

Immunodeficiencies

Part 2: HIV and AIDS

Clinical Immunology Seminars, 16.5.2019

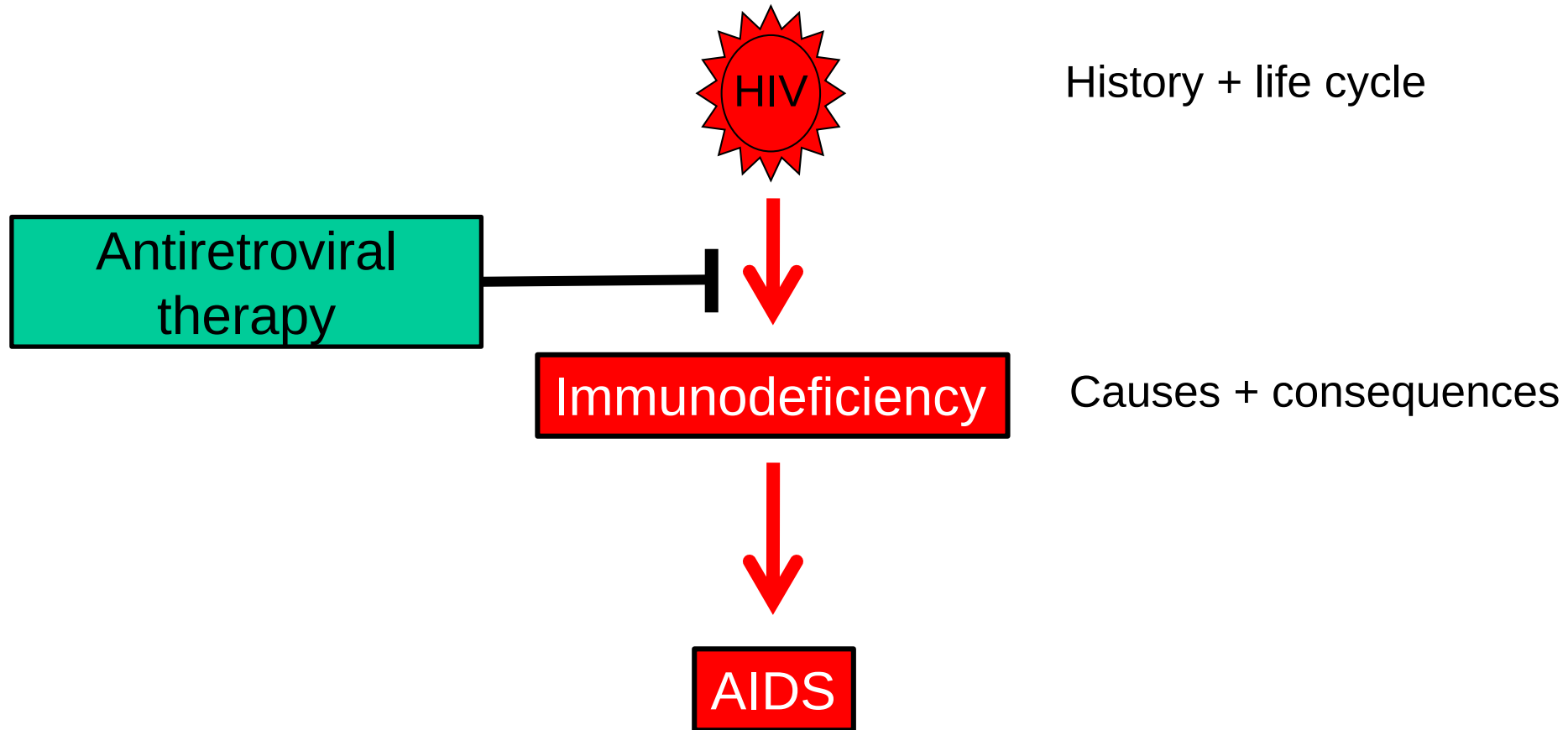
Andri Rauch

Universitätsklinik für Infektiologie

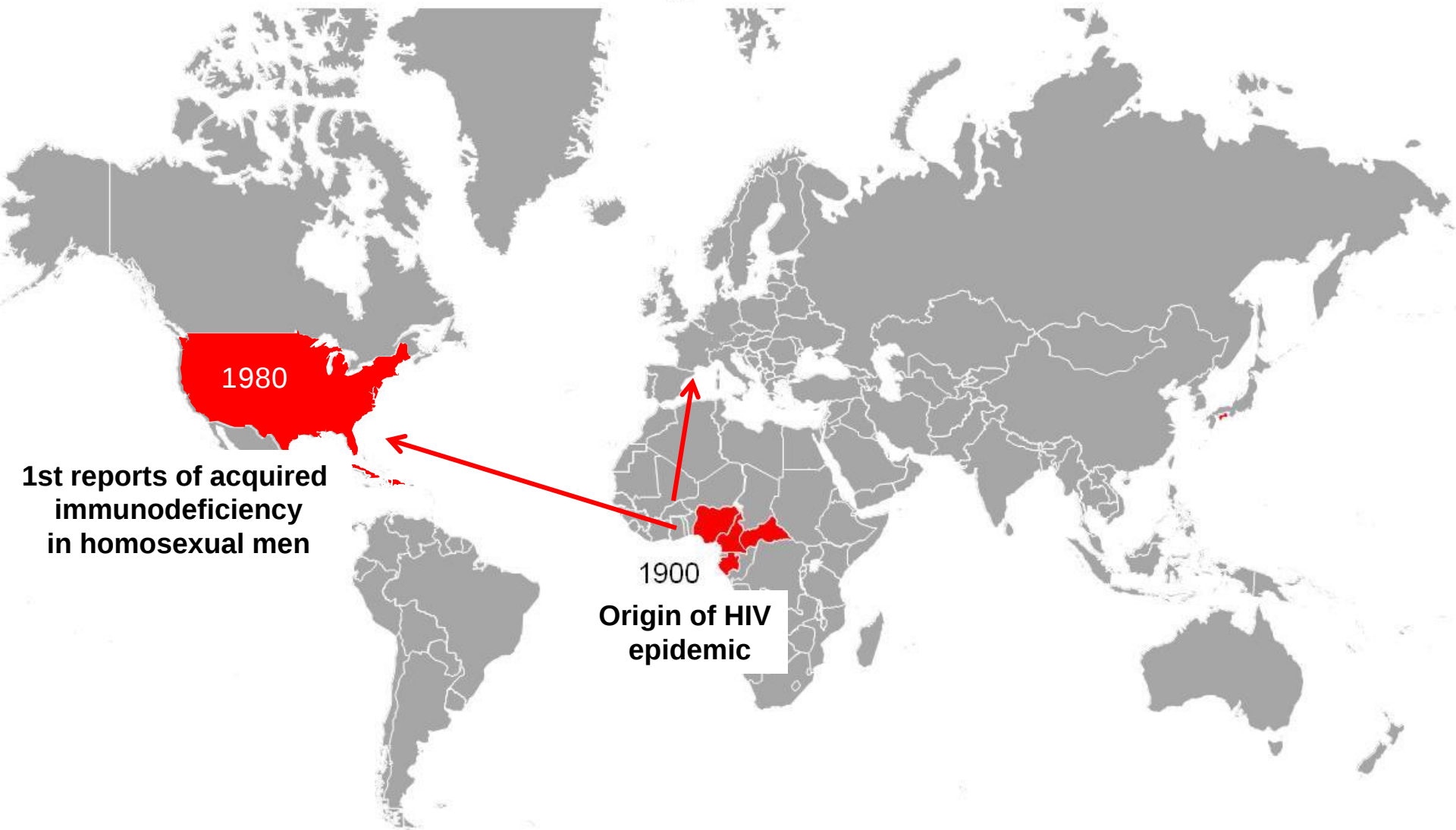
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Outline



History of HIV



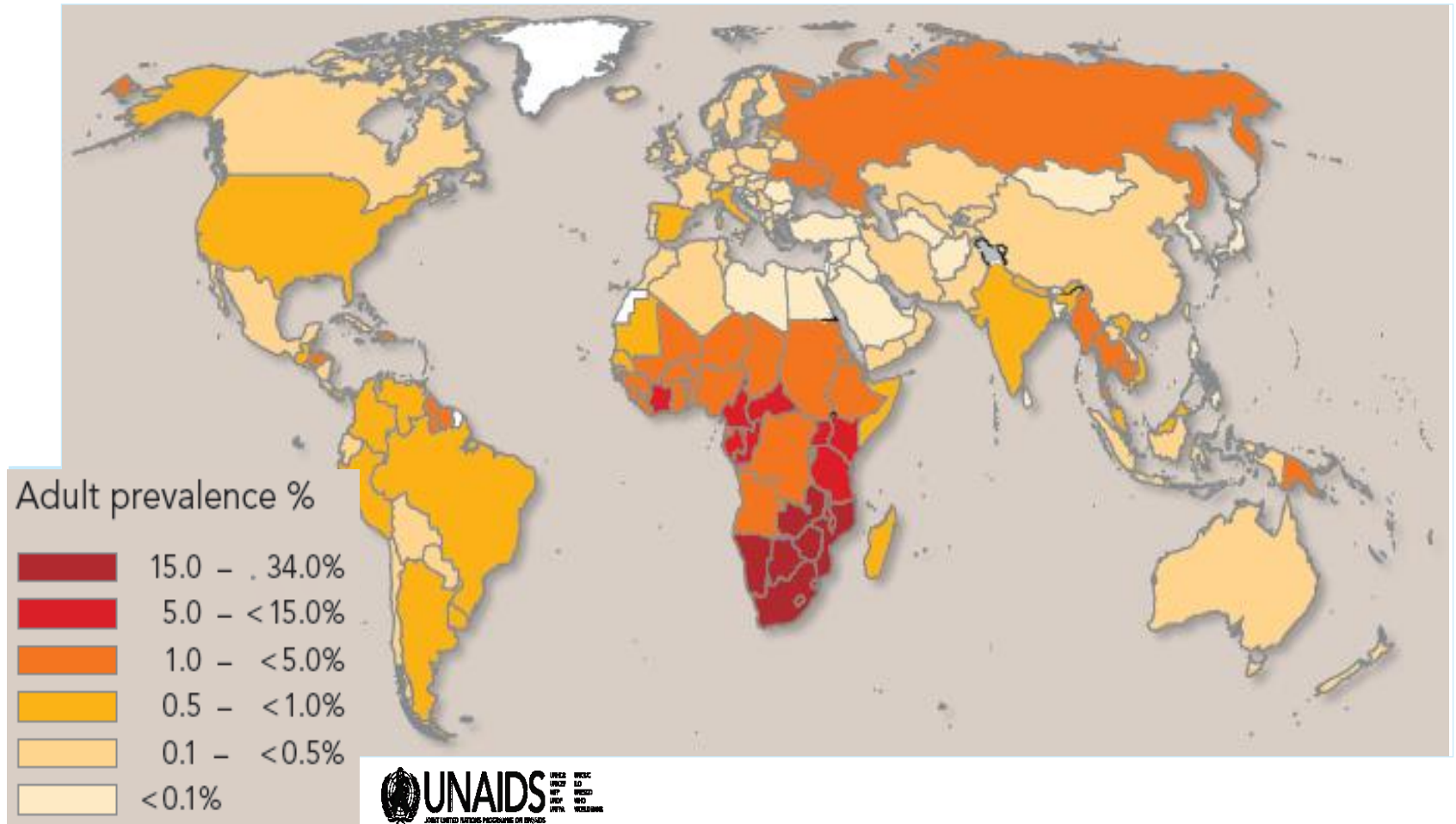
1980

1st reports of acquired
immunodeficiency
in homosexual men

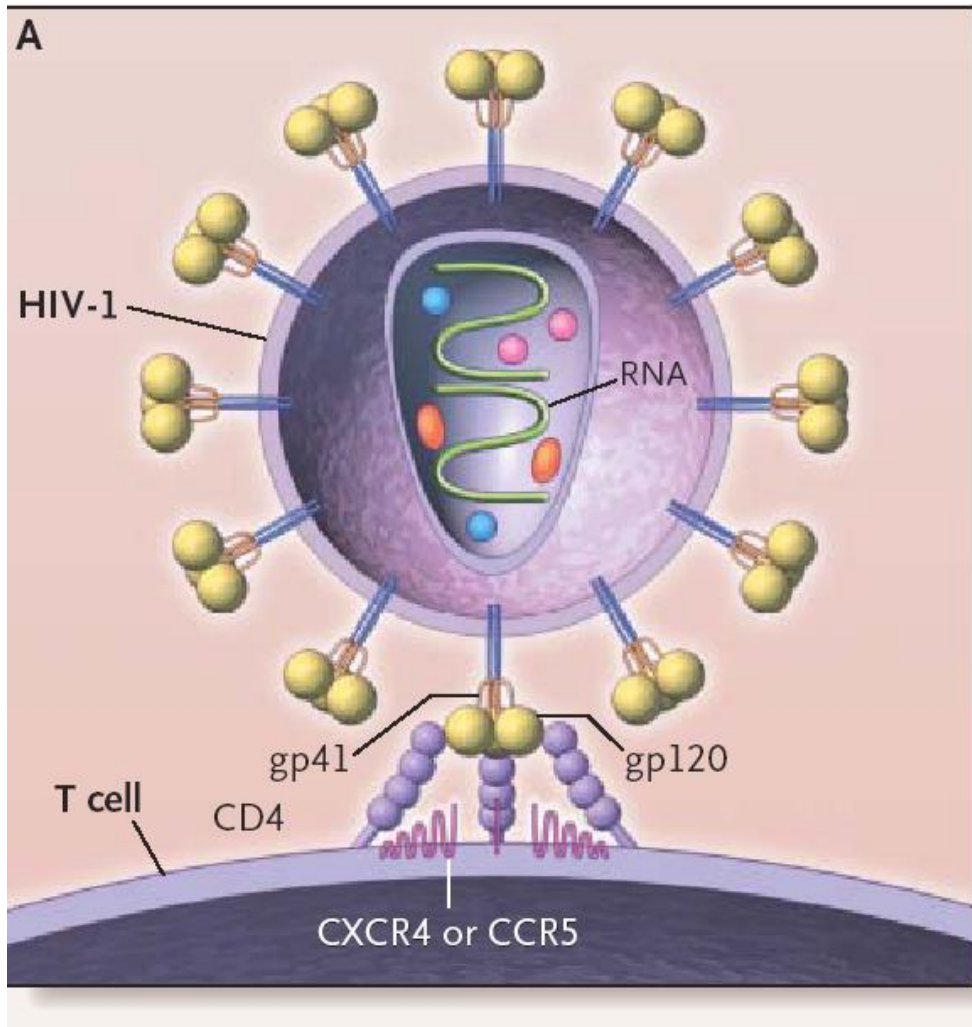
1900

Origin of HIV
epidemic

Worldwide spread of HIV



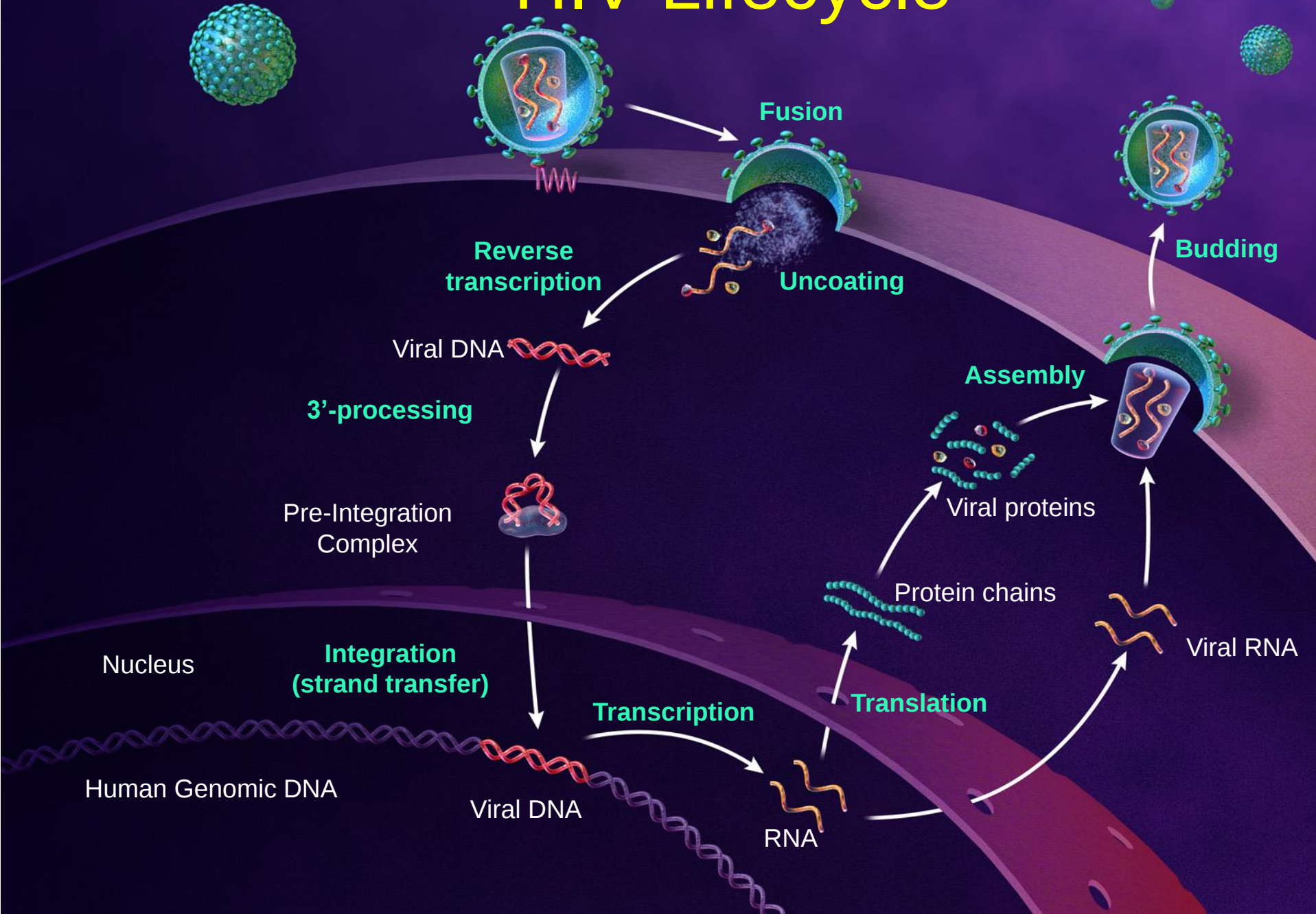
HIV attachment to host cells



Receptor: CD4

Co-receptor: CXCR4 or CCR5

HIV Lifecycle



Early events in HIV-infection

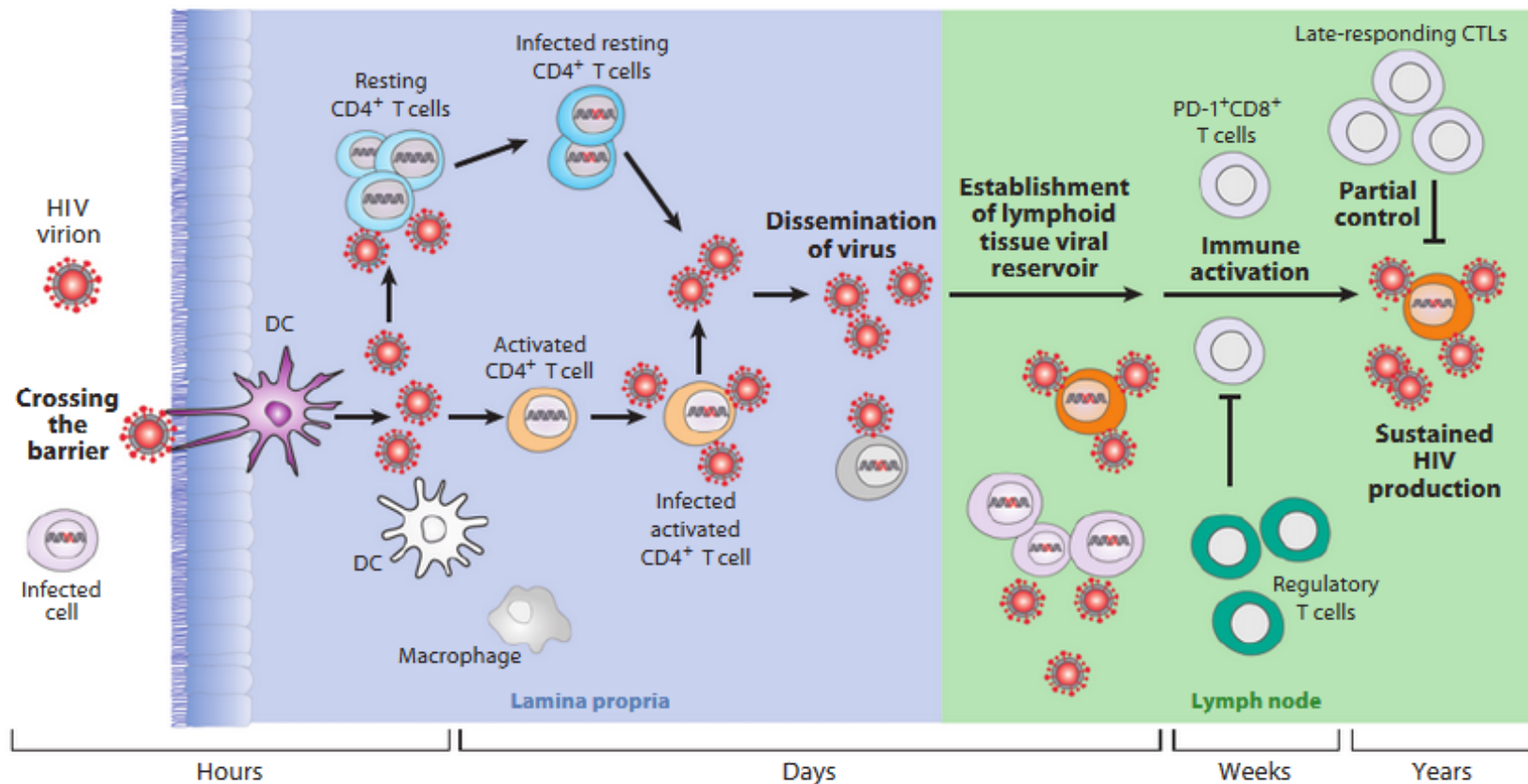
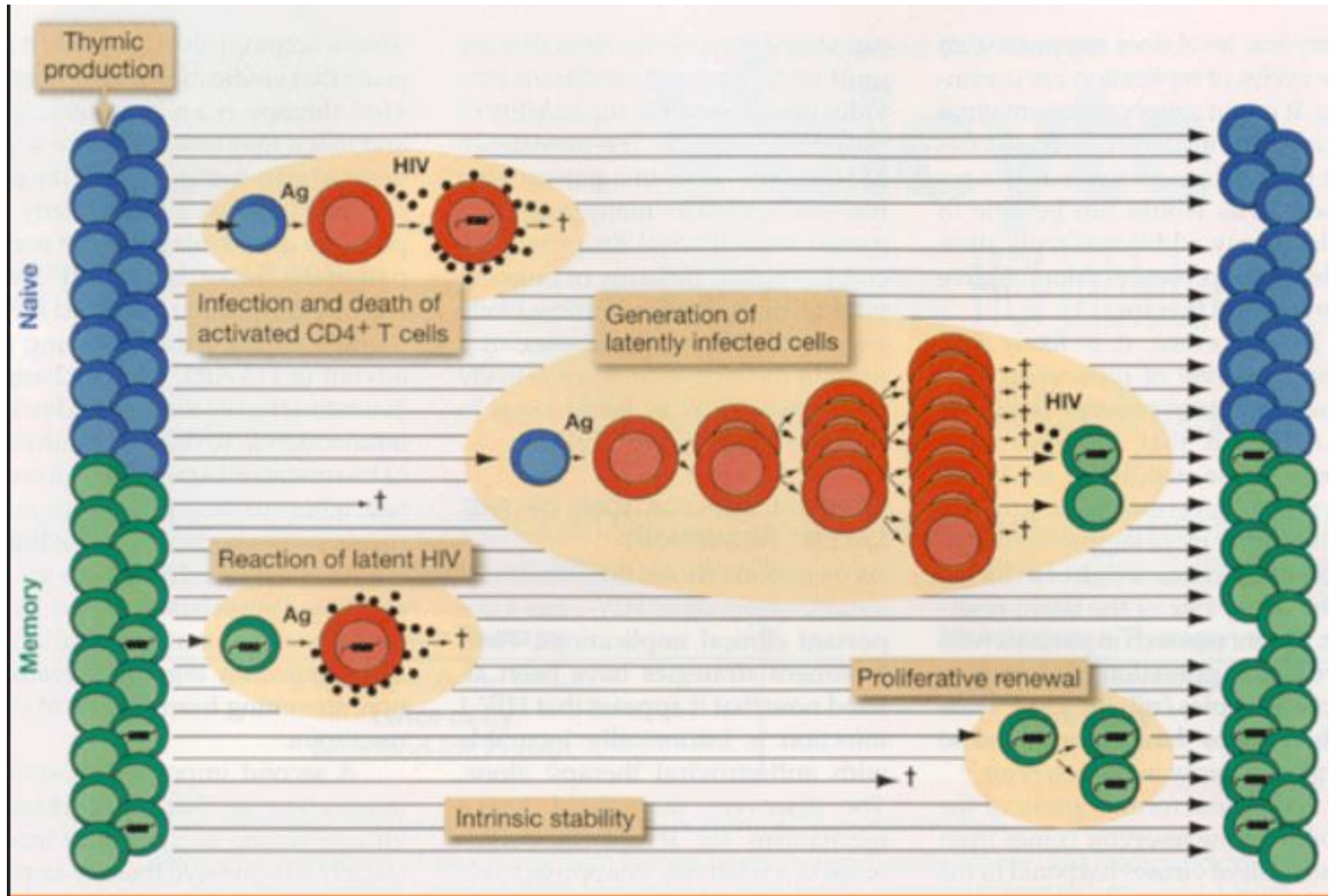


Figure 1

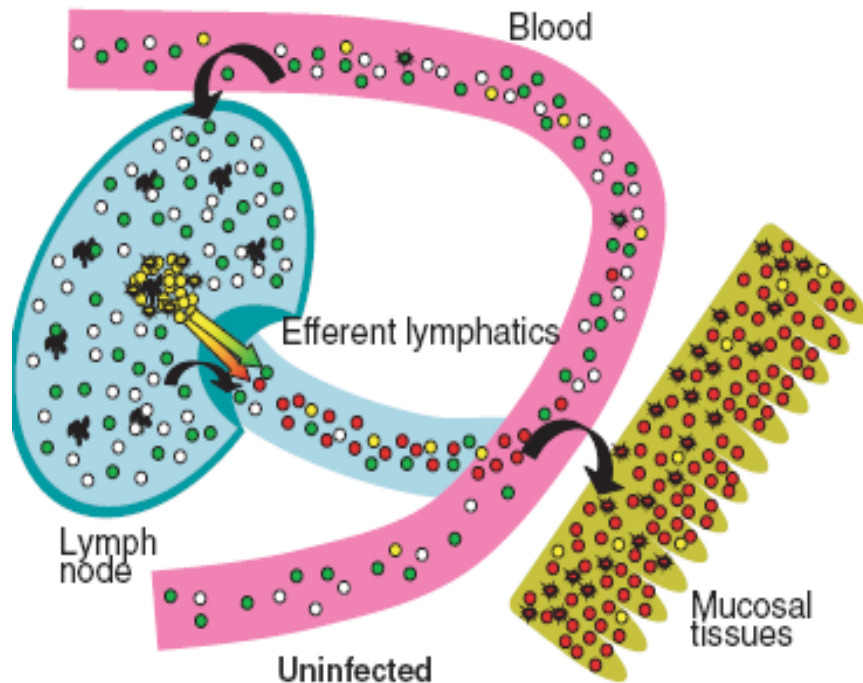
Phases of infection following exposure to human immunodeficiency virus (HIV). Infection begins with transmission across a mucosal barrier, either by a cell-free virus, infected cell, or virion attached to dendritic cells (DCs) or Langerhans cells (LCs). Early low-level propagation probably occurs in partially activated CD4⁺ T cells, followed by massive propagation in activated CD4⁺ T cells of the gut-associated lymphoid tissue lamina propria. Dissemination of HIV to other secondary lymphoid tissues and establishment of stable tissue viral reservoirs ensue. Immune response lags behind the burst of viremia and provides only partial control of viral replication. Adapted from Reference 5. Abbreviations: CTL, cytotoxic T lymphocyte; PD-1, programmed death 1.

Establishment of HIV latency

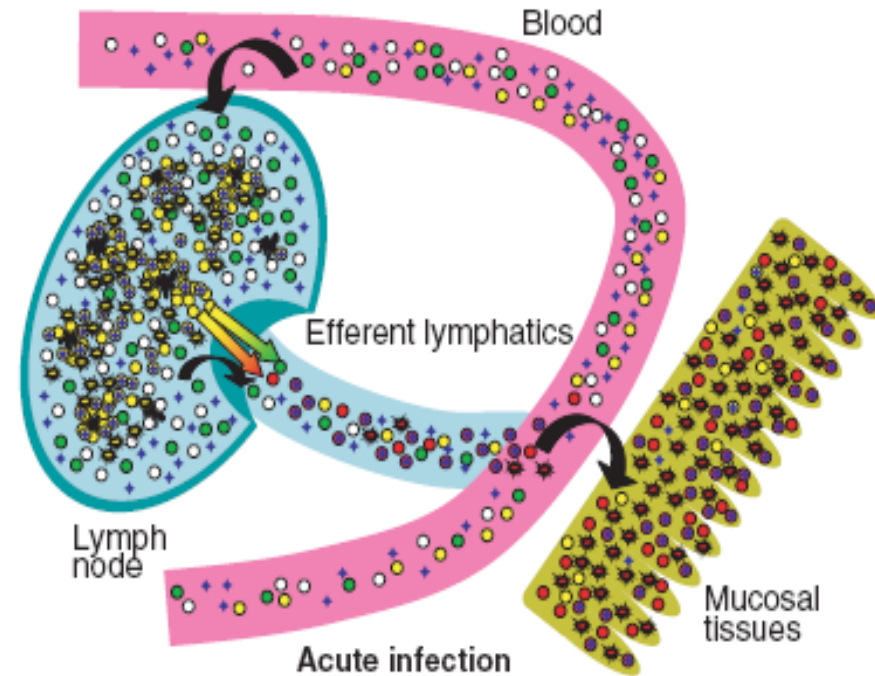


Effect of acute HIV infection on CD4⁺ T cell subsets

uninfected



Acute HIV infection infects CCR5⁺ CD4⁺ T cells (mainly effector memory)



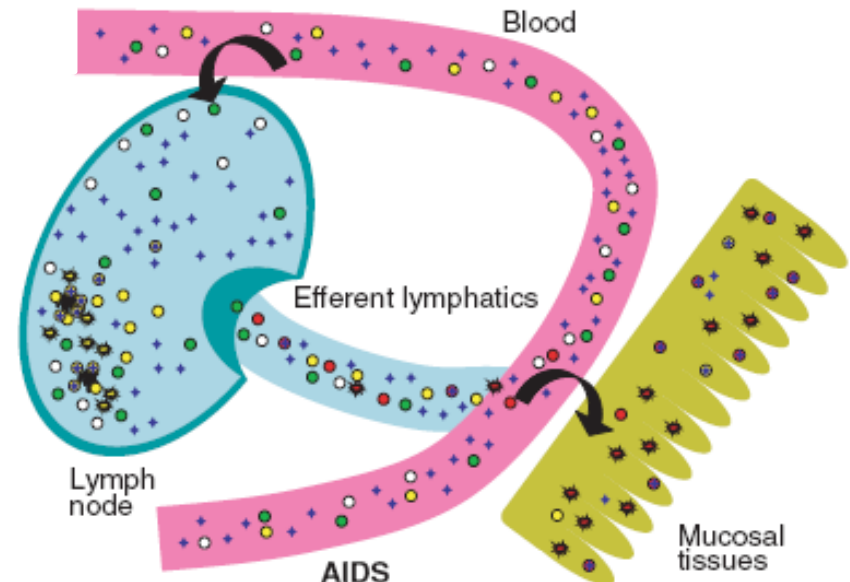
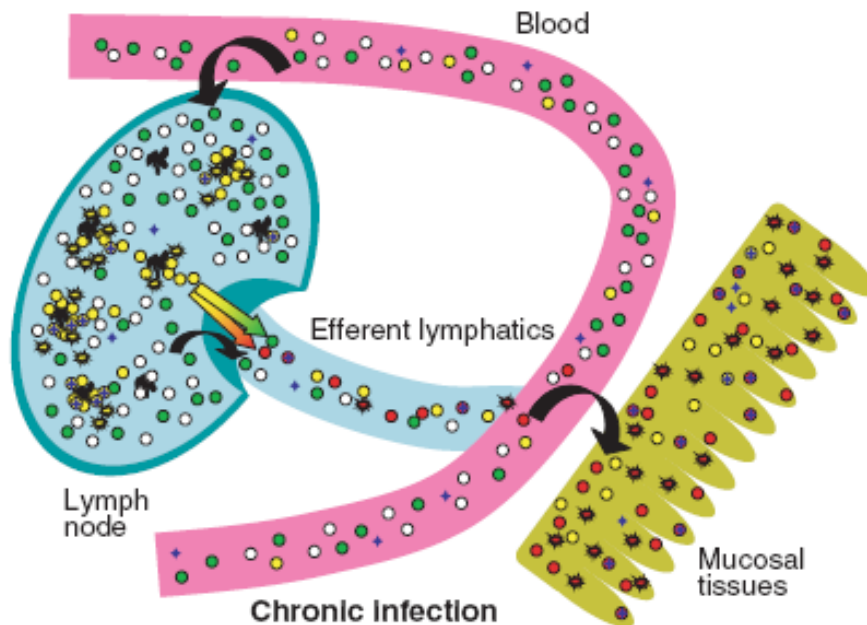
- | | | |
|--|---|---------------|
| Dendritic cell | Central CD4 ⁺ memory T cell | Virus |
| Naive CD4 ⁺ T cell | CD4 ⁺ effector memory T cell | Infected cell |
| Activated Ki-67 ⁺ CD4 ⁺ T cell | Dead cell | |

CD4⁺ T cell depletion in chronic infection

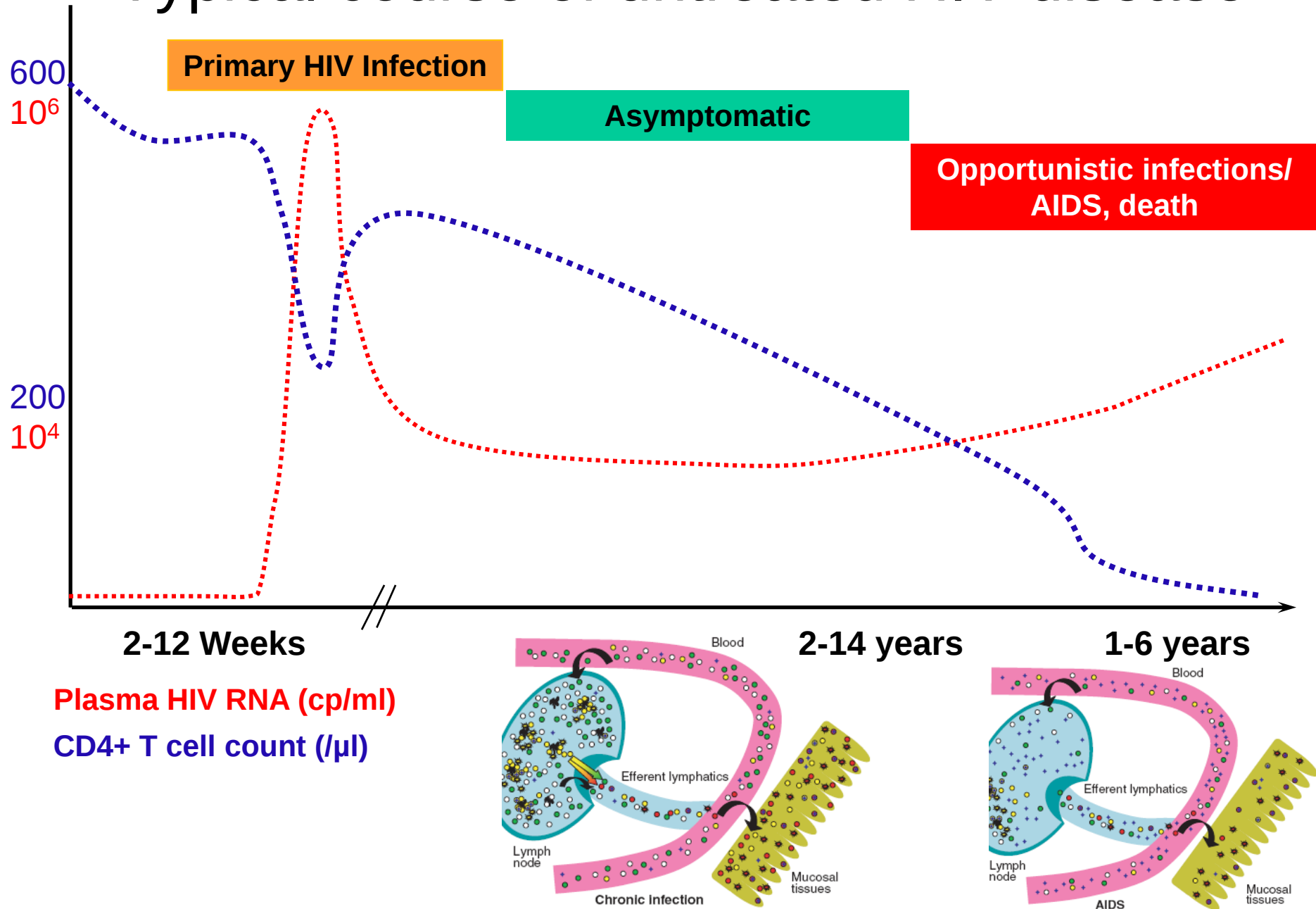
- Continuous infection in lymph nodes/mucosa
- Generation of new short-lived CD4⁺em
- Death of CD4⁺cm
- Destruction of lymph-node architecture

AIDS:

- CXCR4-tropic HIV infects naive and resting memory cells
- Critical loss of CD4⁺em and CD4⁺cm

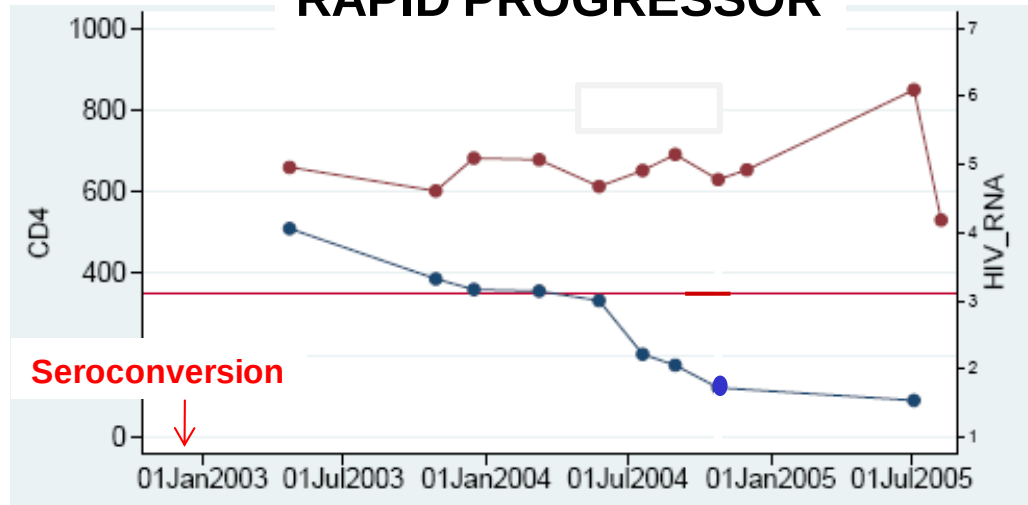


Typical course of untreated HIV disease

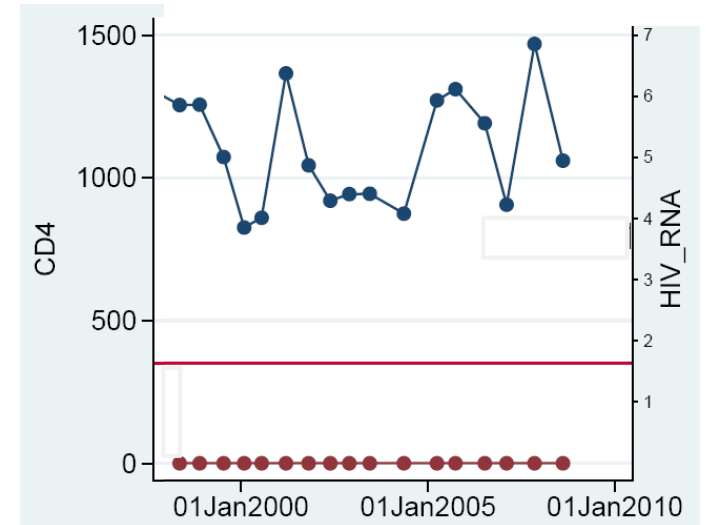


Extreme courses of HIV disease

RAPID PROGRESSOR



ELITE CONTROLLER



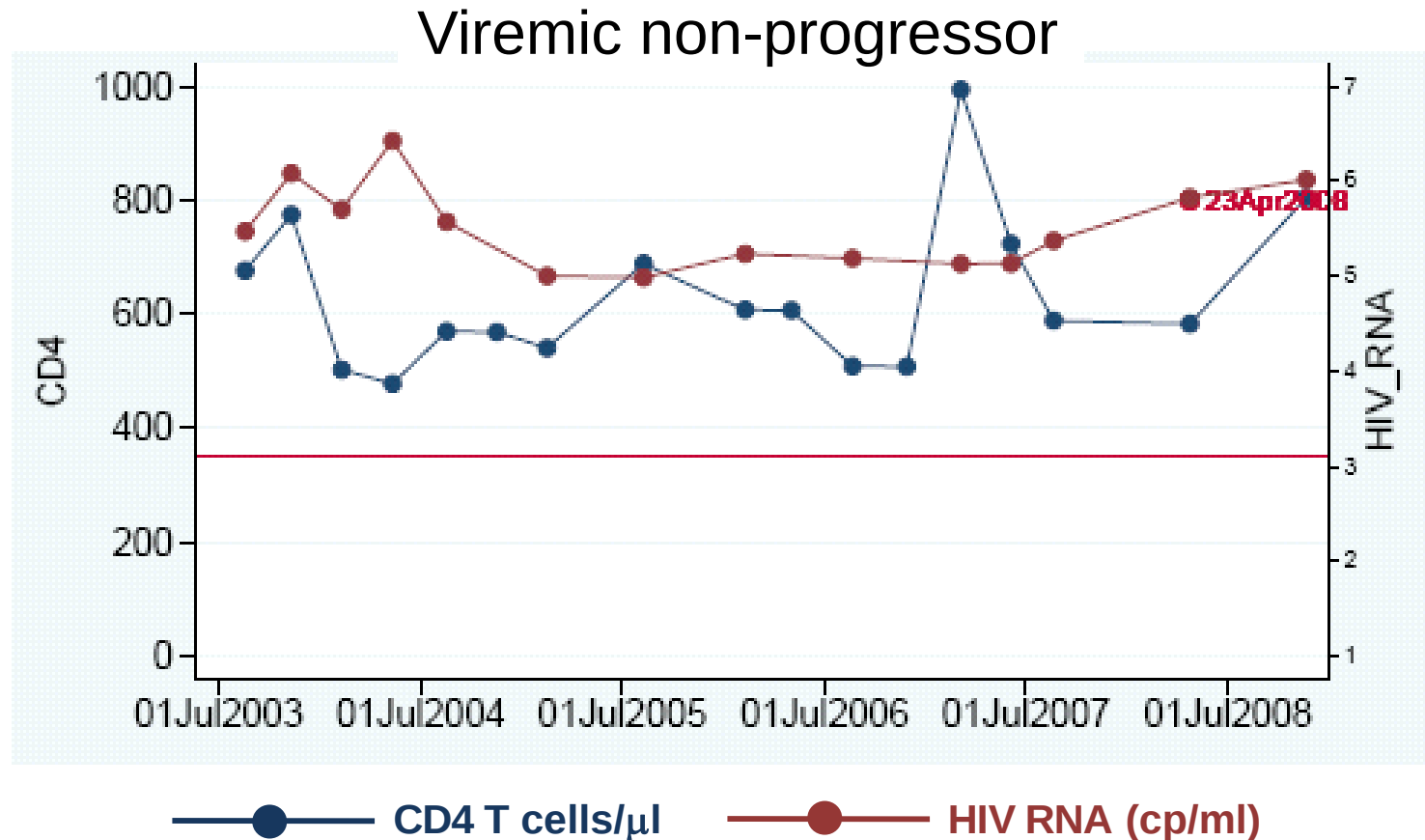
—●— CD4 T cells/μl

—●— HIV RNA (cp/ml)

~5%

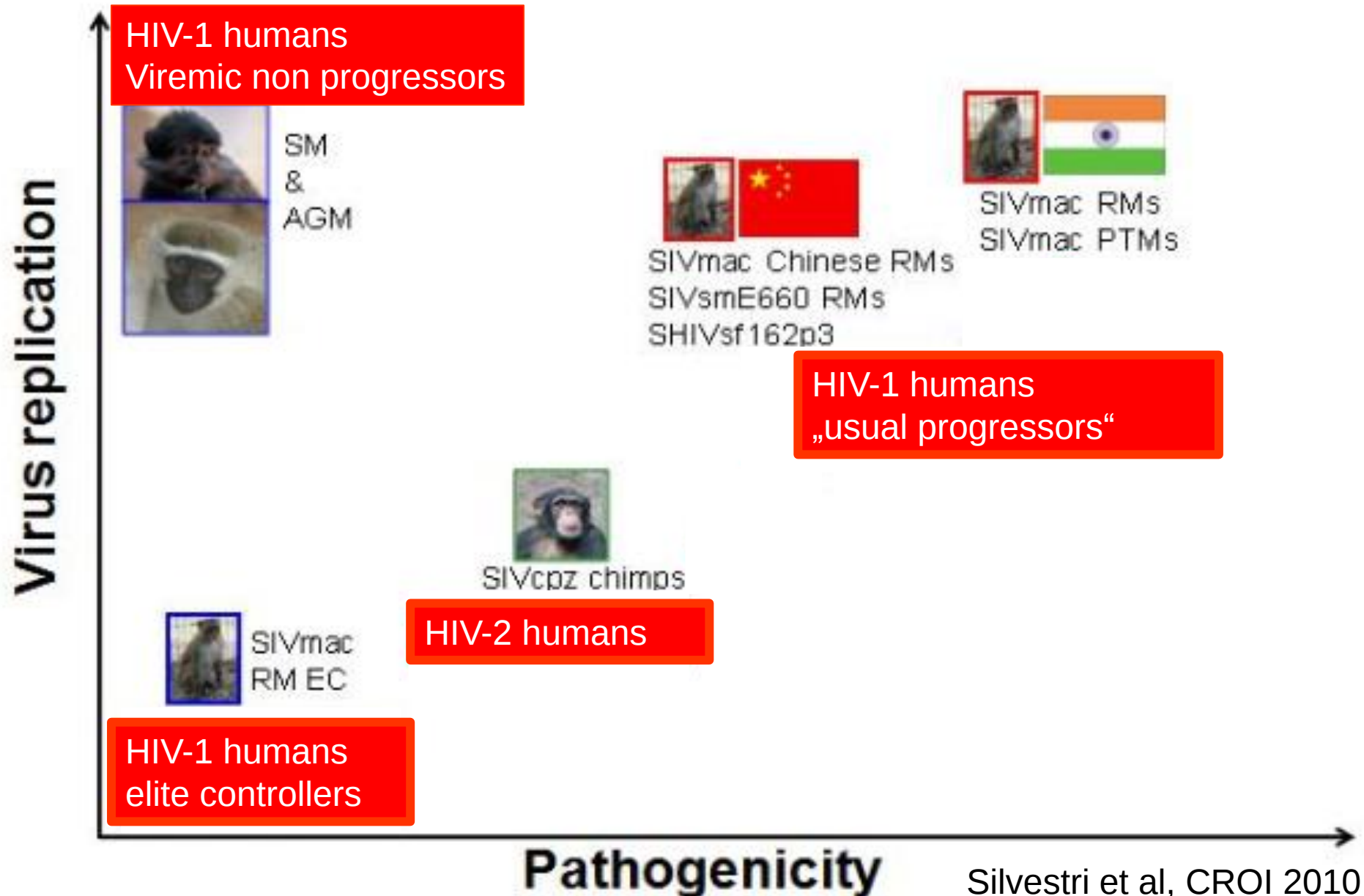
~1%

Unusual course of HIV disease: Non-progression despite high viremia



0.1%

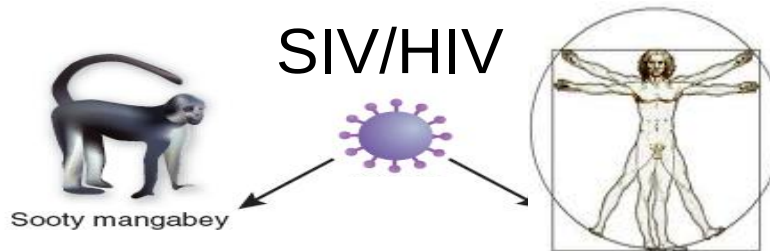
Comparative AIDS Research:



Non-pathogenic vs pathogenic SIV/HIV disease

Non-pathogenic

Pathogenic



AIDS

No

YES

CD4 T cell depletion

No

YES

Viral load

High

High

**CCR5 expression on T
cells upon activation**

No

Yes

Microbial translocation

No

Yes

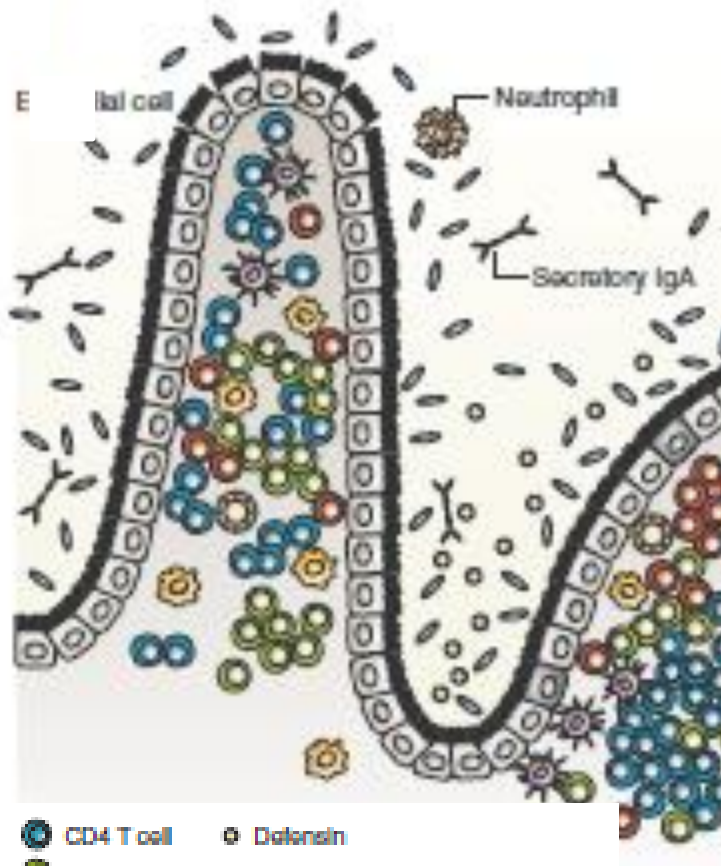
IMMUNE ACTIVATION

No

Yes

HIV-associated damage to the GI-tract fuels immune activation

Healthy



- CD4 T cell
- CD8 T cell
- B cell
- Macrophage
- Dendritic Cell
- Dendritic Cell
- Bacteria
- Infected CD4 T cell

HIV-pos



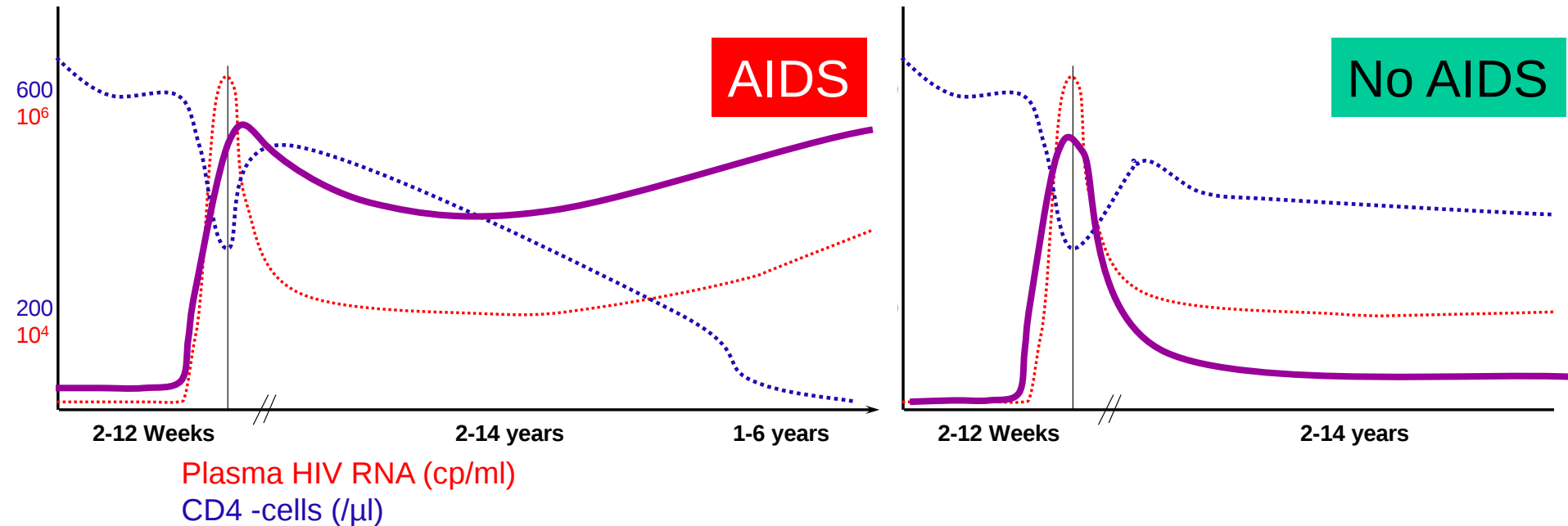
Bacterial translocation

Immune activation

Pathogenic vs non-pathogenic HIV/SIV disease

Pathogenic: (most) humans, macaques

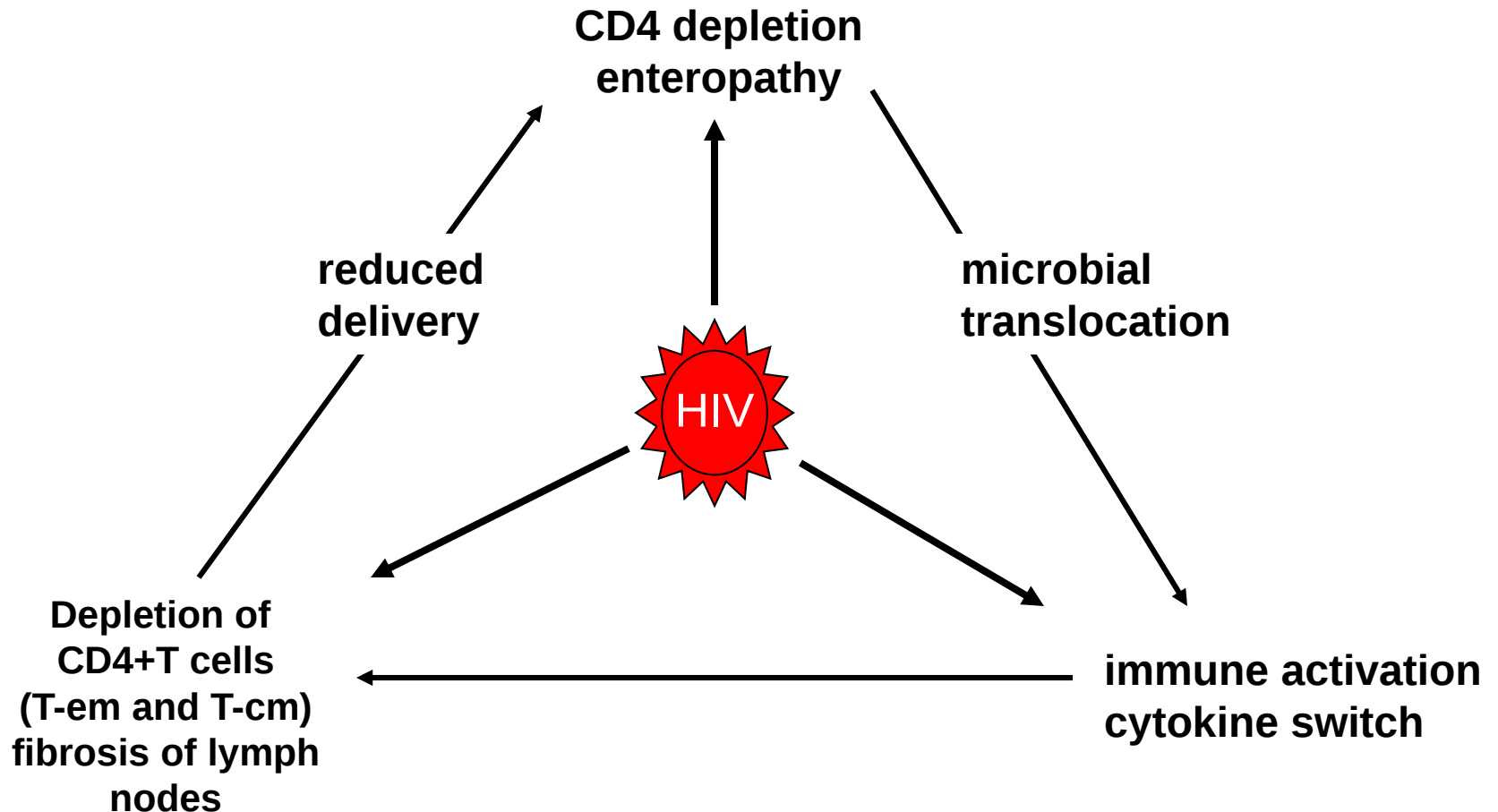
Non-pathogenic: Sooty mangabeys



Immune activation

- increased proliferation and activation of T cells
- increased susceptibility to apoptosis
- high levels of proinflammatory cytokines and chemokines
- high levels of interferon-stimulated genes

Immune activation and HIV



Adapted from
Douek et al
Annu Rev Med 2009

Mechanisms of CD4⁺ T cell depletion: not only the virus!

Destruction of CD4⁺ T cells

Direct destruction of infected cells (<1%!!)

- Virus (envelope, Vpr) mediated apoptosis
- Disruption of cell membranes

Indirect induction of death in uninfected cells

- Cytolysis by HIV-specific cytolytic T cells/NK cells
- Triggering of apoptosis upon **immune activation**
- Apoptosis following interaction with antigen-presenting cell

Impaired CD4⁺ T-cell production

Direct effects of virus

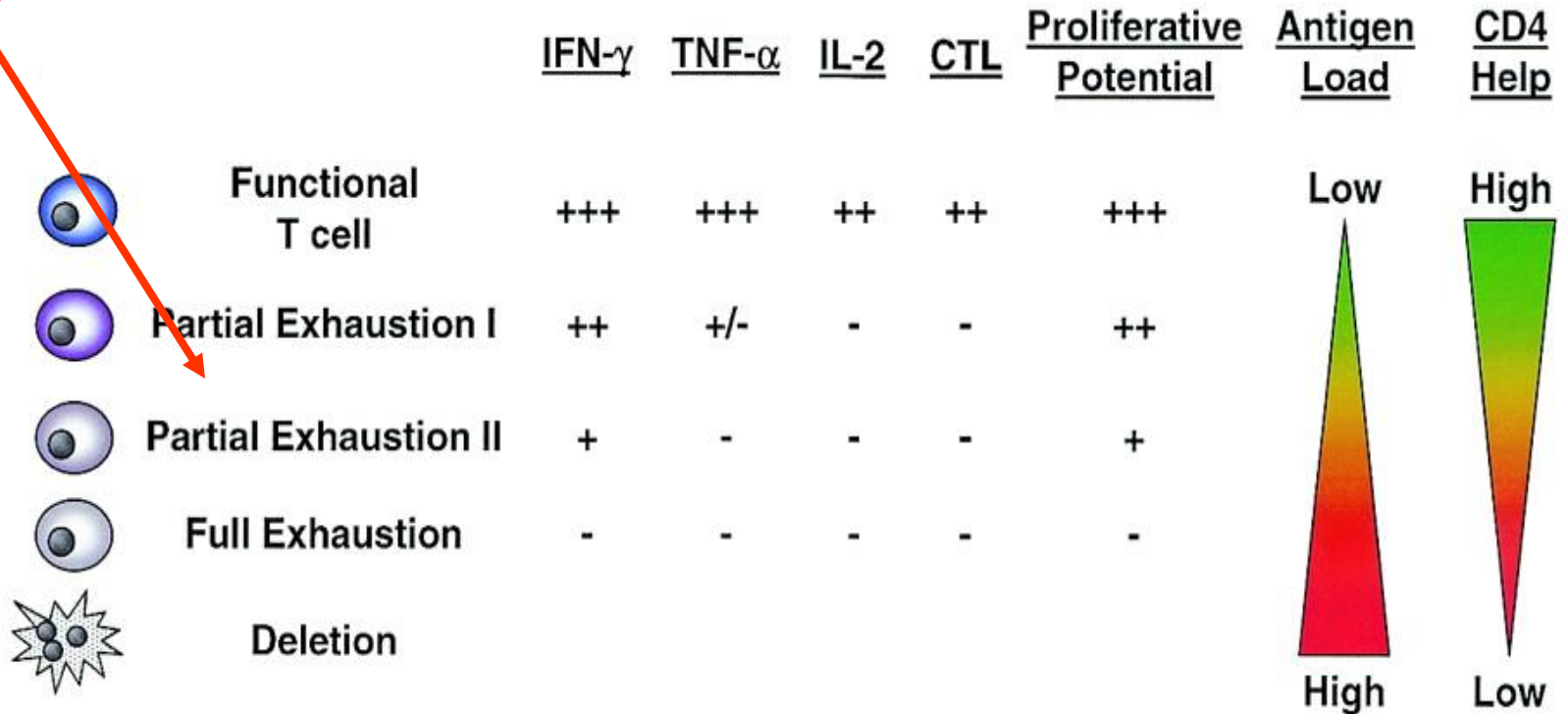
- Infection-mediated death of progenitor cells
- Destruction of stromal network for haematopoiesis

Indirect effects

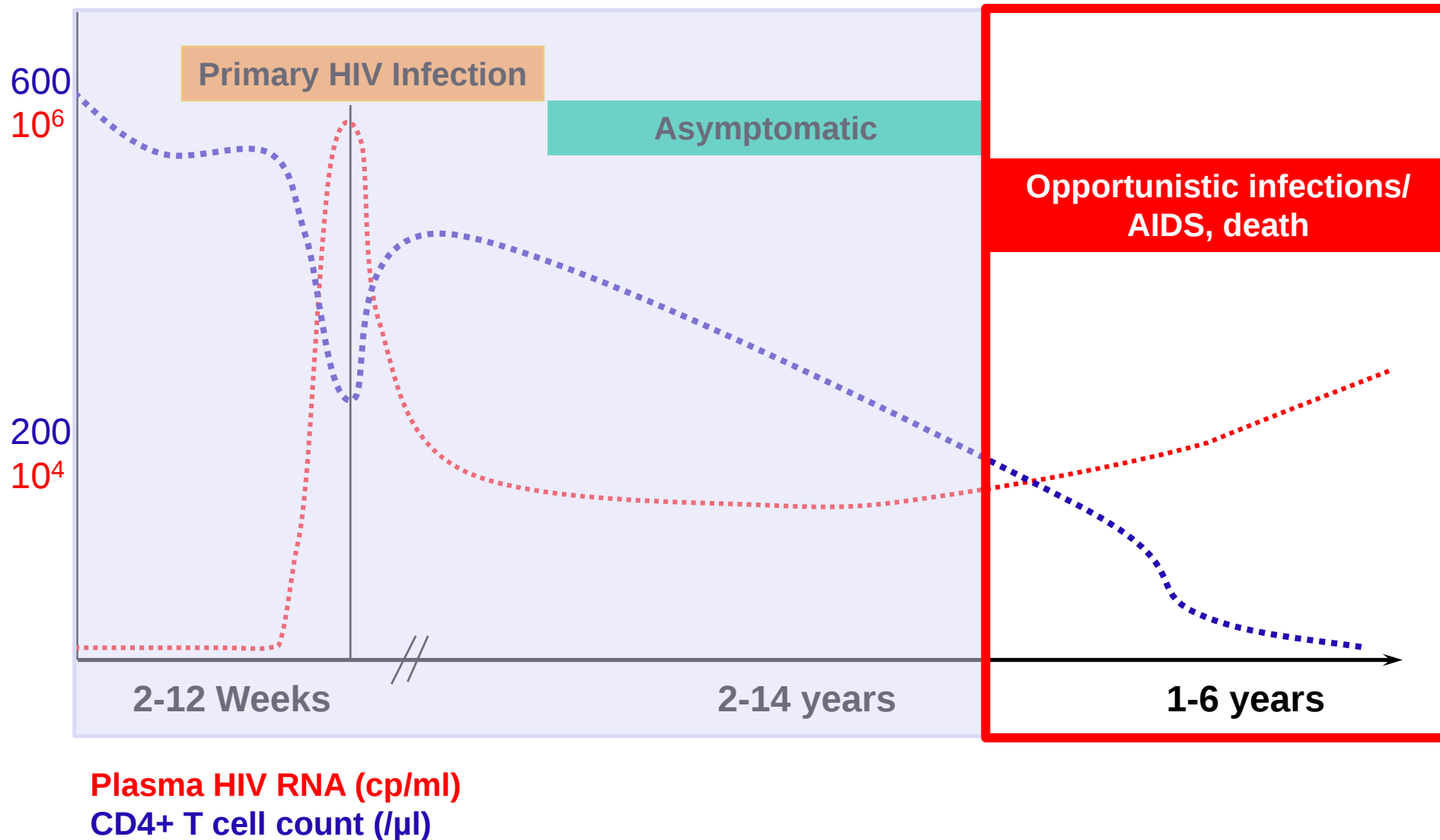
- Cytokine dysfunction
- Opportunistic infections of bone marrow
- Infiltrating malignancies
- Myelotoxic drugs

CD8-T cell exhaustion

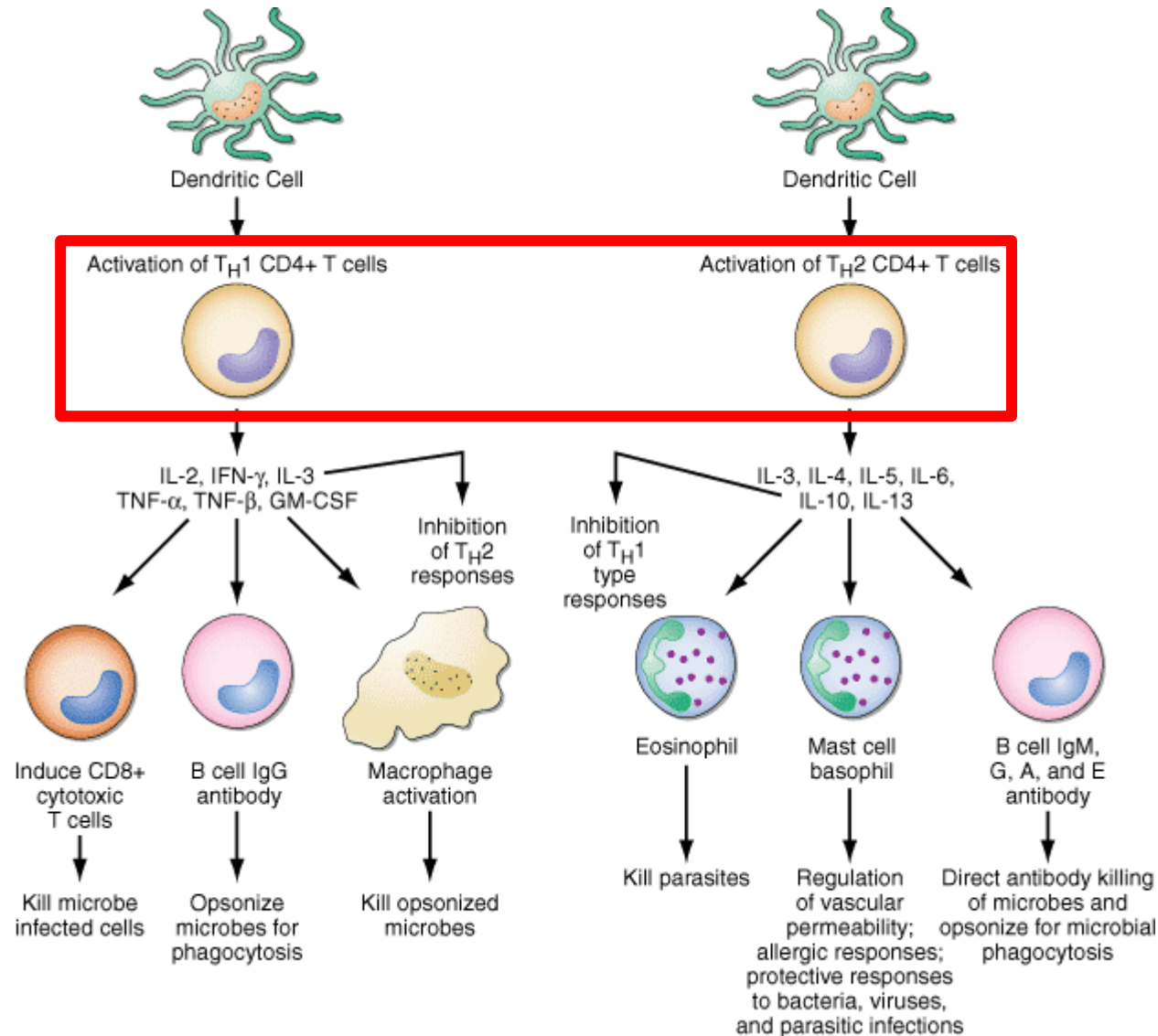
HIV



Consequences of HIV-induced immunodeficiency



CD4 T⁺ cells: At the center of immune defense



Opportunistic Diseases and CD4 lymphocyte count

Moderate
Immunodeficiency

CD4/ μ l

500

200

100

Lymphadenopathy
Thrombopenia
Oral hairy leukoplakia
Herpes zoster
Oral thrush
Cervical dysplasia
Cervical carcinoma
Rezid. bact. pneumonia
Tuberculosis
Kaposi-Sarcoma

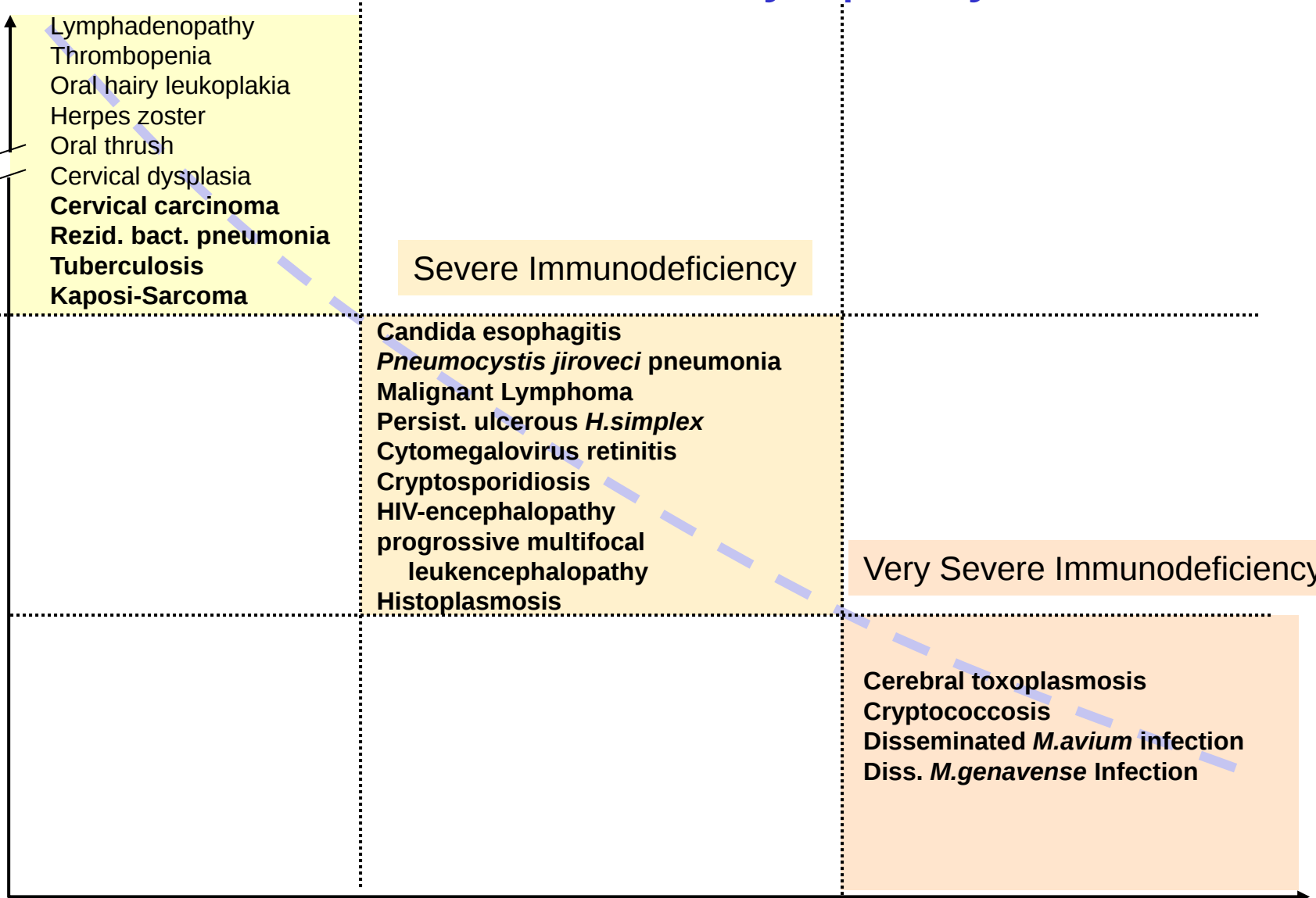
Severe Immunodeficiency

Candida esophagitis
***Pneumocystis jiroveci* pneumonia**
Malignant Lymphoma
Persist. ulcerous *H.simplex*
Cytomegalovirus retinitis
Cryptosporidiosis
HIV-encephalopathy
**progrossive multifocal
leukencephalopathy**
Histoplasmosis

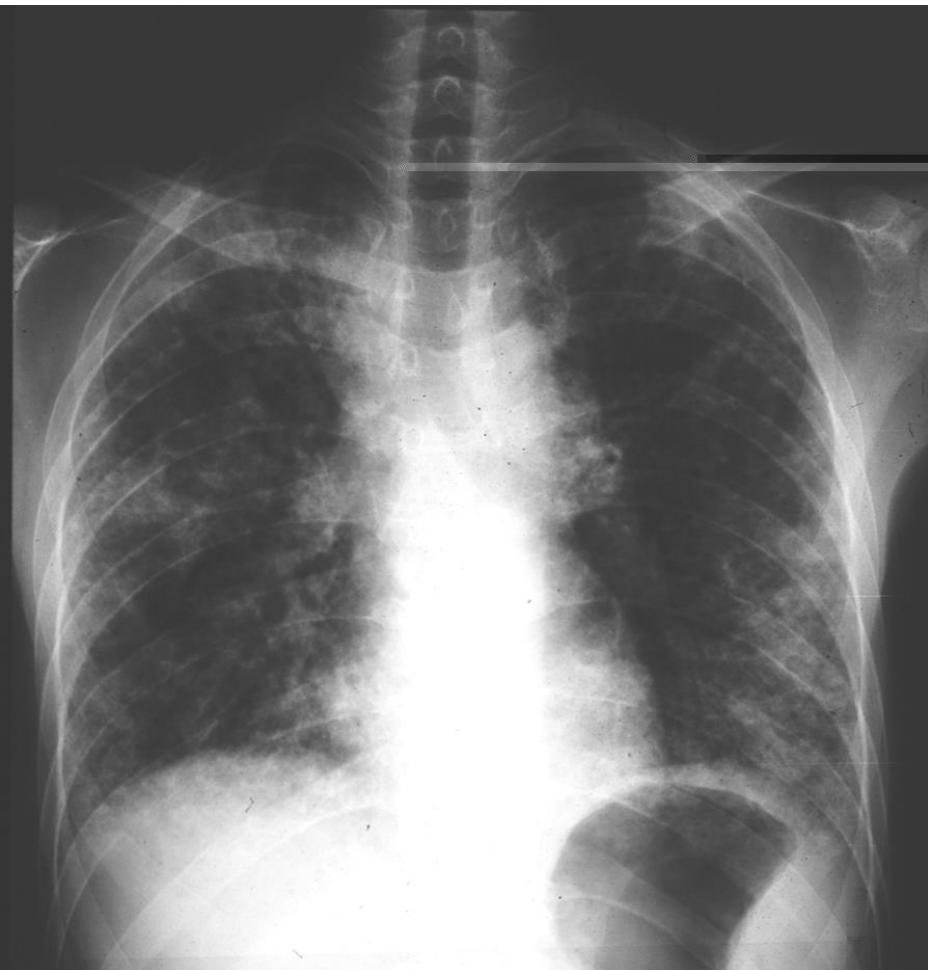
Very Severe Immunodeficiency

Cerebral toxoplasmosis
Cryptococcosis
Disseminated *M.avium* infection
Diss. *M.genavense* Infection

time

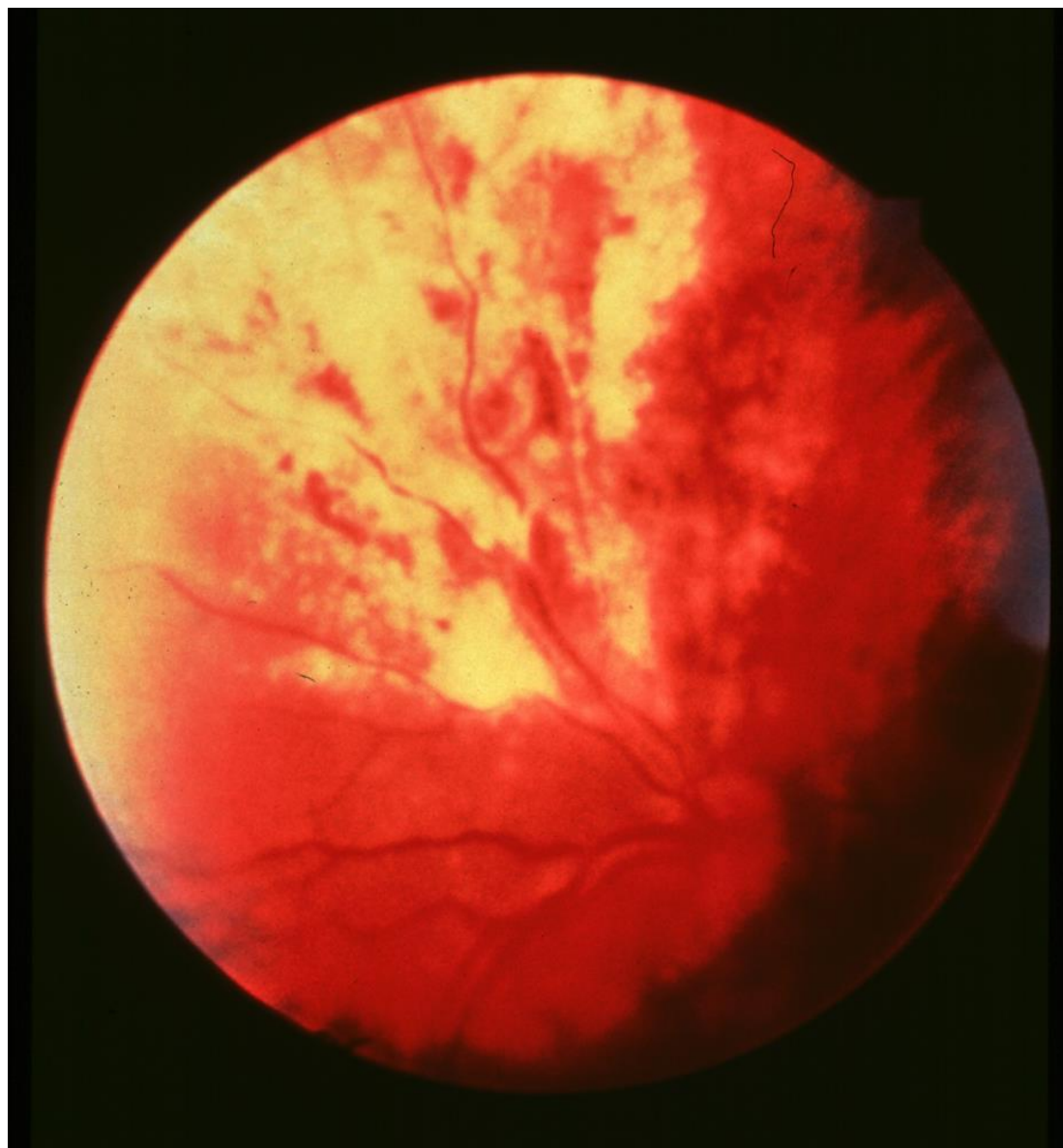




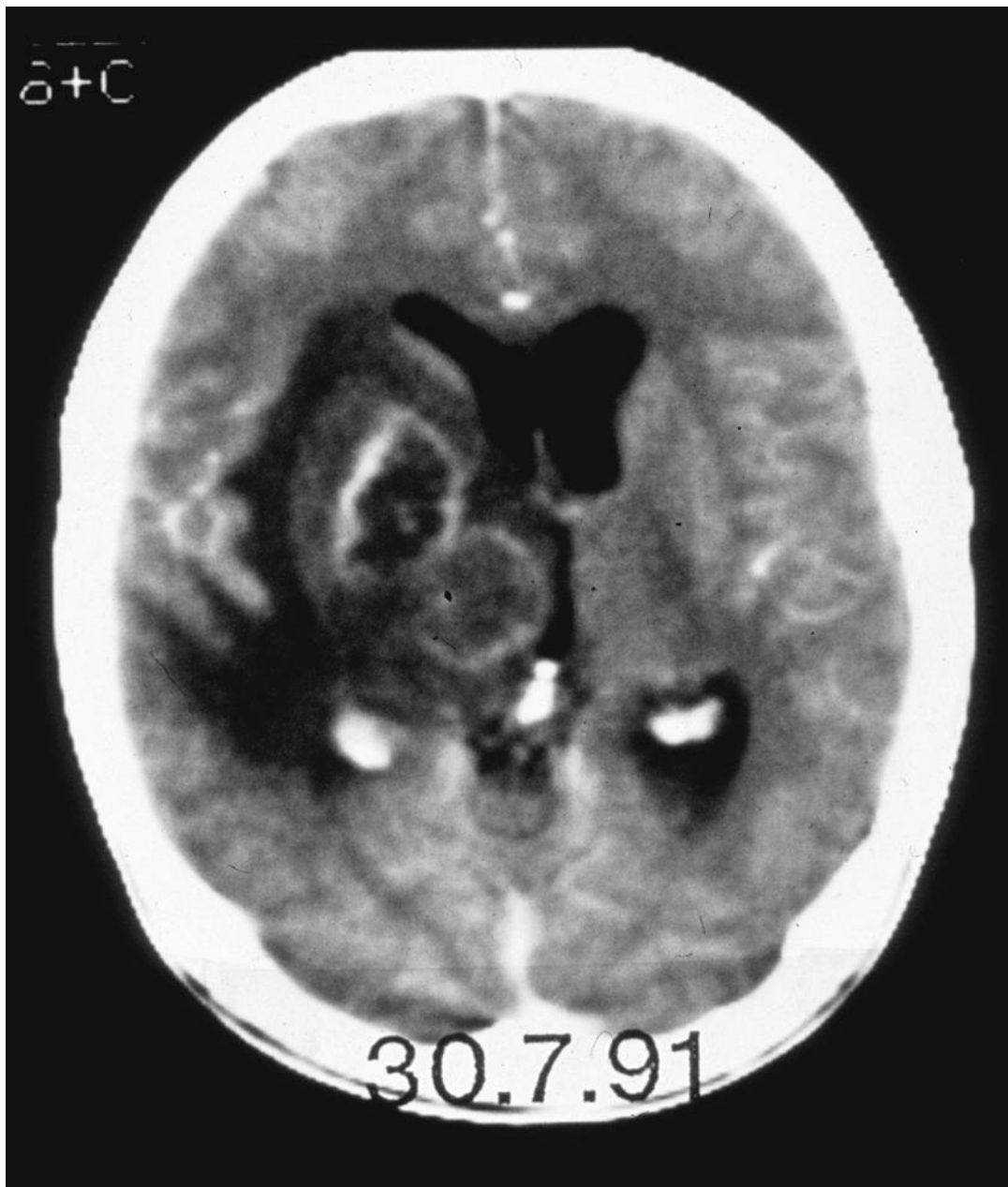


normal



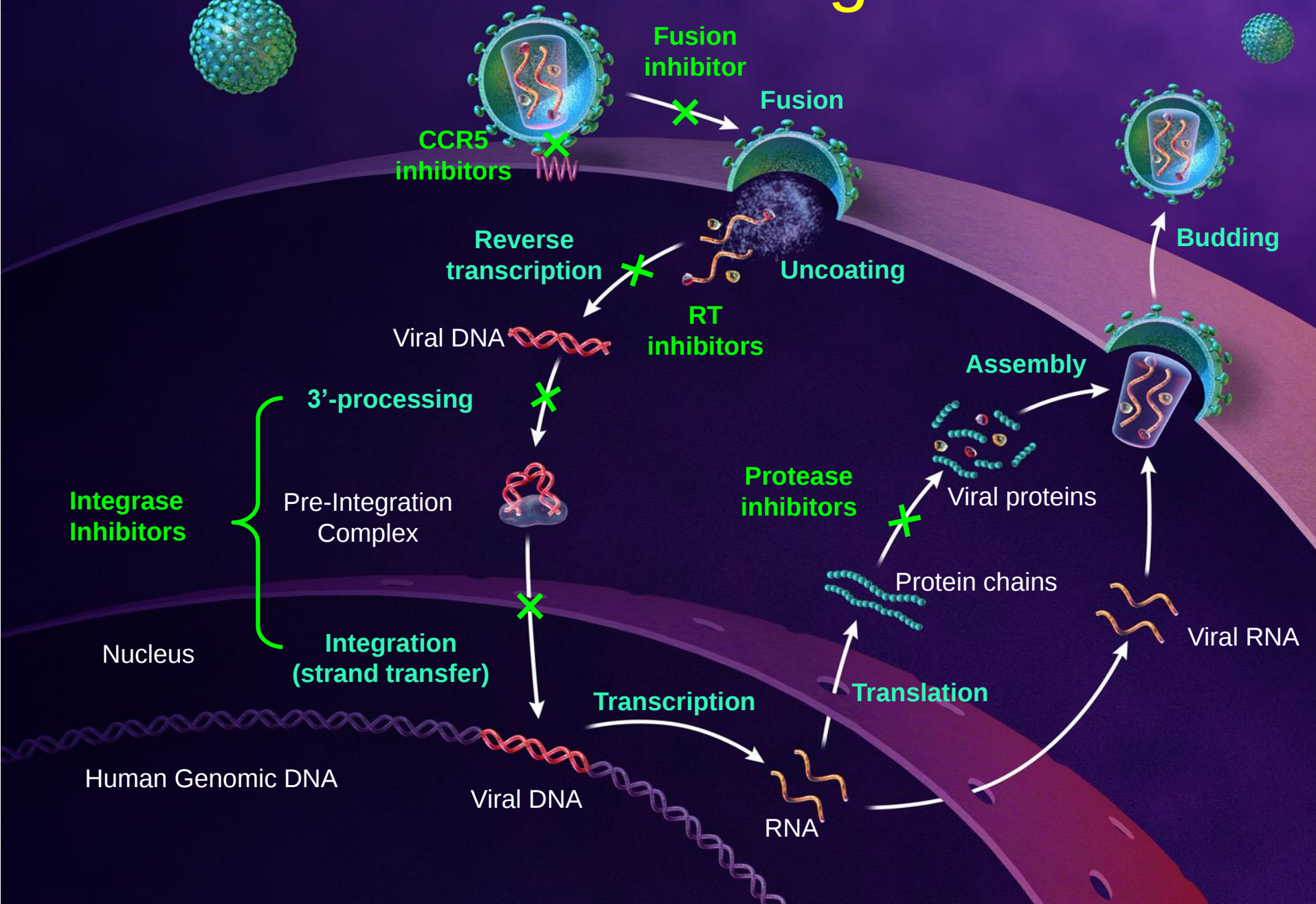


6+C

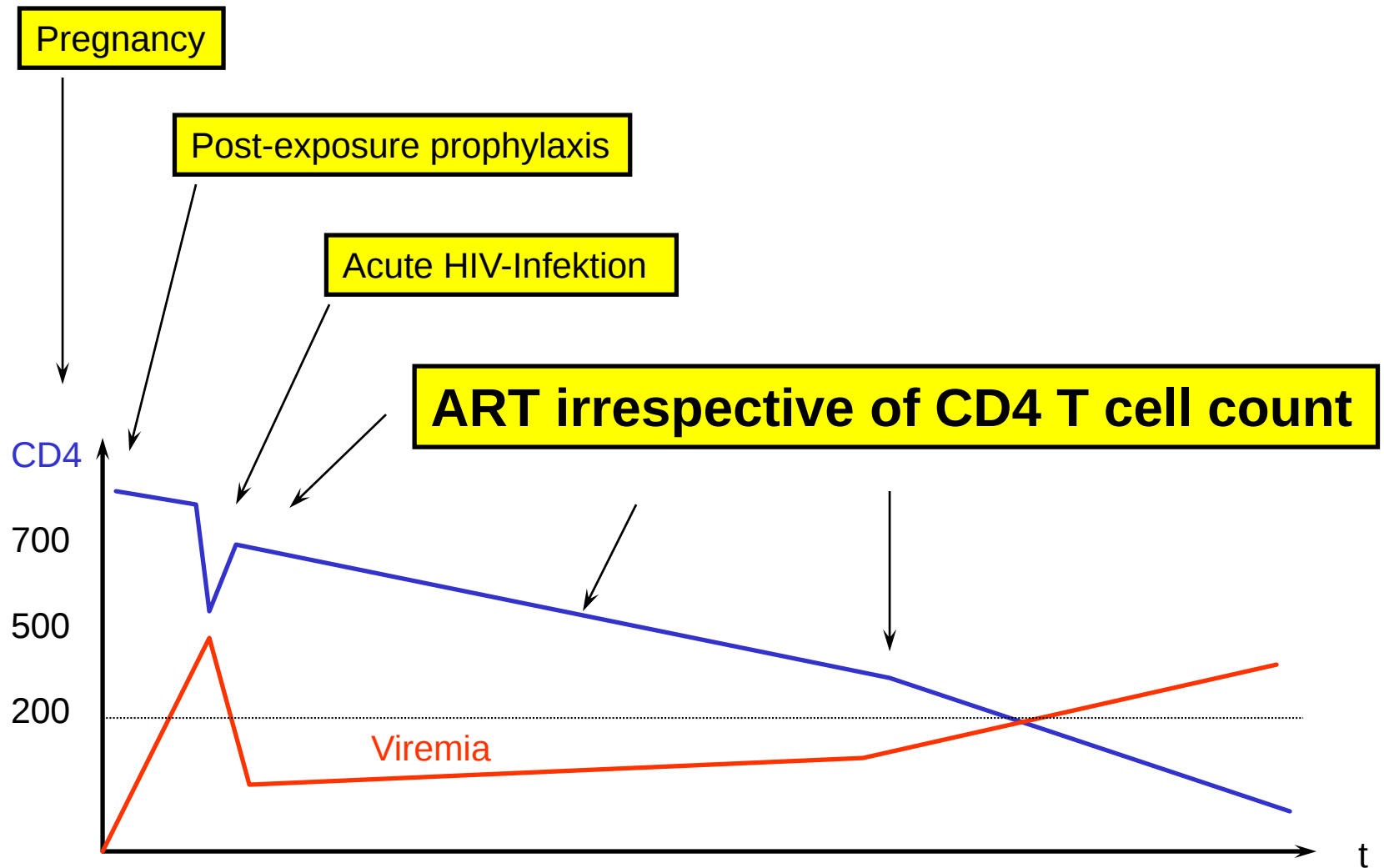


30.7.91

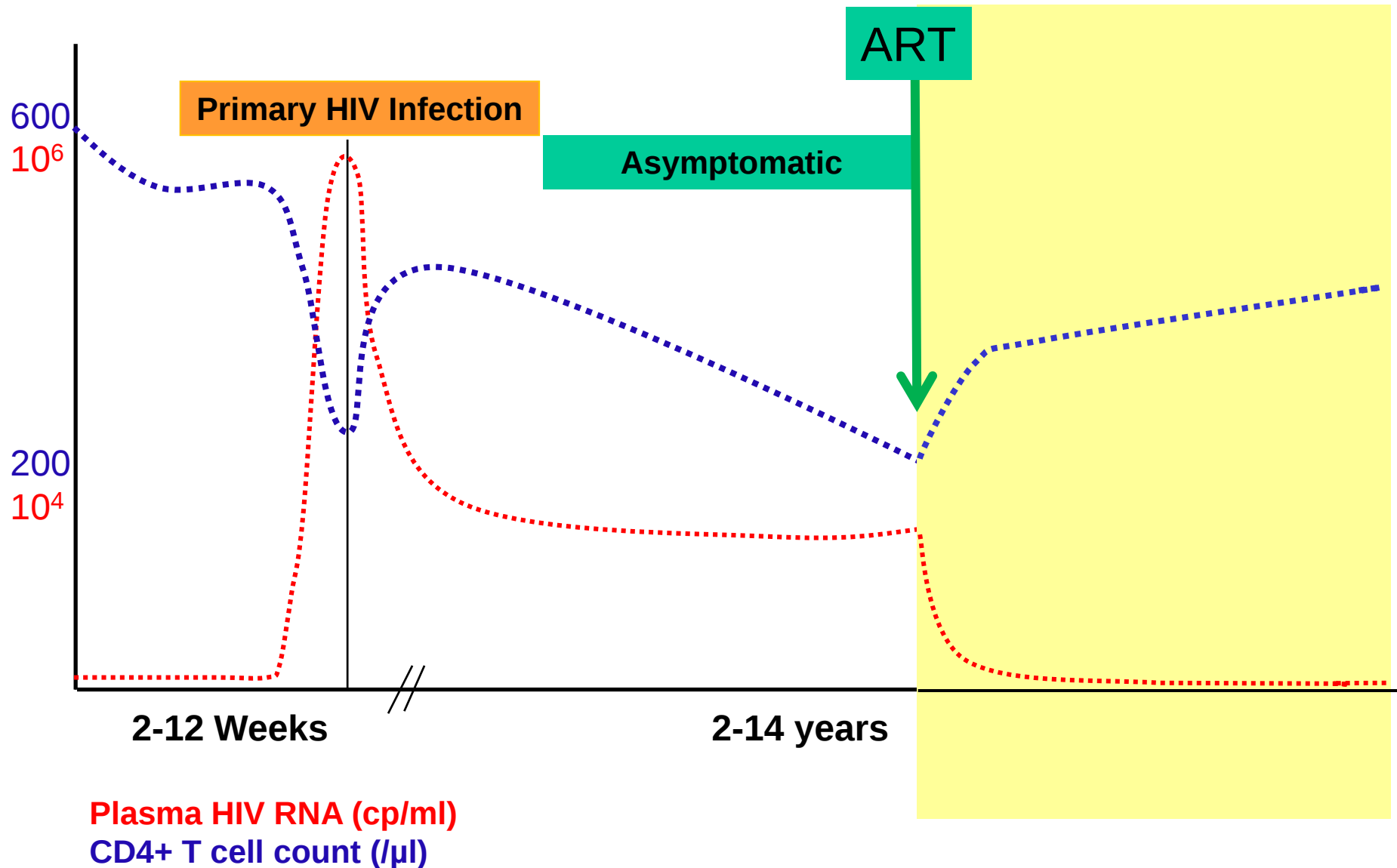
HIV Drugs



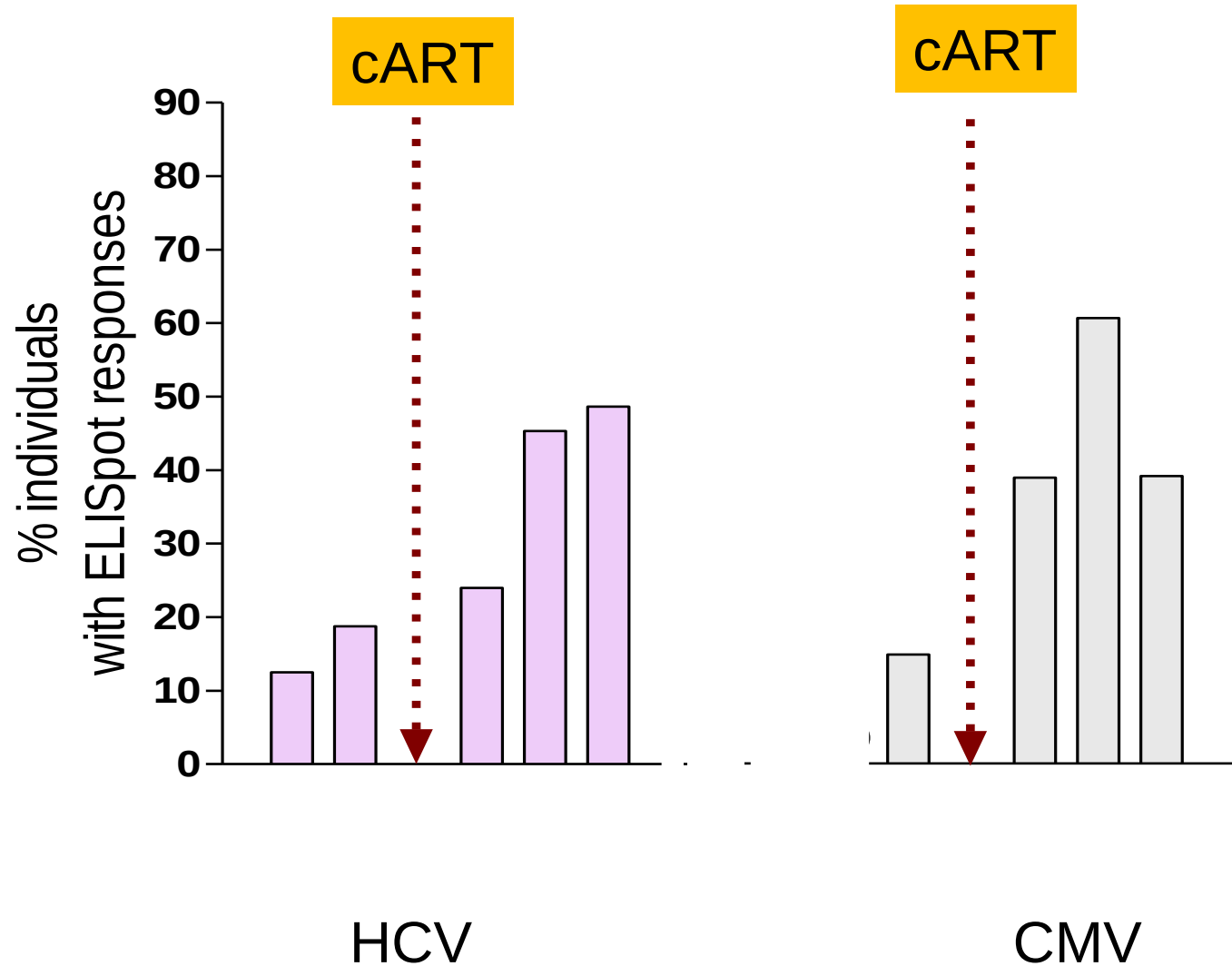
Indications for ART 2019



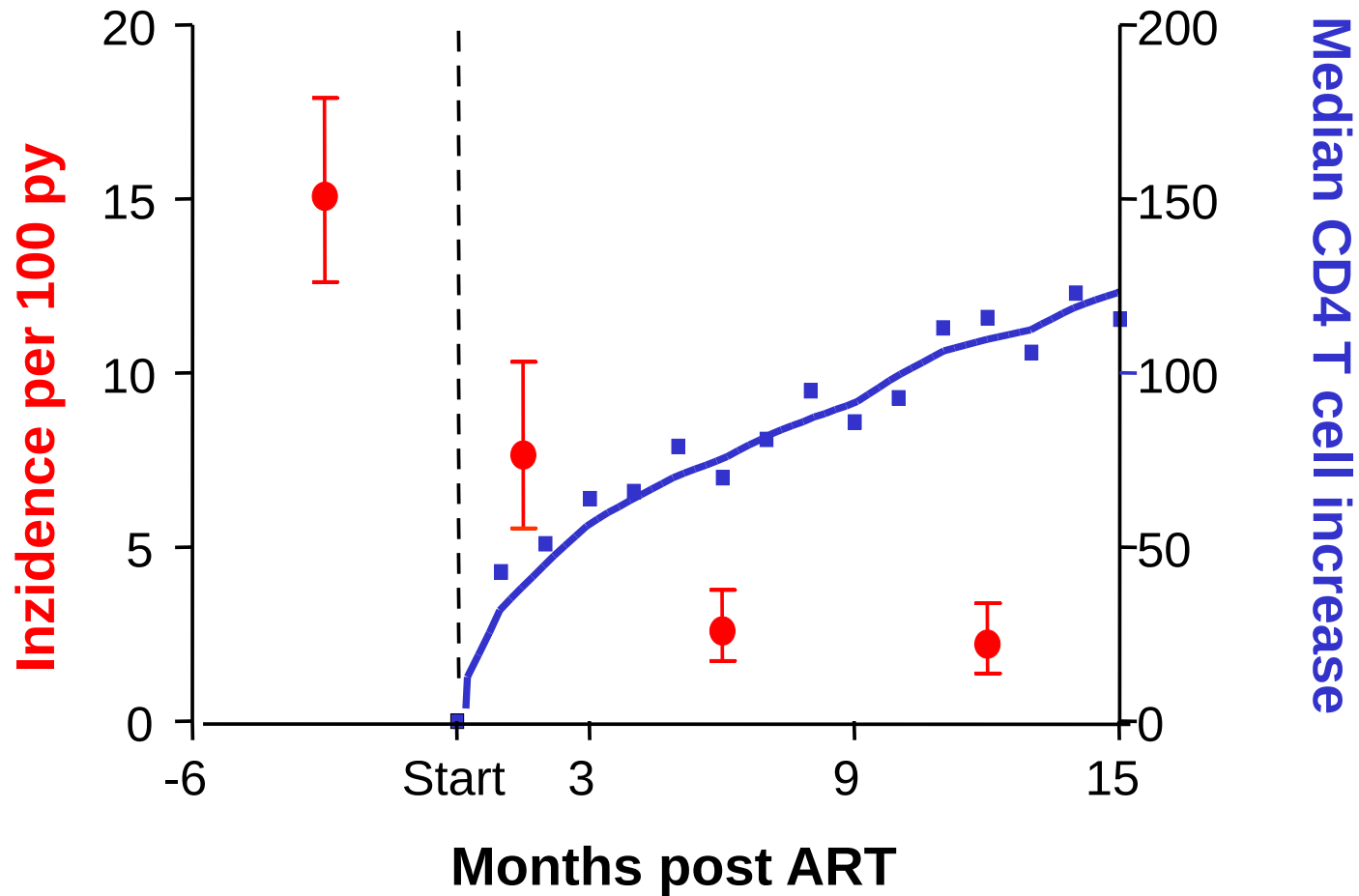
Effect of antiretroviral therapy



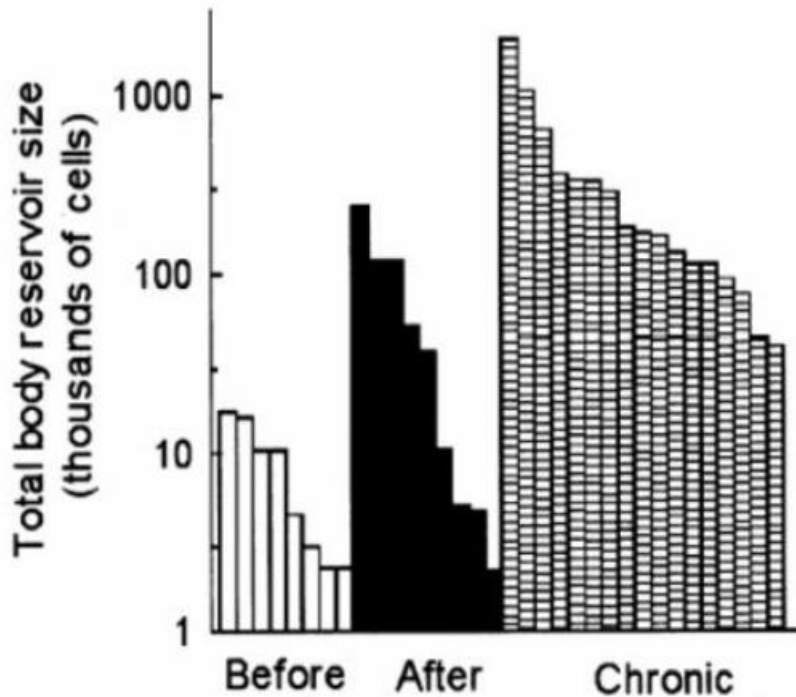
Successful cART is associated with increases in CD4⁺ T-cell responses to HCV and CMV



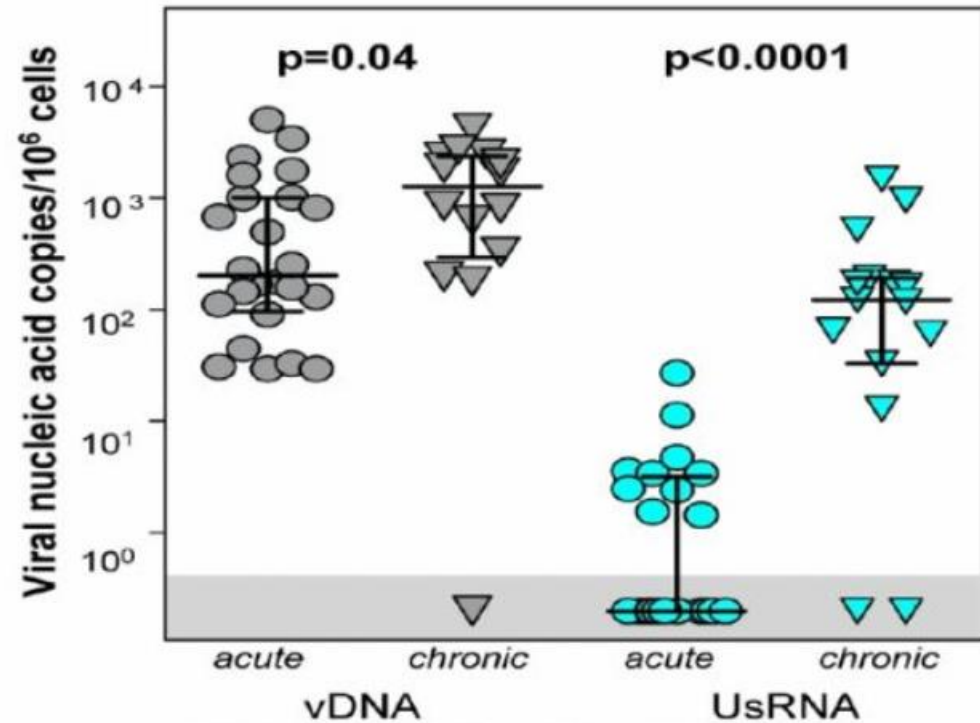
New opportunistic infections



Early ART reduces viral reservoir



Strain et al, JID, 2005

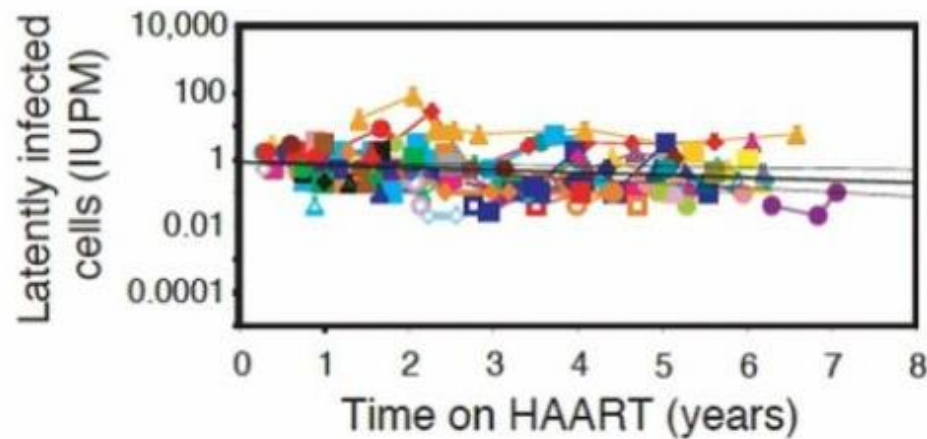


Schmid et al, Plos One, 2010

Archin, PNAS, 2012, Josefsson, PNAS, 2013, Williams, Elife, 2014

...but cure is still not (yet) achievable
(with very few exceptions)

Very slow decay of the latent reservoir



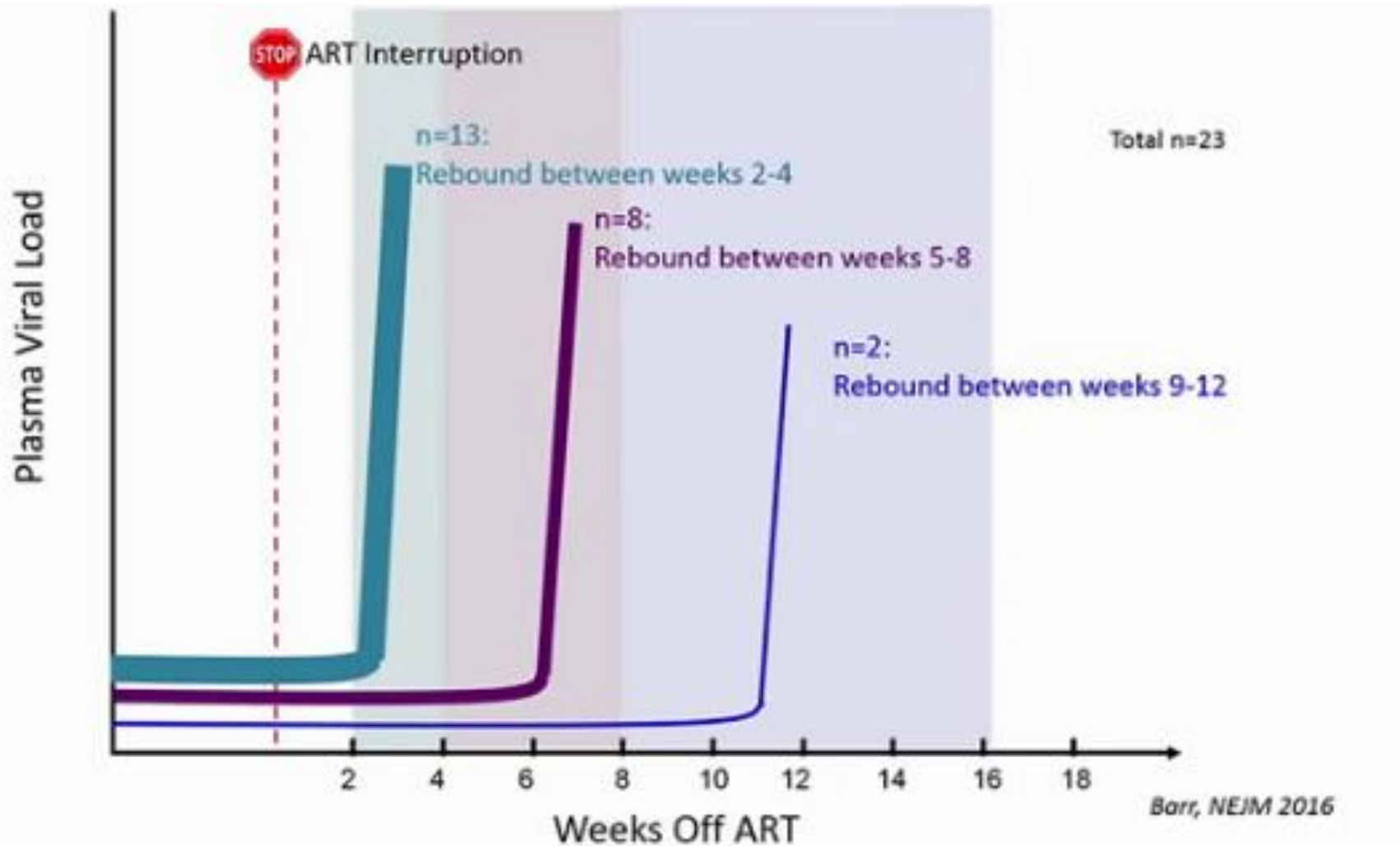
The viral outgrowth assay
measures

$$t_{1/2} = 44 \text{ months}$$

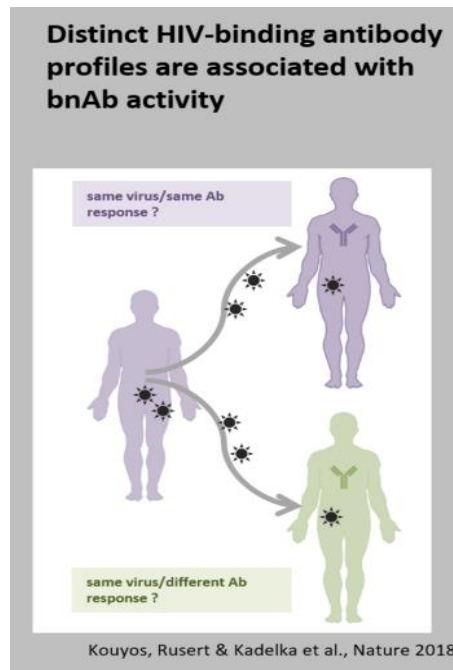
- It would take 60 years to eradicate a low reservoir estimate of 10^5 cells!

Siliciano et al, Nature Medicine, 2003

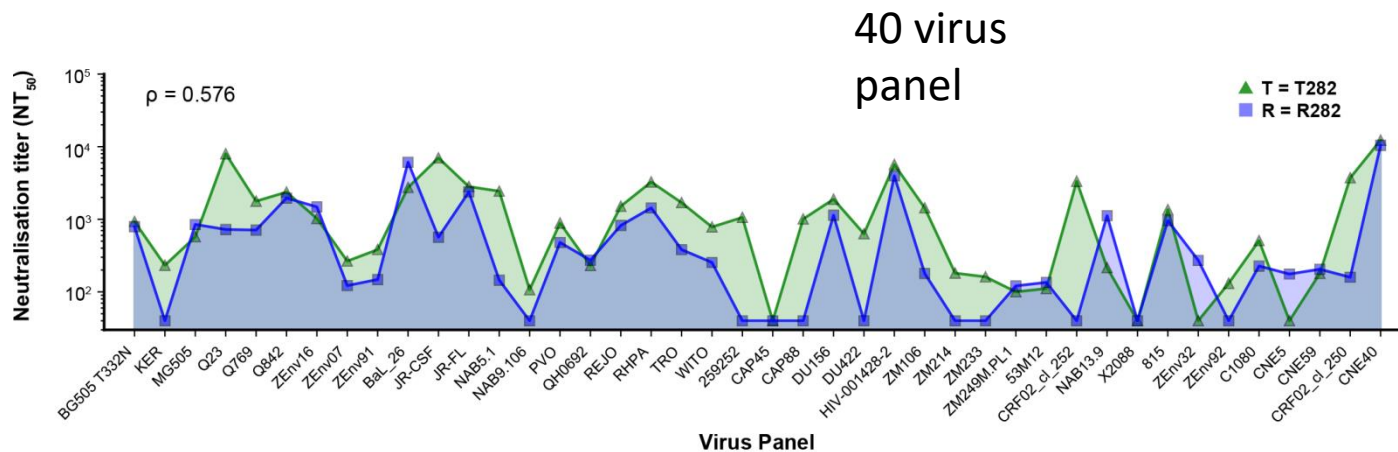
Broadly neutralizing antibodies did not prevent viral rebound after ART interruption



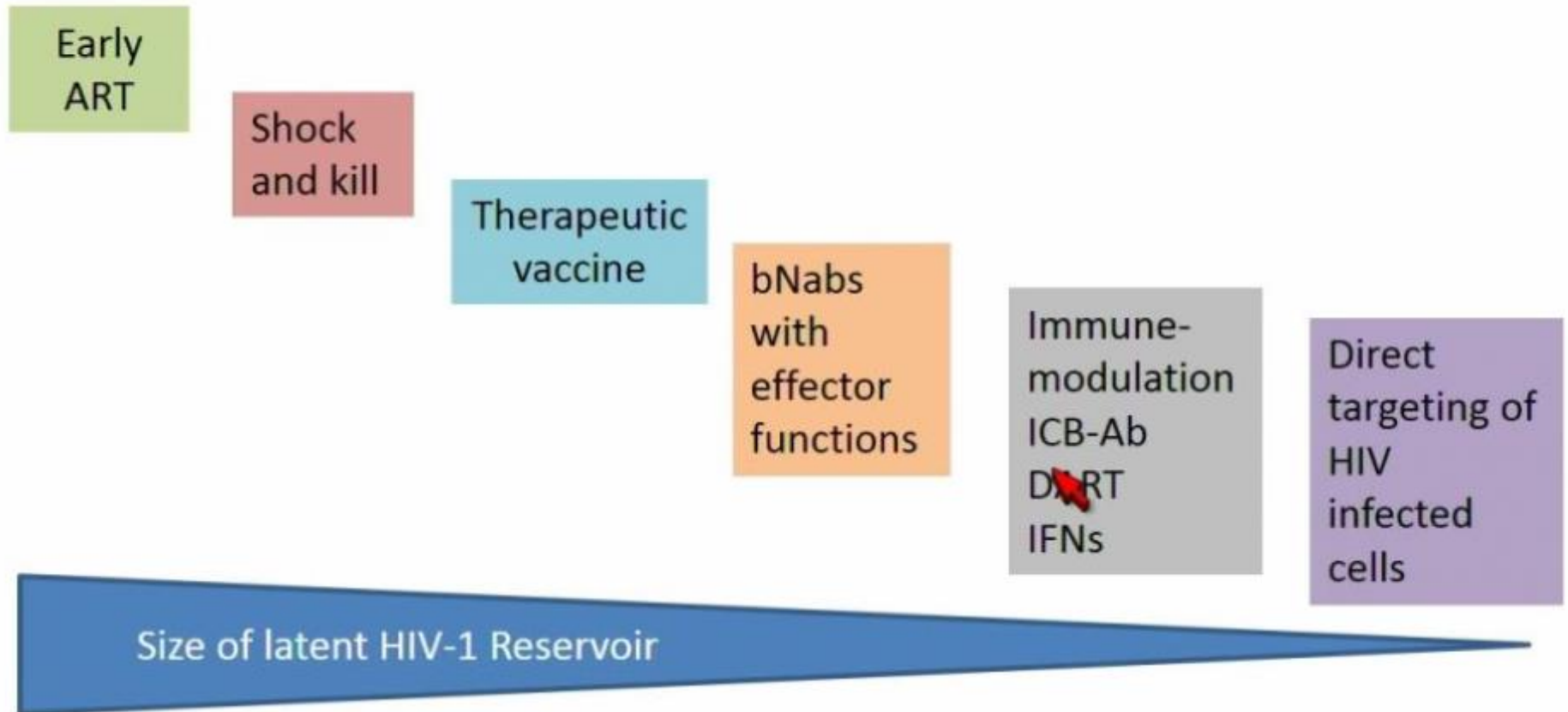
The search for the best HIV antibodies



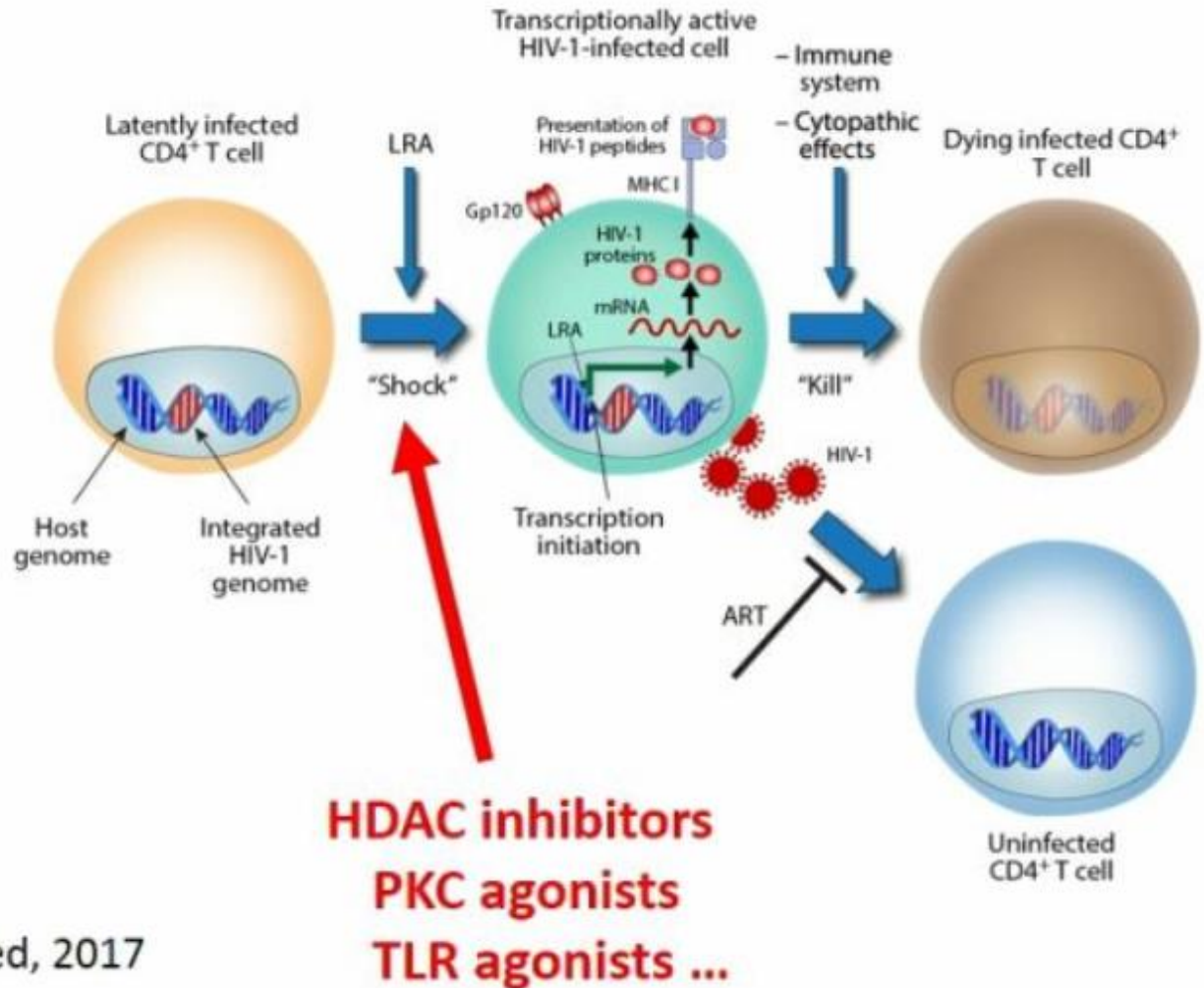
Induction of almost identical bnAbs in two patients with fully different genetic background



Strategies for reducing the latent reservoir

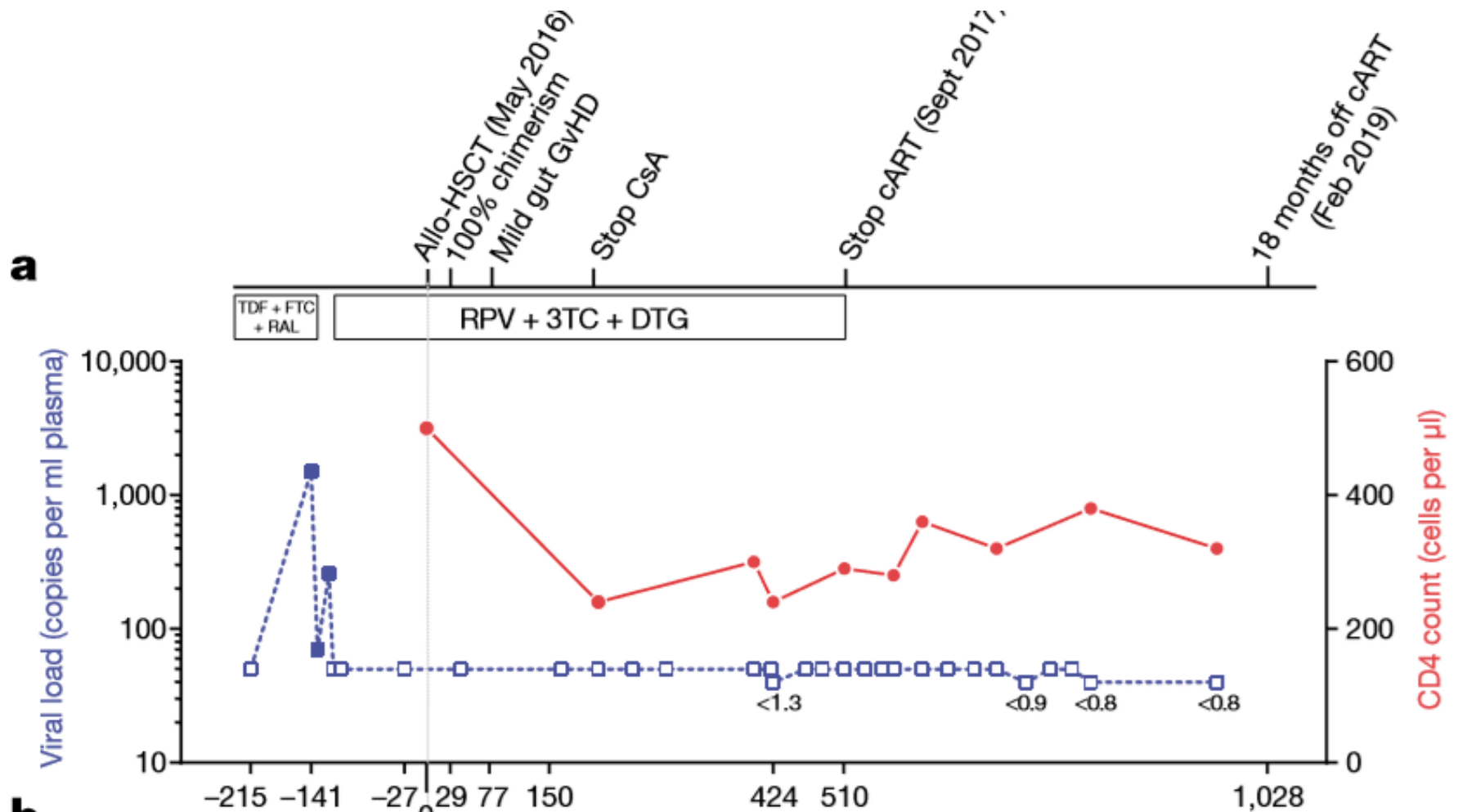


Shock and kill strategy

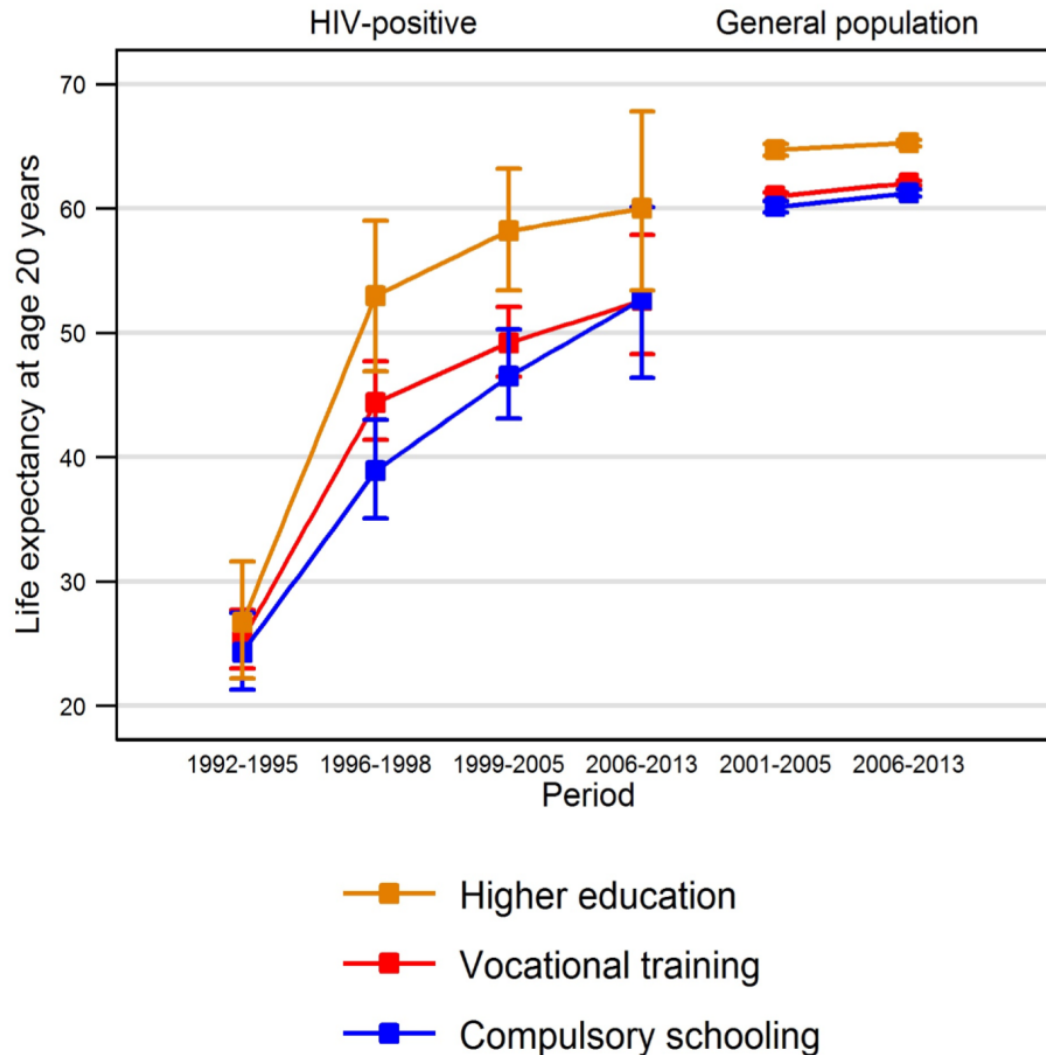


HIV remission (cure?): A very rare event

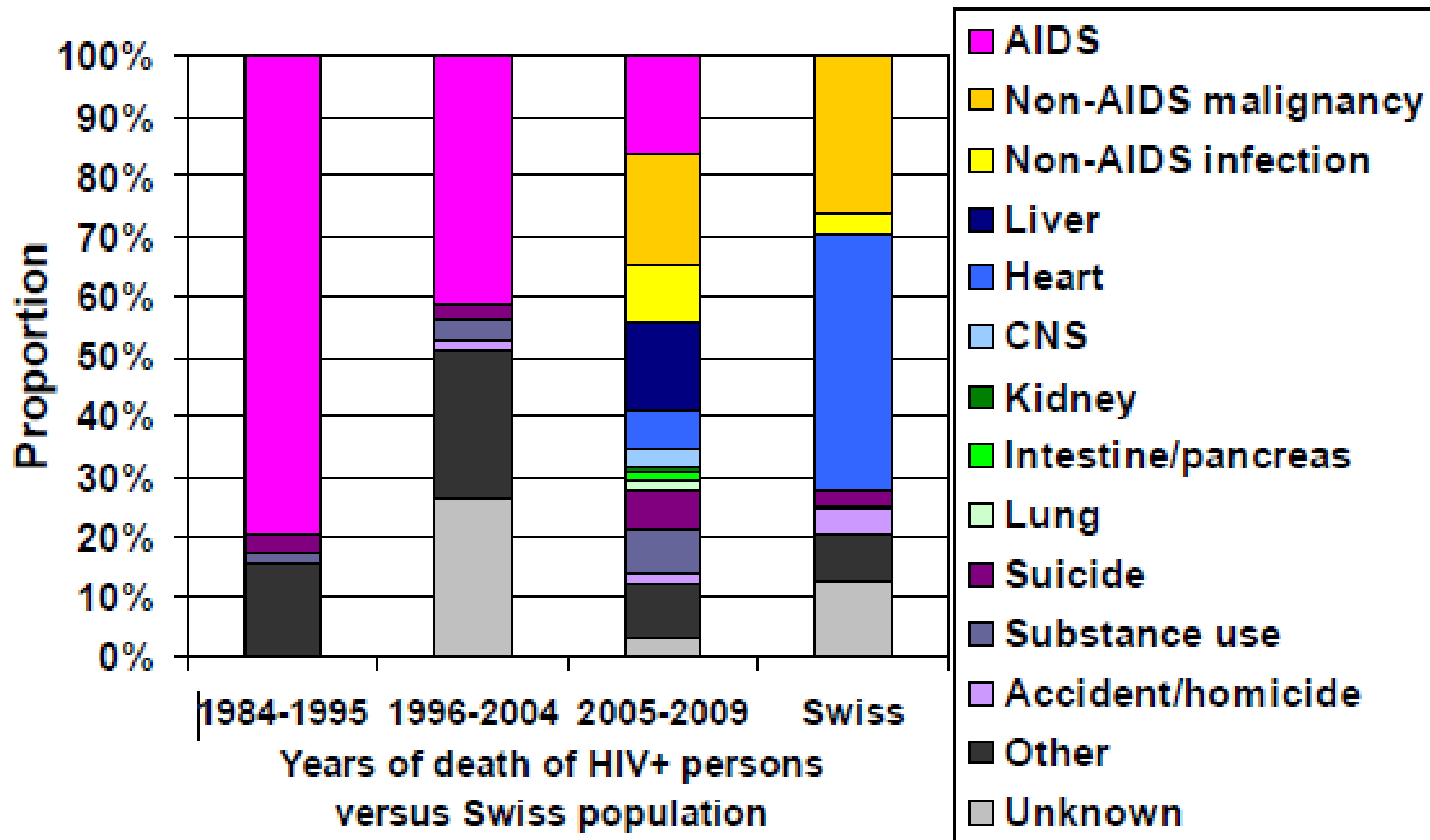
CCR5d32hom!



Life expectancy in HIV-positive individuals and in the general population in Switzerland



Changing causes of death in the SHCS



Summary

