

Engineering virus-specific T cells that target HBV infected hepatocytes and hepatocellular carcinoma cell lines

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Abstract

Background & Aims: Virus-specific T cells capable of controlling HBV and eliminating hepatocellular carcinoma (HCC) expressing HBV antigens are deleted or dysfunctional in patients with chronic HBV or HBV-related HCC. The goal of this study was to determine if T cell receptor (TCR) gene transfer can reconstitute HBV-specific T cell immunity in lymphocytes of chronic HBV patients and investigate whether HCC cells with natural HBV–DNA integration can be recognized by genetically modified T cells.

Methods: We used vector-mediated gene transfer to introduce HLA-A2-restricted, HBV-specific TCRs into T cells of chronic HBV as well as HBV-related HCC patients.

Results: The introduced TCRs were expressed on the cell surface, evidenced by V_b and pentamer staining. TCR transduced T cells produced IFN- γ , TNF- α , IL-2, and lysed HBV infected hepatocyte-like cell lines. Furthermore, HCC cell lines with natural HBV–DNA integration could be recognized by HBV-specific TCR- re-directed T cells.

Conclusions: TCR re-directed HBV-specific T cells generated from PBMC of chronic HBV and HBV-related HCC patients were multi- functional and capable of recognizing HBV-infected cells and HCC tumor cells expressing viral antigens from naturally integrated HBV DNA. These genetically modified T cells could be used to reconstitute virus-specific T cell immunity in chronic HBV patients and target tumors in HBV-related HCC.



Expression of introduced TCR in chronic HBV patients

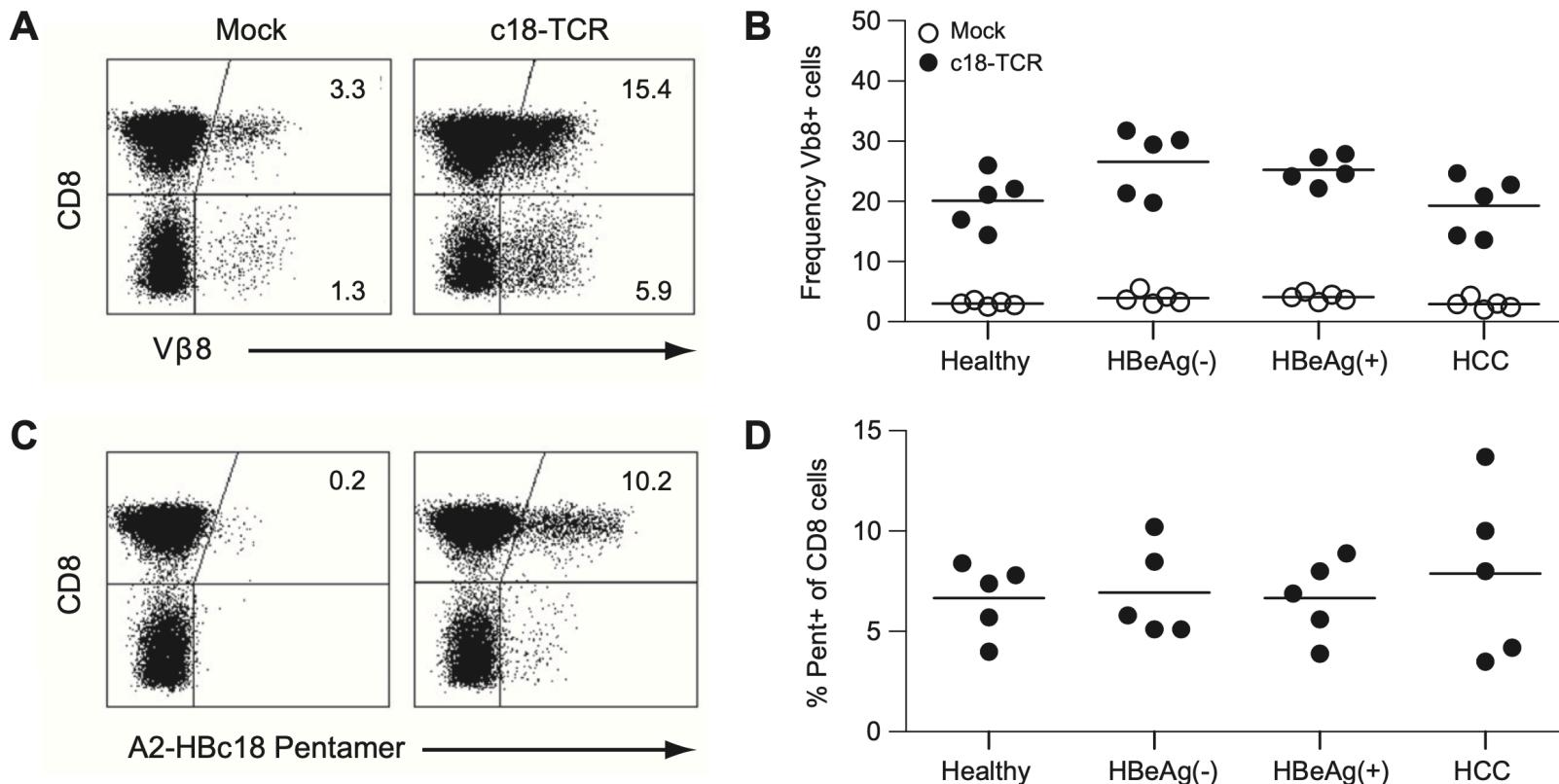


Fig. 1. Expression of introduced TCR. (A) Dot plot of Vb8.2 expression in mock or c18-TCR transduced T cells from a representative HBeAg- patient. (B) Mean frequency of CD8+ Vb8.2+ T cells in mock and c18-TCR transduced T cells from five patients in each group. (C) Dot plot of HLA-A2-HBc18-27 pentamer staining in mock or c18-TCR transduced T cells from a representative HBeAg- patient. (D) Mean CD8+ pentamer+ T cells, in mock and c18-TCR transduced T cells from five patients in each group. There was no statistically significant difference between pentamer+ or Vb8+ cells from each patient group using one-way ANOVA analysis ($p > 0.05$).



TCR gene-modified T cells are multi-functional

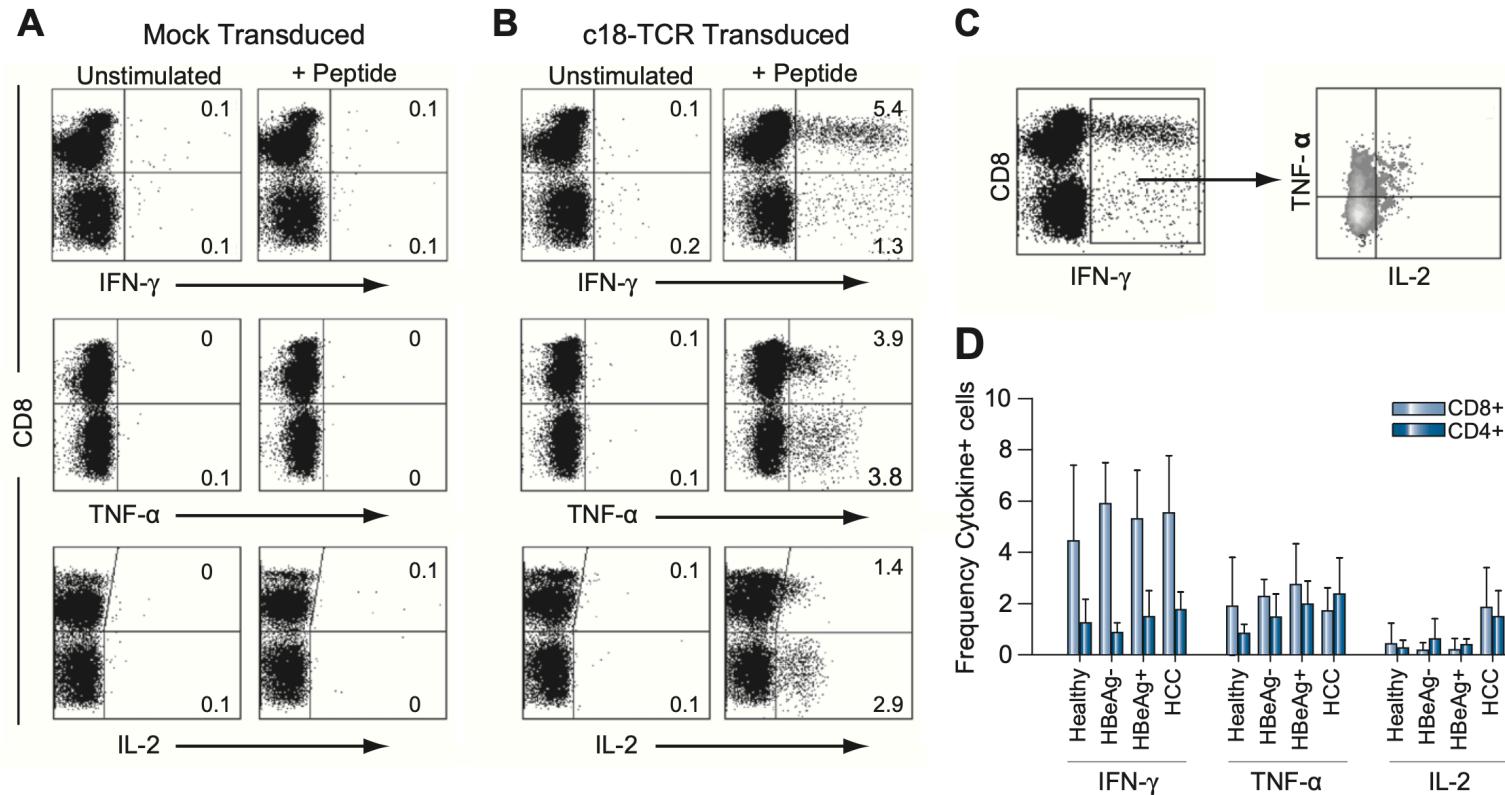


Fig. 2. Functional profile of TCR transduced T cells. Dot plots from a representative HBeAg- (A) mock and (B) c18-TCR transduced T cells, +/- peptide stimulation, stained for CD8 and IFN- γ (top row), TNF- α (middle row) and IL-2 (bottom row). (C) TNF- α and IL-2 production by IFN- γ + cells to demonstrate multi-functionality of TCR transduced cells. (D) Mean frequency of cytokine positive cells from all patients in each group. Data shown is mean \pm standard deviation of the frequency of cytokine positive cells from each patient group.



Sensitivity of TCR transduced T cells

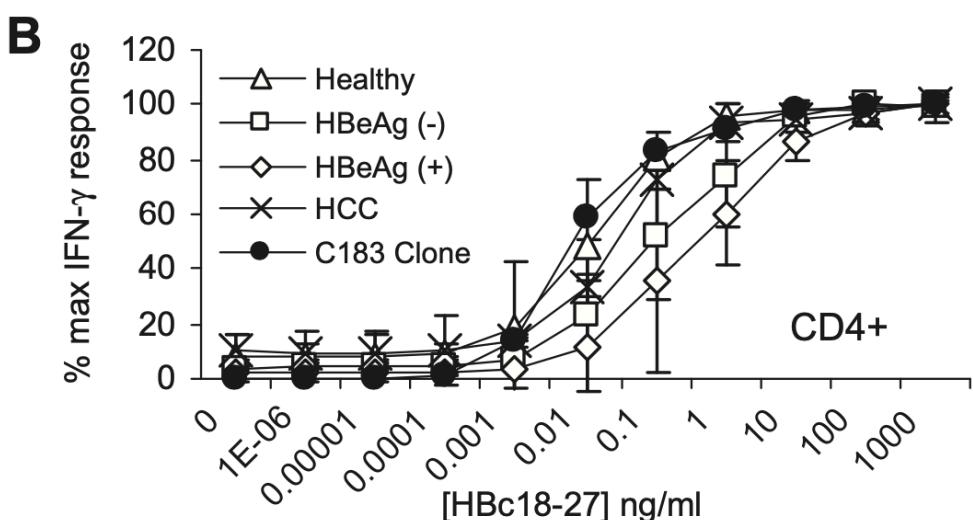
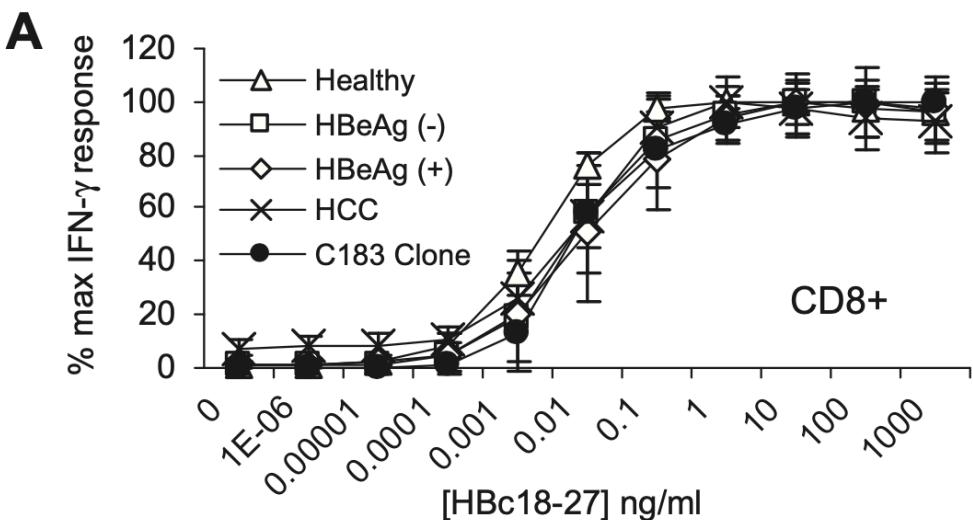


Fig. 3. Sensitivity of TCR transduced T cell activation in (A) CD8 or (B) CD4 c18-TCR transduced T cells from each patient group compared to the original T cell clone, C183. Results are displayed as mean of five patients from each group, +/- standard deviation of percent maximum IFN- γ response obtained from intracellular cytokine staining.



Cytotoxicity of TCR transduced T cells

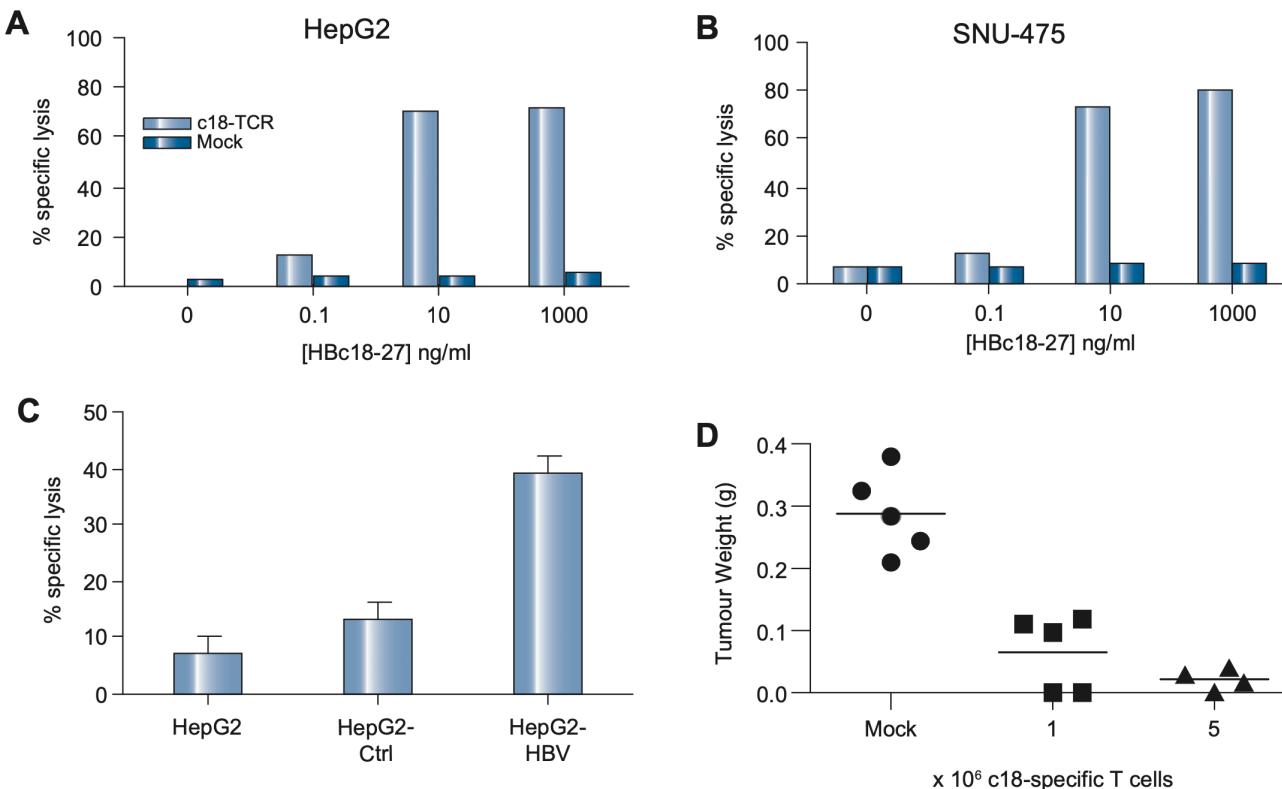


Fig. 4. Lysis of hepatocyte cell lines. Dose dependent lysis of peptide loaded (A) HepG2 and (B) SNU-475 HCC by mock or c18-TCR transduced T cells. (C) Lysis of HBV expressing HepG2 cells (HepG2-HBV) by c18-TCR transduced T cells. HepG2 cells or HepG2 with empty expression cassette (HepG2-ctrl) served as negative control. Each panel is representative of at least three separate experiments with T cells from different patients. (D) In vivo cytotoxicity assay. Size of subcutaneous tumors 15 d after adoptive transfer of 1 or 5 x 10⁶ c18-TCR T cells.



Recognition of HCC lines naturally expressing HBV antigen

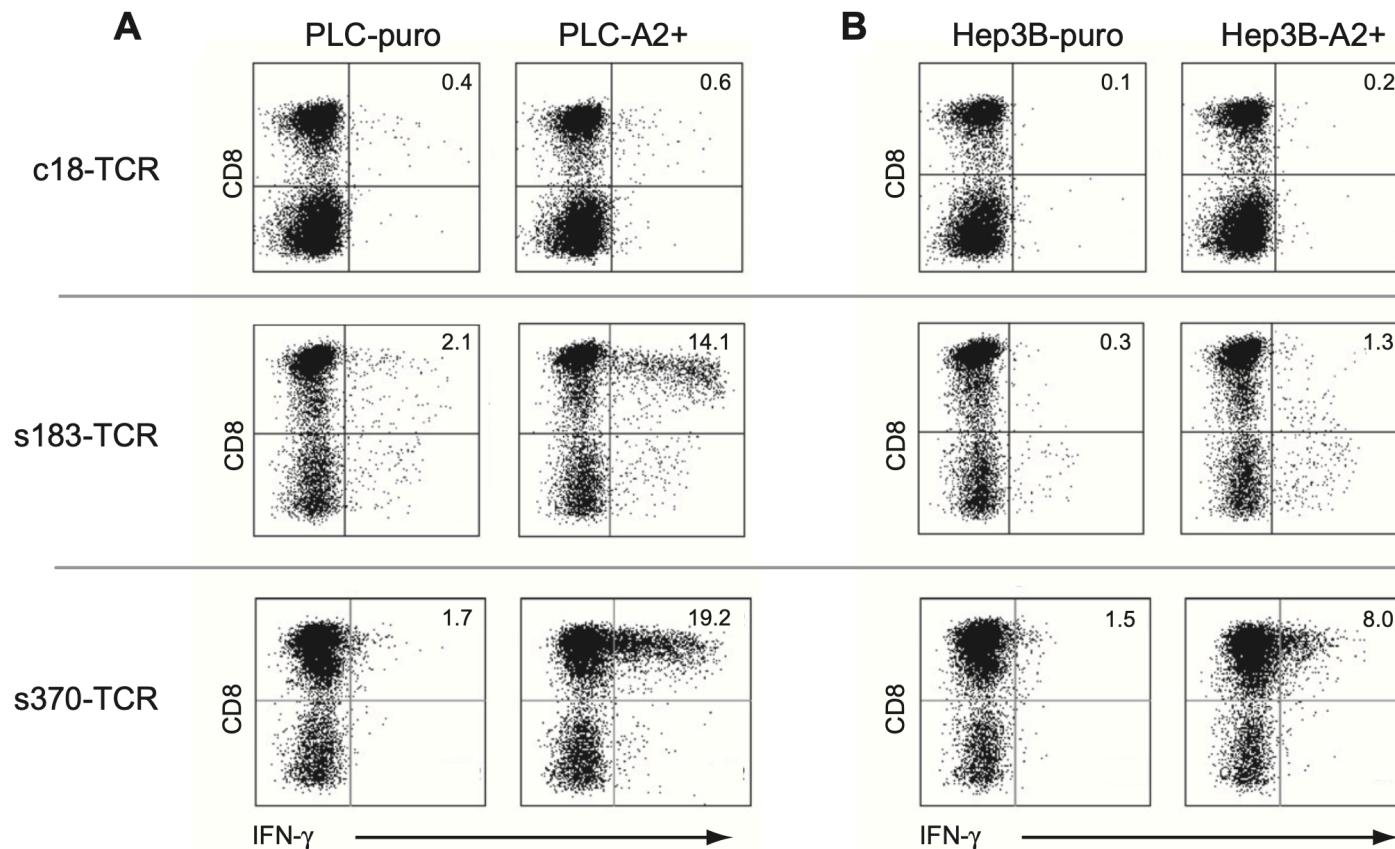


Fig. 5. Recognition of HCC cell lines naturally expressing HBV proteins. C18-TCR (top row), s183-TCR (middle row), and s370-TCR (bottom row) transduced T cell IFN- γ production following overnight co-culture with (A) HLA-A2 negative PLC-puro and HLA-A2+ PLC-A2 or (B) Hep3B-puro and Hep3B-A2 cells. T cells used for this experiment were derived from healthy donors.



Recognition of HCC lines naturally expressing HBV antigen

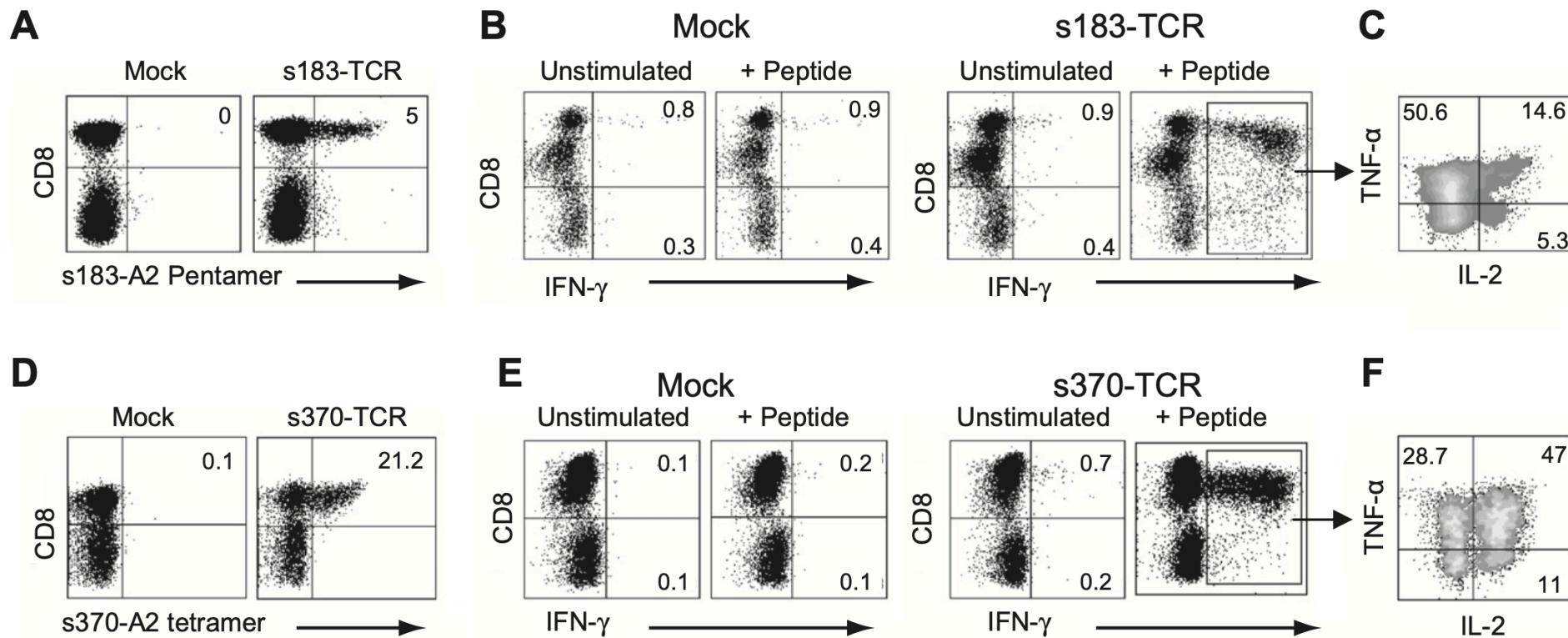


Fig. 6. Characterization of s183- and s370-TCR expression and transduced T cell function. HLA-A2 pentamer staining of mock and (A) s183-TCR or (D) s370-TCR transduced T cells. IFN- γ production in mock and (B) s183-TCR or (E) s370-TCR transduced T cells. Transduction with (C) s183-TCR and (F) s370-TCR generates multi-functional T cells. Panel shows TNF- α and IL-2 production by IFN- γ + T cells.