

Epstein-Barr Virus Vaccines

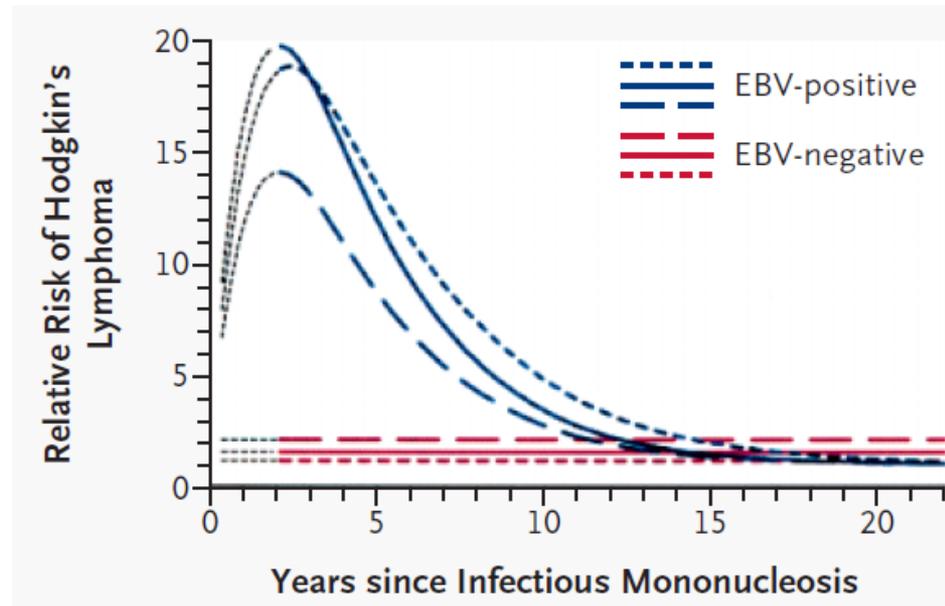
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National Institutes of Health

Primary EBV Infection

- 95% of adults are infected with EBV
- Most primary EBV infections in childhood are asymptomatic
- 75% of college students with primary EBV infection will develop infectious mononucleosis
- 1:1,000 persons with EBV mononucleosis will develop Hodgkin lymphoma



*Hjalgrim et al
NEJM 2003*

EBV-Associated Malignancies: Criteria

- EBV is in every tumor cell
- EBV is clonal (or oligoclonal), indicating malignancy originated in a virus-infected cell
- At least one EBV gene is expressed
- For epithelial cell cancers, EBV is in dysplastic lesions, indicating virus infection is present during oncogenesis

The Need for an EBV Vaccine: Malignancies in Non-Immunocompromised Persons

<u>Cancer</u>	<u>Annual No. Cases Associated with EBV</u>
Gastric carcinoma	84,050 worldwide
Nasopharyngeal carcinoma	78,100 worldwide
Hodgkin lymphoma	28,600 worldwide
Burkitt lymphoma	6,600 worldwide

Others:

T cell lymphoma (peripheral, AILT)
Diffuse large B cell lymphoma of elderly
Extranodal NK/T cell lymphoma

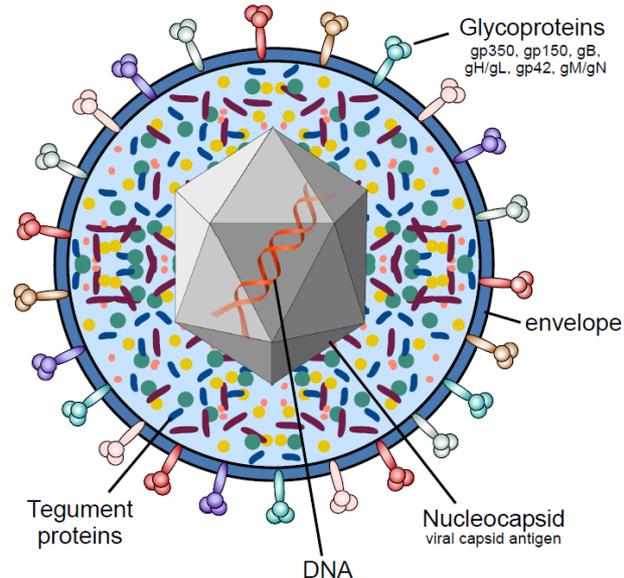
The Need for an EBV Vaccine: Malignancies in Immunocompromised Persons

Post-transplant lymphoproliferative disease: most common cancer after skin cancer in solid organ transplant recipients

<u>Patients with HIV</u>	<u>Frequency of EBV</u>
Hodgkin lymphoma	>95%
Burkitt lymphoma	30-70%
DLBCL: immunoblastic	>90%
centroblast	30%
Primary CNS lymphoma	>95%
Primary effusion lymphoma	>90%
Smooth muscle tumors	>95%
Plasmablastic lymphoma	50-80%

Vaccine Candidates: EBV Glycoproteins

<u>Glycoprotein</u>	<u>Receptor</u>	<u>Function</u>
gp350	CR2 (CD21)	Attachment to cells
gB	Unknown	Fusion
gp42	MHC class II	Fusion with B cells
gH/gL	$\alpha\nu\beta 6$, $\alpha\nu\beta 8$ integrin	Fusion with epithelial & B cells
BMRF2	Integrins	Attachment to epithelial cells



EBV gp350



- Most abundant viral protein in infected cell plasma membrane and virion envelope
- Binds to CR2 (CD21) on B cells, results in adsorption of virus to cells followed by endocytosis into cells
- Little sequence variation in gp350 among isolates throughout the world
- gp350 is the principal target of neutralizing antibodies to EBV
- gp350 is a target for antibody-dependent cellular cytotoxicity
- gp350 is a target for cytotoxic T cells

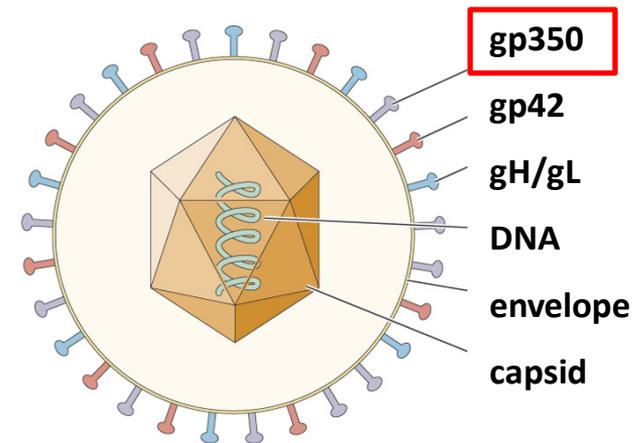
Protection of cottontop tamarins against Epstein–Barr virus-induced malignant lymphoma by a prototype subunit vaccine

**M. A. Epstein, A. J. Morgan, S. Finerty,
B. J. Randle & J. K. Kirkwood**

Department of Pathology, University of Bristol Medical School,
University Walk, Bristol BS8 1TD, UK

NATURE VOL. 318 21 NOVEMBER 1985

“Here we report that isolated cell membranes expressing MA or purified MA glycoprotein [gp350 in liposomes], have been used to vaccinate cottontop tamarins, and that animals receiving either preparation were protected against the effects of a 100% tumor-inducing challenge dose of EB virus.”



Also effective: purified/recombinant gp350 in ISCOMs, muramyl dipeptide, alum
adenovirus-gp350 or vaccinia virus-gp350

Recombinant gp350 Vaccine for Infectious Mononucleosis: A Phase 2, Randomized, Double-Blind, Placebo-Controlled Trial to Evaluate the Safety, Immunogenicity, and Efficacy of an Epstein-Barr Virus Vaccine in Healthy Young Adults

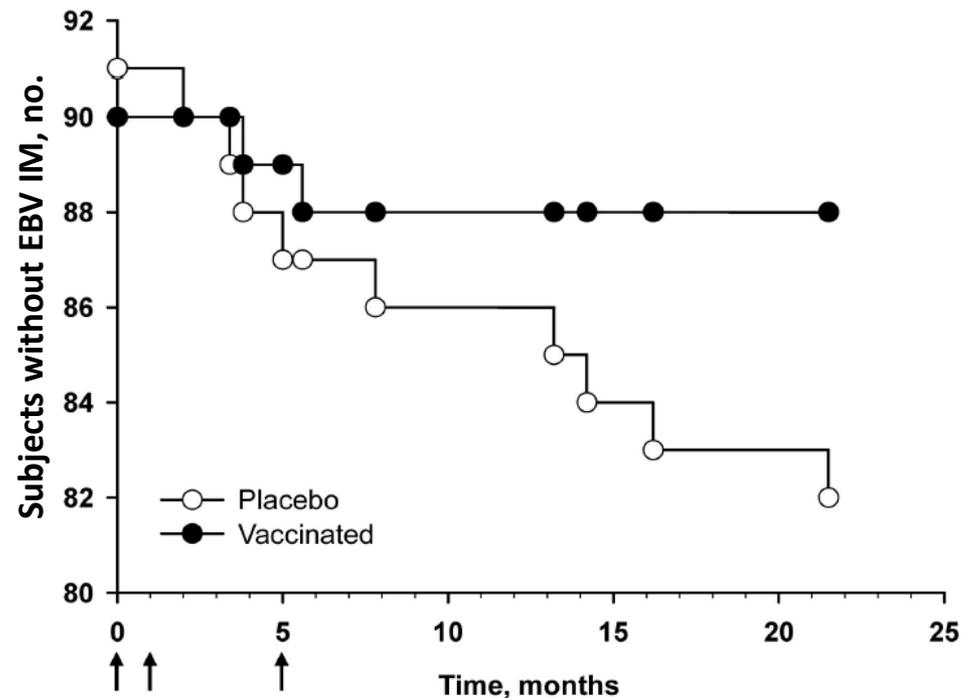
The Journal of Infectious Diseases 2007; 196:1749–53

Etienne M. Sokal,¹ Karel Hoppenbrouwers,³ Corinne Vandermeulen,³ Michel Moutschen,⁴ Philippe Léonard,⁴ Andre Moreels,² Michèle Haumont,⁵ Alex Bollen,⁵ Françoise Smets,¹ and Martine Denis⁶

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16-25 yo Belgians vaccinated:
90 received vaccine
91 received placebo

Vaccine given i.m. in
alum/MPL adjuvant at
0,1, 5 months



**gp350 vaccine reduced infectious mononucleosis by 78%,
but did not prevent EBV Infection**

Phase I Trial of a CD8⁺ T-Cell Peptide Epitope-Based Vaccine for Infectious Mononucleosis[∇]

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 Thuy T. Le,¹ Andrew Rosenstengel,¹ Tam Nguyen,¹ Anthony Allworth,² Scott R. Burrows,¹
 John Cox,³ David Pye,³ Denis J. Moss,¹ and Mandvi Bharadwaj^{1*}

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JOURNAL OF VIROLOGY, Feb. 2008, p. 1448–1457

HLA B*0801 EBNA-3A
 peptide and tetanus toxoid:

1 of 2 placebo recipients
 developed IM

4 of 4 vaccinees who
 became infected with EBV
 did not develop IM

Vaccine	Vaccine recipient	EBV seroconversion (wk of test)	IM or asymptomatic
Peptide 5 µg	#01	No (412)	
	#02	Yes (628)	Asymptomatic
	#04	Yes (104)	Asymptomatic ^d
	#05	No (542)	
	#06	No (523)	
	#07 ^a	No (520)	
	#08 ^a	Yes (104)	Asymptomatic ^d
	#09 ^b	Yes (26)	Asymptomatic ^d
	50 µg	#13	No (421)
#14 ^c		Yes (8)	^{γd,e}
Placebo	#03	No (585)	
	#10	No (494)	
	#11 ^a	Yes (438)	Asymptomatic
	#12	Yes (392)	IM, treating doctor notified

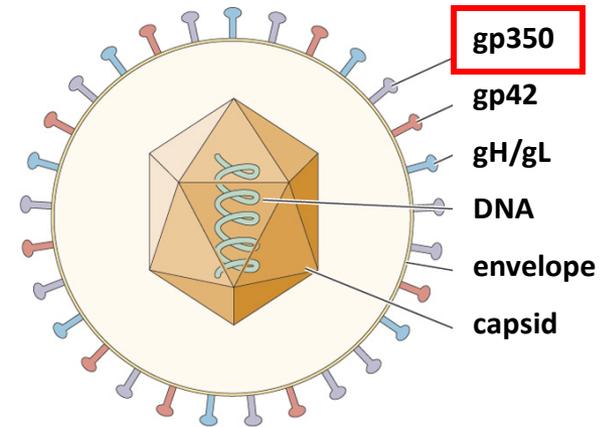
Rhesus Lymphocryptovirus (Rhesus EBV) to Compare EBV Vaccines

- Naturally endemic in rhesus monkeys and reproduces most, if not all, of the features of EBV in these animals
(*Moghaddam et al. 1997*)
- Animals shed virus from oropharynx, and are latently infected
- Every human EBV gene has an ortholog in rhesus LCV and vice versa
- Functions of EBV and rhesus LCV proteins conserved



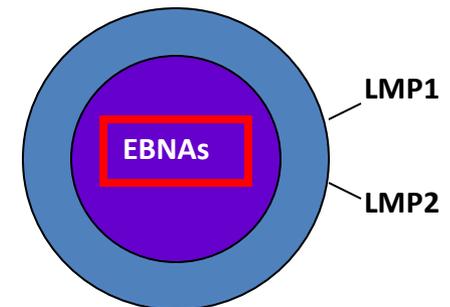
Rhesus Lymphocryptovirus (Rhesus EBV) Vaccine Study

- Soluble rhesus LCV gp350 (50ug) in alum/MPL
- Attenuated VEE virus-like replicon particles (VEE VRP) expressing rhesus EBV gp350 10^8 ID i.m.
- VEE VRP expressing rhesus LCV gp350, EBNA-3A, EBNA-3B 10^8 ID i.m.



gp350 is major target of neutralizing Ab
induces some CD4 T cells

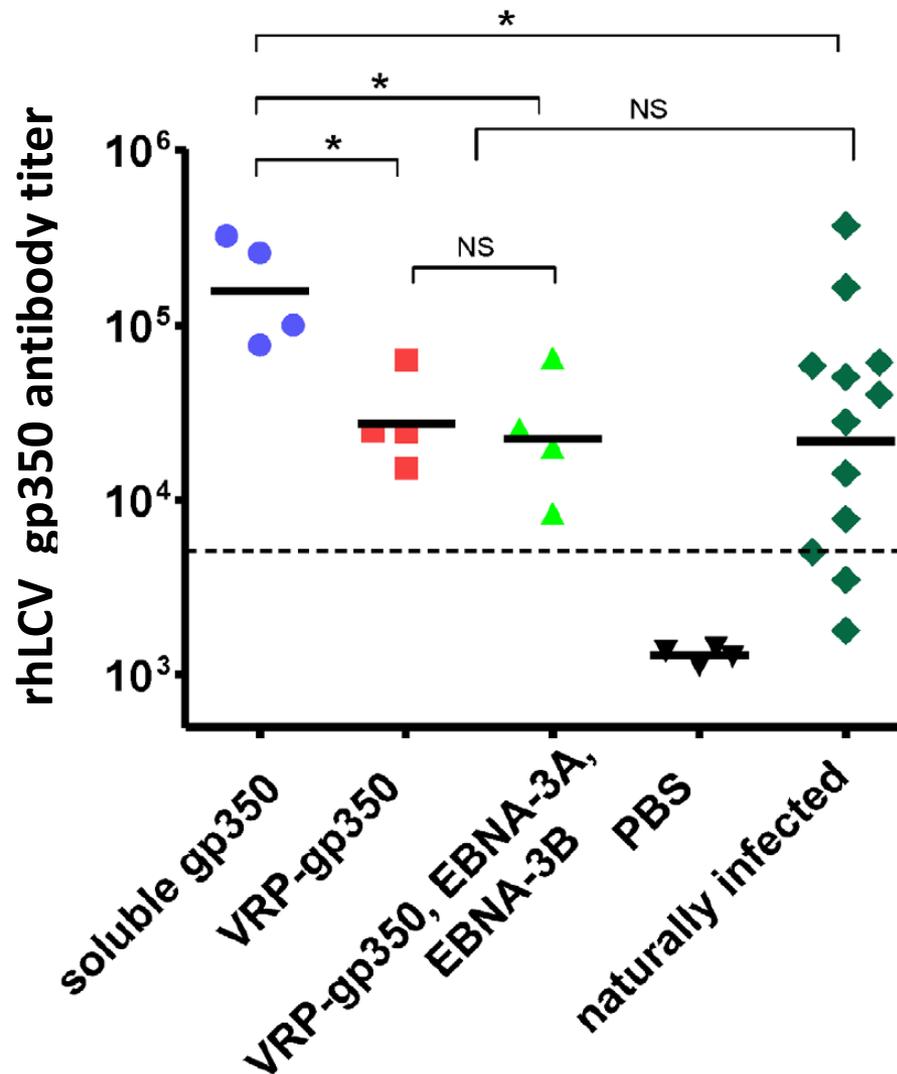
Vaccine Schedule



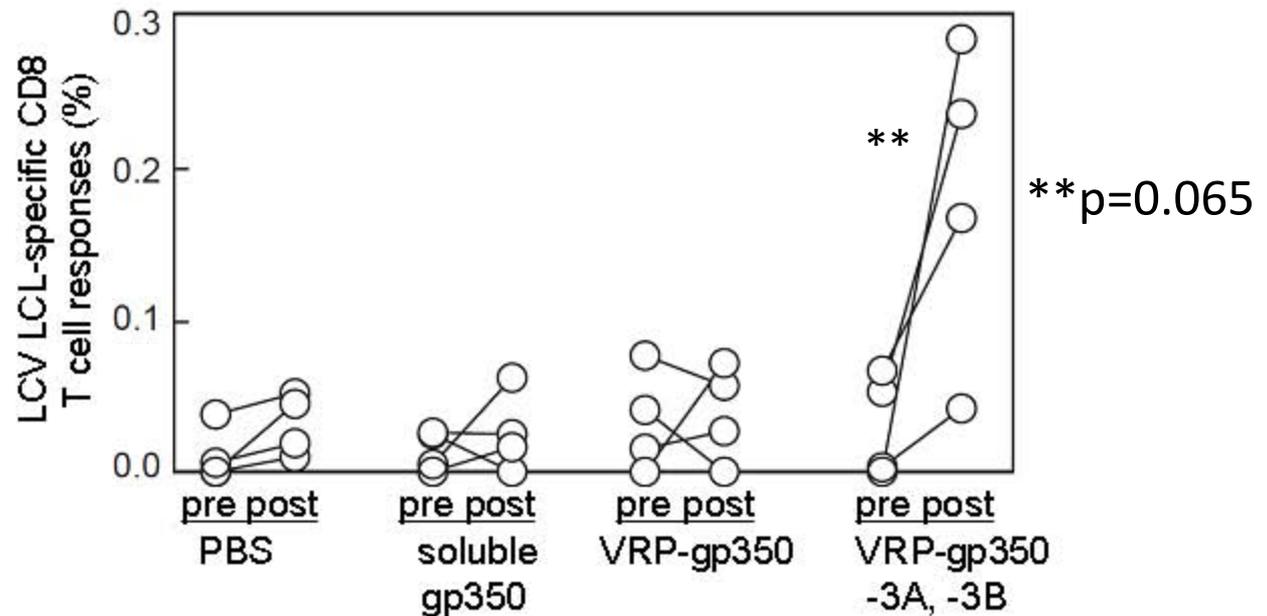
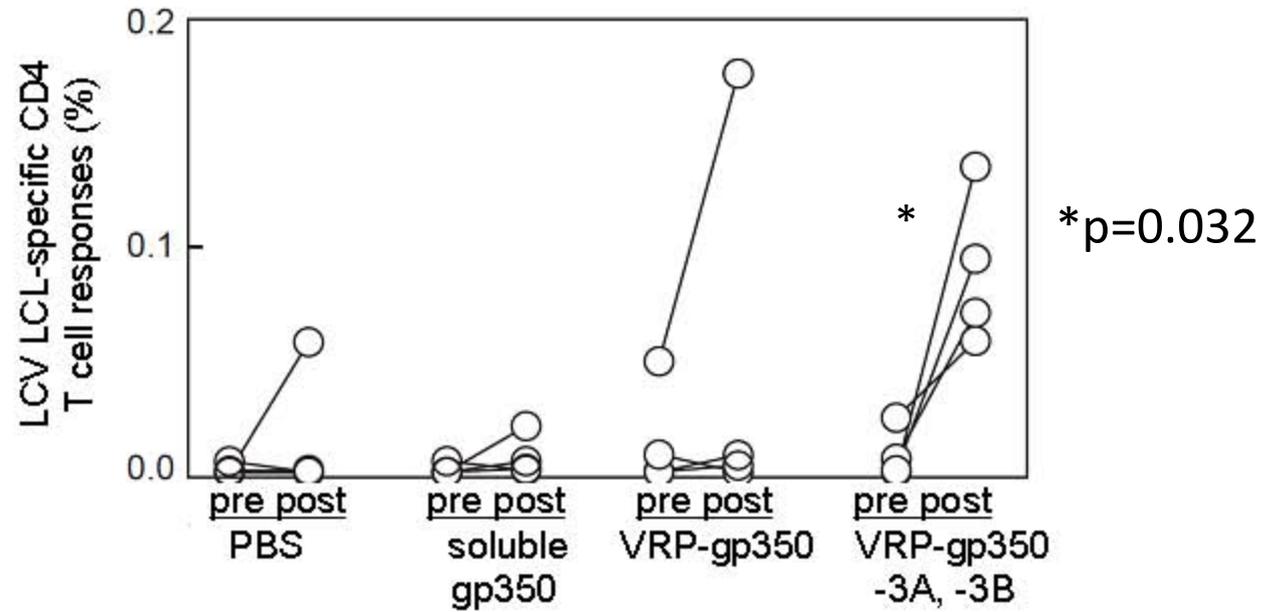
EBV latently-infected B cell

EBNA-3s are major target of CD8 CTLs

Soluble Rhesus LCV gp350 Induces the Highest Antibody Level After Vaccination



Only the
Combination of
VRP-gp350,
EBNA-3A, & -3B
Induces Rhesus
LCV-Specific
CD4 and CD8 T
Cell Responses



Soluble gp350 Protects Best Against Rhesus EBV Challenge

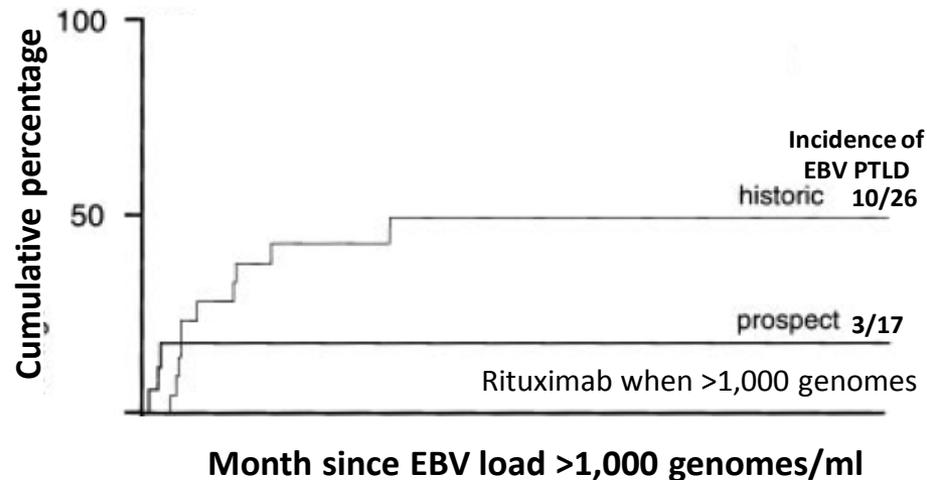
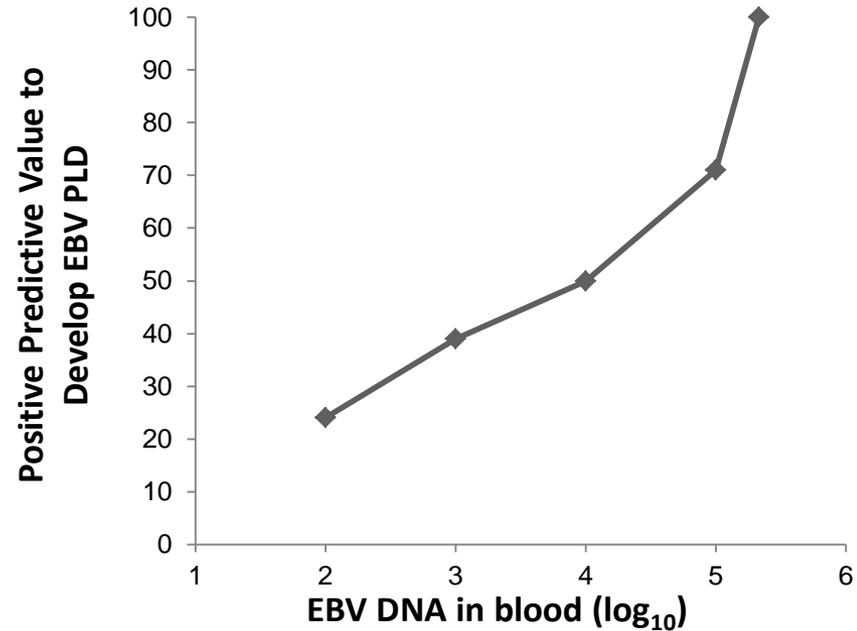
<u>Vaccine</u>	<u>Seroconvert</u>	<u>EBV DNA</u>	<u>EBV RNA</u>
PBS	100%	75%	100%
Soluble gp350	50%	50%	50%
VRP-gp350	100%	100%	100%
VRP-combo	75%	75%	50%

EBV PTLD- EBV DNA Viral Load

EBV viral load in blood partially predictive of disease in transplant recipients

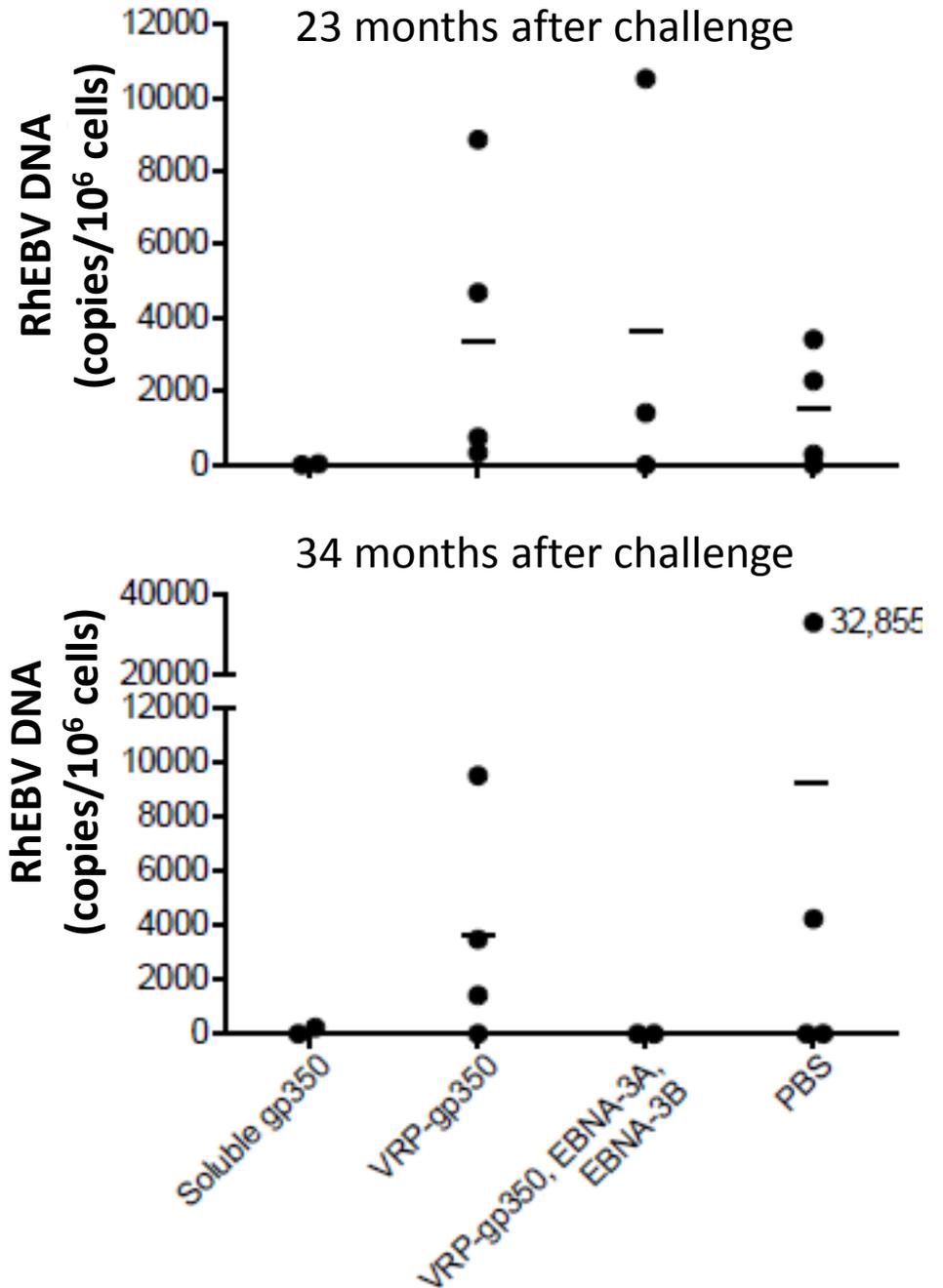
Rituximab (anti-CD20 MAb), given when viral load is increasing, before the onset of EBV PTLD, usually results in an undetectable viral load and may reduce the disease

Therefore a vaccine that doesn't prevent infection, but reduces EBV load set point might reduce the rate of EBV PTLD



Soluble gp350 Is Best to Reduce Rhesus EBV DNA in Blood Years Later in Animals that Become Infected After Challenge

Since level of EBV DNA in blood is a risk factor for EBV lymphoma after transplant, soluble gp350 might reduce the risk of certain EBV lymphomas



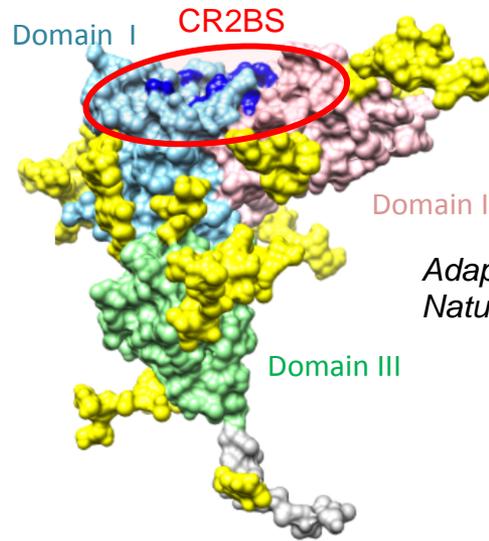
Can We Improve Upon Soluble gp350: Self-Assembling Nanoparticle Based Vaccines

- Multivalent, symmetrical repetitive array of antigen to improve immunogenicity
- Self-assembles into 24-mer
- Proof of Concept:

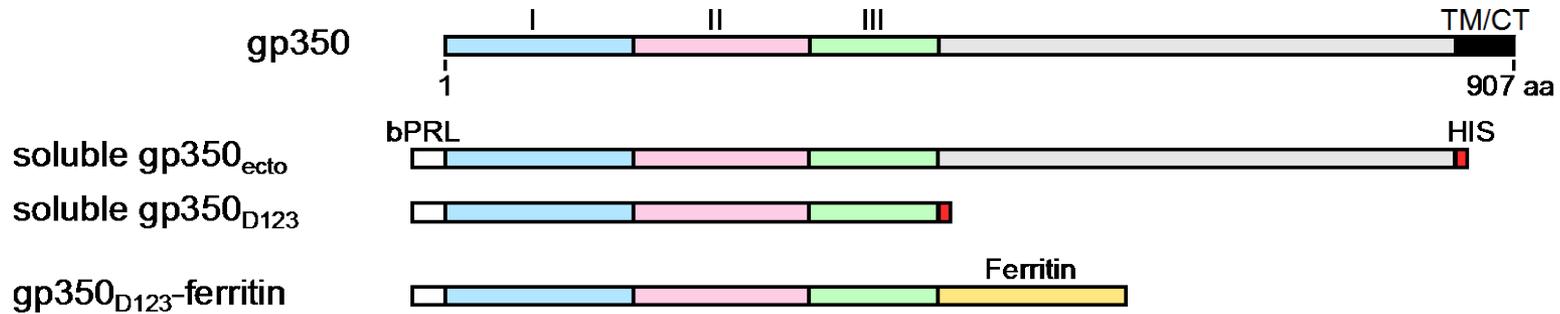
Ferritin-influenza HA induced high titer, broadly neutralizing antibodies in mice (*Kanekiyo et al Nature 2013*)



Molecular Design of EBV gp350-Nanoparticles

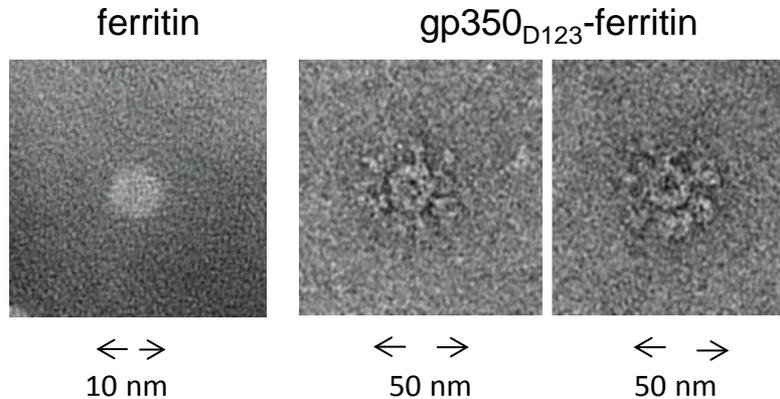


*Adapted from Szakonyi et al.
Nature Struct Mol Biol 2006*



Characterization of EBV gp350-Nanoparticles

Transmission electron microscopy



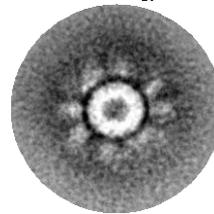
ferritin



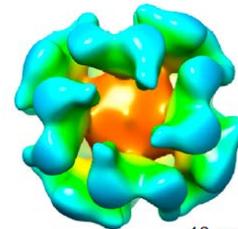
10 nm



gp350_{D123}-ferritin



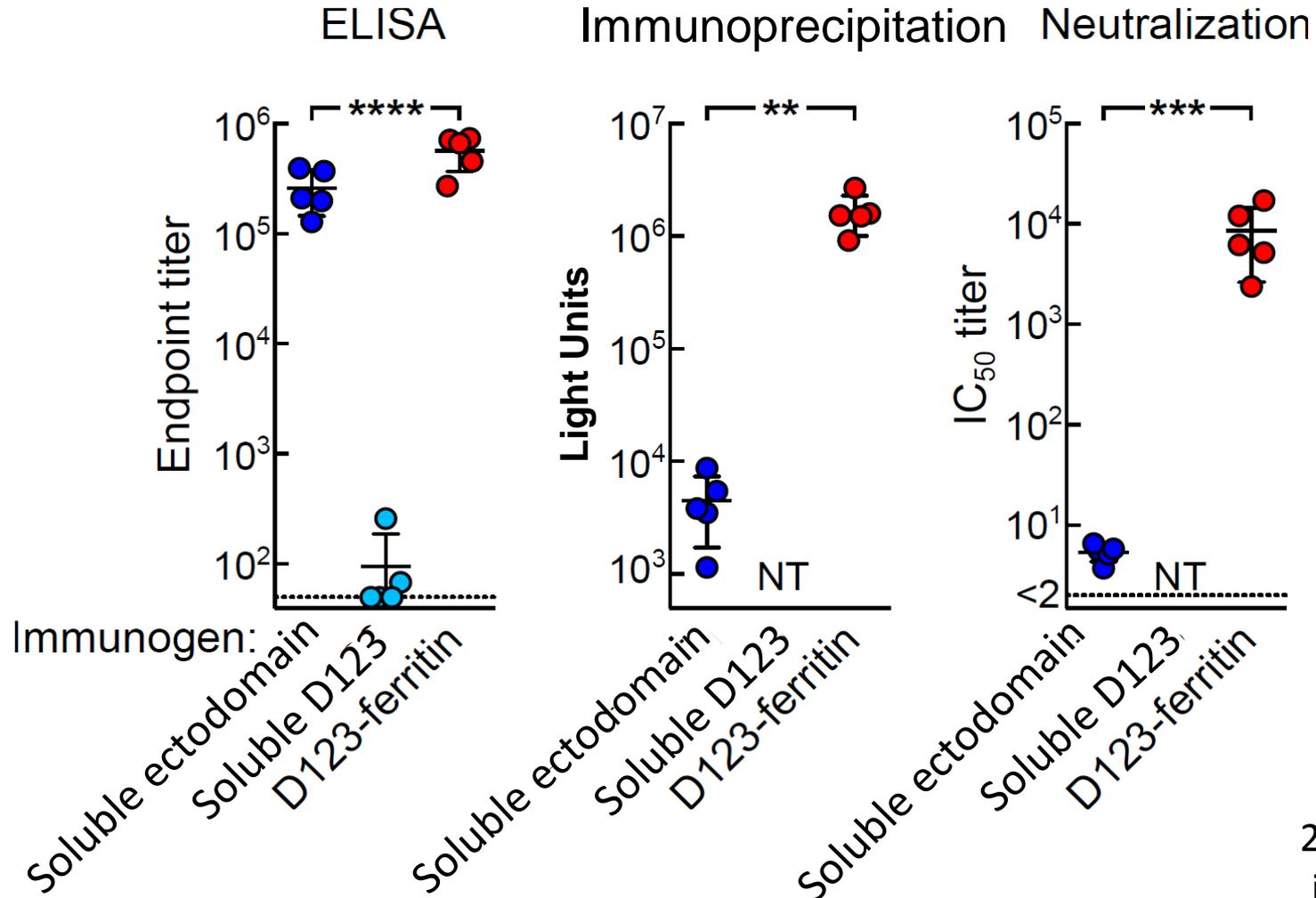
EM
2D averaged



CryoEM
reconstruction



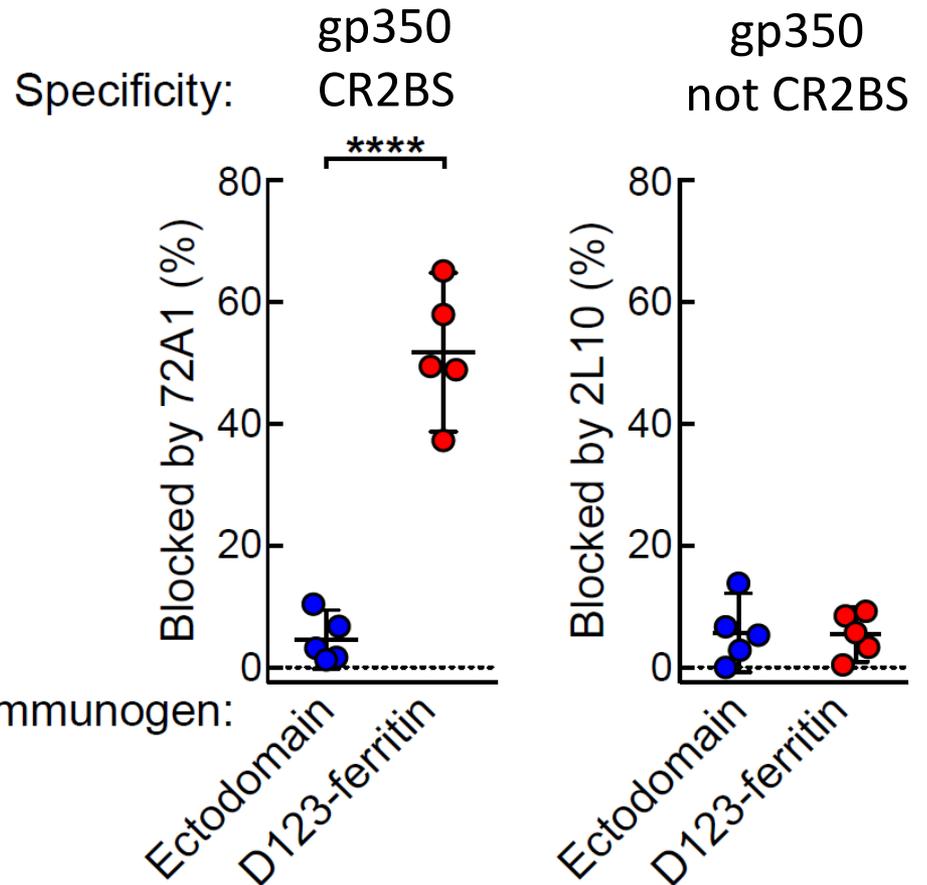
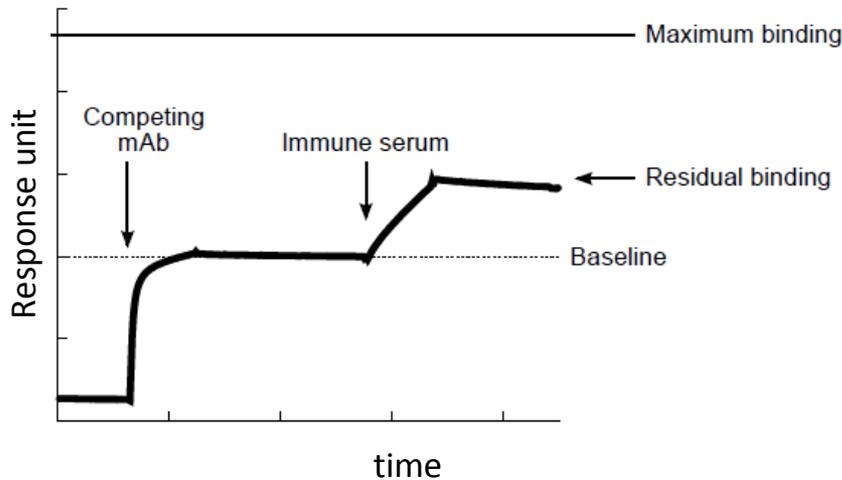
Ferritin-gp350 Induces Higher B Cell Neutralizing Titers than Soluble gp350 in Mice



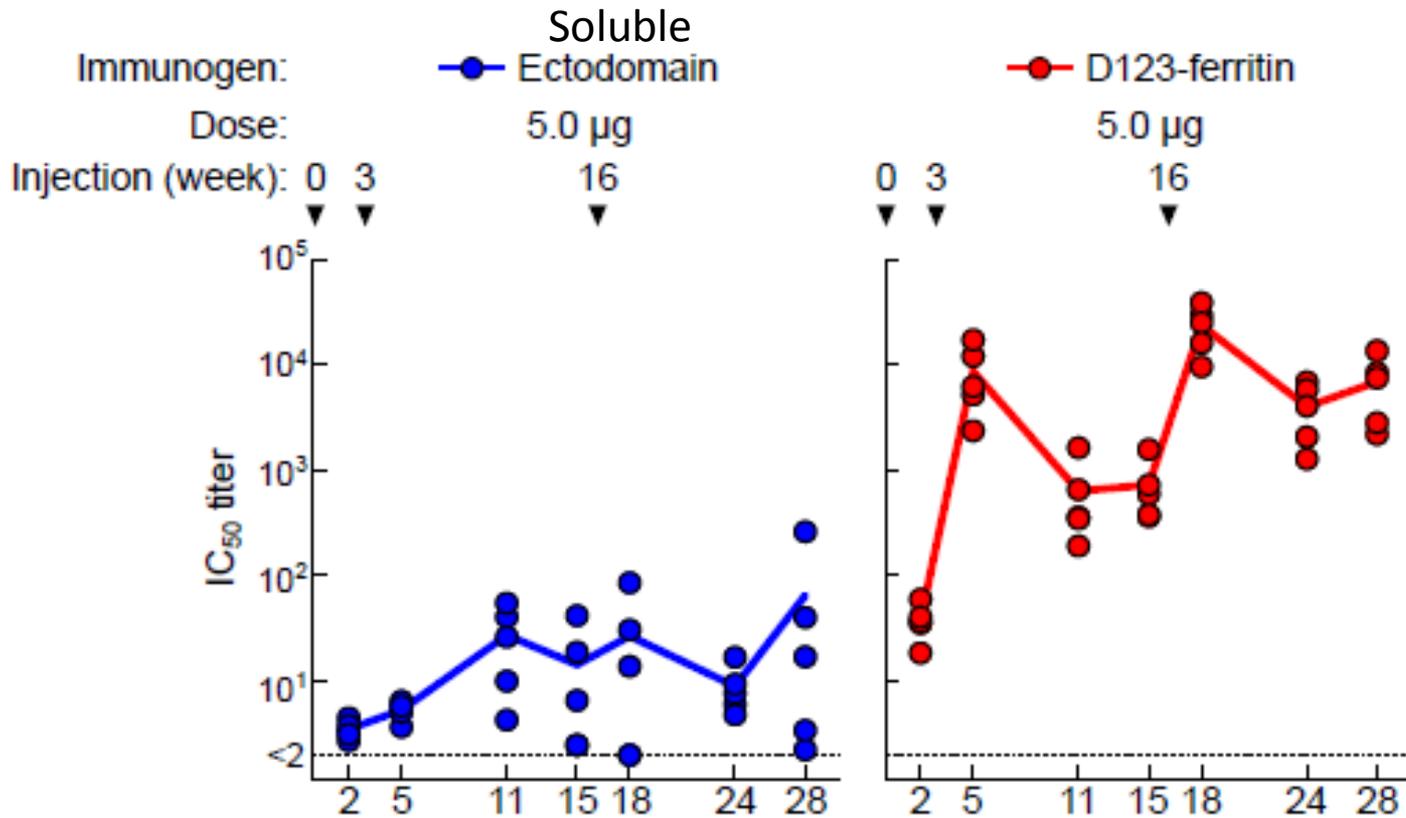
2 doses
in Ribi
adjuvant

Ferritin-gp350 Induces Higher Levels of Antibody to the CR2 Binding Site (CR2BS) than Soluble gp350 in Mice

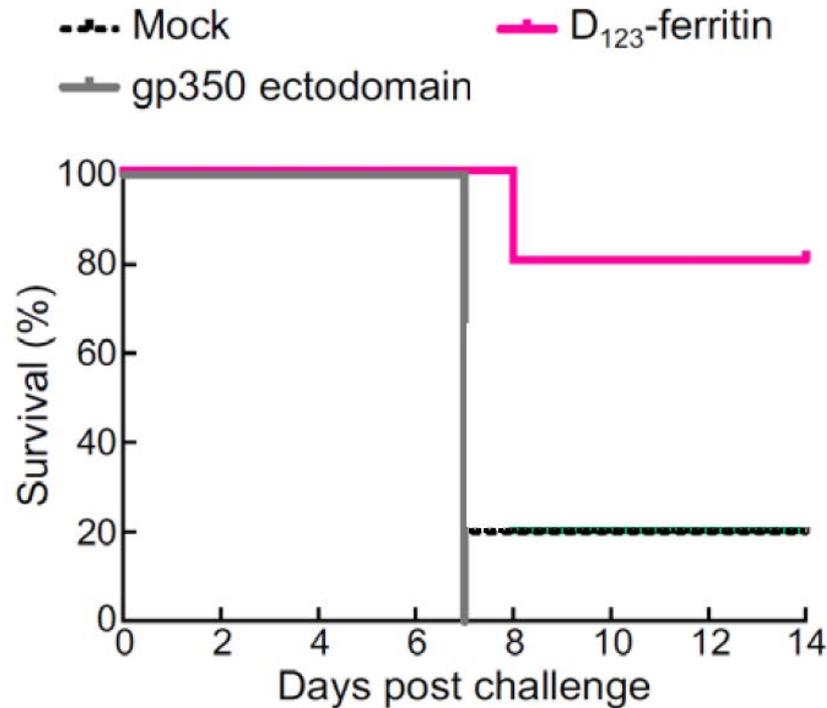
Surface Plasmon Resonance with gp350 on sensor chip



Ferritin-gp350 Neutralizing Antibody Persists for Longer than Soluble gp350 in Mice

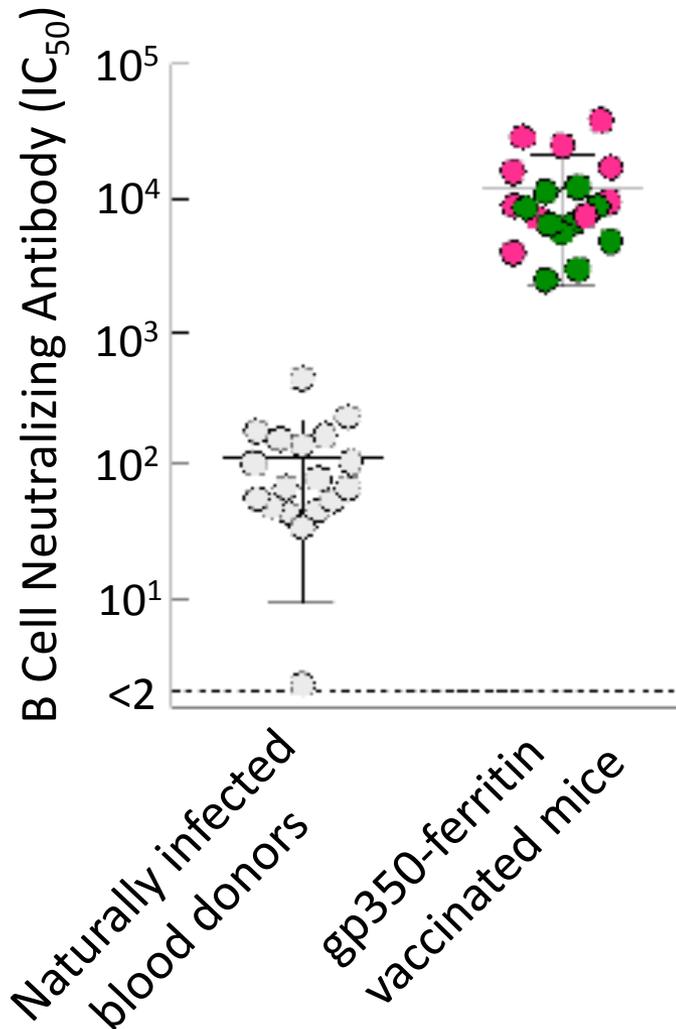


Ferritin-gp350 Protects Mice from Challenge with Vaccinia Virus Expressing gp350



	Mock	gp350 ectodomain	D ₁₂₃ -ferritin
gp350 ectodomain	ns		
D ₁₂₃ -ferritin	p = 0.0411	p = 0.0027	

Ferritin-gp350 Induces ~100-fold Higher B Cell Neutralizing Titers in Mice than Titers in Seropositive Humans



**Should Other EBV Proteins Be
Part of An EBV Vaccine?**

Predominant Cells Infected by EBV

Cell Type

B Cell

Epithelial Cell

Natural infection

Resting B cell:
primary infection
latency

Oropharynx:
primary infection
shedding

Disease

Hodgkin lymphoma
Burkitt lymphoma
Post-transplant LPD

Nasopharyngeal carcinoma
Gastric carcinoma
Oral hairy leukoplakia

Entry

Implications for EBV Vaccine

- EBV vaccine might induce antibodies to neutralize infection of both B cells and epithelial cells
 - **B cells:** prevent virus infection, latency, and lifelong infection
 - **Epithelial cells:** prevent viral infection and shedding
- To achieve this goal, EBV vaccine might be multivalent, including gp350, gH/gL \pm gp42

Summary I

Soluble gp350:

- Protects cottontop tamarins from EBV-induced lymphoma
- Reduces EBV infection in the rhesus lymphocryptovirus model and reduces viral load in animals that become infected
- Reduces the rate of infectious mononucleosis in humans, but does not prevent infection

gp350 antibodies make up the predominant neutralizing antibody components in human sera to prevent EBV infection of B cells

Summary II

Antigen (3 doses)	Neutralization titer: Nanoparticle vs. soluble glycoprotein		Neutralization titer: Nanoparticle vs. seropositive human serum	
	B cell neutralization	Epithelial cell neutralization	B cell neutralization	Epithelial cell neutralization
Ferritin-gp350	100 ×	-	200 ×	-

Potential EBV Vaccine Trials

- Prevention of infectious mononucleosis in college-aged adults
- Prevention of post-transplant lymphoma in seronegative persons about to receive hematopoietic stem cell transplant
- Prevention of disease in seronegative boys with X-linked lymphoproliferative disease
- Prevention of Burkitt lymphoma in Africa
- Prevention of Hodgkin lymphoma, nasopharyngeal carcinoma, gastric carcinoma

EBV gp350 Subunit Vaccine: Possible Outcomes in Humans

- Might not induce sterilizing immunity
- May limit level of replication and expansion of T cells during initial infection to reduce symptoms of IM
- May limit viral load setpoint after infection and reduce likelihood of PTLD
- May limit viral load setpoint after infection and reduce rate of EBV-associated malignancies (Hodgkin lymphoma, NPC, gastric carcinoma)

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