

# Basic and Translational Science CROI2023



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*ciber*  **ICREA**

The year of the "single-cell"

1

## Oral Abstract Session-05 HIV RESERVOIRS AND CURE STRATEGIES

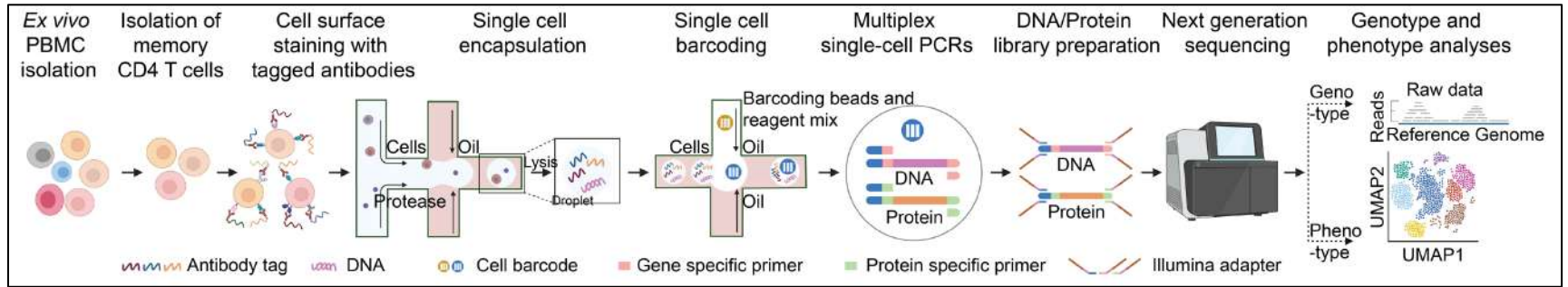
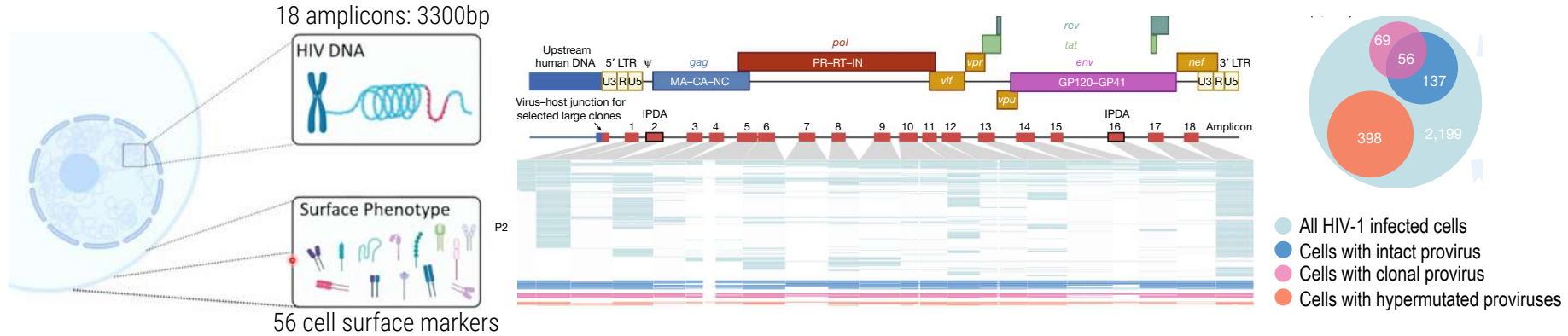
#135

### SINGLE-CELL PROTEOGENOMIC PROFILING OF HIV-1 RESERVOIR CELLS

**Weiwei Sun**<sup>1</sup>, Ce Gao<sup>1</sup>, Ciputra A. Hartana<sup>1</sup>, Matthew R. Osborn<sup>1</sup>, Kevin B. Einkauf<sup>1</sup>, Xiaodong Lian<sup>1</sup>, Benjamin R. Bone<sup>1</sup>, Nathalie Bonheur<sup>1</sup>, Tae-Wook Chun<sup>2</sup>, Eric S. Rosenberg<sup>3</sup>, Bruce D. Walker<sup>1</sup>, Xu G. Yu<sup>1</sup>, Mathias Lichterfeld<sup>1</sup>  
*Ragon Institute of MGH, MIT and Harvard, Cambridge, MA, USA, <sup>2</sup>National Institute of Allergy and Infectious Diseases, Bethesda, MD, USA, <sup>3</sup>Massachusetts General Hospital, Cambridge, MA, USA*

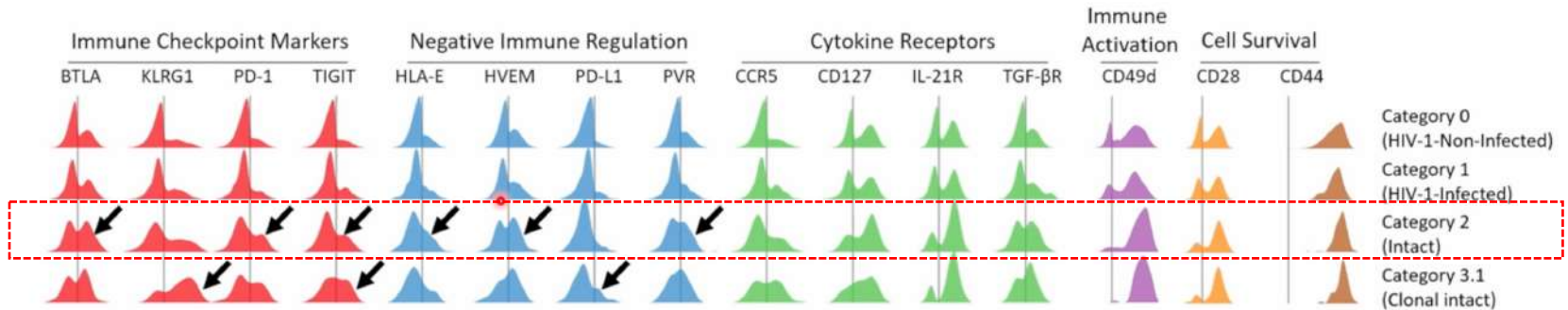
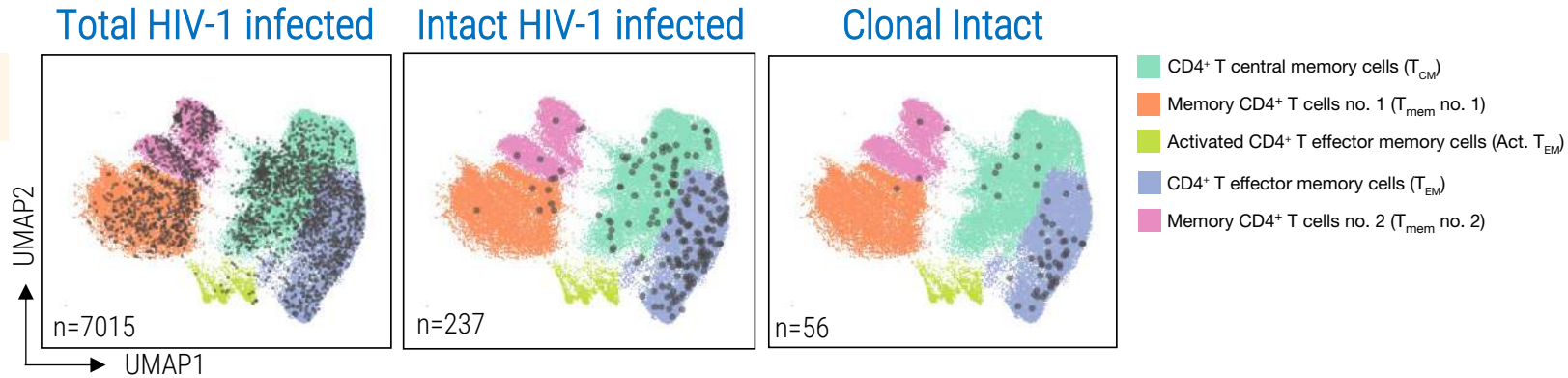
# Phenotyping and Proviral Sequencing (PheP-Seq)

Simultaneous detection of HIV-1 proviral sequence and surface phenotype at the single-cell level



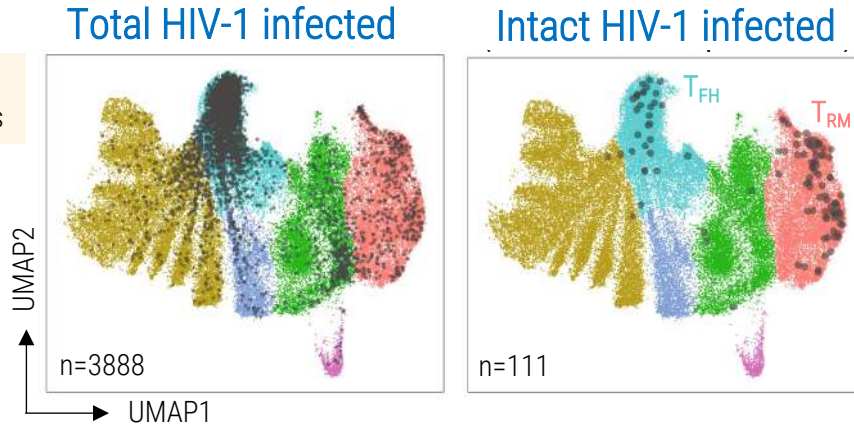
# Distinct phenotypic profile in Peripheral Blood Cells

5 PWH  
n = 787,717 cells

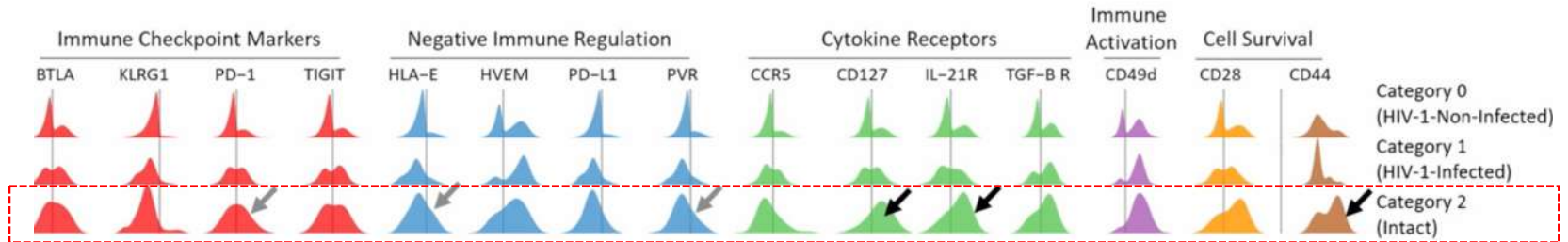


# Distinct phenotypic profile in lymph node mononuclear cells

3 PWH  
n = 496,628 cells



- CD4<sup>+</sup> T resident memory cells ( $T_{RM}$ )
- CD4<sup>+</sup> T follicular helper cells ( $T_{FH}$ )
- Memory CD4<sup>+</sup> T cells no. 1 ( $T_{mem}$  no. 1)
- Memory CD4<sup>+</sup> T cells no. 2 ( $T_{mem}$  no. 2)
- Memory CD4<sup>+</sup> T cells no. 3 ( $T_{mem}$  no. 3)
- Memory CD4<sup>+</sup> T cells no. 4 ( $T_{mem}$  no. 4)



# Conclusions

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- PheP-Seq is capable of profiling the phenotypic features of single HIV-1-infected cells ex-vivo
  - No major phenotypic differences between HIV-1-infected (defective) and non-infected cells
  - After ~10 years of ART, cells harboring intact proviruses are enriched for negative immunoregulatory markers and immune checkpoint markers
  - This phenotype may help reservoir cells with intact HIV-1 to avoid being exposed to and killed by host immune cells
  - Data suggest that only HIV-1-infected cells with optimal adaptation to host immune activity or their specific tissue microenvironment can survive long term
- Reservoir cells with intact HIV are subject to active immune selection pressure

Illuminating a long-term mystery

2

Oral Abstract Session-01 VIROLOGY/PATHOGENESIS

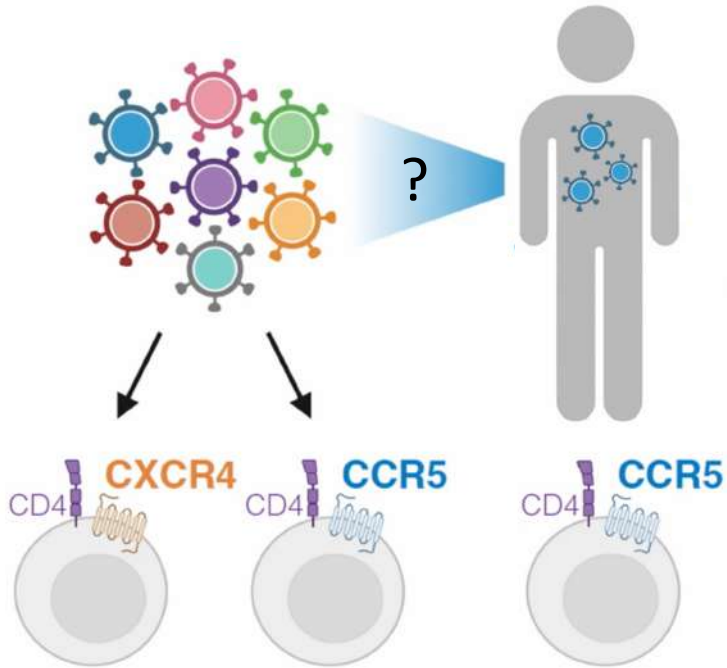
#105

**HOST CELL GLYCOSYLATION DIFFERENTIALLY AFFECTS CCR5- AND CXCR4-TROPIC HIV-1 INFECTION**

**Hannah L. Itell<sup>1</sup>, Julie M. Overbaugh<sup>2</sup>**

*<sup>1</sup>Fred Hutchinson Cancer Research Center, Seattle, WA, USA, <sup>2</sup>University of Washington, Seattle, WA, USA*

# R5-tropic HIV bottleneck during transmission



Longstanding question in the HIV field:

*What are the viral and host properties that drive preferential transmission of CCR5-tropic viruses?*



# SLC35A2 is associated with R5-tropic infection

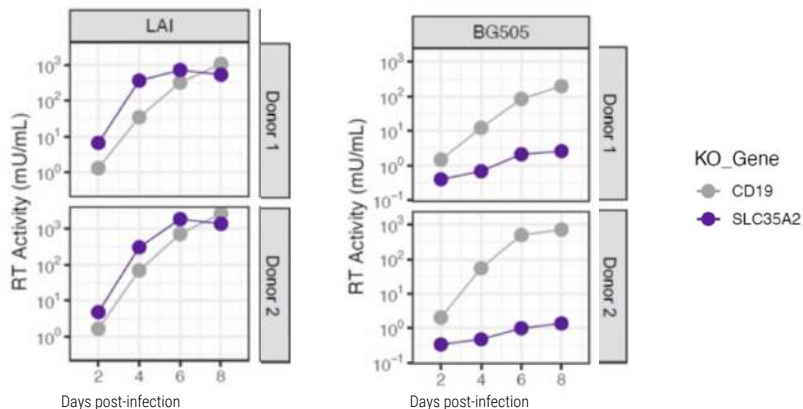
CRISPR KO screen for HIV restriction factors comparing R5-tropic vs. X4-tropic HIV



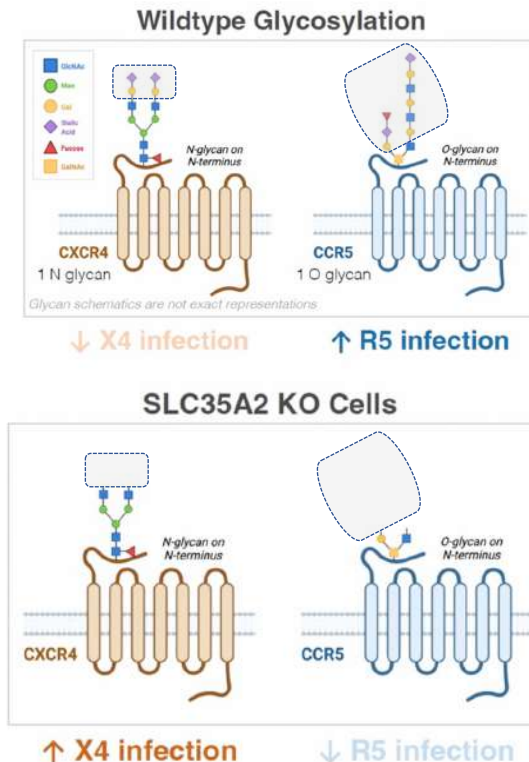
SLC35A2 KO has consistent, opposite effects on X4 vs. R5 HIV (primary CD4+ cells)

CXCR4-tropic  
↑ infection

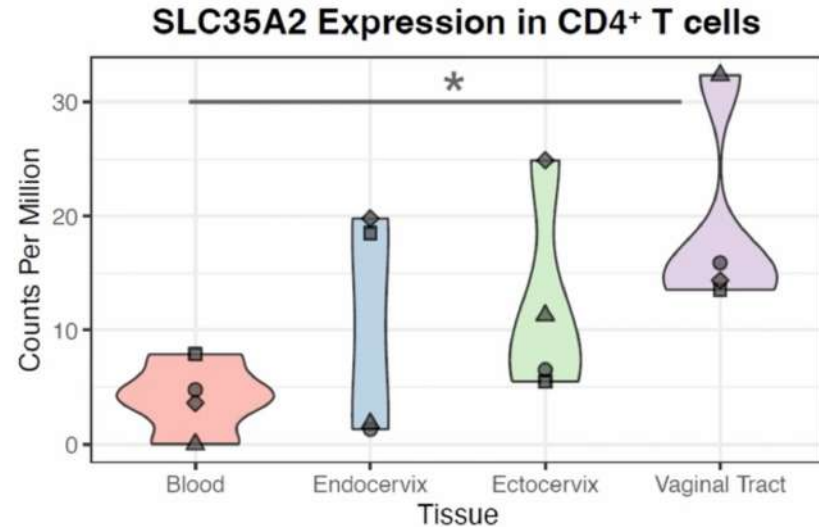
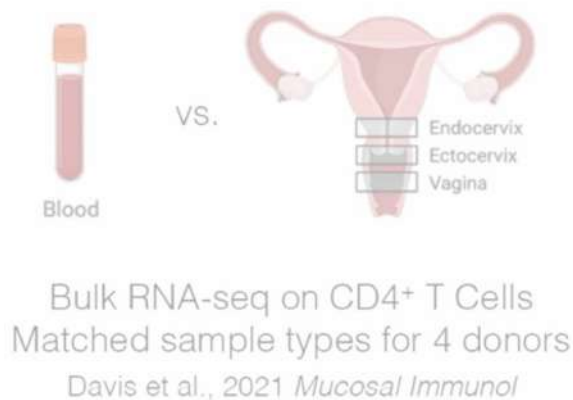
CCR5-tropic  
↓ infection



SLC35A2 encodes a transporter of UDP-galactose whose inactivation causes truncated glycans



# SLC35A2 is more highly expressed in the lower Female Reproductive Tract than in blood



Increased SLC35A2 → Increased glycosylation → R5 selection at transmission sites

# Conclusions

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- Underappreciated role for host cell glycans on the infection of different tropic-HIV strains
  - Wildtype glycosylation promotes R5 infection while hindering that of X4
  - Putative role of SLC35A2, a gene required for normal glycosylation, which encodes a transporter of UDP-galactose. Its inactivation causes truncated glycans.
  - Wildtype glycosylation may be even more pronounced in the genital tract due to elevated levels of SLC35A2, contributing to R5 selection at transmission sites
- The differential impact of host cell glycosylation on X4 and R5 viruses may therefore largely drive R5 selection during HIV transmission.

# Gene/Cell Therapies



## Oral Abstract Session-10 IMMUNOPATHOGENESIS AND VACCINES

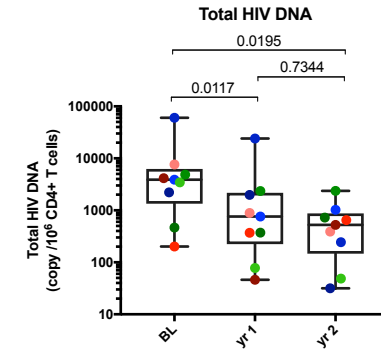
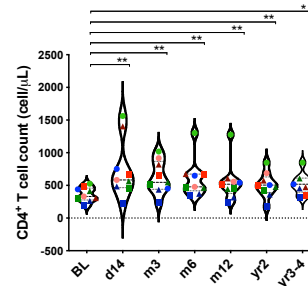
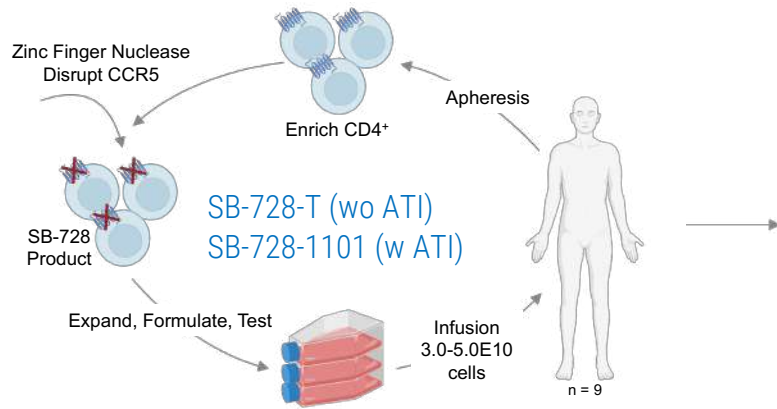
#182

### **SINGLE INFUSION OF STEM LIKE CCR5-MODIFIED CD4 T CELLS PROVIDE LONG-TERM HIV CONTROL**

**Ana B. Enriquez**<sup>1</sup>, Ashish Arunkumar Sharma<sup>1</sup>, Joumana Zeidan<sup>2</sup>, Gary Lee<sup>3</sup>, Slim Fourati<sup>1</sup>, Khader Ghneim<sup>1</sup>, Gabriela Sanchez<sup>1</sup>, Francesco Procopio<sup>4</sup>, Robert Balderas<sup>5</sup>, Nicolas Chomont<sup>6</sup>, Dale Ando<sup>7</sup>, Steven G. Deeks<sup>8</sup>, Rafick P. Sékaly<sup>1</sup>, Rémi Fromentin<sup>9</sup>

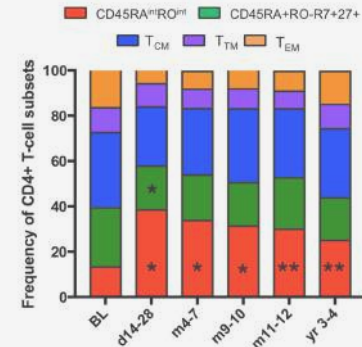
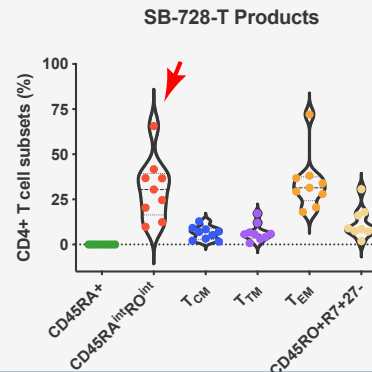
<sup>1</sup>Emory University, Atlanta, GA, USA, <sup>2</sup>CellCarta, Montreal, QC, Canada, <sup>3</sup>Senti Biosciences, San Francisco, CA, USA, <sup>4</sup>Lausanne University Hospital, Lausanne, Switzerland, <sup>5</sup>BD Biosciences, San Diego, CA, USA, <sup>6</sup>Université de Montréal, Montréal, Canada, <sup>7</sup>Consultant, Walnut Creek, CA, USA, <sup>8</sup>University of California San Francisco, San Francisco, CA, USA, <sup>9</sup>Centre de Recherche du CHUM, Montreal, QC, Canada

# Autologous CCR5-modified T cells



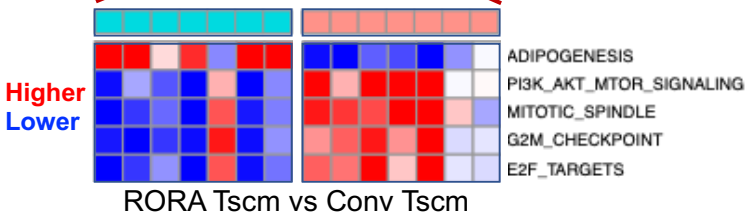
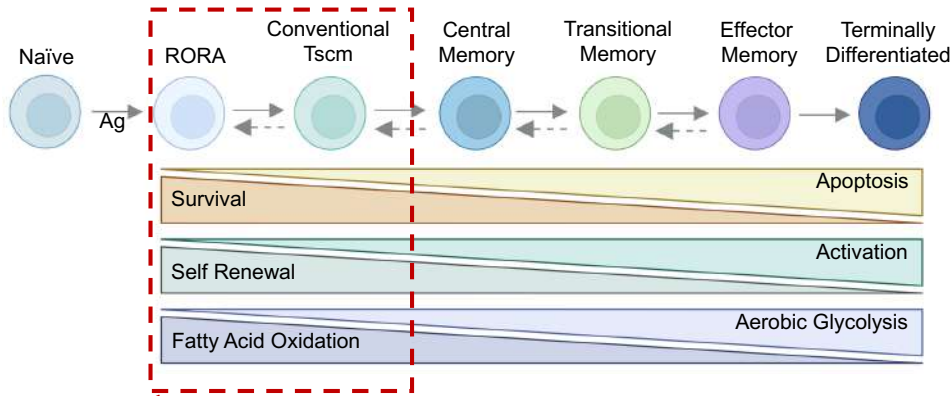
What is the phenotype of CD4 T cells?

Novel CD4 CD45RA<sup>int</sup>RO<sup>int</sup> (RORA) population is enriched post-infusion

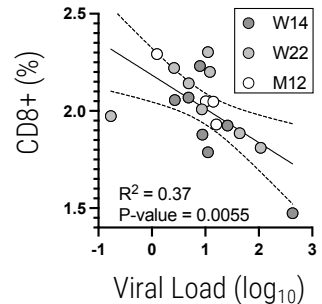
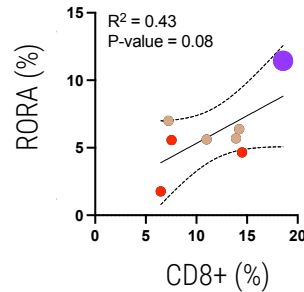
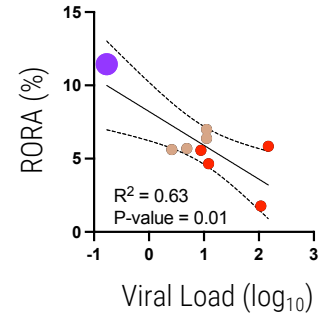
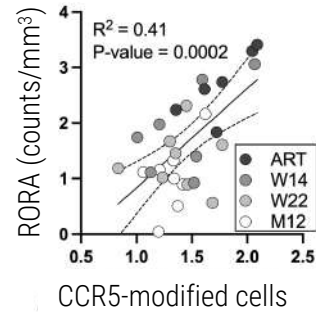


RORA cells persist up to 4 years post-infusion

# RORA cells are distinct from conventional T stem cell memory subsets

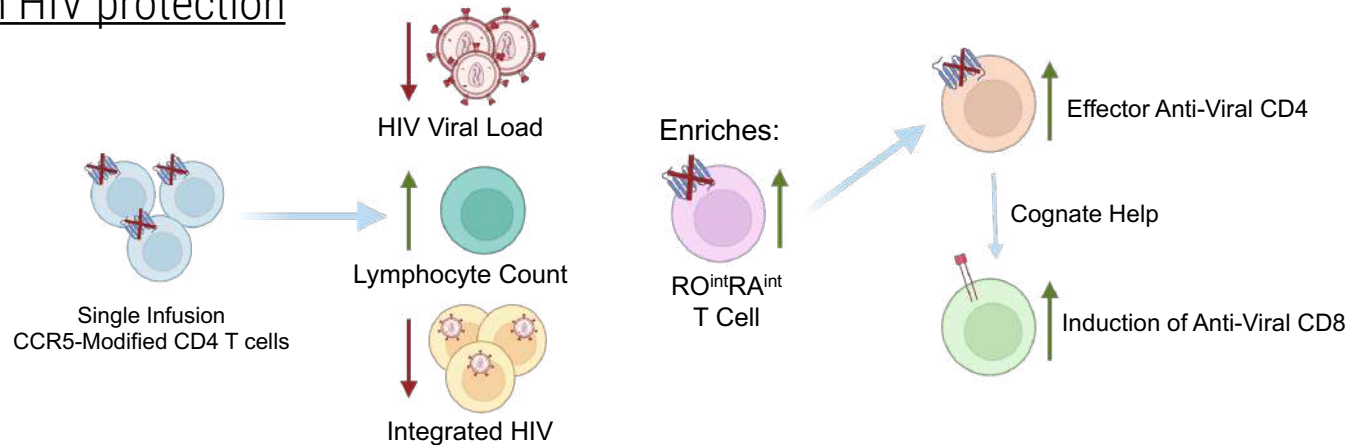


## Can RORA cells provide protection in absence of ART?



# Conclusions

- Single infusion of CCR5-modified T cells enriches a novel RORA CD4 T cell population:
  - Have a stem-like phenotype (innately more “quiescent”)
  - Correlate with CCR5-modified T cells
  - Can differentiate into effector cells that correlate with reduced viral load and effector CD8 T cells (in absence of ART)
  - Confer long-term HIV protection



# Distinguishing 'self' from 'non-self' DNA

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PLENARY-03 WEDNESDAY PLENARY SESSION

#037

**HOW THE HUSH COMPLEX PROTECTS YOUR GENOME FROM RNA-DERIVED  
RETROELEMENTS**

**Paul J. Lehner**

*Cambridge University, Cambridge, United Kingdom*



# Retrotransposition

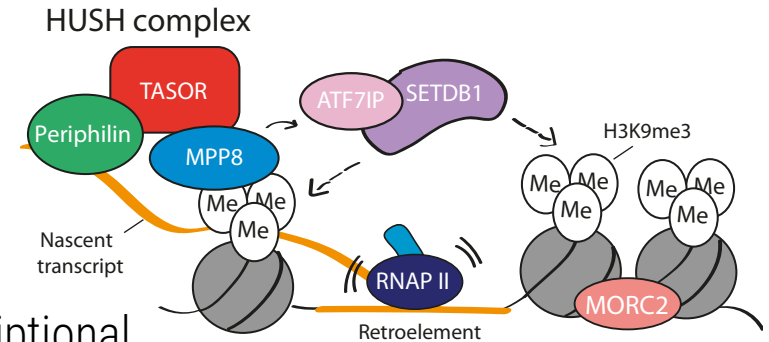
- Reverse Transcriptase: RNA  $\rightarrow$  cDNA  $\rightarrow$  subsequent genome integration
- 40% of the human genome are retroelements (retroviruses/ retrotransposons)
- Retrotransposition is therefore tolerated, but needs to be closely regulated

increases genome diversity and resilience



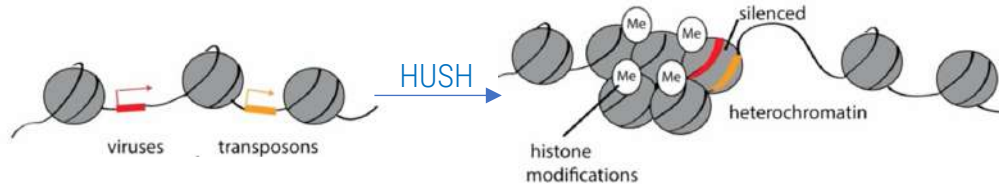
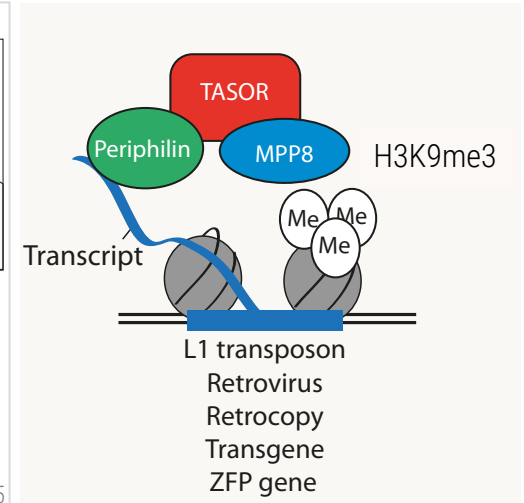
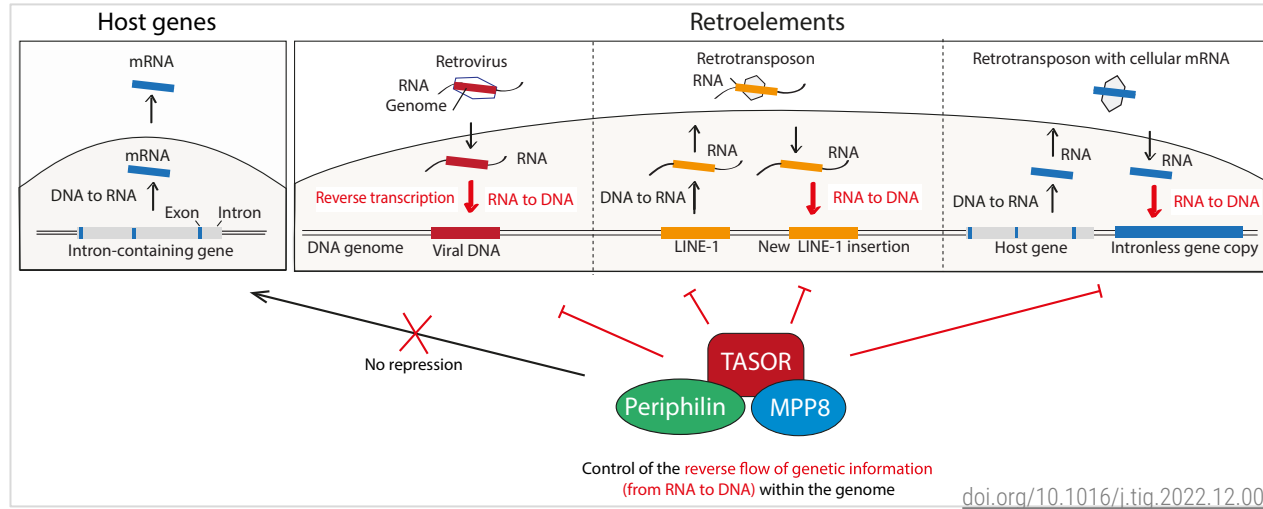
invasion from foreign, RNA-derived DNA ( eg HIV)

- 'HUSH' (Human Silencing Hub): epigenetic transcriptional repressor complex which identifies and silences invading transgenes
  - It defends the genome from retroelement attack from outside the cell i.e. retroviruses (including HIV) and from within the cell (LINE1 retrotransposons)



# How does HUSH discriminate 'self' from 'non-self' genomic DNA?

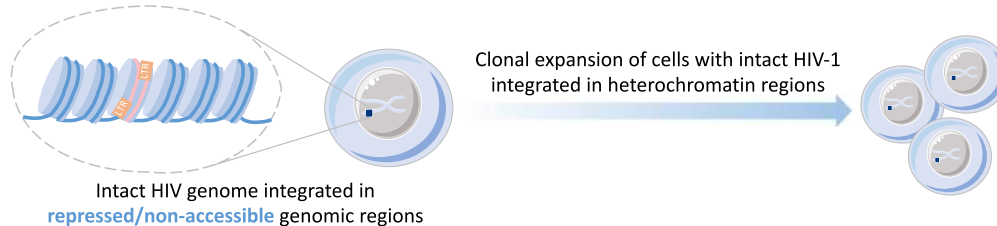
- HUSH recognizes 'intronless' DNA → retroelements lack non-coding introns acting (~PAMPs)
- cDNA > ~1.5Kb, rich in adenine, and transcriptionally active



# Biological relevance

- Novel component of the innate immunosystem → immunosurveillance of the genome, a compartment not thought to be accessible to the immune system (no cell killing!)
- Major therapeutic potential (beyond fundamental biological importance):
  - Strategies to express genes for a wide range of purposes have, somewhat unwittingly, been a battle against HUSH
  - HUSH inhibition has the potential to dramatically improve gene expression, and to release neo-antigens for cytotoxic T-lymphocyte recognition for immunotherapy
  - HIV?

- *Elite controllers*
- *Long-term ART*



Enrichment of the repressive histone feature H3K9me3 at intact-HIV integration sites

Jiang *et al.* Nature 2020  
Lian *et al.* Cell Host and Microbes 2023

# Conclusions

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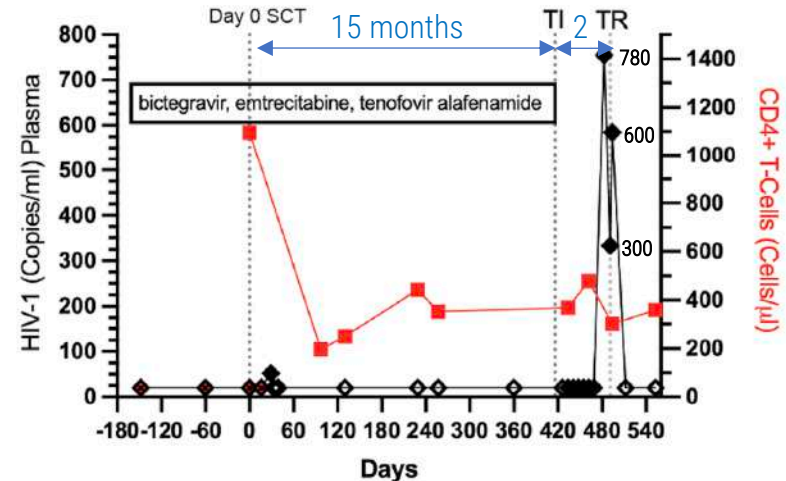
- HUSH → epigenetic transcriptional repressor complex which silences invading DNA
  - HUSH defends the genome from retroelement attack from outside the cell i.e. retroviruses (including HIV) and from within the cell (LINE1 retrotransposons)
  - Unique RNA-dependent genome surveillance system linking transcription to epigenetic gene silencing, by recognizing 'intronless' DNA
  - Major therapeutic potential: improve gene expression to release neo-antigens for cytotoxic T-lymphocyte recognition for immunotherapy, and maybe HIV ...
- HUSH: “Molecular domestication” of retroviruses and retrotransposons

## In-depth virological and immunological characterization of HIV-1 cure after CCR5 $\Delta$ 32/ $\Delta$ 32 allogeneic hematopoietic stem cell transplantation

# Bonus

### #434 HIV-1 Host Reservoir Reactivation after a CCR5 $\Delta$ 32/32 Allogeneic Stem Cell Transplant

- AML; 10/10 match, CCR5 $\Delta$ 32
- Rapid full donor chimerism (in peripheral blood)
- Decrease in cell-associated DNA and RNA
- Decrease in ultrasensitive plasma viral load
- Rebounding viruses are CCR5-tropic
  - Residual R5-tropic HIV can persist in vivo even >1 year after SCT
  - Non clonal reactivation
- No increase in plasma HIV-associated antibodies
- No evidence of graft infection to date
- No data on tissues





*Thank you!*