Multispecific DARPin® therapeutics demonstrate very high potency against SARS-

CoV-2 variants *in vitro*

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30 Abstract

The SARS-CoV-2 virus responsible for the COVID-19 pandemic has so far infected more than 160 million

people globally, and continues to undergo genomic evolution. Emerging SARS-CoV-2 variants show

increased infectivity and may lead to resistance against immune responses of previously immunized

individuals or existing therapeutics, especially antibody-based therapies.

Several monoclonal antibody therapeutics authorized for emergency use or in development have been

shown to lose potency against some SARS-CoV-2 variants. Cocktails of two different monoclonal

antibodies constitute a promising approach to protect against novel emerging variants as long as both

antibodies are potent, but come with increased development complexity and therefore cost. As an

alternative, we developed two multispecific DARPin® therapeutics, each combining three independent

DARPin® domains binding the SARS-CoV-2 spike protein in one molecule, to potently neutralize the

virus and overcome virus escape.

Here, we show in a panel of *in vitro* studies that the multispecific DARPin® therapeutic design

incorporated in our clinical candidate ensovibep (MP0420), achieved high neutralization potencies

against the circulating SARS-CoV-2 variants B.1.1.7 (UK variant), B.1.351 (South African variant), P.1

(Brazilian variant), B.1.429 (South Californian variant), B.1.526 (New York variant), R.1 (Japanese

variant), A.23.1 (Ugandan variant), and B.1.617 (Indian variant), and there is strong evidence that

ensovibep also potently neutralizes the Indian variant B.1.618 based on the analysis of the key point

mutations in the spike protein of this variant. Additionally, viral passaging experiments show potent

protection by ensovibep and MP0423 against development of escape mutations. Finally, we

demonstrate that the cooperative binding of the individual modules in a multispecific DARPin® antiviral

is key for potent virus inhibition and protection from escape variants. These results, combined with the

relatively small size and high production yields of DARPin® molecules, suggest that ensovibep is a highly

valuable alternative to monoclonal antibody cocktails for global supply and demonstrate the strength

of the DARPin® platform for achieving potent and lasting virus inhibition for SARS-CoV-2 and possibly

other viruses.

Introduction

As the COVID-19 pandemic progresses, new circulating variants of SARS-CoV-2 have been described that show resistance against the immune response of previously immunized individuals[1,2] or available therapeutics[3,4]. In many regions around the globe, governments are implementing lock-down measures to contain rapidly spreading SARS-CoV-2 spike variants associated with increased transmissibility[5]. Variants first isolated in the UK (B.1.1.7 lineage), South Africa (B.1.351)[6], Brazil (P.1)[2], South California (B.1.429), New York, (B.1.526), Japan (R.1), Uganda (A.23.1) or the newest emerging variants in India (lineages B.1.617 and B.1.618) share mutations on the spike protein, which have evolved independently. Amongst those, mutations K417E/N/T, L452R, E484K and N501Y are of major concern, as these residues are associated with an enforced receptor binding[7], and thus increased transmissibility and/or immune escape of the virus[3,8-11].

Other mutations confer resistance against monoclonal antibody therapeutics, including N439K, where independent lineages were originally detected in Scotland, subsequently in Romania and then spread in many countries such as the USA[3]. Further amino acid changes, which may reduce therapeutic options are Y453F, which evolved in Danish mink farms[12], and less common mutations, such as G446V, G476S, T478I, P479S, V483A, F486V, F490S and Q493K, originally described by Baum et al.[13]. Additional mutations which occur globally at high frequencies such as A222V, S477N, D614G and Q675H[14-16] are considered less of a concern to date.

To circumvent the loss of potency of single monoclonal neutralizing antibodies, antibody cocktails were generated, providing a higher resistance against escape mutations[13,17,18]. However, this strategy is associated with increased manufacturing costs and limited global supply capacities[19].

We have applied our DARPin® platform that allows fast generation and cost-effective production of multispecific therapeutics to generate anti-SARS-CoV-2 multispecific DARPin® antivirals, with very high neutralizing potencies, which were described previously[20]. In brief, DARPin® molecules are structurally completely different from antibodies and consist of a single chain of linked DARPin® domains; in this case the molecules have two human serum albumin binding domains for systemic half-life extension and three spike protein binding domains at the C-terminus. The relatively small size of these multispecific DARPin® antivirals, in the range of 75-85 kDa, in conjunction with the high thermal stability, solubility and very high production yields make these molecules an attractive therapeutic alternative to antibody cocktails.

Two of these DARPin® antivirals, ensovibep and MP0423, are currently in clinical and pre-clinical development. The viral inhibition mode of ensovibep is based on three distinct DARPin® domains targeting the Receptor Binding Domain (RBD) while MP0423 has three DARPin® domains directed to three different domains of the spike protein: the RBD, the N Terminal Domain (NTD) and the S2 domain.

Here, we demonstrate that our clinical candidate, ensovibep, confers full protection against a panel of

relevant spike mutations as well as eight SARS-CoV-2 variants recently identified around the globe

(B.1.1.7, B.1.351[6], P.1[2], B.1.429, B.1.526, R.1, A.23.1, B.1.617) or the key mutations of the emerging

variant in India, B.1.618. In addition, we show in a viral passaging experiment that the multispecific

DARPin® antivirals' protection against development of viral escape mutants is comparable to that of

the best characterized and efficacious monoclonal antibody cocktail to date[13,18,21]. These data confirm

that the tripartite design is successful against emerging mutations and strongly validates the further

development of ensovibep as a potent therapeutic against COVID-19.

Results

Ensovibep is highly potent against globally identified SARS-CoV-2 variants as well as the most frequent spike protein point mutations

The spike protein of SARS-CoV-2 mediates cell entry through binding to the human ACE2 receptor. SARS-CoV-2 is also capable of infecting non-primate hosts, such as felines and minks[22]. The promiscuity of a multi-host life style is often an indicator of early, still sub-optimal adaptation of the virus to its new host. This suggests inherent dynamic plasticity and potential for further human adaptation. The receptor-binding domain (RBD) in the spike protein forms the interface with human ACE2. Site mutagenesis scanning and structure analysis revealed critical residues for this interaction, i.e. L455, F456, A475, F486, F490 and Q493[8,23]. Notably, single amino acid substitutions N439R, L452K, T470N, E484P, Q498Y and N501T have been shown to increase the affinity for human ACE2[8]. Consistent with these experimental findings, mutations K417N, K417T, L452R, E484K, and N501Y appeared in rapidly spreading SARS-CoV-2 spike variants in association with facilitated receptor binding and increased transmissibility[3,9,24]. The RBD domain is also immunogenic, and among others residues, K417, L452, K444, E484, and F486 have been shown to be critical for the binding of neutralizing antibodies[17].

In the present study we analyzed the impact of selected critical variants and mutated residues on the neutralization capacity of ensovibep and MP0423 (Figure 1). To assess the potency of the monospecific and multispecific DARPin® molecules, we used VSV-based as well as lentivirus-based pseudoviruses carrying the SARS-CoV-2 wild-type or mutant spike protein at their surface or variants of authentic SARS-CoV-2 for lineages B.1.1.7, B.1.351 and P.1. The pseudoviruses as well as the authentic SARS-CoV-2 variants were used in neutralization tests with multispecific DARPin® molecules ensovibep and MP0423 or control neutralizing antibodies REGN10933 and REGN10987. A summary of the calculated IC_{50} values are reported in Table 1a, Table 1b and Table 1c.

The results show that ensovibep can neutralize variants of the lineage B.1.1.7 (69-70 del, del145, E484K, N501Y, A570D, D614G, P681H, T716I, S982A, D1118H), lineage B.1.351 (D80A, D215G, Del242-244, R246I, K417N, E484K, N501Y, D614G, A701V), lineage P.1 (L18F, T20N, P26S, D138Y, R190S, K417T, E484K, N501Y, D614G, H655Y, T1027I, V1176F), lineage B.1.429 (S13I, P26S, W152C, L452R, D614G), lineage B.1.526 (L5F, T95I, D253G, E484K, D614G, A701V), lineage B.1.617, recently originating from India (G142D, E154K, V382L, L452R, E484Q, D614G, P681R, Q1071H, D1153Y) and the most critical point mutations of the Indian variant B.1.618 (del 145, L452R, E484Q, E484K, D614G) as efficiently as the wild-type virus with IC_{50} values in the low single-digit ng/mL range. While MP0423 remained highly potent against the B.1.351 (Δ5) and B.1.526 (Δ6) variant, it lost some potency to the double-digit or low triple-digit ng/mL range for B.1.1.7(Δ10), B.1.351(Δ9), P.1 (Δ12), B.1.429 (Δ5). The observed potency

drop is thought to be caused by mutations in the S2 domain alone or in combination with the NTD

mutations, as a reduction in potency for MP0423 was observed for point mutations D80A, R246I, P681H

and deletions 145 or 244-246. The structural determinants responsible for this potency drop are

currently under investigation

Notably, ensovibep protected well against all individual mutations tested, with the only exception of

the mutation F486V, which affects all three monovalent DARPin® RBD binders incorporated in

ensovibep.

As F486 is a critical residue for the interaction between RBD and human ACE2, selective pressure on

the virus favors its conservation, thus maintaining an important anchoring element for the binding of

ensovibep. A major impact of this mutation on ensovibep is not surprising, as previous structural

analysis identified F486 as a core interacting residue for the three related but different RBD binders[20].

Consequently, the mutation F486V destabilizes the binding of the entire tri-specific ensovibep molecule

to the spike protein.

Taken together, our analysis confirms that ensovibep is highly potent against spike proteins carrying

the most frequently observed mutations as well as mutations known to impact the binding of

neutralizing antibodies, as expected from the multispecific design.

Passaging of SARS-CoV-2 under therapeutic pressure of DARPin® antivirals and monoclonal antibodies

Previous studies have shown that viral escape mutants may rapidly appear under selective pressure of

a therapy[1,17]. We used a viral passaging model adapted from Baum et al.[13] to estimate the risk of viral

escape from therapeutic pressure of ensovibep, MP0423 and of a cocktail of the two Regeneron

monoclonal antibodies REGN10933 & REGN10987, in comparison to the monovalent DARPin® binder

RBD-2 and to the monoclonal antibodies S309, REGN10933 and REGN10987 applied as single

molecules.

1.5 x 10^6 pfu of a French SARS-CoV-2 isolate (with the following differences to the Wuhan wild-type:

V367F; E990A) were serially passaged in the presence of increasing concentrations of DARPin®

molecules and antibodies (Figure 2A, Figure 2B). Resistant escape variants were further selected by

passaging the supernatant of cultures showing significant virus-induced cytopathic effect (CPE) under

the selection pressure of the highest therapeutic concentration onto fresh cells while maintaining the

selective pressure of increasing concentrations of therapeutic antivirals. After the first incubation cycle

of four days (passage 1) the monovalent DARPin® binder RBD-2 and the multispecific DARPin® antivirals,

as well as the antibody antivirals REGN10933 and the antibody cocktail (REGN10933 & REGN10987)

conferred protection at the same concentration of 0.4 µg/mL. The monoclonal antibody S309 was less

efficient, requiring a higher concentration (10 µg/mL) for protection and the monoclonal antibody

REGN10987 was not protective up to the highest concentration tested of 50 µg/mL. Under continuous
selective pressure through passage 2 to 4, the monovalent DARPin® binder RBD-2, and the individual
monoclonal antibodies S309 and REGN10933 lost the capacity to protect cells, which manifested in
complete CPE up to the highest concentration tested. In contrast, ensovibep and MP0423, as single
molecules or in combination, and the cocktail of two monoclonal antibodies remained effective and
protected cells from CPE throughout the 4 passages.

While the application of ensovibep and MP0423 as single agents required higher concentrations,
respectively 2 µg/mL and 10 µg/mL, after 4 passages, the combination of the two DARPin® antivirals
retained effectiveness at a low concentration of 0.08 µg/mL. The mixture of the two monoclonal
antibodies, REGN10933 & REGN10987, prevented the selection of escape mutants at a concentration
of 0.4 µg/mL after passage 4.

To identify putative escape mutations in the spike protein, RNA was extracted and sequenced from
supernatant of wells with the greatest selective pressure showing a significant cytopathic effect (Suppl.
Fig. 4). Amongst mutations near the spike protein cleavage site (H655Y, N679_R685del, R682W,
R682Q), which might likely be related to adaptations to the used cell system[36, 37], a potential escape
mutation, F486L, was found for the monovalent RBD binder (RBD-2), which is incorporated in
ensovibep. In addition, a potential deletion at position F140 was identified, which might reduce the
potency of MP0423.

Discussion

Novel emerging variants of the virus are an ever-present threat, as they may escape the antibodies generated during immunization or developed as therapeutics.

Here, we showed that our multispecific DARPin® clinical candidate ensovibep gives high levels of protection against the currently most frequently reported SARS-CoV-2 mutations as well as recently identified variants. Neutralization tests using VSV-based as well as lentivirus-based pseudoviruses carrying SARS-CoV-2 spike variants as well as infectious SARS-CoV-2 showed inhibitory potencies for ensovibep that were comparable to that for the corresponding wild type. While MP0423 also remained active against some tested variants, a partial potency decrease was observed for most of the tested variants of concern. Of note, this lowered potency is still in an active potency range described by many monoclonal antibodies.

In the present study we investigated a panel of single mutations, shown to be of concern because they may be associated with increased transmissibility, or have an impact on disease severity, or affect neutralization by some polyclonal or monoclonal antibodies[13,25,26]. Among all mutations tested, only F486V caused a strong decrease in potency for ensovibep, when compared to the wild-type. In accordance, deep sequencing of the viral passaging supernatant for the monovalent RBD binder (RBD-2, incorporated in ensovibep) also revealed F486L as a potential mutation for the virus to escape the treatment (Suppl. Fig. 4). These findings are in line with our previous structural analysis[20] showing that F486 is one of the key binding residues for the interaction with ensovibep and the RBD. Most importantly, F486 is a critical residue for the virus itself, allowing an efficient binding to the ACE2 receptor and thus cell infection. Therefore, mutations of the phenylalanine at position 486 will decrease the affinity between the RBD and human ACE2 receptor and lower the infectivity of the virus[10,27-29]. To date, mutations at position F486 are not present at high frequency in circulating SARS-CoV-2 strain. Interestingly, the single point mutation F486V does not affect the neutralizing capacity of MP0423, despite the fact that it contains a RBD binder for which F486 is a critical residue. These findings, summarized in Suppl. Fig.2, highlight the strength of the tri-epitopic DARPin design. In this approach, a loss of binding of one DARPin domain might be compensated by the binding via the two remaining DARPin domains of the molecule.

In the same line, some mutations, that are not predicted as key interaction residues for the three distinct RBD binders of ensovibep (e.g. E484K or Q493K), led to a reduction of the potency in one or several of the RBD binders, while the trispecific ensovibep molecule maintained the full neutralization capacity. This demonstrates that a tri-specific DARPin® design with cooperative binding permits high potency inhibition, even in the case one DARPin® domain is losing neutralization capacity when the

domain is evaluated separately. This cooperativity is an exclusive feature of a trispecific approach,

highlighting a key advantage of the multispecific DARPin® design over cocktails of antibodies.

The high level of protection against viral escape mutations by ensovibep and MP0423 was further

demonstrated in a viral passaging experiment: the single monoclonal antibodies and the monovalent-

DARPin® RBD-2 binder were rapidly overcome by escape mutants, whereas both multispecific DARPin®

antivirals, individually or in combination, maintained potency up to passage 4, to an extent comparable

to one of the best monoclonal antibody cocktails with emergency use authorization (EUA) status in the

USA.

The high level of neutralization of multispecific DARPin® antivirals against mutations and variants

evaluated in this study encourages the characterizations of future upcoming mutations and will remain

an ongoing topic for COVID-19 diagnostics, therapeutics and vaccines.

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Author contributions

S.Ro.; M.W.; F.M.; J.M.; S.Ry.; A.B.; V.C.; P.A.; M.S; O.E.: conceptualized and designed experiments;

S.Ro.; J.M.; S.Ry; H.M; N.L.; S.H.; A.B.; C.I.; A.C.; T.H.; A.N.; R.H.; S.Lu.; R.V.; S.N.N.; W.W.; T.L.; S.M.;

C.D.W.: performed laboratory experiments; F.M.; C.R.; F.R.: performed computational work; S.Ro.;

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manuscript; S.Le.; D.S; P.A.; M.S.: acquired funding; All authors reviewed the manuscript.

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company.

Figures

Figure 1: Structural visualization of critical mutations of the SARS-CoV-2 spike protein evaluated in this study.
A) Representation of the full trimeric SARS-CoV-2 spike protein with all residues analyzed in the study visualized as blue spheres. Binding regions for the individual DARPin® domains incorporated in ensovibep and MP0423 are colored in blue (RBD), green (NTD) and orange (S2); B-E) Monomeric spike protein structures representing B) the variant first identified in the UK B.1.1.7 (del69-70, del145, N501Y, A470D, D614G, P681H, T716I, S982A, D1118H); C) the variant first identified in South Africa B.1.351 (L18F, D80A, D215G, del242-244, R246I, K417N, E484K, N501Y, D614G, A701V); D) the variant first identified in Brazil P.1 (L18F, T20N, P26S, D138Y, R190S, K417T, E484K, N501Y, D614G, H655Y, T1027I, V1176F); E) the variant first identified in California, US (S13I, W152C, L452R, D614G). The PDB file 6xcn was used for generating the figures with PyMol version 2.1.1 (Schrödinger, LLC). In order to visualize all mutations, flexible loops, and regions of the NTD domain missing in the structure, were modelled with MODELLER included in the BIOVIA Discovery Studio software using the PDB file 6zge as template for the NTD domain (BIOVIA, Dassault Systèmes, BIOVIA Discovery Studio 2021).

A

SARS-CoV-2 Passage: # X

SARS-CoV-2 Passage: # X+1

Deep sequencing pools to identify escape mutations

Supernatant with SARS-CoV-2 of the well with the highest therapeutic concentration showing signs of CPE was transferred to fresh Vero E6 cells in the presence of increasing concentrations of DARPin candidates or mAb

Legend: no cytopathic effect (CPE); signs of CPE

B

Passage #1	DARPin or Antibody Concentrations [µg/mL]						
Constructs	50	10	2	0.4	0.08	0.02	no drug
DARPin Candidates	Cytopathic Effect [%]						
RBD - 2	0%	0%	0%	5%	≥90%	≥90%	≥90%
ensovibep	0%	0%	0%	0%	≥90%	≥90%	≥90%
MP0423	0%	0%	0%	0%	≥90%	≥90%	≥90%
MP0420 & MP0423	0%	0%	0%	0%	≥90%	≥90%	≥90%
Antibody Candidates	Cytopathic Effect [%]						
S309	0%	0%	60%	≥90%	≥90%	≥90%	≥90%
REGN10933	0%	0%	0%	80%	≥90%	≥90%	≥90%
REGN10987	80%	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%
REGN10933 & REGN10987	0%	0%	0%	0%	≥90%	≥90%	≥90%
IgG Negative Control	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%

Passage #2	DARPin or Antibody Concentrations [µg/mL]						
Constructs	50	10	2	0.4	0.08	0.02	no drug
DARPin Candidates	Cytopathic Effect [%]						
RBD - 2	0%	60%	≥90%	≥90%	≥90%	≥90%	≥90%
ensovibep	0%	0%	0%	0%	0%	50%	≥90%
MP0423	0%	0%	0%	0%	0%	≥90%	≥90%
MP0420 & MP0423	0%	0%	0%	0%	0%	≥90%	≥90%
Antibodies Candidates	Cytopathic Effect [%]						
S309	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%
REGN10933	0%	0%	80%	≥90%	≥90%	≥90%	≥90%
REGN10987	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%
REGN10933 & REGN10987	0%	0%	0%	0%	0%	≥90%	≥90%
IgG Negative Control	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%

Passage #3	DARPin or Antibody Concentrations [µg/mL]						
Constructs	50	10	2	0.4	0.08	0.02	no drug
DARPin Candidates	Cytopathic Effect [%]						
RBD - 2	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%
ensovibep	0%	0%	0%	0%	≥90%	≥90%	≥90%
MP0423	0%	0%	0%	40%	≥90%	≥90%	≥90%
MP0420 & MP0423	0%	0%	0%	0%	≥90%	≥90%	≥90%
Antibodies Candidates	Cytopathic Effect [%]						
S309	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%
REGN10933	0%	0%	5%	≥90%	≥90%	≥90%	≥90%
REGN10987	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%
REGN10933 & REGN10987	0%	0%	0%	0%	≥90%	≥90%	≥90%
IgG Negative Control	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%

Passage #4	DARPin or Antibody Concentrations [µg/mL]						
Constructs	50	10	2	0.4	0.08	0.02	no drug
DARPin Candidates	Cytopathic Effect [%]						
RBD - 2	n.d.	n.d.	n.d.	n.d.	n.d.	n.d.	n.d.
ensovibep	0%	0%	40%	≥90%	≥90%	≥90%	≥90%
MP0423	0%	0%	≥90%	≥90%	≥90%	≥90%	≥90%
MP0420 & MP0423	0%	0%	0%	0%	5%	≥90%	≥90%
Antibodies Candidates	Cytopathic Effect [%]						
S309	n.d.	n.d.	n.d.	n.d.	n.d.	n.d.	n.d.
REGN10933	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%	≥90%
REGN10987	n.d.	n.d.	n.d.	n.d.	n.d.	n.d.	n.d.
REGN10933 & REGN10987	0%	0%	0%	0%	≥90%	≥90%	≥90%
IgG Negative Control	n.d.	n.d.	n.d.	n.d.	n.d.	n.d.	n.d.

Figure 2: Ensovibep and MP0423 protect from viral escape mutants: A) Schematic representation of the procedure: French SARS-CoV-2 isolate from early 2020 (1.5 x10^6 pfu) was incubated in presence of increasing concentrations of DARPin® or antibody for 4 days on Vero E6 cells and virus-induced cytopathic effects (CPE) were determined by microscopy. For each DARPin® and antibody condition, cultures showing significant cytopathic effect (≥20%) under the greatest selective pressure were selected and virus-containing supernatant collected to start a new culture passage on Vero E6 cells, again under increasing concentrations of the corresponding DARPin® or monoclonal antibody condition. Passaging of virus containing supernatant was continued in the same manner for a total of 4 passages. B) Tabular representation of the cytopathic effects induced by SARS-CoV-2 cultured in presence of increasing concentrations of mono-valent DARPin® binder RBD-2, multi-specific DARPin® antivirals ensovibep and MP0423 or a cocktail of ensovibep and MP0423 and the antibody antivirals S309, REGN10933 and REGN10987 or a cocktail of REGN10933 and REGN10987 through passage 1 to 4. A cytopathic effect (CPE) judged by microscopy to be less than 20% is colored in blue and a CPE estimated ≥20% is colored in red. Indicated with a dark border are the culture supernatants chosen for further passaging under selective pressure and for deep sequencing (data in process).

Tables

Table 1a: Summary of the neutralizing efficacy of multispecific DARPin® candidates and monoclonal antibodies against VSV or Lentivirus SARS-CoV-2 pseudoviruses carrying spike variants as well as authentic SARS-CoV-2 variants. Neutralization tests for multispecific DARPin® candidates, ensovibep and MP0423 and two neutralizing antibodies, REGN10933 and REGN10987, were performed and IC_{50} (ng/mL) values are shown for each experimental condition.

Lineage (Origin)	Variants and Point Mutations analyzed	Assay Type	VSV or Lentivirus Pseudotype Neutralizaiton Assay IC_{50} [ng/mL]			
			MP0420	MP0423	REGN10933	REGN10987
Reference	Wuhan wild type	VSV	1.0	3.1	3.9	6.0
	D614G	Lentivirus	1.1	3.0	n.a.	n.a.
B.1.1.7 / United Kingdom	69-70 del, del145, N501Y, A570D, D614G, P681H, T716I, S982A, D1118H	VSV	1.7	70	2.4	3.5
	69-70 del, del145, E484K, N501Y, A570D, D614G, P681H, T716I, S982A, D1118H	VSV	3.2	77	30	1.6
	69-70 del, del145, N501Y, A570D, D614G, P681H, T716I, S982A, D1118H	Lentivirus	0.9	58	n.a.	n.a.
	69-70 del, del145, S494P, N501Y, A570D, D614G, P681H, T716I, S982A, D1118H	Lentivirus	0.8	50	n.a.	n.a.
	del69-70	VSV	1.9	5.0	4.1	4.1
	del145	VSV	2.1	9.7	1.9	3.9
	N501Y	VSV	0.6	1.7	2.1	1.0
	A570D	VSV	1.2	2.4	0.2	1.3
	D614G	VSV	2.4	2.8	n.a.	n.a.
	P681H	VSV	1.5	10.1	1.3	3.5
	T716I	VSV	0.6	0.3	0.7	3.2
	S982A	VSV	2.0	0.9	1.0	10.0
	D1118H	VSV	2.6	0.6	2.0	2.3
B.1.351 / South Africa	D80A, D215G, E484K, N501Y, A701V	VSV	5.5	2.4	19.4	2.9
	L18F, D80A, D215G, Del242-244, R246I, K417N, E484K, N501Y, D614G, A701V	VSV	5.0	31	15.4	1.3
	L18F, D80A, D215G, Del242-244, K417N, E484K, N501Y, D614G, A701V	Lentivirus	1.2	116	n.a.	n.a.
	L18F	VSV	3.5	1.9	3.5	3.0
	D80A	VSV	3.6	17.1	n.a.	n.a.
	D215G	VSV	4.6	2.6	n.a.	n.a.
	del242-244	VSV	2.0	130	1.8	2.0
	R246I	VSV	1.3	34	2.3	3.0
	K417N	VSV	0.6	0.7	n.a.	n.a.
	E484K	VSV	2.7	1.8	17.0	5.8
	N501Y	VSV	0.6	1.7	2.1	0.9
	D614G	VSV	2.4	2.8	n.a.	n.a.
	A701V	VSV	1.1	1.0	n.a.	n.a.

Variant	Mutations	Pseudovirus				
P.1 / Brazil	L18F, T20N, P26S, D138Y, R190S, K417T, E484K, N501Y, D614G, H655Y, T1027I	VSV	1.2	8.3	32.4	1.0
	L18F, T20N, P26S, D138Y, R190S, K417T, E484K, N501Y, D614G, H655Y, T1027I, V1176F	Lentivirus	0.7	34.0	n.a.	n.a.
	L18F	VSV	3.5	1.9	3.5	3.0
	T20N	VSV	4.6	7.6	n.a.	n.a.
	P26S	VSV	1.8	3.4	n.a.	n.a.
	D138Y	VSV	2.2	5.2	n.a.	n.a.
	R190S	VSV	1.7	2.2	n.a.	n.a.
	K417T	VSV	0.5	0.6	n.a.	n.a.
	E484K	VSV	2.7	1.8	17.0	5.8
	N501Y	VSV	0.6	1.7	2.1	0.9
	D614G	VSV	2.4	2.8	n.a.	n.a.
	H655Y	VSV	2.4	1.4	n.a.	n.a.
	T1027I	VSV	3.3	2.8	n.a.	n.a.
B.1.429 / California (US)	S13I, W152C, L452R, D614G	Lentivirus	0.9	174	n.a.	n.a.
	S13I, P26S, W152C, L452R, D614G	Lentivirus	0.5	124	n.a.	n.a.
	S13I		n.a.	n.a.	n.a.	n.a.
	P26S	VSV	1.8	3.4	n.a.	n.a.
	W152C		n.a.	n.a.	n.a.	n.a.
	L452R	Lentivirus	0.5	1.4	n.a.	n.a.
	D614G	VSV	2.4	2.8	n.a.	n.a.
B.1.526 / New York (US)	L5F, T95I, D253G, E484K, D614G, A701V	Lentivirus	3.0	3.8	n.a.	n.a.
	L5F	Lentivirus	1.1	2.2	n.a.	n.a.
	T95I	Lentivirus	0.9	2.2	n.a.	n.a.
	D253G	Lentivirus	1.0	3.1	n.a.	n.a.
	E484K	VSV	2.7	1.8	17.0	5.8
	D614G	VSV	2.4	2.8	n.a.	n.a.
	A701V	VSV	1.1	1.0	n.a.	n.a.
R.1	W152L, E484K, D624G, G769V	Lentivirus	2.4	4.1	n.a.	n.a.
	W152L	Lentivirus	1.2	2.5	n.a.	n.a.
	E484K	VSV	2.7	1.8	17.0	5.8
	D624G		n.a.	n.a.	n.a.	n.a.
	G769V		n.a.	n.a.	n.a.	n.a.
A.23.1	F157L, V367F, Q613H, D614G, P681R	Lentivirus	0.3	8.2	n.a.	n.a.
	F157L		n.a.	n.a.	n.a.	n.a.
	V367F		n.a.	n.a.	n.a.	n.a.
	Q613H		n.a.	n.a.	n.a.	n.a.
	D614G	VSV	2.4	2.8	n.a.	n.a.
	P681R		n.a.	n.a.	n.a.	n.a.
B.1.617 / India	T95I, G142D, E154K, L452R, E484Q, D614G, P681R, Q1071H	Lentivirus	2.0	n.a.	n.a.	n.a.
	G142D, E154K, V382L, L452R, E484Q, D614G, P681R, Q1071H, D1153Y	Lentivirus	1.9	n.a.	n.a.	n.a.
	T95I	Lentivirus	0.9	2.2	n.a.	n.a.
	G142D		n.a.	n.a.	n.a.	n.a.
	E154K		n.a.	n.a.	n.a.	n.a.
	L452R	Lentivirus	0.5	1.4	n.a.	n.a.
	E484Q	Lentivirus	2.3	2.1	n.a.	n.a.
	D614G	VSV	2.4	2.8	n.a.	n.a.
	P681R		n.a.	n.a.	n.a.	n.a.
	Q1071H		n.a.	n.a.	n.a.	n.a.

Virus	Description	Assay Type				
B.1.618 / India	del145	VSV	2.1	9.7	1.9	3.9
	del146		n.a.	n.a.	n.a.	n.a.
	E484K	VSV	2.7	1.8	17.0	5.8
	D614G	VSV	2.4	2.8	n.a.	n.a.

Virus	Description	Assay Type	Authentic SARS CoV-2 Neutralizaiton Assay IC$_{50}$ [ng/mL]		
			MP0420	MP0423	
Reference	(French isolate: V367F; E990A)	Authentic	1.3	5.9	
B.1.1.7 / UK	H69_V70del, Y145del, N501Y, A570D, D614G, P681H, T716I, S982A, D1118H	Authentic	1.3	20	
B.1.351 / South Africa	L18F, D80A, D215G, L242_L244del, T302T, K417N, E484K, N501Y, D571D,D614G, A701V	Authentic	7.5	>100	
P.1 / Brazil	L18F, T20N, P26S, D138Y, R190S, K417T, E484K, N501Y, D614G, H655Y, T1027I, V1176F	Authentic	5.7	73	

n.a.: not assessed

Blue shade: no or marginal loss in neutralization potency by therapeutics

Yellow shade: IC$_{50}$ values between 10-100 ng/mL (in a therapeutically active range)

Red shade: IC$_{50}$ values >100 ng/mL (outside therapeutically active range)

264 Table 1b: Summary of the neutralizing efficacy of multispecific DARPin® ensovibep and its monovalent

265 RBD-binding DARPin® domains against VSV-SARS-CoV-2 pseudoviruses carrying spike mutants. The spike

266 variants and mutations were incorporated into VSV-pseudoviruses encoding luciferase as reporter

267 gene. Neutralization tests for multispecific DARPin® ensovibep as well as the mono-valent DARPin®

268 domains RBD-1, RBD-1, RBD-3 were performed and IC$_{50}$ (ng/mL) values are shown for each condition.

Lineage (Origin)	Variants and Point Mutations analyzed	VSV Pseudotype Neutralization Assay IC$_{50}$ [ng/mL]				
		MP0420		Mono-valent RBD Binders in MP0420		
				RBD-1	RBD-2	RBD-3
Reference	Wuhan wild type	1.0		7.3	2.1	13.4
B.1.1.7 / United Kingdom	69-70 del, del145, N501Y, A570D, D614G, P681H, T716I, S982A, D1118H	1.7		4.6	5.4	17.7
	69-70 del, del145, E484K, N501Y, A570D, D614G, P681H, T716I, S982A, D1118H	3.2		51	12.0	>100
	del69-70	1.9		9.3	4.8	22.6
	del145	2.1		7.2	4.9	20
	N501Y	0.6		2.2	9.0	12.6
	A570D	1.2		0.7	0.8	9.8
	D614G	2.4		12.0	6.2	23.0
	P681H	1.5		11.0	4.1	13.0
	T716I	0.6		9.9	3.8	8.9
	S982A	2.0		24.7	7.6	19.8
	D1118H	2.6		5.5	4.6	17.7
B.1.351 / South Africa	D80A, D215G, E484K, N501Y, A701V	5.5		76	26	>100
	L18F, D80A, D215G, Del242-244, R246I, K417N, E484K, N501Y, D614G, A701V	5.0		38	2.5	>100
	L18F	3.5		8.4	7.2	18.9
	D80A	3.6		9.0	5.8	37.0
	D215G	4.6		11.2	5.1	36.8
	del242-244	2.0		11.2	5.7	8.9
	R246I	1.3		6.3	3.7	17.0
	K417N	0.6		1.2	1.1	4.5
	E484K	2.7		64.0	10.2	>100
	N501Y	0.6		2.2	9.0	12.6
	D614G	2.4		12.0	6.2	23.0
	A701V	1.1		6.3	4.3	27.2

P.1 / Brazil	L18F, T20N, P26S, D138Y, R190S, K417T, E484K, N501Y, D614G, H655Y, T1027I, V1176F	1.2	**31.2**	2.5	**90**
	L18F	3.5	8	7.2	18.9
	T20N	4.6	11.1	7.9	**70**
	P26S	1.8	7.1	**11.8**	17
	D138Y	2.2	13.5	4.8	23.3
	R190S	1.7	9.4	7.4	27.0
	K417T	0.5	4.4	0.6	12.8
	E484K	2.7	**64.0**	**10.2**	**>100**
	N501Y	0.6	2.2	9.0	12.6
	D614G	2.4	12.0	6.2	23.0
	H655Y	2.4	6.3	6.7	13.8
	T1027I	3.3	4.3	5.3	12.2
Individual Mutations	Highly frequent mutations				
S477N	Wide global spread	1.9	3.0	2.0	9.0
N439K	Wide spread in northern amerika, UK; increases RBD/ACE2 interaction[1]	1.3	7.3	5.3	12.9
A222V	Wide European spread	2.2	3.3	4.6	19.5
Individual Mutations	Within RBD epitope of DARPins or reported resistance mutation for other therapeutics				
K417E	residue mutated to N/T in SA, BRA variants	0.5	1.8	1	3.6
G446V		1.7	0.7	1.8	2.3
Y453F	Key residue evolved in Danish mink farms variants	3.2	10.9	5.9	3.3
G476S		1.5	2.3	3.7	29
T478I		2.7	11.2	3.1	16.7
P479S		2.1	7.2	2.3	27.6
V483A		2.3	21.8	8.4	21.3
F486V	Reduces RBD/ACE2 interaction[1]; Key residue for DARPin RBD binder[2]	>100	>100	>100	>100
Q493K		7.9	30	**28.2**	45.8
F490S	Reduces RBD/ACE2 interaction[1]	3.8	2.3	1.7	8.1

Blue shade: no or marginal loss in neutralization potency by ensovibep

Red shade: IC$_{50}$ values for ensovibep >100 ng/mL (outside therapeutically active range)

Bold font >5-fold loss in IC$_{50}$ of mono-valent RBD binders (compared to wild type)

[1] Influence of residue mutations on spike protein binding to human ACE2 (Yi et al. 2020)

[2] Predicted interaction residue for DARPin RBD binder (Walser et al. 2020)

270 Table 1c: Summary of the neutralizing efficacy of multispecific DARPin® ensovibep and MP0423 and
271 monoclonal antibodies REGN10933 and REGN10987 against VSV-SARS-CoV-2 pseudoviruses carrying
272 spike mutants. The spike variants and mutations were incorporated into VSV-pseudoviruses encoding
273 luciferase as reporter gene. Neutralization tests for multispecific DARPin® candidates or monoclonal
274 antibodies were performed and IC$_{50}$ (ng/mL) values are shown for each condition.

Variants	Rational	VSV Pseudotype Neutralizaiton Assay IC$_{50}$ [ng/mL]			
		MP0420	MP0423	REGN10933	REGN10987
Reference	Wuhan wild type	1.0	3.1	3.9	6.0
Individual Mutations	Highly frequent mutations				
S477N	Wide global spread	1.9	0.8	n.a	n.a
N439K	Wide spread in northern amerika, UK; increases RBD/ACE2 interaction[1]	1.3	2.5	2.8	30.1
A222V	Wide European spread	2.2	3.1	7.00	2.9
Individual Mutations	Within RBD epitope of DARPins or reported resistance mutation for other therapeutics				
K417E	Residue mutated to N/T in SA, BRA variants	0.5	1.2	>100	1.5
G446V		1.7	1.0	1.5	>100
Y453F	Key residue evolved in Danish mink farms variants	3.2	2.0	>100	11.8
G476S		1.5	3.1	n.a	n.a
T478I		2.7	2.8	4.0	7.0
P479S		2.1	1.5	3.7	9.8
V483A		2.3	1.9	n.a	n.a
F486V	Reduces RBD/ACE2 interaction[1] Key residue for DARPin RBD binder[2];	>100	7.7	>100	4.4
Q493K		7.9	2.4	>100	10
F490S	Reduces RBD/ACE2 interaction[1]	3.8	1.6	3.1	9.2

n.a.: not assessed
Blue shade: no or marginal loss in neutralization potency by therapeutics
Yellow shade: IC$_{50}$ values between 10-100 ng/mL (in a therapeutically active range)
Red shade: IC$_{50}$ values >100 ng/mL (outside therapeutically active range)
[1] Influence of residue mutations on spike protein binding to human ACE2 (Yi et al. 2020)
[2] Predicted interaction residue for DARPin RBD binder (Walser et al. 2020)

Supplementary Materials for

Multispecific DARPin® therapeutics demonstrate very high potency against SARS-CoV-2 variants

Rothenberger et al. 2021

Materials and Methods

Generation of His-tagged mono-valent RBD binders, ensovibep, MP0423 and the domain k.o. variants of MP0423

DARPin® constructs selected and cloned as described in Walser et al.[20] were transformed in *E.coli* BL21 cells, plated on LB-agar (containing 1% glucose and 50 µg/ml ampicillin) and then incubated overnight at 37°C. A single colony was picked into TB medium (containing 1% glucose and 50 µg/ml ampicillin) and incubated overnight at 37°C, shaking at 230 rpm. Fresh TB medium (containing 50 µg/ml ampicillin) was inoculated with 1:20 of overnight culture and incubated at 37°C at 230 rpm. At OD600 = 1.1 the culture was induced by addition of IPTG (0.5 mM final concentration) and incubated further for 5 h at 37°C and 230 rpm. Harvest was done by centrifugation (10 min 5000 x g). After cell disruption by sonication, primary recovery was done by heat treatment for 30 min at 62.5°C and subsequent centrifugation (15 min, 12000 x g). 20 mM Imidazole and 1% Triton X-100 was added to the supernatant and the 0.22 µm filtered supernatant was further purified by immobilized metal affinity chromatography (IMAC) (HisTrap FF crude, Cytiva, Sweden) using the N-terminal His-tag and including a wash step with 1% Triton X-100 and a step elution with 250 mM Imidazole. In a subsequent step, the elution fraction of the IMAC step was applied on a size exclusion chromatography (Superdex 200, Cytiva, Sweden) and fractions of interest were pooled and concentrated. Finally, the concentrated sample was filtered through a 0.22 µm Mustang E filter for Endotoxin removal and sterile filtration and quality controlled.

Generation of monoclonal antibodies, REGN10933, REGN10987 and S309

Publicly available sequences of variable domains from monoclonal antibodies RGN10933, RGN10987 (WHO Drug Information, Vol. 34, No. 3, 2020, Proposed INN: List 124 – COVID-19) and S309 (PDB: 6WPS) were used to synthetize the corresponding cDNA fragments and cloned into a proprietary expression vector at Evitria AG (Switzerland). Generated vectors containing the constant immunoglobulin hIgG1 chain or kappa light chain were used for transfection in Chinese hamster ovary cells by Evitria. Sterile filtered cell supernatants were purified via affinity purification with HiTrap MabSelect column followed by a size exclusion chromatography using HiLoad 26/600 Superdex 200 column in PBS pH7.4. Selected fractions were pooled and quality controlled (by SDS-PAGE, size exclusion chromatography and endotoxin measurement), before use in assays.

 VSV-SARS-CoV-2 pseudotype mutation-vector generation

Plasmid pCAGGS containing the spike protein of SARS-CoV-2[20] was used as template for generation of

single and multiple spike protein mutants. Forward and reverse complementary primers encoding the

mutation were synthesized by Microsynth (Balgach, Switzerland). High-fidelity Phusion polymerase

(New England Biolabs, USA) was used for all DNA amplification.

Single mutations of the spike protein were generated via two PCR fragments of the spike ORF using

high-fidelity Phusion polymerase (New England Biolabs, USA). The first fragment was generated via a

generic forward primer (pCAGGS-5) annealing upstream of the spike ORF and the specific reverse

primer encoding the mutation. The second fragment was generated using the specific forward primer

encoding the mutation and a reverse primer (rbglobpA-R). The two fragments were gel-purified and

used as input for an assembly PCR without addition of flanking primers.

For multi-mutation spike proteins, a complementary pair of primers (forward and reverse) encoding

each mutation was designed. Fragment 1 was generated with forward primer pCAGGS-5 and reverse

primer encoding mutation 1. Fragment 2 was generated using forward primer encoding mutation 1 and

reverse primer encoding mutation 2. All subsequent fragments were generated analogously. DNA

fragments were gel-purified and mixed in equimolar amounts. This mix was used for re-assembly of the

full spike ORF using outer primers pCAGGS-5 and rbglobpA-R.

For both single as well as multi-mutation spike protein, the full-length spike ORF was isolated from an

agarose gel, digested by restriction enzymes NheI/EcoRI and inserted into the pCAGGS vector

backbone. The correct sequence was verified via sequencing the whole ORF of the spike protein by

Microsynth (Balgach, Switzerland).

VSV-SARS-CoV-2 pseudotype neutralization assay for mutational analysis and MP0423 domain knock outs

The pseudotype viral system was based on the recombinant VSV*ΔG-Luc vector in which the

glycoprotein gene (G) had been deleted and replaced with genes encoding green fluorescent protein

and luciferase[30]. Pseudoviruses were generated as reported previously[31,32]. For the neutralization assay,

an initial dilution of the compounds was followed by three-fold dilutions in quadruplicates in DMEM-2

% [vol/vol] FCS supplemented with 20 μM human serum albumin (CSL Behring). The mixture was mixed

with an equal volume of DMEM-2 % FCS containing 250 infectious units (IU) per well of SARS-CoV-2

pseudoviruses and incubated for 90 min at 37°C. The mix was inoculated onto Vero E6 cells[33,34] in a

clear bottom white walled 96-well plate during 90 min at 37°C. The inoculum was removed and fresh

medium added, and cells further incubated at 37°C for 16 h. Cell were lysed according to the ONE-Glo™

luciferase assay system (Promega, Madison, US) and light emission was recorded using a Berthold®

TriStar LB941 luminometer. The raw data (relative light unit values) were exported to GraphPad Prism

v8.4.3, and the % neutralization values were normalized to the untreated PsV signal. IC_{50} with 95%

confidence interval were estimated by model of nonlinear regression fit with settings for log (inhibitor)

vs normalized response curves. Data points are plotted by the mean ± SEM (standard error of mean).

SARS-CoV-2 lentivirus-based pseudovirus neutralization assay

The neutralizing activity of therapeutic antibodies against SARS-COV-2 variants was measured using

lentiviral particles pseudotyped with spike proteins of SARS-COV-2 variants, as previously described[35].

Briefly, pseudoviruses bearing the spike proteins and carrying a firefly luciferase (FLuc) reporter gene

were produced in 293T cells by co-transfection of pCMVΔR8.2, pHR'CMVLuc and pCDNA3.1(+)-spike

variants. Plasmids encoding human codon-optimized spike genes with the desired mutations were

purchased (GenScript, Piscataway, NJ). Supernatants containing pseudoviruses were collected 48 h

post-transfection, filtered through a 0.45 μm low protein binding filter, and stored at -80°C. Pseudovirus

titers were measured by infecting 293T-ACE2.TMPRSS2s cells for 48 h prior to measuring luciferase

activity (luciferase assay reagent, Promega, Madison, WI). For neutralization assays, pseudoviruses with

titers of approximately 10^{6} relative luminescence units (RLU)/ml were incubated with serially diluted

antibodies for two h at 37°C before adding the pseudovirus and antibody mixtures (100 μl) onto 96 well

plates pre-seeded one day earlier with 3.0×10^{4} 293T-ACE2.TMPRSS2s cells/well. Pseudovirus infection

was scored 48 h later by measuring luciferase activity. The antibody concentration causing a 50%

reduction of RLU compared to control (ID_{50}) was reported as the neutralizing antibody titer. Titers were

calculated using a nonlinear regression curve fit (GraphPad Prism software Inc., La Jolla, CA). The ratio

of the neutralizing antibody titer of the variant compared to the neutralizing antibody titer of wild type

was calculated. The mean titer from at least two independent experiments with intra-assay duplicates

was reported as the final titer. This work was performed independently by investigators at the US Food

and Drug Administration, Center for Biologics Evaluation and Research as part of Therapeutics Research

Team for the US government COVID-19 response efforts.

Cells and pathogenic virus

Vero E6 cells (kindly provided by Prof. Volker Thiel, University of Bern, Switzerland) were passaged in

Minimum Essential Medium (MEM) (Cat N° M3303) containing 10% fetal bovine serum (FBS) and

supplements (2 mM L-Glutamine, 1% Non-essential amino acids, 100 units/ml Penicillin, 100 μg/ml

Streptomycin, 0.06% Sodium bicarbonate, all from Bioswisstec, Schaffhausen, Switzerland) at 37°C,

>85% humidity and 5% CO_2. Vero E6/TMPRSS2 cells[33,34] obtained from the Centre For AIDS Reagents

(National Institute for Biological Standards and Control) were passaged in Dulbecco's Modified Eagle

Medium (DMEM) (Cat N° M1452) containing 10% fetal bovine serum (FBS) and supplements (2 mM L-

Glutamine, 1% Non-essential amino acids, 100 U/ml Penicillin, 100 µg/ml Streptomycin, 0.06% Sodium

bicarbonate and 2% Geneticin G418 , all from Bioswisstec, Schaffhausen, Switzerland) at 37°C, >85%

humidity and 5% CO_2.

SARS-CoV-2 (2019-nCoV/IDF0372/2020), kindly provided by Dr. Sylvie van der Werf from the National

Reference Centre for Respiratory Viruses hosted by Institut Pasteur (Paris, France) was propagated in

Vero E6 cells in MEM containing 2% FBS and supplements (2%-FBS-MEM) at 37°C, >85% humidity and

5% CO_2. SARS-CoV-2 variants (B.1.1.7, B.1.351 and P.1) were provided from University Hospital of

Geneva, Laboratory of Virology (HUG) and propagated in Vero E6/TMPRSS2 cells in DMEM containing

2% FBS and supplements (2%-FBS-DMEM) at 37°C, >85% humidity and 5% CO_2. Viral titer was

determined by standard plaque assay, by incubating 10-fold serial dilutions of the virus for 1 h at 37°C

on a confluent 24-well plate with Vero E6 cells. Then inoculum was removed and 1 ml overlay medium

(20 ml Dulbecco's Modified Eagle's Medium, 5 ml FBS, 100 U/ml Penicillin, 100 µg/ml Streptomycin,

and 25 ml Avicel rc581) was added. After 3 days incubation at 37°C the overlay was removed and the

plates stained with crystal violet solution (spatula tip (~4 mg) crystal violet powder (Sigma Aldrich)

solved in 30 ml 37% formalin and 120 ml PBS (Sigma Aldrich).

Viral passaging experiment with authentic SARS-CoV-2

Virus escape studies were adapted from a previously published protocol by Baum et al.[13]. Briefly, 1:5

serial dilutions of DARPin® antivirals and monoclonal antibodies from 100 µg/mL to 0.032 µg/mL were

prepared in Minimum Essential Medium (MEM) containing 2% FBS, supplements and 10 µM human

serum albumin (HSA; CSL Behring, Switzerland; 2%-FBS-MEM + HSA). 500 µl of virus suspension

containing 1.5×10^6 plaque forming units (pfu) SARS-CoV-2 in 2%-FBS-MEM + HSA were mixed with 500

µl of serially diluted DARPin® molecules or monoclonal antibodies and subsequently incubated for 1

hour at 37°C. The mixtures were then transferred to confluent Vero E6 cells in 12 well plates and

incubated for 4 days at 37°C, >85% humidity and 5% CO_2. Each culture well was assessed for cytopathic

effect (CPE) by microscopy. Supernatant was removed from wells with the highest DARPin® or antibody

concentrations showing significant CPE (≥20%) and used for total RNA extraction and further passaging.

For subsequent rounds of passaging, remaining 900 µl supernatant of selected wells was diluted in 4

ml in 2%-FCS-MEM + HSA and from the 4.9 mL, 500 µl mixed with serial dilutions of DARPin® molecules

or antibodies, incubated and the mixture transferred to 12-well plates with fresh Vero E6 cells as

described above. Cell culture wells were assessed for CPE again after 4 days and the supernatant of

wells with highest DARPin® or antibody concentrations with evident viral replication (CPE) harvested

and used for additional passages. A total of 4 passages were performed this way.

Deep sequencing of viral passages

RNA of the cell culture supernatant was extracted using the RNeasy Universal Plus kit (Qiagen, Basel,

Switzerland) according to the manufacturer's protocol. 10.5 µl of the extract was reverse transcribed

using Superscript VILO (ThermoFisher Scientific, Reinach, Switzerland) following the manufacturer's

instructions. Barcoded libraries were prepared on the Ion Chef Instrument (ThermoFisher Scientific)

using the Ion AmpliSeq SARS-CoV-2 Research Panel (ThermoFisher Scientific). 8-16 barcoded samples

were pooled and loaded on one Ion 530 chip using the Ion Chef Instrument (ThermoFisher Scientific)

and sequenced on the Ion S5 System with 550 flows.

The resulting BAM files were converted to fastq format using Samtools 1.10[38] and subjected to adapter

and quality trimming using Trimmomatic 0.39[39] (options: ILLUMINACLIP:adapters.fasta:2:30.10,

LEADING: 3, TRAILING: 3, SIDINGWINDOW:4:15, MINLEN:36). Reads were aligned to the SARS-CoV-2

reference genome (NC_045512.2) using bwa 0.7.17[40] and variants were determined using LoFreq

v2.1.5[41]. Variants were filtered for a minimal depth (DP) of 400X and a minimal allele frequency (AF) of

3% using bcftools 1.10[38]. Functional annotation of the variants was performed using SNPEff 5.0[42].

Variants were visualized in R 3.6.1[43] using ComplexHeatmap 2.2[44].

Virus neutralization of authentic wild type and variants of SARS-CoV-2 determined by Cell Titer-Glo

Virus neutralization capacity of mono-valent DARPin® candidate and multispecific DARPin® molecules

was determined for 100 $TCID_{50}$ SARS-CoV-2 variants from lineage B.1.1.7 (H69_V70del, Y145del,

N501Y, A570D, D614G, P681H, T716I, S982A, D1118H), B.1.351 (L18F, D80A, D215G, L242_L244del,

T302T, K417N, E484K, N501Y, D571D,D614G, A701V) and P.1 (L18F, T20N, P26S, D138Y, R190S,

K417T, E484K, N501Y, D614G, H655Y, T1027I, V1176F) in reference to a wild-type French isolate (with

the following differences to the Wuhan wild-type: V367F; E990A) by measuring ATP levels of

protected cells in a cell viability assay. DARPin® molecules were serially diluted 1:4 from 40 nM to 2.4

pM (in triplicates) in 100 µl cell culture medium (2%-FBS-DMEM) enriched with 10 µM HSA in 96 well

plates. The diluted DARPin® antivirals were mixed with 100 $TCID_{50}$ SARS-CoV-2 in 100 µl 2%-FBS-MEM

+ HSA and incubated for 1 h at 37°C. DARPin®/virus mixtures (200 µl) were transferred onto confluent

Vero E6/TMPRSS2. The controls consisted of cells exposed to virus suspension only, to determine

maximal cytopathic effect and of cells incubated with medium only, to determine baseline state of

cells. The plates were incubated for 3 days at 37°C, >85% humidity and 5% CO_2. Cell viability was

determined by removing 100 µl supernatant from all wells and adding 100 µl CellTiter-Glo reagent to

the cells as described in the manufacturers protocol (CellTiter-Glo® Luminescent Cell Viability Assay,

Promega, Madison, USA). After 2 minutes shaking on an orbital shaker, lysis of the cells during 10 min

and transfer to an opaque-walled plate at room temperature, luminescence was read using a GloMax

instrument (Promega).

Neutralization of authentic SARS-CoV-2 by MP0423 and its domain knock-outs was determined by Cell Titer-Glo and real-time RT-PCR

Virus neutralization capacity of mono-valent DARPin® candidate and multispecific DARPin® molecules was determined for 100 $TCID_{50}$ SARS-CoV-2 wild-type French isolate (with the following differences to the Wuhan wild-type: V367F; E990A) by measuring ATP levels of protected cells in a cell viability assay. DARPin® molecules were serially diluted 1:4 from 40 nM to 2.4 pM (in triplicates) in 100 µl cell culture medium (2%-FBS-MEM) enriched with 10 µM HSA in 96 well plates. The diluted DARPin® molecules were mixed with 100 $TCID_{50}$ SARS-CoV-2 in 100 µl 2%-FBS-MEM + HSA and incubated for 1 h at 37°C. DARPin®/virus mixtures (200 µl) were transferred onto confluent Vero E6 cells. The controls consisted of Vero E6 cells exposed to virus suspension only, to determine maximal cytopathic effect and of cells incubated with medium only, to determine baseline state of cells. The plates were incubated for 3 days at 37°C, >85% humidity and 5% CO_2. Cell viability was determined by removing 100 µl supernatant from all wells and adding 100 µl CellTiter-Glo reagent as described in the manufacturers protocol (CellTiter-Glo® Luminescent Cell Viability Assay, Promega, Madison, USA). Luminescence was read after 2 minutes shaking on an orbital shaker, transferring the mixture to an opaque-walled plate and 10 min incubation at room temperature using the GloMax instrument (Promega). To measure virus replication, the previously removed supernatant (100 µl) was inactivated in 400 µl AVL-buffer (Qiagen, Hilden, Germany) and 400 µl 100% ethanol and extracted using the MagNAPure 96 system (Roche, Basel, Switzerland) and eluted in 100 µl. Viral RNA was quantified by real-time RT-PCR targeting the E gene (Eurosurveillance | Detection of 2019 novel coronavirus (2019-nCoV) using 5 µl RNA and 20 µl TaqMan Fast Virus 1-Step Master Mix (Life Technologies, Zug, Switzerland). Viral genome equivalents (ge) were calculated using a regression analysis and an internal standard.

483   Supplementary Figures

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Supplementary Figure 1: Molecular model of multispecific DARPin® antivirals.

Molecular model of multi-paratopic DARPin® candidate ensovibep (left) consisting of five DARPin®

domains (yellow: HSA-binding domains, shades of blue: RBD-binding domains) bound to the RBDs

(white) of the spike ectodomain (grey). Linkers are shown in black. Position of RBD and NTD binders

guided by Cryo-EM data. Molecular model of multispecific MP0423 (right), consisting of five DARPin®

domains (yellow: HSA-binding domains, blue: RBD-binding domain, green: NTD-binding domain,

orange: S2-binding domain) bound to the spike ectodomain. Linkers are shown in black. *For the S2

binder, the epitope is unknown.[20]

A

MP0423:
| HSA | HSA | RBD | NTD | S2 |

MP0423_RBD k.o.:
| HSA | HSA | k.o. | NTD | S2 |

MP0423_NTD k.o.:
| HSA | HSA | RBD | k.o. | S2 |

MP0423_S2 k.o.:
| HSA | HSA | RBD | NTD | k.o. |

B PsV SARS-CoV-2 neutralization assay

- MP0423
- MP0423_RBD k.o.
- MP0423_NTD k.o.
- MP0423_S2 k.o.
- Multi-DARPin isotype control

C SARS-CoV-2 neutralization assay (cell viability)

- MP0423
- MP0423_RBD k.o.
- MP0423_NTD k.o.
- MP0423_S2 k.o.
- Multi-DARPin isotype control

SARS-CoV-2 neutralization assay (viral genome quantification)

- MP0423
- MP0423_RBD k.o.
- MP0423_NTD k.o.
- MP0423_S2 k.o.
- Multi-DARPin isotype control

D

	ng/mL		
	IC_{50} (PsV)	EC_{50} (cell viability)	IC_{50} (RT-qPCR)
MP0423	2.1	7	3.2
MP0423_RBD k.o.	80.5	117.5	20.8
MP0423_NTD k.o.	1.5	3.5	1.8
MP0423_S2 k.o.	58.8	49.1	28.8

Neutralization potency:

MP0423 ~ MP0423_NTD k.o. > MP0423_RBD k.o. ~ MP0423_S2 k.o.

Supplementary Figure 2: Determination of the contribution of the single DARPin® domains of MP0423 in the neutralization activity against SARS-CoV-2. **A)** Schematic representation of the multi-specific MP0423 knock-out (k.o) constructs. In each k.o. construct, the indicated SARS-CoV-2-binding domain is replaced by a non-binding DARPin®. HSA: HSA-binding DARPin®, RBD: RBD-binding DARPin®, NTD: NTD-binding DARPin®, S2: S2-binding DARPin®; **B)** Neutralization profiles of MP0423 and k.o constructs against VSV-SARS-CoV-2 pseudoviruses expressing the wild-type spike protein; **C)** Upper panel: protective effect of DARPin® molecules against SARS-CoV-2 (100 pfu)-mediated cytopathic effect. Depicted are the percentage of cell protection conferred by MP0423 or the k.o contructs. Cell protection was determined after 3 days of incubation by measuring intracellular ATP levels in a cell viability assay using Cell Titer-Glo. Lower panel: inhibition of SARS-CoV-2 viral replication quantified by real-time RT-PCR and expressed as percentage of viral genome equivalents present in the supernatant of Vero E6 cells exposed to 100 pfu SARS-CoV-2 with increasing amounts of MP0423 or k.o. constructs. **D)** IC_{50}/EC_{50} values and potency ranking of the constructs analyzed. No potency loss compared to MP0423 was observed for MP0423_NTD k.o. while a reduction in neutralization activity was observed for the MP0423_RBD k.o. and the MP0423_S2 k.o. constructs.

Supplementary Figure 3: Titration curves for ensovibep (MP0420) and its RBD-binding domains (i.e. RBD-1, RBD-2 and RBD-3), MP0423, REGN10933 and REGN10987 to determine IC$_{50}$ neutralization potencies on multiple spike mutants and variants summarized in Table 1. Reported is the mean +/- SEM (standard error of the mean). **A)** VSV-based pseudovirus assay on variants carrying multiple spike mutations as specified in Table 1; **B)** VSV-based pseudovirus assay on single mutations present in different variants; **C)** VSV-based pseudovirus assay on single mutations present in high frequency, reported as resistance mutations for other therapeutics or located within the RBD epitope; **D)** Lentivirus-based pseudovirus assay on variants carrying multiple spike mutations as specifed in Table 1; **F)** Lentivirus-based pseudovirus assay on single mutations present in different variants, analyzed in a D614G background; **F)** SARS-CoV-2 neutralization assay on the globally most diffused variants B.1.1.7, B.1.351 and P.1 compared to wild type.

		I68K	F140del	F175S	H245Y	V367F	F486L	H655Y	N679_R685del	R682W	R682Q	Q779*	E990A	T1273T	
Virus Control		0.00	0.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.78	0.08	P0
		0.00	0.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.86	0.08	P1
		0.00	0.00	0.00	0.00	1.00	0.00	0.04	0.00	0.00	0.00	0.00	0.84	0.10	P2
		0.23	0.00	0.00	0.00	1.00	0.00	0.21	0.00	0.00	0.17	0.00	0.52	0.08	P3
		0.31	0.00	0.00	0.00	1.00	0.00	0.35	0.00	0.35	0.09	0.00	0.28	0.11	P4
RBD-2		0.00	0.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.95	0.09	P1
		0.00	0.00	0.00	0.00	1.00	0.95	0.00	0.00	0.00	0.00	0.00	1.00	0.00	P2
		0.00	0.00	0.00	0.00	1.00	0.99	0.00	0.00	0.10	0.00	0.00	1.00	0.00	P3
ensovibep		0.00	0.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.87	0.10	P1
		0.00	0.00	0.00	0.00	1.00	0.00	0.00	0.56	0.00	0.00	0.00	0.27	0.00	P2
		0.00	0.00	0.00	0.00	1.00	0.00	0.00	0.61	0.00	0.35	0.00	0.50	0.00	P3
		0.00	0.00	0.00	0.08	1.00	0.00	0.00	0.46	0.00	0.50	0.00	0.41	0.00	P4
MP0423		0.00	0.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00	0.00	0.03	0.86	0.10	P1
		0.00	0.00	0.03	0.00	1.00	0.00	0.07	0.00	0.18	0.00	0.00	0.84	0.22	P2
		0.00	0.60	0.00	0.00	1.00	0.00	0.00	0.00	0.71	0.00	0.00	0.95	0.72	P3
		0.00	0.98	0.00	0.00	1.00	0.00	0.00	0.00	0.99	0.00	0.00	1.00	1.00	P4
MP0423 & ensovibep		0.00	0.00	0.00	0.00	1.00	0.00	0.00	0.00	0.00	0.00	0.00	0.89	0.09	P1
		0.00	0.00	0.00	0.00	1.00	0.00	0.00	0.00	0.08	0.47	0.00	0.90	0.03	P2
		0.00	0.00	0.00	0.00	1.00	0.00	0.00	0.00	0.12	0.82	0.00	0.88	0.00	P3
		0.00	0.00	0.00	0.00	1.00	0.00	0.00	0.00	0.07	0.92	0.00	0.92	0.00	P4

Supplementary Figure 4: Identification of escape mutations in viral passages using deep sequencing

SARS-CoV-2 virus was serially passaged with the mono-valent DARPin binder RBD-2, the multispecific DARPin® candidates ensovibep and MP0423 or a combination of both multispecific DARPin® candidates. To identify putative escape mutations in the spike protein, RNA was extracted and sequenced from supernatant of wells with the greatest selective pressure showing a significant cytopathic effect (see Figure 2 for the experimental design). All variants in the Spike protein relative to the reference genome (NC_045512.2) are shown. Passage 0 of the virus control corresponds to the inoculum used for all experiments. The color of the fields is proportional to the fraction of the reads containing the respective variant (red= 1.0 white=0.0).

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