"Pathogenesis of HCV-related lymphoproliferative disorders"



Laura Gragnani





HBV & HCV- different features

HCV



- CHRONIC IN 85% OF THOSE INFECTED
- NO VACCINE AVAILABLE
- GENOME: RNA
- SEXUAL TRANSMISSION: VERY LOW RATE
- COMPLETELY ERADICABLE BY THERAPY

HBV



- CHRONIC CARRIER STATE IN 6% OF INFECTED
- VACCINE AVAILABLE
- GENOME: DNA
- SEXUALLY TRANSMITTED
- NOT COMPLETELY ERADICABLE (INTEGRATION)



HBV & HCV- similarities

HCV & HBV



- SAME HIGH TROPISM FOR LIVER CELLS (HEPATOCYTES)
- SIMILAR NATURAL HISTORY IN TERMS OF LIVER DAMAGE DURING CHRONIC INFECTION
- BOTH CAN CAUSE HEPATOCELLULAR CARCINOMA (HCC), THE MOST DIFFUSED LIVER CANCER





- MAINLY TRANSMITTED VIA BLOOD (TRANSFUSIONS, INTRAVENOUS DRUG USE, USE OF CONTAMINATED TOOLS, ETC...)
- THE GENOME IS A SINGLE STRAND-RNA
- 6 DIFFERENT GENOTYPES ARE DESCRIBED (WITH A DIFFERENT SENSIBILITY TO DRUGS)



HCV structure



VIRAL ENVELOPE

(LIPIDS &GLYCOPROTEINS)



HCV life cycle





positive-strand RNA virus

9600 nucleotides - 3011 amino acids





Progression of liver damage

PROGRESSION OF LIVER DAMAGE						
HEALTHY LIVER	FIBROTIC LIVER	CIRRHOTIC LIVER	LIVER CANCER			
A healthy liver is able to perform its normal functions effectively, e.g. aiding digestion and breaking down harmful drugs and poisons.	Continuous inflammation of the liver caused by hepatitis C can lead to fibrosis – the formation of scar tissue within the liver.	Extensive scarring can block the flow of blood through the liver and cause liver function to deteriorate over time - this is called cirrhosis.	Hepatitis C is a leading cause of liver cancer – the formation of a malignant tumour in the liver.			



- Worldwide, HCC is the 5th most common cancer and the 3rd cause of death for cancer.
- HCC generally has a fulminant course, poor response to treatment, low resectability rate, high recurrence after resection/transplantation, poor prognosis.
- More than 70% of HCCs have a viral etiology
- The great majority of HCC develops on liver cirrhosis





HCV chronic infection: more than one target cell



Courtesy of Patrice Cacoub; modified



Mixed Cryoglobulinemia - MC

• MC is a benign B-cell Lymphoproliferative Disorder (LPD) characterized by circulating Immune complexes **called cryoglobulins (CGs)**.

 The CGs include a monoclonal (Type II) or polyclonal (Type III) IgM and polyclonal IgGs.

• The IgM, with Rheumatoid Factor (RF) activity, is an autoantibody: that's why the MC is an autoimmune disorder too.





The cryoglobulins are so called because they precipitate in the blood serum when the temperature goes below 37° C



In Italy: MC-HCV+ >95%



Is the consequence of a systemic vasculitis (arterioles, capillaries, venules)

- Skin/Diffuse Vasculitis
- Joints

. . .

- MPG-nephritis
- Peripheral Neuropathy
- Lung alveolitis
- Endocrine disorders



Eradication of viral infection generally coincide with the resolution of the MC syndrome, so the first-line therapeutic option is considered the antiviral treatment.



Why is cryo-vasculitis a so important and interesting model to study?



CV IS A CLINICALLY BENIGN BUT PRELYMPHOMATOUS CONDITION:

The overall risk of NHL in HCV-infected patients with symptomatic MC is greatly increased compared to the general population (up to 35 times in an Italian multicenter study).

Monti et al. Arch Intern Med. 2005



- ✓ In 1994, a high prevalence of HCV infection in Italian patients with lymphoma was first reported in a limited cohort of patients
- ✓ In the last two decades, several pieces of evidence proved the association between HCV infection (with or without MC) and the occurrence of hematologic malignancies, mostly B-NHL
- ✓ A clear gradient of HCV-related lymphoma from North to South was also shown as for HCV infection
- ✓ Dedicated meta-analyses were able to confirm (although with different degrees), an increased risk of lymphoma in HCV infected subjects

Ferri C. et al, 1994; Zuckerman E. et al, 1997; de Sanjose S. et al, 2008; Hausfater P. et al, 2001; Gisbert P et al, Gastroenterology, 2003; Matsuo K et al, 2004; Negri E. et al, 2004; Dal Maso L. et al, 2006



HCV chronic infection & lymphoma

Table 1 Infections associate	d with non-Hodgkin lymphoma				
Infectious agent	Lymphoma subtype				
Lymphocyte-transforming viruses					
Epstein-Barr virus	Burkitt lymphoma				
	AIDS-associated NHLs				
	(especially CNS NHL, DLBCL)				
	Posttransplant lymphoproliferative				
	disorder				
	Extranodal NK/T-cell NHL				
Human herpesvirus 8	Primary effusion lymphoma and				
	related DLBCLs				
	MCD-associated plasmablastic NHL				
Human T lymphotropic	Acute T-cell leukaemia/lymphoma				
virus type I					
Agents that cause immunosuppression					
Human immunodeficiency	AIDS-associated NHLs				
virus					
Agents that cause chronic immune stimulation					
Plasmodium falciparum	Burkitt lymphoma				
Hepatitis C virus	DLBCL, lymphoplasmacytic NHL,				
	marginal zone NHL				
Hepatitis B virus	Uncertain				
Helicobacter pylori	Gastric MALT NHL				
Campylobacter jejuni	Small intestine MALT NHL				
Chlamydia psittaci	Ocular adnexa MALT NHL				
Borrelia burgdorferi	Cutaneous MALT NHL				

NHL, non-Hodgkin lymphoma; AIDS, acquired immunodeficiency syndrome; CNS NHL, central nervous system non-Hodgkin lymphoma; DLBCL, diffuse large B cell lymphoma; MCD, multicentric Castleman disease; MALT, mucosa-associated lymphoid tissue.

Symposium

G Journal of INTERNAL MEDICINE

doi: 10.1111/j.1365-2796.2008.02031.x

Infectious aetiology of Hodgkin and non-Hodgkin lymphomas: a review of the epidemiological evidence

• H. Hjalgrim¹ & E. A. Engels²



Hepatitis C virus

DLBCL, lymphoplasmacytic NHL, marginal zone NHL

HCV related LPDs: a multifactorial pathogenesis



Zignego AL, Autoimmunity Rev. 2017



The HCV lymphotropism



The ability of HCV to infect lymphoid cells was widely discussed.





- ✓ Technical problems in identifying HCV-RNA replicative intermediate in PBMCs;
- ✓ Extracellular HCV-RNA contamination.

Zignego AL et al. J Hepatol 1992; Zignego AL et al. J Med Virol 1995; Zignego AL et al DLD 2007.

HCV lymphotropism

nature

ARTICLE

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DOI: 10.1038/ncomms13882 OPEN

Hepatitis C virus has a genetically determined lymphotropism through co-receptor B7.2

Chia-Lin Chen¹, Jeffrey Y. Huang¹, Chun-Hsiang Wang¹, Stanley M. Tahara¹, Lin Zhou¹, Yasuteru Kondo¹, Joel Schechter², Lishan Su³, Michael M.C. Lai^{1,4}, Takaji Wakita⁵, François-Loïc Cosset⁶, Jae U. Jung¹ & Keigo Machida¹



... from a lymphoma patient



HCV lymphotropism

Between the SB and JFH1 strains, were found:

- Differences in viral evelope sequence (coding for E1 and E2 proteins)
- Five nucleotide differences within 5' UTR

These differences mean that a specific HCV strain has a genetically determined lymphotropism





Summarizing...

- In this study, was established the genetic basis for lymphotropism of HCV infection;
- The viral envelope and 5' -UTR sequences of the lymphotropic HCV strain were responsible for the lymphotropism;
- B7.2 (CD86) is a co-receptor for observed HCV SB strain tropism towards memory B cell.



Notch family genes



NOTCH family

Notch is an evolutionally conserved signaling pathway consisting, in humans of a family of four transmembrane receptors and five ligands that allow cellcell communication.

> D'Souza et al, Curr Top Dev Biol 2010; Kovall et al, Curr Top Dev Biol 2010





- ✓ The role of Notch has been well characterized in the development of different tissues such as the processes of hematopoiesis and angiogenesis.
- ✓ This highly coordinated signaling system controls many aspects of cell biology, including differentiation, proliferation and death.
- ✓ Importantly, the role of aberrant Notch signaling, i.e. due to DNA mutations, was reported in hematological malignancies.

Karanu et al, Leukemia 2003; Pancewicz et al BMC cancer 2011; Vercauteren et al, Blood 2004; Willander K, et al, BMC Cancer 2013

Notch genes germ line and somatic mutations also seem to be involved in HCV-related lymphoma pathogenesis



A genome-wide association study





- 899,641 markers from the Illumina HumanOmni1-Quad chip were analyzed
- 356 HCV RNA positive individuals with MC-related vasculitis
- 447 ethnically-matched, HCV RNA positive controls
- Replication of select SNPs was conducted using 91 cases and 180 controls

A genome-wide association study

chromosome 6 analysis



Independent signals are found at NOTCH4 and HLA-human leukocyte antigen -DRB1/DQA1

HLA-DRB1/DQA1-rs9461776

Each additional copy of the risk allele (G) was associated with 2.14 times the odds of MC-related vasculitis.

notch 4-rs2071286

The notch 4 (rs2071286) conferred 2.16 times the odds of having MC-related vasculitis

Zignego AL et al, Genes & Immunity 2014



NOTCH mutations in HCV-NHL: our experience

www.impactjournals.com/oncotarget/

Oncotarget, Advance Publications 2017

Notch4 and mhc class II polymorphisms are associated with hcv-related benign and malignant lymphoproliferative diseases

Laura Gragnani^{1,*}, Elisa Fognani^{1,*}, Valli De Re², Massimo Libra³, Adriana Garozzo³, Patrizio Caini¹, Guia Cerretelli¹, Andrea Giovannelli¹, Serena Lorini¹, Monica Monti¹, Silvia Bagnoli⁴, Irene Piaceri⁴, Anna Linda Zignego¹



Figure 1: (Panel A) NOTCH4 rs2071286 allele frequency; *p = 0.004; **p = 0.0002; ***p = 0.0006; (Panel B) NOTCH4 rs2071286 genotype frequency; °p = 0.008; °°p = 0.0122; °°°p = 0.006.

✓ Significant association between rs2071286 MAF with increased risk for NHL

✓ Potential usefulness as non-invasive lymphoma risk markers in HCV+ patients



NOTCH family mutations in lymphomas

The coding genome of splenic marginal zone lymphoma: activation of *NOTCH2* and other pathways regulating marginal zone development JE_{2012} Rossi D. et.

- \checkmark Mutations in NOTCH family genes have been found in 30% of SMZL cases
- ✓ NOTCH2, a gene required for marginal-zone (MZ) B cell development
- \checkmark NOTCH2 mutations are the most frequent lesions in SMZL, accounting for

 $\sim 20\%$ of cases



NOTCH2 mutations are specific for SMZL, very rare in DLBCL, not present in other histotypes



NOTCH family mutations in HCV-lymphomas

OVERALL, THIS DATA SUGGESTS THAT AT LEAST A FRACTION OF HCV-POSITIVE DLBCL MAY REPRESENT THE TRANSFORMED PHASE OF AN MZL CLONE OR THE COEXISTENCE OF HIGH AND LOW GRADE COMPONENTS.



Epigenetic regulation: role of miRNAs



BINDING TO A COMPLEMENTARY mRNA OF A TARGET GENE THE microRNA INDUCES ITS DEGRADATION AND PREVENT THE FINAL PROTEIN EXPRESSION.





Pauley 2009, J. Autoimmunity



The epigenetic issue-the microRNAs

Dysregulation of global microRNA expression in splenic marginal zone lymphoma and influence of chronic hepatitis C virus infection

J Peveling-Oberhag^{1,2}, G Crisman³, A Schmidt⁴, C Döring², M Lucioni⁵, L Arcaini⁶, S Rattotti⁶, S Hartmann², A Piiper¹, W-P Hofmann¹, M Paulli⁶, R Küppers⁴, S Zeuzem¹ and M-L Hansmann²

OUR EXPERIENCE:

The down-regulation of mir-26b in PBMC from both HCV-NHL and CV patients

&

the restoration of mir-26b levels after the virological and clinical resolution of $\ensuremath{\mathsf{CV}}$



miR26-b

SUGGEST:

- A role in pathogenesis of HCV-related lymphoproliferation
- A prognostic value (evolution/response to therapy)



The epigenetic issue-the microRNAs



miR-16

*p < 0.01 °p < 0.05

the up-regulation of

miR-16, miR-21 and miR-155

in PBMCs from HCV-NHL but not in HCV-CV and healthy subjects



SUGGESTS:

- A role in HCV-related lymphomagenesis
- A prognostic value

Summary of deregulated miRNAs



GREEN not deregulated compared to controls **RED** deregulated (up- or down-) compared to controls

Chronic antigenic stimulation & The role of viral proteins



HCV-related LPDs are characterized by the **clonal expansion of B-cell populations**, mostly in the liver and, less frequently, in the bone marrow or blood

Sansonno et al 1998; Racanelli et al. 2001

The similarities in rearranged Ig genes present in B-cells from MCS patients and from HCV B-cell NHL suggest that **the antigens involved in promoting type II MCS are the same as those involved in B-cell NHL development**

Ivanovski et al 1998; De Re et al. 2000

The HCV E2 and NS3 proteins were proposed as the potential antigens sustaining the expansion of B cell population in different LPDs Quinn et al 2001; De Re et al. 2006



Chronic antigenic stimulation



2014 123: 1512-1515 doi:10.1182/blood-2013-10-532895 originally published online January 21, 2014

B-cell receptors expressed by lymphomas of hepatitis C virus (HCV)infected patients rarely react with the viral proteins

Patrick P. Ng, Chiung-Chi Kuo, Stanley Wang, Shirit Einav, Luca Arcaini, Marco Paulli, Carol S. Portlock, Joseph Marcotrigiano, Alexander Tarr, Jonathan Ball, Ronald Levy and Shoshana Levy

- ✓ seem to exclude the dependence of lymphoma cell BCR from viral antigens,
- confirmed that HCV positive lymphoma cells use a restricted repertoire of Ig variable genes;
- ✓ failed in attributing to their BCR a specificity against viral antigens.



HCV and BCR

OPEN

ORIGINAL ARTICLE



Oncogene (2016) 35, 2979–2990 © 2016 Macmillan Publishers Limited All rights reserved 0950-9232/16



www.nature.com/onc

Hepatitis C virus upregulates B-cell receptor signaling: a novel mechanism for HCV-associated B-cell lymphoproliferative disorders

B Dai¹, AY Chen², CP Corkum², RJ Peroutka¹, A Landon¹, S Houng¹, PA Muniandy¹, Y Zhang³, E Lehrmann³, K Mazan-Mamczarz¹, J Steinhardt¹, M Shlyak⁴, QC Chen⁵, KG Becker³, F Livak¹, Tl Michalak², R Talwani⁴ and RB Gartenhaus^{1,6}

✓ Confirmed the expression of HCV viral proteins in B cells of HCV-infected patients;

✓ Show that HCV upregulates BCR signaling in human primary B cells.

Proposed mechanism for HCV B-cell LPDs



✓ HCV NS3 interacts with CHK2 and downregulates CHK2 activity;

 This repressed CHK2 activity modulates HuR posttranscriptional regulation of target mRNAs associated with B-cell LPDs, preferentially those involved in the BCR signaling pathway.



Chronic antigenic stimulation

OPEN



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Hepatitis C virus upregulates B-cell receptor signaling: a novel mechanism for HCV-associated B-cell lymphoproliferative disorders

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- ✓ It is plausible that HCV potentially transforms cells by a 'hit and run' mechanism;
- ✓ HCV may initially stimulate B-cell proliferation;
- ✓ The transformed B cells no longer require continuous HCV stimulation and their BCRs may have undetectable reactivity with HCV.



A direct oncogenic potential: an old in vitro study



Hepatitis C virus induces a mutator phenotype: Enhanced mutations of immunoglobulin and protooncogenes PNAS, 2004

Keigo Machida*, Kevin T.-N. Cheng*, Vicky M.-H. Sung*, Shigetaka Shimodaira*, Karen L. Lindsay†, Alexandra M. Levine⁺, Ming-Yang Lai⁺, and Michael M. C. Lai*§



in vitro infection of different B-cell lines and PBMCs from donors

HCV INFECTION INDUCES A MUTATOR PHENOTYPE

WHICH INVOLVES ENHANCED SOMATIC MUTATIONS OF MANY GENES.



HCV INDUCES:

Mutation frequencies of cellular genes in HCV-infected cells

	HCV(-)*		HCV(+)	
Locus	Clones mutated†	Mutation frequency × 10 ⁻⁴	Clones mutated†	Mutation frequency × 10 ⁻⁴
VH				
Raji	2/20	2.5	11/20	17.3
TL	1/20	1.2	6/20	9.9
BCL-6 (area B)				
Raji	0/20	0	8/20	8.3
TL	1/20	0.7	7/19	7.3
PBMC	2/54	0.8	27/80	6.4
PBMC (area A)	-	-	9/72	3.7
P53				
Raji	0/30	05	4/30	6.7
TL	0/33	0	6/26	11.5
PBMC	1/172	0.3	36/400	4.6
β-catenin				
Raji	0/20	0	5/20	5.6
JT	0/19	0	6/18	7.4
PBMC	2/60	0.7	20/64	7.8
β-globin				
Raji	0/21	0	4/21	3.6
JT	0/24	0	6/24	4.7
PBMC	1/56	0.6	8/58	4.2

- AN ERROR-PRONE DNA POLYMERASE
- ACTIVATION-INDUCED CYTIDINE DEAMINASE (AID)
- which together, contributed to the enhancement of mutation frequency

HCV MAY CAUSE TUMOR FORMATION BY A HIT-AND-RUN MECHANISM.

Machida K et al, PNAS 2004



HCV direct oncogenic potential - in vivo studies

Persistent expression of the full genome of hepatitis C virus in B cells induces spontaneous development of B-cell lymphomas in vivo

*Yuri Kasama,¹ *Satoshi Sekiguchi,² Makoto Saito,¹ Kousuke Tanaka,¹ Masaaki Satoh,¹ Kazuhiko Kuwahara,³ Nobuo Sakaguchi,³ Motohiro Takeya,⁴ Yoichi Hiasa,⁵ Michinori Kohara,² and Kyoko Tsukiyama-Kohara¹



2010



TRANSGENIC MICE EXPRESSING:

- full length of viral genome (all the HCV proteins)
- expressed only in B-lymphocytes (cre-lox mice)
- under control of CD19 promoter

SHOWED A 25% INCIDENCE OF DLBCL



Summarizing the in vivo-studies...



Review Article Hepatitis C Virus-Related Lymphomagenesis in a Mouse Model

Kyoko Tsukiyama-Kohara,¹ Satoshi Sekiguchi,² Yuri Kasama,¹ Nagla Elwy Salem,^{1, 3, 4} Keigo Machida,⁵ and Michinori Kohara² ISRN Haematology, 2011

- extremely high incidences of lymphomas and lymphoproliferative disorders;
- expression of HCV genes in all the lymphoma cells;
- increased levels of BCL-2 expression, which promoted oncogenic transformation of lymphocytes;
- increased levels of interleukin 10 and 2 (IL-10 & IL-2).



A direct role of NS3 protein in human NHL

NEGATIVE STAINING: MZL

STRONG STAINING: DLBCL

PLOS ONE

2016

In Situ Hepatitis C NS3 Protein Detection Is Associated with High Grade Features in Hepatitis C-Associated B-Cell Non-Hodgkin Lymphomas

Danielle Canioni^{1 ©} *, Jean-Marie Michot^{2©}, Pascaline Rabiega³, Thierry J. Molina¹, Frédéric Charlotte⁴, Thierry Lazure⁵, Frédéric Davi⁶, Catherine Settegrana⁶, Françoise Berger⁷, Laurent Alric⁶, Patrice Cacoub⁹, Benjamin Terrier⁸, Felipe Suarez^{10,11}, David Sibon^{10,11}, Jehan Dupuis¹², Cyrille Feray¹³, Hervé Tilly¹⁴, Stanislas Pol¹⁵, Bénédicte Deau Fischer¹⁶, Sandrine Roulland¹⁷, Catherine Thieblemont¹⁸, Véronique Leblond¹⁹, Fabrice Carrat³, Olivier Hermine^{10,11‡}*, Caroline Besson^{20‡}*, national ANRS HC13 LymphoC study¹⁰



WEAK STAINING: MZL

STRONG STAINING: MZL ENRICHED IN LARGE CELLS

 In situ expression of the oncogenic HCV NS3 protein on HCV patients with B-NHL (DLBCL and MZL)

NS3 immunostaining positive in 12/14 DLBCL vs only 4/14 MZL (p = 0.006); moreover, 2/4 NS3+
MZL were enriched in large cells

This study supports a new mechanism of transformation with a direct oncogenic role of HCV proteins in the occurrence of high-grade B lymphomas



PLUS R-CHOP

Thank you for your attention!