

Lab Resource: Stem Cell Line

Generation of a KLF15 homozygous knockout human embryonic stem cell line using paired CRISPR/Cas9n, and human cardiomyocytes derivation



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ABSTRACT

Krueppel-like factor 15 (KLF15) is abundantly expressed in liver, kidney, and muscle, including myocardium. In the adult heart KLF15 is important to maintain homeostasis and to repress hypertrophic remodeling. We generated a homozygous hESC KLF15 knockout (KO) line using paired CRISPR/Cas9n. KLF15-KO cells maintained full pluripotency and differentiation potential as well as genomic integrity. We demonstrated that KLF15-KO cells can be differentiated into morphologically normal cardiomyocytes turning them into a valuable tool for studying human KLF15-mediated mechanisms resulting in human cardiac dysfunction.

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Resource Table

| | |
|------------------------------------|---|
| Unique stem cell line identifier | ESIBle002-A-1 |
| Alternative name of stem cell line | HES2-KLF15-KO |
| Institution | Institute of Pharmacology and Toxicology, University Medical Center Goettingen, Germany |
| Contact information of distributor | Laura C. Zelarayán, laura.zelarayan@med.uni-goettingen.de |
| Type of cell line Origin | ESC Human ESC line HES2, Embryonic Stem Cell International, Singapore (ESIBle002-A) |
| Additional origin info | Age: N/A Sex: female Ethnicity if known: N/A |
| Cell source | ESC |
| Method of reprogramming | Not applicable |
| Associated disease | Unaffected |
| Gene/locus | KLF15, 3q21.3 |
| Method of modification | CRISPR/Cas9n |
| Gene correction | No |
| Name of transgene or resistance | Not applicable |
| Inducible/constitutive system | Not applicable |
| Date archived/stock date | Oct 2016 |

(continued)

| | |
|--|--|
| Unique stem cell line identifier | ESIBle002-A-1 |
| Cell line repository/bank Ethical approval | Not applicable German Stem Cell Act by the Robert-Koch-Institute to Wolfram-H. Zimmermann, permit #12, reference number: 1710-79-1-4-16 |

Resource utility

KLF15 is required for normal heart homeostasis and becomes down-regulated upon cardiac hypertrophy in mice and human patients (Fisch et al., 2007; Noack et al., 2012). The HES-KLF15-KO line was generated to study the pathological mechanisms triggered by KLF15 deletion in human cardiomyocyte 2D and 3D *in vitro* models.

Resource details

The transcription factor KLF15 regulates diverse cellular processes and is mainly expressed in liver, kidney, skeletal and cardiac muscle. Particularly in the adult heart it is essential to maintain normal cardiac function (Fisch et al., 2007; Noack et al., 2012) and regulates cell proliferation, hypertrophy, and lipid metabolism (Haldar et al., 2012). Importantly, KLF15 is downregulated in human and rodent cardiomyopathies, suggesting an evolutionary conserved mechanism. To explore its role in human cardiomyocytes, we deleted KLF15 function by generating a

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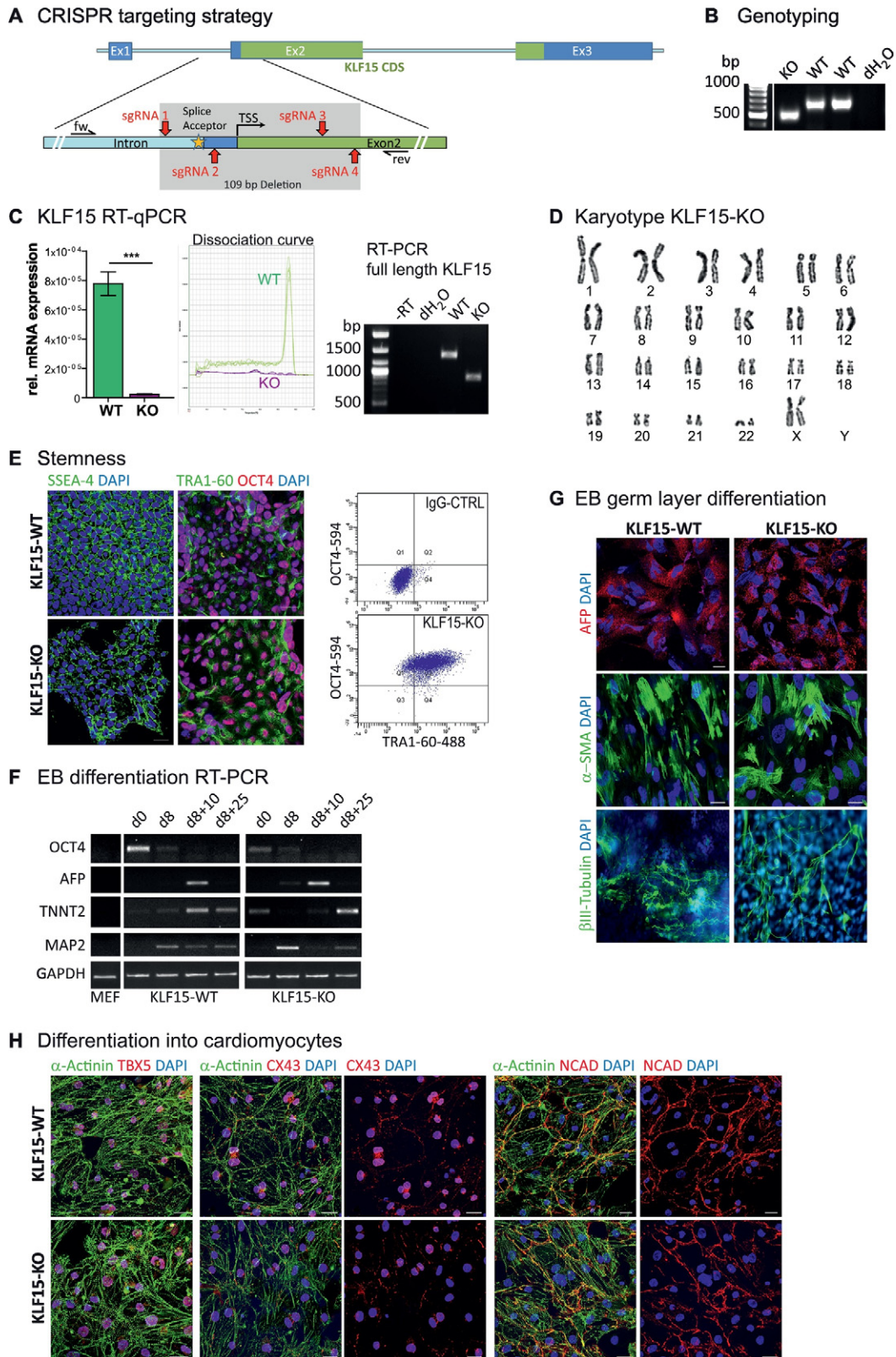


Fig. 1. Generation of the human homozygous embryonic stem cell line KLF15-knockout (KO). (A) Illustration of CRISPR/Cas9 targeting strategy for KLF15 locus. SgRNAs are indicated in red. (B) Genotyping PCR confirming the KO allele using primers (fw and rev) indicated in A. (C) RT-PCR showing the truncated transcript in the KLF15-KO line. (D) G-banding karyotype analysis of the KLF15-KO line. (E) Pluripotency assessment of KLF15-KO and -WT lines by immunofluorescence of OCT4, TRA1-60, SSEA-4 and flow cytometry of OCT4 and TRA1-60. (F and G) RT-PCR and immunofluorescence analysis of embryoid bodies (EBs) showing endodermal (AFP); mesodermal (*TNNI2*, α -SMA); and ectodermal (*MAP2*, β III-Tubulin) differentiation in KLF15-KO and -WT lines. (H) Immunofluorescence of α -Sarcomeric-Actinin, gap junction protein Connexin-43 (CX43), cell adhesion component N-Cadherin (NCAD), and transcription factor TBX5 in 2D cardiomyocytes differentiation in KLF15-KO line. Scale bar 20 μ m.

homozygous hESC KLF15-KO line. We used a double-paired CRISPR/Cas9-D10A nickase (Cas9n) gene editing approach to minimize potential off-target effects. To target the genomic locus of *KLF15*, we designed four sgRNAs with a cutting offset of 128 bp including the splice acceptor and the transcription start site (TSS) (Fig. 1A). HES2 cells were nucleofected with all four sgRNAs expressing plasmids, also containing Cas9n and puromycin resistance. Cells were selected with puromycin and seeded at very low density to allow colony growth from single cells. After PCR genotyping (Fig. 1B, primer sites shown in Fig. 1A) and sequencing, positive colonies (KLF15-KO) were expanded and cryopreserved. Nucleofected cells having wild-type *KLF15* (KLF15-WT) locus served as controls. The lines were authenticated by STR analysis and tested negative for mycoplasma.

Due to the lack of reliable antibodies, the homozygous knockout was verified by reverse transcription and qPCR analyses of different *KLF15* locus regions. This revealed the anticipated absence of transcripts encoding for KLF15 ($n = 8$ different passages). *GAPDH* was equally expressed and used for normalization. RT-PCR confirmed the truncation of the *KLF15* transcript (Fig. 1C).

Genomic integrity was demonstrated by standard G-banding karyotype analysis of the KO line (Fig. 1D). Pluripotency was assessed by immunofluorescence using the stemness markers OCT4, TRA1-60, SSEA-4, and by flow cytometry showing 99.3% OCT4 and 88.1% TRA1-60 positive cells (Fig. 1E). Spontaneous differentiation capacity into all three germ layers was tested by formation of embryoid bodies (EBs) in the KLF15-KO and -WT line. This was demonstrated by marker expression on mRNA- and protein level of α -Feto-Protein (AFP, endodermal); cardiac TroponinT and α -Smooth Muscle Actin (*TNNT2*, α -SMA, mesodermal); and Microtubule-Associated Protein 2 (*MAP2*) as well as β III-Tubulin (ectodermal) at different stages (Fig. 1F and G).

Finally, we investigated the suitability of the KLF15-KO line for studies in cardiomyocytes. We performed directed 2D differentiation followed by lactate selection and obtained spontaneously beating cardiomyocytes (videos provided as supplemental data). The KLF15-KO and -WT cells showed comparable expression of the cardiac markers α -Sarcomeric-Actinin, gap junction protein Connexin-43 (CX43), cell adhesion component N-Cadherin (NCAD), and transcription factor TBX5 (Fig. 1H).

In summary, we generated a homozygous KLF15-KO hESC line with normal karyotype and full pluripotency. KLF15-KO cells have the capacity to differentiate into cardiomyocytes, indicating that KLF15 is not essential for their development as shown previously in mice. Moreover, we showed that the KLF15-KO line has the potential to generate all

three germ layers. Since KLF15 is important for the homeostasis of several organs, the KLF15-KO line represents a valuable tool for *in vitro* translational studies and disease modelling.

1. Materials and methods

1.1. Cell culture

The human embryonic stem cell line HES2 (Embryonic Stem Cell International, Singapore) was cultured in TeSR-E8 (StemCell Technologies) in Matrigel pre-coated flasks under standard conditions (37 °C, 5% CO₂). Cells were passaged using 0.5 mmol/L EDTA and TeSR-E8 with 10 μ mol/L ROCK inhibitor Y27632 (Stemgent).

1.2. Mycoplasma detection

Regular testing for mycoplasma was performed with the MycoAlert-PLUS Mycoplasma detection Kit (Lonza) according to manufacturer's instruction. Ratios < 1 were considered as mycoplasma-free.

1.3. Gene targeting and clonal selection

CRISPR sgRNAs targeting the transcription start site (TSS) of human *KLF15* were designed and cloned into modified pX335 containing GFP-T2A-puromycin cassette and SpCas9-D10A nickase (Zhang et al., 2014).

2×10^6 HES2 were electroporated with 1 μ g per sgRNA/Cas9n plasmid using the Human Stem Cell Nucleofector Kit 1 and the Nucleofector 2b device, program B16 (Lonza). After 24 h, cells were selected with 0.4 μ g/mL puromycin for 1 day. After colony formation, halves colonies were manually picked and subjected to genotyping; the rest were maintained in culture. Positive colonies were expanded and cryopreserved (Table 1).

1.4. Genotyping and sequence analysis

Genomic DNA was isolated using the NucleoSpin Tissue kit. PCR genotyping was performed using Phusion polymerase (ThermoFisher) and 5% DMSO. PCR products were analyzed on agarose gels, extracted with NucleoSpin Gel and PCR Clean-Up, and sequenced at SeqLab Goettingen. Primer sequences are listed in Table 2.

Table 1

Detailed instructions for identification of the human homozygous embryonic stem cell line KLF15-KO line.

| Classification | Test | Result | Data |
|-------------------------------------|--|---|--------------------------------------|
| Morphology Phenotype | Photography | Normal | Not shown, but available with author |
| | Immunocytochemistry | Assess staining of pluripotency markers OCT4, SSEA-4, TRA1-60 | Fig. 1 panel E |
| Genotype | Flow cytometry | Assess antigen levels & cell surface markers OCT4: 99% TRA1-60: 88% | Fig. 1 panel E |
| | Karyotype (G-banding) | 46, XX Resolution 400 | Fig. 1 panel D |
| Identity | Microsatellite PCR (mPCR) | Not performed | |
| | STR analysis | 21 loci were tested with PowerPlex 21 PCR Kit; matched | Submitted in archive with journal |
| Mutation analysis (if applicable) | Sequencing | Homozygous, deletion | Supplementary Fig. 1 |
| Microbiology and virology | Southern Blot OR WGS | Not performed | |
| | Mycoplasma | Tested by bioluminescence Result: negative | Not shown, but available with author |
| Differentiation potential | Embryoid body formation OR Teratoma formation OR Scorecard | Embryoid body formation, expression of AFP, α -SMA, cTNT, β III-Tubulin, and Microtubule Associated Protein 2 (MAP2) | Fig. 1 panel F and G |
| Donor screening (optional) | HIV 1 + 2 Hepatitis B, Hepatitis C | N/A | |
| Genotype additional info (optional) | Blood group genotyping | N/A | |
| | HLA tissue typing | N/A | |

Table 2
Detailed information for antibodies and primers.

| Antibodies used for immunocytochemistry/flow-cytometry | | | |
|--|--|----------|--|
| | Antibody | Dilution | Company Cat # and RRID |
| Pluripotency Markers | Mouse anti-OCT4-Alexa-Fluor®647 | 1:100 | BD Biosciences, Cat# 560329, RRID: AB_1645318 |
| | Mouse anti-TRA1-60-Alexa-Fluor®488 | 1:100 | BD Biosciences, Cat# 560173, RRID: AB_1645379 |
| | Mouse anti-SSEA-4 | 1:200 | Abcam, Cat# ab16287, RRID: AB_778073 |
| Differentiation Markers | Mouse anti- α -SMA | 1:500 | Sigma-Aldrich, Cat# A2547, RRID: AB_476701 |
| | Rabbit anti-AFP | 1:100 | Dako, Cat# A0008, RRID: AB_2650473 |
| | Mouse anti- β III-Tubulin | 1:500 | BAbCo, Cat# MMS-435P, RRID: AB_2313773 |
| | Mouse anti- α -Actinin (sarcomeric) | 1:500 | Sigma-Aldrich, Cat# A7811, RRID: AB_476766 |
| | Rabbit anti-Connexin-43 | 1:200 | Sigma-Aldrich, Cat# C6219, RRID: AB_476857 |
| | Rabbit anti-N-Cadherin | 1:100 | Santa Cruz, Cat# sc-7939, RRID: AB_647794 |
| | Rabbit anti-TBX5 | 1:20 | Sigma-Aldrich, Cat# HPA008786, RRID: AB_10601720 |
| Secondary antibodies | Goat anti-mouse IgG-Alexa Fluor®488 | 1:250 | Invitrogen, Cat# A11001, RRID: AB_2534069 |
| | Goat anti-rabbit IgG-Alexa Fluor®594 | 1:250 | Invitrogen, Cat# R37117, RRID: AB_2556545 |
| Primers | | | |
| Pluripotency marker | Target | | Forward/reverse primer (5'–3') |
| | OCT4-fw | | GACACAAATGAAAATCTCAGGAGA |
| Differentiation markers | OCT4-rev | | TTCTGGCGCCGGTTACAGAACCA |
| | AFP-fw | | ACTCCAGTAAACCTGGTGTG |
| | AFP-rev | | GAATCTGCAATGACAGCCTCA |
| | TNNT2-fw | | GACAGAGCGGAAAAGTGGGA |
| | TNNT2-rev | | TGAAGGAGGCCAGGCTCTAT |
| | MAP2-fw | | CCACTGAGATTAAGGATCA |
| House-keeping gene | MAP2-rev | | GGCTTACTTTGCTTCTCTGA |
| | GAPDH-fw2 | | AGAGGCAGGGATGATGTTCT |
| | GAPDH-rev2 | | TCTGCTGATGCCCCATGTT |
| qPCR KO validation | KLF15-SA-fw | | TGCCCAAGTTCAGCCGC |
| | KLF15-SA-rev | | GCGTGGCTGGGACAATAGG |
| | KLF15-FL-fw | | GGCGTGGCCCAAGTTC |
| | KLF15-FL-rev | | TTCAGGGCGTTTCAGTTCA |
| | GAPDH-fw | | AAGGCTGTGGCAAGGTCATC |
| DNA genotyping & sequencing | GAPDH-rev | | GCGTCAAAGTGGAGGAGTGG |
| | KLF15-fw | | CAGAGAGCCTCTCGCGCA |
| | KLF15-rev | | GCCTGGGACAATAGGAAGTC |

1.5. RNA isolation and qPCR analysis

Total RNA was isolated using the NucleoSpin RNA kit including DNase treatment. cDNA were synthesized with Oligo (dT)₂₀ primer and M-MLV reverse transcriptase (Promega). qPCR analyses were performed with 1/10 of cDNA and GoTaq qPCR SYBR Green Master Mix (Promega) on a 7900-HT Real-time cyler (Applied Biosystems). Copy numbers were calculated with the relative standard curve method using the SDS2.4 software. All reactions were run in triplicates and normalized to *GAPDH*. Primer sequences are listed in [Table 2](#).

1.6. Karyotyping

Standard G-banding (0.02% Giemsa stain, Sigma-Aldrich) of >10 metaphase spreads/line were analyzed using Case Data Manager 6.0 software on an Axio Imager M2 microscope (Zeiss).

1.7. Embryoid body (EB) differentiation

Mouse embryonic fibroblast (MEF)-plated stem cells were dispersed into small clumps with collagenase IV and cultured in suspension for 1 day. For spontaneous differentiation, the formed EBs were cultured in suspension for 1 week in differentiation medium (IMDM, 20% FCS, 2 mmol/L L-glutamine, 1 × NEAA, 450 μ mol/L thioglycerol). EBs at day 8 were plated on 0.1% gelatin-coated dishes and cultured up to 25 days in differentiation medium.

1.8. Immunocytochemistry

Cells and EBs at different stages were fixed with 4% PFA, permeabilized, blocked and incubated with the indicated antibodies (listed

in [Table 2](#)). Nuclei were counterstained with 0.2 ng/mL DAPI. Coverslips were mounted with VectaShield mounting medium (VECTOR Laboratories). Images were acquired with a LSM 710 NLO confocal microscope (Zeiss).

1.9. Flow cytometry analysis

Cells were fixed with 4% PFA, washed in PBS, strained (70 μ m), blocked and permeabilized. Fluorophore-conjugated primary antibodies (listed in [Table 2](#)) were incubated in blocking buffer with 5 μ g/mL Hoechst 33342; cells were washed and resuspended in PBS. Analysis was performed with a LSRII flow cytometer and FACSDiva software, version 6.1.3 (BD).

1.10. Differentiation into cardiomyocytes

Cardiomyocytes were differentiated according to the protocol from (Tiburcy et al., 2017). Briefly, stem cells were cultured in basal medium (RPMI, 2% B27, 200 μ mol/L L-ascorbic acid, 1 mmol/L Na-pyruvate, 100 U/mL penicillin, 100 μ g/mL streptomycin). For mesodermal induction 9 ng/mL Activin A (R&D systems), 1 μ mol/L CHIR99021, 5 ng/mL BMP4, and 5 ng/mL β -FGF (all Stemgent) were added for 3 days. For cardiac differentiation 5 μ mol/L IWP4 (Stemgent) was added for days 4–13, followed by metabolic selection medium (RPMI without glucose and glutamine, 2.2 mmol/L Na-lactate, 100 μ mol/L β -mercaptoethanol, 100 U/mL penicillin, 100 μ g/mL streptomycin) for 5 days.

Supplementary data to this article can be found online at <http://dx.doi.org/10.1016/j.scr.2017.07.007>.

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