

Complete Protection Against Lethal Crimean-Congo Hemorrhagic Fever Virus (CCHFV) Challenge in Mice Afforded by Immunization with Modified mRNA Encoding the Nucleocapsid Protein (NP) Alone

Sercan Keskin^{1,2}, Shaikh Terkis Islam Pavel³, Rabia Sak^{1,4}, Fatemeh Bahadori⁵, Ahmet Furkan Aslan³, Münir Aktaş⁶, Faruk Karakeçili⁷, Ahmet Kalkan⁸, Aykut Özarendeli³, Mehmet Ziya Doymaz^{2,9}

Department of Biotechnology, Institute of Health Sciences and Department of Microbiology, Beykoz Institute of Life Sciences and Biotechnology, Bezmialem Vakif University, Istanbul, Türkiye (S. Keskin); Department of Microbiology, Faculty of Medicine and Vaccine Research, Development and Application Centre (ERAGEM), Erciyes University, Kayseri, Türkiye (S.T.I. Pavel, Ph.D., A. F. Aslan, A. Ozdarendeli, Ph.D.); Department of Pharmaceutical Biotechnology, Faculty of Pharmacy, Bezmialem Vakif University, Istanbul, Türkiye (R.Sak); Department of Analytical Chemistry, Faculty of Pharmacy, Cerrahpaşa University, Istanbul, Türkiye (F. Bahadori, Ph.D.); Department of Parasitology, Faculty of Veterinary Medicine, University of Firat, Elazig, Türkiye (M. Aktas, Ph.D.), Department of Infectious Diseases and Clinical Microbiology, Faculty of Medicine, Erzincan Binali Yildirim University, Erzincan, Türkiye (F. Karakeçili, M.D.); Department of Infectious Diseases and Clinical Microbiology, Medical Faculty, Karadeniz Technical University, Trabzon, Türkiye (A. Kalkan, M. D.); Department of Medical Microbiology, Medical School, and Beykoz Institute of Life Sciences and Biotechnology, Bezmialem Vakif University, Istanbul, Türkiye (M.Z.Doymaz, Ph.D.,)

Correspondence to; Mehmet Z. Doymaz, Department of Medical Microbiology, Medical School, and Beykoz Institute of Life Sciences and Biotechnology, Bezmialem Vakif University, Istanbul, Türkiye

Summary

Background The Crimean-Congo Hemorrhagic Fever Virus (*Orthonairovirus haemorrhagiae*) causes a hemorrhagic fever with mortality rates reaching up to 40%. For years, this virus has maintained its position among the top priority pathogens identified by the World Health Organization (WHO). This is due to its endemic presence across a vast region—from Africa and Spain to the Balkans, the Middle East, and throughout Asia—its potential for human-to-human transmission, and the lack of an effective and approved vaccine or treatment. Therefore, the development of an effective vaccine against CCHFV is of critical importance. Building on the success of mRNA-based vaccines during the Coronavirus Disease 2019 (COVID-19) pandemic, this study reports the development of a messenger ribonucleic acid (mRNA) vaccine candidate expressing the nucleocapsid protein (NP) of CCHFV. The CCHFV NP in vitro transcript (IVT) was designed with pseudouridine (Ψ) nucleoside modification.

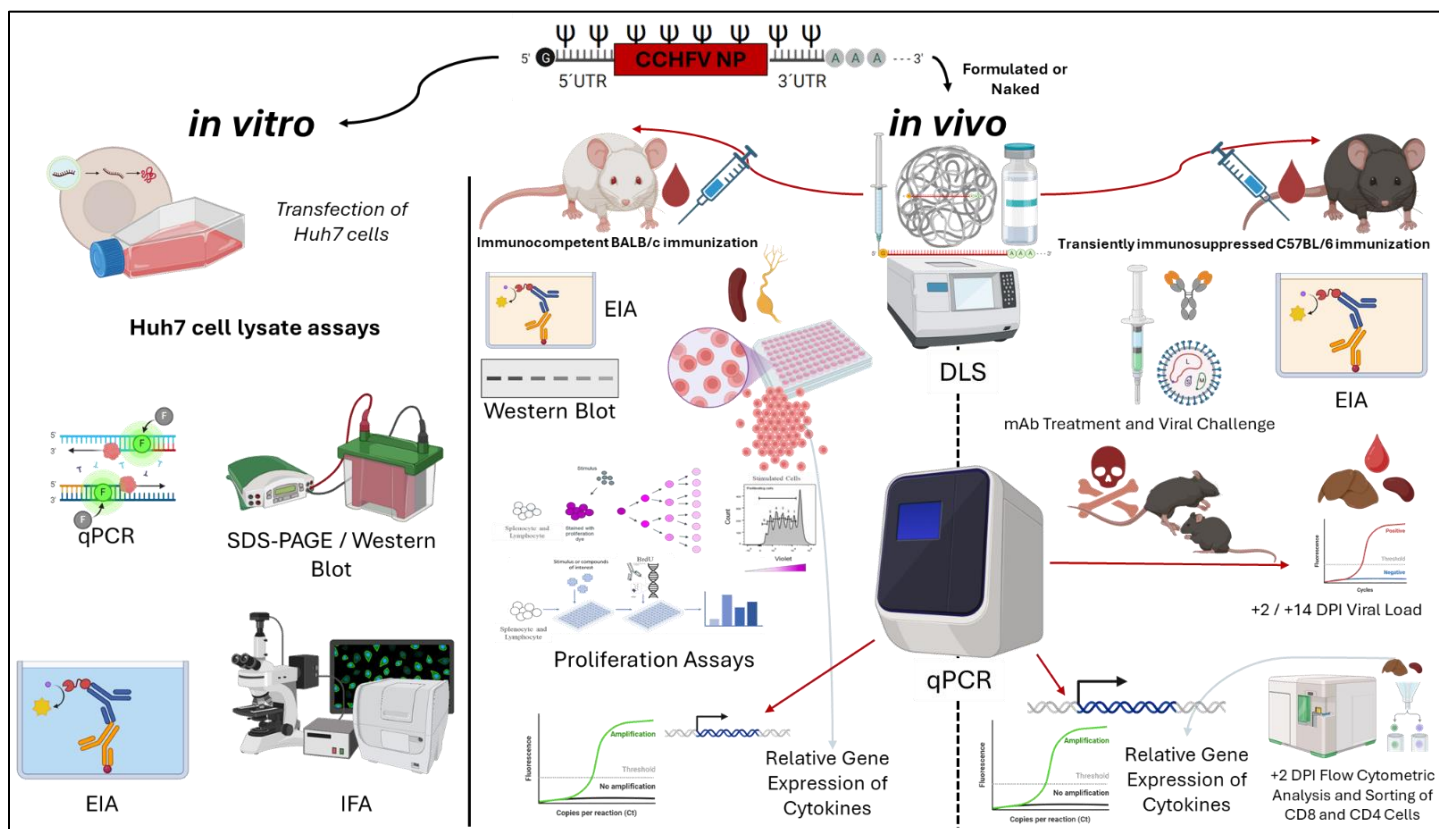
Methods As part of the preclinical characterization of the IVT vaccine candidate, the biochemical and immunological properties of NP were confirmed in Huh-7 cells transfected with IVT NP- Ψ mRNA. Afterwards, the efficacy of IVT NP- Ψ mRNA immunization was evaluated in immunocompetent BALB/c and transiently immunosuppressed (IS) C57BL/6 mice. In CCHFV challenge studies, IS C57BL/6 mice were used. IS C57BL/6 mice were immunized intramuscularly with 2 doses of NP- Ψ mRNA, either naked or encapsulated in Poly(lactic-co-glycolic acid) (PLGA) nanoparticles, administered 14 days apart.

Findings High levels of CCHFV NP-specific humoral (IgM and IgG) and cellular (cytokine and lymphoproliferative) responses were demonstrated in BALB/c mice immunized with IVT NP- Ψ mRNA. In challenge experiments, 100% protection was achieved by both the naked and PLGA-encapsulated IVT NP- Ψ mRNA immunizations. Additionally, full protection was observed in mice immunized with inactivated CCHFV, whereas only 20% protection was detected in the unmodified IVT NP-mRNA vaccinated animals. In the protected mice, viral clearance was observed in the spleen, liver tissues, and blood on day 14 post-challenge.

Interpretation This study demonstrates that NP, the most abundant protein of the virus, is capable of providing full protection as a standalone vaccine candidate. Furthermore, our report represents a crucial milestone in identifying a future vaccine candidate and paves the way for subsequent clinical studies.

Fundings This study was supported by the Bezmialem Vakif University Scientific Research Project BAP#20220402. Additionally, this study received support from TÜBİTAK 2211/C.

50 **Graphical Abstract**



51

52 **Introduction**

53 The Crimean-Congo hemorrhagic fever virus (CCHFV) is a significant pathogen transmitted to humans via
 54 arthropod vector ticks(1). Once a sporadic disease characterized by hemorrhagic fever, the early 2000s saw a
 55 marked increase in annual case reports, with mortality rates approaching 40%, and this brought the virus to the
 56 attention of global health authorities(2-4). Subsequent investigations showed that the vector population is
 57 endemic across a broad geographical range, extending from Japan to the Caucasus, to the Balkans and
 58 Southern Europe, including Spain, and throughout Africa(5-7). The widespread distribution of the virus, coupled
 59 with the potential expansion of vector habitats due to climate change, has positioned CCHFV as an emerging
 60 viral pathogen. Currently, the WHO has prioritized CCHFV as a critical pathogen requiring further research(8).
 61 No effective antiviral treatments nor approved vaccines exist to combat CCHFV infections(1, 9). Moreover, the
 62 virus's association with resource-poor regions and the necessity for Biosafety Level 3 (or higher) containment
 63 for research have relegated CCHFV to the category of neglected pathogens.

64 In the present report, an mRNA based vaccine candidate against CCHFV is evaluated. Pre-COVID-19 era,
 65 mRNA-based vaccines were extensively tested, particularly against tumors and their development accelerated
 66 following the success of mRNA vaccines against SARS-CoV-2 during the pandemic(10). The widespread use
 67 of Moderna and Pfizer BioNTech's mRNA vaccines (legal names; *Spikevax* -formerly referred to as "mRNA-
 68 1273", and *Comirnaty* – formerly "BNT162b2", respectively) and their role in rapidly mitigating the devastating
 69 impact of pandemic, have opened avenues for applying this technology to other viral pathogens, including
 70 CCHFV(11-14). Here, mRNA sequences encoding CCHFV NP, modified with pseudouridine, were utilized as
 71 immunizing antigen. These mRNAs were encapsulated in biodegradable Poly(lactic-co-glycolic acid) (PLGA)
 72 carrier particles and administered to here, mRNA sequences encoding CCHFV NP, modified with
 73 pseudouridine, were utilized as immunizing antigen. These mRNAs were encapsulated in biodegradable
 74 Poly(lactic-co-glycolic acid) (PLGA) carrier particles and administered to mice(15-17). The mice were
 75 experimentally immunosuppressed before challenge, and the effects of immunization on infection outcomes
 76 were assessed. The results demonstrate that the pseudo-uridine-modified IVT NP-ΨmRNA provided complete
 77 protection against viral challenge in the experimental model, indicating that a robust and effective vaccine

78 candidate against CCHFV - a serious public health threat and neglected pathogen - is feasible. Our findings
79 provide a comprehensive immunological analysis of IVT NP-ΨmRNA-PLGA and naked IVT NP-ΨmRNA
80 vaccines in the context of CCHFV.

81 **Methods**

82 **Biosafety and Ethical Declarations**

83 All procedures involving infectious CCHFV were conducted under Animal Biosafety Level 3 (ABSL3)
84 conditions, in accordance with the procedures approved by the Institutional Biosafety Committee of Erciyes
85 University Laboratories in Kayseri. Animal experiments were approved by the Local Ethics Committee for
86 Animal Experiments of Bezmialem Vakif University (protocol #2022/17, #2022/17-1 and #2022/89) and
87 conducted under the supervision of a veterinarians and experienced personnel. The mice used in the
88 challenge experiments were housed in HEPA-filtered cage systems in groups to acclimate them to ABSL3
89 conditions before the start of the challenge experiment. Nesting materials, food, and water were provided ad
90 libitum. The surviving mice used in the experiments were humanely euthanized via cervical dislocation for the
91 collection of necessary tissue and body fluids.

92 **Cells and Virus**

93 Vero E6 (ATCC CRL-1586) cells were maintained in Dulbecco's Modified Eagle Medium (DMEM)
94 supplemented with 10% heat-inactivated fetal bovine serum (FBS), 100 mM L-glutamine, 50 U/mL penicillin,
95 and 50 µg/mL streptomycin (Sigma-Aldrich, #P0781) at 37°C in a 5% CO₂ environment(18). Human
96 Hepatocellular Carcinoma cells (Huh-7) (JCRB- Japanese Collection of Research Bioresources Cell Bank-
97 #0403) were grown in DMEM supplemented with 10% heat-inactivated FBS (Gibco, Brazil, #10270106), 100
98 U/mL penicillin, and 100 µg/mL streptomycin (Sigma-Aldrich, #P0781) at 37°C in a 5% CO₂ environment(19).
99 CCHFV Turkey-Kelkit06 strain was used the challenge experiments(18). The virus was propagated, titrated
100 using pseudo-plaque assay (PPA) and stored as described earlier(18, 20). All viral procedures were carried out
101 in a certified biosafety level 3 enhanced facility (BSL-3).

102 **In Vitro Transcription and Purification of ΨmRNA/mRNA**

103 The S segment (GQ337053) of the CCHFV Turkey-Kelkit06 strain was placed downstream of the T7 promoter
104 sequence of the designed pBILSAB WT plasmid (Figure S1) (appendix p 10). The S segment within the newly
105 developed plasmid (pBILSAB WT/S) was unoptimized and contained dual 5' and 3' UTR sequences. After
106 linearization with NdeI (NEB, #R0111L), the plasmid was used as a template. NP-ΨmRNA/mRNA was
107 synthesized using the HiScribe® T7 ARCA mRNA Kit (with tailing) (NEB, #E2060S). Unrelated Luciferase
108 ΨmRNAs were also synthesized as controls. During ΨmRNA synthesis, 10 mM β-pseudouridine (Cayman
109 Chemical, #23383, Ann Arbor, MI, USA) was added and the final concentration was calculated as 1.25 mM.
110 The synthesized mRNAs had Anti-Reverse CAP Analogs (ARCA) and were capped during synthesis by adding
111 to the 5' end. After synthesis, DNase I (RNase-free) provided in the kit was used to remove remaining DNA
112 templates. The DNA-dependent RNA polymerization continued for 45 minutes at 37°C. This step was followed
113 by the addition of an approximately 150-nucleotide Poly(A) tail, following the manufacturer's instructions (NEB,
114 UK). The reaction, completed with *E. coli* Poly(A) Polymerase provided in the kit, was purified by precipitating
115 the mRNAs with lithium chloride (LiCl). The kit included LiCl solution for the rapid recovery of the synthesized
116 mRNAs. LiCl precipitation effectively removed most unused NTPs and enzymes. LiCl was added to half of the
117 reaction volume and incubated at -20°C for 30 minutes. RNA was pelleted by bench top centrifugation at
118 13000 g - for 15 minutes at 4°C. The supernatant was carefully discarded, and the pellet was washed with 500
119 µL of cold 70% ethanol and centrifuged again for 10 minutes at 4°C. Ethanol was carefully removed, and the
120 tube was spun down to draw the remaining liquid to the bottom. The residual liquid was carefully removed
121 using a sharp tip, and the pellet was air-dried and resuspended in ultrapure RNase-free water. To ensure
122 complete dissolution of the RNA, it was heated at 65°C for 5-10 minutes. After thoroughly mixing, the RNA was
123 stored at -80°C.

124 The RNA concentration was determined by measuring the absorbance of ultraviolet light at 260 nm. Free
125 nucleotides from the transcription reaction were removed by cleaning with LiCl and RNA concentrations were
126 determined by spectrophotometer (Nanodrop™, Thermo Fisher Scientific, Pittsburgh, PA, USA).

127 A 1% agarose gel was used to analyze RNA samples. Agarose gel (Sigma-Aldrich) is prepared in 1X TAE (Tris-
128 Acetate-EDTA) and poured into a comb mold. It is recommended to wash the equipment with RNase-free
129 water at this stage. RiboRuler High Range RNA Ladder (Thermo Scientific, #SM1821) was used as the ladder.
130 The ladder was mixed with 2X RNA Loading Dye containing Xylene Cyanol FF, Bromophenol Blue, and
131 Ethidium Bromide. After heating the mixture at 70°C for 10 minutes, it was placed on ice for 3 minutes. The
132 prepared agarose gel was loaded with the samples alongside the ladder. The gel tank was filled with 1X TAE.
133 The ladder was similarly mixed with 2X RNA Loading Dye, heated, and placed on ice. The samples were run
134 for 30 minutes at 40 volts, followed by 50 minutes at 80 volts. Images were captured with a UV imaging device
135 (BioRad, Gel Doc XR+), and the analysis was performed using Image Lab software(21).

136 **Transfection of Huh-7 Cells and qPCR**

137 In vitro transcribed and purified IVTs (Ψ mRNA/mRNA) were transfected into Huh-7 cells using Lipofectamine
138 3000 (Invitrogen, #L3000008) and Xfect RNA Transfection Reagent (Takara, #631450). QPCR datas were
139 normalized to GAPDH or β -actin using the $2^{-\Delta\Delta Ct}$ method(22). Experiments were designed according to the
140 manufacturer's instructions as described in *Supplementary Method 1* of the appendix (p 3).

141 **Indirect Immunofluorescence Assay of mRNA Transfected cells**

142 An IIFA (Indirect Immunofluorescence Assay) was performed to visualize the localization of the protein
143 produced by Huh-7 cells transfected with mRNAs encoding the CCHFV NP protein, at 6, 24, and 48 hours
144 post-transfection as described in *Supplementary Method 2* of the appendix (pp 3-4).

145 **In-house EIA and Western Blot Assays;** To assess the NP specific antibody responses qualitatively and
146 quantitatively (antibody titers) in serum samples of immunized Balb/C and C57BL6 mice in-house developed
147 EIA's were utilized. For comparison, the samples were also tested using a commercial EIA (VectorBest,
148 #D5052). The assay procedures were essentially similar to described earlier with modifications related to this
149 study (23, 24). In house EIA's were also utilized to assess the avidity of antibodies specific for NP. For this
150 purpose, potassium thiocyanate (KSCN) displacement EIA method was applied as described earlier (25, 26)
151 and also in *Supplementary Method 3* of the appendix (pp 4-6).

152 **PLGA Formulation of IVTs and DLS Measurements**

153 In this study, PLGA nanoparticles (Sigma-Aldrich, #P2191) were used for formulation of antigens as described
154 in *Supplementary Method 4* of the appendix (p 6)(16, 17, 27-29).

155 **BALB/c Mouse Immunizations**

156 To evaluate the immunogenicity of the IVT structures, immunocompetent BALB/c mice were used. In this
157 experiment, a total of 24 female BALB/c mice (8-12 weeks old) were randomly divided into six groups: (1) IVT
158 NP- Ψ mRNA-PLGA, (2) naked IVT NP- Ψ mRNA, (3) IVT NP- mRNA-PLGA, (4) rNP + Alum, (5) iCCHFV +
159 Alum, and (6) Sham (IVT Luc- Ψ mRNA-PLGA + Alum). Each group was immunized a total of three times at 14-
160 day intervals as described in *Supplementary Method 5* of the appendix (p 6).

161 **Collection and Culturing of BALB/c Mouse Spleen and Lymph Node Cells**

162 The collection, culture, *in vitro* immune stimulation and labelling with bromodeoxyuridine (BrdU) of BALB/c
163 spleen and lymph node cells were performed as described elsewhere(23, 24) .

164 **Lymphoproliferation Assay (LPA)**

165 Lymphoproliferation assay by BrdU labelling and by flow cytometric methods were performed to asses *in vitro*
166 lymphocyte responses to the antigens as described earlier(23, 24) and also detailed *Supplementary Method 6*
167 of the appendix (p 7).

168 Following LPA, cytokine mRNAs produced by the stimulated lymphocytes were also determined by qPCR as
169 described in *Supplementary Method 7* of the appendix (pp 7-8).

170 **C57BL/6 Mouse Immunizations and Challenge Experiments**

171 C57BL/6 mouse model was used to determine the protective efficacy of IVT constructs and analyze the
172 comparative protective response with other vaccine candidates. In this experiment, a total of 48 different-sex
173 C57BL/6 mice (8-12 weeks old) were randomly divided into six groups: (1) IVT NP- Ψ mRNA-PLGA, (2) naked
174 IVT NP- Ψ mRNA, (3) IVT NP- mRNA-PLGA, (4) rNP + Alum, (5) iCCHFV + Alum, and (6) Sham (IVT Luc-
175 Ψ mRNA-PLGA + Alum). Each group was immunized twice in total at 14-day intervals. The details of the
176 immunizations are provided in *Supplementary Method 8* of the appendix (p 8). For challenge experiments and
177 post-challenge evaluations, the procedures were as described earlier (30, 31).

178 **Determination of Viral Load**

179 The viral loads in various tissues following challenge were determined by qPCR using primers 3' Open
180 Reading Frame (ORF) sequence of the S segment(23, 24). The procedures for determination of viral load in
181 the tissues were as described in *Supplementary Method 9* of the appendix (pp 8-9).

182 **Determination of Cytokine mRNAs**

183 Liver and spleen tissues from immunosuppressed (IS) C57BL/6 mice were collected at 2 dpi and 14 dpi time
184 points and stored at -80°C for testing. Cytokine mRNA species purified from stored tissue samples were
185 determined by qPCR essentially as described above and in detail in *Supplementary Method 10* of the appendix
186 (p 9).

187 **Statistics**

188 All graphs were generated using GraphPad Prism version 9.5.1 (GraphPad Software Inc., San Diego, CA,
189 USA; www.graphpad.com). Data were considered statistically significant when $p < 0.05$. Molecular biology
190 procedures were simulated using SnapGene Viewer software (www.snapgene.com). Clinical scores, body
191 weight, and body temperature were compared between groups. Survival analysis and the time to terminal
192 disease after CCHFV virus challenge were assessed using the log-rank (Kaplan-Meier) test. EIA results between
193 groups were analyzed using two-way ANOVA with Bonferroni's multiple comparison tests. Differences in viral
194 levels were determined by a one-tailed Mann-Whitney test. Anti-nucleocapsid specific antibody avidity data and
195 intracellular cytokine mRNA levels between groups were evaluated using two-way ANOVA (with Sidak's
196 correction). All data are presented as mean \pm SD obtained from independent experiments. For the analysis of
197 RT-PCR results, Ct values measured for each gene were normalized using the GAPDH gene with the Rotor-
198 Gene® Q (Qiagen, USA). Relative expression levels were analyzed using the $2^{-\Delta\Delta Ct}$ method. EIA data were
199 calculated by taking the average of absorbance measurements obtained from repeated samples. The cutoff
200 value was calculated using the formula: average absorbance of each negative sample \pm 2 SD.

201 **Results**

202 **Production of In Vitro Transcription (IVT) Products**

203 The S segment of the CCHFV Turkey-Kelkit06 strain (GenBank No: GQ337053) was inserted into a plasmid to
204 serve as a template for in vitro transcription (IVT). The plasmid map was generated using SnapGene software
205 (Figure S1) (appendix p 10). The IVT NP- Ψ mRNA and IVT NP-mRNA products produced via in vitro
206 transcription were analyzed comparatively using non-denaturing agarose gel electrophoresis. Both products
207 were expected to be around ~1.8 kb in size, but the addition of a Poly(A) tail increased the length by
208 approximately 150 bases. The gel images showed that the IVT NP- Ψ mRNA with base modifications and the
209 IVT NP-mRNA produced with standard bases exhibited similar sizes and purity (Figure 1). The regions marked
210 with red lines on the gel represent the expected IVT product sizes for both products.
211

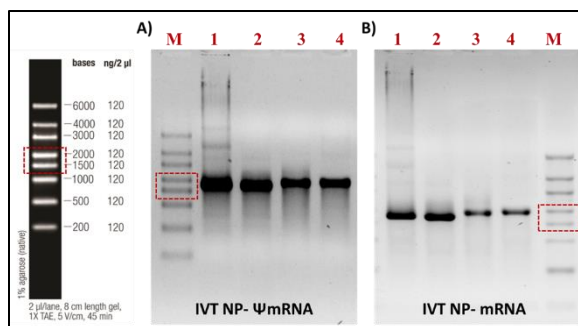


Figure 1. Production of modified and unmodified IVTs and electrophoresis on non-denaturing agarose gel. The expected size of the IVT products is approximately 1.8 kb. The addition of the poly(A) tail extends this by approximately 150 bases. **A)** IVT NP-ΨmRNA samples. **B)** IVT NP-mRNA samples. M: RiboRuler High Range RNA Ladder; 1: Samples taken immediately after the completion of the IVT reaction (1 μl from the reaction tube/well); 2: Samples taken after the addition of DNase I to the IVT reaction (1 μl); 3: Samples taken after the addition of poly(A) to the IVT reactions; 4: IVTs purified with LiCl. Red-boxed-dashed lines indicate the expected size of the IVT products.

Temporal Analysis of IVT NP-ΨmRNA Expression in Huh-7 Cells

After transfection of Huh-7 cells with IVT NP-ΨmRNA, it was observed that the IVTs degraded over time within the cells. Transfection was performed using Xfect RNA Transfection Reagent, and naked IVT NP-ΨmRNAs were also added to the cells under the same conditions for comparison. The transfection process involved adding 2 μg/ml of IVT to cells that had reached 80% confluency. Total RNA was isolated from the cells at 6, 24, and 48 hours, and qPCR was performed using S segment primers (Figure S2) (appendix p 11). After transfection of Huh-7 cells with IVT NP-ΨmRNA, increasing protein expression in the cytoplasm was observed over time. The cells were incubated for 48 hours post-transfection, and the results are presented in Figure 2. Accordingly, NP expression increased over time in the transfected cells (Figure 2A). Western blot analysis of transfected Huh-7 cells after 48 hours of transfection showed the desired band profiles only from cell lysates transfected with mRNA (Figure 2B). Indirect immunofluorescence assay (IIFA) was used to analyze NP expression in cells at 0, 6, 24, and 48 hours post-transfection. Again, overtime increasing expression of NP in the cells was observed (Figure 2C).

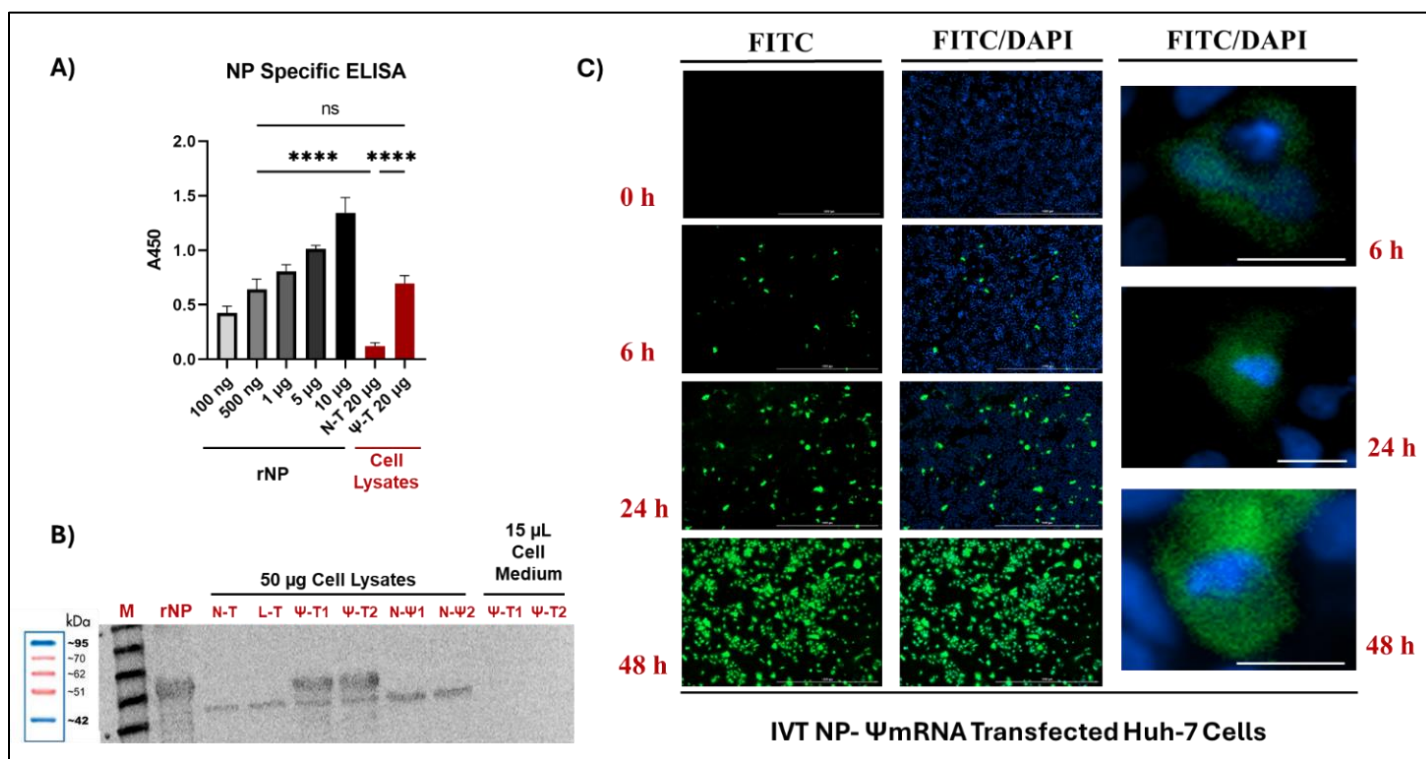


Figure 2. IVT NP-ΨmRNA is expressed in the cytoplasm of Huh-7 cells, showing an increase over time. **A)** Detection of NP in cell lysates transfected with IVT NP-ΨmRNA by EIA. Different amounts of rNP were coated on EIA plates. Forty-eight hours post-transfection, cells were lysed. Lysates from transfected Huh-7 cells (IVT NP-ΨmRNA (Ψ-T)) and non-transfected (N-T) Huh-7 cells were normalized using the Bradford Protein Assay and then coated onto the plates. The primary antibody used was serum from mice immunized with iCCHFV. **B)** Western blot analysis of expressed NP in cell lysates transfected with IVT NP-ΨmRNA. The primary antibody was serum from mice immunized with iCCHFV. L-T refers to transfection with IVT Luc-ΨmRNA, Ψ-T1 refers to transfection with Lipofectamine 3000, and Ψ-T2 refers to transfection with Xfect RNA Transfection Reagent. N-Ψ1 (2 μg/ml) and N-Ψ2 (6 μg/ml) refer to cells incubated with naked IVT NP-ΨmRNA added to the supernatant. **C)** IIFA of Huh-7 cells transfected with IVT NP-ΨmRNA. The cells were tested at 6, 24, and 48 hours post-transfection (0h) for expression localization and intensity using IIFA. The primary antibody

235
236

was serum from mice immunized with iCCHFV, and the secondary antibody was FITC-conjugated Anti-Mouse IgG H&L. Increased NP expression was noticed over the 48-hour period. ns; P>0.05, ****P ≤ 0.0001 (One-way ANOVA).

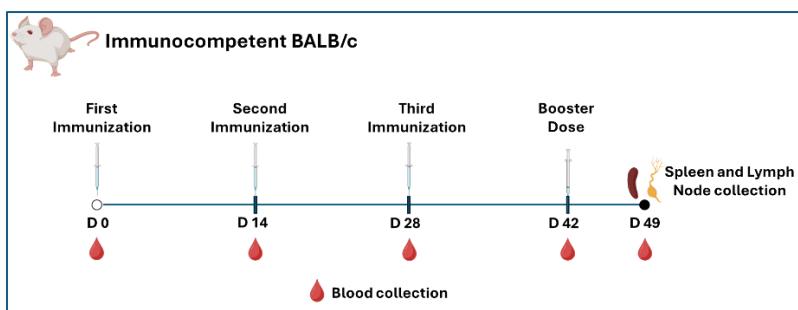
237

Immunization of BALB/c Mice with IVT NP-ΨmRNA Induces Strong NP-Specific Antibody Responses

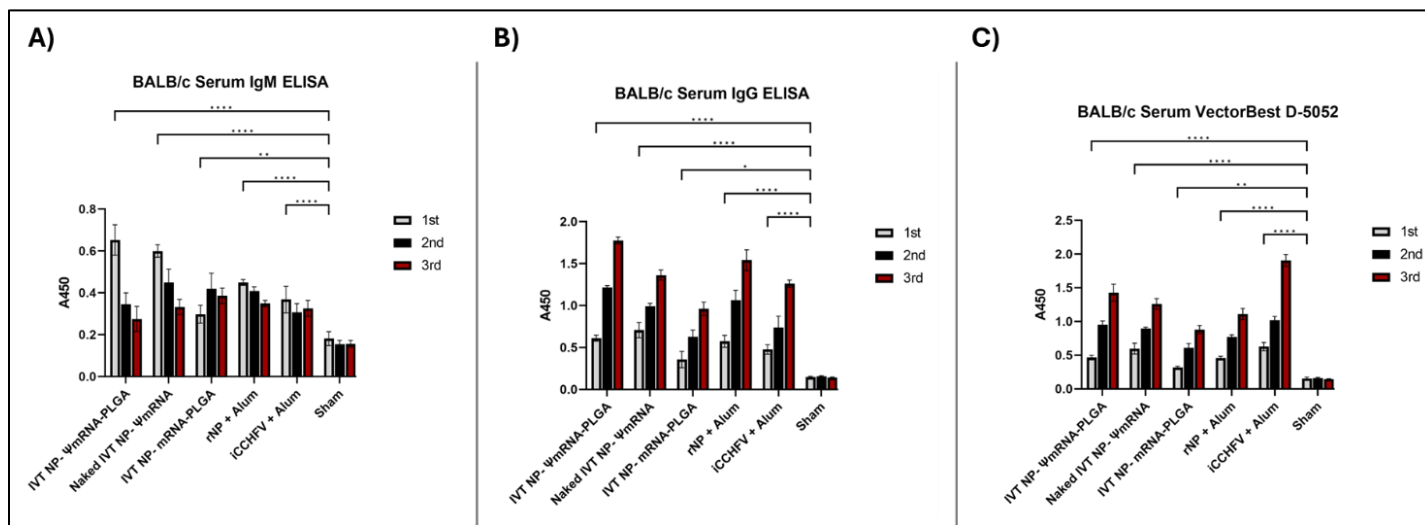
238

The characterization of IVTs formulated with PLGA is performed. According to dynamic light scattering (DLS) results, IVTs formulated with PLGA had a negative zeta potential and formed particles of approximately 100 nanometers in size (Figure S3) (appendix p 12). Antibody responses to PLGA-formulated IVTs in BALB/c mice were tested following immunizations. Blood samples from mice were obtained after immunizations, and EIA results demonstrated that IVT NP- ΨmRNA-PLGA elicited a strong humoral response (Figure 3). NP-specific IgM response was highest in the blood taken 14 days after the first immunization specifically IVT NP- ΨmRNA group showing the highest readings (Figure 3A) On the other hand, the NP-specific IgG response increased with each immunization in blood samples taken at 14-day intervals. The IgG response was lowest for IVT NP-mRNA immunizations and highest for IVT NP- ΨmRNAs immunizations (Figure 3B). The accuracy of in-house tests was confirmed using a commercial test (13)(Figure 3C). The highest antibody titers in commercial assay were noticed in iCCHFV-immunized mice following the final immunization with. The avidity of NP-specific IgG antibodies increased with successive immunizations (Figure 3D), with the highest avidity levels observed in the IVT NP- ΨmRNAs group. The lowest avidity levels were observed in the IVT NP-mRNA immunized animals. Western blot analysis of sera from BALB/c mice immunized with IVT NP- ΨmRNA-PLGA after the third immunization showed that the antibodies reacted with both rNP and IVT NP- ΨmRNA -transfected cell lysates (Figure 3E). Serially diluted serum samples from immunized BALB/c mice were also tested and endpoint titers of these sera were determined (Figure S4) (appendix p 12). These results demonstrated that NP-specific antibodies could be detected even at 1:65536 dilutions of sera from IVT NP- ΨmRNAs immunized groups. Overall, the results of antibody assays indicated that immunization with IVT NP- ΨmRNAs in naked forms or in PLGA induced high-avidity antibody responses in BALB/c mice, and these antibodies were able to recognise to viral NP produced in *E. coli* or in IVT NP-ΨmRNA-transfected cell lysates.

259



260



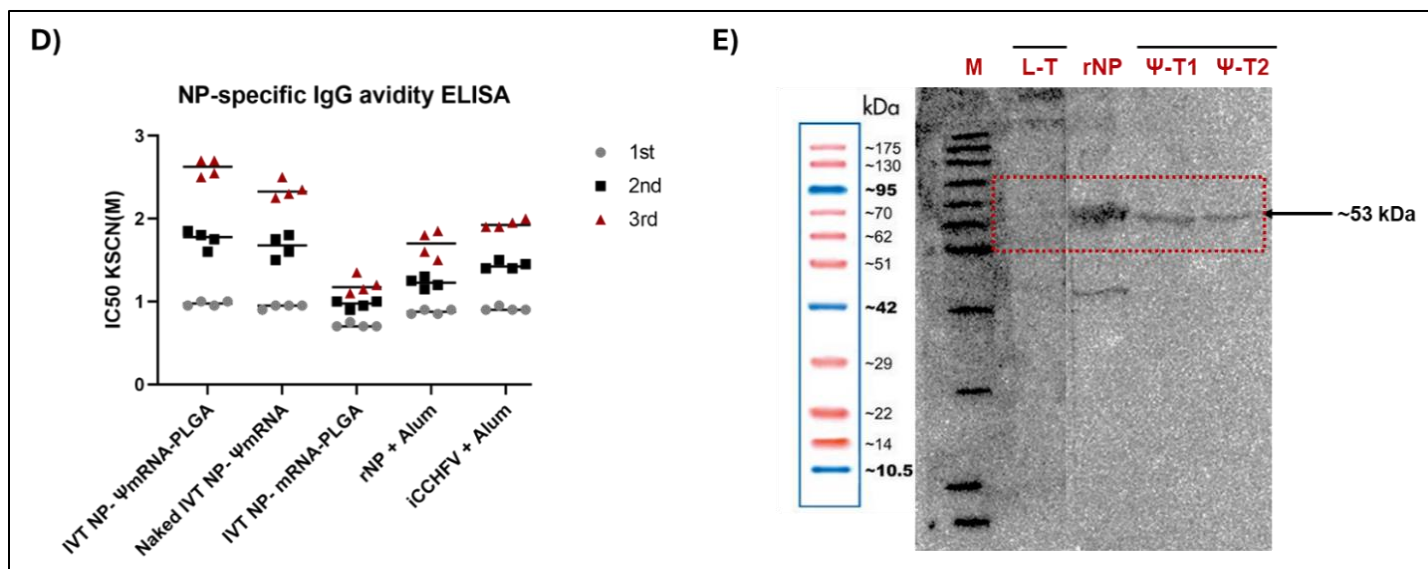


Figure 3. BALB/c mice immunized with IVT NP- Ψ mRNA develop a strong humoral response and authentic antibodies. A-B) The EIA plate was coated with 10 μ g rNP. **C)** The commercial assay (VectorBest D-5052) was used with modification of the secondary antibody for the model. **D)** The avidity of CCHFV NP-specific IgG responses was measured using a KSCN chemical displacement EIA. **E)** Forty-eight hours post-transfection, a portion of Huh-7 cells were lysed for Western blot analysis. Twenty-five μ g of Huh-7 cell lysates (black-striped samples) were boiled in 6X Laemmli Buffer and loaded into SDS-PAGE wells. After blotting, the primary antibody used was serum from mice immunized three times with IVT NP- Ψ mRNA-PLGA (1:100 dilution). Western blot results were visualized using ECL. L-T refers to transfection with IVT Luc- Ψ mRNA, Ψ -T1 refers to transfection with Lipofectamine 3000, and Ψ -T2 refers to transfection with Xfect RNA Transfection Reagent.

NP Stimulates Lymphocyte Proliferation In Vitro

To evaluate the cellular immune response, spleen and lymph node cells obtained from immunized mice were stimulated with NP in an in vitro environment, and the proliferative response of the cells was determined by flow cytometric analysis. In these tests, the positive control using ConA induced the highest cell division, while the specific stimulation with rNP generated a significant proliferation response in immune lymphocytes. Additionally, specific responses against iCCHFV and transfected cell lysates were also observed (Figure 4A-D). The index values of these responses were calculated, confirming the presence of a strong and specific T cell response (Figure 4E).

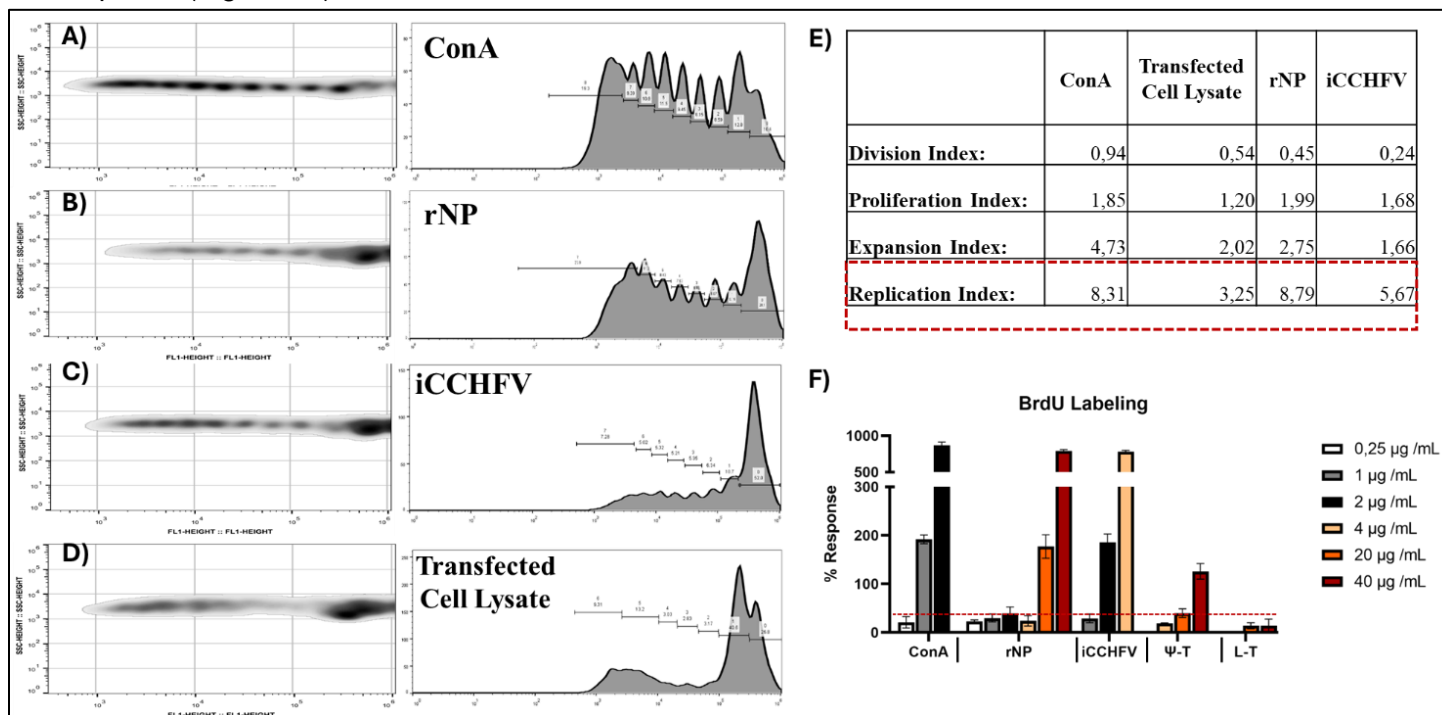


Figure 4. NP Stimulates Lymphocyte Proliferation In Vitro (Flow Cytometry Analysis). Spleens and lymph nodes (cervical, brachial, axillary, inguinal, lumbar, sacral, sciatic) were harvested from BALB/c mice immunized three times with IVT NP- Ψ mRNA-PLGA and dissociated into single-cell suspensions. **A-D.** Co-cultures of 10^5 splenocytes and 10^5 lymphocytes were stimulated with ConA (positive control), rNP, iCCHFV, or IVT NP- Ψ mRNA

transfected cell lysates. Cells were labeled with CellTrace™ Violet before culturing, and flow cytometry analysis was performed 7 days post-stimulation. The first column shows Dot Blot data, and the second column displays the corresponding histograms, with each row representing the same set of data.

E. Proliferation Response Index calculations were based on FlowJo data:

- **Division Index:** Total number of divisions / number of cells at the start of culture.
- **Proliferation Index:** Total number of divisions / cells that underwent division.
- **Expansion Index:** Total number of cells / cells at the start of culture.
- **Replication Index:** Total number of divided cells / cells that underwent division.

F. Cells (2.0×10^5 /well) were stimulated with varying concentrations of NP-containing components or ConA. After three days of incubation, cells were labeled with $10 \mu\text{M}$ BrdU for 24 hours, and the BrdU incorporation was detected colorimetrically at 490 nm. The percent response was calculated as follows: $[(\text{mean OD of antigen-stimulated group} - \text{mean OD of negative control group}) / \text{mean OD of negative control group}] \times 100$. L-T refers to the lysates of cells transfected with IVT Luc- Ψ mRNA, while Ψ -T denotes the lysates of cells transfected with IVT NP- Ψ mRNA using Lipofectamine 3000 and Xfect RNA Transfection Reagent. Statistical significance was determined by two-way ANOVA ($P \leq 0.0001$).

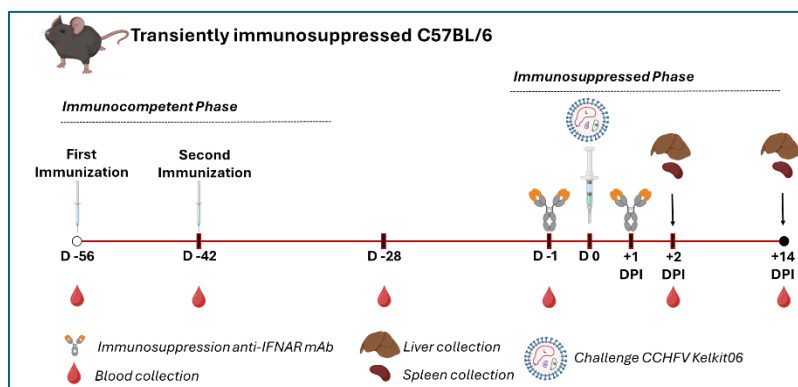
In addition to flow cytometry, lymphoproliferation experiments were conducted using BrdU labeling. This analysis was repeated with stimulatory components at different concentrations and found that NP-specific T cell responses showed higher rates of proliferation with increasing stimulatory concentrations (Figure 4F). It was also observed that the proliferating cells formed dense cell clusters (Figure S5) (appendix p 13).

Following in vitro stimulation, the cytokines produced by the cells were also determined at the mRNA level. For this purpose, cytokine mRNA levels were compared to control cells containing RPMI-PBS, and relative gene expression values were calculated. These results particularly showed increased responses for IFN gamma, IL-12, and TNF-alpha (Figure S6) (appendix p 14). Significant increases were also detected in IL-2 and IL-15 cytokine responses.

In Vivo Challenge Tests and Immune Correlates

Initial immunization and immune analyses conducted with Balb/c mice demonstrated that IVT NP- Ψ mRNAs could elicit a successful immune responses. At this point, the studies were transferred to the C57BL/6 mouse model, where viral challenges could be conducted. First, C57BL/6 mice were immunized twice, and anti-NP antibodies were searched in serum samples. It was determined that all mice were immunized prior to challenge and reached high antibody titers (Figure S7) (appendix p 15).

In the C57BL/6 mouse model, the efficacy of immunization was tested in challenge experiments conducted under immunosuppressive conditions. For this purpose, immunized mice were intraperitoneally challenged with 400 ppfu Kelkit CCHFV and monitored for two weeks post-infection. The results showed that IVT NP- Ψ mRNA-PLGA (n=6), Naked IVT NP- Ψ mRNA (n=6), and iCCHFV (n=5) with two doses of immunization provided complete protection against lethal CCHFV challenge (Figure 5A). The animals in these groups had fully recovered by day 14. In contrast, animals immunized with unrelated mRNA vaccines succumbed to fatal infection by day 5. In the IVT NP-mRNA-PLGA group, only 20% (n=1) of the mice and in the rNP immunized group 40% (n=2) recovered by day 14.



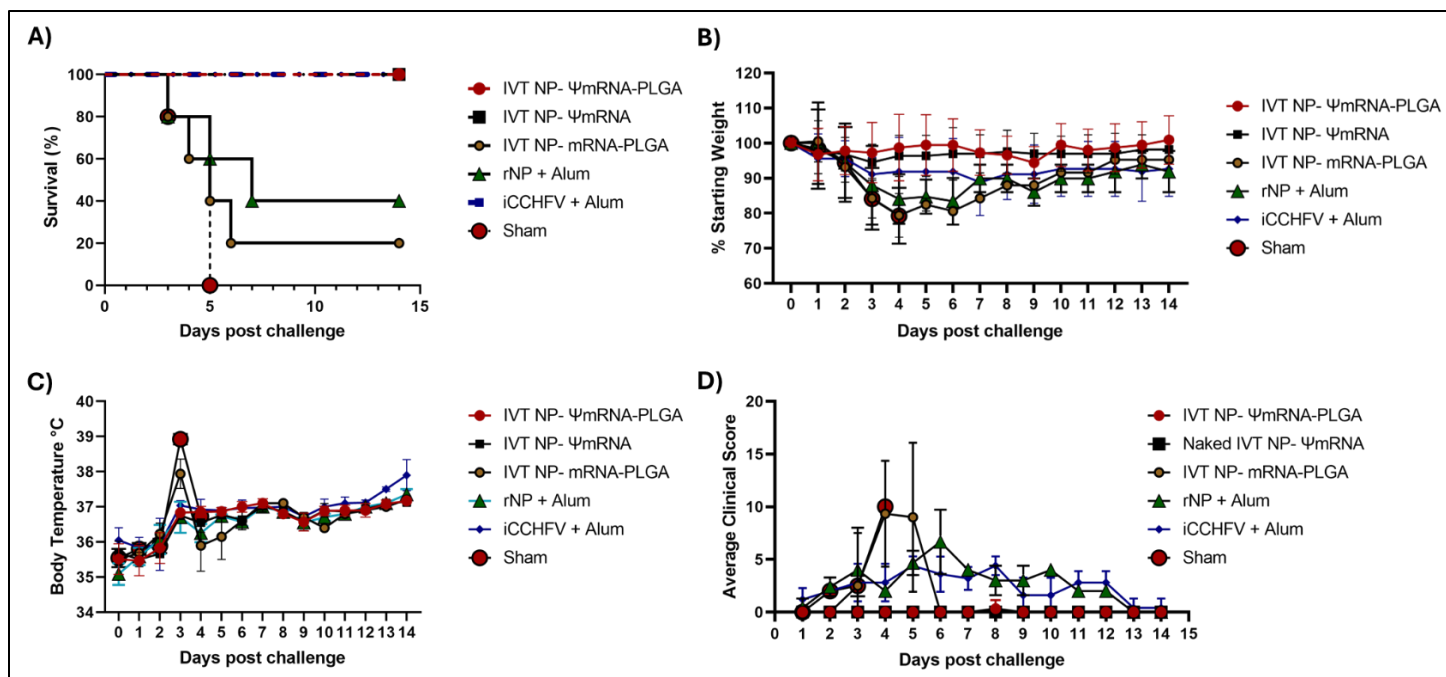


Figure 5. IVT NP-ΨmRNAs Provide Full Protection Against Lethal CCHFV Challenge in the C57BL/6 Mouse Model. C57BL/6 mice (n=48) were divided into six groups and immunized twice at 14-day intervals with IVT constructs, rNP, or iCCHFV, followed by a challenge with 400 PFU of CCHFV Turkey-Kelkit06 strain under immunosuppressive conditions. Mice immunized with IVT NP-ΨmRNA-PLGA, naked IVT NP-ΨmRNA, and iCCHFV exhibited complete protection, with no severe clinical symptoms observed by day 14 post-infection (A). Body weight (B), temperature (C), and clinical scores (D) were monitored.

The body weights (Figure 5B), body temperatures (Figure 5C), and clinical scores of the mice were monitored over the 14 days. These clinical scores are presented as the average for each group in Figure 5D. Additionally, the clinical scores of the mice in each group taken on different days were shown in a heat map format (Figure S8) (appendix p 16). Furthermore, in mice immunized with IVT NP- ΨmRNAs, in addition to full protection, no severe clinical symptoms were observed. It was noted that while inactive CCHFV provided 100% protection, it did not prevent the emergence of clinical symptoms.

Viral Load and qPCR Analyses

During the challenge, blood, liver, and spleen samples from randomly selected mice from each group were collected on day 2 (+2 DPI), the period when viral infection was at its peak. Total RNA was extracted from these samples, and cDNA templates were analyzed in real-time quantitative PCR using CCHFV Kelkit strain NP-specific qPCR primers. In analyses performed with real-time PCR, viral loads (viral copy number/ml) were calculated based on the obtained Ct values. According to these results, high viral loads were detected in the blood, liver, and spleen tissues of negative controls and IVT NP- mRNA-PLGA immunized animals. In the rNP+Alum immunized group, although the viral load in the blood was low, high viral loads were detected in liver and spleen samples. By the end of the experiment (+14 DPI), complete viral clearance was observed in all the surviving mice (Figure 6).

Endpoint Titer and Avidity Analyses

In immunized mice, another immune parameter tested was the humoral immune response. For this purpose, NP-specific IgM and IgG responses of the mice were analyzed before (-1 DPI), during (+2 DPI), and after the challenge (+14 DPI) (Figure S9) (appendix p 17). Accordingly, high IgG antibody responses were noticed in animals immunized with IVT NP- ΨmRNA-PLGA and Naked IVT NP- ΨmRNA before and after the challenge (Figure S9A). In the experimental groups that showed full protection, OD data tended to be higher, whereas in groups where protection was less than complete, OD values tended to be lower. A similar trend was noted in IgM assays (Figure S9C). Additionally, high antibody levels were detected in surviving mice after the challenge. These results were confirmed with NP-based in-house and commercial IgG tests (Figure S9B).

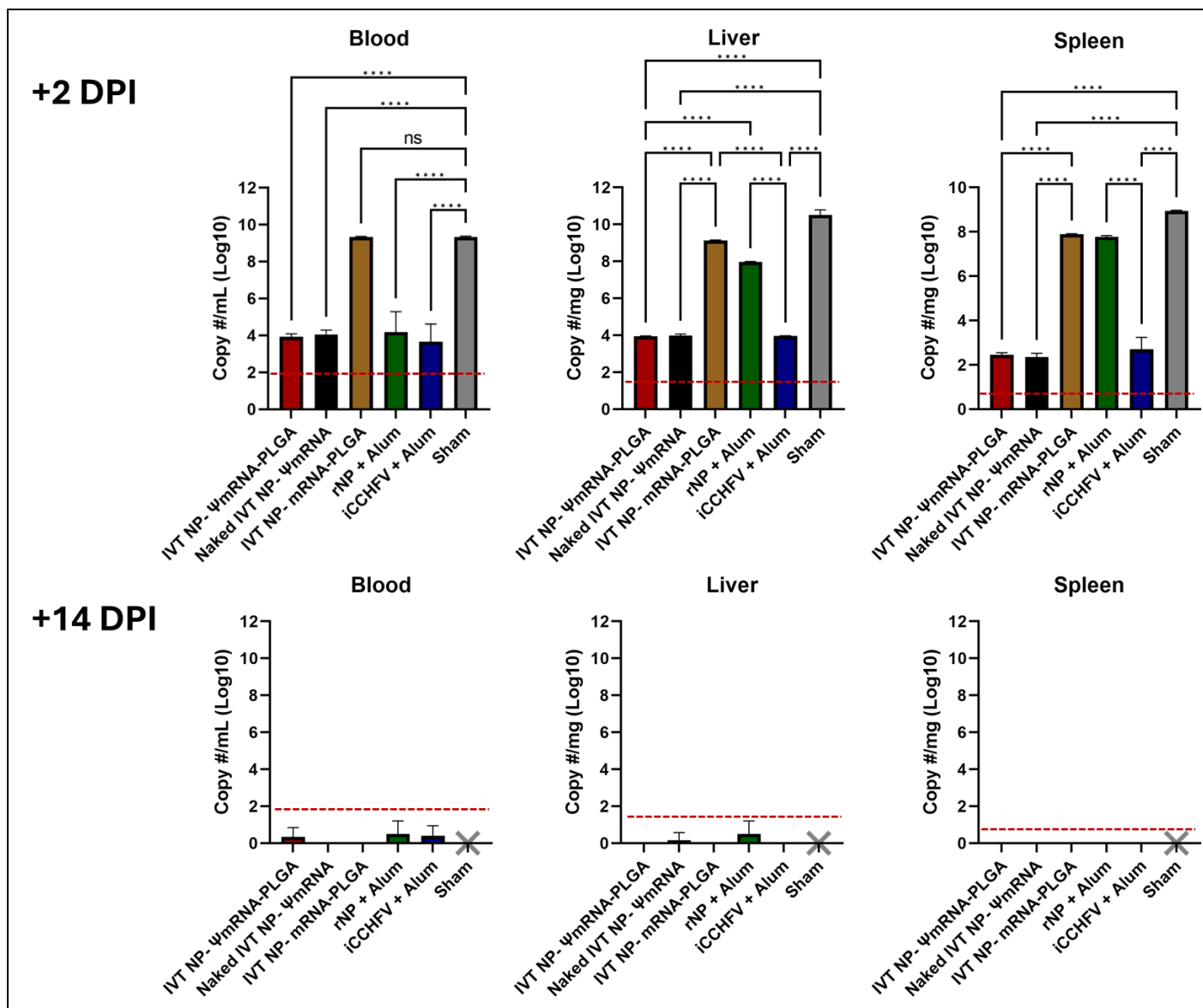


Figure 6. IVT NP-ΨmRNAs Lead to Complete Viral Clearance by 14 DPI in CCHFV Challenge. Total RNA was extracted from blood, liver, and spleen samples of C57BL/6 mice on day 2 (+2 DPI) and day 14 (+14 DPI) post-infection. Real-time quantitative PCR analysis was conducted using NP-specific qPCR primers for the CCHFV Kelkit strain. High viral loads were observed in the blood, liver, and spleen of negative control and IVT NP-mRNA-PLGA immunized mice. The rNP+Alum group exhibited low viral loads in the blood but high loads in the liver and spleen. Complete viral clearance was observed in all surviving mice by +14 DPI.

In our study, serum antibody endpoint titers were also determined. Here, pooled animal serum was tested. The endpoint titers of IgG antibodies formed during the periods of -28 DPI, -1 DPI, +2 DPI, and +14 DPI after the second vaccination (-28 DPI) are presented in Figure 7A. Accordingly, high antibody titers were found in the groups providing full protection on days -28, -1, and +2 DPI. In all mice that survived after the challenge (+14 DPI), the antibody endpoint titers showed similarly high levels. Particularly, the mouse groups with low endpoint titers during the -28 DPI and -1 DPI periods were IVT NP- mRNA-PLGA, rNP+Alum and iCCHFV+Alum groups. During the challenge, only the iCCHFV group among these groups managed to survive with clinical symptoms. Endpoint titers during the challenge were also found to be low in mouse groups with low survival rates. Although the endpoint titers were somewhat lower in iCCHFV group mice, in the survived animals following the challenge, the titers increased.

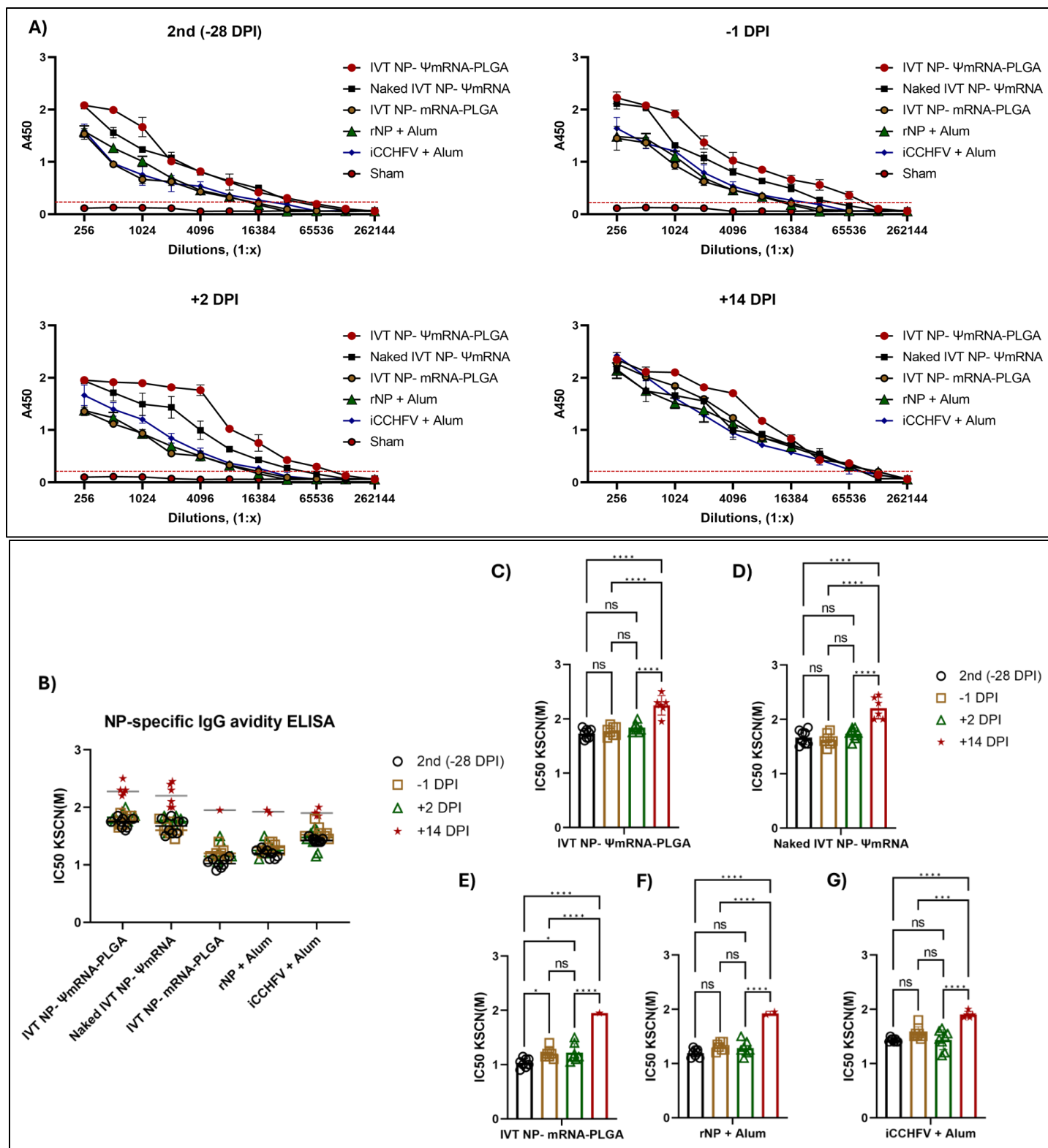


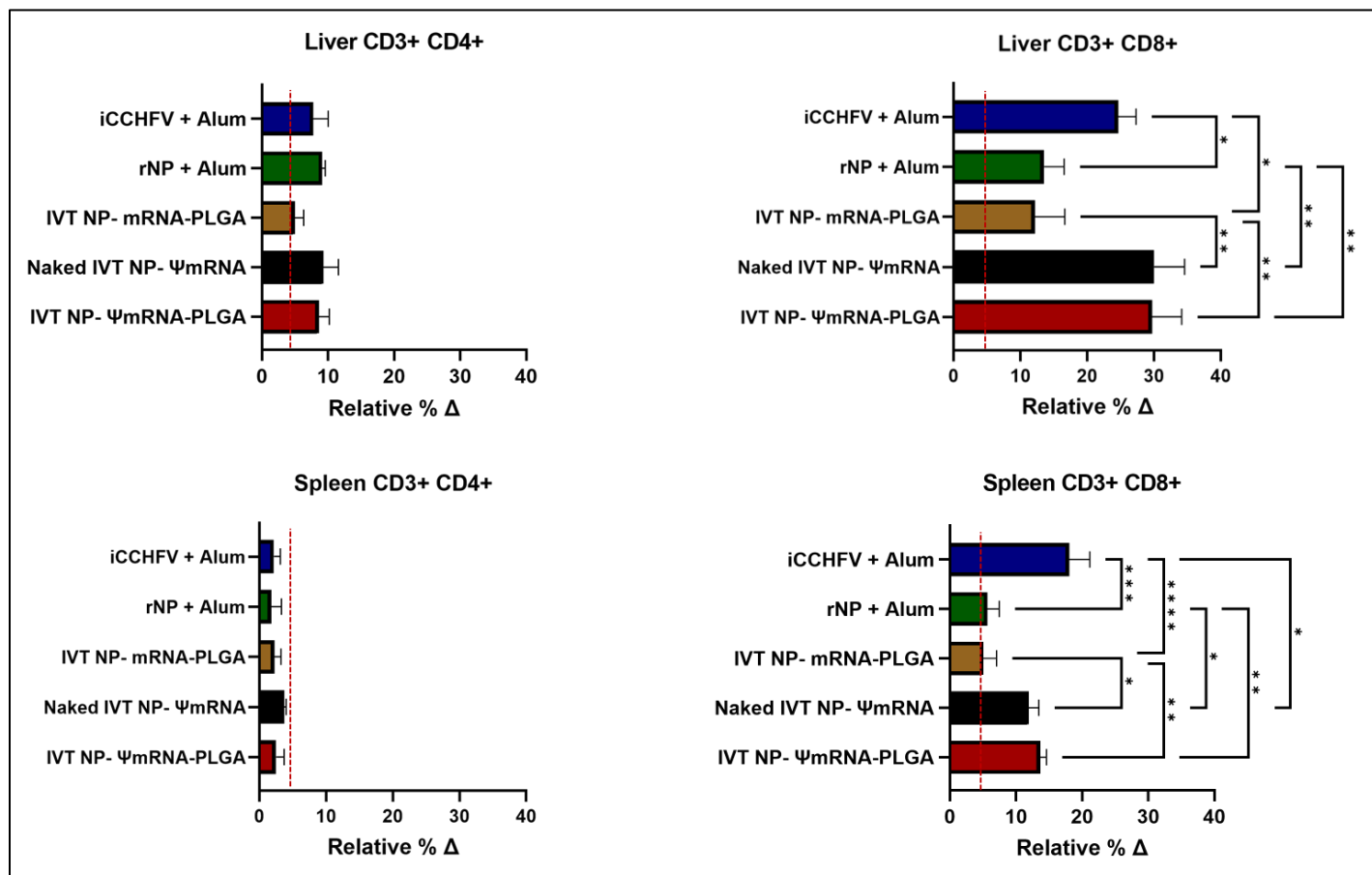
Figure 7. IVT NP-ΨmRNAs Induce High-Avidity Antibody Response with Elevated Endpoint Titers Post-Challenge. The avidity of NP-specific IgG antibodies was determined using the KSCN displacement assay. A) Endpoint titers were measured at multiple time points (-28 DPI, -1 DPI, +2 DPI, +14 DPI) following the second vaccination by EIA. High antibody titers were detected in IVT NP-ΨmRNA-PLGA and Naked IVT NP-ΨmRNA groups, correlating with full protection against CCHFV challenge. B) Antibody avidity was highest in the IVT NP-ΨmRNA-PLGA and Naked IVT NP-ΨmRNA groups before and after the challenge, while low-avidity groups improved avidity post-challenge. Figure 7C-G presents the detailed changes in antibody avidity, showing that even groups with initially low avidity successfully raised their response after the challenge.

This study also determined the avidity of antibodies stimulated in immunized mice (Figure 7B-G). Before the challenge, the antibodies with the highest avidity were found in the IVT NP- ΨmRNA-PLGA and Naked IVT NP- ΨmRNA mouse groups, while the antibody avidity results in other groups that did not show full protection

377 remained low (Figure 7B). After the challenge, it was observed that all surviving mice produced antibodies with
 378 high avidity compared to their own groups (Figure 7B). The avidity levels indicated that the antibodies showed
 379 very high avidity, and these high values were again highest in the IVT NP- Ψ mRNA-PLGA and Naked IVT NP-
 380 Ψ mRNA mouse groups. Additionally, changes in antibody avidity were observed in the same group of mice
 381 before and during the challenge (Figure 7C-G).

382 **Analysis of Cellular Immune Response: Increase of CD3+ CD8+ Cells in Liver and Spleen**

383 Alongside viral load tests conducted two days after the challenge, lymphocyte profiling was also performed on
 384 spleen and liver tissues, as shown in Figure 8. The relative proportions of CD4+ and CD8+ cells, compared to
 385 those in the sham group, were determined through flow cytometric measurements. Accordingly, a notable
 386 increase of up to 30% in CD8+ cells was observed, particularly in mouse groups with a 100% survival rate
 387 (Figure S10) (appendix p 18).



388 **Figure 8. Enhanced CD8+ T Cell Profile in Surviving Mice Post-Challenge.** Flow cytometry analysis of spleen and liver tissues showed a notable
 389 increase in CD8+ T cells, up to 30%, especially in mouse groups with a 100% survival rate at 2 dpi.
 390

391 **Analysis of Cellular Immunity: Cytokine Response**

392 To assess the elements of the cellular immunity, the gene expression levels of specific cytokines were
 393 determined in spleen and liver cells using qPCR analyses (+2 DPI). As shown in Figure 9, significant increases
 394 in IFN- γ , TNF- α , IL-10, IL-12, and IL-2 levels were detected in the liver and spleen compared to the Sham
 395 group. These increases were more pronounced in mouse groups with high survival rates. It was observed that
 396 IL-15, GM-CSF, and IL-4 levels rose particularly in the liver, while IL-10, IL-6, and IL-5 levels increased in IVT
 397 NP- Ψ mRNAs groups. IL-1 β was significantly elevated only in the liver of mice immunized with iCCHFV,
 398 whereas IL-17A was observed solely in the spleen. After cell sorting, the cytokine responses in CD3+CD8+ and
 399 CD3+CD4+ cells in the spleen and liver were also examined, revealing that IFN- γ , TNF- α , and IL-4 were
 400 closely associated with survival rates (Figure S11) ((appendix pp 19-20).

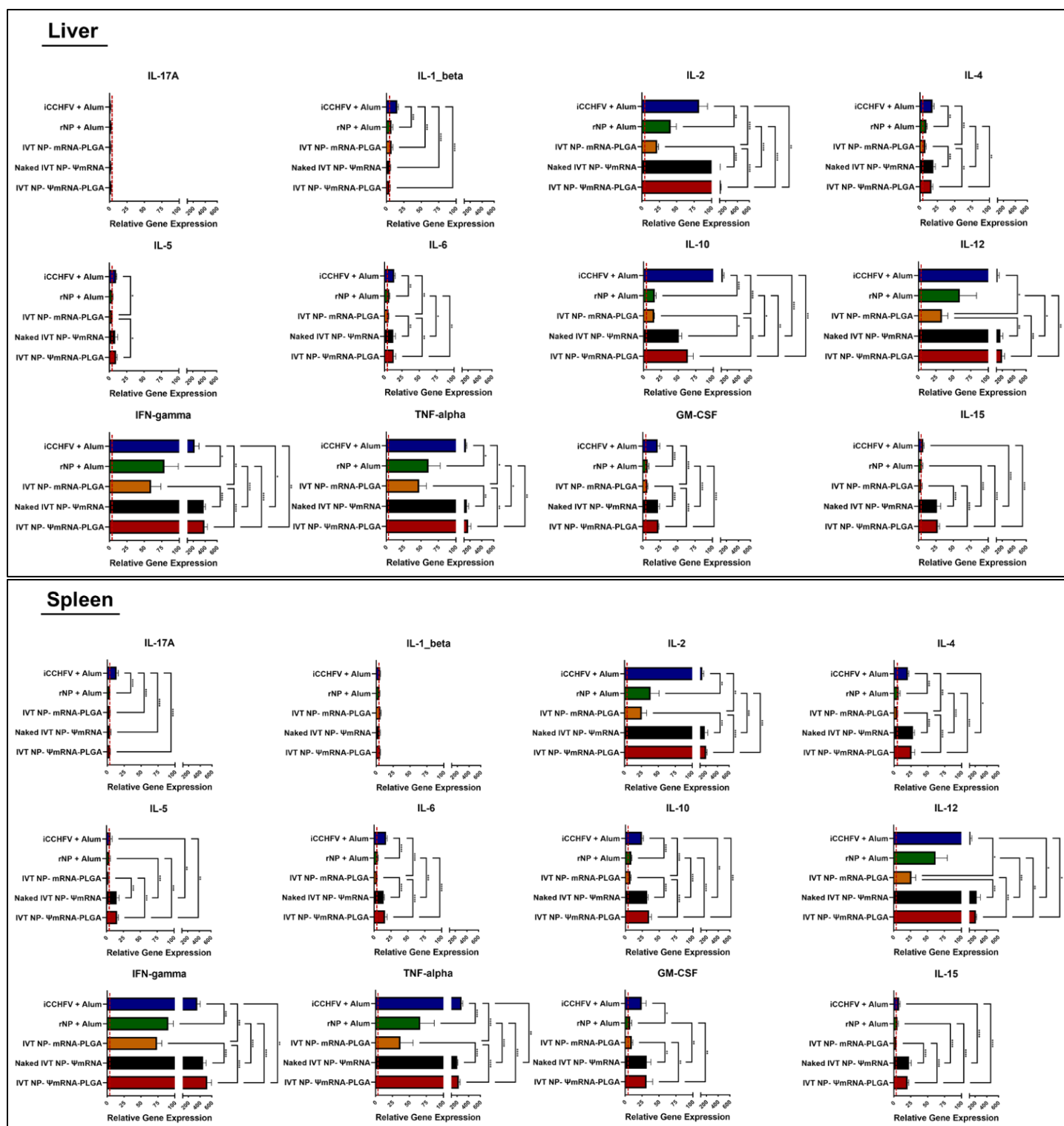


Figure 9. Cytokine Profiles in Liver and Spleen Cells Post-Immunization. qPCR analysis demonstrated significant increases in IFN- γ , TNF- α , IL-12, and IL-2 levels in liver and spleen tissues of immunized mice compared to the Sham group, with more pronounced increases in groups exhibiting high survival rates. Elevated levels of IL-15, GM-CSF, and IL-4 were particularly noted in the liver, while IL-10, IL-6, and IL-5 levels rose in IVT NP- Ψ mRNA groups. IL-1 β was significantly elevated only in the liver of iCCHFV-immunized mice, and IL-17A was detected solely in the spleen.

Discussion

The most remarkable finding of this study is the full protection observed in mice against a lethal challenge of CCHFV following immunization with IVT NP- Ψ mRNAs encoding NP only.

The report represents a part of a broader scrutiny into the potential of modified mRNA-based vaccines to elicit immune responses against various viral pathogens and tumors. The success of mRNA vaccines developed for COVID-19 has generated significant interest in applying this technology to other pathogens. Achieving a robust

413 immune response against lethal viruses like CCHFV is critical for public health in a large part of the world(26,
414 32-36). Previously, several vaccine candidates have been explored, including inactivated virus formulations,
415 vector-based vaccines, and even mRNA vaccines encoding CCHFV proteins(13, 18, 30, 34, 37-39). The
416 results of this study demonstrated that NP alone, when presented as a modified mRNA vaccine, could afford
417 complete protection against lethal challenge, therefore, pointing to the potential of a vaccine candidate
418 comprised of a single antigen for CCHFV infection (Figure 5). This might represent a welcome data for regions
419 affected by CCHF for which no approved vaccine formulation and antiviral treatment with proven antiviral
420 efficacy exist.

421 Our study provides compelling evidence that IVT-mRNA vaccination encoding the CCHFV NP antigen elicits a
422 robust immune response, demonstrating both humoral and cellular immunity against CCHFV infection. While
423 previous studies have explored alternative RNA-based platforms, such as alphavirus-derived replicating RNA
424 (repRNA) vaccines(40, 41), our findings highlight the effectiveness of a non-replicating IVT-mRNA approach.
425 Compared to previous reports in which a single 100 ng dose of repRNA encoding NP or a combination of NP
426 and GPC was used, our study employed IVT-mRNA encoding NP alone, which was sufficient to trigger a
427 completely protective immune response with a significant induction of IFN- γ -producing T cells.

428 In other reports, non-human primates (NHPs) were utilized as model organisms, where DNA vaccines and
429 repRNA platforms using NP as the primary antigen demonstrated that NP-based immunization elicits strong
430 but non-neutralizing antibody responses, contributing to protection(36, 42). These studies also indicated that
431 GPC-specific T cells play a pivotal role in viral clearance. Interestingly, our results align with this concept, as
432 we observed a predominant Th1-skewed immune response, further supporting the notion that cellular immunity
433 is a key determinant of protection against CCHFV. Moreover, it has been suggested that IFN- γ serves as a
434 crucial antiviral cytokine during acute CCHFV infection(43). Our data reinforce this hypothesis, as a marked
435 increase in IFN- γ expression was detected post-immunization, emphasizing the protective role of T-cell
436 responses in mRNA vaccine-induced immunity.

437 The question of whether an internal viral protein can afford protective humoral antiviral immunity has recently
438 been addressed(44). Accordingly, a TRIM21-mediated mechanism plays a key role in antibody-mediated
439 protection, where the intracellular Fc receptor TRIM21 is functional. Whether a similar mechanistic role is
440 played by TRIM21 in our model remains to be addressed.

441 The in vitro transcripts of Ψ -modified mRNA are reported to have increased stability and led to minimized
442 innate immune responses(45, 46). In our study, we have shown that IVT Ψ -modified mRNA expressed
443 abundantly in transfected Huh-7 cells, as demonstrated in Western blot, EIA, and immunofluorescence assays
444 (Figure 2). The temporal analysis showed that up to the 48th hour post-transfection, the cells continued to
445 synthesize the viral protein from transfected templates, pointing to the stability of the mRNAs. More
446 significantly, however, Ψ -modified mRNA induced fully protective immunity against lethal viral challenge
447 compared to unmodified mRNA (Figure 5), therefore confirming the previously published extensive data on the
448 increased immunogenicity of engineered mRNA containing Ψ (11, 13, 47).

449 After the production of IVT mRNA, the vaccines were formulated with PLGA nanoparticles to enhance mRNA
450 stability and resistance to enzymatic degradation. PLGA is also reported to improve immune responses by
451 enhancing controlled release and biodistribution(16, 27, 29). In this study, PLGA-nanoparticle-formulated
452 vaccine candidate (IVT NP- Ψ mRNA-PLGA) did not induce significantly stronger immune responses compared
453 to naked IVT NP- Ψ mRNA. The full impact of PLGA on NP vaccinations could be assessed in a setting where
454 different concentrations of antigens are utilized.

455 Inactive viral antigens iCCHFV introduced in aluminum hydroxide, a commonly used human adjuvant, were
456 also effective against viral challenge (Figure 5), confirming previously reported data where full virions could
457 protect against viral challenges(18). When NP alone is introduced to the immune system as a protein antigen,
458 it appears that the protection is diminished significantly to 40% (Figure 5). These findings are not surprising
459 given the many previous reports on the incomplete immunity acquired following NP immunizations as a single
460 antigen(13, 23, 39, 48, 49).

In this study, we also evaluated both humoral and cellular immune responses in the immunized animals. Humoral immune responses, evaluated using serum EIA tests, showed high NP-specific IgG antibody titers in mice immunized with IVT NP- Ψ mRNAs (Figure 3 and 7). These results demonstrate that the vaccine generated a robust humoral response in both BALB/c and C57BL/6 mouse models. Lymphoproliferation and flow cytometry analyses confirmed that the vaccines also induced a strong cellular immune response against CCHFV, with an increased CD8⁺ T-cell population in the liver and spleen, correlating with the vaccine's protective efficacy.

Challenge experiments revealed that both the IVT NP- Ψ mRNA-PLGA formulation and naked IVT NP- Ψ mRNA provided 100% survival rates and significantly reduced viral loads in the liver and spleen (Figure 6). These findings suggest that Ψ -modified mRNA vaccines could reduce the number of viruses in visceral organs, which might have critical roles in the development of fatal hemorrhagic fever. Comparing the results from the PLGA-encapsulated IVT NP- Ψ mRNA group with naked Ψ mRNA test subjects, we noticed that the difference was not striking. It is likely that additional studies with different encapsulation methods, such as those with other lipid nanoparticles, might provide further information on this question.

Cytokine response analysis showed that IVT NP- Ψ mRNAs immunizations increased the production of pro-inflammatory cytokines such as IFN- γ , TNF- α , IL-2, and IL-12. These cytokines are also involved in promoting cellular immune responses. The elevated levels of these cytokines could indicate that IVT NP- Ψ mRNAs immunization might favor a strong cellular and inflammatory response against viral infection. Obviously, these points need to be scrutinized in more detail.

In conclusion, our IVT NP- Ψ mRNA vaccine candidate demonstrated complete protection against CCHFV by inducing both humoral and cellular immune responses, with PLGA-nanoparticle formulations highlighting their potential as an effective strategy for combating future viral threats. These findings, in conjunction with previous studies, underscore the importance of NP as a promising target for CCHFV vaccine development and reaffirm the potential of Ψ -modified mRNA vaccines to generate strong immune responses against viral hemorrhagic fever agents. Moreover, our IVT-mRNA platform offers a safer and more scalable alternative to existing DNA and replicating RNA-based approaches. Future studies should focus on assessing the durability and breadth of immune responses, as well as conducting challenge experiments in higher animal models, to facilitate the clinical translation of NP-based mRNA vaccines.

References

1. Bente DA, Forrester NL, Watts DM, McAuley AJ, Whitehouse CA, Bray M. 2013. Crimean-Congo hemorrhagic fever: History, epidemiology, pathogenesis, clinical syndrome and genetic diversity. *Antiviral Research* 100:159-189.
2. Aslani D, Salehi-Vaziri M, Baniasadi V, Jalali T, Azad-Manjiri S, Mohammadi T, Khakifirouz S, Fazlalipour M. 2017. Crimean-Congo hemorrhagic fever among children in Iran. *Archives of Virology* 162:721-725.
3. Monteil VM, Wright SC, Dyczynski M, Kellner MJ, Appelberg S, Platzer SW, Ibrahim A, Kwon H, Pittarokoilis I, Mirandola M, Michlits G, Devignot S, Elder E, Abdurahman S, Bereczky S, Bagci B, Youhanna S, Aastrup T, Lauschke VM, Salata C, Elaldi N, Weber F, Monserrat N, Hawman DW, Feldmann H, Horn M, Penninger JM, Mirazimi A. 2024. Crimean-Congo haemorrhagic fever virus uses LDLR to bind and enter host cells. *Nat Microbiol* 9:1499-1512.
4. Hawman DW, Feldmann H. 2023. Crimean-Congo haemorrhagic fever virus. *Nat Rev Microbiol* 21:463-477.
5. Grandi G, Chitimia-Dobler L, Choklikitumnuey P, Strube C, Springer A, Albiñ A, Jaenson TGT, Omazic A. 2020. First records of adult *Hyalomma marginatum* and *H. rufipes* ticks (Acari: Ixodidae) in Sweden. *Ticks Tick Borne Dis* 11:101403.
6. Negrodo A, de la Calle-Prieto F, Palencia-Herrejón E, Mora-Rillo M, Astray-Mochales J, Sánchez-Seco MP, Lopez EB, Menárguez J, Fernández-Cruz A, Sánchez-Artola B, Keough-Delgado E, de Arellano ER, Lasala F, Milla J, Fraile JL, Gavín MO, de la Gándara AM, Perez LL, Diaz-Díaz D, López-García MA, Delgado-Jimenez P, Martín-Quirós A, Trigo E, Figueira JC, Manzanares J, Rodríguez-Baena E, García-Comas L, Rodríguez-Fraga O, García-Arenzana N, Fernández-Díaz MV, Cornejo VM,

- 512 Emmerich P, Schmidt-Chanasit J, Arribas JR, Fever CCH. 2017. Autochthonous Crimean-Congo
513 Hemorrhagic Fever in Spain. *New England Journal of Medicine* 377:154-161.
- 514 7. Nasirian H. 2020. New aspects about Crimean-Congo hemorrhagic fever (CCHF) cases and associated
515 fatality trends: A global systematic review and meta-analysis. *Comparative Immunology Microbiology
516 and Infectious Diseases* 69.
- 517 8. WHO. 2015. Prioritizing Diseases for Research and Development in Emergency Contexts. (Available
518 online:[https://www.who.int/activities/prioritizing-diseases-for-research-and-development-in-emergency-
519 contexts](https://www.who.int/activities/prioritizing-diseases-for-research-and-development-in-emergency-contexts). Accessed 10 October 2024.
- 520 9. Keshtkar-Jahromi M, Kuhn JH, Christova I, Bradfute SB, Jahrling PB, Bavari S. 2011. Crimean-Congo
521 hemorrhagic fever: Current and future prospects of vaccines and therapies. *Antiviral Research* 90:85-
522 92.
- 523 10. Vogel AB, Kanevsky I, Che Y, Swanson KA, Muik A, Vormehr M, Kranz LM, Walzer KC, Hein S, Güler
524 A, Loschko J, Maddur MS, Ota-Setlik A, Tompkins K, Cole J, Lui BG, Ziegenhals T, Plaschke A, Eisel D,
525 Dany SC, Fesser S, Erbar S, Bates F, Schneider D, Jesionek B, Sängler B, Wallisch AK, Feuchter Y,
526 Junginger H, Krumm SA, Heinen AP, Adams-Quack P, Schlereth J, Schille S, Kröner C, Garcia RDG,
527 Hiller T, Fischer L, Sellers RS, Choudhary S, Gonzalez O, Vascotto F, Gutman MR, Fontenot JA, Hall-
528 Ursone S, Brasky K, Griffor MC, Han S, Su AAH, Lees JA, et al. 2021. BNT162b vaccines protect
529 rhesus macaques from SARS-CoV-2. *Nature* 592:283+.
- 530 11. Pardi N, Hogan MJ, Pelc RS, Muramatsu H, Andersen H, DeMaso CR, Dowd KA, Sutherland LL,
531 Searce RM, Parks R, Wagner W, Granados A, Greenhouse J, Walker M, Willis E, Yu JS, Mcgee CE,
532 Sempowski GD, Mui BL, Tam YK, Huang YJ, Vanlandingham D, Holmes VM, Balachandran H, Sahu S,
533 Lifton M, Higgs S, Hensley SE, Madden TD, Hope MJ, Karikó K, Santra S, Graham BS, Lewis MG,
534 Pierson TC, Haynes BF, Weissman D. 2017. Zika virus protection by a single low-dose nucleoside-
535 modified mRNA vaccination. *Nature* 543:248+.
- 536 12. Pardi N, Hogan MJ, Weissman D. 2020. Recent advances in mRNA vaccine technology. *Current
537 Opinion in Immunology* 65:14-20.
- 538 13. Appelberg S, John L, Pardi N, Végvári A, Bereczky S, Ahlén G, Monteil V, Abdurahman S, Mikaeloff F,
539 Beattie M, Tam Y, Sällberg M, Neogi U, Weissman D, Mirazimi A. 2022. Nucleoside-Modified mRNA
540 Vaccines Protect IFNAR^{-/-} Mice against Crimean-Congo Hemorrhagic Fever Virus
541 Infection. *Journal of Virology* 96.
- 542 14. Richner JM, Himansu S, Dowd KA, Butler SL, Salazar V, Fox JM, Julander JG, Tang WW, Shresta S,
543 Pierson TC, Ciaramella G, Diamond MS. 2017. Modified mRNA Vaccines Protect against Zika Virus
544 Infection. *Cell* 168:1114+.
- 545 15. Keskin S, Sak R, Bahadori F, Doymaz MZ. Immunological Characterization of PLGA Encapsulated
546 mRNA Expressing Crimean-Congo Haemorrhagic Fever Virus (CCHFV) Nucleocapsid Protein (NP)
547 [Oral Presentation], p. *In* (ed),
- 548 16. Sharifnia Z, Bandehpour M, Hamishehkar H, Mosaffa N, Kazemi B, Zarghami N. 2019. Transcribed
549 mRNA Delivery Using PLGA/PEI Nanoparticles into Human Monocyte-derived Dendritic Cells. *Iranian
550 Journal of Pharmaceutical Research* 18:1659-1675.
- 551 17. Ceylan S, Bahadori F, Akbas F. 2020. Engineering of siRNA loaded PLGA Nano-Particles for highly
552 efficient silencing of GPR87 gene as a target for pancreatic cancer treatment. *Pharmaceutical
553 Development and Technology* 25:855-864.
- 554 18. Pavel STI, Yetiskin H, Kalkan A, Ozdarendeli A. 2020. Evaluation of the cell culture based and the
555 mouse brain derived inactivated vaccines against Crimean-Congo hemorrhagic fever virus in transiently
556 immune-suppressed (IS) mouse model. *Plos Neglected Tropical Diseases* 14.
- 557 19. Guler Cetin NS, Bakangil O, Kalkan Yazici M, Keskin S, Doymaz MZ. 2024. Development of a Novel
558 Plasmid-based Eukaryotic Model to Investigate Crimean-Congo Hemorrhagic Fever Virus. *Bezmialem
559 Science* 12:164-172.
- 560 20. Berber E, Canakoglu N, Yoruk MD, Tonbak S, Aktas M, Ertek M, Bolat Y, Kalkan A, Ozdarendeli A.
561 2013. Application of the pseudo-plaque assay for detection and titration of Crimean-Congo hemorrhagic
562 fever virus. *Journal of Virological Methods* 187:26-31.
- 563 21. Petrov DP, Kaiser S, Kaiser S, Jung K. 2022. Opportunities and Challenges to Profile mRNA
564 Modifications in *Escherichia coli*. *ChemBioChem* 23:e202200270.
- 565 22. Livak KJ, Schmittgen TD. 2001. Analysis of Relative Gene Expression Data Using Real-Time
566 Quantitative PCR and the 2- $\Delta\Delta$ CT Method. *Methods* 25:402-408.

- 567 23. Karaaslan E, Cetin NS, Kalkan-Yazici M, Hasanoglu S, Karakecili F, Ozdarendeli A, Kalkan A, Kilic AO,
568 Doymaz MZ. 2021. Immune responses in multiple hosts to Nucleocapsid Protein (NP) of Crimean-
569 Congo Hemorrhagic Fever Virus (CCHFV). *PLoS Negl Trop Dis* 15:e0009973.
- 570 24. Kalkan-Yazıcı M, Karaaslan E, Güler-Çetin NS, Doymaz MZ. 2024. Cellular immunity to nucleoproteins
571 (NP) of Crimean-Congo hemorrhagic fever virus (CCHFV) and Hazara Virus (HAZV). *Med Microbiol*
572 *Immunol* 213:20.
- 573 25. Portilho AI, Santos JS, Trzewikowski de Lima G, Lima GG, De Gaspari E. 2023. Study of avidity-ELISA:
574 Comparison of chaotropic agents, incubation temperature and affinity maturation after meningococcal
575 immunization. *Journal of Immunological Methods* 512:113387.
- 576 26. Saunders JE, Gilbride C, Dowall S, Morris S, Ulaszewska M, Spencer AJ, Rayner E, Graham VA,
577 Kennedy E, Thomas K, Hewson R, Gilbert SC, Belij-Rammerstorfer S, Lambe T. 2023. Adenoviral
578 vectored vaccination protects against Crimean-Congo Haemorrhagic Fever disease in a lethal
579 challenge model. *EBioMedicine* 90:104523.
- 580 27. Bahadori F, Eskandari Z, Ebrahimi N, Bostan MS, Eroglu MS, Oner ET. 2019. Development and
581 optimization of a novel PLGA-Levan based drug delivery system for curcumin, using a quality-by-design
582 approach. *European Journal of Pharmaceutical Sciences* 138.
- 583 28. Kacar AK, Bahadori F, Tekkeli SEK, Topcu G, Bolkent S. 2020. Investigation of cell death mechanism
584 and activity of esculetin-loaded PLGA nanoparticles on insulinoma cells. *Journal of Pharmacy and*
585 *Pharmacology* 72:592-606.
- 586 29. Karata D, Bahadori F, Tekin A, Kizilcay GE, Celik MS. 2022. Enhancing the Kinetic Stability of
587 Polymeric Nanomicelles (PLGA) Using Nano-Montmorillonite for Effective Targeting of Cancer Tumors.
588 *Journal of Physical Chemistry B* 126:463-479.
- 589 30. Canakoglu N, Berber E, Tonbak S, Ertek M, Sozdutmaz I, Aktas M, Kalkan A, Ozdarendeli A. 2015.
590 Immunization of knock-out alpha/beta interferon receptor mice against high lethal dose of Crimean-
591 Congo hemorrhagic fever virus with a cell culture based vaccine. *PLoS Negl Trop Dis* 9:e0003579.
- 592 31. Spengler JR, Welch SR, Scholte FEM, Rodriguez SE, Harmon JR, Coleman-McCray JD, Nichol ST,
593 Montgomery JM, Bergeron E, Spiropoulou CF. 2021. Viral replicon particles protect IFNAR^{-/-} mice
594 against lethal Crimean-Congo hemorrhagic fever virus challenge three days after vaccination. *Antiviral*
595 *Research* 191:105090.
- 596 32. Vasmehjani AA, Pouriayevali MH, Shahmahmoodi S, Salehi-Vaziri M. 2024. Persistence of IgG and
597 neutralizing antibodies in Crimean-Congo hemorrhagic fever survivors. *J Med Virol* 96:e29581.
- 598 33. Scholte FEM, Karaaslan E, O'Neal TJ, Sorvillo TE, Genzer SC, Welch SR, Coleman-McCray JD,
599 Spengler JR, Kainulainen MH, Montgomery JM, Pegan SD, Bergeron E, Spiropoulou CF. 2023.
600 Vaccination with the Crimean-Congo hemorrhagic fever virus viral replicon vaccine induces NP-based
601 T-cell activation and antibodies possessing Fc-mediated effector functions. *Frontiers in Cellular and*
602 *Infection Microbiology* 13.
- 603 34. Ozdarendeli A. 2023. Crimean-Congo Hemorrhagic Fever Virus: Progress in Vaccine Development.
604 *Diagnostics* 13.
- 605 35. Garrison AR, Shoemaker CJ, Golden JW, Fitzpatrick CJ, Suschak JJ, Richards MJ, Badger CV, Six
606 CM, Martin JD, Hannaman D, Zivcec M, Bergeron E, Koehler JW, Schmaljohn CS. 2017. A DNA
607 vaccine for Crimean-Congo hemorrhagic fever protects against disease and death in two lethal mouse
608 models. *Plos Neglected Tropical Diseases* 11.
- 609 36. Hawman DW, Ahlén G, Appelberg KS, Meade-White K, Hanley PW, Scott D, Monteil V, Devignot S,
610 Okumura A, Weber F, Feldmann H, Sällberg M, Mirazimi A. 2021. A DNA-based vaccine protects
611 against Crimean-Congo haemorrhagic fever virus disease in a Cynomolgus macaque model. *Nat*
612 *Microbiol* 6:187-195.
- 613 37. Mirazimi A. 2023. Nucleoside-Modified Mrna Vaccines Protect Ifnar ^{-/-} Mice against Crimean-Congo
614 Hemorrhagic Fever Virus Infection. *International Journal of Infectious Diseases* 130:S11-S11.
- 615 38. Berber E, Canakoglu N, Tonbak S, Ozdarendeli A. 2021. Development of a protective inactivated
616 vaccine against Crimean-Congo hemorrhagic fever infection. *Heliyon* 7:e08161.
- 617 39. Farzani TA, Földes K, Ergünay K, Gurdal H, Bastug A, Ozkul A. 2019. Immunological Analysis of a
618 CCHFV mRNA Vaccine Candidate in Mouse Models. *Vaccines* 7.
- 619 40. Leventhal SS, Meade-White K, Rao D, Haddock E, Leung J, Scott D, Archer J, Randall S, Erasmus JH,
620 Feldmann H, Hawman DW. 2022. Replicating RNA vaccination elicits an unexpected immune response
621 that efficiently protects mice against lethal Crimean-Congo hemorrhagic fever virus challenge.
622 *Ebiomedicine* 82.

- 623 41. Leventhal SS, Meade-White K, Shaia C, Tipih T, Lewis M, Mihalakakos EA, Hinkley T, Khandhar AP,
624 Erasmus JH, Feldmann H, Hawman DW. 2024. Single dose, dual antigen RNA vaccines protect against
625 lethal Crimean-Congo haemorrhagic fever virus infection in mice. *EBioMedicine* 101:105017.
- 626 42. Hawman DW, Leventhal SS, Meade-White K, Khandhar A, Murray J, Lovaglio J, Shaia C, Saturday G,
627 Hinkley T, Erasmus J, Feldmann H. 2024. A replicating RNA vaccine confers protection in a rhesus
628 macaque model of Crimean-Congo hemorrhagic fever. *NPJ Vaccines* 9:86.
- 629 43. Hawman DW, Meade-White K, Leventhal S, Carmody A, Haddock E, Hasenkrug K, Feldmann H. 2021.
630 T-Cells and Interferon Gamma Are Necessary for Survival Following Crimean-Congo Hemorrhagic
631 Fever Virus Infection in Mice. *Microorganisms* 9.
- 632 44. Leventhal SS, Bisom T, Clift D, Rao D, Meade-White K, Shaia C, Murray J, Mihalakakos EA, Hinkley T,
633 Reynolds SJ, Best SM, Erasmus JH, James LC, Feldmann H, Hawman DW. 2024. Antibodies targeting
634 the Crimean-Congo Hemorrhagic Fever Virus nucleoprotein protect via TRIM21. *Nature*
635 *Communications* 15:9236.
- 636 45. Kariko K, Buckstein M, Ni H, Weissman D. 2005. Suppression of RNA recognition by Toll-like receptors:
637 the impact of nucleoside modification and the evolutionary origin of RNA. *Immunity* 23:165-75.
- 638 46. Pardi N, Tuyishime S, Muramatsu H, Kariko K, Mui BL, Tam YK, Madden TD, Hope MJ, Weissman D.
639 2015. Expression kinetics of nucleoside-modified mRNA delivered in lipid nanoparticles to mice by
640 various routes. *J Control Release* 217:345-51.
- 641 47. Pardi N, Parkhouse K, Kirkpatrick E, McMahon M, Zost SJ, Mui BL, Tam YK, Kariko K, Barbosa CJ,
642 Madden TD, Hope MJ, Krammer F, Hensley SE, Weissman D. 2018. Nucleoside-modified mRNA
643 immunization elicits influenza virus hemagglutinin stalk-specific antibodies. *Nat Commun* 9:3361.
- 644 48. Zivcec M, Safronetz D, Scott DP, Robertson S, Feldmann H. 2018. Nucleocapsid protein-based vaccine
645 provides protection in mice against lethal Crimean-Congo hemorrhagic fever virus challenge. *Plos*
646 *Neglected Tropical Diseases* 12.
- 647 49. Karaaslan E, Sorvillo TE, Scholte FEM, O'Neal TJ, Welch SR, Davies KA, Coleman-McCray JD,
648 Harmon JR, Ritter JM, Pegan SD, Montgomery JM, Spengler JR, Spiropoulou CF, Bergeron É. 2024.
649 Crimean Congo hemorrhagic fever virus nucleoprotein and GP38 subunit vaccine combination prevents
650 morbidity in mice. *npj Vaccines* 9:148.