

## Liver-targeting oral lipid nanoparticle for CRISPR/Cas9 therapy in metabolic dysfunction-associated steatotic liver disease



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## CONCLUSION

Liver-targeting oral enhancing polymer(GCGA) was synthesized and optimized for oral LNP

GCGA coated LNP enhances stability under pH and enzymatic conditions in the GI tract

**GCGA-LNP** uptake via bile acid receptors has been confirmed in vitro and in vivo

**Orally administered GCGA-LNP accumulated in** the liver with high gene expression

**DGAT2-CRISPR/Cas9 LNP alleviates hepatic** steatosis in MASLD models

LNPs delivering CRISPR components for DGAT2 inhibition effectively attenuated hepatic steatosis in MASLD models. This study addresses the potential of the bile acid-polymer-coated LNP as a scalable, patient-friendly oral gene delivery platform for treatment of MASLD and other liver diseases.

gene expression compared to unmodified LNPs after oral administration. The oral





DAG

TAG

-DGAT2-

GCGA-LNP exhibits great potential for MASLD treatment and oral gene therapy



in HEPG2 and Caco-2 cell lines (n=4, scale bar=10µm). (C)

Competitive cellular uptake of GCGA-LNP with co-treatment of free

6. Therapeutic efficacy of DGAT2-CRISPR/Cas9 LNP in hepatic steatosis models (*in vitro, in vivo*)

![](_page_0_Figure_18.jpeg)

polymer.

![](_page_0_Figure_19.jpeg)

![](_page_0_Figure_20.jpeg)

Figure 2. (A) Hydrodynamic size, PDI, and surface zeta potential of GCGA oral LNP for lipid/polymer ratio optimization (n=3). (B) Hydrodynamic size, PDI, and surface zeta potential of LNPs (n=3). (C) Surface morphology analysis by Cryo-TEM (scale bar=100nm). (D) CLSM analysis visualizing co-localization between the polymer and the LNP (scale bar=5µm). (E) pDNA encapsulation efficiency of LNPs by Quant-iT Ribogreen assay (n=3). (F) Illustration describing pH conditions in GI tract. (G) Stability assessment of LNPs against pH and enzymatic degradation under GI conditions.

The optimal GCGA-to-LNP ratio was selected, and its characterization, morphology, and stability were analyzed.

![](_page_0_Picture_23.jpeg)

![](_page_0_Picture_24.jpeg)

Figure 4. (A) In vivo biodistribution of LNPs after oral injection: ex vivo fluorescence imaging and quantitative analysis of fluorescence intensity in major organs (L: Lung, H: Heart, K: Kidney, S: Spleen, Li: Liver, St: Stomach, I: Small Intestine) (n=3). (B) In vivo luciferase activities of LNPs after oral injection: ex vivo luminescence imaging and quantitative analysis of luciferase activity in major organs (n=5). (C) Cross-sectional CLSM images of the ileum 4 hr after oral administration of GCGA-LNP (FITC: ASBT, Cy5.5: LNP) (scale bar=100µm). (D) Time-dependent in vivo biodistribution of GCGA LNPs: *ex vivo* fluorescence imaging and quantitative analysis (n=5).

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**Orally administered GCGA-LNPs exhibited ASBT-mediated** uptake, liver targeting, and high hepatic gene expression.

Figure 6. (A) Schematic illustration of establishing in vitro hepatic steatosis model and its lipid alleviation by DGAT2-CRISPR/Cas9 therapy. (B) NGS analysis of DGAT2-CRISPR/Cas9 LNP in vitro hepatic steatosis model. (C) Triglyceride analysis of in vitro hepatic steatosis model (n=3). (D,E) CLSM analysis of *in vitro* hepatic steatosis model for (D) fatty acid and (E) ROS (scale bar=10µm). (F) Oil Red O staining of *in vitro* hepatic steatosis model (scale bar=100µm). (G,H) Analysis on mitochondrial activity of *in vitro* hepatic steatosis model (n=4). (I) Illustration describing in vivo MASLD model (HFD) induction and MASLD therapy by oral administration of GCGA DGAT2-CRISPR/Cas9 LNP. (J) H&E staining of the HFD-induced mouse liver to analyze fatty liver phenotypic patterns (scale bar=100µm).

**HFD GCGA LNP** 

(DGAT2 Cas9)

GCGA coated DGAT2-CRISPR/Cas9 LNP effectively alleviates hepatic lipid accumulation in MASLD models.