Optimized human factor IX expression cassettes for hepaticdirected gene therapy of hemophilia B

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Abstract Gene therapy provides a potential cure for hemophilia B, and significant progress has been achieved in liver-directed gene transfer mediated by adeno-associated viral vectors. Recent clinical trials involving the use of a self-complementary adeno-associated virus serotype 8-human codon-optimized factor IX (AAV8-hFIXco) vector demonstrated encouraging efficacy with hFIX expression stabilized at 1% to 6% of normal level in patients, but safety concerns related to high vector doses are still present. Thus, further improvement of AAV vectors and hFIX expression cassette may positively contribute to the ultimate success of hemophilia B gene therapy. In this study, to obtain a higher expression level of hFIX that potentiates the coagulant capacity of recipients, human FIX expression vector was optimized by upgrading the codon adaption index and adjusting the GC content, inserting a Kozak sequence (GCCACC), and introducing a gain-of-function mutation, R338L (FIX Padua). The efficiency of the published and the presently constructed cassettes was compared through in vivo screening. In addition, the regulatory elements that control the FIX gene expression in these cassettes were screened for liver-specific effectiveness. Among all the constructed cassettes, scAAV-Pre-hFIXco-SIH-R338L, which was the construct under the control of the prothrombin enhancer and prealbumin promoter, resulted in the highest level of coagulant activity, and the expression levels of two constructed cassettes (scAAV-Chi-hFIXco-SIH-R338L and scAAV-PrehFIXco-SIH-R338L) were also higher than that of the published cassette (scAAV-LP1-hFIXco-SJ). In summary, our strategies led to a substantial increase in hFIX expression at the protein level or a remarkably elevated coagulant activity. Thus, these reconstructs of hFIX with AAV vector may potentially contribute to the creation of an efficacious gene therapy of hemophilia B.

Keywords factor IX; hemophilia B; liver-specific regulatory elements; hydrodynamic gene transfer

Introduction

Hemophilia B is an X-linked, monogenic hereditary disorder. It is characterized by a deficiency of blood coagulation factor IX (FIX), resulting in a diminished clotting capability of blood. It occurs in 1 of every 25 000 to 30 000 live males who were born with the most common mutation on chromosome Xq27.1. The disease has been broadly classified as mild, moderate, or severe according to the level of FIX coagulant activity, which corresponds to 5% to 40%, 1% to 5% and < 1% of normal, respectively [1].

The major clinical feature of hemophilia B is continuous

bleeding after or even without trauma or injury. Bleeding can occur in various tissue, particularly in the joints. Without effective treatment, soft-tissue hematomas and hemarthrosis could lead to tissue damage and chronic hemophilic arthropathy over time. In addition, bleeding in critically closed spaces can be life-threatening. Current treatment of hemophilia B relies on protein replacement therapy (PRT). PRT restores hemostasis, thereby reducing the mortality of patients [2,3]. However, because of the short half-life of the protein in blood circulation, PRT only has transient therapeutic effects. Requiring frequently periodic injections, the treatment of PRT is expensive and is also associated with complications, such as infectious diseases. Recent clinical trials of liver-directed gene therapy for HB have been performed at St Jude Children's Research Hospital and University College, London. It involved self-complementary AAV8-FIX

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vectors and demonstrated encouraging results with relative safety [4]. Nevertheless, further investigations are needed to increase FIX coagulant activity, reduce vector doses, and eliminate host immune responses.

Many reported studies have demonstrated that the expression level of a gene could be significantly improved by codon optimization [5-7]. Ward reported that codon optimization of human factor VIII cDNA led to an unprecedented 29- to 44-fold increase in factor VIII expression [8]. Identical doses of AAV8 vector containing codon-optimized hFVIII cDNA resulted in dramatic improvements in clotting time, with average aPTTs declining from 78 ± 8 s to 37 ± 2 s [9]. Additionally, hFIX expression of scAAV2/8-LP1-hFIXco was almost 4fold higher compared with that of scAAV2/8-LP1-hFIX by tail vein administration of 2×10^9 vector particles [5]. However, the integrated application of codon optimization technology based on upgraded codon adaption index (CAI), increased GC content, and removal of repeated sequences may further improve expression of hFIX without altering the amino acid sequence. Hydrodynamic administration represents a promising approach to study gene expression in liver and has become a common method for DNA delivery in rodents [10–12]. Recently, hydrodynamic tail vein injection has been applied to evaluate the control elements that drive reporter gene expression in the liver [13–15]. In the present work, therapeutic cassettes were constructed to direct liverspecific gene expression. The codons for human FIX were optimized, and R338L mutation was introduced [16] to increase the expression and activity of FIX. Then, the best regulatory sequences from liver-specific expressed proteins including albumin [17–19], prealbumin [20–22], α 1antitrypsin [23,24], and prothrombin [25] were screened for their ability to drive the transgene expression. These regulatory sequences were used in hFIX expression cassettes and were evaluated in HB mice via hydrodynamic delivery method.

Materials and methods

Construction of human FIX plasmids

Diagrams of the plasmid constructs are presented in Fig. 1A and 1B. The full sequence of scAAV-LP1-hFIXco [5] was synthesized and sequenced prior to cloning into pUC57-Kan to create scAAV-LP1-hFIXco-SJ. A new hFIX expression cassette that included a codon-optimized h*FIX* (by OptimumGeneTM codon optimization analysis) was sub-cloned into pUC57-Kan to construct scAAV-Alb-hFIXco-SIH. The full sequence of hFIXco-SIH was outlined in Supplementary Material. pcDNA 3.1(-)-FIXwt was a gift from Wenbin Wang (Shanghai Institute of Hematology, Shanghai, China). The h*FIX* cDNA was

obtained from pcDNA 3.1(-)-FIXwt by polymerase chain reaction (PCR) amplification and sub-cloned into scAAVpolyadenylation signal (polyA) at the *EcoRI/Bgl*II sites. scAAV-hFIX-polyA was digested with *EcoRI* and *Spe*I to release h*FIX* and the SV40 late polyA tail. This fragment was then inserted into scAAV-LP1-hFIXco-SJ at *EcoRI* and *Spe*I to substitute hFIXco-SJ and the SV40 late polyA to construct scAAV-LP1-hFIX. The scAAV-LP1-hFIXco-SIH plasmid was constructed by digesting scAAV-LP1hFIX at *EcoRI* and *Bgl*II. scAAV-Alb-hFIXco-SIH was digested at *EcoRI* and *Bgl*II to release the h*FIX* fragment, which was subsequently inserted into scAAV-LP1-hFIX.

The hFIXco-SJ R338L (AGG \rightarrow CTA) mutation [16] and the hFIXco-SIH R338L (CGG \rightarrow CTA) mutation were introduced using the QuickChange II-XL site-directed mutagenesis kit (Stratagene) to generate scAAV-LP1hFIXco-SJ-R338L, scAAV-LP1-hFIXco-SIH-R338L, and scAAV-Alb-hFIXco-SIH-R338L.

The scAAV-Pre-hFIXco-SIH-R338L construct was cloned by replacing the albumin enhancer and promoter in scAAV-Alb-hFIXco-SIH-R338L with the human prothrombin enhancer and prealbumin promoter at the *XhoI/ Hin*dIII sites. scAAV-Chi-hFIXco-SIH-R338L was constructed similarly by replacing with the chimeric albumin enhancer and the chimeric promoter. Elements of all constructed plasmids are listed in Table 1.

Animal procedures

All mice were housed in a specific pathogen-free environment with a normal diet. All experimental procedures were approved by the Studies Ethics Committee of Ruijin Hospital Affiliated to Shanghai Jiao Tong University School of Medicine (Reference number: SYXK2011-0113). All animals were handled in accordance with Institutional Animal Care and Use Committee guidelines. Animals used in this study had a C57BL/6 genetic background. FIX-deficient (FIX^{null}) mice were obtained from Dr. Guowei Zhang (Hangzhou Normal University) [26]. Separated PCR reactions were performed to identify hemophilia-affected (-/- or -/Y), carrier (+/-), and wild type (+/+ or +/Y) animals. Genomic DNA was initially prepared with blood collected from retro-orbital bleeding and was applied to standard PCR reactions. A common reverse primer (AACAGGGATAG-TAAGATTGTTCC) was applied in combination with either a mutant forward primer (TCCTGTCATCT-CACCTTGCTC) or a wild type forward primer (TGGAAGCAGTATGTTGGTAAGC) to identify the mutant and wild type alleles, respectively. All primers were synthesized from Genewiz (Suzhou, China). A 35cycle PCR program (94 °C for 30 s, 55 °C for 30 s, and 72 °C for 45 s) was performed with a 2 min elongation step at 72 °C upon completion of all cycles.

Hydrodynamic injections were performed with male HB



Fig. 1 Construction of hFIX expression cassettes. (A) Diagram of human FIX expression cassette: a liver-specific FIX expression cassette comprises *FIX* cDNA and liver-specific regulatory elements, including enhancer, promoter, intron, and polyA flanked by the AAV internal terminal repeats. The AAV internal terminal repeats were necessary for packaging the virion. (B) Each cassette had intact 5' and 3' ITRs. scAAV-LP1-hFIXco-SJ contained the LP1 promoter, which comprised core liver-specific elements from HCR and hAAT, modified SV40 intron, hFIXco-SJ, and late SV40 polyA [5]. scAAV-LP1-hFIXco-SJ-R338L, scAAV-LP1-hFIXco-SIH, scAAV-LP1-hFIXco-SIH-R338L, and scAAV-LP1-hFIXwt contained the same control elements as scAAV-LP1-hFIXco-SJ, and those cassettes had different h*FIX* as shown in the Figure above. scAAV-Alb-hFIXco-SIH-R338L, scAAV-Pre-hFIXco-SIH-R338L, and scAAV-Chi-hFIXco-SIH-R338L contained the same intron (Chimeric intron), polyA (Synthetic polyA), and hFIXco-SIH, which were driven by albumin enhancer (221 bp) and albumin promoter (292 bp), prothrombin/prealbumin enhancer (180 bp) and prealbumin promoter (215 bp), respectively.

Plasmid name	Enhancer	Promoter	Intron	hFIX	PolyA
LP1-hFIXwt	ApoE-HCR	hAAT	Mod-SV40	hFIXwt	Late SV40
LP1-hFIXco-SJ	ApoE-HCR	hAAT	Mod-SV40	hFIXco-SJ	Late SV40
LP1-hFIXco-SIH	ApoE-HCR	hAAT	Mod-SV40	hFIXco-SIH	Late SV40
LP1-hFIXco-SJ-R338L	ApoE-HCR	hAAT	Mod-SV40	hFIXco-SJ-R338L	Late SV40
LP1-hFIXco-SIH-R338L	ApoE-HCR	hAAT	Mod-SV40	hFIXco-SIH-R338L	Late SV40
Alb-hFIXco-SIH-R338L	Alb	Alb	Chimeric	hFIXco-SIH-R338L	Synthetic
Pre-hFIXco-SIH-R338L	Pro/Pre ^a	Prealbumin	Chimeric	hFIXco-SIH-R338L	Synthetic
Chi-hFIXco-SIH-R338L	Alb/Alb ^b	Pre/Alb ^c	Chimeric	hFIXco-SIH-R338L	Synthetic

^aProthrombin/prealbumin enhancer.

^bChimeric albumin enhancer.

^cChimeric prealbumin/albumin promoter.

mice (-/Y), as described previously [27,28]. HB mice were injected with 120 µg of endotoxin-free plasmid DNA in 2.0 ml saline via the tail vein within 5 s to 10 s. Blood

was collected at 24 h to 48 h after hydrodynamic injection by retro-orbital bleeding with sodium citrate as an anticoagulant at a final concentration of 0.38% (wt/vol). The blood sample was then centrifuged at 4 °C for 10 min at 9000 rpm in a microcentrifuge. The plasma was collected and stored at -80 °C for use in the FIX assays.

Determination of hFIX levels and coagulant activity

Plasma levels of hFIX in mice were detected by enzymelinked immunosorbent assay (ELISA) according to a previously described method [29]. A monoclonal antibody against the hFIX heavy chain (AHIX-5041 monoclonal antibody, Hematologic Technologies Inc., US) was used to capture the protein. A goat anti-human FIX polyclonal antibody was used as the secondary antibody (GAFIX-APHRP, Affinity Biological Inc.). A standard curve was generated with serial dilutions of normal human pooled plasma. Human FIX coagulant activity in collected plasma samples were determined through a chromogenic assay (BIOPHEN Factor IX, Hyphen Biomed, Neuville-sur-Oise, France) and calculated with a standard curve generated with a series of diluted normal human pooled plasma.

Results

Codon optimization of hFIX cDNA

Codon optimization of *FIX* was performed with an OptimumGeneTM algorithm in which codon adaptation index, codon usage frequency, and mRNA structure optimization were considered. To reach a higher level of expression, the codon usage bias in human was increased by upgrading the CAI from 0.72 to 0.87. The GC content and unfavorable peaks were modulated to prolong the half-life of FIX mRNA. The stem-loop structures affecting ribosomal binding efficiency and stability of mRNA were broken. In addition, the negative cis-acting sites were successfully modified by the optimization process. The information on codon optimization is shown in Fig. 2, including the CAI (Fig. 2A), GC contents (Fig. 2B), and the frequency of codon usage (Fig. 2C).

For this study, a previously described hFIX expression cassette (scAAV-LP1-hFIXco-SJ) was selected as a positive control [4,5]. Our codon-optimized h*FIX* and wild type h*FIX* were constructed under the same control elements in LP1-hFIXco-SIH and LP1-hFIX-WT plasmids, respectively. To test the expression mediated by these constructs *in vivo*, the LP1-hFIX-WT, LP1-hFIXco-SIH, and LP1-hFIXco-SJ plasmids were delivered into HB mice at a dose of 200 μ g per mouse by hydrodynamic injection, and blood was collected 36 h after injection via retro-orbital eye bleeding.

Protein levels of hFIX in mouse plasma were detected by ELISA. As shown in Fig. 3, the transgene expression mediated by the hFIXco-SIH cassette was 3- to 4-fold higher than that by the wild type counterpart. Hydrodynamic administration of the LP1-hFIX-WT, LP1hFIXco-SIH and LP1-hFIXco-SJ plasmids resulted in 47%, 162% and 157% of the normal hFIX protein individually, as compared with the pooled human plasma. In the control mice injected with saline, FIX protein was hardly detected. These data indicated that hFIX expression was increased at the protein level because of our codon optimization strategy.

Further increase of clotting activity in hFIXco-SIHharbing HB mice by R338L mutation

To further enhance the clotting activity of hFIX to reach therapeutic effect with lower doses, a previously described hyper-functional R338L mutation was introduced into the hFIXco-SIH transgene. Human FIX with R338L mutation was evaluated in HB mice via hydrodynamic injection. The FIXco-SIH-R338L transgene displayed 6- to 8-fold coagulant activity compared with FIXco-SIH and the previously published FIXco-SJ (Fig. 4A and 4B), and such activity was also greater than that of FIXco-SJ-R338L. In addition, our codon-optimized transgene further promoted the protein expression to 120% of normal, whereas the positive control hFIXco-SJ and its R338L mutant transgenes resulted in about 109% of normal protein (Fig. 4C and 4D). Considering the coagulant efficiency, our codon-optimized hFIX transgene with an R388L mutation demonstrated the highest coagulant activity among the hFIX transgenes tested in HB mice.

Comparison of liver-specific hFIX expression cassettes driven by various regulatory elements

The transgene with the best performance, hFIXco-R338L, was selected for the construction of liver-specific expression cassettes. Each of the five plasmids (LP1-hFIXco-SJ, LP1-hFIXco-SIH-R338L, Alb-hFIXco-SIH-R338L, ChihFIXco-SIH-R338L, and Pre-hFIXco-SIH-R338L) was hydrodynamically delivered into mice using 120 µg of plasmid DNA at a final volume of 2 ml per mouse. Compared with LP1-hFIXco-SJ, which served as the positive control, the Pre-hFIXco-SIH-R338L cassette exhibited the highest level of hFIX clotting activity (Fig. 5). The coagulant activities of the hFIX protein of the 5 transgene cassettes were ranked as follows: LP1-hFIXco-SJ < Alb-hFIXco-SIH-R338L < Chi-hFIXco-SIH-R338L < LP1-hFIXco-SIH-R338L < Pre-hFIXco-SIH-R338L. In addition, higher protein expression levels were obtained from all newly constructed cassettes (except for Alb-hFIXco-SIH-R338L) compared with the control cassette.

Discussion

The expression efficiency of therapeutic transgenes applied



Fig. 2 Codon optimization of *FIX*: adjustment of the CAI, GC content and the frequency of codon usage for improving FIX expression. (A) A CAI of 1.0 was considered as perfect, whereas a CAI of > 0.8 was good, for high-level gene expression in the desired organism [30]. (B) The ideal range of GC content was between 30% and 70%. Peaks of GC content percentage in a 60 bp window were removed. (C) Frequency of optimal codons was the percentage distribution of codons in computed codon quality groups. The value of 100 was set for the codon with the highest usage frequency for a given amino acid in the desired expression organism.

in liver-directed gene therapy relies on not only the gene sequence, but also the regulatory elements, such as the enhancer, promoter, intron, and polyA. Previous studies demonstrated that a wide variety of factors influenced gene expression [15,31]. Ideally, a transgene cassette with high liver specificity and transcriptional activity should meet several requirements. First, it should have restricted expression only in the hepatocytes. Second, it could drive gene transcription efficiently to reach the therapeutic efficacy. Third, for the AAV vector, the size of the cassette should be sufficiently small for efficient packaging. Thus, considering the above requirements, all regulatory elements selected for driving transgene expression in this study were liver specific, small, and with high transcriptional activity.

To optimize the FIX transgene cassette, we made the

following modifications: first, the h*FIX* coding sequence was manipulated under OptimumGeneTM codon optimization analysis with high frequent codons and GC content adjustment; second, a hyper-functional FIX-R338L mutation was introduced to increase the coagulant activity of FIX; third, the strong regulatory elements was designed; and fourth, the Kozak sequence was added immediately in front of the start codon to modulate translation initiation efficiency [32].

Codon optimization is considered as an effective strategy to improve the gene expression level. It reportedly increases the steady-state mRNA level [33] and alleviates translation inefficiency caused by ribosomal pauses at rare codons [34,35]. A large number of software tools have been implemented to design synthetic genes for sequence optimization. The first generation of the tools focused primarily on codon usage optimization and unique restriction site incorporation. In recent years, sequence design tools that aimed to construct optimal protein-coding sequences adhered to multiple objectives, such as codon bias, codon context bias, RNA secondary structure, ribosomal binding site, restriction sites, hidden stop codons, and other motif avoidance. However, the best kind of codon selection is still unknown. Thus, experimental validation is needed after the preliminary selection with software, and further refinement in the gene design software is required [36–39]. In this study, we synthesized the hFIXco cDNA according to the frequency of codon usage in humans by OptimumGeneTM software. The experiments were then performed to compare the protein expression levels with or without codon optimization, namely, the levels of hFIXco-SIH and hFIX-WT. Results showed that the expression level of hFIXco-SIH was about 3.4 times that of hFIX-WT (162%/47%). In addition, the expression level of hFIXco-SIH was slightly higher than that of the control, hFIXco-SJ. The comparative results of hFIXco-SIH with or without the gain-of-function R338L mutation are consistent with a previous report, in which FIX-R338L had a specific activity that was 5 times to 10 times as high as the wild type *FIX* [16].

The promoters of genes with liver-specific expression have always been chosen for the construction of transgene cassettes [40]. However, such promoters were typically large, with low and short-lasting transcriptional activity [41,42]. These disadvantages have limited their applications in liver-targeted gene therapy. Previous studies on such promoters have shown that a cluster of cis-acting regulatory elements located immediately upstream of the transcription start site (TSS) were generally capable of directing the transcription of an already identified hepatocyte-specific gene [43]. Analysis of the regulatory components of albumin indicated that binding sites for hepatocyte nuclear factor 1 (HNF-1), NF-Y, and C/EBP were present at -107/-99, -90/-84, and -65/-49, respectively, upstream of the encoding sequence [17,18,44,45]. Four binding sites in prealbumin promoter are present for C/EBP or C/EBP-related factors, two sites for HNF-3, two sites for HNF-4, and one site for HNF-1 [20,22,46,47]. The 5' proximal regulatory region of the human α 1-antitrypsin (α 1-AT) gene contained multiple or single binding sites for transcription factors, including C/ EBP, HNF-3, and HNF-1 for liver-specific expression [23,24,48]. HNF-3 and HNF-4 were identified as crucial to prealbumin and α 1-antirypsin (α 1-AT) expression, but neither of them had binding sites in the albumin promoter proximal region [20]. The lack of binding sites for these two transcription factors might explain the mediocre hFIX expression and activity by the transgenes driven by the albumin promoter/enhancer elements (Fig. 5).

Based on the previous studies, transcription factor binding sites upstream of liver-specific genes were chosen to design regulatory sequences of high liver specificity and activity for expression cassettes [43,49]. We designed a new chimeric promoter composed of the distant regulatory region of prealbumin [22] and the proximal region of albumin [17]. This chimeric promoter contains four kinds of binding sites for critical transcription factors, including HNF-1, HNF-3, HNF-4, and C/EBP. Chi-hFIXco-SIH-R338L, under the control of the chimeric promoter and the core albumin enhancer elements, achieved a higher hFIX



Fig. 3 Effects of codon optimization on hFIX expression under the control of the same elements. ELISA was used to detect plasma hFIX antigen at 36 h after tail-vein hydrodynamic administration of saline (CON, n = 3), scAAV-LP1-hFIX (FIX-WT, n = 5), scAAV-LP1-hFIXco-SIH (FIX-SIH, n = 8), and scAAV-LP1-hFIXco-SJ (FIX-SJ, n = 8). (A + B) hFIX antigen levels in the plasma of individual mice are indicated in (A) and presented as mean \pm SD in (B). Saline-injected mice produced nearly undetectable hFIX antigen (0.2% of normal). FIX-WT, FIX-SIH, and FIX-SJ had a mean hFIX antigen levels of 47% \pm 7% (2.35 \pm 0.14 µg/ml), 162% \pm 15% (8.1 \pm 0.3 µg/ml), and 157% \pm 19% (7.85 \pm 0.95 µg/ml) of normal, respectively.



Fig. 4 Comparison of hFIX coagulant activity and expression level mediated by transgene cassettes in HB mice after hydrodynamic injection. FIX-SJ: scAAV-LP1-hFIXco-SJ; FIX-SJ-M: scAAV-LP1-hFIXco-SJ; FIX-SJ-M: scAAV-LP1-hFIXco-SIH; and FIX-SIH-M: scAAV-LP1-hFIX activity in the pooled plasma. The average hFIX activities mediated by FIX-SJ, FIX-SJ-M, FIX-SIH, and FIX-SIH-M were about $60\% \pm 24\%$, $406\% \pm 32\%$, $66\% \pm 16\%$, and $479\% \pm 37\%$, respectively. (C + D) ELISA results of hFIX expression in individual mice in (C) are presented as mean \pm SD in (D). The expression of codon-optimized hFIX with or without R338L mutation showed no significant difference.

expression at protein level and coagulant activity. Notably, the hFIXco-SIH-R338L construct driven by the prothrombin/prealbumin enhancer and prealbumin promoter displayed the greatest coagulant activity of hFIX in HB mice with high hFIX protein level. Compared with scAAV-LP1hFIXco-SJ, both scAAV-Chi-hFIXco-SIH-R338L and scAAV-Pre-hFIXco-SIH-R338L displayed higher levels of expression and hFIX coagulant activity. Thus, better therapeutic efficacy may be achieved with both cassettes above via AAV-mediated gene therapy in hemophilia B. However, excess level of FIX activity and AAV vector may lead to thrombosis and/or immune disease. Thus, we need further investigations to achieve ideal therapeutic efficacy and avoid side effects. In summary, we have constructed a number of liverspecific hFIX expression cassettes. These cassettes have demonstrated relatively high hFIX expression and activity compared with an hFIX cassette that is currently in trial. This design is promising for HB gene therapy mediated by AAV vectors. In addition, regarding the recent progress in clinical application of non-viral constructs targeting the human liver, our configuration could be an optional therapeutic strategy that delivers naked DNA to the liver. Our data showed that the FIX expression level correlated well with the types and amounts of liver-specific transcription factor binding sites in the cassettes. In conclusion, this study provides information on the optimization of transgene cassettes for gene therapy.



Fig. 5 Comparison of liver-specific regulatory elements driving hFIX expression *in vivo* after hydrodynamic delivery. (A + B) Chromogenic assay to determine hFIX coagulant activity, which was calculated as percentage of normal hFIX activity in pooled human plasma. The activities in individual mice are indicated in (A) and presented as mean \pm SD in (B). LP1-SJ: LP1-hFIXco-SJ (*n* = 4); LP1-SIH-M: LP1-hFIXco-SIH-M (*n* = 5); Alb-SIH-M: Alb-hFIXco-SIH-M (*n* = 5); Chi-SIH-M: Chi-hFIXco-SIH-M (*n* = 4); and Pre-SIH-M: Pre-hFIXco-SIH-M (*n* = 5).

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Compliance with ethics guidelines

Ru Zhang, Qiang Wang, Lin Zhang, and Saijuan Chen declare that there is no conflict of interest. All institutional and national guidelines for the care and use of laboratory animals were followed.

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