POSTER PRESENTATION





Structural comparison of somatically related PG9 and PG16 in complex with their epitope reveals differences in glycan recognition

M Pancera^{*}, JS McLellan, S Shahzad-ul-Hussan, N Doria-Rose, B Zhang, Y Yang, DR Burton, WC Koff, CA Bewley, PD Kwong

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Background

The somatically related antibodies, PG9 and PG16, neutralize 70-80% of HIV-1 isolates and bind a glycosylated epitope in the V1/V2 domain of HIV-1 gp120. Mutations in V1/V2, and sometimes V3 depending on the HIV-1 strain, affect neutralization and a glycan on Asn160 is required for neutralization. Both antibodies also preferentially bind the native trimer over monomeric gp120, especially PG16. The structure of PG9 in complex with its epitope, a scaffolded V1/V2 from HIV-1 strain ZM109, was recently solved and showed that PG9 targets a site of vulnerability comprising 2 glycans and a β -strand.

Methods

To understand the differences in binding properties from these two somatically related antibodies, we first assessed their binding to monomeric gp120 and scaffolded V1/V2 proteins with different glycan types (oligomannose, hybrid, and complex). In order for PG16 to bind the scaffolded V1/V2, the protein had to be expressed in mammalian cells in the presence of swainsonine, which inhibits glycan maturation past the hybrid state. A stable complex could be obtained between PG16 and a scaffolded V1/V2 domain from ZM109, and this complex was crystallized.

Results

Although the structure of PG16 bound to scaffolded V1/ V2 resembled that of PG9, some differences were seen: 1) PG16 binding to the β -strand is weaker than PG9 with fewer charged interactions, 2) PG16 interacts with a hybrid glycan at position N173. The difference in binding recognition of PG9 and PG16 to monomeric gp120 depends on

NIH/NIAID/VRC, Bethesda, MD, USA

the type of glycans present. PG16 binds the protein portion of V1/V2 weaker than PG9 and this might explain the higher affinity of PG9 for the monomer. PG16 has evolved a second glycan site to compensate for weaker peptide interaction.

Conclusion

The results show the importance of polyclonal response in infected individual to combat HIV-1, and in this case, to differential glycosylation.

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