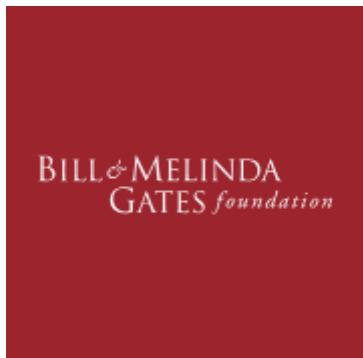


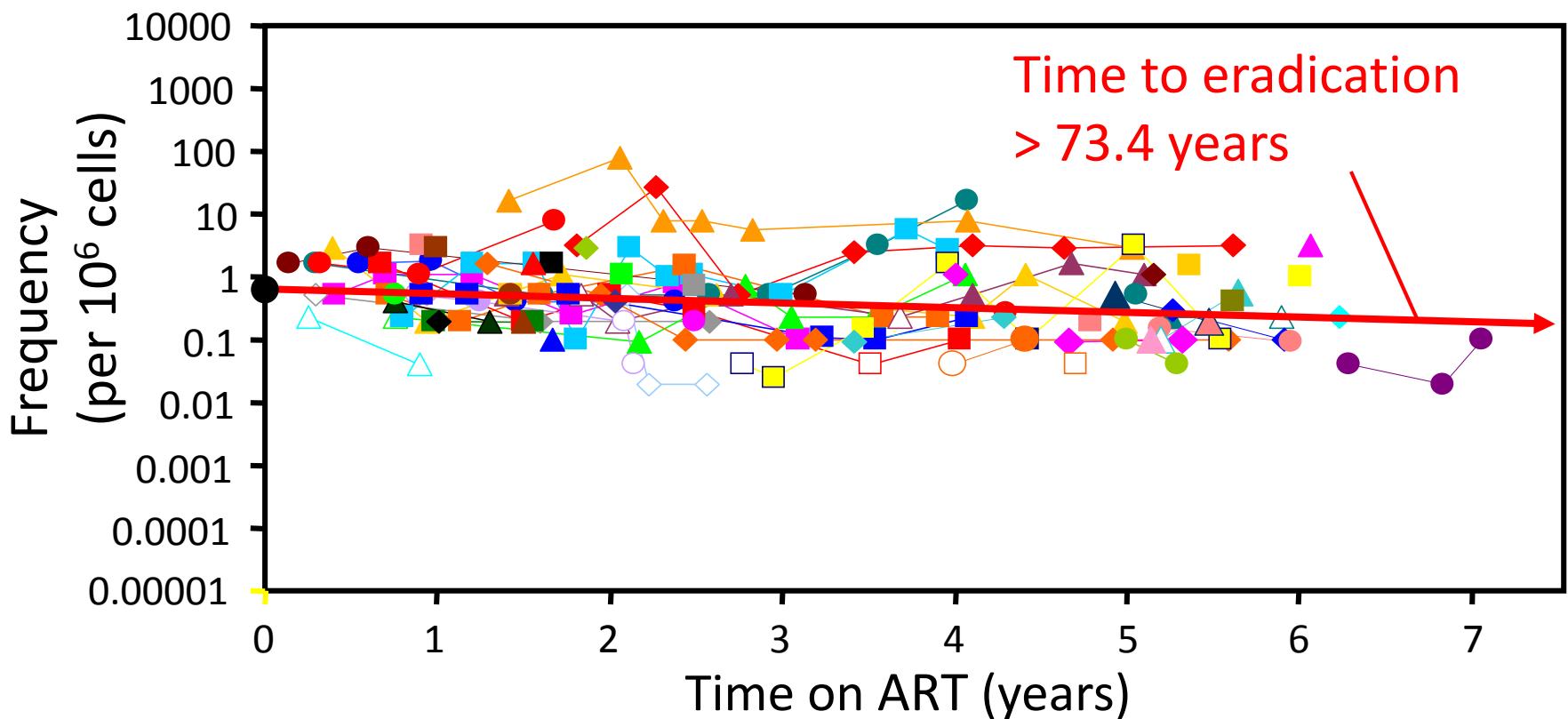
# Biomarkers of HIV persistence as predictors of HIV rebound off ART

**Robert F. Siliciano MDPhD**  
**Johns Hopkins University**  
**School of Medicine**  
**Howard Hughes Medical Institute**

Disclosures: None



# The latent reservoir in resting CD4+ T cells is the major barrier to cure



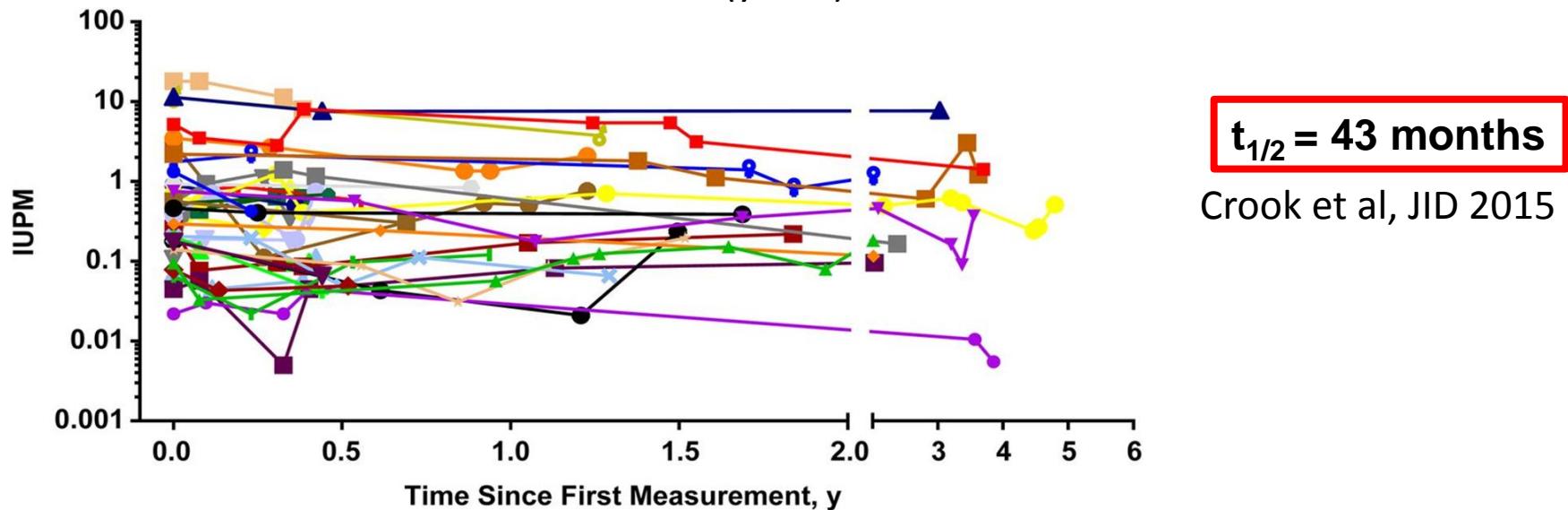
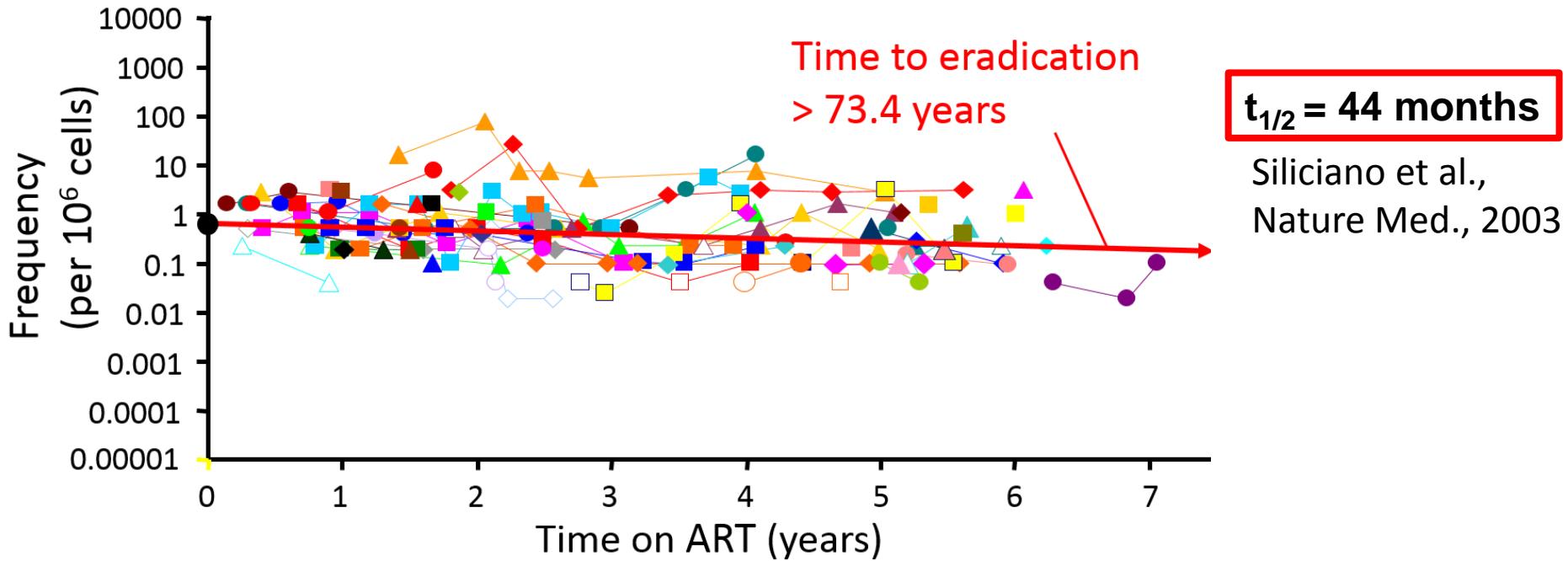
Finzi et al., Nature Med., 1999

Persaud et al., JCI, 2000

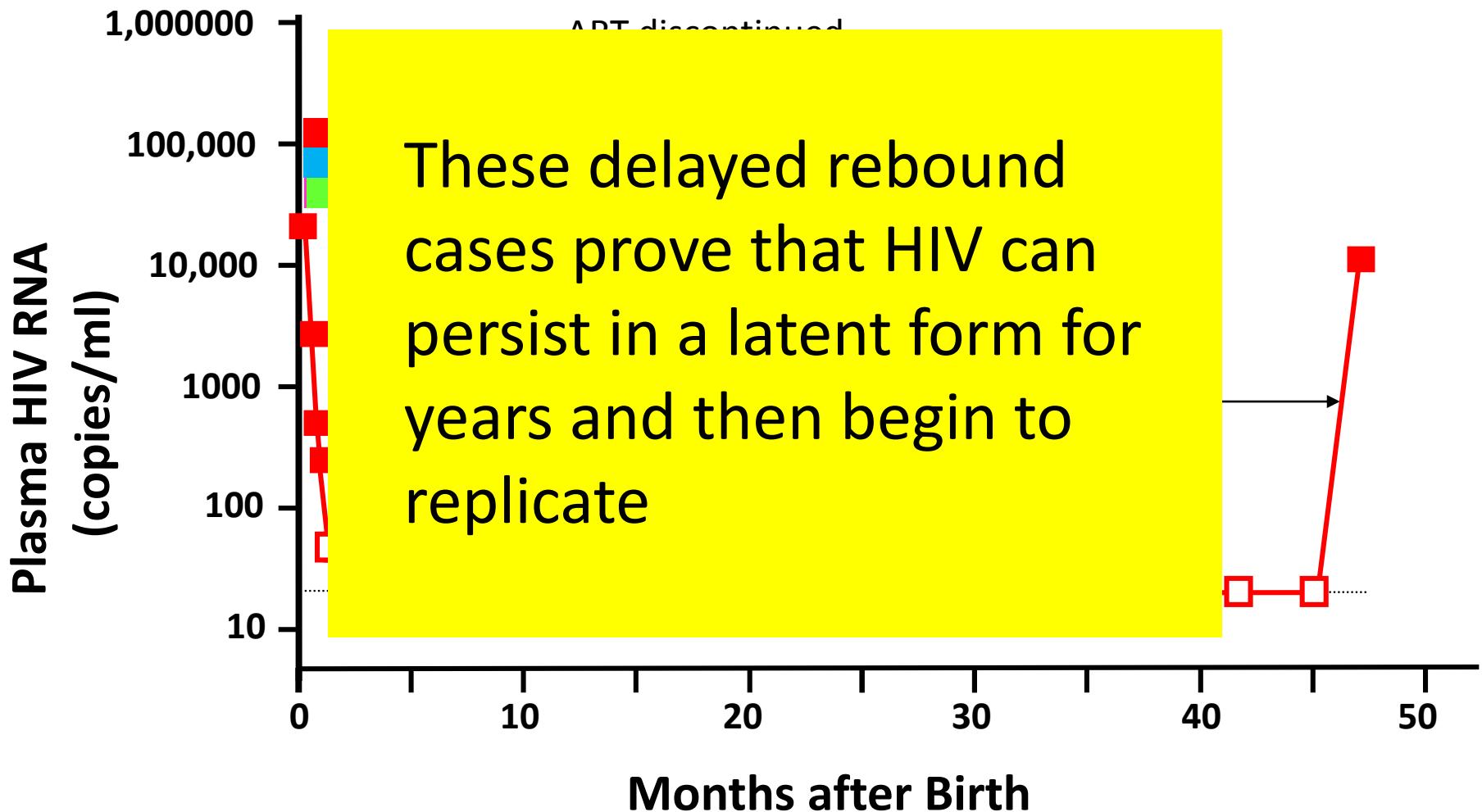
Siliciano et al., Nature Med., 2003

Strain et al., PNAS, 2003

# Slow decay of the reservoir

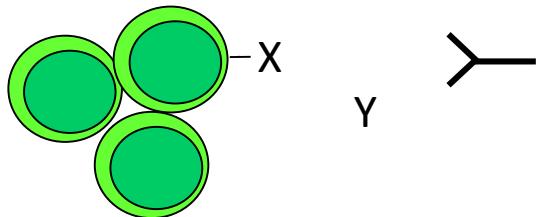


# The Mississippi baby

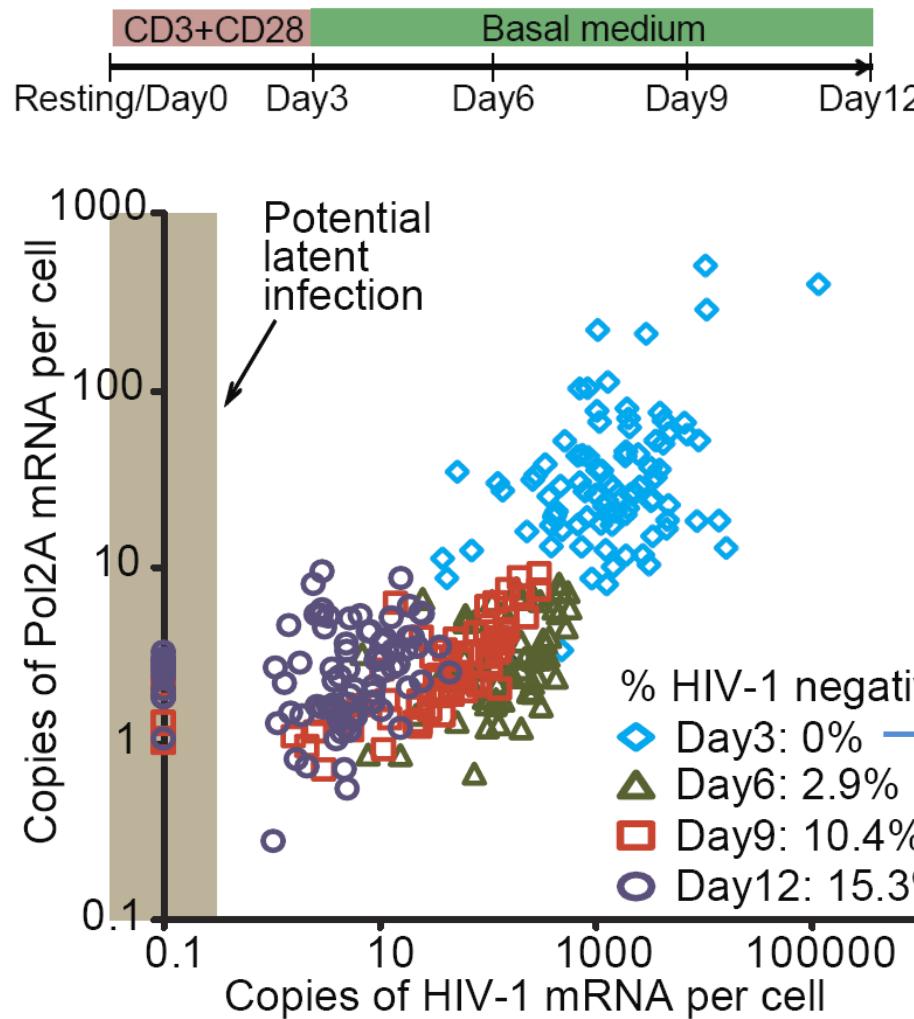


# Biomarkers for HIV persistence

- Non-viral biomarker



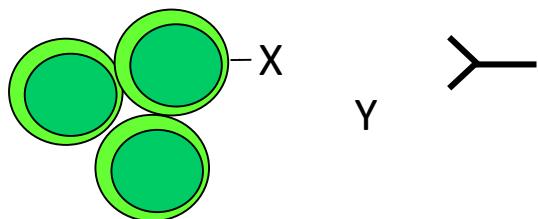
# Suboptimal environment for HIV-1 transcription facilitates latency



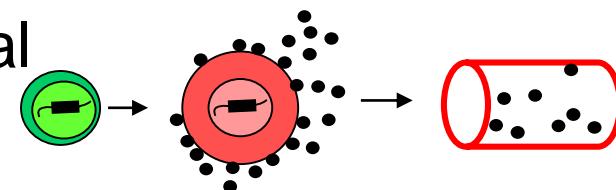
- Latency can be established rapidly with minimal HIV gene expression
- Cells can persist with minimal viral gene expression for years
- Is it plausible that there will be a permanent change in host gene expression?

# Biomarkers for HIV persistence

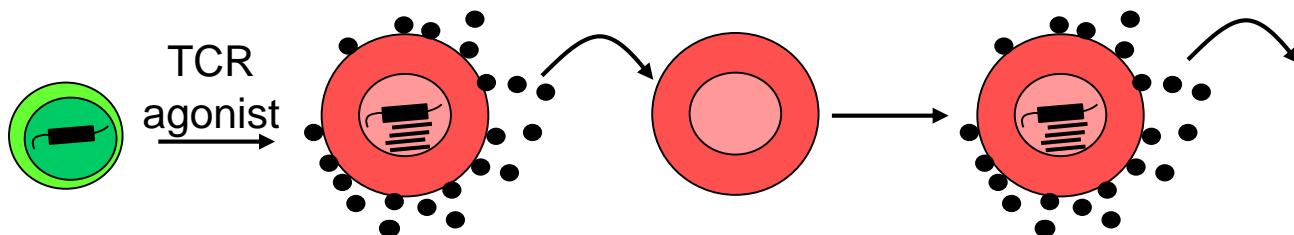
- Non-viral biomarker



- Residual viremia



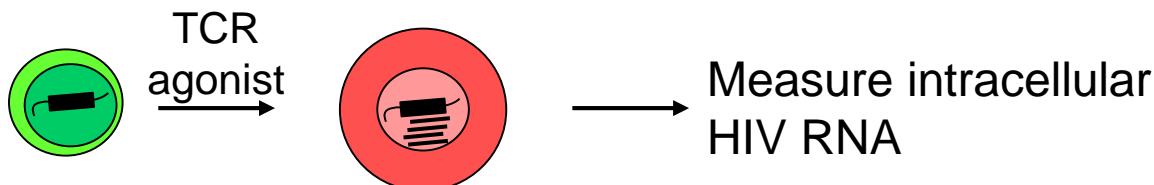
- Viral outgrowth assay (VOA)



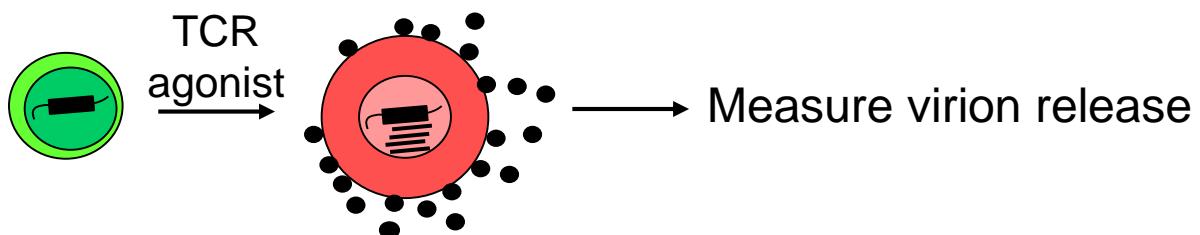
- DNA PCR



- Induction of HIV RNA

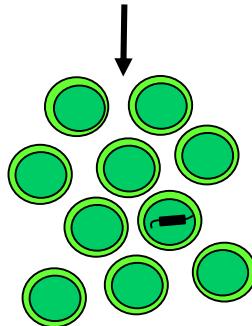


- Induction of virion production



# An assay for latently infected cells

180-200  
ml blood



$5 \times 10^6$

$10^6$

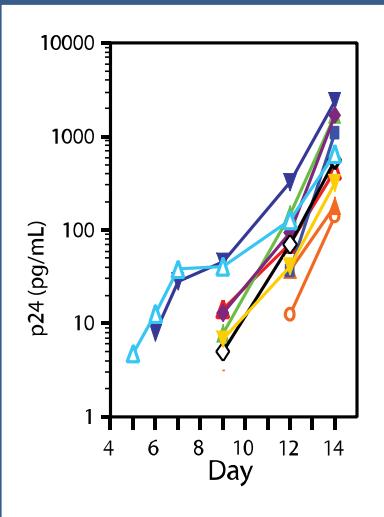
$2 \times 10^5$

$4 \times 10^4$

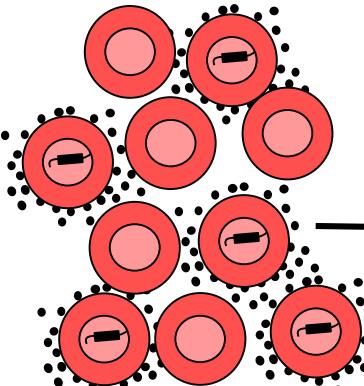
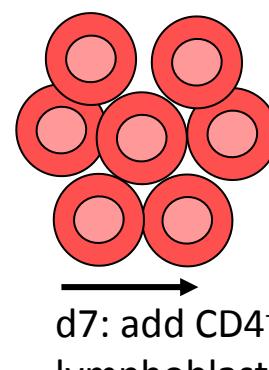
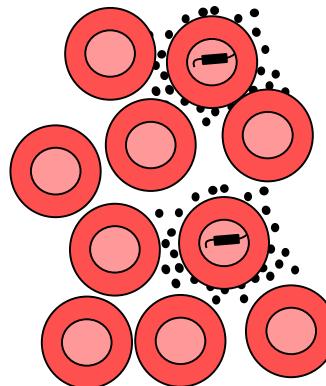
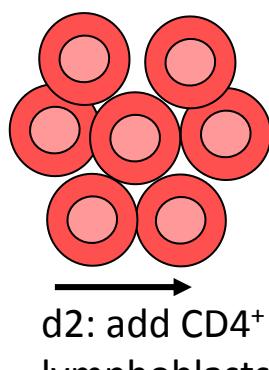
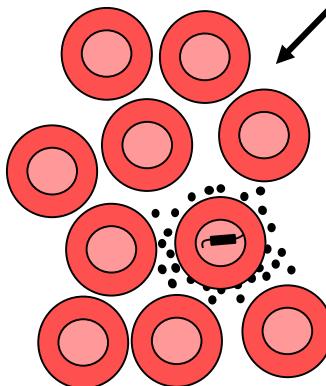
$8 \times 10^3$

Purified resting  
 $CD4^+$  T cells

PHA + irradiated  
allogeneic PBMC



1/1,000,000



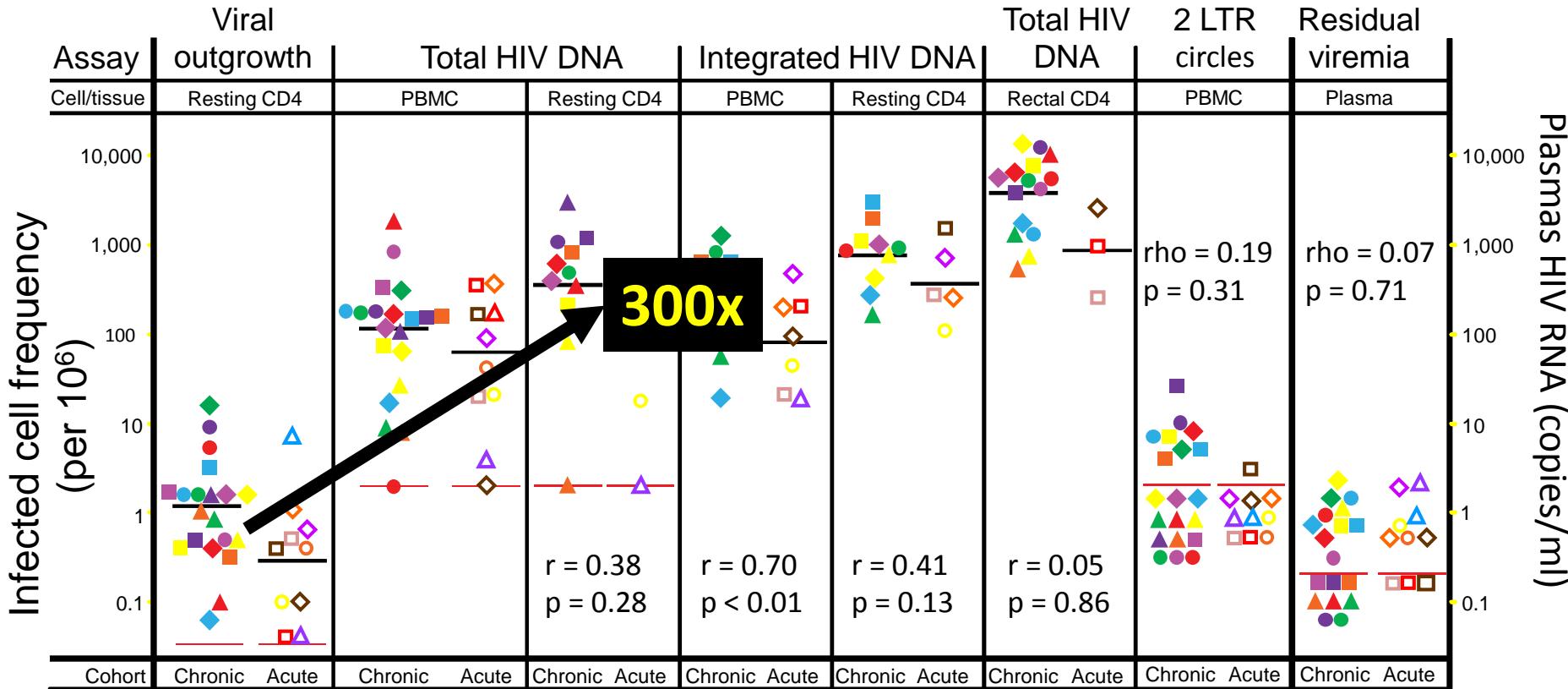
d2: add  $CD4^+$   
lymphoblasts  
from HIV-  
donors

d7: add  $CD4^+$   
lymphoblasts  
from HIV-  
donors

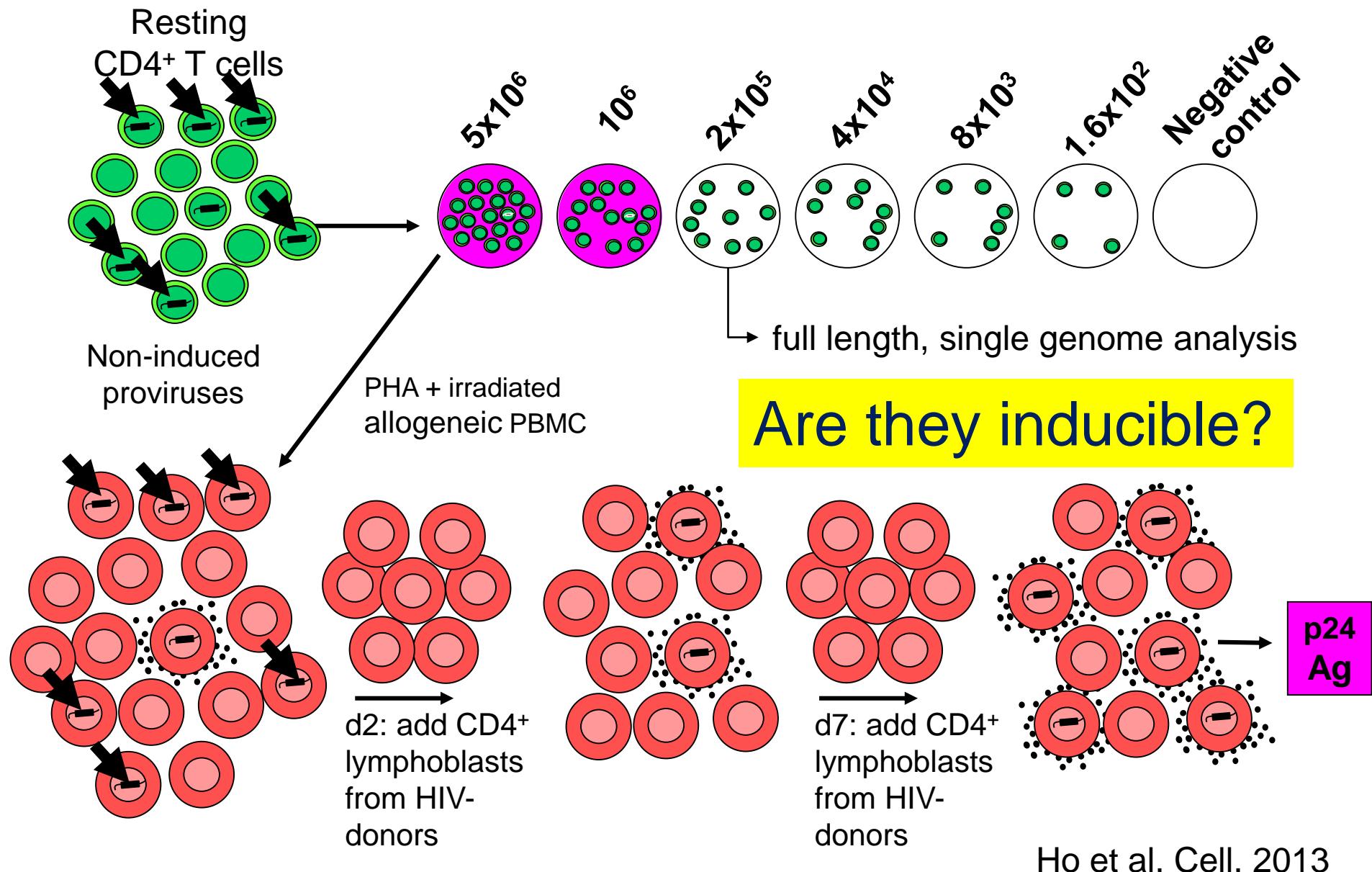
p24  
Ag

Chun et al., Nature, 1997  
Finzi et al., Science, 1997

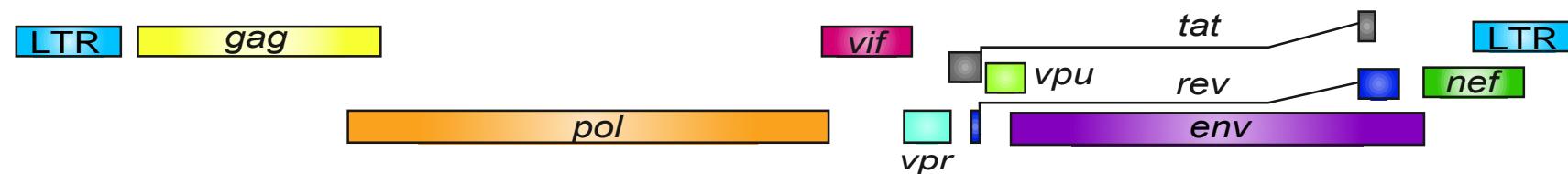
# Viral outgrowth vs PCR assays



# Non-induced proviruses



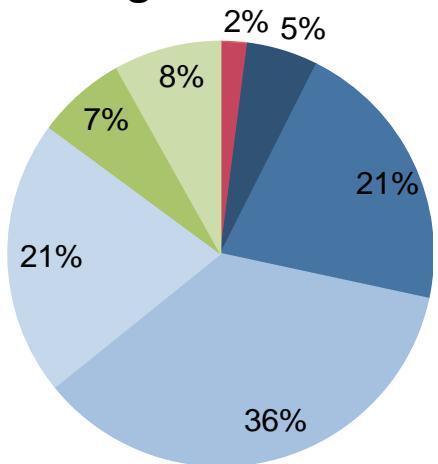
# ART initiated in chronic infection



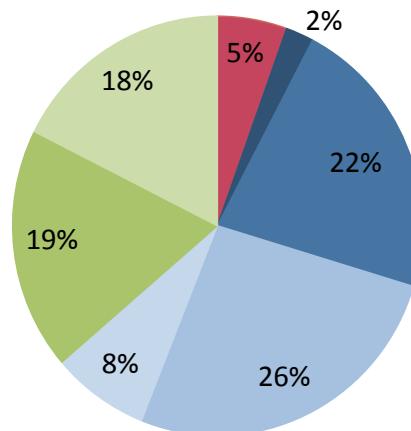
# **ART initiated during acute infection**

# Landscape of HIV proviruses

ART during chronic infection



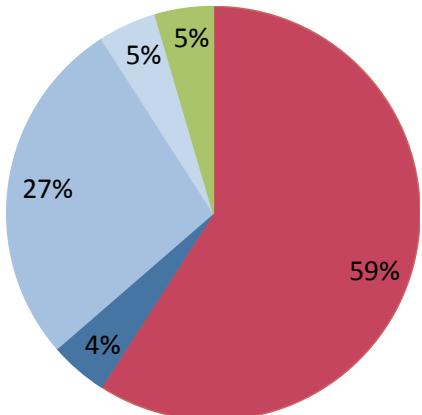
ART during acute infection



## Key:

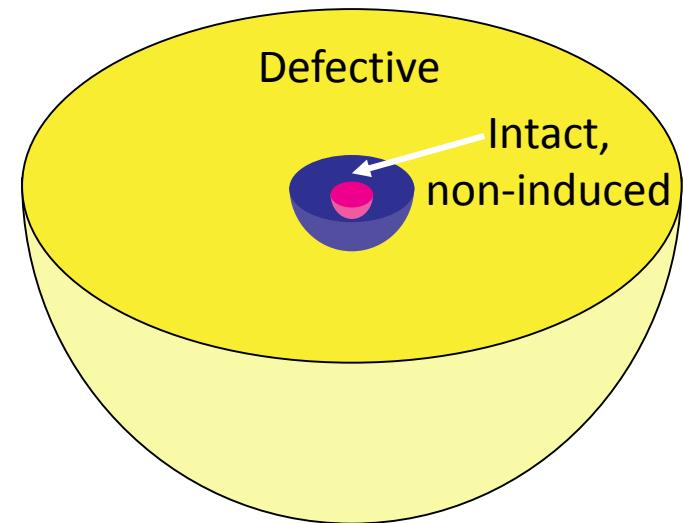
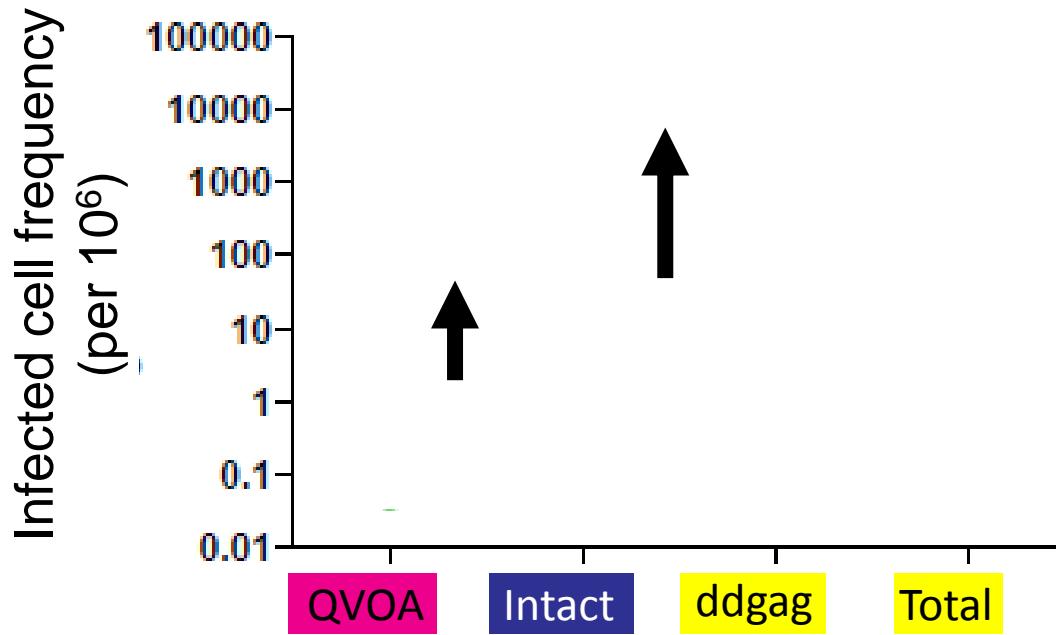
Intact	(Red)
Hypermutated	(Light Green)
Hypermutated and deleted	(Dark Green)
Packaging signal deletion	(Dark Blue)
Very large internal deletion	(Light Blue)
Deletion at 3' end of genome	(Medium Blue)
Deletion at 5' end of genome	(Dark Blue)

Single round of infection



- Arise during (-) strand synthesis
- Not in plasma virus
- Missed by subgenomic PCR

# QVOA, intact, and total proviruses

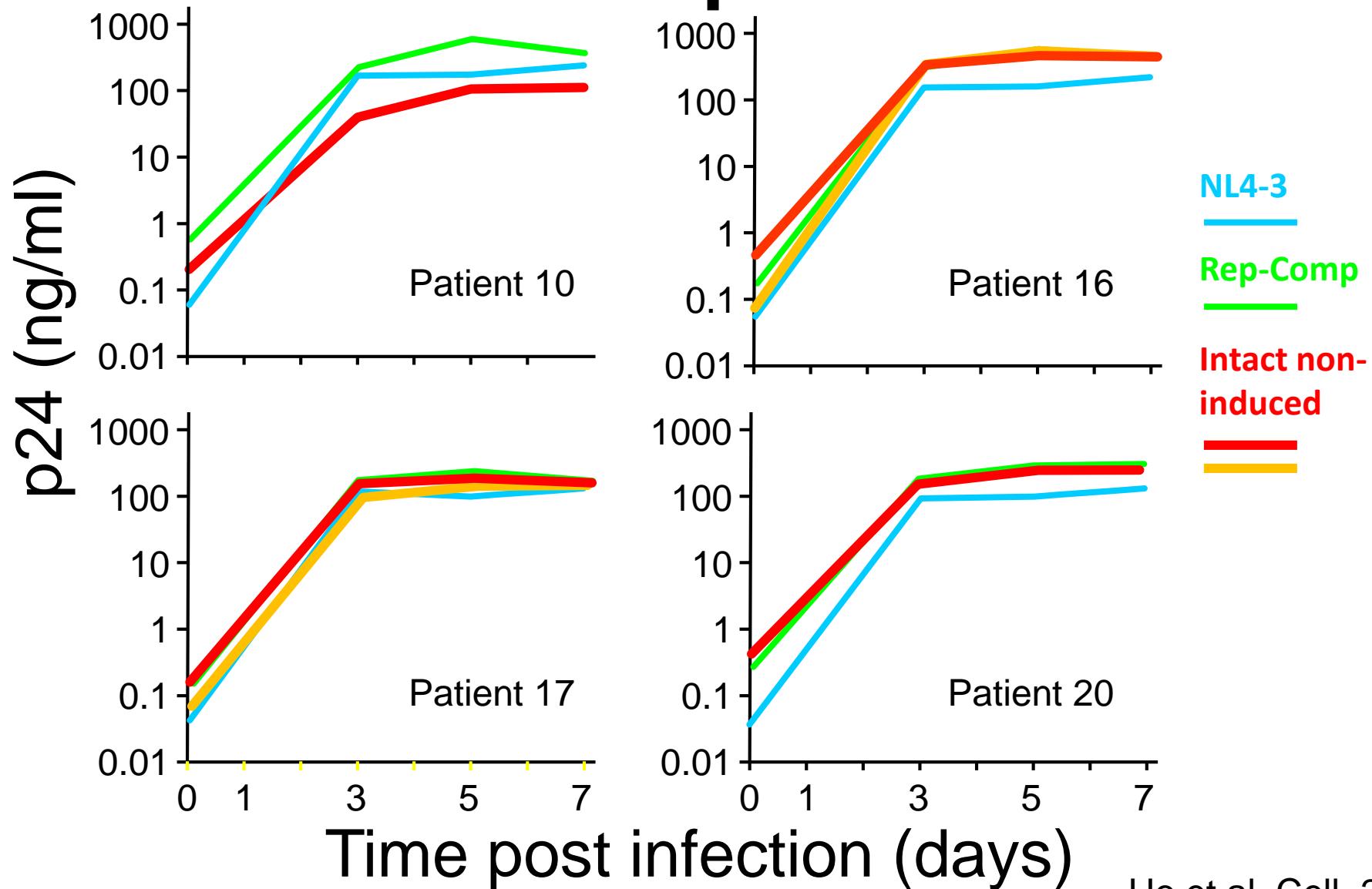


- Are they replication-competent?
- Can they be induced *in vivo*?

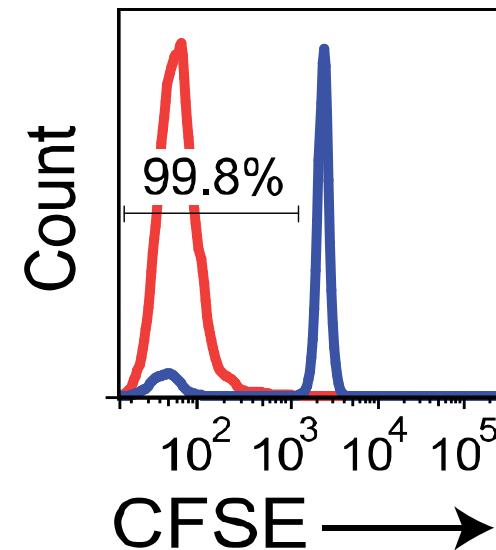
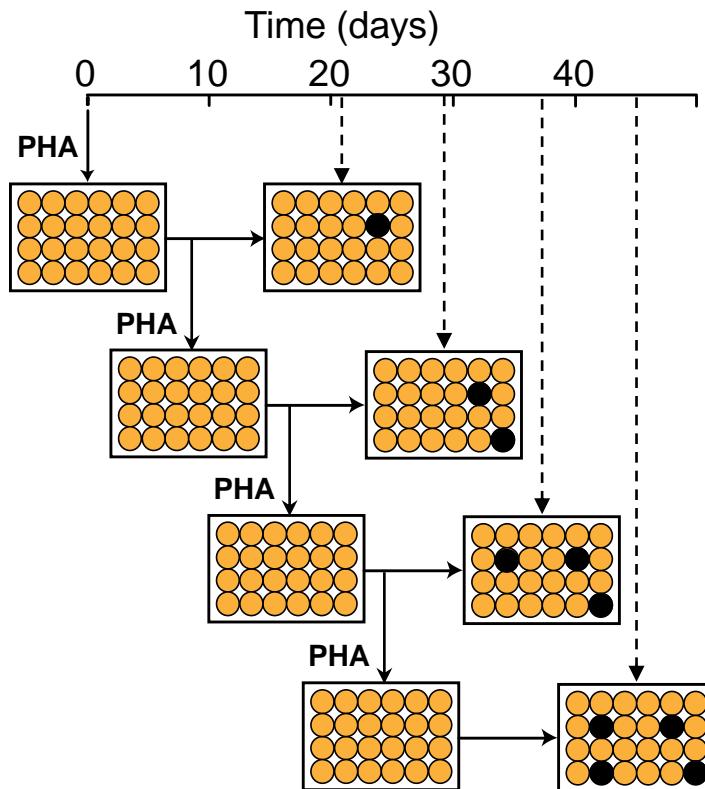
Ho et al Cell, 2013

Bruner et al, Nature Med 2016

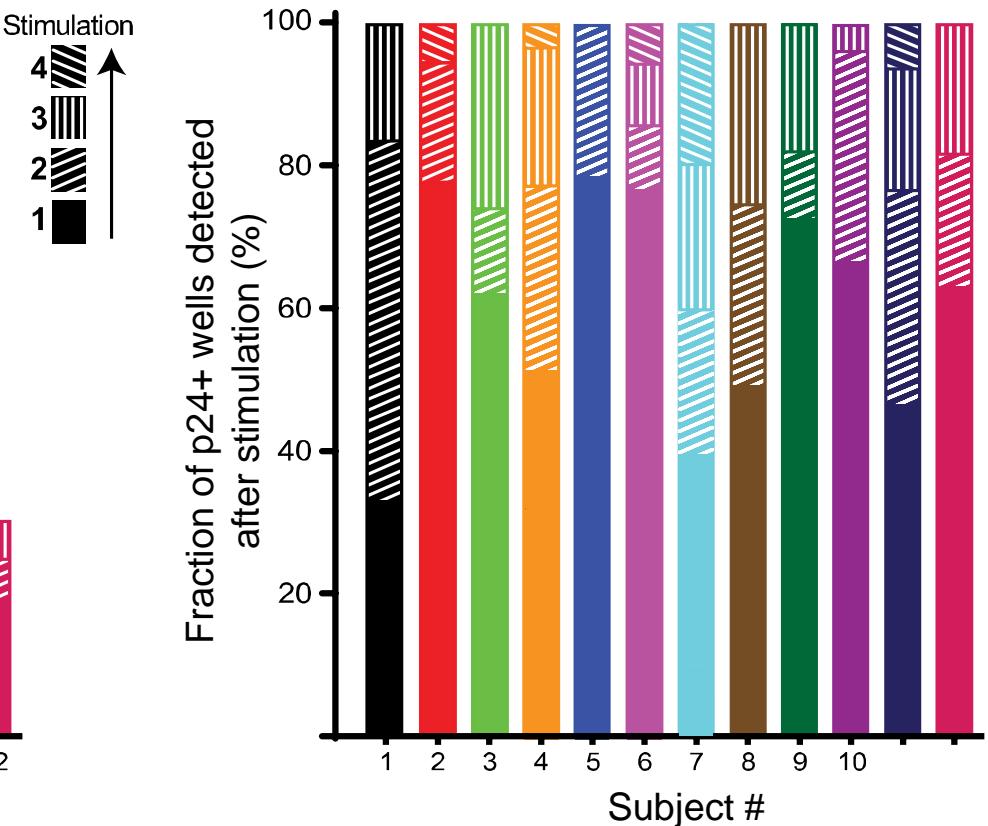
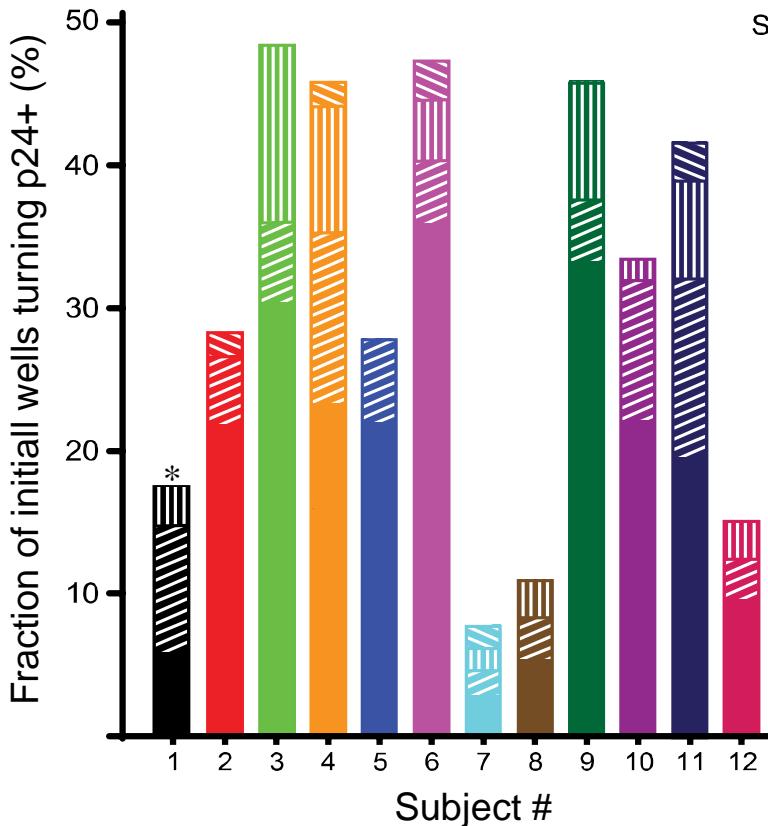
# Replication capacity of intact non-induced proviruses



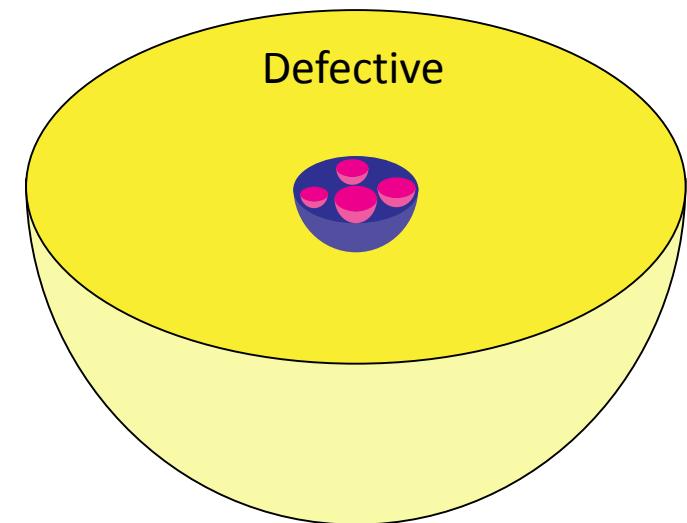
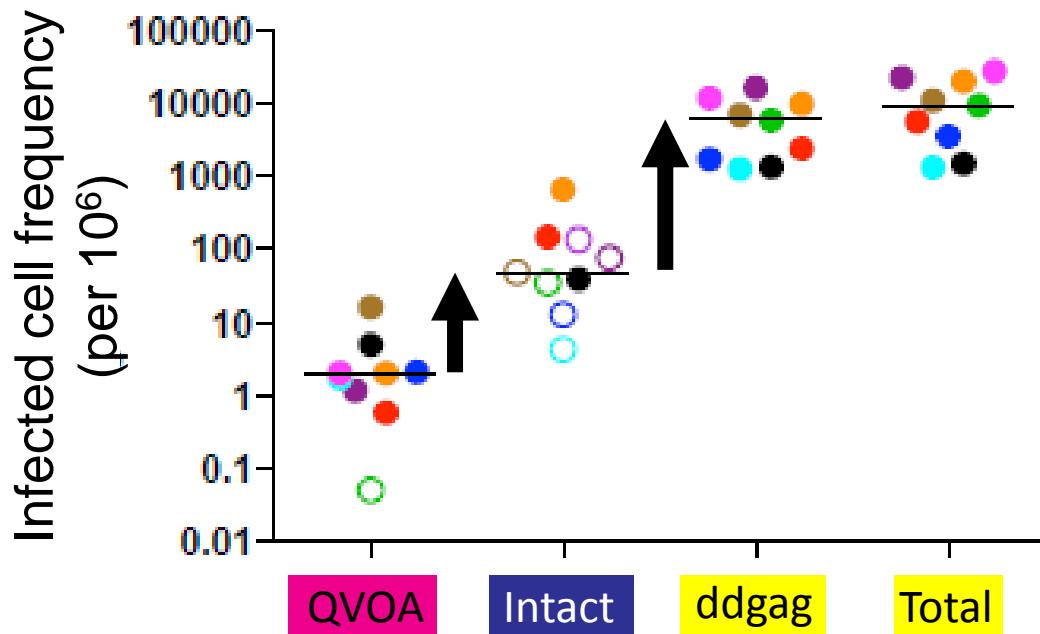
# Can intact non-induced proviruses be induced?



# Repetitive stimulation induces additional proviruses



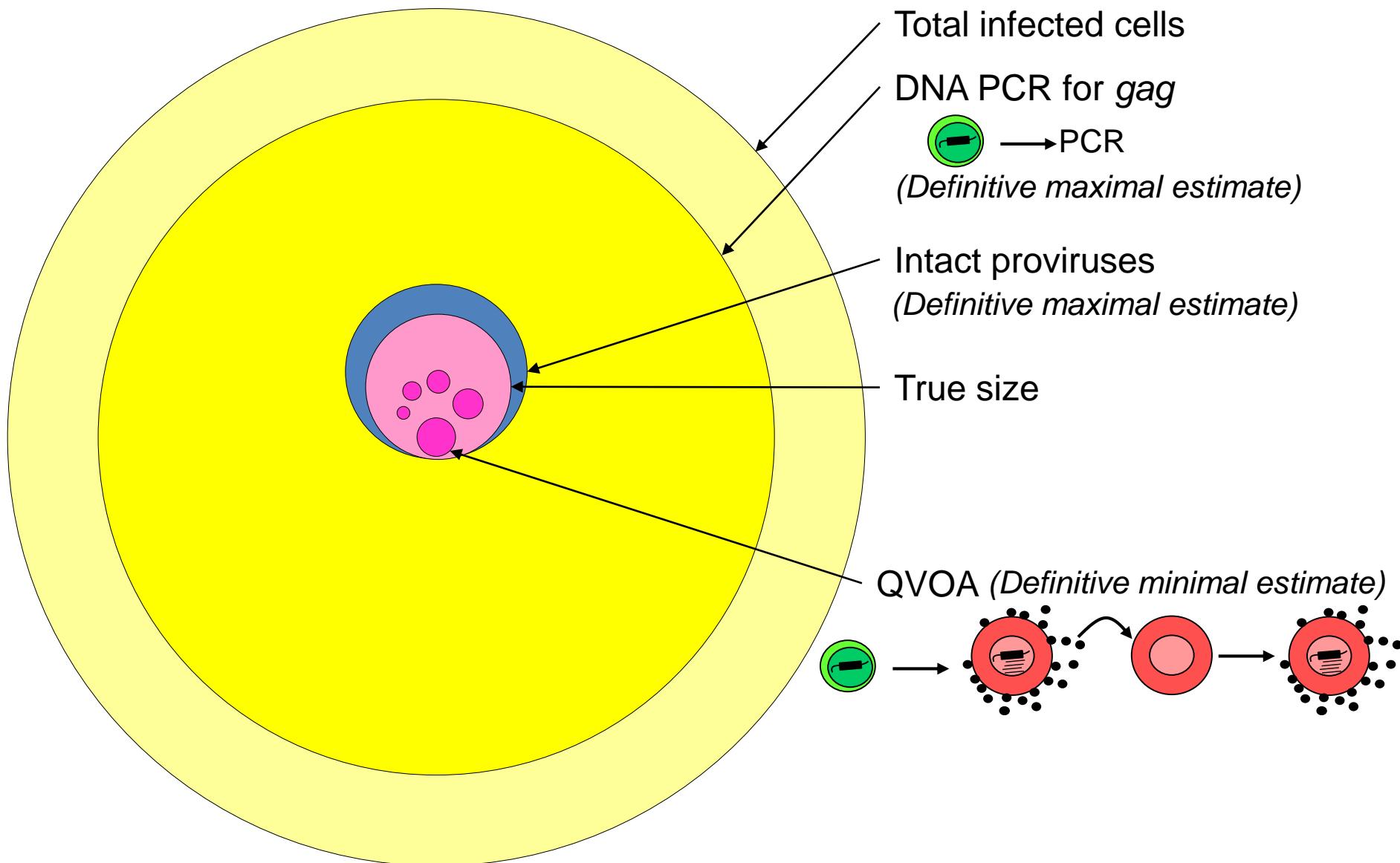
# QVOA, intact, and total proviruses



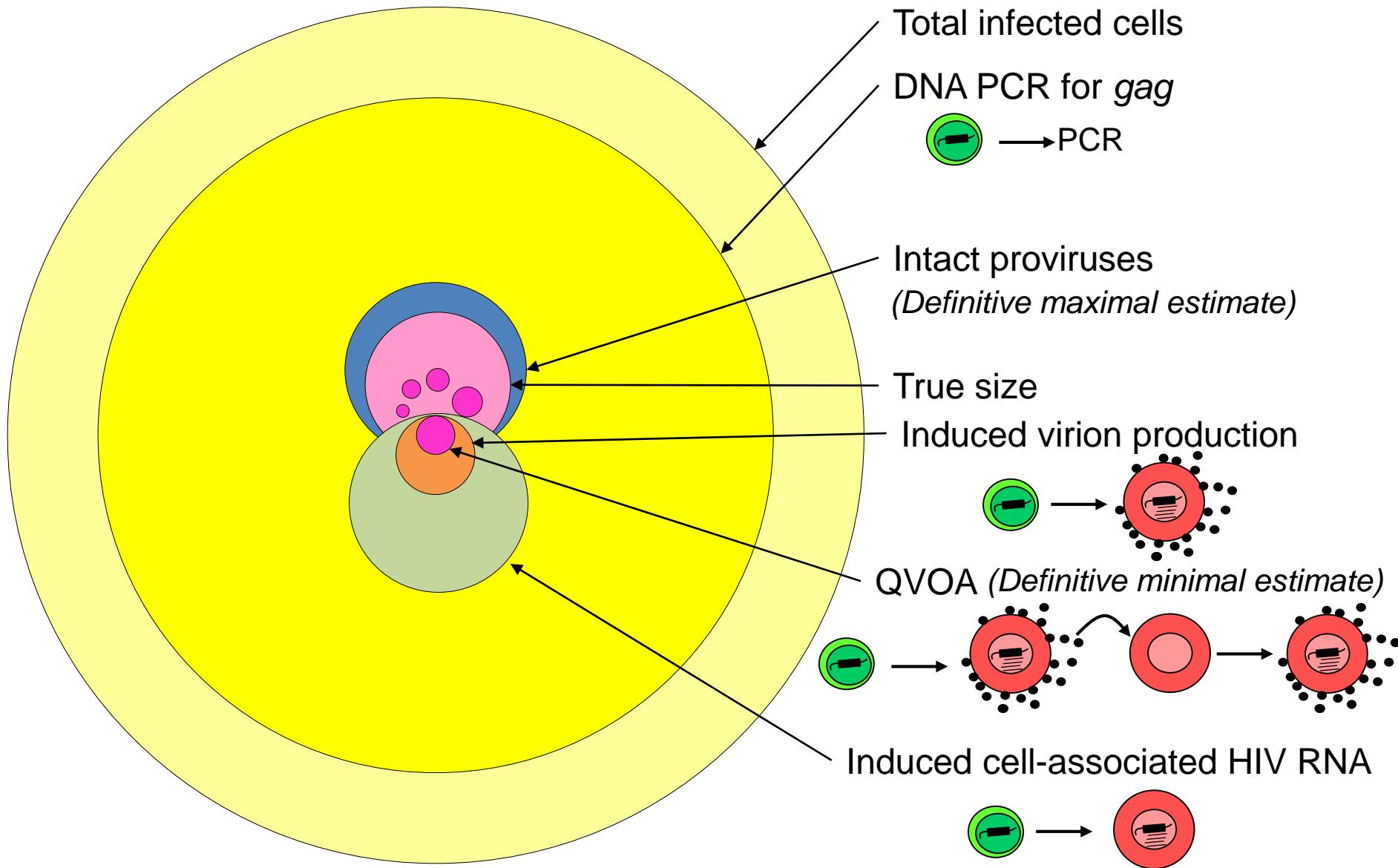
- Each round of stimulation induces additional proviruses
- A single round of maximal T cell activation does not induce all latent proviruses
- The number of intact proviruses provides a much more accurate upper limit on reservoir size than standard DNA PCR assays
- We need a scalable assay for intact proviruses to guide clinical trials of cure strategies

Ho et al Cell, 2013  
Bruner et al, Nat Med, 2016  
Hosmane et al, JEM in press

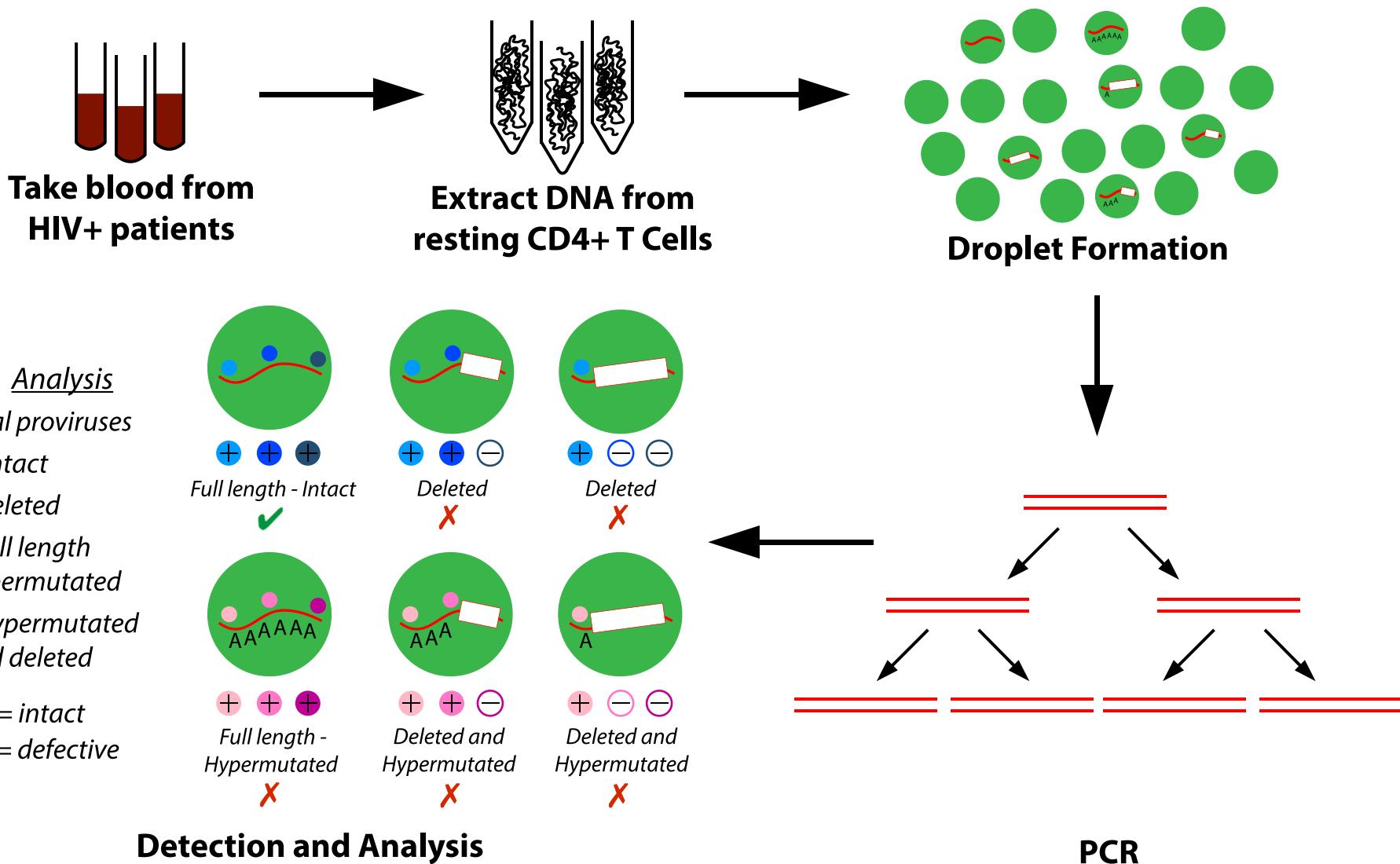
# Best assay for latent reservoir?



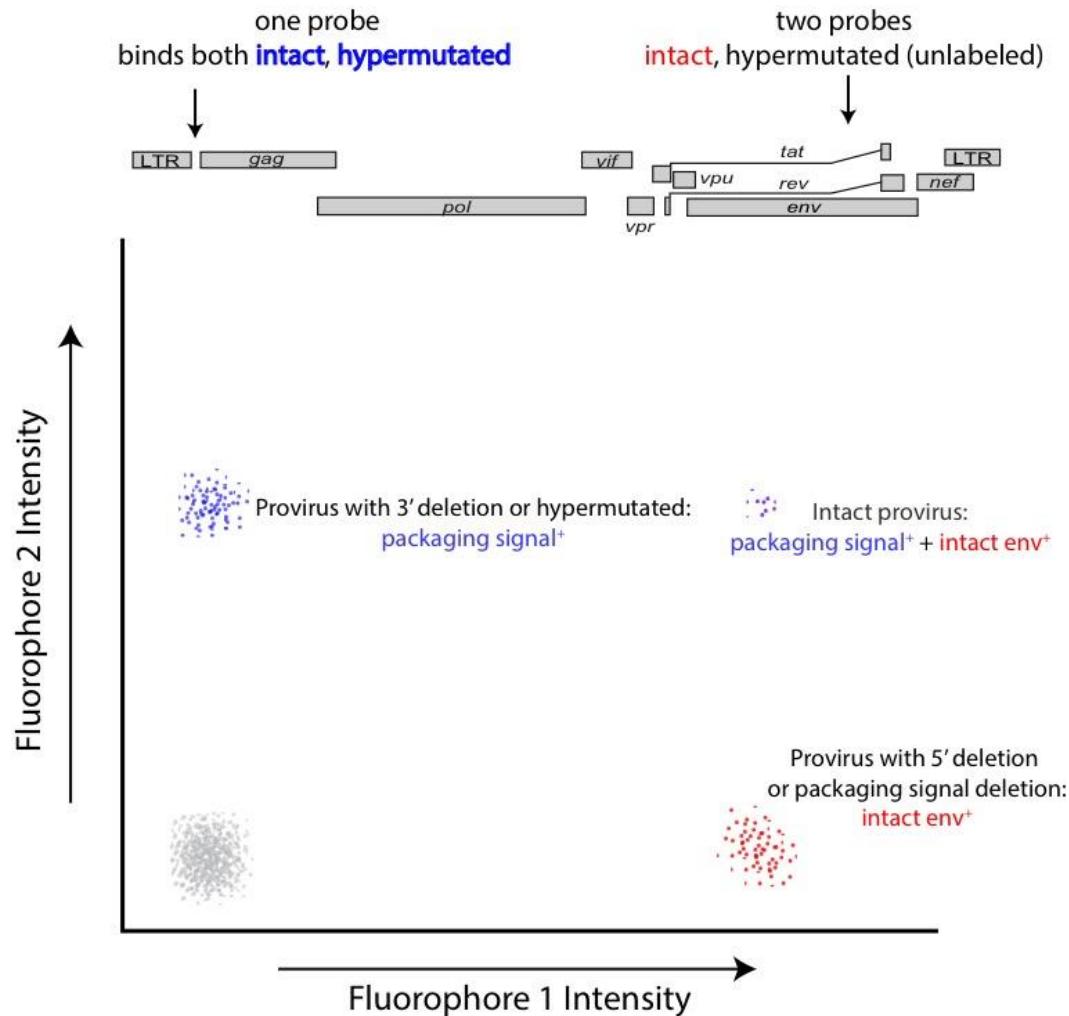
# Best assay for latent reservoir?



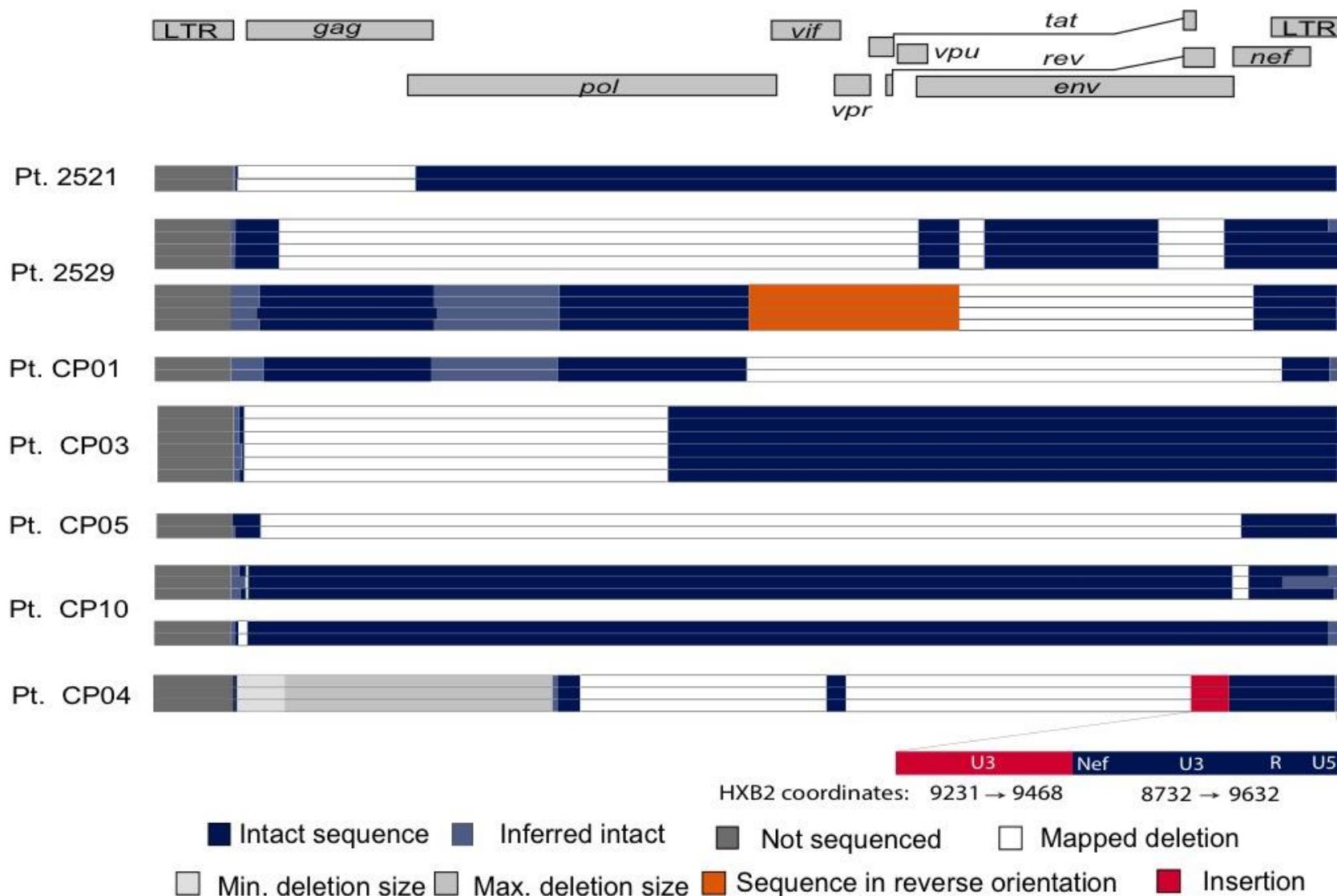
# ddPCR assay for intact proviruses

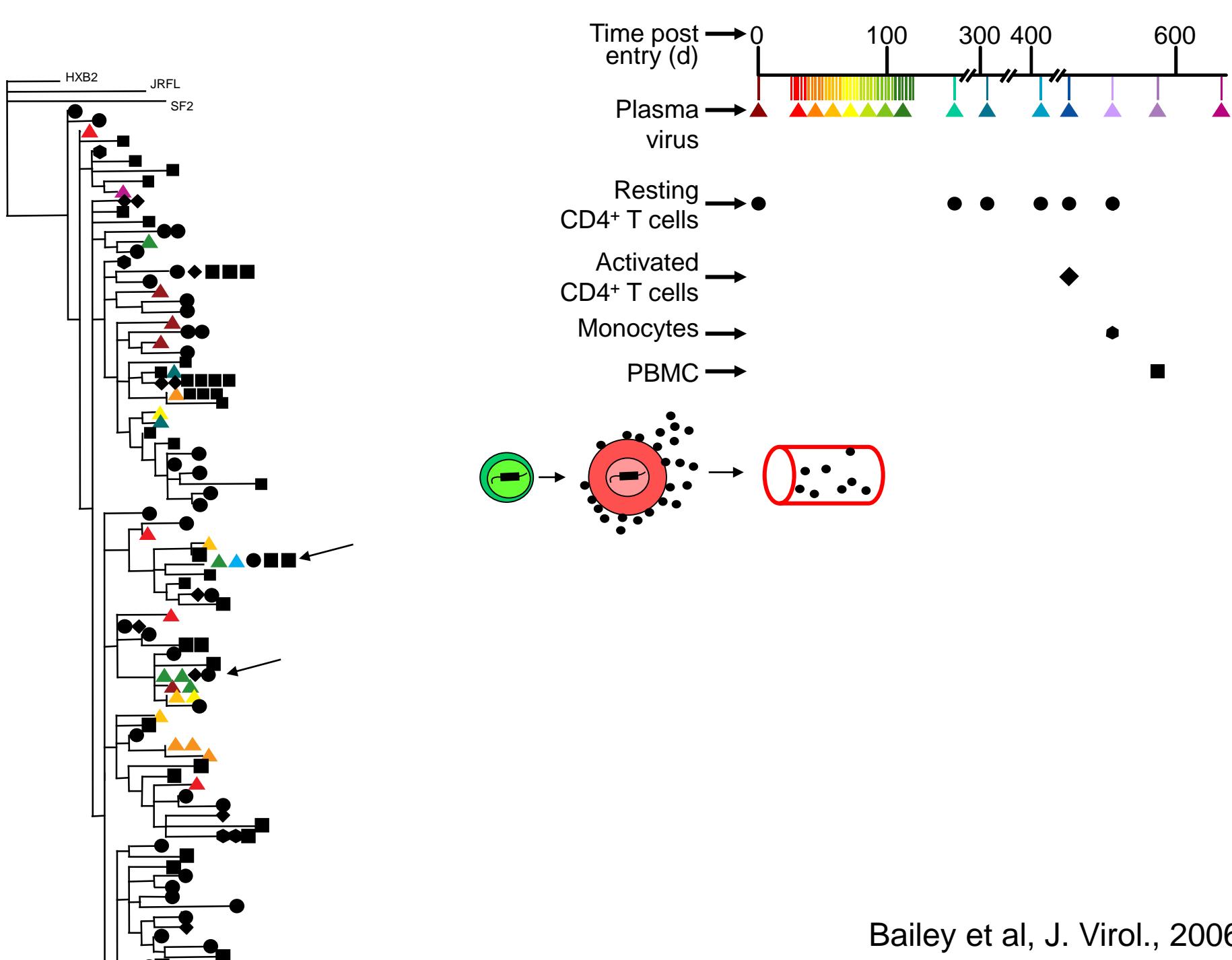


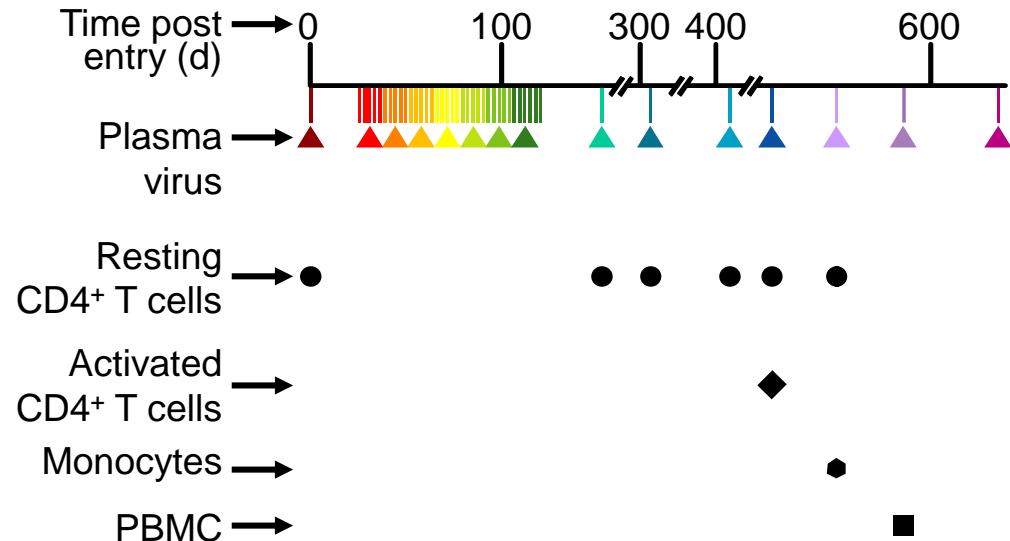
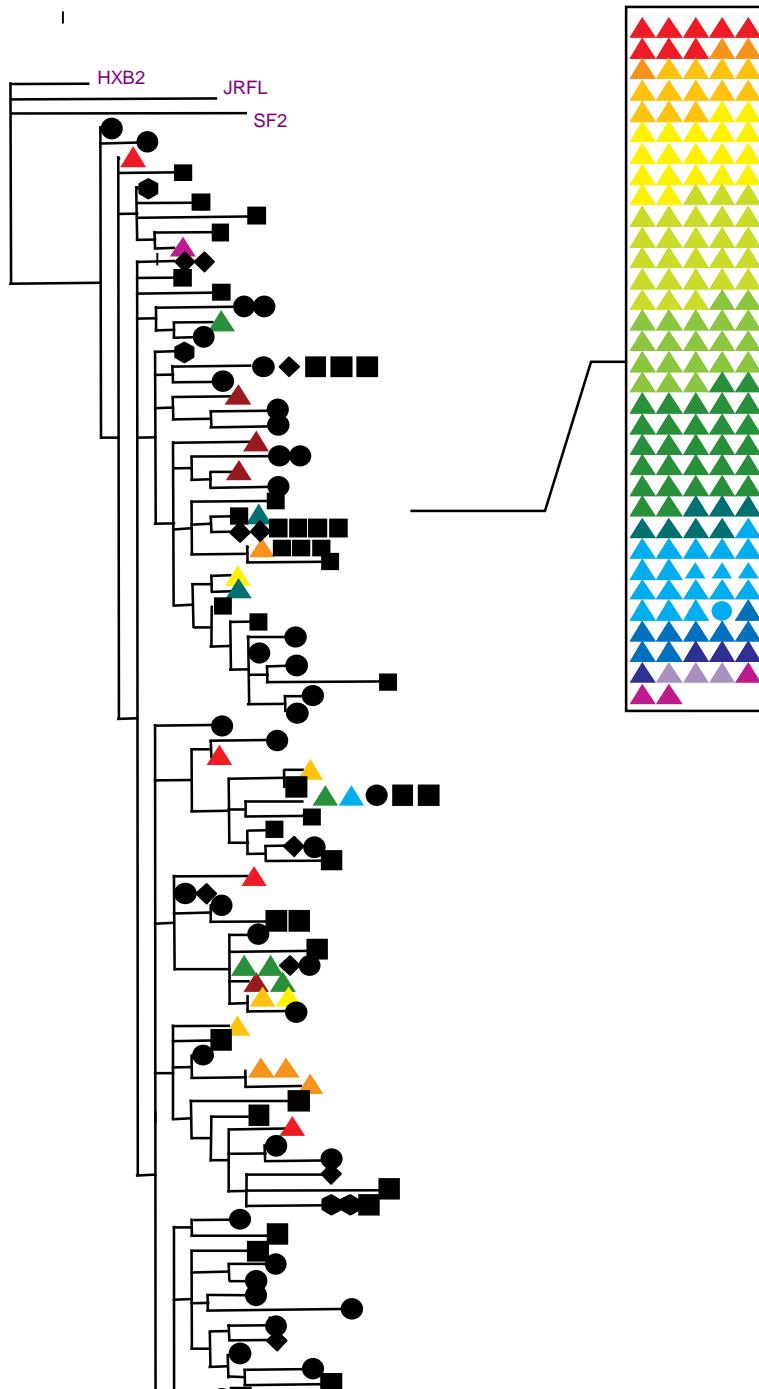
# Sample results on patient samples



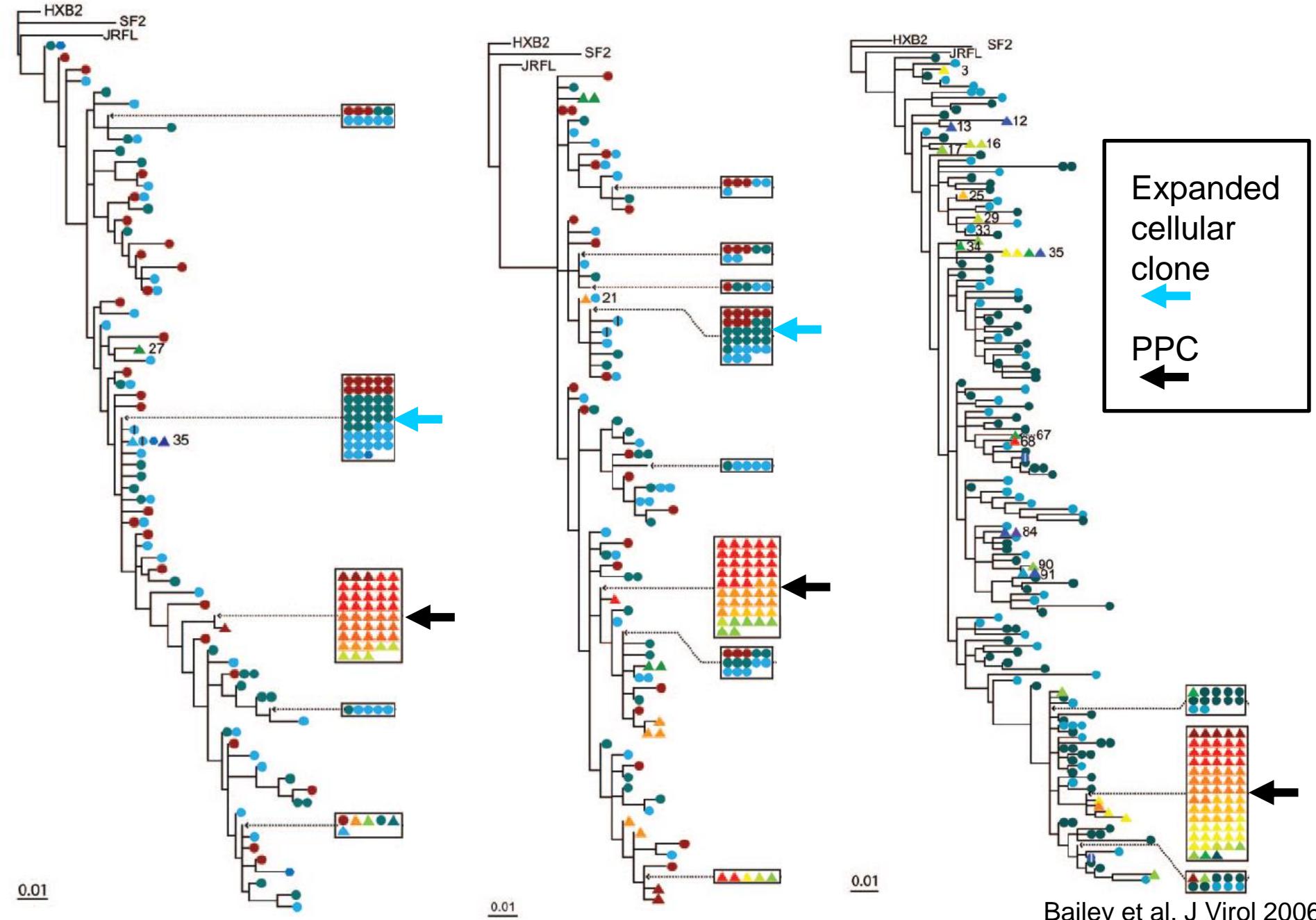
# Expanded clones with major defects



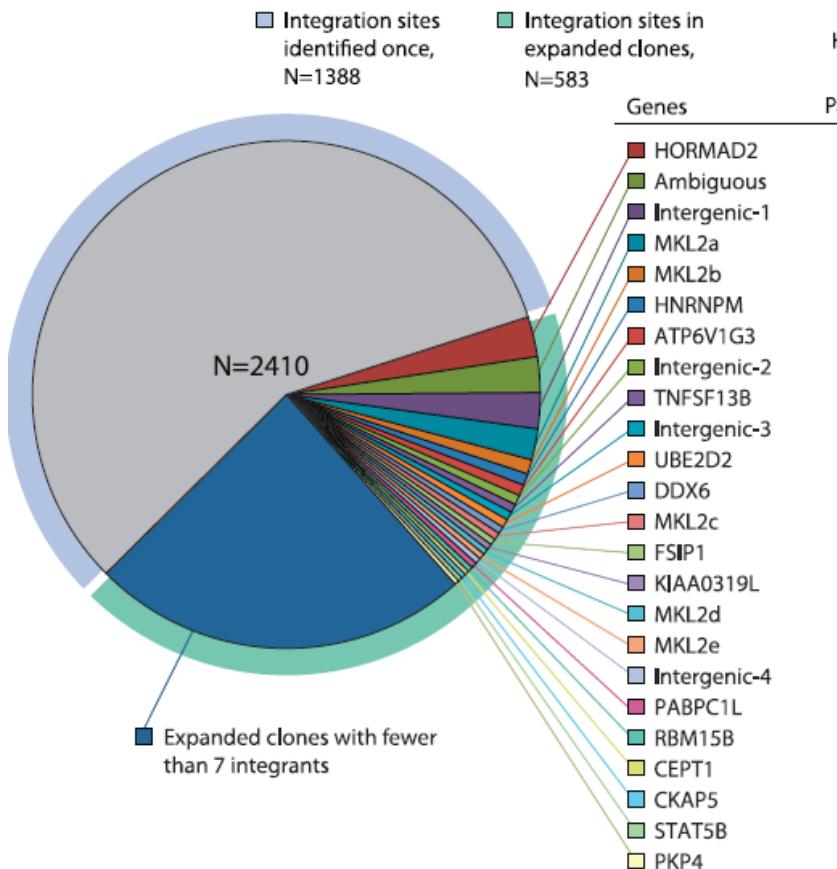




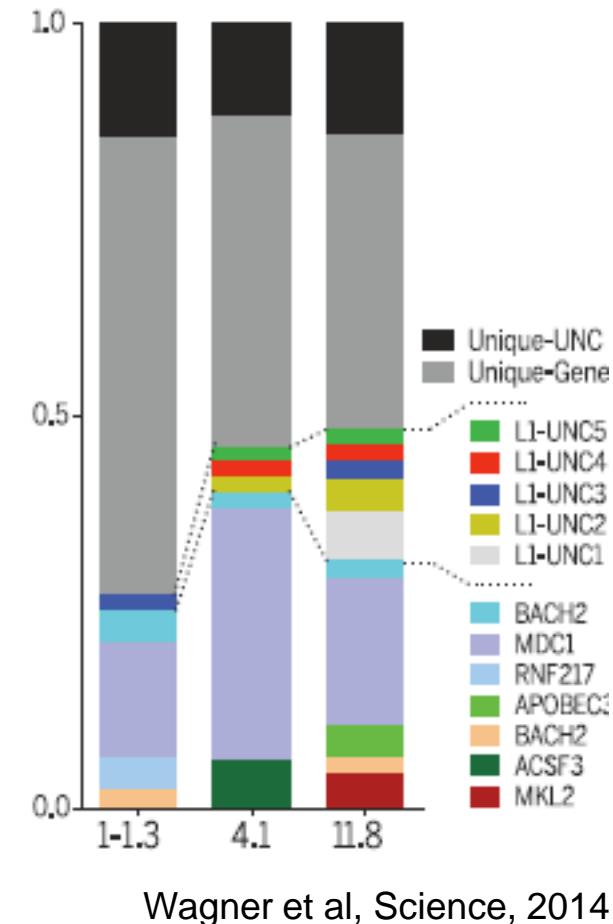
- In half of patients studied, residual viremia is dominated by a small number of clones
- These sequences do not show evidence of sequence evolution.
- These sequences appear to represent clonal expansion of individual infected cells



# Clonal expansion detected by integration site analysis



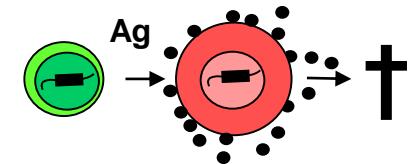
Maldarelli et al, Science, 2014



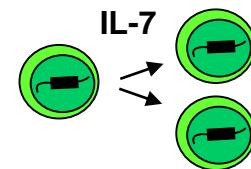
Wagner et al, Science, 2014

# Proliferation of infected cells

- Antigen drives T cell proliferation but also induces viral gene expression. Productively infected cells die quickly.

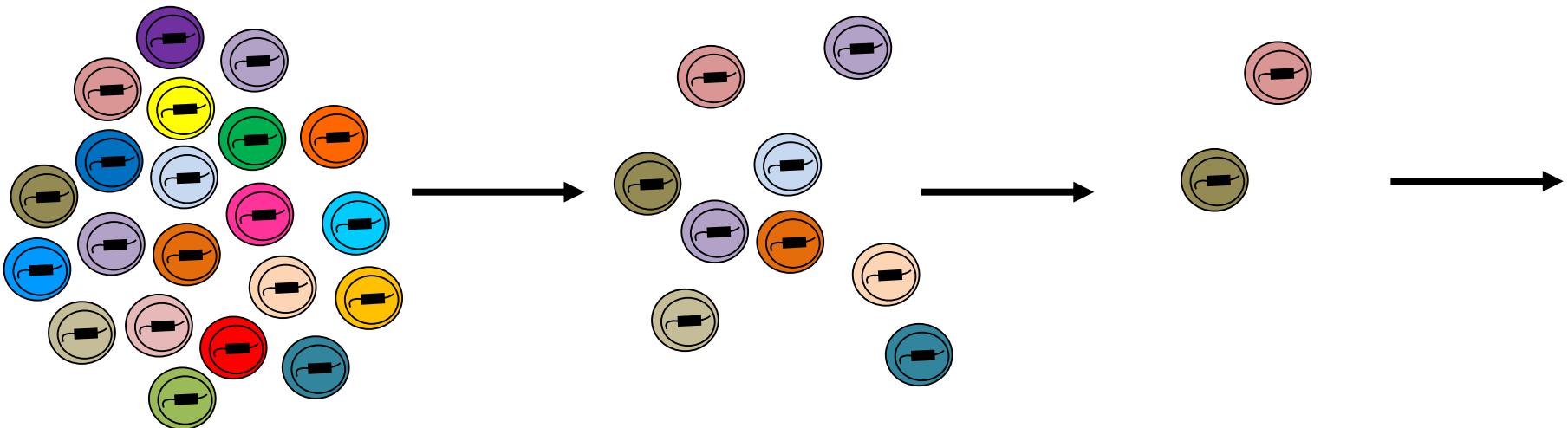


- Cytokines like IL-7 can drive homeostatic proliferation of memory T cells, possibly expanding the reservoir, but may also reverse latency.

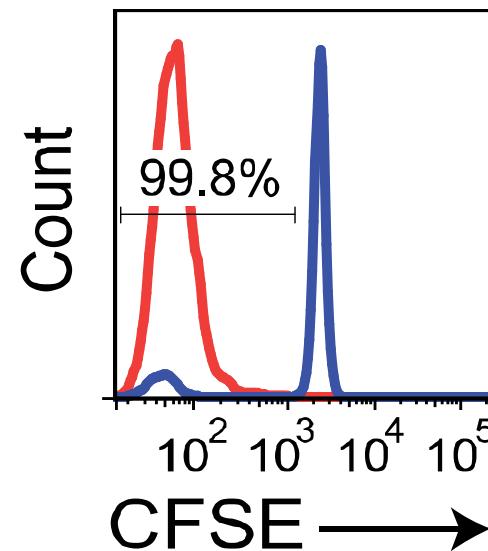
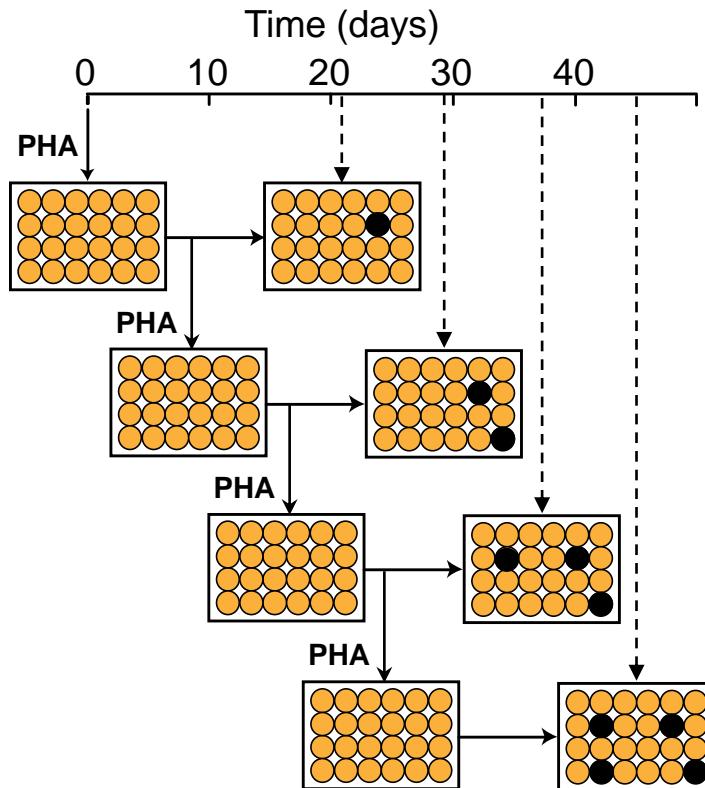


# Fundamental assumption of cure strategies

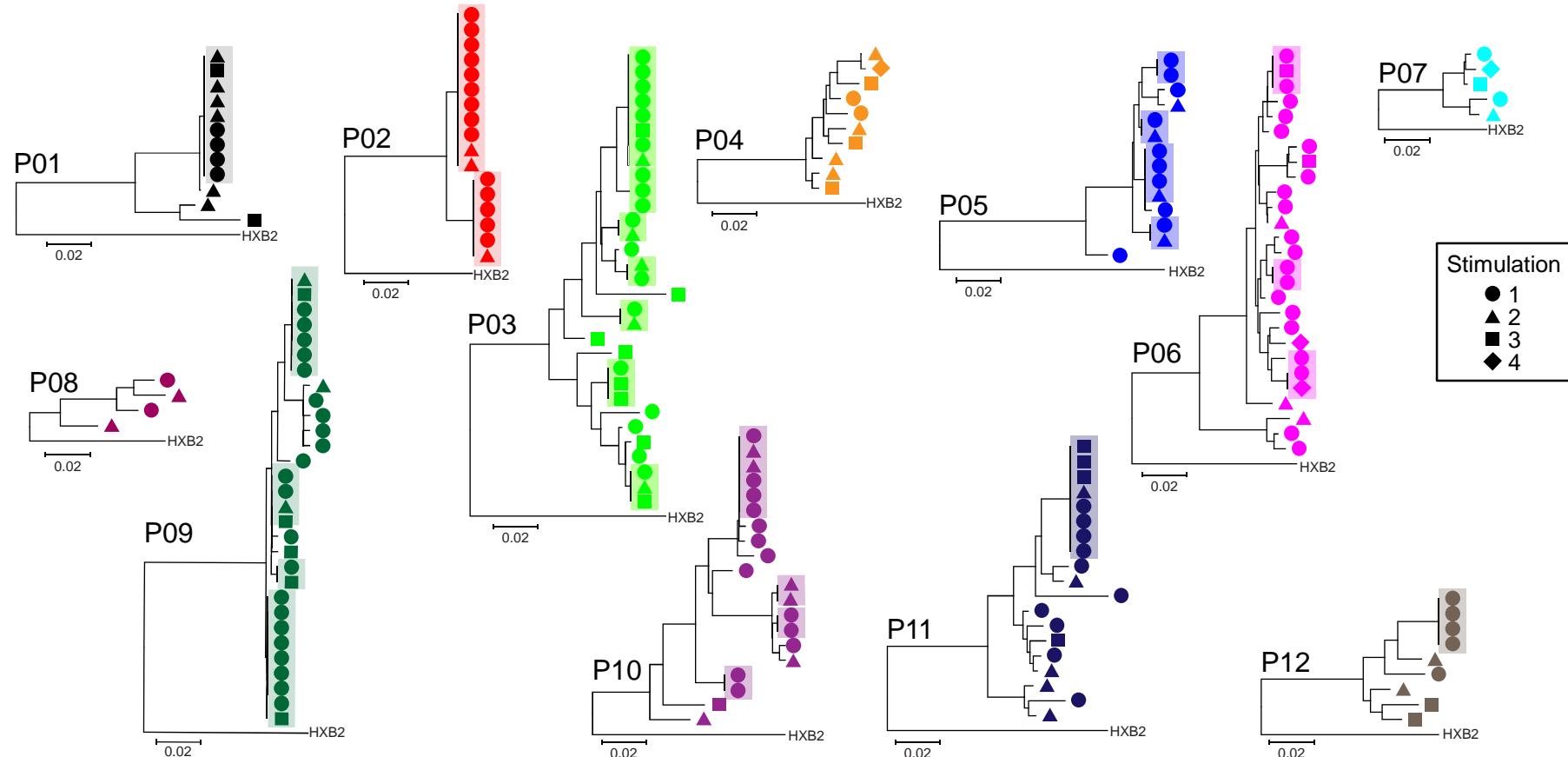
- Generation of new latently infected cells is completely stopped by ART
- Therefore, reductions induced by curative strategies are stable
- Repeat cycles may lead to cure



# *In vitro* proliferation of latently infected cells



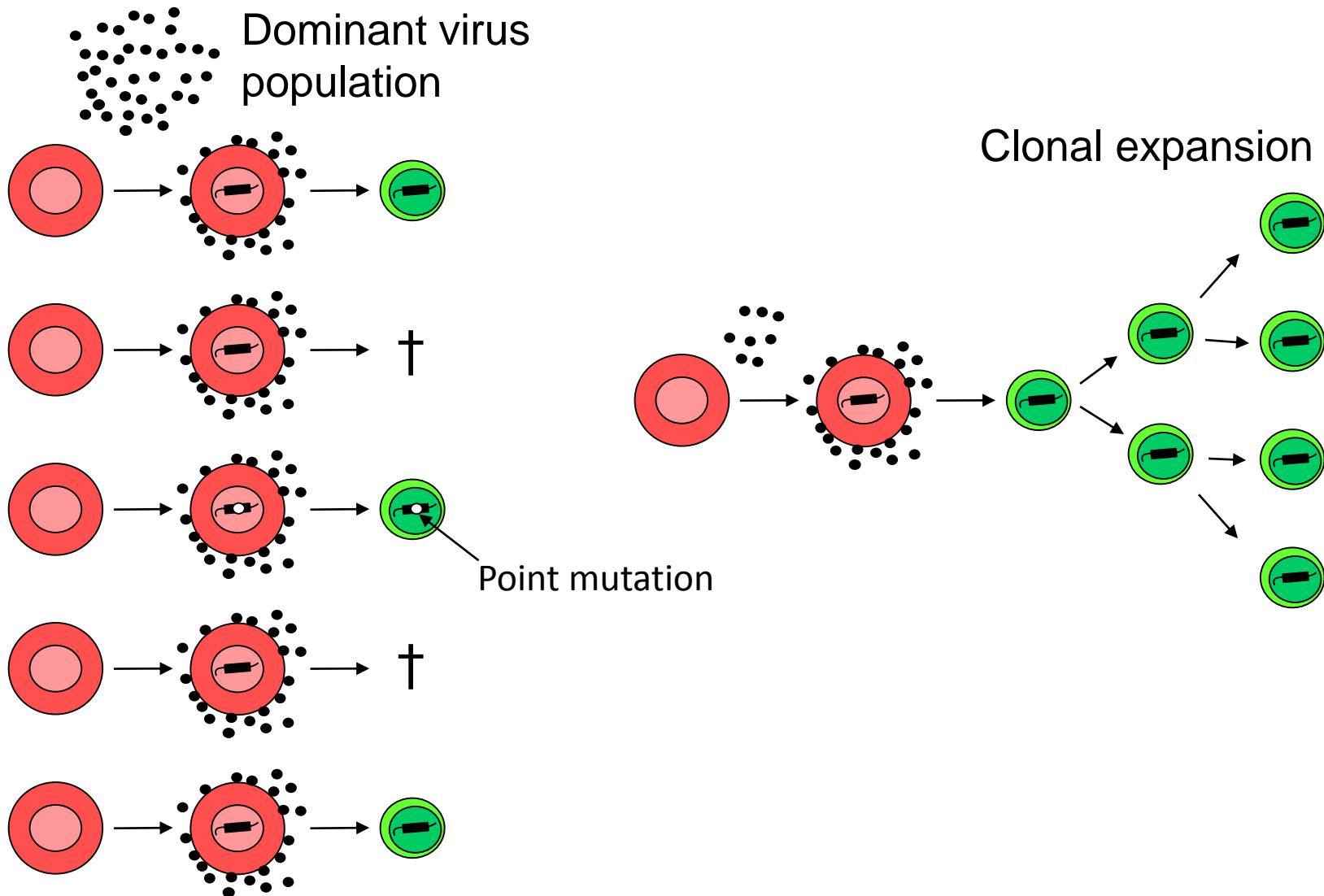
# Independent isolates of replication-competent HIV with identical sequence



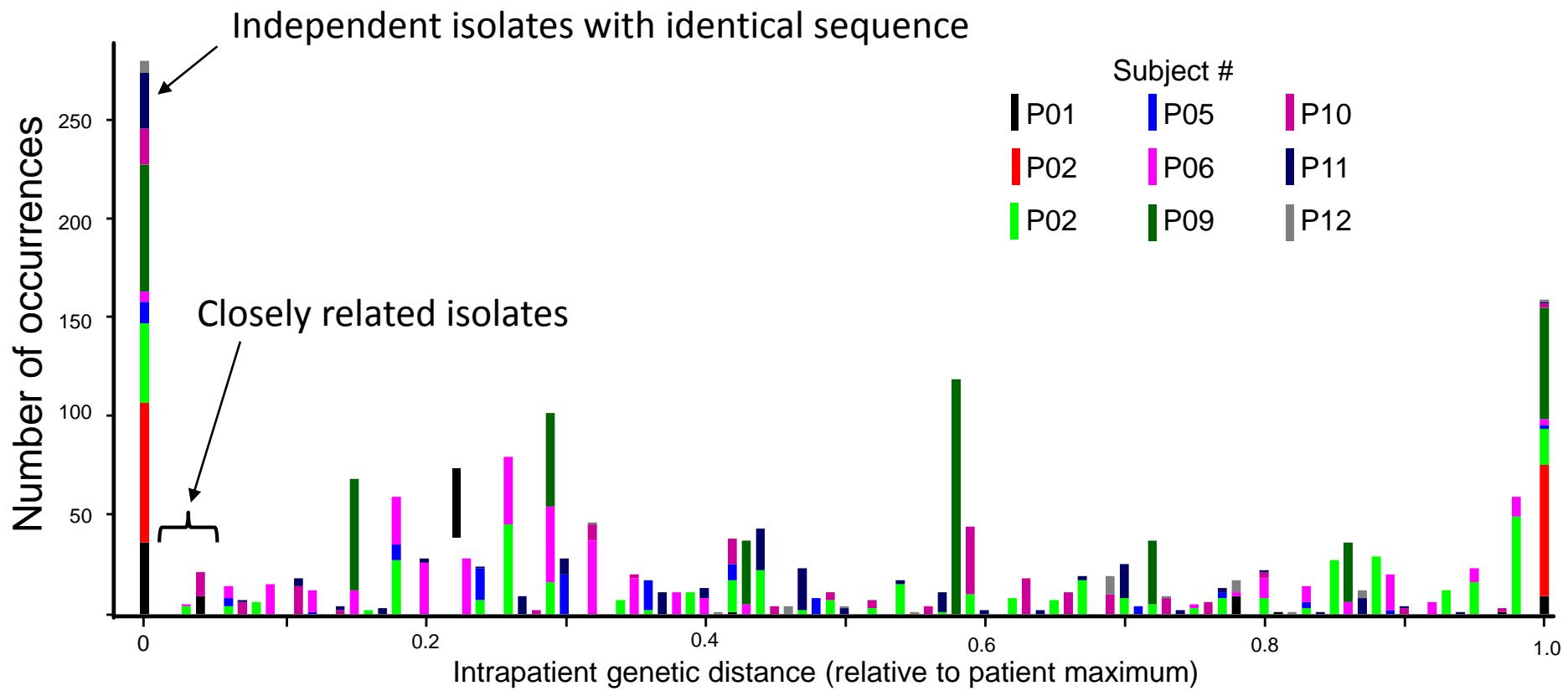
Stimulation

- 1
- ▲ 2
- 3
- ◆ 4

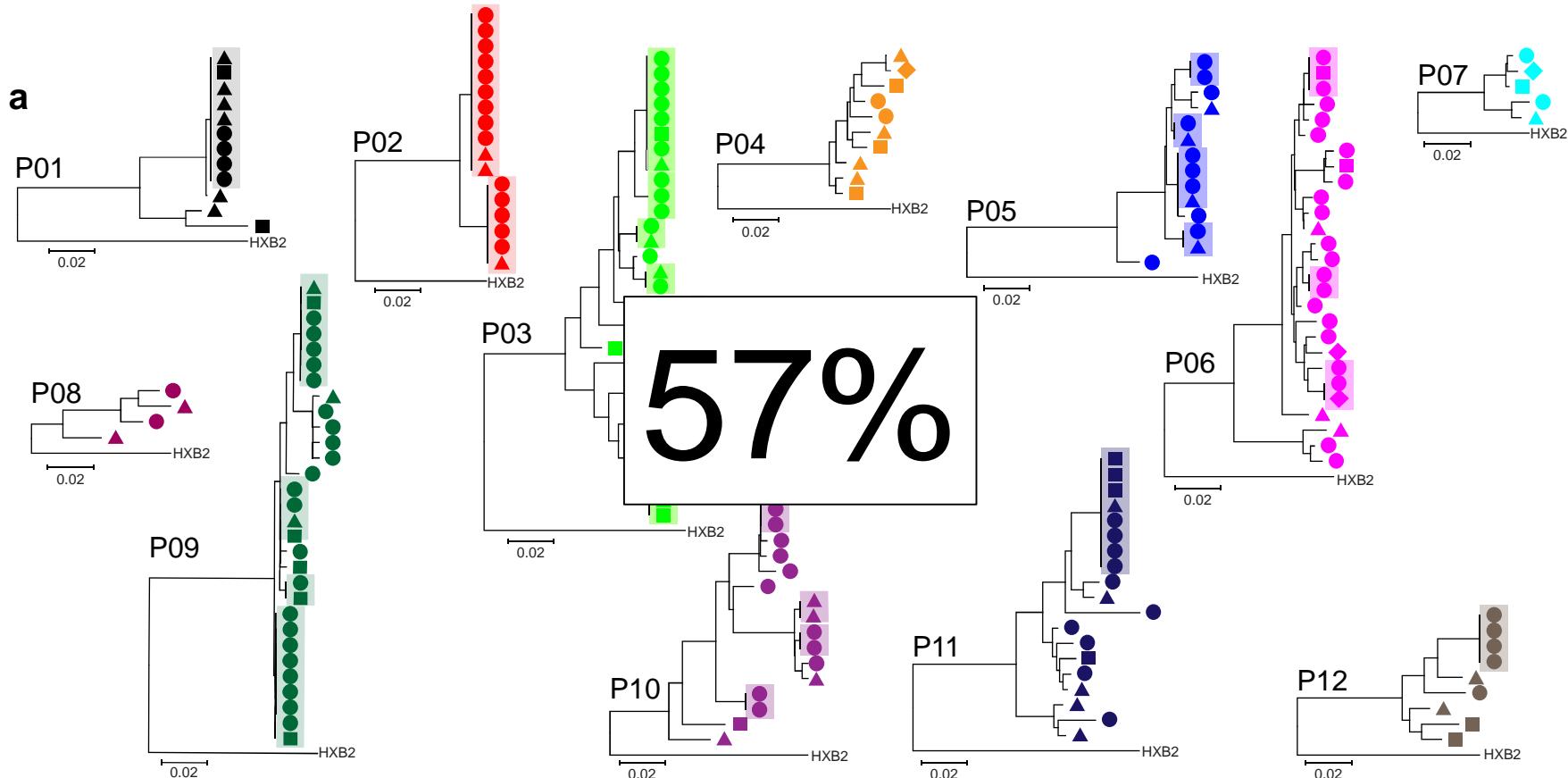
# Hypotheses to explain identical isolates



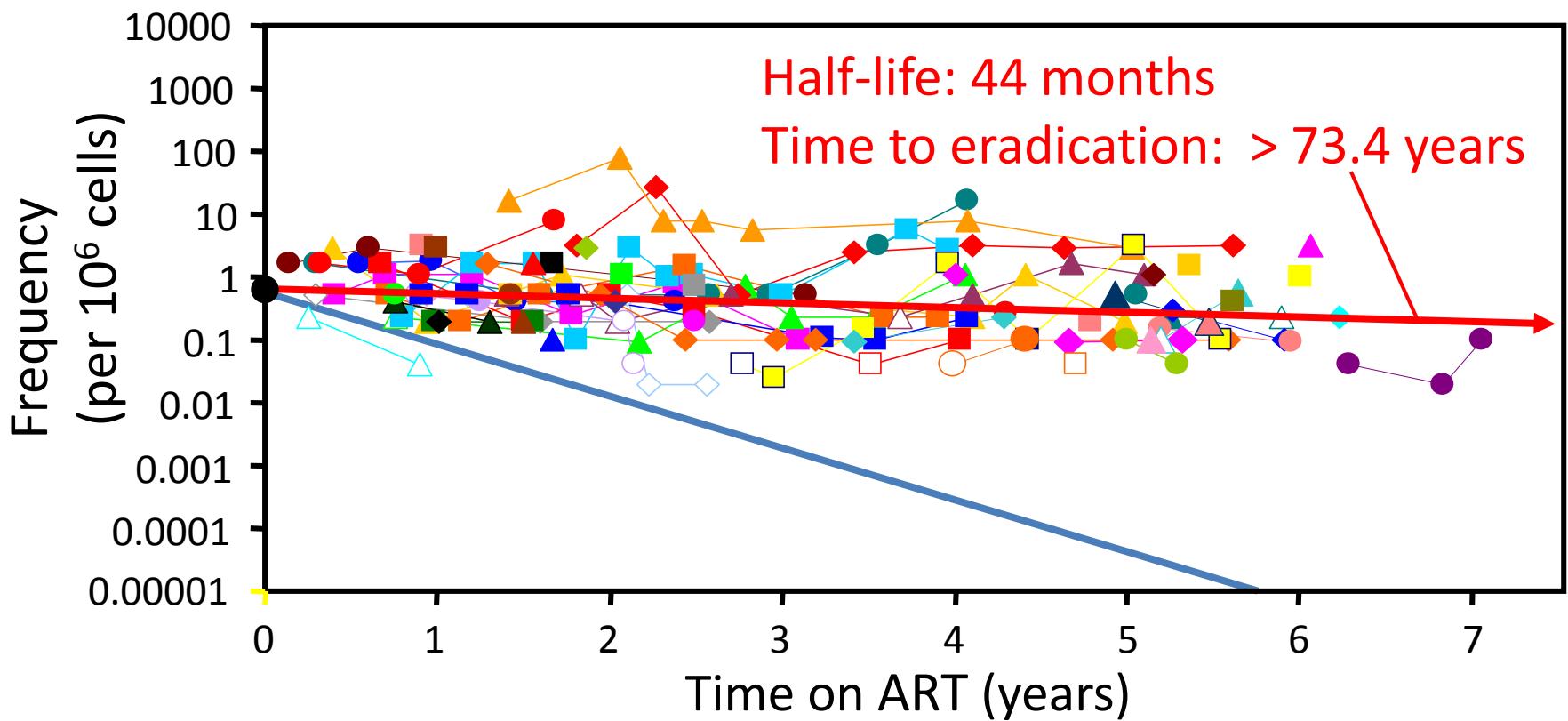
# Intrapatient genetic distances between isolates



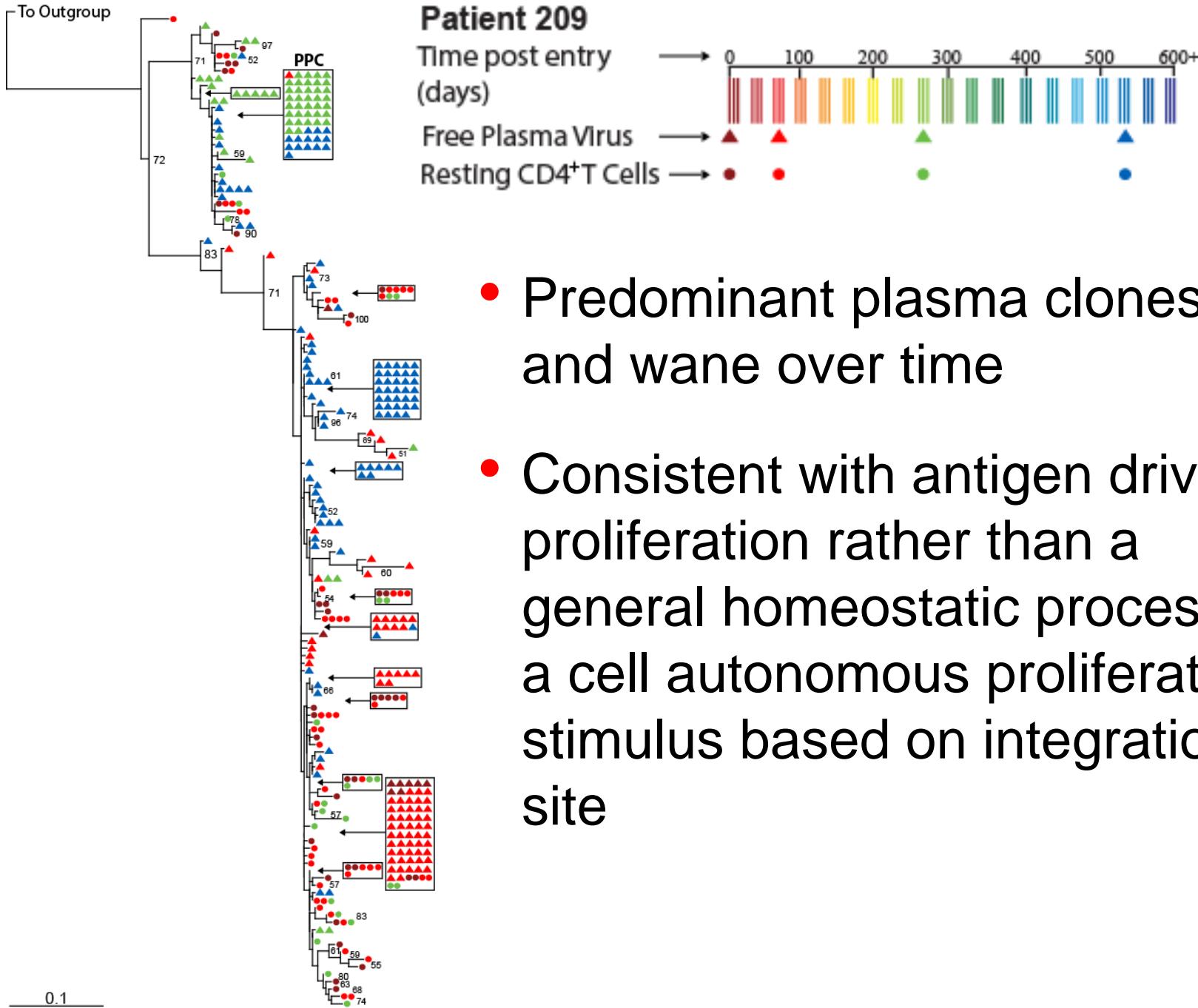
# Expanded cellular clones account for the majority of the reservoir



# Slow decay may reflect more rapid decay balanced by proliferation

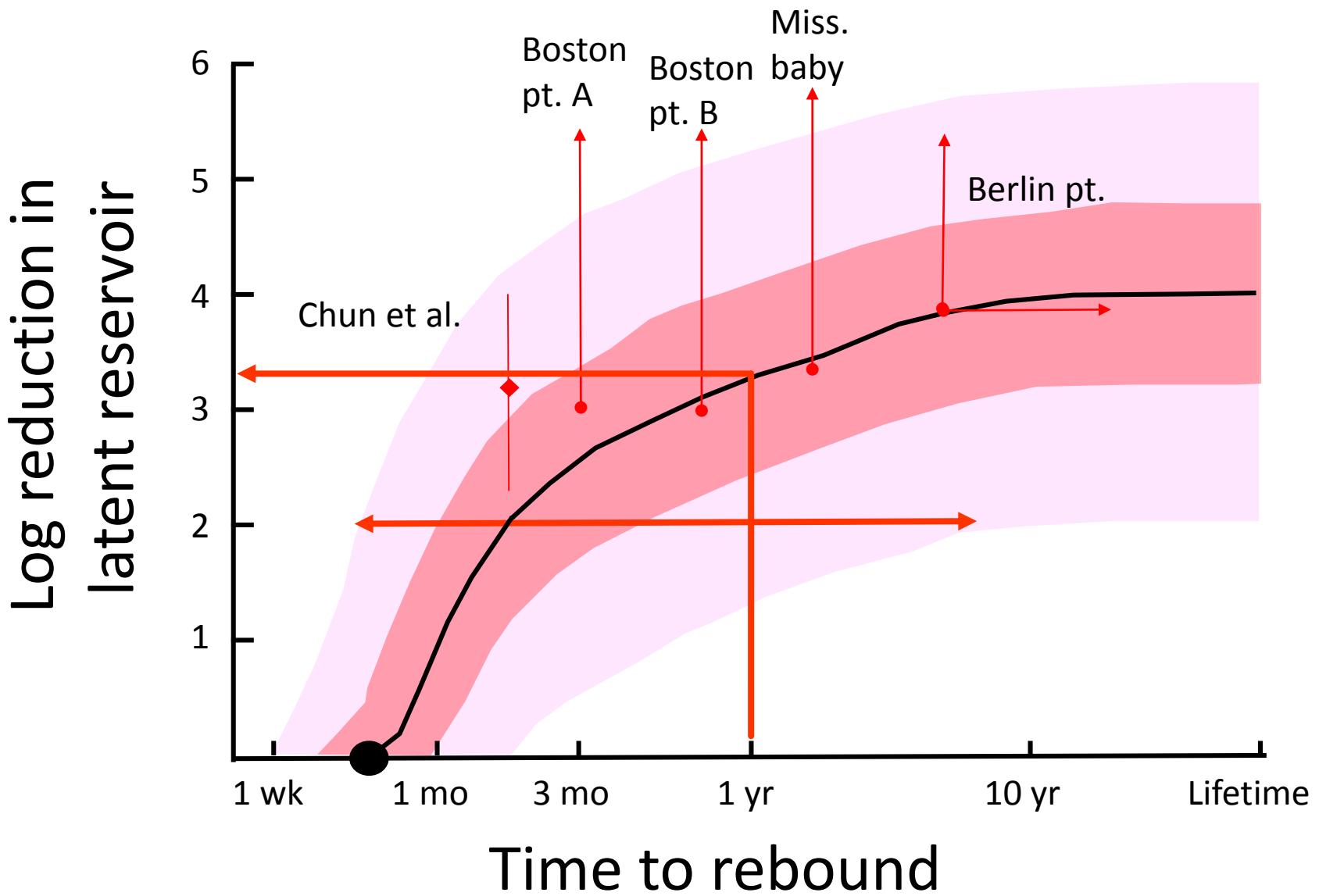


Finzi et al., Nature Med., 1999  
Siliciano et al., Nature Med., 2003



- Predominant plasma clones wax and wane over time
- Consistent with antigen driven proliferation rather than a general homeostatic process or a cell autonomous proliferative stimulus based on integration site

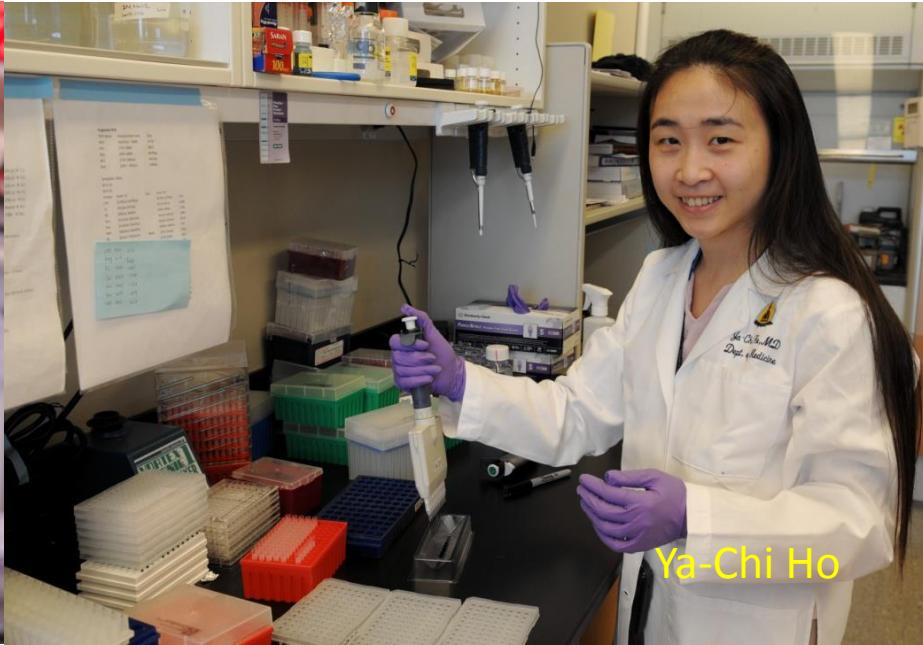
# Time to rebound



# Thanks



Janet Siliciano



Ya-Chi Ho



Nina Hosmane



Katie Bruner



Alison Hill and Daniel Rosenbloom

# Thanks

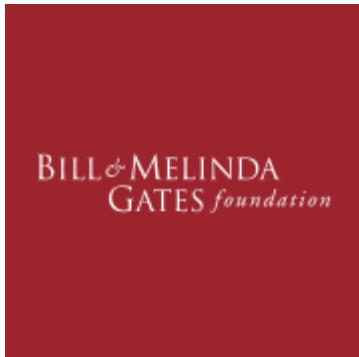
## Collaborators

Steve Deeks  
Doug Richman  
Brad Jones  
Richard Flavell  
Dave Margolis  
Joel Gallant  
Joe Cofrancesco  
Jon Karn  
Martin Nowak

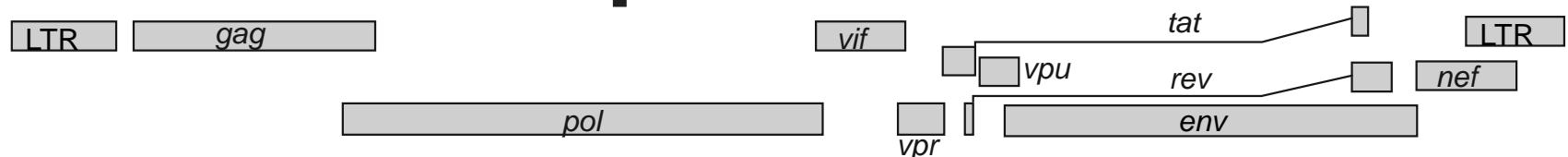
Matt Strain  
Sarah Palmer  
Una O'Doherty  
Joe Wong  
Steve Yukl  
John Mellors

## Funding

NIH: Martin Delaney Collaboratories  
CARE and DARE  
Howard Hughes Medical Institute  
Foundation for AIDS Research  
(amFAR): ARCHE  
Johns Hopkins Center for AIDS  
Research  
Bill and Melinda Gates Foundation



# Strategy for unbiased analysis of proviruses



Plus strand

Minus strand

**Step 1: Outer PCR from U5 to U5**

Outer PCR- 9,064 bp

**Step 2: gag and env inner PCRs to confirm clonal dilution**

gag - 1,448 bp

env- 2,841 bp

**Step 3: Subject all wells to 6 inner PCRs, regardless of positivity for gag or env inner PCRs**

gag - 1,448 bp

env- 2,841 bp

A - 4,449 bp

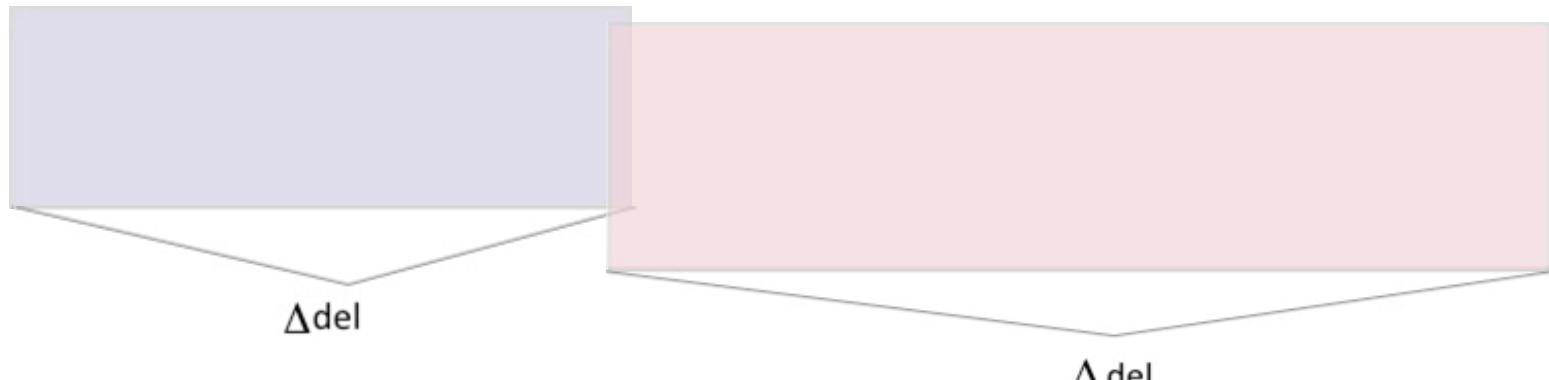
B - 5,793 bp

C - 6,385 bp

D - 4,778

**Step 4: Visualize PCRs on a gel and directly sequence products to determine whether a provirus is genetically intact or defective**

# Methods



**Step 4: Visualize PCRs on a gel and directly sequence products to determine whether a provirus is genetically intact or defective**

