METHODS AND COMPOSITIONS USEFUL FOR MODULATION OF ANGIOGENESIS USING TYROSINE KINASE SRC

Reference to Related Application

This application claims the benefit of U.S. Provisional Application Serial No. 60/087,220 filed May 29, 1998, which is incorporated by reference, as are all references cited herein.

Technical Field

The present invention relates generally to the field of medicine, and relates specifically to methods and compositions for modulating angiogenesis of tissues using the protein tyrosine kinase Src, variants of Src, and nucleic acids encoding them.

Background

Angiogenesis is a process of tissue vascularization that involves the growth of new developing blood vessels into a tissue, and is also referred to as neo-vascularization. The process is mediated by the infiltration of endothelial cells and smooth muscle cells. The process is believed to proceed in any one of three ways: the vessels can sprout from pre-existing vessels, de-novo development of vessels can arise from precursor cells (vasculogenesis), or existing small vessels can enlarge in diameter. Blood et al., Bioch. Biophys. Acta, 1032:89-118 (1990).

Angiogenesis is an important process in neonatal growth, but is also important in wound healing and in the pathogenesis of a large variety of clinical diseases including tissue inflammation, arthritis, tumor growth, diabetic retinopathy, macular degeneration by neovascularization of the retina and like conditions. These clinical manifestations associated with angiogenesis are referred to as angiogenic diseases. Folkman et al., Science, 235:442-447 (1987). Angiogenesis is generally absent in adult or mature tissues, although it does occur in wound healing and in the corpus luteum growth cycle. See, for example, Moses et al., Science, 248:1408-1410 (1990).

It has been proposed that inhibition of angiogenesis would be a useful therapy for restricting tumor growth. Inhibition of angiogenesis has been proposed by (1) inhibition of release of "angiogenic molecules" such as bFGF (basic fibroblast growth factor), (2) neutralization of angiogenic molecules, such as by use of anti-

βbFGF antibodies, (3) use of inhibitors of vitronectin receptor $\alpha_v\beta_3$, and (4) inhibition of endothelial cell response to angiogenic stimuli. This latter strategy has received attention, and Folkman et al., Cancer Biology, 3:89-96 (1992), have described several endothelial cell response inhibitors, including collagenase inhibitor, basement membrane turnover inhibitors, angiostatic steroids, fungal-derived angiogenesis inhibitors, platelet factor 4, thrombospondin, arthritis drugs such as D-penicillamine and gold thiomalate, vitamin D_3 analogs, alpha-interferon, and the like that might be used to inhibit angiogenesis. For additional proposed inhibitors of angiogenesis, see Blood et al., Bioch. Biophys. Acta., 1032:89-118 (1990), Moses et al., Science, 248:1408-1410 (1990), Ingber et al., Lab. Invest., 59:44-51 (1988), and United States Patent Nos. 5,092,885, 5,112,946, 5,192,744, 5,202,352, 5,753,230 and 5,766,591. None of the inhibitors of angiogenesis described in the foregoing references involve the Src proteins.

For angiogenesis to occur, endothelial cells must first degrade and cross the blood vessel basement membrane in a similar manner used by tumor cells during invasion and metastasis formation.

It has been previously reported that angiogenesis depends on the interaction between vascular integrins and extracellular matrix proteins. Brooks et al., Science, 264:569-571 (1994). Furthermore, it was reported that programmed cell death (apoptosis) of angiogenic vascular cells is initiated by the interaction, which would be inhibited by certain antagonists of the vascular integrin $\alpha_v\beta_3$. Brooks et al., Cell, 79:1157-1164 (1994). More recently, it has been reported that the binding of matrix metalloproteinase-2 (MMP-2) to vitronectin receptor ($\alpha_v\beta_5$) can be inhibited using $\alpha_v\beta_5$ antagonists, and thereby inhibit the enzymatic function of the proteinase. Brooks et al., Cell, 85:683-693 (1996).

Summary of the Invention

The present invention is directed to modulation of angiogenesis in tissues by tyrosine kinase Src, also referred to generically herein as Src.

Compositions and methods for modulating angiogenesis in a tissue associated with a disease condition are contemplated. A composition comprising an angiogenesis-modulating amount of a Src protein is administered to tissue to be treated for a disease condition that responds to modulation of angiogenesis. The composition providing the Src protein can contain purified protein, biologically

active protein fragments, recombinantly produced Src protein or protein fragments or fusion proteins thereof, or gene/nucleic acid expression vectors for expressing a Src protein.

Where the Src protein is inactivated or inhibited, the modulation is an inhibition of angiogenesis. Where the Src protein is active or activated, the modulation is a potentiation of angiogenesis.

The tissue to be treated can be any tissue in which modulation of angiogenesis is desirable. For angiogenesis inhibition, it is useful to treat diseased tissue where deleterious neovascularization is occurring. Exemplary tissues include inflamed tissue, solid tumors, metastases, tissues undergoing restenosis, and the like tissues.

For potentiation, it is useful to treat patients with ischemic limbs in which there is poor circulation in the limbs from diabetic or other conditions. Patients with chronic wounds that do not heal and therefore could benefit from the increase in vascular cell proliferation and neovascularization can be treated as well.

Particularly preferred is the use of Src protein containing a modified amino acid sequence as described herein. Several particularly useful modified Src proteins and the expression thereof are described herein.

The present invention also encompasses a pharmaceutical composition for stimulating angiogenesis in a target mammalian tissue comprising a viral or non-viral gene transfer vector containing a nucleic acid and a pharmaceutically acceptable carrier or excipient; said nucleic acid having a nucleic acid segment encoding for a src protein, said src protein having any amino acid residue at codon 527 except tyrosine, serine or threonine.

Also envisioned is a pharmaceutical composition for inhibiting angiogenesis in a target mammalian tissue comprising a viral or non-viral gene transfer vector containing a nucleic acid and a pharmaceutically acceptable carrier or excipient; said nucleic acid having a nucleic acid segment encoding for a src protein having no kinase activity.

Brief Description of the Drawings

In the drawings forming a portion of this disclosure:

FIG. 1 is a cDNA sequence of chicken c-Src which is the complete coding sequence with the introns deleted as first described by Takeya et al., Cell, 32:881-890 (1983). The sequence is accessible through GenBank Accession Number

J00844. The sequence contains 1759 nucleotides with the protein coding portion beginning and ending at the respective nucleotide positions 112 and 1713.

FIG. 2 is the encoded amino acid residue sequence of chicken c-Src of the coding sequence shown in FIG. 1.

FIG. 3 is a cDNA sequence of human c-Src which as first described by Braeuninger et al., Proc. Natl. Acad. Sci., USA, 88:10411-10415 (1991). The sequence is accessible through GenBank Accession Number X59932 X71157. The sequence contains 2187 nucleotides with the protein coding portion beginning and ending at the respective nucleotide positions 134 and 1486.

FIG. 4 is the encoded amino acid residue sequence of human c-Src of the coding sequence shown in FIG. 3.

FIG. 5 illustrates the activation of endogenous Src by bFGF or VEGF as described in Example 4. The top portion of the figure indicates the results of an in vitro kinase assay with the fold activation of endogenous c-Src by either bFGF and VEGF. The bottom portion of the figure is the kinase assay blot probed with an anti-Src antibody as a loading control for equivalent Src and IgG content.

FIG. 6 illustrates the effect of retrovirus-mediated gene expression of c-Src A on angiogenesis in the chick chorioallantoic membrane (CAM) as described in Example 4. Nine-day-old chick CAMs were exposed to RCAS-Src A (active mutated c-Src) or control RCAS-GFP (Green Fluorescent Protein; a fluorescent indicator protein) retroviruses or buffer for 72 h. The level of angiogenesis was quantified as shown in FIG. 6A with representative photomicrographs (4x) in FIG. 6B corresponding to each treatment taken with a stereomicroscope.

FIG. 7 illustrates the retroviral expression of c-Src A in activating vascular MAP kinase phosphorylation. FIG. 7A shows tissue extracts of 10 day-old chick CAMs that had been exposed to VEGF or PMA for 30 minutes or infected with c-Src A retrovirus for 48 hours. NT stands for no treatment. Src was immunoprecipitated from equivalent amounts of total protein extract and subjected to an in vitro immune complex kinase assay using a FAK-GST fusion protein as a substrate, electrophoresed and transferred to nitrocellulose. Aliquots of the above whole tissue lysates were also measured for endogenous ERK phosphorylation by immunoblotting with an anti-phospho-ERK antibody. FIG. 7B shows 10 day old CAMs that were infected with either mock RCAS or RCAS containing SRC A.

After two days, CAMs were dissected, cryopreserved in OCT and sectioned at 4 μm. Sections were immunostained with an anti-phosphorylated ERK antibody (New England Biolabs), washed and detected with a goat anti-rabbit FITC-conjugated secondary antibody. Florescent images were captured on a cooled-CCD camera (Princeton Inst.)

FIG. 8 illustrates the selective requirement for Src activity during VEGF, but not bFGF-induced angiogenesis. Nine day old chick CAMs were exposed to RCAS-Src 251 or control RCAS-GFP retroviruses or buffer for 20 hours and then incubated for an additional 72 hours in the presence or absence of bFGF or VEGF. The level of angiogenesis was quantified FIG. 8A as described above, and representative photomicrographs (6x) were taken with a stereomicroscope as shown in FIG. 8B. FIG. 8C shows a blot probed with an anti-Src antibody to confirm the expression of Src 251 in transfected cells as compared to mock treatments.

FIG. 9 illustrates the results of retroviral delivery of RCAS-Src 251 to human tumors. FIG. 9A is a micrograph that shows human medulloblastoma tumor fragment infected with RCAS-GFP (RCAS-Green Fluorescent Protein) expressing GFP exclusively in the tumor blood vessels (arrowhead) as detected by optical sectioning with a Bio Rad laser confocal scanning microscope (bar=500 μm). FIG. 9B depicts data from tumors treated with topical application of retrovirus, which were allowed to grow for 3 or 6 days after which they were resected and wet weights determined. Data are expressed as the mean change in tumor weight (from the 50 mg tumor starting weight) +/- SEM of 2 replicates. FIG. 9C depicts in representative micrographs, medulloblastoma tumors surgically removed from the embryos (bar=350 μm). The lower panels are high magnification views of each tumor showing the vasculature of each tumor in detail (bar=350 μm). The arrowhead indicates blood vessel disruption in RCAS-Src251-treated tumors.

FIG. 10 is a diagram illustrating a restriction map of the RCASBP (RCAS) vector construct.

Detailed Description of the Invention

A. Definitions

Amino Acid Residue: An amino acid formed upon chemical digestion (hydrolysis) of a polypeptide at its peptide linkages. The amino acid residues

described herein are preferably in the "L" isomeric form. However, residues in the "D" isomeric form can be substituted for any L-amino acid residue, as long as the desired functional property is retained by the polypeptide. NH_2 refers to the free amino group present at the amino terminus of a polypeptide. COOH refers to the free carboxy group present at the carboxy terminus of a polypeptide in keeping with standard polypeptide nomenclature (described in J. Biol. Chem., 243:3552-59 (1969) and adopted at 37 CFR §1.822(b)(2)).

It should be noted that all amino acid residue sequences are represented herein by formulae whose left and right orientation is in the conventional direction of amino-terminus to carboxy-terminus. Furthermore, a dash at the beginning or end of an amino acid residue sequence indicates a peptide bond to a further sequence of one or more amino acid residues.

Polypeptide: refers to a linear array of amino acid residues connected to one another by peptide bonds between the alpha-amino group and carboxy group of contiguous amino acid residues.

Peptide: as used herein refers to a linear array of no more than about 50 amino acid residues connected one to the other as in a polypeptide.

Cyclic peptide: refers to a compound having a ring structure that includes several amide bonds as in a typical peptide. The cyclic peptide can be a "head to tail" homodetic cyclic peptide, or it can contain a heterodetic ring structure in which the ring is closed by disulfide bridges, lactam bridges, thioesters, thioamides, guanidino, and the like linkages.

Protein: refers to a linear array of more than 50 amino acid residues connected one to the other as in a polypeptide.

Fusion protein: refers to a polypeptide containing at least two different polypeptide domains operatively linked by a typical peptide bond ("fused"), where the two domains correspond to peptides no found fused in nature.

Synthetic peptide: refers to a chemically produced chain of amino acid residues linked together by peptide bonds that is free of naturally occurring proteins and fragments thereof.

B. General Considerations

The present invention relates generally to the discovery that angiogenesis is mediated by the tyrosine kinase Src protein, and that angiogenesis can be

modulated by providing either active or inactive Src proteins for potentiating or inhibiting angiogenesis, respectively.

This discovery is important because of the role that angiogenesis, the formation of new blood vessels, plays in a variety of disease processes. Where tissues associated with a disease condition require angiogenesis for tissue growth, it is desirable to inhibit angiogenesis and thereby inhibit the diseased tissue growth. Where injured tissue requires angiogenesis for tissue growth and healing, it is desirable to potentiate or promote angiogenesis and thereby promote tissue healing and growth.

Where the growth of new blood vessels is the cause of, or contributes to, the pathology associated with a diseased tissue, inhibition of angiogenesis reduces the deleterious effects of the disease. By inhibiting angiogenesis, one can intervene in the disease, ameliorate the symptoms, and in some cases cure the disease.

Examples of tissue associated with disease and neovascularization that will benefit from inhibitory modulation of angiogenesis include rheumatoid arthritis, diabetic retinopathy, inflammatory diseases, restenosis, and the like. Where the growth of new blood vessels is required to support growth of a deleterious tissue, inhibition of angiogenesis will reduce the blood supply to the tissue and thereby contribute to reduction in tissue mass based on blood supply requirements. Examples include growth of tumors where neovascularization is a continual requirement in order that the tumor grow beyond a few millimeters in thickness, and for the establishment of solid tumor metastases.

Where the growth of new blood vessels contributes to healing of tissue, potentiation of angiogenesis assists in healing. Examples include treatment of patients with ischemic limbs in which there is poor circulation in the limbs from diabetes or other conditions. Also contemplated for treatment are patients with chronic wounds that do not heal and therefore could benefit from the increase in vascular cell proliferation and neovascularization.

The methods of the present invention are effective in part because the therapy is highly selective for angiogenesis and not other biological processes.

As described earlier, angiogenesis includes a variety of processes involving neovascularization of a tissue including "sprouting", vasculogenesis, or vessel enlargement, all of which angiogenesis processes are effected by Src protein.

With the exception of traumatic wound healing, corpus luteum formation and embryogenesis, it is believed that the majority of angiogenesis processes are associated with disease processes. Accordingly, the present therapeutic methods are selective for the disease and do not have deleterious side effects.

C. Src Proteins

A tyrosine kinase Src protein for use in the present invention can vary depending upon the intended use. The terms "Src protein" or "Src" are used to refer to the various forms of tyrosine kinase Src proteins described herein, either in active or inactive forms.

An "active Src protein" refers to any of a variety of forms of src protein which potentiate angiogenesis. Assays to measure potentiation of angiogenesis are described herein, and are not to be construed as limiting. A protein is considered active if the level of angiogenesis is at least 10% greater, preferably 25% greater, and more preferably 50% greater than a control level where no src is added to the assay system. The preferred assay for measuring potentiation is the CAM assay using RCAS viral vector as described in the Examples in which the angiogenic index is calculated by counting branch points. A preferred active Src protein exhibits tyrosine kinase activity as well. Exemplary active Src proteins are described in the Examples, and include Src-A.

An "inactive Src protein" refers to any of a variety of forms of Src protein which inhibit angiogenesis. Assays to measure inhibition of angiogenesis are described herein, and are not to be construed as limiting. A protein is considered inactive if the level of angiogenesis is at least 10% lower, preferably 25% lower, and more preferably 50% lower than a control level where no exogenous Src is added to the assay system. The preferred assay for measuring inhibition is the CAM assay using RCAS viral vector as described in the Examples in which the angiogenic index is calculated by counting branch points. A preferred inactive Src protein exhibits reduced tyrosine kinase activity as well. Exemplary inactive Src proteins are described in the Examples, and include Src-251.

A Src protein useful in the present invention can be produced in any of a variety of methods including isolation from natural sources including tissue, production by recombinant DNA expression and purification, and the like. Src

protein can also be provided "in situ" by introduction of a gene therapy system to the tissue of interest which then expresses the protein in the tissue.

A gene encoding a Src protein can be prepared by a variety of methods known in the art, and the invention is not to be construed as limiting in this regard. For example, the natural history of Src is well known to include a variety of homologs from mammalian, avian, viral and the like species, and the gene can readily be cloned using cDNA cloning methods from any tissue expressing the protein. A preferred Src for use in the invention is a cellular protein, such as the mammalian or avian homologs designated c-Src. Particularly preferred is human c-Src.

D. Recombinant DNA Molecules and Expression Systems for Expression of a Src Protein

The invention describes several nucleotide sequences of particular use in the present invention. These sequences include sequences which encode a Src protein useful in the invention, and various DNA segments, recombinant DNA (rDNA) molecules and vectors constructed for expression of Src protein.

DNA molecules (segments) of this invention therefore can comprise sequences which encode whole structural genes, fragments of structural genes, and transcription units as described further herein.

A preferred DNA segment is a nucleotide sequence which encodes a Src protein as defined herein, or biologically active fragment thereof,

The amino acid residue sequence and nucleotide sequence of a preferred c-Src is described in the Examples.

A preferred DNA segment codes for an amino acid residue sequence substantially the same as, and preferably consisting essentially of, an amino acid residue sequence or portions thereof corresponding to a Src protein described herein. Representative and preferred DNA segments are further described in the Examples.

The amino acid residue sequence of a protein or polypeptide is directly related via the genetic code to the deoxyribonucleic acid (DNA) sequence of the structural gene that codes for the protein. Thus, a structural gene or DNA segment can be defined in terms of the amino acid residue sequence, i.e., protein or polypeptide, for which it codes.

An important and well known feature of the genetic code is its redundancy. That is, for most of the amino acids used to make proteins, more than one coding nucleotide triplet (codon) can code for or designate a particular amino acid residue. Therefore, a number of different nucleotide sequences may code for a particular amino acid residue sequence. Such nucleotide sequences are considered functionally equivalent since they can result in the production of the same amino acid residue sequence in all organisms. Occasionally, a methylated variant of a purine or pyrimidine may be incorporated into a given nucleotide sequence. However, such methylations do not affect the coding relationship in any way.

A nucleic acid is any polynucleotide or nucleic acid fragment, whether it be a polyribonucleotide of polydeoxyribonucleotide, i.e., RNA or DNA, or analogs thereof. In preferred embodiments, a nucleic acid molecule is in the form of a segment of duplex DNA, i.e, a DNA segment, although for certain molecular biological methodologies, single-stranded DNA or RNA is preferred.

DNA segments are produced by a number of means including chemical synthesis methods and recombinant approaches, preferably by cloning or by polymerase chain reaction (PCR). DNA segments that encode portions of a Src protein can easily be synthesized by chemical techniques, for example, the phosphotriester method of Matteucci et al, J. Am. Chem. Soc., 103:3185-3191, 1981, or using automated synthesis methods. In addition, larger DNA segments can readily be prepared by well known methods, such as synthesis of a group of oligonucleotides that define the DNA segment, followed by hybridization and ligation of oligonucleotides to build the complete segment. Alternative methods include isolation of a preferred DNA segment by PCR with a pair of oligonucleotide primers used on a cDNA library believed to contain members which encode a Src protein.

Of course, through chemical synthesis, any desired modifications can be made simply by substituting the appropriate bases for those encoding the native amino acid residue sequence. This method is well known, and can be readily applied to the production of the various different "modified" Src proteins described herein.

Furthermore, DNA segments consisting essentially of structural genes encoding a Src protein can be subsequently modified, as by site-directed or random mutagenesis, to introduce any desired substitutions.

1. Cloning a Src Gene

A Src gene can be cloned from a suitable source of genomic DNA or messenger RNA (mRNA) by a variety of biochemical methods. Cloning of these genes can be conducted according to the general methods described in the Examples and as known in the art.

Sources of nucleic acids for cloning a Src gene suitable for use in the methods of this invention can include genomic DNA or messenger RNA (mRNA) in the form of a cDNA library, from a tissue believed to express these proteins. A preferred tissue is human lung tissue, although any other suitable tissue may be used.

A preferred cloning method involves the preparation of a cDNA library using standard methods, and isolating the Src-encoding nucleotide sequence by PCR amplification using paired oligonucleotide primers based on the nucleotide sequences described herein. Alternatively, the desired cDNA clones can be identified and isolated from a cDNA or genomic library by conventional nucleic acid hybridization methods using a hybridization probe based on the nucleic acid sequences described herein. Other methods of isolating and cloning suitable src encoding nucleic acids are readily apparent to one skilled in the art.

2. Expression Vectors

A recombinant DNA molecule (rDNA) containing a DNA segment encoding a Src protein can be produced as described herein. In particular, an expressible rDNA can be produced by operatively (in frame, expressibly) linking a vector to a src encoding DNA segment. Thus, a recombinant DNA molecule is a hybrid DNA molecule comprising at least two nucleic acids of a nucleotide sequences not normally found together in nature.

The choice of vector to which the DNA segment is operatively linked depends directly, as is well known in the art, on the functional properties desired, e.g., protein expression, and the host cell to be transformed. A vector suitable for use in practicing the present invention is at least capable of directing the replication, and preferably also expression, of a structural gene included in the vector DNA segments to which it is operatively linked.

Both prokaryotic and eukaryotic expression vectors are familiar to one of ordinary skill in the art of vector construction, and are described by Ausebel, et

al., in Current Protocols in Molecular Biology, Wiley and Sons, New York (1993) and by Sambrook et al., Molecular Cloning: A Laboratory Manual, Cold Spring Harbor Laboratory, (1989). These references also describe many of the general recombinant DNA methods referred to herein.

In one embodiment, a suitable vector includes a procaryotic replicon, i.e., a DNA sequence having the ability to direct autonomous replication and maintenance of the recombinant DNA molecule extrachromosomally in a procaryotic host cell, such as a bacterial host cell, transformed therewith. Such replicons are well known in the art. In addition, those embodiments that include a procaryotic replicon also include a gene whose expression confers drug resistance to a bacterial host transformed therewith. Typical bacterial drug resistance genes are those that confer resistance to ampicillin or tetracycline.

Those vectors that include a procaryotic replicon can also include a procaryotic promoter capable of directing the expression (transcription and translation) of a structural gene in a bacterial host cell, such as E. coli, transformed therewith. A promoter is an expression control element formed by a DNA sequence that permits binding of RNA polymerase and transcription to occur. Promoter sequences compatible with bacterial hosts are typically provided in plasmid vectors containing convenient restriction sites for insertion of a DNA segment of the present invention. Typical of such vector plasmids are pUC8, pUC9, pBR322 and pBR329 available from Biorad Laboratories, (Richmond, CA), pRSET available from Invitrogen (San Diego, CA) and pPL and pKK223 available from Pharmacia, Piscataway, N.J.

Expression vectors compatible with eukaryotic cells, preferably those compatible with vertebrate cells, can also be used to form the recombinant DNA molecules of the present invention. Eukaryotic cell expression vectors are well known in the art and are available from several commercial sources. Typically, such vectors are provided containing convenient restriction sites for insertion of the desired DNA segment. Typical of such vectors are pSVL and pKSV-10 (Pharmacia), pBPV-1/pML2d (International Biotechnologies, Inc.), pTDT1 (ATCC, #31255), pRc/CMV (Invitrogen, Inc.), the preferred vector described in the Examples, and the like eukaryotic expression vectors.

A particularly preferred system for gene expression in the context of this invention includes a gene delivery component, that is, the ability to deliver the gene to the tissue of interest. Suitable vectors are "infectious" vectors such as recombinant DNA viruses, adenovirus or retrovirus vectors which are engineered to express the desired protein and have features which allow infection of preselected target tissues. Particularly preferred is the replication competent avian sarcoma virus (RCAS) described herein.

Mammalian cell systems that utilize recombinant viruses or viral elements to direct expression may be engineered. For example, when using adenovirus expression vectors, the coding sequence of a polypeptide may be ligated to an adenovirus transcription/ translation control complex, e.g., the late promoter and tripartite leader sequence. This chimeric gene may then be inserted into the adenovirus genome by in vitro or in vivo recombination. Insertion in a non-essential region of the viral genome (e.g., region E1 or E3) will result in a recombinant virus that is viable and capable of expressing the polypeptide in infected hosts (e.g., see Logan et al., Proc. Natl. Acad. Sci., USA, 81:3655-3659 (1984)). Alternatively, the vaccinia virus 7.5K promoter may be used (e.g., see, Mackett et al., Proc. Natl. Acad. Sci., USA, 79:7415-7419 (1982); Mackett et al., J. Virol., 49:857-864 (1984); Panicali et al., Proc. Natl. Acad. Sci., USA, 79:4927-4931 (1982)). Of particular interest are vectors based on bovine papilloma virus which have the ability to replicate as extrachromosomal elements (Sarver et al., Mol. Cell. Biol., 1:486 (1981)). Shortly after entry of this DNA into target cells, the plasmid replicates to about 100 to 200 copies per cell. Transcription of the inserted cDNA does not require integration of the plasmid into the host's chromosome, thereby yielding a high level of expression. These vectors can be used for stable expression by including a selectable marker in the plasmid, such as the neo gene. Alternatively, the retroviral genome can be modified for use as a vector capable of introducing and directing the expression of the polypeptide-encoding nucleotide sequence in host cells (Cone et al., Proc. Natl. Acad. Sci., USA, 81:6349-6353 (1984)). High level expression may also be achieved using inducible promoters, including, but not limited to, the metallothionine IIA promoter and heat shock promoters.

Recently, long-term survival of cytomegalovirus (CMV) promoter versus Rous sarcoma virus (RSV) promotor-driven thymidine kinase (TK) gene therapy in nude mice bearing human ovarian cancer has been studied. Cell killing efficacy of adenovirus-mediated CMV promoter-driven herpes simplex virus TK gene therapy was found to be 2 to 10 time more effective than RSV driven therapy. (Tong et al., 1999, Hybridoma 18(1):93-97). The design of chimeric promoters for gene therapy applications, which call for low level expression followed by inducible high-level expression has also been described. (Suzuki et al., 1996, Human Gene Therapy 7:1883-1893).

For long-term, high-yield production of recombinant proteins, stable expression is preferred. Rather than using expression vectors which contain viral origins of replication, host cells can be transformed with a cDNA controlled by appropriate expression control elements (e.g., promoter and enhancer sequences, transcription terminators, polyadenylation sites, etc.), and a selectable marker. As mentioned above, the selectable marker in the recombinant plasmid confers resistance to the selection and allows cells to stably integrate the plasmid into their chromosomes and grow to form foci which in turn can be cloned and expanded into cell lines.

For example, following the introduction of foreign DNA, engineered cells may be allowed to grow for 1-2 days in an enriched media, and then are switched to a selective media. A number of selection systems may be used, including but not limited to the herpes simplex virus thymidine kinase (Wigler et al., Cell, 11:223 (1977)), hypoxanthine-guanine phosphoribosyltransferase (Szybalska et al, Proc. Natl. Acad. Sci., USA, 48:2026 (1962)), and adenine phosphoribosyltransferase (Lowy et al., Cell, 22:817 (1980)) genes, which can be employed in tk^-, $hgprt^-$ or $aprt^-$ cells respectively. Also, antimetabolite resistance-conferring genes can be used as the basis of selection; for example, the genes for dhfr, which confers resistance to methotrexate (Wigler et al., Proc. Natl. Acad. Sci., USA, 77:3567 (1980); O'Hare et al., Proc. Natl. Acad. Sci., USA, 78:1527 (1981); gpt, which confers resistance to mycophenolic acid (Mulligan et al, Proc. Natl. Acad. Sci., USA, 78:2072, (1981)); neo, which confers resistance to the aminoglycoside G-418 (Colberre-Garapin et al, J. Mol. Biol., 150:1 (1981)); and hygro, which confers resistance to hygromycin (Santerre et al, Gene,

30:147 (1984)). Recently, additional selectable genes have been described, namely trpB, which allows cells to utilize indole in place of tryptophan; hisD, which allows cells to utilize histinol in place of histidine (Hartman et al, Proc. Natl. Acad. Sci., USA, 85:804 (1988)); and ODC (ornithine decarboxylase) which confers resistance to the ornithine decarboxylase inhibitor, 2-(difluoromethyl)-DL-ornithine, DFMO (McConlogue L., In: Current Communications in Molecular Biology, Cold Spring Harbor Laboratory ed., (1987)).

The principal vectors contemplated for human gene therapy are derived from retroviral origin. (Wilson, 1997, Clin. Exp. Immunol. 107(Sup. 1):31-32; Bank et al., 1996, Bioessays 18(12):999-1007; Robbins et al., 1998, Pharmacol. Ther. 80(1):35-47). The therapeutic potential of gene transfer and antisense therapy has stimulated the development of many vector systems for treating a variety of tissues. (vasculature, Stephan et al., 1997, Fundam. Clin. Pharmacol. 11(2):97-110; Feldman et al., 1997, Cardiovasc. Res. 35(3):391-404; Vassalli et al., 1997, Cardiovasc. Res. 35(3):459-69; Baek et al., 1998, Circ. Res. 82(3):295-305; kidney, Lien et al., 1997, Kidney Int. Suppl. 61:S85-8; liver, Ferry et al., 1998, Hum Gene Ther. 9(14):1975-81; muscle, Marshall et al., 1998, Curr. Opn. Genet. Dev. 8(3):360-5). In addition to these tissues, a critical target for human gene therapy is cancer, either the tumor itself, or associated tissues. (Runnebaum, 1997, Anticancer Res. 17(4B):2887-90; Spear et al., 1998, J. Neurovirol. 4(2):133-47).

Specific examples of viral gene therapy vector systems readily adaptable for use in the methods of the present invention are briefly described below. Retroviral gene delivery has been recently reviewed by Federspiel and Hughes (1998, Methods in Cell Biol. 52:179-214) which describes in particular, the avian leukosis virus (ALV) retrovirus family (Federspiel et al., Proc. Natl. Acad. Sci., USA, 93:4931 (1996); Federspiel et al., Proc. Natl. Acad. Sci., USA, 91:11241 (1994)). Retroviral vectors, including ALV and murine leukemia virus (MLV) are further described by Svoboda (1998, Gene 206:153-163).

Modified retroviral/adenoviral expression systems can be readily adapted for practice of the methods of the present invention. For example, murine leukemia virus (MLV) systems are reviewed by Karavanas et al., 1998, Crit. Rev. in Oncology/Hematology 28:7-30. Adenovirus expression systems are reviewed by

Von Seggern and Nemerow in Gene Expression Systems (ed. Fernandez & Hoeffler, Academic Press, San Diego, CA, 1999, chapter 5, pages 112-157).

Protein expression systems have been demonstrated to have effective use both in vivo and in vitro. For example, efficient gene transfer to human squamous cell carcinomas by a herpes simplex virus (HSV) type 1 amplicon vector has been described. (Carew et al., 1998, Am. J. Surg. 176:404-408). Herpes simplex virus has been used for gene transfer to the nervous system. (Goins et al., 1997, J. Neurovirol. 3 (Sup. 1):S80-8). Targeted suicide vectors using HSV-TK has been tested on solid tumors. (Smiley et al., 1997, Hum. Gene Ther. 8(8):965-77). Herpes simplex virus type 1 vector has been used for cancer gene therapy on colon carcinoma cells. (Yoon et al., 1998, Ann. Surg. 228(3):366-74). Hybrid vectors have been developed to extend the length of time of transfection, including HSV/AAV (adeno-associated virus) hybrids for treating hepatocytes. (Fraefel et al., 1997, Mol. Med. 3(12):813-825).

Vaccinia virus has been developed for human gene therapy because of its large genome. (Peplinski et al., 1998, Surg. Oncol. Clin. N. Am. 7(3):575-88). Thymidine kinase-deleted vaccinia virus expressing purine nucleoside pyrophosphorylase has been described for use as a tumor directed gene therapy vector. (Puhlman et al., 1999, Human Gene Therapy 10:649-657).

Adeno-associated virus 2 (AAV) has been described for use in human gene therapy, however AAV requires a helper virus (such as adenovirus or herpes virus) for optimal replication and packaging in mammalian cells. (Snoeck et al., 1997, Exp. Nephrol. 5(6):514-20; Rabinowitz et al., 1998, Curr. Opn. Biotechnol. 9(5):470-5). However, in vitro packaging of an infectious recombinant AAV has been described, making this system much more promising. (Ding et al., 1997, Gene Therapy 4:1167-1172). It has been shown that the AAV mediated transfer of ecotropic retrovirus receptor cDNA allows ecotropic retroviral transduction of established and primary human cells. (Qing et al., 1997, J. Virology 71(7):5663-5667). Cancer gene therapy using an AAV vector expressing human wild-type p53 has been demonstrated. (Qazilbash et al., 1997, Gene Therapy 4:675-682). Gene transfer into vascular cells using AAV vectors has also been shown. (Maeda et al., 1997, Cardiovascular Res. 35:514-521). AAV has been demonstrated as a suitable vector for liver directed gene therapy. (Xiao et al., 1998, J. Virol. 72(12):10222-

6). AAV vectors have been demonstrated for use in gene therapy of brain tissues and the central nervous system. (Chamberlin et al., 1998, Brain Res. 793(1-2):169-75; During et al., 1998, Gene Therapy 5(6):820-7). AAV vectors have also been compared with adenovirus vectors (AdV) for gene therapy of the lung and transfer to human cystic fibrosis epithelial cells. (Teramoto et al., 1998, J. Virol. 72(11):8904-12).

Chimeric AdV/retroviral gene therapy vector systems which incorporate the useful qualities of each virus to create a nonintegrative AdV that is rendered functionally integrative via the intermediate generation of a retroviral producer cell. (Feng et al., 1997, Nat. Biotechnology 15(9):866-70; Bilbao et al., 1997, FASEB J 11(8):624-34). This powerful new generation of gene therapy vector has been adapted for targeted cancer gene therapy. (Bilbao et al., 1998, Adv. Exp. Med. Biol. 451:365-74). Single injection of AdV expressing p53 inhibited growth of subcutaneous tumor nodules of human prostrate cancer cells. (Asgari et al., 1997, Int. J. Cancer 71(3):377-82). AdV mediated gene transfer of wild-type p53 in patients with advanced non-small cell lung cancer has been described. (Schuler et al., 1998, Human Gene Therapy 9:2075-2082). This same cancer has been the subject of p53 gene replacement therapy mediated by AdV vectors. (Roth et al., 1998, Semin. Oncol. 25(3 Suppl 8):33-7). AdV mediated gene transfer of p53 inhibits endothelial cell differentiation and angiogenesis in vivo. (Riccioni et al., 1998, Gene Ther. 5(6):747-54). Adenovirus-mediated expression of melanoma antigen gp75 as immunotherapy for metastatic melanoma has also been described. (Hirschowitz et al., 1998, Gene Therapy 5:975-983). AdV facilitates infection of human cells with ecotropic retrovirus and increases efficiency of retroviral infection. (Scott-Taylor, et al., 1998, Gene Ther. 5(5):621-9). AdV vectors have been used for gene transfer to vascular smooth muscle cells (Li et al., 1997, Chin. Med. J.(Engl) 110(12):950-4), squamous cell carcinoma cells (Goebel et al., 1998, Otolarynol Head Neck Surg 119(4):331-6), esophageal cancer cells (Senmaru et al., 1998, Int J. Cancer 78(3):366-71), mesangial cells (Nahman et al., 1998, J. Investig. Med. 46(5):204-9), glial cells (Chen et al., 1998, Cancer Res. 58(16):3504-7), and to the joints of animals (Ikeda et al., 1998, J. Rheumatol. 25(9):1666-73). More recently, catheter-based pericardial gene transfer mediated by AcV vectors has been demonstrated. (March et al., 1999, Clin. Cardiol. 22(1

Suppl 1):I23-9). Manipulation of the AdV system with the proper controlling genetic elements allows for the AdV-mediated regulable target gene expression in vivo. (Burcin et al., 1999. PNAS (USA) 96(2):355-60).

Alphavirus vectors have been developed for human gene therapy applications, with packaging cell lines suitable for transformation with expression cassettes suitable for use with Sindbis virus and Semliki Forest virus-derived vectors. (Polo et al., 1999, Proc. Natl. Acad. Sci., USA, 96:4598-4603). Noncytopathic flavivirus replicon RNA-based systems have also been developed. (Varnavski et al., 1999, Virology 255(2):366-75). Suicide HSV-TK gene containing sinbis virus vectors have been used for cell-specific targeting into tumor cells. (Iijima et al., 1998, Int. J. Cancer 80(1):110-8).

Retroviral vectors based on human foamy virus (HFV) also show promise as gene therapy vectors. (Trobridge et al., 1998, Human Gene Therapy 9:2517-2525). Foamy virus vectors have been designed for suicide gene therapy. (Nestler et al., 1997, Gene Ther. 4(11):1270-7). Recombinant murine cytomegalovirus and promoter systems have also been used as vectors for high level expression. (Manning et al., 1998, J. Virol. Meth. 73(1):31-9; Tong et al., 1998, Hybridoma 18(1):93-7).

Gene delivery into non-dividing cells has been made feasible by the generation of Sendai virus based vectors. (Nakanishi et al., 1998, J. Controlled Release 54(1):61-8).

In other efforts to enable the transformation of non-dividing somatic cells, lentiviral vectors have been explored. Gene therapy of cystic fibrosis using a replication-defective human immunodeficiency virus (HIV) based vector has been described. (Goldman et al., 1997, Human Gene Therapy 8:2261-2268). Sustained expression of genes delivered into liver and muscle by lentiviral vectors has also been shown. (Kafri et al., 1997, Nat. Genet. 17(3):314-7). However, safety concerns are predominant, and improved vector development is proceeding rapidly. (Kim et al., 1998, J. Virol. 72(2):994-1004). Examination of the HIV LTR and Tat yield important information about the organization of the genome for developing vectors. (Sadaie et al., 1998, J. Med. Virol. 54(2):118-28). Thus the genetic requirements for an effective HIV based vector are now better understood. (Gasmi et al., 1999, J. Virol. 73(3):1828-34). Self inactivating vectors, or

conditional packaging cell lines have been described. (for example Zuffery et al., 1998, J. Virol. 72(12):9873-80; Miyoshi et al., 1998, J. Virol. 72(10):8150-7; Dull et al., 1998, J. Virol. 72(11):8463-71; and Kaul et al., 1998, Virology 249(1):167-74). Efficient transduction of human lymphocytes and CD34+ cells by HIV vectors has been shown. (Douglas et al., 1999, Hum. Gene Ther. 10(6):935-45; Miyoshi et al., 1999, Science 283(5402):682-6). Efficient transduction of nondividing human cells by feline immunodeficiency virus (FIV) lentiviral vectors has been described, which minimizes safety concerns with using HIV based vectors. (Poeschla et al., 1998, Nature Medicine 4(3):354-357). Productive infection of human blood mononuclear cells by FIV vectors has been shown. (Johnston et al., 1999, J. Virol. 73(3):2491-8).

While many viral vectors are difficult to handle, and capacity for inserted DNA limited, these limitations and disadvantages have been addressed. For example, in addition to simplified viral packaging cell lines, Mini-viral vectors, derived from human herpes virus, herpes simplex virus type 1 (HSV-1), and Epstein-Barr virus (EBV), have been developed to simplify manipulation of genetic material and generation of viral vectors. (Wang et al., 1996, J. Virology 70(12):8422-8430). Adaptor plasmids have been previously shown to simplify insertion of foreign DNA into helper-independent Retroviral vectors. (1987, J. Virology 61(10):3004-3012).

Viral vectors are not the only means for effecting gene therapy, as several non-viral vectors have also been described. A targeted non-viral gene delivery vector based on the use of Epidermal Growth Factor/DNA polyplex (EGF/DNA) has been shown to result in efficient and specific gene delivery. (Cristiano, 1998, Anticancer Res. 18:3241-3246). Gene therapy of the vasculature and CNS have been demonstrated using cationic liposomes. (Yang et al., 1997, J. Neurotrauma 14(5):281-97). Transient gene therapy of pancreatitis has also been accomplished using cationic liposomes. (Denham et al., 1998, Ann. Surg. 227(6):812-20). A chitosan-based vector/DNA complexes for gene delivery have been shown to be effective. (Erbacher et al., 1998, Pharm. Res. 15(9):1332-9). A non-viral DNA delivery vector based on a terplex system has been described. (Kim et al., 1998, 53(1-3):175-82). Virus particle coated liposome complexes have also been used to

effect gene transfer. (Hirai et al., 1997, Biochem. Biophys. Res. Commun. 241(1):112-8).

Cancer gene therapy by direct tumor injections of nonviral T7 vector encoding a thymidine kinase gene has been demonstrated. (Chen et al., 1998, Human Gene Therapy 9:729-736). Plasmid DNA preparation is important for direct injection gene transfer. (Horn et al., 1995, Hum. Gene Ther. 6(5):656-73). Modified plasmid vectors have been adapted specifically for direct injection. (Hartikka et al., 1996, Hum. Gene Ther. 7(10):1205-17).

Thus, a wide variety of gene transfer/gene therapy vectors and constructs are known in the art. These vectors are readily adapted for use in the methods of the present invention. By the appropriate manipulation using recombinant DNA/molecular biology techniques to insert an operatively linked src (either active or inactive) into the selected expression/delivery vector, many equivalent vectors for the practice of the present invention can be generated.

E. Methods For Modulation of Angiogenesis

The invention provides for a method for the modulation of angiogenesis in a tissue associated with a disease process or condition, and thereby effect events in the tissue which depend upon angiogenesis. Generally, the method comprises administering to the tissue associated with a disease process or condition, a composition comprising an angiogenesis-modulating amount of a Src protein or nucleic acid vector expressing active or inactive Src.

As described herein, any of a variety of tissues, or organs comprised of organized tissues, can support angiogenesis in disease conditions including skin, muscle, gut, connective tissue, joints, bones and the like tissue in which blood vessels can invade upon angiogenic stimuli.

The patient treated according to the present invention in its many embodiments is desirably a human patient, although it is to be understood that the principles of the invention indicate that the invention is effective with respect to all mammals, which are intended to be included in the term "patient". In this context, a mammal is understood to include any mammalian species in which treatment of tissue associated with diseases involving angiogenesis is desirable, particularly agricultural and domestic mammalian species.

Thus the method comprises administering to a patient a therapeutically effective amount of a physiologically tolerable composition containing a Src protein or DNA vector for expressing a Src protein in practicing the methods of the invention.

The dosage ranges for the administration of a Src protein depend upon the form of the protein, and its potency, as described further herein. The dosage amounts are large enough to produce the desired effect in which angiogenesis and the disease symptoms mediated by angiogenesis are ameliorated. The dosage should not be so large as to cause adverse side effects, however, such as hyperviscosity syndromes, pulmonary edema, congestive heart failure, and the like. Generally, the dosage will vary with the age, condition, sex of the patient, and extent of the disease in the patient, and can be readily determined by one of skill in the art. The dosage can also be adjusted by the individual physician in the event of any complication.

A therapeutically effective amount is an amount of Src protein, or nucleic acid encoding for (active or inactive) src protein, sufficient to produce a detectable modulation of angiogenesis in the tissue being treated, ie., an angiogenesis-modulating amount. Modulation of angiogenesis can be measured by CAM assay as described herein, or by other methods known to one skilled in the art.

The Src protein or nucleic acid vector expressing the Src protein can be administered parenterally by injection or by gradual infusion over time. Although the tissue to be treated can typically be accessed in the body by systemic administration, and therefore is most often treated by intravenous administration of therapeutic compositions, other tissues and delivery means are contemplated as well. Thus, compositions of the invention can be administered intravenously, intraperitoneally, intramuscularly, subcutaneously, intracavity, transdermally, and can be delivered by peristaltic means.

The therapeutic compositions containing a Src protein or nucleic acid vector expressing the Src protein can be conventionally administered intravenously, as by injection of a unit dose, for example. The term "unit dose" when used in reference to a therapeutic composition of the present invention refers to physically discrete units suitable as unitary dosage for the subject, each unit containing a

predetermined quantity of active material calculated to produce the desired therapeutic effect in association with the required diluent; i.e., carrier, or vehicle.

In one preferred embodiment the reagent is administered in a single dosage intravenously. Localized administration can be accomplished by direct injection or by taking advantage of anatomically isolated compartments, isolating the microcirculation of target organ systems, reperfusion in a circulating system, or catheter based temporary occlusion of target regions of vasculature associated with diseased tissues.

The compositions are administered in a manner compatible with the dosage formulation, and in a therapeutically effective amount. The quantity to be administered and timing depends on the subject to be treated, capacity of the subject's system to utilize the active ingredient, and degree of therapeutic effect desired. Precise amounts of active ingredient required to be administered depend on the judgement of the practitioner and are peculiar to each individual. However, suitable dosage ranges for systemic application are disclosed herein and depend on the route of administration. Suitable regimes for administration are also variable, but are typified by an initial administration followed by repeated doses at one or more hour intervals by a subsequent injection or other administration. Alternatively, continuous intravenous infusion sufficient to maintain concentrations in the blood in the ranges specified for in vivo therapies are contemplated.

1. Inhibition of Angiogenesis

Inhibition of angiogenesis is important in a variety of diseases, referred to as angiogenic diseases. Such diseases include, but are not limited to, inflammatory disorders such as immune and non-immune inflammation, chronic articular rheumatism and psoriasis, disorders associated with inappropriate or inopportune invasion of vessels such as diabetic retinopathy, neovascular glaucoma, restenosis, capillary proliferation in atherosclerotic plaques and osteoporosis, and cancer associated disorders, such as solid tumors, solid tumor metastases, angiofibromas, retrolental fibroplasia, hemangiomas, Kaposi sarcoma and the like cancers which require neovascularization to support tumor growth.

Thus, methods which inhibit angiogenesis in a tissue associated with a disease condition ameliorates symptoms of the disease and, depending upon the disease, can contribute to cure of the disease. In one embodiment, the invention

contemplates inhibition of angiogenesis, per se, in a tissue associated with a disease condition. The extent of angiogenesis in a tissue, and therefore the extent of inhibition achieved by the present methods, can be evaluated by a variety of methods.

Thus, in one related embodiment, a tissue to be treated is an inflamed tissue and the angiogenesis to be inhibited is inflamed tissue angiogenesis where there is neovascularization of inflamed tissue. In this class the method contemplates inhibition of angiogenesis in arthritic tissues, such as in a patient with chronic articular rheumatism, in immune or non-immune inflamed tissues, in psoriatic tissue and the like.

In another related embodiment, a tissue to be treated is a retinal tissue of a patient with a retinal disease such as diabetic retinopathy, macular degeneration or neovascular glaucoma and the angiogenesis to be inhibited is retinal tissue angiogenesis where there is neovascularization of retinal tissue.

In an additional related embodiment, a tissue to be treated is a tumor tissue of a patient with a solid tumor, a metastases, a skin cancer, a breast cancer, a hemangioma or angiofibroma and the like cancer, and the angiogenesis to be inhibited is tumor tissue angiogenesis where there is neovascularization of a tumor tissue. Typical solid tumor tissues treatable by the present methods include lung, pancreas, breast, colon, laryngeal, ovarian, and the like tissues. Inhibition of tumor tissue angiogenesis is a particularly preferred embodiment because of the important role neovascularization plays in tumor growth. In the absence of neovascularization of tumor tissue, the tumor tissue does not obtain the required nutrients, slows in growth, ceases additional growth, regresses and ultimately becomes necrotic resulting in killing of the tumor.

Stated in other words, the present invention provides for a method of inhibiting tumor neovascularization by inhibiting tumor angiogenesis according to the present methods. Similarly, the invention provides a method of inhibiting tumor growth by practicing the angiogenesis-inhibiting methods.

The methods are also particularly effective against the formation of metastases because (1) their formation requires vascularization of a primary tumor so that the metastatic cancer cells can exit the primary tumor and (2) their establishment in a secondary site requires neovascularization to support growth of the metastases.

In a related embodiment, the invention contemplates the practice of the method in conjunction with other therapies such as conventional chemotherapy directed against solid tumors and for control of establishment of metastases. The administration of angiogenesis inhibitor is typically conducted during or after chemotherapy, although it is preferably to inhibit angiogenesis after a regimen of chemotherapy at times where the tumor tissue will be responding to the toxic assault by inducing angiogenesis to recover by the provision of a blood supply and nutrients to the tumor tissue. In addition, it is preferred to administer the angiogenesis inhibition methods after surgery where solid tumors have been removed as a prophylaxis against metastases.

Insofar as the present methods apply to inhibition of tumor neovascularization, the methods can also apply to inhibition of tumor tissue growth, to inhibition of tumor metastases formation, and to regression of established tumors.

Restenosis is a process of smooth muscle cell (SMC) migration and proliferation into the tissue at the site of percutaneous transluminal coronary angioplasty which hampers the success of angioplasty. The migration and proliferation of SMC's during restenosis can be considered a process of angiogenesis which is inhibited by the present methods. Therefore, the invention also contemplates inhibition of restenosis by inhibiting angiogenesis according to the present methods in a patient following angioplasty procedures. For inhibition of restenosis, the inactivated tyrosine kinase is typically administered after the angioplasty procedure because the coronary vessel wall is at risk of restenosis, typically for from about 2 to about 28 days, and more typically for about the first 14 days following the procedure.

The present method for inhibiting angiogenesis in a tissue associated with a disease condition, and therefore for also practicing the methods for treatment of angiogenesis-related diseases, comprises contacting a tissue in which angiogenesis is occurring, or is at risk for occurring, with a composition comprising a therapeutically effective amount of an inactivated Src protein or vector expressing the protein.

Inhibition of angiogenesis and tumor regression occurs as early as 7 days after the initial contacting with the therapeutic composition. Additional or prolonged

exposure to inactive Src protein is preferable for 7 days to 6 weeks, preferably about 14 to 28 days.

2. Potentiation of Angiogenesis

In cases where it is desirable to promote or potentiate angiogenesis, administration of an active Src protein to the tissue is useful. The routes and timing of administration are comparable to the methods described hereinabove for inhibition.

F. Therapeutic Compositions

The present invention contemplates therapeutic compositions useful for practicing the therapeutic methods described herein. Therapeutic compositions of the present invention contain a physiologically tolerable carrier together with a Src protein or vector capable of expressing a Src protein as described herein, dissolved or dispersed therein as an active ingredient. In a preferred embodiment, the therapeutic composition is not immunogenic when administered to a mammal or human patient for therapeutic purposes.

As used herein, the terms "pharmaceutically acceptable", "physiologically tolerable" and grammatical variations thereof, as they refer to compositions, carriers, diluents and reagents, are used interchangeably and represent that the materials are capable of administration to or upon a mammal without the production of undesirable physiological effects such as nausea, dizziness, gastric upset and the like.

The preparation of a pharmacological composition that contains active ingredients dissolved or dispersed therein is well understood in the art and need not be limited based on formulation. Typically such compositions are prepared as injectable either as liquid solutions or suspensions, however, solid forms suitable for solution, or suspensions, in liquid prior to use can also be prepared. The preparation can also be emulsified or presented as a liposome composition.

The active ingredient can be mixed with excipients which are pharmaceutically acceptable and compatible with the active ingredient and in amounts suitable for use in the therapeutic methods described herein. Suitable excipients are, for example, water, saline, dextrose, glycerol, ethanol or the like and combinations thereof. In addition, if desired, the composition can contain minor amounts of

auxiliary substances such as wetting or emulsifying agents, pH buffering agents and the like which enhance the effectiveness of the active ingredient.

The therapeutic composition of the present invention can include pharmaceutically acceptable salts of any salt-forming components therein. Pharmaceutically acceptable salts include the acid addition salts (formed with the free amino groups of the polypeptide) that are formed with inorganic acids such as, for example, hydrochloric or phosphoric acids, or such organic acids as acetic, tartaric, mandelic and the like. Salts formed with the free carboxyl groups can also be derived from inorganic bases such as, for example, sodium, potassium, ammonium, calcium or ferric hydroxides, and such organic bases as isopropylamine, trimethylamine, 2-ethylamino ethanol, histidine, procaine and the like.

Physiologically tolerable carriers for the active ingredients are well known in the art. Exemplary of liquid carriers are sterile aqueous solutions that contain no materials in addition to the active ingredients and water, or contain a buffer such as sodium phosphate at physiological pH value, physiological saline or both, such as phosphate-buffered saline. Still further, aqueous carriers can contain more than one buffer salt, as well as salts such as sodium and potassium chlorides, dextrose, polyethylene glycol and other solutes.

Liquid compositions can also contain liquid phases in addition to and to the exclusion of water. Exemplary of such additional liquid phases are glycerin, vegetable oils such as cottonseed oil, and water-oil emulsions.

A therapeutic composition contains an angiogenesis-modulating amount of an Src protein of the present invention, or sufficient recombinant DNA expression vector to express an effective amount of Src protein, typically formulated to contain an amount of at least 0.1 weight percent of Src protein per weight of total therapeutic composition. A weight percent is a ratio by weight of Src protein to total composition. Thus, for example, 0.1 weight percent is 0.1 grams of Src protein per 100 grams of total composition. For DNA expression vectors, the amount administered depends on the properties of the expression vector, the tissue to be treated, and the like considerations.

G. Article of Manufacture

The invention also contemplates an article of manufacture which is a labelled container for providing a Src protein of the invention. An article of manufacture comprises packaging material provided with appropriate labeling for the disease condition to be treated and a pharmaceutical agent contained within the packaging material.

The pharmaceutical agent in an article of manufacture is any of the compositions of the present invention suitable for providing a Src protein and formulated into a pharmaceutically acceptable form as described herein according to the disclosed indications. Thus, the composition can comprise a Src protein or a DNA molecule which is capable of expressing a Src protein. The article of manufacture contains an amount of pharmaceutical agent sufficient for use in treating a condition indicated herein, either in unit or multiple dosages.

The packaging material comprises a label which indicates the use of the pharmaceutical agent contained therein, e.g., for treating conditions assisted by the inhibition or potentiation of angiogenesis, and the like conditions disclosed herein. The label can further include instructions for use and related information as may be required for marketing. The packaging material can include container(s) for storage of the pharmaceutical agent.

As used herein, the term packaging material refers to a material such as glass, plastic, paper, foil, and the like capable of holding within fixed means a pharmaceutical agent. Thus, for example, the packaging material can be plastic or glass vials, laminated envelopes and the like containers used to contain a pharmaceutical composition including the pharmaceutical agent.

In preferred embodiments, the packaging material includes a label that is a tangible expression describing the contents of the article of manufacture and the use of the pharmaceutical agent contained therein.

Examples

The following examples relating to this invention are illustrative and should not, of course, be construed as specifically limiting the invention. Moreover, such variations of the invention, now known or later developed, which would be within

the purview of one skilled in the art are to be considered to fall within the scope of the present invention hereinafter claimed.

1. Preparation of c-Src Expression Constructs

For preparing the expression constructs useful in modulating angiogenesis by the methods of the present invention, c-Src cDNA is manipulated and inserted into an expression construct/vector.

The cDNA sequence encoding for wild-type (i.e., endogenous) chicken c-Src is shown in FIG. 1 (SEQ ID NO.:2) with the encoded amino acid residue sequence shown in FIG. 2 (SEQ ID NO.:3). The encoded protein sequence is translated from the cDNA nucleotide positions 112 to 1713. The nucleic acid sequence corresponding to the nucleic acid sequence of human c-Src cDNA (SEQ ID NO.:4) and encoded amino acid residue (SEQ ID NO.:5) sequences are shown respectively in FIGs. 3 and 4. For the human protein sequence, the coding sequence begins at nucleotide position 134 to 1486 of the cDNA.

Wild-type as well as a number of mutated c-Src cDNAs were prepared. Mutated c-Src constructs were prepared by site-directed mutagenesis as described by Kaplan et al., EMBO J., 13:4745-4756 (1994). The mutated c-Src constructs for encoding mutated c-Src proteins for use in the methods of the present invention are described in Kaplan et al., id.. Kaplan et al. describe various mutated c-Src constructs and encoded proteins of useful for the practice of this invention. For example, Kaplan et al. depict several products of chicken c-src alleles in their FIG. 1, including SrcA and Src251.

Two categories of c-Src function to modulate angiogenesis are described. As previously discussed, one category contains Src molecules that increase angiogenesis and thus are considered to be active proteins. Wild-type Src along with various mutations are shown in the present invention to induce angiogenesis. One preferred mutation of wild type c-src which functions in this context with respect to its ability to induce blood vessel growth and therefore increase tumor weight in vivo is the Src A mutant having a point mutation at amino acid (aa) residue position 527 changing tyrosine 527 to phenylalanine. This site is normally a site for negative regulation by the c-Src kinase, referred to as kinase CSK. When CSK phosphorylates aa527 in the wild-type src, the protein is inactivated.

However, in mutated Src A, the regulatory tyrosine converted to phenylalanine thus conferring upon the protein a constitutively (i.e., permanently) active protein not subject to inactivation by phosphorylation.

Mutations in src have also been shown to have the opposite modulatory effect on angiogenesis, inhibiting angiogenesis instead of stimulating it. Such mutations are referred to as inactive src mutations. Proteins having mutation that confer this inhibitory activity are also referred to as dominant negative Src proteins in that they inhibit neovascularization, including that resulting from endogenous activity of Src as well as enhanced Src activity resulting from growth factor stimulation. Thus certain mutations of wild type c-src of the present invention can also function as a dominant negative with respect to their ability to block blood vessel growth, and for example, therefore decrease tumor weight in vivo.

Such preferred inhibitory c-Src protein includes the Src 251 in which only the first 251 amino acids of Src are expressed. This construct lacks the entire kinase domain and is therefore referred to as "kinase dead" src protein. A second construct is the Src (K295M) mutation in which the lysine amino acid residue 295 is mutated into a methionine. This point mutation in the kinase domain prevents ATP binding and also blocks kinase-dependent Src functions related to vascular cell and tumor cell signaling and proliferation.

For example, for the mutation at residue 527, as long as the resultant mutated amino acid residue is not tyrosine, serine, or threonine, the present invention contemplates that the presence of an alternate amino acid at the desired position will result in a Src protein with a desired active, angiogenesis promoting modulatory activity.

With respect to the point mutations, any mutation resulting in the desired inhibitory or stimulatory activity is contemplated for use in this invention. Fusion protein constructs combining the desired src protein (mutation or fragment thereof) with expressed amino acid tags, antigenic epitopes, fluorescent protein, or other such protein or peptides are also contemplated, so long as the desired modulating effect of the src protein is intact.

TABLE I

Src/Mutation	Src Function		Effect on Angiogenesis
c-Src	+	active	stimulates
SrcA (T527F)	+	active	stimulates
Src527(point)	+	active	stimulates
Src251	-	inactive	inhibits
Src (truncate)	-	inactive	inhibits
Src(K295M)	-	inactive	inhibits
Src295 (point)	-	inactive	inhibits

One preferred expression construct for use in the present invention is the RCASBP(A) construct (SEQ ID NO.:1). This expression vector is based on a series of replication competent avian sarcoma viruses with an enhanced Bryan polymerase (BP) for improved titre, and is specific for the A type envelope glycoprotein expressed on normal avian cells (Reviewed in Methods in Cell Biology, 52:179-214 (1997); see also, Hughes et al., 1987, J. Virol. 61:3004-3012; Fekete & Cepko, 1993, Mol. Cellular Biol. 13(4):2604-2613; Itoh et al., 1996, Development 122:291-300; and Stott et al., 1998, BioTechniques 24:660-666). The complete sequence of RCASBP(A) (SEQ ID NO.:1) is given in the attached sequence listing, and a restriction map of the construct is depicted as FIG. 10, referred to herein as RCAS.

The original Src 251 construct was subcloned by Dr. Pam Schwartzberg, at NIH in Dr. Harold Varmus' laboratory. Briefly, cloning of a src cDNA sequence for expression thereof was accomplished by inserting a linker containing Not I-BstB1-Not I restriction sites into a unique Not I site in the 5' end of Src 251. Src has a unique Cla I site at the 3' end. Digestion of Src 251 with BstB1 and Cla I generated a BstB1-ClaI fragment which was then ligated into the Cla I site on RCASBP(A). A BstB1 overhang allows for ligation with a Cla I overhang that will not be recut with Cla I. The src constructs suitable for use in practicing the present invention are readily obtained in the above vector by first digesting the RCAS vector containing Src 251 with Not I and Cla I (in a DAM+ background) to allow for insertion of a similarly digested Src cDNA. Therefore this initial RCASBP(A) construct containing Src 251 was further used to subclone all other

Src constructs as described above and in Kaplan et al. (1994, The EMBO J. 13(20):4745-4756), into RCASBP(A) via a Not I-Cla I fragment generated through the Src 251 construction. To produce the desired c-src mutations in the cDNA, standard site-directed mutagenesis procedures familiar to one of ordinary skill in the art were utilized. PCR primers designed to incorporate the desired mutations were also designed with restriction sites to facilitate subsequent cloning steps. Entire segments of Src encoding nucleic acid sequences are deleted from the nucleic acid constructs through PCR amplification techniques based on the known cDNA sequences of chicken, human and the like homologs of Src and subsequent formation of new constructs.

In one embociment of the invention, the 3' PCR primer used to amplify src nucleic acids also encodes for an in-frame sequence. Use of this primer adds a 9E10-myc epitope tag to the carboxyl terminus of the subsequent Src construct.

The following amino acids were added after amino acid 251 of Src to generate vector constructs containing the 9E10-myc epitope tag: VDMEQKLIAEEDLN (SEQ ID NO.: 6). Two separate PCRs were carried out for each construct and similar results were obtained. All mutant constructs constructed by PCR were also sequenced by PCR to confirm predicted DNA sequence of clones. Wild-type and mutated Src cDNAs for use in the expression systems of the present invention are also available from Upstate Biotech Laboratories, Lake Placid, NY which sells avian as well as human src, and several kinase dead and activated mutated forms.

Alternative expression vectors for use in the expressing the Src proteins of the present invention also include adenoviral vectors as described in US Patent Numbers 4,797,368, 5,173,414, 5,436,146, 5,589,377, and 5,670,488. Alternative methods for the delivery of the Src modulatory proteins include delivery of the Src cDNA with a non-viral vector system as described in US Patent Number 5,675,954 and delivery of the cDNA itself as naked DNA as described in US Patent Number 5,589,466. Delivery of constructs of this invention is also not limited to topical application of a viral vector as described in the CAM assay system below. For example, viral vector preparations are also injected intravenously for systemic delivery into the vascular bed. These vectors are also targetable to sites of increased neovascularization by localized injection of a tumor, as an example.

In vitro expressed proteins are also contemplated for delivery thereof following expression and purification of the selected Src protein by methods useful for delivery of proteins or polypeptides. One such method includes liposome delivery systems, such as described in US Patent Numbers 4,356,167, 5,580,575, 5,542,935 and 5,643,599. Other vector and protein delivery systems are well known to those of ordinary skill in the art for use in the expression and/or delivery of the Src proteins of the present invention.

2. Characterization of the Untreated Chick Chorioallantoic Membrane (CAM)

A. Preparation of the CAM

Angiogenesis can be induced on the chick chorioallantoic membrane (CAM) after normal embryonic angiogenesis has resulted in the formation of mature blood vessels. Angiogenesis has been shown to be induced in response to specific cytokines or tumor fragments as described by Leibovich et al., Nature, 329:630 (1987) and Ausprunk et al., Am. J. Pathol., 79:597 (1975). CAMs were prepared from chick embryos for subsequent induction of angiogenesis and inhibition thereof. Ten day old chick embryos were obtained from McIntyre Poultry (Lakeside, CA) and incubated at 37°C with 60% humidity. A small hole was made through the shell at the end of the egg directly over the air sac with the use of a small crafts drill (Dremel, Division of Emerson Electric Co. Racine WI). A second hole was drilled on the broad side of the egg in a region devoid of embryonic blood vessels determined previously by candling the egg. Negative pressure was applied to the original hole, which resulted in the CAM (chorioallantoic membrane) pulling away from the shell membrane and creating a false air sac over the CAM. A 1.0 centimeter (cm) x 1.0 cm square window was cut through the shell over the dropped CAM with the use of a small model grinding wheel (Dremel). The small window allowed direct access to the underlying CAM.

The resultant CAM preparation was then either used at 6 days of embryogenesis, a stage marked by active neovascularization, without additional treatment to the CAM reflecting the model used for evaluating effects on embryonic neovascularization or used at 10 days of embryogenesis where angiogenesis has subsided. The latter preparation was thus used in this invention

for inducing renewed angiogenesis in response to cytokine treatment or tumor contact as described below.

3. CAM Angiogenesis Assay

A. Angiogenesis Induced by Growth Factors

Angiogenesis has been shown to be induced by cytokines or growth factors.

Angiogenesis was induced by placing a 5 millimeter (mm) X 5 mm Whatman filter disk (Whatman Filter paper No.1) saturated with Hanks Balanced Salt Solution (HBSS, GIBCO, Grand Island, NY) or HBSS containing 2 micrograms/milliliter (μg/ml) recombinant basic fibroblast growth factor (bFGF) or vascular endothelial cell growth factor (VEGF) (Genzyme, Cambridge, MA) on the CAM of either a 9 or 10 day chick embryo in a region devoid of blood vessels and the windows were latter sealed with tape. Other concentrations of growth factors are also effective at inducing blood vessel growth. For assays where inhibition of angiogenesis is evaluated with intravenous injections of antagonists, angiogenesis is first induced with 1-2 ug/ml bFGF or VEGF in fibroblast growth medium. Angiogenesis was monitored by photomicroscopy after 72 hours.

B. Embryonic Angiogenesis

The CAM preparation for evaluating the effect of angiogenesis inhibitors on the natural formation of embryonic neovasculature is the 6 day embryonic chick embryo as previously described. At this stage in development, the blood vessels are undergoing de novo growth and thus provides a useful system for assessing angiogenesis modulation by the Src proteins of the present invention. The CAM system is prepared as described above with the exception that the assay is performed at embryonic day 6 rather than at day 9 or 10.

4. Modulation of Angiogenesis as Measured in the CAM Assay

To assess the effect of Src proteins on angiogenesis, the following assays were performed on 10 day old chick CAM preparations. Five μg of RCAS constructs prepared as described in Example 1 were transfected into the chicken immortalized fibroblast line, DF-1 (gift of Doug Foster, U. of Minn.). This cell line as well as primary chick embryo fibroblasts were capable of producing virus, however the DF-1 cell line produced higher titres. Viral supernatants were collected from subconfluent DF-1 producer cell lines in serum free CLM media [composition: F-10 media base supplemented with DMSO, folic acid, glutamic acid, and MEM

vitamin solution]. Thirty-five ml of viral supernatant were concentrated by ultracentrifugation at 4°C for 2 hours at 22,000 rpm. These concentrated viral pellets were resuspended in 1/100 the original volume in serum-free CLM media, aliquoted and stored at -80°C. The titre was assessed by serial dilution of a control viral vector having a nucleotide sequence encoding green fluorescent protein (GFP), referred to as RCAS-GFP, infection on primary chick embryo fibroblasts that were incubated for 48-72 hours. The titres of viral stock that were obtained following concentration routinely exceeded 10^8 I.u./ml. For the CAM assay using the viral stocks, cortisone acetate soaked Whatman filter disks 6 mm in diameter were prepared in 3 mg/ml cortisone acetate for 30 minutes in 95% ethanol. The disks were dried in a laminar flow hood and then soaked on 20 μl of viral stock per disk for 10 minutes. These disks were applied to the CAM of 9 or 10 day chick embryos and sealed with cellophane tape and incubated at 37°C for 18-24 hr. Then either mock PBS or growth factors were added at a concentration of 5 μg/ml to the CAM in a 20 μl volume of the appropriate virus stock as an additional boost of virus to the CAM tissue. After 72 hours, the CAMs were harvested and examined for changes in the angiogenic index as determined by double blind counting of the number of branch points in the CAM underlying the disk. For kinase assays, the tissue underlying the disk was harvested in RIPA, homogenized with a motorized grinder and Src immunoprecipitated from equivalent amounts of total protein and subjected to an in vitro kinase assay using a FAK-GST fusion protein as a substrate. For the immunofluorescence studies, CAM tissue underlying the disks were frozen in OCT, a cryopreservative, sectioned at 4 μm, fixed in acetone for 1 minute, incubated in 3% normal goat serum for 1 hour, followed by an incubation in primary rabbit anti-phosphorylated ERK antibody as described previously (Eliceiri et al., J. Cell Biol., 140:1255-1263 (1998), washed in PBS and detected with a fluorescent secondary antibody.

A. Activation of Endogenous Src by bFGF or VEGF

To assess the effects of growth factors on Src activity in modulating angiogenesis, the following assays were performed. Tissue extracts of 10 day old chick CAMs that had been exposed to bFGF or VEGF (2 μg/ml) for 2 hours were lysed. Endogenous Src was immunoprecipitated from equivalent amounts of total protein and subjected to an in vitro immune complex kinase assay using a FAK-

GST fusion protein as a substrate, electrophoresed and transferred to nitrocellulose.

The results of the assay are shown in FIG. 5 where the increase in Src activity is evident in the increased density of the gel with either bFGF or VEGF treatment as compared to untreated (mock) samples that are indicative of baseline Src activity in the CAM assay. Both bFGF and VEGF resulted in approximately a 2 fold increase of endogenous Src activity present in the CAM. The above kinase assay blot was also probed with an anti-Src antibody as a loading control for equivalent Src and IgG content.

B. Effect of Retrovirus-Mediated Gene Expression of Src A on Angiogenesis in the Chick CAM

The following assay was performed to assess the effect of mutated Src proteins on angiogenesis in the CAM preparation. For the assay, 9 day old chick CAMs were exposed to RCAS-Src A or RCAS-GFP expressing retroviruses or buffer for 72 hour following the protocol described above.

The results of this assay are shown in FIG. 6A where the level of angiogenesis was quantified as described above. Representative photomicrographs (4x) were taken with a stereomicroscope as shown in FIG. 6B. Baseline endogenous Src activity has an angiogenic index of approximately 50. In contrast, CAMs treated with retroviral vector-expressed RCAS-Src A having a point mutation at amino acid residue position 527 from a tyrosine to a phenylalanine resulted in an enhancement (induction) of angiogenesis of an angiogenic index of approximately 90. The enhancement of Src-A mediated angiogenesis is also evident in the photographs shown in FIG. 6B.

C. Retroviral Expression of Src A Activates Vascular MAP Kinase Phosphorylation

The effect of Src A as compared to growth factors VEGF and PMA on vascular MAP kinase phosphorylation was also assessed following the assay procedures described above and herein. Tissue extracts of 10 day old chick CAMs exposed to VEGF or PMA (another mitogen at a comparable concentration) for 30 minutes were compared to those infected with Src A-expressing retrovirus for 48 hours. Src was than immunoprecipitated from equivalent amounts of total protein extract and subjected to an in vitro immune complex kinase assay using a

FAK-GST fusion protein as a substrate, electrophoresed and transferred to nitrocellulose.

The results of this assay are shown in FIG. 7A where untreated CAMs (NT) exhibit base-line endogenous Src-mediated vascular MAP kinase phosphorylation. Both VEGF and PMA resulted in an approximate 2 fold increase over baseline. In contrast, Src A enhanced the activity approximately 5 to 10 fold over that seen with untreated samples.

Aliquots of the above whole tissue lysates were also measured for endogenous ERK phosphorylation by immunoblotting with an anti-phospho-ERK antibody as shown in FIG. 7B. For this assessment, 10 day old CAMs were infected with either mock RCAS or RCAS that expresses SRC A. After two days, CAMs were dissected, cryopreserved in OCT and sectioned at 4 μm. Sections were immunostained with an anti-phosphorylated ERK antibody (New England Biolabs), washed and detected with a goat anti-rabbit FITC-conjugated secondary antibody. Fluorescent images were captured on a cooled-CCD camera (Princeton Inst.). The photomicrographs indicate enhanced immunofluorescence with Src A-treated preparations compared to mock controls.

D. Selective Requirement for Src Activity During VEGF, but Not bFGF-Induced Angiogenesis

To assess the effect of Src modulatory activity on growth factor induced angiogenesis, the following assays were performed. Nine day old chick CAMs were exposed to the retroviral vector preparation that expressed the dominant negative Src mutation referred to as Src 251 or Src K295M as previously described. RCAS-Src 251 or control RCAS-GFP retroviruses or buffer CAMS were treated for 20 hours and then incubated for an additional 72 hours in the presence or absence of bFGF or VEGF.

The level of angiogenesis, quantified as described above, is shown in FIG. 8A. Representative photomicrographs (6x), shown in FIG. 8B, were taken with a stereomicroscope. FIG. 8C illustrates a blot probed with an anti-Src antibody to confirm the expression of Src 251 in transfected cells as compared to mock treatments.

The results of the assays described above indicate that both bFGF and VEGF treated CAMS in the presence of RCAS-GFP cont ols induced angiogenesis over

the Src-mediated baseline angiogenesis seen with mock or untreated CAM preparations. The expressed dominant negative mutant Src 251 was effective at inhibiting VEGF-induced angiogenesis back to baseline levels while not effective at inhibiting bFGF-mediated angiogenesis. The photomicrographs shown in FIG. 8B pictorially confirm the data shown in FIG. 8A. Thus, retrovirally expressed Src 251 is an effective angiogenesis inhibitor, when angiogenesis is induced with VEGF.

Applications of the Src proteins of this invention with other angiogenesis models as described in the Examples below are contemplated in the present invention.

5. Regression of Tumor Tissue Growth With Src Modulators as Measured by In Vivo Rabbit Eye Model Assay

The effect of Src modulators on growth factor-induced angiogenesis can be observed in naturally transparent structures as exemplified by the cornea of the eye. New blood vessels grow from the rim of the cornea, which has a rich blood supply, toward the center of the cornea, which normally does not have a blood supply. Stimulators of angiogenesis, such as bFGF, when applied to the cornea induce the growth of new blood vessels from the rim of the cornea. Antagonists of angiogenesis, applied to the cornea, inhibit the growth of new blood vessels from the rim of the cornea. Thus, the cornea undergoes angiogenesis through an invasion of endothelial cells from the rim of the cornea into the tough collagen-packed corneal tissue which is easily visible. The rabbit eye model assay therefore provides an in vivo model for the direct observation of stimulation and inhibition of angiogenesis following the implantation of compounds directly into the cornea of the eye.

A. In Vivo Rabbit Eye Model Assay

1) Angiogenesis Induced by Growth Factors

Angiogenesis is induced in the in vivo rabbit eye model assay with growth factors bFGF or VEGF and is described in the following sections.

a. Preparation of Hydron Pellets Containing Growth Factor and Monoclonal Antibodies

Hydron polymer pellets containing growth factor are prepared as described by D'Amato, et al., Proc. Natl. Acad. Sci., USA, 91:4082-

4085 (1994). The individual pellets contain 650 ng of the growth factors separately bound to sucralfate (Carafet, Marion Merrell Dow Corporation) to stabilize the growth factor and ensure its slow release into the surrounding tissue. In addition, hydron pellets are prepared containing a desired Src-expressing retrovirus as previously described. The pellets are cast in specially prepared Teflon pegs that have a 2.5 mm core drilled into their surfaces. Approximately 12 ul of casting material is placed into each peg and polymerized overnight in a sterile hood. Pellets are then sterilized by ultraviolet irradiation. Effects of Src proteins are then assessed as previously described.

6. In Vivo Regression of Tumor Tissue Growth With Src Modulators As Measured by Chimeric Mouse:Human Assay

An in vivo chimeric mouse:human model is generated by replacing a portion of skin from a SCID mouse with human neonatal foreskin. The in vivo chimeric mouse:human model is prepared essentially as described in Yan, et al., J. Clin. Invest., 91:986-996 (1993). Briefly, a 2 cm^2 square area of skin is surgically removed from a SCID mouse (6-8 weeks of age) and replaced with a human foreskin. The mouse is anesthetized and the hair removed from a 5 cm^2 area on each side of the lateral abdominal region by shaving. Two circular graft beds of 2 cm^2 are prepared by removing the full thickness of skin down to the fascia. Full thickness human skin grafts of the same size derived from human neonatal foreskin are placed onto the wound beds and sutured into place. The graft is covered with a Band-Aid which is sutured to the skin. Micropore cloth tape is also applied to cover the wound.

The M21-L human melanoma cell line or MDA 23.1 breast carcinoma cell line (ATCC HTB 26; $\alpha_v\beta_3$ negative by immunoreactivity of tissue sections with mAb LM609), are used to form the solid human tumors on the human skin grafts on the SCID mice. A single cell suspension of 5 x 10^6 M21-L or MDA 23.1 cells is injected intradermally into the human skin graft. The mice are then observed for 2 to 4 weeks to allow growth of measurable human tumors.

After a measurable tumor is established, retrovirus preparations of the present invention or PBS is injected into the mouse tail vein. Following a 2-3 week period, the tumor is excised and analyzed by weight and histology. The effect of expressed Src proteins of the present invention on the tumors is then assessed.

7. In Vitro Regression of Human Tumor Tissue Growth With Src Modulators As Measured by CAM Assay

Tumor growth depends on angiogenesis (Folkman, 1992; Weidner et al., 1991; Brooks et al., 1994b). In fact, recent reports suggest that tumor growth is susceptible to the anti-angiogenic effects of VEGF receptor antagonists (Kim et al., 1993). Therefore, we examined whether suppression of angiogenesis by delivery of kinase-deleted Src 251 would influence the growth of a human medulloblastoma (DAOY), a highly angiogenic tumor known to produce VEGF and very little bFGF (data not shown).

The 3 and 6 day DAOY medulloblastoma tumor growth assays were performed in the chick CAM essentially as previously described (Brooks et al., 1994). 5 x 10^6 DAOY cells cultured in RPMI 1640 containing 10% fetal calf serum were washed an seeded on the CAM of a 10 day embryo to produce DAOY tumor fragments. After 7 days 50 mg tumor fragments were dissected and reseeded on another 10 day embryo and incubated for another 3 or 6 days with the topical application (25μl) of either control RCAS-GFP retrovirus, RCAS-Src 251, or mock treatment. Using the whole tissue confocal imaging of infected tumors as a guide we were able to determine that there was significant expression of the RCAS constructs around and within the tumor fragment with this topical approach. Tumor resections and weighing were performed in a double blind manner removing only the easily definable solid tumor mass (Brooks et al., 1994). The wet tumor weights after 3 or 6 days were compared with initial weight and the percent change of tumor weight determined for each group.

These tumors readily grow on the CAM and produces active angiogenesis (FIG. 9) allowing us to selectively target the avian-derived tumor vasculature by using an avian-specific RCAS retrovirus.

FIG. 9 depicts results that show retroviral delivery of RCAS-Src 251 to human tumors growing on the chick CAM reverses tumor growth. FIG. 9A shows human medulloblastomas that were grown on the CAM of chick embryos as described above. Retrovirus containing RCAS-GFP or RCAS-Src 251 was topically applied to preestablished tumors of greater than 50 mg. A representative micrograph of a medulloblastoma tumor fragment infected with RCAS-GFP expressing GFP reveals exclusive expression in the tumor blood vessels

(arrowhead) as detected by optical sectioning with a Bio Rad laser confocal scanning microscope (bar=500μm). FIG. 9B shows results from tumors treated as above that were allowed to grow for 3 or 6 days after which they were resected and wet weights determined. Data are expressed as the mean change in tumor weight (from the 50 mg tumor starting weight) +/- SEM of 2 replicates. RCAS-Src 251 had a significant impact on tumor growth after 3 days (*, $P<0.002$) and 6 days (**, $P<0.05$). FIG. 9C shows representative stereomicrographs of medulloblastoma tumors surgically removed from the embryos were taken with an Olympus stereomicroscope (bar=350μm). (Lower panel) A high magnification micrograph of each tumor showing the vasculature of each tumor in detail (bar=350μm). The arrowhead indicates blood vessel disruption in RCAS-Src251-treated tumors.

The results show that delivery of RCAS containing Src 251 to preestablished medulloblastomas resulted in selective viral expression in the tumor-associated blood vessels (FIG. 9A) and this ultimately led to the regression of these tumors within the span of six days (FIG. 9B). Importantly, the tumor-associated blood vessels in animals treated with virus containing Src 251 were severely disrupted and fewer in number compared to the tumor vessels in control animals (FIG. 9C). The fact that RCAS-GFP infected tumors showed GFP localization only in the tumor vasculature suggests that the anti-tumor effects observed with retrovirally delivered Src 251 were due to its anti-angiogenic properties.

The foregoing examples and the accompanying description are illustrative, and are not be taken as limiting. The present invention also is not to be limited in scope by the cell line deposited, since the deposited embodiment is intended as a single illustration of one aspect of the invention. Any cell line that is functionally equivalent is within the scope of this invention. The deposit of material does not constitute an admission that the written description herein contained is inadequate to enable the practice of any aspect of the invention, including the best mode thereof, nor is it to be construed as limiting the scope of the claims to the specific illustration that it represents. Indeed, various modifications of the invention in addition to those shown and described herein will become apparent to those skilled in the art from the foregoing description and fall within the scope of the appended claims.

What Is Claimed Is:

1. An article of manufacture comprising packaging material and a pharmaceutical composition contained within said packaging material, wherein said pharmaceutical composition is capable of modulating angiogenesis in a tissue associated with a disease condition, wherein said packaging material comprises a label which indicates that said pharmaceutical composition can be used for treating disease conditions by modulating angiogenesis, and wherein said pharmaceutical composition comprises a Src protein or an oligonucleotide having a nucleotide sequence capable of expressing said protein.

2. The article of manufacture of claim 1 wherein said Src protein is an active Src protein and said modulating potentiates angiogenesis.

3. The article of manufacture of claim 2 wherein said active Src protein is Src A.

4. The article of manufacture of claim 2 wherein said tissue has poor circulation.

5. The article of manufacture of claim 1 wherein said tyrosine kinase Src protein is an inactive Src protein and said modulating inhibits angiogenesis.

6. The article of manufacture of claim 5 wherein said inactive Src protein is Src 251 or Src K295M.

7. The article of manufacture of claim 5 whercin said tissue is inflamed and said condition is arthritis or rheumatoid arthritis.

8. The article of manufacture of claim 5 wherein said tissue is a solid tumor or solid tumor metastasis.

9. The article of manufacture of claim 8 wherein said administering is conducted in conjunction with chemotherapy.

10. The article of manufacture of claim 5 wherein said tissue is retinal tissue and said condition is retinopathy, diabetic retinopathy or macular degeneration.

11. The article of manufacture of claim 5 wherein said tissue is at the site of coronary angioplasty and said condition is restenosis.

12. The article of manufacture of claim 1 wherein said administering comprises intravenous, transdermal, intrasynovial, intramuscular, or oral administration.

13. The article of manufacture of claim 1 wherein said administering comprises a single dose intravenously.

14. The article of manufacture of claim 1 wherein said pharmaceutical composition further comprises a liposome.

15. The article of manufacture of claim 1 wherein said pharmaceutical composition comprises a viral expression vector capable of expressing said nucleotide sequence.

16. The article of manufacture of claim 1 wherein said pharmaceutical composition comprises an non-viral expression vector capable of expressing said nucleotide sequence.

17. A use of a Src protein or a nucleotide sequence capable of expressing said protein for the preparation of a pharmaceutical composition for modulating angiogenesis in a tissue associated with a disease condition.

18. The use of claim 17 wherein said Src protein is an active Src protein and said modulating potentiates angiogenesis.

19. The use of claim 18 wherein said active Src protein is Src A.

20. The use of claim 18 wherein said tissue has poor circulation.

21. The use of claim 17 wherein said Src protein is an inactive Src protein and said modulating inhibits angiogenesis.

22. The use of claim 21 wherein said inactive Src protein is Src 251 or Src K295M.

23. The use of claim 21 wherein said tissue is inflamed and said condition is arthritis or rheumatoid arthritis.

24. The use of claim 21 wherein said tissue is a solid tumor or solid tumor metastasis.

25. The use of claim 24 wherein said administering is conducted in conjunction with chemotherapy.

26. The use of claim 21 wherein said tissue is retinal tissue and said condition is retinopathy, diabetic retinopathy or macular degeneration.

27. The use of claim 21 wherein said tissue is at the site of coronary angioplasty and said tissue is at risk for restenosis.

28. The use of claim 17 wherein said administering comprises intravenous, transdermal, intrasynovial, intramuscular, or oral administration.

29. The use of claim 17 wherein said administering comprises a single dose intravenously.

30. The use of claim 17 wherein said pharmaceutical composition further comprises a liposome.

31. The use of claim 17 wherein said pharmaceutical composition comprises an retroviral expression vector capable of expressing said nucleotide sequence.

32. The use of claim 17 wherein said pharmaceutical composition comprises an non-viral expression vector capable of expressing said nucleotide sequence.

33. A pharmaceutical composition for stimulating angiogenesis in a target mammalian tissue comprising a viral gene transfer vector containing a nucleic acid and pharmaceutically acceptable carrier or excipient; said nucleic acid having a nucleic acid segment encoding for a src protein, said src protein having any amino acid residue at codon 527 except for tyrosine, serine or threonine.

34. A pharmaceutical composition for stimulating angiogenesis in a target mammalian tissue comprising a non-viral gene transfer vector containing a nucleic acid and pharmaceutically acceptable carrier or excipient; said nucleic acid having a nucleic acid segment encoding for a src protein and said src protein having any amino acid residue at codon 527 except tyrosine, serine or threonine.

35. A pharmaceutical composition for inhibiting angiogenesis in a target mammalian tissue comprising a viral gene transfer vector containing a nucleic acid and pharmaceutically acceptable carrier or excipient; said nucleic acid having a nucleic acid segment encoding for a src protein having no kinase activity.

36. A pharmaceutical composition for inhibiting angiogenesis in a target mammalian tissue comprising a non-viral gene transfer vector containing a nucleic acid

and pharmaceutically acceptable carrier or excipient; said nucleic acid having a nucleic acid segment encoding for a src protein, said src protein having no kinase activity.

37. A pharmaceutical composition for stimulating angiogenesis in a target mammalian tissue comprising a therapeutic amount of a src protein in a pharmaceutically acceptable carrier or excipient; said src protein having any amino acid residue at codon 527 except tyrosine, serine or threonine.

38. A pharmaceutical composition for inhibiting angiogenesis in a target mammalian tissue comprising a a src protein in a pharmaceutically acceptable carrier or excipient; said src protein having no kinase activity.