

# HIV persistence on ART

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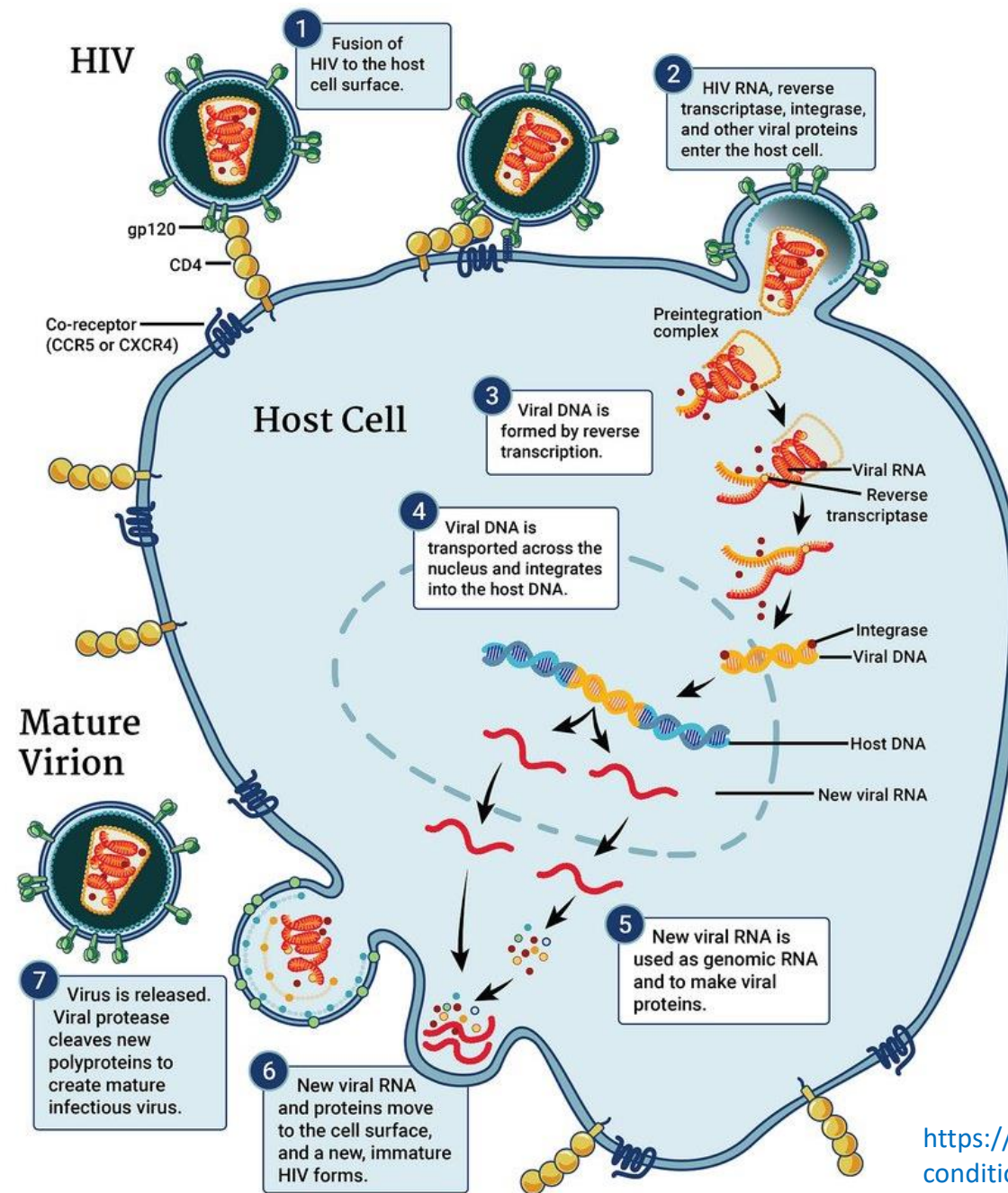


No conflict of interest to disclose

- Despite the success of ART, viral rebound is inevitable in almost all individuals when treatment is interrupted.
- The main obstacle to HIV cure is the persistence of HIV despite ART and plasma viral suppression to undetectable levels on commercial assays.
- Understanding the mechanisms of HIV persistence is essential for the development of strategies to induce HIV remission.

# Summary of presentation

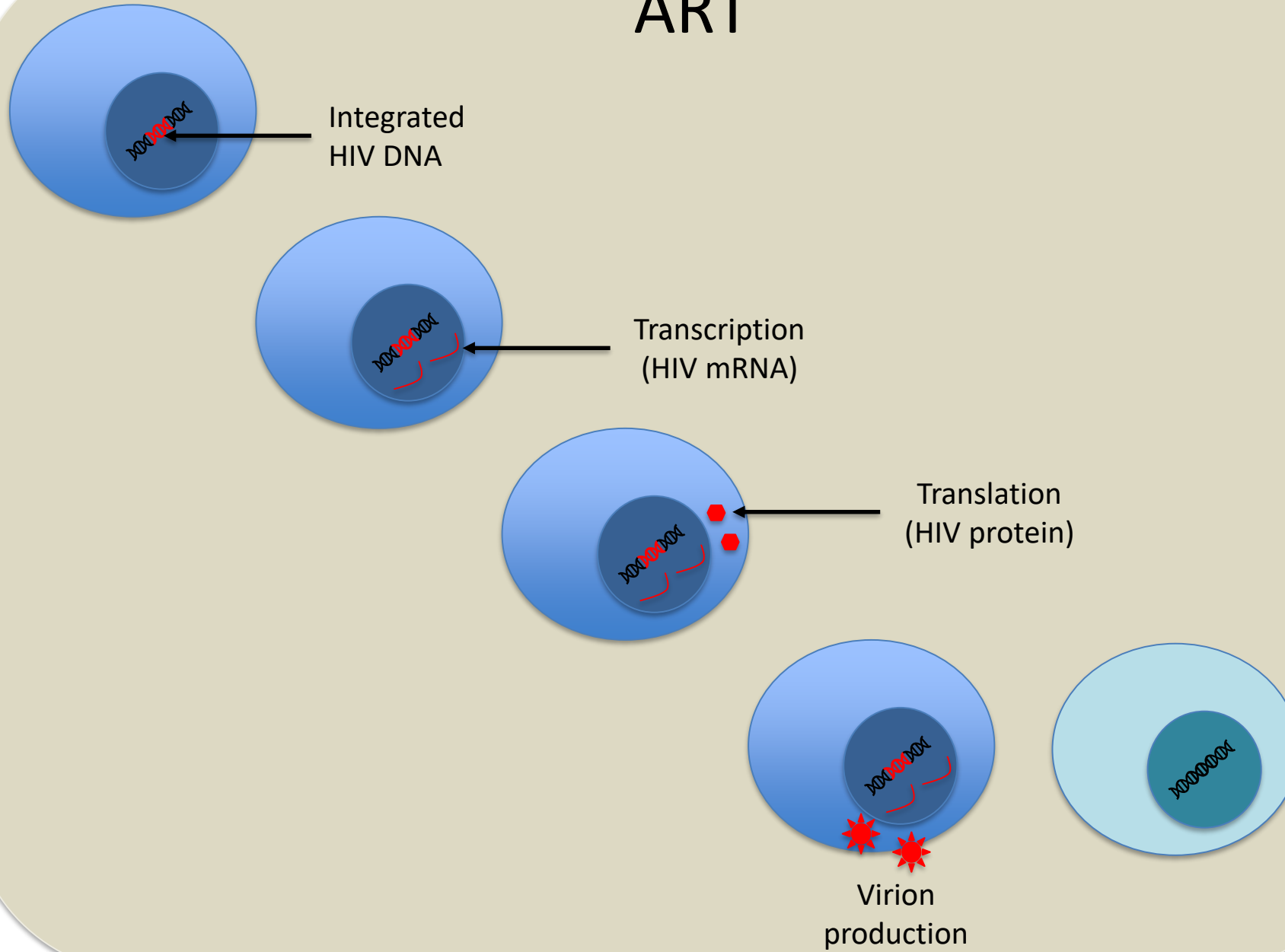
- Detection/quantification of HIV persistence
- Establishment of HIV persistence
- Effect of ART on HIV persistence
- Mechanisms of viral persistence on ART



<https://www.niaid.nih.gov/diseases-conditions/hiv-replication-cycle>

- HIV persistence on ART is due to the existence of
  1. Latent viral reservoir
    - made up of infected cells that harbor HIV DNA
    - during latency, these cells are transcriptionally silent but can later become activated and produce infectious HIV virion.
  2. Ongoing transcription and virus production

# ART

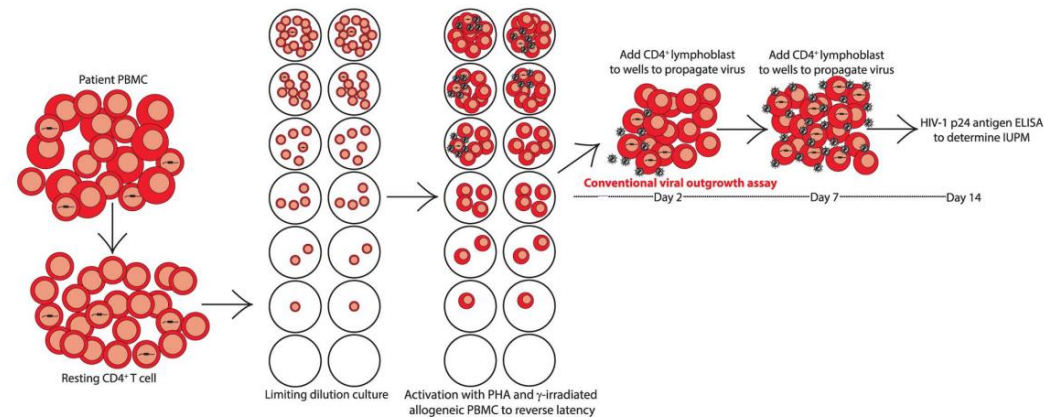


# Detecting/Quantifying HIV persistence



# Detecting and quantifying the latent HIV reservoir

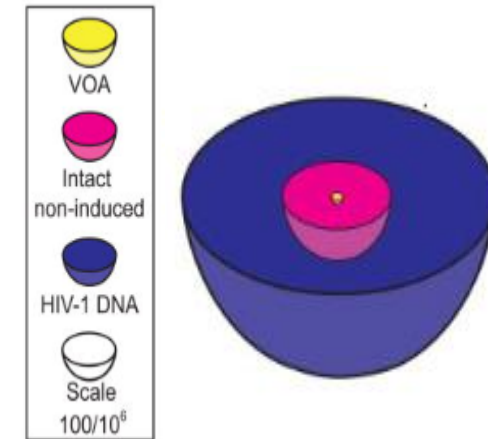
- QVOA (quantitative viral outgrowth assay)



Laird et al. HIV Protocols. Methods in Molecular Biology. 2016

- HIV DNA
  - Single-region PCR-based assay
- TILDA (Tat-/Rev-induced limiting dilution assay)

	QVOA	HIV DNA
Cell numbers required	~100 million PBMC	~5 million PBMC
Time required	~2 weeks	1 day
Indicate replication competency	Yes	No
	Under estimates	Over estimates



Ho et al. Cell. 2013

- Intact proviral DNA assay (IPDA)

- Digital droplet PCR assay detects intact, cell-associated, full-length genomic HIV DNA

Bruner et al. Nat. 2019

# Detecting and quantifying ongoing transcription

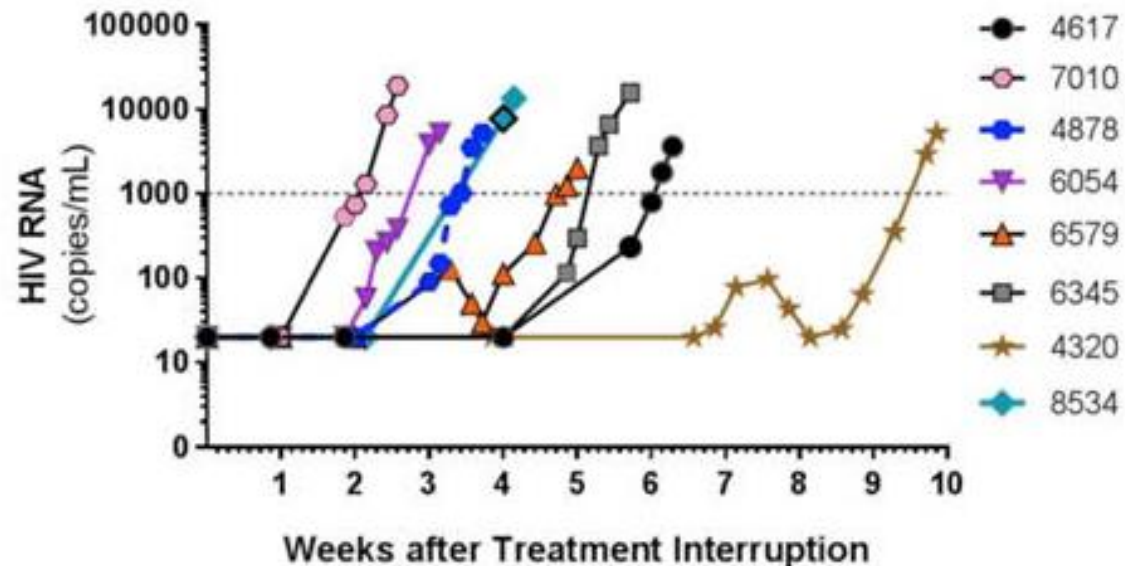
- Detects HIV RNA
  - Cell associated HIV-RNA
    - Presence does not necessarily imply productive replication
  - Single copy assay
    - Plasma (cell-free) RNA
    - Majority of individuals on ART with undetectable VL on conventional assay still have detectable HIV RNA on SCA

Malderelli et al. Plos Pathogen. 2007; Palmer et al. PNAS. 2008

# Establishment of HIV persistence

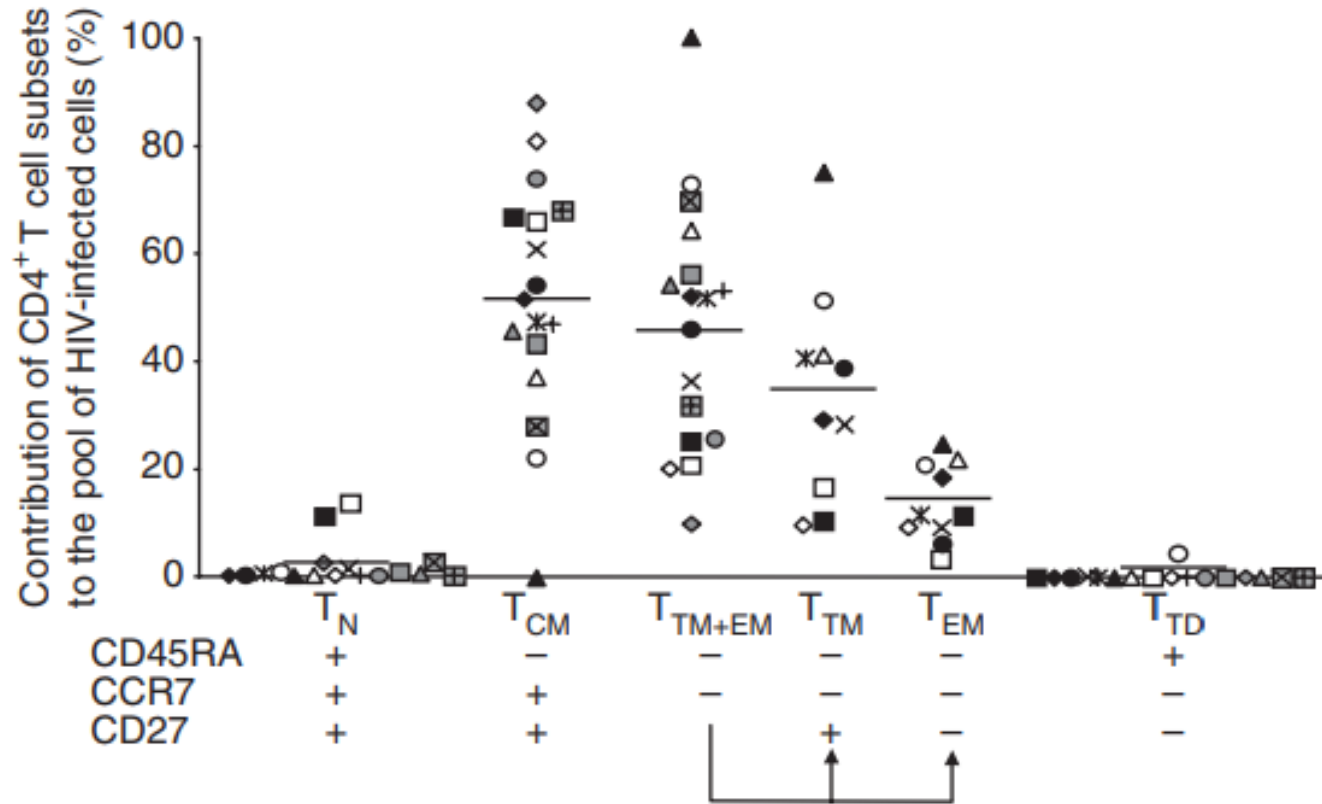
# The HIV reservoir is established very early

- Initiated ART during Fiebig I acute HIV infection
- On ART for a median of 2.8 years
- All experienced rapid viral load rebound following analytical treatment interruption



Colby et al. Nat Med. 2018

# Majority of the latent reservoir is in memory CD4+ cells



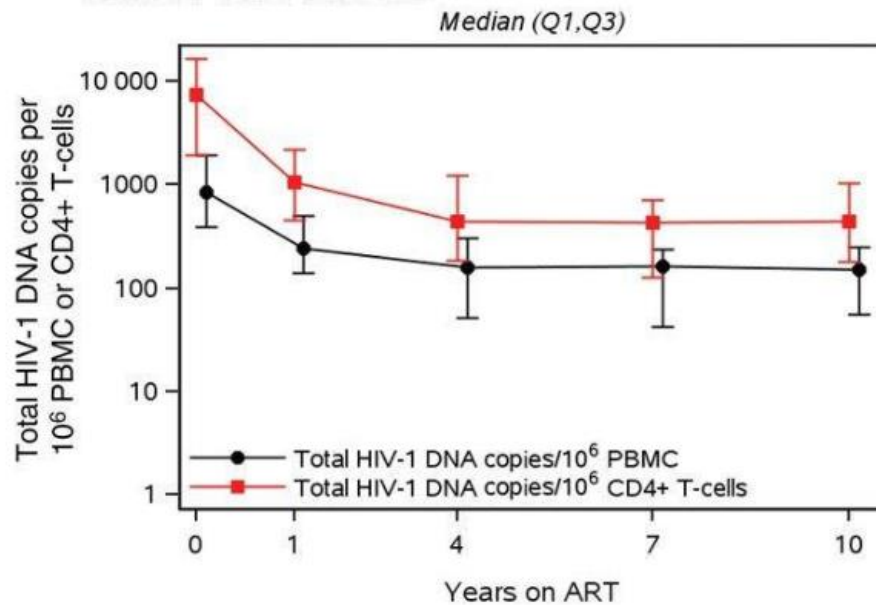
# Other cell types

- Monocytes, tissue macrophages and dendritic cells
    - Are susceptible to HIV infection
      - Express CD4, CCR5 and CXCR4
    - Relatively long-lived
  - Harbor HIV DNA in the setting of plasma viral suppression with ART
- Zalar et al. Antiviral Research. 2010; Ganor et al. Nat Microbiol. 2019
- Their contribution to the latent reservoir is still unclear

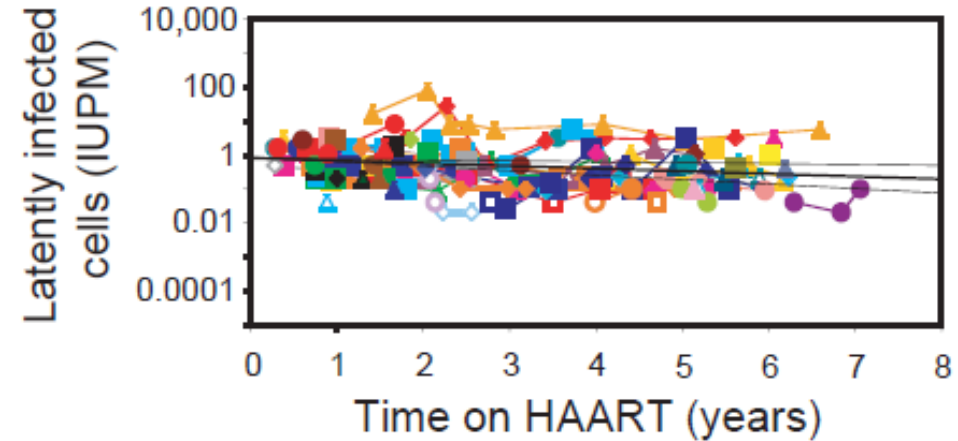
# Effect of ART on the HIV reservoir



# Decay of the HIV reservoir is slow



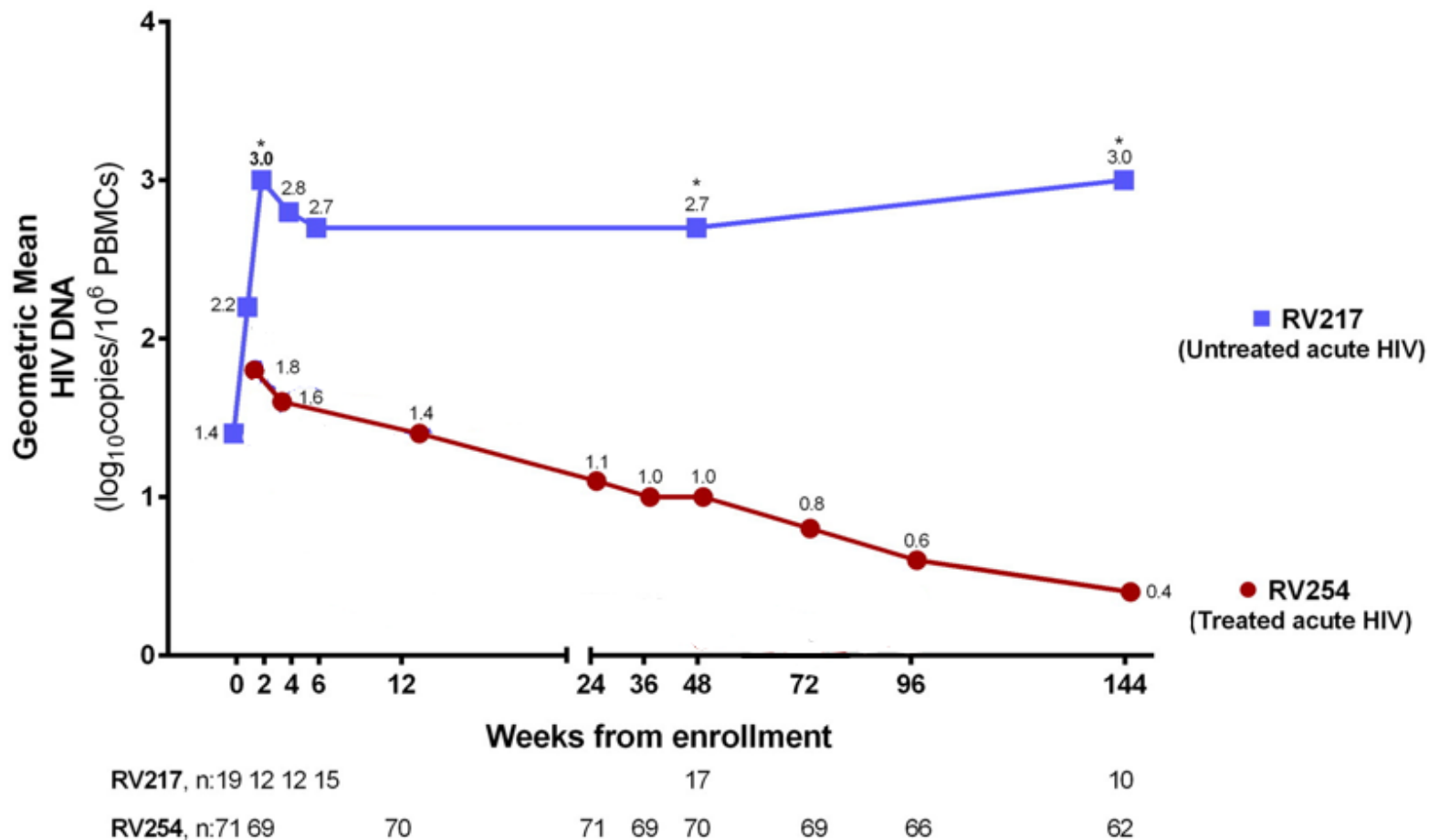
Besson et al. Clin Infect Dis. 2014



Siliciano et al. Nature Med. 2003

- $t_{1/2} = 44$  months in individuals on ART with plasma viral suppression
- Require 73 years of ART to eradicate a reservoir of 1 million cells

# ART during acute infection reduces the size of the HIV reservoir



Ananworanich et al. E Biomedicine. 2016

# HIV persistence on ART

# Anatomical Locations of HIV persistence on ART

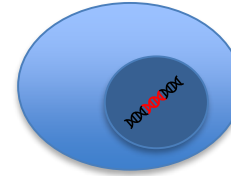
Tissue	HIV DNA	HIV RNA
Lymph node	√	√
Gut	√	√
CNS	√	√
Spleen	√	√
Bone Marrow	√	
Lung	√	√
Kidney	√	√
Reproductive tract	√	√
Adipose tissue	√	√
Liver	√	

# Sources of HIV persistence

- 1. Latently infected cells

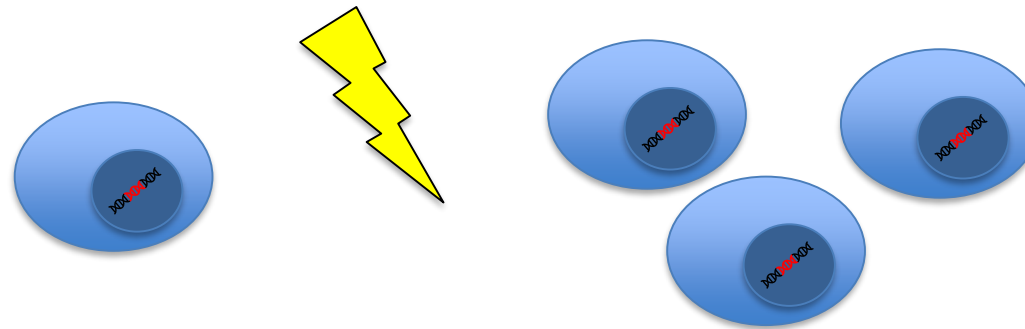
- Survival of long-lived latently infected cells

- Potentially target with kick and kill strategy



- Clonal expansion of latently infected cells

- Populations of cells with identical HIV sequences and integration sites



- Homeostatic proliferation
- Antigen stimulation
- Integration in genes that control growth and development of cells/ cancer associated genes

[Chomont et al. Nature. 2009](#); [Malderelli et al. Science. 2014](#); [Wagner et al Science. 2014](#); [Hosmane et al. J Exp Med. 2017](#)

# Clonal expansion

- >50% of the inducible, replication-competent HIV reservoir consists of CD4<sup>+</sup> T-cells carrying identical proviral sequences.

Bui et al. Plos pathogens. 2014

- Clonally expanded provirus can be intact and infectious

Simonetti et al. Proc Natl Acad Sci USA. 2016

- These clones can be a source of initial rebound viremia during ATI

Kearney. J Virol. 2015

- Potentially target with anti-proliferative therapies

## 2. Persistent viral expression on ART

- >80% of patients on ART for 60 wk have persistent viremia (median of 3.1 copies/ml) on single copy assay.

Malderelli et al. Plos Pathogen. 2007

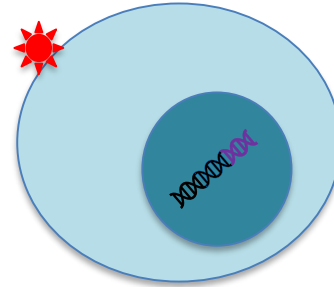
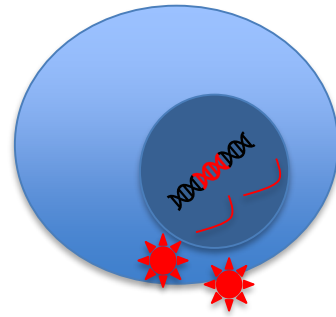
- Potential sources
  - 1) ongoing cycles of viral replication and infection (controversial)
    - Inadequate ART potency
    - Inadequate ART penetrance at sanctuary sites
  - 2) ongoing virus production from integrated proviruses, but ongoing cycles on infection blocked by ART

# Why is the differentiation important?

- 1) If there is ongoing cycles of viral replication and infection
  - Focus research on improving ART potency and penetration
  
- 2) If there is ongoing virus production from integrated proviruses
  - Not targeted by existing immune responses
  - Latency reversal agents will not affect this population
  - Block and lock strategy may have greater potential



# 1. Ongoing cycles of viral replication and infection



Mutated sequence and  
different integration site

- Unlikely in peripheral blood
  - Emergence of new variants whilst on ART is rare
- The majority of studies showed no reduction in the level of persistent viremia with treatment intensification

[Kearney et al. Plos Pathogen. 2014](#)

[Gandhi et al. JAIDS. 2012](#)

# Ongoing cycles of viral replication and infection

- May potentially occur in sanctuary sites

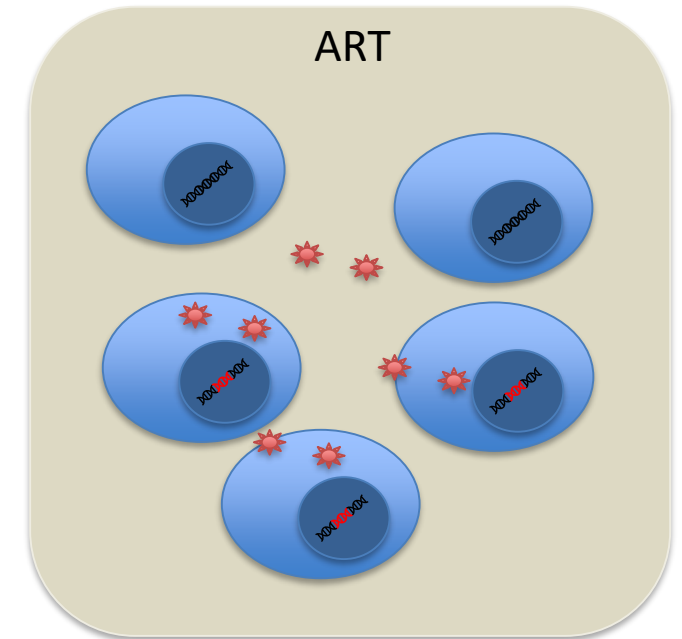
	Lymph Node	CNS
Reduced ART penetration	<a href="#">Fletcher. PNAS. 2014.</a>	<a href="#">Letendre et al. Arch Neurol. 2008</a>
Reduced immune mediated killing	<a href="#">Fukazawa. Nat Med. 2015.</a>	
HIV RNA expression on ART	<a href="#">Estes. Nat Med. 2018.</a>	<a href="#">Pérez-Valero et al. AIDS. 2019</a>
Sequence evolution on ART	<a href="#">Lorenzo-Redondo et al. Nature. 2016</a>	

## 2. Ongoing virus production from integrated provirus

- Clonally expanded intact provirus can produce sufficient virus to cause detectable low-level viremia

Simonetti et al. Proc Natl Acad Sci USA. 2016; Halvas et al. CROI. 2019

- Plasma viral sequences matches proviral sequences matches QVOA well sequences
- No ART resistance mutation
- No sequence evolution in the clones
- Mechanisms of escape are yet to be determined
- How to suppress these clones ?



# Summary

- Understanding the mechanisms of HIV persistence is essential for the development of strategies to induce HIV remission.
- HIV persistence on ART is due to the existence of
  1. Latent viral reservoir
  2. Ongoing transcription and virus production

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