

Abacavir Impairs an HLA-B*57:01-restricted CD8+ T Cell Response to an Immunodominant Epstein-Barr Virus Epitope

A. Lucas¹, V. Meyer-Pannwitt¹, E. McKinnon¹, S. Burrows², M. Rist², S. Leary¹, M. Lucas¹, S. Gaudieri^{1,4}, S. Mallal^{1,2,5} *E. Phillips¹⁻⁵ ¹Institute for Immunology & Infectious Diseases, Murdoch University, ²Royal Perth Hospital, ³Sir Charles Gairdner Hospital, ⁴University of Western Australia, ⁵PathWest, Perth, Western Australia, Australia

ABSTRACT

Background: Structural and functional studies show that abacavir (ABC) binds non-covalently to HLA-B*57:01 and alters the repertoire of peptide presented, some of which may re-stimulate memory CD8+ T-cells to cause ABC hypersensitivity. We questioned whether the binding of ABC to HLA-B*57:01 might also impair an HLA-B*57:01 restricted CD8+ T-cell anti-viral response. **Methods:** 52 putative B95-8 EBV strain HLA-B*57:01 restricted epitopes were identified using NetMHC3.2 (binding score < 400 nM). 7 healthy adult HLA-B*57:01+ donors were screened with EBV peptide pools followed by confirmatory ELISpot with individual EBV peptides and avidity testing to 0.001 mg/ml peptide. In addition, 4 HLA-B*57:01+ and 31 negative healthy donors were screened with 20mer peptides overlapping with 15 aa from EBNA3A, 3B, BZLF1 and BMLF1. Four short term lines were generated from 4 HLA-B*57:01+ ABC naive donors by pulsing PBMC with 20 mg/ml VSFIEFVGW for 1 hour, washing and then 9 days culture in RPMI-1640 media containing 10% FCS and 10% T-Stim media and 100 U/ml IL-2. The resulting cell lines contained 5% to 35% peptide specific CD8+ T-cells. Cell lines or PBMCs taken from HLA-B*57:01+ donors were tested for peptide specific responses \pm ABC at a range of concentrations previously shown not to affect cell viability, by intra-cellular cytokine re-stimulation assays (ICS) or ELISpot. Peptide concentrations of 0.01, 0.1, 1 and 10 mg/ml were used in the ICS assay and 1 mg/ml in the ELISpot assay. Expression of interferon- γ in the presence of increasing concentrations of ABC relative to baseline (no ABC) and the respective ratios were analyzed using a linear mixed effects model with nesting for multiple peptide concentrations per individual. **Results:** Four HLA-B*57:01 restricted epitopes were confirmed of which 2 were independently detected using overlapping peptides: VSFIEFVGW from EBNA3A and VAAHPEIGAW from BMLF1. Responses to VSFIEFVGW were of high avidity and detectable in all 11 donors confirming it as an immunodominant peptide. IFN- γ responses to VSFIEFVGW were reduced relative to baseline with increasing ABC concentrations using both ICS and ELISpot assay. **Conclusions:** A new immunodominant HLA-B*57:01 restricted EBV epitope was identified. ABC was shown to impair the CD8+ T cell response to this epitope in a dose dependent manner, suggesting that drugs that bind non-covalently to HLA molecules may modulate immune responses.

Background

- ABC causes a drug hypersensitivity syndrome which is known to be CD8+T cell dependent and specifically restricted through the class I allele HLA-B*57:01.
- More recently the crystal structure of ABC-peptide-HLA-B*57:01 has been resolved and ABC has been shown to rapidly and non-covalently bind to HLA-B*57:01 (Figure 1 & 2; [1,2]) and alter the repertoire of peptides presented from predominantly aromatic hydrophobic amino acids such as tryptophan (W) and phenylalanine (F) at the C-terminal position to aliphatic hydrophobic amino acids such as isoleucine(I) and valine(V) (Table 1; [1-3]). This interaction essentially creates a new HLA allele creating an allograft type reaction which phenotypically manifests as ABC hypersensitivity.
- We have previously demonstrated that ABC reactive memory CD8+ T cells can be detected in ABC unexposed healthy HLA-B*57:01 positive donors and that ABC reactive CD8+ T cells can be expanded from sorted naive and memory T cells from these donors without the need for CD4+ T cell help supporting a potential heterologous immunity model for ABC hypersensitivity whereby a newly presented self-peptide is cross-recognized by a pre-existing memory response to a prevalent antigen.
- We aimed to determine whether the binding of ABC to HLA-B*57:01 has the potential to impact on a specific HLA-B*57:01 restricted CD8+ T-cell antiviral response.

RESULTS

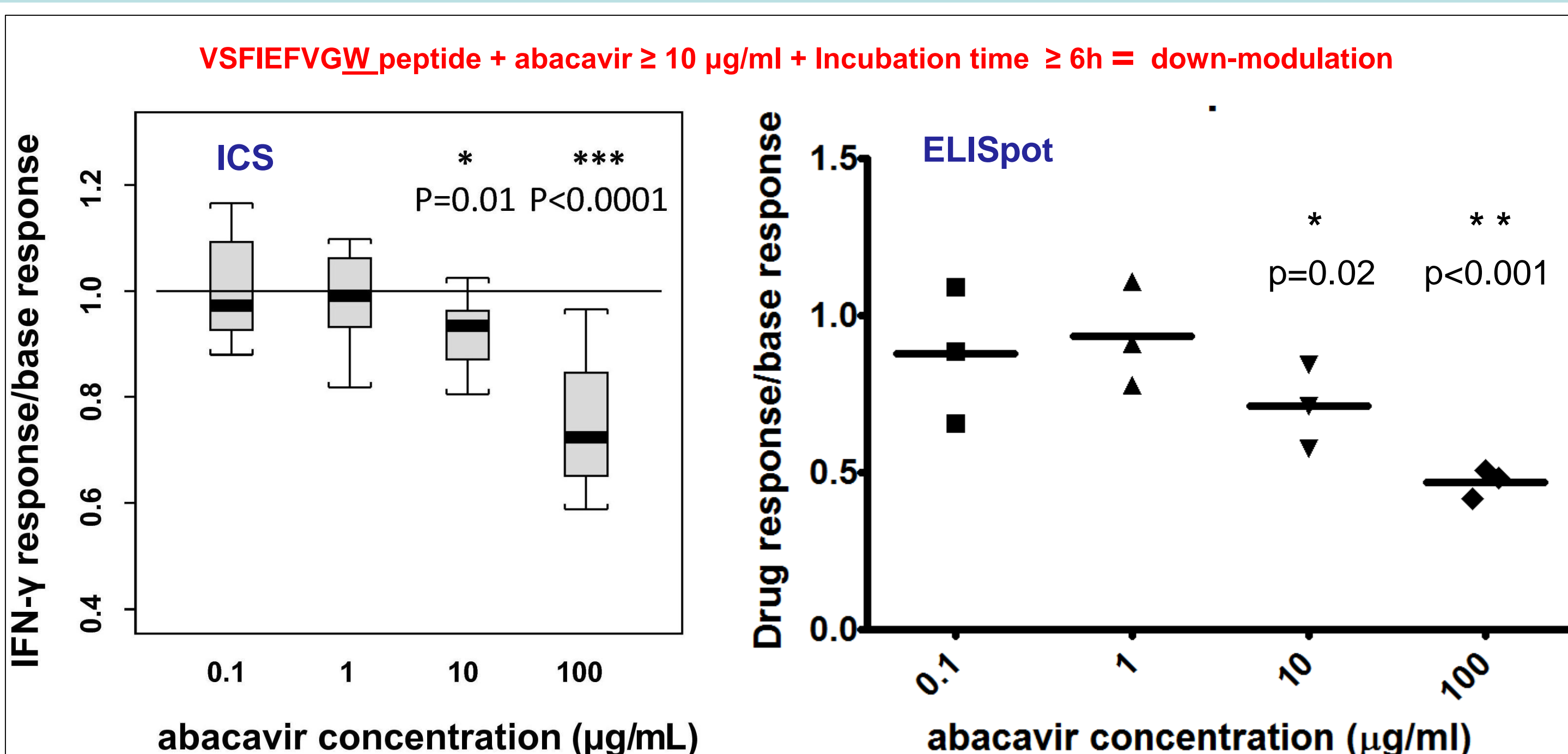


Figure 3 VSFIEFVGW expanded cell lines from B*57:01+ donors (n=4) were re-stimulated with combinations of VSFIEFVGW (0 – 10 µg/ml) and abacavir (0 – 100 µg/ml) and CD8+/IFN- γ T-cells determined by flow cytometry. Responses to treatment have been plotted as ratio of the no-drug control treatments and analysed using a mixed effects model.

Figure 4 B*57:01+ donor PBMC (n=3) were re-stimulated with 1 µg/ml VSFIEFVGW and abacavir (0 – 100 µg/ml) and IFN- γ T-cells determined by IFN- γ ELISpot assay. Responses to treatment have been plotted as ratio of the no-drug control treatments and analysed using a paired Students t-test.

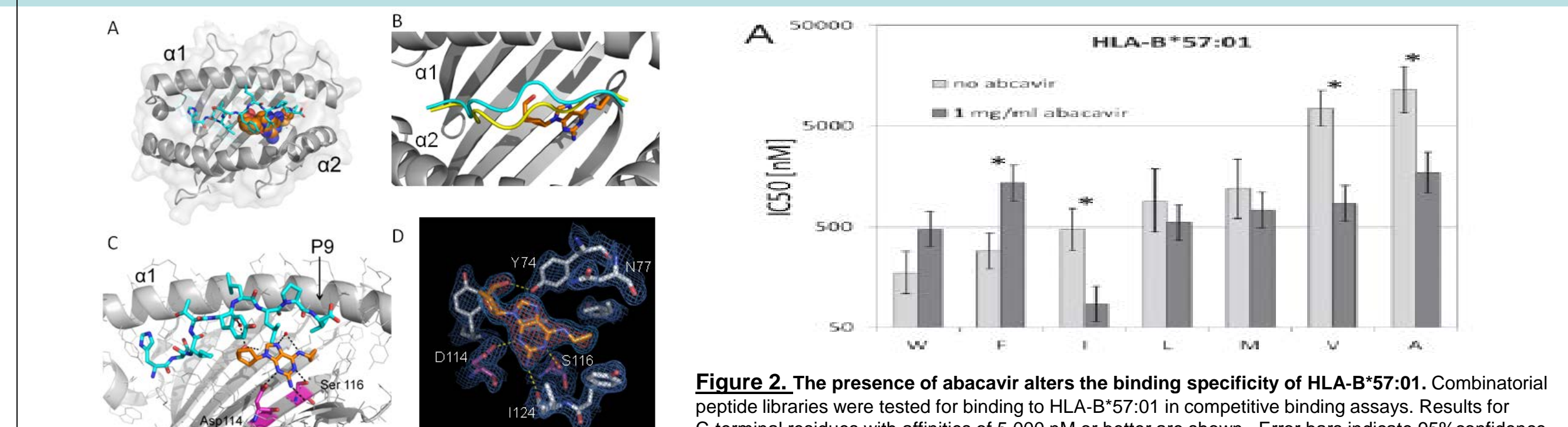


Figure 1. Identification of abacavir binding to HLA-B*57:01

The crystal structure of the abacavir:peptide:MHC complex. A. Cartoon diagram of HLA-B*57:01 in gray, peptide HSITYLLPV in cyan and abacavir shown as spheres. B. drug binding influences the peptide backbone conformation by shifting the main chain. Peptide bound to abacavir and HLA-B*57:01 shown in cyan. Peptide bound in the absence of abacavir is shown in yellow C. H bond interactions (black dashes) with peptide and the antigen-binding cleft of HLA-B*57:01. D. experimental electron density corresponding to abacavir in an Fo-Fc difference map contoured at 5 σ (red mesh) following molecular replacement. Blue mesh depicts the final 2Fo-Fc electron density map of abacavir in the antigen-binding cleft of HLA-B*57:01 (contour level 1.5 σ)

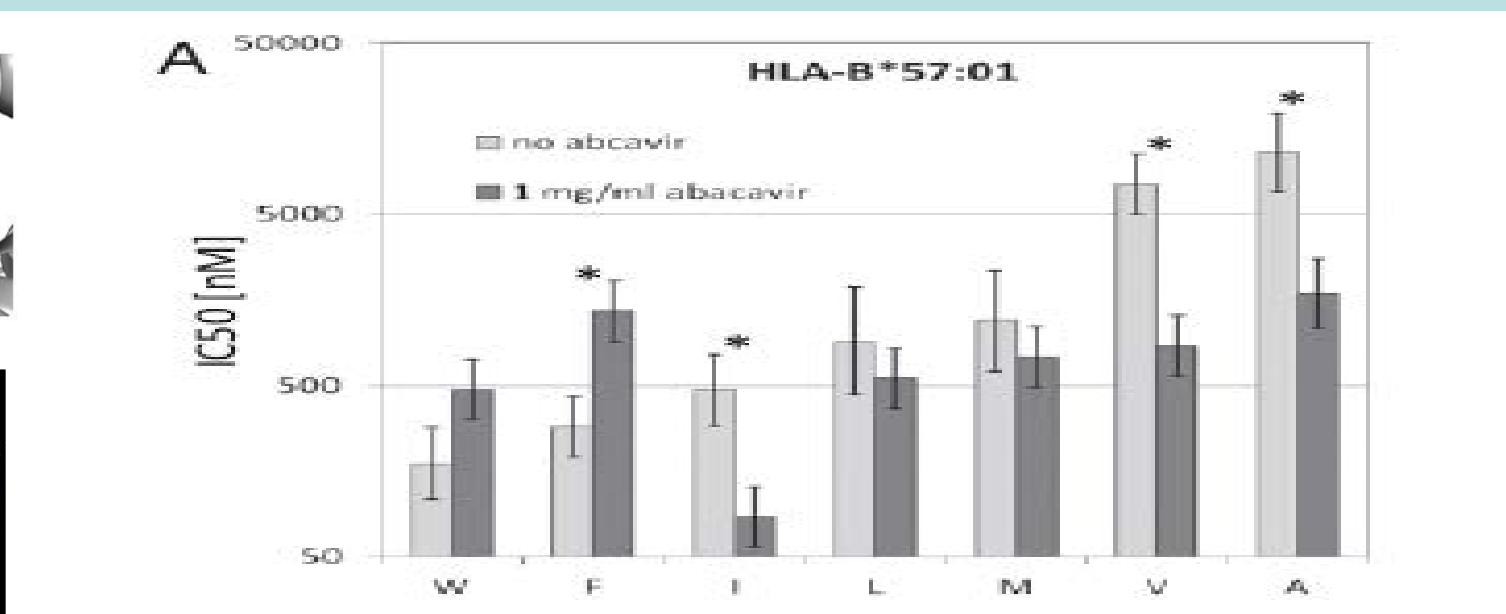


Figure 2. The presence of abacavir alters the binding specificity of HLA-B*57:01. Combinatorial peptide libraries were tested for binding to HLA-B*57:01 in competitive binding assays. Results for C-terminal residues with affinities of 5,000 nM or better are shown. Error bars indicate 95% confidence intervals for the mean, an asterisk * indicates a significantly different IC50 values in the presence vs. absence of abacavir (p < 0.001, two-tailed Student's t-test comparing log(IC50) values).

C-terminal residue	Abacavir		P value*
	Untreated	Treated	
W	218	↓ 95	2E-05
F	89	↓ 31	1E-03
Y	42	33	0.38
L	25	25	0.10
I	14	↑ 45	1E-09
M	6	7	0.39
V	0	↑ 15	5E-07

Table 1. Distribution of C-terminal residues in peptides uniquely presented by abacavir treated and untreated cells. * Two-tailed Fishers exact test. All C-terminal residues for which two or more peptides were identified are listed.

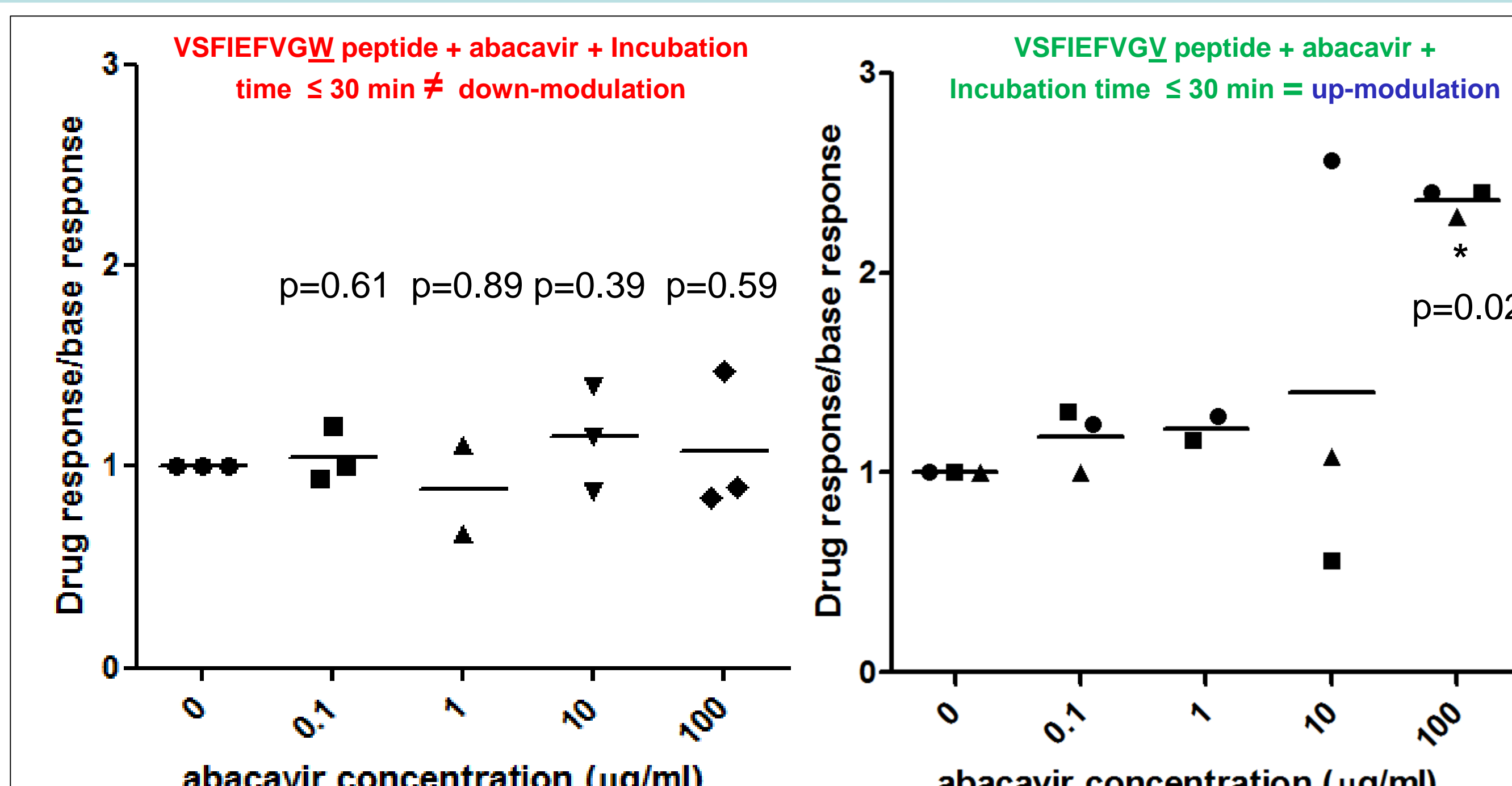


Figure 5 B*57:01+ donor PBMC (n=3) were re-stimulated with 1 µg/ml VSFIEFVGW and abacavir (0 – 100 µg/ml) for 30 minutes and then washed and IFN- γ T-cells determined by IFN- γ ELISpot assay. Responses to treatment have been plotted as ratio of the no-drug control treatments and analysed using a paired Students t-test.

Figure 6 B*57:01+ donor PBMC (n=3) were re-stimulated with 10 µg/ml VSFIEFVGW and abacavir (0 – 100 µg/ml) for 30 minutes and then washed and IFN- γ T-cells determined by IFN- γ ELISpot assay. Responses to treatment have been plotted as ratio of the no-drug control treatments and analysed using a paired Students t-test.

Methods

Screening for HLA risk allele restricted CD8+ memory T-cell responses

To identify prospective HLA B*57:01 epitopes from EBV (strain B95-8), we utilised the NetMHC 3.2 Server (NetMHC-3.0: accurate web accessible predictions of human, mouse and monkey MHC class I affinities for peptides of length 8-11. Lundegaard C, et al. Nucleic Acids Res. 1;36(Web Server issue):W509-12. 2008) to compile a list of peptides with binding affinities < 400 nM. 52 EBV derived peptides were synthesized (Mimotopes, Melbourne, Australia) and 18 B*57:01+ donors were screened to identify the immunodominant response, VSFIEFVGW.

Generation of peptide specific T-cell lines

Short term lines were generated from cryopreserved B*57:01+ donor PBMC. Two to five $\times 10^6$ cells were incubated with 20 µg/ml of virus specific peptide and incubated for 1 hour at 37°C in a CO₂ incubator, washed and then cultured for 3 days in stimulating media (SM) consisting of RPMI-1640 media containing 10% FCS, 10% T-Stim supernatant, 50 U/ml IL-2 (Chiron Corp., USA), 2 mM l-glutamine, 1 mM Na-pyruvate, 100U/ml penicillin and 100 µg/ml streptomycin (Life Technologies, Mulgrave, Australia). On day 4, SM was supplemented with IL-2 at final concentration of 100 IU/mL. Cultures were fed or split as required every 2 – 3 days up to day 9.

Assessment of CD8+ T-cell responses following a 6h peptide re-stimulation assay

Aliquots of peptide specific short term lines were made into round bottom 96 well plates (Becton Dickinson,) and re-stimulated for 6 hours with final concentration of 0.1 – 10 µg/ml peptide in the presence or absence of increasing concentrations of abacavir (GSK, Brentford, UK; 0.1 – 100 µg/ml final concentration) in F10 media consisting of RPMI-1640 media with 10% FCS, 2 mM l-glutamine, 1 mM Na-pyruvate, 100U/ml penicillin and 100 µg/ml streptomycin (Life Technologies), supplemented with 20 IU/ml IL-2. Brefeldin A (Sigma-Aldrich, St Louis, USA) was added for the final 4 hours of the incubation to a final concentration of 20 µg/ml. The plates were washed by the addition of 200 µl ice cold PBS containing 10% FCS and cells pelleted by centrifugation at 600g for 5 minutes. The supernatant was discarded by flicking, the plate was placed on ice and anti-CD4-PE and anti-CD8-APC-H7 added and incubated for 15 minutes. The cells were fixed and permeabilized using Intraperp following manufacturers directions and then anti-IFN- γ -Alexa 488 was added for 15 minutes at room temperature. Following washing in re-suspension in PBS containing 10% FCS the samples were analysed using a Gallios cytometer (Beckman Coulter, Atlanta, USA).

IFN- γ ELISpot assay

Interferon- γ ELISpot assays were performed with the following modifications. ELISpot plates (MAIPS4510; Millipore) were coated with 15 µg/ml anti-IFN- γ antibody (Mabtech) and used to assay $1 - 2 \times 10^5$ viable PBMC in duplicate were exposed to B*57:01 restricted peptide (VSFIEFVGW) or variant peptide (VSFIEFVGW) (1 – 10 µg/ml final concentration) in the presence or absence of ABC (0.1 – 100 µg/ml final concentration). PBMC were exposed to peptides \pm ABC using 2 different protocols. Firstly for a 30 minute pulse followed by a wash with 30 volumes of ice cold RPMI-1640, centrifugation at 300g for 10 minutes, and re-suspension in F10 media supplemented with 20 IU/ml IL-2 and transfer to the ELISpot plate, or secondly by incubation with peptides \pm abacavir for the entire overnight the ELISpot assay. ELISpot plates were incubated overnight at 37°C in a humidified 5% CO₂ incubator before processing to detect IFN- γ secretion. Positive spots were enumerated using an automated plate reader (AID, Strassberg, Germany).

CONCLUSIONS

- Four HLA-B*57:01 restricted EBV epitopes were characterized using a combination of bioinformatic and functional approaches with two of the epitopes confirmed by an overlapping peptide screening approach.
- A CD8+ T-cell response to an immunodominant epitope VSFIEFVGW from EBNA3A was impaired by at least 6 hours of incubation with pharmacological concentrations of ABC.
- This ABC-induced down-modulation occurred in a dose dependent manner, suggesting that drugs that bind non-covalently to HLA molecules may modulate immune responses.
- In keeping with the altered peptide repertoire model, ABC incubation of 30 minutes or less increased CD8+ T cell responses to a variant of VSFIEFVGW, with a valine (V) substituted for a tryptophan (W) at the C-terminal position (VSFIEFVGW). This is consistent with recent biochemical and structural studies showing non-covalent binding of ABC to HLA-B*57:01 restricted epitopes with a W to V substitution at the C-terminal position in the presence of ABC.
- These findings suggest that small molecules such as ABC may non-covalently bind HLA molecules and result in up or down modulation of established functional HLA-restricted immune responses.

References

- Ostrov D, Grant B, Pompeu Y, Sidney J, Harndahl M, Southwood S, Oseroff C, Lu S, Jakoncic J, Augusto C, de Oliveira L, Mei H, Leming S, Shabanowitz J, English A, Wriston A, Lucas A, Phillips E, Mallal S, Grey H, Sette A, Hunt D, Buus S, Peters B. *Proc Nat Acad Sci* 2012; early edition Epub 29 May 2012.
- Iling PT, Vivian JP, Dudek NL, Kostenko L, Chen Z, Bharadwaj M, Miles JJ, Kjer-Nielsen L, Gras S, Williamson NA, Burrows SR, Purcell AW, Rossjohn J, McCluskey J. *Nature* 2012;486:554-8.
- Nocross M, Luo S, Lu L, Boyne M, Gomartelli M, Rennels A, Woodcock J, Margulies D, McMurtrey C, Vernon S, hildebrand W, Buchli R. *AIDS* 2012;26:F21-9.