Persistence of inducible replication-competent HIV-1 after long-term ART

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BACKGROUND

- Antiretroviral therapy (ART) effectively inhibits HIV-1 replication but is not curative due to the persistence of a reservoir of latently infected resting CD4+ T cells carrying but replication-competent transcriptionally silent proviruses.
- We have previously shown that the latent reservoir in CD4+ T cells decays slowly with a half-life of 44 months for the first seven years of ART (Siliciano et al., Nat Med, 2003). The stability of the latent reservoir means these long-lived infected cells guarantee lifetime persistence.

Goal

It is unclear whether the latent reservoir continues to decay in people living with HIV (PLWH) on very long-term ART. In this study, we explore the size and composition of the reservoir in PLWH who have maintained suppressive ART for ~20 years.

METHODS

Participants: 31 PLWH maintaining full suppression of viremia for a median time of 22.8 years (Fig. 1).

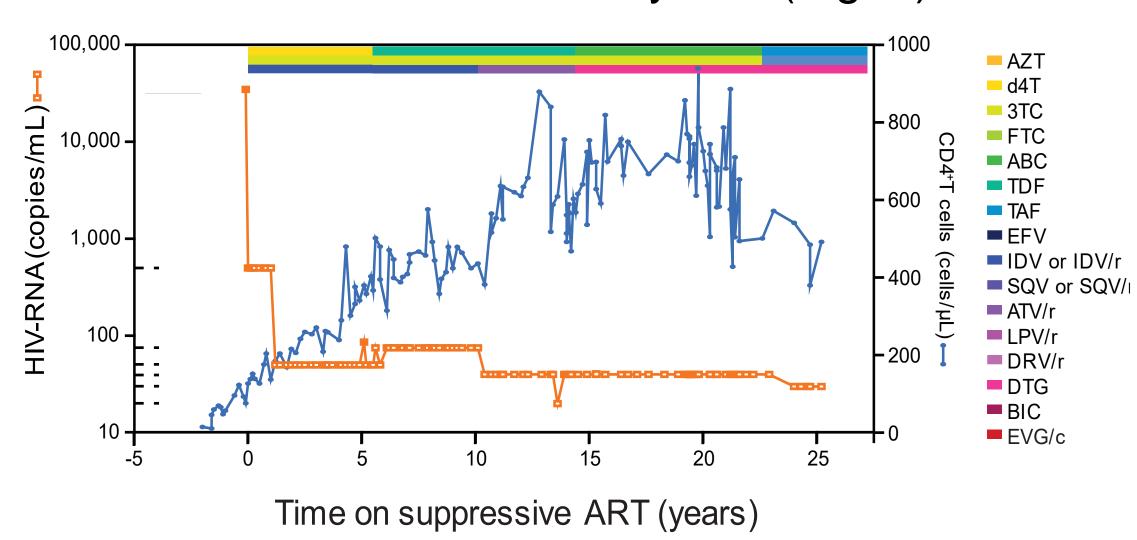


Figure 1. Clinical and virological history for a representative study participant.

We used the quantitative viral outgrowth assay (QVOA, Fig. 2) to determine the frequency of resting CD4+ T cells with inducible, replication-competent virus and the intact proviral DNA assay (IPDA) to measure the frequency of intact proviruses in resting CD4+ T cells. To determine the composition of the reservoir, single genome sequencing of was performed on outgrowth positive QVOA supernatants and proviral DNA.

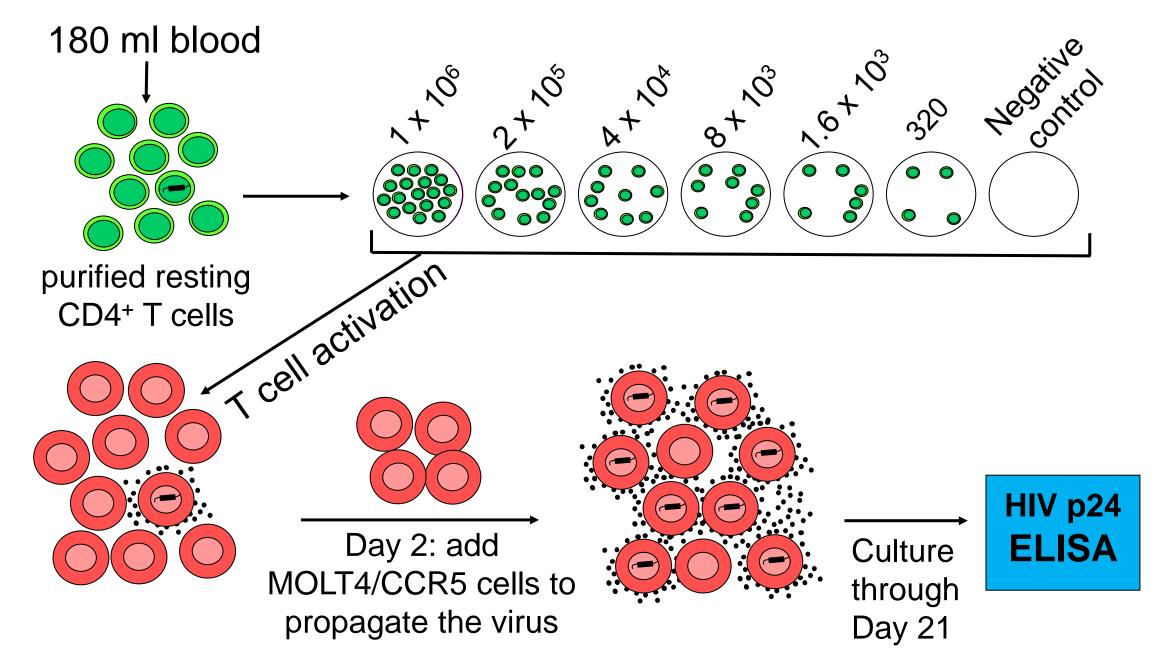


Figure 2. Quantitative viral outgrowth assay (QVOA).

The latent reservoir does not continue to decay in PLWH on long-term ART due to infected cell proliferation.

RESULTS

The QVOA and IPDA both show that reservoir decay does not continue. The frequency of resting CD4+ T cells with inducible, replication-competent virus increases slowly in PLWH on long-term ART.

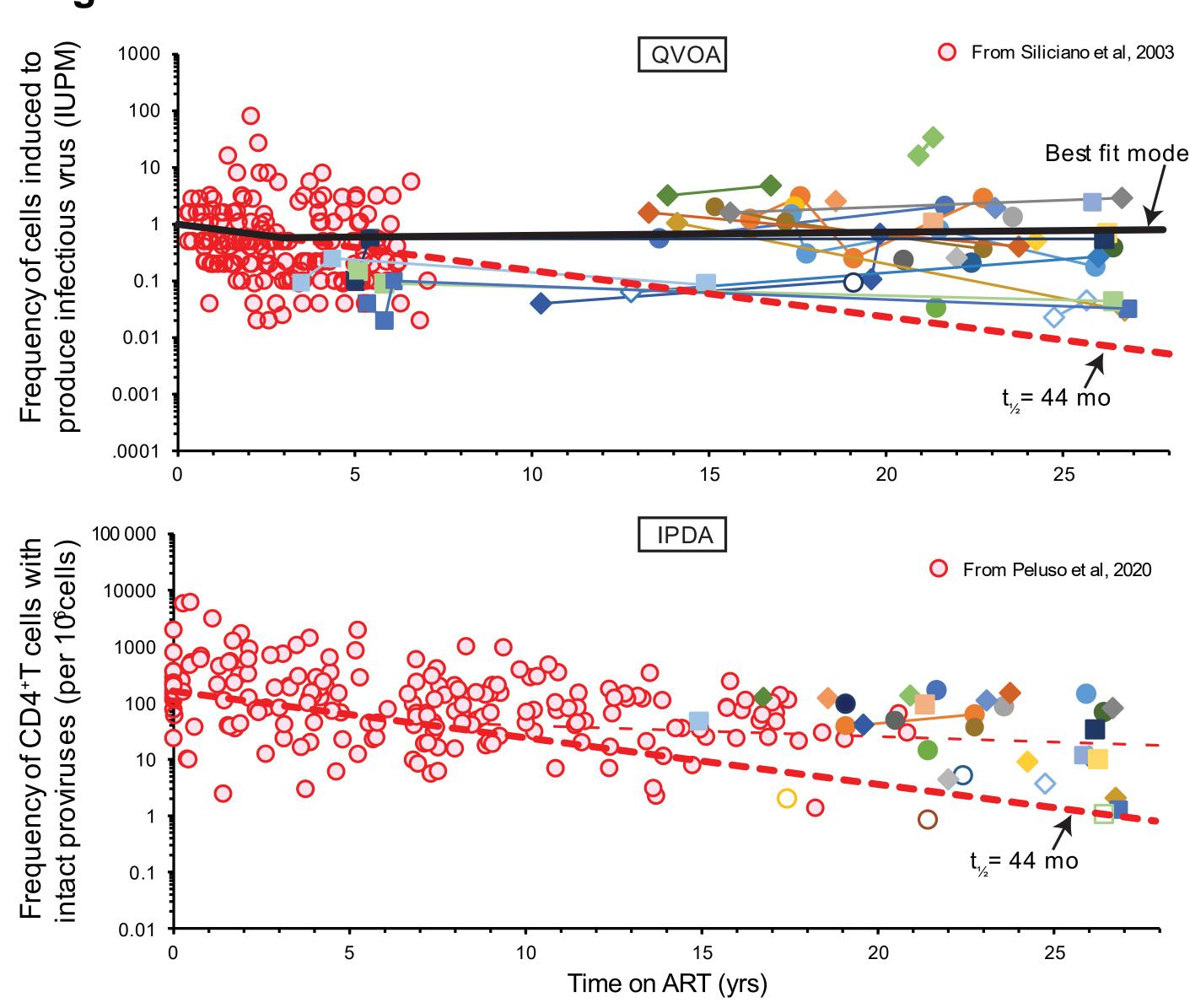


Figure 3. (Top) Frequency of inducible, replication-competent proviruses in resting CD4⁺ T cells over time on ART, as measured by the QVOA, for long-term ART participants (solid shapes). Prior data (pink circles) and predicted 44-month half-life (dashed red line) are replotted from Siliciano et al. (Nat Med, 2003). The best fit decay model (black line) incorporates cross-sectional and longitudinal measurements from repeated sampling and studies of the same participants. (Bottom) Frequency of intact proviruses in resting CD4⁺ T cells over time on ART, as measured by the IPDA, for longterm ART participants (solid shapes). Prior data (pink circles) from Peluso et al. (JCI Insight, 2020) and predicted 44-month half-life (dashed red line) from Siliciano et al. (Nat Med, 2003) are graphed.

Positive correlation between **QVOA** and IPDA measurements.

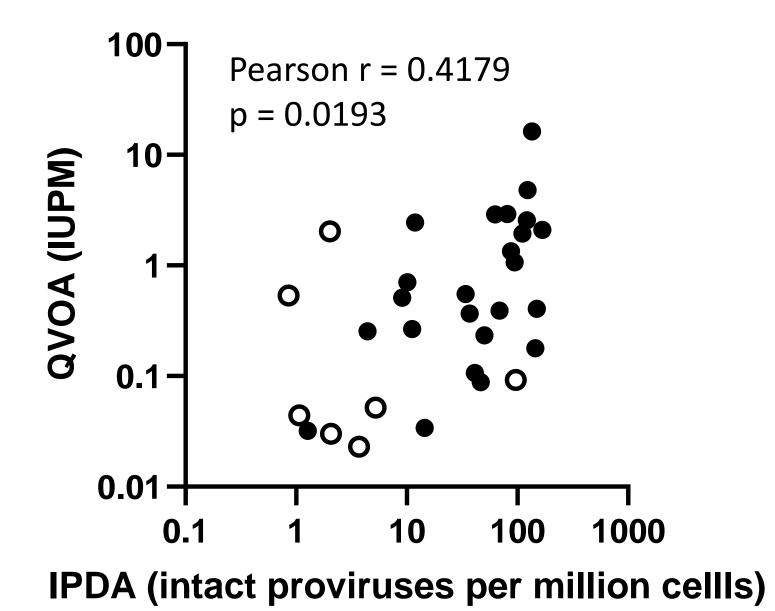


Figure 4. Correlation plot between QVOA and IPDA measurements after long-term ART.

The inducibility index (QVOA/IPDA) remains unchanged in PLWH on long-term ART.

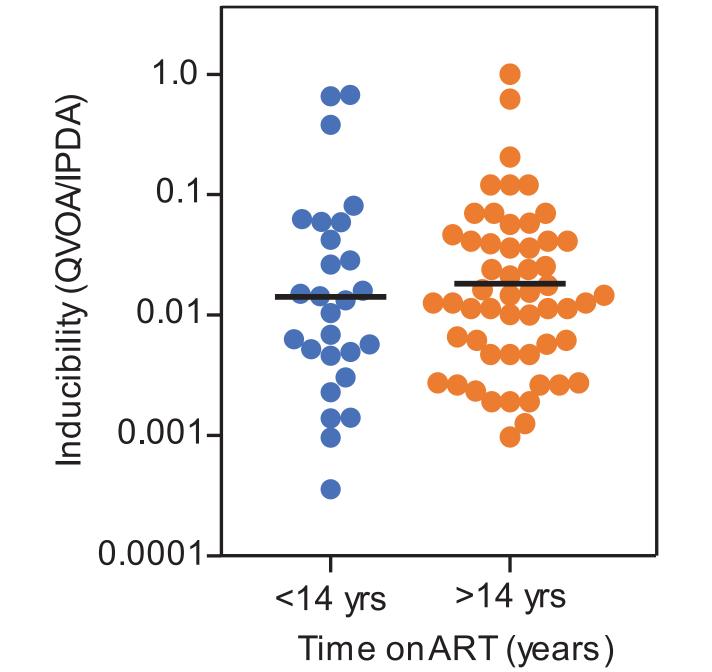


Figure 5. Inducibility plotted as a ratio of QVOA/IPDA measurements from PLWH on ART for <14 years (Bruner et al., Nature, 2019) and after long-term ART.

Large clones dominate the latent reservoir after very long-term ART.

Inducible, replication-competent QVOA isolates (red) are largely clonal and make up a small proportion of the total diversity of the reservoir.

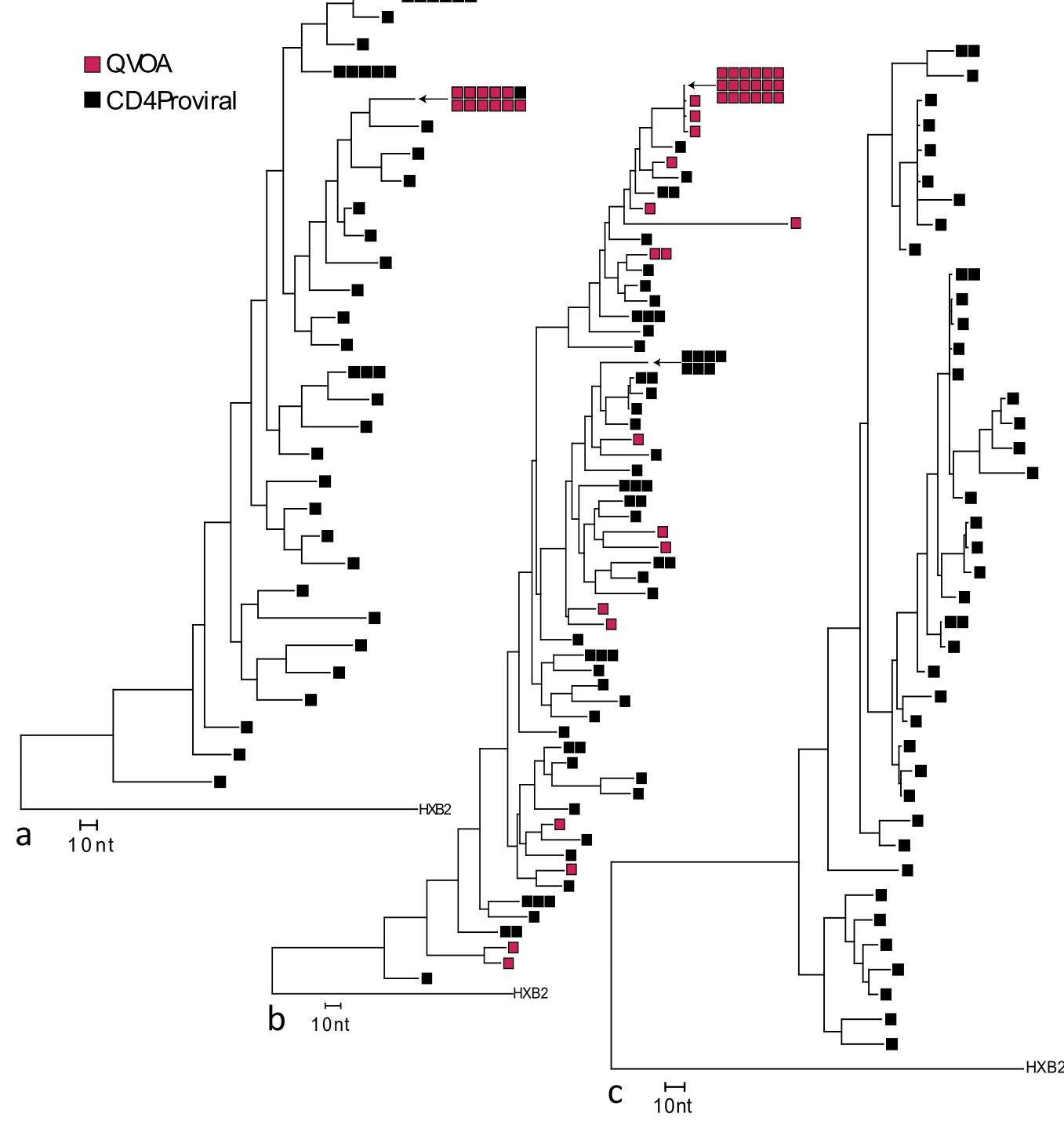


Figure 6. Phylogenic comparison of *env* sequences between QVOA viral outgrowth (red) and proviruses from resting CD4⁺ T cells (black) of representative participants with high (a, b) to no (c) viral outgrowth.

CONCLUSIONS

- After seven years of ART, reservoir decay does not continue and the frequency of cells with inducible, replicationcompetent proviruses begins to increase slowly. This is likely due to the proliferation of infected cells.
- Inducibility of proviruses is not reduced in resting CD4+ T cells of PLWH on very long-term ART.
- Large expanded T cell clones play a major role in contributing to long-term reservoir persistence.
- Due to the persistence of inducible, replication-competent proviruses in resting CD4+ T cells, ART should not be discontinued in PLWH on long-term ART.

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