



Public, private and non-specific antibodies induced by non-cytopathic viral infections

Mike Recher^{1*}, Lukas Hunziker², Adrian Ciurea³, Nicola Harris¹ and Karl S Lang¹

Lymphocytic choriomeningitis virus (LCMV) represents a useful experimental model of murine infection with a non-cytopathic virus, bearing resemblance to HIV and hepatitis C virus (HCV) infections in humans. Recent data from the LCMV model indicate that the humoral immune response that is induced by non-cytopathic viruses is far more complex than previously appreciated. LCMV-induced IgG production is largely polyclonal, with more than 90% of the antibody repertoire constituting non-relevant specificities. A delayed virusneutralizing antibody response is induced, including specificities directed not only against the parental LCMV-strain present in the host but also cross-specifically against LCMVvariants isolated from other hosts. These findings provide novel insights to aid our understanding of clinically relevant observations that are recorded following human infection with HIV, HCV and dengue viruses.

Addresses

¹ Institute for Experimental Immunology, University Hospital, Schmelzbergstrasse 12, CH-8091 Zürich, Switzerland

² University Hospital Basel, Department of Pneumology, Petersgraben 4, 4021 Basel, Switzerland

³ University Hospital Bern, Department of Rheumatology and Clinical Immunology, Inselspital, 3010 Bern, Switzerland

*e-mail: mike.recher@usz.ch

Current Opinion in Microbiology 2004, 7:426-433

This review comes from a themed issue on Host-microbe interactions: viruses Edited by Adriano Aguzzi

Available online 10th July 2004

1369-5274/\$ - see front matter © 2004 Elsevier Ltd. All rights reserved.

DOI 10.1016/j.mib.2004.06.008

Abbreviations

CTL cytotoxic lymphocyte (CD8+ T cell)

HCV hepatitis C virus

LCMV lymphocytic choriomeningitis virus

SAP SLAM(signalling lymphocyte activation molecule)-associated

protein

Introduction

Viruses can be broadly divided into those that are cytopathic to the host and those that are poorly or non-cytopathic. Cytopathic viruses — including poliovirus and vesicular stomatitis virus (VSV) — interfere with essential cellular processes, ultimately resulting in cellu-

lar death, and are capable of killing the host if the immune response cannot control viral replication in a timely fashion. This normally necessitates the rapid production of neutralizing antibodies because, although effective, cytolytic CD8⁺ T cell responses normally occur too late to prevent viral spread [1,2]. Cytopathic viruses are often classified into relatively few serotypes according to the specificity of the host's antibody response for surface glycoprotein antigens. However, it is now clear that such definitions are overly simplistic in light of the finding that a greater genetic variability often exists at other loci within the viral genome [3,4].

Poorly or non-cytopathic viruses, including murine lymphocytic choriomeningitis virus (LCMV), hepatitis C virus (HCV), HIV and also dengue virus, have evolved to replicate within host cells without interfering with those processes that are essential for cellular survival [5–7]. Instead, disease is largely caused by the host's own immune response, including CTL (cytotoxic lymphocyte)-mediated lysis of virus-infected cells [8] and chronic immune activation [9°,10]. Clearance of poorly or non-cytopathic viruses is usually mediated by CD8⁺ T cells, and is reliant upon the gain of lytic function by these cells, as demonstrated by the importance of molecules such as perforin [11], granzymes [12] and Fas ligand [13]. Yet many poorly or non-cytopathic viruses tend to persist, either as a consequence of their localisation in the periphery, as a consequence of the formation of CTL-escape viral mutants or as a result of viral-induced exhaustion of the CTL response [14-16]. Neutralizing antibodies, which are crucial for protection against cytopathic viruses, are usually detectable only at late time-points after infection with poorly or non-cytopathic viruses and are more prominent in situations of CD8+ T-cell non-responsiveness [17,18°,19,20]. Nevertheless, should a poorly or noncytopathic virus manage to escape CTL attack, the subsequent neutralizing antibody response becomes crucial for viral control. This can be demonstrated by the isolation of neutralizing antibody viral escape mutants at late time-points after infection of CD8^{-/-} mice [21–23].

Poorly or non-cytopathic RNA viruses are normally classified into different biological strains, genetic subtypes or genetic clades [24–26]. Importantly, replicating virus within one host should be regarded as a so-called 'quasispecies', reflecting a dynamic set of genetically distinct viral subtypes [27,28]. As a general rule, a greater number of viral serotypes can be distinguished for poorly

or non-cytopathic viruses than for cytopathic viruses; however, correlations between genetic subtypes, biological behaviour and neutralizing serotypes remain equivocal [29].

Neutralizing antibody-escape variants

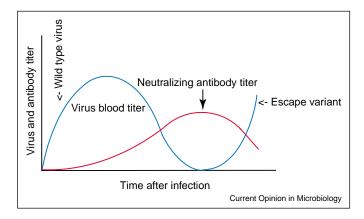
Despite their late appearance, neutralizing antibodies represent a very effective means of controlling persistent infections with poorly or non-cytopathic viruses. Indeed, studies of simian immunodeficiency virus (SIV) infection in macaques or LCMV infection of mice have demonstrated that the passive transfer of monoclonal neutralizing antibody before viral infection results in rapid viral clearance and protection from a productive infection [30,31]. Neutralizing antibodies can also act to prevent CTL exhaustion and the emergence of CTL-escape variants, by virtue of their ability to limit viral replication [32,33]. The formation of neutralizing antibody-escape variants can be demonstrated by the ability of the host serum to neutralize the parental viral strain (used to inoculate the host) but not virus recovered from the host at later time-points [21]. This finding presents a great concern for clinical diagnosis of chronic viral infections; most current technologies use monoclonal antibodies directed against the parental viral strain for viral detection, and therefore do not account for the possible emergence of antibody-escape variants [34].

The emergence of neutralizing antibody-escape variants has been most widely studied in LCMV infection of murine hosts. Using this model, experiments can be performed in which pressure on the virus to develop neutralizing antibody-escape variants is enhanced through infection of CD8^{-/-} mice [21]. These mice exhibit a high initial rate of LCMV replication as a consequence of the absent CTL response; however, between days 40-60 post-infection, neutralizing antibodies are generated and blood virus titers drop, indicating viral control. In these mice, pressure on the virus to develop escape mutants is mainly provided by the neutralizing antibody response and not by CTL activity (because CD8⁺ T cells are missing). Accordingly, by day 80 post-infection, neutralizing antibody-escape variants can be subcloned from the blood of CD8^{-/-} mice, and these correlate with viral re-emergence (Figure 1). Such antibody-escape variants have been shown to possess acquired amino acid substitutions, clustered within three distinct regions of the surface glycoprotein, suggestive of a tertiary LCMV-glycoprotein structure in which these three regions combine to form one conformational antibody epitope [21]. However, this hypothesis awaits formal confirmation by the crystallization of the LCMVglycoprotein. Recent evidence demonstrates that HIV uses similar strategies in vivo to escape the pressure of neutralizing antibodies [35**]. Here, mutations primarily involved changes in N-linked glycosylation, suggesting a 'glycan shield' mechanism of neutralization escape, whereby selected changes in glycan packing prevent antibody but not receptor binding [35°].

Public and private antibody specificities

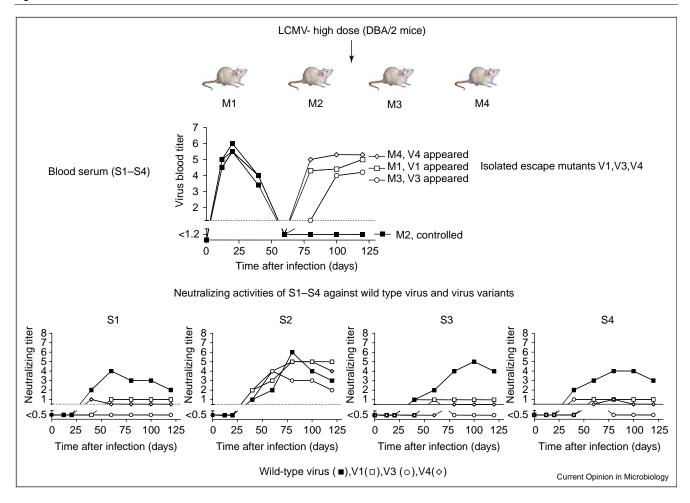
Neutralizing-escape viral variants can be isolated from CD8^{-/-} hosts, subcloned and used for infection of new hosts. In this situation, the new host invariably develops a neutralizing antibody response against the variant glycoprotein and the virus is usually controlled in a manner similar to the control of the wild-type variant in its original host — possibly resulting in the generation of further escape variants [21,36°]. This suggests that, within the original host, a given viral escape mutant does not manage to escape the genetically possible B cell repertoire, but only the current neutralizing antibody response. Should a new host be infected with a neutralizing-escape variant, subcloned from a carrier mouse, the new host generates antibodies that not only exhibit neutralizing activity against the escape variant that was used for inoculation, but also against the parental virus (which this host has never seen). This cross-specific antibody response is





The in vivo generation of LCMV neutralizing antibody-escape mutants in CD8+ T-cell-deficient mice.

Figure 2



Neutralizing antibody-escape mutants can also be induced in some inbred CD8+ T-cell-competent mice, if high viral doses of LCMV (strain WE) are used. In contrast to CD8^{-/-} mice, neutralizing-escape mutants are only induced in 75% of the cases. In mice with long-term controlled LCMV, serum activity has a broader cross-neutralizing activity (tested against virus-escape mutants arising in other mice) than in mice where virus re-emerges. Together, cross-specific neutralizing antibodies define a more 'public' or general neutralizing serotype. By contrast, neutralizing activity of a host that is specific for the inoculated strain defines the 'private' serotype (adapted from [36]).

usually of a lower titer and reflects a more 'general' or 'public' response. By contrast, the initial neutralizing antibody response against the inoculated strain is of a high-titer and reflects a more private antibody specificity (Figure 2). Public cross-reactive antibody specificities have also been described recently for HIV [37°].

Although all CD8^{-/-} mice develop a 'carrier' status following LCMV infection, a proportion of DBA/2 mice (which are CTL-competent, see later) that are infected with parental virus do not allow the development of neutralizing antibody-escape-variants (Figure 2). These mice invariably generate an antibody response that exhibits some neutralizing activity, directed not only against the parental virus, but also against viral strains isolated from littermates in whom neutralizing-escape variants did emerge. This cross-neutralizing response, reflecting public specificity, was typically lower in DBA/2 mice, where

escape variants emerged, indicating a crucial role of public specificities in long-term virus control. One possible explanation for this phenomenon is that, in a portion of LCMV infected hosts, the rapidly replicating virus acquires mutations and generates an array of quasi-species over time, with each new clone inducing a specific neutralizing antibody response. This possibility is supported by the observation that viral polymerases act in an error-prone manner, due to the absence of fidelity-editing functions, and thus generate many mutants over a relatively short time-period [38]. However, cross-neutralizing or 'public' antibody specificities often appear with the same kinetics as the so-called 'private' neutralizing antibody response [36°], indicating that the virus would have to be mutating at a rapid rate from the very beginning of the infection. But, in the absence of pressure from a neutralizing antibody response, the LCMV-glycoprotein appears to be resistant to mutations [36°]. Genetic reversions of acquired mutations back to wild-type conformations have been observed following the removal of immunological pressure for both LCMV and HIV [36°,39°°], suggesting that the parental virus strain represents a state of optimal replication fitness and is likely to be resistant to the acquisition of 'unnecessary' mutations. One also has to bear in mind that every mutational event can potentially decrease the replication fitness of the virus, and might therefore be undesirable. Indeed, experiments in which the rate of viral mutation was dramatically increased by the co-administration of a chemical mutagen led to a loss of replication-competent LCMV in vitro [40] and in vivo [41°], a situation termed 'error catastrophe'.

The rate of viral replication may also influence development of a 'public' neutralizing antibody response if, for instance, the presence of high antigen doses favours the induction of a B cell response [42] generating antibody cross-reactivity against both parental and escape-mutant viral strains. In CD8^{-/-} mice, both low- and high-dose LCMV infection results in high viral replication at early time-points, whereas, wild-type C57BL/6 mice mount such an effective CTL response that both low- and high-dose LCMV infection is rapidly controlled. Thus, a new model was required to directly investigate the influence of viral replication on the neutralizing antibody response.

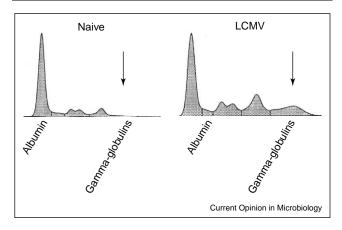
DBA/2 mice contain CD8⁺ T cells but mount a relatively weak CTL response, which, in practical terms, means that low-dose infection of DBA/2 mice is followed by limited viral replication, whereas high-dose LCMV infection quickly exhausts CTL function, resulting in a high level of viral replication [36°]. High-dose LCMV infection of DBA/2 mice results in a phenotype similar to that observed in CD8^{-/-} mice, with virus control occurring between days 40-60 post-infection and correlating with the appearance of neutralizing antibodies (Figure 2). In contrast to CD8^{-/-} mice, where neutralizing-escape variants develop in 100% of mice, only 75% of DBA/2 hosts allow re-emergence of virus in the form of escape variants. Escape variants from these DBA/2 hosts exhibited amino acid substitutions in the same region of the viral glycoprotein as described for variants isolated from CD8^{-/-} mice [36°]. The remaining 25% of DBA/2 hosts achieved long-term control of viral replication and developed an initial neutralizing antibody response that was of a more 'public' nature (Figure 2 and [36°]). This finding indicated that the cross-neutralizing or 'public' nature of the initial antibody response prevented the development or sufficient replication of — escape variants. Interestingly, serum taken from a subset of human patients infected with HIV also exhibits broad, or cross-reactive. neutralizing activity when tested against viral isolates obtained from other patients [18°]. Because the DBA/2 experimental model of LCMV infection uses genetically identical hosts, challenged with the same dose and strain

of virus, differences that are exhibited by individual mice (in terms of the repertoire of neutralizing antibodies produced) suggest that the development of an antibody response underlies stochastic mechanisms. This is reminiscent of the process of affinity maturation, which has also been reported to be, at least partially, a stochastic process [43,44]. Thus, it is likely that the development of a neutralizing antibody response by individual hosts not only varies considerably [21], but perhaps also reflects a process of affinity maturation that involves somatic hypermutation. As mentioned previously, low-dose LCMV infection of DBA/2 mice results in the development of an effective CD8⁺ T cell response [36°], which limits viral replication. Strikingly, DBA/2 mice infected with a low dose of LCMV were found to exhibit a more restricted or 'private' neutralizing antibody response [36°]. Together, these observations indicate that the development of a 'public' or 'private' neutralizing antibody response can be directly correlated to the level of virus replication.

Hypergammaglobulinemia

As discussed previously, hosts that exhibit long-term control of LCMV also appear to develop a more crossspecific or 'public' neutralizing antibody response. The common failure of cross-neutralising antibody formation can be partially explained by the finding that LCMV and HIV-specific CD4+ T cell responses (required for the production of neutralizing IgG [45]) are rapidly energised in the presence of massive virus replication [46–48]. CD4+ T-cell function might also determine the nature of the antibody response in another way. LCMV infection is characterised by an early polyclonal, replication-dependent and CD4⁺ T cell-dependent, hypergammaglobulinemia [49**,50]. By day 12 post-LCMV infection, total IgG levels are elevated 6-10-fold, and appear as a broad gammaglobulin peak in serum electrophoresis, suggesting a polyclonal nature (Figure 3). A similar hypergammaglobulinemia can be found associated with other

Figure 3



Serum electrophoresis of naïve serum and serum 12 days post-LCMV infection. The gamma-globulin fraction is built of immunoglobulins.

persisting infections, including chronic tuberculosis [51], malaria [52], HIV [53°] and HCV [54].

Cytopathic viral infections are not typically associated with an increased level of total serum immunoglobulins, although B-cell responses might be somewhat polyclonal in nature [49°,55°]. By contrast, LCMV infection results in the production of an IgG response in which more than 90% of the total IgG can be said to be non-specific. The dramatic polyclonal nature of the early IgG response that is induced by LCMV infection is completely dependent on the presence of virus-specific CD4⁺ T cells [50,56[•]]. It was recently demonstrated that these virus-specific CD4⁺ T cells recognize LCMV-derived peptides presented by MHC class II molecules that are present on the surface of the B cell, despite the majority of stimulated B cells exhibiting a non-relevant receptor specificity [49**].

The biological consequences of this apparent cognate T helper (Th) cell-dependent polyclonal B-cell response remain unclear [55°]. Antibodies that are protective against other viral species, for example, VSV, are not detectable at the peak of the LCMV-induced hypergammaglobulinemia (author's own unpublished data), nor are antibodies that are capable of neutralizing LCMV. By contrast, IgG specificities that are directed against certain auto-antigens and non-related pathogens are detectable by ELISA [49**]. Nevertheless, apparent autoimmune disease is rarely induced following LCMV infections, arguing against a direct pathophysiological role for those autoantibodies detected. CD4+ T cells are required for development of both the early polyclonal hypergammaglobulinemia and the later neutralizing antibody response, however, it remains to be determined whether subtle alterations in CD4+ T-cell function promote one type of antibody response over another. Interestingly, infection of mice lacking SAP (SLAM (signalling lymphocyte activation molecule)-associated protein, which is involved in X-linked lymphoproliferative disease), among other immunological alterations observed, resulted in increased activation of CD4+ T cells, correlating with an impaired LCMV-specific antibody response [57].

Cross-specific antibodies: protection or disease enhancement?

As discussed, in LCMV infection, the neutralizing antibody response can be classified as 'private' or 'public'; the generation of a public response clearly requiring a high level of viral replication and appearing to be a stochastic process. This classification system might be also be relevant to clinically important infections, such as dengue virus, where cross-specific antibodies have been found associated with severe hemorrhagic disease following secondary infection [57,58]. Although severe disease after secondary dengue virus infection is a complex process, it is usually associated with enhanced viremia [59]. Interestingly, dengue cross-specific antibodies can either be

cross-protective (early after primary infection [57,60°]) or disease-enhancing, possibly depending on cross-neutralizing affinity. If cross-neutralizing titers are high enough, secondary dengue viremia is expected to be lower and disease milder [60°]. However, low cross-neutralizing titers may enhance dengue virus titers after secondary infection, due to better virus delivery to macrophages or endothelial cells via Fc-Receptors (receptor binding IgG antibodies via the constant domain). Antibody-enhanced virus-replication, depending on the particular virus studied, seems to involve not only accelerated delivery via Fc-receptors but also complement-components, as well as suppression of cellular antiviral genes by the replication of viruses entering cells via antibodies [61]. Low cross-neutralizing antibody titers could also allow the in vivo formation of dengue neutralizing antibody-escape mutants [57].

In addition, cross-neutralizing antibodies could potentially provide protection against unrelated pathogens [62°]. Indeed, antibody responses induced by challenge with Escherichia coli have been shown to provide protection against Haemophilus influenzae-induced meningitis [63]. For potential antibody-based HIV vaccines, it will be important to understand the mechanisms that result in the formation of broad or cross-neutralizing antibodies, especially with regard to the rapidly changing neutralizing epitopes [18]. Conversely, polyclonal B-cell activation might generate a potentially harmful repertoire of IgG specificities that could be potentially auto-reactive, thereby enhancing the risk of auto-immunity or immune complex disease [64,65]. Autoimmune thrombocytopenia is a common complication of HIV infection in humans [66], and antibody-dependent autoimmune haemolytic anemia has been described following LCMV infection of some mouse strains [67]. However, autoantibodies following HIV infection were not found to be associated with clinical autoimmune manifestations [68], indicating that auto-reactive antibodies may often be of a low affinity or avidity. Another potential biological consequence of polyclonal B-cell activation is that non-specific B cells might compete with virus-specific B cells for space, survival factors or access to T-cell help. Recent data obtained from HIV infected patients [53°], as well as data obtained from ongoing LCMV experiments in our laboratory, demonstrate that competition might well occur between B cells that bear unrelated or virus-specific specificities.

Conclusions

Dissecting the complex nature of the antibody response induced by poorly or non-cytopathic viruses is crucial to our understanding of how to manipulate this response for the benefit of the host. The exact nature and determinates of the antibody response — including any requirement for CD4⁺ T cells in regulating the 'private' versus 'public' nature of the response, and the biological consequence of viral-induced hypergammaglobulinemia — might reveal novel mechanisms that are used by viruses for immune

evasion. A full understanding of such mechanisms will be particularly important for the generation of new HIV vaccines that are capable of inducing both protective CTL and neutralizing-antibody responses.

Acknowledgements

We thank the Institute for Clinical Chemistry, University of Zürich, Switzerland for performing serum electrophoresis. This work was supported by: EU-project QLK-2000-01476 on combined immune and gene therapy of chronic hepatitis.

References and recommended reading

Papers of particular interest, published within the annual period of review, have been highlighted as:

- · of special interest
- •• of outstanding interest
- Thomsen AR, Nansen A, Andersen C, Johansen J, Marker O, Christensen JP: Cooperation of B cells and T cells is required for survival of mice infected with vesicular stomatitis virus. Int Immunol 1997, 9:1757-1766.
- Diaz-Ortega JL, Pontes-Gonzalez E, Solano-Mejia BV, Zarate-Aquino ML, Camacho-Amor ML, Chavez-San Juan R: [Immune response to poliovirus]. Bol Med Hosp Infant Mex
- Charan S, Hengartner H, Zinkernagel RM: Antibodies against the two serotypes of vesicular stomatitis virus measured by enzyme-linked immunosorbent assay: immunodominance of serotype-specific determinants and induction of asymmetrically cross-reactive antibodies. J Virol 1987, 61:2509-2514
- Crainic R, Kew O: Evolution and polymorphism of poliovirus genomes. Biologicals 1993, 21:379-384.
- Stitz L: Persistent virus infections in studies of the immune response. Behring Inst Mitt 1991: 231-237.
- Nakao S, Lai CJ, Young NS: Dengue virus, a flavivirus, propagates in human bone marrow progenitors and hematopoietic cell lines, Blood 1989, 74:1235-1240.
- O'Sullivan MA, Killen HM: The differentiation state of monocytic cells affects their susceptibility to infection and the effects of infection by dengue virus. J Gen Virol 1994, 75:2387-2392.
- Zinkernagel RM: Immunity, immunopathology and vaccines against HIV? Vaccine 2002, 20:1913-1917.
- Douek DC: Disrupting T-cell homeostasis: how HIV-1 infection 9. causes disease. AIDS Rev 2003, 5:172-177

This review summarizes how HIV-associated CD4⁺ T-cell depletion is not likely to be effected solely by HIV-1-mediated killing but also by chronic immune activation as a central factor in HIV-1 pathogenesis.

- Hazenberg MD, Hamann D, Schuitemaker H, Miedema F: T cell depletion in HIV-1 infection: how CD4+ T cells go out of stock. Nat Immunol 2000, 1:285-289.
- 11. Kagi: Cytotoxicity mediated by T cells and natural killer cells is greatly impaired in perforin-deficient mice. *Nature* 1994, **369**:31-37.
- 12. Zajac AJ, Dye JM, Quinn DG: Control of lymphocytic choriomeningitis virus infection in granzyme B deficient mice. Virology 2003, 305:1-9.
- Kagi D, Ledermann B, Burki K, Zinkernagel RM, Hengartner H: Molecular mechanisms of lymphocyte-mediated cytotoxicity and their role in immunological protection and pathogenesis in vivo. Annu Rev Immunol 1996, 14:207-232.
- Klenerman P, Lucas M, Barnes E, Harcourt G: Immunity to hepatitis C virus: stunned but not defeated. Microbes Infect 2002. **4**:57-65.
- Allen TM, O'Connor DH, Jing P, Dzuris JL, Mothe BR, Vogel TU, Dunphy E, Liebl ME, Emerson C, Wilson N et al.:

- Tat-specific cytotoxic T lymphocytes select for SIV escape variants during resolution of primary viraemia. Nature 2000, 407:386-390.
- 16. Moskophidis D, Lechner F, Pircher H, Zinkernagel RM: Virus persistence in acutely infected immunocompetent mice by exhaustion of antiviral cytotoxic effector T cells. Nature 1993, **362**:758-761.
- 17. Battegay M, Moskophidis D, Waldner H, Brundler MA, Fung-Leung WP, Mak TW, Hengartner H, Zinkernagel RM: Impairment and delay of neutralizing antiviral antibody responses by virus-specific cytotoxic T cells. J Immunol 1993, **151**:5408-5415.
- 18. Burton DR, Desrosiers RC, Doms RW, Koff WC, Kwong PD, Moore JP, Nabel GJ, Sodroski J, Wilson IA, Wyatt RT: HIV vaccine design and the neutralizing antibody problem. Nat Immunol 2004, **5**:233-236.

This review focuses on the way that HIV protects itself from neutralizing antibodies. It also gives some suggestions as to how immunogens that elicit broadly neutralizing antibodies should be designed.

- 19. Geffin R, Hutto C, Andrew C, Scott GB: A longitudinal assessment of autologous neutralizing antibodies in children perinatally infected with human immunodeficiency virus type 1. Virology 2003, 310:207-215.
- 20. Rasmussen RA, Hofmann-Lehmann R, Li PL, Vlasak J, Schmitz JE, Reimann KA, Kuroda MJ, Letvin NL, Montefiori DC, McClure HM et al.: Neutralizing antibodies as a potential secondary protective mechanism during chronic SHIV infection in CD8+ T-cell-depleted macaques. AIDS 2002, 16:829-838.
- 21. Ciurea A, Klenerman P, Hunziker L, Horvath E, Senn BM, Ochsenbein AF, Hengartner H, Zinkernagel RM: Viral persistence in vivo through selection of neutralizing antibody-escape variants. Proc Natl Acad Sci USA 2000, 97:2749-2754.
- 22. Shimizu YK, Hijikata M, Iwamoto A, Alter HJ, Purcell RH, Yoshikura H: Neutralizing antibodies against hepatitis C virus and the emergence of neutralization escape mutant viruses. J Virol 1994. 68:1494-1500.
- 23. Juompan L, Zhou J, Montefiori DC, Novembre FJ: Resistance to neutralizing antibody and expanded coreceptor usage are associated with human immunodeficiency virus type 1 isolates derived from chimpanzees with pathogenic infections. AIDS Res Hum Retroviruses 2001, 17:1705-1714.
- 24. Howard CR: Hepatitis C virus: clades and properties. J Gastroenterol Hepatol 2002, 17(Suppl):S468-S470.
- 25. Rico-Hesse R: Microevolution and virulence of dengue viruses. Adv Virus Res 2003. 59:315-341.
- 26. Magnius LO, Norder H: Subtypes, genotypes and molecular epidemiology of the hepatitis B virus as reflected by sequence variability of the S-gene. Intervirology 1995, 38:24-34.
- 27. Domingo E, Mas A, Yuste E, Pariente N, Sierra S, Gutierrez-Riva M, Menendez-Arias L: **Virus population dynamics, fitness** variations and the control of viral disease: an update. Prog Drug Res 2001, 57:77-115.
- 28. Eigen M: On the nature of virus quasispecies. Trends Microbiol 1996, **4**:216-218.
- Moore JP, Parren PW, Burton DR: Genetic subtypes, humoral immunity, and human immunodeficiency virus type 1 vaccine development. J Virol 2001, 75:5721-5729.
- 30. Ferrantelli F, Rasmussen RA, Hofmann-Lehmann R, Xu W, McClure HM, Ruprecht RM: Do not underestimate the power of antibodies-lessons from adoptive transfer of antibodies against HIV. Vaccine 2002, 20(Suppl 4):A61-A65.
- 31. Seiler P, Kalinke U, Rulicke T, Bucher EM, Bose C, Zinkernagel RM, Hengartner H: **Enhanced virus clearance** by early inducible lymphocytic choriomeningitis virusneutralizing antibodies in immunoglobulin-transgenic mice. J Virol 1998. **72**:2253-2258.
- 32. Bachmann MF, Hunziker L, Zinkernagel RM, Storni T, Kopf M: Maintenance of memory CTL responses by T helper cells and CD40-CD40 ligand: antibodies provide the key. Eur J Immunol 2004, **34**:317-326.

- 33. Baldridge JR, McGraw TS, Paoletti A, Buchmeier MJ: Antibody prevents the establishment of persistent arenavirus infection in synergy with endogenous T cells. J Virol 1997, 71:755-758
- 34. Carman WF, Korula J, Wallace L, MacPhee R, Mimms L, Decker R: Fulminant reactivation of hepatitis B due to envelope protein mutant that escaped detection by monoclonal HBsAg ELISA. Lancet 1995, 345:1406-1407.
- 35. Wei X, Decker JM, Wang S, Hui H, Kappes JC, Wu X,
- Salazar-Gonzalez JF, Salazar MG, Kilby JM, Saag MS et al.: Antibody neutralization and escape by HIV-1. Nature 2003,

This paper studies neutralizing antibody-escape formation following HIV infection in vivo. Neutralizing antibody-escape variants are emerging early and show a tendency toward mutations in amino acids that are involved in N-linked glycosylation; thus, the virus is thought to use a glycan shield to escape neutralizing antibodies without influencing receptor binding.

Hunziker L, Ciurea A, Recher M, Hengartner H, Zinkernagel RM: Public versus personal serotypes of a viral quasispecies. Proc Natl Acad Sci USA 2003, 100:6015-6020.

This paper modifies the in vivo system for the generation of neutralizing antibody-escape mutants (described in [21]), so that it is also applicable in normal inbred mice. Here, the influence of the viral load (suppressed by CD8+ T cells) on neutralizing antibody responses was studied. This paper demonstrates that cross-neutralizing antibodies are correlated with longterm virus control.

Ferrantelli F, Kitabwalla M, Rasmussen RA, Cao C, Chou TC, Katinger H, Stiegler G, Cavacini LA, Bai Y, Cotropia J et al.: Potent cross-group neutralization of primary human immunodeficiency virus isolates with monoclonal antibodiesimplications for acquired immunodeficiency syndrome vaccine. *J Infect Dis* 2004, **189**:71-74. This paper demonstrates that HIV neutralizing antibodies have some

cross-neutralizing activities against different HIV groups, similar to crossspecific antibodies following LCMV infection.

- 38. Katz RA, Skalka AM: Generation of diversity in retroviruses. Annu Rev Genet 1990, 24:409-445.
- Gandhi RT, Wurcel A, Rosenberg ES, Johnston MN, Hellmann N, Bates M, Hirsch MS, Walker BD: **Progressive reversion of** 39. human immunodeficiency virus type 1 resistance mutations in vivo after transmission of a multiply drug-resistant virus. Clin Infect Dis 2003, 37:1693-1698.

This paper highlights a tendency of HIV variants to revert towards wildtype virus in vivo. This was also associated with an increase in virus replication capacity.

- Grande-Perez A, Sierra S, Castro MG, Domingo E, Lowenstein PR: Molecular indetermination in the transition to error catastrophe: systematic elimination of lymphocytic choriomeningitis virus through mutagenesis does not correlate linearly with large increases in mutant spectrum complexity. *Proc Natl Acad Sci USA* 2002, **99**:12938-12943.
- 41. Ruiz-Jarabo CM, Ly C, Domingo E, de la Torre JC: Lethal
- mutagenesis of the prototypic arenavirus lymphocytic choriomeningitis virus (LCMV). Virology 2003, 308:37-47.

Together with [40], this study demonstrates that an increased mutation rate can result in complete loss of replication fitness in LCMV, both in vitro

- 42. Arnaout RA, Nowak MA: Competitive coexistence in antiviral immunity. J Theor Biol 2000, 204:431-441.
- 43. Radmacher MD, Kelsoe G, Kepler TB: Predicted and inferred waiting times for key mutations in the germinal centre reaction: evidence for stochasticity in selection. Immunol Cell Biol 1998, 76:373-381.
- 44. Kleinstein SH, Singh JP: Why are there so few key mutant clones? The influence of stochastic selection and blocking on affinity maturation in the germinal center Int Immunol 2003, 15:871-884
- 45. Ou R, Zhou S, Huang L, Moskophidis D: Critical role for alpha/ beta and gamma interferons in persistence of lymphocytic choriomeningitis virus by clonal exhaustion of cytotoxic T cells. J Virol 2001, 75:8407-8423.
- Younes SA, Yassine-Diab B, Dumont AR, Boulassel MR, Grossman Z, Routy JP, Sekaly RP: HIV-1 viremia prevents the

- establishment of interleukin 2-producing HIV-specific memory CD4+ T cells endowed with proliferative capacity. J Exp Med 2003, 198:1909-1922.
- 47. Fuller MJ, Zajac AJ: Ablation of CD8 and CD4 T cell responses by high viral loads. J Immunol 2003, 170:477-486.
- 48. Ciurea A, Hunziker L, Klenerman P, Hengartner H, Zinkernagel RM: Impairment of CD4(+) T cell responses during chronic virus infection prevents neutralizing antibody responses against virus escape mutants. J Exp Med 2001, 193:297-305.
- 49. Hunziker L, Recher M, Macpherson AJ, Ciurea A, Freigang S, Hengartner H, Zinkernagel RM: Hypergammaglobulinemia and autoantibody induction mechanisms in viral infections. Nat Immunol 2003, 4:343-349.

In this study, mechanisms underlying LCMV-induced polyclonal B-cell activation are examined in detail. B cells, irrespective of their surface receptor specificities, seem to present virus peptide to Th cells in a cognate interaction.

- 50. Coutelier JP, Johnston SJ, El Idrissi Me-A, Pfau CJ: Involvement of CD4+ cells in lymphocytic choriomeningitis virus-induced autoimmune anaemia and hypergammaglobulinaemia. J Autoimmun 1994, 7:589-599.
- 51. Lindqvist KJ, Coleman RE, Osterland CK: Autoantibodies in chronic pulmonary tuberculosis. J Chronic Dis 1970, 22:717-725
- 52. Banic DM, Viana-Martins FS, De Souza JM, Peixoto TD, Daniel-Ribeiro C: Polyclonal B-lymphocyte stimulation in human malaria and its association with ongoing parasitemia. Am J Trop Med Hyg 1991, 44:571-577.
- 53. De Milito A, Nilsson A, Titanji K, Thorstensson R, Reizenstein E,
- Narita M, Grutzmeier S, Sonnerborg A, Chiodi F: Mechanisms of hypergammaglobulinemia and impaired antigen-specific humoral immunity in HIV-1 infection. Blood 2004, 103:2180-2186. This paper examines hypergammaglobulinemia in HIV-infected patients.

Although total IgG formation is enhanced following HIV-infection, IgG memory titers, specific for vaccine antigens (measles, tetanus), are reduced.

- Tsianos EV, Di Bisceglie AM, Papadopoulos NM, Costello R, Hoofnagle JH: Oligoclonal immunoglobulin bands in serum in association with chronic viral hepatitis. Am J Gastroenterol 1990, **85**:1005-1008.
- 55. Silverstein AM, Rose NR: On the implications of polyclonal B cell activation. Nat Immunol 2003, 4:931-932; author reply 932. This review gives a historical overview of polyclonal B-cell activation. Some polyclonality of B cell responses can even be measured following protein immunisations.
- Crotty S, Kersh EN, Cannons J, Schwartzberg PL, Ahmed R:
- SAP is required for generating long-term humoral immunity. *Nature* 2003, **421**:282-287.

This paper describes an interesting phenotype of mice deficient in SAP protein, involved in the X-linked lymphoproliferative disease. Upon LCMV-infection of SAP-deficient mice, among other immunological alterations, virus-specific antibody responses were found to be reduced and were correlated with increased CD4+ T-cell function in these mice.

- 57. Guzman MG, Kouri G, Halstead SB: Do escape mutants explain rapid increases in dengue case-fatality rates within epidemics? Lancet 2000, 355:1902-1903
- 58. Halstead SB: Antibody, macrophages, dengue virus infection, shock, and hemorrhage: a pathogenetic cascade. Rev Infect Dis 1989, 11(Suppl 4):S830-S839.
- Libraty DH, Endy TP, Houng HS, Green S, Kalayanarooj S, Suntayakorn S, Chansiriwongs W, Vaughn DW, Nisalak A, Ennis FA et al.: Differing influences of virus burden and immune activation on disease severity in secondary dengue-3 virus infections. J Infect Dis 2002, 185:1213-1221.
- 60. Endy TP, Nisalak A, Chunsuttitwat S, Vaughn DW, Green S, Ennis FA, Rothman AL, Libraty DH: Relationship of preexisting dengue virus (DV) neutralizing antibody levels to viremia and severity of disease in a prospective cohort study of DV infection in Thailand. *J Infect Dis* 2004, **189**:990-1000.

Here, the authors demonstrate that cross-neutralizing antibodies might help to control secondary dengue-virus infection. However, cross-protection was not observed for all dengue-virus serotypes. Based on the results from [57], it could be speculated that low-titered cross-neutralizing antibodies after primary dengue-virus infection could induce an immunological pressure for the development of neutralizing antibody-escape mutants, following secondary dengue-infection with another serotype. Although these escape mutants might have escaped neutralizing serum activity, antibody-mediated disease enhancement could still be possible, resulting in severe disease.

- 61. Takada A, Kawaoka Y: Antibody-dependent enhancement of viral infection: molecular mechanisms and in vivo implications. Rev Med Virol 2003, 13:387-398.
- 62. Bernasconi NL, Traggiai E, Lanzavecchia A: Maintenance of serological memory by polyclonal activation of human memory B cells. Science 2002, 298:2199-2202.

This paper convincingly shows that non-specific immune-activation via pattern-recognition receptors or bystander T cells help drive the polyclonal activation of human memory B cells. Using this mechanism, an acute infection could boost IgG titers against non-related pathogens.

Moxon ER, Anderson P: Meningitis caused by Haemophilus influenzae in infant rats: protective immunity and antibody priming by gastrointestinal colonization with Escherichia coli. . J Infect Dis 1979, **140**:471-478.

- 64. Moskophidis M, Lohler J, Schwendemann G, Lehmann-Grube F: [Immune complex disease of mice persistently infected with lymphocytic choriomeningitis (LCM) virus]. Verh Dtsch Ges Pathol 1981, 65:213-218.
- 65. Buchmeier MJ, Oldstone MB: Virus-induced immune complex disease: identification of specific viral antigens and antibodies deposited in complexes during chronic lymphocytic choriomeningitis virus infection. J Immunol 1978, 120:1297-1304.
- 66. Nardi M, Tomlinson S, Greco MA, Karpatkin S: Complementindependent, peroxide-induced antibody lysis of platelets in HIV-1-related immune thrombocytopenia. Cell 2001, **106**:551-561.
- 67. Mazza G, el Idrissi ME, Coutelier JP, Corato A, Elson CJ, Pfau CJ, Day MJ: Infection of C3HeB/FeJ mice with the docile strain of lymphocytic choriomeningitis virus induces autoantibodies specific for erythrocyte Band 3. Immunology 1997, **91**:239-245
- Zandman-Goddard G, Shoenfeld Y: HIV and autoimmunity. Autoimmun Rev 2002, 1:329-337.