

Towards an HIV Cure: Industry Collaboration Group

Cell and gene therapy for HIV cure: Platforms,
progress and practical considerations

Session 2: Gene delivery platforms &
technologies – Delivering a cure



Stay muted and with
camera off



Webinar is being recorded
and will be posted on the
IAS+ platform



Share your thoughts
please use the chat/Q&A

Co-chairs



Devi SenGupta
Gilead Sciences



Roger Tatoud
Origena Consulting / IAS Consultant



<https://bit.ly/3ZJPkTS>

Presenters



Ying Tam
Acuitas Therapeutics Inc.



Edward F Kreider
University of Pennsylvania



Paula Cevaál, The Peter Doherty
Institute for Infection and Immunity



Aijun Wang
UC Davis School of Medicine

Thank you to our partners



bit.ly/CPPIAS



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Acuitas Therapeutics

IAS Corporate Partnership Programme Webinar Series

Cell and Gene Therapy for HIV Cure: Platforms, Progress and Practical Considerations

12 March 2026





Overview

WHO WE ARE

Acuitas is a globally recognized biotechnology company specializing in the **development of delivery systems for nucleic acid therapeutics based on lipid nanoparticles (LNP).**

Our LNP:

- enabled three clinical firsts
- currently enable two commercial products:



WHO WE WORK WITH

We work with a variety of organizations, including:

 Cutting edge **pharmaceutical & biotechnology** companies

 Leading **academics in universities & institutes**

 **Foundations & NGOs**

HOW WE WORK

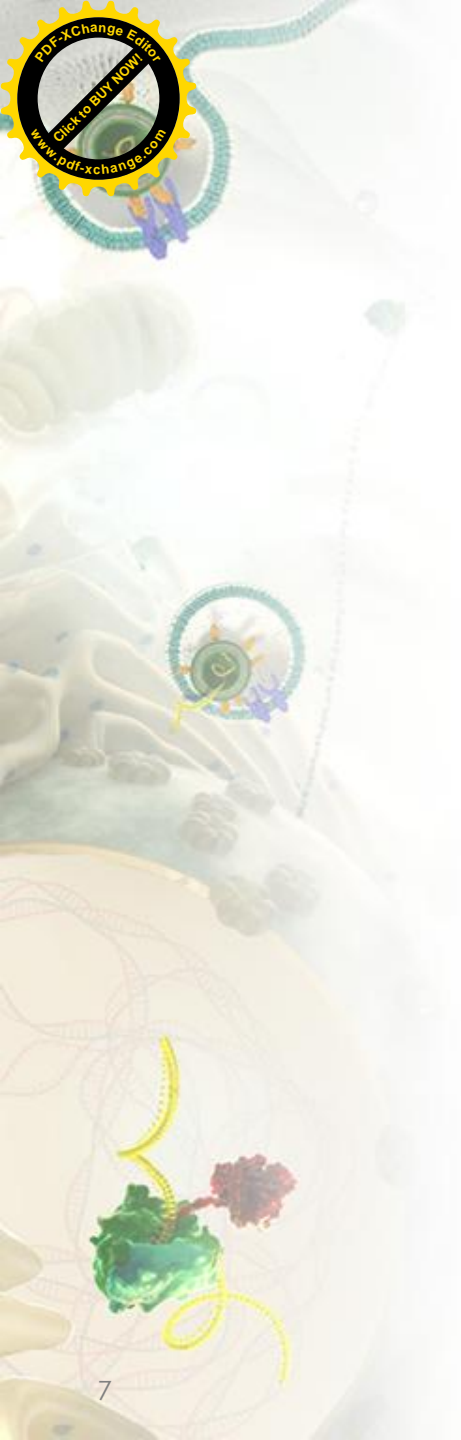
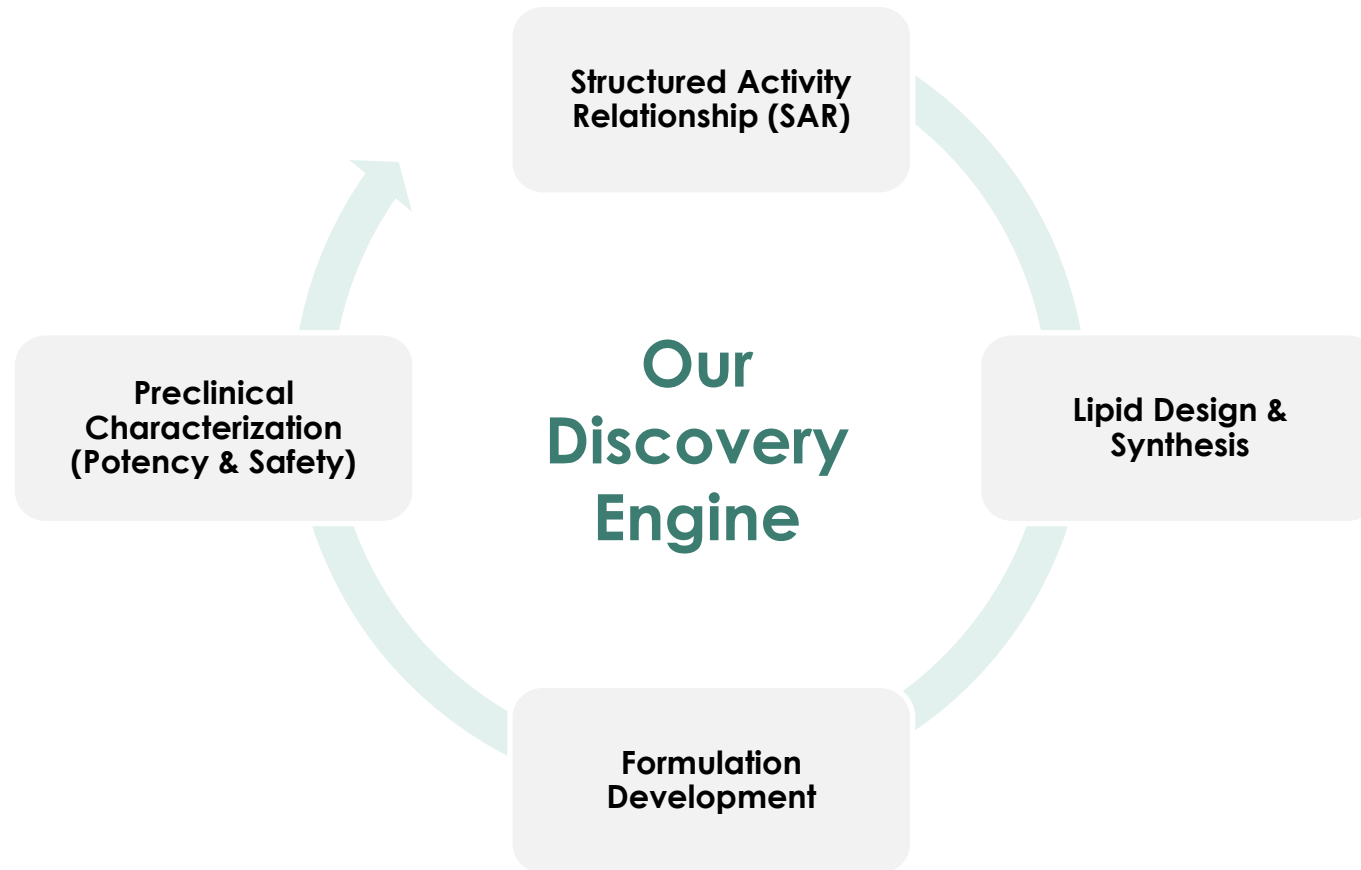
As a technology platform provider, we exclusively work in collaboration with partners.

We do not have our own drug development programs – **we are focused on supporting our partners to bring their drug products to patients.**

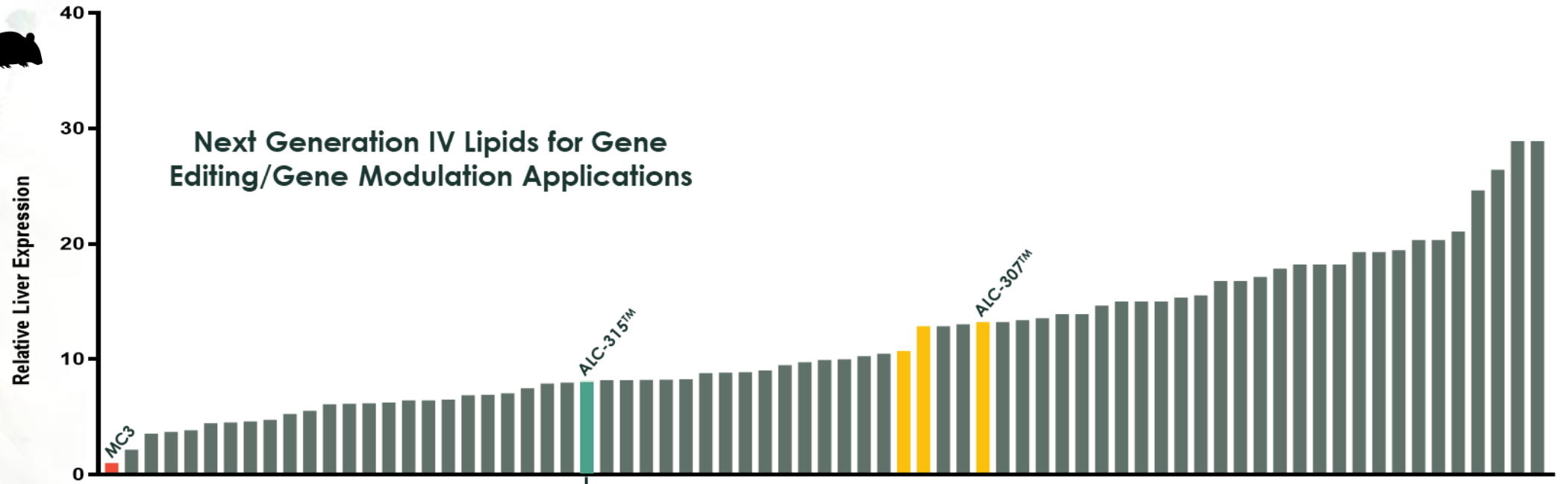




Our Approach to Innovation



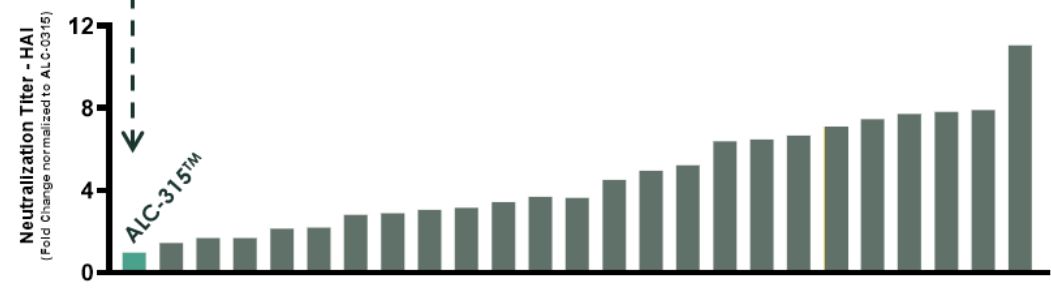
Our Approach to Innovation

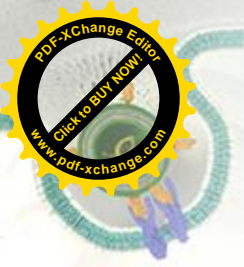


Ionizable Cationic Lipid

LEGEND cGMP ready + in clinic

Next Generation IM Lipids for Vaccine Applications





Applying Our LNP Technology

Gene Modulation

Expression of an **epigenic editor** to modify gene expression **without changing the genetic code**.

Gene Editing

Expression of a **genome editing** protein to modify gene expression.

Vaccines

Expression of viral or bacterial proteins to generate a protective **immune response**.

Expression of **tumour antigens** (including personalized cancer vaccines).

Antibody and Therapeutic Protein Delivery

Expression of **proteins including prophylactic or therapeutic antibodies** to treat current and emerging diseases.



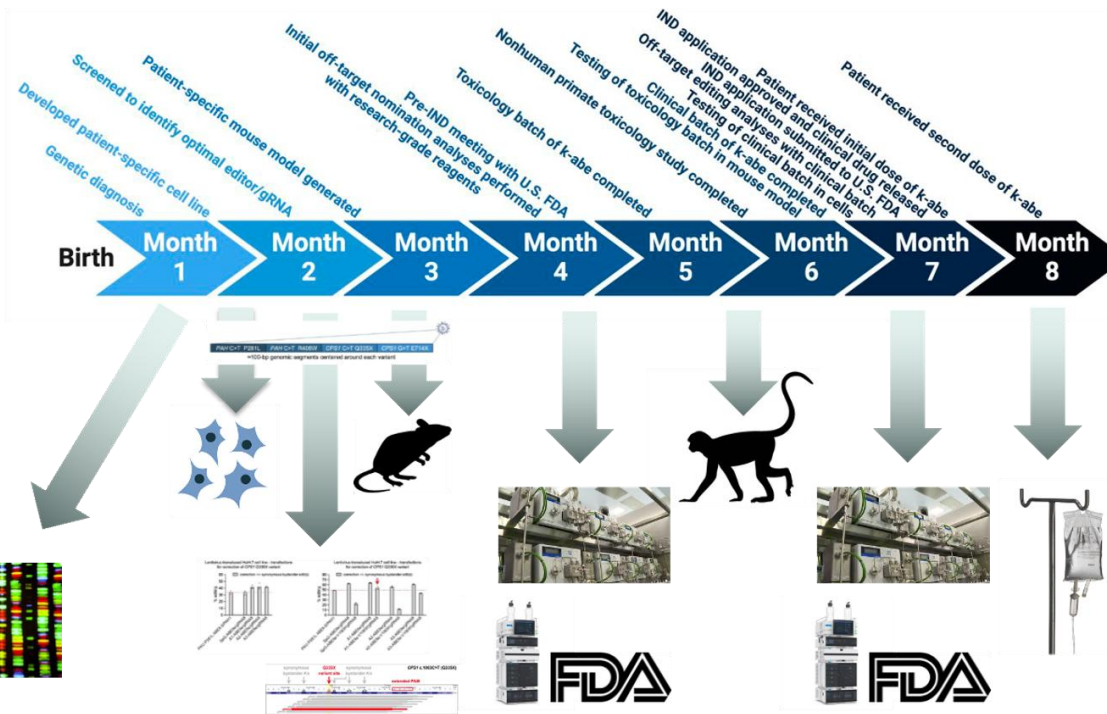
In Vivo CAR-T

Expression of a Chimeric Antigen Receptor for **in vivo production of CAR-T cells** to treat cancer and autoimmune disease.



Applying Our LNP Technology

Delivery of mRNA encoding gene editing enzymes



Photos from:
<https://www.chop.edu/centers-programs/genetherapy4inheritedmetabolicdisorders/future-personalized-medicine-here-kjs>

Musunuru et al., NEJM 392(22), 2025

First personalized base editing therapy to treat a urea cycle disorder



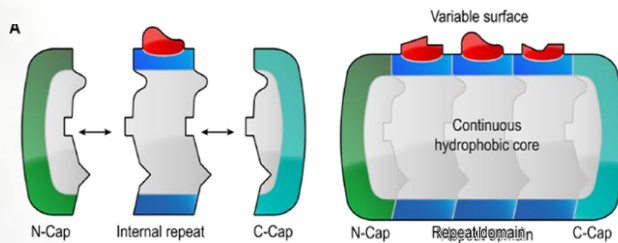
Continuous Innovation: Extrahepatic Targets

OUR APPROACH

Our extrahepatic program is focused on delivery via **cell targets that are directly accessible in the blood compartment or local administration.**

HOW WE DO IT

We use antibody mimetics called **Designed ankyrin repeat proteins (DARPin)s.**



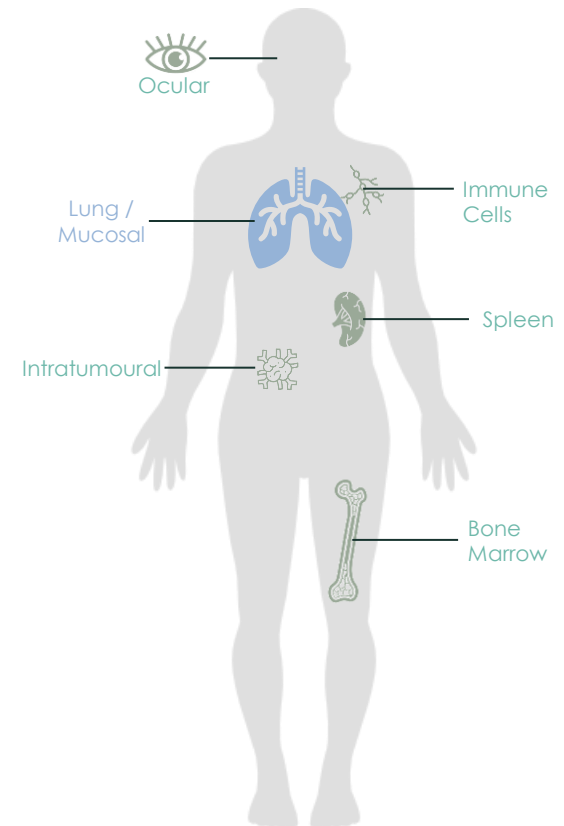
AREAS WE CAN TARGET

Diseases Affecting the Lung
(i.e., CF, Cancer, Infectious Disease etc.)

Mucosal (via aerosolization)

Epigenetic Regulation and Gene Modification

Spleen, Bone Marrow, Ocular, Intratumoural, Immune Cells





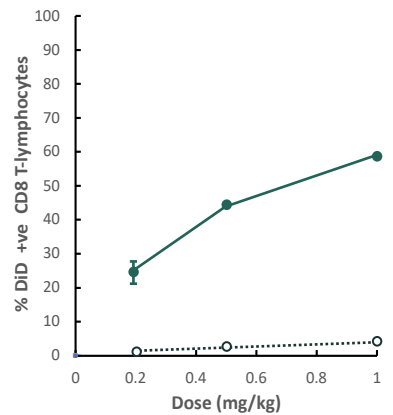
Continuous Innovation: Extrahepatic Targets

Targeted LNP for in vivo generation of CAR-T Cells

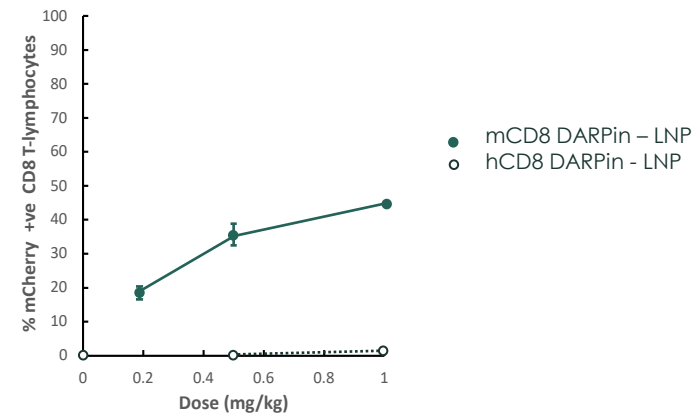


CD8 DARPin targeted mRNA LNP show **dose dependent, target specific binding / uptake and transgene expression.**

LNP Binding / Uptake



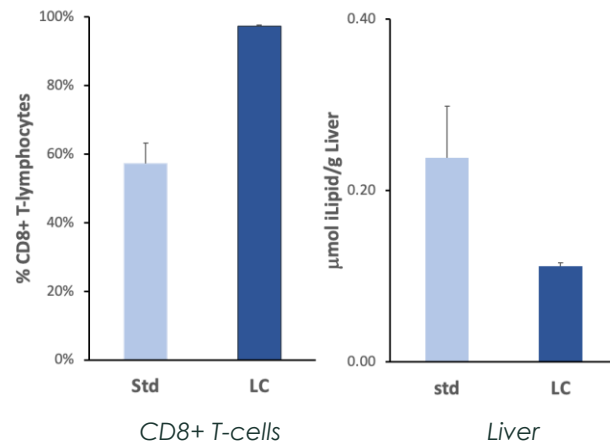
Reporter Gene Expression



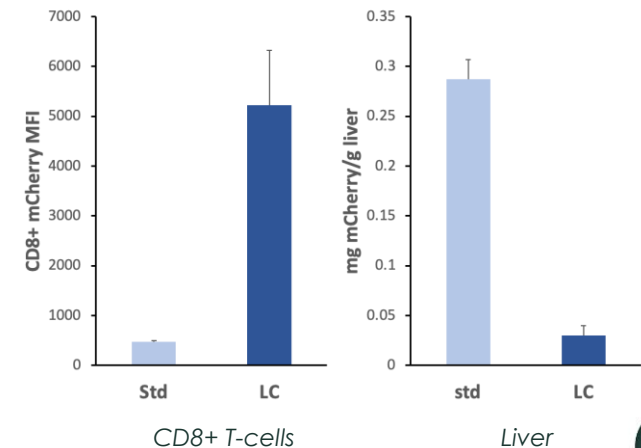
Optimized long circulating (LC) LNP results in **2x increased binding / uptake and 10x increased expression.**

Expression in liver is **~10x lower** vs. standard LNP.

LNP Binding / Uptake



Reporter Gene Expression



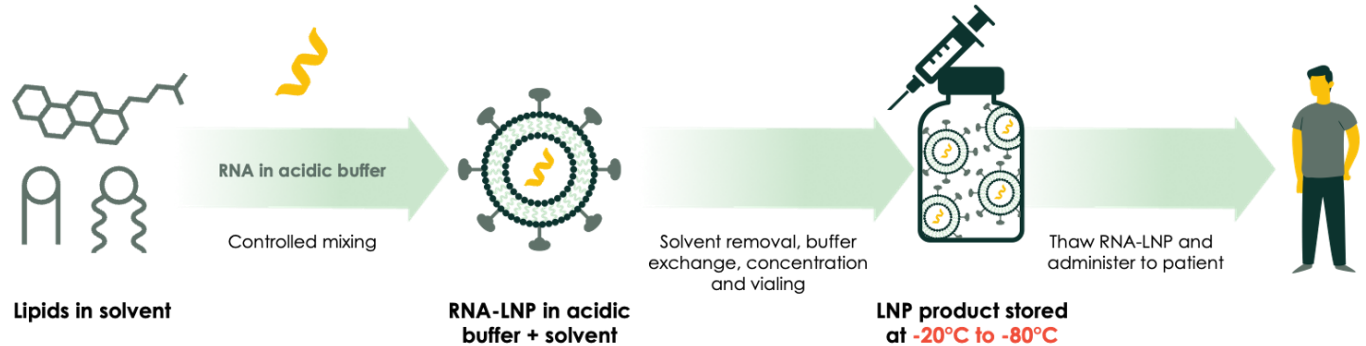
Delivery of mRNA to CD8+ T-lymphocytes by DARPin targeted LNP



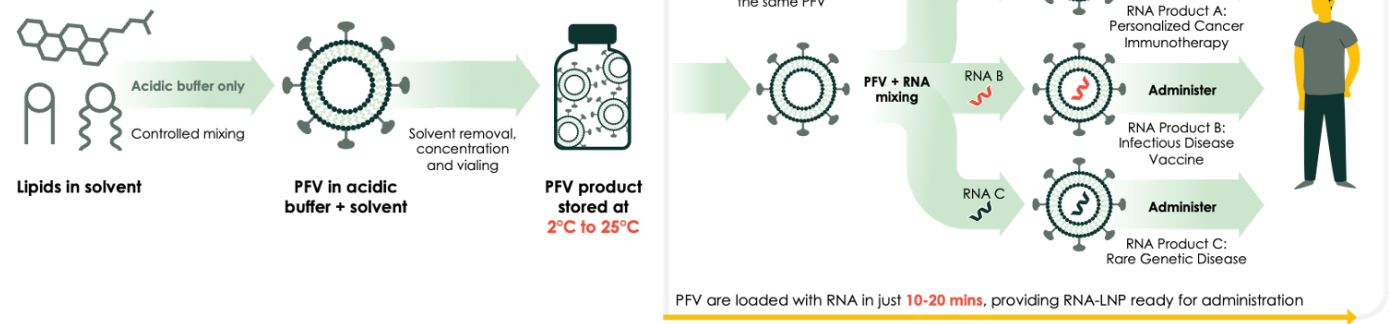


Continuous Innovation: Pre-Formed Vesicles (PFV)

Conventional Method

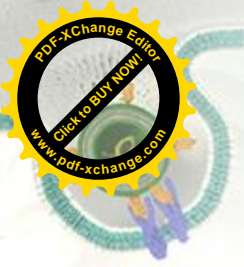


PFV Method



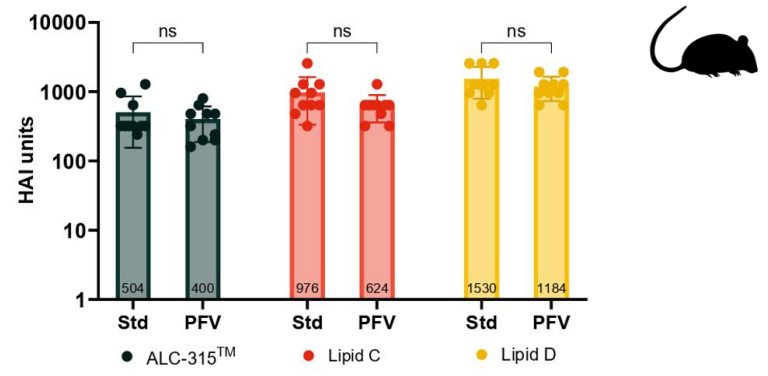
Alternative mRNA LNP Manufacturing by Pre-formed Vesicles (PFV)



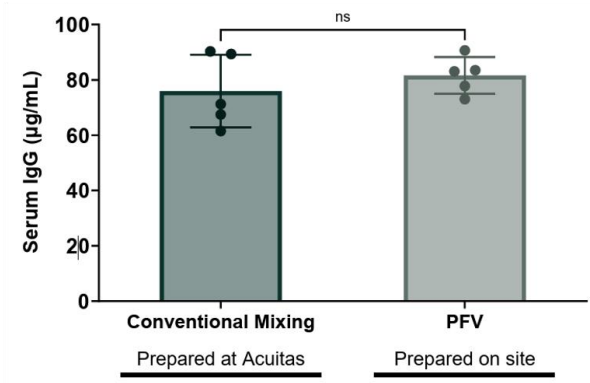


Continuous Innovation: Pre-Formed Vesicles (PFV)

IM: Day 28 HAI Titres (0.2 µg)



IV: Day 1 Plasma IgG (0.5 mg/kg)



- Conventional and PFV methods exhibit equivalent *in vivo* vaccine performance across lead LNP formulations
- PFV formulation prepared at point of use has IV potency equivalent to conventional formulation of IgG mRNA

PFV and conventionally manufactured mRNA LNP have equivalent activity





Continuous Innovation: Pre-Formed Vesicles (PFV)



Refrigerated (2-8°C) (and potential for room temperature) long term **storage & distribution**



Flexible, small-scale manufacturing capability

Infectious Disease Vaccine



Improve **accessibility and distribution**



Regional-specific vaccine formulation



On-demand variant selection

Personalized Cancer Vaccine



Adaptable **neoantigen modification**

Rare Genetic Disease Therapeutics

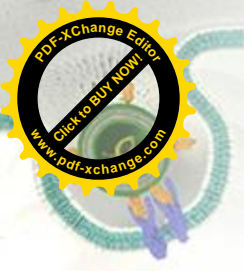


Fast and cost-effective



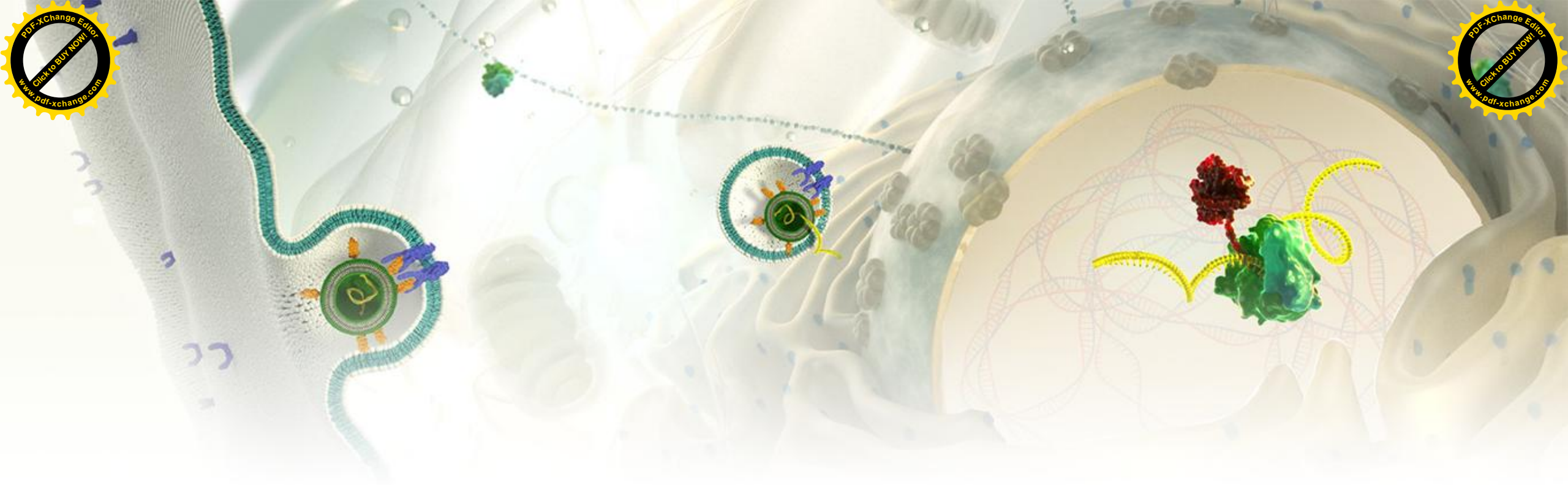
Modular, flexible, platform approach

PFV provide enhanced accessibility to mRNA LNP medicines



Summary

- Continual development of progressively more active and better tolerated LNP
- Enable a broad range of therapeutic modalities, including in the gene editing and gene modulation space as well as in vivo CAR-T cell generation
- Developing strategies to delivery payloads to extrahepatic cell targets
- Pre-formed vesicles (PFVs) - simple, highly flexible, point-of-care mRNA-LNP manufacturing option that maintains particle characteristics, stability and potency vs conventional methods
 - Significant benefits for cost, storage, distribution and formulating small batches for personalized medicines



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<https://acuitastx.com/>



From Vaccines to Gene Therapy: Tailoring mRNA-LNP interventions for HIV Cure

Edward (Ted) Kreider, MD, PhD

Assistant Professor

Division of Infectious Diseases, Department of Medicine

Penn Institute for RNA Innovation

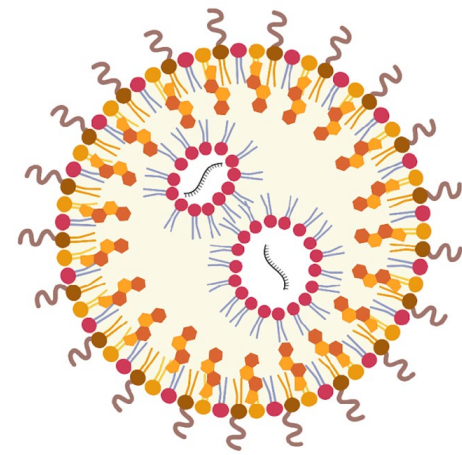
University of Pennsylvania





The mRNA-LNP platform is a powerful tool for basic, translational, and clinical investigation

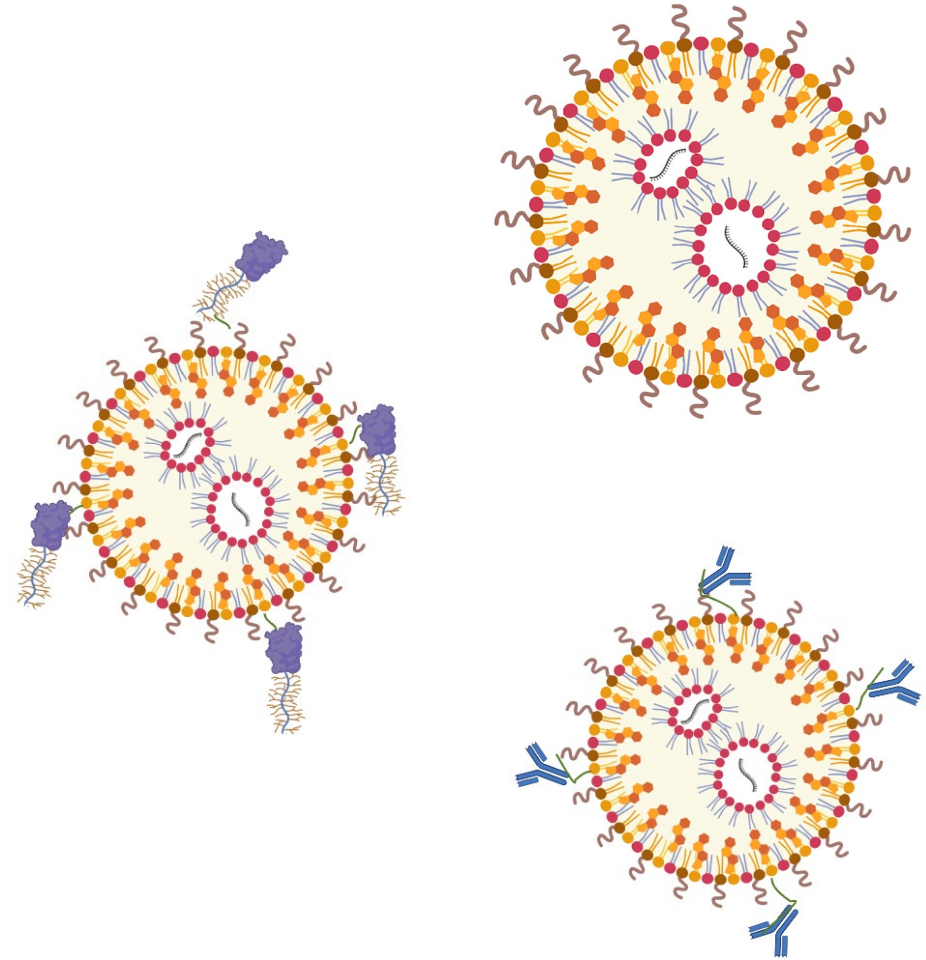
- No insertional mutagenesis, prescreening
- FDA approved
 - RNAi
 - Vaccines
 - Gene therapy
- Rapid to produce using cell-free methods
 - Catalyze discovery
 - Accelerate translation
- Inexpensive at scale



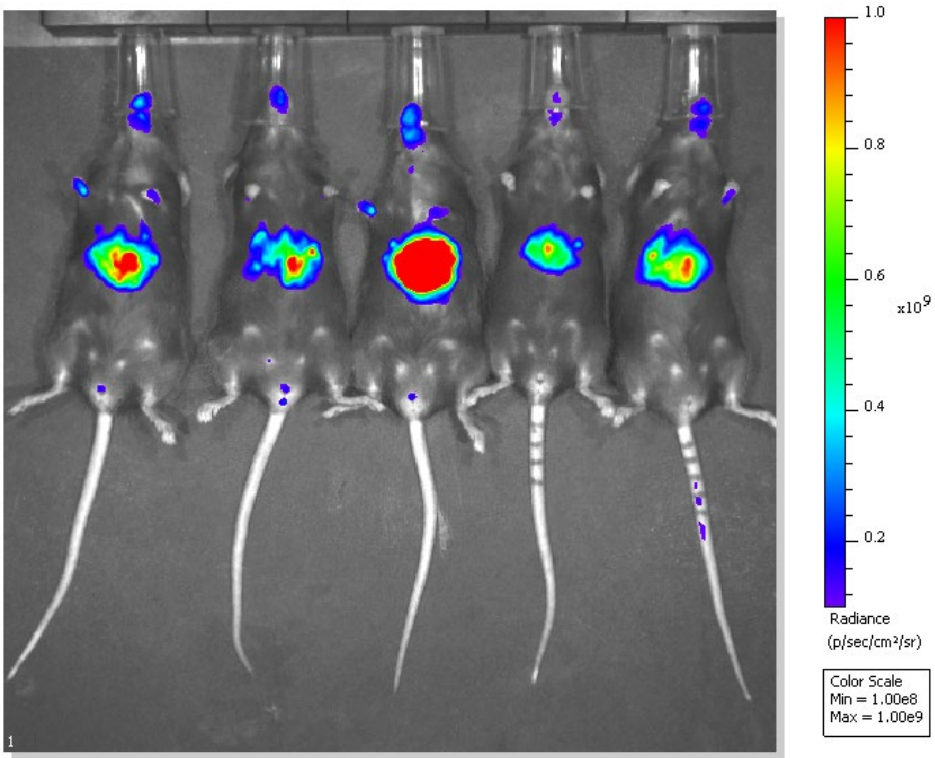
- **Timed, tissue- and cell type-directed, transient expression of a protein of interest**
 - **Work of others**
 - **Work at Institute for RNA Innovation**

The mRNA-LNP platform is modular in nature and can be used to build customized interventions

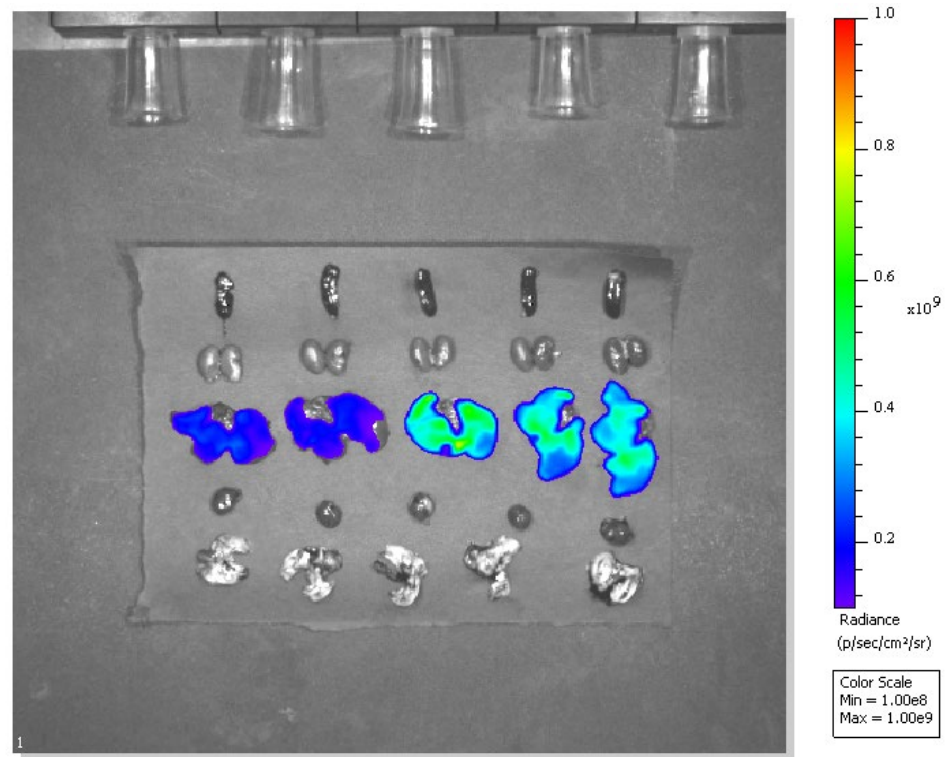
- Cargo – nucleic acid
 - Nucleoside-mod mRNA, siRNA, etc.
- Carrier - lipid nanoparticles (**LNPs**)
 - mRNA → cytosol → protein
 - Adjuvant activity
 - Targeting
 - Route
 - Composition
 - Moieties



Intravenous administration of many mRNA-LNPs results in efficient mRNA delivery to the liver

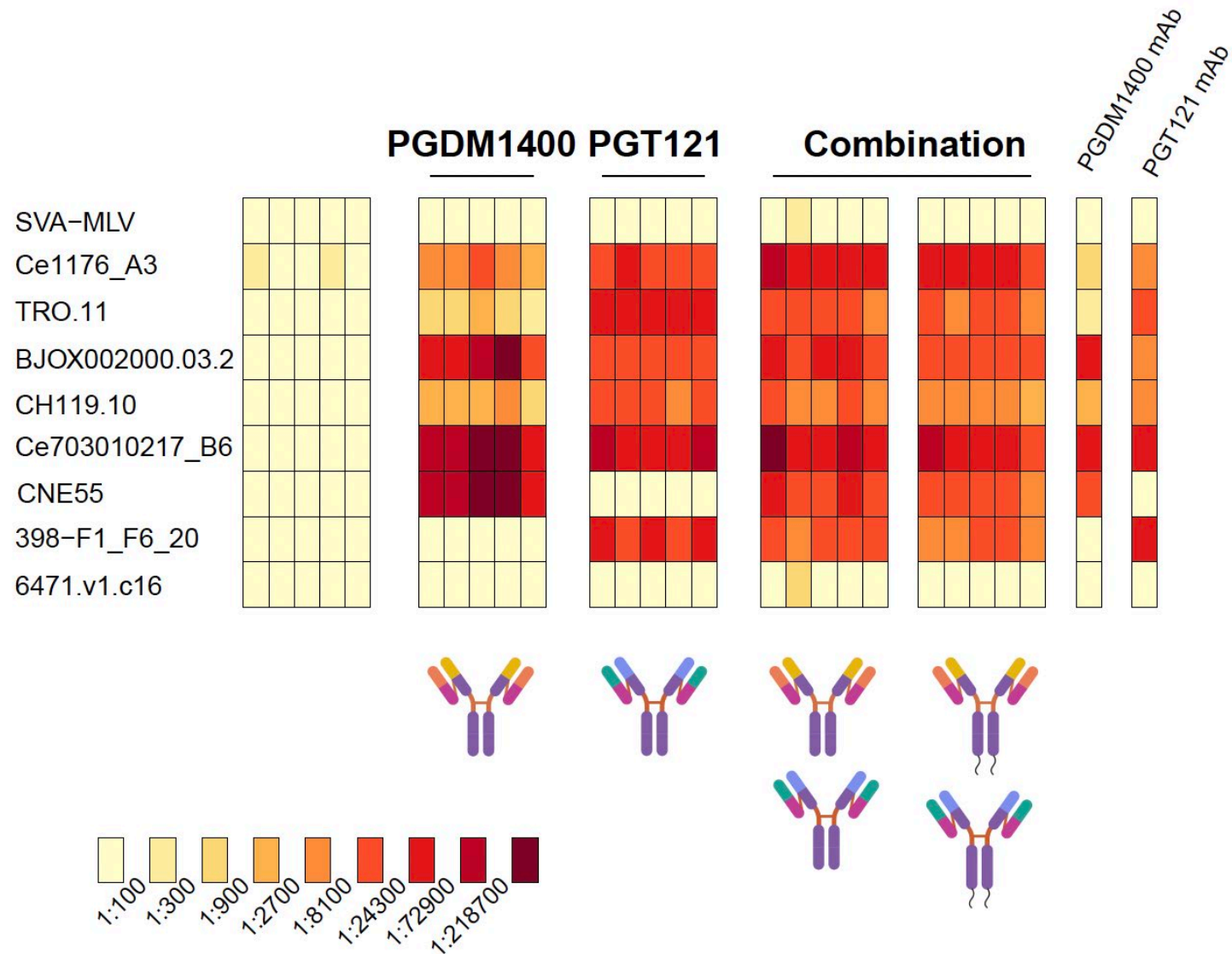


Liver



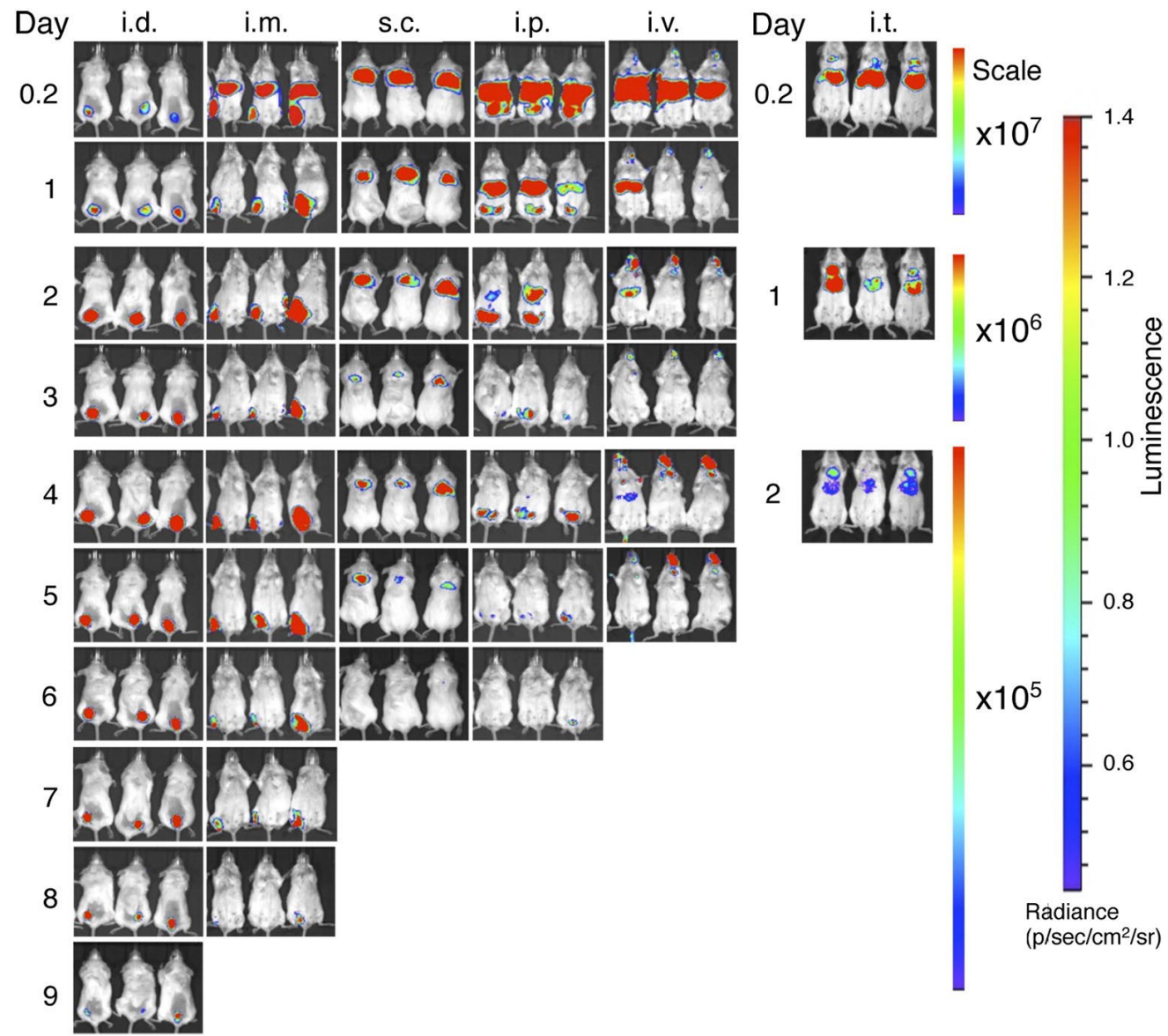


Combinations of bnAbs can be passively delivered following intravenous antibody mRNA-LNP injection

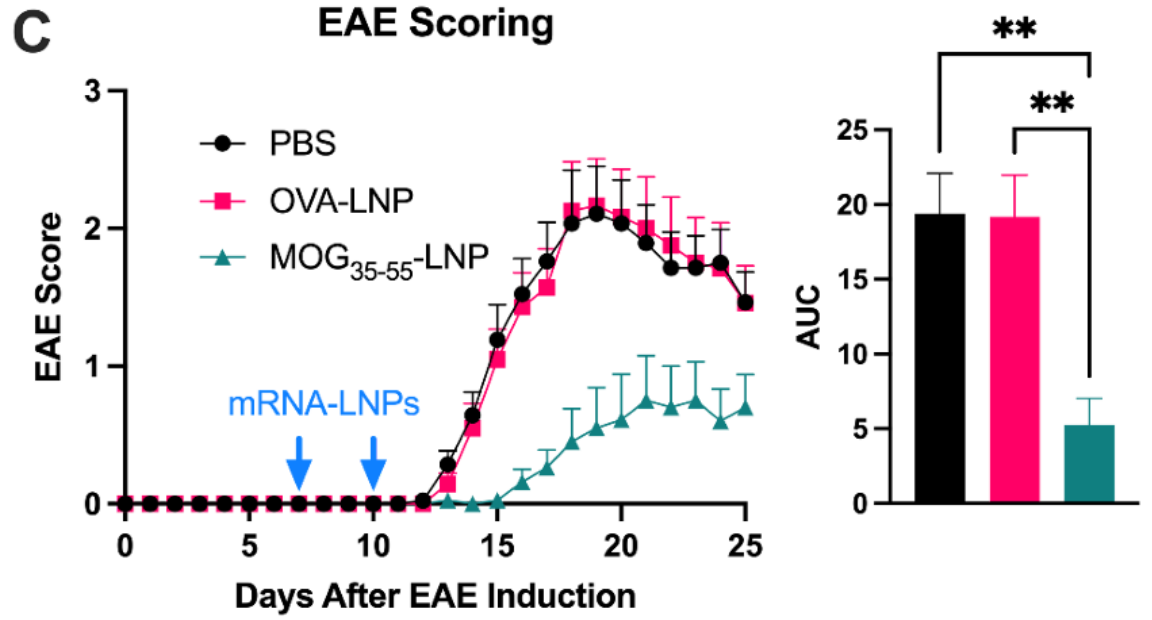
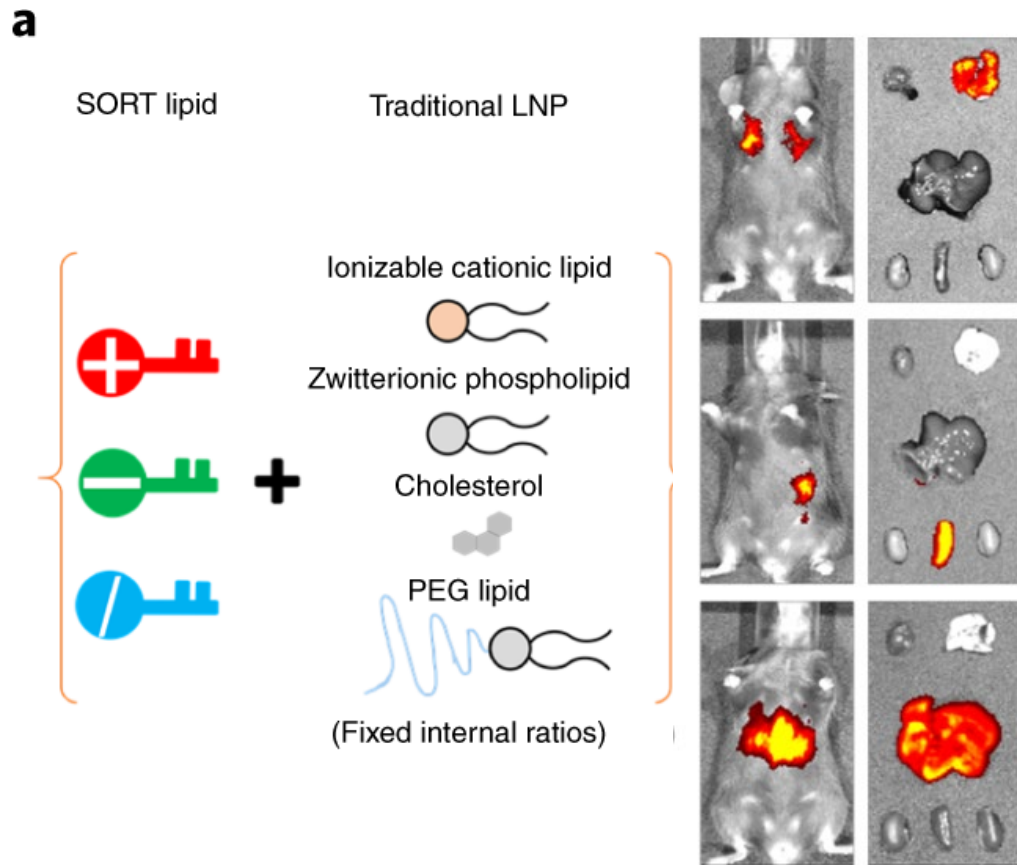


(Su, et al., in preparation)

Route of administration can alter mRNA biodistribution

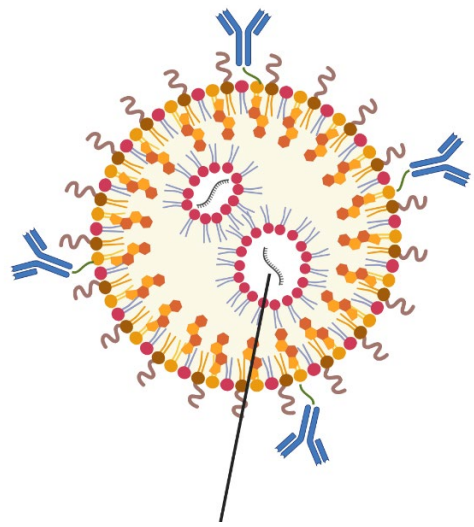


Inclusion of charged lipids can alter mRNA biodistribution and adjuvant activity



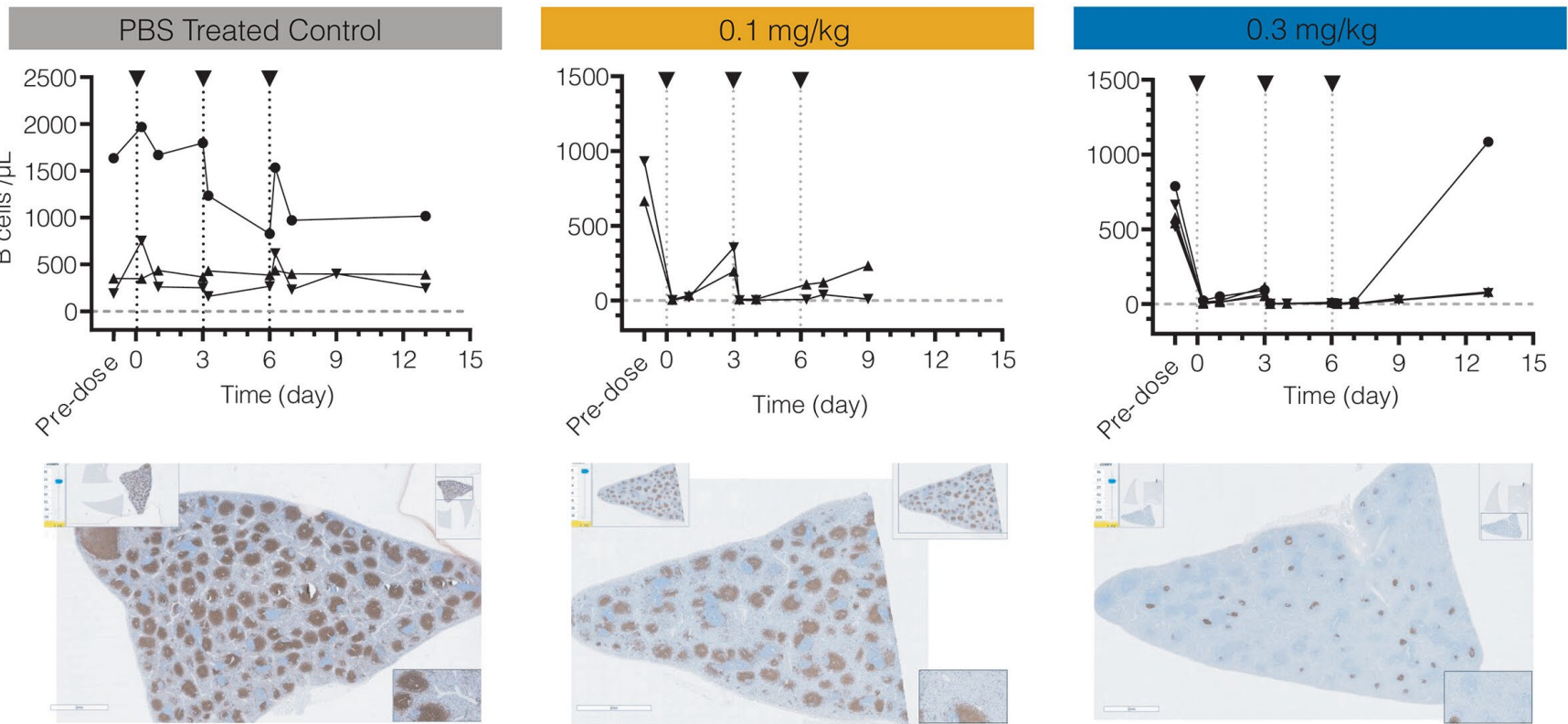
Three low doses of aCD8-targeted B Cell CAR mRNA-LNPs results in peripheral B cell depletion

Anti-CD8 mAb



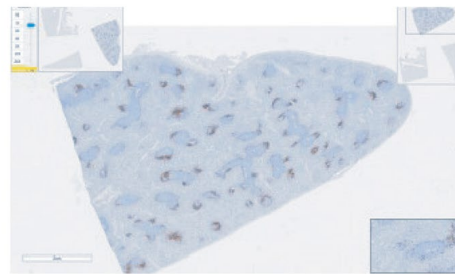
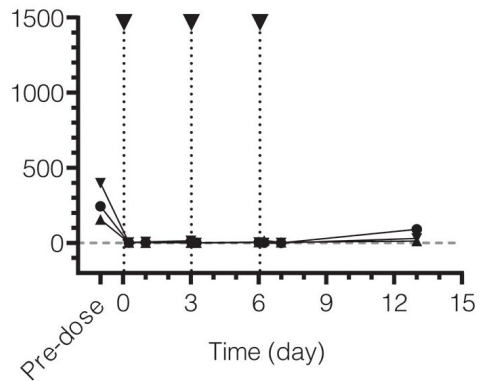
Anti-B cell CAR

B

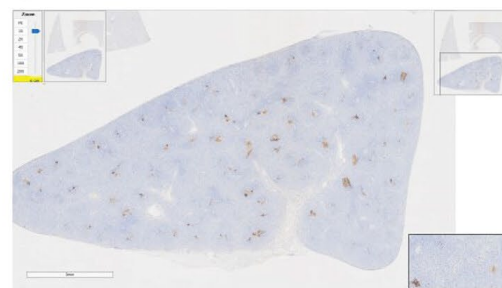
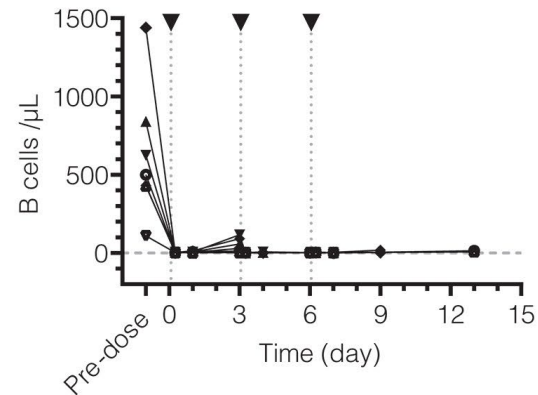


Three high doses of aCD8-targeted B Cell CAR mRNA-LNPs results in profound peripheral and SLT B cell depletion

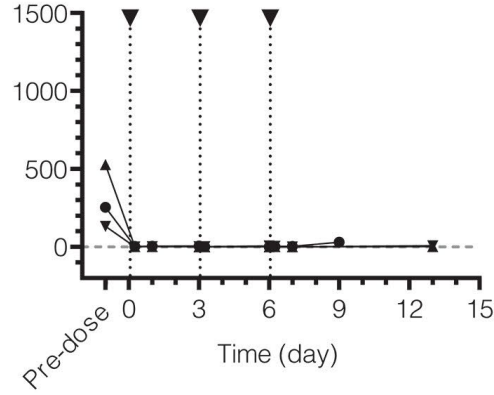
0.5 mg/kg



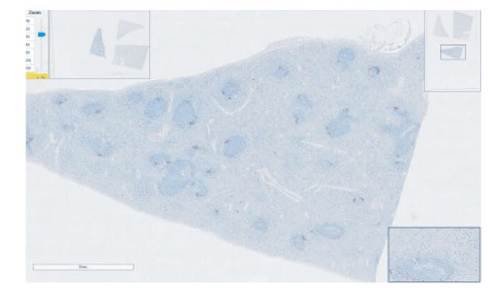
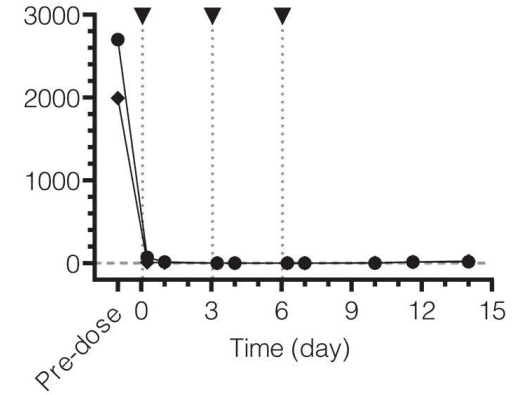
1.0 mg/kg



1.5 mg/kg



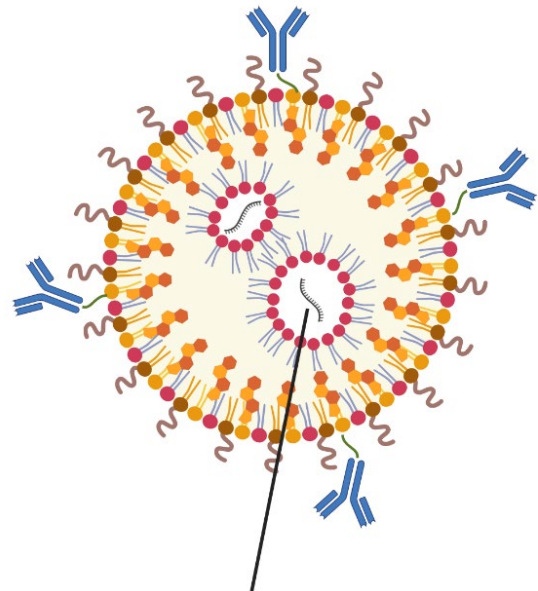
2.0 mg/kg





Ibalizumab-targeted mRNA-LNPs efficiently deliver to resting CD4+ T cells

Anti-CD4 mAb

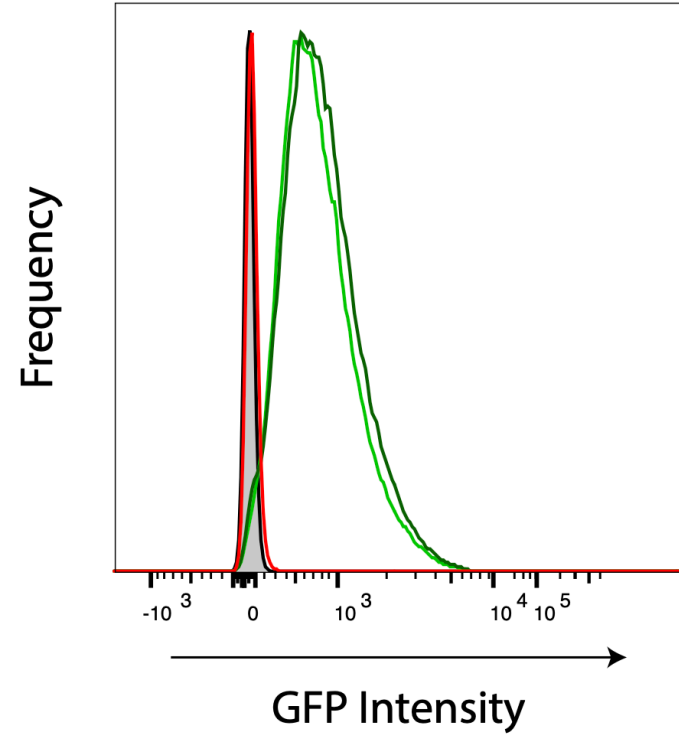


mRNA (reporter, Tat)



- Ibalizumab:
 - Binds D2 of CD4
 - Rapidly internalized

Human CD4
Day 3

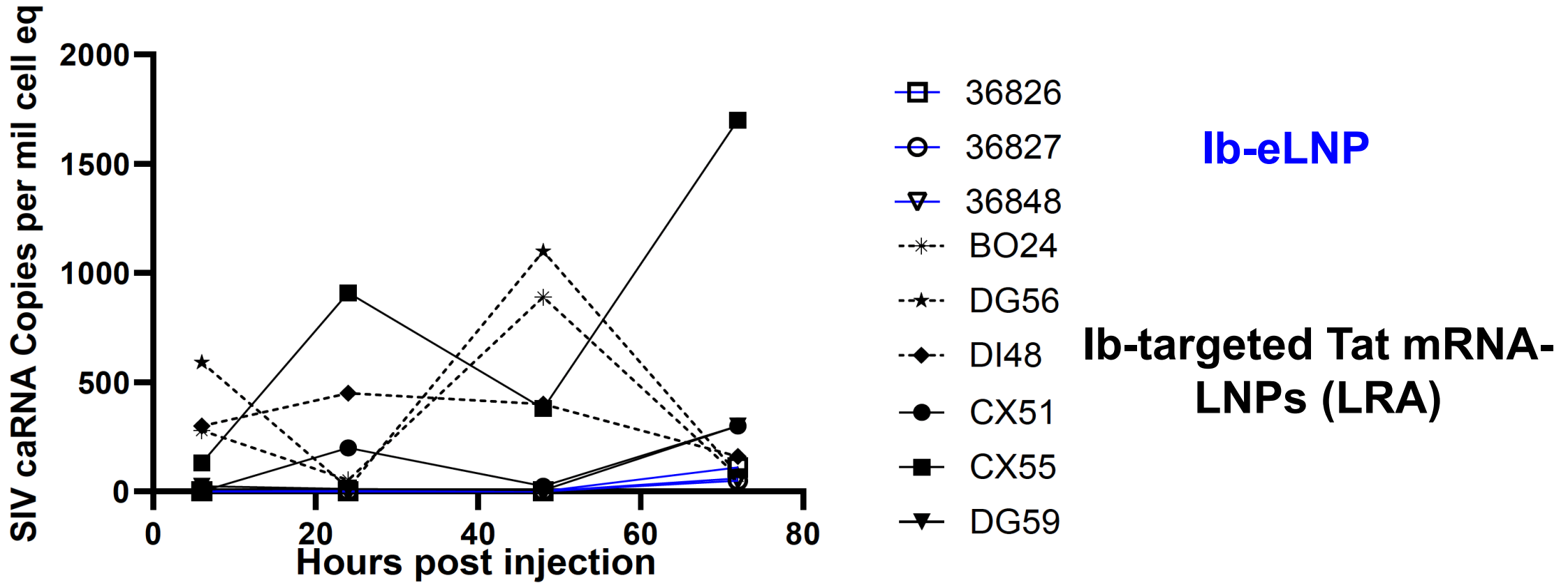


No treatment (grey fill)
Ib-GFP 1ug/million cells
Ib-GFP 2ug/million cells
Ib-luciferase 1ug/million cells

(Kreider, et al., in preparation)

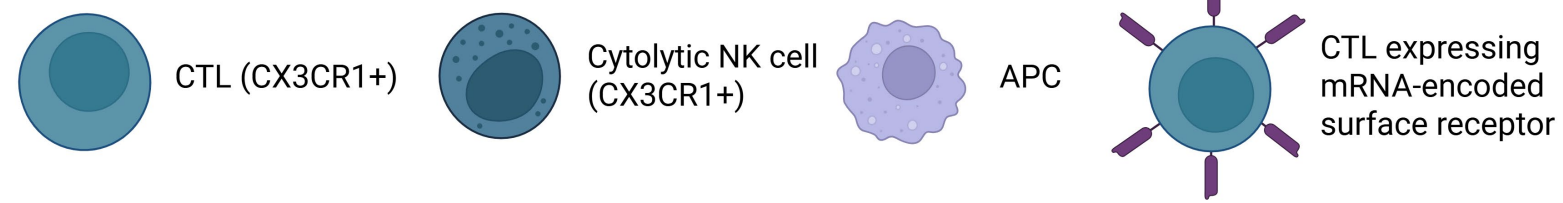
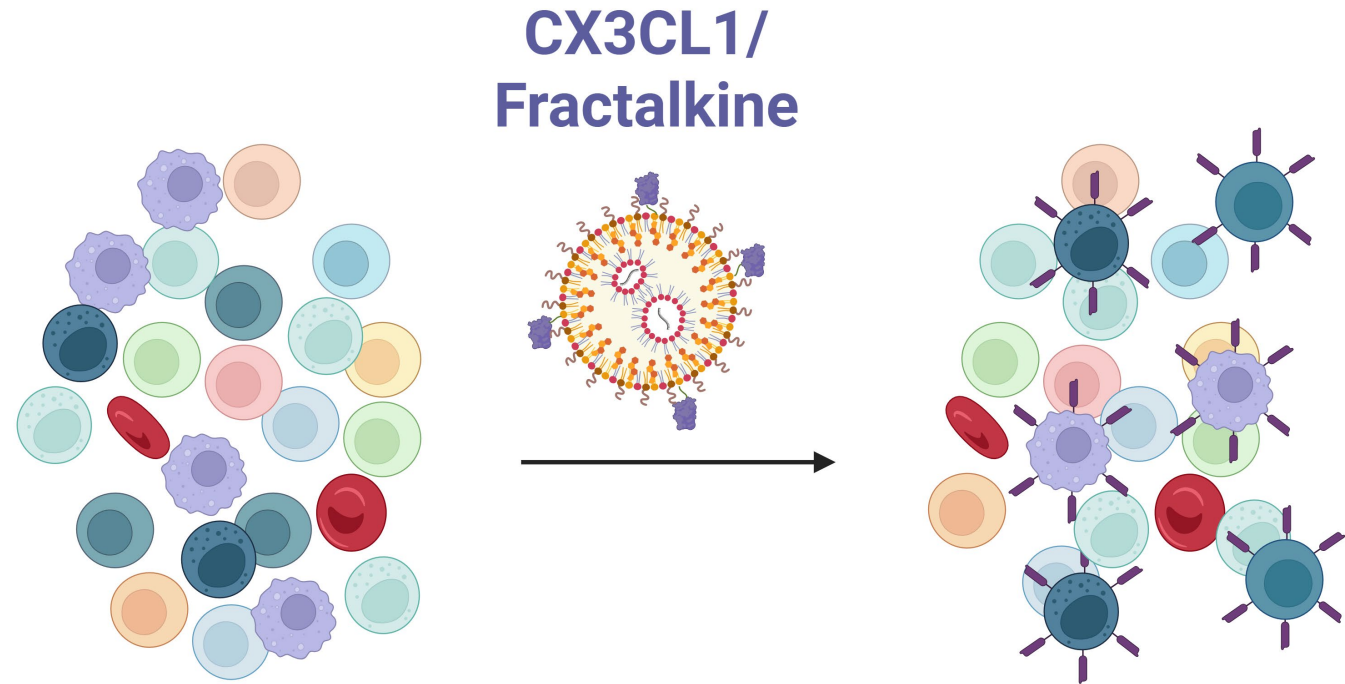
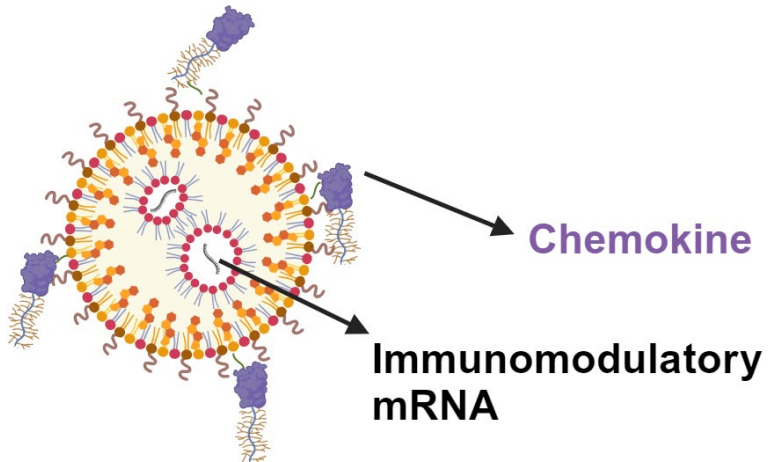


Ibalizumab-targeted LNPs deliver a latency reversing agent to the lentiviral reservoir for reactivation

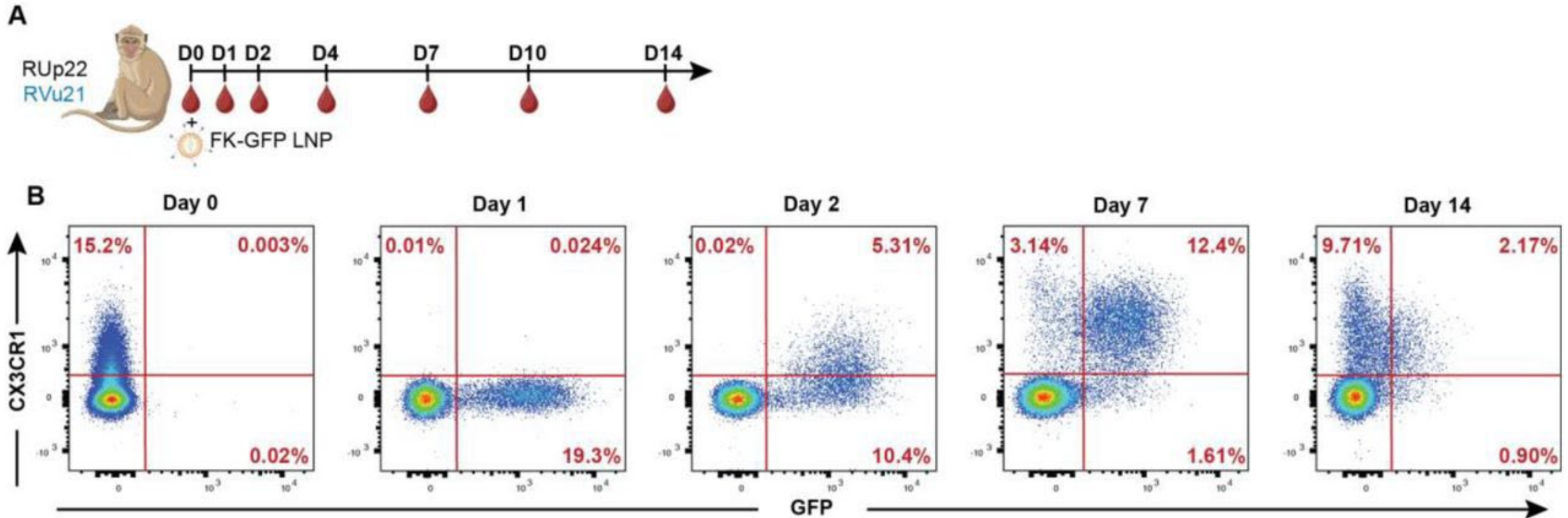




Fractalkine targeting could permit mRNA delivery to subset of PBMCs that express the cognate receptor, cytolytic effectors

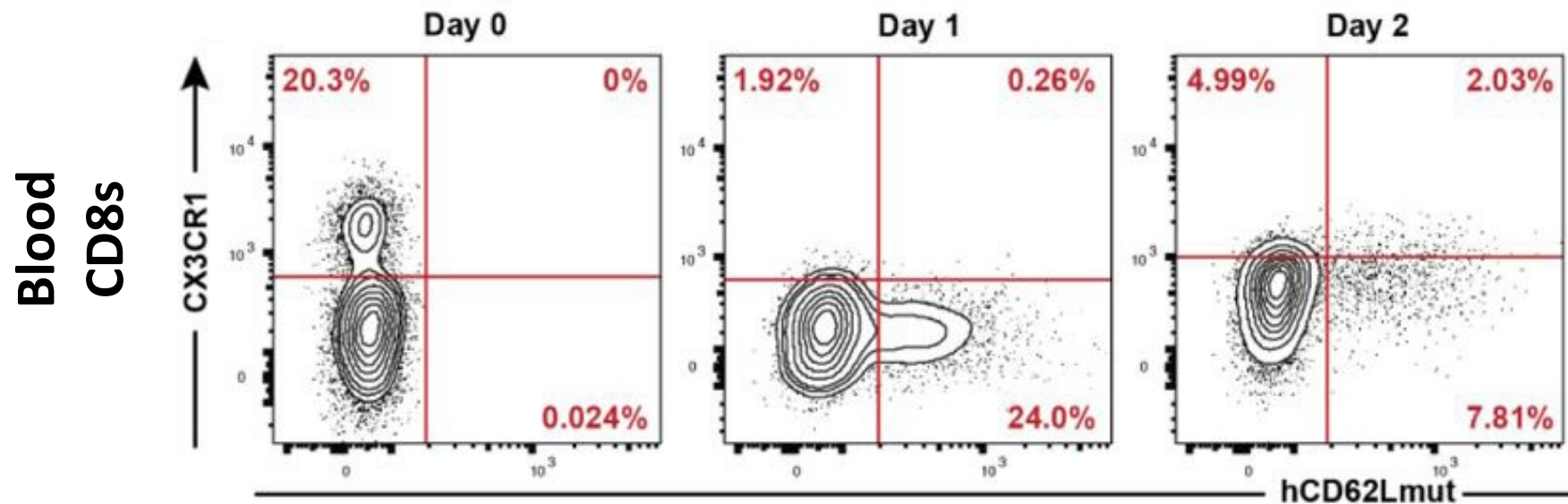


Fractalkine-targeted mRNA-LNPs efficiently deliver mRNA to cells that express the fractalkine receptor, CX3CR1

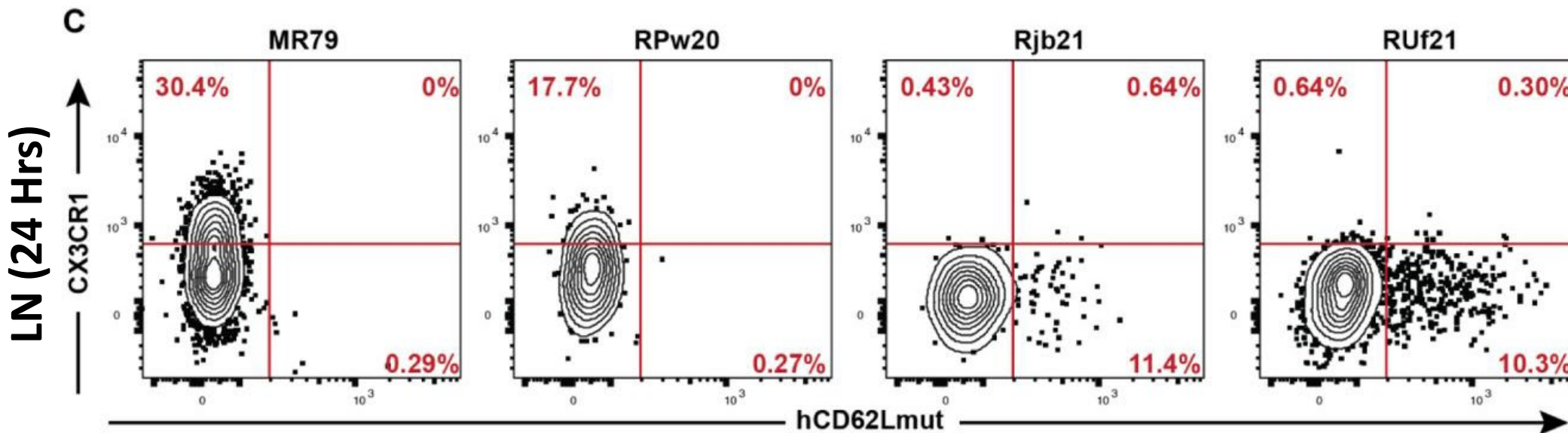




CX3CR1+ PBMCs were reprogrammed to express a LN trafficking receptor CD62L using fractalkine-targeted mRNA-LNPs



Human CD62L-expressing cells were isolated from the LN at 24hrs, consistent with trafficking into lymphoid tissue





Conclusions

- The mRNA-LNP platform is a powerful research tool with translational potential beyond vaccines
 - Timed, transient expression of any protein of interest
 - Tailored to HIV Cure
- Cell and organ delivery is determined by
 - Route of administration
 - Lipid composition
 - Targeting moieties
- Many applications
 - Vaccine development
 - Gene therapy



Acknowledgements

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Vincent Wu

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Paulo Lin
Ying Tam

Lifson Lab

Jeff Lifson

Haynes Lab

Barton Haynes

BioQual

Kumar Lab

Hongil Kim
Priti Kumar

Ferrari Lab

Cindy Bowman
Guido Ferrari

Williams Lab

Wilton Williams

Paiardini Lab

Maura Statzu
Justin Harper
Mirko Paiardini

Finzi lab

Jonathan Richard
Mehdi Benlarbi
Andres Finzi

Claiborne lab

Francesco Pennino
Federica Severi
Tyler Yang
Daniel Claiborne

Montaner lab

Matthew Fair
Richard Khumoekae
Emery Register
Paridhima Sharma
Ian Tietjen
Zhe (Roger) Yuan
Luis Montaner



BEAT-HIV
DELANEY COLLABORATORY



DP2 (DP2AI184637), CIAVCR (UM1AI169633), ERASE HIV (UM1AI164662), BEAT-HIV (UM1AI191272)
Combined Adult and Pediatric Infectious Disease T32, Penn Measey Scholars in Molecular Medicine
Figures throughout generated with Prism, Biorender, and Adobe Illustrator



Using mRNA and lipid nanoparticles to deliver a cure for HIV

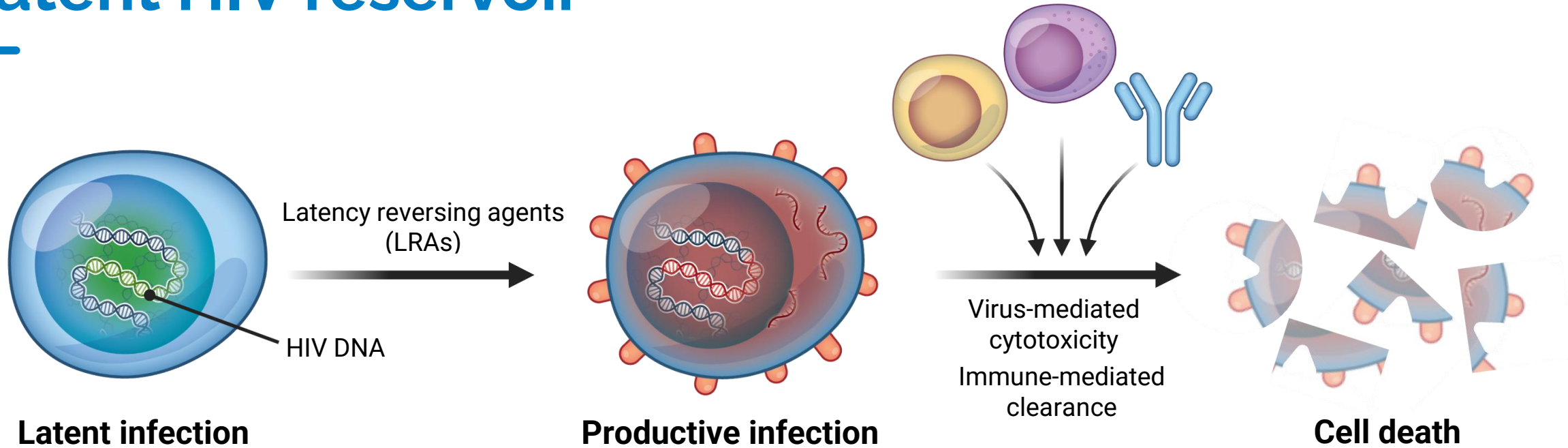
—
Paula Cevaal

Research Fellow, University of Melbourne



A joint venture between The University of Melbourne and The Royal Melbourne Hospital

'Shock and kill' as a strategy to deplete the latent HIV reservoir



LRAs alone have thus far **failed to reduce the size of the latent reservoir** in clinical trials

- Multiple studies showed modest increase in unspliced RNA, only in some cases multiply spliced RNA
- No change in frequency infected cells or time to viral rebound

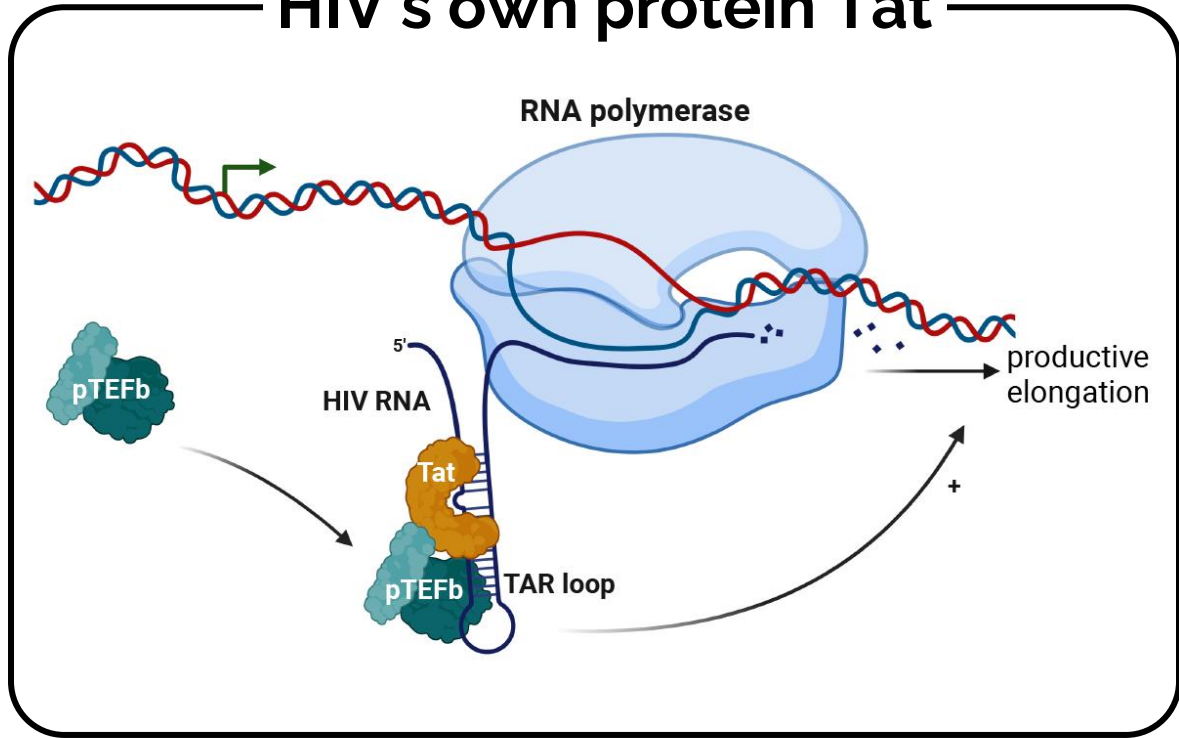


Can we harness the power of mRNA
as a novel **therapeutic entity**, to design
or enable a **new generation of LRAs?**

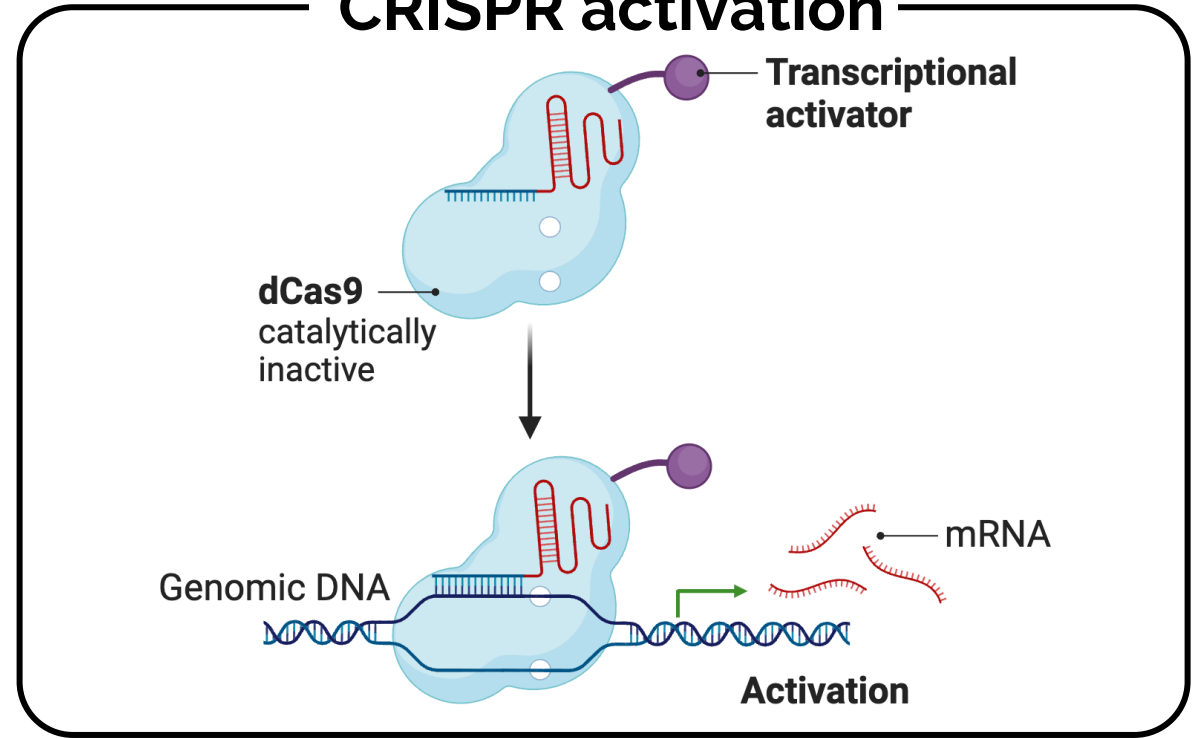


Two promising new latency-reversing agents

HIV's own protein Tat



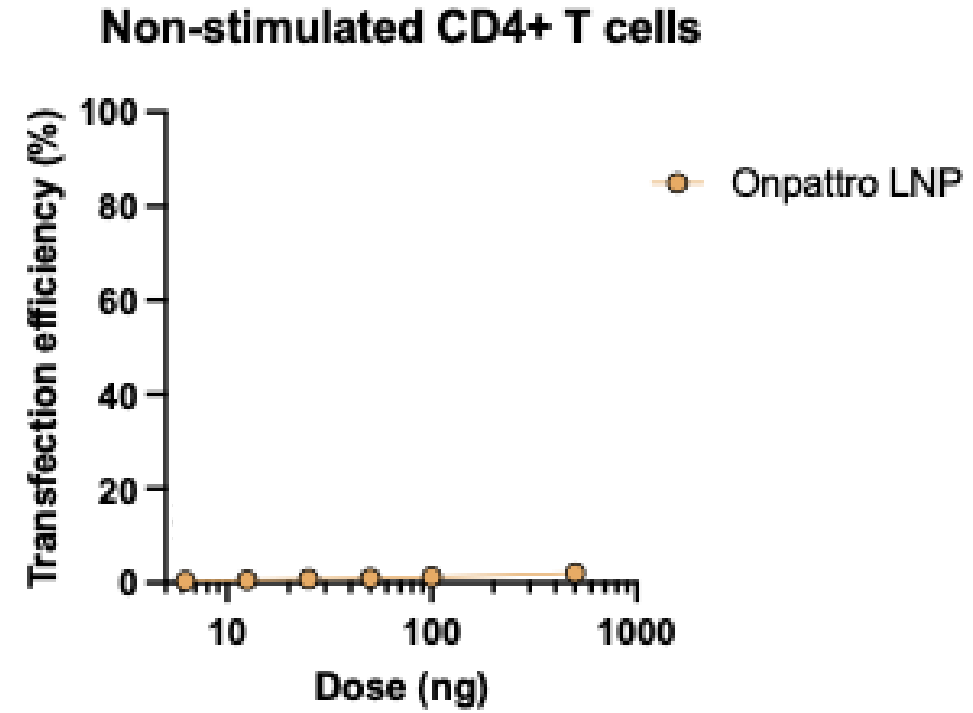
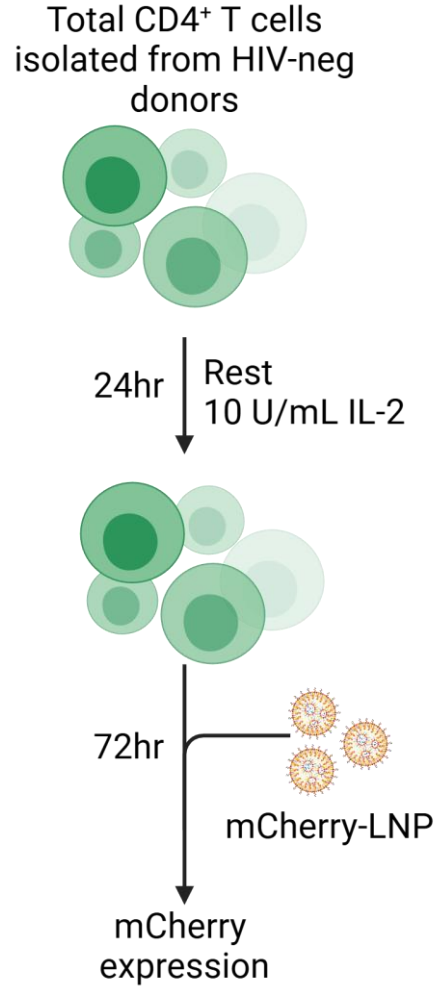
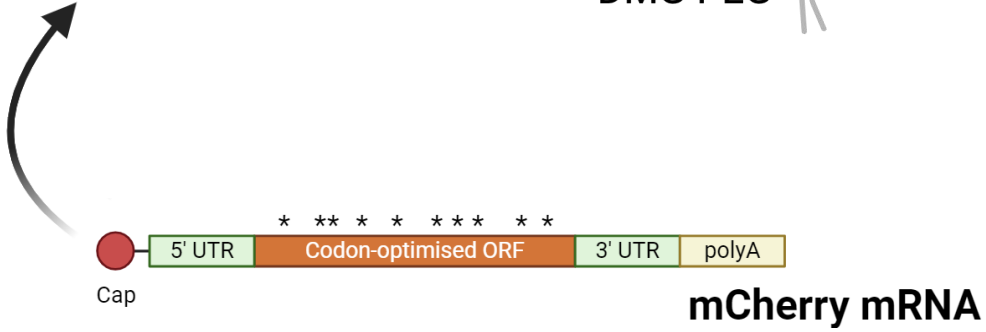
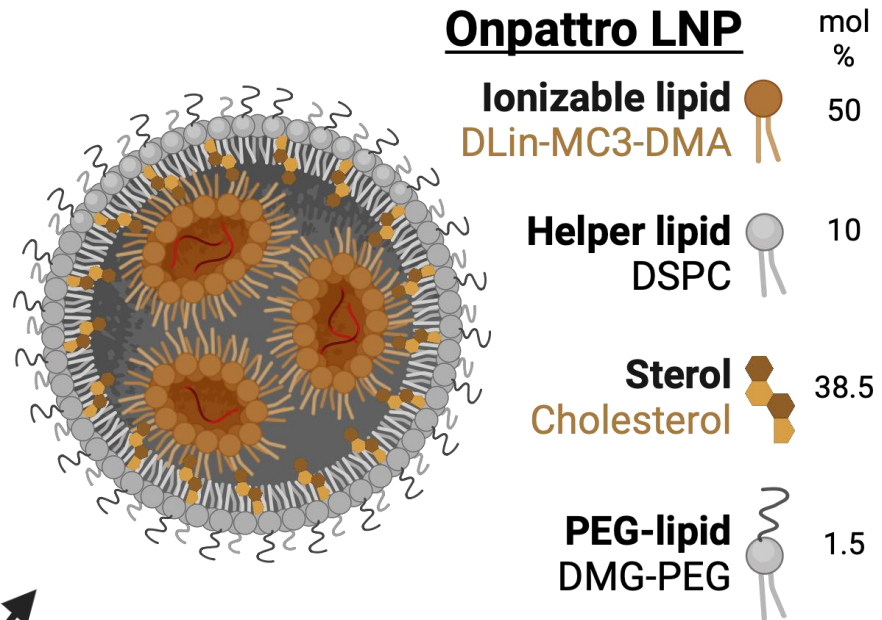
CRISPR activation



Both approaches are **highly HIV-specific**
 Main **challenge** is their **delivery** to resting T cells



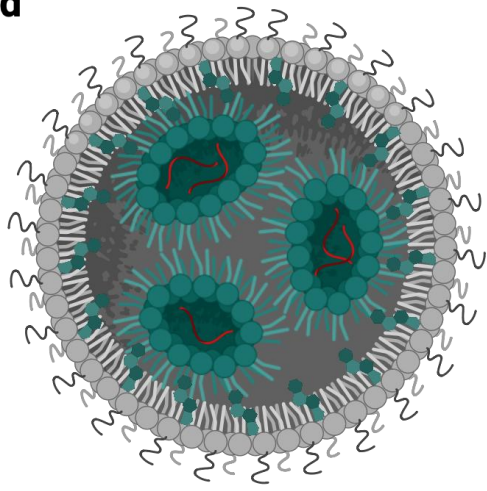
Novel LNP X can transfect non-stimulated CD4+ T-cells with high efficiency



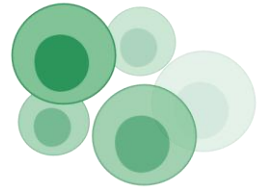


Novel LNP X can transfect non-stimulated CD4+ T-cells with high efficiency

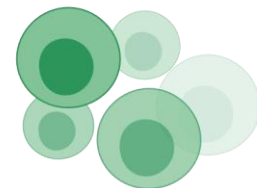
- LNP X**
- mol % 50 **Ionizable lipid** SM-102
 - mol % 10 **Helper lipid** DSPC
 - mol % 38.5 **Sterol** β -sitosterol
 - mol % 1.5 **PEG-lipid** DMG-PEG



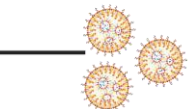
Total CD4+ T cells isolated from HIV-neg donors



24hr Rest 10 U/mL IL-2



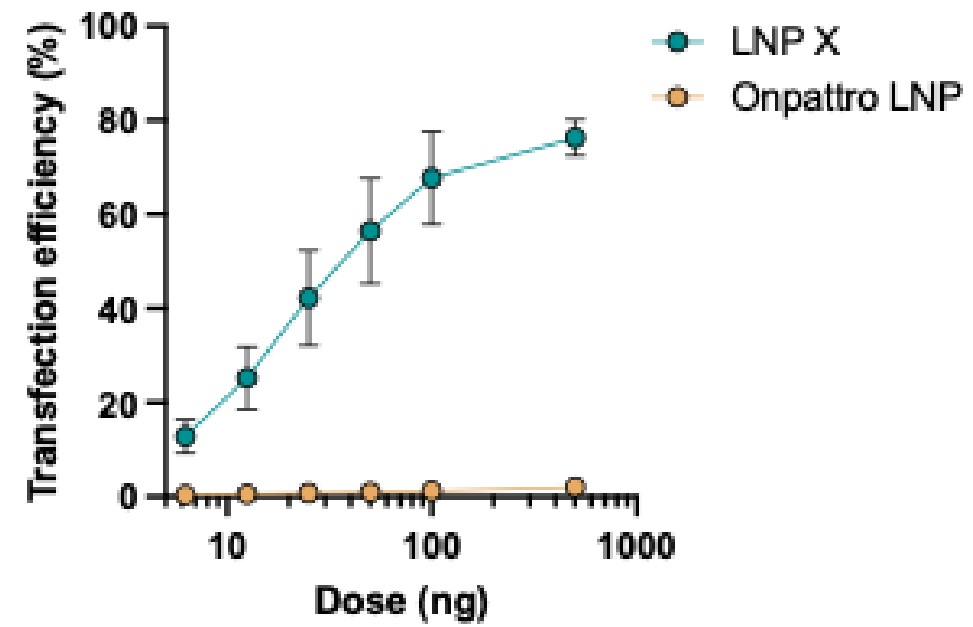
72hr



mCherry-LNP

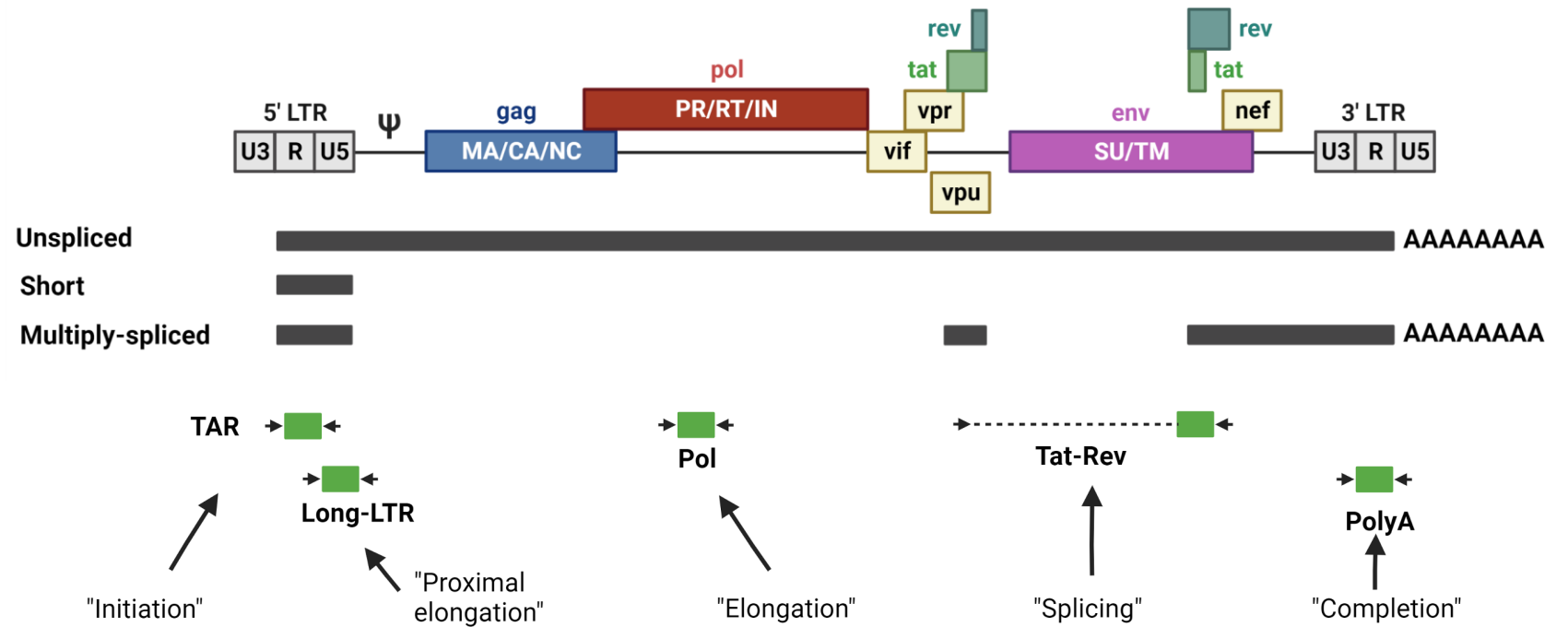
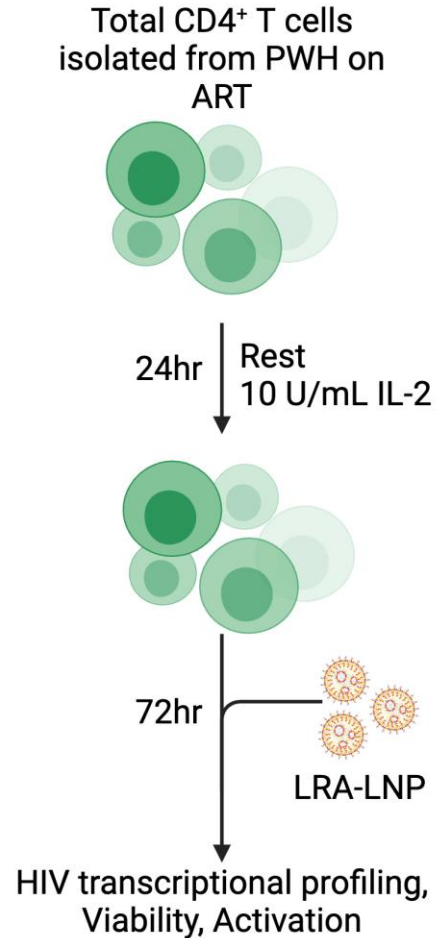
mCherry expression

Non-stimulated CD4+ T cells



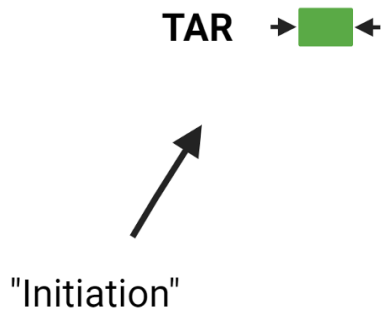
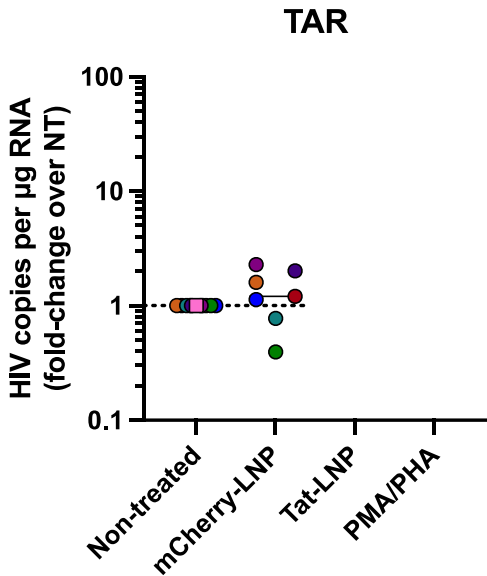
mCherry mRNA

Assessed impact on transcription using digital PCR for multiple viral transcripts





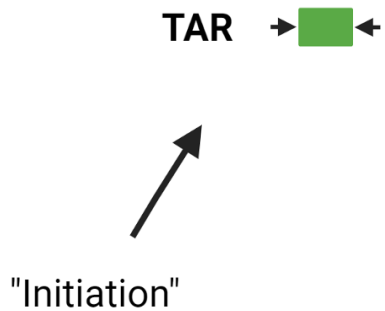
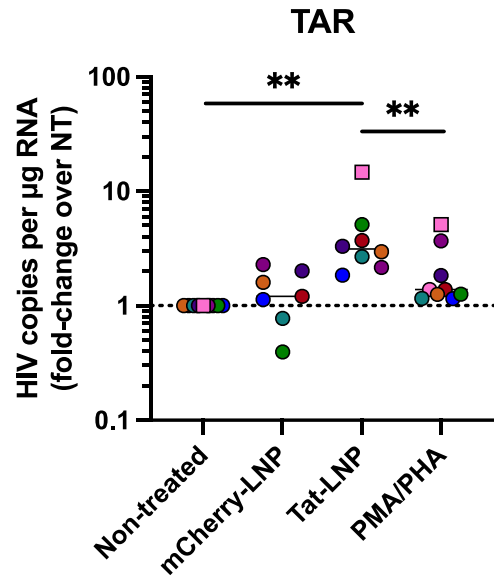
Tat-LNPs overcome transcriptional blocks to potentially reverse HIV latency *ex vivo*



n=8; lines represent median, one-tailed Wilcoxon signed-rank test

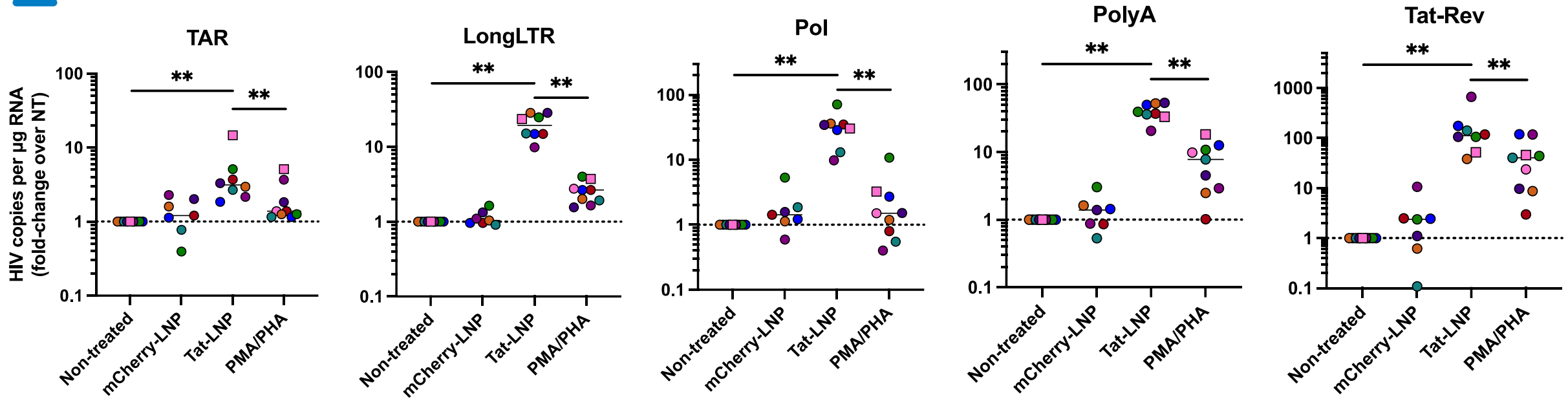


Tat-LNPs overcome transcriptional blocks to potently reverse HIV latency *ex vivo*





Tat-LNPs overcome transcriptional blocks to potently reverse HIV latency *ex vivo*



"Initiation"

TAR

Long-LTR

"Proximal elongation"

Pol

"Elongation"

Tat-Rev

"Splicing"

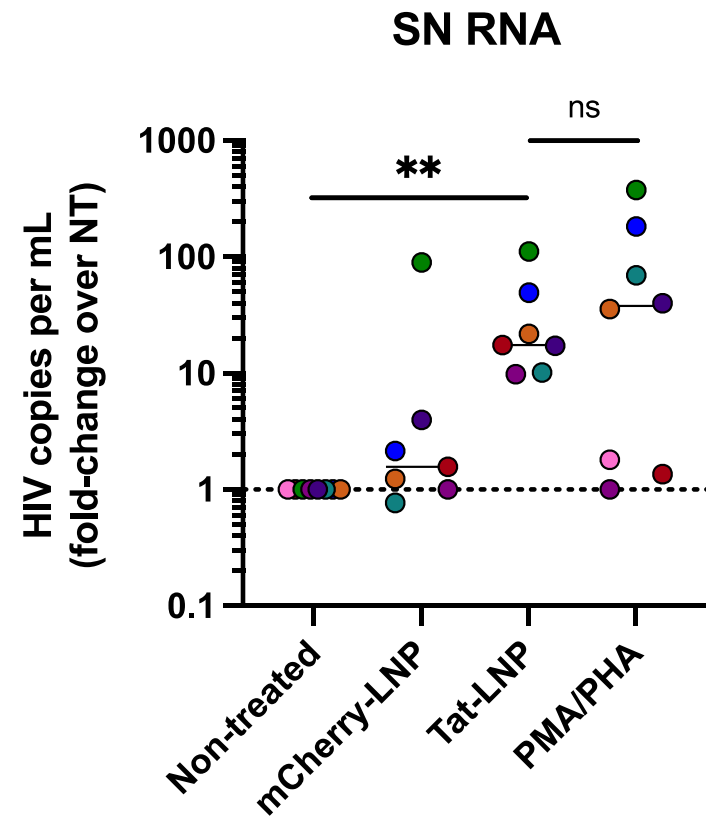
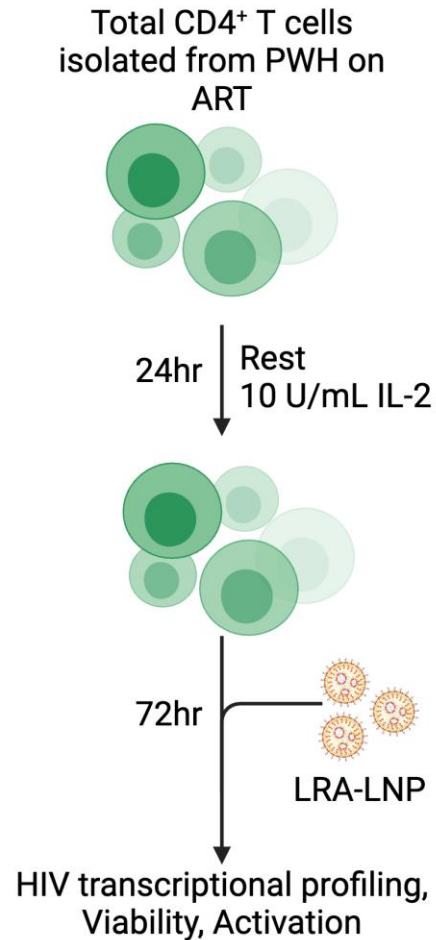
PolyA

"Completion"

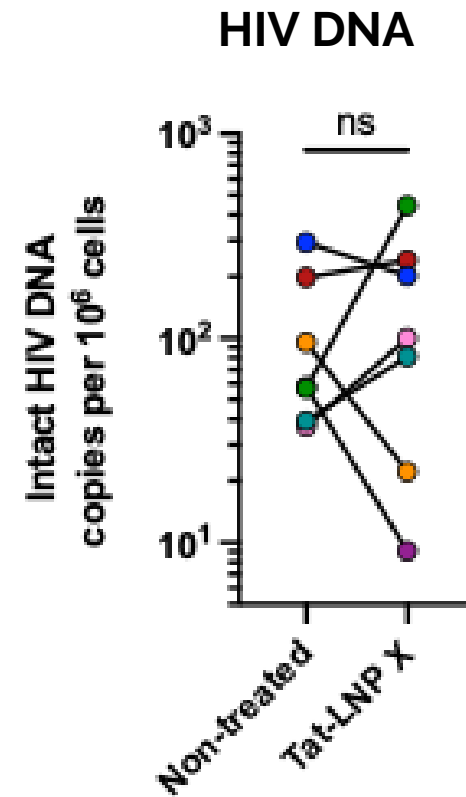
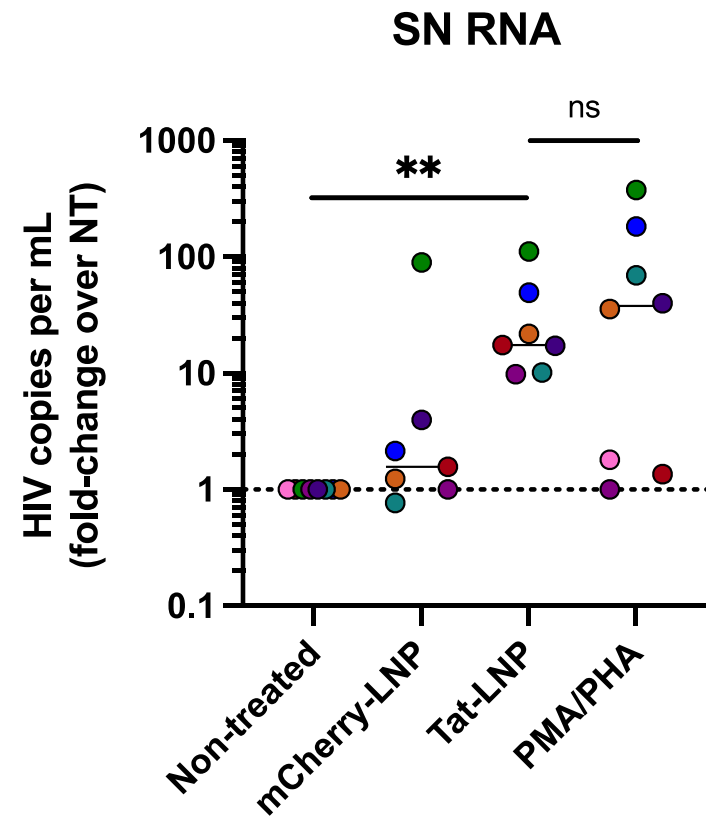
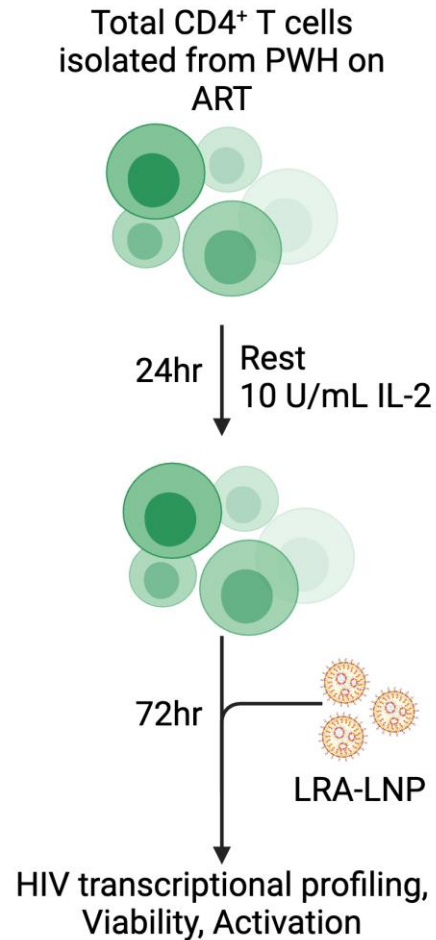
n=8; lines represent median, one-tailed Wilcoxon signed-rank test



Tat-LNPs overcome transcriptional blocks to potently reverse HIV latency *ex vivo*



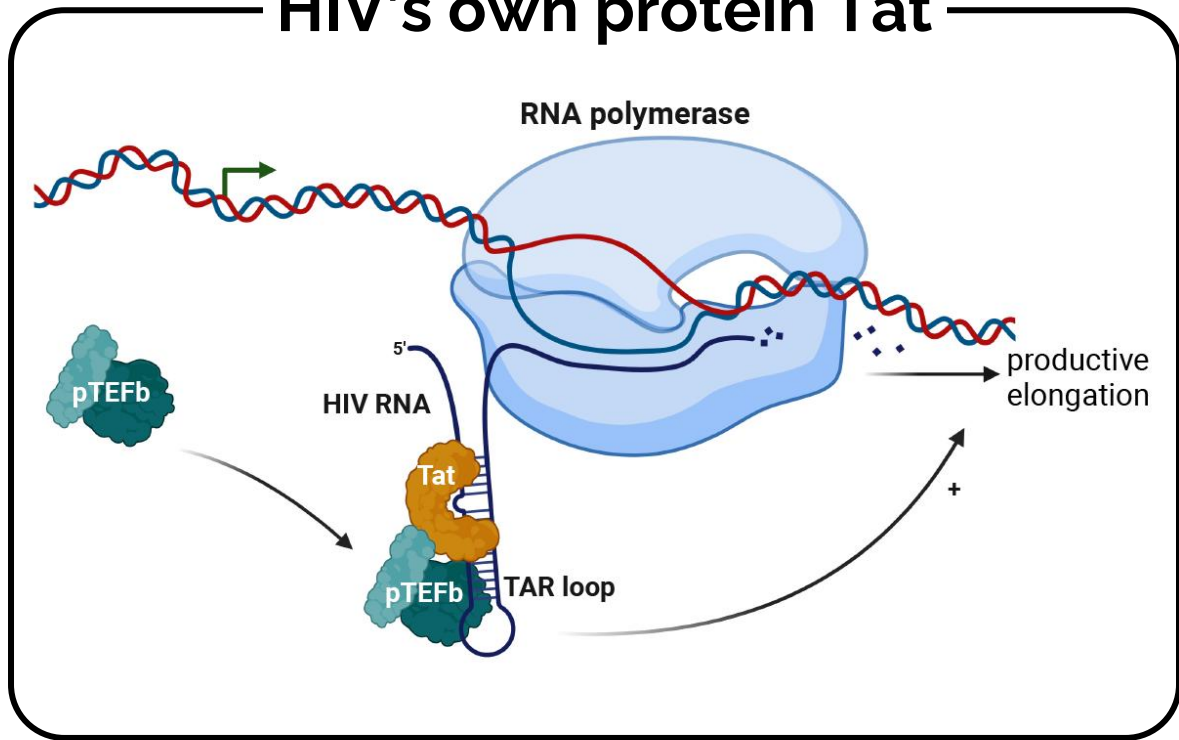
No decrease in HIV reservoir size despite potent latency reversal



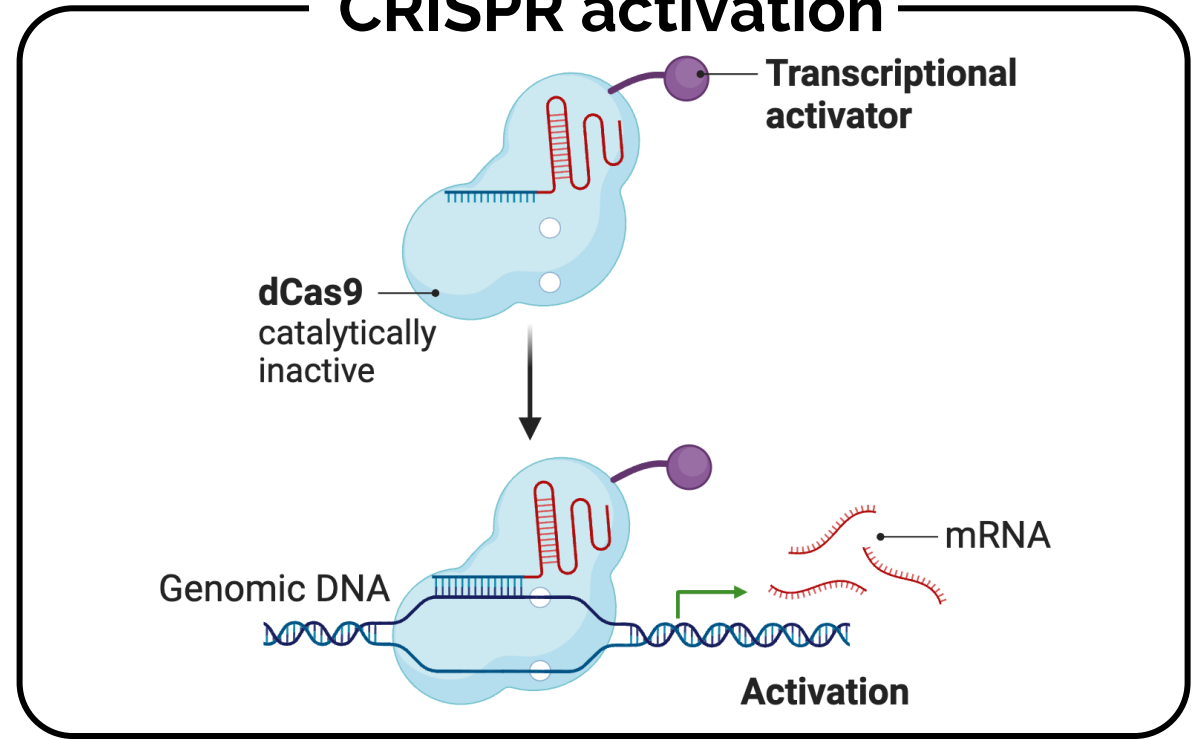


Two promising new latency-reversing agents

HIV's own protein Tat



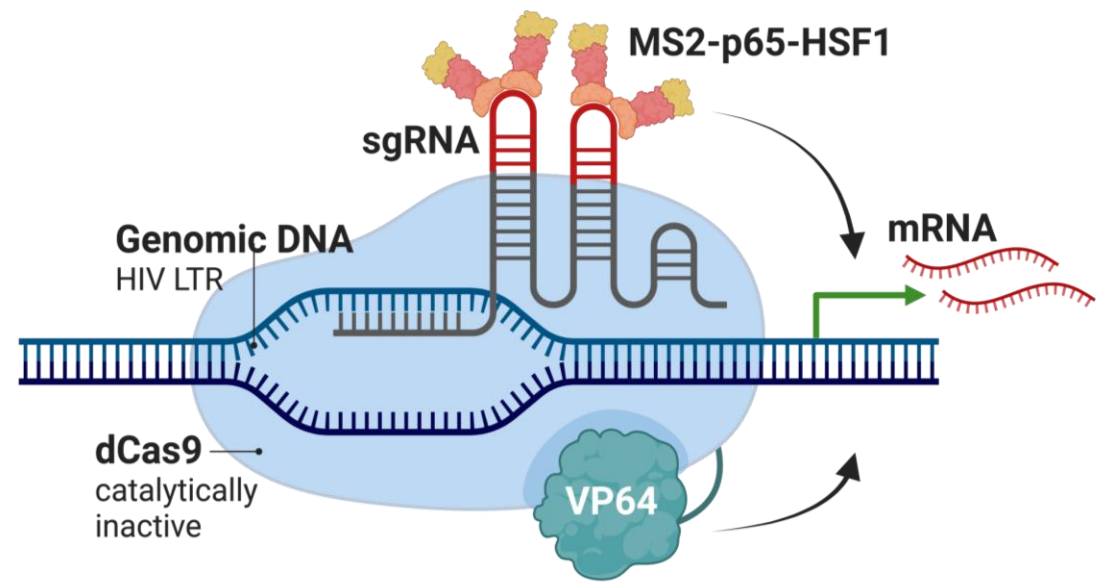
CRISPR activation



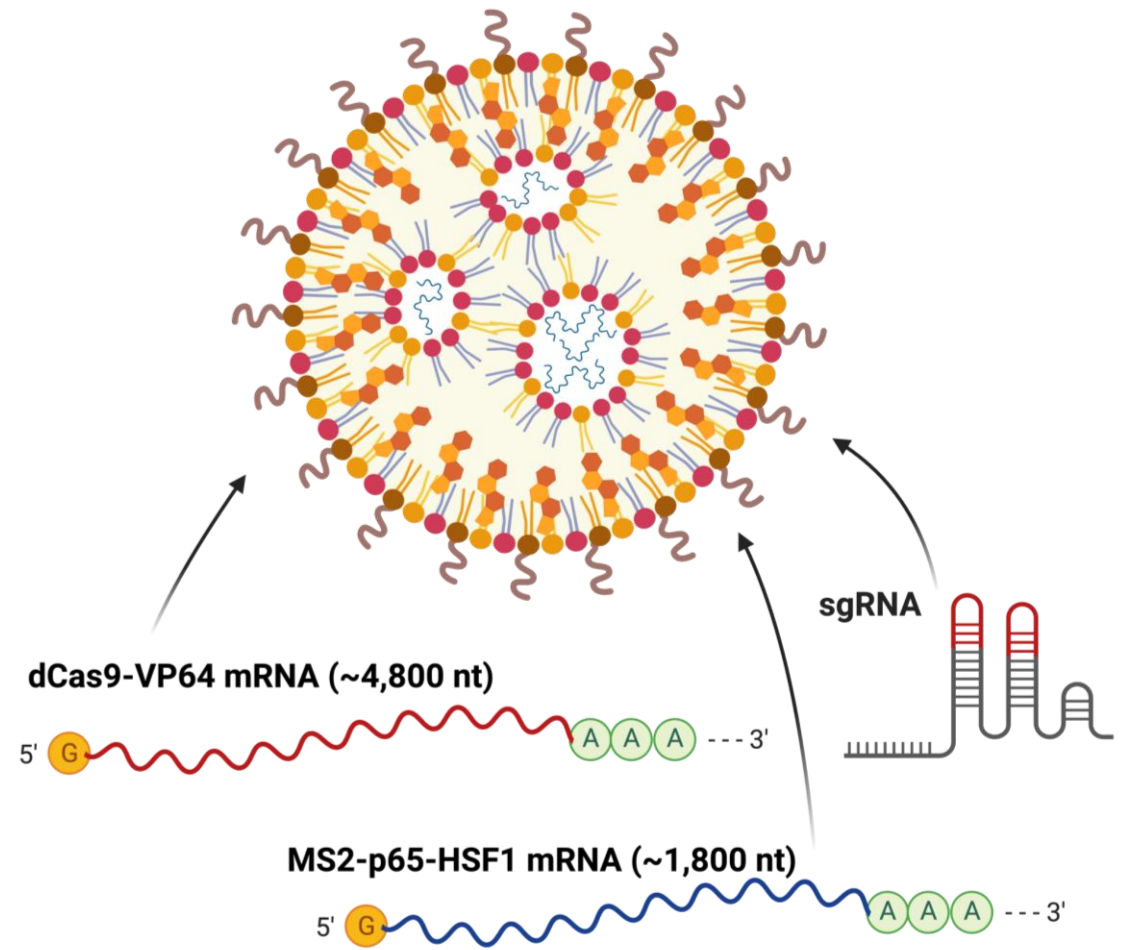
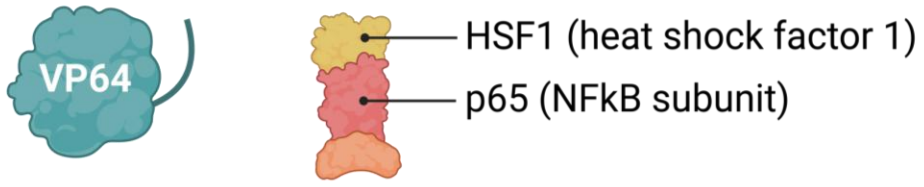
Could CRISPRa **overcome potential limitations** of Tat, either alone or **in combination**?



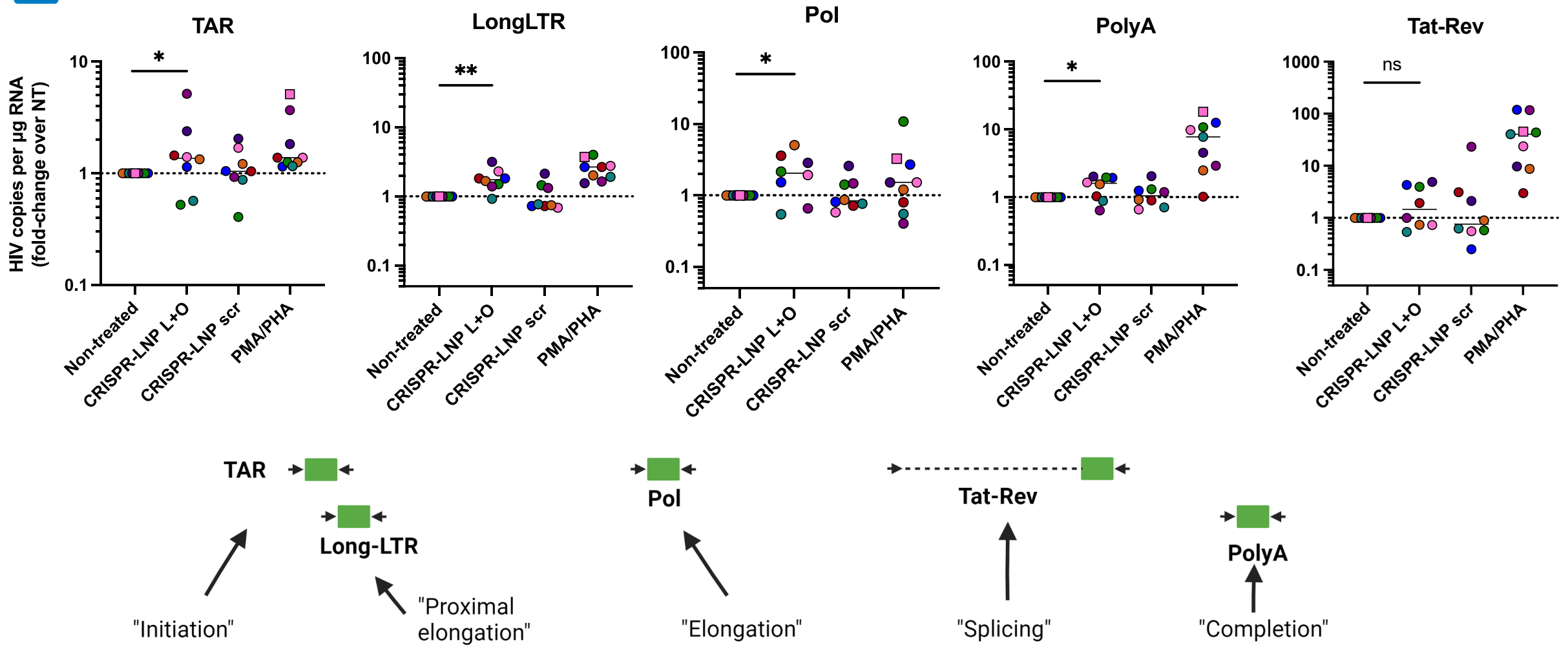
Encapsulating three-component CRISPR activation system into one LNP



Transcriptional activation domains

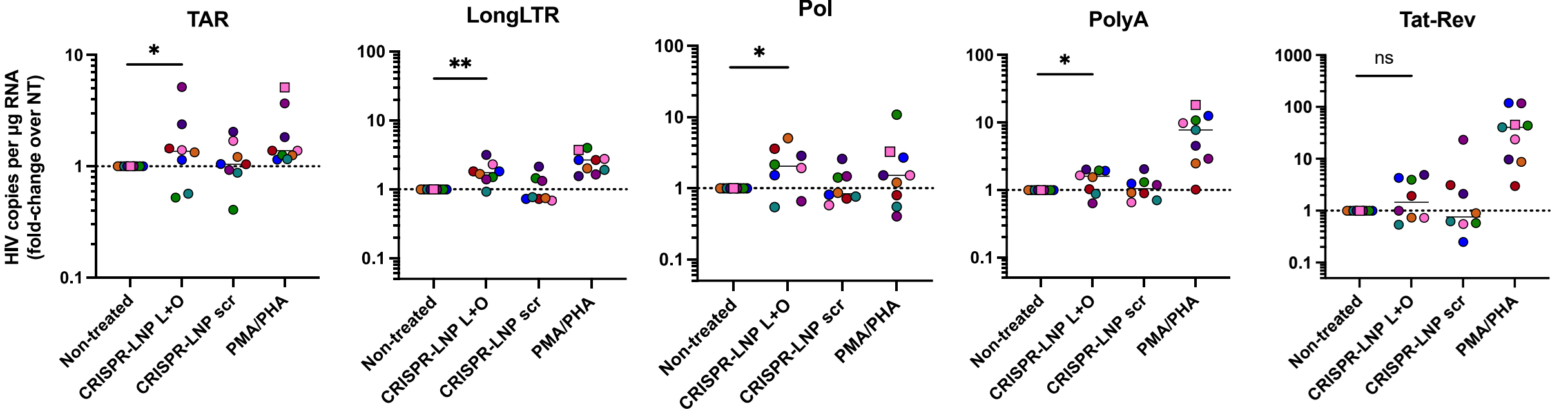


CRISPRa-LNPs overcome some barriers to HIV transcription *ex vivo*, but effect size is modest



n=8; lines represent median, one-tailed Wilcoxon signed-rank test

CRISPRa-LNPs overcome some barriers to HIV transcription *ex vivo*, but effect size is modest

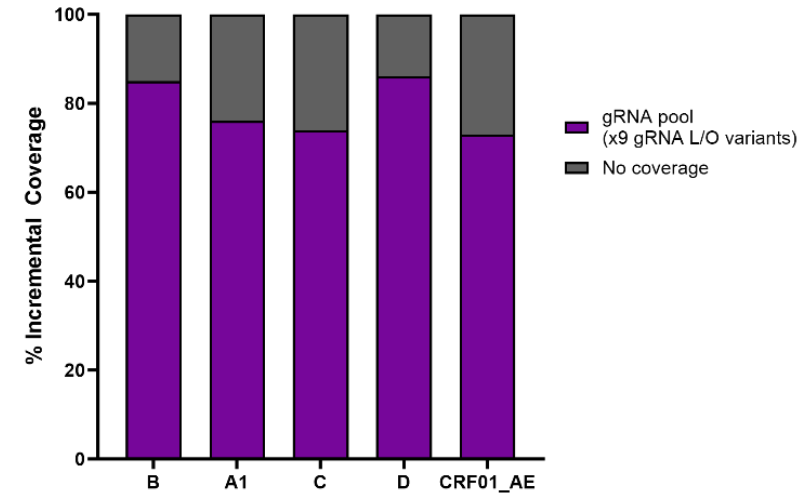
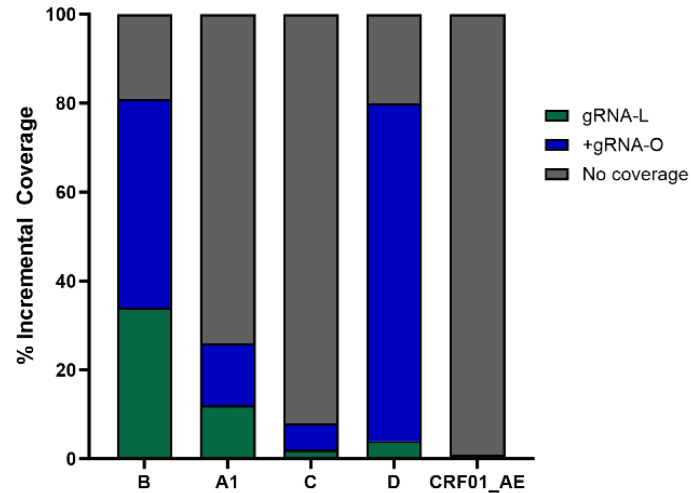
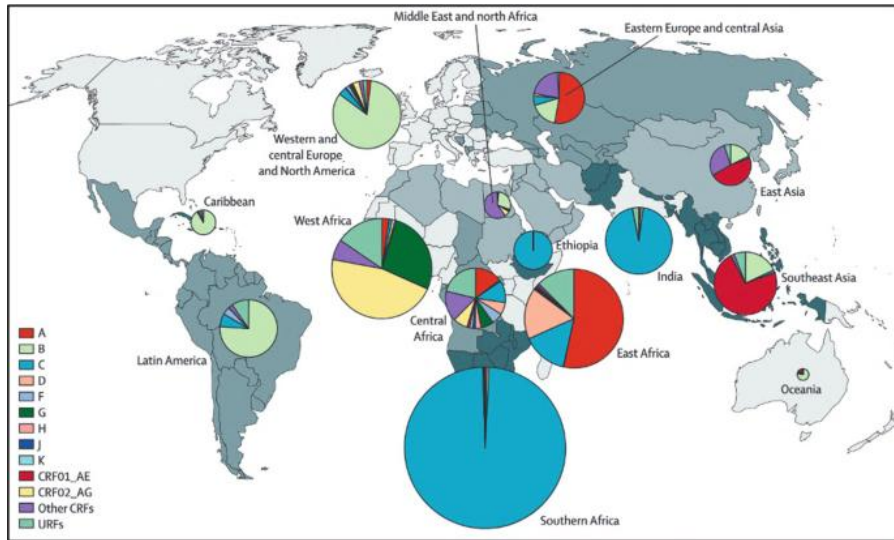


Bottleneck in potency is the **efficiency of delivery** – much reduced for large mRNAs such as CRISPR-Cas9



CRISPR-based cure strategies: expanding beyond HIV subtype B

HIV subtype B represents <12% of global infections



Approach 1: subtype-specific gRNAs

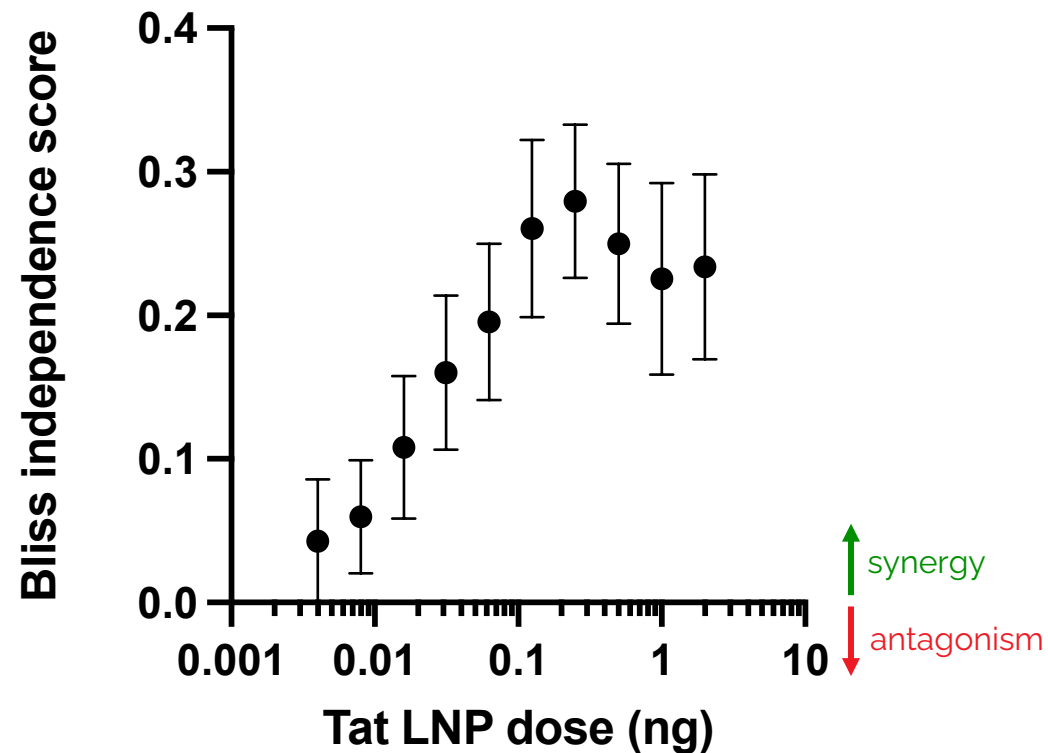
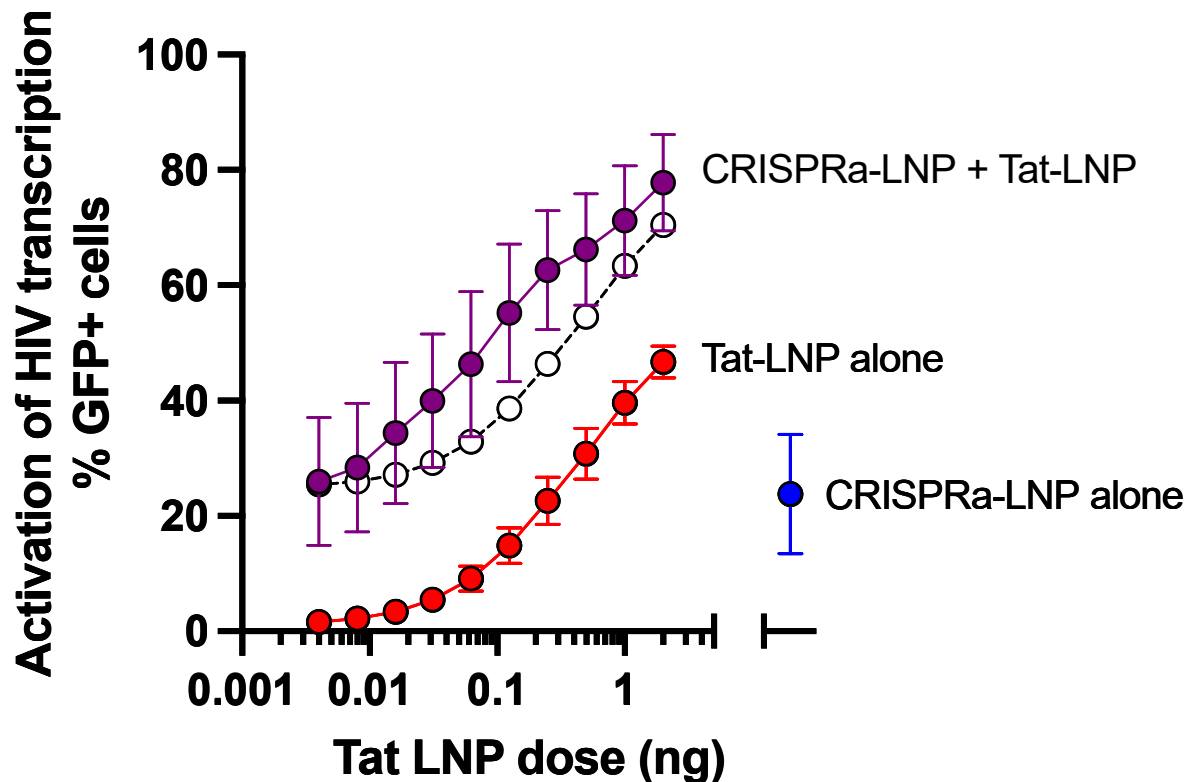
Approach 2: cross-clade gRNA pool

amfAR
MAKING AIDS HISTORY



Compromise on potency?

Synergistic reactivation with CRISPRa-LNPs and Tat-LNPs in cell line model

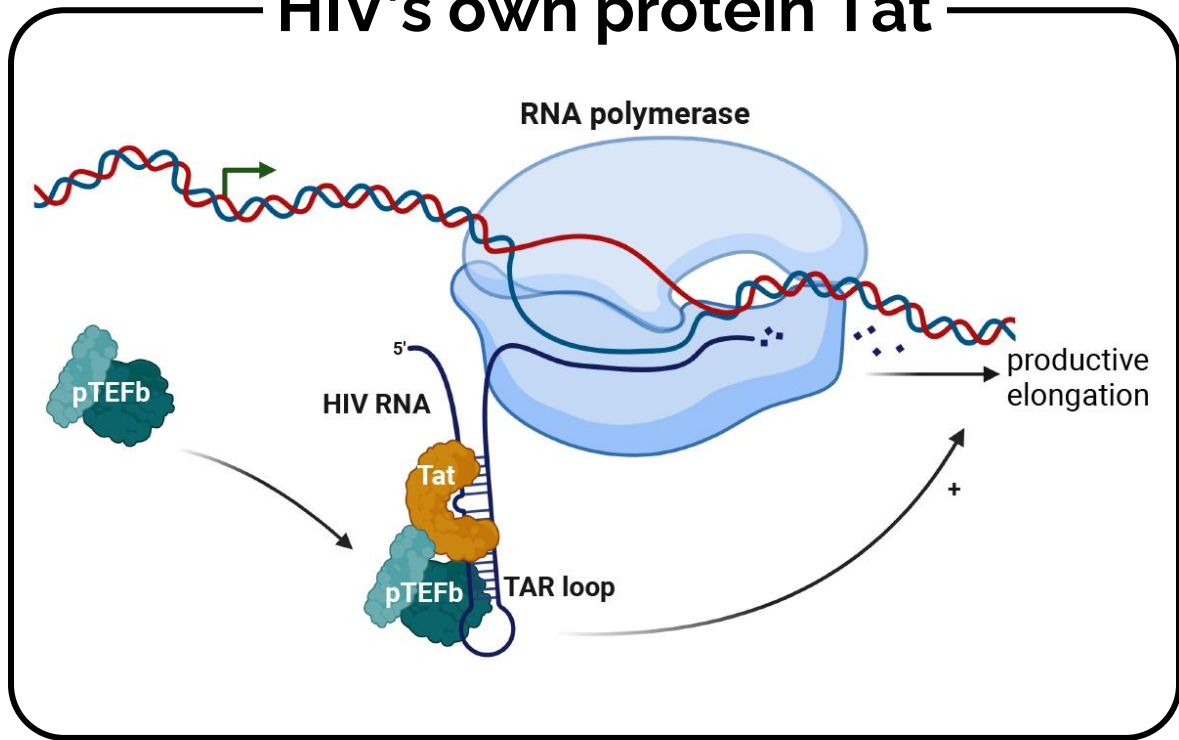


Synergy potentially allows for using **one hundredth the dose** of Tat mRNA previously used

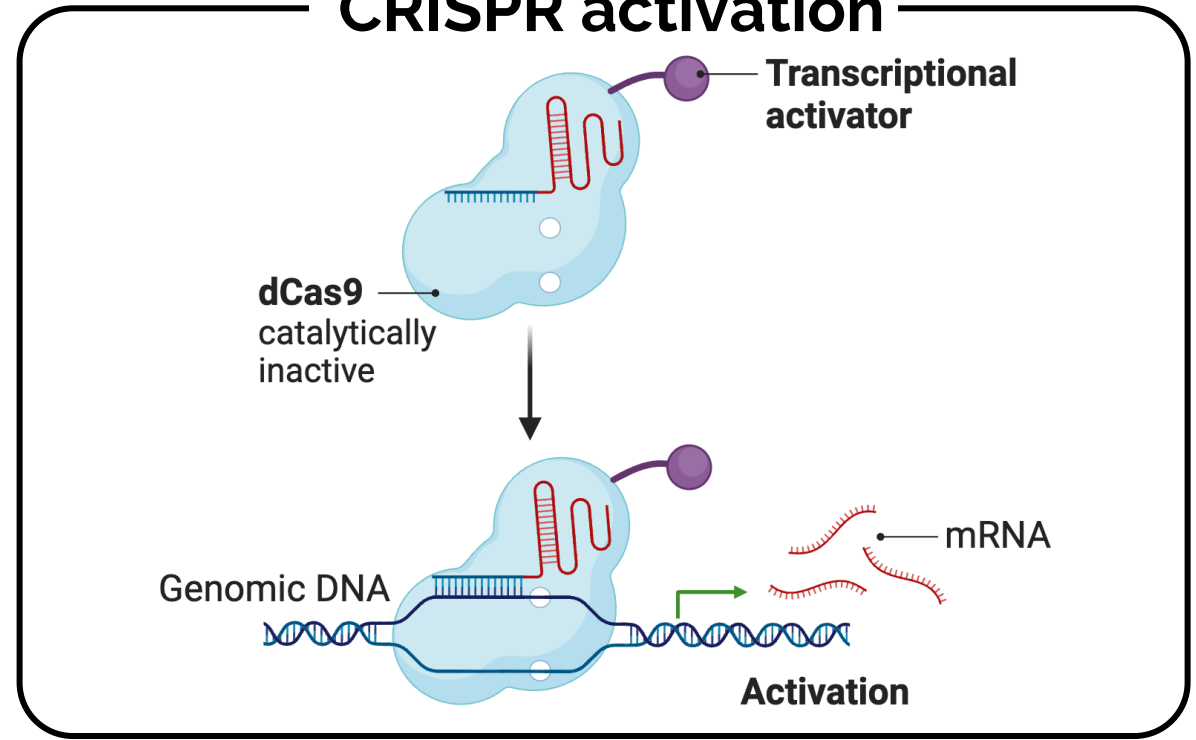
Two promising new latency-reversing agents

Explored separately or in combination

HIV's own protein Tat



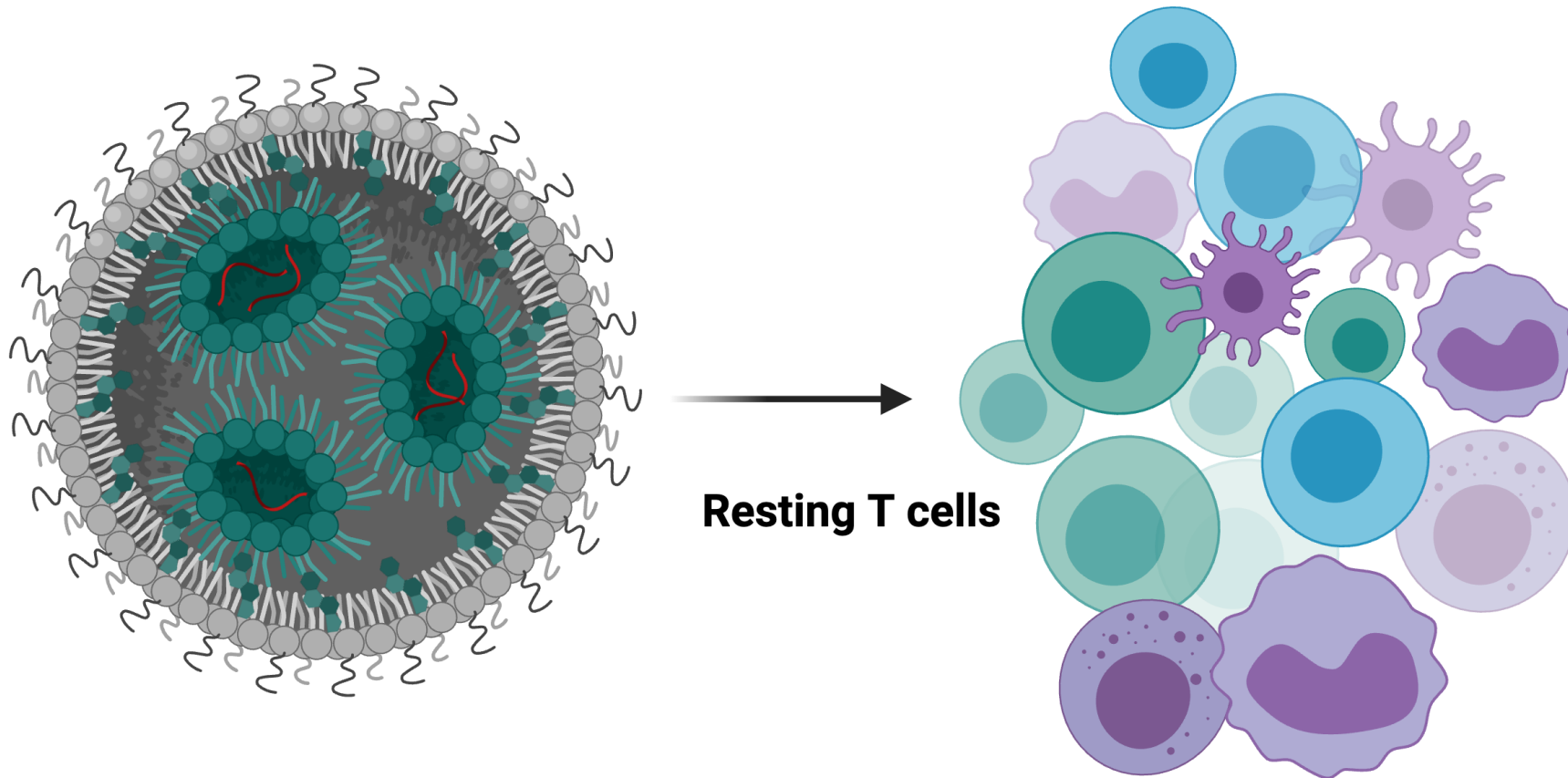
CRISPR activation



What about **in vivo** delivery and efficacy?

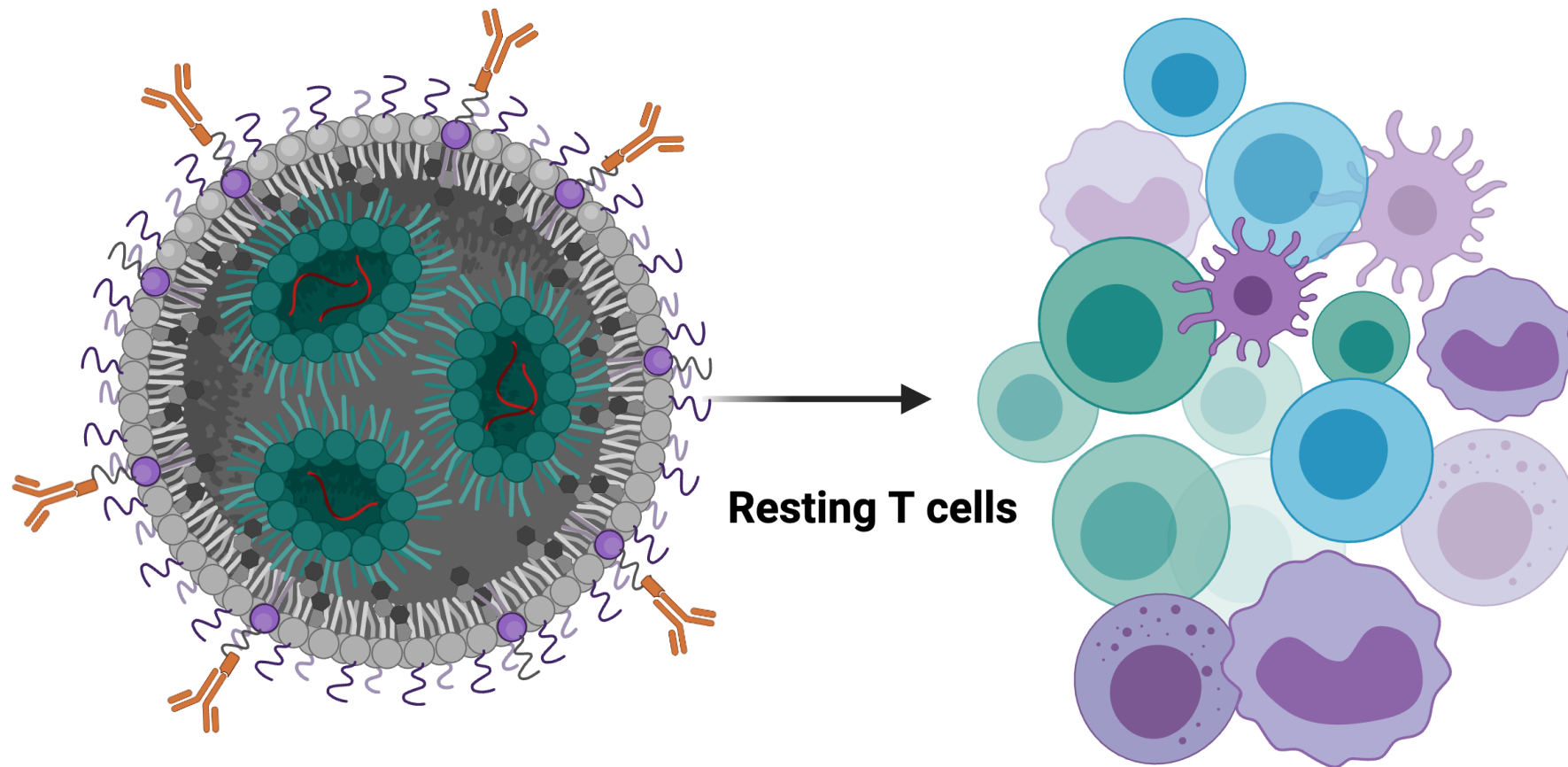


LNP X potently transfects isolated CD4⁺ T cells, but what about *in vivo* delivery?



T cells are surrounded by phagocytes that **scavenge nanoparticles**,
limiting the nanoparticle dose that reaches T cells *in vivo*

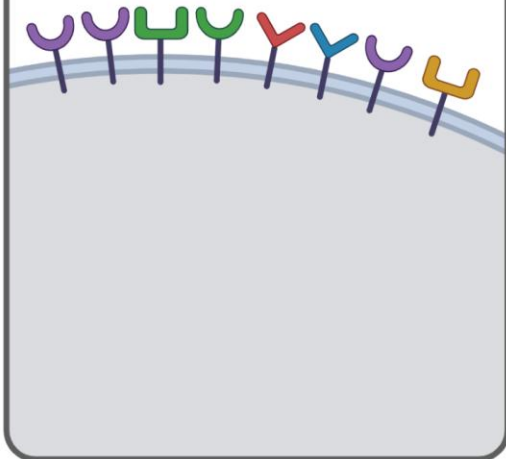
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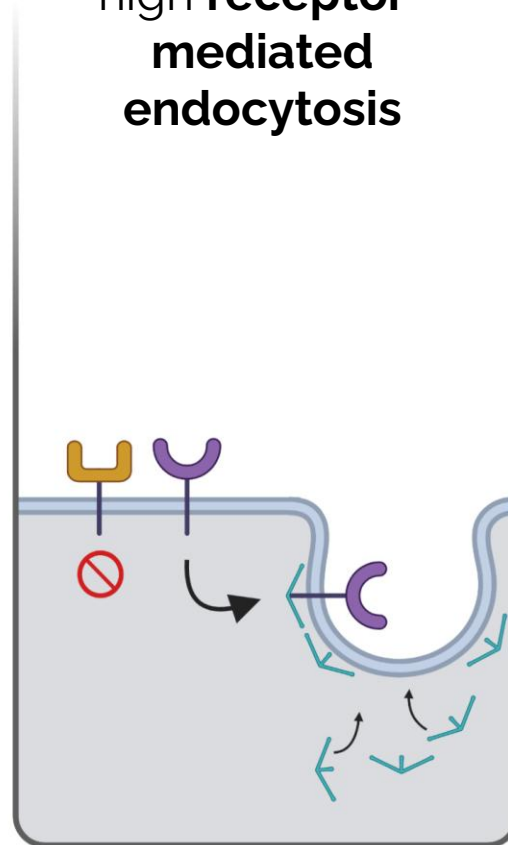
T cells are surrounded by phagocytes that **scavenge nanoparticles**,
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New paradigm in cell-specific targeting: focus on receptor internalization

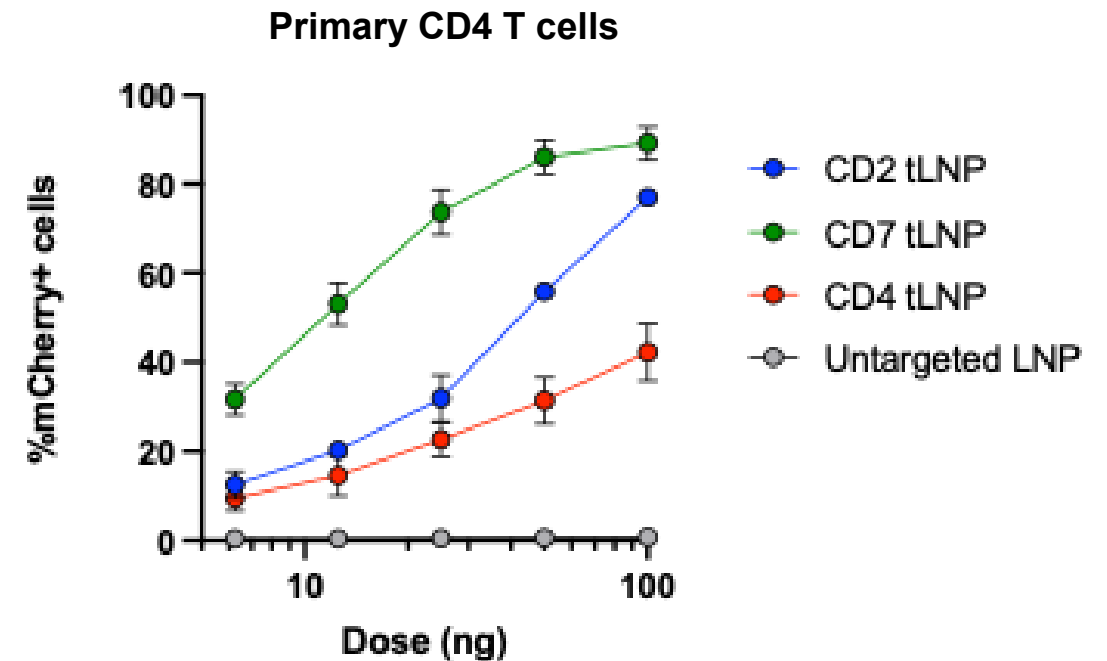
Receptors with **high or selective expression** on T cells



Receptors exhibiting high **receptor-mediated endocytosis**



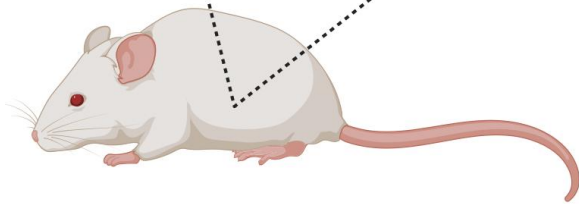
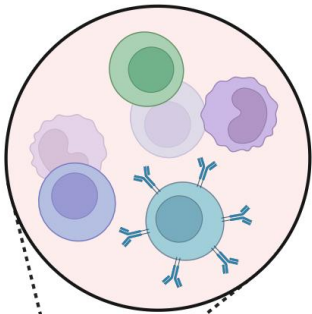
- **Library screening** of potential target receptors
- Target **validation** using different nanoparticle platforms



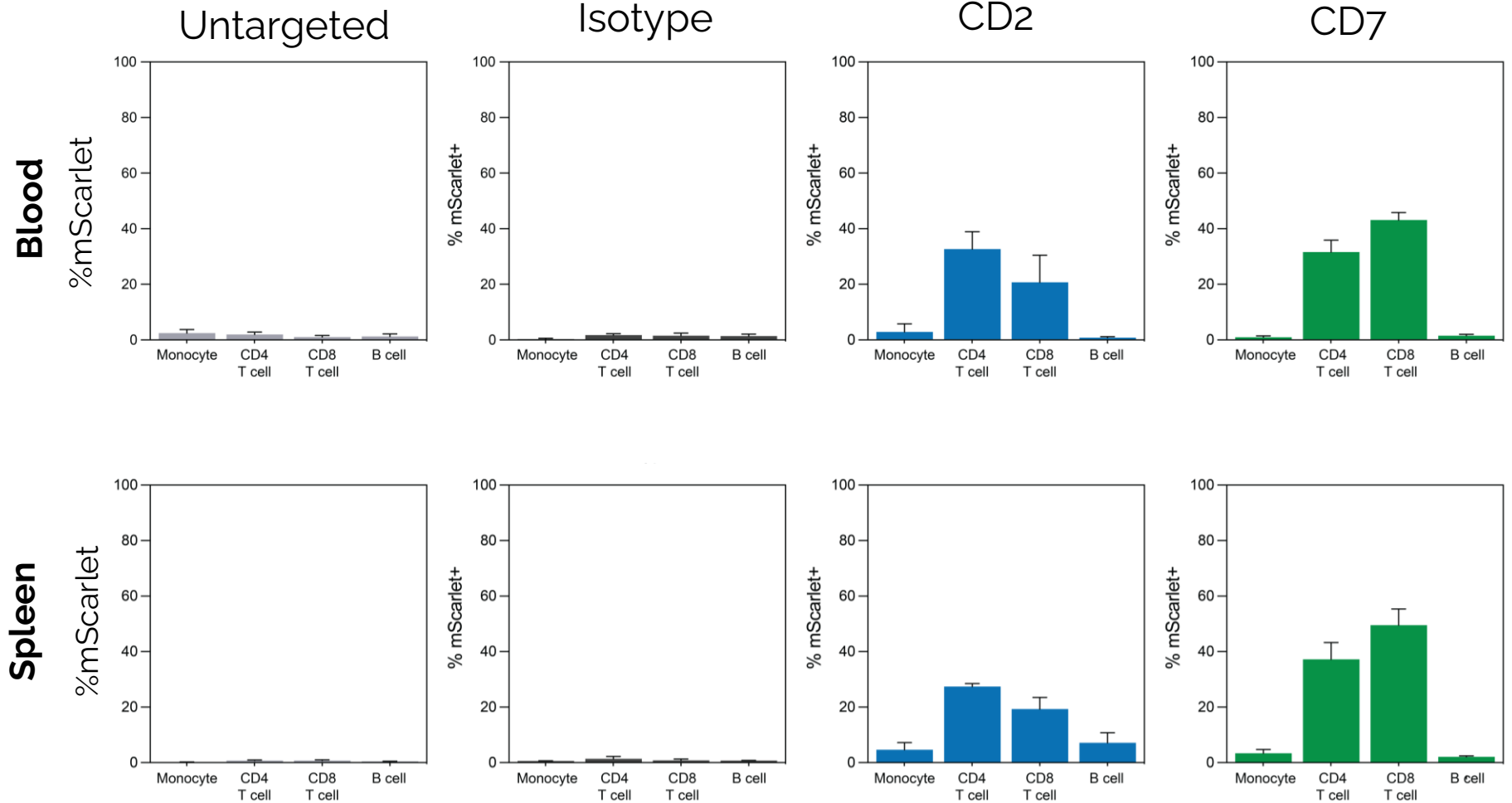


Enhanced mRNA expression in hu T cells from HIS mice *in vivo* in blood and spleen

Human immune system mice



i.v. administration
16 hr treatment
0.5 mg/kg



n=3-4 mice per group



Project summary



- Need for more potent, **HIV-specific LRAs** → mRNA lipid nanoparticle technology
- Novel LNP formulation X is able to **transfect CD4+ T cells in the absence of pre-stimulation**
- **Tat-LNP X** induces multiply-spliced RNA **by >100-fold**, outperforming PMA/PHA *ex vivo*, but does not induce reservoir clearance in isolated CD4+ T cells
- **CRISPRa** may pose an **alternative or complementary strategy** to Tat, but further optimisation of large mRNA delivery is required
- Targeting **rapidly cycling receptors** enables efficient mRNA delivery to T cells ***in vivo***



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People
living with HIV

**Harold and Cora Brennen
Benevolent Trust**



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