( $P < 0.05$ ). Additionally, the ST-H<sub>2</sub>S lipo (100  $\mu\text{M}$ ) treated group showed more T<sub>reg</sub> differentiation of bone marrow compared to the saline and GYY4137 (100  $\mu\text{M}$ ) treated groups ( $P < 0.05$ ,  $P < 0.05$ , respectively) (**Figure 3.11**). To sum up, we identified that ST-H<sub>2</sub>S lipo showed a higher therapeutic effect than that of the unloaded H<sub>2</sub>S donor in the DSS induced colitis model. ST-H<sub>2</sub>S lipo was able to induce T<sub>reg</sub> differentiation in the spleen and bone marrow.

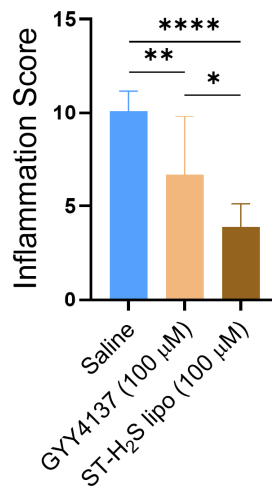


**Figure 3.6** The comparison of weight change (%) between normal, saline, GYY4137, and H<sub>2</sub>S lipo. The graph indicates comparison of weight change in DSS induced colitis model (n = 5, respectively). Weight change (%) shows the change based on 0 day.

A



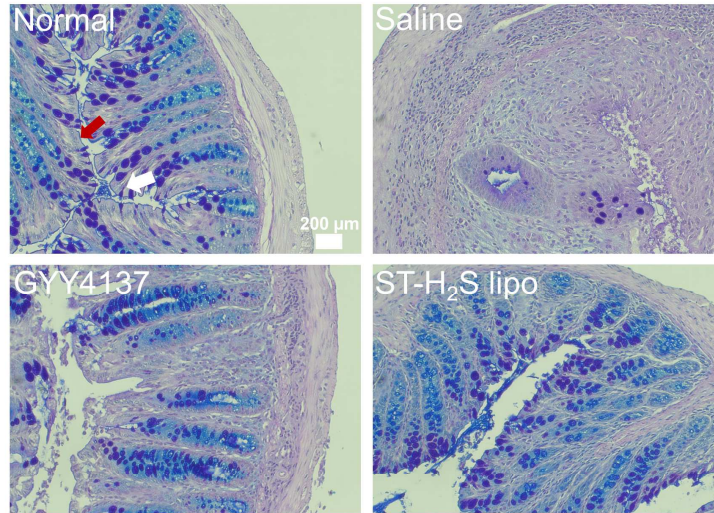
B



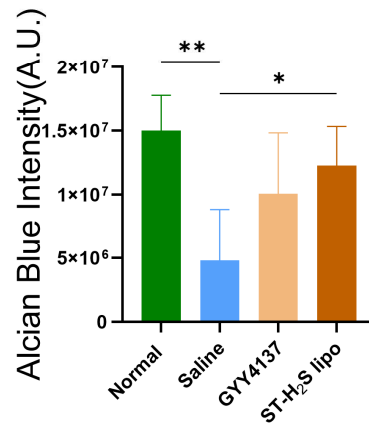
**Figure 3.7** The comparison of inflammatory process between normal, saline, GYY4137, and H<sub>2</sub>S lipo. A. The H&E images of colon of colitis model. B. The graph indicates comparison of inflammation score (n = 8, respectively).

\*: P < 0.05, \*\*: P < 0.01, \*\*\*\*: P < 0.0001.

A



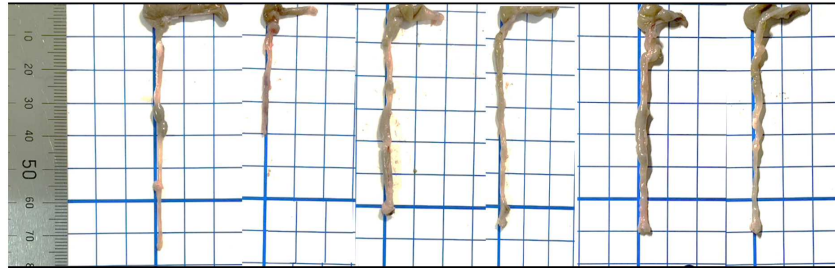
B



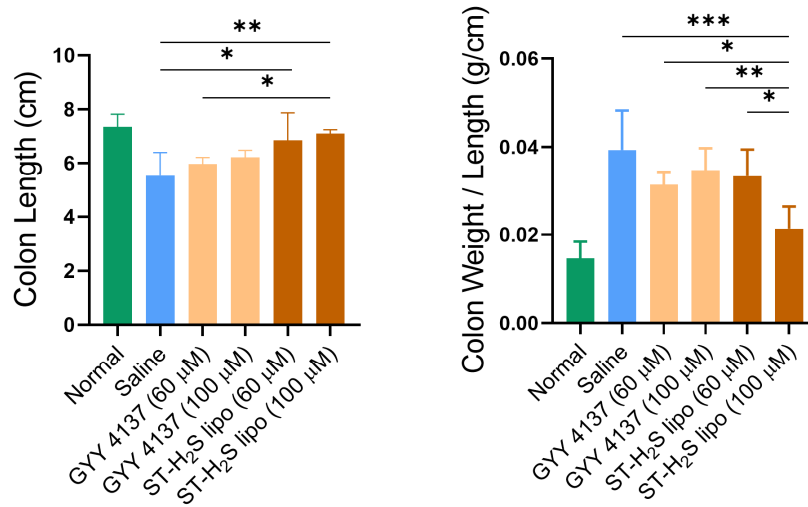
**Figure 3.8** Alcian blue colon staining of treatment of DSS induced colitis model. A. mucin was stained by alcian blue. Mucin is included in mucus on the epithelial surface and goblet cells. The red arrow indicates mucus and white arrow indicates goblet cells. B. In the graph of alcian blue intensity, Normal and ST-H<sub>2</sub>S lipo group are significantly more stained than saline group ( $P < 0.01$  and  $P < 0.05$ , respectively). ST-H<sub>2</sub>S lipo: spleen targeting H<sub>2</sub>S lipo, \*:  $P < 0.05$ , \*\*:  $P < 0.01$



A

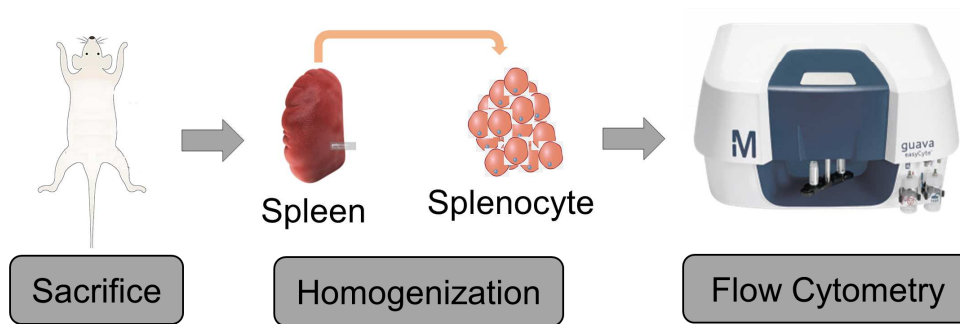


B

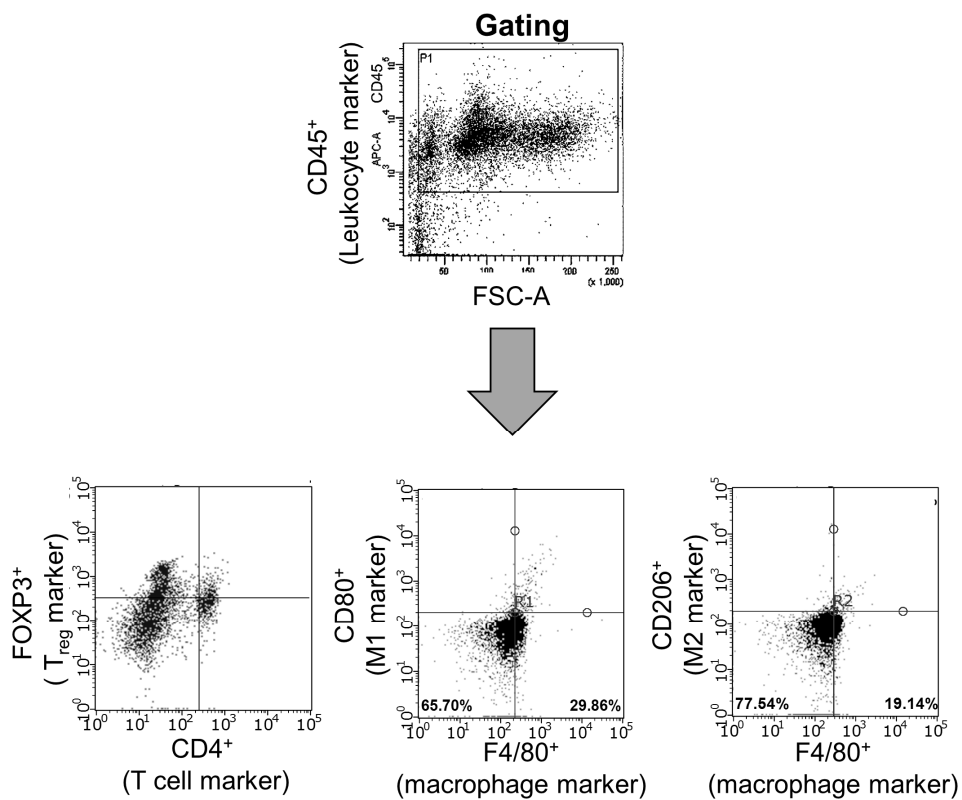


**Figure 3.9** The comparison of colon lengths between normal, saline, GYY4137, and H<sub>2</sub>S lipo. A. The representative images of extracted colon in colitis model. B. The graph (left) indicates comparison of colon length (n = 5, respectively). The graph (right) indicates comparison of colon weight/length (n = 5, respectively). \*: P < 0.05, \*\*: P < 0.01, \*\*\*: P < 0.001.

A

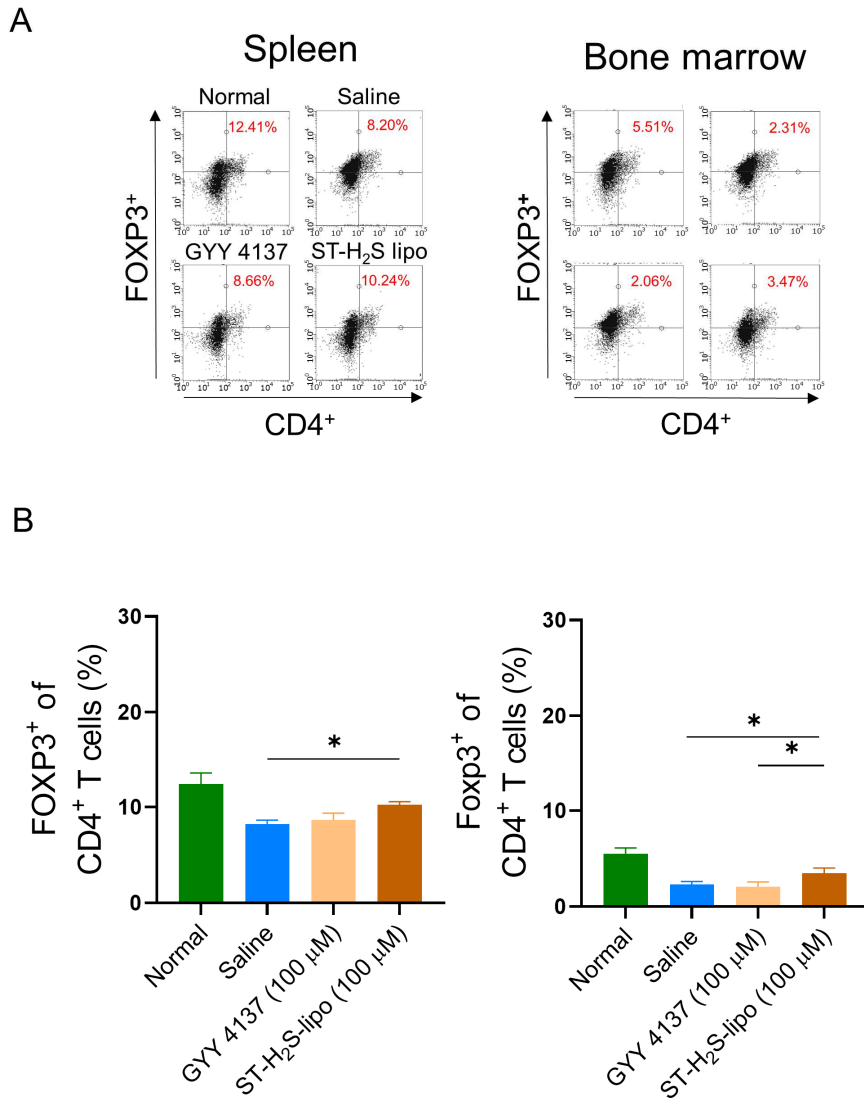


B



**Figure 3.10** Gating Strategy of flow cytometry. A. Procedures of flow cytometry using splenocyte B. Gating strategy of flow cytometry analysis. CD45 antibody was used as leukocyte marker. CD4 and FOXP3 antibodies

were used as regulatory T cell markers. CD80 and F4/80 antibodies were used as M1 macrophage markers. CD206 and F4/80 antibodies were used as M2 macrophage markers.



**Figure 3.11** The comparison of T<sub>reg</sub> differentiation between normal, saline, GYY4137, and H<sub>2</sub>S lipo in spleen and bone marrow. CD4 and FOXP3 antibodies are used as T<sub>reg</sub> cell marker. A. Dot plot of flow cytometry B. The graph (left) indicates comparison of quantified FOXP3<sup>+</sup> of CD4<sup>+</sup> T cells (%) in spleen (n = 3). The graph (right) indicates comparison of FOXP3<sup>+</sup> of CD4<sup>+</sup> T cells (%) in bone marrow (n = 3). \*: P < 0.05.

### 3.3.4 Comparison of therapeutic effect of colitis model between ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo

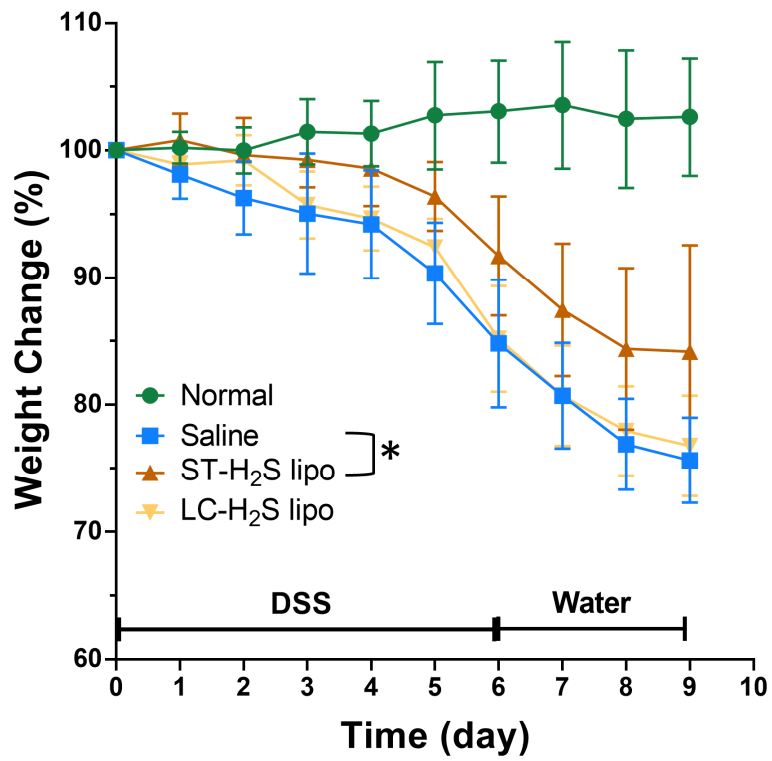
We further explored the therapeutic effects of ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo in the DSS induced colitis model. The weights change (%) at 10 days for the normal, saline, ST-H<sub>2</sub>S lipo, and LC-H<sub>2</sub>S lipo groups was  $102.61 \pm 4.63$ ,  $75.62 \pm 3.34$ ,  $84.16 \pm 8.39$ , and  $76.33 \pm 7.76$ , respectively (**Figure 3.1B, Figure 3.12**). The ST-H<sub>2</sub>S lipo treated group showed a significantly less weight change compared to the saline treated control group (Repeated Measure Analysis Of Variance and Tuckey post-hoc test,  $P = 0.02$ ). However, the LC-H<sub>2</sub>S lipo treated group showed no significant difference in weight change compared to the saline treated control group ( $P = \text{N.S.}$ ) (**Figure 3.12**). In the H&E staining, both the ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo treated groups showed less immune cell infiltration and epithelial destruction compared to the saline treated control group (**Figure 3.14**). Moreover, ST-H<sub>2</sub>S lipo had a lower inflammation score compared to the saline and LC-H<sub>2</sub>S lipo treated groups ( $P < 0.0001$ ,  $P < 0.01$ ; respectively) (**Figure 3.14**). In the comparison of the colon length, only the ST-H<sub>2</sub>S lipo treated group showed significant differences compared to the saline treated group ( $P < 0.05$ ). For the colon weight and length, the ST-H<sub>2</sub>S lipo treated group had a

significantly lower colon weight and length compared to the saline treated group ( $P < 0.05$ ) (**Figure 3.15**). To assess the systemic immune modulation effect, differentiation of  $T_{reg}$ , M1, and M2 macrophages in the spleen was evaluated using flow cytometry. Unlike LC-H<sub>2</sub>S lipo, ST-H<sub>2</sub>S lipo significantly induced more  $T_{reg}$  differentiation than that of the saline group ( $P < 0.05$ ). The ST-H<sub>2</sub>S lipo treated group tended to have less M1 differentiation ( $F4/80^+ CD80^+$ ) compared to the saline treated group ( $P = 0.053$ ). Additionally, the ST-H<sub>2</sub>S lipo treated group tended to have higher M2 ( $F4/80^+ CD206^+$ ) differentiation compared to the saline treated group ( $P = 0.15$ ) (**Figure 3.16**). In spleen and mucosal tissues,  $T_{reg}$  differentiation was assessed using  $T_{reg}$  immunofluorescence images. In the spleen, the ST-H<sub>2</sub>S lipo treated group showed a brighter signal compared to the saline treated group ( $P < 0.05$ ; **Figure 3.17**). In the colon, both ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo induced to a greater degree more  $T_{reg}$  differentiation than that of the saline group ( $P < 0.001$  and  $P < 0.0001$ , respectively) (**Figure 3.17**). Lastly, serum markers related to the inflammatory process were compared between the groups (ST-H<sub>2</sub>S lipo, LC-H<sub>2</sub>S lipo, and saline treated DSS induced colitis model groups and the normal group). While C-reactive protein (CRP), a marker for systemic inflammation, was significantly higher in the saline treated group compared to the normal group ( $P < 0.0001$ ), and only the ST-

H<sub>2</sub>S lipo treated group showed a significantly lower CRP concentration compared to the saline treated group ( $P < 0.05$ ), indicating its effect in systemic immune modulation. The ST-H<sub>2</sub>S lipo treated group tended to have a lower concentration of CRP compared to the LC-H<sub>2</sub>S lipo treated group ( $P = 0.18$ ). Moreover, IL-6, TNF- $\alpha$ , and pro-inflammatory cytokines were significantly higher in the saline treated groups ( $P < 0.0001$ ,  $P < 0.0001$ , respectively), and their concentrations were significantly lower in both the ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo treated groups compared to the saline treated group (IL-6,  $P < 0.0001$  and  $0.0001$ ; TNF-  $\alpha$ ,  $P < 0.001$  and  $P < 0.0001$ , respectively). The ST-H<sub>2</sub>S lipo treated group tended to have a lower concentration of IL-6 compared to the LC-H<sub>2</sub>S lipo treated group ( $P = 0.18$ ). Furthermore, IL-4, an anti-inflammatory cytokine, was significantly higher in both the ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo treated groups compared to the saline treated group ( $P < 0.01$  and  $P < 0.05$ , respectively) (**Figure 3.18**). Finally, we examined the histology of the major organs after the treatment to assess the potential in vivo toxicity of ST-H<sub>2</sub>S lipo. There was no overt organ damage in the ST-H<sub>2</sub>S lipo or ST-H<sub>2</sub>S lipo treated group (**Figure 3.19**). Taken together, we found that 1) ST-H<sub>2</sub>S lipo has a superior protective effect compared to unloaded GYY4137, and 2) ST-H<sub>2</sub>S lipo showed a higher protective effect compared to LC-H<sub>2</sub>S lipo, potentially due to a higher

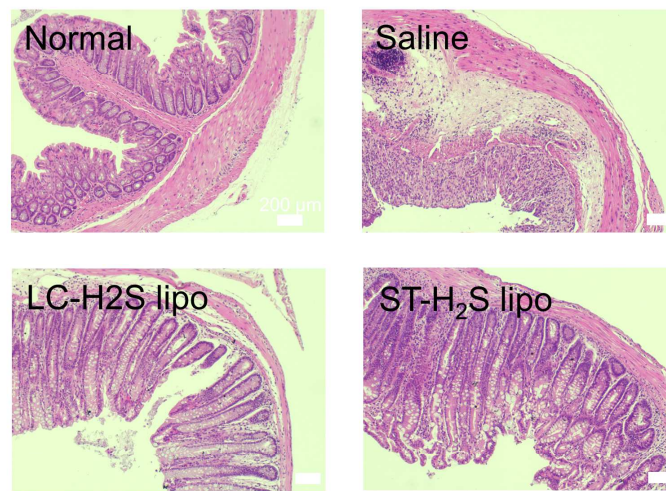
systemic immunomodulatory effect (**Figure 1.3**).



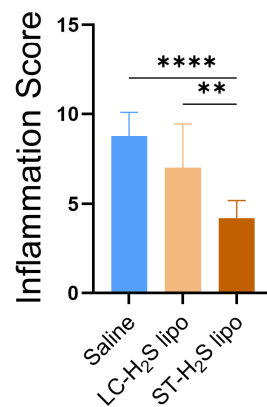


**Figure 3.12** The comparison of weight change (%) between normal, saline, ST-H<sub>2</sub>S lipo, and LC-H<sub>2</sub>S lipo.

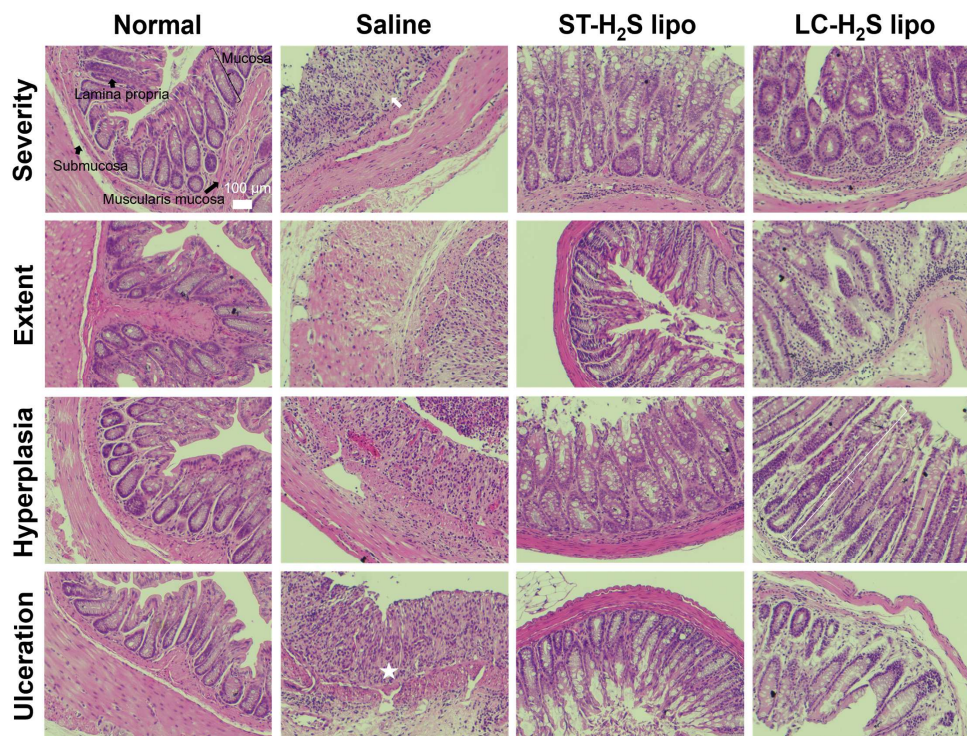
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B

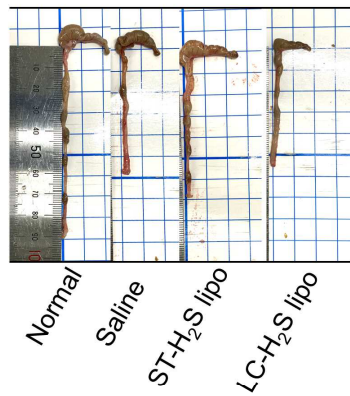


**Figure 3.13** The comparison of inflammatory process between normal, saline, LC-H<sub>2</sub>S lipo, ST-H<sub>2</sub>S lipo. The H&E images of colon of colitis model. (D) The graph indicates comparison of inflammation score between saline, ST-H<sub>2</sub>S lipo, and LC-H<sub>2</sub>S lipo (n = 8). ST: spleen targeting, LC: long-circulating, \*\*: P < 0.01, \*\*\*: P < 0.001.

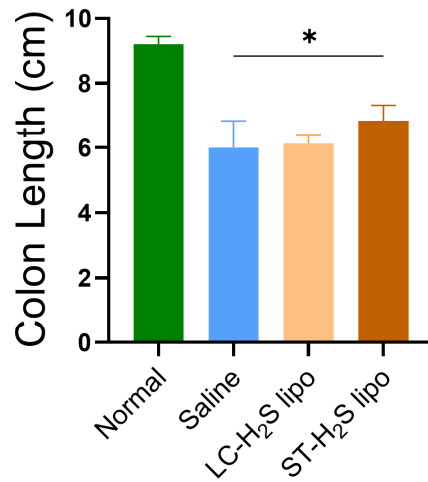


**Figure 3.14** Representative H&E images about general criteria of histomorphology scores for colitis model. general criteria are (1) severity, (2) extent, (3) hyperplasia, and (4) ulceration. (1) severity is scoring degree of leukocyte density of lamina propria region. (2) extent is scoring degree of expansion of leukocyte infiltration. Histomorphology score is increased when leukocytes gradually infiltrate from mucosa to transmural. Definition of (3) hyperplasia is increased epithelial cell number in crypts and crypts are elongated. Definition of (4) ulceration is epithelial defect reaching beyond muscularis mucosa. Yellow arrow indicates the loss of villi and crypt's structures. Yellow curly bracket indicates hyperplasia. Yellow star indicates ulceration. According to four different criteria, ST-H<sub>2</sub>S lipo treated group demonstrated the lowest score among the four groups shown here.

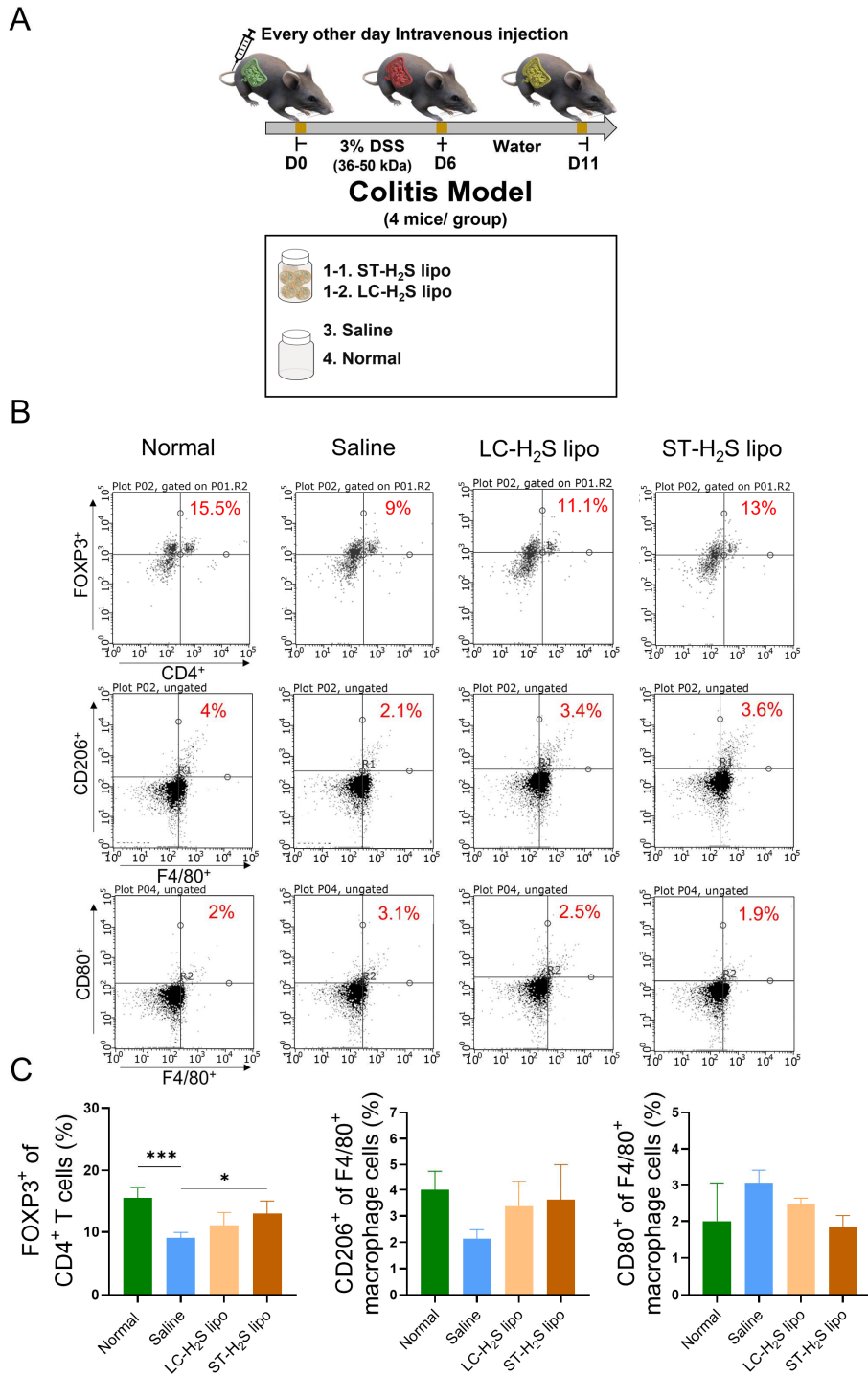
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B



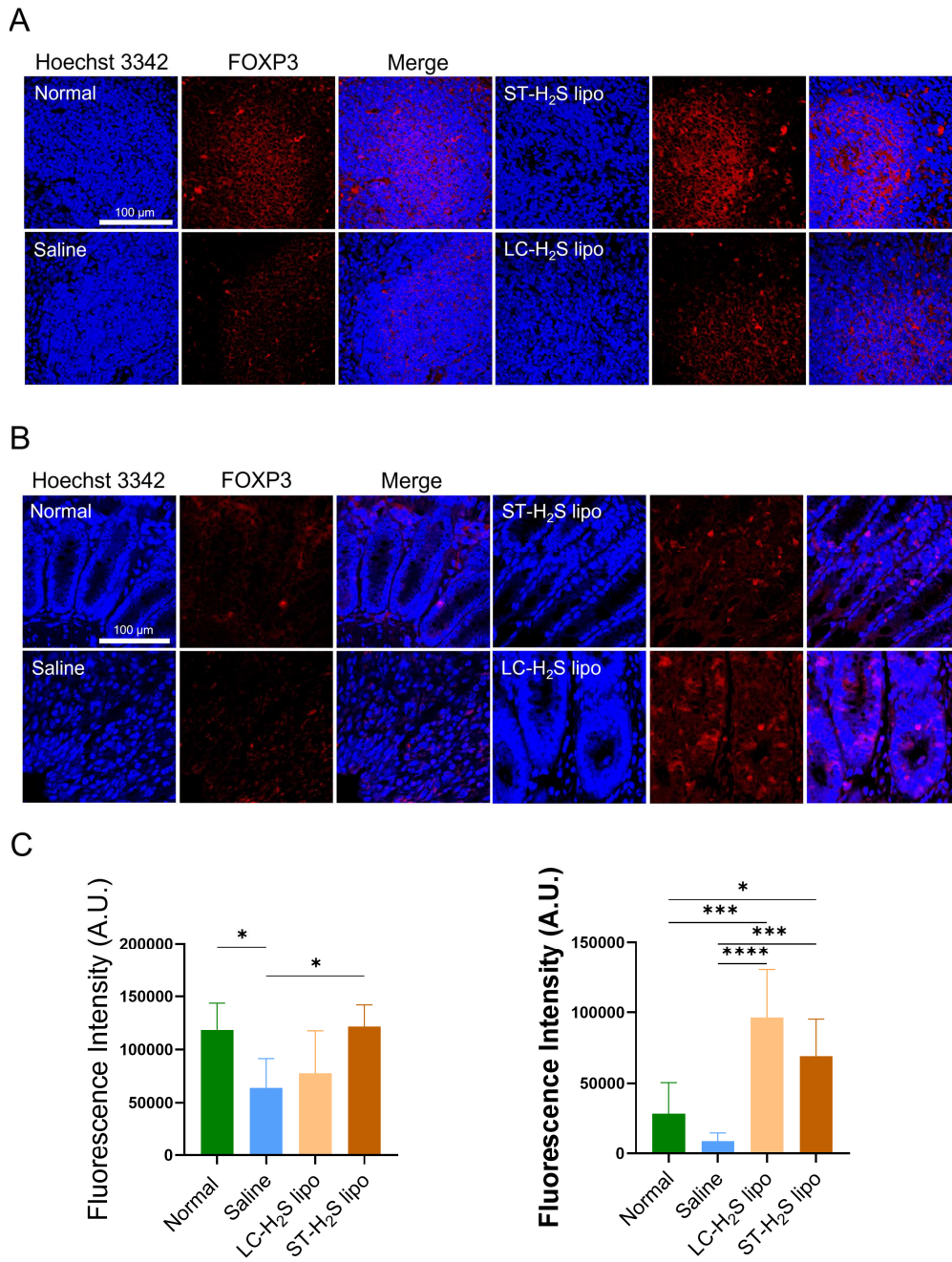
**Figure 3.15** The comparison of colon lengths between normal, saline, LC-H<sub>2</sub>S lipo, ST-H<sub>2</sub>S lipo. A. The extracted images of colon in colitis model. Representative images indicate normal, saline, ST-H<sub>2</sub>S lipo, and LC-H<sub>2</sub>S lipo from left respectively. B. The graph (left) indicates comparison of colon length (n = 5, respectively). The graph (right) indicates comparison of colon weight/length (n = 5, respectively). \*: P < 0.05.



**Figure 3.16** Comparison of in vivo immune cell differentiation between ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo in spleen. A. Schematic design of the experiment.

The colitis model was induced by 3% DSS. Mice received 3% DSS water for day7. Reagents were intravenously injected every other day (N= 4 respectively). Mice were sacrificed to extract spleen at day11. B. Dot plot of flow cytometry. CD4 and FOXP3 antibodies were used as regulatory T cell markers. CD80 and F4/80 antibodies were used as M1 macrophage markers. CD206 and F4/80 antibodies were used as M2 macrophage markers. C. Graphs showed that ST-H<sub>2</sub>S lipo is significantly more T<sub>reg</sub> differentiated than saline group. ST-H<sub>2</sub>S lipo: spleen targeting H<sub>2</sub>S lipo, LC-H<sub>2</sub>S lipo: long circulation H<sub>2</sub>S lipo, \*\*\*: P< 0.001, \*: P< 0.05

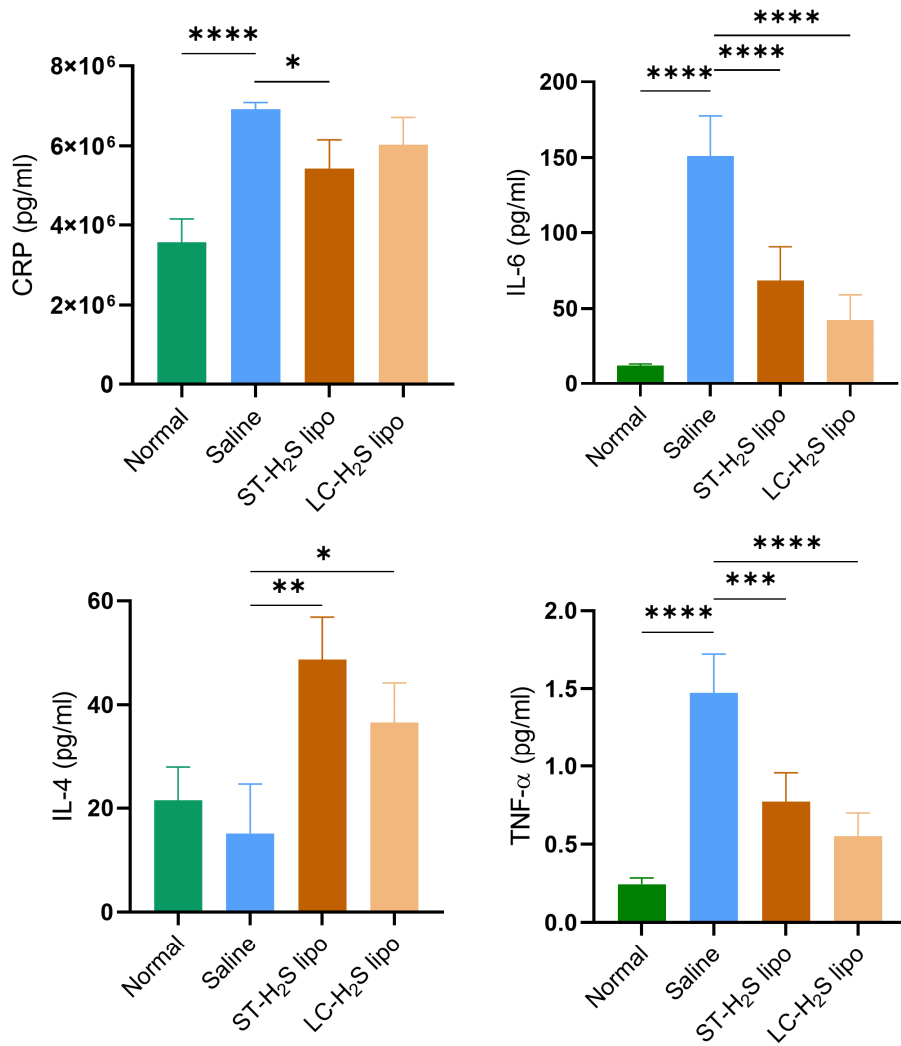




**Figure 3.17** Immunofluorescence images of FOXP3 differentiation in spleen and colon. A. Immunofluorescence images in spleen B.

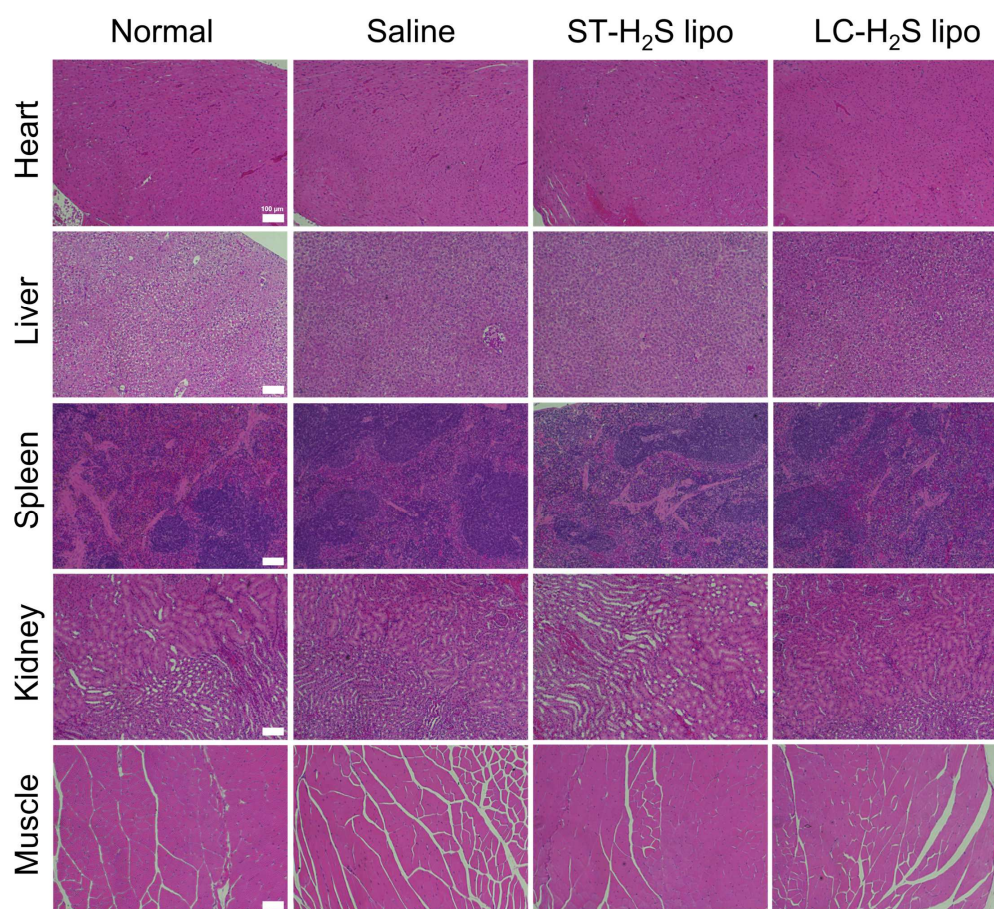
Immunofluorescence images in colon. Red fluorescence by Cyanine5.5 indicates FOXP3 of T<sub>reg</sub> cells. C. The graph (left) indicates comparison of fluorescence intensity in spleen (n = 5). The graph (right) indicates comparison of fluorescence intensity in colon (n = 5). \*: P < 0.05, \*\*\*: P < 0.001, \*\*\*\*: P < 0.0001.





**Figure 3.18** Plasma cytokine analysis in the treatment of comparison between ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo. Plasma was collected from blood in EDTA tube after treatment. In CRP analysis, ST-H<sub>2</sub>S lipo was significantly

less detected than saline group. In IL-6 analysis, ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo were significantly less detected than saline group. In IL-4 analysis, ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo were significantly less detected than saline group. In TNF- $\alpha$  analysis, ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo were significantly less detected than saline group. ST-H<sub>2</sub>S lipo: spleen targeting H<sub>2</sub>S lipo, LC-H<sub>2</sub>S lipo: long circulating H<sub>2</sub>S lipo, \*: P < 0.05, \*\*: P < 0.01, \*\*\*: P < 0.001, \*\*\*\*: P < 0.0001



**Figure 3.19** H&E staining of extracted organs in the treatment of comparison between ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo. The organs which is heart, liver, spleen, kidney, and muscle were extracted at day10 of treatment. The compared group are normal, saline, ST-H<sub>2</sub>S lipo and LC-H<sub>2</sub>S lipo. ST-H<sub>2</sub>S lipo: spleen targeting H<sub>2</sub>S lipo, LC-H<sub>2</sub>S lipo: long circulation H<sub>2</sub>S lipo

### 3.3.5 Therapeutic potential of various spleen targeting nanoparticles

Many studies have reported on the therapeutic potential of spleen targeting by various approaches. In a treatment study on experimental autoimmune encephalomyelitis (EAE), antigens linked to syngeneic splenic leukocytes with ethylene carbodiimide (Ag-SP) accumulated in the MZ. Consequently, they induced T<sub>reg</sub> differentiation (69). In a treatment study using an inflammatory arthritis model, noninvasive ultrasound stimulation into the spleen showed a reduction of the disease severity through the cholinergic anti-inflammatory pathway (70). Especially, many studies have reported on the therapeutic potential of spleen targeting nanoparticles (**Table 5**). Zhai et al. developed induced pluripotent stem cells (iPSCs) encapsulated in coalescent an erythrocyte-liposome (iPSC@RBC-Mlipo). As mentioned above, the spleen has the ability to filter damaged erythrocytes. iPSC@RBC-Mlipo used the characteristic of spleen targeting. In terms of the spleen targeting efficiency, iPSC@RBC-Mlipo was three times higher compared to iPSC encapsulated in liposomes (iPSC@Mlipo). In the treatment of the B16F10 tumor model, iPSC@RBC-Mlipo showed a significantly better antitumor effect and inhibition of metastasis than that of iPSC@Mlipo (29). Shimizu et al. developed an antigen (Ag) encapsulated

PEGylated liposome (PL). As a spleen targeting strategy, the phenomenon when more PL is repeatedly administered, more of it accumulates in the splenic MZ, was used. In the treatment of the EG7-OVA tumor model, the group with pre-injected empty PL prior to Ag encapsulated PL injection induced a more obvious cytotoxic T lymphocyte (CTL) immune response and suppressed tumor growth than the group without pre-injected empty PL (42). Tripathi et al. developed 4-sulfated N-acetyl galactosamine which could specifically target resident macrophages in the liver and spleen conjugated chitosan nanoparticles (SCNPs). In the treatment of leishmaniasis, amphotericin B (AmB) loaded SCNPs (AmB-SCNPs) delivered significantly more AmB to the spleen compared to the AmB-chitosan nanoparticles (AmB-CNPs) ( $P < 0.05$ ). Moreover, AmB-SCNPs showed a significantly more anti-leishmanial activity than that of the AmB-CNPs ( $P < 0.05$ ) (48). Ye et al. developed passively spleen targeted actarit, anti-rheumatic drug, loaded solid lipid nanoparticle (SLN). The actarit-SLN was more accumulated in the spleen than that of the unloaded actarit (6.31% to 16.29%) (39). Yi et al. studied nanostructure morphology suitable for targeting DCs. Among the nanostructures which were all assembled from poly(ethylene glycol)-bl-poly(propylene sulfide) (PEG-bl-PPS), polymersomes (PS) structurally similar to liposomes showed the highest

uptake in the splenic DCs of normal mice. Interestingly, in the spleen of atherosclerotic Ldlr<sup>-/-</sup> mice, PS uptake by macrophages was significantly reduced ( $P < 0.005$ ), while PS uptake by DCs was barely changed compared to normal mice. As result, PS was predominantly phagocytosed by splenic DCs compared to macrophages in atherosclerotic Ldlr<sup>-/-</sup> mice ( $P = 0.006$ ) (41). Kranz et al. developed RNA-lipoplex (RNA-LPX) with a net charge suitable for DCs targeting. They found that RNA-LPX with about -30 mV was more accumulated in the spleen compared to the positively charged RNA-LPX. In the treatment of several tumor models, the selected RNA-LPX formulation for delivering RNA to the spleen induced strong immune responses and showed an antitumor efficacy due to systemic DC targeting (31). In the present study, we developed a simple spleen targeting strategy by modulating the PEG type and ratio, in arguably the most frequently used nanoparticles for drug delivery, a PEGylated liposome. When comparing the spleen targeting efficiency (%), ST-H<sub>2</sub>S lipo showed the highest efficiency among the other spleen targeting nanoparticles (29, 39, 41, 48). We found the ideal composition of PEG to obtain a reasonable loading efficiency, stability and excellent spleen targeting ability (**Table 7**)

Type of disease model	Nanoparticles	Size (nm)	Zeta potential (mV)	Stealth polymer	Spleen targeting strategy	Spleen targeting efficiency* (%)	Ref
<b>Tumor</b>	iPSC@RBC-Mlipo	184	4.7	DSPE-PEG <sub>2000</sub>	Damaged erythrocyte membrane entrapped by spleen	160	(29)
<b>Tumor</b>	Ag encapsulated PL	Not mentioned	Not mentioned	DSPE-PEG <sub>2000</sub>	Repeated pre-injection of empty PL for delivering Ag encapsulated PL to splenic marginal zone B cell	N/A	(42)
<b>Leishmaniasis</b>	AmB loaded SCNPs	333±7	-13.9±0.24	N/A	Targeting resident macrophage	50.9	(48)
<b>Rheumatoid arthritis</b>	Actarit loaded SLNs	241±23	-17.14±1.6	N/A	Passive targeting to RES organs	120	(39)
<b>Atherosclerosis</b>	PS	113.7	-0.2±1.68	PEG-bI-PPS	Changing the nanostructure morphology	16.7	(41)
<b>Tumor</b>	RNA-LPX	200-320	Around -30	N/A	Negative charged lipid nanocarrier	N/A	(31)

Type of disease model	Nanoparticles	Size (nm)	Zeta potential (mV)	Stealth polymer	Spleen targeting strategy	Spleen targeting efficiency* (%)	Ref
<b>IBD</b>	ST-H <sub>2</sub> S lipo	110.3±42.4	-28.1	DSPE-PEG <sub>5000</sub>	Ideal PEG size and ratio for spleen targeting	179.9	This study

**Table 7** Therapeutic potential of various spleen targeting nanoparticles. \*Spleen targeting efficiency (%) is calculated by the (spleen uptake of the nanoparticle/ the liver uptake of the nanoparticle) × 100. N/A: not applicable, iPSCs: induced pluripotent stem cells, iPSC@RBC-Mlipo: iPSCs encapsulated in coalescent erythrocyte-liposome, PL: PEGylated liposome, iPSC@Mlipo: iPSC encapsulated in liposome, DSPE: 1,2- Distearoyl-sn-glycero-3-phosphoethanolamine, PEG: polyethylene glycol, AmB: amphotericin B, SCNPs: 4-sulfated N-acetyl galactosamine conjugated chitosan nanoparticles, SLN: solid lipid nanoparticle, TEC: overall targeting efficiency, PS: polymersome, PEG-bl-PPS: poly(ethylene glycol)-bl-poly(propylene sulfide), RNA-LPX: RNA-lipoplexes, DCs: dendritic cells, IBD: inflammatory bowel dis



### 3.3.6 Possibility of H<sub>2</sub>S lipo as a new clinical immunomodulator in IBD

H<sub>2</sub>S lipo should be further studied in order to confirm its therapeutic potential for IBD in clinical. Immunomodulators used in IBD treatment produce anti-inflammatory effects by targeting specific immune processes such as TNF- $\alpha$ , IL-12/23, JAK, and sphingosine-1-phosphate (S1P). However, since the response rate varies from 16 to 70%, the development of immunomodulatory agents with a new mechanism of action is needed (10). Hydrogen sulfide (H<sub>2</sub>S) is a lipophilic gas molecule that is rapidly dispersed into the cytoplasm without a specific transporter and is involved in various anti-inflammatory processes. H<sub>2</sub>S is involved in anti-inflammatory mechanisms different from those of conventional immunomodulators used in IBD, such as T<sub>reg</sub> differentiation by promoting TET1 and TET2 expression, M2 macrophage differentiation through PPAR $\gamma$  and PPAR $\gamma$  coactivator-1 $\beta$ , and inhibition of the NF- $\kappa$ B signaling pathway. In order for H<sub>2</sub>S lipo, which emits anti-inflammatory hydrogen sulfide, to enter the clinical trial of IBD, the safety and effectiveness of H<sub>2</sub>S lipo should be evaluated. First, safety data through various dose level measurements are needed. Mirandola et al reported that treatment with 2 mM of H<sub>2</sub>S donor resulted in cytotoxicity (110). Although ST-H<sub>2</sub>S lipo (60  $\mu$ M and 100  $\mu$ M)

had no cytotoxicity in the treatment of the colitis model, additional dose levels need to be evaluated. Second, in order to confirm the effectiveness, the exact mechanism of the treatment effect of the colitis model of H<sub>2</sub>S lipo should be identified, and the treatment effect should be compared with conventional immunomodulators used for IBD treatment. Also, a more detailed study on the method of administration is needed. In the case of systemically administered LC-H<sub>2</sub>S lipo, the possibility of oral administration, which is much more convenient, should be evaluated as it targets the inflammatory site and relieves symptoms. Currently, clinical trials of H<sub>2</sub>S-releasing agents are underway. SG1002 (sodium polythionate) developed by Sulfagenix is designed to improve high fat diet (HFD) induced metabolic and cardiac dysfunction and has completed the phase 1 clinical trial (111). ATB-346 (H<sub>2</sub>S-releasing derivative of naproxen) developed by Antibe Therapeutics is designed to prevent gastrointestinal bleeding and ulceration, side effects of the nonsteroidal anti-inflammatory drugs (NSAIDs), by inhibiting the NF-κB pathway. In Phase 2 clinical, ATB-346 relieved the pain of patients with osteoarthritis and effectively reduced the side effects of NSAIDs (P< 0.001) (112). In conclusion, based on the involvement of H<sub>2</sub>S in various anti-inflammatory reactions, the therapeutic effect of H<sub>2</sub>S lipo in colitis model, and the clinical trial of other H<sub>2</sub>S-

releasing drugs, it is suggested that H<sub>2</sub>S lipo may be a new immunomodulatory agent for IBD, but various studies are needed to move forward it into clinical trials

### 3.4 Summary

In chapter 3, we identified the therapeutic potential of H<sub>2</sub>S for colitis in transcriptomics-level evidence and further the excellent therapeutic effects of ST-H<sub>2</sub>S lipo in colitis model. In the gene expression analysis of colon in both UC and colitis model, it was identified that expression of CBS, CTH, and MPST involving H<sub>2</sub>S production were significantly reduced. Then, we evaluated the therapeutic effects of H<sub>2</sub>S lipo in the colitis model. In the result, ST-H<sub>2</sub>S lipo showed superior results than unloaded H<sub>2</sub>S donor in several therapeutic indexes including weight changes and inflammation score. In addition, it was identified that ST-H<sub>2</sub>S lipo induced more T<sub>reg</sub> differentiation in bone marrow and spleen as an effective systemic immune modulator. In the comparison of therapeutic effect between ST-H<sub>2</sub>S lipo and H<sub>2</sub>S donor loaded conventional long circulating liposome (LC-H<sub>2</sub>S lipo), ST-H<sub>2</sub>S lipo demonstrated an even higher protective effect against inflammation in colon compared to LC-H<sub>2</sub>S lipo, which may be attributed to the higher efficiency of ST-H<sub>2</sub>S lipo improving systemic immune homeostasis.

## **Chapter 4.**

## **Conclusion**

We developed spleen targeting H<sub>2</sub>S donor loaded liposomes (ST-H<sub>2</sub>S lipo) for delivering highly reactive H<sub>2</sub>S donor to specific organ (i.e., spleen). Our ST-H<sub>2</sub>S lipo demonstrated an excellent loading capacity of H<sub>2</sub>S donor and stability. Additionally, ST-H<sub>2</sub>S lipo induced a M2 phenotypic change in macrophages after efficient cell uptake and H<sub>2</sub>S release in the in vitro experiments. The excellent spleen targeting ability of the ST-H<sub>2</sub>S lipo was confirmed in both normal mice and colitis model. Through analysis of RNA expression, the expression of H<sub>2</sub>S related enzymes were decreased in both colitis patients and colitis model. In the treatment of the DSS induced colitis model, we found that ST-H<sub>2</sub>S lipo showed a significantly greater therapeutic effect than that of the unloaded H<sub>2</sub>S donor. Moreover, ST-H<sub>2</sub>S lipo demonstrated an even higher protective effect against inflammation in colon compared to the H<sub>2</sub>S donor loaded conventional long-circulating liposome (LC-H<sub>2</sub>S lipo). ST-H<sub>2</sub>S lipo treatment showed a higher systemic immune modulative effect compared to the LC-H<sub>2</sub>S lipo treatment. These findings demonstrate the potential of the spleen targeting H<sub>2</sub>S lipo in the treatment of IBD.

The degree process was a meaningful period in which I was able to lay the groundwork as a researcher and think about the way forward. A wide variety of experiments were conducted to confirm the immunomodulatory

effect of H<sub>2</sub>S lipo: synthesis of H<sub>2</sub>S lipo, cell works, flow cytometry, confocal imaging, radiolabeling, PET imaging, IVIS imaging, modeling, and RNA seq-analysis using webtools. In in vitro experiments, I cultured cell lines, analyzed the physical and chemical properties of cells through flow cytometry and studied the interaction between nanoparticles and cell through confocal imaging. In the future, I plan to evaluate the efficacy of immunomodulators not only in macrophages, but also in various cell lines such as dendritic cells, T cells, and cancer cells. During the degree process, I performed several mice models including myocardial infarction reperfusion model, arthritis model, Parkinson disease model, cancer model, and colitis model. Various skills including intravenous injection, obtained through this allowed the experimental plan to be carried out without a hitch. In the future, I plan to study other diseases suitable for application of spleen targeting nanoparticles. In particular, I would like to study the bidirectional interaction between post-stroke infection and splenic immune cells and evaluate the immunomodulatory efficacy of spleen targeting nanoparticles in stroke models. In PET imaging research, I learned the radiolabeling of nanoparticles and quantitative analysis skills. Through experiments of colitis model, several biological analyses at the cell level, tissue level, and mouse level were performed and reasonable grounds of therapeutic effects were

presented. In the future, I plan to study whether H<sub>2</sub>S lipo is effective in preventing the recurrence of IBD, which is incurable and has a frequent recurrence. Furthermore, I plan to study the correlation between IBD and central nervous system disorders, which are attracting attention these days. In synthesis of nanoparticles, I performed various experiments to synthesize, purify, and characterize liposomes. In the future, I plan to improve efficiency of spleen targeting liposomes through in-depth exploration of spleen targeting strategies. In addition, I will study synthesizing various nanoparticles as well as liposomes.



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## 국문 초록

대장염의 치료적 면역조절을 위한 비장 표적 황화수소 공여

리포솜의 개발

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나노입자는 전신투여 후 대부분 면역 세포에 의해 섭취되기 때문에 면역조절제로서 이상적인 약물 전달체로 여겨지고 있다. 최근 가장 큰 림프 기관인 비장을 표적한 전신 면역조절 약제 개발에 많은 연구가 진행되고 있다. 특히 자가면역 질환과 종양의 면역조절에 효과적인 비장 표적 나노 입자가 활발히 연구되고 있다. 자가면역 질환 중 염증성 장 질환은 위장관의 만성 염증을 보이며 많은 치료 방법이 개발되고 있음에도 불구하고 난치병으로 분류된다. 최근 항염증 기능을 가지는 기체신호전달물질인 황화수소는 염증성 장 질환을 포함한 다양한 염증성 질환에서 뛰어난 면역조절 효과가 입증되어 주목받고 있다. 이 학위 연구에서는 정밀하게 설계된 황화수소 공여체 담지 비장 표적

리포솜 ( $H_2S$  donor delivering liposome for spleen targeting; ST- $H_2S$  lipo)을 개발했으며 대장염 모델에서 면역 조절 및 치료 효과를 연구했다. 본 연구에서는 뛰어난 비장 표적을 가지면서 높은 안정성과 담지 효율을 가지는 리포솜의 폴리에틸렌글라이콜 종류와 비율을 확인했다. 덱스트란 설페이트 소듐으로 유도된 대장염 모델에서 담지하지 않은 황화수소 공여체와 달리 ST- $H_2S$  lipo와 기존의 높은 전신 순환 기능을 가지는 리포솜에 담지된 황화수소 공여체 (long-circulating liposome with  $H_2S$  donor; LC- $H_2S$  lipo) 모두 염증 증상을 효과적으로 완화시켰다. 더욱이 ST- $H_2S$  lipo는 LC- $H_2S$  lipo 보다 뛰어난 전신 면역조절 효과로 우수한 치료 효과를 보였다. 이 학위 연구는 처음으로 황화수소 공여체 담지 비장 표적 리포솜을 개발하였고 이를 이용한 난치성 염증성 장 질환의 새로운 치료 전략 가능성을 보여주었다.

**주요어 :** 나노입자, 비장 표적, 황화수소, 염증성 장질환, 항염증, 전신 면역 조절

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