

POSTER PRESENTATION

Open Access

# Naive CD8+ T cells from ART respond to primary vaccination against autologous HIV-1 antigen

Kellie N Smith<sup>1\*</sup>, Robbie B Mailliard<sup>2</sup>, Weimin Jiang<sup>2</sup>

From 17th International Symposium on HIV and Emerging Infectious Diseases (ISHEID) Marseille, France. 23-25 May 2012

## Introduction

Antiretroviral therapy (ART) decreases HIV-1 viremia and AIDS-associated mortality. Despite this, HIV infected patients are unable to clear virus during treatment interruption due to insufficient cytotoxic T cell (CTL) activity against the autologous reservoir. It is unclear if naïve T cells from patients on ART can respond to immunotherapies that induce CTL specific for their own, unique virus. Unfortunately, late-evolving virus and the ART reservoir contain escape epitope variants that confer a lack of CTL control. We hypothesize that a dendritic cell (DC)-based immunotherapy during ART can induce CTL capable of eliminating the autologous reservoir, despite their failure to do so during natural infection.

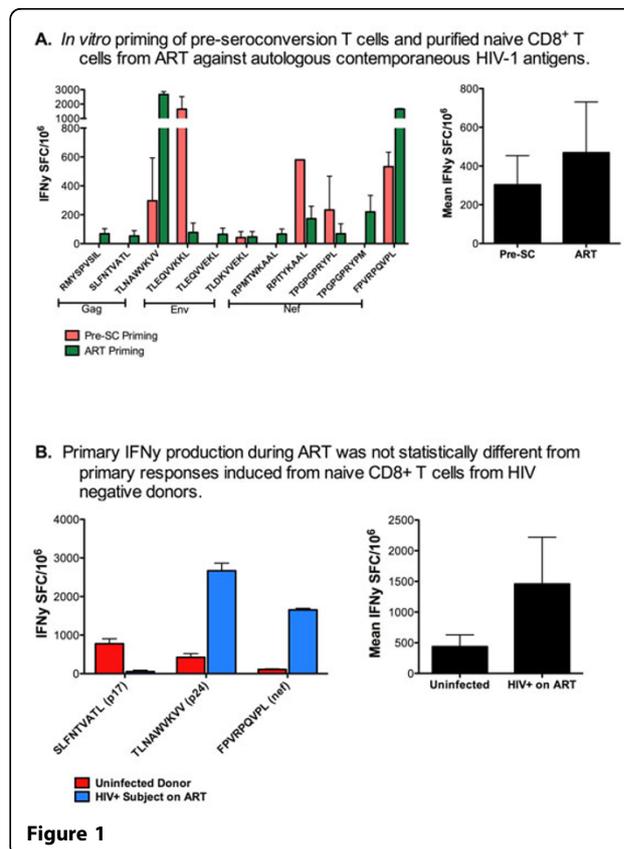
## Materials and methods

We use a naïve T cell flow cytometry panel to evaluate changes in the naïve CD4+:CD8+ T cell ratio before seroconversion, during untreated infection, and after ART in an HIV infected subject. We then use this panel to isolate naïve CD4+ and CD8+ T cells from this patient during ART and from HIV negative donors. These purified naïve T cells are then used in an in vitro model of dendritic cell (DC) vaccination at their in vivo ratios to induce primary IFN $\gamma$ -producing CTL against autologous HIV-1 Gag, Env, and Nef peptide antigens derived from ART.

## Results

Although partial immune reconstitution occurs during ART, we observed a disproportionate recovery in the naïve CD4+:CD8+ T cell ratio compared to pre-infection. Despite this, we show that naïve CD4+ and CD8+ T cells from ART, when primed at their skewed in vivo

ratio against late-acquired, "escape" epitope variants, differentiate into IFN $\gamma$ -producing CTL comparable to those induced in pre-seroconversion T cells. Additionally, we show that primary CTL responses induced during ART are comparable to those observed in HIV negative donors. Figure 1.



\* Correspondence: kns27@pitt.edu

<sup>1</sup>University of Pittsburgh School of Medicine, Department of Molecular Virology and Microbiology, Pittsburgh, USA

Full list of author information is available at the end of the article

## Conclusion

These data indicate that, despite a disproportionate recovery in the naive CD4+:CD8+ T cell ratio, DC vaccination of naive T cells from ART can induce CTL specific for autologous “escape” HIV-1 variants, and that these naive T cells can respond to primary vaccination at a level similar to pre-infection. These data support the use of DC immunotherapies in HIV infected patients on ART.

## Author details

<sup>1</sup>University of Pittsburgh School of Medicine, Department of Molecular Virology and Microbiology, Pittsburgh, USA. <sup>2</sup>University of Pittsburgh Graduate School of Public Health, Department of Infectious Diseases and Microbiology, USA.

Published: 25 May 2012

doi:10.1186/1742-4690-9-S1-P16

**Cite this article as:** Smith *et al.*: Naive CD8+ T cells from ART respond to primary vaccination against autologous HIV-1 antigen. *Retrovirology* 2012 **9**(Suppl 1):P16.

**Submit your next manuscript to BioMed Central  
and take full advantage of:**

- Convenient online submission
- Thorough peer review
- No space constraints or color figure charges
- Immediate publication on acceptance
- Inclusion in PubMed, CAS, Scopus and Google Scholar
- Research which is freely available for redistribution

Submit your manuscript at  
[www.biomedcentral.com/submit](http://www.biomedcentral.com/submit)

