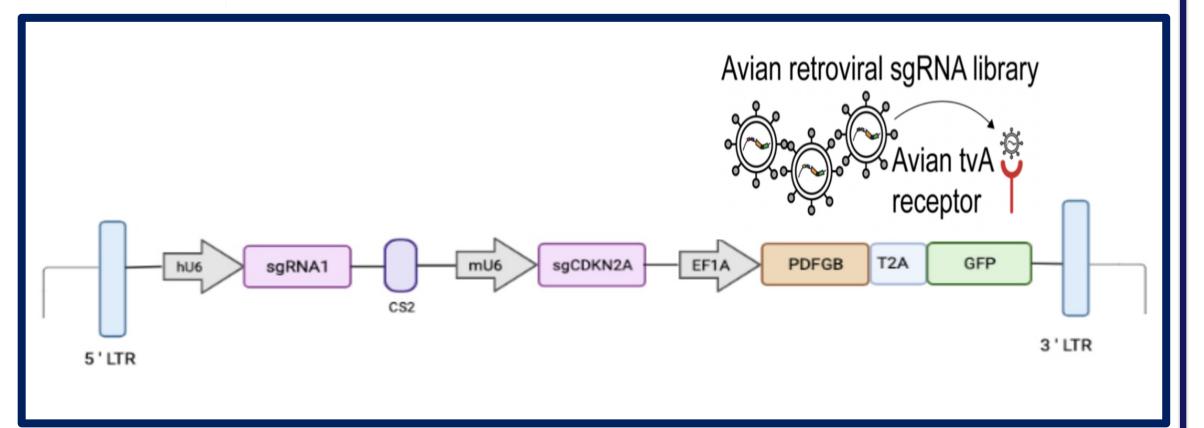


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## Abstract

Glioblastoma multiforme (GBM) is a condition that impacts 3 in 100,000 persons, accounting for more than 100,000 cases annually in the United States alone. The standard of treatment for a GBM entails a maximum amount of surgical resection, radiation, and adjuvant temozolomide (TMZ). Unfortunately, TMZ is ultimately ineffective since it has been associated with both inherent and acquired drug resistance.<sup>1</sup> In this study I applied various cloning methods to construct an *in-situ* cell-type specific gene editing tool by placing two adjacent sgRNA components into an avian retroviral vector. By modeling how genetic background alters evolution in response to drug exposures, this tool has the potential to identify opportunities for improved GBM therapies.



**Figure 1.** Final result after constructing avian retroviral vector.

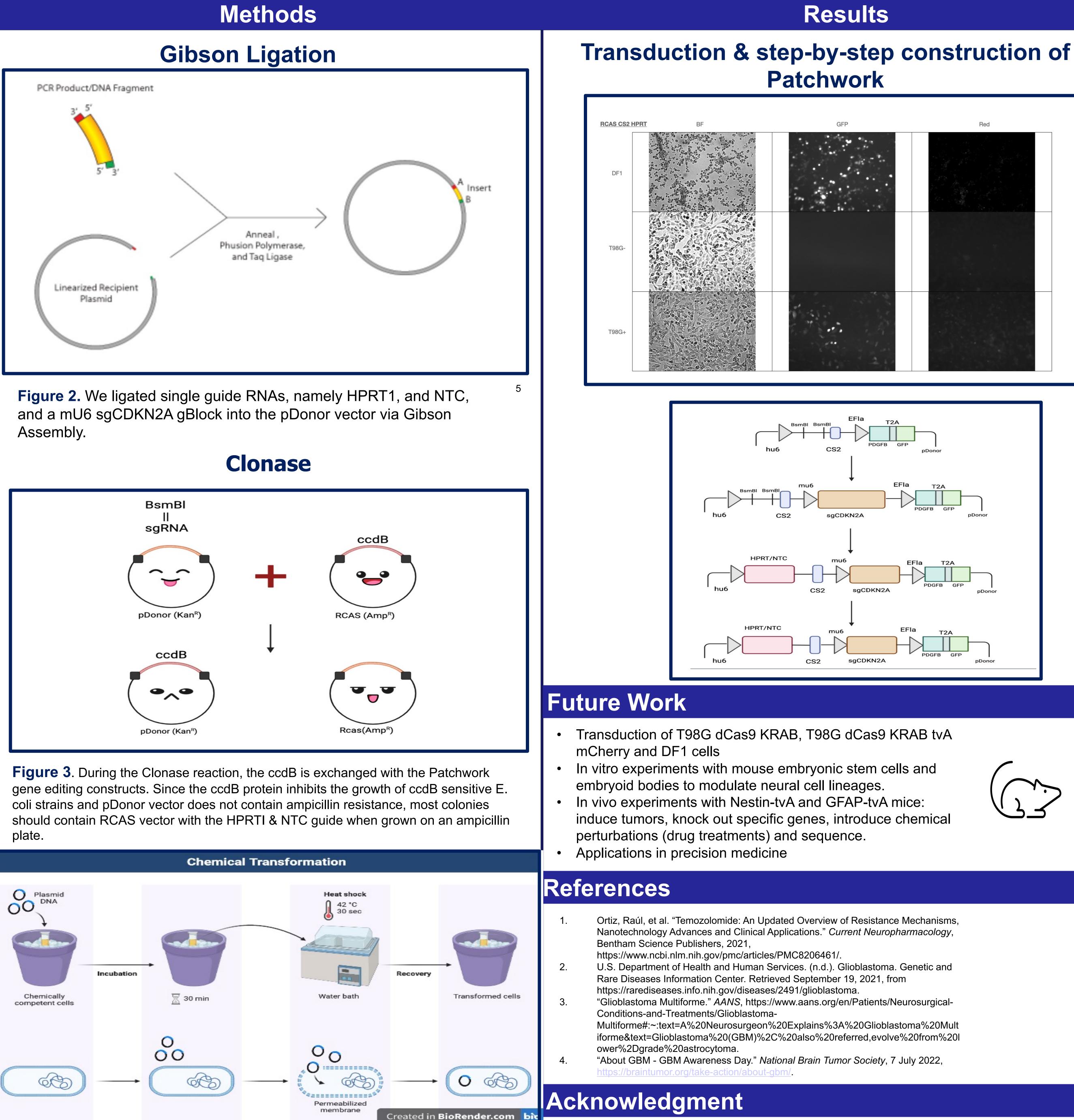
# Introduction

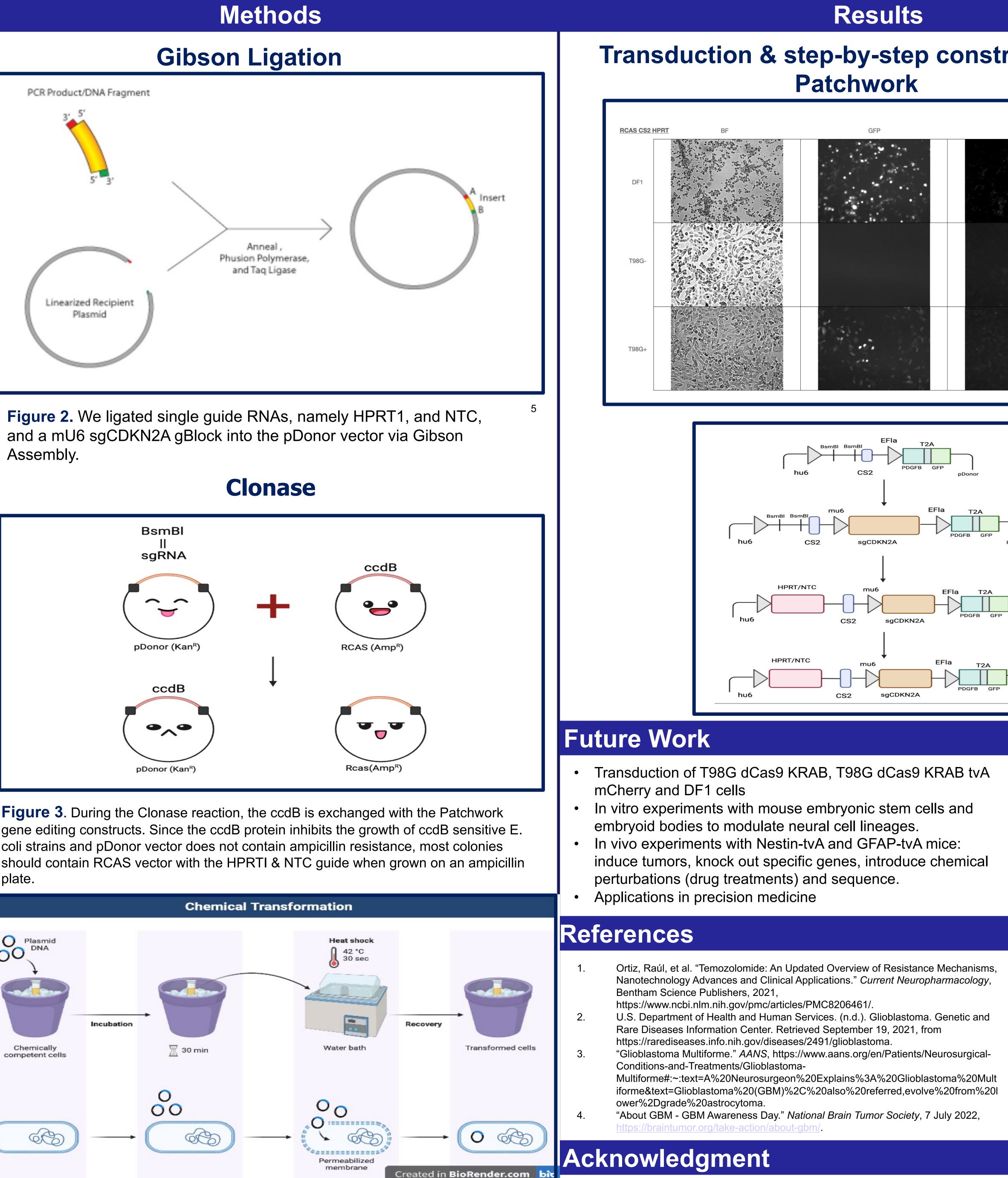
GBM is a malignant brain tumor that develops from a specific type of brain cell called an astrocyte. GBMs are often very aggressive and spread to surrounding tissues. Only 3.3% and 1.2% of patients survive the illness after two and three years, respectively.<sup>2</sup> Some of the most common symptoms are persistent headaches, seizures, memory loss, changes in mood and personality, and speech difficulty. <sup>3</sup> Barely 6.8% of glioblastoma patients survive after five years, and their average survival time is only eight months, according to estimates.<sup>4</sup> The complexity of the tumor itself is one of the causes of GBM's resistance to therapeutic intervention.

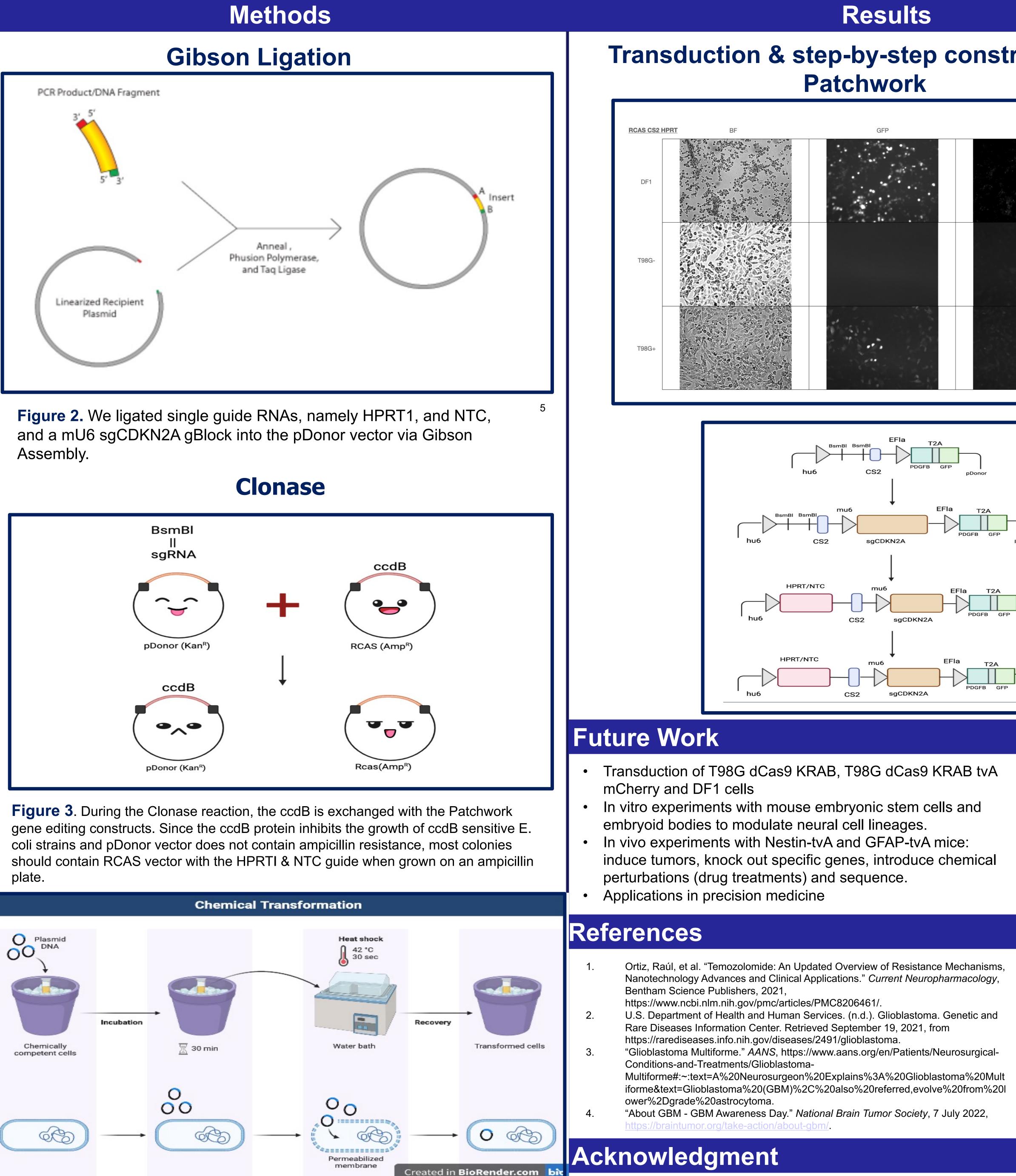
While GBM has been shown to have a ubiquitous overactivation of RTK signaling, GBM patients display low response rates to RTK targeted therapy. Adaptive activation of pathways that rescue RTK signaling is suspected to be one of the mechanisms by which tumors evade therapy. Hence, there is a need to map how tumors shift expression programs in response to various drug exposures. Patchwork provides a platform to fulfill this need via in *situ* cell-type specific CRISPR screens.

As proof that the final Patchwork plasmid tool effectively delivers the expected genetic perturbations, we inserted either single guides HPRT1 or NTC in place of the sgRNA component. HPRT1 confers resistance to chemotherapy 6-TG and NTC is a non-targeting control. We transfected DF1 chicken cells via Lipofectamine and planned to use the virus produced by these cells to transduce DF1 and T98G dCas9 KRAB +/- tvA mCherry human GBM cells. Assuming the Patchwork plasmid is effective, only cells with tvA receptor (i.e. DF1 and T98G dCas9 KRAB + tvA mCherry) will receive the intended genetic perturbations. Consequently, T98G dCas9 KRAB + tvA mCherry cells transduced with Patchwork (HPRT) will be resistant to 6-TG treatment whereas T98G dCas9 KRAB cells will not.

# Perturbing in place: Systems for in situ and cell-type specific single-cell genetic screens







**Figure 4**. We use transformation to replicate the plasmids as well as confirm that the Clonase & Gibson Ligation reactions were successful.



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# science

