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## ANTI-HTLV-I p19 SUPPRESSES HTLV-I AG EXPRESSION IN PERIPHERAL BLOOD LYMPHOCYTES FROM HTLV-I CARRIERS

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*Abstract* : Anti-HTLV-I antibodies possess an inhibitory action for HTLV-I infection. In cases where cells persistently expressing HTLV-I antigen are the source of infection in an in vitro system, antibodies against HTLV-I env antigens (such as anti-HTLV-I gp46<sup>175-199</sup> antibody, etc.) have an inhibitory action for HTLV-I cell to cell infection. Our examination of this inhibitory action for HTLV-I infection in peripheral blood lymphocytes from HTLV-I carriers, who did not express antigens, revealed that anti-HTLV-I p19<sup>100-130</sup> antibody inhibit infection by suppressing the expression of HTLV-I antigens.

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**Key words** : HTLV-I , antigen, anti-p19, anti-gp46

### INTRODUCTION

Through an experimental system with XC cell (a rat sarcoma cell line) assay in vitro<sup>1-7)</sup> and with rabbits in-vivo<sup>8,9)</sup>, anti-HTLV-I antibodies have been reported to have an inhibitory action for HTLV-I infection. It has also been reported that preventive effects in-vitro exist in the antibody fraction against HTLV-I gp46<sup>10)</sup>. These reports suggest that the expression of the HTLV-I envelope antigen has a significant role in the intercellular infection with HTLV-I. If the expression of this HTLV-I envelope antigen can be suppressed, there is a

possibility of preventing the intercellular infection with HTLV-I. We examined what kind of antibody fraction in the anti-HTLV-I antibody controlled this antigen expression.

## METHODS

We collected and pooled, with their consent, the sera samples of pregnant women who were found to be anti-HTLV-I sero-positive<sup>11)</sup> in early-stage pregnancy screening tests. We separated using a method by Lammler *et al.*<sup>12)</sup> the antibodies against HTLV-I p19<sup>100-130</sup> (amino acid sequence PPPSSPTHDPDSDPQIPPPYVEPTAPQVL)<sup>13,14)</sup> and against HTLV-I gp46<sup>175-199</sup> (amino acid sequence FLNTEPSQLPPTAPPLLPHSNLDHI)<sup>15)</sup> from the pooled anti-HTLV-I positive sera. The purity levels of these antibodies were examined using a western blot assay kit (Fujirebio Inc., Tokyo, Japan).

We separated peripheral blood lymphocytes (PBLs) from the bloods of three consenting HTLV-I sero-positive pregnant women using the Ficoll-Conray gradient centrifugation method. Then, PBLs were cultured in different types of culture media, anti-HTLV-I positive pooled sera, anti-HTLV-I negative pooled sera, or each purified antibody in 10% FCS and 10% crude IL-2<sup>16)</sup> supplemented RPMI-1640 media, on 24-well plates. The antibody titer of the added anti-HTLV-I antibody-positive pooled sera and those of purified antibodies in the culture media were adjusted to x32 by the immunofluorescence (IF) method. Half of the culture media were changed twice a week, and the cells were cultured for 56 days. Every 7 days after the commencement of culture, part of the cultured cells were collected, washed 3 times with phosphate buffered saline (PBS), and then applied to the glass slide, fixed with acetone, and preserved at -20°.

The expressions of HTLV-I group specific antigen (gag p19) or HTLV-I envelope antigen (env gp46) were examined using an indirect IF method with Gin1417) or purified anti-HTLV-I gp46<sup>175-199</sup> as the first antibody, and with FITC labeled anti-mouse IgG F(ab)<sub>2</sub>' (goat) or with FITC labeled anti-human IgG F(ab)<sub>2</sub>' (goat) as the second antibody.

## RESULTS

No antibodies against other fractions were recognized in the purified anti-HTLV-I p19<sup>100-130</sup> and HTLV-I gp46<sup>175-199</sup> antibodies, both of which were derived from sera of anti-HTLV-I antibody positive pregnant women (Fig. 1).

We could not detect the expression of HTLV-I antigens in PBLs from the pregnant HTLV-I carriers, when the PBLs were cultured in the media with the pooled anti-HTLV-I sero-positive serum, this even on the 56<sup>th</sup> day after beginning the culture.

Starting from the 14<sup>th</sup> day after beginning the culture, expressions of both HTLV-I p19 and gp46 antigens were recognized in all 3 specimens from the pregnant HTLV-I carrier PBLs, which were cultured in the media with the pooled anti-HTLV-I sero-negative serum added. Further, the ratio of antigen-positive cells increased as the culture period was prolonged.

In pregnant HTLV-I carrier PBLs cultured with the addition of anti-HTLV-I p19<sup>100-130</sup> antibody, neither HTLV-I p19 nor gp46 antigens were expressed even on the 56<sup>th</sup> day (the final day of the experiment). But, in cultured PBLs with the addition of anti-HTLV-I gp46<sup>175-199</sup> antibody, both HTLV-I p19 and gp46 antigens were expressed at 14<sup>th</sup> day and later

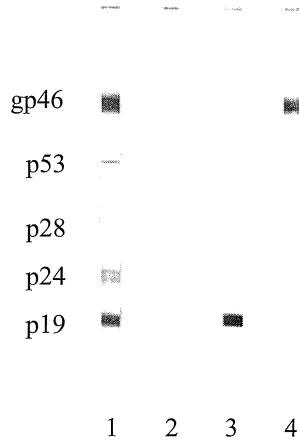


Fig.1. Western blot analysis of fractionated antibody  
 lane 1 : anti-HTLV-I positive pooled serum  
 lane 2 : anti-HTLV-I negative pooled serum  
 lane 3 : purified anti-p19<sup>100-130</sup>  
 lane 4 : purified anti-gp46<sup>175-199</sup>

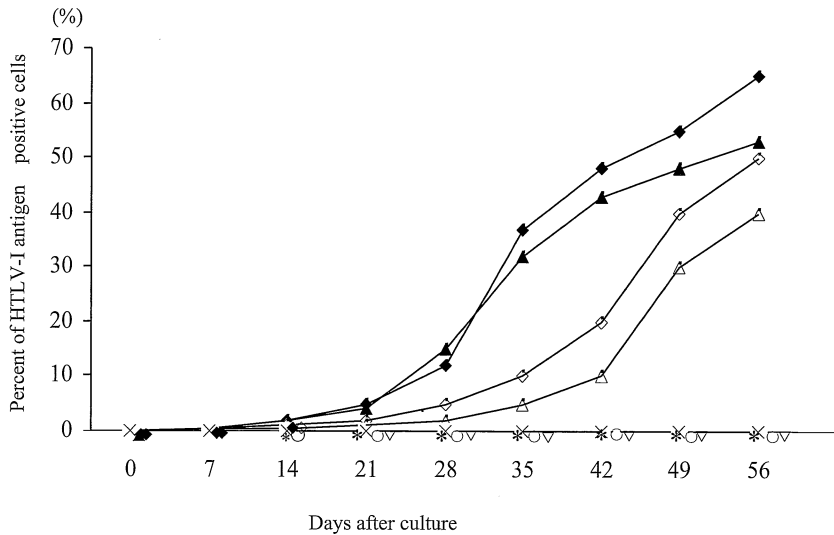


Fig. 2. HTLV-I antigen positive cell rate in healthy carrier 1 serum and purified antibody containing medium

◆p19 positive rate in anti-HTLV-I negative pooled sera containing medium ▲p19 positive rate in anti-gp46<sup>175-199</sup> containing medium ◇gp46 positive rate in anti-HTLV-I negative pooled sera containing medium △gp46 positive rate in anti-gp46<sup>175-199</sup> containing medium ×p19 positive rate in anti-HTLV-I positive pooled sera containing medium ○p19 positive rate in anti-p19<sup>100-130</sup> containing medium ∗gp46 positive rate in anti-p19<sup>100-130</sup> containing medium ∇gp46 positive rate in anti-HTLV-I positive pooled sera containing medium

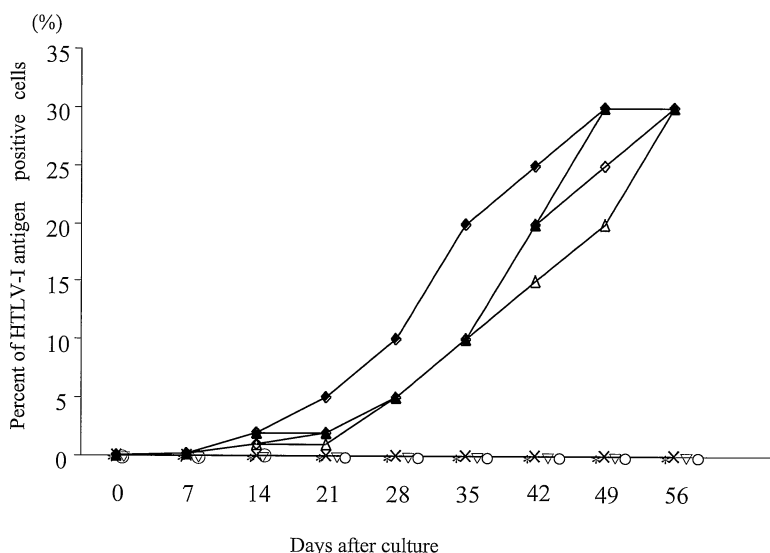


Fig. 3. HTLV-I antigen positive cell rate in healthy carrier 2 serum and fractionated antibody containing medium

◆p19 positive rate in anti-HTLV-I negative pooled sera containing medium ▲p19 positive rate in anti-gp46<sup>175-199</sup> containing medium ◇gp46 positive rate in anti-HTLV-I negative pooled sera containing medium △gp46 positive rate in anti-gp46<sup>175-199</sup> containing medium ×p19 positive rate in anti-HTLV-I positive pooled sera containing medium ○p19 positive rate in anti-p19<sup>100-130</sup> containing medium \*gp46 positive rate in anti-p19<sup>100-130</sup> containing medium ∇gp46 positive rate in anti-HTLV-I positive pooled sera containing medium

of this experiment (Fig. 2, 3, 4).

## DISCUSSION

The existence of suppressive effects of the anti-HTLV-I antibody-positive serum on the expression of HTLV-I antigen in cultures has been reported<sup>18)</sup>, and was also confirmed in our examinations using sera from pregnant anti-HTLV-I antibody-positive women. On the other hand, from an XC cell assay using MT-2 cell line expressing HTLV-I antigen continuously of HTLV-I antigen as a source of infection, it has been revealed that anti-HTLV-I p19<sup>100-130</sup> antibodies do not possess an inhibitory action for HTLV-I infection<sup>19)</sup>. Further, it has been reported<sup>18,9)</sup> that anti-HTLV-I antibody-positive serum exerts inhibitory effects on infections of uninfected cells from persistently infected HTLV-I cell lines. Judging from the past reports<sup>10,13-15)</sup> we examined, it can be speculated that the inhibitory action for HTLV-I infection in anti-HTLV-I antibody-positive serum depends heavily on the anti-HTLV-I gp46<sup>175-199</sup> antibody.

In examining the intercellular infection of HTLV-I, persistently infected lines that have the expressed HTLV-I antigens are generally utilized as the source of infection. However, it has been shown that HTLV-I antigen is not expressed *in vivo* in the peripheral PBL of HTLV-I carriers<sup>20)</sup>.

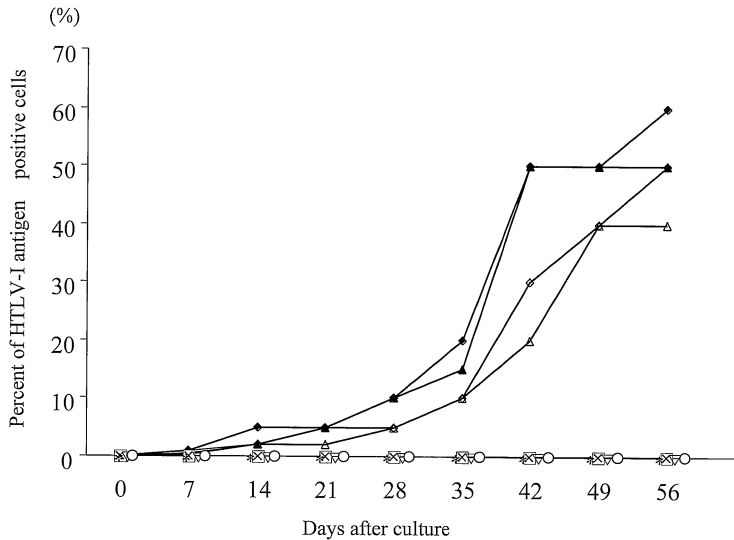


Fig. 4. HTLV-I antigen positive cell rate in healthy carrier 3 serum and fractionated antibody containing medium

◆ p19 positive rate in anti-HTLV-I negative pooled sera containing medium ▲ p19 positive rate in anti-gp46<sup>175-199</sup> containing medium ◇ gp46 positive rate in anti-HTLV-I negative pooled sera containing medium △ gp46 positive rate in anti-gp46<sup>175-199</sup> containing medium × p19 positive rate in anti-HTLV-I positive pooled sera containing medium ○ p19 positive rate in anti-p19<sup>100-130</sup> containing medium \* gp46 positive rate in anti-p19<sup>100-130</sup> containing medium ▽ gp46 positive rate in anti-HTLV-I positive pooled sera containing medium

In our examinations, when anti-HTLV-I antibodies and PBLs were separated from the peripheral blood of pregnant anti-HTLV-I sero-positive women, the preventive effects on the expression of HTLV-I antigens were seen to exist in the anti-HTLV-I p19<sup>100-130</sup> antibody. However, anti-HTLV-I gp46<sup>175-199</sup> antibody showed no action to suppress the expression of HTLV-I antigens. This suggests that anti-HTLV-I p19<sup>100-130</sup> antibody exercise the inhibitory action for HTLV-I infection from HTLV-I carrier's PBLs not expressing HTLV-I antigens, as blood transfusions<sup>21)</sup> and in milk-born transmissions from carrier mothers to children<sup>22-24)</sup>.

On the other hand, from the fact that anti-HTLV-I gp46<sup>176-199</sup> antibody prevents the transmission of HTLV-I from HTLV-I antigen-positive cell lines<sup>19)</sup>, the preventive effects in the HTLV-I antigen expressing cells exist in anti-HTLV-I gp46<sup>175-199</sup> antibody against expressed HTLV-I env antigen.

From a consideration of the above, HTLV-I transmission from HTLV-I carrier's PBLs is prevented by having anti-HTLV-I p19<sup>100-130</sup> antibody by suppression of the HTLV-I antigens expression.

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