

Assessment of Lectin Staining Biomarkers using a Murine Model of GNE Myopathy

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Abstract

GNE myopathy (GNEM) is a rare myopathy caused by mutations in the UDP-GlcNAc epimerase/ManNAc-6 kinase (GNE) gene, which reduce sialic acid (SA) biosynthesis and impair muscle through unclear mechanisms. As development of SA-restoring GNEM gene therapies is underway, it is essential to develop SA-detecting biomarkers in preclinically-relevant murine tissues. Here, we assess skeletal muscle staining of the $Gne^{M743T/M743T}$ GNEM model with four sialylation-detecting lectins. While no tested lectins could effectively differentiate between $Gne^{M743T/M743T}$ and wild type tissues, Peanut Agglutinin (PNA) showed differential binding in tissues with and without SA-removing sialidase treatment, indicating its promise in detecting hyposialylation in murine tissues.

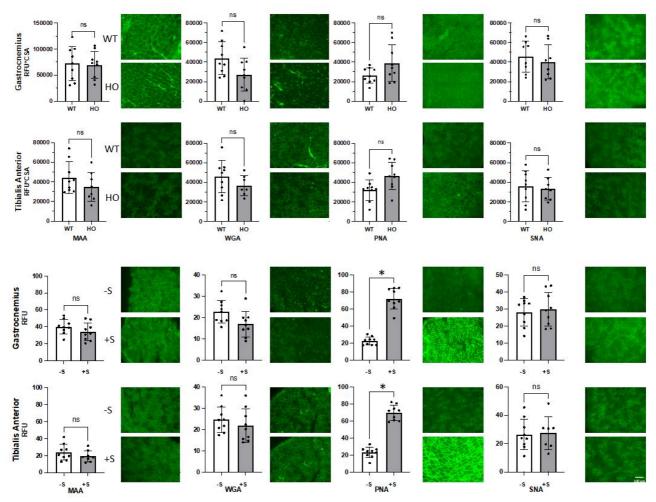


Figure 1. Lectin Staining in Murine Models of GNEM:

Lectin (MAA, WGA, PNA, and SNA) staining in homozygous wild type (WT) and *Gne*^{M743T/M743T} (HO) (top), and WT with and without sialidase treatment (–S and +S, respectively) (bottom) in gastrocnemius and tibialis anterior skeletal muscle. Bar graphs represent mean±SD of RFU*CSA for WT/HO, and RFU for –S/+S plots. Significance (denoted with asterisks) was determined using t-tests followed by a false-discovery correction. Representative images are shown beside their respective bar graphs. Scale bar represents 100μm.

Description

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GNE myopathy (GNEM) is a rare autosomal myopathy with increased prevalence in Japanese and Iranian Jewish populations due to the presence of founder mutations. Symptoms typically begin in the third decade of life with distal weakness and slow proximal progression, eventually leading to loss of ambulation (Argov & Mitrani Rosenbaum, 2015).

GNEM is caused by mutations in the Glucosamine (UDP-N-Acetyl)-2-Epimerase/N-Acetylmannosamine Kinase (*GNE*) gene, which encodes a bifunctional enzyme that catalyzes steps of the sialic acid (SA) biosynthetic pathway. As such, SA abundance is generally reduced in GNEM patient tissues, leading to skeletal muscle pathology through an unclear mechanism. SA is a negatively charged, terminal glycan of the glycocalyx, modulating diverse aspects of skeletal muscle physiology such as gating of voltage-gated ion channels, myogenesis, and oxidative stress (Champigny et al., 2005; Cho et al., 2017; Johnson et al., 2004; Schmitt et al., 2022; Schwetz et al., 2011).

Gene therapy to treat GNEM seeks to provide a corrected copy of the *GNE* gene though a vector such as adeno-associated virus (AAV) (Mitrani-Rosenbaum et al., 2012, 2022; Nemunaitis et al., 2010, 2011). To support the development of these therapies, it is important to develop Investigative New Drug (IND)-enabling preclinical biomarkers using mouse models such as the *Gne*^{M743T/M743T} model, which was reported to show muscle hyposialylation and has been used for therapeutic development for oral glycan therapies (Fleming & Powers, 2012; Lochmüller et al., 2019; Niethamer et al., 2012; Xu et al., 2017). An ideal biomarker for gene therapy would be staining-based to allow visualization of a transgene or its product for quantification of transduction efficiency (Hakim et al., 2020).

Lectins, linkage-specific carbohydrate-binding proteins, could act as such a preclinical staining biomarker by measuring sialylation in skeletal muscle (Leoyklang et al., 2018; Sharon, 2007; Tajima et al., 2005). To act as a viable biomarker, lectins that directly bind SA would show reduced binding in GNEM, while lectins that bind underlying sugar structures that are unmasked in SA's absence would show increased binding in GNEM (Leoyklang et al., 2018; Saito et al., 2004; Tajima et al., 2005; Voermans et al., 2010). Several lectins have shown altered binding in skeletal muscle cells due to SA alterations, including *Sambucus nigra* agglutinin (SNA), Wheat germ agglutinin (WGA), *Maackia amurensis* agglutinin (MAA), and Peanut Agglutinin (PNA) (Leoyklang et al., 2014, 2018; Niethamer et al., 2012; Noguchi et al., 2004; Zhang et al., 2018; Zygmunt et al., 2023).

It is critical to have a robust measure of hyposialylation due to its importance as a preclinical gene therapy outcome metric in $Gne^{M743T/M743T}$ model. Although various lectins have been shown to reflect sialylation in various *in vitro* models, murine models, and GNEM patient tissue samples, they have not been directly compared in their ability to assess sialylation in a preclinical murine model. Here, we assess a panel of SA-detecting lectins for their efficacy in SA detection at approximately 1 and 2 months of age, common gene therapy injection timepoints (Gray, 2016). We use both the $Gne^{M743T/M743T}$ GNEM murine model specifically and wild-type (WT) muscles with and without enzymatic SA removal to assess these lectins in murine tissues more generally, allowing identification of lectins that could act as IND-enabling, preclinical biomarkers and potentially translate into outcome measures for a GNEM gene therapy clinical trial.

We first compared lectin staining in $Gne^{M743T/M743T}$ and WT gastrocnemius and tibialis anterior (TA) muscles using sialylation-detecting lectins $Maackia\ Amurensis$ agglutinin (MAA), peanut agglutinin (PNA), $Sambucus\ Nigra$ agglutinin (SNA), and wheat germ agglutinin (WGA). In all cases, we found no significant differences between $Gne^{M743T/M743T}$ and WT skeletal muscle samples after correcting for multiple comparisons, though PNA staining in TA was significantly different prior to application of the false discovery correction (p=0.0217).

We next sought to enzymatically treat WT skeletal muscle with the SA-removing sialidase enzyme (Minami et al., 2021) to assess the ability of each lectin to detect sialylation changes in murine tissues more generally. Here, we found that PNA binding in WT mouse muscle showed a statistically significant increase after sialidase treatment, with a 3.2-fold increase (p<0.0001) in gastrocnemius and a 3.0-fold increase (p<0.0001) in the TA. MAA, SNA, and WGA did not show a statistically significant change between sialidase-treated and -untreated WT skeletal muscle in either the gastrocnemius or TA after correcting for multiple comparisons, though prior to application of the false discovery correction, WGA staining in gastrocnemius was significantly lower in sialidase-treated muscle (p=0.0479).

Overall, this study used a series of lectins to stain skeletal muscle of a GNEM mouse model. In addition to assessing differences between WT and $Gne^{M743T/M743T}$ mice, we also evaluated the utility of these lectins in murine models more generally by comparing lectin staining with and without sialidase, which cleaves SA residues from underlying glycans (Minami et al., 2021). The panel of lectins investigated herein were chosen from the literature based on their prior use in quantifying hyposialylation in biopsies of patients with GNEM (Leoyklang et al., 2014, 2018; Saito et al., 2004; Voermans et al., 2010). To act as a useful biomarker, SA-binding lectins (such as MAA, SNA, and WGA) would show reduced binding in $Gne^{M743T/M743T}$ or sialidase-treated WT tissues, while lectins that bind sugar structures underlying SA (such as PNA) would show increased binding in $Gne^{M743T/M743T}$ or sialidase-treated WT tissues (Leoyklang et al., 2018; Saito et al., 2004; Tajima et al., 2005; Voermans et al., 2010).

First, we demonstrated that none of the four lectins tested (WGA, PNA, SNA, MAA) showed differential binding in WT vs $Gne^{M743T/M743T}$ skeletal muscle. This is in contrast to previous studies in human biopsies from patients with GNEM,



which have found that SNA (Leoyklang et al., 2014, 2018; Saito et al., 2004), WGA (Broccolini et al., 2008; Saito et al., 2004), and MAA (Saito et al., 2004) decrease in biopsies from patients with GNEM as compared to non-GNEM patients via either lectin staining or lectin blotting, although other studies report no change (Leoyklang et al., 2014; Nemunaitis et al., 2010; Noguchi et al., 2004; Tajima et al., 2005; Voermans et al., 2010). This inconsistency may be due to mutation-specific variability in hyposialylation, with sialylation being relatively well-preserved in the p.M743T mutation as compared to other common mutations (Celeste et al., 2014). Additionally, previous studies have shown that SNA binding is decreased in the Gne^{M743T/M743T} mouse model of GNEM, though they use formalin-fixed tissues, as compared to fresh-frozen tissues used herein (Niethamer et al., 2012). Also in contrast to our results in the Gne^{M743T/M743T} model, PNA binding has been shown to increase in patients with GNEM (Saito et al., 2004; Tajima et al., 2005; Voermans et al., 2010). Of note, in our results, PNA staining was significantly higher prior to application of a false discovery correction, so it is possible that with a larger sample size we would be able to detect differences between these groups using this lectin. In addition, one limitation of this work is that we do not address the extent to which muscle characteristics such as fiber type distribution may affect these results. Overall, it is possible that these lectins behave differently in this mouse model than in human biopsies, which raises concerns for the future use of this model in pre-clinical drug-development work.

Based on these results, we next tested the ability of these lectins to meaningfully detect changes in SA levels in WT murine tissues using sialidase, an enzyme that reliably removes SA from underlying glycans (Minami et al., 2021). In our study, PNA was the only lectin that showed a significant difference between sialidase-treated and -untreated muscle after correction for multiple comparisons, though WGA was significant before correction. This robust decrease in PNA binding is consistent with work in human biopsies that have observed lower PNA staining in GNEM patient tissue (Saito et al., 2004; Tajima et al., 2005; Voermans et al., 2010). The lack of significant difference in binding of WGA, SNA, and MAA would indicate that these lectins are not a reliable measure of SA in mice. These findings highlight the importance of further evaluation of lectin staining validity in murine tissues.

In summary, our findings indicate that PNA has the most promise in assessing altered sialylation in murine tissues as compared to WGA, SNA, and MAA. In addition, these findings would indicate that caution should be exercised in utilizing lectin staining as an outcome measure for preclinical trials of sialylation-restoring GNEM therapies in $Gne^{M743T/M743T}$ skeletal muscle.

Methods

Mice

Skeletal muscle tissues were obtained from wild type (WT) (n=9, 3 males and 6 females) and homozygous $Gne^{M743T/M743T}$ (HO) (n=9, 5 males and 4 females) mice that were housed and euthanized at Charles River Laboratories and cared for under the Animal Care and Use Committee of Charles River Laboratories Canada. Animals were sacrificed at 4-10 weeks.

Lectin Immunostaining

Gastrocnemius and tibialis anterior muscles were flash frozen and sectioned at 10µm using a cryostat. For lectin staining, where indicated, samples were incubated in PBS (-S) or treated with 0.3 units/mL neuraminidase (sialidase) from *Clostridium perfringens* (*C. welchii*) (+S) for 30 minutes at 37°C and washed in PBS. Next, sections were blocked in 10% goat serum for one hour, then incubated with biotinylated *Maackia Amurensis* agglutinin (MAA), fluorescein-conjugated peanut agglutinin (PNA), fluorescein-conjugated *Sambucus Nigra* agglutinin (SNA), or fluorescein-conjugated wheat germ agglutinin (WGA) for one hour. For MAA staining, sections were washed with phosphate-buffered saline (PBS) and incubated with FITC-Streptavidin for one hour. All sections were washed in PBS and then mounted with ProLong Gold Antifade Mountant with DAPI. Exposure time-matched images were acquired for each lectin at 20X using a Z-X800E Keyence Fluorescence Microscope, with 2-4 images analyzed per sample.

Quantification and Statistical Analysis

Relative fluorescence was quantified in each image using ImageJ, then normalized to average fiber diameter within each mouse (quantified via Cellpose as described elsewhere (Stringer et al., 2021)) via multiplication by cross-sectional area (CSA). Determinations of significance between the two groups were assessed using an unpaired two-tailed Students' t test; statistics were performed using Prism software version 9.3.0 (GraphPad; San Diego, CA) with a false-discovery correction to account for multiple comparisons (Curran-Everett, 2000).

Reagents

Lectin	Glycan Specificity	Available From
Maackia amurensis agglutinin (MAA)	Siaα2-3Gal	Vector Laboratories



Peanut Agglutinin (PNA)	Galβ1-3GalNAcα1-Ser/Thr	Vector Laboratories
Sambucus nigra agglutinin (SNA)	Siaα2-6Gal/GalNAc	Vector Laboratories
Wheat germ agglutinin (WGA)	Sia, GlcNAc(β1,4)GlcNAc	Vector Laboratories

Animal	Stain/Genetic Background	Obtained
WT	C57BL/6J	Charles River Laboratories
Gne ^{M743T/M743T}	C57BL/6J with M743T mutation in the <i>Gne</i> gene	Charles River Laboratories

Acknowledgements: We would like to thank the Neuromuscular Disease Foundation for logistical support, and the Lechleiter family for their ongoing support of undergraduate research at Xavier University.

References

Argov Z, Mitrani Rosenbaum S. 2015. GNE Myopathy: Two Clusters with History and Several Founder Mutations. Journal of Neuromuscular Diseases. 2: S73-S76. 479. DOI: <u>10.3233/JND-150087</u>

Broccolini A, Gidaro T, De Cristofaro R, Morosetti R, Gliubizzi C, Ricci E, Tonali PA, Mirabella M. 2008. Hyposialylation of neprilysin possibly affects its expression and enzy. Journal of Neurochemistry. 105: 971-981. 141. DOI: 10.1111/j.1471-4159.2007.05208.x

Celeste FV, Vilboux T, Ciccone C, Dios JK, Malicdan MCV, Leoyklang P, et al., Huizing M. 2014. Mutation Update for GNE Gene Variants Associated with GNE Myopathy. Human mutation. 35: 915-926. 516. DOI: 10.1002/humu.22583

Champigny MJ, Perry R, Rudnicki M, Igdoura SA. 2005. Overexpression of MyoD-inducible lysosomal sialidase (neu1) inhibits m. Experimental Cell Research. 311: 157-166. 118. DOI: 10.1016/j.yexcr.2005.08.023

Cho A, Christine M, Malicdan V, Miyakawa M, Nonaka I, Nishino I, Noguchi S. 2017. Sialic acid deficiency is associated with oxidative stress leading to. Human Molecular Genetics. 26: 3081-3093. 85. DOI: 10.1093/hmg/ddx192

Curran Everett D. 2000. Multiple comparisons: philosophies and illustrations. American Journal of Physiology. Regulatory, Integrative and Comparativ. 279: R1-8. 989. DOI: <u>10.1152/ajpregu.2000.279.1.R1</u>

Fleming TR, Powers JH. 2012. Biomarkers and surrogate endpoints in clinical trials. Statistics in Medicine. 31: 2973-2984. 681. DOI: 10.1002/sim.5403

Gray SJ. 2016. Timing of Gene Therapy Interventions: The Earlier, the Better. Molecular Therapy. 24: 1017-1018. 701. DOI: $\frac{10.1038/mt.2016.20}{10.1038/mt.2016.20}$

Hakim CH, Clement N, Wasala LP, Yang HT, Yue Y, Zhang K, et al., Duan D. 2020. Micro-dystrophin AAV Vectors Made by Transient Transfection and Herpes. Molecular Therapy. Methods & Clinical Development. 18: 664-678. 690. DOI: 10.1016/j.omtm.2020.07.004

Johnson D, Montpetit ML, Stocker PJ, Bennett ES. 2004. The Sialic Acid Component of the β1 Subunit Modulates Voltage-gated So. Journal of Biological Chemistry. 279: 44303-44310. 94. DOI: 10.1074/jbc.M408900200

Leoyklang P, Class B, Noguchi S, Gahl WA, Carrillo N, Nishino I, Huizing M, Malicdan MC. 2018. Quantification of Lectin Fluorescence in GNE Myopathy Muscle Biopsies. Muscle & nerve. 58: 286-292. 229. DOI: 10.1002/mus.26135

Leoyklang P, Malicdan MC, Yardeni T, Celeste F, Ciccone C, Li X, et al., Huizing M. 2014. Sialylation of Thomsen-Friedenreich antigen is a noninvasive blood-bas. Biomarkers in medicine. 8: 641-652. 379. DOI: 10.2217/bmm.14.2

Lochmuller H, Behin A, Caraco Y, Lau H, Mirabella M, Tournev I, et al., Mozaffar T. 2019. A phase 3 randomized study evaluating sialic acid extended-release for. Neurology. 92: e2109-e2117. 410. DOI: 10.1212/WNL.0000000000000000932

Minami A, Kurebayashi Y, Takahashi T, Otsubo T, Ikeda K, Suzuki T. 2021. The Function of Sialidase Revealed by Sialidase Activity Imaging Probe. International Journal of Molecular Sciences. 22: 3187. 983. DOI: 10.3390/ijms22063187

Mitrani Rosenbaum S, Yakovlev L, Becker Cohen M, Argov Z, Fellig Y, Harazi A. 2022. Pre Clinical Assessment of AAVrh74.MCK.GNE Viral Vector Therapeutic Po. Journal of Neuromuscular Diseases. 9: 179-192. 348. DOI:



10.3233/JND-210755

Mitrani Rosenbaum S, Yakovlev L, Becker Cohen M, Telem M, Elbaz M, Yanay N, et al., Sela I. 2012. Sustained expression and safety of human GNE in normal mice after gene. Neuromuscular disorders: NMD. 22: 1015-1024. 35. DOI: 10.1016/j.nmd.2012.03.013

Nemunaitis G, Maples PB, Jay C, Gahl WA, Huizing M, Poling J, et al., Nemunaitis J. 2010. Hereditary inclusion body myopathy: single patient response to GNE gen. The Journal of Gene Medicine. 12: 403-412. 33. DOI: 10.1002/jgm.1450

Nemunaitis G, Jay CM, Maples PB, Gahl WA, Huizing M, Yardeni T, et al., Nemunaitis J. 2011. Hereditary inclusion body myopathy: single patient response to intrave. Human Gene Therapy. 22: 1331-1341. 354. DOI: 10.1089/hum.2010.192

Niethamer TK, Yardeni T, Leoyklang P, Ciccone C, Astiz Martinez A, Jacobs K, et al., Huizing M. 2012. Oral monosaccharide therapies to reverse renal and muscle hyposialylat. Molecular Genetics and Metabolism. 107: 748-755. 224. DOI: 10.1016/j.ymgme.2012.10.011

Noguchi S, Keira Y, Murayama K, Ogawa M, Fujita M, Kawahara G, et al., Nishino I. 2004. Reduction of UDP-N-acetylglucosamine 2-epimerase/N-acetylmannosamine k. The Journal of Biological Chemistry. 279: 11402-11407. 392. DOI: 10.1074/jbc.M313171200

Saito F, Tomimitsu H, Arai K, Nakai S, Kanda T, Shimizu T, Mizusawa H, Matsumura K. 2004. A Japanese patient with distal myopathy with rimmed vacuoles: missense. Neuromuscular Disorders. 14: 158-161. 363. DOI: 10.1016/j.nmd.2003.09.006

Schmitt RE, Smith DY, Cho DS, Kirkeby LA, Resch ZT, Liewluck T, et al., Doles JD. 2022. Myogenesis defects in a patient-derived iPSC model of hereditary GNE m. NPJ Regenerative medicine. 7: 48. 420. DOI: <u>10.1038/s41536-022-00238-3</u>

Schwetz TA, Norring SA, Ednie AR, Bennett ES. 2011. Sialic Acids Attached to O-Glycans Modulate Voltage-gated Potassium Ch. Journal of Biological Chemistry. 286: 4123-4132. 103. DOI: 10.1074/jbc.M110.171322

Sharon N. 2007. Lectins: Carbohydrate-specific Reagents and Biological Recognition Mol. Journal of Biological Chemistry. 282: 2753-2764. 669. DOI: 10.1074/JBC.X600004200

Stringer C, Wang T, Michaelos M, Pachitariu M. 2021. Cellpose: a generalist algorithm for cellular segmentation. Nature Methods. 18: 100-106. 699. DOI: 10.1038/s41592-020-01018-x

Tajima Y, Uyama E, Go S, Sato C, Tao N, Kotani M, et al., Sakuraba H. 2005. Distal myopathy with rimmed vacuoles: impaired O-glycan formation in m. The American Journal of Pathology. 166: 1121-1130. 129. DOI: 10.1016/S0002-9440(10)62332-2

Voermans NC, Guillard M, Doedee R, Lammens M, Huizing M, Padberg GW, et al., Lefeber DJ. 2010. Clinical features, lectin staining, and a novel GNE frameshift mutatio. Clinical neuropathology. 29: 71-77. 371.

Xu X, Wang AQ, Latham LL, Celeste F, Ciccone C, Malicdan MC, et al., Carrillo N. 2017. Safety, pharmacokinetics and sialic acid production after oral adminis. Molecular Genetics and Metabolism. 122: 126-134. 221. DOI: 10.1016/j.ymgme.2017.04.010

Zhang X, Nie H, Whited J, Wang D, Li Y, Sun XL. 2018. Recent approaches for directly profiling cell surface sialoform. Glycobiology. 28: 910-924. 252. DOI: 10.1093/glycob/cwy046

Zygmunt DA, Lam P, Ashbrook A, Koczwara K, Lek A, Lek M, Martin PT. 2023. Development of Assays to Measure GNE Gene Potency and Gene Replacement. Journal of Neuromuscular Diseases. Preprint: 1-16. 658. DOI: <u>10.3233/JND-221596</u>

Funding: This work was supported by a grant from the Uplifting Athletes Young Investigator Draft and a grant from the Neuromuscular Disease Foundation (NDF).

Author Contributions: Olivia Parker: investigation, formal analysis, writing - original draft, writing - review editing, visualization. Jordyn Woods: formal analysis, investigation, writing - original draft, writing - review editing. Max Rothkopf: investigation, formal analysis, writing - original draft, writing - review editing. Daniel Drach: investigation, formal analysis, writing - original draft, writing - review editing. Hanna N. Wetzel: formal analysis, writing - original draft, writing - review editing, supervision, visualization. Kelly E. Crowe: conceptualization, methodology, writing - original draft, writing - review editing, supervision, funding acquisition.

Reviewed By: Marie Mortreux

History: Received June 23, 2025 **Revision Received** September 9, 2025 **Accepted** October 8, 2025 **Published Online** October 8, 2025 **Indexed** October 22, 2025



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Citation: Parker O, Woods J, Rothkopf M, Drach D, Wetzel HN, Crowe KE. 2025. Assessment of Lectin Staining Biomarkers using a Murine Model of GNE Myopathy. microPublication Biology. <u>10.17912/micropub.biology.001717</u>