Nelfinavir markedly improves lung pathology in SARS-CoV-2-infected Syrian hamsters despite a

lack of an antiviral effect

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Abstract

In response to the ongoing COVID-19 pandemic, repurposing of drugs for the treatment of SARS-CoV-

2 infections is being explored. The FDA-approved HIV protease inhibitor Nelfinavir is one of the drugs

that has been reported to inhibit *in vitro* SARS-CoV2 replication. We here report on the effect of

Nelfinavir in the Syrian hamster SARS-CoV-2 infection model. Although treatment of infected hamsters

with either 15 mg/kg BID or 50 mg/kg BID Nelfinavir [for four consecutive days, initiated on the day of

infection] did not reduce viral RNA loads nor infectious virus titres in the lungs (as compared to the

vehicle control at the end of treatment) the drug markedly improved virus-induced lung pathology at

doses that were well tolerated. Yet, a massive interstitial infiltration of neutrophils was observed in

the lungs of treated (infected and uninfected) animals. The protective effect of Nelfinavir on SARS-

CoV-2-induced lung pathology that is unrelated to an antiviral effect warrants further exploration in

the context of the treatment of COVID-19.

Keywords

COVID-19; SARS-CoV-2; Antivirals; Nelfinavir; preclinical model.

Main text

The severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) resulted in more than 2.0 million

deaths within the time-span of a year after its discovery (1). SARS-CoV-2-induced COVID-19 is mainly

an inflammatory disease that displays a variety of symptoms including fever, dry cough, muscle

weakness, loss of sense of taste and smell, and diarrhea (2). In some patients, the disease is

accompanied with a massive cytokine storm and exaggerated immune response, resulting in severe

complications such as acute respiratory distress syndrome (ARDS), respiratory failure, septic shock and

multi-organ failure (2). There are no specific coronavirus antiviral drugs available to treat or prevent

infections with human coronaviruses. Since the *de novo* development of (a) potent specific antiviral(s)

for SARS-CoV-2 will take several years, repurposing of clinically approved/evaluated drugs is currently

adopted for rapid identification of treatment for COVID-19 (3).

Nelfinavir mesylate (Viracept) is an FDA-approved HIV-protease inhibitor (PI) (4). By inhibiting the HIV-

1 protease, it prevents the cleavage of viral Gag and Gag-Pol polyproteins, resulting in immature and

non-infectious virus particles (5,6). Nelfinavir has been reported to result in some *in vitro* inhibitory

activity against SARS-CoV-2. Additionally, inhibition of SARS-CoV-2 Spike glycoprotein mediated cell-

fusion has been reported (7–9) and *in silico* docking studies predict binding of Nelfinavir for the

catalytic site of the SARS-CoV-2 main protease, M^{pro} (10–12).

In this study, we wanted to assess whether Nelfinavir results in antiviral effect against SARS-CoV-2 in

Syrian hamsters, which are highly susceptible to infection with the virus. High viral titers are reached

in the lung upon infection and the animals develop of COVID-like lung pathology (13,14). The model is

well-suited to assess the impact of antiviral drugs as we and others have demonstrated. Notably, we

have demonstrated that Favipiravir and Molnupiravir (EIDD-2801) markedly reduce SARS-CoV-2

replication in hamsters, whereas hydroxychloroquine does not (14,15).

Six to eight weeks female Syrian Golden hamsters were treated with Nelfinavir (15 mg/kg/dose or 50

mg/kg/dose) or the vehicle control by intraperitoneal injection (IP) within one hour before intranasal

infection with 50 µl containing 2×10^6 TCID$_{50}$ of SARS-CoV-2 [BetaCov/Belgium/GHB-03021/2020 (EPI

ISL 109 72 407976|2020-02-03)] (Fig. 1A). The drug as well as the vehicle control were administered

twice daily for four consecutive days. At day four post-infection, lungs were collected at end-point

sacrifice (day 4 p.i) for viral RNA load and infectious virus titres quantification as well as lung

histopathology as previously described (14). Groups treated with either 15 mg/kg BID or 50 mg/kg BID

Nelfinavir had comparable levels of lung viral RNA load and infectious virus titres as the vehicle control

group (Fig. 1B, C), indicating a lack of *in vivo* antiviral efficacy of Nelfinavir in this model. Hamsters in

the control and 15 mg/kg BID Nelfinavir-treated groups maintained relatively stable weights

throughout the study, whereas a general weight loss of up to 10% was observed in the 50 mg/kg BID

Nelfinavir-treated group as compared to the vehicle group at 0 dpi (Fig. 1D). This weight loss can be

attributed to the combination of SARS-CoV-2 infection and 50 mg/kg BID Nelfinavir treatment, as this

dose alone did not affect the weight of two uninfected hamsters (data not shown). No other obvious

adverse effects were observed in either of the treatment groups. Remarkedly and intriguingly, in

infected animals treated with the 50 mg/kg BID Nelfinavir dose, a significant three-fold reduction in

the overall histological disease score compared to the placebo control was noted. In fact, the

histopathology score in the treated group was more or less comparable to the baseline score in

untreated non-infected hamsters (median score of 1.25) (Fig. 2A). Yet, despite this remarkable

beneficial effect on lung pathology, an unusual interstitial infiltration of neutrophils was noted in the

treated animals (Fig. 2A, 2B). Two uninfected hamsters treated with 50 mg/kg Nelfinavir had

histopathology scores at the baseline of 1 but presented as well with neutrophil infiltration (data not

shown), confirming that these intriguing observations are indeed attributed to Nelfinavir treatment.

To confirm the exposure of treated hamsters to Nelfinavir in the group treated with 50 mg/kg BID,

plasma levels of Nelfinavir were determined at the time of sacrifice (16h after the last treatment),

whereby average plasma concentrations of 174 nM were observed.

Taken together, although Nelfinavir does not reduce viral load in the lungs of SARS-CoV-2-infected

hamsters, it markedly improves lung pathology despite a massive infiltration of neutrophils.

The lack of antiviral efficacy observed here is consistent with preliminary data reported in another

study in which Nelfinavir was dosed *per os* at a dose of 250 mg/kg/day BID (boosted with Ritonavir) for

two consecutive days followed by sacrifice on day 3 post-infection (Nougairede et al., 2020 – interim

report). No significant reduction of viral RNA or infectious virus titers was observed in the lungs of

hamsters in this study, but no histopathological analysis was reported.

An improvement of CD4+ T cell counts and clinical status has been reported in HIV patients treated

with PIs (such as indinavir, ritonavir, indinavir, saquinavir, nelfinavir) that did not result in a reduction

of viral loads (16–21). This has been attributed to the fact that apart from their antiviral activity, PIs

exert multiple effects on various cellular processes, including apoptosis and immune cell functions (22–

24). In particular, Nelfinavir was reported to markedly inhibit apoptosis of neutrophils and neutrophil

function through inhibition of calpain (25). These findings, made in the context of HIV, are consistent

with our observations in 50 mg/kg Nelfinavir-treated SARS-CoV-2-infected hamsters. As part of Highly

Active Antiretroviral Therapy (HAART) treatment, Nelfinavir is dosed at 1250 mg BID or 750 mg TID,

resulting in a C_{trough} of about 370 nM measured after 12 h in patients (26). The Nelfinavir C_{trough} plasma

concentrations that are obtained here in hamsters with a 50 mg/kg dose are therefore in a clinically

relevant range.

Neutrophils extracellular traps (NETs) and matrix metalloproteinase-9 (MMP-9), which is a neutrophil-

released enzyme, are significantly increased in COVID-19 patients (27). Moreover, the activation of

NETs in COVID-19 patients was reported to correlate with disease severity and to be associated with

thrombo-inflammation events (27,28). Consequently, the inhibition of neutrophil function by

Nelfinavir and hence downstream immune signalling cascades may contribute to the observed

reduction of SARS-CoV-2-induced pathology as observed in hamsters. Furthermore, the reduction of

neutrophil apoptosis by the compound may account for the unusually large neutrophil infiltration

observed in the lung interstitium in treated hamsters.

Akin to its effect in HIV-infected patients, Nelfinavir may possibly result in a protective effect that is

unrelated an antiviral effect. It is proposed that the potential beneficial effect of Nelfinavir, in particular

in cases where "cytokine storms" develop, be explored. In such a case that the drug would also protect

patients against lung damage, combination therapy with directly-acting antivirals against SARS-CoV-2

may also be considered.

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Fig.1 Nelfinavir does not reduce viral replication in SARS-CoV-2 infected hamsters (A) Set-up of the
study. (B) Viral RNA levels in the lungs of hamsters treated with vehicle (control), 15 mg/kg Nelfinavir
BID, or 50 mg/kg Nelfinavir BID at 4 dpi expressed as $\log_{10}$ SARS-CoV-2 RNA copies per mg lung tissue.
Individual data and median values are presented. (C) Infectious virus titers in the lungs of hamsters
treated with vehicle (control), 15 mg/kg Nelfinavir BID, or 50 mg/kg Nelfinavir BID at 4 dpi expressed
as $\log_{10}$ TCID$_{50}$ per mg lung tissue. Individual data and median values are presented. (D) Daily weight
change in percentage, normalized to the body weight at the time of infection. Bars represent average
± SD. All data (panels B, C, D) are from one to two independent experiments with a total of 16, 6, and
10 animals for the placebo, 15 mg/kg, and 50 mg/kg conditions respectively. Data were analyzed with
the Mann-Whitney U test. ns, non-significant.

Fig.2 Nelfinavir markedly improves lung pathology of SARS-CoV-2-infected Syrian hamsters despite interstitial neutrophil infiltration. (A) Cumulative severity score from H&E-stained slides of lungs from vehicle control and Nelfinavir (50 mg/kg BID)-treated SARS-CoV-2-infected hamsters at 4 dpi. Individual datapoints and lines indicating median values are presented. The dotted line represents the median lung score in healthy untreated non-infected animals. Data were analyzed using the Mann-Whitney U test. ****P<0.0001. (B) Representative H&E-stained slides of lungs from vehicle control (top panels) and Nelfinavir-treated (bottom panels) SARS-CoV-2-infected hamsters at 4 dpi. Top, left: peri-bronchial inflammation and bronchopneumonia in vehicle-treated hamsters. Top, right: higher magnification of bronchopneumonia centred on a bronchiol (blue arrows) in vehicle-treated hamsters. Bottom, left: dark blue-stained interstitium and bronchial structures appearing normal without inflammation in Nelfinavir-treated hamsters. Bottom, right: severe interstitial inflammation with mostly PMN and congestion. Blue arrows indicate bronchiol (Insert at higher magnification).