Full title: *Mamu-B*17+* rhesus macaques vaccinated with *env*, *vif*, and *nef* manifest early control of SIVmac239 replication

3

Mauricio A. Martins^{1*}, Damien C. Tully², Núria Pedreño-Lopez¹, Benjamin von Bredow³,
Matthias G. Pauthner⁴, Young C. Shin¹, Maoli Yuan⁵, Noemia S. Lima⁶, David J. Bean², Lucas
Gonzalez-Nieto¹, Aline Domingues¹, Martin J. Gutman¹, Helen S. Maxwell¹, Diogo M. Magnani¹,
Michael J. Ricciardi¹, Varian K. Bailey¹, John D. Altman⁷, Dennis R. Burton^{2,4}, Keisuke Ejima⁸,
David B. Allison⁸, David T. Evans^{3,9}, Eva G. Rakasz⁹, Christopher L. Parks⁵, Myrna C. Bonaldo⁶,
Saverio Capuano III⁹, Jeffrey D. Lifson¹⁰, Ronald C. Desrosiers¹, Todd M. Allen², David I.
Watkins¹

11

¹ Department of Pathology, University of Miami, Miami, Florida, USA.

² Ragon Institute of MGH, MIT and Harvard, Cambridge, Massachusetts, USA.

³ Department of Pathology and Laboratory Medicine, University of Wisconsin, Madison,
 Wisconsin, USA.

⁴ Department of Immunology and Microbiology; IAVI Neutralizing Antibody Center; Center for
 HIV/AIDS Vaccine Immunology and Immunogen Discovery (CHAVI-ID); The Scripps Research
 Institute, La Jolla, California, USA.

⁵ International AIDS Vaccine Initiative, AIDS Vaccine Design and Development Laboratory,
Brooklyn, New York, USA.

⁶ Laboratório de Biologia Molecular de Flavivirus, Instituto Oswaldo Cruz–FIOCRUZ, Rio de
 Janeiro, Brazil.

⁷ Department of Microbiology and Immunology, Emory University, Atlanta, Georgia, USA.

⁸ School of Public Health, Indiana University-Bloomington, Bloomington, Indiana, USA.

⁹ Wisconsin National Primate Research Center, University of Wisconsin-Madison, Madison,

26 Wisconsin, USA.

¹⁰ AIDS and Cancer Virus Program, Leidos Biomedical Research, Inc., Frederick National

28 Laboratory for Cancer Research, Frederick, Maryland, USA.

29

30 Short title: Early control of SIV in *env*-vaccinated *B**17+ macaques

- 31 * Corresponding author
- 32 E-mail: mmartins@med.miami.edu
- 33 Word count for Abstract: 250 words
- 34 Word count for text: 7,877

35

Downloaded from http://jvi.asm.org/ on January 16, 2019 by guest

36 Abstract (250 words; limit: 250 words)

37

38 Certain major histocompatibility complex class-I (MHC-I) alleles are associated with spontaneous control of viral replication in human immunodeficiency virus (HIV)-infected people 39 and simian immunodeficiency virus (SIV)-infected rhesus macaques (RMs). These cases of 40 41 "elite" control of HIV/SIV replication are often immune-mediated, thereby providing a framework 42 for studying anti-lentiviral immunity. Here we examined how vaccination impacts SIV replication in RMs expressing the MHC-I allele Mamu-B*17. Approximately 21% of Mamu-B*17+ and 50% 43 of Mamu-B*08+ RMs control chronic phase viremia after SIVmac239 infection. Because CD8+ 44 T-cells targeting Mamu-B*08-restricted SIV epitopes have been implicated in virologic 45 suppression in Mamu-B*08+ RMs, we investigated whether this might also be true for Mamu-46 B*17+ RMs. Two groups of Mamu-B*17+ RMs were vaccinated with genes encoding Mamu-47 B*17-restricted epitopes in Vif and Nef. These genes were delivered by themselves (Group 1) or 48 49 together with env (Group 2). Group 3 included MHC-I-matched RMs and served as the control 50 group. Surprisingly, the Group 1 vaccine regimen had little effect on viral replication compared to Group 3, suggesting that, unlike Mamu-B*08+ RMs, pre-existing SIV-specific CD8+ T-cells 51 alone do not facilitate long term virologic suppression in Mamu-B*17+ RMs. Remarkably, 52 however, 5/8 Group 2 vaccinees controlled viremia to <15 viral RNA copies/mL soon after 53 infection. No serological neutralizing activity against SIVmac239 was detected in Group 2, 54 55 although vaccine-elicited gp140-binding antibodies correlated inversely with nadir viral loads. Collectively, these data shed new light into the unique mechanism of elite control in Manu-56 B^{*17+} RMs and implicate vaccine-induced, non-neutralizing anti-Env antibodies in the 57 58 containment of immunodeficiency virus infection.

lournal of Virology

Journal of Virology

59

60 Importance (150 words; limit: 150 words)

61

62 A better understanding of the immune correlates of protection against HIV might facilitate the development of a prophylactic vaccine. Therefore, we investigated simian immunodeficiency 63 virus (SIV) infection outcomes in rhesus macaques expressing the major histocompatibility 64 65 complex class I allele Mamu-B*17. Approximately 21% of Mamu-B*17+ macaques spontaneously control chronic phase viremia after SIV infection, an effect that may involve 66 67 CD8+ T-cells targeting Mamu-B*17-restricted SIV epitopes. We vaccinated Mamu-B*17+ macaques with genes encoding immunodominant epitopes in Vif and Nef alone (Group 1) or 68 together with env (Group 2). Although neither vaccine regimen prevented SIV infection, 5/8 69 70 Group 2 vaccinees controlled viremia to below detection limits shortly after infection. This 71 outcome, which was not observed in Group 1, was associated with vaccine-induced, nonneutralizing Env-binding antibodies. Together, these findings suggest a limited contribution of 72 73 Vif- and Nef-specific CD8+ T-cells for virologic control in Mamu-B*17+ macagues and implicate anti-Env antibodies in containment of SIV infection. 74

75

76

77

78

4

79 Introduction

80

81 Despite improvements in prevention strategies and antiretroviral therapy (ART) coverage, thousands of new human immunodeficiency virus (HIV) infections are still occurring every day, 82 highlighting the need for an effective HIV vaccine (1). Eliciting robust protection against HIV 83 84 infection has not been straightforward, as seen by the failure of most HIV vaccines tested in 85 humans to date (2-6). Although the RV144 trial remains the only report of vaccine-mediated reduction in HIV infection rates (7), the observed results were modest, short-lived, and continue 86 to be contested (8, 9). The unsatisfactory performance of mainstream HIV vaccine regimens 87 88 underscores the need to better understand the nature of effective anti-lentiviral immune responses. 89

Elite controllers (ECs) are a small fraction of HIV-infected individuals who spontaneously 90 control chronic phase viremia in the absence of ART (10). Certain major histocompatibility 91 92 complex class I (MHC-I) alleles, such as HLA-B*27 and HLA-B*57, are associated with elite control of HIV-1 infection (11), implying an immunological basis for this phenotype. Indeed, 93 94 CD8+ T-cells targeting viral epitopes restricted by "protective" MHC-I molecules and natural killer (NK) cells are widely thought to be important mediators of antiviral activity in ECs (12, 13). 95 The study of ECs thus provides a useful framework to investigate the basis for immune 96 97 containment of lentivirus replication. Similar to human ECs, certain rhesus macaque (RM) MHC-I alleles are also associated with elite control of SIV infection. Indeed, approximately 21% of 98 99 unvaccinated RMs expressing Mamu-B*17 control chronic phase viral replication after infection with SIVmac239 (14). The incidence of elite control in Mamu-B*08+ RMs is higher, reaching 100 101 50% of infected animals (15). Curiously, the peptide binding motifs of the Mamu-B*08 and

102 Mamu-B*17 molecules resemble those of HLA-B*27 and HLA-B*57, respectively (16, 17). This 103 similarity is not explained by sequence homology between the human and RM MHC-I alleles, 104 thereby implicating the presented peptide as an important determinant of elite control.

105 The immunodominant SIV epitopes restricted by Mamu-B*08 and Mamu-B*17 share a common feature, that is, their location in the accessory proteins Vif and Nef (18-20). While 106 107 CD8+ T-cell responses targeting these Vif and Nef epitopes are crucial for virologic control in 108 Mamu-B*08+ RMs (21), it is not clear to what extent Vif- and Nef-specific CD8+ T-cells 109 contribute to the EC phenotype of Mamu-B*17+ RMs. We set out to clarify this issue by 110 conducting an SIV vaccine trial in Mamu-B*17+ RMs. We hypothesized that vaccine-induced CD8+ T-cells targeting the immunodominant Mamu-B*17-restricted Vif HW8 (amino acids 66-111 112 73) and Nef IW9 (amino acids 165-173) epitopes would increase the incidence of elite control in 113 Mamu-B*17+ RMs following infection with SIVmac239. Because vaccine-elicited anti-Env antibodies (Abs) have been linked to delayed acquisition of immunodeficiency virus infection 114 115 following repeated mucosal challenges (22-24), we also evaluated whether these humoral 116 responses would increase the protective efficacy of Vif HW8- and Nef IW9-specific CD8+ T-cells 117 induced by vaccination. To this end, we used a heterologous prime/boost/boost/boost/boost (PBBBB) immunization regimen to vaccinate two groups of Mamu-B*17+ RMs with genes 118 encoding the Vif HW8 and Nef IW9 epitopes. These epitopes were delivered by themselves 119 (Group 1) or together with env (Group 2). As a result, vaccinees in both groups mounted Vif and 120 121 Nef-specific CD8+ T-cells but only the ones in Group 2 developed Env-specific Abs. We 122 assessed the efficacy of both regimens by repeatedly challenging vaccinees along with shamvaccinated MHC-I-matched control RMs (Group 3) intrarectally with a marginal dose of 123 124 SIVmac239. The challenge outcomes varied greatly between Groups 1 and 2, thereby revealing

125 important aspects of immune containment of lentivirus replication. Here we discuss the 126 relevance of these findings for HIV vaccine development and for understanding the basis of elite 127 control of SIV replication in Mamu-B*17+ RMs.

Results 129

130

128

Twenty-three RMs expressing the MHC-I allele Mamu-B*17 were used in this study. 131 132 These animals were divided among three groups, depending on which immunogens they 133 received. RMs in Group 1 (n = 7) were vaccinated with genes encoding the immunodominant Vif HW8 and Nef IW9 epitopes, whereas those in Group 2 (n = 8) received the same inserts with 134 135 the addition of env (Fig. 1). The SIV sequences were delivered by a recombinant (r) yellow fever 136 virus 17D (rYF17D) prime followed by three boosts with rDNA plasmids delivered by intramuscular electroporation (EP rDNA). Subsequently, vaccinees in Groups 1 and 2 were 137 138 boosted once with each of the following viral vectors: adenovirus type-5 (rAd5), vesicular stomatitis virus (rVSV), and rhesus monkey rhadinovirus (rRRV) (Fig. 1). We used this PBBBB 139 140 vaccine regimen because recurrent antigen stimulation is thought to facilitate the induction of 141 effective cellular and humoral immune responses against lentiviruses (25, 26). It should be noted that some of the vaccine vectors employed in this study encoded segments of vif and nef, 142 or full-length vif and nef fused with other genes, such as tat and rev (see Materials and 143 144 Methods). As a result, RMs in Groups 1 and 2 also developed cellular immune responses 145 against Tat and Rev. Additionally, some of the vaccine-encoded immunogens also included the subdominant Mamu-B*17-restricted epitopes Nef MW9 (amino acids 195-203) and, in the case 146 147 of Group 2, Env FW9 (amino acids 830-838). Finally, eight Mamu-B17+ RMs were immunized

with vectors encoding irrelevant antigens or lacking any inserts ("empty" vectors) and served as
the controls for this experiment (Group 3; Fig. 1).

150 We monitored vaccine-induced CD8+ T-cell responses against Mamu-B*17-restricted epitopes by staining PBMC with fluorochrome-labeled MHC-I tetramers. This analysis revealed 151 that the PBBBB regimen generated high-frequency SIV-specific CD8+ T-cell responses in the 152 153 majority of the Group 1 and Group 2 vaccinees (Fig. 2). Consistent with the immunodominance 154 of Vif HW8 and Nef IW9 during SIV infection (20), vaccine-elicited CD8+ T-cells in Groups 1 and 155 2 were primarily directed against these two epitopes (Fig. 2A-D). Curiously, while Nef MW9-156 specific CD8+ T-cells were undetectable or at borderline levels in all Group 2 vaccinees, low to 157 modest frequencies of these responses were observed in several RMs in Group 1 (Fig. 2E&F). 158 A few macaques in Group 2 developed Env FW9-specific CD8+ T-cells but these responses 159 remained scarce throughout the vaccine phase (Fig. 2G).

We also determined the magnitude of vaccine-induced SIV-specific T-cell responses in 160 161 Groups 1 and 2 by performing intracellular cytokine staining (ICS) in PBMC at the time of the 162 first IR SIV challenge (Fig. 3). In accordance with the MHC-I tetramer analysis, vaccine-induced 163 CD8+ T-cell responses in Groups 1 and 2 were mainly directed against Vif and Nef, although a few animals in each group developed responses against Rev, Tat, and Env (Group 2 only) as 164 well (Fig. 3A&B). Vaccine-elicited CD4+ T-cell responses in Group 2 were detected at higher 165 166 frequencies than those in Group 1 and focused primarily on Env (Fig. 3A-C). There was no 167 significant difference in the total magnitude of vaccine-elicited SIV-specific CD8+ or CD4+ T-cell 168 responses between Groups 1 and 2 (Fig. 3C).

Vaccine-elicited Env-specific humoral responses in Group 2 were also evaluated at multiple time points during the vaccine phase. A longitudinal analysis of gp140-binding Abs

171 showed substantial increases in these responses after the EP rDNA and rAd5 vaccinations (Fig. 172 4A). Subsequent boosting with rVSV, but not with rRRV, resulted in a modest rise in these responses (Fig. 4A). We also quantified vaccine-elicited gp140-binding Abs on the day of the 1st 173 174 SIV challenge (Fig. 4B). The median endpoint titer of gp140-binding Abs in Group 2 was 4,800 (Fig. 4B)-a value that was twice as high as that induced by an EP rDNA/rAd5/rVSV/rRRV 175 176 vaccine regimen recently tested by our group (27). However, these responses were still about 177 100-fold lower than those generated by live-attenuated SIV vaccination (Fig. 4B). Low levels of 178 NK cell-mediated, Ab-dependent cellular cytotoxicity (ADCC) against SIVmac239-infected cells were also detected in plasma from r08047 and r09062 collected on the day of the 1st SIV 179 challenge, but ADCC activity was either absent or at borderline levels in the other animals (Fig. 180 181 4C). No neutralizing antibodies (nAbs) against SIVmac239 were detected on the day of the 1st 182 SIV challenge or after SIV infection (Table 1).

To assess vaccine efficacy, all RMs in Groups 1-3 were subjected to repeated IR challenges with a marginal dose of SIVmac239 every two weeks, starting at study week 101 (Fig. 1). The challenge inoculum consisted of 200 50% tissue culture infective doses (TCID₅₀) of an *in vivo*-titrated SIVmac239 stock. As a reference, the challenge dose employed here typically infects 80% of SIV naïve RMs after six IR exposures. RMs in Groups 1-3 became infected at similar rates (Fig. 5), indicating that vaccine-induced immune responses did not block acquisition of SIVmac239 infection.

190 Contrary to our expectations based on control of SIVmac239 replication in *Mamu-B*08*+ 191 RMs vaccinated with Vif and Nef (21), vaccine-induced CD8+ T-cell responses targeting the 192 immunodominant Mamu-B*17-restricted Vif HW8 and Nef IW9 epitopes resulted only in a 193 modicum of virologic control in Group 1 (Fig. 6A). Although two vaccinees (r09001 and r08034)

fared well in the chronic phase, none of the Group 1 RMs suppressed viremia to <15 viral (v)RNA copies/mL and the latter RM lost control of viral replication after week 32 PI (Fig. 6A). The number of infected monkeys with chronic phase VLs below 1,000 vRNA copies/mL, even if transiently as in the case of r08034, was similar to that in Group 3, where r10018 developed a viral setpoint of approximately 1,000 vRNA copies/mL while r09083 controlled viral replication to <15 vRNA copies/mL at week 20 PI (Fig. 6A&C).</p>

Surprisingly, however, Group 2 exhibited an entirely unexpected outcome after infection. 200 Despite experiencing peak VLs in excess of 8.5×10⁵ vRNA copies/mL of plasma, five Group 2 201 vaccinees (r05007, r08046, r08062, r08047, and r09062) controlled viral replication to <15 202 vRNA copies/mL by weeks 4-8 post infection (PI) (Fig. 6B). This corresponded to an average 203 204 reduction in VLs of 5.3 logs, which was effected within only 2-6 weeks after peak viremia. Four 205 of the five Group 2 vaccinees that showed early viral suppression maintained control of viral replication throughout the chronic phase. RM r08047 was the exception, as its VLs 206 207 progressively increased after week 20 PI (Fig. 6B). Of note, after decreasing viremia to <15 vRNA copies/mL, the Group 2 controllers experienced occasional VLs blips in the ensuing 208 209 weeks, similar to those reported by Hansen et al. (28) and Winstone et al. (29). RM r08062 began to deviate from this pattern at week 16 PI, after which viremia became persistent, albeit 210 at low levels (140 vRNA copies/mL at week 75 PI; Fig. 6B). 211

We compared VLs among Groups 1-3 and made several observations about postinfection viral control in these groups. First, five Group 2 vaccinees had VLs that were either at or below the limit of detection (15 vRNA copies/mL) on day 6 PI (Fig. 7A), implying early control of viral replication. By comparison, only one vaccinee in Group 1 (r09090) and two monkeys in Group 3 (r08051 and r09038) had VLs below 15 vRNA copies/mL at this time point (Fig. 7A).

217 These differences were not, however, statistically significant (Fig. 7A). Second, peak VLs were 218 significantly lower in Groups 1 and 2 than in Group 3, although these reductions were modest 219 (Fig. 7B). Curiously, the two RMs (r03139 and r09090) with the lowest peak VLs were in Group 220 1 (Fig. 7B). Third, although setpoint VLs were not significantly decreased in either vaccinated 221 group, Group 2 (but not Group 1) exhibited a significant reduction in nadir VLs, consistent with 222 stringent control of post-acute viremia being the most distinctive feature of Group 2 (Fig. 7C&D). 223 Fourth, it took a median of 1.46 weeks for the Group 1 macaques to experience peak viremia 224 after SIV infection, compared to medians of 2 and 2.5 weeks in Groups 2 and 3, respectively 225 (Fig. 7E). This difference between Group 1 and the other groups was statistically significant, although it is not clear why viral replication peaked earlier in the Group 1 vaccinees. There was 226 227 no statistically significant difference in the time-to-peak VLs between Groups 2 and 3, despite a 228 few outliers in the latter group (Fig. 7E).

229 It is important to emphasize that the level of control of chronic phase SIVmac239 230 replication manifested by the five controller Group 2 vaccinees is exceedingly rare. In fact, of the 231 197 RMs that have been rectally infected with SIVmac239 as part of eight previous and ongoing 232 SIV vaccine trials conducted by our group, none exhibited the 5.3-log reduction in VLs within 2-6 weeks of peak viremia observed in the five Group 2 controllers (Fig. 8). Of note, this cumulative 233 234 past experience also included RMs that expressed MHC-I alleles associated with elite control of 235 SIV infection (Fig. 8D-H). These animals were vaccinated with various heterologous prime boost 236 regimens encoding vif, nef, rev, and tat (Fig. 8D), nef only (Fig. 8E), rev, tat, and nef (Fig. 8F), 237 and vif only (Fig. 8G). The Mamu-B*08+ vaccinees in Fig. 8H were vaccinated with vif and nef minigenes containing Mamu-B*08-restricted epitopes or with minigenes of other regions of the 238 239 SIV proteome that lack CD8+ T-cell determinants restricted by Mamu-B*08. As expected, a

fraction of these SIVmac239-infected RMs became ECs but, even in these cases, viremia was
rarely reduced to <15 vRNA copies/mL by weeks 4-8 PI (Fig. 8D-H). These different kinetics of
virologic control after SIVmac239 infection underscore the uniqueness of the five Group 2
controllers.

We have recently reported an extraordinary case of control of SIVmac239 infection in a 244 245 vaccinated RM (Fig. 8E and (30)). However, the virus replicating in that animal contained a 246 deletion in nef as early as week 2 PI, which likely compromised its replicative fitness. Given this 247 precedent, we explored the possibility that the Group 2 controllers harbored attenuated viruses, 248 even though we have previously shown that the SIVmac239 challenge stock employed here is made almost entirely of wild-type genomes (30). We conducted this analysis in acute phase 249 250 (weeks 2-4 PI) plasma from the four RM manifesting the earliest control of viral replication 251 (r08046, r05007, r08062, and r08047) and found >99% homogeneity in nef sequences amplified at week 2 PI (Fig. 9). Viral sequence variation was more prevalent in the later time points, 252 253 especially in r08062 and r08047 (Fig. 9C&D), but none of the nef sequences analyzed 254 contained insertions or deletions (Fig. 9). Of note, both the Nef IW9 and Nef MW9 epitopes were 255 essentially intact in these acute phase samples (Table 2). Thus, gross genetic defects in nef were not detected in the acute phase virus of 4/5 Group 2 controllers, corroborating the 256 interpretation that the outstanding control of SIVmac239 replication manifested by these RMs 257 258 was vaccine-mediated.

We also analyzed *env* sequence evolution in the aforementioned acute phase samples and found no overlap in the diversity patterns detected in r08046, r05007, r08062, and r08047 (Fig. 10). In spite of many low frequency mutations scattered throughout *env* in all four RMs, only a few variants were present at ≥10% frequencies (Fig. 10). RM r08046 exhibited a R751G

263 substitution at week 4 PI that was present in 81% of sequence reads (Fig. 10A). This 264 polymorphism is frequently observed in virus isolated from SIVmac239-infected RMs and does 265 not by itself significantly alter virus infectivity in vitro (31). One of the env changes in r08062 266 resulted in a stop codon in gp120 (W225Stop) and comprised 40% of the circulating viral quasispecies at week 3 PI (Fig. 10C). However, viral variants harboring this stop codon were no 267 268 longer detected in week 8 plasma from r08062 (Suppl. Fig. 1). This RM also exhibited a 269 synonymous mutation in the Leu codon at position 656 (CTA->TTA) in 100% of sequence reads 270 (Fig. 10C). The other mutations in r08062 and in r08047 modified amino acids at various positions in gp120 and gp41 (Fig. 10C&D). Variants of the Env FW9 epitope were detected at 271 weeks 2-4 PI but these mutants never reached frequencies >6% (Table 2). A summary of amino 272 273 acid substitutions in Env detected at ≥10% frequencies in these acute phase samples is shown 274 in Fig. 11. Thus, a shared pattern of env sequence evolution did not explain the rapid post-acute phase virologic control manifested by 4/5 Group 2 controllers. 275

276 We then searched for vaccine-induced immune signatures that might explain the distinct 277 virologic outcomes observed in Groups 1 and 2. Eight immunological variables determined 278 either at the time of the first IR SIV challenge or at week 2.4 PI were selected for this analysis 279 (Table 3). These variables were then compared with nadir VLs-the virologic marker most affected by vaccine-induced immune responses (Table 3). The only immunological predictor of 280 virologic control that emerged from this analysis was the endpoint titer of vaccine-induced 281 282 gp140-binding Abs in Group 2 at the time of the first SIV challenge, which inversely correlated 283 with nadir VLs (Table 3; Fig. 12). This association was not, however, statistically significant after 284 correcting for multiple comparisons. Collectively, these data suggest that in the context of potent

vaccine-elicited SIV-specific T-cell responses, increasing titers of gp140-binding Abs may result
in substantial control of viral replication in *Mamu-B*17+* RMs.

287

288 Discussion

289

290 Here we explored whether vaccinating Mamu-B*17+ RMs with inserts encoding Mamu-291 B*17-restricted SIV epitopes would increase the frequency of elite control after SIVmac239 292 infection, as is the case with vaccination of Mamu-B*08+ RMs with Mamu-B*08-restricted SIV epitopes (21). We also examined whether the addition of env to the vaccine regimen would 293 confer protection from mucosal acquisition of the challenge virus, as has been reported 294 295 previously (22-24). To our surprise, none of the vif and nef-vaccinated Group 1 animals 296 controlled viral replication to <15 vRNA copies/mL of plasma, suggesting that the underlying mechanisms of elite control differ between Mamu-B*17+ and Mamu-B*08+ RMs. Even though 297 298 the inclusion of env in the vaccine did not prevent acquisition of SIVmac239, we identified 299 remarkable levels of virologic control in most of the Group 2 vaccinees. Indeed, 5/8 Group 2 300 RMs (vaccinated with vif, nef, and env) suppressed viral replication to <15 vRNA copies/mL of plasma by 4-8 weeks PI. This virologic control did not correlate with vaccine-induced SIV-301 specific T-cells or NK cell-mediated ADCC activity, nor did it depend on anti-SIVmac239 nAbs 302 because serological neutralizing activity against SIVmac239 was not detected at the time of the 303 304 1st SIV challenge or even shortly after infection. Vaccine-elicited gp140-binding Abs at the time 305 of challenge were the only immune predictor of virologic control in Group 2.

Approximately 50% of *Mamu-B*08*+ and 21% of *Mamu-B*17*+ SIV naïve RMs become ECs after SIVmac239 infection (14, 15, 20). Given the virulence of SIVmac239, elite control in

308 this context is defined as having a setpoint VL ≤1,000 vRNA copies/mL of plasma. Of note, 309 expression of these alleles does not affect acute phase viremia after primary SIVmac239 310 infection. Indeed, peak VLs are often indistinguishable between unvaccinated SIVmac239-311 infected RMs expressing Mamu-B*08 or Mamu-B*17 and animals lacking these protective MHC-I alleles (14, 15). Despite the predisposition of Mamu-B*17+ RMs to control SIV replication, the 312 313 kinetics with which the five Group 2 controllers suppressed viremia in the present experiment 314 was completely different from that seen in typical EC RMs. Our historical VL analysis of 315 SIVmac239-infected animals shows that only a few RMs expressing MHC-I alleles associated 316 with elite control of SIV infection controlled viremia to <15 vRNA copies/mL by week 20 PI (Fig. 8D-H). Even in those few cases, it took on average 12 weeks for their plasma VLs to reach <15 317 318 vRNA copies/mL. By comparison, the five Group 2 controllers in the present experiment 319 controlled viremia to <15 vRNA copies/mL after an average of 6 weeks of infection. Vaccine-320 induced Env-specific immune responses appeared to be required for this impressive outcome 321 considering they were the only feature that distinguished Group 2 from Group 1. This conclusion 322 is also supported by the inverse association between vaccine-elicited gp140-binding Ab titers 323 and nadir VLs in Group 2. Nevertheless, assuming that Abs were involved in control, it is not 324 clear how these vaccine-elicited gp140-specific Abs contributed to virologic control considering 325 that they lacked neutralizing activity against SIVmac239 and their ability to recruit NK cell-326 mediated ADCC activity against SIVmac239-infected cells did not predict post-infection VLs. 327 One caveat to these analyses is the small number of animals in Group 2, which limited our 328 ability to accurately identify immune correlates of virologic control. Additionally, given the wide range of non-neutralizing Ab effector functions reported for HIV-specific Abs (32), it is possible 329 330 that antiviral activities other than NK-cell mediated ADCC might have explained the rapid control

of viral replication observed in some of the Group 2 vaccinees. Furthermore, the absence of a 331 332 group of MHC-I-matched RMs vaccinated with env only also precludes any definitive 333 conclusions regarding the role of vaccine-induced Env-specific immune responses in the challenge outcome. Such a group would have revealed whether or not vaccine-induced Env-334 335 specific immune responses are sufficient for rapid post-acute phase control of viral replication in 336 Mamu-B*17+ RMs and also to what extent vaccine-elicited T-cell responses against Vif and Nef 337 contributed to virologic containment in the five Group 2 controllers. Additional experiments will 338 be needed to elucidate these issues.

339 The observation that the Group 1 vaccine regimen had little effect on viral replication compared to the control group suggests that, unlike Mamu-B*08+ RMs (21), pre-existing SIV-340 specific CD8+ T-cells alone do not facilitate long term virologic suppression in Mamu-B*17+ 341 342 RMs. These discordant outcomes imply a differential dependence on Vif- and Nef-specific CD8+ T-cells for elite control of SIV replication in Mamu-B*17+ and Mamu-B*08+ animals. In support 343 344 of this notion, it is possible to predict which unvaccinated Mamu-B*08+ RMs will become ECs 345 after SIVmac239 infection based on patterns of viral sequence evolution in Mamu-B*08restricted epitopes shortly after infection (33). In contrast, the emergence of CD8+ T-cell 346 "escape" viral variants does not dictate the ability of certain Mamu-B*17+ animals to contain SIV 347 348 viremia (20). In this regard, it is important to mention that other host genetic factors have also 349 been associated with control of immunodeficiency virus replication (34). Thus, variability in such 350 factors may explain the different SIV infection outcomes observed in vif- and nef-vaccinated 351 Mamu-B*08+ versus Mamu-B*17+ RMs. Additional studies will be needed to elucidate the differences in elite control between Mamu-B*08+ and Mamu-B*17+ animals. 352

353 Importantly, the ability of gp140-binding Ab titers to predict vaccine-mediated control of 354 SIVmac239 replication is not limited to Mamu-B*17+ RMs. We have recently reported that an 355 EP rDNA/rAd5/rVSV/rRRV vaccine regimen encoding env, gag, vif, rev, tat, and nef resulted in 356 substantial reductions in plasma VLs in SIVmac239-infected RMs lacking MHC-I alleles associated with elite control (27). Similar to the present study, vaccine-elicited Env-specific Abs 357 358 lacked detectable neutralizing activity against SIVmac239 but their gp140-binding titers 359 correlated with virologic control. Although vaccinees were not protected from SIV infection in 360 either case, the fact that vaccine-induced gp140-binding Abs predicted control of viremia in 361 these two independent settings is instructive for two reasons. First, the observation that high levels of vaccine-induced Env-specific Ab responses might improve control of viral replication in 362 363 RMs regardless of their MHC-I genotype broadens the applicability of the present findings. 364 Second, any immunological signature associated with containment of SIVmac239 infection warrants further investigation given the stringency of this molecular clone as a challenge virus 365 366 (35). Indeed, most unvaccinated or drug-naïve SIVmac239-infected Indian RMs experience high peak (10⁶-10⁹ vRNA copies/mL) and setpoint (10⁶ vRNA copies/mL) VLs and are euthanized 367 368 due to AIDS-defining illnesses by two years after infection (36). Additionally, the SIVmac239 Env glycoprotein is exceptionally difficult to neutralize (37-41), likely due to its closed 369 370 conformation. Innumerable vaccine regimens have been evaluated using SIVmac239 challenges, but relatively few have resulted in substantial reductions in viremia after infection 371 372 (27, 29, 42-45) or prevented virus spread beyond the initial foci of infected cells (28, 46). 373 However, except for live-attenuated SIV vaccines (47, 48), no active immunization strategy has consistently afforded sterilizing protection against challenge with SIVmac239. While certain 374 375 features of the antiviral T-cell response elicited by live-attenuated SIV vaccines have been

376 identified as correlates of protection (48-51), vaccine efficacy in this case also relies heavily on 377 Env-specific humoral immunity (52). The fact that only a fraction of SIVmac239 (nef-vaccinated 378 RMs develops detectable anti-SIVmac239 nAb responses imply that Ab-mediated effector 379 functions other than neutralization (e.g., ADCC) can also contribute to the efficacy of live-380 attenuated SIV vaccines (52, 53). In this light, it is noteworthy that the titers of gp140-binding 381 Abs elicited by SIVmac239 Anef vaccination exceeded those generated by our mixed modality 382 vaccine regimens by approximately 100-fold (Fig. 4). Group 2 had greater titers of these 383 responses than the aforementioned EP rDNA/rAd5/rVSV/rRRV group but this difference was not 384 statistically significant. Although it is impossible at this point to establish a causal link between these anti-Env humoral responses and containment of viral replication, future studies should 385 386 evaluate if the robust efficacy of live-attenuated SIV vaccination can be replicated by matching 387 its titers of gp140-binding Abs.

In conclusion, here we show that a rYF17D/EP rDNA/rAd5/rVSV/rRRV vaccine regimen 388 389 encoding env and genes expressing Mamu-B*17-restricted CD8+ T-cell epitopes resulted in 390 stringent control of viral replication in Mamu-B*17+ RMs shortly after SIVmac239 infection. We 391 present evidence suggesting that vaccine-elicited Env-specific Abs devoid of detectable neutralizing activity against SIVmac239 were critical mediators of virologic control and that 392 393 similar outcomes may be achieved in RMs that do not express protective MHC-I alleles. 394 However, the exact mechanism by which these humoral responses exerted antiviral activity and 395 to what extent cellular immune responses contributed to viral suppression remain undefined. 396 These findings advance our understanding of vaccine-mediated control of lentivirus infection 397 and establish a new benchmark for evaluating HIV vaccine candidates in the SIVmac239 398 challenge model.

399 Materials and Methods

400

401 Research Animals and Ethics Statement

402

Twenty-four RMs expressing the *Mamu-B*17* MHC-I allele were originally enrolled in this vaccine trial. Unfortunately, RM r04105 had to be euthanized due to recurrent diarrhea and weight loss, thus reducing the size of Group 1 to seven RMs. Because r04105 was euthanized at study week 39–before it was boosted with rAd5, this animal was not included in the immunological comparisons of vaccine-induced T-cell responses between Groups 1 and 2.

The details regarding animal welfare described herein are either similar or identical to 408 409 those published in one of our previous experiments. "The Indian RMs (Macaca mulatta) utilized in this study were housed at the Wisconsin National Primate Research Center (WNPRC). All 410 animals were cared for in accordance with the guidelines of the Weatherall report and the 411 412 principles described in the National Research Council's Guide for the Care and Use of 413 Laboratory Animals under a protocol approved by the University of Wisconsin Graduate School 414 Animal Care and Use Committee" (animal welfare assurance no. A3368-01; protocol no. G00696) (54). "Furthermore, the RMs in this study were managed according to the animal 415 husbandry program of the WNPRC, which aims at providing consistent and excellent care to 416 nonhuman primates at the center. This program is employed by the Colony Management Unit 417 418 and is based on the laws, regulations, and guidelines promulgated by the United States 419 Department of Agriculture (e.g., the Animal Welfare Act and its regulations, and the Animal Care Policy Manual), Institute for Laboratory Animal Research (e.g., Guide for the Care and Use of 420 Laboratory Animals, 8th edition), Public Health Service, National Research Council, Centers for 421

Journal of Virology

422 Disease Control, and the Association for Assessment and Accreditation of Laboratory Animal 423 Care International. The nutritional plan utilized by the WNPRC is based on recommendations 424 published by the National Research Council. Specifically, RMs were fed twice daily with 2050 425 Teklad Global 20% Protein Primate Diet and food intake was closely monitored by Animal 426 Research Technicians. This diet was also supplemented with a variety of fruits, vegetables, and 427 other edible objects as part of the environmental enrichment program established by the 428 Behavioral Management Unit. Paired/grouped animals exhibiting stereotypical and/or 429 incompatible behaviors were reported to the Behavioral Management staff and managed 430 accordingly. All primary enclosures (i.e., stationary cages, mobile racks, and pens) and animal rooms were cleaned daily with water and sanitized at least once every two weeks. Lights were 431 432 on a 12:12 diurnal schedule. Vaccinations were performed under anesthesia (Ketamine 433 administered at 5-12 mg/kg depending on the animal) and all efforts were made to minimize suffering. Euthanasia was performed at the end of the study or whenever an animal experienced 434 435 conditions deemed distressful by one of the veterinarians at the WNPRC. All euthanasia were 436 performed in accordance with the recommendations of the Panel on Euthanasia of the American 437 Veterinary Medical Association and consisted of an IV overdose (greater than or equal to 50 mg/kg or to effect) of sodium pentobarbital or equivalent, as approved by a clinical veterinarian, 438 preceded by ketamine (at least 15 mg/kg body weight) given by the intramuscular (IM) route." 439 440 Additional animal information, including MHC-I alleles, age at the beginning of study, and sex, is 441 shown in Table 4.

442

443 Vaccinations

444

445 The parental live-attenuated YF17DD vaccine strain and four rYF17D vectors expressing 446 individual SIVmac239 inserts were used in this study. The SIVmac239 inserts encoded (1) Vif 447 amino acids 1-110; (2) Nef amino acids 45-210; and (3) the amino terminus of gp41 (Env amino acids 526-690). In order to increase the stability of the latter rYF17D vector, the gp41 fusion 448 449 peptide was inactivated and the Cys residues at positions 611 and 617 were mutated to Ala. 450 The last SIVmac239 insert (4) consisted of a fusion of gp120 segments corresponding to amino 451 acids 64-109, 209-315, and 343-502. The codon usage of the aforementioned SIVmac239 452 inserts matched that of YF17D. RMs in Group 2 were vaccinated subcutaneously with 300,000 453 plaque-forming units (PFU) of each of rYF17D vectors 1-4. These constructs were delivered in separate injections, each containing a final volume of 0.5 mLs. RMs in Group 1 were vaccinated 454 455 in the same way, except that they received only vectors 1 and 2. RMs in Group 3 were sham-456 vaccinated with the same dose of the parental YF17DD vaccine. The construction of some of 457 the rYF17D vectors used here has been published elsewhere (55, 56).

458 A series of three EP rDNA vaccinations, given at 3-week intervals, started at study week 459 12. Four pCMVkan plasmids encoding SIVmac239 minigenes were used in the EP rDNA 460 vaccinations (57). These minigenes were identical to the ones delivered by the rYF17D vectors, except that the amino acid substitutions described above were reverted to wild-type and the SIV 461 462 open reading frames were optimized for mammalian expression. RMs in Groups 1 and 2 were 463 vaccinated with pCMVkan constructs encoding the aforementioned vif and nef minigenes. In 464 addition to these constructs, RMs in Group 2 also received two pCMVkan plasmids encoding 465 env minigenes described above. RMs in Group 3 were sham-vaccinated with "empty" pCMCkan plasmid. One milligram of each pCMVkan construct and 0.1 mg of the rhesus interleukin-12-466 467 expressing AG157 plasmid were resuspended in 0.5 mL PBS and loaded into separate

injections. These DNA formulations were administered intramuscularly by the TriGrid *in vivo* electroporation system (Ichor Medical Systems, Inc., San Diego, CA). Muscles in the thighs and forearms were used for these vaccinations and these anatomical sites were rotated in subsequent immunizations so that each location did not receive vectors encoding the same SIV insert twice.

473 The rAd5 boost occurred at study week 54. RMs in Groups 1 and 2 were boosted with 474 two rAd5 vectors produced by Viraquest, Inc., each encoding the same vif or nef minigenes 475 described above that were also optimized for mammalian expression. RMs in Group 2 also received a rAd5 vector encoding the full-length SIVmac239 gp160 glycoprotein. RMs in Group 3 476 were sham-vaccinated with "empty" Ad5 vectors lacking any inserts. The two latter Ad5 477 constructs were produced by the International AIDS Vaccine Initiative. A dose of 10¹¹ viral 478 479 particles of each rAd5 vector was administered intramuscularly to sites in the forearms and 480 thighs.

481 The rVSV boost occurred at study week 78. The rVSV vector was based on a modified 482 attenuated virus strain developed by Profectus Biosciences (58). A rVSV vector encoding a 483 fusion of the SIVmac239 Nef, Tat, and Vif proteins was used in RMs in both Groups 1 and 2. A separate rVSV vector encoding the SIVmac239 Env protein was administered to the Group 2 484 vaccinees only. SIV Env was modified by replacing the cytoplasmic tail with the corresponding 485 sequence from VSV G (59). RMs in Group 3 were sham-vaccinated with a rVSV construct 486 487 encoding the malaria CSP antigen. All three rVSV vectors were provided by Profectus 488 Biosciences. A dose of 10⁷ PFU of each rVSV vector was administered intramuscularly to separate sites in the forearms and thighs. 489

22

The rRRV boost occurred at study week 84. The Group 1 RMs were vaccinated with a mixture of three rRRV vectors, each expressing SIVmac239 *vif*, *nef*, and a fusion of the *rev-tatnef* genes. The Group 2 RMs received the same rRRV vectors with the addition of a rRRV construct expressing full-length *env*. The Group 3 RMs were sham-vaccinated with a rRRV vector encoding enhanced fluorescent green protein. One mL of PBS containing 7.1×10⁷ genome copies of each appropriate rRRV vector was administered via both intravenous and IR routes. Details about the generation of these rRRV vectors have been described previously (42).

498 SIVmac239 challenges

499

Seventeen weeks after the rRRV boost, RMs in Groups 1-3 were subjected to repeated IR inoculations of 200 TCID₅₀ (4.8×10^5 vRNA copies) of the same SIVmac239 stock described in (30). These IR challenges occurred every two weeks. Plasma VLs were assessed six and ten days after each exposure. Once an animal experienced a positive VL at either one of these time points, it was no longer challenged. Only RMs that remained aviremic at both time points were re-challenged on day 14.

506

507 SIV RNA viral load measurements

508

The following description of plasma SIV RNA viral loads is identical to that published in one of our recent manuscripts (27). "VLs were measured using 0.5 mL of EDTA-anticoagulated rhesus macaque plasma based on a modification of a previously published (60). Total RNA was extracted from plasma samples using QIAgen DSP virus/pathogen Midi kits, on a

513 QIASymphonyXP laboratory automation instrument platform. Six replicate two step RT-PCR 514 reactions were performed per sample using a random primed reverse transcription reaction, 515 followed by 45 cycles of PCR using the following primers and probe: forward primer: SGAG21: 516 5'-GTCTGCGTCAT(dP)TGGTGCA TTC-3'; reverse CACTAG(dK)TGTCTCTGCACTAT(dP)TGTTTTG-3'; 517 probe: 518 CTTC(dP)TCAGT(dK)TGTTTCACTTTCTCTCTGCG-BHQ1-519 quantitation on an input volume of 0.5 mL of plasma was 15 vRNA copies/mL."

520

521 Quantification of Mamu-B*17 tetramer+ CD8+ T-cells in PBMC

522

523 The following description is either identical or similar to that published in one of our recent 524 manuscripts (27). Fluorochrome-labeled Mamu-B*17 tetramers produced at the NIH Tetramer 525 Core Facility were used to quantify SIV-specific CD8+ T-cells in peripheral blood mononuclear 526 cells (PBMC) according to a recently published protocol (61). Approximately 800,000 PBMC were incubated in R10 medium (RPMI 1640 medium supplemented with GlutaMax [Life 527 528 Technologies], 10% FBS [VWR], and 1% antibiotic/antimycotic [VWR]) with titrated amounts of each tetramer at room temperature (RT) for 45 min. The cells were then stained with 529 fluorochrome-labeled monoclonal antibodies (mAbs) directed against the surface molecules 530 CD3 (clone SP34-2), CD8α (clone RPA-T8), CD14 (clone M5E2), CD16 (clone 3G8), and CD20 531 532 (clone 2H7) for 25 min. This step also included an amine-reactive dye (ARD; Live/DEAD Fixable 533 Aqua Dead Cell Stain; Life Technologies). The cells were then washed with Wash Buffer (Dulbecco's PBS with 0.1% bovine serum albumin and 0.45 g/L NaN3) and fixed with PBS 534 535 containing 2% of paraformaldehyde (PFA) for 20 min at 4°C. The cells were washed one more

24

5'-

5'-FAM-

reliable

SGAG22:

of

PSGAG23:

limit

primer

The

3'.

time before they were acquired in a Special-Order Product BD LSR II cytometer. The gating
strategy used to analyze the data has been described elsewhere (61). Briefly, we used FlowJo
9.6 to determine the percentages of live CD14- CD16- CD20- CD3+ CD8+ tetramer+
lymphocytes in PBMC.

540

541 Intracellular cytokine staining (ICS) assays

542

543 The following description is either identical or similar to that published in one of our recent 544 manuscripts (27). Freshly isolated PBMC were cultured in R10 medium containing unlabeled costimulatory mAbs against CD28 and CD49d and a phycoerythrin-conjugated mAb specific for 545 546 CD107a. The tubes were kept in a 5.0% CO₂ incubator for 9 hours (h) at 37 °C. One hour into 547 the incubation period, Brefeldin A (Biolegend, Inc.) and GolgiStop (BD Biosciences) were added 548 to all tubes in order to inhibit protein transport. The antigen stimuli consisted of three or five 549 pools of SIVmac239 peptides (15mers overlapping by 11 aa) corresponding to (1) the entire Vif 550 protein (amino acids 1-214), (2) the entire Nef protein (amino acids 1-263), (3) both Rev (amino 551 acids 1-107) and Tat (amino acids 1-130) proteins, (4) Env gp120 (amino acids 1-531) and (5) Env gp41 (amino acids 516-879). The final concentration of each 15mer in the ICS tubes was 552 1.0 µM. The same steps outlined above were used to stain the cells with mAbs against surface 553 554 markers and subsequently fix them. The surface staining master mix included mAbs against 555 CD4 (clone OKT4; Biolegend, Inc.) and CD8 (clone RPA-T8; Biolegend, Inc.), in addition to the 556 same mAbs against CD14, CD16, and CD20 and the ARD reagent described above. For 10 min, cells were permeabilized by homogenization in Perm Buffer (1X BD FACS lysing solution 2 557 558 [Beckton Dickinson] and 0.05% Tween 20 [Sigma-Aldrich]), and then were washed with Wash

25

559 Buffer. Lastly, cells were incubated for 1 h in the dark at RT with mAbs against CD3 (clone 560 561 562 563

SP34-2; BD Biosciences), IFN-γ (clone 4S. B3; Biolegend, Inc.), TNF-α (clone Mab11; BD Biosciences), and CD69 (clone FN50; Biolegend, Inc.). Once this incubation was completed, cells were washed and stored at 4 °C until acquisition. After gating on live CD14- CD16- CD20- CD3+ lymphocytes, we selected either CD4+ or

564 CD8+ cells for subsequent analyses. Cells were considered positive for IFN-γ, TNF-α, or 565 CD107a only if these molecules were co-expressed with CD69, a marker of recent activation. 566 Leukocyte activation cocktail (LAC; BD Pharmingen)-stimulated cells stained with fluorochrome-567 labeled control mAbs of the same isotypes as those against IFN-y, TNF-a, and CD107a guided the identification of positive populations. Two criteria were used to determine a positive 568 569 response. First, the frequency of events had to be ≥2-fold higher than their corresponding 570 values in background-subtracted negative control tests. Second, the gates for each response had to contain ≥10 events. These calculations were performed with Microsoft Excel and results 571 572 were presented as the percentage of responding CD4+ or CD8+ T-cells, that is, live CD14-573 CD16- CD20- CD3+ lymphocytes of either subset producing any combination of IFN-y, TNF- α , 574 or CD107a.

575

576 Anti-Env antibody measurements by ELISA

577

578 The following description is identical to that reported by our group in a recent publication 579 (27). "Vaccine induced anti-Env responses were measured by ELISA. To begin, the ELISA plate was coated with 100 µL of purified SIVmac239 gp140 protein (Immune Technology Corp. #IT-580 581 001-140p) at a concentration of 0.5 µg/mL and incubated overnight at RT. On the following day, 582 the plate was washed with 1x PBS-Tween20 and wells were blocked with 300 µL of 5% 583 powdered milk in PBS for 1 hr at 37 °C. Subsequently, the plate was washed and 100 µL of 584 diluted plasma samples were added to the corresponding wells. After a 1-hr incubation at RT, 585 the plate was washed and 100 µL of a 1:2,000 dilution of Goat Anti-Monkey IgG-HRP antibody 586 (Santa Cruz Biotechnology, sc-2458) were added to all wells for 1 hr at 37 °C. Finally, the plate 587 was washed before being developed with 100 µL of 3,3',5,5'-Tetramethylbenzidine (EMD 588 Millipore, 613544-100ML). After a short incubation, the reaction was stopped with TMB Stop 589 Solution (Southern Biotech, 0412-01) and the plate was read (Biotek Synergy 2) at 450 nm. The 590 endpoint antibody titers of vaccine-induced anti-Env antibody responses were measured in serum collected at the time of SIV challenge. These titers were determined as the greatest 591 592 dilution at which the absorbance in experimental wells was at least two-fold higher than that 593 measured in pooled pre-vaccination serum from all animals in the experiment."

594

Journal of Virology

595 Antibody dependent cellular cytotoxicity (ADCC) assay

596

597 The following description is identical to that reported by our group in a recent publication (27). "The SIVmac239 and SHIVAD8-EO stocks used in ADCC assays were produced by 598 transfection of infectious molecular clones into HEK293T cells using GenJet transfection 599 reagent (SignaGen). Virus-containing supernatants were collected 48 and 72 h post-transfection 600 601 and stored at -80 °C. The SHIV_{AD8-EO} clone was provided by Dr. Malcom Martin (NIAID, 602 Bethesda, MD). After heat inactivation for 30 min at 56 °C, RM plasma samples were tested for non-specific ADCC due to the presence of antibodies to human cellular antigens by co-603 604 incubating uninfected CEM.NKR-CCR5-sLTR-Luc target cells (AIDS Research and Reference

Reagent Program, Division of AIDS, NIAID, NIH) with an NK cell line (KHYG-1 cells) expressing RM CD16 at a 10:1 effector-to-target ratio in the presence of serial dilutions of plasma (62). This NK cell line was developed in house, as described previously (59). Non-specific lysis was detected as a reduction in background luciferase activity (% RLU) for target cells incubated with NK cells in the presence compared to the absence of plasma. Plasma samples that directed ADCC against uninfected cells were depleted of anti-human antibodies by repeated cycles of 611 incubation with CEM.NKR-CCR5-sLTR-Luc cells, followed by centrifugation and plasma 612 transfer, until ADCC responses to uninfected cells were no longer detectable."

"To measure ADCC activity in plasma of vaccinated animals, CEM.NKR-CCR5-sLTR-Luc 613 target cells were infected with SIVmac239 or SHIVADB-EO (internal negative control) by 614 615 spinoculation for 3 h at 1200 x g in the presence of 40 μ g/mL polybrene (EMD Millipore). Four 616 days post-infection, target cells were incubated with the NK cell line KHYG-1 at a 10:1 effector-617 to-target ratio in the presence of serial plasma dilutions. Luciferase activity was measured after 618 8 h using the britelite plus luciferase assay system (PerkinElmer). Triplicate wells were tested at 619 each plasma dilution, and wells containing effector cells incubated with uninfected or infected 620 target cells in the absence of plasma were used to determine background and maximal luciferase activity, respectively. ADCC responses were calculated from the dose-dependent loss 621 622 of luciferase activity in the presence of plasma relative to background and maximal luciferase 623 control wells."

624

625 Pseudovirus neutralization assays

626

627 The following description is nearly identical to that reported by our group in a recent 628 publication (27). "Replication incompetent SIVmac239 pseudovirus was produced by co-629 transfecting env plasmids with an env-deficient backbone plasmid (pSG3∆env) in HEK293T 630 cells in a 1:2 ratio, using the X-tremeGENE 9 transfection reagent (Roche). Pseudovirus was 631 harvested after 72 h by sterile-filtration (0.22 µm) of cell culture supernatants, and neutralization 632 was tested by incubating pseudovirus and serum for 1 h at 37 °C before transferring them onto 633 TZM-bl cells (AIDS Research and Reference Reagent Program, Division of AIDS, NIAID, NIH) 634 as previously described (63). Neutralization was measured in duplicate wells within each experiment. Neutralization was tested starting at 1:20 serum dilutions followed by nine serial 3-635 fold dilutions to ensure highest sensitivity and range of detection. Neutralization IC₅₀ titers were 636 637 calculated using the 'One site - Fit logIC50' regression in Graphpad Prism v7.0. We could not 638 detect vaccine-induced nAb titers against SIVmac239 pseudovirus in any of the RMs in Group 2 at the time of the first SIV challenge." 639

640

641 Amplicon-based sequencing of SIV nef and env

642

Viral RNA was isolated from plasma using the QIAamp viral RNA mini kit (Qiagen) 643 according to the manufacturer's protocol and eluted in 60 µL of AVE buffer, aliquoted and stored 644 at -80°C for future use. Viral RNA was reverse transcribed and amplified by using the 645 646 SuperScript III One-Step RT-PCR system with High Fidelity Platinum Tag polymerase 647 (Invitrogen). The 3' half of the genome was amplified in two amplicons SIVmac239-Amp3-5660-F (5'-GGCATAGCCTCATAAAATATCTG-3') SIVmac239-Amp3-8487-R (5'-648 and (5'-649 ATTGCAGAACCTGCCGTTG-3'); SIVmac239-Amp4-7821-F

29

Downloaded from http://jvi.asm.org/ on January 16, 2019 by guest

650 CAGTCACCATTATGTCTGGATTG-3') and SIVmac239-Amp4-10235-R (5'-651 GAATACAGAGCGAAATGCAGTG3'). All SIVmac239 primer positions are based on published 652 SIVmac239 sequence present in GenBank (M33262). The RT-PCR conditions were as follows 653 for 50°C for 30 min, 94 °C for 2 min; 40 cycles of 94 °C for 15 seconds (sec), 55 °C for 30 sec, and 68 °C for 3 min; and 68 °C for 5 min. 654

655 Amplicons were visualized on a 1.0% agarose gel and purified using the Purelink quick 656 gel extraction kit (Invitrogen). RT-PCR products were quantified using a Promega quantiflor-ST 657 fluorometer (Promega) and analyzed for quality using an Agilent 2100 bioanalyzer with high 658 sensitivity DNA chips. PCR amplicons were fragmented and barcoded using N exteraXT DNA Library Prep Kit, as per manufacturer's protocol. Samples were pooled and sequenced on an 659 660 Illumina MiSeq platform, using a 2 x 250 bp V2 reagent kit. Paired-end reads obtained from 661 Illumina MiSeq were then processed using our internal sequencing analysis pipeline which 662 consists of removing PCR duplicate reads using FastUniq (64), quality trimming with 663 trimmomatic (65) and de novo assembly using VICUNA (66) with finishing and annotation 664 completed with V-FAT (https://www.broadinstitute.org/viral-genomics/v-fat). Reads were then 665 aligned to the consensus assembly using Mosaik v2.1.73 with V-Phaser v2.0 used to call intrahost variants as described elsewhere (66-68). All raw sequence reads have been deposited to 666 667 the NCBI Sequence Read Archive under the study accession number SRP016012 with the 668 following experimental accession numbers SRX3797244 – SRX3797252.

669

670 Statistics

Peak VLs were determined as the highest VL measurement within the first 4 weeks after 671 672 infection. Nadir VLs were considered as the lowest VL measurement between peak and week 8

Journal of Virology

Downloaded from http://jvi.asm.org/ on January 16, 2019 by guest

PI. Setpoint VLs were calculated as the geometric mean of all VLs measured between week 8 674 PI and the last chronic phase time point available. The Mann-Whitney U test was used to 675 compare the total magnitude of vaccine-induced SIV-specific T-cell responses between Groups 676 1 and 2. The Kaplan-Meier method and log-rank test were used to determine whether the Group 1 or Group 2 vaccine regimens affected acquisition of SIV infection. For this analysis, the time-677 678 to-productive infection was analyzed using the Kaplan-Meier method and the differences 679 between Groups 1 and 3 and Groups 2 and 3 were evaluated using log-rank tests. The Mann-680 Whitney U test was also used to determine the efficacy of each vaccine regimen in reducing 681 viral replication. Viral loads at multiple time points were compared between each of Groups 1 682 and 2 and the control Group 3. Lastly, the Spearman rank correlation was used to indicate 683 immune correlates of protection. All significance tests were two-tailed.

684

Acknowledgements 685

686

687 We thank Teresa Maidana Giret for confirming the MHC-I genotype of the monkeys in 688 this study; Leydi Guzman for administrative assistance; all members of the Immunology Services Unit at the WNPRC, Kelli Oswald, Rebecca Shoemaker, Randy Fast, Mary Lopez, and 689 Marina Kemelman for excellent technical support; Eric Peterson and Kristin Crosno for providing 690 691 excellent care of the rhesus macaques used in the present experiment. The authors thank John 692 Eldridge and Profectus Biosciences for providing rVSV-SIV vaccines based on their attenuated 693 rVSV vector platform.

This work was funded by Public Health Service (PHS) grants R56 AI049120 (D.I.W.), 694 695 R37 AI052056 (D.I.W.), and P01 AI104715 (T.M.A.) from the National Institute of Allergy and

696 Infectious Diseases. Partial support came from PHS grant R01 Al121135 (D.T.E.) and federal 697 funds from the Office of Research Infrastructure Programs (P51 OD011106) and the National 698 Cancer Institute, National Institutes of Health, under contract no. HHSN261200800001E 699 (J.D.L.). IAVI's work is made possible by generous support from many donors including: The Bill 700 & Melinda Gates Foundation; the Ministry of Foreign Affairs of Denmark; Irish Aid; the Ministry 701 of Finance of Japan; the Ministry of Foreign Affairs of the Netherlands; the Norwegian Agency 702 for Development Cooperation (NORAD); the United Kingdom Department for International 703 Development (DFID), and the United States Agency for International Development (USAID). The full list of IAVI donors is available at <u>www.iavi.org</u>. The contents are the responsibility of the 704 International AIDS Vaccine Initiative and do not necessarily reflect the views of USAID or the 705 706 United States Government. The funders had no role in study design, data collection and 707 analysis, decision to publish, or preparation of the manuscript.

708 J.D.L. is employed by Leidos Biomedical Research, Inc., the Prime Contractor for the 709 Operations and Technical Support Contract for the Frederick National Laboratory for Cancer 710 Research, which exists solely to operate the FNLCR on behalf of the National Cancer Institute 711 and National Institutes of Health. J.D.L.'s laboratory is supported by this contract (contract 712 HHSN261200800001E) from the National Cancer Institute, National Institutes of Health. There 713 are no competing interests or relevant declarations related to employment, consultancy, patents, 714 products in development or marketed products. T.M.A.'s spouse was an employee of Bristol-715 Myers Squibb, which has a focus in Virology, specifically treatments for hepatitis B and C and 716 HIV/AIDS. T.M.A.'s spouse no longer works for BMS and only retained a small stock interest in 717 the public company. T.M.A.'s interests were reviewed and managed by Massachusetts General 718 Hospital and Partners HealthCare in accordance with their conflict of interest policies.

719 References

720

721 1. **UNAIDS**. 2016. Global AIDS Update.

Buchbinder SP, Mehrotra DV, Duerr A, Fitzgerald DW, Mogg R, Li D, Gilbert PB,
 Lama JR, Marmor M, Del Rio C, McElrath MJ, Casimiro DR, Gottesdiener KM,
 Chodakewitz JA, Corey L, Robertson MN. 2008. Efficacy assessment of a cell-mediated
 immunity HIV-1 vaccine (the Step Study): a double-blind, randomised, placebo-controlled,
 test-of-concept trial. Lancet 372:1881–1893.

Flynn NM, Forthal DN, Harro CD, Judson FN, Mayer KH, Para MF. 2005. Placebocontrolled phase 3 trial of a recombinant glycoprotein 120 vaccine to prevent HIV-1
infection. J Infect Dis 191:654–665.

Gray GE, Allen M, Moodie Z, Churchyard G, Bekker LG, Nchabeleng M, Mlisana K,
Metch B, de Bruyn G, Latka MH, Roux S, Mathebula M, Naicker N, Ducar C, Carter
DK, Puren A, Eaton N, McElrath MJ, Robertson M, Corey L, Kublin JG. 2011. Safety
and efficacy of the HVTN 503/Phambili study of a clade-B-based HIV-1 vaccine in South
Africa: a double-blind, randomised, placebo-controlled test-of-concept phase 2b study.
Lancet Infect Dis 11:507–515.

Hammer SM, Sobieszczyk ME, Janes H, Karuna ST, Mulligan MJ, Grove D, Koblin
 BA, Buchbinder SP, Keefer MC, Tomaras GD, Frahm N, Hural J, Anude C, Graham
 BS, Enama ME, Adams E, DeJesus E, Novak RM, Frank I, Bentley C, Ramirez S, Fu R,
 Koup RA, Mascola JR, Nabel GJ, Montefiori DC, Kublin J, McElrath MJ, Corey L,
 Gilbert PB. 2013. Efficacy trial of a DNA/rAd5 HIV-1 preventive vaccine. N Engl J Med
 369:2083–2092.

Pitisuttithum P, Gilbert P, Gurwith M, Heyward W, Martin M, van Griensven F, Hu D,
Tappero JW, Choopanya K. 2006. Randomized, double-blind, placebo-controlled efficacy
trial of a bivalent recombinant glycoprotein 120 HIV-1 vaccine among injection drug users
in Bangkok, Thailand. J Infect Dis 194:1661–1671.

746 7. Rerks-Ngarm S, Pitisuttithum P, Nitayaphan S, Kaewkungwal J, Chiu J, Paris R,
 747 Premsri N, Namwat C, de Souza M, Adams E, Benenson M, Gurunathan S, Tartaglia
 748 J, McNeil JG, Francis DP, Stablein D, Birx DL, Chunsuttiwat S, Khamboonruang C,
 749 Thongcharoen P, Robb ML, Michael NL, Kunasol P, Kim JH. 2009. Vaccination with
 750 ALVAC and AIDSVAX to prevent HIV-1 infection in Thailand. N Engl J Med 361:2209–
 751 2220.

752 8. Desrosiers RC. 2017. Protection against HIV Acquisition in the RV144 Trial. J Virol 91

9. Gilbert PB, Berger JO, Stablein D, Becker S, Essex M, Hammer SM, Kim JH,
Degruttola VG. 2011. Statistical interpretation of the RV144 HIV vaccine efficacy trial in
Thailand: a case study for statistical issues in efficacy trials. J Infect Dis 203:969–975.

Migueles SA, Connors M. 2010. Long-term nonprogressive disease among untreated
 HIV-infected individuals: clinical implications of understanding immune control of HIV.
 JAMA 304:194–201.

759 11. Goulder PJ, Walker BD. 2012. HIV and HLA class I: an evolving relationship. Immunity
760 37:426–440.

Kiepiela P, Ngumbela K, Thobakgale C, Ramduth D, Honeyborne I, Moodley E, Reddy
S, de Pierres C, Mncube Z, Mkhwanazi N, Bishop K, van der Stok M, Nair K, Khan N,
Crawford H, Payne R, Leslie A, Prado J, Prendergast A, Frater J, McCarthy N,
Brander C, Learn GH, Nickle D, Rousseau C, Coovadia H, Mullins JI, Heckerman D,

Downloaded from http://jvi.asm.org/ on January 16, 2019 by guest

Walker BD, Goulder P. 2007. CD8+ T-cell responses to different HIV proteins have
 discordant associations with viral load. Nat Med 13:46–53.

Martin MP, Qi Y, Gao X, Yamada E, Martin JN, Pereyra F, Colombo S, Brown EE,
 Shupert WL, Phair J, Goedert JJ, Buchbinder S, Kirk GD, Telenti A, Connors M,
 O'Brien SJ, Walker BD, Parham P, Deeks SG, McVicar DW, Carrington M. 2007. Innate
 partnership of HLA-B and KIR3DL1 subtypes against HIV-1. Nat Genet 39:733–740.

Yant LJ, Friedrich TC, Johnson RC, May GE, Maness NJ, Enz AM, Lifson JD,
 O'Connor DH, Carrington M, Watkins DI. 2006. The high-frequency major
 histocompatibility complex class I allele Mamu-B*17 is associated with control of simian
 immunodeficiency virus SIVmac239 replication. J Virol 80:5074–5077.

15. Loffredo JT, Maxwell J, Qi Y, Glidden CE, Borchardt GJ, Soma T, Bean AT, Beal DR,
Wilson NA, Rehrauer WM, Lifson JD, Carrington M, Watkins DI. 2007. Mamu-B*08positive macaques control simian immunodeficiency virus replication. J Virol 81:8827–
8832.

16. Loffredo JT, Sidney J, Bean AT, Beal DR, Bardet W, Wahl A, Hawkins OE, Piaskowski
S, Wilson NA, Hildebrand WH, Watkins DI, Sette A. 2009. Two MHC class I molecules
associated with elite control of immunodeficiency virus replication, Mamu-B*08 and HLAB*2705, bind peptides with sequence similarity. J Immunol 182:7763–7775.

17. Mothe BR, Sidney J, Dzuris JL, Liebl ME, Fuenger S, Watkins DI, Sette A. 2002.
Characterization of the peptide-binding specificity of Mamu-B*17 and identification of
Mamu-B*17-restricted epitopes derived from simian immunodeficiency virus proteins. J
Immunol 169:210–219.

18. Loffredo JT, Friedrich TC, Leon EJ, Stephany JJ, Rodrigues DS, Spencer SP, Bean

788

789

790

791

AT, Beal DR, Burwitz BJ, Rudersdorf RA, Wallace LT, Piaskowski SM, May GE, Sidney J, Gostick E, Wilson NA, Price DA, Kallas EG, Piontkivska H, Hughes AL, Sette A, Watkins DI. 2007. CD8+ T cells from SIV elite controller macaques recognize Mamu-B*08-bound epitopes and select for widespread viral variation. PLoS ONE 2:e1152.

19. Loffredo JT, Bean AT, Beal DR, Leon EJ, May GE, Piaskowski SM, Furlott JR, Reed J, 792 793 Musani SK, Rakasz EG, Friedrich TC, Wilson NA, Allison DB, Watkins DI. 2008. 794 Patterns of CD8+ immunodominance may influence the ability of Mamu-B*08-positive 795 macaques to naturally control simian immunodeficiency virus SIVmac239 replication. J 796 Virol 82:1723-1738.

20. Maness NJ, Yant LJ, Chung C, Loffredo JT, Friedrich TC, Piaskowski SM, Furlott J, 797 798 May GE, Soma T, Leon EJ, Wilson NA, Piontkivska H, Hughes AL, Sidney J, Sette A, 799 Watkins DI. 2008. Comprehensive immunological evaluation reveals surprisingly few differences between elite controller and progressor Mamu-B*17-positive Simian 800 801 immunodeficiency virus-infected rhesus macaques. J Virol 82:5245-5254.

21. Mudd PA, Martins MA, Ericsen AJ, Tully DC, Power KA, Bean AT, Piaskowski SM, 802 803 Duan L, Seese A, Gladden AD, Weisgrau KL, Furlott JR, Kim YI, Veloso de Santana MG, Rakasz E, Capuano S, Wilson NA, Bonaldo MC, Galler R, Allison DB, Piatak MJ, 804 Haase AT, Lifson JD, Allen TM, Watkins DI. 2012. Vaccine-induced CD8+ T cells control 805 806 AIDS virus replication. Nature 491:129–133.

807 22. Barouch DH, Liu J, Li H, Maxfield LF, Abbink P, Lynch DM, lampietro MJ, SanMiguel 808 A, Seaman MS, Ferrari G, Forthal DN, Ourmanov I, Hirsch VM, Carville A, Mansfield KG, Stablein D, Pau MG, Schuitemaker H, Sadoff JC, Billings EA, Rao M, Robb ML, 809 810 Kim JH, Marovich MA, Goudsmit J, Michael NL. 2012. Vaccine protection against
811

812

Journal of Virology

<u>Journal of Virology</u>

acquisition of neutralization-resistant SIV challenges in rhesus monkeys. Nature 482:89-93.

23. Barouch DH, Alter G, Broge T, Linde C, Ackerman ME, Brown EP, Borducchi EN, 813 814 Smith KM, Nkolola JP, Liu J, Shields J, Parenteau L, Whitney JB, Abbink P, Ng'ang'a DM, Seaman MS, Lavine CL, Perry JR, Li W, Colantonio AD, Lewis MG, Chen B, 815 816 Wenschuh H, Reimer U, Piatak M, Lifson JD, Handley SA, Virgin HW, Koutsoukos M, Lorin C, Voss G, Weijtens M, Pau MG, Schuitemaker H. 2015. Protective efficacy of 817 818 adenovirus/protein vaccines against SIV challenges in rhesus monkeys. Science 349:320-324. 819

24. Vaccari M, Gordon SN, Fourati S, Schifanella L, Liyanage NP, Cameron M, Keele BF, 820 821 Shen X, Tomaras GD, Billings E, Rao M, Chung AW, Dowell KG, Bailey-Kellogg C, Brown EP, Ackerman ME, Vargas-Inchaustegui DA, Whitney S, Doster MN, Binello N, 822 Pegu P, Montefiori DC, Foulds K, Quinn DS, Donaldson M, Liang F, Lore K, Roederer 823 824 M, Koup RA, McDermott A, Ma ZM, Miller CJ, Phan TB, Forthal DN, Blackburn M, Caccuri F, Bissa M, Ferrari G, Kalyanaraman V, Ferrari MG, Thompson D, Robert-825 826 Guroff M, Ratto-Kim S, Kim JH, Michael NL, Phogat S, Barnett SW, Tartaglia J, Venzon D, Stablein DM, Alter G, Sekaly RP, Franchini G. 2016. Adjuvant-dependent 827 828 innate and adaptive immune signatures of risk of SIVmac251 acquisition. Nat Med 22:762-770. 829

830 25. Cirelli KM, Crotty S. 2017. Germinal center enhancement by extended antigen availability. 831 Curr Opin Immunol 47:64-69.

26. Picker LJ, Hansen SG, Lifson JD. 2012. New paradigms for HIV/AIDS vaccine 832 833 development. Annu Rev Med 63:95-111.

Martins MA, Shin YC, Gonzalez-Nieto L, Domingues A, Gutman MJ, Maxwell HS,
Castro I, Magnani DM, Ricciardi M, Pedreño-Lopez N, Bailey V, Betancourt D, Altman
JD, Pauthner M, Burton DR, von Bredow B, Evans DT, Yuan M, Parks CL, Ejima K,
Allison DB, Rakasz E, Barber GN, Capuano S, Lifson JD, Desrosiers RC, Watkins DI.
2017. Vaccine-induced immune responses against both Gag and Env improve control of
simian immunodeficiency virus replication in rectally challenged rhesus macaques. PLoS
Pathog 13:e1006529.

28. Hansen SG, Ford JC, Lewis MS, Ventura AB, Hughes CM, Coyne-Johnson L, Whizin
N, Oswald K, Shoemaker R, Swanson T, Legasse AW, Chiuchiolo MJ, Parks CL,
Axthelm MK, Nelson JA, Jarvis MA, Piatak MJ, Lifson JD, Picker LJ. 2011. Profound
early control of highly pathogenic SIV by an effector memory T-cell vaccine. Nature
473:523–527.

Winstone N, Wilson AJ, Morrow G, Boggiano C, Chiuchiolo MJ, Lopez M, Kemelman
M, Ginsberg AA, Mullen K, Coleman JW, Wu CD, Narpala S, Ouellette I, Dean HJ, Lin
F, Sardesai NY, Cassamasa H, McBride D, Felber BK, Pavlakis GN, Schultz A,
Hudgens MG, King CR, Zamb TJ, Parks CL, McDermott AB. 2011. Enhanced control of
pathogenic Simian immunodeficiency virus SIVmac239 replication in macaques immunized
with an interleukin-12 plasmid and a DNA prime-viral vector boost vaccine regimen. J Virol
852
85:9578–9587.

Martins MA, Tully DC, Shin YC, Gonzalez-Nieto L, Weisgrau KL, Bean DJ, Gadgil R,
 Gutman MJ, Domingues A, Maxwell HS, Magnani DM, Ricciardi M, Pedreño-Lopez N,
 Bailey V, Cruz MA, Lima NS, Bonaldo MC, Altman JD, Rakasz E, Capuano S,
 Reimann KA, Piatak M, Lifson JD, Desrosiers RC, Allen TM, Watkins DI. 2017. Rare

857 Control of SIVmac239 Infection in a Vaccinated Rhesus Macaque. AIDS Res Hum858 Retroviruses

Sato S, Yuste E, Lauer WA, Chang EH, Morgan JS, Bixby JG, Lifson JD, Desrosiers
RC, Johnson WE. 2008. Potent antibody-mediated neutralization and evolution of
antigenic escape variants of simian immunodeficiency virus strain SIVmac239 in vivo. J
Virol 82:9739–9752.

32. Chung AW, Kumar MP, Arnold KB, Yu WH, Schoen MK, Dunphy LJ, Suscovich TJ,
Frahm N, Linde C, Mahan AE, Hoffner M, Streeck H, Ackerman ME, McElrath MJ,
Schuitemaker H, Pau MG, Baden LR, Kim JH, Michael NL, Barouch DH,
Lauffenburger DA, Alter G. 2015. Dissecting Polyclonal Vaccine-Induced Humoral
Immunity against HIV Using Systems Serology. Cell 163:988–998.

- 33. Mudd PA, Ericsen AJ, Burwitz BJ, Wilson NA, O'Connor DH, Hughes AL, Watkins DI.
 2012. Escape from CD8(+) T cell responses in Mamu-B*00801(+) macaques differentiates
 progressors from elite controllers. J Immunol 188:3364–3370.
- 34. Walker BD, Yu XG. 2013. Unravelling the mechanisms of durable control of HIV-1. Nat
 Rev Immunol 13:487–498.
- 35. Martins MA, Watkins DI. 2017. What Is the Predictive Value of Animal Models for Vaccine
 Efficacy in Humans? Rigorous Simian Immunodeficiency Virus Vaccine Trials Can Be
 Instructive. Cold Spring Harb Perspect Biol

36. Dang Q, Hirsch VM. 2008. Rapid disease progression to AIDS due to Simian
immunodeficiency virus infection of macaques: host and viral factors. Adv Pharmacol
56:369–398.

879 37. Johnson WE, Morgan J, Reitter J, Puffer BA, Czajak S, Doms RW, Desrosiers RC.

880 2002. A replication-competent, neutralization-sensitive variant of simian immunodeficiency 881 virus lacking 100 amino acids of envelope. J Virol 76:2075-2086.

882 38. Johnson WE, Sanford H, Schwall L, Burton DR, Parren PW, Robinson JE, Desrosiers 883 RC. 2003. Assorted mutations in the envelope gene of simian immunodeficiency virus lead 884 to loss of neutralization resistance against antibodies representing a broad spectrum of 885 specificities. J Virol 77:9993-10003.

Johnson WE, Lifson JD, Lang SM, Johnson RP, Desrosiers RC. 2003. Importance of 886 39. 887 B-cell responses for immunological control of variant strains of simian immunodeficiency 888 virus. J Virol 77:375-381.

40. Kilgore KM, Murphy MK, Burton SL, Wetzel KS, Smith SA, Xiao P, Reddy S, Francella 889 890 N, Sodora DL, Silvestri G, Cole KS, Villinger F, Robinson JE, Pulendran B, Hunter E, 891 Collman RG, Amara RR, Derdeyn CA. 2015. Characterization and Implementation of a Diverse Simian Immunodeficiency Virus SIVsm Envelope Panel in the Assessment of 892 893 Neutralizing Antibody Breadth Elicited in Rhesus Macagues by Multimodal Vaccines 894 Expressing the SIVmac239 Envelope. J Virol 89:8130-8151.

895 41. Means RE, Greenough T, Desrosiers RC. 1997. Neutralization sensitivity of cell culturepassaged simian immunodeficiency virus. J Virol 71:7895-7902. 896

42. Bilello JP, Manrique JM, Shin YC, Lauer W, Li W, Lifson JD, Mansfield KG, Johnson 897 898 **RP**, **Desrosiers RC**. 2011. Vaccine protection against simian immunodeficiency virus in 899 monkeys using recombinant gamma-2 herpesvirus. J Virol 85:12708-12720.

900 43. Evans DT, Bricker JE, Sanford HB, Lang S, Carville A, Richardson BA, Piatak M,

Lifson JD, Mansfield KG, Desrosiers RC. 2005. Immunization of macaques with single-901 902 cycle simian immunodeficiency virus (SIV) stimulates diverse virus-specific immune

903 responses and reduces viral loads after challenge with SIVmac239. J Virol **79**:7707–7720.

Wamoto N, Takahashi N, Seki S, Nomura T, Yamamoto H, Inoue M, Shu T, Naruse
 TK, Kimura A, Matano T. 2014. Control of Simian Immunodeficiency Virus Replication by
 Vaccine-Induced Gag- and Vif-Specific CD8+ T Cells. J Virol 88:425–433.

- Matano T, Kobayashi M, Igarashi H, Takeda A, Nakamura H, Kano M, Sugimoto C,
 Mori K, Iida A, Hirata T, Hasegawa M, Yuasa T, Miyazawa M, Takahashi Y, Yasunami
 M, Kimura A, O'Connor DH, Watkins DI, Nagai Y. 2004. Cytotoxic T lymphocyte-based
 control of simian immunodeficiency virus replication in a preclinical AIDS vaccine trial. J
 Exp Med 199:1709–1718.
- 46. Hansen SG, Piatak MJ, Ventura AB, Hughes CM, Gilbride RM, Ford JC, Oswald K,
 Shoemaker R, Li Y, Lewis MS, Gilliam AN, Xu G, Whizin N, Burwitz BJ, Planer SL,
 Turner JM, Legasse AW, Axthelm MK, Nelson JA, Fruh K, Sacha JB, Estes JD, Keele
 BF, Edlefsen PT, Lifson JD, Picker LJ. 2013. Immune clearance of highly pathogenic
 SIV infection. Nature 502:100–104.
- 917 47. Daniel MD, Kirchhoff F, Czajak SC, Sehgal PK, Desrosiers RC. 1992. Protective effects
 918 of a live attenuated SIV vaccine with a deletion in the nef gene. Science 258:1938–1941.
- 48. Fukazawa Y, Park H, Cameron MJ, Lefebvre F, Lum R, Coombes N, Mahyari E, Hagen
 SI, Bae JY, Reyes MD, Swanson T, Legasse AW, Sylwester A, Hansen SG, Smith AT,
 Stafova P, Shoemaker R, Li Y, Oswald K, Axthelm MK, McDermott A, Ferrari G,
 Montefiori DC, Edlefsen PT, Piatak MJ, Lifson JD, Sekaly RP, Picker LJ. 2012. Lymph
 node T cell responses predict the efficacy of live attenuated SIV vaccines. Nat Med
 18:1673–1681.
- 925 49. Adnan S, Colantonio AD, Yu Y, Gillis J, Wong FE, Becker EA, Piatak M, Reeves RK,

926 Lifson JD, O'Connor SL, Johnson RP. 2015. CD8 T cell response maturation defined by anentropic specificity and repertoire depth correlates with SIVAnef-induced protection. 927 928 PLoS Pathog 11:e1004633.

50. Adnan S, Reeves RK, Gillis J, Wong FE, Yu Y, Camp JV, Li Q, Connole M, Li Y, Piatak 929 M, Lifson JD, Li W, Keele BF, Kozlowski PA, Desrosiers RC, Haase AT, Johnson RP. 930 931 2016. Persistent Low-Level Replication of SIVAnef Drives Maturation of Antibody and CD8 932 T Cell Responses to Induce Protective Immunity against Vaginal SIV Infection. PLoS 933 Pathog 12:e1006104.

51. Lu W, Wan Y, Ma F, Johnson RP, Li Q. 2017. Distinct transcriptome profiles of Gag-934 specific CD8+ T cells temporally correlated with the protection elicited by SIVAnef live 935 936 attenuated vaccine. PLoS One 12:e0173929.

52. Manrique J, Piatak M, Lauer W, Johnson W, Mansfield K, Lifson J, Desrosiers R. 937 938 2013. Influence of mismatch of Env sequences on vaccine protection by live attenuated 939 simian immunodeficiency virus. J Virol 87:7246-7254.

53. Alpert MD, Harvey JD, Lauer WA, Reeves RK, Piatak MJ, Carville A, Mansfield KG, 940 941 Lifson JD, Li W, Desrosiers RC, Johnson RP, Evans DT. 2012. ADCC develops over time during persistent infection with live-attenuated SIV and is associated with complete 942 protection against SIV(mac)251 challenge. PLoS Pathog 8:e1002890. 943

944 54. Weatherall D. 2006. The use of non-human primates in research, (ed), FRS FMedSci,

945 Bonaldo MC, Mello SM, Trindade GF, Rangel AA, Duarte AS, Oliveira PJ, Freire MS, 55. 946 Kubelka CF, Galler R. 2007. Construction and characterization of recombinant flaviviruses

- bearing insertions between E and NS1 genes. Virol J 4:115. 947
- 948 56. Martins MA, Bonaldo MC, Rudersdorf RA, Piaskowski SM, Rakasz EG, Weisgrau KL,

Furlott JR, Eernisse CM, Veloso de Santana MG, Hidalgo B, Friedrich TC, Chiuchiolo
 MJ, Parks CL, Wilson NA, Allison DB, Galler R, Watkins DI. 2013. Immunogenicity of
 seven new recombinant yellow fever viruses 17D expressing fragments of SIVmac239
 Gag, Nef, and Vif in Indian rhesus macaques. PLoS One 8:e54434.

953 57. Rosati M, von Gegerfelt A, Roth P, Alicea C, Valentin A, Robert-Guroff M, Venzon D,
954 Montefiori DC, Markham P, Felber BK, Pavlakis GN. 2005. DNA vaccines expressing
955 different forms of simian immunodeficiency virus antigens decrease viremia upon
956 SIVmac251 challenge. J Virol **79**:8480–8492.

58. Fuchs JD, Frank I, Elizaga ML, Allen M, Frahm N, Kochar N, Li S, Edupuganti S, 957 Kalams SA, Tomaras GD, Sheets R, Pensiero M, Tremblay MA, Higgins TJ, Latham T, 958 959 Egan MA, Clarke DK, Eldridge JH, HVTN SGATNIOAAIDHIVVTN, Mulligan M, Rouphael N, Estep S, Rybczyk K, Dunbar D, Buchbinder S, Wagner T, Isbell R, 960 Chinnell V, Bae J, Escamilla G, Tseng J, Fair R, Ramirez S, Broder G, Briesemeister 961 962 L, Ferrara A. 2015. First-in-Human Evaluation of the Safety and Immunogenicity of a 963 Recombinant Vesicular Stomatitis Virus Human Immunodeficiency Virus-1 gag Vaccine 964 (HVTN 090). Open Forum Infect Dis 2:ofv082.

965 59. Johnson JE, Schnell MJ, Buonocore L, Rose JK. 1997. Specific targeting to CD4+ cells
966 of recombinant vesicular stomatitis viruses encoding human immunodeficiency virus
967 envelope proteins. J Virol 71:5060–5068.

60. Li H, Wang S, Kong R, Ding W, Lee FH, Parker Z, Kim E, Learn GH, Hahn P,
Policicchio B, Brocca-Cofano E, Deleage C, Hao X, Chuang GY, Gorman J, Gardner
M, Lewis MG, Hatziioannou T, Santra S, Apetrei C, Pandrea I, Alam SM, Liao HX,
Shen X, Tomaras GD, Farzan M, Chertova E, Keele BF, Estes JD, Lifson JD, Doms

872 RW, Montefiori DC, Haynes BF, Sodroski JG, Kwong PD, Hahn BH, Shaw GM. 2016.
873 Envelope residue 375 substitutions in simian-human immunodeficiency viruses enhance
874 CD4 binding and replication in rhesus macaques. Proc Natl Acad Sci U S A 113:E3413–
875 22.

976 61. Gonzalez-Nieto L, Domingues A, Ricciardi M, Gutman MJ, Maxwell HS, Pedreño 977 Lopez N, Bailey V, Magnani DM, Martins MA. 2016. Analysis of Simian
 978 Immunodeficiency Virus-specific CD8+ T-cells in Rhesus Macaques by Peptide-MHC-I
 979 Tetramer Staining. J Vis Exp

Alpert MD, Heyer LN, Williams DE, Harvey JD, Greenough T, Allhorn M, Evans DT.
2012. A novel assay for antibody-dependent cell-mediated cytotoxicity against HIV-1- or
SIV-infected cells reveals incomplete overlap with antibodies measured by neutralization
and binding assays. J Virol 86:12039–12052.

Sok D, Pauthner M, Briney B, Lee JH, Saye-Francisco KL, Hsueh J, Ramos A, Le KM,
Jones M, Jardine JG, Bastidas R, Sarkar A, Liang CH, Shivatare SS, Wu CY, Schief
WR, Wong CH, Wilson IA, Ward AB, Zhu J, Poignard P, Burton DR. 2016. A Prominent
Site of Antibody Vulnerability on HIV Envelope Incorporates a Motif Associated with CCR5
Binding and Its Camouflaging Glycans. Immunity 45:31–45.

989 64. Xu H, Luo X, Qian J, Pang X, Song J, Qian G, Chen J, Chen S. 2012. FastUniq: a fast
990 de novo duplicates removal tool for paired short reads. PLoS One 7:e52249.

991 65. Bolger AM, Lohse M, Usadel B. 2014. Trimmomatic: a flexible trimmer for Illumina
992 sequence data. Bioinformatics 30:2114–2120.

993 66. Yang X, Charlebois P, Gnerre S, Coole MG, Lennon NJ, Levin JZ, Qu J, Ryan EM,
994 Zody MC, Henn MR. 2012. De novo assembly of highly diverse viral populations. BMC

996 67. Henn MR, Boutwell CL, Charlebois P, Lennon NJ, Power KA, Macalalad AR, Berlin 997 AM, Malboeuf CM, Ryan EM, Gnerre S, Zody MC, Erlich RL, Green LM, Berical A, Wang Y, Casali M, Streeck H, Bloom AK, Dudek T, Tully D, Newman R, Axten KL, 998 Gladden AD, Battis L, Kemper M, Zeng Q, Shea TP, Gujja S, Zedlack C, Gasser O, 999 1000 Brander C, Hess C, Gunthard HF, Brumme ZL, Brumme CJ, Bazner S, Rychert J, 1001 Tinsley JP, Mayer KH, Rosenberg E, Pereyra F, Levin JZ, Young SK, Jessen H, 1002 Altfeld M, Birren BW, Walker BD, Allen TM. 2012. Whole genome deep sequencing of HIV-1 reveals the impact of early minor variants upon immune recognition during acute 1003 infection. PLoS Pathog 8:e1002529. 1004

1005 68. Tully DC, Ogilvie CB, Batorsky RE, Bean DJ, Power KA, Ghebremichael M, Bedard
1006 HE, Gladden AD, Seese AM, Amero MA, Lane K, McGrath G, Bazner SB, Tinsley J,
1007 Lennon NJ, Henn MR, Brumme ZL, Norris PJ, Rosenberg ES, Mayer KH, Jessen H,
1008 Kosakovsky Pond SL, Walker BD, Altfeld M, Carlson JM, Allen TM. 2016. Differences
1009 in the Selection Bottleneck between Modes of Sexual Transmission Influence the Genetic
1010 Composition of the HIV-1 Founder Virus. PLoS Pathog 12:e1005619.

69. Reynolds MR, Weiler AM, Piaskowski SM, Kolar HL, Hessell AJ, Weiker M, Weisgrau
KL, Leon EJ, Rogers WE, Makowsky R, McDermott AB, Boyle R, Wilson NA, Allison
DB, Burton DR, Koff WC, Watkins DI. 2010. Macaques vaccinated with simian
immunodeficiency virus SIVmac239Delta nef delay acquisition and control replication after
repeated low-dose heterologous SIV challenge. J Virol 84:9190–9199.

Martins MA, Wilson NA, Piaskowski SM, Weisgrau KL, Furlott JR, Bonaldo MC,
 Veloso de Santana MG, Rudersdorf RA, Rakasz EG, Keating KD, Chiuchiolo MJ,

Downloaded from http://jvi.asm.org/ on January 16, 2019 by guest

Journal of Virology

 \leq

1018 Piatak MJ, Allison DB, Parks CL, Galler R, Lifson JD, Watkins DI. 2014. Vaccination 1019 with Gag, Vif, and Nef gene fragments affords partial control of viral replication after mucosal challenge with SIVmac239. J Virol 88:7493-7516. 1020

71. Martins MA, Tully DC, Cruz MA, Power KA, Veloso de Santana MG, Bean DJ, Ogilvie 1021 1022 CB, Gadgil R, Lima NS, Magnani DM, Ejima K, Allison DB, Piatak MJ, Altman JD, 1023 Parks CL, Rakasz EG, Capuano S, Galler R, Bonaldo MC, Lifson JD, Allen TM, Watkins DI. 2015. Vaccine-Induced Simian Immunodeficiency Virus-Specific CD8+ T-Cell 1024 1025 Responses Focused on a Single Nef Epitope Select for Escape Variants Shortly after Infection. J Virol 89:10802-10820. 1026

1027

1029 Figure legends

1030

1031 Figure 1. Experimental design. Twenty-three Mamu-B*17+ RMs were vaccinated with a rYF17D/EP rDNA/rAd5/rVSV/rRRV regimen and divided among three groups depending on 1032 which vaccine inserts they received. Animals in Group 1 (n = 7) were vaccinated with vif and nef 1033 1034 sequences. Animals in Group 2 (n = 8) were vaccinated with the same SIV inserts plus env. 1035 RMs in Group 3 were sham-vaccinated with vectors lacking SIV genes or expressing irrelevant 1036 inserts and served as the control group for this experiment. At study week 101, vaccine efficacy 1037 was assessed by subjecting all animals to repeated intrarectal (IR) challenges with a marginal 1038 dose of SIVmac239 (200 TCID₅₀) every two weeks.

1039

Figure 2. Development of vaccine-induced CD8+ T-cell responses against Mamu-B*17-1040 restricted SIV epitopes in Groups 1 and 2. Fluorochrome-labeled Mamu-B*17 tetramers 1041 1042 folded with peptides corresponding to SIV epitopes were used to track vaccine-elicited SIVspecific CD8+ T-cells in PBMC from RMs in Group 1 (A, C, E) and Group 2 (B, D, F, and G). 1043 1044 The percentages of live tetramer+ CD8+ T-cells specific for Vif HW8 (A and B), Nef IW9 (C and D), Nef MW9 (E and F), and Env FW9 (G) are shown at multiple time points throughout the 1045 vaccine phase. No Env FW9-specific CD8+ T-cell data are available for the Group 1 RMs 1046 because those animals were not vaccinated with env. The times of each vaccination (black 1047 1048 vertical dotted lines) and the day of the first IR SIV challenge (red vertical solid line) are 1049 indicated in each graph. RMs in Groups 1 and 2 are color-coded in blue and black, respectively.

1051 Figure 3. Vaccine-induced SIV-specific CD4+ and CD8+ T-cell responses in Groups 1 and 1052 2 at the time of the first SIV challenge. CD8+ and CD4+ T-cell responses were measured in 1053 PBMC by ICS using pools of peptides (15mers overlapping by 11 amino acids) spanning the appropriate SIVmac239 proteins. Peptides covering the Rev and Tat proteins were tested 1054 together. The percentages of responding CD4+ or CD8+ T-cells displayed in all panels were 1055 1056 calculated by adding the frequencies of positive responses producing any combination of three immunological functions (IFN- γ , TNF- α , and CD107a). The magnitude and specificity of vaccine-1057 1058 induced CD8+ (left panels) and CD4+ (right panels) T-cell responses are shown for Group 1 (A) 1059 and Group 2 (B). C) Comparison of the total magnitude of vaccine-elicited SIV-specific CD8+ (left panel) and CD4+ (right panel) between Groups 1 and 2. The Mann-Whitney U test was 1060 1061 used for these comparisons and no statistically significant difference was found. RMs in Groups 1062 1 and 2 are color-coded in blue and black, respectively, and each symbol corresponds to one 1063 vaccinee. Lines represent medians. NA, not applicable. NS, not significant.

1064

Journal of Virology

Figure 4. Vaccine-induced Env-specific humoral immune responses in Group 2. A) Env-1065 1066 binding antibodies (Abs) were measured by ELISA using plate-bound gp140 at multiple time points during the vaccine phase. Straight 1:200 dilutions of plasma from each RM in Group 2 1067 were used for this analysis. B) Log-transformed endpoint titers of vaccine-induced gp140-1068 binding Abs in sera from the Group 2 vaccinees collected at the time of the first SIV challenge. 1069 1070 As a reference, these values were plotted alongside the endpoint titers of gp140-binding Abs in 1071 four RM that had been infected with SIVmac239 Anef for 28 weeks as part of a previous experiment (69). The endpoint titers of gp140-binding Abs in macaques vaccinated with an EP 1072 1073 rDNA/rAd5/rVSV/rRRV regimen encoding env, gag, vif, tat, rev, and nef are also shown (27). C)

Ab-dependent cellular cytotoxicity (ADCC) activity was screened against SIVmac239-infected target cells using plasma collected from the Group 2 vaccinees at the time of the first IR SIV challenge (black lines). SHIV_{AD8-EO}-infected target cells were used as internal controls (green lines) for non-specific killing. The decrease in relative light units indicates the loss of virusinfected cells in the presence of an NK cell line during the duration of the assay. Dotted lines denote 50% activity. Plasma from an SIV-infected RM (382-03) with a defined ADCC titer against SIVmac239-infected cells was used as a positive control for these measurements.

1081

Figure 5. Kaplan-Meier rate of infection after repeated IR challenges with SIVmac239. Macaques in Groups 1-3 were inoculated intrarectally with 200 TCID₅₀ of SIVmac239 every other week. The rate of SIV infection in Groups 1 and 2 was not significantly different than that of Group 3. The *P* value for the Group 1 versus Group 3 comparison was 0.96. The *P* value for the Group 2 versus Group 3 comparison was 0.28.

1087

Figure 6. Plasma viral RNA levels after SIVmac239 infection. Viral load (VL) traces for individual animals in Group 1 (A), Group 2 (B), and Group 3 (C). VLs were log-transformed and correspond to the number of vRNA copies/mL of plasma. The dotted lines in all the graphs are for reference only and indicate a VL of 10³ vRNA copies/mL. The dashed lines are also for reference only and denote a VL of 10⁶ vRNA copies/mL. The pink rectangle in each graph frames the interval during which five Group 2 vaccinees controlled viremia to <15 vRNA copies/mL. Groups 1, 2, and 3 are color-coded in blue, black, and red, respectively.

1095

Figure 7. SIV plasma viral load comparisons among Groups 1, 2, and 3. A) Plasma viral

loads (VLs) measured on day 6 post infection (PI). B) Peak VLs. C) Nadir VLs. D) Setpoint VLs, calculated as the geometric mean of VLs measured between week 8 PI and the last chronic phase time point available. E) Time to peak viremia, determined as the week PI when each animal experienced its peak VL. The dotted lines in graphs A-D are for reference only and indicate a VL of 10³ vRNA copies/mL. The dashed lines in graphs A-D are also for reference only and denote a VL of 10⁶ vRNA copies/mL. Lines represent medians and P-values were calculated using the Mann-Whitney U test. Groups 1, 2, and 3 are color-coded in blue, black, 1103 1104 and red, respectively, and each symbol corresponds to one vaccinee.

1105

Figure 8. Viral loads in the five Group 2 controllers compared to those in RMs historically 1106 1107 infected with SIVmac239. The outcome of SIVmac239 infection in the five Group 2 vaccinees 1108 that manifested early control of viral replication was compared to those of 197 RMs that were rectally infected with SIVmac239 as part of eight SIV vaccine trials conducted by our group. The 1109 1110 historical viral loads (VLs) for each independent SIV vaccine trial are plotted in panels A-H and 1111 include both vaccinated (gray lines) and control (salmon lines) RMs. VLs from RMs that 1112 expressed MHC-I alleles associated with elite control of SIV infection (i.e., Mamu-B*08 and Mamu-B*17) are shown in dashed lines. VLs from RMs that did not express these protective 1113 MHC-I alleles are shown in solid lines. To better visualize the early control of viral replication 1114 manifested by the five Group 2 vaccinees, their VLs (black lines) were also plotted in each 1115 panel. Additionally, only the first 20 weeks of SIV infection are shown in each graph. A) In trial 1116 1117 #1, twenty-four RMs were vaccinated with env, gag, vif, rev, tat, and nef delivered by either rRRV alone or rRRV followed by two boosts with rAd5 and rVSV. Eight RMs served as the 1118 1119 controls for the challenge phase (Martins et al., unpublished data). B) The details of this

experiment were published recently (27). Briefly, thirty-two RMs were vaccinated with an EP 1120 1121 rDNA/rAd5/rVSV/rRRV regimen encoding four different sets of SIV inserts. Eight RMs served as 1122 the controls for this experiment. One vaccinee did not get infected, so VL traces for 39 RMs are shown in the graph. C) The details of this experiment were published recently (70). Briefly, four 1123 1124 different mixed modality vaccine regimens were used to deliver minigenes of SIV gag, vif, and 1125 nef to 32 RMs. Eight RMs served as the controls for this experiment. D) Ten Mamu-B*08+ RMs 1126 were vaccinated with a rAd5/rVSV/rRRV regimen encoding vif, rev, tat, and nef and six MHC-I-1127 matched RMs served as the controls for the challenge phase (Martins et al., unpublished data). Three vaccinees did not acquire SIV infection in this experiment so VL traces for 13 RMs are 1128 shown in the graph. E) The details of this experiment were published recently (71). Briefly, 1129 1130 sixteen Mamu-B*08+ RMs were vaccinated with an EP rDNA/rYF17D/rAd5 regimen encoding 1131 nef and two MHC-I-matched macaques served as the controls for the challenge phase. F) The details of this experiment were published recently (30). Four RMs, two of which were Manu-1132 1133 B*08+, were vaccinated with an EP rDNA/rYF17D/rRRV regimen encoding either gag or nef. 1134 For unknown reasons, the animal highlighted in pink harbored a *nef*-deleted SIV variant as early as week 2 PI. The replicative fitness cost imposed by this nef deletion likely underlies the 1135 stringent control of viral replication manifested by this animal. G) Twenty RMs were vaccinated 1136 with an EP rDNA/recombinant vaccinia/rVSV/rAd5/rRRV regimen encoding vif only. Twenty 1137 1138 MHC-I-matched RMs served as the controls for the challenge phase. Eight vaccinees and nine control RMs expressed either Mamu-B*08 or Mamu-B*17 (Martins et al., unpublished data). One 1139 1140 vaccinee did not acquire SIV infection so VL traces for 39 RMs are shown in the graph. H) The details of this experiment were published elsewhere (21). Briefly, sixteen Mamu-B*08+ RMs

were vaccinated with a rYF17D/rAd5 regimen encoding either vif and nef minigenes containing

1141

1142

lournal of Virology

Mamu-B*08-restricted epitopes or regions of the SIV proteome lacking epitopes restricted by
Mamu-B*08. Four MHC-I-matched RMs served as the controls for the challenge phase.

1145

Figure 9. nef sequence diversity in acute phase plasma from four Group 2 controllers. 1146 Heat maps illustrating the levels of sequence diversity at each codon in the *nef* open reading 1147 1148 frame. The range of amino acids covered by each row is indicated on the right-hand side of the 1149 figure and should be used only as a reference because both synonymous and non-synonymous 1150 mutations are considered in these heat maps. The codon corresponding to the first amino acid in Nef is located in the top left corner of each grid. Each row spans 17 amino acids of the Nef 1151 protein, except for the bottom row, which covers 9 amino acids and includes the last residue at 1152 1153 position 264. The panels on the left correspond to plasma samples collected at week 2 post 1154 infection (PI). The panels on the right correspond to plasma samples collected at week 3 PI, or 1155 week 4 PI in the case of r08046. Data from r08046, r05007, r08062, and r08047 are shown in A, 1156 B, C, and D, respectively.

1157

Figure 10. env sequence diversity in acute phase plasma from four Group 2 controllers. 1158 1159 Heat maps illustrating the levels of sequence diversity at each codon in the env open reading 1160 frame. The range of amino acids covered by each row is indicated on the right-hand side of the 1161 figure only as a reference because both synonymous and non-synonymous mutations are considered in these heat maps. When applicable, the frequency and location of amino acid 1162 1163 substitutions are described in the text of the manuscript and in Figure 11. The codon corresponding to the first amino acid in Env is located in the top left corner of each grid. Each 1164 1165 row spans 30 amino acids of the Env protein, except for the bottom row, which covers 9 amino

acids and includes the last residue at position 879. The panels on the left correspond to plasma samples collected at week 2 post infection (PI). The panels on the right correspond to plasma samples collected at week 3 PI, or week 4 PI in the case of r08046. Data from r08046, r05007, r08062, and r08047 are shown in A, B, C, and D, respectively.

1170

1171 Figure 11. Summary of amino acid substitutions in Env present at ≥10% frequencies in 1172 acute phase samples from four Group 2 controllers. Each substitution is enclosed by a 1173 square and its details are listed in a text box outside the Env main sequence. The details 1174 provided for each amino acid substitution include the animal ID, time point post infection, position in the Env protein, and the frequency of sequence reads displaying the wild-type 1175 1176 (boldface type) and mutant residues. As a reference, several topological features of the SIV Env 1177 protein are shown in the figure, including the five variable loops (V) in gp120, the gp120/gp41 cleavage site, the membrane spanning domain and highly immunogenic region of gp41. The 1178 1179 location of the Mamu-B*17-restricted Env FW9 epitope is also indicated in the carboxyl terminus 1180 of gp41.

1181

Figure 12. Association between titers of vaccine-induced gp140-binding Abs at the time of the 1st SIV challenge and nadir viral loads in Group 2. This is a graphical representation of the comparison between the log₁₀ endpoint titers of vaccine-induced gp140-binding antibodies at the time of the first IR SIV challenge and nadir viral loads in Group 2 listed in Table 3. The symbol for macaque r09062 (open black square) is masked by the symbol of r05007 (filled black square) because both animals had the same titer of gp140-binding antibodies

(25,600) and nadir VL (15 vRNA copies/mL of plasma). The Bonferroni-corrected *P* value is shown in the figure. Each symbol corresponds to one Group 2 vaccinee.

1191

Accepted Manuscript Posted Online

Journal of Virology

 \sum

1192 Table 1. Serum neutralization of SIVmac239 in Group 2*

1193

Animal ID	Day of 1 st SIV shallongs	Week 6			
Animarid	Day of 1 Siv challenge	PI			
r08046	<20	<20			
r05007	<20	<20			
r08062	<20	<20			
r08047	<20	<20			
r08041	<20	<20			
r09062	<20	<20			
r04116	<20	<20			
rh1982	<20	<20			

1194

*Because none of the samples resulted in a 50% reduction in SIV infection *in vitro* at the lowest

reciprocal serum dilution (1:20), the 50% inhibitory dose for each animal is shown as <20.

1197

Journal of Virology

Table 2. Percentage of viral sequences encoding intact Mamu-B*17-restricted CD8+ T-cell
 epitopes in acute phase samples from four Group 2 controllers.

1200

		Week	3 or 4 PI					
Animal	Vif	Nef	Nef	Env	Vif	Nef	Nef	Env
ID	HW8	IW9	MW9	FW9	HW8	IW9	MW9	FW9
r08046*	100%	99.7%	100%	99.7%	100%	100%	100%	96.6%
r05007	100%	100%	100%	100%	100%	100%	98.3%	98.2%
r08062	100%	99.4%	99.3%	99.8%	100%	99.7%	99.5%	94.9%
r08047	N.A.	N.A.	N.A.	N.A.	100%	100%	100%	100%

1201

N.A., not available. *No week 3 PI plasma was available from r08046 so the sample collected atweek 4 PI was used instead.

1204

1205

Journal of Virology

 $\overline{\leq}$

1206 Table 3. Correlations between immunological variables measured in vaccinees in Groups

1207 **1 and 2 and their respective nadir VLs.**

1208

Immunological variable	Groups included in the analysis	Time point	Correlation coefficient (r)	Unadjusted <i>P</i> -value	Bonferroni- corrected <i>P</i> -value
Total frequency of SIV-specific CD8+ T- cell responses	1 and 2	Time of 1 st SIV challenge	-0.18	0.53	1.0
Total frequency of SIV-specific CD4+ T- cell responses	1 and 2	Time of 1 st SIV challenge	-0.25	0.37	1.0
Total frequency of Mamu-B*17 tetramer+ CD8+ T- cells	1 and 2	Time of 1 st SIV challenge	-0.19	0.5	1.0
Total frequency of Mamu-B*17 tetramer+ CD8+ T- cells	1 and 2	Week 2.4 Pl	0.4	0.14	1.0
Area under the curve values for ADCC	2	Time of 1 st SIV	-0.49	0.22	1.0

 \leq

		challenge			
Area under the curve values for ADCC	2	Week 2.4 Pl	0.14	0.75	1.0
Titer of gp140- binding Abs	2	Time of 1 st SIV challenge	-0.85	0.008	0.06
Titer of gp140- binding Abs	2	Week 2.4 Pl	0.28	0.51	1.0

1209

1210

1211

Accepted Manuscript Posted Online

1212 Table 4. Animal characteristics.

1213

Crown	Animal	Age (years) at	Sav	
Group	ID	beginning of study	Sex	
1	r04105*	8.6	F	Mamu-B*17
1	r03139	9.6	F	Mamu-B*17
1	r08022	4.8	F	Mamu-B*17
1	r09090	3.6	М	Mamu-B*17
1	r07012	5.6	F	Mamu-B*17
1	r08034	4.8	М	Mamu-B*17
1	r09001	4.3	М	Mamu-B*17
1	r09022	4	М	Mamu-B*17
2	r08046	4.6	М	Mamu-B*17
2	r05007	8.2	F	Mamu-B*17
2	r08062	4.4	М	Mamu-B*17
2	r08047	4.6	М	Mamu-A*02, -B*17
2	r08041	4.7	F	Mamu-B*17
2	r09062	3.8	F	Mamu-A*02, -B*17
2	r04116	8.6	F	Mamu-B*17
2	rh1982	15	F	Mamu-B*17
3	r08051	4.6	М	Mamu-B*17
3	r04053	8.9	F	Mamu-B*17
3	r97081	15.6	F	Mamu-B*17

(Online
C	pi rosied
•	Manuscri
	Accepted /

r09073	3.8	М	Mamu-B*17
r10018	3.1	Μ	Mamu-A*02, -B*17
r09083	3.7	F	Mamu-B*17
r98038	14.9	Μ	Mamu-B*17
r09039	3.9	Μ	Mamu-B*17
	r09073 r10018 r09083 r98038 r09039	r090733.8r100183.1r090833.7r9803814.9r090393.9	r090733.8Mr100183.1Mr090833.7Fr9803814.9Mr090393.9M

SIVmac239 inserts

Group 1 n = 7		vif	rev	tat	nef							IR challenges with SIVmac239 every 2 weeks
						rYF17D	EP rDNA	, rAd5	rVSV	rRRV	,	
Group 2	env	vif	rev	tat	nef						/	
n = 8						Week 0	12 15 18	54	78	84		101

Group 3 Sham vaccinated controls n = 8

Journal of Virology

 \leq



 \sum

Journal of Virology









Z



 $\overline{\leq}$





Z

A) Day 6 PI

Group 1

P = 0.78

C

Group 1

D) Setpoint

Log₁₀ vRNA copies/mL of plasma

Log₁₀ vRNA copies/mL of plasma

81

7

6

5

4

3

2

8

7

6

5

4

3.

2

P = 0.093

Δ

⊽▼

Group 2

_∆ 0

Δ



 $\overline{\leq}$



 \sum



 \sum



 \leq

100

200

300

400

500

600

700

800

r08047

wk 3 PI Env 493

E: 86%

K: 14%

r08047 wk 3 PI

Env 700 **G**: 80% K: 20%

r08047

wk 3 PI Env 688

E: 80%

K: 20%

r08062

r08046

wk 4 Pl

Env 751 G: 81%

R: 14%

E: 5%

V1	V2
CVKLSPLCITMR <u>CNKSETDRWGLTKSITTTASTTSTTASAF</u>	<pre>(VDMVNETSSCIAQDNCTGLEQEQMISCKFNMTGLKRDKKKEYNETWYSADLVCEQGNNT</pre>
<u>GNESRCYMNHC</u> NTSVIQESCDKHYWDAIRFRYCAPPGYALI	$. {\tt RCNDTNYSGFMPKCSKVVVSSCTRMMETQTSTWFGFNGTRAENRTYIYWHGRDNRTIIS$
V3	
LNKYYNLTMKCRRPGNKTVLPVTIMSGLVFHSQPINDRPK	<u>AWC</u> WFGGKWKDAIKEVKQTIVKHPRYTGTNNTDKINLTAPGGGDPEVTFMWTNCRGEFL
V4	V5
Y <u>CKMNWFLNWVEDRNTANQKPKEQHKRNYVPC</u> HIRQIINTW	iHKVGKNVYLPPREGDLTCNSTVTSLIANID <u>WIDGNO</u> TNITMSAEVAELYRLELGDYKLV
<pre>qp120 end \/ qp41 start</pre>	
EITPIGLAPTDVKRYTTGGTSRNKRGVFVLGFLGFLATAGS	SAMGAASLTLTAQSRTLLAGIVQQQQQLLDVVKRQQELLRLTVWGTKNLQTRVTAIEKYL
	Membrane
KDQAQLNAWGCAFRQVCHTTVPWPNASLTPKWNNETWQEWH	RKVDFLEENITALLEEAQIQQEKNMYELQKLNSWDVFGNWFDLASWIKYIQYGVYIVVG
spanning domain Highly immunoge	nic region
VILL RIVIVIVOMLAKT POCYPOVESSPRSVEOOTHTOOD	AT PUPECKEP DCCECCONSSWOWOTEVTHET TROT TRUTESNCPULL SPUVOTLOP
viilliki viili võillikik lippii bii põi bii põi	

r08062 wk 3 Pl Env 39 T: 74% **A**: 26%

ILQRLSATLQRIREVLRTELTYLQYGWSY<u>FHEAVQAVW</u>RSATETLAGAWGDLWETLRRGGRWILAIPRRIRQGLELTLL 879 r05007 Env(830-838)FW9 wk 3 Pl

Env 814 E: 90% K: 10%

M



 \sum