



POSTER PRESENTATION

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Two independent functions of V γ 2V δ 2 T cells discriminated by CD16 during HIV-1 infection

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Background

V γ 2V δ 2 (V δ 2) T cells play a vital role in the control of HIV infection. V δ 2 T cells recognize phosphoantigens such as IPP, and they mediate ADCC through Fc γ RIIIa (CD16). Our goal is to understand how the heterogeneous repertoires of V δ 2 T cells are involved in both phosphoantigen-induced response and ADCC in HIV infection, especially in the early stage of HIV infection.

Methods

PBMCs were obtained from a total of 81 subjects, including 18 early, 42 chronic HIV-1 infected subjects (all treatment-naïve) and 21 healthy subjects. Cellular immune functions of V δ 2 T cells were analyzed by flow cytometry.

Results

Circulating V δ 2 T cells comprised two functionally diverse subsets which were discriminated by the CD16 expression. Most cytotoxic molecules and IFN- γ were released by CD16⁻ subset (98% in average) after IPP stimulation, while the CD16⁺ subset was in charge of triggering ADCC via CD16 that was closely related to HIV-associated changes in V δ 2 T cell-mediated ADCC ($p < 0.001$). In early HIV infection, the CD16⁻ V δ 2 T cells dramatically decreased in comparison with healthy controls ($p = 0.02$), accompanied by the decline of IPP-responsive V δ 2 T cells ($p = 0.01$). Interestingly, a dramatic functional switch of V δ 2 T cell-mediated ADCC with almost reverse profile of the CD107a and IFN- γ expression compared to uninfected group was observed since early HIV infection. Frequency of CD107a⁺ V δ 2 T cells from early-infected group was significantly higher than that from healthy controls ($p < 0.05$). Although the IPP-activated V δ 2 T cells declined notably in chronic-infected individuals with CD4⁺>500 (cells/ μ l), the percentage of antibody-dependent cytotoxic

V δ 2 T cells was over threefold as high in CD4⁺>500 individuals as in healthy controls ($p < 0.05$ for both).

Conclusion

These data revealed the involvement of two V δ 2 T subsets with different functions during HIV infection and highlighted the plasticity of V δ 2 T cell-mediated ADCC in controlling HIV infection.

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