

# Cartilage-Targeting mRNA-loaded Exosomes for Osteoarthritis Gene Therapy

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**Disclosures:** The authors have no conflicts of interest.

**INTRODUCTION:** Cartilage degradation associated with osteoarthritis (OA) remains unaddressed due to a lack of an effective targeting drug/gene delivery system<sup>1</sup>. Receptor antagonist of interleukin-1 (IL-1Ra) is a potent disease-modifying agent that effectively blocks IL-1 from binding to its cell receptors and reduces inflammatory cues<sup>2</sup>. Clinical approaches for IL-1Ra gene delivery in OA use adeno-associated viral vectors or synthetic lipid- or polymer-based carriers providing robust transgene expression<sup>3</sup>. However, immunogenicity risks limit their prolonged use, and effective nuclear/cytosolic gene delivery to chondrocytes remains challenging<sup>4</sup>. Exosomes (Exo), on the contrary, are natural, cell-derived lipid vesicles with lower immunogenicity<sup>5</sup>. Yet, their large size (30-200 nm) and negatively charged lipid bilayer impede their diffusion into deep zones of anionic cartilage matrix. To circumvent delivery barriers, we recently surface-engineered Exos by leveraging the negative fixed charge density (FCD) of cartilage using an arginine-rich, short-length cationic peptide carrier (CPC) with a net charge of +14, to confer a cationic charge at the nanoscale<sup>6,7</sup>. These CPC-engineered exosomes (Exo-CPC) exhibit electrostatic interactions with negatively charged glycosaminoglycans (GAGs), enabling full-thickness cartilage penetration (Fig. 1A) and effective delivery of eGFP mRNA to deep-resident chondrocytes in a post-traumatic mouse model of OA<sup>6</sup>. In this work, we leverage these cartilage-targeting Exo-CPC as a carrier to deliver IL-1Ra mRNA (Fig. 1A) and demonstrate the intra-tissue depot effect of gene-loaded Exo-CPC with a single dose to restore IL-1-induced cartilage degradation.

**METHODS:** Exo-CPC was synthesized by a lipid insertion method using DSPE-PEG(2000)-azide lipid conjugated to CPC [RRRR(NNNRRR)<sub>3</sub>R] via copper-free click chemistry<sup>6</sup>. *In vitro* transcribed (IVT) IL-1Ra mRNA was loaded into Exos (EXO<sub>IL-1Ra mRNA</sub>/Exo-CPC<sub>IL-1Ra mRNA</sub>) using Lipofectamine Messenger Max (LMM). mRNA loading was quantified by Qubit; size and ζ-potential were measured using DLS. To evaluate bioactivity, IL-1β (2 ng/mL)-challenged human chondrocyte micromass cultures were treated with 500 ng Exo-CPC<sub>IL-1Ra mRNA</sub>. An equivalent-dose of mRNA-LMM control was used. Media (n=4/group) were collected at 48-h to quantify IL-6 and PGE2 using ELISAs. Targeted gene delivery was assessed in IL-1α-treated human talus cartilage explants (Collin grade 0, 3mm×1mm, n=4/group). After 48 h treatment with 500 ng Exo<sub>IL-1Ra mRNA</sub> and Exo-CPC<sub>IL-1Ra mRNA</sub>, IL-1Ra and PGE2 RNA expression in chondrocytes was assessed by RNAScope. Intra-tissue depot effect of Exo-CPC<sub>IL-1Ra mRNA</sub> was confirmed in human cartilage tissues collected from patients undergoing total knee arthroplasty (TKA; 68-y.o. female-KL grade 3, and 72-y.o. male-KL grade 2). TKA explants (3mm×1mm) received a single dose of 1 μg mRNA containing Exo and Exo-CPC on day-0 with a continuous IL-1β-stimulation (2 ng/mL) every two days. Cumulative GAG release (n=8-10 explants/group) was analyzed over 8 days from culture media and explants. Cartilage retention of IL-1Ra protein was analyzed on day 4 using ELISA. Gene expression (n=3 explants/group) on day 8 was measured using qPCR. Data are presented as mean ± SD. A Kruskal-Wallis with Dunn's multiple comparison test was used. \* indicates p < 0.05.

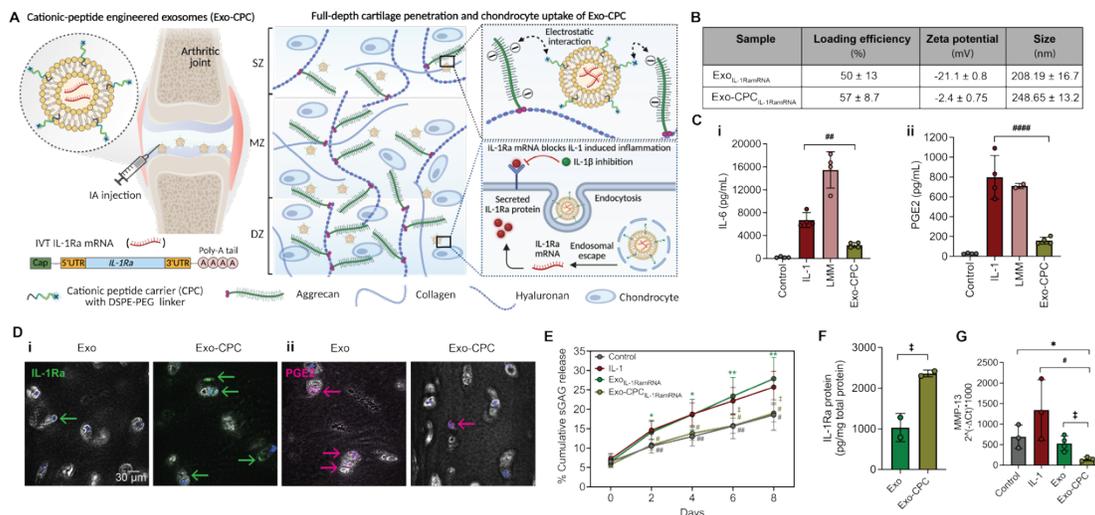
**RESULTS:** Net negative charge of Exos was modified from -21.2 ± 0.8 to -2.4 ± 0.75 mV after surface-conjugation with CPC motifs, with an IL-1Ra mRNA loading efficiency of ~ 57 ± 8.7 % (Fig. 1B). Consistent with our previous study<sup>6</sup>, the size and ζ-potential of Exo and Exo-CPC were unaffected post mRNA-loading. Exo-CPC-mediated delivery of IL-1Ra mRNA in human chondrocyte micromass culture downregulated IL-6 (Fig. 1C-i, ## p < 0.01) and PGE2 levels (Fig. 1C-ii, ### p < 0.0001) relative to IL-1-stimulated cells and LMM condition. RNAScope imaging showed a higher fraction of IL-1Ra-positive chondrocytes in human cartilage treated with Exo-CPC<sub>IL-1Ra mRNA</sub> (45%) than with Exo<sub>IL-1Ra mRNA</sub> (22%) (Fig. 1D-i). Consistently, PGE2 signal was lower in chondrocytes following Exo-CPC<sub>IL-1Ra mRNA</sub>, implying cartilage-targeted delivery (Fig. 1D-ii). A single dose of Exo-CPC<sub>IL-1Ra mRNA</sub> rescued TKA cartilage from significant GAG loss and restored GAG levels to those of control tissue, whereas Exo<sub>IL-1Ra mRNA</sub> failed to suppress GAG release, similar to IL-1β condition (Fig. 1E). On day 4, IL-1Ra protein levels were higher in TKA cartilage treated with Exo-CPC<sub>IL-1Ra mRNA</sub> than with Exo<sub>IL-1Ra mRNA</sub>, confirming its cartilage depot effect (Fig. 1F, † p < 0.05). By day 8, Exo-CPC<sub>IL-1Ra mRNA</sub> suppressed *MMP-13* gene expression compared with Exo<sub>IL-1Ra mRNA</sub>, IL-1β, and control conditions (Fig. 1G).

**DISCUSSION:** This study demonstrates cartilage-targeting of CPC-engineered exosomes, which leverage negative FCD in cartilage and electrostatic interactions with anionic GAGs, to deliver IL-1Ra mRNA effectively to deep-resident chondrocytes than native exosomes. CPC-engineered exosomes created intra-tissue depots and, with a single mRNA dose, mitigated IL-1-induced catabolism of human TKA cartilage over an 8-day culture period. Ongoing work includes further validation of disease-modifying effects in additional human TKA donor tissues, immunohistochemistry, and probing inflammatory signaling by RNA-seq. *In vivo* efficacy of IL-1Ra mRNA-loaded CPC-engineered exosomes will be evaluated in a medial meniscus transection rat model of OA.

**SIGNIFICANCE:** A single dose of CPC-engineered exosomes enables targeted IL-1Ra mRNA delivery to chondrocytes and prevents cartilage degradation. Therefore, CPC-engineered exosomes hold potential to serve as a non-viral, intra-tissue depot-based platform for sustained disease-modifying RNA therapy.

**REFERENCES:** <sup>1</sup>Bajpayee+, Nature Rheum 2017; <sup>2</sup>Mehta+, Arthritis Res Ther 2019; <sup>3</sup>De La Vega+, Sci Transl Med 2025; <sup>4</sup>Uziliene+, Front Bioeng Biotechnol 2020; <sup>5</sup>Selvadoss+, Nanoscale 2024; <sup>6</sup>Zhang+, Small Methods 2024; <sup>7</sup>Pathrikar+ Osteoarthritis Cartilage 2025.

**ACKNOWLEDGMENTS:** NIBIB Trailblazer-R21EB028385-01, NIAMS-P30AR079206, Chicago Center on Musculoskeletal Pain, IUSM IRB 2003626223



**Fig. 1A.** Schematics representing cartilage-targeting of CPC-engineered exosomes and the efficient delivery of IL-1Ra mRNA to deep-residing chondrocytes. SZ: superficial zone; MZ: middle zone; DZ: deep zone. **B.** mRNA loading, size, and ζ-potential of mRNA-loaded Exo and Exo-CPC. **C.** IL-6 and PGE2 levels in IL-1β-induced human chondrocyte micromass cultures. **D.** *In vitro* (i) IL-1Ra (green arrows) and (ii) PGE2 (magenta arrows) RNA expression in IL-1-treated human talus cartilage. **E.** Percent cumulative GAG released to media from IL-1β-induced human TKA cartilage over 8 days after a single-dose treatment of Exo<sub>IL-1Ra mRNA</sub> and Exo-CPC<sub>IL-1Ra mRNA</sub>. **F.** IL-1Ra protein levels retained in IL-1β-induced TKA cartilage tissues on day-4. **G.** Catabolic MMP-13 gene expression in IL-1β-induced TKA cartilage on day 8. \*\*\*\* p < 0.0001, \* p < 0.01, † p < 0.05. \* vs control, # vs IL-1, † vs Exo.