

Poster No.

92

Role of IL18 in HIV Associated Lipodystrophy

Rana Majid, Sudeep Pushpakom, Munir Pirmohamed The Wolfson Centre for Personalised Medicine, Department of Molecular and Clinical Pharmacology, Institute of Translational medicine, University of Liverpool, UK

Correspondence to: Mr. RANA A MAJID Personalised Buildings, 1-5 Brownlow Street, Liverpool, UK, L69 3GL Ph:+44 151 795 5387 Email: r.maiid@liv.ac.uk

Introduction

Lipodystrophy caused by highly active antiretroviral therapy (HAART) is associated with an increased risk of metabolic disturbances and ischaemic heart disease¹.

Antiretroviral (ARV) induced adipose toxicity is central to HIVLD pathogenesis resulting in impaired adipogenesis and dysregulated secretion of adipokines from the adipose tissue².

□ Plasma levels of IL18, an adipokine associated with insulin resistance is elevated in HIVLD patients^{3.}

□ Variants in IL18 gene also predispose to the development of HIVLD⁴.

Results Fig 1. Effect of ARVs and Telmisartan on IL18 protein expression **E** 335.0 280.0 /gd) 270.0 **8** 330.0 260.0 325.0 320.0 250.0 **5** 315.0 240.0 310.0 230.0 305.0 220.0 300.0 295.0 **≥** 290.0 Conc. of ATV / ATV+Tel (µM) Conc. of LPV / LPV+Tel (µM) 280.0

□ Interleukin-18 suppresses adiponectin expression in NFATc4 adipocytes via phosphorylation⁵.

• We utilised *in vitro* (adipocytes) and *in vivo* (gene association) studies to characterise the role of IL18 in HIVLD.

Aims and Objectives

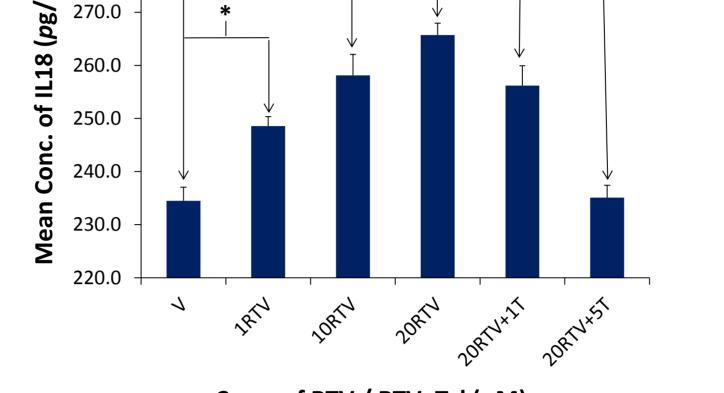
To investigate whether ARVs modulate IL18 and NFATc4 expression in vitro in adipocytes

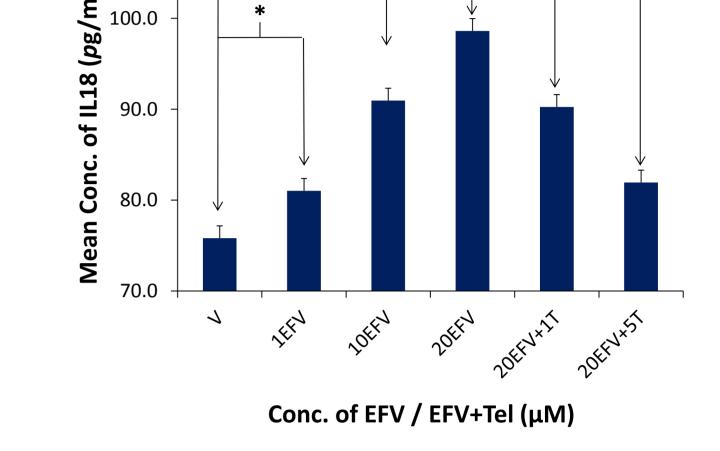
□ To utilise *in vitro* model to identify candidate molecules to target IL18 and NFATc4

To investigate whether genetic variants in IL18 predispose to the development of **HIVLD by HAART**

Methods

> Differentiating 3T3-F442A murine adipocytes were incubated with ARVs (Lopinavir [LPV], ritonavir [RTV], atazanavir [ATV] and efavirenz [EFV]) in the presence and absence of telmisartan (TEL; 1-5µM).





Conc. of RTV / RTV+Tel (µM)

Fig 1. All of the ARVs (LPV, ATV, RTV, EFV) up-regulated secretion of IL18 in adipocytes. Telmisartan reversed the effect of ARVs when co-incubated with ARVs. Similar pattern was observed in gene expression study of IL18 (Data not shown) Note: Mean values were obtained from 4 independent repeats. *= p value < 0.05

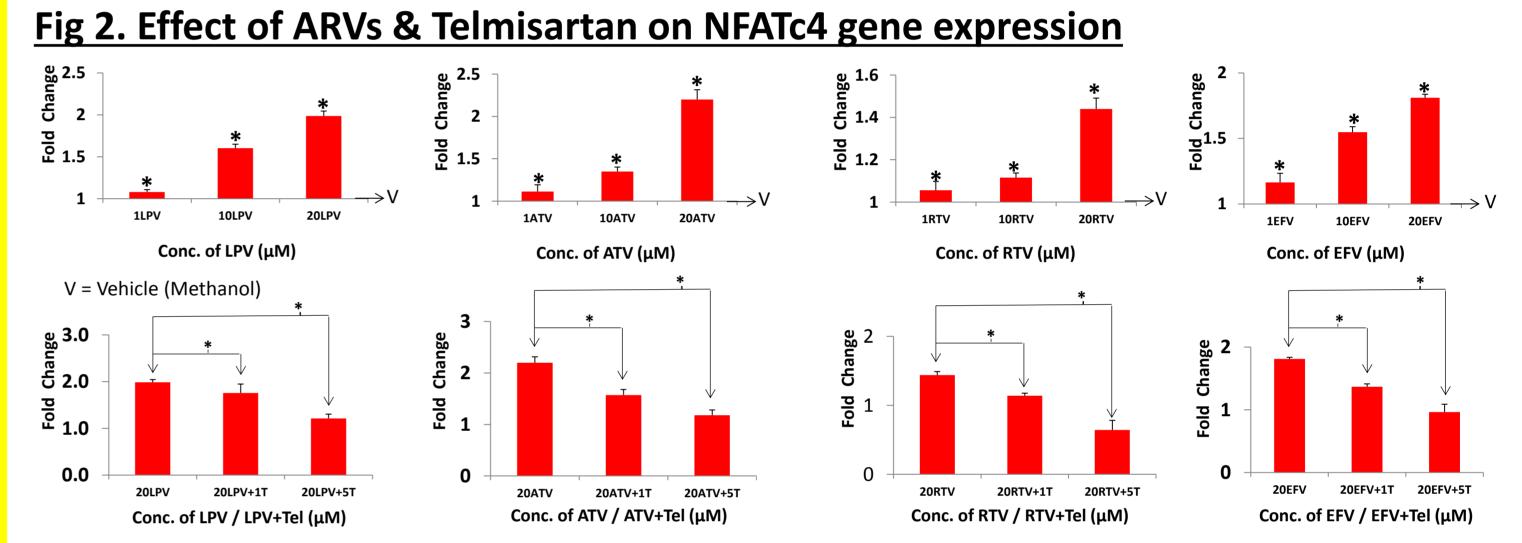


Fig 2. All of the ARVs (LPV, ATV, RTV, EFV) up-regulated gene expression of NFATc4 in adipocytes. Telmisartan reversed the effect of ARVs when co-incubated with ARVs. Note: Mean values were obtained from 4 independent repeats. *= p value < 0.05

- Secreted IL18 protein levels were assessed by ELISA.
- Real-Time PCR was used to study gene expression of IL18 and NFATc4.

Genetic Association study

- > DNA samples were obtained from ARV-treated patients with (HIVLD+; n=115) or without LD (HIVLD-; n=51).
- > Diagnosis of HIVLD was carried out by clinician's confirmation of patient self-report
- > SNP selection: Haplotype tag SNP approach; functional SNPs also selected; total 14 **SNPs** selected
- Sequenom MALDI-TOF was used for genotyping

Statistical Analysis

- \succ In vitro studies were analysed by paired t-test and data are presented as mean +SD for 20μ M incubation of ARVs and 5μ M for TEL.
- SNP analysis was performed using Haploview software.
 Table 1. Patients characteristics

Characteristics

Study participants (n = 180)

Fig 3. Genotyping Results

Table 2.	Single marker Association	ons-haploview analysis	Haplotype blocks in IL18 gene in our Cohort of study
SI. NO.	SNP ID. No.	P - Values	
1	rs2115763	0.6742	Block 1 Block 2
2	rs360719	0.5845	
3	rs1946518	0.2353	93 80 93 17
4	rs1834481	0.5956	98 87
5	rs549908	0.4461	
6	rs5744280	0.6525	85 67
7	rs5744290	0.1828	80
8	rs5744292	0.2101	
9	rs543810	0.4873	

Fig 3. Linkage disequilibrium patterns within the IL18 gene haplotype blocks are represented here. Red boxes indicate strong linkage disequilibrium (LD), while grey boxes indicate weaker LD. Haplotype block 1 is comprised of rs215763, rs360719, rs1946518 and rs1834481. Haplotype block 2 consists of rs549908 and rs5744280.

Summary of Results

ARVs up-regulate secretion of IL18 in adipocytes and up-regulate the expression of NFATc4

- □ Effect of EFV on IL18 was lesser as compared to LPV, ATV and RTV
- □ NFATc4 gene expression was higher with ATV treatment as compared to LPV, RTV and EFV
- □ Telmisartan reverses ARV-induced increase in IL18 secretion and NFATc4 up-regulation
- □ IL18 SNPs did not show association with HIVLD in our cohort of study

Conclusion

- ARV-mediated upregulation in IL18 could play a role in the development of HIVLD
- ARV-induced upregulation of NFATc4, a transcription factor through which IL18 causes inhibition of adiponectin (a marker of insulin sensitivity), could be

	HIVLD+; n = 124	4, HIVLD-; n = 56
Age in years, median (range)	40 (24-68)	
Gender		
Men	146 (81.5%)	
Women	34 (18.5%)	
Duration of HIV infection, median (range)	7.6 years (1.4 -19.3 years)	
CD4 cell count, mean (range)	330.5 (3-1218)	
Pls	LPV, ATV, RTV	
NRTI backbone	d4T, 3TC, AZT ddl, ddc, ABC, EFV, NVP	
Other drugs		
	HIVLD+	HIVLD-
Time of exposure to Pls, median	24.3 months	24.5 months
Time of exposure to NRTIs, median	39 months	39 months

mechanistically important in the development of insulin resistance.

Telmisartan offers a potential strategy to treat ARV-induced adverse effects

Future Work

Blockade of NFATc4 using siRNA, an on going experimental strategy, may result to reduce adverse effect of ARVs

Validation of murine adipocyte results in primary human adipocytes

IL18 gene variants do not predispose to HIVLD; however further studies in well-phenotyped patients with adequate sample size are required to confirm this.

References

1.Wand H, Calmy A, Carey DL, Samaras K, Carr A, Law MG, et al. Metabolic syndrome, cardiovascular disease and type 2 diabetes mellitus after initiation of antiretroviral therapy in HIV infection. AIDS 2007; 21:2445-2453. 2. Jones SP, Janneh O, Back DJ, Pirmohamed M. Altered adipokine response in murine 3T3-F442A adipocytes treated with protease inhibitors and nucleoside reverse transcriptase inhibitors. Antivir Ther 2005; 10:207-213. 3.Lindegaard B, Hansen AB, Gerstoft J, Pedersen BK. High plasma level of interleukin-18 in HIV-infected subjects with lipodystrophy. J Acquir Immune Defic Syndr 2004; 36:588-593

4.Castelar L, Silva MM, Castelli EC, Deghaide NH, Mendes-Junior CT, Machado AA, et al. Interleukin-18 and interferon-gamma polymorphisms in Brazilian human immunodeficiency virus-1-infected patients presenting with lipodystrophy syndrome. Tissue Antigens 76:126-130.

5.Chandrasekar B, Patel DN, Mummidi S, Kim JW, Clark RA, Valente AJ. Interleukin-18 suppresses adiponectin expression in 3T3-L1 adipocytes via a novel signal transduction pathway involving ERK1/2-de 283:4200-4209