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Lab Resource: Multiple Cell Lines



Generation of two induced pluripotent stem cell lines from a patient with Stargardt disease caused by compound heterozygous mutations in the ABCA4 gene

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ABSTRACT

Stargardt disease (STGD1) is the most common inherited retinal dystrophy and ABCA4 c.546—10 T>C is the most commonly reported splice mutation. Here, we generated and characterized two induced pluripotent stem cell (iPSC) lines from a STGD1 patient with compound heterozygous mutations in ABCA4 (c.[5461-10 T > C;5603A > T];[4163 T > C;455G > A]). Episomal vectors containing OCT4, SOX2, KLF4, L-MYC, LIN28 and mp53DD were employed to conduct the reprogramming of patient-derived fibroblasts. Both lines had a normal karyotype, displayed iPSC morphology, expressed pluripotency markers and showed trilineage differentiation potential. These lines can provide a powerful platform for further investigating the pathophysiological consequences of mutations in ABCA4.

1. Resource Table:

Unique stem cell lines LEIi017-A LEIi017-B identifier Alternative name(s) of 1629ips9 (LEIi017-A) 1629ips11 (LEIi017-B) stem cell lines Institution Lions Eve Institute Contact information of Samuel McLenachan; smclenachan@lei.org.au distributor Fred K. Chen: fredchen@lei.org.au Type of cell lines iPSC Origin Human Additional origin info Age: 16 required Sex: Female for human ESC or iPSC Ethnicity if known: Caucasian Dermal fibroblasts Cell Source Clonality Clonal Associated disease Stargardt disease Gene/locus ABCA4/1p22.1 Both lines 24/06/2020 Date archived/stock date Cell line repository/bank

(continued on next column)

https://hpscreg.eu/cell-line/LEli017-A
https://hpscreg.eu/cell-line/LEli017-B

Ethical approval
University of Western Australia Human Research Ethics
Committee RA/4/1/7916

2. Resource utility

Autosomal recessive Stargardt disease is the most common form of juvenile-onset macular degeneration and is caused by mutations in the *ABCA4* gene (Allikmets et al., 1997). The LEIi017-A and LEIi017-B lines generated from a patient carrying compound heterozygous *ABCA4* mutations will provide a powerful resource for investigating the effects of *ABCA4* mutations.

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3. Resource details

Stargardt disease (STGD1, OMIM:248200) is the most common retinal dystrophy featured by progressive central vision loss (Huang et al., 2020). Mutations in the *ATP-binding cassette transporter* gene (ABCA4) have been associated with heterogeneous retinal phenotypes ranging in severity from early-onset cone-rod dystrophy to late-onset macular dystrophy (Allikmets et al., 1997; Maugeri et al., 2000; Cremers et al., 1998). Here, we report the generation and characterization of two iPSC lines from a patient diagnosed with STGD1 caused by compound heterozygous mutations in ABCA4 (c.[5461-10 T > C;5603A > T]; [4163 T > C;455G > A]).

The female patient presented with reduced vision at the age of 6 years without retinal lesions. Electroretinography at age 9 demonstrated an electronegative waveform. Stargardt disease was suspected at age 15 when flecks were first noted. By age 16, her visual acuity had dropped to 6/120 in both eyes. Genetic analysis using the Stargardt/Macular dystrophy panel (version 3; 10 genes) identified four mutations in ABCA4 (NM_000350.2). Phase analysis was performed by targeted Sanger sequencing of parental DNA, demonstrating the maternal complex allele carries c.[5461–10 T > C;5603A > T] and the paternal complex allele carries c.[4163 T > C;455G > A]. Dermal fibroblasts were sourced and cultured from the patient (Huang et al., 2020). Reprogramming of fibroblasts into iPSC was conducted using episomal plasmids encoding OCT4; SOX2, KLF4, L-MYC, LIN28 and mp53DD. Two clonal iPSC lines (LEIi017-A and LEIi017-B) were established for further characterization

Table 1
Characterization and validation.

Classification	Test	Result	Data
Morphology	Photography Bright field	Normal	Fig. 1,
Phenotype	Qualitative analysis: Immunocytochemistry	Positive for the pluripotency markers: OCT4, NANOG, SOX2, KLF4	Fig. 1, panels A
	Quantitative analysis: RT-qPCR)	Positive for the pluripotency markers OCT4, NANOG, SOX2, KLF4, C-MYC	Fig. 1, panel C
Genotype	Karyotype (the Infinium HumanCytoSNP-12 Beadchip SNP array) and resolution	46,XX Resolution 500 kb	Fig. 1, panels E
Identity		STR analysis performed	
	STR analysis	Matched at 16 loci	Archived with journal
Mutation analysis (IF APPLICABLE)	Sequencing	ABCA4 c. [5461–10 T > C;5603A > T]; [4163 T > C;455G > A]	Fig. 1, panels B
Microbiology and virology	Southern Blot OR WGS Mycoplasma	N/A Mycoplasma testing by PCR: Negative	N/A Fig. 1, panel F
Differentiation potential	Embryoid body formation	Upregulation of ectoderm (PAX6, OTX1), mesoderm (TBXT, NKX2.5) and endoderm (AFP, SOX17) markers	Fig. 1, panel D
Donor screening (OPTIONAL)	HIV $1+2$ Hepatitis B, Hepatitis C	N/A	N/A
Genotype additional info (OPTIONAL)	Blood group genotyping HLA tissue typing	N/A N/A	N/A N/A

(Table 1). Both LEIi017-A and LEIi017-B displayed morphology typical of pluripotent stem cell colonies (Fig. 1A). The expression of pluripotency markers (OCT4, NANOG, SOX2 and KLF4) was demonstrated by immunocytochemistry at passage 33, and the cell nuclei were stained with DAPI (Fig. 1A). All ABCA4 mutations detected in the patient were confirmed in both LEIi017 iPSC lines by Sanger sequencing (Fig. 1B). Quantitative reverse transcription polymerase chain reaction (RT-qPCR) demonstrated OCT4, NANOG, SOX2, KLF4 and MYC mRNA was expressed comparably in LEIi017-A and LEIi017-B (passage 11), and in a control human iPSC line (HuiPSC, Fig. 1C). The capacity of LEIi017-A and LEIi017-B to differentiate into three germ layers was confirmed by the expression of markers of ectoderm (PAX6, OTX1), mesoderm (TBXT, NKX2.5) and endoderm (AFP, SOX17) lineages in differentiating embryoid body (EB) cultures by RT-qPCR. After 14-day spontaneous differentiation, EBs derived from LEIi017-A (passage 35) and LEIi017-B (passage 34) increased expression of ectoderm, mesoderm and endoderm markers, compared with undifferentiated iPSC (Fig. 1D). Digital karvotyping using the Infinium Human CoreExome-24 Beadchip SNP array (Illumina, San Diego, California, United States) with genome-wide copy number variation (CNV) profiling demonstrated both lines were female and had a normal diploid karyotype (46,XX). Analysis of the B allele frequencies and LogR ratios of ≈500,000 single nucleotide polymorphisms located across the genome demonstrated an absence of reprogramming-induced chromosomal rearrangements in LEIi017-A and LEIi017-B (passage 12 for both, Fig. 1E). Genotyping of 16 microsatellite markers confirmed both iPSC lines were derived from the patient's fibroblasts (data not shown). LEIi017-A (passage 12) and LEIi017-B (passage 12) were negative for reprogramming episomes and mycoplasma (Fig. 1F). The 130 bp GAPDH internal control product was amplified from LEIi017-A and LEIi017-B (Fig. 1F).

4. Materials and methods

Ethics: This work was approved by the University of Western Australia Human Research Ethics Committee (RA/4/1/7916). Written consent was obtained from the patient and all procedures complied with requirements of the National Health & Medical Research Council of Australia (National Statement on Ethical Conduct in Human Research (2007, updated 2018) and the Declaration of Helsinki.

Cell culture: Fibroblasts were cultured in DMEM (11995065, Gibco) supplemented with 10% fetal bovine serum (FBS, 26140079, Gibco) and $1\times$ Antibiotic-Antimycotic (15240062, Gibco). Human iPSC lines were cultured on Geltrex-coated (A1413202, Gibco) plates in TeSR-E8 medium (05990, StemCell Technologies) and passaged using TrypLE Express Enzyme (12604021, Gibco) every 4–5 days using a split ratio of 1:3–1:6. Both fibroblasts and iPSC cultures were maintained at 37 °C with 5% CO₂.

Reprogramming: Fibroblasts were reprogrammed using the Epi5TM Episomal iPSC Reprogramming Kit (A15960, Invitrogen). Fibroblast cells (1 \times 10⁵) were electroporated using the Invitrogen NEON electroporation system (three 10 ms pulses at 1650 V in a 10 μ l tip). iPSC colonies were picked for clonal expansion on day 28.

Trilineage differentiation: EB differentiation was performed by seeding iPSC clusters into 6-well suspension plates containing mTesR1 medium (85850, StemCell Technologies) and $10\,\mu\text{M}$ Y27632 (ab120129, Abcam). On day 3, medium was changed to DMEM/F12 (11320033, Gibco) supplemented with 20% knockout serum replacement (KSR, 10828–028, Gibco), Antibiotic–Antimycotic and MEM-non essential amino acids (MEM-NEAA, 11140050,Gibco). Half medium changes were performed daily and EB RNA was harvested at day 14.

RNA analysis: RNA extraction was performed using MagMAX TM-96 Total RNA Isolation kit (AM1830, Invitrogen). RT-qPCR was performed with RT² SYBR Green qPCR Mastermix (330503, Qiagen) on the BioRad CFX Connect Real-Time System (45 cycles, 95 °C for 30 s, 60 °C for 60 s). Gene expression was quantified using the Δ CT method, normalized to *GAPDH* expression. Primers used are listed in Table 2.

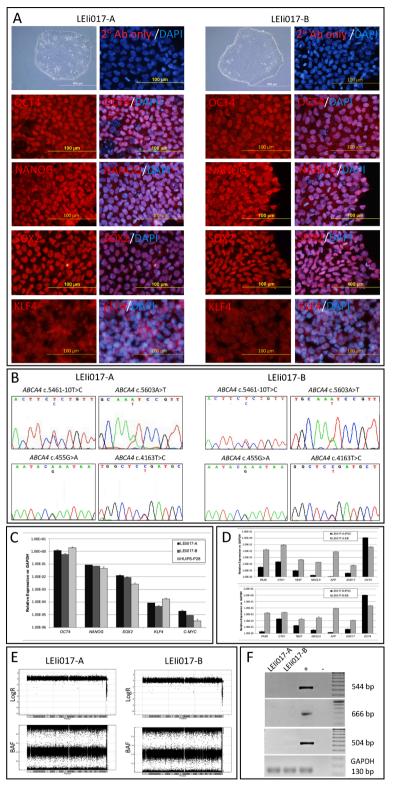


Fig. 1. Characterization of LEIi017-A and LEIi017-B iPSC. (A) LEIi017-A and LEIi017-B iPSC colonies showed typical pluripotent stem cell morphology (brightfield images) and were positive for OCT4, NANOG, SOX2 and KLF4 immunostaining (red signal, immunofluorescence images). Counterstaining with DAPI (blue signal) demonstrated nuclear localization of each marker (merged fluorescence images). Negative controls with primary antibodies omitted (2° Ab only) showed no background staining. (B) Sanger sequencing chromatograms confirmed the presence of the c.[5461-10T>C;5603A>T] and c. [4163T>C;455G>A] complex alleles in LEIi017-A and LEIi017-B. (C) Quantitative PCR analysis demonstrated similar levels of OCT4, NANOG, SOX2, KLF4 and C-MYC mRNA expression in LEIi017-A, LEIi017-B and a commercial control iPSC line (HUiPS P28). (D) Quantitative PCR analysis demonstrated upregulation of ectoderm (PAX6, OTX1), mesoderm (TBXT, NKX2.5) and endoderm (AFP, SOX17) markers and downregulation of OCT4 in embryoid bodies (EB) derived from LEIi017-A (upper panel) and LEIi017-B (lower panel), compared with undifferentiated iPSC. (E) LogR and B allele frequency (BAF) scatter plots of » 500,000 human genomic SNPs demonstrated a normal 46,XX karyotype in both LEIi017-A and LEIi017-B. (F) PCR analysis demonstrated LEIi017-A and LEIi017-B were negative for reprogramming episomes (544bp and 666bp) and mycoplasma DNA (504bp) and positive for GAPDH (130bp) at passage 12. Positive controls (+) showed amplification of the expected bands. No bands were amplified in negative controls without template DNA (-).

Immunocytochemistry analysis: Patient iPSCs were fixed with 4% paraformaldehyde for 15 min at 37 $^{\circ}$ C, washed with PBS and incubated with blocking buffer (5% normal goat serum in PBS containing 0.3% Triton X100) for 1 h at room temperature, followed by incubation with primary antibodies at 4 $^{\circ}$ C overnight. Negative controls omitting primary antibodies were included. Secondary antibodies and DAPI (1 $\mu g/mL)$ were applied for 1 h at room temperature. Antibodies are listed in Table 2.

Digital karyotyping and microsatellite analysis: Karyotyping was performed on LEIi017-A and LEIi017-B by the Australian Genome Research Facility (AGRF, Perth, Western Australia), using the Infinium Human CoreExome-24 Beadchip SNP array (Illumina, United States). CNV analysis was performed using GenomeStudio 2.0 software with the cnvPartition 2.0 plugin (Illumina). Microsatellite analysis was performed by AGRF using the Promega Powerplex 16H system (Promega, United States).

Table 2 Reagents details.

		Antibodies used for immunocytochemistry				
	Antibody	Dilution	Company Cat #	RRID		
Pluripotency Markers	Rabbit anti- OCT4	1:1000	Sino biological 101282-T02	AB_2810309		
	Rabbit anti- NANOG	1:1000	Sino biological 101286-T34	AB_2810308		
	Rabbit anti- SOX2	1:1000	Sino Biological 101284-T42	AB_2810307		
	Rabbit anti- KLF4	1:100	Invitrogen 710,659	AB_2532749		
Secondary antibodies	Goat anti- Rabbit AlexaFluor 546	1:250	Invitrogen A11035	AB_2534093		
	Primers			(=1.01)		
	Target	Size of band	Forward/Reverse primer (5'-3')			
Episomal Plasmids (PCR)	Episomal vectors (OriP)	544 bp	TTCCACGAGGGTAGTGAACC/ TCGGGGGTGTTAGAGACAAC			
	Episomal	666 bp	ATCGTCAAAGCTGCA			
	vectors (EBNA1)		CCCAGGAGTCCCAGT	TAGTCA		
Mycoplasma Primers (PCR)	Mycoplasma DNA	504 bp	YGCCTGVGTAGTAYRYWCGC/ GCGGTGTGTACAARMCCCGA			
Pluripotency Markers (qPCR)	OCT4	105 bp	CCTGAAGCAGAAGAGGATCACC/ AAAGCGGCAGATGGTCGTTTGG			
	NANOG	114 bp	CTCCAACATCCTGAACCTCAGC/ CGTCACACCATTGCTATTCTTCG			
	SOX2	134 bp	GCTACAGCATGATGCAGGACCA/ TCTGCGAGCTGGTCATGGAGTT			
	KLF4	110 bp	CATCTCAAGGCACACCTGCGAA/ TCGGTCGCATTTTTGGCACTGG			
	MYC	128 bp	CCTGGTGCTCCATGAGGAGAC/ CAGACTCTGACCTTTTGCCAGG			
Trilineage Markers (qPCR)	PAX6	130 bp	CTGAGGAATCAGAGAAGACAGGC/ ATGGAGCCAGATGTGAAGGAGG			
	OTX1	159 bp	CTACCCTGACATCTT			
	TBXT	152 bp	GGAGAGGACTTCTTCTTGGCTG CCTTCAGCAAAGTCAAGCTCACC/			
	NKX2.5	146 bp	TGAACTGGGTCTCAGGGAAGCA AAGTGTGCGTCTGCCTTTCCCG/			
	AFP	96 bp	TTGTCCGCCTCTGTC TGAGCACTGTTGCAC	GAGGAG/		
	SOX17	111 bp	TTGTTTGACAGAGTGTCTTGTTGA ACGCTTTCATGGTGTGGGCTAAG /			
House- Keeping Genes (qPCR)	GAPDH	130 bp	GTCAGCGCCTTCCAC GTCTCCTCTGACTTC ACCACCCTGTTGCTG	AACAGCG/		
Targeted mutation sequencing	ABCA4	765 bp	CCTTGAGGCACTGCT GGTCAGGAGGAAGT			
	ABCA4	585 bp	CCATCCAGCCCTGGC GGTCACCAGGATGTC			
	ABCA4	442 bp	TGAAGTCTGGCTGA/	ACACTG/		

DNA Analysis: Genomic DNA was extracted using FlexiGene DNA

kit (51206, Qiagen). PCR for Sanger sequencing was performed on a GeneTouch Thermal Cycler (35 cycles, 94 °C for 30 s, 60 °C for 60 s, 72 °C for 2mins). Mycoplasma testing by PCR was performed using the Mycoplasma Testing Kit (#091, Media and Monoclonal Laboratories, Harry Perkins Institute of Medical Research, Fig. 1F). PCR screening for reprogramming episomes was performed using primers listed in Table 2.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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Appendix A. Supplementary data

Supplementary data to this article can be found online at $\frac{\text{https:}}{\text{doi.}}$ org/10.1016/j.scr.2021.102448.

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