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REVIEW

## Host factors involved in resistance to retroviral infection

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### ABSTRACT

Viral replication requires the help of host cell factors, whose species specificity may affect viral tropism. On the other hand, there exist host factors that restrict viral replication. The anti-viral system mediated by some of these restriction factors, which is termed intrinsic immunity and is distinguished from conventional innate and adaptive immunity, has been described as playing an important role in making species-specific barriers against viral infection. Here, we describe the current progress in understanding of such restriction factors against retroviral replication, focusing on TRIM5 $\alpha$  and APOBEC, whose anti-retroviral effects have recently been recognized. Additionally, we mention cyclophilin A, which is essential for HIV-1 replication in human cells and may affect viral tropism. Understanding of these host factors would contribute to identification of the determinants for viral tropism.

**Key words** apolipoprotein B mRNA-editing enzyme-catalytic subunit, cyclophilin A, retrovirus, tripartite interaction motif 5  $\alpha$ .

Among host factors exerting inhibitory effects on viral replication, the *Fv-1* and the *Fv-4* loci have been known to confer resistance to Friend virus infection in mice and their restriction mechanisms have been intensively investigated (1–5). The latter, *Fv-4*, corresponds to a defective endogenous provirus with an ecotropic MLV-like *env* gene. Entry of ecotropic MLV into cells expressing *Fv-4* is inhibited by binding of the *Fv-4 env* gene product, Fv-4 Env, to the ecotropic MLV receptor, and this receptor interference has been reported to play a central role in resistance to Friend virus infection (6). Additionally, it has recently been suggested that the Fv-4 Env-mediated dominant negative effect on MLV Env function contributes to efficient resistance in *Fv-4*-expressing mice (7). On the other hand, MLV restriction mediated by the *Fv-1* gene

product, Fv-1, occurs after viral entry into the cells but before the integration step during the viral replication cycle (8). The two main alleles of *Fv-1*, *Fv-1<sup>n</sup>* and *Fv-1<sup>b</sup>*, confer resistance to replication of B-tropic and N-tropic MLV respectively (9). Although the precise mechanism of Fv-1-mediated restriction remains unclear, comparison of viral genome sequences between B-tropic and N-tropic MLV has indicated the 110<sup>th</sup> amino acid in Gag CA as the viral determinant for the tropism, suggesting that MLV Gag CA is the target for the host factor involved in this restriction (10, 11).

Ref-1, which shows a similar pattern of inhibition of retroviral replication with Fv-1, is known as a restriction factor in mammalian cells apart from murine cells. The viral determinant for Ref-1-mediated restriction has been

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**List of Abbreviations:** A, adenine; agmApo3G, African green monkey Apo3G; Ala, alanine; Apo3G, APOBEC3G; APOBEC, apolipoprotein B mRNA-editing enzyme-catalytic subunit; CA, capsid; CypA, cyclophilin A; CsA, cyclosporine A; G, guanine; Gly, glycine; hApo3G, human Apo3G; HIV-1, human immunodeficiency virus type 1; Ile, isoleucine; Lv-1, lentivirus susceptibility factor 1; MLV, murine leukemia virus; OWM, old world monkey; Pro, proline; Ref-1, restriction factor 1; SIVagm, African green monkey simian immunodeficiency virus; SIVmac, simian immunodeficiency virus mac; TRIM5, tripartite interaction motif 5; TRIM5 $\alpha$ , tripartite interaction motif 5  $\alpha$ ; Vif, virus infectivity factor.

reported to be at the Gag CA residue, corresponding to the 110<sup>th</sup> in MLV Gag CA involved in Fv-1-mediated restriction (12). Ref-1 and Fv-1 both show viral restriction post-viral entry in the early phase of the retroviral replication cycle, but the exact point of restriction has been indicated to be different: the former, Ref-1-mediated restriction, occurs at the step prior to reverse transcription, while the latter, Fv-1 mediated restriction, is considered to occur post-reverse transcription (8). Further, restriction of HIV-1 replication post-viral entry has been reported in OWM cells that support efficient replication of SIVmac, and the existence of a restriction factor, Lv-1, responsible for this resistance of non-human primate cells to HIV-1 replication has been suggested (13–15).

### TRIM5 $\alpha$ : A HOST FACTOR RESTRICTING HIV-1 REPLICATION POST-VIRAL ENTRY IN PRIMATE CELLS

Recently, two independent groups have identified the  $\alpha$ -isoform of TRIM5, TRIM5 $\alpha$ , as a restriction factor responsible for resistance of monkey cells to HIV-1 infection and shown that restriction of HIV-1 replication by TRIM5 $\alpha$  derived from rhesus and owl monkeys but not efficiently from humans (16, 17) (Fig. 1). Subsequent studies have revealed virus-specific restriction activities by TRIM5 $\alpha$  and its homologues derived from humans and non-human primates (18–24). For instance, restriction by rhesus monkey TRIM5 $\alpha$  is efficient against HIV-1 but inefficient against SIVmac and undetectable against MLV (Fig. 1).

TRIM5 $\alpha$  is a trimeric cytoplasmic protein (25, 26) consisting of RING finger, B-box, coiled-coil, and SPRY (B30.2) domains (27, 28). The coiled-coil domain is indispensable for TRIM5 $\alpha$  multimerization, and both the coiled-coil and the SPRY domains are required for its binding to the virion core (28, 29).

TRIM5 $\alpha$ -mediated restriction of HIV-1 replication is considered to occur after viral entry in the early phase of the viral replication cycle, but its precise mechanism remains unclear and several possibilities have been proposed. First, it has been suggested that binding of TRIM5 $\alpha$  to the virion CA after viral entry may accelerate or abrogate the process of its uncoating and disruption, resulting in inhibition of HIV-1 replication (29). Second, involvement of ubiquitin in TRIM5 $\alpha$ -mediated restriction has been suggested by recent reports showing that a mutation in its RING finger domain decreases the restriction ability of TRIM5 $\alpha$  (16, 30–32) and that recovery from the restriction occurs in the presence of proteasome inhibitors (32, 33), although this is controversial (29, 31, 32). Furthermore, some reports have shown TRIM5 $\alpha$ -mediated

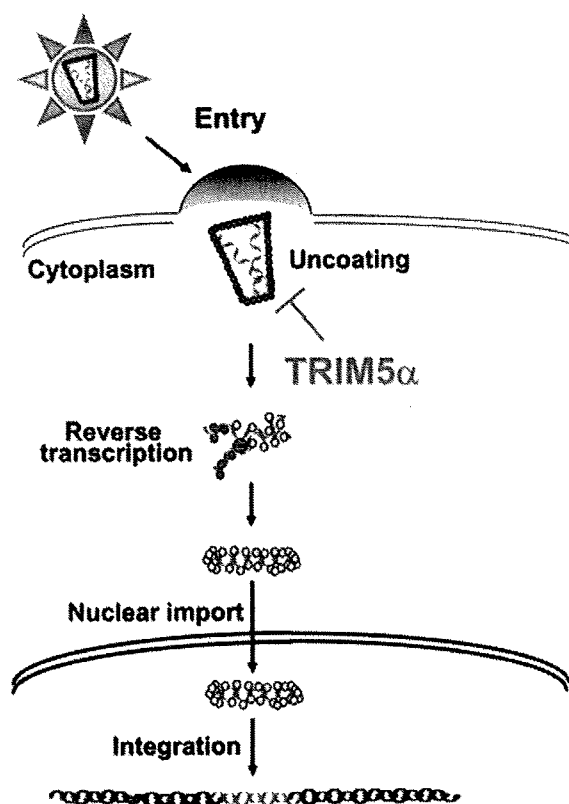
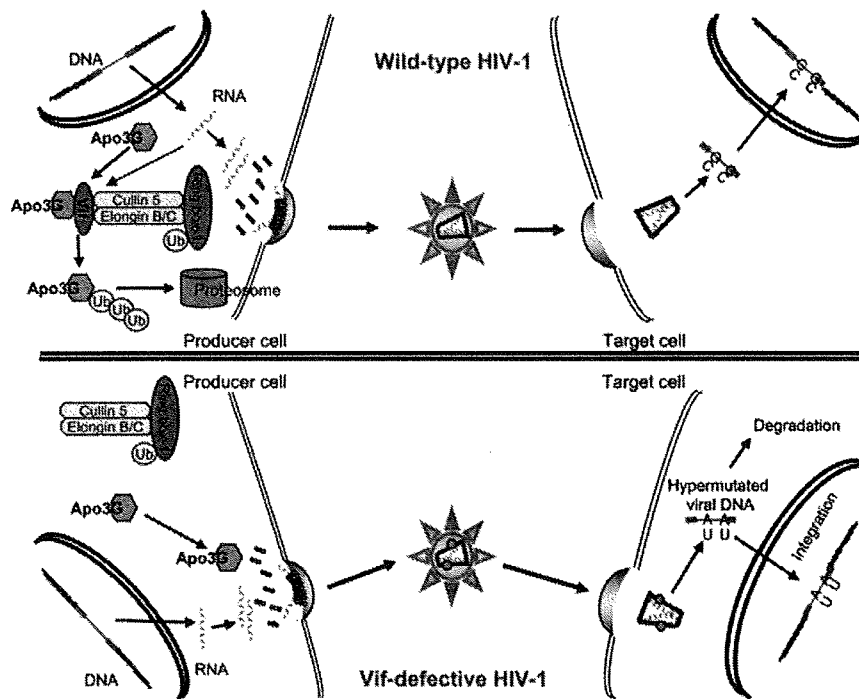


Fig. 1. A schema for TRIM5 $\alpha$ -mediated restriction of HIV-1 replication in OWM cells. Recognition of HIV-1 CA by TRIM5 $\alpha$  results in restriction of HIV-1 replication at the step after viral entry into the cytoplasm.

inhibition of viral cDNA nuclear import as well as viral cDNA synthesis (34, 35). In addition to restriction at the early phase of retroviral replication cycle, TRIM5 $\alpha$  has recently been shown to inhibit virus production by accelerating degradation of viral Gag protein (36).

### APOBEC: AN ENZYMATIC HOST FACTOR RESTRICTING RETROVIRAL REPLICATION

HIV-1 replication in primary CD4<sup>+</sup> T lymphocytes and monocytes is dependent on the presence of an HIV-1 accessory protein, Vif, which has been reported to work in a host cell-specific manner (37, 38). Vif is required for infectious HIV-1 production from some immortalized human T cell lines such as CEM (termed non-permissive) but not in others such as CEM-SS (termed permissive), and the existence of a restriction factor whose anti-retroviral activity can be abrogated by Vif has been suggested in the case of the non-permissive cells (39–45). Comparison of the non-permissive and permissive cells has



**Fig. 2.** A putative model for APOBEC3G-mediated restriction of HIV-1 replication and Vif-mediated recovery from the restriction. In the wild-type HIV-1 replication (upper panel), Vif connects hApo3G to an E3 ubiquitin ligase complex including Elongin B/C, Cullin5, and Ring-box-1 to induce polyubiquitylation and proteosomal degradation of hApo3G, resulting in exclusion of hApo3G from the virion with viral genome re-

maining intact even after viral entry. In contrast, in *vif*-deleted HIV-1 replication (lower panel), hApo3G is incorporated into the virion and its replication ability is abrogated after viral entry into the cells. Thereafter, these C-to-U mutations in the viral minus-strand DNA result in G-to-A mutations in the complementary plus-strand DNA during reverse transcription.

revealed Apo3G, a member of the APOBEC family of cytidine deaminases, to be the restriction factor responsible for inhibition of *vif*-deleted HIV-1 replication in human non-permissive cells (46). Unlike TRIM5 $\alpha$  and Fv-1, the target of Apo3G-mediated restriction is not viral CA, but viral single-stranded cDNA synthesized during reverse transcription. It is packaged into virus particles produced from Apo3G-expressing cells and inhibits viral replication after viral entry into the cells (Fig. 2). HIV-1 Vif can inhibit the uptake of Apo3G into the virion by inducing polyubiquitylation and proteosomal degradation of cellular Apo3G, resulting in abrogation of Apo3G-mediated restriction (47) (Fig. 2).

Several mechanisms for Apo3G-mediated restriction against HIV-1 infection have been reported. First, it has been reported that the cytidine deaminase activity of Apo3G can induce hypermutation (a large number of G-to-A substitutions) in proviral DNA during reverse transcription, resulting in failure of infectious HIV-1 production (48–53) (Fig. 2). Second, the possibility of Apo3G-mediated inhibition of tRNA annealing or processing during reverse transcription has been shown (54–56). Additional mechanisms, including inhibition at the step of viral

plus-strand cDNA transfer, have also been suggested (56–58).

Restriction of retroviral infection by Apo3G derived from non-human species has also been reported (51, 59–62), and the Vif-Apo3G interaction is considered to be species-specific (51, 63). Indeed, it has been indicated that hApo3G is insensitive to SIVagm Vif while agmApo3G is insensitive to HIV-1 Vif, and that the determinant for this specificity is at the 128<sup>th</sup> residue in Apo3G (51, 64–67). However, a recent report has shown that SIVagm Vif can support SIVagm replication in an hApo3G-positive human T cell line (A3.01): *vif*-deleted SIVagm replication was severely restricted with accumulation of G-to-A mutations in the viral genome, suggesting ambiguity of species specificity (68).

Restriction of HIV-1 and SIV replication by other members of the APOBEC family has been reported, although it might not be as efficient as Apo3G. Thus, APOBEC proteins are now considered to be a new class of host restriction factors against retroviral replication (61, 69). For instance, human APOBEC3F can inhibit HIV-1 replication in the absence of Vif (59, 60, 70, 71) whereas human APOBEC3B does so even in the presence of

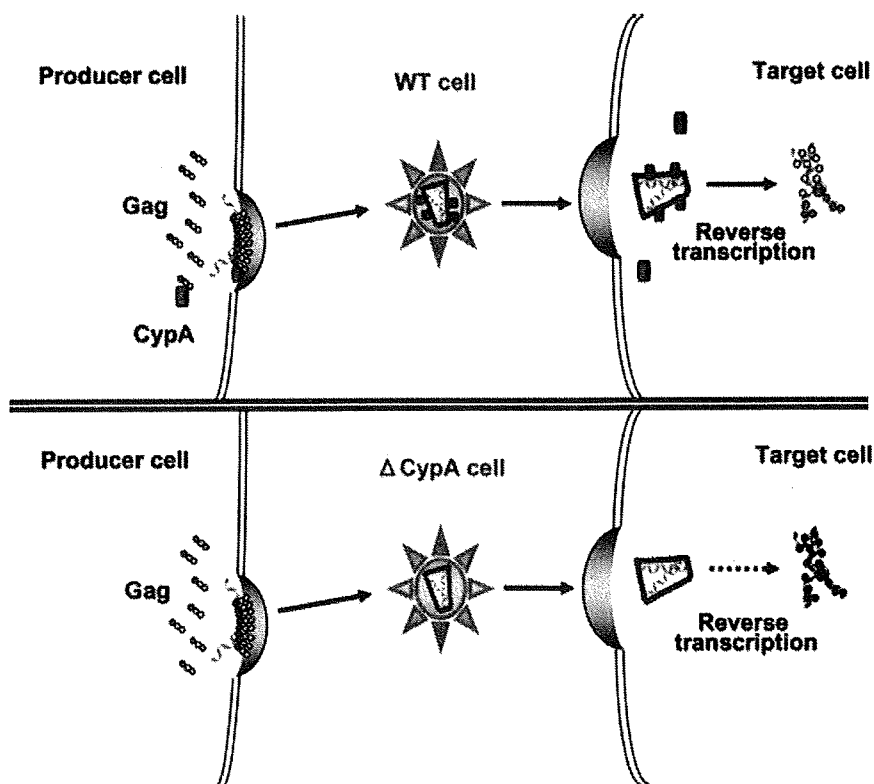
Vif (59, 72, 73). Association of deaminase activity with Apo3G-mediated restriction of HIV-1 replication has been strongly suspected, but the possibility of involvement of deaminase activity-independent mechanisms in this restriction has also been suggested (57, 58). Indeed, several groups have reported Apo3G and APOBEC3F variants lacking in deaminase activity without loss of restriction activity, as well as variants lacking in restriction activity without loss of deaminase activity (74–77). Additionally, a recent report has suggested a deaminase-independent inhibitory effect of Apo3G on viral DNA synthesis following reverse transcription (78). However, this possibility is controversial (79, 80), and the precise mechanism for Apo3G-mediated restriction of HIV-1 infection remains unclear.

### CYCLOPHILIN A: A HOST FACTOR INVOLVED IN RETROVIRAL REPLICATION

CypA, a ubiquitous protein, was first identified as the target of CsA, an immunosuppressive reagent (81). CypA has proline-isomerase activity that catalyzes *cis-trans* isomer-

ization of the Pro residue (82, 83). CsA binding to CypA inhibits this isomerase activity (83). CypA binding to HIV-1 Gag CA has been shown by analysis using the yeast two-hybrid system (84). The Ala-Gly-Pro-Ile residues from the 88<sup>th</sup> to the 91<sup>st</sup> in CA are the key portion for its binding to the active site of CypA (85–87). Interestingly, the peptidyl-prolyl bond between the 89<sup>th</sup> Gly (Gly89) and the 90<sup>th</sup> Pro (Pro90) exhibits the *trans* conformation, (in contrast to the *cis* conformation usually observed in other known CypA targets) (87, 88), and this Pro90 residue but not other Pro is considered to be critical for the binding of CA to CypA. Thus, it has been suggested that CypA acts as a molecular chaperone without exerting *cis-trans* isomerase activity on HIV-1 CA (87). However, this is still controversial and the possibility of CypA-mediated *cis-trans* isomerization of the Gly89-Pro90 peptidyl-prolyl bond has also been suggested (88).

It has been well established that CypA promotes HIV-1 replication after viral entry in the early phase in human cells (85, 89–95) (Fig. 3). CypA is efficiently incorporated into the virion produced from HIV-1-infected cells through interaction with CA in the context of Gag polyprotein (Fig. 3). Disruption of CypA incorporation



**Fig. 3.** A putative mechanism for CypA-mediated enhancement of HIV-1 replication. CypA is required for efficient reverse transcription (upper panel), and HIV-1 infection in CypA-deficient human cells shows inefficient reverse transcription (lower panel).

into the virion by CsA administration or by Gag mutations resulted in reduction in infectivity of the produced viruses (85, 89, 91, 95–98). Several reports have shown that both CA dimerization and CypA multimerization are required for the efficient CA-CypA binding which is critical for HIV-1 infectivity (99, 100). Recently, promotion of HIV-1 replication by post-entry interaction of CA with CypA in target cells has been shown, suggesting the importance of CypA for efficient HIV-1 replication (94, 101, 102).

Only retroviruses with CA capable of binding to CypA exhibit CypA-dependent viral replication (84, 85, 90, 92, 95). This suggests involvement of CA-CypA interaction in the determination of retroviral tropism (14, 16, 17, 34, 98, 101–111). The effect of CypA on SIV replication in human cells has not been clearly determined but, for the first time, a recent study has shown that human CypA exerts an inhibitory effect on *vif*-deleted SIV replication, which may be recovered by SIV Vif excluding the CypA from the virion (112). This Vif function can be distinguished from the anti-hApo3G function of Vif described above.

#### **PERSPECTIVES: HOST FACTORS INVOLVED IN THE POST-ENTRY STEP OF THE EARLY PHASE OF RETROVIRAL REPLICATION**

Restriction of HIV-1 replication in non-human primate cells after viral entry occurs at the step prior to reverse transcription, and TRIM5 $\alpha$  plays a crucial role in this restriction (13–15, 101, 106, 113–115). Interestingly, CypA-dependency is considered to occur at the same step in the retroviral replication cycle (116).

Several groups have reported modest restriction of HIV-1 replication by human TRIM5 $\alpha$ , a restriction which is not altered by disruption of the CA-CypA interaction or by elimination of endogenous CypA (117–119). In contrast, restriction of HIV-1 replication by the TRIM5 $\alpha$  derived from OWM (such as rhesus macaques) is abrogated by CsA-mediated or small interfering RNA-mediated inhibition of OWM-derived CypA function, indicating involvement of CypA in TRIM5 $\alpha$ -mediated restriction of HIV-1 replication in OWM cells (117, 118, 120). In the owl monkey (a new world monkey), a CypA-TRIM5 $\alpha$ -fusion protein has been found and involvement of CypA in the restriction has been suggested (17). Thus, CypA may exert restriction activity against HIV-1 replication in association with TRIM5 $\alpha$  in non-human primates but not in humans. Elucidation of the key factors involved in this difference in CypA function between non-human primates and humans may contribute to understanding of the species-specific restriction mechanism against retroviral replication.

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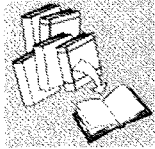
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REVIEW



## Anti-HIV adaptive immunity: determinants for viral persistence

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### SUMMARY

The immense difficulty in primary control of human immunodeficiency virus (HIV) and simian immunodeficiency virus (SIV) infection by adaptive immune responses has been a topic of exceptional importance. CD8<sup>+</sup> cytotoxic T lymphocytes (CTLs) do play a central role in primary resolution of viremia, but their potency in viral control is generally constrained in the natural courses of HIV/SIV infections. The overall repertoire of CTLs is dependent on both the host and the virus genetic polymorphisms, and the potency of each individual CTL is affected by immunological and virological determinants. HIV/SIV infections lack early appearance of neutralising antibodies (NAbs), and our recent finding has suggested a possibility of their absence contributing to diminished virus-specific CD4<sup>+</sup> T-cell responses leading to failure in primary viral control. Extrapolations from studies in macaque models of SIV infection and analyses of the cohorts of HIV control in humans have to date delineated the numerous requirements for attainment of viral control. Understanding of the individual components of adaptive immune responses and their optimal concert required for HIV/SIV control would contribute to development of an effective AIDS vaccine. Here, we discuss current insights into CTLs and NAbs, and speculate their possible protective mechanism against establishment of persistent HIV/SIV infection. Copyright © 2008 John Wiley & Sons, Ltd.

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### ACUTE MEMORY CD4<sup>+</sup> T-CELL DEPLETION BY HIV INFECTION

The kinetics of human immunodeficiency virus (HIV) infection, especially in the acute phase, has been a long-pursued question. The first turning point came with identification of chemokine receptors including CCR5 as the coreceptor for viral entry into the cells [1–4], contributing to determination of the primary viral target cell population. CCR5-tropic viruses were shown to play a central role in viral transmission [5–7], and studies using

macaques infected with CCR5-tropic simian immunodeficiency virus (SIV) revealed predominant viral infection of activated CD4<sup>+</sup> T lymphocytes in the gut in the early phase [8,9]. Subsequent key studies showed acute depletion of memory CD4<sup>+</sup> T lymphocytes that were enriched with CCR5 expression [10,11], starting at the gut lamina propria around week 1 and then systemically around week 2 post-infection [12–14]. This CCR5-tropic depletion can be an obstacle to *de novo* induction of potent virus-specific immune responses, which may contribute to failure in primary viral control [15].

In agreement with these findings, trials of prophylactic AIDS vaccines eliciting CD8<sup>+</sup> cytotoxic T lymphocyte (CTL) responses in macaques against chimeric CXCR4-tropic simian-human immunodeficiency viruses (SHIVs) and CCR5-tropic SIVs have revealed an immense difference in attainability of viral control between the two. In the former model of CXCR4-tropic SHIV infection that shows aggressive natural infection courses with massive acute depletion of naïve

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#### Abbreviations used

HIV, human immunodeficiency virus; SIV, simian immunodeficiency virus; SHIV, simian-human immunodeficiency virus; CTL, cytotoxic T lymphocyte; HLA, human leukocyte antigen; MHC, major histocompatibility complex; MHC-I, MHC class I; NAb, neutralising antibody; hu-PBL-SCID mice, human peripheral blood leukocyte-reconstituted severe combined immunodeficiency mice; DC, dendritic cell.

CD4<sup>+</sup> T lymphocyte subsets enriched with CXCR4 expression [11,16], vaccine-based viral control has in fact been achieved consistently [17–22]. In contrast, in the latter model of CCR5-tropic SIV infection, vaccine-based successful viremia control has not consistently been attained [23–28] but observed under the conditions with specific host genetic backgrounds affecting CTL efficacies [29].

#### ANTI-HIV CTL POTENCY

Virus-specific CTLs play an indispensable role in control of immunodeficiency virus infection [30–35]. Enrolment of CD8<sup>+</sup> CTLs in primary control of HIV/SIV replication is directly visible as the initial decline of viral loads from the peak to the set point. Yet infection persists, and eventually the host progresses to AIDS (Figure 1). Hence the question remains as to what determines the persistence of viremia even under vigorous CTL pressure. To this important question, several explanations have been posed to date; some have suggested possible contribution of the aberrance of virus-specific CD4<sup>+</sup> T cell responses to failure in viral control [36,37]. Other reports have indicated that ongoing immune activation itself may fuel infection persistence, in part in a hen-and-egg fashion of CTL dysfunction or exhaustion [38–40]. Analyses on the various aspects of difficulty in HIV/SIV control by CTLs have newly highlighted several important issues related to its functionality, including competitive equilibrium between CTL potency and viral escape, influence of viral and host major histocompatibility complex (MHC) polymorphisms, and kinetics of infected cell killing. These may provide important clues for development of effective CTL-based AIDS vaccines.

HIV infections mostly exhibit chronic disease progression, but occasionally show rapid AIDS progression or, in reverse, delayed disease courses with viral control. Genetic analyses attributed some of the latter cases of inefficient viral replication to viral polymorphisms such as *nef* deletion [41] or host polymorphisms such as CCR5Δ32 variants [42,43]. These were followed by a finding of worse prognoses in HIV-infected human leukocyte antigen (HLA) homozygotes compared to heterozygotes [44] and a wave of cumulative analyses indicating association of HLA/MHC genotypes with rapid or delayed AIDS progression [45–49]. For instance, most of the HIV-1-infected indivi-

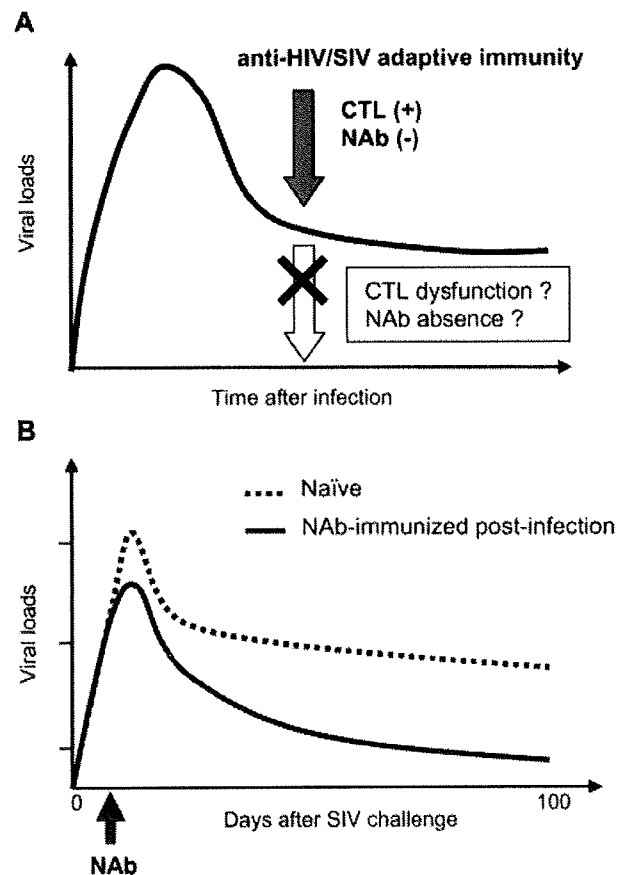


Figure 1. Schema for indicating changes in viral loads in HIV/SIV infections. (A) Persistent HIV/SIV natural infection. Virus-specific CTL responses play a central role in the resolution from viremia peak to the set point (indicated by a black arrow), whereas NAb induction is inefficient in this early phase. Yet viral replication persists and its mechanism has been unclear; speculations include CTL dysfunction, lack of memory CD4<sup>+</sup> T-cell help and absence of NAb responses. (B) Effect of post-infection passive immunisation with polyclonal NABs on primary SIVmac239 replication in rhesus macaques [94]. NAb-immunised macaques showed lower or undetectable viral loads compared to naive controls

duals possessing *HLA-B\*57* have been indicated to show a better prognosis with lower viral loads, and involvement of *HLA-B\*57*-restricted epitope-specific CTL responses in this viral control has been suggested [50]. This notion is back to back with the existence of HLA alleles associated with rapid disease progression such as *HLA-B\*35* [44]. Similarly, association between MHC class I (MHC-I) genotypes and viral loads has been intensively investigated in macaque models of SIV infection. In Indian rhesus macaques, association of *Mamu-A\*01*, *Mamu-A\*02*, *Mamu-B\*08* and

*Mamu-B\*17* with enhanced SIV control has been indicated [35,51–54], while *Mamu-B\*01* and *Mamu-A\*08* have been observed as alleles associated with rapid disease progression [35]. It is reasonable to surmise that the overall spectrum of MHC-I-restricted epitope-specific CTL responses is the major determinant for the association, and this inherent, MHC-I-dependent difference in host resistance to viral infection might modify vaccine efficacy. Indeed, we have recently shown consistent vaccine-based SIV control in a group of Burmese rhesus macaques sharing an MHC-I haplotype, suggesting a possibility of MHC-dependent attainment of vaccine-based HIV/SIV control with effective CTL induction [29].

Thus the potency of CTLs largely depends on the host genetic backgrounds, while viral genome polymorphisms can also affect CTL efficacy. Selection of viral mutations resulting in escape from CTL recognition is frequently observed in HIV infections, and potent CTLs often select for escape mutations even at the cost of viral fitness [29,55–59], suggesting that CTLs specific for viral epitopes derived from structurally conserved regions may exert stronger suppressive effect on viral replication. Viral replication *in vivo* may likely be affected by a single CTL escape mutation [50,60–62], while a clear association of viremia recrudescence with accumulation of multiple CTL escape mutations has been observed in HIV/SIV infections, indicating possible involvement of multiple epitope-specific CTLs in viral control [59].

Broad, multiple epitope-specific CTL induction seems preferable for viral control, but it may not always result in advantageous induction of effective CTL responses due to the inherent hierarchy of CTLs [63]. For instance, there may be a possibility of disturbance in subdominant effective CTL responses by dominant ineffective CTL induction. Furthermore, whether oligoclonal immunodominant CTL responses or polyclonal subdominant responses are superior in viral control remains unclear. Analysis of SIVmac239-infected Indian rhesus macaques exhibiting low viral loads (elite controllers) has shown dominant Gag-specific CTL responses during primary viral control followed by induction of subdominant CTL responses responsible for the control in the chronic phase [64]. Accordingly, our long-term follow up of Burmese rhesus macaques exhibiting vaccine-

based control of SIVmac239 replication has shown disappearance of Gag-specific CTL responses dominant during primary viral control and subsequent appearance of non-Gag-specific CTL responses responsible for sustained control in the chronic phase [65].

Turning to the potency of individual CTLs *in vivo*, numbers of attempts have been made for its evaluation. In addition to the analyses of CTL frequency, its pattern of cytokine secretion, its direct cytolytic activity, and avidity of its T cell receptor (TCR) with the epitope-MHC complex, the importance of examining its suppressive effect on viral replication *in vitro* has been suggested, although the levels of *in vitro* anti-viral efficacy resulting in viral control *in vivo* have not been determined [66,67]. Our recently established assay for measurement of *in vitro* anti-viral efficacy of bulk CD8<sup>+</sup> cells derived from peripheral blood may be helpful for evaluation of *in vivo* anti-viral efficacy of overall CTL responses [68]. Interestingly, a report has recently indicated that Gag-specific CTLs can respond to SIV infection more rapidly *in vitro* compared with Tat- and Env-specific CTLs, presumably by recognising virion-derived Gag epitopes presented in the early phase post-viral entry, suggesting a possibility of modification of CTL anti-viral efficacy by its recognition/killing kinetics during the viral replication cycle [69]. In support of this result, an inverse correlation between the breadth of Gag-specific CTL responses and viral loads has been indicated in a large-scale African cohort and SIV-infected rhesus macaques [69,70].

#### ANTI-HIV NAB POTENCY

Another major issue to be addressed in natural HIV/SIV infections is the characteristic lack of potent neutralising antibody (NAb) responses in the acute phase (Figure 1) [71]. To date, disoriented and delayed virus-specific antibody responses have been observed in the subacute phase, which permit consequent viral escape from neutralisation [72–74]. Monoclonal anti-CD20 antibody-mediated B-cell depletion experiments in macaques during the acute phase of SIV infection have suggested a possibility of modest contribution of such inefficient humoral immune responses to partial resolution from primary infection [75–77], but the effect of the absence of efficient post-infection NAb responses on

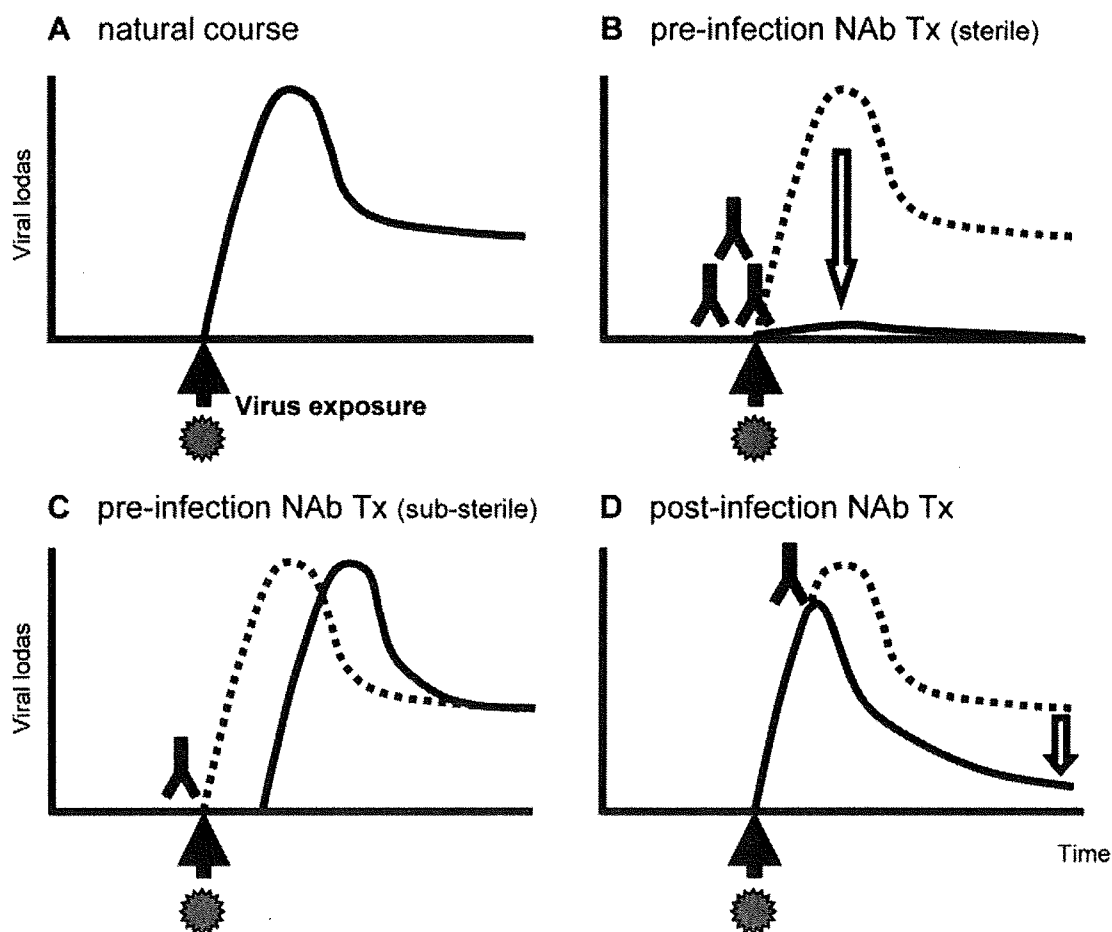


Figure 2. A schematic comparison of viral loads in NAb passive immunisation experiments. (A) In HIV/SIV natural infections, absence of NAb induction accompanies failure in primary viral control. (B) In pre-infection passive NAb immunisation, NAb titers overwhelming the challenged virus inoculum in theory provide an ultimate reduction in the peak viral load. (C) Pre-infection passive immunisation with insufficient doses of NAb for sterile protection may cause transient delay or reduction in viral replication but permit persistent viral replication. (D) Post-infection passive NAb immunisation results in reduction of set-point viral loads beyond the period of detection of the administered NAb responses

primary HIV/SIV replication has not been formally scrutinised.

*In vivo* anti-viral activity of several monoclonal anti-HIV-1 NAb such as b12, 2F5, 4E10 and 2G12 has been intensively assessed by pre-challenge passive NAb immunisation experiments against CXCR4-tropic SHIV infection in macaques [78–81]. These studies indicated a possibility of dose-dependent sterile protection (Figure 2), but the neutralising titers required for the protection were relatively high, suggesting difficulty in attainment and maintenance of those titers by prophylactic vaccination [82]. Sterile protection against CCR5-tropic SIV has not consistently

been achieved by pre-challenge administration of antiserum or polyclonal antibodies [83,84] while protection against CCR5-tropic SHIV by pre-challenge monoclonal NAb administration has been indicated [85–87].

Compared with the appreciable sterile protective activity of pre-existing NAb against viral challenge, post-infection NAb efficacy against established immunodeficiency virus infection has been a field of ambiguity. In one study, NAb administration at 6 h after CXCR4-tropic SHIV<sub>DH12</sub> challenge provided sterile protection while passive immunisation at 24 h post-challenge did not, suggesting a moment between 6 and 24 h

post-infection as the threshold of post-exposure prophylaxis efficacy [88]. In another, NAb passive immunisation of rhesus macaques at day 1 and day 14 after CCR5-tropic SIVsmE660 challenge exhibited divergent patterns of infection and suggested a possibility of its suppressive effect on viral replication in some of them [89,90]. Suppressive activities of passively infused anti-SIV antibodies on viral replication in SIVmac251-infected rapid progressors were not observed *in vivo* past the set point [91]. In human peripheral blood leukocyte-reconstituted SCID mice (hu-PBL-SCID mice), monoclonal anti-HIV-1 NAbs administered 3 days after HIV-1 challenge were overwhelmed by established viral replication whereas several hours post-challenge as well as pre-challenge NAb infusion provided sterile protection [92,93].

Our recent results have, however, clearly shown the potency of post-infection NAbs against immunodeficiency virus replication *in vivo*. We performed passive NAb immunisation post-infection in SIVmac239-challenged rhesus macaques by using polyclonal antibodies purified from chronically infected macaques with NAb induction. The passive immunisation at day 7 post-challenge, preceding peak replication, resulted in significant suppression of viral replication past the limited duration of detectable NAb responses (Figures 1 and 2D) [94]. *De novo* SIVmac239-NAb responses were not involved in this viral control. Analysis revealed immediate accumulation of viral RNA to peripheral lymph node dendritic cells (DCs) after NAb passive immunisation, and pulsing of DCs with antibody-neutralised SIV activated virus-specific CD4<sup>+</sup> T lymphocytes *in vitro* in an antibody Fc-dependent manner, suggesting antibody-mediated virion uptake to DCs and a possibility of enhanced T cell priming. This study provided evidence indicating that potent NAb induction post-infection can in fact result in primary immunodeficiency virus control, and points out a possibility of non-sterile HIV control by prophylactic vaccine-induced, sub-sterile titers of NAbs post-infection, lending support for current efforts on vaccine induction of NAbs. Reversely, it suggested direct and indirect contribution of primary NAb absence to viral persistence.

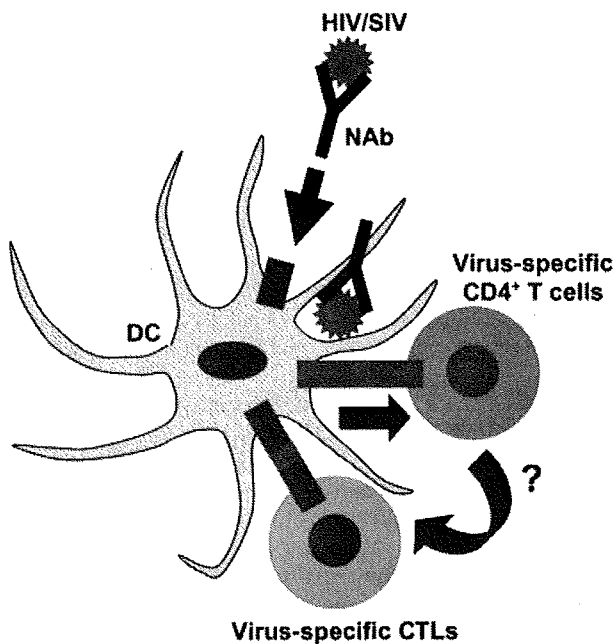
The current mainstream of vaccine strategy for NAb induction is a rational design of immunogens mimicking broadly reactive neutralisation epitopes based on structural approaches on the

HIV/SIV envelope protein and NAbs [71,95–99]. Broadly reactive monoclonal NAbs such as b12, 447-52D, 2G12, 2F5 and 4E10 have been characterised [100–103], and some have recently been confirmed to be potent to suppress rebound viremia when administered to HIV-infected humans undergoing structured treatment interruption (STI) [104]. Yet viral escape from autologous NAb responses in HIV-infected humans has been reported to occur in a manner of rapid and repetitive chase accompanying conformational masking, which may continuously limit the total neutralisation spectrum [72–74,105]. It is of our great interest if or how vaccine-induced primary and secondary NAb responses can overcome this propensity of escape and provide viral control.

#### A POSSIBILITY OF NON-STERILE HIV CONTROL

While given the difficulty in sterile HIV control, our passive immunisation study has indicated a possibility of non-sterile viral control by transient NAb responses post-infection [94], which may reflect another essence of immune dysfunction at the initial stage of HIV infection. Inefficient primary NAb induction can be seen as the lack of one effector out of the two wings of adaptive immune responses, humoral and cellular, but in addition may also affect the remaining cellular immune responses and contribute to their dysfunction due to abrogated antigen presentation.

Activities of specific antibody-mediated pathogen internalisation conventionally categorised in the genre of opsonisation are well known to occur in responses against bacterial and parasitic infections [106], but their involvement in antigen presentation have been clarified only recently [107]. Possible involvement of antibody-mediated antigen presentation in modification of cellular immunity [108,109] has not been discussed directly in the context of antiviral adaptive immunity [110,111], and this synergistic mechanism has not drawn primary attention in self-remitting acute viral infections, where the appearance of anti-viral NAbs mostly results in viral control. NAbs may facilitate induction of virus-specific CD4<sup>+</sup> T lymphocytes via efficient virion uptake into DCs, in turn functionally supporting virus-specific cellular immunity behind the scenes and providing consistent, fail-safe control of viral replication in combination with augmented CTLs. Reversely,



**Figure 3.** A putative model of NABs synergising with virus-specific cellular immunity for HIV/SIV control. In the acute phase of viral infection, non-neutralising virus-specific antibodies may enhance antibody-mediated virion uptake into DCs leading to efficient antigen presentation to virus-specific CD4<sup>+</sup> T lymphocytes but fail to protect these cells from viral infection. In contrast, virus-specific NABs, if induced, can not only induce but also protect virus-specific CD4<sup>+</sup> T cells, resulting in elicitation of virus-specific CD4<sup>+</sup> T-cell responses. Whether the protection of virus-specific CD4<sup>+</sup> T cells results in modification of virus-specific CTL function is an open question

abrogation of this process in infections of neutralisation-resistant viruses such as HIV and SIV may result in establishment of persistent viral infection in the absence of potent cellular immune responses [112].

Elicitation of virus-specific CD4<sup>+</sup> T lymphocytes could result in expansion of the targets of HIV infection [113]. In the antibody-mediated enhancement of antigen presentation leading to cellular immune induction described above, virus neutralisation activity would be required at least during the acute phase for protection of the induced virus-specific CD4<sup>+</sup> T lymphocytes from HIV/SIV infection via transmission from virus-exposed DCs [114,115]. Thus, our passive NAb immunisation study highlighted the active and protective role of NABs in induction of functional virus-specific CD4<sup>+</sup> T-cell responses (Figure 3).

## PERSPECTIVES

Elucidation of the determinants for HIV persistence would contribute to clarification of the requisites for viral control. Full commitment of potent CTLs under MHC restriction in concert with MHC-independent NAB responses would result in inhibition of persistent HIV infection. Further analyses determining the requisites for viral control may reveal novel endpoints for well-concerted elicitation of anti-HIV immunity by prophylactic vaccination.

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