

Mucosal-Associated Invariant T (MAIT) Cell Depletion and Exhaustion in HIV/HCV Co-infection.

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Presenter: Ali Fawaz

HIV and HCV Co-infection
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CHANGING THE COURSE OF THE
HIV PREVENTION, ENGAGEMENT AND
TREATMENT CASCADE

HIV/HCV Co-infection

- HCV targets the hepatocytes of the liver, and over time may cause cirrhosis.
- HIV/HCV co-infected patients progress more rapidly to end-stage liver disease, and compared to HCV mono-infection show:
 - Increased viral load.¹
 - Higher rate of viral persistence¹
- What is the immunological basis for this?

¹Operskalski, E. a, & Kovacs, A. (2011). HIV/HCV co-infection: pathogenesis, clinical complications, treatment, and new therapeutic technologies. *Current HIV/AIDS reports*, 8(1), 12–22.

Mucosal Associated Invariant T (MAIT) Cells

- Anti-microbial, innate-like T Cells
 - React against vitamin metabolites produced by bacteria and yeast
 - Characterized by expression of invariant TCR Va7.2, along with CD161 and IL-18R.
- Found in mucosal tissues, the liver, and peripheral blood.
- Constitute up to 10% of peripheral blood T cells, 40% liver T cells²
- Secrete IFN γ (anti-fibrogenic), TNF α and IL-17 (pro-fibrogenic), IL-22 (hepatoprotective)

² Young MH, Gapin L. 2013. Mucosal associated invariant T cells: don't forget your vitamins. Cell Research. 23: 460-462.

Question: Are MAIT Cells impaired in HIV/HCV?

- Due to their accumulation in the liver, and secretion of pro- and anti-fibrogenic cytokines, MAIT cells are of interest when examining liver disease progression.
- We wanted to know if:
 - 1. MAIT Cells are somehow impaired in HIV/HCV**
 - 2. This impairment could explain why liver disease progresses more rapidly in co-infected individuals.**

blood

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Activation, exhaustion, and persistent decline of the antimicrobial MR1-restricted MAIT-cell population in chronic HIV-1 infection

Edwin Leeansyah, Anupama Ganesh, Máire F. Quigley, Anders Sönnnerborg, Jan Andersson, Peter W. Hunt, Ma Somsouk, Steven G. Deeks, Jeffrey N. Martin, Markus Moll, Barbara L. Shacklett and Johan K. Sandberg

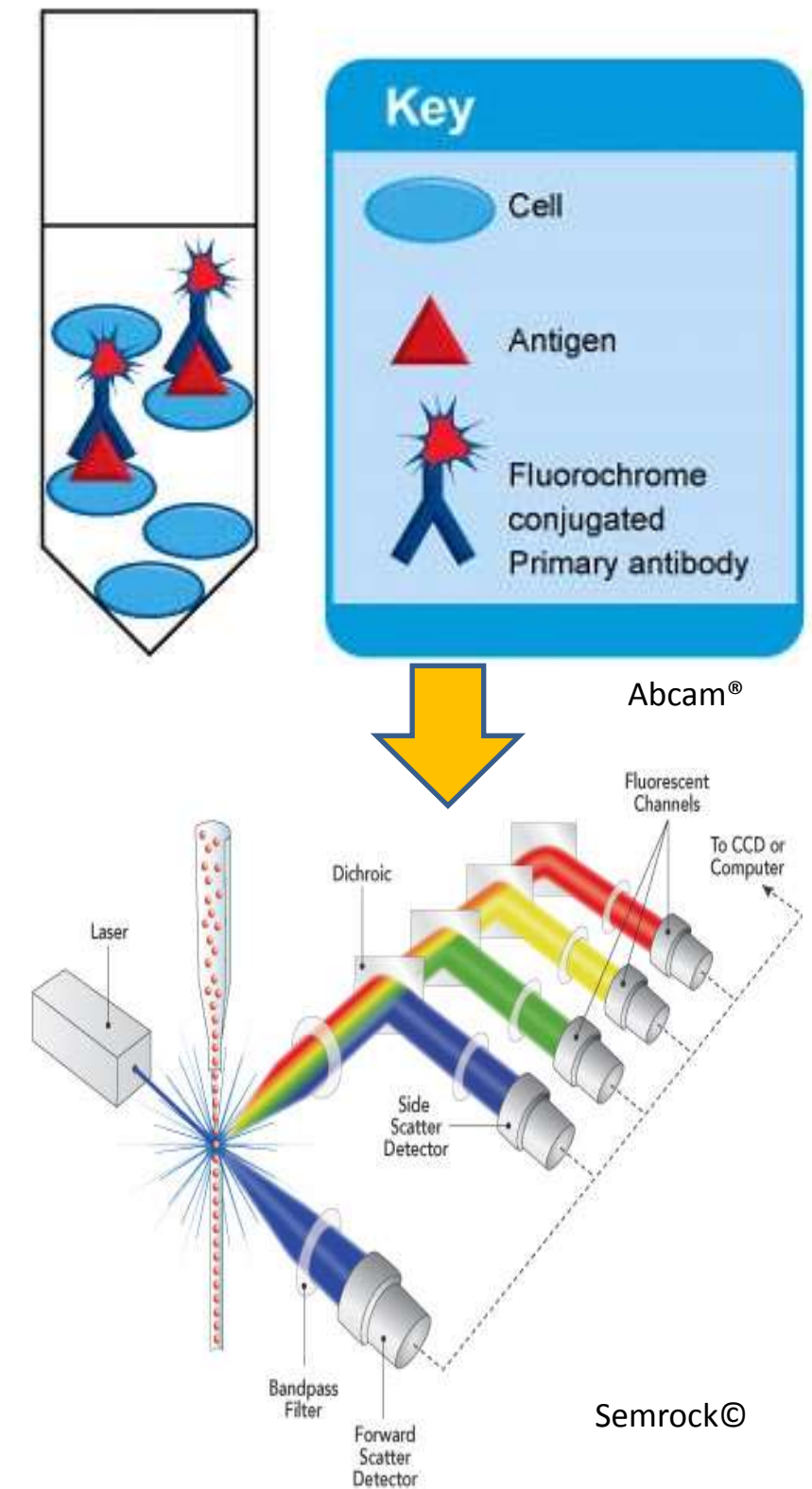
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In HIV Mono-infection:

- MAIT cells are highly activated and exhausted (i.e. elevated Tim-3)
- Proportion of MAIT cells producing IFN γ , IL-17, and TNF α is lower.
- Reduced MAIT cell frequency in peripheral blood, static in rectal mucosa (potential recruitment?)
- Accumulation of less functional, CD161- V α 7.2+ MAIT cells as infection progressed.

Methods: Flow Cytometry

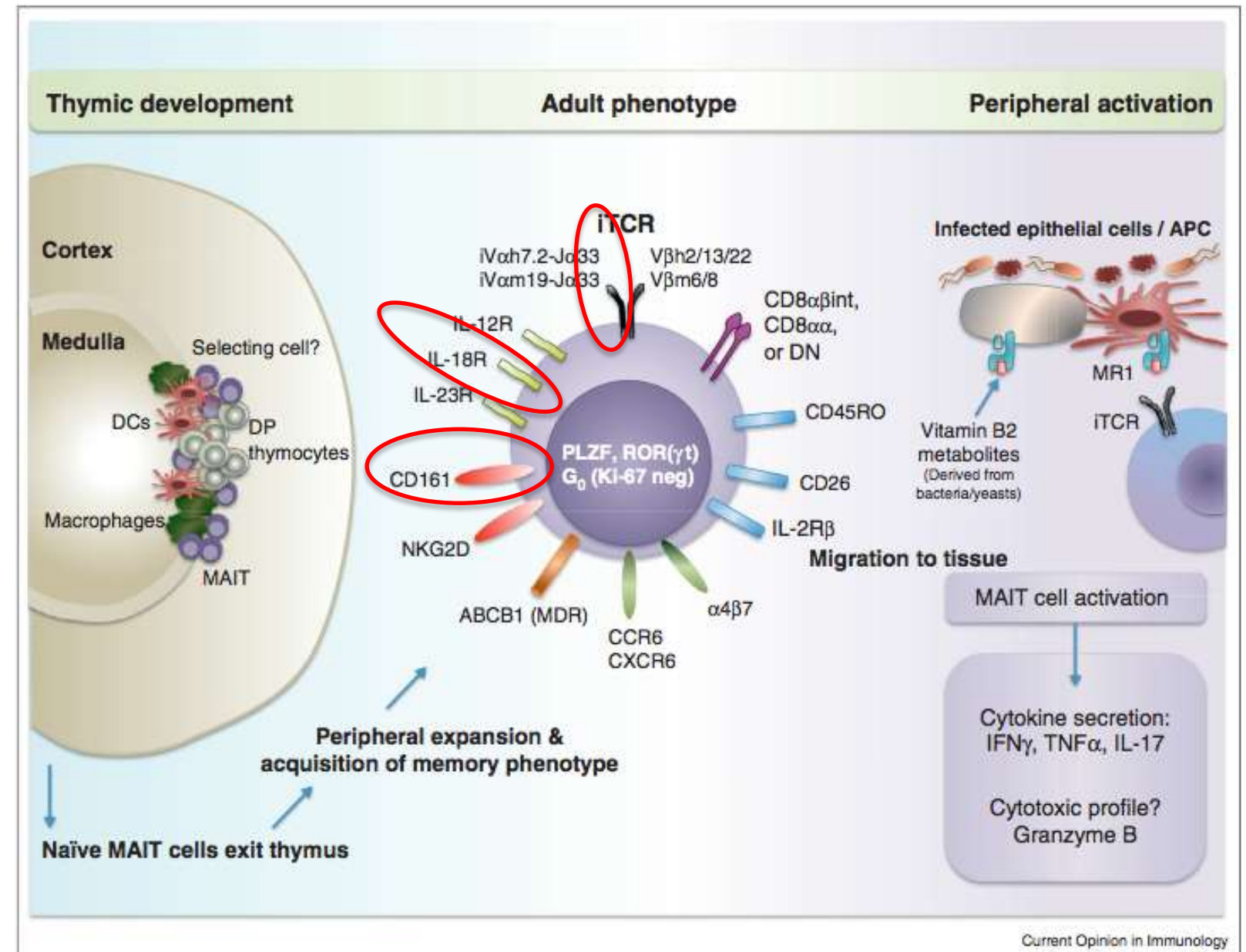
- Peripheral blood mononuclear cells (PBMCs) from uninfected, chronic HIV+, HCV+, and HCV+/HIV+ patients were stained with fluorescent antibodies.
- Analyzed using flow cytometry, which allowed for:
 1. Identification of MAIT Cells in a mixed PBMC population
 2. Assessment of functional capacity.



Flow Cytometry: Staining Panel

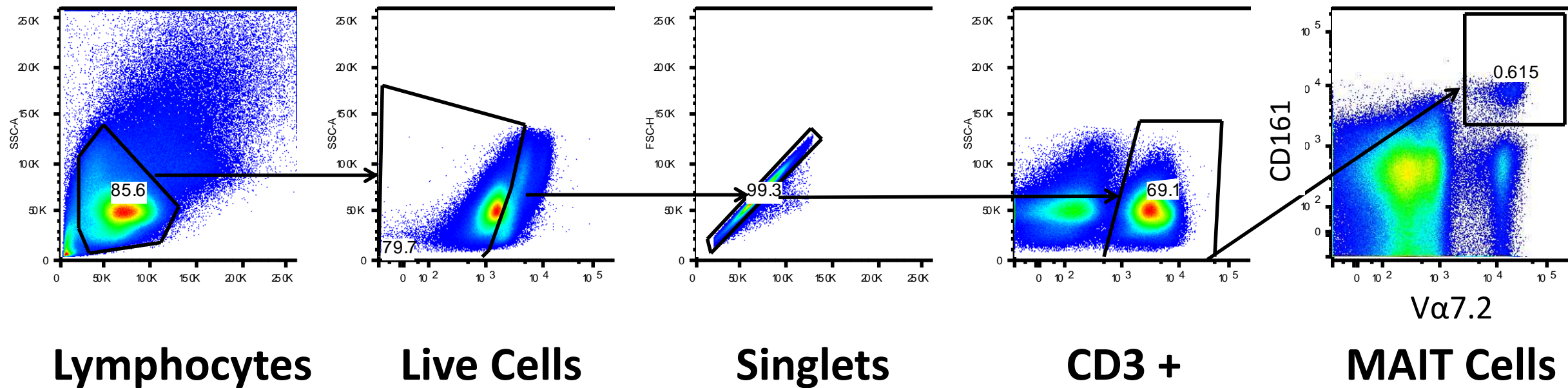
Marker	Function
CD3	TCR Component
Vα7.2	Specific to MAIT TCR
CD161	IL-17 Producing Cell Marker. Identifies MAIT Cells
PD-1	Exhaustion Marker
Tim-3	Exhaustion Marker
IFNγ	Anti-fibrogenic cytokine, marker of functional capacity.

Figure 1

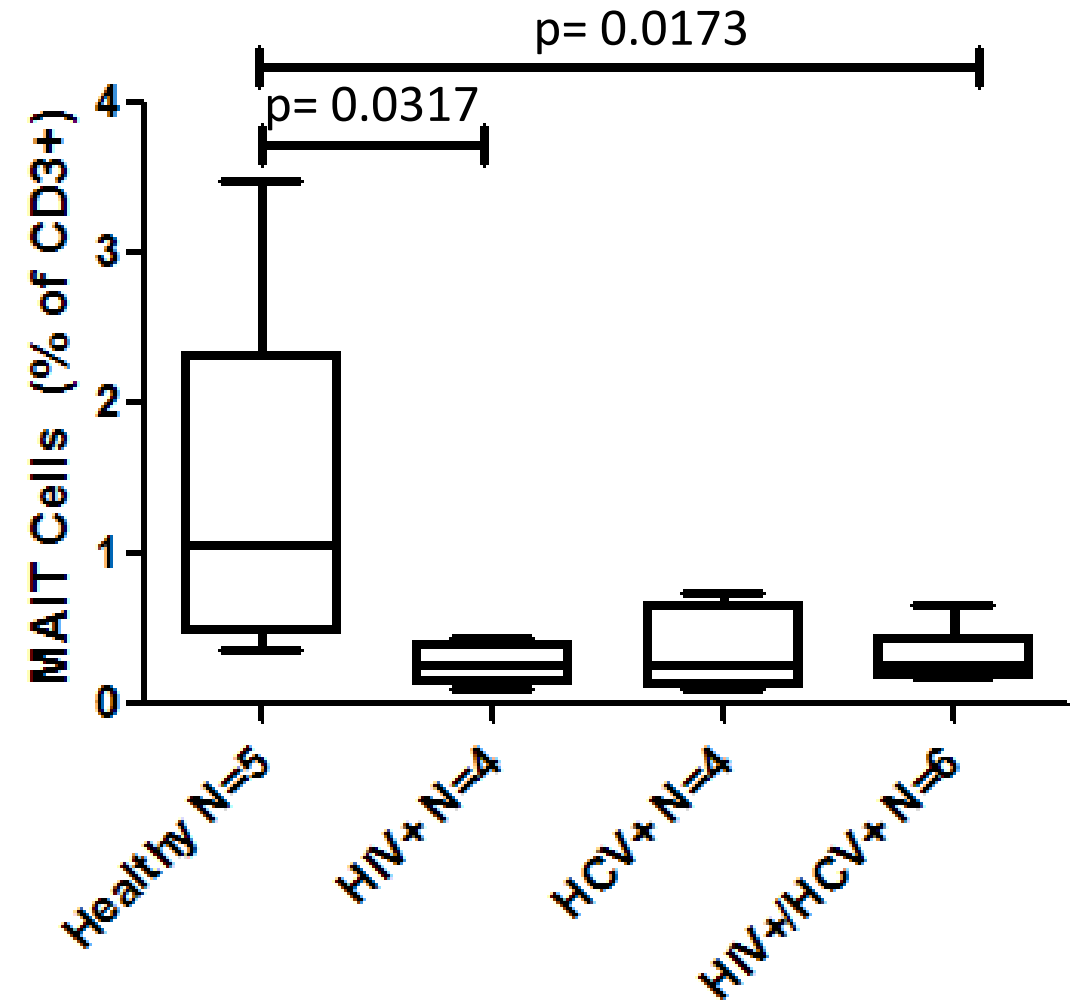
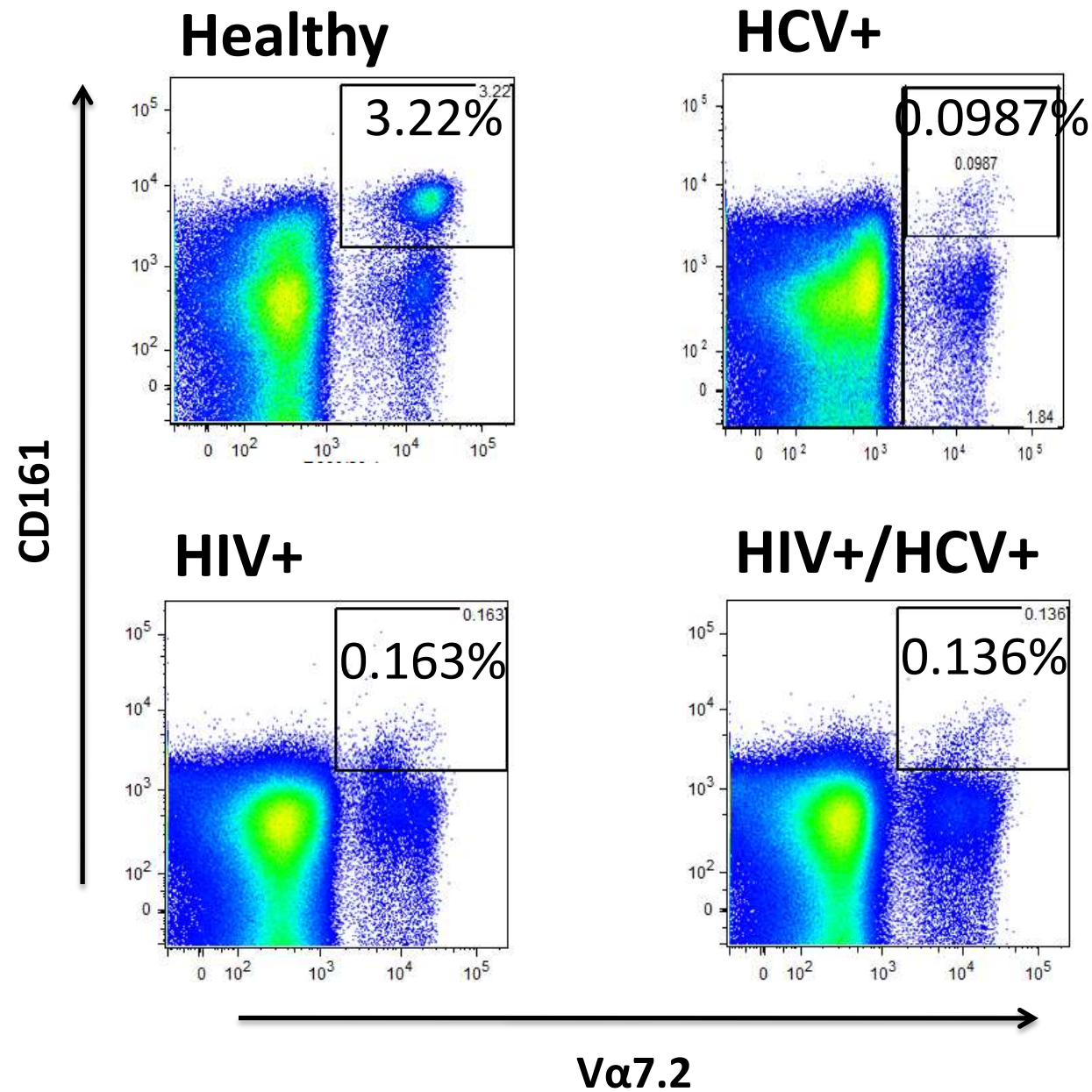


Development, phenotype, specificity and effector activities of MAIT cells.

Gating Strategy

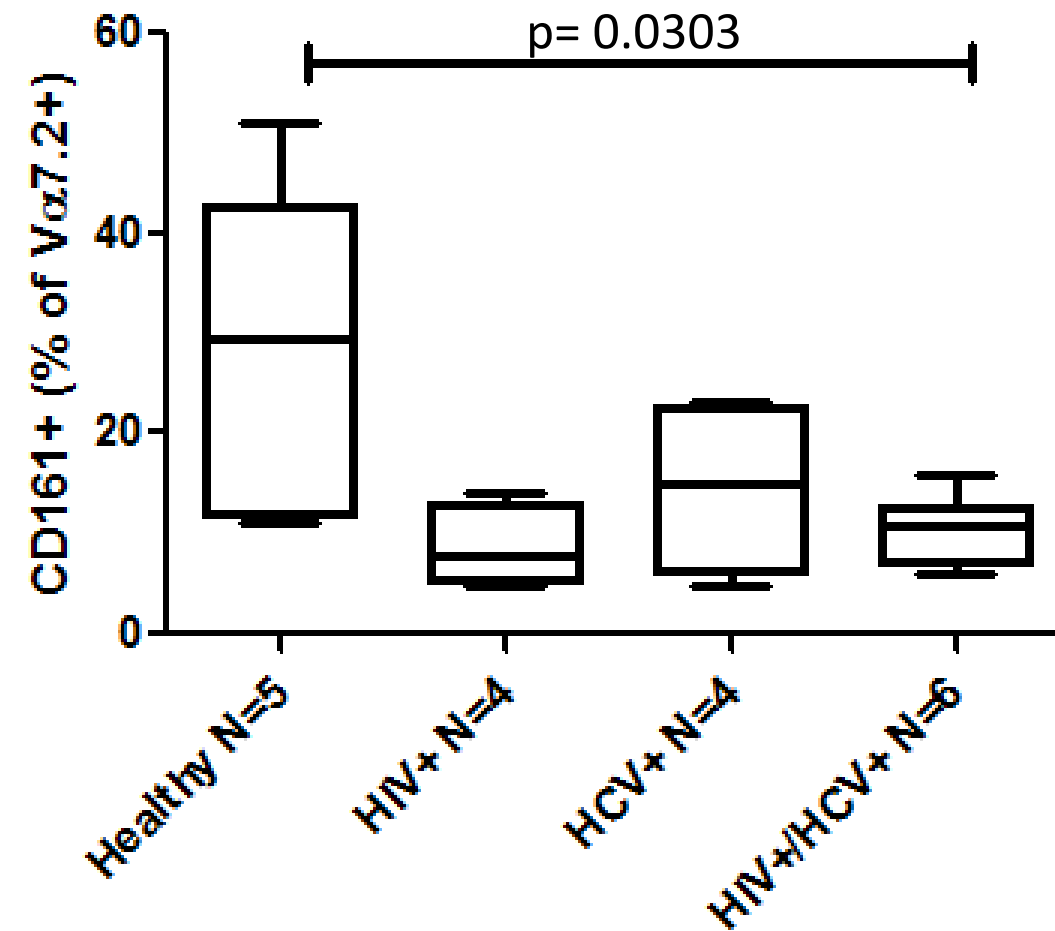
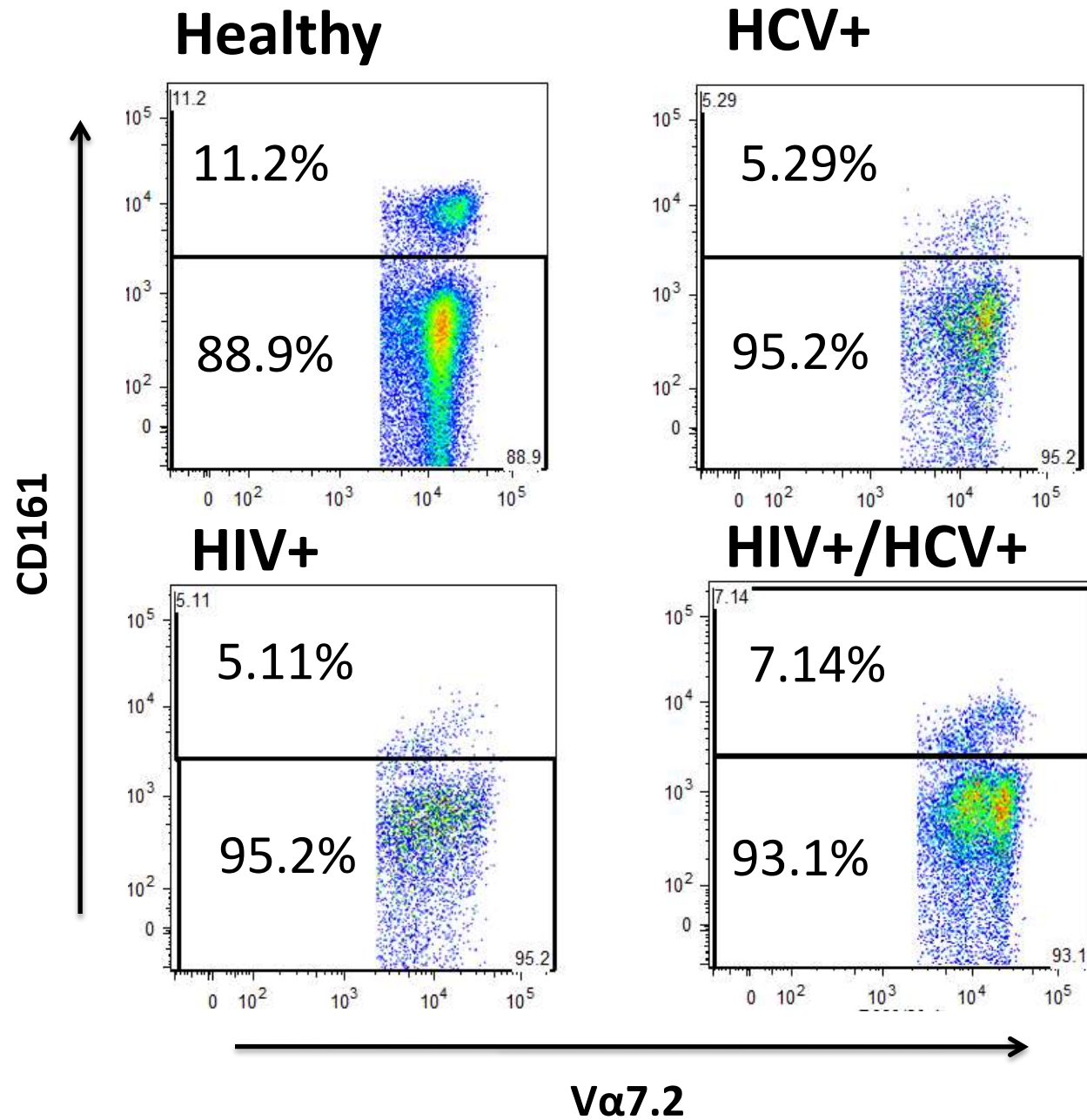


Depletion of MAIT Cells in Peripheral Blood of HIV, and HCV/HIV Patients



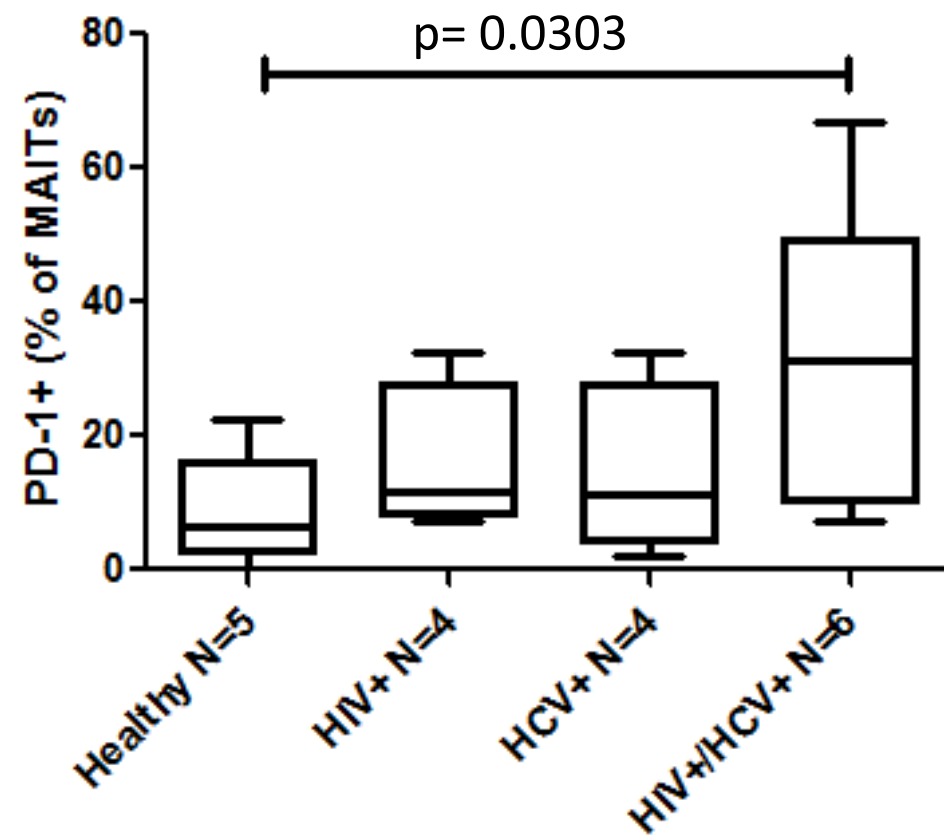
Two-tailed Mann-Whitney t test (95% confidence interval) was used for statistical analysis.

Depletion of CD161+/V α 7.2+ Subset in HIV/HCV

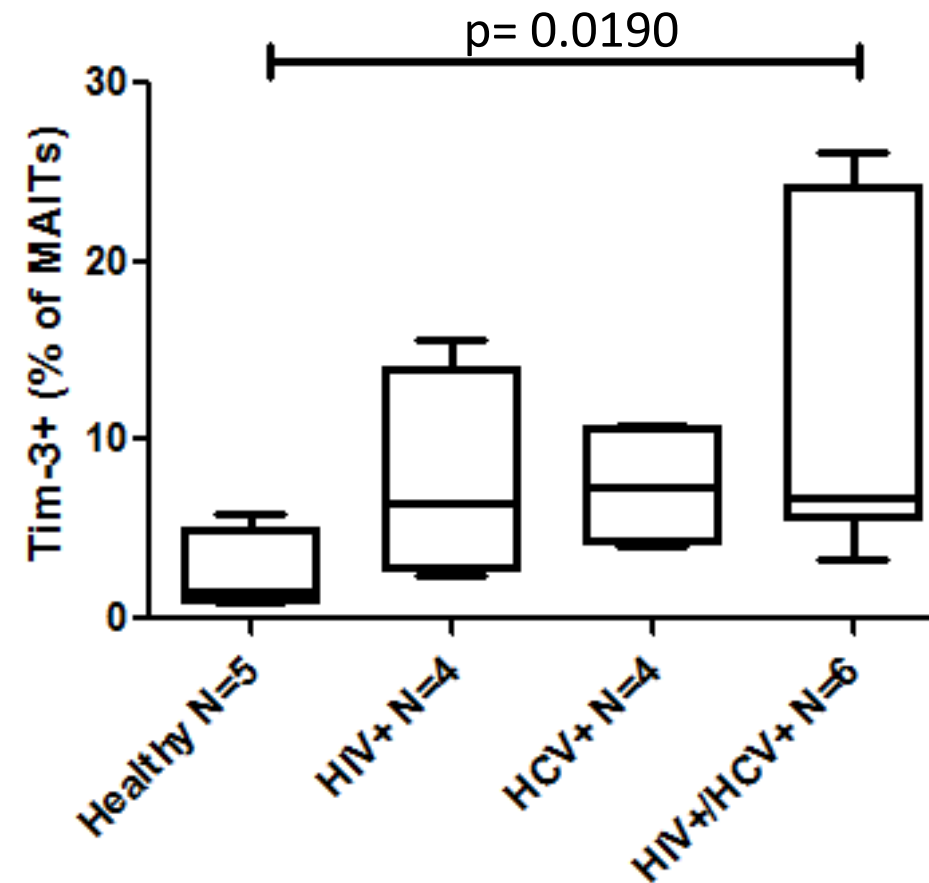


MAIT Cells Show Exhaustion Phenotypes in HIV/HCV

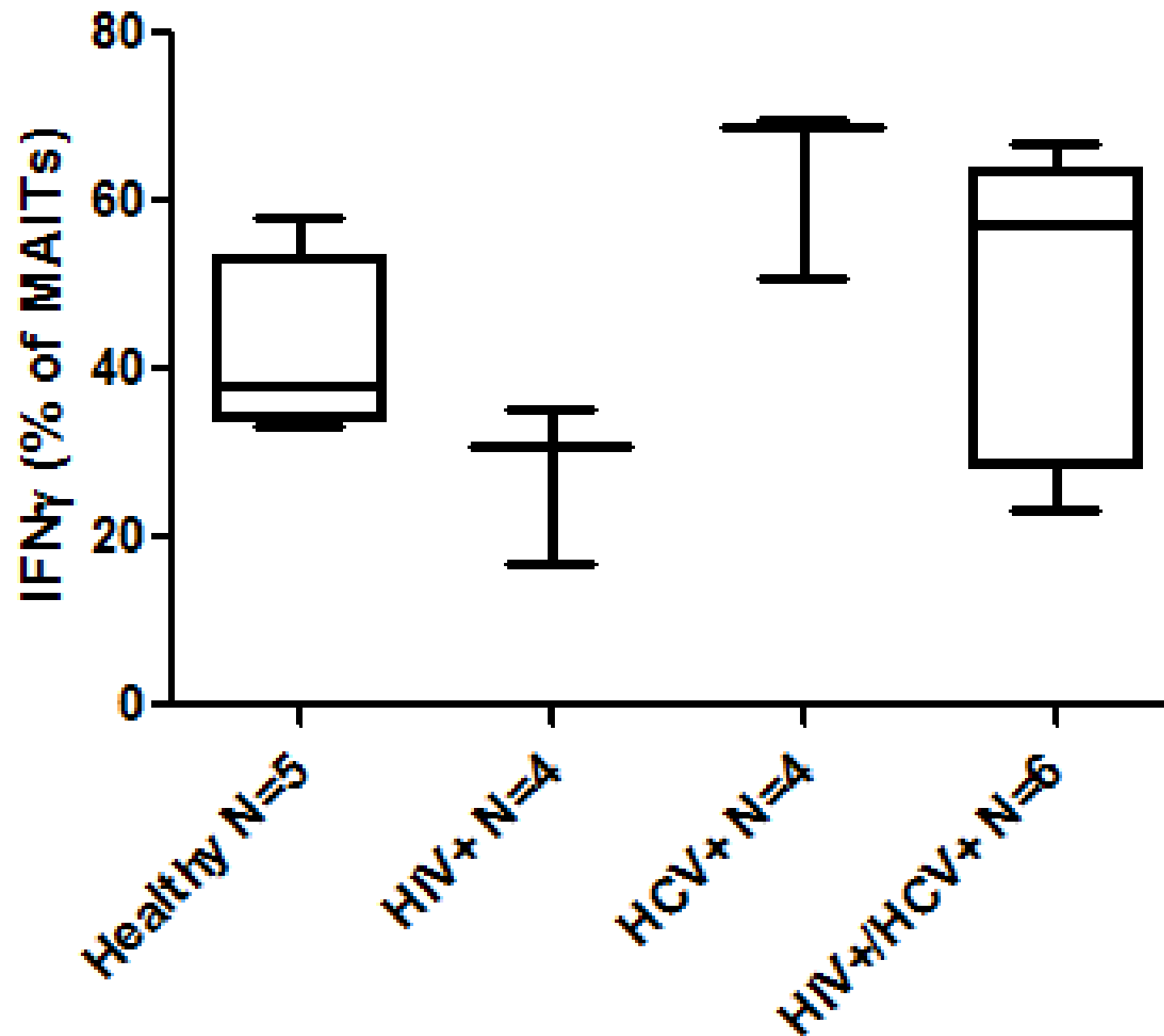
PD-1+ MAIT Cells:



Tim-3+ MAIT Cells



MAIT Cell Production of IFN γ with PMA/Ionomycin Stimulation



What Do These Findings Tell Us?

Going back to the original questions:

Are MAIT Cells impaired in HIV/HCV?:

- They are depleted in the peripheral blood.
- There is a significant decline in the proportion of functional (V α 7.2+, CD161+) MAIT Cells in HIV/HCV.
- Greater proportion of MAITs expressing the exhaustion markers PD-1 and Tim-3 in HIV/HCV.

Can this impairment explain the more rapid progression of liver disease in HIV/HCV?

- Difficult to make any conclusions at this point.
- Will become more clear as their functional capacity is more comprehensively characterized.

Future Directions

- **Assess MAIT cell phenotypes in the liver.**
- Re-assess IFN γ production using a more physiological stimulus, such as *E.coli*.
- Expand our functional characterization to the remaining cytokines.
 - Are there compounding negative effects? (ex. Lower IFN γ production together with higher IL-17)

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