

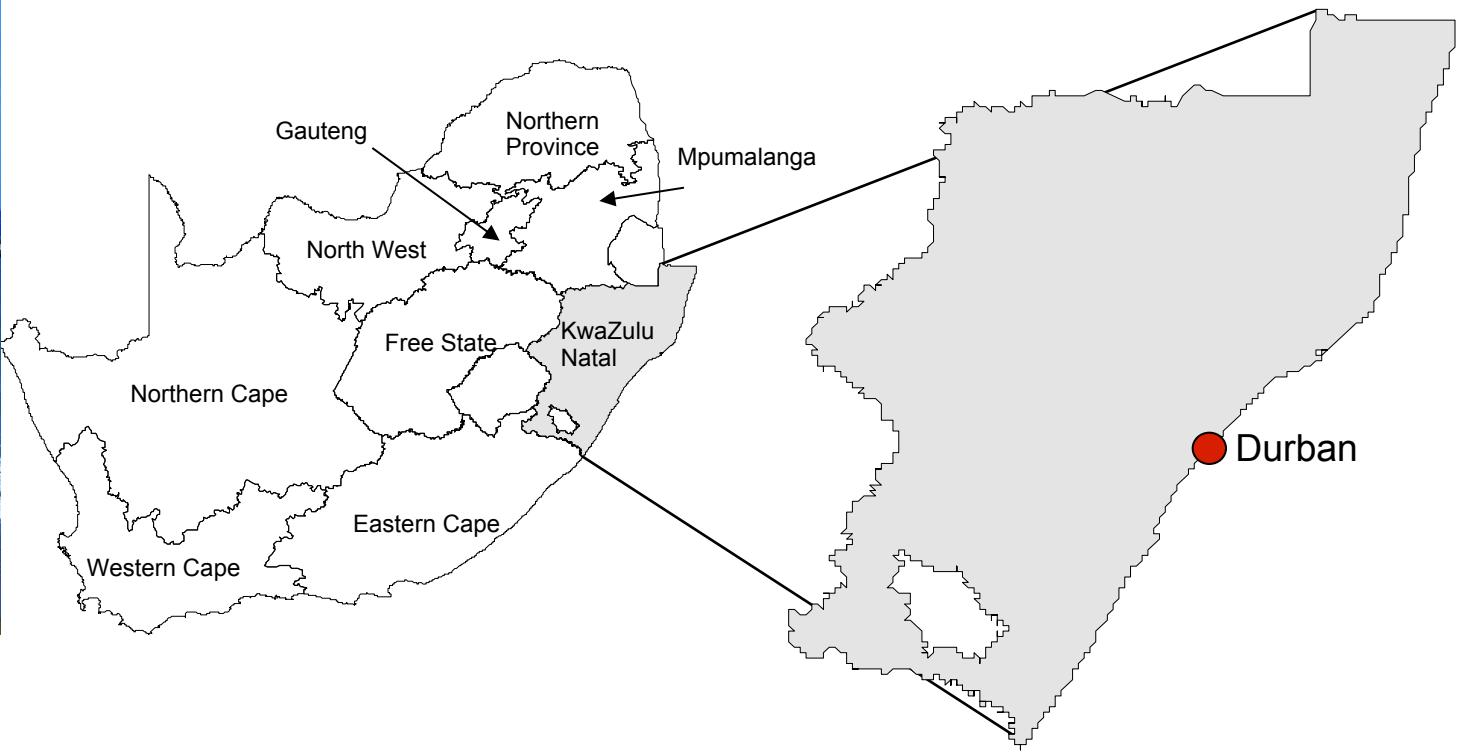
Early HIV-specific CD8⁺ T cell responses in treated and untreated hyper acute HIV infection in the FRESH cohort

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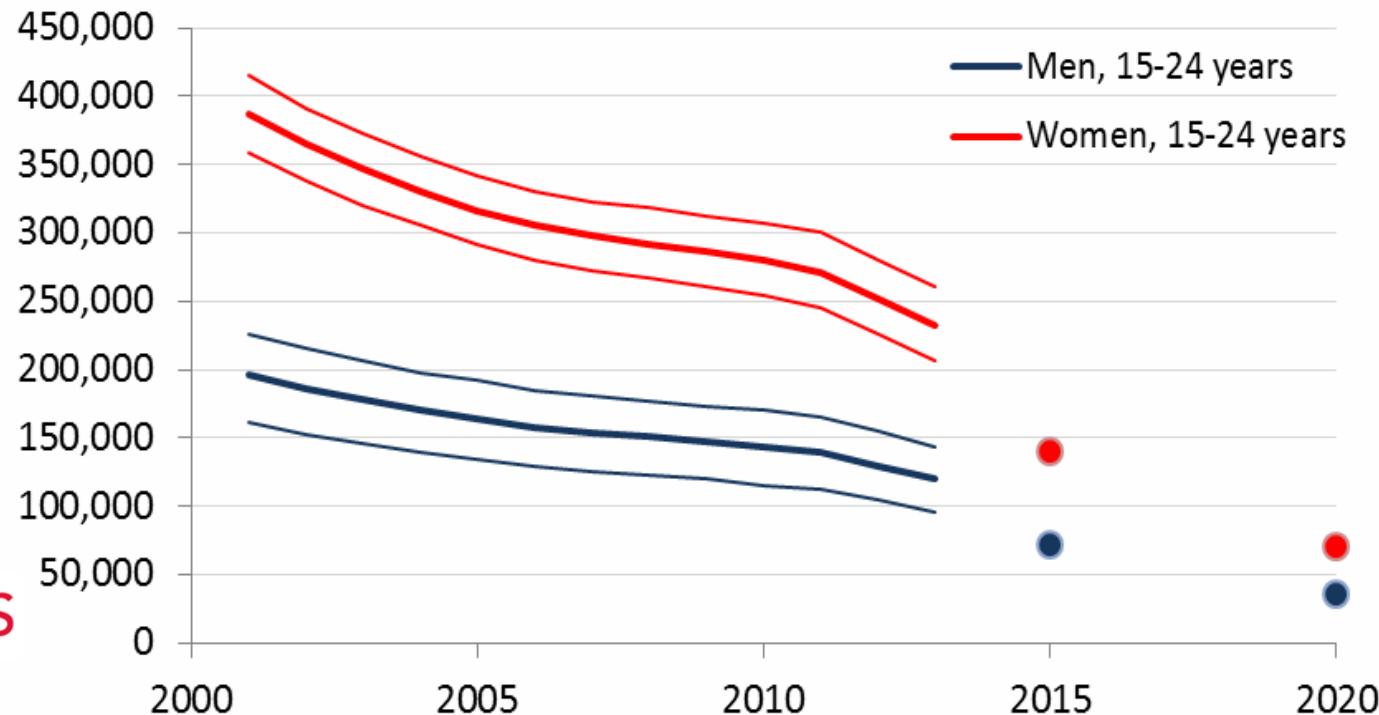
Outline

- HIV incidence in young women in KwaZulu-Natal and in sub-Saharan Africa
- The FRESH cohort- a unique cohort to address gaps in HIV prevention, pathogenesis and cure research
- Insights on early CD8 and CD4 T cell responses during untreated and treated hyperacute HIV infection
- Implications for HIV prevention and cure strategies in resource-limited settings

KwaZulu-Natal and Durban, South Africa



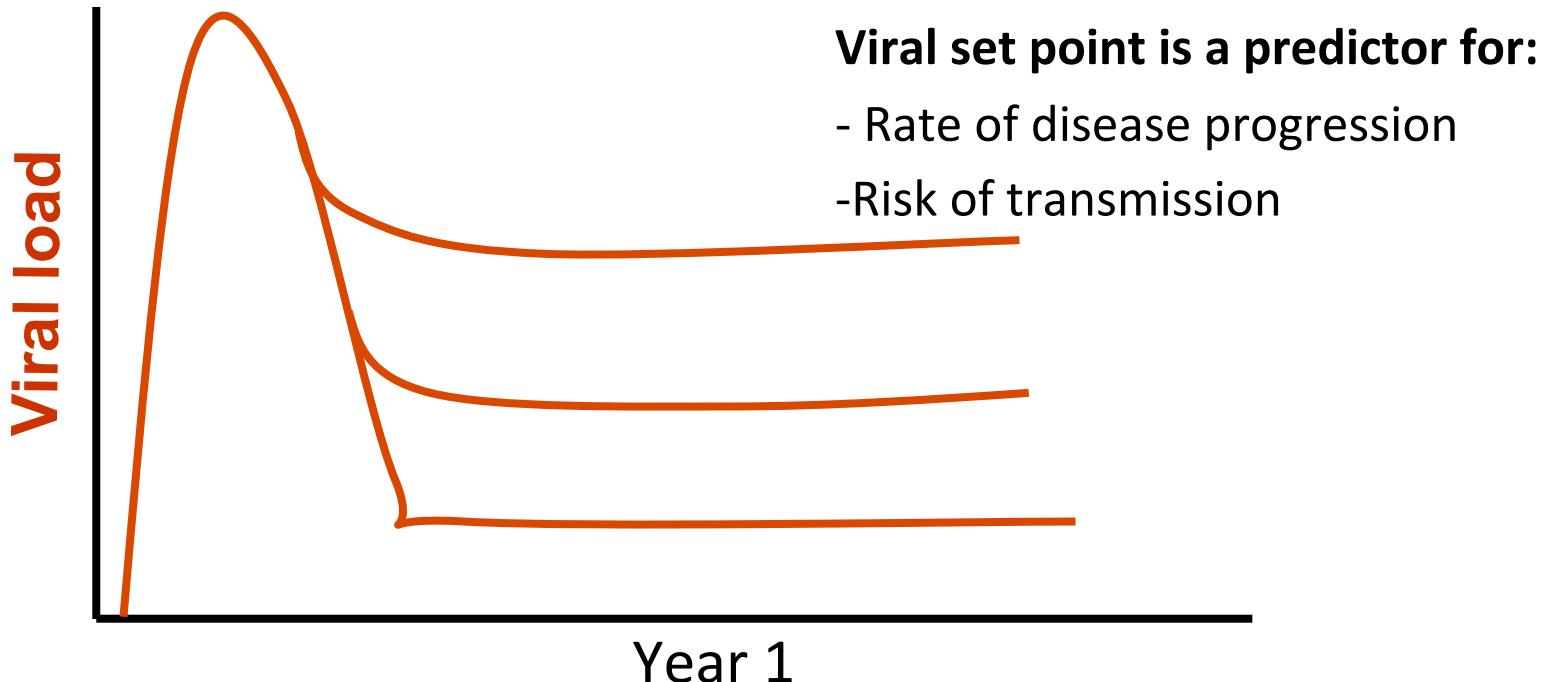
Eastern and southern Africa: high new HIV infections among young women aged 15-24 years



UNAIDS

- There is a need to better understand the reasons for high incidence among young women
- Current strategies are suboptimal- new biomedical interventions such as vaccines are needed

Acute HIV-1 infection- what lessons can we learn?



Key questions:

- What behavioural, socioeconomic and biomedical factors are responsible for such high incidence among young women?
- What is the nature of the transmitted/founder virus?
- What do immune responses in acute HIV-1 infection look like and why do they ultimately fail in most cases?

FRESH study cohort

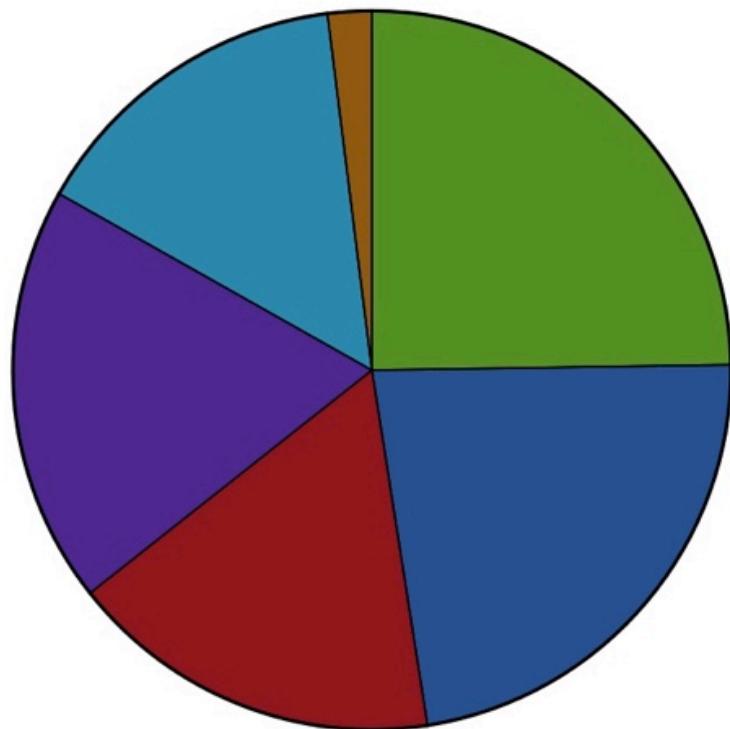
- FRESH: Females Rising through Education, Support and Health
- Recruit women 18 to 23 at very high risk of HIV infection
- Objectives
 1. Provide an intensive empowerment, life-skills and job readiness curriculum.
 2. Identify persons in the earliest stages of acute infection.
 - Study antiviral immune mechanisms

Study setup and sample collection

- Phase I: Surveillance
 - Twice weekly HIV RNA PCR testing via finger stick blood draws
 - Quarterly blood and mucosal sampling of the female genital tract
 - Phase II: Acute Infection

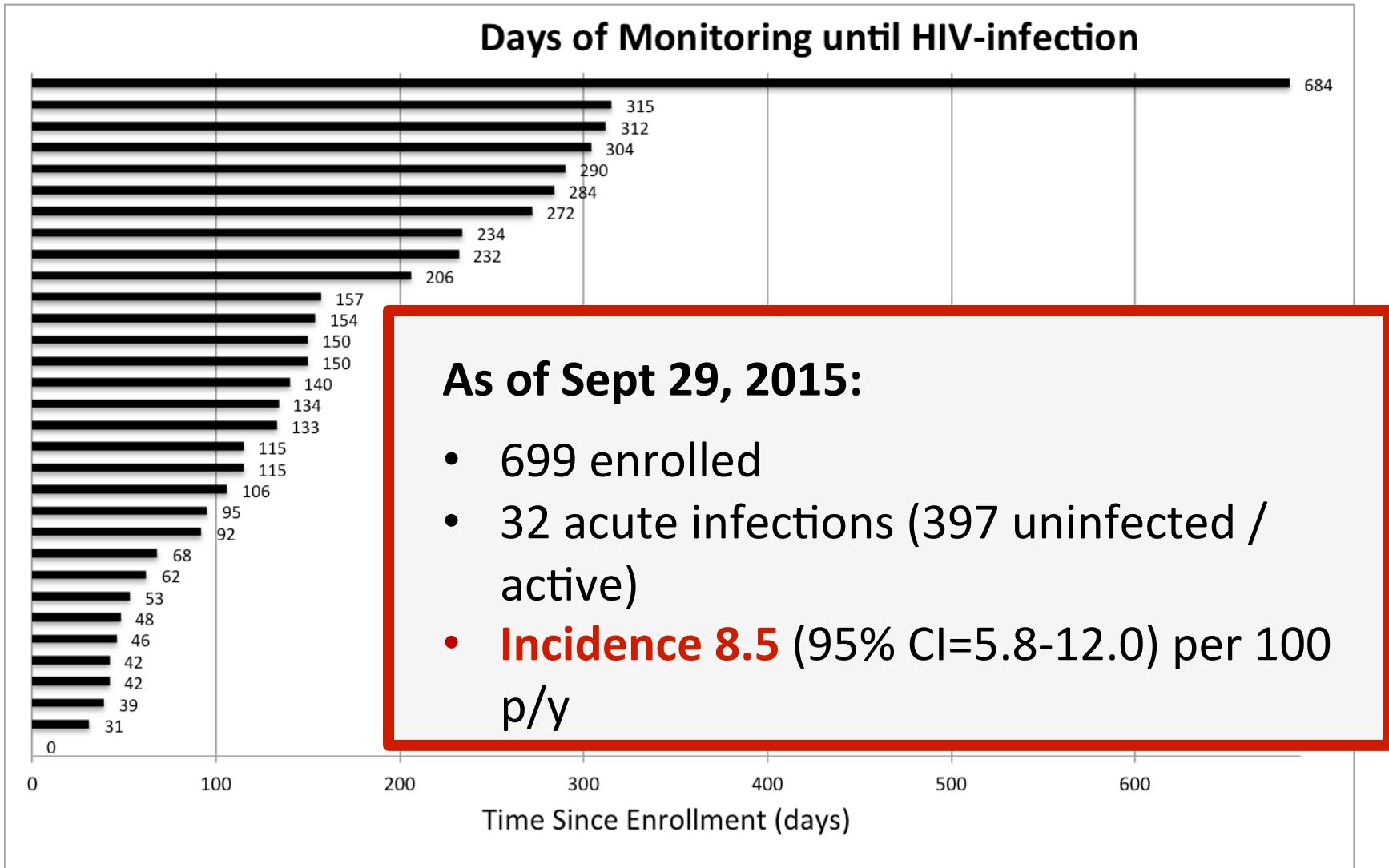
Empowerment Program

FRESH Placements (n=248)



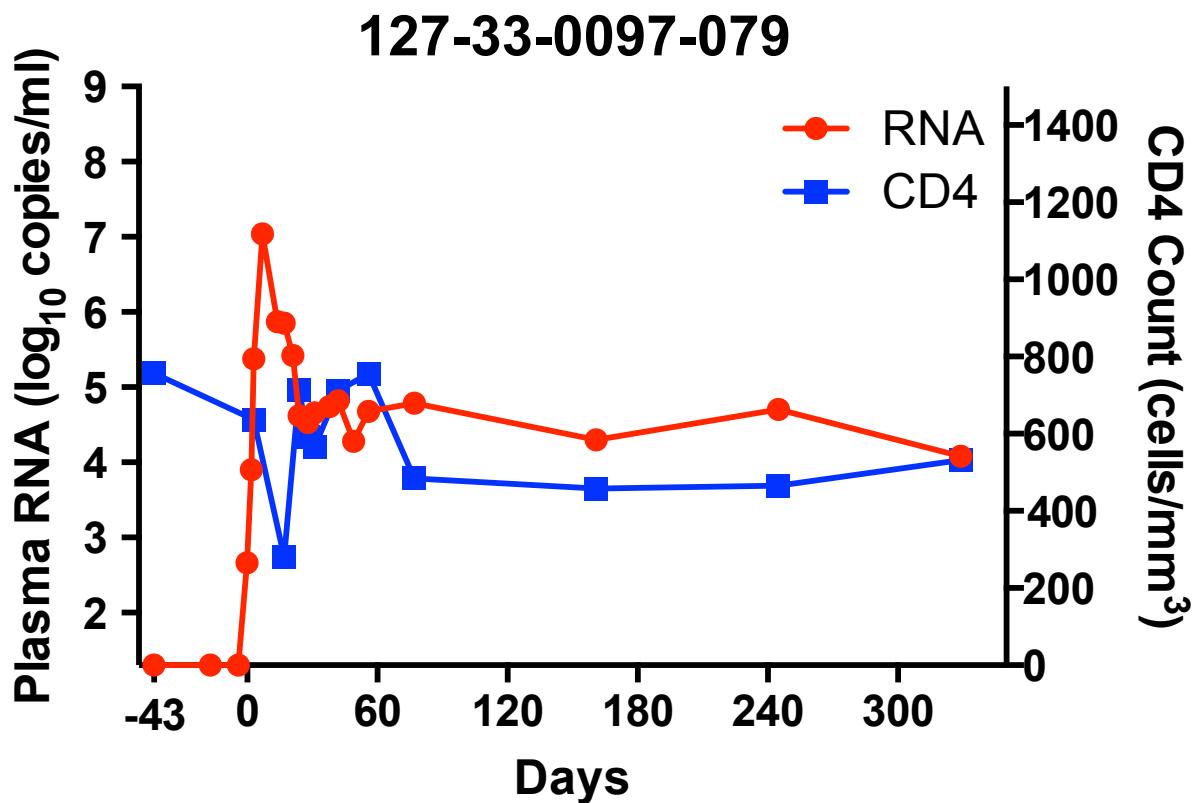
- Employment
- Internship/Learnership
- High School Diploma Course
- University
- Not yet placed
- Small Business

Acute infections detected (N=32)



- Median: 124 days; range 0-684

Viral and cellular dynamics in hyperacute HIV infection



FRESH studies

- The FRESH study design allows us to address critical questions in:
- HIV prevention research-
- Risk factors for HIV acquisition (Anahtar et al, 2015, *Immunity*) (Byrne, Anahtar et al, *Lancet ID*, in press)
- Innate immune responses (Kløverpris et al, 2016, *Immunity*)
- Early B cell responses
- **Early CD8 T cell responses (Ndhlovu et al, 2015, *Immunity*)**

Dynamics of T cell responses in primary HIV infection: experimental approach

Study subjects- 12 FRESH seroconverters

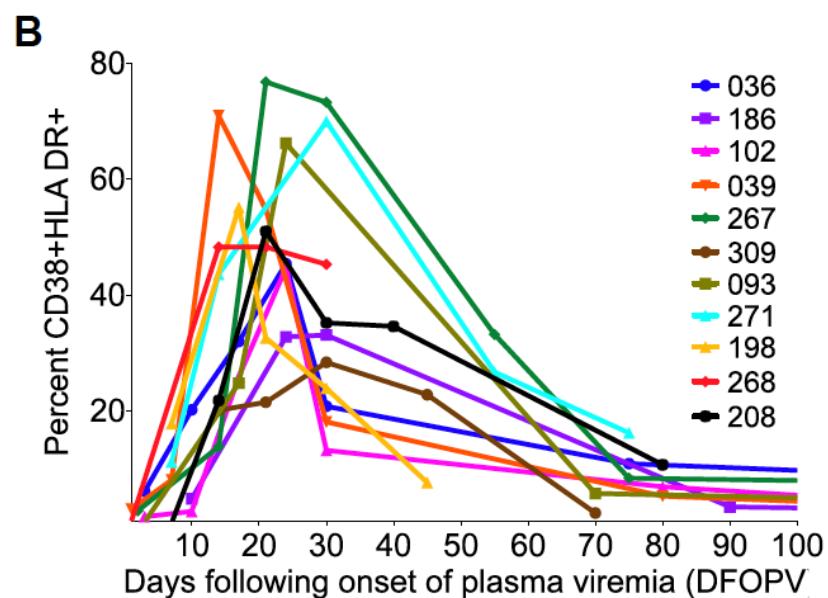
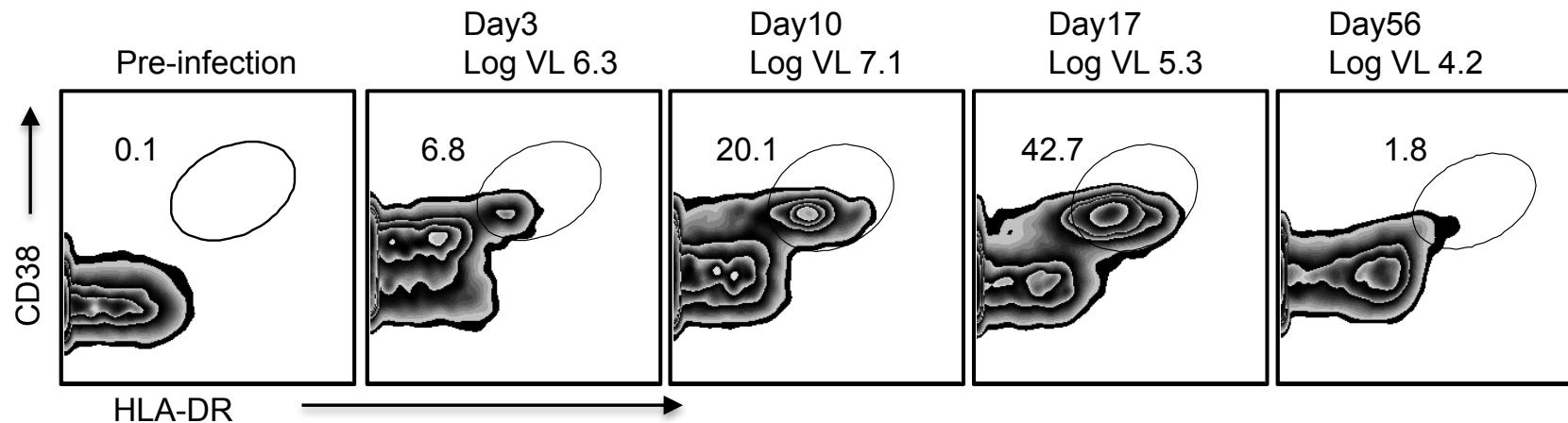
Longitudinal analysis of HIV induced T cell responses

Recently activated T cells (CD38+, HLA-DR+)

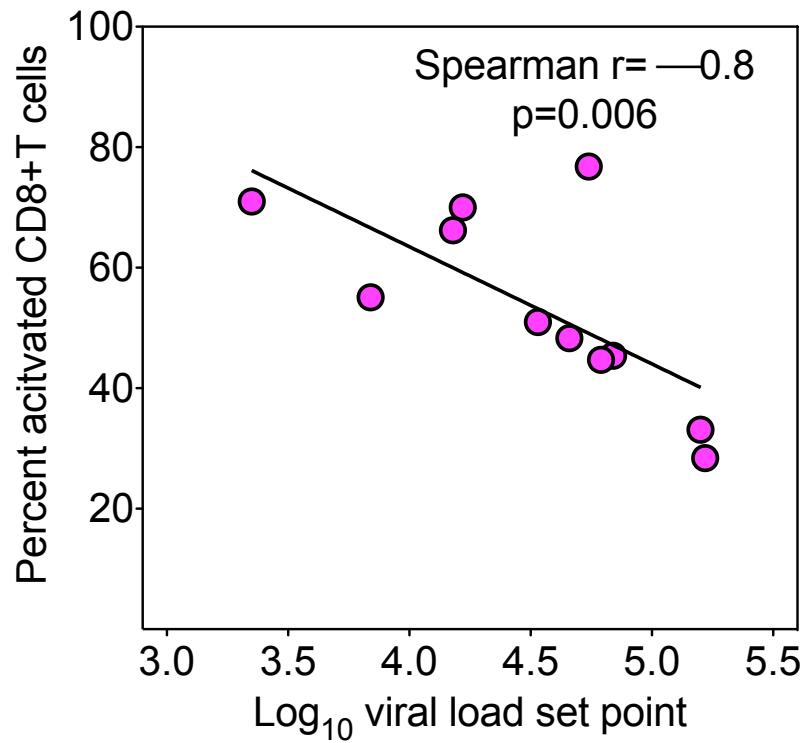
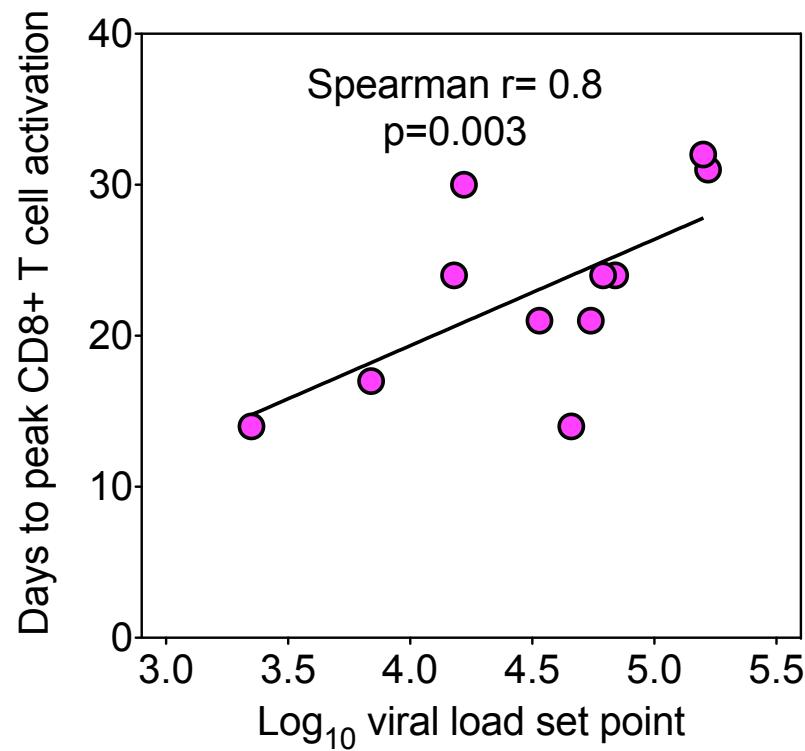
Recently stimulated cycling T cells (Ki67+, Bcl-2 negative)

HIV antigen-specific T cells (Elispot, ICS and tetramer)

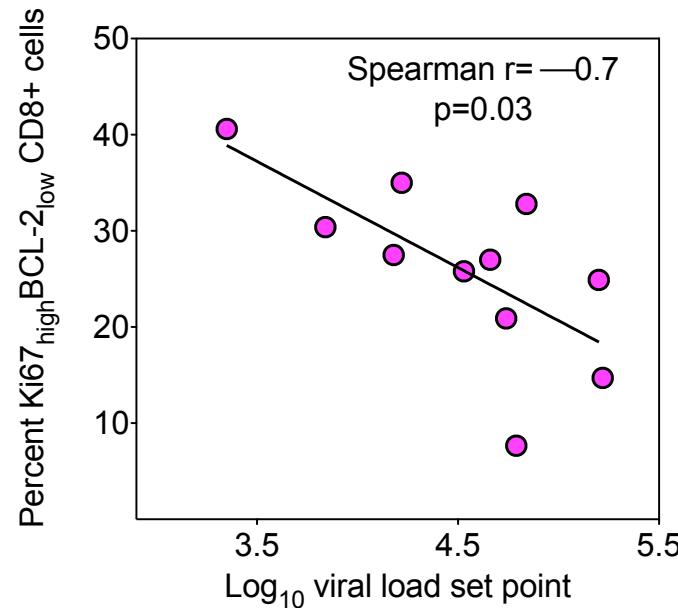
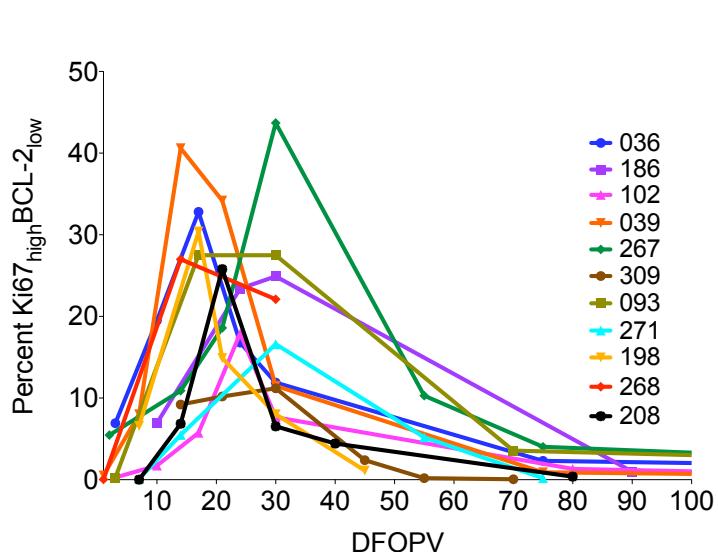
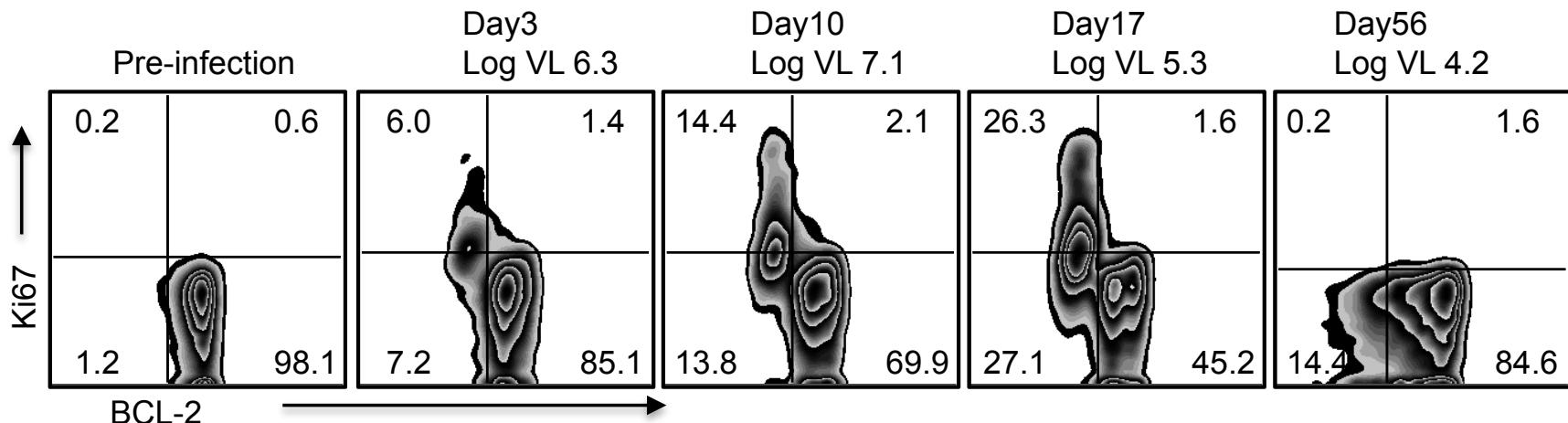
HIV infection induces massive activation (CD38+HLA-DR+) of CD8+ T cells



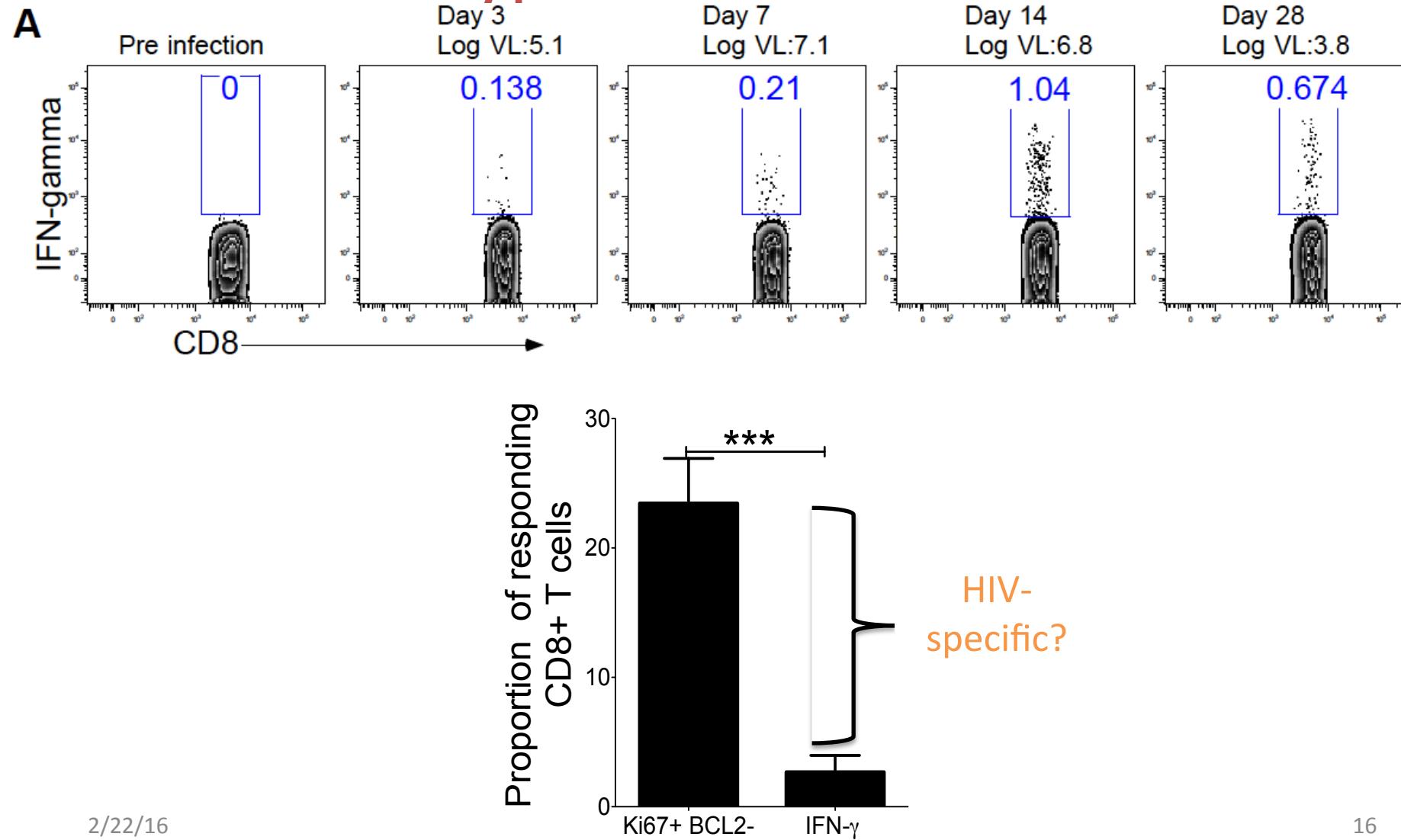
The timing and strength of the initial CD8+ T cell responses impact viral load set point



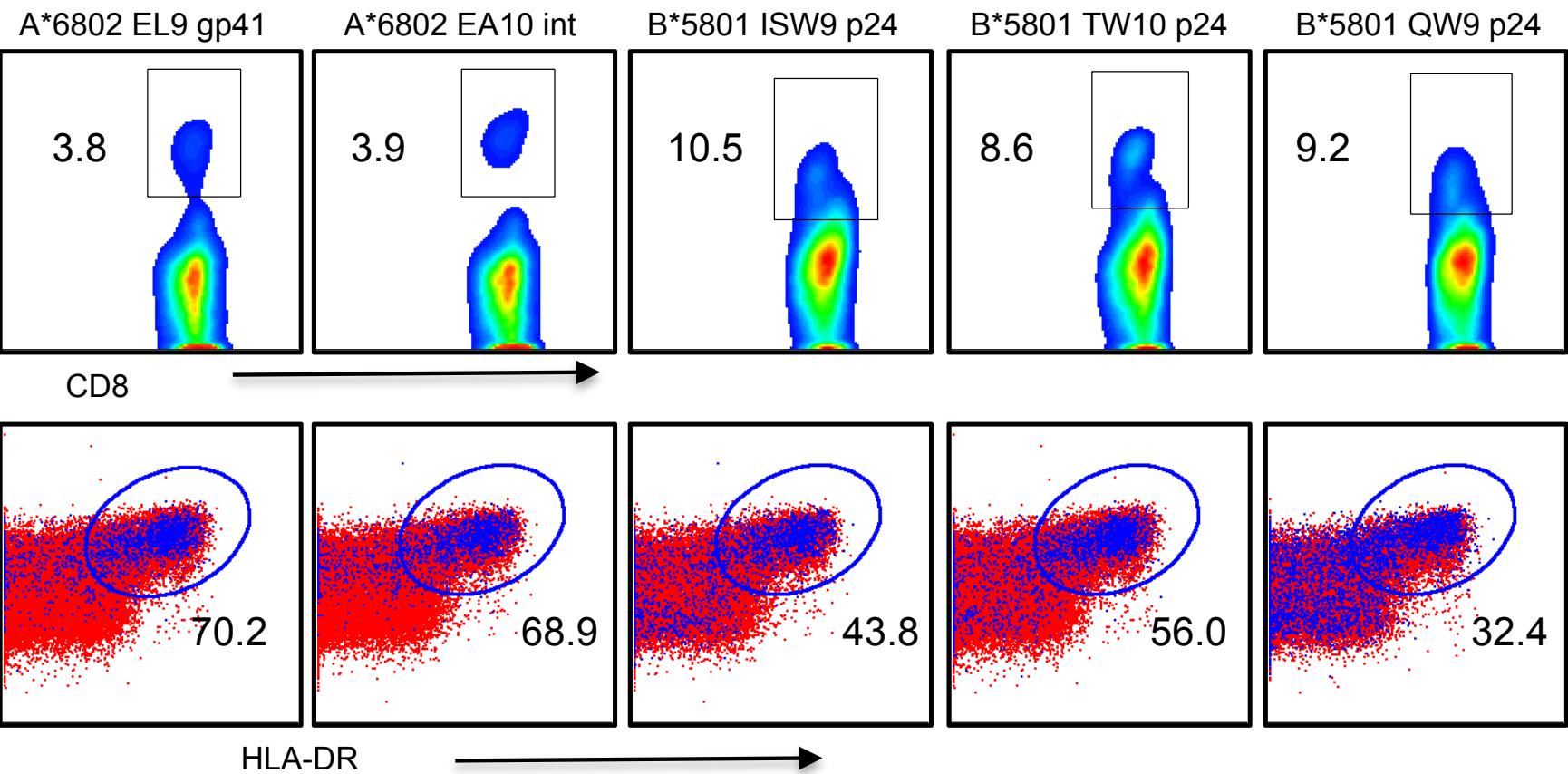
Hyperacute CD8+ T cells are highly proliferative and pro-apoptotic (Ki67+BCL2low)



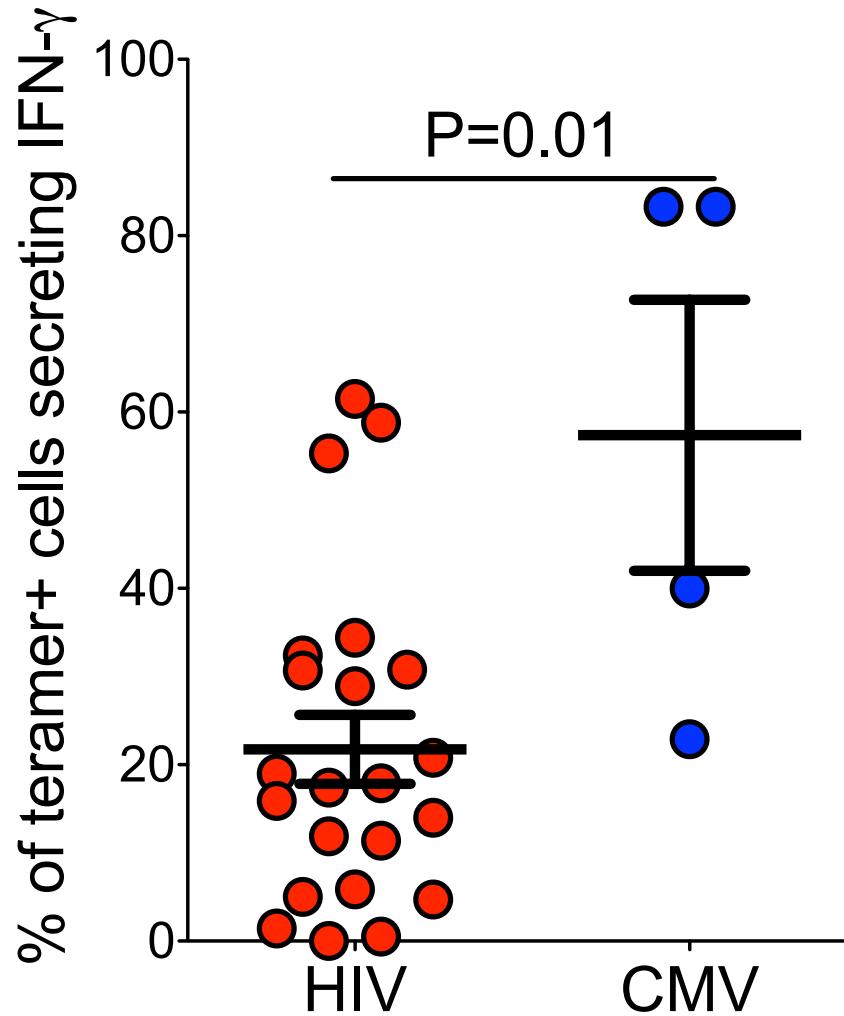
Paucity of IFN- γ production in hyperacute infection



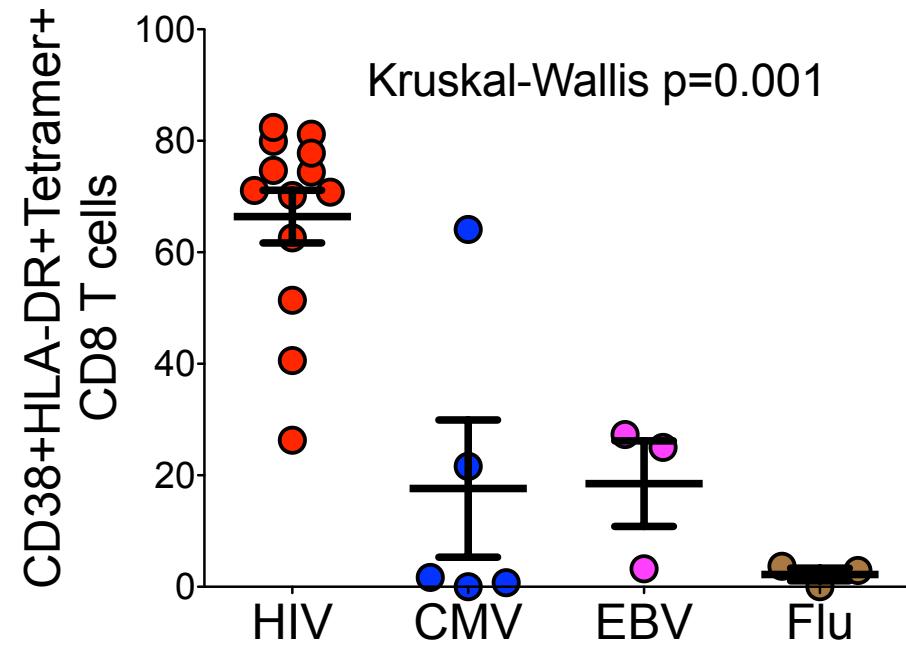
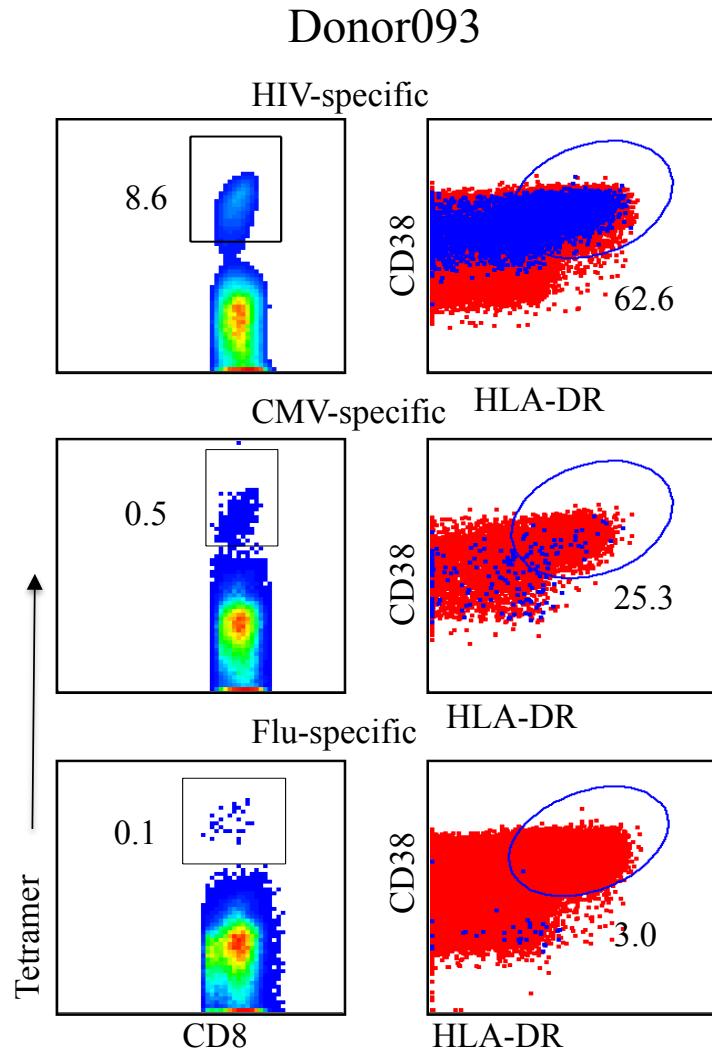
Tetramer staining CD8+ T cells at peak activation



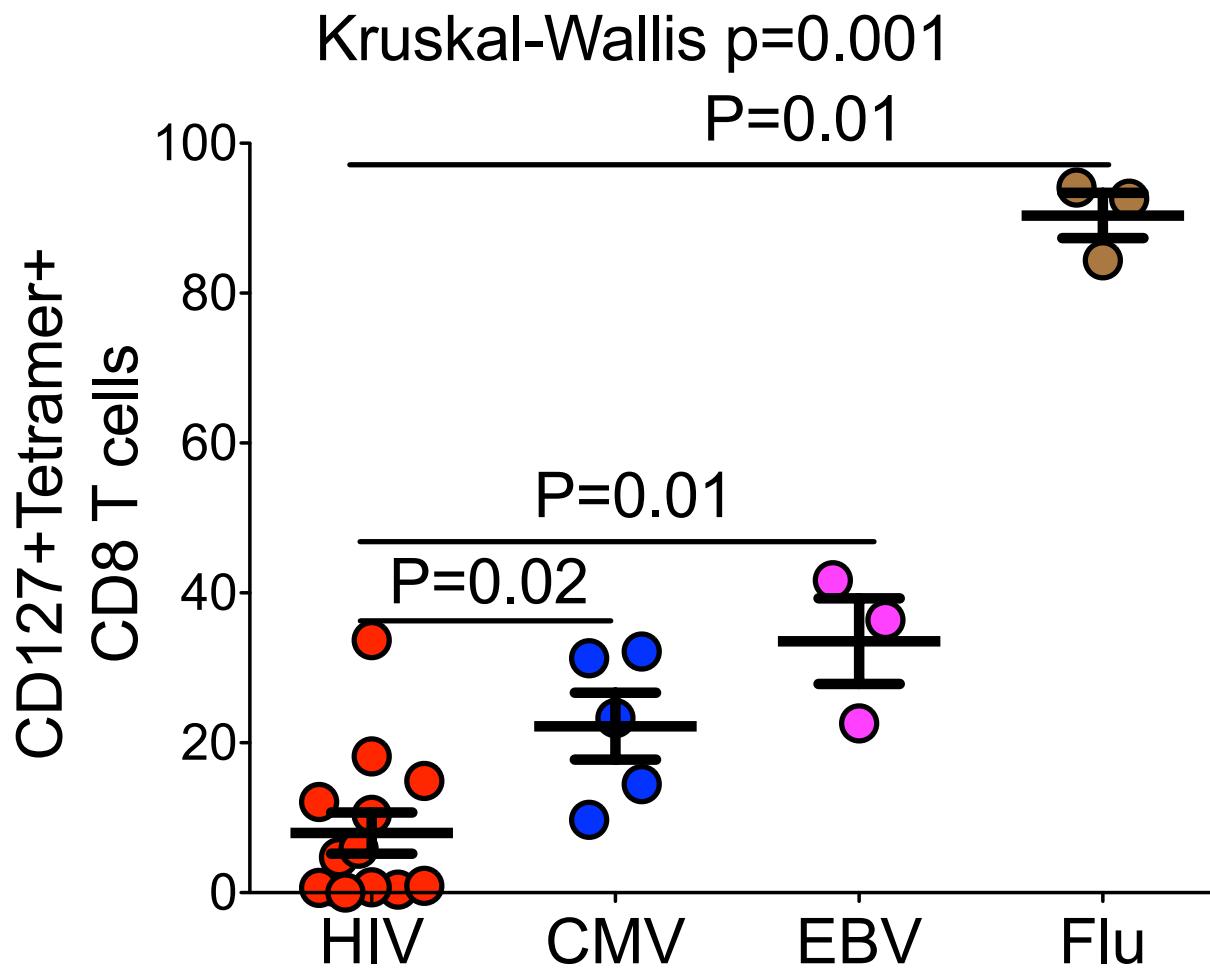
HIV specific CD8 T cells are defective in IFN-gamma secretion during acute HIV infection



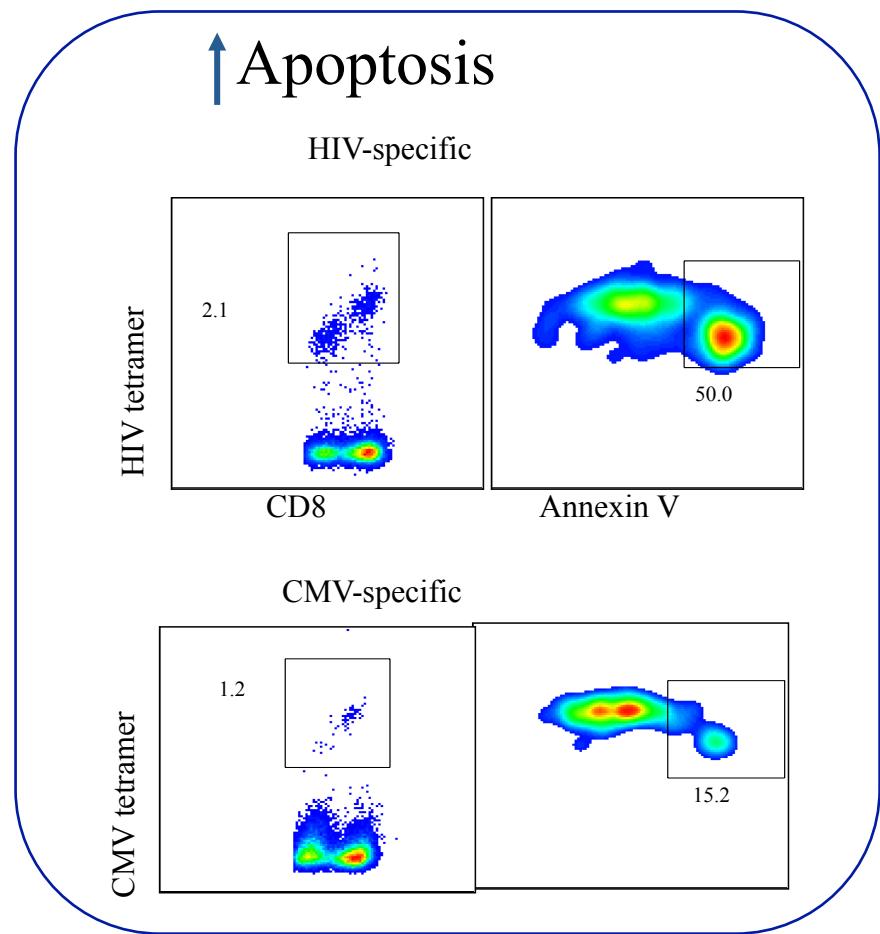
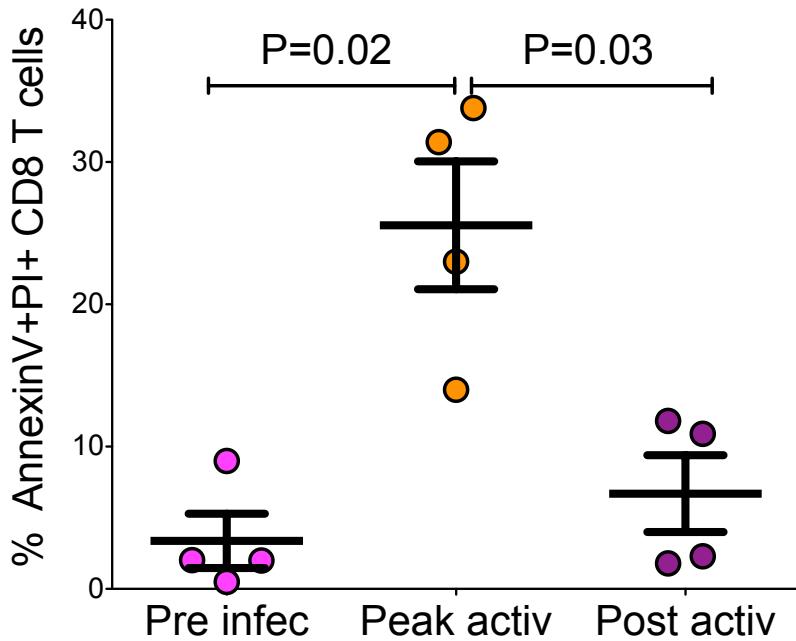
Assessment of bystander activation during hyperacute HIV infection



HIV-specific CD8 T cells fail to upregulate survival molecules during acute HIV infection

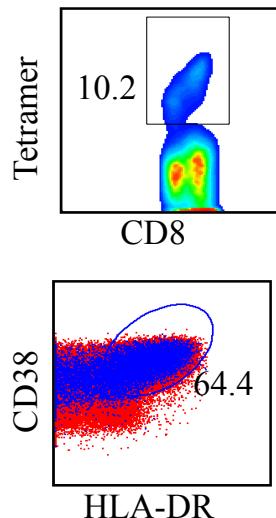


Marked apoptosis of HIV-specific CD8 T cells during hyperacute HIV infection

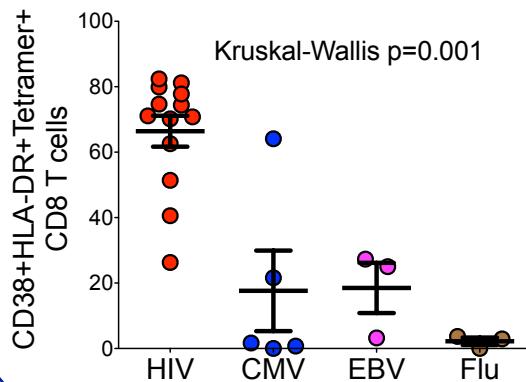


CD8 responses in hyperacute HIV Infection

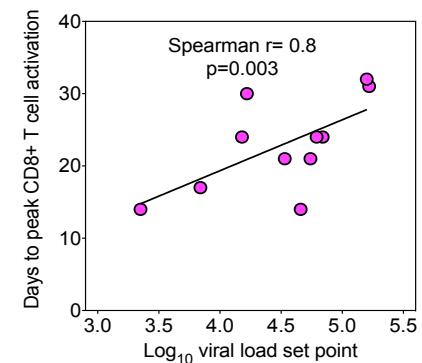
Activation



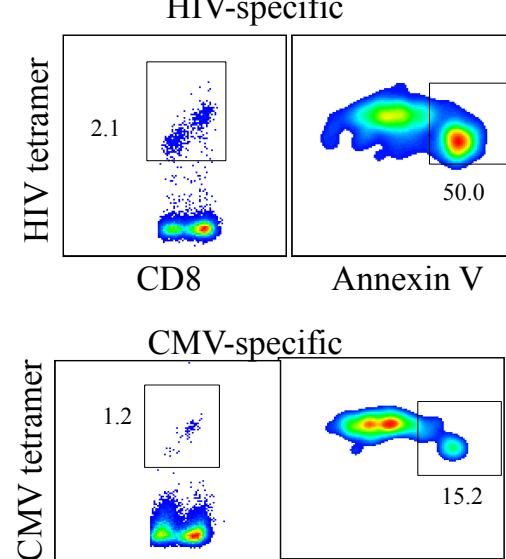
Bystander Activation



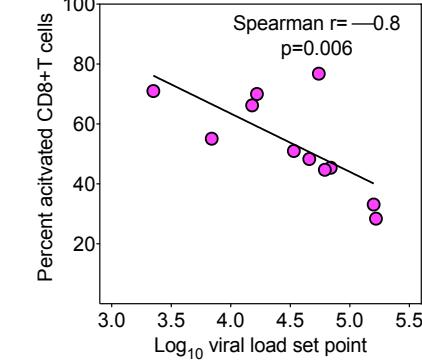
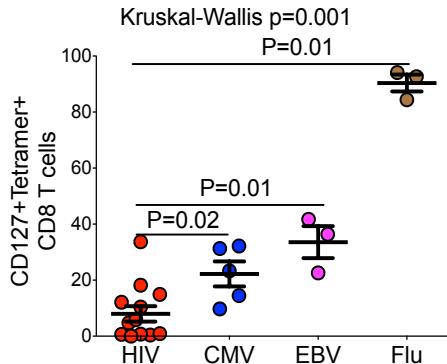
Impact on viral replication



↑ Apoptosis

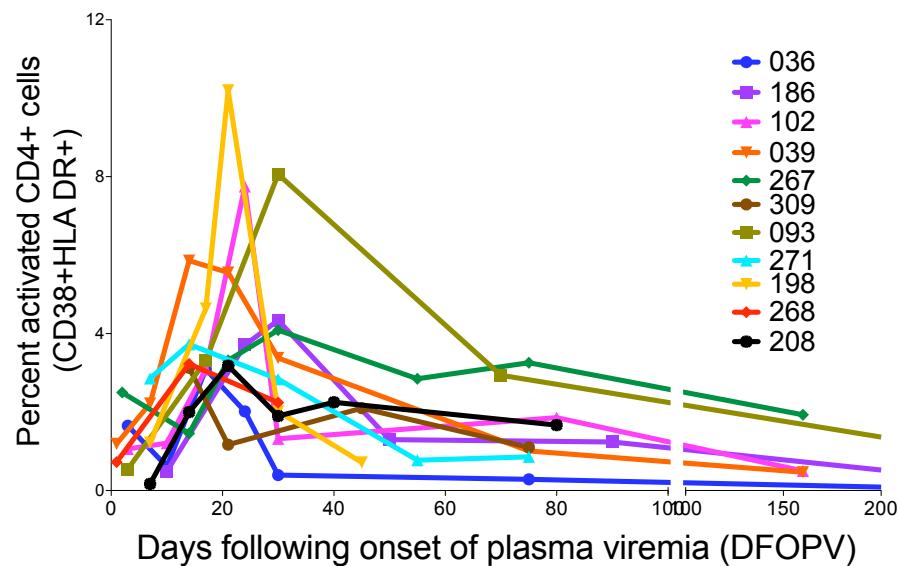
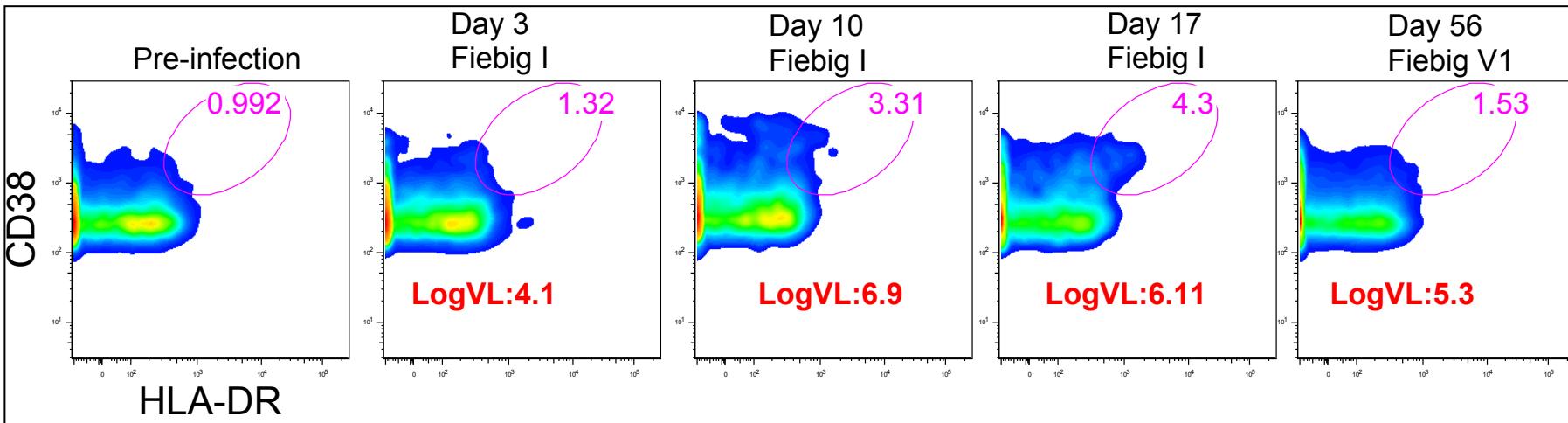


Poor survival

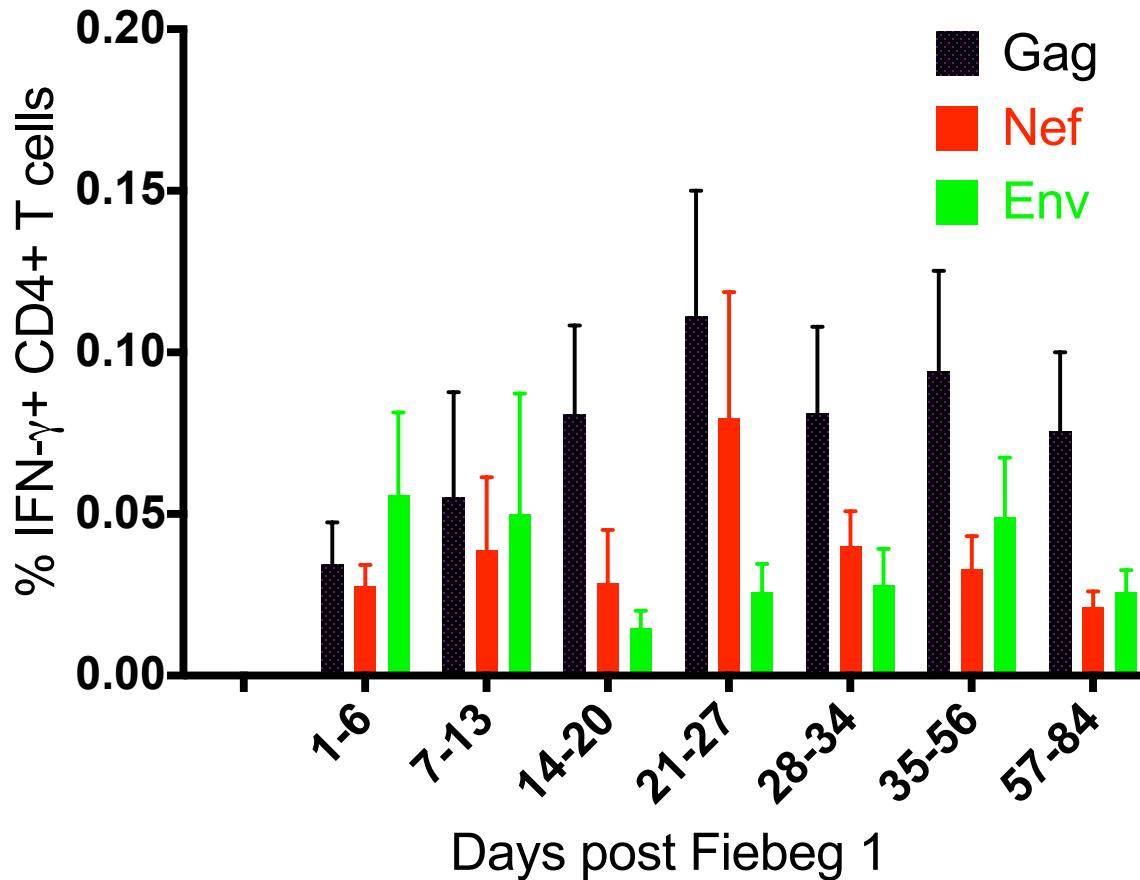


CD4 T cell responses in hyperacute HIV infection

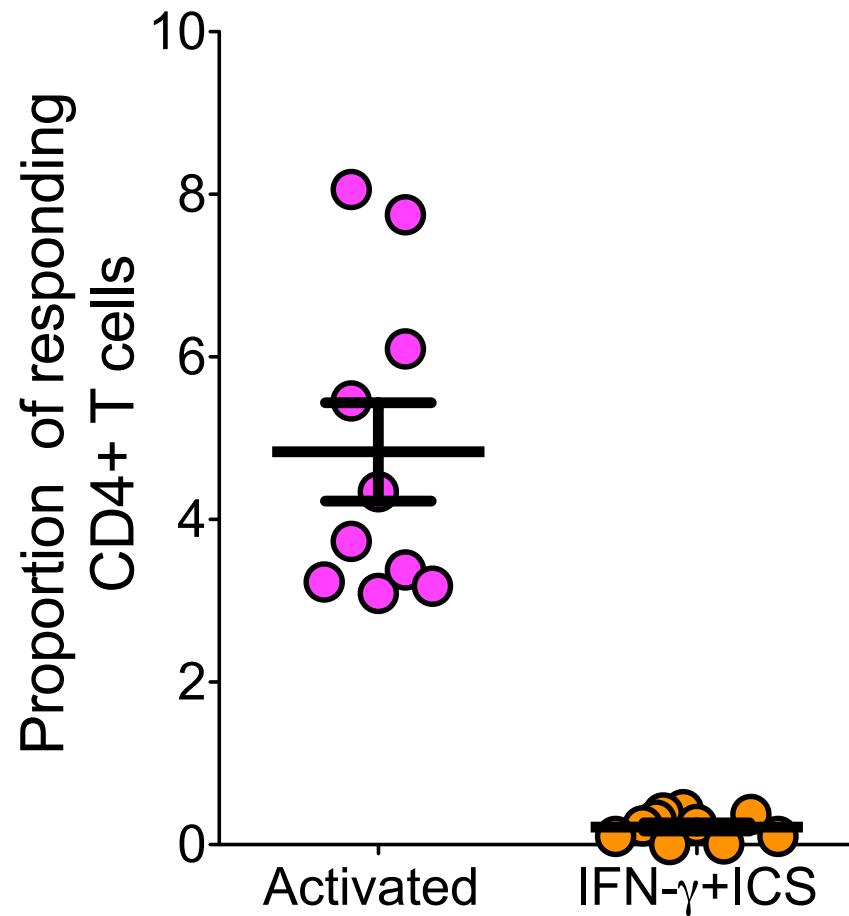
CD4+ T cell activation during acute HIV infection



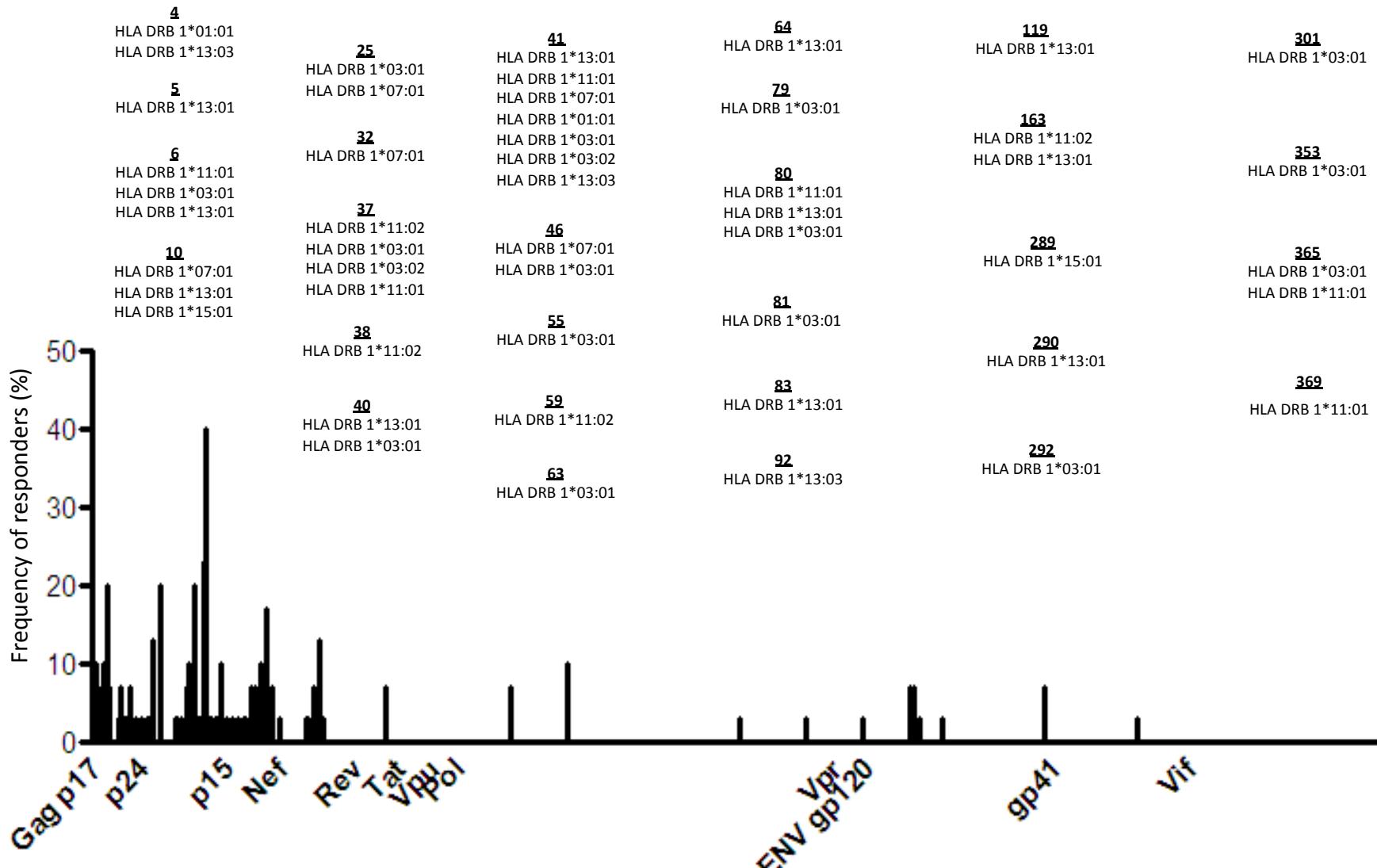
Dynamics of HIV-specific CD4+ T cell responses during acute HIV infection



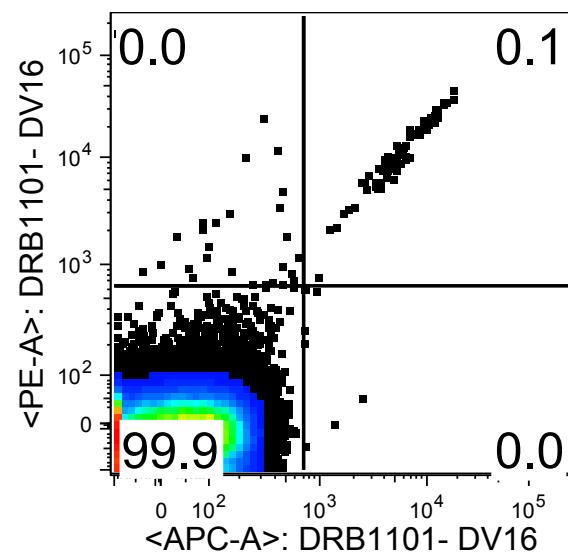
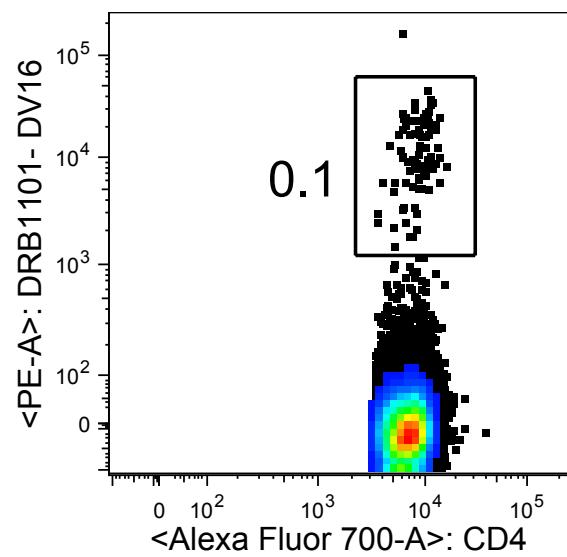
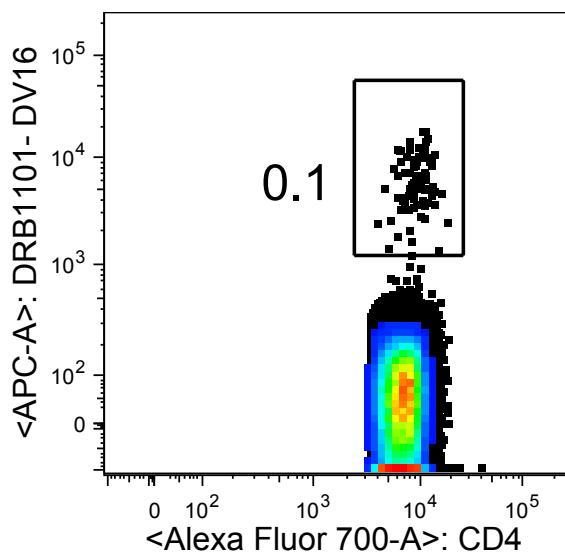
Comparison between activated CD4+ T cells and gamma secreting cells



Number of HLA-DRB1 variants that can present each peptide

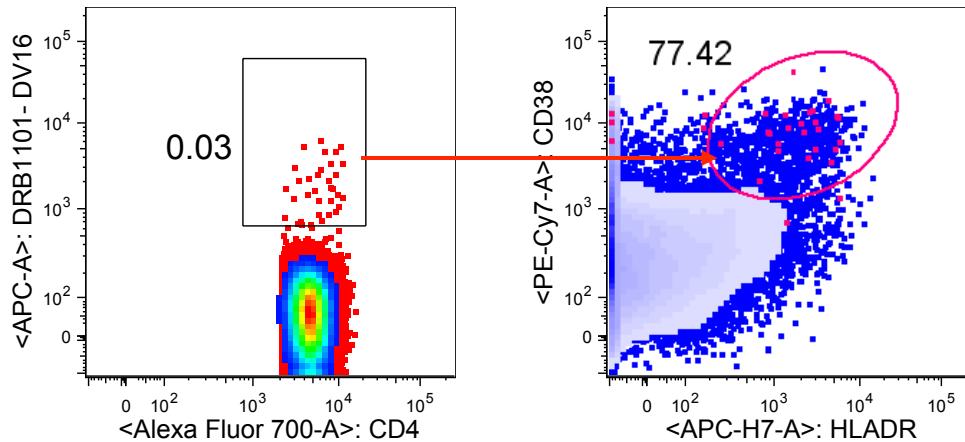


Class II tetramer staining

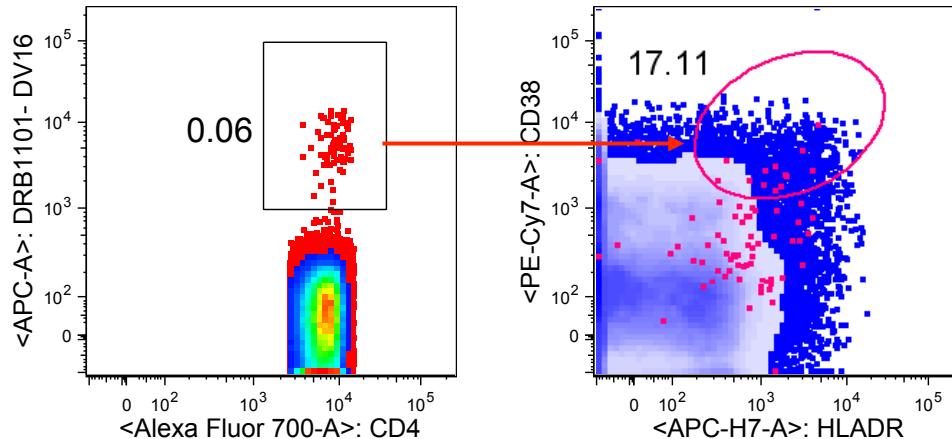


Activation profile of HIV-specific CD4 T cells

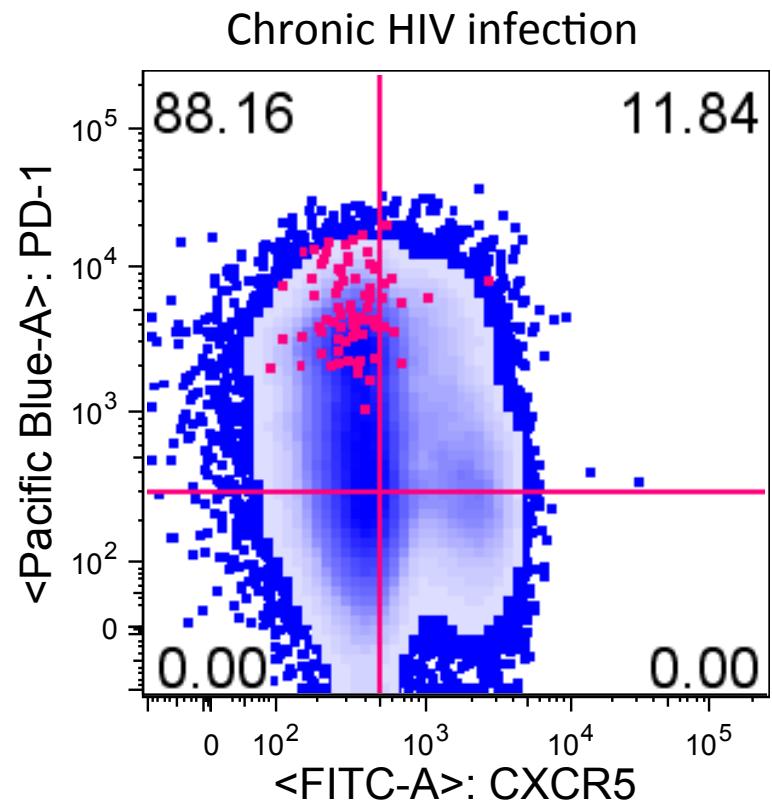
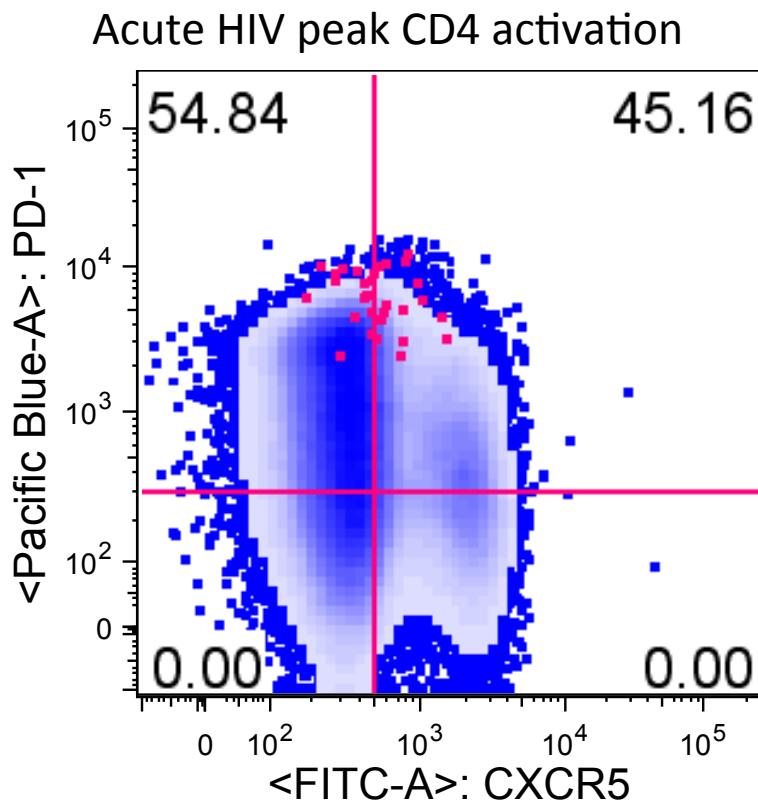
Acute HIV



Chronic HIV



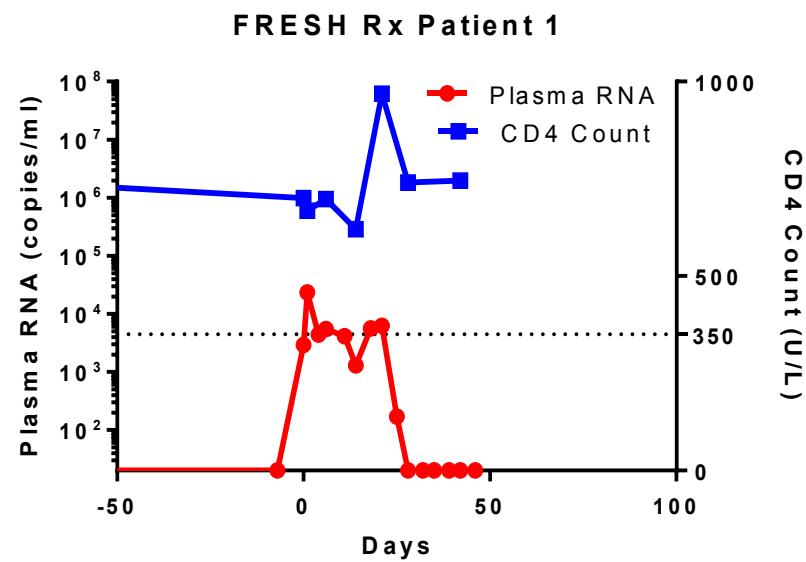
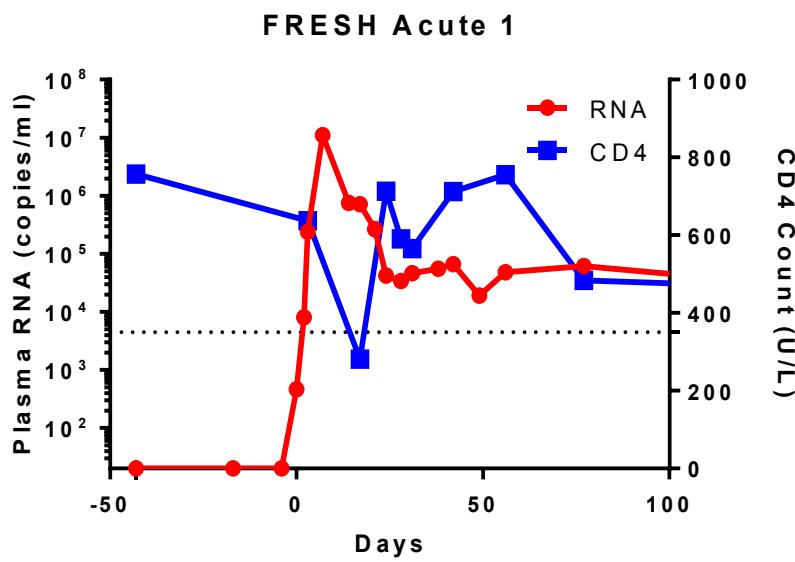
Phenotypic profile of HIV-specific CD4⁺ T cells in acute and chronic HIV infection



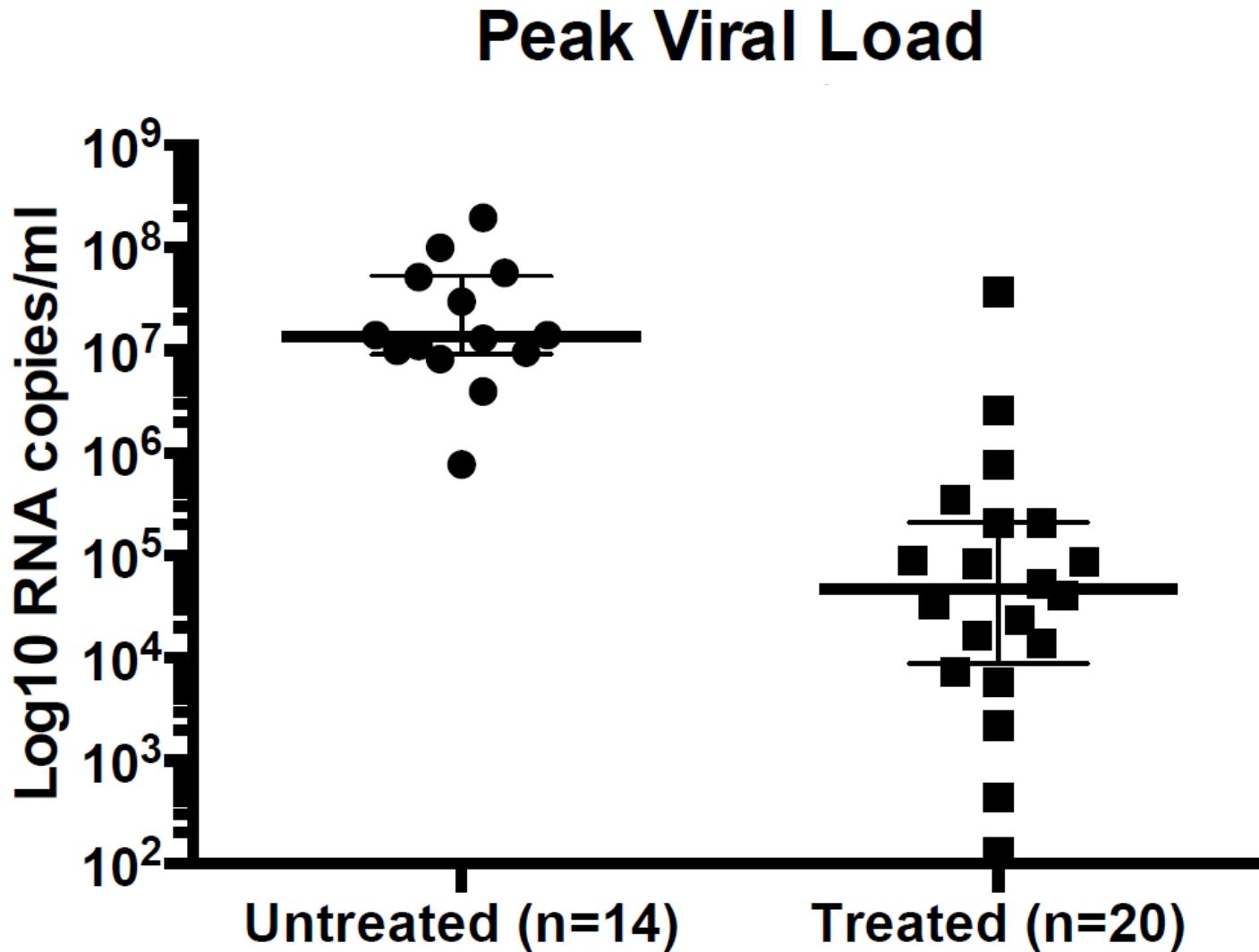
Conclusions

- CD8+ T cell immune responses during acute HIV-1 infection is broader than previously thought (Ndhlovu et al, 2015, *Immunity*)
 - Acute HIV infection rapidly induces massive activation and proliferation of CD8+ and CD4+T cells
 - The magnitude and timing of CD8+ T cell activation impact viral load set point
 - A high proportion of activated CD8+ cells are HIV-specific
- HIV-specific CD8+ and CD4+ T cells are defective for cytokine secretion, memory generation and prone to apoptosis during acute HIV infection following ex-vivo stimulation
- There is measurable expansion of HIV-specific peripheral TfH during hyperacute HIV infection

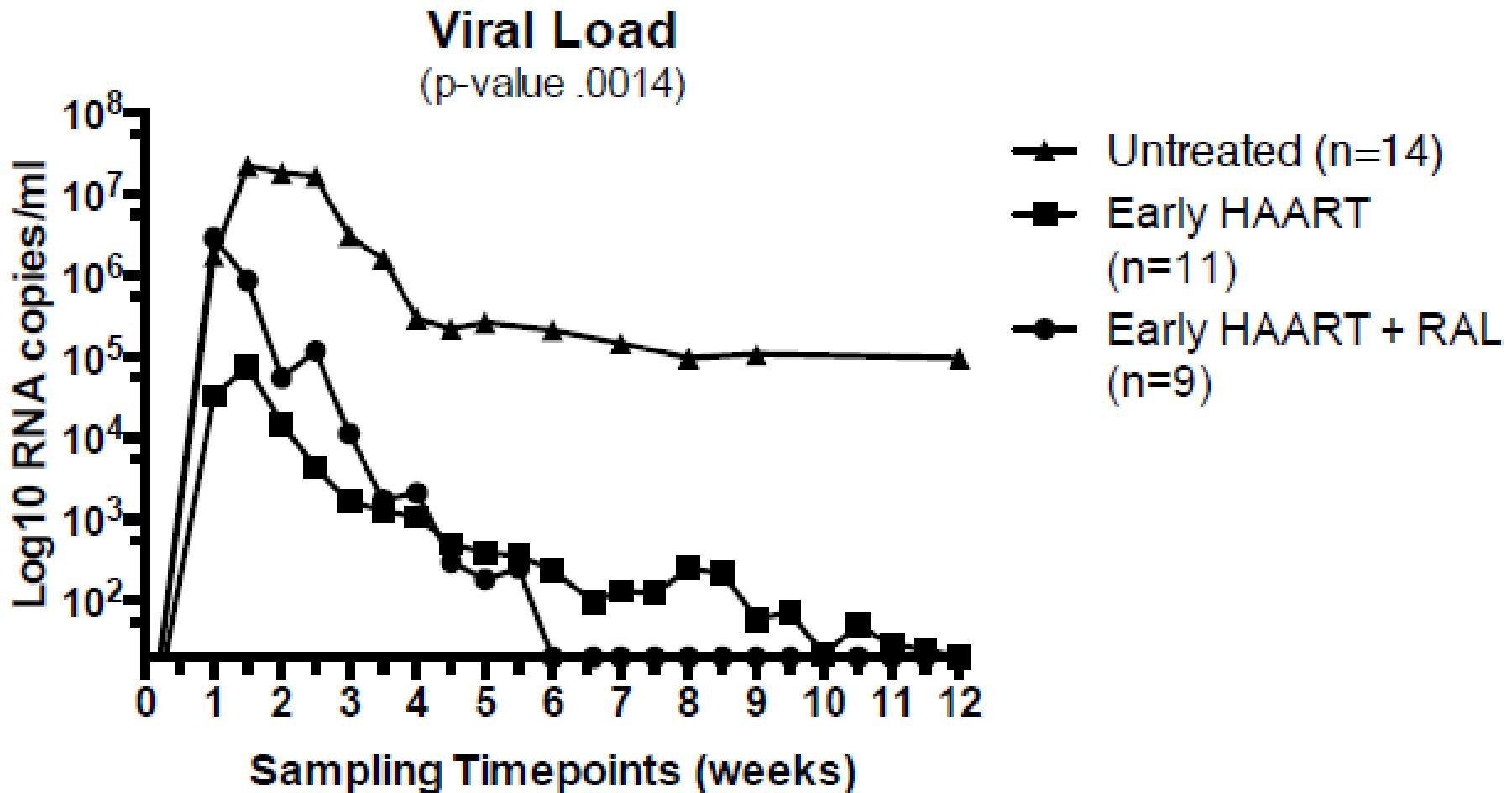
The impact of early treatment on generation and maintenance of HIV- specific T cell responses?



Treatment during hyperacute phase blunts peak viremia



Raltegravir intensification reduces time to full suppression

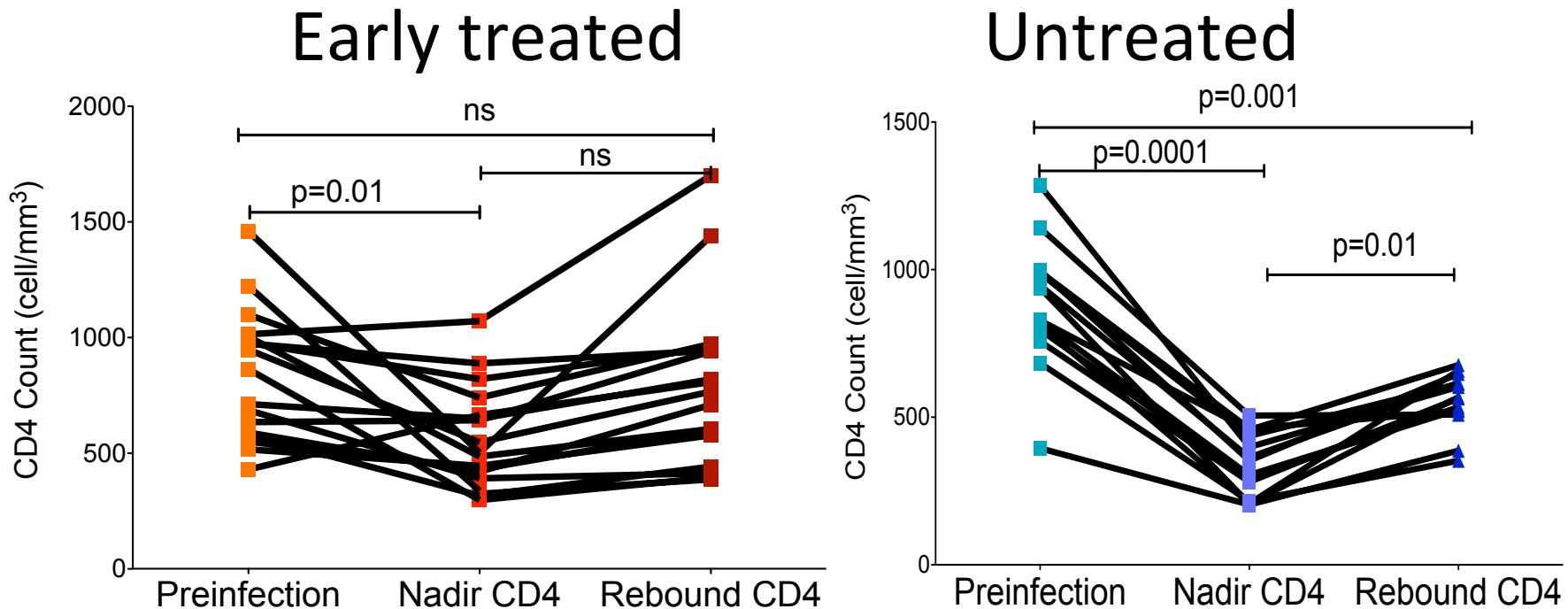


Impact of early ART on T cell responses

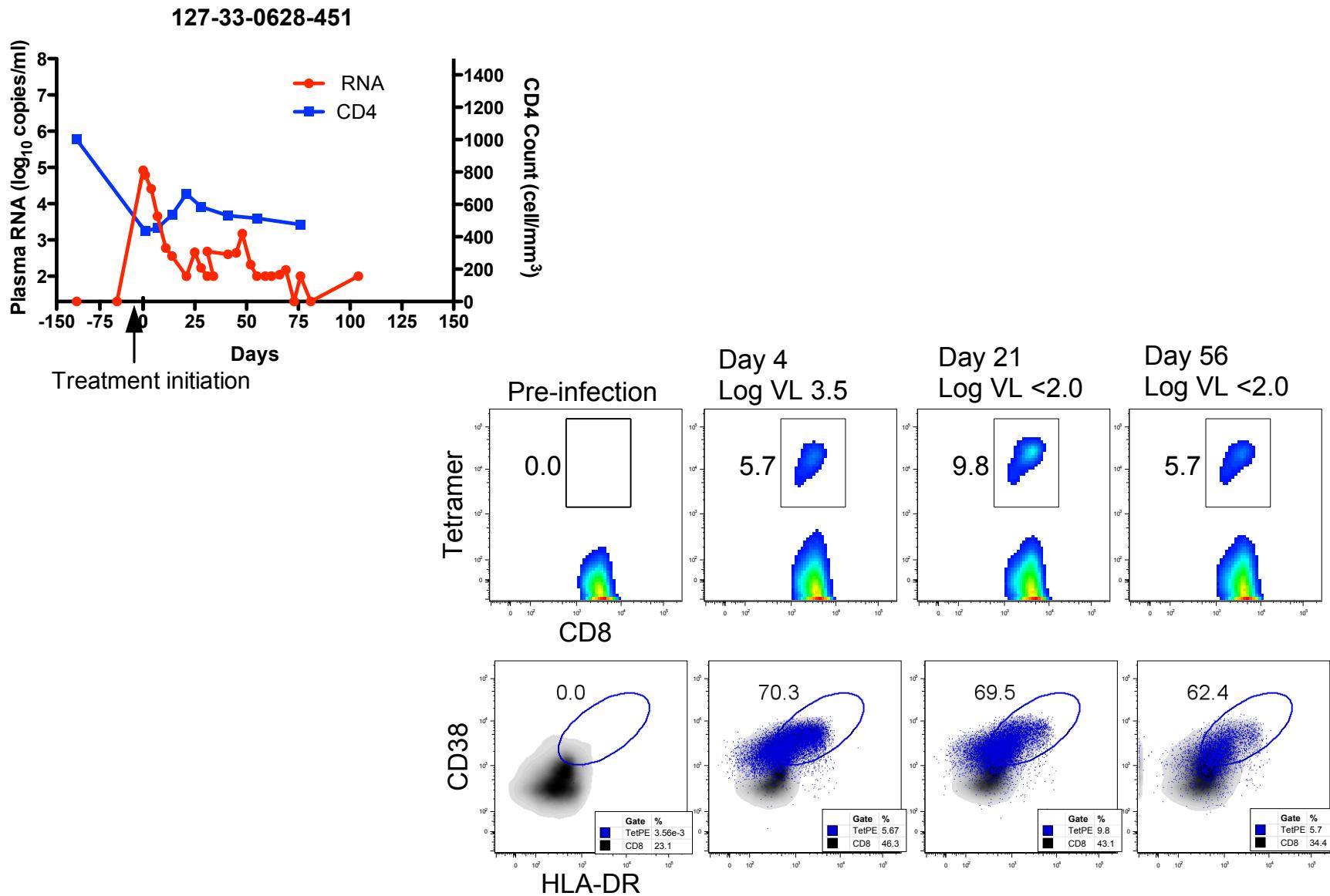
Investigate if very early ART treatment suppresses the subsequent development of HIV specific CD8 cell responses by removing the antigenic stimulus, OR.

If early ART treatment might help preserve HIV specific CD4 to CD8 and B cell responses.

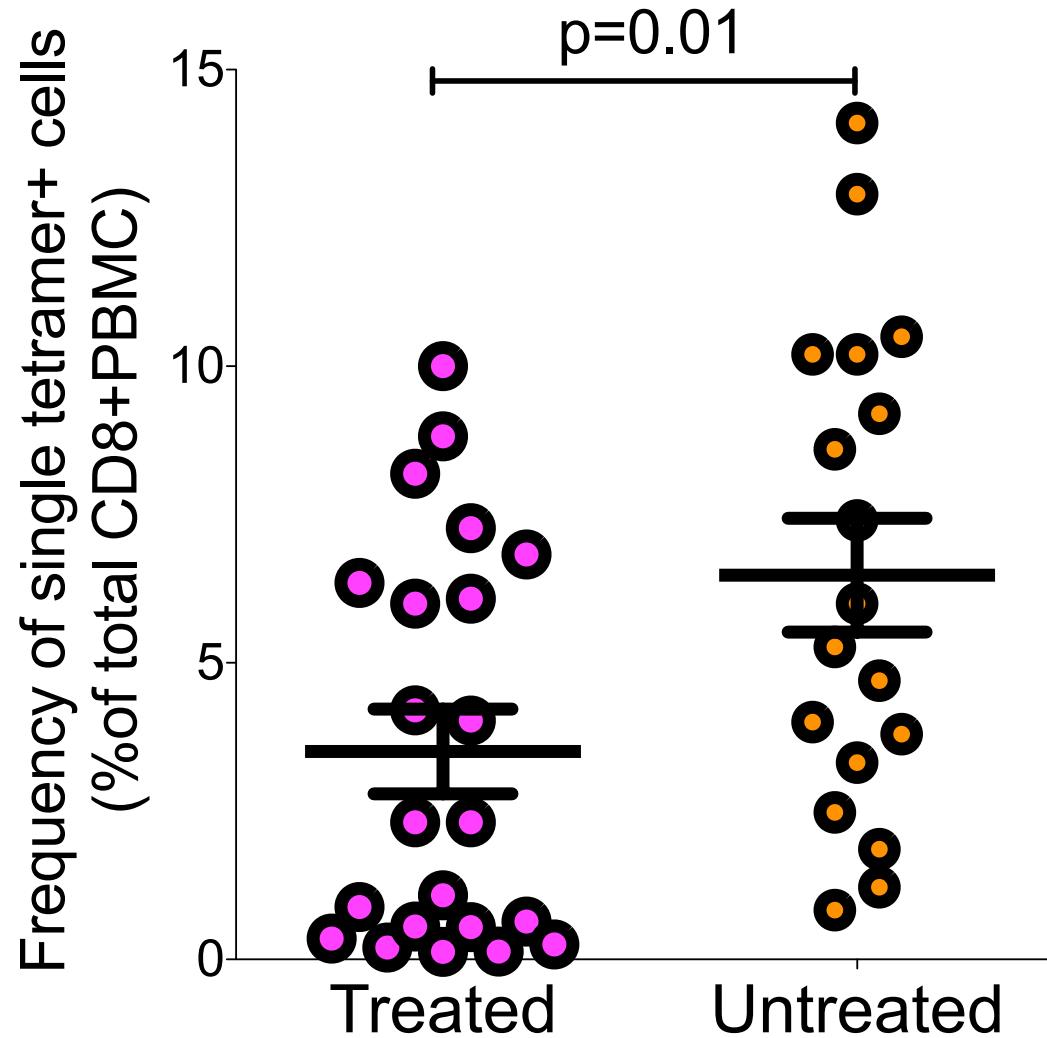
Very early ART limit CD4 T cell loss



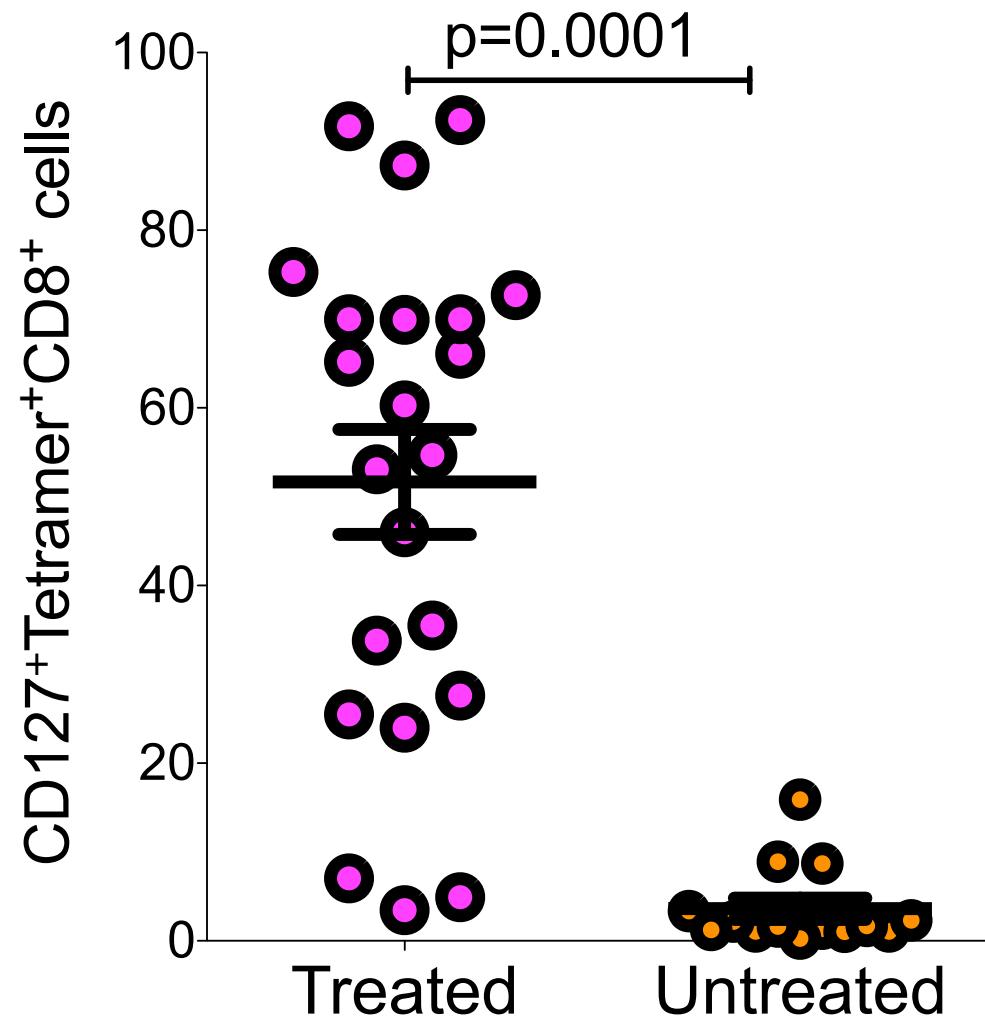
CD8⁺ T cell responses in early treated subject



Frequency of individual tetramers⁺ CD8⁺ cells in early treated and untreated subjects

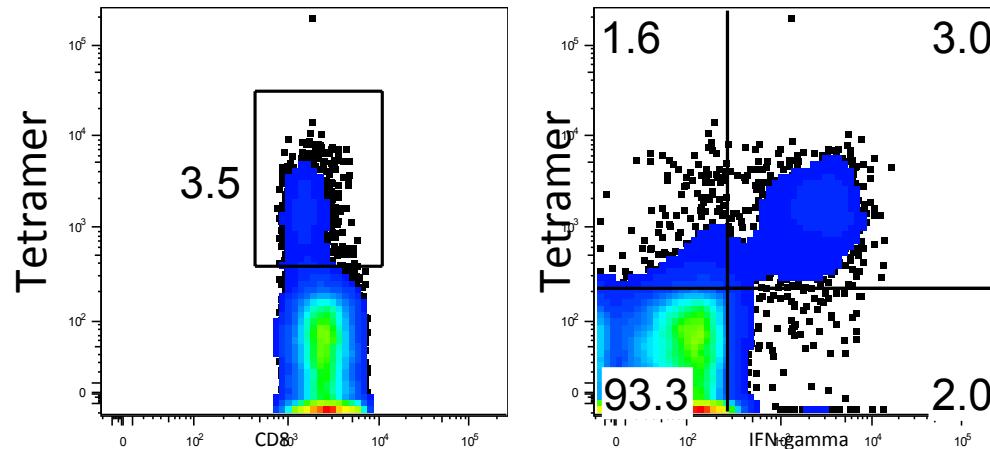


Increased CD127 expression on CD8⁺ T cells during early treated hyperacute HIV infection

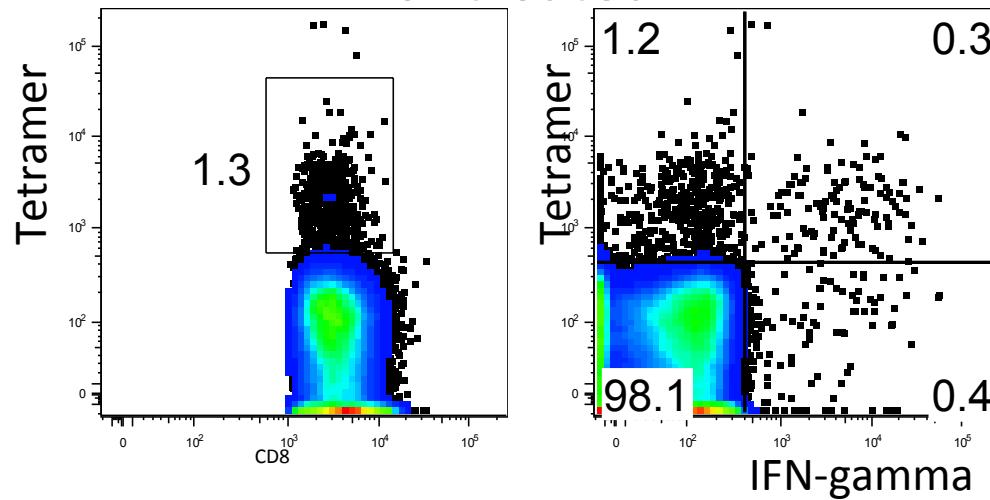


-specific CD8⁺ T cells in early treated subjects have a more functionally competent

Treated



Untreated



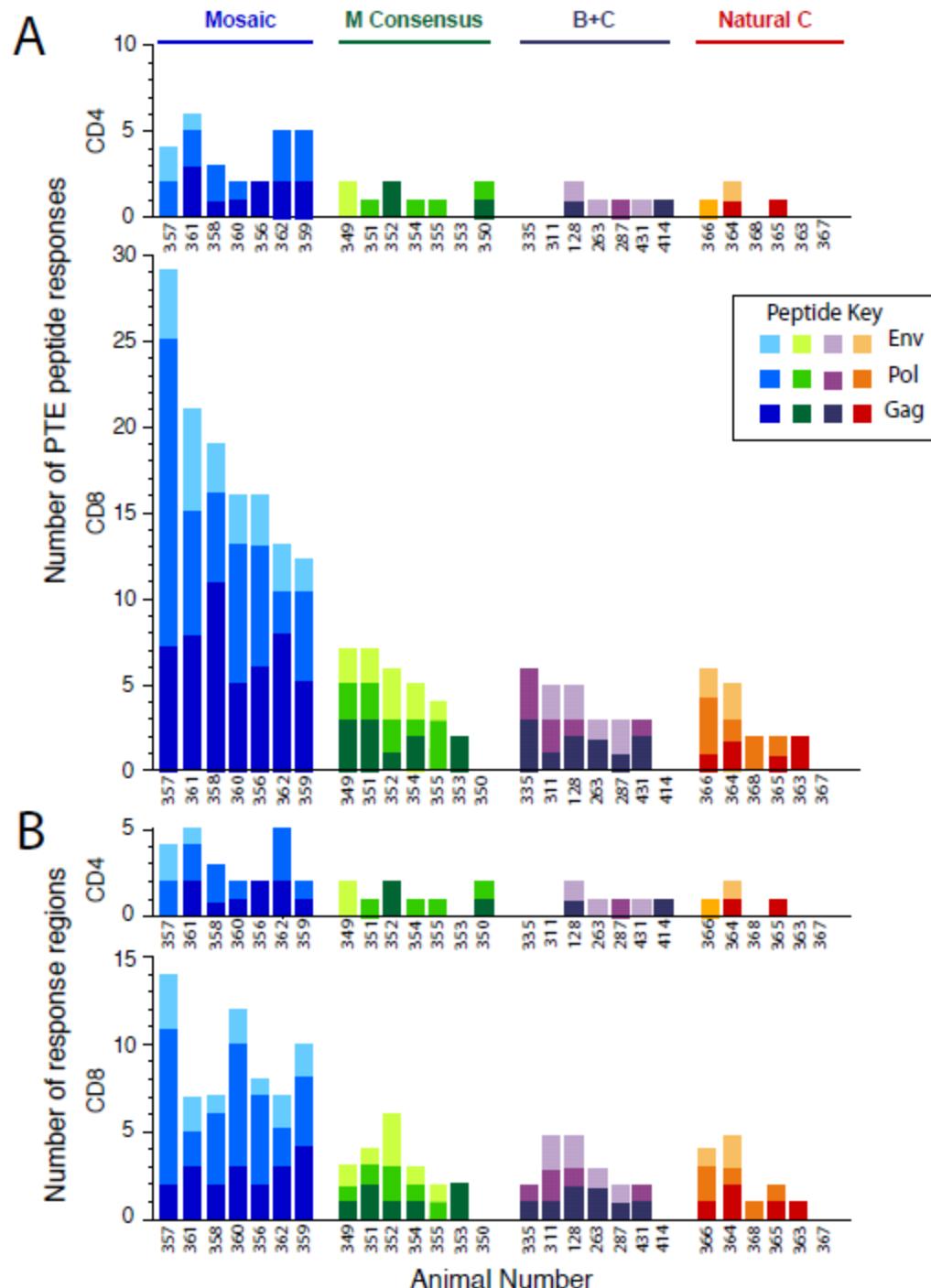
Conclusions

- Very early treated individuals have measurable T cell responses that have a pro-survival phenotype
- Prompt antigen withdrawal results in stable HIV-specific CD8 T cell clonal repertoire.

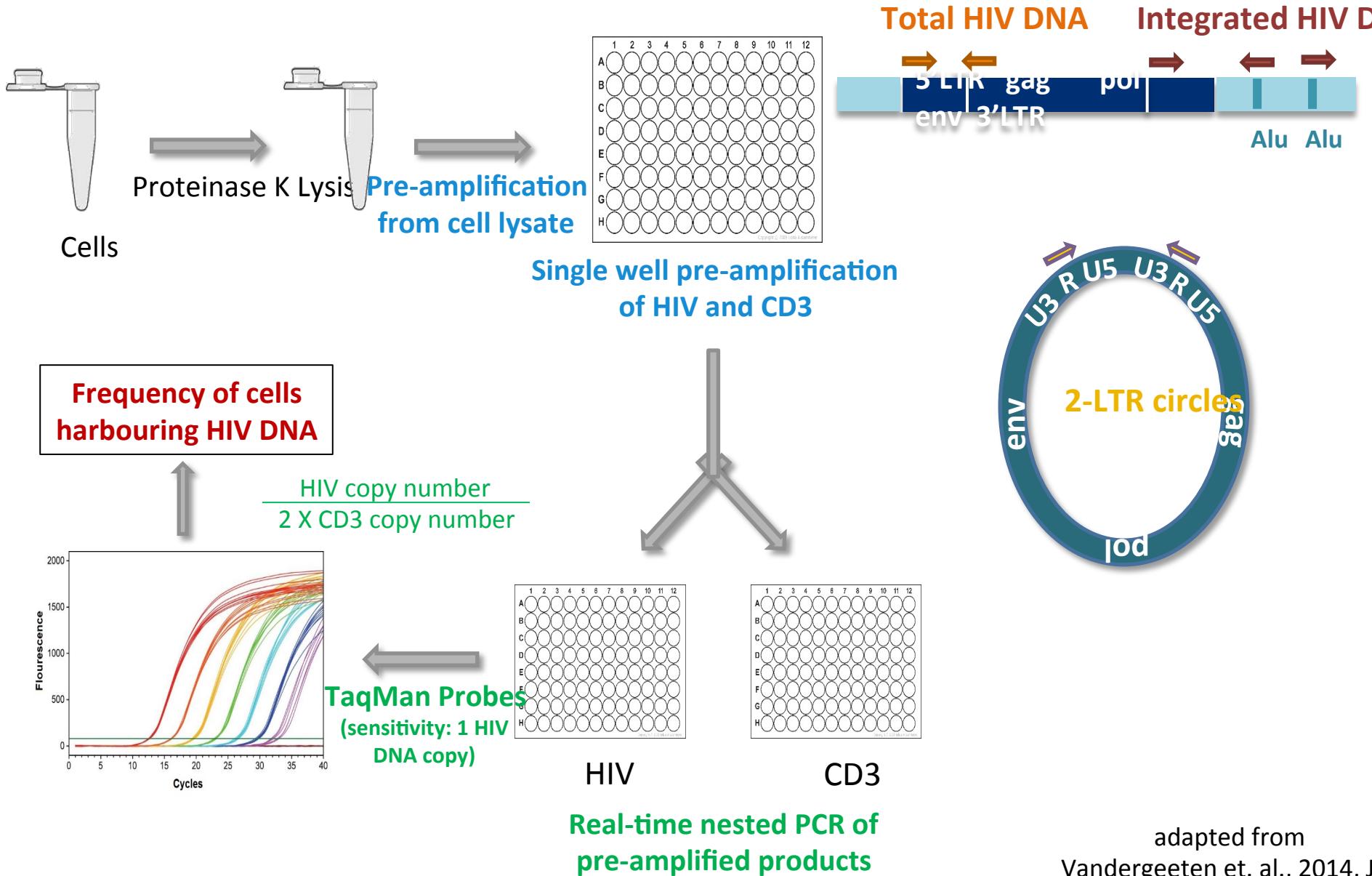
Future directions

Vaccinate FRESH subjects with Ad26 mosaic vaccine

The Ad26 mosaic vaccine yielded many more epitope-specific responses than did the Ad26 M consensus, clade B + clade C, or optimal natural clade C vaccines



Assays to measure HIV Persistence



Conclusions I

- The FRESH study design allows us to address critical questions in HIV prevention research-
 - such as the impact of cervicovaginal microbiota on female genital inflammation (Anahtar et al, 2015, *Immunity*) and impact of IPC on HIV acquisition risk (Byrne, Anahtar et al, *Lancet ID*, in press)
- FRESH study participants initiated on cART during hyperacute HIV infection may offer new insights on long-term viral remission
- Understanding of immune responses following cART initiation may be useful for future intervention studies

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 - Nasreen Ismael
 - FRESH Participants

