Crossreactive Epstein-Barr Virus (EBV)-Influenza A Virus (IAV) Specific CD8 Memory T Cells During Acute Symptomatic IAV Infection

Rabinarayan Mishra
University of Massachusetts Medical School

Anna Gil
University of Massachusetts Medical School

Nuray Aslan
University of Massachusetts Medical School

See next page for additional authors

Follow this and additional works at: https://escholarship.umassmed.edu/cts_retreat

Part of the Immunology of Infectious Disease Commons, Immunopathology Commons, Infectious Disease Commons, Medical Pathology Commons, Pathology Commons, Translational Medical Research Commons, Virology Commons, and the Virus Diseases Commons
Presenter Information
Rabinarayan Mishra, Anna Gil, Nuray Aslan, Katherine Ruiz De Luzuriaga, and Liisa K. Selin

Comments
Abstract of poster presented at the 2014 UMass Center for Clinical and Translational Science Research Retreat, held on May 20, 2014 at the University of Massachusetts Medical School, Worcester, Mass.

Creative Commons License
This work is licensed under a Creative Commons Attribution-Noncommercial-Share Alike 3.0 License.

This is available at eScholarship@UMMS: https://escholarship.umassmed.edu/cts_retreat/2014/posters/66
Crossreactive Epstein-Barr virus (EBV)-Influenza A virus (IAV) specific CD8 memory T cells during acute symptomatic IAV infection.

Rabinarayan Mishra1, Anna Gil1, Nuray Aslan1, Katherine Luzuriaga2, Liisa K. Selin1

1Department of Pathology, 2Department of Molecular Medicine, University of Massachusetts Medical School, Worcester

We previously showed that crossreactivity is common between IAV and EBV in HLA-A2+ patients during infectious mononucleosis. IAV-M1-GIL58-66 specific CD8 T cells, along with expanded populations of IAV-M1-GIL58-66/EBV-BRLF11109-117-YVL and IAV-M1-GIL58-66/EBV-BMLF1280-288-GLC double-tetramer+ cells were detected directly ex-vivo in 5 HLA-A2+ patients. Altered IAV-M158-66, EBV-BRLF1119-117 and -BMLF1280-288 TCR repertoires were observed over the course of infection and in comparison to healthy donors. After culture, cells were sorted and analyzed by gene array in order to assess global changes in immune responses following different stimulations, either cognate or crossreactive, in different patient populations. M1-GIL and BRLF1-YVL specific cells had similar immune-response gene signatures, but the -GLC specific CD8 cells were more similar to the two-crossreactive populations. Crossreactive M1-GIL/BRLF1-YVL cells from the BRLF1-YVL line were different in their activation status than the BRLF1-specific cells, consistent with BRLF1-YVL ligand stimulation of different gene activation profiles in these two populations. These results suggest that during symptomatic IAV infection there is an expansion of EBV/IAV crossreactive memory CD8 T cell responses. Ongoing studies are investigating whether EBV-IAV cross-reactive CD8+ T cells may contribute to immunopathology during acute IAV infection (NIH / NIAID PO1 AI 049320).

Contact: Rabinarayan.Mishra@umassmed.edu

Ph-508-856-6314