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1	Minor Contribution of Host-HIV Readthrough Transcripts to the Level of HIV
2	Cell-associated gag RNA
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4	Alexander O. Pasternak ^{1*} , Laura K. DeMaster ² , Neeltje A. Kootstra ³ , Peter Reiss ^{4,5} , Una
5	O'Doherty ² , and Ben Berkhout ¹
6	
7	¹ Laboratory of Experimental Virology, Department of Medical Microbiology, Academic Medical
8	Center of the University of Amsterdam, Amsterdam, The Netherlands, ² Department of Pathology
9	and Laboratory Medicine, University of Pennsylvania, Philadelphia, PA, USA, ³ Department of
10	Experimental Immunology, Academic Medical Center of the University of Amsterdam, Amsterdam,
11	The Netherlands, ⁴ Department of Global Health and Division of Infectious Diseases, and
12	Amsterdam Institute for Global Health and Development, University of Amsterdam, Amsterdam,
13	The Netherlands, ⁵ Stichting HIV Monitoring, Amsterdam, The Netherlands
14	
15	*Corresponding author. Address: Academic Medical Center, Room K3-106B, Meibergdreef 15,
16	1105 AZ Amsterdam, the Netherlands (a.o.pasternak@amc.uva.nl)
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24 Abstract

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Cell-associated HIV unspliced RNA is an important marker of the viral reservoir. HIV *gag* RNA-specific assays are frequently used to monitor the reservoir activation. Because HIV preferentially integrates into actively transcribed genes, some of the transcripts detected by these assays may not represent genuine HIV RNA but chimeric host-HIV readthrough transcripts. Here we demonstrate that in HIV-infected patients on suppressive cART, such host-derived transcripts do not significantly contribute to the HIV *gag* RNA level.

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33 Cell-associated (CA) HIV unspliced RNA is an important marker of the viral reservoir and the 34 response to combination antiretroviral therapy (cART) (1). Recently, there has been considerable 35 interest in the utilization of CA HIV RNA as a surrogate marker of virus activation by latencyreversing agents (LRA) (2), and it has been used as a main output measure in several clinical trials 36 aimed at reduction of the HIV reservoir (3-6). Primers specific for the HIV gag region are frequently 37 38 used in PCR-based assays that quantify unspliced RNA (7,8). However, because HIV integrates 39 preferentially within actively transcribed host genes (Fig. 1A) (9), it has been suggested that some of 40 the transcripts detected by the gag-specific assays may not represent genuine HIV RNA but rather 41 chimeric host-HIV readthrough transcripts that are transcribed from host promoters (10). In this 42 case, an effect of LRA measured by induction of gag RNA transcription could represent activation 43 of a host gene, instead of HIV latency reversal. Therefore, to properly interpret the results of the gag 44 assays, it is necessary to determine the relative contribution of such readthrough transcripts to the 45 total HIV gag RNA signal in cART-treated patients.

We developed a sensitive nested real-time PCR assay that amplifies the 5' long terminal
repeat (LTR)-encoded U3 – packaging signal region (U3-Psi) of HIV-1. As the forward primers are

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located 5' of the HIV LTR transcription start site, this assay specifically detects host-HIV 48 49 readthrough transcripts but not genuine HIV-1 unspliced RNA (Fig. 1B). The assay has a linear 50 range of five orders of magnitude and the sensitivity of four copies per reaction (Fig. 2). For this 51 study, we used peripheral blood mononuclear cells (PBMC) of 48 cART-treated patients visiting the 52 HIV outpatient clinic of the Academic Medical Center in 2011-2013 and participating in the Co-53 morBidity in Relation to AIDS (COBRA) cohort, whose plasma viremia had been undetectable (<40 54 copies/ml) for a median of 7 years prior to the time of sampling. The median CD4⁺ T-cell count was 675.5 cells/mm³. Total DNA and total RNA were isolated from the patient PBMC using the Boom 55 56 isolation method (11) and CA HIV DNA and RNA were separately quantified using both the U3-Psi 57 assay and the seminested real-time PCR assay specific for the HIV gag region (Fig. 1B) (7,8). 58 Cellular RNA was treated with DNase (DNA-free[™] kit, Ambion[®]) to remove DNA that could 59 interfere with the quantitation, and reverse transcribed using random primers and Superscript III 60 reverse transcriptase (both Invitrogen). As HIV integrates in a random orientation with regard to the 61 host genes, we used random primers to allow detection of readthrough RNA transcribed in both 62 directions, from both upstream and downstream host promoters (Fig. 1A). Same-volume aliquots of 63 the same DNA or cDNA preparations were used as input for U3-Psi and gag assays. HIV DNA and 64 RNA were normalized to the cellular inputs as described previously (12).

As expected, both U3-Psi and *gag* assays detected HIV DNA in >90% of the patients (44/48 and 46/48, respectively) with no significant quantitative bias between the assays (0.13±0.50 log₁₀; P>0.05 for comparison of the difference to 0) (Fig. 3), and a highly significant correlation between the two measurements was observed (P=0.001), demonstrating the functionality of the U3-Psi assay. However, a major difference in detectability of HIV RNA was observed. HIV *gag* RNA was detected in 44/48 of these patients (92%) with a median copy number of 590 (interquartile range, 217-1194) copies/µg total RNA. However, the detectability of readthrough RNA was only 40% (19/48 patients) (Fig. 4A). In these 19 patients where the readthrough RNA was detected, its median copy number was 49 (41-122) copies/ μ g total RNA (*P*=0.0001 for the paired comparison with the HIV *gag* RNA) (Figs. 4B, 4C). This represented only 8.3% (2.4%-11.2%) of the HIV *gag* RNA (Fig. 4D). Notably, this is a large overestimation and the real readthrough/*gag* RNA ratio is much lower, as patients with undetectable readthrough RNA (60% of all patients) were excluded from this calculation. No significant correlation was observed between HIV *gag* RNA and the readthrough RNA (*P*=0.64).

79 Although the existence of host-HIV readthrough transcripts has been demonstrated 80 previously (9,13), this is the first quantitative comparison of these transcripts with HIV gag RNA in 81 cells from HIV-infected patients. Our results compellingly show that in PBMC of HIV-infected 82 patients on suppressive cART, the contribution of host-derived transcripts to the RNA measured by 83 HIV gag assays is very small. The host-HIV readthrough RNA transcribed in the same direction as 84 HIV (sense) is most probably polyadenylated at the HIV 5' LTR, whereas HIV has evolved a 85 number of strategies to suppress polyadenylation of its nascent RNA transcript (14,15). However, 86 polyadenylation cannot be the only explanation of the scarcity of host-HIV readthrough transcripts 87 that we found, as the readthrough RNA transcribed in the antisense direction is not expected to be 88 polyadenylated at the HIV LTRs. Rather, as introns represent the absolute majority of HIV 89 integration sites within genes (9), the low abundance of host-HIV readthrough transcripts compared 90 to genuine HIV RNA might reflect a combination of the short half-lives of pre-mRNA and intronic 91 RNA in a cell (16) and the relative strength of the HIV LTR promoter.

A limitation of this study is that we only quantified HIV RNA in total PBMC. It is possible that the HIV readthrough/*gag* RNA ratio is different in resting $CD4^+$ T-cells. However, although the HIV transcription level is lower in resting than in activated $CD4^+$ cells (17), host cell transcription is also expected to be lower due to the absence of nuclear forms of key transcription factors (e.g., 96 NF κ B and NFAT) in resting cells (18). In addition, to monitor the efficacy of LRA clinical trials, 97 HIV *gag* RNA is usually quantified in total CD4⁺ cells or PBMC (3,4,6). Therefore, our report is 98 relevant for the interpretation of the outcome of such trials.

99 In summary, we observed only a minor contribution of host-HIV readthrough transcripts to 100 the level of HIV gag RNA. The vast majority of HIV gag RNA transcripts in cART-treated patients 101 represent genuine HIV unspliced RNA.

102

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116 **References**

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118 1. Pasternak AO, Lukashov VV, Berkhout B. 2013. Cell-associated HIV RNA: a dynamic
 biomarker of viral persistence. Retrovirology 10:41.

120 2. Bruner KM, Hosmane NN, Siliciano RF. 2015. Towards an HIV-1 cure: measuring the latent
 121 reservoir. Trends Microbiol 23:192-203.

3. Elliott JH, Wightman F, Solomon A, Ghneim K, Ahlers J, Cameron MJ, Smith MZ,
Spelman T, McMahon J, Velayudham P, Brown G, Roney J, Watson J, Prince MH, Hoy JF,
Chomont N, Fromentin R, Procopio FA, Zeidan J, Palmer S, Odevall L, Johnstone RW,
Martin BP, Sinclair E, Deeks SG, Hazuda DJ, Cameron PU, Sekaly RP, Lewin SR. 2014.
Activation of HIV transcription with short-course vorinostat in HIV-infected patients on suppressive
antiretroviral therapy. PLoS Pathog 10:e1004473.

128 4. Rasmussen TA, Tolstrup M, Brinkmann CR, Olesen R, Erikstrup C, Solomon A,

129 Winckelmann A, Palmer S, Dinarello C, Buzon M, Lichterfeld M, Lewin SR, Østergaard L,

130 Søgaard OS. 2014. Panobinostat, a histone deacetylase inhibitor, for latent-virus reactivation in 131 HIV-infected patients on suppressive antiretroviral therapy: a phase 1/2, single group, clinical trial.

- 132 The Lancet HIV **1**:e13-e21.
- 133 5. Archin NM, Liberty AL, Kashuba AD, Choudhary SK, Kuruc JD, Crooks AM, Parker DC,

Anderson EM, Kearney MF, Strain MC, Richman DD, Hudgens MG, Bosch RJ, Coffin JM,
 Eron JJ, Hazuda DJ, Margolis DM. 2012. Administration of vorinostat disrupts HIV-1 latency in

- 136 patients on antiretroviral therapy. Nature **487**:482-485.
- 137 6. Søgaard OS, Graversen ME, Leth S, Olesen R, Brinkmann CR, Nissen SK, Kjaer AS,

138 Schleimann MH, Denton PW, Hey-Cunningham WJ, Koelsch KK, Pantaleo G, Krogsgaard K,

139 Sommerfelt M, Fromentin R, Chomont N, Rasmussen TA, Østergaard L, Tolstrup M. 2015.

140 The Depsipeptide Romidepsin Reverses HIV-1 Latency In Vivo. PLoS Pathog **11**:e1005142.

7. Pasternak AO, Adema KW, Bakker M, Jurriaans S, Berkhout B, Cornelissen M, Lukashov
VV. 2008. Highly sensitive methods based on seminested real-time reverse transcription-PCR for
quantitation of human immunodeficiency virus type 1 unspliced and multiply spliced RNA and
proviral DNA. J Clin Microbiol 46:2206-2211.

145 8. Kiselinova M, Pasternak AO, De Spiegelaere W, Vogelaers D, Berkhout B, Vandekerckhove
146 L. 2014. Comparison of droplet digital PCR and seminested real-time PCR for quantification of

147 cell-associated HIV-1 RNA. PLoS One 9:e85999.

148 9. Han Y, Lassen K, Monie D, Sedaghat AR, Shimoji S, Liu X, Pierson TC, Margolick JB,

Siliciano RF, Siliciano JD. 2004. Resting CD4+ T cells from human immunodeficiency virus type
 1 (HIV-1)-infected individuals carry integrated HIV-1 genomes within actively transcribed host

151 genes. J Virol **78**:6122-6133.

152 10. Bullen CK, Laird GM, Durand CM, Siliciano JD, Siliciano RF. 2014. New ex vivo
153 approaches distinguish effective and ineffective single agents for reversing HIV-1 latency in vivo.
154 Nat Med 20:425-429.

155 11. Boom R, Sol CJ, Salimans MM, Jansen CL, Wertheim-van Dillen PM, van der Noordaa
156 J. 1990. Rapid and simple method for purification of nucleic acids. J Clin Microbiol 28:495-503.

12. Pasternak AO, Jurriaans S, Bakker M, Prins JM, Berkhout B, Lukashov VV. 2009.
Cellular levels of HIV unspliced RNA from patients on combination antiretroviral therapy with
undetectable plasma viremia predict the therapy outcome. PLoS One 4:e8490.

160 13. Sherrill-Mix S, Ocwieja KE, Bushman FD. 2015. Gene activity in primary T cells infected
 161 with HIV89.6: intron retention and induction of genomic repeats. Retrovirology 12:79.

14. Brown PH, Tiley LS, Cullen BR. 1991. Efficient polyadenylation within the human
 immunodeficiency virus type 1 long terminal repeat requires flanking U3-specific sequences. J Virol
 65:3340-3343.

165 15. Das AT, Klaver B, Berkhout B. 1999. A hairpin structure in the R region of the human
166 immunodeficiency virus type 1 RNA genome is instrumental in polyadenylation site selection. J
167 Virol 73:81-91.

16. Clement JQ, Qian L, Kaplinsky N, Wilkinson MF. 1999. The stability and fate of a spliced
 intron from vertebrate cells. RNA 5:206-220.

170 17. Kaiser P, Joos B, Niederost B, Weber R, Gunthard HF, Fischer M. 2007. Productive
171 human immunodeficiency virus type 1 infection in peripheral blood predominantly takes place in
172 CD4/CD8 double-negative T lymphocytes. J Virol 81:9693-9706.

173 18. Siliciano RF, Greene WC. 2011. HIV latency. Cold Spring Harb Perspect Med 1:a007096.
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176 Figure Legends

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178 Figure 1. (A) HIV proviruses integrate in intronic regions of transcriptionally active host genes, in

the same (upper panel, sense) or opposite (lower panel, antisense) orientation with regard to local

180 host gene transcription. (B) A close-up of the 5' HIV region, with a schematic representation of real-

181 time PCR assays for detection of readthrough and gag RNA. LTR, long terminal repeat; ORF, open

182 reading frame; Ψ , HIV packaging signal (Psi).

183

184 Figure 2. Quantitation of the serially diluted plasmid pLAIART, which is a molecular clone of HIV-

185 1 harboring a deletion of the reverse transcriptase gene (7), with the U3-Psi nested real-time PCR

186 assay. Pre-amplification (15 cycles) was performed with the forward (5'-

187 AGTGGCGAGCCCTCAGATG-3') and reverse (5'-CAGCAAGCCGAGTCCT-3') primers in a

volume of 25 μl. Two microliters of this PCR reaction were used as input for a nested real-time PCR

189 performed with the forward (5'-CAGATGCTGCATATAAGCAGCTG-3') and reverse (5'-

190	CACAACAGACGGGGCACACAC-3')	primers	(10)	and	probe	(5'-(FAM)-
191 GAGCTCTCTGGCTAACTAGGGAACCC-(TAMRA)-3') in a total volume of 50 μl.						

192

193 Figure 3. Bland-Altman plot of the gag and U3-Psi HIV DNA measurements. Horizontal lines

194 indicate the average difference between the measurements, as well as average \pm standard deviation.

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Figure 4. Comparison of HIV-1 *gag* RNA and readthrough RNA: (A) in all patients, with undetectable values left-censored at the detection limits of corresponding assays shown by open circles, and (B) only in patients with detectable gag or readthrough RNA, (C) paired comparison in patients with detectable readthrough RNA, and (D) percentage of readthrough RNA in the HIV-1 *gag* RNA: only patients with detectable readthrough RNA are shown. Medians are shown in (A) and (B), and median and interquartile range is shown in (D).







