

 GENE THERAPY

Reprogramming α -cells reverses diabetes

Autoimmune destruction of insulin (INS)-producing pancreatic β -cells, resulting in persistent hyperglycaemia, underlies the pathogenesis of type 1 diabetes. Preserving and restoring functional β -cell mass is therefore a fundamental objective of diabetes therapy. Writing in *Cell Stem Cell*, Gittes and colleagues report the successful conversion of endogenous mouse α -cells into functional β -like cells, which reversed autoimmune diabetes in mice.

Accumulating evidence indicates that the β -cell possesses limited potential for regeneration in adult humans, therefore the possibility of reprogramming other cell types — to become glucose-responsive, INS-secreting β -like cells — is being actively pursued. Pancreatic α -cells may represent a promising source of β -cells owing to several reasons, including their developmental similarity to β -cells, their location in the pancreatic islet, the fact that they commonly undergo hyperplasia in diabetic animals and patients, and the finding that a significant decrease in α -cells in mice does not affect normal glucose metabolism.



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Gittes and colleagues therefore set out to convert α -cells into β -like cells through the forced expression of the key β -cell transcription factors, pancreatic and duodenal homeobox 1 (PDX1; necessary for pancreatic development — including β -cell maturation, proliferation and function) and MAFA (which binds to the INS promoter to regulate INS expression and β -cell metabolism).

First, the authors treated a transgenic mouse model that allows lineage tracing of α -cells with the β -cell toxin alloxan (ALX), to destroy the majority of β -cells and induce hyperglycaemia. One week later they infused an adeno-associated virus (AAV) carrying PDX1 and MAFA expression cassettes (AAV-PM) through the pancreatic duct.

ALX-induced hyperglycaemia was corrected within 2 weeks in mice receiving the AAV-PM. In addition, β -cell mass was significantly increased in the mice, while α -cell mass was decreased. The regenerated INS⁺ cells were found to derive almost exclusively from α -cells and had a similar gene expression profile to normal β -cells.

Importantly, AAV-PM induced prolonged glucose control: in hyperglycaemic non-obese diabetic (NOD) mice, a single infusion of AAV-PM increased INS⁺ cell mass and led to durable euglycaemia for approximately 4 months, in contrast to control mice which exhibited continuously increasing blood glucose and died within 5 weeks.

Finally, the authors investigated whether human α -cells may similarly be reprogrammed into functional INS⁺ cells. Human islets were treated with streptozotocin to destroy β -cells, and then treated with AAV-PM to trigger α -cell to β -cell conversion. The cells were then transplanted into ALX-treated hyperglycaemic NOD mice. Within 1 week, the mice exhibited significantly lower blood glucose levels and improved glucose tolerance. The grafts were harvested 4 weeks after transplantation, and were found to have significantly higher INS content and INS⁺ cell numbers than control mice.

This study has demonstrated the feasibility of endogenous α -cell to β -cell conversion. The approach is currently being tested in non-human primates.

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