

HIV INFECTION & AIDS

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HUMAN IMMUNE

DEFICIENCY VIRUS

LEARNING OBJECTIVES

- Discuss the replicating cycle of HIV
- Describe entry, spread and pathogenesis of HIV infection
- Explain the role of T Helper cells in normal immune amplification and effects of low number of T Helper cells in HIV infection

- **HIV-GENERAL DESCRIPTION**

- Family Retroviridae
- Genus Lentivirus-Slow virus
- HIV-1 & 2
- Enveloped RNA virus
- Envelop from host cell memb
- Only virus that has RNA dependent DNA polymerase- called reverse transcriptase
- Retrovirus

- **HIV STRUCTURE**

- Envelop
- Has gp120 (surface) & gp41 (transmembrane)
- Icosahedral p24 capsid protein
- 2 copies of single stranded RNA
- Essential enzymes

- Reverse transcriptase
- Integrase
- Protease

- **HIV REPLICATION**

- **TRANSMISSION OF HIV**

- Sexual route-MSM
- Transfer of infected blood
- Perinatal transmission ~50% in neonatal disease
- Post natal transmission-Breast milk
- Concurrent STI increase the transmission
- Uncircumcised-↑ transmission
- Saliva, tears-No transmission
- Not transmitted by casual contact

- **TRANSMISSION OF HIV**

- Transmission via blood transfusion much decreased
- Window period-antibodies not detected
- Check p 24 antigen in blood or HIV RNA
- Eclipse period-when HIV is inside tissue and not in blood lasts for few weeks

• **PATHOGENESIS**

- HIV enters through cuts/ abrasion
- Mucosal infection
- Macrophage ingest
- Migrate to local lymph nodes
- Dendritic cells in follicular region-form reservoir of HIV particle
- CD4 cells infected from dendritic cells in lymph nodes
- Gp120- binds CD4, CCR5, CXCR4 co-receptor

- **PATHOGENESIS**

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- Viremia
- Drop in CD 4 count
- Widely disseminated
- Lymphoid organs seeded
- Acute mononucleosis like syndrome
- Strong immune response against HIV
- Viremia drops, CD 4 count rebound

- **PATHOGENESIS**

- Immune system- cannot clear virus
- Latency period for 10 years
- CD 4 count dropping slowly
- 10 billion HIV particles are produced and destroyed each day
- Rapid production of HIV viroin
- High error rates in HIV
- Immune system collapses

- **PATHOGENESIS**

- Cytotoxic T cell response effective
- HIV induces down-regulation of MHC-1 molecules
- Up-regulates FasL on target cell
- Dendritic cells maturation effected
- Limited antigen presentation

• **PATHOGENESIS**

- Ultimately immune system cannot keep pace
- It fails
 - Low CD4 Count
 - CD 8 cells become non responsive due to high mutation & ↓ help from CD 4
 - High virus load in blood
 - Opportunistic infections
 - Ultimately death

• **ROLE OF T HELPER CELLS**

- Helper T Cells activated by
 - APC that present exogenous antigen

- Virally infected cells that present endogenous made antigen
 - CD4+ cells activate
- Themselves & increase numbers
- Memory cells CD4+ & CD8+
- Macrophages & Neutrophils
- Cytotoxic T cells
- B cells
- NK cells

- **ROLE OF T HELPER CELLS**

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- Activated macrophages, CD8+ cells further activate CD4+ cells
- It is central in the immune response regulation
- Immune response is amplified
- Cytokines like Interleukins control the differentiation
- The adequate number of CD4+ cells is crucial in immune amplification

- **HIV & T HELPER CELLS**
- **HIV & IMMUNE DEFICIENCY**

Mechanism of immune suppression in HIV

- Direct lysis of CD4+ cells
- Virus induces apoptosis in CD4+ cells
- CD8+ cells attack CD4+ cells
- T cells replenishment impaired by stem cell infection
- Defect in antigen presentation due to infection of dendritic cells
- Immunosuppressive viral coated molecules (e.g. gp120, gp41)