Vaccine

Vaccine 36 (2018) 484-490

Contents lists available at ScienceDirect

Vaccine

journal homepage: www.elsevier.com/locate/vaccine

Functionality and avidity of norovirus-specific antibodies and T cells induced by GII.4 virus-like particles alone or co-administered with different genotypes

Maria Malm, Kirsi Tamminen, Suvi Heinimäki, Timo Vesikari, Vesna Blazevic*

Vaccine Research Center, University of Tampere, Biokatu 10, 33520 Tampere, Finland University of Tampere, Faculty of Medicine and Life Sciences, Tampere, Finland

ARTICLE INFO

Article history: Received 6 July 2017 Received in revised form 10 November 2017 Accepted 4 December 2017 Available online 13 December 2017

Keywords: Norovirus VLP Antibodies T cell immunity Degranulation Delivery route Interference

ABSTRACT

Norovirus (NoV) is the main cause of acute gastroenteritis worldwide across all age groups, Current NoV vaccine candidates are based on non-infectious highly immunogenic virus-like particles (VLPs) produced in cell cultures in vitro. As NoVs infecting human population are highly divergent, it is proposed that the vaccine should contain at least two different NoV genotypes, potentially affecting the immunogenicity of each other. We investigated the immunogenicity of NoV GII.4 VLPs administered by intramuscular (IM) or intradermal (ID) injections to BALB/c mice either alone or co-delivered with genogroup I (GI) and other genogroup GII VLPs. Serum NoV-specific IgG binding antibody titers and antibody functionality in terms of avidity and blocking potential were assessed. Furthermore, the specificity and functional avidity of CD4⁺ and CD8⁺ T cell responses were analyzed using synthetic peptides previously identified to contain NoV VP1 P2 domain-specific H-2^d epitopes. The results showed that IM and ID immunization induced comparable GII.4-specific antibodies and T cell responses. Similar magnitude and functionality of antibodies and interferon-gamma producing T cells were developed using monovalent GII.4 VLPs or different genotype combinations. For the first time, degranulation assay using multicolor flow cytometry showed that NoV GII.4-specific CD8⁺ T cells had cytotoxic T lymphocyte phenotype. To conclude, our results demonstrate that there is no immunological interference even if up to five different NoV VLP genotypes were co-administered at the same time. Furthermore, no inhibition of NoV-specific antibody functionality or the magnitude, specificity and affinity of T cell responses was observed in any of the immunized animals, observations relevant for the development of a multivalent NoV VLP vaccine. © 2017 The Authors. Published by Elsevier Ltd. This is an open access article under the CC BY-NC-ND license

(http://creativecommons.org/licenses/by-nc-nd/4.0/).

1. Introduction

Acute gastroenteritis (GE) caused by noroviruses (NoVs) affects people of all ages worldwide with severe outcomes especially in young children and the elderly [1,2]. Highly contagious NoVs are genetically diverse with continuously emerging new variants that leads to fast spreading in human population through immune escape. NoVs are members of the *Caliciviridae* family with more than 30 recognized genotypes infecting humans that belong to genogroups (G) I, II, and IV [3]. The icosahedral viral particle of NoV, with ~38 nm diameter, is composed of 180 copies of major capsid protein, viral protein 1 (VP1). NoV virus-like particles (VLPs), formed by spontaneous self-assembly of VP1 in vitro, are

E-mail address: vesna.blazevic@uta.fi (V. Blazevic).

morphologically and antigenically identical to the virus. VLPs has contributed significantly to the NoV research, as they are successfully used for structural and immunogenicity studies, and as promising NoV vaccine candidates. Due to the high genetic variability of NoVs and a lack of cross-protective immunity between GI and GII NoVs, it is believed that a vaccine should contain a minimum of one VLP from each genogroup. Our group has recently proposed a NoV candidate vaccine consisting of GI.3 and GII.4 VLPs in a combination with rotavirus (RV) VP6, to prevent two major causes of childhood viral GE worldwide [4,5].

Although cell culture systems for growth of NoV in vitro have recently been established, a traditional neutralization assay is still not in use [6,7]. Instead, a subset of NoV-specific antibodies that block binding of NoV VLPs to their cellular carbohydrate ligands, histo-blood group antigens (HBGA), are regarded as correlates of protection from infection [8–11]. The role of NoV-specific T cell responses in protection from NoV infection [12–16] has not yet





^{*} Corresponding author at: Vaccine Research Center, University of Tampere, Biokatu 10, FI-33520 Tampere, Finland.

been established and requires further research. Using matrix peptide pools, we have recently identified seven immunodominant H-2^d restricted NoV-specific T cell epitopes, including a highly conserved universal GII NoV-specific CD8⁺ epitope (peptide 99-45, NNYDPTEEIPAPLGTPDF) and GII.4-1999 variant-specific CD4⁺ T cell epitope (peptide 99-50, TRAHKATVSTGSVHFTPK) [17].

In the present study we investigated NoV GII.4-specific antibody functionality (avidity and blocking activity) and T cell responses in mice immunized with GII.4-1999 VLPs alone or codelivered with different VLPs belonging to GI and GII NoVs, with the primary focus on mutual inhibition or immunological interference. In addition, NoV-specific cytotoxic T lymphocyte (CTL) responses were investigated for the first time.

2. Material and methods

2.1. Recombinant proteins and synthetic peptides

Five different NoV capsid VLPs derived from GII.4-1999 (reference strain accession no: AF080551), GII.4-2009 New Orleans (NO; reference strain accession no: GU445325), GII.12 (reference strain accession no:AJ277618), GI.1 (accession no: AY502016.1), and GI.3 (reference strain accession no: AF414403) VLPs were produced in baculovirus-insect cell system and purified by sucrose gradient ultracentrifugation as described in details earlier [4,18]. The purity, identity and morphology of VLPs were determined by SDS-PAGE, immunoblotting, and electron microscopy using previously described procedures [19].

Seventy-four synthetic peptides representing the entire 539 amino acid (aa) sequence of GII.4-1999 NoV VP1 were synthesized by Synpeptide Co., Ltd (Shanghai, China) as 18-mers overlapping by 11 aa. The purity was >70% as determined by high-pressure liguid chromatography. Each lyophilized peptide was dissolved in DMSO and further diluted in sterile PBS for use in the assays. In addition, all individual peptides were pooled (GII.4-99 pool) as recently described [15]. The GII.4-99 pool was used at a predetermined concentration of 2 µg/ml in all assays. Individual GII.4 peptides, 99-45 (³⁰⁹NNYDPTEEIPAPLGTPDF³²⁶) and 99-50 (³⁴⁴TRAHKATVSTGSVHFTPK³⁶¹), a predicted [17] mouse H-2^d 9mer epitope (³¹⁸PAPLGTPDF³²⁶, included in the 99-45 sequence), and two negative control peptides, 10-mer (139TMFPHIIVDV148) and 17-mer (ovalbumin, OVA 323 ISQAVHAAHAEINEAGR339), were synthetized as described above and used at a final concentration of 4 μ g/ml.

2.2. Immunizations

BALB/c $(H-2^d)$ mice were obtained from Envigo RMS BV (formerly Harlan Laboratories, Horst, Netherlands) and immunized at 7 weeks of age after a week of acclimatization. Forty mice were divided into 8 groups (5 mice/group) and mice were immunized either intramuscularly (IM) at the right caudal thigh muscle or intradermally (ID) at the base of the tail (Table 1). The dose of 10 μ g or 50 μ g of GII.4-1999 VLPs was administrated in a 50 μ l volume/dose at week 0 and week 3, a standard procedure used by our laboratory [4,5]. A group of mice received a mixture of GII VLPs (GII.4-1999, GII.4 NO and GII.12, 20 µg each) by IM delivery according to the same schedule. Additional group of mice received a mixture of GII.4 VLPs (as above) and a mixture of GI VLPs (GI.1 and GI.3) simultaneously at the different sites. Two negative control groups of mice received a carrier only (phosphate-buffered saline, PBS) either IM or ID. No external adjuvants were used. Two weeks after the second immunization mice were sacrificed and serum and spleen cells were collected and prepared as previously described [4,5] for the analysis of NoV-specific antibodies and T cell

Table 1

Group	Immunogen	Dose (µg)	Route
Ι	GII.4-1999 VLP	10	IM
II	GII.4-1999 VLP	10	ID
III	GII.4-1999 VLP	50	IM
IV	GII.4-1999 VLP	50	ID
V	GII-mix VLPs (GII.4-1999, GII.4 NO, GII.12)	60 (20 each)	IM
VI	GII-mix VLPs (GII.4-1999, GII.4 NO, GII.12)+ GI-mix VLPs (GI.1 and GI.3)	60 + 40 (20 each)	IM ID
VII	PBS	_	IM
VIII	PBS	-	ID

PBS, phosphate-buffered saline.

responses. Mice welfare was monitored throughout the study and experiments were performed in accordance with the guidelines of the Finnish National Animal Experiment Board.

2.3. Serum IgG antibody titer and avidity

Serum GII.4-specific IgG antibodies were detected by enzymelinked immunosorbent assay (ELISA) as described elsewhere in detail [4,5]. In brief, twofold diluted serum samples were analyzed on NoV VLP-coated plates. IgG antibodies were detected with HRPconjugated anti-mouse IgG (Sigma Aldrich, Saint Louis, MO) followed by o-Phenylenediamine dihydrochloride (OPD)-substrate (Sigma-Aldrich). The optical density (OD) was measured at 490 nm in a microplate reader (Victor² 1420, Perkin Elmer, Waltham, MA). The mean end-point titers of the individual serum were determined as the reciprocal of the highest serum dilution giving an OD above the set cut-off value (mean OD of negative control mice serum wells + 3 × SD) and at least 0.100 OD.

Avidity assay was conducted as the IgG ELISA assay described above using 1:200 serum dilution, but additional two 8 M urea incubation steps were included to remove low avidity antibodies according to previously published method [20]. Avidity index was calculated as (OD with urea/OD without urea) × 100%.

2.4. Blocking assay

Blocking assay was used to detect antibodies preventing NoV GII.4-1999 VLP binding to the synthetic HBGAs as previously described in detail [11]. Briefly, synthetic biotinylated Le^d (H type 1)-PAA-Biotin (Glycotech, Gaithersburg, MD) was coated on NeutrAvidin plates (Pierce, Rockford, IL). After 1 h pre-incubation at 37 °C, a mixture of NoV VLPs (0.4 µg/ml) and serially twofold diluted serum samples were plated and incubated for 2 h at 4 °C. The bound VLPs were detected using NoV VLP type-specific human serum, followed by goat anti-human IgG (H + L)-HRP (Invitrogen, Carlsbad, CA) and OPD-substrate (Sigma-Aldrich). The OD was measured as described above. Maximum binding was determined by VLP lacking mouse sera. The results are expressed as the mean blocking index (%) calculated as 100% - [(OD wells with VLP - se rum mix/OD maximum binding OD) \times 100%]. Blocking titer 50 (BT50) was expressed as the reciprocal of the highest serum dilution blocking 50% of the maximum VLP binding.

2.5. IFN-γ ELISPOT assay

NoV-specific T cell responses were determined by the ability of short synthetic peptides to induce ex vivo IFN- γ production by splenocytes of immunized mice using interferon-gamma (IFN- γ) enzyme-linked immunospot (ELISPOT) assay [5]. Liquid nitrogen

frozen splenocytes were thawed and added to the anti-mouse IFN- γ antibody coated Multiscreen HTS-IP filter plates at 0.1×10^6 cells/well in culture medium (CM) containing 5% FBS (Sigma-Aldrich). The following peptides were used for stimulation: GII.4-1999 peptide pool, the two single peptides 99-45 and 99-50, a predicted 9-mer H-2^d epitope, and a negative 10-mer control peptide. Additionally, dose titrations $(0.05-2 \mu g/ml)$ of the peptides 99-45 and 99-50 were performed to determine the functional avidity of T cells to the epitopes. CM was used as a background control and Concanavalin A (10 μ g/ml, Sigma-Aldrich) as a cell viability control. After 20 h incubation at 37 °C in a humidified 5% CO₂ atmosphere. the spots were detected by biotinylated anti-mouse IFN-y monoclonal antibody, followed by streptavidin-ALP and BCIP/NBT substrate (all from Mabtech Ab, Nacka Strand, Sweden) according to a previously described protocol [5]. The plates were analyzed by CTL-Europe GmbH (Bonn, Germany) and the results were expressed as mean spot forming cells (SFC) per 10⁶ splenocytes. The experiments were performed in duplicates and each experiment was repeated at least twice.

2.6. Degranulation assay

Degranulation assay was performed to determine cytotoxic potential of the 99-45 peptide-specific CD8⁺ T mouse splenocytes. The cells (1×10^6) were stimulated with 4 µg/ml 99-45 peptide in the presence of 3 µg/ml CD107a (clone 1D4B, BD Biosciences, San Jose, CA) FITC-conjugated antibody. As controls, unstimulated cells (spontaneous degranulation), negative control peptide (OVA) and PMA/ionomycin (Sigma-Aldrich) stimulated cells were included. After 1 h pre-incubation at 37 °C and 5% CO₂, the protein transport inhibitors brefeldin A and monensin (GolgiPlug and GolgiStop, BD Biosciences) were added and incubation was continued overnight. Treated cells were washed, blocked with rat anti-mouse CD16/ CD32 (Fc Block, Clone 2.4G2, BD Biosciences) and stained with BD Horizon Fixable viability stain 780 for live cells gating. Cells were surface stained with PerCP-Cy5.5 fluorochrome-conjugated CD8-specific antibody, followed by treatment with BD Cytofix/ Cytoperm Plus kit (BD Biosciences) and intracellular staining with PE-Cy7 conjugated CD3-specific antibody. The cells were acquired on BD FACSCanto II flow cytometer and analyzed using Flowlo v.10 software (ThreeStar Inc., San Carlos, CA). CD3⁺ cells were gated from live lymphocyte gate and analyzed for CD8 and CD107a expression.

2.7. Statistics

The statistical differences between the experimental groups were determined by the Kruskal-Wallis test, Fisher's exact test or the Mann-Whitney *U* test, as applicable. Statistical analyses were performed using IBM SPSS Statistics for Windows (IBM Corp., Armonk, NY) version 23. Statistical significance was defined as a p value of <.05.

3. Results

3.1. Similar levels of NoV GII.4-1999 specific serum IgG antibodies induced by IM and ID delivery of GII.4 VLPs alone or co-delivered with other VLP genotypes

Immunization of the mice with GII.4 VLPs induced robust genotype-specific IgG antibodies irrespective of the dose, delivery route or co-administration of other genotype VLPs at the same time (Fig. 1A). The GII.4-specific serum IgG titers were similar in all experimental groups (p > .05), with end-point titers 102,400 or 204,800 for all VLP immunized mice (Fig. 1B).

3.2. NoV GII.4-1999-specific antibody blocking and avidity are not dependent on delivery route or immunogen composition

Sera of mice immunized with GII.4 VLP (10 μ g groups only), GII VLP-mix, or GI VLP + GII VLP mix via IM or ID route were further analyzed for antibody avidity and blocking activity. All groups had developed high avidity antibodies (>50%) with no significant difference between the groups (p = .161) (Fig. 1C). Furthermore, similar blocking activity was observed for all deliveries (Fig. 1D). Sera of each experimental group reached BT50 of 800. Therefore, no immunological interference due to the competition between different genotypes was found in avidity or blocking activity of GII.4-specific antibodies.

3.3. Magnitude and specificity of NoV GII.4-specific T cell responses

Synthetic peptide pools and single peptides were used to compare T cell responses of mice immunized with 10 µg VLPs alone or co-administered with different VLP genotypes. Splenocytes of immunized and control mice were assayed for IFN- γ production against different peptide antigens (Fig. 2A). Each experimental group but not the control mice responded to a similar level (p > .05) to all GII.4-1999 derived peptides tested, while no response was induced by the negative 10-mer control peptide. The GII.4-99 peptide pool induced the highest IFN- γ response compared to other GII.4-specific peptides (p < .05) in all immunized groups. All tested NoV-specific peptides, the 18-mer peptides 99-45 and 99-50, previously identified to contain NoV GII.4-specific CD8⁺ and CD4⁺ T cell-specific epitopes [17], and the 9-mer predicted T cell epitope [17], induced specific SFC in immunized mice, although a response to 99-45 was somewhat higher (p < .05).

3.4. Functional avidity of CD8⁺ and CD4⁺ T cells

As we did not observe any differences in the magnitude or specificity of T cell responses of different experimental groups (Fig. 2A), we further tested epitope functional avidity of CD4⁺ and CD8⁺ T cells of mice immunized with different formulations, to detect possible difference. The cells were stimulated with a dose range $(0.01-2 \ \mu\text{g/ml}, \text{ app. } 10^{-5}-10^{-3} \ \mu\text{M})$ of the single peptides 99-45 and 99-50 in the IFN- γ ELISPOT assays (Fig. 2B and C). No significant differences in the responses were observed between the groups (p > .05).

3.5. CD8^+ T cells specific for the 99-45 peptide epitope undergo degranulation

CD8⁺ T cells specific for the peptide 99-45 were further tested for potential to lyse the NoV infected cells. Flow cytometry was used to measure surface expression of the degranulation molecule CD107a on CD3⁺CD8⁺ T cells, a marker of an effector cytotoxic population [21]. Approximately 0.8% of 99-45 peptide–specific CD8 + T cells of mice immunized with the GII VLP mix (Fig. 3A) and 0.6% of the cells of mice immunized with the GI + GII VLP mix (Fig. 3B) expressed CD107a at the surface. No 99-45 peptide-specific degranulation was seen with negative control mice cells (Fig. 3C) or when 14-mer OVA control peptide was used (data not shown).

4. Discussion

A broadly protective NoV VLP-based vaccine should contain at least a single representative of GI and GII viruses, as there is very little cross-protective immunity between the genogroups [5,14,16,22–24]. Concomitantly, we have recently proposed a trivalent combination of GII.4 VLPs, GI.3 VLPs and RV VP6 as a can-



Fig. 1. Norovirus GII.4-1999-specific serum IgG responses. Individual termination serum antibodies shown as the group mean OD values with the standard errors of the mean (A) and end-point titers analyzed from the group-wise pooled sera (B). Mice were immunized IM or ID with GII.4-1999 VLPs alone (groups I to IV), GII VLP mix (group V), or GI + GII VLP mix (group VI). Mice receiving carrier (PBS) only were used as negative controls (Ctrl, groups VII and VIII). Horizontal dashed line (A and B) indicates a positivity cutoff (OD > 0.100). GII.4-specific IgG mean avidity indices (%) with standard error of the means (C) and pooled serum blocking antibody titers (D) in groups immunized with GII.4 VLPs alone (10 µg), GII mix, or GI + GII-mix. Horizontal dashed line indicates 50% avidity (C) or blocking (D) index. *n.s.*, statistically not significant (p > .05).

didate vaccine against childhood GE [4,25]. In the present study, we determined antibodies and T cell immune responses to GII.4-1999 VLPs administered either alone or co-administered with different VLP genotypes in mice, to determine possible immunological interference or inhibition of both humoral and cellular immune responses. As the representatives of GII NoVs, three different VLPs were used, an ancestor GII.4-1999, the more recent GII.4 NO (2009) genotype and antigenically distant GII.12 genotype. GII.4 NoVs have been dominant in causing sporadic cases and GE outbreaks for more than 20 years, with newly emerging variants every 2–4 years [26]. NoV GI.1 and GI.3 VLPs were chosen as the representatives of GI NoVs.

High serum IgG antibody titers generated against NoV GII.4 were detected in mice immunized with GII.4-1999 VLPs either alone or in any combination. Furthermore, the functionality of these antibodies, in terms of virus neutralizing potential and avidity, determining the strength of molecular interaction between polyclonal serum antibodies and antigens, was very good. This is important as blocking antibodies are considered the most significant correlate of protection from NoV infection and disease identified so far [8,22,24,27]. High avidity antibodies, produced as a result of B cell avidity maturation, better tolerate variations within the target epitopes [17,23,28,29] and are important for protection from viral infections [30–32].

NoV-specific blocking antibodies in humans and mice are highly type-specific [23,28,33] and therefore the biological significance of other arms of protective immunity, such as cross-reactive T cell responses, should be considered besides blocking of ligand interaction. It has been suggested that protective immunity to NoV might be partially dependent on the activation of T cell immunity, [14,34–37], however, very little is known about the role of NoVspecific T cells in natural infection [14] and even less on the vaccine induced T cell responses in humans or experimental animal models [35,36]. T cell immunity has a significant role in protection from other viruses such as influenza [38], measles [39], and human immunodeficiency virus [40,41]. To the best of our knowledge, our group is the only one who has identified NoV-specific T cell epitopes in naturally exposed humans [15] and BALB/c mice immunized with the NoV VLPs [17]. Limited number of GII.4-specific T cell epitopes was detected in a heterogeneous human population, in contrast to seven cross-reactive T cell epitopes identified in a single inbred mouse strain, suggesting that T cell immunity might significantly improve after NoV VLP vaccination [15,17].

In contrast to naïve mice, in humans the vaccination is influenced by the complex prior NoV exposure history, however, the effect is yet unknown [10,42]. Vaccination may improve the preexisting immunity in humans by eliciting strong recall immune responses towards conserved epitopes, despite the wide genetic inter- and intragenogroup variability of NoVs [10]. Clinical trials in adults have suggested that vaccination induces crossprotective memory immune responses, such as cross-blocking antibodies, directed towards strains encountered in the past, in



Fig. 2. NoV GII.4-specific T cell responses. Splenocytes of mice immunized IM or ID with 10 μ g GII.4 VLP alone, GII VLP mix or GI + GII VLP mix were analyzed for IFN- γ production by ELISPOT assay. The control mice (Ctrl) received PBS only. Complete GII.4-99 peptide pool, 18-mer single peptides 99-45 and 99-50, and a predicted 9-mer T cell epitope were used to stimulate the cells. An irrelevant 10-mer peptide served as a negative control and culture media (CM) as a background control (A). Stimulation of the cells with increasing concentrations of the peptides 99-45 (B) and 99-50 (C) was used to determine the functional avidity of T cells. Mean IFN- γ spot-forming cells per 10⁶ splenocytes of repeated experiments with standard errors of the mean are shown. P value < .05 was considered statistically significant. *n.s.*, statistically not significant (p > .05).



Fig. 3. Expression of CD107a in NoV-specific CD8 T cells. The group-wise pooled splenocytes of mice immunized with GII VLP mix (A) or GI + GII VLP mix (B), or splenocytes of the control mice (C), were stimulated with the single peptide 99-45, in the presence of CD107a FITC and protein transport inhibitors, before flow cytometry analysis on FACS Canto II. Events (%) shown are gated for live CD3⁺ CD8⁺ T cells and circled are CD8⁺CD107a⁺ cells.

addition to eliciting immune responses against strains included in the vaccine [10,43].

In this study, the T cell responses were comparable in all experimental groups tested to the CD4⁺ T cell epitope 99-50 (³⁴⁴-TRAHKATVSTGSVHFTPK³⁶¹), CD8⁺ T cell epitope 99-45 (³⁰⁹NNYDPTEEIPAPLGTPDF³²⁶), and, for the first time, to a minimal epitope (³¹⁸PAPLGTPDF³²⁶) conforming the predicted H-2^d binding motif [17]. The functional avidity is the activation threshold of the T cells, describing how well the cells respond to a given concentration of an antigen, as reviewed extensively by Vigano et al. [44]. Considering the major role of the high functional avidity of T cell receptor to a given peptide epitope in driving T cell antiviral activity [45–48], it is of importance that T cell magnitude, specificity and avidity were similar in all GII.4 VLP immunized mice, regardless of the administered formulation.

Importantly, the results of this study are the first to suggest the true CTL potential of the CD8⁺ T cells specific for the peptide 99-45. which contains the highly conserved epitope across GII NoV genotypes. Increased cell surface CD107a expression in immunized mice cells is associated with loss of intracellular perforin, and indicates the ability of these cells to lyse NoV infected cells [21]. CTLs are considered as the main effectors against intracellular pathogens, conferring protection from the illness in the case that not all free virus is neutralized at the port of entry, owing to their ability to lyse the infected cells prior virus replication and release of new virions [49]. Unlike in NoV VLP immunized inbred mice as described above, highly conserved CD8⁺ T cell epitopes in humans remain yet to be identified. Although human population is heterogeneous, it is possible that some protein domains in NoV VLPs are immunoprevalent, i.e. contain epitopes restricted by multiple MHC alleles [50,51].

IM delivery is the most commonly used for vaccinating adults, infants and small children. Even though ID immunization, with the abundance of antigen presenting cells in the close proximity, might be the most optimal route for delivering VLPs [52–54], the results of this study showed that IM and ID deliveries induced similar quantities and qualities of NoV GII.4-specific antibodies and CD4⁺ and CD8⁺ T cells. This finding is of a significant importance considering the easiness of IM delivery to small children, compared to ID delivery. Even though the importance of IgA and mucosal immunity in protection from NoV infection and disease has not been definitely established, they are likely to play protective role in NoV infection transmitted via mucosal route [55-57]. In GII.4 challenge studies, pre-existing NoV-specific serum IgA and mucosal IgA were associated with decreased frequency of infection and severe illness [58]. However, in the present study using parenteral routes of immunization, no IgA responses were evaluated.

We believe that protection against NoV reflects the sum of various immune responses, including antibody and cell-mediated, especially T cell, immunity. Our results show the potential for a multivalent NoV VLP vaccine to induce humoral and cellmediated immune responses without immunological interference.

Acknowledgements

We gratefully acknowledge the laboratory personnel of the Vaccine Research Center at the University of Tampere for technical assistance given.

Funding

This research did not receive any specific grant from funding agencies in the public, commercial, or not-for-profit sectors.

Conflict of interest

We declare no conflicts of interest.

References

- Lopman BA, Steele D, Kirkwood CD, Parashar UD. The vast and varied global burden of norovirus: prospects for prevention and control. PLoS Med 2016;13 (4):e1001999.
- [2] Pires SM, Fischer-Walker CL, Lanata CF, Devleesschauwer B, Hall AJ, Kirk MD, et al. Aetiology-specific estimates of the global and regional incidence and mortality of diarrhoeal diseases commonly transmitted through food. PLoS One 2015;10(12):e0142927.
- [3] Vinje J. Advances in laboratory methods for detection and typing of norovirus. J Clin Microbiol 2015;53(2):373–81.
- [4] Blazevic V, Lappalainen S, Nurminen K, Huhti L, Vesikari T. Norovirus VLPs and rotavirus VP6 protein as combined vaccine for childhood gastroenteritis. Vaccine 2011;29(45):8126–33.
- [5] Tamminen K, Lappalainen S, Huhti L, Vesikari T, Blazevic V. Trivalent combination vaccine induces broad heterologous immune responses to norovirus and rotavirus in mice. PLoS One 2013;8(7):e70409.
- [6] Jones MK, Watanabe M, Zhu S, Graves CL, Keyes LR, Grau KR, et al. Enteric bacteria promote human and mouse norovirus infection of B cells. Science 2014;346(6210):755–9.
- [7] Ettayebi K, Crawford SE, Murakami K, Broughman JR, Karandikar U, Tenge VR, et al. Replication of human noroviruses in stem cell-derived human enteroids. Science 2016;353(6306):1387–93.
- [8] Reeck A, Kavanagh O, Estes MK, Opekun AR, Gilger MA, Graham DY, et al. Serological correlate of protection against norovirus-induced gastroenteritis. J Infect Dis 2010;202(8):1212–8.
- [9] Harrington PR, Lindesmith L, Yount B, Moe CL, Baric RS. Binding of Norwalk virus-like particles to ABH histo-blood group antigens is blocked by antisera from infected human volunteers or experimentally vaccinated mice. J Virol 2002;76(23):12335–43.
- [10] Lindesmith LC, Ferris MT, Mullan CW, Ferreira J, Debbink K, Swanstrom J, et al. Broad blockade antibody responses in human volunteers after immunization with a multivalent norovirus VLP candidate vaccine: immunological analyses from a phase I clinical trial. PLoS Med 2015;12(3):e1001807.
- [11] Uusi-Kerttula H, Tamminen K, Malm M, Vesikari T, Blazevic V. Comparison of human saliva and synthetic histo-blood group antigens usage as ligands in norovirus-like particle binding and blocking assays. Microbes Infect 2014;16 (6):472–80.
- [12] Tacket CO, Sztein MB, Losonsky GA, Wasserman SS, Estes MK. Humoral, mucosal, and cellular immune responses to oral Norwalk virus-like particles in volunteers. Clin Immunol 2003;108(3):241–7.
- [13] Lindesmith L, Moe C, Lependu J, Frelinger JA, Treanor J, Baric RS. Cellular and humoral immunity following Snow Mountain virus challenge. J Virol 2005;79 (5):2900–9.
- [14] Lindesmith LC, Donaldson E, Leon J, Moe CL, Frelinger JA, Johnston RE, et al. Heterotypic humoral and cellular immune responses following Norwalk virus infection. J Virol 2010;84(4):1800–15.
- [15] Malm M, Tamminen K, Vesikari T, Blazevic V. Norovirus-specific memory T cell responses in adult human donors. Front Microbiol 2016;7:1570.
- [16] LoBue AD, Lindesmith LC, Baric RS. Identification of cross-reactive norovirus CD4+ T cell epitopes. J Virol 2010;84(17):8530–8.
- [17] Malm M, Tamminen K, Vesikari T, Blazevic V. Type-specific and cross-reactive antibodies and T cell responses in norovirus VLP immunized mice are targeted both to conserved and variable domains of capsid VP1 protein. Mol Immunol 2016;78:27–37.
- [18] Huhti L, Blazevic V, Nurminen K, Koho T, Hytonen VP, Vesikari T. A comparison of methods for purification and concentration of norovirus GII-4 capsid viruslike particles. Arch Virol 2010;155(11):1855–8.
- [19] Huhti L, Tamminen K, Vesikari T, Blazevic V. Characterization and immunogenicity of norovirus capsid-derived virus-like particles purified by anion exchange chromatography. Arch Virol 2013;158(5):933–42.
- [20] Tamminen K, Huhti L, Koho T, Lappalainen S, Hytonen VP, Vesikari T, et al. A comparison of immunogenicity of norovirus GII-4 virus-like particles and Pparticles. Immunology 2012;135(1):89–99.
- [21] Betts MR, Brenchley JM, Price DA, De Rosa SC, Douek DC, Roederer M, et al. Sensitive and viable identification of antigen-specific CD8+ T cells by a flow cytometric assay for degranulation. J Immunol Methods 2003;281(1– 2):65–78.
- [22] Malm M, Uusi-Kerttula H, Vesikari T, Blazevic V. High serum levels of norovirus genotype-specific blocking antibodies correlate with protection from infection in children. J Infect Dis 2014;210(11):1755–62.
- [23] Malm M, Tamminen K, Lappalainen S, Uusi-Kerttula H, Vesikari T, Blazevic V. Genotype considerations for virus-like particle-based bivalent norovirus vaccine composition. Clin Vaccine Immunol 2015;22(6):656–63.
- [24] Atmar RL, Bernstein DI, Harro CD, Al-Ibrahim MS, Chen WH, Ferreira J, et al. Norovirus vaccine against experimental human Norwalk Virus illness. N Engl J Med 2011;365(23):2178–87.
- [25] Tamminen K, Huhti L, Vesikari T, Blazevic V. Pre-existing immunity to norovirus GII-4 virus-like particles does not impair de novo immune responses to norovirus GII-12 genotype. Viral Immunol 2013;26(2):167–70.

- [26] Ramani S, Atmar RL, Estes MK. Epidemiology of human noroviruses and updates on vaccine development. Curr Opin Gastroenterol 2014;30(1):25–33.
- [27] Ramani S, Estes MK, Atmar RL. Correlates of protection against norovirus infection and disease-where are we now, where do we go? PLoS Pathog 2016;12(4):e1005334.
- [28] LoBue AD, Lindesmith L, Yount B, Harrington PR, Thompson JM, Johnston RE, et al. Multivalent norovirus vaccines induce strong mucosal and systemic blocking antibodies against multiple strains. Vaccine 2006;24(24):5220–34.
- [29] Debbink K, Lindesmith LC, Donaldson EF, Baric RS. Norovirus immunity and the great escape. PLoS Pathog 2012;8(10):e1002921.
- [30] Lambert PH, Liu M, Siegrist CA. Can successful vaccines teach us how to induce efficient protective immune responses? Nat Med 2005;11(4 Suppl):S54–62.
- [31] Puschnik A, Lau L, Cromwell EA, Balmaseda A, Zompi S, Harris E. Correlation between dengue-specific neutralizing antibodies and serum avidity in primary and secondary dengue virus 3 natural infections in humans. PLoS Negl Trop Dis 2013;7(6):e2274.
- [32] Delgado MF, Coviello S, Monsalvo AC, Melendi GA, Hernandez JZ, Batalle JP, et al. Lack of antibody affinity maturation due to poor Toll-like receptor stimulation leads to enhanced respiratory syncytial virus disease. Nat Med 2009;15(1):34–41.
- [33] Blazevic V, Malm M, Vesikari T. Induction of homologous and cross-reactive GII.4-specific blocking antibodies in children after GII.4 New Orleans norovirus infection. J Med Virol 2015;87(10):1656–61.
- [34] Tomov VT, Osborne LC, Dolfi DV, Sonnenberg GF, Monticelli LA, Mansfield K, et al. Persistent enteric murine norovirus infection is associated with functionally suboptimal virus-specific CD8 T cell responses. J Virol 2013;87 (12):7015–31.
- [35] Chachu KA, LoBue AD, Strong DW, Baric RS, Virgin HW. Immune mechanisms responsible for vaccination against and clearance of mucosal and lymphatic norovirus infection. PLoS Pathog 2008;4(12):e1000236.
- [36] Zhu S, Regev D, Watanabe M, Hickman D, Moussatche N, Jesus DM, et al. Identification of immune and viral correlates of norovirus protective immunity through comparative study of intra-cluster norovirus strains. PLoS Pathog 2013;9(9):e1003592.
- [37] Melhem NM. Norovirus vaccines: correlates of protection, challenges and limitations. Hum Vaccin Immunother 2016;12(7):1653–69.
- [38] Wilkinson TM, Li CK, Chui CS, Huang AK, Perkins M, Liebner JC, et al. Preexisting influenza-specific CD4+ T cells correlate with disease protection against influenza challenge in humans. Nat Med 2012;18(2):274–80.
- [39] Griffin DE, Lin WH, Pan CH. Measles virus, immune control, and persistence. FEMS Microbiol Rev 2012;36(3):649–62.
- [40] Blazevic V, Sahgal N, Kessler HA, Landay AL, Shearer GM. T cell responses to recall antigens, alloantigen, and mitogen of HIV-infected patients receiving long-term combined antiretroviral therapy. AIDS Res Hum Retroviruses 2000;16(17):1887–93.
- [41] Seder RA, Darrah PA, Roederer M. T-cell quality in memory and protection: implications for vaccine design. Nat Rev Immunol 2008;8(4):247–58.
- [42] Riddle MS, Walker RI. Status of vaccine research and development for norovirus. Vaccine 2016;34(26):2895–9.

- [43] Lindesmith LC, Mallory ML, Jones TA, Richardson C, Goodwin RR, Baehner F, et al. Impact of pre-exposure history and host genetics on antibody avidity following norovirus vaccination. J Infect Dis 2017;215(6):984–91.
- [44] Vigano S, Utzschneider DT, Perreau M, Pantaleo G, Zehn D, Harari A. Functional avidity: a measure to predict the efficacy of effector T cells? Clin Dev Immunol 2012;2012:153863.
- [45] Stone JD, Chervin AS, Kranz DM. T-cell receptor binding affinities and kinetics: impact on T-cell activity and specificity. Immunology 2009;126(2):165–76.
- [46] Hanley PJ, Melenhorst JJ, Nikiforow S, Scheinberg P, Blaney JW, Demmler-Harrison G, et al. CMV-specific T cells generated from naive T cells recognize atypical epitopes and may be protective in vivo. Sci Transl Med 2015;7 (285):285ra63.
- [47] Zhang SQ, Parker P, Ma KY, He C, Shi Q, Cui Z, et al. Direct measurement of T cell receptor affinity and sequence from naive antiviral T cells. Sci Transl Med 2016;8(341):341ra77.
- [48] Brentville VA, Metheringham RL, Gunn B, Durrant LG. High avidity cytotoxic T lymphocytes can be selected into the memory pool but they are exquisitely sensitive to functional impairment. PLoS One 2012;7(7):e41112.
- [49] Barry M, Bleackley RC. Cytotoxic T lymphocytes: all roads lead to death. Nat Rev Immunol 2002;2(6):401–9.
- [50] Calvo-Calle JM, Strug I, Nastke MD, Baker SP, Stern LJ. Human CD4+ T cell epitopes from vaccinia virus induced by vaccination or infection. PLoS Pathog 2007;3(10):1511–29.
- [51] Oseroff C, Peters B, Pasquetto V, Moutaftsi M, Sidney J, Panchanathan V, et al. Dissociation between epitope hierarchy and immunoprevalence in CD8 responses to vaccinia virus western reserve. J Immunol 2008;180 (11):7193–202.
- [52] Romani N, Flacher V, Tripp CH, Sparber F, Ebner S, Stoitzner P. Targeting skin dendritic cells to improve intradermal vaccination. Curr Top Microbiol Immunol 2012;351:113–38.
- [53] Banchereau J, Steinman RM. Dendritic cells and the control of immunity. Nature 1998;392(6673):245–52.
- [54] Van Damme P, Oosterhuis-Kafeja F, Van der Wielen M, Almagor Y, Sharon O, Levin Y. Safety and efficacy of a novel microneedle device for dose sparing intradermal influenza vaccination in healthy adults. Vaccine 2009;27 (3):454–9.
- [55] Tamminen K, Malm M, Vesikari T, Blazevic V. Mucosal Antibodies Induced by Intranasal but Not Intramuscular Immunization Block Norovirus GII.4 Virus-Like Particle Receptor Binding. Viral Immunol 2016;29(5):315–9.
- [56] Ramani S, Neill FH, Opekun AR, Gilger MA, Graham DY, Estes MK, et al. Mucosal and cellular immune responses to Norwalk virus. J Infect Dis 2015;212(3):397–405.
- [57] Sundararajan A, Sangster MY, Frey S, Atmar RL, Chen WH, Ferreira J, et al. Robust mucosal-homing antibody-secreting B cell responses induced by intramuscular administration of adjuvanted bivalent human norovirus-like particle vaccine. Vaccine 2015;33(4):568–76.
- [58] Atmar RL, Bernstein DI, Lyon GM, Treanor JJ, Al-Ibrahim MS, Graham DY, et al. Serological Correlates of Protection against a GII.4 Norovirus. Clin Vaccine Immunol 2015;22(8):923–9.