



Investigation of Integrase Inhibitor Resistance Mutations in gp41 in Clinical Samples

Hanwei Sudderuddin¹, Zhong Dang¹, Anh Le¹, Tetyana Kalynyak¹, Rob Hollebakken¹, Kyle Cobarrubias¹, Jinny Choi¹, Weiyan Dong¹, Winnie W. Dong¹, Walter Scott¹, Kate Laird¹, Paul Sereda¹, Eric O. Freed², Zabrina L. Brumme^{1,3}, Chanson J. Brumme^{1,4}

Ministry of Health

1. BC Centre for Excellence in HIV/AIDS, Vancouver, BC, Canada; 2. National Cancer Institute, Frederick, MD, USA; 3. Faculty of Health Sciences, Simon Fraser University, Burnaby, BC, Canada; 4. Faculty of Medicine, University of British Columbia, Vancouver, BC, Canada

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Presenting Author: Hanwei Sudderuddin hsudderuddin@cfenet.ubc.ca







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Conflict of Interest Disclosure

In the past 2 years I have been an employee of: BC Centre for Excellence in HIV/AIDS, Faculty of Health Sciences, Simon Fraser University

In the past 2 years I have been a consultant for: N/A

In the past 2 years I have held investments in the following pharmaceutical organizations, medical devices companies or communications firms: N/A

In the past 2 years I have been a member of the Scientific advisory board for: N/A

In the past 2 years I have been a speaker for: N/A

In the past 2 years I have received research support (grants) from: N/A

In the past 2 years I have received honoraria from: N/A

I agree to disclose approved and non-approved indications for medications in this presentation: YES

I agree to use generic names of medications in this presentation: YES

There are relationships to disclose: NO







Background

- In vitro studies suggest that mutations conferring resistance to HIV Integrase Strand transfer inhibitors (INSTI) can occur outside integrase, including in the env gene
- It remains unclear whether these mutations arise frequently in vivo
- We sought to identify mutations in gp41 associated with exposure to INSTI *in vivo using a database of clinically-derived HIV-1 sequences*

Participant selection, data collection and analysis





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Study Design and Methods

- Retrospective analysis of integrase (INT) and gp41 sequences collected during physician-requested resistance genotyping in BC-CfE Drug Treatment Program (DTP) participants with subtype B HIV-1
- Analysis 1: Population-level analysis of INT and gp41 amino acid frequencies in INSTI-naïve and INSTI-treated participants
 - The INSTI-treated group comprised 146 individuals who had been exposed to INSTI for ≥3 months, but had detectable plasma viremia, where INT resistance genotyping indicated that their virus was susceptible to all INSTI (Stanford HIVdb v8.8; score <15)
 - HIV-1 gp41 genotyping was performed on these same samples (115 successfully sequenced)
 - The INSTI-naïve comparison groups comprised independent datasets of subtype B INT (N=2472) and gp41 (N=1222) sequences from INSTI-naïve individuals who had undergone clinical resistance genotyping
 - We compared amino acid frequencies at all INT and gp41 codons between INSTI-naïve and INSTI-treated participants; Fisher's exact test was used to identify Amino Acids significantly over- or under-represented between groups. Multiple comparisons were addressed using the Benjamini-Hochberg method (q-values)
- Analysis 2: Identification of putative INSTI resistance mutations in gp41 selected by INSTI treatment
 - Pre-INSTI gp41 genotyping for INSTI-treated group: Archived plasma collected prior to INSTI exposure were identified for all 115 INSTI-treated participants described above
 - gp41 genotyping was successful in 64 pre-INSTI samples
 - Pre- and post-INSTI treatment sequences from each participant were compared; mutations putatively selected for ("gained") and against ("lost") during INSTI treatment were identified in each sequence pair
 - The frequency of mutations "gained" and "lost" during INSTI treatment was summarized



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Maximum likelihood phylogeny of gp41 sequences from INSTI-naïve and INSTItreated participants (Analysis 1)



Participant demographic and clinical characteristics (Analysis 1)

Variable	INSTI-naïve (N=1222)	INSTI-treated (N=115)	
Age (Years); Median [IQR]	38 [32.5 - 44.9]	51 [44.3 - 56.1]	
Male Sex; N (%)	1064 (87%)	82 (71%)	
Female Sex; N (%)	148 (12%)	33 (29%)	
Unknown Sex; N (%)	10 (1%)	0 (0%)	
Plasma Viral Load (log ₁₀ copies/mL); Median [IQR]	5.0 [4.5 - 5.3]	3.6 [2.9 - 4.5]	
CD4 (cells/µL); Median [IQR]	290 [140 - 430]	350 [195 - 580]	
raltegravir; N (%)	-	60 (52%)	
elvitegravir; N (%)	-	34 (30%)	
dolutegravir; N (%)	-	55 (48%)	
Cumulative INSTI exposure (Months); Median [IQR]	-	32 [13 - 56]	

gp41 polymorphisms in INSTI-naïve and INSTI-treated participants (Analysis 1)

AA	AA frequency (%)				1	
	AA	INSTI-naïve	INSTI-treated	UK	p-value	q-value
	I182V	50.3%	28.7%	0.40	9.1 x 10 ⁻⁶	0.0085
	H209R	52.5%	33.9%	0.47	1.9 x 10 ⁻⁴	0.086

Phylogenetic tree of HIV subtype B gp41 sequences from INSTI-naïve (blue) and INSTI-treated (orange) participants. Sequences from both groups are dispersed throughout the tree and do not substantially cluster by group.

Amino acids with statistically significant (q<0.2) differences in frequency between INSTI-treated vs. -naïve individuals identified in Analysis 1. gp41 polymorphisms I182V and H209R were underrepresented in INSTI-treated compared to INSTI-naïve individuals. **No significant differences in AA frequencies were observed in INT.**



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gp41 consensus sequences and residues putatively associated with INSTIs (Analysis 1)

	<u> </u>		/			
HXB2	AVGIGALFLG	FLGAAGSTMG	AASMTLTVQA	RQLLSGIVQQ	QNNLLRAIEA	50
pNL4-3				D		
INSTI-Naive	M					
INSTI-Treated	M					
1182V H209R						
Env-A539V A556T R786K I744V			<i>.</i>		<mark>. T</mark>	
				Env-A539V	Env-A5	56T
HXB2	QQHLLQLTVW	GIKQLQARIL	AVERYLKDQQ	LLGIWGCSGK	LICTTAVPWN	100
pNL4-3						
INSTI-Naive		. <i>.</i>	• • • • • <i>•</i> • • • • •			
INSTI-Treated		V.				
1182V_H209R						
Env-A539V_A556T_R786K_I744V		· · · · · · · · · · · · · · · ·				
HXB2	ASWSNKSLEQ	IWNHTTWMEW	DREINNYTSL	THSLIEESON	QQEKNEQELL	150
pNL4-3		NM			• • • • • • • • • • •	
INSTI-Naive	TDE	DNM	EDG.	.YT	•••••	
INSTI-Treated	TD.	DNM	EDG.	.YT	• • • • • • • • • • •	
1182V_H209R	• • • • • • • • • • •	• • • • • • • • • • •	• • • • • • • • • • •	• • • • • • • • • • •	• • • • • • • • • • •	
Env-A539V_A556T_R786K_1744V	•••••	•••••	• • • • • • • • • • •	• • • • • • • • • • •	• • • • • • • • • • •	
HYB2	ET DEWAST NIN	WENT THEFT	TRIFTMING	I WCI PIWEAW	TSTUNDUDOG	200
DNL 4-3	EDDINHEDDWIN	WE LEE LINNEDRIE	TICHE THE AGG	HAOPICT AND	TOT ANY NO.	200
INSTI-Naime			т т	т	• • • • • • • • • • •	
INSTI-Marve			T	T		
TISTI TIEACEU				v		
For-3530V 3556T 2786K 1744V						
ENV X333V_X3301_K780K_1744V						
HXB2	YSPLSFOTHL	PTPRGPDRPE	GIEEEGGERD	RDRSIRLVNG	SLALIWDDLR	250
pNL4-3		.I				
INSTI-Naive	R.	.A		. <i>.</i>	F	
INSTI-Treated		.A		D.	FV	
I182V H209R	<mark>R</mark> .					
Env-A539V A556T R786K I744V				<u>v</u>	<u>.</u>	
				Env-I744	V	
HXB2	SLCLFSYHRL	RDLLLIVTRI	VELLGRRGWE	ALKYWWNLLQ	YWSQELKNSA	300
pNL4-3						
INSTI-Naive						
INSTI-Treated		A		v		
I182V_H209R						
Env-A539V_A556T_R786K_I744V				<u></u>		
			Env-F	R786K		
HXB2	VSLLNATAIA	VAEGTDRVIE	VVQGACRAIR	HIPRRIRQGL	ERILLX 346	
pNL4-3	. N	<i></i>	.L.A.Y <u></u>	. <i>.</i>		
INSTI-Naive			RI. R	legion not covere	d by	
INSTI-Treated	· · · · · · · · · · ·	I	RI.	gp41 resistance a	ssay	
1182V_H209R		• • • • • • • • • • •	· · · · · · · · · · · · · · · · · · ·			
Env-A539V_A556T_R786K_I744V						

gp41 amino acid alignment of HXB2, pNL4-3, and the consensus sequences of the INSTI-naïve and INSTI-treated groups. gp41 polymorphisms identified in Analysis 1 are in red (I182V_H209R). gp41 amino acids selected by INSTI *in vitro* (Env-A539V_A556T_R786K_I744V) identified in Van Duyne *et al.* (*PNAS*, 2019) are in **blue**. The gp41 resistance assay does not cover the final 20 amino acids of gp41.

Phylogeny relating pre- and post-INSTI treatment gp41 sequences (Analysis 2)

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Phylogenetic tree of paired subtype B gp41 sequences collected before (red) and after (green) INSTI treatment. Pairing of pre- and post-therapy sequences from the same participants confirms that no obvious contamination or mix-ups occurred.

Putative sites in gp41 under selection during INSTI treatment (Analysis 2)

gp41 Codon	AA	Population frequency (%)	# gained	# lost		
304	F	29.9 %	6	5	Amino acids	
122	R	71.4%	5	6	"gained" or "lost" in	
129	G	42.7%	5	3	≥4 participants while	
157	Ν	25.7%	5	3	receiving INSTI-	
109	D	48.0%	4	4	based therapy	
182	V	50.3%	1	1	Amino acids identified	
209	R	52.5%	1	1	in Analysis 1	
30	V	0.15%	0	0	Env-4539V. 4556T.	
47	Т	0.08%	0	0	R786K, 1744V from Van	
235	V	8.8%	0	1	Duyne et al. (PNAS,	
277	K	0.4%	0	1	2019)	

Amino acids "gained" or "lost" in \geq 4 participants in a comparison of gp41 sequences collected before and after INSTI treatment (grey shading). Sites under putative INSTI selection pressure were highly polymorphic in the INSTI-naïve population. Gain/loss of amino acids identified in Analysis 1 (pink shading) and by Van Duyne *et al* (orange shading) are also shown.

Conclusions

- gp41 substitutions previously associated with INSTI resistance *in vitro* were not enriched in INSTI-treated individuals vs. INSTI-naïve controls, nor were they observed to be selected during INSTI treatment
- Comparison of gp41 sequences from INSTI-naïve vs. INSTI-treated individuals identified two amino acids that were significantly underrepresented among the INSTI-treated group (Analysis 1), but these common polymorphisms were not frequently "lost" during INSTI treatment (Analysis 2)