71

Antiviral Effect of Ingenol and Gingerol During HIV-1 Replication in MT4 Human T Lymphocytes

Hak Sung Lee*, Sung-Soon Kim, Gab Jung Kim, Joo-shil Lee, Eun-Jin Kim, Kee-Jong Hong

Korea Institute of Health, Seoul, Republic of Korea

We tested various natural products to screen the novelantihuman immunodeficiency virus type 1 (HIV-1) agents. Among 17 natural products, ingenol purified from Euphorbiaingens and gingerol derived from Zingiber officinale showed inhibitory function against HIV-1 replication during various stages of the virus life cycle in infected MT4 human T lymphocytes. Cell viability of MT4 cell was measured after 24 h, and Anti-HIV infection activity was measured after 6-day infection of HIV-1 in presence of serially diluted ingenol and gingerol. MT4 cells were infected with HIV-1 (IIIB) at multiplicity of infection (MOI 0.002–0.016) with 1.95–250 µM ingenol and gingerol. Cell cycle and apoptosis levels were measured using propiodiumiodide (PI), Anexin V staining methods after 3- or 6-day infection. Both ingenol and gingerol effectively maintained high cell viability. CD50 of ingenol was >1 mM for ingenol and 587.5 µM for gingerol. ED50 of ingenol was 5.06 uM for 100 TCID, 16.87 µM for 200 TCID of HIV-1. ED50 of gingerol for 100 TCID and 200 TCID were not reached 50% effective dose. Interestingly, anti-HIV infection activity of ingenol showed 20% lower than control of Azidothymidine (AZT) treatment. Viral p24 antigen was not remarkably reduced by ingenol or gingerol, either IFN-γ production was not induced at sixth day after HIV-1 infection. As a result, ingenol and gingerol help CD4+ T cells to maintain high cell viability against HIV-1 infection without ruling viral replication, and both can be considered as safe and effective candidates for immune boosting therapy for AIDS patients.

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72

Cystatin B Associates with STAT-1 in Monocyte-derived Macrophages and Placental Macrophages: A Possible Link to HIV Activation

Claribel Luciano-Montalvo*, Loyda Melendez-Guerrero

University of Puerto Rico, Medical Sciences Campus, San Juan, USA

Cystatin B, a cysteine proteinase inhibitor has been found to induce nitric oxide production in macrophages and secreted in HIV infected monocyte-derived macrophages (MDM) supernatants. We found increased intracellular levels of cystatin B in HIV-infected MDM when compared with uninfected cells. Cystatin B was even higher in both uninfected and HIV-infected MDM when compared to uninfected and HIV-infected placental macrophages where HIV replication is restricted compared to MDM. We wanted to elucidate the signaling pathway that could play a role in viral replication or cell activation upon HIV infection of PM and MDM. We analyzed cystatin B after

immunoprecipitation of uninfected and HIV-infected MDM and PM cell culture lysates with a specific anti-cystatin B monoclonal antibody. Using western blotting the immunoprecipitated cystatin B was tested for STAT activation with anti-STAT-1, STAT-3, and STAT-5 antibodies. We found that STAT-1 co-immunoprecipitated with cystatin B. Our study demonstrated the direct interactions of cystatin B and STAT-1 suggesting a possible mechanism for nitric oxide activation. We posit that STAT-1 interaction with cystatin B can enhance viral replication by increasing levels of nitric oxide. Therefore the study of STAT-1 in the context of cellular interaction with other proteins during the HIV infectious process could shed important information for the development of future antiviral therapies.

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73

Use of AX-4 Cells for the Study of the Pharmacodynamics of Oseltamivir Carboxylate for Influenza Viruses in an *In Vitro* Hollow Fiber Infection Model System

James McSharry*, Qingmei Weng, Kate Soldani, Kris Zager George Drusano Ordway Research Institute, Albany, USA

MDCK cells have been used to determine the susceptibilities of influenza viruses to antiviral drugs. However, MDCK cells gave variable results when determining the susceptibilities of influenza viruses to neuraminidase inhibitors. To avoid this problem, we obtained MDCK cells transfected with the human β -galactoside α -2,6-sialyltransferase 1 gene (AX-4 cells) to determine the drug susceptibilities of influenza viruses to neuraminidase inhibitors. We also used these cells to determine the pharmacodynamically linked variable of oseltamivir carboxylate for influenza viruses in our in vitro hollow fiber infection model system. For dose ranging studies, six hollow fiber units were charged with 10² virus infected AX-4 cells and 10⁸ uninfected AX-4 cells. Each unit was continuously infused with a different concentration of drug for 6 days. For dose fractionation studies, five hollow fiber units containing 10² virus infected AX-4 cells and 10⁸ uninfected AX-4 cells were set up. One unit received no drug, one unit received 2× EC₅₀ oseltamivir carboxylate by continuous infusion, one unit received the same AUC by bolus once daily, one unit received the same total dose in two equal fractions every 12h, and one unit received the same dose in three equal fractions every 8 h. Each dose was followed by a no drug washout with the appropriate half-life for this drug. The dose fractionation experiment was carried out for 6 days. The effect of drug on virus replication was determined by sampling the units once a day and measuring the amount of infectious virus present by plaque assay. The dose ranging study performed in the hollow fiber infection model system showed that the EC₅₀ value for oseltamivir carboxylate for this influenza A virus was 0.05 nM. The dose fractionation study showed that all treatment arms suppressed virus replication by essentially the same extent suggesting that the pharmacodynamically linked variable was the AUC₀₋₂₄/EC₅₀ ratio. These results suggest that AX-4 cells expressing high levels of sialyl-2,6-galactose receptors may be useful for determining the pharmacodynam-