

CTL-Mediated Selective Pressure Influences Dynamic Evolution and Pathogenic Functions of HIV-1 Nef¹

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HIV-1 Nef plays multiple roles in modulating immune responses, even though it is a dominant CTL target itself. How Nef accomplishes the balance between such conflicting selective pressures remains elusive. By genetic and functional studies, we found that Arg⁷⁵Thr and Tyr⁸⁵Phe mutations, located in a well-conserved proline-rich region in Nef, were differently associated with escape from CTL responses specific for two overlapping HLA-B35-restricted epitopes. CTLs specific for an epitope, that selected Tyr⁸⁵Phe, were elicited earlier and had more potent functional avidities than did those that selected Arg⁷⁵Thr. Although the double mutant could escape from both CTLs, the mutations are rarely observed in combination naturally. Introduction of both mutations reduced Nef's HLA class I down-regulation activity and increased the susceptibility of virus-infected cells to recognition by CTLs targeting other epitopes. Moreover, the mutant Nef was impaired in the association with activated cellular kinases and in the enhancement of viral replication. These results highlight CTL immunosurveillance as important modulators of Nef's biological activity in the infected host. *The Journal of Immunology*, 2008, 180: 1107–1116.

The accessory gene product Nef is a critical determinant for the pathogenesis of the primate lentiviruses, HIV-1, HIV-2, and SIV. The importance of Nef in viral pathogenesis was first shown in rhesus macaques, where a large deletion of the *nef* gene severely reduced SIV pathogenicity (1). This finding was supported by the fact that a cohort consisting of one blood donor and eight transfusion recipients infected with Nef-defective HIV-1 demonstrated dramatically decreased rates of disease progression (2, 3). The impact on the outcome of HIV/SIV infection likely results from the synergy of multiple functions exerted by Nef that may be differentially regulated over time (4). Nef enhances viral replication and virion infectivity (5–7) and affects cells in many ways, including altering T cell activation and maturation (6, 8–11), subverting the apoptotic machinery, and down-regulating a number of cell surface receptors including CD4 and HLA class I (7, 12, 13). The down-regulation of MHC class I (MHC-I)³ by SIV Nef in rhesus macaques limits CD8 T cell-mediated killing and contributes to the pathogenic effect of Nef in

vivo, highlighting the importance of Nef-mediated immunoevasion to facilitate disease progression (14).

The initial peak of viral replication after primary HIV infection begins to decline simultaneously with the appearance of HIV-specific CD8 T lymphocytes (15, 16) that can eliminate HIV-infected cells directly by MHC-I-restricted cytotoxicity or indirectly through the production of soluble factors such as cytokines and chemokines (17, 18). The biological relevance of HIV-specific CTLs in HIV infection is also supported by the results of in vivo studies demonstrating a dramatic rise of viremia and an accelerated clinical disease progression in SIV-infected macaques after the artificial depletion of CD8⁺ cells (19, 20). Among HIV proteins targeted by HIV-specific CTLs, HIV Nef protein is expressed at high levels early in an HIV infection (21) and elicits a strong CTL response in a number of subjects (22, 23). Most antigenic determinants are located within a multirestricted, immunodominant central region spanning residues 73–94 and 113–147 (22, 24), including a highly conserved proline-rich region containing an Src homology 3 (SH3)-binding motif, PxxP (Nef_{73–82}: PVR-PQVPLRP) critical for several but not all Nef functions (6, 7, 25–27). In particular, HIV-infected subjects expressing the HLA-B*3501 molecule, which prefers a proline residue on the second position of its antigenic peptides, show vigorous HLA-B35-restricted CTL responses toward the proline-rich region of Nef (22, 28, 29).

In the present study, we focused on HLA-B35-restricted CD8 T cell responses toward the functionally important PxxP region of HIV-1 Nef to ask whether CTL responses can impose constraints on Nef activity. Remarkably, sequence analysis of autologous viruses revealed the association of two different mutations with patients carrying HLA-B*35, one of which was earlier shown to be a naturally occurring variation that can modulate Nef functions (25). Further detailed analyses of CTL responses and Nef functions demonstrated that Nef balances between the conflicting selective pressures during the course of an HIV-1 infection. These findings suggest an important role of HIV-1 Nef-specific CTL responses in the control of Nef activity during the progression of an HIV-1 infection.

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³ Abbreviations used in this paper: MHC-I, MHC class I; SH3, Src homology 3; 7-AAD, 7-aminoactinomycin D; wt, wild type; IVKA, in vitro kinase assay.

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Table I. Summary of HLA-B35⁺ subjects used in this study^a

Pt.	HLA Class I Allele	Months since Seroconversion	Viral Load (log ₁₀ /ml)	CD4 (mm ⁻³)	Antiretroviral Therapy	Nef Sequence	PBMC Availability
001	A2402/A2603, B3501/B4002	132	ND	227	+	RPQVPLRPMTF	-
		192	3.9	223	+	TPQVPLRPMTY	+
003	A2402/A2601, B3501/B5101	72	ND	480	-	RPQVPLRPMTF	-
		144	ND	252	+	TPQVPLRPMTY	+
006	A24/A26, B35/B52	48	ND	102	+	RPQVPLRPMTF	-
015	A11/A24, B35/B54	147	BD	383	+	TPQVPLRPMTY	+
016	A26/A33, B35/B44	7	ND	43	-	RPQVPLRPMTF	-
017	A2/A24, B35/B48	192	BD	254	+	TPQVPLRPMTY	-
019	A2402/-, B3501/B5201	18	4.7	524	-	RPQVPLRPMTF	-
		80	BD	1574	+	TPQVPLRPMTY	+
025	A24/A31, B35	26	ND	50	+	TPQVPLRPMTY	-
027	A24/A26, B35/B44	4	ND	84	+	RPQVPLRPMTF	-
033	A0207/A3101, B3501/B4601	72	5.3	326	-	TPQVPLRPMTY	+
034	A2402/A2601, B3501/B4801	48	4.4	201	-	TPQVPLRPMTY	+
042	A24/A31, B35/B60	59	3.8	311	-	TPQVPLRPMTY	+
046	A2, B35/B61	48	BD	263	+	TPQVPLRPMTY	+
099	A2402/-, B3501/B61	12	3.9	984	-	RPQVPLRPMTF	+
100	A2601/-, B3501/B4001	16	5.0	614	-	RPQVPLRPMTF	+
102	A2402/A0206, B3501/B0702	17	2.8	482	-	RPQVPLRPMTF	+
131	A2402/A0207, B3501/B4601	10	1.9	563	+	RPQVPLRPMTF	+
136	A2402/A2601, B3501/B5201	15	4.4	308	-	RPQVPLRPMTF	+
141	A0201/A3101, B3501/B5401	10	5.3	382	-	RPQVPLRPMTY	+
		20	5.1	360	+	RPQVPLRPMTF	+
145	A0207/A2601, B3501/B5101	6	BD	645	-	RPQVPLRPMTY	-
		18	4.6	685	-	RPQVPLRPMTF	+
161	A2402/A2601, B3501/B5401	13	2.3	955	-	RPQVPLRPMTF	+
168	A2601/-, B3501/-	5	2.3	408	+	RPQVPLRPMTY	+
178	A2601/A3101, B3501/B4601	8	2.7	568	+	RPQVPLRPMTY	+

^a ND, Not determined; BD, below detection limit. Bold, underlined letters in the sequences represent mutations.

Materials and Methods

Subjects

A total of 23 individuals (HLA-B35⁺) with HIV infection followed at the AIDS Clinical Center (International Medical Center of Japan) were enrolled for functional analysis of HIV-specific CD8 T cells and autologous HIV-1 sequence analysis in this study. Subjects were selected based on the availability of plasma and PBMC samples as well as HLA-B*35 expression. Clinical data of all subjects are listed in Table I. Patients 01, 03, and 17 are hemophiliacs who had been infected with HIV-1 through contaminated blood products. Because the time of HIV-1 infection or the time of seroconversion was not known for these subjects, we suspect that their infection occurred in 1983 based on a survey done on Japanese hemophiliacs. In addition, 41 individuals (negative for HLA-B*35) with HIV infections were enrolled for autologous HIV-1 sequence analysis. The study was conducted in accordance with the human experimentation guidelines of the International Medical Center of Japan and Kumamoto University.

Sequence analysis of autologous HIV-1

HIV-1 particles were precipitated by ultracentrifugation (50,000 rpm, 30 min) of patients' plasma, after which the viral RNA was extracted from them. DNA fragments encoding Nef proteins were amplified by a nested PCR, gel purified, and sequenced directly as described (29). The fragments were cloned into a plasmid and then sequenced for phylogenetic tree analysis.

For phylogenetic tree analysis of intrapatient evolution of the *nef* gene (HXB2 coordinate, 8932-9555), nucleotide sequences were initially aligned by using Clustal W and then manually adjusted to maximize alignment of codon triplet as needed. Regions that could not be unambiguously aligned were removed from subsequent phylogenetic analysis. The MEGA3 package of sequence analysis programs was used for detailed phylogenetic analysis (30). Pairwise evolutionary distances were calculated by using the Kimura 2-parameter model for estimation of distances, and phylogenetic trees were constructed by the neighbor-joining method.

Generation of T cell clones

CTL clones or lines were established by stimulation of PBMC with a synthetic peptide, as previously described (31). Briefly, a bulk CTL culture was seeded at a density of 0.8 or 5 cells/well with a cloning mixture (ir-

radiated allogeneic PBMC and C1R-B3501 cells pulsed with 1 μM peptide in RPMI 1640 with 10% FCS and 100 U/ml rIL-2). Two weeks later, cells showing substantial Ag-specific cytolytic activity were maintained in the medium with peptide stimulation weekly.

Preparation of HIV-1 variants

The full-length HIV-1 pNL43 derivatives in which the *nef* gene was completely removed (pNL43ΔNef) or replaced with SF2 *nef* (pNL43SF2Nef) were created earlier (32). The Arg⁷⁵ to Thr and Tyr⁸⁵ to Phe mutations were achieved by site-directed mutagenesis based on SF2 *nef*. 293T cells were transfected with each of the constructs, and the infectious HIV-1 virions released into the medium were collected 48 h later. The p24 Ag concentrations of virus stocks were determined by p24 Ag ELISA.

Flow cytometric analysis

HLA stabilization assay. Peptide-binding activity for HLA-B*3501 was assessed by an HLA stabilization assay using RMA-S cells expressing HLA-B*3501 as described earlier (31).

HLA tetramer analysis. The HLA-B3501 tetramers in complex with the VY8 and RY11 peptides were prepared as previously described (31). Cryopreserved PBMC of HIV-positive (2×10^6) or -negative donors (3×10^6) were stained with the PE- and allophycocyanin-labeled tetramers at 37°C for 15 min followed by anti-CD8-PerCP (BD Biosciences/BD Pharmingen) and anti-CD3-FITC (DakoCytomation) at 4°C for 15 min. The CD3⁺CD8⁺ cells were gated and then analyzed for binding with the tetramers by flow cytometry (FACSCalibur; BD Biosciences).

Intracellular cytokine staining assay. Intracellular cytokine staining of Ag-specific CTL clones was done as previously described (33). Briefly, CTL clones (4×10^4 cells) were incubated with C1R-B3501 cells (4×10^4 cells) alone or pulsed with various concentrations of peptides for 6 h at 37°C in the presence of brefeldin A (10 μg/ml). The cells were stained first with anti-CD8 mAb and 7-aminoactinomycin D (7-AAD), permeabilized in a detergent buffer, and then stained with mAb specific for IFN-γ or TNF-α (BD Biosciences/BD Pharmingen).

Cytotoxic assays

Toward peptide-loaded cells. The cytotoxic activity of the CTL clones was determined by a standard ⁵¹Cr-release assay as described previously (31).

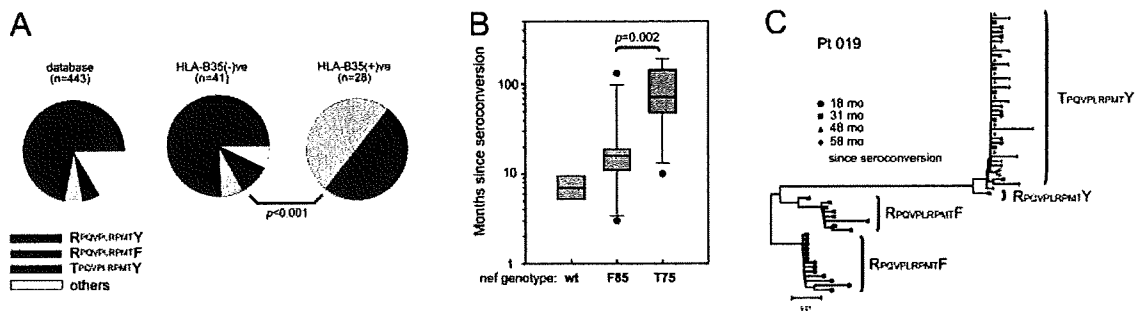


FIGURE 1. Dynamic evolution of autologous Nef sequences in HIV-infected individuals expressing HLA-B*35. **A**, Frequency of clones representing the HIV-1 Nef amino acid sequence at the RY11 epitope region as indicated in pie charts, based on the results from the Los Alamos database (*left*). The frequencies of individuals whose autologous viruses had the Nef amino acid sequences indicated when the plasma samples were collected from HIV-infected individuals negative (*middle*) or positive (*right*) for HLA-B*35 are shown. Statistical analysis was performed by using the χ^2 test. **B**, Differences in the duration of HIV infection (months since seroconversion) and the autologous *nef* genotypes, wt, Tyr⁸⁵Phe (F85) or Arg⁷⁵Thr (T75) in HLA-B35⁺ patients. Boxes indicate values between 25th and 75th percentiles. Horizontal lines across boxes indicate the median value \pm SD. Lines extend from the box to the highest and lowest values. Data include outliers (\bullet). Statistical analysis was performed by use of the Mann-Whitney *U* test. **C**, A neighbor-joining phylogenetic tree analysis of intrahost evolution of autologous *nef* gene. Plasma HIV-1 RNA samples were collected from patient 19 at the indicated time points. The *nef* gene segment was PCR-amplified, cloned into a plasmid, and sequenced ($n = 61$). The amino acid sequences of the epitopic region are indicated at the *right* of the tree.

Toward HIV-infected primary CD4⁺ cells. CD4⁺ cells were purified from PBMC taken freshly from HIV-negative donors expressing HLA-B*3501 by using a magnetic cell separation system (Miltenyi Biotec) and stimulated with PHA (3 μ g/ml; Sigma-Aldrich) for 4 days. The activated CD4⁺ cells were then infected at relatively high titers (1 μ g of p24 Ag per 10⁶ cells) with wild-type (wt) or various variant HIV-1 for 6 h, and incubated for an additional 3–5 days. The HIV-infected CD4⁺ cells (4000 cells/well) were then mixed with CTL clones at various ET ratios for 6 h at 37°C after having been labeled with ⁵¹Cr. It should be noted that 30 \pm 5% of the cells were p24 Ag⁺ as revealed by intracellular flow cytometric analysis of HIV-infected CD4⁺ cells.

HIV-1 replication assay

PBMC samples freshly isolated from HIV-seronegative donors were first infected with wt or various variant HIV-1s at 5 ng of p24 Ag in 5 \times 10⁵ cells for 4 h. The cells were washed, suspended in a culture medium (RPMI 1640, 10% FCS), and seeded in a 96-well plate at 10⁵ cells/well. Three days later, the cells were stimulated with PHA at 2 μ g/ml. Culture supernatants were collected and replaced with a fresh medium supplemented with human rIL-2 every 3 days. To monitor viral replication, we determined the amount of p24 Ag in the culture supernatant by a specific ELISA.

In vitro kinase assay (IVKA)

IVKA was performed as described earlier (34). Briefly, Jurkat cells (10⁷) expressing wt or various variant Nef-GFP fusion proteins were lysed in KEB (50 mM Tris-HCl (pH 8), containing 137 mM NaCl, 2 mM EDTA, 0.5% Nonidet P-40, Na₃VO₄, protease inhibitor mixture) at 24 h postelectroporation. Cleared lysates were immunoprecipitated with anti-GFP polyclonal Ab and the immunoprecipitates were resuspended in KAB (50 mM HEPES (pH 8), containing 150 mM NaCl, 5 mM EDTA, 0.02% Triton X-100, 10 mM MgCl₂) with 10 μ Ci of [γ -³²P]ATP (Amersham) for 5 min. Bound proteins were then separated by SDS-PAGE and subjected to phosphorimager (Bio-Rad) visualization and quantification. Levels of immunoprecipitated Nef-GFP were determined by Western-blotting of the IVKA reactions and subsequent quantification by LICOR Odyssey.

Statistical analysis

Statistical analysis and graphical presentations were done by using a computer program, SigmaPlot, with a statistical package (Hulinks). Unless otherwise indicated, results were given as median or mean \pm SD. Statistical analysis of significance (*p* values) was based on the χ^2 , Mann-Whitney rank sum, or two-tailed *t* test, or a one-way ANOVA, where applicable, and *p* < 0.05 was considered to be significant.

Results

Evolution of PxxP region of Nef associated with HLA-B*35

We previously reported that the Arg⁷⁵ to Thr mutation (T75, amino acid numbers based on SF2 strain) in Nef was functionally asso-

ciated with escape from a CTL response specific for the RY11 epitope (Nef_{75–85}: RPQVPLRPMTY) presented by HLA-B*35 in patients in the chronic phase of an HIV-1 infection (29). When we recruited more subjects including some in the early phase of infection and analyzed their autologous *nef* genotypes, another mutation, Tyr⁸⁵ to Phe (F85), was also found in some of these HLA-B35⁺ patients (Table I). As a result, ~50 and 40% of autologous *nef* alleles encoded the F85 and T75 mutation, respectively, in patients with HLA-B*35 (Fig. 1A), whereas either mutation was found in only ~5% of patients negative for HLA-B*35 as well as in all sequences from the Los Alamos HIV database (www.hiv.lanl.gov). These data demonstrate that both T75 and F85 single mutations in Nef were differently associated with autologous viruses in patients with HLA-B*35 expression.

Because the F85 mutation was seemingly found in HLA-B35⁺ HIV-infected subjects <2-year since seroconversion, we next analyzed the correlations between the duration of HIV infection and autologous *nef* genotypes in HLA-B35⁺ subjects (Fig. 1B). The median (\pm SD) number of months since seroconversion in subjects with autologous wt, F85, and T75 Nef sequences was 7.0 \pm 1.1, 16.0 \pm 9.4, and 72.0 \pm 19.5, respectively (Fig. 1B). This cross-sectional analysis demonstrated that HIV-1 acquired the F85 mutation earlier and the T75 mutation later concomitant with the reversion of the F85 mutation to the wt during an HIV-1 infection in subjects with HLA-B*35 expression.

Intrahost evolution of Nef mutations associated with HLA-B*35

To ask whether these mutations and reversions occurred sequentially within a subject, we collected plasma viral RNA samples at additional time points from three subjects, patients 001, 003, and 019. The amino acid sequence in the epitopic region sequentially changed from RPQVPLRPMTF to TPQVPLRPMTY (different amino acid residues are underlined; referred to as RF and TY, respectively, hereafter), within each subject (Table I).

To further characterize the intrapatient evolution in this region, the *nef* genotypes of plasma HIV-1 RNA of patient 19 were determined at several time points. The neighbor-joining phylogenetic tree showed that successive fixation of advantageous mutations and the extinction of unfavorable lineages had occurred, suggesting that the focus of the CTL response and/or the balance between the selective pressures that were at work on the epitope had changed over time (Fig. 1C). It is of interest to note that when

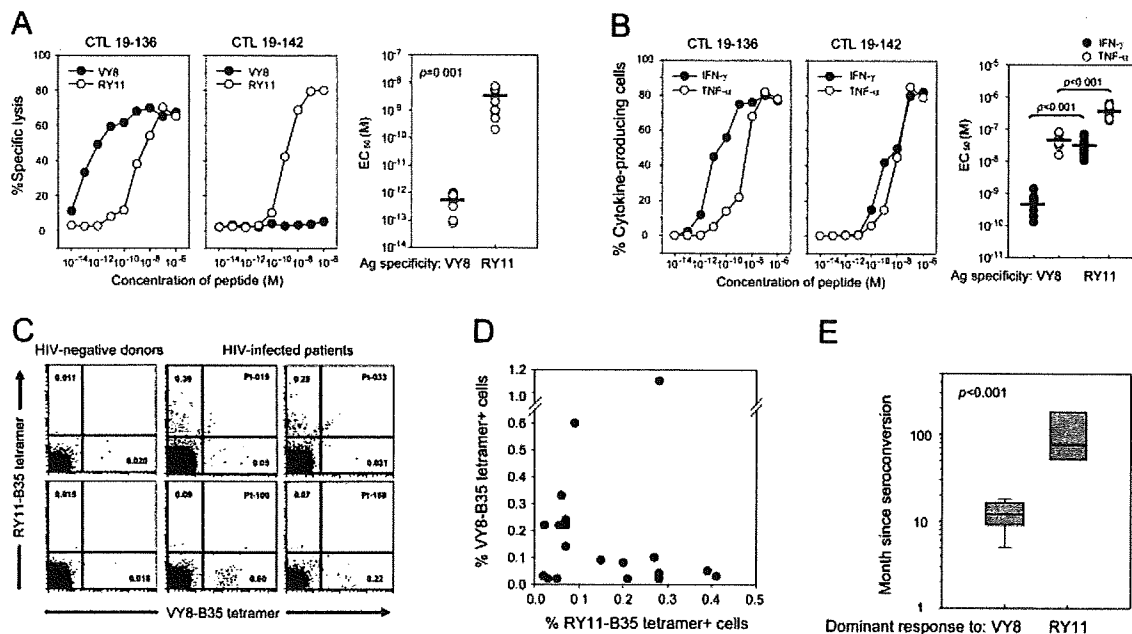


FIGURE 2. HLA-B35-restricted CTL responses toward PxxP region of Nef. *A* and *B*, Cytotoxic activity (*A*) and cytokine-producing activity (*B*) of VY8 or RY11-specific CTL clones generated from multiple donors (patients 01, 03, 19, and 136) were analyzed by using C1R-B3501 cells pulsed with various concentrations of the indicated peptides (Effector to target cell ratio = 2). Representative peptide-titration data obtained by CTL clones 19-136 and 19-142 (generated from PBMC of patient 19) specific for VY8 and RY11, respectively, are shown (*left* and *middle* panels). EC_{50} values thus obtained from an additional nine clones (total 10 clones each) generated from multiple donors are shown (*right* panels). Horizontal bars indicate means, and statistical analysis were performed by using the two-tailed *t* test. *n.s.*, not significant. Cytotoxic activity and cytokine-producing activity in the absence of the cognate peptide were always below 3 and 0.1%, respectively. *C* and *D*, PBMC samples isolated from 5 HIV-negative and 19 HIV-positive donors were analyzed by flow cytometry by using HLA-B*3501 tetramers in complex with VY8 or RY11 peptides. Cells that were $CD3^+CD8^+$ were gated and then analyzed for their frequency of HLA-tetramer⁺ cells. Some representative dot plots of 2 HIV-negative and 4 HIV-positive donors are shown with frequencies of HLA-tetramer⁺ cells in each dot plot (*C*). The frequencies of HLA-tetramer⁺ cells for VY8 and RY11 epitopes in each individual subject are shown (*D*). It should be noted that reversing the fluorochromes of the tetramers gave identical results and that the background level of HLA-tetramer staining was 0.022%, as determined by the data from 5 HIV-negative donors (mean + 3 SD). *E*, Differences in months since seroconversion between the subject groups who showed dominant CD8 T cell responses to VY8 or RY11 epitope. Boxes indicate values between 25th and 75th percentiles. Horizontal lines across boxes indicate the median value \pm SD. Lines extend from the box to the highest and lowest values. Statistical analysis was performed by using the Mann-Whitney *U* test.

the type of Nef variants changed from RF to TY by two amino acid substitutions, the Nef variant with two mutations, i.e., TPQVPLRPMTF (referred to as TF), was not apparently selected. Rather, the T75 mutation appeared to arise from a different lineage of viral quasiespecies in this host (Fig. 1C). In addition, the TF double mutation was barely found in Los Alamos HIV database (1 of 443 entries), suggesting that the combination of these two mutations causes a significant fitness cost in viral replication in vivo.

Fine epitope mapping of HLA-B35-restricted CD8 T cells to PxxP region of Nef

We next examined HLA-B35-restricted CD8 T cell responses toward the PxxP region of Nef. Although HLA-B*35 prefers proline at position 2 in its binding peptide and this region can provide various candidate peptides for CTL epitopes, only two peptides, VY8 (Nef₇₈₋₈₅: VPLRPMTY) and RY11 (Nef₇₅₋₈₅: RPQVPLRPMTY), showed substantial CTL responses in the HLA-B35⁺ subjects (data not shown), confirming previous observations (29, 35, 36). However, it is possible that VY8 is the minimum epitope for CTL, because VY8 is entirely contained within RY11. To clarify this issue, we generated CTL clones by stimulating PBMC of HLA-B35⁺ HIV-infected patients with either VY8 or RY11 peptide and then analyzed their Ag specificity by cytotoxic assays. CTL clone 136 generated from subject patient 19 (designated CTL 19-136) with VY8 stimulation showed cytolytic activities toward target cells pulsed with either peptide, although VY8 was a ~1000-fold more sensitive ligand than RY11 (Fig. 2A). In con-

trast, another CTL clone, CTL 19-142, which had been stimulated with RY11, showed cytolytic activity toward C1R-B3501 cells pulsed with RY11 but not toward those pulsed with VY8 (Fig. 2A). Furthermore, when staining CTL clones with HLA-B*3501 tetramers in complex with VY8 and RY11, CTL 19-136 and 19-142 exclusively bound the VY8- and RY11-B35 tetramers, respectively (data not shown). These data indicate that VY8 and RY11 were different optimal epitopes presented by HLA-B3501 and are recognized by a different set of CTLs.

During the peptide-titration analysis, we noticed that CTL 19-136 had much higher functional avidity for its cognate peptide than CTL 19-142, with the EC_{50} values toward the cognate Ags of CTL 19-136 and 19-142 being 2.81×10^{-13} and 7.50×10^{-10} M, respectively (Fig. 2A). We further generated CTL clones from PBMC of three additional subjects, patients 001, 003, and 033, and determined their functional avidity toward each cognate Ag. Although the functional avidity of these CTL clones were different even within the same specificity (~30-fold), VY8-specific CTL clones had more potent functional avidity than RY11-specific ones (~5000-fold), as the mean EC_{50} values of VY8- and RY11-specific CTL clones were $5.29 \pm 1.13 \times 10^{-13}$ and $3.14 \pm 0.82 \times 10^{-9}$ M, respectively (Fig. 2B).

Furthermore, evaluating the CTL sensitivity by Ag-specific IFN- γ and TNF- α production revealed that VY8-specific CTLs also showed more potent functional avidity than RY11-specific ones, as mean EC_{50} values for IFN- γ secretion were $5.30 \pm 1.21 \times 10^{-10}$ and $3.50 \pm 0.61 \times 10^{-8}$ M, and those for TNF- α

secretion, $5.02 \pm 0.69 \times 10^{-8}$ M and $3.75 \pm 0.48 \times 10^{-7}$ M, for VY8- and RY11-specific clones, respectively (Fig. 2B). However, it is interesting to note that the difference in avidity for cytokine production between VY8- and RY11-specific CTLs was smaller than that observed in cytotoxic activity (Fig. 2, A and B).

Analysis of HLA-B35-restricted CD8 T cell responses to the PxxP region of Nef ex vivo

We next examined the frequency of VY8- and RY11-specific CD8⁺ cells in patients' PBMC ex vivo by using HLA-B35 tetramers in complex with VY8 and RY11 as shown in the representative data in Fig. 2C. The background level of the HLA-tetramer analysis was considered to be 0.022% (mean + 3 SD) as the overall frequency of HLA-tetramer⁺ cells in HIV-negative donors ($n = 6$) was $0.0153 \pm 0.0022\%$. The frequency of HLA-tetramer⁺ cells in HIV-infected subjects ($n = 19$) was 0.198 ± 0.060 and 0.160 ± 0.029 for VY8 and RY11 epitopes, respectively, and both responses were not statistically different overall ($p = 0.58$, paired t test).

Interestingly, looking at the frequencies of HLA-tetramer⁺ cells in each individual subject, every subject showed a response to either the VY8 or RY11 epitope but not to both epitopes simultaneously (Fig. 2D). The median (\pm SD) number of months since seroconversion in subjects who had dominant response to VY8 or RY11 was 13.0 ± 1.4 or 76.0 ± 19 , respectively (Fig. 2E), suggesting an immunological shift from VY8 to RY11 in HLA-B35-restricted CD8 T cell responses during the course of their HIV infection.

Effects of antigenic variations on VY8- and RY11-specific CTLs

We next asked whether Nef mutations affected the binding between epitope peptides and HLA-B*3501. The HLA-I stabilization assay using RMA-S cells expressing HLA-B*3501 showed that the VY8 and RY11 peptides bound HLA-B*3501 comparably, as the EC₅₀ values for their binding activities were $20.4 \pm 7.55 \times 10^{-5}$ and $4.65 \pm 1.63 \times 10^{-5}$ M, respectively. Although the Phe substitution at the C terminus of either peptide (VY8-8F and RY11-11F) did not change their binding activities, the Thr substitution at the N terminus of RY11 (RY11-1T) resulted in \sim 10-fold increased binding activity. These data indicate that the binding activity of all peptides tested were within the range of HLA-B3501-restricted CTL epitopes (29, 31, 36, 37).

We then tested the cytotoxic activity of CTL clones toward C1R-B3501 cells pulsed with the variant peptides. A VY8-specific CTL clone, CTL 19-136, showed \sim 1000-fold decreased sensitivity toward VY8-8F (Fig. 3A). A similar trend was also observed in a panel of nine additional VY8-specific CTL clones as used in Fig. 2A, with mean EC₅₀ of $4.43 \pm 0.63 \times 10^{-13}$ and $8.23 \pm 3.08 \times 10^{-9}$ M for VY8 and VY8-8F, respectively (Fig. 3A). In contrast, a RY11-specific CTL clone, CTL 19-142, showed preserved sensitivity toward RY11-11F, whereas it showed $>$ 100-fold decreased sensitivity toward RY11-1T (Fig. 3B). Again, a panel of nine additional RY11-specific clones showed similar results, with mean EC₅₀ of $2.75 \pm 0.46 \times 10^{-9}$, $4.32 \pm 0.81 \times 10^{-9}$, and $8.47 \pm 3.28 \times 10^{-7}$ M for RY11, RY11-11F, and RY11-1T, respectively (Fig. 3B). These data indicate that VY8- and RY11-specific CTLs had different patterns of Ag fine specificity toward naturally arising variants, suggesting a direct association between the epitope evolution in autologous Nef proteins (Fig. 1B) and the kinetic change of CTL immunodominance in vivo (Fig. 2E).

Cytotoxic activity of VY8- and RY11-specific CTLs toward HIV-infected primary CD4 T cells

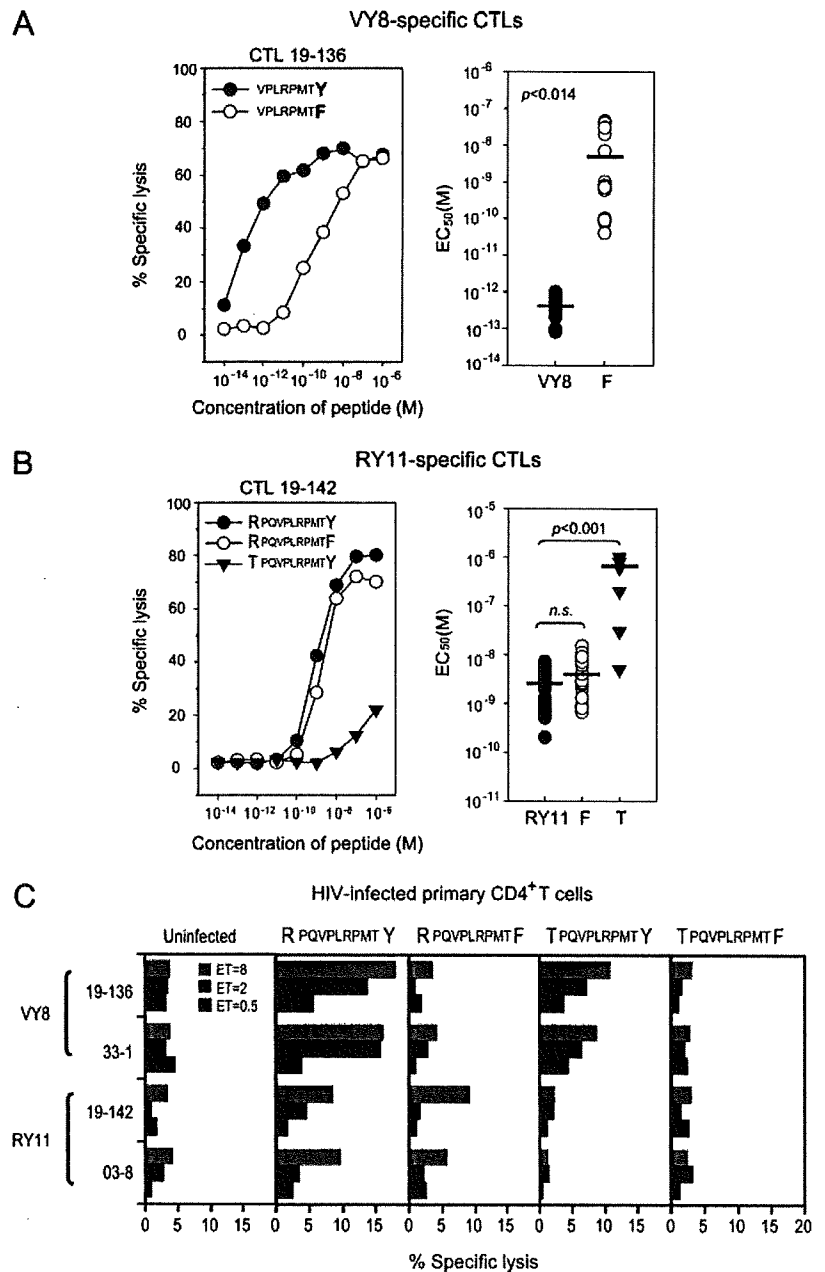
As HIV-infected CD4 T cells are the predominant target of HIV-specific CTLs in vivo, we next examined the cytotoxic activity of CTL clones toward primary CD4 T cells infected with wt or variant HIV-1. CD4 T cells prepared from HIV-negative donors (HLA-B3501⁺) were first stimulated with PHA and then infected with wt or various variant viruses. Four days later, \sim 30% of the cells appeared to be infected with all viruses, as revealed by intracellular flow cytometry for p24 Ag (data not shown), suggesting that all viruses had comparable replicative capacity when primary CD4 T cells were preactivated before infection (see below). Both CTLs specific for VY8 (CTL 19-136 and 33-1) and RY11 (CTL 19-142 and 03-8) were cytotoxic toward CD4 T cells infected with wt HIV-1 (Fig. 3C). However, the cytolytic activity of VY8-specific CTLs was more potent than that of RY11-specific ones, suggesting a link between potent functional avidity (Fig. 2A) and antiviral activity (Fig. 3C) of VY8-specific CTLs. VY8 and RY11-specific CTLs failed to kill primary CD4 T cells infected with F85 and T75 virus variants, respectively (Fig. 3C), consistent with the data obtained from the peptide-pulse experiments (Fig. 3, A and B). In contrast, although VY8-specific CTLs were cytotoxic toward primary CD4 T cells infected with the T75 variant virus, the activity toward the T75 variant was less than that toward the wt virus (Fig. 3C), suggesting that the T75 mutation, located in the region flanking the N terminus of VY8, could modulate the Ag-processing pathway for the generation of the VY8 epitope in these cells. Moreover, these data clearly show that the double mutant virus could escape from both types of CTLs (Fig. 3C). The fact that the mutations in autologous viruses is very rare in combination (Fig. 1A) suggests that the combination of both mutations imposes functional constraints on Nef.

Effects of Nef mutations on down-regulation of surface receptors

We next sought to identify such functional constraints of variants carrying these CTL escape mutations. Because Nef helps HIV-infected cells to evade CTL lysis by down-modulating cell surface HLA-I and the PxxP motif is critical for this activity (12, 17, 26, 38), we first examined whether the mutations affected the HLA-I down-regulation activity by Nef. Down-regulation of cell surface CD4, that is mediated by a different cellular pathway and does not involve the PxxP motif (27), was analyzed in parallel.

We isolated primary CD4 T cells from an HIV-negative donor, activated them with PHA, and infected them with wt or various variant viruses. In flow cytometric analysis, the surface levels of HLA-I were reduced to 40.1% of normal (uninfected cells) in cells infected with wt HIV-1, and no HLA-I down-regulation was observed in Δ Nef virus-infected cells (Fig. 4A). In contrast, the TF double variant showed diminished down-regulation activity, as the TF variant-infected cells retained 73.1% of the normal level of HLA-I, whereas F85 and T75 variants showed HLA-I down-regulation activity comparable to that of the wt, with their surface levels being 36.3 and 46.5%, respectively (Fig. 4A). The same experiments using CD4 T cells isolated from three different HIV-negative donors reproducibly showed the TF variant to have a diminished activity in terms of HLA-I down-regulation (Fig. 4B). In stark contrast, all cells infected with variant viruses except for Δ Nef showed down-regulation activity for CD4 comparable to that of the wt (Fig. 4, A and B). In addition, Western blot analysis of virus-producing cells for Nef proteins showed that all variant viruses except for Δ Nef had expression levels of Nef comparable to that of the wt (data not shown). These data demonstrate that the

FIGURE 3. CTL responses to variant Ags. *A* and *B*, VY8 and RY11-specific CTL clones (same clones as in Fig. 2, *A* and *B*) were tested for their ability to respond to variant peptides by using C1R-B3501 cells pulsed with various concentrations of the wt or variant peptides (ET = 2). Representative peptide-titration data obtained for CTL 19-136 and 19-142 are shown (each *left panel*). EC₅₀ values thus obtained for an additional 9 clones (total 10 clones) are also shown (each *right panel*). Horizontal bars indicate means, and statistic analysis was performed by using the paired *t* test. Cytotoxic activity in the absence of the peptide was always <3%. *C*, The VY8- and RY11-specific CTL clones were analyzed for their cytolytic activity toward target cells at ET = 0.5, 2, and 8 as indicated. The target cells were primary CD4⁺ T cells that had been isolated from an HIV-negative donor (HLA-B3501⁺), activated by PHA, and infected with wt or various variant viruses. The frequency of HIV-infected cells among target cells as determined by intracellular p24 Ag expression was 31.5, 33.2, 34.5, and 29.8% for wt, RF, TY, and TF variants, respectively. An additional experiment conducted by using a different blood donor (HLA-B3501⁺) showed similar results.



combination of both mutations selectively diminishes the HLA-I down-regulation activity by Nef.

Effects of Nef mutations on cytolytic activity of CTL clones with other specificity

To test whether the observed differences in HLA-I down-regulation affect the susceptibility of HIV-infected cells to recognition by CTLs, we assessed the cytolytic activity of CTL clones with specificity to HIV-1 gene products other than Nef and other restriction toward primary CD4 T cells infected with wt and Nef variant viruses.

Freshly isolated CD4 T cells from an HIV-negative donor (HLA-B35⁺ and HLA-A24⁺) were infected with various HIV-1 as above and mixed with CTL clones specific for Pol and Env epitopes presented by HLA-B*3501 as well as with a clone specific for another Nef epitope presented by HLA-A*2402 (designate as B35-Pol, B35-Env, and A24-Nef, respectively). Although the amino acid sequences in the epitope regions of

B35-Pol, B35-Env, and A24-Nef were the same among the wt and variant viruses tested, CTL-mediated killing activity appeared to be different among target cells infected with these viruses (Fig. 4C). Both B35-Pol and B35-Env CTLs showed most potent cytotoxic activity toward target cells infected with the ΔNef variant, whereas the same CTLs showed weak cytotoxic activity toward wt virus-infected cells (Fig. 4C). Interestingly, CTLs markedly killed cells infected with the TF double mutant virus, whereas they weakly killed cells infected with either T75 or F85 single mutant virus (Fig. 4C). Moreover, in A24-Nef CTL-mediated cytotoxic activity, we also observed that the TF double mutant virus-infected cells were more potently killed than cells infected with wt or single mutant viruses (Fig. 4C). These data suggest that the diminished HLA-I down-regulation (i.e., increased level of cell surface HLA-I) in CD4 T cells infected with the TF double mutant virus resulted in increased susceptibility to killing by CTLs, leading to a possible selective disadvantage for the variant virus in vivo.

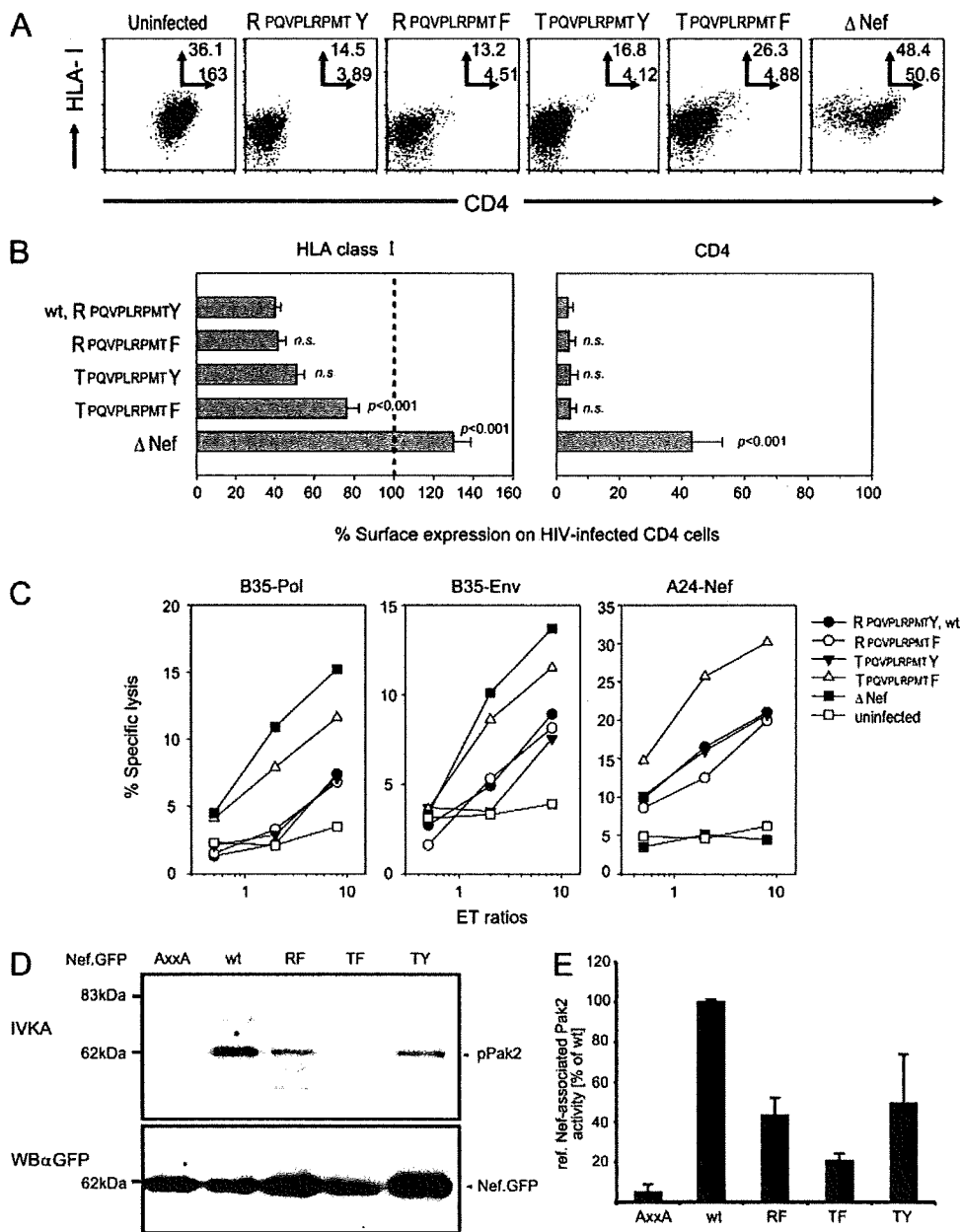


FIGURE 4. Functional consequences of CTL escape Nef mutations. *A*, Freshly isolated primary CD4⁺ cells from an HIV-negative donor (HLA-B35⁺) were activated by PHA for 3 days and then infected with wt or various variants for 5 days. The cells were stained with anti-HLA-Bw6 mAb (clone: SFR8-B6) and anti-CD4 mAb, and 7-AAD followed by intracellular staining for p24 Ag. In flow cytometric analysis, cells negative for 7-AAD and positive for p24 Ag were gated and analyzed for their fluorescence intensity for HLA-Bw6 and CD4. The frequency of infected cells was 29.6, 34.3, 30.5, 31.9, and 26.2% for HIV-1 wt, RF, TY, TF, and ΔNef variants, respectively. The mean fluorescence intensities (MFI) for HLA-Bw6 and CD4 are shown in the right upper corner of the dot plots. *B*, The same experiment as above was done by using three additional HIV-negative donors. The Ab specific for HLA-I allotypes used was either SFR8-B6 or A11,1M as appropriate for each donor. The MFI level of HLA-I and CD4 on uninfected cells was set to 100% and indicated by the dotted vertical line in the graph. Statistical analysis was performed by ANOVA with multiple comparisons vs wt. *n.s.*, not significant. *C*, Primary CD4⁺ cells infected with wt or various variant HIV-1s as in Fig. 3 (the donor carries both HLA-A*2402 and HLA-B*3501) were used as target cells for cytotoxicity by CTL clones specific for HLA-B3501-restricted Pol (Pol₂₇₃₋₂₈₂: VPLDKDFRKY), Env (Env₇₇₋₈₅: DPNPQEVVL), or HLA-A2402-restricted Nef epitope (Nef₁₃₈₋₁₄₇: RYPLTFGWCF). An additional experiment using a different blood donor (positive for both HLA-A*2402 and HLA-B*3501) showed similar results. *D*, Nef-associated Pak2 activity. Jurkat cells were electroporated with plasmid DNAs encoding the indicated Nef-GFP fusion proteins. Total cell lysates were immunoprecipitated with anti-GFP Ab, and the resultant immunoprecipitates were analyzed by IVKA for Pak2 autophosphorylation (pPak) (upper panel). The same IVKA reactions were directly separated by SDS-PAGE and analyzed for immunisolated Nef-GFP levels by Western blotting with anti-GFP Ab (lower panel). *E*, Quantification of Nef-Pak2 association. The indicated values represent the Nef-associated Pak2 activity after the levels of pPak2 had been normalized to the amounts of immunisolated Nef-GFP. Values presented are the mean of at least three independent experiments with the indicated SEM expressed relative to the wt control that was arbitrarily set to 100%.

Effects of Nef mutations on the association of Nef with the cellular kinase Pak2

Given this reduced ability to down-modulate cell surface HLA-I, we also wanted to assess whether other Nef activities that depend

on the interaction of the PxxP motif with SH3 domain-containing ligands are affected by the CTL escape mutations. To this end, we analyzed the association of Nef with cellular Pak2 kinase activity. This interaction is conserved among a variety of lentiviruses (39),

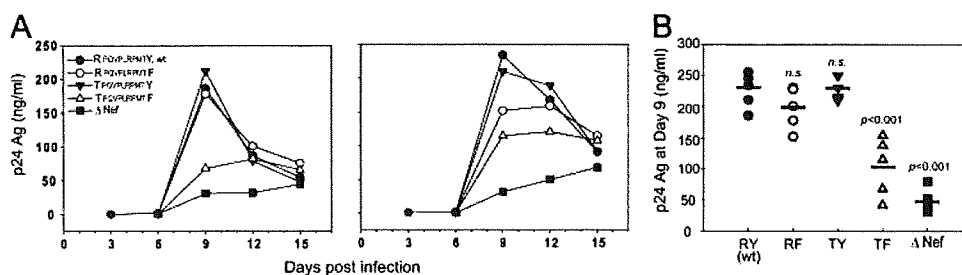


FIGURE 5. Effects of Nef mutations on viral replication in PBMC. *A*, Freshly isolated PBMC samples from two HIV-negative donors were first infected with wt or various variant HIV-1s and 3 days later cells were activated by PHA. For monitoring viral replication, culture supernatants were collected every 3 days and replaced with fresh medium containing rIL-2. *B*, The same experiment as above was done by using three additional HIV-negative donors. The level of p24 Ag obtained at day 9 postinfection was plotted and statistically analyzed based on ANOVA with multiple comparisons vs the wt. *n.s.*, not significant. Horizontal bars indicate means of data obtained for the five different PBMC donors.

strictly depends on the integrity of the PxxP motif and has multiple functional consequences that may optimize virus production (10, 40, 41). Expectedly (34, 39), wt Nef from HIV-1 SF2 (wt) showed robust association with phosphorylated Pak2 (pPak2) while the AxxA mutant (both Pro⁷⁶ and ⁸⁰ to Ala) did not show substantial association with pPak2 (Fig. 4D). Pak2 association was substantially reduced but not abrogated for the F85 (RF) and T75 (TY) single variants. According to phosphorimager quantification of the Nef-associated Pak2 signal and normalization to the levels of Nef present in the IVKA (Fig. 4E), Pak2 association was more than two-fold reduced for these two Nef variants relative to wt. The TF double mutant displayed an even stronger reduction to ~20% Pak2 association relative to wt Nef (Fig. 4, D and E). These data suggest that the T75 and F85 mutations in the PxxP region of Nef affect its ability to interact with SH3 domain-containing ligands.

Effects of Nef mutations on viral replication in PBMC

Nef significantly enhances virus replication in primary CD4 T cells, particularly if these cells are exposed to HIV-1 before activation with mitogens (42, 43). Because amino acid substitutions from prolines to alanines in the PxxP region have been shown to decrease this activity (25, 26, 32), we asked whether the T75 and F85 mutations would have similar effects.

Freshly isolated PBMC from two HIV-negative donors were first exposed to wt or various variant viruses for 3 days and subsequently activated by PHA. In both donors' PBMC, the wt and T75 variant viruses showed comparable replication kinetics, whereas the replication of the ΔNef virus was substantially delayed (Fig. 5A). The replication of the F85 variant virus was comparable to that of the wt virus in PBMC of a donor and was partially impaired with PBMC of another one (Fig. 5A). In contrast, the double TF variant virus showed delayed replication kinetics in PBMC from both donors (Fig. 5A).

To account for this donor variability, results from a total of five donors are summarized in Fig. 5B. As all PBMC samples showed a peak on day 9 after infection with the wt virus, the amounts of p24 Ag at day 9 after infection with the variant viruses were measured and statistically analyzed by multiple comparisons vs the wt (Fig. 5B). The ΔNef virus showed reproducibly the weakest replicative capacity under this assay condition, in good agreement with previous reports (26, 32). In addition, the TF double variant virus showed diminished capacity for viral replication compared with the wt; whereas each type of single variant virus did not show much difference in replication capacity (Fig. 5B). These data demonstrate that, even in the absence of HIV-specific CTL responses, the combination of T75 and F85 mutations is disadvantageous for Nef's ability to enhance virus replication.

Discussion

It is thought that the *nef* gene has higher levels of mutational plasticity in response to selective pressures compared with genes exhibiting structural or functional constraints (e.g., Gag, protease, reverse transcriptase, or integrase), because it exhibits considerable sequence diversity in vivo. In fact, some CTL escape variants of Nef, such as those with the mutations located in the CTL epitopes restricted by HLA-B*57 and HLA-A*24, have been suggested to have minimum fitness cost on the virus. This is because, in such a region, reversions are not often observed after transmission of the virus to new hosts who are negative for that particular *HLA-I* allele and the mutations are readily fixed in the population in the meantime (44, 45). In contrast, we show in the present study that the naturally arising mutations in the well-conserved PxxP region of HIV-1 Nef are selected under active CTL-mediated selective force at work and these mutations alone or in combination can modulate the pathogenic function by HIV-1 Nef including *HLA-I* down-regulation, enhancement of viral replication, and association with an activated cellular kinase, strongly suggesting that these mutations can impose functional constraints on the Nef activity and viral replication in vivo. Considering that various Nef activities substantially vary during the course of an infection at different stages of disease progression (4) and that there are substantial numbers of *HLA-I*-associated sequence variations in Nef (46–48), immunosurveillance by the Nef-specific CTLs plays additional roles in modulating the pathogenic potential of HIV-1 through selection of CTL-escape mutations in Nef particularly those in a well-conserved functional region.

It is obvious that *HLA-B35*-restricted CTL responses were shifted in patients during the early to chronic phase of an HIV-1 infection in our study, as the Nef VY8 epitope was dominantly recognized by CTLs relatively early in the infection, whereas the N-terminal extended RY11 epitope was recognized by CTLs in the chronic phase. This observation is in line with previous reports showing that CTL epitope specificity is different during the course of an HIV infection (23, 49, 50). Particularly, an immunodominant response directed against the HIV Gag p17-derived, *HLA-A0201*-restricted SL9 epitope (SLYNTVATL) was not detected early in an infection (50). Although the mechanisms underlying this phenomenon are not yet known, one possible explanation is that the responses detected in the early stage of an infection could have "mutated away," opening the field for a second wave of CTL specificities taking over in their place. The CTLs induced by a second or third waves of CTL specificities may have decreased antiviral effectiveness as predicted in the mathematical antigenic oscillation

model proposed by Nowak et al. (51). Our data support this scenario that the highly active VY8-specific CTLs elicited early in an infection were rendered ineffective apparently due to the acquisition of the F85 Nef mutation by the virus and that subsequently the cross-reactive RY11-specific CTLs, yet having moderate antiviral activity, became dominant. It is interesting to note that the T75 variant, which had been selected by RY11-specific CTLs during the chronic phase, can induce de novo variant-specific CTLs with less effective Ag-specific proliferative capacity, further reducing antiviral activity of CTLs in vivo (29).

HLA-B*35 has been documented to be associated with rapid disease progression to AIDS (52). However, a further detailed study showed that individuals having HLA-B*35 allelic variants, including B3502/3503/3504, progress more rapidly to AIDS than do those with HLA-B*3501 (53). All the HLA-B35⁺ subjects in this study were considered to carry HLA-B*3501, as the HLA-B*3501 is highly prevalent in the HLA-B35⁺ Japanese population, though we have not yet done the genotypic analysis of *HLA-B* loci of all of the subjects. Further studies are needed to clarify whether CTL responses toward the PxxP region of Nef may be associated with the difference in the disease progression among HIV-infected patients having different HLA-B35 allelic variants.

Although the TF double mutation provided the best CTL escape of the Nef variants tested here, this variant was barely selected in HLA-B35⁺ patients. This suggested that important functional constraints imposed by these combinatorial mutations precluded selection of these variants. The present study revealed at least two independent possible reasons for such a counterselection. First, the T75 and F85 double mutation in HIV-1 Nef significantly reduced the down-regulation activity of HLA-I and resulted in increased recognition by Pol- and Env-specific CTLs. Because down-regulation of MHC-I by SIV Nef in rhesus macaques limits CD8 T cell-mediated killing and contributes to the pathogenic effect of Nef in vivo (14), these results suggest that the sustained HLA-I down-regulation activity by HIV-1 Nef is required for efficient viral replication in vivo. This observation is in line with a previous report demonstrating that Nef mutations selected by Nef-specific CTLs in vitro, although most mutations disrupted *nef* reading frames in their study, leads to progeny virions that are increased in their susceptibility to CTLs with specificities for proteins other than Nef (54). However, the mutations in that report are different from representative naturally arising variations (54) as the *nef* reading frame is highly maintained intact in vivo (55) and large deletions or frame shifts are rarely observed. In contrast, the current study focused on the naturally arising mutations that are selected under Nef-specific CTL responses in vivo.

Second, the double mutation also affected PxxP-dependent activities of Nef in the absence of HIV-specific CTLs and significantly impaired Nef's ability to boost HIV-1 replication in primary human T lymphocytes. Because the individual mutations caused no significant impairment to HIV replication in the experimental system used, these results also help to explain why the double mutant is counterselected in HIV-infected patients. On the molecular level, Nef's effects on viral replication are likely mediated by a number of yet to be fully defined protein interactions. Among others, its association with Pak2 activity has also been implicated in the Nef-mediated enhancement of virus infectivity and replication (40, 56, 57). In this scenario, our results suggest that the reduction of Nef-Pak2 below a certain threshold activity may contribute to the reduction of Nef's ability to boost HIV spread. More importantly, the reduction of Pak2 association indicates that CTL escape Nef variants are impaired in their interaction with SH3 domains, which is expected to have select functional consequences in various cellular environments.

Together, these results demonstrate that CTL escape has severe consequences on the functionality of the PxxP motif in Nef, both for its role in immunoevasion and intrinsic replicative potential of the virus. Thus, a vaccine regimen that can elicit CTL responses targeting the regions involved in HLA-I down-regulation activity by Nef could be a potent candidate for future vaccine design.

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Disclosures

The authors have no financial conflict of interest.

References

- Kestler, H. W., 3rd, D. J. Ringler, K. Mori, D. L. Panicali, P. K. Sehgal, M. D. Daniel, and R. C. Desrosiers. 1991. Importance of the *nef* gene for maintenance of high virus loads and for development of AIDS. *Cell* 65: 651–662.
- Deacon, N. J., A. Tsykin, A. Solomon, K. Smith, M. Ludford-Menting, A. Ellett, D. J. Hooker, D. A. McPhee, A. L. Greenway, C. Chatfield, et al. 1995. Genomic structure of an attenuated quasi species of HIV-1 from a blood transfusion donor and recipients. *Science* 270: 988–991.
- Kirchhoff, F., T. C. Greenough, D. B. Brettler, J. L. Sullivan, and R. C. Desrosiers. 1995. Absence of intact *nef* sequences in a long-term survivor with nonprogressive HIV-1 infection. *N. Engl. J. Med.* 332: 228–232.
- Carl, S., T. C. Greenough, M. Krumbiegel, M. Greenberg, J. Skowronski, J. L. Sullivan, and F. Kirchhoff. 2001. Modulation of different human immunodeficiency virus type 1 Nef functions during progression to AIDS. *J. Virol.* 75: 3657–3665.
- Das, S. R., and S. Jameel. 2005. Biology of the HIV Nef protein. *Indian J. Med. Res.* 121: 315–332.
- Fackler, O. T., A. Alcover, and O. Schwartz. 2007. Modulation of the immunological synapse: a key to HIV-1 pathogenesis? *Nat. Rev. Immunol.* 7: 310–317.
- Peterlin, B. M., and D. Trono. 2003. Hide, shield and strike back: how HIV-infected cells avoid immune eradication. *Nat. Rev. Immunol.* 3: 97–107.
- Stevenson, M. 2003. HIV-1 pathogenesis. *Nat. Med.* 9: 853–860.
- Thoulouze, M. I., N. Sol-Foulon, F. Blanchet, A. Dautry-Varsat, O. Schwartz, and A. Alcover. 2006. Human immunodeficiency virus type-1 infection impairs the formation of the immunological synapse. *Immunity* 24: 547–561.
- Haller, C., S. Rauch, N. Michel, S. Hannemann, M. J. Lehmann, O. T. Keppler, and O. T. Fackler. 2006. The HIV-1 pathogenicity factor Nef interferes with maturation of stimulatory T-lymphocyte contacts by modulation of N-Wasp activity. *J. Biol. Chem.* 281: 19618–19630.
- Schindler, M., J. Munch, O. Kutsch, H. Li, M. L. Santiago, F. Bibollet-Ruche, M. C. Muller-Trutwin, F. J. Novembre, M. Peeters, V. Courgnaud, et al. 2006. Nef-mediated suppression of T cell activation was lost in a lentiviral lineage that gave rise to HIV-1. *Cell* 125: 1055–1067.
- Hung, C. H., L. Thomas, C. E. Ruby, K. M. Atkins, N. P. Morris, Z. A. Knight, I. Scholz, E. Barklis, A. D. Weinberg, K. M. Shokat, and G. Thomas. 2007. HIV-1 Nef assembles a Src family kinase-ZAP-70/Syk-PI3K cascade to down-regulate cell-surface MHC-I. *Cell Host Microbe* 1: 121–133.
- Roeth, J. F., and K. L. Collins. 2006. Human immunodeficiency virus type 1 Nef: adapting to intracellular trafficking pathways. *Microbiol. Mol. Biol. Rev.* 70: 548–563.
- Swigut, T., L. Alexander, J. Morgan, J. Lifson, K. G. Mansfield, S. Lang, R. P. Johnson, J. Skowronski, and R. Desrosiers. 2004. Impact of Nef-mediated downregulation of major histocompatibility complex class I on immune response to simian immunodeficiency virus. *J. Virol.* 78: 13335–13344.
- Borrow, P., H. Lewicki, B. H. Hahn, G. M. Shaw, and M. B. Oldstone. 1994. Virus-specific CD8⁺ cytotoxic T-lymphocyte activity associated with control of viremia in primary human immunodeficiency virus type 1 infection. *J. Virol.* 68: 6103–6110.
- Koup, R. A., J. T. Safrit, Y. Cao, C. A. Andrews, G. McLeod, W. Borkowsky, C. Farthing, and D. D. Ho. 1994. Temporal association of cellular immune responses with the initial control of viremia in primary human immunodeficiency virus type 1 syndrome. *J. Virol.* 68: 4650–4655.
- Tomiya, H., H. Akari, A. Adachi, and M. Takiguchi. 2002. Different effects of Nef-mediated HLA class I down-regulation on human immunodeficiency virus type 1-specific CD8⁺ T-cell cytolytic activity and cytokine production. *J. Virol.* 76: 7535–7543.
- Yang, O. O., S. A. Kalams, A. Trocha, H. Cao, A. Luster, R. P. Johnson, and B. D. Walker. 1997. Suppression of human immunodeficiency virus type 1 replication by CD8⁺ cells: evidence for HLA class I-restricted triggering of cytolytic and noncytolytic mechanisms. *J. Virol.* 71: 3120–3128.
- Jin, X., D. E. Bauer, S. E. Tuttleton, S. Lewin, A. Gettie, J. Blanchard, C. E. Irwin, J. T. Safrit, J. Mittler, L. Weinberger, et al. 1999. Dramatic rise in plasma viremia after CD8⁺ T cell depletion in simian immunodeficiency virus-infected macaques. *J. Exp. Med.* 189: 991–998.
- Schmitz, J. E., M. J. Kuroda, S. Santra, V. G. Sasseville, M. A. Simon, M. A. Lifton, P. Racz, K. Tenner-Racz, M. Dalesandro, B. J. Scallan, et al. 1999. Control of viremia in simian immunodeficiency virus infection by CD8⁺ lymphocytes. *Science* 283: 857–860.

21. Klotman, M. E., S. Kim, A. Buchbinder, A. DeRossi, D. Baltimore, and F. Wong-Staal. 1991. Kinetics of expression of multiply spliced RNA in early human immunodeficiency virus type 1 infection of lymphocytes and monocytes. *Proc. Natl. Acad. Sci. USA* 88: 5011–5015.
22. Choppin, J., W. Cohen, A. Bianco, J.-P. Briand, F. Connan, M. Dalod, and J.-G. Guillet. 2001. Characteristics of HIV-1 Nef regions containing multiple CD8⁺ T cell epitopes: wealth of HLA-binding motifs and sensitivity to proteasome degradation. *J. Immunol.* 166: 6164–6169.
23. Lichtenfeld, M., X. G. Yu, D. Cohen, M. M. Addo, J. Malenfant, B. Perkins, E. Pae, M. N. Johnston, D. Strick, T. M. Allen, et al. 2004. HIV-1 Nef is preferentially recognized by CD8 T cells in primary HIV-1 infection despite a relatively high degree of genetic diversity. *AIDS* 18: 1383–1392.
24. Culmann-Penciolelli, B., S. Lamhamedi-Cherradi, I. Couillin, N. Guegan, J. P. Levy, J. G. Guillet, and E. Gomard. 1994. Identification of multirestricted immunodominant regions recognized by cytolytic T lymphocytes in the human immunodeficiency virus type 1 Nef protein. *J. Virol.* 68: 7336–7343.
25. Fackler, O. T., D. Wolf, H. O. Weber, B. Laffert, P. D'Aloja, B. Schuler-Thurner, R. Geffin, K. Saksela, M. Geyer, and B. M. Peterlin. 2001. A natural variability in the proline-rich motif of Nef modulates HIV-1 replication in primary T cells. *Curr. Biol.* 11: 1294–1299.
26. Saksela, K., G. Cheng, and D. Baltimore. 1995. Proline-rich (PxxP) motifs in HIV-1 Nef bind to SH3 domains of a subset of Src kinases and are required for the enhanced growth of Nef⁺ viruses but not for down-regulation of CD4. *EMBO J.* 14: 484–491.
27. Geyer, M., O. T. Fackler, and B. M. Peterlin. 2001. Structure-function relationships in HIV-1 Nef. *EMBO Rep.* 2: 580–585.
28. Milicic, A., D. A. Price, P. Zimbwa, B. L. Booth, H. L. Brown, P. J. Easterbrook, K. Olsen, N. Robinson, U. Gileadi, A. K. Sewell, et al. 2005. CD8⁺ T cell epitope-flanking mutations disrupt proteasomal processing of HIV-1 Nef. *J. Immunol.* 175: 4618–4626.
29. Ueno, T., Y. Idegami, C. Motozono, S. Oka, and M. Takiguchi. 2007. Altering effects of antigenic variations in HIV-1 on antiviral effectiveness of HIV-specific CTLs. *J. Immunol.* 178: 5513–5523.
30. Kumar, S., K. Tamura, and M. Nei. 2004. MEGA3: Integrated software for molecular evolutionary genetics analysis and sequence alignment. *Brief. Bioinform.* 5: 150–163.
31. Ueno, T., H. Tomiyama, and M. Takiguchi. 2002. Single T cell receptor-mediated recognition of an identical HIV-derived peptide presented by multiple HLA class I molecules. *J. Immunol.* 169: 4961–4969.
32. Fackler, O. T., A. Moris, N. Tibroni, S. I. Giese, B. Glass, O. Schwartz, and H.-G. Krausslich. 2006. Functional characterization of HIV-1 Nef mutants in the context of viral infection. *Virology* 351: 322–339.
33. Ueno, T., H. Tomiyama, M. Fujiwara, S. Oka, and M. Takiguchi. 2003. HLA class I-restricted recognition of an HIV-derived epitope peptide by a human T cell receptor α chain having a V81 variable segment. *Eur. J. Immunol.* 33: 2910–2916.
34. Krautkramer, E., S. I. Giese, J. E. Gasteier, W. Muranyi, and O. T. Fackler. 2004. Human immunodeficiency virus type 1 Nef activates p21-activated Kinase via recruitment into lipid rafts. *J. Virol.* 78: 4085–4097.
35. Rowland-Jones, S., J. Sutton, K. Ariyoshi, T. Dong, F. Gotch, S. McAdam, D. Whitby, S. Sabally, A. Gallimore, T. Corrah, et al. 1995. HIV-specific cytotoxic T-cells in HIV-exposed but uninfected Gambian women. *Nat. Med.* 1: 59–64.
36. Tomiyama, H., K. Miwa, H. Shiga, Y. I. Moore, S. Oka, A. Iwamoto, Y. Kaneko, and M. Takiguchi. 1997. Evidence of presentation of multiple HIV-1 cytotoxic T lymphocyte epitopes by HLA-B*3501 molecules that are associated with the accelerated progression of AIDS. *J. Immunol.* 158: 5026–5034.
37. Ueno, T., H. Tomiyama, M. Fujiwara, S. Oka, and M. Takiguchi. 2004. Functionally impaired HIV-specific CD8 T cells show high affinity TCR-ligand interactions. *J. Immunol.* 173: 5451–5457.
38. Collins, K. L., B. K. Chen, S. A. Kalams, B. D. Walker, and D. Baltimore. 1998. HIV-1 Nef protein protects infected primary cells against killing by cytotoxic T lymphocytes. *Nature* 391: 397–401.
39. Kirchhoff, F., M. Schindler, N. Bailer, G. H. Renkema, K. Saksela, V. Knoop, M. C. Muller-Trutwin, M. L. Santiago, F. Bibollet-Ruche, M. T. Dittmar, et al. 2004. Nef proteins from simian immunodeficiency virus-infected chimpanzees interact with p21-activated kinase 2 and modulate cell surface expression of various human receptors. *J. Virol.* 78: 6864–6874.
40. Fackler, O. T., W. Luo, M. Geyer, A. S. Alberts, and B. M. Peterlin. 1999. Activation of Vav by Nef induces cytoskeletal rearrangements and downstream effector functions. *Mol. Cell* 3: 729–739.
41. Wolf, D., V. Witte, B. Laffert, K. Blume, E. Stromer, S. Trapp, P. d'Aloja, A. Schurmann, and A. S. Baur. 2001. HIV-1 Nef associated PAK and PI3-kinases stimulate Akt-independent Bad-phosphorylation to induce anti-apoptotic signals. *Nat. Med.* 7: 1217–1224.
42. Miller, M. D., M. T. Warmerdam, I. Gaston, W. C. Greene, and M. B. Feinberg. 1994. The human immunodeficiency virus-1 nef gene product: a positive factor for viral infection and replication in primary lymphocytes and macrophages. *J. Exp. Med.* 179: 101–113.
43. Spina, C. A., T. J. Kwok, M. Y. Chowes, J. C. Guatelli, and D. D. Richman. 1994. The importance of nef in the induction of human immunodeficiency virus type 1 replication from primary quiescent CD4 lymphocytes. *J. Exp. Med.* 179: 115–123.
44. Furutsuki, T., N. Hosoya, A. Kawana-Tachikawa, M. Tomizawa, T. Odawara, M. Goto, Y. Kitamura, T. Nakamura, A. D. Kelleher, D. A. Cooper, and A. Iwamoto. 2004. Frequent transmission of cytotoxic-T-lymphocyte escape mutants of human immunodeficiency virus type 1 in the highly HLA-A24-positive Japanese population. *J. Virol.* 78: 8437–8445.
45. Leslie, A., D. Kavanagh, I. Honeyborne, K. Pfafferott, C. Edwards, T. Pillay, L. Hilton, C. Thobakgale, D. Ramduth, R. Draenert, et al. 2005. Transmission and accumulation of CTL escape variants drive negative associations between HIV polymorphisms and HLA. *J. Exp. Med.* 201: 891–902.
46. Bhattacharya, T., M. Daniels, D. Heckerman, B. Foley, N. Frahm, C. Kadie, J. Carlson, K. Yusim, B. McMahon, B. Gaschen, et al. 2007. Founder effects in the assessment of HIV polymorphisms and HLA allele associations. *Science* 315: 1583–1586.
47. Brumme, Z. L., C. J. Brumme, D. Heckerman, B. T. Korber, M. Daniels, J. Carlson, C. Kadie, T. Bhattacharya, C. Chui, J. Szinger, et al. 2007. Evidence of differential HLA class I-mediated viral evolution in functional and accessory/regulatory genes of HIV-1. *PLoS Pathog.* 3: e94.
48. Kiepiela, P., K. Ngumbela, C. Thobakgale, D. Ramduth, I. Honeyborne, E. Moodley, S. Reddy, C. de Pierres, Z. Mncube, N. Mkhwanazi, et al. 2007. CD8⁺ T-cell responses to different HIV proteins have discordant associations with viral load. *Nat. Med.* 13: 46–53.
49. Bansal, A., E. Gough, S. Sabbaj, D. Ritter, K. Yusim, G. Sfakianos, G. Aldrovandi, R. A. Kaslow, C. M. Wilson, M. J. Mulligan, et al. 2005. CD8 T-cell responses in early HIV-1 infection are skewed towards high entropy peptides. *AIDS* 19: 241–250.
50. Goulder, P. J. R., M. A. Altfeld, E. S. Rosenberg, T. Nguyen, Y. Tang, R. L. Eldridge, M. M. Addo, S. He, J. S. Mukherjee, M. N. Phillips, et al. 2001. Substantial differences in specificity of HIV-specific cytotoxic T cells in acute and chronic HIV infection. *J. Exp. Med.* 193: 181–194.
51. Nowak, M. A., R. M. May, R. E. Phillips, S. Rowland-Jones, D. G. Lalloo, S. McAdam, P. Klenerman, B. Koppe, K. Sigmund, C. R. M. Bangham, and A. J. McMichael. 1995. Antigenic oscillations and shifting immunodominance in HIV-1 infections. *Nature* 375: 606–611.
52. Carrington, M., G. W. Nelson, M. P. Martin, T. Kissner, D. Vlahov, J. J. Goedert, R. Kaslow, S. Buchbinder, K. Hoots, and S. J. O'Brien. 1999. HLA and HIV-1: heterozygote advantage and B*35-Cw*04 disadvantage. *Science* 283: 1748–1752.
53. Gao, X., G. W. Nelson, P. Karacki, M. M. P. J. Phair, R. Kaslow, J. J. Goedert, S. Buchbinder, K. Hoots, D. Vlahov, S. J. O'Brien, and M. Carrington. 2001. Effect of a single amino acid change in MHC class I molecules on the rate of progression to AIDS. *N. Engl. J. Med.* 344: 1668–1675.
54. Ali, A., S. Pillai, H. Ng, R. Lubong, D. D. Richman, B. D. Jamieson, Y. Ding, M. J. McElrath, J. C. Guatelli, and O. O. Yang. 2003. Broadly increased sensitivity to cytotoxic T lymphocytes resulting from Nef epitope escape mutations. *J. Immunol.* 171: 3999–4005.
55. Alexander, L., E. Weiskopf, T. C. Greenough, N. C. Gaddis, M. R. Auerbach, M. H. Malim, S. J. O'Brien, B. D. Walker, J. L. Sullivan, and R. C. Desrosiers. 2000. Unusual polymorphisms in human immunodeficiency virus type 1 associated with nonprogressive infection. *J. Virol.* 74: 4361–4376.
56. Campbell, E. M., R. Nunez, and T. J. Hope. 2004. Disruption of the actin cytoskeleton can complement the ability of Nef to enhance human immunodeficiency virus type 1 infectivity. *J. Virol.* 78: 5745–5755.
57. Wiskerchen, M., and C. Cheng-Mayer. 1996. HIV-1 Nef association with cellular serine kinase correlates with enhanced virion infectivity and efficient proviral DNA synthesis. *Virology* 224: 292–301.

REVIEW



Species barrier of HIV-1 and its jumping by virus engineering

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SUMMARY

Monkey infection models are absolutely necessary for studies of human immunodeficiency virus type 1 (HIV-1) pathogenesis and of developing drugs/vaccines against HIV-1. In addition, currently unknown roles of its accessory proteins for *in vivo* replication await elucidation by experimental approaches. Due to the fact that HIV-1 is tropic only for chimpanzees and humans, studies of this line have been impeded for a long time, although various investigations have been carried out utilising genetically related SIV and SIV/HIV chimeric virus (SHIV) as pathogens. Recent findings of anti-HIV-1 innate factors such as tripartite motif protein 5 α (TRIM5 α) and APO-BEC3G/F prompted us to re-initiate an old and vital research project which would, as a result, confer the capability to overcome the species barrier on the HIV-1. We currently have obtained, by virus engineering through genetic manipulation and adaptation, some new and promising HIV-1 clones for *in vivo* studies in macaque monkeys as mentioned above. In this review, we summarise the past, present and future of HIV-1/SIV chimeric viruses with special reference to relevant basic HIV-1/SIV studies. Copyright © 2008 John Wiley & Sons, Ltd.

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INTRODUCTION

Human immunodeficiency virus type 1 (HIV-1) productively infects only humans and chimpanzees but not Old World monkeys, and is specifically pathogenic to humans causing AIDS and AIDS-associated diseases. This narrow host range of HIV-1 has compelled us to use SIV or SHIV, a chimera between HIV-1 and SIV, as input viruses for *in vivo* model studies in macaque monkeys. Although SIV isolated from rhesus monkeys (SIV-mac) is similar to HIV-1 in its genome organisation and pathogenic potential, it is a genetically and virologically distinct virus from HIV-1 in a

number of important points. The same is quite true for various SHIVs that are basically SIVmac derivatives carrying only a portion of HIV-1 genome sequence [1–6]. Of note, HIV-1 genome contains a unique set of accessory genes that are believed to play essential functional roles for virus persistence, spread and pathogenesis in natural target cells and/or in individuals by modulating and optimising viral replication.

It is now well appreciated that many mammalian species including primates encode factors conferring resistance to retroviral infections. In fact, human/simian tripartite motif protein 5 α (TRIM5 α) and apolipoprotein B mRNA-editing enzyme-catalytic polypeptide-like 3G (APOBEC3G) (A3G) have been identified as such factors and demonstrated to have strong anti-HIV-1 activity. Importantly, the genomic regions of HIV-1 that are critical for the restriction of viral replication are also determined. Based on these studies, we could have designed a novel chimeric virus totally different from the pre-existing SHIVs, and actually created it *in vitro*. The resultant chimeric virus belongs to the HIV-1 group by standard scientific criteria and has been demonstrated to represent

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Abbreviations used

HIV-1, human immunodeficiency virus type 1; SHIV, SIV/HIV chimeric virus; TRIM5 α , tripartite motif protein 5 α ; A3G, apolipoprotein B mRNA-editing enzyme-catalytic polypeptide-like 3G (APOBEC3G); A3F, APOBEC3F; CA, capsid protein; N-MLV, N-tropic murine leukaemia virus; ELAV, equine infectious anaemia virus; CypA, cyclophilin A; CyM, cynomolgus monkey; GFP, green fluorescent protein

Table 1. Primates and their immunodeficiency viruses

	Primate species	Virus designation	Virus grouping	Pathogenicity
Apes	Human	HIV-1	HIV-1/SIVcpz	+
		HIV-2	SIVmac/SIVsmm/HIV-2	+
	Chimpanzee	SIVcpz	HIV-1/SIVcpz	-
Old World monkeys	Macaque			
	Rhesus monkey	SIVmac	SIVmac/SIVsmm/HIV-2	+
	Cynomolgus monkey	SIVcyn		
	Pig-tailed monkey	SIVmne		
	Stamp tail monkey	SIVstm		
	Sooty mangabey	SIVsmm	SIVmac/SIVsmm/HIV-2	-
	African green monkey	SIVagm	SIVagm	-
Mandrill		SIVmnd	SIVmnd-1	-
			SIVmnd-2	

Immunodeficiency viruses isolated from various primate species are classified by their genome organisation and/or nucleotide sequence homology (>90%). HIV-1 is a unique primate lentivirus. For details, see Reference [137]. (+) and (-) in the pathogenicity column indicate that the virus can induce AIDS in individuals, or not, respectively.

the first and prototype monkey-tropic HIV-1. However, the virus was found to grow less efficiently in macaque cells relative to the standard pathogenic clone SIVmac239. We are, therefore, now generating a second generation of monkey-tropic HIV-1s with positive results by virus engineering through recombinant DNA techniques and virus adaptation in cells. In this review, we describe our basic research on chimeric viruses as well as the related virological topics.

VIROLOGICAL PROPERTIES OF SIVmac AND HIV-1

SIV was initially isolated from a rhesus monkey as an infectious agent to induce an AIDS-like disease [7,8]. Molecular clones of the virus (SIVmac) were then generated and shown to be capable of causing an AIDS-like disease in the monkeys [9–11]. Subsequently, species-specific SIVs were isolated from various monkeys including sooty mangabeys (SIVsmm) [12–14], African green monkeys (SIVagm) [15–17] and mandrill (SIVmnd) [18,19]. These SIVs establish asymptomatic chronic infections and do not develop any disease in their natural hosts (Table 1). It has been suggested that SIVmac emerged by a cross-species infection of the rhesus macaque with SIVsmm naturally found in sooty mangabeys [12,13,20]. SIVmac is similar to HIV-1 in genomic organisation (Figure 1) and in

biology including pathogenicity *in vivo* [6]. Both viruses target CD4+ cells such as T-lymphocytes and macrophages, and use CCR5 as a co-receptor, resulting in the complete loss of CD4+ T-cells. They elicit persistent replication, chronic disease and eventually immunodeficiency. The infection of macaque monkeys with SIVmac is widely used as a model for HIV/AIDS to study disease progression and virus transmission.

However, some significant genetic and biological differences do exist between these two viruses. Both HIV-1 and SIVmac possess four accessory proteins, but HIV-1 can be distinguished from SIVmac by the presence and absence of Vpu and Vpx, respectively. Since it has been shown that the accessory proteins are, in many cases, dispensable for viral replication *in vitro*, the precise roles of these proteins for viral replication and pathogenesis need to be elucidated by *in vivo* study. In addition, SIVmac and HIV-1 show only 30–50% homology of the amino acid sequences, resulting in some functional differences of HIV-1 proteins and their SIVmac counterparts. First, SIVmac exhibits sensitivities to antiviral drugs that are not observed for HIV-1 [1–3]. Second, although simian and human AIDS are pathologically similar, the disease course of SIVmac is short relative to that of HIV-1 infection. SIVmac induces the immunodeficiency in individuals in 1–3 years versus

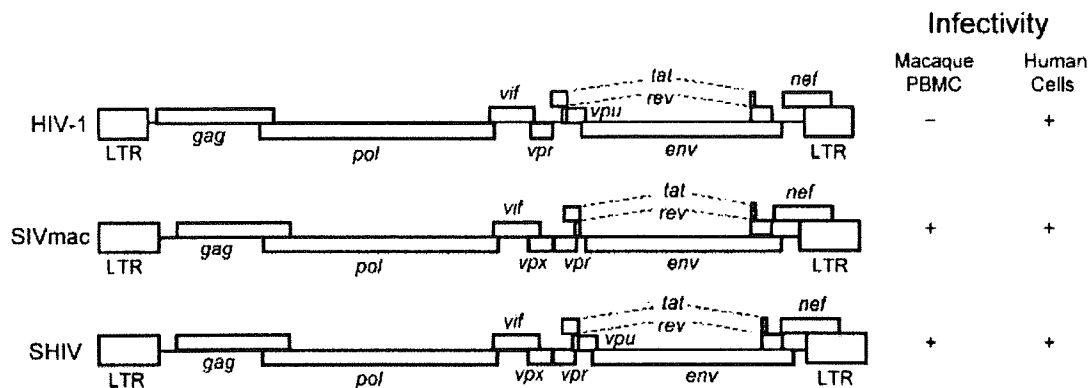


Figure 1. Genomic organisation and cellular tropism of HIV-1, SIVmac and a standard SHIV. White and grey boxes represent sequences of HIV-1 and SIVmac, respectively. (+) and (-) on the right indicate growth-competence and -incompetence, respectively

10 years on average for HIV-1 [6]. In particular, an accelerated disease progression is observed in some rhesus macaques inoculated with pathogenic strains of SIVmac and SIVsmm. In these cases, infected rhesus macaques fail to elicit immune responses and develop disease in less than 6 months [6,21,22]. This may be due to distinctive cellular and humoral immune responses that are SIV specific. Furthermore, the host cell tropism is quite different between HIV-1 and SIVmac. HIV-1 replicates in cells of humans and chimpanzees, but not in cells of Old World monkeys, such as the rhesus monkey and African green monkey, whereas SIVmac can establish productive infection in both human and monkey cells (Figure 1) [23–26]. Because of these differences between the two viruses, SIVmac macaque monkey models may restrict the utility for studies on the disease progression, the significance of HIV-1 accessory proteins for pathogenesis and the development of vaccine/drug specific for HIV-1.

GENERATION AND *IN VIVO* CHARACTERISATION OF SIVmac-DERIVED SHIV CLONES

In order to overcome the limitations of SIVmac-monkey models and to generate models that would more closely reflect HIV-1 infection and disease progression, various SHIVs have been designed and constructed. The first generation of SHIV contained HIV-1 *tat*, *rev*, *vpu* and *env* in the genetic backbone of SIVmac (Figure 1) [23,27]. This SHIV clone was shown to infect and induce immunologic responses in macaques, but did not cause

AIDS-like disease. The pathogenic SHIV was obtained later by serial animal-to-animal passages of infected blood and bone marrow or by depletion of CD8+ T-cells in infected monkeys [28–31]. Macaques infected with SHIVs have been used to determine the effect of neutralising antibodies against, particularly, HIV-1 Env to prevent SHIV infection [32,33], for the evaluation of antiviral therapy and for the analysis of drug resistance emergence [2,34]. In contrast to the disease progressions observed for SIV in macaques (1–3 years) and HIV-1 in humans (10 years), SHIV cause a rapid, systemic complete loss of CD4+ T-lymphocytes within several weeks of inoculation in unvaccinated animals. Despite the rapid disease progression by SHIV, SHIV has been shown to be controlled easily by vaccines [35–37], whereas it is difficult to control SIV replication by vaccines [38–40]. It has been suggested that the rapid disease progression in SHIV-infected animals may be due to the difference in chemokine receptor usage by SHIVs and SIVs routinely employed in these experiments. SIVs predominantly use CCR5 as a coreceptor (R5-tropic), which is expressed on memory CD4+ T-lymphocytes. SIV infection induces massive loss of memory CD4+ T-lymphocytes, particularly in the gastrointestinal tract [41–43]. In contrast, SHIVs use the CXCR4 coreceptor (X4-tropic), which is expressed on naïve CD4+T-cells, for infection. X4-tropic SHIVs target naïve CD4+ T-cells and cause depletion of naïve CD4+ T-cells. The loss of naïve CD4+ T-cells results in the abrogation of any CD4+ T-cells renewal, causing a rapid and complete depletion of CD4+ T-cells in infected macaques [4,5]. In this regard,

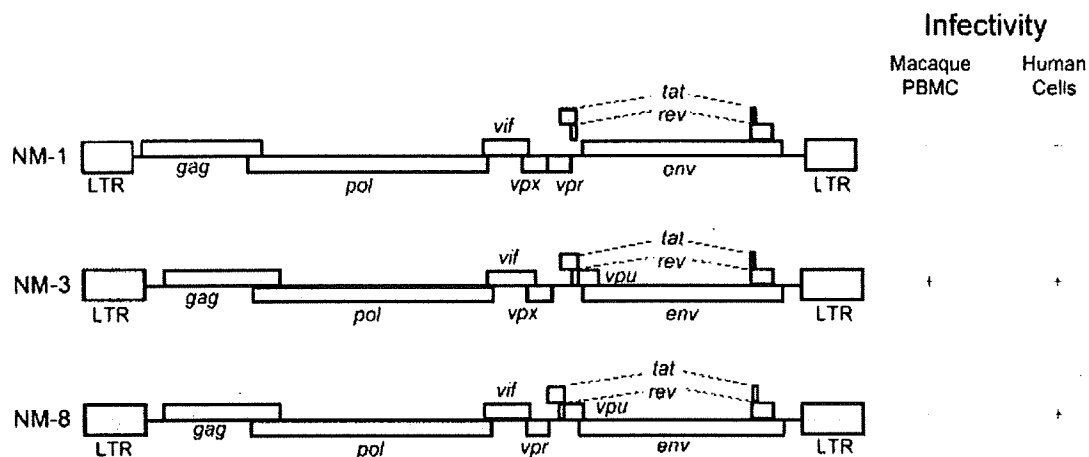


Figure 2. Genomic organisation and cellular tropism of SIVmac/HIV-1 chimeric viruses. White and grey boxes represent sequences from the parental clones NL4-3 (HIV-1) and MA239 (SIVmac), respectively. (+) and (-) on the right indicate growth-competence and -incompetence, respectively

R5-tropic pathogenic SHIV strains have been made by replacing the CXCR4-Env with CCR5-Env [44–46]. Because most primary isolates of SIVs and HIV-1 are R5-tropic, R5-tropic SHIV strains may be more relevant to HIV-1 infection and have been used for the evaluation of vaccine regimens [47,48] and for the studies of disease progression [49,50].

INNATE ANTI-HIV-1 FACTORS IN MONKEY CELLS

Early studies on viral determinants for species tropism

In order to search viral determinants that restrict the replication of HIV-1 in macaque PBMC, several SIVmac-HIV-1 chimeric viruses were constructed (Figure 2) [23,27]. Among them, only NM-3 exhibited infectivity to macaque PBMC. Genome comparison of NM-1 with NM-3 revealed that the determinant(s) of macaque cell tropism resides in the 5'-genomic region of SIVmac, since NM-1 containing the 3'-genomic region of SIVmac (*vpx*, *vpr*, *tat*, *rev* and *env*) did not grow in macaque PBMC, whereas NM-3 carrying the 5'-genomic region of SIVmac (LTR, *gag*, *pol*, *vif* and *vpx*) did. Worthy of note, NM-8 containing *vif* and *vpr* of HIV-1 instead of *vif* and *vpx* of SIVmac did not replicate in macaque PBMC. These results indicated that the central region of the SIVmac genome (*vif* and/or *vpx*) is important for species tropism.

In addition to the determinant(s) mentioned above, the Gag-CA sequence has been suggested to be important for the tropism by analysing a chimeric virus designated SIV/HIV-CA [51]. This virus is an SIV derivative containing a portion of the HIV-1 *gag* gene that encodes the CA-p2 region, and was found to grow in human but not at all in macaque PBMC.

Overall, early studies on chimeric SIV/HIV viruses showed that viral determinants for species tropism exist in both the CA-p2 domain and the central genomic region of SIVmac.

TRIM5 α

As mentioned above, HIV-1 infects human and chimpanzee cells but not cells of Old World monkeys [23,24]. HIV-1 is able to enter these monkey cells, but appears to be blocked before and/or during the reverse transcription process [24–26,52,53]. Since this restriction can be somewhat overcome by infection at a high dose or by pre-treating target cells with high titres of restricted virus-like particle [25,26,54,55], it was postulated that a saturable factor exists in restricting target cells.

A breakthrough in determining this saturable restriction factor came from the identification of TRIM5 α . The significance of TRIM5 α for HIV-1 restriction was demonstrated by the inhibition of HIV-1 infection in human cells expressing rhesus

TRIM5 α and by the rescue of HIV-1 infectivity in TRIM5 α -knocked out rhesus cells by small interfering RNA [56]. Subsequent studies have revealed that the block of retrovirus replication with TRIM5 α was species-specific. Human TRIM5 α inhibited N-tropic murine leukaemia virus (N-MLV) and equine infectious anaemia virus (EIAV) replication [57,58], and TRIM5 α from various Old World monkey species suppressed HIV-1 infection but not SIV [56,59]. TRIM proteins contain a tripartite motif defined by the presence of a RING (really interesting new gene) domain that possesses ubiquitin ligase activity, B-box and coiled-coil domain [60,61]. Coiled-coil domain is involved in multimerization of TRIM5 α proteins [62,63]. TRIM5 α encodes the C-terminal B30.2 (SPRY) domain that is absent in other TRIM5 isoforms. This SPRY domain is responsible for the direct interaction with viral CA and for the species-specific restriction of retroviral infection [64–68]. TRIM5 α -mediated restriction can occur rapidly after virus entry into target cells and impede the reverse transcription process. The interaction of trimeric TRIM5 α and multimerised viral CA leads to abnormally accelerated uncoating of incoming HIV-1 cores [69,70]. It has been suggested that either the reduction or increase of HIV-1 core stability with the mutations in CA impairs the reverse transcription [71] and that rapid disassembly of incoming HIV-1 cores mediated by TRIM5 α results in restriction of HIV-1 replication [69,70].

Proteasome inhibitors can relieve rhesus TRIM5 α -imposed block to the reverse transcription, and rescue the viral cDNA accumulation but not the productive infection of HIV-1 due to the inhibition of nuclear translocation of viral cDNA [72,73]. These observations suggest that TRIM5 α may restrict another distinct step(s) in HIV-1 infection [73,74]. In any case, the exact mechanism by which TRIM5 α blocks retroviral infection remains to be elucidated.

Cyclophilin A (CypA)

It was reported that HIV-1 CA binds to the cytoplasmic protein CypA [75]. Subsequent studies have indicated that CypA is efficiently incorporated into virions via interaction with HIV-1 CA domain in producer cells [76,77]. CypA also interacts with incoming HIV-1 cores in target cells and this interaction enhances HIV-1 infectivity [78,79].

In simian cells, reversely, CypA decreases HIV-1 infectivity depending on the presence of TRIM5 α . Both cyclosporine A and a small interfering RNA, by blocking the interaction between HIV-1 CA/CypA and by decreasing CypA expression level, respectively, rescue HIV-1 infectivity through reducing HIV-1 sensitivity to TRIM5 α in simian cells [80–83]. In contrast to the effect of CypA on TRIM5 α -mediated restriction in simian cells, the interaction of CypA with the incoming HIV-1 core protects from TRIM5 α restriction in human cells and CypA is required for maximal infectivity. It has been shown in human cells that the decrease of TRIM5 α expression has little effect on HIV-1 infectivity and that the decrease of HIV-1 infectivity by blocking CA-CypA interaction is independent of TRIM5 α expression, suggesting the existence of an unknown antiviral factor(s) in human cells [82–84]. Putative models for the recognition and interaction of CypA with TRIM5 α and CA in human and simian cells have been proposed [74,85].

APOBEC3G/F

HIV-1 Vif has been shown to be essential for HIV-1 infectivity in certain cell types including primary lymphocytes, monocyte-derived macrophages and some T-cell lines [86–88]. After extensive efforts by many researchers, human A3G was finally identified as a cellular target of HIV-1 Vif [89]. A3G is a member of a polynucleotide cytidine deaminase family that displays diverse functions [90,91]. Since the discovery of A3G, it has been shown that other APOBEC family members also exhibit antiviral properties [92–95]. Of these, APOBEC3F (A3F) has a similarly strong antiviral activity to that of A3G and is countered by Vif [92,96–100].

In the absence of Vif, human A3G and A3F are incorporated into HIV-1 virions. On the infection of new target cells, the virion-associated A3G and A3F deaminate cytidine in viral minus-strand DNA during reverse transcription, leading to either the G to A hypermutation of viral genome or degradation of the viral genome by cellular DNA repair enzymes [101–105]. Since the cytidine deaminase-inactivated A3G and A3F still retain antiviral activity [100,106], it is quite clear that A3G and A3F have deaminase-independent antiviral activity [100,106–110].

HIV-1 Vif degrades A3G and A3F via the ubiquitin–proteasome pathway by recruiting an E3 ubiquitin ligase complex with Cullin 5, Elongin B and Elongin C [99,111–114]. Some investigators have reported that Vif inhibits A3G antiviral activity via mechanisms independent of the ubiquitin–proteasome pathway [105,115–117]. The ability of Vif to induce the degradation of A3G is species-specific, and this specificity is probably determined by Vif/A3G binding. HIV-1 Vif interacts with and degrades human A3G and A3F but not A3Gs derived from the rhesus macaque and African green monkey. In contrast, SIVmac Vif is able to inactivate both human and simian A3Gs [118]. Very recently, binding sites of human A3G and A3F in HIV-1 Vif have been identified. It was demonstrated that the distinct regions of Vif are required for interaction with A3G and A3F [119–121; manuscript in preparation].

GENERATION OF MONKEY CELL-TROPIC HIV-1 DERIVATIVES

Although SHIVs have been used for studies of the immune responses to primate immunodeficiency viruses [122,123], of the protective role of antibodies directed against the HIV-1 Env [35,124], and of the disease progression [49,50], the SHIV/monkey system itself has many serious scientific issues as described earlier. After the discovery of two major host cell restriction factors, TRIM5 α and A3G (Figure 3), we initiated a research project to construct HIV-1/SIVmac chimeric viruses of a new and distinct category. We designed a hybrid virus in the backbone of the HIV-1 genome that can infect and grow in macaque monkey cells. In other words, we wished to make HIV-1 derivatives (genetically containing 90% or more sequences from HIV-1) having minimum essential sequences of SIVmac. Towards this end, the potentially important sequences within the HIV-1 genome against TRIM5 α and A3G, that is *gag* and *vif* genes, were mutated or replaced with the corresponding regions of SIVmac.

In our laboratory, numbers of *gag*-chimeric viruses between HIV-1 and SIVmac239 already have been constructed. Some of them lost the infectivity even in human cells, and none of them showed the infectivity in cynomolgus monkey (CyM) HSC-F cells [125,126]. HSC-F is a CyM T-cell line originally immortalised by

Herpesvirus saimiri [127]. Together with the data reported in early studies, these results prompted us to substitute both the CypA-binding loop in Gag-CA and the Vif with the corresponding sequences of SIVmac239 to generate monkey cell-tropic HIV-1 derivatives. As described below, we thus constructed an HIV-1 derivative designated pNL-ScaVR, which carries only a short seven-aa segment of *gag* gene corresponding to the HIV-1 CypA-binding loop and the entire *vif* gene from SIVmac [128]. The nine-aa CypA-binding loop in NL4-3 Gag-CA (HIV-1) was converted to the seven-residue MA239 CA analogue (SIVmac) by site-directed mutagenesis of a pNL4-3-derived *vif*-expression vector pNL-SX carrying the HIV-1 *vif* gene [129]. The full 214-aa Vif ORF from MA239 was amplified by PCR and inserted into this clone to generate a proviral construct pNL-ScaV. When expression of Gag, Pol, Env, Vpr, Vpu and Nef of pNL-ScaV was examined by transfection analysis, the level of Vpr was markedly reduced. Since this Vpr-defect was subsequently found to be caused by one of the *vif*-cloning sites in pNL-ScaV, a Vpr-repaired proviral clone designated pNL-ScaVR was constructed [128].

The SIVmac sequences in pNL-ScaVR were functionally active and counteracted effectively against the inhibitory factors in monkey cells as monitored by single-cycle replication assays for measuring *gag* and *vif* activities. As expected, the virus derived from pNL-ScaVR productively infected the CyM HSC-F cells. However, its growth kinetics were very much delayed relative to those of SIVmac from pMA239. Since it has been reported that HIV-1 acquires changes during extended tissue culture passage that confer augmented replicative properties [130,131], a viral adaptation experiment by long-term culture of infected HSC-F cells was performed. We successfully obtained viruses with enhanced growth abilities and finally have constructed by recombinant DNA techniques including PCR an infectious molecular clone (two biologically significant mutations in *env* gene) from them. It was designated pNL-DT5R [128] and used subsequently as a prototype clone (Figure 4). The NL-DT5R virus certainly grows in CD8-depleted PBMC prepared from pig-tailed and rhesus macaques and also in pig-tailed monkeys (see below), albeit less efficiently than SIVmac239. Another proviral clone designated stHIV-1, which contains the

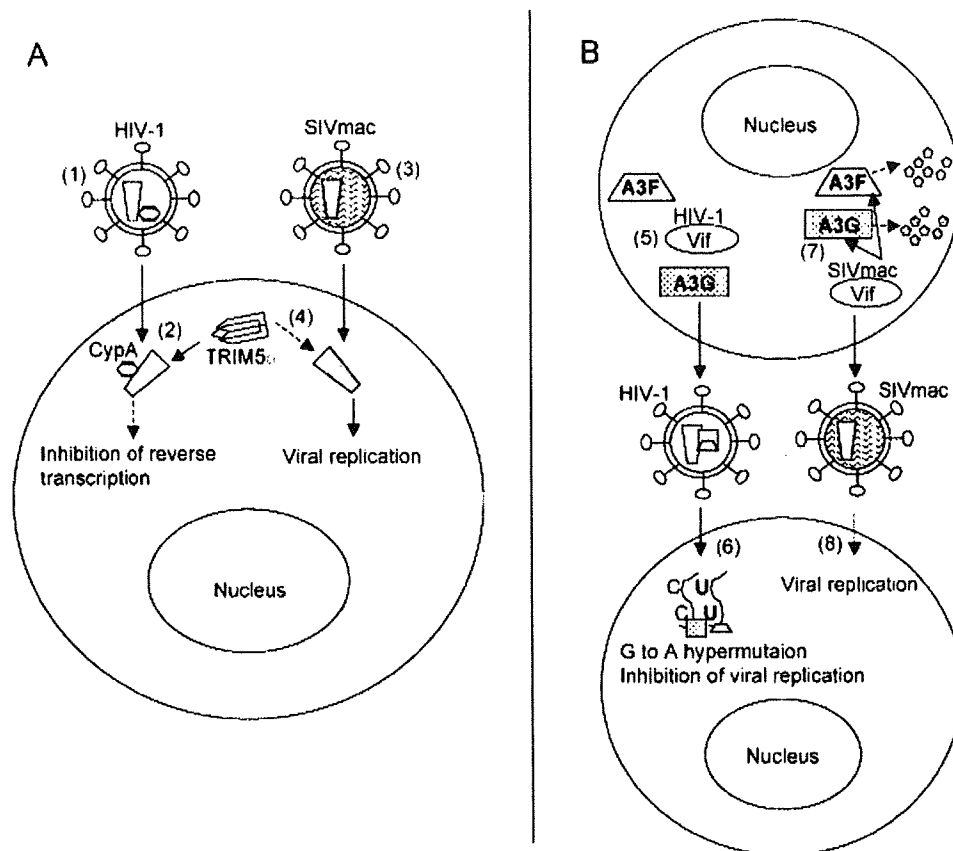


Figure 3. Schematic representation of species-specific restriction of HIV-1 replication by CypA/TRIM5 α and by A3G/F in macaque monkey cells. Early HIV-1 replication steps affected by CypA/TRIM5 α (A) and by A3G/F (B) are highlighted. (1) CypA is incorporated into HIV-1 virion. (2) After entry into cells, macaque TRIM5 α interacts with CypA-CA core and promotes accelerated uncoating, resulting in the inhibition of reverse transcription. (3) No CypA is present in SIVmac virion. (4) In macaque cells, TRIM5 α is unable to target SIVmac CA core and viral replication occurs efficiently. (5) HIV-1 Vif is unable to interact with and degrade macaque A3G/F, and both proteins are incorporated into HIV-1 virion. (6) In target cells, the virion-associated A3G/F deaminate cytidines in viral minus-strand DNA during reverse transcription, leading to the inhibition of viral replication by either G to A hypermutation in viral genome or the degradation of viral genome by cellular DNA repair enzyme. (7) SIVmac Vif inactivates macaque A3G/F in infected cells. (8) There is no carry-over of A3G/F, and SIVmac replication occurs normally in target cells

entire SIVmac CA and Vif coding sequences, was similarly constructed by others (Figure 4) and the virus was shown to be growth-competent in rhesus macaque PBMC [132]. Whether stHIV-1 can grow in monkeys is not yet reported.

To establish an ideal monkey model system for HIV-1/AIDS study, generation of HIV-1 derivatives that grow similarly well with SIVmac239, are pathogenic for macaque monkeys as well, and are R5-tropic, if possible, is essential. We already have started to modify the genome of NL-DT5R to further improve its growth potential in monkey cells. Extensive attempts to obtain *gag*

and/or *vif* variants of NL-DT5R with an accelerated replication ability were unsuccessful (manuscripts in preparation; our unpublished data). Some of them were constructed based on the published reports [132,133]. Parallel attempts to construct R5-tropic viruses by *env*-substitution resulted in two full-length molecular clones designated pNL-DT5R5-1 and pNL-DT5R5-2 infectious for CD8-depleted PBMC of pig-tailed monkeys (our unpublished results). NL-DT5R5-1 was also infectious for HSC-F cells but less efficiently than the parental NL-DT5R as for PBMC. Clearly, biologically different from NL-DT5R, NL-DT5R5-1

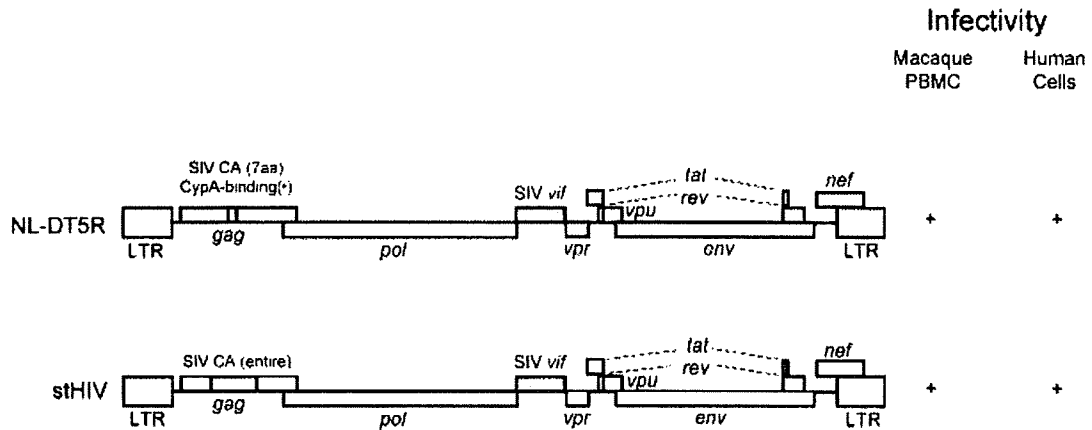


Figure 4. Genomic organisation and cellular tropism of HIV-1/SIVmac chimeric viruses of a novel class. White and grey boxes represent sequences from the parental clones NL4-3 (HIV-1) and MA239 (SIVmac), respectively. (+) on the right indicates growth-competence

rapidly induced severe cytopathic effects in HSC-F cells.

On the basis of our results and observations described above, we decided to modify the genomes of NL-DT5R and NL-DT5R5-1 by viral adaptation within HSC-F cells (Figure 5). Virus stocks prepared from transfected 293T cells were inoculated into HSC-F cells, and the cultures were maintained until progeny virus production was undetectable. Fresh HSC-F cells were then added

to the cultures (on day 45 post-infection) and they were monitored for virus production. Viruses soon emerged in both co-cultures and grew to a higher level relative to that of viruses in early infection days. In order to ascertain the adapted nature of the emerged viruses, culture supernatants, collected from HSC-F cells infected with either NL-DT5R or NL-DT5R5-1 on day 57 (Figure 5) and normalised by RT activity, were inoculated into HSC-F cells (Figure 6). As is clear, the late

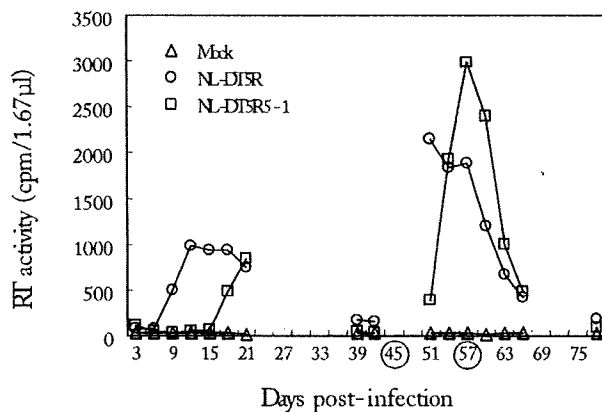


Figure 5. Growth properties of NL-DT5R (X4-tropic) and NL-DT5R5-1 (R5-tropic) viruses during a long-term passage in HSC-F cells. Virus samples were prepared from 293T cells transfected with the indicated proviral clones (Mock, pUC19), and equal RT units of viruses were inoculated into CyM HSC-F cells. Virus replication was monitored by RT production in the culture supernatants. On day 45 post-infection, fresh uninfected HSC-F cells were added to the cultures. On day 57 post-infection, cell-free viruses were prepared from the cultures, and used for monitoring their growth properties (see Figure 6)

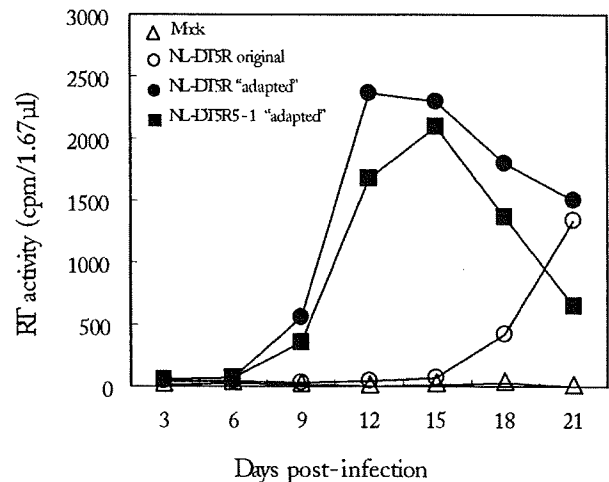


Figure 6. Growth kinetics of viruses generated during a long-term passage in HSC-F cells. Culture supernatants from NL-DT5R- or NL-DT5R5-1-infected HSC-F cells (adapted) were collected on day 57 post-infection (Figure 5), and equivalent RT units were inoculated into HSC-F cells. Virus replication was monitored by RT production in the culture supernatants. For controls, samples prepared from 293T cells transfected with NL-DT5R (original) or pUC19 (Mock) were used

emerging viruses did in fact exhibit the adapted phenotype, that is, more robust viral replication and more extensive viral cytopathic effects than the original parental non-HSC-F-passage viruses. We have obtained a number of molecular clones from these adapted viruses by the method described above, and confirmed that viruses derived from them reproduce a similar biological property or even show a more enhanced phenotype in infected HSC-F cells (our unpublished results).

INFECTIONS OF MONKEYS WITH THE PROTOTYPE MONKEY CELL-TROPIC HIV-1 NL-DT5R

As a first monkey infection experiment of monkey cell-tropic HIV-1, NL-DT5R was inoculated into four pig-tailed macaques with/without anti-CD8 antibody treatment [134]. All the monkeys showed signs for viral productive and persistent infection. Plasma viral loads as monitored by viral RNA were elevated, reached a peak and gradually declined to an undetectable level by 5 to 11 weeks post-inoculation. Viral DNA in PBMC similarly persisted for 45 weeks post-infection. Virus in the infected animals could be transferred to another pig-tailed monkey. The NL-DT5R challenge into pig-tailed macaques also induced anti-HIV-1 antibody directed against HIV-1 encoded p17, p24, gp41, gp120 and gp160. However, the numbers of circulating CD4⁺ T-lymphocytes did not change appreciably during the observation period. Depletion of CD8⁺ cells had a small but significant effect on most of the above-described outcomes. In total, although NL-DT5R induced plasma viraemia and anti-HIV-1 antibodies in pig-tailed macaques, no significant depletion of CD4⁺ T-cells and no evidence of clinical disease were observed. Based on these results, other sets of monkey experiments are now taking off. Infection of CyMs, rhesus monkeys and pig-tailed monkeys by NL-DT5R and its improved versions may be a milestone for the establishment of monkey models for HIV-1/AIDS study.

CONCLUSIONS AND FUTURE DIRECTIONS

Recently discovered and extensively studied host cell restriction factors against HIV-1 have given us a rationale for generation of monkey-tropic HIV-1 to establish a pivotal monkey system for both basic and clinical studies. These factors

have explained, at least in part, the narrow host range of HIV-1, and a number of new HIV-1s that are able to infect monkey cells have been generated by us and others [128,132; our unpublished data]. The genome of monkey-tropic HIV-1s basically contains both a 21-nucleotide SIVmac239 Gag-CA element, corresponding to the HIV-1 CypA-binding site, and the entire SIVmac 239 *vif* gene (Figure 4). While the prototype monkey-tropic HIV-1 designated NL-DT5R clearly established spreading infections in a CyM T-cell line, CD8-depleted PBMCs from pig-tailed and rhesus macaques, it did not cause AIDS-like symptoms at all in pig-tailed monkeys. Because the virus grows more poorly than the SIVmac239 virus both in cultured simian cells and in monkeys, improvement of viral replication by the modification of the viral genome is required for developing tractable monkey models for HIV-1/AIDS study. Our extensive attempts to obtain such variant viruses through genetic manipulation of *gag* and *vif* genes have so far been unsuccessful. In sharp contrast, viral adaptation in cells to speed up the growth rate appeared to occur quite efficiently (Figures 5 and 6), and infectious molecular clones with adapted viral phenotypes tropic either for X4 or R5 cells were obtained (our unpublished results). Sequencing the genome of adapted viruses and subsequent functional analysis may reveal the presence of an otherwise undiscovered genetic region(s) responsible for the species tropism of HIV-1. We have been convinced that the above-mentioned new viral clones would give us a good chance to develop HIV-1/AIDS-nonhuman primate models. According to recent reports [135,136], incorporation of green fluorescent protein (GFP) into HIV-1 clones enables one to visualise the virus itself. We are interested in generating 'visible viruses', since they are eminently useful to determine the movement of viruses in monkeys that would be involved in or associated with disease progression.

Needless to say, monkey infection models provide powerful tools for the elucidation of the unknown role of HIV-1 accessory proteins in the HIV-1 life cycle and pathogenesis, and more importantly, for the development of vaccines and drugs for the prevention and treatment. In a different point of view, we are also interested in analysing, by determining the alterations of viral genomes, the difference of responses against HIV-1 infection among individuals and/or

species. HIV-1 may variably mutate and evolve during the course of spreading persistent infection. The information from these studies would offer new avenues for clinical features as well as basic research in HIV-1.

REFERENCES

1. De Clercq E. HIV inhibitors targeted at the reverse transcriptase. *AIDS Res Hum Retroviruses* 1992; **8**(2): 119–134.
2. Uberla K, Stahl-Henning C, Bottiger D, *et al.* Animal model for the therapy of acquired immunodeficiency syndrome with reverse transcriptase inhibitors. *Proc Natl Acad Sci USA* 1995; **92**(18): 8210–8214.
3. Witvrouw M, Pannecouque C, Switzer WM, *et al.* Susceptibility of HIV-2, SIV and SHIV to various anti-HIV-1 compounds: implications for treatment and postexposure prophylaxis. *Antivir Ther* 2004; **9**(1): 57–65.
4. Nishimura Y, Igarashi T, Donau OK, *et al.* Highly pathogenic SHIVs and SIVs target different CD4+ T cell subsets in rhesus monkeys, explaining their divergent clinical courses. *Proc Natl Acad Sci USA* 2004; **101**(33): 12324–12329.
5. Nishimura Y, Brown CR, Mattapallil JJ, *et al.* Resting naive CD4+ T cells are massively infected and eliminated by X4-tropic simian-human immunodeficiency viruses in macaques. *Proc Natl Acad Sci USA* 2005; **102**(22): 8000–8005.
6. Brown CR, Czapiga M, Kabat J, *et al.* Unique pathology in simian immunodeficiency virus-infected rapid progressor macaques is consistent with a pathogenesis distinct from that of classical AIDS. *J Virol* 2007; **81**(11): 5594–5606.
7. Kanki PJ, McLane MF, King NW Jr, *et al.* Serologic identification and characterization of a macaque T-lymphotropic retrovirus closely related to HTLV-III. *Science* 1985; **228**(4704): 1199–1201.
8. Daniel MD, Letvin NL, King NW, *et al.* Isolation of T-cell tropic HTLV-III-like retrovirus from macaques. *Science* 1985; **228**(4704): 1201–1204.
9. Letvin NL, Daniel MD, Sehgal PK, *et al.* Induction of AIDS-like disease in macaque monkeys with T-cell tropic retrovirus STLV-III. *Science* 1985; **230**(4721): 71–73.
10. Naidu YM, Kestler HW III, Li Y, *et al.* Characterization of infectious molecular clones of simian immunodeficiency virus (SIVmac) and human immunodeficiency virus type 2: persistent infection of rhesus monkeys with molecularly cloned SIVmac. *J Virol* 1988; **62**(12): 4691–4696.
11. Kestler H, Kodama T, Ringler D, *et al.* Induction of AIDS in rhesus monkeys by molecularly cloned simian immunodeficiency virus. *Science* 1990; **248**(4959): 1109–1112.
12. Murphey-Corb M, Martin LN, Rangan SR, *et al.* Isolation of an HTLV-III-related retrovirus from macaques with simian AIDS and its possible origin in asymptomatic mangabeys. *Nature* 1986; **321**(6068): 435–437.
13. Fultz PN, McClure HM, Anderson DC, *et al.* Isolation of a T-lymphotropic retrovirus from naturally infected sooty mangabey monkeys (*Cercocebus atys*). *Proc Natl Acad Sci USA* 1986; **83**(14): 5286–5290.
14. Hirsch VM, Olmsted RA, Murphey-Corb M, *et al.* An African primate lentivirus (SIVsm) closely related to HIV-2. *Nature* 1989; **339**(6223): 389–392.
15. Fukasawa M, Miura T, Hasegawa A, *et al.* Sequence of simian immunodeficiency virus from African green monkey, a new member of the HIV/SIV group. *Nature* 1988; **333**(6172): 457–461.
16. Daniel MD, Li Y, Naidu YM, *et al.* Simian immunodeficiency virus from African green monkeys. *J Virol* 1988; **62**(11): 4123–4128.
17. Allan JS, Short M, Taylor ME, *et al.* Species-specific diversity among simian immunodeficiency viruses from African green monkeys. *J Virol* 1991; **65**(6): 2816–2818.
18. Tsujimoto H, Hasegawa A, Maki N, *et al.* Sequence of a novel simian immunodeficiency virus from a wild-caught African mandrill. *Nature* 1989; **341**(6242): 539–541.
19. Souquiere S, Bibollet-Ruche F, Robertson DL, *et al.* Wild Mandrillus sphinx are carriers of two types of lentivirus. *J Virol* 2001; **75**(15): 7086–7096.
20. Hirsch VM, Dapolite G, Johnson PR, *et al.* Induction of AIDS by simian immunodeficiency virus from an African green monkey: species-specific variation in pathogenicity correlates with the extent of in vivo replication. *J Virol* 1995; **69**(2): 955–967.
21. Desrosiers RC. The simian immunodeficiency viruses. *Annu Rev Immunol* 1990; **8**: 557–578.
22. Hirsch VM, Johnson PR. Pathogenic diversity of simian immunodeficiency viruses. *Virus Res* 1994; **32**(2): 183–203.
23. Shibata R, Kawamura M, Sakai H, *et al.* Generation of a chimeric human and simian immunodeficiency virus infectious to monkey peripheral blood mononuclear cells. *J Virol* 1991; **65**(7): 3514–3520.
24. Hofmann W, Schubert D, LaBonte J, *et al.* Species-specific, postentry barriers to primate immunodeficiency virus infection. *J Virol* 1999; **73**(12): 10020–10028.
25. Cowan S, Hatzioannou T, Cunningham T, *et al.* Cellular inhibitors with Fv1-like activity restrict human and simian immunodeficiency virus tropism. *Proc Natl Acad Sci USA* 2002; **99**(18): 11914–11919.