

Vaccine 23 (2005) 3493-3499

\/ucc⊪e

www.elsevier.com/locate/vaccine

Enhancement of CD4 and CD8 immunity by anti-CD137 (4-1BB) monoclonal antibodies during hepatitis C vaccination with recombinant adenovirus

Laura Arribillaga^a, Pablo Sarobe^a, Ainhoa Arina^a, Marta Gorraiz^a, Francisco Borrás-Cuesta^a, Juan Ruiz^a, Jesús Prieto^a, Lieping Chen^b, Ignacio Melero^{a,1}, Juan José Lasarte^{a,*,1}

^a Division of Hepatology and Gene Therapy, University Clinic, Faculty of Medicine, Center for Applied Medical Research (CIMA), University of Navarra, Pio XII 55, 31008 Pamplona, Spain ^b Department of Immunology, Mayo Clinic, Rochester, MN, USA

> Received 9 September 2004; received in revised form 19 January 2005; accepted 4 February 2005 Available online 8 March 2005

Abstract

The induction of protective or therapeutic cellular immunity against hepatitis C virus (HCV) is a difficult goal. In a previous work we showed that immunization with a recombinant adenovirus encoding HCV-NS3 (RAdNS3) could partially protect mice from challenge with a vaccinia virus encoding HCV antigens. We sought to investigate whether systemic administration of an immunostimulatory monoclonal antibody directed against the lymphocyte surface molecule CD137 could enhance the immunity elicited by RAdNS3. It was found that treatment with anti-CD137 mAb after the administration of a suboptimal dose of RAdNS3 enhanced cytotoxic and T helper cell responses against HCV NS3. Importantly, the ability of RAdNS3 to induce protective immunity against challenge with a recombinant vaccinia virus expressing HCV proteins was markedly augmented. Thus, combination of immunostimulatory anti-CD137 mAb with recombinant adenoviruses expressing HCV proteins might be useful in strategies of immunization against HCV. © 2005 Elsevier Ltd. All rights reserved.

Keywords: 4-1BB; Vaccination; Hepatitis C virus

1. Introduction

Infection by HCV is the major cause of non-A, non-B hepatitis, affecting an estimated 170 million people worldwide [1]. It is characterised by a high tendency to chronicity, which often progresses to cirrhosis and liver cancer [2]. Viral clearance after acute hepatitis or after IFN- α therapy is usually associated with strong CD4 and CD8 T cell responses [3–12]. In particular, cellular T helper immune response against nonstructural NS3 HCV protein has been associated with viral clearance after acute infection, whereas absence of this Tcell response leads to viral persistence and chronic hepatitis [9,13]. Several studies have also detected cytotoxic T cell responses against NS3 protein in HCV patients [14–16]. Thus, NS3 might be a good target for the development of anti-HCV prophylactic or therapeutic vaccination.

Recombinant viruses constitute an attractive strategy to induce strong cellular immune responses. In a previous work we showed that the replication-deficient adenovirus RAdNS3 expressing HCV NS3 protein was able to induce both CD4⁺ and CD8⁺ cellular immunity [17]. When mice were immunized with 1×10^9 pfu of RAdNS3, 60% of the animals were protected against challenge with a recombinant vaccinia virus expressing HCV proteins (vHCV1-3011). However, when the dose of RAdNS3 was reduced to 5×10^8 pfu, only a marginal

^{*} Corresponding author. Tel.: +34 948 194700x3010; fax: +34 948 194717. *E-mail addresses:* imelero@unav.es (I. Melero), jjlasarte@unav.es (J.J. Lasarte).

¹ I.M. and J.J.L share credit for senior authorship.

⁰²⁶⁴⁻⁴¹⁰X/\$ – see front matter 0 2005 Elsevier Ltd. All rights reserved. doi:10.1016/j.vaccine.2005.02.003

induction of anti-NS3 T cell responses were detected and no protection against vHCV1-3011 challenge was elicited. It has been recently described that HCV proteins might impair dendritic cell differentiation and mediate an immunoinhibitory effect on the induction of anti-HCV immune responses [18–20]. Thus, strategies aimed at augmenting the immunogenicity of the recombinant adenovirus expressing NS3 might have important implications for a potential anti-HCV vaccine.

Dendritic cells (DC) are a subset of antigen presenting cells with potent immunostimulatory properties for the induction of T cell responses [21]. These cells capture and process antigens, migrate to lymphoid tissues, express costimulatory molecules and produce cytokines and chemokines that attract and activate T cells. Interaction of these costimulatory molecules with their ligands constitute the needed "second signal" for the full activation of T cells. Thus, combination of an antigen with costimulatory signals on the immunization schedule may have a beneficial effect to enhance cellular immune responses against a defined antigen [22,23]. A number of costimulatory signals provided by members of the TNF receptor superfamily (TNFR) have been shown to augment T cell responses. Among these ligand-receptor pairs at the surface of DC and T cells that may amplify T cell responses, interaction of CD137 with its ligand CD137L, has been shown to activate strongly T cell immunity (reviewed in [24]).

CD137 is expressed on activated, but not resting T cells [25]. Also, CD137 expression has been detected on B cells, macrophages, dendritic cells, activated NK cells, or eosinophils although the physiological significance of the expression on these cell types remains to be elucidated (reviewed in [26]). A single ligand for CD137 has been identified whose expression has been found on activated dendritic cells, B cells and macrophages [27-30]. There is ample evidence that CD137 driven signals are potent for $CD8^+$ T cell stimulation [23,31–40] and if provided together with those signals from CD28 and TCR, the T lymphocytes reach optimal levels of activation [23,34,38,39]. Thus, treatments with agonistic anti-CD137 monoclonal antibodies have shown to induce potent CTL-mediated antitumor effects [31,41] synergizing with tumor antigen immunization [41,42].

In the present study, we have studied whether the administration of anti-CD137 after immunization with a suboptimal dose of RAdNS3 improves the anti-HCV immune response induced in mice. As a surrogate for HCV infection (which does not infect mice), mice immunized with a non-protective dose of RAdNS3 followed by anti-CD137 antibody administration were challenged with a recombinant vaccinia virus expressing HCV polyprotein (vHCV1-3011). As discussed below, we show that co-administration of anti-CD137 antibodies strongly potentiates both CD4⁺ and CD8⁺ T cell responses against HCV NS3 protein and achieves full protection of mice from infection with vHCV1-3011.

2. Materials and methods

2.1. Mice

Female BALB/c mice, 4–6 weeks old were purchased from Harlan (Barcelona, Spain), hosted in appropriated animal care facilities during the experimental period and handled following the Institutional guidelines required for experimentation with animals.

2.2. Cells and viruses

Two hundred and ninty-three cells (ECACC no.: 85120602), derived from human embryonic kidney and stably transfected with the E1 region of the adenovirus type 5 (Ad5), were used for generation and propagation of the recombinant adenoviruses. Recombinant adenovirus expressing hepatitis NS3 (HCV) protein (RAdNS3) under the control of the cytomegalovirus major immediate early promoter was generated as described [17]. The recombinant adenovirus was propagated on 293 cells and purified in a CsCl isopicnic banding step. Viral band was dialyzed against 0.01 M Tris, pH 8.0. At this stage, the virus was kept in aliquots at -80°C. P815 cells (ATCC TIB64) were used as target cells for cytotoxicity assays. BSC-1 cells (kindly provided by Dr. J.A. Berzofsky, NIH Bethesda, MD) were used for titration of vaccinia virus in ovaries. These cell lines were cultured in RPMI-1640 medium plus 10% foetal calf serum, antibiotics and 5×10^{-5} M 2-mercaptoethanol at 37 °C and 5% CO₂. Vaccinia virus vHCV1-3011 expressing HCV polyprotein was kindly provided by Dr. CM Rice (Washington University School of Medicine, St. Louis, MO).

2.3. NS3 recombinant protein and peptide synthesis

The HCV NS3 helicase domain from HCV H (amino acids 1192–1458) was expressed in *Escherichia coli* and purified as previously described [17]. Peptide p1215, which encompasses an immunodominant cytotoxic T cell epitope within NS3 [17], was synthesized by the solid phase method using a multiple synthesizer as previously described [43], analyzed by HPLC and used without further purification.

2.4. Production and purification of anti-CD137 mAb

A rat IgG2a against murine CD137 was produced as previously described [41]. The protein in the culture supernatants was purified using a HiTrap protein G-sepharose column (Amersham Pharmacia Biotech, Piscataway, NJ) and dialyzed in LPS-free PBS. Endotoxin levels were tested using a Quantitative Chromogenic Limulus Amebocyte Lysate assay (Bio-Whittaker) and were <0.5 EU/ μ g protein.

2.5. Measurement of cytotoxic T cell activity after immunization with RAdNS3

Mice were immunized i.p. with 5×10^8 pfu of RAdNS3 virus in 500 µl of PBS. Four days after immunization they received an i.p. administration of 100 µg of anti-CD137 monoclonal antibody, 100 µg of rat IgG or saline (three mice per group). Twelve to 15 days after immunization, spleens were removed, homogenized and 8×10^5 cells cultured in 96-well plates in RPMI-1640 medium supplemented with 10% fetal calf serum, antibiotics and 5×10^{-5} M of 2-mercaptoethanol, in the presence or absence of peptide p1215 (10 µg/ml). Five days later, cytotoxic activity was measured as previously described [44] using a conventional cytotoxicity assay using radio-labeled P815 cells pulsed with p1215 as target cells.

2.6. Cytokine measurement

Spleen cells from immunized animals were plated on 96well U-bottomed plates at 8×10^5 cells/well with culture medium in the presence or absence of NS3 protein (1 µg/ml), or peptide p1215 (25 µg/ml) to a final volume of 0.25 ml. In some experiments, 100 µg/ml of anti-CD4 or anti-CD8 antibodies (obtained from rat anti-mouse hybridomas GK 1.5 and H35 17.2, respectively) were added to the cultures. Supernatants (50 µl) were removed 48 h later for the measurement of IFN- γ . IFN- γ production was measured by ELISA (Pharmingen, San Diego, CA) according to manufacturer's instructions.

2.7. In vivo protection against infection with a recombinant vaccinia virus expressing HCV proteins

Immunized mice were challenged i.p. with 5×10^6 pfu of the recombinant vaccinia vHCV1-3011 expressing HCV polyprotein (10 mice per group). Three days after vaccinia challenge, mice were sacrificed and ovaries removed, weighted, homogenized, sonicated and assayed for vHCV1-3011 titre by plating serial 10-fold dilutions of samples on a plate of BSC-1 indicator cells. After 2 days of culture, cells were stained with crystal violet to detect pfu at each serial dilution.

2.8. Statistics

Statistical analysis was carried out to evaluate the protective effect of adenovirus immunization. Data were analysed by the Kruskal–Wallis test, followed by Mann–Whitney's *U*-test as a multiple comparison test with Bonferroni adjustment. All statistical analyses were performed with SPSS v6.0 for Windows package. All *p*-values were twotailed.

3. Results

3.1. Anti-CD137 monoclonal antibody administration after immunization with a recombinant adenovirus expressing HCV-NS3 protein enhances CD4⁺ T cell response against NS3

In a previous study, we showed that i.p. immunization with 10⁹ pfu of a recombinant adenovirus expressing HCV-NS3 protein (RAdNS3) was able to induce both T helper and T cytotoxic anti-NS3 responses [17]. The elicited immune response was able to protect around 60% of mice against challenge with the recombinant vaccinia vHCV1-3011 expressing HCV proteins. However, when the dose of adenovirus used for immunization is reduced to 5×10^8 pfu, neither T helper nor T cytotoxic T cell response against NS3 are detected and no protection against vHCV1-3011 was observed. Induction, expansion and maintenance of T cell responses are achieved through intricate and precise interactions between CD4⁺ T cells, CD8⁺ T cells and dendritic cells. Among the different ligand-receptor pairs implicated, interaction of CD137L expressed on dendritic cells and CD137 on T cells has been shown to be very important for maintenance and full expansion of activated T cells. For these reasons we tested the capacity of an agonistic anti-CD137 specific monoclonal antibody to enhance the immune response against an antigen injected at a suboptimal dose. Thus, groups of mice were immunized i.p. first with 5×10^8 pfu of RAdNS3 followed by the i.p. administration of 100 µg of anti-CD137. As controls, two groups of RAdNS3 immunized mice were injected with saline or with 100 µg of rat IgG. Also, we included other control group of mice treated only with anti CD137 antibodies. Mice were sacrificed 12-15 days after adenovirus immunization and spleen cells were cultured in the presence or absence of NS3 protein. IFN-y present in the culture supernatants was measured by ELISA. As it is shown in Fig. 1A, immunization with 5×10^8 pfu of RAdNS3 did not induce T cells able to produce IFN-y in response to NS3 recombinant protein. However, if RAdNS3 immunization is followed by anti-CD137 administration, spleen cells produce high amounts of IFN- γ in response to NS3. Administration of anti-CD137 in the absence of a previous immunization with RAdNS3, or the administration of rat IgG after RAdNS3 immunization did not have any effect on IFN- γ production. The IFN- γ production was mediated by CD4⁺ T cells since addition of anti-CD4 to the cultures, but not anti-CD8 or control antibodies, inhibited the production of this cytokine (Fig. 1B).

3.2. Anti-CD137 antibody administration after immunization with RAdNS3 enhances CTL responses against NS3

To study the CTL response induced by RAdNS3 immunization, we measured the CTL activity against peptide p1215, which, as we have previously shown [17], encompasses an immunodominant cytotoxic T cell epitope within



Fig. 1. Administration of anti-CD137 mAb after immunization with RAdNS3 enhances CD4⁺ T cell response against NS3 protein. (A) Spleen cells from mice immunized with RAdNS3, RAdNS3 plus anti-CD137, anti-CD137 alone or with RAdNS3 plus rat IgG (three mice per group), were cultured in vitro in the presence or absence of recombinant NS3 protein. Culture supernatants were harvested 48 h later and the presence of IFN- γ in these supernatants was measured by ELISA. (B) Spleen cells from mice immunized with RAdNS3 plus anti CD137 were cultured in the absence or presence of NS3. Anti-CD4, anti-CD8 or rat IgG were added to the cultures and IFN- γ secreted to the supernatant was measured by ELISA. Bars represent the mean average of triplicate samples + S.E.M.

NS3. Thus, spleen cells from the groups of mice described above were cultured in the presence or absence of peptide p1215. As in the case of the T helper response, we were unable to detect cytolytic activity against P815 target cells pulsed with peptide p1215 in mice who had received 5×10^8 pfu of RAdNS3. However, if RAdNS3 immunization is followed by anti-CD137 administration, a significant increase on CTL activity was observed (Fig. 2A). This enhancement was also observed when we measured the IFN- γ production of spleen cells in the presence of peptide p1215 (Fig. 2B).

3.3. Anti-CD137 antibody administration after immunization with RAdNS3 confers protection against infection with vHCV1-3011 expressing HCV polyprotein

To analyze in vivo the efficacy of immunization with a suboptimal dose of RAdNS3 followed by anti-CD137 administration we measured the protection of mice against infection with vHCV1-3011 expressing HCV polyprotein. Thus, 10 days after adenovirus immunization, mice were challenged with 5×10^6 pfu of vHCV1-3011. Groups of mice, immunized with RAdNS3 plus rat IgG or plus saline as well as a group of mice injected with anti-CD137 alone were included as controls. Three days after challenge with vHCV1-3011, mice were sacrificed, the ovaries were extracted and vaccinia viral load was determined as described in methods. As it is shown in Fig. 3, immunization with RAdNS3



Fig. 2. Administration of anti-CD137 mAb after immunization with RAdNS3 enhances cytotoxic T cell response against peptide p1215 from NS3. Spleen cells from mice immunized with RAdNS3, RAdNS3 plus anti-CD137, or with RAdNS3 plus rat IgG (three mice per group) were cultured in vitro in the presence or absence of 10 μ g/ml of peptide p1215 from NS3. (A) After 5 days of culture, CTL activity against P815 target cell pulsed with p1215 peptide was measured using the ⁵¹Cr release assay. An effector:target ratio of 25 was used. (B) IFN- γ production after 2 days of culture in the presence or absence of peptide p1215 was measured by ELISA. Bars represent the mean average of triplicate samples + S.E.M.

or with saline was unable to protect mice against challenge. Similarly, administration of anti-CD137 antibodies alone, 6 days before vaccinia challenge did not protect mice against infection. However, immunization with RAdNS3 followed by anti-CD137 administration was able to fully protect mice from challenge (reduction of viremia under the limit of de-



Fig. 3. Anti-CD137 antibody administration after immunization with RAdNS3 confers protection against infection with vHCV1-3011 expressing HCV polyprotein. Groups of 10 mice were immunized with: (i) RAdNS3; (ii) RAdNS3 plus anti-CD137; (iii) RAdNS3 plus rat IgG; (iv) anti-CD137 alone; or (v) with saline: 10 days after immunization mice were challenged i.p. with 5×10^6 pfu of vHCV1-3011. Three days after challenge, ovaries were harvested and vaccinia titre was measured by plating on BSC-1 cells. Viral load is expressed as the log of virus titre per mg of ovary. Bars represent the mean average of virus titres from 10 mice + S.E.M. Doted line represents the limit of detection of vaccinia infection in the BSC-1-based bioassay. Similar results were obtained in two independent experiments.

tection in the BSC-1 cell-based bioassay). Administration of rat IgG or saline after RAdNS3 immunization did not have any protective effect.

4. Discussion

T cell responses against viral antigens are present in chronic HCV carriers. However, they are weak and inefficient [3–10,14,15,45]. In fact, the frequency of CTL precursors against HCV proteins found in patients with chronic hepatitis C is very low, in comparison to that found in HIV or CMV infections [46–48]. It has been described that HCV can infect DC and that expression of HCV proteins inside DC induces an impairment of its stimulatory functions [20] and this impairment might lead an inefficient priming of anti-HCV T cell responses [19,29,49]. Thus, there is a need for the development of strategies able to induce potent immune responses against HCV proteins that could be effective in the treatment and prevention of HCV infection.

Costimulatory signals are essential for full activation and proliferation of activated T cells and it is generally accepted that in the absence of these signals, the T cell response is ineffective and may often lead to death or unresponsiveness of antigen-specific T cells. CD137 molecule has been implicated in providing expansion and survival signals to T cells, and thus, might be a target for strategies aimed at augmenting weak T cell responses. In the present work we have tested the effect of the administration of an agonistic anti-CD137 antibody after immunization with a suboptimal dose of a recombinant adenovirus expressing HCV-NS3 protein (RAdNS3) on the induction of anti-NS3 CD4⁺ and CD8⁺ cellular immune responses. We have administered the anti-CD137 antibody 4 days after immunization with the adenovirus because the expression of CD137 molecule on the surface of T cells is induced after antigen driven-TCR activation of T cells, with a peak expression at 48-72 h [50]. After this immunization schedule we found that anti-CD137 administration strongly improved IFN- γ production by CD4⁺ T cells in response to NS3 protein (Fig. 1). It has been described that the agonistic anti-CD137 antibodies in vivo have a preferential role as a costimulation molecule for CD8⁺ T cells, with no detectable effect on CD4⁺ T cells [34-36,51]. Moreover, some experiments have suggested that CD137 stimulation might induce CD4⁺ T cell anergy [52,53] or activationinduced T cell death [54]. However, there are several reports in in vitro models supporting the costimulatory effect of CD137 on CD4⁺ T cell proliferation and survival activation. [34,50,54–58]. In addition, recent reports using TCR transgenic mice show a positive role of CD137 in CD4⁺ T cell activation in vivo [59,60]. Further work in defined in vivo systems of antigen-specific CD4⁺ T cells is needed to clarify these discrepancies. The recent finding of CD137 on regulatory T cells [61] might hint the research on theses issues. In any case, we have found that anti-CD137 administration following vaccination with RAdNS3 clearly augments CD4⁺

responses against HCV NS3, and this finding might have important implications for vaccination against HCV infection.

Administration of anti-CD137 antibodies after RAdNS3 injection allowed the induction of a strong CTL response against target cells pulsed with peptide p1215, which encompasses an immunodominant epitope from NS3 in BALB/c. This increase in CTL activity was associated with a marked increase in the production of IFN-y in response to the peptide. It has been described that in vivo administration of an agonistic anti-CD137 antibody preferentially expands CD8⁺ T cells that recognise non-dominant epitopes giving rise to broader immune responses (in a phenomenon named $CD8^+$ epitope broadening) [62]. We have tested if the anti CD137 mAb administration was able to expand CD8⁺ T cells specific for other non-dominant epitopes from NS3 described in our previous publication [17]. However, we have only found an improvement in both CTL and IFN- γ production capacity in response to the immunodominant p1215 and not in response to the other peptides (data not shown).

We tested the capacity of this immunization protocol combining RAdNS3 and anti-CD137 antibody administration to protect mice from the infection of the recombinant replicative vaccinia virus vHCV1-3011 expressing the HCVpolyprotein, as a surrogate for HCV infection. We show in this model that vaccination of mice with a suboptimal dose of RAdNS3 is unable to protect mice from vaccinia challenge. However, when RAdNS3 immunized mice were supplemented with anti-CD137 administration, a full protection against challenge with the recombinant vHCV1-3011 was observed. Our data suggest that anti-CD137 administration after immunization with an antigen will provide a valuable tool for the induction of strong antiviral CD4 and CD8 T cell immune responses. Recombinant adenoviral vectors expressing HCV proteins, combined with anti CD137 administration might be useful, not only in prophylactic vaccination, but also in the active immunotherapy of HCV chronically infected patients.

Acknowledgements

The authors thank Oihana Murillo for her help on anti-CD137 antibody production and purification and to Juan Percaz and Javier Guillen for technical collaboration at the animal facilities. This work was supported in part by grants from Instituto de Salud Carlos III (PI030566) to J.J. Lasarte, from Ministerio de Ciencia y Tecnología (SAF2001-1119) to P. Sarobe, from CICYT (SAF2000-0059) to F. Borrás-Cuesta, from the European Union (QLK2-CT-1999-00356) to J.J. Lasarte and J Ruiz, from CICYT (SAF2002-0327) to J. Prieto, from CICYT (SAF2002-0373) and RETIC C03/10 to I. Melero, and by Instituto de Salud Carlos III (C03/02). This project was funded by "UTE project CIMA".

References

- World-Health-Organisation. Hepatitis C. Wkly Epidemiol Rec 1997;72:65.
- [2] Dienstag JL. Non-A, non-B hepatitis. I. Recognition, epidemiology, and clinical features. Gastroenterology 1983;85(2):439–62.
- [3] Botarelli P, Brunetto MR, Minutello MA, Calvo P, Unutmaz D, Weiner AJ, et al. T-lymphocyte response to hepatitis C virus in different clinical courses of infection. Gastroenterology 1993;104(2):580–7.
- [4] Ferrari C, Valli A, Galati L, Penna A, Scaccaglia P, Giuberti T, et al. T-cell response to structural and nonstructural hepatitis C virus antigens in persistent and self-limited hepatitis C virus infections. Hepatology 1994;19(2):286–95.
- [5] Takaki A, Wiese M, Maertens G, Depla E, Seifert U, Liebetrau A, et al. Cellular immune responses persist and humoral responses decrease two decades after recovery from a single-source outbreak of hepatitis C. Nat Med 2000;6(5):578–82.
- [6] Hoffmann RM, Diepolder HM, Zachoval R, Zwiebel FM, Jung MC, Scholz S, et al. Mapping of immunodominant CD4⁺ T lymphocyte epitopes of hepatitis C virus antigens and their relevance during the course of chronic infection. Hepatology 1995;21(3):632–8.
- [7] Lasarte JJ, Garcia Granero M, Lopez A, Casares N, Garcia N, Civeira MP, et al. Cellular immunity to hepatitis C virus core protein and the response to interferon in patients with chronic hepatitis C. Hepatology 1998;28(3):815–22.
- [8] Aechmann M, Ihlenfeldt HG, Braunschweiger I, Giers G, Jung G, Matz B, et al. T- and B-cell responses to different hepatitis C virus antigens in patients with chronic hepatitis C infection and in healthy anti-hepatitis C virus—positive blood donors without viremia. Hepatology 1996;24(4):790–5.
- [9] Diepolder HM, Zachoval R, Hoffmann RM, Wierenga EA, Santantonio T, Jung MC, et al. Possible mechanism involving T-lymphocyte response to non-structural protein 3 in viral clearance in acute hepatitis C virus infection. Lancet 1995;346(8981):1006–7.
- [10] Lohr HF, Schmitz D, Arenz M, Weyer S, Gerken G. Meyer zum Buschenfelde KH The viral clearance in interferon-treated chronic hepatitis C is associated with increased cytotoxic T cell frequencies. J Hepatol 1999;31(3):407–15.
- [11] Gruener NH, Gerlach TJ, Jung MC, Diepolder HM, Schirren CA, Schraut WW, et al. Association of hepatitis C virus-specific CD8⁺ T cells with viral clearance in acute hepatitis C. J Infect Dis 2000;181(5):1528–36.
- [12] Thimme R, Oldach D, Chang KM, Steiger C, Ray SC, Chisari FV. Determinants of viral clearance and persistence during acute hepatitis C virus infection. J Exp Med 2001;194(10):1395–406.
- [13] Pape GR, Gerlach TJ, Diepolder HM, Gruner N, Jung M, Santantonio T. Role of the specific T-cell response for clearance and control of hepatitis C virus. J Viral Hepat 1999;6(Suppl 1):36–40.
- [14] He XS, Rehermann B, Lopez-Labrador FX, Boisvert J, Cheung R, Mumm J, et al. Quantitative analysis of hepatitis C virus-specific CD8(+) T cells in peripheral blood and liver using peptide-MHC tetramers. Proc Natl Acad Sci USA 1999;96(10):5692–7.
- [15] Cerny A, McHutchison JG, Pasquinelli C, Brown ME, Brothers MA, Grabscheid B, et al. Cytotoxic T lymphocyte response to hepatitis C virus-derived peptides containing the HLA A2.1 binding motif. J Clin Invest 1995;95(2):521–30.
- [16] Kurokohchi K, Akatsuka T, Pendleton CD, Takamizawa A, Nishioka M, Battegay M, et al. Use of recombinant protein to identify a motifnegative human cytotoxic T-cell epitope presented by HLA-A2 in the hepatitis C virus NS3 region. J Virol 1996;70(1):232–40.
- [17] Arribillaga L, de Cerio AL, Sarobe P, Casares N, Gorraiz M, Vales A, et al. Vaccination with an adenoviral vector encoding hepatitis C virus (HCV) NS3 protein protects against infection with HCV-recombinant vaccinia virus. Vaccine 2002;21(3–4):202–10.
- [18] Dolganiuc A, Kodys K, Kopasz A, Marshall C, Do T, Romics Jr L, et al. Hepatitis C virus core and nonstructural protein 3 proteins

induce pro- and anti-inflammatory cytokines and inhibit dendritic cell differentiation. J Immunol 2003;170(11):5615–24.

- [19] Sarobe P, Lasarte JJ, Casares N, Lopez-Diaz de Cerio A, Baixeras E, Labarga P, et al. Abnormal priming of CD4(+) T cells by dendritic cells expressing hepatitis C virus core and E1 proteins. J Virol 2002;76(10):5062–70.
- [20] Sarobe P, Lasarte JJ, Zabaleta A, Arribillaga L, Arina A, Melero I, et al. Hepatitis C virus structural proteins impair dendritic cell maturation and inhibit in vivo induction of cellular immune responses. J Virol 2003;77(20):10862–71.
- [21] Banchereau J, Steinman RM. Dendritic cells and the control of immunity. Nature 1998;392(6673):245–52.
- [22] Oh S, Hodge JW, Ahlers JD, Burke DS, Schlom J, Berzofsky JA. Selective induction of high avidity CTL by altering the balance of signals from APC. J Immunol 2003;170(5):2523–30.
- [23] Maus MV, Thomas AK, Leonard DG, Allman D, Addya K, Schlienger K, et al. Ex vivo expansion of polyclonal and antigenspecific cytotoxic T lymphocytes by artificial APCs expressing ligands for the T-cell receptor CD28 and 4-1BB. Nat Biotechnol 2002;20(2):143–8.
- [24] Salih HR, Kiener PA, Nussler V. 4-1 BB ligand—just another costimulating molecule. Int J Clin Pharmacol Ther 2002;40(8):348– 53.
- [25] Pollok KE, Kim YJ, Zhou Z, Hurtado J, Kim KK, Pickard RT, et al. Inducible T cell antigen 4-1BB Analysis of expression and function. J Immunol 1993;150(3):771–81.
- [26] Croft M. Co-stimulatory members of the TNFR family: keys to effective T-cell immunity. Nat Rev Immunol 2003;3(8):609–20.
- [27] Wilcox RA, Chapoval AI, Gorski KS, Otsuji M, Shin T, Flies DB, et al. Cutting edge: expression of functional CD137 receptor by dendritic cells. J Immunol 2002;168(9):4262–7.
- [28] Futagawa T, Akiba H, Kodama T, Takeda K, Hosoda Y, Yagita H, et al. Expression and function of 4-1BB and 4-1BB ligand on murine dendritic cells. Int Immunol 2002;14(3):275–86.
- [29] Goodwin RG, Din WS, Davis-Smith T, Anderson DM, Gimpel SD, Sato TA, et al. Molecular cloning of a ligand for the inducible T cell gene 4-1BB: a member of an emerging family of cytokines with homology to tumor necrosis factor. Eur J Immunol 1993;23(10):2631–41.
- [30] Pollok KE, Kim YJ, Hurtado J, Zhou Z, Kim KK, Kwon BS. 4-1BB T-cell antigen binds to mature B cells and macrophages, and costimulates anti-mu-primed splenic B cells. Eur J Immunol 1994;24(2):367–74.
- [31] Melero I, Shuford WW, Newby SA, Aruffo A, Ledbetter JA, Hellstrom KE, et al. Monoclonal antibodies against the 4-1BB T-cell activation molecule eradicate established tumors. Nat Med 1997;3(6):682–5.
- [32] Takahashi C, Mittler RS, Vella AT. Cutting edge: 4-1BB is a bona fide CD8 T cell survival signal. J Immunol 1999;162(9):5037–40.
- [33] Cooper D, Bansal-Pakala P, Croft M. 4-1BB (CD137) controls the clonal expansion and survival of CD8 T cells in vivo but does not contribute to the development of cytotoxicity. Eur J Immunol 2002;32(2):521–9.
- [34] DeBenedette MA, Wen T, Bachmann MF, Ohashi PS, Barber BH, Stocking KL, et al. Analysis of 4-1BB ligand (4-1BBL)-deficient mice and of mice lacking both 4-1BBL and CD28 reveals a role for 4-1BBL in skin allograft rejection and in the cytotoxic T cell response to influenza virus. J Immunol 1999;163(9):4833–41.
- [35] Tan JT, Whitmire JK, Ahmed R, Pearson TC, Larsen CP. 4-1BB ligand, a member of the TNF family, is important for the generation of antiviral CD8 T cell responses. J Immunol 1999;163(9):4859– 68.
- [36] Bertram EM, Lau P, Watts TH. Temporal segregation of 4-1BB versus CD28-mediated costimulation: 4-1BB ligand influences T cell numbers late in the primary response and regulates the size of the T cell memory response following influenza infection. J Immunol 2002;168(8):3777–85.

- [37] Kwon B, Lee HW, Kwon BS. New insights into the role of 4-1BB in immune responses: beyond CD8⁺ T cells. Trends Immunol 2002;23(8):378–80.
- [38] Diehl L, van Mierlo GJ, den Boer AT, van der Voort E, Fransen M, van Bostelen L, et al. In vivo triggering through 4-1BB enables Th-independent priming of CTL in the presence of an intact CD28 costimulatory pathway. J Immunol 2002;168(8):3755–62.
- [39] Wen T, Bukczynski J, Watts TH. 4-1BB ligand-mediated costimulation of human T cells induces CD4 and CD8 T cell expansion, cytokine production, and the development of cytolytic effector function. J Immunol 2002;168(10):4897–906.
- [40] Bukczynski J, Wen T, Watts TH. Costimulation of human CD28-T cells by 4-1BB ligand. Eur J Immunol 2003;33(2):446–54.
- [41] Wilcox RA, Flies DB, Zhu G, Johnson AJ, Tamada K, Chapoval AI, et al. Provision of antigen and CD137 signaling breaks immunological ignorance, promoting regression of poorly immunogenic tumors. J Clin Invest 2002;109(5):651–9.
- [42] Tirapu I, Arina A, Mazzolini G, Duarte M, Alfaro C, Feijoo E, et al. Improving efficacy of interleukin-12-transfected dendritic cells injected into murine colon cancer with anti-CD137 monoclonal antibodies and alloantigens. Int J Cancer 2004;110(1):51–60.
- [43] Borras Cuesta F, Golvano J, Sarobe P, Lasarte JJ, Prieto I, Szabo A, et al. Insights on the amino acid side-chain interactions of a synthetic T-cell determinant. Biologicals 1991;19(3):187–90.
- [44] Lasarte JJ, Sarobe P, Gullon A, Prieto J, Borras Cuesta F. Induction of cytotoxic T lymphocytes in mice against the principal neutralizing domain of HIV-1 by immunization with an engineered T-cytotoxic-T-helper synthetic peptide construct. Cell Immunol 1992;141(1): 211–8.
- [45] Franco A, Ferrari C, Sette A, Chisari FV. Viral mutations TCR antagonism and escape from the immune response. Curr Opin Immunol 1995;7(4):524–31.
- [46] Borysiewicz LK, Hickling JK, Graham S, Sinclair J, Cranage MP, Smith GL, et al. Human cytomegalovirus-specific cytotoxic T cells Relative frequency of stage-specific CTL recognizing the 72-kD immediate early protein and glycoprotein B expressed by recombinant vaccinia viruses. J Exp Med 1988;168(3):919–31.
- [47] Carmichael A, Jin X, Sissons P, Borysiewicz L. Quantitative analysis of the human immunodeficiency virus type 1 (HIV-1)-specific cytotoxic T lymphocyte (CTL) response at different stages of HIV-1 infection: differential CTL responses to HIV-1 and Epstein-Barr virus in late disease. J Exp Med 1993;177(2):249–56.
- [48] Lauer GM, Nguyen TN, Day CL, Robbins GK, Flynn T, McGowan K, et al. Human immunodeficiency virus type 1-hepatitis C virus coinfection: intraindividual comparison of cellular immune responses against two persistent viruses. J Virol 2002;76(6):2817–26.
- [49] Wedemeyer H, He XS, Nascimbeni M, Davis AR, Greenberg HB, Hoofnagle JH, et al. Impaired effector function of hepatitis C virus-

specific CD8⁺ T cells in chronic hepatitis C virus infection. J Immunol 2002;169(6):3447–58.

- [50] Cannons JL, Lau P, Ghumman B, DeBenedette MA, Yagita H, Okumura K, et al. 4-1BB ligand induces cell division, sustains survival, and enhances effector function of CD4 and CD8 T cells with similar efficacy. J Immunol 2001;167(3):1313–24.
- [51] Tan JT, Whitmire JK, Murali-Krishna K, Ahmed R, Altman JD, Mittler RS, et al. 4-1BB costimulation is required for protective anti-viral immunity after peptide vaccination. J Immunol 2000;164(5):2320–5.
- [52] Mittler RS, Bailey TS, Klussman K, Trailsmith MD, Hoffmann MK. Anti-4-1BB monoclonal antibodies abrogate T cell-dependent humoral immune responses in vivo through the induction of helper T cell anergy. J Exp Med 1999;190(10):1535–40.
- [53] Foell J, Strahotin S, O'Neil SP, McCausland MM, Suwyn C, Haber M, et al. CD137 costimulatory T cell receptor engagement reverses acute disease in lupus-prone NZB x NZW F1 mice. J Clin Invest 2003;111(10):1505–18.
- [54] Sun Y, Lin X, Chen HM, Wu Q, Subudhi SK, Chen L, et al. Administration of agonistic anti-4-1BB monoclonal antibody leads to the amelioration of experimental autoimmune encephalomyelitis. J Immunol 2002;168(3):1457–65.
- [55] Chu NR, DeBenedette MA, Stiernholm BJ, Barber BH, Watts TH. Role of IL-12 and 4-1BB ligand in cytokine production by CD28⁺ and CD28-T cells. J Immunol 1997;158(7):3081–9.
- [56] Gramaglia I, Cooper D, Miner KT, Kwon BS, Croft M. Costimulation of antigen-specific CD4 T cells by 4-1BB ligand. Eur J Immunol 2000;30(2):392–402.
- [57] Blazar BR, Kwon BS, Panoskaltsis-Mortari A, Kwak KB, Peschon JJ, Taylor PA. Ligation of 4-1BB (CDw137) regulates graft-versushost disease, graft-versus-leukemia, and graft rejection in allogeneic bone marrow transplant recipients. J Immunol 2001;166(5):3174–83.
- [58] Seko Y, Takahashi N, Oshima H, Shimozato O, Akiba H, Takeda K, et al. Expression of tumour necrosis factor (TNF) ligand superfamily co-stimulatory molecules CD30L, CD27L, OX40L, and 4-1BBL in murine hearts with acute myocarditis caused by Coxsackievirus B3. J Pathol 2001;195(5):593–603.
- [59] Dawicki W, Watts TH. Expression and function of 4-1BB during CD4 versus CD8 T cell responses in vivo. Eur J Immunol 2004;34(3):743–51.
- [60] Kim J, Choi SP, La S, Seo JS, Kim KK, Nam SH, et al. Constitutive expression of 4-1BB on T cells enhances CD4⁺ T cell responses. Exp Mol Med 2003;35(6):509–17.
- [61] Choi BK, Bae JS, Choi EM, Kang WJ, Sakaguchi S, Vinay DS, et al. 4-1BB-dependent inhibition of immunosuppression by activated CD4⁺CD25⁺ T cells. J Leukoc Biol 2003;23:23.
- [62] Halstead ES, Mueller YM, Altman JD, Katsikis PD. In vivo stimulation of CD137 broadens primary antiviral CD8⁺ T cell responses. Nat Immunol 2002;3(6):536–41.