Title

Full title: NEDD4-binding protein 1 suppresses HBV replication by degrading pgRNA

Short title: Effect of NEDD4-binding protein 1 on the replication of HBV

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<u>Abstract</u>

Chronic infection with hepatitis B virus (HBV) places patients at increased risk for liver cirrhosis

and hepatocellular carcinoma. Although nucleos(t)ide analogs are mainly used for the treatment of

HBV, they require long-term administration and may lead to the emergence of drug resistant mutants.

Therefore, to identify targets for the development of novel anti-HBV drugs, we screened for HBV-

suppressive host factors using a plasmid expression library of RNA-binding proteins (RBPs). We

screened 132 RBPs using an expression plasmid library by measuring HBV relaxed circular DNA

(rcDNA) levels in hepatocellular carcinoma. After we identified one RBP which suppressed rcDNA,

the domain-deficient mutants were generated to determine the region contributing to the anti-HBV

effect. Also, we measured pregenomic RNA (pgRNA) and covalently closed circular DNA (cccDNA)

level in the RBP transfected cells and confirmed the degradation of pgRNA by Northern blotting. Our

screen identified NEDD4-binding protein 1 (N4BP1) having an anti-HBV effect. In hepatocellular

carcinoma cell lines transfected or infected with HBV, overexpression of N4BP1 decreased rcDNA

levels while knockdown or knockout of N4BP1 expression rescued rcDNA levels. We found that both

the KH-like and RNase domains of N4BP1 were required for the protein's anti-HBV effect. N4BP1

suppressed HBV replication by promoting pgRNA, PreS1 and PreS2/S degradation. In summary, we

found that N4BP1 is a newly identified host factor able to counteract HBV production by reducing

HBV RNA levels.

<u>Author summary</u>

There is still a large number of HBV-infected people in the world today because of no curative

treatment for HBV infection. In this study, we focused on and screened RNA-binding proteins to

identify new host factors which inhibit HBV replication. As a result, we found that NEDD4-binding

protein 1 (N4BP1) expression suppresses rcDNA production by promoting the degradation of

pregenomic RNA, 2.4kb and 2.1kb HBV RNA. Furthermore, KH-like domain or RNase domain of

N4BP1 were involved in this anti-HBV effect. In addition, the N4BP1 levels were lower in HCC

resection samples of exacerbated patients, suggesting that individual N4BP1 levels might be related

to HCC progression. This novel factor can potentially become a key to new HBV treatments.

Introduction

Hepatitis B virus (HBV) infection causes either acute or chronic hepatitis, with approximately

296 million people worldwide suffering from chronic hepatitis B and an estimated 1.5 million new

cases arising each year. Chronically infected individuals are at increased risk for liver disease, and

annually ~820,000 die from cirrhosis and hepatocellular carcinoma (HCC) caused by HBV

infection[1]. Although there is a prophylactic vaccine for HBV, there are still many new cases of HBV

infection due to the large number of chronic HBV infected patients still in Africa, Asia, and Eastern

Europe and the low vaccination rates in these highly endemic areas[2].

HBV is an enveloped DNA virus with a small, partially double-stranded genome of 3.2 kbp.

Entry into hepatocytes is mediated by binding to the bile acid transporter sodium-taurocholate

cotransporting polypeptide (NTCP). After being released into the nucleus, the HBV genome is

converted from its relaxed circular DNA (rcDNA) form to covalently closed circular DNA (cccDNA)

using the host DNA repair system[3-6]. The cccDNA serves as the transcription template for viral

mRNAs, including the HBV pregenomic RNA (pgRNA). pgRNA is used to synthesize the negative-

strand DNA first and then the positive-strand is synthesized to generate rcDNA.

Interferon (IFN) and nucleos(t)ide analogs (NAs) are currently used as treatments for HBV

infection, and both have shown efficacy in controlling viremia[7, 8]. IFNs are involved in the

inhibition of HBV replication, transcription, and other important processes by inducing the expression

of various IFN-stimulated genes (ISGs) in host cells[9]. However, IFN treatment can cause

considerable side effects, including liver damage, and is thus unsuitable for patients with severe liver

dysfunction[10].

In contrast, NAs impair further HBV intrahepatic spreading by blocking production of new

virions. But the HBV antigens HBs or HBe are not eliminated with treatment as NAs inhibit the reverse

transcription step that occurs after these antigens have already been translated. Furthermore, NAs do

not directly target cccDNA, allowing the virus to persist in hepatocytes[11, 12]. Consequently, to

prevent relapse due to reactivation of HBV after discontinuing NAs, long-term treatment is

recommended[13].

In efforts to overcome the limitations of these current therapeutic options, research has looked to

identify host factors with an antiviral role. Understanding the mechanism of action of such factors

could aid in the development of new antiviral treatments. Several host factors are known to inhibit

HBV replication, including RNA-binding proteins (RBPs). For example, the CCCH zinc finger

antiviral protein ZAP (ZC3HAV1) binds to HBV RNA with its four zinc finger motifs at the N-

terminus, promoting pgRNA degradation[14]. Similarly, MCPIP1 (ZC3H12A, regnase-1) has also

been reported to inhibit HBV replication by binding to HBV pgRNA through its zinc finger motif,

directly degrading pgRNA via its RNase activity[15]. Furthermore, PUF60 is a host factor that not

only positively regulates HBV 3.5 kb precore plus pregenomic RNA expression by binding to the

HBV enhancer region II with the transcription factor TCF7L2 but can also promote degradation of the

HBV 3.5 kb RNA by binding via its N-terminal RNA recognition motif[16]. Despite these descriptions,

HBV produces high levels of HBV RNAs in infected primary human hepatocytes (PHHs) and i*n vivo*,

so the antiviral effects of these host factors appears limited.

To determine if other RBPs may have an antiviral role, we performed a comprehensive screen

using an expression library of RBPs. We identified NEDD4-binding protein 1 (N4BP1) as a host factor

with anti-HBV activity. We subsequently elucidated the mechanism of how N4BP1 suppresses HBV

replication by promoting pgRNA degradation.

<u>Results</u>

Screen for RNA-binding proteins that inhibit HBV propagation

To identify novel RBPs involved in HBV propagation, we screened 132 RBPs using an

expression plasmid library. Huh7 cells were co-transfected with an RBP expression plasmid and a 1.3-

fold-overlength HBV genome (genotype C). At 3 days post-transfection (dpt), cells were collected to

measure intracellular rcDNA levels. As shown in Fig 1A, 23 out of 132 RBPs suppressed rcDNA

levels by at least 50% compared to the control.

As a secondary screen, we then examined the effect of these 23 RBPs on HBV entry and

replication. HepG2-hNTCP C4 cells expressing each of the 23 RBPs were infected with HBV

(genotype D), and intracellular rcDNA measured by quantitative PCR (qPCR) at 14 days post-

infection (dpi). Seven of the 23 RBPs (N4BP1, TIA-1, ZC3H12B, PJA1, HNRNPC, ZCCHC10, and

KHNYN) reduced rcDNA levels in comparison with the control (Fig 1B). These results were

consistent with previous reports that found TIA-1 and PJA1 inhibit expression of HBs antigen and

HBV transcription and replication, respectively[17, 18].

Of the five remaining factors, we found by western blot that three (N4BP1, HNRNPC, and

ZCCHC10) are endogenously expressed in Huh7 and HepG2-hNTCP C4 cells (Fig 1C). To test

whether these proteins affect HBV replication, we knocked down each one and assessed rcDNA levels

following transfection with the 1.3-fold-overlength genome of HBV genotype C. The antiviral drug

entecavir, a nucleoside analog, was used as a positive control. Knockdown of each factor was

confirmed by western blotting (WB), but unlike knockdown of N4BP1, knockdown of HNRNPC or

ZCCHC10 did not consistently increase the levels of rcDNA depending on the siRNA used (Fig 2A-

2C). Thus, N4BP1 became the focus of our study.

N4BP1 is a suppressive host factor of HBV replication

Next, to determine whether N4BP1 also had an antiviral effect against other HBV genotypes, we

co-transfected Huh7 cells with a plasmid expressing N4BP1 and a plasmid containing 1.3-fold-

overlength genomes of HBV genotypes A, B, and C. At 3 dpt, rcDNA levels were decreased in cells

transfected with each genotype (Fig 3A).

To further elucidate the role of N4BP1 in HBV replication, we constructed Huh7 N4BP1

knockout (KO) cells using CRISPR/Cas9. We generated two clones of N4BP1 KO Huh7 cells (Fig

3B) and once more assessed whether intracellular rcDNA levels changed at 3 dpt with a plasmid

containing the 1.3-fold-overlength genome of HBV genotype C. In both KO lines, rcDNA levels

increased approximately 3-fold compared to control cells (Fig 3B). After rescuing N4BP1 expression

in our KO line, rcDNA levels became significantly decreased again (Fig 3C, 3D), suggesting that

N4BP1 is a suppressive host factor of HBV replication. In addition, we performed a transcriptomic

analysis to determine whether host factors are involved in the anti-HBV activity of N4BP1. As

visualized by heat maps, host factors differentially expressed between N4BP1-overexpressing PHHs

and control PHHs (S1 Fig A). We found 25 genes that were upregulated by 2-fold or more in N4BP1-

vs control PHHs and 17 genes that were downregulated by 0.5-fold or more (S1 Fig B, S1 Table).

None of these factors were related to immune pathways nor had been previously reported to be

involved in HBV replication.

N4BP1 expression is not induced by HBV

We then evaluated whether N4BP1 expression level was increased by HBV infection. A plasmid

containing the 1.3-fold-overlength genome of HBV genotype C was transfected into Huh7 cells, and

N4BP1 expression assessed by WB and qPCR at 3 dpt. Transfection of the HBV genome did not

significantly affect N4BP1 expression at either the transcriptional or protein level (Fig 4A, 4B).

N4BP1 expression also did not significantly change in HepG2-hNTCP C4 cells after infection with

HBV (Fig 4A, 4C). Finally, we measured N4BP1 expression in HepAD38.7 cells that stably secrete

HBV particles unless cultured in the presence of tetracycline. In this system, removal of tetracycline

and induction of HBV particle production also did not result in any change in N4BP1 expression (Fig

4A, 4D). Together, these results indicate that N4BP1 expression is not affected by HBV infection.

The KH-like and RNase domains of N4BP1 are critical for the anti-HBV effect of N4BP1

As shown in Fig 5A, N4BP1 is composed of 896 amino acids and contains a KH-like domain at

its N terminus side and an RNase domain at its C terminus[19]. To examine which N4BP1 domains

are needed to suppress HBV replication, we constructed deletion mutants lacking either the KH-like

(ΔKH; deletion of amino acids 59-143) or the RNase domain (ΔRNase; deletion of amino acids 617-

769).

The plasmid encoding wild-type or mutant N4BP1 was respectively co-transfected into naïve

Huh7 cells with the plasmid containing the 1.3-fold-overlength genome of HBV genotype C and the

rcDNA levels measured. The expression of the deletion mutants was confirmed by WB using an HA-

tagged antibody (Fig 5B, upper). The rcDNA level in N4BP1 overexpressing cells was significantly

reduced, while the rcDNA levels in the ΔKH- or ΔRNase-expressing cells were comparable to those

in the control cells (Fig 5B, lower).

Residue D623 in the RNase domain of N4BP1 (Fig 5A) has been shown to be important for the

protein's RNase activity[20]. A D623N substitution causes loss of RNase activity without changing

the structure of N4BP1. Co-transfecting the Huh7 cells with a plasmid expressing this N4BP1 D623

mutant and the HBV overlength genome also did not lead to a decrease in rcDNA levels (Fig 5C).

These results suggest that both the KH-like and RNase domains are critical for the anti-HBV effect of

N4BP1.

N4BP1 promotes pgRNA degradation

Having shown the effect of N4BP1 on rcDNA, we then sought to determine more specifically

which step of HBV replication N4BP1 suppresses. To that end, we assessed the impact of N4BP1

overexpression on cccDNA and pgRNA levels. HepG2-hNTCP C4 cells were infected with HBV and

cells were harvested at 14 dpi. While cccDNA levels were not affected by overexpression of N4BP1,

pgRNA and rcDNA levels were both significantly reduced (Fig 6A-6C).

For further verification, we performed the same experiments using PHHs. Adenovirus vectors

were used to overexpress N4BP1 in PHHs (Fig 6D), and the cells were then infected with HBV

genotype C. As shown in Fig 6E-6G, even in PHHs, cccDNA levels were comparable to control cells,

but pgRNA and rcDNA levels were both significantly decreased. Collectively, these results indicate

that N4BP1 augmented pgRNA degradation.

To elucidate the mechanism of pgRNA suppression by N4BP1, we turned to HepAD38.7 cells.

First, the cells were cultured for 2 days in media without tetracycline to induce HBV replication. Then

N4BP1 or the domain deletion mutant plasmids were transfected, and tetracycline added at 2 dpt to

stop viral replication. Cells were collected starting 2 days after adding tetracycline to measure the

pgRNA levels (Fig 6H). As shown in Fig 6I, the expression of wild-type N4BP1 augmented the rate

of pgRNA degradation. In contrast, both domain deficient mutants resulted in pgRNA degradation at

a rate similar to the control, suggesting that N4BP1 affects the degradation rate of pgRNA. Next, we

examined whether N4BP1 expression also suppresses HBV RNAs other than pgRNA. We co-

transfected Huh7 cells with a plasmid expressing N4BP1 and a plasmid containing 1.3-fold-overlength

genomes of HBV genotype C. At 3 dpt, cells were collected and HBV RNA expression was measured

by Northern blotting. Results showed that control Huh7 cells showed intense expression of 3.5kb,

2.4kb, and 2.1kb HBV RNA, whereas N4BP1 overexpression Huh7 cells showed weak expression of

all these RNAs (Fig 6J).

N4BP1 expression is induced by IFN-α/λ in PHHs

It has been reported that N4BP1 expression is increased 3- to 5-fold with IFN-α treatment in

Jurkat cells and THP-1 cells[20]. To see if this was the case in PHHs and hepatoma cell lines, we

treated Huh7, HepG2-hNTCP C4, and PHHs with 1000 U/ml of IFN-α and 100 ng/ml of IFN-λ, which

are known to also inhibit HBV replication. Cells were collected at 24 and 48 hours post-drug treatment

and N4BP1 was examined by qPCR and WB (Fig 7A). The ISG15 was included as a positive control.

As shown in Fig 7B and 7C, levels of N4BP1 mRNA as measured by qPCR were slightly increased

in both Huh7 and HepG2-hNTCP C4 cells by IFN-α or IFN-λ. WB also showed that IFN-α or IFN-λ

treatments had no effect on N4BP1 protein levels in Huh7 cells and HepG2-hNTCP C4 cells. In

contrast, IFN-α and IFN-λ treatment in PHHs resulted in an approximately 2-fold increase in N4BP1

mRNA expression and protein level was also increased. Collectively, these results indicate that IFN-

α and IFN-λ treatment slightly induce N4BP1 expression in Huh7 and HepG2-hNTCP C4 cells while

significantly inducing N4BP1 expression in PHHs.

Since N4BP1 expression was induced by IFN treatment in the primary cells and not the hepatoma

cell lines, we thought that N4BP1 expression may differ depending on the immune status of the human

liver. Therefore, we assessed ISG15 and N4BP1 mRNA expression in HBV-HCC resection human

liver tissue samples. ISG15 (Fig 8A) and N4BP1 (Fig 8B) mRNA expression in the HBV DNA

negative group tended to be higher than in the HBV DNA positive group.

Discussion

NAs are generally well tolerated, very effective in inhibiting HBV replication, and are currently

the most commonly used treatment for chronic hepatitis B. However, since NAs inhibit reverse

transcription, HBV cccDNA remains in the nucleus of hepatocytes so the patient is never completely

cured. Indeed, patients who discontinue NA treatment can experience virologic relapse and thus must

continue NA therapy for extended periods. Long-term treatment with NA is associated with the

development of antiviral drug resistance; for example, mutations in the HBV polymerase gene, which

is a target of NAs, have been reported[21-23]. Resistance to NA therapy can lead to hepatitis relapse

and even death. Thus, we sought to identify host factors involved in HBV proliferation that would be

distinct from the viral sites targeted by NAs. In a library of 132 RBPs containing proteins with known

RNA-binding domains such as RNA recognition motif domains or zinc finger domains, we found that

N4BP1 inhibited HBV replication, was negatively correlated with HBV rcDNA levels in hepatoma

cell lines and suppressed HBV replication by promoting pgRNA degradation.

We found that both the KH-like domain and the RNase domain of N4BP1 were essential for the

protein's anti-HBV effect (Fig 5B). It has been reported that the KH-like domain binds to RNA or

single-strand DNA and is involved in splicing, transcriptional regulation, and translational

regulation[19, 24, 25]. On the other hand, the RNase domain of N4BP1 is also involved in regulating

genome stability and repressing the expression of target genes through mRNA strand breaks[26]. Thus,

it is possible that N4BP1 binds to HBV RNA through its KH-like domain and degrades HBV RNA by

the RNase activity of its RNase domain. In fact, in this study, N4BP1 suppressed HBV replication at

the step of pgRNA production in the HBV life cycle (Fig 6B, 6F, 6I). We also found that N4BP1

suppresses not only the 3.5 kb RNA of HBV, but also the 2.4 kb and 2.1 kb RNAs by NB (Fig 6J),

which means N4BP1 suppresses pgRNA, PreS1 and PreS2/S.

N4BP1 is known to be an inhibitor of innate immunity and inflammation-mediated cytokine

production. NF-κB is an important transcription factor for the elicitation of cytokine responses, and

its activation is necessary for many immune responses. N4BP1 interacts with the NF-κB signal

essential modulator (NEMO, also known as IκB kinase γ) to suppress Toll-like receptor (TLR)–

dependent NF-κB activation [27]. Furthermore, even in vivo, it has been reported that N4BP1-/- mice

develop mild inflammation and have exacerbated TLR-dependent inflammatory responses[28].

Recently, N4BP1 was found as a new hotspot gene for HBV integration[29]. Although the significance

of HBV integration to N4BP1 remains unknown, it is interesting that the virus integration occurred to

N4BP1 which has anti-HBV activity. Regarding virus replication, N4BP1 is known to directly

recognize and degrade retroviruses such as HIV-1[20] and to be involved in replication of the Porcine

Reproductive and Respiratory Syndrome Virus[30]. In both cases, the RNase activity of N4BP1 was

found to inhibit viral replication by directly degrading viral RNA, consistent with our data. In addition,

the RNase domain of N4BP1 has a similar structure to that of MCPIP1[31], which has been reported

to recognize and degrade HBV pgRNA directly[15]. However, MCPIP1 is a cytoplasmic RNase,

whereas N4BP1 is mainly localized on the nucleus. Furthermore, MCPIP1 has not been reported to

suppress 2.4 kb and 2.1 kb HBV RNAs, whereas we have demonstrated that N4BP1 suppresses these

RNAs. These results suggest that MCPIP1 and N4BP1 may regulate HBV degrading mRNAs through

different processes. The mechanism behind our finding that the KH-like domain of N4BP1 was also

important for the anti-HBV effect of this protein is presumably due to its binding to HBV RNA but

further work is needed to elucidate the mechanism more precisely.

Although N4BP1 expression has been reported to be induced by type I IFN[20], stimulation of

N4BP1 expression by IFN-α (type I IFN) and IFN-λ (type III IFN) treatment varied between the PHHs

and hepatoma cell lines we tested. This could be due to the disrupted IFN signaling reported in the cell

lines Huh7 and HepG2 that result in them being less sensitive to IFN[32, 33]. Also, ISG15 is an

inducible factor by IFN-α and IFN-λ[34, 35]. In characterizing N4BP1 expression, we found that

N4BP1 expression was not induced by HBV infection or transfection in hepatoma cell lines (Fig 4A-

4D). Furthermore, in clinical liver tissue samples, N4BP1 expression was significantly lower in HBV-

DNA positive vs HBV-DNA negative samples (Fig 8B). These results suggest that N4BP1 expression

may differ according to each individual and that the inherent expression level of N4BP1 is related to

HBV DNA negative conversion. Otherwise, it is thought that factors upstream of N4BP1 may cause

differences in N4BP1 expression and affect HBV DNA negative conversion. Regardless, a greater of

samples needs to be examined in order to further understand the relationship between the expression

of N4BP1 and HBV.

In conclusion, to investigate different treatments against HBV infection from currently approved

HBV therapeutics, we focused on RBPs. We found that N4BP1 is a RBP with novel anti-HBV activity,

inhibiting HBV replication via degradation of HBV pgRNA. Although the detailed molecular

mechanism behind the anti-HBV effect of N4BP1 remains to be uncovered, understanding the

association between N4BP1 and HBV could contribute to the development of new HBV treatments.

Materials and methods

Cell culture

All cells were grown at 37℃ in a 5% (v/v) CO2 environment. Huh7 cells and HEK293T cells

were obtained from the Japanese Collection of Research Bioresources Cell Bank (JCRB, Osaka, Japan,

JCRB0403 and JCRB9068). HepG2-hNTCP C4 cells and HepAD38.7 cells were kindly provided by

Takaji Wakita (NIID, Tokyo, Japan). PHHs were obtained from Phoenix Bio (Hiroshima, Japan).

Huh7 cells and HEK293T cells were maintained in DMEM (Nacalai Tesque, Kyoto, Japan)

supplemented with 100 U/ml of penicillin, 100 μg/ml of streptomycin (Nacalai Tesque) and 10% fetal

bovine serum (FBS, Sigma, MO, USA). HepG2-hNTCP C4 cells were maintained in the

aforementioned media containing 400 μg/ml G418 (Nacalai Tesque). HepAD38.7 cells were

maintained in DMEM/Ham's F-12 media (Nacalai Tesque) supplemented with 10% FBS, 100 U/ml

of penicillin, 100 μg/ml of streptomycin, 400 μg/ml of G418, 5 μg/ml of insulin (Nacalai Tesque), and

400 ng/ml of tetracycline (Nacalai Tesque). PHHs were maintained in PHH-specific media provided

by the manufacture (Phoenix Bio).

Generation of RBP overexpressing cells

RBP-overexpressing Huh7 cells were generated by transfection of RBP expression plasmids

using TransIT LT-1 transfection reagent (Mirus, WI, USA). Briefly, Huh7 cells were seeded in 24-

well plates (Greiner, Bad Haller, Austria) 1 day prior to the transfection. The following day, 1 μl of

TransIT LT-1 transfection reagent, 0.3 μg of RBP expression plasmid, and 0.1 μg of a plasmid

containing a 1.3-fold-overlength genome of HBV (genotype C) were mixed in 50 μl of Opti-MEM

(Thermo Fisher Scientific, MA, USA). After 15 minutes incubation at room temperature, the mixture

was added into the supernatant of the cultured Huh7 cells. Entecavir (Fujifilm, Tokyo, Japan) was

added at 5 μM the day after transfection as a positive control.

RBP-overexpressing HepG2-hNTCP C4 cells were made by lentiviral transduction. Lentiviruses

were made by transfecting HIV gag/pol, VSV-G, REV, and pcs-II EF RBP expression plasmids into

HEK293T cells using TransIT LT-1 transfection reagent. At 2 dpt, the supernatant of HEK293T was

collected and spun at 4,200 rpm for 2 minutes at room temperature and the supernatant added to

HepG2-hNTCP C4 cells. Entecavir or heparin was used as a positive control. Entecavir was added at

5 μM the day after infection. Heparin (Mochida Pharmaceutical Co., Tokyo, Japan) was added at 5

U/ml 30 min before infection.

To express N4BP1 in PHHs, we used an adenovirus vector (AdV). The N4BP1expressing

adenovirus vector (N4BP1 AdV) was constructed using the cosmid cassette pAxEFwit2, which has a

cloning site *SwaI* flanked by the EF1α promoter and rabbit β-globin polyA signal in the E1-deleted

region of the adenovirus genome. The N4BP1 cDNA was prepared from the pCS2-EF-N4BP1-HA

plasmid and inserted into the *SwaI* cloning site. The AdV was prepared as previously described[36,

37]. The AdV was titrated using the methods described by Pei et al[38]. Briefly, the copy numbers of

viral genome successfully transduced into target cells were measured by qPCR. For generating

N4BP1-overexpressing PHHs, cells were infected with N4BP1 AdV at a multiplicity of infection

(MOI) of 5 two days before HBV infection.

Generation of RBP knockdown cells

RBP knockdown cell lines were generated using Silencer Select siRNA (Thermo Fisher

Scientific) and Lipofectamine RNAiMAX (Thermo Fisher Scientific) following the manufacturer's

protocol. Briefly, 1.5 μl of Lipofectamine RNAiMAX and 5 pg of siRNA were mixed in 50 μl of Opti-

MEM. After incubating for 5 minutes at room temperature, the mixture was gently added to the cell

supernatant. The following siRNA reagents were used in this study: control siRNA (Silencer Select

Negative Control No.1 siRNA, 4390843), ZCCHC10 siRNA#1 (s29507), ZCCHC10 siRNA#2

(s29508), ZCCHC10 siRNA#3 (s29509), HNRNPC siRNA#1 (s6719), HNRNPC siRNA#2 (s6720),

HNRNPC siRNA#3 (s6721), N4BP1 siRNA#1 (s18638), N4BP1 siRNA#2 (s18639).

Generation of N4BP1 knockout cells

N4BP1 KO Huh7 cells were generated by CRISPR/Cas9 using pX330-U6-Chimeric_BB-CBh-

hSpCas9 (pX330, Addgene, MA, USA) and HR110PA-1 (System Biosciences, CA, USA). The

pX330-puro vector was constructed by integrating the puromycin resistance gene sequence from the

HR110PA-1 vector into the pX330 vector. The pX330-puro vector was digested using *BbsI* (Biolabs,

MA, USA) and the target sequence was subcloned. The plasmid was transfected into Huh7 cells using

TransIT LT-1 transfection reagent and after selection with puromycin dihydrochloride (Invivogen, CA,

USA), a single colony was isolated using cloning cylinders (Merck, Darmstadt, Germany) and

propagated. KO of the target gene was confirmed by WB and DNA sequencing.

Plasmid Constructions

We used the following plasmids containing 1.3-fold-overlength genomes of different HBV

genotypes: pUC19-Ae_us (genotype A, accession no. AB246337), pGEM-Bj-JPN56 (genotype B,

accession no. AB246342), and pUC19-C_JPNAT (genotype C, accession no. AB246345).

Each RBP expression plasmid had a C-terminus HA tag and was inserted between the *XhoI* and

XbaI sites of the pcs-II EF vector. The KH-like domain deletion mutant (ΔKH), RNase domain

deletion mutant (ΔRNase), and D623N mutant were generated from the N4BP1 expression plasmid.

ΔKH plasmid was generated by deleting amino acids 59-143 from N4BP1; ΔRNase was generated by

deleting amino acids 617-769 N4BP1; and D623N was generated by changing the 623rd amino acid

from asparagine acid to asparagine. To insert these mutated N4BP1 genes into the pcs-II EF vector

between the *XhoI* and *XbaI* sites, we used the following primer sets and In-Fusion Snap Assembly

Master Mix (Takara Bio, Shiga, Japan) per the manufacturer's directions. Each N4BP1 mutant plasmid

had a C-terminus HA tag.

ΔKH: 5'- CGCTACCGGTCTCGAGATGGCGGCCCGGGCGGTGCT -3' (forward)

5'- GGGTAGGTTCTCTTTCGCCCCGCAGAGCTGCAGCC -3' (reverse) , and

5'- CAGCTCTGCGGGGCGAAAGAGAACCTACCCAGTAG -3' (forward)

5'- GGTACATGGTCTCGAGATCCAACACCATGGCAGAAA -3' (reverse)

ΔRNase: 5'- CGCTACCGGTCTCGAGATGGCGGCCCGGGCGGTGCT -3' (forward)

5'- TTCCTTCTGAAGAAAATCCGTTCTCCCTGGTTCAT -3' (reverse) , and

5'- CCAGGGAGAACGGATTTTCTTCAGAAGGAAGTCTG -3' (forward)

5'- GGGTAGGTTCTCTTTCGCCCCGCAGAGCTGCAGCC -3' (reverse)

D623N: 5'- CGCTACCGGTCTCGAGATGGCGGCCCGGGCGGTGCT -3' (forward)

5'- AACATTGCTCCCATTTATAACAATGTGTTTCAAAT -3' (reverse) , and

5'- AATGGGAGCAATGTTGCAATTACCCATGGTCTGAA -3' (forward)

5'- GGTACATGGTCTCGAGATCCAACACCATGGCAGAAA -3' (reverse)

Viruses

The production of HBV particles (genotype D) was adapted from a previous report[39]. Briefly,

HepAD38.7 cells were cultured under tetracycline (400 ng/mL) for maintenance. To produce HBV

particles, tetracycline was removed and the supernatant collected after 6 and 9 days. The collected

supernatant was mixed with 30% polyethylene glycol (PEG) 8000 (Sigma) and incubated overnight

at 4℃. Then it was spun at 3,000 rpm for 20 minutes at 4℃ for concentration. Before HBV infection,

HepG2-hNTCP C4 cells were seeded in collagen type I-coated 24-well plates (Iwaki, Tokyo, Japan)

and transduced with lentivirus to express RBP (see "Generation of RBP-overexpressing cells" above).

At 2 days post-transduction, the cells were infected with 5,000 genome equivalents (GEq)/cell of HBV

in DMEM containing 3% DMSO (Nacalai Tesque) and 4% PEG 8000, and the media was changed

every 2-3 days until 14 dpi.

HBV genotype C for PHHs infection was purchased from Phoenix Bio. The infection into PHHs

was performed at 5 Geq/cell in PHH-specific media containing 40% PEG 8000 following the

manufacturer's protocol. The culture media was replaced every 4 days. Cells were harvested at 14 dpi

for WB and reverse transcription quantitative PCR (RT-qPCR).

Western blotting

Cells were lysed with 2 × Laemmli sample buffer (Bio Rad Laboratories, CA, USA) containing

10% 2-mercaptoethanol (Sigma) and boiled for 10 minutes at 100℃. Then lysates were loaded on a

10-20% gradient SDS-PAGE gel (Atto, Tokyo, Japan) and transferred onto a polyvinylidene fluoride

transfer membrane (Millipore, MA, USA). Membranes were immersed in Block Ace (Kac, Kyoto,

Japan) containing 1% bovine serum albumin (Sigma) and incubated for 1 hour at room temperature.

The blocking solution was then decanted, and replaced with Can Get Signal Solution 1 (Toyobo, Osaka,

Japan) containing the appropriate antibodies described below and incubated for 1 hour. The

membranes were washed with 1 × PBS (Fujifilm) containing 0.1% polyoxyethylene (20) sorbitan

monolaurate (Fujifilm) and incubated with Can Get Signal Solution 2 (Toyobo) containing horseradish

peroxidase-conjugated antibody against rabbit or mouse immunoglobulins for 1 hour. After addition

of Amersham ECL Prime Western Blotting Detection Reagents (Cytiva, Tokyo, Japan), the

membranes were subsequently imaged via LuminoGraph I (Atto).

The following antibodies were used in this study: anti-N4BP1 (Bethyl Laboratories, TX, USA),

anti-ZC3H12B (Gene Tex, CA, USA), anti-HNRNPC (abcam, Cambridgeshire, UK), anti-ZCCHC10

(Sigma), anti-KHNYN (Fujifilm), anti-HA tag (Biolegend, CA, USA), anti-rabbit IgG (H+L) HRP

(Jackson Immuno Research Laboratories, MD, USA), anti-mouse IgG (H+L) HRP (Thermo Fisher

Scientific), and anti-GAPDH (Fujifilm). The antibodies used in this study are listed in S2 Table.

Purification of intracellular HBV rcDNA

To extract intracellular HBV DNA, cells were washed twice with PBS, and cells were lysed in

lysis buffer (100 mM Tris-HCl [pH 8.0], 0.2% NP-40) for 15 minutes at 4℃. After spinning at 13,000

rpm for 1 minute at room temperature, the supernatant was collected and incubated with 1 M MgCl2,

0.2 mg/ml of DNase I (Sigma), and 10 mg/ml of RNase A (Nacalai Tesque) for at least 3 hours at

37℃. After adding 500 mM EDTA and 5 M NaCl, the lysates were digested with 20 mg/ml of

proteinase K (Kanto Chemical, Tokyo, Japan) and 10% SDS for 5 hours at 55℃. The extracted HBV

DNA was purified using phenol-chloroform-isoamyl alcohol (Sigma), then precipitated with

isopropanol, 0.5 mg/ml of glycogen, and 3M sodium acetate. After washing with 70% ethanol, the

purified HBV DNA was resolved in 50 μl pure water. HBV rcDNA was detected by qPCR using

Power SYBR Green PCR Master Mix (Applied Biosystems, CA, USA). As a standard for rcDNA,

pUC19-C_JPNAT was used. qPCR procedures were following the manufacturer's protocol. Briefly,

the samples were incubated at 50℃ for 2 minutes and at 95℃ for 10 minutes to initial denaturation.

Then, the samples were incubated at 95℃ for 15 seconds and at 60℃ for 1 minute for 40 cycles to

polymerase reaction. The following primer pair was used in this study.

rcDNA: 5'- GGAGGGATACATAGAGGTTCCTTGA -3' (forward)

5'- GTTGCCCGTTTGTCCTCTAATTC -3' (reverse)

Quantification of intracellular HBV cccDNA level

To extract intracellular HBV cccDNA, the cells were lysed by lysis buffer (10mM Tris-HCl [pH

7.4], 10mM EDTA, 0.5% SDS) and 5M NaCl was added. After incubation overnight at 4℃, the

samples were spun at 15,000 rpm for 30 minutes at 4℃ and the supernatant was collected to isolate

protein-free DNA. The DNA was purified a total of three times by phenol (Nacalai Tesque), phenol-

chloroform-isoamyl, and chloroform (Fujifilm). After precipitation with isopropanol and ethanol,

Plasmid-Safe ATP-Dependent DNase (Lucigen, WI, USA) was added to the purified DNA to remove

double-stranded and circular DNA. The Purified DNA was extracted in 30 μl of 10mM Tris-Cl (pH

8.5) using the FastGene Gel/PCR Extraction Kit (NIPPON Genetics, Tokyo, Japan). HBV cccDNA

was measured by qPCR using TaqMan Fast Advanced Master Mix (Applied Biosystems, CA, USA).

As a standard for cccDNA, pUC19-C_JPNAT was used. qPCR procedures were done per the

manufacturer's protocol. In brief, the samples were incubated at 50℃ for 2 minutes and at 95℃ for 10

minutes to initiate denaturation. Then, the samples were incubated at 95℃ for 15 seconds and at 60℃

for 1 minute for 50 cycles for the polymerase reaction. The following primer pair and probe were used

in this study.

cccDNA: 5'- CGTCTGTGCCTTCTCATCTGC -3' (forward)

442   5'- GCACAGCTTGGAGGCTTGAA -3' (reverse)

443   5'- CTGTAGGCATAAATTGGT -3' (Probe)

Measurement of intracellular HBV pgRNA

Total RNA including pgRNA was extracted using the RNeasy Mini Kit (Qiagen, Hilden,

Germany) following the manufacturer's protocol. The extracted RNA was resolved in 50 μl pure water

and measured by RT-qPCR using Power SYBR Green RNA-to-Ct 1-step Kit (Applied Biosystems).

The pgRNA expression level was normalized against the expression level of GAPDH as a

housekeeping gene and calculated by the ΔΔCT method. RT-qPCR procedures were done following

manufacturer's protocol. First, the samples were incubated at 50℃ for 2 minutes and at 95℃ for 10

minutes to intiate denaturation. Then, the samples were incubated at 95℃ for 15 seconds and at 60℃

for 1 minute for 40 cycles for the polymerase reaction. Samples were then incubated at 95℃ for 15

seconds, 60℃ for 1 minute, and 95℃ for 15 seconds for the melting curve measurement. The following

primer pairs were used in this study.

pgRNA: 5'- TCCCTCGCCTCGCAGACG -3' (forward)

5'- GTTTCCCACCTTATGAGTC -3' (reverse)

GAPDH: 5'- AGAAGGCTGGGGCTCATTTG -3' (forward)

5'- AGGGGCCATCCACAGTCTTC -3' (reverse)

pgRNA degradation assay

HepAD38.7 cells were seeded in collagen type I-coated 12-well plates (Iwaki) and cultured

overnight in media containing tetracycline hydrochloride. After washing twice with PBS, cells were

cultured without tetracycline for 48 hours. Then, the cells were transfected with N4BP1 wild-type

expression plasmid, ΔKH expression plasmid, ΔRNase expression plasmid, or control vector. These

plasmids were transfected as follows: 100 μl of Opti-MEM, 6 μl of TransIT LT-1, and 3μg of

expression plasmid. After transfection of plasmids, cells were cultured for 48 hours and changed to a

tetracycline-containing media in order to stop HBV production. Cells were collected at 2, 3, and 4

days after changing to tetracycline-containing media. Total RNA, including pgRNA, was extracted as

described above for RT-qPCR.

Drug treatment assay

Huh7 cells, HepG2-hNTCP C4 cells, and PHHs were stimulated with 1000 U/ml of IFN-α (PBL

Assay Science, NJ, USA) or 100 ng/ml of IFN-λ (Pepro Tech, NJ, USA). At 24 and 48 hours post-

drug stimulation, total RNA in cells was extracted for qPCR using the RNeasy Mini Kit, and cDNA

was synthesized using SuperScript IV VILO Master Mix (Invitrogen). For WB, the cells were lysed

with $2 \times$ Laemmli sample buffer containing 10% 2-mercaptoethanol and processed as described above.

qPCR was performed using Power SYBR Green PCR Master Mix. The mRNA expression levels of

N4BP1 and ISG15 were normalized against the expression level of GAPDH as a housekeeping gene

and calculated by the ΔΔCT method. The following primer pairs were used in this study.

N4BP1: 5'- CCCGATGATCCTCTGGGAAG -3' (forward)

5'- TTTGGCAGGGCACTGAGTAG -3' (reverse)

ISG15: 5'- ACTCATCTTTGCCAGTACAGGAG -3' (forward)

5'- CAGCATCTTCACCGTCAGGTC -3' (reverse)

GAPDH: see above

Analysis of N4BP1 expression in clinical liver samples

To assess the N4BP1 expression of HBV-HCC resection samples, we confirmed that all

specimens were HBs-Ag (+), HBe-Ag (-), and HBe-Ab (+) as documented in the patient medical

records. The samples were divided into an HBV DNA positive group (n=9) and an HBV DNA negative

group (n=8). In all cases, we used tissue from non-cancerous areas. RNA was extracted from the

resected tissues using the RNeasy Mini Kit and N4BP1 expression was measured by qPCR as

described above. This study was approved by the Institutional Review Board of the Graduate School

of Medicine, Hokkaido University (No. 14-015, 022-0195). All patients participated in this study

provided written informed consent for the use of their samples and clinical data and they were

informed of the opportunity to opt out.

Northern blotting

Huh7 cells were co-transfected with a plasmid containing the 1.3-fold-overlength genome of

HBV genotype C and N4BP1 using TransIT LT-1 transfection reagent, and cells were collected at 3

dpt. Total RNA was extracted using Isogen (Nippon Gene, Tokyo, Japan) and subjected to

electrophoresis in 1% agarose-formaldehyde gel and morpholinepropanesulfonic acid buffer (Nacalai

Tesque). Ribosomal RNA was visualized by ethidium bromide staining, and electrophoresed RNA

was transferred onto a positively charged nylon membrane (Roche, Basel-Stadt, Switzerland). An

HBV RNA probe and GAPDH RNA probe were linearized and synthesized by digoxigenin RNA

labeling kit (Roche). Hybridization and detection were performed using the DIG Northern Starter kit

(Roche) following the manufacturer's protocol. The signals were detected by LuminoGraph I (Atto).

RNA sequencing

PHHs were analyzed for RNA sequencing. N4BP1-overexpressing PHHs were infected with HBV

genotype C (5 Geq/cell) as described above. At 3 dpi, total RNA in PHHs was extracted using RNeasy

Mini Kit following the manufacturer's protocol. RNA sequencing was performed by Osaka University

(Genome Information Research Center, Research Institute for Microbial Diseases, Osaka University,

Osaka, Japan). We ran 2 well (N4BP1-overexpressing) vs 2 well (control) samples. Whole

transcriptome sequencing was applied to RNA samples using the Illumina NovaSeq 6000 platform in

a 101 bp single-end mode. Sequenced reads were mapped to the human reference genome sequence

(hg19) using TopHat version 2.2.1 in combination with Bowtie 2 version 2.2.3 and SAMtools version

1.0. The number of fragments per kilobase of exon per million mapped fragments was calculated using

Cufflinks version 2.2.1. The obtained data were analyzed by iDEP.951[40]. The cutoff value of gene

expression was set at fold change >2 or < 0.5 and FDR < 0.05 compared to control cells. To review

GEO data, access https://www.ncbi.nlm.nih.gov/geo/query/acc.cgi?acc=GSE225322. The accession

No. is GSE225322.

Statistical analysis

Data are averages of three or more independent experiments. All data in figures are presented as the mean ± standard deviation (SD). Evaluation of data was performed by Mann-Whitney U test. P-value of < 0.05 was considered statistically significant. Statistical analysis was performed using JMP Pro version 16.

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Figure1

Figure2

Figure3

Figure4

A

N4BP1 ✳ D623 896aa

KH-like domain RNase domain HA tag

⊿KH

⊿RNase

B

Control   WT   ⊿KH   ⊿RNase   Blot :

(kDa)

100-   HA

37-   GAPDH

Huh7 cell

NS

NS

✳

Relative HBV rcDNA (Control = 1)

1.5

0.5

Control   WT   ⊿KH   ⊿RNase

C

Control   ETV   WT   D623N   Blot :

(kDa)

100-   HA

37-   GAPDH

Huh7 cell

NS

✳

✳

Relative HBV rcDNA (Control = 1)

1.5

0.5

Control   ETV   WT   D623N

Figure5

Figure6

Figure7

Figure8

<u>Figure legends</u>

Fig 1. Screening for RNA binding proteins (RBPs) that inhibit HBV propagation.

(A) A plasmid containing the 1.3-fold-overlength genome of HBV genotype C and 132 RBP

expression plasmids were co-transfected into Huh7 cells. Intracellular rcDNA levels were assessed at

3 dpt. Using the 50% of rcDNA level of the control as a cutoff, 23 out of the 132 RBPs suppressed

HBV rcDNA levels. (B) HepG2-hNTCP C4 cells overexpressing the 23 RBPs were infected with

HBV genotype D. At 14 dpi, cells were harvested and intracellular rcDNA levels measured by qPCR.

Seven out of the 23 RBPs (N4BP1, TIA-1, ZC3H12B, PJA1, HNRNPC, ZCCHC10, and KHNYN)

reduced rcDNA levels in comparison to the control. (C) WB analyses in naïve Huh7 cells, HepG2-

hNTCP C4 cells of the five factors (N4BP1, ZC3H12B, HNRNPC, ZCCHC10, and KHNYN)

identified in the secondary screening. As a positive control, WB were performed on Huh7 cells

transfected to overexpress each factor. Error bars represent the SD. Abbreviations: RBP (RNA binding

protein), ETV (entecavir), HepG2 C4 (HepG2-hNTCP C4), OE (overexpression)

Fig 2. Measurement of rcDNA levels after RBP knockdown.

(A) Huh7 cells were transfected with siRNA, then co-transfected with the 1.3-fold-overlength genome

of HBV genotype C and an RBP expression plasmid. WB analyses and qPCR of rcDNA were

performed at 3 dpt. ZCCHC10 (A), HNRNPC (B), and N4BP1 (C). GAPDH was used as a loading

control and ETV was used as a positive control. Error bars represent the SD. *P < 0.05, **P < 0.01,

as determined by Mann-Whitney U test. All qPCR experiments were independently performed at least

three times. Abbreviations: NS (not significant)

Fig 3. N4BP1 is a suppressive host factor of HBV replication.

(A) Plasmids containing 1.3-fold-overlength genomes of HBV genotypes A, B, or C were co-

transfected with N4BP1 expression plasmids into Huh7 cells. At 3 dpt, the rcDNA levels were

measured by qPCR. Genotype A (left), genotype B (middle), and genotype C (right). (B) WB analysis

and rcDNA levels of N4BP1 KO Huh7 cells. N4BP1 KO Huh7 cells were transfected with the plasmid

containing 1.3-fold-overlength genomes C and WB and qPCR were performed at 3 dpt. N4BP1

expression by WB (upper, anti-N4BP1). GAPDH was used as a loading control (lower, anti-GAPDH).

rcDNA levels were increased relative to control in both N4BP1-KO lines that were generated. N4BP1

KO Huh7 cell lines #1 (C) and #2 (D) were transfected with the N4BP1 plasmid to restore N4BP1

expression (upper, anti-N4BP1). GAPDH was used as a loading control (lower, anti-GAPDH). In the

N4BP1-rescued KO Huh7 cells, the level of rcDNA was significantly lower than in the non-rescued

N4BP1 KO Huh7 cells. Error bars represent the SD. *P < 0.05, **P < 0.01, as determined by Mann-

Whitney U test. All qPCR experiments were independently performed at least three times.

Fig 4. N4BP1 expression is not induced by HBV.

(A) We evaluated whether N4BP1 expression is induced by HBV infection or transfection in

hepatocyte cell lines. In each system, we confirmed by qPCR whether pgRNA was induced. (B) Huh7

cells were transfected with a plasmid containing the 1.3-fold-overlength genome of HBV genotype C

and cells were collected at 3 dpt (upper). N4BP1 mRNA expression was assessed by qPCR (middle)

and protein expression by WB (lower). (C) HepG2-hNTCP C4 cells were infected with HBV genotype

D and cells were collected at 3 dpi (upper). N4BP1 expression level by qPCR (middle). N4BP1

expression levels by WB (lower). (D) Tetracycline was removed from the medium of HepAD38.7

cells and the cells were collected 3 days later (upper). N4BP1 expression levels by qPCR (middle).

N4BP1 expression levels by WB (lower). Error bars represent the SD. $*P < 0.05$, $**P < 0.01$, as

determined by Mann-Whitney U test. All qPCR experiments were independently performed at least

three times.

Fig 5. KH-like domain and RNase domain are involved in the anti-HBV effect of N4BP1.

(A) Schematic of N4BP1. N4BP1 is composed of 896 amino acids and has both a   KH-like domain

and an RNase domain. We constructed a KH-like domain deficient mutant (deletion of amino acids

59-143) and an RNase domain deficient mutant (deletion of amino acids 617-769). Each plasmid had

a HA tag at its C-terminus. (B) Huh7 cells were transfected with the plasmid containing the 1.3-fold-

overlength genome of HBV genotype C and each expression plasmid (control vector, N4BP1 WT,

ΔKH, and ΔRNase) and cells were collected at 3 dpt. WB was used to confirm the expression of each

N4BP1 mutant (upper, anti-HA tag). GAPDH was used as a loading control (lower, anti-GAPDH).

HBV levels were assessed by measuring intracellular rcDNA levels at 3 dpt. (C) Huh7 cells were

transfected with the plasmid containing the 1.3-fold-overlength genome of HBV genotype C and each

expression plasmid (control vector, WT, and D623N) and cells were collected at 3 dpt. WB was used

to confirm the expression of each N4BP1 mutant (upper, anti-HA tag). GAPDH was used as a loading

control (lower, anti-GAPDH). HBV levels were assessed by measuring intracellular rcDNA levels at

3 dpt. ETV was used as a positive control. Error bars represent the SD. *P < 0.05 as determined by

Mann-Whitney U test. All qPCR experiments were independently performed at least three times.

Fig 6. N4BP1 suppresses pgRNA levels by promoting pgRNA degradation.

HepG2-hNTCP C4 cells were infected with HBV genotype D and cells were collected at 14 dpi.

Comparison of cccDNA (A), pgRNA (B), and rcDNA (C) levels in N4BP1-overexpressing HepG2-

hNTCP C4 cells and control at 14 dpi. Heparin was used as a positive control. PHHs were infected

with HBV genotype C and cells were collected at 14 dpi. (D) WB analysis of PHHs expressing N4BP1

using adenovirus vectors (upper, anti-N4BP1). GAPDH was used as a loading control (lower).

Comparison of cccDNA (E), pgRNA (F), and rcDNA (G) levels in N4BP1-overexpressing PHHs and

control at 14 dpi. Heparin was used as a positive control. (H) Time course of pgRNA degradation

assay in HepAD38.7 cells. (I) pgRNA levels over time in HepAD38.7 cells overexpressing N4BP1

WT, ΔKH, ΔRNase, or control. Error bars represent the SD. *P < 0.05, **P < 0.01, as determined by

Mann-Whitney U test. All experiments were independently performed at least three times. (J) Northern

blotting analyses in control, N4BP1-overexpressing and naïve Huh7 cells.

Fig 7. N4BP1 expression level is induced by IFN-alpha and IFN-lambda in PHHs.

(A) Time course of the drug treatment assay. Cells were harvested at 24 or 48 hours post-IFN-α/λ

treatment. (B) N4BP1 expression levels by qPCR in Huh7 cells, HepG2-hNTCP C4 cells, and PHHs

treated with IFN-α (upper). ISG15 expression levels by qPCR (middle). N4BP1 protein expression

levels by WB. GAPDH was used as a loading control (lower). (C) N4BP1 expression levels by qPCR

in Huh7 cells, HepG2-hNTCP C4 cells, and PHHs treated with IFN-λ (upper). ISG15 expression levels

by qPCR (middle). N4BP1 protein expression levels by WB. GAPDH was measured as loading control

(lower).

Fig 8. ISG15 and N4BP1 expression levels in HBV-infected human liver tissues.

The mRNA levels of ISG15 (A) and N4BP1 (B) from non-cancerous tissues of HBV-HCC patients

were examined by qPCR. The samples were divided into HBV DNA positive group (n=9) and HBV

DNA negative group (n=8). Error bars represent the SD. *P < 0.05, **P< 0.01, as determined by

Mann-Whitney U test.