



## Therapeutic approaches targeting the prion receptor LRP/LR

Chantal Zuber, Heike Ludewigs, Stefan Weiss

### ► To cite this version:

Chantal Zuber, Heike Ludewigs, Stefan Weiss. Therapeutic approaches targeting the prion receptor LRP/LR. *Veterinary Microbiology*, 2007, 123 (4), pp.387. <10.1016/j.vetmic.2007.04.005>. <hal-00532238>

**HAL Id: hal-00532238**

**<https://hal.science/hal-00532238v1>**

Submitted on 4 Nov 2010

**HAL** is a multi-disciplinary open access archive for the deposit and dissemination of scientific research documents, whether they are published or not. The documents may come from teaching and research institutions in France or abroad, or from public or private research centers.

L'archive ouverte pluridisciplinaire **HAL**, est destinée au dépôt et à la diffusion de documents scientifiques de niveau recherche, publiés ou non, émanant des établissements d'enseignement et de recherche français ou étrangers, des laboratoires publics ou privés.



HAL Authorization

## Accepted Manuscript

Title: Therapeutic approaches targeting the prion receptor LRP/LR

Authors: Chantal Zuber, Heike Ludewigs, Stefan Weiss

PII: S0378-1135(07)00175-7

DOI: doi:10.1016/j.vetmic.2007.04.005

Reference: VETMIC 3652

To appear in: *VETMIC*



Please cite this article as: C. Zuber, H. Ludewigs and S. Weiss, Therapeutic approaches targeting the prion receptor LRP/LR, *Veterinary Microbiology* (2007), doi:10.1016/j.vetmic.2007.04.005

This is a PDF file of an unedited manuscript that has been accepted for publication. As a service to our customers we are providing this early version of the manuscript. The manuscript will undergo copyediting, typesetting, and review of the resulting proof before it is published in its final form. Please note that during the production process errors may be discovered which could affect the content, and all legal disclaimers that apply to the journal pertain.

## Therapeutic approaches targeting the prion receptor LRP/LR

Chantal Zuber, Heike Ludewigs and Stefan Weiss\*

Laboratorium für Molekulare Biologie – Genzentrum – Institut für Biochemie der Ludwig-  
Maximilians-Universität München, Munich, Germany

Corresponding author at:

Laboratorium für Molekulare Biologie – Genzentrum – Institut für Biochemie der Ludwig-  
Maximilians-Universität München, Munich, Germany

Tel.: +49 89 2180 76987; fax: +49 89 2180 76999

*E-mail address:* [weiss@lmb.uni-muenchen.de](mailto:weiss@lmb.uni-muenchen.de) (Stefan Weiss)

### Abstract

Transmissible spongiform encephalopathies known as prion diseases are a group of fatal neurodegenerative disorders that affect both humans and animals. The generally accepted principle of the disease is that the conversion of the cellular prion protein (PrP<sup>c</sup>) into the disease associated isoform PrP<sup>Sc</sup> leads to spongiform degeneration of the brain and amyloid plaque formation. Until now no therapy leading to potential alleviation or even cure of the disease exists. It is important to develop therapeutic approaches for the treatment of TSEs since these infections are inevitably fatal and, especially in the case of vCJD, they affect youngsters. Besides current conventional therapeutic strategies, this review summarizes new therapeutic tools targeting the prion receptor LRP/LR.

27 *Key words:* Bovine spongiform encephalopathy; 37kDa/67kDa laminin receptor; prion;  
28 transmissible spongiform encephalopathy; therapy

29

## 1. Introduction

Prion diseases or TSEs are neurological disorders associated with the aggregation of a pathologic isoform of a host-encoded prion protein (PrP). Conversion of the cellular prion protein (PrP<sup>c</sup>) into the disease-associated form PrP<sup>Sc</sup> leads to conformational changes resulting in aggregation and accumulation. Deposition of this abnormal protein takes place mainly in the brain and the lymphoreticular system, accompanied with neuronal vacuolation (spongiosis) and neuronal death. After extremely long incubation times, affected individuals show progressive neurological symptoms terminating in death. Conventional therapeutic approaches use anti-prion compounds which can prolong incubation times but do not lead to a cure. It has been demonstrated that prion propagation *in vitro* needs the laminin receptor (Leucht et al., 2003). Approaches downregulating LRP/LR are a promising alternative strategy for the treatment of prion diseases.

## 2. Prion diseases in humans and animals

Prion diseases involve rapid neurological decline, accompanied by neuronal loss and spongiform changes caused by accumulation of the aggregated and misfolded prion protein. The most common type of human prion diseases, termed Creutzfeld-Jakob disease (CJD), can be classified into four categories: sporadic (sCJD), inherited/familial (fCJD), iatrogenic (iCJD) and variant (vCJD). Whereas it has been suggested that the latter results from ingestion/consumption of BSE-contaminated food (Bruce et al., 1997), familial disorders (fCJD) are the inheritance of autosomal-dominant mutations within the *Prn-p* locus. Transplantation of tissues or injection of hormones originating from individuals suffering from CJD or the use of contaminated surgical instruments result in the iatrogenic form of CJD. Gerstmann-Sträussler-Scheinker syndrome (GSS), fatal familial insomnia (FFI), its sporadic form (sFI) and kuru are other human prion diseases.

Animal TSEs have been observed in different species: Bovine spongiform encephalopathy (BSE) in cattle, scrapie in sheep and goat, chronic wasting disease (CWD) in cervids such as deer, elk or captive mule and feline spongiform encephalopathy (FSE) in cats or mink spongiform encephalopathy (TME). In addition, some exotic diseases were observed including exotic ungulate encephalopathy (EUE) and primate spongiform encephalopathy (PSE). Transmission of BSE to pigs has been experimentally proven (Wells et al., 2003). Recently, new forms of TSEs with unusual characteristics e.g. an atypical scrapie case (Nor98) (Benestad et al., 2003) have been discovered. Apart from the existing species barrier, the different modes of transmission are not yet understood.

### 3. Prions and different forms of prion proteins

The term prion was defined by Stanley Prusiner as a “small proteinaceous particle that resists inactivation by procedures which modify nucleic acids”, suggesting that a new agent exists beside the commonly known pathogenic organisms such as bacteria, virus or fungi (Prusiner, 1982). The infectious “agent”, the prion, and the exact infectious mechanism for prion disorders is just as little understood as the mechanism by which they kill neurons.

PrP<sup>c</sup> is a ubiquitous membrane-bound glycoprotein attached to the cell surface by a glycosylphosphatidylinositol (GPI) anchor, expressed in many tissues and cell types. Its conversion leads to the disease-associated form PrP<sup>Sc</sup>, which exhibits a higher  $\beta$ -sheet content correlating with a high tendency to form aggregates. PrP<sup>Sc</sup> is characterized as insoluble and partially resistant to proteases (Cohen and Prusiner, 1998). Digestion of PrP<sup>c</sup> with proteases results in the truncated form PrPres (a 27-30kDa fragment) demonstrating insolubility in aqueous and organic solvents as well as in non-ionic detergents. Additionally, it is completely resistant to proteases. PrP<sup>Sc</sup> and PrP27-30 both have the tendency to form amyloid fibrils.

#### 4. The 37kDa/67kDa LRP/LR as the receptor for PrP<sup>c</sup>

In a yeast two-hybrid screen we identified the 37kDa laminin receptor precursor (LRP) as an interaction partner for the prion protein (Rieger et al., 1997). Further *in vitro* studies on neuronal and non-neuronal cells proved that both the 37kDa LRP and the 67kDa high affinity laminin receptor function as the receptor for the cellular prion protein (Gauczynski et al., 2001). Direct and indirect heparan sulphate proteoglycane (HSPG)-dependent binding domains on LRP/LR and on PrP have been identified suggesting that HSPGs act as co-factors or co-receptors for PrP<sup>c</sup> (Hundt et al., 2001). It has been suggested that the 37kDa LRP is the precursor of the 67kDa form which was first isolated 1983 from melanoma cells due to its high binding capacity to laminin (Rao et al., 1983). The relationship between the 37kDa precursor form and the mature 67kDa isoform is still unknown. Regarding the function of LRP/LR, the 37kDa LRP appears to be a multifunctional protein involved in the translational machinery (Auth and Brawerman, 1992) and has also been identified as a ribosome-associated protein termed p40 (Makrides et al., 1988). LRP has also been localized in the nucleus, where it is closely associated with nuclear structures (Sato et al., 1996) and binds to DNA through connections with histones H2A, H2B and H4 (Kinoshita et al., 1998). The 37kDa/67kDa LRP/LR has been described as a receptor for laminin, elastin and carbohydrates (Ardini et al., 1998), as well as a receptor for Venezuelan equine encephalitis virus (VEE) (Ludwig et al., 1996), Sindbis virus (Wang et al., 1992) and Dengue virus (Tio et al., 2005). In addition, studies have been carried out in order to detect the isoforms that are present in the central nervous system and that bind PrP. Several maturation states of the receptor were identified, including a 44kDa, 60kDa, 67kDa and a 220kDa form. All of these isoforms were able to bind PrP, suggesting a physiological role for the laminin receptor/PrP interaction in the brain (Simoneau et al., 2003). Although LRP consists of a

transmembrane domain (amino acid residue 86-101, (Castronovo et al., 1991)) it is abundant in the cytoplasm (Romanov et al., 1994). In mammalian cells both the 37kDa LRP and the 67kDa LR are present in plasma membrane fractions (Gauczynski et al., 2001).

## 5. The role of LRP/LR in PrP<sup>Sc</sup> propagation

LRP/LR not only acts as a receptor for the cellular prion protein but also for the infectious PrP<sup>Sc</sup> and PrP27-30, an N-terminal truncated version of PrP<sup>Sc</sup> (Gauczynski et al., 2006). The importance of LRP/LR in PrP<sup>Sc</sup> propagation was verified using a polyclonal anti-LRP/LR antibody termed W3 which was able to block and prevent the binding of PrP<sup>Sc</sup> and to clear scrapie-infected neuroblastoma cells (ScN2a) from PrP<sup>Sc</sup> (Leucht et al., 2003).

LRP/LR-dependent binding of PrP<sup>c</sup> and PrP<sup>Sc</sup> to the cell surface (either alone or together with other co-factors) is accompanied by internalisation which is thought to occur in clathrin-coated pits. After this receptor-mediated endocytosis the conversion of PrP<sup>c</sup> molecules into the disease-associated form probably takes place in endosomes, lysosomes or endolysosomes. Heparan sulphates also play an essential role in prion uptake and cell infection (Horonchik et al., 2005) suggesting that the LRP/LR and heparan sulphates act presumably in synergy for PrP<sup>Sc</sup> binding and internalisation.

The fact that LRP/LR is present in higher amounts in several organs and tissues of scrapie-infected mice and hamsters suggests a correlation between LRP/LR levels and PrP<sup>Sc</sup> propagation (Rieger et al., 1997). Furthermore, expression studies revealed distribution of the laminin receptor in the intestinal epithelial/brush border confirming that the prion protein uptake and therefore the infection is mediated and supported by this receptor (Shmakov et al., 2000). After oral exposure, TSE agents accumulate in lymphoid tissue, spleen, lymph nodes, tonsils, appendices and Peyer's patches. For this reason prion particles have to cross the intestinal epithelial barrier. Besides the proposition that M-cells are responsible for the uptake

of prions (Heppner et al., 2001) has also been suggested that enterocytes are involved in this process, due to the fact that bovine prions are rapidly endocytosed in the presence of LRP/LR (Morel et al., 2005). By preincubating the human enterocytes with the polyclonal anti-LRP/LR antibody, endocytosis of PrP<sup>BSE</sup> was reduced.

Distribution studies in adult rats revealed that the 67kDa LR form is greater in brain regions classically associated with prion-related neurodegeneration, whereas the 37kDa form was detected in a subclass of interneurons known to be particularly sensitive to abnormal prion accumulation and cell death during the early stages of CJD (Baloui et al., 2004).

## 6. Conventional therapeutic strategies for the treatment of TSEs

In recent years, various studies gave evidence that substantial neuropathological changes (e.g. nerve cell degeneration) already occur prior to the onset of symptoms and might be related to PrP<sup>Sc</sup> accumulation. Accordingly, any effective intervention must aim to start directly after inoculation. Unfortunately, no diagnostic tests are available to detect the disease prior to the onset of symptoms, except for individuals carrying pathogenic mutations within the *Prn-p* gene. Inhibition of PrP<sup>Sc</sup> formation is the most studied target and can be achieved through (i) inhibition of PrP<sup>c</sup> synthesis or prevention of its transport to the cell surface, (ii) stabilization of the PrP<sup>c</sup> structure to make its conformational change unfavourable, (iii) destruction of PrP<sup>Sc</sup> aggregates, (iv) reversion of PrP<sup>Sc</sup> to a protease-sensitive form, (v) inhibition of the prion protein receptor(s).

A series of compounds efficiently interfere with PrP<sup>Sc</sup> accumulation, such as Congo red (Ingrosso et al., 1995) and analogs (Demaimay et al., 1997), certain cyclic tetrapyrroles (Priola et al., 2000) and sulphated polyanions. Although many other compounds have been identified, only flupirtine, an analgetic, had beneficial effects on cognitive function for human CJD patients (Otto et al., 2004). The anthracycline 4'-iodo-4'-deoxy-doxorubicin (IDX) was

able to delay clinical signs of the disease and prolong the survival time in scrapie-infected hamsters (Tagliavini et al., 1997). It was also shown that quinacrine reduces the protease resistance of PrP peptide aggregates and is able to inhibit the *in vitro* conversion of the normal prion protein (PrP<sup>c</sup>) to the abnormal form (PrP<sup>Sc</sup>) (Barret et al., 2003). Chlorpromazine was reported to increase incubation time in mice after intracerebral, but not intraperitoneal, injection (Roikhel et al., 1984), but was less effective in cell culture than quinacrine (Korth et al., 2001). Unfortunately, most substances that inhibit PrP<sup>Sc</sup> formation show only significant effects when administered long before the clinical onset of the disease. Since no effective therapy for clinically affected TSE patients is available these diseases are inevitably fatal.

PrP-specific antibodies, a promising alternative tool in TSE treatment, counteract prion propagation both *in vitro* and *in vivo* (Buchholz et al., 2006). In a murine model, treatment with this monoclonal antibody delayed the development of prion disease (White et al., 2003). Application of monoclonal antibodies raised against recombinant PrP also resulted in a reduction of PrP<sup>Sc</sup> levels in infected mouse neuroblastoma cells (Pankiewicz et al., 2006). Single chain antibodies (scFv) directed against PrP<sup>c</sup> revealed an anti-prion effect in neuroblastoma cells (Donofrio et al., 2005).

## 7. Therapeutic approaches targeting LRP/LR

### 7.1. Trans-dominant negative LRP mutants

Recently, it has been shown that an LRP mutant encompassing the extracellular domain of LRP/LR (LRP102-295:: FLAG) might act in a trans-dominant negative way as a decoy by trapping PrP molecules (Fig.1, I) (Vana and Weiss, 2006). *In-vitro* studies revealed that the LRP mutant is able to reduce the PrP<sup>Sc</sup> formation in scrapie-infected neuronal cells (Vana and Weiss, 2006) and might therefore represent a promising novel tool in TSE therapy.

## 7.2. RNA interference and antisense RNA

A further strategy used to influence the PrP<sup>Sc</sup> propagation level is the knockdown of LRP/LR by siRNA and antisense RNA technology. This has already successfully been shown for PrP using *Prn-p*-specific sequences. Thus, the transfection of siRNAs corresponding to the murine *Prn-p* triggered specific *Prn-p*-gene silencing in scrapie-infected neuroblastoma cells. This caused a rapid loss of their PrPres content (Daude et al., 2003). Accordingly, it was shown that transfection of either LRP antisense RNA or LRP-specific siRNAs in scrapie-infected neuronal cells results in downregulation of LRP/LR expression and prevention of PrP<sup>Sc</sup> propagation (Fig.1, II) (Leucht et al., 2003).

However, a permanent effect of knockdown of disease-relevant genes using RNAi has been achieved using a lentivirus-mediated gene transfer (Ralph et al., 2005; Raoul et al., 2005). This shows that a lentivirus-based RNAi gene therapy strategy using HIV-derived vectors expressing LRP-specific siRNAs is another innovative approach in TSE treatment.

## 7.3. Antibodies directed against the LRP/LR

The PrP binding capacity of LRP offers strategies in therapeutic approaches against prion diseases. The curative effect of the polyclonal anti-LRP/LR antibody (W3) on scrapie infected N2a cells recommends anti-LRP antibodies as therapeutic tools for the treatment of prion diseases (Leucht et al., 2003), especially since (i) this antibody prevents the binding of infectious prions to mammalian cells (Fig.1, III) (Gauczynski et al., 2006) and (ii) endocytosis of PrP<sup>BSE</sup> by enterocytes mediated by the LRP/LR is inhibited after treatment with W3 (Morel et al., 2005).

Since a polyclonal antibody format is not suitable for a therapy in animals or humans the development of single-chain antibodies directed against LRP/LR provides a promising

alternative therapeutic strategy. Smaller (30 kDa) and with better tissue penetration, they can be delivered via passive immunotransfer for example intracerebrally into the brain region where massive prion propagation takes place. So far, no immune response or side reactions have been observed after application of scFvs. To circumvent the problem of the short half-life in organisms a permanent delivery of single chain antibodies directed against LRP/LR may be achieved by gene therapeutic strategies employing AAV-based or lentiviral vector systems.

#### 7.4. Polysulphated glycans

Polysulphated glycans such as heparan mimetics (HM) or pentosan polysulphate interfere with the binding of the infectious PrP<sup>27-30</sup> to the LRP/LR-HSPG complex and are therefore another promising therapeutic strategy (Fig. 1, IV) (Gauczynski et al., 2006). Treatment of scrapie-infected mice with pentosan polysulphate resulted in a prolonged incubation time and even in the cure of two mouse strains infected with two different scrapie strains (Farquhar and Dickinson, 1986). Moreover, it has been shown that GAGs (Hijazi et al., 2005), especially heparan sulphate, (Horonchik et al., 2005) also act as receptors for the infectious PrP<sup>Sc</sup>. Polysulphated glycans such as SP54 and pS3 (phycarin sulphate) also show an inhibitory effect on the binding of PrP<sup>27-30</sup> to LRP hyperexpressing BHK cells (Gauczynski et al., 2006). Both pentosan polysulphates and heparan sulphate mimetics are able to prolong the incubation time in rodent models and interfere with PrP<sup>Sc</sup> propagation in neuronal cells due to the inhibition of the LRP/LR dependent binding of prions to target cells.

## 8. Conclusions

So far, there is no TSE treatment available that is able to cure affected individuals. Alternative therapeutic strategies targeting LRP/LR might be promising since it acts as the

receptor for PrP<sup>c</sup> and PrP<sup>Sc</sup>. Molecules targeting the LRP-PrP interaction such as LRP mutants, LRP/LR-specific antibodies and polysulphated glycans or tools downregulating the LRP/LR levels such as siRNAs and antisense RNAs represent alternative therapies for the treatment of prion diseases.

## Acknowledgments

We thank the Federal Ministry of Research and Education (grants 01-KO-0106 and KO-01-0514), the Bavarian Prion Research Foundation (grant LMU 4) and the European Commission (grants QLRT-2000-02085 and NoE NeuroPrion FOOD-CT-2004-506579) for financial support.

## References

- Ardini, E., Pesole, G., Tagliabue, E., Magnifico, A., Castronovo, V., Sobel, M.E., Colnaghi, M.I., Menard, S., 1998. The 67-kDa laminin receptor originated from a ribosomal protein that acquired a dual function during evolution. *Mol. Biol. Evol.* 15, 1017-1025.
- Auth, D., Brawerman, G., 1992. A 33-kDa polypeptide with homology to the laminin receptor: component of translation machinery. *Proc. Natl. Acad. Sci. U.S.A.* 89, 4368-4372.
- Baloui, H., von Boxberg, Y., Vinh, J., Weiss, S., Rossier, J., Nothias, F., Stettler, O., 2004. Cellular prion protein/laminin receptor: distribution in adult central nervous system and characterization of an isoform associated with a subtype of cortical neurons. *Eur. J. Neurosci.* 20, 2605-2616.
- Barret, A., Tagliavini, F., Forloni, G., Bate, C., Salmona, M., Colombo, L., De Luigi, A., Limido, L., Suardi, S., Rossi, G., Auvre, F., Adjou, K.T., Sales, N., Williams, A., Lasmezas, C., Deslys, J.P., 2003. Evaluation of quinacrine treatment for prion diseases. *J. Virol.* 77, 8462-8469.
- Benestad, S.L., Sarradin, P., Thu, B., Schonheit, J., Tranulis, M.A., Bratberg, B., 2003. Cases of scrapie with unusual features in Norway and designation of a new type, Nor98. *Vet. Rec.* 153, 202-208.
- Bruce, M.E., Will, R.G., Ironside, J.W., McConnell, I., Drummond, D., Suttie, A., McCardle, L., Chree, A., Hope, J., Birkett, C., Cousens, S., Fraser, H., Bostock, C.J., 1997. Transmissions to mice indicate that 'new variant' CJD is caused by the BSE agent. *Nature* 389, 498-501.

- 263 Buchholz, C.J., Bach, P., Nikles, D., Kalinke, U., 2006. Prion protein-specific antibodies for  
264 therapeutic intervention of transmissible spongiform encephalopathies. *Expert Opin.*  
265 *Biol. Ther.* 6, 293-300.
- 266 Castronovo, V., Taraboletti, G., Sobel, M.E., 1991. Functional domains of the 67-kDa  
267 laminin receptor precursor. *J. Biol. Chem.* 266, 20440-20446.
- 268 Cohen, F.E., Prusiner, S.B., 1998. Pathologic conformations of prion proteins. *Annu. Rev.*  
269 *Biochem.* 67, 793-819.
- 270 Daude, N., Marella, M., Chabry, J., 2003. Specific inhibition of pathological prion protein  
271 accumulation by small interfering RNAs. *J. Cell Sci.* 116, 2775-2779.
- 272 Demaimay, R., Adjou, K.T., Beringue, V., Demart, S., Lasmezas, C.I., Deslys, J.P., Seman,  
273 M., Dormont, D., 1997. Late treatment with polyene antibiotics can prolong the  
274 survival time of scrapie-infected animals. *J. Virol.* 71, 9685-9689.
- 275 Donofrio, G., Heppner, F.L., Polymenidou, M., Musahl, C., Aguzzi, A., 2005. Paracrine  
276 inhibition of prion propagation by anti-PrP single-chain Fv miniantibodies. *J. Virol.*  
277 79, 8330-8338.
- 278 Farquhar, C.F., Dickinson, A.G., 1986. Prolongation of scrapie incubation period by an  
279 injection of dextran sulphate 500 within the month before or after infection. *J. Gen.*  
280 *Virol.* 67 ( Pt 3), 463-473.
- 281 Gauczynski, S., Nikles, D., El-Gogo, S., Papy-Garcia, D., Rey, C., Alban, S., Barritault, D.,  
282 Lasmezas, C.I., Weiss, S., 2006. The 37-kDa/67-kDa Laminin Receptor Acts as a  
283 Receptor for Infectious Prions and Is Inhibited by Polysulfated Glycanes. *J. Infect.*  
284 *Dis.* 194, 702-709.
- 285 Gauczynski, S., Peyrin, J.M., Haik, S., Leucht, C., Hundt, C., Rieger, R., Krasemann, S.,  
286 Deslys, J.P., Dormont, D., Lasmezas, C.I., Weiss, S., 2001. The 37-kDa/67-kDa

- laminin receptor acts as the cell-surface receptor for the cellular prion protein. *Embo J.* 20, 5863-5875.
- Heppner, F.L., Christ, A.D., Klein, M.A., Prinz, M., Fried, M., Kraehenbuhl, J.P., Aguzzi, A., 2001, Transepithelial prion transport by M cells. *Nat. Med.* 7, 976-977.
- Hijazi, N., Kariv-Inbal, Z., Gasset, M., Gabizon, R., 2005. PrP<sup>Sc</sup> incorporation to cells requires endogenous glycosaminoglycan expression. *J. Biol. Chem.* 280, 17057-17061.
- Horonchik, L., Tzaban, S., Ben-Zaken, O., Yedidia, Y., Rouvinski, A., Papy-Garcia, D., Barritault, D., Vlodavsky, I., Taraboulos, A., 2005. Heparan sulfate is a cellular receptor for purified infectious prions. *J. Biol. Chem.* 280, 17062-17067.
- Hundt, C., Peyrin, J.M., Haik, S., Gauczynski, S., Leucht, C., Rieger, R., Riley, M.L., Deslys, J.P., Dormont, D., Lasmezas, C.I., Weiss, S., 2001. Identification of interaction domains of the prion protein with its 37-kDa/67-kDa laminin receptor. *Embo J.* 20, 5876-5886.
- Ingrosso, L., Ladogana, A., Pocchiari, M., 1995. Congo red prolongs the incubation period in scrapie-infected hamsters. *J. Virol.* 69, 506-508.
- Kinoshita, K., Kaneda, Y., Sato, M., Saeki, Y., Wataya-Kaneda, M., Hoffmann, A., 1998. LBP-p40 binds DNA tightly through associations with histones H2A, H2B, and H4. *Biochem. Biophys. Res. Commun.* 253, 277-282.
- Korth, C., May, B.C., Cohen, F.E., Prusiner, S.B., 2001. Acridine and phenothiazine derivatives as pharmacotherapeutics for prion disease. *Proc. Natl. Acad. Sci U.S.A.* 98, 9836-9841.
- Leucht, C., Simoneau, S., Rey, C., Vana, K., Rieger, R., Lasmezas, C.I., Weiss, S., 2003. The 37 kDa/67 kDa laminin receptor is required for PrP(Sc) propagation in scrapie-infected neuronal cells. *EMBO Rep.* 4, 290-295.

- 312 Ludwig, G.V., Kondig, J.P., Smith, J.F., 1996. A putative receptor for Venezuelan equine  
313 encephalitis virus from mosquito cells. *J. Virol.* 70, 5592-5599.
- 314 Makrides, S., Chitpatima, S.T., Bandyopadhyay, R., Brawerman, G., 1988. Nucleotide  
315 sequence for a major messenger RNA for a 40 kilodalton polypeptide that is under  
316 translational control in mouse tumor cells. *Nucleic Acids Res.* 16, 2349.
- 317 Morel, E., Andrieu, T., Casagrande, F., Gauczynski, S., Weiss, S., Grassi, J., Rousset, M.,  
318 Dormont, D., Chambaz, J., 2005. Bovine prion is endocytosed by human enterocytes  
319 via the 37 kDa/67 kDa laminin receptor. *Am. J. Pathol.* 167, 1033-1042.
- 320 Otto, M., Cepek, L., Ratzka, P., Doehlinger, S., Boekhoff, I., Wiltfang, J., Irle, E., Pergande,  
321 G., Ellers-Lenz, B., Windl, O., Kretzschmar, H.A., Poser, S., Prange, H., 2004.  
322 Efficacy of flupirtine on cognitive function in patients with CJD: A double-blind  
323 study. *Neurology* 62, 714-718.
- 324 Pankiewicz, J., Prelli, F., Sy, M.S., Kascsak, R.J., Kascsak, R.B., Spinner, D.S., Carp, R.I.,  
325 Meeker, H.C., Sadowski, M., Wisniewski, T., 2006. Clearance and prevention of  
326 prion infection in cell culture by anti-PrP antibodies. *Eur. J. Neurosci.* 23, 2635-2647.
- 327 Priola, S.A., Raines, A., Caughey, W.S., 2000. Porphyrin and phthalocyanine antiscrapie  
328 compounds. *Science* 287, 1503-1506.
- 329 Prusiner, S.B., 1982. Novel proteinaceous infectious particles cause scrapie. *Science* 216,  
330 136-144.
- 331 Ralph, G.S., Radcliffe, P.A., Day, D.M., Carthy, J.M., Leroux, M.A., Lee, D.C., Wong, L.F.,  
332 Bilsland, L.G., Greensmith, L., Kingsman, S.M., Mitrophanous, K.A., Mazarakis,  
333 N.D., Azzouz, M., 2005. Silencing mutant SOD1 using RNAi protects against  
334 neurodegeneration and extends survival in an ALS model. *Nat. Med.* 11, 429-433.
- 335 Rao, N.C., Barsky, S.H., Terranova, V.P., Liotta, L.A., 1983. Isolation of a tumor cell laminin  
336 receptor. *Biochem. Biophys. Res. Commun.* 111, 804-808.

- 337 Raoul, C., Abbas-Terki, T., Bensadoun, J.C., Guillot, S., Haase, G., Szulc, J., Henderson,  
338 C.E., Aebischer, P., 2005. Lentiviral-mediated silencing of SOD1 through RNA  
339 interference retards disease onset and progression in a mouse model of ALS. *Nat.*  
340 *Med.* 11, 423-428.
- 341 Rieger, R., Edenhofer, F., Lasmezas, C.I., Weiss, S., 1997. The human 37-kDa laminin  
342 receptor precursor interacts with the prion protein in eukaryotic cells. *Nat. Med.* 3,  
343 1383-1388.
- 344 Roikhel, V.M., Fokina, G.I., Pogodina, V.V., 1984. Influence of aminasine on experimental  
345 scrapie in mice. *Acta Virol.* 28, 321-324.
- 346 Romanov, V., Sobel, M.E., pinto da Silva, P., Menard, S., Castronovo, V., 1994. Cell  
347 localization and redistribution of the 67 kD laminin receptor and alpha 6 beta 1  
348 integrin subunits in response to laminin stimulation: an immunogold electron  
349 microscopy study. *Cell Adhes. Commun.* 2, 201-209.
- 350 Sato, M., Kinoshita, K., Kaneda, Y., Saeki, Y., Iwamatsu, A., Tanaka, K., 1996. Analysis of  
351 nuclear localization of laminin binding protein precursor p40 (LBP/p40). *Biochem.*  
352 *Biophys. Res. Commun.* 229, 896-901.
- 353 Shmakov, A.N., Bode, J., Kilshaw, P.J., Ghosh, S., 2000. Diverse patterns of expression of  
354 the 67-kD laminin receptor in human small intestinal mucosa: potential binding sites  
355 for prion proteins? *J. Pathol.* 191, 318-322.
- 356 Simoneau, S., Haik, S., Leucht, C., Dormont, D., Deslys, J.P., Weiss, S., Lasmezas, C., 2003.  
357 Different isoforms of the non-integrin laminin receptor are present in mouse brain and  
358 bind PrP. *Biol. Chem.* 384, 243-246.
- 359 Tagliavini, F., McArthur, R.A., Canciani, B., Giaccone, G., Porro, M., Bugiani, M., Lievens,  
360 P.M., Bugiani, O., Peri, E., Dall'Ara, P., Rocchi, M., Poli, G., Forloni, G., Bandiera,  
361 T., Varasi, M., Suarato, A., Cassutti, P., Cervini, M.A., Lansen, J., Salmona, M., Post,

- C., 1997. Effectiveness of anthracycline against experimental prion disease in Syrian hamsters. *Science* 276, 1119-1122.
- Tio, P.H., Jong, W.W., Cardoso, M.J., 2005. Two dimensional VOPBA reveals laminin receptor (LAMR1) interaction with dengue virus serotypes 1, 2 and 3. *Virol. J.* 2, 25.
- Vana, K., Weiss, S., 2006. A trans-dominant negative 37kDa/67kDa laminin receptor mutant impairs PrPSc propagation in scrapie-infected neuronal cells. *J. Mol. Biol.* 358, 57-66.
- Wang, K.S., Kuhn, R.J., Strauss, E.G., Ou, S., Strauss, J.H., 1992. High-affinity laminin receptor is a receptor for Sindbis virus in mammalian cells. *J. Virol.* 66, 4992-5001.
- Wells, G.A., Hawkins, S.A., Austin, A.R., Ryder, S.J., Done, S.H., Green, R.B., Dexter, I., Dawson, M., Kimberlin, R.H., 2003. Studies of the transmissibility of the agent of bovine spongiform encephalopathy to pigs. *J. Gen. Virol.* 84, 1021-1031.
- White, A.R., Enever, P., Tayebi, M., Mushens, R., Linehan, J., Brandner, S., Anstee, D., Collinge, J., Hawke, S., 2003. Monoclonal antibodies inhibit prion replication and delay the development of prion disease. *Nature* 422, 80-83.

**Figure legends:**

**Fig. 1** Molecules inhibiting the PrP-LRP interaction and reducing the LRP/LR levels. LRP/LR (orange) is able to bind both the cellular prion protein (green circle) and the infectious PrP<sup>Sc</sup> (green rectangle). After binding to the LRP/LR-HSPG complex the prion protein becomes internalized into endo-/lysosomal compartments where the conversion of PrP<sup>c</sup> to PrP<sup>Sc</sup> might take place. Prevention of the binding to LRP/LR is achieved by (I) trapping PrP<sup>Sc</sup> by a LRP mutant encompassing the extracellular domain (LRP102-295), downregulation of LRP/LR by (IIa) siRNAs and (IIb) antisense RNA directed against LRP mRNA, (III) anti-LRP/LR antibodies competing with PrP for LRP binding sites and (IV) heparan mimetics interfering with the binding of PrP<sup>Sc</sup> to the LRP/LR/HSPG complex.