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(54) Title: IDENTIFICATION OF MICRO-RNAS INVOLVED IN NEUROMUSCULAR SYNAPSE MAINTENANCE AND REGENERATION

(57) Abstract: The present invention relates to the identification of miRNAs that are involved in the process of neuromuscular synaptic maintenance and regeneration following injury or disease. Modulation of these miRNAs is proposed as treatment for spinal cord injury and neurodegenerative disease.



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IDENTIFICATION OF MICRO-RNAS INVOLVED IN NEUROMUSCULAR SYNAPSE MAINTENANCE AND REGENERATION

CROSS-REFERENCE TO RELATED APPLICATIONS

5 This application claims the benefit of U.S. Provisional Application No. 61/037,260, filed
March 17, 2008, which is herein incorporated by reference in its entirety.

STATEMENT OF GOVERNMENT SUPPORT

10 This invention was made with grant support under grant no. HL53351-06 from the
National Institutes of Health. The government has certain rights in the invention.

FIELD OF THE INVENTION

15 The present invention relates generally to the fields of developmental biology,
neurobiology, pathology and molecular biology. More particularly, it concerns altered miRNA
expression in skeletal muscle tissues that impacts neuromuscular synaptic maintenance and
regeneration in injury or disease. The invention provides methods of treating a subject afflicted
with a denervating disease by administering agonists of particular miRNAs (*e.g.* miR-206 and
miR-1).

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BACKGROUND OF THE INVENTION

Amyotrophic lateral sclerosis (ALS), familiarly known as Lou Gehrig's disease, is the
most common adult motor neuron disease, affecting approximately 30,000 persons in the United
States (Bruijn *et al.*, 2004). About 90% of ALS cases are sporadic and the other 10% occur as a
25 result of an inherited mutation (Boillee *et al.*, 2006). Regardless of the manner in which ALS is
acquired, similar symptoms characterize the progression of the disease. The symptoms include
the denervation of target skeletal muscles through the selective loss and degeneration of motor
neurons, which leads to muscle atrophy and paralysis in the limbs and respiratory muscles.
Although ALS is the most common motor neuron disease, there is no cure or effective treatment
30 that can prevent the loss of motor neurons or significantly improve survival after diagnosis. The
identification of signaling pathways and downstream molecules that regulate the initiation and
progression of ALS remains a significant challenge in the search for novel therapeutics
(Dunckley *et al.*, 2007).

The transcriptional and post-translational regulatory networks that control neuromuscular synapse assembly and maintenance have been well characterized (Sanes and Lichtman, 2001); however, a role for post-transcriptional mechanisms in regulating this process has not been described. In this regard, microRNAs (miRNAs or miRs) are being recognized as major post-transcriptional regulators of many biological processes (Bartel, 2004; Van Rooij *et al.*, 2007a). MiRNAs are small, non-protein coding RNAs of about 18 to about 25 nucleotides in length that regulate gene expression in a sequence-specific manner. MiRNAs act as repressors of target mRNAs by promoting their degradation, when their sequences are perfectly complementary, or by inhibiting translation, when their sequences contain mismatches.

MiRNAs are transcribed by RNA polymerase II (pol II) or RNA polymerase III (pol III; see Qi *et al.* (2006) Cellular & Molecular Immunology Vol. 3:411-419) and arise from initial transcripts, termed primary miRNA transcripts (pri-miRNAs), that are generally several thousand bases long and are derived from individual miRNA genes, from introns of protein coding genes, or from poly-cistronic transcripts that often encode multiple, closely related miRNAs. See review of Carrington *et al.* (2003). Pri-miRNAs are processed in the nucleus by the RNase Drosha into about 70- to about 100-nucleotide hairpin-shaped precursors (pre-miRNAs). Following transport to the cytoplasm, the hairpin pre-miRNA is further processed by Dicer to produce a double-stranded miRNA (Lee *et al.*, 1993). The mature miRNA strand is then incorporated into the RNA-induced silencing complex (RISC), where it associates with its target mRNAs by base-pair complementarity. In the relatively rare cases in which a miRNA base pairs perfectly with an mRNA target, it promotes mRNA degradation. More commonly, miRNAs form imperfect heteroduplexes with target mRNAs, affecting either mRNA stability or inhibiting mRNA translation. Loss of function mutations in vertebrates have demonstrated that miRNAs are key regulators of diverse biological processes including cardiac hypertrophy, heart morphogenesis, and lymphocyte development (Van Rooij *et al.*, 2007b; Zhao *et al.*, 2007; Xiao *et al.*, 2007). However, the relationship of miRNAs to neuromuscular synapse function and signaling remains to be established.

SUMMARY OF THE INVENTION

The present invention is based, in part, on the discovery that miR-206 regulates neuromuscular junction stability and regeneration following denervation as a result of injury or

neurodegenerative disease. Accordingly, the present invention provides a method of treating a subject afflicted with a denervating neuropathic state. In one embodiment, the method comprises administering to the subject an agonist of miR-206 and/or miR-1. In another embodiment, the agonist is a polynucleotide comprising a mature sequence of miR-206 and/or miR-1. In another embodiment, the agonist is encoded by an expression vector. The denervating neuropathic state can be spinal cord injury, myasthenia gravis, amyotrophic lateral sclerosis, Friedreich's ataxia, spinal muscular atrophy, or spinocerebellar ataxia.

The present invention also includes a method for diagnosing a denervating neuropathic state (e.g. spinal cord injury or ALS) in a subject. In one embodiment, the method comprises (a) obtaining a skeletal muscle tissue sample from the subject; (b) assessing activity or expression of miR-206 and/or miR-133b in said sample; and (c) comparing the activity or expression in step (b) with the activity or expression of miR-206 and/or miR-133b in a normal tissue sample, wherein an increase in the activity or expression of miR-206 and/or miR-133b as compared to the activity or expression of miR-206 and/or miR-133b in a normal tissue sample is diagnostic of a denervating neuropathic state. Assessing miR-206 and/or miR-133b activity can comprise assessing the activity of one or more genes regulated by miR-206 and/or miR-133b. In one embodiment, the one or more genes regulated by miR-206 are selected from the group consisting of HDAC4, Dach2, or myogenin.

The present invention also provides a method for identifying a modulator of miR-206 and/or miR-1 activity in skeletal muscle. In one embodiment, the method comprises (a) contacting a skeletal muscle cell with a candidate compound; (b) assessing miR-206 and/or miR-1 activity or expression; and (c) comparing the activity or expression in step (b) with the activity or expression in the absence of the candidate compound, wherein a difference between the measured activities or expression indicates that the candidate compound is a modulator of miR-206 and/or miR-1. The cell may be contacted with the candidate compound *in vitro* or *in vivo*. The modulator of miR-206 and/or miR-1 may be an agonist of miR-206 and/or miR-1 or an inhibitor of miR-206 and/or miR-1.

The present invention also encompasses a pharmaceutical composition comprising an agonist of miR-206 and/or miR-1 and a pharmaceutically acceptable carrier. In some embodiments, the pharmaceutical composition may be administered with a second therapy for a denervating neuropathic state.

BRIEF DESCRIPTION OF THE DRAWINGS

The following drawings form part of the present specification and are included to further demonstrate certain aspects of the present invention. The invention may be better understood by reference to one or more of these drawings in combination with the detailed description of specific embodiments presented herein.

Figure 1. Upregulation of miR-206 in denervated muscle. (A) Northern blot analysis showing skeletal muscle specific expression of mature miR-206 in adult mouse tissues. The northern blot was re-probed with U6 as a loading control. (B) Northern blot analysis of miR-1 and miR-206 expression in adult mouse muscle tissues 10-days after sciatic nerve transection. The contra-lateral leg was used as a control. Northern blots were re-probed with U6 as a loading control. EDL=extensor digitorum longus, TA=tibialis anterior, GP=gastrocnemius/plantaris. (C) Transcripts of miR-206, miR-133b, miR-1, and miR-133a were detected by real time PCR in TA muscles following 10-days of denervation (+). The contra-lateral muscle was used as a control (-).

Figure 2. Generation of miR-206 mutant mice. (A) Diagram of the miR-206/133b murine locus. (B) Targeting strategy to delete miR-206 from the miR-206/133b locus by replacing the pre-miR-206 sequence with a neomycin cassette flanked by loxP sites. Positions of 5' and 3' probes used for Southern blots are shown. (C) Southern blot analysis of genomic DNA from wild-type and heterozygous mice using an external 5' probe. Genomic DNA was digested with BamHI. (D) Northern blot analysis of mature miR-206 transcript expression in gastrocnemius/plantaris muscle of the indicated miR-206 genotypes. U6 was used as loading control. (E) RT-PCR using gene specific primers for pre-miR-206, pre-miR-133b, pre-miR-1-1, and pre-miR-1-2 in the soleus muscle of control and miR-206 mutant mice after denervation. (F) Hematoxylin and eosin (H&E) and metachromatic ATPase staining show no difference in the skeletal muscle architecture and distribution of Type I (dark blue) and Type II (light blue) skeletal myofibers in the soleus muscles of wild-type (WT) and miR-206^{-/-} (KO) mice.

Figure 3. Delayed reinnervation in miR-206 mutant mice. (A) Following sciatic nerve transection (as indicated in weeks), a delay in reinnervation is observed in miR-206^{-/-} (KO) mice compared to wild-type (WT) mice as detected by the superimposition of anti-ZNP staining (green) with BTX (red). Note the lack of anti-ZNP (green) staining in miR-206^{-/-} mice. (B)

Time course and quantification of the number of reinnervated synaptic sites in WT and miR-206 KO mice following sciatic nerve transection. **(C)** Immunohistochemistry using BTX (red) and anti-ZNP (green) shows a delay in reinnervation of NMJs in miR-206 $-/-$ mice compared to WT mice following 7 and 18 days after nerve crush. Note the lack of anti-ZNP (green) staining in miR-206 $-/-$ mice.

Figure 4. MiR-206 targets HDAC4. **(A)** Schematic diagram of the *Hdac4* 3' UTR from several species with sequence homologies of the two predicted miR-206 binding sites. **(B)** Luciferase activity of COS1 cells co-transfected with wild-type (WT) or mutant HDAC4 3'UTR-luciferase constructs with increasing amounts of miR-206 expression plasmid. Mutation of the predicted miR-206 binding sites in the 3'UTR alleviates the inhibitory activity of miR-206. Values are normalized to β -galactosidase activity. **(C)** Western blot analysis showing increased HDAC4 expression in muscle lysates isolated from wild-type (WT) and miR-206 $-/-$ (KO) mice 3-weeks following denervation. Control (Ctrl.) refers to HDAC4 mKO protein lysate. GAPDH protein was detected as a control. Relative protein expression compared to WT is indicated below the blot. **(D)** Transcripts of *Hdac4* were detected in wild-type (WT) and miR-206 $-/-$ (KO) muscles after 3-weeks of denervation. **(E)** Transcripts of *Dach2* were detected in wild-type (WT) and miR-206 $-/-$ (KO) muscles after 3-weeks of denervation. **(F)** Transcripts of *myogenin* were detected in wild-type (WT) and miR-206 $-/-$ (KO) TA muscles after 3-weeks of denervation. **(G)** Immunohistochemistry using BTX (red) and anti-ZNP (green) shows an increase in reinnervation in HDAC4 mKO mutant mice compared to WT mice 7 days following nerve crush. Note the increase in anti-ZNP (green) staining in HDAC4 mKO mice.

Figure 5. Upregulation of miR-206 in ALS mice. **(A)** Heat plot of miRNA array profiling of miRNAs in wild-type (WT) and G93A-SOD1 (ALS) mice. **(B)** Northern blot analysis of miR-1 and miR-206 expression in 7-month old wild-type (WT) and G93A-SOD1 (ALS) TA muscles. Northern blots were re-probed with U6 as a loading control. **(C)** ALS pathogenesis is increased in miR-206/G93A-SOD1 double mutant mice. Representative image of a G93A-SOD1 mouse and a miR-206/G93A-SOD1 double mutant mouse. **(D)** Muscle degeneration is increased in miR-206/G93A-SOD1 double mutant mice. Hematoxylin and eosin (H&E) staining of gastrocnemius/plantaris muscles of wild-type (WT), miR-206 mutant, G93A-SOD1, and miR-206/G93A-SOD1 double mutant mice.

DETAILED DESCRIPTION

The present invention is based, in part, on the discovery that miR-206 regulates neuromuscular junction stability and regeneration following injury. MiR-206 is upregulated in skeletal muscles of a mouse model of ALS and in response to denervation following nerve transection or crush. In addition, the related molecule, miR-133b, is upregulated in a similar fashion to miR-206, while miR-1 and miR-133a exhibit a reduced expression in the ALS disease model and in response to surgical denervation. Through the creation of miR-206 null mice, the inventors established an essential role for miR-206 in regulating neuromuscular junction stability and regeneration following injury. These results describe the first role of an miRNA in regulating neuromuscular synapse function, and point to miR-206 and miR-1 as key components in pathogenesis of ALS and other denervating diseases and injuries. Accordingly, the present invention provides novel therapeutic approaches for treating neurodegenerative diseases and nerve damage by manipulating expression levels of miR-206 and/or miR-1.

In vertebrates, three pairs of muscle-specific miRNAs, miR-1-1/133a-2, miR-1-2/133a-1, and miR-206/133b are transcribed as bicistronic transcripts on separate chromosomes (Liu *et al.*, 2007). MiR-1 has been shown to regulate cardiac myocyte proliferation and heart morphogenesis through the repression of the transcription factor, Hand2 (Zhao *et al.*, 2005; 2007). In skeletal myoblasts, miR-1 was shown to promote differentiation through the repression of histone deacetylase 4 (HDAC4), a repressor of myogenesis; paradoxically, miR-133 was shown to repress differentiation through the repression of serum response factor (SRF), an activator of myogenesis (Chen *et al.*, 2006). MiR-1-1 is co-transcribed with miR-133a-2 from human chromosome 20, while miR-1-2 is co-transcribed with miR-133a-1 from human chromosome 18. In addition, miR-206, an evolutionarily divergent member of the miR-1 family of miRNAs, has been shown to promote myoblast differentiation through the repression of various target genes, including a subunit of the DNA polymerase α (Pol α), connexin 43 (Cx43), follistatin-like 1 (Fstll), and utrophin (Utm) (Kim *et al.*, 2006; Rosenberg *et al.*, 2006). MiR-206 is generated with miR-133b from a bicistronic transcript from an intergenic region of human chromosome 6. MiR-133b was shown to be decreased in patients with Parkinson's disease and to regulate maturation of dopaminergic neurons (Kim *et al.*, 2007). MiR-1-1 and miR-1-2 are identical to each other and differ from miR-206 by four nucleotides. MiR-133a-1 and miR-133a-2 are identical to each

other and differ from miR-133b by two nucleotides. The stem-loop and mature sequences for miR-206, miR-1, miR-133a, and miR-133b are shown below:

Human miR-206 stem-loop (SEQ ID NO: 1):

5 UGCUUCCCGAGGCCACAUGCUUCUUUAUAUCCCCAUAUGGAUUACUUUGCUAUGG
AAUGUAAGGAAGUGUGUGGUUUCGGCAAGUG

Human mature miR-206 (SEQ ID NO: 2):

10 UGGAAUGUAAGGAAGUGUGUGG

Human miR-1 stem-loop (SEQ ID NO: 3):

ACCUACUCAGAGUACAUAUCUUCUUUAUGUACCCAUAUGAACAUACAAUGCUAUG
GAAUGUAAAGAAGUAUGUAUUUUUGGUAGGC

15 Human mature miR-1 (SEQ ID NO: 4):

UGGAAUGUAAAGAAGUAUGUAU

Human miR-133a stem-loop (SEQ ID NO: 5):

20 ACAAUGC UUUGCUAGAGCUGGUAAAUGGAACCAAUCGCCUCUCAAUGGAUU
UGGUCCCCUUAACCAGCUGUAGCUAUGCAUUGA

Human mature miR-133a (SEQ ID NO: 6):

UUUGGUCCCCUUAACCAGCUG

25 Human miR-133b stem-loop (SEQ ID NO: 7):

CCUCAGAAGAAAGAUGCCCCUGCUCUGGCUGGUCAAACGGAACCAAGUCCGUCU
UCCUGAGAGGUUUGGUCCCCUUAACCAGCUACAGCAGGGCUGGCAAUGCCCAGU
CCUUGGAGA

30 Human mature miR-133b (SEQ ID NO: 8):

UUUGGUCCCCUUAACCAGCUA

In one embodiment, the present invention provides a method of treating a subject afflicted with a denervating neuropathic state comprising administering to the subject an agonist of miR-206 and/or miR-1. An "agonist" can be any compound or molecule that increases the activity or expression of the particular miRNA. For example, in certain embodiments, an agonist of miR-206 and/or miR-1 can be a polynucleotide comprising a mature miR-206 and/or miR-1 sequence. In some embodiments, the polynucleotide comprises the sequence of SEQ ID NO: 2, and/or SEQ ID NO: 4. In another embodiment, the agonist of miR-206 and/or miR-1 can be a polynucleotide comprising the pri-miRNA or pre-miRNA sequence for miR-206 and/or miR-1. In such an embodiment, the polynucleotide can comprise a sequence of SEQ ID NO: 1 and/or SEQ ID NO: 3. The polynucleotide comprising the mature sequence, the pre-miRNA sequence, or the pri-miRNA sequence for miR-206 and/or miR-1 can be single stranded or double stranded. The polynucleotides can contain one or more chemical modifications, such as locked nucleic acids, peptide nucleic acids, sugar modifications, such as 2' -O-alkyl (*e.g.* 2'-O-methyl, 2' -O-methoxyethyl), 2' -fluoro, and 4' thio modifications, and backbone modifications, such as one or more phosphorothioate, morpholino, or phosphonocarboxylate linkages and combinations comprising the same. In one embodiment, the polynucleotide comprising a miR-206 and/or miR-1 sequence is conjugated to cholesterol.

In another embodiment, the agonist of miR-206 and/or miR-1 can be an agent distinct from miR-206 and/or miR-1 that acts to increase, supplement, or replace the function of miR-206 and/or miR-1. For instance, MyoD and the bHLH protein E12, both of which up-regulate expression of miR-206, can be agonists of miR-206. Other transcription factors or signaling proteins that up-regulate the expression of miR-206 and/or miR-1 are likewise contemplated as agonists of miR-206 and/or miR-1.

In another embodiment, the agonist of miR-206 and/or miR-1 can be expressed *in vivo* from a vector. A "vector" is a composition of matter which can be used to deliver a nucleic acid of interest to the interior of a cell. Numerous vectors are known in the art including, but not limited to, linear polynucleotides, polynucleotides associated with ionic or amphiphilic compounds, plasmids, and viruses. Thus, the term "vector" includes an autonomously replicating plasmid or a virus. Examples of viral vectors include, but are not limited to, adenoviral vectors, adeno-associated virus vectors, retroviral vectors, and the like. An

expression construct can be replicated in a living cell, or it can be made synthetically. For purposes of this application, the terms "expression construct," "expression vector," and "vector," are used interchangeably to demonstrate the application of the invention in a general, illustrative sense, and are not intended to limit the invention.

5 In one embodiment, an expression vector for expressing miR-206 and/or miR-1 comprises a promoter "operably linked" to a polynucleotide encoding miR-206 and/or miR-1. The phrase "operably linked" or "under transcriptional control" as used herein means that the promoter is in the correct location and orientation in relation to a polynucleotide to control the initiation of transcription by RNA polymerase and expression of the polynucleotide. The
10 polynucleotide encoding miR-206 and/or miR-1 may encode the primary miRNA sequence (pri-miRNA), the precursor-miRNA sequence (pre-miRNA), or the mature miRNA sequence for miR-206 and/or miR-1. In another embodiment, the expression vector comprises a polynucleotide operably linked to a promoter, wherein said polynucleotide comprises the sequence of SEQ ID NO: 1. In another embodiment, the expression vector comprises a
15 polynucleotide operably linked to a promoter, wherein said polynucleotide comprises the sequence of SEQ ID NO: 2. In another embodiment, the expression vector comprises a polynucleotide operably linked to a promoter, wherein said polynucleotide comprises the sequence of SEQ ID NO: 3. In another embodiment, the expression vector comprises a polynucleotide operably linked to a promoter, wherein said polynucleotide comprises the
20 sequence of SEQ ID NO: 4. The polynucleotide comprising the sequence of SEQ ID NO: 1, SEQ ID NO: 2, SEQ ID NO: 3, or SEQ ID NO: 4 may be about 18 to about 2000 nucleotides in length, about 70 to about 200 nucleotides in length, about 20 to about 50 nucleotides in length, or about 18 to about 25 nucleotides in length.

In certain embodiments, the nucleic acid encoding a gene product is under transcriptional
25 control of a promoter. A "promoter" refers to a DNA sequence recognized by the synthetic machinery of the cell, or introduced synthetic machinery, required to initiate the specific transcription of a gene. The term promoter will be used here to refer to a group of transcriptional control modules that are clustered around the initiation site for RNA polymerase I, II, or III.

In some embodiments, the human cytomegalovirus (CMV) immediate early gene
30 promoter, the SV40 early promoter, the Rous sarcoma virus long terminal repeat, rat insulin promoter and glyceraldehyde-3-phosphate dehydrogenase can be used to obtain high-level

expression of the polynucleotide sequence of interest. The use of other viral or mammalian cellular or bacterial phage promoters which are well-known in the art to achieve expression of a polynucleotide sequence of interest is contemplated as well, provided that the levels of expression are sufficient for a given purpose. In certain embodiments, a tissue-specific promoter, such as a skeletal muscle-specific promoter, can be used to obtain tissue-specific expression of the polynucleotide sequence of interest.

By employing a promoter with well-known properties, the level and pattern of expression of the protein of interest following transfection or transformation can be optimized. Further, selection of a promoter that is regulated in response to specific physiologic signals can permit inducible expression of the polynucleotide. Tables 1 and 2 list several regulatory elements that may be employed, in the context of the present invention, to regulate the expression of the polynucleotide of interest (*e.g.* agonists of miR-206 and/or miR-1). This list is not intended to be exhaustive of all the possible elements involved in the promotion of gene expression but, merely, to be exemplary thereof.

Below is a list of viral promoters, cellular promoters/enhancers and inducible promoters/enhancers that could be used in combination with the polynucleotide of interest in an expression construct (Table 1 and Table 2). Additionally, any promoter/enhancer combination (as per the Eukaryotic Promoter Data Base EPDB) could also be used to drive expression of the polynucleotide. Eukaryotic cells can support cytoplasmic transcription from certain bacterial promoters if the appropriate bacterial polymerase is provided, either as part of the delivery complex or as an additional genetic expression construct.

TABLE 1	
Promoter and/or Enhancer	
Promoter/Enhancer	References
Immunoglobulin Heavy Chain	Banerji <i>et al.</i> , 1983; Gilles <i>et al.</i> , 1983; Grosschedl <i>et al.</i> , 1985; Atchinson <i>et al.</i> , 1986, 1987; Imler <i>et al.</i> , 1987; Weinberger <i>et al.</i> , 1984; Kiledjian <i>et al.</i> , 1988; Porton <i>et al.</i> ; 1990
Immunoglobulin Light Chain	Queen <i>et al.</i> , 1983; Picard <i>et al.</i> , 1984

TABLE 1	
Promoter and/or Enhancer	
Promoter/Enhancer	References
T-Cell Receptor	Luria <i>et al.</i> , 1987; Winoto <i>et al.</i> , 1989; Redondo <i>et al.</i> ; 1990
HLA DQ a and/or DQ β	Sullivan <i>et al.</i> , 1987
β -Interferon	Goodbourn <i>et al.</i> , 1986; Fujita <i>et al.</i> , 1987; Goodbourn <i>et al.</i> , 1988
Interleukin-2	Greene <i>et al.</i> , 1989
Interleukin-2 Receptor	Greene <i>et al.</i> , 1989; Lin <i>et al.</i> , 1990
MHC Class II 5	Koch <i>et al.</i> , 1989
MHC Class II HLA-DRA	Sherman <i>et al.</i> , 1989
β -Actin	Kawamoto <i>et al.</i> , 1988; Ng <i>et al.</i> ; 1989
Muscle Creatine Kinase (MCK)	Jaynes <i>et al.</i> , 1988; Horlick <i>et al.</i> , 1989; Johnson <i>et al.</i> , 1989
Prealbumin (Transthyretin)	Costa <i>et al.</i> , 1988
Elastase 1	Ornitz <i>et al.</i> , 1987
Metallothionein (MTII)	Karin <i>et al.</i> , 1987; Culotta <i>et al.</i> , 1989
Collagenase	Pinkert <i>et al.</i> , 1987; Angel <i>et al.</i> , 1987a
Albumin	Pinkert <i>et al.</i> , 1987; Tronche <i>et al.</i> , 1989, 1990
α -Fetoprotein	Godbout <i>et al.</i> , 1988; Campere <i>et al.</i> , 1989
t-Globin	Bodine <i>et al.</i> , 1987; Perez-Stable <i>et al.</i> , 1990
β -Globin	Trudel <i>et al.</i> , 1987
c-fos	Cohen <i>et al.</i> , 1987
c-HA- <i>ras</i>	Triesman, 1986; Deschamps <i>et al.</i> , 1985
Insulin	Edlund <i>et al.</i> , 1985
Neural Cell Adhesion Molecule (NCAM)	Hirsh <i>et al.</i> , 1990
α_1 -Antitrypsin	Latimer <i>et al.</i> , 1990
H2B (TH2B) Histone	Hwang <i>et al.</i> , 1990
Mouse and/or Type I Collagen	Ripe <i>et al.</i> , 1989

TABLE 1	
Promoter and/or Enhancer	
Promoter/Enhancer	References
Glucose-Regulated Proteins (GRP94 and GRP78)	Chang <i>et al.</i> , 1989
Rat Growth Hormone	Larsen <i>et al.</i> , 1986
Human Serum Amyloid A (SAA)	Edbrooke <i>et al.</i> , 1989
Troponin I (TN I)	Yutzey <i>et al.</i> , 1989
Platelet-Derived Growth Factor (PDGF)	Pech <i>et al.</i> , 1989
Duchenne Muscular Dystrophy	Klamut <i>et al.</i> , 1990
SV40	Banerji <i>et al.</i> , 1981; Moreau <i>et al.</i> , 1981; Sleight <i>et al.</i> , 1985; Firak <i>et al.</i> , 1986; Herr <i>et al.</i> , 1986; Imbra <i>et al.</i> , 1986; Kadesch <i>et al.</i> , 1986; Wang <i>et al.</i> , 1986; Ondek <i>et al.</i> , 1987; Kuhl <i>et al.</i> , 1987; Schaffner <i>et al.</i> , 1988
Polyoma	Swartzendruber <i>et al.</i> , 1975; Vasseur <i>et al.</i> , 1980; Katinka <i>et al.</i> , 1980, 1981; Tyndell <i>et al.</i> , 1981; Dandolo <i>et al.</i> , 1983; de Villiers <i>et al.</i> , 1984; Hen <i>et al.</i> , 1986; Satake <i>et al.</i> , 1988; Campbell and/or Villarreal, 1988
Retroviruses	Kriegler <i>et al.</i> , 1982, 1983; Levinson <i>et al.</i> , 1982; Kriegler <i>et al.</i> , 1983, 1984a, b, 1988; Bosze <i>et al.</i> , 1986; Miksicek <i>et al.</i> , 1986; Celander <i>et al.</i> , 1987; Thiesen <i>et al.</i> , 1988; Celander <i>et al.</i> , 1988; Choi <i>et al.</i> , 1988; Reisman <i>et al.</i> , 1989
Papilloma Virus	Campo <i>et al.</i> , 1983; Lusky <i>et al.</i> , 1983; Spandidos and/or Wilkie, 1983; Spalholz <i>et al.</i> , 1985; Lusky <i>et al.</i> , 1986; Cripe <i>et al.</i> , 1987; Gloss <i>et al.</i> , 1987; Hirochika <i>et al.</i> , 1987; Stephens <i>et al.</i> , 1987
Hepatitis B Virus	Bulla <i>et al.</i> , 1986; Jameel <i>et al.</i> , 1986; Shaul <i>et al.</i> , 1987; Spandau <i>et al.</i> , 1988; Vannice <i>et al.</i> , 1988
Human Immunodeficiency Virus	Muesing <i>et al.</i> , 1987; Hauber <i>et al.</i> , 1988; Jakobovits <i>et al.</i> , 1988; Feng <i>et al.</i> , 1988; Takebe <i>et al.</i> , 1988; Rosen <i>et al.</i> , 1988; Berkhout <i>et al.</i> , 1989; Laspia <i>et al.</i> , 1989; Sharp <i>et al.</i> , 1989; Braddock <i>et al.</i> , 1989

TABLE 1	
Promoter and/or Enhancer	
Promoter/Enhancer	References
Cytomegalovirus (CMV)	Weber <i>et al.</i> , 1984; Boshart <i>et al.</i> , 1985; Foecking <i>et al.</i> , 1986
Gibbon Ape Leukemia Virus	Holbrook <i>et al.</i> , 1987; Quinn <i>et al.</i> , 1989

TABLE 2		
Inducible Elements		
Element	Inducer	References
MT II	Phorbol Ester (TFA) Heavy metals	Palmiter <i>et al.</i> , 1982; Haslinger <i>et al.</i> , 1985; Searle <i>et al.</i> , 1985; Stuart <i>et al.</i> , 1985; Imagawa <i>et al.</i> , 1987, Karin <i>et al.</i> , 1987; Angel <i>et al.</i> , 1987b; McNeall <i>et al.</i> , 1989
MMTV (mouse mammary tumor virus)	Glucocorticoids	Huang <i>et al.</i> , 1981; Lee <i>et al.</i> , 1981; Majors <i>et al.</i> , 1983; Chandler <i>et al.</i> , 1983; Ponta <i>et al.</i> , 1985; Sakai <i>et al.</i> , 1988
β -Interferon	poly(rI)x poly(rc)	Tavernier <i>et al.</i> , 1983
Adenovirus 5 <u>E2</u>	E1A	Imperiale <i>et al.</i> , 1984
Collagenase	Phorbol Ester (TPA)	Angel <i>et al.</i> , 1987a
Stromelysin	Phorbol Ester (TPA)	Angel <i>et al.</i> , 1987b
SV40	Phorbol Ester (TPA)	Angel <i>et al.</i> , 1987b
Murine MX Gene	Interferon, Newcastle Disease Virus	Hug <i>et al.</i> , 1988
GRP78 Gene	A23187	Resendez <i>et al.</i> , 1988
α -2-Macroglobulin	IL-6	Kunz <i>et al.</i> , 1989
Vimentin	Serum	Rittling <i>et al.</i> , 1989
MHC Class I Gene H-2kb	Interferon	Blanar <i>et al.</i> , 1989
HSP70	E1A, SV40 Large T	Taylor <i>et al.</i> , 1989, 1990a,

TABLE 2		
Inducible Elements		
Element	Inducer	References
	Antigen	1990b
Proliferin	Phorbol Ester-TPA	Mordacq <i>et al.</i> , 1989
Tumor Necrosis Factor	PMA	Hensel <i>et al.</i> , 1989
Thyroid Stimulating Hormone α Gene	Thyroid Hormone	Chatterjee <i>et al.</i> , 1989

Of particular interest are muscle specific promoters, which include the myosin light chain-2 promoter (Franz *et al.*, 1994; Kelly *et al.*, 1995), the α -actin promoter (Moss *et al.*, 1996), the troponin 1 promoter (Bhavsar *et al.*, 1996); the $\text{Na}^+/\text{Ca}^{2+}$ exchanger promoter (Barnes *et al.*, 1997), the dystrophin promoter (Kimura *et al.*, 1997), the $\alpha 7$ integrin promoter (Ziober and Kramer, 1996), and the muscle creatine kinase (MCK) promoter (Jaynes *et al.*, 1988; Horlick *et al.*, 1989; Johnson *et al.*, 1989).

A polyadenylation signal may be included to effect proper polyadenylation of the gene transcript where desired. The nature of the polyadenylation signal is not believed to be crucial to the successful practice of the invention, and any such sequence may be employed such as human growth hormone and SV40 polyadenylation signals. Also contemplated as an element of the expression cassette is a terminator. These elements can serve to enhance message levels and to minimize read through from the cassette into other sequences.

In certain embodiments of the invention, the cells contain nucleic acid constructs of the present invention, a cell may be identified *in vitro* or *in vivo* by including a marker in the expression construct. Such markers would confer an identifiable change to the cell permitting easy identification of cells containing the expression construct. Usually the inclusion of a drug selection marker aids in cloning and in the selection of transformants, for example, genes that confer resistance to neomycin, puromycin, hygromycin, DHFR, GPT, zeocin and histidinol are useful selectable markers. Alternatively, enzymes such as herpes simplex virus thymidine kinase (tk) or chloramphenicol acetyltransferase (CAT) may be employed. Immunologic markers also can be employed. The selectable marker employed is not believed to be important, so long as it is

capable of being expressed simultaneously with the nucleic acid encoding a gene product. Further examples of selectable markers are well known to one of skill in the art.

There are a number of ways in which expression vectors may be introduced into cells. In certain embodiments of the invention, the expression construct comprises a virus or
5 engineered construct derived from a viral genome. The ability of certain viruses to enter cells via receptor-mediated endocytosis, to integrate into host cell genome and express viral genes stably and efficiently have made them attractive candidates for the transfer of foreign genes into mammalian cells (Ridgeway, 1988; Nicolas and Rubenstein, 1988; Baichwal and Sugden, 1986; Temin, 1986).

10 One of the preferred methods for *in vivo* delivery involves the use of an adenovirus expression vector. "Adenovirus expression vector" is meant to include those constructs containing adenovirus sequences sufficient to (a) support packaging of the construct and (b) to express a polynucleotide that has been cloned therein. The expression vector comprises a genetically engineered form of adenovirus. Knowledge of the genetic organization of adenovirus,
15 a 36 kB, linear, double-stranded DNA virus, allows substitution of large pieces of adenoviral DNA with foreign sequences up to 7 kB (Grunhaus and Horwitz, 1992). In contrast to retrovirus, the adenoviral infection of host cells does not result in chromosomal integration because adenoviral DNA can replicate in an episomal manner without potential genotoxicity. Also, adenoviruses are structurally stable, and no genome rearrangement has been detected after
20 extensive amplification. Adenovirus can infect virtually all epithelial cells regardless of their cell cycle stage.

Adenovirus is particularly suitable for use as a gene transfer vector because of its mid-sized genome, ease of manipulation, high titer, wide target cell range and high infectivity. Both
25 ends of the viral genome contain 100-200 base pair inverted repeats (ITRs), which are *cis* elements necessary for viral DNA replication and packaging.

Other than the requirement that the adenovirus vector be replication defective, or at least conditionally defective, the nature of the adenovirus vector is not believed to be crucial to the successful practice of the invention. The adenovirus may be of any of the 42 different known serotypes or subgroups A-F. Adenovirus type 5 of subgroup C is the preferred
30 starting material in order to obtain the conditional replication-defective adenovirus vector for use in the present invention. This is because Adenovirus type 5 is a human adenovirus about

which a great deal of biochemical and genetic information is known, and it has historically been used for most constructions employing adenovirus as a vector.

The typical vector according to the present invention is replication defective and will not have an adenovirus E1 region. Thus, it will be most convenient to introduce the polynucleotide encoding the gene of interest at the position from which the E1-coding sequences have been removed. However, the position of insertion of the construct within the adenovirus sequences is not critical to the invention. The polynucleotide encoding the gene of interest may also be inserted in lieu of the deleted E3 region in E3 replacement vectors, as described by Karlsson *et al.* (1986), or in the E4 region where a helper cell line or helper virus complements the E4 defect.

Adenovirus vectors have been used in eukaryotic gene expression (Levrero *et al.*, 1991; Gomez-Foix *et al.*, 1992) and vaccine development (Grunhaus and Horwitz, 1992; Graham and Prevec, 1991). Recently, animal studies suggested that recombinant adenovirus could be used for gene therapy (Stratford-Perricaudet and Perricaudet, 1991; Stratford-Perricaudet *et al.*, 1990; Rich *et al.*, 1993). Studies in administering recombinant adenovirus to different tissues include trachea instillation (Rosenfeld *et al.*, 1991; Rosenfeld *et al.*, 1992), muscle injection (Ragot *et al.*, 1993), peripheral intravenous injections (Herz and Gerard, 1993) and stereotactic inoculation into the brain (Le Gal La Salle *et al.*, 1993).

Retroviral vectors are also suitable for expressing agonists of miR-206 and/or miR-1 in cells. The retroviruses are a group of single-stranded RNA viruses characterized by an ability to convert their RNA to double-stranded DNA in infected cells by a process of reverse-transcription (Coffin, 1990). The resulting DNA then stably integrates into cellular chromosomes as a provirus and directs synthesis of viral proteins. The integration results in the retention of the viral gene sequences in the recipient cell and its descendants. The retroviral genome contains three genes, gag, pol, and env that code for capsid proteins, polymerase enzyme, and envelope components, respectively. A sequence found upstream from the gag gene contains a signal for packaging of the genome into virions. Two long terminal repeat (LTR) sequences are present at the 5' and 3' ends of the viral genome. These contain strong promoter and enhancer sequences and are also required for integration in the host cell genome (Coffin, 1990).

In order to construct a retroviral vector, a nucleic acid encoding a gene of interest is inserted into the viral genome in the place of certain viral sequences to produce a virus that is

replication-defective. In order to produce virions, a packaging cell line containing the gag, pol, and env genes but without the LTR and packaging components is constructed (Mann *et al.*, 1983). When a recombinant plasmid containing a cDNA, together with the retroviral LTR and packaging sequences is introduced into this cell line (by calcium phosphate precipitation for example), the packaging sequence allows the RNA transcript of the recombinant plasmid to be packaged into viral particles, which are then secreted into the culture media (Nicolas and Rubenstein, 1988; Temin, 1986; Mann *et al.*, 1983). The media containing the recombinant retroviruses is then collected, optionally concentrated, and used for gene transfer. Retroviral vectors are able to infect a broad variety of cell types. However, integration and stable expression require the division of host cells (Paskind *et al.*, 1975).

Other viral vectors may be employed as expression constructs in the present invention. Vectors derived from viruses such as vaccinia virus (Ridgeway, 1988; Baichwal and Sugden, 1986; Coupar *et al.*, 1988) adeno-associated virus (AAV) (Ridgeway, 1988; Baichwal and Sugden, 1986; Hermonat and Muzycska, 1984) and herpesviruses may be employed. They offer several attractive features for various mammalian cells (Friedmann, 1989; Ridgeway, 1988; Baichwal and Sugden, 1986; Coupar *et al.*, 1988; Horwich *et al.*, 1990).

In order to effect expression of gene constructs, the expression construct must be delivered into a cell. This delivery may be accomplished *in vitro*, as in laboratory procedures for transforming cells lines, or *in vivo* or *ex vivo*, as in the treatment of certain disease states. One mechanism for delivery is via viral infection where the expression construct is encapsidated in an infectious viral particle.

Several non-viral methods for the transfer of expression constructs into cultured mammalian cells also are contemplated by the present invention. These include calcium phosphate precipitation (Graham and Van Der Eb, 1973; Chen and Okayama, 1987; Rippe *et al.*, 1990) DEAE-dextran (Gopal, 1985), electroporation (Tur-Kaspa *et al.*, 1986; Potter *et al.*, 1984), direct microinjection (Harland and Weintraub, 1985), DNA-loaded liposomes (Nicolau and Sene, 1982; Fraley *et al.*, 1979) and lipofectamine-DNA complexes, cell sonication (Fechheimer *et al.*, 1987), gene bombardment using high velocity microprojectiles (Yang *et al.*, 1990), and receptor-mediated transfection (Wu and Wu, 1987; Wu and Wu, 1988). Some of these techniques may be successfully adapted for *in vivo* or *ex vivo* use.

Once the expression construct has been delivered into the cell, the nucleic acid encoding the gene of interest may be positioned and expressed at different sites. In certain embodiments, the nucleic acid encoding the gene may be stably integrated into the genome of the cell. This integration may be in the cognate location and orientation via homologous recombination (gene replacement) or it may be integrated in a random, non-specific location (gene augmentation). In yet further embodiments, the nucleic acid may be stably maintained in the cell as a separate, episomal segment of DNA. Such nucleic acid segments or "episomes" encode sequences sufficient to permit maintenance and replication independent of or in synchronization with the host cell cycle. How the expression construct is delivered to a cell and where in the cell the nucleic acid remains is dependent on the type of expression construct employed.

In yet another embodiment of the invention, the expression construct may simply consist of naked recombinant DNA or plasmids. Transfer of the construct may be performed by any of the methods mentioned above which physically or chemically permeabilize the cell membrane. This is particularly applicable for transfer *in vitro* but it may be applied to *in vivo* use as well. Dubensky *et al.* (1984) successfully injected polyomavirus DNA in the form of calcium phosphate precipitates into liver and spleen of adult and newborn mice demonstrating active viral replication and acute infection. Benvenisty and Neshif (1986) also demonstrated that direct intraperitoneal injection of calcium phosphate-precipitated plasmids results in expression of the transfected genes. It is envisioned that DNA encoding a gene of interest may also be transferred in a similar manner *in vivo* and express the gene product.

In still another embodiment of the invention for transferring a naked DNA expression construct into cells may involve particle bombardment. This method depends on the ability to accelerate DNA-coated microprojectiles to a high velocity allowing them to pierce cell membranes and enter cells without killing them (Klein *et al.*, 1987). Several devices for accelerating small particles have been developed. One such device relies on a high voltage discharge to generate an electrical current, which in turn provides the motive force (Yang *et al.*, 1990). The microprojectiles used have consisted of biologically inert substances such as tungsten or gold beads.

Selected organs including the liver, skin, and muscle tissue of rats and mice have been bombarded *in vivo* (Yang *et al.*, 1990; Zelenin *et al.*, 1991). This may require surgical exposure of the tissue or cells, to eliminate any intervening tissue between the gun and the

target organ, *i.e.*, *ex vivo* treatment. Again, DNA encoding a particular gene may be delivered via this method and still be incorporated by the present invention.

In a further embodiment of the invention, the expression construct may be entrapped in a liposome. Liposomes are vesicular structures characterized by a phospholipid bilayer membrane and an inner aqueous medium. Multilamellar liposomes have multiple lipid layers
5 separated by aqueous medium. They form spontaneously when phospholipids are suspended in an excess of aqueous solution. The lipid components undergo self-rearrangement before the formation of closed structures and entrap water and dissolved solutes between the lipid bilayers (Ghosh and Bachhawat, 1991). Also contemplated are lipofectamine-DNA
10 complexes.

In certain embodiments of the invention, the liposome may be complexed with a hemagglutinating virus (HVJ). This has been shown to facilitate fusion with the cell membrane and promote cell entry of liposome-encapsulated DNA (Kaneda *et al.*, 1989). In other embodiments, the liposome may be complexed or employed in conjunction with
15 nuclear non-histone chromosomal proteins (HMG-I) (Kato *et al.*, 1991). In yet further embodiments, the liposome may be complexed or employed in conjunction with both HVJ and HMG-I. In that such expression constructs have been successfully employed in transfer and expression of nucleic acid *in vitro* and *in vivo*, then they are applicable for the present invention. Where a bacterial promoter is employed in the DNA construct, it also will be
20 desirable to include within the liposome an appropriate bacterial polymerase.

Other expression constructs which can be employed to deliver a nucleic acid encoding a particular gene into cells are receptor-mediated delivery vehicles. These take advantage of the selective uptake of macromolecules by receptor-mediated endocytosis in almost all eukaryotic cells. Because of the cell type-specific distribution of various
25 receptors, the delivery can be highly specific (Wu and Wu, 1993).

Receptor-mediated gene targeting vehicles generally consist of two components: a cell receptor-specific ligand and a DNA-binding agent. Several ligands have been used for receptor-mediated gene transfer. The most extensively characterized ligands are asialoorosomuroid (ASOR) (Wu and Wu, 1987) and transferrin (Wagner *et al.*, 1990).
30 Recently, a synthetic neoglycoprotein, which recognizes the same receptor as ASOR, has been used as a gene delivery vehicle (Ferkol *et al.*, 1993; Perales *et al.*, 1994) and epidermal

growth factor (EGF) has also been used to deliver genes to squamous carcinoma cells (Myers, EPO 0273085).

In other embodiments, the delivery vehicle may comprise a ligand and a liposome. For example, Nicolau *et al.* (1987) employed lactosyl-ceramide, a galactose-terminal
5 asialganglioside, incorporated into liposomes and observed an increase in the uptake of the insulin gene by hepatocytes. Thus, it is feasible that a nucleic acid encoding a particular gene also may be specifically delivered into a cell type by any number of receptor-ligand systems with or without liposomes.

In a particular example, the oligonucleotide may be administered in combination with
10 a cationic lipid. Examples of cationic lipids include, but are not limited to, lipofectin, DOTMA, DOPE, and DOTAP. The publication of W00071096, which is specifically incorporated by reference, describes different formulations, such as a DOTAP:cholesterol or cholesterol derivative formulation that can effectively be used for gene therapy. Other disclosures also discuss different lipid or liposomal formulations including nanoparticles and
15 methods of administration; these include, but are not limited to, U.S. Patent Publication 20030203865, 20020150626, 20030032615, and 20040048787, which are specifically incorporated by reference to the extent they disclose formulations and other related aspects of administration and delivery of nucleic acids. Methods used for forming particles are also disclosed in U.S. Patents 5,844,107, 5,877,302, 6,008,336, 6,077,835, 5,972,901, 6,200,801,
20 and 5,972,900, which are incorporated by reference for those aspects.

In certain embodiments, gene transfer may more easily be performed under *ex vivo* conditions. *Ex vivo* gene therapy refers to the isolation of cells from an animal, the delivery of a nucleic acid into the cells *in vitro*, and then the return of the modified cells back into an animal. This may involve the surgical removal of tissue/organs from an animal or the
25 primary culture of cells and tissues.

In one embodiment, the present invention provides a method of treating a subject afflicted with a denervating neuropathic state. A "denervating neuropathic state" refers to a condition in which there is a loss of nerve supply to one or more tissues as a result of a disease or injury. Denervating neuropathic states can result from degenerative motor neuron diseases, such
30 as myasthenia gravis, polio, amyotrophic lateral sclerosis (ALS), Friedreich's ataxia, spinal muscular atrophy, or spinocerebellar ataxia.

In one embodiment, the present invention provides a method of treating a subject suffering from myasthenia gravis by administering to the subject an agonist of miR-206 and/or miR-1. Myasthenia gravis (MG) is a neuromuscular disease leading to fluctuating muscle weakness and fatigability. It is an autoimmune disorder, in which weakness is caused by circulating antibodies that block acetylcholine receptors at the post-synaptic neuromuscular junction, inhibiting the stimulative effect of the neurotransmitter acetylcholine. Myasthenia is treated medically with cholinesterase inhibitors or immunosuppressants, and, in selected cases, thymectomy. The hallmark of myasthenia gravis is muscle weakness that increases during periods of activity and improves after periods of rest. Muscles that control eye and eyelid movement, facial expression, chewing, talking, and swallowing are especially susceptible. The muscles that control breathing and neck and limb movements can also be affected.

In another embodiment, the present invention includes a method of treating ALS in a subject in need thereof comprising administering to the subject an agonist of miR-206 and/or miR-1. ALS (also called Lou Gehrig's Disease, or Maladie de Charcot) is a progressive, usually fatal, neurodegenerative disease caused by the degeneration of motor neurons. As one of the motor neuron diseases, the disorder causes muscle weakness and atrophy throughout the body as both the upper and lower motor neurons degenerate, ceasing to send messages to muscles. Unable to function, the muscles gradually weaken, develop fasciculations (twitches) because of denervation, and eventually atrophy due to that denervation. The patient may ultimately lose the ability to initiate and control all voluntary movement except of the eyes. Riluzole, the first FDA-approved treatment for ALS, slows the degeneration of motor neurons, but does not reverse the damage that has already occurred. Other treatments for ALS are designed to relieve symptoms and improve the quality of life for patients.

In another embodiment, the present invention provides a method for treating spinal muscular atrophy in a subject in need thereof by administering an agonist of miR-206 and/or miR-1. Spinal muscular atrophy (SMA) is an autosomal recessive disorder which is the leading hereditary cause of infant death in humans. The disease is characterized by a progressive muscle weakness from proximal to distal with lower limbs more greatly affected than upper limbs. Three types of SMA have been described based on disease severity and age of onset. Type I affects approximately fifty percent of SMA patients with symptoms presenting within the first six months after birth. Death typically occurs within the first two years due to respiratory failure.

Type II SMA has an onset between six months and eighteen months of age, and length of survival is dependent on the severity of respiratory impairment. Type III SMA patients, who have symptom onset between eighteen months and early childhood, usually do not have a decrease in life expectancy, although most are wheel chair bound at some point in their disease progression. SMA is characterized by loss of alpha-motor neurons in the anterior horn of the spinal cord, which is correlated with muscle paralysis and atrophy. Currently, there are no effective therapeutics for SMA disease.

In still another embodiment, the present invention provides a method of treating Friedreich's ataxia in a subject in need thereof comprising administering to the subject an agonist of miR-206 and/or miR-1. Friedreich's ataxia is an autosomal recessive congenital disease that causes progressive damage to the nervous system resulting in symptoms ranging from gait disturbance and speech problems to heart disease. The ataxia of Friedreich's ataxia results from the degeneration of nerve tissue in the spinal cord, in particular sensory neurons essential (through connections with the cerebellum) for directing muscle movement of the arms and legs. The spinal cord becomes thinner and nerve cells lose some of their myelin sheath. Symptoms of Friedrich's ataxia include any combination, but not necessarily all of the following: muscle weakness in the arms and legs, loss of coordination, vision impairment, hearing loss, slurred speech, curvature of the spine (scoliosis), high plantar arches, diabetes, and heart disorders (*e.g.*, atrial fibrillation, and resultant tachycardia, and hypertrophic cardiomyopathy). The symptoms can be treated but there is no treatment for Friedrich's Ataxia at this time.

In yet another embodiment, the present invention provides a method of treating spinocerebellar ataxia in a subject in need thereof comprising administering to the subject an agonist of miR-206 and/or miR-1. Spinocerebellar ataxia (SCA) is a genetic disease characterized by slowly progressive incoordination of gait and often associated with poor coordination of hands, speech, and eye movements. Frequently, atrophy of the cerebellum occurs. There is no known cure for spinocerebellar ataxia, which is a progressive disease. As with other forms of ataxia, SCA results in unsteady and clumsy motion of the body due to a failure of the fine coordination of muscle movements, along with other symptoms. A person with this disease will usually end up needing to use a wheelchair, and eventually they may need assistance to perform daily tasks.

Denervating neuropathic states can also result from nerve injury, such as spinal cord or peripheral nerve injury, where one or more nerves are transected or crushed. Traumatic spinal cord injury can be classified into different types. Central Cord syndrome is associated with greater loss of upper limb function compared to lower limbs. The Brown-Séguard syndrome results from injury to one side with the spinal cord, causing weakness and loss of proprioception on the side of the injury and loss of pain and thermal sensation of the other side. The Anterior Spinal syndrome results from injury to the anterior part of the spinal cord, causing weakness and loss of pain and thermal sensations below the injury site but preservation of proprioception that is usually carried in the posterior part of the spinal cord. Tabes Dorsalis results from injury to the posterior part of the spinal cord, usually from infection diseases such as syphilis, causing loss of touch and proprioceptive sensation. Conus Medullaris syndrome results from injury to the tip of the spinal cord, located at L1 vertebra. Cauda Equina syndrome is an injury to the spinal roots below the L1 vertebra. Traumatic spinal cord injury and other types of nerve injury can be treated by agonists of miR-206 and/or miR-1, which promote reinnervation of skeletal muscle following injury.

In another embodiment of the invention, it is envisioned to use an agonist of miR-206 and/or miR-1 in combination with other therapeutic modalities. Thus, in addition to the miRNA agonists of the invention described herein, one may also provide to the subject "standard" pharmaceutical therapies. Such standard therapies will depend upon the particular denervating neuropathic state to be treated, but can include Riluzole, cholinesterase inhibitors (*e.g.* edrophonium chloride (Tensilon®, Reversol®), neostigmine, pyridostigmine, physostigmine, ambenonium, demarcarium, rivastigmine, phenanthrene derivatives, galantamine, piperidines, donepezil, and tacrine) and immunosuppressants (*e.g.* prednisone, cyclosporine, mycophenolate mofetil and azathioprine).

Combinations may be achieved by contacting skeletal muscle cells with a single composition or pharmacological formulation that includes both agents, or by contacting the cell with two distinct compositions or formulations, at the same time, wherein one composition includes an agonist of miR-206 and/or miR-1 and the other includes the second agent. Alternatively, the therapy using an miRNA agonist may precede or follow administration of the other agent(s) by intervals ranging from minutes to weeks. In embodiments where the other agent and miRNA agonists are applied separately to the cell, one would generally ensure that a

significant period of time did not expire between the time of each delivery, such that the agent and miRNA agonists would still be able to exert an advantageously combined effect on the cell. In such instances, it is contemplated that one would typically contact the cell with both modalities within about 12-24 hours of each other and, more preferably, within about 6-12 hours of each other, with a delay time of only about 12 hours being most preferred. In some situations, it may be desirable to extend the time period for treatment significantly, however, where several days (2, 3, 4, 5, 6 or 7) to several weeks (1, 2, 3, 4,5,6, 7 or 8) lapse between the respective administrations.

It also is conceivable that more than one administration of either a miRNA agonist, or the other agent will be desired. In this regard, various combinations may be employed. By way of illustration, where the miRNA agonist is "A" and the other agent/therapy is "B," the following permutations based on 3 and 4 total administrations are exemplary:

A/B/A B/A/B B/B/A A/A/B B/A/A A/B/B B/B/B/A B/B/A/B
 A/A/B/B A/B/A/B A/B/B/A B/B/A/A B/A/B/A B/A/A/B B/B/B/A
 A/A/A/B B/A/A/A A/B/A/A A/A/B/A A/B/B/B B/A/B/B B/B/A/B

Other combinations are likewise contemplated.

The present invention also contemplates methods for scavenging or clearing miR-206 and/or miR-1 agonists following treatment. In one embodiment, the method comprises overexpression of binding site regions for miR-206 and/or miR-1 in skeletal muscle cells using a muscle specific promoter. The binding site regions preferably contain a sequence of the seed region, the 5' portion of a miRNA spanning bases 2-8, for miR-206 and/or miR-1. In some embodiments, the binding site may contain a sequence from the 3' UTR of one or more targets of miR-206 and/or miR-1. For instance, in one embodiment, a binding site for miR-206 and/or miR-1 contains the 3' UTR of HDAC4. In another embodiment, a miR-206 and/or miR-1 inhibitor may be administered after a miR-206 and/or miR-1 agonist to attenuate or stop the function of the microRNA. Such inhibitors can include antagomirs, antisense, or inhibitory RNA molecules (*e.g.* siRNA or shRNA).

The present invention also encompasses pharmaceutical compositions comprising an agonist of miR-206 and/or miR-1 and a pharmaceutically acceptable carrier. Where clinical applications are contemplated, pharmaceutical compositions will be prepared in a form appropriate for the intended application. Generally, this will entail preparing compositions that

are essentially free of pyrogens, as well as other impurities that could be harmful to humans or animals.

Colloidal dispersion systems, such as macromolecule complexes, nanocapsules, microspheres, beads, and lipid-based systems including oil-in-water emulsions, micelles, mixed micelles, and liposomes, can be used as delivery vehicles for the agonists of microRNA function described herein. Commercially available fat emulsions that are suitable for delivering the nucleic acids of the invention to tissues, such as skeletal muscle tissue, include Intralipid®, Liposyn®, Liposyn® II, Liposyn® III, Nutrilipid, and other similar lipid emulsions. A preferred colloidal system for use as a delivery vehicle *in vivo* is a liposome (*i.e.*, an artificial membrane vesicle). The preparation and use of such systems is well known in the art. Exemplary formulations are also disclosed in US 5,981,505; US 6,217,900; US 6,383,512; US 5,783,565; US 7,202,227; US 6,379,965; US 6,127,170; US 5,837,533; US 6,747,014; and WO 03/093449, which are herein incorporated by reference in their entireties.

One will generally desire to employ appropriate salts and buffers to render delivery vectors stable and allow for uptake by target cells. Buffers also will be employed when recombinant cells are introduced into a patient. Aqueous compositions of the present invention comprise an effective amount of the delivery vehicle, dissolved or dispersed in a pharmaceutically acceptable carrier or aqueous medium. The phrases "pharmaceutically acceptable" or "pharmacologically acceptable" refers to molecular entities and compositions that do not produce adverse, allergic, or other untoward reactions when administered to an animal or a human. As used herein, "pharmaceutically acceptable carrier" includes solvents, buffers, solutions, dispersion media, coatings, antibacterial and antifungal agents, isotonic and absorption delaying agents and the like acceptable for use in formulating pharmaceuticals, such as pharmaceuticals suitable for administration to humans. The use of such media and agents for pharmaceutically active substances is well known in the art. Except insofar as any conventional media or agent is incompatible with the active ingredients of the present invention, its use in therapeutic compositions is contemplated. Supplementary active ingredients also can be incorporated into the compositions, provided they do not inactivate the nucleic acids of the compositions.

The active compositions of the present invention may include classic pharmaceutical

preparations. Administration of these compositions according to the present invention may be via any common route so long as the target tissue is available via that route. This includes oral, nasal, or buccal. Alternatively, administration may be by intradermal, transdermal, subcutaneous, intramuscular, intraperitoneal or intravenous injection, or by direct injection into skeletal muscle
5 tissue. Such compositions would normally be administered as pharmaceutically acceptable compositions, as described *supra*.

The active compounds may also be administered parenterally or intraperitoneally. By way of illustration, solutions of the active compounds as free base or pharmacologically acceptable salts can be prepared in water suitably mixed with a surfactant, such as
10 hydroxypropylcellulose. Dispersions can also be prepared in glycerol, liquid polyethylene glycols, and mixtures thereof and in oils. Under ordinary conditions of storage and use, these preparations generally contain a preservative to prevent the growth of microorganisms.

The pharmaceutical forms suitable for injectable use include, for example, sterile aqueous solutions or dispersions and sterile powders for the extemporaneous preparation of
15 sterile injectable solutions or dispersions. Generally, these preparations are sterile and fluid to the extent that easy injectability exists. Preparations should be stable under the conditions of manufacture and storage and should be preserved against the contaminating action of microorganisms, such as bacteria and fungi. Appropriate solvents or dispersion media may contain, for example, water, ethanol, polyol (for example, glycerol, propylene glycol, and
20 liquid polyethylene glycol, and the like), suitable mixtures thereof, and vegetable oils. The proper fluidity can be maintained, for example, by the use of a coating, such as lecithin, by the maintenance of the required particle size in the case of dispersion and by the use of surfactants. The prevention of the action of microorganisms can be brought about by various antibacterial and antifungal agents, for example, parabens, chlorobutanol, phenol, sorbic acid,
25 thimerosal, and the like. In many cases, it will be preferable to include isotonic agents, for example, sugars or sodium chloride. Prolonged absorption of the injectable compositions can be brought about by the use in the compositions of agents delaying absorption, for example, aluminum monostearate and gelatin.

Sterile injectable solutions may be prepared by incorporating the active compounds in
30 an appropriate amount into a solvent along with any other ingredients (for example as enumerated above) as desired, followed by filtered sterilization. Generally, dispersions are

prepared by incorporating the various sterilized active ingredients into a sterile vehicle which contains the basic dispersion medium and the desired other ingredients, *e.g.*, as enumerated above. In the case of sterile powders for the preparation of sterile injectable solutions, the preferred methods of preparation include vacuum-drying and freeze-drying techniques which yield a powder of the active ingredient(s) plus any additional desired ingredient from a previously sterile-filtered solution thereof.

The compositions of the present invention generally may be formulated in a neutral or salt form. Pharmaceutically-acceptable salts include, for example, acid addition salts (formed with the free amino groups of the protein) derived from inorganic acids (*e.g.*, hydrochloric or phosphoric acids, or from organic acids (*e.g.*, acetic, oxalic, tartaric, mandelic, and the like). Salts formed with the free carboxyl groups of the protein can also be derived from inorganic bases (*e.g.*, sodium, potassium, ammonium, calcium, or ferric hydroxides) or from organic bases (*e.g.*, isopropylamine, trimethylamine, histidine, procaine and the like).

Upon formulation, solutions are preferably administered in a manner compatible with the dosage formulation and in such amount as is therapeutically effective. The formulations may easily be administered in a variety of dosage forms such as injectable solutions, drug release capsules and the like. For parenteral administration in an aqueous solution, for example, the solution generally is suitably buffered and the liquid diluent first rendered isotonic for example with sufficient saline or glucose. Such aqueous solutions may be used, for example, for intravenous, intramuscular, subcutaneous and intraperitoneal administration. Preferably, sterile aqueous media are employed as is known to those of skill in the art, particularly in light of the present disclosure. By way of illustration, a single dose may be dissolved in 1 ml of isotonic NaCl solution and either added to 1000 ml of hypodermoclysis fluid or injected at the proposed site of infusion, (see for example, "Remington's Pharmaceutical Sciences" 15th Edition, pages 1035-1038 and 1570-1580). Pharmacological therapeutic agents and methods of administration, dosages, *etc.*, are well known to those of skill in the art (see for example, the "Physicians Desk Reference," Klaassen's "The Pharmacological Basis of Therapeutics," "Remington's Pharmaceutical Sciences," and "The Merck Index, Eleventh Edition," incorporated herein by reference in relevant parts), and may be combined with the invention in light of the disclosures herein. Suitable dosages include about 20 mg/kg to about 200 mg/kg, about 40 mg/kg to about 160 mg/kg, or about 80 mg/kg to about 100 mg/kg. Some

variation in dosage will necessarily occur depending on the condition of the subject being treated. The person responsible for administration will, in any event, determine the appropriate dose for the individual subject, and such individual determinations are within the skill of those of ordinary skill in the art. Moreover, for human administration, preparations should meet sterility, pyrogenicity, general safety and purity standards as required by FDA Office of Biologics standards.

Any of the compositions described herein may be comprised in a kit. In a non-limiting example, a miR-206 and/or miR-1 agonist is included in a kit. The kit may further include water and hybridization buffer to facilitate hybridization of the two strands of the miRNAs. The kit may also include one or more transfection reagent(s) to facilitate delivery of the polynucleotide agonists to cells.

The components of the kits may be packaged either in aqueous media or in lyophilized form. The container means of the kits will generally include at least one vial, test tube, flask, bottle, syringe or other container means, into which a component may be placed, and preferably, suitably aliquoted. Where there is more than one component in the kit (labeling reagent and label may be packaged together), the kit also will generally contain a second, third or other additional container into which the additional components may be separately placed. However, various combinations of components may be comprised in a vial. The kits of the present invention also will typically include a means for containing the nucleic acids, and any other reagent containers in close confinement for commercial sale. Such containers may include injection or blow-molded plastic containers into which the desired vials are retained.

When the components of the kit are provided in one and/or more liquid solutions, the liquid solution is an aqueous solution, with a sterile aqueous solution being particularly preferred. However, the components of the kit may be provided as dried powder(s). When reagents and/or components are provided as a dry powder, the powder can be reconstituted by the addition of a suitable solvent. It is envisioned that the solvent may also be provided in another container means.

The container means will generally include at least one vial, test tube, flask, bottle, syringe and/or other container means, into which the nucleic acid formulations are placed, preferably, suitably allocated. The kits may also comprise a second container means for containing a sterile, pharmaceutically acceptable buffer and/or other diluent.

Such kits may also include components that preserve or maintain the miRNAs/polynucleotides or that protect against their degradation. Such components may be RNase-free or protect against RNAses. Such kits generally will comprise, in suitable means, distinct containers for each individual reagent or solution.

5 A kit will also include instructions for employing the kit components as well the use of any other reagent not included in the kit. Instructions may include variations that can be implemented. A kit may also include utensils or devices for administering the miRNA agonist by various administration routes, such as parenteral or intramuscular administration.

The present invention also includes a method for diagnosing a denervating neuropathic
10 state in a subject. In one embodiment, the method comprises (a) obtaining a skeletal muscle tissue sample from the subject; (b) assessing activity or expression of miR-206 and/or miR-133b in said sample; and (c) comparing the activity or expression in step (b) with the activity or expression of miR-206 and/or miR-133b in a normal tissue sample, wherein an increase in the activity or expression of miR-206 and/or miR-133b as compared to the activity or expression of
15 miR-206 and/or miR-133b in a normal tissue sample is diagnostic of a denervating neuropathic state. In another embodiment, the method comprises (a) obtaining a skeletal muscle tissue sample from the subject; (b) assessing activity or expression of miR-1 and/or miR-133a in said sample; and (c) comparing the activity or expression in step (b) with the activity or expression of miR-1 and/or miR-133a in a normal tissue sample, wherein a decrease in the activity or
20 expression of miR-1 and/or miR-133a as compared to the activity or expression of miR-1 and/or miR-133a in a normal tissue sample is diagnostic of a denervating neuropathic state. The denervating neuropathic state can include spinal cord injury, myasthenia gravis, amyotrophic lateral sclerosis, Friedreich's ataxia, spinal muscular atrophy, and spinocerebellar ataxia.

In one embodiment, assessing miR-206 and/or miR-133b activity comprises assessing the
25 activity of one or more genes regulated by miR-206 and/or miR-133b. For instance, in some embodiments, the one or more genes regulated by miR-206 is HDAC4, Dach2, or myogenin. In another embodiment, assessing miR-1 and/or miR-133a activity comprises assessing the activity of one or more genes regulated by miR-1 and/or miR-133a. In another embodiment, the method further comprises administering to the subject a therapy for said denervating neuropathic state
30 and reassessing miR-206/miR-133b and/or miR-1/miR-133a expression or activity. The expression or activity of miR-206/miR-133b and/or miR-1/miR-133a obtained following

treatment can be compared to expression of these miRNAs in a normal tissue sample or a tissue sample obtained from the subject previously (*e.g.* prior to treatment).

The present invention further comprises methods for identifying modulators of neuromuscular synapse maintenance and regeneration. For instance, in one embodiment, the present invention provides a method for identifying a modulator of miR-206 and/or miR-1 activity in skeletal muscle. Identified agonists of the function of miR-206 and/or miR-1 are useful in the treatment of denervating neuropathic states, such as ALS or nerve injury. Modulators (*e.g.* agonists) of miR-206 and/or miR-1 can be included in pharmaceutical compositions for the treatment of denervating neuropathic states according to the methods of the present invention.

These assays may comprise random screening of large libraries of candidate substances; alternatively, the assays may be used to focus on particular classes of compounds selected with an eye towards structural attributes that are believed to make them more likely to inhibit the expression and/or function of miR-206 and/or miR-1.

To identify a modulator of miR-206 and/or miR-1, one generally will determine the function of miR-206 and/or miR-1 in the presence and absence of the candidate compound, optionally in the context of a neuromuscular synapse maintenance and regeneration cell or animal model. For example, a method generally comprises: (a) contacting a skeletal muscle cell with a candidate compound; (b) assessing miR-206 and/or miR-1 activity or expression; and (c) comparing the activity or expression in step (b) with the activity or expression in the absence of the candidate compound, wherein a difference between the measured activities or expression indicates that the candidate compound is a modulator of miR-206 and/or miR-1, and hence neuromuscular synapse maintenance and regeneration. Assays also may be conducted in isolated cells, organs, or in living organisms.

Assessing the activity or expression of miR-206 and/or miR-1 can comprise assessing the expression level of miR-206 and/or miR-1. Those in the art will be familiar with a variety of methods for assessing RNA expression levels including, for example, northern blotting or RT-PCR. Assessing the activity or expression of miR-206 and/or miR-1 can comprise assessing the activity of miR-206 and/or miR-1. In some embodiments, assessing the activity of miR-206 and/or miR-1 comprises assessing neuromuscular junction stability. In other embodiments, assessing the activity of miR-206 and/or miR-1 comprises assessing expression or activity of a

gene regulated by miR-206 and/or miR-1. Genes regulated by miR-206 and/or miR-1 include, for example, HDAC4, Dach2, and myogenin. Those in the art will be familiar with a variety of methods for assessing the activity or expression of genes regulated by miR-206 and/or miR-1. Such methods include, for example, northern blotting, RT-PCR, ELISA, or western blotting.

5 It will, of course, be understood that all the screening methods of the present invention are useful in themselves notwithstanding the fact that effective candidates may not be found. The invention provides methods for screening for such candidates, not solely methods of finding them.

As used herein the term "candidate compound" refers to any molecule that may
10 potentially modulate the neuromuscular synapse maintenance and regeneration function of miR-206 and/or miR-1. One will typically acquire, from various commercial sources, molecular libraries that are believed to meet the basic criteria for useful drugs in an effort to "brute force" the identification of useful compounds. Screening of such libraries, including combinatorially-generated libraries, is a rapid and efficient way to screen large number of related (and unrelated)
15 compounds for activity. Combinatorial approaches also lend themselves to rapid evolution of potential drugs by the creation of second, third, and fourth generation compounds modeled on active, but otherwise undesirable compounds. Non-limiting examples of candidate compounds that may be screened according to the methods of the present invention are proteins, peptides, polypeptides, polynucleotides, oligonucleotides or small molecules. Modulators of miR-206
20 and/or miR-1 may also be agonists or inhibitors of upstream regulators of miR-206 and/or miR-1.

A quick, inexpensive and easy assay to run is an *in vitro* assay. Such assays generally use isolated molecules, can be run quickly and in large numbers, thereby increasing the amount of information obtainable in a short period of time. A variety of vessels may be used to run the
25 assays, including test tubes, plates, dishes and other surfaces such as dipsticks or beads. For example, one may assess the hybridization of an oligonucleotide to a target miRNA.

A technique for high throughput screening of compounds is described in WO 84/03564. Large numbers of small compounds may be synthesized on a solid substrate, such as plastic pins or some other surface. Such molecules can be rapidly screened for their ability to hybridize to
30 miR-206 and/or miR-1.

The present invention also contemplates the screening of compounds for their ability to modulate miR-206 and/or miR-1 expression and function in cells. Various cell lines, including those derived from skeletal muscle cells (*e.g.* C2C12 cells), can be utilized for such screening assays, including cells specifically engineered for this purpose.

5 *In vivo* assays involve the use of various animal models of neuromuscular synapse maintenance and regeneration (*e.g.* G93A-SOD1 transgenic mice) . Due to their size, ease of handling, and information on their physiology and genetic make-up, mice are a preferred embodiment, especially for transgenics. However, other animals are suitable as well, including rats, rabbits, hamsters, guinea pigs, gerbils, woodchucks, cats, dogs, sheep, goats, pigs, cows,
10 horses and monkeys (including chimps, gibbons and baboons). Assays for modulators may be conducted using an animal derived from any of these species, including those modified to provide a model of neuromuscular synapse maintenance and regeneration.

Treatment of animals with test compounds will involve the administration of the compound, in an appropriate form, to the animal. Administration will be by any route that could
15 be utilized for clinical purposes. Determining the effectiveness of a compound *in vivo* may involve a variety of different criteria, including but not limited to alteration of synapse architecture or signaling. Also, measuring toxicity and dose response can be performed in animals in a more meaningful fashion than in *in vitro* or *in cyto* assays.

The present invention includes a method of regulating expression of HDAC4 in a cell
20 comprising contacting the cell with a modulator of a miR-206 and/or miR-1. In one embodiment, the expression of HDAC4 is decreased in the cell following administration of a miR-206 and/or miR-1 agonist. In another embodiment, the expression of HDAC4 is increased in the cell following administration of a miR-206 and/or miR-1 inhibitor. In certain embodiments, the cell is a skeletal muscle cell.

25 In another embodiment, the present invention provides a method of attenuating or eliminating the expression or activity of miR-206 in a cell by delivering to the cell an inhibitor of miR-206. The cell may be *in vitro* or *in vivo*. Inhibitors of miR-206 can include antisense oligonucleotides, antagomirs, and inhibitory RNA molecules (*e.g.* shRNA and siRNA). Antisense oligonucleotides may comprise a sequence that is at least partially complementary to a
30 mature miR-206 sequence, *e.g.* at least about 75%, 80%, 85%, 90%, 95%, 96%, 97%, 98%, or 99% complementary to a mature miR-206 sequence. In some embodiments, the antisense

oligonucleotide may be substantially complementary to a mature miR-206 sequence, that is at least about 95%, 96%, 97%, 98%, or 99% complementary to a target polynucleotide sequence. In one embodiment, the antisense oligonucleotide comprises a sequence that is 100% complementary to a mature miR-206 sequence. In some embodiments, the antisense oligonucleotides are antagomirs. “Antagomirs” are single-stranded, chemically-modified ribonucleotides that are at least partially complementary to the miRNA sequence. Antagomirs may comprise one or more modified nucleotides, such as 2'-O-methyl-sugar modifications. In some embodiments, antagomirs comprise only modified nucleotides. Antagomirs may also comprise one or more phosphorothioate linkages resulting in a partial or full phosphorothioate backbone. To facilitate *in vivo* delivery and stability, the antagomir may be linked to a cholesterol or other moiety at its 3' end. Antagomirs suitable for inhibiting miRNAs may be about 15 to about 50 nucleotides in length, more preferably about 18 to about 30 nucleotides in length, and most preferably about 20 to about 25 nucleotides in length. “Partially complementary” refers to a sequence that is at least about 75%, 80%, 85%, 90%, 95%, 96%, 97%, 98%, or 99% complementary to a target polynucleotide sequence. The antagomirs may be at least about 75%, 80%, 85%, 90%, 95%, 96%, 97%, 98%, or 99% complementary to a mature miR-206 sequence. In some embodiments, the antagomir may be substantially complementary to a mature miR-206 sequence, that is at least about 95%, 96%, 97%, 98%, or 99% complementary to a target polynucleotide sequence. In other embodiments, the antagomirs are 100% complementary to the mature miR-206 sequence.

Another approach for inhibiting the function of miR-206 is administering an inhibitory RNA molecule having a double stranded region that is at least partially identical and partially complementary to a mature sequence of miR-206. The inhibitory RNA molecule may be a double-stranded, small interfering RNA (siRNA) or a short hairpin RNA molecule (shRNA) comprising a stem-loop structure. The double-stranded regions of the inhibitory RNA molecule may comprise a sequence that is at least partially identical and partially complementary, *e.g.* about 75%, 80%, 85%, 90%, 95%, 96%, 97%, 98%, or 99% identical and complementary, to the mature miR-206 sequence. In some embodiments, the double-stranded regions of the inhibitory RNA comprise a sequence that is at least substantially identical and substantially complementary to the mature miR-206 sequence. “Substantially identical and substantially complementary” refers to a sequence that is at least about 95%, 96%, 97%, 98%, or 99% identical and

complementary to a target polynucleotide sequence. In other embodiments, the double-stranded regions of the inhibitory RNA molecule may contain 100% identity and complementarity to the miR-206 sequence.

5 The following examples are included to further illustrate various aspects of the invention. It should be appreciated by those of skill in the art that the techniques disclosed in the examples which follow represent techniques and/or compositions discovered by the inventor to function well in the practice of the invention, and thus can be considered to constitute preferred modes for its practice. However, those of skill in the art should, in light of the present disclosure, appreciate that many changes can be made in the specific
10 embodiments which are disclosed and still obtain a like or similar result without departing from the spirit and scope of the invention.

EXAMPLES

15 **Example 1. The slow skeletal muscle-enriched miR-206 is upregulated in denervated skeletal muscle**

MiR-206 is a muscle-specific miRNA that is closely related in sequence to miR-1 and shares the same seed region. In contrast to miR-1, which is expressed in the heart and skeletal muscle, miR-206 is expressed solely in skeletal muscle. Northern blot analysis of different skeletal muscles revealed that miR-206 is highly enriched in muscle groups that contain slow
20 fibers such as the soleus (Figure 1A). MiR-1 is expressed at similar levels in all muscle groups (Figure 1B).

MiRNA expression profiles of skeletal muscles from the lower limbs of normal adult mice and mice subjected to surgical resection of the sciatic nerve for 10 days were compared. Of 320 miRNAs tested, levels of 16 miRNAs were significantly affected (up or downregulated >2-
25 fold) in response to denervation. MiR-206 was one of the most dramatically upregulated miRNAs in denervated muscle. Northern blot (Figure 1B) and real time PCR (Figure 1C) confirmed that miR-206 was upregulated following denervation. Upregulation was dramatic in three muscles that contain predominantly fast-twitch fibers, extensor digitorum longus (EDL), tibialis anterior (TA) and gastrocnemius/plantaris (G/P) (Figure 1B). MiR-206 levels were
30 higher in normally innervated soleus, which contains predominantly slow myofibers, and upregulation following denervation was correspondingly less striking. Consistent with its

transcription from the same promoter as miR-206, miR-133b was also upregulated following denervation, whereas miR-1 and miR-133a were downregulated approximately 50 percent in response to denervation (Figure 1B and 1C). These results indicate that miR-206 may play a role in muscle repair after nerve injury. In addition, the data suggest that although miR-206 and miR-1 are similar in sequence, the expression pattern and differential response to various stimuli suggest unique functions for these two miRNAs.

Example 2. Delayed re-innervation of skeletal muscle in miR-206 knockout mice after nerve injury

10 To determine the *in vivo* function of miR-206, miR-206 knockout mice were generated. MiR-206 is transcribed as a bicistronic pre-miRNA with miR-133b. The targeting strategy was designed to abolish the expression of miR-206 and retain the expression of miR-133b (Figure 2A and B). The 2.7-kb 5' arm was amplified from 129SvEv genomic DNA and digested with Sac II and Not I and ligated into pGKNeo-F2L2DTA targeting vector. The 2.1-kb 3' arm was digested
15 with Hind III and Eco RV and ligated between the neomycin resistance and DTA cassettes of the targeting vector. Targeted ES-cells were identified by Southern blotting with 5' and 3' external probes. One clone with a properly targeted miR-206 allele was used for injection into 3.5 day C57BL/6 blastocysts and the resulting chimeras were bred to C57BL/6 females for germline transmission.

20 Southern blot of genomic DNA from wild-type and miR-206 heterozygotes confirmed correct targeting and germline transmission of the mutant allele (Figure 2C). The absence of mature miR-206 in the skeletal muscle of mutant mice was confirmed by Northern blot analysis (Figure 2D). Deletion of miR-206 had no effect on expression of linked pre-miR-133b or the closely related miR-1-2 or miR-1-2 (Figure 2E). Mice homozygous for the targeted deletion of
25 miR-206 were viable and showed no gross abnormalities in weight, behavior, or the overall architecture or fiber-type distribution of skeletal muscle as seen by H&E and metachromatic ATPase staining (Figure 2F).

A transcript derived from the miR-206/133b locus was originally identified as a synapse-associated non-coding RNA (referred to as 7H4) by Merlie and colleagues (Velleca *et al.*, 1994).
30 Presumably 7H4 is selectively transcribed by myonuclei associated with the neuromuscular junction (NMJ), as has been shown for genes encoding neurotransmitter receptor genes and other

components of the postsynaptic apparatus (Sanes *et al.*, 1991; Sunesen and Changeux, 2003).

Although the reported 7H4 sequence did not include miR-206, RT-PCR demonstrated that miR-206 sequences are included in this transcript and confirmed that miR-206, like 7H4, is enriched in synaptic regions of muscle fibers (data not shown). Therefore, the original 7H4 RNA (Velleca

5 *et al.*, 1994) appears to represent a partially processed pri-miRNA from the miR-206/133b locus.

These results, along with the lack of any obvious phenotype in muscle structure or function,

focused our attention on the NMJ. The architecture of NMJs in the TA, EDL, and soleus

muscles of neonatal and adult wild-type and miR-206^{-/-} mice was examined. The post-synaptic

membrane was visualized using fluorescently-tagged Bungarotoxin (BTX), which binds to

10 acetylcholine receptors (AChRs). The motor axon and the nerve terminal were detected with

antibodies to neurofilament proteins and antibodies to the synaptic vesicle protein,

synaptotagmin 2 (ZNP) (Fox *et al.*, 2007), respectively. The NMJs of neonatal and adult mutant

mice showed no obvious differences when compared to age-matched wild-type NMJs (data not

shown). Thus, miR-206 is dispensable for formation and maturation of the NMJ.

15 Given the robust upregulation of miR-206 in denervated muscle, we next asked whether

miR-206 might regulate reinnervation following nerve injury. The sciatic nerve of miR-206^{-/-}

and control wild-type littermates was cut in the mid-thigh and reinnervation of the TA muscle

was assessed 1-8 weeks later. Regenerating axons preferentially reinnervate original synaptic

sites following denervation (Sanes and Lichtman, 1999), so the number of postsynaptic sites

20 apposed by nerve was quantified. Because the post-synaptic AChRs remain largely intact

following denervation, reinnervation can be accurately assessed by the superimposition of BTX

staining (red) with ZNP staining (green). In wild-type mice, reinnervation began between 2 and

3 weeks after denervation, and was nearly complete by 5 weeks post-injury (Figure 3A and B).

In contrast, reinnervation of miR-206^{-/-} TA muscles did not begin until 3 weeks post-injury, and

25 remained retarded at 5 weeks-post injury (Figure 3A and B). Reinnervation was also delayed

when the nerve was crushed rather than cut; in this procedure, no gap in the nerve is generated

and regeneration to targets occurs more rapidly than after nerve cut (Figure 3C). Similar results

were obtained in the gastrocnemius and EDL muscles (data not shown). Thus, in several

muscles and following two types of nerve injury, reinnervation was significantly delayed in the

30 absence of miR-206, suggesting that miR-206 has an essential role in regulating re-innervation of

neuromuscular junctions following injury.

Successful reinnervation following nerve transection involves a series of steps. First, a growth program is triggered in axotomized neurons and their axons regenerate through the distal stump to reach the muscle. As expected, these steps were unaffected in the mutant animals as a similar number of nerve fibers were observed in wild-type and miR-206^{-/-} nerves, even though
5 few NMJs had yet formed in the mutant muscle (data not shown). These results indicate that axonal regeneration per se was unimpaired in the miR-206 knockout animals.

Another set of steps occurs intramuscularly when axons branch, contact and re-occupy muscle fibers, and finally form new nerve terminals specialized for neurotransmitter release. The prolonged delay in reinnervation in the absence of miR-206 suggests that miR-206 regulates a
10 signal emanating from muscle that influences interaction of the motor nerve with the NMJ following injury. Consistent with this conclusion, reinnervation of original synaptic sites on miR-206^{-/-} muscle fibers was aberrant in multiple ways. First, many synaptic sites were only partially re-occupied by the regenerated nerve in the mutant mice. Second, levels of synaptotagmin 2 (ZNP) were lower in the terminal regions of miR-206^{-/-} than in control mice.
15 Conversely, in preterminal regions of motor axons, levels of synaptotagmin 2 were higher in mutants than in controls. Thus, the vesicles fail to aggregate properly in regenerated nerve terminals of mutants. Finally, motor axons often sprouted beyond miR-206^{-/-} NMJs, suggesting a possible lack of “stop” signals emanating from the muscle (data not shown).

20 **Example 3. MiR-206 targets HDAC4 in skeletal muscles**

Among the many computationally predicted targets of miR-206, histone deacetylase 4 (HDAC4) mRNA is among the strongest. The 3' UTR of the mouse *Hdac4* mRNA contains two evolutionarily conserved sequences with perfect complementarity to the seed sequence of miR-206 (Figure 4A). Moreover, HDAC4 has been implicated in the control of neuromuscular gene
25 expression (Cohen *et al.*, 2005, Tang *et al.*, 2008). Also, the closely related miRNA, miR-1, has been shown to inhibit translation of HDAC4 mRNA *in vitro* (Chen *et al.*, 2006). To test if miR-206 was capable of repressing HDAC4 translation, the 3' UTR of HDAC4 mRNA was cloned downstream of a luciferase reporter under control of the CMV promoter. Transfection of increasing amounts of miR-206 resulted in a dose-dependent decrease in luciferase activity, and
30 mutation of the miR-206 target sequences in the HDAC4 3'UTR prevented repression by miR-206 (Figure 4B). HDAC4 protein expression was increased in skeletal muscle of miR-206^{-/-}

animals compared to wild-type controls (Figure 4C). *Hdac4* mRNA levels were not changed in miR-206 $-/-$ mice, indicating that miR-206 acts in this instance by translational inhibition rather than by mRNA destabilization (Valencia-Sanchez *et al.*, 2006) (Figure 4D). Previous work has demonstrated that HDAC4 induces myogenin expression through the repression of *Dach2* expression, a repressor of myogenin (Cohen *et al.*, 2007, Tang *et al.*, 2009). As expected, *Dach2* transcripts were decreased and myogenin transcripts were increased following denervation in miR-206 $-/-$ mice, consistent with increased HDAC4 protein expression and enhanced repression of signaling downstream of HDAC4 in denervated miR-206 $-/-$ mice (Figure 4E and F).

To test whether HDAC4 mediates effects of miR-206 in muscle, mice with a conditional *Hdac4* null allele in which loxP sites flanked exon 6 of the *Hdac4* gene were generated, and the allele in skeletal muscle was deleted using transgenic mice that express Cre recombinase specifically in this tissue (HDAC4 mKO) (Potthoff *et al.*, 2007, Li *et al.*, 2005). NMJs formed and matured normally in the absence of HDAC4 (data not shown). However, muscles of HDAC4 mutant mice were reinnervated more rapidly than those of controls following nerve crush or cut (Figure 4G), a phenotype opposite that of miR-206 $-/-$ mice. Likewise, synaptic sites were better covered by regenerating nerve terminals in HDAC4 mutants than in controls, whereas deletion of miR-206 hampered complete occupancy of synaptic sites. These findings are consistent with the conclusion that miR-206 functions to counter-act the negative influence of HDAC4 on reinnervation following injury.

Example 4. Upregulation of miR-206 in a mouse model of amyotrophic lateral sclerosis

In an effort to identify miRNAs that are involved in the pathological progression of amyotrophic lateral sclerosis (ALS), a disease which results in denervation of muscles, a miRNA array profiling of GP muscles of G93A-SOD1 transgenic mice, a recognized mouse model of ALS (Son *et al.*, 2007), was performed. Hemizygous G93A-SOD1 transgenic mice develop progressive neuromuscular deficits by six months, displaying paralysis in one or more limbs soon thereafter and death by nine months (Puttapparthi *et al.*, 2002). The array was performed on the muscles of 7 month-old G93A-SOD1 transgenic and wild-type mice. Among the many miRNAs that were up and down-regulated in the GP muscles of the G93A-SOD1 mice, miR-206 was found to be the most upregulated (Figure 5A). Northern blot analysis confirmed the array results and quantification of the bands revealed an approximate 9-fold increase in miR-206

expression and 2-fold decrease in miR-1 expression in the end-stage ALS mice (Figure 5B and data not shown). Treatment of C2C12 muscle cells with Riluzole, a therapeutic drug used to slow the progression of ALS (McGeer and McGeer, 2005), decreased the expression of miR-206 and increased the expression of miR-1 (data not shown).

5 To further elucidate the role of miR-206 in muscle degeneration, double mutant mice were generated by crossing miR-206 mutant animals with G93A-SOD1 animals. ALS pathogenesis was increased in the miR-206/G93A-SOD1 double mutant mice. Figure 5C depicts a representative image of a G93A-SOD1 mouse and a miR-206/G93A-SOD1 double mutant mouse. Note the enhanced paralysis of the hind limbs in the double mutant mouse. Muscle
10 degeneration was also increased in miR-206/G93A-SOD1 double mutant mice as evidenced by hematoxylin and eosin (H&E) staining of gastrocnemius/plantaris muscles of wild-type, miR-206 knockouts, G93A-SOD1 animals, and miR-206/ G93A-SOD1 double mutant mice (Figure 5D). These results indicate that loss of miR-206 exacerbates neuromuscular degeneration, suggesting that manipulation of miR-206 expression may be a viable therapeutic approach to the
15 treatment of neurodegenerative disorders, such as ALS.

Dysregulation of protein-coding genes in mouse models and patients with ALS has been well described (Boillee *et al.*, 2006; Gonzalez de Aguilar *et al.*, 2007). However, to date the expression profile of miRNAs in ALS has not been reported. We found that the expression of several miRNAs, most notably miR-1 and miR-206, is significantly changed in the muscles of
20 G93A-SOD1 transgenic mice, a recognized mouse model for ALS. Although there appears to be a requirement for damage to motor neurons to initiate the ALS phenotype, other cell types are clearly involved in the pathological progression of the disease (Boillee *et al.*, 2006b). These observations support a role for non-neuronal mRNAs; as well as, miRNAs in impacting the pathological gene networks seen in ALS.

25 Several mechanisms have been proposed to contribute to the progression of ALS, including oxidative damage, glutamate excitotoxicity, and axonal retrograde transport defects (Dunckley *et al.*, 2007). Our findings demonstrate that a change in the expression of miRNAs is also a likely mechanism contributing to the progression of ALS. While the exact molecular mechanisms that result in motor neuron degeneration in ALS remain vague, it is clear
30 that a common convergence and an initial pathological hallmark of the disease is the denervation of target muscle. Therefore, successful therapeutics should target these early steps in the

progression of the disease. The robust increase in the expression of miR-206 in denervated muscle, as well as in G93ASOD1 mice suggests that manipulation of the expression of miR-206 represents a novel potential therapeutic target to treat the clinical symptoms associated with ALS and other motor neuron diseases with dysfunction of the neuromuscular junction.

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* * * * *

All publications, patents, and patent applications discussed and cited herein are incorporated herein by reference in their entireties. All of the compositions and methods disclosed and claimed herein can be made and executed without undue experimentation in light of the present disclosure. While the compositions and methods of this invention have been described in terms of preferred embodiments, it will be apparent to those of skill in the art that variations may be applied to the compositions and methods, and in the steps or in the sequence of steps of the methods described herein without departing from the concept, spirit and scope of the invention. More specifically, it will be apparent that certain agents which are both chemically and physiologically related may be substituted for the agents described herein while the same or similar results would be achieved. All such similar substitutes and modifications apparent to those skilled in the art are deemed to be within the spirit, scope and concept of the invention as defined by the appended claims.

The use of the word "a" or "an" when used in conjunction with the term "comprising" in the claims and/or the specification may mean "one," but it is also consistent with the meaning of "one or more," "at least one," and "one or more than one." It is contemplated that any embodiment discussed herein can be implemented with respect to any method or composition of the invention, and vice versa. Furthermore, compositions and kits of the invention can be used to achieve methods of the invention. Throughout this application, the term "about" is used to indicate that a value includes the standard deviation of error for the device or method being employed to determine the value.

The use of the term "or" in the claims is used to mean "and/or" unless explicitly indicated to refer to alternatives only or the alternatives are mutually exclusive, although the disclosure supports a definition that refers to only alternatives and "and/or."

As used in this specification and claim(s), the words "comprising" (and any form of comprising, such as "comprise" and "comprises"), "having" (and any form of having, such as

"have" and "has"), "including" (and any form of including, such as "includes" and "include") or "containing" (and any form of containing, such as "contains" and "contain") are inclusive or open-ended and do not exclude additional, unrecited elements or method steps.

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The following references, to the extent that they provide exemplary procedural or other details supplementary to those set forth herein, are specifically incorporated herein by reference.

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WHAT IS CLAIMED IS:

1. A method of treating a subject afflicted with a denervating neuropathic state comprising administering to the subject an agonist of miR-206 and/or miR-1.
2. The method of claim 1, wherein said agonist is a polynucleotide comprising a mature sequence of miR-206 and/or miR-1.
3. The method of claim 2, wherein said agonist is a polynucleotide comprising a sequence selected from the group consisting of SEQ ID NO: 2 and/or SEQ ID NO: 4.
4. The method of claim 2, wherein said agonist is formulated in a lipid delivery vehicle.
5. The method of claim 2, wherein said agonist is encoded by an expression vector.
6. The method of claim 5, wherein said agonist is under the control of a muscle-specific promoter.
7. The method of claim 1, wherein the denervating neuropathic state is spinal cord injury, myasthenia gravis, amyotrophic lateral sclerosis, Friedreich's ataxia, spinal muscular atrophy, or spinocerebellar ataxia.
8. The method of claim 1 further comprising administering to the subject a second therapy for said denervating neuropathic state.
9. The method of claim 8, wherein said second therapy is selected from the group consisting of Riluzole, cholinesterase inhibitors, and immunosuppressants.

10. The method of claim 1, wherein the agonist is administered by an oral, transdermal, or intravenous route of administration or direct injection into skeletal muscle tissue.
11. A method for diagnosing a denervating neuropathic state in a subject comprising:
 - (a) obtaining a skeletal muscle tissue sample from the subject;
 - (b) assessing activity or expression of miR-206 and/or miR-133b in said sample; and
 - (c) comparing the activity or expression in step (b) with the activity or expression of miR-206 and/or miR-133b in a normal tissue sample, wherein an increase in the activity or expression of miR-206 and/or miR-133b as compared to the activity or expression of miR-206 and/or miR-133b in a normal tissue sample is diagnostic of a denervating neuropathic state.
12. The method of claim 11, wherein the denervating neuropathic state is spinal cord injury, myasthenia gravis, amyotrophic lateral sclerosis, Friedreich's ataxia, spinal muscular atrophy, or spinocerebellar ataxia.
13. The method of claim 11, wherein assessing miR-206 and/or miR-133b activity comprises assessing the activity of one or more genes regulated by miR-206 and/or miR-133b.
14. The method of claim 13, wherein one or more genes regulated by miR-206 is HDAC4, Dach2, or myogenin.
15. A method for identifying a modulator of miR-206 and/or miR-1 activity in skeletal muscle comprising:
 - (a) contacting a skeletal muscle cell with a candidate compound;
 - (b) assessing miR-206 and/or miR-1 activity or expression; and
 - (c) comparing the activity or expression in step (b) with the activity or expression in the absence of the candidate compound,
wherein a difference between the measured activities or expression indicates that the candidate compound is a modulator of miR-206 and/or miR-1.

16. The method of claim 15, wherein the cell is contacted with the candidate compound *in vitro* or *in vivo*.
17. The method of claim 15, wherein the candidate compound is a peptide, polypeptide, polynucleotide, or small molecule.
18. A pharmaceutical composition comprising an agonist of miR-206 and/or miR-1 and a pharmaceutically acceptable carrier.

FIGURE 1

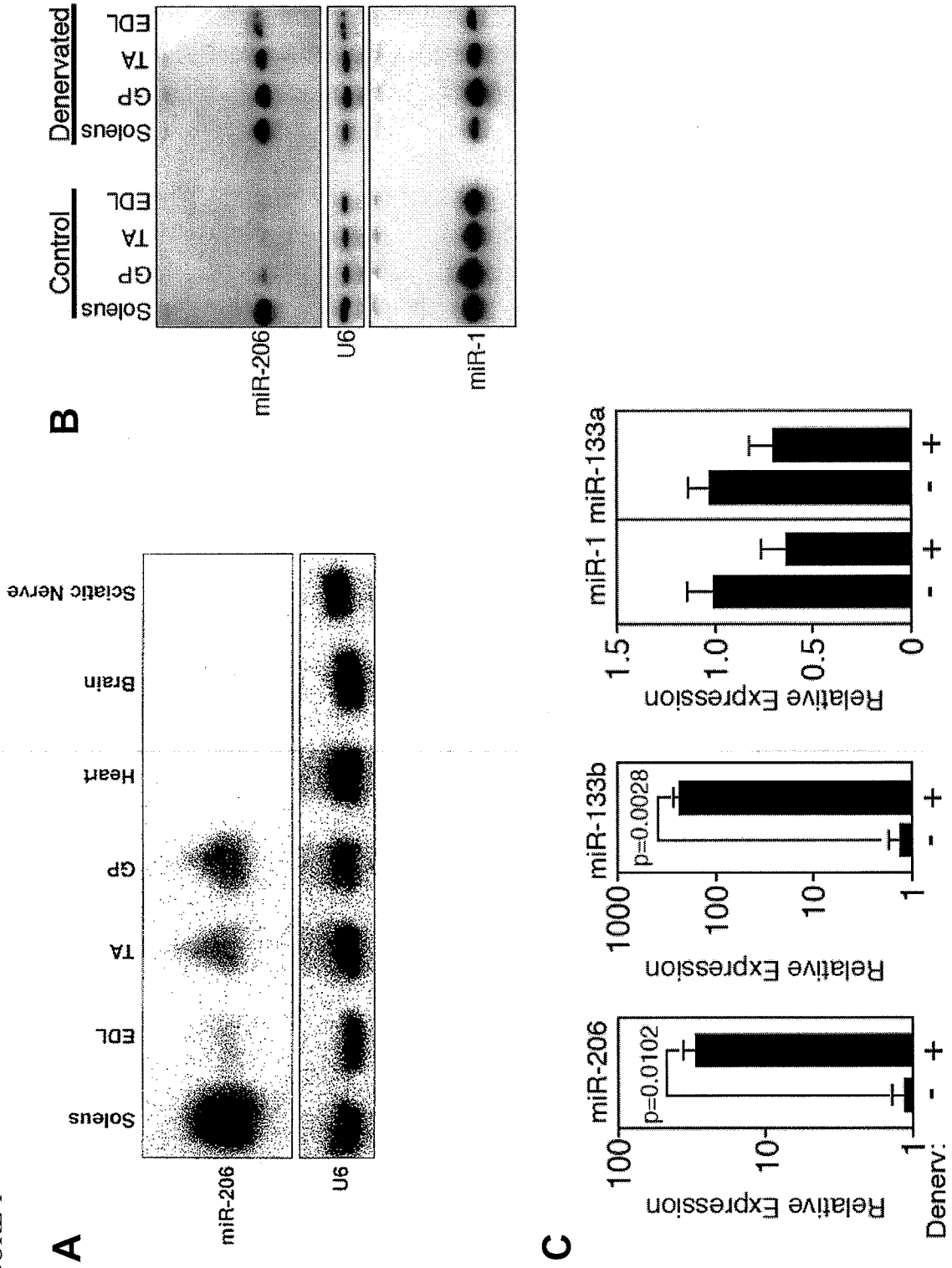


FIGURE 2A-D

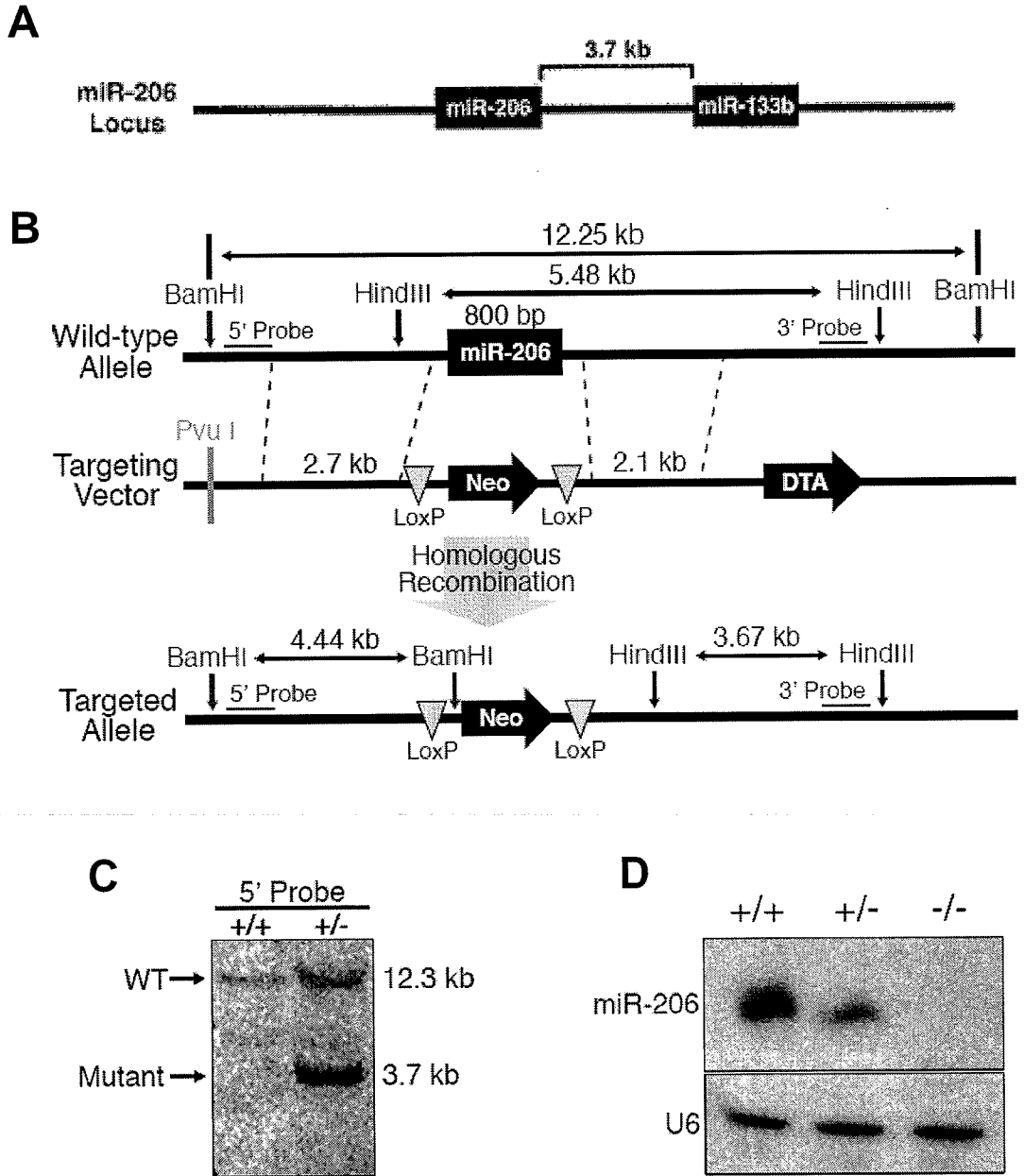


FIGURE 2E-F

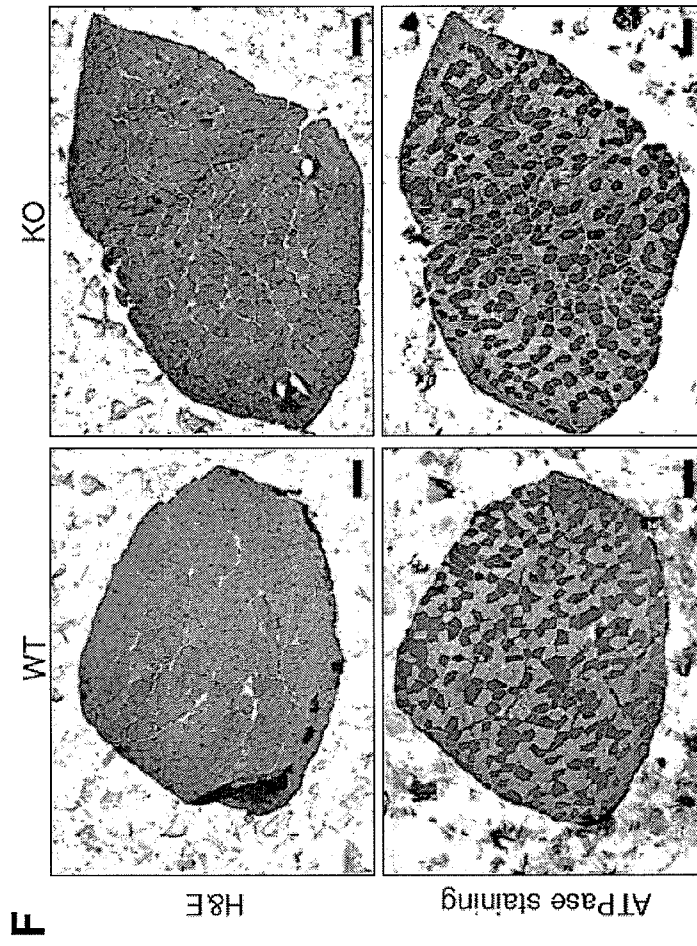
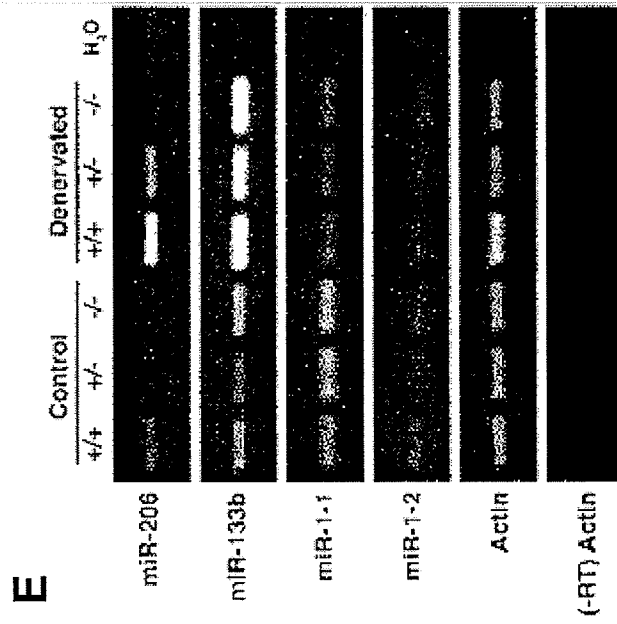


FIGURE 3A-B

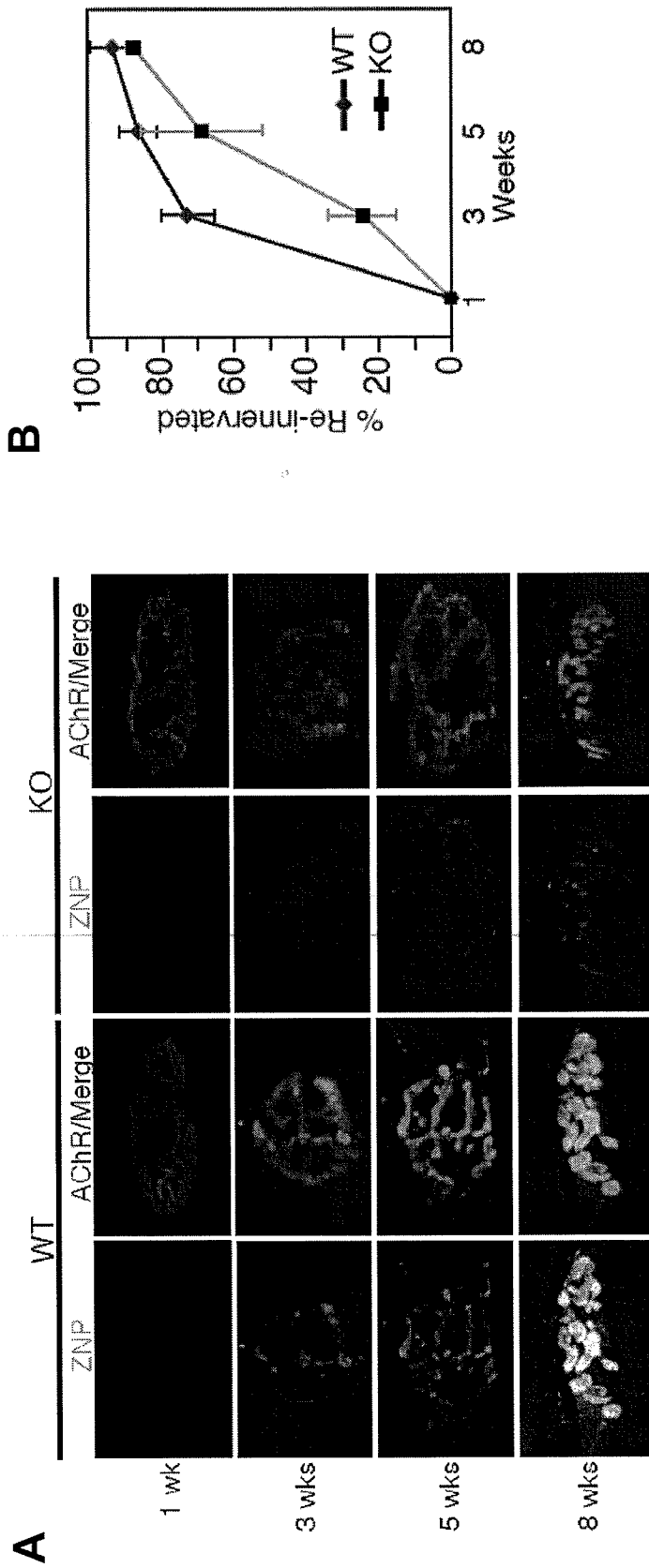


FIGURE 3C

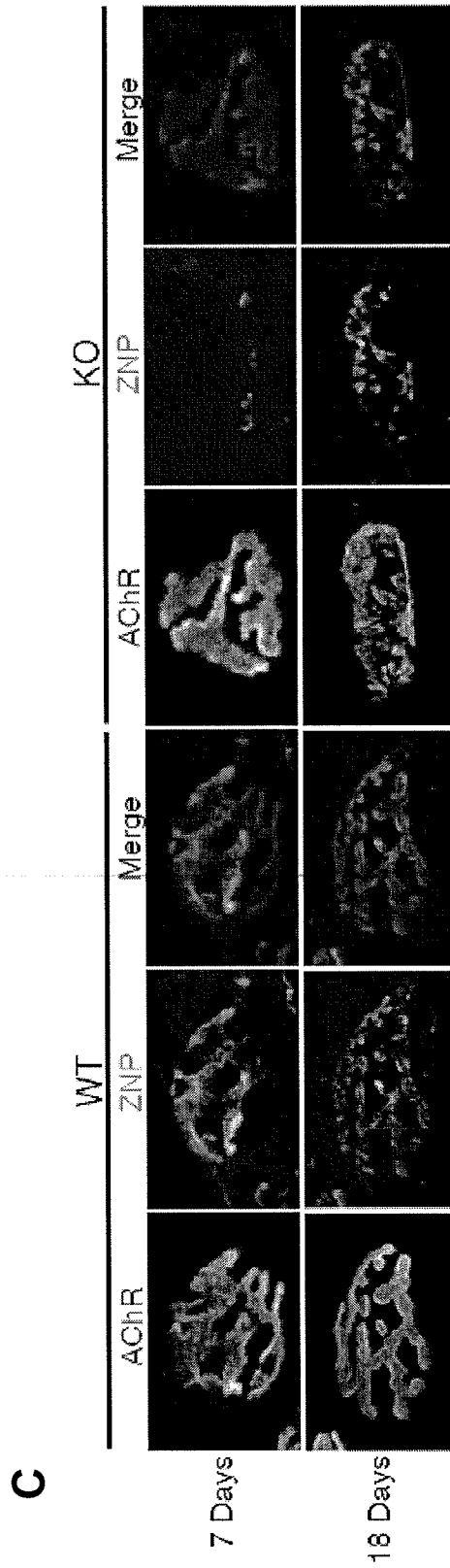


FIGURE 4A-B

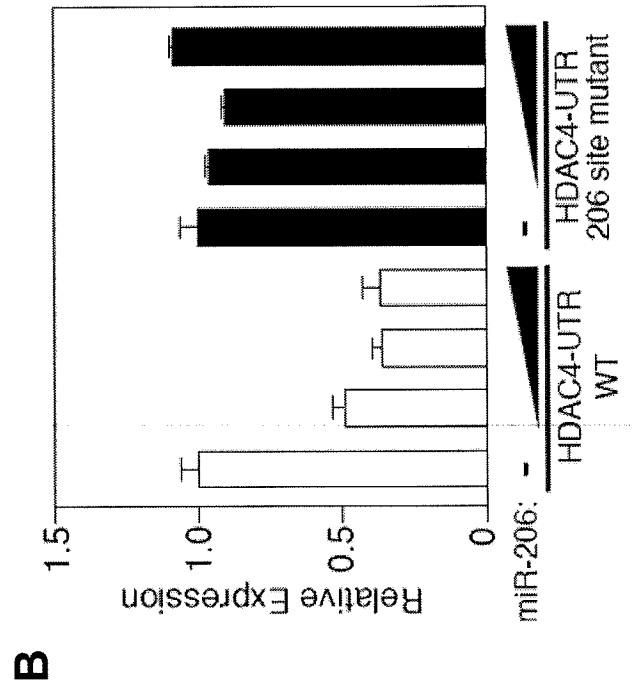
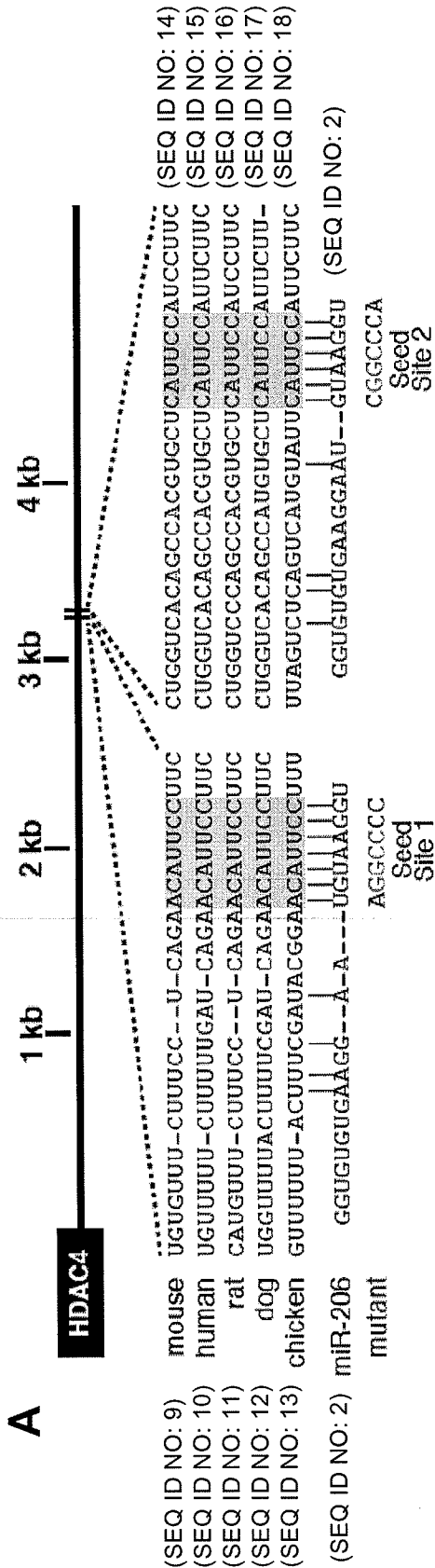
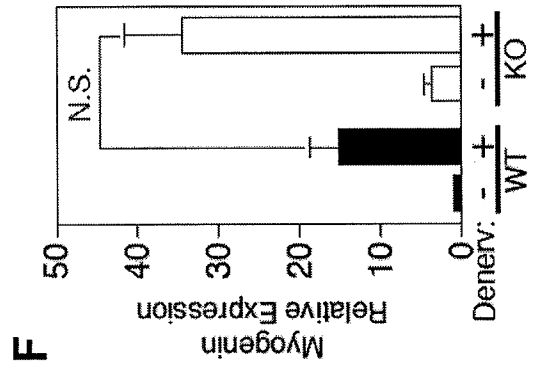
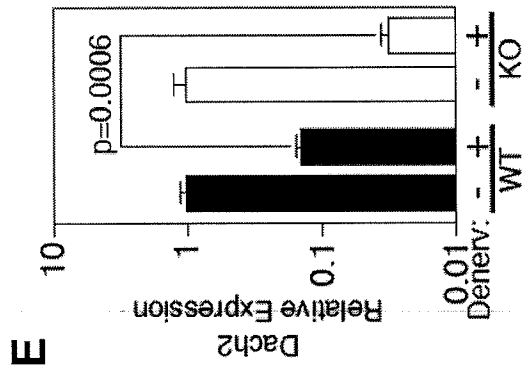
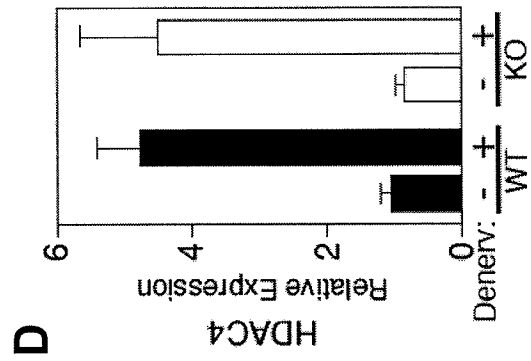
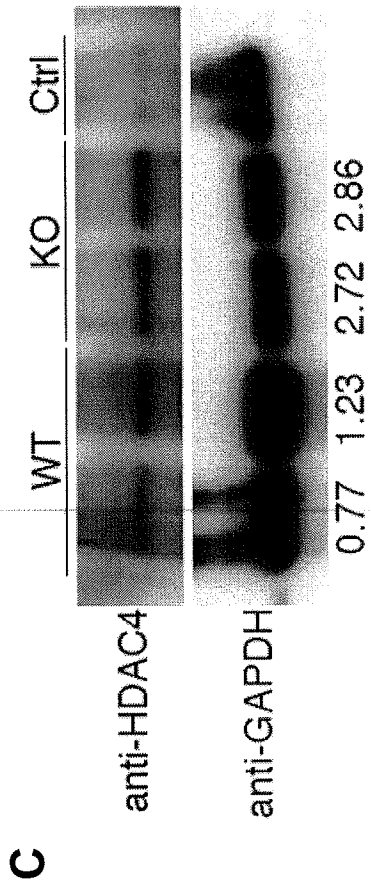


FIGURE 4C-F



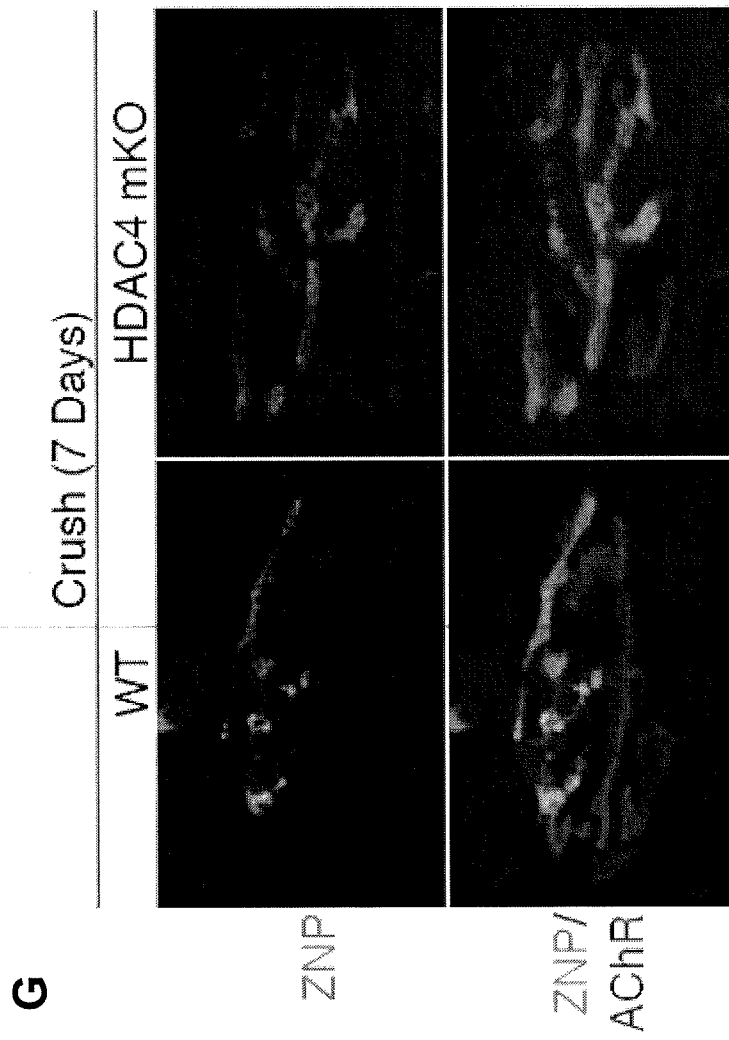


FIGURE 4G

FIGURE 5A-C

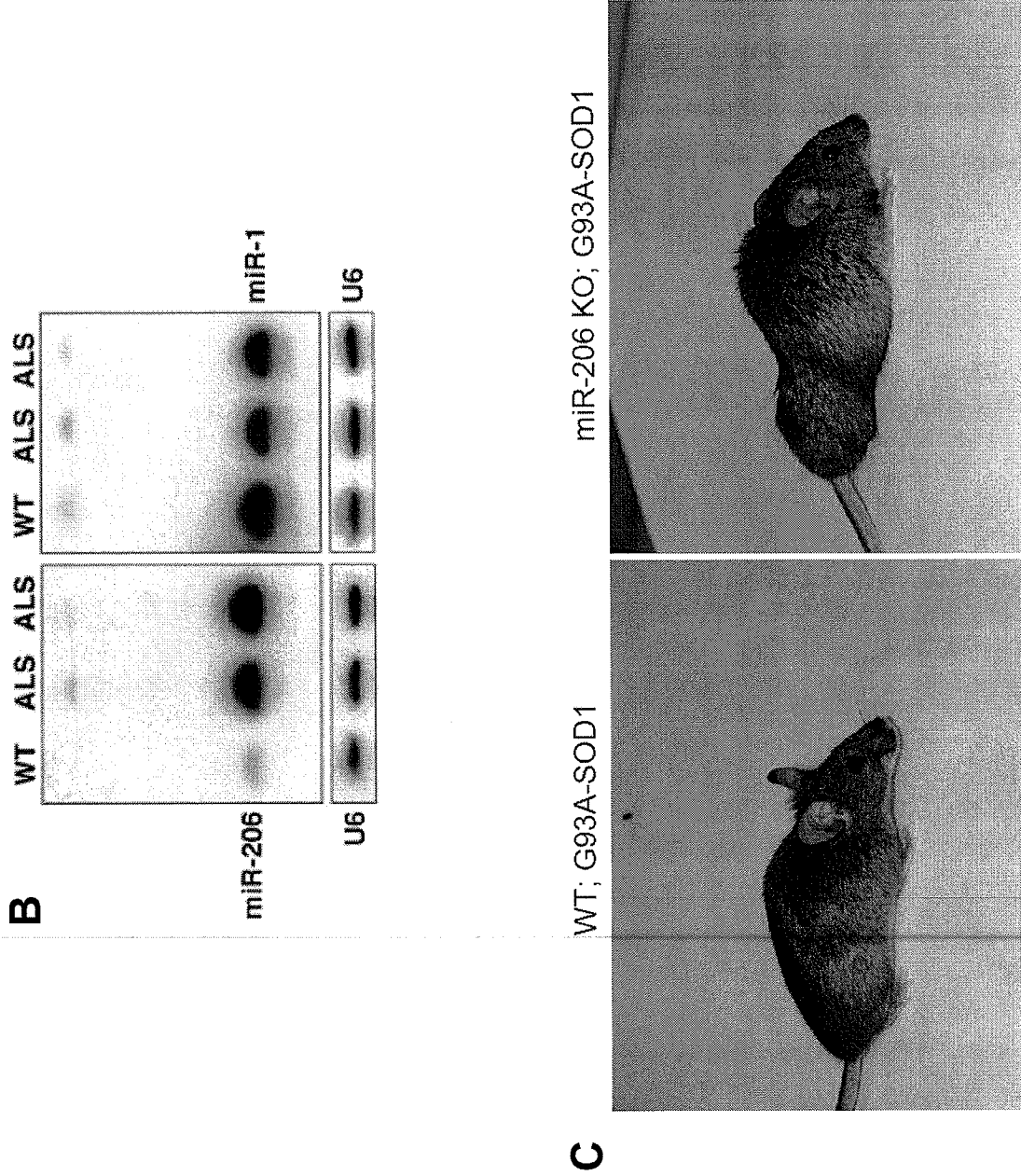
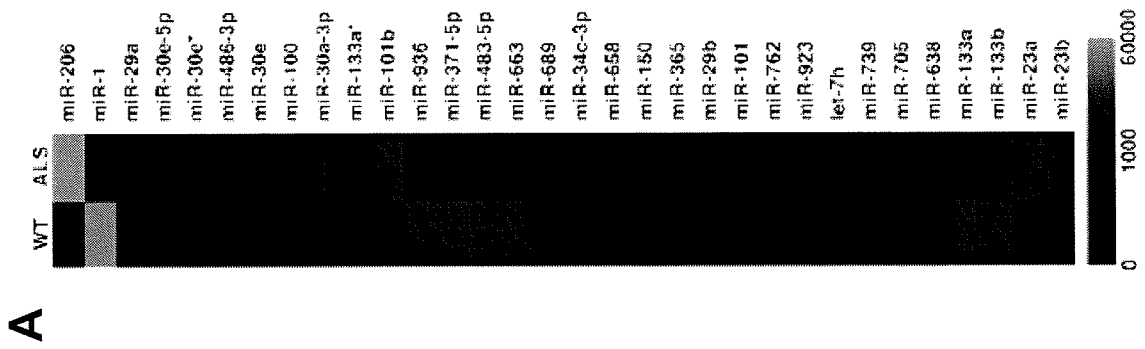


FIGURE 5D

