



HIV-DNA LEVELS, HLA-B\*27 and HLA-DRB1\*13 AMONG LTNP, ECs and HIV controllers

Arianna Gabrieli1, Laura Galli2, Maciej Tarkowski1, Chiara De Giuli3, Annalisa Saracino4, Giulia Marchetti1, Stefano Bonora5, Emanuela Lattuada6, Maurizio Mena7, Antonella D'Arminio Monforte1, Antonella Castagna2, Agostino Riva1, Stefano Rusconi1, on behalf of ICONA Foundation and ELVIS cohort

1. University of Milan, Milano; 2. Ospedale San Raffaele, Milano; 3. IRCCS Lazzaro Spallanzani, Rome; 4. University of Bari, Bari; 5. University of Turin, Turin; 6. University of Verona, Verona; 7. Ospedale Civile di Legnana, Italy.



BACKGROUND

The composition and the development of the HIV-DNA reservoir either in treated or untreated patients is determined by integrated mechanism comprising virological factors, immune system and treatment strategies (1). HLA types have been associated with varying rate of disease progression and different effects have been reported between subtypes of HLA alleles (2). HLA B\*27 and HLA B\*57 are associated with a slower rate of HIV disease progression, and HLA Class II DRB1\*13:03 is associated with a lower plasma viral load in chronic HIV infection.

AIMS

The aim of this study was to determine the association of HLA-B\*27 and HLA-DRB1\*13:03 with HIV-DNA in Elite Controllers, Long-Term Non-Progressors, HIV Controllers, ART-naïve and ART treated patients.

STUDY DESIGN AND METHODS

- We evaluated 231 HIV-1-infected patients from the ICONA and the Elvis Cohorts categorized in 5 distinct groups: 20 Elite Controllers (EC), 35 Long-Term Non-Progressors (LTNP), 17 HIV controllers, 122 ART-naïve and 37 patients under suppressive ART
Total HIV-DNA was extracted from PBMCs by droplet digital PCR (ddPCR) and classified as undetectable if below the detection limit
HLA-B\*27 rs4349859 and HLA-DRB1\*13:03 rs424232 genotypes were determined by TaqMan Assay

STATISTICAL ANALYSIS

- Statistical analysis was performed using SAS software. The correlations between clinical parameters and molecular data were performed by Spearman correlation test and linear regression analysis. Multivariable linear regression was performed to assess SNPs association with HIV-DNA values.

RESULTS

The characteristics of the patients' cohorts are described in Table 1:

Table 1: Characteristics of the patients' cohorts. Columns include Characteristic, EC (n=20), HIV-CONTROLLER (n=17), LTNP (n=35), NAIVE (n=122), ART-TREATED (n=37), and p-value.

rs 4349859 GG genotype was found in 16%, 6%, 14%, 8% and 9% of EC, HIV-controllers, LTNP, ART-naïve and ART-treated patients, respectively (p=0.819; Table 1). Undetectable HIV-DNA was found in 60%, 31%, 35%, 17% and 19% EC, HIV-controllers, LTNP, ART-naïve and ART-treated pts with rs4349859 AG genotype, respectively (p=.004) and in 67%, 100%, 40%, 22% and 0% of EC, HIV-controllers, LTNP, ART-naïve and ART-treated pts with GG genotype(p=.231).

Table 2: Adjusted Mean HIV-DNA (95%CI) (log10copies/10^6PBMC) by category. Columns include Characteristic, Category, Adjusted Mean, Slope of HIV-DNA (95%CI), and P-value.

After adjusting for patients' group, age, gender, years of infection, nadir CD4+, zenith HIV-RNA, CD4+ cell count, CCR5Δ32, IL28B rs4349859, lower HIV-DNA levels were associated with a higher nadir CD4+ (p=.015), rs4349859 GG genotype (p=.049); a marginal association was also observed for CCR5 heterozygous genotype (Table 2). No significant association was found between HIV-DNA values and HLA -DRB1\*13:03 rs424232.

CONCLUSIONS

Significative differences among groups in regard to undetectable HIV-DNA levels were found in pts with rs4349859 AG genotype; lower values of HIV-DNA were found to be associated with the presence of HLA-B\*27 rs4349859 GG genotype and with a higher nadir of CD4+ lymphocytes.

References

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Contact information: arianna.gabrieli@asst-fb-sacco.it

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