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2 **6',6'-Difluoro-aristeromycin is a potent inhibitor of MERS-coronavirus replication**

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15 **Running title:** Antiviral activity of DFA against coronaviruses

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19 **Abstract**

20 The severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) pandemic has highlighted the lack of  
21 treatments to combat infections with human or (potentially) zoonotic CoVs. Thus, it is critical to develop  
22 and evaluate antiviral compounds that either directly target CoV functions or modulate host functions  
23 involved in viral replication. Here, we demonstrate that low-micromolar concentrations of 6',6'-difluoro-  
24 aristeromycin (DFA), an adenosine nucleoside analogue, strongly inhibit the replication of Middle East  
25 respiratory syndrome coronavirus (MERS-CoV) in a cell-based infection assay. DFA was designed to target  
26 S-adenosylhomocysteine (SAH) hydrolase and, consequently, may affect intracellular levels of the methyl  
27 donor S-adenosylmethionine, which is used by two CoV methyltransferases involved in the capping of the  
28 5' end of the viral mRNAs. Passaging of wild-type MERS-CoV in the presence of DFA selected a mutant  
29 with a ~100-fold decreased DFA sensitivity. This drug-resistant population carried various amino acid  
30 substitutions in the viral nonstructural proteins (nsp), including mutations in nsp16, which has 2'-O-  
31 methyltransferase activity, and nsp13, which contains a nucleoside triphosphate hydrolase activity that  
32 has also been implicated in CoV capping. Based on our results, we hypothesize that DFA directly or  
33 indirectly affects viral cap methylation, either by inhibiting the viral enzymes involved or by binding to  
34 SAH hydrolase. We also evaluated the antiviral activity of DFA against other betacoronaviruses, but found  
35 it to have limited impact on their replication, while being quite cytotoxic to the Calu-3 cells used for this  
36 comparison. Nevertheless, our results justify the further characterization of DFA derivatives as an inhibitor  
37 of MERS-CoV replication.

## 38 **Introduction**

39 Previously, the emergence of severe acute respiratory syndrome coronavirus (SARS-CoV; in 2003 in China)  
40 and Middle East respiratory syndrome coronavirus (MERS-CoV; in 2012 in Saudi Arabia) highlighted the  
41 potential pandemic threat posed by this type of zoonotic pathogens and the need to develop rapid  
42 response options to contain them (1-4). Due to the severity of the diseases caused by SARS-CoV and MERS-  
43 CoV, and their potential for zoonotic transmission and global spread, both these agents received a priority  
44 status from the World Health Organization and other government agencies for the development of  
45 prophylactic and therapeutic treatment strategies (5, 6). The current SARS-CoV-2 pandemic (7, 8) and its  
46 burden on public health worldwide further emphasize the critical nature of the quest for anti-CoV drugs  
47 with high clinical efficacy. Thus far, only remdesivir was approved for emergency treatment of COVID-19  
48 patients in the United States of America, Europe, and Japan. Many drug classes currently are under  
49 evaluation as inhibitors of CoV replication, including both compounds directly targeting viral functions,  
50 like viral proteases and the RNA polymerase, and host factor-targeting inhibitors (reviewed in (9-12)).

51 Coronaviruses are positive-stranded RNA (+RNA) viruses with a single genomic RNA of approximately 30  
52 kb that is replicated in the cytoplasm of infected cells. Following entry, the 5'-capped viral genome is  
53 recognized and translated by host ribosomes to yield the replicase polyproteins pp1a and pp1ab (13).  
54 Subsequently, these large precursors are processed into 16 individual nonstructural proteins (nsp 1 to 16),  
55 which are released following polyprotein cleavage by two or three internal proteases. Together, the nsps  
56 form a multi-enzyme complex that ensures the replication of the viral genome and the transcription of a  
57 set of subgenomic mRNAs (reviewed in (14, 15)). The enzymatic core of this complex is formed by the  
58 nsp12 RNA-dependent RNA polymerase (RdRp) that synthesizes RNA with the help of the auxiliary factors  
59 nsp7 and nsp8 (16, 17), the nsp13 helicase that unwinds RNA duplexes (18-20), and several other RNA-  
60 processing enzymes residing in nsp12-nsp16 (reviewed in (15, 21, 22)). These also include a 3'-to-5'  
61 exoribonuclease (nsp14-ExoN) that is thought to increase replication fidelity by correcting mismatches  
62 sustained during RNA synthesis (reviewed in (23-26)). The viral structural and accessory proteins, encoded  
63 by smaller open reading frames located in the 3'-proximal part of the genome, are expressed from a set  
64 of 5'-capped and 3'-polyadenylated subgenomic mRNAs (reviewed in (15, 22)). Apart from ensuring mRNA  
65 recognition during formation of the ribosomal preinitiation complex, the 5'-terminal cap structure  
66 protects the viral mRNAs from degradation by cellular ribonucleases and prevents detection by the host's  
67 intracellular pathogen recognition receptors, which would trigger innate immune responses (reviewed in  
68 (27)).

69 The CoV capping mechanism is thought to consist of four sequential reactions: (i) an RNA triphosphatase  
70 activity residing in nsp13 removes the  $\gamma$ -phosphate group from the 5'-triphosphorylated RNA (28, 29); (ii)  
71 a guanosine monophosphate (GMP) is transferred to the 5'-diphosphate terminus by a yet to be confirmed  
72 guanylyltransferase (GTase)(30), which was recently proposed to reside in the N-terminal nucleotidyl  
73 transferase (NiRAN) domain of nsp12 (31); (iii) the nsp14 methyltransferase (MTase) methylates the cap's  
74 5'-terminal guanine at the N7-position, producing the so-called cap-0 structure,  $7^{\text{me}}\text{GpppN}$  (32); (iv) finally,  
75 a cap-1 structure is formed when nsp16, in complex with its nsp10 co-factor, methylates the ribose 2'-O-  
76 position of the first transcribed nucleotide of each viral RNA, converting  $7^{\text{me}}\text{GpppN}$  into  $7^{\text{me}}\text{GpppN}_{2^{\text{me}}}$  (33).  
77 Biochemical studies demonstrated that N7-methylation of the cap is a pre-requisite for its subsequent 2'-  
78 O-methylation by nsp16/nsp10 (34-36). Given the central position of the RNA-synthesizing and capping  
79 machinery in the CoV replication cycle, each single component constitutes a potential target for direct-  
80 acting antiviral drug development.

81 As in cellular methylation reactions, S-adenosyl-L-methionine (SAM) is the most common methyl donor  
82 used by viral MTases, such as those present in CoV nsp14 and nsp16 (37, 38). Thus, the identification of  
83 compounds that can interfere with viral mRNA capping, by either directly targeting viral MTases or  
84 indirectly affecting the concentrations of essential cellular metabolites, constitutes a viable strategy to  
85 develop broad-spectrum CoV inhibitors. S-Adenosyl-homocysteine (SAH) is released upon the transfer of  
86 the methyl group of SAM to a nucleic acid substrate by a SAM-dependent MTase. Consequently,  
87 accumulation of SAH can interfere with SAM-dependent MTase function due to product inhibition (39).  
88 Inhibitors targeting S-Adenosyl-homocysteine (SAH) hydrolase have been reported as potential broad-  
89 spectrum antiviral drugs in different studies (40-42). This hydrolase catalyzes the reversible conversion of  
90 SAH into adenosine and L-homocysteine, which both are then further metabolized for use in different  
91 cellular pathways (43, 44).

92 Recently, using cell-based assays for MERS-CoV, SARS-CoV, chikungunya and Zika virus replication, we  
93 described the inhibitory potential of a set of adenosine and selenoadenosine analogues (41). These  
94 compounds were derived from aristeromycin, a well-known carbocyclic nucleoside compound that  
95 inhibits SAH hydrolase and exhibits anti-viral, anti-cancer and anti-toxoplasma activities (reviewed in (45)).  
96 These aristeromycin derivatives are nucleoside analogues designed to directly target viral RdRp activity  
97 and/or indirectly target the methylation of viral RNA by inhibiting the host SAH hydrolase (41). From this  
98 library, we identified 6',6'-difluoro-aristeromycin (DFA) as the aristeromycin derivative that inhibited  
99 MERS-CoV replication most efficiently in cell-based assays (41). In different cell lines, DFA inhibited MERS-

100 CoV replication at low micromolar concentrations and could potentially reduce the progeny titers produced  
101 by MERS-CoV. Evaluation of the potential of DFA as a broad-spectrum antiviral compound revealed limited  
102 inhibition of the replication of different  $\beta$ -CoVs at non-cytotoxic concentrations. This suggests that DFA-  
103 based derivatives need to be developed to improve the antiviral activity of this compound class and reduce  
104 the cytotoxic side- effects.

105

## 106 **Results**

### 107 DFA inhibits MERS-CoV replication at low-micromolar concentrations in different cell lines

108 DFA was part of a library of more than 80 adenosine and selenoadenosine analogues that was previously  
109 evaluated for its antiviral activity against MERS-CoV, SARS-CoV and mouse hepatitis virus (MHV) using cell-  
110 based cytopathic effect (CPE) reduction assays. From this analysis, DFA was identified as the most potent  
111 inhibitor of MERS-CoV and SARS-CoV replication, with EC<sub>50</sub> values (half-maximum effective concentration)  
112 of 0.2 μM and 0.5 μM, respectively. The compound was found to be more effective in reducing the  
113 progeny titers of MERS-CoV than those of SARS-CoV, yielding reductions of more than 3 log<sub>10</sub> and 1 log<sub>10</sub>,  
114 respectively, when treating Vero cells with 1.2 μM of DFA (41). We now evaluated the antiviral activity of  
115 DFA against MERS-CoV in more detail using two independent cell-based assays: a CPE-reduction assay and  
116 a dose response assay, using previously described protocols (46, 47).

117 Different cell lines of human (Huh7 and MRC-5) and non-human origin (Vero) were treated with increasing  
118 concentrations of DFA and infected with MERS-CoV at a low multiplicity of infection (MOI) of 0.01.  
119 Remdesivir (RDV) and chloroquine (CHO) were included as positive controls for inhibition of viral  
120 replication. The mean EC<sub>50</sub> values in Vero cells for these control compounds, RDV and CHO, were 0.4 μM  
121 and 25 μM, respectively, similar to what was described previously (48, 49). Using CPE reduction assays,  
122 EC<sub>50</sub> values in the low-micromolar range were measured for DFA in each of the three cell lines: 0.2 μM in  
123 Vero cells, 5.2 μM in Huh7 cells, and 2.3 μM in MRC-5 cells (Fig. 1A-C). In cytotoxicity control studies, the  
124 corresponding CC<sub>50</sub> values (the compound concentration resulting in 50% cytotoxicity) were calculated to  
125 be 3.6 μM in Vero, 64 μM in Huh7, and >100 μM in MRC-5 cells (Fig 1A-C). Differences between cell lines  
126 in sensitivity (cytotoxicity) to DFA treatment, as observed here, may reflect variation in SAH hydrolase  
127 expression (a target of DFA) or uptake and metabolization of the compound.

128 In order to analyze the inhibitory effect of DFA on MERS-CoV progeny production in more detail, a  
129 multiple-cycle dose response assay was performed. Cells were again infected at MOI 0.01, which was  
130 followed by treatment with an increasing dose of DFA, ranging from 0.05 to 50 μM. Infected cell culture  
131 supernatants were harvested at 48 h post infection (h p.i.) and viral progeny titers were determined by  
132 plaque assay in Vero cells. A dose-dependent reduction of viral progeny was observed, with a 4 to 5 log<sub>10</sub>  
133 decrease following treatment with >1.2 μM of DFA in Vero cells, >2.4 μM in Huh7, and >12.5 μM in MRC-  
134 5, respectively (Fig. 1D-F). Similar or lower EC<sub>50</sub> values than in the CPE reduction assay were calculated  
135 from these studies: 0.2 μM in Vero cells, ~0.8 μM in Huh7 cells, and 1.4 μM in MRC-5 cells. These results

136 indicated that DFA exhibits a similar antiviral activity across multiple cell lines resulting in a consistent ~3.5  
137 to 4- $\log_{10}$  reduction of MERS-CoV progeny titers.

138 Having established the strong inhibition of MERS-CoV replication by DFA, we also tested its  
139 monophosphoramidate pro-drug (pDFA; Fig. 2A) in a CPE-reduction assay. This compound was  
140 synthesized in order to circumvent the rate-limiting first phosphorylation step that presumably restricts  
141 the efficient metabolization of nucleoside analogues like DFA following their uptake by the cell (reviewed  
142 in (50)). Unfortunately, in this case the pro-drug was less active than DFA itself, independent of the cell  
143 line used (Fig. 2B). Although the chemical and structural modifications of the prodrug decreased its  
144 cytotoxicity, the calculated  $EC_{50}$  values, 9  $\mu$ M in Vero cells and 36  $\mu$ M in MRC-5 cells, were more than 10  
145 times higher than the ones measured for DFA (Fig. 1). Therefore, pDFA was not included in subsequent  
146 experiments.

147

#### 148 DFA inhibits the early stage of MERS-CoV replication

149 To characterize the mechanism of action of DFA in more detail, a time-of-addition assay was performed  
150 to determine which stage of the viral replication cycle was inhibited by the compound. For this purpose,  
151 Vero or MRC-5 cells were infected with MERS-CoV at high MOI (3 PFU/cell) and treated with DFA at  
152 different time points pre and post infection at a concentration equaling 4 times the  $EC_{50}$ . We observed  
153 inhibition of replication when the compound was administered before infection and at time points up to  
154 4 h p.i. in Vero (Fig. 3A) and 8 h p.i. in MRC-5 (Fig. 3B). In Vero cells, a 2  $\log_{10}$  reduction of progeny virus  
155 titers was observed when the compound was administered between 24 h before infection and 1 h p.i. In  
156 MRC-5 cells, DFA treatment led to a larger decrease of viral progeny production, >3  $\log_{10}$ , when treatment  
157 was started up to 4 h p.i. At the DFA dosage used, no cytotoxicity was detected in either cell line (data not  
158 shown). Replication kinetics of MERS-CoV is similar in Vero and MRC-5 cells (51, 52). Thus, the different  
159 levels of progeny titer reduction observed between the two cell lines may be explained by variation in  
160 uptake or metabolic conversion of the compound (53). In any case, these results demonstrated that DFA  
161 inhibits an early stage of MERS-CoV replication.

162

#### 163 Selection of MERS-CoV mutants with 100-fold increased DFA resistance

164 In order to explore the mode of action of DFA, we selected for compound-resistant MERS-CoV mutants.  
165 For this purpose, wild-type MERS-CoV (wtP0) was serially passaged 10 times in MRC-5 cells in the presence

166 of increasing DFA concentrations (from 2.5  $\mu$ M up to 45  $\mu$ M). In each passage, two controls were taken  
167 along: untreated cells infected with wt virus to monitor for cell culture adaptations (referred to as  
168 'untreated wt'), and mock-infected cells treated with the corresponding concentration of DFA to assess  
169 compound cytotoxicity. Development of CPE was monitored microscopically, and plaque phenotype and  
170 viral progeny production were evaluated by plaque assay after each passage. From passage 8 (P8)  
171 onwards, two of the three independently generated lineages showed no increased CPE compared to  
172 uninfected, DFA-treated control cells, meaning that these virus populations could not replicate in the  
173 presence of DFA concentrations above 35  $\mu$ M, which were used in these later passages. When P8 virus  
174 from lineages 1 or 2 was tested in a CPE-reduction assay, no increased DFA resistance was noticed  
175 compared to an untreated wt virus control (data not shown). In contrast, lineage 3 (L3) virus did show  
176 clear signs of developing DFA resistance. After 10 passages, infection of cells with L3P10 virus in the  
177 presence of 45  $\mu$ M DFA led to full CPE, which developed equally fast as for the untreated wt control. When  
178 L3P10 virus was tested in a dose response assay, only a small ( $<0.5 \log_{10}$ ) effect of DFA treatment on viral  
179 progeny production was observed in the presence of up to 100  $\mu$ M of DFA (Fig. 4A). When compared to  
180 untreated wt (wtP10) or parental virus (wtP0), L3P10 virus displayed a more than 100-fold increased drug  
181 resistance, with an  $EC_{50}$  value  $>100 \mu$ M against 0.8  $\mu$ M for wtP10 and 0.4  $\mu$ M for wtP0.

182 In order to assess if the increased DFA resistance of L3P10 affected its replication kinetics in comparison  
183 to the wt control, multi-cycle infections of MRC-5 cells were performed. The two viruses showed similar  
184 growth kinetics (Fig. 4B) with peak titers of  $6.1 \times 10^6$  PFU/ml (wt) and  $7.5 \times 10^6$  PFU/ml (L3P10) at 48 h p.i.  
185 Taken together, the replication kinetics and strongly increased DFA resistance suggested that, during serial  
186 passaging in the presence of DFA, the L3P10 virus population had acquired mutations that account for a  
187 strongly increased resistance to the compound.

188

### 189 Mutations in the L3P10 virus population implicate DFA in the inhibition of viral capping

190 In order to identify mutations that contribute to DFA resistance, we sequenced the L3P10 virus population  
191 by Illumina next-generation sequencing. Subsequently, sequencing reads were mapped to the reference  
192 sequence of MERS-CoV strain EMC/2012 (NC\_019843.3; (3)). Sequence variants constituting less than 10%  
193 of the total population of viral reads were excluded from further analysis. The short read length (150  
194 nucleotides) did not allow us to determine which mutations were combined in the same genome. A total  
195 of 14 mutations was identified: five synonymous and nine non-synonymous mutations distributed across  
196 genes encoding nine different viral proteins. Translationally silent mutations were considered unlikely to



197 be relevant for the phenotypic profile of L3P10 and disregarded for further analysis. As shown in Table 1,  
198 the majority of the identified non-synonymous mutations were present in only part of the viral population  
199 (in 37% to 55% of the total reads), suggesting a complex pattern of virus evolution with DFA resistance  
200 possibly relying on (different) combinations of mutations. Only L3P10 mutations leading to amino acid  
201 substitutions in the viral replicase (nsp1 to nsp16) were considered to possibly be associated with DFA  
202 resistance, as accessory proteins like that encoded by ORF5 are not essential for viral replication in cell  
203 culture ((54) and reviewed in (55)). The CoV spike protein is involved in receptor recognition and viral  
204 entry (56) and therefore an unlikely target for inhibition by nucleoside analogues. A G12033 to A mutation  
205 in the nsp7-coding region resulting in a D73N substitution was also identified in untreated wtP10 and  
206 therefore concluded to result from cell culture adaptation. The remaining mutations that should be  
207 considered mapped to nsps 1, 3, 12, 13 and 16 (Table 1).

208 As DFA is a nucleoside analog and was designed as a dual-target inhibitor of RdRps and (indirectly) MTases  
209 (41), we were particularly interested in mutations identified in viral enzymes involved in RNA synthesis  
210 and capping. Therefore, we considered four nonsynonymous substitutions most likely to contribute to the  
211 observed DFA-resistance of the L3P10 virus population: Y218F in the nsp12-NiRAN domain, R22K and  
212 R161H in the nsp13 ZBD-helicase subunit, and L156F in the nsp16 2'-O-MTase (Table 1). The latter  
213 mutation was the only one of the four that was present throughout the L3P10 population. Recently, the  
214 nsp12 NiRAN domain was proposed to function as the capping GTase (31), while nsp13 and nsp16 are  
215 both thought to be involved in the CoV capping mechanism (see Introduction; reviewed in (30)).  
216 Therefore, we hypothesize that DFA treatment affects the MERS-CoV capping mechanism and -  
217 consequently – overall virus replication. However, as further optimization of this compound is needed to  
218 improve its selectivity index, we did not perform follow-up experiments to elucidate its mode of action at  
219 this stage.

220

#### 221 Evaluation of DFA potential as a pan-coronaviral inhibitor

222 Taking into account the lack of antivirals against SARS-CoV-2 and the capacity of DFA to inhibit both SARS-  
223 CoV and MERS-CoV replication, we decided to explore the potential of DFA as a broad-spectrum antiviral.  
224 To this end, Calu-3 cells, a human lung cell line that supports MERS-CoV, SARS-CoV and SARS-CoV-2  
225 replication (57, 58), were treated with increasing concentrations of DFA and infected with each of these  
226 viruses in a dose response assay. By using the same cell line for each of these CoVs, differences in DFA up-  
227 take or metabolic conversion to its triphosphate form were eliminated. The results showed a dose-

228 dependent decrease in the production of viral progeny for MERS-CoV (Fig. 5A) and SARS-CoV-2 (Fig. 5C)  
229 that follows the cytotoxicity of the compound. At a DFA concentration of 3.2  $\mu$ M, only a small reduction  
230 of MERS-CoV and SARS-CoV-2 progeny was observed, 0.5 to 1log<sub>10</sub>. Surprisingly, the antiviral activity of  
231 DFA against MERS-CoV in Calu-3 cells was severely reduced when compared to results obtained in other  
232 cell lines, including another human lung cell line MRC-5 (Fig. 1D-F). In the case of SARS-CoV infection, a  
233 minor inhibitory effect was observed at concentrations that appeared to be somewhat cytotoxic (Fig. 5B  
234 and 5D), contrary to what was demonstrated in Vero E6 cells ((41) and Table 2). Unfortunately, in Calu-3  
235 cells cytotoxicity was detected at low compound concentrations (>6.2  $\mu$ M) and the inhibitory effects  
236 observed could thus be associated with an overall decrease in relative cell viability. This indicates that the  
237 design of improved DFA derivatives is needed to decrease cytotoxicity and improve inhibitory potency.  
238

## 239 Discussion

240 This study describes that treatment with low-micromolar concentrations of DFA exhibit a strong antiviral  
241 effect on MERS-CoV replication in cell culture-based infection models (Fig. 1). Time-of-addition assays  
242 indicated that DFA reduced MERS-CoV progeny production when cells were treated prior to, at the time  
243 of, or within 4 h after infection (Fig. 3), suggesting that DFA interferes with the early stage of replication.  
244 Propagation of MERS-CoV in the presence of DFA led to the selection of a virus population with strongly  
245 enhanced resistance to this compound (Fig. 4). Subsequent sequence analysis revealed a potentially  
246 complex pattern of resistance evolution, exhibiting multiple mutations that are present in only part of the  
247 virus population, including several that map to enzymes involved in viral RNA synthesis and mRNA capping  
248 (Table 1).

249 DFA was originally designed to target the host SAH hydrolase directly and was demonstrated to inhibit  
250 this enzyme *in vitro* with an  $IC_{50}$  (50% inhibitory concentration) of 1.06  $\mu$ M (41). The compound is a  
251 carbocyclic adenosine analogue based on the parental inhibitor aristeromycin (59, 60), which was further  
252 modified by incorporation of a difluorine group at the 6' (top) position of its sugar ring ((41) and Fig. 2A).  
253 This modification improved the binding affinity of the compound for human SAH hydrolase and,  
254 consequently, the inhibition of its enzymatic activity.

255 Previous studies demonstrated that treatment of cells with high-affinity SAH hydrolase inhibitors, such as  
256 neplanocin A and aristeromycin, increases the intracellular SAH concentration, preventing the metabolic  
257 conversion of SAH to adenosine and L-homocysteine (reviewed in (61)). Therefore, SAH hydrolase  
258 inhibitors reduce or deplete the intracellular pools of homocysteine and adenosine, the latter being  
259 produced exclusively by SAH hydrolysis. As the SAM methyl donor is formed via homocysteine trans-  
260 sulfuration or the adenosine kinase pathway, SAH hydrolase regulates the intracellular SAM levels and  
261 consequently the cell's SAM-dependent methylation reactions. Moreover, SAH accumulation can also  
262 reduce the activity of SAM-dependent methyltransferases by feed-back inhibition, as SAH can bind to their  
263 active site with higher affinity than SAM itself (39). (62)

264 A correlation between the antiviral effect of adenosine analogues and their ability to interfere with viral  
265 capping has been demonstrated in previous studies with chikungunya virus, dengue virus, West Nile virus  
266 and vaccinia virus (63-66). Both CoV methyltransferases use SAM as a methyl donor for their enzymatic  
267 activity (36, 67, 68). Thus, SAH hydrolase inhibition and reduced SAM concentrations may impact, if not  
268 block, their activity. Previous studies with 5'- $\beta$ -fluoroadenosine and derivatives of aristeromycin  
269 demonstrated that inhibition of SAH hydrolase affects viral replication by reducing RNA methylation

270 (reviewed in (61)). Moreover, neplanocin A, another SAH hydrolase inhibitor, was proven to bind to  
271 methionine and prevent SAM production. Consequently, this leads to a block of 2'-O-methylation up to  
272 60% (reviewed in (69)). Biochemical analysis of the MERS-CoV nsp16/nsp10 complex showed the capacity  
273 of this enzyme to bind SAH with greater affinity than SAM (34), whereas superimposition of the SARS-CoV  
274 nsp16/nsp10 in complex with SAH demonstrated that the same binding site is used by both substrates  
275 (70). In addition, increased SAH concentrations reduced the 2'-O-methylation of N7-methylated  
276 substrates (34, 68). In a similar manner, inhibition of the CoV capping pathway is a likely mode of action  
277 (MoA) of DFA, although the genotypic profile of the L3P10 virus population does not exclude the possibility  
278 that DFA may inhibit CoV replication using multiple mechanisms. As the identified mutations have not  
279 been characterized in structural or biochemical studies, one can only speculate about their potential role  
280 in viral replication and DFA resistance. However, it is striking that, with the exception of nsp1-D172H and  
281 nsp3-R1314C, they all map to replicase subunits that have been implicated in viral capping: nsp12 (Y218F),  
282 nsp13 (R22K and R161H) and nsp16 (L156F). The capping GTase role of the nsp12-NiRAN domain was (only  
283 recently) proposed following structural and biochemical studies (31), and is still a matter of debate (71,  
284 72). Based on the SARS-CoV-2 nsp12 structure, the identified Tyr to Phe change (Y218F in MERS-CoV) is  
285 located in the proposed interaction interface with nsp9, next to two residues of nsp12 (D218 and R116 in  
286 SARS-CoV-2) that form close contacts with the  $\beta$ -phosphate of the GDP, according to the recently acquired  
287 cryo-EM structure of a mini-RTC (nsp7/nsp8/nsp9/nsp12/nsp13 complex) (73). The nsp13 mutations R22K  
288 and R161H represent (semi)conservative replacements of residues in the N-terminal Cys/His-rich zinc-  
289 binding domain (ZBD) and domain 1B of the helicase, respectively, according to the MERS-CoV nsp13  
290 crystal structure (pdb 5WWP; (74)). These regions are known to be important for nsp13's interactions with  
291 other RTC components and for protein flexibility (74, 75). In addition, helicase domain 1B constitutes the  
292 RNA-binding channel. Molecular modeling of the MERS-CoV 2'-O-MTase places nsp16 residue L156 in  
293 close proximity of the SAM-binding pocket of the nsp16/nsp10 complex bound to <sup>7m</sup>Gppp-RNA (34).  
294 Although, we did not yet establish which of the mutations occur together in the same viral genome, the  
295 presence of the L156F mutation in >99% of the NGS reads suggest that this substitution is essential for  
296 DFA resistance and can possibly be supplemented with one of the other mutations in nsp12 and/or nsp13  
297 (Table 1).

298 An additional passage of L3P10 in the presence of 45  $\mu$ M of DFA (yielding L3P11) yielded a population with  
299 a similar genetic profile albeit with an additional disruptive single-nucleotide insertion in ORF4. A similar  
300 stable presence of multiple (potential) resistance mutations in part of the population has been observed  
301 for viruses treated with mutagenic agents (76-78). Further phenotypical and mechanistic studies will be

302 needed to better understand the mode of action of DFA. Additionally, cloning of L3P10 viruses by plaque  
303 picking could help to define the combination(s) of mutations that are the basis for DFA resistance, by  
304 evaluating their frequency of occurrence and associated replication and plaque phenotype.

305 As a nucleoside analogue, DFA was considered to be a potential RdRp inhibitor. This would require uptake  
306 by the cell's nucleoside transporters, and subsequent phosphorylation into a triphosphorylated product  
307 that could be incorporated into the RNA chain during viral RNA synthesis (reviewed on (50)). In order to  
308 improve absorption of the compound by the cells and metabolism into its active form, a prodrug of DFA  
309 was synthesized and its antiviral activity was evaluated. In theory, the monophosphoramidate mask would  
310 promote the second phosphorylation to occur once the compound enters the cytoplasm by circumventing  
311 the rate-limiting step of the first phosphorylation. However, when compared to DFA, the  $EC_{50}$  of the  
312 prodrug was more than 10 times higher (Fig. 2), in contrast to results obtained with prodrugs of other  
313 nucleoside analogues (49, 79). In previous work, structure-activity studies and tests of several purine and  
314 pyrimidine analogues of DFA suggested that DFA is most likely not targeting the RdRp (41, 65, 80). This  
315 notion is also supported by the fact that the genotypic profile obtained for L3P10 did not reveal mutations  
316 in the RdRp domain of nsp12.

317 Currently, there is a lack of antiviral drugs with proven efficacy against human CoV infections, including  
318 the MERS-CoV that is endemic in the Middle East, the current pandemic SARS-CoV-2 and potential future  
319 zoonotic CoV. This highlights the importance to investigate new drug targets and identify antiviral  
320 compounds with potential broad-spectrum activity against CoVs. Previous reports demonstrated that SAH  
321 hydrolase inhibitors are active against different DNA viruses (in particular poxviruses), double-stranded  
322 RNA viruses (reoviruses), (-)RNA viruses (bunya-, arena-, rhabdo-, filo-, ortho- and paramyxoviruses) and  
323 (+)RNA viruses like alpha- and flaviviruses (64, 65, 81-85). This type of compounds, that mainly targets  
324 cellular proteins, usually exhibits a broader antiviral spectrum, but has a higher likelihood of being toxic.  
325 The cell-dependent antiviral activity of DFA against MERS-CoV emphasizes the importance of comparing  
326 different cell lines when testing compounds that can target cellular factors. In this study, we demonstrate  
327 that DFA can inhibit the replication of MERS-CoV, but that the design and development of DFA-based  
328 derivatives will be required to reduce cytotoxic side effects. Combining our results in this study with our  
329 previous report (41), showing that DFA can inhibit chikungunya and Zika virus, DFA appears to be an  
330 interesting compound for further development as a broad-spectrum antiviral agent.

331

## 332 **Materials and Methods**

### 333 Cell culture and viruses

334 Vero cells were a kind gift from the Department of Viroscience, Erasmus Medical Center, Rotterdam, the  
335 Netherlands, and Huh7 cells were provided by Dr. Ralf Bartenschlager, Heidelberg University, Germany.  
336 Vero, Huh7 and Baby hamster kidney cells (BHK-21; ATCC CCL10) were cultured as described before (51,  
337 86, 87). MRC-5 cells (ATCC CCL-171) were maintained in Eagle's minimum essential medium (EMEM;  
338 Lonza) supplemented with non-essential amino acids (PAA), 8% fetal calf serum (FCS; Bodinco), 100  
339 units/ml penicillin (Lonza), 100 units/ml streptomycin (Lonza) and 2 mM L-glutamine (PAA). Calu-3 cells  
340 (ATCC HTB-55) were cultured in EMEM medium complemented with 10% FCS, penicillin/streptomycin, 2  
341 mM L-glutamine, non-essential amino acids and sodium pyruvate (Life technologies). All cells were  
342 incubated at 37°C with 5% CO<sub>2</sub>. Infections were carried out in EMEM containing 25 mM HEPES (Lonza), 2%  
343 FCS, penicillin/streptomycin and L-glutamine (nominated from now on as EMEM-2%FCS). MERS-CoV  
344 (strain EMC/2012; (3, 4)), SARS-CoV (Frankfurt-1 strain,(88)), SARS-CoV-2/Leiden-0002 (GenBank  
345 accession nr. MT510999; (89)), MHV (strain A59; (90)) and EAV (Bucyrus isolate; (91)) were used for  
346 infections with wild type virus. Human CoV infections were performed inside biosafety cabinets in a  
347 certified biosafety level 3 (BSL3) facilities at Leiden University Medical Center.

348

### 349 Compounds

350 6',6'-Difluoro-aristeromycin (DFA) and its adenine phosphoramidate pro-drug (pDFA) were designed and  
351 synthesized, designated as 2c and 3a, respectively, as described in a previous report (41). Different  
352 batches of powder were dissolved in DMSO to a final concentration of 20 mM and single use aliquots were  
353 stored at 4°C. Remdesivir (RDV; HY-104077) was purchased from MedChemexpress and chloroquine  
354 (C6628) from Sigma. Both compounds were dissolved in adequate solvents (DMSO or PBS, respectively)  
355 and single use aliquots were stored at -20°C.

356

### 357 Cytopathic effect (CPE) reduction assay

358 Cells were seeded in 96-well flat bottom plates in 100 µl at a density of 10000 cells/well of Huh7, 15000  
359 cells/well of MRC-5 or 20000 cells/well of Vero cells. After overnight culture at 37°C, cells were pre-  
360 incubated for 30 min with 50 µl of two-fold serial dilutions of compounds prepared in EMEM-2%FCS.  
361 Subsequently, half of the wells were infected with MERS-CoV at low MOI in a total volume of 150 µl of

362 medium with increasing concentrations between 0.05 to 100  $\mu\text{M}$  compound, to evaluate the inhibitory  
363 effect of compound. The other half of the wells were “mock”-infected with medium to monitor the  
364 (potential) cytotoxicity of the compound. Plates were incubated for three days at  $37^{\circ}\text{C}$ , after which cell  
365 viability was measured using the colorimetric CellTiter 96<sup>®</sup> Aqueous Non-Radioactive Cell Proliferation kit  
366 (Promega). The absorption at 495 nm was measured using a monochromatic filter in a multimode plate  
367 reader (Envision; Perkin Elmer). Data were normalized to the “mock”-infected control, after which  $\text{EC}_{50}$   
368 and  $\text{CC}_{50}$  values were calculated using non-linear regression with Graph-Pad Prism V8.0. Each experiment  
369 was performed at least in quadruplicate and repeated at least twice.

370

#### 371 Dose response assay

372 To evaluate the effect of compound treatment on viral progeny titers, confluent monolayers of Vero, Huh7  
373 or MRC-5 were seeded in 24-well plates. Cells were incubated for 30 min at  $37^{\circ}\text{C}$  with solvent or a range  
374 of LJ-4269 concentrations (from 0.1 to 100  $\mu\text{M}$ ). Then, cells were infected with MERS-CoV at an MOI of  
375 0.01 for 1 h. After infection, cells were washed three times with PBS and 1 ml of medium with compound  
376 was added. Supernatants were collected at 48 h p.i. and viral progeny titers were determined by plaque  
377 assay in Vero cells as described before (92).

378 In 96-well clusters, Calu-3 cells were seeded at a density of  $3 \times 10^4$  cells per well in 100  $\mu\text{l}$  culture medium.  
379 Two days later, cells were pre-incubated for 30 min with 2-fold serial dilutions of compound, starting at a  
380 concentration of 25  $\mu\text{M}$ . Subsequently, cells were infected with MERS-CoV, SARS-CoV or SARS-CoV-2 (MOI  
381 of 1 based on titer determined on Vero cells) in the presence of compound for 1 h. Next, cells were washed  
382 three times with PBS and 100  $\mu\text{l}$  of compound solution in EMEM-2%FCS was added. Supernatants were  
383 collected at 24 h p.i. and progeny virus titers were determined by plaque assay.

384

#### 385 Time of addition assay

386 Confluent monolayers of MRC-5 or Vero cells were seeded in 12-well plates in 1 ml/well of the appropriate  
387 medium (see above), and were grown overnight at  $37^{\circ}\text{C}$ . Treatment of cells (before, during or after  
388 infection) was performed using 0.6  $\mu\text{M}$  (for Vero) and 12.5  $\mu\text{M}$  (for MRC-5) of compound solution freshly  
389 prepared in EMEM-2%FCS medium. Cells were infected with MERS-CoV inoculum (MOI of 5) for 1h and  
390 washed three times with PBS. Subsequently, EMEM-2%FCS medium was added to the cells and

391 supplemented with compound solution in 2-h intervals to a final concentration as mentioned above.  
392 Supernatants were collected 16 h p.i. and viral titers were determined by plaque assay.

393

#### 394 Resistance culturing and next-generation sequencing (NGS)

395 Recombinant wt MERS-CoV strain EMC/2012(rMERS-CoV) was passaged in triplicate in presence of  
396 increasing concentrations of DFA ranging from 3.2  $\mu$ M to 45  $\mu$ M. Infections were performed at an MOI of  
397 0.05 in every passage in MRC-5 monolayers. In parallel, rMERS-CoV wt was passaged in the same  
398 conditions in the absence of compound, to identify possible mutations associated with cell culture  
399 adaptation. Additionally, a “mock”-infected well treated with the same concentration of compound in  
400 each passage was evaluated for cytotoxicity by light microscopy. Supernatants were harvested when 80%  
401 to full CPE was observed (usually at 3 d p.i.). Three lineages were generated by serial passaging, but only  
402 lineage 3 was used for next-generation sequencing. To this end, RNA was isolated from 200  $\mu$ l of virus-  
403 containing cell culture supernatants using TriPure isolation reagent (Roche Applied Science) and purified  
404 according to manufacturer’s instructions. The RNA concentration was measured using a Qubit  
405 fluorometer and RNA High Sensitivity kit (Thermo Fisher Scientific). NGS sample preparation and analysis  
406 were performed as described previously (93). After filtration and trimming of data, the remaining reads  
407 were mapped to the MERS-CoV GenBank reference sequence (NC\_019843;(3)). Changes (mutation,  
408 deletions and insertions) were considered relevant when constituting more than 10% of the total  
409 population of viral reads (Table 1)(4). Raw NGS data set for L3P10 sample analysed in this study is  
410 deposited in NCBI Bioproject and available under the following link:  
411 <http://www.ncbi.nlm.nih.gov/bioproject/730836>. Only MERS-CoV-specific reads were included in  
412 these data files.

413

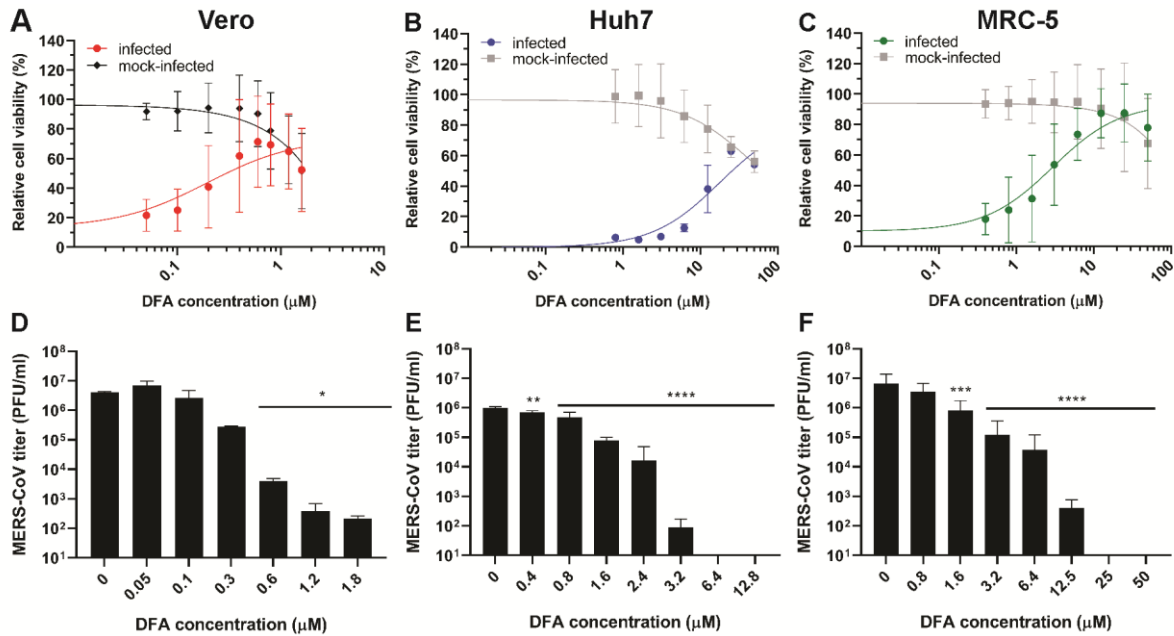
#### 414 **Acknowledgments**

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418



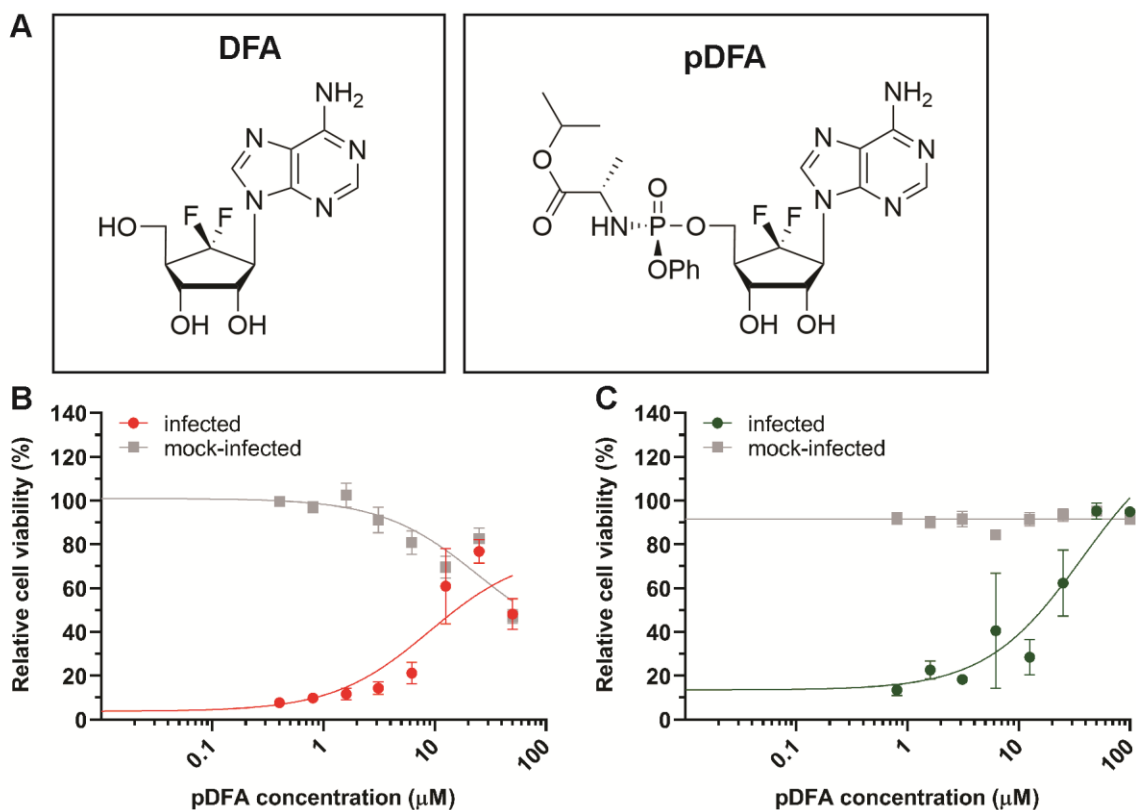
419 **Figures**



**Figure 1- DFA inhibits MERS-CoV replication in different cell lines.** Vero (A and D), Huh7 (B and E) and MRC-5 (C and F) were treated with a two-fold dilution series of DFA in the low-micromolar range and infected with MERS-CoV. Inhibitory effect was evaluated by a CPE-reduction assay (A-C) or dose response assay (D-F). For the CPE-reduction assay, cell viability was assayed using the CellTiter 96 Aqueous One Solution cell proliferation assay (MTS assay) 3 d p.i.. The graphs show the results of at least two independent experiments (mean  $\pm$  sd are shown). A non-linear regression analysis was applied. In the dose response assay, cell supernatants were collected after 2 d.p.i and viral progeny was titrated by plaque assay on Vero cells. Error bars represent standard deviation. Statistical significance was determined by one-way ANOVA. \*,  $p < 0.1$ ; \*\*,  $p < 0.01$ ; \*\*\*,  $p < 0.001$ ; \*\*\*\*,  $p < 0.0001$ .

420

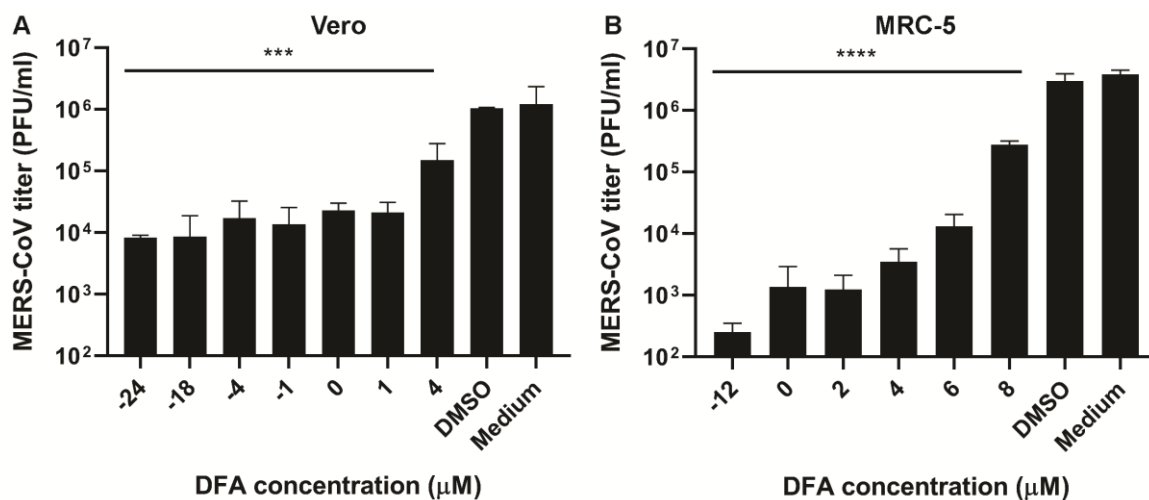
421



**Figure 2- DFA prodrug inhibits MERS-CoV replication.** (A) DFA and pDFA schematic structure. pDFA antiviral activity was evaluated by a CPE-reduction assay. (B) Vero or (C) MRC-5 cells were treated with two-fold serial dilution of pDFA and infected with MERS-CoV. After 3 d p.i., cell viability was measured using the CellTiter 96 Aqueous One Solution cell proliferation assay (MTS assay). The graphs show the results of two independent experiments (mean  $\pm$  sd are shown). A non-linear regression analysis was applied.

422

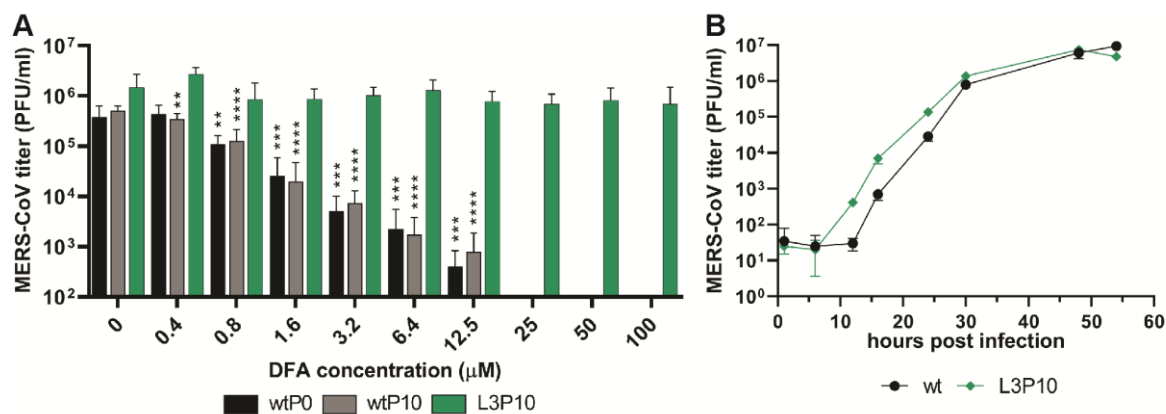
423



**Figure 3- DFA inhibits early steps of MERS-CoV replication.** Vero (A) and MRC-5 (B) cells were treated with 0.6 and 12.5 μM, respectively, at the indicated time points pre- and post-infection. Viral progeny in supernatant harvested at 16 h p.i. was determined by plaque assay in Vero cells. The data represent the results from duplicates of 2 independent experiments. Error bars represent standard deviations. Statistical significance was determined by one-way ANOVA.; \*, p<0.1; \*\*, p<0.01; \*\*\*, p<0.001; \*\*\*\*, p<0.0001.

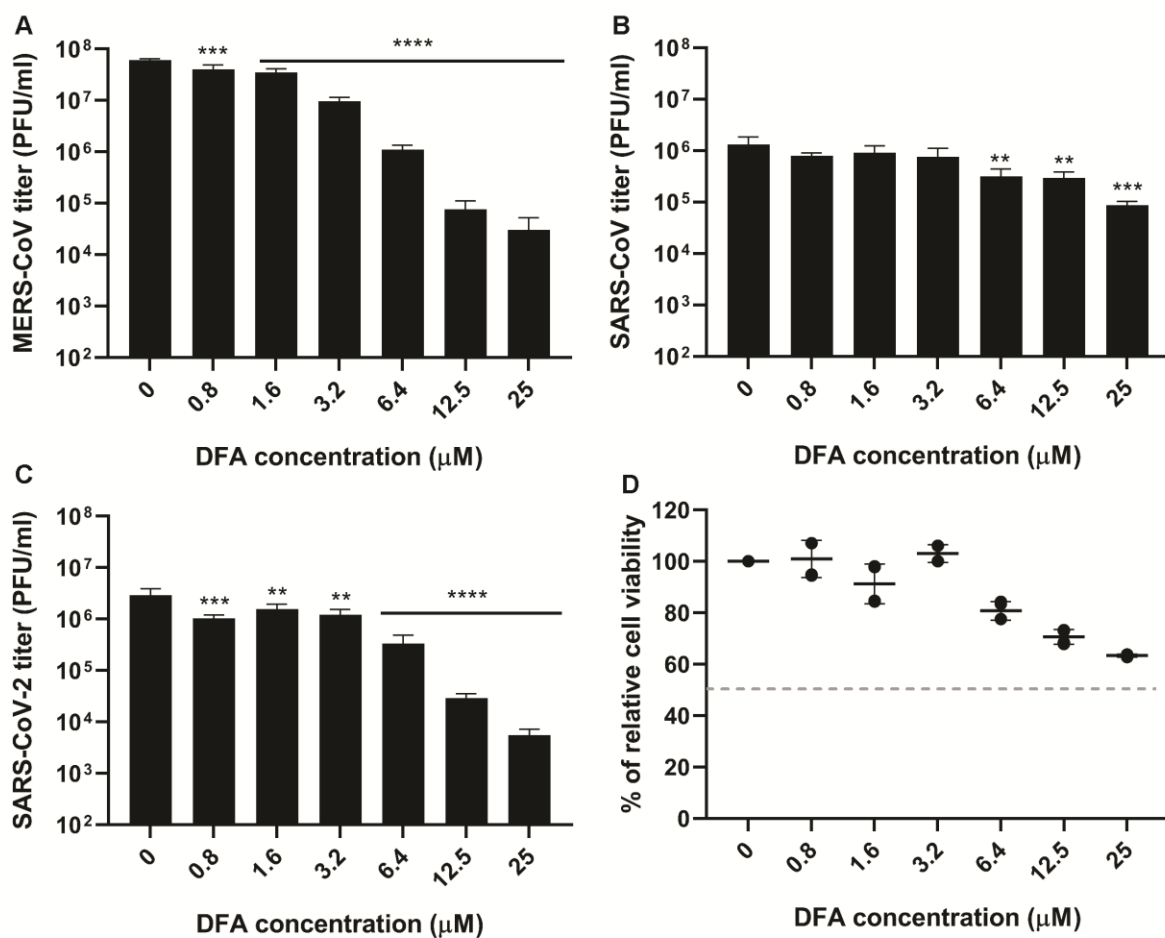
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**Figure 4- Resistant MERS-CoV mutants selected by passaging in the presence of DFA.** Replication in MRC-5 cells of a DFA-resistant virus population (L3P10) in the presence of increasing concentrations of DFA, compared to the parental virus (wtP0) and untreated wt virus (wtP10). Cells were infected with MOI 0.01 and virus progeny in supernatant harvested at 48 h p.i. The data represent the results from four replicates obtained in 2 independent experiments. (B) Characterization of growth kinetics of selected resistant mutant (L3P10). MRC-5 cells were infected with MOI 0.01 and supernatants were harvested at indicated time points from triplicate wells. Viral progeny titers were determined by plaque assay in Vero cells (mean  $\pm$  sd is presented). Statistical significance was determined by one-way ANOVA. \*,  $p < 0.1$ ; \*\*,  $p < 0.01$ ; \*\*\*,  $p < 0.001$ ; \*\*\*\*,  $p < 0.0001$ .

426  
427



**Figure 5- DFA antiviral activity is reduced in Calu-3 cells.** Calu-3 cells were infected with MERS-CoV (A), SARS-CoV (B) and SARS-CoV-2 (C) in the presence of various concentrations of DFA. An MOI of 1 was used, based on titrations of virus stocks on Vero cells. Progeny virus titers in supernatants harvested at 24 h p.i. were determined by plaque assay in Vero cells. (D) Cytotoxicity of DFA was measured in mock-infected cells, and was determined at 24 h p.i. in a CPE-reduction assay by use of the CellTiter 96 Aqueous One Solution cell proliferation assay (MTS assay). The data represent triplicates of 2 independent experiments and error bars show standard deviations. Statistical significance was determined by one-way ANOVA. No\*, no significance; \*,  $p < 0.1$ ; \*\*,  $p < 0.01$ ; \*\*\*,  $p < 0.001$ ; \*\*\*\*,  $p < 0.0001$ .

429

**Table 1-** Summary of non-synonymous mutations identified in MERS-CoV L3P10 by NGS

<b>Coding region</b>	<b>nt change</b>	<b>aa change</b>	<b>Domain</b>	<b>Presence in L3P10 (NGS)</b>
<b>nsp1</b>	G795C	D172H	CTD	55%
<b>nsp3</b>	C6777T	R1314C	PLnc	37%
<b>nsp7</b>	G12033A*	D73N		>99%
<b>nsp12</b>	A14061T	Y218F	NiRAN	48%
<b>nsp13</b>	G16272A	R22K	ZBD	49%
	G16689A	R161H	1B	40%
<b>nsp16</b>	C21068T	L156F	2'-O-MTase	>99%
<b>spike</b>	T24085_24086insACTCAACAGGTG	P876_V877ins TQQV		37%
<b>ORF5</b>	G26927_26928insT	Not in frame		48%

nt, nucleotide; aa, amino acid; CTD, C-terminal domain; PLnc, papain-like noncanonical domain; NiRAN, Nidovirus RdRp associated nucleotidyl transferase domain; ZBD, Zinc binding domain; 1B, 1B domain of helicase; \* also present in wtP10 control

430

**Table 2** – The antiviral effect of DFA on the replication of different  $\beta$ -CoVs.

<b>Virus</b>	<b>Cell line</b>	<b>EC<sub>50</sub> (<math>\mu</math>M)</b>	<b>CC<sub>50</sub> (<math>\mu</math>M)</b>	<b>SI</b>
<b>MERS-CoV</b>	Vero	0.2	>3.2	>16
	HuH7	0.6	>50	>80
	MRC-5	0.8	>50	>60
	Calu-3	~2	>25	>12
<b>SARS-CoV</b>	Calu-3	~5	>25	>5
<b>SARS-CoV-2</b>	Calu-3	~2	>25	>12

EC<sub>50</sub>s values were calculated based on results obtained in dose response assay, while CC<sub>50</sub>s values were determined in a cell viability assay as described in materials and methods. SI, selectivity index was calculated by comparing CC<sub>50</sub> with EC<sub>50</sub> values.

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